

# MNR

# iNFOCUS

*Enriching the innerself*

March 2022

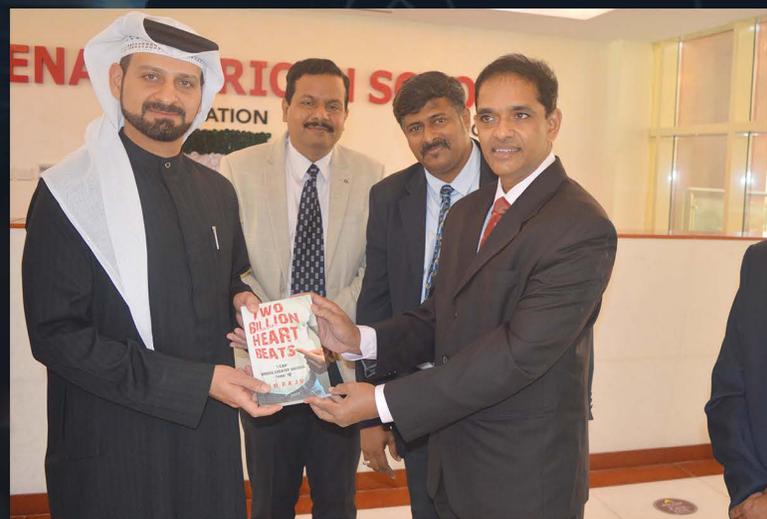
MNR's IN-HOUSE MAGAZINE



Vice Chairman-MNR Group, **Shri Ravi Varma M.S** receives Royal family member of Sharjah **Sheikh Khalid Humaid Al Qasimi** at Manthena American School, Sharjah, UAE.

# MANTHENA AMERICAN SCHOOL SHARJAH, UAE

## Opening of Innovation Hub in Manthena American School, Sharjah.



# Editorial.....



**INFOCUS**  
**MNR's In-House**  
**Magazine**

**MARCH 2022**

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## Time Management

**Dear Readers,**

“Lost wealth maybe replaced by industry, lost knowledge by study, lost health by temperance or medicine, but lost time is gone forever”.

**-Samuel Smiles**

Time management is the process of planning and exercising conscious control of time spent on specific activities, especially to increase effectiveness, efficiency, and productivity.

One of the characteristics of successful people is how they manage their time. The interesting thing is that no one can actually manage time. All we can manage is our use of time. When we stop to consider that time is not hours, minutes and seconds but our life, time management becomes significant. Making the most productive use of the time we have, makes enormous sense. It is rightly said “Time and Tide waits for none”. An individual should understand the value of the time for him to succeed in all aspects of life. People who waste time are the ones who fail to create an identity of their own.

Time management plays a very important role not only in organizations but also in our personal lives. It includes:

- o Effective planning.
- o Setting goals and objectives.
- o Setting deadlines.
- o Delegation of responsibilities.
- o Spending the right time on the right activity.

**“Time management is life management”.**

**Editor**



# SUCCESS

*Oft have I brooded on defeat and pain,  
The pathos of the stupid, stumbling throng.  
These I ignore to-day and only long  
To pour my soul forth in one trumpet strain,  
One clear, grief-shattering, triumphant song,  
For all the victories of man's high endeavor,  
Palm-bearing, laurel deeds that live forever,  
The splendor clothing him whose will is strong.  
Hast thou beheld the deep, glad eyes of one  
Who has persisted and achieved? Rejoice!  
On naught diviner shines the all-seeing sun.  
Salute him with free heart and choral voice,  
'Midst flippant, feeble crowds of spectres wan,  
The bold, significant, successful man.*



# YOU ARE YOUR MIND-LII

**S**ir Edward Dyer (1543-1607) was an English poet of the Elizabethan period. He is known for his lyric “My mind to me is a Kingdom”

## He wrote

- My mind to me a Kingdom is,  
Such present joy therein I find.  
That it excels all other bliss  
That world affords or grows by kind.  
Though much I want which most would  
have  
Yet still my mind forbids to crave.

- My wealth is health and perfect case  
My conscience clear, my choice defence.  
Dyer’s words give many shades of your thinking process. Your mind has no substance, no boundary, no placement in time or space. It is always with you, guiding and directing your life.

It is your kingdom and you are the king of your kingdom. You are the Chief Minister. You are its army. You are its people. You can only rule it. You can only make it a battle field or a peaceful palace. You can only make it a court of conflict or a



**Sri M N. Raju**  
Chairman  
MNR Educational Trust

court of music and dance. You can be a servant or a master to your mind. If you become a servant to your mind, you are destroyed and you will be a failure and if you are the master of your mind you will be a success.

Hence you invite and recognize your mind’s powers, which are invisible and live in its magnitude dominions.

Generally we blame others for our failures. We think we are not lucky. But this is all wrong and it is only fear.

There is nothing outside to blame. Your inner kingdom has all the choices that are powerful than you craving and luck.

Every fear comes not from outside but you choose to use your mind. If you condition your mind free from fear, you are not afraid even of death. Dyer says “I loath not life nor dread my end.”

Your mind is the cause of your health and well being. He says “My wealth is health and perfect ease”. Change your thoughts and you can produce molecules of health. You can lower BP, cure ulcers, diabetes and many more diseases.

Balancing life through your mind between any two extreme ends is the secret of a good life, that is, between work and leisure, life and death, pleasure and sadness etc.

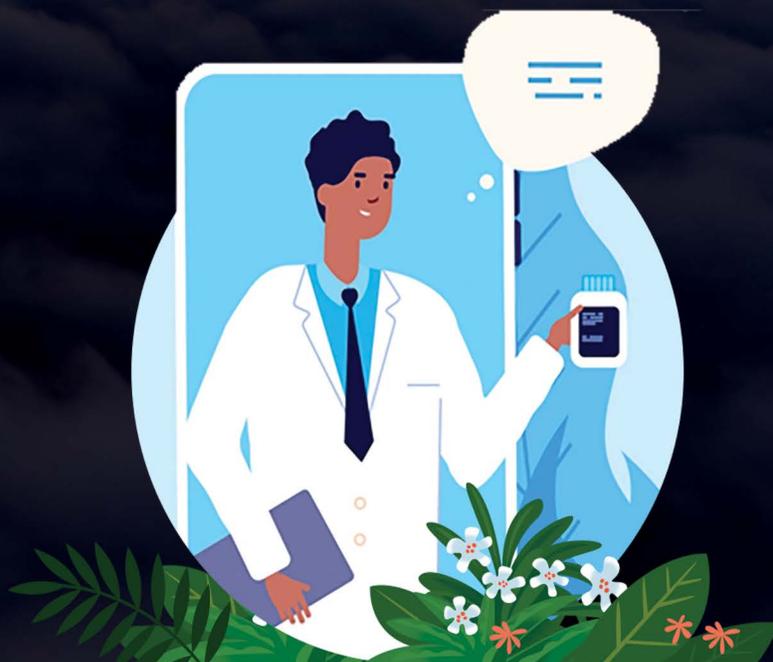
Pathanjali, who wrote “Yoga Sutras” had established an act of balancing mind through Meditation. His theory of meditation is accepted and followed world wide as the best way of balancing human mind. It is dealt with how to build a spiritual base and liberate and to know God within one self.

### He said.

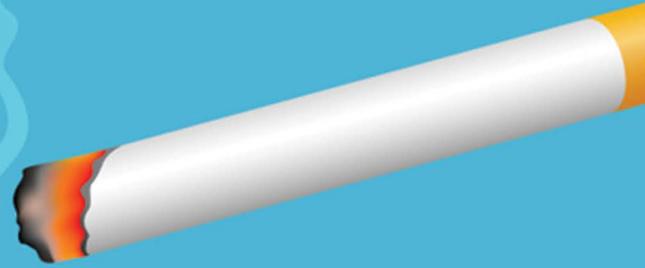
- When you are inspired by some great purpose, some extra-ordinary project, all your thoughts break their bonds.
- Your mind transcends limitations, your consciousness expands in every direction and you find yourself in a new great wonderful world.
- Dormant forces, faculties and talents become alive in you.
- You discover yourself to be a great person by far than you ever dreamed yourself to be.
- The body and the mind shall be in harmony.

- One becomes a cultured man and he gives happiness wherever he goes. This is not the case with an uncultured, who gives unhappiness wherever he goes.
- The highest form of grace of mind is ‘silence’ and it is possible by meditation.
- You will not put your key of happiness in other’s pocket.
- You don’t add days to your life, but you add life to your days.

**Emerson said “The measure of mental health is the disposition to find good everywhere.”**



# EFFECTS OF TOBACCO ON ORAL HEALTH



**Mrs. Dr. P. Harshitha**  
**MDS 3rd year**

Oral Medicine and Radiology



**S**moking is one of the most common forms of recreational drug use. Tobacco smoking is the most popular form, being practiced by over one billion people globally. Although cigarettes are the most commonly used form of tobacco, other recreational tobacco formulations include conventional smokeless tobacco; compressed dissolvable tobacco; cigars; tobacco pipes and water pipes (i.e., hookahs); and electronic cigarettes (e-cigarettes).

Since the tobacco that people breathe in and out is actually toxic and harmful to the entire body, this damage is not confined to one area of the body. Most people are aware of the effect that smoking can have on their body and

general health, but many are unaware of the effects that smoking has on their mouth. If you're a smoker or you use smokeless tobacco products, here's what you should know about the oral health risks you're facing.

- Increased risk of oral cancer
- Gum disease
- Stained teeth
- Bad breath (halitosis/oral malodor)
- Tooth loss
- Loss of taste and smell
- Reduced blood supply to the mouth
- Increased build-up of plaque biofilm and tartar on your teeth

- Delayed healing following tooth extraction and other surgery in the mouth

Smokers are 7-10 times more likely to suffer from oral cancer than people who have never smoked. Long-term, regular users of smokeless tobacco being more than 11 times more at risk than a non-user.

## Cessation Counseling

Many of the negative effects of tobacco use on the mouth are reversible. Whether smoked or chewed, nicotine from tobacco is highly addictive, which makes stopping a major challenge for most users. The majority of cigarette smokers report that they would like to stop, having made many attempts to quit. Some people can stop without any support, however, most people benefit from using smoking cessation medications and the support of their local stop smoking service.

2. **Advise:** In a clear, strong, and personalized manner, urge every tobacco user to quit.

3. **Assess:** Is the tobacco user willing to make a quit attempt at this time?

4. **Assist:** For the patient willing to make a quit attempt, use counseling and pharmacotherapy to help him or her quit.

5. **Arrange:** Schedule follow-up contact, in person or by telephone, preferably within the first week after the quit date.



1. **Ask:** Identify and document tobacco use status for every patient at every visit.



# TURTLE NECK SYNDROME



Mrs. P. MOUNIKA Mpt  
(ortho)

MNR's Sanjeevani College of Physiotherapy

Text neck” is a term that has been coined to describe the posture formed by leaning forward for prolonged periods, for example when viewing a cellphone while reading and texting, reported to cause stress injuries. This posture often results in cervical and shoulder pain, headaches and thoracic hyperkyphosis.

The muscles, joints and ligaments become stressed as they work harder together to hold your head in such a precarious angle. This condition is also known as turtle neck posture or anterior head syndrome. This condition is growing lifestyles and health condition with the constant growth in mobile user population all over the world.

It is a cause for increasing concern especially with children given their greater propensity to mobile phone usage.

## SYMPTOMS OF TEXT NECK:

Flexing the head forward to use a smartphone directly affects the spine.

- Tilting the head forward to 15 degrees places about 27 pounds of force on the neck.
- This increases to 40 pounds at 30

degrees, 49 pounds at 45 degrees and 60 pounds at 60 degrees.

Damage caused by untreated text neck can be similar to occupational overuse syndrome or repetitive stress/strain injury.

The most common presentation of Text Neck is neck pain, stiffness and soreness. The main symptoms include:

- **Stiff neck:** soreness and difficulty in moving the neck is usually present when trying to move the neck after long usages
- **Pain:** can be localized to one spot or may be diffused over an area, usually lower part of the neck. Can be described as dull aching or can also be sharp or stabbing in extreme cases
- **Radiating pain:** there can often be radiation of pain into the shoulders and arms.
- **Muscular weakness:** shoulders muscles



namely, trapezius, rhomboids and shoulder external rotators are often weak

• **Headache:** sub-occipital muscle tightness can lead to tension type headaches.

**In addition to these common symptoms there can also be:**

- Flattening of thoracic kyphosis
- Early onset arthritis
- Spinal degeneration
- Disc compression
- Muscle weakness
- Loss of lung capacity

Prevention is the key when it comes to Text Neck. The following recommendations from a systematic review of Text Neck should be kept in mind while using smartphones or other hand held devices:

**PRECAUTIONS:**

- Avoid excessive usage of cell phones
- Avoid prolonged static postures
- Position the device such that it reduces stresses both on the head/neck and the upper extremities
- Avoid high repetitions of movements such as prolonged typing or swiping
- Avoid holding large or heavy devices in one hand for long duration

**PHYSIOTHERAPY EXERCISES FOR TEXT NECK:**

Rehabilitation is found to be very effective in treating the stress injury resulting from Text Neck. Rehabilitation can be designed as a 2-4 week program.

1. Soft tissue mobilization, Grade 1 and 2 joint mobilization

2. Active and passive stretches of tight muscles.
3. Muscle strengthening
4. Posture retraining.
5. Home exercise program.

In acute cases, pain relief is the main goal. It can be achieved by:

1. Regular neck movements: rotations and side bending
2. Restoring function to upper trapezius and serratus
3. Chin tuck exercises
4. Ice/heat packs
5. Massage

**NECK BENDING**



In extreme chronic cases pain medication, injection into the facet joint or trigger point or acupuncture can be done.



# DRUG RELATED TRAGEDIES AND THEIR WITHDRAWALS

Mr. Dr. K. Lankeshwar Rao  
Assistant Professor,  
MNR COLLEGE OF PHARMACY.



**Drug:** A chemical substance used in the treatment, cure, prevention, or diagnosis of disease or used to otherwise enhance physical or mental well-being.

**Dose:** A quantity of medicine prescribed which is to be taken at one time.

**Dosage form:** A dosage form is the physical type and amount of a medication, such as a tablet, capsule or injection. The route of administration is dependent on the dosage form of a given drug.

**Route of administration:** A route of administration is the path by which a drug, fluid, poison, or other substance is brought into contact with the body.

**Side effect:** The side-effects of a drug are the effects, usually bad ones, that the drug has on you in addition to its function of curing illness or pain.

**Adverse drug reaction:** An adverse drug reaction (ADR) is an injury caused by taking a medication. ADRs may occur following a single dose or prolonged administration of a drug or result from the combination of

two or more drugs.

Over the past hundred years there have been many number of drugs were being withdrawn from American, European, and Asian markets in consideration with patients safety. The reason for these drugs withdrawn are many including teratogenic effects, cardiogenic, central nervous system related etc. Here discussed about some of the popular drug withdrawals from markets.

## THE THALIDOMIDE DISASTER:

What is the thalidomide disaster?

The thalidomide disaster is one of the darkest episodes in pharmaceutical research history. The drug was marketed as a mild sleeping pill safe even for pregnant women. However, it caused thousands of babies worldwide to be born with malformed limbs. The damage was revealed in 1962.

IUPAC name 2-(2,6-Dioxo-3-piperidiny)-1H-isoindole-1,3(2H)-dione

## **When did the thalidomide tragedy occur?**

In the United Kingdom, the drug was licensed in 1958 and withdrawn in 1961. Of the approximately 2,000 babies born with defects, around half died within a few months and 466 survived to at least 2010. In Spain, thalidomide was widely available throughout the 1970s, perhaps even into the 1980s.

## **How many children were affected by thalidomide?**

No-one knows how many miscarriages the drug caused, but it's estimated that, in Germany alone, 10,000 babies were born affected by Thalidomide. Many were too damaged to survive for long. Today, fewer than 3,000 are still alive

## **Why was thalidomide given to mothers?**

Researchers may have finally figured out the mechanism of the tragic birth defects caused by thalidomide, the drug taken by pregnant women in the late 1950s as a remedy for nausea: It is thought to have inhibited development of new blood vessels at a crucial stage in the pregnancy

Frances Oldham Kelsey. Frances Kathleen Oldham Kelsey, CM (July 24, 1914 – August 7, 2015) was a Canadian-American pharmacologist and physician. As a reviewer for the U.S. Food and Drug Administration (FDA), she refused to authorize thalidomide for market because she had concerns about the drug's safety.

## **What is Thalidomide induced Phocomelia?**

Word "Phocomelia" means seal limb. It describes an extremely rare condition in which babies are born with limbs that look

like flippers. ... By then, 10,000 children, mostly in Europe, had been born with thalidomide-induced birth defects.

## **ROFECOXIB:**

Rofecoxib is a nonsteroidal anti-inflammatory drug (NSAID) that has now been withdrawn over safety concerns. It was marketed by Merck & Co. to treat osteoarthritis, acute pain conditions, and dysmenorrhea. Rofecoxib was approved by the U.S. Food and Drug Administration (FDA) on May 20, 1999, and was marketed under the brand names Vioxx, Ceoxx, and Ceeoxx.

3-(4-methyl sulphonyl phenyl)-4-phenyl-2H-furan-5-one

Rofecoxib gained widespread acceptance among physicians treating patients with arthritis and other conditions causing chronic or acute pain. Worldwide, over 80 million people were prescribed rofecoxib at some time.

On September 30, 2004, Merck withdrew rofecoxib from the market because of concerns about increased risk of heart attack and stroke associated with long-term, high-dosage use. Merck withdrew the drug after disclosures that it withheld information about rofecoxib's risks from doctors and patients for over five years, resulting in between 88,000 and 140,000 cases of serious heart disease. Rofecoxib was one of the most widely used drugs ever to be withdrawn from the market. Rofecoxib was available on prescription in both tablet-form and as an oral suspension. It was available by injection for hospital use.

**Efalizumab:** (trade name Raptiva, Genentech, Merck Serono)

It is a formerly available medication designed to treat autoimmune diseases,



originally marketed to treat psoriasis. As implied by the suffix -zumab, it is a recombinant humanized monoclonal antibody administered once weekly by subcutaneous injection. Efalizumab binds to the CD11a subunit of lymphocyte function-associated antigen 1 and acts as an immunosuppressant by inhibiting lymphocyte activation and cell migration out of blood vessels into tissues. Efalizumab was associated with fatal brain infections and was withdrawn from the market in 2009. Known side effects include bacterial sepsis, viral meningitis, invasive fungal disease and progressive multifocal leukoencephalopathy (PML), a brain infection caused by reactivation of latent JC virus infection. Four cases of PML were reported in plaque psoriasis patients, an incidence of approximately one in 500 treated patients.

Due to the risk of PML, the European Medicines Agency and the FDA recommended suspension from the market in the European Union and the United States, respectively. In April 2009, Genentech Inc. announced a phased voluntary withdrawal of Raptiva from the U.S. market.

### **Iproniazid (Marsilid, Rivivol, Euphozid, Iprazid, Ipronid, Ipronin)**

N'-propane-2-ylpyridine-4-carbohydrazide

It is a non-selective, irreversible monoamine oxidase inhibitor (MAOI) of the hydrazine class. It was discontinued in most of the world in the 1960s, but remained in use in France until fairly recently.

Iproniazid was originally developed for the treatment of tuberculosis, but in 1952, its antidepressant properties were discovered when researchers noted that patients given iproniazid became inappropriately happy. Subsequently N-isopropyl addition led to development as an antidepressant

and was approved for use in 1958. It was withdrawn a few years later in 1961 due to a high incidence of hepatitis, and was replaced by less hepatotoxic drugs such as phenelzine and isocarboxazid.

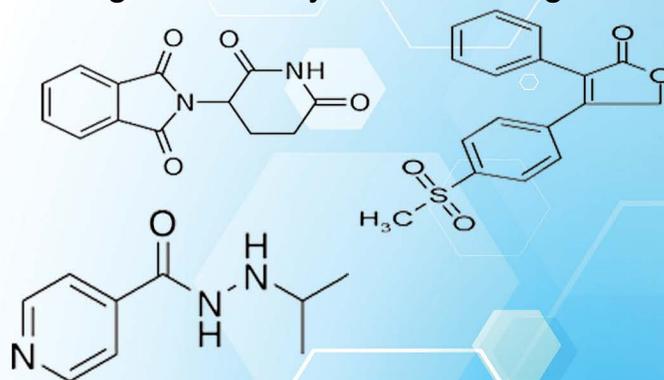
### **Penbutolol: (brand names Levatol, Levatolol, Lobeta, Paginol, Hostabl, Betapressin)**

(2S)-1-(tert-butylamino)-3-(2-cyclopentylphenoxy)propan-2-ol

It is a medication in the class of beta blockers, used in the treatment of high blood pressure. Penbutolol is able to bind to both beta-1 adrenergic receptors and beta-2 adrenergic receptors (the two subtypes), thus making it a non-selective  $\beta$  blocker. Penbutolol is a sympathomimetic drug with properties allowing it to act as a partial agonist at  $\beta$  adrenergic receptors. Penbutolol was approved by the FDA in 1987. In January 2015 the FDA acknowledged that the penbutolol was no longer marketed in the US, and determined that the drug was withdrawn for safety reasons.

### **Conclusion:**

There are many drugs which were withdrawn from different drug markets across the globe after getting negative reports from post marketing surveillance. Hence a qualitative clinical trial studies are mandatory for releasing a new drug molecule for patients use and strict post marketing surveillance is to be done for checking the efficacy of newer drugs.



# Heart Rate Variability-Based Driver Drowsiness Detection and Its Validation With EEG

## Introduction

The risk of traffic accidents in drowsy drivers is estimated to be four to six times higher than in awake drivers. According to the study, the risk of traffic accident occurrence increases regardless of the drivers' subjective sleepiness when they have sleep apnea or their sleep duration is insufficient. In order to prevent accidents caused by drowsy driving, a driver-assistance system that detects drowsy driving and provides a warning would be effective.

In sleep medicine, electroencephalography (EEG) recording is necessary for sleep scoring because sleep onsets and sleep stages are defined based on EEG. Although EEG-based drowsiness detection methods have been developed, it is difficult to record EEG accurately during driving since EEG recording is intolerant to motion artifacts and puts significant restrictions on the body.

Driver drowsiness detection is a key technology that can prevent fatal car accidents caused by drowsy driving. The present work proposes a driver drowsiness detection algorithm based on heart rate variability (HRV) analysis and validates the proposed method by comparing with electroencephalography (EEG)-based sleep scoring. Changes in sleep condition affect the autonomic nervous system and then HRV, which is defined as an RR interval (RRI) fluctuation on an electrocardiogram trace. Eight HRV features are monitored for detecting changes in HRV by using



multivariate statistical process control, which is a well known anomaly detection method.

Drowsiness detection method that uses HRV analysis and linear discriminant analysis (LDA). However, the method uses ECG-derived respiratory information in addition to HRV, and ECG signal analysis is still needed. The system utilizes driver face images as well as HRV. A neural network (NN)-based drowsiness detection model which uses the power spectral density (PSD) of RRI fluctuation as input variables of the NN model. The method would require a large amount of computational resources because the NN model is complicated and its number of input features is 900. A simple methodology for detecting drowsy driving should be developed for realizing a wearable drowsy driving detection system.

## Method

### EEG-Based Sleep Scoring

Sleep consists of REM (rapid eye movement sleep) and NREM (non-REM sleep), which is categorized into three levels: N1, N2, and N3. N1 is also called transitional sleep or light sleep. According to the sleep scoring manual, sleep stages are discriminated based on the 30-second

epoch-based EEG scoring method. The N1 onset (sleep onset) is defined by the epoch in which  $\alpha$  wave (8–13 Hz) activity is attenuated and replaced by low-amplitude, mixed-frequency activities that occupy more than 50% of the epoch.

Drivers may feel drowsiness shortly before N1, which causes mild cognitive dysfunction, and some researchers have attempted drowsy EEG identification. On the other hand, falling asleep directly contributes to traffic accidents. N1 usually occurs between wakefulness and deeper sleep stages. During N1, the muscles are still active, the eyes open and close moderately, and persons can be easily awakened by a sensory stimulus. Thus, driver drowsiness should be detected prior to the N1 onset (sleep onset), when a driver can be easily wakened by a stimulus.

It is noteworthy that we cannot define a sleep onset with the accuracy of less than 30 seconds because sleep scoring is based on the 30-second EEG epoch-based method.

### Heart Rate Variability Analysis

The R wave is the highest peak on an ECG, and the RR interval (RRI) [ms] is defined as the interval between an R wave and the next R wave. HRV is the fluctuation of RRI, which is a physiological phenomenon reflecting ANS activities. Thus, HRV analysis has been used for monitoring stress, and cardiovascular disease.

Although there are two types of HRV features—linear features and nonlinear features—this work uses the former, simply because the extraction of nonlinear features requires a long-term RRI measurement for stable calculation, which is not appropriate for real-time applications like drowsy driving detection. The linear HRV features are classified into time domain features

and frequency domain features.

### Drowsy Driving Detection

In drowsy driving detection, the awake data and the drowsy data are regarded as normal data and anomalous data, respectively. To build an accurate discriminant model by using both the awake data and the drowsy data, a sufficient amount of drowsy data needs to be collected from drivers. However, in practice, collecting such drowsy data is more difficult than the awake data. Thus, drowsy driving detection is formulated as an anomaly detection problem, in which a model is developed from the awake data only.

### Conclusion

A driver drowsiness detection method was proposed utilizing the framework of epileptic seizure prediction, by which multiple HRV features are extracted from the RRI data and MSPC monitors abnormalities in the extracted HRV features. The experimental result showed that 12 out of 13 pre-N1 episodes were detected prior to sleep onsets, and the false positive rate was about 1.7 times per hour. The experimental result was discussed from the viewpoint of sleep science. This work demonstrated the usefulness of the framework of HRV-based anomaly detection because it can be applied to driver drowsiness detection as well as epileptic seizure prediction.



# Activities @ MNR Golden Kids (Navi Mumbai)



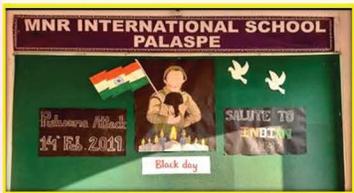
# Activities @ MNR Group of Schools



Bhel, Hyderabad



Bhel, Hyderabad



MNR International School



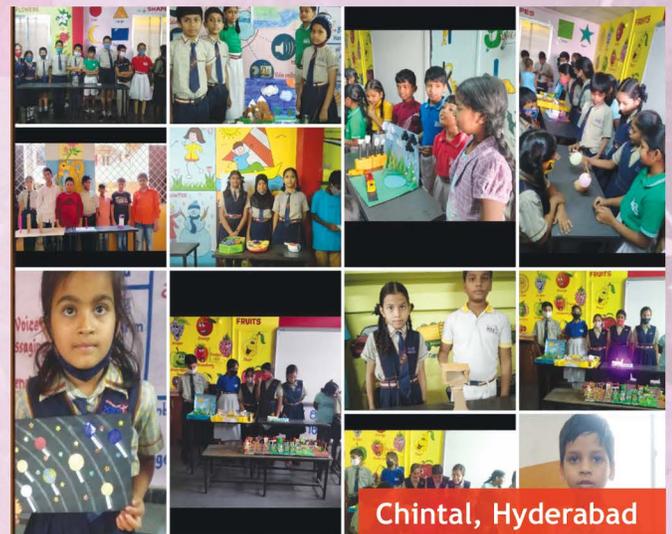
Ek  
Bharat  
Sreshth  
Bharat



Kukatpally, Hyderabad



Sangareddy, Hyderabad

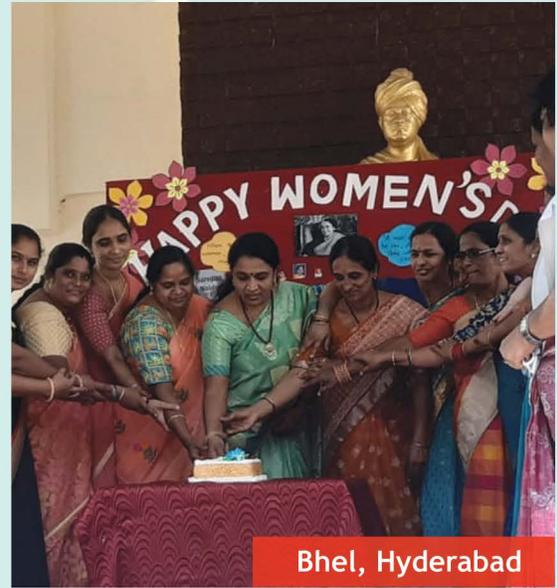


Chintal, Hyderabad

# Activities @ MNR Group of Schools



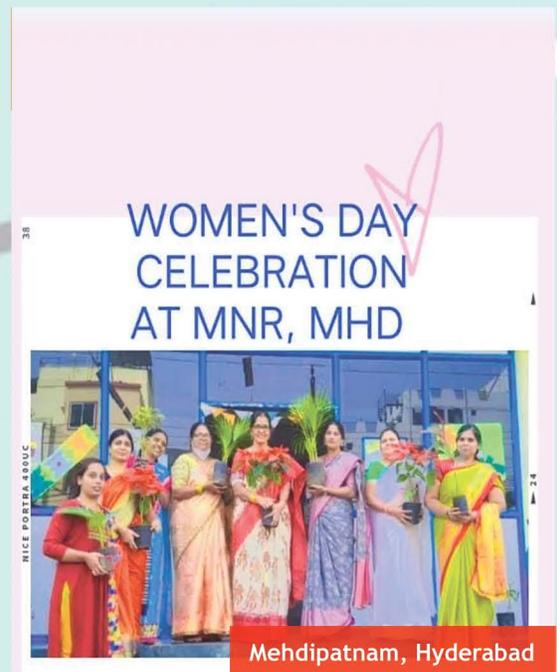
Kukatpally, Hyderabad



Bhel, Hyderabad



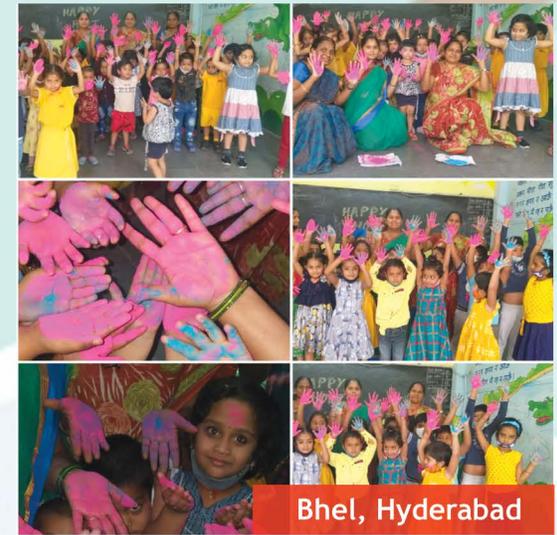
Kukatpally, Hyderabad



Mehdipatnam, Hyderabad



Navi Mumbai



Bhel, Hyderabad

# Events @ MNR Higher Education and Research Academy (MNR-HERA) Campus, Sangareddy, Telangana.

## ACTIVITIES IN MNR DENTAL COLLEGE AND HOSPITAL

ANTI-TOBACCO AWARENESS ZONE WAS INAUGURATED BY DR RAVINDRA SV ON THE OCCASION OF ORAL PATHOLOGIST DAY



INTERNATIONAL WOMENS DAY CELEBRATIONS AT MNR DENTAL COLLEGE AND HOSPITAL



MNR DENTAL COLLEGE AND HOSPITAL ORGANIZED 4TH INTERNATIONAL CONFERENCE ON DENTISTRY AND ORAL HEALTH, KUALA LUMPUR, MALAYSIA.

A DENTAL SCREENING AND TREATMENT CAMP AT MNR SCHOOL WAS ORGANIZED BY MNR DENTAL COLLEGE ON 20/03/22 AS A PART OF WORLD ORAL HEALTH DAY.

# Events @ MNR Higher Education and Research Academy (MNR-HERA) Campus, Sangareddy, Telangana.

## MNR ACHIEVEMENTS & APPRECIATION AWARDS -2022

### ASIA PACIFIC DENTAL EXCELLENCE AWARDS 2022



BEST ACADEMICIAN OF THE YEAR  
DR. RAVINDRA SV  
PRINCIPAL  
MNR DENTAL COLLEGE AND HOSPITAL

### ASIA PACIFIC DENTAL EXCELLENCE AWARDS 2022



RURAL DENTAL SERVICE AWARD  
DEPARTMENT OF PEDIATRIC  
AND PREVENTIVE DENTISTRY

### ASIA PACIFIC DENTAL EXCELLENCE AWARDS 2022



PEDODONTIST OF THE YEAR  
Dr. PRANITHA. V- Prof. & HOD  
Dept. OF PEDIATRIC &  
PREVENTIVE DENTISTRY

### 7th TSDC - WARANGAL 11th,12th & 13th FEB 2022



FACULTY PAPER PRESENTATION  
Dr. PRANITHA. V- Prof. & HOD  
Won Best Faculty Paper  
Presentation

### 7th TSDC - WARANGAL 11th,12th & 13th FEB 2022



PAPER PRESENTATION  
T. SHAINY RAO  
Final Year BDS  
Won 2nd Prize



PAPER PRESENTATION  
G. VAISHNAVI  
Final Year BDS  
Won 2nd Prize



PAPER PRESENTATION  
Dr. Y. AKHILA REDDY -  
MDS II Yr DEPT  
OF PROSTHODONTICS  
& IMPLANTOLOGY  
Won 2nd Prize



PAPER PRESENTATION  
Dr. SHRUTI AGARWAL  
MDS I Yr  
DEPT OF CONSERVATIVE  
DENTISTRY  
AND ENDODONTICS  
Won Consolation Prize

### 7th TSDC - WARANGAL 11th,12th & 13th FEB 2022



PAPER PRESENTATION  
Dr. HASINA KHAN  
MDS II Yr  
DEPT OF PEDIATRIC AND  
PREVENTIVE DENTISTRY  
Won Consolation Prize



PAPER PRESENTATION  
Dr. PREM SAGAR  
MDS I Yr  
DEPT OF ORAL &  
MAXILLOFACIAL SURGERY  
Won Consolation Prize



PAPER PRESENTATION  
Dr. RANGA ANAND  
MDS II Yr  
DEPT OF ORAL & MAXILLOFACIAL  
PATHOLOGY  
Won Consolation Prize



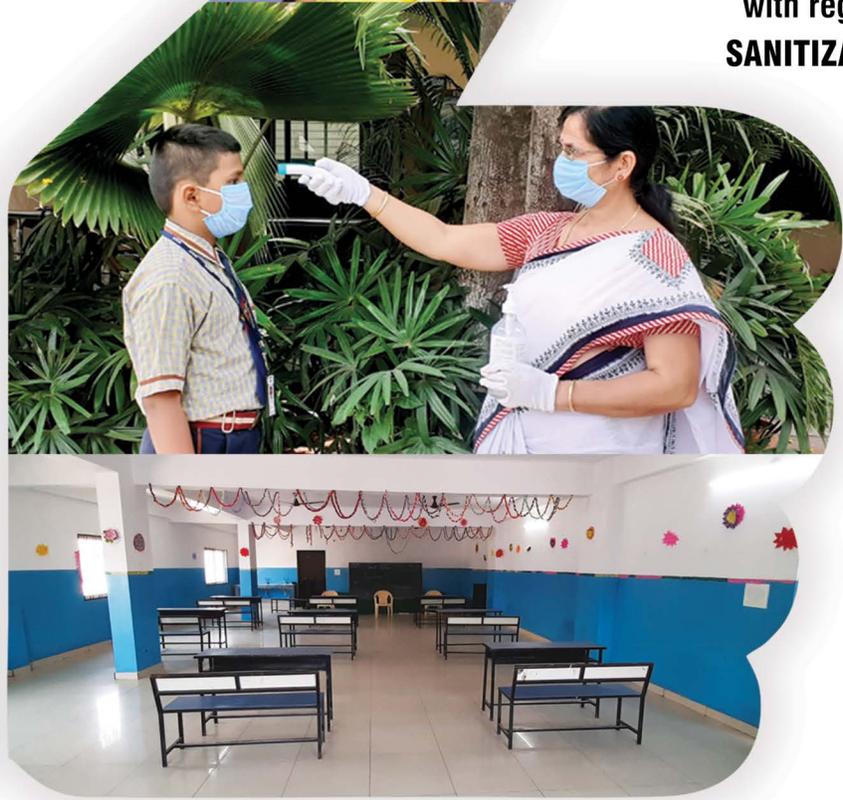
Our Motto

# EDUCATION *And* HEALTH



Well organized  
**BUS FACILITY**  
with regular  
**SANITIZATION**

Your  
child  
is in  
safe  
hands



- ◆ Sanitized school premises.
- ◆ **Spacious and well ventilated class rooms.**
- ◆ **Seating arrangements redesigned according to social distancing norms.**
- ◆ **Hygienic toilets.**
- ◆ Trained helpers to sanitize students at the entrance.
- ◆ Thermal screening everyday.
- ◆ **Hand sanitizer Provided**
- ◆ **Face Masks Mandatory for all.**
- ◆ Rescheduled time-table according to government guidelines.
- ◆ Well trained teachers and staff to deal with the pandemic.
- ◆ Awareness programmes for parents and students
- ◆ Frequent sanitization of common areas

# MNR GROUP OF SCHOOLS

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