

SFM Outreach CME @ Dehradun

National Faculty

**Register
Now**



Dr. Ashok Khurana



Dr. Krishna Gopal

Sunday | 24th May, 2026

**Adi Kailash Auditorium, Himalayan Institute of Medical Sciences,
SRHU, Jolly Grant, Dehradun-248016, Uttarakhand, India**



**Abstract Submission is Now Open! Submit Your Abstract Now &
Get a Chance to Present.**

Last Date of Submission: 30th April 2026

Submit at rashmirajput@srhu.edu.in or sfmsecretariat2017@gmail.com

Registration Fees - Early Bird Till 30th April 2026

**SFM Member - INR 800 | PG Students- INR 800 | Non Member- INR 1000
including 18% GST.**

 **Click Here To Register**

For More Information Email us at sfmsecretariat2017@gmail.com

**Call/Whatsapp Mr. Vishal Mittal - +91 9312227181, Dr Ruchira Nautiyal - +91 9410767892,
Dr. Latika Chawla - +91 9013074659, Dr. Rashmi Rajput - +91 9999240807**

Abstract Guidelines

Dear Colleague,

Society of Fetal Medicine encourages participation of all members through presentations at all its conferences, congresses and webinars. SFM Outreach Program at Dehradun, Uttarakhand will be held on 24th May 2026. It brings an excellent opportunity for you to present before the entire audience. This can be done if your abstract of original research/ work and case reports is selected for oral or poster presentation.

Submit your abstract today. Please do not miss the deadlines.

Abstract Submission Guidance

- All abstracts have to be sent to rashmirajput@srhu.edu.in or sfmsecretariat2017@gmail.com
- There are two categories:
 - Oral Paper Presentation
 - Electronic Poster
- Abstracts must be submitted in English,
- Each abstract should consist of a “formal” word file.
- All abstracts will be anonymised and peer reviewed by an independent set of judges.
- All the presenting authors need to register. In case your abstract is not accepted and you don't want to attend the CME, your registration will be refunded.
- The abstract body should be limited to 250 words and 15 words for the title of your submission.
- The title should be entered in CAPITAL LETTERS. Please do not put your title in quotation marks. Please do not use formatting tags in the title. Please do not add a full stop ('.') at the end of the title.
- The abstract must not contain any graphics, tables, pictures, or other types of figures.
- Abstracts should be structured using the following subdivision:
 - Introduction/ Background
 - Material and Methods
 - Results
 - Conclusions
 - Keywords
 - References (not exceeding 10)
- Authors must not include already published data
- Up to 8 co-authors may be included.
- If accepted for an oral presentation, the author will be able to make the presentation in front of a live audience at the CME. The time and other details of the session will be sent to the author in a separate email.
- If accepted for a poster presentation, the author will be required to submit the poster as a single ppt. slide in an electronic format in advance of the CME. Poster authors will be sent detailed guidance on how to do this, once their abstract is accepted. Posters will be made available electronically for delegates to access during the CME.
- By submitting an abstract, you authorize Society of Fetal Medicine to record your presentation (if accepted). All or a portion of presentations, discussion, question and answer, comments, documents and presentation slides presented will be recorded and may be selected for inclusion on the event platform, website, On Demand web portal for members, YouTube & social media. These may also be used for promotional purposes.

Abstract Topics and Presentation Styles

Please select a topic which is most applicable to your study. Please specify the preference for oral presentation or poster presentation. Please note that the Scientific Committee will make the final allocation when the abstract is accepted.

The topics of the abstract should be:

- 1. High Risk Obstetrics**
- 2. Challenges in Fetal Medicine Practice**

Important Dates

20th March, 2026 - Abstract Submission Opens

30th April, 2026 - Abstract Submission Closes

Notification of Acceptance will be sent via email to the presenting author

All Abstracts will be peer reviewed for selection.

Team SFM Uttarakhand Study Group

Scientific Program

Adi Kailash Auditorium

Time	Topic	Speaker
09:00 - 09:30 am	Registration	
Session 1		
09:30 - 10:00 am	Inverting the Pyramid of Antenatal Care	Dr. Ruchira Nautiyal
10:00 - 10:30 am	Second Trimester Biochemical Screening & Soft Markers	Dr. Latika Chawla
10:30 - 11:15 am	Inauguration & Tea	
Session 2		
11:15 - 12:00 am	FGR: Diagnosis & Surveillance	Dr. Ashok Khurana
12:00 - 12:45 pm	Ultrasound in Congenital Infections	Dr. Krishna Gopal
12:45 - 01:00 pm	Audience Interaction	
01:00 - 01:45 pm	Lunch	
Session 3		
01:45 - 03:15 pm	Live Demonstrations <ul style="list-style-type: none">• Fetal Echocardiography• The 12-14 Weeks Scan• Multivessel Doppler	Demonstrators: Dr. Ashok Khurana Dr. Krishna Gopal
Session 4 - Parallel Session		
Adi Kailash Auditorium		Charak Lecture Theatre
03:15 - 04:00 pm	Panel Discussion: High Risk Pregnancy: Common Scenarios Moderators: Dr. Bharti Pant Gahtori Dr. Ruchira Nautiyal	03:00 - 04:30 pm Paper and Poster Presentations Topics: * High Risk Obstetrics * Challenges in Fetal Medicine Practice
04:00 pm onwards	Vote of Thanks followed by Tea	04:30 - 04:45 pm Results for Paper & Poster Presentations



SFM Outreach CME @ Dehradun

Sunday | 24th May, 2026

Main Auditorium, Himalayan Institute of Medical Sciences, SRHU, Jolly Grant, Dehradun-248016, Uttarakhand, India

REGISTRATION FORM

SFM Membership No. _____ Medical Council No. _____

Title Prof/ Dr/Mr/Ms _____ Gender: Male Female

First Name _____ Last Name _____

Institution _____

Correspondence Address _____

City _____ Pin Code _____ State _____ Country _____

Mobile No. _____ Email _____

(All Fields are Mandatory)

Category	Early Bird till 30 th April, 2026	Regular 1 st May - 23 rd May	Onspot
SFM Member <input type="checkbox"/>	INR 800 <input type="checkbox"/>	INR 1000 <input type="checkbox"/>	INR 1200 <input type="checkbox"/>
PG Student <input type="checkbox"/>	INR 800 <input type="checkbox"/>	INR 800 <input type="checkbox"/>	INR 1000 <input type="checkbox"/>
Non SFM Member <input type="checkbox"/>	INR 1000 <input type="checkbox"/>	INR 1250 <input type="checkbox"/>	INR 1500 <input type="checkbox"/>

Inclusive 18% GST

MODE OF PAYMENT

Bank Draft/Cheque - To be made in favor of "Society of Fetal Medicine"

Cheque / Draft No Date

Total Amount

Please send Registration Form along with cheque/draft at Conference Secretariat address as below

BANK TRANSFER DETAILS

Account Holder Name: Society of Fetal Medicine

Account No.: 91111010002044

Bank Name: Canara Bank

IFSC Code: CNRB0019111

Branch Name & Address: Canara Bank, Sir Gangaram Hospital, Rajinder Nagar, New Delhi-110060

Note: * Kindly email us the bank deposit slip/UTR number, along with the filled Registration Form once you have made the payment

Conference Secretariat
Society of Fetal Medicine
C - 584, Defence Colony,
New Delhi - 110024
Contact No.: +91 9312227181

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