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POPMA
PRACTICING ORAL PATHOLOGISTS AND MICROBIOLOGISTS ASSOCIATION (REGD.)

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The Oral PATHOLOGIST™

An Initiative by POPMA

DR. ANITA BORGES

'A Tribute to the Queen of Histopathology'



SPECIAL SECTION

'POPCON 25'

POPMA's First National-Level Conference

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PRACTICING ORAL PATHOLOGISTS AND MICROBIOLOGISTS ASSOCIATION (REGD.)

Oral Pathology and Microbiology: Changing narratives with fervor and gusto

Theme of oral pathology magazine indicates the change that should happen in our mind to change narrative of oral pathology where from no scope to full scope!

"It's not the opportunities we get, it's the opportunities we create"



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The Oral Pathologist™

Aim and Scope

The Oral Pathologist Magazine aims to serve as an opportunistic platform to increase the awareness about scope and importance of Oral Pathology in holistic approach towards diagnosing and managing diseases.

The Magazine also focuses to ignite the fire of interest about the field of Oral Pathology among budding dentists, encourage them to pursue the same and build a successful career.

The Magazine caters to diverse areas of Oral Pathology discipline including hematology, biochemistry, immunology, serology, microbiology, oncology, histopathology and cytopathology.

The primary eight segments of Magazine include- All About POPMA, Showcase Your Published Paper, Aspire to Inspire, The Pathology World, Art of Oral Pathology, Book Review, Pride of POPMA and Students' Column.



From The EDITOR-IN- CHIEF

Dear Colleagues,

It is both a pleasure and a proud privilege to present this issue of "The Oral Pathologist."

As you know, this magazine is an academic initiative dedicated to promoting knowledge, research, and clinical understanding in the field of Oral Pathology and its allied disciplines.

The content of this issue has been carefully curated to provide readers with updated scientific information, recent advances, and practical insights aligned with its theme. We have also introduced a few innovative page-breakers, designed to create a more engaging and enjoyable reading experience for students, academicians, and practicing oral pathologists alike.

I sincerely thank the editorial board and all contributing authors for their time, dedication, and valuable scholarly input. Their collective efforts and commitment have been instrumental in maintaining the academic quality and relevance of this publication.

A special salute to the histopathology queen of India, Dr. Anita Borges Ma'am. Her contributions to the field of Oral Pathology, both as a teacher and mentor, have been invaluable. She continues to inspire many of us to strive for academic excellence.

We hope that this issue of "The Oral Pathologist" will be informative and useful for undergraduate and postgraduate students, as well as dental professionals. We welcome your suggestions and feedback, and we look forward to your continued support.

Warm regards,
Dr. Vandana Shah
Editor-in-Chief

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Managing Editor's Note

The field of Oral Pathology has been gaining increasing recognition in the medical community, as it plays a crucial role in the diagnosis and management of various oral and maxillofacial diseases. The rise in oral cancer incidence, coupled with advancements in treatment modalities, has highlighted the importance of specialized dental professionals who can provide comprehensive care to patients.

This issue of our esteemed publication aims to shed light on the evolving role of oral pathologists and the significant impact they have on the overall well-being of patients. The oral cavity is a gateway to the body, and the early detection and accurate diagnosis of oral lesions are essential for effective treatment and improved patient outcomes.

In this issue, we explore the multifaceted responsibilities of oral pathologists, from their involvement in the comprehensive management of oral cancer patients to their contributions in the development of novel diagnostic techniques and the advancement of research in this field.

Through insightful articles and case studies, we have delved into the challenges faced by oral pathologists, the strategies they employ to enhance the quality of life for their patients, and the ongoing efforts to increase awareness and recognition of this vital specialty.

As the editors of this publication, we are committed to fostering a platform that showcases the remarkable work of oral pathologists and their indispensable role in the healthcare system. We hope that this issue will inspire and educate our readers, ultimately leading to a greater appreciation for the expertise and dedication of these professionals.

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Managing Editor's Note

As the esteemed editor of ‘The Oral Pathologist’ Magazine, it is with great pleasure that I present to our readers the first edition, which promises to be a captivating and enlightening exploration of the diverse and ever-evolving field of oral pathology.

Through the carefully curated content within these pages, we aim to provide our valued readers with a comprehensive understanding of the cutting-edge research, innovative technologies, and emerging trends shaping the landscape of oral pathology. As always, we extend our sincere gratitude to the contributors, both established experts and promising young scholars, whose dedication and insights have enriched this edition.

We are confident that this issue of 'The Oral Pathologist' Magazine will captivate and inspire our readers, fostering a deeper appreciation for the art and science of oral pathology.

In our ongoing efforts to elevate the discourse within the field of oral pathology, we are pleased to feature a collection of esteemed authors who have lent their expertise to this issue. We forsee this magazine to become a valuable inspirational tool for oral pathologists and thus aid in the upliftment of this dental speciality.

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Managing Editor's Note

Dear Colleagues,

I celebrate the official launch of the first issue of "The Oral Pathologist" with immense pleasure and humility. I sincerely welcome the readers of this magazine on behalf of the Editorial Team. Additionally, I want to express my gratitude to our pioneer association, The Practicing Oral Pathologists and Microbiologists Association (POPMA), for unwavering support and encouragement in bringing out this issue. I sincerely thank our distinguished editorial board and esteemed contributors for their voluntary efforts to support the magazine's success.

Showcasing and acknowledging the multidimensional facets of Oral Pathology and allied disciplines is our primary objective. This magazine will serve as an ideal forum for addressing new clinical, diagnostic, and therapeutic advancements in Oral Pathology. We genuinely hope that readers will find the scientific compositions engaging, pertinent, and thought-provoking, which will help them develop a variety of perspectives on the current scenario in dentistry.

I hope that this issue will stimulate your curiosity and provide you with valuable insights about recent scientific breakthroughs in the realm of Oral Pathology. I am confident that this periodical would be very beneficial not only for dental professionals but also for undergraduate and postgraduate students. We are dedicated to publishing all results, approaches, resources, and reviews that make a substantial contribution to Oral Pathology. We appreciate your input and hope to hear from you soon!

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DR. ANITA BORGES

IN MEMORIAM: DR. ANITA M. BORGES (19.11.1947–18.09.2025) – A PIONEER OF ONCOPATHOLOGY

BY: DR. BHUVAN NAGPAL

India's pathology community lost one of its brightest lights with the passing of Dr. Anita Maria Borges on September 18, 2025. Revered as the "Queen of Histopathology," Dr. Borges was not only a diagnostic genius and pioneering oncopathologist but also a beloved teacher and mentor whose warmth touched countless lives. The daughter of the eminent cancer surgeon Dr. Ernest Borges, she carried forward a legacy of excellence in cancer care while forging her own path as an innovator in pathology. This tribute celebrates her extraordinary career, her passion for teaching, her personal virtues of humility and generosity, and the indelible mark she left on the world of pathology.

A Stellar Career Shaped by Legacy and Leadership

Dr. Anita Borges devoted over five decades to advancing cancer pathology in India. After completing her medical studies at Topiwala National Medical College and BYL Nair Hospital, Mumbai, and specialist training at the Royal Marsden Hospital (London) and Memorial Sloan Kettering Cancer Center (New York), she returned to India to serve her people. In 1981, she joined Tata Memorial Hospital (TMH) in Mumbai, where she rose to become Professor and Head of Surgical Pathology, a post she held until her retirement in 2004.

Subsequently, she led pathology services at S.L. Raheja Hospital, Mahim, where she established the Centre for Oncopathology (2019), and served as Director of Histopathology at the SRL Diagnostics Centre of Excellence. Her leadership also extended internationally as Dean of the Indian College of Pathologists and Vice President (Asia) of the International Academy of Pathology. Recognized globally, she was twice featured in The Pathologist magazine's "Power List" of the world's most influential pathologists (2015, 2022).

Her career choice and ethos were deeply influenced by her father, Dr. Ernest Borges, India's pioneering cancer surgeon. He once told her that a surgeon "is dependent on the pathologist to guide his hand." That conviction led her to choose pathology over obstetrics and to practice her lifelong philosophy — "Work like a pathologist but think like a surgeon."

A Passionate Educator and Mentor Across the Nation

Teaching and mentorship were the heartbeat of Dr. Borges's mission. She firmly believed that "knowledge must travel beyond big cities." To that end, she founded the Tata Memorial Centre's Travelling School of Oncopathology, which provided expert training to doctors in smaller cities. True to her selfless nature, she refused to draw any honorarium, channeling the funds to support laboratory staff and infrastructure in remote centers.

During the COVID-19 pandemic, she continued her teaching zeal online. With Dr. Sumeet Gujral, she initiated free bi-weekly virtual pathology sessions, sustained over five years, attracting participants not only from India but also from Vietnam, Russia, Myanmar, and Africa. Her lectures often carried imaginative titles inspired by literature and art, reflecting her creative personality.

Dr. Borges's final journey exemplified her dedication — she passed away in Gorakhpur, Uttar Pradesh, while attending a pathology teaching program. Her last concern, poignantly, was about who would take her next class. The Tata Memorial Hospital obituary fittingly observed that "she left for her heavenly abode doing what she was most passionate about – teaching."

Diagnostic Brilliance and an Unerring Eye

Dr. Borges's diagnostic acumen was legendary. Her reports were considered the final word in cancer diagnosis — a testament to her precision and interpretative skill. She combined an encyclopedic understanding of disease with a rare intuition. Her colleague, Dr. Sanjay Pai, recalled that "her accuracy in diagnostics, described by peers as perfect, guided oncologists across the country."

She was known to challenge medical dogma, rejecting unproven entities like malignant fibrous histiocytoma years before the global community acknowledged its inaccuracy. Her mantra to trainees was simple yet profound — "Listen to the cells."

Dr. Borges was especially revered for her work in melanoma and head and neck pathology, handling thousands of complex oral and salivary gland cancers during her years at TMH and Raheja Hospital. Her expertise earned her the Lifetime Achievement Award from the Indian Society of Head and Neck Oncologists. Her mastery was so respected that she was even invited to contribute to the WHO Blue Book of Haematopathology — an honor rare for a surgical pathologist.

She demanded clarity and completeness in every report, teaching her students that "the description of a pathologist should be such that one can understand the pathology through the words — even if blind." This philosophy, fondly recalled by Dr. Bhuvan Nagpal, remains a guiding light for many oral and oncopathologists.

Despite her brilliance, she remained profoundly humble, often writing "I don't know" when uncertain — preferring honesty over guesswork. To her, the patient's well-being always outweighed professional pride.

Humility, Generosity, and an Enduring Legacy

Behind her formidable intellect was an immensely kind and approachable human being. She connected effortlessly with students, technologists, and clinicians alike. Her sense of humor, literary flair, and love for classical music made her a delightful conversationalist.

Dr. Borges embodied mentorship in its truest sense — she gave her students first authorship, shared credit generously, and celebrated their success. She declined lucrative offers abroad, choosing instead to build India's cancer pathology ecosystem. Her brother, Dr. Eric Borges, aptly described her as "caring and humane in every sense."

She often funded her own travel to small colleges and regional meets — from Coorg to Jammu — saying, "The quality of pathology must improve everywhere." She personally sponsored several students and upgraded laboratories in under-resourced institutions.

Dr. Bhuvan Nagpal, who first met her at a slide seminar in 2013, recalls her warmth: "She made us feel like collaborators, not students." Her blend of firmness and affection shaped hundreds of careers. As Dr. Sumeet Gujral observed, "She was the best mentor one could ever have."

Just weeks before her demise, she had graciously agreed to join a session of the POPMA Study Club — a gesture that now stands as her final professional promise. Even in her late 70s, her enthusiasm for teaching remained boundless.

A Fond Farewell and Final Lessons

As we bid farewell to Dr. Anita Borges, we celebrate a life devoted to science, service, and humanity. Few individuals have transformed a discipline as profoundly as she did. Her legacy lives on in every pathologist she trained and every patient whose diagnosis she refined.

Her guiding belief — "A pathologist must think like a surgeon and care like a physician" — will continue to inspire generations. To the oral pathologists attending POPCON 2025, her life teaches an enduring truth: Excellence is not just in diagnosis, but in dedication.
Dr. Borges once said her proudest title was being introduced as "a pathologist who thinks like a surgeon." To honor her, let us continue to bridge the microscope and the patient, science and empathy, precision and humanity.

Farewell, Dr. Anita Borges. You taught us to see beyond the slide, to listen to the cells, and to understand not just the pathology of disease — but of life itself. Your light will forever illuminate our path.

References

1.Pai S.A. Anita Maria Borges, M.D., FRCPath – Obituary (19 November 1947 – 18 September 2025). Journal of Clinical Pathology, BMJ, Oct 2025.
2.Hindustan Times. "Dr Anita Borges, acclaimed oncopathologist, passes away." Sept 20, 2025.
3.MedBound Times. "Legendary Oncopathologist Dr. Anita Borges Passes Away at 78." Sept 20, 2025.
4.Times of India. "'Last Word' Oncopathologist Anita Borges passes away in Gorakhpur." Sept 19, 2025.
5.Anshu, Dr. A Mind of My Own – "Dr Anita Borges: The Doyenne of Pathology Education." Sept 21, 2025.
6.Kalantri S.P. "Dr Anita Borges Passed Away." Personal Blog, Sept 22, 2025.
7.S.L. Raheja Hospital (Fortis). Doctor Profile – Dr. Anita Borges (archival).
8.Tata Memorial Hospital Official Statement. Sept 19, 2025.
9.The Pathologist (UK). "Power List 2015 & 2022 – Global Influencers in Pathology."

POPCON 25

SPECIAL ISSUE





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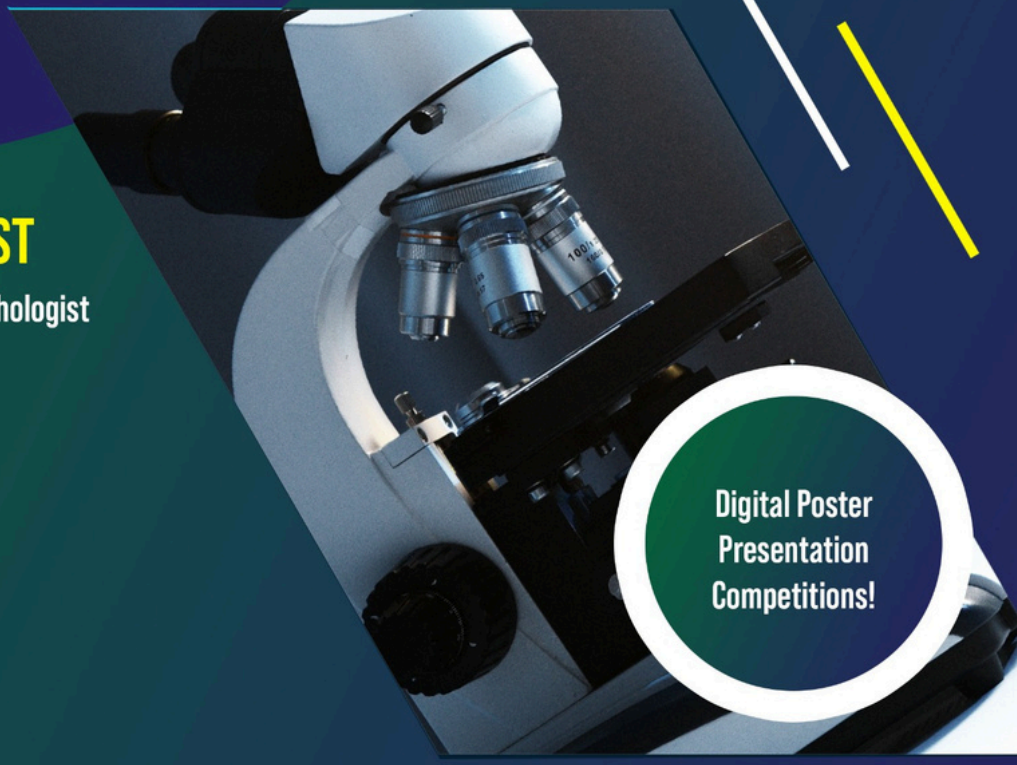
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- Drug discovery in dentistry
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- Forensic Odontology
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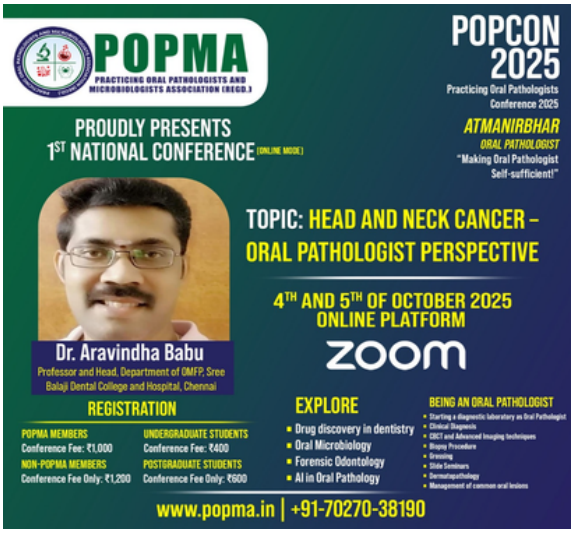
Three Days of Learning, Innovation & Memories....

POPCON 25

SPEAKER ABSTRACTS

To watch videos of all the guest lectures





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Professor and Head, Department of OMFP. Sri Balaji Dental College & Hospital, Chennai

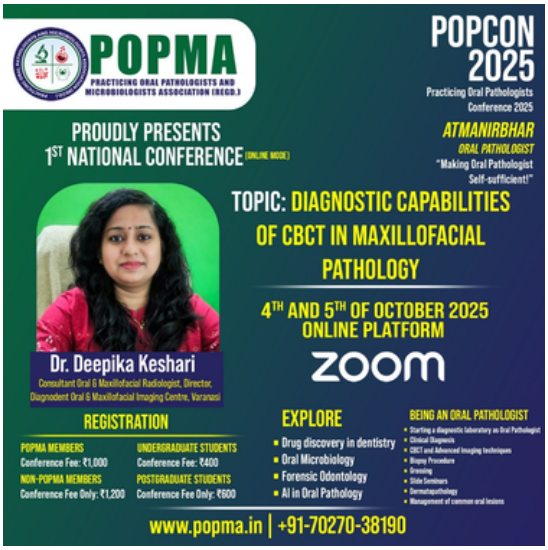
Head and Neck Cancer – Oral pathologist's perspective

Dr. N. Aravindha Babu's lecture emphasized the critical role of oral pathologists in the early detection, diagnosis, and management of head and neck cancers, particularly oral squamous cell carcinoma, which remains one of the most prevalent malignancies in India. He discussed the alarming rate of late-stage diagnoses and highlighted the necessity of identifying precancerous and early malignant lesions to improve patient survival outcomes. The session explored the biological hallmarks of cancer—sustained proliferative signaling, immune evasion, and epigenetic reprogramming—as diagnostic and therapeutic determinants.

A detailed explanation of the stepwise transformation from normal mucosa to invasive carcinoma was provided, emphasizing histopathological grading, cytological evaluation, and the integration of molecular tools such as DNA ploidy analysis, brush biopsy, and genetic/epigenetic profiling. The lecture further elaborated on the importance of precise histological subtyping, TNM staging, and recognition of prognostic factors such as perineural invasion to guide personalized therapeutic planning.

Dr. Babu concluded by underscoring the indispensable contribution of oral pathologists to multidisciplinary oncology teams and public health initiatives. He called for enhanced screening programs, interprofessional collaboration, and community awareness focused on tobacco cessation and lifestyle modification as key preventive strategies to reduce oral cancer morbidity and mortality.

Keywords: Head and neck cancer, Oral pathology, Early detection, Molecular diagnostics, DNA ploidy, TNM staging, Precision oncology, Tobacco cessation, Multidisciplinary care, Oral cancer prevention.



Dr. Deepika Keshari

Consultant Oral & Maxillofacial Radiologist, Director, Diagnodent Oral & Maxillofacial Imaging Centre, Varanasi

Diagnostic capabilities of CBCT in maxillofacial pathology

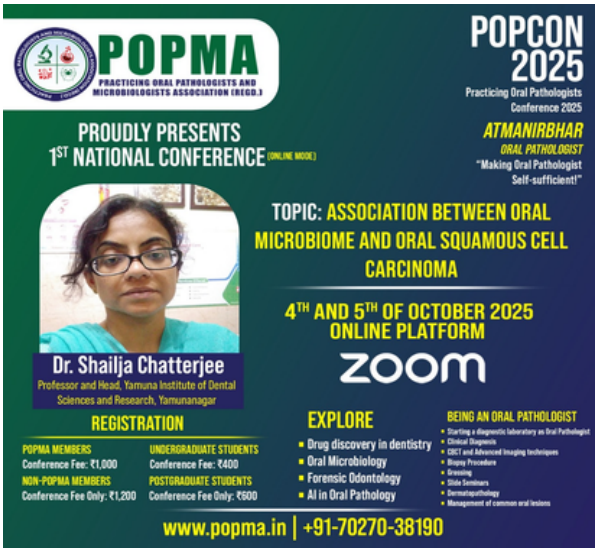
Dr. Deepika Keshari delivered a comprehensive lecture on the evolving role of Cone Beam Computed Tomography (CBCT) in maxillofacial pathology, emphasizing its diagnostic superiority, optimized radiation exposure, and integration into surgical and treatment workflows. The session delineated the distinct advantages of CBCT over conventional CT, including isotropic voxel imaging for accurate 3D reconstructions, exceptional dento-alveolar detail, lower effective dose, and faster acquisition times—all aligning with ALARA/ALADAIP principles.

Through a series of representative cases, Dr. Keshari demonstrated CBCT's clinical versatility in evaluating cysts, tumors, impactions, periapical lesions, TMJ disorders, and sinus pathologies, highlighting its precision in delineating cortical perforation, root morphology, and proximity to critical structures such as the inferior alveolar canal and maxillary sinus. CBCT's utility in implant planning, orthodontics, and orthognathic surgery was reinforced with real-world examples correlating radiologic findings with histopathology.

The lecture also underscored appropriate imaging selection, noting that MRI and MDCT remain preferred for soft-tissue characterization, oncologic staging, and polytrauma cases. From a clinical-legal standpoint, Dr. Keshari emphasized ethical imaging practices – justification, informed consent, exposure optimization, structured reporting, and DICOM data retention – as essential for medico-legal compliance and patient safety.

Concluding her session, Dr. Keshari advocated for a balanced, indication-driven imaging approach wherein CBCT serves as a high-resolution, low-dose modality for most dento-maxillofacial cases, complemented by conventional CT or MRI when broader soft-tissue or oncologic evaluation is warranted.

Keywords: CBCT, Maxillofacial pathology, 3D imaging, Dento-alveolar detail, ALARA, ALADAIP, Oral radiology, Implant planning, TMJ, Sinus pathology, Ethical imaging, Medico-legal compliance.



Dr. Shailaja Chatterjee

Professor and Head,
Yamuna Institute of Dental Sciences and Research,
Yamunanagar.

Association between Oral Microbiome and OSCC

Dr. Shailja Chatterjee delivered an insightful lecture on the pivotal role of the oral microbiome in the pathogenesis of oral squamous cell carcinoma (OSCC). She emphasized that OSCC is a multifactorial malignancy influenced by traditional risk factors—such as tobacco, alcohol, betel quid chewing, radiation, and genetic predisposition—as well as emerging microbial determinants. Oral microbial dysbiosis, characterized by an imbalance in commensal and pathogenic species, was identified as a crucial factor promoting carcinogenesis through chronic inflammation, immune modulation, and direct epithelial interactions. Specific microorganisms implicated in OSCC include Porphyromonas gingivalis, Fusobacterium, Streptococcus, Neisseria, Prevotella, Treponema denticola, Candida albicans, and oncogenic viruses such as HSV1 and EBV. These agents contribute to tumor initiation and progression via mechanisms including DNA damage, matrix metalloproteinase activation, and production of carcinogenic metabolites. The lecture underscored that maintaining oral microbial balance and hygiene may play a preventive role against OSCC. Dr. Chatterjee concluded that integrating microbial profiling with oral oncology could advance diagnostic and therapeutic strategies, highlighting the oral microbiome as a promising frontier in cancer prevention and management.

Keywords: Oral microbiome, Oral squamous cell carcinoma (OSCC), Dysbiosis, Porphyromonas gingivalis, Fusobacterium, Candida albicans, Epstein–Barr virus (EBV), Carcinogenesis, Oral oncology, Microbial pathogenesis



Dr. Bhuvan Nagpal

Director & Senior Oral Pathologist, Tohana Manglam Diagnostics

Beyond the Microscope: Empowering Oral Pathologists as diagnostic leaders in lab practice and oral healthcare

The lecture by Dr. Bhuvan Nagpal presented a compelling and evidence-driven synthesis of oral pathology, laboratory diagnostics, and healthcare law, positioning the oral pathologist as a comprehensive diagnostician rather than a limited specialist. The session reaffirmed that MDS (Oral Pathology and Microbiology) professionals possess the academic training, laboratory exposure, and legal competence to interpret and sign reports in hematology, biochemistry, serology, microbiology, and histopathology.

Dr. Nagpal opened the lecture with an inspiring statement – "The blood that flows in the oral cavity is not special dental blood—it is the same systemic blood that connects every organ. The science is one, and so is the pathologist." He then outlined the integration of oral pathology into the broader framework of laboratory medicine, emphasizing that diagnostic investigations not only enhance clinical accuracy but also serve as crucial medico-legal documentation.
Through a series of case correlations, the lecture demonstrated how oral pathologists contribute to systemic disease identification and management. Examples included detecting anemia and leukemia through peripheral smears, assessing diabetic control via HbA1c before dental procedures, and evaluating hepatic and coagulation profiles prior to surgeries. Biopsy and FNAC were reinforced as the gold standards for early oral cancer detection.

In the domain of clinical oral microbiology, Dr. Nagpal discussed the diagnostic importance of microbial cultures, cytology, and biopsy in infections such as periodontitis and odontogenic abscesses, advocating for a multidisciplinary diagnostic approach. He provided a stepwise guide to establishing a legally compliant, NABL-ready diagnostic laboratory, detailing essential registrations, SOP documentation, biomedical waste authorization, and data management requirements.

The legal segment of the lecture was supported by references to DCI regulations, Ministry of Health communications, RTI replies, and judicial precedents, all of which affirm the statutory legitimacy of MDS Oral Pathologists as report signatories. Dr. Nagpal underscored that competence and accountability—not titles—define professional eligibility. His message was clear: "Overlapping scope of practice is not a threat; it is a shared scientific responsibility."

Concluding with an inspirational segment, "Dr. Meera's Journey," he narrated the story of an oral pathologist who transitioned from job seeker to diagnostic entrepreneur by expanding into general laboratory medicine, embodying the spirit of AtmaNirbhar Oral Pathology.

The lecture concluded with a resounding call for unity, confidence, and compliance within the profession. Oral Pathologists, as physician-level diagnosticians, are ethically, scientifically, and legally justified in signing laboratory reports. Dr. Nagpal's message reinforced that the future of diagnostics belongs to professionals who are competent, confident, and compliant.

Keywords: Oral Pathology, Laboratory Diagnostics, NABL, DCI Regulations, Legal Empowerment, Medico-Legal, Hematology, Biochemistry, Histopathology, Serology, Oral Cancer, Clinical Pathology, FNAC, Competency, Evidence-Based Dentistry, Clinical Establishment Act Compliance, Professional Rights, POPMA, AtmaNirbhar Oral Pathologist



Dr. Manish Bhargava

Professor & Head, Manav Dental College, Faridabad, Haryana

Khud par Bharosa – The path to proficiency in Oral Pathology

Prof. Dr. Manish Bhargava delivered a deeply inspiring and intellectually enriching lecture titled “Khud Par Bharosa – The Path to Proficiency in Oral Pathology,” blending motivation with scientific insight to redefine how Oral Pathology should be learned, taught, and practiced. The session emphasized that Oral Pathology is not merely an academic subject to be memorized, but a language of disease — a discipline that narrates the biological story of every lesion, every cell, and every patient.

Dr. Bhargava began by addressing the emotional and academic challenges faced by students, particularly the fear and confusion surrounding the subject’s complexity. He reassured learners that self-belief and systematic learning transform apprehension into mastery. The lecture guided participants through a structured approach to developing diagnostic excellence: building a strong foundation of normal histology, integrating clinical and microscopic findings, and evolving continuously through evidence-based updates and mentorship.

A key highlight of the session was the emphasis on clinical-pathological correlation, where the oral pathologist serves as the bridge between symptom and diagnosis. Dr. Bhargava illustrated the oral-systemic interface through real cases in which oral manifestations revealed systemic diseases such as anemia, diabetes, and carcinoma, demonstrating the integral role of oral pathologists in early detection and comprehensive healthcare.

He advocated a three-step roadmap to proficiency:

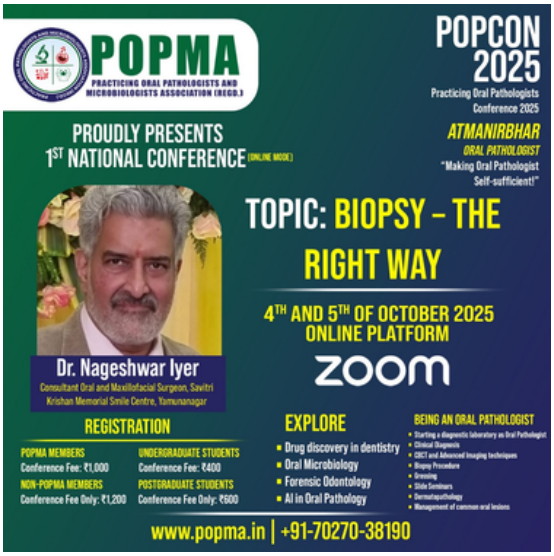
1. Strengthen Fundamentals – Understand normal before abnormal; clarity precedes complexity.
2. Engage Actively – Correlate clinical, radiological, and histopathological data to construct complete diagnostic reasoning.
3. Evolve Continuously – Participate in mentorship circles, digital microscopy sessions, and academic collaborations to remain updated and inspired.

The lecture also highlighted the importance of collaborative learning, encouraging study groups, discussion forums, and guided mentorship as key drivers of professional growth and ethical practice. Dr. Bhargava's motivational appeal resonated throughout the session as he reminded participants that proficiency is a product of persistence — achieved not through shortcuts, but through curiosity, discipline, and dedication.

He concluded with a resonant message: "Choose one disease every week, explore its pathogenesis, histopathology, and clinical course — and you will realize that confidence is cultivated, not inherited."

Prof. Dr. Bhargava's lecture stood out as a call to redefine Oral Pathology as a transformative and life-guiding discipline, where knowledge meets empathy and where the microscope becomes a window into meaning, not just magnification.

Keywords: Self-belief, Oral Pathology, Diagnostic Confidence, Oral-Systemic Correlation, Histopathology, Clinical-Pathologic Reasoning, Digital Microscopy, Motivational Learning, Medical Education, Professional Development, POPMA.



Dr. Nageshwar Iyer

Consultant Oral and Maxillofacial Surgeon, Savitri Krishan Memorial Smile Centre, Yamunanagar

Biopsy – The right way

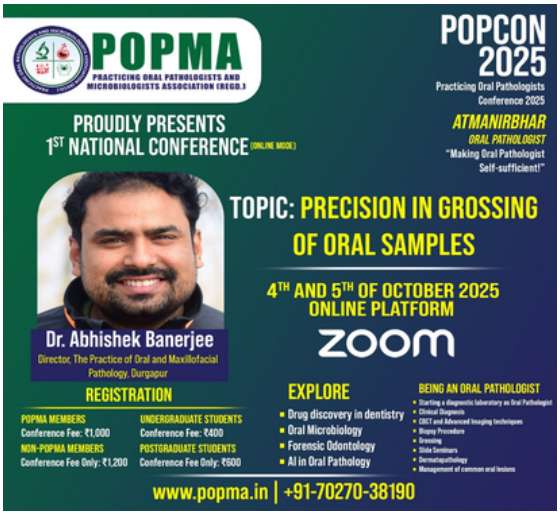
Dr. Nageshwar Iyer delivered an insightful lecture underscoring the biopsy as the cornerstone of diagnosis in oral and maxillofacial pathology. Describing it as the gold standard for identifying and classifying oral lesions, he emphasized that meticulous technique, proper specimen handling, and collaboration between clinicians and pathologists are essential for diagnostic accuracy. Drawing from real-life clinical experiences, including rare presentations such as foreign body granulomas mimicking malignancy, Dr. Iyer illustrated how subtle technical errors or misinterpretations can lead to diagnostic pitfalls.

The session outlined key indications for biopsy — including persistent lesions, suspected malignancies, unclear diagnoses, and disease monitoring — and clarified its objectives: to confirm clinical impressions, determine lesion characteristics, guide treatment planning, and assess prognosis. Dr. Iyer provided a stepwise overview of biopsy procedures, covering patient preparation, anesthesia, site selection, and representative tissue sampling. He differentiated between excisional and incisional biopsies, explaining their respective clinical applications, and introduced adjunctive diagnostic aids such as vital staining, autofluorescence, CT, and ultrasonography for site selection.

Special emphasis was placed on specimen handling and documentation, including proper labeling, orientation, and photographic records with scale indicators. Dr. Iyer cautioned against dividing specimens for multiple opinions and stressed preserving tissue architecture through careful slicing rather than fragmentation. He also discussed common errors — inadequate sample size, poor surgical handling, and delayed fixation — that compromise diagnostic reliability.

Concluding the lecture, Dr. Iyer highlighted the integrative role of histopathology and immunohistochemistry (IHC) in diagnosis, particularly for differentiating giant cell lesions and systemic disease-associated conditions. He reiterated that a well-executed biopsy, supported by comprehensive histopathological correlation, forms the foundation of precise diagnosis, effective treatment, and improved patient outcomes.

Keywords: Biopsy, Oral pathology, Histopathology, Specimen handling, Immunohistochemistry, Diagnostic accuracy, Excisional biopsy, Incisional biopsy, Clinical correlation, Oral lesions.



Dr. Abhishek Banerjee

Director, The Practice of Oral and Maxillofacial Pathology, Durgapur

Precision to grossing of Oral Samples

The lecture provided a comprehensive overview of the grossing process, emphasizing its role as the foundation of accurate histopathological diagnosis. Grossing was defined as the systematic examination and dissection of surgical specimens, requiring a well-equipped grossing room with essential tools such as rulers, magnifying lenses, fixatives, weighing scales, documentation aids, and adequate personal protective equipment. The importance of proper specimen handling, orientation, labeling, and documentation was underscored to maintain diagnostic integrity.

Detailed protocols for tissue specimen handling were discussed, highlighting the need for correct cassette orientation, use of sutures and rulers for anatomical reference, and radiographic imaging for complex bone and soft tissue specimens. The lecture elaborated on tissue inking techniques, recommending selective inking of excisional margins using color-coded schemes (white for bone, gray for fibrosis, yellow for fat/necrosis, and red for hemorrhage), with acetic acid drying to prevent smudging and ensure clarity during microscopic evaluation.

In discussing surgical margins, the speaker distinguished between tumor bed and specimen-derived margins, emphasizing adherence to the College of American Pathologists (CAP) protocols, especially for tongue and oral cancer specimens. Decalcification procedures using formic and nitric acid were reviewed, stressing continuous monitoring to prevent over-decalcification and tissue damage.

The session culminated with a focused discussion on grossing of oral squamous cell carcinoma, emphasizing margin assessment, invasion pattern recognition, and comprehensive lymph node dissection. The speaker concluded that meticulous grossing is not merely a laboratory procedure but a pivotal determinant of diagnostic accuracy, therapeutic guidance, and overall patient outcome.

Keywords: Grossing, Oral pathology, Surgical margins, Decalcification, Specimen handling, CAP protocol, Oral squamous cell carcinoma, Tissue inking, Lymph node dissection, Histopathology accuracy.



Dr. Ketki Kalele

Managing Director, Warkas Research and Innovations Pvt. Ltd., Amravati

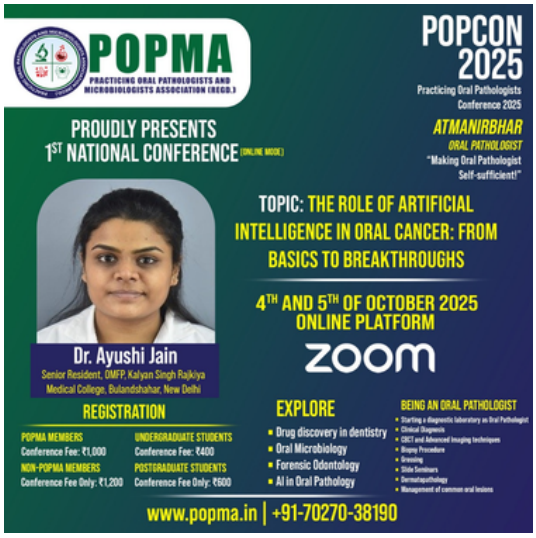
Path – preneurship: An idea to change life

Dr. Ketki Kalele delivered an inspiring and thought-provoking lecture on "Path-preneurship," a visionary concept that integrates the scientific rigor of pathology with the creativity and strategic mindset of entrepreneurship. She emphasized that in today's competitive healthcare environment, oral pathologists must move beyond conventional academic roles and embrace innovation, leadership, and enterprise to sustain professional relevance and growth.

The session began with a brief technical setup for smooth online delivery, followed by a compelling introduction to the concept of Path-preneurship – blending passion for pathology with entrepreneurial skill sets. Dr. Kalele addressed the challenges of market saturation in dental specialties and urged young professionals to seek differentiation through innovation, quality, and ethical practice rather than trend-following. Focusing on building and expanding oral pathology practice, she shared practical insights on starting small with hospital-based collaborations and gradually scaling into full-fledged diagnostic centers equipped with advanced technology, branding, and patient-friendly infrastructure. She outlined essential marketing strategies including outreach programs, webinars, and professional networking to increase visibility and credibility.

Dr. Kalele elaborated on strategic planning and collaboration, citing successful models from the healthcare industry such as Dr. Lal Path Labs and Metropolis, and emphasized the five pillars of enterprise success – dedication, awareness, demand-supply alignment, financial discipline, and strong networking. She further discussed team structuring, stressing the need for trained technicians, reception staff, and communication professionals, while highlighting the oral pathologist's role in ensuring diagnostic precision, especially in cancer reporting. The lecture also shed light on transferable skills and diversification, illustrating how oral pathologists' strengths in research, analysis, and critical thinking can translate into multiple domains including education, innovation, and med-tech development. Drawing from her own journey of establishing interdisciplinary collaborations, including international projects with reputed institutions, Dr. Kalele encouraged participants to pursue their passion with perseverance and long-term vision.

In her forward-looking conclusion, Dr. Kalele announced initiatives such as bilingual podcasts, collaborations with entrepreneurial networks, and inter-association partnerships aimed at empowering oral pathologists. She called upon the fraternity to embrace an entrepreneurial mindset that fosters independence, innovation, and impactful contribution to healthcare.



Dr. Ayushi Jain

Senior resident, OMFP, Kalyan Singh Rajkiya Medical College, Bulandshahar, New Delhi

The role of AI in Oral Cancer: From basic to breakthrough

Dr. Ayushi Jain delivered her first guest lecture on Artificial Intelligence (AI) in Oral Cancer, offering an insightful exploration of how emerging technologies are reshaping the future of cancer screening, diagnosis, and treatment. She began by outlining the global burden of oral cancer, emphasizing that late-stage diagnosis remains a major challenge, especially in rural and resource-limited regions where access to specialists is scarce. AI, she noted, has the potential to bridge this gap by enabling earlier detection, improved accuracy, and data-driven decision-making in oral healthcare.

The lecture introduced participants to the fundamental concepts of AI, including Machine Learning (ML) and Deep Learning (DL), and their practical relevance to healthcare. Using an analogy of facial recognition systems, Dr. Ayushi explained how deep learning enables computers to identify features and patterns in medical images without explicit programming. She elaborated on Convolutional Neural Networks (CNNs), describing their layered architecture and their capacity to detect and classify oral lesions based on pixel-level analysis. Through visual examples, she demonstrated how CNNs interpret clinical and histopathological images, transforming complex visual data into diagnostic insights.

A key focus of the session was on the importance of data quality and annotation in developing reliable AI models. Dr. Ayushi emphasized that annotated medical datasets are the foundation of effective AI systems, noting that challenges such as limited datasets, data bias, privacy concerns, and lack of standardization remain barriers to real-world deployment. She discussed methods like data augmentation, which enhance model performance by synthetically expanding dataset variability, improving the robustness of AI algorithms.

Highlighting several recent research advances, Dr. Ayushi presented examples where AI models achieved impressive diagnostic accuracy – fusion models combining white-light and autofluorescent images reached over 86% accuracy and 88% specificity, while deep learning networks like ResNet50 demonstrated high precision in histopathological classification. She also discussed cutting-edge studies predicting Ki-67 positivity directly from H&E-stained slides, reflecting the growing integration of AI into predictive pathology.

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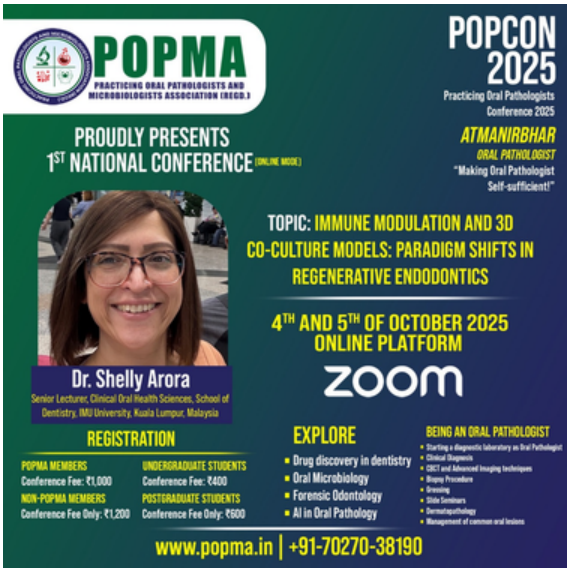
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The lecture concluded with an overview of ethical and regulatory considerations surrounding AI in healthcare, including data protection, algorithm transparency, and accountability in clinical decision-making. Dr. Ayushi advocated for explainable AI (XAI) frameworks to ensure that algorithms complement, rather than replace, clinical judgment. She also called for multi-institutional collaborations to build diverse, inclusive datasets that reflect the heterogeneity of India's population.

In her closing remarks, Dr. Ayushi expressed gratitude to Dr. Bhuvan Nagpal and the POPMA leadership for the opportunity to present her first lecture, describing it as an inspiring step toward integrating technology and oral pathology. Her talk reflected a vision where AI empowers healthcare professionals to detect disease earlier, personalize treatment, and ultimately reduce the burden of oral cancer through innovation and collaboration.

Keywords: Artificial Intelligence, Machine Learning, Deep Learning, Convolutional Neural Networks (CNN), Oral Cancer, Histopathology, Data Annotation, Explainable AI, Predictive Diagnostics, POPMA.



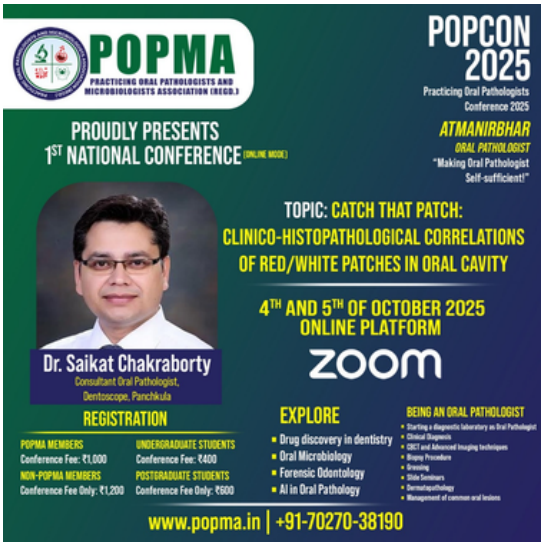
Dr. Shelly Arora

Senior Lecturer, Clinical Oral Health Sciences, School of Dentistry, IMU University, Kuala Lumpur, Malaysia

Immune modulation and 3D Co- Culture models: Paradigm shifts in regenerative endodontics

Dr. Shelly Arora delivered an insightful and research-driven lecture elucidating the role of immune modulation in dental pulp therapy, highlighting interleukin-23 (IL-23) blockade as a novel and targeted therapeutic strategy for the management of pulp inflammation. Drawing upon her doctoral investigations, she presented a comprehensive framework involving primary human dental pulp cell cultures and Wistar rat dental pulp models, underscoring the distinct biological responses of pulp towards IL-23 inhibition. The presentation effectively integrated molecular immunology with regenerative endodontics, demonstrating that IL-23 blockade attenuates inflammatory cascades while promoting healing, mineralization, and tissue repair. Dr. Arora also discussed advancements in 3D bioprinting, microfluidic "tooth-on-a-chip" systems, and co-culture technologies, which provide realistic platforms for studying cellular dynamics in pulpal regeneration. She concluded that the integration of immune-modulating biomolecules with 3D scaffold-based models could revolutionize the biological and clinical paradigms of regenerative endodontics, paving the way for translational applications and standardized clinical trials.

Keywords - Interleukin-23 (IL-23) blockade; immune modulation; dental pulp therapy; pulp inflammation; regenerative endodontics; 3D bioprinting; co-culture models; tooth-on-a-chip; biomaterials; pulp healing; reparative dentin formation.



Dr. Saikat Chakraborty

Consultant Oral Pathologist,
Dentoscope, Panchkula

Catch the patch: Clinicopathological correlations of red/white patches in oral cavity

Dr. Saikat Chakraborty delivered a highly informative and clinically relevant lecture on the clinical and histopathological correlations of red and white patches in the oral cavity, emphasizing the pivotal role of dental surgeons and oral pathologists in the early detection of potentially malignant disorders (PMDs). He began by appreciating POPMA's efforts in creating a strong academic platform and reminded participants that the oral cavity is a reflection of systemic health, where timely recognition of mucosal changes can significantly reduce oral cancer–related morbidity and mortality.

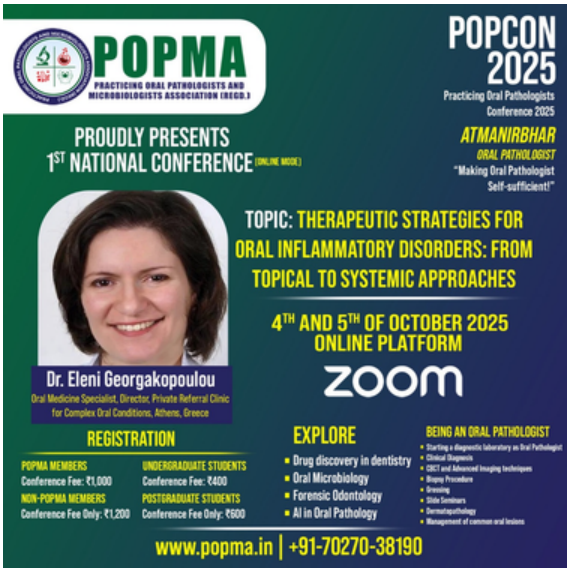
The session outlined the importance of early diagnosis and evidence-based evaluation of oral mucosal lesions. Dr. Chakraborty stressed that while many oral cancers are preceded by visible red or white patches, the clinical appearance alone is often deceptive, making histopathological correlation essential. He presented a systematic diagnostic approach, starting from detailed history-taking, lesion assessment, and habit evaluation to differentiating between inflammatory vs. non-inflammatory and scrapable vs. non-scrapable lesions. High-risk anatomical sites such as the tongue borders, vestibule, and retrocommissural areas were particularly highlighted.

A major focus of the presentation was on adjuvant diagnostic tools, including Toluidine Blue staining, which aids in detecting dysplastic changes and enhances patient awareness through visible color changes. Biopsy, both incisional and excisional, was reaffirmed as the gold standard for definitive diagnosis, especially for persistent or indurated lesions. Dr. Chakraborty demonstrated through multiple case studies how early biopsy and accurate histopathological correlation led to the identification of epithelial dysplasia and early-stage carcinoma, facilitating complete recovery and improved patient outcomes.

The session also featured discussions on common oral lesions such as leukoplakia, erythroplakia, and lichen planus, emphasizing their variable malignant potential and the need for regular monitoring. Dr. Chakraborty encouraged clinicians to foster a “biopsy culture” in routine practice, maintain photographic and histological documentation for follow-up and medico-legal use, and educate patients about oral hygiene, habit cessation, and self-examination.

In conclusion, Dr. Chakraborty’s lecture underscored the interdisciplinary collaboration between oral pathologists and clinicians in reducing the burden of oral cancer. He urged practitioners to adopt a systematic, evidence-based diagnostic approach, emphasizing that the key to survival lies in early detection rather than delayed intervention.
His final message resonated deeply with the audience:
'Not all red/white patches, ulcers turn into oral cancer, but every oral cancer starts with one'

Keywords: Oral Potentially Malignant Disorders (OPMDs), Leukoplakia, Erythroplakia, Oral Lichen Planus, Toluidine Blue Staining, Biopsy, Oral Cancer, Clinical–Histopathological Correlation, Early Detection



Dr. Eleni Georgakopoulou

Oral Medicine Specialist, Director, Private Referral Clinic for Complex Oral Conditions, Athens, Greece

Therapeutic strategies for Oral Inflammatory disorders: From Topical to systemic approach

The management of oral inflammatory disorders requires a structured and individualized therapeutic approach. This presentation provides a comprehensive overview of treatment strategies, emphasizing the progression from topical to systemic therapy. The guiding principle in oral medicine is to begin with the least invasive, site-specific treatment and escalate only when necessary.

Topical corticosteroids remain the cornerstone of first-line therapy, effectively controlling inflammation when correctly applied. Calcineurin inhibitors serve as alternatives in steroid-refractory or contraindicated cases, while topical antifungals are essential to prevent and manage Candida overgrowth during corticosteroid use. The importance of galenic preparations is underlined, as customized formulations often improve efficacy and patient compliance when commercial products are inadequate.

For more extensive or severe disease, systemic corticosteroids are indispensable, though their use requires careful dosing, tapering, and monitoring for adverse effects. Steroid-sparing agents such as azathioprine, mycophenolate mofetil, and dapsone reduce long-term toxicity, while biologics—including rituximab and anti-TNF agents—offer promising targeted options for refractory autoimmune conditions like pemphigus vulgaris and Behçet's disease.

Practical challenges such as drug availability, patient adherence, and cost remain significant barriers in real-world settings. Future directions include nanotechnology-based delivery systems, salivary biomarkers for treatment response, and the integration of personalized medicine and digital monitoring tools.

By combining clinical experience with emerging evidence, oral medicine can continue to evolve toward more precise, effective, and patient-centered care for chronic mucosal diseases.



Dr. Abhishek Bhadranna

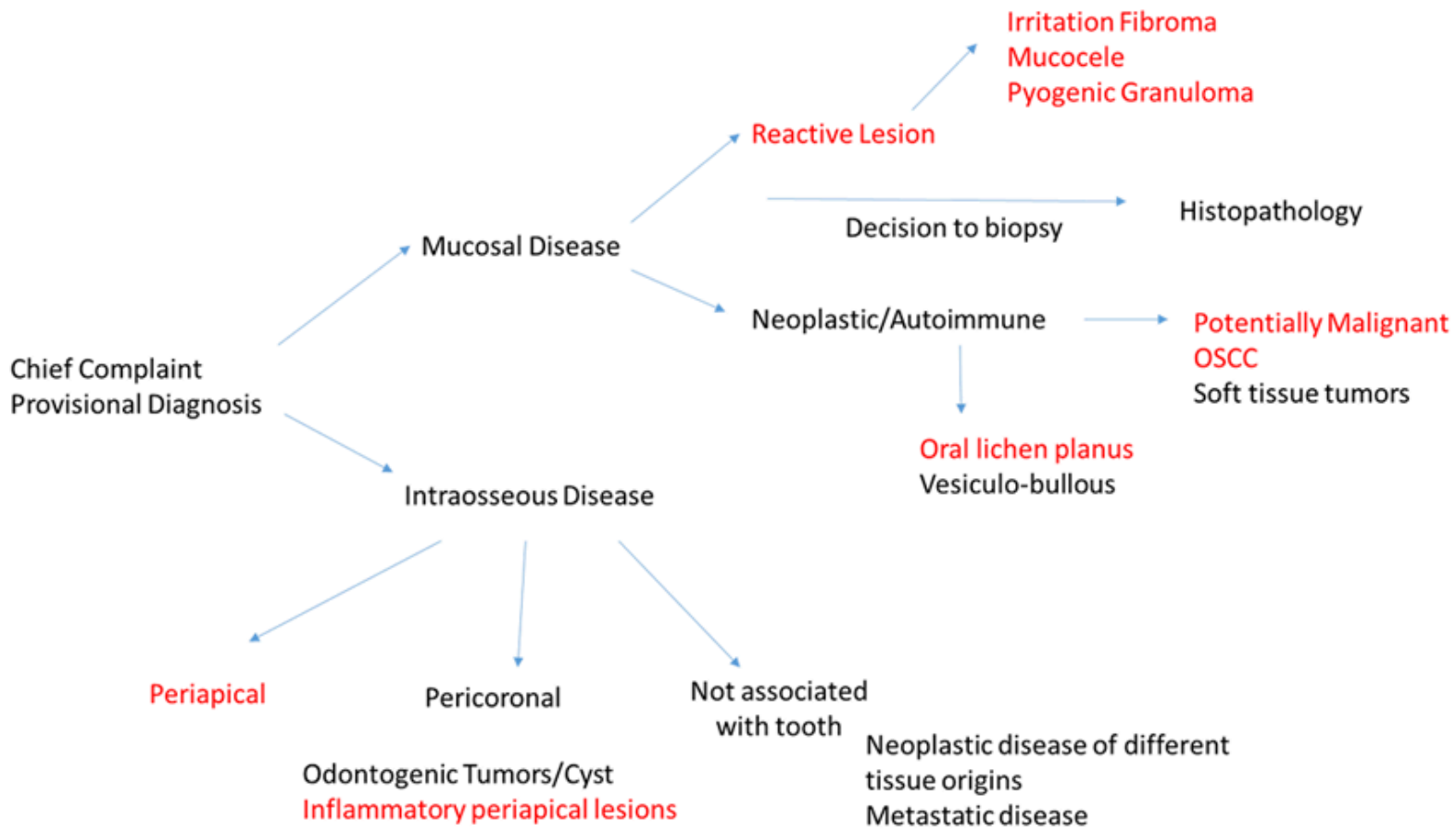
Consultant Oral Pathologist,
Dr. Bhadranna's Oral Pathology

Algorithm for diagnosing common oral mucosal and intraosseous jaw lesions

Accurate diagnosis of oral mucosal and intra-osseous jaw lesions requires a structured and multidisciplinary approach integrating clinical evaluation, radiology, and histopathology. This lecture, proposes a practical diagnostic algorithm derived from an audit of 237 consecutive cases reported between January and September 2025 in a private oral pathology practice. The audit reinforces the axiom that common lesions occur more frequently than presumed, whereas rare entities are significantly less prevalent, underscoring the importance of pattern recognition and disciplined diagnostic reasoning. Through matched case comparisons, the study highlights how subtle differences in clinical history—such as age, symptom duration, prior medical interventions—and key radiological observations, including cortical expansion, root resorption, margin characteristics, and anatomical localization, critically influence provisional and differential diagnoses. Cases involving periapical radiolucencies, peri-coronal lesions, and mucosal swellings illustrate frequent diagnostic pitfalls and emphasize the value of peri-surgical communication between clinicians and surgeons. Histopathology emerged as the decisive diagnostic tool across all categories, confirming its role as the gold standard, particularly in lesions with overlapping clinical or radiographic presentations. The algorithm presented integrates clinical, radiological, biochemical, and molecular inputs, providing a reproducible framework applicable to both common reactive conditions and uncommon neoplastic or potentially malignant disorders.The presentation advocates for systematic data correlation and collaborative practice to enhance diagnostic accuracy. By following a stepwise algorithm, clinicians can reliably differentiate routine lesions from rare pathologies, ensuring optimal patient management. This presentation was dedicated to Dr Anita Borges, who emphasized "What is common is more common than we think and what is rare is even more rare than we think". Gratitude to Dr Bhuvan and whole team of POPMA for the opportunity.

Algorithm for oral mucosal and intraosseous jaw lesions.

Red Font indicate: Common lesions encountered in day to day practice.





Dr. Nidhi Jadhav

Practicing Dentist & Oral Pathologist, Kanak Multispeciality Dental Clinics

Oral Lichen Planus: Navigating the current perspective for management of the disease

Dr. Nidhi Jadhav delivered a comprehensive and clinically focused lecture on Oral Lichen Planus (OLP), offering a multidimensional perspective that blended pathogenesis, therapeutic innovation, and holistic patient care. The presentation emphasized that OLP is a chronic, immune-mediated mucocutaneous disorder with significant psychosocial and oncologic implications, requiring an integrative management strategy to prevent malignant transformation and improve quality of life.

In the pathogenesis segment, Dr. Jadhav elaborated on the autoimmune cascade underlying OLP, describing T-cell–mediated basal keratinocyte apoptosis triggered by cross-reactive or unknown antigens. The immunopathology involves antigen presentation by Langerhans cells, activation of $CD4^+$ and $CD8^+$ lymphocytes, and release of pro-inflammatory cytokines — IL-17, IFN-γ, TNF-α, and IL-12/23 — which collectively lead to basement membrane disruption through mast cell degranulation and MMP-9 activation.

The clinical spectrum was detailed through multiple presentations — reticular, erosive, and desquamative gingivitis forms — emphasizing the distinction between true OLP and oral lichenoid lesions. Dr. Jadhav underscored the necessity of histopathological confirmation to exclude epithelial dysplasia and other mimickers.

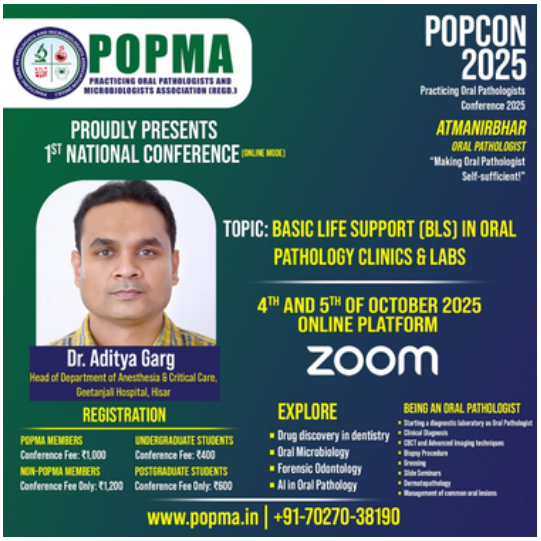
The lecture highlighted the psychoneuroimmunological dimension of OLP, identifying stress, anxiety, and depression as disease modulators. Dr. Jadhav advocated for lifestyle modifications such as yoga, mindfulness, nutritional optimization, and avoidance of irritants like spicy food and sodium lauryl sulfate–containing toothpaste.

Her stepwise therapeutic protocol integrated conventional and advanced interventions:
·First-line therapy: Topical corticosteroids (triamcinolone, clobetasol, fluocinonide) via gels, mucoadhesive patches, and custom trays.
·Second-line therapy: Systemic corticosteroids, immunosuppressants (tacrolimus, cyclosporine, pimecrolimus), and retinoids with vitamin D and selenium support.
·Third-line and emerging therapies: Biologics (secukinumab, infliximab, tildrakizumab), photodynamic therapy (PDT), and low-level laser therapy (LLLT) — each showing comparable efficacy to topical steroids in refractory cases.

A distinctive section on integrative and alternative modalities covered Ayurvedic and naturopathic interventions addressing systemic balance and inflammation. Dr. Jadhav cited the therapeutic potential of Triphala rinses, aloe vera, licorice, curcumin (5%), and dietary omega-3 supplementation. She also discussed cutting-edge research on JAK inhibitors (baricitinib, upadacitinib), mesenchymal stem cell therapy, and microRNA-based regulation (miR-214) as future frontiers in OLP management.
Special consideration was given to pediatric OLP, accounting for approximately 3% of cases, typically managed with low-potency steroids, vitamin supplementation, and conservative monitoring.

Dr. Jadhav concluded with an evidence-based and empathetic message: OLP management must transcend lesion control to encompass psychological wellbeing, lifestyle modification, and vigilant follow-up for dysplastic changes. Her closing statement resonated powerfully with the audience:
“Treating OLP is not just about healing lesions, but about restoring the patient’s comfort, confidence, and quality of life.”

Keywords: Oral Lichen Planus, Autoimmunity, Cytokine Cascade, Basal Cell Apoptosis, Topical Corticosteroids, Immunomodulation, Biologics, Photodynamic Therapy, Curcumin, Integrative Medicine, Stem Cell Therapy, JAK Inhibitors, Oral Pathology, POPMA.



Dr. Aditya Garg

Head of the Department of Anesthesia & Critical Care, Geetanjali Hospital, Hisar

Basic Life Support (BLS) in Oral Pathology Clinics and Labs

Dr. Aditya Garg, a distinguished anesthesiologist and critical care expert, emphasized that Basic Life Support (BLS) is a universal life-saving skill that transcends medical specializations. He highlighted that cardiac and respiratory emergencies can arise unexpectedly in any clinical or diagnostic environment, including dental clinics and pathology laboratories, and that timely, confident intervention can be the deciding factor between survival and mortality.

Dr. Garg provided a clear and evidence-based overview of the scientific foundations and protocols of BLS, simplifying advanced emergency medicine principles for practical application in routine healthcare settings. He explained that the global burden of cardiac arrest remains a major public health challenge, yet survival outcomes significantly improve with early initiation of BLS and effective cardiopulmonary resuscitation (CPR).

The lecture systematically detailed the core steps of BLS, beginning with assessment of scene safety, confirmation of unresponsiveness, and activation of emergency medical services. He elaborated on high-quality chest compressions—performed at a rate of 100–120 per minute and a depth of 5–6 cm with full chest recoil—followed by rescue breaths in a 30:2 ratio using barrier devices to ensure infection control. Advanced techniques such as the head tilt–chin lift and jaw thrust maneuvers were demonstrated for airway management, alongside bag–mask ventilation using the C–E technique to achieve an effective seal.

A dedicated segment focused on the use of Automated External Defibrillators (AEDs), highlighting their accessibility, automated rhythm analysis, and life-saving potential when integrated promptly during resuscitation. Dr. Garg emphasized continuous CPR with minimal interruptions until professional medical assistance arrives, and detailed post-rescue care, including recovery positioning and monitoring for aspiration or recurrence.
From a clinical safety perspective, Dr. Garg urged all dental and diagnostic establishments to maintain emergency preparedness kits equipped with Ambu bags, face masks, and AEDs. He advocated for mandatory BLS and AED training for all healthcare staff and the incorporation of emergency management modules into dental education curricula.

The session concluded with an engaging simulation-based demonstration, reinforcing practical aspects of CPR and AED use. Dr. Garg announced plans to organize hands-on ACLS and BLS training workshops at future POPMA events, supplemented with instructional videos accessible through POPMA's online learning network.

In his closing remarks, Dr. Garg emphasized that "Confidence saves more lives than equipment," inspiring participants to transform preparedness into action and integrate emergency response readiness into everyday clinical culture. His session marked a vital step in uniting the fields of critical care and dental diagnostics under the common goal of saving lives through knowledge, skill, and swift response.

Keywords: Basic Life Support (BLS), Cardiopulmonary Resuscitation (CPR), Automated External Defibrillator (AED), Airway Management, Emergency Medicine, Dental Emergency Preparedness, Cardiac Arrest, Clinical Safety, POPMA.



Dr. Meenakshi S

Associate Professor, Dept. of Prosthodontics, JSS Dental College & Hospital, Mysuru

Silos to Solutions – Fostering industry academia collaboration

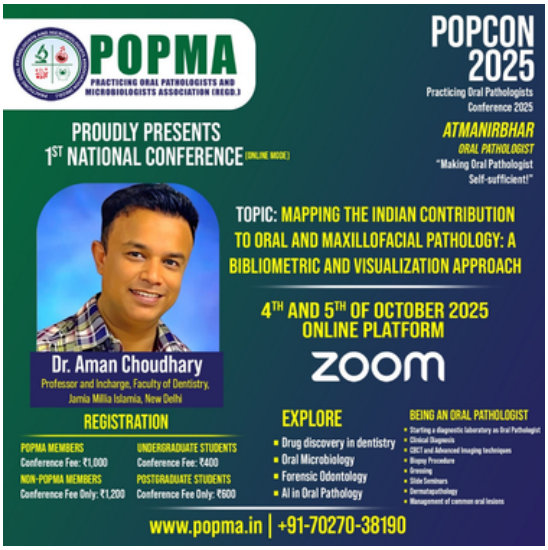
Industry-academia collaboration is pivotal in bridging the gap between theoretical knowledge and practical applications, driving innovation, and addressing real-world challenges. This presentation shares my personal journey of collaborating with group pharma company to launch Anabel DS, a novel dental product to combat candida infection among geriatric denture wearing patients. Despite encountering numerous challenges, the support of my parent institution and interprofessional collaboration enabled me to overcome obstacles and achieve success. Emphasizing the importance of Atmanirbhartha (self-reliance) in dentistry, this presentation highlights the vital role of industry-academia partnerships in fostering innovation, promoting interprofessional collaboration, and ultimately enhancing patient care. By sharing my experiences, I aim to inspire and empower dental professionals to embark on similar collaborative endeavors, driving progress and excellence in the field.

Key Takeaways:

1. Industry-academia collaboration can drive innovation and excellence in dentistry.
2. Interprofessional collaboration is essential for overcoming challenges and achieving success.
3. Atmanirbhartha in dentistry can be achieved through self-reliance and innovation.
4. Parent institution support plays a crucial role in facilitating industry-academia collaborations.

This abstract provides a brief overview of our journey and highlights the importance of industry-academia collaboration, interprofessional collaboration, and Atmanirbhartha in dentistry.

Keywords: Industry-academia collaboration; Innovation in dentistry; Interprofessional collaboration; Atmanirbhartha; Self-reliance; Dental product development; Candida infection; Geriatric patients; Denture care; Group Pharma; Institutional support; Translational research; Oral health innovation; Clinical application; Academic-industry partnership.



Dr. Aman Choudhary

Professor and Incharge, Faculty of Dentistry, Jamia Millia Islamia, New Delhi

Mapping the Indian contribution to Oral Pathology: A bibliometric

Over the past ten years, oral and maxillofacial pathology (OMP) has seen a notable increase in academic activity in India. In a time when independence and scientific prominence are valued, it is becoming more and more important to assess how the speciality has changed as a result of its research contributions. To provide a comprehensive overview of the Indian OMP research landscape, my guest lecture at POPCON 2025 draws on my published study, "Mapping of Journal of Oral and Maxillofacial Pathology from 2011 to 2022: A VOSviewer-based Bibliometric Visualization" (J Oral Maxillofac Pathol. 2023; 27 (1): 204–209; doi: 10.4103/jomfp.jomfp_398_22*).

The presentation led the audience through an interesting examination of how bibliometric visualisation may highlight the hidden dynamics of our field's research. It was shown how authorship, citation, and keyword co-occurrence patterns may be converted into visual networks that tell the tale of OMP research in India using data from the Scopus database and analysis using VOSviewer. Understanding how these patterns represent the discipline's development, cooperation, and scientific direction was more important than just interpreting the data.

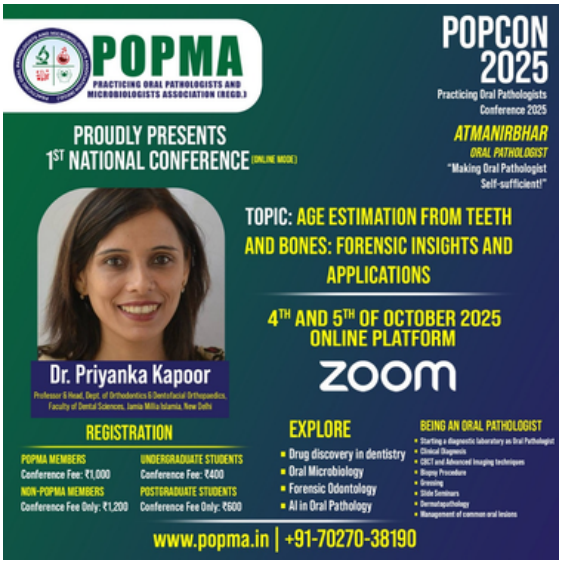
We looked at the evolution of the Journal of Oral and Maxillofacial Pathology (JOMFP) from 2011 to 2022 using interactive visual maps, which revealed a consistent increase in publication volume and citation consistency. I emphasised the ways that often occurring phrases like "oral squamous cell carcinoma" and "immunohistochemistry" demonstrate the continued importance of oncopathology and diagnostic research in our joint endeavours. The finding that a small group of very active authors still account for a large portion of the journal's scientific output, out of over 3,000 contributors, was equally significant. This finding speaks to both productivity and mentoring within our community.

Discussion of collaboration patterns—how formerly isolated scholars are now collaborating across institutions and geographical boundaries to build thriving clusters of common inquiry—was spurred by the co-authorship and bibliographic coupling maps. We also looked at how new topic fields are becoming the next frontiers in OMP research, such as digital imaging, forensic odontology, and molecular pathology.

India's dominance in publication output, bolstered by an increase in participation from other Asian and Middle Eastern nations, was a particularly positive finding that was noted. This indicates that the region is becoming more and more influential in the global OMP environment.

Essentially, my talk positioned bibliometric analysis as a strategic instrument for introspection and planning, rather than merely as a statistical exercise. Such studies assist us in identifying our areas of strength, areas of persistent gaps, and ways that we may work together to build the future of our speciality by converting complicated citation data into easily understood visual insights. In doing so, the conversation struck a strong chord with the POPCON 2025 topic, "Atmanirbhar Oral Pathologist," which highlights data-driven self-sufficiency, teamwork, and self-awareness as the cornerstones of professional development.

Keywords: Oral and Maxillofacial Pathology; Bibliometric Analysis; VOSviewer; Journal of Oral and Maxillofacial Pathology; Research Trends; Citation Mapping; Authorship Patterns; Co-authorship Network; Keyword Co-occurrence; Scientometric Visualization; Oral Squamous Cell Carcinoma; Immunohistochemistry; Digital Pathology; Forensic Odontology; Molecular Pathology; Research Collaboration; Indian Publications; Academic Productivity; Bibliographic Coupling; Atmanirbhar Oral Pathologist



Dr. Priyanka Kapoor

Professor & Head, Dept. of Orthodontics & Dentofacial Orthopaedics, Faculty of Dental Sciences, Jamia Millia Islamia, New Delhi

Age Estimation From Teeth And Bones: Forensic Insights and Applications

Age estimation is one of the key pillars of forensic identification, and the lecture titled “Age Estimation from Teeth and Bones: Forensic Insights and Applications” brought this significance to life by bringing together science, practical experience, and real investigative on-field challenges. The session began by grounding the audience in the importance of age estimation, showing how it influences both civil and criminal problem solving, related to identification of unknown individuals, juvenile justice matters, immigration disputes, mass disasters, and many more. To make the audience resonate with the issues, many case examples were shared, allowing listeners to follow the step-by-step reasoning used by forensic odontologists for selection of age indicators, interpreting developmental stages, and corroborating findings from multiple sources. This approach was further supported by exposure to not one but multiple scientific research methods used to solve these cases along with human stories and decision-making processes behind each conclusion. The lecture then unfolded into an exploration of dental age estimation, emphasizing why teeth are considered some of the most dependable biological markers. Both children and adults age estimation was discussed at length, including developmental methods such as Demirjian, Nolla, London Atlas, Camariere’s, Moorrees, etc. along with degenerative approaches like Gustafson’s criteria, cementum annulation, and pulp-to-tooth ratio. These methods were not presented merely as rigid techniques but were explained in terms of their strengths, limitations, and the critical need to adapt them to population-specific growth variations. The growing influence of modern technology in refining accuracy and reducing examiner bias was also highlighted with the aspects of digital imaging, morphometric analysis, and emerging AI-based tools. With this sound scientific basis, the lecture then evolved into aspects of skeletal age estimation, illustrating how bones and teeth complement each other in forming a complete biological picture.

The attendees were introduced to familiar skeletal maturity indicators like CVMI staging as well as gave a peek into biological mediators responsible for skeletal maturity, highlighting the practical and research aspects. The lecture encouraged listeners to appreciate the inherent variability in skeletal growth and the interpretive challenges this creates—particularly in adolescents and young adults whose developmental milestones often differ from established reference standards. A recurring message throughout the session was the importance of using multiple approaches rather than depending on a single age marker. The lecture emphasized that the most reliable and defensible age assessments arise from integrating dental, skeletal, radiographic, and anthropological findings, allowing different lines of evidence to reinforce one another. This integrated strategy was presented as not only scientifically robust but also crucial in medicolegal situations where the implications of age determination can be significant. At the same time, participants were reminded of the practical constraints that come with real-world forensic work—such as post-mortem alterations, nutritional and socioeconomic influences, and normal biological variation—ensuring they left with a grounded and realistic understanding of both the strengths and limitations of age estimation. Ethical aspects were also carefully explored, including concerns about radiation exposure in living individuals, the necessity of following national and international regulations, and the duty of forensic specialists to maintain impartiality in emotionally or legally sensitive cases. By the conclusion of the lecture, attendees gained several valuable insights: an appreciation for the central role of age estimation in forensic science; an understanding that teeth and bones each offer distinct yet complementary information; familiarity with a broad range of age assessment methods; confidence in the value of a multimodal approach; and a deeper awareness of the ethical responsibilities involved in this work

Keywords: Age Estimation; Forensic Odontology; Forensic Anthropology; Dental Age Estimation; Skeletal Age Estimation; Teeth and Bones; Demirjian Method; Nolla's Stages; London Atlas; Camariere's Method; Moorrees Method; Gustafson's Criteria; Cementum Annulation; Pulp-to-Tooth Ratio; Cervical Vertebral Maturity Indicators (CVMI); Digital Imaging; Morphometric Analysis; Artificial Intelligence; Population-Specific Standards; Juvenile Justice; Human Identification; Medicolegal Applications; Ethical Considerations; Radiation Safety; Multimodal Approach; Forensic Investigation; Biological Variability; India.

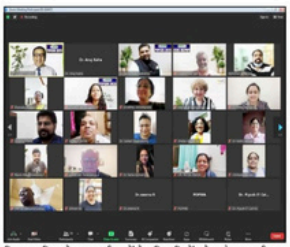
POPCON 2025: Pioneering a New Chapter in Oral Pathology

मीडिया प्वाईंट
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मील का पत्थर साबित होगा प्रथम राष्ट्रीय सम्मेलन पोपकोन-2025: एसोसिएशन

सिरसा। भारत के ओरल पैथोलॉजिस्ट्स के इतिहास में प्रैक्टिसिंग ओरल पैथोलॉजिस्ट्स एंड माइक्रोबायोलॉजिस्ट्स एसोसिएशन द्वारा आयोजित प्रथम राष्ट्रीय सम्मेलन पोपकोन-2025 मील का पत्थर साबित होगा, जिसका भव्य आयोजन 4 और 5 अक्टूबर 2025 को ऑनलाइन माध्यम से किया गया। इस सम्मेलन ने भारत के ओरल पैथोलॉजिस्ट्स को एक सांझा डिजिटल मंच पर एकजुट कर, देश के विभिन्न राज्यों और विदेशों से जुड़े विशेषज्ञों को जोड़ते हुए ज्ञान, अनुभव और नवाचार का एक अद्वितीय संगम प्रस्तुत किया।

सम्मेलन का उद्देश्य था ओरल डायग्नोस्टिक साइंसेज में आत्मनिर्भरता, नवाचार और सहयोग को बढ़ावा देना, जिससे भारतीय ओरल पैथोलॉजिस्ट्स को अकादमिक और क्लिनिकल दोनों ही स्तरों पर सशक्त किया जा सके। इसी को ध्यान में रखते हुए सम्मेलन की थीम रखी गई आत्मनिर्भर ओरल पैथोलॉजिस्ट। दो दिवसीय इस कार्यक्रम में ओरल डायग्नोस्टिक्स, माइक्रोबायोलॉजी, हेड-नेक ऑन्कोलॉजी, क्लिनिकल रिसर्च, लैब मैनेजमेंट और डिजिटल इनोवेशन्स इन हेल्थकेयर जैसे विषयों पर केंद्रित सत्र आयोजित किए गए। इन सत्रों में विशेषज्ञों ने न केवल वैज्ञानिक जानकारी साझा की, बल्कि प्रैक्टिकल एप्लिकेशन, रिसर्च अप्रोच और इंडस्ट्री कोलैबोरेशन के अवसरों पर भी गहन चर्चा की। सम्मेलन में 18 से अधिक प्रतिष्ठित राष्ट्रीय और अंतरराष्ट्रीय वक्ताओं ने अपने व्याख्यान प्रस्तुत किए, जिनमें ओरल कैंसर डायग्नोसिस, हेड-नेक ट्यूमर्स, प्रिवेंटिव पैथोलॉजी, एंटिमाइक्रोबियल रेसिस्टेंस, फॉरेंसिक ओडोंटोलॉजी, बायोप्सी टेक्निक्स और आर्टिफिशियल इंटेलिजेंस इन डायग्नॉस्टिक्स जैसे अत्याधुनिक



विषय शामिल थे। इन सभी सत्रों ने प्रतिभागियों को न केवल नवीनतम शोध से अवगत कराया, बल्कि भविष्य की ओरल हेल्थकेयर टेक्नोलॉजी की दिशा भी स्पष्ट की।

सम्मेलन में भारत के विभिन्न राज्यों से 250 से अधिक डेलीगेट्स ने भाग लिया, जिनमें शिक्षाविद, प्रैक्टिशनर्स, पोस्टग्रेजुएट और अंडरग्रेजुएट स्टूडेंट्स शामिल थे। प्रतिभागियों ने 40 से अधिक वैज्ञानिक पोस्टर प्रेजेंटेशन्स प्रस्तुत किए और सभी प्रतिभागियों को 12 सीडीई पॉइंट्स प्रदान किए गए। इस आयोजन की सफलता में पोपमा की गवर्निंग बॉडी, साइंटिफिक कमेटी, आईटी सेल, ऑर्गनाइजिंग कमेटी और कम्युनिकेशन एवं कोऑर्डिनेशन टीम का सामूहिक प्रयास शामिल रहा।

ऑर्गनाइजिंग टीम के प्रमुख सदस्य डा. शैलजा चटर्जी, डा. अभिषेक बनर्जी, डा. भुवन नागपाल, डा. अनुज कालरा, डा. पीयूष शर्मा, डा. अभिषेक भटना, डा. केतकी कालेले, डा. निधि जाधव, डा. निहारिका एम, डा. होनिका, डा. स्वप्निता पाटिल, डा. शिवानी मुंगाला, डा. नेहा कुमारी और डा. वंदना शाह ने अपने उत्कृष्ट समन्वय, नेतृत्व और समर्पण से इस आयोजन को नई ऊंचाइयों तक पहुंचाया। विशेष रूप से, टेक्निकल मैनेजमेंट और डिजिटल एक्सीक्यूशन में डा. पीयूष शर्मा की भूमिका अत्यंत सराहनीय रही। उन्होंने पूरे सम्मेलन को ऑनलाइन माध्यम से सफलतापूर्वक संचालित करते हुए ऑटोमेटेड रजिस्ट्रेशन सिस्टम, लाइव सेशन्स, डिजिटल सर्टिफिकेट डिस्ट्रीब्यूशन, डेटा इंटीग्रेशन और रियल-टाइम कोऑर्डिनेशन जैसी तकनीकी व्यवस्थाओं को दक्षता से संभाला। उनकी तकनीकी दूरदृष्टि और समर्पण ने सम्मेलन के संचालन को पूर्णतः डिजिटल और त्रुटिरहित बनाया।

पोपकोन-2025 न केवल एक सम्मेलन था, बल्कि यह भारतीय ओरल पैथोलॉजी समुदाय की एकता, सामूहिकता और आत्मनिर्भरता की दिशा में एक बड़ा कदम था। इस आयोजन ने यह संदेश दिया कि भारत के ओरल पैथोलॉजिस्ट्स अब केवल अकादमिक क्षेत्र तक सीमित नहीं हैं, बल्कि डायग्नॉस्टिक प्रैक्टिस, रिसर्च कोलैबोरेशन, हेल्थकेयर इनोवेशन और डिजिटल ट्रांसफॉर्मेशन में भी अग्रणी भूमिका निभा रहे हैं। इस आयोजन के माध्यम से पोपमा ने एक ऐसा मंच तैयार किया, जहां ज्ञान, कौशल और तकनीक का संगम हुआ, जो आने वाले वर्षों में भारतीय ओरल पैथोलॉजी के विकास और वैश्विक पहचान को और अधिक सशक्त बनाएगा।

अग्रोहा धाम में विशाल वार्षिक मेला 7 अक्तूबर को



सिरसा। अग्रोहा धाम में विशाल वार्षिक मेला 7 अक्तूबर 2025, मंगलवार को आयोजित किया जाएगा। इस बारे जानकारी देते हुए अग्रोहा विकास ट्रस्ट के प्रदेशाध्यक्ष अंजनी कनोडिया, जिलाध्यक्ष पुरुषोतम गोयल, प्रधान अनिल सर्राफ, महासचिव अश्वनी बंसल ने संयुक्त रूप से बताया कि इस कार्यक्रम में बतौर मुख्यातिथि मुख्य संरक्षक अग्रोहा धाम डा. सुभाष चंद्रा व राष्ट्रीय अध्यक्ष खजरगदास गर्ग शिरकत करेंगे, जबकि शुभ आशीर्वाद देने के लिए परम पूज्य महामंडलेश्वर महाब्रह्मर्षि श्री कुमार स्वामी पहुंचेंगे। भजन सम्राट कन्हैया मित्तल अपनी मधुर वाणी से भजनों की अमृत वर्षा करेंगे। कार्यक्रम की रूपरेखा बारे उन्होंने बताया कि सुबह 9 बजे भंडारा आरंभ होगा। प्रात: 10 बजे छप्पन भोग लगाया जाएगा, जबकि ध्वजारोहण सवा दस बजे होगा। उन्होंने बताया कि अग्रोहा धाम जाने के लिए नि:शुल्क बसें 7 अक्तूबर की सुबह 9 बजे महाराजा अग्रसेन पार्क हिसार रोड, सिरसा से चलेंगी। उन्होंने सभी अग्र बंधुओं से

आनंद बियानी सिरसा होटल

पॉपकॉन 2025 ने रचा ओरल पैथोलॉजी के क्षेत्र में नया इतिहास

सिरसा (न्यूज टुडे/अक्षित कांबोज)। प्रैक्टिसिंग ओरल पैथोलॉजिस्ट्स एंड सूक्ष्मजीव वैज्ञानिक संघ (पॉपमा) द्वारा 4 और 5 अक्टूबर 2025 को आयोजित प्रथम राष्ट्रीय सम्मेलन ह्यपॉपकॉन 2025ह्न ने ओरल पैथोलॉजी के क्षेत्र में एक नया इतिहास रच दिया। यह आयोजन पूर्णतः ऑनलाइन मंच पर संपन्न हुआ, जिसमें भारत के विभिन्न राज्यों के साथ-साथ विदेशों से भी विशेषज्ञों और चिकित्सकों ने भाग लिया। सम्मेलन की थीम ह्यआत्मनिर्भर ओरल पैथोलॉजिस्टह्न रही, जिसका उद्देश्य ओरल निदान विज्ञान में नवाचार, सहयोग और स्वावलंबन को प्रोत्साहित करना था। दो दिवसीय इस राष्ट्रीय आयोजन में ओरल डायग्नोस्टिक्स, सूक्ष्मजीव विज्ञान, सिर एवं



गर्दन कैंसर, नैदानिक अनुसंधान, प्रयोगशाला प्रबंधन और डिजिटल स्वास्थ्य नवाचार जैसे विषयों पर विशेष सत्र आयोजित किए गए। कार्यक्रम में 18 से अधिक राष्ट्रीय एवं अंतरराष्ट्रीय वक्ताओं ने अपने विचार और अनुभव साझा किए। उनके व्याख्यानों में ओरल कैंसर की शीघ्र पहचान, सिर-गर्दन ट्यूमर, रोग निवारण पद्धतियाँ, प्रतिजैविक प्रतिरोध, फॉरेंसिक डेंटल साइंस, बायोप्सी तकनीक तथा कृत्रिम बुद्धिमत्ता आधारित निदान प्रणाली जैसे विषय प्रमुख रहे। देशभर से आए 250 से अधिक प्रतिनिधियों, जिनमें शिक्षाविद, चिकित्सक, स्नातकोत्तर और स्नातक छात्र शामिल थे, ने सम्मेलन में भागीदारी की। प्रतिभागियों द्वारा 40 से अधिक वैज्ञानिक पोस्टर प्रस्तुत किए गए और सभी प्रतिभागियों को 12 सतत दंत शिक्षा (उऊए) अंक प्रदान किए गए। कार्यक्रम की सफलता में पॉपमा की संचालन समिति, वैज्ञानिक समिति, तकनीकी प्रकोष्ठ और समन्वय टीम का संयुक्त योगदान रहा। विशेष रूप से तकनीकी संचालन में डॉ. पीयूष शर्मा की भूमिका अत्यंत सराहनीय रही, जिन्होंने पूरे आयोजन को तकनीकी दृष्टि से त्रुटिरहित और प्रभावशाली रूप में संपन्न करवाया। यह सम्मेलन न केवल ओरल पैथोलॉजी के क्षेत्र में एक मील का पत्थर सिद्ध हुआ, बल्कि देश-विदेश के विशेषज्ञों के लिए ज्ञान और अनुभव साझा करने का एक सशक्त मंच भी प्रदान किया।

भारत में प्रथम राष्ट्रीय ओरल पैथोलॉजिस्ट्स सम्मेलन पॉपकान 2025 का सफल आयोजन

सिरसा (न्यूज टुडे/अक्षित कांबोज)।

भारत के ओरल पैथोलॉजिस्ट्स के इतिहास में एक महत्वपूर्ण मील का पत्थर साबित हुआ – प्रैक्टिसिंग ओरल पैथोलॉजिस्ट्स एंड माइक्रो बायोलॉजिस्ट्स एसोसिएशन द्वारा आयोजित प्रथम राष्ट्रीय सम्मेलन पॉपकान 2025, जिसका भव्य आयोजन 4 और 5 अक्टूबर 2025 को ऑनलाइन माध्यम से किया गया। इस सम्मेलन ने देश भर के ओरल पैथोलॉजिस्ट्स को एक साझा डिजिटल मंच पर एकजुट किया और विभिन्न राज्यों तथा विदेशों से जुड़े विशेषज्ञों को जोड़ते हुए ज्ञान, अनुभव और नवाचार का अनूठा संगम प्रस्तुत किया। सम्मेलन की थीम थी – आत्मनिर्भर ओरल पैथोलॉजिस्ट मेकिंग ओरल पैथोलॉजिस्ट्स सेल्फ-सफीसिएंट, जिसका उद्देश्य भारतीय ओरल पैथोलॉजिस्ट्स को अकादमिक और क्लिनिकल दोनों स्तरों पर सशक्त बनाना था। दो दिवसीय कार्यक्रम में ओरल डायग्नोस्टिक्स, माइक्रोबायोलॉजी, हेड एंड नेक ऑन्कोलॉजी, क्लिनिकल रिसर्च, लैब मैनेजमेंट और डिजिटल इनोवेशन्स इन हेल्थकेयर जैसे विविध विषयों पर सत्र आयोजित किए गए। इन सत्रों में विशेषज्ञों



ने वैज्ञानिक जानकारी के साथ-साथ प्रैक्टिकल एप्लिकेशन, रिसर्च अप्रोच और इंडस्ट्री कोलैबोरेशन के अवसरों पर भी गहन चर्चा की। 18 से अधिक प्रतिष्ठित राष्ट्रीय और अंतरराष्ट्रीय वक्ताओं ने अपने व्याख्यान प्रस्तुत किए, जिनमें ओरल कैंसर डायग्नोसिस, हेड एंड नेक ट्यूमर्स, प्रिवेंटिव पैथोलॉजी, एंटिमाइक्रोबियल रेसिस्टेंस, फॉरेंसिक ओडोंटोलॉजी, बायोप्सी टेक्निक्स और आर्टिफिशियल इंटेलिजेंस इन डायग्नॉस्टिक्स जैसे अत्याधुनिक विषय शामिल थे। इन सभी सत्रों ने प्रतिभागियों को नवीनतम शोध से अवगत कराने के साथ भविष्य की ओरल हेल्थकेयर टेक्नोलॉजी की दिशा भी स्पष्ट की। सम्मेलन में भारत के विभिन्न राज्यों से 250 से अधिक डेलीगेट्स ने भाग लिया, जिनमें शिक्षाविद, प्रैक्टिशनर्स, पोस्टग्रेजुएट और अंडरग्रेजुएट स्टूडेंट्स शामिल थे। प्रतिभागियों ने 40 से अधिक वैज्ञानिक पोस्टर प्रेजेंटेशन्स प्रस्तुत किए और सभी प्रतिभागियों को 12 सीडीई पॉइंट्स प्रदान किए गए। इस आयोजन की सफलता में डाडडटअ की गवर्निंग बॉडी, साइंटिफिक कमिटी, आईटी सेल, ऑर्गनाइजिंग कमिटी और कम्युनिकेशन एवं कोऑर्डिनेशन टीम का योगदान अहम रहा। ऑर्गनाइजिंग टीम के प्रमुख सदस्य – डॉ. शैलजा चटर्जी, डॉ. अभिषेक बनर्जी, डॉ. भुवन नागपाल, डॉ. अनुज कालरा, डॉ. पीयूष शर्मा, डॉ. अभिषेक भद्रना, डॉ. केतकी कालेले, डॉ. निधि जाधव, डॉ. निहारिका एम., डॉ. होनिका, डॉ. स्वप्निता पाटिल, डॉ. शिवानी मुंगाला, डॉ. नेहा कुमारी और डॉ. वंदना शाह ने अपने उत्कृष्ट समन्वय, नेतृत्व और समर्पण से इस आयोजन को नई ऊंचाइयों तक पहुँचाया। विशेष रूप से, डॉ. पीयूष शर्मा ने टेक्निकल मैनेजमेंट और डिजिटल एक्सीक्यूशन के क्षेत्र में सम्मेलन को त्रुटिरहित और पूरी तरह से ऑनलाइन संचालित किया।

पॉपकान 2025 केवल एक सम्मेलन नहीं, बल्कि भारतीय ओरल पैथोलॉजी समुदाय की एकता, सामूहिकता और आत्मनिर्भरता की दिशा में एक बड़ा कदम साबित हुआ। इस आयोजन ने यह संदेश दिया कि भारतीय ओरल पैथोलॉजिस्ट्स अब केवल अकादमिक क्षेत्र तक सीमित नहीं हैं, बल्कि डायग्नॉस्टिक प्रैक्टिस, रिसर्च कोलैबोरेशन, हेल्थकेयर इनोवेशन और डिजिटल ट्रांसफॉर्मेशन में भी अग्रणी भूमिका निभा रहे हैं। इस आयोजन ने ज्ञान, कौशल और तकनीक का ऐसा मंच तैयार किया है, जो आने वाले वर्षों में भारतीय ओरल पैथोलॉजी के विकास और वैश्विक पहचान को और अधिक सशक्त बनाएगा।

मील का पत्थर साबित होगा प्रथम राष्ट्रीय सम्मेलन पोपकोन-2025 : एसोसिएशन

सिरसा,6 अक्तूबर,(स.ह.): भारत के ओरल पैथोलॉजिस्ट्स के इतिहास में प्रैक्टिसिंग ओरल पैथोलॉजिस्ट्स एंड माइक्रोबायोलॉजिस्ट्स एसोसिएशन द्वारा आयोजित प्रथम राष्ट्रीय सम्मेलन पोपकोन-2025 मील का पत्थर साबित होगा, जिसका भव्य आयोजन 4 और 5 अक्तूबर 2025 को ऑनलाइन माध्यम से किया गया। इस सम्मेलन ने भारत के ओरल पैथोलॉजिस्ट्स को एक सांझा डिजिटल मंच पर एकजुट कर, देश के विभिन्न राज्यों और विदेशों से जुड़े विशेषज्ञों को जोड़ते हुए ज्ञान, अनुभव और नवाचार का एक अद्वितीय संगम प्रस्तुत किया।

सम्मेलन का उद्देश्य था ओरल डायग्नोस्टिक साइंसेज में आत्मनिर्भरता, नवाचार और सहयोग को बढ़ावा देना, जिससे भारतीय ओरल पैथोलॉजिस्ट्स को एकैडमिक और क्लिनिकल दोनों ही स्तरों पर सशक्त किया जा सके। इसी को ध्यान में रखते हुए सम्मेलन की थीम रखी गई आत्मनिर्भर ओरल पैथोलॉजिस्ट। दो दिवसीय इस कार्यक्रम में ओरल डायग्नोस्टिक्स, माइक्रोबायोलॉजी, हैड-नेक ऑन्कोलॉजी, क्लिनिकल रिसर्च, लैब मैनेजमैंट और डिजिटल इनोवेशन्स इन हैल्थकेयर जैसे विषयों पर केंद्रित सत्र आयोजित किए गए।

इन सत्रों में विशेषज्ञों ने न केवल वैज्ञानिक जानकारी सांझा की, बल्कि प्रैक्टिकल एप्लिकेशन, रिसर्च अप्रोच और इंडस्ट्री कोलैबोरेशन के अवसरों पर भी गहन चर्चा की। सम्मेलन में 18 से अधिक प्रतिष्ठित राष्ट्रीय व अंतर्राष्ट्रीय वक्ताओं ने अपने व्याख्यान प्रस्तुत किए, जिनमें ओरल कैंसर डायग्नोसिस, हेड-नेक ट्यूमर्स, प्रिवेंटिव पैथोलॉजी, एंटिमाइक्रोबियल रेसिस्टेंस, फॉरेंसिक ओडोंटोलॉजी, बायोप्सी टैक्निक्स और आर्टिफिशियल इंटैलिजैंस इन डायग्नॉस्टिक्स जैसे अत्याधुनिक विषय शामिल थे।

इन सभी सत्रों ने प्रतिभागियों को न केवल नवीनतम शोध से अवगत करवाया, बल्कि भविष्य की ओरल हैल्थकेयर टैक्नोलॉजी की दिशा भी स्पष्ट की। सम्मेलन में भारत के विभिन्न राज्यों से 250 से अधिक डेलीगेट्स ने भाग लिया, जिनमें शिक्षाविद, प्रैक्टिशनर्स, पोस्टग्रेजुएट और अंडरग्रेजुएट स्टूडैंट्स शामिल थे। प्रतिभागियों ने 40 से अधिक वैज्ञानिक पोस्टर प्रैजैंटेशन्स प्रस्तुत किए और सभी प्रतिभागियों को 12 सी.डी.ई. पॉइंट्स प्रदान किए गए।

इस आयोजन की सफलता में पोपमा की गवर्निंग बॉडी, साइंटिफिक कमेटी, आई.टी. सैल, ऑर्गनाइजिंग कमेटी और कम्युनिकेशन एवं कोऑर्डिनेशन टीम का सामूहिक प्रयास शामिल रहा।

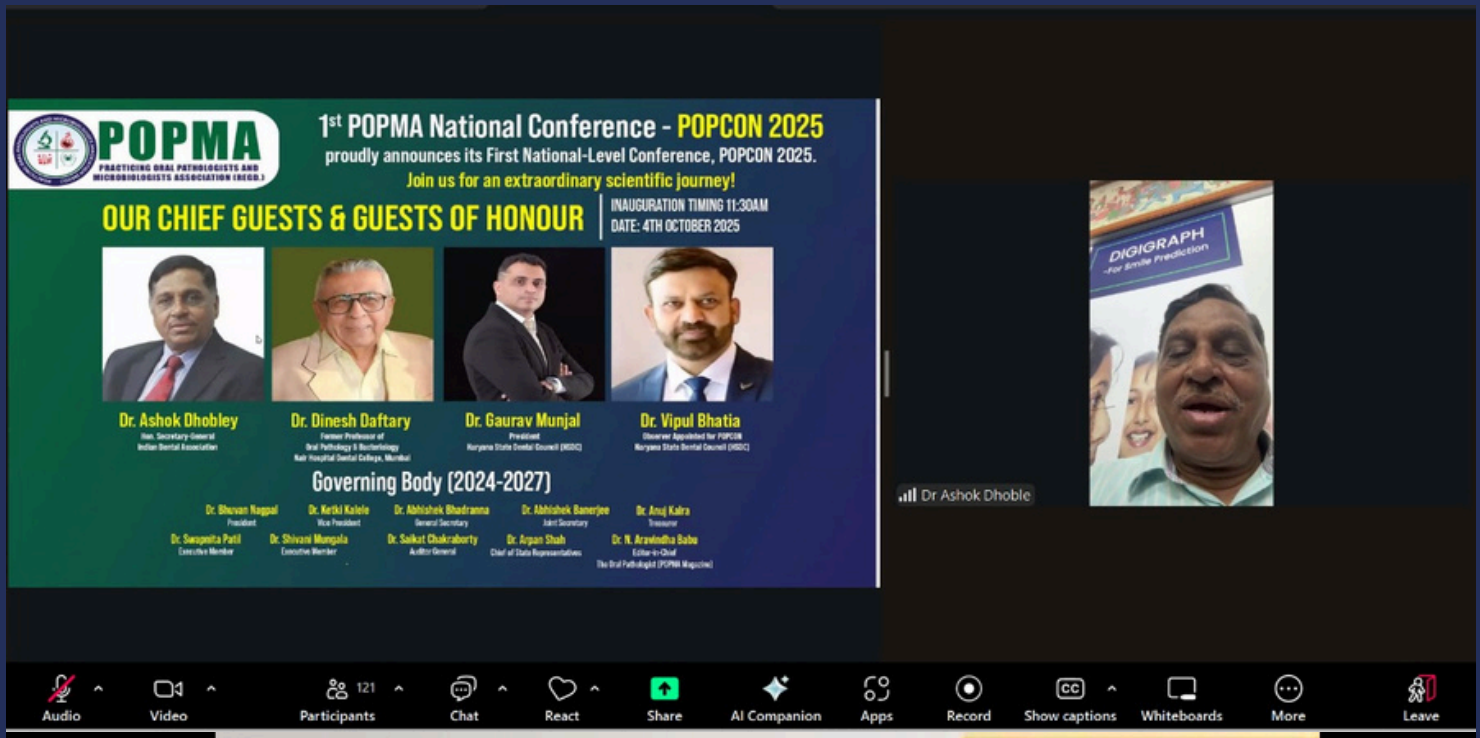
ऑर्गनाइजिंग टीम के प्रमुख सदस्य डॉ. शैलजा चटर्जी, डॉ. अभिषेक बनर्जी, डॉ. भुवन नागपाल, डॉ. अनुज कालरा, डॉ. पीयूष शर्मा, डॉ. अभिषेक भद्रन्ना, डॉ. निधि जाधव व डॉ. वंदना शाह आदि ने अपने उत्कृष्ट समन्वय, नेतृत्व और समर्पण से इस आयोजन को नई ऊंचाइयों तक पहुंचाया। विशेष रूप से, टैक्निकल मैनेजमैंट और डिजिटल एक्सीक्यूशन में डॉ. पीयूष शर्मा की भूमिका अत्यंत सराहनीय रही। उन्होंने पूरे सम्मेलन को ऑनलाइन माध्यम से सफलतापूर्वक संचालित करते हुए ऑटोमेटेड रजिस्ट्रेशन सिस्टम, लाइव सेशन्स, डिजिटल सर्टीफिकेट डिस्ट्रीब्यूशन, डेटा इंटीग्रेशन और रियल-टाइम कोऑर्डिनेशन जैसी तकनीकी व्यवस्थाओं को दक्षता से संभाला। पोपकोन-2025 न केवल एक सम्मेलन था, बल्कि यह भारतीय ओरल पैथोलॉजी समुदाय की एकताए सामूहिकता और आत्मनिर्भरता की दिशा में एक बड़ा कदम था।

मील का पत्थर साबित होगा प्रथम राष्ट्रीय सम्मेलन पोपकोन-25

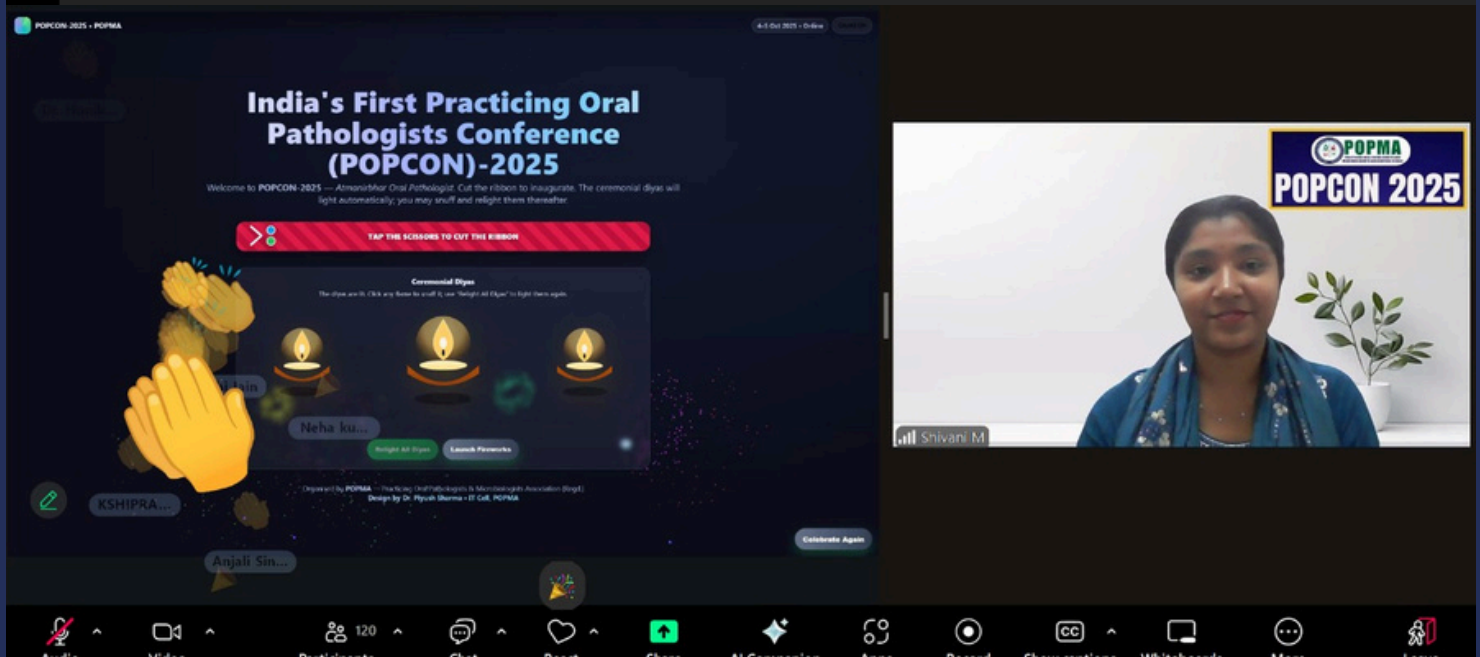
सिरसा। प्रैक्टिसिंग ओरल पैथोलॉजिस्ट्स एंड माइक्रोबायोलॉजिस्ट्स एसोसिएशन ने बताया कि एसोसिएशन द्वारा आयोजित दो दिवसीय प्रथम राष्ट्रीय सम्मेलन पोपकोन-2025 पैथोलोजी के इतिहास में मील का पत्थर साबित होगा। इस सम्मेलन ने भारत के ओरल पैथोलॉजिस्ट्स को एक सांझा डिजिटल मंच पर एकजुट कर, देश के विभिन्न राज्यों और विदेशों से जुड़े विशेषज्ञों को जोड़ते हुए ज्ञान, अनुभव और नवाचार का एक अद्वितीय संगम प्रस्तुत किया। इस दो दिवसीय इस कार्यक्रम में ओरल डायग्नोस्टिक्स, माइक्रोबायोलॉजी, हेड-नेक ऑन्कोलॉजी, क्लिनिकल रिसर्च, लैब मैनेजमेंट और डिजिटल इनोवेशन्स इन हेल्थकेयर जैसे विषयों पर केंद्रित सत्र आयोजित किए गए। इन सत्रों में विशेषज्ञों ने न केवल वैज्ञानिक जानकारी सांझा की, बल्कि प्रैक्टिकल एप्लिकेशन, रिसर्च अप्रोच और इंडस्ट्री कोलैबोरेशन के अवसरों पर भी गहन चर्चा की। सम्मेलन में 18 से अधिक प्रतिष्ठित राष्ट्रीय और अंतरराष्ट्रीय वक्ताओं ने अपने व्याख्यान प्रस्तुत किए, जिनमें ओरल कैंसर डायग्नोसिस, हेड-नेक ट्यूमर्स, प्रिवेंटिव पैथोलॉजी, एंटिमाइक्रोबियल रेसिस्टेंस, फॉरेंसिक ओडोंटोलॉजी, बायोप्सी टेक्निक्स और आर्टिफिशियल इंटैलिजेंस इन डायग्नॉस्टिक्स जैसे अत्याधुनिक विषय शामिल थे। इन सभी सत्रों ने प्रतिभागियों को न केवल नवीनतम शोध से अवगत कराया, बल्कि भविष्य की ओरल हेल्थकेयर टेक्नोलॉजी की दिशा भी स्पष्ट की। सम्मेलन में भारत के विभिन्न राज्यों से 250 से अधिक डेलीगेट्स ने भाग लिया, जिनमें शिक्षाविद, प्रैक्टिशनर्स, पोस्टग्रेजुएट और अंडरग्रेजुएट स्टूडेंट्स शामिल थे। प्रतिभागियों ने 40 से अधिक वैज्ञानिक पोस्टर प्रेजेंटेशन्स प्रस्तुत किए और सभी प्रतिभागियों को 12 सीडीई पॉइंट्स प्रदान किए गए। इस आयोजन की सफलता में पोपमा की गवर्निंग बॉडी, साइंटिफिक कमेटी, आईटी सेल, ऑर्गनाइजिंग कमेटी और क युनिकेशन एवं कोऑर्डिनेशन टीम का सामूहिक प्रयास शामिल रहा। इस अवसर पर डॉ. शैलजा चटर्जी, डॉ. अभिषेक बनर्जी, डॉ. भुवन नागपाल, डॉ. अनुज कालरा,

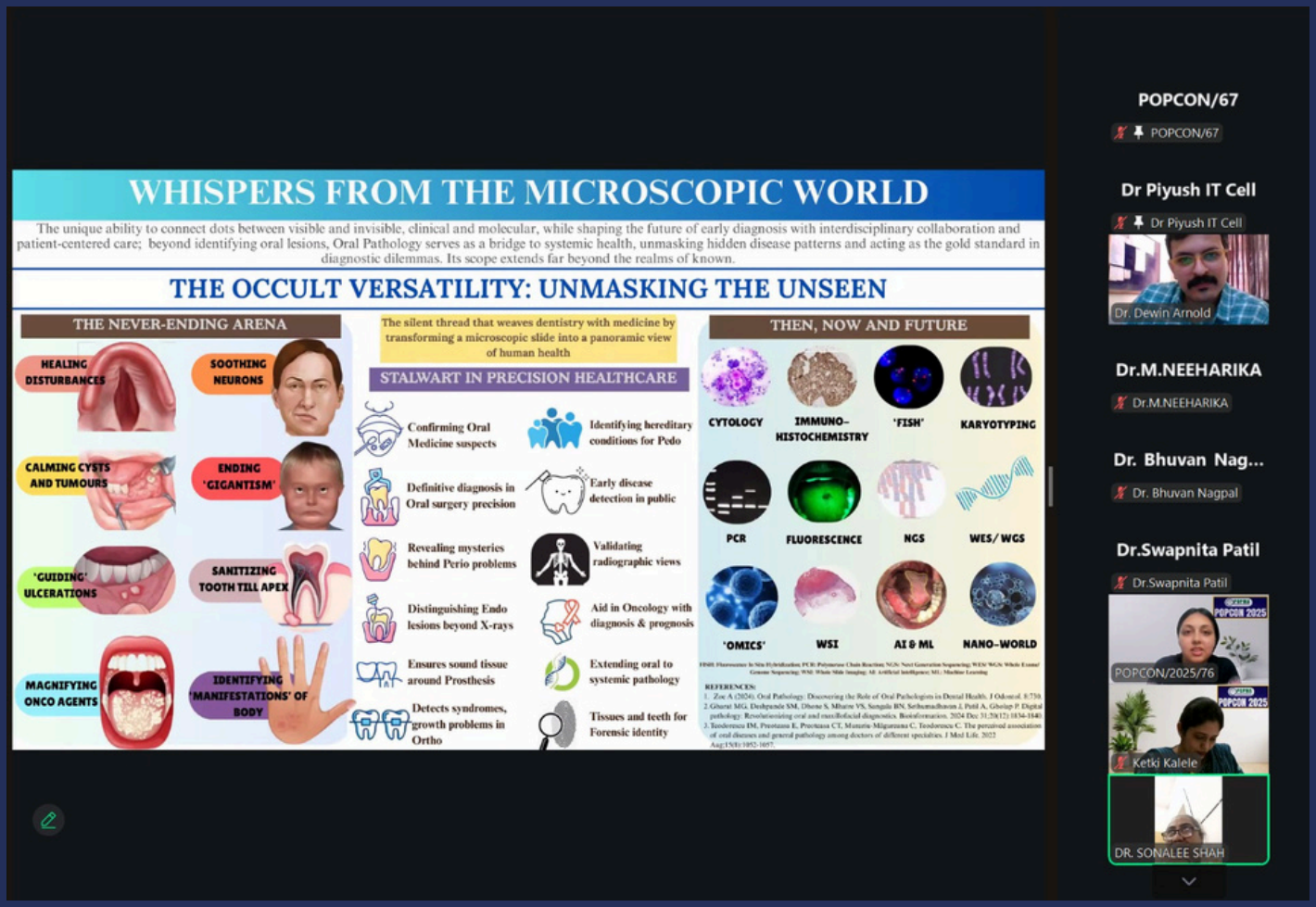


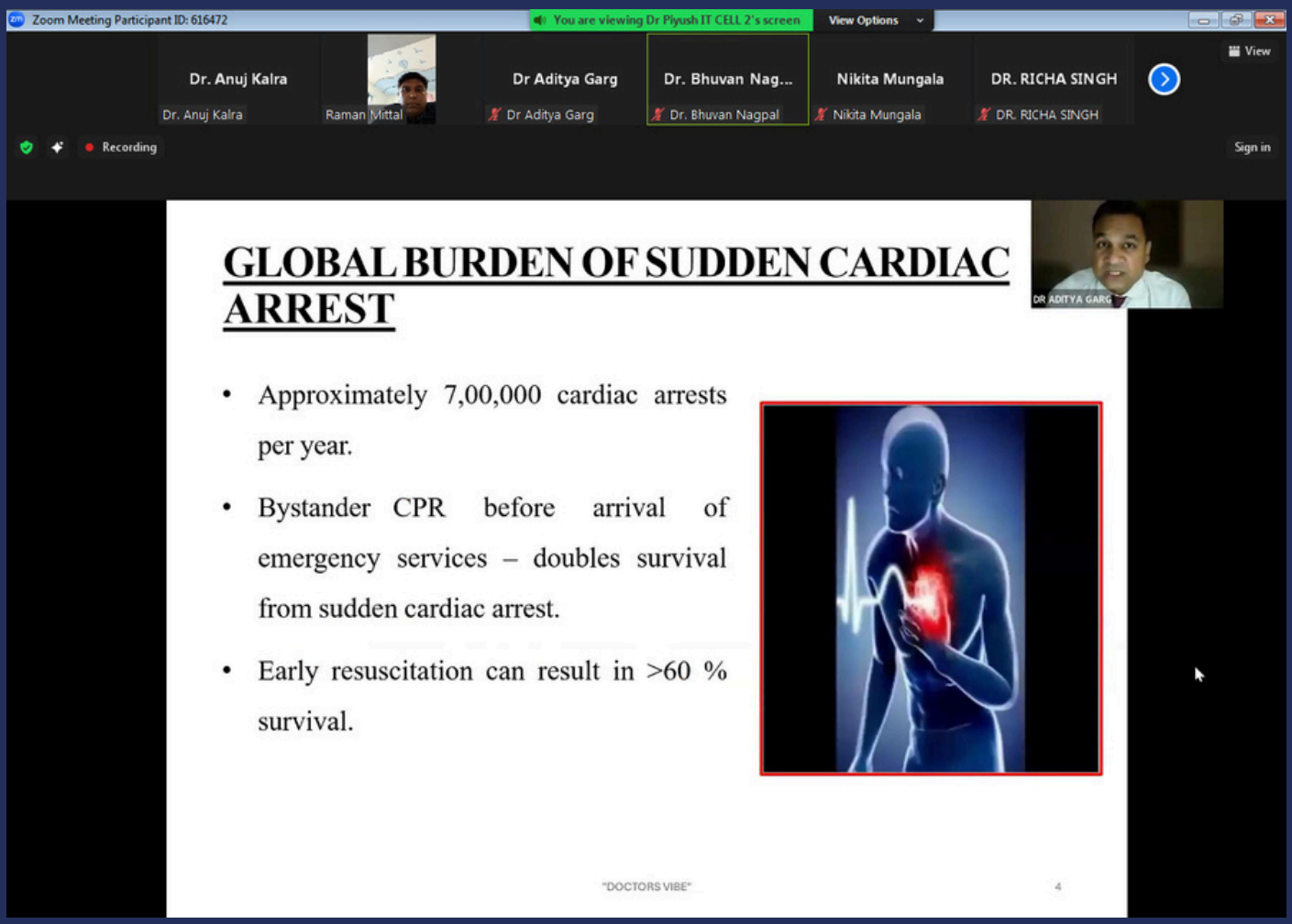
डॉ. पीयूष शर्मा, डॉ. अभिषेक भद्रन्ना, डॉ. केतकी कालेले, डॉ. निधि जाधव, डॉ. निग्रारिका एम, डॉ. होनिका, डॉ. स्वप्निता पाटिल, डॉ. शिवानी मुंगाला, डॉ. नेहा कुमारी और डॉ. वंदना शाह आदि मौजूद थे। टेक्निकल मैनेजमेंट और डिजिटल एक्सीक्यूशन में डॉ. पीयूष शर्मा ने ऑटोमेटेड रजिस्ट्रेशन सिस्टम, लाइव सेशन्स, डिजिटल सर्टिफिकेट डिस्ट्रीब्यूशन, डेटा इंटीग्रेशन और रियल-टाइम कोऑर्डिनेशन जैसी तकनीकी व्यवस्थाओं को दक्षता से संभाला। इस आयोजन के माध्यम से पोपमा ने एक ऐसा मंच तैयार किया, जहां ज्ञान, कौशल और तकनीक का संगम हुआ, जो आने वाले वर्षों में भारतीय ओरल पैथोलॉजी के विकास और वैश्विक पहचान को और भी सशक्त बनाएगा।


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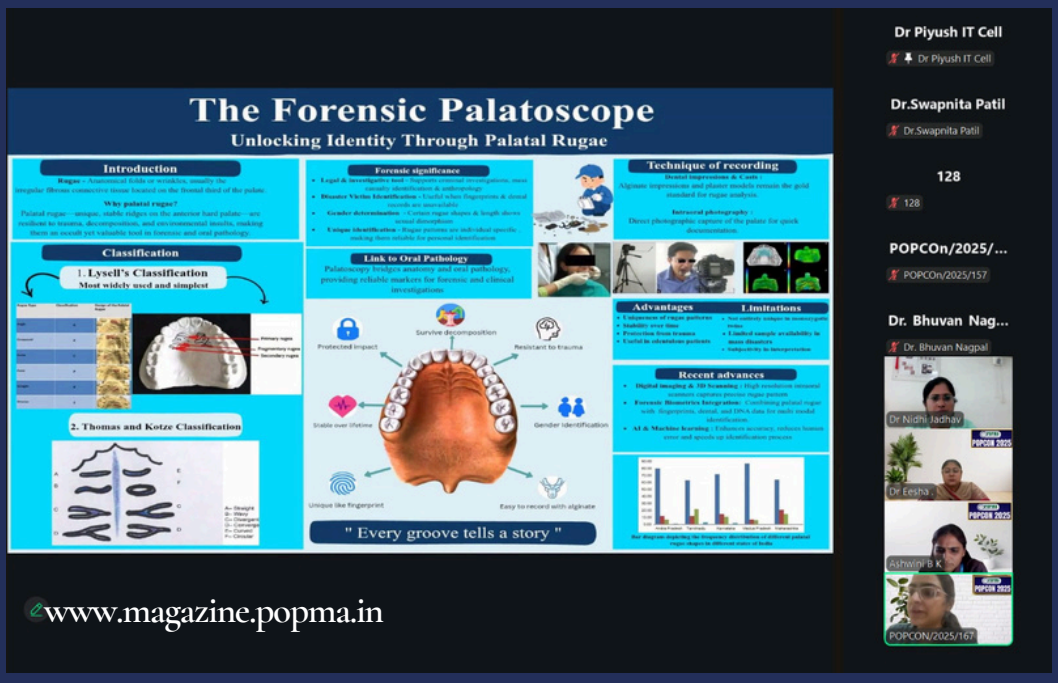

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The silent thread that weaves dentistry with medicine by transforming a microscopic slide into a panoramic view of human health
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Identifying hereditary conditions for Pedo
Definitive diagnosis in Oral surgery precision
Early disease detection in public
Revealing mysteries behind Perio problems
Validating radiographic views
Distinguishing Endo lesions beyond X-rays
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Ensures sound tissue around Prosthesis
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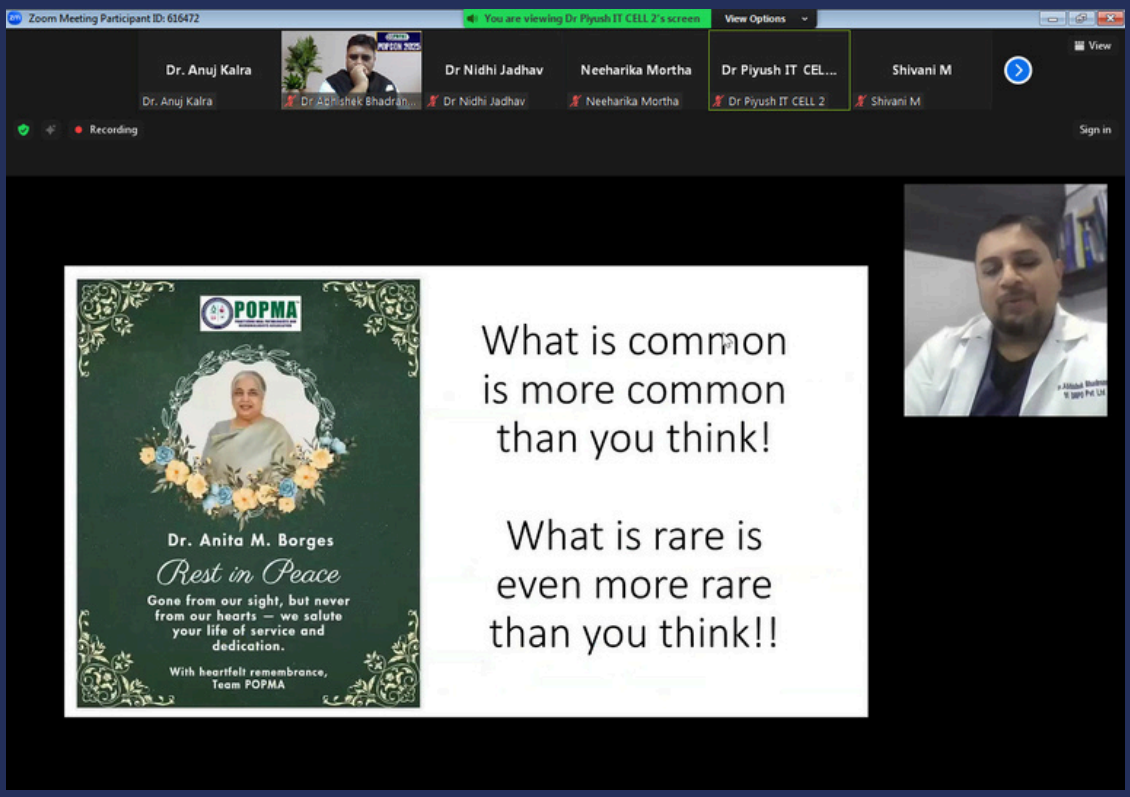

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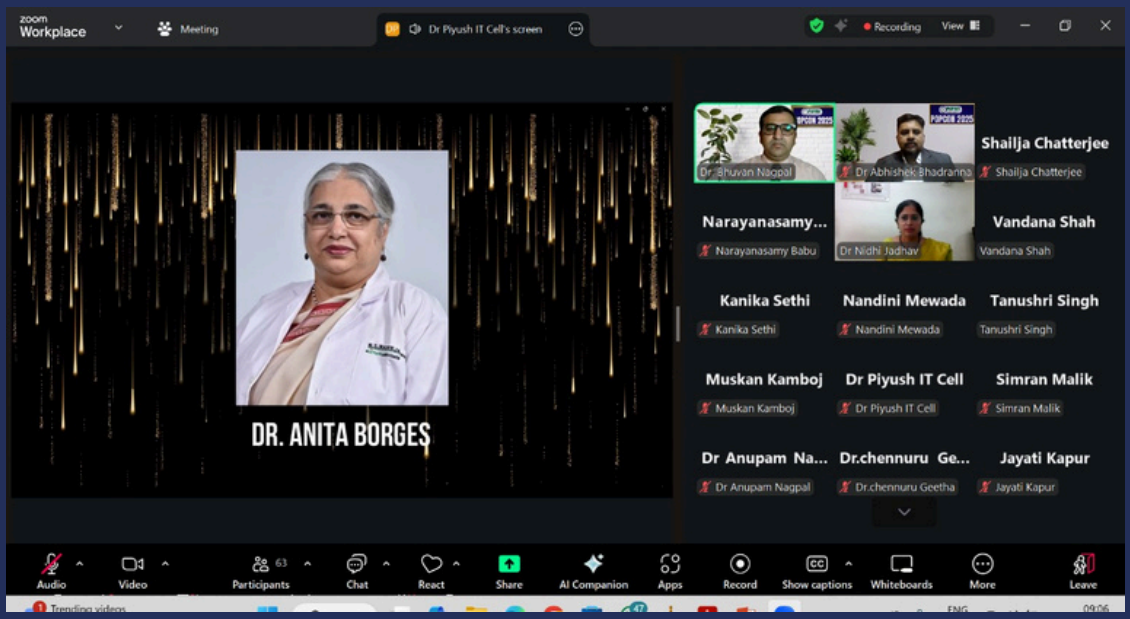

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DNA, RNA, Protein Biomarkers
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Saliva exosomics and liquid biopsy: Emerging frontiers in non-invasive diagnostics.
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The Forensic Palatoscope
Unlocking Identity Through Palatal Rugae
Introduction
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1. Lysell's Classification
2. Thomas and Kotze Classification
Forensic significance
Technique of recording
Link to Oral Pathology
Advantages
Limitations
Recent advances
" Every groove tells a story "
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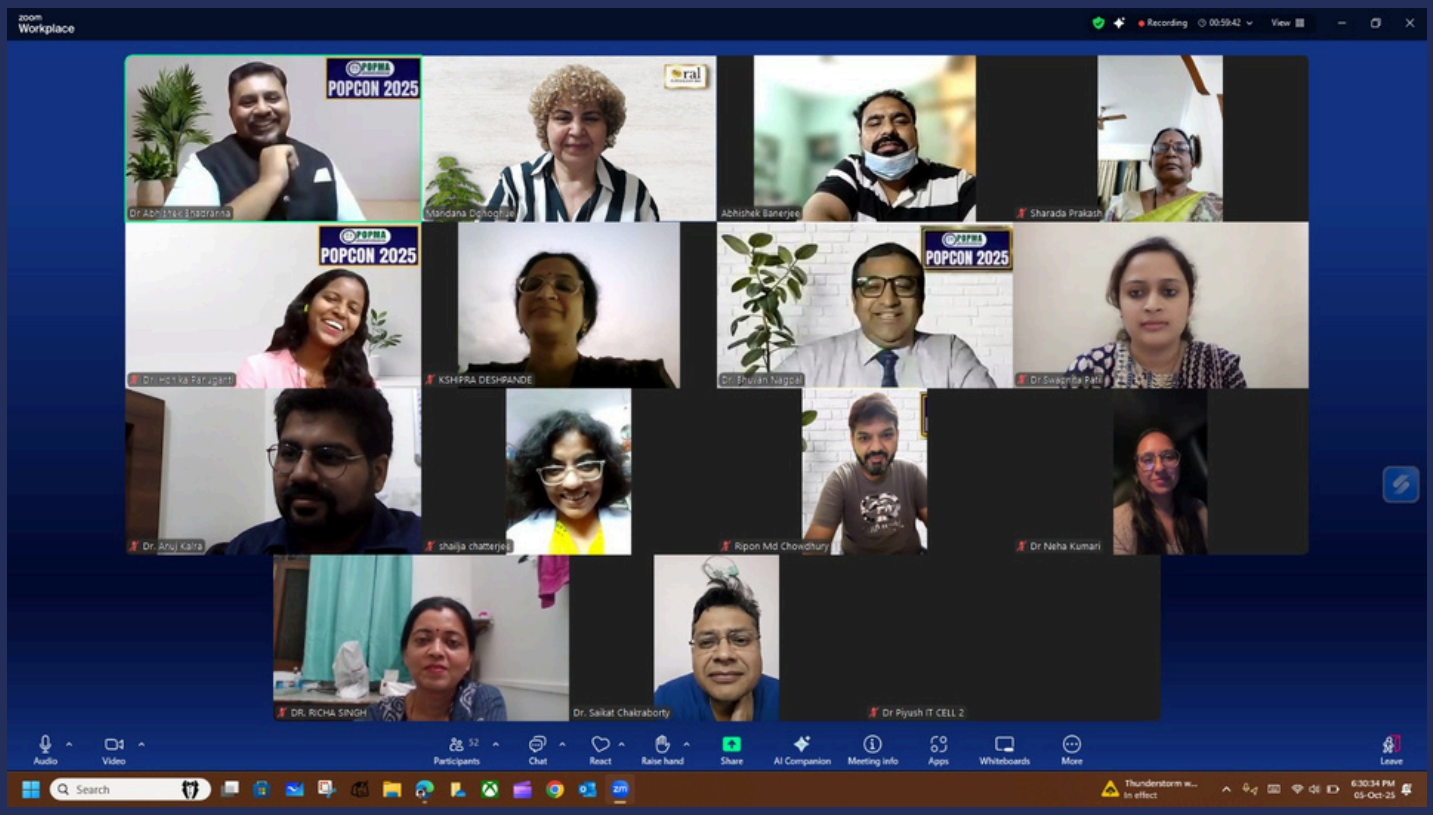
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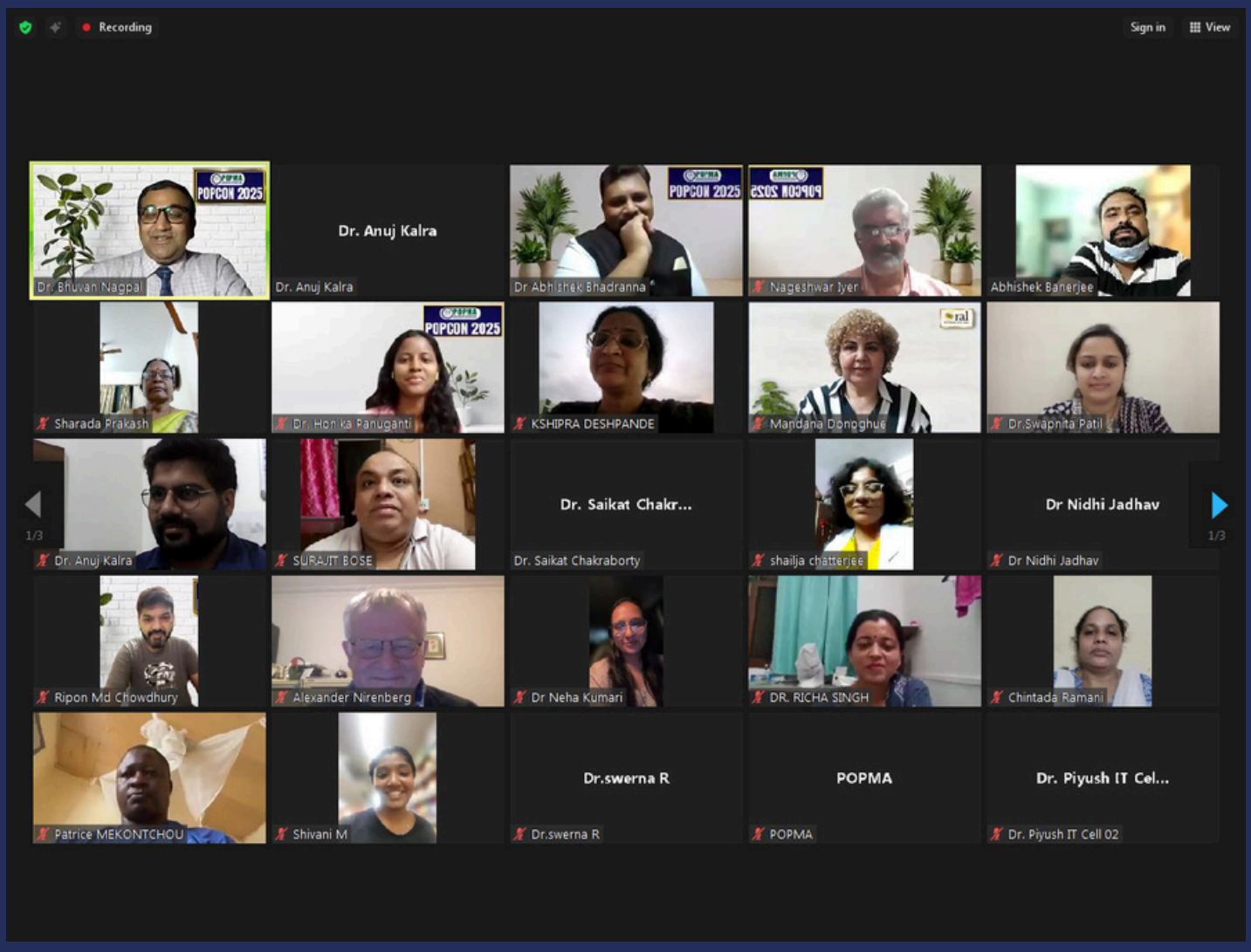
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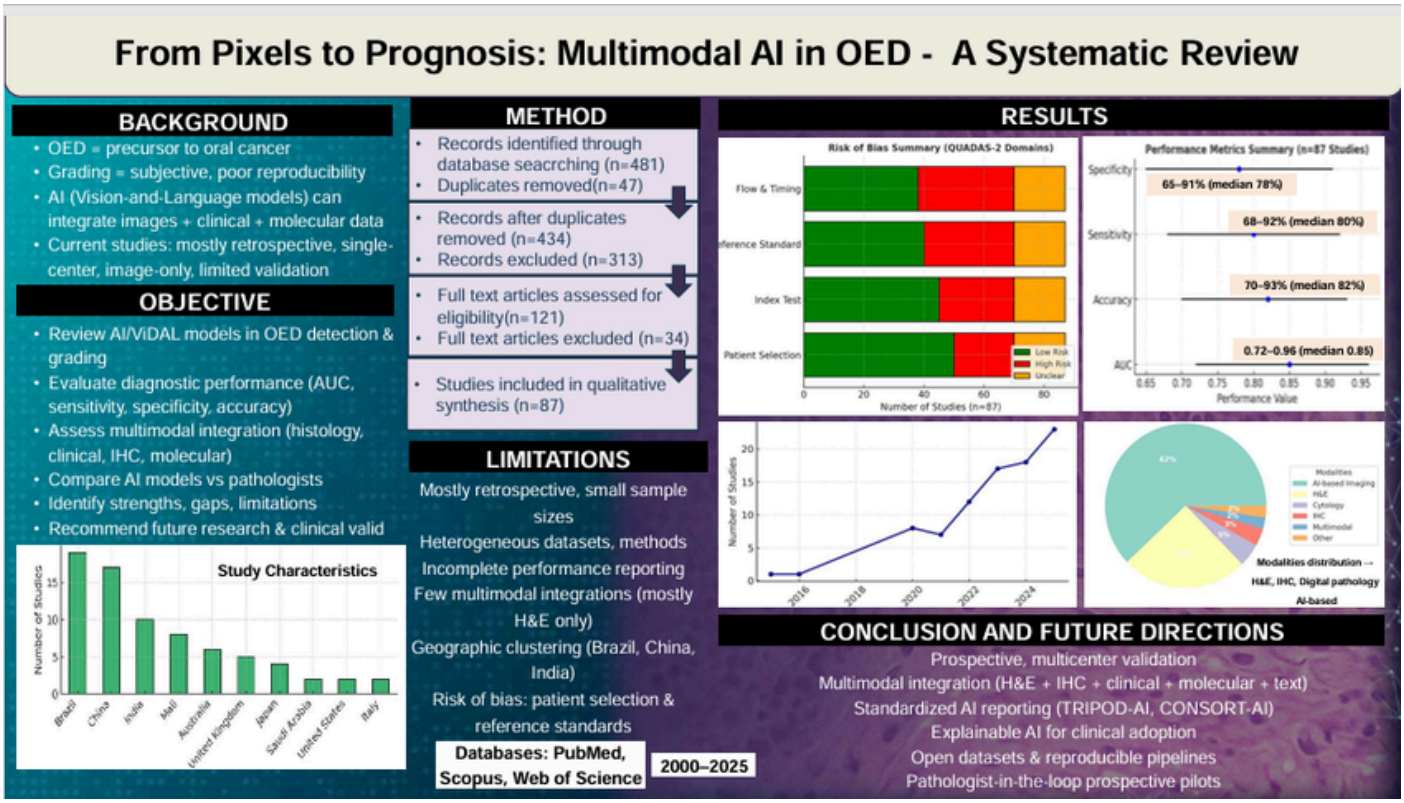
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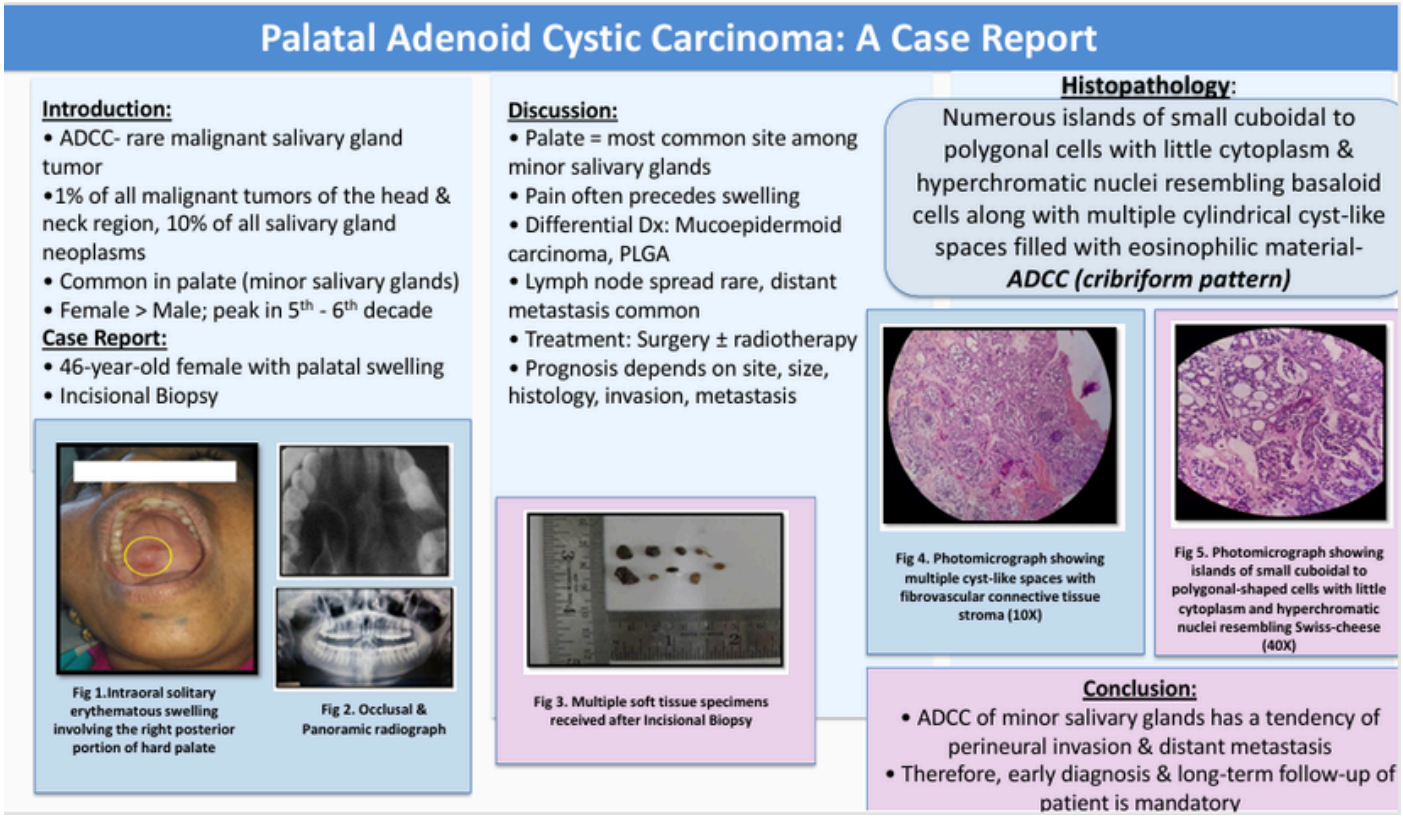


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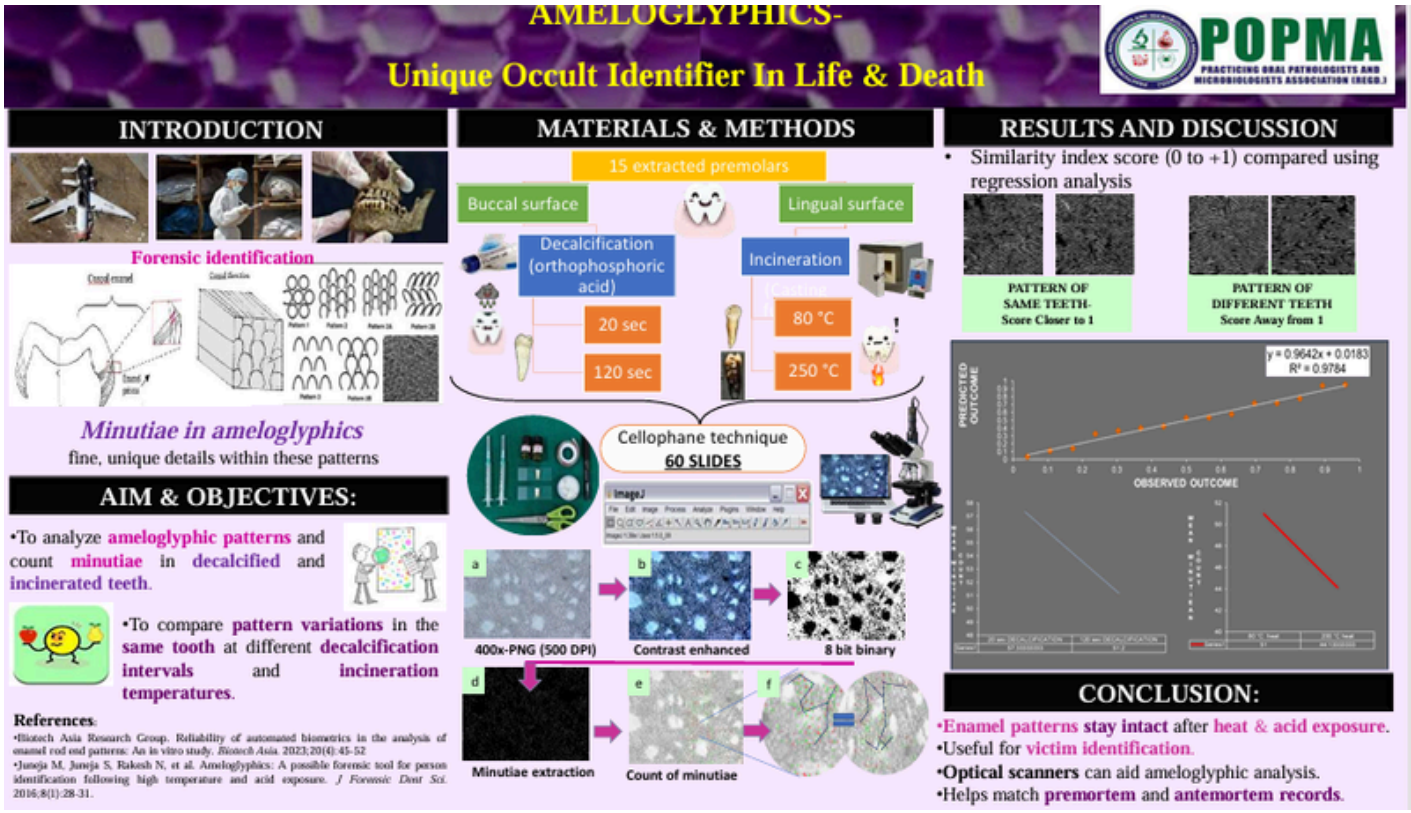
FROM PIXELS TO PROGNOSIS: MULTIMODAL AI IN OED – A SYSTEMATIC REVIEW – DR. DIVYA UPPALA , DR. VADDADI SINDHUJA



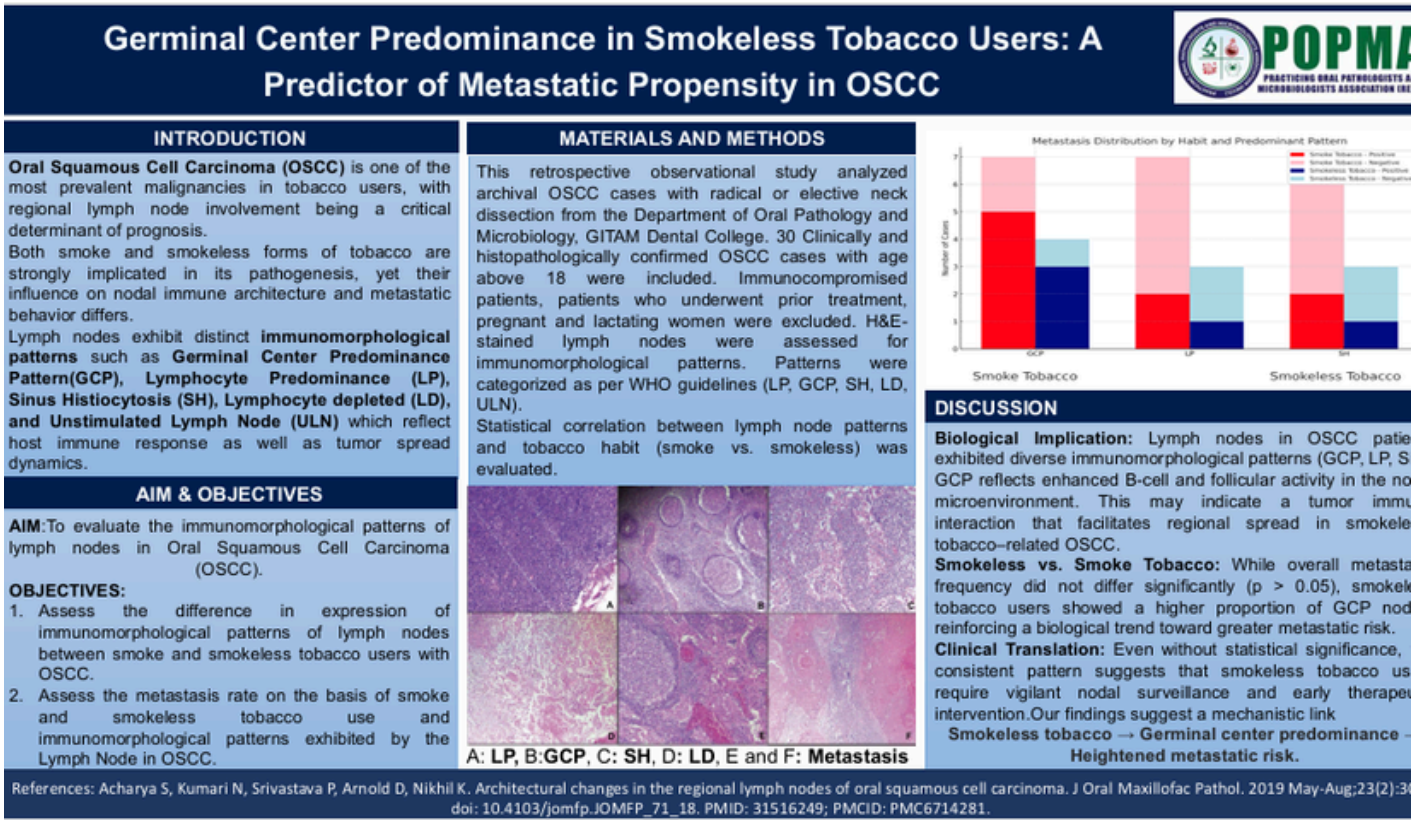
PALATAL ADENOID CYSTIC CARCINOMA: A CASE REPORT, DR. YUGANDHARA KALE



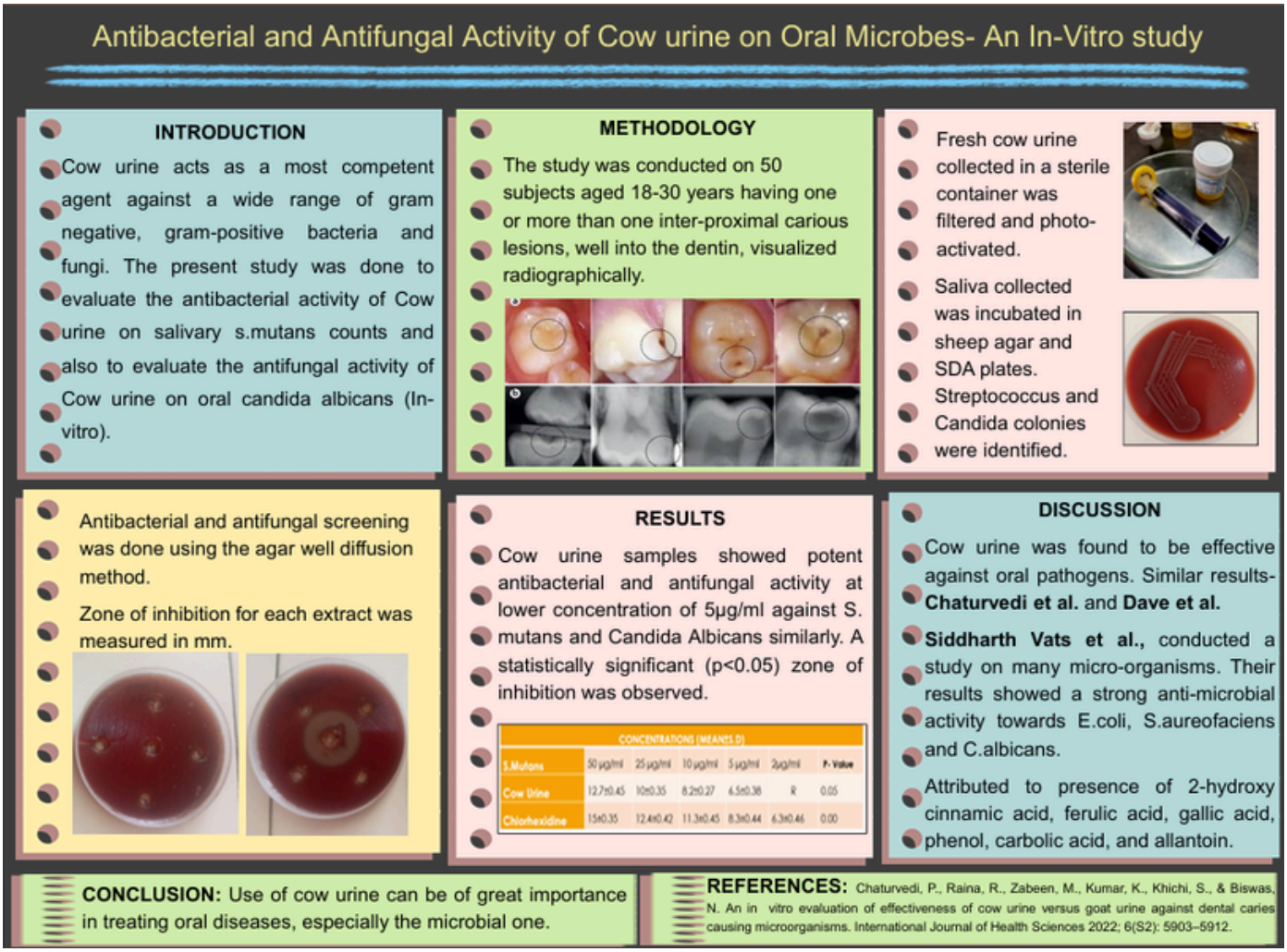
AMELOGLYPHICS- UNIQUE OCCULT IDENTIFIER IN LIFE & DEATH – DR.Y. SHANMUKHA RAVITEJA, DR SREEKANTH K



GERMINAL CENTER PREDOMINANCE IN SMOKELESS TOBACCO USERS: A PREDICTOR OF METASTATIC PROPENSITY IN OSCC, DR. BALLA HYANDAVI



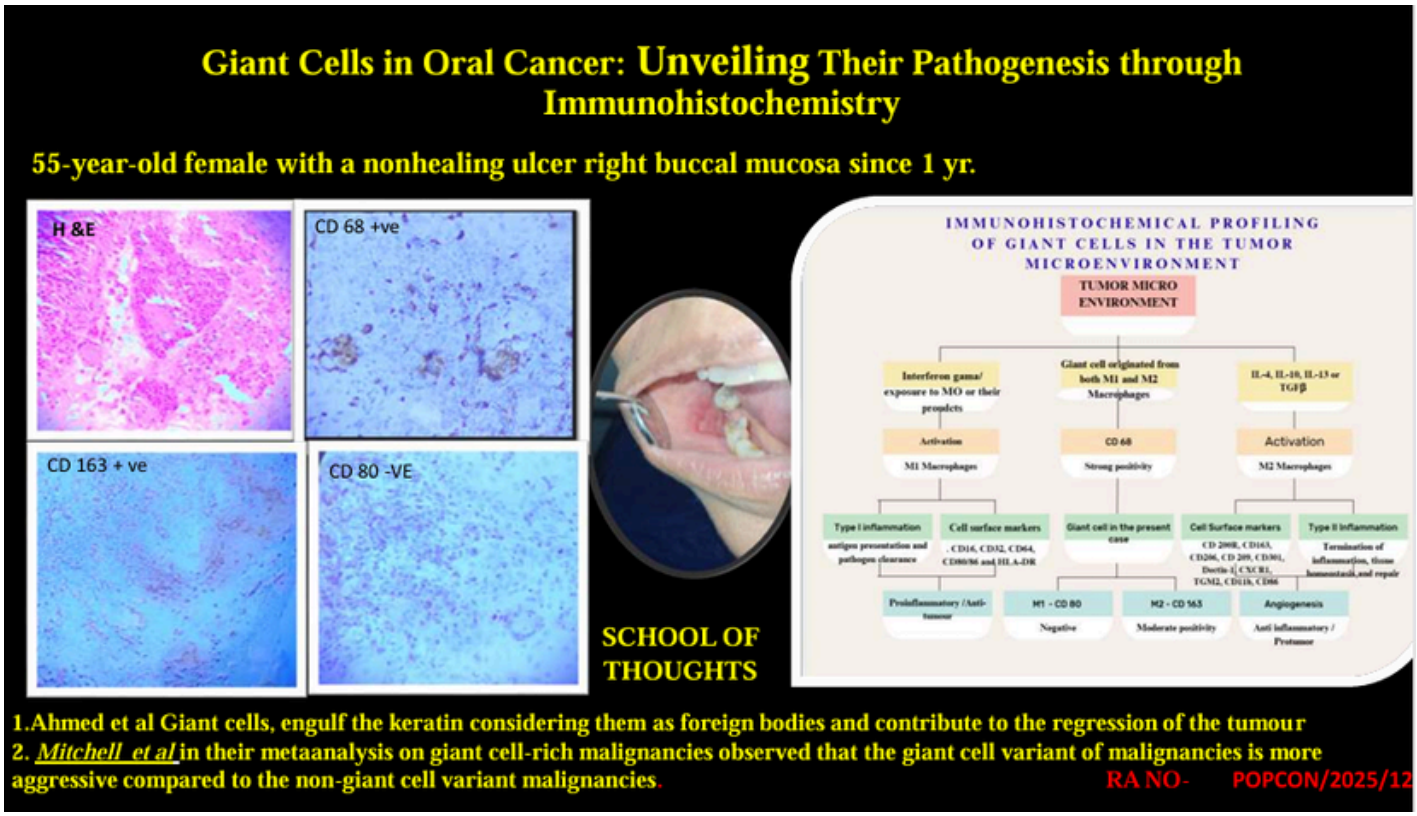
ANTIBACTERIAL AND ANTIFUNGAL ACTIVITY OF COW URINE ON ORAL MICROBES- AN IN-VITRO STUDY – DR. ANILA, DR. H APARNA LATHA



DIGITAL TRANSFORMATION IN ORAL MEDICINE AND RADIOLOGY: A PARADIGM SHIFT IN DIAGNOSTICS AND TREATMENT – DR. P. SURESH KUMAR

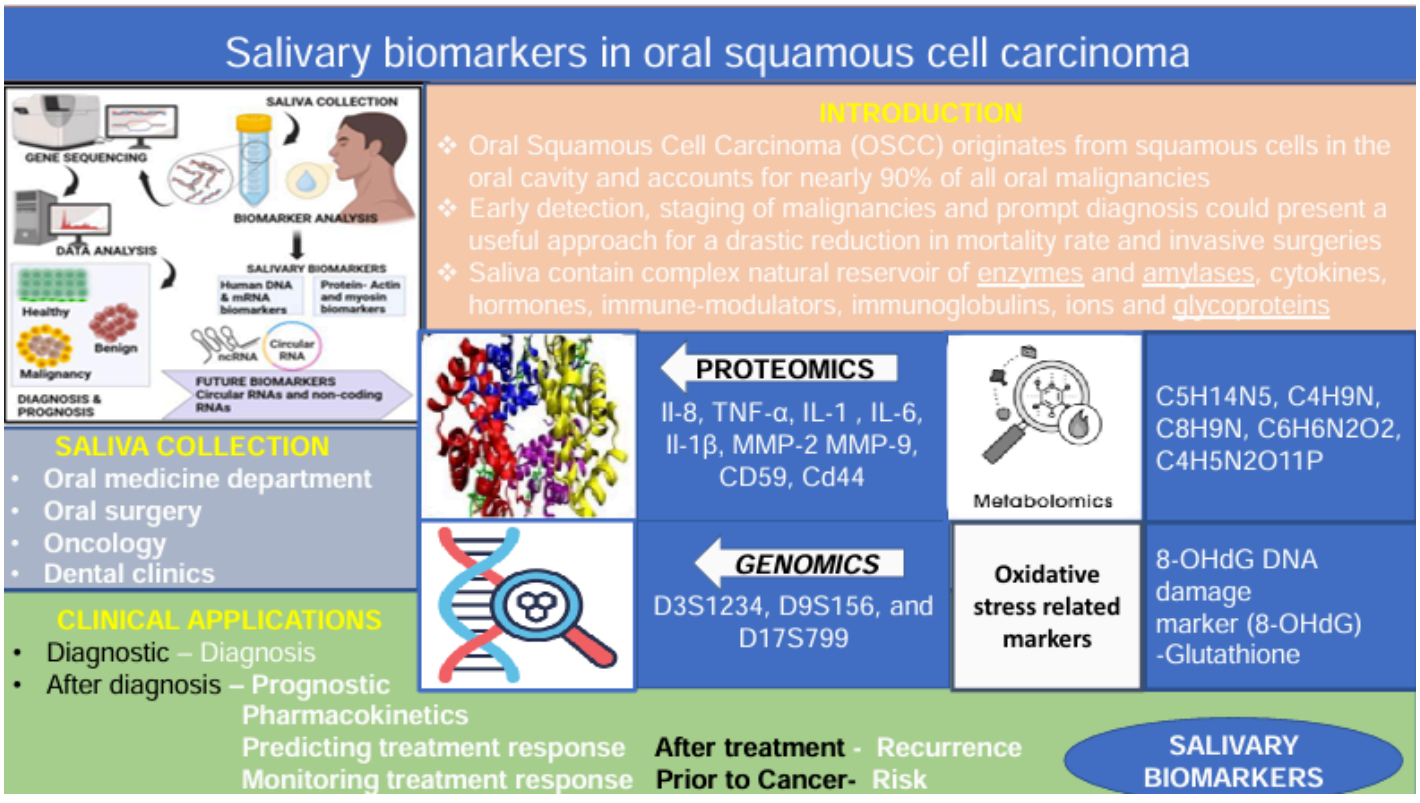


GIANT CELLS IN ORAL CANCER: UNVEILING THEIR PATHOGENESIS THROUGH IMMUNOHISTOCHEMISTRY – DR. BHAVANI NAGENDRA SANGALA



SALIVARY BIOMARKERS IN ORAL SQUAMOUS CELL CARCINOMA

DR.CHINTADA VENKATA RAMANI



EVALUATION OF THE IMMUNOHISTOCHEMICAL EXPRESSION OF OXIDATIVE DNA DAMAGE MARKER 8-OHDG IN ORAL CANCER

DR. KHADIJAH M

Evaluation of the Immunohistochemical Expression of Oxidative DNA Damage Marker in Oral Cancer

POPCON 2025

Introduction

- Oral Squamous cell carcinoma (OSCC) constitutes about 90% of all head and neck carcinomas.
- Reactive oxygen species (ROS) and free radicals are pivotal in cancer pathophysiology.
- The highly reactive and unstable ROS induce oxidative damage, resulting in changes to deoxyribonucleic acid (DNA) bases, including both single- and double-strand breaks.
- The hydroxyl radical reaction initiates the formation of free-radical-induced DNA adducts, subsequently leading to 8-hydroxy-2-deoxyguanosine (8-OHdG) generation.
- Hence contributing to neoplastic transformation in these cells.

Objective

- To evaluate the concentrations of 8-OHdG, a potential biomarker of DNA damage, in OSCC patients compared with healthy tissues.
- To analyze the staining intensity across different histopathological grades of OSCC.

Materials and Methods

- The control group consisted of tissue samples from the normal mucosa (n = 10).
- The study groups consisted of tissue blocks sourced from patients with primary OSCC (n = 55).
- The OSCC group comprised 20 well-differentiated (WD), 20 moderately differentiated (MD), and 15 poorly differentiated (PD) samples.
- The principal antibody utilised was 8-OHdG Antibody
- The data were estimated using the Statistical Package for the Social Sciences (SPSS) version 26.0.
- The Fisher's exact test was employed to examine the variations between the sample groups at a 5% significance level.

Results

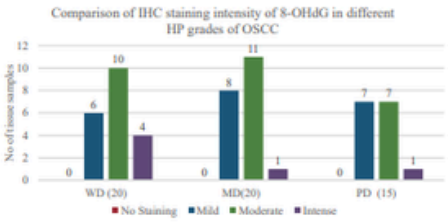
- Compared with normal tissues, OSCC samples demonstrated a significantly elevated 8-OHdG expression ($p<0.0001$).
- However, intergroup differences among WD, MD, and PD were not statistically significant ($p>0.05$).

Discussion

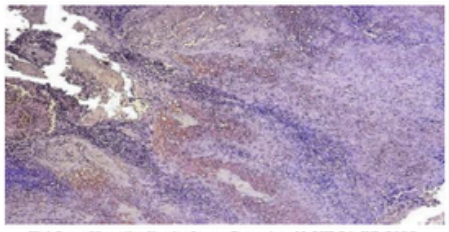
- Consistent with Chaiyarit et al., and Nagini et al., the present study observed markedly increased 8-OHdG expression in OSCC tissue samples relative to control tissue samples.
- These findings indicated that the impairment of the DNA damage - repair mechanism contributes to the advancement of OSCC.
- Consistent with Kubo et al. study in esophageal cancer and Zimnoch et al. study in chronic cholecystitis, the present study showed a nuclear presence of 8-OHdG in oral cancer tissue samples.
- Majority of OSCC samples displayed cytoplasmic expression of 8-OHdG

Conclusion

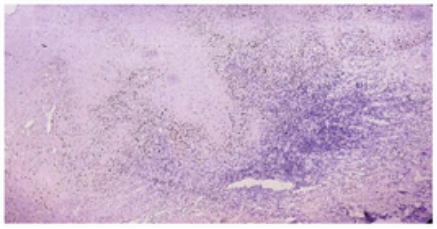
- The increased 8-OHdG expression in OSCC compared with normal mucosa highlights its potential role as a predictive biomarker of oxidative DNA damage in oral carcinogenesis.
- Its correlation with tumor differentiation was not statistically significant, warranting further large-scale investigations.



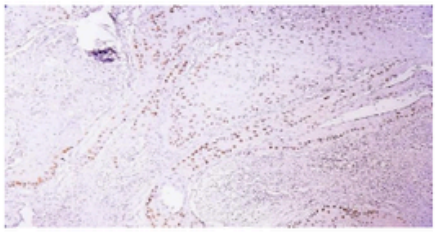
Evaluation & Comparison of IHC Staining Intensities of 8-OHdG between Different HP grades of OSCC



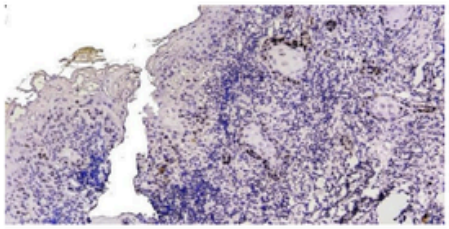
High Power View (40x) Showing Intense Expression of 8-OHDG in WD OSCC



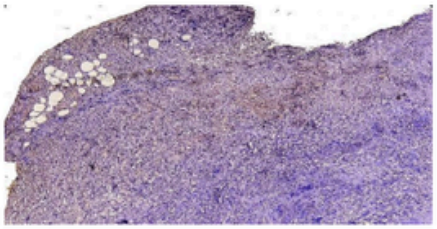
High Power View (40x) Showing Moderate Expression of 8-OHDG in MD OSCC



High Power View (40x) Showing Moderate Expression of 8-OHDG in MD OSCC



High Power View (40x) Showing Mild Expression of 8-OHDG in PD OSCC



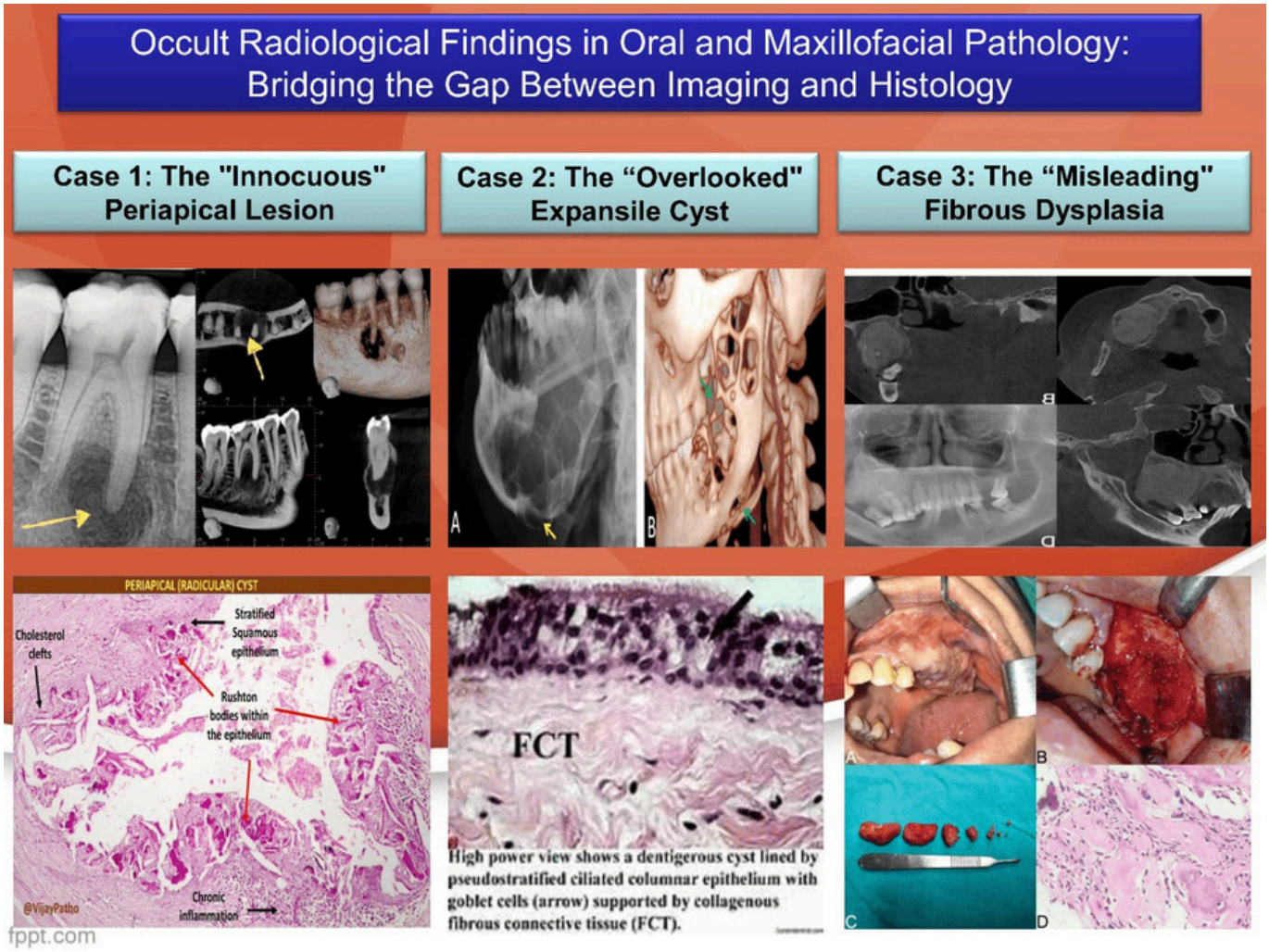
High Power View (40x) Showing Intense Expression of 8-OHDG in PD OSCC

- References
- Chaiyarit P, Ma N, Hiraku Y, Pinlaor S, Yongvanit P, Jintakanon D, et al. Nitrative and oxidative DNA damage in oral lichen planus in relation to human oral carcinogenesis. Cancer Sci 2005;96:553-9.
- Kubo N, Morita M, Nakashima Y, Kitao H, Egashira A, Saeki H, et al. Oxidative DNA damage in human esophageal cancer: Clinicopathological analysis of 8-hydroxydeoxyguanosine and its repair enzyme. Dis Esophagus 2014;27:285-93.
- Nagini S, Letchoumy P, Thaggavelu A, Ramachandran C. Of humans and hamsters: A comparative evaluation of carcinogen activation, DNA damage, cell proliferation, apoptosis, invasion, and angiogenesis in oral cancer patients and hamster buccal pouch carcinomas. Oral Oncol 2009;45:e31-7.
- Zimnoch L, Szynaka B, Kupisz A. Study on carcinogenesis in chronic cholecystitis. Rocz Akad Med Bialymst 2004;49:49-51.

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OCCULT RADIOLOGICAL FINDINGS IN ORAL AND MAXILLOFACIAL PATHOLOGY:BRIDGING THE GAP BETWEEN IMAGING AND HISTOLOGY

DR. DABBIRU RUPA CHANDINI



POSTER COMPETITIONS



POST GRADUATES

AMELOBLASTOMA OUTSIDE THE BONE – A CASE REPORT –

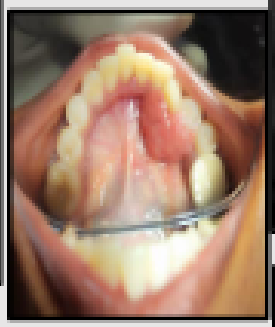
DR. S MAHESHWARI

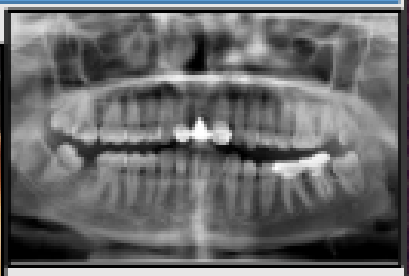
AMELOBLASTOMA OUTSIDE THE BONE - A CASE REPORT

POPCON/2025/145

INTRODUCTION : Peripheral Ameloblastoma are rare benign odontogenic tumor arising from odontogenic epithelium commonly seen in soft tissues of oral cavity in gingiva & extra gingival area so called as Gingival Ameloblastoma. PA are slow growing, painless, sessile, less aggressive & seen in older individulas. PA are less aggressive so considered as hamartomatous lesions





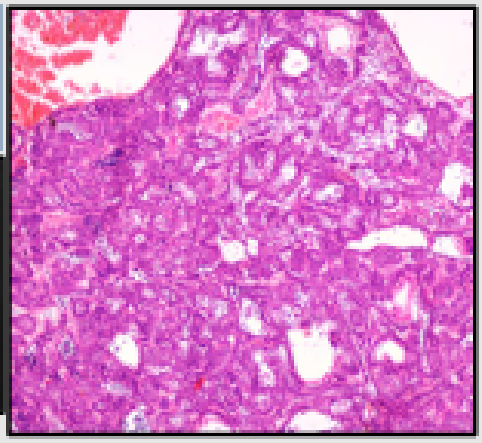


OPG



GROSS

2x2cm single bit greyish white pebbly surface & firm in consistency



HISTOPATHOLOGICAL FEATURES

Multiple islands of odontogenic epithelium within a fibro connective tissue stroma showing a follicular pattern with Peripheral tall columnar cells showing hyperchromatic nuclei with reversal of polarity. The central area of each island resembles stellate reticulum composed of loosely arranged star shaped cells suggestive of

PERIPHERAL AMELOBLASTOMA

CASE: 28/F

C/C - Growth in the left lower back tooth region for past 1 month

HOPI - Normal 1 month back. Later gradually developed pain less growth in left lower back tooth region lingually

DENTAL HISTORY - RCT & Prosthesis

MEDICAL HISTORY- NRH

EXTRA ORAL EAMINATION : NAD

INTRA ORAL EXAMINATION: Prosthesis : 11, 12, 21, 36, 37 Missing teeth : 47 Dental caries : 27,46. Sessile growth measuring 3cmx4cm irt 32-35 antero posteriorly, pinkish red in colour with pebbly surface, firm in consistency, Non tender, No discharge & No Lymph node involvement

CONCLUSION : This case highlights how clinical appearances can mislead, as a lesion mimicking PG, PGCG, POF, SP, but was confirmed as Peripheral Ameloblastoma on histology. It underscores the essential role of biopsy & is the gold standard in achieving an accurate diagnosis of oral lesions. Early identification ensures proper treatment planning, preventing complications and recurrence.

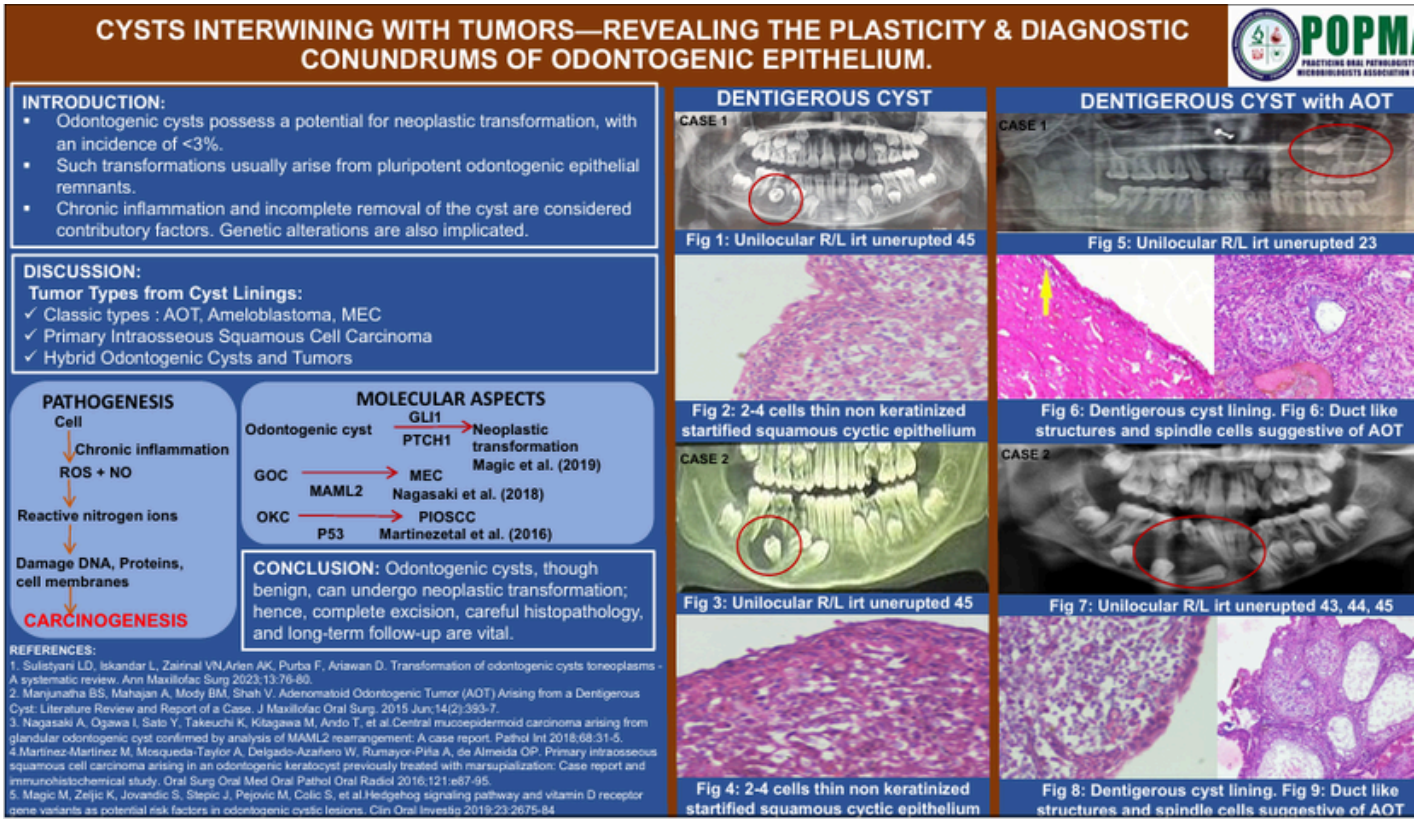
REFERENCES

Nagaraj Vezhavendhan. Peripheral ameloblastoma of the gingiva: Autopsy and Rep. 2019 Dec 13;10(1):e20191127.

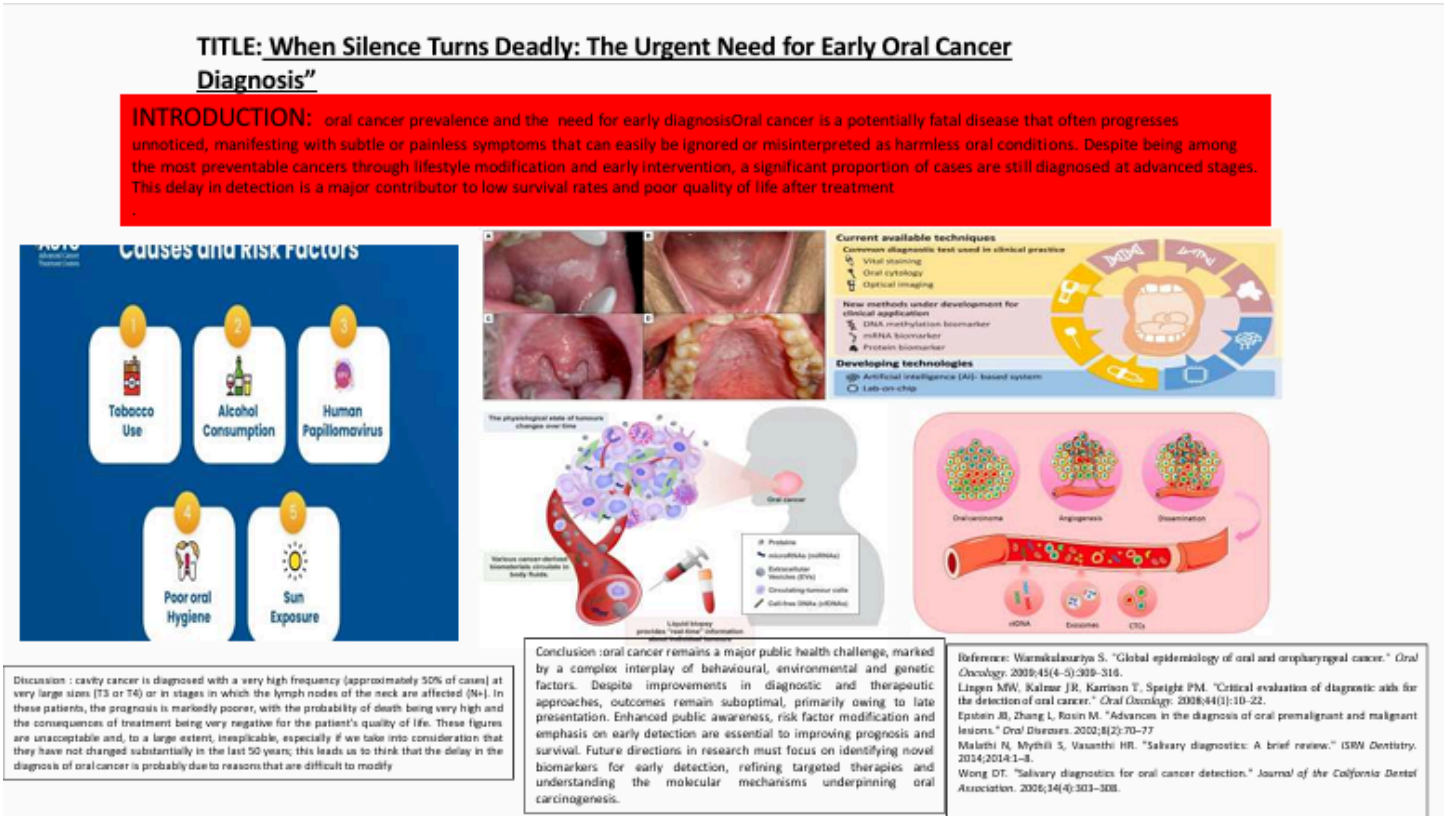
Beena VT, Choudhary K, Heera R, Rajeev R, Sivakumar R, Vidhyadharan K. Peripheral ameloblastoma: a case report and review of literature. Case Rep Dent. 2012;2012:571509. 10.1155/2012/571509.

CYSTS INTERWINING WITH TUMORS–REVEALING THE PLASTICITY & DIAGNOSTIC CONUNDRUMS OF ODONTOGENIC EPITHELIUM.

DR. UDN. SREEVALLI, DR. DIVYA UPPALA

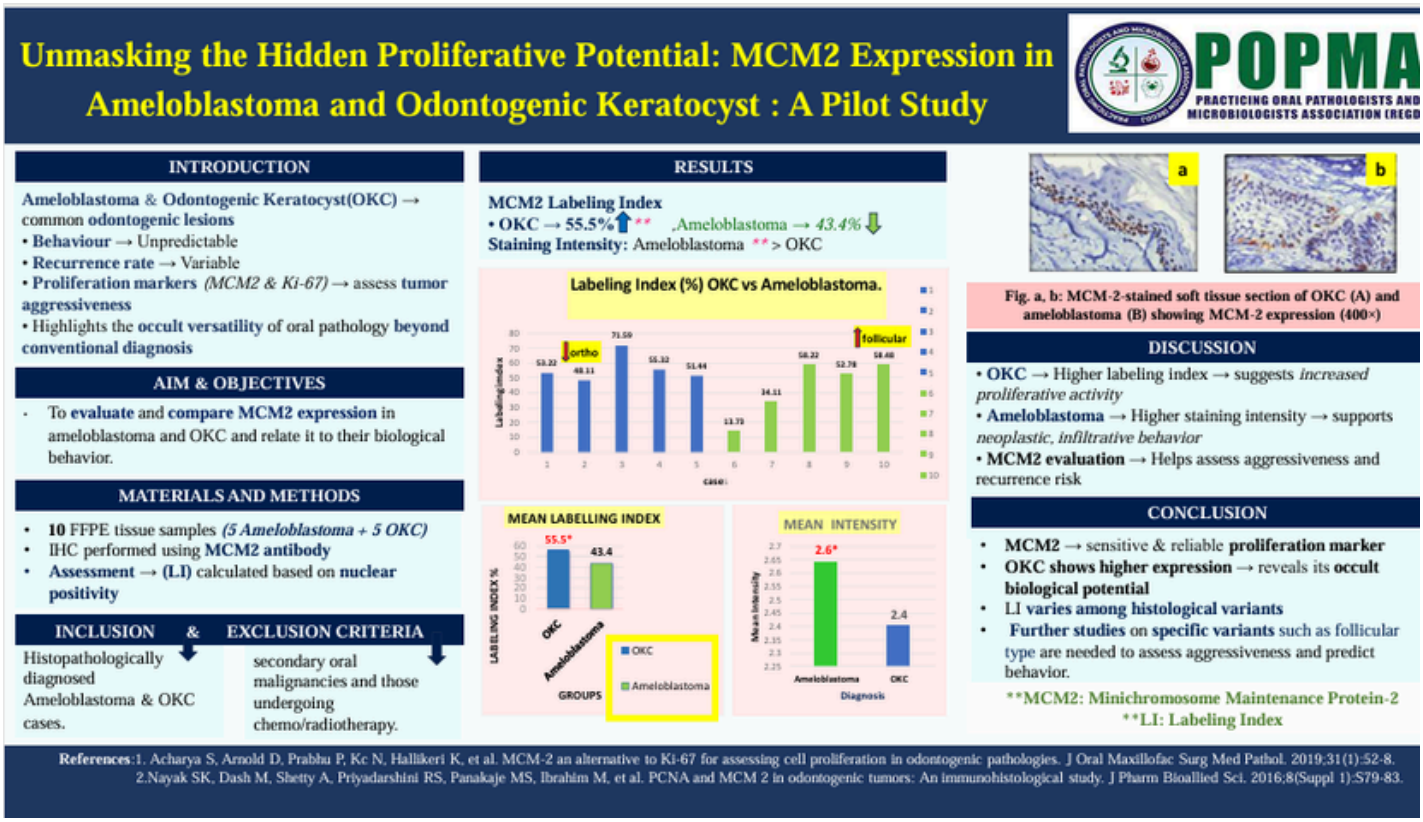


WHEN SILENCE TURNS DEADLY: THE URGENT NEED FOR EARLY ORAL CANCER DIAGNOSIS – DR NAVRATNA SINGH, DR RAMA SHARMA



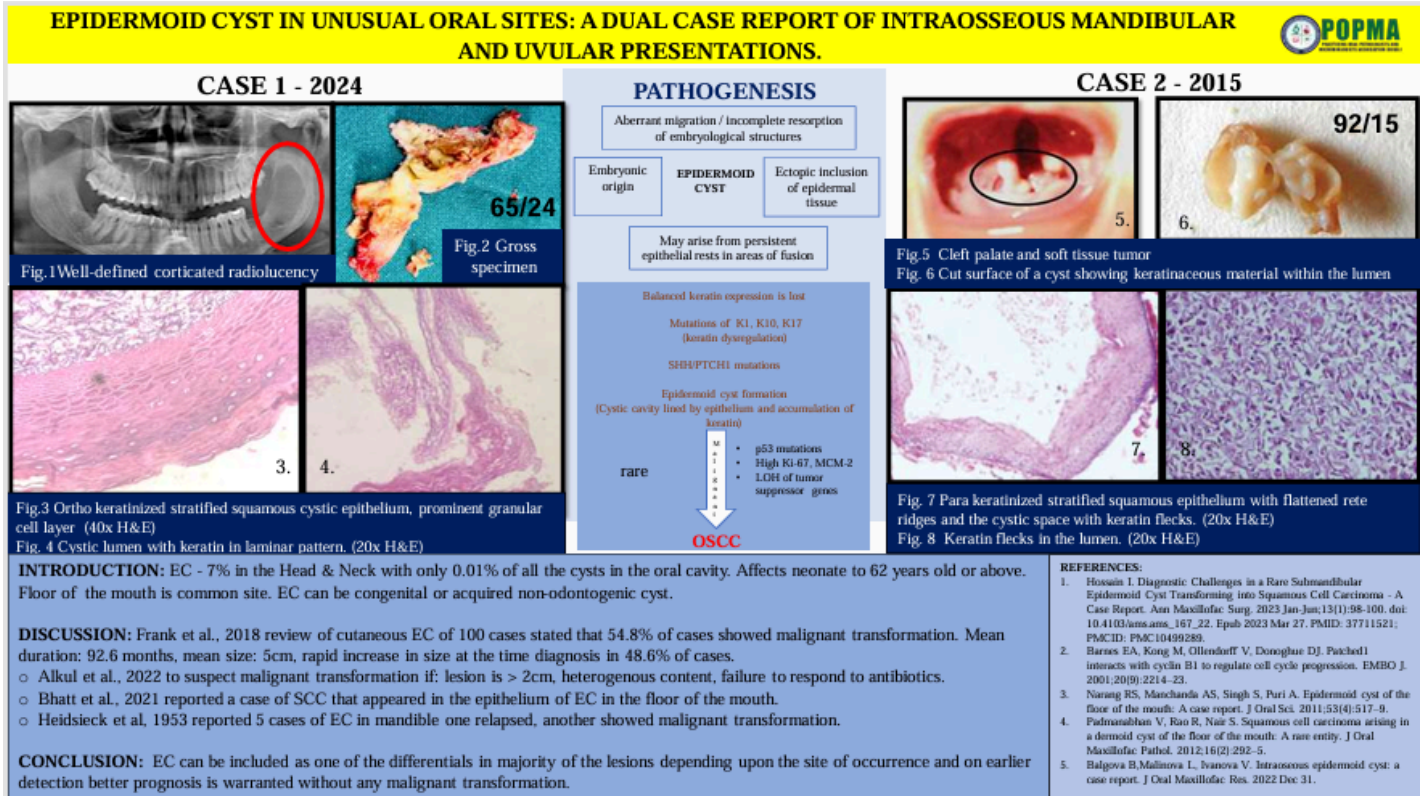
UNMASKING THE HIDDEN PROLIFERATIVE POTENTIAL: MCM2 EXPRESSION IN AMELOBLASTOMA AND ODONTOGENIC KERATOCYST – A PILOT STUDY –

DR BUDDHA HARIKA VARSHITA, DR SREEKANTH KOTINA



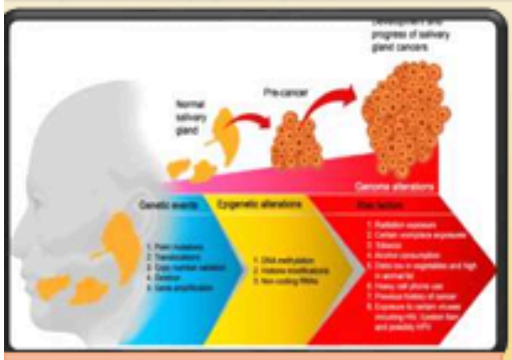
EPIDERMOID CYST IN UNUSUAL ORAL SITES: A DUAL CASE REPORT OF INTRAOSSEOUS MANDIBULAR AND UVULAR PRESENTATIONS.

DR. VADDADI SINDHUJA, DR. DIVYA UPPALA

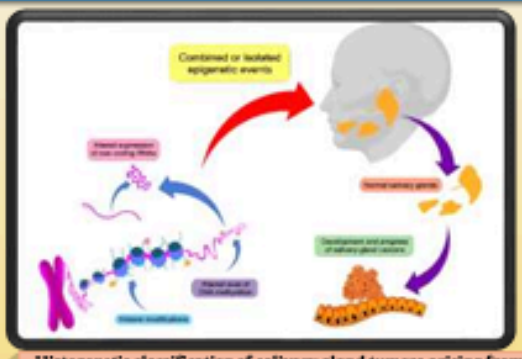


THE OCCULT VERSATILITY OF ORAL PATHOLOGY HETEROGENEITY OF GENETIC LANDSCAPES IN SALIVARY GLAND TUMOURS: HIDDEN MYSTERIES BEHIND – DR. RAMA SHARMA, DR. NAVRATNA SINGH

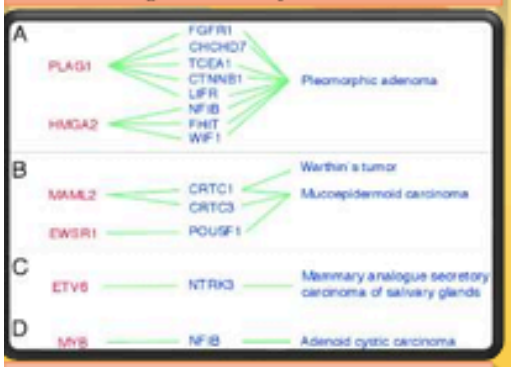
Introduction : Salivary gland neoplasms (SGNs) are rare and heterogeneous tumors in the head and neck region. Although progress has been recently made in revealing the molecular landscape of salivary glands tumors, it is limited and appears to be the tip of the iceberg. Some genetic aberrations include chromosomal translocations, such as CRTC1/3-MAML2 in mucoepidermoid carcinoma, g MYB-NFIB gene fusions in adenoid cystic carcinoma, and PLAG1-HMGA2 gene changes in pleomorphic adenoma and carcinoma ex pleomorphic adenoma. These chromosomal translocations provide fresh insights into the molecular etiology of diverse SGNs and aid in their classification and in approaching treatment. In future, these genetic variations may serve as critical tools for diagnosing salivary gland tumors and optimizing the management as well as prognosis of patients.



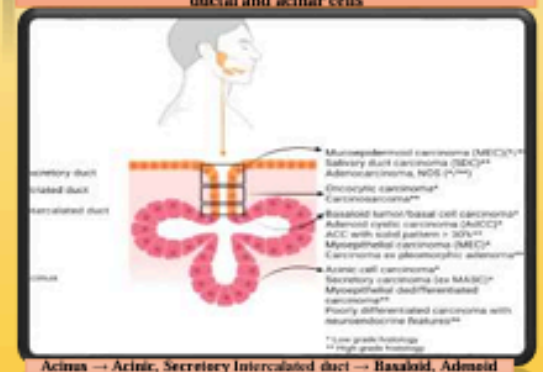
Pathogenesis of Salivary Gland Tumors



Histogenetic classification of salivary gland tumors arising from ductal and acinar cells



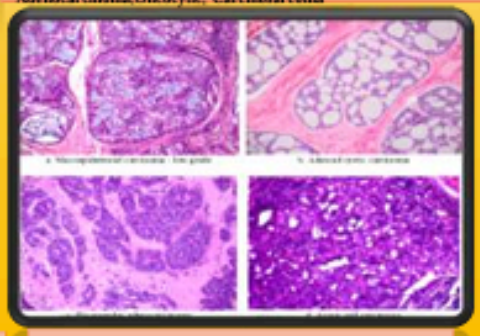
Chromosomal translocations and gene fusions



Acinus → Acinic, Secretory Intercalated duct → Basaloid, Adenoid cystic, Myoepithelial, Ex-pleomorphic adenoma Striated/Excretory duct → Mucoepidermoid, Salivary duct, Adenocarcinoma,Oncocytic, Carcinosarcoma



Integrated diagnostic and therapeutic workflow



Microscopic Anatomy

Discussion: Salivary gland tumors (SGTs) represent a heterogeneous group of neoplasms with diverse histological subtypes and unpredictable biological behavior. Despite advances in histopathology, overlapping morphological patterns often make diagnosis challenging. Molecular insights have revealed that SGTs are not only morphologically but also genetically diverse, with distinct tumors harboring characteristic genetic alterations. Recurrent gene fusions such as CRTC1/3-MAML2 in mucoepidermoid carcinoma, MYB-NFIB in adenoid cystic carcinoma, and ETV6-NTRK3 in secretory carcinoma illustrate how molecular signatures serve as both diagnostic and prognostic markers. Similarly, HER2 amplification and TP53 mutations in salivary duct carcinoma underline aggressive clinical behavior. These genetic landscapes highlight the "hidden mysteries" of SGTs, where subtle histological similarities may mask profound molecular differences. The integration of molecular pathology with conventional histology has not only refined diagnostic accuracy but also opened avenues for targeted therapies.

Conclusion: Our understanding of the molecular pathologic backdrop of SGTs has developed in recent decades but is still insufficient for a wide range of SGTs, both benign and malignant. Nonetheless, by acquiring additional molecular data, we may better identify these disorders early in the process and provide more accurate diagnosis and successful therapy methods. As a consequence, by selecting a proper and an optimal treatment regimen and employing new therapy targets, we can enhance treatment .

References

1. Witte HM, Gehrauer N, Stelzestel K. Mutational and immunologic Landscape in malignant Salivary Gland Tumors harbor the potential for novel therapeutic strategies. Crit Rev Oncol Hematol. 2022 Feb;170:103592.
2. Vos, J. L. et al. Nivolumab plus ipilimumab in advanced salivary gland cancer: a phase 2 trial. *Nat. Med.* 29, 3077–3089 (2023).
3. Mahmood, U. et al. A randomized Phase 2 study of Pembrolizumab with or without radiation in patients with recurrent or metastatic adenoid cystic carcinoma. *Int. J. Radiat. Oncol.* 109, 134–144 (2021)
4. Haddad RI, Chan ATC, Vermorken JB. Barriers to clinical trial recruitment in head and neck cancer. Oral Oncol. (2015) 51(3):203–11. doi: 10.1016/j.oraloncology.2014.12.007
5. Amin M, Edge S. American Joint committee on cancer: AJCC cancer staging manual. New York: Springer (2017).

HAEMANGIOENDOTHELIOMA AND HAEMANGIOPERICYTOMA: CLINICAL AND HISTOLOGICAL INSIGHTS A COMPETITIVE REVIEW – DR.PRASHANT KUMAR

HAEMANGIOENDOTHELIOMA VS HAEMANGIOPERICYTOMA

A COMPARATIVE OVERVIEW

INTRODUCTION

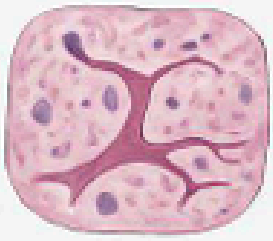
- Both are rare vascular tumors
- Overlapping clinical and histological features—imarear to differentiate

CLINICAL FEATURES

Age	Infants, young adults
Site	Liver, soft tissues, bone, oral cavity (rare)
Behavior	Borderline malignancy (intermediate)
Symptoms	Swelling, pain. possible organ dystunetion

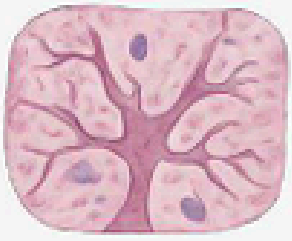
HISTOPATHOLOGY

Hiasmangioenholom



- Endothelial cell proliferation with epithelloid/ spindie morphology
- Intraluminal growth forming vascular channels
- Cytoplasmic vacuoles

Haemanglogericytoma



- Proliferation of pericytes around capillaries
- "Staghorn" branching vascular pattern
- Round to spindle cells, moderate pleomorphlam

IMMUNOHISTOCHEMISTRY

Marker	Marker
CD81, CD34, Factor Vill	Positive Variable
Vimentin	Positive
EMA	Negative
STAT6 (Nuclear)	Positive
	Not detected • cositive fibrous tumor spectrum

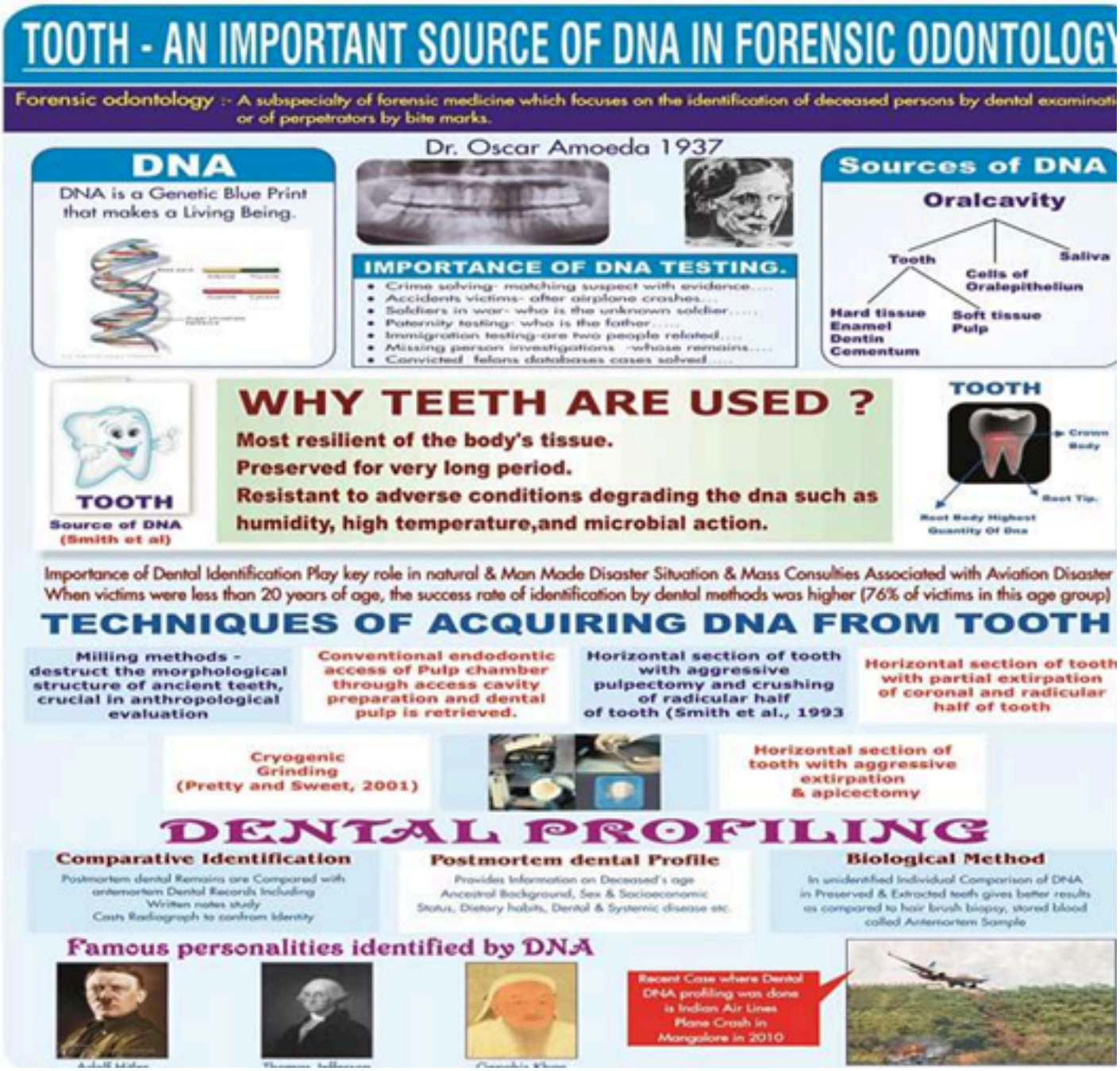
BEHAVIOR & PROGNOSIS

- Intermediate malignancy, recerrence metastasis possible
- Spectrum from benign to manginant: risk of local recurrence
- Metastasis to lung/bone

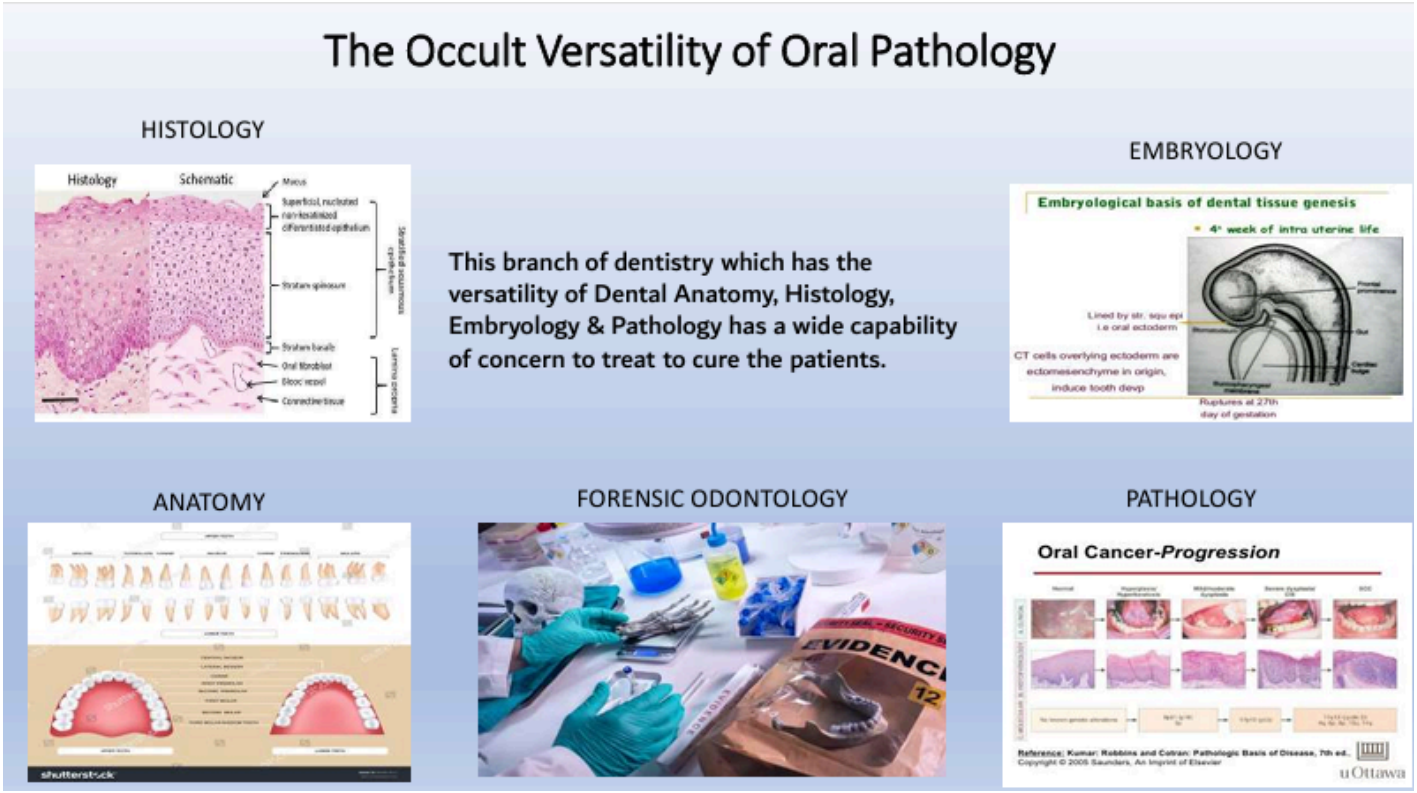
CONCLUSION

- Careful histopathology ¤ IHC essential for dislinctiong
- Clinical behaviot influences treatment and prognosis

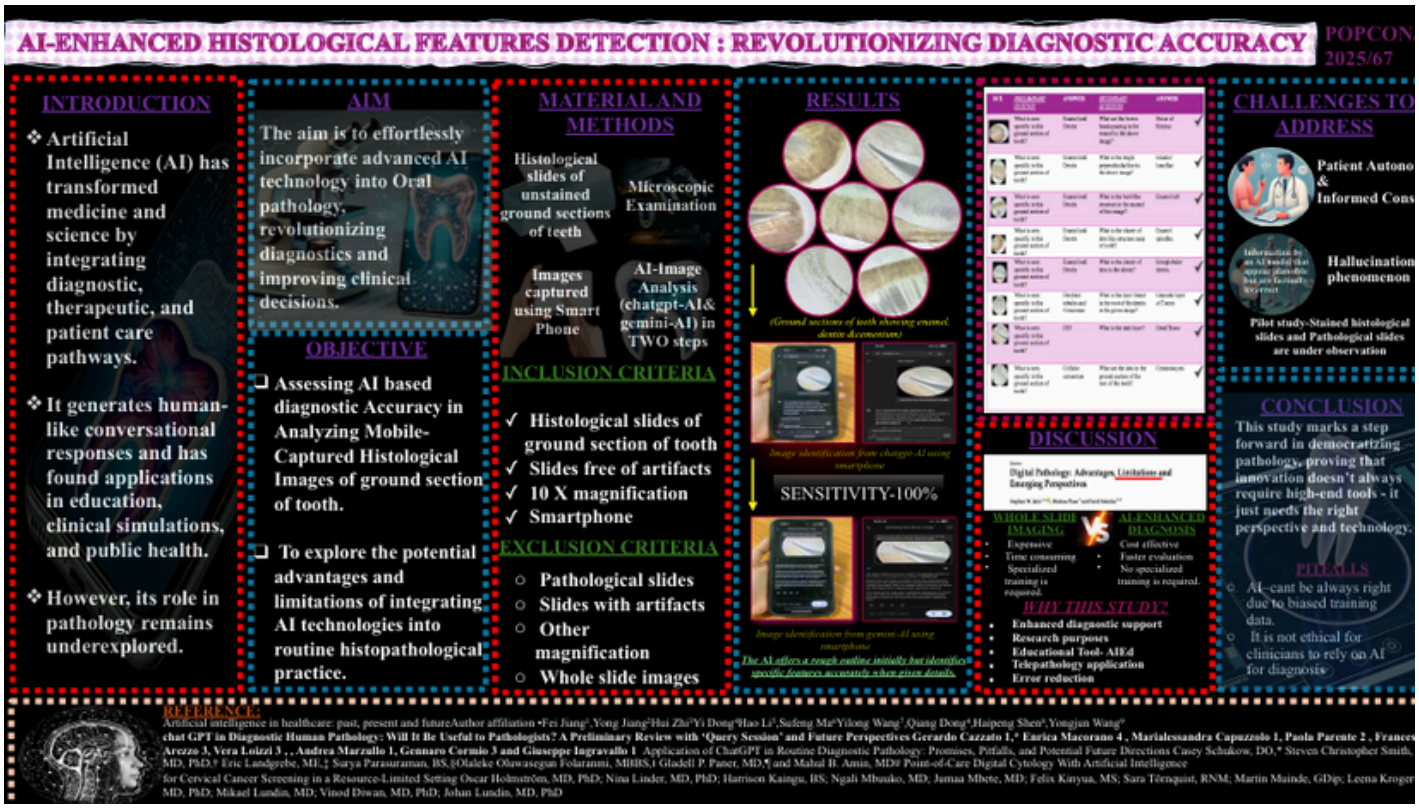
TOOTH AN IMPORTANT SOURCE OF DNA IN FORENSIC ODONTOLOGY – DR.SUMIT



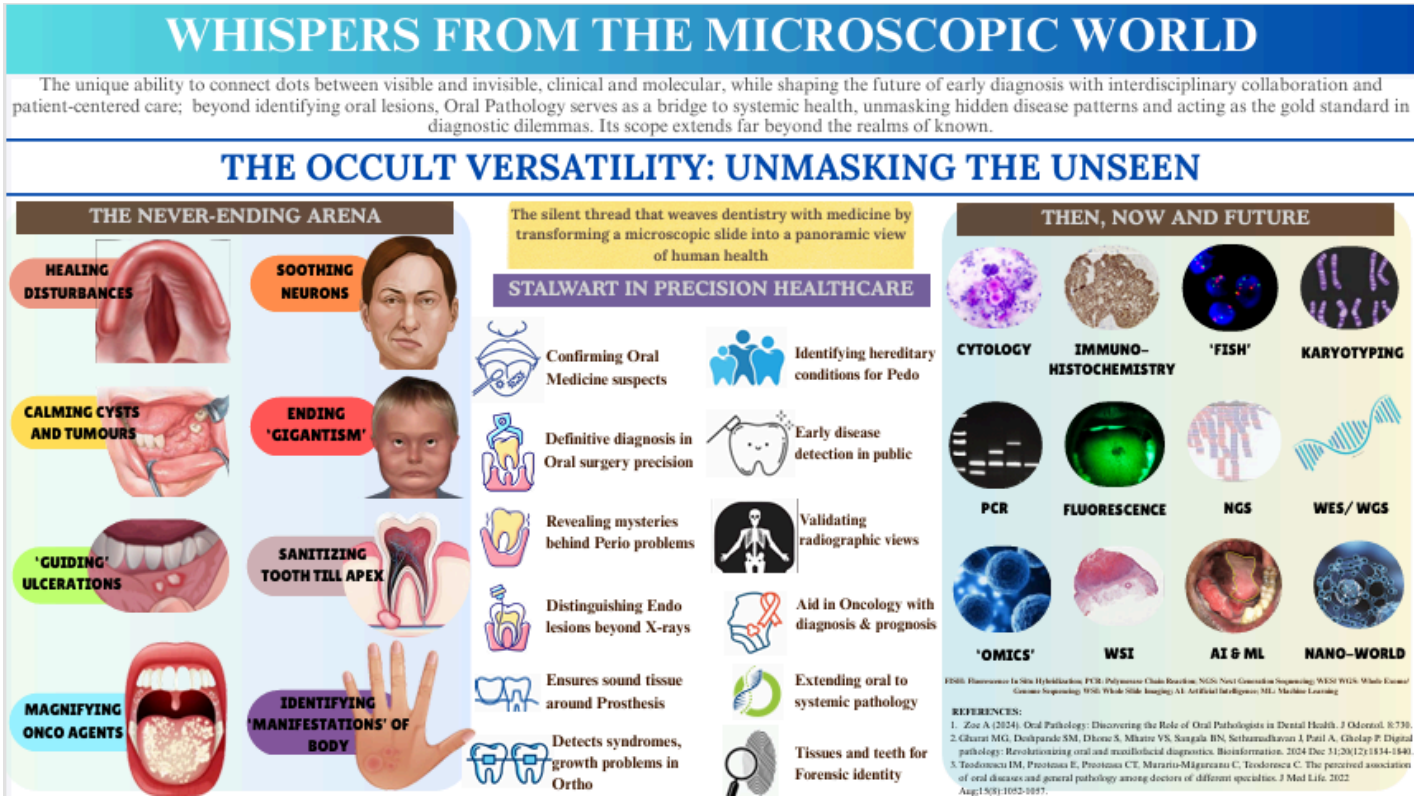
THE OCCULT VERSATILITY OF ORAL PATHOLOGY – DR AMAN



AI-ENHANCED HISTOLOGICAL FEATURE DETECTION: REVOLUTIONIZING DIAGNOSTIC ACCURACY – DR.CHEMMALAR N C

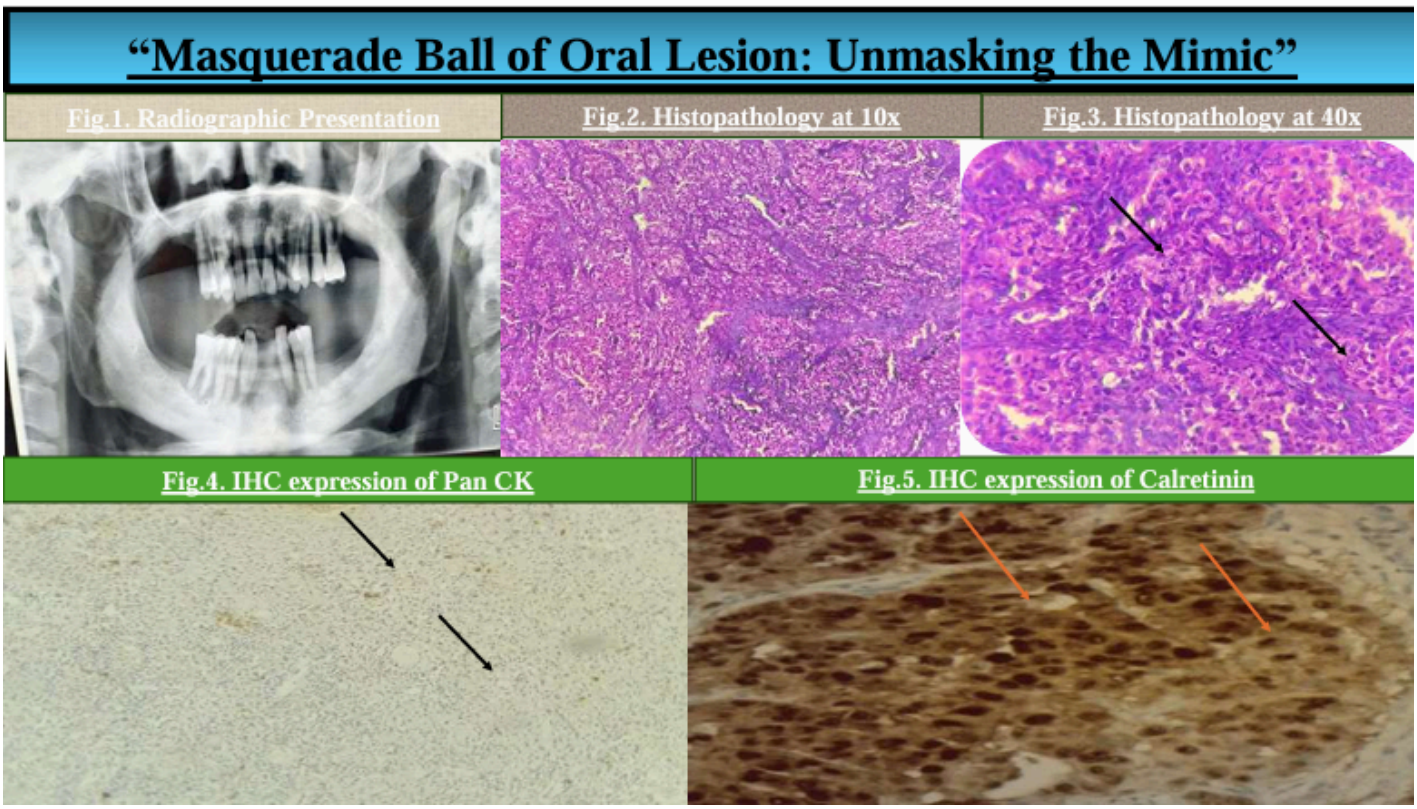


WHISPERS FROM THE MICROSCOPIC WORLD – DR. JYOTIKA PREETI

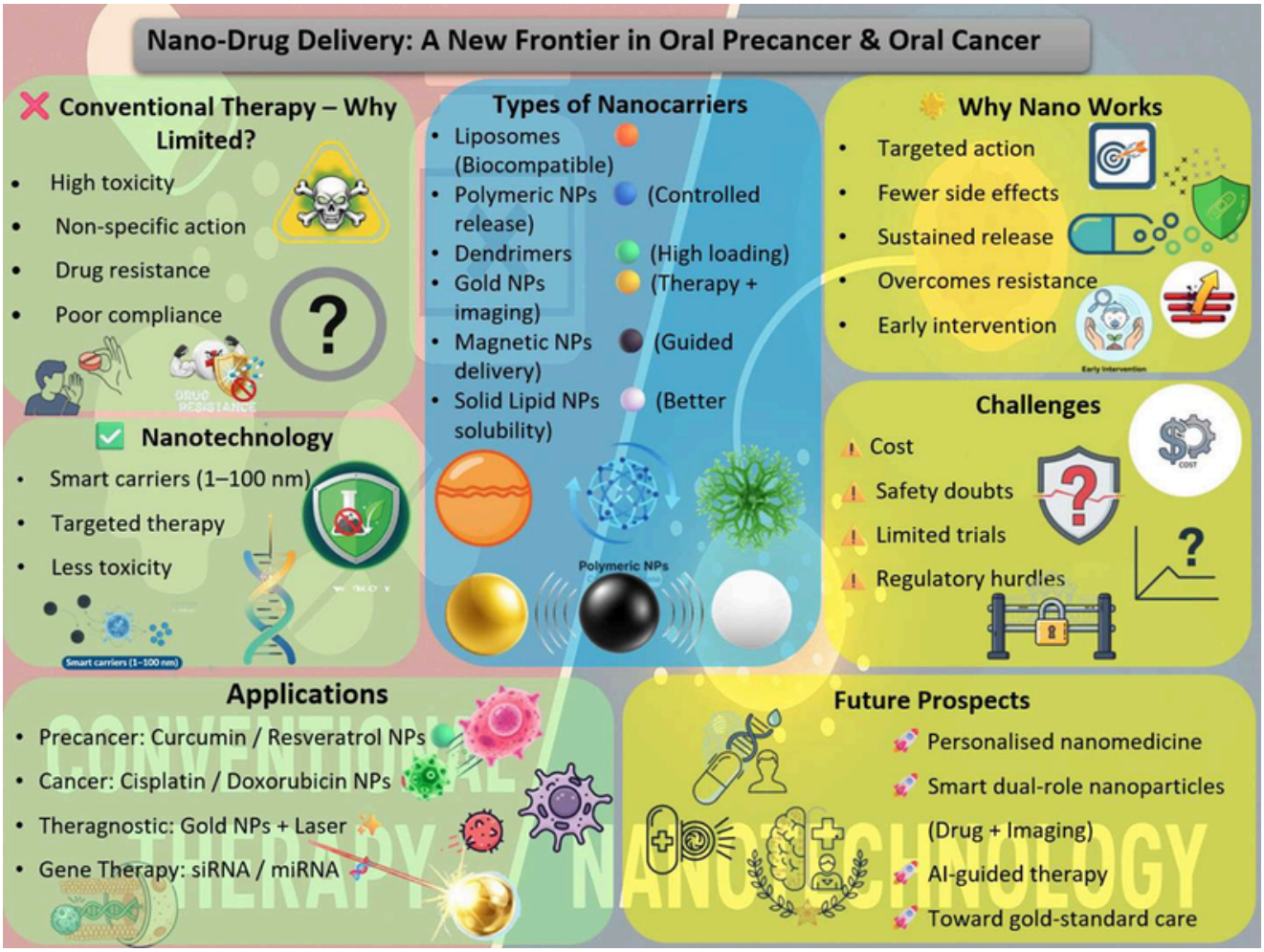


MASQUERADE BALL OF ORAL LESION: UNMASKING THE UNUSUAL

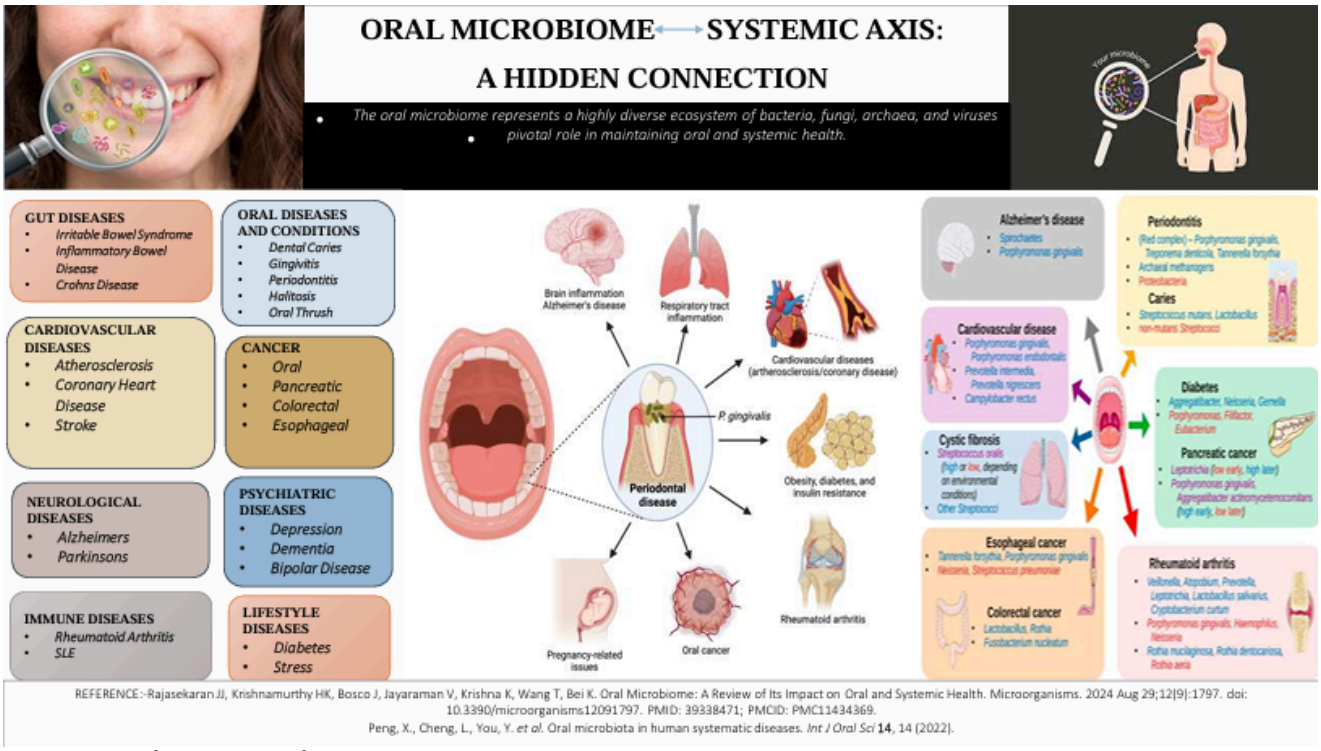
DR. ARUSHI



NANO-DRUG DELIVERY: A NEW FRONTIER IN ORAL PRECANCER & ORAL CANCER – DR.JINAL

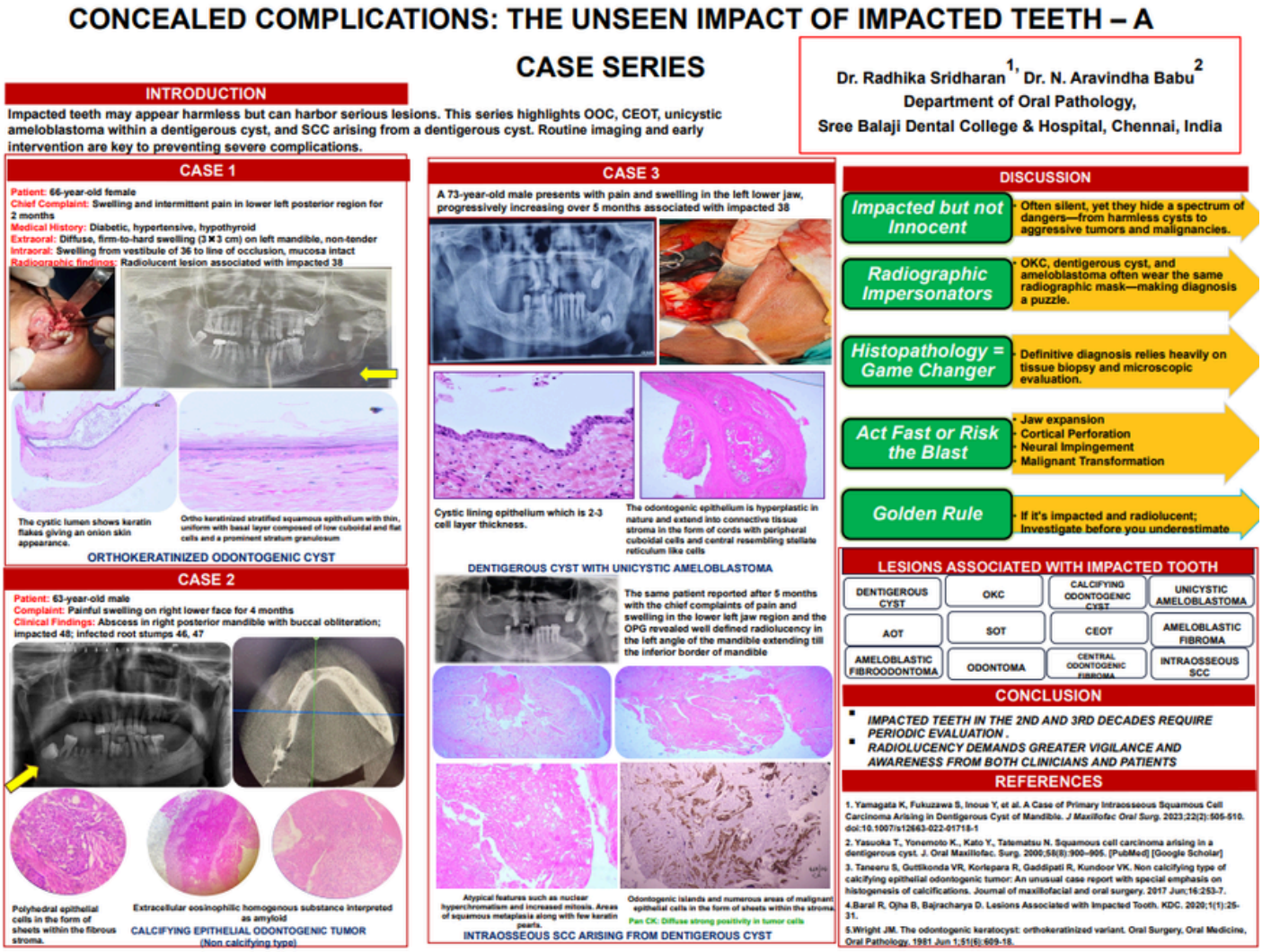


ORAL MICROBIOME SYSTEMIC AXIS: A HIDDEN CONNECTION – DR. SARNOT TEJAL RAKESH



REFERENCE:-Rajasekaran JJ, Krishnamurthy HK, Bosco J, Jayaraman V, Krishna K, Wang T, Bei K. Oral Microbiome: A Review of Its Impact on Oral and Systemic Health. Microorganisms. 2024 Aug 29;12(9):1797. doi: 10.3390/microorganisms12091797. PMID: 39338471; PMCID: PMC11434369.
Peng, X., Cheng, L., You, Y. *et al.* Oral microbiota in human systematic diseases. *Int J Oral Sci* **14**, 14 (2022).

CONCEALED COMPLICATIONS: THE UNSEEN IMPACT OF IMPACTED TEETH – A CASE SERIES – DR. RADHIKA SRIDHARAN, DR. N. ARAVINDHA BABU



SJOGREN'S SYNDROME IN THE POST-COVID ERA: A CASE SERIES EXPLORING EMERGING CLINICAL PATTERNS

DR. DEEPA PALANINADAN

INTRODUCTION

A growing number of cases were reported following COVID-19 infection, possibly due to immune dysregulation or the vaccination response, which might have triggered or exacerbated autoimmune conditions.

OBJECTIVE

To present three cases with histopathological confirmation and discuss their relevance in the post-COVID landscape.

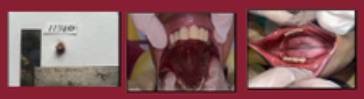
METHODOLOGY

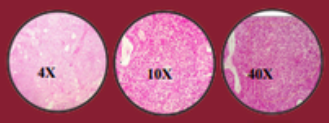
A retrospective review of three biopsy-confirmed Sjogren's syndrome cases was done. Diagnostic evaluations include-

- Schirmer's test
- Salivary flow rate assessment
- Autoantibody analysis
- Minor salivary gland biopsy
- Morphometric analysis assessed the severity of lymphocytic infiltration and glandular atrophy

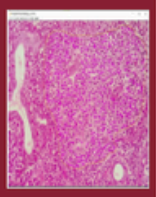
LIMITATIONS

Lack of confirmed COVID-19 exposure history and uncertainty regarding vaccination status





MORPHOMETRIC ANALYSIS CASE 1



Impression on morphological interpretation	Focal Lymphocytic Sialadenitis, suggestive of Sjögren's syndrome
Focus Score	> 1; multiple and confluent lymphocyte aggregates were present
Area of one focus counted	4.009 sq.mm
No. of lymphocytes counted in one focus	633
Software used for analysis	Image J 1.53e Wayne Rasband and contributors National Institutes of Health, USA Java 1.8.0_172 (64-bit)

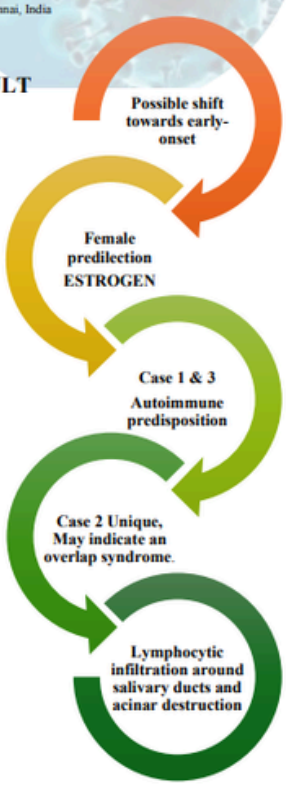
SJOGRENS SYNDROME IN POST-COVID ERA

A CASE SERIES EXPLORING EMERGING CLINICAL PATTERNS

Dr. Deepa Palaninadan[1], Dr. N. Aravindha Babu[2]
Department of Oral Pathology, Sree Balaji Dental College & Hospital, Chennai, India
Corresponding Author: Dr. Deepa Palaninadan
First Author: deepadocpals@gmail.com
Second Author: dr.aravindmsdcc@gmail.com

RESULT

	CASE 1	CASE 2	CASE 3
Age/sex	28 years/ Female	21 years/ Female	33 years/ Female
Biopsy date	10 October 2023	22 Aug 2023	20 Nov 2023
Primary complaint	Oral and ocular dryness for 5 months, dental decay	Referral from the Department of Rheumatology, history of Postauricular chondritis	Dryness of mouth for 3 months
Medical history	RA, Anemia, positive Anti-SSA, Anti- SSB	Bronchial asthma, relapsing polychondritis (May 2022), ANA+ fluorescence positive, pattern-speckled; Allergic to NSAIDs	RA, Anemia
Intraoral findings	Multiple caries, partially edentulous, dry mouth	Not explicitly mentioned	Dry mouth
Histopathological findings	Dense lymphocytic infiltration, acinar destruction	Dense lymphocytic infiltration, acinar destruction	Chronic lymphocytic infiltration, stromal fibrosis, acinar destruction
Diagnosis	Sjögren's Syndrome	Suggestive of Sjögren's Syndrome	Sjögren's Syndrome



LITERATURE REVIEW

- SAR-CoV-2 has a tropism for the salivary glands.
- Monoclonal antibodies produced in recovered patients can block ACE2/spike interaction and recognize nuclear antigens.
- Higher response with mRNA vaccines and initial doses seen in study by Darwish et al.

CONCLUSION

All three cases indicate that post-COVID immune activation may have triggered or accelerated Sjögren's syndrome onset, with elevated autoantibody titers at diagnosis in genetically predisposed individuals via **immune dysregulation**, **molecular mimicry**, or **chronic inflammation**.

REFERENCES

New-onset primary Sjögren's syndrome following exposure to severe acute respiratory syndrome coronavirus 2: A retrospective cohort study Shu Liu, Jing Zhang, Miao Liu, Qun Chen, Shiying Wang, Dandan Wang, Lingyun Sun Shen Y, Voigt A, Goranova L, Abed M, Kleiner DE, Maldonado JO, Beach M, Pelayo E, Chiorini JA, Craft WF, Ostrov DA, Ramiya V, Sukumaran S, Tsunyok A, Warner BM, Nguyen CQ. Evidence of a Sjögren's disease-like phenotype following COVID-19. PMCID: PMC9628191.
Molecular mimicry, hyperactive immune system, and SARS-COV-2 are three prerequisites of the autoimmune disease triangle following COVID-19 infection Maedeh Vahabi et al.
Does the COVID-19 vaccine cause a disease flare in patients with primary Sjögren's syndrome? A Cross-Sectional Study Al Darwish, Lama A. BSa,*, Khaleyli, Naram M. MDb, A. Almajzoub, Rahaf MDb, Kudsi, Mayssun PhD,

THE SILENT BONE GROWTH BEYOND THE TEEN YEARS – A CASE REPORT– DR. MEENAMBIGA. P

THE SILENT BONE GROWTH BEYOND THE TEEN YEARS

CASE REPORT

A 19 year old female patient reported with the chief complaint of swelling in lower right back tooth region for past 3 months. Growth of the swelling slow (gradual) in onset.

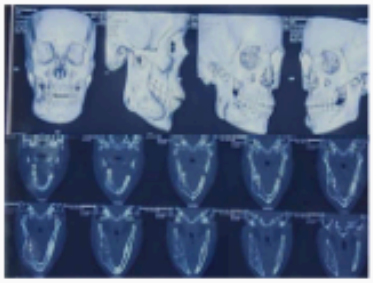
INTRAORAL EXAMINATION



Site: A bony hard expansion of the lingual and buccal cortex in the lower right canine - molar region.

Size : 4 x 2 cm
Consistency : hard
Palpation : non tender

RADIOGRAPHIC EXAMINATION



CT revealed presence of well defined expansible lytic lesion in area of ground glass density in anterior and inferior part of the lesion and few area of scattered calcification.

DIFFERENTIAL DIAGNOSIS

- Fibrous dysplasia
- Cementoblastoma
- Osseous dysplasia

INCISIONAL BIOPSY

OSSIFYING FIBROMA

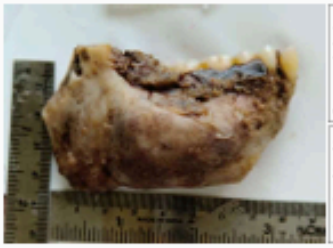
EXCISIONAL BIOPSY

MACROSCOPIC DETAILS



Submandibular salivary gland

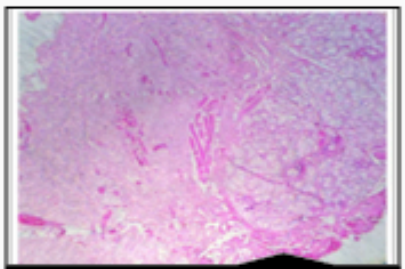
SIZE :- 2.7 X 3.0 X 1.8cm
SHAPE :- Irregular
COLOUR :- Grey
CONSISTENCY :- Soft



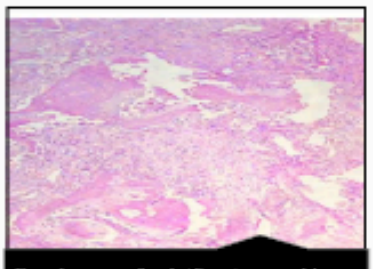
Semi mandibulectomy specimen has intact non mobile canine, 1st & 2nd premolar and all three molars and body of mandible.

SIZE :- 8.0 X 4.0 X 3.3cm
SHAPE :- Rectangular
COLOUR :- Brownish black
CONSISTENCY :- Hard

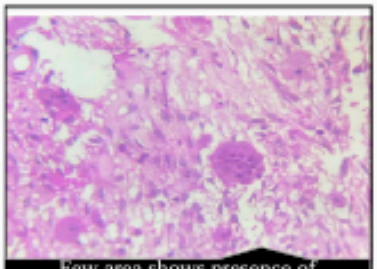
HISTOPATHOLOGY FEATURES



Dense connective tissue stroma which is moderately collaginized with minimal cellularity.



Focal areas of calcification and bony trabeculae with osteocytes present within osteocytic lacunae and osteoblastic rimming are seen.



Few area shows presence of multinucleated giant cells. Numerous endothelial lined blood vessels with extravasated RBCs and budding capillaries are noticed.

DIAGNOSIS : JUVENILE OSSIFYING FIBROMA [TRABECULAR TYPE]

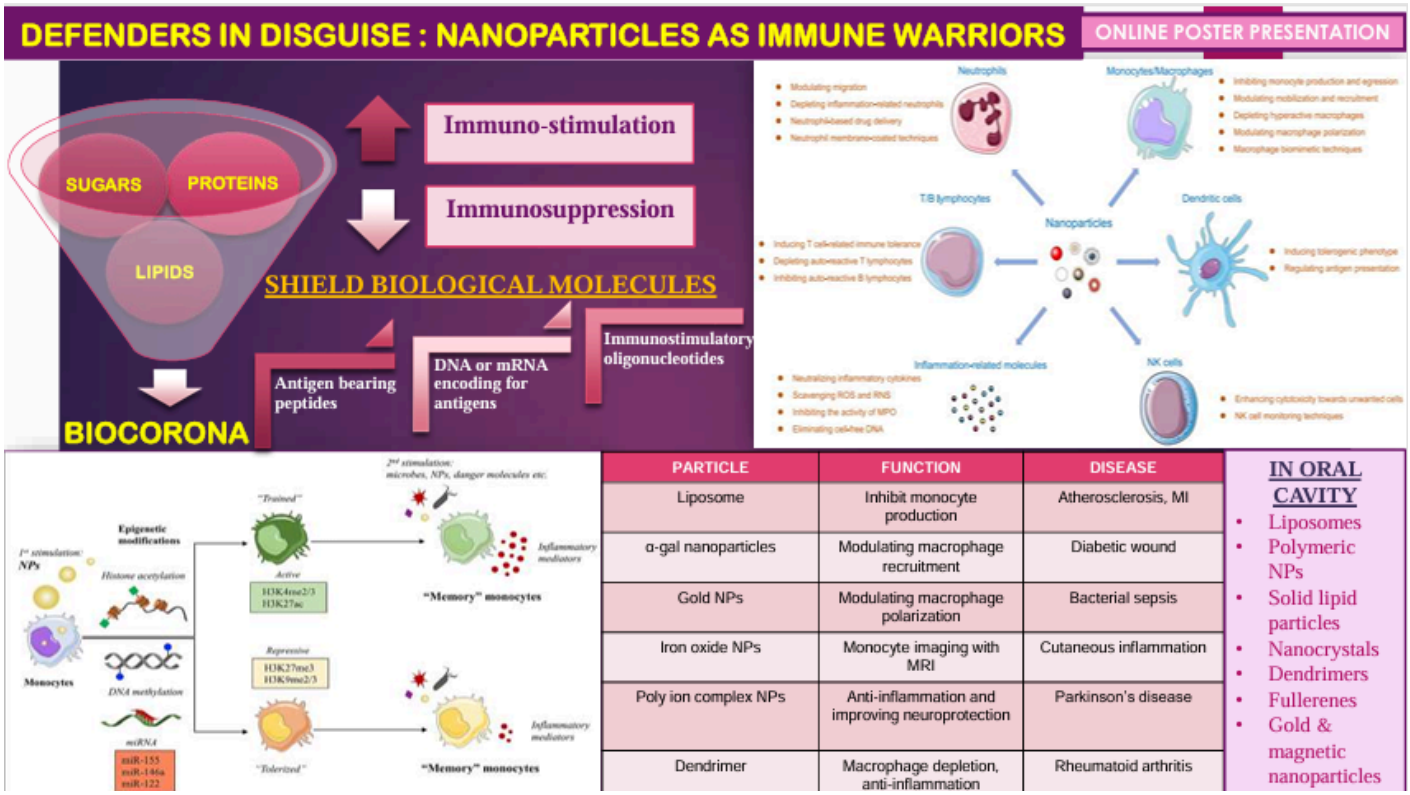
DISCUSSION

JOF is a rare benign fibro-osseous neoplasm which arises in craniofacial bones of children under 15 years of age. They occur more commonly in maxilla and very rarely in mandible. The tumor grows asymptomatically achieving a large size suggestive of its aggressive behavior giving suspicion of malignancy.

CONCLUSION

To conclude, even though JOF may be considered uncommon, it is an aggressive and recurrent tumor that needs immediate treatment and surgical resection. The diagnosis of JOF made by a combination of clinical, radiological, and histological evidence.

DEFENDERS IN DISGUISE : NANOPARTICLES AS IMMUNE WARRIORS. DR. AKSHAIYA SANTHOSHKUMAR

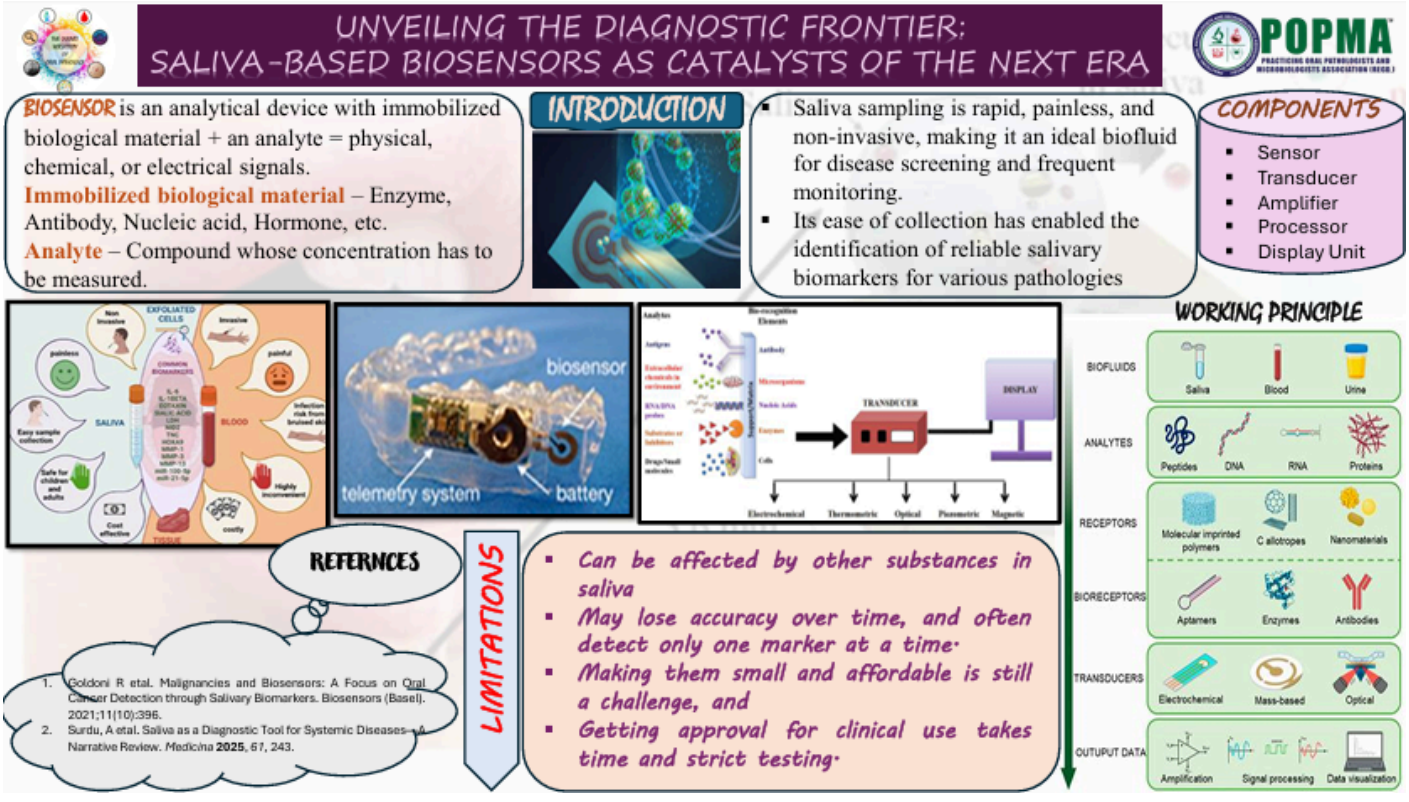


PARTICLE	FUNCTION	DISEASE
Liposome	Inhibit monocyte production	Atherosclerosis, MI
α-gal nanoparticles	Modulating macrophage recruitment	Diabetic wound
Gold NPs	Modulating macrophage polarization	Bacterial sepsis
Iron oxide NPs	Monocyte imaging with MRI	Cutaneous inflammation
Poly ion complex NPs	Anti-inflammation and improving neuroprotection	Parkinson's disease
Dendrimer	Macrophage depletion, anti-inflammation	Rheumatoid arthritis

IN ORAL CAVITY

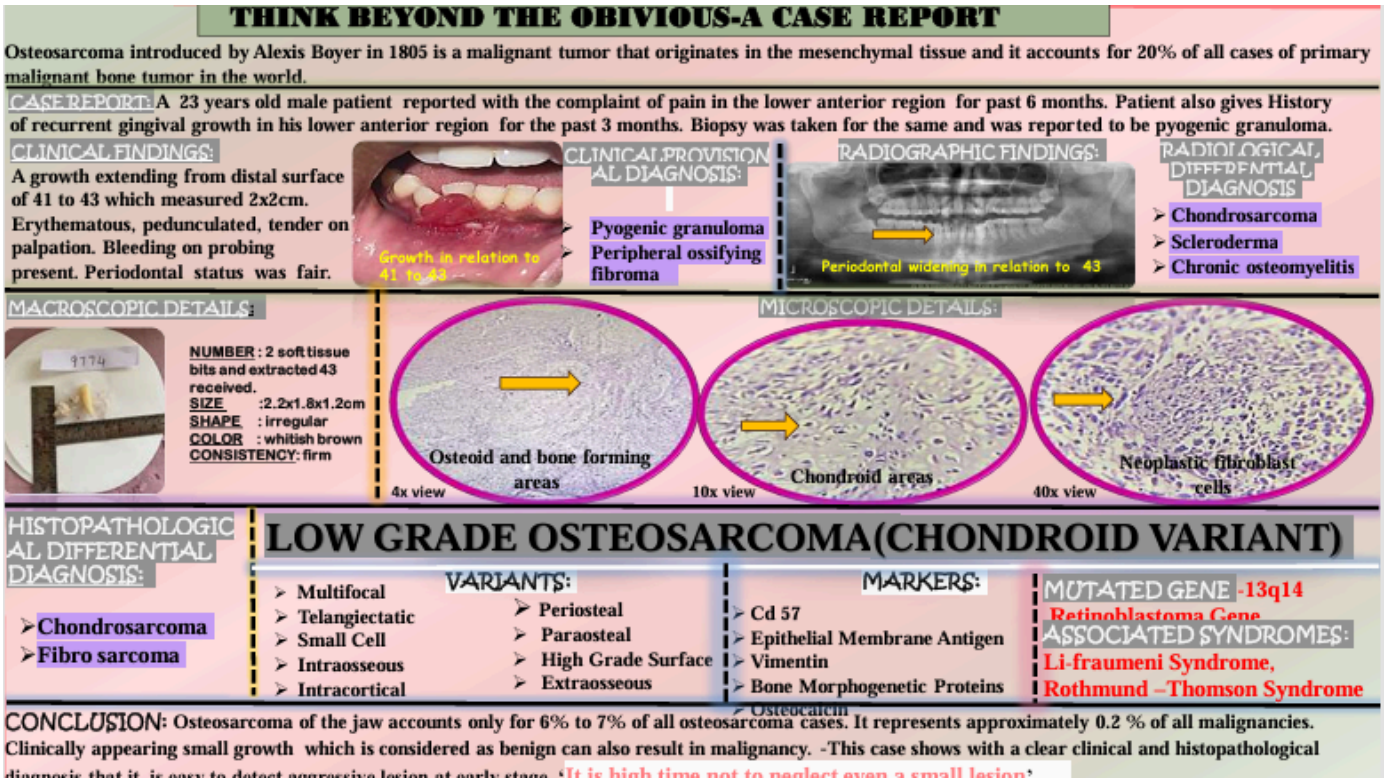
- Liposomes
- Polymeric NPs
- Solid lipid particles
- Nanocrystals
- Dendrimers
- Fullerenes
- Gold & magnetic nanoparticles

UNVEILING THE DIAGNOSTIC FRONTIER: SALIVA-BASED BIOSENSORS AS CATALYSTS OF THE NEXT ERA – DR.RADHIKA RAMGUNDAMWAR

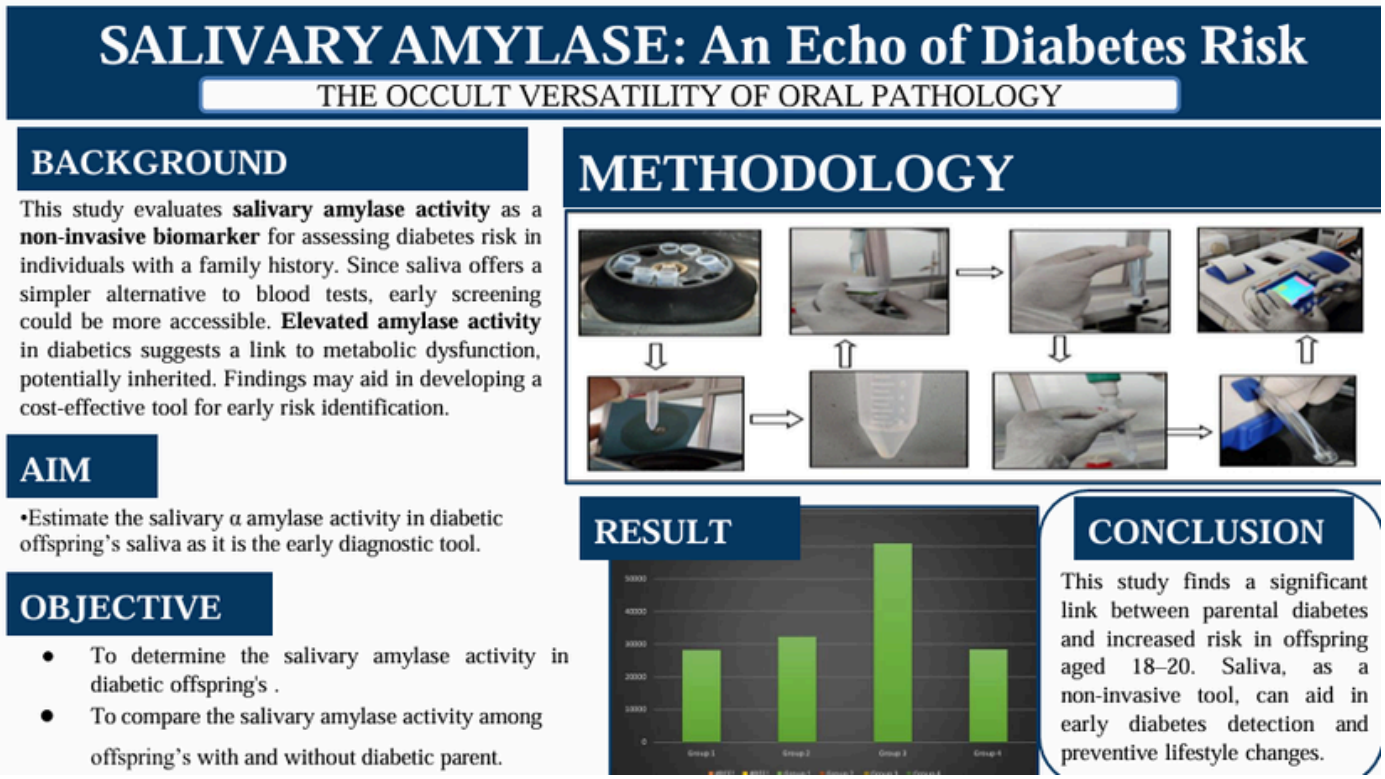


THINK BEYOND THE OBIVIOUS"– A CASE REPORT.

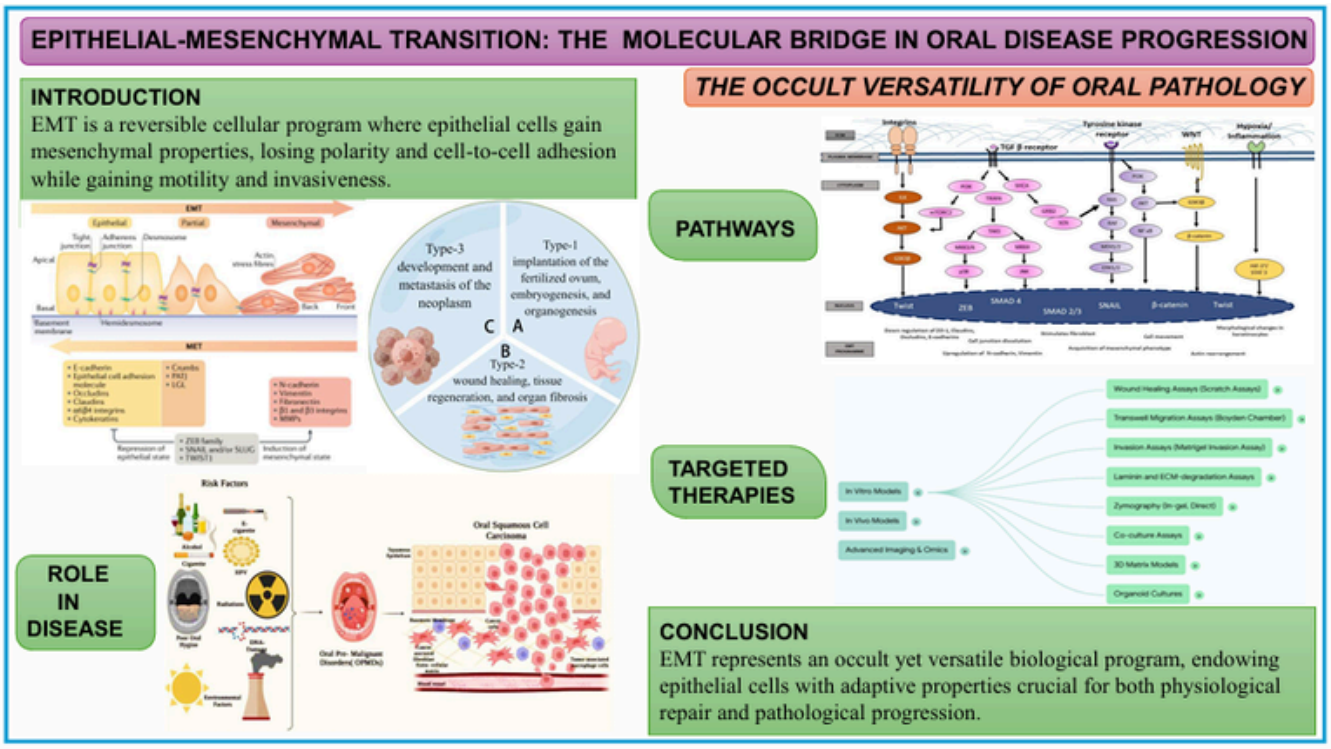
DR. NABEELA ABDUL, DR. N. ARAVINDHA BABU



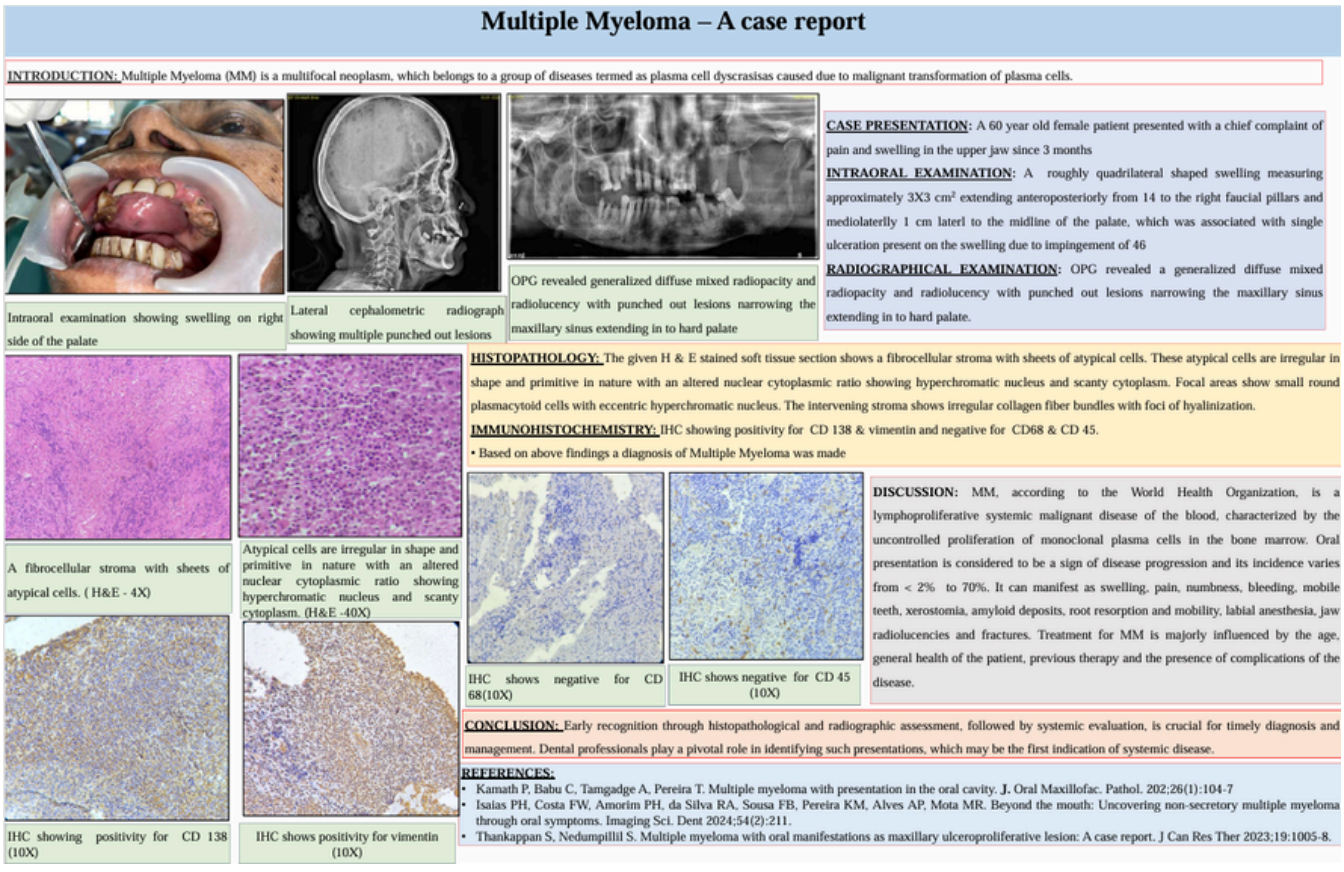
ESTIMATION OF SALIVARY AMYLASE ACTIVITY IN DIABETIC OFFSPRINGS AS EARLY DIAGNOSTIC TOOL –DR.SWERNA.R, DR.SHIBIN DANI.



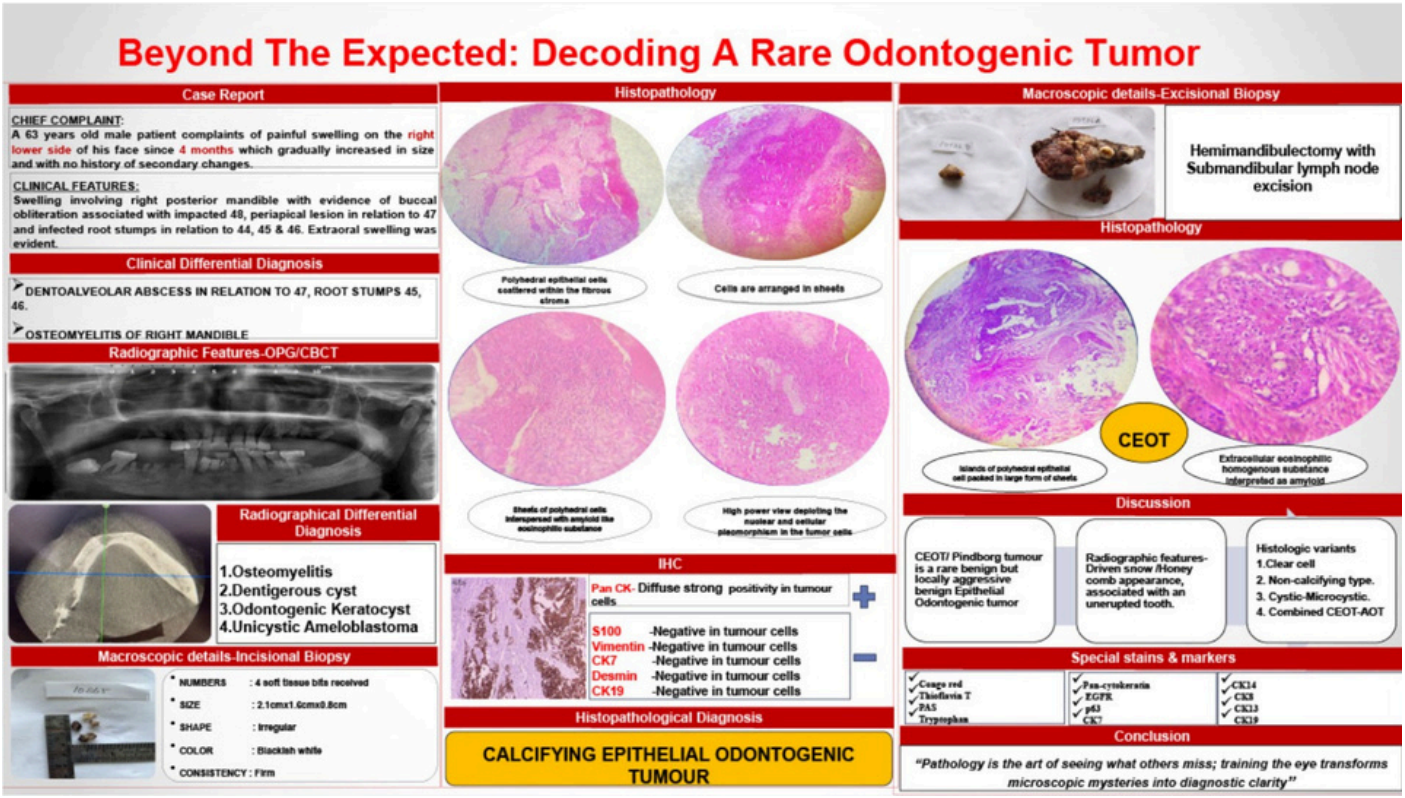
EPITHELIAL- MESENCHYMAL TRANSITION:THE MOLECULAR BRIDGE IN ORALDISEASE PROGRESSION-A REVIEW - DR. ARCHANA. S, DR. VARSHA. P



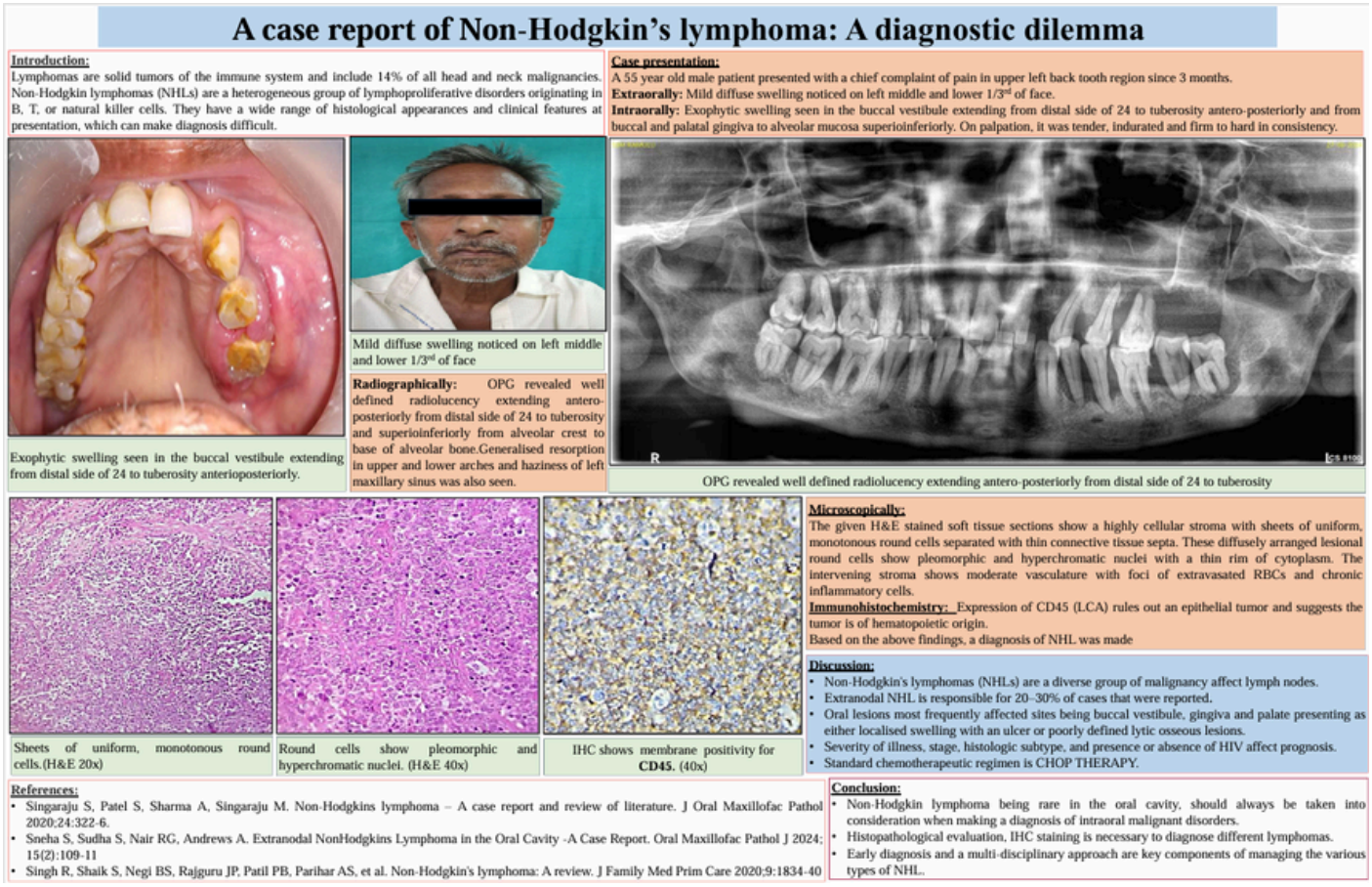
MULTIPLE MYELOMA - A CASE REPORT - DR. KANUGULA TEJASRI



BEYOND THE EXPECTED: DECODING A RARE ODONTOGENIC TUMOR – DR. SWATHI T



A CASE REPORT OF NON-HODGKIN'S LYMPHOMA: A DIAGNOSTIC DILEMMA – DR. GREESHMA THOMAS

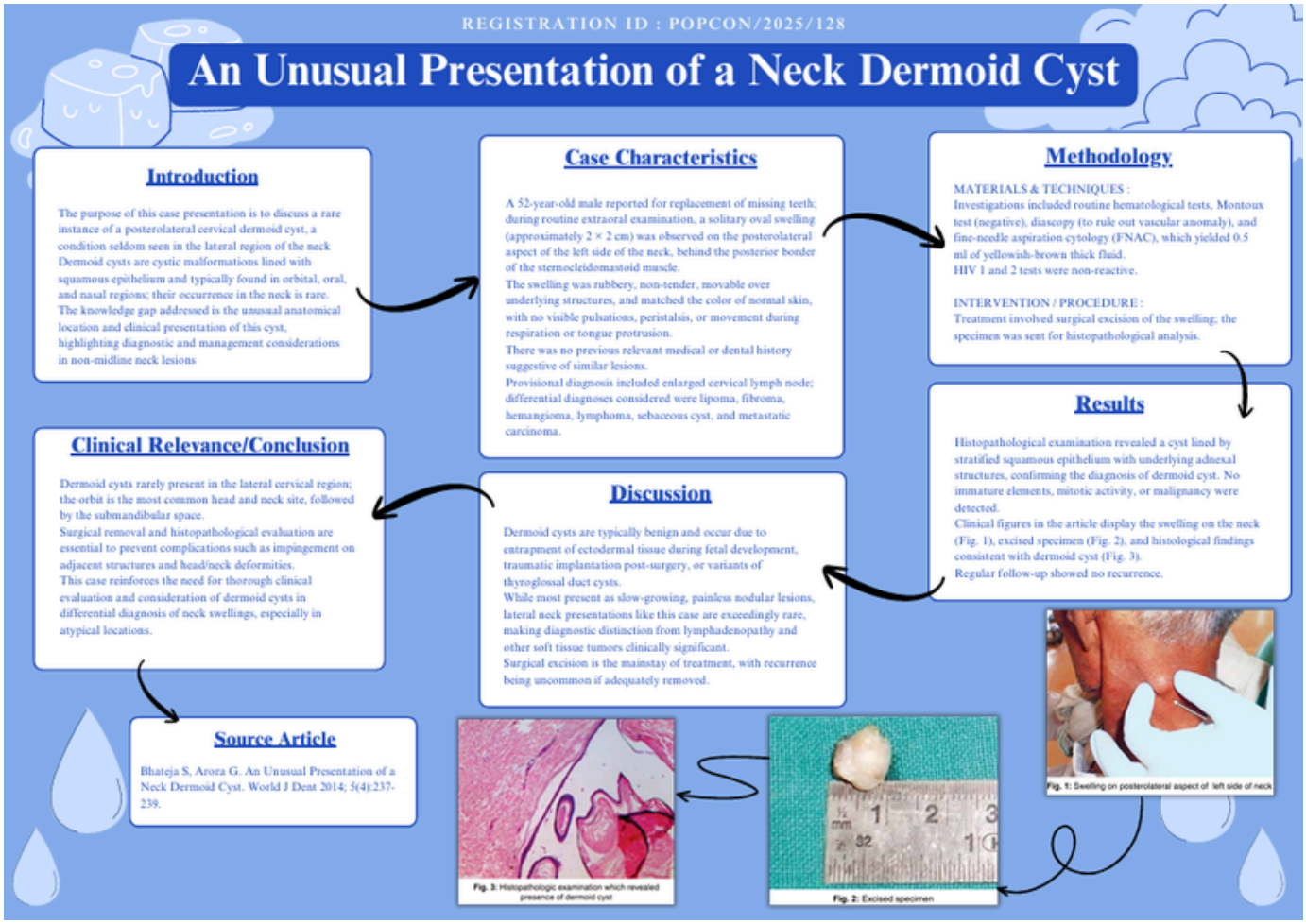


POSTER COMPETITIONS

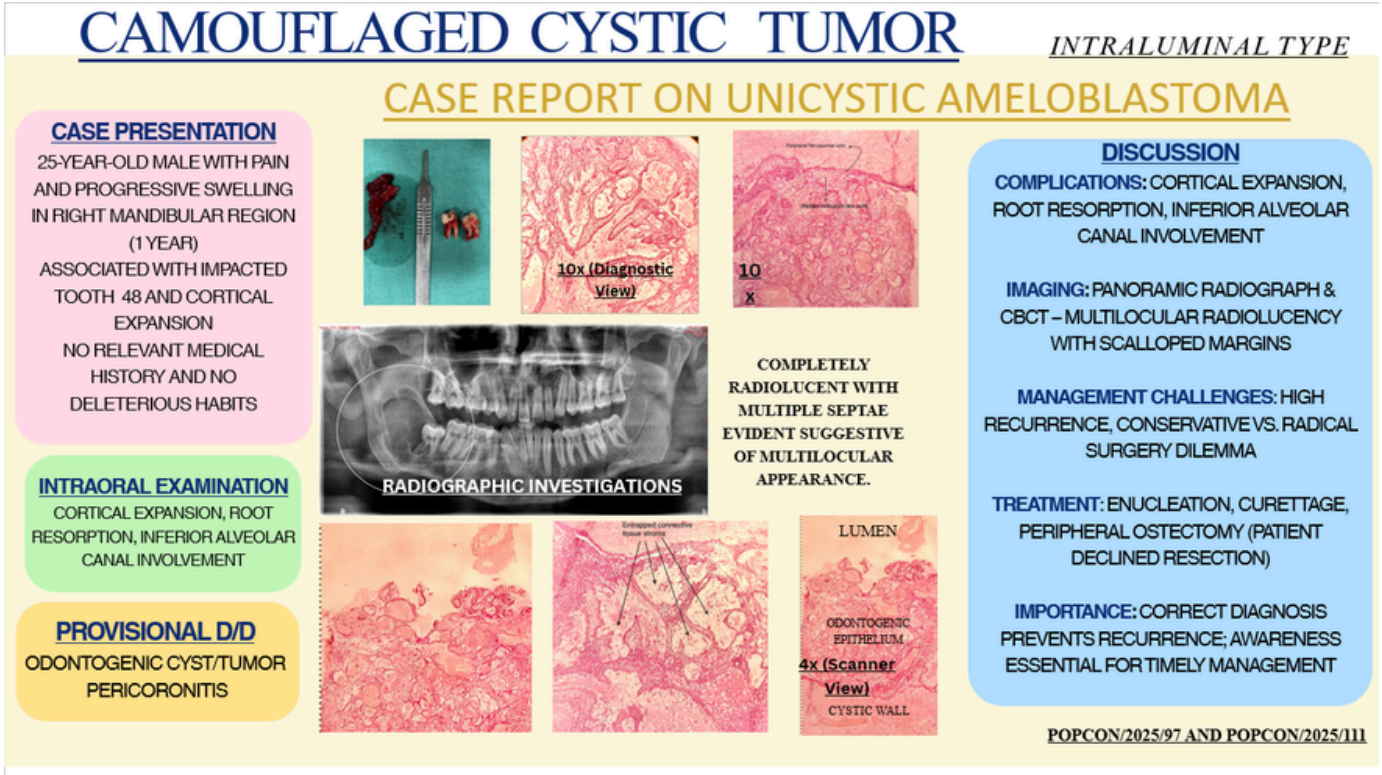


UNDER GRADUATES

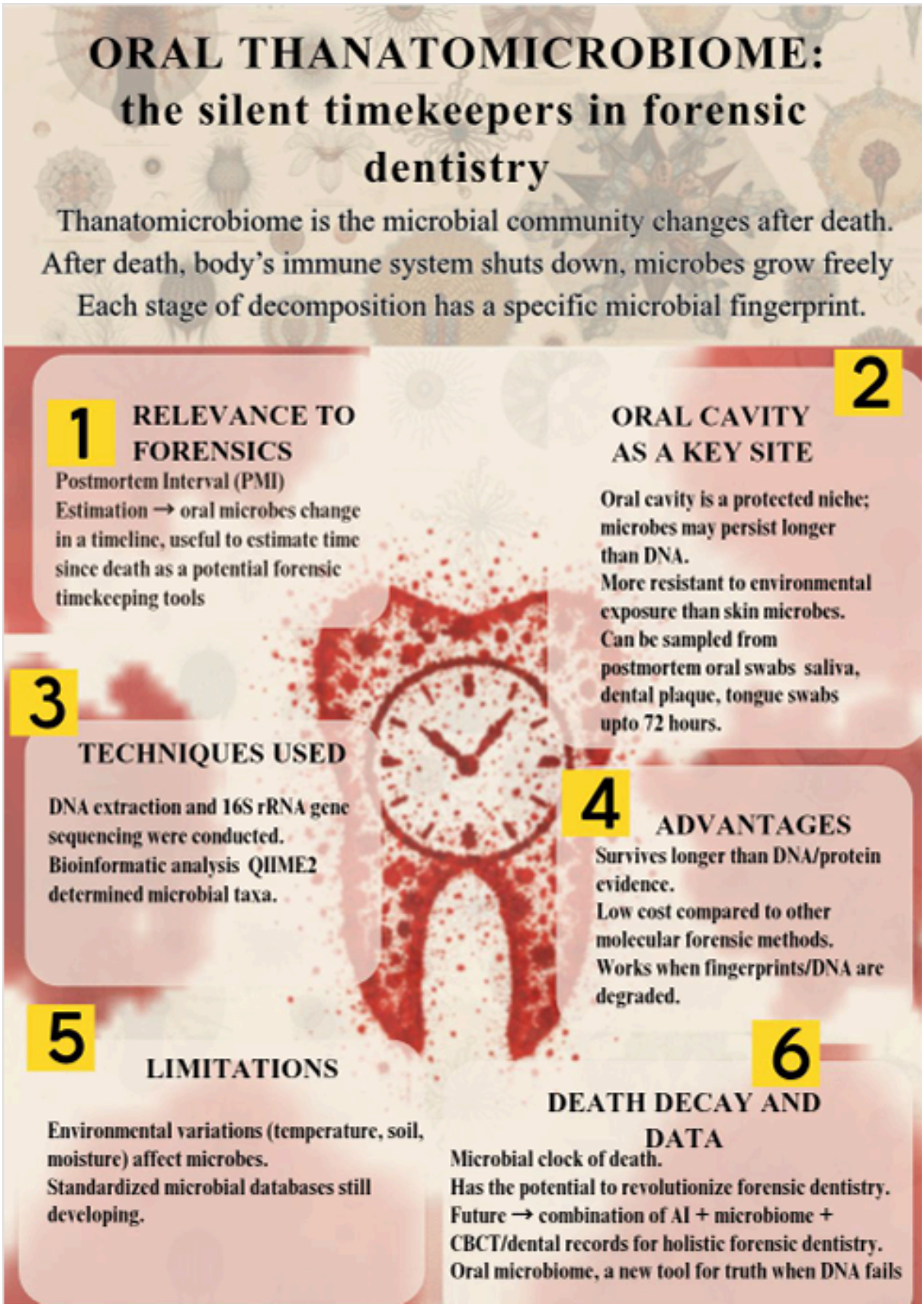
AN UNUSUAL PRESENTATION OF A NECK DERMOID CYST – ANSHIKA BATRA



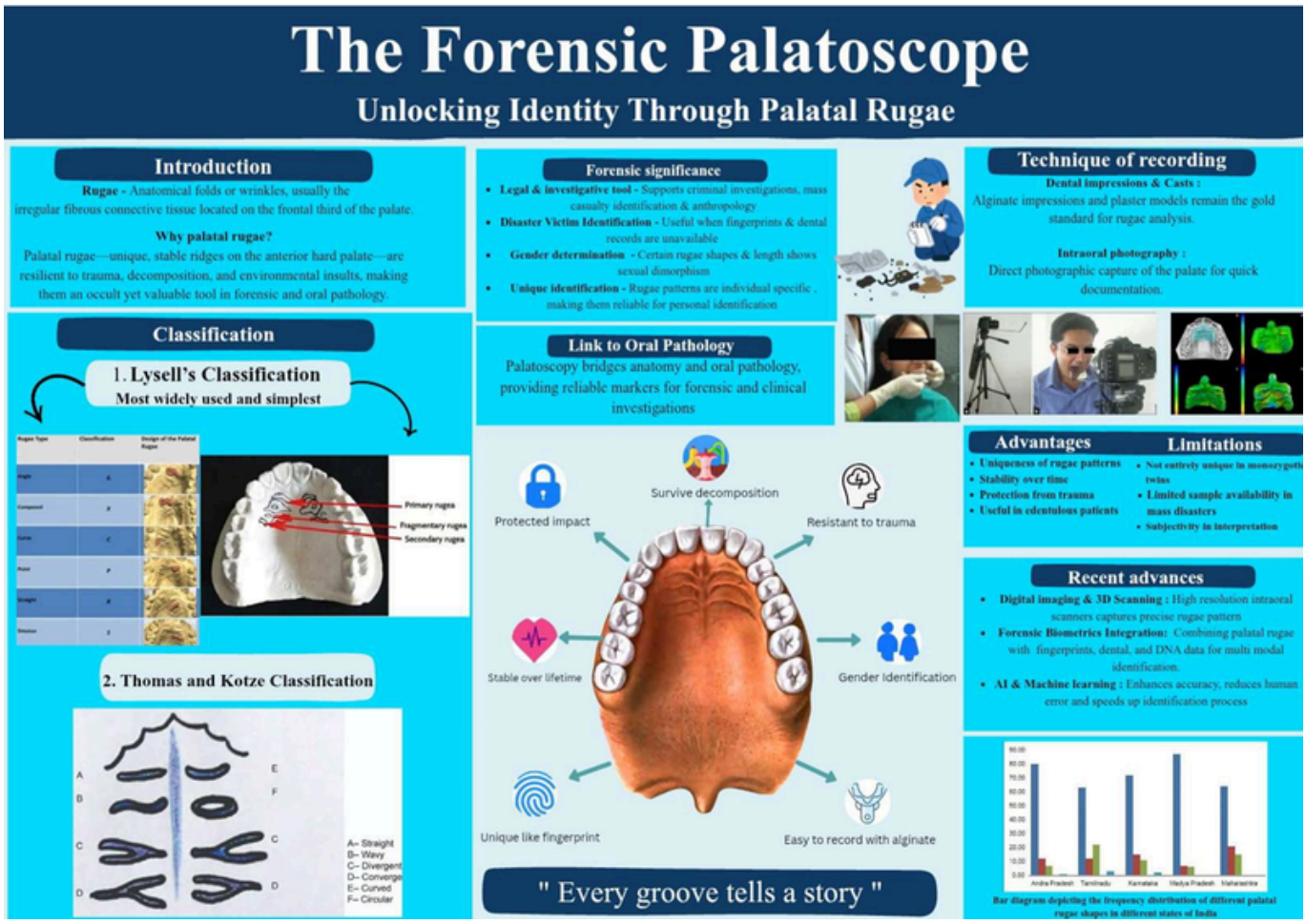
CAMOUFLAGED CYSTIC TUMOR :CASE REPORT ON UNICYSTIC AMELOBLASTOMA (INTRALUMINAL TYPE) ANKITA BHARADWAJ, SHIKHA KANDWAL



ORAL THANATOMICROBIOME: THE SILENT TIMEKEEPERS IN FORENSIC DENTISTRY – DR. AAYUSHI THADHANI, DR. ZAIB MIRZA



THE FORENSIC PALATOSCOPE UNLOCKING IDENTITY THROUGH PALATAL RUGAE– MONIKA GARG SOMYA



SALIVA: THE CRYSTAL BALL OF ORAL PATHOLOGY– TANISHA VARSHNEY, AARUSH VASISHT



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Guidelines for Abstract submission-

- Abstract should not exceed 200 words.
- It should be structured as Title, Introduction, Aim and Objectives, Methodology, Results and Conclusion wherever possible.
- It should be submitted in Microsoft Word document (.docx) format with Font-Times New Roman, 16 (heading) and 14 (body) with single line spacing.
- Authors and co-authors should include their name, designation, email id and mobile number in the same word document.
- E-poster and e-paper can be of following categories: Original Research, Case reports, Case series and Reviews.

Guidelines for Scientific Presentation-

- Presenting author and co-author should be registered delegate in 1st National Conference POPCON 2026.
- Only one co-author will be permitted per presentation.
- Once your e-paper/ e-poster is accepted for presentation, you will receive an email communication bearing the scientific e-poster/ e-paper number.
- Mention the e-poster/ e-paper number without fail in the upper right corner of the first slide of PowerPoint Presentation.
- Time allotted for e-poster is 2 mins and for e-paper is 3 mins followed by 2 min of discussion.
- Both e-poster and e-paper presentations should be prepared in Microsoft PowerPoint.
- E-poster should be prepared in only 1 slide and its orientation should be landscape.
- E-paper should include maximum 10 slides.
- Figures (graphs, tables, photographs, illustrations or diagrams) must have title and legends.
- Both e-poster and e-paper should be submitted in (.pptx) format.

Guidelines for Art – O – Path Reel Competition will be uploaded soon

IMPORTANT NOTE:

- Abstracts should be submitted online to- https://popma.in/popcon-2026-poster-presentation/
- Last date for abstract, e-poster/e-paper submission- 19th September, 2026
- The scientific committee of the conference will have the sole discretion to accept/ decline any e-poster or e-paper and this shall be communicated to the lead presenter.
- The e-poster or e-paper selected by the scientific committee will be allowed to be presented in the conference.
- All authors and co-authors will be presented certificates for their Scientific presentations. Individual attendance is mandatory to obtain certificates.
- Winners will receive cash prizes.

Any queries regarding scientific presentation will be answered through
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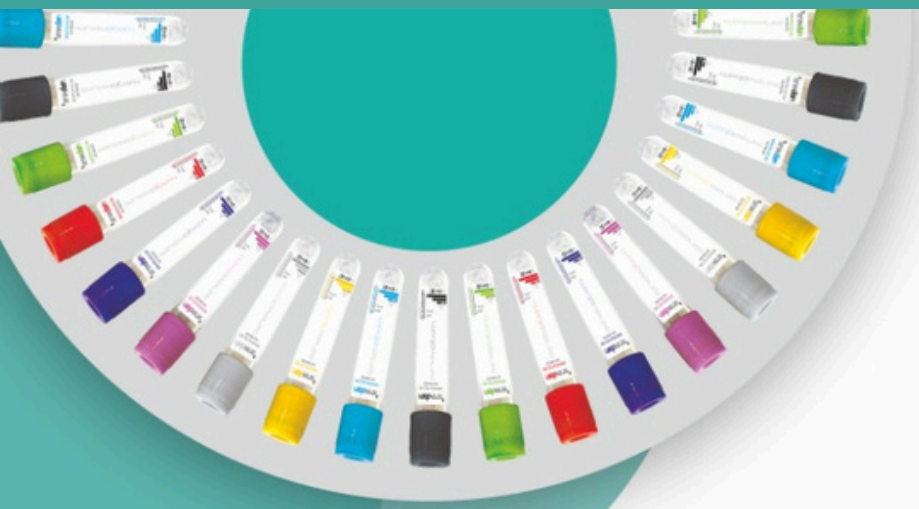
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CHANDIGARH CHAPTER

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TIME: 3.00PM - 6.00PM WITH HIGH TEA



Event Highlights

- INTERACTIVE SEMINAR WITH BUDDING AND ASPIRING ORAL PATHOLOGISTS
- GUIDANCE FOR PRIVATE DIAGNOSTIC AND BIOPSY PRACTICE
- AWARENESS AND OUTREACH TO PROMOTE THE ORAL PATHOLOGY
- NETWORKING AND MENTORSHIP

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by Shivam Madaan — February 8, 2024

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ACHIEVEMENTS OF POPMA

9/17/25, 12:58 PM Gmail - Inclusion of Oral Pathology & Microbiology in Charaka Awards

Gmail POPMA <popma01797@gmail.com>

Inclusion of Oral Pathology & Microbiology in Charaka Awards

charaka awards <charakaawards@ida.org.in> Tue, Sep 16, 2025 at 9:58 AM
To: popma01797@gmail.com

Dear Dr. Nagpal,

This has reference to your representation on behalf of the Practicing Oral Pathologists and Microbiologists Association (POPMA) regarding the inclusion of *Oral Pathology & Microbiology* in the Charaka Awards.

We have duly considered the matter and acknowledge the points submitted with respect to the clinical significance of the specialty. Accordingly, we are pleased to inform you that *Oral Pathology & Microbiology* has now been incorporated as a recognized category under the Charaka Awards.

For your reference, the updated details are available at the following link:
https://charakaawards.ida.org.in/Home/Contest/395

We trust that this inclusion will encourage wider participation and ensure equitable representation of all clinical disciplines.

Yours sincerely,

--
Dr. Naitik Vora
Junior Executive
Scientific Affairs & Events
Ph - +91 9167755833

Gmail POPMA <popma01797@gmail.com>

Representation regarding inclusion of MDS (Oral Pathology and Microbiology) in Clinical Establishment (Central Government) Rules, 2020 and Recruitment Eligibility Criteria in government and private pathology laboratories, cancer centers, as well as Medical and Dental Research

1 message

Secretary DCI <secy-dci@nic.in> Tue, Apr 8, 2025 at 5:51 PM
To: popma01797 <popma01797@gmail.com>
Cc: Amrit Kumar Yadav <dentaledu-mohfw@gov.in>, Kumar Rahul <kumar.rahul@nic.in>, Amit Kumar <amitkumar.mol@nic.in>, section313mohfw <section313.mohfw@gmail.com>

महोदय/महोदया,
Sir/Madam,

कृपया इसके साथ संलग्न फ़ाइल को देखें।
Please find the file attached herewith.

प्रभारी सचिव / Secretary In-charge
भारतीय दंत परिषद / Dental Council of India
नई दिल्ली / New Delhi

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PRACTICING ORAL PATHOLOGISTS AND MICROBIOLOGISTS ASSOCIATION

Registered under section 9(1) of the Haryana Registration and Regulation of Societies Act, 2012 with Registration No. HR/12/2023/01797

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Dr. Bhuvan Nagpal	Dr. Ketki Kalele	Dr. Shivani Mungala

Joint Secretary	Treasurer	Executive Member	Executive Member
Dr. Abhishek Banerjee	Dr. Anuj Kalra	Dr. Swapnita Patil	Dr. Abhishek Bhadranna

Ref. No.: POPMA/2026/10
Date: 05.02.2026

To
Dr. Ashok D. Dhoble
Hon. National Secretary General
Indian Dental Association, Head Office: Mumbai

Subject: Request for IDA Support and State-Level Endorsement for Strengthening Oral Pathology & Diagnostic Services

Respected Sir,

Greetings from the Practicing Oral Pathologists and Microbiologists Association (POPMA).

At the outset, we place on record our sincere appreciation for the Indian Dental Association (IDA) for its historic and continuing contribution toward safeguarding professional ethics, advancing dental education, strengthening public oral health awareness, and unifying the dental fraternity across India. IDA has consistently played a pivotal role as the most respected national professional body representing dentists at policy, academic, and grassroots levels.

POPMA, as a national professional association representing practicing Oral Pathologists and Microbiologists, humbly seeks the esteemed support and endorsement of IDA to strengthen the role of oral diagnostics and biopsy-based practice within routine dentistry.

Importance of Oral Pathology in Contemporary Dental Practice

Oral Pathology is a core diagnostic specialty bridging dentistry, medicine, oncology, and laboratory sciences. Oral Pathologists possess specialized expertise in:

- Histopathological diagnosis of oral and maxillofacial diseases
- Early detection and confirmation of Oral Potentially Malignant Disorders (OPMDs)
- Definitive diagnosis of oral and head–neck cancers
- Cytology, microbiology, serology, hematology, biochemistry and laboratory-based diagnostics
- Medico-legal documentation and forensic applications

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Ref. No.: POPMA/2026/13
Date: 05.02.2026

To
Dr. Ashok D. Dhoble
Hon. National Secretary General
Indian Dental Association, Head Office: Mumbai

Subject: Proposal for IDA–POPMA Joint Clinical Diagnostic & Biopsy Training Program for Dentists

Respected Sir,

Warm greetings from the Practicing Oral Pathologists and Microbiologists Association (POPMA).

We once again express our deep respect for the Indian Dental Association (IDA) for its visionary leadership in professional education, continuing dental programs, and nationwide academic initiatives that have consistently elevated the standards of dental practice in India.

In alignment with IDA's commitment to comprehensive clinical excellence, POPMA respectfully proposes the initiation of a joint IDA–POPMA structured training program focused on clinical diagnosis, oral pathology integration, and biopsy-based dental practice.

Rationale for the Program: Oral diseases—particularly Oral Potentially Malignant Disorders and oral cancer—require early recognition, diagnostic precision, and timely biopsy intervention. While dentists are the first point of patient contact, there exists a critical need for structured, hands-on, diagnosis-oriented training that integrates pathology and laboratory sciences into routine clinical decision-making.

Proposed Program Framework
(Under IDA Continuing Education / Comprehensive Clinical Residency-style modules)

The proposed program may include:

1. **Clinical Diagnosis of OPMDs and Oral Cancer**
   - Risk assessment
   - Clinical red flags
   - Diagnostic decision-making
2. **Biopsy Techniques in Dental Practice**
   - Indications and contraindications

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Dr. Abhishek Banerjee	Dr. Anuj Kalra	Dr. Swapnita Patil	Dr. Abhishek Bhadranna

Ref. No.: POPMA/2026/40
Date: 05.02.2026

To
The Director, Medical Laboratories Division (NABL)
National Accreditation Board for Testing and Calibration Laboratories (NABL)
New Delhi

Subject: Uniform recognition of MDS (Oral Pathology & Microbiology) as Authorized Signatories under NABL-accredited laboratories and request for POPMA's participation in technical deliberations

Respected Sir,

On behalf of the Practicing Oral Pathologists and Microbiologists Association (POPMA), we respectfully submit this representation seeking uniform, explicit, and nationally consistent recognition of MDS (Oral Pathology & Microbiology) professionals as Authorized Signatories and Technical Experts under NABL-accredited Medical Laboratories, in accordance with their statutory training and the needs of India's diagnostic ecosystem.

This request is submitted with due regard to the principles of competence, impartiality, accountability, and patient safety that are foundational to ISO 15189 and NABL accreditation.

Current Situation and Practical Concern: While several NABL-aligned laboratories already utilize MDS Oral Pathologists as signatories for oral and maxillofacial histopathology and related diagnostics, the absence of an explicit clarification / uniform guidance has resulted in:

- Inconsistent interpretations by assessors across regions
- Variations in acceptance of Oral Pathologists as signatories, despite comparable competency evidence
- Avoidable delays and uncertainty during accreditation and surveillance assessments

We respectfully submit that this inconsistency is not a quality issue, but an awareness and standardization gap.

Established Competence of MDS (Oral Pathology & Microbiology): MDS Oral Pathologists are trained, as per DCI-approved curriculum, in:

- Oral, maxillofacial, head & neck histopathology
- Cytology and FNAC (oral/head-neck)
- Laboratory quality systems and documentation

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- Diagnostic reporting, clinicopathologic correlation, and accountability

The competency base is consistent with the expectations of technical competence and reporting responsibility under NABL-accredited systems.

Emerging Reality: Growing NABL-Governed Oral Pathology Workforce

We respectfully highlight a crucial contemporary development:

- Many Oral Pathologists are already working as NABL-authorized signatories in accredited diagnostic laboratories in India.
- The number of dedicated oral pathology diagnostic laboratories and oral histopathology services seeking NABL accreditation is expected to increase significantly in the near future, driven by:
  - Standardization needs
  - Medico-legal accountability
  - Demand for quality-assured cancer diagnostics

Accordingly, this workforce and these laboratories are—and will increasingly remain—governed by NABL's accreditation ecosystem, requiring consistent understanding and uniform implementation across assessors and technical committees.

However, many assessors may not be fully aware of the statutory training structure, defined scope, and existing utilization of MDS Oral Pathologists as signatories, resulting in avoidable divergence in assessment outcomes.

Request to NABL (Medical Laboratories Division)

In light of the above, POPMA respectfully requests NABL to consider the following actions:

Issue a clarification / guidance note: To explicitly recognize MDS (Oral Pathology & Microbiology) as eligible Authorized Signatories / Technical Signatories within a defined scope, including:

- Oral, maxillofacial, head & neck histopathology
- Cytology / FNAC limited to oral and head-neck region
- Related laboratory reporting within their competency domain *(and as applicable per laboratory scope and competence matrix)*

Ensure uniform assessor orientation: To ensure uniform accreditation practices by sensitizing/briefing assessors under the Medical Laboratories Division regarding:

- The statutory status of the specialty

ACHIEVEMENTS OF POPMA

POPMA CONCLAVE-2026 News Highlights



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'ओरल पॅथॉलॉजी' परिषदेत महत्त्वपूर्ण चर्चा

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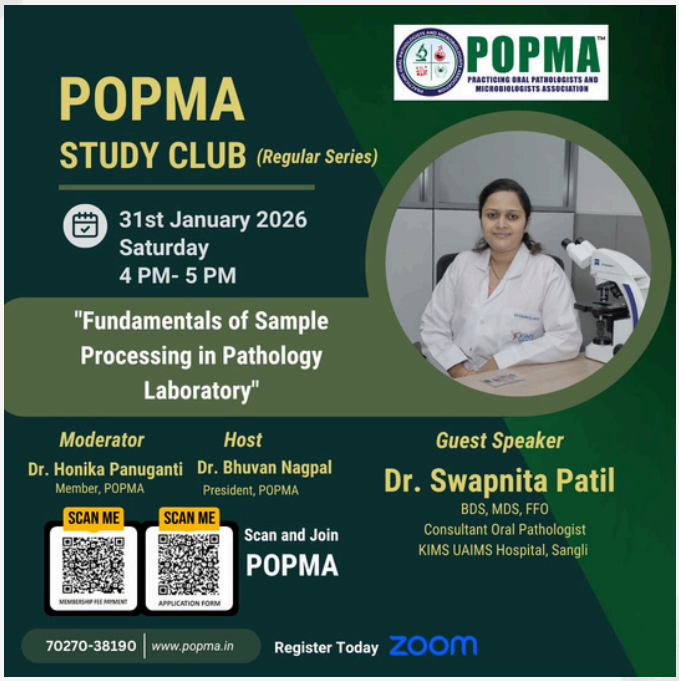
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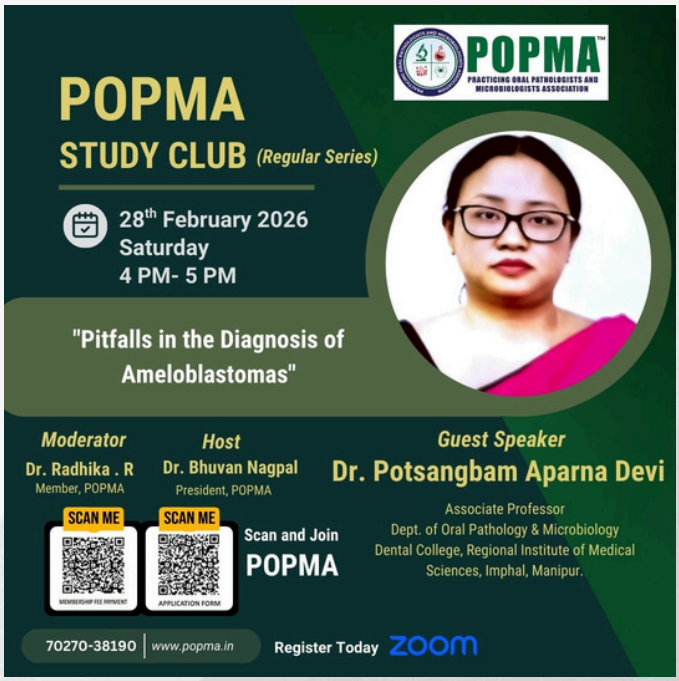
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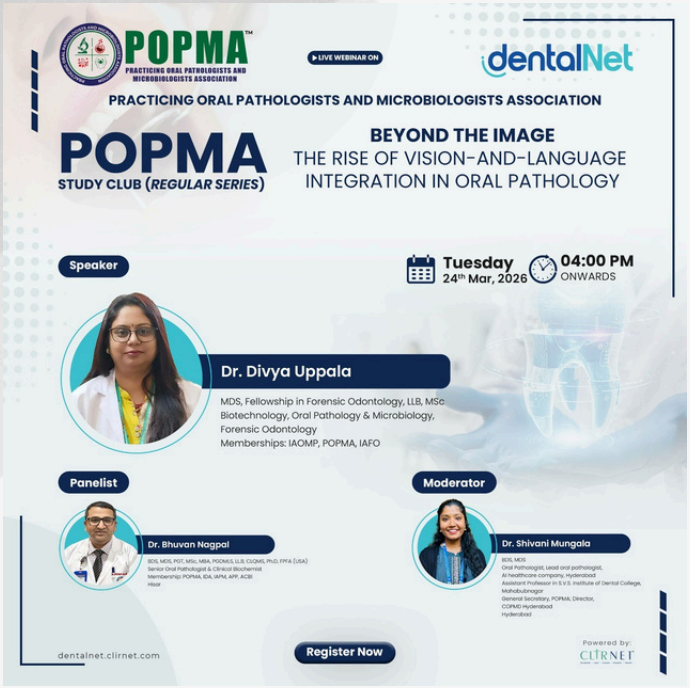
POPMA STUDY CLUB 2026

- One session every two months
- March, June, September, December of each year from January till December
- Any member can volunteer for taking up a topic of teaching
- Guest lecture will be conducted from eminent speakers
- It can be either a good case presentation, research article, seminar
- The topic should be of practical importance
- Time duration: 1 hour
- Only the crisp and important points should be highlighted, which are of practical importance





POPMA STUDY CLUB 2026





- One lecture each month will follow a structured academic schedule, covering advanced topics in oral pathology and microbiology.
- A second monthly lecture, part of the Senior Stalwarts Series, will feature eminent oral pathologists sharing their career journeys, practical experiences, and advanced diagnostic insights.
- These sessions are designed to inspire and mentor MDS oral pathologists while bridging the gap between academic learning and real-world applications.
- New Initiative for BDS students. In addition to empowering MDS professionals, the POPMA Study Club is proud to introduce a special lecture series for BDS students.

Watch all the study club videos

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CHAMPIONING ORAL PATHOLOGISTS: POPMA'S JOURNEY TOWARD RECOGNITION

Introduction: A Voice Long Silenced, Now Roars

In the annals of Indian dental specialties, Oral Pathology & Microbiology has long stood as an unsung pillar—essential in theory, overlooked in practice. Despite its integration of diagnostic sciences, histopathology, hematology, microbiology, and even molecular diagnostics, the field had historically been relegated to academic confines, its clinical potential underestimated.

In 2023, this began to change.

The formation of the Practicing Oral Pathologists and Microbiologists Association (POPMA) catalyzed a paradigm shift. Emerging as the first and only national platform exclusively for practicing oral pathologists, POPMA launched an unwavering campaign to secure statutory, professional, and institutional recognition of MDS Oral Pathology specialists in diagnostic roles across India.

This article documents that journey—of advocacy, resilience, and a vision where oral pathologists stand as rightful stakeholders in India's diagnostic and clinical ecosystem.

1. Foundations of Competence: The Curriculum Speaks

POPMA's advocacy is not based on aspiration—it is rooted in evidence, competency, and curriculum.

According to the Dental Council of India's Revised MDS Course Regulations (2007, updated 2017), an MDS in Oral Pathology is:

"Trained in diagnosis of oral and maxillofacial diseases through histopathology, cytology, hematology, clinical pathology, microbiology, serology, and clinical biochemistry."

This curriculum arms oral pathologists with:

- Microscopic diagnostic skills (routine, special, and immunohistochemical stains)
- Competency in hematology and clinical pathology
- Proficiency in microbiological and biochemical diagnostics relevant to oral/systemic diseases
- Understanding of lab quality assurance, biosafety, and reporting standards

Thus, the MDS program produces comprehensive diagnostic professionals who are trained to function as laboratory consultants and signatories, especially in dental, head-and-neck, cancer, and infectious disease domains.

Yet, despite this formal training, regulatory frameworks often fail to list MDS (Oral Pathology) in recruitment or lab signatory rules—a gap POPMA was determined to close.

2. Early National-Level Recognition: The NABL Breakthrough (2018)

The first institutional breakthrough came in 2018, when the National Accreditation Board for Testing and Calibration Laboratories (NABL) issued a landmark notification:

MDS in Oral Pathology is recognized as a qualified category for authorized signatory in defined areas.

Specifically, NABL allowed Oral Pathologists to sign reports for:

- Histopathology & Cytopathology of oral and maxillofacial specimens
- Basic hematological investigations relevant to dental and maxillofacial care (e.g., hemoglobin, CBC, ESR, BT/CT)

This notification—dated 7th May 2018—validated the clinical role of oral pathologists for the first time in India's laboratory regulatory ecosystem. It set a precedent for further regulatory recognition, later reinforced by DCI's RTI replies confirming that:

A dentist with MDS in Oral Pathology can perform all procedures listed in the curriculum.

3. POPMA's Formal Constitution and Strategic Mission (2023 Onwards)

POPMA was born in 2023, amidst growing frustration among oral pathologists over limited
opportunities and lack of formal recognition.

Its foundational aims included:

- Statutory recognition of MDS Oral Pathology as an eligible qualification for reporting and signatory status.
- Inclusion in recruitment norms across government/private pathology labs, hospitals, research centers, and cancer registries.
- Professional dignity for oral pathologists as equivalent contributors in diagnostics and lab governance.
- Pan-India unification of practicing professionals under one legal platform.

POPMA was registered under the Haryana Registration and Regulation of Societies Act, 2012 and applied for national recognition through NGO Darpan (Govt. of India), ISO-9001 Certification, and PAN/TAN under Indian taxation laws.

4. The National Advocacy Movement: MoHFW and DCI Engagement (2024–2025)

Between July 2024 and March 2025, POPMA initiated formal representations to the Ministry of Health & Family Welfare (MoHFW), Government of India, enclosing:

- Curriculum excerpts and DCI notifications
- NABL signatory approvals
- RTI responses from dental colleges and government labs
- Case examples of oral pathologists already signing histopathology, microbiology, and hematology reports
- Comparative charts showing international models (e.g., USA, Australia) where oral pathologists serve as lab consultants

In February 2025, POPMA received an official communication from MoHFW:

✅ Recognition under Review
The National Council for Clinical Establishments (NCCE) is now actively reviewing POPMA's request to include MDS Oral Pathologists as authorized signatories under the Clinical Establishments (Central Government) Rules, 2012.

✅ DCI Referral for Recruitment Norms
POPMA's representation was also forwarded to the Dental Council of India (DCI) for framing guidelines to include MDS (Oral Pathology) in recruitment eligibility for lab and research posts.

This is the first-ever formal acknowledgment by the Union Government of the collective
representation by oral pathologists—a moment of historic importance.

5. Parallel State-Level Action: Haryana's Transformative Leadership

While national processes moved forward, POPMA pursued simultaneous state-level engagement, starting with Haryana.

Key actions included:

- Representations to the Chief Minister, Health Minister, and Directorate of Health Services
- Formal request for recognition of MDS Oral Pathologists under State Clinical Establishments Rules
- Submission of RTI proof of oral pathologists already signing reports in PGI Rohtak and state dental colleges

🤝 Support from APP Haryana

The Association of Practicing Pathologists (APP Haryana) responded with rare solidarity. In an official communication, they:

Supported the inclusion of MDS (Oral Pathology & Microbiology) as signatories for oral and maxillofacial investigations.

This collaboration marked a significant interdisciplinary consensus between MD (Pathology) and MDS (Oral Pathology) professionals—eliminating any perceived "turf war" narrative.

Discussions are underway to include oral pathologists in State Lab Licensing Rules, potentially making Haryana the first state to implement clinical parity.

6. Building Awareness and Institutional Presence

POPMA's mission extends beyond legal recognition. It aims to educate, empower, and unify oral pathologists across India.

Key initiatives include:

- Regular webinars on clinical diagnostics, reporting protocols, and lab compliance
- POPCON 2025 – India's First National Conference of Practicing Oral Pathologists (Oct 4–5, 2025)
- Launch of POPMA e-magazine (The Oral Pathologist™)
- YouTube lectures, Zoom study clubs, and Telegram/WhatsApp forums
- Membership drives across over 20 Indian states with structured committees

Through these platforms, POPMA promotes quality standards, CPD, and interdisciplinary collaboration, especially in oral cancer diagnostics, salivary biomarkers, and infection pathology.

7. Vision 2026: What Lies Ahead

POPMA envisions:

- Statutory amendments in both Central and State Clinical Establishment Rules to explicitly list MDS Oral Pathology as eligible for lab signatory.
- Recruitment parity in public service commissions, AIIMS/JIPMER/PGIMER-type institutions, ICMR labs, cancer boards, and ESIC setups
- ISO, NABL, and DCI synergy for streamlined lab licensing involving oral pathologists
- Establishment of Centre for Oral Pathology & Maxillofacial Diagnostics (C-OPMD) as national excellence hubs
- Policy inputs to FSSAI, MoHFW, NMC, and DCI on diagnostic roles and public health integration

Conclusion: From Margins to Mandates

What started as a frustrated whisper in faculty rooms and WhatsApp groups has become a national campaign for justice, parity, and professional identity.

POPMA's strategic, evidence-driven, and legally sound approach has transformed the narrative—oral pathologists are no longer pleading for opportunities; they are claiming their rightful space in India's diagnostic ecosystem.

This article salutes every oral pathologist who stood up, spoke out, and stayed united. The movement is real. The progress is visible. And the future—where oral pathologists are acknowledged as clinicians, diagnosticians, and thought leaders—is now within grasp.

Let us remember: The microscope is our tool, but advocacy is our voice. And POPMA is our collective will to be heard.

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General Dentistry- (Treatments Available)

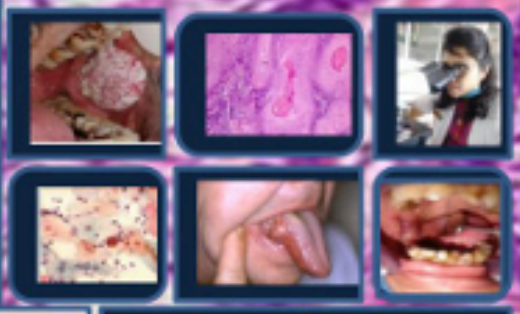
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Attachments:

- *Attached to Chittaranjan National Cancer Institute (Head and Neck OncoPathology)*
- *Junior Consultant, Oral Histopathology in The Practice of Oral & Maxillofacial Pathology, Durgapur with Dr. Abhishek Banerjee*
- *Associated with Dr.Kabita Chatterjee in Oral Pathology cases*
- *Apollo Dental Clinic, New Alipore*
- *Apollo Dental Clinic, Santoshpur*
- *Consultant in other clinics*
- *Formerly Attached to Meherbai Tata Memorial Hospital, Jamshedpur*
- *Ex-Research Associate - GNRC Hospital, Barasat*







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&
A Dedicated Oral and Maxillofacial Pathology Centre

INDIA'S TOP NEWS MAKERS 2024-25
OF HEALTHCARE INDUSTRY

They say in this world, change is the only constant! Keep evolving and keep upgrading!

"The oak fought the wind and was broken, the willow bent when it must and survived." It reminds me that resilience isn't about being unyielding, but about adapting and enduring through life's storms.

Resilliance and a committet dedication towards one's goal will always sail you through the ups and downs of life.



VARUN JAIN

Director

MB Plastic Industries

Can you tell us about your journey into healthcare/MedTech? What inspired you to choose this path?

MB started its humble beginning in the late 1980s, turning reveue by renting out injection moulding machines to fmcg and automobile industries. It started as a cottage industry with just two machines with

lendings from bank. It was not untill 2004 that an entry into the diagnostic industry happened with petridish as product. Thats how the company's logo and brand was formed!

What were the key milestones in your career that shaped your vision for healthcare?

MB started by producing 2000 petridishes a day in 2004. By 2006 new machines were added and test tubes were added into the profile. In 2009, we started the production of blood collection tubes, producing approximately 4000 tubes a day. Since that day, the company has never looked back. Producing over 6 lac BCTs a day under the brand Hemo Tube And Hemovac plus, and with an array of products such as centrifuge tubes, histopathology cassettes, specimen containers, cold transport solutions etc being produced on over 20 moulding machines. MB now produces approximately 2million units of diagnostic products a day!

The growth hasnt stopped. Being a bootstrap company, MB now has over 350 distributors in India with inhouse facilities such as ultrasonic welding, rapid prototyping, sterilisation, printing and other facilities and exports to over 9 countries worldwide.

Having an indepth knowledge in plastics, innovation has always been an upfront focus for us. Being educated with a degree of Mechanical engineering and a masters in polymers, the vision to shape the healthcare industry by providing a rich balance of price to quality as always been the driving force behind the success.

How has your leadership style evolved over the years, and what key lessons have you learned?

When i joined the family business, the focus was always being hands on. The hands on approach gave me an apportunity of working with my employees. This gave me valuable insights of working with the employees rather than just getting work done from them. With a team of about 200 employees and a very low employee turnover, we at MB work together as a family with a common goal. A goal to do the best and to be the best. The last 25 years have evolved for us to be more inclusive, and a much more accomodating organisation focussing on skill development rather than just skilled hiring.

What specific leadership strategies or decisions set you apart in the healthcare landscape this year, and how do you envision continuing this momentum into 2025?

Giving a free hand to the employees to let them make decicions. To nurture the habit of new idea formation by way of encouraging thoughts and taking calculated risks. To try and inculcate the habit of deploying innovative and out of the box initiatives have been a few leaderhip strategies.

As the company grows, we will keep these above approach to be the few of the indispensible core qualities around which our journey will span.

Can you share any groundbreaking research, products, or policy changes you spearheaded that have gained widespread attention or adoption?

India sees a huge shortcoming in the transport of samples from one place to another. Being one of the largest countries to have adopted the system of home collection of samples and paried with extreme climaltic conditions, a proper system of transporting samples should be in place. To fill this gap we at MB have introduced an innovative product Hemo Porter, thats a combination of cooling plus securing the blood samples while being transported. It add to the aesthetics of the transportation while keeping the sample cool and secure. The product also includes an optional data logging with teperature and position logging system for added control. Many more such products will be added to this vertical soon.

Can you share a quote or mantra that has guided you through challenges and successes?

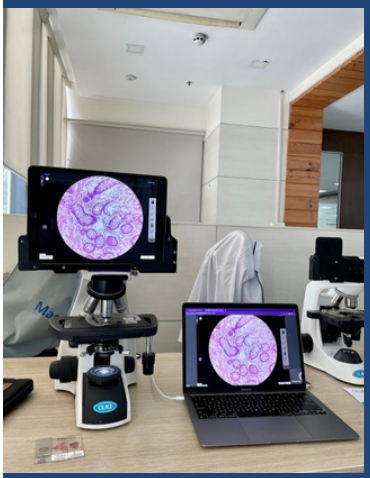
"The oak fought the wind and was broken, the willow bent when it must and survived."

It reminds me that resilience isn't about being unyielding, but about adapting and enduring through life's storms.





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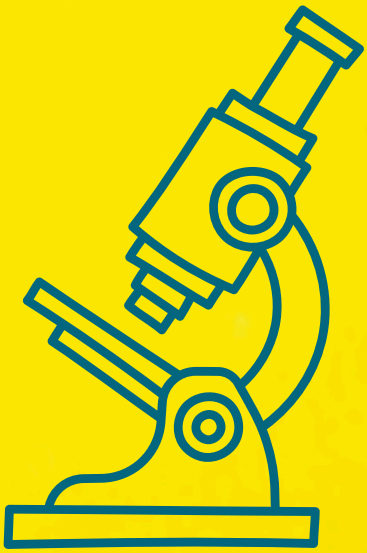
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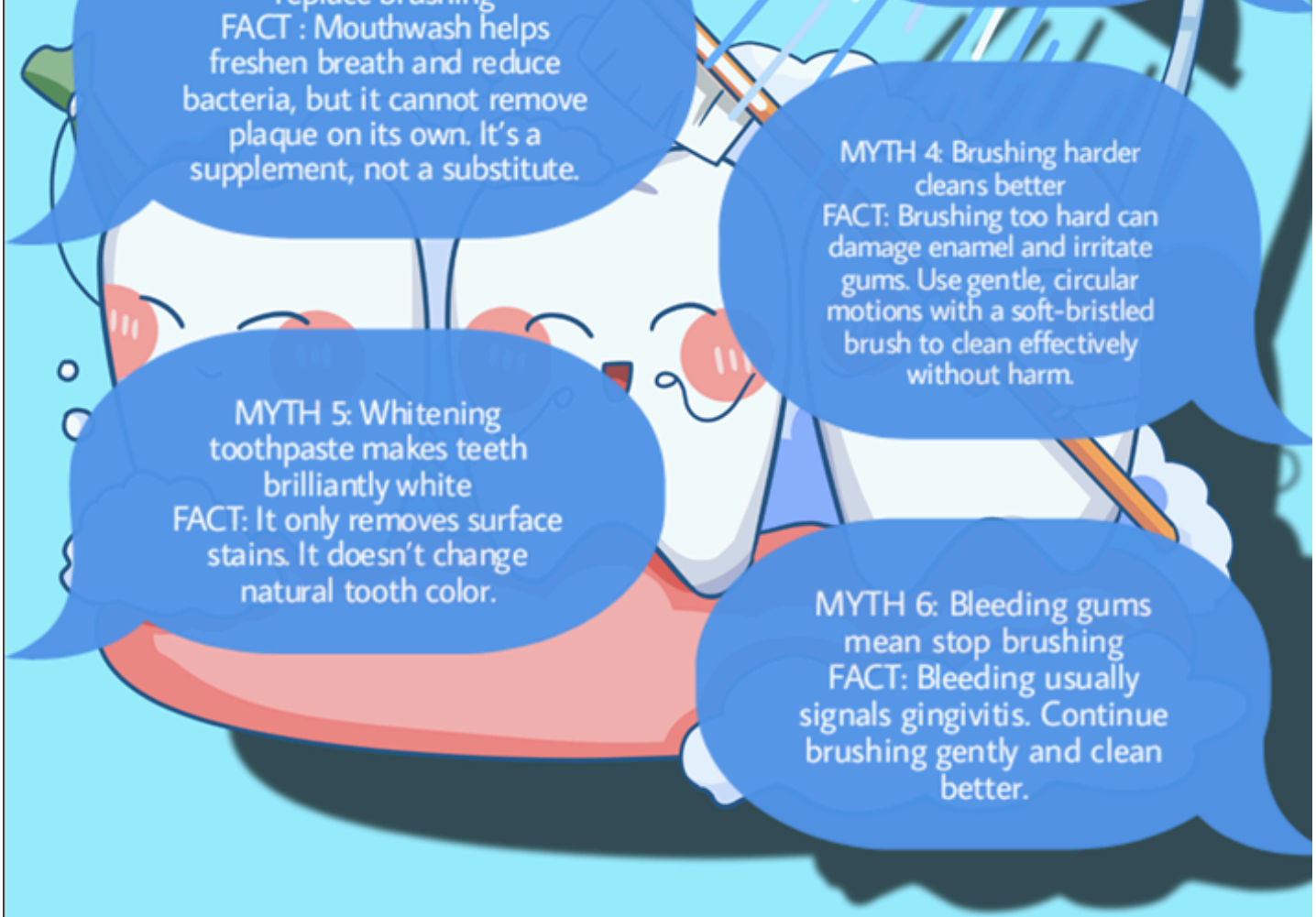


Myths of Brushing

MYTH 1: "Morning brushing is only for fresh breath."
FACT : Fresh breath is a benefit, but the main reason is to remove overnight bacteria and protect tooth enamel.

MYTH 2: "If I brush at night, I don't need to brush in the morning."
FACT : Even with good night brushing, bacteria still grow while you sleep. Skipping morning brushing increases plaque buildup.

MYTH 3:Mouthwash can replace brushing
FACT : Mouthwash helps freshen breath and reduce bacteria, but it cannot remove plaque on its own. It's a supplement, not a substitute.



MYTH 4: Brushing harder cleans better
FACT: Brushing too hard can damage enamel and irritate gums. Use gentle, circular motions with a soft-bristled brush to clean effectively without harm.

MYTH 5: Whitening toothpaste makes teeth brilliantly white
FACT: It only removes surface stains. It doesn't change natural tooth color.

MYTH 6: Bleeding gums mean stop brushing
FACT: Bleeding usually signals gingivitis. Continue brushing gently and clean better.

Guru Nanak Dev Dental College, Sunam

Submitted By :-
Ojasvi

Submitted to :-
Dr. Baushiva Kumar


Silent Heroes of Diagnosis
– ORAL PATHOLOGISTS
ODONTOGENIC CYSTS
DNA ANALYSIS
BIOPSY
TISSUE HISTOLOGY
ORAL CARCINOMA
SAMPLE
FORENSIC ODONTOLOGY
AGE ESTIMATION
– TASMIYA FATHIMA



Dr Priya N S

BDS, MDS PHD (Oral and Maxillofacial Pathology)
Professor V S Dental College & Hospital, Bangalore

Embracing the Elegance: My Journey as an Oral Pathologist

I was truly clueless when the moment arrived to choose my MDS, unsure of which path would define my future, and, in the end, all unfolded exactly as it was meant to be. I believe my destiny was to become an oral pathologist—a path that has allowed me to grow differently–professionally, intellectually, and personally.

In those learning days of my post-graduation, the microscope was basically my best buddy. I spent so much time with it that we practically had a friendship and I was always eager to spend more time exploring the fascinating world it revealed. To learn effectively, treat the microscope as your mentor: observe carefully, focus patiently, and dedicate yourself fully to every slide. I strongly feel, slides are opportunities, and they will teach you what no textbook can.

The consistent habit of staying back in the library became a cornerstone of my learning. Those dedicated hours allowed me to delve deeper into textbooks, journals, and research articles, fostering discipline and shaping my growth as an oral pathologist. Due to this consistency, the subject of oral pathology was never a burden; on the contrary, I genuinely enjoyed every moment of learning.

Staying updated with technology strengthens our skills. Mastering power point and image analysis software, sharpened my skills and gave me greater confidence in my work. Even today, the journey of learning continues, and artificial intelligence offers new opportunities to enhance our understanding, refine diagnostics, and stay at the forefront of oral pathology.

Attending general pathology conferences and engaging in discussions with general pathologists is an added bonus and self-learning through digital platforms has also been an invaluable resource in my academic journey. Observing the presentations and communication styles of others offers a powerful opportunity to learn. It helped me refine my own skills. I made sure to attend most of the conferences and conventions which offered me exposure, insights, and learning that greatly enriched my professional journey.

An equally meaningful dimension of my work lies in my love for teaching, a role that extends far beyond diagnosis. My love for teaching grew naturally and Oral pathology to me is not only a discipline of scientific observation but it created a platform for teaching and also helped me fine-tune my personality as an educator, shaping my communication, patience, and ability to guide students with confidence.

The mantra I have followed in teaching is simple: simplify complex concepts and teach with clarity. My goal has always been to make learning accessible, engaging, and meaningful for students. A strong bond with students has been one of the most rewarding aspects of teaching. Building trust and connection brought profound sense of fulfilment and inner peace to me.

Having the opportunity to pursue a PhD was a pivotal moment in my career, allowing me to deepen my expertise and engage in meaningful research. Though my core journey was in oral pathology, the PhD became an enriching add-on that opened new avenues for professional growth. Beyond technical expertise, the PhD journey instilled patience, perseverance, and a habit of lifelong learning.

Taking responsibility for reporting cases individually was a turning point in my journey. It strengthened my diagnostic skills, enhanced my decision-making, and significantly boosted my confidence as an oral pathologist. I strongly believe that the more shades of pink and blue observed under the microscope, the greater the competence developed.

We oral pathologists may not see patients directly, but our diagnoses shape their care. This demands honesty and integrity in every aspect of learning and practice. Oral pathology has instilled in me to think outside the box and the habit of constantly asking, 'Why not this?' This mindset drives to learn and understand better.

The emotional toll is significant while diagnosing cancer cases specifically. But it reinforces the importance of diligence and empathy in helping patients through accurate and timely diagnoses. I once marvelled at lymph node involvement during cancer diagnosis and now, I feel empathy for the patient behind every diagnosis. This is the transformation I have experienced over the years: from viewing cases purely as scientific challenges to approaching each diagnosis with empathy and responsibility. Today, before signing out a case, I offer a silent prayer for the patient, acknowledging the human life behind every slide.

When I found myself the chosen one to experience cancer, fear did not overwhelm me. I found strength in the same words I had often used to console my patients. It was my patients, the ones I had counselled through their battles who taught me acceptance. Their strength became mine when I faced the same journey. I stood before my students with no hair on my head, but with a heart full of courage. Those classes became some of the most meaningful moments of my career. This is the power of my profession, it shapes not just professionals, but stronger, wiser human beings.

When I look back, one truth stands out clearly: the institution I have had the privilege to work in has nurtured me from a postgraduate student to a professor. I have grown professionally and personally within its walls, and I truly consider it my second home.

To sum it up, let passion fuel your work, curiosity drive your growth, and enthusiasm light the path ahead. Let's heartily celebrate the richness of oral pathology, embracing its elegance, depth, and the joy it brings to learning, teaching, and patient care.



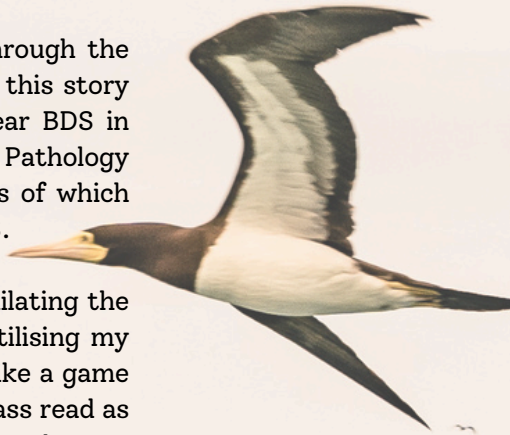




Dr. Nageshwar Iyer

BDS, MDS (Oral and Maxillofacial Surgery, Bombay University)
Consultant Oral and Maxillofacial Surgeon, Savitri Krishan Memorial Smile Centre, Yamunanagar

My Journey Through Oral and Maxillofacial Pathology



It seems odd that a maxillofacial surgeon is describing transit through the field of oral and maxillofacial pathology. But that's the intrigue in this story that started way back in the early 80's. As a student of 3rd year BDS in Government Dental College & Hospital, Bombay, the subject of Oral Pathology & Microbiology occupied a special chamber in my heart, the seeds of which were sown in Oral Anatomy, Histology & Physiology in 2nd year BDS.

Spending extensive time and energy deep within the theory, assimilating the basis and rationale of each step in the microscopic inquest and utilising my sketching and painting skills in making the practical journal more like a game to my liking, became a routine. I knew that at least no one in my class read as many books on the subject as I used to. I am glad to say, even today my personal home library proudly flaunts the rare 2 volume set of books on Oral Pathology by Thoma. Practical examinations in both the subjects of Oral Anatomy, Histology & Physiology in 2nd year and Oral Pathology & Microbiology (as it was called those days) in 3rd year were held in Nair Dental College & Hospital, Bombay. It was a combination of thrill and disappointment that both subject journals were retained by my external examiner, Dr. Brave (journals used to be assessed and returned to the students after the practical examinations, but I didn't get mine back.). (Lesson learnt, immerse yourself completely in whatever you are doing.)

My craze for surgery led me to become an oral & maxillofacial surgeon. The interest and detailing I gathered in oral pathology only served to make surgery more proficient. Even during my post-graduation days, I was a daily visitor to the department of oral pathology. It was from one of these days that I would like to describe an anecdote. It stemmed from an unusual microscopic picture of a biopsied oral granuloma. The image seen did not resemble any tissue. Only because I was comparatively fresh in the knowledge of Botany, I could make out the histology of plant tissue. We all realised it was the cross section of a toothpick splinter that had caused the foreign body granuloma. (Lesson learnt, nature is filled with surprises. Keep your eyes, ears and minds wide open.)

Being a surgeon, I could build up my own museum of specimens of entities- large and small that I had removed. The variety and extent of possibilities that nature presented with made me realise that we are all but only a drop in the ocean of knowledge. That's when I also understood that a "case report" is not something for which I can claim credit, it only serves to educate us and bring us closer to nature. (Lesson learnt, keep doing what you need to, let nature reward you.)

After a gap of almost a decade of completing my education, I got a chance to teach in a prestigious college in North Indiain the department of Oral & Maxillofacial Surgery. To my awe I was given the duties of teaching 3rd BDS students the subject of Oral Pathology & Microbiology. That time I was told that there was no separate department of Oral Pathology those days in north Indian dental colleges. That ignited and revived the pathologist in me. While teaching in practical laboratory, I saw there were only about 22 slides of 22 pathologies, those purchased from dealers. Students saw more outside the objective lens than into the eyepiece of the microscope and identified the diagnosis from the shape of the stained section on the slide instead of their histology. I had to draw upon the resources available in the department to collect slides of specimen processed from biopsies. I took pride in increasing the collection of slides to more than 250, many of each pathology. I sketched and coloured microscopic pictures of pathologies exactly as seen under the microscope on chart papers which I placed alongside the microscopes in practical classes. It was an award for me when the first batch of students I taught could immaculately identify all slides from their microscopic picture when they appeared for their practical examinations. It included 2 slides from a fresh biopsy, ones that the students had never seen before the examinations. (Lesson learnt, the more you teach, the more you learn.)



Once when I visited a college as a DCI inspector, I met Dr. Brave, who taught there as a professor. My pleasure was immense. An unimaginable surge of emotions occurred when Brave m'am took out my college days practical journals in Oral Histology and Oral Pathology from her table drawers and told me that she still makes use of them while teaching. (Lesson learnt, sun does shine upon you often).

My meeting the august members of POPMA and of course, Dr. Bhuvan Nagpal is yet one more proof of my good fortune and indebtedness to the subject of Oral Pathology & Microbiology. I take pride in becoming an honorary member and hope I will live up to the expectations of all. (Lesson learnt, the journey continues...)



Knowledge Bank

In this, any member of POPMA who wants to contribute their knowledge and study material (in terms of any unique article, slide, books, any instrument, Advocacy material etc.) to POPMA.

Contributions By The Following Members To Knowledge Bank

1. Dr Divya Uppala – histopathology slides
2. Dr. Arushi Pandey – oral pathology books
3. Dr Bhuvan Nagpal – FNAC/cytopathology, hematology, sputum and histopathology slides
4. Dr. Anuj Kalra – consent to use their labs/diagnostic centres
5. Dr. Priyanka Mittal – consent to use their labs/diagnostic centres
6. Dr. Raman Mittal – consent to use their labs/diagnostic centres
7. Dr. Amber Agarwal – lectures/talk on Microbiology techniques
8. Dr Arvindha Babu – soft copy of books and histopathology slides
9. Dr Arpan Shah – histopathology slides
10. Dr Abhishek Bannerjee – histopathology slides



About The Author

Dr. Bhuvan Nagpal is at the nexus of clinical acumen, academic thought leadership, legal knowledge, and healthcare entrepreneurship. His diversified profession is a unique overlap of specializations that has established him as a pathfinder in oral pathology and laboratory medicine in India.

Dr. Nagpal graduated with a Bachelor of Dental Surgery (BDS) from Manav Rachna Dental College, where he achieved academic excellence in 13 out of 18 subjects. He further studied with a Master's degree in Oral Pathology and Microbiology from JSS University, Mysuru, specializing in head and neck oncopathology. His insatiable appetite for learning drove him to obtain additional qualifications in the form of degrees in Biochemistry, Healthcare Management, Medico-Legal Systems, and Law (LL.B.), in order to finalize his education with a Ph.D. in Pathology and Laboratory Medicine.

Being the Laboratory Director and Senior Consultant Head & Neck Pathology and Clinical Biochemistry at Tohana Manglam Diagnostics, Dr. Nagpal has set gold standards in diagnostic quality, assurance, and reporting. His passion for specialized diagnostics culminated in setting up the Centre for Oral Pathology & Maxillofacial Diagnostics (COPMD™), the first dedicated referral centre for oral biopsy interpretation in the state of Haryana.

Dr. Nagpal's vision transcends clinical practice to professional advocacy. As the Founder-President of the Practicing Oral Pathologists and Microbiologists Association (POPMA), he has led countrywide campaigns for oral pathologists to be recognized as authorized signatories on diagnostic reports, bringing about important policy changes through relentless representations to government authorities and regulatory agencies.

His business skills are reflected in his position as Director of Tohana Manglam Diagnostics LLP, where he has grown quality diagnostic services in rural, semi-urban and urban areas. As Founder-Director of Ravijyoti Medlab & Medico Legal Consultancy (RJML2), he connects laboratory science with medico-legal knowledge, offering essential services from diagnostic audits to litigation assistance.

Dr. Nagpal's passion for education is also reflected in his role as Director of the Academy of Oral Pathology and Laboratory Medicine (AOPLM) and founder of the Gurukul of Oral Pathology Education (GOPE), ventures which educate the future oral diagnosticians using novel pedagogic methods.

As Editor of The Oral Pathologist™, India's sole specialized magazine in the discipline, Dr. Nagpal promotes dialogue between scientific advancement and healthcare policy, enriching professional debate across the country. His remarkable academic record consists of more than 91 peer reviewed research publications, 19 scholarly textbooks, 9 patents and 2 copyrights on oral oncology, oral pathology, clinical diagnostics, and forensic odontology.

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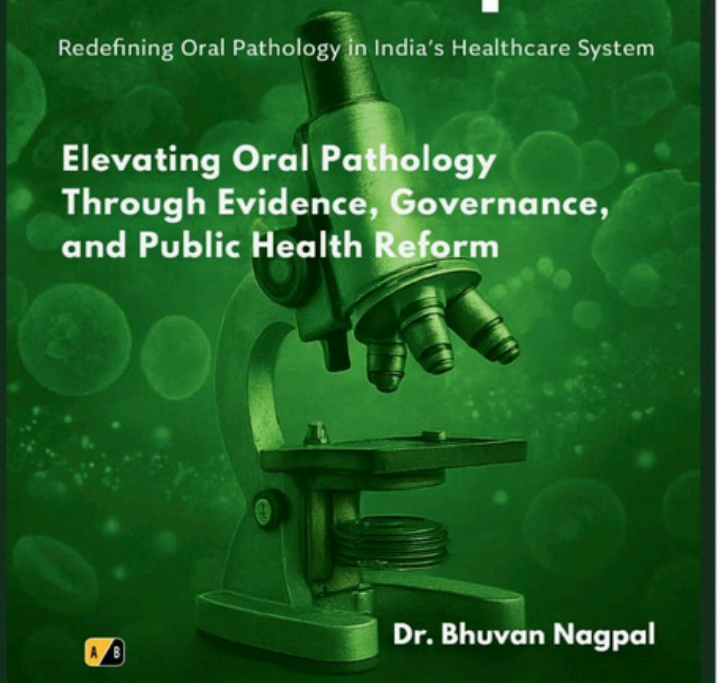
Beyond theMicroscope

Dr. Bhuvan Nagpal

Beyond the Microscope

Redefining Oral Pathology in India's Healthcare System

Elevating Oral Pathology Through Evidence, Governance, and Public Health Reform



Dr. Bhuvan Nagpal

Oral pathology in India is not just a specialty—it is a story. A story of talent that has long waited to be acknowledged. A story of deeply trained professionals working in silence while their findings save lives. A story of resilience, of quiet determination, and of an ever-growing will to be seen, heard, and included. From its academic roots, the specialty has slowly emerged into diagnostic clinics, tumor boards, diagnostic labs, and rural screening programs. Oral pathologists have transitioned from being mere educators to critical contributors in the diagnosis of complex diseases.

This book has chronicled not just a profession, but a transformation. A growing movement powered by the collective strength of those who choose to see deeply, diagnose honestly, and serve faithfully. To every oral pathologist—past, present, and future—this is your story. This is your moment. This is your mandate. And from invisibility, you are rising—into undeniable, unstoppable impact.



Dr. Bhuvan Nagpal stands at the unique crossroads of clinical science, professional advocacy, and healthcare entrepreneurship. A graduate of Manav Rachna Dental College (where he distinguished himself academically), he earned his MDS in Oral Pathology & Microbiology at JSS University, Mysuru, with a specialization in head and neck oncopathology. He further expanded his expertise with postgraduate qualifications in biochemistry, healthcare management, medico-legal systems, and law (LL.B.), culminating in a PhD in Pathology & Laboratory Medicine.

In his role as Laboratory Director and Senior Consultant for Head & Neck Pathology & Clinical Biochemistry at Tohana Manglam Diagnostics, Dr. Nagpal has established new standards of diagnostic precision and ethical practice. His founding of the Centre for Oral Pathology & Maxillofacial Diagnostics (COPMD™) — the first dedicated referral centre for oral biopsy interpretation in Haryana — reflects his commitment to making advanced diagnostic services accessible and high-quality. As Founder-President of the Practicing Oral Pathologists & Microbiologists Association (POPMA™), he leads a nationwide campaign for the statutory recognition of oral pathologists as authorized signatories of diagnostic reports. He also directs the Academy of Oral Pathology & Laboratory Medicine (AOPLM ™) and the Gurukul of Oral Pathology Education (GOPE), pioneering modern pedagogical methods for the next generation of diagnosticians.

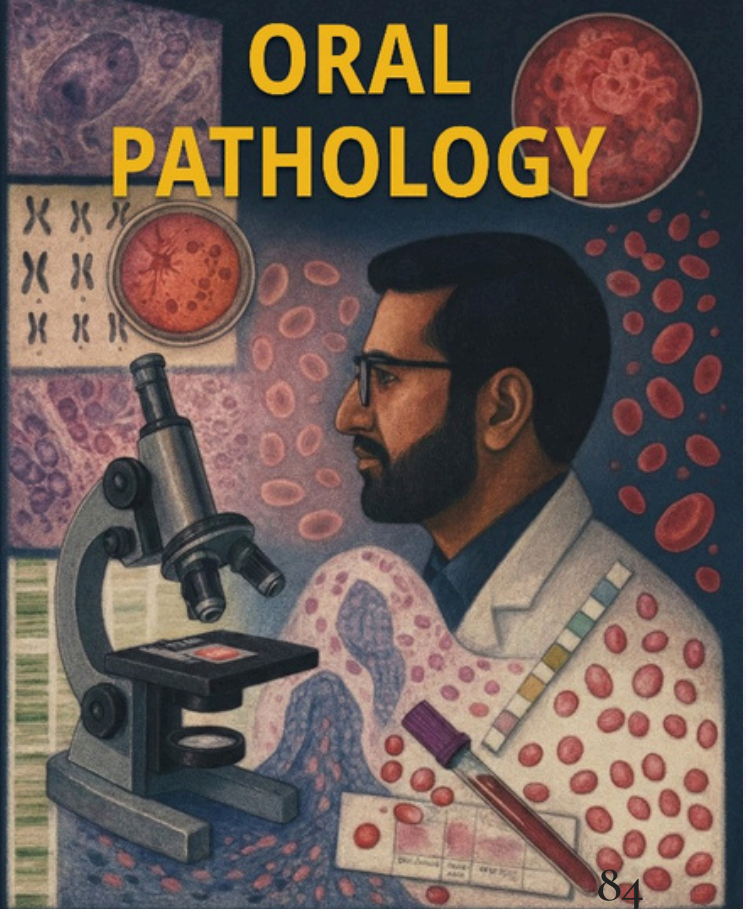
He holds national certifications in laboratory quality systems (ISO 15189:2012/2022), forensic odontology, HIV counselling, infection-control, and embryology-laboratory practices. Recognised among India's "10 Best CXOs of 2024" by Trade Flock, his work exemplifies innovation with purpose in healthcare. Driven by a vision of equitable, integrated, and high-precision diagnostic services, Dr. Nagpal continues to champion the elevation of oral pathology from its peripheral status to a central, acknowledged specialty within Indian healthcare.

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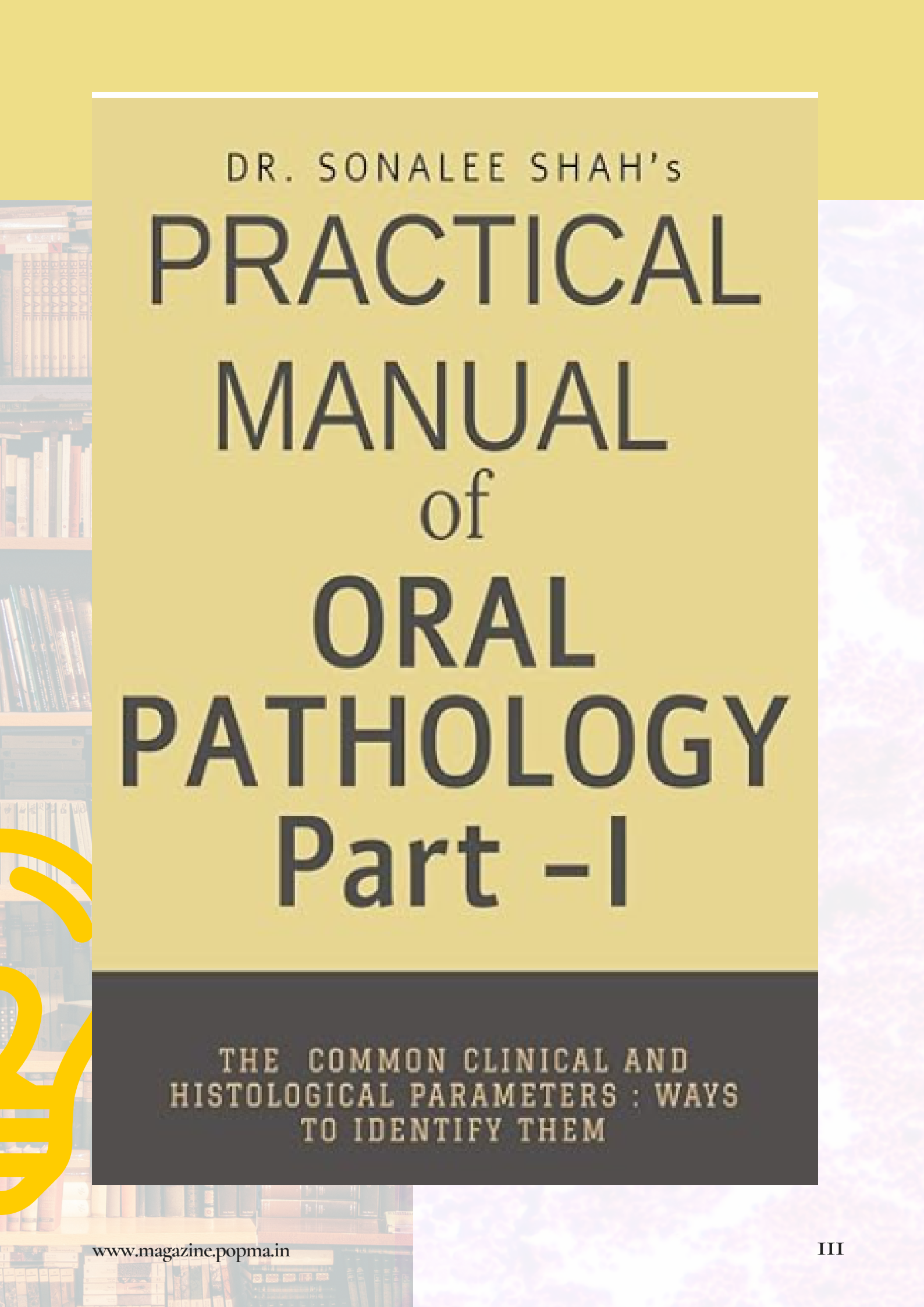
MY TRYST WITH ORAL PATHOLOGY

DR. BHUVAN NAGPAL

MY TRYST WITH ORAL PATHOLOGY



DR. BHUVAN NAGPAL


DR. SONALEE SHAH's
PRACTICAL
MANUAL
of
ORAL
PATHOLOGY
Part -I
THE COMMON CLINICAL AND
HISTOLOGICAL PARAMETERS : WAYS
TO IDENTIFY THEM

A RecordBook for Oral Histology

PRACTICAL ORAL HISTOLOGY MANUAL

Hard tissues to Soft Tissues

Dr.Sonalee Shah

ODONTOGENIC KERATOCYST WITH COMPOUND ODONTOME: A RARE PRESENTATION

JOSHI PS, SANADI A, PATIL S. ODONTOGENIC KERATOCYST WITH COMPOUND ODONTOME: A RARE PRESENTATION. BHARATI VIDYAPEETH J DENT ALLIED SCI 2025;2:112-4. DOI: 10.4103/BVJD.BVJD_13_24

Abstract: An odontogenic keratocyst (OKC) is a noninflammatory developmental cystic lesion of odontogenic origin that tends to penetrate the bone and nearby soft tissues. It also exhibits aggressive clinical behavior and a high recurrence rate. Odontomas are hamartomatous lesions occurring in the oral cavity, which may be either compound or complex, composed of enamel, dentin, and pulp, which resemble a normal tooth. They constitute about 22% of all odontogenic tumors of the jaw. We report a rare instance of a 17-year-old male patient, who was tentatively diagnosed with an odontogenic lesion. The patient complained of facial swelling and pain on the left side of his face for a month and had a histologic diagnosis of OKC associated with an impacted left mandibular lateral incisor and compound odontome. Not many cases of this type are reported in the literature. There is a need to explore the occurrence of such hybrid lesions. Keywords: Compound odontome, Impacted lateral incisor, Odontogenic cyst, Odontogenic keratocyst

Introduction : Odontogenic initially defined by Philipsen in 1956 as an odontogenic cyst with a keratinous epithelial lining. The histological features were later described in 1963 by Pindborg and Hansen. In 1967, Toller proposed that OKC may be considered a benign neoplasm rather than a typical cyst because it aggressively invades the medullary cavities, erodes the underlying tissues, and remains unnoticed by the patient for long time.[1] A thin, uniform lining of parakeratinized stratified squamous epithelium with palisading hyperchromatic basal cells is the hallmark of an odontogenic cyst known as an OKC. The World Health Organization (WHO) classified the same under the odontogenic neoplasm category and named it as keratocystic odontogenic tumor in its 3rd edition of the Classification of Head and Neck Tumours in 2005. However, the WHO redefined it into the cystic category as OKC in its 4th edition of 2017.[2] OKCs have the tendency to recur and show more aggressive behaviour; hence, there is a need to plan an appropriate treatment and management of the patient. Herewith, we report a unique case of OKC with varied clinical and histological findings.

Case report:

17-year-old male patient presented with a complaint of pain and swelling on the left side of his face that had been there for a month. Over time, the swelling had grown to its current magnitude. The patient did not report any history of fever, discharge, trauma, paresthesia, or habits.

In his early years, he underwent surgery to treat cleft lip and cleft palate. Swelling was present on the left side of the face, extending anteroposteriorly from the midline of the upper lip to the tragus of the left ear and superoinferiorly from the zygomatic bone to the left submandibular region [Figure 1a]. The swelling was slightly tender and firmly adherent to the underlying tissues. Intraoral examination revealed a restricted mouth opening, expansion of labial, buccal, and lingual cortical plates, obliteration of the vestibule, and restricted tongue movements. Clinical infections differential diagnosis included like dentoalveolar abscess, space infection, cellulitis, osteomyelitis, and antibioma, as well as noninfectious entities such as odontogenic cysts and tumors, benign or malignant connective tissue tumors, and salivary gland tumors. Orthopantomogram showed a large, solitary, oval, unilocular, well-defined radiolucent lesion with corticated borders in the body of the mandible extending mediolaterally from the mesial aspect of 45 to the bifurcation area of the root of 37 and superoinferiorly from the cervical levels of teeth to the lower border of the mandible. Multiple thin radiopaque septae were seen within the lesion, and also small multiple radiopaque well-defined tooth-like structures (denticles) were noted [Figure 1b]. There was a horizontally placed displaced incisor (impacted 32) at the lower border of the mandible. Incision biopsy revealed an OKC.

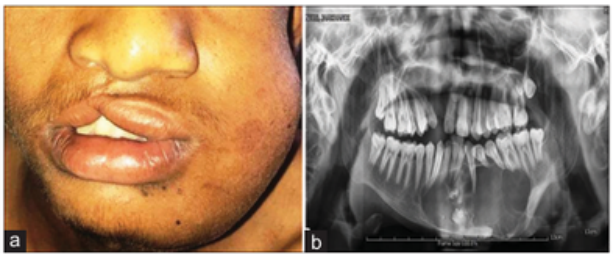


Figure 1: (a) Extraoral photograph of the patient. (b) Orthopantomogram showing a large, solitary, oval, unilocular, well-defined radiolucent lesion with corticated borders and small multiple radiopaque well-defined tooth-like structures (denticles)

The patient had segmental mandibular excision surgery [Figure 2a] and recon plate reconstruction. Histopathological examination revealed a cystic lumen lined by epithelium, which was thin, flat, and wrinkled under scanner view. Under ×10, cystic lining was parakeratotic stratified squamous epithelium, flat, 6–7 layers thick with corrugated surface, basal cells were tall columnar with well-polarized hyperchromatic nuclei having picket-fence or tombstone-like appearance. Epithelium was friable and lifted away from the cystic capsule at places [Figure 2b-d].

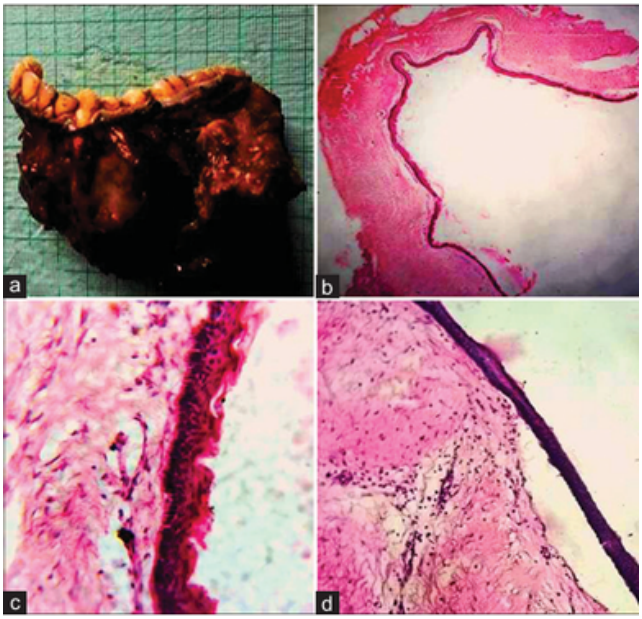


Figure 2: (a) Segmental resected specimen of mandible. (b) Hematoxylin and eosin-stained section showing cystic lumen lined by thin, flat, and wrinkled epithelium (×4). (c) Hematoxylin and eosin-stained section showing typical cystic lining diagnostic of OKC (×10). (d) Hematoxylin and eosin-stained section showing friable epithelium lifted away from the cystic capsule at places (×10)

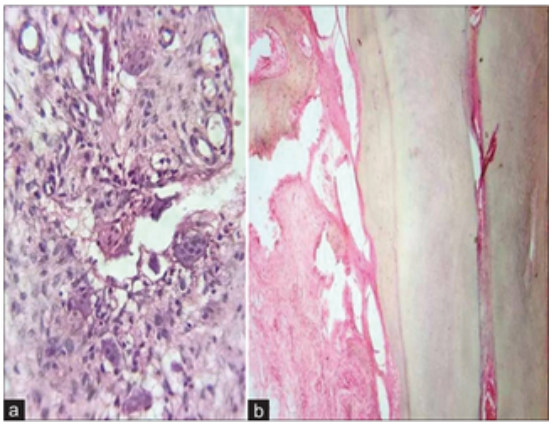


Figure 3: (a) Hematoxylin and eosin-stained section showing foreign body type giant cell reaction (×10). (b) Hematoxylin and eosin-stained section showing hard tissue mass composed of dentinoid and pulp-like tissue resembling a compound odontome (×10)

The connective tissue capsule was dense fibrocollagenous with supporting vasculature, and the deeper area showed a giant cell reaction associated with resorption of the basal bone. The hard tissue mass showed dentinoid, pulp-like tissue resembling a compound odontome [Figure 3a and b]. Histopathological diagnosis was confirmed as OKC with impacted tooth and compound odontome. On the 6-month follow-up visit, the patient had recovered well with no evidence of recurrence [Figure 4a and b].

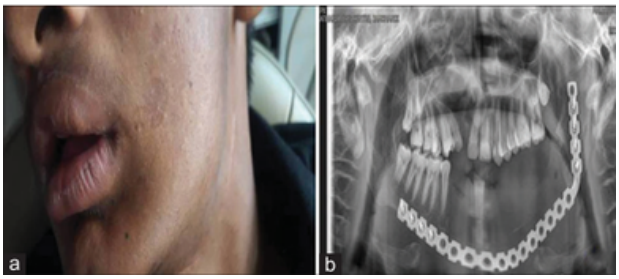


Figure 4: (a) Postoperative patient photograph at 6 months of follow-up. (b) Orthopantomogram showing recon plate in place

Discussion:

OKCs are the third most common cyst of the jaws and make up 10%–20% of odontogenic cysts. With a peak incidence in the 2nd to 3rd decades of life and a 2nd smaller peak among patients aged 50–70 years, they affect a broad spectrum of patients. Male predilection is found to be slight in most studies.[3–5] Compared to the maxilla, they are more frequently found in the mandible, posteriorly in the body, angle, and ascending ramus region.[6]

The most prominent of the molecular and genetic changes found in OKC are those affecting the PTCH1 gene. The tumor suppressor gene PTCH is located on chromosome locus 9q22.3-q31.36–40. Mutations and inactivation of the PTCH gene 1 are linked to basal cell carcinoma and nevoid basal cell carcinoma syndrome, and up to 80% of syndromic and sporadic OKCs have similar abnormalities.[2] Compared to other odontogenic cyst types, OKCs have a stronger correlation with markers like P53, proliferating cell nuclear antigen, and Ki-67.[7] Human papillomavirus has been suggested as a possible etiology due to the presence of koilocytosis in the tumor.[8] Literature search has revealed many case reports of OKCs with impacted tooth.[9–12] Kwon et al.[12] reported a case of OKC with lost cystic lining due to chronic inflammation. This finding was supported by de Paula et al.,[13] who also stated that inflammation causes epithelial proliferation, resulting in the disruption of the typical lining of OKCs.

In our case, though chronic inflammation with foreign body giant cell reaction was noted, the epithelial lining was very much intact. Ng and Siar[14] reported a case of OKC with dentinoid formation. There are three cases of OKC with dystrophic calcifications reported in the literature.[15]

We report here a rare case of OKC with a compound odontome. OKCs are known for recurrence. The incomplete removal of the cystic lining, the thin and friable nature of the epithelial lining, the increased proliferative activity of the epithelium, budding in the basal layer of the epithelium, adhesion to nearby soft tissue, subepithelial split of the epithelium, and remnants of dental lamina epithelium not connected to the original OKC or satellite cyst are some of the reasons for recurrence. Conservative techniques such as marsupialization, enucleation, curettage, dredging, and chemical cauterization are typically used to treat OKCs. Although radical treatment options like resection or marginal resection decrease the likelihood of cyst recurrence, they increase morbidity and deformity of the jaw. Definitive diagnosis of OKC on a clinical and radiographic basis alone is not possible; therefore, cystic lesions of the jaws should be enucleated and microscopically examined for accurate diagnosis. The surgeon determines the best course of treatment for OKC based on the clinical and histological characteristics. Long-term monitoring is crucial for handling potential issues like lesional recurrence.

References:

1. Rajendran R, Shivpathasundharam B, editors. Shafer's Textbook of Oral Pathology. 7th ed. New Delhi: Elsevier; 2012. p. 263-5.
2. Speight P, Devilliers P, Li TJ, Odell EW, Wright JM. Odontogenic keratocyst. In: WHO Classification of Head and Neck Tumours. 4th ed. Lyon, France: IARC Press; 2017. p. 235.
3. el-Hajj G, Anneroth G. Odontogenic keratocysts – A retrospective clinical and histologic study. Int J Oral Maxillofac Surg 1996;25:124-9.
4. Boffano P, Ruga E, Gallesio C. Keratocystic odontogenic tumor (odontogenic keratocyst): Preliminary retrospective review of epidemiologic, clinical, and radiologic features of 261 lesions from University of Turin. J Oral Maxillofac Surg 2010;68:2994-9.
5. Guo YY, Zhang JY, Li XF, Luo HY, Chen F, Li TJ. PTCH1 gene mutations in Keratocystic odontogenic tumors: A study of 43 Chinese patients and a systematic review. PLoS One 2013;8:e77305.
6. Ba K, Li X, Wang H, Liu Y, Zheng G, Yang Z, et al. Correlation between imaging features and epithelial cell proliferation in keratocystic odontogenic tumour. Dentomaxillofac Radiol 2010;39:368-74.
7. González-Alva P, Tanaka A, Oku Y, Yoshizawa D, Itoh S, Sakashita H, et al. Keratocystic odontogenic tumor: A retrospective study of 183 cases. J Oral Sci 2008;50:205-12.
8. Makowski GJ, McGuff S, Van Sickels JE. Squamous cell carcinoma in a maxillary odontogenic keratocyst. J Oral Maxillofac Surg 2001;59:76-80.
9. Vencio EF, Mota A, de Melo Pinho C, Dias Filho AA. Odontogenic keratocyst in maxillary sinus with invasive behaviour. J Oral Pathol Med 2006;35:249-51. 10.
10. Costa Carvalho Silva G, Carvalho Silva E, Santiago Gomez R, Couto Vieira T. Odontogenic keratocyst in the maxillary sinus: Report of two cases. Oral Oncol Extra 2006;42:231-4. 11.
11. Cakur B, Miloglu O, Yolcu U, Göregen M, Gürsan N. Keratocystic odontogenic tumor invading the right maxillary sinus: A case report. J Oral Sci 2008;50:345-9. 12.
12. Kwon HI, Lim WB, Kim JS, Ko YJ, Kim IA, Yoon SJ, et al. Odontogenic keratocyst associated with an ectopic tooth in the maxillary sinus: A report of two cases and a review of the literature. J Pathol Transl Med 2011;45:S5-10. 13.
13. de Paula AM, Carvalhais JN, Domingues MG, Barreto DC, Mesquita RA. Cell proliferation markers in the odontogenic keratocyst: Effect of inflammation. J Oral Pathol Med 2000;29:477-82. 14.
14. Ng KH, Siar CH. Odontogenic keratocyst with dentinoid formation. Oral Surg Oral Med Oral Pathol Oral Radiol Endod 2003;95:601-6. 15.
15. Naveen F, Tippu SR, Girish K, Kalra M, Desai V. Maxillary keratocystic odontogenic tumor with calcifications: A review and case report. J Oral Maxillofac Pathol 2011;15:295-8.

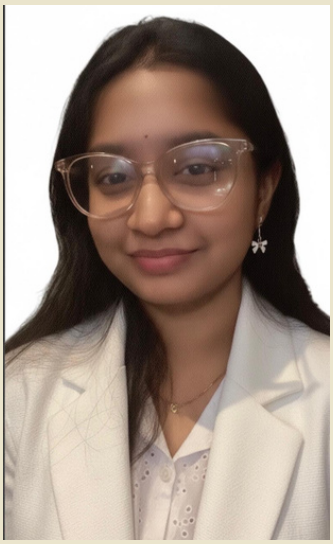
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Benefits of Cryofreezing in Premalignant and Malignant Oral Tumours

Ekgrita Gera, 3rd BDS

Introduction Oral premalignant lesions like leukoplakia, erythroplakia, and oral submucous fibrosis have the potential to progress into cancer if not managed early. Early detection and conservative treatment options are therefore essential. Cryofreezing (cryosurgery) is a minimally invasive technique that uses extreme cold to destroy abnormal tissue and has shown excellent success in managing various premalignant and superficial malignant lesions of the oral cavity.

It is safe, simple, cost-effective, and well-tolerated by patients [1]

How Cryofreezing Works (Mechanism) Cryotherapy works by rapidly reducing the temperature of tissues using liquid nitrogen or other cryogens.
This leads to:
• Ice-crystal formation inside and outside cells → causing cell rupture
• Ischemia due to blood vessel blockage
• Apoptosis of abnormal tissue
• Stimulation of local immunity, which helps prevent recurrence [2,3]

These mechanisms collectively destroy dysplastic or malignant cells while preserving surrounding healthy tissue. ——— Indications: Premalignant & Superficial Malignant Tumours A. Premalignant Lesions Cryofreezing is effective for:
• Leukoplakia
• Erythroplakia
• Oral lichen planus
• Oral submucous fibrosis (selected areas) Supported by recent reviews and clinical trials (2020–2024) [4,5].

B. Superficial Malignant Tumours It is also useful for early or superficial malignancies where the lesion is well-defined and not deeply infiltrating, such as:
• Carcinoma in situ
• Verrucous carcinoma
• Superficial well-differentiated squamous cell carcinoma Clinical studies demonstrate success when surgical margins are not deeply involved [6,7].

These lesions respond well because cryotherapy destroys surface abnormal cells with minimal scarring and functional impairment.
Armamentarium for Cryosurgery:
Cryosurgery requires simple and portable equipment, making it ideal for dental and rural setups. Common instruments include:
1. Cryogens
• Liquid nitrogen (−196°C) — most widely used
• Nitrous oxide
• Carbon dioxide
2. Delivery Systems
• Cryogun / Cryospray unit – for direct spraying
• Cryoprobes – metal probes chilled by circulating cryogen
• Dipstick / cotton-tip applicator – simple contact freezing
3. Safety & Supporting Items
• Insulating petroleum jelly
• Saline irrigation
• Suction
• Gloves, masks, protective eyewear



These are the standard armamentarium mentioned in cryosurgery guidelines [8]

Advantages of Cryofreezing
• Minimally invasive with little bleeding
• Can be done chairside
• Low postoperative pain
• Excellent healing with minimal scarring
• Preserves function, especially important in oral cavity
• Safe for medically compromised patients
• Low recurrence rates in superficial lesions [2,6]

Limitations
• Not ideal for deeply infiltrating carcinomas
• No biopsy specimen is obtained during freezing
• Requires multiple sessions for larger lesions
• Limited control over depth of freeze [3,7]

Recent Advances (2020–2024)
• Cryo-immunology: freezing triggers immune activation, helping reduce recurrence [5].
• Image-guided cryotherapy: ultrasound and optical imaging help determine depth and margins [9].
• Combined therapy: studies show cryotherapy + topical agents (like diclofenac or imiquimod) enhances outcomes in dysplastic lesions [4].
• Nanotechnology-assisted freezing is being explored experimentally for precise cell destruction [9].

These upgrades are making cryotherapy more predictable, safer, and highly effective.

Conclusion Cryofreezing is an effective, minimally invasive, and patient-friendly method for treating oral premalignant lesions as well as selected superficial malignant tumours like verrucous carcinoma and carcinoma in situ. Its simplicity, safety, low cost, and good cosmetic outcomes make it a valuable tool in modern dental practice. With recent advancements and growing evidence from 2020 onwards, cryotherapy continues to strengthen its position as a reliable treatment option in oral oncology.

References:
1.Farah CS, McCullough MJ. Australian Dental Journal. 2008.
2.Bansal M et al. J Clin Diagn Res. 2014.
3.Pogrel MA et al. J Oral Maxillofac Surg. 1990.
4.Lin PY et al. Journal of Oral Pathology & Medicine. 2021.
5.Al-Maweri SA et al. Oral Diseases. 2022.
6.Lee MH. Korean Assoc Oral Maxillofac Surg. 2013.
7.Suresh R et al. Oral Oncology Reports. 2020.
8.Patel P et al. Clin Oral Investigations. 2021.

Dentistry — A Blend of Science and Art

Karandeep Singh
BDS Fresher, GNDDC Sunam

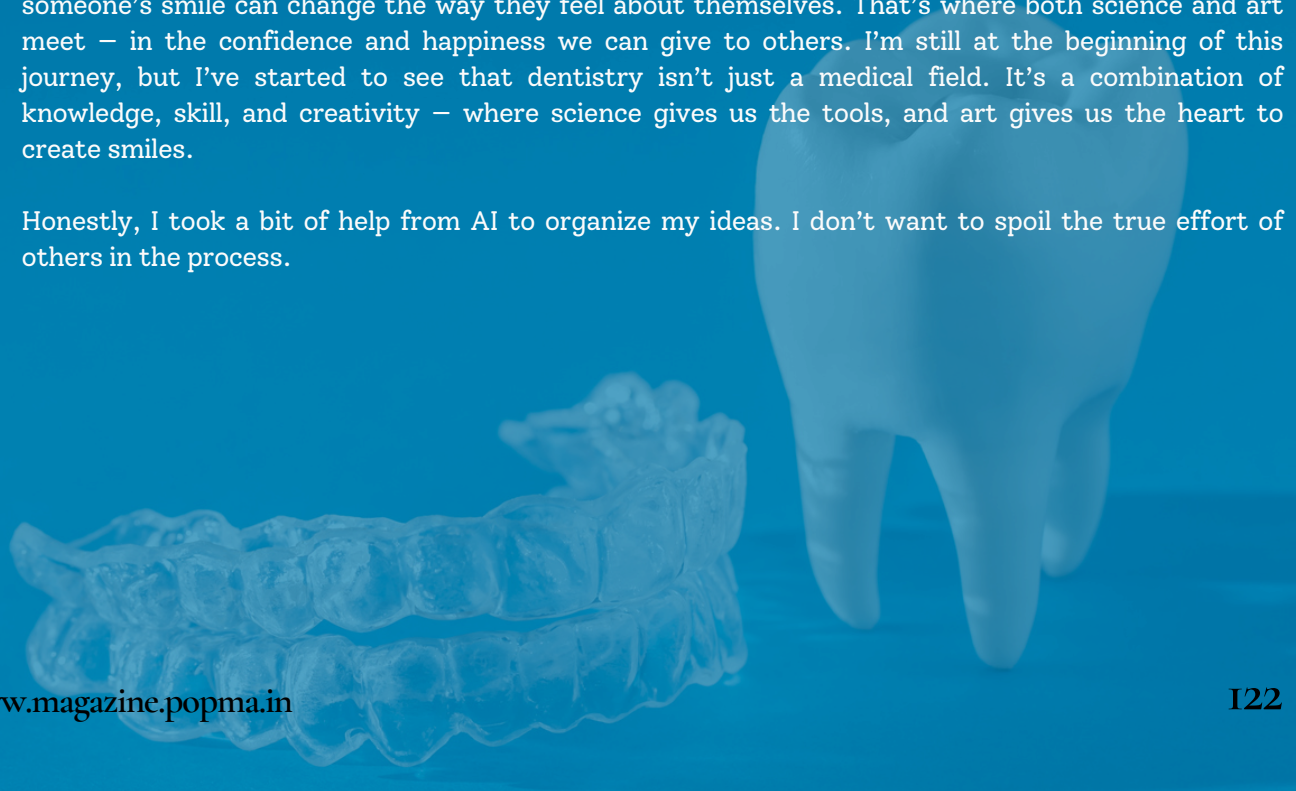
When I joined dental school, I used to think dentistry was only about fixing teeth and learning how to use drills and mirrors. But as I started my classes, I realized it's much more than that. It's a mix of science and art — something I'm still trying to understand fully.

Our first lessons were about tooth morphology. At first, all those shapes and names felt confusing. Then came wax carving, and that's when I got a small taste of the artistic side of dentistry. Shaping a tiny piece of wax into a tooth felt like sculpting. It needed patience, focus, and a steady hand. Even though my wax teeth didn't look perfect, I started to see why people call dentistry an art. But behind that art lies strong science. Every tooth shape, curve, and ridge has a reason — how it helps in chewing, speaking, or how it fits in the jaw. The more I learn, the more I realize that nothing in the mouth is random. Everything is connected and follows biology, anatomy, and function.

Then there's aesthetics — the part that really makes dentistry special. A dentist doesn't just repair a broken tooth; they make it look natural and beautiful. Matching the color, size, and shape of a tooth to a person's smile takes creativity and a sense of balance. It's like painting, but with enamel and composite instead of brushes and colors. Sometimes I feel unsure about whether I'll ever be able to do all this perfectly. Holding instruments still makes me nervous, and carving one tooth takes me hours. But I guess that's how every dentist starts — slowly building skill and confidence.

I've also realized that dentistry is not just about teeth. It's about people and their smiles. Restoring someone's smile can change the way they feel about themselves. That's where both science and art meet — in the confidence and happiness we can give to others. I'm still at the beginning of this journey, but I've started to see that dentistry isn't just a medical field. It's a combination of knowledge, skill, and creativity — where science gives us the tools, and art gives us the heart to create smiles.

Honestly, I took a bit of help from AI to organize my ideas. I don't want to spoil the true effort of others in the process.



STOP SAYING JUST A DENTIST!

- You Need Us More Than You Think !! I still remember the first time someone said to me, “BDS? Accha... MBBS nahi mila kya?” It sounded casual, almost like harmless humour, but it left a lasting impact.

That one sentence carried the weight of a mindset that almost every dental student in India faces — a mindset that places Dentistry below Medicine, as if it is a compromise and not a career to be proud of.

When I shared my admission news with relatives, the reactions were far from what I expected. “Dentist ban rahi ho? Theek hai, par MBBS hota toh zyada acha hota.” Some even advised, “Drop le leti, next year try karti... doctor toh MBBS hi hota hai.”

It made me wonder why BDS is treated like a second choice, a Plan B, a consolation prize. The first time I wore my white coat, I realised dentistry isn’t just a career — it’s a responsibility to heal, to comfort, and to bring back someone’s smile.

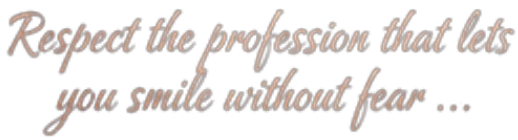
As I entered the course and started learning what Dentistry truly is, I realised the problem was never with the profession — the problem is with how society sees it. People forget that the mouth is the gateway to the body. They respect cardiologists for treating the heart and neurologists for the brain, but they forget that oral health impacts the heart, the lungs, diabetes, pregnancy, immunity and overall well-being. Dentists don’t “just fix teeth”. We prevent disease, correct deformities, restore confidence, allow people to eat, speak and smile freely, and yes — we can even save lives.

A dental infection that spreads to the brain or bloodstream can be fatal. So if anyone thinks dentists do not matter, they need to imagine a world where people cannot speak, chew, express or smile — life becomes colourless. Yes ,I am Megha Garg, a proud first-year BDS student, exploring the beautiful journey behind the “Art of Dentistry”. Unfortunately, society created an unfair hierarchy: MBBS above BDS. But these two fields are not competitors. Medicine and Dentistry are different disciplines, both essential in healthcare. If everyone becomes an MBBS doctor, who will detect oral cancer early? Who will help a child afraid to smile because of their dental issues? Who will bring back the ability to speak, eat or smile to someone who lost it? Dentistry is not a fallback option. It is a profession of precision, science, skill and responsibility. It demands steady hands, sharp knowledge, patience, empathy and an artistic touch. As a girl stepping into this profession, I’ve also seen how people judge career choices differently for women. Many assume that girls choose dentistry because it is “manageable” or “comfortable”, as if women are not capable of handling rigorous professional challenges. But the truth is, dentistry is not a softer version of medicine — it is a field that requires immense academic strength, clinical precision, emotional resilience and responsibility.

For a girl, it is not just a degree; it is a path to build identity, confidence and financial independence through one’s own skill and intellect. Being a dentist gives a woman a respected place in society, a career grounded in dignity, and the ability to stand on her own feet without needing validation from anyone. At the same time, dentistry offers women a professional environment that is safe, respected and empowering. It allows long-term career growth, leadership roles, research opportunities, entrepreneurship and the freedom to shape one’s journey without sacrificing identity or aspirations. Whether a woman wants to run her own clinic, specialise, pursue academics, or excel in the cosmetic dentistry world — the field supports ambition as much as it supports balance, without reducing women to stereotypes. Choosing BDS is not settling; it is choosing a profession that aligns passion with purpose and strength with stability. Many people assume Dentistry is easy. But do they know what a dental student actually studies? Anatomy, Physiology, Biochemistry, Pathology, Pharmacology, Microbiology, Surgery, Prosthodontics, Orthodontics, Periodontics, Conservative Dentistry, Radiology and much more. We study the human body in depth, especially the head and neck, to a level many do not even realise.

Dentistry is not “just teeth.” It is detailed medical science combined with surgical skills and aesthetics. To the parents who say, “MBBS nahi hua toh chalo BDS kar lo,” please stop teaching children that self-worth is tied to one degree. Every branch of healthcare deserves respect, because every doctor, whether medical or dental, heals someone. And to the students who feel hesitant to say they chose BDS, stand tall. You chose a profession that plays a vital role in a person’s life. A person who once hid their smile because of insecurity will smile confidently because of you. Someone who couldn’t eat without pain will live comfortably because of you. Someone who lost confidence will gain it back because of you. That is not small — that is life-changing. Respect for dentists should not come only when someone suffers unbearable tooth pain at midnight. Respect should exist because Dentistry improves lives every single day. It is time to stop comparing and ranking professions and start appreciating the value each one brings to society. The next time anyone says, “Just a dentist?” remind them gently but firmly that you cannot spell “health” without “oral health.” Dentistry deserves the same respect, dignity and recognition as any other field in medicine. We are not “just dentists” — we are doctors of the oral cavity, protectors of smiles, guardians of oral health and an essential part of the healthcare system. I had to say all of this just to prove that dentists are doctors — to prove that yes, I am becoming a doctor."





- By Megha Garg, (1st Year BDS) Guru Nanak Dev Dental College & Research Institute, Sunam

THE DIGITAL DENTIST

HOW AI IS TRANSFORMING SMILES

AI is fastly transforming the healthcare by accelerating diagnostic accuracy, optimizing treatment plans and improving patient outcomes. It has massively helped to reduce human error ,workload on doctors and identify patterns thay may be missed by human clinical systems.

AI has made significant discoveries in various speciaized fields of dentistry. In orthodontics, AI made tools are overturning treatment planning by enabling deep analysis of 3D scans leading to optimizing orthodontic outcomes.Same way in prosthdontics, AI enhances the design and fabrication of dental prostheses through Computer Aided Design and Manfacturing systems which help to analyze intraoral scan and develop highly accurate digital models for crowns, bridges and dentures.

AI in the market is not decision maker but they are helpers. Helping us to treat patients with more perfection and less stress in a cost effective way.AI has also benefitted us in Dental Implantology particulary in pre-surgical planning and implant placement. AI algorthims helps in identifying optimal implant sites by analyzing cone beam computing tomography{CBCT} images, ensuring precision and redcuing risk of complications.

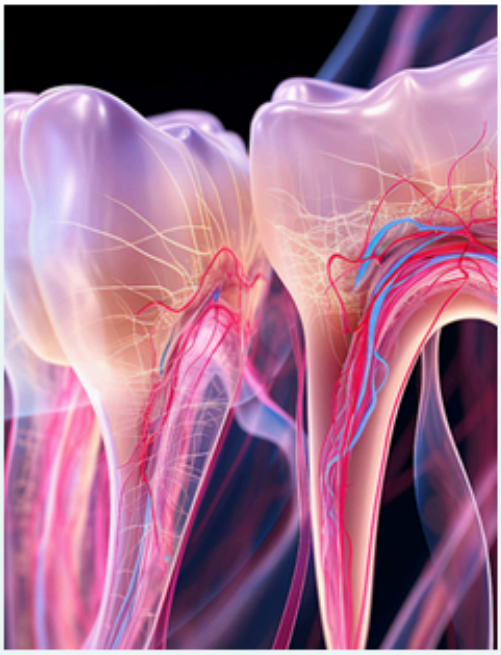
In restorative dentistry, it assists by improved precision and efficieny by enabling precitible modeling and automation in clinical workflows by influencing diagnostic processes .

AI has recently made strides in caries detection through machine learning agorithms , particulary in Convolutional Neural Networks.Their effectiveness is particulary notable in identifying non cavitated lesions that pose challenes for dentists due to limited visibility and may go undiagnosed . This enhanced discovery not only supports dentists with overall accuracy but also facilitates with the implimentation of non invasive, cost effective treatments like flouride vanish through early detection that offers help to both patients and dentists.

In pedodontics, current searches include utilization of customized applications of AI driven appliances for orthodontic tooth movement, AI enabled pain control etc. These advancements signify the dynamic nature of dental technology and its commitment to improving patient health and outcomes.

The AI driven dentistry shows the transformative potential of AI in changing dental care. But we might need to tackle some challenges to make it more friendly to use such as data privacy concerns and a clear understanding of AI decision making processes. Further researches can be made by studying in details about 3D printing for personalized restorations etc.





Mispreet Kaur

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Dr. Bhuvan Nagpal
Director, Tohana Manglam Diagnostics
Alumnus, 2006, MRDC

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"Empowering Healthcare with Precision and Excellence" Leading NABL Entry-level Recognised Lab in Hansi

DR. ANUJ KALRA
DIRECTOR & QUALITY MANAGER

OUR SERVICES

Advanced CT Scan Services | FNAC (Fine Needle Aspiration Cytology) | Histopathology Tests
Tuberculosis (TB) Testing | Body Fluid Analysis | Cancer Screening (Tumor Markers)
Microbiological Cultures | Customized Health Packages | Hormonal Profiles (HbA1c & TSH)

Our Vision:
To be a trusted diagnostic partner, setting benchmarks in quality, technology, and patient satisfaction.

Our Mission:
To provide high-quality, affordable diagnostic services that empower healthcare providers and individuals, ensuring better health outcomes.

Why Choose Hansi Manglam Diagnostics?
1. NABL Certified Quality Assurance
2. State-of-the-Art Technology
3. Unmatched Accessibility
4. Expert Leadership
5. Affordable and Patient-Centric Care

Exclusive Offers

Free Testing Every Sunday:
Choose from: Blood Sugar, Cholesterol, Uric Acid, or Creatinine
Timing: 7:00 AM – 10:00 AM

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Specially designed for diabetic patients to monitor their health.
30 tests for just ₹600, valid for one month.

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Address: Opposite Bus Stand, Delhi Road, Hansi, Haryana.
OPEN: 365 DAYS A YEAR, INCLUDING SUNDAYS AND HOLIDAYS.

Criteria:

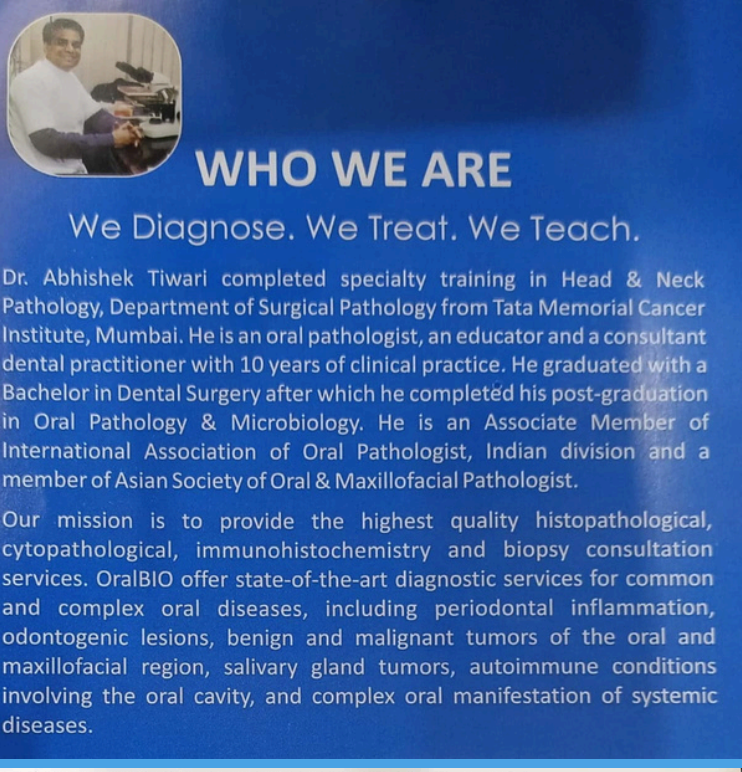
Dr. Bhuvan Nagpal Award of Excellence in Dental Sciences

- Throughout meritorious student in **BDS**
- **Topper/Rank Holder** in BDS university examination
- **Distinctions (75% or above)** in at least 6 subjects of BDS curriculum
- Best scores in **Oral Pathology** examination
- Active participants in extracurricular activities, including sports and cultural activities at BDS level
- Attended CDE/national/international conferences
- Publication at BDS level will be preferred
- Conducted research at BDS level
- Presented paper/poster presentations



OralBIO
PATHOLOGY SERVICE

Add- UGF-214,215, Super Shopping Center
Faizabad Road, Lucknow
Contact No. 9918811636, 9839201602



WHO WE ARE

We Diagnose. We Treat. We Teach.

Dr. Abhishek Tiwari completed specialty training in Head & Neck Pathology, Department of Surgical Pathology from Tata Memorial Cancer Institute, Mumbai. He is an oral pathologist, an educator and a consultant dental practitioner with 10 years of clinical practice. He graduated with a Bachelor in Dental Surgery after which he completed his post-graduation in Oral Pathology & Microbiology. He is an Associate Member of International Association of Oral Pathologist, Indian division and a member of Asian Society of Oral & Maxillofacial Pathologist.

Our mission is to provide the highest quality histopathological, cytopathological, immunohistochemistry and biopsy consultation services. OralBIO offer state-of-the-art diagnostic services for common and complex oral diseases, including periodontal inflammation, odontogenic lesions, benign and malignant tumors of the oral and maxillofacial region, salivary gland tumors, autoimmune conditions involving the oral cavity, and complex oral manifestation of systemic diseases.



OralBIO
PATHOLOGY SERVICE

HISTOPATHOLOGY
CYTOPATHOLOGY
IMMUNOHISTOCHEMISTRY

We offer state of the art Oral Pathology, Oral Biopsy, Histopathological, Cytopathological, Immunohistochemistry consultation services for common and complex oral diseases including Benign / Malignant Tumors (oral cancer), Odontogenic tumors, Salivary gland tumors, Autoimmune conditions

UGF-214,215, Super Shopping Center
Faizabad Road, Lucknow
oralbio.path@gmail.com
https://www.facebook.com/oralbio.path/
9918811636, 9839201602

Consult your Dental Physician

India has one third of oral cancer cases in the world.
Oral cancer account for around 30% of all cancers in India.
Oral cancers in India estimated
New cases: 1,19,992
Deaths: 72,616 (Globocan, 2018)
In general more men suffer and die from oral cancer than women.



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Dr. Shreya Singh

MDS (Oral Pathology)
Consultant Oral Pathologist

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Diagnostics
Your Pathology Partner in Dental Health

Dr. Shivani Aggarwal

MDS (Oral Pathology),
Consultant Oral Pathologist



The Practice of oral and Maxillofacial pathology

Dr. Abhishek Banerjee

Dear Doctors

Oral and maxillofacial pathology is indeed a distinct and crucial branch of dentistry, much like your specialty. As an oral histopathologist, I am eager to gain experience and grow with your support. If oral specialists don't trust oral pathologists to accurately diagnose patient reports, it hinders the advancement of our field. I encourage you to place your trust in our lab by starting with a simple case, giving us the opportunity to earn your confidence.

Regards-
Dr Abhishek Banerjee

OUR SERVICES

- ▶Routine oral disease consultation
- ▶Oral precancer,cancer diagnosis and tobbacco cessation
- ▶Oral biopsy and cytology
- ▶FNAC,Immunohistochemistry.
- ▶Research collaboration.



WORK EXPERIENCE

Dr. Abhishek Banerjee has earned his BDS and MDS degrees from Rajiv Gandhi University of Health Sciences. He completed an observership in the Department of Pathology at Kidwai Institute of Oncology. Currently, he is pursuing doctoral research at the National Institute of Technology Durgapur and is engaged in various collaborative research projects. He serves as an Associate Professor and Postgraduate Guide in the Department of Oral and Maxillofacial Pathology at Awadh Dental College and Hospital in Jamshedpur. Additionally, he holds the position of Adjunct Faculty of Research in the Department of Oral Diagnosis and Oral Pathology at Universitas Airlangga, Indonesia. Dr. Banerjee is a fellow of the Pierre Fauchard Academy and the Academy of General Education. He operates a specialized oral histopathology and cancer diagnosis lab in Durgapur, which is one of the few exclusive private oral pathology labs in West Bengal and Bihar. He has numerous publications to his name and serves as a reviewer for various PubMed, Scopus, and Indexed journals.

CONTACTS

Lab centre- 5/17 Ambagan,
Bhiringi ambagan road
Durgapur 713213,
📱 9886938095

OUR SERVICES

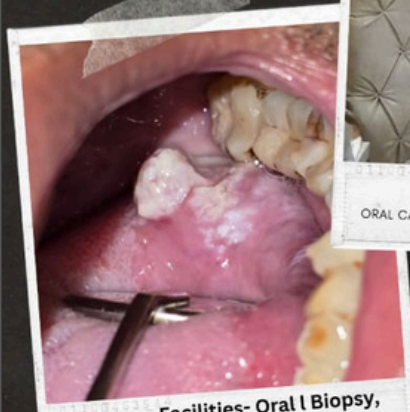
To send a biopsy, please ensure it is placed in a sealed, leak-proof container with 10 percent buffered formalin and include a requisition letter with details of the case. For pickup arrangements, contact me in advance.

"Please send advance notice to ensure a smooth transit when using DTDC or Maruti couriers."

Pick up facility available on prior notice



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Implants



OVER 20 YEARS OF EXPERIENCE



Dr. Pratik N. Patel

MDS (Oral Pathology)
Consultant Clinical Oral Pathologist

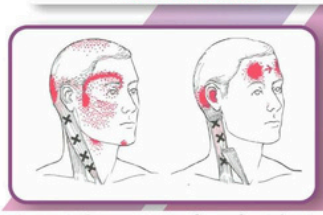
Earliest Diagnosis of Oral Cancer & Oral Diseases Since 2015



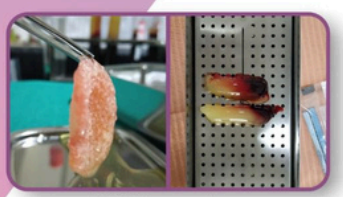
Earliest Detection of Oral Cancer
ORAL SCREENING



Biopsy of a Suspicious Lesion



Diagnosis & Treatment of Myofascial Pain



PRF Preparation

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Dr. Piyush Sharma (Founder & Director)
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MICROEDGE DIAGNOSTICS

Estd 2018



Dr. Nutan Tyagi

MDS (Oral Pathology)

Consultant at Paradise Diagnostics, Delhi

15 yrs + Experience in Histopathological Diagnosis

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Always striving to provide best possible patient support



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Histopathology/ Cytopathology
Advanced tests/ IHC

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Services Provided

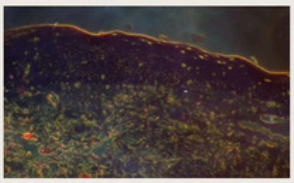
- Histopathological diagnosis of biopsies (oral & maxillofacial regions) including neck dissection specimen.
- Oral Exfoliative Cytology
- Consultation or Treatment of Oral Disease
- Oral Biopsy Procedure/ Photomicrography
- Advance Tests/Research project

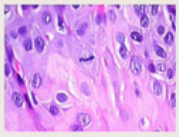


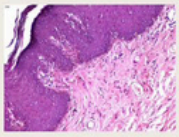


Dr. Vidushi Lalwani Rathore

BDS, MDS, PGDCC
CHIEF CLINICIAN AT
REVIVE DENTAL & FACIAL COSMETICS CLINIC,
MUMBAI & BANGALORE







An oral pathologist, a researcher, an innovator, and a trained passionate facial cosmetologist. Her keen interest lies with early diagnosis of oral cancer, and management of oral complications (mouth ulcers, burning, dryness) diagnosis of various conditions affecting the mouth. Having devoted over 14 years in the field of Oral and Maxillofacial Pathology, her work represents a benchmark in the field of oral pathology with a diving interest in cases related oral sub mucous fibrosis and oral cancers. Many of her work has been published in national and international journals.

Our Aim

Our centre aims at detection and diagnosis of all oral and maxillofacial pathologies.
We strive to do the best, to grow, develop & raise standards of Oral Pathology

147Y, 50TH CROSS, 17TH MAIN, 3RD BLOCK, RAJAJINAGAR, BANGALORE - 560010
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DENTAL | IMPLANT | FACIAL COSMETIC | LASER | HAIR

REVIVIE DENTAL & FACIAL DIAGNOSTIC CENTRE

Dr. Arushi Pandey

BDS, MDS (Oral Pathology)

KSHETRAPAL DIAGNOSTIC CENTRE

Your trusted partner in comprehensive oral diagnostics

Our mission

Empowering dentists and dental clinics by providing

1. Accurate and reliable histopathological diagnosis
2. Inputs on diagnosing and treating oral lesions- associated with common and complex oral diseases, odontogenic lesions, benign and malignant tumors, salivary gland lesions, skin and autoimmune conditions
3. Opportunity to discuss the cases with our senior consultant

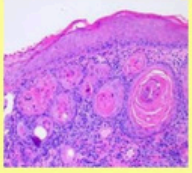
Who we are

Dr.Arushi Kshetrapal is a senior oral pathologist, an educator and a consultant with over 20 years of experience. She has completed her B.D.S and M.D.S in Oral Pathology from MCODS, Manipal.She has been an academician for over 15 years

Our services

*Routine oral disease consultation
*Oral precancer, cancer diagnosis
*Tobacco cessation guidance
*Oral biopsy- all oral lesions and conditions (hard and soft tissues)
* Special stains and IHC
*Cytology
*Research collaboration
*Complete hematology and biochemical analysis



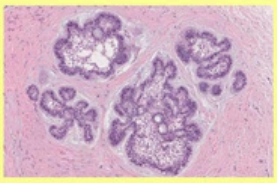


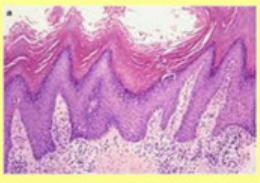
Contact us

Phone:9460054311
Email:arushikshetrapal@Gmail.COM
Adress: kshetrapal nursing home
197 civil lines
Nayapura, Kota, Rajasthan.

Requirements

To send a biopsy, please ensure it is placed in a sealed leek proof container with10% buffered formalin and include a requisition letter with details if the case. For pick up please contact in advance.





UAIMS

Where Compassion Meets Care

Ushahkal Abhinav Institute of Medical Sciences,
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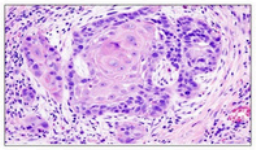


Services-
Hematology
Clinical Pathology
Biochemistry
Oral Histopathology
Cytology



Dr. Swapnita Patil

BDS, MDS (Oral and Maxillofacial Pathology and Oral Microbiology), FFO
Consulting Oral Pathologist,
Department of Laboratory Medicine,
Ushahkal Abhinav Institute of Medical Sciences, Sangli





Pathology@uaims.in

DiagnOral
Pathology & Clinic
Quality with competence in oral pathology.....

Dear Doctor,

Season's greetings from DiagnOral Pathology & Clinic.

DiagnOral Pathology & Clinic is a very first and the only center in Vadodara, which provides services dedicated to the specialty of Oral & Maxillofacial pathology. Established in the year of 2011, DiagnOral Pathology & Clinic is successful in fulfilling its responsibility as a trustworthy clinic for Oral Cancer detection. It is continuously receiving support from Doctors & Patients as a trusted center for biopsy reports of Oral, Jaws and salivary gland lesions.

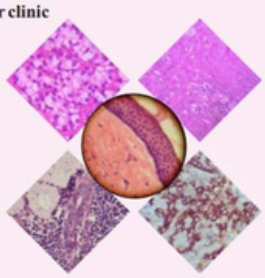
Facilities available:

Laboratory services with logistic support:

- Biopsy reports of small and large specimens including neck dissections
- Ancillary studies in cases where needed
- Freshly prepared Carnoy's solution for cyst enucleation procedure
- Fine Needle aspiration biopsy & Needle core (trucut) biopsy
- Synoptic reporting, consistent with current standards of patient care
- Shortest possible turnaround time

Specimen collection and report delivery at your clinic





DiagnOral
Pathology & Clinic
Quality with competence in oral pathology.....

Consultation services:

- Oral precancer & Cancer detection including diagnostic biopsy
- Diagnosis and treatment of non-healing ulcers of oral cavity
- Diagnosis and treatment of Oral manifestations of Mucocutaneous disorders and other systemic diseases
- Diagnosis and treatment of Salivary gland disorders



About Dr. Arpan Shah

- Post-graduate from Maharashtra university of Health sciences, Nashik.
- Trained for oral oncopathology at Tata memorial hospital, Mumbai & NAMCO charitable trust's cancer hospital, Nashik
- Practicing surgical Oral & maxillofacial Pathology since 2011
- Over 10 years of practice experience in diagnostic & surgical oral pathology.
- More than 30 publications in various national and international journals
- Delivered talks and slide seminars on various state and national platforms
- Awarded for the "Excellence in Oral & Maxillofacial Pathology", by Global outreach Medical & Health Association in August 2021.

His passion for the practice of Oral Pathology is continuously propelling DiagnOral Pathology & Clinic towards achieving newer milestones day by day.
Thankyou
Looking forward for your continued support.

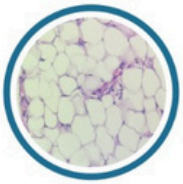
Dr. Arpan Shah MDS
Oral & Maxillofacial pathology

Dr. Dimpi Shah MDS
Pediatric & Preventive Dentistry

120/121, B-3, Sunrise Complex, Opp. Ambe School,
Darbar Chokdi Road, Manjalpur, Vadodara.
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M : 9106364680, 8141258139

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Tricity's First Oral & Maxillofacial Pathology Diagnostic and Care Centre





One Stop Solution for Diagnosis & Care of oral ulcers, Lumps and Bumps on Gums, Tongue and Mouth, Red/White Patches in Mouth.

Services available:-
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Tricity's first oral & maxillofacial pathology centre.

We specialize in diagnosis & care of oral ulcers, lumps & bumps in the mouth. We undertake *histopathology, cytology of oral diseases, all kinds of oral biopsies, vital staining, OPMD screening, oral cancer screening, tobacco cessation, routine dental procedures.*

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Contact :
Dr. SAIKAT CHAKRABORTY
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dr.saikat@dentoscope.co.in
www.dentoscope.co.in
SCO -40, MDC -5, Panchkula 134114

Dr Abhishek Bhadranna BDS MDS
Oral Pathology and Microbiology
Certified Tobacco Cessation Specialist
Consultant Oral Pathology
Dr Bhadranna's Oral Pathology
Oral D Histopathology Services
Chief Clinician
Adi's Dentalaya
Director and Cofounder
91 Danta Research and Product Development Pvt Ltd



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ORAL-D Histopathology Services
Powered by Dr Bhadranna's Oral Pathology

DRPD

Services offered

- Cytopathology & Histopathology diagnostic services of oral and maxillofacial region.
- Immunohistochemistry (IHC) for diagnosis of oral lesions.
- Second opinion for referrals of biopsy from oral and maxillofacial region.
- Photomicrograph facility for publication purpose.
- Research projects related to head and neck region.

Consultant Oral Pathologists
Dr Sharada P
Dr Priya NS
Dr Abhishek Bhadranna

Contact
Mr Manoj -9743485028
Mr Yogesh -8151863482
Dr Abhishek - 9886697605
Dr Sharada - 9449709918
Dr Priya NS 8861777706

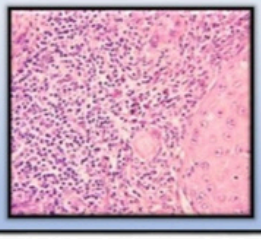
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SRI SAI DENTAL CARE & ORAL DIAGNOSTIC CENTRE



DR. PANKAJ VERMA
M.D.S.(ORAL PATHOLOGY &MICROBIOLOGY)
CONSULTANT ORAL PATHOLOGIST
SR. LECTURER
INSTITUTE OF DENTAL STUDIES &TECHNOLOGIES
KADRABAD (MODINAGAR) U.P.



SERVICES:
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PARADISE DIAGNOSTICS

ORAL RADIOLOGY & PATHOLOGY CENTRE

Delhi's First Complete Oral Diagnostic Centre With Comprehensive Imaging & Pathology Facilities.

FACILITIES AVAILABLE

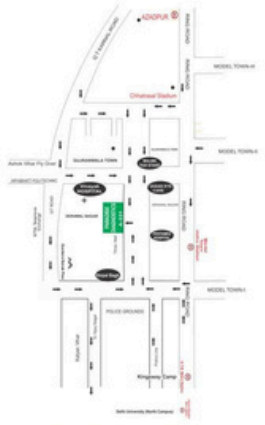
- **RADIOLOGY**
  - Digital OPG
  - Dental CBCT - 1 Quadrant / 1 Jaw / Both Jaws
  - Maxillofacial CBCT - Jaws With Sinus / Face / TMJ(Single/Both)
  - Cephalometric Imaging & Tracing
- **PATHOLOGY**
  - Histopathological Evaluation Of Orofacial Lesions
  - Cytological Evaluation Of Orofacial Lesions
- **HAEMATOLOGY**
  - Complete Blood Count
  - Fasting Blood Sugar, Random Blood Sugar ,Post Prandial Blood Sugar

Monday to Saturday (9:00 a.m. to 7:30 p.m.)
Sunday (10:00 a.m. to 1:00 p.m.)
Address:- A-331, Derawal Nagar, Delhi -9

About Us

Paradise Diagnostics is an independent Diagnostic centre founded by Dr. Geetpriya Kaur (M.D.S. in Oral and Maxillofacial Pathology, Visiting scholar of NewYork University) is the only complete Oral Diagnostic Centre with Oral Radiology, Oral Pathology and Haematology facilities under one roof. Paradise Diagnostics is associated with Dr. Sahai's Dental & Maxillofacial diagnostics, pioneer of 3D-Dental Imaging and Cone Beam CT in India. We believe in holistic approach to work for the benefit of patients by providing supreme quality of service with the help of highly skilled personnel.

Route Map



www.paradisediagnostics.com
For Appointment : +91 11 47 40 1444, +91 85 27 22 6661

ORAL RADIOLOGY & PATHOLOGY CENTRE

With Comprehensive Imaging & Pathology Facilities

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Address:- A-331, Derawal Nagar, Delhi -9

Monday to Saturday (9:00 a.m. to 7:30 p.m.)
Sunday (10:00 a.m. to 1:00 p.m.)





Associated with :-
Dr. Sahai's dmd
Dental & Maxillofacial Diagnostics

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ORAL & MAXILLOFACIAL PATHOLOGY



HISTO-CYTOPATHOLOGICAL EVALUATION FOR :

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- White & Red Lesions
- Cystic Lesions
- Large Swellings
- Benign & Malignant Tumors
- Salivary Gland Tumors
- Other Orofacial Anomalies

Consultant :
Dr. Geetpriya Kaur
• MDS - Oral & Maxillofacial Pathology
• Consultant : Oral & Maxillofacial Pathologist
• Ex- Assistant Professor, KDC

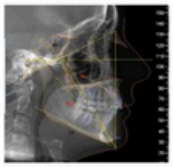


STATE OF THE ART-DENTAL IMAGING

- Direct digital OPG, CBCT & single shot Cephalometric Imaging & Tracing
- Selectable fied of view from 5 cm x 5 cm to 17 cm x 13.5 cm
- Broad range of dental, sinus, temporal bone and ENT applications
- Significantly Less Radiation Exposure
- Cost Effective & Superior Image Quality

- Oral Surgery
- Oral Implant Planning
- Orthodontic Planning, Implant Anchorage
- Cephalometric Analysis
- TMJ Analysis
- Airway Study (sleep Apnoea)
- Jaw Tumour
- Impacted Teeth / Supernumeraries
- Periodontal Disease
- Endodontic Anomalies

SINGLE SHOT CEPHALOMETRIC IMAGING

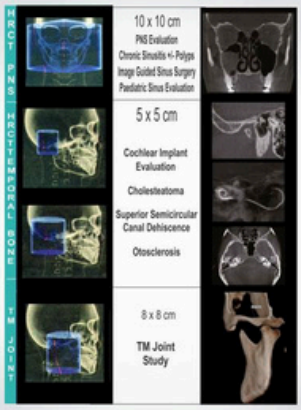


EXCLUSIVE AUTOMATIC TRACINGS

CBCT SCAN SIZES ACCORDING TO YOUR PRACTICE NEED

HEAD & NECK REGION			JAW MODES		TMJ MODES	FOCUSSED FIELD MODES	
17 x 13.5 cm	17 x 11 cm	17 x 6 cm TMJ x 2	Dual Jaw 10 x10 cm	Single Jaw 10 x 5 cm	Dual Jaw 8 x 8 cm	TM Joint 8 x 8 cm	5 x 5 cm	5 x 5 cm
•Orthodontics •Orthognathic Surgery •Trauma •Sinus and Airway Analyses •Facial reconstruction •Double TMJ assessments			•Implantology •Complex Impactions •Other cases involving both / single dental arches			•TM Joint study	•Dental Local Cases : Endodontics, Single Implants, Impactions •Any examinations requiring a high level of detail (90µm)	

Low Dose ENT Imaging on CBCT



Consultant :
Dr. Amita S. Sahai
• MDS - Oral Medicine, Diagnosis And Radiology, Goa
• Consultant : Dental and Maxillofacial Radiologist

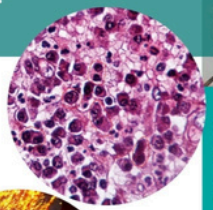
neuron
Institute of Applied Research
Living Research

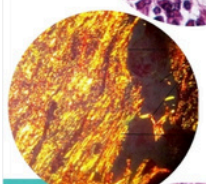
CONTACT US
+91 9168003344

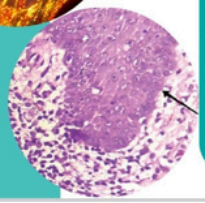
Dent-O-Path

Oral Histopathology Services & Research Center









About us

Dr. Ketki Kalele is a seasoned Associate Professor with expertise in Histology, Scientific Writing, Histopathology, and Teaching. She holds an MDS in Oral Biology and Maxillofacial Pathology from Dr. D. Y. Patil Dental College, Pune.

As the Director of DentOPath and the Neuron Institute of Applied Research (NIAR), Dr. Kalele has driven impactful advancements in oral pathology and research mentorship. With over 43 research papers published in prestigious journals like PubMed Central, Scopus, and The Lancet, she has established herself as a leader in the field. Her start-up has partnered with 400+ healthcare professionals, publishing 300+ research papers in just two years, particularly in resource-limited settings.

Dr. Kalele also pioneered an on-campus research hub at V.Y.W.S Dental College, recognized by NAAC, and has launched seven incubation research centers in institutions and corporate hospitals, furthering research mentorship and guidance.

444601 Rajapeth, Amravati



OUR SERVICES

- We provide histopathology, Cytology, and surgical pathology consultations and diagnostics for Oral and Maxillofacial pathologies.
- Advanced microscopic and clinical evaluations for oral diseases.
- Detection of Benign, Malignant tumours, Odontogenic tumors, salivary gland tumors, autoimmune conditions and other oral pathologies.
- Laboratory facilities for precise haematological, biochemical and microbiology analysis.
- Collaborative approach with dentists and medical professionals.
- Timely delivery of diagnostic results for quicker treatment planning.
- Patient education on oral health and prevention strategies.
- We ensure accurate second opinions on biopsy referrals from the oral and maxillofacial regions.
- Research paper writing and publication services of special cases.

CONTACT US

+91 9168003344

Near BJP Office, Rajapeth, Amravati 444601 (India)

www.neuronresearchindia.com

Ravijyoti MedLab & MedicoLegal Consultancy

(Transforming Healthcare Ventures with Expertise and Excellence)

About Us

At Ravijyoti Med Lab & Medico Legal Consultancy, we are dedicated to revolutionizing healthcare by offering comprehensive services in medical lab setup, medico-legal consultancy, medical tourism, and lab accreditation.
Our mission is to empower healthcare providers with expert guidance tailored to their specific needs.

Our Services

1. Medical Lab & Diagnostic Center Setup

We specialize in creating state-of-the-art diagnostic centers and medical labs from the ground up. With over 10 years of experience, Dr. Bhuvan Nagpal has successfully established numerous diagnostic centers across India. His in-depth understanding of the healthcare industry, combined with his expertise in lab economics, ensures every project is planned with precision and profitability in mind.

Our services include:

- Lab Planning & Design
- Licensing & Compliance Support
- Marketing Strategy Development
- Equipment Selection & Procurement
- Workforce Recruitment & Training
- Economic Viability and ROI Optimization

Whether you are a new entrant to the healthcare sector or looking to expand, we provide the strategic insights needed to build successful diagnostic ventures.

2. Medico-Legal Consultancy

We provide expert medico-legal guidance to doctors and healthcare institutions, ensuring compliance and ethical practice.

Handled by:
Dr. Bhuvan Nagpal
a senior oral pathologist with extensive expertise in medico-legal consultancy, recognized for providing solutions to complex medical-legal challenges.

Our services include:

- Legal Opinions for Medical Cases
- Comprehensive Medical Documentation Reviews
- Expert Witness Testimonies
- Consultation for Dispute Resolution

3. Medical Tourism

Handled by:
Dr. Anuj Kalra
a medical tourism expert with a proven track record of managing international patient care.

Facilitating seamless experiences for international patients seeking high-quality medical treatment in India.

Our services include:

- Coordination with Leading Specialists
- Travel & Accommodation Assistance
- Comprehensive Pre- and Post-Treatment Support

4. Lab Accreditation

We assist laboratories in achieving globally recognized certifications and implementing industry-standard quality

Handled by:
Mr. Anil Bindal
an experienced accreditation specialist ensuring compliance with international standards.

Our services include:

- ISO 15189:2022 Standards
- NABL Accreditation
- Quality Management System Implementation

Our Leadership Team

- **Dr. Ravinder Nagpal** (Founder & Visionary Leader)
  A seasoned professional committed to innovation and excellence in healthcare management.
- **Dr. Bhuvan Nagpal** (Founder, Sr. Oral Pathologist, Clinical Biochemist, Forensic & Medicolegal Expert)
  With over a decade of experience in establishing diagnostic labs across India, Dr. Nagpal brings unmatched expertise in lab setup, marketing strategies, and operational economics.
  His industry insights ensure the success and sustainability of each venture.
- **Dr. Anuj Kalra** (Co-Founder, COO & Head of Medical Tourism)
  An expert in medical tourism with a proven history of facilitating seamless healthcare experiences for international patients.
- **Mr. Anil Bindal** (Accreditation Specialist)
  A quality assurance professional specializing in NABL and ISO certifications, ensuring that labs meet global standards.

Why Choose Us?

Comprehensive Expertise: End-to-end solutions in lab setup, medico-legal consultancy, medical tourism, and accreditation.
Proven Track Record: Decades of combined experience in building and transforming healthcare businesses.
Strategic Vision: Tailored marketing strategies and operational planning for maximum profitability.
Client-Centric Approach: Personalized solutions to address the unique needs of each client.
Commitment to Excellence: Ensuring high-quality services to build trust and long-term partnerships.

Contact Us : Ravijyoti Med Lab & Medico Legal Consultancy
Phone: 7027038190 | 9896037444
Email: ravijyotimedlabmedicolegalcons@gmail.com | Website: https://drbhuvannagpal.com/

Together, let's revolutionize healthcare, one step at a time.

Maxpath

Oral Pathology Centre



Dr. Nandini Mewada

B.D.S. (GDC Ahmedabad)
M.D.S.(Oral Pathology, GDC Ahmedabad)
Ph.D. (Guj. University, On AI and ML in oral epithelial dysplasia grading)

Services Provided by us

- Histopathology reporting for oral specimens
- Immunohistochemistry and special stains
- Routine cytopathology reporting
- Liquid cytology/brush biopsy procedures. (both procedural assistance and reporting)
- Slide review on slides from other hospital or laboratories
- Telepathology
- Stereomicroscopy
- Reporting within 48 hours for routine biopsy specimens
- Blocks and slides would be provided with the printed reports



Submiting biopsy specimens

- To get a biopsy sample picked up, please call on 9978908684
- Kindly use 10% Formalin for preservation of specimen
- On unavailability of formalin, please store the specimen in 70% isopropyl alcohol

Green Iris Complex, B/h HP Petrol Pump,
K. K. Nagar Road, Ghatlodiya,
Ahmedabad-380061

M : 9978908684
Email : oralmaxpath15@gmail.com

Kanak Diagnostic Centre for Oral & Maxillofacial Pathologies

Dear Doctors

Oral & Maxillofacial Pathology is an intergral part of dentistry. We look forward to learn and grow with the support of our very own fraternity members, 'The Dentists'.

Our centre aims at detection and diagnosis of all Oral and Maxillofacial Pathologies (including Oral Cancer). We believe, an early, precise and accurate diagnosis is the prerequisite for right treatment outcome and our attempts are directed towards it.

We look forward to gain your trust and confidence, by giving us an opportunity to assist you. Your belief in our work will always motivate us to get better and better...





Work Profile

Dr. Kiran Jadhav has completed BDS from KLE, Belgaum (2004) and MDS from the prestigeous Bapuji Dental College, Davangere, Karnataka (2010). With his passion for research he pursued his PhD in Sumandeep Vidyapeeth University, Vadodara (2022) and worked on miRNA in oral cancer metastasis. He serves as a Professor in the Dept. of Oral & Maxillofacial Pathology, at VPDCH, Sangli

Dr. Nidhi Jadhav has pursued BDS from VS Dental College, Bangalore (2005) & MDS from renowned Bapuji Dental College, Davangere, Karnataka (2010). She is an enthusiastic Dental clinican and an Oral Pathologist. Her fervor and curiosity to diagnose oral pathological lesions, is her driving force. She is attached as an Associate Professor in the Dept. of Oral & Maxillofacial Pathology, at VPDCH, Sangli

With our never ending passion for Oral Pathology, we have started, the very first private Oral & Maxillofacial Diagnostic Centre in South Maharashtra, at Sangli. We strive to do the best, to grow, develop and raise the standards of Oral Pathology Diagnostics, and give it, it's due recognition.

Services provided

- Histopathological diagnosis of biopsies (oral & maxillofacial regions), including neck dissection specimens.
- Oral exfoliative cytology / FNAC / Cytopathology
- Consultation / Second opinion and / or Treatment of Oral Lesions/diseases
- Immunohistochemistry (IHC) for Oral Lesions
- Oral Biopsy Procedure
- Provide photomicrographs / microscopic image for publications/presentation
- Collaboration for research (pertaining to head and neck region)
- Other advanced tests

Shop No 8, Ground Floor, Prafulla Appt, Opp to Diamond Hotel,
100 Futi Road, Sangli, Maharashtra 416416
8669483505 / 7046776582

Please send biopsy in a tightly sealed container in 10% formalin and with filled in requisition form with patient's case details.
Humble request to inform prior for pick up of biopsy sample, or couriers.

Consultant Oral & Maxillofacial Pathologists

Dr. Kiran Jadhav
BDS, MDS, PhD

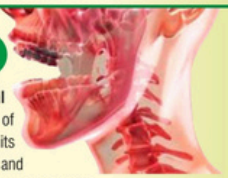
Dr. Nidhi Jadhav
BDS, MDS

COPMD™

CENTRE FOR ORAL PATHOLOGY & MAXILLOFACIAL DIAGNOSTICS

(A Complete Diagnostic Solution for Oral & Maxillofacial Diseases)

Oral Pathology & Microbiology



Oral Pathology **(also known as oral and maxillofacial pathology/head and neck pathology)** is a specialized field of pathology & dentistry dealing with the diseases of oral cavity and its associated structures (i.e., teeth, tongue; bony tissue [maxilla and mandible]; joint [temporomandibular joint]; lymph nodes; nerves; structures in neck and blood vessels of the ear, nose and throat [pharynx and larynx]).

The practice of oral and maxillofacial pathology & oral microbiology includes diagnosis of diseases using clinical, radiographic, histopathological, cytopathological, hematological, biochemical, microbiological, immunological, ultrastructural or other molecular/genetic examinations.

About

Centre for Oral Pathology & Maxillofacial Diagnostics (COPMD) is the first and only centre in Hisar, Haryana, established in 2016 by **Dr. Bhuvan Nagpal, MDS**. COPMD provides services dedicated to the specialty of Oral & Maxillofacial Pathology. This Centre is successful in fulfilling its responsibility as a trustworthy centre for Oral Cancer detection. It is continuously receiving support from doctors & patients as a trusted center for biopsy/histopathology reports of Oral, Salivary Gland and Maxillofacial Bony Pathologies.

Empowering Dental Surgeons by providing:

- Inputs in diagnosing red and white lesions
- Accurate & reliable diagnosis
- A clinically relevant histopathologic diagnosis
- Opportunity to discuss your case with the Oral Pathologist
- Inputs in treating the case



Our Motto : Specialized Diagnostic Services for Oral & Maxillofacial diseases at affordable cost

Steps to submit your biopsy specimen for Histopathological Examination (HPE)

1. Contact **Dr. Bhuvan Nagpal (M. : 70270-38190)**
2. Discuss the clinical diagnosis & share the clinical photographs and radiographic details.
3. Place the biopsy specimen in 10% formalin.
   Specimen stored in saline or any other liquid will not be accepted.
   Container with 10% formalin is available on request **(Contact : 98960-37444)**
4. Send/courier the biopsy specimen to COPMD head office address only
   (1021, Urban Estate-II, Hisar Haryana – 125001)
5. Standard reporting time is 10 days, any deviation will be informed on prior basis.
6. Digital histopathology reports are shared over email/whatsapp.

Do's

- Send clinical details along with all diagnostic imaging (X-Ray / OPG / CBCT)
- Store the biopsy specimen in 10% formalin solution all the time
- Select and appropriate areas of biopsy, especially for incisional biopsies

Don'ts

- Avoid putting the specimen in saline or water
- Avoid crushing or pressing the tissue pieces
- Avoid very small segmental biopsies (less than 1 cm) in size as they are not good enough for assessment.

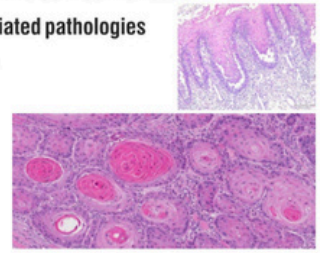
Biopsy specimen can be delivered at following centres

- **Hisar** : 1021, Urban Estate II, Hisar, Haryana (125001)
- **Hansi** : Jain Tower, Opp. Bus Stand, Hansi, Distt. Hisar, Haryana (125033)
- **Jind** : 371/5, Near Kundan Cinema, Gandhi Nagar, Scheme No. 5, Jind, Haryana (126102)
- **Tohana** : RMC Hospital, Kainchi Chowk, Chandigarh Road, Tohana, Distt. Fatehabad, Hry. (125120)
- **Sirsa** : Sahil Mehta, Street No. 4, Opp. Domino's, Ram Colony, Barnala Road, Sirsa, Hry. (125055)
- **Patiala** : 4A, Model Town, Patiala, Punjab (147001)

Helpline No. : 98960–37444

Histopathology Services

- Oral Potentially Malignant Disorders (OPMDs) & Oral Cancers
- Tumour pathology of Epithelium and Connective tissue
- Maxillary sinus and teeth associated pathologies
- Odontogenic tumours and cysts
- Reactive lesions of Oral Cavity
- Salivary gland pathologies
- Autoimmune lesions
- Bone pathologies
- Lymph node pathologies



Clinical Diagnostic Services

- Red & white lesions of oral cavity
- Oral manifestations of mucocutaneous disorder and other systemic diseases
- Salivary gland disorders
- Non-healing ulcers of oral cavity
- Lumps & bumps of oral cavity
- Neck swellings
- Pigmented lesions of oral cavity



Pioneer in Oral & Maxillofacial Diagnostics



DR. BHUVAN NAGPAL

BDS (Gold Medalist) (MDU, Rohtak)
MDS (Oral Pathology & Microbiology) (JSS, Mysuru)
PGT (Head & Neck Oncopathology), MSc (Biochemistry)
Ph.D (Honoris Causa in Pathology & Laboratory Medicine)
CLQMS, MBA (Healthcare Mgt), CFSFO, PGDMLS,
LL.B, FPFA (USA) (HSDC Regd. No. : HN5238-A)
(Notified by Govt. of India & NABL Approved Authorised Signatory for Laboratory Reports)

Sr. Oral & Maxillofacial Pathologist and Clinical Biochemist

TOHANA MANGLAM DIAGNOSTICS
Kainchi Chowk, Chandigarh Road, Tohana- 125120 (Hry.)

Director & Quality Head, Tohana Manglam Diagnostics, Chandigarh Road, Tohana
Director, Centre for Oral Pathology & Maxillofacial Diagnostics (COPMD), Hisar
Founder & President, Practicing Oral Pathologists & Microbiologists Association (POPMA)
Director, Academy of Oral Pathology & Laboratory Medicine (AOPLM), Hisar

Website (1) : www.drbhuvannagpal.com | Website (2) : www.copmd.drbhuvannagpal.com
Website (3) : www.tohanamanglamdiagnostics.com | Website (4) : www.popma.in

Objectives of my Oral Pathology Practice

- To ensure optimal patient care through accurate diagnosis of diseases affecting oral and maxillofacial region.
- To establish critical and precise connection between oral health and systemic health.
- To diagnose and evaluate systemic diseases by their oral manifestations
- To provide state of art comprehensive clinical and histopathology diagnostic consultation to hospitals, clinicians, private practitioners and specialists in medicine and dentistry.
- To provide a center for dissemination of knowledge through its archived collections, its courses, scholarly exchanges and public service.
- To encourage collaboration and interaction with other health care professionals, medical diagnostic laboratories, hospitals and professional organizations.
- To promote oral pathology and microbiology as a specialty of pathology and dentistry

Professional Strengths

- Histopathology (Oral, Head & Neck region)
- FNAC and Cytopathology (Head & Neck region)
- Haematology
- Clinical Biochemistry
- Clinical Pathology
- Infectious Disease Serology
- General & Oral Microbiology
- Forensic Odontology
- Medico-Legal Consultant
- Well Versed with routine & advanced medical diagnostic laboratory equipments and techniques
- Quality Management Systems related to medical diagnostic laboratory
- Management of diagnostic centre with both laboratory & imaging/radiological modalities
- Establishment of new diagnostic centre with both laboratory & imaging/radiological modalities within a stipulated time

1021, URBAN ESTATE II, HISAR, HARYANA (125001) M : 98960-37444, 70270-38190
E-mail (1) : copmdhisar@gmail.com | E-mail (2) : dr.bhuvannagpal@gmail.com

TU-MOR CELL STORY

neuron
Institute of Applied Research
Living Research

TU-MOR CELL STORY

www.magazine.popma.in

Dr. Ketki Kalele

M.D.S., Oral and Maxillofacial Pathology and Oncology



FOUNDER, NEURON INSTITUTE OF APPLIED RESEARCH
MANAGING DIRECTOR, WARKAS RESEARCH AND INNOVATIONS PVT. LTD.
DIRECTOR DENT-O-PATH, ORAL AND MAXILLOFACIAL HISTOPATHOLOGY DIAGNOSIS
VICE PRESIDENT, PRACTISING ORAL PATHOLOGY AND MICROBIOLOGY ASSOCIATION (POPMA)

founder@neuronresearch.org

ORAL PATHOLOGY MERA KARMA,
ORAL PATHOLOGY MERA DHARMA
ORAL PATHOLOGY MERA ABHIMAN HAI



M. 70270-38190
www.popma.in

POPMA
PRACTICING ORAL PATHOLOGISTS AND MICROBIOLOGISTS ASSOCIATION (REGD.)

POPMA

POPMA

PRACTICING ORAL PATHOLOGISTS AND MICROBIOLOGISTS ASSOCIATION (REGD.)

SAY YES!

To Membership

Say Yes to Connection

Say Yes to Advancement

SAY YES TO TRANSFORMING YOUR CAREER

Becoming a POPMA member is so much more than maintaining status quo; it is about affirming your commitment to excellence and growth as an Oral Pathologist. It is about saying YES to a career that is cornerstone of patient care. It is about saying YES to a future where innovation and collaboration drive our field forward. It is about saying YES not only to affecting change in my career, but also to the lives of my patients

BECOME A POPMA MEMBER TODAY!