



# SURENDERA DENTAL COLLEGE & RESEARCH INSTITUTE

An Enterprise of  
Late Smt. Vidyawanti Labhu Ram Foundation  
For Science Research & Social Welfare

No SDC&RI/18/ 18914

Dated: 18-12-2018

To  
The Controller of Examination  
Rajasthan University of Health Sciences  
Jaipur

Subject: Submission of dissertation synopsis.

Dear Sir,

With reference to the above-mentioned subject, we are enclosing herewith 3 copies of dissertation synopsis for each 27 Post Graduate student of 1st year MDS for the session 2018-19. Department wise list is as follows:

## DEPARTMENT OF CONSERVATIVE DENTISTRY AND ENDODONTICS

S.No.	Name of student	Name of guide
1	Shefali Goyal	Dr. Yogesh Kumar
2	Somya Jain	Dr. Yogesh Kumar
3	Kavneet Takhar	Dr. Neetu Jindal

## DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPAEDICS

S.No.	Name of student	Name of guide
1	Akankasha Kataria	Dr. Sachin Ahuja
2	Abhishek Mutneja	Dr. Sachin Ahuja
3	Hibu Dora	Dr. Seema Gupta

## DEPARTMENT OF PAEDIATRIC AND PREVENTIVE DENTISTRY

S.No.	Name of student	Name of guide
1	Priyanka Kumari	Dr. Virinder Goyal
2	Heema Sambyal	Dr. Virinder Goyal
3	Ochin Tatak	Dr. Kanika Gupta Verma

## DEPARTMENT OF PERIODONTOLOGY AND OAL IMPLANTOLOGY

S.No.	Name of student	Name of guide
1	Geyasri Vinnakota	Dr. Sanjeev Kumar Salaria
2	Puneet Bhushan Kalra	Dr. Sanjeev Kumar Salaria
3	Piyush Pareek	Dr. Rajni Aggarwal

## DEPARTMENT OF PROSTHODONTICS INCLUDING CROWN AND BRIDGE

S.No.	Name of student	Name of guide
1	Avei Puro	Dr. Shashikala Jain
2	Japjee Uppal	Dr. Shashikala Jain
3	Kajal Balana	Dr. Sandeep Kumar



Contd...



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**DEPARTMENT OF ORAL AND MAXILLOFACIAL SURGERY**

S.No.	Name of student	Name of guide
1	Kapil Kumar	Dr. Dinesh Kumar Verma
2	Sheffali Walia	Dr. Dinesh Kumar Verma
3	Asheen Gupta	Dr. Shallu Bansal

**DEPARTMENT OF ORAL AND MAXILLOFACIAL PATHOLOGY AND MICROBIOLOGY**

S.No.	Name of student	Name of guide
1	Dr. Amisha Kakkar	Dr. R. Karthikeyan
2	Dr. Uma Dabla	Dr. R. Karthikeyan
3	Dr. Vineet Tyagi	Dr. Sandeep Goyal

**DEPARTMENT OF ORAL MEDICINE & RADIOLOGY**

S.No.	Name of student	Name of guide
1	Amit Kumar Bansal	Dr. Anjali Saigal
2	Bhupinder Kumar	Dr. Anjali Saigal
3	Kohli Shivani Rajinder	Dr. Pradhuman Verma

**DEPARTMENT OF PUBLIC HEALTH DENTISTRY**

S.No.	Name of student	Name of guide
1	Thounaojam Leimaton Chanu	Dr. Simarpreet Singh
2	Parul Mangal	Dr. Simarpreet Singh
3	Sakshi Shukla	Dr. Manu Batra

Kindly acknowledge the receipt of the same.

Thanking you,



Yours truly,

*Yogesh Kumar*  
(Dr. Yogesh Kumar)  
Director Principal



*Dr. Manu Batra*  
DIRECTOR PRINCIPAL  
SURENDRA DENTAL COLLEGE  
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