



IFSSH - South Asian Regional Course in Hand Surgery

3rd to 5th July, 2015 | Venue: Ganga Hospital, Coimbatore, India



OVER
25
LIVE
SURGERIES

OPERATIVE
DEMONSTRATION
&
DIDACTIC
LECTURES

IMPRESSIVE
INTERNATIONAL
FACULTY

- **Dr. Goo-Hyun Baek,**
South Korea
- **Dr. Amit Gupta,**
USA
- **Dr. P.C. Ho,**
Hong Kong
- **Dr. Don Lalonde,**
Canada
- **Dr. Michael Tonkin,**
President IFSSH, Australia
and
- **National Faculty**

International Federation of Societies for Surgery of the Hand as part of its educational initiative sponsors Hand Surgery training courses in different parts of the world. As part of this initiative this course is run along with the endorsement of the Indian Society for Surgery of the Hand and the host organization, Ganga Hospital, Coimbatore. This 3 day workshop will have operative demonstrations on all aspects of hand surgery ranging from congenital hands, post traumatic reconstructions, wide awake hand surgery, microsurgery and wrist arthroscopy. There will be something for everyone irrespective of type and nature of practice and level of training.

It is an opportunity not to be missed!

- **Dr. S. Raja Sabapathy**
Course Chairman
- **Dr. Ravindra Bharathi**
- **Dr. Hari Venkatramani**
Organising Secretaries
- **Dr. Praveen Bharadwaj**
Workshop Coordinator
Mobile : 99445 62422

Course Secretariat:



Ganga Hospital

313, Mettupalayam Road,
Coimbatore - 641 043, India
Ph: 0422 - 2485000 Fax: 0422 - 2486444
Email: rajahand@gmail.com
www.gangahospital.com



Proposed Live Surgeries to be covered :

Basic Hand Surgery Procedures

Trigger finger, thumb release
Wrist Ganglion excision
Carpal tunnel release

Acute Trauma Reconstruction

Flexor & Extensor tendon repair
Flaps for Finger tip cover – V-Y, Oblique
Triangular, Homo digital flaps
Cross finger flap
Posterior interosseous flap
Groin flap

Microsurgery

Repair of Nerves of the wrist and hand
Nerve grafting Techniques
Brachial Plexus Exploration & Nerve Transfer
Replantation (subject to availability)
Free Flap to upper limb

Congenital Hand Reconstruction

Syndactyly correction
Thumb duplication correction
Pollicisation
Cleft hand correction

Fracture fixation

Fixation of phalangeal and metacarpal fractures
Bennett's fracture
PIP joint fracture dislocation
Ulnar collateral ligament repair
Mallet finger

Scaphoid, Wrist and Distal Radius

Distal radius plate fixation
Distal radius-wire fixation
Scaphoid fixation
Correction of mal-union distal radius
Scaphoid non-union bone grafting
Proximal Row Carpectomy
Wrist Arthrodesis

Wrist Arthroscopy

TFCC Repair
Radiocarpal arthroscopy
Proximal row carpectomy
Four corner fusion

Tendon Transfer and Secondary procedures

Claw correction, Opponensplasty
Radial nerve tendon transfer
Deformity correction in Cerebral Palsy
Correction of shoulder deformity in Birth Palsy
Correction of forearm and hand in Birth Palsy
Trapezius transfer

Final list will be determined on the availability of patients at that time.

Registration Fees :

Upto 31 st March, 2015	-	Rs. 5000.00
April 1 st to May 15 th , 2015	-	Rs. 6000.00
From 16 th May onwards	-	Rs. 7500.00
Overseas Registration	-	US \$ 100

Cheque to be made in the name of **GPRM Trust** and please send it to the Course Secretariat Address.

To make Wire transfer the Bank details are :

Bank	:	Karur Vysya Bank Limited
Account Name	:	GPRM Trust
Account No	:	1120115000010920
Bank Address	:	577, Oppanakara Street, Coimbatore - 641 001, Tamil Nadu, India
MICR No	:	641240007
IFSC/RTGS Code	:	KVB L0001120
Swift Code	:	KVBLINBBCBM

Accommodation Details :

Hotel	Single	Double
Residency	Rs. 4750/-	Rs. 5000/-
Rathna Residency	Rs. 2720/-	Rs. 3300/-
Vijay Paradise	Rs. 2100/-	Rs. 2400/-
SPR Inn	Rs. 1500/-	Rs. 2000/-
M.K. Lodge	Rs. 800/-	Rs. 1000/-

Book your accommodation before 31st May, 2015 by sending one day's room rent as advance.

Course Secretariat:



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Tel : 0422 - 2485000 | Fax: 0422 - 2486444

For details please visit the website:

www.gangahospital.com

Contact Details Email ID:

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Secretaries :

Mr. Seshagiri

Mrs. Immaculate

Mobile : +91 99423 85334

Mobile : +91 9487072456





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Registration Form

Name of Delegate :

Title (Professor) Dr/Mr/Ms:

Name of the Institution :

Postal Address :

:

:

State :

Country : Pincode

Mobile Number :

Land line Number :

Fax Number :

Email address :

Payment Mode:

By Cheque No: Dt: Rs.

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For Wire Transfers:

UTR No: Dt: Rs.

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