

March - April 2023 Issue | Volume - 2, Edition-3







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#### From the desk of the President, AOMSI

Dear Colleagues,

International Women's Day is celebrated on 8th March every year worldwide. It is an occasion to celebrate the

contributions and accomplishments of women. Together let us renew our resolve to empower women.

The multifaceted role of a woman in the society unsung in the past is now being recognized more and more worldwide. Today she looks ahead of her traditional roles and aspires to be independent.

It is heartening to see a large number of women taking up Oral & Maxillofacial surgery as their career a field which was dominated by men a couple of years back. Their presence is well noted in academics, conferences, podium speakers, chairpersons, course directors etc. I am sure in near future they will occupy important positions in the decision making body of the our association.

International Women's Day is also an occasion to salute all those who are dedicated to the cause of women's empowerment and their upliftment.

Looking forward to Maxfact issue dedicated to International Women's day.

Jai Hind

**Dr. Vikas Dhupar**President, AOMSI

# FROM THE HONORARY GENERAL SECRETARY



Dear Colleagues,

International Oral and Maxillofacial Surgeons Day on February 13th was celebrated with zeal and enthusiasm all across the country. The theme for this year is "Maxillofacial Trauma: saving lives saving faces, wear seatbelts wear helmets". The meeting with the Hon. Minister of Road

Transport and Highways of India was fruitful. He appreciated our efforts and, in a recent podcast, even mentioned that the doctors are creating awareness among the public. This has caused a ripple effect and strengthened our cause. We are hoping to make a big impact by boosting collaboration and interdisciplinary approaches and making maxillofacial surgeons an indispensable part of trauma management across the country. It is the responsibility of every maxillofacial surgeon to keep the higher purpose in mind and keep working towards the betterment of our country. There is an opportunity for us to be more proactive, and whenever there is an opportunity, preach and teach the public and citizens about trauma awareness. Wear helmets and wear seatbelts.

The theme of International Women's Day 2023 was DigitALL: Innovation and Technology for Gender Equality." We have dedicated this edition to the wonderful women surgeons of the country, who are always amazing. We have interviewed four phenomenal women who have been living legends. Their lives inspire many. The candid conversations are one of the highlights of this edition.

The vision to make our specialty a household name is a mighty endeavour that each one of us has to endorse through continued support of all the programmes and activities of AOMSI.

#### **Dr. S Girish Rao** Honorary General Secretary, AOMSI

#### **MESSAGES**

# FROM THE EDITORIAL TEAM

#### **Dear Readers!**

#### Season's Greetings...

On behalf of editorial team of Maxfacts 2023, once again we extend our warm wishes to all of you. It is well said-

"When women are given the right tools to succeed, they can create incredible futures, not only for themselves but also for those around them".

-Meghan Markle

This edition of Maxfacts is dedicated to Women Maxillofacial Surgeons of our prestigious association. The edition specially covers four living women legends of our branch in spotlight who shares their journey and experiences with all of us as women Maxillofacial Surgeons. As their were flurry of great activities on OMFS day by various chapters as well as we dint received activities from few chapters we distributed activities in last and this edition. We have covered activities of OMFS Day we received till date of publishing this edition.

We welcome talents of our young guns in talent corner. In coming issue we will be highlighting about AOMSI Master Class and MIDCOMS. Hope to meet many of you at Loni.

Thank you all!

#### **Team Max-Facts!**

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# LEGENDS OF MAXILLOFACIAL SURGERY



#### Dr. Nanda Pai

When I started out during 1988, women were not appreciated. In fact when they knew that we were the toppers, lot of people tried to dissuade us. It was totally a Mans world that time, A very few females to take up Surgery but I was so passionate about it. In 3rd year I knew that surgery is what I wanted and I worked towards it I think it's a team effort. You can't be at the helm all the time I think beyond the point you should just step back and let the younger generation take on. I have found my calling. I am into haemophilia care. These haemophilia patients are very poor. I manage oral care for a lot of patients with bleeding disorders.



#### Childhood is every human life's precious time. How was your childhood growing up what were the instances that made you choose medicine as a profession?

I wanted to get into medicine but I didn't want to burn midnight oil. There was a dentist in my building and I looked up to her and felt dentistry may be a good choice; not too many emergencies plus I like to do a lot of extra curricular activities as well. The first person I met as I entered the dental college was Dr Neelima Malik because she was a friend of the dentist I knew. I was very impressed with what she was doing and I think somewhere that led to my entry in oral surgery. I didn't get into the regular batch there was some problem and I lost a term. It was a blessing in disguise losing 6 months because I used to read up everything and answer all the professors.

We are all walked and handheld to be great surgeon and great human beings by our teachers and mentors their mentors who you look up to and who shaped your life?

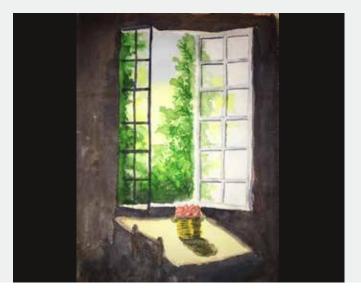
I think my grandmother was really something; she was a self made woman, forward looking

beyond her times and always pushed me. She thought I was a star all the time. She said you are the best and I did my best to prove her right. My mother wanted to be into medicine but got married very early so she always used to see her in me and fulfil her dreams. In Maxillofacial Surgery it was Dr Khanna. Although he was not my guide, I learned a lot under him. Dr Neelima Malik was someone I always looked up to. Dr Chintamani Kelkar was also my mentor. I just loved the way he would operate; very beautiful and picture perfect.



## What is your second love after maxillofacial surgery?

I used to dance. I trained in bharatanatyam and kathak. I sing too. I have started painting now and do a lot of water colours. I love to travel the world. Switzerland actually wonderful and I love Italy too. I had been to Scotland when I was a TC White scholar and I loved travelling that part of the world.



Which is the most challenging case you are handled and what is your case which gives you most happiness and you wish to share any anecdotes about your journey both professionally and personally which have been turning points in your life?

I had a couple of male friends who encouraged me to take up oral surgery when I was studying. Some of our male friends can judge and see our patience and capabilities. I think as women we have a knack of listening. Men just take decisions looking at the case. I'm a good listener. I will tell you how I came into haemophilia care. There was one patient who was referred to me. He was playing in school, fell and on the face. He bled and had a huge clot. They had come but the haematologist didn't pay much attention because it was an oral bleed. It was around 3:00 o'clock when everything starts shutting off in the municipal hospitals. I gave him a pressure pack. The father just broke down. A strong tall hefty man just broke down and he fell at my feet and said - you are the one who can save my child! It was in the corridor and people walking. He said just save my boy, save my boy! That just shook me. He was undiagnosed at that time and his counts had gone down significantly since he had bled overnight.



It was during Ganesh chaturthi in Mumbai. This boy got discharged around 10th day. They came and met me again and now every year this boy during his exams he calls me, he comes and meets me. He recently finished his B.com and sought my blessings. It's a small thing but that can make such a big difference to a person and this incident is really touching.

What are your thoughts when you enter the OT done the glove because I know he should we should all focus on and we all have to possess some skill sets but apart from technical knowledge that we have to you know we have to be good at what we do what are the skills what are the few things that we need so that we take care of our patients better?

I have already performed the surgery in my head so many times and whether I should do it this way or that way. I am looking at the anaesthetist a lot of times whether everything is fine. I work with a lot of BDS students and a lot of times they feel giddy. So you need to alert and aware of your surroundings. Some of them are trained so well they can do the procedure as good as me now. I thoroughly believe in a good follow up. I do it all the follow ups myself I never give them to anybody. I feel it is very important.



Your contribution to our association as the joint secretary of AOMSI has been immense. You have seen it grow from the past 50 years. What were the challenges you faced while you were the joint secretary and how was that journey?

No one ever thought I would be able to compete. It was totally male dominated. I was an EC member in 2000 and we had a conference in Leela, Mumbai. I had worked a lot for that conference and that's when people had known me because I was in the conference committee. I had got the maximum votes is what I was told. It was not too much of a competition that time. Now, there are about 40 people for 10 seats. Nevertheless there was voting so I was an EC member once and joint secretary twice. My general secretary was very good, Dr George Paul who was very supportive. It has been a good journey and I really like working for the association and almost always think about what best we can do what more we can do. I have seen it grow during banquets we used to be 4 or 5 ladies and if it is far off, many times it was so scary being there when people start drinking. I attended every conference so far except for the COVID years. I won the Ginwala trophy for the best paper as a student and as a delegate.

## What keeps you going and what do you wish to tell the youngsters who want to take leadership roles?

Not very easy. But when I treat poorest of the poor that gives me so much pleasure. I remember I had done huge Verrucous carcinoma left cheek with local flap 10 years back. She was 89 year old and didn't have kids. A guardian was looking after her and they were not very keen to do the entire gamut of the cancer therapy. They said, Madam there is nobody looking after her. Can you do something? I just excised it I closed the flap. Every year she comes to see me. She touched

my feet! They come with small gifts, fruits, ghee and home made snacks. I remember when I was a 2nd year student, I had performed a Cald well luc for the first time. We had a lunch planned for residents after that. I had just finished the surgery shifted the patient in the ward and left. By the time I came back, my boss was so angry that I did the surgery and just left the patient as had a little bit of pain. He shouted at me so badly in front of the patient. The patient was so upset. He used to sell luggage. So, I remember the last day when he was getting discharged he got a huge suitcase for me and made sure that he gave it to me in front of my boss and told me that I had done such a good job. I mean it's so touching. All the other things costing lakhs of rupees is nothing in comparison to these small gestures of patients. Being human is the key; a little drop of water maybe in this whole ocean.



# The younger generation especially the women aspire to be as accomplished and service oriented as you in every way. What would you like to tell them?

I think get to the basics first. Don't think of the larger things. If you do the basics right you will get there. As I'm doing more and more, as I'm aging, I realise that you should learn to say no. Not everything is possible. Instead of doing something bad I think you have to stop and tell

them that this is the maximum we can do. Don't overdo and mess up with the patient. Be sincere to what you do and everything will go well. Be sincere to the patient, be sincere to yourself. Think of the patient as family. Lot of male colleagues will try to pull you down, but that's okay go on. God is there and as long as you do the right things sincerely you will be rewarded.



## How do you see healthcare in India and the world changing over the decade?

Since 1988, I have seen a sea of change. I wish that my training was better. It is better now, of course. I feel a lack in medicine, anaesthesia, interdisciplinary education etc. We did not have any rotations. I wish we had fellowships during our time. Whatever we learned in those 2 and half years, that's it. There are pros and cons. We were fewer of us, so we were more in the limelight. There are too many of you and there is too much of competition. The best part is, I see so many females in the speciality. They are equally passionate and doing equally well. Hands off hats off! So many newer things coming. We are headed in the right direction and we are doing good.

## Donning so many had professionally and personally what do you think life is in its essence?

Life is to be enjoyed. Life is to be enjoyed. Live in the moment. You can't be stuck at the pinnacle all the time. You have to move on let the others reach there. Your time will come and go and you have to now take a back seat and let the younger generation move on is what I feel. It's a wonderful journey spanning 3 decades and each year or each phase has been different in every way!



# What message would you like to give our young women surgeon in particular and everybody else in general?

We have the knack of for listening. So, listen to what the patient says. Do a good surgery but follow ups also are very important. Many times, the patient not only talks about the disease that they have, but also about a lot of personal problems, which they would like to share with you as a woman. If you listen to them 5 to 10 minutes, they are indebted to you all their life. They will listen to whatever you have to say. Look at the patient as a whole, emotionally physically and give them the confidence and create a connect. They don't mind waiting for you for hours but they will speak to you and come specifically for you. They will wait for you because you give them a patient hearing. I think that's important. We have it in our system. The men are always in a hurry. They want to move on to the next patient and next patient. But we somehow catch what's going on in the patient's

mind. We can multitask. It has always been swimming against the tide for me. I had to. I was initially put into a small peripheral set up and not in the mainstream. I had to always fight and prove that I am equally good as a maxillofacial surgeon. They used to tell me; you will get no help; nobody is going to come. But I have always thought that's fine. We should never give up never ever give up. Some solution will come and there will be a light at the end of the tunnel. As soon as you find a little leeway, just push the door open.







# LEGENDS OF MAXILLOFACIAL SURGERY



#### Dr. R. M. Lalitha

# Childhood is every human life precious one how was your childhood growing up and what were the instances that made you choose medicine as a profession?

I was very good in writing essay. I wrote essay that when I grow up I will become a doctor; I want to go to villages and make medical services available. My Madam read that article in the class and she said that you have written this from your heart, it is very good and I will bless you to become my doctor.

# How was your journey in dentistry and what inspired you to take up maxillofacial surgery?

I had told my mother that I am going to become a doctor. I was highly determined about it. But we had a very large family and my mother felt that she will not be able to fund my education. She was a teacher and she used to take tuition to children. I told my mother don't worry ill take classes and help you. I taught children, collected money during my summer vacation and gave it to my mother. I told her that if I join medical, please pay my fees with this. That was how determined I was. Unfortunately, I missed merit

by one mark. I decided to start studying for the following year. Around September that year, my cousin came from Africa and his family friend was a dentist. She convinced me and my mother to pursue dentistry. We brought an application form. I went to the interview. After a week I got an intimation that I got into dentistry in Government College.

After completing BDS, my friends encouraged me to open a clinic. I was just looking after the clinic and then there was a resident post open in KIDWAI. We used to go walking; there was a small bylane which lead to KIDWAI. I applied for the post and they asked me if I mind working with cancer patients. I didn't know anything. I met Dr Kumaraswamy there. He was an inspiration. From that day, I saw him work, the way he handles patients, the way he takes care post surgery and then his enthusiasm to teach me. He encouraged me to learn everything and exposed me to major surgeries even as a BDS student. I was the only resident there; so I used to work in all the departments, ENT, general surgery, medicine, radiotherapy etc,. this is when I decided to take up maxillofacial surgery. Dr trained Gopinath was first hemimandibulectomy resection and maxillectomy. He taught US resection,

maxillectomies, mandibulectomies, local flaps like DP and PMMC. I then took up PG in maxillofacial surgery in GDC. Dr Kumaraswamy was extremely happy. I had presented a lot of papers in conferences during my time in KIDWAI, wrote articles for journals and had the opportunity to present a paper in Singapore in the first international conference on oral cancer. Dr Kumaraswamy and I presented a paper in Singapore.



I came back and then I got married. My husband was very supportive. He was also doing CA. We made a deal; first I will finish the PG and start work and then he completed his CA. I joined KIDWAI but I could not travel as it was too far. I took off for one year to take care of my child. After one year I joined M S Ramaiah Medical College as the first Oral Surgeon of the institution. I was given the responsibility to establish the department in the Dental College. Got BDS and MDS recognition. I started in the year 1992. Frankly I didn't know anything about trauma as I came from a training of oncology. I called my friend Dr Kishore Nayak to guide me to treat trauma and plating. I was the first person to start subcutaneous suturing. My colleagues were very accommodative and friendly. Many trauma cases started coming in. I was keen on doing oncology. We coordinated with general surgeons and plastic surgeons and built a team. We started operating cancer cases from the training I had received in Kidwai. In 2002, we had to set up the PG department and it was very

very difficult and demanding for me. My mother and my mother in law was there behind me in all my success. I should acknowledge Dr Kumaraswamy as he put my name as a guest speaker in conferences and slowly people started recognizing me.

I won the TC White scholarship. I went to Glasgow and had a very good experience in the Southern General hospital where the Glasgow coma scale was introduced. I met few wonderful surgeons and learnt few new techniques. Back home, we conducted the first Indo Spanish workshop in maxillofacial surgery in the year 2002. The delegates appreciated our unit and for the first time they started using platelet rich plasma and fibrin. Post this we started the going to every conference and presented papers and published them. In 2003 we got PG recognition in MS Ramaiah dental College. Im very proud of how far we have come in establishing a wonderful unit. Many times, the ambulance used to come home to take me and my neighbors used to get alarmed. I explained to them about the demands of my profession and they were even kind enough to take care of my children. I had a lot of family problems but we have to be very courageous to handle them. I join the NGO - Karnataka Cancer Society, where I promoted the need for tobacco education propaganda. I used to take part in rallies and camps. I feel, whatever I know I should share with others and they should come up. Only thing we need the little discipline.

My mentor is Dr Kumaraswamy and even now I keep in touch with him about what is happening with my life and profession. He used to tell me whatever happens keep it to yourself. When things go wrong. don't panick. Take others opinion and always be willing to be a part of team work. I always look upto him. His attitude of sharing knowledge is inspiring. He said whatever you have learned you have to teach others you should not keep it to yourself. Even today I look up to him as my teacher and mentor.

### What is your second love after maxillofacial surgery?

I am very good in antakshari. Singing is my passion. I learn singing and write poetry. I want to publish my writings in the near future. I am learning the Bhagavat Gita too.

What is the most challenging case your handle till now which gave you most happiness in terms of outcome and do you wish to share any anecdotes about your journey both personally and professionally which were turning points in your life?

One of the most challenging case we had, was one lady with a cardiac problem. It was a high risk case. Post cardiac assessment, we decided to take it up. She underwent resection and neck dissection. Her son told me that I want my mother back and I have full faith in you. She came through very smoothly and her son was so happy that he brought one basket of vegetables and shared it to the entire department. We have faced many trauma cases which were challenging. I always give due regards to my department staff who have been with me throughout.

What are your thoughts when you enter the OT? Apart from the technical skill set that we should have, what are the other things that we need to know to take care of our patients better?

When we want to treat somebody, the doctor has to be in good shape. I am very particular about my diet and my morning walk which help me to be in a very good state of mind. I pray God and chant some mantras like Mrutyunjaya mantra and Rama mantra before my surgery. Once we start, I do not think about anything else and just focus on what has to be done in the best interest of the patient. Smallest of the things you have to do yourself. For example, suture removal, you have to make sure

everything has healed well. I should not say I'm the boss. You be a leader and guide your team.



Your contribution to all the cancer patients across country and especially Karnataka through your work for Karnataka Cancer Society has been immense. What was some challenges that you faced?

It was very challenging because the first of all there were no funds. I formed teams so that the end result for the patient will be good. I established cordial relationship with general surgeons who were very helpful to me. In cancer treatment, nursing care is crucial and I trained the nurses to take specific care of our patients who were operated for oral cancer. Believe me, every student wanted to learn surgical management of oral cancer from me. There were no fellowship programs at that time.

#### How do you think healthcare in India and the world changing over the decade and where are we headed to in the future?

With the advent of technology, healthcare has advanced very well. We are heading towards giving excellent treatment to those who are suffering. My aim is to listen the suffering of humanity and respond to it and make a positive impact, then I will become good doctor. In the world of course healthcare system has doing very good service.

# Younger generation, especially a lot of women look up to you and wants to be as accomplished as you in every way. What is the legacy you would like to leave behind and what is your vision for the future of maxillofacial surgery?

We have to do multitasking. I always tell my students to give importance to your family and then give importance career also balance both. Sometimes you have to sacrifice something to get something. Be self-sufficient. It is very important to learn a few skills that will help you financially. Don't do something at the cost of the family because we as women have to take up the responsibility of being a daughter, wife and mother. So many times, I have felt I will leave this job and go away. Then, I have reframed myself through lot of books, courses and forums with different people. Be friendly with your colleagues. They really appreciate good work. Personally, we should be free from ego issues. Always learn to be a in a team. I always tell handover and share whatever we know. We should not let the knowledge die with ourselves. Only then the legacy will continue. Some books that have changed my life are light from many lamps, monk who sold the Ferrari, the power of prayer, the power of subconscious mind, chicken soup for the soul etc., I want to tell everyone if you can you chant one verse of The Bhagavat Gita every day, it will transform your life.



#### What do u think is the essence of life?

Life is like cucumber on a creeper. Even though it can fall anytime, it held on to it by faith.



# LEGENDS OF MAXILLOFACIAL SURGERY



#### Dr. Mounabati Mohapatra

Childhood is every humans precious time how was your childhood growing up and what were the instances which made you to choose medicine as a profession?

I was born in Cuttack, Odisha. I do not know how I developed liking for medical profession. I did my BSc with Zoology honors. I was preparing for medical entrance and there was advertisement for bachelors in dental surgery. At that time there was no dental college in Odisha. When I applied, I got selected and did my BDS from Dr R Ahmed Dental College, Kolkata. I joined in 1973. People used to say dentistry is a very difficult, it is meant for men. There were very few girls and some even left midway. I took the challenge and completed my BDS in 1979. I was the best graduate of dental surgery from Calcutta university and honored with gold medals and merits. While I was doing BDS, I developed a liking for maxillofacial surgery. There were very few colleges which offered PG program. I joined state government back in Odisha. In 1988, as a central government joined postgraduation nominee, maxillofacial surgery in GDC Bangalore. MDS in maxillofacial surgery at that time was 2 years.



We are all walked and handheld to be great surgeons and great human being by our teachers and mentors so who are the mentors who shape your life?

Professor Hebballi was my mentor from whom I have learnt Maxillofacial Surgery. He was a great man. Dr JP Shetty was the assistant professor at that time and he was very encouraging.

I myself groomed as a complete maxillofacial surgeon once I came back to Odisha after MDS. I

started doing everything by myself, correcting myself on the go. I have taken responsibility, learnt from book reading and took risks.

I am the first woman maxillofacial surgeon of Orissa. I am also second maxillofacial surgeon of Odisha state.

Initially it was oral surgery, then changed to MDS in oral and maxillofacial surgery. During our period in Orissa there was no maxillofacial surgeon. That is why I choose to became one. So that I can provide some health care over the face and jaw. There was no separate department for dentistry. We had a dental wing in the medical college. I started providing service in trauma as it was prevalent. We started entering the casualty and to different departments approaching them to send cases and showing them our work. One of the first cases was a severe poly trauma. This boy fell under the wheel during the Jagannath Rath Yatra. Apart from myself, we had a plastic surgeon in our OT. There was no mechanical drill, no motor, no plating system. I did the transosseous wiring. I also had a hand drill which is like an antique piece now. The surgery went on well and by the time we finished it was 4:00am. There was no help for me. I had to do everything on my own. The journey was a real struggle and very tortuous but I made it and was successful. After that people started recognizing me. There is no assistant as a maxillofacial surgeon because there is no PG, no resident. I have taken orthopedic, plastic, general surgeon as my assistant.

Which is the most challenging case you have handled which gave you the most happiness and would you like to share any anecdotes both in your personal and professional life which were turning points?

I am not married. As a single lady, I have really struggled a lot. I was posted in the Dental

department of Medical College. I started posting cases and I asked the ENT professor Sir if he can send his to assist me in the OT. He agreed because they were also interested to know and see what I am doing. The most challenging and the worst experience of my life is that when I started doing one TMJ ankylosis for a 12 year old girl. Till today it is the nightmare for me. The anesthetist told that she will try blind intubation. She went on administering halothane for relaxation. We had no monitor. One person used to administer the drug and one would watch the pulse. They missed out and that girl expired on the table. I couldn't have my food for 7 days. A normal child was jumping in the ward the previous day of surgery had died on the table. I thought why did I do the case. She was normal she was leading her life. I stopped doing ankylosis for a few months until I got one anesthetist whom I can rely upon. I then started doing ankylosis with tracheostomy because there was no fiber optic and all were not very efficient for blind intubation. With nil mouth opening or one finger mouth opening it is not possible.

Regarding the pathology cases that time in Orissa, there was no oral pathologists. I used to take the biopsy and run to the general pathologist. I used to sit with them, discuss the cases, show Shafers oral pathology book, tell them my provisional diagnosis and request them to give me a definitive diagnosis. Sometimes the clinical and pathological diagnosis used to differ. I'm going to cut the mandible I am going to cut the maxilla so without a confirmation how can I operate on a body part. I used to think twice and again I have to discuss or to send another pathologist. I was teaching them and requesting them to please go through this book and read this, this is my provisional diagnosis as per this radiological diagnosis and clinical diagnosis.

I have many challenging cases but recently I did one find fibrous dysplasia in a girl involving both maxilla mandible and almost involving the orbit

both sides. She had been to many big hospitals. They operated once but failed as it was involving the optic foramen. She was almost blind, not going to school because she couldn't see the blackboard, couldn't read etc. She came to AIIMS. By the time they had spent all their money. I had a senior resident. I involved the ophthalmologist, neurologist neurosurgeon because it was totally involving the optic nerve. We had taken CT scans, 3D models and discussed that with the patient many times explaining the risks. We performed the procedure with lots of care and that is shaving of the bone very slowly and protecting the orbit and you will be astonished that it was uneventful. They were so happy. She started going to school and lead a normal life.

I joined AIIMS in 2013 after I left the state job. There was no team earlier. I used to operate single handedly. If I had a difficult case or if I am unable to diagnose, I didn't know who I should send the patient to because there is no maxillofacial surgeon in Odisha. I used to go through the books many times and then learn. I knew I would get help in Bangalore but I couldn't send poor patients so far. In the midst of all this, I have to take care of myself, look after my food and everything. My parents and my siblings are actually a great inspiration for me. I am the last child of my family.

I completed my journey and I retired from AIIMS Bhubaneswar in 2019.



#### What are your thoughts when you enter the OT and Donn the glove? We all have to possess technical knowledge which is a must but what other skill sets should we all have to take care of our patients better?

When I enter the OT I think that, that person has submitted his/her body mainly the face, which is the most vital part of the body with lots of faith in me. I must give my 100% to bring back normalcy. I must say that as surgeons, the most important thing is humanity. We should have a humanitarian touch the patient. I pray God and then start doing my surgery. Without Almight's help we can't do anything. Technical knowledge is very important but on the top of it, we should soft touch and humanitarian consideration not only during surgery but before and after surgery.

### What is your second love after maxillofacial surgery?

I love gardening, I love nature. I love to learn music and reading scriptures. I also do a lot of philanthropic work. I have been attached to a cancer palliative care - Amritdhara. It is a charitable trust so I am in involved with that.

#### How do you see healthcare in India and the world changing over the decades and where do you think we are headed to in the future?

Lots and lots and lots of change. From no technology to high end 3D printing, we have come a long way. Odisha is one of the health hub. So many private dental colleges and corporate hospitals have come up. I think we should utilize the technology and we must go ahead. They are doing heart transplant and facial transplant. Many research works are going on. In india, we should improve in our research. Your contribution to our association and the whole specialty of maxillofacial surgery across

India and especially in Orissa has been immense.

## What keeps you going and what do you wish to advise the youngsters who want to take up leadership roles today?

I have faced a lot of challenges from the time I entered BDS. I had completed BSc. I could have taken up MSc but God wanted something else from me. I should give some service to the humanity which is a noble profession. So I didn't want to guit at any point. As a woman, people will think she cant do anything. After I became a Maxillofacial surgeon, I decided ill do only specialized maxillofacial surgery. There are so many challenges even now with a lot of competition. But still, avenues are more now such as craniofacial surgery, onco surgery etc. If you are efficient and do a good service to the patient, they will entrust you. My advice to the youngsters is keep doing surgeries, but when you cannot do, refer. You might not have the experience to take up a particular case. Ask your seniors and juniors. You should provide some contribution to our association. Many women have entered into the association they are contributing. In the near future I wish to see more women taking higher positions in the association.

Remember one this, Basics will never change.

# The younger generation as far as to be as accomplished as you in every way what legacy would you like to leave behind and what is your vision for the future of maxillofacial surgery?

One should be skillful, very soft touch, very sincere. Sincerity has never been unpaid. That sentence I have remembered all throughout my life. The result will come; may not come overnight but keep working. Youngsters did really well during COVID. Always be sincere and leave the rest on Almighty, definitely one day result will come.

## After so many years of donning multiple hats in the profession what do you think is the essence of life?

Essence of life if you ask me, is my profession. I have given 100% of my life for the profession. I took off for a few years to take care of my parents as they were bedridden and got their blessings. Now my thoughts have totally changed. I dedicate my service for the humanity. Now also I am involved with Amritdhara. Some spiritual gain in my life along with the service to the humanity is what I am looking at. Medical profession is a global profession so we have to serve and love them that is the essence of my life. My advice to all my juniors you serve and love and along with that you have to see your family to you cannot neglect your family definitely because without the family support may be your husband may be your children may be your parents may be your brother's may be your sister's whoever without that difficult to achieve.

I'm the first or second maxillofacial surgeon even from Calcutta. I am the second woman dental surgeon in my state. I am the first woman maxillofacial surgeon in Odisha. I am very happy when I see the girls in the specialty, I feel very proud. I see the girls are outnumbered the boys everywhere all over the world. I was just starting my 3rd year clinics; one man came and sat in the dental chair and refused to get extraction done from me. My teacher came and insisted that I should do the procedure and he got it done. Now people prefer to go to the girls I'm sure. I think that tender loving care is there.





# LIVING LEGENDS OF MAXILLOFACIAL SURGERY



#### **Dr. Neelam Andrade**

Childhood is every human life precious one so how was your childhood growing up and what were the instances that made you choose medicine as a profession?

My childhood was very good. My father was in government service and his dream was to see both his children that is myself and my brother either get into medicine or engineering and have good education. My brother got into medicine and he was like an inspiration for me and I wanted to follow in his footsteps. I missed medicine by 1% and therefore the next choice was dentistry. My inspiration to take up dentistry was because I wanted to get my tooth straightening done. I had a very crooked set of teeth and my father could not afford the one treatment. On consultation. orthodontist had given an estimate of ₹2000 in the 1970s. I decided I should get into medicine or dentistry and done at free of cost. That was another aim for me and the moment I got into dentistry, the very first day I started my orthodontics and finally I ended up marrying an orthodontist and today my elder daughter is also an orthodontist. When I look back, hardships become the driving force for you to achieve what is not possible otherwise. My

husband encouraged me to take up oral surgery. I had got university highest in periodontics and second highest orthodontics and oral surgery. I walked into Nair dental college that has a legacy of Dr Ginwala who is the father of oral surgery in India. Dr Khanna, Dr Kapadia, Dr Malik who were all very big names.



# We are all walked and handheld to be great surgeon and great human beings by our teachers and mentors so who are the teachers who shaped your life?

I had numerous mentors both in India and abroad. It was Dr Khanna, Dr Kapadia, Dr Malik. I would assist Dr Khanna in all the surgeries and a lot of work in the department under his guidance. Dr Kapadia was my postgraduate guide so there are lot of things to learn from him as a human. He taught us how to be very meticulous in planning, meticulous in history taking etc,. These things are highly essential and looking into the basics is the key. Dr Malik was the only female surgeon in our department so that was an inspiration. Dr Khanna was very courageous and do a lot of major surgeries. So looking at him, I felt I should also be able to do major surgeries some day. I got transferred for 2 years to KM hospital during my tenure as a lecturer. Plastic surgeons there were another inspiration to me. I went abroad to learn, where Dr Moore was a huge inspiration that I learnt all my orthognathic surgeries over there. We used to cater to multiple small hospitals around Glasgow. Glasgow had a very high rate of trauma cases. Dr Ashraf and Dr Jeremy were registrars with me. We used to go late night hopping hospital to hospital operating trauma cases. My next posting was in Canonsburg. As an SHO I used to cover all peripheral hospitals. I did my first orthognathic surgeries with Dr David Cooper. He is to operate on the right side and make me do all by myself on the left side so for every case so that was great learning ground and great inspiration. How they worked on the patient, how they looked into each and every details, planning etc,. All that learning came from them. They were like my mentors there. My basic principles of trauma was learnt from AOCMF where I was also trained as a faculty.

In life, my mentorship came hugely from my dance teacher. She taught me about being disciplined and pursuing consistency which

helps you in life and anything that you do and practices which help you to get perfection. These are the qualities I adore. I have been training with her since 2007. I have realised that you can keep going back to the basics. As you do more and more and more of the basic you get more and more perfect in your advanced work. Consistency and punctuality is the key. I have never seen her coming late for any class. There is no wastage of time. She focuses fully into training no matter how many times she has to repeat. Her favourite word is "and again". She is an inspiration for me. Everything that you do never end; its and again. If you keep that in mind, if you do the same thing over and over and over and again you will learn more of it and get more confident and more perfect in your work. The teacher makes a big difference and if you can have an impact on your student in the right way, believe me they will mould into something so much better. It's what you put in your teaching. That is how your students will grow. They are watching each and every step, each and every word of yours. It is like how you bring up children. You want them to have the right principles and the right values in life. The teacher should always remember that the student is watching you; what you are, how you do, how you work, how you look at things is what they are going to pick up. In the profession you see them grow because, they will be putting their own self into it, their own talent, their own qualities and their own part into it. Imbibe correct values in life and in your profession and they will do wonders for you



# Which is the most challenging case you have handed which gave you the most happiness and do you wish to share any anecdotes about your journey which was turning points in your life?

There are plenty of cases. A well treated ankylosis case along with the esthetic change that you give in the patient, goes a long way in making the patient happy. They are sad because of their faces are badly affected and they have no mouth opening. You give them the mouth opening and esthetics, that makes a huge difference in their life. With my distraction procedures, I am able to correct their sleep apnea, facial asymmetry and also give them a good mouth opening without relapse. That makes a huge difference. The youngest child with Pierre Robin case which I have treated with distraction for was only one and half year old. Once the distraction was done, the child was relieved of sleep apnea. The parents were relieved that a child is sleeping comfortably now and she is not having the breathlessness and distress that she was facing and also looking good with advanced mandible so that makes a huge change. I would say any kind of facial asymmetry correction and a good mouth opening that you can give to the patient gives a very rewarding result and satisfaction from the patients' point of view.



#### What are your thoughts when you enter the OT and apart your technical knowledge what are the soft skills that we need to know to take care of our patients better?

One thing is that you always enter with a prayer on your mind that whatever you do the patient should have a good recovery. Always remember that it's not that just because you are a surgeon you should do the math there are times when you do the minimum and you get the best of result. It's not that you should go out of your way. You must know where and when to stop where and when to do just what is needed. It is very important to realise as you grow. look this is what is needed and I should be doing this; not over doing the things. Where you draw the line is essential. Planning is very very important because if you have not planned well you are going to sink and moreover you may have planned but how you are going to execute the plan. Planning may be great but execution is also equally important. Execute what you have planned. Respect the tissues. Put yourself in the patients position. If somebody is operating on me would I not want my tissues to be respected so that the healing is good. This will speed up the surgery and recovery. We should keep the end in mind. The more you injure tissues, it's going to affect the healing. Being very clear with the patient what you are going to perform is very essential. Being honest and informing the patient everything about what he or she going through is the key. It works on their mind and gets magnified. It has to be a very balanced kind of a talk. Give literature statistics so that they don't go in with a negative feeling and fearful thoughts. You have to be honest and at the same time friendly to the patient and make them understand in a way that is not like sudden hit to them. Acceptance and positivity should be reinforced. Don't discuss results in an unexpected way.

Your contribution to our association and the maxillo maxillofacial specialty worldwide as a leader has been immense what are the challenges you face and what do you wish to advise youngsters who want to take leadership roles today as a woman?

For a woman it is tough to get accepted. You have to remember that things take long but we have to keep pursuing and we have it in us. If you are bringing in a change, if you are speaking on an important matter, you will not get any immediate acceptance. You will have to prove yourself again and again. Therefore, do not lose hope. You will see that one fine day you will get the acceptance. Just be at it, for it and work for it; success will come.



The younger generation wishes to be as accomplished as you in every way. What legacy would you like to leave behind and what is your vision for the future of maxillofacial surgery?

Future is gold. It is great. Everything digitised and things are much simpler. Execution also becomes very essential now. You have to learn your basics well and know your procedures well so that even if somebody gives you everything

planned on paper and planned on cast and planned on the screen, how you execute is important. Technology has made everything so much easier to execute whatever is planned.

# After so many years of donning multiple hats both in the professional and personal life what do you think is the basic essence of life?

If you have a goal to pursue, you have to have determination and consistency and tolerance. If things take a little longer which they normally do for women, you have the goal in mind and work towards it. You have to learn balance in life. Work towards your goal but at the same time if you're going to have a family give equal importance to your family and to your job. Doing any one thing and being skewed is not going to give you complete satisfaction and success in your life. You got to balance on both to get the happiness success and satisfaction in life. You have to have some kind of soft skills in life so that that helps you face all the difficulties. Whether it is yoga, meditation any form of dance any kind of instrument etc,. Any kind of a hobby is necessary to help you destress in life and remain balanced. Taking a small holiday maybe once or twice in a year is also highly essential. You got to break from the routine. Otherwise, you will burnout. You won't know how to relax because that is essential. Of course your financial part. Unfortunately, I'm not great at financial matters but I have very good partner and he looks after that for me. But financial growth is also very essential. I think being literate financially also keeps the women go higher up because your secure. It is very essential that financially you are stable and you know you are able to look at your finance and also help it grow. One thing which I have realised I should have done is law. I feel knowing the law and knowing the legalities of thing is very essential. If any of the youngsters can pursue law offline or correspondence or online it helps you in life.

There are many instances where it is required. Therefore, having some knowledge of law, I feel is essential in life. I feel that is one thing which I didn't do and I'm not strong at it at all. To take care of yourself, your property, your job some knowledge of legalities and the legal side its very essential. I feel these things are important in life. Knowing the rights of the law for you as a citizen makes life easier.

## Do you think training abroad is as important as training in India?

As a country we are progressing further in a neck breaking pace no doubt. But some exposure abroad I feel helps you grow in your avenue. The way they look at things and the way they work on things the various options and the planning part. If you ge that kind of exposure, it will definitely help you. Even 3 months or 6 months exposure is very good or you can have shorter exposures in multiple centres now. For example, China and Taiwan, the way they manage condylar fractures is totally different from what we do we do. Therefore, if you could get exposure like basis and how they go about it and what is their documentation and they are follow up you get like ready information and then you could go come and implement the same in your practice.

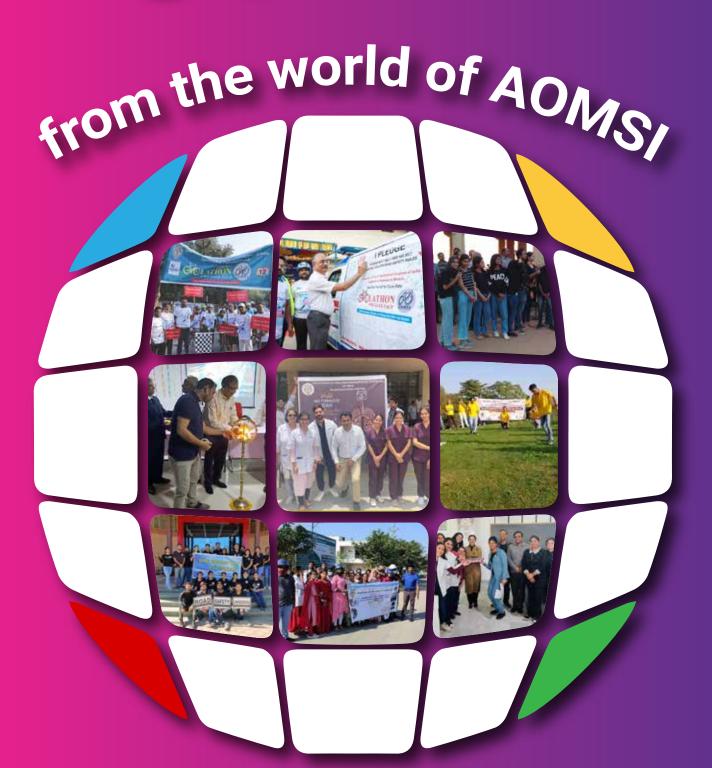


## What message would you like to give all our readers and youngsters?

Women are very good at what they do or at times can be even better because women go to more of integrities of things. They are more patient and they have a different touch of softer touch to things. The only thing is that it takes a little time. Be consistent in your focus to get to your goals and you will reach there someday. Do not get defeated. Work harder to reach over there. Speak your mind. Even though your way is different from the others. If you have a basis and you can justify that, be strong enough to put it forth and you will get the result one day. Do not weaken up. Just be at it and one fine day you will get what you desire in life and your goal.







#### February 2023

# TAMILNADU & PONDICHERRY

STATE CHAPTER





#### Association of Oral & Maxillofacial Surgery

# Tamilnadu & Pondicherry State Chapter Activities

#### **Pixels - CYCLATHON EVENT - CHENNAI**



A major cyclathon event was organized by AOMSI Tamil Nadu and Puducherry chapter in 8 regional zones of Tamil Nadu and 1 zone in Puducherry. Dr. K. Arun Kumar, Hon Secretary, whose brain child was this cyclathon program in close coordination with the zonal in charges set to stage a synchronized flag off the events in all

the 9zones - Chennai, Coimbatore, Madurai, Nagercoil - Kanyakumari, Salem, Tirunelveli, Trichy, Vellore and Puducherry on the morning of 12.02.23 to raise awareness on maxillofacial trauma, road safety, helmet seat belt use and to convey to the public the definitive role of maxillofacial surgeons in health care system. The event was presided by senior police officers, IAS officers, Members of medical fraternity and enthusiastic participation of students, faculty members and general public.



















## Pixels - CYCLATHON EVENT - MADURAI













## Pixels - CYCLATHON EVENT - TRICHY

















### Pixels - CYCLATHON EVENT - SALEM









### Pixels - CYCLATHON EVENT - TIRUNELVELI









### Pixels - CYCLATHON EVENT - NAGERCOIL















#### Pixels - CYCLATHON EVENT - COIMBATORE

















## Pixels - CYCLATHON EVENT - VELLORE



















#### Pixels - CYCLATHON EVENT - PUDUCHERRY

















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February 2023

# KERALA

STATE CHAPTER



#### **AOMSI KERALA**

In association with Oral & Maxillofacial Surgeons, Trivandrum OMFS Day Celebrations @ Shankhumukham Beach



**THEME** 

INVITE

# THE GOLDEN HOUR SAVING LIVES SAVING FACES

ROAD SAFETY AWARENESS INITIATIVE



Lead Coordinator

Coordinators

**Program Support** 



Dr. Teshaswini T

Consultant Maxillofacial Surgeon Sree Gokulam Medical College Executive Committee Member, AOMSI



**Dr. Benoy Stanley** 



Dr. Oommen Aju Jacob



Mr. Soorya Krishnamoorthy

Soorya Foundation PMS College of Dental Sciences And Research



**TSHIRTS** 



Welcome speech and introduction to Program



Address By Aomsi Kerala Hon.secretary

Dr. Akhilesh Prathap

### Street play by PMS Students



Address by MVI

Patients sharing post RTA experiences

Talk on importance of Helmets













**CERTIFICATE** 

**Certificates Distribution** 



Few Participants

Trivandrum Maxillofacial Surgeons and PMS College Students



# WEST BENGAL



### **AOMSI WEST BENGAL STATE BRANCH**

In association with Oral & Maxillofacial Surgeons of India International OMFS Day Celebration 2023





Haldia Institute of Dental Sciences and Research





North Bengal Dental College & Hospital





Burdwan Dental College & Hospital





Kusum Devi Sunderlal Dugar Jain Dental College & Hospital



Chittaranjan National Cancer Institute



Avinash Institute Of Craniofacial & Reconstructive Surgery



Apollo Hospital, Kolkata



Dr R Ahmed Dental College and Hospital



Guru Nanak Institute of Dental Science and Research



Peerless Hospital



Guru Nanak Institute

# RAJASTHAN





Association of Oral & Maxillofacial Surgery

## Rajasthan State Chapter State Chapter Activities

Date: 12th Feb 2023 | Time : 6:30 am



Saving lives saving faces

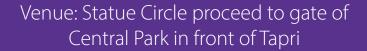




Awareness talk by oral & Maxillofacial Surgeons







# Road Safety Awareness Drive

Saving lives saving faces





Skit by doctors from Govt. Dental College, Jaipur



### MADHYA PRADESH



























## चिकित्सकों ने निकाली यातायात सुरक्षा रैली, नियमों का पालन करने दिया संदेश

सुरका रैली निकाती। इसमें सेंट्रिक रहाडर जनक सागर ,सागर सुकून कुमेन रोटरी कराब एवं ट्रैफिक पुरसस सागर ने सहयोग किया (डॉक्टर श्वेता भटनागर मैक्सिलोनेस्टिशक्त सर्जन एवं प्राप्यापक बुंदेलखंड मेडिकल कॉलेज ने बतायां कि ज्यादातर दुर्घटनाएं तेज गति और शराब पीकर चताने से और वाहन चाताने दौरान फोन पर बात करने से होती है। ज्यादातर लोग हेलमेट नहीं लगाते एवं सीट बेस्ट का प्रयोग नहीं किया जाता है । मैक्सिनोफेशियल



कुलदीप पाल, डॉ अंकुर जैन, डॉ शिवम रिखारिया, डॉ प्रिया वादव ने संदेश दिया कि यह चेहत आपका है, हेलमेट पहनकर इसकी खूबसूरती विपलापुरे, जो निवेचिता रत्याकर, बरकटार रहिषए ।आईडीर प्रेसिडेंट जी भीति सिंह, ठनु भाटिया उपस्थित थे।

सौजन्य चीमे, डॉ सूर्यकांत चीमे, डॉ प्रशांत चीमसे ने बताया कि सड़क यातायात नियमों का पालन कर हादसी को नियंत्रित किया जा सकता





### चिकित्सकों द्वारा निकाली गई यातायात सुरक्षा को लेकर रैली

सागर 12 फरवरी. मैक्सिलोफेशियल चिकित्सकों यातायात सुरक्षा रैली का आयोजन किया

उक्त रैली में सेंट्रिक राइडर क्लब, सागर सुकून वूमेन रोटरी क्लब एवं ट्रैफिक पुलिस शामिल रहे. डॉ. श्रेता भटनागर मैक्सिलोफेशियल सर्जन एवं प्राध्यापक द्वारा बताया गया कि प्रत्येक वर्ष दुनिया में एक विलियन से ज्यादा एवं भारत में चार लाख से ज्यादा सड़क दुर्घटनाएं होती हैं. डॉ. प्रशांत चौबे ने बताया कि सड़क यातायात नियमों का पालन कर कर काफी



हद तक सड़क हादसों को नियंत्रित किया जा सकता है.

इस अवसर पर प्रमुख रूप से डॉ स्वप्निल सिंघई, डॉ सीजन्य चीबे, डॉ सूर्यकांत चौबे, डॉ कुलदीप पाल, डॉ अंकुर जैन, डॉ शिवम रिछरिया, डॉ. प्रिया यादव, डॉ. त्रिदीप गोस्वामी, डॉ. समीर जैन, डॉ. निकिता पिंपलापुरे, प्रीति सिंह, तनु भाटिया आदि उपस्थित थीं.

## ANDHRA PRADESH





### Association of Oral & Maxillofacial Surgery

## **Andhra Pradesh State Chapter State Chapter Activities**

Rally on 12/2/2023 in wearing helmet& Seat belts while driving to minimise injuries while driving in Vijayawada. -Traffic DCP Mr Khadar Basha came and inaugurated the event 3K walk from Indira Gandhi Municipal Stadium to Siddhartha Academy.

On the same day in Vizag, local Maxillofacial surgeons along with two dental colleges Gitam & Anil NIDS have conducted awareness rally along Beach side.







### **AOMSI ANDHRA PRADESH STATE BRANCH**

**International OMFS Day Celebration 2023** 

Various colleges across the state have conducted awareness programs among BDS students in their respective colleges like face painting, Soap carving, Elocution, Debate ,Blood Donation Programs ,Free Dental Checkups and Free treatments for minor surgeries for a period of one month in Kadapa, Tirupathi, Kurnool, Nellore, Vijayawada, Amalapuram, Vizag etc. Many got benifitted from this program. A lot of Coverage given in both Print, Electronic media and FM Radio about this program.

President: Dr. Nadella Koteswara Rao Secretary: Dr. Namineni Kiran Kumar













# PUNJAB





### Association of Oral & Maxillofacial Surgery

# **Punjab State Chapter State Chapter Activities**





















# CHHATTISGARH





### Association of Oral & Maxillofacial Surgery

## **Chattisgarh State Chapter State Chapter Activities**

Spread awareness on road traffic accidents "Saving lives Saving Faces"

A PUBLIC AWARENESS INITIATIVE ON WEARING HELMET AND SEATBELT

1. Cyclathon from marine drive to Jaistambh Chowk, Raipur.

Time: 07:00 AM | Date: 12th Feb 2023

2. Awareness Programme on various FM channels, All India radio & TV news channels IBC 24 & News

Date: 24-13<sup>th</sup> Feb 2023

3. Workshop in Maitri College of Dentistry and Research centre, Anjora, Drug

Date: 13th Feb 2023





# KARNATAKA





### Association of Oral & Maxillofacial Surgery

## **Karnataka State Chapter State Chapter Activities**

Street plays were held to mark the celebration of International Maxillofacial Surgeons Day, which is being held on the theme 'Facial Trauma and Road Traffic Safety'



Students of Manipal College of Dental Sciences staged a street play on road safety at service bus stand in Mangaluru on Monday, February 13.

































Date: 25th February 2023

Venue: Vijayanand ground, Hyderabad.

India' most popular sport is cricket. Our association also has many ardent cricket fans. AOMSI every year organises its annual cricket league - AOMSI Cricket League (ACL). The league is played by our members who form different teams from different parts of our country. AOMSI Cricket League 2023 (ACL 23) which was the 5th edition of the tournament was conducted on 25th February 2023 at Vijayanand ground, Hyderabad. Four teams participated in the tournament which were Telangana Titans, Surgical Strikers, Andhra Legends and Vijay's Vikings. The tournament was played in best of spirits and sportsmanship. The winners were **Telangana Titans** and Runners up were **Surgical Strikers**. The tournament was organised and hosted by **Dr. Pramod Gandra, Dr. Sudhir, Dr. Arvind UD and the team.** It was one of the most memorable edition of the ACL.





Name of the centre:

**Dube Surgical and Dental Hospital** 

Program Director:

Dr. Gunjan Dube

Name of other faculties in the department:

Dr. Pallavi Dube,

Dr. Deepali Agrawal

When did the AOMSI fellowship program start at this

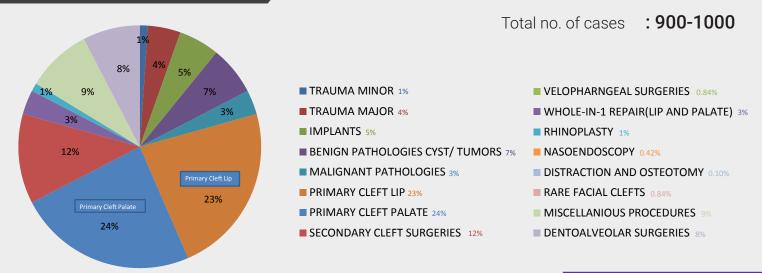
centre: 1st January 2023

Number of fellows intake per year: 1



Dr. Gunjan Dube

#### Procedures done at the centre:



Prcoedures done at the centre under GA for year 2022

With a huge emphasis on cleft surgeries the centre also provides exposure to the entire spectrum of maxillofacial surgical practice with surgical management of oral malignancies, trauma care, pathologies and infections along with implantology. With around 900 to 1000 surgeries being carried out each year.

#### What makes this centre special?

There is a high volume of cleft patients being treated at the centre. We offer comprehensive cleft care right from planning to implementation of treatment protocols. The fellow is exposed to a whole spectrum of cleft surgeries right from primary repairs to secondary deformities like rhinoplasties, fistulas, osteotomies, alveolar graftings, velopharyngeal surgeries etc. The centre also offers exposure to other spectrum of surgical trainings like Maxillofacial trauma care, primary soft tissue trauma handling, odontogenic and non odontogenic patholoaies and infections, oral implantology, surgical management of patients with oral cancers. The structured program offers step wise approach to hands on training to facilitate skill enhancement of the individual. Emphasis is also laid on promoting research activities by carrying out trials, audits, studies etc. The centre also offers post fellowship opportunities to interested candidates to work as research associates along with carrying out routine clinical activities. The center handles somewhere between 900 to 1000 surgical cases (cumulative figure) which gives a generous learning g exposure to the fellow.











# THE AOMSI FELLOW PERSPECTIVE

Name of the fellow: Dr. Jothish

Year of joining fellowship program: 2023

Working now at: Dube Surgical and Dental Hospital, Jabalpur,

Madhya Pradesh

Reach him/her at: 6380434483

1. Describe in one word your time at the fellowship centre?

Productive.

#### 2. Your learning experience at the centre?

A comprehensive learning experience in all aspects of cleft care along with exposure to other aspects of Maxillofacial and General surgery as a whole.

3. Briefly describe a typical day at the fellowship centre?

A typical day begins depending on the number of cases posted that day which may start at 7.00 am in the morning with ward rounds followed by OT for the youngest patient.

After the first case we do post op care for patients. A brief OPD session followed by OT again.

OT usually begins after a brief discussion with my mentor about the surgical plan followed by the procedure itself.

After finishing all the cases posted for the day which will usually be at around late evening, ward rounds and planning for the next days cases will be done which will bring an end to the day at round 9.00 PM.

### 4. Any particular anecdote which you would like to share with us?

Once in a while we get unoperated adult cleft patients. Seeing them unable to make eye contact, unable to speak, the amount of social stigma placed on their shoulders makes you realise how cruel the world can be. To bring a change to these people's lives which you can see starting from the next day of surgery is something worth doing.



#### 5. What did you learn beyond OMFS?

Because | am blessed with an amazing anaesthetist and general surgeon at our centre who take time to teach me in their respective fields | feel quiet advantageous. Also learning a new language is always an added bonus.

#### 6. How did the fellowship program help you?

It has exposed me to a section of Maxillofacial surgery which I had no experience with. This experience which I have gained from my mentor, I believe will change my future for the better.

#### 7. Your advice to the young OMF surgeons?

Dont be in a hurry. You still have lots of time.

#### 8. My perspective on the fellowship programme.

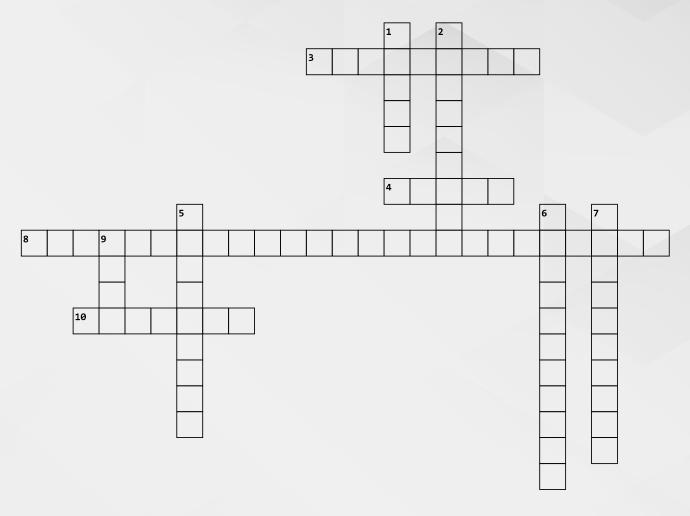
After spending 6 months in the programme and getting a grasp on the entire outline of cleft surgery I feel that 1 year as the duration for the cleft programme is quiet short as a fellow should learn not only the myriad of surgical techniques in cleft lip and palate and also to learn the vast literature which comes along with it, let alone get a grasp of special clefts like Tessiers. An extension of the course duration will definitely benifit the fellowship candidates in the future.











#### Across

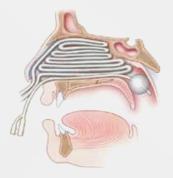
- **3.** A management protocol of OKC involving enucleation along with excision of overlying mucosa
- **4.** Node of \_\_\_\_\_\_ is found at the site of junction of facial artery and horizontal ramus
- **8.** Surgical excision of excessive soft tissue in palatal folds and partial excision of uvula
- **10.** One of the first classification scheme for Fibro-osseous lesions described in 1985

#### Down

- 1. A tool for assessment for difficult intubation
- **2.** The bur used to perform initial osteotomy cuts
- **5.** Greek word for 'maze', also a chamber in the inner ear.
- **6.** A continuous display of real-time movements of moving structure as radiographic images on the monitor
- 7. Cells affected by bisphosphonate
- **9.** Google's AI algorithm that is capable of spotting the features of tumors that have metastasized, which are notoriously difficult to detect



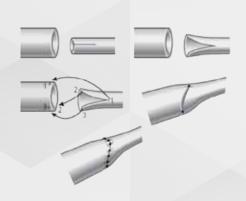
- A disorder resulting in 'bone softening' due to prolonged deficiency of Vitamin D
- A balance between surgical bleed and risk of thrombosis which is achieved with either UFH or LMWH
- 3. Identify the procedure/s depicted in the picture



4. Identify the suturing technique depicted in the picture.



5. Identify the technique of anastomosis



- 6. Who first introduced the Arthroscopy of TMJ?
- 7. Name the retractor shown in the picture?



- 8. Bilateral fracture of pars interarticularis of C2
- 9. Identify the flap depicted in the picture



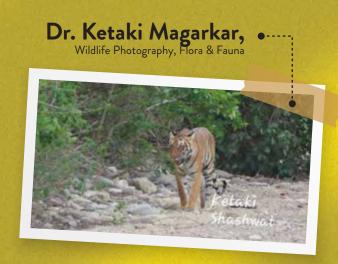
10. Excessive removal of fat in submental region can lead to \_\_\_\_\_ deformity

- Submit your answers for quiz & crossword to maxfacts@aomsi.com
- Answers for mindroid will be revealed on our social media handles along with a shout out to those who send in correct answers.

# Talent Corner

photography









Wildlife Photography, Flora & Fauna





Dr. Ketaki Magarkar,

Wildlife Photography, Flora & Fauna





#### Big thank you all for a fantastic 2nd EC meeting at Goa

**Second EC Meeting** was organised in Goa on 12th March 2023 by our beloved President **Dr. Vikas Dhupar Sir and his team.** Release of First issue of Maxfacts was also done ..

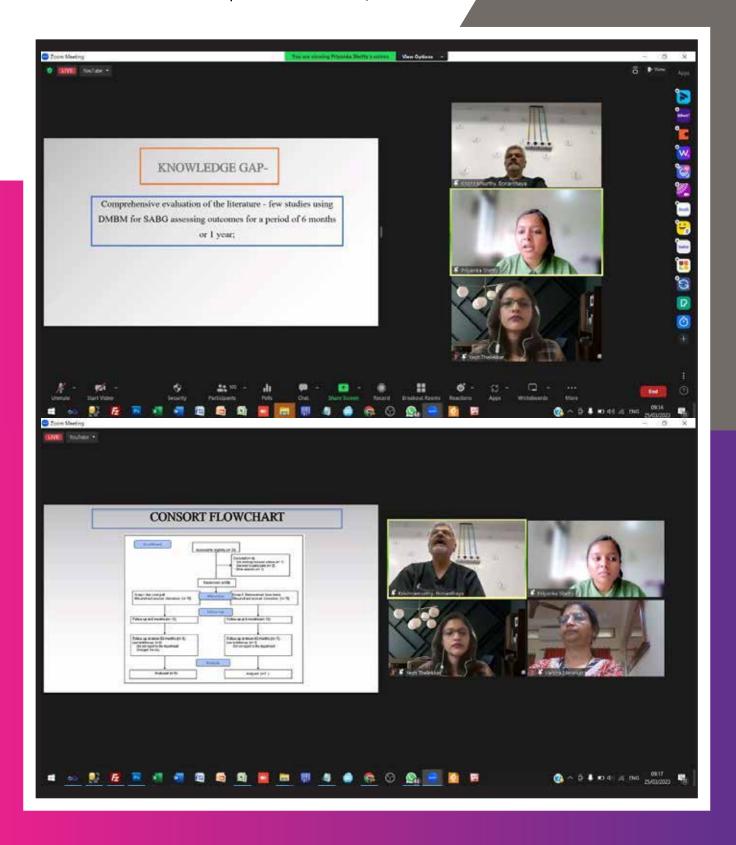
Dr. Vikas Dhupar Sir and his team for successful conduction of second EC meeting in Goa.. and release of first issue of Maxfacts..



### AOMSI JOURNAL CLUB

Date: 25<sup>th</sup> March 2023 | Time: 08:30 am to 10:00 am

Venue: Zoom Platform | No. of Participants: 288





### AOMSI MASTER CLASS-2023 (MRTUAL)



## BLOCK YOUR DATES

MASTERCLASS

FACE TO FACE WITH EXAMINERS

### DATE

5<sup>th</sup>, 6<sup>th</sup> & 7<sup>th</sup> MAY 2023

### DATE

12<sup>th</sup>, 13<sup>th</sup> & 14<sup>th</sup> MAY 2023

### DATE

19<sup>th</sup>, 20<sup>th</sup> & 21<sup>st</sup> MAY 2023

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