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✉ psgmedipulse@psgimsr.ac.in

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**Rescuing
a 15-Year old
From
End - Stage
Liver Disease**

RESTORING A CHILD'S COMFORT AND CONFIDENCE : A Pediatric Surgical Success at PSG Hospitals



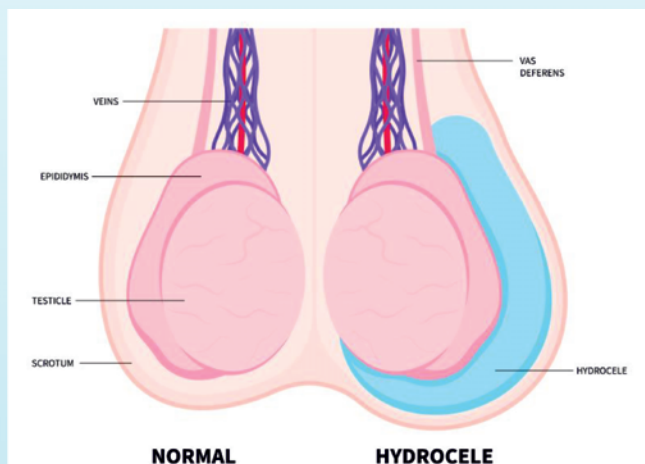
Dr. AHAMED KABEER

Department of
Paediatric Surgery

A Silent Condition, A Growing Concern:

A child's well-being is one of the most sensitive and urgent concerns for any parent. When a 9-year-old boy was brought to PSG Hospitals with a left-sided scrotal swelling, his parents were understandably anxious. The swelling had been growing gradually over the course of a month, and although it was painless, the visual change was unmistakable and alarming for the family.

Upon examination by our expert pediatric surgical team, the condition was diagnosed as a Left Hydrocele - a fluid-filled sac surrounding the testicle caused by the persistence of a fetal connection known as the patent processus vaginalis (PPV). This



condition, while commonly observed in pediatric patients, requires timely intervention to avoid further complications such as discomfort / pain, herniation.

What followed was a testament to PSG Hospitals' commitment to pediatric excellence, compassionate care, and surgical precision.

Where Expertise Meets Reassurance:

Pediatric Surgical Care at PSG

The child was immediately evaluated by the Department of Pediatric Surgery, where his condition and the treatment plan were explained clearly to the parents. At PSG Hospitals, we believe that healing begins not only with diagnosis but with educating and reassuring families.

The parents were walked through the steps of the procedure, the safety of general anesthesia in children, the expected post-operative recovery, and long-term prognosis. This transparent communication, combined with our reputation for safety, gave the family the confidence they needed to move forward.

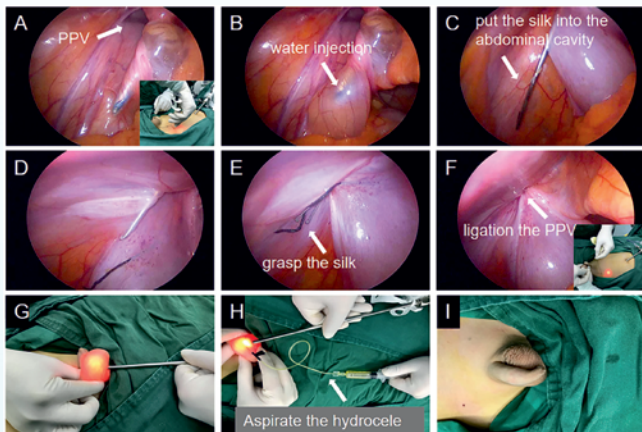
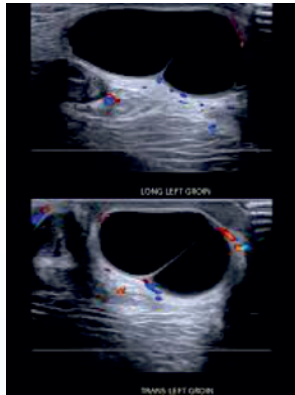
The procedure was scheduled as a day - care surgery, minimizing the child's hospital stay and ensuring a faster return to normalcy - a critical aspect in pediatric care where both the patient and parents benefit from quick, safe, and effective resolution.

Surgical Precision: A Swift and Safe Intervention

On the morning of June 16, 2025, the child was admitted to the General Day Care Ward and prepped for surgery. The operating team conducted a Left PPV Sac Ligation and Hydrocele Sac Excision under general anesthesia - a delicate procedure, requiring precision around sensitive anatomical structures

Thanks to the surgical team's expertise and modern infrastructure, the procedure was:

- Carried out with meticulous care to preserve testicular health
- Completed successfully without complications
- Pain-free, with minimal post-operative discomfort



The child recovered smoothly in the post-operative unit, was able to resume food within hours, and showed no signs of distress or surgical complications.

A Return to Childhood: Smooth Recovery and Happy Discharge

By the evening of the same day, the young patient was discharged in a stable condition. His pain was well-managed with a single dose of oral paracetamol, and the post-operative instructions were kept simple yet effective:

- Allow dressing to fall off naturally
- Use scrotal support for comfort
- Avoid strenuous activity for a few days
- Resume normal diet and activities gradually

A follow-up was scheduled after one week later, with the assurance that PSG's team would be available for any emergency concerns, 24/7 - a reassurance every parent deeply values.

The child returned home the same day, active and cheerful, a stark contrast to the anxiety he and his parents walked in with. This rapid turnaround exemplifies PSG Hospitals' commitment to day-care excellence, especially in pediatric surgery.

Why PSG Hospitals is a Trusted Name in Pediatric Surgery

This case is a shining example of what happens when clinical excellence, child - focused infrastructure, and compassionate care come together. At PSG Hospitals, we don't just perform procedures - we help children get back to normal.

Our pediatric surgery team is known for:

- Minimally invasive approaches that reduce scarring and pain
- Day-care surgeries that minimize hospital stay and cost
- Child - friendly wards and nursing to keep anxiety low
- Expert anesthesiology and pain management tailored for young patients
- Parental counseling and emotional support throughout the process

From the operating room to post-discharge care, every step is designed to create a safe, comfortable, and healing environment for the child and the family.



VICTORY OVER COMPLEXITY: A Life-Saving Pediatric Liver Transplant at PSG Hospitals



Dr. KIRUBAKARAN K R

Department of Hepato - Pancreato -
Biliary Surgery & Liver Transplant

At PSG Hospitals, Coimbatore, one such case became a true demonstration of our multidisciplinary strength and commitment to saving lives - when a critically ill 15-year-old child with end-stage liver disease was brought back from the brink through a highly complex living donor liver transplant.

The Background: A Silent Battle

The patient, a teenage boy, had been diagnosed with Progressive Familial Intrahepatic Cholestasis Type 3 (PFIC-3) at the age of six - a rare genetic liver disorder marked by defective bile flow, chronic inflammation, and progressive cirrhosis. Over the years, he also developed portal hypertension and hepatopulmonary syndrome, both of which compounded his clinical complexity and made routine management increasingly difficult.

Despite long-term supportive care and expert monitoring, his liver function declined rapidly by early 2025. All clinical evaluations pointed to the same conclusion - a liver transplant was no longer an option, but a necessity. A suitable living donor was identified within his family, and the PSG Liver Transplant Team began detailed preoperative planning, leveraging cutting-edge imaging, lab markers and interdepartmental input.

The Surgery: Precision and Poise

On May 17, 2025, the transplant was executed by our senior transplant surgeons Dr. K. R. Kirubakaran and Dr. B. Joseph John. The surgery presented significant anatomical and vascular challenges due to advanced cirrhosis. However, the team demonstrated unmatched technical expertise - the cirrhotic liver was explanted with very minimal blood loss, followed by graft placement and vascular and biliary connections made with utmost precision.

The graft showed immediate viability with good Doppler flow, and the child was shifted to the Medical ICU for post-operative monitoring. He was maintained on inotropes, a ventilator, and immunosuppressants initiated per protocol.

By Post - Operative Day (POD) 1, he was weaned off the ventilator and had begun tolerating oral fluids. Liver function parameters were encouraging, and the initial recovery appeared to be on track.

Surgical Precision: A Swift and Safe Intervention

However, on POD 4, the clinical course took a dramatic turn. The patient developed severe headache and hypertension. Neurology consultation and imaging raised suspicion for Posterior Reversible Encephalopathy Syndrome (PRES) - a rare complication of tacrolimus toxicity, commonly used for immunosuppression. Tacrolimus was immediately stopped, and supportive therapy was initiated.

Soon after, he experienced multiple generalized tonic - clonic seizures (GTCS), requiring urgent readmission to the ICU. Over the next 48 hours, he had two more seizure episodes. A full neurology workup including MRI brain and EEG was performed. Imaging ruled out structural brain lesions, and the seizures were successfully controlled with antiepileptics, fluid correction and strict BP management.

Tacrolimus was permanently discontinued, and an adjusted immunosuppressive protocol involving cyclosporine was initiated, closely monitored for side effects.

The Second Crisis: Sepsis and Septic Shock

Just as he stabilized neurologically, a new and dangerous complication developed. On POD 10, the child became febrile, tachycardic and hypotensive, rapidly descending into septic shock. Bloodwork revealed elevated WBC counts, high procalcitonin, worsening liver enzymes, and thrombocytopenia.

An urgent sepsis protocol was activated. He was placed on inotropes, high-end antibiotics and antifungals. A sepsis panel came back low-positive for both bacterial and fungal markers and Amphotericin B was initiated under close monitoring.

Comprehensive imaging - including liver Doppler, HRCT chest, CECT abdomen, and ECHO - was performed to rule out vascular thrombosis or surgical complications. All studies confirmed that the graft remained healthy and vascularly intact.

Over the next 72 hours, the child's condition slowly began to improve. Inflammatory markers decreased, blood pressure normalized, and inotropes were tapered. His liver enzymes also began returning to normal.

Recovery and Rehabilitation: A Cautious Climb

By POD 14, he was clinically stable and shifted back to the general ward. Supportive care continued with diuretics for ascites, albumin infusions and beta-blockers for portal hypertension. Physiotherapy began early to aid in mobilization, and nutritional support was customized to promote healing.

A brief immunologic reaction to cyclosporine caused mild headaches and vomiting, which were promptly managed. The immunosuppressive regimen was modified once again by introducing everolimus at a low dose, achieving a balance between efficacy and tolerability.

Over the course of his hospital stay, the child

received 18+ medications, including antibiotics, antifungals, immunosuppressants, anticonvulsants, anticoagulants, antihypertensives, and nutritional supplements. Real-time lab monitoring allowed fine-tuning of all treatments.

By June 9, 2025, after nearly a month of intensive medical care and multiple crises, he was discharged in a clinically stable condition. Although minor fluid retention and edema persisted, he was alert, ambulatory, eating well and ready for home-based recovery under close follow-up.

Conclusion: A Story of Skill, Science, and Human Spirit

This case is more than a complex liver transplant - it is a multi-system survival story. From PRES to septic shock, from seizure management to fluid optimization, every step demanded clinical insight, quick judgment and teamwork.

Such high-risk cases are only possible in institutions with advanced infrastructure, trained specialists, 24x7 monitoring and a culture of excellence.

At PSG Hospitals, we are proud to lead in transplant care - not just in technology or numbers, but in patient outcomes that speak volumes. This case serves as a powerful reminder of what's possible when medical expertise, human empathy and unwavering dedication converge.

A young life wasn't just saved - it was renewed.




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82203 33747

WHEN EVERY ORGAN FAILS, EXPERTISE PREVAILS: A Story of Survival at PSG Hospitals.



Dr. A. MURALI

Department of
General Medicine

At times, a patient arrives not with a single illness but with a storm of life-threatening complications. In such cases, survival depends not only on medicine but also on timely decisions, multidisciplinary teamwork, and clinical mastery.

This is the extraordinary story of a critically ill 66-year-old woman who entered PSG Hospitals in a near-unconscious state - and how a team of experts worked tirelessly to bring her back from the brink.

A Rapid Spiral Into Crisis:

It began with what seemed like a simple bout of loose stools and fatigue. Within days, her condition worsened. When she reached PSG Hospitals, she was drowsy, gasping and in septic shock. Her blood pressure had plummeted, her kidneys had stopped functioning effectively and she was barely responsive.

She was rushed to the Medical Intensive Care Unit (MICU) and immediately placed on mechanical ventilation. Her vital signs were unstable, her oxygen levels dropping and her blood pH indicated severe metabolic acidosis.

The initial diagnosis pointed to septic shock with multiorgan dysfunction - but that was just the beginning.

The List of Diagnoses Grows...

Over the next few days, a series of investigations revealed multiple overlapping, life-threatening complications:

- Severe biliary infection (gangrenous cholecystitis)
- Perforated gallbladder with intra-abdominal collection
- Acute - on - chronic kidney disease
- Stress - induced cardiomyopathy
- Ventilator - associated complications
- Critical illness neuropathy
- Pressure sores and ongoing metabolic derangements

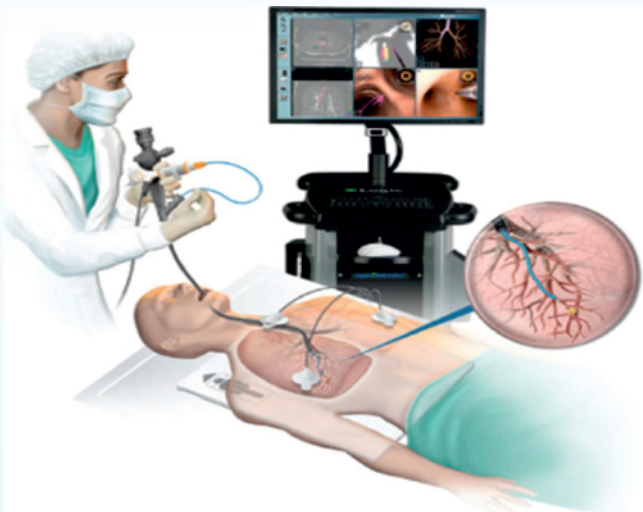
Each of these was serious. Together, they created a life-threatening spiral few patients recover from. But the team at PSG Hospitals was prepared.

Multispecialty Action, Round the Clock:

In the face of such complexity, coordinated care was essential. PSG's clinical teams worked around the clock:

- Interventional radiologists performed an emergency bedside gallbladder drainage to control the sepsis source.
- Gastroenterologists carried out a complex endoscopic procedure to remove gallstones and improve biliary drainage.
- Surgical gastroenterologists performed an emergency laparoscopic cholecystectomy — a risky but necessary step to remove the infected organ entirely.
- Nephrologists initiated Continuous Renal Replacement Therapy (CRRT) due to her unstable vitals and rising toxins.

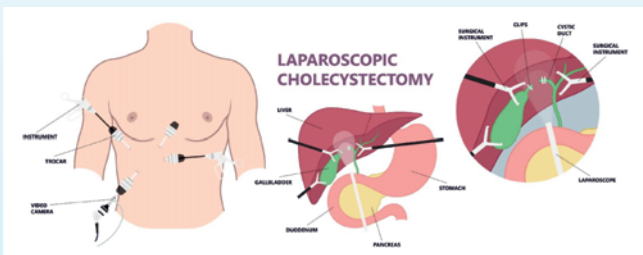
- Pulmonologists and ENT specialists coordinated a tracheostomy for long-term airway support and addressed airway bleeding with bronchoscopy.
- Neurologists diagnosed critical illness polyneuropathy, explaining her profound muscle weakness and difficulty weaning from the ventilator.



Every department came together, driven by one goal: saving a life.

A Complicated Journey With Small Victories:

The road to recovery was not linear. There were setbacks: fluctuating kidney function, ventilator



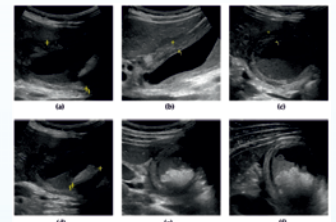
dependency, pressure sores and persistent infections. But there were victories too - stabilized vitals, improving kidney parameters, reduction in oxygen demand and gradual neurological improvement.

Every clinical decision was evidence-based, every procedure meticulously timed. PSG Hospitals' intensive care team monitored her minute by minute, day after day, constantly reassessing and adjusting care.

Stabilization and Next Steps:

By the third week, the patient had begun to stabilize. Though still on ventilator support, she was now hemodynamically stable, responsive to care, and showing signs of systemic recovery. Her infection markers began to decline, her heart function improved, and organ functions began to normalize slowly.

Her family, though overwhelmed by the prolonged ICU stay, expressed gratitude for the compassion, transparency, and relentless effort shown by the PSG team.



At their request, she was discharged on ventilatory support for continued care elsewhere. But she was no longer critical. She was alive - and recovering.

Why This Case Matters:

This was not a single disease story. It was a cascade of medical complications:

- Septic shock
- Multi-organ dysfunction
- Complex biliary pathology
- Respiratory and cardiac distress
- Neuromuscular impairment

Yet, in the face of all this, PSG Hospitals stood as a symbol of clinical excellence, teamwork, and never giving up.

Conclusion: PSG Hospitals - Where Complexity Meets Capability

This case is a powerful reminder of what PSG Hospitals stands for — not just treating disease, but preserving life even when the odds are steep. It showcases:

- Advanced critical care and ICU capabilities
- Real-time interdepartmental coordination
- Precision interventions in interventional radiology and endoscopy
- Compassionate, family-centered care throughout

Because at PSG Hospitals, we don't just care for patients - we fight for every life.

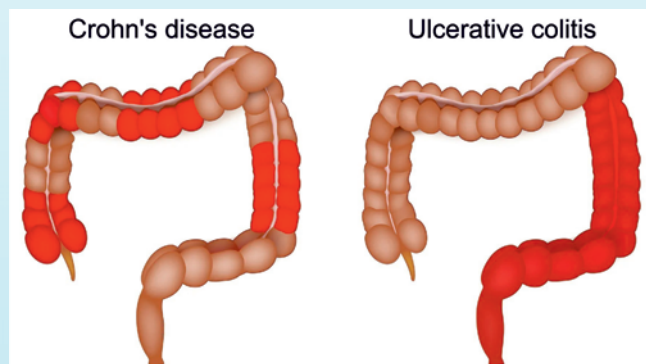
FROM YEARS OF UNCERTAINTY TO ANSWERS: PSG Hospitals Solves a 7-Year Diagnostic Mystery



At PSG Hospitals, clinical precision meets patient empathy — a combination that has the power to change lives. One recent case stands as a powerful reminder of how world-class diagnostics, interdisciplinary collaboration, and patient-centric care can transform years of suffering into renewed hope.

A Long Medical Struggle:

A 39-year-old woman had been living with an unresolved and troubling health issue for over seven years. Recurrent episodes of abdominal pain - unpredictable in timing but consistent in intensity - had gradually disrupted her quality of life. These episodes, occurring every few months and lasting several days, had no identifiable triggers or relieving factors. She reported no associated symptoms such



as nausea, vomiting, fever, jaundice, or bowel disturbances, which made the diagnosis even more elusive.

Adding to the complexity, she had a history of psoriasis and had previously undergone laparoscopic surgery for pelvic fluid collection - medical events that often add diagnostic confusion.

Over the years, she had consulted various specialists across different centers. Multiple investigations, including blood tests, ultrasounds, and CT scans, failed to provide a conclusive explanation. As her symptoms continued unabated, so did the mystery surrounding her condition.

Unraveling the Case at PSG Hospitals:

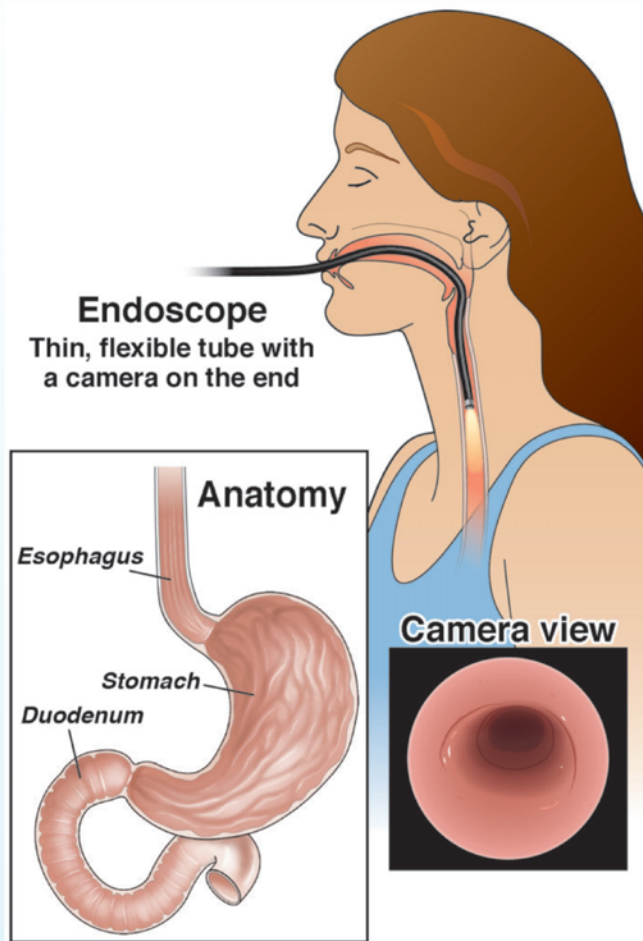
Upon her admission to PSG Hospitals, the clinical team approached the case with a fresh, structured and holistic lens. An initial evaluation was carried out to rule out systemic causes, signs of infection, inflammation, or hidden fluid accumulations. What followed was a carefully planned diagnostic roadmap involving the hospital's interdisciplinary team of gastroenterologists, radiologists, pathologists, and surgical experts.

Although earlier investigations had indicated the presence of ascitic fluid and intestinal wall thickening, PSG's expert radiologists found no significant fluid collection during ultrasonography. However, inter - bowel free fluid was identified - a subtle but significant clue that redirected the team's focus.

To delve deeper, bidirectional endoscopy was performed:

- Upper GI endoscopy revealed superficial ulcers and erosions, pointing to chronic mucosal irritation.
- Colonoscopy, extended up to the terminal ileum, uncovered nodular erosions - a pattern often associated with inflammatory bowel conditions.

Biopsy samples were taken and sent for detailed tissue pathology and molecular analysis, aiming to differentiate between infectious causes like abdominal tuberculosis and chronic inflammatory conditions such as Crohn's disease.



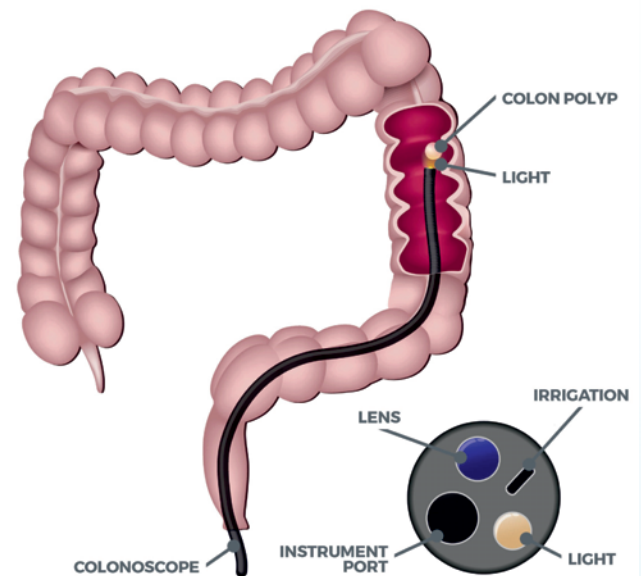
Simultaneously, to rule out unrelated but serious possibilities like ovarian malignancy, the team carried out tumor marker evaluations and targeted imaging - ensuring a comprehensive and conclusive workup.

Avoiding Overdiagnosis and Overtreatment:

What truly set PSG Hospitals apart in this case was the clinical restraint exercised by the team. At no point was the patient rushed into unnecessary surgical interventions or subjected to over-treatment. The entire process was evidence-based and ethically driven, with each step backed by data and diagnostic clarity.

This measured approach ensured not only the patient's safety but also peace of mind for her family

COLONOSCOPE



- knowing her condition was being handled with expertise and integrity.

Outcome and Continued Guidance:

Within a few days of hospitalization and with appropriate supportive care, the patient began to experience substantial relief from her symptoms. She was discharged in a stable condition, with plans for regular follow-up once biopsy and pathology results were finalized.

Though her medical journey is still ongoing, she now moves forward with greater clarity, confidence and clinical direction, supported by one of the most capable multidisciplinary teams in the region.



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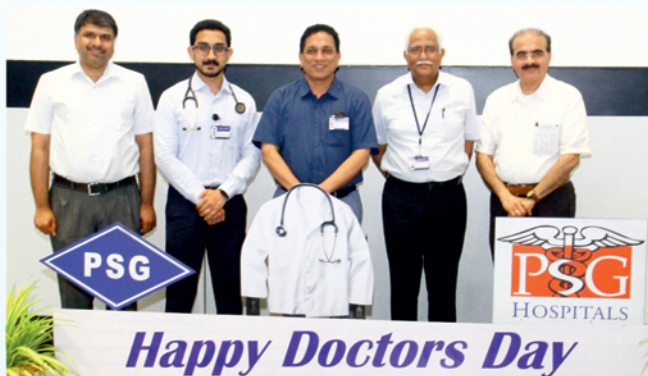
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PSG HOSPITALS CELEBRATES DOCTORS' DAY 2025 WITH HONOUR, Gratitude and Community Engagement

Coimbatore, July 1, 2025:

PSG Hospitals celebrated National Doctors' Day 2025 with great reverence and joy, honouring the unwavering dedication, compassion, and healing hands of its medical professionals. Held at the "B" Block Auditorium, the celebration was a heartfelt tribute to doctors who stand at the forefront of patient care and community well-being.



The program began with a soulful prayer song by Dr. Janani, Pediatrician, followed by the traditional lamp lighting ceremony, signifying knowledge and selfless service. Dr. M.D Varunn, Medical Superintendent – SSH, delivered the welcome address and also spoke on the theme of the day, reflecting on the evolving role of doctors in today's fast-paced healthcare environment.



A touching patient testimonial was presented as a "Token of Gratitude" from the community, showcasing the profound impact doctors have on patients' lives. This was followed by a moving video presentation titled "A Tribute to Our Healers" which captured real-life stories and the silent sacrifices of doctors at PSG.

The event also featured felicitations by:

- Dr. T. M. Subba Rao, Principal, PSG IMSR
- Dr. J. S. Bhuvaneshwaran, Director, PSG SSH
- Dr. T. Balaji, Director, PSG Institute of Oncology



They applauded the dedication of the medical staff and emphasized the hospital's mission to uphold excellence in care. Senior doctors shared inspiring anecdotes during the acceptance speech, recalling their journey in medicine and the values that continue to guide them.

The event concluded with a Vote of Thanks by Dr. K. S. Rajkumar, Medical Superintendent, PSG Institute of Oncology, followed by refreshments and warm interactions among attendees.



In a special gesture that added meaning to the celebration, students from National Model School, Coimbatore visited PSG Hospitals earlier in the day to express their appreciation. The students greeted doctors with flowers and bouquets, personally extending their heartfelt wishes to Dr. J.S. Bhuvaneshwaran and Dr. T. Balaji, in recognition of their vital contributions to society.

This thoughtful initiative brought smiles and encouragement to the doctors and staff and was praised by PSG Hospitals' management for fostering respect and awareness among the younger generation.

Together, the day stood as a meaningful reminder of the compassion, commitment, and connection that define the medical profession and its impact on society.

TURNING THE TIDE: How PSG Hospitals Restored Hope in a Diabetic Vascular Crisis



Dr. ELANGO S
Department of
Interventional Radiology

When every step becomes painful and every wound refuses to heal, hope begins to fade. For 65-year old Patient, a retired worker from a small town in Tamil Nadu, this was no longer a fear - it was his reality. But at PSG Hospitals, where cutting-edge medicine meets compassionate care, even the most challenging cases find a new direction. This is the story of how a limb-threatening condition was reversed - not with guesswork or general treatment - but with precision-guided, interventional excellence.

A Battle Beneath the Skin :

He arrived at PSG Hospitals with a deeply concerning condition: persistent pain in the right leg, coupled with a non-healing ulcer on the foot that had lingered for over a month. This was not his first encounter with health issues - he had been living with type 2 diabetes, high blood pressure, and heart disease, each managed in isolation elsewhere. But this time, things were different. This time, something was seriously wrong.

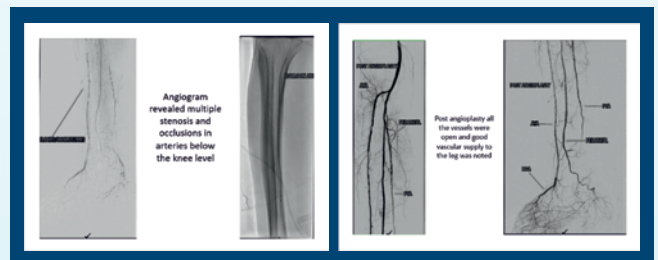
Doppler evaluations revealed that blood flow to the lower portion of his leg was dangerously compromised. What began as mild foot pain had escalated into a scenario where limb viability was at stake. For diabetic patients, compromised

circulation - often caused by peripheral vascular disease - can rapidly progress into infections, gangrene, and in many cases, leads to crippling amputations.

That's when he approached Department of Interventional Radiology at psg hospitals

A Path Paved with Precision: The Angioplasty Decision

Led by Dr. Elango S, a highly skilled interventional radiologist, the team at PSG embarked on a methodical exploration of the vascular architecture. Angiogram revealed that the full anterior tibial, peroneal, and posterior tibial arteries were occluded at multiple points. The condition had silently narrowed several vital vessels over time, depriving the foot of oxygenated blood and slowing its natural healing process. In simpler terms:



the limb was slowly losing its lifeline. After rigorous risk assessment and patient fitness evaluation, the team planned a complex peripheral angioplasty - a minimally invasive procedure performed through small punctures, allowing for precise dilation of narrowed arteries using specialized balloons.

Using an innovative dual-access technique - through both the left thigh and right ankle - the team navigated the tight and tortuous arterial path. Carefully, they worked through each lesion, gently restoring blood flow using fine-tipped wires and balloons angioplasty. A post-procedure angiogram confirmed the success: all the arteries to foot were now open, pulses restored, and most importantly, blood had returned to the foot.

Restoration Without Amputation: A Victory in Vascular Care

The days following the procedure were critical. The team monitored him closely, ensuring his vitals remained stable and there were no signs of complications. The once faint pulses in his foot were now clearly palpable, and the leg, which once seemed like a candidate for surgical removal, was healing naturally.

The ulcer, once stagnant, began to show signs of healthy tissue development and became red instead of dull white suggesting vascularity. The pain that once kept him from walking subsided. What had once been a slow-moving, life-altering vascular disaster was now reversed with a few expertly placed catheters and an abundance of skill.

He was discharged in stable condition, walking out of the hospital with both his limbs - and a renewed trust in the power of modern medicine.

A Hospital That Does More Than Heal:

What makes this case particularly remarkable is not just the outcome - but the system that delivered it. PSG Hospitals brings together:

- Specialized expertise in interventional radiology, a fast-evolving field that uses image-guided, non-surgical procedures to treat complex conditions.
- Team-based care, involving surgical specialist including vascular & wound care surgeons, cardiologists, diabetologists, and nursing staff working seamlessly across departments.
- Advanced diagnostic imaging and bi-plane cath labs, enabling interventions with unmatched accuracy.

- A preventive mindset, focused not only on saving the limb but on preserving the patient's long-term independence and quality of life.

This case reflects PSG Hospitals' broader mission: to provide world-class, minimally invasive solutions that change lives without the trauma of open surgeries.

Conclusion: When Experience Meets Technology, Lives are Transformed

This story is more than just a medical case. It is a reminder that even in the most complicated scenarios - when diseases intersect and options appear limited - PSG Hospitals stands ready with answers. Through timely intervention, personalized planning, and the quiet confidence of a well-trained team, we don't just treat patients. We restore possibilities.

At PSG Hospitals,

Every vessel matters. Every limb matters.

Every life matters. Limb is Life.

To contact Interventional radiology

Mr. VIJIN : +91-75987 18283

Mrs. MISPHA : +91-94864 38849



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