



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES
DEPARTMENT OF PERIODONTOLOGY

in association with

BANGALORE ACADEMY OF PERIODONTOLOGY

HANDS ON WORKSHOP ON SUTURING

30-03-2022 & 31-03-2022

- This course devised by Dr. Stuart Orton Jones, London & conducted by Dr. Manjunath P.N is intended at “FILLING THE GAP” in Suturing technique.
- This is a practical course, if you participate by doing the Suturing exercises, you will improve your Suturing techniques.
- This workshop is for people who wish to improve their Suturing skills and are prepared to spend time practicing.
- In this workshop, the participants will be learning to use instruments in several different grips and use both the dominant (right) hand & non-dominant (left) hand.
- Using different grips and both hands when appropriate reduces back & neck strain & improves efficiency and productivity.

RESOURCE PERSON



Dr Manjunath P N

Course Mentor &
Educator for Implant
Dentistry

REQUIREMENTS FOR THE WORKSHOP

The participants should bring the following materials:

2 Needle Holders

2 Curved Scissors

2 Teethed Tissue Pickups

1 Periosteal Elevator

B P Blade handle

2 Forks

For Registration contact:

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BAP website: www.justperio.com

REGISTRATION FEE: RS. 2000 (INR)

ACCOUNT DETAILS

Name: Bangalore Academy of Periodontology,
Bangalore
Account number: 54018112830
Account type: Current Account
IFSC Code: SBIN0070242

VENUE

Department of Periodontology
Dayananda Sagar College of Dental Sciences
Shavige Malleshwara Hills
Kumaraswamy Layout

ADVISORY COMMITTEE

Dr.Hemanth.M, Principal, DSCDS

COMMITTEE MEMBERS

Dr. A.V Ramesh: BAP Coordinator
Dr. Savita A.M: Programme Convenor
Dr. Sunil.S: Member

REGISTRATION FORM

Name:

Institution:

Address:

Phone no:

Email id:

State Dental Council registration number:

PAYMENT DETAILS:

Payment to be made only by DD/PO or by NEFT/RTGS/Net transfer in favour of Bangalore Academy of Periodontology to:

SB A/c No. 54018112830
State Bank Of India,
Tippu Sultan Palace Road Branch;
Chamrajpet, Bengaluru-560 018
IFSC Code SBIN0070242

DD/PO/RTGS/NEFT/UTR No:

(Enclose copy of counter foil/screen shot of the transaction)

Date:

Bank:

Signature of the Registrant