Dr. NTR Vaidya Seva Trust
Government of Andhra Pradesh

Corrigendum

To Circular Dr. NTRVST/P&C/CME/ 3446/2017, dated: 19/12/2017

Sub: Rescheduling of First CME on “Recent trends in Polytrauma Management” organized by Dr. NTRVST on 05th January 2018 to 23rd January, 2018 -Reg

Ref: 1. Dr. NTRVST/P&C/CME/ 3446/2017, dated: 19/12/2017
2. Lr. No : APMC/CME/142/2017. Dated 15/12/2017

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It is to inform that vide reference 1 cited above, the CME program on “Recent trends in Polytrauma Management” which was scheduled on 05th January 2018 at Conference hall, Dr. NTR Vaidya Seva Trust Office, Chuttugunta, Guntur has been rescheduled to 23rd January, 2018.

For more information and registration details, please go through the brochure available on the official website of Dr. NTR Vaidya Seva Trust (http://www.ntrvaidyaseva.ap.gov.in)

Copy to:
The Director of Medical Education, A.P.
All the Network Hospitals empanelled under Dr. NTR Vaidya Seva Trust.
All the District coordinators, Dr. NTR Vaidya Seva Trust.
All the HoDs, Dr. NTR Vaidya Seva Trust.
PS to C.E.O, Dr. NTR Vaidya Seva Trust, Guntur.
The PMU department to upload the circular on the website.

Chief Executive Officer
This one day conference will bring together an interdisciplinary group of professionals, academicians and various other stakeholders. It will serve as a common platform where professionals can engage in knowledge transfer and collaborations.
Schedule

Time   Session Topic & Speakers
1.30pm-2.00pm   Registration
2.00pm- 2.30pm   Inauguration

2.30-4 pm
Polytrauma in the present era: Team work in the management of Polytrauma cases
Dr. Busireddy Narendra Reddy, M.B.B.S, M.S (Orthopedics)
Dr. V. Nagashankar M.S. M.Ch (Neuro Surgeon)
Dr. I. Maruthi Prasad, M.S., M.Ch (CTVS)
Dr. N. Sudhakar Reddy M.S., P.D.CC
  (Surgical Gastroenterology)
Faculty from the Department of Plastic Surgery, G G H, Guntur
Dr. K. Naga Santosh, M.S.,F.A.G.E
J.E.O (Operations),  Dr.NTRVaidya Seva Trust)

4-5 pm
Implants: Types & Reasons for Failure
Dr. S. Amarnath, M.B.B.S, M.S

5-6 pm
Head and Spine Injury management
Dr. V. Nagashankar M.S., M.Ch

6-7 pm
Management of Long bone fractures
Dr. G. Vara Prasad, M.S(Orthopedics)
Prof & HOD, Dept of Orthopedics
GGH, Guntur

7-8 pm
Pan facial fractures
Faculty from the Department of Plastic Surgery, G G H, Guntur

8-9 pm
Chest trauma management
Dr. I. Maruthi Prasad, M.S., M.Ch

9-10 pm
Surgical Management of Abdominal Injuries
Dr. N. Sudhakar Reddy M.S., P.D.CC

10-11 pm
Dinner & Certificate presentation

Who can Attend
Interested Medical doctors working in PHCs, CHCs, Government Hospitals, Academicians, Medical Students, Practicing Professionals.

Registration Details
The registration fee structure is as follows:
Professional : Rs.700/-
Student: Rs.500/-
(Covers kit, refreshments, dinner and Certificate of participation, with 2 AP Medical Council credit hours)

How to Register
Register by paying the fee to the following account details:
Account Name : Dr NTR VAI DY SEVA TRUST
Account Number : 037111100001723
Bank Name :  Andhra Bank
Branch :  Machavaram Branch, Vijayawada
IFSC Code :  ANDB0000371

Send the Registration form filled with your Name, APMC registration number, transaction id of the payment, date along with the proof of payment (invoice/screenshot..etc) to Email: cme.ntrvst@gmail.com
Dr. NTR Vaidya Seva Trust  
(Govt. of Andhra Pradesh)  

Continuing Medical Education Program  
on  
“Recent Trends in Polytrauma Management”  

CME Registration Form  

Date: 23rd January 2018  
Venue: Conference Hall,  
Dr.NTRVaidya Seva Trust  
D.No. 25-16-116/B, Chuttugunta,  
Behind Gautam's Hero Showroom,  
Guntur - 522004.  

Name: ……………………………………………………………………………………

Address: …………………………………………………………………………………

…………………………………………………………………………………

Telephone: ………………… Mobile: …………………………………………………

Email-Id: …………………………………………………………………………………

Specialisation: ………………………………… Qualification: ………………………

Designation: ……………………… Hosp/College Name: ……………………………

Registered with Medical Council: …………………………………………………

Regn.No: …………………………………………………………………………………

Payment Made: Yes □ No □ Regn Type: Student □ Delegate □

Transaction ID of payment ……………………………………………………………

Amount paid: ……………………… Date of Payment: ……………………………

Date: ………………………………………………………………………

Signature of Participant

Register by paying the fee to the following account details  
Account Name : Dr NTR VAIDYA SEVA TRUST  
Account Number: 037111100001723  
Bank Name: Andhra Bank  
Branch : Machavaram Branch, Vijayawada  
IFSC Code : ANDB0000371

Student: Rs: 500  
Delegate: Rs: 700

Note: Send a scanned copy of this form with filled details to Email: cme.ntrvst@gmail.com