



The Journey Continues

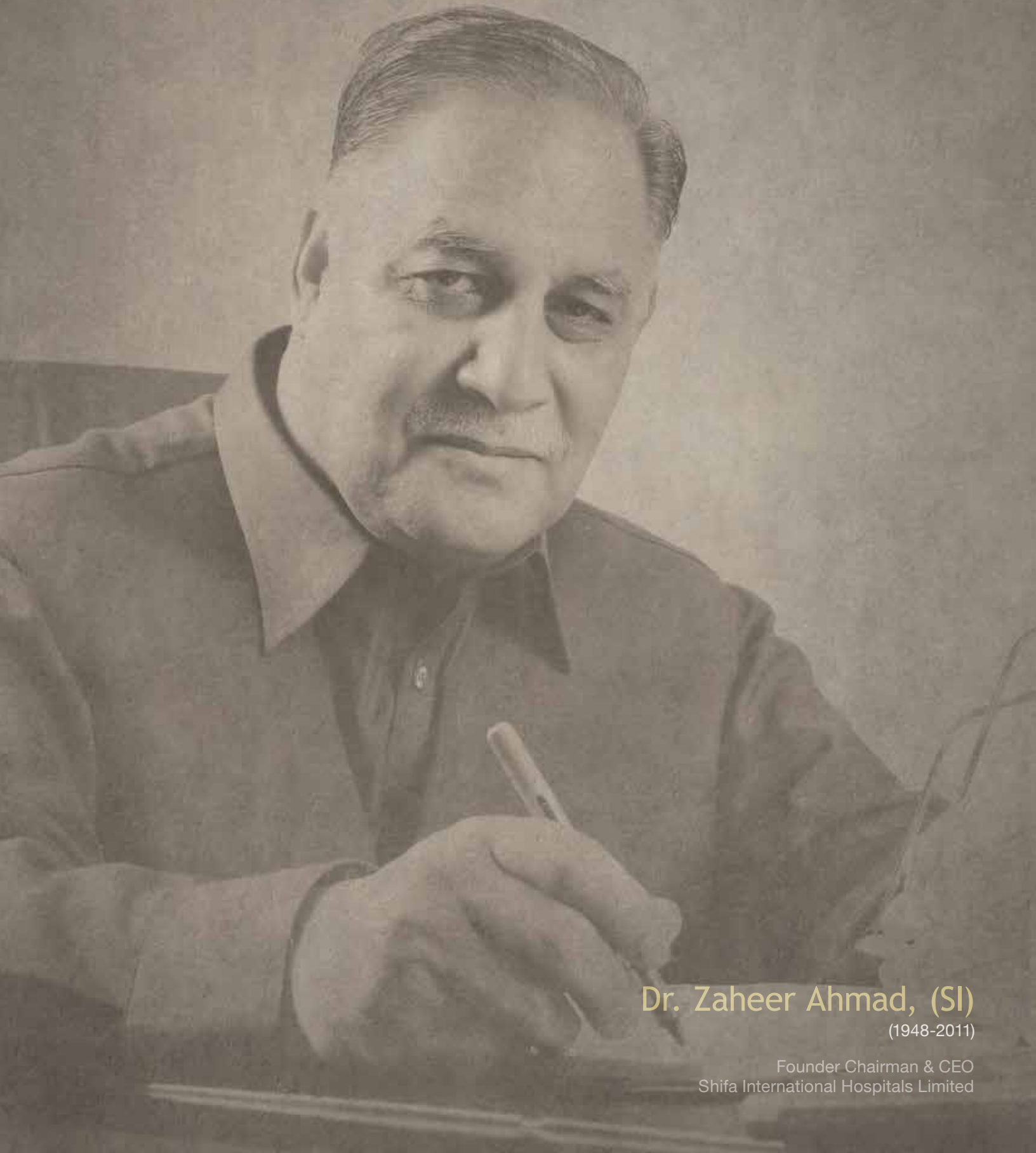
Corporate Report 2012



بِسْمِ اللّٰهِ الرَّحْمٰنِ الرَّحِیْمِ

In the name of Allah, the most Benevolent and Merciful

The Visionary



Dr. Zaheer Ahmad, (SI)
(1948-2011)

Founder Chairman & CEO
Shifa International Hospitals Limited

The way they saw him...

“Dr Zaheer was not born with a silver spoon in his mouth. Whatever he achieved was through his dedication, effort and continuous hard work”.

Dr Zafar Ishaq Ansari

Vice President, IIUI

“Religion was Dr Zaheer’s motivational force. His inspiration from it made him do such noble work”.

Qazi Hussain Ahmad

Politician

“Dr Zaheer had a great quality of making friends and even holding on to them. He never broke relations”.

Dr Manzoor-ul-Haq Qazi

CEO SIH

“Dr Zaheer was a practical example for us because of his hard work and consistency. I was fortunate enough to be a companion of such a person in this difficult journey”.

Dr Habib-Ur-Rehman

Chairman SIH

“Dr Zaheer’s humbleness was exemplary. His attire, talk and attitude had a natural chasteness”.

Syed Talat Hussain

Journalist

“A perfectionist who tried his best to do things immaculately. And always wanted people to benefit from it”.

Dr Abdul Qadeer Khan

Scientist

“It is Allah’s grandeur that a child (Dr Zaheer) who had studied in a taat school got most opportunities to work for the betterment of his country”.

Dr Ijaz Shafi Gillani

Gallup Pakistan

“He had high aims and wanted to do a lot of work. His death is a great loss”.

Prof Chaudhary Attaullah Joharabad

Akaamati educational institution, Khushab

“Personal growth for him was not enough. He always thought of progress in national terms.

He was ever ready to spread the light that was inside him for nation’s progress”.

Prof Shahnaz Rauf

Educationist

“Dr Zaheer was known as a visionary. But I think he was a lot more than that”.

Dr Naeem Ghani

Sultana Foundation

“Dr Zaheer did not stop after accomplishing success in terms of Shifa International Hospital. I always felt the heat of passion inside him which continuously led him to see things ahead”.

Mushahid Hussain

Politician

“He always desired to help people become independent and supported countless poor children with this aim in education.”

Mr. F. M. Rashid

Chairman Tameer-e-Millat Foundation

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Company Information

BOARD OF DIRECTORS

Dr. Habib-Ur-Rehman	<i>Chairman</i>
Dr. Manzoor H. Qazi	<i>CEO</i>
Mr. Muhammad Zahid	<i>Director</i>
Dr. Abdul Razaq	<i>Director</i>
Dr. Saeed A. Bajwa	<i>Director</i>
Dr. Mohammad Salim Khan	<i>Director</i>
Mr. Shafquat Ali Chaudhary	<i>Director</i>
Shah Naveed Saeed	<i>Director</i>
Mr. Qasim Farooq Ahmad	<i>Director</i>
Dr. Samea Kauser Ahmad	<i>Director</i>

AUDIT COMMITTEE

Shah Naveed Saeed	<i>Chairman</i>
Dr. Habib-Ur-Rehman	<i>Member</i>
Dr. Mohammad Salim Khan	<i>Member</i>
Mr. Muhammad Zahid	<i>Member</i>

HR & R COMMITTEE

Dr. Habib-Ur-Rehman	<i>Chairman</i>
Dr. Manzoor H. Qazi	<i>Member</i>
Shah Naveed Saeed	<i>Member</i>

CHIEF OPERATING OFFICER

Mr. Sohail A. Siddiqi

CHIEF FINANCE OFFICER

Syed Muneer Hussain

COMPANY SECRETARY

Mr. Muhammad Naeem

HEAD OF INTERNAL AUDIT

Mr. Muhammad Saeed

AUDITORS

M/s Anjum Asim Shahid Rahman
Chartered Accountants

LEGAL ADVISOR

M/s Bashir Ahmad Ansari & Company

BANKERS

Meezan Bank Limited
Burj Islami Bank Limited
MCB Bank Limited
Al Baraka Bank (Pakistan) Limited
Habib Bank Ltd
Askari Bank Limited
Allied Bank Limited

REGISTERED OFFICE

Sector: H-8/4, Islamabad

SHARE REGISTRAR

M/s Corplink (Private) Limited
Wings Arcade, 1-K, Commercial,
Model Town, Lahore.

Board of Directors



Dr. Habib-Ur-Rehman
Chairman



Dr. Manzoor H. Qazi
CEO



Mr. Muhammad Zahid
Director



Dr. Abdul Razaq
Director



Dr. Saeed A. Bajwa
Director



Dr. M. Salim Khan
Director



Mr. Shafquat Ali Ch.
Director



Shah Naveed Saeed
Director



Mr. Qasim Farooq Ahmad
Director



Dr. Samea Kauser Ahmed
Director



Shifa

International Hospitals Ltd.

شفا انٹرنیشنل ہسپتال لمیٹڈ

ڈاکٹر فضل نبوی شینین

Our Mision

Healthcare with Compassion for all

Our Vision

To be the region's leader by providing quality healthcare services

Our Values

Compassion, Commitment, Teamwork, Quality, Respect and Accountability

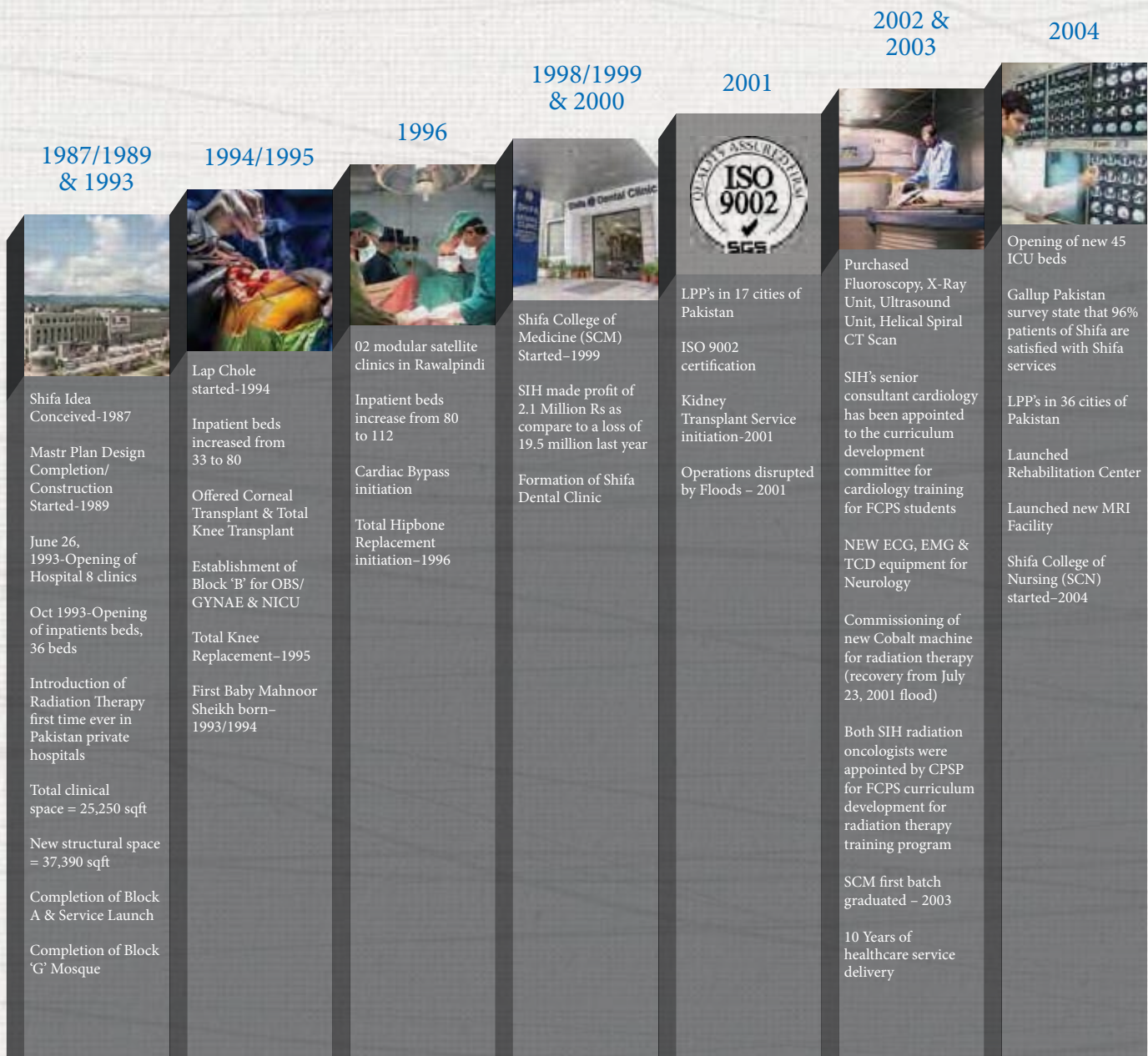


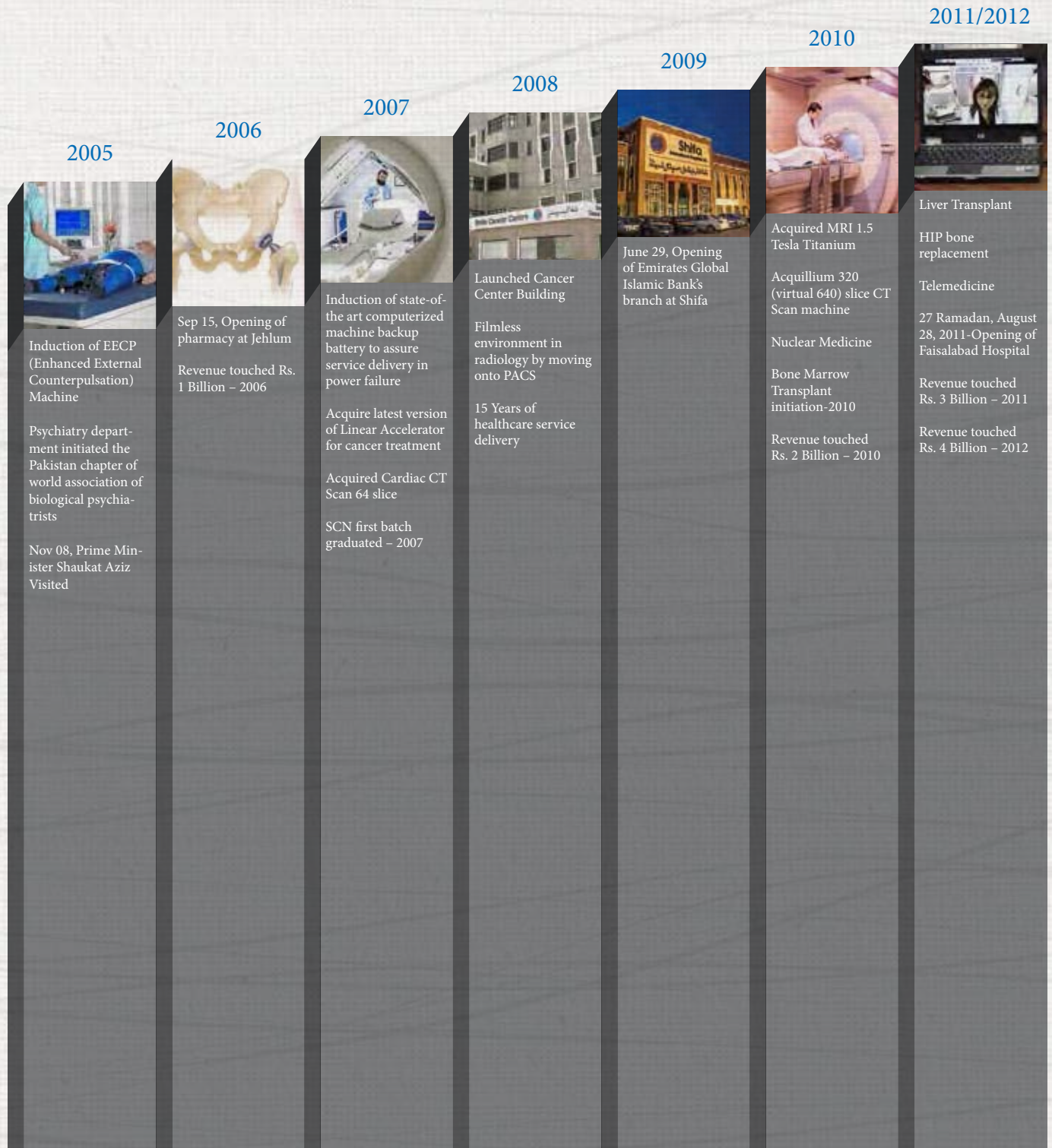
Our Strategic Priorities

- Physician Partnership and Enhanced Clinical Quality
- Provide Seamless/Easy Access Care Delivery
- Financial Strength/Viability
- Strategic Growth



SIH Achievements Timeline



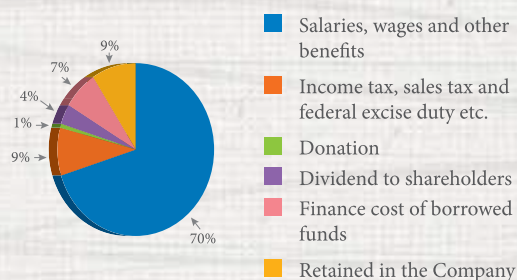




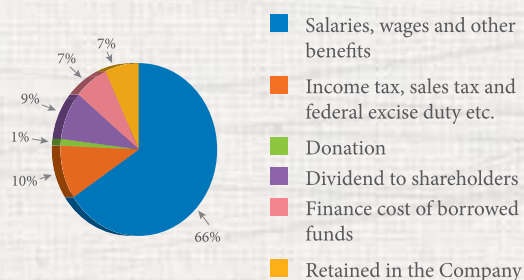
Statement of value addition

	2012		2011	
	Rs. in thousand	%	Rs. in thousand	%
Value added				
Total revenue inclusive of other income	4,451,781		3,412,688	
Supplies and other operating costs	2,437,491		1,814,855	
Total value added	2,014,290		1,597,833	
Value allocated				
To employees				
Salaries, wages and other benefits	1,412,807	70	1,047,850	66
To Government				
Income tax, sales tax and federal excise duty etc.	179,712	9	159,366	10
To society				
Donation	15,100	1	20,000	1
To providers of capital				
Dividend to shareholders	75,771	4	151,541	9
Finance cost of borrowed funds	145,876	7	112,018	7
	221,647	11	263,559	16
Retained in the Company	185,024	9	107,058	7
Total value allocated	2,014,290	100	1,597,833	100

2012

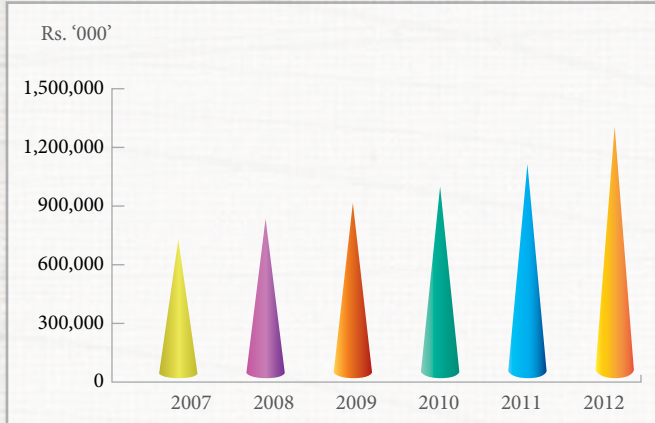


2011

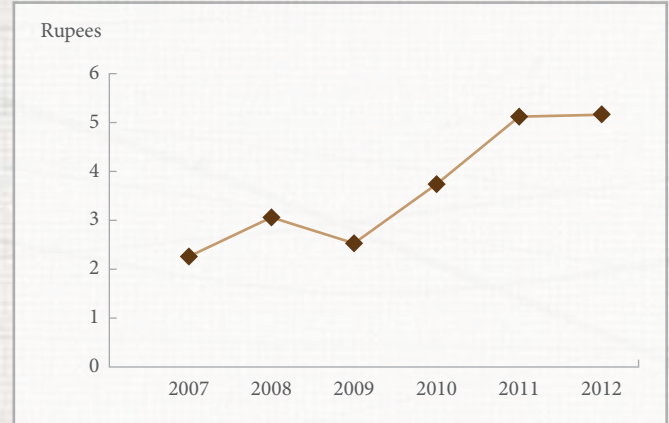


Six Years at a Glance

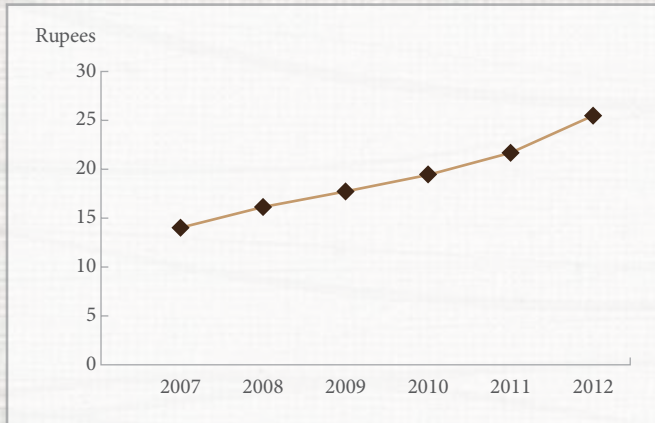
Shares holders' equity



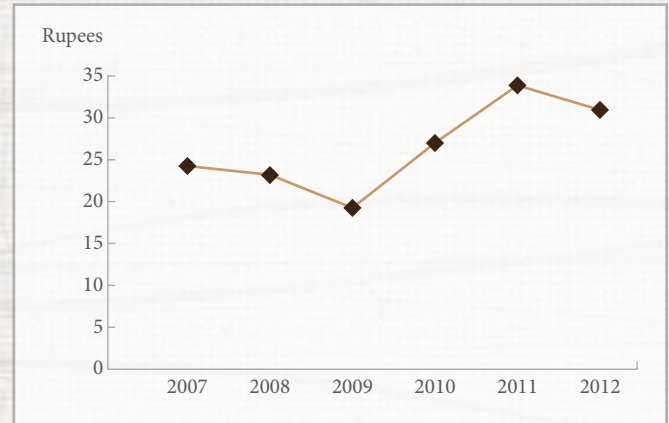
Earnings per share



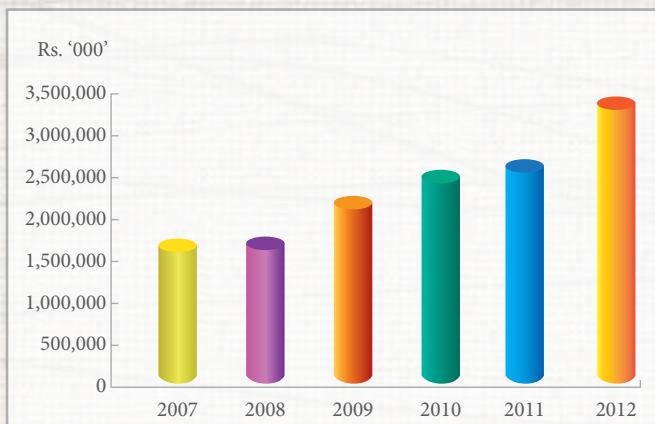
Breakup value per share



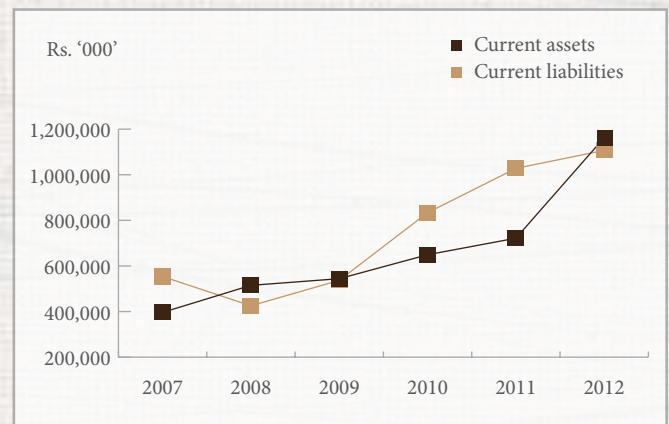
Market value per share (year end)



Property, plant and equipment



Current assets Current liabilities



	2007	2008	2009	2010	2011	2012
PERFORMANCE						
Operating profit margin	15.98%	19.36%	16.23%	16.10%	14.16%	11.72%*
Net profit margin	8.72%	9.36%	6.55%	7.39%	7.58%	5.86%*
Return on equity	16.90%	20.31%	14.92%	20.14%	24.91%	21.89%
Return on assets	9.59%	13.77%	11.14%	12.65%	13.99%	11.21%
Assets turnover - times	0.60	0.71	0.69	0.79	0.99	0.96
CAPITAL MARKET/ CAPITAL STRUCTURE ANALYSIS						
Market value per share (year end) Rs.	24.25	23.20	19.25	26.99	33.87	30.94
Breakup value per share Rs.	14.02	16.14	17.73	19.42	21.68	25.48
Market price to break up value	1.73	1.44	1.09	1.39	1.56	1.21
Earnings per share Rs.	2.26	3.06	2.53	3.74	5.12	5.16
Price earning ratio	10.74	7.58	7.62	7.21	6.62	5.99
Dividend per share (total) Rs.	1.00	1.00	1.00	2.20	3.00	1.50
Dividend yield/ effective dividend rate	4.12%	4.31%	5.19%	8.15%	8.86%	4.85%
Interest cover	3.15	3.68	2.90	4.52	4.18	3.46
Debt : Equity	50:50	47:53	42:58	43:57	36:64	53:47
LIQUIDITY						
Current ratio	0.72	1.21	1.01	0.78	0.70	1.05
Quick ratio	0.58	1.01	0.80	0.61	0.53	0.77
HISTORICAL TRENDS						
FINANCIAL POSITION						
Authorized capital	545,379	545,379	545,379	545,379	545,379	545,379
Paid up capital	505,138	505,138	505,138	505,138	505,138	505,138
Capital reserve - share premium	40,000	40,000	40,000	40,000	40,000	40,000
Unappropriated profit	163,040	269,998	350,663	435,691	549,929	742,132
Shares holders' equity	708,178	815,136	895,801	980,829	1,095,067	1,287,270
Surplus on revaluation of PP&E	226,041	223,250	612,089	604,909	597,730	590,551
Non current liabilities	691,969	860,180	794,603	832,994	732,354	1,669,350
Current liabilities	553,599	425,358	536,835	833,641	1,027,811	1,106,987
Total	2,179,788	2,323,925	2,839,328	3,252,374	3,452,962	4,654,158
Property, plant and equipment	1,773,567	1,797,488	2,283,028	2,594,352	2,720,993	3,469,388
Long term deposits	10,028	11,424	12,170	8,820	10,296	22,065
Current assets	396,193	515,013	544,130	649,202	721,673	1,162,705
Total	2,179,788	2,323,925	2,839,328	3,252,374	3,452,962	4,654,158
OPERATIONAL RESULTS						
Operating revenue	1,308,300	1,652,459	1,948,835	2,555,759	3,412,688	4,451,781
Operating costs	(1,107,027)	(1,344,782)	(1,652,684)	(2,155,203)	(2,942,407)	(3,944,838)
Other operating income	7,829	12,230	20,103	10,971	12,928	14,812
Operating profit	209,103	319,908	316,253	411,527	483,209	521,756
Finance cost	(66,360)	(86,996)	(109,119)	(91,041)	(115,680)	(150,800)
Tax	(28,641)	(78,230)	(79,478)	(131,506)	(108,929)	(110,161)
Net profit	114,103	154,681	127,656	188,980	258,600	260,795
CASH FLOW SUMMARY						
Net cash flow from operating activities	339,522	258,268	274,735	415,959	547,908	504,482
Net cash flow from investing activities	(497,311)	(146,942)	(201,684)	(482,221)	(307,126)	(987,042)
Net cash flow from financing activities	199,871	(53,049)	(124,734)	(15,571)	(277,029)	784,743
Changes in cash & cash equivalents (C&CE)	42,082	58,277	(51,683)	(81,832)	(36,247)	302,183
Effect of exchange rate changes on C&CE	26	47	291	89	(17)	52
Cash & cash equivalents - year end	115,291	173,615	122,224	40,481	4,217	306,452

* During the year under review, we have opened SIH Faisalabad and various pharmacies and Lab-pickup points, return on these investments is yet awaited.

HORIZONTAL ANALYSIS

BALANCE SHEET	2007		2008	
	Rs	07 Vs. 06 %	Rs	08 Vs. 07 %
EQUITY AND LIABILITIES				
Paid up capital	505,138	-	505,138	-
Capital reserve - share premium	40,000	-	40,000	-
Unappropriated profit	163,040	69	269,998	66
Shareholder's equity	708,178	10	815,136	15
Surplus on revaluation of PP&E	226,041	(1)	223,250	(1)
Non current Liabilities	691,969	89	860,180	24
Current Liabilities	553,599	19	425,358	(23)
Total	2,179,787	28	2,323,924	7
ASSETS				
Property, plant and equipment	1,773,567	32	1,797,488	1
Long term deposits	10,028	29	11,424	14
Current assets	396,193	11	515,013	30
Total	2,179,788	28	2,323,925	7
PROFIT & LOSS ACCOUNT				
Operating revenue	1,308,300	13	1,652,459	26
Operating costs	(1,107,027)	18	(1,344,782)	21
Other operating income	7,829	(2)	12,230	56
Operating profit	209,103	(9)	319,907	53
Finance cost	(66,360)	66	(86,996)	31
Tax	(28,641)	(51)	(78,230)	173
Net profit	114,103	(12)	154,681	36

2009		2010		2011		2012	
Rs	09 Vs. 08 %	Rs	10 Vs. 09 %	Rs	11 Vs. 10 %	Rs	12 Vs. 11 %
505,138	-	505,138	-	505,138	-	505,138	-
40,000	-	40,000	-	40,000	-	40,000	-
350,663	30	435,691	24	549,929	26	742,132	35
895,801	10	980,829	9	1,095,067	12	1,287,270	18
612,089	174	604,909	(1)	597,730	(1)	590,551	(1)
794,603	(8)	832,994	5	732,354	(12)	1,669,350	128
536,835	26	833,641	55	1,027,811	23	1,106,987	8
2,839,328	22	3,252,373	15	3,452,962	6	4,654,158	35
2,283,028	27	2,594,352	14	2,720,993	5	3,469,388	28
12,170	7	8,820	(28)	10,296	17	22,065	114
544,130	6	649,202	19	721,673	11	1,162,705	61
2,839,328	22	3,252,374	15	3,452,962	6	4,654,158	35
1,948,835	18	2,555,759	31	3,412,688	34	4,451,781	*
(1,652,684)	23	(2,155,203)	30	(2,942,407)	37	(3,944,838)	**
20,103	64	10,971	(45)	12,928	18	14,812	15
316,253	(1)	411,527	30	483,209	17	521,756	8
(109,119)	25	(91,041)	(17)	(115,680)	27	(150,800)	***
(79,478)	2	(131,506)	65	(108,929)	(17)	(110,161)	1
127,656	(17)	188,980	48	258,600	37	260,795	1

Comments:

* Revenue earned during the year under review increased to Rs. 4,451.8 million from Rs. 3,412.7 million as compared to last year due to increase in IPD facilities, increase in revenue of external pharmacies and lab pick up points.

** With the increase of more utilization of services as well as increase in operating costs of the new recently opened SIH Faisalabad, external pharmacies and lab pick up points, the operating cost also increased to Rs. 3,944.8 million from Rs. 2,942.4 million during the year under review.

*** Due to substantial increase of new borrowings during the year finance cost increased to Rs. 150.8 million from RS. 115.7 million as compared to last year.

VERTICAL ANALYSIS

BALANCE SHEET	2007		2008	
	Rs	%	Rs	%
EQUITY AND LIABILITIES				
Paid up capital	505,138	23	505,138	22
Capital reserve - share premium	40,000	2	40,000	2
Unappropriated profit	163,040	7	269,998	12
Shareholders' Equity	708,178	32	815,136	36
Surplus on revaluation of PP&E	226,041	10	223,250	9
Non current Liabilities	691,969	32	860,180	37
Current Liabilities	553,599	26	425,358	18
Total	2,179,787	100	2,323,924	100
ASSETS				
Property, plant and equipment	1,773,567	81.4	1,797,488	77.4
Long term deposits	10,028	0.5	11,424	0.5
Current assets	396,193	18.1	515,013	22.2
Total	2,179,788	100	2,323,925	100
PROFIT & LOSS ACCOUNT				
Operating revenue	1,308,300	100	1,652,459	100
Operating costs	(1,107,027)	85	(1,344,782)	81
Other operating income	7,829	1	12,230	1
Operating profit	209,103	16	319,907	20
Finance cost	(66,360)	5	(86,996)	5
Tax	(28,641)	2	(78,230)	5
Net profit	114,103	9	154,681	10

2009		2010		2011		2012	
Rs	%	Rs	%	Rs	%	Rs	%
505,138	18	505,138	16	505,138	15	505,138	11
40,000	1	40,000	1	40,000	1	40,000	1
350,663	12	435,691	13	549,929	16	742,132	16
895,801	31	980,829	30	1,095,067	32	1,287,270	28
612,089	22	604,909	19	597,730	17	590,551	13
794,603	28	832,994	26	732,354	21	1,669,350	36
536,835	19	833,641	26	1,027,811	30	1,106,987	23
2,839,328	100	3,252,373	100	3,452,962	100	4,654,158	100
2,283,028	80.4	2,594,352	79.7	2,720,993	78.8	3,469,388	74.5
12,170	0.4	8,820	0.3	10,296	0.3	22,065	0.5
544,130	19.2	649,202	20	721,673	20.9	1,162,705	25.0
2,839,328	100	3,252,374	100	3,452,962	100	4,654,158	100
1,948,835	100	2,555,759	100	3,412,688	100	4,451,781	100
(1,652,684)	85	(2,155,203)	84.4	(2,942,407)	86	(3,944,838)	89
20,103	1	10,971	0.4	12,928	0.38	14,812	0.33
316,253	16	411,527	16	483,209	14.4	521,756	11.3
(109,119)	6	(91,041)	4	(115,680)	3	(150,800)	3
(79,478)	4	(131,506)	5	(108,929)	3	(110,161)	2
127,656	6	188,980	7	258,600	8.4	260,795	6.3*

* During the year under review, we have opened SIH Faisalabad and various pharmacies and Lab-pickup points, return on these investments is yet awaited.

The Industry - Healthcare

Healthcare, essentially, is a complex business. It is a continuous struggle for attaining excellence in an environment where demand always surpasses supply and where required resources, material and human, are always scarce and expensive. Yet a responsible, progressive and conscientious healthcare enterprise cannot afford any compromise on quality as it is directly related to human life and wellbeing.

Healthcare industry is faced with myriad challenges. Changing lifestyles, varying disease patterns, stunning technological advancement, growing research in medicine and surgical disciplines and more importantly an ever-escalating demand for top quality services have collectively developed a tough “yard stick” for organizations in order to become industry leaders.

Healthcare in Pakistan has traditionally been neglected both by the public and private sectors. While the

former lacked political will, the latter couldn't muster up courage to invest in this “more-challenging-and-less-lucrative” business. Nevertheless, it is not only about lesser profit charms, a critical capacity gap deters investments in healthcare as well. Healthcare, in fact, is mission-driven business. When I use this word “mission-driven-business”, I mean to emphasize a combination of mission and a business model in order to provide for the development of a progressive, quality-concerned and sustainable healthcare enterprise.

Healthcare in Pakistan is a continuing struggle for sustainability, quality service delivery and futuristic approach to meet emerging consumer demands along with acquiring latest technology and top-notch human resource.



Chairman's Review



Our core value – quality – is the end product of a variety of operations going on in our complex organization. To ensure that every patient gets the best possible quality services, we have to raise the bar for ourselves every day.

Alhamdulillah Shifa is in twentieth year of operations. Reaching and crossing each milestone, we bow our heads in humility for being enabled to pursue excellence in healthcare delivery, to make our contribution to the care of the needy and for being a resource of medical and allied sciences education for the nation.

Institutions though embodied in brick and mortar are comprised of the values they proclaim and practice. Shifa was conceived with ambitions of running a successful ethical business providing personal and professional growth opportunities to thousands of men and women without discrimination of race, religion, ethnicity, gender or age. We have made strides in establishing standards of care, in pursuing continuous quality improvement and in enforcing principles of good corporate governance. Human resource development was at the heart of our initiatives that nurtured educational endeavours of our youngsters. Our trainees are not only serving ailing humanity at home but have brought laurels for proving their worth in top notch hospitals and institutes across the globe.

The progress of these two decades is living testimony to the vision, dedication and toil of its founding team as well as Shifa family members who joined the caravan and made precious contribution. We salute them all as we renew the pledge of preserving the soul of this institution.

All these years we have remained on toes to make sure that we bring the best possible of quality services to our consumers on the one hand and adhere to the code of corporate governance in our decisions as a company and to legal, moral and ethical codes in our working as responsible individuals on different tiers in the organization.

Simultaneously, we have been mindful of our responsibility towards the community we serve and have been consistent like past in discharging our Corporate Social Responsibilities. From creating awareness about prevention and disease in the community through different initiatives and offering free and subsidized healthcare services to less-fortunate countrymen, Shifa International Hospital has been instrumental.

Shifa International Hospitals Limited The Company



We have come a long way since our inception and today we stand on a robust ground after over two decades of quality service delivery but simultaneously we have been consistent in equipping ourselves with latest technology, engaging the best possible human resource and preparing for the increasing demands.

During the 'Year under Review', The Board carried out detailed deliberations over the Mission, Vision, Values and Strategic Imperatives mainly to achieve the targets that I have talked in previous lines and which include Sustainable Growth, Quality Service Delivery and Adherence to Ethical Business Principles. Our reviewed Mission and Vision Statement says that, "Our Mission, Vision, Values and

Strategic Imperatives are at the core of everything we do. They represent the foundation upon which we build our strategies and organize our operations." While our Mission is "Healthcare with Compassion for all, our Vision is "To be the region's leader by providing Quality healthcare services". Our Values are "Compassion, Commitment, Teamwork, Quality, Respect and Accountability".

This note will remain incomplete without paying tribute to the tremendous services of the Founder Chairman and CEO, late Dr. Zaheer Ahmad. May Allah (SWT) rest his soul in eternal peace, Amen! I think, however, no words do this job better than the formidable presence of the institution itself. Shifa is a live tribute to



the services of late Dr. Zaheer Ahmad that he rendered for building and developing this institution. Had it not been for his commitment, zeal and integrity, we might not have been able to see what Shifa is today. Every aspect of his career is a worth-following example for the present leadership and we commit ourselves to the mission we shared with the late leader i.e. making Shifa, a Second to None Healthcare Institution.

I have to express my great appreciation for all the stakeholders – the shareholders, the Board of Directors, consultants and employees, and last but not the least, the

patients – who were with us through thick and thin to make Shifa International Hospitals (Limited) a benchmark of quality healthcare services. Giving custom to a culture of quality and development of a sustainable business model in healthcare could become next to impossible had it not been for the dedication of the our shareholders, our consultants, our employees, each and every extended member of Shifa Family and the trust of our patients.

With this keynote, I present the Chairman's review for the year ended June 30, 2012.



Chief Executive Officer



Shifa's measurement of ongoing operational performance is organized around an unwavering commitment with "Shifa's Strategic Imperatives" i.e. Enhanced Clinical Quality and Physician Partnership, Seamless/Easy Access Care Delivery, Financial Strength, and Strategic Growth.

From the desk of CEO

25 years from conception and after 20 years of service and operations, we can proudly say that Shifa is the Premier Healthcare Institution of Pakistan, the trendsetter and role model for the healthcare systems in our beloved country. With the blessing of Allah Subhana Wa Ta'ala we have made the impact and are committed to continue to expand our role in Quality, Leadership and Management. 25 years is a lifetime for any individual, and it has taken its call on all the founders – but – we are proud of it!

It has been a struggle all along – initially financial, then operational and most importantly, to maintain high quality, through continued training and monitoring of our healthcare team.

To build a Patient Safety Culture and provide high quality patient care is a challenge in any country of the world, but to maintain these standards is a bigger challenge and struggle. Not a single day we would relax or put our guards down. With each new patient, come new challenges, which we have met through our Medical and operational teams, mostly through standardized and sometimes through innovative techniques and ideas.

Our employees are our most precious assets. Through Human Resource Management, Nursing Education Services, Medical Staff Affairs, Quality Management and other departments we are on a constant “go”, to improve, polish





and shine them. This is an aggressive and comprehensive training and monitoring program. The result is that wherever they go (within or outside Pakistan) they are helping improve the healthcare in other hospitals, and – we are proud of this – our mission accomplished – we have made the impact.

Our vendors, our contractors, our outside consultants demand Shifa's friendly and efficient systems and service from other hospitals and departments all across Pakistan – Yes! We have made this impact!

Over 500 inpatients, over 1000 outpatient daily, 3000 plus employees, over 500 senior and junior doctors, almost 100 critical care beds, complex surgeries and procedures successfully – all of it demands an efficient system and caring people, and I am pleased to say that under the able leadership of our Medical Director Dr. Salim Khan and our COO Mr. Sohail A Siddiqi, we have developed systems and policies which ensure excellent care and success.

Nursing Staff and young doctors (PG Trainees) in all the major departments and specialities are the backbone of our healthcare delivery. Looking at young, vibrant, energetic, enthusiastic, committed, motivated and dedicated doctors and nurses – we feel good about our future. These young doctors are getting ready to replace us – mission accomplished!

Our consultants are our pride and partners. They are highly qualified and experienced. We have the best consultants that any institution can dream about. Others envy us. Most of these senior doctors came back from USA, UK and Middle East to serve their own homeland – Reverse Brain Drain – Yes! Mission accomplished!

Sustainable business model in healthcare in Pakistan, without compromising quality, was another challenge during the past 20 years. Alhamdulillah, a successful model is in place for others to follow – mission accomplished!

Helping the poor, the needy, the less privileged and the one who cannot afford – has been the biggest dream and desire of all of us. At Shifa we are providing the same care to the affording and non-affording patients, by the same consultants, same inpatient facility, same ICU and OT.

Though our dreams of 25 years ago have mostly come true – we thank to Allah Subhana Wa Ta'ala for all of this. However maintaining all the above is much bigger challenge and we all pray for continued blessing and guidance of God Almighty.

Chief Executive Officer is the chief custodian of the Board of Directors' decisions and their implementation in routine and extra-ordinary operations in the organizations. A litany of complex clinical and administrative operations at Shifa end up in quality service delivery to every individual patient and these operations, respectively, are grouped under the offices of the Medical Director and Chief Operating Officer. Chief Executive Officer involves at the policy level with the MD and COO offices to ensure smooth execution of these functions in sync and offer modifications to streamline things.

Chief Executive Officer also supervises the financial affairs of the company for the sake of fiscal discipline and governance with active assistance of the Chief Finance Officer. Besides performing these guiding roles CEO directly works with the Division of Strategic Planning and Business Development (SPB&D). SP&BD is relatively new but very critical area which ensures that Shifa International Hospitals (SIH) strategy is reflected in hospital planning, which guides resource allocation, achievement of results and future expansion.





Office of the Medical Director



Medical Director in close and active collaboration of Director Medical Services and Director Surgical Services streamlines and supervises the entire clinical operations to play a major role in achieving Enhanced Clinical Quality

Entire clinical aspects of our service delivery and matters related to our faculty are governed by the office of the Medical Director. Medical Director in close and active collaboration of Director Medical Services and Director Surgical Services streamlines and supervises the entire clinical operations to play a major role in achieving

Enhanced Clinical Quality. MD reports to the Chief Executive Officer. MD Office also looks after a rigorous Post Graduate training program. We are currently running PG training program in more than 18 specialities of medicine and surgery.



Dr. Mian Amjad Sohail
Director Medical Services



Dr. Harris Baig
Director Surgical Services



Dr. Darakshan Jabeen
Director PGME



Shifa Cancer Center

It was in the early 90's, when the pioneers of Shifa International Hospital, made a critical decision to make available much needed state of the art medical treatment for cancer patients. The first phase of this commitment led to the opening of the first radiation oncology department in the private sector at Shifa International Hospital in 1994. This proved to be the focal point for development of additional cancer treatment facilities over the years, till the inauguration of a full fledged Shifa Cancer Center in 2012.



Medical Oncology

The Center provides comprehensive medical oncology care for solid tumors and hematological malignancies, including chemotherapy and autologous/allogenic Bone Marrow Transplant (BMT). Inpatient care for chemotherapy, supportive care and treatment of emergencies and complications is available. Multidisciplinary Tumor Board is being held regularly at this facility.

The Oncology Day Care Unit is a specially designed facility for patients suffering from various benign and malignant disorders. The Day Care Unit offers various diagnostic and therapeutic modalities including blood transfusions for patients with thalassaemia, other types of blood component infusion therapy and outpatient cancer chemotherapy for all types of malignant diseases.

Radiation Oncology

The department of radiation oncology started with the installation of an advanced linear Accelerator, X-ray Fluoroscopic Simulator and computerized 2.D treatment planning. It was probably the first department in the country where each patient underwent proper simulation and treatment planning along with custom made shielding devices. In the decade of 90's Breast conserving treatment was initiated in Pakistan and made available to suitable patients with the cooperation of surgeon from Shifa and AKUH. A second treatment unit, a Cobalt 60 Phoenix (100cm Ssd) was added in 2004.

Our Radiation Therapy services were expanded by the installation of a dedicated CT-simulator and a Linear Accelerator equipped with multi leaf collimeters in 2007. The dedicated CT simulator allows us to plan the radiation treatment and shape the dose precisely according to each patient's individual anatomy, tumor size, shape and extent.

The advanced digital Linear Accelerator with MLC enables to deliver precise radiation to the target with sharp field edges defined by two banks of 40 single focused leaves (collimeters), that can be positioned with an accuracy of 1mm. All patients are thus treated by 3-D conformal techniques. In addition this capability made it possible to start IMRT (Intensity modulated Radiation Therapy) in 2010 for prostate and head & neck cancer. IMRT is a significant development in the field of radiation therapy where the higher dose region can be shaped according to the shape and extent of tumor while reducing dose to normal tissues, thereby improving cure rates and reducing normal tissue damage. Shifa International Hospital is one of the only two centers in Pakistan providing IMRT treatment. The quality of radiation treatment and precision dosage is ensured at Shifa Radiation Oncology, by verifying all treatment plans using specialized dosimetry equipment.



Future Plans

In near future we plan to acquire equipment and expertise to start Stereotactic radiation therapy, which will give us another tool to treat small tumors in the Brain, Lung, Spine, etc, with sharply focused beam, using a single

or few high dose fractions, thus shortening the overall treatment time and further improving results. We also plan to acquire High Dose rate Brachytherapy equipment for intracavitary and interstitial irradiation.

Shifa Heart Center

Shifa Heart Center is busy in providing a wide range of general and specialized cardiac services, including but not limited to angiography, angioplasty, stents, intra aortic balloon pump, EECF and Cardiac MR. In fact the scope of our services encompasses critical areas and conditions and treatments of heart like Heart Failure, Interventional Cardiology/PCI, CHD/Valve Replacement, Peripheral Vascular Disease & Peripheral Artery Disease (PVD & PAD), Electrophysiology/Arrhythmias, Cardiac Imaging and Cardiac Rehabilitation.

We are providing EP studies with Cardiac ablation, Cardiac Resynchronization Therapy and Implantable Cardiac Defibrillator. We have Cardiac CT (640 slice) that is advance and fast Technology and has made it possible to record coronary angiogram without placing catheters in the heart and without the risk associated with conventional coronary angiography. Shifa Heart Center including cardiology and cardiac surgery is considered one of the best heart health centers in Pakistan. We are into a fast expansion and improvement plan aimed at revolutionizing heart health facilities' culture, some of the initiatives in this regard are mentioned below.

Cardiac MRI Service: We are all set to offer this new and very exciting diagnostic modality full-fledged. It is currently being worked out and we hope we will be able to start the service with full strength in 4-6 weeks. Our goal is to establish a full time and dedicated cardiac MR and cardiac CT set up in next couple of years catering for the needs of the whole region.

National Integrated Anticoagulation Service (NIACS): Anticoagulation is an important but unregulated and unmonitored therapy in our and most of the developing countries with sometimes catastrophic results. We are currently working on developing a comprehensive and integrated anticoagulation service in collaboration with our Hematology department and National University of Science and Technology (NUST) and Roche pharmaceuticals. Our aim is to provide an INR monitoring and appropriate dosage facility to our and other patients at their doorstep. Currently we are testing the INR testing portable equipment and also developing a software incorporating warfarin dosing algorithms. We have also arranged to acquire smaller strength warfarin for the patients. We hope after establishing the authenticity of the hardware and electronic algorithms, we will start a formal service by mid October, initially at the hospital and later through our outlets and other facilities throughout the region.

Patient Education Program: We are currently working on a project to provide health education and information for general public in collaboration with NUST. This initiative is called IMPROVED or Improving Public Perception of Diseases. It will be in the form of pamphlets, newspaper articles, emails and mobile text. We hope to start it formally in October or November this year.

Heart Failure Service: Chronic heart failure is widely prevalent condition with worst prognosis than certain cancers if not managed optimally. We intend to start a heart failure treatment optimization service for such patients in January next year. It will be supervised by the consultants and run by cardiology fellows and nurse practitioners. Patients will not only be provided support in the clinic but also through emailing, mobile text and telephones. It will be a unique and pioneering service and will help establish our hospital in providing extensive and comprehensive health provider.

Lifestyle Improvement Initiative: In the New Year we are planning to start an initiative and research study to help improve cardiovascular risks in general population. We have termed it INCREDIBLE or Initiative for Cardiovascular Risk Reduction through Dietary, Behavioral, Lifestyle modifications and Exercise. We will be looking for sponsors for such milestone study. It will be aimed at mainly younger and middle aged population with multiple cardiac risks of the capital city and beyond. We will incorporate cardiac rehab program into this initiative and utilize our cardiac rehab facility as a centre for education and exercise program, obviously introducing people to our resources.

Cardiothoracic Surgery

This is now a firmly established unit, which has completed a decade of its services backed up with internationally comparable results. Ever since its inception, this unit has stayed abreast with technological advancements. We were equipped with most modern heart lung machine, cell saver, high class instruments and IABP from the beginning. We have a latest ultra modern and highly sophisticated new Heart Lung Machine. We also have two systems of Beating Heart Surgery i.e. Genzyme and Medtronic in place which is used in performing procedures on beating heart.



Neuro-care at Shifa

Our neurologists are highly qualified and trained in different sub-specialties. Electroencephalography, nerve conduction studies and electromyography and evoked potential studies are carried out on the latest digital EEG and EMG machines. The addition of a 640 slice CT scanner and an open MRI to the existing CT and MRI machines has further enhanced our diagnostic capabilities in Neurology. The neurology section is providing carotid artery stenting in collaboration with interventional cardiologists and interventional radiologists.

Neurology

Neurology and Neurosurgery are established units of Shifa International Hospital that provide diagnosis and treatment of various neurological ailments and disorders. Highly qualified and trained neurologists and neurosurgeons provide inpatient and outpatient services. Neurophysiology Services include Nerve Conduction Studies (NCS), Electromyography (EMG) and Electroencephalography (EEG). Also, all types of evoked potentials including brainstem auditory, visual and somatosensory are performed here. Increasing life expectancy of our population is likely to lead to an increase in the number of patients in neurological disorders like Dementia, Stroke, and Parkinson's Disorder. Neurology at Shifa is also capable of performing Trans Cranial Doppler (TCD) studies.

To increase awareness and enrich patient education, we observe public/patient awareness days on Stroke, Multiple Sclerosis, Alzheimer's, and Parkinson's. It is a matter of great pride that our postgraduate training

program has entered its 3rd year with total of 7 trainees. There is an active research team with ongoing research projects on Dementia, Stroke, and Multiple Sclerosis. More than 20 papers and 50 abstracts have been published in the last 10 years from our department.

Sleep lab for video EEG and poly Electromyography, Stroke Unit and Dementia, Parkinson's and Epilepsy clinics are some of our future projects.

Neurosurgery

Shifa International Hospital provides optimum neurosurgical facilities. A team of 4 neurosurgeons has vast experience in dealing with brain tumors, spinal procedures and vascular and endoscopic procedures. High quality care for neurosurgical trauma patients, high quality equipment for spinal fixation and excellent neuro-monitoring facilities are available here. Neurology at Shifa compliments the Neurosurgery and thus Shifa becomes patients' ultimate choice.



Orthopaedics

Orthopedic is a field of surgery in which meticulous care to detail especially with aseptic conditions is absolutely essential. The equipment used in surgery has to be of possible highest standards as well the availability of taking X-rays on the specialized orthopedic table with image intensifier and power instruments are some state-of-the-art facilities that are available to Orthopaedics at Shifa. The department is staffed with highly qualified US & UK trained surgeons with special interest in trauma and joint replacement surgeries as well as pediatrics and spinal surgeries. This section manages patients with musculoskeletal conditions such as bone and joint injuries and degenerative joint diseases etc. It provides 24/7 trauma service to the Hospitals. Excellent results have been achieved in hip and knee joint replacement surgeries.

Major procedures offered include management of fractures and dislocation, joint replacement, management of upper/lower limb injuries, arthroscopy, arthrocentesis, muscle biopsy and management/correction of limb deformities. We have the honor of successfully performing the first ASI hip replacement surgery in Pakistan. Our Lead surgeon Dr Mir Amanullah Khan was assisted by Consultant Orthopedic Surgeon Colleague Dr. Sajjad Hassan Orakzai.

Pioneering orthopedic surgeon Dr Erik De Witte from the General City Hospital (ASZ) in Aalst, Belgium, has specialized in these procedures. Since 2004, Dr De Witte — who retired on December 31, 2011 — has performed the anterior supine intramuscular (ASI) approach in 3,500 hip replacements.

Dr. Mir Amanullah Khan, Consultant orthopedic surgeon at SIH, specializes in this approach for Total Hip Replacement surgery. He has been personally trained by Dr. De Witte in the intricacies of this procedure. Dr Khan has performed multiple combine procedures with Dr De Witte, both in Belgium and UK.

Unlike traditional minimally invasive hip replacement techniques, the ASI technique uses an incision at the front of the hip instead of the side or back of the hip.

This modified incision placement allows surgeons to directly approach the hip joint by going between the muscles that surround the hip joint, rather than cutting them. Traditional approaches would require cutting the muscles and/or tendons that surround the hip.

The ASI minimally invasive hip replacement procedure is designed to reduce the trauma to the tissues surrounding the hip joint. By preserving the muscles and tendons, surgeons may enable their patients to walk the day of surgery, to experience less postoperative pain, and to return to daily activities more quickly.

The potential benefits of this technique include shorter hospital stays (2-3 days instead of 5-7), earlier mobilization (same day walking), fast recovery, lesser blood loss, lesser pain and smaller incision (4-5 cm compared to 12-14cm with traditional incisions).



Transplant & Urology

The treatment options provided by the section of Urology range from simple urinary tract infections, stones, prostate, diseases, infertility, and impotence to major urological cancer surgeries for kidney, bladder and prostate. All sorts of endourological procedures and

re-constructive surgeries are done as well. The provision of renal transplantation has made this a comprehensive unit with internationally comparable results. Lithotripter is available and helpful for patient with stones in kidney & urinary tract stones.

Ophthalmology



Ophthalmology at Shifa has become a state-of-the-art tertiary referral center for various types of eye diseases. It is equipped with all the latest equipment for diagnosis and treatment of eye ailments. The section does corneal

transplant surgeries besides phacoemulsification, refractive surgeries, glaucoma management, vitreo-retinal surgeries, pediatric ophthalmology & diabetic eye care etc.

Plastic Surgery

Plastic Surgery Clinic was established in 2009 with 2 fulltime consultants and one part-time consultant, who soon after joined Shifa as fulltime consultant. From 150 major cases a year in 2009, we have become a busy clinic with 600 major cases a year now (in 2011).

Plastic surgeries are tertiary referred cases and primarily they include reconstruction (major or minor) and micro vascular free tissue transfer. Plastic surgery clinic had

marked their 100th micro vascular case (free flap) on June 2012, mostly referred by Ear, Nose, Throat (head & neck reconstruction post cancer), Orthopaedic and General Surgery (sarcoma & breast cancer).

Plastic Surgery Clinic got its registration with the College of Physicians & Surgeons Pakistan in 2010 and currently enrolled for residents for FCPS in Plastic Surgery. The clinic is looking forward for performing craniofacial (head or skull plus facial structures) surgery in future.

Mother & Child Health

OBS/ GYNE

The department of Obs/Gyne at Shifa International Hospital is one of the busiest and sought after departments. Being the only tertiary-care center in the north of Pakistan, it has become a referral center for the whole region. Obs/ Gyne department works in close collaboration with the department of Pediatrics, which makes it possible to save babies as small as 26-weeks old. The department centers almost all the major sub-specialties of Obs/ Gyne. It is amply equipped with almost all the main equipment for conventional surgical purposes. Besides equipment for conventional surgical procedures, we have the whole range of endoscopic instruments like hysteroscopes, laparoscope etc. Laboratory facilities, Ultrasound, Radiology, Fluoroscopic of the fallopian tubes, Mammograms, Antepartum and Intrapartum fetal monitoring are available 24 hours a day and seven days a week. The provisions of Spinal and Epidural analgesic are also available in the department round the clock.

Pediatrics

Department of Pediatrics has been established since the beginning of Shifa International Hospital in 1993. The services available are out patient, inpatient, neonatal intensive care, pediatric intensive care. Department of Pediatrics has 73 beds, which includes 32 neonatal intensive care beds; there are about 3000 deliveries per year. 20 % of all the new born would need level-II or level-III care during their stay in the hospital. The pediatric Outpatient has turnover of more than 35,000 patients per year. The facility is considered to be the state of art in the region catering large area of northern Punjab, KPK, and AJK as well as neighboring Afghanistan.

Department of Pediatrics have nine faculty members, all have post graduate degrees from USA, UK or Pakistan. The sub-specialty services are offered in the disciplines of pediatrics gastroenterology and liver transplant, pediatric nephrology, urology, and renal transplant, pediatric hematology/oncology and bone marrow transplant. Two surgeons are on board that provide pediatrics and neonatal surgery, cardiac thoracic surgery. Department of Pediatrics has 19 postgraduates' trainees and 6 house officers. Department provides primary care facility that includes routine check-up for the new born, vaccination, developmental assessment and treatment of common childhood illnesses Pediatrics emergency services provide 24 hours coverage via Emergency Department. Department of pediatrics is likely to have more beds in neonatal and pediatric intensive care units in near future., pediatric liver transplant service is expected to expand as people would come to know about this relatively new specialty in Pakistan.

Pediatric Surgery

The section deals with the surgical treatment of children and newborn babies. It includes the surgery for all types of congenital and acquired diseases up to 12 years. Major procedures being performed include operations for complete ano-rectal, congenital defects of gastrointestinal tract and hernia repair, correction of undescended testes, hypospadias repair, cleft lip repair, all types of abdominal surgeries and correction of congenital birth defects.



Shifa Center of Liver Pancreas and Biliary Sciences (LPBS)

We are rightly proud of our success in the last quarter of the previous year in very critical area of Liver Transplant. We are the only hospital in Pakistan to have carried out successful liver transplant. We started this journey in May 2012 and have done many Hepatobiliary & Liver Transplants so far. One of our objective is to set up a Center of Excellence for Liver Diseases in Children.

We are in the process of equipping our facility

with the service-specific technology and developing infrastructure to cope with the increasing demand for Liver Transplant that has virtually deluged us.

Simultaneously we are in the process of hiring highest quality human resource in all areas and from paramedical staff to medical professionals like dedicated liver intensivist, anesthesiologist, pediatric gastroenterologists and more surgeons.



Gastroenterology

This is perhaps the busiest section of the department of medicine. It is equipped with the latest video equipment like Gastrosopes, Colonoscopes and Duodenoscopes. We are pursuing to become an academic centre of

excellence in Hepatopancreatobiliary diseases. The division is actively pursuing expansion of the services and also involved in the extensive research activities.



Critical Care & Pulmonary Medicine

Critical Care & Pulmonary Medicine has taken a new dimension at Shifa. In keeping with the International trends and concepts of "Closed ICU", the patients are managed by the consultants trained in Critical Care and Pulmonary Medicine. The foreign trained and certified consultants are providing a variety of services to patients presenting with a variety of pulmonary problems. Bronchoscopy suite is equipped with two fiber optic Olympus Bronchoscopes. Other state of the art equipment includes new Raphael Silver Ventilators, Pulmonary Function Lab Vitalograph and BEARS Noninvasive Ventilator.

We rightly take pride in the fact that after the expansion of our Critical Care Unit that is underway, we shall be offering 100 plus critical care beds which would be the largest number in a single hospital in Pakistan.



Nephrology

Nephrology at Shifa is one of the key clinics of tertiary level care. Nephrology deals with the care of people having kidney disease of various stages, salt water and other electrolyte disorders and various types of therapies like dialysis and kidney transplant.

Over a period of 20 years, Nephrology has grown up from a team of just two nephrologists to a team of three Nephrologists and eight FCPS trainee Fellows. Our fellows will start graduating from 2013.

Dialysis at our unit was started soon after the start of the hospital. Our dialysis unit has grown up from just couple of machines to six machines about eleven year ago, and now we have 33 machines. The dialysis unit is open 24/7, even on the holidays. The number of the dialysis has increased from couple

of hundred patients per month to 2000 per month. Our dialysis staff is quite competent and hard working and eager to come up to the expectations of the patients.

We have started CRRT treatments for critically ill patients. We also perform kidney biopsies and dialysis access of all kinds is made at our hospital period. We have an active living-related kidney transplant program. Our next few years we would like to initiate peritoneal dialysis program.

We would like to have a custom made dialysis unit with 50 stations and build a chain of satellite dialysis units in various parts of the country where our trained fellows can facilitate patients near to their homes and start their career in Nephrology.



Endocrinology

Diabetes and its complications constitute a major segment of our patients coming to Endocrinology. At Shifa our Endocrinology department is busy in taking care of these and other endocrine patients. Teaching of insulin

use, diabetic diet, diabetic foot care and prevention of the complications of diabetes are the areas where we are making a difference in the life of these patients.

Allergy/ Clinical Immunology

The section of Allergy/Clinical Immunology caters to a wider number of allergies related afflictions including bronchial asthma, allergic rhinitis, allergic conjunctivitis, skin rashes/itching, allergic contact dermatitis, atopic eczema, allergic drug reactions, food allergies, pollen allergies and recurrent infections. The section led by an

experienced board certified consultant, also conducts allergy skin tests with various techniques. Allergy vaccination injections (immunoa therapy) are also available. The Allergy clinic also deals with life threatening anaphylatic disorders and insect sting allergies, and also offers environmental control methods

Psychiatry

The department of Psychiatry is recognized for its expertise in the provision of clinical, academic and therapeutic services to adults and old age people in the behavioral and psychiatric disorders. The department also offers personal psychotherapeutic care for individuals, couples and families with emotional and psychological

distress.

The department also offers long-term care to address drug addictions and related psychiatric disorders. The multidisciplinary team includes consultants with training from prestigious international institutions.

Dermatology

Dermatology at Shifa provides best facilities for the diagnosis and treatment of skin, hair, and nail diseases. Electrocautery, cryotherapy and surgical procedures to

remove moles, cysts and warts are some of the services being offered here.

Nutrition Clinic

Nutrition is a scientifically rigorous discipline that focuses on the impact of food habits on health and disease management. Globally, nutrition is considered to be an integral part of the medical care of all patients. Nutritional therapy leads to a nutritional prescription, which may include an oral diet plan, anteral and parenteral nutrition for the caring of hospitalized and home patients. Latest dietary delivery techniques are used to administer nutrients both safely and effectively. Clinical services provided by the nutrition team includes; outpatient and inpatient consultation, home nutritional

support educational programs for patients, clinicians and professionals. Additionally, our department offers special programs related to weight management, hyperlipidemia, diabetes, eating disorders and hypertension treatment. The program offered by the Nutrition Clinic is supported by the latest computer-based assessment that ascertains the exact amount of fat, lean body mass, water content and basal metabolism of the individuals, which can lead to very precise diagnosis and treatment. Every nutritional plan is tailored to the specific need of individual patients.

Anesthesia & Pain Medicine

Anesthesiology department is providing state-of-the-art care for all types of surgical procedures, including but not limited to, adult cardiothoracic, congenital cardiac, neurosurgical, major vascular, transplant, general surgical, urological and Ob/Gyne surgeries. They are also providing anesthetic care to MRI, CT and ultrasound guided procedures etc. The department also provides additional anesthesia services like pre-anesthesia evaluation, epidural anesthesia, patient controlled analgesia, acute pain management and chronic pain management. Our anesthesiologists are highly qualified professionals who have been exclusively trained in US, UK and Pakistan. Our anesthesiology program is fully recognized for PG training by College of Physicians & Surgeons of Pakistan. The department has nine state-of-the-art Operation Theaters, which are equipped with the most modern and latest instruments and equipments. Excellent infection control is the hall mark of our operation theaters.

Our Pain Management clinics cover prevention, treatment and alleviation of chronic and acute pain like cervical and lumbar radiculopathies, arthritis etc. We have modern modalities and highly trained therapists are available for managing pain. Patients of Cervical spondylosis, lumbar spondylosis etc. can get benefit from this service. Our pain management team includes medical practitioners, clinical psychologists, physiotherapists, occupational therapists, and nurse practitioners. We are the only private hospital in the Capital City offering Pain Medicine facility.

General Surgery

The surgical side of medicine has practically revolutionized the modern healthcare, especially with the addition of minimal invasive surgeries in different specialties. The department of surgery forms an essential part of any hospital and all the more so for Shifa because it is the only quality tertiary-care Hospital in the region. The section of General Surgery at Shifa offers variety of services by a strong team of seasoned surgeons. The section offers surgical solutions in a wide range of conditions like thyroid disease, breast, gastrointestinal tract and hepatico-pancreatic and biliary disease. The section has established itself as a centre of excellence in laparoscopic surgery where most of cholecystectomies are done utilizing this method, and service of laparoscopic hernia repair and routine appendectomies are being done also. Shifa being a tertiary care centre has inter-departmental cohesion and support enabling us to provide surgical care and procedures on high risk patients with multi body systems and compromised patients with challenging surgical problems.





ENT

Section of ENT at Shifa, staffed by qualified and experienced consultants, is choice of many with problems of Ear, Nose and Thyroid. Presence of latest diagnostic equipment with video monitoring is making the diagnosis prompt, precise and cost effective.



Shifa Dental Clinic

Dental department started functioning in 2001 with one surgery, two rooms and a reception. Since its inception it has grown manifolds. It is now housed in the state of the art modern purpose built facility that has 5 operatories equipped with German dental chairs, digital x-ray both intra and extra oral. The facility has a large waiting room and there is still room for expansion. Dentistry has its own central sterilization room equipped with type B latest autoclaves. Instruments are packed in pouches and autoclaved. There are 5 consultants and 2 medical

officers. All consultants are foreign trained and specialist in their respective areas of specializations like, Restorative dentistry, Implant dentistry, Prosthetic dentistry, Oral surgery, Pediatric dentistry, Orthodontics, Aesthetic dentistry and smile makeovers, Periodontology procedures involving root planning bleaching and teeth whitening and Endodontics. As multi-specialization dental centre the work load and quality of care has increased over five times and continues to grow.



Our Consultants - Our Pride

Internal Medicine



Dr. Mian Amjad Sohail

Diplomate American Board of Internal Medicine and Member American College of Physicians, Dr. Amjad did Residency from Luthern Medical Center, New York, U.S.A. He is presently working as Consultant Medical Specialist and Director of Medical Services.



Dr. Mazhar Ali Mufti

Diplomate American Board of Internal Medicine and Member American Medical Association, American College of Physicians and American Society of Internal Medicine, he did Residency from Indiana University USA. He is working as Consultant Medical Specialist at Shifa International Hospitals and also teaches in Shifa College of Medicine.



Dr. Tara Jaffery

Diplomate American Board of Internal Medicine and Member American College of Physicians. She completed her Residency from University Of Illinois College of Medicine at Chicago. She is serving as Consultant Internal Medicine, Shifa International Hospitals and Associate Professor of Medicine, Shifa College of Medicine.



Dr. Aamer Nazir Ahmad

Diplomate American Board of Internal Medicine, Member American Medical Association and American College of Physicians, Dr. Aamer Completed Residency in Internal Medicine from The Mount Vernon Hospital, Mount Vernon, New York. He is serving as Consultant Internal Medicine at Shifa International Hospitals.



Dr. Mahmud Majeed

Diplomate American Board of Internal Medicine, Dr. Mahmud completed Residency in Internal Medicine from Corumaugl Valley Hospital, Johnstown USA. He is working as Consultant Medical Specialist at Shifa Hospital Islamabad and Assistant Professor of Medicine at Shifa College of Medicine.



Dr. Maj. Gen. (R) Tauqeer. A. Shah

Diplomate American Board of Internal Medicine and Fellow Royal College of Physicians, Edinburgh, Dr. T.A. Shah did Residency from University of Maryland Hospital Baltimore, USA. He is currently serving as Professor in Shifa College of Medicine.



Dr. Mohammad Ata

Diplomate American Board and M.R.C.P. Edinburgh, Dr. Ata finished Residency from Manchester Victoria Memorial Jewish Hospital, London and practiced medicine in USA. Presently he is working as Professor of Medicine, Shifa College of Medicine and Consultant Internal Medicine at SIH.



Dr. Wajid Yar Khan

Diplomate American Board of Internal Medicine, Member American Medical Association and American College of Physicians, Dr. Wajid did Residency from Michigan State University, East Lansing Michigan, USA. He is working as Consultant Medical Specialist.



Dr. Sheikh M. Ilyas

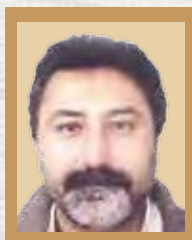
A graduate of King Edward Medical College, Dr. Ilyas is US trained and experienced physician in Internal Medicine. He did Internal Medicine Residency from Flushing Hospital, New York. He was Chief of Medical Staff NWFC Hospital, Florida. Dr. Ilyas is currently serving as Consultant at Shifa Medical Centre, F-11.

Our Consultants - Our Pride



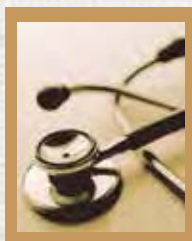
Dr. Mohammad Hanif

Member Royal College of Physicians, UK and Fellow Royal College of Physicians, Glasgow, Dr. Hanif completed Residency from Hallam Hospital, UK and Royal Infirmary Sheffield, UK. He has served as Professor of Medicine, Rawalpindi Medical College and presently working as Consultant at Shifa Medical Center F-11, Islamabad.



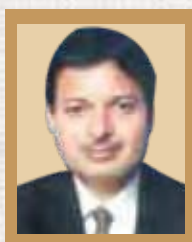
Dr. Syed Javaid Hussain

Dr. Javaid is a Member of Royal College of Physicians (Ireland) as Special Interest in Gastroenterology and Hepatology. He is presently serving as Consultant at F-11 SMC Islamabad.



Dr. Nida Latif

Diplomate American Board of Family Medicine, Dr. Nida did her Residency in Family Medicine from Michigan State University, USA. Currently, she is working at SMC F-11 as Associate Consultant in Family Medicine.



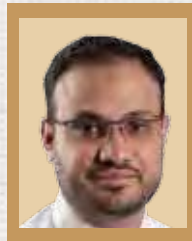
Dr. Tahir Iqbal

A graduate of Rawalpindi Medical College. He is a Fellow and Member of College of Physicians & Surgeons, Pakistan. Presently he is working as Associate Consultant Internal Medicine at Shifa International Hospital.



Dr. Shahzad Khan Siddique

Diplomate American Board of Internal Medicine & Geriatric Medicine. He has done his residency from Stanford School of Medicine, University of South Dakota USA. Currently working as Associate Consultant, Hospitalist at SIH.



Dr. Salman Shoukat

A graduate of Rawalpindi Medical College. He has completed his residency from Charleston Area Medical Center, West Virginia, USA. He is Board certified in Internal Medicine. Currently working as Associate Consultant Hospitalist at SIH.



Dr. Haseeb Khwaja

With rich background as "Emergency Room (ER) and Primary Care Doctor", Dr. Haseeb is presently serving as consultant in Internal Medicine in SIH. He is an AKUH Graduate and medical specialist and completed his Residency Training from Michigan, USA. He also worked as ER Physician in Minnesota, USA.



Dr. Muhammad Ashraf

He is a graduate of Ayub Medical College, Abbottabad. Dr. Ashraf has done his fellowships from College of Physicians & Surgeons, Pakistan in Internal Medicine & Pulmonology. Currently he is working at SIH as Associate Consultant, Hospitalist.



Dr. M. Yousuf Awan

A Fellow of College of Physicians & Surgeons Pakistan, Dr. Yousuf has previously worked at King Fahad hospital, Al-Baha K.S.A. He also has certificate of eligibility for specialist registration with GMC, UK. Currently he is serving as Consultant Hospitalist at SIH.



Dr. Nahid Gull

A Graduate from Khyber Medical College, Peshawar and fellow of College of Physicians and Surgeons, Pakistan, in General Medicine. She served Khyber Teaching Hospital, Peshawar for three years as Senior Registrar. Presently she is serving SIH as Associate Consultant Internal Medicine.

Our Consultants - Our Pride

Allergy & Immunology



Dr. Athar Niaz Rana
Diplomate American Board of Pediatric and Adult Allergy and Immunology and former president of Allergy Society (Texas, US) for 20 years, Dr. Rana finished Residency training from Rush Presbyterian University, Chicago, USA. He is presently working as Head of Allergy & Immunology Clinic in Shifa International Hospital.



Dr. Brig. (R) M. Zameer
With 22 years of experience in Cardiothoracic Anesthesia, he is working as Consultant Anesthetist in Shifa International Hospital and as Professor of Anesthesia at Shifa College of Medicine.



Dr. Muhammad Ashraf
Consultant Anesthesiologist at SIH for seven years, he is also serving as Director of Residency Program and Assistant Chief of the Department. His areas of interest are FCPS Training, Neonatal and Pediatric Anesthesia, Labor Analgesia and New Anesthetic

Anesthesia & Pain Management



Dr. Shawkat Matabdin
Head of Anesthesia Department in Shifa International Hospital since 1993, Dr. Shawkat is a Member of General Medical Council (England) and Association of Anesthetist of GB & Ireland. He graduated in Medicine from Egypt and took further training from Royal College of Physicians & Surgeons England. He also worked as Consultant Anesthetist in Lister Hospital, Herts, UK. His area of interest is Obstetrics & Neurosurgical Anesthesia.



Dr. Masooma Saeed
A Graduate of Sindh Medical College Karachi, she is working as Consultant Anesthetist at SIH. She completed her Residency Training from Texas Tech University Health Sciences Center, Lubbock, Texas, USA.



Dr. M. Nasir Ayub Khan
He is a Consultant Anesthesiologist at SIH with Graduation and Diploma in Medical Education from University of Dundee, Scotland. He is presently working on the measurement of educational environment of postgraduate institutions of twin cities.



Dr. Harris R. Baig
Dr. Baig received Residency Training in Anesthesia from University of Wisconsin and in Internal Medicine at Wright State University, Ohio, USA. With advanced training in chronic pain management including cancer pain management, Dr. Baig is a vital member of Anesthetists' team in Shifa International Hospital as Consultant Anesthetist. He is Assistant Professor at Shifa College of Medicine.



Dr. Etizaz Haider Kazmi
Dr. Etizaz is working as Associate Consultant Anesthesiologist and he is Member & Fellow of College of Physician & Surgeons Pakistan.

Our Consultants - Our Pride



Dr. Salman A. Saleem

Dr. Salman is an Associate Consultant Anesthesiologist at Shifa International Hospital. His special interest involves Pain Management and he is among the pioneers of Pain Clinic at SIH.



Dr. Matloob Ashraf Shajar

He is a graduate of Khyber Medical College, Peshawar. He is Fellow of Royal College of Anesthesia, UK and fellow of Faculty of Intensive Care Medicine. He has worked as a Consultant Anesthetist, at Nottingham University Hospital NHS Trust prior to joining SIH and has over 12 years of experience in his field. Currently working at SIH as Consultant Anesthesia and Critical Care.

Cardiology



Dr. Habib-Ur-Rehman

Dr. Habib is Diplomate American Board in Internal Medicine and Cardiovascular Diseases, Member American College of Physicians, American College of Cardiology, Pakistan Cardiac Society and Life Savers Foundation. He completed Residency from DC General Hospital Washington, Wayne State University Program Detroit Michigan, Wright State University Ohio and is serving as Chief of Cardiology and Director Catheterization Lab.



Dr. M. Abdul Azim

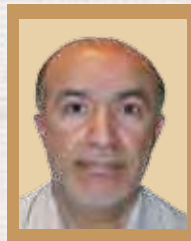
Dr. Azim is graduate of Allama Iqbal Medical College. He has done his Fellowships in IM & Cardiology from College of Physicians & Surgeons, Pakistan. Dr. Azim has completed his residency from AFIC, Rawalpindi. He is presently serving as Consultant Cardiologist at SIH.



Dr. Muhammad Asad

Ali Saleem

Diplomate American Board of Internal Medicine, American Board of Cardiology and American Board of Electrophysiology, Dr. Asad is presently working as Consultant Cardiologist and Electrophysiologist at Shifa.



Dr. Mohammad Tahir Khattak

He is a graduate from Khyber Medical College, University of Peshawar and a member of Royal College of Physicians, Ireland. He holds Diploma in Cardiology from University of London. Currently he is working as Consultant Cardiologist at SIH.



Dr. Saeed-Ullah Shah

A graduate from Khyber Medical College, University of Peshawar. He is a member of Royal College of Physicians and has accreditation of Transthoracic & Transesophageal Echocardiography from British Society of Echocardiography. He is also accredited in Cardiac CT and Cardiac MR. His main areas of interests are Heart Failure, Cardiac Imaging & Cardiovascular Research. He is Consultant Cardiologist at SIH.

Our Consultants - Our Pride

Cardiac Surgery



Dr. M. Tauqeer Akbar

A Fellow in Cardiothoracic Surgery with Diploma in Management for Medical Doctors. He has worked with Basildon and Thurrock University Hospital, UK. Currently he is employed at SIH as Consultant Cardiothoracic Surgeon.



Dr. Shahid Khalil

Having Fellowship from College of Physicians & Surgeons, Dr. Shahid has worked in different hospitals. He is Consultant in Cardiac Surgery at Shifa International Hospital.



Dr. Faridullah Khan

A Fellow of Royal College of Surgeons Edinburgh, UK, Dr. Faridullah has vast experience of more than 18 years in the field of Cardiothoracic Surgery. Presently working as part time Consultant Cardiac Surgeon in Shifa International Hospital.



Maj. Gen (R) Prof. Masud-ur-Rehman Kiani

Member College of Physicians and Surgeons Pakistan and a Fellow of Royal College of Surgeons Edinburgh, UK, Dr. Kiani has experience of leading Department of Surgery at Armed Forces Institute of Cardiology. His present position in SIH is Consultant Cardiac Surgeon.

Dermatology



Dr. Rasheed Ahmed Chaudhry

With vast experience of working as Dermatologist, Dr. Rasheed Chaudhry, Consultant Dermatology, D.Derm (Pak). He is working as Consultant Dermatologist at SIH.



Dr. Ahsan Hameed

A Fellow of College of Physicians & Surgeons in Dermatology. Dr. Hameed received Leadership award for outstanding services to Dermatology and research from American Biographical Institute. He is presently working as Consultant Dermatologist at SIH.



Dr. Ikram ullah Khan

Member Royal College of Physicians (UK) and Fellow Royal College of Physicians (Edinburgh). Dr. Khan got training in Dermatology from Birmingham Skin Center (UK) and served there for 10 years. Presently serving as Consultant Dermatology at SIH.



Dr. Riaz A. Sheikh

Diploma in Dermatology & Venereology from Vienna University (Austria), Dr. Sheikh was awarded honorary fellowship by Royal Society of Health, UK. With over 25 years of experience, he is presently serving as Consultant Dermatologist at Shifa Medical Center F-11, Islamabad.

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Dr. Saman Wasim

Dr. Saman is working as Associate Consultant Dermatologist at SIH. Her areas of special interest are Laser and Cosmetology. She has postgraduate diploma in Dermatology from University of Cardiff (UK).



Dr. Aamna Batool Khan

A Member & Fellow of College of Physicians & Surgeons of Pakistan. Dr. Aamna has previously worked at PNS Shifa Hospital, Karachi. Currently she is serving as Associate Consultant Dermatologist at SIH.



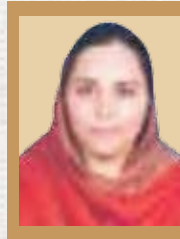
Dr. Riffat Yasmin

She is a Fellow and Member of College of Physicians & Surgeons, Pakistan. Presently she is working Associate Consultant, Dermatologist at Shifa Medical Centre, F-11.



Dr. Noeen Arshad

He has to his credit Advanced Graduate Study in Pediatric Dentistry from Boston School of Dental Medicine. He is Diplomate American Board of Pediatric Dentistry. Member of different professional organizations like College of Diplomates of American Board of Pediatric Dentistry, American Academy of Pediatric Dentistry, World Federation of Orthodontists and American Association of Orthodontists. He is working as Consultant Dental Surgeon at SIH.



Dr. Nadia Aman

A Fellow of College of Physicians & Surgeons Pakistan. She has completed her residency from Aga Khan University Hospital in Operative Dentistry. Currently employed at SIH as Associate Consultant Dental Surgeon.



Dr. Moniza Abedi Sohail

Currently serving as Consultant Dental Surgery at Shifa Medical Center F-11, Islamabad, Dr. Moniza graduated from Baqai Medical & Dental College and got certified in Cerec 3D Technology from USA.



Dr. Azhar Sheikh

A Graduate from De'Montmorency College of Dentistry, Lahore, he is a fellow of Royal College of Surgeons of Ireland, UK. His further qualifications are FDS, RCS, FFD RCS and FDS Oral Surgery from UK. His fields of interest are Dental implantology, Trauma & Orthognathic Surgery. He served in UK for more than 20 years with memberships in multi-health sectors including British Association of Oral & Maxillofacial Surgeons. He is working as Dental Surgeon at SIH.

Dentistry



Dr. Imtiaz Ahmad

With Trainings from University of London, Royal Australian College of Dental Surgeons Sydney and London General Dentistry, Dr. Imtiaz is working as Consultant Dental Surgeon at Shifa International Hospital. He performs full range of Restorative Dentistry like Restorations, Root Canal Treatments, Crowns, Bridges, Ceramic & Metallic Inlays, Procelain Veneers, Cosmetic Dentistry including Smile Makeovers and Tooth Whitening.



Dr. Syed Hamid Ali Nasr

Consultant Dentist at Shifa International Hospital, Dr. Hamid got Fellowship of FDRCS, UK. He graduated from Montgomery College of Dentistry Lahore and after foreign training also served in Saudi Arabia.

Our Consultants - Our Pride

Emergency



Dr. Abdus Salam Khan

A Graduate of DOW, class of 1990, Dr. Abdus Salam completed Residency in Internal Medicine from Mount Sinai, NY, USA. He worked for quite some time as ER Physician, Hospitalist and Primary Care Physician in Different parts of Florida, USA. Presently he is serving as Director of ER at SIH.



Dr. Khawaja Junaid Mustafa

He is a graduate of Rawalpindi Medical College and a Member of College of Emergency Medicine, UK. He has worked as a Consultant Emergency Medicine in Weston General Hospital, Somerset, UK. Currently serving SIH as Associate Consultant, Emergency Medicine.

Endocrinology



Dr. Nasim Yusuf

A Fellow in Endocrinology from McGill University, Montreal (Canada), Dr. Nasim is presently working as Consultant Endocrinologist at SIH. She was working in the same capacity at Reddy Memorial Hospital and Royal Victoria Hospital. Her areas of expertise and interest include thyroid, pituitary, adrenal, sex hormones problems, obesity, metabolic disorders, hirsutism, growth problems and calcium and bone problems.



Dr. Osama Ishtiaq

A fellow of College of Physicians and Surgeons Pakistan, Dr. Osama is a member of Endocrine Society USA, Pakistan Endocrine Society and European Thyroid Association. Having over 10 research papers to his credit, he also pioneered Pakistan's first online

database of Pakistani Medical Journals. Currently working as Consultant Endocrinologist at SIH. His special interests include Clinical Research & Tele Medicine.

ENT



Dr. Zafar Iqbal

An experienced ENT Surgeon, Dr. Zafar performs all type of ENT surgeries. His areas of special interest are Rhinology and Ear Surgery. He is serving as Consultant ENT at Shifa International Hospital.



Dr. Zafar Rabbani

Serving as ENT Consultant at Shifa International Hospital and Head of ENT Department in Shifa College of Medicine, Dr. Zafar is Fellow of College of Physicians and Surgeons. His special interests include Rhinology, head and neck surgery and Otolaryngology.



Dr. Badar Us Salam

Dr. Badar is graduate of Khyber Medical College. He did his residency training in various hospitals in UK and Ireland. Dr. Badar is a Fellow of Royal College of Physicians Edinburgh. Recently he is working as Consultant ENT Surgeon at SIH.



Dr. M. Yasir Khan

Dr. Yasir is a Fellow of the College of Physicians and Surgeons, Pakistan. His special interest is Otolaryngology. He is Associate Consultant ENT at F11 Medical Center.

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Dr. M. Jawad Zafar

A graduate from Rawalpindi Medical College. He is fellow of College of Physicians and Surgeons Pakistan and member Royal College of Surgeons, UK. Currently he is serving Shifa College of Medicine and SIH as Assistant Professor and Associate Consultant ENT, respectively.



Dr. Farzana Shafqat

With more than 30 publications in national and international Medical Journals, Dr. Farzana is presently serving as Consultant Gastroenterologist at Shifa International Hospital. Her experience includes serving as Assistant Professor at Shaikh Zayed Postgraduate Medical College.



Dr. Sarim Hasmat Lodi

He is a graduate of Dow Medical College, Karachi and has done his Fellowship from Royal College of Surgeon, Glasgow. Dr. Lodi has worked as Consultant ENT Surgeon, at Hill Park General Hospital, Karachi prior to joining SIH family. In UK, he has served over 14 years in his field. Currently serving as Associate Consultant ENT.



Dr. Najmul Hassan Shah

Presently Consultant Gastroenterologist at SIH, he has served in the same capacity in Birmingham Heartlands Hospital (UK). Special interest of this Fellow of the College of Physicians and Surgeons (Pakistan) and Member Royal College of Physicians, London, include therapeutic endoscopy, including ERCP, Liver & GI cancer and Hepatobiliary diseases.

Gastroenterology



Dr. Nasir Khokhar

Diplomate American Boards of Internal Medicine and Tropical Medicine, Dr. Khokhar is Member of American College of Gastroenterology. He did Residency from Wright State University Hospitals Dayton, Ohio, USA. His rich experience includes service as Chairman Department of Medicine Pekin Hospital, USA. Presently he is working as Consultant Gastroenterologist, Chief of Internal Medicine SIH. Patient care, Research and Education are his areas of interest.



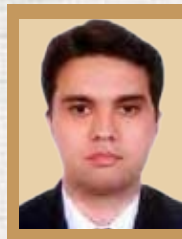
Dr. Saeed Zameer

Diplomate American Board of Gastroenterology and American Board of Internal Medicine, he comes with several years of work experience as Consultant Gastroenterologist in the US. He is currently working as Associate Consultant at SIH.



Dr. Shaheen M. Mufti

With graduation in Medicine from KEMC, Dr. Shaheen is Diplomate American Board of Internal Medicine. Currently she is working as Consultant Internal Medicine and Gastroenterology at SIH.



Dr. Mohammad Salih

A graduate of Khyber Medical College. He is a fellow of College of Physician & Surgeons Pakistan in Gastroenterology and Internal Medicine. He has completed his residency in Internal Medicine from Sheikh Zayed Medical Complex, Lahore. Currently serving SIH as Consultant Gastroenterologist.

Our Consultants - Our Pride

General Surgery



Dr. Ghulam Siddiq Khan

Working as Consultant in General Surgery at SIH, Dr. Siddiq is a seasoned surgeon. A Fellow of Royal College of Surgeons, his special interests include Laparoscopic Surgery, Pancreatobiliary Surgery and Colorectal Surgery. He has extensive experience in major abdominal surgeries.



Dr. Maj. Gen. (R) M. A. Hashmi

Author of a book and over 45 research articles, he is serving as a Professor of Surgery and Consultant General Surgeon at SIH. He has dual Fellowships, from Royal College of Surgeons Edinburgh, UK in General Surgery and from College of Physicians and Surgeons in Pediatric Surgery. He has worked in UK, Saudi Arabia and Pakistan.



Dr. Mohammed Amir

A graduate of King Edward, he postgraduated from College of Physicians and Surgeons Pakistan and Royal College of Surgeons UK. Presently working as Associate Professor of Surgery in SCM and Consultant General Surgeon in SIH. Special Interests include Laparoscopic Surgery, Colorectal with emphasis to Fistula, Hemorrhoids, Thyroid and Breast Diseases.



Dr. M. Iqbal

With enviable experience of over 40 years, Dr. Iqbal is presently serving as Consultant in Shifa International Hospital and Professor of Surgery in Shifa College of Medicine. He graduated in 1963 and earned postgraduate qualification from Royal College of Surgeons, UK.



Dr. Tahir Hussain

Trained in General and Vascular Surgery from UK, Dr. Tahir is a Fellow of College of Physicians and Surgeons (Pakistan). He is also a Member of European Society of Vascular Surgery. He is working as Consultant General Surgery at SIH.



Dr. Arif Malik

Diplomate American Board of Surgery with Fellowship in Laparoscopic, Bariatric and Robotic surgery (USA). An Associate Consultant Surgeon of SIH, he is a Member of Society of American Gastrointestinal and Endoscopic Surgeons (SAGES).



Dr. M. Mussadiq Khan

A senior Thoracic & Vascular Surgeon, Professor of Surgery and American Board Certified. He is presently working as part time Consultant Surgeon at SIH. He has to his credit decades of illustrious career as a surgeon and academic.

Liver Transplant



Dr. Faisal Saud Dar

Trained in Hepatopancreaticobiliary Surgery from UK, Dr. Faisal is a Fellow of Royal College of Surgeons UK and College of Physician & Surgeons, Pakistan. He has also worked at Kings College hospital, UK. His special interest is in Pediatric & adult to living donor transplantation.

Our Consultants - Our Pride

Nephrology



Dr. Khawaja Sayeed Ahmed

Member of American Society of Hypertension, American Society of Nephrology, International Society of Nephrology, National Kidney Foundation USA and Pakistan Society of Nephrology. He is a graduate of Dacca University. He did his residency from Westchester County Medical Center & NY Medical College. He is working as Consultant Nephrologist at SIH.



Dr. Syed Nayer Mahmud

With Fellowship in Nephrology from University of Oklahoma, Dr. Nayer did Residency in Internal Medicine from Albert Einstein College of Medicine, New York. At present, he is serving as Consultant Nephrologist and Transplant Physician at Shifa International Hospital and Assistant Professor (Medicine) at SCM.



Dr. Syed Farhat Abbas

A Fellow of College of Physicians & Surgeons Pakistan, Dr. Abbas has previously worked at Pakistan Institute of Medical Sciences. Currently he is serving as Associate Consultant at SIH.

Neurology



Dr. Arsalan Ahmad

Dr. Arsalan has done his graduation & residency from Dow Medical College Karachi. Currently he is serving as a Consultant Neurologist at Shifa International Hospitals Limited, Islamabad.



Dr. Maimoona Siddiqui

A Graduate of Dow Medical College Karachi, Dr. Maimoona did residency from Liaquat National Hospital. She is Fellow of College of Physicians & Surgeons Pakistan, in IM & Neurology. She is presently serving as Consultant Neurologist at SIH.



Dr. M. Azhar Saeed

He is graduate of RMC & a Fellow of College of Physician & Surgeons Pakistan. He has worked as Neuro Physician at Fauji Foundation Hospital for six years prior to joining SIH. He is working as Associate Consultant Neurologist at SIH.



Dr. Rao Sohail Yasin Khan

A Fellow of College of Physicians and Surgeons Pakistan, Dr. Rao Sohail has been working as Assistant Professor at Department of Neurology (PIMS) since 2006. Presently he is working as Associate Consultant Neurologist at Shifa International Hospital.



Dr. Muhammad Amjad

Dr. Amjad has done his graduation from Punjab Medical College, Faisalabad. He is a fellow of College of Physicians and Surgeons, Pakistan in Neurology and member CPSP in General Medicine. He has completed his residency from PIMS, Islamabad, and Shaikh Zayed Hospital, Lahore, in Neurology and Medicine respectively. His experience includes serving Fauji Foundation Hospital, PIMS, and Shaikh Zayed Hosiptal. Presently he is serving SIH as Associate Consultant Neurologist.

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Dr. Inam-e-Khuda

A graduate of Dow Medical College, Karachi, and fellow of College of Physician & Surgeons Pakistan in Neurology. He has completed his residency in Medicine & Neurology from Abbasi Shaheed Hospital & Dow University of Health Sciences, Karachi, respectively. He is member of Saudi Commission for Health specialities. He is currently serving as Associate Consultant Neurologist at SIH.

Neuro Surgery



Dr. Inayat ullah Khan

Dr. Inayat did Residency from Royal College of Surgeons UK and gained vast experience in various hospitals of UK & Ireland. Trained in dealing with Spinal & Vascular neurosurgical problem & cerebral tumor, he is presently serving as Consultant Neurosurgeon at SIH.



Dr. Muhammad Nadeem

Specialized in Neuro Trauma, Brain & Spine problems including Prolapsed Intervertebral Diseases, Spinal stenosis and Tumors. Dr. Nadeem is trained from the College of Physicians and Surgeons, Pakistan. With experience in Stroke Surgery, he is currently serving as Consultant Neurosurgeon at Shifa International Hospital.



Dr. Anwar Ahmad

A Fellow of Royal College of Surgeons & College of Physicians & Surgeons Pakistan with special interest in Pediatric Neuro Surgery. Previously worked with North Staffordshire University Hospital. Currently working as Consultant Neurosurgeon at SIH.



Dr. Shahid Ahmed Shah

A fellow of College of Physician & Surgeons Pakistan in Neurosurgery. He has completed his residency in Neurosurgery from Liaquat National Hospital, Karachi and served the same Hospital for seven years. Currently he is serving at SIH as Associate Consultant Neurosurgeon.

Nutrition Clinic



Dr. Rezzan Khan

With Ph.D in Food and Nutrition from Kansas State University, USA, Dr. Rezzan is a Member of American Dietetic Association and Pakistan Dietetic and Nutrition Association. Currently a Consultant Nutritionist at SIH, Dr. Rezzan has worked as Research Assistant in Iowa State University, USA and Head of Food Technology Department in Gazi University, Turkey.

Nuclear Medicine



Dr. S. Rafaqat Ali Jafri

He is a graduate from Nishtar Medical College, Multan and attained his Masters degree in Nuclear Medicine from University of London, UK. He is also Fellow of College of Physicians and Surgeons Pakistan, in Nuclear Medicine. Furthermore, he is Overseas member of British Nuclear Medicine Society, UK. He has a vast experience of over 34 years in the field of Nuclear Medicine. Currently working as Consultant Nuclear Medicine at SIH.

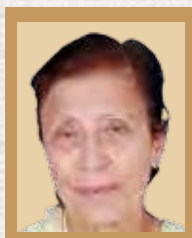
Our Consultants - Our Pride

OBS/Gynaecology



Dr. Mrs. K. S. Raja

A Professor and Consultant, she possesses DRCOG, MRCOG and FRCOG from Royal College of OBS & Gynae UK. She got On Job Post Graduate Trainings from 1961-1969 at different hospitals of UK. She is a Supervisor for Postgraduate Trainees from the College of Physicians and Surgeon of Pakistan and Royal College of OBS/ Gynae, UK. She is also a Member of Pakistan Society of OBS & Gynae and a Life Member of General Medical Council.



Dr. Mah Parveen Qazi

A Member and Fellow of Royal College of Gynecology UK, Dr. Mah Parveen is serving as Consultant Obstetrics & Gynecology at SIH. She completed her Residency Training from Royal Gwent Hospital Newport Monmouthshire South Wales UK. Besides serving in different towns of Pakistan, She also worked as Registrar Obs/ Gynae in South London Hospital for Women & Children's in London.



Dr. Nabia Tariq

Professor of OBS/ Gynae and Head of Department of OBS/Gynae in Shifa College of Medicine, Consultant Gynecologist at SIH for more than 10 years. She is an examiner and supervisor of Undergraduate and Post Graduate medical programs. In addition to her obstetrics experience, her area of special interest is gynecological endoscopies.



Dr. Brig. (R) Azra Batool

Having special interest in Fetal Medicine and Gynae Micro Surgery and Training from UK and USA, Dr. Azra is working as Professor in Shifa College of Medicine and Chief of OBS/ Gynae in Shifa International Hospital. She is also a Faculty Member of CPSP, Convenor of MCPS & FCPS Exams, Member of Accreditation team of CPSP & PMDC and Pakistan Society of Gynae/OBS.



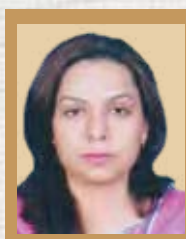
Dr. Taqdees Naqaish

Currently working as Consultant Gynecologist at Shifa International Hospital, Dr. Taqdees is a Member of Royal College of Gynecology, UK. With overseas experience in the field of Gynecology to her credit, Dr. Taqdees is particularly interested in the infertility.



Dr. Shazia Fakhar

With Fellowship in OBS/ Gynecology after graduating in 1996, Dr. Shazia is looking forward to put her mark in the field of Minimal Invasive Surgery. She is presently working as Consultant Gynecologist at Shifa International Hospital.



Dr. Tasneem Akhtar

She is a Fellow and Member of College of Physicians & Surgeons, Pakistan. Currently she is working as Associate Consultant Gynecologist at Shifa Medical Centre, F-11.



Dr. Huma Tasleem

Dr. Huma Tasleem is an Assistant Professor of Obstetrics and Gynecology at Shifa College of Medicine and Associate Consultant in SIH. She has done FCPS.

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Dr. Shamsa Rizwan

A Fellow and Member of College of Physicians & Surgeons Pakistan in Obstetrics & Gynaecology with Diplomas of Epidemiology from London School of Hygiene & Tropical Medicine, Dr. Shamsa is working at Shifa Medical Center F-11, Islamabad as part time Associate Consultant OBS/ Gynae.



Col(R) Dr. Saleem Ahmed Siddiqui

Diplomate American Board of Internal Medicine and American Board of Medical Oncology since early seventies, Dr. Siddiqui passed residency from Lutheran Medical Centre, Brooklyn, N.Y, USA. He is presently serving as Consultant Oncologist at SIH.

Oncology



Dr. Mohammad Ali Afridi

Diplomate American Board of Therapeutic Radiology and Member of American College of Radiology & American Society of Therapeutic Radiology & Oncology, Dr. Afridi completed Residency in Radiation Oncology from Rosewell Park Memorial Institute Buffalo, New York. With over 30 years experience in USA and Pakistan, he is serving as Consultant Radiation Oncologist & Head of Department.



Dr. Kamran Rashid

Diplomate American Board of Internal Medicine, American Board of Oncology and American Board of Hematology with Fellowship in Bone Marrow Transplant, Dr. Rashid is currently working as Consultant Oncologist at SIH.



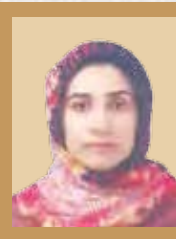
Dr. Shoaib Ahmed

A Fellow of College of Physicians and Surgeons, Pakistan in Radiation Oncology. He has served Shaukat Khanum Memorial Cancer Hospital, Lahore for 6 years. Prior to joining SIH, he was working as Assistant Consultant Radiation Oncologist at King Fahad Medical City, Riyadh, Saudi Arabia. Presently working as Associate Consultant Oncologist at SIH.



Dr. Mohammad Salim Khan

A Fellow of Faculty of Radiologist Royal College of Surgeons, Ireland & Diplomate of Medical Radiotherapy (UK), he completed Residency from Christie Hospital and Holt Radium Institute, Manchester U.K. With over 30 years of experience of teaching and practicing medicine in Canada, UK and Pakistan, he is presently serving as Consultant Radiation Oncologist & Medical Director in SIH.



Dr. Saira Hassan

She is a Diplomate American Board in Internal Medicine, Hematology & Oncology. She has completed her graduate training in Hematology/ Oncology from Baylor College of Medicine/MD Anderson Cancer Center, Houston. Prior to joining SIH she has worked as Consultant Hematologist/ Oncologist in Shaukat Khanum Cancer Hospital. Presently serving SIH as Consultant Oncologist.

Our Consultants - Our Pride

Ophthalmology



Dr. Zeba Ilyas Matin

A Fellow of College of Physicians and Surgeons Pakistan and Royal College of Surgeons Edinburgh, UK, Dr. Zeba is serving patients with extensive 10-years Post-Fellowship experience. Her special interests involve OWD Segment, Phacoemulsification for cataract surgeries, Corneal Graft Operation and Squint Correction. She is head of Ophthalmology Department.



Dr. Sadia Farooq

A Gold Medalist of her medical school, she is working as Associate Professor in Shifa College of Medicine and as Consultant Ophthalmologist at SIH. She is also a Member of College of Physicians & Surgeons and Fellow of the Royal College of Surgeons. Her special Interests involve Glaucoma, Cataract & Plastic Surgery.



Dr. Farooq Afzal

A King Edward graduate, Dr. Farooq is a Fellow of Royal College of Surgeons Ireland, Royal College of Surgeons Glasgow and Royal College of Ophthalmology London, UK. With experience of over a decade from UK and Saudi Arabia, he is presently working as Consultant Ophthalmologist at SIH.



Dr. Sulman Jaffar

A Fellow of Royal College of Surgeons UK & College of Physician & Surgeons, Pakistan. He has completed his residency from Holy Family Hospital. Currently he is working as Associate Consultant Ophthalmologist at SIH.

Orthopedics



Dr. Sajjad Hassan Orakzai

He is a graduate of Khyber Medical College and completed his residency from various hospitals of Ireland. He has done his Fellowship from Royal College of Surgeons in General Surgery and Trauma & Orthopedics. Previously worked with Midland Regional Hospital, Tullamore, Co. Ofally, Ireland. Currently he is working at SIH as Consultant Orthopedic Surgeon.



Dr. Waqar M. Jan

With Fellowships from Royal College of Surgeons in General Surgery and in Trauma & Orthopedics, Dr. Waqar has worked in Trauma & Orthopedic Surgery in Ireland for 13 years. He is presently working as Consultant Orthopedic Surgeon at SIH.



Dr. Mir Amanullah Khan

A Graduate from Khyber Medical College, Peshawar. He is a fellow of Royal College of Surgeons, Ireland, in Trauma & Orthopaedic Surgery. Member of CORIN and WRIGHT having special interest in Young Hips Surgery and Arthroscopic Surgery. He served Cross house Hospital, Scotland, UK, for seven years as Professor and Consultant Orthopaedic Surgeon. Currently he is serving SIH as Consultant Orthopaedic Surgeon.



Dr. Aamer Nabi Nur

Consultant Orthopedic Surgeon at SIH, he graduated from King Edward Medical College Lahore and did Residency in Orthopedics from Agha Khan University Hospital Karachi. He also served as Senior Registrar Orthopedics At Royal Sussex County Hospital, UK.

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Psychiatry



Dr. Mohammad Amin

A former Assistant Professor in McGill University and Director (Psychiatric Research) at Reddy Memorial Hospital, Quebec, Dr. Amin is presently serving as Dean Shifa College of Medicine and Consultant Psychiatrist at Shifa International Hospital. He is Diplomate American Board of Psychiatry and Neurology. He is also a member of Royal Medical Psychological Association, Association for the advancement of sciences USA, International Psychogeriatrics Association and Canadian Academy of Geriatrics.



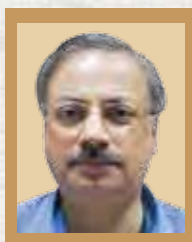
Dr. Abdul Wahab Yousafzai

A Fellow of College of Physicians & Surgeons Pakistan with Diploma in Psychological Medicine. Previously he has worked as Assistant Professor of Psychiatry at Ayub Medical College & Aga Khan University and currently he is employed as Consultant Psychiatrist at SIH.



Dr. Muhammad Habib

Dr. Habib is Member of Royal College of Psychiatrists, England. He did Residency from Cherry Knowle College of Psychiatrists, England and working as Consultant Psychiatrist at SIH for last ten years.



Dr. Rizwan Taj

With over 30 research papers to his credit, Dr. Rizwan is working as Consultant Psychiatrist with Shifa International Hospital. He is a member Royal College of Psychiatrists, London and has diplomas of Psychological Medicine, Management for Medical Doctors and Clinical Psychiatry from Royal College of Surgeons, Ireland. He is also serving as Professor & Head of Psychiatry at Pakistan Institute of Medical Sciences.

Pediatrics



Dr. Musarrat Hussain

American Board Certified Pediatrician, he has vast experience in General Pediatrics, Neonatology and Pediatric Nephrology. A Member of American Academy of Pediatrics and International Pediatric Nephrology Association, he is presently working with SIH as Consultant Pediatrician.



Dr. Yawar Najam

A Graduate of Rawalpindi Medical College, Dr. Yawar did post graduate training and membership from Royal College of Physicians, Ireland. Dr. Yawar's special interest include Neonatology with emphasis on nutrition and Preventive Neonatology. He is serving as Consultant Pediatrician at SIH.



Dr. Ejaz A. Khan

Working as Consultant Pediatrician, Dr. Ejaz has Board Certification from American Board of Pediatrics and Infectious Diseases. His areas of special interest are Pediatric TB and Pediatric HIV. He is also supervising the College of Physicians and Surgeons' Postgraduate Program in Pediatrics.



Dr. Rehana Sayeed

A medical graduate from Dacca (Bangladesh), Dr. Rehana is treating young patients as Consultant Pediatrician in SIH. Present in the field with 40 years of impressive experience and American Board Certification, She is involved with Shifa since day one.

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Dr. Munir I. Malik

An Associate Professor of Pediatrics in SCM and Consultant Pediatrician at SIH, Dr. Munir is American Board Certified. He is also a Supervisor for College of Physicians and Surgeons Pakistan.



Dr. Iffat F. Zaman

Diplomate American Board of Pediatrics, Dr. Iffat did her Residency Training from Pediatric Department of Harlem Hospital NY, USA. Presently a Consultant Pediatrician at Shifa International Hospital, she comes with experience and international exposure as Pediatric Consultant at Bilkent University Ankara, Turkey, Pediatrician at John Hopkins Hospital and Assistant Professor at Lincoln Medical Center of New York Medical College.



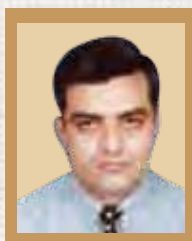
Dr. Mazhar H. Raja

A graduate of Nishter Medical College, Multan and a Fellow of Royal College, Pediatrics, Child Health, London. He has completed his residency in Gen. Paediatrics & Neonatology from Leicester University Hospital UK with Diploma in Child Health from PU, Lahore, Pakistan. Currently he is employed at SIH as Consultant Pediatrician.



Dr. Yasir Iqbal

Fellowship from American Academies of Pediatrics and training in Pediatric Oncology, Dr. Yasir is a Member of American Society of Pediatric Hematology, American Diabetic Association and Saudi Medical Council. He did Residency Training from Winthrop University, Mineola, USA. American Board Certified Dr. Yasir diagnoses & treats Childhood Malignant & Benign Hematologic Disorders. He is working at SIH as Consultant Pediatrician.



Dr. Shahzad Munir

With Fellowship in Pediatric Medicine from College of Physicians & Surgeons Pakistan to his credit, he serves as Associate Pediatric Consultant in SMC F-11, Islamabad. He is also working as Assistant Professor at Children Hospital, PIMS, Islamabad.



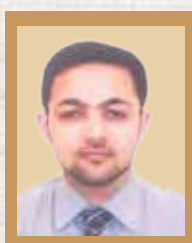
Dr. Masood Khan

American Board Certified Pediatrician with Diploma in Child Health from Royal College of Surgeons, UK. Previously he has worked with Beatrice Community Hospital USA. Currently employed at SIH as Consultant Pediatrician.



Dr. Shehla Chaudhary

A Member and Fellow of College of Physician & Surgeons Pakistan. Completed her residency from Benazir Bhutto Shaheed Hospital, Rawalpindi. Currently working as Associate Consultant Pediatrician at SIH.



Dr. Musaddaq Inayat

A graduate from King Edward Medical College, Lahore and is also a Diplomate of the American Board of Paediatrics. He has completed three years of fellowship training in Neonatal-Perinatal Medicine from University of California, Irvine. Presently serving SIH as Associate Consultant Neonatologist.

Pediatric Surgery



Dr. Abid Quddus Qazi

He graduated from Ayub Medical College, Abbotatabad. He is a Fellow of College of Physicians and Surgeons, Pakistan, Intercollegiate Speciality Board of UK and Ireland (FRCS), Royal College of Surgeons, Ireland (FRCSI) & Fellow European Board of

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Paediatric Surgery.

Dr. Qazi was awarded Tamgha Imtiaz by the President of Pakistan, Muhammad Rafiq Tarar for his work in Paediatric surgery and for serving as part of the team in the first successful separation of conjoined twins. Presently, working at SIH as Consultant Paediatric Surgeon.

Plastic Surgery



Dr. Saleem A. Malik

A former Plastic Surgeon of Henry Ford Hospital USA and Marshfield Clinic USA, Dr. Saleem is currently serving as Consultant Plastic Surgeon at SIH. An American Board Certified in Plastic Surgery, he is a Member of American Society of Plastic Surgeons, Pakistan Association of Plastic Surgeons and Pakistan Society of Hand Surgeons.



Dr. Mamoon Rashid

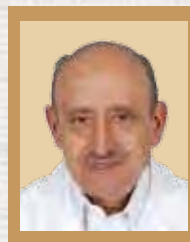
Fellow of Royal College of Surgeons, UK and College of Physicians & Surgeons, Pakistan. He is President of Pakistan Association of Plastic Surgeons and Pakistan Society for Surgery of Hand. Prior to joining SIH Dr. Rashid has worked as Professor and Head of Department of Plastic Surgery at CMH, Rawalpindi. Currently he is working as Consultant, Plastic Surgeon at SIH.



Dr. Muhammad Ibrahim Khan

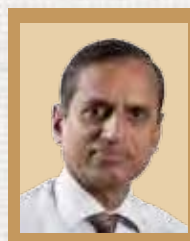
With dual Fellowships from College of Physicians & Surgeons, Pakistan & Royal College of Surgeons, Ireland, Dr. Ibrahim is working at Shifa International Hospital as Consultant Plastic Surgery. With last ten years in Plastic Surgery, Dr. Ibrahim is a Member of Pakistan Association of Plastic Surgeons.

Pathology



Dr. Fazal Illahi

Chief Pathologist at SIH, he is Diplomate American Board of Clinical Pathology and Anatomical Pathology. He did Residency Training at St. Lukes Hospital, USA. Dr. Fazal is a Fellow of College of American Pathologists and American Society of Clinical Pathologists. He is also a Member of State Medical Society Wisconsin, American Society of Clinical Chemistry and American Association of Blood Banks.



Dr. Nazar Ullah Raja

Dr. Raja is Consultant Microbiologist at Shifa International Hospital who pioneered establishing the Mycobacteriology Lab in Shifa. He is M.Sc, M.S (US), Ph.D (UK) and FIBMS, MIBiol, CBiol (UK). He is a Member of British Society of Antimicrobial Chemotherapy.



Dr. Humaira Nasir

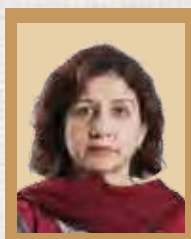
A KE graduate, Dr. Humaira is Member of College of Physicians and Surgeons Pakistan in Clinical Pathology. She has to her credit fellowships from College of Physicians and Surgeons Pakistan in Anatomical Pathology and from Royal College of Pathologists UK in Histopathology & Cystology. She is actively involved in improving quality.



Dr. Imran N. Ahmad

Diplomate Anatomic Pathology, Fellowship in Surgical (Histo) pathology (USA) and Hematopathology (USA), Dr. Imran is working at Shifa International Hospital as Associate Consultant. He is a Member of US and Canadian Academies of Pathology, College of American Pathologists, Society for Hemato Pathology and American Society of Clinical Pathology.

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Dr. Nadira Mamoon

Dr. Nadira is a Fellow of College of Physicians & Surgeons Pakistan in Histopathology & Cytopathology. She has got her training from St. Thomas Hospital London. Her special area of interest is Head & Neck Pathology. Currently she is working as Consultant Histopathologist at SIH.



Dr. Ayesha Junaid

Dr. Ayesha is a Fellow of College of Physicians and Surgeons in Pathology. She is working with Shifa International Hospital as Associate Consultant. Dr. Ayesha is a graduate of King Edward Medical University, Lahore. She is in charge of the Blood Bank.



Dr. Ijaz Ahmad

He has got certifications in Histopathology, Clinical Pathology and Chemical Pathology from Diplomate American Board. Presently working as Consultant Pathologist at SIH.



Dr. Muhammad Usman

He is a graduate of Army Medical College, Rawalpindi and fellow of College of Physicians and Surgeons, Pakistan, in Microbiology. He has special interest in Nosocomial infections and Antimicrobial Resistance. He served Combined Military Hospital and Combined Military Medical College as Consultant Pathologist and Assistant Professor Pathology, respectively. Currently he is serving SIH as Associate Consultant Microbiologist.



Dr. Asna Haroon Khan

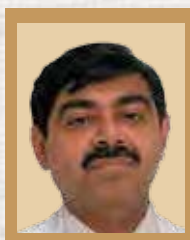
A graduate from Army Medical College, Rawalpindi and fellow of College of Physicians and Surgeons, Pakistan in Histopathology. She is retired Lieutenant Colonel from Army Medical Corps and presently serving SIH as Associate Consultant Pathologist.

Pulmonary & Critical Care Medicine



Dr. Aftab Akhtar

American Board Certified in Internal Medicine, Pulmonary and Critical Care Medicine, Dr. Aftab is currently working as Consultant Pulmonologist and is heading the section of Pulmonary and Critical Care Medicine. He has also served for three years in Saudi Arabia.



Dr. Mobeen Iqbal

Dr. Mobeen is a Diplomate of American Board of Internal Medicine, Pulmonary Medicine and Critical Care Medicine. He has membership of American College of Chest Physicians. His experience includes Fellowship in Critical Care Medicine and Pulmonary Diseases at Long Island Jewish Medical Center, USA. Dr. Mobeen is serving as Consultant in Pulmonology and Critical Care Department of SIH and Prof. of Medicine at SCM.



Dr. Mati-Ur-Rehman

Currently Assistant Professor in Shifa College of Medicine and Consultant Pulmonology in Shifa International Hospital, Dr. Mati-Ur-Rehman has also worked at Jinnah Postgraduate Medical College, Dow Medical College and in Saudi Arabia. He is Member of College of Physicians and Surgeons Pakistan.

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Dr. Kaleem ullah Toori

He is graduate (MBBS and B.Sc in Respiratory Health) from King Edward Medical College, Lahore and University of Lancaster, UK, respectively. He is member Royal College of Physicians, London and fellow Royal College of Physicians and Surgeons, Glasgow. He has worked as Consultant Physician & Pulmonologist in KRL General Hospital for 6 years. Currently serving SIH as Consultant Pulmonologist.



Dr. Ghulam Haider Khalid

A graduate of Bolan Medical College, Dr. Khalid has fellowships from College of Physicians and Surgeons, Pakistan in Internal Medicine and Pulmonology. Previously he has worked at Bolan Medical College, Quetta. Presently he is working as Consultant Pulmonologist at SIH.



Dr. Ikram Ul Haq Qazi

He is a Member of College of Physicians & Surgeons, Pakistan. He has also done his postgraduate Diploma in Tuberculosis and Chest Diseases from UK. Presently he is working as Consultant Pulmonologist at Shifa Medical Centre, F-11.

Rheumatology



Dr. Aasim Rehman

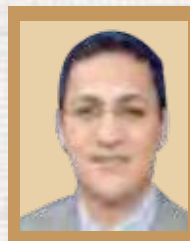
He is Diplomate American Board in Rheumatology & Internal Medicine. He has done his residency in Internal Medicine St. Louse University Hospital, Missouri followed with a Fellowship in Rheumatology at University of South Florida. He is working as Consultant Rheumatologist at SIH.

Radiology



Dr. M. Yousaf Chaudhary

Presently Director & Consultant Radiologist in Shifa International Hospital, Dr. Yousaf is an American Board Certified Radiologist. A Graduate of King Edward Medical College, he finished Residency Training from Roosevelt Hospital NewYork. He has served as fellow instructor for Neuro Radiology at Mount Sinai Hospital N.Y. Dr. Yousaf is a senior member of American Society of Neuro Radiology and Radiological Society of North America.



Dr. Atif Rana

With Special Fellowship in Neuro Radiology and Fellowship in Vascular & Interventional Radiology from University of Alabama, Dr. Atif is working as Consultant Radiologist at Shifa International Hospital. He is an American Board Certified Radiologist and completed his Residency from the Universities of Connecticut and Alabama. He has also practiced and taught in America.



Dr. Rashed Nazir

Dr. Rashed is working as Consultant Radiologist at SIH. He is a Fellow of College of Physicians and Surgeons Pakistan in Diagnostics Radiology.



Dr. Suraya Bano Zafar

She is fellow of College of Physicians and Surgeons, Pakistan in Diagnostic Radiology She was awarded gold medal in subject of Medicine. Currently working at SIH as Associate Consultant Radiologist.

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Dr. M. Wasim Awan

He is Fellow of College of Physicians and Surgeons Pakistan. He did Residency training in KRL Hospital, Islamabad. Presently working as Associate Consultant at SIH, Dr. Wasim has previously worked at KRL Hospital and Rawalpindi Diagnostic Center as part time Consultant Radiologist.



Dr. M. Umar Amin

A graduate of Army Medical College, Dr. Umar is Fellow of College of Physicians & Surgeons, Pakistan with additional Diploma in Diagnostic Radiology. Currently he is working as Associate Consultant, Radiologist.



Dr. Asad Ali Khan

A graduate of Khyber Medical College, Peshawar. He is a Fellow & Member of College of Physicians & Surgeons, Pakistan. He has completed his residency from PIMS, Islamabad. Currently he is working as Consultant Radiologist at SIH.



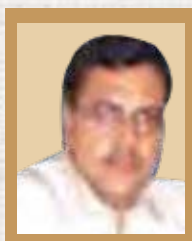
Dr. Mian Khalid Akbar

Fellow of the Royal College of Surgeons (Edinburgh) and Member British Association of Urology and European Association of Urology, he did Residency training in various hospitals in UK and Ireland. Presently he is serving as Consultant Urology with SIH.



Dr. M. Ayaz Khan

Dr. Ayaz is a graduate of Khyber Medical College. He has done his Fellowship from College of Physician & Surgeons Pakistan. Previously he has worked with Fauji Foundation Hospital, Rawalpindi. Currently he is working as Associate Consultant Urologist.



Dr. Faizan Ahmed

Dr. Faizan is Fellow of the Royal College of Physicians and Surgeons, Glasgow, UK and Fellow of the International College of Surgeons. He is a Member of British Association of Urology Surgeons and Pakistan Association of Surgeons. Having got Residency Training from various hospitals in UK, he is working as Consultant Urologist at SIH.

Transplant & Urology



Dr. Saeed Akhtar

Dr. Saeed Akhtar, MD and MPH from Yale University, USA is serving as Chairman Department of Surgery, Director, Transplant Surgery, Consultant Urologist in SIH and as Professor of Urology in Shifa College of Medicine. A Fellow of American College of Surgeons, Dr. Saeed is also a Clinical Professor of Urology & Surgery in Texas Tech University Health Sciences Center, USA.



Dr. Ijaz Hussain

Dr. Ijaz is a graduate of Bolan Medical College, Quetta. He is a Fellow of Royal College of Surgeons, Dublin, Ireland & College of Physicians & Surgeons Pakistan. Previously he has worked with SIUT, Dow University of Health Sciences Karachi. Presently he is working as Associate Consultant, Urologist at SIH.

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Dr. Kamran Majeed

Fellow Royal College of Surgeons, Edinburgh and MD (USA), he did Residency training in various hospitals in UK. He also earned Diploma of Urology from London. Presently he is working as Consultant Urologist at SIH.



Dr. Muhammad Athar Khawaja

A graduate of Nishtar Medical College, Multan. He has done his Fellowship from College of Physicians & Surgeons, Pakistan. Prior to joining SIH he has worked as Senior Registrar in Shifa College of Medicine. Currently working as Associate Consultant Urologist at SIH.

Shifa International Hospitals Faisalabad



Dr. Asad Imtiaz Cheema

Dr Cheema is Diplomate American Board of Internal Medicine, before joining Shifa he served as Assistant Professor of Medicine at King Edward Medical University Lahore. Currently he is working as Chief Medical Officer and Consultant in Department of Internal Medicine at SIH Faisalabad.



Dr. M. Ilyas Shahkir

Diplomate American Board of Medicine. He completed his residency from Lutheran Medical College New York U.S.A. Member of American College of Physician, Member American college of Gastroenterology. He is working as Consultant Physician and Gastroenterologist at SIH Faisalabad.



Dr. M. Shahid Saleem

Dr. Muhammad Shahid Saleem graduated from Punjab Medical College and got M.C.P.S and F.C.P.S (Diagnostic Radiology) from Shaikh Zayed Hospital, Lahore under the COLLEGE OF PHYSICIANS AND SURGEONS PAKISTAN. Currently working as visiting Consultant Radiology in SIH Faisalabad.



Dr. Maqbool Elahi Malik

Dr. Maqbool Elahi Malik has done M.R.C.P from college of Pediatrics and Child Health (U.K). He has also done M.C.P.S from college of Physician & Surgeons of Pakistan and D.C.I from Glasgow. He has vast experience of working in Pediatrics and Neonatology. Currently he is working as Consultant pediatrician at Shifa International Hospital Faisalabad.



Dr. Kaneez Fatima

With Fellowship and Membership in Obst/ Gynecology after graduating from King Edward Medical University Lahore. Dr. Kaneez Fatima is currently working as Associate Consultant in SIH Faisalabad.



Dr. Tariq Mahmood

A member of College of Physician and Surgeons Pakistan. Graduated from Bolan Medical College, Quetta, completed residency training from department of Pediatrics Sheikh Zayed Hospital Lahore. His main interest is in Neonatology and Preventive Pediatrics. Established first Neonatology unit in Faisalabad in 1998 at Ghafoor Bashir Children Hospital Faisalabad. Now serving as a Associate Consultant Neonatology at SIH Faisalabad.

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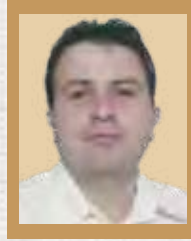
Dr. Khalid Javed Akhtar

Fellow College of Physician and Surgeons of Pakistan, Fellowship in Endourology, National University Hospital Singapore, Ex-Assistant Professor Surgery, Punjab Medical College Faisalabad. Presently working as a Consultant Surgeon Urology at SIH Faisalabad.



Dr. Samina Khalid (F.C.P.S, Gynae & Obs)

Ex Assistant Professor Punjab Medical College Faisalabad. Certified as Laparoscopic and Endoscopic Surgeons from Cairo University Egypt. Certified as IVF physician and Embryologist after training from National University of Singapore. Specialist in ART. Presently working as Consultant Obs/ Gynae at SIH Faisalabad.



Dr. Naeem Asghar

MBBS from King Edward Medical College, Lahore. Fellowship from College of Physicians & Surgeons, Pakistan in Cardiology. Assistant Consultant Cardiologist, SIH Faisalabad.

Strategic Planning Model

Under the guidance of the Board and the CEO, the division has developed and launched a 3-Year Strategic Operating Plan and has initiated Structured Reviews. This process has been institutionalized throughout the organization and it would go a long way in systematic, timely and future-oriented decision making and execution.

The Division has also reviewed Mission, Vision, Values and has defined Strategic Imperatives of the organization to align them with the organizational aspirations and future goals.

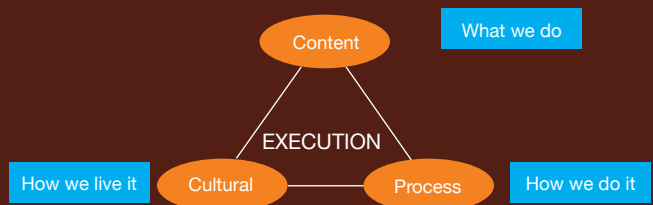
Moreover, the SP&BD has organized Strategic Execution Teams to engage broader leadership team and drive accountability during implementation of the Strategic Plan.

Strategic planning at Shifa is a “Three prong” approach focusing on Content, Process, and Culture. This process facilitate leaders and teams to collaborate effectively on the strategic execution, delivers a methodology to develop the “how” of strategic plan execution, Implements a rhythm to drive execution and monitor progress.

Strategic Planning at Shifa starts with clear guidance from the Board while keeping in view the mission and vision of the organization. This creates strategic priorities called “Strategic Imperatives” which give form to actionable strategies and programs. Goals and Objectives are linked with the strategic imperatives of the organization and later performance reviews, talent reviews and leadership development is based on achievement of these goals and

objectives as depicted by the picture below:

Shifa’s measurement of ongoing operational performance is organized around an unwavering commitment with “Shifa’s Strategic Imperatives” i.e. Seamless/Easy Access Care Delivery, Physician Partnership and Enhanced Clinical Quality, Financial Strength, and Strategic Growth.



Journey Toward JCIA

Shifa International Hospital is committed to providing the highest-quality and safest patient care possible. It has always been involved in activities and initiatives for continuous improvement in its vicinity. As a tertiary care hospital, it has always sought out ways to stay at par with international levels of health care facilities. It has constantly looked for ways to improve patient care, enhance patient satisfaction, increase employee safety, operate with greater efficiency, and achieve better outcomes. The quality process is crucial for health care leaders to improve outcomes and adapt to change as well as to deliver cost-effective and high-quality patient care. Patients will continue to demand health care services that are compliant with quality standards and benchmarks. To meet these expectations, Shifa International Hospital has launched a Quality Initiatives Project to improve the standards of health care. In order to make it effective, the Hospital Quality Initiative is a collaborative effort with the Joint Commission International in the form of the JCI Accreditation Process.

The various quality initiatives touch every aspect of the healthcare system. Some emphasize on improving the overall functioning of the facility and risk reduction, others focus on patient safety and security. Along with that it concentrates on reducing medical errors through the use of health information technology and approaches to managing health care. Infection control is a very important aspect and effective measures are being taken to reduce the risk of Hospital Acquired Infections. Staff education and training is another crucial part of the entire process. Staff members are encouraged to participate in these initiatives and their performance is continuously evaluated by the Quality Control Department. The Hospital Director, managers, and supervisors provide

ongoing evaluation of the quality of care and services provided by the Hospital. Every department has been assigned tasks and is held responsible for the effective functioning of his department by developing a culture of accountability.

There has been visible commitment by hospital leadership and active involvement in the quality improvement activities. An effective connection has been established between the board and the medical staff with continuous support by the administration. An important role played by the hospital leadership is in the creation of a strong quality culture by publicly establishing that the Quality Initiative Program is important and encouraged. The senior leaders have been visiting patient floors to talk with patients and staff to see for themselves the quality challenges and issues the hospital faces. The entire hospital has also been actively participating in receiving accreditation and has been involved in different activities. The Joint Commission standards address the organization's level of performance in key functional areas, such as patient rights, patient treatment, and medication safety and infection control. The standards focus on setting expectations for an organization's actual performance and for assessing its ability to provide safe, high quality care. The benefits of receiving care at a JCI accredited or certified organization include increased confidence in the care provided because it shows that the organization is continually working to provide the highest quality services and is intermittently evaluated by the JCI for compliance with the standards. It strengthens the confidence of the patients in the quality and safety of care, treatment and services and helps in risk management and risk reduction. JCI accreditation is also considered a seal of approval by tourists.

Office of the Chief Operating Officer



COO provides the central leadership to a litany of diversified and complex administrative decisions and their implementation. Office of the COO reports and takes guidance from the Office of the CEO

All the support and ancillary operations at Shifa International Hospital are administered and supervised by the Office of the COO. These operations run hand in hand with the clinical operations to assure highest possible quality service delivery in line with our Strategic Imperatives.

COO provides the central leadership to a litany of diversified and complex administrative decisions and their implementation. Office of the COO reports and takes guidance from the Office of the CEO.



Shifa Center





Emergency Services

Our new and expanded ER is a 24-bedded fully equipped, monitored unit which is staffed with ER trained Medical and Para Medical staff who are capable of dealing with all the major Medical, Surgical, Pediatric and Obs/Gyne emergencies. They are supervised and guided by seasoned consultants who have extensive experience in ER care.

Separate area for Pediatric, Surgical and Medical patients are provided OT, Separate Procedure Rooms, Triage area, Pharmacy, Lab and adjacent Radiology Department are the highlights of our new ER. Level of the patient care and satisfaction is very high in this area.







Diagnostic Services

By LIS it is possible to view every patient's laboratory and all other parameters which are mandatory for accurate diagnosis. Moreover the department is equipped with latest Immunofluorescence techniques for diagnosis of renal and skin biopsies. This technique needs expertise and fluorescent microscope In this regard. The department is getting popularity in diagnosis of renal diseases as it is evident by continuous expanding workload.

Laboratory:

Diagnostic services at Shifa International Hospital are rapidly enhancing to achieve the highest standards in the country. There are six subspecialties including diagnostic surgical pathology, Hematology, Blood Bank services, Chemical Pathology, Microbiology and immunology. These departments are rapidly expanding not only in terms of addition of new automated equipment but also with expert and qualified technical staff using them. These departments are working under direct supervision of experienced and foreign qualified consultants. We believe that the knowledge is ongoing process and are expanding it by continuous training abroad as well as conducting seminars for budding pathologists.

Diagnostic Surgical Pathology:

The diagnostic surgical pathology has grown by leaps and bounds in the past few years and is one of the busiest departments in the country. We offer exfoliative cytology; fine needle aspiration biopsy in addition to routine histopathology. We have extensive panel of Immunohistochemistry antibodies for exact diagnosis of tumor. This panel is continuously expanding day by day. Tumor diagnosis is also made accurate by correlation with radiologic findings and clinical details by our modern Laboratory Information System (LIS). By LIS it is possible to view every patient's radiology and all other parameters which are mandatory for accurate diagnosis. Moreover the department is equipped with latest Immunofluorescence techniques for diagnosis of renal and skin biopsies. This



Nephrologists not only across northern area of country but also from Faisalabad, Lahore and Peshawar are sending this test here. Since department also provides specialized transport media which keeps biopsies fresh even for 2-3 days.

technique needs expertise and fluorescent microscope In this regard. The department is getting popularity in diagnosis of renal diseases as it is evident by continuous expanding workload. Nephrologists not only across northern area of country but also from Faisalabad, Lahore and Peshawar are sending this test here. Since department also provides specialized transport media which keeps biopsies fresh even for 2-3 days. Frozen section facility for quick intra-operative diagnosis is not only used by our hospital but also by adjacent large hospitals where this facility is not available. The diagnostic surgical pathology team includes six histopathologists with special expertise in renal, liver, breast, head, neck and hematopathology. The technical staff is highly trained and experienced going training programme for technicians.

The department is all set to start fluorescence in situ hybridization technique (FISH) initially for Her2Neu for breast and gastric cancer followed by detection of common genetic abnormalities in other tumors. These are needed by our expert oncologists for planning exact treatment of cancer. This is our goal for the coming year.

Tumor registry has also started from Jan 2012 which will be a source of reliable data for research of cancer affecting our population.

Liver transplant at Shifa International Hospital has added another dimension to our pathology services as we are dealing with biopsies from donors and recipients as well as explanted livers. We hope to gain expertise in this area which is so far uncharted territory in this country. The surgical pathology department also runs a vibrant residency programme to obtain fellowship in this field,

with a long list of applicant doctors awaiting entry. We aspire to become one of the best if not “The Best” departments in the whole country comparable to any in the developed world.

Chemical Pathology:

Department of chemical pathology is utilizing the services of a fully automated state-of-the-art integrated chemistry analyzer. This performs routine and specialized chemistry tests including hormones and drug levels. Ever since its installation five years ago the scope of tests being performed on this instrument has been expanding with addition of newer tests every year.

The department is also providing services in emergency rooms as stat chemistry tests which have facilitated health care delivery more efficiently.

As liver transplant has started, the department is keeping pace with it providing results within minutes during surgery which facilitates the work of surgeons and anesthetists.

Hematology:

In addition to routine hematology test, bone marrow biopsies, the department also offer complete set of immune testing for final diagnosis of lymphomas / Leukemias. Department is now recognized for getting fellowship in this specialty and training is also started. We have already started with plan of getting automation in most of sections as this will reduce human error and aid our pathologists for accurate and quick diagnosis.

Blood Bank:

Blood transplant department is supporting big transfusion dependent venture of liver transplantation with successful completion of six critical patients who underwent liver transplant.

It is also offering pre-storage leuko-depletion on request in addition to routine bone marrow stem cell separation and plasmapheresis.



Flow Cytometry Lab:

This is the newest addition to the department of Pathology. Flow Cytometry Lab was recently established after two years through campaign to acquire a state-of-the-art Flow Cytometry. The instrument is 6-8 color laser equipment which is the first of its kind in the whole country. Now Pathology department is fully capable of rendering leukemia and lymphoma diagnosis according to the International Standards in a very short period of time. This process will facilitate the oncologists in their critical management decision. The Flow Cytometric analysis is performed by America Board certified hematopathologist.

PCR Lab:

Shifa International Hospital recently also has established a state-of-the-art PCR Lab for the diagnosis of infectious disease like Hepatitis B, C and genotyping. The lab is equipped with a fully automated walk-away instrument which helps in accurate diagnosis with least chances of any contamination. The results are interpreted by American Board certified Pathologists.

Microbiology Lab:

Microbiology lab is dealing with routine culture and sensitivity testing since the very start of our hospital providing the patient care and catering the needs of our Infection Control department. Since then it established and equipped TB lab which started functioning in 2005 catering the customer's need for TB identification, 1st line TB Drug Sensitivity Testing (DST) and 2nd line TB Drug Sensitivity Testing.



Microbiology lab is dealing with routine culture and sensitivity testing since the very start of our hospital providing the patient care and catering the needs of our Infection Control department.

Department has Initiated new tests for Fabric Industry mandatory for export purposes in 2010 including Quantitative and Qualitative testing.

Microbiology has started full range of viral detection including antibody status.

Established and equipped a new PCR diagnostic lab in 2011 which is going to look after the rapid testing of Mycobacterium tuberculosis from smear positive pulmonary specimens.

Tumor board meeting is one of the big achievements of the departments. As most of cancer patients are now discussed with whole panel of Oncologists, Radiologists, Pathologists and treating Surgeons before their treatment. In addition to routine Clinicopathologic conferences with departments of urology, nephrology and Gynaecology departments also conducts slide seminars monthly for training of junior pathologists all over the region.

Radiology Services

Radiology at Shifa supplements almost every critical specialty by facilitating in prompt and flawless diagnoses. Recent advances in modern technology have revolutionized the health care horizons particularly in the fields of diagnostic and interventional imaging. This has



made early diagnosis and prompt treatment of almost all illnesses ever more feasible. This state of the art facility is staffed and run by a team of dedicated specialists consisting of Neuro, Interventional and diagnostic radiologists as well as ultrasound physicians and technical staff.

General Radiology

General Radiology at Shifa consists of four computerized radiography X-ray rooms capable of entire gamut of standard, general radiological exams transmitted to all Physicians on Picture Archiving and Communication System (PACS), at their respective clinics for urgent access.

MRI

A 24/7 facility in the heart of Capital City Islamabad, MRI at Shifa Radiology is Pakistan's first wide bore MRI (Vantage Titan) with gantry size of 71 cm has patient-focused features which significantly improve patient comfort and increase the range of patients who can



undergo an MR exam. Claustrophobic and obese patients can now be imaged with this higher field strength MR as its wide bore provides a greater feeling of openness. Its technology dramatically reduces acoustic noise, the most significant cause of patient discomfort during an MR exam. Patients sensitive to contrast agents can now have excellent quality non-contrast MR angiogram.

CT-Scan:

The Aquilion ONE 640 slice CT-Scan, also first in Pakistan and South Asia with 16 cm of body coverage in single gantry rotation, is a latest addition to Radiology at Shifa. It images the entire brain and heart within 0.35 seconds with very low radiation dose. State of the art imaging of the stroke in single examination in only 50 seconds including a Non contrast CT, CT-Angiography, CT-Venogram, 4D-Digital Subtraction Angiography and whole brain perfusion. This CT is capable of doing 4D dynamic imaging of joints and 4D Angiographies.

Digital Fluoroscopy:

Digital fluoroscopy reduces the radiation dose through improvements in image quality and improved mechanical features. Better image quality and the ability to manipulate contrast and brightness reduce the number of images

that must be obtained to complete a procedure. They also shorten procedure time and enhance patient throughput.

Ultra Sound:

The Department is also equipped with state of the art Toshiba Xario ultrasound systems. TransRectal Ultrasound for evaluation of prostate, TRUS guided biopsies, local staging of Carcinoma Prostate, male infertility, 3D & 4D ultrasounds, fetal echocardiography and gray scale color Doppler are also unique ultrasounds services offered by Shifa Radiology.

Nuclear Medicine:

The section consists of dual head spect camera providing diagnostic options including cardiac, renal, endocrine and oncologic imaging.





Pharmacy Services

The Division of Pharmacy Services at Shifa international Hospital is not limited to the traditional role of just dispensing of medicines. The primary goal of the division of pharmacy services at shifa international hospital is to provide safe and effective pharmaceutical care to patients in an efficient manner.

Our first line Pharmacists, besides being involved in the traditional jobs of Dispensing medicines and maintaining inventories are involved in reviewing the patients therapy and intervening on, as and when need basis.

Our pharmacists review each and every prescription for completeness and appropriateness of the medications and when required consult with the physicians to modify and correct the prescriptions if and when required.

Previously the in-patients pharmacy (currently the central pharmacy) was located at A-0, and was working with a limited space and resources; most of the tasks were performed by various individuals due to which the tasks were partially fulfilled.

There was limited space for extemporaneous compounding of medicines, and there was no proper sterile area for mixing of chemotherapeutic drugs or for preparation of sterile intra venous preparations.

The pharmacy store (presently Pharmacy ware house) was also operating with limited area and resources.

The division of pharmacy services has bloomed and expanded very rapidly, and has achieved many milestones in the previous few years.

The Central Pharmacy has been shifted to the new H-0 location and has been expanded.

The role of pharmacist has also been improved to provide better quality pharmaceutical care.

The extemporaneous compounding area has been developed into a whole new setup with improved facilities and many new formulations have been added.

The main conspicuous achievement of pharmacy is the establishment of a state-of-the art, oncology sterile admixture area, in which specialized pharmacy personnel works to ensure the quality and safety of the prepared medications, which eventually improves the patient safety outcomes.

The oncology area also boasts the achievement of dealing online prescriptions, which is an important step towards paper less environment, and it also ensures the timely dispensing of prepared chemo medicines.

Modified labeling of the chemo has improved the handling of these medicines by adding warning signs like “cytotoxic medication”, “handle with care” “light sensitive” etc.

The oncology sterile admixture area has been divided into two sections, one area has been dedicated for the day care chemotherapy bay, and the other area provides services to in-patients of chemotherapy.

The pharmacy store has been developed into a “ware house” with improved systems and better storage conditions.

Clinical pharmacy

Clinical Pharmacy is a commonly used term in pharmacy practice. It is a health specialty, which describes the activities and services of the clinical pharmacist to develop and promote the rational and appropriate use of medicinal products and devices.

There are following major areas where clinical pharmacy is focusing at SIH:

- Indigenous System Development
- Antibiotic Stewardship
- Drug Information Resource
- Drug intervention
- Drug – drug interaction





- LASA drugs
- High alert medications
- Doing pharmacy consultation.

Technology and transformation will revolutionize the pharmacy working and the health care delivery system. Development of indigenous system is one of the most challenging tasks, and requires deliberation and comprehensive efforts to develop that tool.

SIH is working to develop such indigenous system that can support all pharmacists for clinical services. Clinical pharmacist is presently working on Antibiotic Stewardship.

Antibiotics are the most widely prescribed and used medicines all over the world. Infections from various microbes and other organisms are responsible for most hospital and clinic visits. The most emerging danger for Antibiotic therapy is the development of resistance, which emerged over the years due to the irrational use of antibiotics

Ultimate goal is to optimize the patient's health-related quality of life, and achieve positive clinical outcomes, within realistic economic expenditures.

Future goals:

Develop a Drug Information Resource and its implementation, Drug Information and Poison Control Centre

The major future goal of the Pharmacy services division is to develop a computerized Physician Order entry system (CPOE system), to reduce medication errors and improve patient safety.

Improve quality of service by providing counseling services to discharged patients and out patients.

Add structured Clinical pharmacy rounds with consultants and physicians for better point of care pharmacy services.

Nursing Care Services at Shifa

Incorporation of humanity and respect in providing nursing care is vital to the process of healing. World Health Organization's expert committee on nursing defines the nursing services as the part of the total health organization which aims to satisfy major objective of the nursing services that is to help prevent disease and promote health through service excellence. Congruent with the philosophy and core values of best nursing practices, Shifa International Hospital and its Nursing Division reflects the beliefs in a set of core values that are fundamental excellence in services, shared and upheld by the nursing management and staff and other clinical partners.

Shifa International Hospitals envision creating a centre of excellence in nursing services and education. Nursing management aims to establish core competencies necessary to achieve the primary goals of increasing capacity, establishing new standards, communication, assessment, critical thinking and innovative approaches of nursing professionals, while utilizing an advanced array of technical skills.

These are being specifically designed to inculcate competency in nurturing nursing leaders to meet challenges of the profession globally as well as in culturally sensitive environment nationally. To fulfill this mission, at Shifa we are committed to nurturing an innovative, dynamic and socio-culturally relevant model of nursing services. It has also developed the standards of interventions for prevention of patient fall, pressure ulcers, and hospital acquired infections.

Shifa nursing division had dedicated infection control nurses to ensure safe environment for patients during their stay at Shifa. This has contributed to a gradual decline over the year in infection rate at the Hospital. It has also helped the individual departments to formulate empirical antibiotic treatment strategies and cost reduction in treating infections by the identification of causative sources. Also the practice has helped in changing attitudes of all healthcare providers on board over the years and has made them more sensitive towards the infection control policies and protocols at Shifa International Hospitals.

Studies have found a strong correlation between the availability of human resources in the healthcare field and health outcomes in a country. There is evidence

that an increase in nurses and midwives decreases the rate of infant and maternal mortality. This relationship is significant in Pakistan as there is a high incidence of infant and maternal mortality. Nursing division at Shifa is committed to achieving service excellence and has reached the nurse-patient ratio as prescribed by the International Council of Nursing.

Similarly, there is a growing body of evidence showing that nurses prepared through BScN program bring unique skills to their work and play an important role in the delivery of safe patient care. A clear link has been identified between higher levels of nursing education and better patient outcomes. This extensive study found that surgical patients have a "substantial survival advantage" if treated in hospitals with higher proportions of nurses educated at the BScN or higher degree level. Acknowledging the need of higher levels of nursing education and better patient outcomes, Shifa nursing division has inducted BScN qualified nurses and currently we have more than fifty nurses with BScN degree working in different inpatient departments.

Recognizing the need to create a professional nursing workforce and to improve the standard of nursing and competence of nurses at Shifa, especially those working in critical care areas are being offered on-going refresher courses, and one year specialized training in cardiac intensive care and trauma management. Moreover, the nursing leadership is also focusing on retention of qualified nurses and their development, by encouraging them for specialty certifications and higher professional education i.e. B.Sc. Nursing and M.Sc. nursing degree programs.

To seek accreditation from Joint Commission International (JCI) there is a focus on program improvement of healthcare facility, research has been initiated that would be thematic and relevant to the national needs in disciplines of health sciences and human resource development in the context of healthcare needs of the people of Pakistan. Continuous professional development for managerial and nursing staff is being offered by Nursing Education Services Department through Quality management programs. To promote evidence based practices, nursing management has developed area specific key performance indicators, and encourages participation of nurses in internal and external audits for quality assurance.

Information Technology at Shifa

Information technology is vital for healthcare industry, improving the flow of information within a healthcare organization is becoming a quality differentiator among healthcare providers. Fundamental to the success of investments in IT, is to understand the strategic goals of the organization and understanding how IT, from technological and organizational perspectives, can help to achieve them.

Shifa Information Systems:

The IT Department at Shifa International hospital has developed Shifa Information Systems that are providing new ways for physicians to readily access and use health information from different sources, thus increasing the ability of physicians and other clinical staff to readily access and use the right information about their patients to improve patient care. Switching from a paper-based system to a fully automated workflow system or combining the two has saved institution money, errors, time and even lives.

The aim is to provide the hospital with a method to find certain patterns in their data that foster profitability, efficiency, proactive decision making, and competitive advantage. IT in Shifa has made significant progress during the year in developing and implementing new and better ways to improve patient safety, time saving, reducing medical errors, communication and documentation of clinical care and test results and information processing. Some of the major initiatives are:

EMR (Electronic Medical Record)

The electronic medical record system has been successfully developed that gives a single source for viewing all relevant

patient information from all aspects of clinical care. The information contained in the EMR is updated on a real-time basis. The EMR system gives physicians and nurses instant and immediate access to a complete, computerized record of current patient care and clinical procedures. This enhances accessibility to required patient data and includes following features:

- Electronic order placement
- Medications
- Vital signs
- Progress Notes
- Allergies
- Reports
- Test Results
- Historical patient data
- Graphical display of data

The system is user-friendly and will make physicians and nurses more productive by simplifying the important elements of healthcare delivery. The result is a quicker path to effective care management and measurable quality gains.

PACS (Picture Archiving & Communication System) In accordance with our goals regarding the implementation & integration of a fully functional Picture Archiving and Communication System (PACS) which has the capability to communicate with our existing Radiology Information



System using standard HL7 messaging with all our modalities has been successfully tested. A massive Storage Area Network has been deployed to cater all our needs. Currently thirteen pilot clinics are running a web based PACS services integrated to the HMIS. All such efforts are put in place to facilitate the care givers complete, accurate, and searchable health information, available at the point of diagnosis and care, allowing for more informed decision making to enhance the quality and reliability of healthcare delivery.

Telemedicine

Telemedicine has been introduced at Shifa International Hospital to enable the patients as well as a doctor to communicate with a consultant who may be 100 miles away. This will provide equal access to medical expertise irrespective of the geographical location of the person in need. As timing is critical in healthcare, telemedicine will provide emergency care in real-time and on demand, without transferring patients, when time is of the essence. Telemedicine will make quality healthcare cost-effective by reducing costly transfers and travel and lowering the burden on patients and families. This will also speed up the referral process by reducing unnecessary referrals. It is part of Shifa International Hospitals horizontal expansion program.

Shifa Network

To augment the overall efficiency and productivity of the HMIS, the infrastructure is always under exhaustive improvement. The network backbone within the Shifa International Hospital Main premises has been upgraded to 10Gb Fiber Optics Links with advance core switches. The Wide Area Network (WAN) connecting the remote Hospitals, Medical Centers, Laboratory Pickup Points and Pharmacies have been enhanced to more secured and reliable connections, supported through advanced authentication mechanisms. For the ease of control of all such locations advanced remote control applications have been deployed. To support such a big IT infrastructure issues are tracked and monitored online. Advanced auto installations of end users systems have been deployed to minimize the downtime. To stay abreast with the ever changing technological changes in the world, new avenues have been researched upon, which include 64 bit Operation Systems, Oracle 11g Infrastructure, Hardware based Firewalls, Unified Mail Servers etc.

Future Plans

ERP (Enterprise Resource Planning)

The need for organization to assess how they are performing against generally accepted standards and against their peers is essential. The dependence on Business intelligence (BI) tools is eminent. The key objective is to integrate all our Information systems into single software i.e. an ERP system comprising of finance/accounting, human resource management, payroll, material requisition, FNSD etc. This will facilitate the flow of information between all business functions within Shifa International Hospital.

HL7

HL 7 standards will be implemented in order to make the various health care information systems interoperable to share data for better health care and clinical research. It will facilitate information sharing within the hospital and also at cross enterprise level. This will allow utilizing the resources efficiently and expedite the processes of the hospital. As Shifa International Hospital adopts new IT innovations and initiatives, it will see the proven cost benefits and it will also see improved care and patient outcomes.

Information technology has the potential to enable a remarkable transformation in providing health care, making it safer, more effective and efficient. Organizations have already realized major gains through the implementation of multifunctional, interoperable Health information technology systems. The promise of information systems that put together comprehensive data from patient care is great. The world is evolving. The business world and the medical world are merging into Health Business Intelligence in order to provide the best services to the customers and consumers. The best services are provided for the benefit of the end-users. With the development of various technologies, human life is all set to get comfortable and with minimal health risks.

Rehabilitation & Home Health

The Rehabilitation department caters to patients having physical and medical problems. It endeavors to bring back the independent living style of individuals who suffer consequences of some mishaps or innate problems. The following services run in the Rehabilitation department of Shifa:

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Orthotic Help
- Hydrotherapy

We have a Home Health program through which we provide Home Base Physiotherapy delivery of medicines and phlebotomy services.



Maintenance at Shifa

Shifa continues to focus on ways to provide a comforting hospital environment beyond patient and visitor's expectation, through employing best available machinery/equipment for air conditioning and electric power generation. SIH is the only hospital, unlike majority healthcare service providers, which provide round the clock uninterrupted air conditioning, electricity and other utility services to its patients and visitors. This is not only a physical relief, it helps keep the hospital environment infection free as well.

For more than 700,000 square feet area, 5 electric power generators of 1MW capacity each ensure availability of reliable and continuous power supply for round the clock. Availability of uninterrupted power supply to the hospital not only guarantees reliable operation of precious life

saving medical equipment but also contributes towards enhancement of patient confidence in our services. Similarly, almost 1800 ton air conditioning round the clock services contribute to the patient safety by eliminating infection risk and also serves a multiplier of patient comfort.

Maintenance department ensures provision of these services through preventive and corrective maintenance programs to improve operational efficiency, equipment life and safety.



Food & Nutrition Services at Shifa

The goal of possible optimum care cannot be achieved without taking care of patients' nutritional needs. Food & Nutrition Services (FNS) at Shifa takes care of nutritional and dietary needs of admitted patients, attendants, outdoor patients, visitors and employees. Inpatients are counseled about their diet on regular basis by FNS dietitians according to the patient's diagnosis. The goal is to promote the nutritional awareness and optimize the chances of early recovery by providing food according to individual conditions.

It is ensured that highest standards of hygiene are maintained at all times, from preparation to serving the food. Similarly, special emphasis is put on ensuring that all food handlers are free from infection and contagious conditions. They are medically checked for fitness regularly. In addition to its primary responsibility of preparing and serving food for patient's individual condition and need, FNS also organized in house banqueting for different functions. There are five cafeterias to serve patients, visitors and employees.





External Services Division



External Services Division (ESD) at Shifa has been created to expand service outreach to make quality healthcare accessible to different demographic and geographic segments of society, by establishing quality benchmarks in primary, secondary, and tertiary healthcare. Due to variety of factors, including diverse geography and social fragmentation, many communities within Pakistan face severe limitation in their access to medical care. Shifa realises that private sector's role and contribution to strengthen healthcare delivery channel is ever increasing. Shifa believes that ease of access and outreach of quality healthcare services is the main determinant to ensure wellbeing and health of social communities. ESD has been working upon to explore frontiers all across Pakistan to open primary and tertiary care hospitals, consulting clinics, diagnostic centres, laboratory collection points, and retail community pharmacies.

Establishing and expanding quality healthcare facilities at one end are associated with commitment and dedication. On the other hand, capital and physical infrastructure is also a prerequisite to accomplish service outreach. Shifa, being socially responsible organisation is determined to overcome these challenges to contribute value to the society.

ESD's service portfolio comprises diagnostic facilities by establishing Laboratory Collection Points and Stat laboratories at different locations, Radiology services, Community Pharmacies, secondary and tertiary care hospitals, and consulting clinic setups to provide consultancy services in different medical and surgical specialties. Currently we have our presence in one or the other of these forms at 32 locations in Islamabad, AJK and Punjab and KPK provinces.



Mr. Kamal Ahmed Khan
Director External Services Division



Ms. Sabiha Feroze
CFO External Services Division



Shifa Medical Center, F-11, Islamabad

F-11 Markaz was strategically chosen as a location for the medical center to facilitate residents of F-10, F-11, E-9, G-10, G-11, Rawalpindi and surrounding areas by delivering quality services at reduced time/traveling cost.

This facility offers services in a variety of medical and surgical specialties along with laboratory tests, x-ray, ultrasound, dentistry, and an onsite pharmacy.

OPD specialties:

- Internal Medicine
- Pediatrics
- Dentistry
- Ophthalmology
- Family Health
- Pulmonology
- ENT
- Nephrology
- Obstetrics/ Gynecology
- Dermatology
- General Surgery
- Physiotherapy

Shifa Medical Center, PWD, Rawalpindi

PWD Society was strategically chosen as a location for the medical center to facilitate residents of Behria Town, DHA, Canyon Valley, Naval Anchorage, Pakistan Town, Post Town and surrounding areas by delivering quality services at reduced time/traveling cost.

This facility offers services in four major medical specialties along with laboratory tests and an onsite pharmacy.

OPD specialties:

- Internal Medicine
- Pediatrics
- Family Health
- Dermatology





Community Pharmacies:

Shifa has conceived idea of establishing a community pharmacy chain all across Pakistan. The point of differentiation at Shifa's community pharmacy would be centred to offer patient counselling and education by empowering communities to better manage their medicine administration needs, rather than solely focusing on traditional selling concept. The presence of community pharmacists at each outlet equipped with required skills and competence would deliver professional services to the masses. In compliance with Shifa's vision, ethical medical practices have been given foremost importance by procuring and managing authentic and reliable products in line with the efficacy standards and guidelines by Pakistan Drug Act. To cater to diverse buying needs of customers, Inventory categories at retail pharmacies also includes wide range of products and brand besides medicines, vaccines, and surgical, which includes cosmetics, optics, beverages, baby care and food products. At present, pharmacy outlets are operational in Islamabad, Rawalpindi, Mirpur, Jhelum, Gujrat, Faisalabad, and Lahore.



Laboratory Collection Points

One of the unique elements of community pharmacy network is association of diagnostic facility, in form of Laboratory Collection Points, at each pharmacy outlet. Shifa believes that outreach of quality laboratory diagnostic facility is crucial to facilitate physician's communities in determining disease diagnosis and treatment plan. The diagnostic laboratory test range covers segments of bio-chemistry, microbiology, blood bank, haematology, and histopathology. The purpose behind establishing a network of Laboratory Collections Points is to provide reliable and authentic laboratory diagnostic services to facilitate referring physicians' community and ultimately patients. In this regard, ESD has been operating franchisee Laboratory Collection Points, along with opening self-owned setups at more than 20 cities in Punjab, and Khyber Pakhtoon Khua. Besides, opening laboratory collection points in different cities, stat laboratories will also be established at different locations to ensure efficient lead time and same day reporting. In this regard, Shifa's first external laboratory setup has already been in-placed at Women and Children Hospital at Faisalabad.

Shifa International Faisalabad



Shifa International Hospital Islamabad has launched its 2nd Hospital at Faisalabad which was inaugurated on 28th August 2011. The Hospital is located on 11km main Jaranwala road Faisalabad, which is accessible 24 Hrs through public & private transport.

CLINICAL SERVICES:

By the grace of God Almighty Allah, Shifa International Hospital Limited, Faisalabad has started its diagnostic, Clinical and Pharmacy services from 11th September 2011.

OUT PATIENT SERVICES

Shifa International Hospital Limited Faisalabad has started its outpatient clinics in the field of internal medicines, Pediatrics, Obstetrics and Gynecology. Highly trained foreign qualified consultants are available to treat the patients in different disciplines of medicine & surgery. Aesthetically planned consultant rooms are available for visiting consultant practice

IN PATIENT SERVICES

General Wards, Semi Private and Private Rooms with state of the art facilities like central Oxygen supply, central air conditioning, and electronic beds with TV and refrigerator are available for admission of patients.

Labor rooms and Operation Theater: Fully equipped

labor room and Operation Theater is available to perform all kinds of planned & emergency surgeries. Neonatal Intensive care unit (NICU): For Newborns requiring critical care a most modern NICU has been established which is equipped with Incubators, ventilators, infant warmers and phototherapy machines.

DIAGNOSTIC SERVICES

Radiology

X-Ray:

Digital X-Ray machines are available for plain and contrast X-rays.

Ultra Sound:

State of the art ultra sound facilities are available for Gynecological/Obs and other parts of the body.

C.T Scan:

64 slices Toshiba CT Scan is installed, which is fully functional and available for all kinds of plain and contrast CT scans. Highly qualified Radiologists are available for diagnostic reporting on CT scans.

MRI:

Most modern open (.35 Tesla) MRI machine has been installed and is fully functional to provide best quality magnetic resonance imaging services. Both CT scan and MRI are linked with Shifa International Hospital

Islamabad through PACS (Picture Archival and Communication system) for reliable case reporting and diagnosis.

Mammography: A modern Mammography machines has been installed for early diagnosis and screening of breast cancer in female population.

CLINICAL LAB SERVICES

A modern clinical lab is equipped with highly sophisticated and advanced lab equipment which provides quality and reliability in clinical lab services. Shifa International Hospital Faisalabad is equipped for lab test in the following disciplines.

- Hematology
- Bio Chemistry
- Micro Biology
- Chemical pathology
- Histopathology

Blood bank services: Reliable blood transfusion services are available like blood grouping, cross matching FFPs (Fresh Frozen Plasma), and screening against hepatitis B, C, and HIV. Shifa International Hospital Faisalabad assures quality and reliability in all the clinical tests.

OTHER FACILITIES:

Pharmacy Services: A well stocked Pharmacy has been established within the hospital building which can provide all the quality medicines and drugs to the indoor and outdoor patients at discounted rate.

Shifa Clinics: Keeping in view the patients convenience "Shifa Clinics" have been established at 649 D Peoples colony (Near Hameed Chowk D-Ground). At this center highly qualified consultants in internal medicine, surgery, pediatrics, gynecology & Obstetrics will be available both in

the morning and evening timing. Diagnostic facilities along with ambulance service will also be available at this center.

Satellite Pharmacies & Lab Pickup Points: Responding to the needs, requirement of high quality medicine and supplies Shifa International Hospital has established its satellite pharmacies on four main locations of Faisalabad. Quality medicine and drugs are provided on discounted rates. At the same time Lab Pickup Points have been established in the pharmacies where patients / attendants can give the samples and collect the report from the same pickup points. It offers convenience and reliable clinical lab services to the general population throughout the city.

Locations

1. Susan Road Faisalabad
2. Satyana Road Faisalabad
3. Jinnah Colony Faisalabad
4. 649 D Block Near Hameed Chowk D- Ground Faisalabad
5. Lab Pickup Point Iqbal Stadium Faisalabad

Food & Nutrition Services: In order to fulfill the specific food and nutritional requirements of patients a well established FNSD has been established. Disease specific food is provided to the patient after nutritional assessment by the dietitian. Moreover a clean and hygienic cafeteria has been established which provide food services to the employees and patient attendants.

Ambulance Service: A fully equipped ambulance is available for transportation of critically ill patients, Ambulance has been provided with oxygen and ventilator to manage serious patients during transfer.

Electricity Backup: 640 KVA generator is available to ensure uninterrupted power supply to the admitted patients and hospital departments.

Our Colleagues - Our Pride



Mr. Mahmood A. Mirza
Director SP & BD



Engr. Ateeq Ahmad
Project Director



Dr. Mati-Ur-Rehman
Director Quality Assurance



Ms. Yasmeen Saggu
Director Clinical Nursing



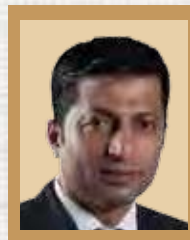
Ms. Nuzhat Sultana
Director Nursing Education



Dr. Zeeshan Bin Ishtiaque
Director PIQI



Mr. Muhammad Aslam
GM Credit & Collection



Engr. Qaiser Rafiq
GM Technical



Dr. Malik Imad Khan
GM Medical Services



Mr. M. Ahsan Hussain
GM MIS

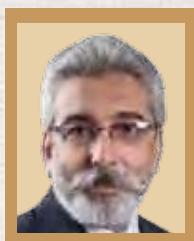


Malik Muhammad Uzair
GM HR, Radiology & Clinical Services



Col. (R) Dr. M. Naeem
Evening Administrator

Our Colleagues - Our Pride



Mr. Shafqat Ali Hamidani
Associate GM Pharmacy



Mr. Aqeel Mir
Associate GM Purchase



Mr. Wazir Muhammad, ACA
Associate GM Accounts & Finance



Mr. Afzaal Ahmed
Associate GM Admin & Protocol



Syed Asim Abbas
Associate GM Maintenance & Utilities



Mr. Amer Farooq
Associate GM &
Senior Editor Media Division



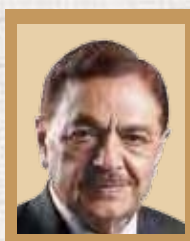
Mr. Azmatullah Quraishi
Sr. Manager Media Division



Mr. M. Aslam Chohan
Sr. Internal Auditor



Mr. Babar Hameed Awan
Senior Manager Lab



Mr. A. D. Zia
Sr. Manager FNSD



Mr. M. Shafqat Iqbal
Sr. Manager MIS



Mr. Anjum Ehsan
Senior Manager IPD

Our Colleagues - Our Pride



Mr. Aziz Ur Rashid
Senior Manager OPD



Maj. (R) Muhammad Ashraf
Senior Manager Transport & Parking



**Mr. Shams-ur-Rehman
Abbasi**
Sr. Manager Finance & Planning

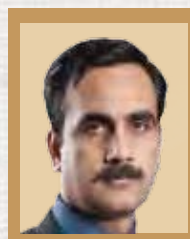


Mr. Salman Faisal Qureshi
Associate Manager CEO Secretariat

Corporate Resource



Mr. Muhammad Naeem
Company Secretary



Mr. Muhammad Saeed
Head of Internal Audit

Shifa International Hospitals Faisalabad



Mr. Imran Farooqi
Director Operations



Lt Col (R) Dr. M. Latif
Administrator



Mr. Muhammad Shahid
Senior Manager, Administration

Office of the CFO



Finance & Accounts Department

By the grace of Allah (SWT) Shifa International Hospitals Limited (SIH) operations have grown manifold. Since inception the main operations of the Company was only SIH Islamabad. However, in recent years after geographic expansion and diversification, Company's operations have seen marvelous expansion. This also led to increase in the activity and operations of Finance and Accounts department. The department is looking after all the segments of the Company, which are categorized in SIH Islamabad, SIH Faisalabad and External Services Division's Lab collection centers and Pharmacies running in different cities across the country.

Finance for a business can't be undervalued and it can be regarded as the lifeline of a business which is required for its well-being. It acts as a lubricant helping to keep the business running. Need for finance arises right from promoting and establishing the organization, acquiring assets, employing people, encouraging them to work for the development of services and creating a brand name.

Finance and Accounts department has played its role in the development of the Company since its very beginning. The role of finance has been emerging from a conventional

viewpoint to an innovation viewpoint. The transformation of the department involves Data Management, Planning and Budgeting, Performance Management and Business Intelligence. Finance department is of utmost importance as it is responsible for financial planning, thus ensuring that adequate funds are available for achieving the objectives of the Company. The functions of finance that includes tax, treasury, risk management which will contribute to the achievement of the strategic objectives and goals of the Company. Accounts department performs the recording, retrieving, financial reporting and analyzing functions. The various stakeholders of the Shifa are directly or indirectly looking towards Finance and Accounts department for its services. Management, employees, consultants, shareholders, vendors, bankers, regulatory authorities etc are the major stakeholders with which department regularly interacts. It also ensures compliance with a complex mix of regulatory requirements. These include legislative, financial, taxation, funding and governance matters and involve satisfying a wide range of agencies by designing processes, capturing or collecting information, preparing summary or analysis submissions and dealing with queries, either ad hoc or in response to information supplied.

Department is also working on its strategic imperatives to enhance level of productivity in various departments of the Company. It regularly interacts with other departments for variance analysis as compared to previous periods and budgets. Costing of our services is also another important activity which is regularly carried out. Department has to ensure that Company's financial statements are in compliance with various statutory, regulatory and International Financial Reporting Standards requirements. It is the prime focus of the department to ensure that Company maximizes its strategic capabilities and to create value from Shifa's capital budgeting, financing, and net working-capital activities.

SIH has been awarded by South Asian Federation of Accountants SAFA's Best Presented Accounts Award 2010 as on November 29, 2011, in Dhaka, Bangladesh. This is not only a marvelous achievement at corporate level but at international level Shifa was the only organization from Pakistan who have received this award in service sector category.

Corporate Social Responsibility

SHIFA FOUNDATION

Shifa Foundation (SF) is a registered non-governmental, non-profitable and volunteer organization based in Islamabad; with mandate to serve communities from low-profile rural areas and is striving hard to provide humanitarian assistance in various dimensions including health, nutrition, food, education and WASH throughout the country particularly the disaster affected regions. These synergic efforts by the organization have brought substantial improvement in the lives of the vulnerable population of the targeted areas. Shifa College of Medicine and Shifa College of Nursing are subsidiaries of Shifa Foundation with about 100 students per class who are trained at Shifa International Hospitals Ltd. during their clinical training years.

Falahee Clinic

Shifa Foundation Falahee Clinic is situated in H-8/4, Islamabad. It was made operational in order to promote affordable healthcare services to the deserving and under privileged community of the nation.

Shifa Foundation Falahee Clinic covers all major specialties e.g. Surgery, Medicine, Gynecology, Eye, ENT, Pediatrics and Cardiology with well-equipped Intensive Care Unit and provides free medical consultation, subsidized test and medicine to nearly 500 patients daily. It also has 100 in-patient beds where 60 to 75 patients get free treatment daily. The following are the statistics for the patients treated in 2011:

SFFC Statistics for 2011	
Total Vaccinations	6,473
Total Surgeries	2,273
IPD Patients treated	5,141
OPD Patients treated	139,847
OPD Procedures performed	9166

Pakistan Kidney Institute (PKI)

Pakistan Kidney Institute (PKI) after its informal inauguration dated 10th April, 2004 is aiming to provide outpatient as well as inpatient services to these patients.

PKI is a center of excellence in nephrology, urology and kidney transplant at Shifa. PKI is a subsidiary of Shifa



Foundation which has undertaken the task of providing the sick and needy people of Pakistan with state of the art services in the fields of urology and nephrology irrespective of their financial status under the roof of Shifa International Hospital at the least cost or free. In the year 2011, 653 patients were treated by the Urology team and 1,863 patients were treated by Nephrology team of PKI.

Key Facts about Pakistan Kidney Institute

- PKI provides state of the art services to urology and nephrology patients irrespective of their financial status.
- PKI focuses especially on young children and women.
- More than 90% of its budget is spent directly on the patients, with minimal overhead expenses.
- No fee is charged by PKI's physicians, surgeons and nurses for their consultations.
- In 2011, 653 patients were treated by Urology Department.
- In 2011, 1,863 patients were treated by Nephrology Department.

PKI's Flood Relief Activities in Sindh-2011



PKI has established a momentous relationship with various national and international NGOs and enjoys an excellent reputation because of its credibility, integrity and transparency. Besides providing state-of-the-art kidney treatment to ailing humanity, PKI/SF has very serious concerns over misery of flood affectees of Sindh.

Therefore it was devised that a joint flood-relief operation must be initiated on emergency basis in Sindh province.

Hence relief operation was started on August 27, 2011 and continuing to date.

PKI & SF took this joint flood relief initiative in Sindh province in understanding and collaboration with local NGOs such as PIMA, SAACH and AMAN. Base camp was established in Mirpurkhas (Sindh), where President PIMA Mirpurkhas Dr. Tariq Arain has donated his office (40,000 sq ft) for base camp office and a warehouse.



Due to worsening security and flood situation in Sindh, it was planned that relief activities would be performed through mobile ambulances operational with Doctors, Paramedics and Dispensers to cover wider affected area. Pakistan Kidney Institute (PKI)/Shifa Foundation (SF), Islamic Medical Association of North America (IMANA) and Pakistan Islamic Medical Association (PIMA) are supporting clinics and relief activities to date where logistics are supplied by SAACH and AMAN. Medicines of Rs. 399,608 have already been provided to PIMA.



Realizing the need of clean water, and prevention of water-borne diseases, PKI planned to purify the infected water through filters and aqua tabs. To serve this purpose, two

filtration plants have been purchased with a generator, mounted on mobile vans and have started supplying clean water. Each affected family was provided with one water cooler (20-liter capacity), with a packet of aqua tabs for added purification.

Humanitarian Assistance Program

Shifa Foundation Humanitarian Assistance Program (SF-HAP) is providing state-of-the-art services in health, education and development sectors with the mission to address the unmet needs of most affected, marginalized and underdeveloped communities in Pakistan, since 2010. In order to respond to the unprecedented post disaster needs in emergencies, early recoveries and rehabilitation phases, "Humanitarian Assistance Program (HAP)" under the aegis of Shifa Foundation has been undertaking the tasks of provisioning and strengthening of healthcare delivery system in areas which are virtually inaccessible. In response to the humanitarian call, HAP initiated relief activities to provide Emergency Health Interventions, Integrated Primary Healthcare and Nutrition services in the affected areas during 2010 and 2011 floods. HAP team has reached the farthest and most vulnerable communities dwelling in rugged mountains of Northern Areas to the desert plains of interior Sindh.

HAP has played an active role in emergency relief activities, early recovery and sustainability in the flood affected areas. After successfully handling one of the worse epidemic of diarrhea by establishing Diarrhea Treatment Centres (DTC) in Rajanpur, Muzaffargarh, Skardu and Ghanche, HAP offered its services in Gilgit Baltistan (GB) and Sindh with special focus on integrated

primary healthcare including but not limited to:

- Establishment of 4 Diarrhea Treatment Centers
- Establishment of 3 ARI centers in Sindh
- Distribution of food and non-food items
- Deployment of Mobile Medical Units to provide basic MOC and OPD services
- Distribution of medicines
- Provision of Maternal and Child Healthcare
- Vaccinations
- Nutrition and Food

HAP has earned the following key roles & achievements in recognition of its tireless efforts in challenging times:

- One of the two NGOs being selected as member of Health & Nutrition National Core Working Group (NCWG).
- One of the two national NGOs being selected as member of Revised Flash Appeal Project Review Committee in health and nutrition sector.
- The only regular and most active Reproductive Health – Technical Working Group (TWG) member at provincial level.
- Founding member of Pakistan Lab Network Association.

HAP has been at the forefront of providing aid and assistance in Health, WASH, Food and Nutrition sector.

Health

Shifa has a proven track record of providing Integrated Primary Healthcare services with special focus on Maternal and Child Health in more than 17 government health facilities which were abandoned or underutilized for years. The poor marginalized community of their catchment areas was forced to spare their lives in the hands of traditional unskilled attendants.

Shifa Foundation performed civil, electrical and mechanical work in the government health facilities in GB. New equipment was installed; sanitary facilities were improved and heating systems were installed. A total of 9 Government Health Facilities have been renovated by Shifa Foundation in GB.

Once the facilities were renovated, various trainings were held and training modules were provided to train the local healthcare staff. 461 Healthcare providers were trained.



54 Training Sessions were provided to refresh the local medical staff with new medical practices and technologies.

Considering the extreme weather and inappropriate transport services of the Gilgit Baltistan, Shifa Foundation introduced telemedicine services in the region. This facility is time saving and cost effective and has enabled the people of Baltistan to access consultants and specialists from Shifa International Hospitals Ltd., Islamabad.

After providing the basic medical infrastructure, Shifa Foundation realized that the flood affected areas lack access to quality EmONC services. In order to fill this gap, Shifa Foundation provided 24/7 MNCH care to the



most vulnerable population that is pregnant and lactating women and women of reproductive age. In addition, Shifa Foundation has also operated Mobile Medical Units which were equipped with well qualified teams trained to provide Basic EmONC and OPD services. Shifa Foundation conducted 64 Mobile Medical Camps in GB and 12 Mobile Medical Units were operational in Sindh. In scope of strengthening the 24/7 comprehensive EmONC services at the targeted health facilities in Sanghar, Shifa filled the gaps in terms of human resources, provision of essential medicines, equipment and supplies, capacity building, and strengthened referral services by incorporating “Follow-up on referral mechanism by LHWs” and supporting LHS monitoring mechanism in addition to initiating 24/7 ambulance services. Shifa Foundation also provided 24/7 EmONC Services in 7 Government Health facilities of District Sanghar.

These units provided Antenatal, Postnatal and Family Planning Consultations to the flood affected districts of Umerkot, Mirpurkhas, Sanghar and Gilgit Baltistan.

11,530 Antenatal Consultations, 1,094 Postnatal Consultations and 7,073 Family Planning Consultations have been provided by Shifa Foundation. 235,390 patients have been catered to in Shifa's OPD. 1,215 safe deliveries have been conducted by Shifa's teams.

In addition, all children attended by healthcare providers at Mobile Medical Units were de-wormed. A total of 601 children have been de-wormed and 72,889 children have been vaccinated by our teams.

The projects initiated by Shifa Foundation were not only providing medical services but were also educating the masses on various health issues. 512,472 people have been reached through Shifa's Health Messages.

Shifa Foundation not only concentrated on MNCH services in Sindh but also provided emergency medical care to the community suffering from Acute Respiratory Infections (ARI). 3 ARI treatment centres were made operational in District Badin, District Tando Allah Yar and District Matiari, Sindh. Matli has treated a total of 2,704 cases, Hala has catered 1,221 patients and Tando Allahyar has treated a total influx of 793 patients (figures updated till 28th January, 2012).

Nutrition & Food

In Sindh, the need for a focused and strategic nutrition response plan to address the malnourishment crisis as well as risk factors was deemed necessary. In 2011 Shifa stepped in as the sole Nutrition activist in District Shaheed Benazirabad to provide CMAM & Food services to PLWs and children under the age of 5 years. Shifa Foundation was working on Nutrition & Food in 4 UCs of Shaheed Benazirabad (SBA). It was able to successfully complete the project and meet the set project objectives and targets. Due to the quality of service delivered by Shifa Foundation's HAP in Shaheed Benazirabad, HAP was given the mandate to operate in 23 UCs of SBA.

Following services are provided by Shifa Foundation in Nutrition & Food sector:

- Target population is screened; the malnourished pregnant and lactating women and children under the age of 5 years are included in the Outpatient Therapeutic Program (OTP) for Severe Acute Malnourishment (SAM) and Supplementary Feeding Program (SFP)

- for Moderate Acute Malnourishment (MAM).
- Inclusion means enrollment in our software database and provision of commodities; i.e. WSB and Vegetable Oil to PLW; RUSF to MAM children and RUTF for SAM children under 5 years of age. HEB's are provided for the Siblings of malnourished children.
- Our healthcare staff educates them regarding their diet intake
- Food items to malnourished women and children to cover the dietary deficiencies
- CMAM and IYCF Training Sessions

In the year 2011, 5,456 children and 2,242 PLWs were screened for malnutrition.

Water Sanitation and Hygiene (WASH)

During the August 2010 Flood Medical Relief efforts, Shifa Foundation investigated the rising trend of water borne diseases in the population of Kathpana Village at District Skardu in Gilgit Baltistan. Main water source of the village was tested for contamination. The test results showed arsenic contamination in the water.



Shifa Foundation undertook the task to conduct the situational analysis to address and attempt to solve the issue on permanent basis. As a first step, Shifa Foundation hired the necessary staff required for the completion of the project. This included contractors, engineers, project managers, etc. As a next step, Shifa Foundation conducted extensive water boring which lead to an uncontaminated water source. The uncontaminated water source was then connected to tanks so that local village community can easily access water.

Key Achievements

- Construction of a large water reservoir. It has a capacity of 8000 gallons

- Construction of 21 small tanks. Each has a capacity of 2000 liters. Taps have been installed so that local community can easily access the water from the tank
- 48 feet deep boring and water well
- A two horsepower water motor has been installed for water suction
- Installation of a stabilizer to counter voltage fluctuations
- Established a water distribution network

Education

• Eye Screening in Multiple Schools

Shifa Foundation conducted eye screening in 36 schools across Skardu. Amongst the 3000 students screened, 100 were diagnosed with weak eye sight. Shifa Foundation also took the responsibility of providing glasses to the diagnosed children. Shifa Foundation distributed these glasses to the diagnosed children.

• Children's Day Celebration

On 20th November 2011, Shifa Foundation celebrated Children's Day in the flood affected areas of Sindh. Various activities were planned to commemorate this day and bring happiness to these children. A face painting stall was setup; various games were planned out for children and a Sports Gala was also organized. At the end of the event, gift packets containing sweets were distributed amongst children. Shifa Foundation brought back smiles to these young faces and helped make memories to last for the rest of their lives.

• Global Hand washing Day Celebration

Shifa Foundation decided to take up the task of creating awareness amongst the local communities of FADs regarding the importance of washing hands with soap. The venues of this campaign were various camp sites and schools. The campaign kicked off with an informative session on the effectiveness of washing hands with soap. This was followed by a practical demonstration on the right way to wash hands with soap. In order to make this activity a regular practice in the local communities, children were encouraged to participate in various interactive and fun activities.

SHIFA COLLEGE OF MEDICINE

Shifa College of Medicine's mission is to graduate physicians for the 21st century who abide by the rigor of scientific discipline and are altruistic, humane, knowledgeable, skillful and dutiful to their profession and the society at large.

The college opened its door in December 1998 and within a decade it has dream of students to win a seat, something

that is becoming more and more competitive every year. The college is recognized by the Pakistan medical and dental council. Shifa College of Medicine is also registered with the world health organization and included in the list of FAIMER International Medical Education Directory.

Academic Council

To insure quality, College's Academic Council headed by the Dean, monitors and regulates the curricular and clinical undertakings of the students, compliances with the regulations and provisions of PMDC and Bahria



University, standards and quality of education, calendars of academics and examinations and anything else to do with the “education and training”.

Dr. Shahina Qazi Memorial Center for Medical Informatics

To include the culture of self learning the college houses a spacious and well stocked library where text books and periodicals have been placed for faculty and students, the library also have workstations connected to the internet, a good number of CDs and audio visual material on topics of clinical and basic health sciences. To access the available digital and audiovisual resources TVs and VCRs are available. Library facilities are also open to the medical students and medical professionals of other institutions.

The Higher Education Commission (HEC) of the Government of Pakistan has provided Shifa College of Medicine free full text online access to the digital library of the International network for the Availability of Scientific Publications (INASP).

Community Based Teaching

Shifa College of Medicine is committed to provide an environment of education and training that would enable professionals to successfully perform the core functions of public health i.e. the ultimate aim of improving the health status of the communities under Community Oriental Medical Education Program.

Students are involved in the designated communities

to develop research capabilities that are necessary to approach and analyze the health problems and suggest interventions. Students are encouraged to participate in the preventive and curative care and the management of patients and their families in the primary healthcare field settings.

SHIFA COLLEGE OF NURSING (SCN)

Shifa College of Nursing offers B.Sc. Nursing program with the commitment to prepare nurses with sound knowledge and competency to enable them to provide quality nursing care to individual's families and communities.

In January 2008, the college launched 2-year post RN B.Sc Nursing program to provide a great chance to present diploma nurses in the profession to enrich their knowledge and expertise. The curriculum of both these programs is in line with Pakistan Nursing Council and international standards of degree nursing programs. SCN a relatively younger institution achieved a milestone in 2007 when it became a member of Hong Kong based International Nursing Assessment Consortium. INAC utilizes n-ideal for developing, pooling and sharing question banks received from each member institute. The main objective of INAC is to train nursing teaching faculty in how to use and write items for measuring higher cognitive abilities, and developing large formative and summative item banks containing such questions, from which teachers can dependably produce quality assessments of reasoning and problem solving within the context of nursing practice.



Shifa Tameer-e-Millat University - STMU

A Dream Come True

Pakistan is blessed with plenty of natural and human resources but sheer dearth of research and educational facilities becomes a great challenge when it comes to tapping this rich resource base for the development and progress of the nation. Many an opportunities are to be explored and mysteries to be revealed but knowledge is the only tool that can help undertake this important and imminent work. Lack of education and research facilities are adding to the brain drain that is another dilemma of developing societies like Pakistan as poor or no infrastructure forces potential human resource to immigrate to developed countries. With this and other development challenges of the nation in mind, the leadership of Shifa International Hospitals, Shifa Foundation and Tameer-e-Millat Foundation conceived the idea of establishing a University to shoulder our part of responsibility in dealing with the national educational challenge.

The efforts of dedicated leadership along with tireless collaboration of Shifa Family (Shifa International Hospitals, Ltd., Shifa Foundation and Tameer-e-Millat Foundation) have borne fruit with the incorporation of Shifa Tameer-e-Millat University (STMU). Shifa Tameer-

e-Millat University, being a not for profit entity, envisions to provide a platform for research oriented education by inviting students from all over Pakistan and across the globe strictly on merit. The criteria for admission will be independent of financial position and will provide equal opportunities according to defined merit.

STMU is committed to excellence in the advancement and communication of knowledge. It aims to provide research-oriented modern education with highest possible standards in a wide range of disciplines. Dr. Muhammad Ata has been elected as Chancellor and Dr. Muhammad Aslam has been appointed as the first Vice Chancellor of the University. The STMU headquarters are near completion in Islamabad. The main campus of the University will be established at Tameer-e-Millat City of Education near Islamabad. Shifa College of Medicine and Shifa College of Nursing are constituent colleges of STMU. Besides other academic programs, the University, keeping in view the qualitative and quantitative issues of teachers in the country, specifically intends to initiate degree courses in modern pedagogical techniques.

Tameer-e-Millat Foundation

An Unforgettable Legacy

A compassionate Pakistani doctor returned to Pakistan from the United States of America in the mid 1980s to “repay his homeland what he believed was his debt to the nation”. He embarked on a mission to revolutionize the education system as a personal method of repayment and started with a school in the world-famous salt mine town of Khewra, Jhelum.

In 1987, with only a handful of students, this school exemplified gratitude to the place where the late Dr. Zaheer Ahmad completed his secondary education. His drive was ‘infectious’ - motivating and mobilizing many of his Pakistani expatriate fellows to similarly contribute back to their homeland and partake in the nation’s rebuilding. The momentum built on and more schools were established in Pind Dadan Khan Tehsil of district Jhelum.

Soon it was realized that these sincere efforts should be organized under one umbrella and Tameer-e-Millat Foundation (TMF), a Non-Governmental Organization, was founded. Tameer-e-Millat Foundation is the brainchild of Dr. Zaheer Ahmad and a dream to educate Pakistan by making education accessible for all.

With vision to provide quality education to every child of Pakistan, Tameer-e-Millat Foundation is committed for quality education without discrimination of gender, race, religion, socio-economic status or ethnicity. Besides providing free primary education to poor children and establishing model schools for secondary education, TMF also focuses on character building of students. To equip the young generation with employable skills to enable them to earn livelihood and support their families, TMF has established vocational and technical training centers. Free Education Program for Poor Children: Community Primary Schools

As per the latest UNICEF reports, some seven million children are out of primary school in Pakistan, of which close to 60% are girls. TMF with the help of the Federal Government and local communities has established community primary schools to provide free education to out-of-school children; these “home-schools” are established for primary education and are based on “one-teacher-one-school” principle. Poor disadvantaged children who cannot afford educational expense are provided free education, text books, workbooks and stationery. TMF is managing 315 community primary schools in Islamabad, Punjab and Khyber Pakhtoon Khawa. More than 12,000 students are getting free education in these schools among which 64% are girls. Educating the Youth: Tameer-e-Millat Model Schools Network

Secondary Education in Pakistan is divided into three stages; middle, high school and higher secondary education. There is a dire need to set up an education system to encourage underprivileged communities to send their children (especially girls) to school. TMF, for last two decades, is striving for community empowerment, rural development and economic uplift and today has a growing network of 56 Model Schools and 6 Higher Secondary Schools in all five provinces of Pakistan.

Technology Institutes and Vocational Training Centers

Skilled manpower plays a vital role in socio-economic development. Vocational training centers train students in employable skills, ensure sustainable economic development and help improve human resource development and alleviate poverty. TMF has established technology institutes and vocational training centers (VTCs). VTCs offer various short courses, like tailoring and embroidery, especially to girls. Currently, TMF is operating eight VTCs in four districts. TMF is working to extend vocational training program into a cottage industry to empower rural women. Stitching of clothes, uniforms, and embroidery are major products of this initiative.

Two technology institutes, one in Khewra (Jhelum) and one in TMCE (Attock) offer various short courses and a 3-year diploma program in different technologies e.g. Civil and Electrical. The short courses provide skill



development to train students so they can earn livelihood for themselves and their families.

Computer Training Centers

In today's era, to equip students with essential basic computer knowledge, TMF has established computer labs in almost every Model School. Four Computer Training Centers are also promoting computer education in rural areas. Computer training centers in Attock, Skardu and Jhelum are providing less-fortunate students with important IT skills.

City of Education

TMF mega project, Tameer-e-Millat City of Education (TMCE), spans over 450+ acres of land at Village Ratwal, Tehsil Fateh Jang, District Attock, and encompasses projects like:



1.1. Tameer-e-Millat Model School for Girls

The TM Model School, in 1996, was established exclusively for girls to provide equal opportunities and enabling them to learn and serve the nation as responsible citizens. It was the very first private schooling opportunity for girls in village Ratwal, a rural underdeveloped village. It has now become the symbol of quality education in the area. The ever increasing strength of students reflects the trust of local community in the school. To facilitate more students and provide opportunities to local teachers,



TMF has constructed first and second floors of the school with the help of United States Agency for International Development's (USAID) Small Grants and Ambassador's Fund Program (SGAFP). The construction work has been completed.

1.2. Tameer-e-Jannat Science School

Tameer-e-Jannat Science School (TJSS) a residential schooling system for victimized children affected from natural disasters in Pakistan. 200+ students were enrolled in 2005 from the Earthquake affected areas of Pakistan. More than 100 students have passed the 10th grade, some are getting further education at TMIT and some have gone back to their hometown to support their families.

1.3. Tameer-e-Millat Institute of Technology

TM Institute of Technology (TMIT), established in 2006, is offering various short and three years



Diploma courses for skills development, including Dress Designing and Making for girls. It is affiliated and registered with Technical Education and Vocational Training Authority (TEVTA) and Punjab Board of Technical Education, Lahore.

1.4. Tameer-e-Millat School of Excellence for Boys

TM School of Excellence for Boys (TMSEB) aims to develop leadership spirit among talented and brilliant students and to develop students' innate learning capacities enabling them to excel in all academic and professional areas.

1.5. Tameer-e-Millat School Health System

Tameer-e-Millat School Health System (TMSHS) at TM City of Education provides basic healthcare facility to students, teachers and staff. Staffed by a male School Health Nurse with BScN to his credit, the Health System is offering services like regular medical checkup, nutrition and physical fitness advice, creating awareness about health related issues and training students in First Aid and Basic Life Support. An ambulance has been provided to TMSHS to cater any emergency situation.

Annual Fund Raising Dinner

Tameer-e-Millat Foundation organized an Annual Fund Raising Dinner as part of Ramadan Campaign in June. Renowned scientist and Member (S&T), Planning Commission of Pakistan, Dr. Samar Mubarak Mand was chief guest. The event was presided over by Ex-Chief of Naval Staff Admiral (Retd.) Iftikhar Ahmad Sarohi and renowned anchorperson, Syed Talat Hussain moderated the ceremony. In this event Zahid Malik (Editor-in-Chief Pakistan Observer), Abdul Latif Ulfat, Haroon ur

Rasheed (renowned columnist), Dr. Mohammad Amin (Senator Shifa Tameer-e-Millat University) participated as Guest speakers and expressed their views about the importance of education. Speakers paid tribute to Late Dr. Zaheer Ahmad stating that Dr. Zaheer enlightened Pakistan with knowledge and leadership. Chairman TMF F.M. Rashid, in his speech, highlighted the foundation's 25 year journey. He stated that Insha'Allah Tameer-e-Millat Foundation will try their best to fulfill the dreams of late Dr. Zaheer Ahmad.

Multan Region

Commerce Education

Quality education helps nurture qualified and competent human resource enabling them to contribute to economic growth. Commerce and industries are considered the backbone of the economy of any nation. Its importance cannot be overlooked in developing countries like Pakistan.

TMF in collaboration with Munir Arshad Memorial Trust is working to promote education in Laber, a suburban rural neighborhood of Multan. Despite limited resources, commerce education at intermediate and graduation level has been started in TMF Multan School. This development will give the students an opportunity to get a Bachelors degree and start their professional career.

Critical Healthcare Technology at TM Institute of Technology (TMIT)

Allied Healthcare Professionals (AHP) are an integral part of the medical team along with physicians and nurses



contributing their expertise to the preventive, curative and rehabilitative care of the patients. Keeping in view the acute shortage of AHPs, TMIT and Shifa International



Hospitals Limited (SIH) in collaboration with Technical Education & Vocational Training Authority (TEVTA) has started a 3-year Diploma program in Associate Engineering (DAE) in Critical Healthcare Technology (CHCT). The aim of this program is to provide education and training for producing quality healthcare professionals. Critical Healthcare Technicians will perform duties to assist doctors and nurses in hospitals.

A Memorandum of Understanding was signed between TME, SIH, and TEVTA in April 2011 to develop academia linkages with job market and to explore opportunities for youth in local as well as global market. This Diploma Program has been started for the first time in Pakistan. In the near future, three new technologies, Diagnostics Health Care, Rehabilitation Technician and Health Care Administrative Technicians will also be started.

Flood Relief and Rehabilitation Efforts: 2011-2012 Activities

Project: Emergency support to prevent the outbreak of diseases in Sindh

Location District Umerkot, Sindh
 Partner Hilfswerk Austria International, Neighbour in Need
 Duration October-December 2011
 District Umerkot (Sindh) is one of the most severely affected districts of 2011 monsoon rains in Sindh. Stagnant

flood water provided an ideal breeding ground for vectors and contaminated drinking water increased the risk of water and vector borne diseases. TMF in collaboration with International partners distributed 2.01 million Aquatabs among 33,500 flood affected families in all four tehsils of district Umerkot. With capacity of each tablet to clean 20 liters of water, 60 Aquatabs were given to each household to ensure clean drinking water for two months for average seven members' family.

Higher number of people affected from Dengue virus than previous years made it indispensable to provide assistance for avoiding mosquito bite. Mosquito nets were distributed among stranded and homeless families. Importance of such aid is even high in flood affected areas. In second phase of the project, 3200 insecticide treated mosquito nets were distributed among 800 flood affected families in District Umerkot.

Project: Humanitarian Support to recover living spaces and conditions

Location Tehsil Gambat, District Khairpur, Sindh
Partner Hilswerk Austria International (HWA), Neighbour in Need (NiN)
Duration October 2011-July 2012

TMF, in collaboration of Hilswerk Austria International (HWA), has completed a WASH Project in District Khairpur (Sindh) for flood affectees. This project was funded by Directorate General of Humanitarian Aid and Civil Protection (ECHO). To ensure the access to safe drinking water, TMF installed 250 hand pumps; improved sanitary conditions by constructing 250 water-sealed and international standardize latrines. 1000 cheques were distributed among to help flood affectees to buy non-food



items (NFI). TMF teams also completed intensive health and hygiene campaign in UC Agra and Pir Hayat Shah of same District. Teams worked for Health and Hygiene awareness of 4800 families and distributed hygiene kits among each family, containing basic hygiene items.

ACKNOWLEDGEMENT

I would like to thank our valued clients, every member of Shifa Family, our business associates and shareholders for being a part of our success. May Allah (SWT) help us in accomplishing our mission further.

On behalf of the Board

Dr. Habib-Ur-Rehman

Dr. Habib-Ur-Rehman
Chairman

ISLAMABAD
September 14, 2012

اسماء ائمة

In the name of Allah, the most Benevolent and Merciful

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Form of Proxy	

Notice of the 26th Annual General Meeting

Notice is hereby given that the 26th Annual General Meeting of the shareholders of Shifa International Hospitals Limited will be held at the registered office of the Company at Sector H-8/4, Islamabad on Saturday, October 20, 2012 at 1100 hours to transact the following business:

- 1- To confirm the minutes of the last Extraordinary General Meeting of the Company held on May 26, 2012.
- 2- To receive, consider and adopt the audited accounts of the Company for the year ended June 30, 2012 together with the directors' and auditors' report thereon.
- 3- To approve the payment of cash dividend @ 15 % (Rs. 1.50 per share) for the year ended June 30, 2012 as recommended by the directors.
- 4- To appoint auditors for the year ending June 30, 2013 and to fix their remuneration.
- 5- To transact any other business with the permission of the Chair.

By Order of the Board



Muhammad Naeem
Company Secretary

Islamabad
September 24, 2012

Notes:

- i) The share transfer books of the Company will remain closed from October 13, 2012 to October 20, 2012 (both days inclusive). No transfer will be accepted for registration during this period. Transfers received in order at the share registrar's office of the Company i.e. M/s Corplink (Pvt.) Limited situated at Wings Arcade, 1-K, Commercial, Model Town, Lahore at the close of business on Friday, October 12, 2012 will be considered in time for the purpose of payment of dividend to the transferees.
- ii) A member entitled to attend and vote at this meeting is entitled to appoint another member as his/her proxy to attend and vote for him/her. Proxies in order to be effective must be received at the registered office of the Company at Sector H-8/4, Islamabad, not less than 48 hours before the time of holding the meeting. Proxy form is attached.
- iii) Members are requested to notify any change in their registered addresses immediately.
- iv) CDC shareholders entitled to attend and vote at this meeting must bring their original CNIC or Passport along with the participant's ID numbers and account numbers to prove their identity. In case of proxy, the attested copy of CNIC or passport of the CDC shareholder must be enclosed. Representatives of corporate members should bring the usual documents required for such purpose.

Directors' Report

OPERATING RESULTS

	2012	2011
	(Rupees)	
Net revenue	4,451,781,252	3,412,687,983
Other operating income	14,812,246	12,927,903
Operating costs	(3,944,837,669)	(2,942,406,982)
Finance cost	(150,799,775)	(115,679,932)
Profit before taxation	370,956,054	367,528,972
Provision for taxation	(110,160,899)	(108,929,457)
Profit for the year	260,795,155	258,599,515
Earnings per share - basic and diluted	5.16	5.12

- 1- Revenue earned by your Company during the year under review increased from Rs. 3,412.7 million to Rs. 4,451.8 million as compared to last year which is mainly attributable to the more utilization of IPD facilities, increase in revenue of external pharmacies and lab pickup points. Increase in the utilization of services entailed the increase in operating costs resultantly operating costs also increased to Rs. 3,944.8 million versus Rs. 2,942.4 million in the last corresponding year. Profit before taxation worked out to be Rs. 370.9 million as against Rs. 367.5 million in the last year due to increase in finance cost from Rs. 115.7 million to Rs. 150.8 million. However, your Company registered net profit after taxation of Rs. 260.8 million versus Rs. 258.6 million in the last corresponding year.
- 2- During the year under review earnings per share increased from Rs. 5.12 to Rs. 5.16.
- 3- Your directors are pleased to declare cash dividend of Rs. 1.50 per share for the year ended June 30, 2012.
- 4- The financial statements, prepared by the management of Shifa International Hospitals Limited, present fairly its state of affairs, the results of its operations, cash flows and changes in equity.
- 5- Proper books of accounts of Shifa International Hospitals Limited have been maintained as required by the Companies Ordinance, 1984.
- 6- Appropriate accounting policies have been consistently applied in preparation of the financial statements and accounting estimates are based on reasonable and prudent judgment.
- 7- International Financial Reporting Standards, as applicable in Pakistan, have been followed in preparation of financial statements.
- 8- The system of internal control is sound in design and has been effectively implemented and monitored.
- 9- There has been no material departure from the best practices of corporate governance, as detailed in the listing regulations.
- 10- One of the directors of the Company has been enrolled for certification under a directors' training program that

meets the criteria specified by the SECP.

- 11- There are no significant doubts upon Company's ability to continue as a going concern.
- 12- Summary of key operating and financial data of last six years has been given as "Six Years at a Glance" in Corporate Report.
- 13- Note 9.3 of the notes to the financial statements reflect the value of investments of gratuity based on its audited accounts.
- 14- For the purpose of Code xvi (l) and Code xxiii of the Code of Corporate Governance all the General Managers and above shall be considered the executives of the Company besides CEO, COO, CFO, Head of Internal Audit & Company Secretary.
- 15- During the year under review, seven meetings of the Board of Directors were held on August 20, 2011, October 09, 2011, October 13, 2011, October 27, 2011, February 17, 2012, April 27, 2012 and May 28, 2012.

Number of meetings attended by each director is stated below:

Name of Director	No. of meetings held during the tenure of the Director	Meetings attended
Dr. Zaheer Ahmad *	1	1
Dr. Manzoor H. Qazi	7	7
Dr. Habib-Ur-Rehman	7	7
Dr. Saeed A. Bajwa	7	-
Dr. Abdul Razaq	7	-
Mr. Muhammad Zahid	7	-
Mr. Shafquat Ali Chaudhary	7	2
Dr. Mohammad Salim Khan	7	7
Shah Naveed Saeed	7	7
Mr. Qasim Farooq Ahmad	7	3
Dr. Samea Kauser Ahmad **	5	3

*Dr. Zaheer Ahmad Chairman & CEO expired on 07th October 2011.

**Dr. Samea Kauser Ahmad was appointed director in place of Dr. Zaheer Ahmad on October 13, 2011.

Leave of absence was granted to the directors who could not attend the Board Meeting(s).

- 16- The pattern of shareholding and additional information regarding pattern of shareholding is given on page 54.
- 17- The present auditors M/s Anjum Asim Shahid Rahman, Chartered Accountants, retire at the conclusion of the 26th Annual General Meeting and being eligible have offered themselves for re-appointment. On the suggestion of

the Internal Audit Committee, the Board of Directors of the Company recommended the re-appointment of M/s Anjum Asim Shahid Rahman, Chartered Accountants, as the auditors of the Company for the year ending June 30, 2013.

- 18- During the year under review Dr. Mohammad Salim Khan purchased 74,874 shares of the Company whereas Mr. Qasim Farooq Ahmad gifted 2,500,000 shares to his brother and sister. No other Directors, CEO, CFO, Company Secretary and their spouses and minor children carried out trades in the shares of the Company during the year under review.
- 19- During the year under review election of directors was held. All the following retired directors who filed their consent to be elected as directors of the Company were elected unopposed as the directors for the term of three years commencing from May 28, 2012:

- | | |
|-------|----------------------------|
| i. | Dr. Manzoor H. Qazi |
| ii. | Dr. Habib-Ur-Rehman |
| iii. | Dr. Abdul Razaq |
| iv. | Mr. Muhammad Zahid |
| v. | Dr. Saeed A. Bajwa |
| vi. | Mr. Shafquat Ali Chaudhary |
| vii. | Dr. Mohammad Salim Khan |
| viii. | Shah Naveed Saeed |
| ix. | Mr. Qasim Farooq Ahmad |
| x. | Dr. Samea Kauser Ahmad |

The Board welcomes Dr. Habib-Ur-Rehman who assumed the responsibility as Chairman of the Board of Directors with effect from May 28, 2012.

Dr. Manzoor H. Qazi has been re-appointed as Chief Executive Officer of the Company with effect from May 28, 2012.

- 20- All the related party transactions have been approved by the Board of Directors. The Company maintains a full record of all such transactions, along with the terms and conditions.
- 21- Shifa International Hospitals Limited is on the web and can be accessed at www.shifa.com.pk.
- 22- During the year under review, the Company's contribution to the national exchequer is as under:

Direct Taxes	Rs. 96.38 million
Indirect Taxes	Rs. 69.55 million
Tax deducted and deposited from suppliers, employees etc.	Rs. 194.97 million
Total	Rs. 360.90 million

- 23- During the year under review, the Company donated Rs. 5 million to Shifa Foundation and Rs. 10 million to Tameer-e-Millat Foundation, both not for profit organizations working in the sectors of health and education respectively.

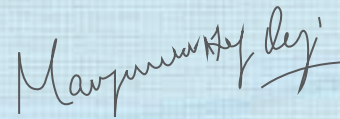
The Company considers both the foundation as its social arms for fulfilling corporate social responsibilities with respect to people and society. Company also donated Rs. 0.1 million to Pakistan National Heart Association, a non political and non government organization.

- 24- Energy crisis in the county is hitting badly all the spheres of lives. Your Company being mindful towards energy conservation has taken number of steps including but not limited to installation of timers in air handling unit, installation of variable frequency drives on high HP rating motors, improving power factor, periodic preventive maintenance of equipment, proper insulation of pipes carrying steam and chill water etc.
- 25- Your Company has ensured that all the medical waste is incinerated without delay and that no toxic fumes/smoke are released to the environment through operation of incinerators and generators as well. Radiation Department fulfills the international standards and is being inspected by Pakistan Nuclear Regulatory Agency and International Atomic Energy Commission.
- 26- Several steps are taken ensuring occupational safety & health like installation of safety warning signs, exit evacuation, fire equipment installation and procurement, use of personal protective equipment, annual medical checkups of employees especially radiation and FNSD staff.
- 27- For public awareness Company celebrated and organized World Alzheimer's day, Global Hand Washing Day, Cancer Day, Heart Health Day and Blood Donation Day.
- 28- Hospital in Faisalabad was made operational by 27th of Ramadan last year i.e. on August 28, 2011 and efforts are being made for the optimal utilization of its services.
- 29- Company is operating 14 pharmacies in the cities of Islamabad, Rawalpindi, Mirpur, Jhelum, Gujrat, Gujranwala, Lahore & Faisalabad. Company is planning to add three more pharmacies in the cities of Gujranwala and Lahore.
- 30- We feel pride to apprise you that the President of Pakistan awarded late Dr. Zaheer Ahmad Ex-Chairman & CEO, with posthumous Sitara-e-Imtiaz in recognition to his extraordinary services to the nation in the field of Health and Education. Government of Pakistan also awarded Tamgha-e-Imtiaz to our consultants Dr. M. A. Afridi and Dr. Saeed Akhtar for their services in the medical field.
- 31- We are pleased to mention that President of Pakistan also accorded assent to Shifa Tameer-e-Millat University (STMU) Act, on March 02, 2012. STMU sponsored by Shifa International Hospitals Limited, Shifa Foundation & Tameer-e-Millat Foundation, is the first university in the capital city in health and other sciences.
- 32- During the year your Company won South Asian Federation of Accountants (SAFA) Best Presented Accounts and Corporate Governance Disclosures Award 2010. Your Company earned the distinction of becoming the sole SAFA award winner from Pakistan in the services category.
- 33- During the year under review following expansion activities were undertaken and completed:
 - Fifty one surgical beds have been added to provide continued care to patients with comfort
 - Four new state-of-the-art operation theatres have been opened in addition to existing nine operation theatres

- New facility of twenty eight daycare beds has been launched
- Development of a new Cancer Centre with Radiation & Medical Oncology and Outpatient Facilities. The new Inpatient Facility is comprised of regular inpatient beds for Cancer, Bone Marrow Transplant area and twenty five beds facility for Chemotherapy.
- By the Grace of Almighty Allah, we have also commenced successful liver transplant activity through specialized Operation Theatre, Exclusive Critical Areas and designated inpatient beds.

34- Besides restructuring of different departments/facilities construction work for enhancement of Critical Area Beds is under process.

On behalf of the Board



DR. MANZOOR H. QAZI
Chief Executive Officer

ISLAMABAD
September 14, 2012

Statement of Compliance with the Code of Corporate Governance

This statement is being presented to comply with the Code of Corporate Governance contained in Listing Regulation No. 35 of Chapter XI of the Listing Regulations of Karachi, Lahore and Islamabad Stock Exchanges for the purpose of establishing a framework of good governance, whereby a listed company is managed in compliance with the best practices of corporate governance.

The company has applied the principles contained in the CCG in the following manner:

1. The Company encourages representation of Independent non-executive directors and directors representing minority interests on its board of directors. At present the board includes:

Category	Names
Independent Directors	Shah Naveed Saeed
Executive Directors	Dr. Manzoor H. Qazi
	Dr. Mohammad Salim Khan
Non-Executive Directors	Dr. Habib-Ur-Rehman
	Mr. Muhammad Zahid
	Dr. Abdul Razaq
	Dr. Saeed A. Bajwa
	Mr. Shafquat Ali Chaudhary
	Mr. Qasim Farooq Ahmad
	Dr. Samea Kauser Ahmad

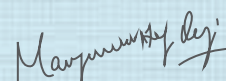
The independent director meets the criteria of independence under clause I (b) of the CCG.

2. The directors have confirmed that none of them is serving as a director on more than seven listed companies, including this Company.
3. All the resident directors of the Company are registered as taxpayers and none of them has defaulted in payment of any loan to a banking company, a DFI or an NBFIs or, being a member of a stock exchange, has been declared as a defaulter by that stock exchange.
4. A causal vacancy occurred on the Board on 07-10-2011 which was filled up by the directors within 06 days.
5. The Company has prepared a "code of conduct" and has ensured that appropriate steps have been taken to disseminate it throughout the Company along with its supporting policies and procedures.
6. The Board has developed a vision/mission statement, overall corporate strategy and significant policies of the Company. A complete record of particulars of significant policies along with the dates on which they were approved or amended has been maintained.
7. All the powers of the Board have been duly exercised and decisions on material transactions, including appointment and determination of remuneration and terms and conditions of employment of the CEO, other executive and non-executive directors, have been taken by the Board.
8. The meetings of the Board were presided over by the Chairman and the board met at least once in every quarter. Written notices of the board meetings, along with agenda and working papers, were circulated at least seven days before the meetings. The minutes of the meetings were appropriately recorded and circulated.
9. There were no new appointments of CFO, Company Secretary or Head of Internal Audit during the year. However,

the board ratified the terms and conditions of the employment of CFO, Company Secretary and Head of Internal Audit in terms of the Code 2012.

10. The board arranged in-house orientation courses for its directors during the year to apprise them of their duties and responsibilities.
11. The directors' report for this year has been prepared in compliance with the requirements of the CCG and fully describes the salient matters required to be disclosed.
12. The financial statements of the Company were duly endorsed by CEO and CFO before approval of the board.
13. The directors, CEO and executives do not hold any interest in the shares of the Company other than that disclosed in the pattern of shareholding.
14. The Company has complied with all the corporate and financial reporting requirements of the CCG.
15. The Board has formed an Audit Committee which is comprised of four members, of whom three are non-executive directors. The chairman of the committee is an independent director.
16. The meetings of the audit committee were held at least once every quarter prior to the approval of interim and final results of the Company and as required by the CCG. The terms of reference of the committee have been formed and advised to the committee for compliance.
17. The Board has formed a Human Resource and Remuneration Committee which is comprised of three members, of whom two are non-executive director. The chairman of the committee is a non-executive Director.
18. The board has set up an effective internal audit function.
19. The statutory auditors of the Company have confirmed that they have been given a satisfactory rating under the quality control review program of the ICAP, that they or any of the partners of the firm, their spouses and minor children do not hold shares of the Company and that the firm and all its partners are in compliance with International Federation of Accountants (IFAC) guidelines on code of ethics as adopted by ICAP.
20. The statutory auditors or the persons associated with them have not been appointed to provide other services except in accordance with the listing regulations and the auditors have confirmed that they observed IFAC guidelines in this regard.
21. The 'closed period' prior to the announcement of interim/final results, and business decisions, which may materially affect the market price of Company's securities, was determined and intimated to directors, employees and stock exchanges.
22. Material/price sensitive information has been disseminated among all market participants at once through stock exchanges.
23. We confirm that all other material principles enshrined in the CCG have been complied with.

Islamabad
September 14, 2012



Dr. Manzoor H. Qazi
Chief Executive Officer

Review Report to the Members

on Directors' Statement of Compliance With Best Practices of Code of Corporate Governance

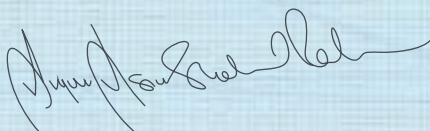
We have reviewed the Directors' Statement of Compliance with the best practices ("the Statement") contained in the Code of Corporate Governance prepared by the Board of Directors of Shifa International Hospitals Limited, ("the Company") to comply with the Listing Regulation No. 35 of Chapter XI of Karachi Stock Exchange (Guarantee) Limited, Lahore Stock Exchange (Guarantee) Limited and Islamabad Stock Exchange (Guarantee) Limited, where the Company is listed.

The responsibility for compliance with the Code of Corporate Governance is that of the Board of Directors of the Company. Our responsibility is to review, to the extent where such compliance can be objectively verified, whether the Statement of Compliance reflects the status of the Company's compliance with the provisions of the Code of Corporate Governance and report if it does not. A review is limited primarily to inquiries of the Company personnel and review of various documents prepared by the Company to comply with the Code.

As part of our audit of financial statements we are required to obtain an understanding of the accounting and internal control systems sufficient to plan the audit and develop an effective audit approach. We are not required to consider whether the Board's statement covers all risks or controls, or to form an opinion on the effectiveness of such internal controls, the Company's corporate governance procedures and risks.

Further, Sub-Regulation (x) (previously sub-regulation (xiii a)) of Listing Regulation 35 notified by the Karachi Stock Exchange (Guarantee) Limited vide circular KSE/N-269 dated January 19, 2009 requires the Company to place before the Board of Director for their consideration and approval related party transactions, distinguishing between transactions carried out on terms equivalent to those that prevail in arm's length transactions and transactions which are not executed at arm's length price recording proper justification for using such alternative pricing mechanism. Further, all such transactions are also required to be separately placed before the Audit Committee. We are only required and have ensured compliance of requirement to the extent of approval of related party transactions by the Board of Directors and placement of such transactions before the Audit Committee. We have not carried out any procedure to determine whether the related party transactions were undertaken at arm's length price or not.

Based on our review, nothing has come to our attention which causes us to believe that the Statement does not appropriately reflect the Company's compliance, in all material respects, with the best practices contained in the Code of Corporate Governance as applicable to the Company for the year ended June 30, 2012.



ANJUM ASIM SHAHID RAHMAN

Chartered Accountants
Audit Engagement Partner: Nadeem Tirmizi
Islamabad
Dated: September 14, 2012

Auditors' Report to the Members

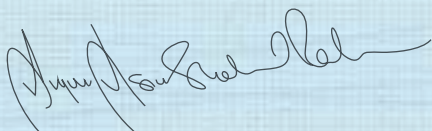
We have audited the annexed balance sheet of Shifa International Hospitals Limited (the Company) as at June 30, 2012 and the related profit and loss account, statement of comprehensive income, cash flow statement and statement of changes in equity together with the notes forming part thereof, for the year then ended and we state that we have obtained all the information and explanations which, to the best of our knowledge and belief, were necessary for the purposes of our audit.

It is the responsibility of the Company's management to establish and maintain a system of internal control, and prepare and present the above said statements in conformity with the approved accounting standards and the requirements of the Companies Ordinance, 1984. Our responsibility is to express an opinion on these statements based on our audit.

We conducted our audit in accordance with the auditing standards as applicable in Pakistan. These standards require that we plan and perform the audit to obtain reasonable assurance about whether the above said statements are free of any material misstatement. An audit includes examining on test basis, evidence supporting the amounts and disclosures in the above said statements. An audit also includes assessing the accounting policies and significant estimates made by the management, as well as, evaluating the overall presentation of the above said statements. We believe that our audit provides a reasonable basis for our opinion and, after due verification, we report that:-

- a. in our opinion, proper books of accounts have been kept by the Company as required by the Companies Ordinance, 1984;
- b. in our opinion:-
 - i. the balance sheet and profit and loss account together with the notes thereon have been drawn up in conformity with the Companies Ordinance, 1984, and are in agreement with the books of accounts and are further in accordance with accounting policies consistently applied;
 - ii. the expenditure incurred during the year was for the purpose of the Company's business; and
 - iii. the business conducted, investments made and the expenditure incurred during the year were in accordance with the objects of the Company.
- c. in our opinion and to the best of our information and according to the explanations given to us, the balance sheet, profit and loss account, statement of comprehensive income, cash flow statement and statement of changes in equity together with the notes forming part thereof conform with approved accounting standards as applicable in Pakistan, and, give the information required by the Companies Ordinance, 1984, in the manner so required and respectively give a true and fair view of the state of the Company's affairs as at June 30, 2012 and of the profit, comprehensive income, its cash flows and changes in equity for the year then ended; and
- d. in our opinion, Zakat deductible at source under the Zakat and Ushr Ordinance, 1980 (XVIII of 1980), was deducted by the Company and deposited in the Central Zakat Fund established under section 7 of that Ordinance.

The financial statements of the Company for the year ended June 30, 2011 were audited by M/s M. Yousuf Adil Saleem and Co. Chartered Accountants, who have issued an unqualified report dated August 20, 2011.



ANJUM ASIM SHAHID RAHMAN

Chartered Accountants
Audit Engagement Partner: Nadeem Tirmizi
Islamabad
Dated: September 14, 2012

Balance Sheet

As at June 30, 2012

	Note	2012 Rupees	2011 Rupees
SHARE CAPITAL AND RESERVES			
Share capital	4	505,138,000	505,138,000
Capital reserve	5	40,000,000	40,000,000
Unappropriated profit		742,131,715	549,928,628
		1,287,269,715	1,095,066,628
SURPLUS ON REVALUATION OF PROPERTY, PLANT AND EQUIPMENT			
	6	590,551,622	597,730,254
NON CURRENT LIABILITIES			
Long term financing	7	1,218,085,881	365,423,191
Deferred taxation	8	451,264,048	366,930,453
		1,669,349,929	732,353,644
CURRENT LIABILITIES			
Trade and other payables	9	807,288,201	608,178,792
Markup accrued	10	41,096,466	16,421,204
Short term borrowings	11	-	153,045,416
Current portion of:			
long term financing	7	258,601,964	246,509,818
liabilities against assets subject to finance lease	12	-	3,655,792
		1,106,986,631	1,027,811,022
		4,654,157,897	3,452,961,548
CONTINGENCIES AND COMMITMENTS			
	13		

The annexed notes 1 to 38 form an integral part of these financial statements.


Chairman

	Note	2012 Rupees	2011 Rupees
NON CURRENT ASSETS			
Property, plant and equipment	14	3,469,388,120	2,720,993,139
Long term deposits	15	22,065,096	10,295,724
		3,491,453,216	2,731,288,863
CURRENT ASSETS			
Stores, spare parts and loose tools	16	107,211,553	64,335,025
Stock-in-trade	17	201,800,751	113,284,561
Trade debts	18	341,159,290	284,262,865
Loans and advances	19	110,061,227	80,890,800
Trade deposits and short term prepayments	20	16,617,058	12,874,596
Markup accrued		296,119	234,843
Other financial assets	21	-	10,161,095
Tax refunds due from the government (net of provision)	22	79,106,220	8,526,730
Cash and bank balances	23	306,452,463	147,102,170
		1,162,704,681	721,672,685
		4,654,157,897	3,452,961,548

Margum Ali Khan
Chief Executive

Muneer Lubban
Chief Financial Officer

Profit and Loss Account

For the year ended June 30, 2012

	Note	2012 Rupees	2011 Rupees
Net revenue	24	4,451,781,252	3,412,687,983
Other operating income	25	14,812,246	12,927,903
Operating costs	26	(3,944,837,669)	(2,942,406,982)
Finance cost	27	(150,799,775)	(115,679,932)
Profit before taxation		370,956,054	367,528,972
Provision for taxation	28	(110,160,899)	(108,929,457)
Profit for the year		260,795,155	258,599,515
Earnings per share - basic and diluted	29	5.16	5.12

The annexed notes 1 to 38 form an integral part of these financial statements.


Chairman


Chief Executive


Chief Financial Officer

Statement of Comprehensive Income

For the year ended June 30, 2012

	2012 Rupees	2011 Rupees
Profit for the year	260,795,155	258,599,515
Other comprehensive income for the year - net of tax	-	-
Total comprehensive income for the year	260,795,155	258,599,515

The annexed notes 1 to 38 form an integral part of these financial statements.


Chairman


Chief Executive

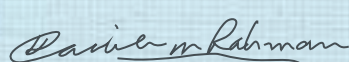

Chief Financial Officer

Cash Flow Statement

For the year ended June 30, 2012

	Note	2012 Rupees	2011 Rupees
CASH FLOWS FROM OPERATING ACTIVITIES			
Profit before taxation		370,956,054	367,528,972
Adjustments for:			
Depreciation / amortization of property, plant and equipment		229,948,271	185,032,340
Provision for doubtful debts		13,223,976	9,722,864
Property, plant and equipment written off		2,696,515	8,001,855
Gain on disposal of property, plant and equipment		(2,268)	(528,757)
Provision for compensated absences		21,369,933	19,245,544
Provision for gratuity		20,224,336	16,666,259
Provision for slow moving stores		408,084	4,299,313
Liabilities written back		(1,527,693)	(678,904)
Profit on investments and bank deposits		(5,042,290)	(5,261,365)
Finance cost		150,799,775	115,679,932
Operating cash flows before changes in working capital		803,054,693	719,708,053
Changes in working capital:			
(Increase) / decrease in current assets:			
Stores, spare parts and loose tools		(43,307,965)	(3,279,244)
Stock-in-trade		(88,516,190)	(30,726,931)
Trade debts		(70,120,401)	(72,314,545)
Loans and advances		(29,170,427)	(42,658,188)
Trade deposits and short term prepayments		(1,788,922)	32,454,508
Increase in trade and other payables		198,814,731	160,837,778
Cash generated from operations		768,965,519	764,021,431
Finance cost paid		(126,176,295)	(114,832,491)
Income tax paid		(96,406,794)	(77,974,740)
Payment to gratuity fund		(29,046,713)	(17,738,675)
Compensated absences paid		(12,853,971)	(5,567,171)
Net cash from operating activities		504,481,746	547,908,354
CASH FLOWS FROM INVESTING ACTIVITIES			
Purchase of property, plant and equipment		(984,769,885)	(322,274,119)
Proceeds from disposal of property, plant and equipment		4,516,000	635,650
Profit received		4,981,014	5,247,427
Decrease in other financial assets		-	10,741,370
Increase in long term deposits		(11,769,372)	(1,476,100)
Net cash used in investing activities		(987,042,243)	(307,125,772)
CASH FLOWS FROM FINANCING ACTIVITIES			
Long term financing - disbursements		1,111,264,654	107,594,330
- repayments		(246,509,818)	(227,913,359)
Repayment of principal portion of finance lease		(3,655,792)	(5,839,640)
Dividend paid		(76,355,715)	(150,870,693)
Net cash from/ (used in) financing activities		784,743,329	(277,029,362)
Net increase/ (decrease) in cash and cash equivalents		302,182,832	(36,246,780)
Cash and cash equivalent at beginning of year		4,217,849	40,481,271
Effect of exchange rate changes on cash and cash equivalents		51,782	(16,642)
Cash and cash equivalent at end of year	33	306,452,463	4,217,849

The annexed notes 1 to 38 form an integral part of these financial statements.



Chairman



Chief Executive



Chief Financial Officer

Statement of Changes in Equity

For the year ended June 30, 2012

	Share capital	Capital reserve	Unappropriated profit (Rupees)	Total
Balance at July 01, 2010	505,138,000	40,000,000	435,691,279	980,829,279
Total comprehensive income for the year				
Profit for the year	-	-	258,599,515	258,599,515
Other comprehensive income	-	-	-	-
Total comprehensive income for the year	-	-	258,599,515	258,599,515
Transfer of depreciation/ amortization on incremental value arising on revaluation of property, plant and equipment attributed to current year	-	-	7,179,234	7,179,234
Distribution to owners				
Final dividend 2010: Rs. 1.50 per share	-	-	(75,770,700)	(75,770,700)
Interim dividend 2011: Rs. 1.50 per share	-	-	(75,770,700)	(75,770,700)
Total transactions with owners	-	-	(151,541,400)	(151,541,400)
Balance at June 30, 2011	505,138,000	40,000,000	549,928,628	1,095,066,628
Balance at July 01, 2011	505,138,000	40,000,000	549,928,628	1,095,066,628
Total comprehensive income for the year				
Profit for the year	-	-	260,795,155	260,795,155
Other comprehensive income	-	-	-	-
Total comprehensive income for the year	-	-	260,795,155	260,795,155
Transfer of depreciation/ amortization on incremental value arising on revaluation of property, plant and equipment attributed to current year	-	-	7,178,632	7,178,632
Distribution to owners				
Final dividend 2011: Rs. 1.50 per share	-	-	(75,770,700)	(75,770,700)
Balance at June 30, 2012	505,138,000	40,000,000	742,131,715	1,287,269,715

The annexed notes 1 to 38 form an integral part of these financial statements.


Chairman


Chief Executive


Chief Financial Officer

Notes to the Financial Statements

For the year ended June 30, 2012

1 STATUS AND NATURE OF BUSINESS

Shifa International Hospitals Limited (“the Company”) was incorporated in Pakistan on September 29, 1987 as a private limited company under the Companies Ordinance, 1984 and converted into a public limited company on October 12, 1989. The Company is listed on all the three stock exchanges of Pakistan. The registered office of the Company is situated at Sector H-8/4, Islamabad.

The principal activity of the Company is to establish and run medical centers and hospitals in Pakistan. The Company has established its first hospital in 1993 in Islamabad and second hospital in 2011 in Faisalabad. Besides this, the Company is running three medical centers, fourteen pharmacies and seventeen lab collection points in different cities of Pakistan.

2 BASIS OF PREPARATION

2.1 Statement of compliance

These financial statements have been prepared in accordance with approved accounting standards as applicable in Pakistan. Approved accounting standards comprise of such International Financial Reporting Standards (IFRS) issued by the International Accounting Standard Board as are notified under the Companies Ordinance, 1984, provisions of and directives issued under the Companies Ordinance, 1984. In case requirements differ, the provisions or directives of the Companies Ordinance, 1984 shall prevail.

2.2 Basis of measurement

These financial statements have been prepared under the historical cost convention, modified by:-

- revaluation of certain property, plant and equipment;
- recognition of certain employee benefits at present value; and
- investments held to maturity are measured at amortized cost.

2.3 Functional and presentation currency

These financial statements are presented in Pak Rupees, which is the Company’s functional and presentation currency.

2.4 Use of estimates and judgments

The preparation of financial statements in conformity with approved accounting standards requires management to make judgments, estimates and assumptions that affect the application of policies and reported amounts of assets and liabilities, income and expenses. The estimates and associated assumptions are based on historical experience and various other factors that are believed to be reasonable under the circumstances, the results of which form the basis of making judgment about carrying value of assets and liabilities that are not readily apparent from other sources. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which estimates are revised if the revision affects only that

Notes to the Financial Statements

For the year ended June 30, 2012

period, or in the period of the revision and future periods if the revision affects both current and future periods.

Judgments made by management in the application of the approved accounting standards that have significant effect on the financial statements and estimates with a significant risk of material adjustment in the next year are discussed in the ensuing paragraphs.

2.4.1 Property, plant and equipment

The Company reviews the useful lives of property, plant and equipment on regular basis. Any change in the estimates in future years might affect the carrying amounts of the respective items of property, plant and equipments with a corresponding effect on the depreciation/ amortization charge and impairment.

2.4.2 Provision for doubtful debts

The Company estimates the recoverability of the trade debts and provides for doubtful debts based on its prior experience. The carrying amounts of trade debts and provision for doubtful debts are disclosed in note 18 to these financial statements.

2.4.3 Stock in trade/ stores, spares & loose tools

Company reviews the net realizable value of stock in trade and stores, spares & loose tools to assess any diminution in the respective carrying values. Net realizable value is determined with reference to estimated selling price less estimated expenditures to make the sale.

2.4.4 Employee benefits

The Company operates approved funded gratuity scheme covering all its employees who have completed the minimum qualifying period of service as defined under the respective scheme. The gratuity scheme is managed by trustees. The calculation of the benefit requires assumptions to be made of future outcomes, the principal ones being in respect of increase in remuneration and the discount rate used to convert future cash flows to current values. The assumptions used for the plan are determined by independent actuary on annual basis.

The amount of the expected return on plan assets is calculated using the expected rate of return for the year and the market-related value at the beginning of the year. Gratuity cost primarily represents the increase in actuarial present value of the obligation for benefits earned on employee service during the year and the interest on the obligation in respect of employee service in previous years, net of the expected return on plan assets. Calculations are sensitive to changes in the underlying assumptions.

2.4.5 Taxation

The Company takes into account the current income tax law and decisions taken by appellate authorities. Instances where the Company's view differs from the view taken by the income tax

Notes to the Financial Statements

For the year ended June 30, 2012

department at the assessment stage and where the Company considers that its view on items of material nature is in accordance with law, the amounts are shown as contingent liabilities.

2.4.6 Contingencies

The Company has disclosed significant contingent liabilities for the pending litigations and claims against the Company based on its judgment and the advice of the legal advisors for the estimated financial outcome. The actual outcome of these litigations and claims can have an effect on the carrying amounts of the liabilities recognised at the balance sheet date. However, based on the best judgment of the Company and its legal advisors, the likely outcome of these litigations and claims is remote and there is no need to recognise any liability at the balance sheet date.

2.5 New accounting standards, interpretations and amendments to the published accounting standards not yet effective

The following standards, amendments to standards and interpretations, effective for accounting periods beginning on or after as mentioned there against are either not relevant to the Company's current operations or are not expected to have significant impact on the Company's financial statements other than certain additional disclosures:

-Amendments to IAS 1 Presentation of Financial Statements	1st July, 2012
-Amendments to IAS 12 Income Taxes	1st January, 2012
-Amendments to IAS 19 Employee Benefits	1st January, 2013
Amendments to IFRS 7 Financial Instruments: Disclosure	1st January, 2013
Amendments to IAS 32 Financial Instruments: Presentation	1st January, 2014
-IFRS 10 Consolidated Financial Statements	1st January, 2013
-IFRS 11 Joint Arrangements	1st January, 2013
-IFRS 12 Disclosure of Interest in Other Entities	1st January, 2013
-IFRS 13 Fair Value Measurement	1st January, 2013
-Reissued as IAS 27 Consolidated and Separated Financial Statements	1st January, 2013
-Reissued as IAS 28 Investments in Associates	1st January, 2013

3 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The accounting policies set out below have been applied consistently to all periods presented in these financial statements.

3.1 Property, plant and equipment

Property, plant and equipment except freehold, leasehold land and capital work in progress are stated at cost less accumulated depreciation/ amortization and impairment in value, if any. Leasehold land is stated at revalued amount being the fair value at the date of revaluation, less any subsequent accumulated depreciation and impairment losses while freehold land is stated at revalued amount being the fair value at the date of revaluation, less any subsequent impairment losses, if any. Any revaluation increase arising on the revaluation of such assets is credited in 'Surplus on Revaluation of Property, Plant and Equipment'. A decrease in the carrying amount arising on revaluation is charged to profit or loss to the

Notes to the Financial Statements

For the year ended June 30, 2012

extent that it exceeds the balance, if any, held in the surplus on revaluation account relating to a previous revaluation of that asset. Leasehold land is amortized over the lease period extendable upto 99 years. The surplus on revaluation of property, plant and equipment to the extent of incremental depreciation/ amortization charged on the related asset is transferred to unappropriated profit.

Capital work-in-progress and stores held for capital expenditure are stated at cost less any impairment loss recognised, if any. All expenditure connected with specific assets incurred during installation and construction period are carried under capital work-in-progress. These are transferred to specific item of property, plant and equipment when available for intended use.

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the Company and the cost of the item can be measured reliably. All other repairs and maintenance costs that do not meet the recognition criteria are charged to profit and loss account as and when incurred.

Depreciation/ amortization is charged to profit and loss account commencing when the asset is ready for its intended use, applying the straight-line method over the estimated useful life.

In respect of additions and disposals during the year, depreciation/ amortization is charged when the asset is available for use and upto the month preceding the asset's classification as held for sale or derecognition, whichever is earlier.

Assets are derecognised when disposed off or when no future economic benefits are expected to flow from its use. Gains and losses on disposal of an item of property, plant and equipment are determined by comparing the proceeds from disposal with the carrying amount of property, plant and equipment, and are recognised on net basis within "other operating income" in profit and loss account.

3.2 Leases

Leases are classified as finance lease whenever the terms of the lease transfer substantially all the risks and rewards of ownership to the Company. All other leases are classified as operating leases.

Finance leases as lessee

The Company recognises finance leases as assets and liabilities in the balance sheet at amounts equal, at the inception of the lease, to the fair value of the asset or, if lower, at the present value of the minimum lease payments. In calculating the present value of the minimum lease payments the discount factor used is the interest rate implicit in the lease. Initial direct costs incurred are included as part of the amount recognised as an asset. The liabilities are classified as current and long term depending upon the timing of payment. Lease payments are apportioned between the finance charge and the reduction of outstanding liability. The finance charge is allocated to periods during the lease term so as to produce a constant periodic rate of interest on the remaining balance of the liability for each period. Finance charges are charged directly to profit and loss account.

Notes to the Financial Statements

For the year ended June 30, 2012

Operating leases/ Ijarah contracts

As lessor

Rental income from operating leases is recognised on straight-line basis over the term of the relevant lease.

As lessee

Rentals payable under operating leases / Ijarah are charged to profit and loss account on a straight-line basis over the term of relevant lease/ Ijarah.

3.3 Impairment

Non financial assets

The Company assesses at each balance sheet date whether there is any indication that assets except deferred tax assets and inventory may be impaired. If such indication exists, the carrying amounts of such assets are reviewed to assess whether they are recorded in excess of their recoverable amount. Where carrying values exceed the respective recoverable amounts, assets are written down to their recoverable amounts and the resulting impairment loss is recognised in profit and loss account except for the impairment loss on revalued assets, which is adjusted against the related revaluation surplus to the extent that the impairment loss does not exceed the surplus on revaluation of that asset. The recoverable amount is the higher of an asset's fair value less costs to sell and its value in use.

Where impairment loss subsequently reverses, the carrying amount of the asset is increased to the revised recoverable amount but limited to the extent of the carrying amount that would have been determined (net of depreciation/ amortization) had no impairment loss been recognised for the asset in prior years. Reversal of impairment loss is recognised in profit and loss account.

Financial assets

Financial assets are assessed at each reporting date to determine whether there is objective evidence that they are impaired. A financial asset is impaired if objective evidence indicates that a loss event has occurred after the initial recognition of the asset, and that the loss event had a negative effect on the estimated future cash flows of that asset that can be estimated reliably. Objective evidence that financial assets are impaired may include default or delinquency by a debtor, indications that a debtor or issuer will enter bankruptcy.

3.4 Investments

All purchases and sales of investments are recognised using settlement date accounting. Settlement date is the date on which that investments are delivered to or by the Company. All investments are derecognised when the rights to receive cash flows from the investments have expired or have been transferred and the Company has transferred substantially all risks and rewards of ownership.

Notes to the Financial Statements

For the year ended June 30, 2012

3.5 Investments held to maturity

Investments with fixed or determinable payments and fixed maturity that the Company has the positive intent and ability to hold till maturity are classified as investment held to maturity. These are initially recognised at cost inclusive of transaction cost and are subsequently carried at amortised cost using the effective interest rate method less impairment loss, if any. This method uses an effective interest rate that exactly discounts estimated future cash receipts through the expected life of the investment to its net carrying amount. Gains and losses are recognised in the profit and loss account when the investments are de-recognised or impaired, as well as through the amortization process.

3.6 Stores, spare parts and loose tools

These are valued at cost, determined on moving average cost basis, or net realisable value, whichever, is lower, less allowance for obsolete and slow moving items. For items which are slow moving and/or identified as surplus to the Company's requirement, a provision is made for excess of book value over estimated net realisable value. The Company reviews the carrying amount of stores, spare parts and loose tools on a regular basis and provision is made for obsolescence, if there is any change in usage pattern and physical form of related stores, spare parts and loose tools.

3.7 Stock-in-trade

Stock-in-trade is valued at lower of cost, determined on moving average basis, and net realisable value. The Cost includes expenditure incurred in acquiring the stock items and other cost incurred in bringing them to their present location and condition.

3.8 Trade debts and other receivables

Trade debts and other receivables are carried at original bill amount less an estimate made for doubtful receivables based on review of outstanding amounts at the year end. Balances considered bad and irrecoverable are written off against provision.

3.9 Cash and cash equivalents

Cash and cash equivalents are carried in the balance sheet at cost. For the purpose of cash flow statement, cash and cash equivalents comprise cash in hand, cheques in hand, balances with banks and highly liquid short term investments that are readily convertible to known amounts of cash and which are subject to insignificant risk of change in value with maturity of three months or less from the date of acquisition and short term borrowings.

3.10 Financial instruments

Financial assets and liabilities are recognised when the Company becomes a party to the contractual provisions of the instrument. These are derecognised when the Company loses control of contracted rights that comprise the financial assets and in the case of financial liabilities when the obligation specified in the contract is discharged, cancelled or expired. Any gain or loss on derecognition of financial assets and financial liabilities is included in profit & loss account currently.

Notes to the Financial Statements

For the year ended June 30, 2012

The particular recognition methods adopted by the Company are disclosed in the individual policy statements associated with each item of the financial instruments.

3.11 Offsetting

A financial asset and a financial liability is offset and the net amount is reported in the balance sheet, if the Company has a legal enforceable right to set-off the recognised amounts and intends either to settle on net basis or to realize the asset and settle the liability simultaneously.

3.12 Employee benefits

Defined benefit plan

The Company operates approved funded gratuity scheme for all its employees who have completed the minimum qualifying period of service as defined under the respective scheme. Provision is made annually to cover obligations under the scheme on the basis of actuarial valuation and is charged to income. The most recent valuation was carried out as at June 30, 2012 using the "Projected Unit Credit Method". The results of actuarial valuation are summarized in note 9.3 of these financial statements.

The amount recognised in the balance sheet represents the present value of defined benefit obligations as adjusted to unrecognised actuarial gain and losses as reduced by the fair value of plan assets.

Cumulative net unrecognised actuarial gains and losses at the end of previous year, which exceed ten percent of the greater of the present value of the Company's defined benefit obligation and the fair value of the plan assets, as at that date, are amortized over the expected average remaining working lives of the employees participating in the scheme.

Compensated absences

The Company provides for compensated absences of its employees on unavailed balance of leaves in the period in which the leave is earned. Accrual to cover the obligations is made using the current salary levels of the employees.

3.13 Trade and other payables

Liabilities for trade and other amounts payable are measured at cost which is the fair value of the consideration to be paid in the future for goods and services received.

3.14 Provisions

Provisions are recognised when the Company has a present legal or constructive obligation as a result of a past event, it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation and a reliable estimate of the amount can be made. However, provisions are reviewed at each balance sheet date and adjusted to reflect the current best estimates.

Notes to the Financial Statements

For the year ended June 30, 2012

3.15 Taxation

Taxation for the year comprises current and deferred tax. Taxation is recognised in the profit and loss account except to the extent that it relates to items recognised directly in equity or in other comprehensive income.

Current

Provision for current taxation is based on taxable income at the current rates of tax after taking into account applicable tax credits, rebates, losses and exemptions available, if any.

Deferred

Deferred tax is accounted for using the balance sheet liability method in respect of all taxable temporary differences arising from differences between the carrying amount of assets and liabilities in the financial statements and the corresponding tax bases used in the computation of taxable profit. Deferred tax liabilities are recognised for all taxable temporary differences and deferred tax assets are recognised to the extent that it is probable that taxable profits will be available against which the deductible temporary differences, unused tax losses and tax credits can be utilised. Deferred tax assets are reviewed at each reporting date and are reduced to the extent that is no longer probable that the related tax benefit will be realised.

Deferred tax is calculated at the rates that are expected to apply to the period when the differences reverse, based on tax rates that have been enacted. Deferred tax assets and liabilities are offset if there is a legally enforceable right to offset current tax liabilities and assets and they relate to income taxes levied by the same tax authority on the same taxable entity or on different tax entities but they intend to settle current tax liabilities and assets on a net basis or their tax assets and liabilities will be realised simultaneously.

3.16 Foreign currencies

Transactions in currencies other than Pak Rupees are recorded at the rates of exchange prevailing on the dates of transactions. At each balance sheet date, monetary assets and liabilities that are denominated in foreign currencies are retranslated at the rate prevailing on the balance sheet date. Gains and losses arising on retranslation are included in net profit or loss for the year.

3.17 Revenue recognition

Revenue is measured at the fair value of the consideration received or receivable and represents amounts received or receivable for goods and services provided in the normal course of business. Revenue is recognised in the accounting period in which the services are rendered and goods are delivered and it is probable that the economic benefits associated with the transactions will flow to the Company and the amount of the revenue can be measured reliably.

Interest income is accrued on a time basis, by reference to the principal outstanding and at the effective interest rate applicable, which is the rate that exactly discounts estimated future cash receipts through

Notes to the Financial Statements

For the year ended June 30, 2012

the expected life of the financial asset to that asset's net carrying amount.

Rental income is recognized on a straight line basis over the term of the rent agreement.

Scrap sales and miscellaneous receipts are recognised on realised amounts.

3.18 Borrowings

Borrowings are recognized initially at fair value net of transaction cost incurred and are subsequently measured at amortized cost using the effective interest rate method. Borrowings are classified as current liabilities unless the Company has an unconditional right to defer settlement of liability for at least twelve months after the balance sheet date.

3.19 Borrowing costs

Borrowing costs which are directly attributable to the acquisition, construction or production of a qualifying asset are capitalised as part of the cost of that asset. All other borrowing costs are charged to profit or loss.

3.20 Earnings per share

The Company presents basic and diluted earnings per share (EPS) data for its ordinary shares. Basic EPS is calculated by dividing the profit or loss attributable to ordinary shareholders of the Company by the weighted average number of ordinary shares outstanding during the period. Diluted EPS is determined by adjusting the profit or loss attributable to ordinary shareholder and weighted average number of ordinary shares outstanding for the effects of all potential ordinary shares.

3.21 Dividend

Dividend is recognised as a liability in the period in which it is declared.

4 SHARE CAPITAL

Issued, subscribed and paid up

2012	2011		2012	2011
Number			(Rupees)	
50,513,800	50,513,800	Ordinary shares of Rs. 10 each fully paid in cash	505,138,000	505,138,000

4.1 The Company has only one class of ordinary shares which carries no right to fixed income. The shareholders are entitled to receive dividends as declared from time to time and are entitled to one vote per share at meetings of the Company. All shares rank equally with regard to the Company's residual assets.

4.2 The Company has no reserved shares for issuance under options and sales contracts.

Notes to the Financial Statements

For the year ended June 30, 2012

Authorized

This represents 54,537,900 (2011: 54,537,900) ordinary shares of Rs. 10 each amounting to Rs. 545,379,000 (2011: Rs. 545,379,000).

5 CAPITAL RESERVE

This represents premium of Rs. 5 per share received on public issue of 8,000,000 ordinary shares of Rs.10 each in 1994. This reserve cannot be utilised except for the purposes mentioned under section 83 of the Companies Ordinance, 1984.

	2012 (Rupees)	2011 (Rupees)
6 SURPLUS ON REVALUATION OF PROPERTY, PLANT AND EQUIPMENT		
Balance at beginning of year	597,730,254	604,909,488
Transferred to unappropriated profits in respect of incremental depreciation charged during the year	(7,178,632)	(7,179,234)
Balance at end of year	590,551,622	597,730,254

6.1 Surplus on revaluation of property, plant and equipment is in respect of leasehold/ freehold land, which was revalued in 1999, 2004 and 2009, as disclosed in note 14.1. Due to revaluation of leasehold/ freehold land, incidence of related deferred tax liability does not arise.

	Note	2012 (Rupees)	2011 (Rupees)
7 LONG TERM FINANCING			
From banking and non-banking companies - secured			
Allied Bank Limited	7.2	107,142,861	192,857,145
Meezan Bank Limited - DM I	7.3	-	111,458,334
Meezan Bank Limited - DM II	7.3.1	194,280,330	227,617,530
Meezan Bank Limited - DM III	7.3.2	220,000,000	-
MCB Bank Limited - DF I	7.4	64,000,000	80,000,000
MCB Bank Limited - DF II	7.4.1	96,000,000	-
MCB Bank Limited - DF III	7.4.2	35,764,654	-
First Habib Modaraba	7.5	34,500,000	-
Al Baraka Bank (Pakistan) Limited	7.6	150,000,000	-
Habib Bank Limited	7.7	175,000,000	-
Burj Bank Limited	7.8	400,000,000	-
		1,476,687,845	611,933,009
Less: Current portion		258,601,964	246,509,818
		1,218,085,881	365,423,191

Notes to the Financial Statements

For the year ended June 30, 2012

- 7.1 The Company has fully availed all the above mentioned facilities except as mentioned in note 7.4.2 below.
- 7.2 This represents Demand Finance obtained on markup basis at 3 months KIBOR plus 1% (2011: 3 months KIBOR plus 1%) per annum to be paid on quarterly basis in arrears. This finance is repayable in 14 equal quarterly installments against sanctioned limit of Rs. 300 million (2011: Rs. 300 million). The financing is repayable by July 10, 2013 and is secured by first pari passu charge on all present and future fixed assets of the Company amounting to Rs. 400 million.
- 7.3 This represented Diminishing Musharika (DM I) facility obtained on markup basis ranging from 3 months KIBOR plus 1% - 1.5% (2011: 3 months KIBOR plus 1% - 1.5%) per annum of two tranches of Rs. 100 million each and one tranche of Rs. 56.25 million (2011: two tranches of Rs. 100 million each and one tranche of Rs. 56.25 million), repaid in 10 and 8 equal quarterly installments respectively. The sanctioned limit for DM I was Rs. 256.25 million (2011: Rs. 256.25 million). The financing was secured by first pari passu charge on present and future fixed assets of the Company amounting to Rs. 786 million. The financing was further secured by personal guarantees of chief executive and two directors of the Company.
- 7.3.1 This represents Diminishing Musharika (DM II) facility obtained on markup basis of 3 months KIBOR plus 1.1% (2011: 3 months KIBOR plus 1.1%) per annum of three tranches of Rs. 111.55 million, Rs. 88.47 million and Rs. 27.6 million (2011: three tranches of Rs. 111.55 million Rs. 88.47 million and Rs. 27.6 million), repayable in 12 equal quarterly installments. The sanctioned limit for DM II is Rs. 227.62 million (2011: Rs. 243.75 million). The first two tranches and the third tranche are to be repaid by December 04, 2014 and September 26, 2015 respectively. The financing is secured as stated in note 7.3.
- 7.3.2 This represents Diminishing Musharika (DM III) facility obtained on markup basis at 3 months KIBOR plus 1.25% (2011: NIL) per annum of four tranches of Rs. 75 million, Rs. 48 million, Rs. 52 million and Rs. 45 million (June 2011: NIL), repayable in 12 equal quarterly installments. The sanctioned limit for DM III is Rs. 220 million (June 2011: Rs. NIL) which shall be repaid by July 22, 2016. The financing is secured as stated in note 7.3 alongwith first exclusive charge of Rs. 334 million by way of token registered mortgage of Rs. 100,000 and rest against equitable mortgage of Plot No. 5 located at F-11, Markaz, Islamabad.
- 7.4 This represents Demand Finance (DF I) obtained on markup basis at 3 months KIBOR plus 1.35% (2011: 3 months KIBOR plus 1.35%) per annum. This finance is repayable by May 23, 2016 in 20 equal quarterly installments against sanctioned limit of Rs. 80 million (2011: Rs. 80 million). The financing is secured by first pari passu charge of Rs. 555 million on all present and future assets of the Company including specific equipment, accessories and tools by way of token registered mortgage/ equitable mortgage of project (land, building and machinery located at H-8/4, Islamabad). The finance is further secured by personal guarantees of chief executive and one director of the Company.
- 7.4.1 This represents Demand Finance (DF II) obtained on markup basis at 3 months KIBOR plus 1% (2011: NIL) per annum. This finance is repayable by May 26, 2017 in 20 equal quarterly installments against sanctioned limit of Rs. 96 million (2011: NIL). The financing is secured as stated in note 7.4 above.

Notes to the Financial Statements

For the year ended June 30, 2012

- 7.4.2 This represents Demand Finance (DF III) obtained on markup basis at 3 months KIBOR plus 1% (2011: NIL) per annum. This finance is repayable by August 28, 2017 in 20 equal quarterly installments against sanctioned limit of Rs. 104 million out of which Rs. 68.23 million remained unavailed (2011: NIL). The financing is secured as stated in note 7.4 above.
- 7.5 This represents Diminishing Musharika facilities obtained on markup basis at 6 months KIBOR plus 1% (2011: NIL) per annum, repayable by November 27, 2014 in 12 equal quarterly installments. The aggregate sanctioned limit is Rs. 45 million (2011: Rs. NIL). The financing is secured by charge on specific fixed assets of the Company amounting to Rs. 50 million.
- 7.6 This represents Diminishing Musharika facility obtained on markup basis at 3 months KIBOR plus 2% (2011: NIL), repayable by December 31, 2015 in 16 equal quarterly installments. The sanctioned limit is Rs. 150 million (2011: Rs. NIL). The financing is secured by ranking charge of Rs. 200 million upgraded into first parri passu charge over entire fixed assets of the Company and further secured by personal guarantees of directors of the Company.
- 7.7 This represents Demand Finance obtained on markup basis at 3 months KIBOR plus 1.5% (2011: NIL) per annum, repayable by March 30, 2016 in 8 equal semi-annual installments. The sanctioned limit is Rs. 175 million (2011: Rs. NIL). The financing is secured by ranking charge upgraded in to first parri passu charge over entire current/ fixed assets of the Company amounting to Rs. 300 million including equitable mortgage over land and building located at H-8/4, Islamabad and a barren land located at Mouza Phulgaran, Islamabad.
- 7.8 This represents Diminishing Musharika obtained on markup basis at 6 months KIBOR plus 1.25% (2011: NIL) per annum, repayable by December 28, 2016 in 6 equal semi-annual installments. The sanctioned limit is Rs. 400 million (2011: Rs. NIL). The financing is secured by ranking charge upgraded into first pari passu charge over entire current/ fixed assets of the Company amounting to Rs. 533.33 million. The financing is further secured by personal guarantees of chief executive and a director of the Company.

	Note	2012 (Rupees)	2011 (Rupees)
8 DEFERRED TAXATION			
Deferred tax liability	8.1	463,181,259	389,804,406
Deferred tax asset	8.2	(11,917,211)	(22,873,953)
Net deferred tax liability		451,264,048	366,930,453
8.1 Deferred tax liability on taxable temporary differences:			
Accelerated depreciation allowance		463,181,259	385,834,276
Finance lease arrangements		-	3,970,130
		463,181,259	389,804,406
8.2 Deferred tax asset on deductible temporary differences:			
Specific provisions		(11,917,211)	(22,873,953)

Notes to the Financial Statements

For the year ended June 30, 2012

	Note	2012 (Rupees)	2011 (Rupees)
9	TRADE AND OTHER PAYABLES		
Creditors		438,191,838	308,284,522
Accrued liabilities		115,409,657	87,264,904
Advance payments		619,215	1,868,586
Compensated absences		39,888,076	31,222,832
Medical consultants' charges		173,192,695	133,068,535
Payable to related parties - unsecured	9.1	667,528	2,252,386
Security deposits	9.2	16,060,332	16,558,050
Unclaimed dividend		17,551,869	18,136,884
Retention money		5,706,991	3,264,235
Payable to Shifa International Hospitals Limited (SIHL) Employees' Gratuity Fund	9.3	-	6,257,858
		807,288,201	608,178,792

9.1 This represents amount payable to Tameer-e-Millat Foundation and Shifa Foundation having common directorship with the Company. Maximum amount due at the end of any month during the year was Rs. 941,737 (2011: Rs. 1,291,157) and Rs. 5,825,533 (2011: Rs. 6,114,129) respectively.

9.2 This represents customers' and employees' security deposits that are repayable on termination of respective agreements.

9.3 Amounts recognised in the balance sheet are determined as follows:

	Note	2012 (Rupees)	2011 (Rupees)
Present value of funded obligation		132,858,004	105,290,438
Fair value of plan assets		(118,918,715)	(98,448,829)
Unrecognised actuarial losses		(15,892,829)	(583,751)
Transferred to prepayments	20.1	1,953,540	-
		-	6,257,858

9.3.1 Movement in the present value of funded obligation:

Balance at beginning of year		105,290,438	84,259,273
Interest cost for the year		14,740,661	10,111,113
Current service cost for the year		19,877,490	16,571,550
Benefits paid during the year		(14,887,889)	(7,708,478)
Benefits payable		(8,000)	(74,764)
Non refundable loan to employees adjustable against gratuity		(4,520,205)	-
Actuarial loss on present value of funded obligation		12,365,509	2,131,744
Balance at end of year		132,858,004	105,290,438

Notes to the Financial Statements

For the year ended June 30, 2012

	2012 (Rupees)	2011 (Rupees)
9.3.2	Movement in the fair value of plan assets:	
Balance at beginning of year	98,448,829	77,762,872
Expected return on plan assets	13,782,836	9,331,545
Contributions during the year	29,046,713	17,738,675
Benefits paid during the year	(14,887,889)	(7,708,478)
Benefits payable	(8,000)	(74,764)
Non refundable loan to employees adjustable against gratuity	(4,520,205)	-
Actuarial gain/(loss) on plan assets	(2,943,569)	1,398,979
Balance at end of year	118,918,715	98,448,829
9.3.3	Charge for the year:	
Current service cost	19,877,490	16,571,550
Interest cost	14,740,661	10,111,113
Expected return on plan assets	(13,782,836)	(9,331,545)
	20,835,315	17,351,118
9.3.4	The charge has been allocated as follows:	
Salaries, wages and benefits	20,224,336	16,666,259
Capital work in progress	610,979	684,859
	20,835,315	17,351,118
9.3.5	Movement in the (asset)/ liability recognised in the balance sheet:	
Balance at beginning of year	6,257,858	6,645,415
Charge for the year	20,835,315	17,351,118
Contributions during the year	(29,046,713)	(17,738,675)
Balance at end of year	(1,953,540)	6,257,858
9.3.6	Plan assets comprise of:	
Accrued mark up	3,037,849	1,931,527
Term deposit receipts	66,000,000	56,000,000
Cash and bank balances	49,880,866	40,517,302
	118,918,715	98,448,829
9.3.7	Actual return on plan assets:	
Expected return on plan assets	13,782,836	9,331,545
Actuarial (loss)/gain on plan assets	(2,943,569)	1,398,979
	10,839,267	10,730,524

Notes to the Financial Statements

For the year ended June 30, 2012

	2012	2011
9.3.8 The principal actuarial assumptions used were as follows:		
Discount rate	13%	14%
Expected rate of increase in salaries	12%	13%
Expected return on plan assets	14%	12%
Mortality rate	EFU 1961-66 Mortality Table	
Average expected remaining working life time of employees	6 years	6 years
Estimated charge to profit and loss account for the next year	Rs. 26,886,070	Rs. 20,835,315

9.3.9 The present value of the defined benefit obligation, the fair value of the plan assets and the surplus or deficit in the plan for the current year and previous four years are mentioned hereunder:

	2012	2011	2010	2009	2008
	(Rupees '000')				
Present value of defined benefit obligation	(132,858)	(105,290)	(84,259)	(76,317)	(57,407)
Fair value of plan assets	118,919	98,449	77,763	37,136	12,274
Deficit	(13,939)	(6,841)	(6,496)	(39,181)	(45,133)
Experience adjustments arising:					
-on defined benefit obligation	12,366	2,132	(9,549)	5,389	(2,647)
-on plan assets	(2,944)	1,399	1,735	1,430	(2,335)

	Note	2012 (Rupees)	2011 (Rupees)
10 MARKUP ACCRUED			
Long term financing - secured		34,422,345	12,020,186
Liabilities against assets subject to finance lease		-	14,308
Running finance facilities - secured		6,674,121	4,386,710
		41,096,466	16,421,204
11 SHORT TERM BORROWINGS			
Running finance facilities from banking companies - secured			
MCB Bank Limited	11.2	-	78,027,202
Allied Bank Limited	11.3	-	31,115,712
KASB Bank Limited	11.4	-	43,902,502
		-	153,045,416

Notes to the Financial Statements

For the year ended June 30, 2012

- 11.1 The aggregate unavailed short term borrowing facilities (including Murabaha) amounted to Rs 350 million (2011: Rs. 122 million).
- 11.2 Short term running finance facility has been availed from the bank under markup arrangements. This carried markup at the rate of three months KIBOR plus 1.25% (2011: 3 months KIBOR plus 1.25%) per annum repayable quarterly, calculated on daily product basis. The sanctioned limit of facility is Rs. 100 million (2011: Rs.100 million). The facility is secured by first pari passu charge of Rs 555 million on the present and future fixed and current assets of the Company as stated in note 7.4.
- 11.3 Short term running finance facility has been availed from the bank under markup arrangements. This carried markup at the rate of 1 month KIBOR plus 1.25% (2011: 1 month KIBOR plus 1.25%) per annum repayable quarterly, calculated on daily product basis. The sanctioned limit of facility is Rs. 75 million (2011: Rs.75 million). The facility is secured by first pari passu charge on the present and future current assets of the Company amounting to Rs. 100 million.
- 11.4 Short term running finance facility has been availed from the bank under markup arrangements. This carried markup at the rate of 3 months KIBOR plus 1% (2011: 3 months KIBOR plus 1%) per annum repayable quarterly, calculated on daily product basis. The aggregate sanctioned limit of facility is Rs. 50 million (2011: Rs. 50 million). The facility is secured by first pari passu charge on the present and future fixed and current assets of the Company.

12 LIABILITIES AGAINST ASSETS SUBJECT TO FINANCE LEASE

This represented the vehicles and medical equipment acquired under finance leases from Askari Bank Limited. The financing rate used as discounting factor was 16% per annum. Pattern of amounts due were as follows:

Note	2012 (Rupees)	2011 (Rupees)
Within one year	-	3,690,145
After one year but not more than five years	-	-
Total minimum lease payments	-	3,690,145
Less: Amount representing finance cost	-	34,353
Present value of minimum lease payments	-	3,655,792
Less: Due within one year	-	3,655,792
Balance due after one year but not more than five years	-	-

13 CONTINGENCIES AND COMMITMENTS

13.1 Contingencies

Claims against the Company not acknowledged as debts:

Patients	13.1.1	163,200,000	26,245,000
Contractor	13.1.2	6,040,810	6,040,810
Others	13.1.3	20,000,000	-
Letter of guarantee	13.1.4	25,000,000	20,100,000

Notes to the Financial Statements

For the year ended June 30, 2012

- 13.1.1 This represents claims lodged by patients and their heirs against the Company for alleged negligence on part of the consultants / doctors. The management is contesting the claims which are pending in courts and believes that the contention of the claimants will not be successful and no material liability is likely to arise.
- 13.1.2 This represents suit lodged by a contractor for recovery of claims. The management believes that the suit will be decided in favour of the Company.
- 13.1.3 This represents the penalty imposed by Competition Commission of Pakistan to each Gulf Co-operation Council's (GCC) Approved Medical Centers (GAMCs) including SIHL on account of alleged non competitive practice/ arrangement of territorial division and equal allocation of GAMCs customers. Management of the Company and other GAMCs are jointly contesting the matter and firmly believe that the case will be decided in favour of the GAMCs including SIHL.
- 13.1.4 This represents a letter of guarantee issued by bank in favour of Sui Northern Gas Pipelines Limited (SNGPL) in ordinary course of Company's business.

	2012 (Rupees)	2011 (Rupees)
13.2 Commitments		
13.2.1 Capital expenditure contracted	28,760,000	20,917,658
13.2.2 Letters of credit	-	9,288,848

Notes to the Financial Statements

For the year ended June 30, 2012

14. PROPERTY, PLANT AND EQUIPMENT

Particulars	Owned assets										Leased assets					Total
	Freehold land	Leasehold land	Building on leasehold land	Leasehold improvements	Biomedical equipment	Air conditioning equipment and machinery	Electrical and other equipments	Furniture and fittings	Construction equipment	Computers installations	Vehicles	Biomedical equipment	Vehicles	Capital work in progress (notes 14.5)		
	(Rupees)															
Balance as at July 01, 2010	102,050,000	575,119,420	1,063,042,471	-	1,041,301,647	101,512,913	162,504,378	45,526,843	8,670,851	50,456,673	34,995,132	14,610,856	14,000,758	217,498,163	3,431,290,105	
Additions	-	-	-	-	122,992,514	11,009,734	29,633,594	10,165,764	-	10,198,816	16,144,186	-	-	120,234,903	320,379,511	
Disposals	-	-	-	-	(900,922)	-	-	-	-	-	-	-	-	-	(900,922)	
Write offs	-	-	-	-	(21,920,533)	-	(143,750)	(1,442,173)	-	(1,483,032)	-	-	-	-	(24,989,488)	
Transfers	-	-	79,359,314	-	119,712,635	-	-	-	-	-	3,782,910	-	(3,782,910)	(199,071,949)	-	
Balance as at June 30, 2011	102,050,000	575,119,420	1,142,401,785	-	1,261,185,341	112,522,647	191,994,222	54,250,434	8,670,851	59,172,457	54,922,228	14,610,856	10,217,848	138,661,117	3,725,779,206	
Balance as at July 01, 2011	102,050,000	575,119,420	1,142,401,785	-	1,261,185,341	112,522,647	191,994,222	54,250,434	8,670,851	59,172,457	54,922,228	14,610,856	10,217,848	138,661,117	3,725,779,206	
Additions	91,000,000	316,666,350	-	78,709,670	169,687,264	10,574,751	54,189,121	18,256,541	-	14,139,113	7,667,240	-	-	225,260,941	986,150,991	
Disposals	-	-	-	-	(15,500)	(6,665,525)	-	-	-	-	(3,856,000)	-	-	-	(10,537,025)	
Write offs	-	-	-	-	(10,157,343)	-	(241,800)	(89,464)	-	(924,267)	-	-	-	-	(11,412,874)	
Transfers	-	-	234,672,348	-	14,610,856	-	-	-	-	-	10,217,848	(14,610,856)	(10,217,848)	(234,672,348)	-	
Balance as at June 30, 2012	193,050,000	891,785,770	1,377,074,133	78,709,670	1,435,310,618	123,097,398	239,276,018	72,417,511	8,670,851	72,387,303	68,951,316	-	-	129,249,710	4,689,980,298	
Depreciation/ amortization																
Balance as at July 01, 2010	-	8,475,446	193,513,913	-	382,225,333	59,824,207	86,269,592	21,587,560	6,432,270	41,813,010	24,861,238	6,574,879	5,360,445	-	836,937,893	
Charge for the year	-	7,264,668	30,333,279	-	104,518,459	8,548,417	16,682,595	4,273,249	597,496	4,949,658	4,579,070	1,461,086	2,421,859	-	185,629,836	
On disposals	-	-	-	-	(794,029)	-	-	-	-	-	-	-	-	-	(794,029)	
On write offs	-	-	-	-	(14,553,556)	-	(99,197)	(921,455)	-	(1,413,425)	-	-	-	-	(16,987,633)	
Transfers	-	-	-	-	-	-	-	-	-	-	2,332,794	-	(2,332,794)	-	-	
Balance as at June 30, 2011	-	15,740,114	223,847,192	-	471,396,207	68,372,624	102,852,990	24,939,354	7,029,766	45,349,243	31,773,102	8,035,965	5,449,510	-	1,004,786,067	
Balance as at July 01, 2011	-	15,740,114	223,847,192	-	471,396,207	68,372,624	102,852,990	24,939,354	7,029,766	45,349,243	31,773,102	8,035,965	5,449,510	-	1,004,786,067	
Charge for the year	-	9,663,656	34,230,307	7,910,673	123,151,984	10,411,751	20,936,914	5,574,390	597,492	7,509,233	8,441,762	1,095,810	1,021,791	-	230,545,763	
On disposals	-	-	-	-	(9,817)	(5,306,542)	-	-	-	-	(706,934)	-	-	-	(6,023,293)	
On write offs	-	-	-	-	(7,382,790)	-	(163,386)	(74,632)	-	(895,551)	-	-	-	-	(8,716,359)	
On transfers	-	-	-	-	9,131,775	-	-	-	-	-	6,471,301	(9,131,775)	(6,471,301)	-	-	
Balance as at June 30, 2012	-	25,403,770	258,077,499	7,910,673	596,087,359	78,784,375	118,319,976	30,439,112	7,627,258	51,962,925	45,979,231	-	-	-	1,220,592,178	
Carrying value as at June 30, 2011	102,050,000	559,379,306	918,554,593	-	789,789,134	44,150,023	89,141,232	29,311,080	1,641,085	13,823,214	23,149,126	6,574,891	4,768,338	138,661,117	2,720,993,139	
Carrying value as at June 30, 2012	193,050,000	866,382,000	1,118,996,634	70,798,997	839,223,259	44,315,023	120,956,042	41,978,399	1,043,593	20,424,378	22,972,085	-	-	129,249,710	3,469,388,120	
Annual rate of depreciation %	-	1.25	2.5-10	20	10	10-15	10-15	10	10-20	15-30	20	10-15	20	-	20	

Notes to the Financial Statements

For the year ended June 30, 2012

- 14.1 The Company had its leasehold land revalued in 1999, 2004 and 2009 and Freehold land in 2009 by an independent valuer, using fair market value. These revaluations resulted in net surplus of Rs. 180,873,196, Rs. 63,890,811 and Rs. 377,743,420 respectively. The revaluation surplus amounting to Rs. 622,507,427 has been included in the carrying value of the respective assets. Out of the revaluation surplus, an amount of Rs. 590,551,622 (2011: Rs. 597,730,254) remains undepreciated as at June 30, 2012.

Had there been no revaluation the carrying value would have been as under:

	Cost at June 30	Accumulated amortization at June 30 (Rupees)	Carrying value at June 30
Leasehold land			
2012	8,398,785	1,951,231	6,447,554
2011	8,398,785	1,866,395	6,532,390
Freehold land			
2012	57,167,862	-	57,167,862
2011	57,167,862	-	57,167,862

- 14.2 Property, plant and equipment of the Company are encumbered with banking Companies and non-banking financial institutions under financing arrangements, as disclosed in note 7 and 11.

- 14.3 The depreciation charge for the year has been allocated as follows:

	Note	2012 (Rupees)	2011 (Rupees)
Operating costs	26	229,948,271	185,032,340
Capital work in progress	14.5.1	597,492	597,496
		230,545,763	185,629,836

- 14.4 Detail of property, plant and equipment disposed off during the current year, having carrying value of more than fifty thousand rupees:

Asset particulars	Cost	Carrying value (Rupees)	Sale	Purchaser proceeds	Mode of disposal
Electrical equipment	6,665,525	1,358,983	1,000,000	Apollo Telecom (Pvt) Ltd	Negotiation
Vehicle	3,856,000	3,149,066	3,500,000	ITHFZ Mills Ltd	Negotiation

Notes to the Financial Statements

For the year ended June 30, 2012

Property, plant and equipment having cost and book value of Rs. 854,922 and Rs. 71,244 respectively, were disposed off for Rs. 600,000 during the year ended June 30, 2011.

	Note	2012 (Rupees)	2011 (Rupees)
14.5	Capital work in progress		
Construction work in progress - at cost	14.5.1	59,011,557	123,603,989
Stores held for capital expenditure	14.5.2	8,215,997	5,441,406
Installation of equipment in progress	14.5.3	62,022,156	9,615,722
		129,249,710	138,661,117

14.5.1 Construction work in progress - at cost

This represents cost of civil works mainly comprising of cost of materials, payments to contractors and salaries and benefits pertaining to different blocks of hospital building which are currently under construction. Given below is the break-up of these blocks:

	Note	2012 (Rupees)	2011 (Rupees)
Block "D"		23,235,947	47,784,236
Block "E"		13,338,890	14,494,117
Block "F"		20,078,740	30,282,898
Other constructions		1,760,488	30,445,242
Depreciation capitalised during the year	14.3	597,492	597,496
		59,011,557	123,603,989

14.5.2 Stores held for capital expenditure

Stores held for capital expenditure		13,297,017	10,545,779
Less: provision for slow moving and obsolete items		5,081,020	5,104,373
		8,215,997	5,441,406

14.5.3 Installation of equipment in progress

Liver transplant instruments		-	4,924,648
Diathermy		-	2,564,700
Patients beds		8,723,459	-
Cleaning and washing units and steam sterilizers		21,419,679	-
Gas Generator		31,879,018	-
Others		-	2,126,374
		62,022,156	9,615,722

Notes to the Financial Statements

For the year ended June 30, 2012

	Note	2012 (Rupees)	2011 (Rupees)
15	LONG TERM DEPOSITS		
Lease key money deposits	15.1	6,184,600	6,198,086
Less: current portion of lease key money deposits	20	2,798,700	2,582,686
		3,385,900	3,615,400
Security deposits	15.2	18,679,196	6,680,324
		22,065,096	10,295,724
15.1	This represent lease key deposits adjustable on expiry of respective lease terms / ijarah financing against transfer of titles of relevant assets.		
15.2	This represent security deposits given to various institutions/ persons and are generally refundable on termination of relevant services/ arrangements.		
	Note	2012 (Rupees)	2011 (Rupees)
16	STORES, SPARE PARTS AND LOOSE TOOLS		
Stores		99,758,150	59,848,226
Spare parts		11,970,823	8,830,366
Loose tools		543,703	286,119
		112,272,676	68,964,711
Less: provision for slow moving and obsolete items		5,061,123	4,629,686
		107,211,553	64,335,025
17	STOCK-IN-TRADE		
This represents medicines being carried at moving average cost.			
18	TRADE DEBTS		
Considered good - unsecured			
Related party - Shifa Foundation		11,703,739	27,011,382
Others		329,455,551	257,251,483
Considered doubtful			
Others		34,049,175	51,964,300
		375,208,465	336,227,165
Less: provision for doubtful debts	35.1.3	34,049,175	51,964,300
		341,159,290	284,262,865

Notes to the Financial Statements

For the year ended June 30, 2012

18.1 Maximum amount due from Shifa Foundation at the end of any month during the year was Rs. 34,562,378 (2011: Rs. 44,567,472).

18.2 Trade debts that are past due beyond 18 months are fully provided where trade debts due between 1 month to 18 month are provided on estimated irrecoverable amounts, on the basis of past experience.

	Note	2012 (Rupees)	2011 (Rupees)
19 LOANS AND ADVANCES			
Considered good - unsecured			
Employees - executives	19.1	5,043,860	3,056,958
- other employees		16,383,083	13,631,724
		21,426,943	16,688,682
Consultants		4,026,830	11,163,644
Suppliers		84,607,454	53,038,474
		110,061,227	80,890,800
19.1 Reconciliation of carrying amount of advances given to executives:			
Balance at beginning of year		3,056,958	2,606,072
Disbursements during the year		10,553,954	6,284,185
		13,610,912	8,890,257
Less: Repayments during the year		8,567,052	5,833,299
Balance at end of year		5,043,860	3,056,958

The above advances were given in accordance with the Company's service rules. The maximum amount due from executives at the end of any month during the year was Rs. 5,043,860 (2011: Rs. 4,078,514).

	Note	2012 (Rupees)	2011 (Rupees)
20 TRADE DEPOSITS AND SHORT TERM PREPAYMENTS			
Current portion of lease key money deposits	15	2,798,700	2,582,686
Other deposits		2,560,000	2,070,000
Short term prepayments	20.1	11,258,358	8,221,910
		16,617,058	12,874,596

20.1 This includes Rs. 1,953,540 representing the excess funds contributed to SIHL Employees' Gratuity Fund against the obligation for current year as disclosed in note 9.3.

Notes to the Financial Statements

For the year ended June 30, 2012

21 OTHER FINANCIAL ASSETS

Held-to-maturity investment

This represented a term deposit receipt (TDR) of Al Baraka Bank (Pakistan) Limited having face value of Rs. 10 million encashed on August 15, 2011 carried effective markup rate of 12.25% per annum.

	Note	2012 (Rupees)	2011 (Rupees)
22 TAX REFUNDS DUE FROM THE GOVERNMENT (NET OF PROVISION)			
Balance at beginning of year		8,526,730	(988,417)
Income tax paid during the year		96,406,794	77,974,740
		104,933,524	76,986,323
Less: provision for taxation for the year	28	25,827,304	68,459,593
Balance at end of year		79,106,220	8,526,730

23 CASH AND BANK BALANCES

Cash at banks on:

Current accounts

32,911,594

23,279,225

Saving accounts:

- Local currency

262,584,042

93,229,516

- Foreign currency

229,077

151,437

23.1

262,813,119

93,380,953

23.2

295,724,713

116,660,178

Cheques in hand

-

24,737,079

Cash in hand

10,727,750

5,704,913

306,452,463

147,102,170

23.1 These carry effective profit rates ranging from 5% - 9.5% and 0.4% (2011: 4% - 8 % and 0.4% - 0.42%) per annum.

23.2 Balances with banks includes Rs. 16,060,332 (2011: Rs. 16,558,050) in respect of security deposits (note 9.2).

Notes to the Financial Statements

For the year ended June 30, 2012

	Note	2012 (Rupees)	2011 (Rupees)
24	NET REVENUE		
Inpatients		1,936,030,555	1,522,195,439
Outpatients		1,223,536,054	920,413,017
Pharmacy		1,187,354,506	832,153,430
Cafeteria		143,828,381	125,570,797
Rent of building	24.1	23,405,673	21,257,246
Other services		20,382,392	15,730,714
		4,534,537,561	3,437,320,643
Less: discount		82,756,309	24,632,660
Net revenue		4,451,781,252	3,412,687,983

24.1 This mainly includes rental income on operating leases to related parties.

	Note	2012 (Rupees)	2011 (Rupees)
25	OTHER OPERATING INCOME		
Income from financial assets:			
Profit on investments and bank deposits		5,042,290	5,261,365
Income from other than financial assets:			
Gain on disposal of property, plant and equipment		2,268	528,757
Liabilities written back		1,527,693	678,904
Gain on foreign currency translation		51,782	-
Miscellaneous	25.1	8,188,213	6,458,877
		14,812,246	12,927,903

25.1 This represents sale of Shifa News (magazine of Shifa Publications), advertisement income from Shifa News and sale of scrap.

Notes to the Financial Statements

For the year ended June 30, 2012

	Note	2012 (Rupees)	2011 (Rupees)
26 OPERATING COSTS			
Medicines consumed		995,845,824	674,993,295
Supplies consumed		722,428,882	562,618,358
Salaries, wages and benefits	26.1	1,412,807,053	1,047,849,639
Utilities		153,817,969	139,643,059
Communication		21,089,334	17,714,403
Traveling and conveyance		11,283,198	3,020,641
Printing and stationery		49,185,236	38,204,249
Repairs and maintenance		176,214,916	139,601,694
Auditors' remuneration	26.2	1,625,000	1,625,000
Legal and professional		9,897,771	1,959,957
Rent		43,854,589	17,258,719
Rates and taxes		2,556,768	6,295,505
Advertising and sales promotion		8,753,744	6,934,066
Fee, subscription and membership		4,255,717	3,032,962
Vehicle and equipment rentals	26.3	7,927,736	5,112,200
Laundry charges		7,576,581	6,874,043
Cleaning and washing		31,201,313	22,323,051
Insurance		6,556,368	7,654,271
Property, plant and equipment written off	26.4	2,696,515	8,001,855
Provision for doubtful debts	35.1.3	13,223,976	9,722,864
Provision for slow moving stores		408,084	4,299,313
Depreciation / amortization	14.3	229,948,271	185,032,340
Donation	26.5	15,100,000	20,000,000
Other expenses		16,582,824	12,635,498
		3,944,837,669	2,942,406,982

26.1 This includes employee retirement benefits (gratuity expense) of Rs. 20,224,336 (2011: Rs. 16,666,259), expense for accumulating absences of Rs. 21,369,933 (2011: Rs. 19,245,544) and provision for bonus to employees of Rs. 56,862,335 (2011: Rs. 48,839,506).

	2012 (Rupees)	2011 (Rupees)
26.2 Auditors' remuneration		
Audit fee	1,000,000	1,000,000
Half yearly review fee	400,000	400,000
Other certifications	125,000	125,000
Out of pocket expenses	100,000	100,000
	1,625,000	1,625,000

Notes to the Financial Statements

For the year ended June 30, 2012

- 26.3 This includes Rs. 7,679,312 (2011: Rs. 4,874,300) on account of ujarah payments under an Ijarah. As required under IFAS 2 "Ijarah", (notified through SRO 431(I) /2007 by Securities & Exchange Commission of Pakistan) ujarah payments under an Ijarah are recognised as an expense in the profit and loss account on straight line basis over the Ijarah term.

The amounts of future ujarah payments and the periods in which these will be due are as follows:

	2012 (Rupees)	2011 (Rupees)
Within one year	6,649,999	6,597,516
After one year but not more than five years	5,439,710	5,813,927
Total ujarah payments	12,089,709	12,411,443

- 26.4 These represent assets written off that are determined to be irreparable after carrying out detailed physical verification exercise by the management.

	2012 (Rupees)	2011 (Rupees)
26.5 Shifa Foundation	5,000,000	10,000,000
Tameer -e- Millat Foundation	10,000,000	10,000,000
PANAH	100,000	-
	15,100,000	20,000,000

- 26.5.1 Shifa Foundation and Tameer-e-Millat Foundation are related parties due to common directorship. While none of the directors and their spouses have any interest in PANAH (not for profit organization).

	2012 (Rupees)	2011 (Rupees)
27 FINANCE COST		
Markup on:		
Long term financing	110,276,456	95,979,917
Liabilities against assets subject to finance lease	20,045	431,615
Running finance and murabaha facilities	35,579,305	15,606,078
Credit card payment collection charges	3,779,495	2,776,912
Loss on foreign currency translations	-	139,141
Bank charges and commission	1,144,474	746,269
	150,799,775	115,679,932

Notes to the Financial Statements

For the year ended June 30, 2012

	Note	2012 (Rupees)	2011 (Rupees)
28 PROVISION FOR TAXATION			
Current			
- for the year		25,424,421	68,459,593
- Prior year		402,883	-
	22	25,827,304	68,459,593
Deferred		84,333,595	40,469,864
		110,160,899	108,929,457

28.1 Reconciliation of tax charge for the year

Profit before taxation		370,956,054	367,528,972
Applicable tax rate		35.00%	35.00%
Add: Tax effect of amounts taxed at lower rates/ others		24.50%	15.68%
Less: Net tax effect of amounts that are deductible for tax purposes		29.80%	21.04%
Average effective tax rate charged on income		29.70%	29.64%

28.2 Rectification applications from tax years 2003 to 2006 and tax year 2008 are pending for disposal with tax department on account of adjustment of brought forward/ carry forward loss and tax credits. These rectifications are treated as rectified under sub-section 3 of section 221 of Income Tax Ordinance, 2001.

	Note	2012 (Rupees)	2011 (Rupees)
29 EARNINGS PER SHARE - BASIC AND DILUTED			
29.1 Basic			
Profit for the year (Rupees)		260,795,155	258,599,515
Weighted average number of shares in issue during the year	4	50,513,800	50,513,800
Earnings per share - basic and diluted (Rupees)		5.16	5.12

29.2 There is no dilutive effect on the basic earnings per share of the Company.

30 CAPACITY UTILIZATION

The actual inpatient room occupancy of SIHL Islamabad and SIHL Faisalabad was 108,012 bed days (2011: 102,073 bed days) and 856 bed days (2011: Nil) out of available 163,069 bed days (2011: 155,296 bed days) and 7,385 bed days (2011: Nil) during the operational year which comes to 66.24 % (2011: 65.73%) and 11.59% (2011: Nil) of total capacity, respectively. The under utilization reflects the pattern of patient turnover which is beyond the management's control.

Notes to the Financial Statements

For the year ended June 30, 2012

31 RELATED PARTIES TRANSACTIONS

The related parties comprise of directors, major shareholders, key management personnel, SIHL Employees' Gratuity Fund and the entities over which directors are able to exercise influence. The amounts due from and due to these undertakings are shown under trade debts, loans and advances and trade and other payables. The remuneration of chief executive, directors and executives is disclosed in note 32 to these financial statements. Transactions with the related parties are given below.

	Note	2012 (Rupees)	2011 (Rupees)
Shifa Foundation: (Related party by virtue of common directorship)			
Revenue from services earned by the Company	31.1	25,952,341	26,092,973
Revenue from rent and utilities		29,310,661	25,782,319
Lab services received by the Company		10,447,427	18,369,444
Expenses paid by and reimbursed to the Company		7,470,000	8,430,000
Donation given by the Company		5,000,000	10,000,000
Tameer-e-Millat Foundation: (Related party by virtue of common directorship)			
Revenue from services earned by the Company	31.1	56,820	41,689
Revenue from rent and utilities		43,800	43,800
Other supplies provided to the Company		2,331,536	329,465
Other services provided to the Company	31.2	6,199,190	9,608,725
Donation given by the Company		10,000,000	10,000,000
SIHL Employees' Gratuity Fund			
Payments made by the Company during the year		29,046,713	17,738,675
Shifa Cooperative Housing Society Limited: (Related Party by virtue of common directorship)			
Payments made by the Company for acquisition of land		91,000,000	-

- 31.1 Revenue earned from related parties includes medical, surgical and clinical services rendered to referred inpatients and outpatients, sale of medicines and provision of cafeteria services.
- 31.2 Other services are received by the Company for training and development of prospective paramedics staff and employees' children education.

Notes to the Financial Statements

For the year ended June 30, 2012

32 REMUNERATION OF CHIEF EXECUTIVE, DIRECTORS AND EXECUTIVES

The aggregate amount charged in these financial statements in respect of remuneration and allowances, including all benefits, to chief executives, directors and executives of the Company are given below:

	Chief executives		Executive Directors		Non executive Directors		Executives	
	2012*	2011	2012	2011	2012	2011	2012	2011
	(Rupees)							
Managerial remuneration	19,252,521	16,007,865	7,914,431	12,278,404	8,840,595	-	63,866,745	33,594,548
Rent and utilities	6,775,929	6,103,871	2,950,381	2,760,000	3,254,767	-	22,271,433	14,563,235
Bonus and incentives	1,650,000	1,500,000	834,900	690,000	-	-	5,165,931	3,010,620
Gratuity	-	-	-	-	-	-	4,097,929	2,626,684
Medical insurance	87,252	53,332	87,252	106,664	87,252	-	1,510,434	972,066
Leave encashment	1,553,254	-	-	-	-	-	2,066,372	1,227,652
	29,318,956	23,665,068	11,786,964	15,835,068	12,182,614	-	98,978,844	55,994,805
Number of persons	2*	1	2	2	2	-	42	24

32.1 The chief executive is provided with a Company maintained car, while another director and twenty nine executives availed car facility.

* This includes remuneration of ex-chief executive of the Company.

33 CASH AND CASH EQUIVALENTS

	Note	2012 (Rupees)	2011 (Rupees)
Cash and bank balances	23	306,452,463	147,102,170
Short term borrowings	11	-	(153,045,416)
Other financial assets	21	-	10,161,095
		306,452,463	4,217,849

34 NON-CASH TRANSACTIONS

There was no addition to property, plant and equipment through finance lease during the year.

Notes to the Financial Statements

For the year ended June 30, 2012

35 FINANCIAL RISK MANAGEMENT

The Company has exposure to the following risks from its use of financial instruments:

- Credit risk
- Liquidity risk
- Market risk

This note presents information about the Company's exposure to each of the above risks, the Company's objectives, policies and processes for measuring and managing risk and the Company's management of capital. Further quantitative disclosures are included throughout these financial statements.

The Board of Directors has overall responsibility for the establishment and oversight of the Company's risk management framework and policies.

The Company's risk management policies are established to identify and analyse the risks faced by the Company, to set appropriate risk limits and controls and to monitor risks and adherence to limits. Risk management policies and systems are reviewed regularly to reflect changes in market conditions and the Company's activities. The Company through its training and management standards and procedures aims to develop a disciplined and constructive control environment in which all employees understand their roles and obligations.

The Audit Committee oversees how management monitors compliance with the Company's risk management policies and procedures and reviews the adequacy of the risk management framework in relation to the risks faced by the Company. The Audit Committee is assisted in its oversight role by the Internal Audit. Internal Audit undertakes both regular and ad hoc reviews of risk management controls and procedures, the results of which are reported to the Audit Committee.

35.1 Credit risk

Credit risk is the risk of financial loss to the Company if a customer or counterparty to a financial instrument fails to meet its contractual obligations. The Company manages credit risk in trade debts by limiting significant exposure to the customers not having good credit history. Furthermore, the Company has credit policy in place to ensure that services are rendered to customers with an appropriate credit history.

The Company is also exposed to credit risk from its operating and short term investing activities. The Company's credit risk exposures are categorised under the following headings:

35.1.1 Counterparties

The Company conducts transactions with the following major types of counterparties:

Trade debts

Trade debts are essentially due from government companies/ institutions, private companies (panel companies) and individuals to whom the Company is providing medical services.

Notes to the Financial Statements

For the year ended June 30, 2012

Normally the services are rendered to the panel companies are on agreed rates and limits from whom the Company does not expect any inability to meet their obligations. The Company manages credit risk in trade debts by limiting significant exposure to the customers not having good credit history. Furthermore, the Company has credit policy in place to ensure that services are rendered to customers with an appropriate credit history. Further, the Company holds collateral security from the panel companies to cover the credit risk.

The Company establishes an allowance for impairment that represents its estimate of incurred losses in respect of trade debts. This allowance is based on the management's assessment of a specific loss component that relates to individually significant exposures.

Cash and investments

The Company limits its exposure to credit risk by investing in liquid securities and maintaining bank accounts only with counterparties that have a credit rating of at least A3 and BBB. Given these credit ratings, management does not expect any counterparty to fail to meet its obligations.

35.1.2 Exposure to credit risk

The carrying amount of financial assets represents the maximum credit exposure. The maximum exposure to credit risk at the reporting date was:

	2012 (Rupees)	2011 (Rupees)
Long term deposits	18,679,196	6,680,324
Trade debts	341,159,290	284,262,865
Loans and advances	25,453,773	27,852,326
Trade deposits	2,560,000	2,070,000
Markup accrued	296,119	234,843
Other financial assets	-	10,161,095
Bank balances	295,724,713	141,397,257
	683,873,091	472,658,710

The maximum exposure to credit risk for trade debts at the reporting date by type of customer was:

	2012 (Rupees)	2011 (Rupees)
Government companies	111,413,105	120,737,854
Private companies	154,270,644	92,527,240
Individuals	47,324,438	18,690,189
Related parties	11,703,739	27,011,382
Others	16,447,364	25,296,200
	341,159,290	284,262,865

Notes to the Financial Statements

For the year ended June 30, 2012

35.1.3 Impairment losses

The aging of trade debts at the reporting date was:

	2012		2011	
	Gross debts (Rupees)	Impaired	Gross debts (Rupees)	Impaired
Not past due	123,676,811	-	54,037,901	-
1 - 4 months	151,620,040	-	176,652,712	-
5 - 7 months	15,920,892	796,045	25,414,196	1,270,710
8 - 12 months	55,073,698	5,681,235	29,404,301	1,575,667
13 - 18 months	21,142,700	19,797,571	41,408,287	39,808,155
19 - 23 months	7,774,324	7,774,324	9,309,768	9,309,768
	375,208,465	34,049,175	336,227,165	51,964,300

The movement in the allowance for impairment in respect of trade debts during the year was as follows:

	2012 (Rupees)	2011 (Rupees)
Balance at beginning of year	51,964,300	42,241,436
Provision made during the year	13,223,976	9,722,864
Less bad debts written off	31,139,101	-
Balance at end of year	34,049,175	51,964,300

The allowance account in respect of trade debts is used to record impairment losses unless the Company is satisfied that no recovery of the due amount is possible, at that point the amount considered irrecoverable is written off against the financial asset.

35.1.4 The Company believes that no impairment allowance is necessary in respect of loan and advances, accrued markup and deposits as the recovery of such amounts is possible.

35.2 Liquidity risk

Liquidity risk is the risk that the Company will not be able to meet its financial obligations as they fall due. The Company's approach to managing liquidity is to ensure, as far as possible, that it will always have sufficient liquidity to meet its liabilities when due, under both normal and stressed conditions, without incurring unacceptable losses or risking damage to the Company's reputation. For this purpose the Company has sufficient running finance facilities as mentioned in note 11 to the financial statements. Further liquidity position of the Company is monitored by the Board through budgets, cash flow projections and comparison with actual results.

Notes to the Financial Statements

For the year ended June 30, 2012

Following is the maturity analysis of financial liabilities:

	Carrying amount	Six months or less	Six to twelve months	One to two years	Two to five years	Above five years
(Rupees)						
2012						
Long term financing	1,476,687,845	127,257,103	131,344,863	380,070,681	836,226,952	1,788,246
Trade and other payables	806,668,986	806,668,986	-	-	-	-
Mark up accrued	41,096,466	41,096,466	-	-	-	-
	<u>2,324,453,297</u>	<u>975,022,555</u>	<u>131,344,863</u>	<u>380,070,681</u>	<u>836,226,952</u>	<u>1,788,246</u>
2011						
Long term financing	611,933,009	101,956,678	144,553,140	175,287,265	190,135,926	-
Liabilities against assets						
subject to finance lease	3,655,792	3,655,792	-	-	-	-
Short term borrowings	153,045,416	153,045,416	-	-	-	-
Trade and other payables	600,052,348	600,052,348	-	-	-	-
Mark up accrued	16,421,204	16,421,204	-	-	-	-
	<u>1,385,107,769</u>	<u>875,131,438</u>	<u>144,553,140</u>	<u>175,287,265</u>	<u>190,135,926</u>	<u>-</u>

35.3 Market risk

Market risk is the risk that changes in market prices, such as foreign exchange rates, markup rates and equity prices will affect the Company's income or the value of its holdings of financial instruments. The objective of market risk management is to manage and control market risk exposures within acceptable parameters, while optimizing the return on risk. The Company is exposed to currency and mark up rate risk.

35.3.1 Foreign currency risk

Exposure to foreign currency risk

Foreign currency risk arises mainly where receivables and payables exist due to transactions with foreign undertakings and cash in foreign currency bank account. The transactions and balances in foreign currency are very nominal therefore the Company's exposure to foreign currency risk is very minimal. The Company's exposure to foreign currency risk is as follows:

	2012 (Rupees)	2011 (Rupees)	2012 (US\$)	2011 (US\$)
Bank balances	229,077	151,437	2,427	1,761
The following significant exchange rates applied during the year:				
	Average rate 2012	Average rate 2011	Closing rate 2012	Closing rate 2011
US \$ 1	89.7	85.80	94.4	86.01

Notes to the Financial Statements

For the year ended June 30, 2012

Foreign currency sensitivity analysis

A 10 percent variation of the PKR against the US \$ at June 30 would have effected equity and profit or loss by the amounts shown below. This analysis assumes that all other variables, in particular markup rates, remain constant.

	Change in Foreign Exchange Rates %	Effect on Profit	Effect on Equity
			(Rupees)
2012			
US \$ 1	+10%	22,908	22,908
	-10%	(22,908)	(22,908)
2011			
US \$ 1	+10%	15,144	15,144
	-10%	(15,144)	(15,144)

35.3.2 Markup rate risk

The markup rate risk is the risk that the fair value or future cash flow of a financial instrument will fluctuate due to changes in the market markup rates. Sensitivity to markup rate risk arises from mismatches of financial assets and liabilities that mature in a given period. The Company's exposure to the risk of changes in market markup rates relates primarily to Company's long term debt obligations with floating markup rates.

The Company analyse its markup rate exposure on a dynamic basis. Various scenarios are simulated taking into consideration refinancing, renewal of existing positions, alternative financing. Based on these scenarios, the Company calculates the impact on profit and loss of a defined markup rate shift. For each simulation, the same markup rate shift is used for all currencies. The scenarios are run only for liabilities that represent the major markup-bearing positions.

The Company adopts a policy to ensure that markup rate risk is minimized by investing its surplus funds in fixed rate investments like TDRs.

Profile

At the reporting date the markup rate profile of the Company's markup-bearing financial instruments was:

Notes to the Financial Statements

For the year ended June 30, 2012

	2012 (Rupees)	2011 (Rupees)
Financial assets		
Other financial assets	-	10,161,095
Bank balances	262,813,119	93,380,953
	262,813,119	103,542,048
Financial liabilities		
Long term financing	1,476,687,845	611,933,009
Liabilities against assets subject to finance lease	-	3,655,792
Short term borrowings	-	153,045,416
	1,476,687,845	768,634,217
	(1,213,874,726)	(665,092,169)

The effective markup rates for the financial assets and liabilities are mentioned in respective notes to the financial statements.

Markup rate sensitivity analysis

If markup rates had been 50 basis points higher / lower and all other variables were held constant, the Company's profit for the year ended June 30, 2012 would decrease / increase by Rs. 5,305,297 (2011: decrease / increase by Rs. 4,004,862). This is mainly attributable to the Company's exposure to markup rates on its variable rate borrowings.

35.4 Fair value of financial instruments

Fair value is the amount for which an asset could be exchanged, or a liability settled, between knowledgeable willing parties in an arms length transaction. The carrying values of all financial assets and liabilities reflected in the financial statements approximate their fair values except investment held to maturity which are carried at amortized cost.

The fair value hierarchy has not been presented in these financial statements, as the Company does not hold any such financial instruments in their portfolio.

35.5 Capital management

The Company's objectives when managing capital are to safeguard the Company's ability to continue as a going concern so that it can continue to provide returns for shareholders and benefits for other stakeholders and to maintain a strong capital base to support the sustained development of its business. In order to maintain or adjust the capital structure, the Company may adjust the amount of dividend to ordinary shareholders. There were no changes to the Company's approach to capital management during the year and the Company is not subject to externally imposed capital requirements.

Notes to the Financial Statements

For the year ended June 30, 2012

35.5.1 Debt-to-adjusted capital ratio

The Company monitors capital on the basis of the debt-to-adjusted capital ratio. This ratio is calculated as net debt divided by adjusted capital. Net debt is calculated as total debt (as shown in the balance sheet) less cash and cash equivalents. Adjusted capital comprises all components of equity (i.e. share capital, share premium, and unappropriated profit) and includes some forms of subordinated debt. The debt-to-adjusted capital ratios as at June 30 were as follows:

	Note	2012 (Rupees)	2011 (Rupees)
Total debt	35.3.2	1,476,687,845	768,634,217
Less: Cash and cash equivalents	35.5.2	306,452,463	157,263,265
Net debt		1,170,235,382	611,370,952
Total equity		1,287,269,715	1,095,066,628
Adjusted capital		2,457,505,097	1,706,437,580
Debt-to-adjusted capital ratio		0.48	0.36

The increase in the debt-to-adjusted capital ratio during the current year resulted primarily from the increase in long term financing.

35.5.2 This represents cash and cash equivalents excluding short term borrowings.

36 FIGURES

Corresponding figures, wherever necessary, have been rearranged and reclassified for the purposes of comparison. However, these are not considered material enough to be disclosed separately.

Figures have been rounded off to the nearest Pak Rupee unless otherwise stated.

37 EVENTS AFTER BALANCE SHEET DATE

The Board of Directors in their meeting held on September 14, 2012 have proposed a final dividend of Rs. 1.5 per share.

38 DATE OF AUTHORIZATION FOR ISSUE

These financial statements have been authorized for issue by the Board of Directors of the Company on September 14, 2012.


Chairman


Chief Executive


Chief Financial Officer

Pattern of Shareholding

As at June 30, 2012

Number of Shareholders	Size of holding of shares		Total shares held
	From	To	
61	1	100	2,211
1,348	101	500	665,169
264	501	1,000	254,724
239	1,001	5,000	564,557
75	5,001	10,000	646,088
46	10,001	15,000	546,339
37	15,001	20,000	681,442
17	20,001	25,000	380,043
18	25,001	30,000	509,892
10	30,001	35,000	319,215
9	35,001	40,000	352,806
5	40,001	45,000	215,797
8	45,001	50,000	385,293
6	50,001	55,000	312,207
4	55,001	60,000	236,510
1	60,001	65,000	60,750
2	70,001	75,000	144,772
4	75,001	80,000	316,570
3	80,001	85,000	247,510
3	85,001	90,000	264,970
10	95,001	100,000	1,000,000
4	100,001	105,000	404,472
1	105,001	110,000	107,012
1	110,001	115,000	113,600
1	115,001	120,000	115,210
4	120,001	125,000	494,475
2	125,001	130,000	252,825
2	130,001	135,000	266,890
4	135,001	140,000	548,562
1	140,001	145,000	142,630
1	145,001	150,000	149,300
1	150,001	155,000	152,230
2	155,001	160,000	315,930
1	160,001	165,000	161,040
1	170,001	175,000	170,300
1	175,001	180,000	177,000
1	200,001	205,000	204,925
2	205,001	210,000	416,325
1	215,001	220,000	219,755
1	225,001	230,000	227,700
2	230,001	235,000	469,911
1	235,001	240,000	238,110
1	240,001	245,000	243,840
1	265,001	270,000	266,560
1	275,001	280,000	279,799
2	285,001	290,000	571,027
5	300,001	305,000	1,511,932

Number of Shareholders	Size of holding of shares		Total shares held
	From	To	
1	305,001	310,000	306,800
1	310,001	315,000	310,500
2	320,001	325,000	643,710
1	335,001	340,000	335,810
2	345,001	350,000	697,260
1	350,001	355,000	354,370
1	390,001	395,000	392,000
1	415,001	420,000	415,304
1	430,001	435,000	433,400
1	440,001	445,000	442,900
1	450,001	455,000	452,850
1	455,001	460,000	459,320
1	475,001	480,000	476,000
2	495,001	500,000	1,000,000
1	510,001	515,000	510,281
2	515,001	520,000	1,030,937
1	545,001	550,000	550,000
2	555,001	560,000	1,113,448
1	775,001	780,000	777,961
1	795,001	800,000	800,000
1	950,001	955,000	953,961
1	1,235,001	1,240,000	1,239,000
1	1,245,001	1,250,000	1,250,000
1	1,360,001	1,365,000	1,363,250
1	1,510,001	1,515,000	1,511,947
1	1,635,001	1,640,000	1,637,832
1	1,885,001	1,890,000	1,885,205
1	2,185,001	2,190,000	2,185,091
1	2,220,001	2,225,000	2,223,837
1	3,455,001	3,460,000	3,457,343
1	4,975,001	4,980,000	4,975,258
2,251			50,513,800

Categories of shareholders	Number	Shares held	Percentage
INDIVIDUAL	2,228	41,713,018	82.577
FINANCIAL INSTITUTION	2	25,500	0.050
JOINT STOCK COMPANY	12	174,239	0.345
OTHERS	9	8,601,043	17.027
Total	2,251	50,513,800	100.000

Disclosure in connection with the Pattern of Shareholding as required by the Code

Categories of shareholders	Number	Shares held	Percentage
Director, Chief Executive Officer, and their spouse and minor children *	11	9,933,771	19.665
Associated Companies, Undertakings and related parties **	02	8,255,543	16.343
Banks, Development Financial Institutions, Non Banking Financial Institutions	02	25,500	0.050
Shareholders holding 5 % or more voting interest ***	02	11,256,547	22.284
Joint Stock Companies	12	174,239	0.345
Executives	11	67,900	0.134
* No. of Shares held by Directors, CEO and their spouses			
Dr. Manzoor H. Qazi		954,961	1.890
Dr. Habib-Ur-Rehman		442,900	0.877
Mrs. Shahida Rehman W/o			
Dr. Habib-Ur-Rehman		12,150	0.024
Mr. Muhammad Zahid		400,072	0.792
Dr. Abdul Razaq		533,400	1.056
Dr. Mohammad Salim Khan		200,204	0.396
Dr. Saeed A. Bajwa		303,380	0.601
Mr. Shafquat Ali Chaudhary		1,637,832	3.242
Shah Naveed Saeed		12,530	0.025
Mr. Qasim Farooq Ahmad		1,878,890	3.720
Dr. Samea Kauser Ahmad		3,557,452	7.043
** Shares held by related parties			
Shifa Foundation		556,448	1.102
Tameer-e-Millat Foundation		7,699,095	15.242
*** Shareholders with 5 % or more voting interest			
Dr. Samea Kauser Ahmad		3,557,452	7.043
Tameer-e-Millat Foundation		7,699,095	15.242

FORM OF PROXY

26th Annual General Meeting
Shifa International Hospitals Ltd

I/We _____
of _____
being a member of Shifa International Hospitals Ltd. (Folio No./CDC A/c No. _____
No. of Shares _____) hereby appoint _____
of _____ Folio No./CDC A/c No. (_____)
or failing him/her _____
of _____ Folio No./CDC A/c No. _____

who is a member of the Company as my/our proxy in my/our absence to attend and vote for me/us and on my/our behalf at the 26th Annual General Meeting of the Company to be held at 1100 hours on Saturday, October 20, 2012, and at any adjournment thereof.

As witness my hand this _____ day of _____ 2012

Signed by the said _____

**Revenue
Stamp**

(Signature must agree with the
SPECIMEN signature
registered with the Company)

Witnesses:

1. Signature _____	2. Signature _____
Name _____	Name _____
Address _____	Address _____
_____	_____
CNIC/Passport No. _____	CNIC/Passport No. _____

Important:

1. This form of Proxy, duly completed, signed and stamped must be deposited at the Company's Registered Office, Sector H-8/4 Islamabad, not less than 48 hours before the time of holding the meeting.
2. If a member appoints more than one proxy and more than one instruments of proxy are deposited by a member with the Company, all such instruments of proxy shall be rendered invalid.
3. CDC account holder, sub account holder/shareholder may appoint proxy and the proxy must produce attested copy of his/her CNIC or original passport at the time of attending the meeting.

AFFIX
CORRECT
POSTAGE

The Company Secretary
Shifa International Hospitals Limited
Sector H-8/4, Islamabad,
Pakistan.



Shifa
International
Hospitals Ltd.

H-8/4, Islamabad, Pakistan.