



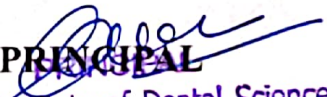
**LENORA INSTITUTE OF DENTAL SCIENCES**  
(Permitted by Govt. of India / Dental Council of India & Affiliated to Dr.NTRUHS)  
NH-16, Rajanagaram, Rajahmundry, East Godavari (Dt), AP.

Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com)., Fax: 0883 2484493

**1.2.2(2) LIST OF ADD ON PROGRAMMES (A-Y 2020-2021)**

S.No	Name of the programme	Date	No.of students attended
1	HORMONES IN DENTISTRY	07-09-2020	80
2	MEDICALLY COMPROMISED PATIENTS	09-11-2020	40
3	INFECTION CONTROL	23-11-2020	30
4	COVID-19 AND ORAL MANIFESTATIONS	14-12-2020	47
5	BIOMEDICAL WASTE MANAGEMENT	04-01-2021	24

  
IQAC COORDINATOR

  
PRINCIPAL  
Lenora Institute of Dental Sciences  
RAJANAGARAM




**LENORA INSTITUTE OF DENTAL SCIENCES**  
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Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

Date: 16.11.2020

## CIRCULAR

This is to inform all I Year students that our department is organizing add-on Course on "Infection Control" from 23.11.2020 to 28.11.2020. All Students are requested to attend the Program.

  
Lenora Institute of Dental Science  
RAJANAGARAM  
Principal









Copy to: Chairperson


Secretary,

Director,

All HOD's/ Incharges,

CFO.

- ① Dept of Oral Surgery -   
Dept of OMR -   
Cons & Endo -   
Dept of Prostho -   
Dept of Pedo -   
Dept of Ortho -   
Dept of Perio -   
Dept of O.P - 

Dept of Path - 



## REGISTRATION FORM

Name:.....

Dept. ....

Institution:.....

Address for Communication:

.....

.....

Mobile:.....

email: .....



## PROGRAM COMMITTEE:

### CHIEF PATRON

Mrs. K. Nagamani Garu  
Chair Person,

KLR Group of Institution

### PATRON

Mr. Y. Madhusudhan Reddy Garu  
Secretary,  
KLR Group of Institution

### CONVENOR

Dr. G. Nagarjuna Reddy Garu  
Director  
Lenora Institute of Dental Sciences

### Resource Person:

Dr. J. S. V. Sathyanarayana  
Reader  
Contact No: 9704022233  
Mail id: satya6112t@gmail.com

### ADDRESS FOR COMMUNICATION:

Dr. Dalsingh  
Contact No: 9177747433  
Mail id: dalsingh2007@rediffmail.com

**LENORA**  
**INSTITUTE OF DENTAL SCIENCES**



ADD ON PROGRAM  
ON

## INFECTION CONTROL

Dates:

23.11.2020 to 28.11.2020

Venue:

Lecture Hall



(Permitted by Govt. of India/Dental Council of India &  
Affiliated to Dr.NTRUHS)

NH-16, Rajanagaram,  
Rajahmundry-533 294,  
East Godavari (Dist.), A.P. INDIA.



**LIST OF STUDENT REGISTERED**

Name of the Program: Add-on Course on "Infection Control"

Date : 23.11.2020 to 28.11.2020

S. No	Roll No.	Student name	Signature
1	18D101012059	NAIDU LAYAVARDHAN RAJU	N. L. Raju
2	18D101012064	PAGOLU DEEPIKA	Deepika
3	19D101012002	ANGEL RANI BANDELA	Angel Rani
4	19D101012013	DANTE GEETHIKA	Geethika D.
5	19D101012017	GARAGA BHAVYA SRI SAI	Bhavya
6	19D101012018	GEDDAM BRAMARA NAINA DATTA	Naina Datta
7	19D101012027	JARUPULA AKSHAYA	J. Akshaya
8	19D101012029	JUTTUKA CHANDRAMOULI	J. C. Mouli
9	19D101012032	KARINI SURYA SREE	K. Suresh
10	19D101012034	KARRI LALITHA SREE HARIKA	Harika
11	19D101012039	KATTA MURIKAVYA SUDHAA SHRITHA	Sudha
12	19D101012043	KODAVATI PRIYANAKA N V KRISHNA THANUJA	Thanuja
13	19D101012047	KUSUMA PUSHYARAGAM	Pushya
14	19D101012049	LOKESWARI DONTUMALLA	D. Keswari
15	19D101012052	MERCY VICTOR YAGANTI	Mercy
16	19D101012053	MONDI MOUNIKA BRAHMESWARI	Mounika
17	19D101012054	MONIKA SREE KASI	Monika
18	19D101012057	MUMMIDIVARAPU LIKITHA SAI ANUPAMA	M. Anupama
19	19D101012060	NAMALA SNIGDHA CHOWDARY	Snigdha
20	19D101012063	NUNNA SAI RAM CHARAN	Sai Ram Charan
21	19D101012065	PACHA NEEHARIKA	Neeharika
22	19D101012071	POTHIPOGU ROHILA ANAND	Rohila Anand
23	19D101012072	POTTI SAI MEENACHANDANA PRIYA	Chandana Priya



24	19D101012073	PULLAGURA RITWIKARAJ	P. Ritwik Raj
25	19D101012076	QUEEN YEVANGELIN KODAMANCHILI	Queen
26	19D101012080	REDDY LAVANYA	Lavanya
27	19D101012081	SATHIK SHAHID	St. Shahid.
28	19D101012085	SHAIK AYESHA FARHAD	St. Ayesha
29	19D101012086	SHAIK KARIMUNNISHA	Karimunnisha
30	19D101012094	VANAM NEHA	V. Neha.



COORDINATOR



HOD

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**STUDENT ATTENDANCE**

Name of the Program: Add-on Course on "Infection Control"


Date : 23.11.2020 to 28.11.2020

S. No	Roll No.	Student Name	23.11.20	24.11.20	25.11.20	26.11.20	27.11.20	28.11.20	Feedback
1	18D101012059	NAIDU LAYAVARDHAN RAJU	P	P	P	P	P	P	5
2	18D101012064	PAGOLU DEEPIKA	P	P	P	P	P	P	5
3	19D101012002	ANGEL RANI BANDELA	P	P	P	P	P	P	4
4	19D101012013	DANTE GEETHIKA	P	P	P	P	P	P	5
5	19D101012017	GARAGA BHAVYA SRI SAI	P	P	P	P	P	P	3
6	19D101012018	GEDDAM BRAMARA NAINA DATTA	P	P	P	P	P	P	4
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8	19D101012029	JUTTUKA CHANDRAMOULI	P	P	P	P	P	P	3
9	19D101012032	KARINI SURYA SREE	P	P	P	P	P	P	2
10	19D101012034	KARRI LALITHA SREE HARIKA	P	P	P	P	P	P	5
11	19D101012039	KATTA MURIKAVYA SUDHAA SHRITHA	P	P	P	P	P	P	4
12	19D101012043	KODAVATI PRIYANAKA N V KRISHNA THANUJA	P	P	P	P	P	P	3
13	19D101012047	KUSUMA PUSHYARAGAM	P	P	P	P	P	P	3
14	19D101012049	LOKESWARI DONTUMALLA	P	P	P	P	P	P	4
15	19D101012052	MERCY VICTOR YAGANTI	P	P	P	P	P	P	4
16	19D101012053	MONDI MOUNIKA BRAHMESWARI	P	P	P	P	P	P	5
17	19D101012054	MONIKA SREE KASI	P	P	P	P	P	P	4
18	19D101012057	MUMMIDIVARAPU LIKITHA SAI ANUPAMA	P	P	P	P	P	P	3
19	19D101012060	NAMALA SNIGDHA CHOWDARY	P	P	P	P	P	P	2
20	19D101012063	NUNNA SAI RAM CHARAN	P	P	P	P	P	P	5



21	19D101012065	PACHA NEEHARIKA	P	P	P	P	P	P	5
22	19D101012071	POTHIPOGU ROHILA ANAND	P	P	P	P	P	P	5
23	19D101012072	POTTI SAI MEENACHANDANA PRIYA	P	P	P	P	P	P	4
24	19D101012073	PULLAGURA RITWIKARAJ	P	P	P	P	P	P	3
25	19D101012076	QUEEN YEVANGELIN KODAMANCHILI	P	P	P	P	P	P	4
26	19D101012080	REDDY LAVANYA	P	P	P	P	P	P	4
27	19D101012081	SATHIK SHAHID	P	P	P	P	P	P	4
28	19D101012085	SHAIK AYESHA FARHAD	P	P	P	P	P	P	5
29	19D101012086	SHAIK KARIMUNNISHA	P	P	P	P	P	P	3
30	19D101012094	VANAM NEHA	P	P	P	P	P	P	5

  
COORDINATOR

  
HOD



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## INSTITUTE OF DENTAL SCIENCES



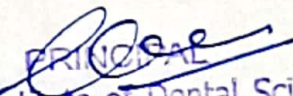
NH-16, Rajanagaram, Rajahmundry - 533 294, East Godavari (Dist.), A.P.



### CERTIFICATE OF PARTICIPATION

This is to certify that Dr./Mr./Mrs./Ms. JAROPULA. AKSHAYA  
has participated in Add-on Course Program on topic "Infection Control" held at  
Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East  
Godavari (Dist.) - 533 294, A.P. India, from 23.11.2020 to 28.11.2020.

  
Program Coordinator

  
Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal





# LENORA

## INSTITUTE OF DENTAL SCIENCES



NH-16, Rajanagaram, Rajahmundry - 533 294, East Godavari (Dist.), A.P.

Accredited with



NAAC

(National Assessment and Accreditation Council)

## CERTIFICATE OF PARTICIPATION

This is to certify that Dr./Mr./Mrs./Ms. PAGOLU. DEEPIKA

has participated in Add-on Course Program on topic "Infection Control" held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 23.11.2020 to 28.11.2020.

  
Program Coordinator

  
Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal



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Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

Date: 30.11.2020

### PROGRAM REPORT

Name of the Event: Add-on Course on "Infection Control"

Date : 23.11.2020 to 28.11.2020

Resource Person : Dr. T. S. V. Sathyanarayana

Reader

Contact No: 9704022233

Mail id: [satya6112t@gmail.com](mailto:satya6112t@gmail.com)

Name of the Coordinator: Dr.Dalsingh

Contact No: 9177747433

Mail id: [dalsingh2007@rediffmail.com](mailto:dalsingh2007@rediffmail.com)

Number of Students attended: 30

Venue: Lecture Hall

#### **OBJECTIVE OF THE PROGRAM:**

- Identify barriers and personal protective equipment (i.e. isolation precautions) and hand hygiene for protection from exposure to potentially contaminated material.
- Describe principles of cleaning, disinfection and sterilization and reprocessing equipment.
- Define engineering, environmental and work practice controls.

#### **TOPICS COVERED:**

- Infection control tools.
- Infection control policies in different departments.
- Isolation policy.
- Transmission based precautions.
- Hospital acquired infection.





### **OUTCOME OF THE PROGRAM:**

At the end of the program, the student will be able to

- Define sterilisation, disinfection and asepsis.
- Describe the various methods of sterilisation and disinfection in dentistry.
- Enumerate the infectious diseases relevant to dentistry and their routes of transmission.
- Classify instruments based on the risk of transmitting infections.

**COORDINATOR**

**HOD**





# LENORA INSTITUTE OF DENTAL SCIENCES

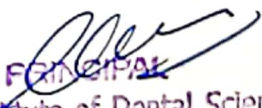
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NH-16, Rajanagaram, Rajahmundry, East Godavari (Dt), AP.

Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

Date: 02.11.2020









## CIRCULAR


This is to inform all II Year students that our department is organizing add-on Course on "Medically Compromised Patients" from 09.11.2020 to 14.11.2020. All Students are requested to attend the Program.

  
Principal  
Lenora Institute of Dental Sciences  
RAJANAGARAM

Copy to: Chairperson

Secretary,  
Director,  
All HOD's/ Incharges,  
CFO.

1. Dept of Omys - 
2. Dept of ome - 
3. Cons & Ende - 
4. Dept of Prostha - 
5. Dept of Peds - 
6. Dept of Ortho - 
7. Dept of Perio - 
8. Dept of O.P - 

Dept of PHD 



## REGISTRATION FORM

Name:.....

Dept. ....

Institution:.....

Address for Communication:

.....

.....

Mobile:.....

email: .....

**Free:**  
In-House  
Staff & Students



### PROGRAM COMMITTEE:

#### CHIEF PATRON

Mrs. K. Nagamani Garu  
Chair Person,  
KLR Group of Institution

#### PATRON

Mr. Y. Madhusudhan Reddy Garu  
Secretary,  
KLR Group of Institution

#### CONVENOR

Dr. G. Nagarjuna Reddy Garu  
Director  
Lenora Institute of Dental Sciences

#### Resource Person:

**DR. G.ANUSHA**

Reader

Contact No: 9985716722

Mail id: anushadhoni22a@gmail.com

#### ADDRESS FOR COMMUNICATION:

Dr.Dalsingh

Contact No: 9177747433

Mail id: dalsingh2007@rediffmail.com

**LENORA**  
**INSTITUTE OF DENTAL SCIENCES**



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NAAC  
(National Assessment and Accreditation Council)



**ADD ON PROGRAM**  
**ON**

**MEDICALLY COMPROMISED**  
**PATIENTS**

**Dates:**

**09.11.2020 to 14.11.2020**

**Venue:**

Lecture Hall



**LENORA**  
**INSTITUTE OF DENTAL SCIENCES**

(Permitted by Govt. of India/Dental Council of India &  
Affiliated to Dr.NTRUHS)

**NH-16, Rajanagaram,**  
**Rajahmundry-533 294,**  
**East Godavari (Dist.), A.P. INDIA.**



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Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

**LIST OF STUDENT REGISTERED**

Name of the Program: Add-on Course on "Medically compromised Patients"

Date : 09.11.2020 to 14.11.2020

S. No	Roll No.	Student name	Signature
1	19D101012001	AAKANSHYA ROUT	Akanshya
2	19D101012003	ARADANI PRAJNA SRI	A. Prajanalai
3	19D101012004	AVULA BINDU SRI VARSHINI	Varshini
4	19D101012005	BLESSY ANGEL KOMMINA	Blessy
5	19D101012006	BOLLIPO JENNIFER LOVE	B. J. Love
6	19D101012007	BYREDDY YASHASWINI	Yashaswini
7	19D101012008	CHENNUBOYINA SAI PHANINDRA	Phanindra
8	19D101012009	CHIPPADA KEERTHANA	Keerthana
9	19D101012010	CHODAPUNEEDI VARSHA PRIYANKA	Varsha C.
10	19D101012011	DADIREDDY JHANSI RANI	JHANSI RANI
11	19D101012012	DAKA LAKSHMI PRATHYUSHA	D. Lakshmi
12	19D101012014	DEVALLA MAHIMA CHOWDARY	Chowdary
13	19D101012015	DEVULAPALLI SUVARNA TEJA	Teja D
14	19D101012016	DIBYANSHI	D. D.
15	19D101012019	GODAVARTHI RADHA BHAVYA SRI	G. Bhavya Sri
16	19D101012020	GOLLAPOTHU NISHANTH VARMA	Narva
17	19D101012021	GOPIKA PURNIMA PERAKA	Gopika
18	19D101012022	GUDDANTI MANASA PADMAVATHI	Padma
19	19D101012023	GUNDLA HARINI	G. Harini
20	19D101012024	GUNNAM HARITHA	Haritha
21	19D101012025	GUNTURI SWETHA	G. Swetha
22	19D101012026	HIMA YEERA SRIKAR MARISSETTI	Srikar
23	19D101012028	JONNALAGADDA JAGAPATHI BHARADWAJ	Jager



24	19D101012030	KAGGA CHAITANYA PRIYA	Priya K.
25	19D101012031	KARATAPU PRIYANKA	Priyanka
26	19D101012033	KAROTHI HARI VAMSI	Vamsi
27	19D101012035	KARRI LEELA KRISHNA REDDY	Leela Krishna
28	19D101012036	KASE SANDEEP	Sandeep
29	19D101012037	KASSE BABITHA	Babitha K.
30	19D101012038	KATI PAVAN	Pavan
31	19D101012040	KEERTHANA K	Keerthana
32	19D101012041	KIMUDU SATHWIKA	SATHWIKA
33	19D101012042	KODAMANCHILI ZEPHANIAH	Zephaniah
34	19D101012044	KONNU MANISH RAJA	Raj
35	19D101012045	KOTHA RHODE CHELSIA	
36	19D101012046	KOTNANA JYOTHSNA RANI	Rani
37	19D101012048	LAKSHMI HARITHA PONDURI	P. L. Haritha
38	19D101012050	MADE JOSHITHA KEERTHI	Joshitha
39	19D101012051	MANEM NIKITHA	Nikitha
40	19D101012055	MOODEKULAM NIKHIL NAIK	Naik Nikhil

  
COORDINATOR

  
HOD

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**STUDENT ATTENDANCE**

Name of the Program: Add-on Course on "Medically compromised Patients"

Date : 09.11.2020 to 14.11.2020

S. No	Roll No.	Student Name	09.11.20	10.11.20	11.11.20	12.11.20	13.11.20	14.11.20	Feedback
1	19D101012001	AAKANSHYA ROUT	P	P	P	P	P	P	4
2	19D101012003	ARADANI PRAJNA SRI	P	P	P	P	P	P	5
3	19D101012004	AVULA BINDU SRI VARSHINI	P	P	P	P	P	P	3
4	19D101012005	BLESSY ANGEL KOMMINA	P	P	P	P	P	P	5
5	19D101012006	BOLLIPO JENNIFER LOVE	A	P	P	P	P	P	4
6	19D101012007	BYREDDY YASHASWINI	P	P	P	P	P	P	3
7	19D101012008	CHENNUBOYINA SAI PHANINDRA	P	P	P	P	A	P	3
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9	19D101012010	CHODAPUNEEDI VARSHA PRIYANKA	P	P	P	P	P	P	5
10	19D101012011	DADIREDDY JHANSI RANI	P	P	P	P	P	P	4
11	19D101012012	DAKA LAKSHMI PRATHYUSHA	P	P	P	A	P	P	3
12	19D101012014	DEVALLA MAHIMA CHOWDARY	P	P	P	P	P	P	5
13	19D101012015	DEVULAPALLI SUVARNA TEJA	P	P	P	P	P	P	4
14	19D101012016	DIBYANSHI	P	P	P	P	P	P	3
15	19D101012019	GODAVARTHI RADHA BHAVYA SRI	P	P	P	P	P	P	3
16	19D101012020	GOLLAPOTHU NISHANTH VARMA	P	P	P	P	P	P	4
17	19D101012021	GOPIKA PURNIMA PERAKA	P	P	P	P	P	P	5
18	19D101012022	GUDDANTI MANASA PADMAVATHI	P	P	P	P	P	P	4
19	19D101012023	GUNDLA HARINI	P	P	P	P	P	P	3



20	19D101012024	GUNNAM HARITHA	P	P	-A	P	P	P	5
21	19D101012025	GUNTURI SWETHA	P	P	P	P	P	P	4
22	19D101012026	HIMA VEERA SRIKAR MARISETTI	P	P	P	-A	P	P	3
23	19D101012028	JONNALAGADDA JAGAPATHI BHARADWAJ	P	P	P	P	P	P	5
24	19D101012030	KAGGA CHAITANYA PRIYA	P	P	P	P	P	P	4
25	19D101012031	KARATAPU PRIYANKA	P	P	P	P	P	P	3
26	19D101012033	KAROTHI HARI VAMSI	P	P	P	P	P	P	3
27	19D101012035	KARRI LEELA KRISHNA REDDY	P	P	P	P	P	P	4
28	19D101012036	KASE SANDEEP	P	P	P	P	P	P	5
29	19D101012037	KASSE BABITHA	P	P	P	P	P	P	5
30	19D101012038	KATI PAVAN	P	P	P	P	P	P	4
31	19D101012040	KEERTHANA K	P	P	P	P	P	P	3
32	19D101012041	KIMUDU SATHWIKA	P	P	P	P	P	P	5
33	19D101012042	KODAMANCHILI ZEPHANIAH	P	P	P	P	P	P	4
34	19D101012044	KONNU MANISH RAJA	P	P	P	P	P	P	3
35	19D101012045	KOTHA RHODE CHELSIA	P	P	P	P	P	P	4
36	19D101012046	KOTNANA JYOTHSNA RANI	P	P	P	P	P	P	4
37	19D101012048	LAKSHMI HARITHA PONDURI	P	P	P	P	A	P	5
38	19D101012050	MADE JOSHITHA KEERTHI	P	P	P	P	P	P	4
39	19D101012051	MANEM NIKITHA	P	P	P	P	P	P	3
40	19D101012055	MOODEKULAM NIKHIL NAIK	P	A	P	P	P	P	5

*Dms*

COORDINATOR

*Haikeshy*

HOD



# LENORA

## INSTITUTE OF DENTAL SCIENCES




NH-16, Rajanagaram, Rajahmundry - 533 294, East Godavari (Dist.), A.P.



## Certificate of Participation

This is to certify that Dr./Mr./Mrs./Ms. DIBYANSHI  
has participated in Add-on Course Program on topic "**Medically compromised Patients**"  
held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East  
Godavari (Dist.) - 533 294, A.P. India, from 09.11.2020 to 14.11.2020.

  
Program Coordinator

  
Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal





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NAAC

(National Assessment and Accreditation Council)

## Certificate of Participation

This is to certify that Dr./Mr./Mrs./Ms. AAKANSHYA ROUT

has participated in **Add-on Course Program** on topic **“Medically compromised Patients”**  
held at **Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 09.11.2020 to 14.11.2020.**

Program Coordinator

Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal



## LENORA INSTITUTE OF DENTAL SCIENCES

(Permitted by Govt. of India / Dental Council of India & Affiliated to Dr.NTRUHS)  
NH-16, Rajanagaram, Rajahmundry, East Godavari (Dt), AP.

Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

Date: 16.11.2020

### PROGRAM REPORT

Name of the Event: Add-on Course on "Medically compromised Patients"

Date : 09.11.2020 to 14.11.2020

Resource Person : Dr. G.Anusha

Reader

Contact No: 9985716722

Mail id: [anushadhoni22a@gmail.com](mailto:anushadhoni22a@gmail.com)

Name of the Coordinator: Dr.Dalsingh

Contact No: 9177747433

Mail id: [dalsingh2007@rediffmail.com](mailto:dalsingh2007@rediffmail.com)

Number of Students attended: 40

Venue: Lecture Hall

#### **OBJECTIVE OF THE PROGRAM:**

Identify the need to modify treatment due to disease or medication of a patient.  
Recognize drugs/medications commonly used by the medically compromised patient. Use critical thinking skills to identify questions to be asked to further establish the patient's medical history/status.

#### **TOPICS COVERED:**

- Common systematic diseases and oral manifestations.
- Dental management of systematic conditions patients.
- Allergic reactions.





#### **OUTCOME OF THE PROGRAM:**

At the end of the program, the student will be able to

- Take a thorough detailed medical, surgical and drug history for all patients undergoing any routine/advanced dental treatment.
- Understand the oral and dental treatment implications while treating a medically compromised patient.
- Do's and don'ts while performing dental procedures in specific medically compromised conditions.
- Explain ways to assess risk and appropriately respond to compromised situations.
- Understand and perform safe practices in a compromised individual

**COORDINATOR**

**HOD**





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Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com); Fax: 0883 2484493

Date: 28.12.2020

## CIRCULAR

This is to inform all III Year students that our department is organizing add-on Course on "Biomedical Waste Management" from 04.01.2021 to 09.01.2021. All Students are requested to attend the Program.

  
Principal  
Lenora Institute of Dental Sciences  
RAJANAGARAM


Copy to: Chairperson

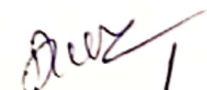
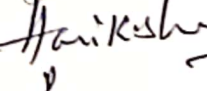
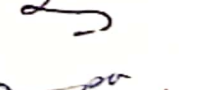
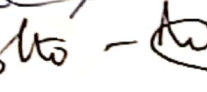
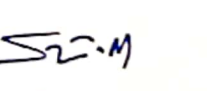
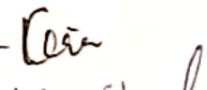
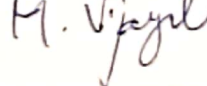
Secretary,

Director,

All HOD's/ Incharges,

CFO.

Dept of PPD 

- ① Dept of Onys - 
- Dept of Perio - 
- Dept of OMR - 
- Cont & Endo - 
- Dept of Prostho - 
- Dept of Pedo - 
- Dept of Ortho - 
- Dept of OP - M. Vijayalakshmi



## REGISTRATION FORM

Name:.....

Dept. ....

Institution:.....

Address for Communication:

Mobile:.....

email: .....

**Free:**  
In-House  
Staff & Students



## PROGRAM COMMITTEE:

### CHIEF PATRON

Mrs. K. Nagamani Garu

Chair Person,

KLR Group of Institution

### PATRON

Mr. Y. Madhusudhan Reddy Garu

Secretary,

KLR Group of Institution

### CONVENOR

Dr. G. Nagarjuna Reddy Garu

Director

Lenora Institute of Dental Sciences

### Resource Person:

Dr. G. Santhi

Sr. Lecturer

Contact No: 9052120465

Mail id: dhaliya2011@gmail.com

### ADDRESS FOR COMMUNICATION:

Dr. Dalsingh

Contact No: 9177747433

Mail id: dalsingh2007@rediffmail.com

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**ADD ON PROGRAM**  
**ON**

**BIOMEDICAL WASTE**  
**MANAGEMENT**

**Dates:**

**04.01.2021 to 09.01.2021**

**Venue:**

**Lecture Hall**



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**Rajahmundry-533 294,**  
**East Godavari (Dist.), A.P. INDIA.**



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NH-16, Rajanagaram, Rajahmundry, East Godavari (Dt), AP.

Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

### LIST OF STUDENT REGISTERED

Name of the Program: Add-on Course on "Biomedical Waste Management"

Date : 04.01.2021 to 09.01.2021

S. No	Roll No.	Student name	Signature
1	13089017	DONDAPATI PREMLAL	P. Premlal
2	13089041	MINDALA SRICHARAN	Sri charan
3	14089032	KORIPALLI SAI SAHAJA	Sahaaja
4	15089053	MARINA TARAKA VARUN KUMAR	Varun
5	15089087	S VENKATA ANJANI SAI SRAVANI	Anjani
6	17089018	CHAPARA DEEKSHA	Ch. Deeksha
7	17089019	DOMMETI JEDIDIAH	Jed
8	17089020	DOWLURI SAROJA KAVYA	Saroja
9	17089021	DUBASI SRIKANTH	Srikanth
10	17089025	GEDDAM TEJASRI	Tej
11	17089031	INJETI ALICE SUSAN	I. A. Susan
12	17089033	J STAINS ASIRVAD MAHENDRADA	Stains
13	17089039	KATE SUDHA KIRAN	Kiran
14	17089041	KILLI BHAVYA	Bhavya
15	17089043	KOMARABATHINI SANNIHITHA	Sannihitha
16	17089044	KONDRU RUTHWIK RUPESH	Rupesh
17	17089045	KORATLA DIVYA CHAITANYA	Divya
18	17089054	MALLAMPALLI SURYAKIRAN	Surya Kiran
19	17089060	M HANISH NAGA MANIKANTA SANTOSH	M. Santosh
20	17089074	PARAMI SUNIL KUMAR	Sunil Kumar
21	17089084	SAKHINETI TEJA SAI VARMA	S. T. S. Varma
22	17089087	MASUPATRI SHRAVYA REDDY	Shravya Reddy
23	17089093	THONDAMALLI SAI SAHITHYA WASUKHE	Wasukhe
24	17089099	BHANU SRI YENEDI	Y. Bhavani

  
COORDINATOR

  
HOD



**STUDENT ATTENDANCE**

Name of the Program: Add-on Course on "Biomedical Waste Management"

Date : 04.01.2021 to 09.01.2021

S. No	Roll No.	Student Name	04.01.21	05.01.21	06.01.21	07.01.21	08.01.21	09.01.21	Feedback
1	13089017	DONDAPATI PREMLAL	P	P	P	P	P	P	5
2	13089041	MINDALA SRICHARAN	P	P	P	P	P	P	4
3	14089032	KORIPALLI SAI SAHAJA	P	P	P	P	P	P	3
4	15089053	MARINA TARAKA VARUN KUMAR	P	P	P	P	P	P	5
5	15089087	S VENKATA ANJANI SAI SRAVANI	P	P	P	P	P	P	5
6	17089018	CHAPARA DEEKSHA	P	P	P	P	P	P	4
7	17089019	DOMMETI JEDIDIAH	P	P	P	P	P	P	4
8	17089020	DOWLURI SAROJA KAVYA	P	P	P	P	P	P	3
9	17089021	DUBASI SRIKANTH	P	P	P	P	P	P	5
10	17089025	GEDDAM TEJASRI	P	P	P	P	P	P	2
11	17089031	INJETI ALICE SUSAN	P	P	P	P	P	P	5
12	17089033	J STAINS ASIRVAD MAHENDRADA	P	P	P	P	P	P	4
13	17089039	KATE SUDHA KIRAN	P	P	P	P	P	P	4
14	17089041	KILLI BHAVYA	P	P	P	P	P	P	3
15	17089043	KOMARABATHINI SANNIHITHA	P	P	P	P	P	P	5
16	17089044	KONDRU RUTHWIK RUPESH	P	P	P	P	P	P	4
17	17089045	KORATLA DIVYA CHAITANYA	P	P	P	P	P	P	3
18	17089054	MALLAMPALLI SURYAKIRAN	P	P	P	P	P	P	3
19	17089060	M HANISH NAGA MANIKANTA SANTOSH	P	P	P	P	P	P	4
20	17089074	PARAMI SUNIL KUMAR	P	P	P	P	P	P	5

21	17089084	SAKHINETI TEJA SAI VARMA	P	P	P	P	P	P	5
22	17089087	MASUPATRI SHRAVYA REDDY	P	P	P	P	P	P	4
23	17089093	THONDAMALLI SAI SAHITHYA WASUKHE	P	P	P	P	P	P	5
24	17089099	BHANU SRI YENEDI	P	P	P	P	P	P	5

  
COORDINATOR

  
HOD





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(National Assessment and Accreditation Council)

## Certificate of Participation

This is to certify that Dr./Mr./Mrs./Ms. INJETI - ALICE SUSAN

has participated in Add-on Course Program on topic "**Biomedical Waste Management**" held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 04.01.2021 to 09.01.2021.

  
Program Coordinator

  
Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal





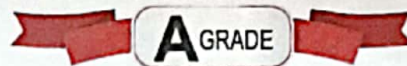
# LENORA

## INSTITUTE OF DENTAL SCIENCES



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NAAC

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## Certificate of Participation

This is to certify that Dr./Mr./Mrs./Ms. KILLI. BHAYYA

has participated in Add-on Course Program on topic "**Biomedical Waste Management**" held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 04.01.2021 to 09.01.2021.

Program Coordinator

Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal





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NH-16, Rajanagaram, Rajahmundry, East Godavari (Dt), AP.

Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com)., Fax: 0883 2484493

Date: 18.01.2021

### PROGRAM REPORT

Name of the Event: Add-on Course on "Biomedical Waste Management"

Date : 04.01.2021 to 09.01.2021

Resource Person : Dr. G. Santhi

Senior Lecturer

Contact No: 9052120465

Mail id: [dhaliya2011@gmail.com](mailto:dhaliya2011@gmail.com)

Name of the Coordinator: Dr.Dalsingh

Contact No: 9177747433

Mail id: [dalsingh2007@rediffmail.com](mailto:dalsingh2007@rediffmail.com)

Number of Students attended: 24

Venue: Lecture Hall

#### **OBJECTIVE OF THE PROGRAM:**

- To protect the risk of spreading diseases.
- To protect the health and well-being of health care workers and the community.
- To protect against injury and potentially fatal infection.
- To provide environment-friendly waste management solutions.
- To promote the quality and sustainability of the environment.

#### **TOPICS COVERED:**

- Segregation
- Storage and Transport.
- Treatment methods.
- Waste disposal.

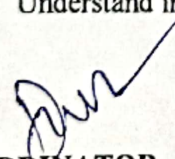
- Types of Biomedical waste.
- Waste management.



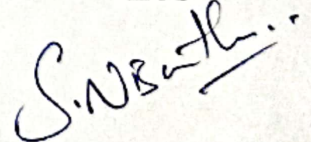
#### **OUTCOME OF THE PROGRAM:**

At the end of the program, the student will be able to

- Analyze various hazards, accidents and its control
- Design waste disposal procedures for different biowastes
- Categorize different bio wastes based on its properties
- Design different safety facility in hospitals
- Propose various regulations and safety norms
- Understand biomedical waste management
- Understand infection control in hospital setup.

  
**COORDINATOR**

**HOD**







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Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

Date: 07.12.2020

## CIRCULAR

This is to inform all IV Year students that our department is organizing add-on Course on "COVID 19 and Oral Manifestations" from 14.12.2020 to 19.12.2020. All Students are requested to attend the Program.

*Cover*  
Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal

Copy to: Chairperson

Secretary,

Director,

All HOD's/ Incharges,

CFO.

① Dept of Onys - *Jay*  
Dept of Perio - *Hairksh*  
Dept of OMR - *L*  
cons & Endo - *o-pu*  
Dept of Jendr - *to*  
Dept of Pedr - *S-M*

Dept of Ortho - *V. Jessie Ratan*  
Dept of OP - *M. Vijaylaxmi*

Dept of Perio - *[Signature]*



## REGISTRATION FORM

Name:.....

Dept. ....

Institution:.....

Address for Communication:

.....

.....

Mobile:.....

email: .....

**Free:**  
In-House  
Staff & Students



## PROGRAM COMMITTEE:

### CHIEF PATRON

Mrs. K. Nagamani Garu  
Chair Person,

KLR Group of Institution

### PATRON

Mr. Y. Madhusudhan Reddy Garu  
Secretary,

KLR Group of Institution

### CONVENOR

Dr. G. Nagarjuna Reddy Garu  
Director

Lenora Institute of Dental Sciences

### Resource Person:

Dr. Sri Rama Rao Sudhamsetty

Sr. Lecturer

Contact No: 9177382366

Mail id: drsriram@gmail.com

### ADDRESS FOR COMMUNICATION:

Dr. Dalsingh

Contact No: 9177747433

Mail id: dalsingh2007@rediffmail.com

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**ADD ON PROGRAM**  
**ON**

**COVID 19 AND**  
**ORAL MANIFESTATIONS**

**Dates:**

**14.12.2020 to 19.12.2020**

**Venue:**

Lecture Hall



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**NH-16, Rajanagaram,**  
**Rajahmundry-533 294,**  
**East Godavari (Dist.), A.P. INDIA.**



(Permitted by Govt. of India / Dental Council of India & Affiliated to Dr.NTRUHS)  
NH-16, Rajanagaram, Rajahmundry, East Godavari (D), AP.

Phones: +91 883 2484492, e-mail: lidersajahmundry@gmail.com, Fax: (0883) 2484493

**LIST OF STUDENT REGISTERED**

Name of the Program: Add-on Course on "COVID 19 and Oral Manifestations"

Date : 14.12.2020 to 19.12.2020

S. No	Roll No.	Student name	Signature
1	1189044	REDDY ARUNA PRATYUSHA	<i>Aruna Pratyusha</i>
2	1289039	RAMPILLA JEEVAN PAUL	<i>Jeevan Paul</i>
3	13089046	NOKKU MARY RUPA	<i>Mary -</i>
4	14089012	DASARI SAI LAKSHMI PRASANNA	<i>D. S. L. Prasanna</i>
5	14089020	GOBBURI SATHISH KUMAR	<i>Sathish Kumar</i>
6	14089035	KUSUMANCHI VENKATA PADMAVATHI ROJA	<i>Padma</i>
7	14089052	SONGA ADAMS NIMISHI	<i>Adams Nimishi</i>
8	15089009	BAPATLA VENKATA PAVANKALYAN	<i>Pavankalyan</i>
9	15089013	CHALAMALASETTY AJAY NAGABABU	<i>Ajay -</i>
10	15089014	CHATRAGADDA ANOOP STAINES	<i>Anoop Staines</i>
11	15089032	GUMMALLA.BHAVYA SREE	<i>Sree</i>
12	15089043	KOLA REVANTH KUMAR	<i>K. Revanth Kumar</i>
13	15089045	KOMMA BALA SAI TEJA	<i>Sai Teja</i>
14	15089047	KSHATRIYA GAYATRI BAI	<i>Gayatri</i>
15	15089059	MUKKERA SRIHARI REDDY	<i>Srihari Reddy</i>
16	15089064	NELALA SUZAN PRINCY	<i>Princy</i>
17	15089071	POOJA NELLORE	<i>Pooja</i>
18	15089075	RAYUDU SRIVIDYA	<i>Srividya</i>
19	15089081	SHAIK RESHIMA YASMINE	<i>Reshima</i>
20	15089090	TEJASWI PAMARTHI	<i>Tejaswi</i>
21	15089099	Y.LIKHITA	<i>Likhita</i>
22	16089002	ALAVALAPATI SAI KIRAN	<i>Sai Kiran</i>
23	16089006	AVVARI NAMRATHA UMASRI	<i>Umasri</i>

24	16089009	BALABADRA SAI VINITHA	Vinitha
25	16089015	CHUNDI SATHRISHITHA	Sathritha
26	16089018	DANGETI RAMYA	Ramyas D
27	16089020	ERAGONI VASAVI	Vasavi
28	16089034	KADALI NAVEEN MANIKANTA	Manikanta
29	16089035	KAMADI HARIBABU	K. Haris
30	16089037	KAMMARA MADHAVI	Madhavi
31	16089038	KARASALA RACHEL MANO VARSHITHA	Varshitha
32	16089041	KOLLU NIKHILA	K. Nikhila
33	16089057	MOHAMMAD RANA AFREEN	Afreer
34	16089058	MYLABATHULA CHRISTINA JOY	Joy
35	16089061	NEELAM DIVYA JYOTHI	Divya Jyothi
36	16089062	NIHARIKA JUVVALADINNE	N. S. Niharika
37	16089066	PAMARTHY SATYA SAINADH	Sainadh
38	16089067	PANABAKA SRIJA	Srija P.
39	16089069	PARIMI SUDHA	Sudha
40	16089070	PASUPULETI SATYA PRIYA NAIDU	Satyapriya Naidu
41	16089073	PENUMAKA SNEHA SRI	P. S. Sneha
42	16089079	RANDI SRI LEKHYA	Lekhya
43	16089080	S KAVYASREE	Kavyasree
44	16089084	SHAIK JOHN NASHEEN	Nasheen
45	16089086	SHAIK SHAKEL AHMED	Shakel
46	16089097	YARRABOINA BHARATHI	Y. Bharathi
47	16089100	YENDLURI RADHIKA	Y. Radhika

  
COORDINATOR

  
HOD



## STUDENT ATTENDANCE

Name of the Program: Add-on Course on "COVID 19 and Oral Manifestations"

Date : 14.12.2020 to 19.12.2020

S. No	Roll No.	Student Name	14.12.20	15.12.20	16.12.20	17.12.20	18.12.20	19.12.20	Feedback
1	1189044	REDDY ARUNA PRATYUSHA	P	P	P	P	P	P	5
2	1289039	RAMPILLA JEEVAN PAUL	P	P	P	P	P	P	4
3	13089046	NOKKU MARY RUPA	P	P	P	P	P	P	3
4	14089012	DASARI SAI LAKSHMI PRASANNA	P	A	P	P	P	P	5
5	14089020	GOBBURI SATHISH KUMAR	P	P	P	P	P	P	4
6	14089035	KUSUMANCHI VENKATA PADMAVATHI ROJA	P	P	P	P	P	P	3
7	14089052	SONGA ADAMS NIMISHI	P	P	P	P	P	P	3
8	15089009	BAPATLA VENKATA PAVANKALYAN	P	P	P	P	P	P	4
9	15089013	CHALAMALASETTY AJAY NAGABABU	P	P	P	P	P	P	5
10	15089014	CHATRAGADDA ANOOP STAINES	P	P	P	P	P	P	4
11	15089032	GUMMALLA.BHAVYA SREE	P	P	P	P	P	P	3
12	15089043	KOLA REVANTH KUMAR	P	P	P	P	P	P	3
13	15089045	KOMMA BALA SAI TEJA	P	P	A	P	P	P	4
14	15089047	KSHATRIYA GAYATRI BAI	A	P	P	P	P	P	5
15	15089059	MUKKERA SRIHARI REDDY	P	P	P	P	P	P	4
16	15089064	NELALA SUZAN PRINCY	P	P	P	P	P	P	3
17	15089071	POOJA NELLORE	P	P	P	P	P	P	4
18	15089075	RAYUDU SRIVIDYA	P	P	P	P	P	P	5
19	15089081	SHAIK RESHMA YASMINE	P	P	P	P	A	P	4

20	15089090	TEJASWI PAMARTHI	P	A	P	P	P	P	5
21	15089099	Y.LIKHITA	P	P	P	P	P	P	4
22	16089002	ALAVALAPATI SAI KIRAN	P	P	P	P	P	P	3
23	16089006	AVVARI NAMRATHA UMASRI	P	P	P	P	P	P	4
24	16089009	BALABADRA SAI VINITHA	P	P	P	P	P	P	3
25	16089015	CHUNDI SAITRISHITHA	P	P	P	P	P	P	3
26	16089018	DANGETI RAMYA	A	P	P	P	P	P	5
27	16089020	ERAGONI VASAVI	P	P	P	P	P	P	4
28	16089034	KADALI NAVEEN MANIKANTA	P	P	P	P	P	P	3
29	16089035	KAMADI HARIBABU	P	P	P	A	P	P	5
30	16089037	KAMMARA MADHAVI	P	P	P	P	P	P	4
31	16089038	KARASALA RACHEL MANO VARSHITHA	P	P	P	P	P	P	3
32	16089041	KOLLU NIKHILA	P	P	P	P	P	P	5
33	16089057	MOHAMMAD RANA AFREEN	P	P	P	P	P	P	4
34	16089058	MYLABATHULA CHRISTINA JOY	P	P	P	P	P	P	3
35	16089061	NEELAM DIVYA JYOTHI	P	P	A	P	P	P	5
36	16089062	NIHARIKA JUVVALADINNE	P	P	P	P	P	A	4
37	16089066	PAMARTHY SATYA SAINADH	P	P	P	P	P	P	3
38	16089067	PANABAKA SRIJA	P	P	P	P	P	P	5
39	16089069	PARIMI SUDHA	P	P	P	P	P	P	5
40	16089070	PASUPULETI SATYA PRIYA NAIDU	P	P	P	P	P	P	4
41	16089073	PENUMAKA SNEHA SRI	P	P	P	P	P	P	3
42	16089079	RANDI SRI LEKHYA	P	P	P	P	P	P	5
43	16089080	S KAVYASREE	P	P	P	P	P	P	5
44	16089084	SHAIK JOHN NASHEEN	P	P	P	P	P	P	4
45	16089086	SHAIK SHAKEL AHMED	P	P	P	P	P	P	3
46	16089097	YARRABOINA BHARATHI	P	P	P	P	P	P	3
47	16089100	YENDLURI RADHIKA	P	P	P	P	P	P	5

  
COORDINATOR

  
HOD





# LENORA

## INSTITUTE OF DENTAL SCIENCES



NH-16, Rajanagaram, Rajahmundry - 533 294, East Godavari (Dist.), A.P.



### *Certificate of Participation*

This is to certify that Dr./Mr./Mrs./Ms. NOKKU. MARY RUPA

has participated in **Add-on Course Program** on topic **"COVID 19 and Oral Manifestations"** held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 14.12.2020 to 19.12.2020.

Program Coordinator

Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal





# LENORA

## INSTITUTE OF DENTAL SCIENCES



NH-16, Rajanagaram, Rajahmundry - 533 294, East Godavari (Dist.), A.P.

Accredited with



NAAC

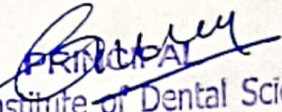
(National Assessment and Accreditation Council)

### *Certificate of Participation*

This is to certify that Dr./Mr./Mrs./Ms. KOLA. REVANTH KUMAR

has participated in Add-on Course Program on topic "COVID 19 and Oral Manifestations" held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 14.12.2020 to 19.12.2020.

  
Program Coordinator

  
Principal  
Lenora Institute of Dental Sciences  
RAJANAGARAM

Principal





## LENORA INSTITUTE OF DENTAL SCIENCES



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NH-16, Rajanagaram, Rajahmundry, East Godavari (Dt), AP.

Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

Date: 21.12.2020

### PROGRAM REPORT

Name of the Program: Add-on Course on "COVID 19 and Oral Manifestations"

Date : 14.12.2020 to 19.12.2020

Resource Person : Dr. Sri Rama Rao Sudhamsetty

Senior Lecturer

Contact No: 9177382366

Mail id: [drsriram@gmail.com](mailto:drsriram@gmail.com)

Name of the Coordinator: Dr.Dalsingh

Contact No: 9177747433

Mail id: [dalsingh2007@rediffmail.com](mailto:dalsingh2007@rediffmail.com)

Number of Students attended: 47

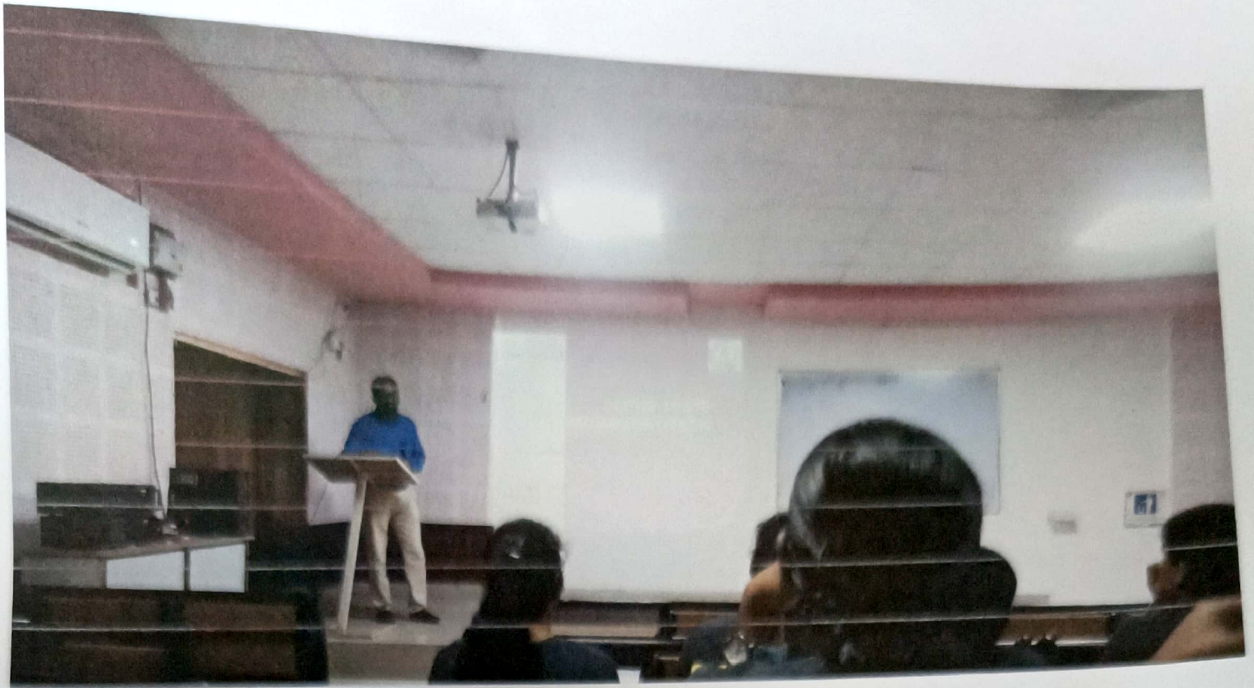
Venue: Lecture Hall

#### **OBJECTIVE OF THE PROGRAM:**

- Understand the nature of viruses.
- Describe how they multiply within their host.
- Understand the nature of Covid 19.
- Describe ways of minimises the spread to yourself and the community.

#### **TOPICS COVERED:**

- List of COVID – 19 oral manifestations
- Pathophysiology
- Lack of task
- Lesions due to decreased immunity
- COVID – Tongue



#### **OUTCOME OF THE PROGRAM:**

At the end of the program, the student will be able to

- Explain how to use a mobile X-ray machine effectively to perform mobile chest X-ray examination for a COVID-19 patient
- Understand the parameters which can optimise the radiation dose for a mobile chest X-ray examination on a COVID-19 patient

  
**COORDINATOR**

  
**HOD**





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Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com); Fax: 0883 2484493

Date: 01.09.2020

## CIRCULAR

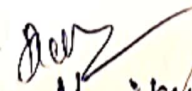
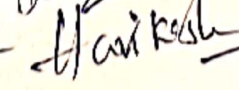
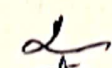
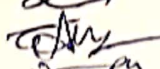
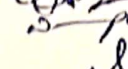
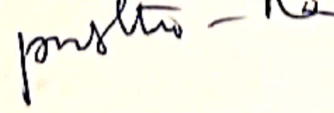
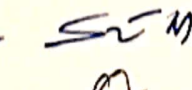
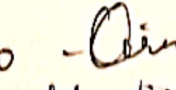
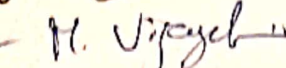
This is to inform all IV Year students that our department is organizing add-on Course on "Hormones in Dentistry" from 07.09.2020 to 12.09.2020. All Students are requested to attend the Program.

  
Lenora Institute of Dental Sciences  
RAJANAGARAM

Principal

Copy to: Chairperson

- Secretary,
- Director,
- All HOD's/ Incharges,
- CFO.

- ① Dept of Omg - 
- Dept of Perio - 
- Dept of OMR - 
- Dept of PMS - 
- Cons & Endo - 
- Dept of Prostho - 
- Dept of Pado - 
- Dept of Ortho - 
- Dept of OP - 



## REGISTRATION FORM

Name:.....

Dept. ....

Institution:.....

Address for Communication:

.....

.....

Mobile:.....

email: .....

**Free:**  
**In-House**  
**Staff & Students**



## PROGRAM COMMITTEE:

### CHIEF PATRON

Mrs. K. Nagamani Garu  
Chair Person,

KLR Group of Institution

### PATRON

Mr. V. Madhusudhan Reddy Garu  
Secretary,  
KLR Group of Institution

### CONVENOR

Dr. G. Nagarjuna Reddy Garu  
Director  
Lenora Institute of Dental Sciences

### Resource Person:

**Dr. Latha**

Lecturer

Contact No: 9416781875

Mail id: latha.yalla@gmail.com

### ADDRESS FOR COMMUNICATION:

*Dr. Dalsingh*

Contact No: 9177747433

Mail id: dalsingh2007@rediffmail.com

**LENORA**  
**INSTITUTE OF DENTAL SCIENCES**



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**A GRADE**  
NAAC  
(National Assessment and Accreditation Council)



**ADD ON PROGRAM**  
**ON**

**HORMONES IN DENTISTRY**

**Dates:**

**07.09.2020 to 12.09.2020**

**Venue:**

**Lecture Hall**



**LENORA**  
**INSTITUTE OF DENTAL SCIENCES**

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**NH-16, Rajanagaram,**  
**Rajahmundry-533 294,**  
**East Godavari (Dist.), A.P. INDIA.**



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Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

**LIST OF STUDENT REGISTERED**

Name of the Event: Add-on Course on "Hormones in Dentistry"

Date : 07.09.2020 to 12.09.2020

S. No	Roll No.	Student name	Signature
1	13089016	DANGETI NAGA SOMA RAJU	Soma
2	13089022	GOGADA SANDYA RANI	G. Sandhya Rani
3	13089045	NEELAPALA CHANDRIKA	Chaudhary
4	16089003	ALEKHYA BATTULA	Battula
5	16089017	DANDA DURGA SIVA SAI SIDDHARTHA	Siddhartha
6	16089022	GANJI VIJAY SHEKINAH	G. V. Shekinah
7	16089060	NARASIMHULA SRINIVAS	Srinivas
8	17089001	MOHMMAD AFREEN	Afreen
9	17089003	ALURI SUMA MADHURI	Madhuri
10	17089004	A POORNA VENKATA RAJENDRA KUMAR	Rajendra Kumar
11	17089005	B JEEVANAJYOTHI	Jyothi
12	17089006	BANDI SANDEEP PAUL	Sandeep Paul
13	17089007	BAVISETTY GEETHANJALI	Geetha
14	17089008	BLESSI HADASSA JUTKE	J. Hadassa
15	17089009	BODA SUSAN NIKHITHA	Susan Nikhitha
16	17089010	BODAPATI VINCENT KUMAR	Vincent
17	17089011	BODDUPALLI SUDEEPHI	B. Sudeephi
18	17089012	BONDADA DEEPIYA	Deepya
19	17089013	CHANDIKA VANI SRI	Vani
20	17089014	CHILUKURI MADHURI REDDY	Madhuri
21	17089015	CHILUVURU J KEERTHANA	Keethana
22	17089016	DADALA GRACE KEZIAH	Kezia
23	17089017	DAGGUPATI AASRITHA	Aasritha



24	17089022	DULLAPALLI JOSHUA	Joshe
25	17089023	GADDAM JAYA SAI MEGHANA	G. Sai Meghana
26	17089024	GANTA CHRISTINA	Christina
27	17089026	GONABOYINA ANUSHA	Anusha
28	17089028	GUMMALLA HARSHA SREE	Harsha Sree
29	17089029	GURUJU FLORITHA	Floritha
30	17089030	GUTAM KAMAL LOUIS	Louis
31	17089035	JOSHUA VINEETH LIKITHAPUDI	L. Joshua Vineeth
32	17089036	KONDAMUDI AROHANA SHAKINAH	Arohana
33	17089037	KADIYALA HLADINI SREEKARA LAKSHMI SARAVANI	Saravani
34	17089038	KALLURI VENKATA SHASHANK	Shashank
35	17089042	KODAVATIKANTI HARIKA	Harika
36	17089046	KORITEPATI SUDHEERA	Sudheera
37	17089047	KOTA SARAH PRAVALLIKA	K. Sarah Pravallika
38	17089048	KOYA DEVI PRIYA	Priya
39	17089049	KUKKALA UJWALA	Ujwala
40	17089050	LALITHA SANKEERTHANA VEGESNA	Sankeertana
41	17089051	LAM REETHIKA JESSIE	Jessie
42	17089052	MADDA SUSEELA KUMARI	Suseela
43	17089053	MADDALA VINEELA HADASSA	Hadassa
44	17089055	MANDAPATI VENKATA SAI SUDHA	Sai Sudha
45	17089056	MANGAPATNAM LILLY GRACE	Lilly Grace
46	17089057	MENTE VINEETHA	VINEETHA
47	17089058	MD KASIM BEE	Bee Kasim
48	17089059	MULAKA SHEFALI JEANNE	Shefali
49	17089061	MUTYALA ROJI	Roji
50	17089062	MUTHYALA VENKATA NAGA HARSHITHA	Harshitha
51	17089063	NAGOTHU MARIA ROSE MARY	Rose Mary
52	17089064	NAKKA KRUTHI PRATYUSHA	Prathyusha
53	17089065	NAMBURI MEENAKSHI SREE SRAVYA	Sravya
54	17089066	NANDIKA NAGA SOWMYA	Sowmya
55	17089067	NAZISH E ZAHERA	Zahera
56	17089068	NEELAM PRASANNA KUMARI	Prasanna



57	17089069	NIPPATLAPALLI SARAH RACHEL	Sarah Rachel
58	17089070	NUTAKKI JYOTHI	Jyoti
59	17089071	NUTHIALAPATHI SHEEBA ANUHIYA	Sheeba
60	17089072	PALLI MERCY ANGEL	Angel
61	17089073	PAPPALA HARSHATH KUMAR	Kumar
62	17089075	PASALA SOWMYA	Sowmya
63	17089076	PITHANI GLORY SRILEKHA	P. Glory Srilekha
64	17089077	KAKARA PRAISY ANGEL	Angel
65	17089078	RACHARLA SUNDAR	Sundar
66	17089079	RAYUDU LAXMI TULASI	Tulasi
67	17089080	REGULAGADDA JAYARAJ	Jayaraj
68	17089082	RUDRAPATI FRANCIS RAJPAUL	Rajpaul
69	17089083	S.K.DEEPTHI	Deepthi
70	17089086	SHAIK SIMRAN	Simran
71	17089088	SINGAVARAPU SUSRUSHA	Susrusha
72	17089089	SODADASI DEEVENA HADASSAH	Hadassah
73	17089090	SUNKARA MANJUSHA	Manjusha
74	17089091	THADIKAMALLA SUSHMA	Sushma
75	17089092	TIRUMURU HARSHITHA	T. Harshitha
76	17089094	UDUMULA BALA MARY MADHULIKA REDDY	Madhu
77	17089096	VELPULA PRAJWALA	Prajwal
78	17089097	VEPURI PRISCILLA PRIYANKA	Priyanka
79	17089098	YARRAM SOWMYA KANTHI	Sowmya
80	17089100	ZAKKAM ANISHA MONICA	Anisha



COORDINATOR



HOD



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## STUDENT ATTENDANCE

Name of the Event: Add-on Course on "Hormones in Dentistry"

Date : 07.09.2020 to 12.09.2020

S. No	Roll No.	Student Name	07.09.20	08.09.20	09.09.20	10.09.20	11.09.20	12.09.20	Feedback
1	13089016	D NAGA SOMA RAJU	P	P	P	P	P	P	4
2	13089022	GOGADA SANDYA RANI	P	P	P	P	P	P	4
3	13089045	NCHANDRIKA	P	P	P	P	P	P	5
4	16089003	ALEKHYA BATTULA	P	P	P	P	P	P	4
5	16089017	D SAI SIDDHARTHA	P	P	P	P	P	P	5
6	16089022	GANJI VIJAY SHEKINAH	P	P	P	P	P	P	4
7	16089060	N SRINIVAS	P	P	P	P	P	P	5
8	17089001	MOHMMAD AFREEN	P	P	P	P	P	P	4
9	17089003	ALURI SUMA MADHURI	P	P	P	P	P	P	4
10	17089004	A RAJENDRA KUMAR	P	P	P	P	P	P	3
11	17089005	B JEEVANAJYOTHI	P	P	P	P	P	P	5
12	17089006	BANDI SANDEEP PAUL	P	P	P	P	P	P	4
13	17089007	BGEETHANJALI	P	P	P	P	P	P	4
14	17089008	BLESSI HADASSA JUTKE	P	P	P	P	A	P	4
15	17089009	BODA SUSAN NIKHITHA	A	P	P	P	P	P	5
16	17089010	BVINCENT KUMAR	P	P	P	P	P	P	5
17	17089011	BSUDEEPTHI	P	P	P	P	P	P	5
18	17089012	BONDADA DEEPIYA	P	P	P	P	P	P	5
19	17089013	CHANDIKA VANI SRI	P	P	P	P	P	P	5
20	17089014	C MADHURI REDDY	P	P	P	P	P	P	5
21	17089015	C J KEERTHANA	P	P	A	P	P	P	4



22	17089016	D GRACE KEZIAH	P	P	P	P	P	P	3
23	17089017	DAGGUPATI AASRITHA	P	P	P	P	P	P	4
24	17089022	DULLAPALLI JOSHUA	P	P	P	P	P	P	3
25	17089023	GJAYA SAI MEGHANA	P	P	P	P	P	P	5
26	17089024	GANTA CHRISTINA	P	P	P	P	P	P	5
27	17089026	GONABOYINA ANUSHA	P	P	P	P	P	P	3
28	17089028	G HARSHA SREE	P	P	P	P	P	P	4
29	17089029	GURUJU FLORITHA	P	P	P	P	P	P	4
30	17089030	GUTAM KAMAL LOUIS	P	P	P	A	P	P	4
31	17089035	J VINEETH LIKITHAPUDI	P	P	P	P	P	P	4
32	17089036	K AROHANA SHAKINAH	P	P	P	P	P	P	4
33	17089037	K LAKSHMI SARAVANI	P	P	P	P	P	P	4
34	17089038	K VENKATA SHASHANK	P	A	P	P	P	P	4
35	17089042	K HARIKA	P	P	P	P	P	P	5
36	17089046	K SUDHEERA	P	P	P	P	P	P	3
37	17089047	K PRAVALLIKA	P	P	P	P	P	P	4
38	17089048	KOYA DEVI PRIYA	P	P	P	P	P	P	3
39	17089049	KUKKALA UJWALA	P	P	P	P	P	P	4
40	17089050	L VEGESNA	P	P	P	P	P	P	5
41	17089051	LAM REETHIKA JESSIE	P	P	P	P	P	P	5
42	17089052	M SUSEELA KUMARI	P	P	P	P	P	P	5
43	17089053	M VINEELA HADASSA	P	P	P	P	P	P	4
44	17089055	M VENKATA SAI SUDHA	P	P	P	P	P	P	4
45	17089056	M LILLY GRACE	P	P	P	P	P	P	4
46	17089057	MENTE VINEETHA	P	P	P	P	P	P	3
47	17089058	MD KASIM BEE	P	P	P	P	P	P	4
48	17089059	M SHEFALI JEANNE	P	P	P	P	P	P	4
49	17089061	MUTYALA ROJI	P	P	P	P	P	P	4
50	17089062	M NAGA HARSHITHA	P	P	P	P	P	P	5
51	17089063	N MARIA ROSE MARY	P	P	P	P	P	P	5
52	17089064	N KRUTHI PRATYUSHA	P	P	P	P	P	P	5
53	17089065	N SREE SRAVYA	P	P	P	P	P	P	4

54	17089066	N NAGA SOWMYA	P	P	P	P	P	P	5
55	17089067	NAZISH E ZAHERA	P	P	P	P	P	P	5
56	17089068	N PRASANNA KUMARI	P	P	P	P	P	P	4
57	17089069	N SARAH RACHEL	P	P	P	P	P	P	4
58	17089070	NUTAKKI JYOTHI	P	P	P	P	P	P	3
59	17089071	N SHEEBA ANUHYA	P	P	P	P	P	P	4
60	17089072	PALLI MERCY ANGEL	P	P	P	P	P	P	4
61	17089073	P HARSHATH KUMAR	P	P	P	P	P	P	4
62	17089075	PASALA SOWMYA	P	P	P	P	P	P	4
63	17089076	P SRILEKHA	P	P	P	P	P	P	4
64	17089077	K PRAISY ANGEL	P	P	P	P	P	P	3
65	17089078	RACHARLA SUNDAR	A	P	P	P	P	P	4
66	17089079	RAYUDU LAXMI TULASI	P	P	P	P	P	P	5
67	17089080	R JAYARAJ	P	P	P	P	P	P	5
68	17089082	R FRANCIS RAJPAUL	P	P	P	P	P	P	4
69	17089083	S.K.DEEPTHI	P	P	P	P	P	P	4
70	17089086	SHAIK SIMRAN	P	P	P	P	P	P	4
71	17089088	S SUSRUSHA	P	P	P	P	P	P	4
72	17089089	S DEEVENA HADASSAH	P	P	P	P	P	P	4
73	17089090	SUNKARA MANJUSHA	P	P	P	P	P	P	5
74	17089091	T SUSHMA	P	P	P	P	P	A	5
75	17089092	TIRUMURU HARSHITHA	P	P	P	P	P	P	4
76	17089094	U MADHULIKA REDDY	P	P	P	P	P	P	3
77	17089096	VELPULA PRAJWALA	P	P	P	P	P	P	3
78	17089097	V PRISCILLA PRIYANKA	P	P	P	P	P	P	4
79	17089098	Y SOWMYA KANTHI	P	P	P	P	A	P	4
80	17089100	Z ANISHA MONICA	P	P	P	P	P	P	5

  
COORDINATOR

  
HOD



LIDS



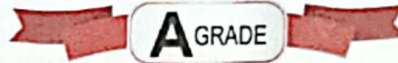
# LENORA

## INSTITUTE OF DENTAL SCIENCES



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Accredited with



NAAC

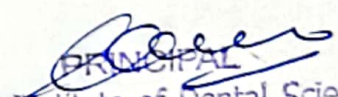
(National Assessment and Accreditation Council)

### *Certificate of Participation*

This is to certify that Dr./Mr./Mrs./Ms. D. Naga Soma raju

has participated in Add-on Course Program on topic "Hormones in Dentistry" held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 07.09.2020 to 12.09.2020.

  
Program Coordinator

  
Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal



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### *Certificate of Participation*

This is to certify that Dr./Mr./Mrs./Ms. N. Srinivas

has participated in Add-on Course Program on topic "Hormones in Dentistry" held at Lenora Institute of Dental Sciences, NH-16, Rajanagaram, Rajahmundry, East Godavari (Dist.) - 533 294, A.P. India, from 07.09.2020 to 12.09.2020.

Program Coordinator

PRINCIPAL  
Lenora Institute of Dental Sciences  
RAJANAGARAM  
Principal





## LENORA INSTITUTE OF DENTAL SCIENCES

(Permitted by Govt. of India / Dental Council of India & Affiliated to Dr.NTRUHS)

NH-16, Rajanagaram, Rajahmundry, East Godavari (Dt), AP.

Phones: +91 883 2484492, e-mail: [lidsrajahmundry@gmail.com](mailto:lidsrajahmundry@gmail.com), Fax: 0883 2484493

Date: 14.09.2020

### PROGRAM REPORT

Name of the Event: Add-on Course on "Hormones in Dentistry"

Date : 07.09.2020 to 12.09.2020

Resource Person : Dr. Latha

Lecturer

Contact No: 9416781875

Mail id: [latha.yalla@gmail.com](mailto:latha.yalla@gmail.com)

Name of the Coordinator: Dr.Dalsingh

Contact No: 9177747433

Mail id: [dalsingh2007@rediffmail.com](mailto:dalsingh2007@rediffmail.com)

Number of Students attended: 80

Venue: Lecture Hall

#### OBJECTIVE OF THE PROGRAM:

- Identify the contributions of the endocrine system to homeostasis.
- Discuss the chemical composition of hormones and the mechanisms of hormone action.
- Summarize the site of production, regulation, and effects of the hormones of the pituitary, thyroid, parathyroid, adrenal, and pineal glands.

#### TOPICS COVERED:

- Hormones regulation
- Endocrine disorders
- Dwarfism
- Thyroid disorders





### **OUTCOME OF THE PROGRAM:**

At the end of the program, the student will be able to

- Understand the general functions of the endocrine system
- Define endocrine and hormone.
- Describe the location of various hormone receptors and mechanisms of their activation
- Describe intracellular signaling after hormone receptor activation

**COORDINATOR**

**HOD**