



# UPOA ARTHROPLASTY COURSE

**Sunday, 24th August 2025**

**Timing : 8:30am onwards**

**VENUE :**

**Kalyan Singh Habitat Centre**

## **IOA PRESIDENT THEME**

**OLD is GOLD**

**360o care of Elderly**

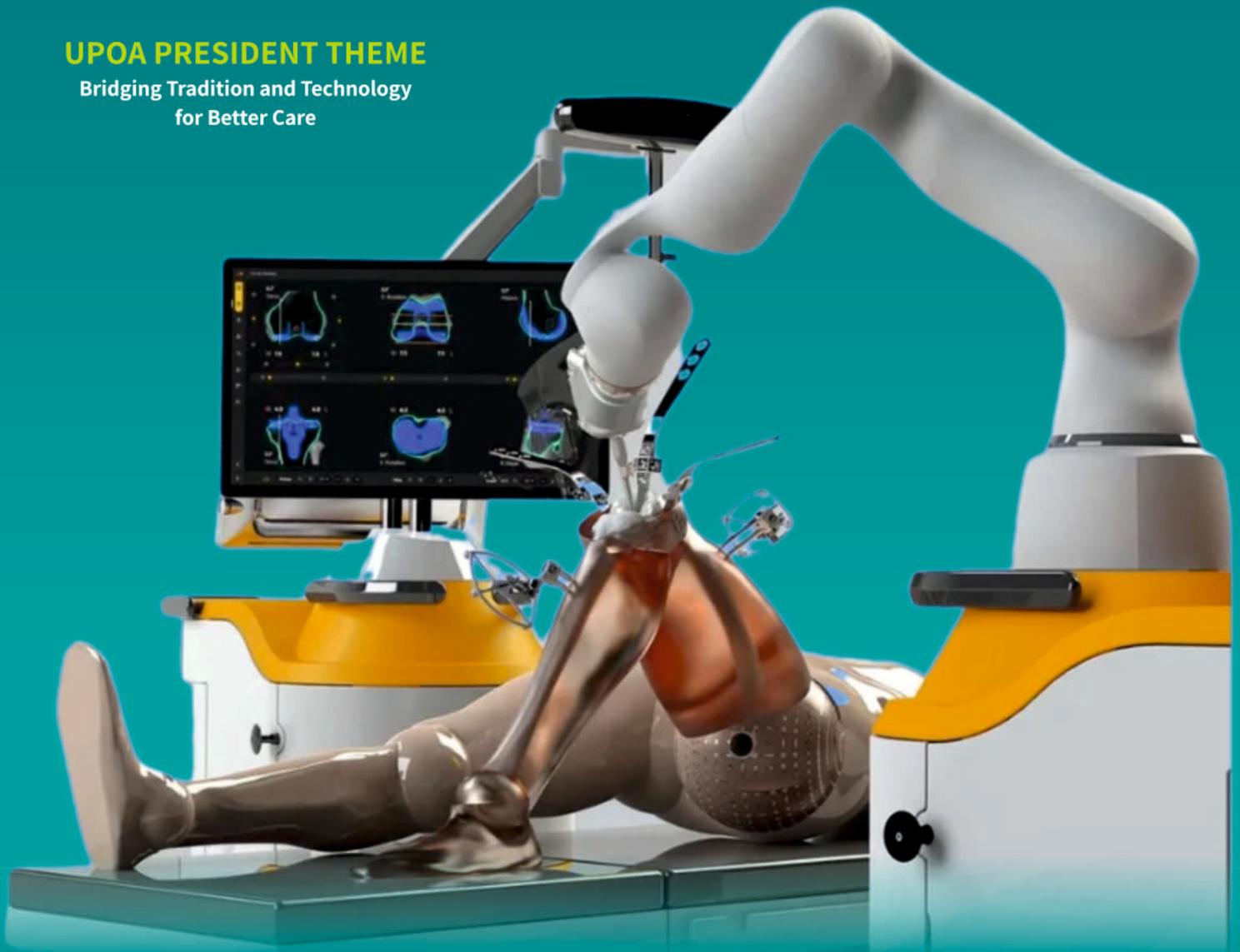
**Ensuring Mobility, Dignity, Longevity**

## **THEME :**

**“Revolutionizing Mobility : Mastering Robotic  
Knee Replacement Techniques”**

## **UPOA PRESIDENT THEME**

**Bridging Tradition and Technology  
for Better Care**



**Organized by :**

**Aligarh Orthopaedic Club**

# Welcome

## MESSAGE

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Dear Delegates and Esteemed Guests,

With great pleasure and pride we welcome you to the 11th UPOA Arthroplasty Course, being held in the historic city of Aligarh. This course will serve as a premier academic event in the region, bringing together leading experts, dedicated orthopedic surgeons, and passionate learners for a comprehensive and enriching exchange of knowledge on arthroplasty.

On 24 th August you will engage with the latest advancements in arthroplasty participate in thought-provoking discussions, and gain **hands-on experience with a robotic workshop** that will enhance your clinical practice. We are confident that this course will provide not only valuable insights into surgical techniques and innovations but also foster camaraderie and collaboration among peers.

We invite you to be part of this academic journey and look forward to a successful, inspiring, and memorable experience together in Aligarh.

Warm regards,

**Organizing Committee**

**11th UPOA Arthroplasty Course**

Aligarh

# ORGANIZING COMMITTEE

PRESIDENT UPOA  
**Dr. Piyush Kumar Misra**

PRESIDENT ELECT UPOA  
**Dr. Santosh Singh**

SECRETARY UPOA  
**Dr. Amit Jaiswal**

ORG. CHAIRMAN  
**Dr. Manoj Mittal**  
Mob. : 09412732488

ORG. SECRETARY  
**Dr. Keshav Gupta**  
Mob. : 09897198719

TREASURER  
**Dr. G.K. Singh**  
Mob. : 08899577788

## PATRON

**Dr. Pradeep Kumar**

**Prof. M.K.A. Sherwani**

**Prof. M. Zahid**

**Dr. Gyan Kumar**

## JOINT ORG. SECRETARY

**Dr. Parag Shekhar**

**Dr. Vikram Sehgal**

**Dr. Vinod Singh**

**Dr. Bashir R. Khan**

**Dr. Rajesh Gupta**

## CO-ORGANISING CHAIRMEN

**Dr. Sanjeev Garg**  
**Prof. N. Asif**

**Dr. K.K. Singh**  
**Prof. Mazhar Abbas**

**Dr. Virendra Chaudhary**  
**Dr. Rohit Vashishth**

**Dr. Deepak Shah**

**Dr. Brijesh Tyagi**

## SCIENTIFIC CHAIRMAN

**Prof. Amir Bin Sabir**

**Prof. Abdul Qayyum Khan**

## SCIENTIFIC COMMITTEE

**Dr. Manoj Garg**  
**Dr. Ayush Bhargav**

**Dr. Fazlur Rehman**  
**Dr. Sohail Ahmad**

**Dr. L.Z. Jilani**  
**Dr. Sumit Singhal**

**Dr. Ankur Agrawal**

**Dr. Saumya Sood**

## CME VENUE COMMITTEE

**Dr. Abhishek Singh**  
**Dr. Manglik**  
**Dr. Vivek Jain**

**Dr. Ayush Singhal**  
**Dr. S.K. Varshney**  
**Dr. Praveen Garg**

**Dr. Ashok Agrawal**  
**Dr. V.K. Gupta**  
**Dr. Ashish Yadav**

## JOINT TREASURER

**Dr. Eshan Sharma**

**Dr. Yasir. S. Siddique**  
**Dr. Ranjan Mohan**

**Dr. Chandan Singh**

## PRESIDENT AOC

**Dr. Deepak Kumar**

## CORE COMMITTEE

**Dr. Zeeshan**

**Dr. Tuffail**

**Dr. Vivek Sharma**

**Dr. Brijbhan**

**Dr. Zulfiqar Ali**



# UPOA ARTHROPLASTY COURSE

Sunday **24th August 2025**

VENUE : Kalyan Singh Habitat Centre, Aligarh

## REGISTRATION FORM

(Please fill the form in CAPITAL letters only)

Title : **Dr./Prof./Mr./Mrs.** (Please tick as appropriate)

Name : .....

Designation : .....

Gender (Male/Female) : ..... Address : .....

City : ..... Pin : ..... State : ..... Country .....

Mobile No. .... Ph. Resi (STD) : ..... Ph. Office (STD) : .....

E-mail : .....

<b>Registration Fee :</b>	Registration fees	₹1500/-
	PG students	₹1000/-
	Hand's on Robotic saw bone workshop	₹500/-

M/S.M/S UPOA ARTHROPLASTY COURSE ALIGARH ORTHOPAEDIC CLUB

Scan and Pay



UPI ID - MSMSUPOAARTHRO...@icici



iMobile Pay | e₹ | G Pay | CRED

**Mandatory registration of conference to register for Robotic Workshop**

### Payment Details

Paid Rs. .... (Rs. in words ..... only) by

Cash/DD No./Cheque No./Online payment Ref. No. ....

Dated : ..... Bank Detail.....

(\*Registration subject to realization of cheque.)

### For Payment :

Name : **UPOA ARTHROPLASTY COURSE ALIGARH ORTHOPAEDIC CLUB**

Account : **740401000594**

Bank : **ICICI Bank, Masoodabad Branch, Aligarh**

IFSC Code : **ICIC0007404**

Account Type : **Current**

Place ..... Date .....

Signature of Delegate

## ADDRESS FOR CORRESPONDENCE

CONTACT PERSON

**Dr. Keshav Gupta**

**Vansh Hospital & Trauma Centre, C-8, Awas Vikas Colony, Masoodabad Chauraha, G.T. Road, Aligarh**

Mob. : 9897198719 e-mail : drkeshavgupta@gmail.com

**(Filled form should be sent to this email and whatsapp number)**