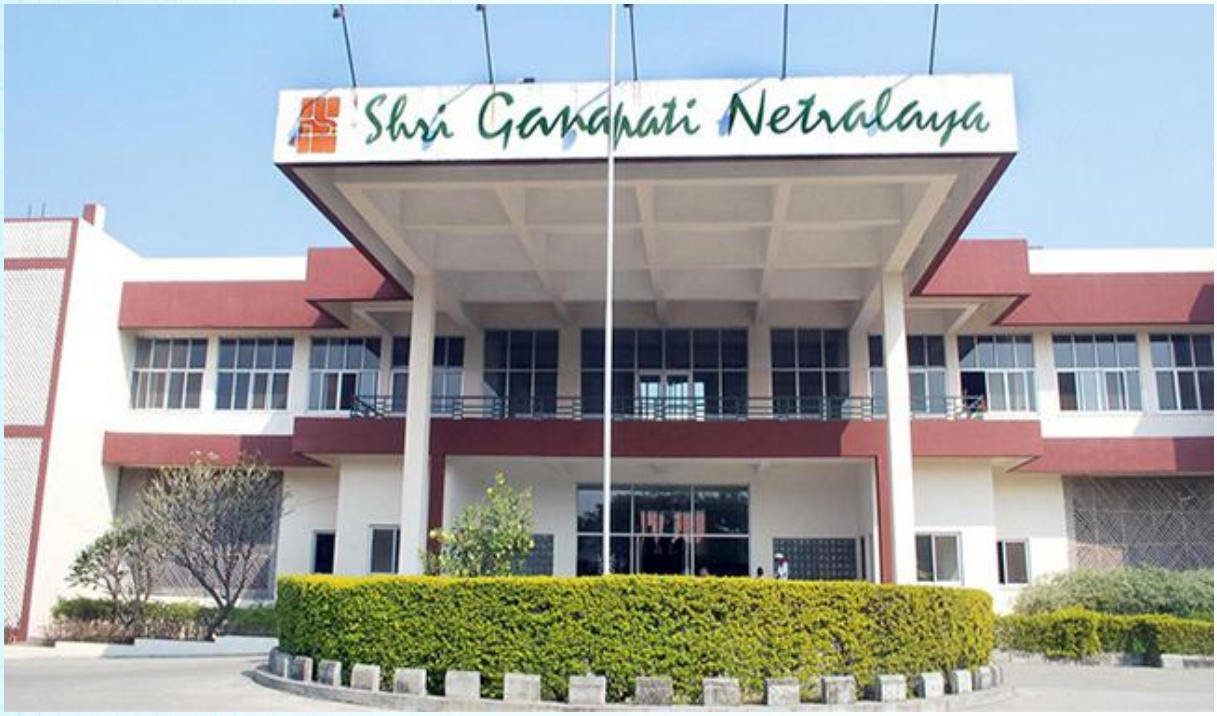
Shri Ganapati Netralaya

Deulgaon-Raja - Mantha Road, Jalna - 431203



Orbit and Oculoplasty Fellowship Course Curriculum

2025

Orbit and Oculoplasty Fellowship
Course Curriculum

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Prepared By	**Designation: Orbit and Oculoplasty Consultant**
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Responsibility of Updating	**Designation: Academic In charge**
	Name: Dr. Abhishek Desai
	Signature:

Designation	Name	Signature	Date
Medical Director	Dr. Rushikesh Naigaonkar		29 Jan 2025

Amendment Sheet

Section	Present Clause	New amendment Clause	Approval authority Signature

Quality Coordinator is responsible for amendment of this document. The amendment sheet is to be updated as and when amendments are received and approved by the authority. Review and amendment can also happen as corrective action to the non-conformities raised during the self-assessment or assessment audits by NABH.

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01 - Introduction:

- PadmaBhushan Dr. B. R. Barwale, the chairman of MAHYCO, was the visionary behind Shri Ganapati Netralaya. He is known as 'Father of Indian Seed Industry' a title conferred upon him by the Crop Science Society of America in 1999. He is also the recipient of the 12th World Food prize (1998) awarded by The World Food Prize Foundation, Des Moines, IOWA, USA. Dr. Barwale, being one of the pioneers of the green revolution and the new agriculture biotechnology in the country, had remarkable awareness and interest in technology. It was his personal experience of laser treatment of glaucoma that motivatedhim to set up an eye hospital

Our Founder Chairman

- Late Dr. B.R. Barwale

- Shri Ganapati Netralaya has come a long way from its humble beginnings on 31 December 1992 at Jalna located in central Maharashtra, India Founded by Chairman Padmabhushan Mr. B. R. Barwale (1931-2017) fructified under Mahyco Research Foundation Trust.

- Shri Ganapati Netralaya is a State-of-The - Art tertiary Eye care center for Education, treatment and research.

Hospital Vision: -

To be a global center of excellence for quality of eye care services provided, development and use of breakthrough technologies, patient satisfaction and delivery of ethical, equitable eye care to everyone.

Hospital Mission: -

To provide affordable eye care services with precision, compassion and dedication. To ensure comprehensive knowledge, technology and research up gradation on continuous platform to eye care professionals.

- Charitable Trust Eye Hospital Registered under the Maharashtra Public Trust Act
- Shri Ganapati Netralaya is register under section 5 of the Bombay Nursing Homes Registration Act, 1949.(Registration Number- 48 CHJ 2007)
- Shri Ganapati Netralaya is accredited by the National Accreditation Board for Hospitals and Healthcare Providers (NABH) which is recognized for quality control in healthcare. (Certificate No. ECO-2019-0087)

- 101 Bed Eye Specialty Care Hospital with Four specialty departments, 14 Ophthalmology Consultants, 2 Anesthesia Consultants, Advanced modular equipped 10 operation theaters more than 200+ other staff.
- All patient records are stored electronically so easy to access round clock and save paper as much as possible to protect the environment.

Education:

Sr. No	Course	Affiliated	Sets	Affiliation/Registration Number
1	Diplomat National Board (DNB)	National Board of Examination (NBE)	4	NBE/ACCR/Granted/3119926151/278-R/2015/4397
2	BSc Optometry	Maharashtra University Of Health Sciences (MUHS), Nasik	30	104111

Fellowship:

Sr. No	Course	Term	Sets
1	Cornea and Refractive surgery's	18 months	2
2	Vitro-Retina, in Comprehensive Ophthalmology	24 months	2
3	Vitro-Retina, in Comprehensive Ophthalmology	12 months	1
4	Small Incisional Cataract Surgery (SICS)	18 months	2
5	Phacoemulsification Surgery	1 month	2
6	Orbit and Oculoplasty Surgery	18 months	1

Treatment:

The society is continuously treated by hospital. There have been **234215** operations since the hospital opened, and there were **11024** in the most recent year (2024).

Research:

The hospital has a Shri Ganapati Netralaya Ethics Committee that is registered with the Central Drugs Standard Control Organization (CDSCO) under the Directorate General of Health Services of the Ministry of Health & Family Welfare of India. (Registration Number - ECR/1862/Inst/MH/2023)

Our Team

1. Trustees (Management):

Mr. Rajendra B. Barwale
Chairman, MAHYCO and MRFT

Mr. Ramkishan V. Mundada
Executive Director,
Mahodaya Hybrid Seeds Pvt. Ltd

Dr. Usha Barwale Zehr
Chief Technology Officer and Director, MAHYCO

Dr. Pramod S. Bhende
Director, Vitreo Retina Services,
Sankara Nethralaya

Dr. Deepak Garg
Director, Eye Solutions, Mumbai

Dr. Bhaskaran
Head Physician, Sankara Nethralaya

2. Orbit and Oculoplasty Department

S.No	Faculty	Education	Years of Experience
1	Dr. Mangesh Dhobekar	MBBS, MS, FMRF	15 Years

02 - Orbit and Oculoplasty Fellowship format

Orbit and Oculoplasty is a specialized area of ophthalmology that deals with the management of deformities and abnormalities of the eyelids, the lacrimal system, the orbit, and the adjacent face. The scope of the clinical practice of Oculoplasty varies widely, in part, because it blends the services of ophthalmology, general plastic surgery, facial plastic surgery and dermatology. Additionally, ophthalmic and facial plastic surgery incorporates selected knowledge from other disciplines, including otorhinolaryngology, neurosurgery, oral/maxillofacial surgery, radiology, medical oncology, radiation oncology, endocrinology and rheumatology.

Fellowship training in ophthalmic and facial plastic surgery requires more in-depth education about the pathophysiology, diagnosis, and management of conditions of the eyelids, lacrimal system, orbit, periocular areas and the face that cannot usually be obtained in ophthalmology training programs. A fellowship in ophthalmic and facial plastic surgery includes a continuous period of intense and focused training in acquiring, developing and maintaining knowledge, skills, scholarship and professionalism.

Prerequisites:

The applicant must have a post-graduate degree(MS/DNB/DO) in ophthalmology with good clinical exposure from recognized university or institute and must have a medical council (state or India) registration.

Course design:

Total Course duration: 18 months

Basic Orientation: The first month will be given to strengthen the skills in clinical examination and basic diagnostics and also to get acquainted with the principles and guidelines being followed at the institute.

Clinical Training:

The fellow will be trained in the techniques used to evaluate a patient with deformities and diseases of the eyelids, the lacrimal system, and the orbit.

Diagnostic Training:

The fellow will be trained in the use and interpretation of B-scan ultrasonography, ultrasound bio microscopy, CT scan, and MRI.

Surgical Training:

This will involve assisting on all surgical procedures related to the subspecialty.

Independent work:

- Correction of entropion and ectropion
- Electrolysis
- Ptosis surgery including levator resection, tarsofrontal sling and Fasanella-Servat procedure
- Eyelid reconstruction including direct closure and flap techniques
- Lacrimal probing
- Canalicular repair and intubation
- Dacryocystorhinostomy
- Dacryocystectomy
- Orbital surgery
- Techniques of incisional and excisional biopsy and fine-needle aspiration biopsy
- Excision of lesions of the ocular surface and reconstruction
- Enucleation, evisceration and exenteration
- Techniques of orbital implants
- Socket reconstruction
- Skin grafting

During the last 6 months fellows will take up institute's responsibilities while being posted with the faculty. This is the time they will also learn managing various areas independently.

All the fellows at the Institute will be doing emergency duties on rotation.

03 - Goals of Orbit and Oculoplasty Fellowship

BASIC LEVEL GOALS

A. Cognitive skills

- To describe basic eyelid, lacrimal, and orbital anatomy and physiology (e.g., eyelid, orbicularis, orbital structures, meibomian glands, lacrimal glands, glands of Zeiss, Whitnall's ligament, Muller's muscle, Lockwood's ligament, canaliculi, puncta, orbital bones, orbital foramina, paranasal sinuses, arterial and venous vascular supply, lymphatics, nerves, extraocular muscles).
- To describe basic mechanisms and indications for treatment of eyelid, orbital, and lacrimal trauma.
- To perform pre-operative and post-operative assessment of patients with common oculoplastic disorders.
- To recognize simple orbital trauma (e.g., black eye, retrobulbar hemorrhage).
- To recognize and treat localized trichiasis.
- To describe the differential diagnosis of lacrimal gland mass (e.g., inflammatory, neoplastic, congenital, infectious).
- To identify normal orbital anatomy on imaging studies (e.g. magnetic resonance imaging, computed tomography, ultrasound).
- To describe the differential diagnosis of proptosis in children and adults.
- To describe the differential diagnosis of common orbital tumors in children and adults.
- To describe techniques and complications of minor operating room procedures
- To describe typical features of and differentiate between preseptal & orbital cellulitis.

B. Technical/surgical skills

- To describe indications for and to perform the basic office examination techniques for the most common oculoplastic and orbital abnormalities.
  - Ptosis
  - Watering eye
  - Proptosis
- To perform the basic assessment of the eyelids, eyebrows, and eyelashes
- To identify indications for and to perform the basic lacrimal assessment (e.g., dye testing, punctual dilation, canalicular probing, lacrimal irrigation).
- To identify indications for and to perform the basic assessment of the orbit (e.g., Hertel exophthalmometry, inspection, palpation, auscultation).
- To identify indications for and to perform the basic socket assessment

- To perform minor lid and conjunctival procedures (e.g., removal of benign eyelid skin lesions, chalazion curettage or excision, conjunctival biopsy).
- To recognize and treat trichiasis (e.g., epilation, cryotherapy, surgical therapy).
- To perform a simple enucleation or evisceration under supervision.

STANDARD LEVEL GOALS: (in addition to Basic Level goals)

A. Cognitive skills

- To describe more advanced eyelid, lacrimal, and orbital anatomy and physiology (e.g., lacrimal apparatus, orbital vascular anatomy).
- To describe the genetics (where known), clinical features, evaluation, and treatment of congenital eyelid deformities (e.g., coloboma, distichiasis, epicanthus, telecanthus, blepharophimosis, ankyloblepharon, epiblepharon, euryblepharon, and Goldenhar, Treacher-Collins, Waardenburg syndromes).
- To describe the clinical features, evaluation and management of congenital orbital deformities (e.g., anophthalmia, microphthalmia, cryptophthalmia, hypertelorism).
- To describe the genetics, clinical features, evaluation, and management of common craniosynostoses and other congenital malformations (e.g., Crouzon and Apert syndromes).
- To treat (or refer for treatment) congenital eyelid abnormalities
- To perform pre-operative and post-operative assessment of patients with more serious oculoplastic disorders (e.g., multi-disciplinary procedures).
- To describe the mechanisms and indications for treatment of more advanced eyelid, orbital, and lacrimal trauma (e.g., full thickness lid laceration, chemical burns to the face).
- To describe features of, evaluate, and treat more complicated cases of nasolacrimal duct obstruction, canaliculitis, dacyrocystitis, acute and chronic dacryoadenitis, preseptal cellulitis, and orbital cellulitis.
- To recognize, evaluate and treat thyroid ophthalmopathy (e.g., epidemiology; symptoms and signs; associated systemic diseases; orbital imaging; differential diagnosis; surgical, medical, and radiation indications; side effects of treatment).
- To recognize, evaluate and treat orbital inflammatory pseudotumor (e.g., symptoms and signs, orbital imaging, differential diagnosis, biopsy indications, choice of treatments).
- To recognize, treat, or refer blepharospasm or hemifacial spasm.
- To recognize less common orbital tumors (e.g., metastatic lesions).

Technical/surgical skills

- To describe indications for and to perform more advanced examination techniques for less common oculoplastic and orbital abnormalities (e.g, measurement of levator function, orbital ultrasound intepretation).
- To identify indications for and to perform more advanced assessment of eyelids and eyebrows (e.g.,hypoglobus, facial asymmetry, brow ptosis).
- To identify indications for and to perform more advanced assessment of the orbit (e.g.,enophthalmus, interpretation of orbital CT/MRI in common conditions).
- To identify indications for and to perform more advanced socket assessment (e.g., extrusion of implants, anophthalmic socket complications).
- To perform more complicated minor lid procedures (e.g., larger benign skin lesions) or surgery (e.g., recurrent or multiple chalazion).
- To recognize the indications and complications and to perform more complex minor operating room or limited operating room procedures (e.g., incision and drainage of recurrent or larger chalazia, excision of moderate sized benign eyelid lesions).
- To recognize and treat orbital trauma (e.g., intraorbital foreign body, fracture).
- To identify common orbital pathology (e.g., orbital fractures, orbital tumors) on imaging studies.
- To describe, recognize the indications for and complications of, and perform the basic lacrimal procedures below:
    - Lacrimal drainage testing (irrigation, dye disappearance test)
    - Lacrimal intubation
    - Dacryocystorhinostomy (external)

ADVANCED LEVEL GOALS: (in addition to Standard Level goals)

A. **Cognitive skills**

- To describe the most advanced eyelid, lacrimal, and orbital anatomy and physiology.
- To perform pre-operative and post-operative assessment and coordination of care of patients with more advanced or complex oculoplastic disorders (e.g., systemically ill patient, multi-disciplinary procedures).
- To describe the etiology, evaluation, and medical and surgical treatment of the following eyelid diseases:
    i. Complex ectropion
    ii. Complex entropion
    iii. Complex myogenic ptosis (e.g., chronic progressive external ophthalmoplegia).
    iv. Complex differential diagnosis for dermatochalasis (e.g., steatochalasis).

- Benign, pre-malignant, or malignant eyelid tumors (e.g., papilloma, keratoacanthoma, seborrheic keratosis, epidermal inclusion cyst, molluscum contagiosum, verruca vulgaris, actinic keratosis, basal cell carcinoma, squamous cell carcinoma, sebaceous cell carcinoma, melanoma).
- Single or recurrent inflammatory lesions (e.g., recurrent chalazion or its mimics).
- Facial dystonia (e.g., blepharospasm, hemifacial spasm).
- Facial nerve palsy with exposure keratopathy (e.g. tarsorrhaphy, gold weights).
- Complex lid and orbital trauma cases.

B. **Technical/surgical skills**

- To perform preoperative and intraoperative assessment of the eyelids and eyebrows (e.g., intraoperative adjustments).
- To recognize and treat more complex or difficult socket-related problems and complications (e.g. extrusion of implants, anophthalmic socket complications).
- To perform more complicated lid procedures (e.g., larger benign, recurrent, or multiple skin lesions).
- To perform more advanced lacrimal assessment (e.g., intraoperative and postoperative testing, more complex trauma to lacrimal system).
- More complex acquired disorders and their treatment (e.g., CDCR with Jones tube)
- Complex moderate trauma (e.g., requiring lacrimal intubation)
- To recognize typical and atypical features and to describe the differential diagnosis, clinical features, and treatment of more complicated orbital disease, including: More complex orbital infections (e.g. mucormycosis, aspergillosis)
- Congenital tumors (e.g., dermoid)
- Fibro-osseus disorders and tumors (e.g., fibrous dysplasia, osteoma, chondrosarcoma, osteosarcoma, Paget's disease)
- Vascular tumors (e.g., capillary hemangioma, cavernous hemangioma, hemangiopericytoma, lymphangioma, Kaposi's sarcoma)
- Xanthomatous tumors (e.g., xanthalesma, juvenile xanthogranuloma)
- Lacrimal gland tumors (e.g., benign mixed tumor, adenoid cystic carcinoma, malignant mixed tumor, lymphoma)
- Neural tumors (e.g., optic nerve glioma/meningioma, neurofibromatosis, neuroblastoma)
- Rhabdomyosarcoma
- Orbital pseudotumor
- Lymphoid lesions (e.g., lymphoid hyperplasia, lymphoma, leukemia)
- Thyroid-related orbitopathy
- Metastatic tumors (e.g., from breast, lung, melanoma)

- Trauma (e.g., orbital fractures, traumatic optic neuropathy)
- Anophthalmic socket – implant exposure, volume augmentation
- To describe, recognize the indications for and complications of, and to perform the eyelid procedures listed below:
    i. Basic biopsy techniques
    ii. Lateral tarsal strip
    iii. Specialized lid suture procedures (e.g., Quickert sutures)
    iv. Medial spindle
    v. Retractor reinsertion
    vi. Eyelid laceration/margin repair
    vii. Tarsorrhaphy
    viii. Simple eyelid reconstruction
    ix. Orbital approaches and incisions (e.g., Kronlein, Caldwell-Luc, transconjunctival)
- To describe, recognize the indications for and complications of, and perform basic orbital skills and procedures, including anterior orbitotomy for tumor biopsy/excision.
- To identify more advanced orbital pathology (e.g., complex orbital fractures, orbital tumors) on imaging studies (e.g., magnetic resonance imaging, computed tomography, ultrasound).

04. Academics

Academics:

1. Specialty classes are held on every Tuesdays and Fridays of the week and Orbit and Oculoplasty classes are held twice a month.
2. Fellows are required to present various formats of classes including
   a) Interesting cases
   b) Journal presentation
   c) Seminar on a particular topic
   d) Debate
3. The class schedule will also include lecture by one of the Oculoplasty Consultants.
4. Besides, the Fellows are also expected to attend the Postgraduate
5. Seminars conducted and also help in teaching postgraduates
6. At the end of fellowship each fellow is expected to handover at least two research work for publication (at least one in each year) and to make a power point presentation of the same in the class.

A fellow should maintain a log book which will be evaluated monthly by a mentor. Fellow will have to prepare and present a class for PG students at least once a month. There will be a journal club twice weekly.

Fellows will be encouraged and guided to present and publish in conferences and journals. A project in subspeciality will be given to a fellow in tenure.

Library facilities

We have a well-equipped library containing wide range of books and journals. There are computers available with round – the – clock Internet facility

05. Leave of absence

Leave of absence

1. Total number of days of leave, which can be availed by the Fellow, is 30 days per year.
2. Leave must be pre-authorized: In routine cases at least a month in advance whereas in case of emergency/sickness, absence must be intimated immediately.
3. If total leave exceeds 30 days in a year, (The excess leave will be granted only in exceptional circumstances by the director in-charge of training.) the excess of leave provided during your fellowship will be extended beyond the last day of fellowship in order to complete the loss of tenure.
4. Only 1 fellow or at-most 3 students (including PGs and Fellows) can avail leave at any given time. Any exceptions will be allowed with approval from the respective HOD.
5. All 30 days can also be availed at one stretch (for going out of town).
6. Sundays or general holidays during the leave period will not be counted as leave.

Extension Of the Fellowship

No request for extension of the fellowship tenure will be allowed. The candidate will complete the fellowship as per the tenure.

06. Conference attendance

Conference Attendance

Attending one national level conference in the entire tenure of fellowship is allowed. Travel and stay shall be sponsored by the Institute in case the fellow has a paper presentation at the conference.

07. Log Book

1. During their training the Fellows are expected to keep a detailed record of the various cases examined and the various minor procedures performed by them in the outpatient department, as well as the various surgeries assisted by them and performed by them under supervision.
2. The format of maintaining records of various procedures assisted and performed is given at the end of this manual.
3. The fellows are encouraged to fill their logbooks with their observations (surgical pearls)

08. Assessment

1. At the end of their rotation with every consultant, the respective consultant prepares a confidential report about the performance of the concerned Fellow.
2. At the end of a Semester (6 months) there is a Theory and Viva Exam.
3. The participation of fellows in class, ongoing research projects, reports of the various consultants as well as the performance of the Fellows in the above-mentioned exams will go on to form a comprehensive report of the Fellow's overall performance during the tenure of his entire Fellowship.

09. How to Apply for Orbit and Oculoplasty Fellowship

1. Interviews for admission to Orbit and Oculoplasty Fellowships are held twice a year in March and September or as per institute's requirement. Candidates are chosen on basis of Merit.
2. The applicant must have a post-graduate degree (MS/DNB/DO) in ophthalmology with good clinical exposure from recognized university or institute and must have a medical council (state or India) registration and international ophthalmologists with a degree in Ophthalmology from a recognized university (preferably from an institute).
3. **NMC Information:** It is mandatory for all the international candidates to get a temporary registration certificate from the National Medical Council of India. This process will be done through the organization only. The selection is confirmed on receipt of the NMCI approval which usually takes 3 months time.
4. **Mode of selection:** On merit basis through an interview and MCQs examination
5. **How to apply**: Email your CV with subject being "Application for Long term fellowship in Orbit and Oculoplasty" to admin@netralaya.org

Shri Ganapati Netralaya

Deolgaon Raja- Mantha Road,

Jalna (Maharashtra)– 43120

Logbook

Orbit and Oculoplasty Fellowship

(18 Months Duration)

Dr. .....

Shri Ganapati Netralaya

Deolgaon Raja- Mantha Road,

Jalna (Maharashtra)– 431203

Certificate

This is to certify that

Dr. .....

has Successfully completed

Orbit and Oculoplasty Fellowship Training at Shri Ganapati Netralaya, Jalna, Maharashtra, India.

From _____ to _____

Shri Ganapati Netralaya

Deolgaon Raja- Mantha Road,

Jalna (Maharashtra)– 431203

Surgical Log Book for Fellows

Department of Orbit and Oculoplasty

Name of the candidate : .....

Date of birth : .....

Sex : .....

Qualification : .....

Residential address : .....

Mobile No. : .....

E-mail : .....

Period of training : .....

1. Eyelid Surgeries

Sr. No.	Diagnosis	Surgery	Assisted	Independent	Total
1.1	Ptosis	Frontalis sling			
1.2	-	Levator resection			
2.1	Entropion	-			
2.2	Congenital Entropion	Hotz procedure			
2.3	Senile Entropion	Wies procedure			
2.3	Cicatricial Entropion	Tarsal rotation			
3.1	Ectropion	-			
3.2	Cicatricial Ectropion	Z-plasty			
3.3	Cicatricial Ectropion	Skin graft			
3.4	Paralytic Ectropion	Tarsorrhaphy			
4	Epicanthus inversus	Y-V plasty			
5.1	Lid tumors	Excisional biopsy			
5.2	-	Lid reconstruction			
5.3	-	Incisional biopsy			

2. Lacrimal surgeries

Sr. No.	Diagnosis	Surgery	Assisted	Independent	Total
1.1	Chronic dacryocystitis /PANDO	External Dacryocystorhinostomy (DCR)			
1.2	-	Endonasal DCR			
1.3	-	Dacryocystectomy (DCT)			
1.4	Traumatic NLDO	-			
2.1	Failed DCR	Revision DCR with intubation			
3	Failed DCT	Repeat DCT			
4	Congenital Dacryostenosis	Probing			
5	Others	Nasal Endoscopic Evaluation (NEE)			

3. Orbit surgeries

Sr. No.	Diagnosis	Surgery	Assisted	Independent	Total
1.1	Orbital tumors	Incisional biopsy			
1.2	-	Excisional biopsy +/- bone removal			
1.3	-	Fine needle aspiration biopsy			
2	Blow-out fracture	Orbital floor repair			
3	Thyroid related orbitopathy	Orbital decompression			
4.1	Contracted socket	Dermis-fat graft			
4.2	-	Secondary ball implant			
4.3	-	Fornix formation			
4.5	-	Mucous membrane graft			
5.1	Pan-ophthalmitis	Evisceration			
5.2	-	Secondary ball implant			
6	Painful blind eye	Evisceration with implant			
7	Intra-ocular malignancy	Enucleation with implant			
8	Orbital malignancy	Exenteration			
9	Others				

4. Cosmetic & Aesthetic Procedures

Sr. No.	Diagnosis	Surgery	Assisted	Independent	Total
1	Dermatochalasis	Blepharoplasty			
2	Brow Ptosis	Browlift			
3	Functional/ Cosmetic	Botox			
4	Functional/ Cosmetic	Filler			

5. Miscellaneous

Sr. No.	Diagnosis	Surgery	Assisted	Independent	Total
1	Conjunctival mass	Conjunctival biopsy			
2	Centurion syndrome	MPL disinsertion			
3	Lid retraction	Scleral spacer graft			

6. Minor Surgical Procedures

Sr. No	Diagnosis	Surgery	Assisted	Independent	Total
1.1	Lagophthalmos	Tarsorrhaphy			
1.2	-	Lateral tarsal strip			
1.3	-	Gold weight implant			
2.1	Trichiasis	Electroepilation			
4	Chalazion	Incision & curettage			
5	Abscess	Incision & drainage			
6	Symblepharon	Amniotic membrane graft			

7. Trauma Surgeries

Sr. No.	Diagnosis	Surgery	Assisted	Independent	Total
1	Corneoscleral tear	Repair			
2	Scleral rupture	Repair			
3	Lid tear	Lid repair			
4	Canalicular tear	Repair with Monoka stent			

8. Consolidation sheet

Sr. No.	Surgery	Assisted	Independent	Total
1	Lid surgeries			
2	Sac surgeries			
3	Orbital surgeries			
4	Cataract surgeries			
5	Aesthetic surgeries			
6	Minor surgical procedures			
7	Miscellaneous			

9. Educational and Research activities

Sr. No.	Date	Presentation type	Topics
1		Orbit meet	
2		Journal club	
3		Video presentation	
4		Project	
5		PG teaching class	
6		Grand rounds	

10. Papers/Book Chapters/Web Pages Contributed/ Presented/Published

Sr. No.	Topic	Date	Place	Conference