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MAX FACTS

THE OFFICIAL NEWS LETTER OF AOMSI

Volume - 5, Issue - II | 2025

International OMFS Day - I &
2nd AOMSI Next Gen Conference Issue

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Message from the President

Hi all esteemed members of AOMSI

It was a real pleasure to work for last 6 months as president of our esteemed association.

A lot have gone positively and we have worked very hard to improve very aspect of association matters be it research , financial social commitments towards members and improving training through dedicated fellowships.

I feel time has come during this midterm in Agra for every new young member or student members to ponder what they wished to do in future. We are fortunate enough today as we have strengthened our portfolio Of surgeries starting from minor oral surgeries to complex Craniofacial surgeries. Our aim should be consolidate and master the surgical techniques in whatever interest one have so that we can deliver cutting edge result to patients. Remember the recognition and accreditation as a maxfac surgeon from medical fraternity.

Will happen if one can prove from your results of treatment in real hospitals and clinics rather than social media posters and whimsies.

Be it any subspecilaty you are practising coordinate and collaborate with other allied specialties is the mantra you must follow rather than confront tantra.

I promise you AOMSI head office will do everything possible to improve the matters concerning members through coordinated efforts as a collective team.

Jai Hind.

Dr. Manikandhan Ramanathan
President, AOMSI.

Message from the Hon General Secretary

Dear Colleagues,

Warm greetings to all members of the Oral and Maxillofacial Surgery fraternity.

It brings me great pride and joy to share this message for the latest issue of MaxFacts, which commemorates a momentous occasion—International Oral and Maxillofacial Surgeons Day, celebrated on 13th February each year. This day is not only a tribute to the evolution of our specialty but also a celebration of the profound impact we continue to make in patient care, education, and surgical innovation.

This year, our theme—"Early Detection and Prevention of Oral Cancer"—reflects a critical public health concern that demands urgent and sustained attention. India bears a disproportionately high burden of oral cancer, and the prognosis remains grim when diagnosis occurs at advanced stages. As specialists who frequently encounter such cases, we are uniquely positioned to lead this change.

I am proud to announce that AOMSI, in collaboration with IAOMR, IAOMP, IDA, and IAPHD, has launched a nationwide awareness and screening campaign, starting on February 13th and culminating on May 31st—World No Tobacco Day. This initiative includes:

Educational videos for the public and clinicians
Standardized presentations on Oral Potentially Malignant Disorders (OPMDs)
Free screening camps
Public seminars, workshops, and school outreach programs
Digital campaigns and professional development modules

Our collective efforts aim not just to raise awareness but to build a sustainable model of prevention, early diagnosis, and multidisciplinary collaboration. The enthusiastic response from dental colleges, private practitioners, state chapters, and young OMFS professionals has been inspiring.

Let us continue to amplify our voice, extend our outreach, and strengthen our resolve to make oral cancer prevention a national priority.

I extend my heartfelt thanks to all members who have actively participated in this campaign and to the editorial team of MaxFacts for showcasing these efforts. Together, we will continue to elevate the scope and impact of maxillofacial surgery across India.

Dr. Girish Rao
Honorary General Secretary
Association of Oral and Maxillofacial Surgeons of India (AOMSI)

Message from Editorial Team

Dear Readers!
Season's Greetings.

Once again from the entire team of Maxfacts Newsletter, we extend our heartfelt gratitude to all our Members of prestigious AOMSI for the support and appreciations for first edition of our Newsletter.

This edition of Maxfacts is dedicated on fantastic activities done by various state chapters and members of AOMSI on International OMFS Day. In addition to it we have also included meticulously organized second nextgen conference on Facial esthetics and Hair Transplant held at Udaipur along with workshops done by various state chapters.

We have covered our dynamic Honorary General Secretary of our prestigious association Dr. Girish Rao Sir in spotlight interview.

Hoping to see many of you in midterm conference at Agra.

Best regards,
Team Maxfacts.

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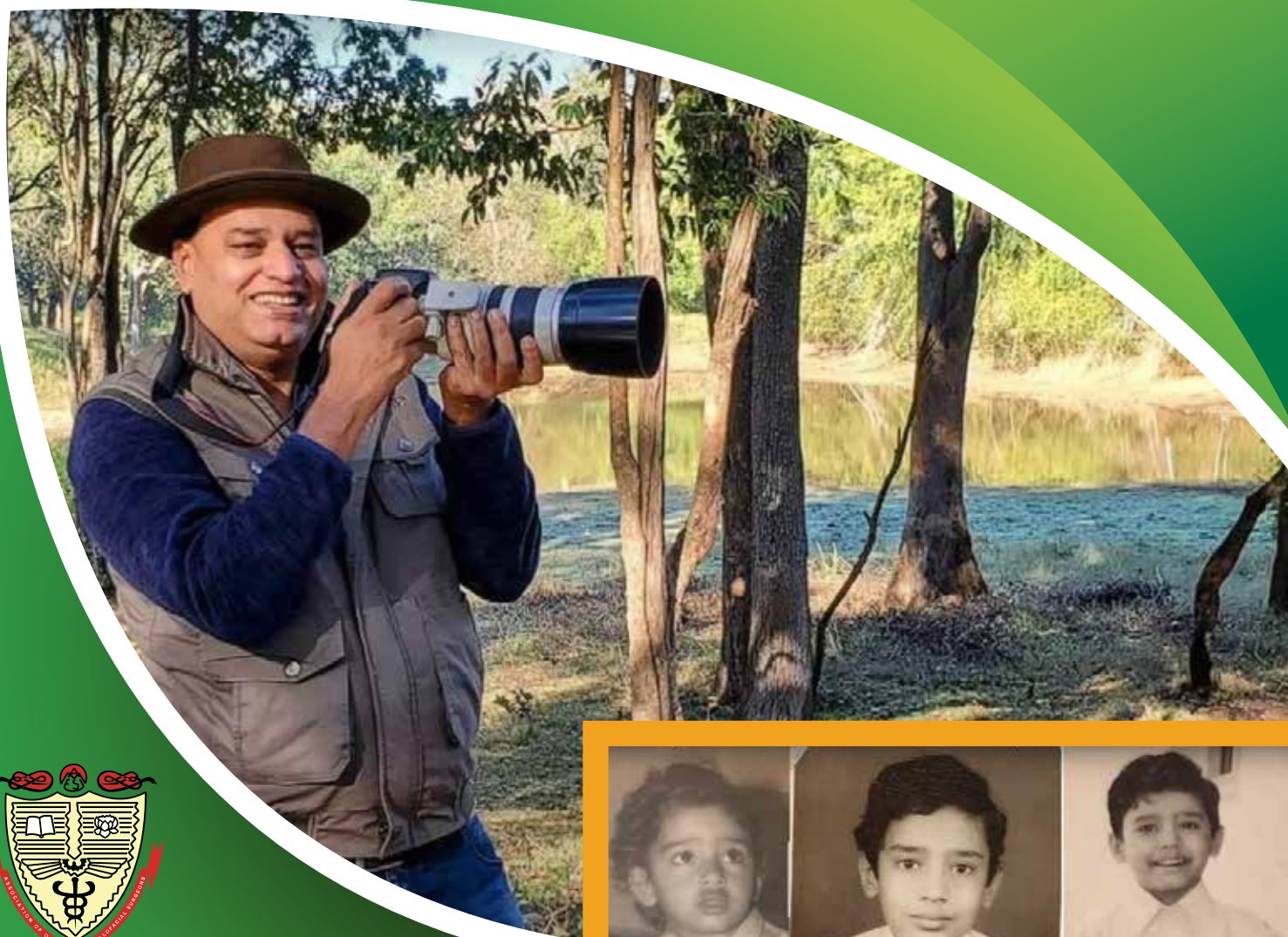


SPOTLIGHT
Interview

Dr. Girish Rao

How was your childhood, sir? What are your best memories of it?

Oh, fantastic! I was born on Shivratri, on February 19, 1966, and had an absolutely awesome time growing up.

My father is an engineer, at that time, he was working with Bharat Electronics. My mother has always been one of my biggest role models. She's a sportsperson, and the women in our family have always been active in sports. My grandmother was a tennis champion, my mother was a national-level badminton champion, and then, of course, my sister also got into sports, she played table tennis. Even my daughter was enrolled in gymnastics.

So I'd say we come from a very sporting family, and that spirit of discipline and energy really shaped my childhood. It's been a fantastic life, and I truly believe that life is a celebration. We should aim to live it fully, with joy and gratitude.

My childhood was brilliant. Everything felt just right, and I feel truly blessed to have been born in this great country, India, and especially in my favourite city in the world.

How did your journey go about after you finished your undergraduation? How did you choose Surgery?

Well, I always wanted to be something different. During all four years of my undergraduate studies, I received a scholarship from Colgate for being the university first rank holder. Believe it or not, I used my scholarship money to invest in shares—and that grew over a period of time. I was always keen on multiplying and growing my resources.

At the end of dentistry, I was very keen to pursue surgery. Even though I secured the second rank in the state and got offered all the specialties, I took up oral medicine because I believed it provided a strong foundation. I took it with passion. I completed almost a year of oral medicine and that was a fantastic experience.

Later, I cracked the national entrance exam and secured the fifth rank in Chennai. At that time, everyone wanted to do Orthodontics. Believe it or not, the top 10 ranks almost always chose Ortho. But I broke the routine by choosing oral and maxillofacial surgery.

Surgery back then mostly involved extractions. If there was a jaw tumor, we would remove it, but there was no reconstruction. Only simple pathologies were being handled. Still, I sensed that surgery was going to evolve in a big way in this country. You know, it's a kind of sixth sense—you don't limit yourself. That's how I chose maxillofacial surgery.

I love that decision. It's been 35 years now, and I live and breathe maxillofacial surgery. It's my passion.

Can you talk about your mentor, Dr. Vanaja Madam?

Absolutely. She was more like a mother figure to me.

When I first went to Chennai, she just picked me up and said, "I'm going to mould you." That's the kind of person she was. Back then, surgery was a very male-dominated field, especially in Tamil Nadu. But she stood out—she was the "diamond lady." What stuck with me was her resilience. She showed me that if you stick it out and push yourself, people will give way.

She had the guts to take on any surgery—be it complicated TMJ ankylosis or large ameloblastomas. We used to get massive tumors and remove

them without even reconstructing them back then.

Madam made us work. Our day started at 6:30 a.m. OPD would begin and by 1:00 p.m., everything would be done. Our OPD in Chennai used to receive nearly 1,000 patients per day, unheard of in most places.

I still remember once when all the interns had gone on a picnic. The senior postgrads were preparing for exams, so only four of us juniors were left to manage the clinic. It turned into a challenge—who could extract the most teeth that day. I remember extracting about 240 teeth that day!

The kind of experience we got in minor oral surgeries was unbelievable. Even now, I can close my eyes, pick up a forceps, and just feel the tooth, it's muscle memory. That bond between the hand and the tooth is something nobody else can quite understand.

Yes, technique matters, but numbers matter too. Doing surgery over and over gives you a confidence nothing else can.

A lot of students who finish their postgraduation feel they're now ready to conquer the world. But they underestimate the value of post-PG training. Could you share how that transition happened for you and what training you did after PG?

Yes, the moment you finish your postgraduation, you think you're ready to be a consultant maxillofacial surgeon. I did the same, I printed visiting cards that said "Consultant Oral & Maxillofacial Surgeon." But I quickly realized that I wasn't fully trained for real-world maxillofacial surgery.

While I was confident with intraoral surgical work, more complex cases were beyond me. I remember joining a fellowship at Kidwai Cancer Hospital in Bangalore—today a premier cancer center. My boss then, Dr. Kumaraswamy, asked me to ligate a bleeding vessel. I didn't know how to handle it with my hands. I only knew how to suture around vessels with a needle holder, like we did in Chennai.

That's when he said, "You need to go get trained."

One of the M.Ch. surgical trainees there, who eventually became the Director of Kidwai and is now Vice-Chancellor of a major university, took me under his wing. For three months, I worked with him on every surgery, whether abdominal, breast, cervix, or prostate.

That general surgical training transformed the way I approached surgery. Every maxillofacial surgeon must undergo basic general surgery training. It's absolutely critical.

Another important turning point was attending my first maxillofacial conference in Dharwad. Back then, postgraduates were not usually allowed to attend such events, but I pleaded with Madam and got permission.

There, I was introduced to orthognathic surgery for the first time. We saw TMJ reconstructions, gap arthroplasties, surgeries we only read about in textbooks. Seeing it done in real life was jaw-dropping. I still remember seeing John Williams, his textbook was our Bible. We almost worshipped him!

That evening, a bunch of us, Suresh Shetty, Vinod and others sat over and said, "If these guys can do it, why can't we?"

We decided to go to the UK and train in orthognathic surgery. Some of us stayed back there. Others, like me, came back and started training the next generation.

And that's how the specialty grew in India.

I went to the UK at the end of 1991, and we came back in 1999, so it was the whole of the '90s. I would say it was the best part of my life, professionally. I had a fabulous time. I couldn't have

asked for anything better. One of the biggest advantages was that I was already well-trained in India in certain skills, and I was keen to polish those and learn new ones. The UK at that point was truly excellent.

I started off at Canniesburn Hospital in Glasgow. I must say, Professor Moos was one of the greatest craniofacial surgeons at that time, and he was a huge source of inspiration. He would work from morning till night. His energy and activity were just mind-boggling. Although it was just an observer post, it pushed me to believe that we should be doing cranio facial surgery in India too.

After that, I moved to a very quiet place in England called Torquay, in the southwest. It's a peaceful, beautiful English town. My boss there was Mr. Hugh Walters, a very traditional Englishman with long sideburns and long hair, who wore a monocle. But beneath that old-school exterior, he was the most tech-savvy man I've ever met. He was a musician, wrote programs for computers, did oncology, and performed orthognathic surgeries; a doubly qualified genius. He became a great source of inspiration for me too. It was a quieter setting, but he gave me the opportunity to do many things.

Later, I moved to London as a registrar at one of the oldest hospitals—St. Bartholomew's (St. Barts) and The Royal London. I had some fantastic mentors there. There's a saying, "When the student is ready, the Guru appears." My hunger to learn was immense, and I was fortunate to work under one of the most aggressive maxillofacial surgeons I've ever seen.

My boss at the time, Iain Hutchinson, was phenomenal. He'd make me work from 6 AM till midnight, it was just work, work, and more work. He was an oncology surgeon, and we did incredibly challenging surgeries. What seemed impossible, he would make happen. That gave me a lot of hands-on training and confidence. We performed a lot of thyroid and parotid surgeries, and not just simple resections. I remember a case where a patient from Africa had three massive tumors, one like a head-sized mass. We resected it and reconstructed him, with funds pouring in from all over the world. My boss was like a celebrity surgeon, and I learned so much from him.

I had another remarkable boss in London, Dr Kieran Coughlan. The way he'd take a suture bite exactly 2 or 3 mm from the mucosal edge, with watertight closures was incredibly precise. Especially for orthognathic surgeries, if you had to move the maxilla by 3 mm, it had to be exactly that. Today we use 3D technology, but back then, he would cut and move plaster models with perfect accuracy. It was amazing.

The third boss was Mr. John Carter. He gave me honest feedback, and I considered that phase my "finishing school." These three were like the "Trimurtis" who shaped me before I returned to India. They were fantastic.

How were your initial years in the association, and how did you stand for election for the post of Honorary General Secretary of AOMSI?

Dr Kishore Nayak was instrumental in pushing me to be a part of this great organization. After I returned back from UK in 1999, we had the National AOMSI conference in 2000 at Bangalore and I was the chairman of the Scientific session. The following 3-years, 2001 to 2004, I was elected as the National Executive Committee member and contributed to our curriculum development. Being the Professor and Head of RV Dental college at Bangalore, Rajiv Gandhi University of Health Sciences also appointed me as the Chairman of Curriculum Development in Fellowships in Maxillofacial surgery. We were the first to start Fellowship in Maxillofacial Trauma, Cleft lip and Palate, Oral Oncology and Aesthetic Facial Surgery. Everything was done meticulously. There was some debate then about the best way forward, but we ensured that the Rajiv Gandhi University curriculum became the blueprint for many other universities across the country. It remains one of the most comprehensive curricula we follow today.

Looking back, I wish I had included more aspects related to maxillofacial surgery, such as hair transplantation. There was a lot of discussion around it, but very few general surgeons had started doing it at that point around 2004–2005. Even before that, we had already envisioned a broader scope for our specialty. Had I known that maxillofacial surgeons would one day be performing hair transplantation, we might have included that component earlier.

After this period, I decided to step back from active roles for a while. Eventually, I was elected Vice President in 2014 in Ahmedabad. When it came time to consider applying for the President post, many of my friends encouraged me. I initially considered applying in Chennai, but eventually stepped back from that plan.

Then the thought came, what else can I do for the association? That's when I decided to run for the post of Honorary General Secretary. Honestly, it happened quite spontaneously. A few close friends pushed me to do it, almost playfully at first. But once the idea set in, and especially after I was declared Secretary Elect, the responsibility truly hit me. I started thinking seriously—How can I now devote my time and make a meaningful contribution?

What was your election manifesto?

Once you take up a responsibility, you must stay committed. You can talk outside for 24 hours, but what really matters is what you do. I consistently devoted about two hours every day, and that time was purely focused on thinking about how our association and our specialty can grow, how we can offer the younger generation a better experience while preserving the legacy built by our seniors.

To be honest, I was very lucky. When I came back to India in 1999, I had fantastic mentors. I joined the Bangalore Institute of Oncology and worked under Dr. Ram Mohan Tiwari and learnt oncology. We were probably the first in the country to start using primary implants in reconstructed jaws around 2003–2004.

That experience gave me a sense of responsibility to do more for the specialty. One challenge I faced often was public awareness. Whenever I went to an oncology institute or hospitals like St. John's or Kidwai, people would ask: Why is a dentist here? That question showed how little the general

public knew about our specialty. So one of my manifesto goals was to create that awareness.

I strongly believe that "oral and maxillofacial surgery" should become a household name—just like ENT or orthopaedics. If people know and can pronounce it, they'll remember it. Every time I had to introduce myself, I realized the importance of name recall. That's when we came up with the idea, can we spread the name of maxillofacial surgery in a way that makes an impact every single day?

So when I took office in 2022, one of the key initiatives we started was: Can we have 10 people speak about maxillofacial surgery to 10 others each day? If that happens, and if 10,000 people follow that, the entire country can be made aware in just a few hours.

If the public begins to recognize our specialty for facial trauma, cosmetic surgery, oral cancer, implants, they'll start saying: Yes, I want to go to a maxillofacial surgeon for this.

This is just one part of the manifesto. I wanted to create a strong identity for the specialty so that the next generation will have a clear and abundant path. The amount of work and opportunity in our field is enormous, but we must first create that platform.

I believe in leading by example and doing what is necessary without noise, but with impact.

What was your plan for the tenure of Honorary General Secretary?

Over the last four years, this being my final year, I believe we've made a meaningful impact, especially in building public awareness about our specialty.

From the very beginning, our focus was on International OMS Day, which is now celebrated every year. In the first year, we were just coming out of the post-COVID period, when a lot of misinformation and doubt had crept into the public mind. That's when we pushed hard to highlight the role of maxillofacial surgeons and launched key initiatives like the Rehabilitation of patients affected by Mucormycosis through the association. Even today, we have sufficient funds available, and I encourage more members to apply, especially for rehabilitation of patients affected by disease or major surgeries. This was one of our major first-year efforts, and we saw tremendous support from various government institutions as well.

In the second year, we recognized a broader need, not just to promote trauma awareness, but to actively address trauma management gaps. One

such gap was the critical time between an accident and access to professional help. So, we launched a public education campaign on how to manage facial trauma safely in the immediate aftermath of injury, essentially basic life support and emergency care. This included bleeding control, primary stabilization, and what not to do. We created standard PowerPoint presentations for maxillofacial surgeons to take into schools, colleges, and public forums across the country.
This campaign was incredibly successful. It was even launched by a Cabinet Minister and received support from both government bodies and local communities. It helped establish the idea that OMS is not just surgical, it's life-saving, preventive, and community-focused.

In the third year, we turned our attention to awareness among the dental fraternity. I've always believed that if you want lasting impact, you need to give something valuable either to the public or to fellow professionals. I had observed in many private dental practices, especially in tier-2 and tier-3 cities, that general dentists often faced complications but lacked the skills to manage emergencies.

So we decided to launch a Basic Emergency Training Program for general dentists conducted by maxillofacial surgeons. This had a two-fold benefit: it empowered general dentists, and it helped build referral relationships. A maxillofacial surgeon in a small town training 30 local dentists directly enhances patient safety and builds community trust.

This program was standardized and vetted by senior maxillofacial surgeons. With excellent support from IDA Head Office and the IDA Secretary, the initiative is now running monthly. Thousands of surgeons have trained tens of thousands of dentists across the country. The curriculum remains active and ongoing.

In the fourth year, we launched an Oral Cancer Awareness and Prevention Campaign. We knew oral oncology needs a multidisciplinary approach involving oral medicine, preventive dentistry, and community health. The theme was early detection and early intervention. Our goal was to go beyond the clinic and into the community.

I'm proud to share that this campaign reached all 315 dental colleges in the country. Every institution actively participated, involving all departments. We also partnered with Tata Memorial Hospital and are now working to introduce this program in CBSE schools.

Why schools? Because we believe that prevention starts with education. If children are taught about the dangers of tobacco, they can influence their parents. We've seen children go home and tell their parents not to chew tobacco because someone in their school has lost a relative to oral cancer. That kind of awareness creates real societal change.

As Honorary General Secretary, I've also personally travelled across the country, attending almost every state chapter meeting. I've interacted with hundreds of members, shared ideas, and built relationships. It has been an incredibly fulfilling journey.

Governor Thaawarchand Gehlot, founder-chairman of Wipro Ltd. Azim Premji, RGUHS Vice-Chancellor Bhagavan B.C., Medical Education Minister Sharan Prakash Patil, conferring honorary doctorates on Dr. Hombe Gowda Sharat Chandra, Dr. Girish Rao, and Dr. G.T. Subhas during RHUGS convocation in Bengaluru on Tuesday. |

How was the balancing act—managing administration, public outreach, bureaucratic engagement, and student mentorship all these years?

It wasn’t easy, but if your goals are set and you're driven by a purpose to lead an excellent life, then you naturally begin to engage with everything what I call a 360-degree life. You must go to the grassroots level engage with students, because if you can lift up students, you can lift the profession.

Sometimes, all a student needs is a spark of inspiration. You don’t always have to teach them content; just inspire them with your story. I was personally inspired when I saw Dr. Paul Salins and other international surgeons perform. I thought, If they can do it, why can't I? I saw Indian surgeons doing exceptional work, and I realized that we, too, can match global standards.

We must also reach out beyond our professional circle. I’ve spoken to many national leaders and influential people from Azim Premji to Nitin Gadkari. When I explained our specialty to them, they were surprised that maxillofacial surgeons coming from a dental background handle complex facial trauma and surgeries. Their response? “We didn’t know that!” This means we haven’t been vocal enough.

The Art of Decision-Making: Blending Logic, Experience, and Instinct

In the life of a surgeon, decision-making isn't just a science—it's an art. There are moments when rational training aligns with a deeper instinct, and together, they shape the right path forward. Especially in clinical settings, where stakes are high, the balance between logical analysis and inner intuition becomes essential.

As a clinician, one must begin with structured logical thinking. Patterns guide diagnosis and treatment. But beyond that, good decision-making also involves multiple contingency plans, not just Plan A, but Plans B, C, and D. Complex surgeries, for instance, require mental rehearsal and reflection, sometimes even sleeping over the problem. Often, the subconscious mind presents answers overnight. Call it instinct, gut feeling, or sixth sense; these insights are born from years of experience and observation.

Still, 90% of good decisions are grounded in logic, training, and data. That remaining 10%, the spark of instinct is what elevates a good clinician into a great one.

Advice to Young Surgeons: Train the Mind, Trust the Process

To those starting out: don’t be in a hurry. You can’t learn surgery from books or videos alone. Just like swimming, you have to jump into the water, but only when you know how not to drown.

The most critical first step? Find a good mentor. One who trains you hands-on, who holds your hand through failure and success. Learning doesn’t end with your MDS, it continues for five to eight years post-graduation, where you're groomed into independence.

And always remember: it’s not just talent, but patience, perseverance, passion, and discipline that makes a surgeon successful.

Technology: A Boon, But Humanity is Irreplaceable

We live in an age where technology evolves daily; from 3D printing and AI to virtual surgical planning. These tools make treatment more predictable, accurate, and efficient.

But one word of caution: don't lose the human touch.

In tumor boards and case discussions today, everything may be virtual, CTs, MRIs, pathology reports but never underestimate the power of seeing the patient in person. Listening to the patient's story, understanding their fears, and earning their trust are irreplaceable.

Empathy is your greatest tool. Not sympathy, empathy. That emotional connection, the assurance you offer by simply saying, "I'm here for you," can heal as much as your scalpel does.

What do you do apart from surgery?

"Surgery is my passion, but life is much more than the operating room."

I enjoy golf, it teaches focus, patience, and rhythm, much like surgery. On weekends, I retreat to my farm, where I practice organic agriculture. Driving a tractor or tending to the soil grounds me, it's a humbling and enriching experience.

I'm also an avid photographer. Capturing moments, expressions, and nature gives me a different perspective on life, it's another form of observation and appreciation.

One of my most fulfilling involvements has been in temple architecture and spiritual spaces. I've helped build temples and also contributed to the Sarva Dharma Dhyana Mandira, a unique meditation hall that brings all faiths together. It reflects my belief in unity, peace, and the sacredness of diversity.

"These pursuits keep me connected—to nature, to spirit, and to the stillness within."

In a unique and humbling turn of events, I recently had the opportunity to operate on a patient quite unlike any I had encountered in my 35 years of surgical experience—a Boxer dog. The canine had suffered a severe facial injury after a maternal pig, in an extraordinary act of instinctive protection, attacked it for killing her piglets in Chitradurga. The dog was brought to Bengaluru with a displaced Lefort I fracture, and after several

consultations, Dr. Pumpapathi, a dedicated veterinarian in JP Nagar, reached out for surgical assistance. We successfully repositioned the maxilla and fixed the fracture using two titanium plates and eight screws. It was an exhilarating challenge, and a reminder that the principles of maxillofacial surgery transcend species. Healing, after all, knows no boundaries.

What is your vision for maxillofacial surgery?

My goal is to inspire young professionals to pursue oral and maxillofacial surgery. This specialty is so vast, there's an array of procedures and subspecialties that everyone can explore and practice. My message to the younger generation is this: instead of becoming a general practitioner, identify your niche early on. If you can recognize where your strengths and interests lie, your growth will be much faster and more fulfilling than just doing a bit of everything without direction.

I've enjoyed exploring the full range of what our specialty has to offer; there's so much depth and drama, from facial trauma to reconstructive work, from cosmetic to oncologic surgery. There are many things one can master if there is a true desire to learn.

My sincere advice to youngsters: find a good mentor who is willing to teach you, and work with them for at least three years. Absorb everything, how they treat, how they communicate, what makes them successful. Then, move on to another mentor. Learn their unique approach. Take the best from each and eventually, develop your own philosophy, your own way of treating patients. That is how you will grow into a well-rounded surgeon and create a name for yourself.

My Dream for Maxillofacial Surgery:

- Trauma Centres: Every trauma centre in India, whether Level 1, Level 2, or Level 3, should have at least one maxillofacial surgeon. If we train our specialists in managing not just the facial region but broader trauma, we can create over 1000 job opportunities across the country.

- Medical Colleges: Every medical college should have a maxillofacial surgeon, not just as part of the dental department but as a full-fledged surgical specialist involved in trauma, oncology, and critical care. I've met with the National Medical Commission Chairman and emphasized this vision.

- Dental Colleges as Centres of Excellence: Every dental college should have a dedicated oral cancer unit. Why not establish centres for primary prevention, early detection, and full-spectrum treatment, including radiotherapy and chemotherapy?

- Wider Role in Public Health: As maxillofacial surgeons, we can manage trauma, cancer, cosmetic surgeries, congenital deformities, infections, and systemic manifestations of oral disease. The scope is vast, we must not restrict ourselves.

We must think out of the box, scale our training, amplify our presence in the public health system, and most importantly, inspire the next generation to take this profession to greater heights. Our time is now.

Group photo of all attendees (delegates, residents, speakers, and organizers).

2nd AOMSI
Next Gen Conference

Date : 8th – 9th March 2025
Venue : Pacific Dental College, Udaipur
Theme : Facial Aesthetics

The **2nd AOMSI Next Gen Conference** was successfully conducted on 8th and 9th March 2025 at Pacific Dental College, Udaipur. With the theme of **'Facial Aesthetics,'** the conference aimed to bring together experienced professionals and budding maxillofacial surgeons to explore advancements in aesthetic surgical procedures.

Conference Highlights:

- The first notice of the conference was sent on 19th January 2025, giving less than 50 days for promotion and registrations.
- A total of 290 participants attended the conference, comprising 160 delegates and 130 residents.
- 25 expert speakers from across the country delivered lectures, sharing their expertise on various aspects of facial aesthetics.
- 4 surgical hands-on workshops were conducted on:
  - Hair Transplant
  - PRP and GFC
  - Genioplasty and Fat Grafting
  - Toxin Injections, Fillers, and Threads
  - The registration fees were:
  - AOMSI Delegates: ₹3000 (inclusive of GST)
  - Residents: ₹2500 (inclusive of GST)
  - Around 50 residents were accommodated on the college campus.

Inaugural ceremony featuring dignitaries and the lighting of the lamp.

Scientific Contributions:

- 12 free paper presentations were delivered by delegates.
- 54 poster presentations were displayed by residents, reflecting the growing interest and research in facial aesthetics.

Inaugural Function & Banquet Night:

- The inaugural function was held on the evening of 8th March at the Pacific Dental College Auditorium.
- The event was graced by AOMSI President, Secretary, Rajasthan State AOMSI Secretary **Dr. Sankalp**, and the Chief Guest, **Mr. Ashish Agrawal**, Chairman of Pacific Dental College.
- The banquet dinner on the night of 8th March at Bhairavgarh palace resort was a memorable event, highlighted by the musical talents of our surgeons, especially Dr. Amit Dhawan.

Group photo of all attendees (delegates, residents, speakers, and organizers).

Group photo of all attendees (delegates, residents, speakers, and organizers)

Inaugural ceremony featuring dignitaries and the lighting of the lamp

Speakers delivering lectures during the sessions

Hands-on workshop sessions showcasing active participation

Free paper and poster presentation sessions with presenters and judges

Banquet night photos, especially moments from the musical performances

Second EC meeting of AOMSI held during Next Gen Conference at Udaipur

The conference was well received, and the enthusiastic participation of delegates and residents contributed to its success. It reaffirmed the significance of Facial Aesthetics in the evolving field of Oral and Maxillofacial Surgery, setting a high standard for future AOMSI events.

OMFS Day Activities

AOMSI Kerala State

Kerala State - Level
International OMFS Day Celebrations

As part of the International Oral and Maxillofacial Surgeons Day celebrations, the Kerala State Chapter of the Association of Oral and Maxillofacial Surgeons of India (AOMSI) organized a series of public outreach programs on February 16th at Durbar Hall Ground, Ernakulam. The theme for this year was **"Oral Cancer – Prevention, Early Detection, and Treatment."**

The celebrations commenced with a bike rally and walkathon, flagged off by Assistant City Police Commissioner **Shri Jayakumar**. These activities were aimed at raising public awareness about oral cancer and the role of early detection in saving lives.

In the evening, a public awareness session and a free oral cancer screening camp were held, drawing participation from the general public and medical professionals alike.

OMFS Day Activities

AOMSI Kerala State

The public meeting was presided over by AOMSI Kerala State President **Dr. Eldho Markose.** The event was formally inaugurated by District Collector **Shri N.S.K. Umesh** IAS, who highlighted the need to intensify cancer awareness initiatives, especially among vulnerable groups such as migrant workers.

Eminent oncologists **Dr. V.P. Gangadharan and Dr. Moni Kuriakose** delivered keynote addresses, underscoring the importance of collaborative efforts in cancer prevention and care. Senior maxillofacial surgeons **Dr. Varghese Mani and Dr. J.I. Chacko** were honored in recognition of their contributions to the specialty.

Other notable speakers included Dr. Shivaprasad, District Program Manager of the National Health Mission, along with **Dr. Ram Mohan, Dr. Sujith Harshan, Dr. Akhilesh Pratap, Dr. Arun Babu, Dr. Binu Augustine, Dr. Anooj P.D., and Dr. Srividya.**

Students and faculty members from five dental colleges in and around Ernakulam actively participated in the day's events, contributing to both awareness and cultural programs.

In his concluding remarks, State Secretary **Dr. Muraleekrishnan M** announced that similar oral cancer awareness sessions and screening camps would be conducted throughout the state in the coming months. The event concluded with a vote of thanks delivered by **Dr. Muraleekrishnan.**

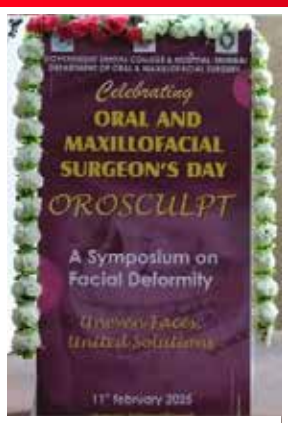
OMFS Day Activities

AOMSI AP Branch

Oral cancer awareness program and talk in GITAM Institute of Business School Visakhapatnam

Face Painting, Quizzes and Essay Writing on Oral Cancer


OMFS Day Activities
Maharashtra State Chapter, GDC Mumbai



































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OMFS Day Activities

Rural Dental College Loni

International OMFs day celebration kicks off at **Rural Dental college Loni** with Cancer awareness session and screening for Sanitary Services providers and non teaching employees of PMT Loni.

Next day session was conducted on medical emergencies. Eminent Anesthetist of the region **Dr. Tushar, Dr. Sanjay Asnani and Dr. Harish Saluja** shared their knowledge with Interns and pgs of all the branches of Dentistry. Hands on dummy for BLS were given to participants

OMFS Day Activities

ACPM Dental College, Dhule

CDE in early detection of oral cancer was conducted at Fortis hospital Mumbai on the occasion of OMFS day under the leadership of **Dr. Vipin Dehane**.

OMFS day celebration at **Dypatil Dental College, Mumbai.** Theme was on Oral cancer. **Dr. Pankaj Chaurasia** from Tata Memorial Hospital, Mumbai spared his time to participate in the event and shared his valuable thoughts.

Yavatmal city oral surgeons celebration. Conducted oral dental checkup, lecture on OSMF.

Students imagined how they can used our oral surgery instruments.

OMFS Day Activities

Gujarat State Chapter

Surat AOMSI conducted a CME for fellow dentist of city & OMFS colleagues for awareness of oral cancer treatment & reconstruction aspect : lecture was taken by top notch maxfax onco surgeons of surat **Dr. Sagar Agarwal, Dr. Dinesh shah, Dr. Savan chovatia.**

OMFS Day Activities

Gujarat State Chapter

On the occasion of IOMFS day, I was Invited as a Guest Speaker on **"Effect of Gutkha and Tobacco chewing on health & Oral Cancer Awareness"** at Dungri Sarvajanik school accompanied by **Dr. Dhrumil Sarkar,** where 250 Secondary students participated. The program was highly successful.

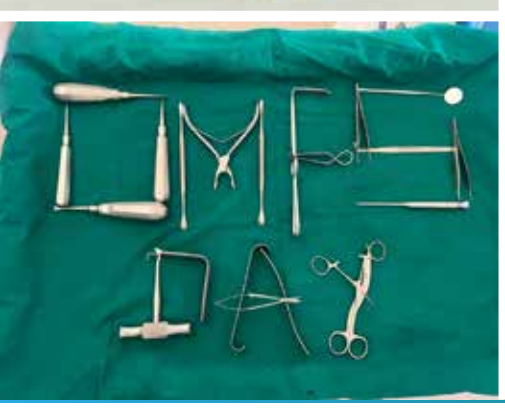
Prof. Dr Nilax Mufti.

OMFS Day Activities

Gujarat State Chapter

Invited as Chief Guest for the E- Poster Competition, Cake cutting, Speech & Display of Instruments in unique way to celebrate the International OMFS day by Students & Interns of **Vaidik Dental College & Research Center, Daman**. Lead was taken by **Dr. Hitesh Navapuriya & Dr. Dhwani Randeria.**

Prof. Dr. Nilax Mufti



OMFS Day Activities

Gujarat State Chapter

"Celebrating Excellence in Oral and Maxillofacial Surgery!

The Department of Oral and Maxillofacial Surgery (OMFS) and AOMSI-GUJARAT State Chapter at Narsinhbhai Patel Dental College & Hospital (NPDCH), Sankalchand Patel University (SPU), proudly celebrated the International Oral and Maxillofacial Surgeon's (IOMFS) Day!.

Our esteemed faculty members, residents, and students came together to mark this special occasion, highlighting the department's commitment to providing exceptional patient care and advancing the field of OMFS.

We started **ORAL CANCER AWARENESS PROGRAM** at institutes of SPU, and will be conducting this in whole NORTH GUJARAT till 31st May 2025.

We Thank Our Dean Dr.Vilas Patel Mam and Management of SPU and President sir Shri PRAKASH PATEL for their support.

Here's to another year of innovation, education, and excellence in Oral and Maxillofacial Surgery! #IOMFSday #OMFS #NPDCH #SPU"

OMFS Day Activities

AOMSI Tamilnadu & Pondicherry Branch


The legends !...
PROF.Dr.B.Srinivasan & Prof.Dr.M.F.Baig
I ♥ DMFS
Blessings & warm memories of our MENTOR
Let each man exercise the art he knows !...
Thanks to SAVEETHA DENTAL COLLEG

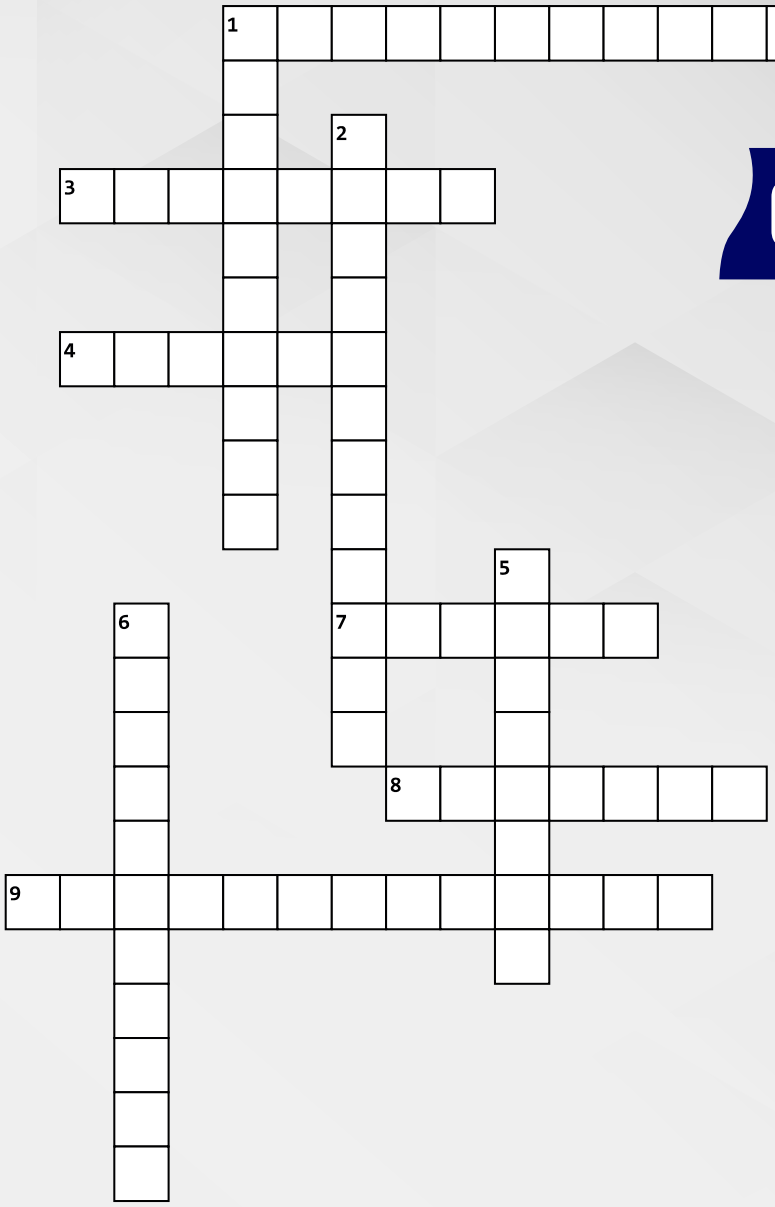

"Prof. Dr. CKD Lecture Series - 2025"


GPS Map Camera
Devanampattinam, Tamil Nadu, India


ENATHOFEST I.D

OMFS Day Activities

AOMSI Haryana State



CROSSWORD

Across:

1. A self-reducing derangement between the articulating components of the TMJ
5. Vascular Plexus in postero-lateral wall of nose
4. Another name for superior tarsal muscle which maintains the elevation of the upper eyelid
7. _____technique is used for internal or indirect elevation of maxillary sinus floor
8. Classification system for orofacial clefting
9. A type of radiation therapy in which radioactive pellets are placed adjacent to tumor

Down:

1. Nerve injury classification in 5 different types
2. A fungal infection with tendency to invade vascular network, resulting in thrombosis and necrosis of surrounding tissues
5. Diploic veins stay in the skull, _____ goes through and through the skull to end up in soft tissue
6. Various sun-reactive skin types

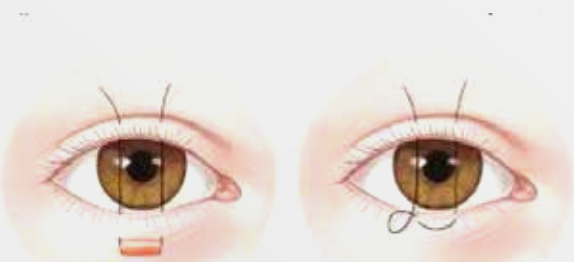
QUIZ

1. The opening of nasolacrimal duct into inferior meatus is covered by _____

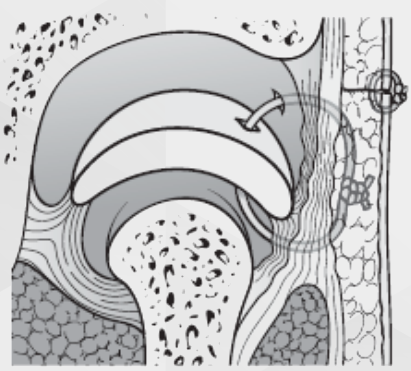
2. The venous structures in the posterior table of frontal sinus with direct access to anterior cranial fossa.

3. Name the hammock like structure depicted

4. Identify the suturing technique depicted in the picture.

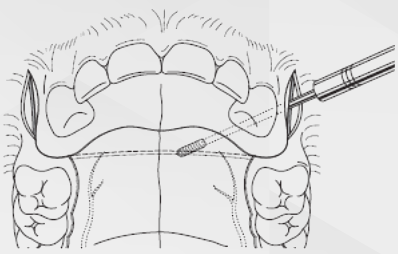


5. Name the surgical technique depicted



6. Skin SCC arising in burn or irradiated area

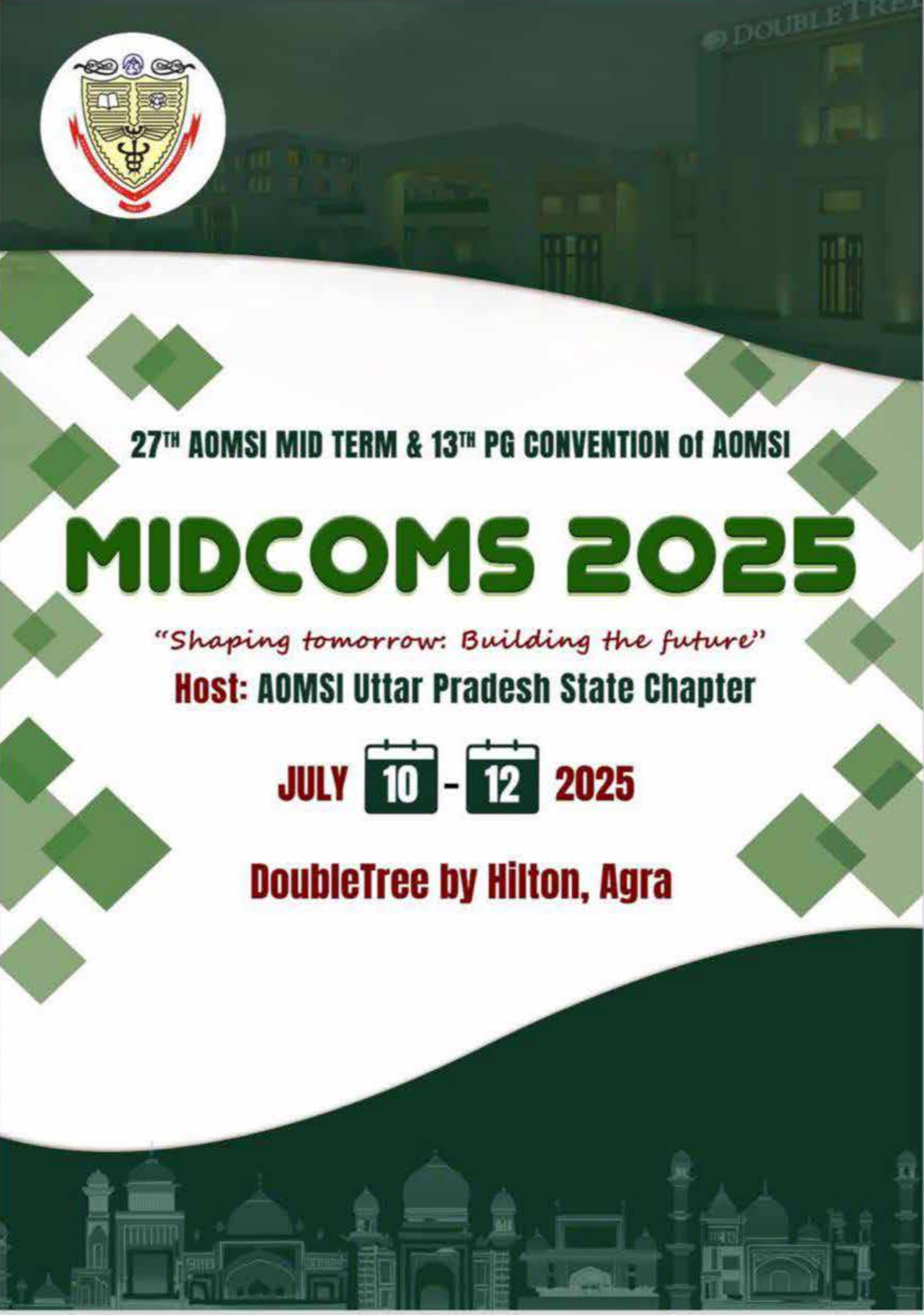
7. Which type of osteotomy technique has been depicted ?



8. Excessive resorption of anterior edentulous maxilla due to opposing forces of anterior mandibular teeth

9. Identify the type of implant technique shown

10. Collection of pus in bone due to hematogenous spread of bacteria

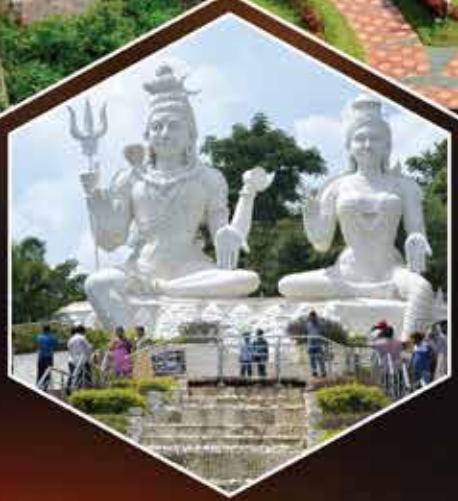

27TH AOMSI MID TERM & 13TH PG CONVENTION of AOMSI
MIDCOMS 2025
"Shaping tomorrow: Building the future"
Host: AOMSI Uttar Pradesh State Chapter
JULY 10 - 12 2025
DoubleTree by Hilton, Agra

49th AOMSI ANNUAL CONFERENCE

11th - 13th DECEMBER - 2025

Visakhapatnam, Andhra Pradesh

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