



1st VIRTUAL ISPRP NATIONAL CONFERENCE

REGISTRATION FORM



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Scientific Presentation: Paper Poster None

Faculty Postgraduate Intern

Year of Postgraduation: FIRST YEAR

ACCOUNT DETAILS

Account Name : ISPRP

Account number: 02452200041220

Bank Details : Syndicate Bank

Branch Details. : ABSMIDS Branch

IFSC Code. : SYNB0000245

Mode of payment : Gpay Phonepe Paytm NEFT/RTGS

Account details of money transfer: 35768778829

Account holders name : P NEENU KRISHNAN P

Transaction ID: 036512671781

Phone Number Of Transfer Details : 9562202183

Signature of HOD
(mandatory for student delegate)

Signature of Delegate

(Kindly mail the scanned copy to : virtualisprp2021scientific@gmail.com)

ABSTRACT FORM

ISPRP Membership Number : _____

Category of participation: (Tick appropriate category)

Paper e-Poster

Title of the paper/poster: COMPARATIVE EVALUATION OF EFFECT OF

CURCUMIN AND CHLORHEXIDINE ON HUMAN FIBROBLAST VIABILITY & MIGRATION
AN- INVITRO STUDY

Category: Original research Case report / series Survey

Interdisciplinary Review (e-Poster for 1yr PG / Interns)

Implants

Name of the presenters:

1. Dr. NEENU KRISHNAN.P

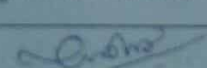
2. _____

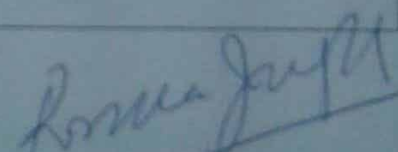
3. _____

(Maximum of 3 authors for Paper / e-Poster presentation from 3 different Specialties.)

Name of the Guide: Dr. ROSAMMA JOSEPH V

Name of the institution: GOVT. DENTAL COLLEGE, KOZHIKODE

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