

**Registration Begins** 

February 5th, 2019

**Registration Closes** 

March 9th, 2019

**Workshop Date** 

March 11-13, 2019

**Contact** 

Prof. U. N. Dwivedi

**In-charge** 

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**Lucknow-226007** 

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### Workshop on Computer Aided Drug Designing &

# Structure Activity Relationship Modeling March 11-13, 2019

Organized by

**Institute for Development of Advanced Computing** 

**ONGC- Centre for Advanced Studies** 

In collaboration with

Centre of Excellence in Bioinformatics

Bioinformatics Infrastructure Facility

University of Lucknow

Lucknow-226007

#### **Course Content**

### **Basic Bioinformatics**

- Chemical structure drawing
- Structure optimization
- Target identification
- Binding site estimation

## **Computer Aided Drug Designing**

- Protein homology modelling
- Post Structural Analysis
- Molecular Docking Analysis
- Target and Ligand Interaction Analyses

### **SAR Modeling**

- Virtual Screening
- Lead identification & optimization
- Advanced Techniques



,	Date	March 11–13, 2019
	Duration	3 days
	Subject of area	CADD, QSAR
	Methodology	Lectures, Demos with Hands on session
	Level of participants	Faculty, Research Scholars and Stu- dents from various colleges, universities and research organi- zations
	Prerequisites	Minimum skill in operation of computer
	No. of participants	30
	Registration fee	Rs 3000/-

### **Objective of the workshop**

The objective of the training program is to give exposure to the participants to concepts, skills and tools of bioinformatics and to provide hands on training on various bioinformatics approaches such as basics of sequence analysis, phylogenetic analysis, Structure activity relationship, protein structure prediction, target-ligand interaction analyses and basics of computer-aided drug designing through various online as well as offline tools and software.

### **Procedure for selection**

- Submission of CV before deadline via Email
- Fee submission before deadline
- All selection will be done on first come first serve basis
- Communication via Email Only

### **Registration Form**

Name
Date of Birth
Department and Institution
Address
Educational Classification
Phone/ Mobile
E-Mail
Mode of Payment:
DD No.
DD Date
Applicant's Signature
Signature of Supervisor/ Head of Department/ Project Coordinator