

# SIH'HEE UDHARES

AEH NEWSLETTER | MONTHLY EDITION

AEH Anniversary

## HEAD INJURY

Lets protect our brain

## Dispatch from the ICU

The Pulse of the Quiet Room

# STAFF SPOTLIGHT

# Patient Pulse

## A MESSAGE FROM THE CEO: A NEW YEAR OF COMMITMENT, INNOVATION, AND CARE

It is with deep gratitude and a strong sense of responsibility that I assume the role of Chief Executive Officer of Addu Equatorial Hospital (AEH). I would like to sincerely thank His Excellency the President Dr. Mohamed Muizzu for placing his trust and confidence in me through this appointment. It is an honour to be entrusted with the leadership of such a vital national institution, and I remain committed to fulfilling this responsibility with dedication, integrity, and a clear vision for progress.

Addu Equatorial Hospital stands today not only as a remarkable infrastructure landmark in Addu City, but also as a defining benchmark of healthcare service delivery in the Maldives. It is, in many ways, the eye of Addu; a symbol of progress, resilience, and hope for our people. The hospital represents more than just a facility; it embodies the aspirations of a community that deserves access to high-quality, reliable, and compassionate healthcare.

As I step into this role, my foremost expectation is to guide AEH towards greater heights by aligning our services with the expectations of the public we serve. Our ambition is clear: to position AEH as one of the best patient care facilities in the Maldives.

Achieving this will require a relentless focus on quality, patient safety, efficiency, and continuous improvement across all areas of operation. It also calls for a culture of professionalism, accountability, and teamwork within our institution.

Beyond its core mandate of patient care, AEH holds significant potential to contribute to the broader economic development of Addu City. A strong and reputable healthcare system enhances public confidence, supports workforce productivity, and can even create opportunities in areas such as medical tourism and specialized services. By strengthening AEH, we are not only improving health outcomes but also supporting the socio-economic growth of our community.

*At the heart of AEH's success lies the trust and support of our patients and the wider community. Their confidence in our services is both our greatest strength and our greatest responsibility. I firmly believe that meaningful engagement with the community, openness to feedback, and a patient-centred approach will be key drivers in our journey forward. Together, we can build a healthcare system that truly reflects the needs and aspirations of the people of Addu.*



**DR. AHMED ADEEL NASEER**  
CHIEF EXECUTIVE OFFICER

I am genuinely excited to begin this journey with the dedicated team at AEH. The commitment, expertise, and resilience of our staff are the foundation upon which our future success will be built. I am confident that, through unity, shared purpose, and collective effort, we will elevate AEH to new standards of excellence and make Addu proud.

Let us move forward together with determination and optimism, committed to delivering the highest standards of care and service to our community.



# Patient Pulse:

*Voices from the Heart of Our Hospital*

*Thank you to the entire surgical ward team for your excellent care, kindness and professionalism and compassion made a difficult time much easier for me. I truly appreciate everything you have done.*

*Grateful for your dedication and hardwork.  
-nahu from Surgical ward-*



*Thank you so much for taking such good care of my wife and our baby. Your kindness meant alot to us during the time we stayed in the hospital.*

*Thank you,*



*Thank you everyone for the care you guys gave to me when i came here. Especially Cardio Dr. Hazem, and RN Shiuna for taking such good care of me while i stayed.*

*Your dedication was essential in my recovery.*



# Staff Spotlight

## DR. AHMED ADEEL NASEER

Welcoming Our New CEO, Dr. Ahmed Adeel Naseer!

This month, we are delighted to welcome Dr. Ahmed Adeel Naseer as the new Chief Executive Officer of Addu Equatorial Hospital (AEH), effective 30th March 2026.

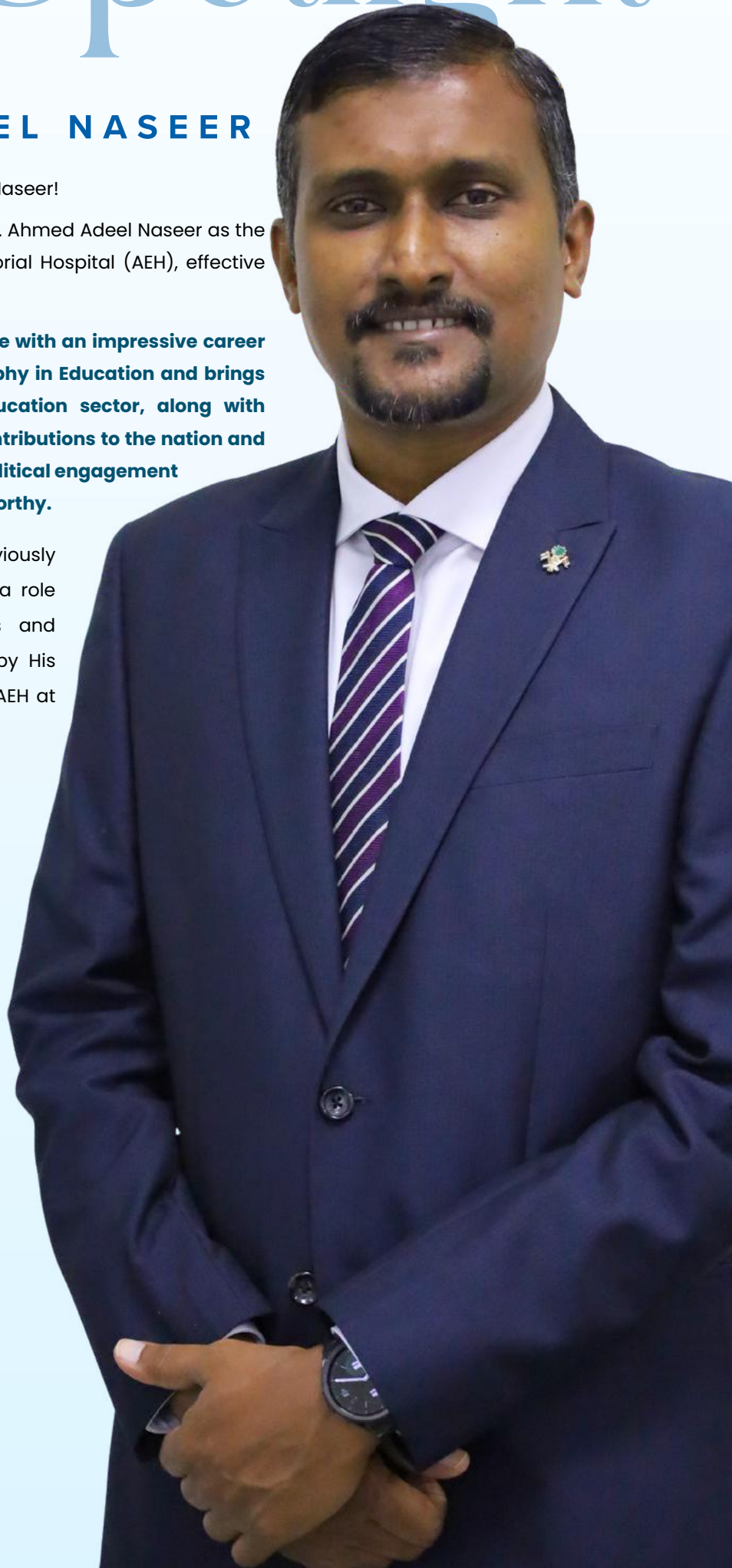
**Dr. Ahmed Adeel Naseer steps into this role with an impressive career background. He holds a Doctor of Philosophy in Education and brings over 25 years of experience in the education sector, along with extensive involvement in research. His contributions to the nation and to Addu City, particularly in the areas of political engagement and community empowerment, are noteworthy.**

It is a matter of pride for us that he previously served as Minister of State for Education, a role that reflects his recognized capabilities and leadership. He has now been appointed by His Excellency Dr. Mohamed Muizzu as CEO of AEH at the Minister of State level.

His strong governance experience, proven managerial skills, and extensive network across government and community sectors are expected to be valuable assets in strengthening the hospital's alignment with national priorities and community expectations.

We are truly optimistic about the direction in which Dr. Ahmed Adeel Naseer will lead Addu Equatorial Hospital. His expertise and vision promise a bright future, and we look forward to the improvements and advancements he will bring to healthcare services in our community.

Please join us in extending a warm and heartfelt welcome to our new CEO.



15 April, 2026

# *“Welcome aboard”* the AEH ONE TEAM



**DR. IYATH SAEED**  
Medical Officer



**AMINATH ANAN RASHEED**  
Medical Laboratory Technologist



**DR. MARIYAM SAHATH SODIQ**  
Medical Officer



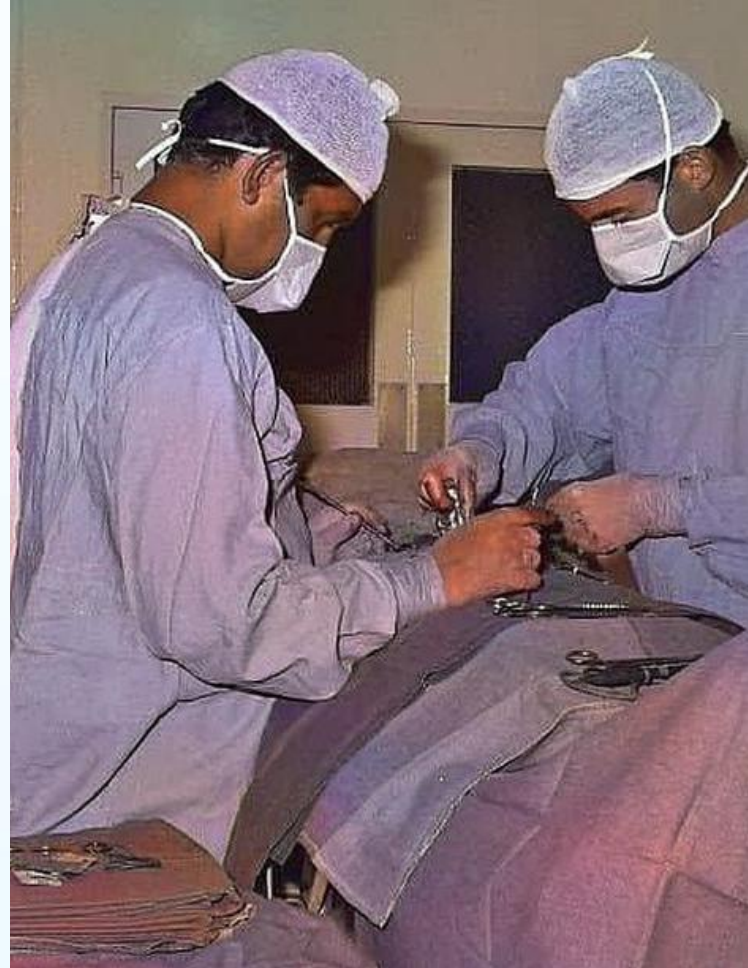
# AN END TO THE HEALTHCARE ANNIVERSARY DEBATE

By: Shah Saeed (Director of AEH)

The question of when to officially commemorate the healthcare anniversary of Addu City has long been a subject of discussion, shaped by differing perspectives, historical milestones, and community sentiment. Over the years, various dates have been informally recognized, each representing a meaningful chapter in the development of healthcare services in the region. However, the absence of a unified and officially endorsed date has led to an ongoing debate. The report "Healing History: The Transformation of Healthcare in Addu City" seeks to address this gap by providing an overview of Addu's healthcare evolution and offering a clear recommendation.

Healthcare in Addu has developed through several significant phases, each contributing to the system that exists today. The introduction of modern healthcare services can be traced back to 1957 during the Royal Air Force (RAF) Gan era, when structured medical care was first made available on a larger scale. While this period marked an important beginning, access was largely limited and externally driven. Following the RAF's departure, the community entered a phase of resilience and adaptation, where local efforts and dedicated individuals sustained essential healthcare services despite limited resources.

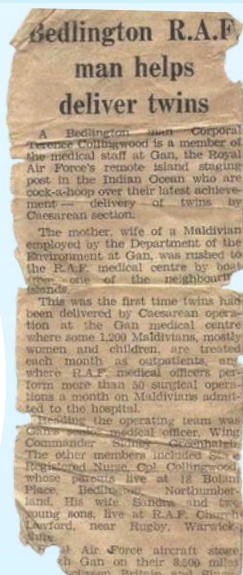
A defining turning point came on **12 March 1979**, with the inauguration of the first government health centre in Hithadhoo. This milestone represented the formal establishment of state-led healthcare services in Addu, making healthcare more accessible, structured, and sustainable for the local population. It marked a transition from externally influenced and community-dependent care to a nationally supported system. This foundation paved the way for further institutional growth, including the establishment of Hithadhoo Regional Hospital in 1984 and its eventual transformation into Addu Equatorial Hospital in 2019, each step reflecting progress in capacity, capability, and quality of care.



The relevant data for the report was collected using archival research, oral histories, and survey data from healthcare professionals and stakeholders. This approach ensured that both documented evidence and lived experiences were considered. While the findings revealed strong emotional and historical ties to multiple milestones, particularly the RAF era and the development of regional hospital services, there was a clear inclination toward recognizing a milestone that signified the beginning of an inclusive, government-led healthcare system. The inauguration of the first government health centre emerged as the most appropriate and unifying point of reference.

Hence, with the findings presented, and the guidance and input of Honourable Minister Abdulla Nazim Ibrahim, the report concludes with a clear and decisive recommendation: that 12 March 1979 be officially designated as the healthcare anniversary of Addu City. This date not only commemorates a pivotal moment in the establishment of formal healthcare services but also provides a definitive resolution to a long-standing debate.

Ultimately, this report does more than determine a date: it brings clarity, unity, and recognition to the journey of healthcare in Addu. It honors the contributions of past generations, acknowledges the progress achieved over time, and establishes a shared point of celebration for the future. In doing so, it successfully brings an end to the healthcare anniversary debate, allowing the focus to shift toward continued growth and excellence in healthcare delivery.



# THE PULSE OF THE QUIET ROOM: A DISPATCH FROM THE ICU

*By: Dr. Tanveer Hussain (ICU Physician of AEH)*

Beyond the double doors, the hospital hums with a thousand frantic stories. But here, in the Intensive Care Unit, the world shifts. The air carries a different weight, and the light falls softer against the steady, rhythmic pulse of the monitors.

Most people think of the ICU as a place of cold glass and complex machines. But as Intensive Care Specialist, I see it differently: it is the most profoundly human space in the entire building.

Being an intensivist is like conducting an orchestra in the dark. We listen to the staccato beep of a heart finding its way back to rhythm and the rhythmic sigh of the ventilator providing the breath of life.

Every morning, as the sun begins to bleed gold through the unit windows, I am reminded that we aren't just managing "cases" we are guarding the fragile bridge between despair and hope.

In the ICU, we live in the "in-between." It is a scenic landscape of resilience defined by; That moment a patient finally squeezes a hand after days of silence; That collective exhale the medical team shares when a difficult procedure goes exactly right; The privilege of standing beside someone when they are at their most vulnerable, and their most brave .

We don't just use Oxygen levels and arterial pressures to guide us. We use empathy. We look at the photographs taped to the bedside, pictures of weddings, grandchildren, and golden retrievers to remind us exactly what we are fighting for.

To my colleagues and the families we serve:

***Thank you. Thank you for your grit, your tears, and your unwavering belief in the "maybe."***

Life is a spectacular, fleeting thing. Working here doesn't make us cynical; it makes us enthusiasts for every single heartbeat. Let's continue to treat the soul as much as the body, and never forget that even in the quietest room, the music of life is playing if only we stop to listen.

***Stay hopeful. Stay brave.***





# HEAD INJURY: LETS PROTECT OUR BRAIN

By: Dr. Ezekiel Morris Lukenza (ER physician of AEH)

Head injury occurs when the scalp, skull or brain get injured or damaged by external insult and it can range from mild (laceration, bump, bruise or abrasion) to severe (traumatic brain injury).

Emergency department as one of the key department of Addu Equatorial Hospital has been receiving head injury patients with different level of severity. Head injuries can happen from a variety of causes such as **falls, sports injuries, car accidents and physical violence.**

There are factors which tend to increase the risk for head injury, these include; **Age** (young children and older adults), **gender** (male>female), **occupations** (constructions, military), **sports** (allow physical contact), **alcohol or drug use.**

Patients with head injury might have different presentations but red flag symptoms include; **Loss of consciousness, severe or increased headache, repeated vomiting, seizures, slurred speech, weakness in the arms or legs, unequal pupil size, clear fluid or blood coming from the nose or ears, severe confusion or unusual behavior.**

At emergency department, doctor will do a thorough and extensive physical examinations including; **memory assessment, balance, eye movement, muscle strength and Glasgow coma scale (GCS)** to check head injury severity. More investigations will be done to determine the extent of injury, such as; **x-rays, CT scans MRI or an EEG.**

Based on investigations, different types of head injury can be determined, these include; **concussion, contusion, skull fractures, hematoma, intracranial hemorrhages and diffuses axonal injury (DAI).**

Proper treatment usually start immediately by addressing all the patient's complaint and abnormal physical findings, including giving **antipain, anti-seizures, anti-emetic, blood clotting medications, oxygen support, breathing machine(ventilation) and even surgery.** Depend on the head injury severity and other risk factors, patient can be discharged or admitted with clear instructions from the treating clinician in order to maximize better outcome.

Although head injury cannot always be avoided, some precautions help to lower the risk, include; **wearing helmet, buckle up, childproof your home, avoid alcohol or drugs before sports and practice safe driving.**

Take home note;

Early diagnosis helps ensure proper treatment and reduces the risk of complications.

*“Brain doesn't have a spare parts, let protect our brains”*





# STRENGTHENING INFECTION PREVENTION & CONTROL: JCI PATIENT SAFETY PATHWAY INITIATIVE

By: JCI team of AEH

JCI Presidential Fellow for the Maldives, Ms. Zarana Mohamed Ali, visited AEH between 4th and 9th April 2026 to support the enhancement of Infection Prevention and Control (IPC) practices, as part of the JCI patient safety pathway initiative. Her visit marked an important milestone in AEH's ongoing commitment to strengthening patient safety and improving the quality of care.

During her visit, Ms. Zarana worked closely with the AEH JCI team to initiate comprehensive IPC audits across the hospital. These audits were structured around key components critical to infection control, ensuring a systematic and data-driven approach.

The audit framework encompassed a wide range of essential areas aimed at strengthening IPC practices across AEH. A strong emphasis was placed on hand hygiene compliance, supported by structured monitoring approaches and the use of standardized audit tools and schedules. In parallel, cleaning and disinfection practices were thoroughly reviewed, including deep cleaning protocols. Infection surveillance formed a critical component of the audits, covering key healthcare-associated infections such as phlebitis, ventilator-associated conditions, central line and catheter-related infections, and surgical site infections, alongside the monitoring of hospital-acquired conditions like bedsores with appropriate documentation and follow-up mechanisms.

The framework also incorporated antimicrobial stewardship practices, focusing on the appropriate use of higher-end antibiotics, ensuring and promoting rational prescribing practices. Additionally, personal protective equipment (PPE) compliance and occupational safety measures such as the management of needle stick injuries and body fluid exposure were assessed, along with the practices within the Central Sterile Services Department (CSSD).

Alongside the audits, significant attention was given to capacity building and staff education. Dedicated training sessions were conducted for hand hygiene auditors, PPE auditors, and surgical site infection (SSI) surveillance teams to standardize auditing practices and improve accuracy. Refresher training on cleaning and disinfection protocols was provided to attendants to reinforce best practices at the operational level. Furthermore, IPC dataset training was carried out to enhance data collection, reporting, and analysis, ensuring that future monitoring and decision-making processes are evidence-based. Collectively, these efforts provided a comprehensive and structured roadmap for strengthening IPC systems at AEH.

This initiative reflects AEH's proactive approach to aligning with international best practices in infection control. AEH remains committed to fostering a culture of safety, excellence, and collaboration ensuring better outcomes for both patients and healthcare professionals.





## CEO MEETING WITH DEPARTMENTS







## CEO MEETING WITH DEPARTMENTS





## CEO MEETING WITH DEPARTMENTS







## CEO MEETING WITH DEPARTMENTS







## CEO MEETING WITH DEPARTMENTS







## CEO MEETING WITH DOCTORS







## **CARDIAC DEVICE THERAPY SESSION BY DR. MIQDHAADH SHAREEF**







## TRAINING SESSION ON 'OCCUPATIONAL HEALTH AND SAFETY: LABORATORY QUALITY AND OPERATIONS'



## CONTENT

Dr. Tanveer Hussain

Dr. Ezekiel Morris Lukenza

JCI Team

Shah Saeed

## EDITOR

Nishaaza Abdulla

## PHOTOGRAPHY

Nishaaza Abdulla

## DESIGN & ART DIRECTION

Nishaaza Abdulla





**FOLLOW OUR JOURNEY!**