

**DR.XXXXXX**  
MBBS, MS (general surgery) (DNB Neurosurgery)  
**Phone no:**XXXXXX  
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## Career Objective

To seek employment as a gynecologist at one of the established hospital where I could serve people with my experience, knowledge and skills for better growth and reputation of the firm

## Educational and professional Details

**7/3/20XX – 6/3/20XX:DNB Neurosurgery**  
XXXXXXXXXX of Medical Sciences, Secunderabad, India.

**20XX- 1/3/20XX** : Worked as **assistance professor** in the department of **General surgery**, XXXXXXXXXXX, Karnataka, where I have experience of teaching general surgery residents and MBBS students.

**20XX-20XX** : **MS General Surgery**  
XXXXXXXXXX Medical Sciences, Hubli, Karnataka. India.

**20XX- 20XX** : **MBBS graduation**

XXXXXXXXXX, Karnataka. India.

## Pre graduation education:

**20XX-20XX** : Pre university education  
XXXXXXXXXX, XXXXX, Karnataka, India  
Schooling: 1. Govt. Primary school  
2. K.B.G High school, XXXXXXXXXXX Karnataka, India

I have obtained my MBBS, MS (General Surgery) and DNB (Neurosurgery) seats on merit basis through highly competitive national entrance exams.

MBBS : Medical common entrance test

MS (general surgery): All India medical entrance test

DNB (neurosurgery): National board of examination : Super speciality entrance exam.

**Additional Qualification:** I have completed my Bachelor of arts(BA) equivalent degree in **Hindi language**.

### Presentations and research activities

1. 3/3/20XX: Indo Japanese conference: **“Role of microsurgery in AVM management post ARUBA trial”**.
2. 3/3/20XX : Telangana state neurosurgical conference : I have done presentation on **“ Outcome of surgery in AVM in post ARUBA trial era”**
3. 7/3/20XX-31/7/20XX : During my DNB neurosurgery curriculum, I have carried out my thesis research work under Dr.Manas Panigrahi on **“A study on Intraventricular tumours : surgical strategies and outcomes”**, which included 134 patients with intraventricular tumours (both prospective and retrospective ) excluding fourth ventricular tumours with a maximum follow up of 72 months(range 5-72months), The study has provided very useful data on open microsurgical, endoscopic, stereotactic surgeries used, need for multimodality approach including radio surgery, chemotherapy while treating intraventricular tumours, survival of various intraventricular tumours.
4. 20XX : I have done presentation on **“Third ventricular tumours, surgical strategies and outcomes”** in XXXXXX Andhra Pradesh chapter- 2017 Which was well appreciated by neurosurgeons, neurologists and neuroradiologists in the conference.
5. I have given a presentation on **“ Cranio vertebral junction instability, surgical strategies and outcomes”** in the national conference conducted by association of XXXXXX of India (NSSI) in 20XX.
6. I have done poster presentation on **“Lateral ventricular tumours: Surgical strategies and outcomes “**in the conference conducted by XXXXXXXX of India (NSI)- Andhra Pradesh chapter 20XX.
7. 20XX- 20XX: During my general surgery residency, I have conducted my research thesis work on **“correlation of serum PSA levels with the bladder outlet obstruction in patients with enlarged prostate “**. The research provided new insight on the levels of serum PSA in predicting the bladder outlet obstruction, there by identifying and treating the subset of patients who would otherwise develop distressing symptom of acute retention of urine.

8. 20XX: During my general surgery residency, my study **“Possum and p-possum scoring system in predicting mortality and morbidity in the patients undergoing emergency abdominal surgeries”** was selected for presentation XXXXXXXXX, Glasgow (XXXX) . I have the publication in XXXXX – 20XX.

### **Service to the Community**

Apart from the academic work, I have taken active participation in community awareness programmes and delivered presentations and demonstrations at community level as a part of health education. Some of the presentations/ demonstrations include :

1. First aid and precaution at the scene of the accident or disaster.
2. Stroke prevention, detection, first aid management
3. Prevention of the communicable disease.
4. Diet and protein energy malnutrition.

### **Extra-curricular activities**

1. I am very good badminton player; I was captain for my MBBS badminton team.
2. I am good player of cricket. I was opening batsman in my MBBS team.
3. I m a good writer in my mother tongue (Kannada) language.

## Key surgical skills which I have performed independently:

### 1. Surgery for traumatic brain injuries

1. Sub dural hematoma,
2. Extra dural hematoma,
3. Intraparenchymal bleeds,
4. Contusions,
5. Intraventricular hemorrhage,
6. Posterior fossa bleeds,
7. Depressed fractures, ACF carpeting.

### 2. Surgical management for Non traumatic emergency brain conditions:

1. Cerebral Aneurysms, AVMs
2. Hypertensive bleed,
3. Cerebral Infarcts,
4. Intraventricular hemorrhages,
5. Posterior fossa bleed and infarcts,
6. Management of Hydrocephalous.
7. Emergency management of tumor related raised ICT

### 3. Elective Brain surgeries :

1. Surgical excision of :Glioma, Meningioma, cavernoma, Intra ventricular tumors, metastatic lesion, Schwannoma, Infective and inflammatory lesions, CV junction tumors including far lateral approaches.
2. Endoscopic third ventriculostomy
3. Micro vascular decompression for Trigeminal neuralgia.
4. Surgical management of Moya-Moya disease.
5. Epilepsy surgery: Lesionectomy, Management of MTS, Sub Pial Resections Under ECOG

### 4. Spine surgeries:

1. Management of Cv junction anomalies, Atlanto axial dislocations, CV Junction instrumentation.
2. Management of spine trauma, Instrumentation for Burst fractures, Compression fractures, Traumatic sUBLUXATIONS.
3. Lumbar laminectomy, Discectomy,
4. Lumbar and thoracic instrumentation,
5. OYL excision,
6. Excision of tumors of the spine and spinal cord,
7. Anterior Cervical discectomy, corpectomy and instrumentations,
8. Posterior cervical fixations and laminectomies,
9. Facet blocks, Epidural injections for lumbar radiculopathy who are poor surgical candidates.

### 5. Advanced neurosurgery:

1. Using Fluorescent microscopy in excision of malignant brain lesions.
2. I have routinely used neuro navigation system in indicated cases.
3. Stereotactic biopsy of the lesion

4. Awake craniotomies for the excision of tumors in eloquent area.
5. Intra operativeCortical stimulation
6. Actively assisted deep brain stimulation surgeries for Parkinson's disease.

**DECLARATION:**

I hereby declare that above details are true to my knowledge.

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