## Team 2



DR. CHEENA LANGER LM/J&K/6400

Address: 125/3, Roop Nagar, JDA Housing Colony, Jammu (J&K) Pin: 180013

Mobile: 9419173576 & E-Mail: drcheenavivi@gmail.com

**PROFESSIONAL QUALIFICATION** - M.B.B.S, MD (Dermatology, Venerology & Leprology) from May 2010 to May 2013 from Government Medical College, Jammu.

**FELLOWSHIP** in Surgical & Cosmetic Dermatology by Sapienza University of Rome, Italy **MEMBERSHIP** 

- Life member of Indian Association of Dermatology, Leprology & Venerology (IADVL)
- Life member Contact & Occupational Dermatoses Forum of India (CODFI)
- Indian Women Dermatologic Association (IWDA)
- Association of Cutaneous Surgeons of India (ACSI)
- International Society of Dermatology
- European Academy of Dermatology and Venereology (EADV)

PRESIDENT IADVL JK Branch for the year 2023-24

ORGANISING CHAIRPERSON - 4th CUTICON JK 2023 held at Jammu from 15th to 16th December, 2023

ORGANIZING CHAIRPERSON for SIG on Recalcitrant Dermatophytosis on November, 2023

ORGANIZING CHAIRPERSON for SIG on Trichology & Hair Transplant on 16th December, 2023

**REVIEWER** for the journal Cosmoderm

WORK EXPERIENCE IN DERMATOLOGY: 13 Years & 6 Months

**POST PG EXPERIENCE IN DERMATOLOGY: 11 Years** 

**CLINICAL WORK EXPERIENCE: 18 YEARS** 

SCIENTIFIC PUBLICATIONS: Total Papers Published/ Under Publication --- 12

TRAINING COURSES - 17 WORKSHOPS ATTENDED - 12 AWARD PAPER - 1 PRESENTATIONS - 25

**IMPORTANT** 

I hereby declare that the information given by me in the Performa is correct to the best of my knowledge.

Date: 13/06/2024 Place: JAMMU Dr. CHEENA LANGER

I hereby wish to declare the following conflicts of interests such as associations with industry/other societies /conferences: NIL report is needed specifically for each clause

- a) I am an owner/ employee/consultant/advisor (specify any other capacity) in the following pharma/aesthetic company or instrument supplier/dealer or cosmetic company or chain of clinics: Name of company Position term and duration **NIL**
- b) I am an office bearer in the below mentioned capacities in the following medical associations/societies (mention when the term of office will be over) Name of Society/association Position term and duration **NIL**
- c) I am in the following position in organizing committees of the following congresses: mention dates of conferences, Name of conference, position **NIL**

I CONFIRM THAT ABOVE INFORMATION IS TRUE AND AM LIABLE FOR ACTION INCASE ANY OF IT IS FOUND FALSE

Name and Address: DR CHEENA LANGER

Aastha Skin & Dermato- Cosmetic Centre, Jammu

Chlena Langer

Mobile number: 9419173576

Email id: drcheenavivi@gmail.com