

7th Annual Surgical Gastroenterology Clinics



Course Chairman
DN Reddy

Course Directors
GV Rao
R Pradeep

Course Co-ordinators
Rohit Dama
Mahesh G Shetty
Sanjeev M. Patil
Navneet Ashok Tiwari

4th & 5th March, 2017
Asian Institute of Gastroenterology
Hyderabad, India

Organized by



Asian Institute of Gastroenterology
under the auspices of
Indian Association of Surgical Gastroenterology

Highlights

- Surgical GE clinics in the pattern of DNB&Mch examinations
- Faculty to include experts and examiners
- Resident/s will examine and present cases to the panel
- Spectrum of cases to include clinical scenarios of importance from the examination point of view
- Sessions to include GI Radiology, Instruments, Pathology Specimens and Operative Surgery of relevance
- Every resident will have an opportunity to examine, discuss and interact with the Panel

Registration

- DNB&Mch Surgical Gastroenterology residents are eligible to apply
- Registrations limited to 50 residents
- Preference will be given to exam going residents
- Confirmation will be on first come first serve basis
- Selected residents will be provided Local Hospitality and Registration
- All residents should deposit guarantee amount which is refundable on the day of clinics (DD for Rs 5000, in favor of Asian Institute of Gastroenterology, payable at Hyderabad)
- Candidates who fail to turn up after confirmation will forfeit deposit amount
- Interested candidates are requested to send the filled in application form and DD before 10th Feb 2017
- Registration request should include - Name, Course (DNB/Mch), Month & Year of appearing for final examination, Institution).
- Registration request should be attested by the HOD and scanned copy of registration and DD to be sent to gisurgery.transplant@gmail.com

Registration form and DD should be sent by post to the following address

Faculty

Adarsh Chowdary
Anantha Krishnan
Anil Agrawal
Ashok Kumar
AvinashSupe
GV Rao
H Ramesh
N Beerappa
Narayana Rao
Peush Sahni
Puneet Dhar
Raghavender Rao
R Pradeep
R Prathap Reddy
R Surendran
RA Sastry
Rajan Saxena
SM Chandra Mohan
Saumitra Rawat
T D Yadav
Vikram Kate
V Sitaram
VK Kapoor
Wasif Ali

For details, contact

Ms Sahana, Dept. of Surgical Gastroenterology

Tel.: +91 97012 30283 Email: gisurgery.transplant@gmail.com



Asian Institute of Gastroenterology

6-3-661, Somajiguda, Hyderabad 500082

Website: www.aigindia.net

Application Form

Name of the Candidate : _____

Course (DNB / Mch) : _____

Institute and Place of Study : _____

Month and Year of Joining the course : _____

Month and Year of appearing for Clinical Examination: _____

Mail ID : _____

Mobile No : _____

DD No : _____

If selected:

Tentative date and time of arrival to Hyderabad:

Tentative date and time of departure from Hyderabad:

Signature of the
candidate

Signature of the
Head of the Department

For details, contact

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