Curriculum by - Statutory Regulatory Authorities -DCI and RGUHS

DENTAL COUNCIL OF INDIA

BDS COURSE REGULATIONS 2007



DENTAL COUNCIL OF INDIA

Temple Lane, Kotla Road New Delhi – 110 002

PREFACE

TO

BDS COURSE REGULATIONS 2007

(Modified: 25.07.2007)

Framed by the Dental Council of India and approved by the Central Government under the Dentists Act, 1948 – vide Government of India, Ministry of Health & Family Welfare (Deptt. of Health's) letter No.V.12012/3/2006-DE dated 25.07.2007.

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DENTAL COUNCIL OF INDIA NOTIFICATION New Delhi, the 25th July, 2007

No.DE-22-2007.-In exercise of the powers conferred by Section 20 of the Dentists Act, 1948, the Dental Council of India with the previosus sanction of th Central Government hereby makes the following Revised BDS Course Regulations:-

- 1. Short title and commencement. (i) These Regulations may be called the Dental Council of India Revised BDS Course Regulations, 2007.
 - (ii) They shall come into force on the date of their publication in the Official Gazette.

REGULATIONS FOR THE DEGREE OF BACHELOR OF DENTAL SURGERY

GENERAL: Universities awarding the degrees in Bachelor of Dental Surgery (BDS) and Master of Dental Surgery (MDS) shall establish independent Dental Faculty.

The heading 'ADMISSION, SELECTION, AND MIGRATION' shall be read as under, in terms of (8th Amendment) notification published on 12.7.2017 in the Gazette of India.

ADMISSION, SELECTION AND MIGRATION:

ADMISSION, SELECTION, COUNSELLING AND MIGRATION:-

I. Admission to the Dental Course - Eligibility Criteria:

No Candidate shall be allowed to be admitted to the Dental Curriculum of first Bachelor of Dental Surgery (BDS) Course until:

1. He/she shall complete the age of 17 years on or before 31st December, of the year of admission to the BDS course;

The following has been inserted, and the existing sub-regulation "2." is re-numbered as "3"., in terms of (5th Amendment) notification published on 31st May, 2012 in the Gazette of India.

2. He/She has obtained a minimum of marks in National Eligibility-cum-Entrance Test as prescribed in sub-regulation 5 of Regulation II under the heading "Selection of students:"

The following has been inserted in terms of (5th Amendment) notification published on 1st June, 2012 in the Gazette of India

- 3. 2. In order to be eligible to take National Eligibility-cum-Entrance Test he/she has passed qualifying examination as under:
 - a. The higher secondary examination or the Indian School Certificate Examination which is equivalent to 10+2 Higher Secondary Examination after a period of 12 years study, the last two years of study comprising of Physics, Chemistry, Biology and Mathematics or any other elective subjects with English at a level not less than the core course for English as prescribed by the National Council for Educational Research and Training after the introduction of the 10+2+3 years educational structure as recommended by the National Committee

 on

 education;
 Note: Where the course content is not as prescribed for 10+2 education structure of the

Note: Where the course content is not as prescribed for 10+2 education structure of the National Committee, the candidates will have to undergo a period of one year preprofessional training before admission to the dental colleges;

b. The intermediate examination in science of an Indian University/Board or other recognised examining body with Physics, Chemistry and Biology which shall include a practical test in these subjects and also English as a compulsory subject;

or

c. The pre-professional/pre-medical examination with Physics, Chemistry and Biology, after passing either the higher secondary school examination, or the pre-university or an equivalent examination. The pre-professional/pre-medical examination shall include a practical test in Physics, Chemistry and Biology and also English as a compulsory subject;

The following has been deleted and substituted in terms of (5th Amendment) notification published on 1st June, 2012 in the Gazette of India

- 5. Procedure for selection to BDS course shall be as follows:
 - i. in case of admission on the basis of qualifying examination under clause (1) based on merit, candidate for admission to BDS course must have passed in the subjects of Physics, Chemistry, Biology & English individually and must have obtained a minimum of 50% marks taken together in Physics, Chemistry, and Biology at the qualifying examination. In respect of candidates belonging to Scheduled Castes, Scheduled Tribes or Other Backward Classes, the marks obtained in Physics, Chemistry and Biology taken together in qualifying examination be 40% instead of 50% as above and must have qualifying marks in English.

The following have been added before the clause 5 (ii) under the heading "selection of students", in terms of (2nd Amendment) notification published on 29th October,2010 in the Gazette of India.

"Provided that the eligibility criteria for admission to persons with locomotory disability of lower limbs in terms of Clause 3 above- will be a minimum of 45% marks instead of 50% taken together in qualifying examination and competitive entrance examination for admission in BDS Course."

ii. In case of admission of the basis of competitive entrance examination under clause (2) to (4) of this regulation, a candidate must have passed in the subjects of Physics, Chemistry, Biology and English individually and must have obtained a minimum of 50% marks taken together in Physics, Chemistry and Biology at the qualifying examination and in addition must have come in the merit list prepared as a result of such competitive entrance examination by securing not less that 50% marks in Physics, Chemistry and Biology taken together in the competitive examination. In respect of candidates belonging to Scheduled Castes, Scheduled Tribes or any other categories notified by the Government the marks obtained in Physics, Chemistry and Biology taken together in qualifying examination and competitive entrance examination be 40% instead of 50% as stated above:

Provided that a candidate who has appeared in the qualifying examination the result of which has not been declared, he may be provisionally permitted to take up the competitive entrance examination and in case of selection for admission to the BDS course, he shall not be admitted to that course until he fulfils the eligibility criteria as per above regulations.

- i. There shall be a single eligibility-cum-entrance examination namely "National Eligibility-cum-Entrance Test for admission to BDS course" in each academic year."
- ii. In order to be eligible for admission to BDS Course for a particular academic year, it shall be necessary for a candidate to obtain minimum of marks of 50th percentile in 'National Eligibility-cum-Entrance Test to BDS course' held for the said academic year. However, in respect of candidates belonging to Scheduled Castes, Scheduled Tribes, Other Backward Classes, the minimum marks shall be at 40th percentile. In respect of candidates with locomotory disability of lower amendments, the minimum marks shall be at 45th percentile. The percentile shall be determined on the basis of highest marks secured in the All-India common merit list in "National Eligibility-cum-Entrance Test for admission to BDS course."

Provided when sufficient number of candidates in the respective categories fail to secure minimum marks as prescribed in National Eligibility-cum-Entrance Test held for any academic year for admission to BDS Course, the Central Government in consultation with Dental Council of India may at its discretion lower the minimum marks required for admission to BDS Course for candidates belonging to respective categories and marks so lowered by the Central Government shall be applicable for the said academic year only.

iii. The reservation of seats in dental colleges for respective categories shall be as per applicable laws prevailing in States/Union Territories. An all India merit list as well as State-wise merit list of the

- eligible candidates shall be prepared on the basis of the marks obtained in National Eligibility-cum-Entrance Test and candidates shall be admitted to BDS course from the said lists only.
- iv. No Candidate who has failed to obtain the minimum eligibility marks as prescribed in Clause (ii.) above shall be admitted to BDS course in the said academic year.
- v. All admissions to BDS course within the respective categories shall be based solely on marks obtained in the National Eligibility-cum-Entrance Test.
- vi. To be eligible for admission to BDS Course, a candidate must have passed in the subjects of Physics, Chemistry, Biology/Biotechnology and English individually and must have obtained a minimum of 50% marks taken together in Physics, Chemistry and Biology/Biotechnology at the qualifying examination as mentioned in Sub-regulation 2 of Regulation I and in addition must have come in the merit list of "National Eligibility-cum-Entrance Test" for admission to BDS course. In respect of candidates belonging to Scheduled Castes, Scheduled Tribes or other Backward Classes the minimum marks obtained in Physics, Chemistry and Biology/Bio-technology taken together in qualifying examination shall be 40% instead of 50%. In respect of candidates with locomotory disability of lower limbs in terms of sub-regulation 4, after the commencement of these amendments, of Regulation 1 above, the minimum marks in qualifying examination in Physics, Chemistry and Biology/Bio-technology taken together in qualifying examination shall be 45% instead of 50%.

Provided that a candidate who has appeared in the qualifying examination the result of which has not been declared, he/she may be provisionally permitted to take up the National Eligibility-cum-Entrance Test and in case of selection for admission to the BDS course, he/she shall not be admitted to that course until he fulfills the eligibility criteria under Regulation 1.

vii. The Central Board of Secondary Education shall be the organization to conduct National Eligibility-cum-Entrance Test for admission to BDS course.

The following has been added under clause II 'Selection of Students', in terms of (8th Amendment) notification published on 27th July, 2017 in the Gazette of India:

II. A Common Counselling.

- There shall be a common counselling for admission to BDS course in all dental educational institutions on the basis of merit list of the National Eligibility-cum-Entrance Test.
- 2. The designated authority for counselling for the 15% All India Quota seats of the contributing States and all BDS seats of Dental Education Institutions of the Central Government universities established by an Act of Parliament and the Deemed Universities shall be the Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India.
- 3. The counselling for admission to BDS course in a State/Union Territory, including Dental Education Institutions established by the State Government, University established by an Act of State/Union Territory Legislature, Trust, Society, Minority Institutions shall be conducted by the State/Union Territory Government.
- 4. In case any dispute arises on such common counselling, the respective State Government shall refer the matter to the Central Government and its decision shall be final, in this regard.

III. Duration of the Course:

The following provision has been substituted to the extent indicated hereunder in terms of (3rd Amendment) notification published on **25**th **August**, **2011** in the Gazette of India and the same is as under:-

The undergraduate dental training programme leading to BDS degree shall be of 5 years with 240 teaching days in each academic year. During this period, the student shall be required to have engaged in full time study at a dental college recognized or approved by the Dental Council of India.

The undergraduate dental programme leading to BDS Degree shall be of 4 (four) Academic years with 240 teaching days in each academic year, <u>plus</u> one year paid rotating Internship in a dental college. Every candidate will be required, after passing the final BDS Examination to undergo one year paid rotating internship in a dental college. The detailed curriculum of Dental Internship Programme is annexed as Annexure-A.

The internship shall be compulsory and BDS Degree shall be granted after completion of one year paid Internship.

NOTE: It is recommended by the DCI that the colleges who have implemented the revised BDS Course Regulation, 2007 itself, has to carry on with the existing five year programme. Regarding internship for this batch it is upto the respective university to decide.

Further, the admissions made from the year 2008-09, the students may be included in this amendment provided the concerned University's rules permit.

Provided that the Affiliating University/State Government are free to make applicable these amendment is upto the University to implement this amendment provided it abides by their Act/Rules and Regulations.

The above NOTE has been deleted and the following proviso is inserted below the NOTE in terms of (4th Amendment) notification published on 9.12.2011 in the Gazette of India and the same is as under:-

NOTE: Provided that the students of the batch admitted during the academic session 2007-2008, and consequently they are going to pursue their 5th year BDS Course as per the course curriculum and syllabus prescribed in the principal Revised BDS Course Regulations, 2007, may complete their Theory in 4 (four) subjects with 160 Lecture hours within a period of 6 (six) months as given below:-

Subject	Lecture Hours
Oral & Maxillofacial Surgery	30
Conservative Dentistry & Endodontics	50
Prosthodontics and Crown & Bridge	50
Public Health Dentistry	30
Total	160

On completion of such study, they shall have to appear in the University Examination and only after passing University Examination successfully, they shall be allowed to do six months Paid Rotating Internship Programme in all the Departments for the duration indicated against each Department as under:-

Departments	Period of Postings
Oral Medicine & Radiology	20 days
2. Oral && Maxillofacial Surgery	30 days
3. Prosthodontics	30 days
4. Periodontics	15 days
5. Concervative Dentist	10 days
6. Pedodontics	15 days
7. Oral Pathology & Microbiology	10 days
8. Orthodontics	10 days
9. Community Dentist/Rural Service	30 days
10. Elective	10 days
Total	180 days

The following proviso has been inserted in terms of (6th Amendment) notification published on 24.6.2013 in the Gazette of India:-

Provided further that students of 2007-2008 BDS batch who are declared passed with $4 \frac{1}{2} + 6$ months Paid Rotatory Internship or 5-year duration course, as the case may be, as per Revised BDS Course (4th Amendment) Regulations, 2011, shall be deemed at par/equivalent with 4+1 year BDS Course, including one year Paid Rotatory Internship programme, for all interns and purposes i.e. for admission in MDS Course, applying for Govt Jobs, registration in State Dental Councils etc.

IV. Migration:

- (1) Migration from one dental college to other is not a right of a student. However, migration of students from one dental college to another dental college in India may be considered by the Dental Council of India. Only in exceptional cases on extreme compassionate ground*, provided following criteria are fulfilled. Routine migrations on other ground shall not be allowed.
- (2) Both the colleges, i.e. one at which the student is studying at present and one to which migration is sought, are recognised by the Dental Council of India.
- (3) The applicant candidate should have passed first professional BDS examination.
- (4) The applicant candidate submits his application for migration, complete in all respects, to all authorities concerned within a period of one month of passing (declaration of results) the first professional Bachelor of Dental Surgery (BDS) examination.
- (5) The applicant candidate must submit an affidavit stating that he/she will pursue 240 days of prescribed study before appearing at IInd professional Bachelor of Dental Surgery (BDS) examination at the transferee dental college, which should be duly certified by the Registrar of the concerned University in which he/she is seeking transfer. The transfer will be applicable only after receipt of the affidavit.

Note 1:

- (i) Migration is permitted only in the beginning of IInd year BDS Course in recognized Institution.
- (ii) All applications for migration shall be referred to Dental Council of India by college authorities. No Institution/University shall allow migrations directly without the prior approval of the Council.
- (iii) Council reserved the right, not to entertain any application which is not under the prescribed compassionate grounds and also to take independent decisions where applicant has been allowed to migrate without referring the same to the Council.

Note 2: *Compassionate ground criteria:

- (i) Death of supporting guardian.
- (ii) Disturbed conditions as declared by Government in the Dental College area.

V. Attendance requirement, Progress and Conduct

- (i) 75% in theory and 75% in practical/clinical in each year.
- (ii) In case of a subject in which there is no examination at the end of the academic year/semester, the percentage of attendance shall not be less than 70%. However, at the time of appearing for the professional examination in the subject, the aggregate percentage of attendance in the subject should satisfy condition (i) above.

VI. Subjects of Study:

First Year

- i) General Human Anatomy including Embryology and Histology
- ii) General Human Physiology and Biochemistry, Nutrition and Dietics
- iii) Dental Anatomy, Embryology and Oral Histology
- iv) Dental Materials
- v) Pre-clinical Prosthodontics and Crown & Bridge

Second Year

- i) General Pathology and Microbiology
- ii) General and Dental Pharmacology and Therapeutics
- iii) Dental Materials
- iv) Pre clinical Conservative Dentistry
- v) Pre clinical Prosthodontics and Crown & Bridge
- vi) Oral Pathology & Oral Microbiology

Third Year

i) General Medicine

- ii) General Surgery
- iii) Oral Pathology and Oral Microbiology
- iv) Conservative Dentistry and Endodontics
- v) Oral & Maxillofacial Surgery
- vi) Oral Medicine and Radiology
- vii) Orthodontics & Dentofacial Orthopaedics
- viii) Paediatric & Preventive Dentistry
- ix) Periodontology
- x) Prosthodontics and Crown & Bridge

Fourth Year

- i) Orthodontics & dentofacial orthopaedics
- ii) Oral Medicine & Radiology
- iii) Paediatric & Preventive Dentistry
- iv) Periodontology
- v) Oral & Maxillofacial Surgery
- vi) Prosthodontics and Crown & Bridge
- vii) Conservative Dentistry and Endodontics
- viii) Public Health Dentistry

Fifth Year

- i) Oral & Maxillofacial Surgery
- ii) Prosthodontics and Crown & Bridge
- iii) Conservative Dentistry and Endodontics
- iv) Public Health Dentistry

The above 5th year subjects have been deleted in terms of (3rd Amendment) notification published on **25th August,2011** in the Gazette of India.

EXAMINATIONS

SCOPE: These regulations shall be applicable for the B.D.S. degree examinations conducted by various universities in the country.

I. PREFACE:

- (A) Evaluation is a continuous process, which is based upon criteria developed by the concerned authorities with certain objectives to assess the performance of the learner. This also indirectly helps in the measurement of effectiveness and quality of the concerned B.D.S. programme.
- (B) Evaluation is achieved by two processes
 - 1. Formative or internal assessment
 - 2. Summative or university examinations.

Formative evaluation is done through a series of tests and examinations conducted periodically by the institution.

Summative evaluation is done by the university through examination conducted at the end of the specified course.

II. METHODS OF EVALUATION:

Evaluation may be achieved by the following tested methods:

- 1. Written test
- 2. Practicals
- 3. Clinical examination
- 4. Viva voce

INTERNAL ASSESSMENT EXAMINATION

The continuing assessment examinations may be held frequently at least **3** times in a particular year and the average marks of these examinations should be considered. 10% of the total marks in each subject for both theory, practical and clinical examination separately should be set aside for the internal assessment examinations.

SCHEME OF EXAMINATION:

The following has been substituted in terms of (3rd Amendment) notification published on 25th August,2011 in the Gazette of India and the same is as under:-

The scheme of examination for B.D.S. Course shall be divided into 1st-B.D.S. examination at the end of the first academic year, 2nd B.D.S. examination at the end of second year, 3rd B.D.S. examination at the end of third, 4th-BDS at the end of 4th- and final B.D.S at the end of 5th- year. 240 days minimum teaching in each academic year is mandatory.

The Scheme of Examination for BDS Course shall be divided into 1st BDS examination at the end of the first academic year, 2nd BDS examination at the end of second year, 3rd BDS examination at the end of third, 4th and final BDS at the end of 4th year. Where semester system exists, there shall be two examinations in the final year, designated as part 1 and part 2 of the respective examinations (regulations 1983) 240 days minimum teaching in each academic year is mandatory.

In terms of (6th Amendment) notification published on 24.6.2013 in the Gazette of India, in 1st line of 2nd paragraph under the heading (III) "Scheme of Examination", the word "semester" has been substituted by the word "Part I or Part II, whichever is applicable", as follows:-

For University opting for semester—Part I or Part II, whichever is applicable mode, the subjects that are to be covered in each semester proposed below.

Part-I

- Public Health Dentistry
- Periodontology
- Orthodontics and Dentogacial Orthopaetic
- Oral Medicine and Radiology

Part-II

- Oral & Maxillofacial Surgery
- Conservative and Endodontics
- Prosthodontics and Crown & Bridge
- Paediatric and preventive Dentistry

The examination shall be open to a candidate who satisfies the requirements of attendance, progress and other rules laid down by the University.

(1) Universities shall organize admission timings and admission process in such a way that teaching starts from 1st day of August in each academic year.

I B.D.S. Examination:

- 1. General anatomy including embryology and histology
- 2. General human physiology and biochemistry
- 3. Dental Anatomy, Embryology and Oral Histology

Any student who does not clear the first BDS University Examination in all subjects within 3 years from the date of admission, shall be discharged from the Course.

The above clause has been substituted by the following clause in terms of (7th Amendment) notification published in the Gazette of India and the same is as under:-

Any student who does not clear the BDS Course in all the subjects within a period of 9 years, including one year Compulsory Rotatory paid Internship from the date of admission shall be discharged from the course.

Any candidate who fails in one subject in an Examination is permitted to go to the next higher class and appear for the subject and complete it successfully before he is permitted to appear for the next higher examination.

The above has been substituted in terms of (3rd Amendment) notification published on 25th August,2011 in the Gazette of India and the same is as under:-

Any candidate who fails in one subject in an Examination is permitted to go to the next higher class and appears for the said failed subject and complete it successfully before he is permitted to appear for the next higher examination. However, the Dental Council of India would have no objection, if the concerned University follows their examination scheme provided in their statute/regulations.

II B.D.S. Examination:

A candidate who has not successfully completed the $1^{\rm st}$ B.D.S. examination can not appear in the IInd year Examination.

- 1. General pathology and Microbiology
- 2. General and dental pharmacology and therapeutics
- 3. Dental Materials
- 4. Pre Clinical Conservative Only Practical and Viva Voce
- 5. Pre Clinical Prosthodontics Only Practical and Viva Voce

The following has been added after Sl. No. 5 of the subject, Pre-clinical Prosthodontics, in terms of (3rd Amendment) notification published on 25th August,2011 in the Gazette of India and the same is as under:-

Any candidate who fails in one subject in an Examination is permitted to go to the next higher class and appears for the said failed subject and complete it successfully before he is permitted to appear for the next higher examination. However, the Dental Council of India would have no objection, if the concerned University follows their examination scheme provided in their statute/regulations.

III B.D.S. Examination:

A candidate who has successfully completed the 2^{nd} B.D.S. examination can appear IIIrd B.D.S. Examination.

- 1. General Medicine
- 2. General Surgery
- 3. Oral Pathology and Oral Microbiology

The following has been added after Sl. No. 3 of the subject Oral Pathology and Oral Microbiology, in terms of (3rd Amendment) notification published on **25**th **August**, **2011** in the Gazette of India and the same is as under:-

Any candidate who fails in one subject in an Examination is permitted to go to the next higher class and appear for the subject and complete it successfully before he is permitted to appear for the next higher examination. However, the Dental Council of India would have no objection, if the concerned follows their examination scheme (2nd year onwards) provided in their statute/regulations.

IV B.D.S. Examination:

- 1. Oral Medicine and radiology
- 2. Paediatric & Preventive Dentistry
- 3. Orthodontics & dentofacial orthopaedics
- 4. Periodontology

The above has been substituted in terms of (3rd Amendment) notification published on **25**th **August,2011** in the Gazette of India and the same is as under:-

Final BDS (Fourth Year):

- Public Health Destistry
- Periodontology
- Orthodontics and Dentofacial Orthopaetic
- Oral Medicine and Radiology
- Oral & Maxillofacial Surgery
- Conservative and Endodontics
- Prosthodontics and Crown & Bridge
- Paediatric and Preventive Dentistry OR

Part-I

- Public Health Dentistry
- Periodontology
- Orthodontics and Dentogacial Orthopaetic
- Oral Medicine and Radiology

Part-II

- Oral & Maxillofacial Surgery
- Conservative and Endodontics
- Prosthodontics and Crown & Bridge
- Paediatric and preventive Dentistry

Note:-

- 1. The concerned Universities may opt for any one of the examination pattern mentioned above in 4th BDS final year.
- 2. If any University opt for the part examination system then any candidate who fails in any subject in 4th (final) year Part-I examination is permitted to go to the Part-II examination and should complete both parts successfully before he/she is permitted to go for Internship programme.
- 3. Since there are Inadequate teaching staffs in Department of Public Health Dentistry, the same may be clubbed together under the head of periodontics. This arrangement shall be reviewed after three years.

V BDS Examination:

- 1. Prosthodontics and Crown & Bridge
- 2. Conservative Dentistry and Endodontics
- 3. Oral and Maxillofacial Surgery
- 4. Public Health Dentistry

The V BDS examination has been deleted in terms of (3rd Amendment) notification published on 25th August, 2011 in the Gazette of India.

WRITTEN EXAMINATION:

- 1. The written examination in each subject shall consist of one paper of three hours duration and shall have maximum marks of 70.
- 2. In the subjects of Physiology & Biochemistry and Pathology & Microbiology each paper will be divided into two parts, A and B of equal marks.
- 3. The question paper should contain different types of questions like essay, short answer and objective type / M.C.Q's.
- 4. The nature of questions set, should be aimed to evaluate students of different standards ranging from average to excellent.
- 5. The questions should cover as broad an area of the content of the course. The essay questions should be properly structured and the marks specifically allotted.
- 6. The University may set up a question bank

PRACTICAL AND CLINICAL EXAMINATION:

- 1. **Objective Structured Clinical Evaluation:** The present system of conducting practical and clinical examination at several universities provide chance for unrealistic proportions of luck. Only a particular clinical procedure or experiment is usually given for the examination. The clinical and practical examination should provide a number of chances for the candidate to express one's skills. A number of examination stations with specific instructions to be provided. This can include clinical procedures, laboratory experiments, spotters etc. Evaluation must be made objective and structured. The method of objective structured clinical examinations should be followed. This will avoid examiner bias because both the examiner and the examinee are given specific instructions on what is to be observed at each station.
- 2. **Records/ Log Books:** The candidate should be given credit for his records based on the scores obtained in the record. The marks obtained for the record in the first appearance can be carried over to the subsequent appearances if necessary.
- 3. **Scheme of clinical and practical examinations:** The specific scheme of clinical and practical examinations, the type of clinical procedures/ experiments to be performed and marks allotted for each are to be discussed and finalized by the Chairman and other examiners and it is to be published prior to the conduct of the examinations along with the publication of the time table for the practical examinations. This scheme should be brought to the notice of the external examiner as and when the examiner reports. The practical and clinical examinations should be evaluated by two examiners of which one shall be an external examiner appointed from other universities preferably outside the State. Each candidate should be evaluated by each examiner independently and marks computed at the end of the examination.
- 4. **<u>Viva Voce:</u>** Viva voce is an excellent mode of assessment because it permits a fairly broad coverage and it can assess the problem solving capacity of the student. An assessment related to the affective domain is also possible through viva voce. It is desirable to conduct the viva voce

independently by each examiner. In order to avoid vagueness and to maintain uniformity of standard and coverage, questions can be pre-formulated before administering them to each student. Twenty marks are exclusively allotted for viva voce and that can be divided equally amongst the examiners, i.e., 10 marks per examiner.

MARKS DISTRIBUTION IN EACH SUBJECT:

Each subject shall have a maximum of 200 marks.

Theory 100 Practical/ Clinical 100

Theory – 100		Practicals/ clinicals - 100	
University written exam	70	University Exam	90
Viva Voce	20		
Internal assessment (Written)	10	Internal assessment (Written)	10
-			
Total	100		100
_			

Practical and Viva Voce Only in University Examination

Pre-clinical Prosthodontics

Pre-clinical Conservative Dentistry.....

Internal Assessment - 20

Practical - 60

Viva Voce - 20

----100

Criteria for a pass:

Fifty percent of the total marks in any subject computed as aggregate for theory, i.e., written, viva voce and internal assessment and practicals including internal assessment, separately is essential for a pass in all years of study.

For declaration of pass in a subject, a candidate shall secure 50% marks in the University examination both in Theory and Practical/ Clinical examinations separately, as stipulated below:

- A candidate shall secure 50% marks in aggregate in University theory including Viva Voce and Internal assessment obtained in University written examination combined together.
- In the University Practical/ clinical examination, a candidate shall secure 50% of University practical marks and Internal Assessment combined together.
- In case of pre clinical Prosthetic Dentistry and Pre clinical conservative dentistry in II BDS, where there is no written examination, minimum for pass is 50% of marks in Practical and Viva voce combined together in University examination including Internal Assessment i.e. 50/100 marks.
- Successful candidates who obtain 65% of the total marks or more shall be declared to have passed the examination in First Class. Other successful candidates will be placed in Second Class. A candidate who obtains 75% and above is eligible for Distinction. Only those candidates who pass the whole examination in the first attempt will be eligible for distinction or class.
- First Class and Distinction etc. to be awarded by the University as per their respective rules.

Grace Marks: Grace marks upto a maximum of 5 marks may be awarded to students who have failed only in one subject but passed in all other subjects.

Re-evaluation: The objective of re-evaluation is to ensure that the student receives a fair evaluation in the university examination and to minimize human error and extenuating circumstances. There shall be two mechanisms for this purpose.

- 1. **Re-totaling:** The University on application and remittance of a stipulated fee to be prescribed by the university, shall permit a recounting or opportunity to recount the marks received for various questions in an answer paper/ papers for theory of all subjects for which the candidate has appeared in the university examination. Any error in addition of the marks awarded if identified should be suitably rectified.
- 2. **Re-evaluation:** Re-evaluation of theory papers in all years of study of the BDS course may be permissible by the university on application and remittance of a prescribed fee. Such answer script shall be re-evaluated by not less than two duly qualified examiners and the average obtained shall be awarded to the candidate and the result accordingly reconsidered. However in those universities where double evaluation provision exists, this provision of re-evaluation will not be applicable.

Qualification and experience to be eligible for examinership for BDS examination

- 1. M.D.S. Degree from a recognized Institution
- 2. 4 years teaching experience in the subject in a dental college after MDS

3. Should be holding the post of a Reader or above in a Dental Institution approved/recognised by the Dental Council of India for B.D.S.

Note:

- 1. In case of Public Health Dentistry, as there is acute shortage of teachers one examiner from Public Health Dentistry and the second one could be from Periodontics. To be reviewed after three years.
- 2. In case of Physiology and Biochemistry if Internal examiner is from Physiology, External examiner should be from Biochemistry or wise versa
- 3. Incase of Pathology and Microbiology if Internal is examiner is from Pathology, External examiner should be from Microbiology or wise versa
- 4. In case of Dental Materials, if internal is from Prosthodontics, external should be from Conservative Dentistry and wise versa

50% of Examiners appointed shall be external from Dental Institutions approved/recognised by the Dental Council of India for B.D.S. Course, from other University, preferably from outside the State.

Reciprocal arrangement of Examiners should be discouraged, in that, the Internal Examiner in a subject should not accept external examinership for a College from which External Examiner is appointed in his subject for the corresponding period.

No person shall be an external Examiner to the same University for more than 3 consecutive years. However, if there is a break of one year the person can be re-appointed.

"Minimum Physical Requirement and Minimum Staffing Pattern (as per DCI Regulations 2006)."

GOALS AND OBJECTIVES

GOALS

The dental graduates during training in the institutions should acquire adequate knowledge, necessary skills and reasonable attitudes which are required for carrying out all activities appropriate to general dental practice involving the prevention, diagnosis and treatment of anomalies and diseases of the teeth, mouth, jaws and associated tissues. The graduate also should understand the concept of community oral health education and be able to participate in the rural health care delivery programmes existing in the country.

OBJECTIVES:

The objectives are dealt under three headings (a) Knowledge and understanding (b) skills and (c) Attitudes.

(A) KNOWLEDGE AND UNDERSTANDING:

The graduate should acquire the following during the period of training.

- 1. Adequate knowledge of the scientific foundations on which dentistry is based and good understanding of various relevant scientific methods, principles of biological functions and be able to evaluate and analyse scientifically various established facts and data.
- 2. Adequate knowledge of the development, structure and function of the teeth, mouth and jaws and associated tissues both in health and disease and their relationship and effect on general state of health and also bearing on physical and social well being of the patient.
- 3. Adequate knowledge of clinical disciplines and methods which provide a coherent picture of anomalies, lesions and diseases of the teeth, mouth and jaws and preventive diagnostic and therapeutic aspects of dentistry.
- 4. Adequate clinical experience required for general dental practice.
- 5. Adequate knowledge of the constitution, biological function and behaviour of persons in health and sickness as well as the influence of the natural and social environment on the state of health in so far as it affect dentistry.

(B) SKILLS:

A graduate should be able to demonstrate the following skills necessary for practice of dentistry.

- 1. Able to diagnose and manage various common dental problems encountered in general dental practice keeping in mind the expectations and the right of the society to receive the best possible treatment available wherever possible.
- 2. Acquire the skill to prevent and manage complications if encountered while carrying out various surgical and other procedures.
- 3. Possess skill to carry out certain investigative procedures and ability to interpret laboratory findings.
- 4. Promote oral health and help prevent oral diseases where possible.
- 5. Competent in the control of pain and anxiety among the patients during dental treatment.

(C) ATTITUDES:

A graduate should develop during the training period the following attitudes.

- 1. Willing to apply the current knowledge of dentistry in the best interest of the patients and the community.
- 2. Maintain a high standard of professional ethics and conduct and apply these in all aspects of professional life.
- 3. Seek to improve awareness and provide possible solutions for oral health problems and needs through out the community.
- 4. Willingness to participate in the CPED Programmes to update the knowledge and professional skill from time to time.
- 5. To help and participate in the implementation of the national oral health policy.

RECOMMENDATIONS

GENERAL:

- 1. The undergraduate course involves organisation of teaching programmes year-wise. However, this course, as a whole, should demonstrate integration of the basic sciences, clinical dentistry and practical or the laboratory skills. The course should be designed and integrated in such a way to permit smooth progression from pre-clinical to clinical phase. Collaboration should be encouraged between teachers of basic sciences, dental sciences and clinical subjects.
- 2. The undergraduate dental course consists of three main components. The first component consists subjects common to medicine and dentistry like anatomy, physiology, biochemistry and behavioural science, leading to pharmacology, pathology, microbiology and then on to general medicine and general surgery. The second component runs concurrently with the first and deals with special aspects of oral and dental tissues, oral biology and oral pathology. Finally, the third component based on the foundations of the first two, deals with the clinical and technical aspects of dentistry as is required for general dental practice.
- 3. The first component of the course is intended to provide initially, an appreciation of normal human structure, development, function and behaviour, leading to understanding of the diseases, its prevention and treatment. The main objective is to provide the student a broad knowledge of the normal structures and functions of the body, the alterations which take place in disease with particular reference to those conditions in which medical and dental co-operation is essential for proper management. At this stage, the student should also be made aware of the social and psychological aspects of patient care with special reference to the relationship between dentist and patient. The behavioural sciences including both sociology and psychology should be introduced at the initial stages of the training programme, much before the students actually deal with the patients.
- 4. The second component of dental undergraduate programme consists instruction in the subjects dealing with dental and oral aspects to ensure a detailed knowledge of the structure and function of the dental and oral tissues. This enables the student to diagnose, prevent and treat the dental and oral diseases and disorders which were not included in the first component. The subject of oral biology is to be introduced at this level to provide the students a comprehensive knowledge and application of oral physiology, microbiology, biochemistry and oral immunology. Students should be exposed to the basic aspects of forensic odontology at this stage of the course along with oral biology/oral pathology.
- 5. The third component of the course comprising the clinical and technical aspects of dentistry actually prepares the student to undertake total oral and dental health care of the patients of all ages. The emphasis at this stage should be on the prevention of the various dental diseases and how to preserve natural teeth with their supporting structures. The importance of the various preventive methods need to be stressed. The significance of diagnosis of various dental and oral problems needs to be emphasized along with treatment planning before actual treatment procedures are undertaken.

In addition to acquiring the knowledge, the students need to gain adequate clinical hands-on-experience in extractions and other minor oral surgical procedures, all aspects of conservative dentistry, endodontics, crown and bridge, provision of partial and complete dentures, various periodontal therapeutic procedures and use of removable orthodontic appliances. Familiarity with various radiological techniques, particularly intra-oral methods and proper interpretation of the radiographs, is an essential part of this component of training and has application in clinical diagnosis, forensic identification and age estimation.

Towards the final stage of the clinical training, each student should be involved in comprehensive oral health care or holistic approach to enable them to plan and treat patients as a whole, instead of piece-meal treatment provided in each speciality. The Dental Council of India strongly recommends that all the dental colleges should provide facilities and required infrastructure for this purpose.

The aim of the undergraduate programme should undoubtedly be to produce a graduate, competent in general dental practice.

6. The commitment towards the society as a whole, needs to be stressed along with the knowledge and treatment skills gained. Instruction in public health dentistry should emphasise the sociological aspects of health care particularly, oral health care, including the reasons for the

variation in oral and dental needs of different sections of the society. It is important to know the influence of the social, behavioural, environmental and economic factors on oral and dental health. Students should be made aware of the National oral health Policy and the importance of being a member of the Health care team delivering medical and oral health care particularly among rural population.

- 7. Scientific advancement of any profession is based largely on continuous research activities. Dentistry is no exception. It is important that in every dental college proper facilities should be provided for research and the faculty members should involve themselves in such activities. Inter-disciplinary research should be encouraged to bring in integration among various specialities. The teaching and training methodology should be such that the students are motivated to think and indulge in self study rather than playing a passive role. Provision should be made in the daily schedules for adequate time for reading. Proper library facilities with adequate timings and seating capacity should be made available in all dental colleges. Adequate audio visual aids, like video tapes, computer assisted learning aids, Medline and internet facilities should be provided in all dental colleges to encourage self-study. Students should be encouraged to participate in simple research project work and the system of electives, spending some stipulated amount of time in another dental college within the country or outside should be given a serious consideration by all the dental institutions.
- 8. The society has a right to expect high standards and quality of treatment. Hence, it is mandatory and a social obligation for each dental surgeon to upgrade his or her knowledge and professional skills from time to time. The Dental Council of India strongly recommends that facilities and proper infrastructure should be developed to conduct the continuous professional education programmes in dentistry to enable the practitioners to update their knowledge and skills. The Council is of the opinion that the dental colleges by virtue of their infrastructural facilities will be ideal to conduct such courses and recommends establishment of a Department of continuing dental education in each of the dental colleges. In addition, the practitioners should be encouraged to attend conferences of state and national level, workshops, seminars and any other such activity which the Council feels is suitable to upgrade the knowledge and skills.
- 9. The undergraduate curriculum should stress the significance of infection and cross- infection control in dental practice. Aspects like sources of infection, measures to be adopted both general and specific for control particularly the HIV and hepatitis should be properly incorporated into the curriculum so that the graduates are aware of its significance and follow it in their practice.
- 10. The information technology has touched every aspect of an individual's personal and professional life. The Council hence recommends that all undergraduates acquire minimum computer proficiency which will enable them to enhance their professional knowledge and skills.

RECOMMENDATIONS

SPECIFIC:

1. The undergraduate dental training programme leading to B.D.S. degree shall be a minimum of five years duration. During this period, the students shall be required to engage in full time study at a dental college recognized or approved by the Dental Council of India.

During the five years undergraduate course, the instruction in clinical subjects should be at least for three years

2. Basic Medical & Dental Subjects:

The basic medical and dental sciences comprise anatomy gross and microscopic, physiology, biochemistry, pharmacology, oral biology and science of dental materials. Subjects like behavioural sciences, which is useful to develop communication skills, should also be introduced in the first year itself and spread over the undergraduate course. An introduction to Public Health Dentistry & Preventive Dentistry also will be useful to develop the concept of commitment to community. The laboratory skills to be developed by the students like pre-clinical Prosthodontics, Crown Bridge, Aesthetic Dentistry and Oral Implantology exercises and studying dental morphology also is a part of initial training. The instruction in the above medical and dental sciences shall be for two years duration. At the end of this period the student should be in a position to understand and comprehend in general the development, structure and function of the human body in both health and disease.

3. The instruction in basic dental sciences should include theoretical and practical aspects of oral anatomy and physiology, to provide a detailed knowledge of the form and structure of teeth associated tissues and occlusal relationships.

The study should also aim at development of a concept regarding physiological and biochemical processes relevant to oral cavity for better understanding of the changes which occur with the onset of disease in the oral cavity.

The student should be made aware of the importance of various dental tissues in forensic investigation.

4. Clinical, Medical and Dental subjects:

The students should be introduced to clinics in the initial stage, preferably in the first year, as an observer to familiarise with clinical set-up and working. The period of instruction in the clinical subjects shall be not less than three years full time. During this, the student shall attend a dental hospital, general hospital, community camps and satellite clinics, in order to obtain instruction and experience in the practice of dentistry. The main objective of training in clinical dental subjects is to produce a graduate able and competent to recognize or diagnose various dental and oral diseases, to undertake general dental treatment, advise on the provision of specialized treatment available and finally advise the patient on prevention. The student should also understand the relationship between oral and systemic diseases.

5. The general medicine and surgery training should provide sufficient knowledge on human disease to enable the student to understand its manifestations as relevant to the practice of dentistry. This requires clinical teaching on patients and shall be carried out in in-patient and outpatient medical departments and specialist clinics.

This clinical instruction should enable the student to understand and perhaps diagnose common systemic diseases which have relevance to dental practice, by adopting a systematic approach of history taking and clinical examination. The student should also realize the significance of various general and special investigations in the diagnosis of diseases. The ability to recognize physical and mental illness, dealing with emergencies, effective communication with patients, interaction with various professional colleges also become important aspects of this training.

- 6. The Dental Council of India considers it important for all dental students to receive instruction in first-aid and principles of cardio-pulmonary resuscitation. It is also desirable that the student spend time in an accident and emergency department of a general hospital.
- 7. The purpose of the clinical training is to provide sufficient practical skill in all aspects of clinical dentistry. The instruction should also include patient management skills, treatment of patients of all ages with special reference to children (paediatric), very elderly (geriatric), medically compromised and disabled patients.
- 8. During the three years clinical course, the students should receive thorough instruction which involves history taking, diagnosis and treatment planning in all aspects of dentistry and should be competent on graduation to carry out all routine general procedures.

In Oral & Maxillofacial Surgery and Oral Implantoly, instruction should include the knowledge of various maxillofacial problems like injuries, infections and deformities of the jaws and associated structures. The clinical experience should include those procedures commonly undertaken in general practice like extraction of teeth, minor oral surgical procedure etc.

In Conservative, Endodontics & Aesthetic Dentistry, Prosthodontics, Crown Bridge, Aesthetic Dentistry and Oral Implantology and Periodontology and Oral Implantology students should be competent on graduation to carry out routine treatment like restorations of various kinds, endodontic procedures, removable and fixed prosthodontics, concept of osseointegration and finally various kinds of periodontal therapy. In addition, students should be aware of their limitations on graduation, need to refer patients for consultant opinion and/or treatment and also the need for postgraduate and continuous education programmes.

In Orthodontics & Dento Facial Orthopedics, students should carry out simple appliance therapy for patients. Students should also be able to appreciate the role of dentofacial growth in the development and treatment of malocclusion.

In Paediatric dentistry, the students should concentrate on clinical management, efficacy of preventive measures, treatment needs particularly for children with disabilities. In oral medicine and oral diagnosis, the student should receive instruction in various lesions, occurring in the oral cavity with particular reference to oral cancer.

- 9. The successful control and management of pain is an integral part of dental practice. Upon graduation the students should be competent to administer all forms of local anaesthesia. The value of behavioural methods of anxiety management should be emphasised. The students should also have the practical experience in the administration of intra-muscular and intravenous injections. Knowledge of pain mechanisms and strategies to control post-operative pain is essential for practice of dentistry.
- 10. All students should receive instructions and gain practical experience in taking processing and interpretation of various types of intra and extra oral radiographs. They should be aware of the hazards of radiation and proper protective measures from radiation for the patient, operator and other staff.

- 11. Instruction should be given in dental jurisprudence, legal and ethical obligations of dental practitioners and the constitution and functions of Dental Council of India.
- 12. Infection and cross infection control assume significance in dental practice. The students should be made aware of the potential risk of transmission in the dental surgery, various infectious diseases particularly HIV and hepatitis. The students should be aware of their professional responsibility for the protection of the patients, themselves and their staff and the requirements of the health and safety regulations.
- 13. In the recent times, the subjects of esthetic dentistry, oral implantology, behavioural sciences and forensic odontology have assumed great significance. Hence, the Council recommends that these four specialities should be incorporated into the undergraduate curriculum. The instruction and clinical training in aesthetic dentistry shall be carried out by the departments of Conservative, Endodontics & Aesthetic Dentistry and prosthodontics, Crown Bridge, Aesthetic Dentistry and Oral Implantology. Similarly, the instruction and clinical training in oral implantology shall be done by the departments of Oral & Maxillofacial Surgery, Prosthodontics, Crown Bridge, Aesthetic Dentistry and Oral Implantology and Periodontology and Oral Implantology. The instruction in behavioural sciences should ideally commence before the students come in contact with the patients and shall be carried out by the departments of Public Health Dentistry & Preventive Dentistry and Pedodontics & Preventive Dentistry. Forensic Odontology will be a part of Oral Pathology & Oral Microbiology and Oral Medicine and Radiology.

COMPETENCIES

At the completion of the undergraduate training programme the graduates shall be competent in the following.-

General Skills

Apply knowledge& skills in day to day practice

Apply principles of ethics

Analyze the outcome of treatment

Evaluate the scientific literature and information to decide the treatment

Participate and involve in professional bodies

Self assessment & willingness to update the knowledge & skills from time to time

Involvement in simple research projects

Minimum computer proficiency to enhance knowledge and skills

Refer patients for consultation and specialized treatment

Basic study of forensic odontology and geriatric dental problems

Practice Management

Evaluate practice location, population dynamics & reimbursement mechanism

Co-ordinate & supervise the activities of allied dental health personnel

Maintain all records

Implement & monitor infection control and environmental safety programs

Practice within the scope of one's competence

Communication & Community Resources

Assess patients goals, values and concerns to establish rapport and guide patient care

Able to communicate freely, orally and in writing with all concerned

Participate in improving the oral health of the individuals through community activities.

Patient Care - Diagnosis

Obtaining patient's history in a methodical way

Performing thorough clinical examination

Selection and interpretation of clinical, radiological and other diagnostic information

Obtaining appropriate consultation

Arriving at provisional, differential and final diagnosis

Patient Care - Treatment Planning

Integrate multiple disciplines into an individual comprehensive sequence treatment plan using diagnostic and prognostic information

Able to order appropriate investigations

Patient Care - Treatment

Recognition and initial management of medical emergencies that may occur during Dental treatment

Perform basic cardiac life support

Management of pain including post operative

Administration of all forms of local anaesthesia

Administration of intra muscular and venous injections

Prescription of drugs, pre operative, prophylactic and therapeutic requirements

Uncomplicated extraction of teeth

Transalveolar extractions and removal of simple impacted teeth

Minor oral surgical procedures

Management of Oro-facial infections

Simple orthodontic appliance therapy

Taking, processing and interpretation of various types of intra oral radiographs

Various kinds of restorative procedures using different materials available

Simple endodontic procedures

Removable and fixed prosthodontics

Various kinds of periodontal therapy

ORAL MEDICINE & RADIOLOGY

- Able to identify precancerous and cancerous lesions of the oral cavity and refer to the concerned speciality for their management
- Should have an adequate knowledge about common laboratory investigations and interpretation of their results.
- Should have adequate knowledge about medical complications that can arise while treating systemically compromised patients and take prior precautions/ consent from the concerned medical specialist.
- Have adequate knowledge about radiation health hazards, radiations safety and protection.
- Competent to take intra-oral radiographs and interpret the radiographic findings
- Gain adequate knowledge of various extra-oral radiographic procedures, TMJ radiography and sialography.
- Be aware of the importance of intra- and extra-oral radiographs in forensic identification and age estimation
- Should be familiar with jurisprudence, ethics and understand the significance of dental records with respect to law

PAEDIATRIC & PREVENTIVE DENTISTRY

- Able to instill a positive attitude and behaviour in children towards oral health and understand the principles of prevention and preventive dentistry right from birth to adolescence.
- Able to guide and counsel the parents in regards to various treatment modalities including different facets of preventive dentistry.
- Able to treat dental diseases occurring in child patient.
- Able to manage the physically and mentally challenged disabled children effectively and efficiently, tailored to the needs of individual requirement and conditions.

ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS

- Understand about normal growth and development of facial skeleton and dentition.
- Pinpoint oberrations in growth process both dental and skeletal and plan necessary treatment
- Diagnose the various malocclusion categories
- Able to motivate and explain to the patient (and parent) about the necessity of treatment
- Plan and execute preventive orthodontics (space maintainces or space regaines)
- Plan and execute interceptive orthodontics (habit breaking appliances)
- Manage treatment of simple malocclusion such as anterior spacing using removable appliances
- Handle delivery and activation of removable orthodontic appliances
- Diagnose and appropriately refer patients with complex malocclusion to the specialist

PERIODONTOLOGY

- Diagnose the patients periodontal problem, plan and perform appropriate periodontal treatment
- Competent to educate and motivate the patient
- Competent to perform thorough oral prophylaxis, subgingival scaling, root planning and minor periodontal surgical procedures
- Give proper post treatment instructions and do periodic recall and evaluation
- Familiar with concepts of osseointegration and basic surgical aspects of implantology

PROSTHODONTICS AND CROWN & BRIDGE

- Able to understand and use various dental materials
- Competent to carry out treatment of conventional complete and partial removable dentures and fabricate fixed partial dentures
- Able to carry out treatment of routine prosthodontic procedures.
- Familiar with the concept of osseointegration and the value of implant-supported Prosthodontic procedures

CONSERVATIVE DENTISTRY AND ENDODONTICS

- Competent to diagnose all carious lesions
- Competent to perform Class I and Class II cavities and their restoration with amalgam
- Restore class V and Class III cavities with glass ionomer cement
- Able to diagnose and appropriately treat pulpally involved teeth (pulp capping procedures)
- Able to perform RCT for anterior teeth
- > Competent to carry out small composite restorations
- Understand the principles of aesthetic dental procedures

ORAL & MAXILLOFACIAL SURGERY

- Able to apply the knowledge gained in the basic medical and clinical subjects in the management of patients with surgical problems
- Able to diagnose, manage and treat patients with basic oral surgical problems
- Have a broad knowledge of maxillofacial surgery and oral implantology
- Should be familiar with legal, ethical and moral issues pertaining to the patient care and communication skills
- Should have acquired the skill to examine any patient with an oral surgical problem in an orderly manner
- Understand and practice the basic principles of asepsis and sterilisation
- Should be competent in the extraction of the teeth under both local and general anaesthesia
- Competent to carry out certain minor oral surgical procedure under LA liketrans-alveolar extraction, frenectomy, dento alveolar procedures, simple impaction, biopsy, etc.
- Competent to assess, prevent and manage common complications that arise during and after minor oral surgery
- Able to provide primary care and manage medical emergencies in the dental office
- Familiar with the management of major oral surgical problems and principles involved in the inpatient management

PUBLIC HEALTH DENTISTRY

- Apply the principles of health promotion and disease prevention
- Have knowledge of the organization and provision of health care in community and in the hospital service
- Have knowledge of the prevalence of common dental conditions in India.
- Have knowledge of community based preventive measures
- Have knowledge of the social, cultural and env. Factors which contribute to health or illness.
- Administer and hygiene instructions, topical fluoride therapy and fissure sealing. Educate patients concerning the aetiology and prevention of oral disease and encourage them to assure responsibility for their oral health.

MINIMUM WORKING HOURS FOR EACH SUBJECT OF STUDY (B.D.S COURSE)

The following has been substituted in terms of (3rd Amendment) notification published on 25th August, 2011 in the Gazette of India and the same is as under:-

Subjects	Lecture	Practical	Clinical	Total Hours
_	Hours	Hours	Hours	
General Human Anatomy Including	100	175		275
Embryology, Osteology and Histology.				
General Human Physiology	120	60		180
Biochemistry	70	60		130
Dental Materials	80	240		320
Dental Anatomy Embryology,	105	250		355
and Oral Histology				
Dental Pharmacology & Therapeutics	70	20		90
General Pathology	55	55		110
Microbiology	65	50		115
General Medicine	60		9	150
General Surgery	60		90	150
Oral Pathology & Microbiology	145	130		275
Oral Medicine & Radiology	65		200	265
Paediatric & Preventive Dentistry	65		200	265
Orthodontics & dental orthopaedics	50		200	250
Periodontology	80		200	280
Oral & Maxillofacial Surgery	70		360	430
Conservative Dentistry &	135	200	460	795
Endodontics				
Prosthodontics & Crown & Bridge	135	300	460	895
Public Health Dentistry	60		290	350
Total	1590	1540	2550	5680

There should be a minimum of 240 teaching days every year consisting of 8 working hours including one hour of lunch break.

Subjects	Lecture	Practical	Clinical	Total Hours
	Hours	Hours	Hours	
General Human Anatomy Including	100	175		275
Embryology, Osteology and Histology.				
General Human Physiology	120	60		180
Biochemistry	70	60		130
Dental Materials	80	240		320
Dental Anatomy Embryology, and Oral	105	250		355
Histology				
Dental Pharmacology & Therapeutics	70	20		90
General Pathology Microbiology	55	55		110
	65	50		115
General Medicine	60		9	150
General Surgery	60		90	150
Oral Pathology & Microbiology	145	130		275
Oral Medicine & Radiology	65		170	235
Paediatric & Preventive Dentistry	65		170	235
Orthodontics & dental orthopaedics	50		170	220
Periodontology	80		170	250
Oral & Maxillofacial Surgery	70		270	340
Conservative Dentistry & Endodontics	135	200	370	705
Prosthodontics & Crown & Bridge	135	300	370	805
Public Health Dentistry including	60		200	260
Lectures on Tobacco Control & Habit				
Cessation				
Total	1590	1540	1989	5200

Note:

There should be a minimum of 240 teaching days each academic year consisting of 8 working hours, including one hour of lunch break. Internship -240x8 hours-1920 clinical hours

$\frac{\text{MINIMUM WORKING HOURS FOR EACH SUBJECT OF STUDY}}{\text{(B.D.S COURSE)}}$

I B.D.S

Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
General Human Anatomy Including Embryology,	100	175		275
Osteology and Histology				
General Human Physiology	120	60		180
Biochemistry.	70	60		130
Dental Anatomy Embryology,	105	250		355
and Oral Histology				
Dental Materials	20	40		60
Pre clinical Prosthodontics & Crown & Bridge	-	100		100
Total	415	685		1100

II B.D.S

Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
General & Dental Pharmacology and therapeutics	70	20		90
General Pathology	55	55		110
Microbiolog	65	50		115
Dental Materials	60	200		260
Oral Pathology and Oral Microbiology	25	50		75
Pre Clinical Prosthodontics & Crown & Bridge	25	200		225
Pre Clinical Conservative Dentistry	25	200		225
Total	325	775		1100

III B.D.S

Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
General Medicine	60		90	150
General Surgery	60		90	150
Oral Pathology and Oral Microbiology	120	80		200
Oral Medicine and Radiology	20		70	90
Paediatric and Preventive Dentistry	20		70	90
Orthodontics & Dentofacial Orthopaedics	20		70	90
Periodontology	30		70	100
Oral & Maxillofacial Surgery.	20		70	90
Conservative Dentistry & Endodontics.	30		70	100
Prosthodontics and Crown & Bridge	30		70	100
Total	410		750	1160

IV B.D.S

The following has been substituted in terms of (3rd Amendment) notification published on 25th August,2011 in the Gazette of India and the same is as under:-

Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
Oral Medicine and Radiology	45		130	175
Paediatric and Preventive Dentistry	45		130	175
Orthodontics & Dentofacial Orthopaedics	30		130	160
Periodontology	50		130	180
Oral & Maxillofacial Surgery.	20		90	110
Conservative Dentistry & Endodontics.	30		90	120
Prostodontics and Crown & Bridge	30		90	120
Public Health Dentistry	30		90	120
Total	280		880	1160

Subjects	Lecture	Practical	Clinical	Total Hours
	Hours	Hours	Hours	
Prosthodontics	80		300	380
Oral Medicine	45		100	145
Periodontics	50		100	150
Public Heatlh	60		200	260
Conservative Dentistry	80		300	380
Oral Surgery	50		200	250
Orthodontics	30		100	130
Pedodontics	45		100	145
Total	440		1400	1840

Provided that nothing contained in the provision of this regulations or statue or rules, regulations or guidance or notifications of the concerned university, or any other law for the time being in force shall prevent any student pursuing his/her 4th year BDS Course who fails in any one or more subjects of 1st semester will carry over those subjects to the 2nd Semester and will appear in those subjects together with the subjects of the 2nd semester. A pass in all the eight subjects is mandatory for completion of the 4th BDS Course before undergoing internship programme.

The following teaching Hours as prescribed for "V BDS" Course has been deleted in terms of (3rd Amendment) notification published on **25**th **August,2011** in the Gazette of India.

V B.D.S

Subject	Lecture	Practical	Clinical	Total
	Hours	Hours	Hours	Hours
Oral & Maxillofacial Surgery.	30		200	230

Prostodontics and Crown & Bridge 50 Public Health Dentistry 30	200	230
Public Health Dentistry 30	200 200	230

The following has been substituted only for Punjab and Andhra Pradesh in terms of (3rd Amendment) notification published on 25th August,2011 in the Gazette of India

Only 2007 batch (Punjab & Andhra Pradesh) will have to follow the existing 5th year only

Thereafter this 3rd amendment will be applicable.

Provided the concerned University follows the proposed amendment.

Note:

The following footnote has been modified/deleted as under in terms of (3rd Amendment) notification published on 25th August,2011 in the Gazette of India:-

- Behavioral Sciences Classes shall commence in 1st Year.
- Forensic odontology shall be covered in the department of Oral pathology and Oral Medicine during 3rd Year.
- Esthetic Dentistry shall be covered in the Departments of Conservative Dentistry and Prosthodontics during 4th & 5th Year.
- Oral Implantology shall be covered in the Department of Maxillofacial Surgery, Prosthodontics & Crown & Bridge and Periodontology during 4th & 5th Years.
- Ethics and dental jurisprudence shall be covered in Public Health Dentistry in 4th and 5th years.
- Electives / Research work should be encouraged during the 5th Year lasting for a period of atleast one month to be spent in a different dental institution in India / overseas.
- All the institutions shall compulsorily make arrangements for Comprehensive oral health care training for atleast 3 months during 5th Year. The department of Public Health Dentistry may be ustilised in case, the institution does not have separate department for this purpose. Qualified faculty members from the departments of Prosthodontics, Conservative and periodontics should guide the students along with faculty of Public Health Dentistry Department.
- The minimum working hours indicated each year of study does not include one month mid year vacation and one month of university examination.

It is the prerogative of the Dental Council of India to conduct inspections, at any of the colleges, at any time during the calendar year for inspecting whether the colleges are following the internship norms as laid down by DCI.

RECOMMENDED BOOKS

Human Anatomy, Embryology, Histology & Medical Genetics 1.

- 1. SNELL (Richard S.) Clinical Anatomy for Medical Students, Ed. 5, Llittle Brown & company, Boston.
- 2. RJ LAST'S Anatomy McMinn, 9th edition.
- 3. ROMANES(G.J.) Cunningham Manual of Practical Anatomy: Head & Neck & Brain Ed.15.Vol.III, Oxford Medical publication.
- 4. WHEATER, BURKITT & DANIELS, Functional Histology, Ed. 2, Churchill Livingstone.
- 5. SADLER, LANGMAN'S, Medical Embryology, Ed. 6.
- 6. JAMES E ANDERSON, Grant's Atlas of Anatomy. Williams & Wilkins.
- WILLIAMS, Gray's Anatomy, Ed.38. ,Churchill Livingstone.
- 8. EMERY, Medical Genetics.

2. **Physiology**

- 1. Guyton; Text book of Physiology, 9th edition.
- 2. Ganong; Review of Medical Physiology, 19th edition
- Vander; Human physiology, 5th edition
- 4. Choudhari; Concise Medical Physiology, 2nd edition
- 5. Chaterjee; Human Physiology, 10th edition
- 6. A.K. Jain; Human Physiology for BDS students, 1st edition
- 7. Berne & Levey; Physiology, 2^{nd} edition 8. West-Best & Taylor's, Physiological basis of Medical Practise, 11^{th} edition

EXPERIMENTAL PHYSIOLOGY:

- 1. Rannade; Practical Physiology, 4th edition
- Ghai; a text book of practical physiology
- 3. Hutchison's; Clinical Methods, 20th edition

3. **Biochemistry**

- Concise text book of Biochemistry (3rd edition) 2001, T.N. Pattabiraman
 Nutritional Biochemistry 1995, S. Ramakrishnan and S.V. Rao
- 3. Lecture notes in Biochemistry 1984, J.K. Kandlish

REFERENCE BOOKS:

- Text book of Biochemistry with clinical correlations 1997, T.N. Devlin
 Harper's Biochemistry, 1996., R.K. Murray et.al Basic and applied Dental Biochemistry, 1979, R.A.D. Williams & J.C.Elliot

4. Dental Anatomy, Embryology and Oral Histology

- 1. Orban's Oral Histology & Embryology S.N. Bhaskar
- Oral Development & Histology James & Avery
- 3. Wheeler's Dental Anatomy, Physiology & Occlusion Major M. Ash
- 4. Dental Anatomy its relevance to dentistry Woelfel & Scheid
- 5. Applied Physiology of the mouth Lavelle
- 6. Physiology & Biochemistry of the mouth Jenkins

5. **General Pathology**

- 1. Robbins Pathologic Basis of Disease Cotran, Kumar, Robbins
- Anderson's Pathology Vol 1 & 2 Editors Ivan Damjanov & James Linder
- Wintrobe's clinical Haematolog Lee, Bithell, Foerster, Athens, Lukens

6. Microbiology

- Text book of Microbiology R.Ananthanarayan & C.K.Jayaram Paniker.
 Medical Microbiology David Greenwood et al.
- 3. Microbiology Prescott, et al.
- 4. Microbiology Bernard D. Davis, et al.
- 5. Clinical & Pathogenic Microbiology Barbara J Howard, et al.
 6. Mechanisms of Microbial diseases Moselio Schaechter, et al.
- 7. Immunology an Introduction Tizard
- 8. Immunology 3rd edition Evan Roitt, et al.

7. **Dental Materials**

- 1. Phillips Science of Dental Materials 10th edn.- Kenneth J. Anusavice
- 2. Restorative Dental Materials 10 edn. Robert G.Craig
- 3. Notes on Dental Materials E.C. Combe
- Prep. Manual for undergraduates Dental Materials Dr. M.S. Koudi & Dr. SanjayGouda B. Patil

General and dental pharmacology and therapeutics 8.

- R.S.Satoskar, Kale Bhandarkar's Pharmacology and Pharmacolherapentics, 10th Edition, Bombay Popular Prakashan 1991.
- Bertam G Katzung, Basic and Clinical pharmacology 6th ed. Appleton & Lange 1997 2.
- Lauerence D.R. Clinical Pharmacology 8th ed. Churchill Livingstone 1997 3
- 4. Satoskar R.S. & Bhandarkar S.D., Pharmacology and Pharmaco Therapeutics part I & part ii, 13th Popular Prakashan Bombay 1993
- Tripathi K.D., Essentials of Medical Pharmacology 4th ed Jaypee Brothers 1999.

General Medicine 9.

Textbook of Medicine Davidson

Textbook of Medicine Hutchinson

General Surgery 10.

Short practice of Surgery Baily & Love

11. Oral Pathology & Oral Microbiology

- A Text Book of Oral Pathology Shafer, Hine & Levy 1.
- 2. Oral Pathology - Clinical Pathologic correlations Regezi & Sciubba.
- 3. Oral Pathology Soames & Southam.
- Oral Pathology in the Tropics Prabhu, Wilson, Johnson & Daftary 4.

12. **Public Health Dentistry**

- Dentistry Dental Practice and Community by David F. Striffler and Brain A. Burt, Edn. -1983, W. B. Saunders Company
- 2. Principles of Dental Public Health by James Morse Dunning, IVth Edition, 1986, Harward University Press.

- 3. Dental Public Health and Community Dentistry Ed by Anthony Jong Publication by The C. V. Mosby Company 1981
- 4. Community Oral Health-A system approach by Patricia P. Cormier and Joyce I. Levy published by Appleton-Century-Crofts/ New York, 1981
- 5. Community Dentistry-A problem oriented approach by P. C. Dental Hand book series Vol.8 by Stephen L. Silverman and Ames F. Tryon, Series editor-Alvin F. Gardner, PSG Publishing company Inc. Littleton Massachuseltts, 1980.
- 6. Dental Public Health- An Introduction to Community Dentistry. Edition by Geoffrey L. Slack and Brain Burt, Published by John Wrigth and sons Bristol, 1980
- 7. Oral Health Surveys- Basic Methods, 4th edition, 1997, published by W. H. O. Geneva available at the regional office New Delhi.
- 8. Preventive Medicine and Hygiene-By Maxcy and Rosenau, published by Appleton Century Crofts, 1986.
- 9. Preventive Dentistry-by J. O. Forrest published by John Wright and sons Bristoli, 1980.
- 10. Preventive Dentistry by Murray, 1997.
- 11. Text Book of Preventive and Social Medicine by Park and park, 14th edition.
- 12. Community Dentistry by Dr. Soben Peter.
- 13. Introduction to Bio-statistics by B. K. Mahajan
- 14. Introduction to Statistical Methods by Grewal

13. Paediatric and Preventive Dentistry

- 1. Pediatric Dentistry (Infancy through Adolescences) Pinkham.
- 2. Clinical Use of Fluorides Stephen H. Wei.
- 3. Understanding of Dental Caries Niki Foruk.
- 4. Handbook of Clinical Pedodontics Kenneth. D.
- 5. Dentistry for the Child and Adolescence Mc. Donald.
- 6. Pediatric Dentistry Damle S. G.
- 7. Behaviour Management Wright
- 8. Traumatic Injuries Andreason.
- 9. Textbook of Pedodontics Dr. Shobha Tandon

14. Oral Medicine and Radiology

- a) Oral Diagnosis, Oral Medicine & Oral Pathology
 - 1. Burkit Oral Medicine J.B. Lippincott Company
 - 2. Coleman Principles of Oral Diagnosis Mosby Year Book
 - 3. Jones Oral Manifestations of Systemic Diseases W.B. Saunders company
 - 4. Mitchell Oral Diagnosis & Oral Medicine
 - 5. Kerr Oral Diagnosis
 - 6. Miller Oral Diagnosis & Treatment
 - 7. Hutchinson clinical Methods
 - 8. Oral Pathology Shafers
 - 9. Sonis.S.T., Fazio.R.C. and Fang.L Principles and practice of Oral Medicine
- b) Oral Radiology
 - 1. White & Goaz Oral Radiology Mosby year Book
 - 2. Weahrman Dental Radiology C.V. Mosby Company
 - 3. Stafne Oral Roentgenographic Diagnosis W.B.Saunders Co.,
- c) Forensic Odontology
 - 1. Derek H.Clark Practical Forensic Odontology Butterworth-Heinemann (1992)
 - 2. C Michael Bowers, Gary Bell Manual of Forensic Odontology Forensic Pr (1995)

15. Orthodontics and Dentofacial Orthopedics

- 1. Contemporary Orthodontics William R. Proffit
- 2. Orthodontics For Dental Students White And Gardiner
- 3. Handbook Of Orthodontics Moyers
- 4. Orthodontics Principles And Practice Graber
- 5. Design, Construction And Use Of Removable Orthodontic Appliances C. Philip Adams
- 6. Clinical Orthodontics: Vol1 & 2 Salzmann

16. Oral and Maxillofacial Surgery

- 1. Impacted teeth; Alling John F & etal.
- 2. Principles of oral and maxillofacial surgery; Vol.1,2 & 3 Peterson LJ & etal.
- 3. Handbook of medical emergencies in the dental office, Malamed SF.
- 4. Killeys Fractures of the mandible; Banks P.
- 5. Killeys fractures of the middle 3rd of the facial skeleton; Banks P.
- 6. Killey and Kays outline of oral surgery Part-1; Seward GR & etal
- 7. Essentials of safe dentistry for the medically compromised patients; Mc Carthy FM
- 8. Extraction of teeth; Howe, GL
- 9. Minor Oral Surgery; Howe.GL

17. Prosthodontics, Crown & Bridge

1. Syllabus of Complete denture by – Charles M. Heartwell Jr. and Arthur O. Rahn.

- Boucher's "Prosthodontic treatment for edentulous patients" 2.
- 3. Essentials of complete denture prosthodontics by – Sheldon Winkler.
- 4. Maxillofacial prosthetics by - Willam R.Laney.
- 5. McCraken's Removable partial prosthodontics
- 6. Removable partial prosthdontics by - Ernest L. Miller and Joseph E. Grasso.

18. Periodontology

Glickman's Clinical Periodontology - Carranza

REFERENCE BOOKS:

- 1. Essentials of Periodontology and Periodontics - Torquil MacPhee
- 2. Contemporary Periodontics - Cohen
- 3. Periodontal therapy – Goldman
- 4. Orbans' Periodontics - Orban
- 5. Oral Health Survey – W.H.O.
- Preventive Periodontics Young and Stiffler Public Health Dentistry Slack 6.
- 7
- 8. Advanced Periodontal Disease - John Prichard
- Q Preventive Dentistry – Forrest
- 10. Clinical Periodontology - Jan Lindhe
- Periodontics Baer & Morris. 11.

19. **Conservative Dentistry and Endodontics**

- Esthetic guidelines for restorative dentistry; Scharer & others 1.
- 2. Esthetics of anterior fixed prosthodontics; Chiche (GJ) & Pinault (Alain)
- Esthetic & the treatment of facial form, Vol 28; Mc Namara (JA) 3.

20. **Aesthetic Dentistry**

- Aesthetic guidelines for restorative dentistry; Scharer & others 1.
- Aesthetics of anterior fixed prosthodontics; Chiche (GJ) & Pinault (Alain) 2
- Aesthetic & the treatment of facial form, Vol 28; Mc Namara (JA) 3.

21. **Forensic Odontology**

Practical Forensic odontology - Derek Clark

22. Oral Implantology

- Contemporary Implant Dentistry Carl .E. Misch Mosby 1993 First Edition. 1
- Osseointegration and Occlusal Rehabilitation Hobo S., Ichida .E. and Garcia L.T. 2. Quintessence Publishing Company, 1989 First Edition.

23. **Behaviourial Science**

- General psychology -- Hans Raj, Bhatia 1.
- 2. Behavioural Sciences in Medical practice -- Manju Mehta

24. **Ethics**

- Medical Ethics, Francis C.M., I Ed. 1993, Jaypee Brothers, New Delhi p. 189. 1.
- Books titles will keep on adding in view of the latest advances in the Dental 1. Note:
 - 2. Standard Books from Indian Authors are also recommended.

LIST OF JOURNALS:

- Journal of Dentistry 1.
- 2. British Dental Journal
- 3. International Dental Journal
- 4. **Dental Abstracts**
- 5. Journal of American Dental Association
- British Journal of Oral and Maxillofacial Surgery 6.
- 7. Oral Surgery, Oral Pathology and Oral Medicine
- 8. Journal of Periodontolgy
- Journal of Endodontics
- 10. American journal of Orthodontics and Dentofacial Orthopedics
- 11. Journal of Prosthetic Dentistry
- 12. Journal of Public Health Dentistry
- 13. **Endodontics and Dental Traumatology**
- Journal of Dental Education 14.
- Dental Update 15.
- Journal of Dental Material 16.

Note: This is the minimum requirement. More journals both Indian and Foreign are recommended for imparting research oriented education.

INFRASTRUCTURE & FUNCTIONAL REQUIREMENTS

50 ADMISSIONS

General Facilities:

1. Administrative block: 2000 sq.ft.

consisting of -

- (a) Dean's room,
- (b) Administrative officer's room
- (c) Meeting room
- (d) Office
- (e) Office stores
- (f) Pantry etc.

2. **Library**: 4500 sq.ft.

consisting of -

- (a) Reception & waiting
- (b) Property counter
- (c) Issue counter
- (d) Photocopying area
- (e) Reading room to accommodate 50% of total students strength.
- (f) Postgraduates & staff reading room
- (g) Journal room
- (h) Audio-visual room
- (i) Chief librarian room
- (j) Stores and stocking area.

3. **Lecture halls – 4**: 3200 sq.ft.

Each hall to accommodate 10% more of admission strength with proper seating arrangement, blackboard, microphone and facilities for slide, overhead and multi-media projection.

4. Central stores: 400 sq.ft.

With proper storing facilities like racks, refrigerator, preferably compact storage systems.

5. Maintenance room: 600 sq.ft.

Equipped with proper facilities to maintain and repair dental chairs and units and various other equipments in the college and hospital.

6. Photography and artist room: 250 sq.ft.

With proper studio facilities for clinical photography, developing, preparation of slides, charts, models etc.

7. **Medical stores:** 200 sq.ft.

Stocked with all the necessary drugs usually prescribed in a dental hospital.

- 8. Aminities area: 2000 sq.ft.
 - (a) Boys' and Girls' locker rooms
 - (b) Boys' and Girls' common rooms
 - (c) Common room for non-teaching staff
 - (d) Common room for teaching staff
 - (e) Change room for men
 - (f) Change room for women

$9. \ \ \mbox{Compressor and room for gas plant:} \quad 200 \ sq.ft.$

Adequate to accommodate required capacity compressors, gas cylinders etc.

10. Pollution control measures:

All the dental institutions shall take adequate pollution control measures by providing incernation plant, sewage water treatment plant, landscaping of the campus etc.

11. **Cafetaria:** 800 sq.ft.

With accommodation for 100 people with kitchen, stores, washing area etc.

12. Examination hall: 1800 sq.ft.

A separate hall for university and other examination furnished with chairs and individual tables to accommodate 125 students at a time.

13. Hostels:

The hostel accommodation shall be provided based on number of admissions for all the boys and girls in the Dental College campus itself. The accommodation may be increased in a phased manner over a period of 4 years.

14. Staff quarters:

All the staff members, teaching and non-teaching working in the institution shall be provided adequate accommodation in the 5 acres land earmarked for the college. The staff quarters may be built in a phased manner over a period of 4 years.

15. Play ground:

There shall be facilities for both indoor and out-door games in the premises.

Against Serial No. 17. Auditorium, the word serial No. 17 has been deleted and substituted by 16, in terms of (1st Amendment) notification published on 7th January,2008 in the Gazette of India.

16.17. Auditorium:

To accommodate at least 400 people consisting of -

Proper seating arrangements, reception counter, green rooms, lobby, fitted with sound system, slide and multimedia presentation facility.

Against Serial No. 18. Laboratories, the word serial No. 18 has been deleted and substituted by 17, in terms of (1st Amendment) notification published on 7th January,2008 in the Gazette of India.

17.18. Laboratories:

I. Dental subjects:

- (a) Pre-clinical Prosthodontics and dental material lab 1500 sq.ft.
- (b) Pre-clinical conservative lab 1300 sq.ft.
- (c) Oral biology and oral pathology lab 1300 sq.ft.
- (d) Laboratory for orthodontics and pedodontics 800 sq.ft.
- II. Medical subjects: (only for independent dental colleges): 4500 sq.ft.
 - (a) Anatomy dissection hall with storage for cadavers, osteology, demonstration room etc. Area-1500 sq.ft.

The following have been added in terms of (1st Amendment) notification published on 7th January,2008 in the Gazette of India.

- (b) One laboratory for physiology and pathology and microbiology with stores and preparation rooms for individual subjects attached to it. Area–1500 sq.ft. for each subject
- (c) Laboratory for biochemistry and pharmacology with store and preparation rooms separately for both subjects. Area–1500 sq.ft. for each subject

III. Clinical:

(a) Prosthodontics-Plaster room

Polymers room

Wax room

Casting laboratory

Ceramic lab 1300 sq.ft.

(b) Conservative Dentistry - Plaster room

Casting & ceramic laboratories ... 300 sq.ft.

- (c) Oral pathology for histopathology ... 400 sq.ft.
 - (d) Haematology and clinical biochemistry: a laboratory for routine blood and biochemical investigation and urine analysis ... 200 sq.ft.

Against Serial No. 16. Distilled Water Plant, the word serial No. 16 has been deleted and substituted by 18, in terms of (1st Amendment) notification published on 7th January,2008 in the Gazette of India.

18. 16. Distilled Water Plant

The following have been added after the substituted Serial No. 18 Distilled Water Plant, in terms of (1st Amendment) notification published on 7th January,2008 in the Gazette of India.

"Note: Minimum built up area of the dental college building other than Hostel and Staff Quarters should not be less than 30,000 sq. ft. in 3rd Year as per DCI Regulations, 2006."

100 ADMISSIONS

General:

1. Administrative block: 3000 sq.ft.

consisting of -

- (e) Dean's room,
- (f) Administrative officer's room
- (g) Meeting room
- (h) Office

- (i) Office stores
- (j) Pantry etc.

2. **Library:** 8000 sq.ft.

consisting of -

- (a) Reception & waitingProperty counter
- (b) Issue counter
- (c) Photocopying area
- (d) Reading room to accommodate 50% of total students strength.
- (e) Postgraduates & staff reading room
- (f) Journal room
- (g) Audio-visual room
- (h) Chief librarian room
- (i) Stores and stocking area.
- (j) E-Consortium provision to be provided in the College Library connected with the National Medical Library.

3. **Lecture halls - 4:** 6400 sq.ft.

Each hall to accommodate 10% more of admission strength with proper seating arrangement, blackboard, microphone and facilities for slide, overhead and multi-media projection.

4. Central stores: 800 sq.ft.

With proper storing facilities like racks, refrigerator, preferably compact storage systems.

5. Maintenance room: 1000 sq.ft.

Equipped with proper facilities to maintain and repair dental chairs and units and various other equipments in the college and hospital.

6. Photography and artist room: 400 sq.ft.

With proper studio facilities for clinical photography, developing, preparation of slides, charts, models etc.

7. **Medical stores:** 300 sq.ft.

Stocked with all the necessary drugs usually prescribed in a dental hospital.

8. Aminities area: 3200 sq.ft.

- (a) Boys' and Girls' locker rooms
- (b) Boys' and Girls' common rooms
- (c) Common room for non-teaching staff
- (d) Common room for teaching staff
- (e) Change room for men
- (f) Change room for women

9. Compressor and room for gas plant: 300 sq.ft.

Adequate to accommodate required capacity compressors, gas cylinders etc.

10. Pollution control measures:

All the dental institutions shall take adequate pollution control measures by providing incernation plant, sewage water treatment plant, landscaping of the campus etc.

11. **Cafetaria:** 1500 sq.ft.

With accommodation for 100 people with kitchen, stores, washing area etc.

12. **Examination hall:** 3600 sq.ft.

A separate hall for university and other examination furnished with chairs and individual tables to accommodate 250 students at a time.

13. **Hostels:**

The hostel accommodation shall be provided based on number of admissions for all the boys and girls in the Dental College campus itself. The accommodation may be increased in a phased manner over a period of 4 years.

14. Staff quarters:

All the staff members, teaching and non-teaching working in the institution shall be provided adequate accommodation in the 5 acres land earmarked for the college. The staff quarters may be built in a phased manner over a period of 4 years.

15. Play ground:

There shall be facilities for both indoor and out-door games in the premises.

16. Auditorium:

To accommodate at least 500 people consisting of –

Proper seating arrangements, reception counter, green rooms, lobby, fitted with sound system, slide and multimedia presentation facility.

17. Laboratories:

I. Dental subjects:

- (a) Pre-clinical Prosthodontics and dental material lab 3000 sq.ft.
- (b) Pre-clinical conservative lab 2500 sq.ft.
- (c) Oral biology and oral pathology lab 2500 sq.ft.
- (d) Laboratory for orthodontics and pedodontics 1500 sq.ft.

II. Medical subjects: (only for independent dental colleges):7500 sq.ft.

(a) Anatomy dissection hall with storage for cadavers, osteology, demonstration room etc. Area -2500 sq.ft.

The following have been added in terms of (1st Amendment) notification published on 7th January,2008 in the Gazette of India.

- (b) One laboratory for physiology and pathology and microbiology with stores and preparation rooms for individual subjects attached to it. Area – 2500 sq.ft. for each subject
- (c) Laboratory for biochemistry and pharmacology with store and preparation rooms separately for both subjects – 2500 sq.ft. for each subject

III. Clinical:

(a) Prosthodontics - Plaster room

Polymers room Wax room Casting laboratory

..... 2500 sq.ft. Ceramic lab

(b) Conservative Dentistry - Plaster room

Casting & ceramic laboratories ... 600 sq.ft.

- (c) Oral pathology for histopathology ... 600 sq.ft.
- (d) Haematology and clinical biochemistry: a laboratory for routine blood and biochemical investigation and urine analysis ... 300 sq.ft.

18. **Distilled Water Plant**

The following have been added after the Serial No. 18. Distilled Water Plant, in terms of (1st Amendment) notification published on 7th January,2008 in the Gazette of India.

"Note: Minimum built up are of the dental college building other than Hostels and Staff Quarters should not be less then 60.000 sq. ft. in 1st Year and 1,00,000 sq. ft. in 3rd Year as per DCI Regulations, 2006."

TEACHING AIDS:

Audiovisual - Adequate number of overhead projectors, slide projectors shall be provided in the lecture halls and seminar rooms attached to various departments. It is also desirable to have an LCD or DLP projector for multimedia presentations.

Computers - The administrative area, clinics, stores and library shall be provided with computers & printers preferably interconnected for better co-ordination.

The applicant owns and manages a General Hospital of not less than 100 beds as per DCI (Establishment of New Dental Colleges, Opening of New or Higher Course of Study or Training and Increase of Admission Capacity in Dental Colleges) Regulations, 2006 with necessary infrastructure facilities including teaching pre-clinical, para-clinical and allied medical sciences in the campus of the proposed dental college,

The proposed dental college is located in the proximity of a Government Medical College or a Medical College recognised by the Medical Council of India and an undertaking of the said Medical College to the effect that it would facilitate training to the students of the proposed dental college in the subjects of Medicine, Surgery and Allied Medical Sciences has been obtained.

Where no Medical College is available in the proximity of the proposed dental college, the proposed dental college gets itself tied up at least for 5 years with a Government General Hospital having a provision of at least 100 beds and located within a radius of 10 K.M. of the proposed dental college and the tie-up is extendable till it has its own 100 bedded hospital in the In such cases, the applicant shall produce evidence that necessary same premises. infrastructure facilities including teaching pre-clinical, para-clinical and allied medical sciences are owned by the proposed dental college itself.

A 100 bedded teaching hospital should have a definite out patient departments, in-patient services and 24 hours emergency and critical care services. It should have a medical programme as under:-

I. MEDICAL PROGRAMME

A) Medical & Allied Disciplines

- General Medicine
- General Surgery
- Obstetrics and Gynaecology
- Orthopaedics
- Critical Medicine
- Emergency Medicine
- Otrohino Laryngology
- Paediatrics
- Pathology
- Anaesthesiology
- Blood Bank & Transfusion
- Community Medicine
- Hospital Administration

B) Nursing, Paramedical, Technical and Allied Services

- Dielities and Therapeutics
- Drugs & Pharmacy
- ECG Technology
- Imaging Technology
- Central Sterlic Supply department
- Physiotherapy
- Medical Record Sections

C) Engineering & Allied Services

- Fire protection
- Electrical
- Air conditioning/Central heating
- Medical Gases
- Refrigeration
- Central Workshop
- Ambulance Service
- Water Supply
- Sewage Treatment/Disposal and waste disposal cell

D) Administration and Ancillary Services

- General Administration
- Material Management
- Medical Social Worker
- PRO
- Library
- Security

II. FUNCTIONAL PROGRAMME

A) Site

Site should be within 10 k.m. radius of the teaching block of Dental College – a site with high degree of sensitivity to outside noise should not be present. It should be accessible by transport and building should be well ventilated.

B) Category wise Bed Distribution

(i)	General Ward – Medical including allied specialities	30 beds
(ii)	General Ward - Surgical including allied specialities.	30 beds
(iii)	Private Ward (A/C & Non A/C)	9 beds
(iv)	Maternity Ward	15 beds
(v)	Pediatric Ward	6 beds

The intensive care services for medical/surgical intensive care with bed complement of 4 beds (4% of bed strength).

The critical care services for medical/surgical emergencies with bed complement of 6 beds (6% of bed strength).

III. AREA REQUIREMENTS (AS PER BUREAU OF INDIAN STANDARDS)

- Covered area requirement is 20 sq. m. / bed Out of the total covered area
- 40% inpatient services
- 35% outpatient services

- 25% department and supportive services

IV. MAN POWER REQUIREMENTS

The consultants in the various departments should have atleast 8 years teaching experience after post graduation.

	after post graduation.		_
M	EDICAL STAFF		
-	General Surgery	-	2
_	General Medicine	-	2
_	Obstetrics & Gynaecology	_	2
_	ENT	_	2
_	Paediatrics	_	2 2 2 2 2
_	Anaesthesia	_	2
_	Orthopaedics	_	2
_	Pharmacologist	_	$\overline{1}$
_	Radiologist	_	1
_	G. DMO	_	1
_	Community Medicine	_	1
_	Hospital Administration	_	1
	-		1
NU	JRSING STAFF Matron		1
-		-	6
-	Sister in-charge	-	6
-	O. T. Nurses	-	
-	General Nurses	-	20
-	Labour Room Nurses	-	4
H	EALTH STAFF		
-	Female Health Assistant	-	1
-	Extension Educator	-	1
	Paramedical Staff		
_	Lab Technician/Blood Bank Te	ch	4
_	ECG Technician	_	1
_	Pharmacist	_	4
_	Sr. Radiographer	_	1
_	CSSD	_	2
_	Medical Records	_	$\overline{1}$
			_
E	NGINEERING STAFF		0
-	Civil	-	2
-	Mechanical	-	2
-	Electrical	-	2 2 4
-	Engineering aid	-	4
0	THER STAFF		
-	Drivers	-	2
-	Carpenter	-	1
-	Cooks	-	2
-	Barber	-	1
-	Class IV including chowkidars	-	55
ДΤ	OMINISTRAIVE STAFF		
-	Office Superintendent	_	1
_	Head Clerk	_	1
_	Cashier	_	1
_	Stenographer	_	1
	~ 10011081 april		

Satellite Dental Clinics:

All the dental colleges are encouraged to establish atleast one or two satellite centers with all the infrastructural facilities with in 50 kms distance to train and expose students in community oral health care programmes.

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4

Dental Hospital:

U.D.C. L.D.C.

The following are the clinical departments in a Dental College.

- 1. Oral Medicine and Radiology
- 2. Oral Pathology and Oral Microbiology
- 3. Public Health Dentistry.
- 4. Paediatric and Preventive Dentistry
- 5. Orthodontics & Dental orthopaedics
- 6. Periodontology
- 7. Conservative Dentistry and Endodontics.

- 8. Oral & Maxillofacial Surgery.
- 9. Prosthodontics and Crown & Bridge

Out patients:

Since dentistry being more clinical oriented speciality, the Council desires that all the institutions make efforts to have adequate clinical material for satisfactory training of undergraduate students. There shall be atleast 75 to 100 new patients on an average each day in colleges with 50 admissions and 100 - 150 new patients in colleges with 100 admissions.

Each of the clinical departments should have the following functional areas -

50 ADMISSIONS:

- (a) Reception and waiting room 200 sq.ft.
- (b) Undergraduate clinic adequate to accommodate the prescribed number of dental chairs and
- (c) Sterilization room where central sterilization facilities are not provided 150 sq.ft.
- (d) Small department stores 100 sq.ft.
- (e) Seminar room 200 sq.ft.

Staff rooms:

- 1. H.O.Ds room 180 sq.ft.
- 2. Readers' room 150 sq.ft.
- 3. Lecturers' room - 250 sq.ft.

Note: Departments having postgraduate training should provide additional functional requirements as per MDS regulations.

Main reception and dental records section: 800 sq.ft.

100 ADMISSIONS:

- (a) Reception and waiting room 300 sq.ft.
- (b) Undergraduate clinic adequate to accommodate the prescribed number of dental chairs and units.
- (c) Sterilization room where central sterilization facilities are not provided 200 sq.ft.
- (d) Small department stores 100 sq.ft.
- (e) Seminar room 400 sq.ft.

Staff rooms:

- 1. H.O.Ds room 180 sq.ft.
- 2. Readers' room 150 sq.ft.
- 3. Lecturers' room 300 sq.ft

Note: Departments having postgraduate training should provide additional functional requirements as per MDS regulations.

Main reception and dental records section: 1500 sq.ft.

There should be adequate area for patients reception, waiting, registration, storage of patients records etc.

Requirement of dental chairs and units:

For 50 admissions 100 For 100 admissions 200

Note: Requirement of Dental Chairs for 1st and 2nd BDS will be as per DCI (Establishment of New Dental Colleges, Opening of New or Higher Course of Study or Training and Increase of Admission Capacity in Dental Colleges) Regulations, 2006.

Distribution of dental chairs and units in various departments (Specification is mentioned in the DCI Regulations 2006):

<u>Department</u>	50 admissions	100 admissions
Oral Medicine & Radiology	06	12
Oral Pathology & Oral Microbiology	01	02
Public Health Dentistry	08	16
Paediatrics and Preventive Dentistry	10	20
Orthodontics	09	18
Periodontology	17	34
Conservative Dentistry and Endodontics	17	34
Oral & Maxillofacial Surgery	15	30
Prosthodontics and Crown & Bridge	17	34
	100	200
Total approximate area for U.G. clinics (5	0 admissions) –	12,500 sq.ft.
m 1		05 000 6

Total approximate area for U.G. clinics (100 admissions) – 25,000 sq.ft

EQUIPMENT REQUIREMENTS

Department : ORAL MEDICINE AND RADIOLOGY

NAME	SPECIFICATION	QUAN 50	100
		Admns.	Admns.
	(Space allocation for each Dental chair 100		
	Sq Ft in all the Departments)		
Dental Chairs and Units	Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, Air Ventury Suction, X-Ray viewer, 3 way syringe, instrument tray, Dental Operator's Stool with height adjustment.	6	12
Panoramic X-Ray with	Preferably digital	1	1
Cephalometric			
Intra Oral X-ray Unit	70 KV , 8mA, high frequency preferably Digital timer	2	3
Pulp testers	Digital	2	3
Automatic periapical X-ray Developer		1	1
Automatic Panoramic with Cephalometric X-ray Developer		1	1
X-ray viewer	For Panoramic and Cephalometric films	2	2
Radiovisiography	Digital Intra X-ray System with one Sensor and Software	1	1
General X-ray Unit		1	1
Ortho Pantmograph	preferably digital	1	1
Automatic Developers/Dark Room		1	2
Lead aprons		2	2
Lead Gloves		1	1
X-ray Hangers		6	6
X-ray viewers		2	2
Diagnostic Kits	Mouth mirror, dental probe, college tweezers	20	40
Lead Screen		1	1
Biopsy Kit		1	1
Autoclave	Having wet and dry cycle, which can achieve 135°C with minimum capacity of 20 liters	1	2
Computers	Minimum Pentium –IV	1	1
Intra Oral Camera	With High resolution	1	1
Needle Burner with Syringe Cutter		2	2

${\bf Department: ORAL\ PATHOLOGY\ AND\ ORAL\ MICROBIOLOGY}$

NAME	SPECIFICATION	QUANTITY	
		50 Admns.	100 Admns.
Dental Chairs and Units	With shadowless lamp, spittoon, 3 way syringe, instrument tray and suction	1	2
Microscopes		20	40
Microtome		1	1
Wax bath		1	1
Water bath		1	1
Knife sharpner		1	1
Hot plate		1	1
Spencer knife		1	1

Department: PUBLIC HEALTH DENTISTRY

NAME	SPECIFICATION	QUAN' 50 Admns.	TITY 100 Admns.
Dental Chairs and Units	Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, Air ventury suction, micromotor control light cure 3 way syringe, X-ray viewer, instrument tray Dental Operators stool with height adjustment With shadowless lamp, spittoon, 3 way	8	16

	syringe, instrument tray and suction,		
	micromotor, airotor, light cure		
Autoclaves	Having wet and dry cycle, which can achieve 135°C with minimum capacity of 20 liters.	1	2
Ultrasonic cleaner	Minimum capacity 13 liters with mesh bucket with digital timer	1	2
Needle burner with syringe cutter		2	4
MOBILE CLINIC			
Mobile dental van	Mobile dental van with two dental chairs with all the attachments and adequate sitting space for 15 to 20 people		
Dental chair with unit	Hydraulically operated with spittoon attachment, halogen light with 2 intensity, air ventury suction, airrotor, micromotor, 3 way-scaler and light cure, x-ray viewer, instrument tray, operating stool.	2	
Autoclaves	Having wet and dry cycle, which can achieve 135°C with minimum capacity of 20 liters.	1	1
Intraoral x-ray	Portable, 70 KV, 8mA	1	1
Glass bead sterilizers		1	1
Compressor	1.25HP	1	1
Metal Cabinet	With wash basin	1	1
Portable dental chair	Suitcase unit with airrotor, micromotor, scaler and compressor 0.25HP	2	2
Stabilizer	4KV	1	1
Generator	4KV	1	1
Water tank	400ltrs	1	1
Oxygen cylinder		1	1
Public address system		1	1
TV and video cassette player		1	1
Demonstration models			

Department: PAEDIATRIC AND PREVENTIVE DENTISTRY

ectrically operated, Spittoon attachment, alogen Light with 2 intensity, high power otorized evacuation system, Air rotor with iniature, Airrotor HPS, Micro motor with iniature contrangle Hand piece, 3 way ringe, ultrasonic sealer with 3 tips, Light re unit LED based heat free, X-ray viewer, strument tray Dental Operator's stool with eight adjustment (Pedo chair preferred) aving wet and dry cycle, which can achieve 15°C with minimum capacity of 20 liters. Inimum capacity 13 liters with mesh acket with digital timer	50 Admns. 10 1 1 2	20 2 2 3
alogen Light with 2 intensity, high power otorized evacuation system, Air rotor with iniature, Airrotor HPS, Micro motor with iniature contrangle Hand piece, 3 way ringe, ultrasonic sealer with 3 tips, Light are unit LED based heat free, X-ray viewer, strument tray Dental Operator's stool with hight adjustment (Pedo chair preferred) aving wet and dry cycle, which can achieve 15°C with minimum capacity of 20 liters.	1 1	20 2
alogen Light with 2 intensity, high power otorized evacuation system, Air rotor with iniature, Airrotor HPS, Micro motor with iniature contrangle Hand piece, 3 way ringe, ultrasonic sealer with 3 tips, Light are unit LED based heat free, X-ray viewer, strument tray Dental Operator's stool with hight adjustment (Pedo chair preferred) aving wet and dry cycle, which can achieve 15°C with minimum capacity of 20 liters.	1	2
aving wet and dry cycle, which can achieve 5°C with minimum capacity of 20 liters. nimum capacity 13 liters with mesh	1	2
1 0	_	
-	2	2
		ر ا
	1	1
	1	1
	3	5
	1	1
ith torque control HPs	1	1
	1	1
gital intra X-ray system with pedo sensor d software	1	1
th high resolution	1	1
	5	10
	5	10
	5	10
	1	1
	1	1
	1	1
i	d software	gital intra X-ray system with pedo sensor d software th high resolution 5 5 1 1

Plaster dispenser	One each for plaster and stone plaster	2	2
Model Trimmer	With diamond disc	1	1
Model Trimer	Double disc one diamond and one carborandum disc	1	1
Welder with soldering attachments		1	1
Vibrator		2	2
Lab micro motor	Heavy duty with Hps	2	3
Dental Lathe		1	1
Model Trimmer		1	1
Steam cleaner		1	1
Pressure moulding machine		1	1
Carborandum Disc		1	1
Diamond disc		1	1

Department: ORTHODONTICS

NAME	SPECIFICATION	QUAN	TITY
		50	100
		Admns.	Admns.
Dental Chairs and Units	Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, Air ventury suction, micromotor control light cure 3 way syringe, X-ray viewer, instrument tray Dental Operators stool with height adjustment	9	18
Unit mount scaler		3	5
Autoclave	Having wet and dry cycle, which can achieve 135°C with minimum capacity of 20 liters	1	2
Ultrasonic Cleaner	Minimum capacity 13 liters with mesh bucket with digital timer	1	2
ORTHO LAB			
Plaster dispenser	One each for plaster and stone plaster	2	2
Vibrator		2	2
Model Trimmer		1	2
Micromotor –	heavy duty	2	4
Lathe		1	2
X-ray viewers		2	2
OPG with cephalostat	If available in radiology its is adequate.	1	1
Welders		2	4
Blue Torch		1	1
Base Formers		2	4
Typodont		2	4
Set of Pliers		5	10
Welder with soldering attachments		1	1
Hydro solder		1	1
	With metal teeth wax rim of Class I, II, III	3	4
Typhodont articulator	with metal teeth wax fill of Class I, II, III		
Pressure moulding machine		1	1

${\bf Department: PERIODONTOLOGY}$

NAME	AME SPECIFICATION		NTITY
		50 Admns.	100 Admns.
Dental Chairs and Units	Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, high power evacuation system, Air ventury suction, X-ray viewer, Airrotor, Micromotor with straight and contrangle Handpiece, With shadowless lamp, spittoon, 3 way syringe, ultrasonic sealer with 3 tips, X-ray viewer, instrument tray dental operator's stool with height adjustment	17	34
	Note: Atleast 25% of the units should have the Airpolisher.		
Scaling instrument sets		5	10
Surgical instrument sets		3	6
Autoclave	Having wet and dry cycle, which can achieve	2	3

	135°C with minimum capacity of 20 liters		
Ultrasonic scaler	Minimum capacity 13 liters with mesh	1	2
	bucket		
Electro surgical cautery		1	1
Needle burner with syringe		4	6
cutter			
LASER	Soft tissue laser	1	1
Surgical motor with physio		1	1
dispenser			

Department: CONSERVATIVE DENTISTRY AND ENDODONTICS

NAME	SPECIFICATION	50	TITY 100 Admns.
Dental Chairs and Units	Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, high power evacuation system, Air ventury suction, X-ray viewer, Airrotor, Micromotor with straight and contrangle Handpiece, With shadowless lamp, spittoon, 3 way syringe, ultrasonic sealer with 3 tips, X-ray viewer, instrument tray dental operator's stool with height adjustment	17	34
Rubber dam kits		4	6
Restorative instruments kits		5	10
R.C.T. instrument kits		5	10
Autoclaves	Having wet and dry cycle, which can achieve 135°C with minimum capacity of 20 liters	2	3
Ultrasonic cleaner	Minimum capacity 13 liters with mesh bucket	1	2
Needle burner with syringe cutter		3	4
Amalgamator	With auto proportion, auto dispenser	2	3
Rubber dam kits		4	6
Pulp Tester-Digital		2	4
Apex Locator		1	2
Glass bead sterilizers		4	6
Plaster dispensers		2	2
Vibrator		1	2
Ceramic Unit		1	1
Casting machine		1	1
Intra-oral X-ray Unit	Proper radiation safety	1	1
Automatic Developer		1	1
Radiovisiography	RVG with Computer	1	1
Endo motor	With torque control Hps	1	1
Bleaching unit		1	1
Magnification loops		1	2
Injectable gutta percha		1	2
PHANTOM LAB UNIT	Phantom Table fitted with Halogen Operating Light Phantom Head body type neck joint for all the movement, TMJ movement. Modular with Air rotor, Micro motor with contra angle Hps, 3-way syringe, jaw with ivorine teeth, preferably soft gingival, dental operator's stool (not to use extracted or cadaver teeth).	30	60

CHEMICAL LABORATORY

Plaster Dispenser	One each for plaster and stone plaster	2	2
Model Trimmer	Carborandum disc	1	1
	Diamond disc	1	1
Lathe	Heavy Duty	1	2
Lab Micromotor	With heavy duty handpiece	2	3
Ultrasonic cleaner	Minimum capacity 5 liters	1	1
Spindle Grinder		1	1
Vibrator		1	2
Burnout furnace		1	1
Porcelain furnace		1	1

Sandblasting Machine		1	1
Lab Airrotor		1	1
Pindex System		1	1
Circular saw		1	1
Vacuum mixer		1	1
Pneumatic chisel		1	1
Casting machine	Motor cast/induction casting preferred	1	1

Department : ORAL & MAXILLOFACIAL SURGERY A) EXODONTIA

NAME	SPECIFICATION		YTY
		50	100
		Admns.	Admns.
Dental Chairs and Units	Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, Air ventury suction, X-ray viewer, 3 way syringe, instrument tray Dental Operator's stool and height adjustment and suction, Micromotor/Airotor	15	30
Autoclaves	Front loading Having wet and dry cycle, which can achieve 135°C with minimum capacity of 20 liters	2	2
Ultrasonic Cleaner	Minimum capacity 13 liters with mesh bucket	1	2
Needle burner with syringe cutter		4	6
Extraction forceps sets	Complete set	10	20
Dental elevators	Complete set	5	10
Minor Oral surgery kits		3	6
Emergency drugs tray		1	1
Oxygen cylinder with mask		1	1
X-ray viewers		2	2
Computer	Minimum Pentium IV	1	1
B) MINOR SURGERY			

Dental Chairs and Units	Electrically operated, Spittoon attachment,	3	5
	Halogen Light with 2 intensity, high power		
	evacuation system, Air ventury suction, X-		
	ray viewer, Airrotor, Micromotor with straight		
	and contrangle Handpiece, 3 way syringe,		
	instrument tray Dental Operator's stool and		
	height adjustment and suction,		

Department: PROSTHODONTICS AND CROWN & BRIDGE

NAME	AME SPECIFICATION		TITY
		50	100
		Admns.	Admns.
Dental Chairs and Units	Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, high power evacuation system, Air ventury suction, X-ray viewer, Airrotor, Micromotor with straight and contrangle Handpiece, 3 way syringe, ultrasonic sealer with 3 tips, Light cure unit, instrument tray and suction, Dental operator stool with height adjustment Electrically operated, Spittoon attachment, Halogen Light with 2 intensity, Air ventury suction, instrument tray, Dental operator stool with height adjustment	17	34
Semi adjustable articulator	With face bow	2	2
Extra oral/intra oral tracer		2	2
Dewaxing unit		1	2
Curing unit		1	2
Dental casting machine		1	1
Wax burnout furnace		1	1
Pre heating furnace		1	1
Surveying unit		1	2
Heavy duty hand piece	Lab micromotors	3	4

Autoclave	Having wet and dry cycle, which can achieve 135°C with minimum capacity of 20 liters	1	2
Needle burner with syringe cutter	100 C with minimum capacity of 20 liters	1	2
Plaster Dispenser	One each for plaster and stone plaster	2	2
Model Trimmer with	,	1	1
Carborandum Disc			
Model Trimmer with Diamond		1	2
Disc			
Acrylizer		2	3
Lathe		1	2
Flask press		4	4
Deflasking unit		4	4
Dewaxing unit		2	3
Hydraulic Press		2	3
Mechanical Press		1	2
Vacuum mixing machine		1	1
Lab Micro motor	With heavy duty handpiece	3	4
Curing pressure pot		1	1
Porcelain furnace		1	2
Vibrator		1	2
Sand blasting unit		2	2
Ultrasonic cleaner		1	2
Model Trimmer		2	4
Hot water sterilizer		1	2
Geyser	Compound bath	1	2
H.P. grinder with suction		2	3
Heavy duty lathe		2	2
Phantom heads		50	50
Pre-clinical working tables	Gas connection & bunson burner	50	100

CERAMIC AND CAST PARTIAL LABORATORY

NAME	SPECIFICATIONS	50 ADMN	100 ADMN
Plaster Dispensor	One each for plaster and stone plaster	2	2
Duplicator	•	1	1
Pindex System		1	1
Circular saw		1	1
Burn out furnace		1	1
Sandblasting machine	With two containers	1	1
Electro-polisher		1	1
Model Trimmer with Carborandum disc		1	1
Model Trimmer with Diamond disc		1	1
Induction casting machine		1	1
Programmable porcelain furnace with vacuum pump with instrument kit and material kit		1	1
Spot welder with soldering, attachment of cable		1	1
Vacuum mixing machine		1	1
Steam Cleaner		1	1
Spindle Grinder 24,000 RPM with vacuum suction		1	1
Wax heater		1	1
Wax carver		1	1
Curing pressure pot		1	1
Milling machine		1	1
Heavy duty lathe with suction		1	1
Preheating furnace		1	1
Palatal trimmer		1	1
Ultrasonic cleaner	5 liters capacity	1	1
Composite curing unit		1	1
Micro surveyor		1	1
PRE-CLINICAL PROSTHETICS LABORATORY	Work table preferably complete stainless steel fitted with light, Bunsen burner, air	30	60

	blower, working stool. Adequate number of lab micro motor with attached hand piece	10	20
PLASTER ROOM FOR PRE- CLINICAL WORK			
Plaster dispenser	One each for plaster and stone plaster	2	2
Vibrator		2	2
Lathe		2	2
Model Trimmer		1	1
Carborandum Disc		1	1
Diamond disc		1	1

MINIMUM BASIC QUALIFICATION AND TEACHING EXPERIENCE REQUIRED FOR TEACHERS FOR UNDER-GRADUATE DENTAL STUDIES.

(A) Dental Staff

Principal/Dean: Same qualifications as prescribed for a Professor. Experience as

Professor for not less than 5 years in a Dental Institution.

Professors: A BDS Degree of an Indian University or an equivalent qualification

with Post-graduate qualification / Diplomate of National Board in the

subject and with 5 years teaching experience as Reader.

Readers: A BDS Degree of an Indian University or an equivalent qualification

with Post-graduate qualification /Diplomate of National Board in the subject and with 4 year's teaching experience after post-graduation.

Lecturers: A recognised MDS Degree of an Indian University/Diplomate of

National Board or an equivalent qualification.

Tutors A recognised BDS Degree of Indian University or an equivalent

qualification with at least one year experience.

Note:

In case of individuals with discrepancy between teaching experience and the post-graduate qualification, a reference may be made to the Dental Council of India through competent authority for consideration. This is not applicable for future entrants.

(B) Medical Staff The requirement of medical teaching staff is to be as

per DCI Regulations 2006

Qualification and Teaching Experience of the medical

teaching staff will be as per MCI Regulations.

MINIMUM STAFFING PATTERN FOR UNDER GRADUATE DENTAL STUDIES FOR 50 ADMISSIONS (As per DCI Regulations 2006)

Principal/Dean: - 1 (One post of Professor can be deleted in the under mentioned tabulation according to the subject of specialisation)
Each Dental Department should be headed by a Professor.

		I Year			II Year	•		III Yea	r	Total Posts in position from				
										the beg	ginning o	of 3 rd year		
								rof. Reader Lecturer/			onwards			
	Prof.	Reader	Lecturer/	Prof.	Reader	Lecturer/	Prof. Reader		Lecturer/	Prof.	Reader	Lecturer/		
			Tutor			Tutor			Tutor			Tutor		
	2*	2	10	3*	4	20	6*	11	30	6	11	30#		
Prosthodontics and Crown & Bridge	1	1	-	1	2	-	1	2	-	1	2	-		
Oral Pathology and Oal Microbiology	-	-	-		1	-	1	1	-	1	1	-		
Conservative Dentistry and Endodontics	-	1	-	1	1	_	1	2	-	1	2	_		
Oral & Maxillofacial Surgery	-	-	-	-	-	-	1	1	-	1	1	_		
Periodontology	-	-	-	-	-	-	1	1	-	1	1	-		
Orthodontics	-	-	-	-	-	-	1	1	-	1	1	-		
Paediatric & Preventive Dentistry	-	-	-	-	-	-	-	1	-	_	1	-		
Oral Medicine & Radiology	-	-	-	-	-	-	-	1	-	-	1	-		
Public Health Dentistry	-	-	-	-	-	-	-	1	-	_	1	-		
Dental Materials	-	-	-	-	-	-	_	-	-	_	-	-		
Dental Anatomy, Embryology & Oral	-	-	-	-	-	-	_	-	-	-	-	-		
Histology														

^{*} Includes the Principal who can head any one of the six specialities.

MINIMUM STAFFING PATTERN FOR UNDER GRADUATE DENTAL STUDIES FOR 100 ADMISSIONS (As per DCI Regulations 2006)

Each Dental Department should be headed by a Professor

		I Year			II Year	r		III Yeaı	r	Total Posts in position from the beginning of 3 rd year onwards		
	Prof.	Reader	Lecturer/	Prof.	Reader	Lecturer/	Prof.	Reader	Lecturer/	Prof.	Reader	Lecturer/
			Tutor			Tutor			Tutor			Tutor
	2*	3	16	4*	5	30	6*	13	40	6*	13	40#
Prosthodontics and Crown & Bridge	1	2	-	1	2	-	1	2	-	1	2	-
Oral Pathology and Oral Microbiology	-	-	-	1	1	-	1	1	-	1	1	-
Conservative Dentistry and Endodontics	-	1	-	1	2	-	1	2	-	1	2	-
Oral & Maxillofacial Surgery	-	_	_	-	-	_	1	2	_	1	2	-

^{# 25%} MDS and 75% BDS.

Periodontology	-	-	-	-	-	-	1	2	-	1	2	-
Orthodontics	-	-	-	-	-	-	1	1	-	1	1	-
Paediatric & Preventive Dentistry	-	-	-	-	-	-	-	1	-	-	1	-
Oral Medicine & Radiology	-	-	-	-	-	-	-	1	-	-	1	-
Public Health Dentistry	-	-	-	-	-	-	-	1	-	-	1	-
Dental Materials	-	-	-	-	-	-	-	-	-	-	-	-
Dental Anatomy, Embryology & Oral	-	-	-	-	-	-	-	-	-	-	-	-
Histology												

^{*} Includes the Principal who can head any one of the six specialities.

Medical Teaching Staff in a Dental College (As per DCI Regulations 2006)

Year	Subjects			Intake and l	Designation						
			50 Admissions		100 Admissions						
	Anatomy Physiology Biochemistry Pharmacology General Pathology Microbiology General Medicine General Surgery	Prof	Reader	Lecturer	Prof	Reader	Lecturer				
I	Anatomy	-	1	2	-	1	4				
I	Physiology	-	1	2	-	1	2				
I	Biochemistry	-	1	2	-	1	2				
II	Pharmacology	-	1	2	-	1	3				
II		-	1	2	-	1	2				
II	Microbiology	-	1	2	-	1	2				
III	General Medicine	-	1	2	-	1	3				
III	General Surgery	-	1	2	-	1	3				
III	Anaesthesia	-	1	1	-	1	1				

^{# 25%} MDS and 75% BDS.

OTHER STAFF PATTERN FOR 50 ADMISSIONS

Administrative Officer 1
Secretary to Dean 1
Public Relation officer 1

Designation	Receptionis t	Establishm ent	Accounts	Admissions	Exams	Stores	Library	Maintenanc e	Security	Illustration	Clinical Depts.	Computer	Laboratorie s	Sports	Total
Managers/ Office Suptd.		1	1						1			1			4
Assistants		1	1	1	1	1	2	1							8
Receptionist	8														8
Librarian							1								1
D.S.A.(Chair side											10				10
Attendant)											10				10
Dent. Tech.											6				6
(Dental Mechanic)															
Dent. Hygst.											3				3
Radiographer											2				2
Photographer										1					1
Artist										1					1
Programmer												1			1
Data Entry Operators												1			1
Physical Director														1	1
Engineer								1							1
Electricians								2							2
Plumber								1							1
Carpenter								1							1
Mason								1							1
A.C. Tech.								1							1
Helpers Electrical								1							1
Sweepers & Scavengers							2	2			3		3		10
Attenders	2	1	1		1	1	1	2			4	1	4		18
Security Personal									5						5
Dept. Secretaries											4				4
Driver									4						4
Nurses											3				3
Lab. Technicians													3		3

Note:

The above staff pattern indicates minimum requirements for the stipulated admissions. However, the actual staff requirements may marginally vary depending upon the patients' flow, work culture and design of the building.

OTHER STAFF PATTERN FOR 100 ADMISSIONS

Administrative Officer 1
Secretary to Dean 1
Public Relation officer 1

Designation	Receptionis t	Establishme nt	Accounts	Admissions	Exams	Stores	Library	Maintenanc e	Security	Illustration	Clinical Depts.	Computer	Laboratories	Sports	Total
Managers / Office Supdt.	1	1	1		1	1			1			1			7
Assistants		2	2	2	1	1	4	1							13
Receptionist	14														14
Librarian							1								1
D.S.A.(Chair side Attendant)											20				20
Dent. Tech.(Dental											10				10

Mechanic)														
Dent. Hygst.										5				5
Radiographer										3				3
Photographer									1					1
Artist									1					1
Programmer											1			1
Data Entry Operators											2			2
Physical Director													1	1
Engineer							1							1
Electricians							4							4
Plumber							2							2
Carpenter							1							1
Mason							1							1
A.C. Tech.							1							1
Helpers Electrical							3							3
Sweepers & Scavangers						2	4			5		6		17
Attenders	3	1	1	1	2	2	3			5	1	6		25
Security Personal								6						6
Dept. Secretaries										8				8
Driver								5						5
Nurses										9				9
Lab. Technicians												5		5

Note:

The above staff pattern indicates minimum requirements for the stipulated admissions. However, the actual staff requirements may marginally vary depending upon the patients' flow, work culture and design of the building.

SYLLABUS OF STUDY

HUMAN ANATOMY, EMBRYOLOGY, HISTOLOGY & MEDICAL GENETICS 1.

A) GOAL

The students should gain the knowledge and insight into, the functional anatomy of the normal human head and neck, functional histology and an appreciation of the genetic basis of inheritance and disease, and the embryological development of clinically important structures. So that relevant anatomical & scientific foundations are laid down for the clinical years of the BDS course.

B) OBJECTIVES:

a) KNOWLEDGE & UNDERSTANDING:

At the end of the 1st year BDS course in Anatomical Sciences the undergraduate student is Expected to:

- 1. Know the normal disposition of the structures in the body while clinically examining a patient and while conducting clinical procedures.
- Know the anatomical basis of disease and injury.
- 3. Know the microscopic structure of the various tissues, a pre-requisite for understanding of the disease processes.
- 4. Know the nervous system to locate the site of lesions according to the sensory and or motor deficits encountered.
- 5. Have an idea about the basis of abnormal development, critical stages of development, effects of teratogens, genetic mutations and environmental hazards.
- 6. Know the sectional anatomy of head neck and brain to read the features in radiographs and pictures taken by modern imaging techniques.
- 7. Know the anatomy of cardio-pulmonary resuscitation.

b) SKILLS

- To locate various structures of the body and to mark the topography of the living anatomy.
 To identify various tissues under microscope.
- 3. To identify the features in radiographs and modern imaging techniques.
- 4. To detect various congenital abnormalities.

By emphasising on the relevant information and avoiding unwanted details, the anatomy taught integrally with other basic sciences & clinical subjects not only keeps the curiosity alive in the learner but also lays down the scientific foundation for making a better doctor, a benefit to the society.

This insight is gained in a variety of ways:

- 1) Lectures & small group teaching
- 2) Demonstrations
- 3) Dissection of the human cadaver
- 4) Study of dissected specimens

- 5) Osteology
- 6) Surface anatomy on living individual
- 7) Study of radiographs & other modern imaging techniques.
- 8) Study of Histology slides.
- 9) Study of embryology models
- 10) Audio-visual aids

Throughout the course, particular emphasis is placed on the functional correlation, clinical application & on integration with teaching in other bio dental disciplines.

D) AN OUTLINE OF THE COURSE CONTENT:

- 1. General anatomy: Introduction of anatomical terms and brief outline of various systems of the body.
- 2. Regional anatomy of head & neck with osteology of bones of head & neck, with emphasis on topics of dental importance.
- 3. General disposition of thoracic, abdominal & pelvic organs.4. The regional anatomy of the sites of intramuscular & intra vascular injections, & lumbar
- 5. General embryology & systemic embryology with respect to development of head & neck.
- 6. Histology of basic tissues and of the organs of gastroinstenstinal, respiratory, Endocrine, excretory systems & gonads.
- 7. Medical genetics.

E) FURTHER DETAILS OF THE COURSE.

I. INTRODUCTION TO:

- 1. Anatomical terms.
- 2. Skin, superficial fascia & deep fascia
- 3. Cardiovascular system, portal system collateral circulation and arteries.
- 4. Lymphatic system, regional lymph nodes
- 5. Osteology Including ossification & growth of bones
- 6. Myology Including types of muscle tissue & innervation.
- 7. Syndesmology Including classification of Joints.
- 8. Nervous system

II. HEAD & NECK:

01. Scalp, face & temple, lacrimal apparatus 02. Neck - Deep fascia of neck, posterior triangle, suboccipital triangle, anterior triangle, anterior median region of the neck, deep structures in the neck. 03. Cranial cavity - Meninges, parts of brain, ventricles of brain, dural venous sinuses, cranial nerves attached to the brain, pituitary gland. 04. Cranial nerves - III, IV, V, VI, VII, IX,XII in detail. 05. Orbital cavity - Muscles of the eye ball, supports of the eye ball, nerves and vessels in the orbit. 06. Parotid gland. 07. Temporo mandibular joint, muscles of mastication, infratemporal fossa, pterygo - palatine fossa. 08. Submandibular region 09. Walls of the nasal cavity, paranasal air sinuses 10. Palate 11. Oral cavity, Tongue 12. Pharynx (palatine tonsil and the auditory tube) Larynx. OSTEOLOGY - Foetal skull, adult skull, individual bones of the skull, hyoid bone and cervical vertebrae

III.THORAX: Demonstration on a dissected specimen of

- 1. Thoracic wall
- 2. Heart chambers
- 3. Coronary arteries
- 4. Pericardium
- 5. Lungs surfaces ; pleural cavity
- 6. Diaphragm

IV. ABDOMEN: Demonstration on a dissected specimen of

- 1. Peritoneal cavity
- 2. Organs in the abdominal & pelvic cavity.

V. CLINICAL PROCEDURES:

- a) Intramuscular injections: Demonstration on a dissected specimen and on a living person of the following sites of injection.
 - 1. Deltoid muscle and its relation to the axillary nerve and radial nerve.
 - 2. Gluteal region and the relation of the sciatic nerve.
 - 3. Vastus lateralis muscle.
- b) Intravenous injections & venesection: Demonstration of veins in the dissected specimen and on a living person.
- 1. Median cubital vein 2. Cephalic vein 3. Basilic vein 4. Long saphenous vein
- c) Arterial pulsations: Demonstration of arteries on a dissected specimen and feeling of pulsation of the following arteries on a living person.
- 1. Superficial temporal 2. Facial 3. Carotid 4. Axillary 5. Brachial 6. Radial 7. Ulnar 8. Femoral
- 9. Popliteal 10. Dorsalispedis

d) Lumbar puncture: Demonstration on a dissected specimen of the spinal cord, cauda equina & epidural space and the inter vertebral space between L4 & L5.

VI. EMBRYOLOGY:

Oogenesis, Spermatogenesis, Fertilisation, Placenta, Primitive streak, Neural crest, Bilaminar and trilaminar embryonic disc, Intra embryonic mesoderm - formation and fate, notochord formation & fate, Pharyngeal arches, pouches & clefts, Development of face, tongue, palate, thyroid gland, pituitary gland, salivary glands, and anomalies in their development, Tooth development in brief.

VII. HISTOLOGY:

The Cell:

Basic tissues - Epithelium, Connective tissue including cartilage and bone, Muscle Tissue, Nervous tissue : Peripheral nerve, optic nerve, sensory ganglion, motor ganglion, Skin Classification of Glands

Salivary glands (serous, mucous and mixed gland), Blood vessels, Lymphoid tissue Tooth, lip, tongue, hard palate, oesphagus, stomach, 'duodenum 'ileum, colon, vermiform appendix Liver, Pancreas, Lung, Trachea 'Epiglottis, Thyroid gland , para thyroid gland , supra renal gland and pituitary gland, Kidney, Ureter, Urninary bladder, Ovary and testis.

VIII. MEDICAL GENETICS:

Mitosis, meiosis, Chromosomes, gene structure, Mendelism, modes of inheritance

RECOMMENDED BOOKS:

- 1. SNELL (Richard S.) Clinical Anatomy for Medical Students, Ed. 5, Llittle Brown & company, Boston.
- 2. RJ LAST'S Anatomy McMinn, 9th edition.
- 3. ROMANES(G.J.) Cunningham Manual of Practical Anatomy : Head & Neck & Brain Ed.15.Vol.III, Oxford Medical publication.
- 4. WHEATER, BURKITT & DANIELS, Functional Histology, Ed. 2, Churchill Livingstone.
- 5. SADLER, LANGMAN'S, Medical Embryology, Ed. 6.
- 6. JAMES E ANDERSON, Grant's Atlas of Anatomy. Williams & Wilkins.
- 7. WILLIAMS, Gray's Anatomy, Ed.38. ,Churchill Livingstone.
- 8. EMERY, Medical Genetics.

2. HUMAN PHYSIOLOGY

A) GOAL

The broad goal of the teaching undergraduate students in Human Physiology aims at providing the student comprehensive knowledge of the normal functions of the organ systems of the body to facilitate an understanding of the physiological basis of health and disease.

OBJECTIVES

a) KNOWLEDGE

At the end of the course, the student will be able to:

- 1. Explain the normal functioning of all the organ systems and their interactions for well co-ordinated total body function.
- 2. Assess the relative contribution of each organ system towards the maintenance of the milieu interior.
- 3. List the physiological principles underlying the pathogenesis and treatment of disease.

b) SKILLS

At the end of the course, the student shall be able to:

- 1. Conduct experiments designed for the study of physiological phenomena.
- 2. Interprete experimental and investigative data
- 3. Distinguish between normal and abnormal data derived as a result of tests which he/she has performed and observed in the laboratory.

c) **INTEGRATION**

At the end of the integrated teaching the student shall acquire an integrated knowledge of organ structure and function and its regulatory mechanisms.

B) COURSE CONTENTS THEORY

1. GENERAL PHYSIOLOGY

- 1. Homeostasis: Basic concept, Feed back mechanisms
- 2. Structure of cell membrane, transport across cell membrane
- 3. Membrane potentials

2. BLOOD:

Composition & functions of blood.

Specific gravity, Packed cell volume, factors affecting & methods of determination.

Plasma proteins - Types, concentration, functions & variations.

Erythrocyte - Morphology, functions & variations. Erythropoiesis & factors affecting erythropoiesis.

ESR- Methods of estimation, factors affecting, variations & significance.

Haemoglobin - Normal concentration, method of determination & variation in concentration.

Blood Indices - MCV, MCH, MCHC - definition, normal values, variation.

Anaemia - Definition, classification, life span of RBC's destruction of RBC's , formation & fate of bile pigments, Jaundice - types.

<u>Leucocytes</u>: Classification, number, percentage, distribution morphology, properties, functions & variation. Role of lymphocytes in immunity, leucopoiesis life span & fate of leucocytes.

Thromobocytes - Morphology, , number, variations, function & thrombopoiesis.

Haemostatsis - Role of vasoconstriction, platelet plug formation in haemostasis, coagulation factors, intrinsic & extrinsic pathways of coagulation, clot retraction.

Tests of haemostatic function, platelet count, clotting time, bleeding time, prothrombin time - normal values, method & variations. Anticoagulants - mechanism of action. Bleeding disorders.

Blood groups: ABO & Rh system, method of determination, importance, indications & dangers of blood transfusion, blood substitutes.

Blood volume: Normal values, variations.

Body fluids : distribution of total body water, intracellular & extracellular compartments, major anions & cations in intra and extra cellular fluid.

Tissue fluids & lymph : Formation of tissue fluid, composition, circulation & functions of lymph. Oedema - causes.

Functions of reticulo endotrelial system.

3. MUSCLE AND NERVE

Classification of nerves, structure of skeletal muscle - Molecular mechanism of muscle contraction, neuromuscular transmission. Properties of skeletal muscle. Structure and properties of cardiac muscle & smooth muscle.

4. DIGESTIVE SYSTEM:

Introduction to digestion: General structure of G.I. tract, Innervation.

Salivary glands: Structure of salivary glands, composition, regulation of secretion & functions of saliva. Stomach: Composition and functions of gastric juice, mechanism and regulation of gastric secretion.

Exocrine Pancreas - Structure, composition of pancreatic juice, functions of each component, regulation of pancreatic secretion.

Liver: structure, composition of bile, functions of bile, regulation of secretion -

Gall bladder: structure, functions.

Small intestine - Composition, functions & regulation of secretion of intestinal juice.

Large intestine - Functions.

Motor functions of GIT: Mastication, deglutition, gastric filling & emptying, movements of small and large intestine, defecation.

5. EXCRETORY SYSTEM:

Structure & functions of kidney, functional unit of kidney & functions of different parts.

Juxta glomerular apparatus, renal blood flow.

Formation of Urine: Glomerular filteration rate - definition, determination, normal values, factors influencing G.F.R. Tubular reabsorption - Reabsorption of sodium, glucose, water & other substances. Tubular secretion - secretion of urea, hydrogen and other substances.

Mechanism of concentration & dilution of urine.

Role of kidney in the regulation of pH of the blood.

Micturition: anatomy & innervation of Urinary bladder, mechanism of miturition & abonrmalities.

6. BODY TEMPERATURE & FUNCTIONS OF SKIN

7. ENDOCRINOLOGY

General endocrinology - Enumeration of endocrine glands & hormones - General functions of endocrine system, chemistry, mechanism of secretion, transport, metabolism, regulation of secretion of hormones. Hormones of anterior pituitary & their actions, hypothamic regulation of anterior pituitary function. Disorders of secretion of anterior pituitary hormones.

Posterior pituitary: Functions, regulation & disorders of secretion.

Thyroid: Histology, synthesis, secretion & transport of hormones, actions of hormones, regulation of secretion & disorders, Thyroid function tests.

Adrenal cortex & Medulla -synthesis, secretion, action, metabolism, regulation of secretion of hormones & disorders.

Other hormones - Angiotensin, A.N.F.

8. REPRODUCTION

Sex differentiation, Physiological anatomy of male and female sex organs,

Female reproductive system: Menstrual cycle, functions of ovary, actions of oestrogen & Progesterone, control of secretion of ovarian hormones, tests for ovulation, fertilisation, implantation, maternal changes during pregnancy, pregnancy tests & parturition.

Lactation, composition of milk, factors controlling lactation, milk ejection, reflex, Male reproductive system :spermatogenesis, semen and contraception.

9. CARDIO VASCULAR SYSTEM

Functional anatomy and innervation of heart Properties of cardiac muscle

Origin & propagation of cardiac impulse and heart block.

Electrocardiogram - Normal electrocardiogram. Two changes in ECG in myocardial infarction.

Cardiac cycle - Phases, Pressure changes in atria, ventricles & aorta.

Volume changes in ventricles. Jugular venous pulse, arterial pulse.

Heart sounds: Mention of murmurs.

Heart rate: Normal value, variation & regulation.

Cardiac output: Definition, normal values, one method of determination, variation, factors affecting heart rate and stroke volume.

Arterial blood pressure: Definition, normal values & variations, determinants, regulation & measurement of blood pressure.

Coronary circulation.

Cardio vascular homeostasis - Exercise & posture.

RESPIRATORY SYSTEM

Physiology of Respiration: External & internal respiration.

Functional anatomy of respiratory passage & lungs.

Respiratory movements: Muscles of respiration, Mechanism of inflation & deflation of lungs.

Intra pleural & intra pulmonary pressures & their changes during the phases of respiration.

Mechanics of breathing - surfactant, compliance & work of breathing.

Spirometry: Lung volumes & capacities definition, normal values, significance, factors affecting vital capacity, variations in vital capacity, FEV & its variations.

Pulmonary ventilation - alveolar ventilation & dead space - ventilation.

Composition of inspired air, alveolar air and expired air.

Exchange of gases: Diffusing capacity, factors affecting it.

Transport of Oxygen & carbon dioxide in the blood.

Regulation of respiration - neural & chemical.

Hypoxia, cyanosis, dyspnoea, periodic breathing.

Artificial respiration, pulmonary function tests.

11. CENTRAL NERVOUS SYSTEM

- 1. Organisation of central nervous system
- 2. Neuronal organisation at spinal cord level
- 3. Synapse receptors, reflexes, sensations and tracts
- 4. Physiology of pain
- 5. Functions of cerebellum, thalamus, hypothalamus and cerebral cortex.
- 6. Formation and functions of CSF
- 7. Autonomic nervous system

12. SPECIAL SENSES

Fundamental knowledge of vision, hearing, taste and smell.

The following list of practical is minimum and essential. All the practical have been categorised as procedures and demonstrations. The procedures are to be performed by the students during practical classes to acquire skills. All the procedures are to be included in the University practical examination. Those categorised as demonstrations are to be shown to the students during practical classes. However these demonstrations would not be included in the University examinations but question based on this would be given in the form of charts, graphs and calculations for interpretation by the students.

PROCEDURES

- 1. Enumeration of Red Blood Cells
- 2. Enumeration of White Blood Cells
- 3. Differential leucocyte counts
- 4. Determination of Haemoglobin5. Determination of blood group
- 6. Determination of bleeding time and clotting time
- 7. Examination of pulse
- 8. Recording of blood pressure.

DEMONSTRATION:

- 1. Determination of packed cell volume and erythrocyte sedimentation rate
- 2. Determination of specific gravity of blood
- 3. Determination of erythrocyte fragility
- 4. Determination of vital capacity and timed vital capacity
- 5. Skeletal muscle experiments.

Study of laboratory appliances in experimental physiology. Frog's gastrocneminus sciatic preparation. Simple muscle curve, effects of two successive stimuli, effects of increasing strength of stimuli, effects of temperature, genesis of fatigue and tetanus. Effect of after load and free load on muscle contraction, calculation of work done.

- 6. Electrocardiography: Demonstration of recording of normal Electro cardiogram
- 7. Clinical examination of cardiovascular and respiratory system.

Guyton; Text book of Physiology, 9th edition.

Ganong; Review of Medical Physiology, 19th edition

Vander; Human physiology, 5th edition

Choudhari; Concise Medical Physiology, 2nd edition

Chaterjee; Human Physiology, 10th edition

A.K. Jain; Human Physiology for BDS students, 1st edition

BOOKS FOR REFERENCE:

- i) Berne & Levey; Physiology, 2nd edition
- ii) West-Best & Taylor's, Physiological basis of Medical Practise, 11th edition

EXPERIMENTAL PHYSIOLOGY:

- i) Rannade; Practical Physiology, 4th edition
- ii) Ghai; a text book of practical physiology
- iii) Hutchison's; Clinical Methods, 20th edition

BIOCHEMISTRY

AIMS AND SCOPE OF THE COURSE IN BIOCHEMISTRY

The major aim is to provide a sound but crisp knowledge on the biochemical basis of the life processes relevant to the human system and to dental/medical practice. The contents should be organised to build on the already existing information available to the students in the pre-university stage and reorienting. A mere rehash should be avoided.

The chemistry portion should strive towards providing information on the functional groups, hydrophobic and hydrophilic moieties and weak valence forces that organise macromolecules. Details on structure need not be emphasised.

Discussion on metabolic processes should put emphasis on the overall change, interdependence and molecular turnover. While details of the steps may be given, the student should not be expected to memorise them. An introduction to biochemical genetics and molecular biology is a must but details should be avoided. The exposure to antivitamins, antimetabolites and enzyme inhibitors at this stage, will provide a basis for the future study of medical subjects. An overview of metabolic regulation is to be taught by covering hormonal action, second messengers and regulation of enzyme activities. Medical aspects of biochemistry should avoid describing innumerable functional tests, most of which are not in vogue. Cataloguing genetic disorders under each head of metabolism is unnecessary. A few examples which correlate genotype change to functional changes should be adequate.

At the end of the course the student would be able to acquire a useful core of information, which can be retained for a long time. Typical acid tests can be used to determine what is to be taught or what is to be learnt. A few examples are given below.

- 1. Need not know the structure of cholesterol. Should know why it cannot be carried free in plasma.
- 2. Mutarotation should not be taught. Student should know why amylase will not hydrolyse cellulose.
- 3. Need not know the details of alpha helix and beta pleats in proteins. Should know why haemoglobin is globular and keratin is fibrous.
- 4. Need not know mechanism of oxidative phosphorylation. Should know more than 90 % of ATP is formed by this process.
- 5. Need not know details of the conversion of pepsinogen to pepsin.
 Should know hydrochloric acid cannot break a peptide bond at room temperature.
- 6. Need not remember the steps of glycogenesis.
 - Should know that excess intake of carbohydrate will not increase glycogen level in liver or muscle.
- 7. Need not know about urea or cretinine clearance tests.
 - Should know the basis of increase of urea and creatinine in blood in renal insufficiency.
- 8. Need not know the structure of insulin.
 - Should know why insulin level in circulation is normal in most cases of maturity onset diabetes.
- 9. Need not know the structural details of ATP.
 - Should know why about 10 g of ATP in the body at any given time meets all the energy needs.
- 10. Need not know the mechanism of action of prolylhydroxylase.
 - Should know why the gum bleeds in scurvy.
- 11. Need not know the structure of Vitamin K.
 - Should know the basis of internal bleeding arising due to its deficiency.
- 12. Need not remember the structure of HMGCoA.
 - Should know why it does not lead to increased cholesterol synthesis in starvation.

BIOCHEMISTRY AND NUTRITION

1. CHEMISTRY OF BIOORGANIC MOLECULES

Carbohydrates: Definition, biological importance and classification. Monosaccharides - Isomerism, anomerism. Sugar derivatives, Disaccharides. Polysaccharides. Structures of starch and glycogen. Lipids: Definition, biological importance and classification. Fats and fatty acids. Introduction to compound lipids. Hydrophobic and hydrophilic groups. Cholesterol. Bile salts. Micelle. Bimolecular leaflet.

Proteins: Biological importance. Aminoacids: Classification. Introduction to peptides. Proteins: Simple and conjugated; globular and fibrous. Charge properties. Buffer action. Introduction to protein conformation.

Nucleic acids: Building units . Nucleotides. Outline structure of DNA and RNA.

High energy compounds: ATP, Phosphorylamidines, Thiolesters, Enol phosphates.

2. MACRONUTERIENTS AND DIGESTION

Energy needs: Basal metabolic rate. Dietary carbohydrates, fibres. Dietary lipids, essential fatty acids. Nitrogen balance. Essential amino acids. Protein quality and requirement (methods for evaluation of protein quality to be excluded). Protein calorie malnutrition. Balanced diet.

Enzymatic hydrolysis of dietary carbohydrates. Mechanism of uptake of monosaccharides. Digestion and absorption of triacylglycerols. Enzymatic hydrolysis of dietary proteins and uptake of amino acids.

3. MICRONUTRIENTS

Vitamins: Definition, classification, daily requirement, sources and deficiency symptoms. Brief account of water-soluble vitamins with biochemical functions. Vitamins A functions including visual process. Vitamin D and its role in calcium metabolism. Vitamin E. Vitamin K and gamma carboxylation. Introduction to antivitamins and hypervitaminosis.

Minerals :Classification, daily requirement. Calcium and phosphate: sources, uptake, excretion, function. Serum calcium regulation. Iron: sources, uptake and transport.

Heme and nonheme iron functions; deficiency. Iodine: Brief introduction to thyroxine synthesis. General functions of thyroxine. Fluoride: function, deficiency and excess. Indications of role of other minerals.

4. ENERGY METABOLISM

Overview: Outlines of glycolysis, pyruvate oxidation and citric acid cycle. Beta oxidation of fatty acids. Electron transport chain and oxidative phosphyorylation. Ketone body formation and utilisation. Introduction to glycogenesis, glycogenolysis, fatty acid synthesis, lipogenesis and lipolysis. Gluconeogenesis. Lactate metabolism . Protein utilisation for energy. Glucogenic and ketogenic amino acids. Integration of metabolism.

5. SPECIAL ASPECTS OF METABOLISM

Importance of pentose phosphate pathway. Formation of glucuronic acid. Outlines of cholesterol synthesis and breakdown. Ammonia metabolism. Urea formation. Phosphocreatine formation. Transmethylation. Amines. Introduction to other functions of amino acids including one carbon transfer. Detoxication: Typical reactions. Examples of toxic compounds. Oxygen toxicity

6. BIOCHEMICAL GENETICS AND PROTEIN SYNTHESIS

Introduction to nucleotides; formation and degradation. DNA as genetic material. Introduction to replication and transcription. Forms and functions of RNA. Genetic code and mutation. Outline of translation process. Antimetabolites and antibiotics interfering in replication, transcription and translation. Introduction to cancer, viruses and oncogenes.

7. ENZYME AND METABOLIC REGULATION

Enzymes: Definition, classification, specificity and active site. Cofactors. Effect of pH, temperature and substrate concentration. Introduction to enzyme inhibitors, proenzymes and isoenzymes. Introduction to allosteric regulation, covalent modification and regulation by induction/repression.

Overview of hormones. Introduction to second messengers, cyclic AMP, calcium ion, inositol triphosphate. Mechanism of action of steroid hormones, epinephrine, glucagon and insulin in brief. Acid base regulation. Electrolyte balance.

8. STRUCTURAL COMPONENTS AND BLOOD PROTEINS

Connective tissue: Collagen and elastin. Glycosaminoglycans. Bone structure. Structure of membranes. Membrane associated processes in brief. Exocytosis and endocytosis. Introduction to cytoskeleton. Myofibril and muscle contraction in brief.

Haemoglobin: functions. Introduction to heme synthesis and degradation. Plasma proteins: classification and separation. Functions of albumin. A brief account of immunoglobulins. Plasma lipoproteins: Formation, function and turnover.

9. MEDICAL BIOCHEMISTRY

Regulation of blood glucose. Diabetes mellitus and related disorders. Evaluation of glycemic status. Hyperthyroidism and hypothyroidism: Biochemical evaluation. Hyperlipoproteinemias and atherosclerosis, Approaches to treatment. Jaundice: Classification and evaluation. Liver function tests: Plasma protein pattern, serum enzymes levels. Brief introduction to kidney function tests and gastric function tests. Acid base imbalance. Electrolyte imbalance: evaluation. Gout. Examples of genetic disorders including lysosomal storage disorders, glycogen storage disorders, glucose 6- phosphate dehydrogenase deficiency, hemoglobinopathies, inborn errors of amino acid metabolism and muscular dystrophy (one or two examples with biochemical basis will be adequate). Serum enzymes in diagnosis.

PRACTICALS: Contact hours 50

- 1. Qualitative analysis of carbohydrates
- 2. Color reactions of proteins and amino acids
- 4

3.	Identification of nonprotein nitrogen substance	4
4.	Normal constituents of urine	4
5.	Abnormal constituents of urine	4
6.	Analysis of saliva including amylase	2
7.	Analysis of milk Quantitative estimations	2
8.	Titrable acidity and ammonia in urine	2
9.	Free and total acidity in gastric juice	2
10.	Blood glucose estimation	2
11.	Serum total protein estimation	2
12.	Urine creatinine estimation Demonstration	2
13.	Paper electrophoresis charts/clinical data evaluation	2
14.	Glucose tolerance test profiles	2
15.	Serum lipid profiles	1
16.	Profiles of hypothyrodisim and hyperthyrodisim	1
17.	Profiles of hyper and hypoparathyrodism	1
18.	Profiles of liver function	1
19.	Urea, uric acid creatinine profile in kidney disorders	1
20.	Blood gas profile in acidosis/ alkalosis	1

RECOMMEDED BOOKS:

- 1. Concise text book of Biochemistry (3rd edition) 2001, T.N. Pattabiraman
- 2. Nutritional Biochemistry 1995, S. Ramakrishnan and S.V. Rao
- 3. lecture notes in Biochemistry 1984, J.K. Kandlish

Reference books

- 1. Text book of Biochemistry with clinical correlations 1997, T.N. Devlin
- 2. Harper's Biochemistry, 1996., R.K. Murray et.al
- 3. Basic and applied Dental Biochemistry, 1979, R.A.D. Williams & J.C.Elliot

3. DENTAL ANATOMY, EMBRYOLOGY AND ORAL HISTOLOGY

INTRODUCTION

Dental Anatomy including Embryology and Oral Histology – a composite of basic Dental Sciences & their clinical applications.

SKILLS

The student should acquire basic skills in:

- 1. Carving of crowns of permanent teeth in wax.
- 2. Microscopic study of Oral tissues.
- 3. Identification of Deciduous & Permanent teeth.
- 4. Age estimation by patterns of teeth eruption from plaster casts of different age groups.

OBJECTIVES

After a course on Dental Anatomy including Embryology and Oral Histology,

- 1. The student is expected to appreciate the normal development, morphology, structure & functions of oral tissues & variations in different pathological/non-pathological states.
- 2. The student should understand the histological basis of various dental treatment procedures and physiologic ageing process in the dental tissues.
- 3. The students must know the basic knowledge of various research methodologies.

I. TOOTH MORPHOLOGY

- 1. Introduction to tooth morphology:
- ♦ Human dentition, types of teeth, & functions, Palmer's & Binomial notation systems, tooth surfaces, their junctions line angles & point angles, definition of terms used in dental morphology, geometric concepts in tooth morphology, contact areas & embrasures Clinical significance.
- 2. Morphology of permanent teeth:
- Description of individual teeth, along with their endodontic anatomy & including a note on their chronology of development, differences between similar class of teeth & identification of individual teeth
- Variations & Anomalies commonly seen in individual teeth.
- 3. Morphology of Deciduous teeth:
- Generalized differences between Deciduous & Permanent teeth.
- Description of individual deciduous teeth, including their chronology of development, endodontic anatomy, differences between similar class of teeth & identification of individual teeth.
- 4. Occlusion:
- ♦ Definition, factors influencing occlusion basal bone, arch, individual teeth, external & internal forces & sequence of eruption.
- Inclination of individual teeth compensatory curves.
- Centric relation & Centric occlusion protrusive, retrusive & lateral occlusion.
- Clinical significance of normal occlusion.
- ♦ Introduction to & Classification of Malocclusion.

II. ORAL EMBRYOLOGY

- 1. Brief review of development of face, jaws, lip, palate & tongue, with applied aspects.
- 2. Development of teeth:
- Epithelial mesenchymal interaction, detailed study of different stages of development of crown, root & supporting tissues of tooth & detailed study of formation of calcified tissues.
- Applied aspects of disorders in development of teeth.
- 3. Eruption of deciduous & Permanent teeth:
- Mechanisms in tooth eruption, different theories & histology of eruption, formation of dentogingival junction, role of gubernacular cord in eruption of permanent teeth.
- Clinical or Applied aspects of disorders of eruption.
- 4. Shedding of teeth:
- Factors & mechanisms of shedding of deciduous teeth.
- Complications of shedding.

III. ORAL HISTOLOGY

- 1. Detailed microscopic study of Enamel, Dentine, Cementum & Pulp tissue. Age changes & Applied aspects (Clinical and forensic significance) of histological considerations Fluoride applications, transparent dentine, dentine hypersensitivity, reaction of pulp tissue to varying insults to exposed dentine; Pulp calcifications & Hypercementosis.
- 2. Detailed microscopic study of Periodontal ligament & alveolar bone, age changes, histological changes in periodontal ligament & bone in normal & orthodontic tooth movement, applied aspects of alveolar bone resorption.
- 3. Detailed microscopic study of Oral Mucosa, variation in structure in relation to functional requirements, mechanisms of keratinization, clinical parts of gingiva, Dentogingival & Mucocutaneous junctions & lingual papillae. Age changes & clinical considerations.
- 4. Salivary Glands:
- ♦ Detailed microscopic study of acini & ductal system.
- ♦ Age changes& clinical considerations.
- 5. TM Joint:
- Review of basic anatomical aspects & microscopiuc study & clinical considerations.
- 6. Maxillary Sinus:
- Microscopic study, anatomical variations, functions & clinical relevance of maxillary sinus in dental practice.
- 7. Processing of Hard & soft tissues for microscopic study:
- Ground sections, decalcified sections & routine staining procedures.
- 8. Basic histochemical staining patterns of oral tissues.

IV. ORAL PHYSIOLOGY

- 1. Saliva:
- Composition of saliva variations, formation of saliva & mechanisms of secretion, salivary reflexes, brief review of secretomotor pathway, functions, role of saliva in dental caries & applied aspects of hyper & hypo salivation.
- 2. Mastication:
- ♦ Masticatory force & its measurement need for mastication, peculiarities of masticatory muscles, masticatory cycle, masticatory reflexes & neural control of mastication.
- 3. Deglutition:
- Review of the steps in deglutition, swallowing in infants, neural control of deglutition & dysphagia.
- 4. Calcium, Phosphorous & fluoride metabolism:
- ♦ Source, requirements, absorption, distribution, functions & excretion, clinical considerations, hypo & hypercalcemia & hyper & hypo phosphatemia & fluorosis.
- 5. Theories of Mineralization:
- Definition, mechanisms, theories & their drawbacks.
- Applied aspects of physiology of mineralization, pathological considerations calculus formation.
- 6. Physiology of Taste:
- Innervation of taste buds & taste pathway, physiologic basis of taste sensation, age changes & applied aspects taste disorders.
- 7. Physiology of Speech:
- Review of basic anatomy of larynx & vocal cords.
- ♦ Voice production, resonators, production of vowels & different consonants Role of palate, teeth & tongue.
- Effects of dental prosthesis & appliances on speech & basic speech disorders.

RECOMMENDED TEXT BOOKS

- 1. Orban's Oral Histology & Embryology S.N.Bhaskar
- 2. Oral Development & Histology James & Avery
- 3. Wheeler's Dental Anatomy, Physiology & Occlusion Major.M.Ash
- 4. Dental Anatomy its relevance to dentistry Woelfel & Scheid
- 5. Applied Physiology of the mouth Lavelle
- 6. Physiology & Biochemistry of the mouth Jenkins

4. GENERAL PATHOLOGY

AIM:

At the end of the course the student should be competent to:

Apply the scientific study of disease processes, which result in morphological and functional alterations in cells, tissues and organs to the study of pathology and the practice of dentistry.

OBJECTIVES:

Enabling the student

- 1. To demonstrate and apply basic facts, concepts and theories in the field of Pathology.
- 2. To recognize and analyze pathological changes at macroscopically and microscopical levels and explain their observations in terms of disease processes.
- 3. To Integrate knowledge from the basic sciences, clinical medicine and dentistry in the study of Pathology.
- 4. To demonstrate understanding of the capabilities and limitations of morphological Pathology in its contribution to medicine, dentistry and biological research.
- 5. To demonstrate ability to consult resource materials outside lectures, laboratory and tutorial classes.

COURSE CONTENT

A. General Pathology -

1. Introduction to Pathology

Terminologies

The cell in health

The normal cell structure

The cellular functions

2. Etiology and Pathogenesis of Disease

Cell Injury

Types - congenital

Acquired

Mainly Acquired causes of disease

(Hypoxic injury, chemical injury, physical injury, immunological injury)

3. Degenerations

Amyloidosis

Fatty change

Cloudy swelling

Hyaline change, mucoid degeneration

4. Cell death & Necrosis

Apoptasis

Def, causes, features and types of necrosis

Gangrene - Dry, wet, gas

Pathological Calcifications

(Dystrophic and metastatic)

- 5. Inflammation
 - Definition, causes types, and features
 - Acute inflammation
 - a. The vascular response
 - b. The cellular response
 - c. Chemical mediators
 - d. The inflammatory cells
 - e. Fate
 - Chronic inflammation

Granulomations inflammation

- 6. Healing
 - Regeneration
 - Repair
 - a. Mechanisms
 - b. Healing by primary intention
 - c. Healing by secondary intention
 - d. Fracture healing
 - e. Factors influencing healing process
 - f. Complications
- 7. Tuberculosis
 - Epidemiology
 - Pathogenesis (Formation of tubercle)
 - Pathological features of Primary and secondary TB
 - Complications and Fate
- 8. Syphilis
 - Epidemiology
 - Types and stages of syphilis

- Pathological features
- Diagnostic criterias
- Oral lesions
- 9. Typhoid
 - Epidemiology
 - Pathogenesis
 - Pathological features
 - Diagnostic criterias
- 10. Thrombosis
 - Definition, Pathophysiology
 - Formation, complications & Fate of a thrombus
- 11. Embolism
 - Definition
 - Types
 - Effects
- 12. Ischaemia and Infraction
 - Definition, etiology, types
 - Infraction of various organs
- 13. Derangements of body fluids
 - Oedema pathogenesis

Different types

- 14. Disorders of circulation
 - Hyperaemia
 - Shock
- 15. Nutritional Disorders
 - Common Vitamin Deficiencies
- 16. Immunological mechanisms in disease
 - Humoral & cellular immunity
 - Hypersensitivity & autommunity
- 17. AIDS and Hepatitis.
- 18. Hypertension
 - Definition, classification
 - Pathophysiology
 - Effects in various organs
- 19. Diabetes Mellitus
 - Def, Classification, Pathogenesis, Pathology in different organs
- 20. Adaptive disorders of growth
 - Atrophy & Hypertrophy, Hyperplasia, Metaplasia and Dysplasia
- 21. General Aspects of neoplesia
 - a. Definition, terminology, classification
 - b. Differences between benign and malignant neoplasms
 - c. The neoplastic cell
 - d. Metastasis
 - e. Etiology and pathogenesis of neoplasia, Carcinogenesis
 - f. Tumour biology
 - g. Oncogenes and anti-oncogenes
 - h. Diagnosis
 - i. Precancerous lesions
 - j. Common specific tumours, Sq papilloma & Ca, Basal cell Ca, Adenoma & Adenoca, Fibroma & Fibrosarcoma, Lipoma and liposarcoma
- B. Systemic Pathology -
- 22 Anaemias
 - Iron Deficiency anaemia, Megaloblastic anaemia
- 23.Leukaemias
 - Acute and chronic leukaemias, Diagnosis and clinical features
- 24. Diseases of Lymph nodes
 - Hodgkin's disease, Non Hodgkins lymphoma, Metastatic carcinoma
- 25. Diseases of oral cavity
 - Lichen planus, Stomatitis, Leukoplakia, Sq cell Ca, Dental caries, Dentigerious cyst, Ameloblastoma
- 26. Diseases of salivary glands
 - Normal structure, Sialadenitis, Tumours
- 27. Common diseases of Bones
 - Osteomyelitis, Metabolic bone diseases, Bone Tumours, Osteosarcoma, Osteocalstoma, Giant cell Tumour, Ewing's sarcoma, Fibrous dysplasia, Aneurysmal bone cyst
- 28. Diseases of Cardiovascular system
 - Cardiac failuare
 - Congenital heart disease ASD, VSD,PDA Fallot's Tetrology

- Infective Endocarditis
- Atherosclerosis
- Ischaemic heart Disease
- 29. Haemorrhagic Disorders

Coagulation cascade

Coagulation disorders

- Platelet funtion
- Platelet disorders

Practicals

- 1. Urine Abnormal constitutients
 - Sugar, albumin, ketone bodies
- 2. Urine Abnormal consittuents
 - Blood, bile salts, bile pigments
- 3. Haemoglobin (Hb) estimation
- 4. Total WBC count
- 5. Differential WBC Count
- 6. Packed cell volume(PCV,) rythrocyte sedimentation Rate (ESR)
- 7. Bleeding Time & clotting Time
- 8. Histopathology

Tissue Processing

Staining

- 9. Histopathology slides
 - Acute appendicitis, Granulation tissue, fatty liver
- 10. Histopathology slides

CVC lung, CVC liver, Kidney amyloidosis

11. Histopathology slides

Tuberculosis, Actionomycosis, Rhinosporidiosis

12. Histopathology slides

Papilloma, Basal cell Ca, Sq cell Ca

13. Histopathology slides

Osteosarcoma, osteoclastoma, fibrosarcoma

14. Histopathology slides

Malignant melanoma, Ameloblastoma, Adenoma

15. Histopathology slides

Mixed parotid tumour, metastatic

carcinoma in lymph node

List of Textbooks

- 1. Robbins Pathologic Basis of Disease Cotran, Kumar, Robbins
- 2. Anderson's Pathology Vol 1 & 2 Editors Ivan Damjanov & James Linder
- 3. Wintrobe's clinical Haematolog Lee, Bithell, Foerster, Athens, Lukens

MICROBIOLOGY

AIM:

To introduce the students to the exciting world of microbes. To make the students aware of various branches of microbiology, importance, significance and contribution of each branch to mankind and other fields of medicine. The objectives of teaching microbiology can be achieved by various teaching techniques such as:

- a) Lectures
- b) Lecture Demonstrations
- c) Practical exercises
- d) Audio visual aids
- e) Small group discussions with regular feed back from the students.

OBJECTIVES:

A. KNOWLEDGE AND UNDERSTANDING

At the end of the Microbiology course the student is expected to :

- 1. Understand the basics of various branches of microbiology and able to apply the knowledge relevantly.
- 2. Apply the knowledge gained in related medical subjects like General Medicine and General Surgery and Dental subjects like Oral Pathology, Community Dentistry, Periodontics, Oral Surgery, Pedodontics, Conservative Dentistry and Oral medicine in higher classes.
- 3. Understand and practice various methods of Sterilisation and disinfection in dental clinics.
- 4. Have a sound understanding of various infectious diseases and lesions in the oral cavity.

A. SKILLS

- 1. Student should have acquired the skill to diagnose, differentiate various oral lesions.
- 2. Should be able to select, collect and transport clinical specimens to the laboratory.
- 3. Should be able to carry out proper aseptic procedures in the dental clinic.

A brief syllabus of Microbiology is given as follows:

A. GENERAL MICROBIOLOGY:

- 1. History, Introduction, Scope, Aims and Objectives.
- 2. Morphology and Physiology of bacteria.
- 3. Detail account of Sterlisation and Disinfection.
- 4. Brief account of Culture media and Culture techniques.
- 5. Basic knowledge of selection, collection, transport, processing of clinical Specimens and identification of bacteria.
- 6. Bacterial Genetics and Drug Resistance in bacteria.

B. IMMUNOLOGY:

- 1. Infection Definition, Classification, Source, Mode of transmission and types of Infectious disease.
- 2. Immunity
- 3. Structure and functions of Immune system
- 4. The Complement System
- 5. Antigen
- 6. Immunoglobulins Antibodies General structure and the role played in defense mechanism of the body.
- 7. Immune response
- 8. Antigen Antibody reactions with reference to clinical utility.
- 9. Immuno deficiency disorders a brief knowledge of various types of immuno deficiency disorders A sound knowledge of immuno deficiency disorders relevant to dentistry.
- 10. Hypersensitivity reactions
- 11. Autoimmune disorders Basic knowledge of various types sound knowledge of autoimmune disorders of oral cavity and related structures.
- 12. Immunology of Transplantation and Malignancy
- 13. Immunehaematology

C. SYSTEMATIC BACTERIOLOGY:

- Pyogenic cocci Staphylococcus, Streptococcus, Pneumococcus, Gonococcus,
 Meningococcus brief account of each coccus detailed account of mode of spread, laboratory diagnosis, Chemo therapy and prevention Detailed account of Cariogenic Streptococci.
- 2. Corynebacterium diphtheriae mode of spread, important clinical feature, Laboratory diagnosis, Chemotherapy and Active immunisation.
- 3. Mycobacteria Tuberculosis and Leprosy
- 4. Clostridium Gas gangrene, food poisoning and tetanus.
- 5. Non-sporing Anaerobes in brief about classification and morphology, in detail about dental pathogens mechanism of disease production and prevention.
- Spirochaetes Treponema pallidum detailed account of Oral Lesions of syphilis, Borrelia vincentii.
- 7. Actinomycetes.

D. VIROLOGY:

- 1. Introduction
- 2. General properties, cultivation, host virus interaction with special reference to Interferon.
- 3. Brief account of Laboratory diagnosis, Chemotherapy and immuno prophylaxis in general.
- 4. A few viruses of relevance to dentistry.
- Herpes Virus
- Hepatitis B Virus brief about other types
- Human Immunodeficiency Virus (HIV)
- Mumps Virus
- Brief Measles and Rubella Virus
- 5. Bacteriophage structure and Significance

E. MYCOLOGY

- 1. Brief Introduction
- 2. Candidosis in detail
- 3. Briefly on oral lesions of systemic mycoses.

F. PARASITOLOGY:

- 1. Brief introduction protozoans and helminths
- 2. Brief knowledge about the mode of transmission and prevention of commonly seen parasitic infection in the region.

RECOMMENDED BOOKS FOR REGULAR READING:

- 1. Text book of Microbiology R.Ananthanarayan & C.K.Jayaram Paniker.
- 2. Medical Microbiology David Greenwood etal.

BOOKS FOR FURTHER READING/REFERENCE.

- i) Microbiology Prescott, etal.
- ii) Microbiology Bernard D. Davis, etal.
- iii) Clinical & Pathogenic Microbiology Barbara J Howard, etal.
- iv) Mechanisms of Microbial diseases Moselio Schaechter, etal.
- v) Immunology an Introduction Tizard
- vi) Immunology 3rd edition Evan Roitt, etal.

5. GENERAL AND DENTAL PHARMACOLOGY AND THERAPEUTICS

GOAL:

The broad goal of teaching under graduate students in pharmacology is to inculcate rational and scientific basis of therapeutics keeping in view of dental curriculum and Profession.

OBJECTIVES:

At the end of the course the student shall be able to:

- i) Describe the pharmacokinetics and pharmacodynamics of essential and commonly used drugs in general and in dentistry in particular.
- ii) List the indications, contraindications; interactions, and adverse reactions of commonly used drugs with reason.
- iii) Tailor the use of appropriate drugs in disease with consideration to its cost, efficacy, safety for individual and mass therapy needs.
- iv) Indicate special care in prescribing common and essential drugs in special medical situations such as pregnancy, lactation, old age, renal, hepatic damage and immuno compromised patients.
- v) Integrate the rational drug therapy in clinical pharmacology.
- vi) Indicate the principles underlying the concepts of "Essential drugs".

SKILLS:

At the end of the course the student shall be able to:

- 1) Prescribe drugs for common dental and medical ailments.
- 2) To appreciate adverse reactions and drug interactions of commonly used drugs.
- 3) Observe experiments designed for study of effects of drugs.
- 4) Critically evaluate drug formulations and be able to interpret the clinical pharmacology of marketed preparations commonly used in dentistry.
- 5) INTEGRATION: Practical knowledge of use of drugs in clinical practice will be acquired through integrated teaching with clinical departments.

LECTURE:

- I. GENERAL PHARMACOLOGY:
- 1. General principles of pharmacology; sources and nature of drugs dosage forms; prescription writing; pharmacokinetics (absorption, distribution, metabolism and excretion of drugs), mode of action of drugs, combined effects of drugs, receptor mechanism of drug action, factors modifying drug response, adverse drug reactions; drug interactions, Implications of General Principles in clinical dentistry.
- 2. CNS drugs; General anaesthetics, hypnotics, analgescis psychotropic drugs, anti epileptics, muscle relaxants, local anaesthetics, Implications of these drugs in clinical dentistry.
- 3. Autonomic drugs; sympathomimetics, antiadrenergic drugs parasympothomimetics and parasympatholytics, Implications of Autonomic drugs in clinical dentistry.
- 4. Cardiovascular drugs; Cardiac stimulants; antihypertensive drugs, vasopressor agents, treatment of shock, Antianginal agents and diuretics, Implications of these drugs in clinical dentistry.
- 5. Autocoids:
 - Histamine, antihistamines, prostaglandins, leukotriens and bronchodilators, Implications of Autocoids in clinical dentistry.
- 6. Drugs acting on blood : coagulants and anticoagulants, hematinics, Implications of these drugs in clinical dentistry.
- 7. G.I.T. Drugs, Purgatives, anti-diarrhoeal, antacids, anti-emetics, Implications of these drugs in clinical dentistry.
- 8. Endocrines; Emphasis on treatment of diabetes and glucocorticoids, thyroid and antithyroid agents, drugs affecting calcium balance and anabolic steroids, Implications of these drugs in clinical dentistry.
- 9. Chemotherapy: Antimicrobial agents (against bacteria, anaerobic infections, fungi, virus and broad spectrum). Infection management in dentistry. Phamacotherapy of Tuberculosis, leprosy and chemotherapy of malignancy in general. Implications of Chemotherpy in clinical dentistry.
- 10. Vitamins: Water soluble vitamins, Vit. D, Vit.K. and Vit. E, Implications of Vitamins in clinical dentistry.
- 11. Pharmacotherapy of emergencies in dental office and emergency drugs tray Implications of Pharmacotherapy in clinical dentistry.
- 12. Chealating agents BAL, EDTA and desferrioxamine,

II. DENTAL PHARMACOLOGY

- 1. Anti septics, astrigents, obtundents, mummifying agents, bleaching agents, styptics, disclosing agents, dentifrices, mouth washes, caries and fluorides.
- 2. Pharmacotherapy of common oral conditions in dentistry.

Practicals and Demonstrations:

To familiarise the student with the methodology: prescription writing and dispensing. Rationale of drug combinations of marketed drugs.

LIST OF BOOKS RECOMMENDED FOR READING AND REFERENCE

- 1. R.S.Satoskar, Kale Bhandarkar's Pharmacology and Pharmacolherapentics, 10th Edition, Bombay Popular Prakashan 1991.
- 2. Bertam G Katzung, Basic and Clinical pharmacology 6th ed. Appleton & Lange 1997.
- 3. Lauerence D.R. Clinical Pharmacology 8th ed. Churchill Livingstone 1997.
- 4. Satoskar R.S. & Bhandarkar S.D., Pharmacology and Pharmacotherapeutics part I & part ii, 13th Popular Prakashan Bombay 1993.
- 5. Tripathi K.D., Essentials of Medical Pharmacology 4th ed Jaypee Brothers 1999.

6. DENTAL MATERIALS

The science of Dental Material has undergone tremendous changes over the years. Continued research has led to new material systems and changing concepts in the dental field. Interlinked with various specialised branches of chemistry, practically all engineering applied sciences and biological characteristics, the science of dental material emerged as a basic sciences in itself with its own values and principles.

INTRODUCTION

AIMS:

Aim of the course is to present basic chemical and physical properties of Dental materials as they are related to its manipulation to give a sound educational background so that the practice of the dentistry emerged from art to empirical status of science as more information through further research becomes available. It is also the aim of the course of Dental materials to provide with certain criteria of selection and which will enable to discriminate between facts and propaganda with regards to claims of manufactures.

OBJECTIVES:

To understand the evolution and development of science of dental material.

To explain purpose of course in dental materials to personnels concerned with the profession of the dentistry. Knowledge of physical and chemical properties. Knowledge of biomechanical requirements of particular restorative procedure. An intelligent compromise of the conflicting as well as co-ordinating factors into the desired Ernest. Laying down standards or specifications of various materials to guide to manufacturers as well as to help professionals.

Search for newer and better materials which may answer our requirements with greater satisfaction. To understand and evaluate the claims made by manufactures of dental materials

NEEDS FOR THE COURSE:

The profession has to rise from an art to a science, , the need for the dentist to possess adequate knowledge of materials to exercises his best through knowledge of properties of different types of materials. The growing concern of health hazards due to mercury toxicity, inhalation of certain vapour or dust materials, irritations and allergic reaction to skin due to contact of materials. Materials causing irritation of oral tissues, pH of restorative materials causing inflammation and necrosis of pulp which is a cause for the dentist to posses wider knowledge of physical, chemical and biological properties of materials being used. For the protection for the patient and his own protection certain criteria of selection are provided that will enable the dentist to discriminate between facts and propaganda, which will make a material biologically accept.

SCOPE

The dental materials is employed in mechanical procedures including restorative dentistry such as Prosthodontics, endodontics, periodontal, orthodontics and restorative materials. There is scarcely a dental procedure that does not make use of dental materials in one form or another and therefore the application of dental material is not limited to any one branch of dentistry. Branches such as minor surgery and periodontics require less use of materials but the physical and chemical characters of materials are important in these fields.

The toxic and tissue reaction of dental materials and their durability in the oral cavity where the temperature is between 32 & 37 degree centigrade, and the ingestion of hot or cold food ranges from 0-70 degree centigrade. The acid an alkalinity of fluids shown pH varies from 4 to 8.5. The load on 1 sq. mm of tooth or restorative materials can reach to a level as high as many kilograms. Thus the biological properties of dental materials cannot be separated from their physical and chemical properties.

2). STRUCTURE OF MATTER AND PRINCIPLES OF ADHESION.

Change of state, inter atomic primary bonds, inter atomic secondary bonds, inter atomic bond distance and bonding energy, thermal energy, crystalline structure, non crystalline structures, diffusion, adhesion and bonding and adhesion to tooth structures.

3). IMPORTANT PHYSICAL PROPERTIES APPLICABLE TO DENTAL MATERIALS

Physical properties are based on laws of mechanics, acoustics, optics, thermodynamics, electricity, magnetism, radiation, atomic structure or nuclear phenomena. Hue, value, chroma and translucency physical properties based on laws of optics, dealing with phenomena of light, vision and sight. Thermal conductivity & coefficient of thermal expansion are physical properties based on laws of thermodynamics. Stress, strain, proportional limit, elastic limit yield strength, modulus of elasticity, flexibility, resilience, impact, impact strength, permanent deformation, strength, flexure strength fatigue, static fatigue, toughness, brittleness, ductility & malleability, hardness, abrasion resistance, relaxation, rheology, Thixotropic, creep, static creep, dynamic creep, flow, colour, three dimensional colour – hue, values, chroma, Munsell system, metamersim, fluorescence, physical properties of tooth, stress during mastication

4). BIOLOGICAL CONSIDERATIONS IN USE OF DENTAL MATERIALS.

Materials used are with the knowledge of appreciation of certain biological considerations for use in oral cavity. Requirement of materials with biological compatibility. Classification of materials from perspective of biological compatibility. eg. contact with soft tissues, affecting vitality of pulp, used for root canal fillings, affecting hard tissues of teeth, laboratory materials that could be accidentally be inhaled or ingested during handling. Hazards associated with materials: pH-effecting pulp, polymers causing chemical irritation, mercury toxicity, etc. Microleakage, Thermal changes, Galvanism, toxic effect of materials. Biological evaluation for systemic toxicity, skin irritation, mutagenecity and carcinogenicity. Disinfection of dental materials for infection control.

5). GYPSUM & GYPSUM PRODUCTS.

Gypsum – its origin, chemical formula, Products manufactured from gypsum.

Dental plaster, Dental stone, Die stone, high strength, high expansion stone.

Application and manufacturing procedure of each, macroscopic and microscopic structure of each . Supplied as and Commercial names.

Chemistry of setting, setting reaction, theories of setting, gauging water, Microscopic structure of set material.

Setting time: working time and setting time, Measurement of setting time and factors controlling setting time.

Setting expansion, Hygroscopic setting expansion – factors affecting each

Strength :wet strength, dry strength, factors affecting strength, tensile strength

Slurry – need and use.

Care of cast.

ADA classification of gypsum products

Description of impression plaster and dental investment

Manipulation including recent methods or advanced methods.

Disinfection: infection control, liquids, sprays, radiation

Method of use of disinfectants

Storage of material - shelf life

6) IMPRESSION MATERIALS USED IN DENTISTRY

Impression plaster, Impression compound, Zinc oxide eugenol impression paste & bite registration paste incl., non eugenol paste, Hydrocolloids, reversible and irreversible, Elastomeric impression materials. Polysulphide, Condensation silicones, Addition silicones, Polyether, Visible light cure polyether urethane dimethacrylate, Historical background & development of each impression material, Definition of impression, Purpose of making impression, Ideal properties required and application of material, Classification as per ADA specification, general & individual impression material.

Application and their uses in different disciplines, Marketed as and their commercial names, Mode of supply & mode of application bulk/wash impression. Composition, chemistry of setting ,Control of setting time, Type of impression trays required, Adhesion to tray, manipulation, instruments & equipments required. Techniques of impression, storage of impression, (Compatibility with cast and die material). Any recent advancements in material and mixing devices. Study of properties: Working time, setting time, flow, accuracy, strength, flexibility, tear strength, dimensional stability, compatibility with cast & die materials incl., electroplating Biological properties: tissue reaction, Shelf life & storage of material, Infection control – disinfection, Advantages & disadvantages of each material.

7). SYNTHETIC RESINS USED IN DENTISTRY.

Historical background and development of material, Denture base materials and their classification and requirement

Classification of resins

Dental resins – requirements of dental resins, applications, polymerisation, polymerisation mechanism stages in addition polymerisation, inhibition of polymerisation, co polymerization, molecular weight, crosslinking, plastixizers, Physical properties of polymers, polymer structures types of resins.

ACRYLIC RESINS:
Mode of polymerisation: Heat activated, Chemically activated, Light activated, Mode of supply, application, composition, polymerisation reaction of each. Technical considerations: Methods of

manipulation for each type of resin. Physical properties of denture base resin. Miscellaneous resins & techniques: Repair resins, Relining and rebasing. Short term and long-term soft-liners, temporary crown

Expansions: Setting expansion, Hygroscopic Setting expansion, & thermal expansion: factors affecting. Properties: Strength, porosity, and fineness & storage. Technical considerations: For Casting procedure, Preparation of die, Wax pattern, spruing, investing, control of shrinkage compensation, wax burnout, and heating the invested ring, casting. Casting machines, source of heat for melting the alloy. Defects in casting.

11). SOLDERING, BRAZING AND WELDING

Need of joining dental appliances, Terms & Definition

Solders: Definition, ideal requirement, types of solders – Soft & hard and their fusion temperature, application. Mode of supply of solders, Composition and selection, Properties. Tarnish & corrosion resistance mechanical properties, microstructure of soldered joint. Fluxes & Anti fluxes: Definition, Function, Types, commonly used fluxes & their selection Technique of Soldering & Brazing: free hand soldering and investment, steps and procedure. Welding,: Definition, application, requirements, procedure, weld decay - causes and how to avoid it. Laser welding.

WROUGHT BASE METAL ALLOYS

Applications and different alloys used mainly for orthodontics purpose

- 1. Stainless steel
- 2. Cobalt chromium nickel
- 3. Nickel titanium
- 4. Beta titanium

Properties required for orthodontic wires, working range, springiness, stiffness, resilience, Formability, ductility, ease of joining, corrosion resistance, stability in oral environment, bio compatibility

Stainless steels: Description, type, composition & properties of each type. Sensitisation & stabilisation.

Stainless steels: Description, type, composition & properties of each type. Sensitisation & stabilisation, Mechanical properties – strength, tensile, yield strength, KHN. Braided & twisted wires their need, Solders for stainless steel, Fluxes, Welding

- 1. Wrought cobalt chromium nickel alloys, composition, allocation, properties, heat treatment, physical properties
- 2. Nickel Titanium alloys, shape, memory & super elastic
- 3. Titanium alloys, application, composition, properties, welding, Corrosion resistance

12). DENTAL CEMENTS

Definition & Ideal requirements:

Cements: Silicate, Glass ionomer, metal modified glass ionomer, resin modified glass ionomer, zinc oxide eugenol, modified zinc oxide eugenol, zinc phosphate, zinc silico phosphate, zinc poly carboxylate, Cavity liners and cement bases, Varnishes Calcium hydroxide, Gutta percha

Application, classification (general and individual), setting mechanism, mode of supply, Properties, factors affecting setting, special emphasis on critical procedures of manipulation and protection of cement, mode of adhesion, biomechansim of caries inhibition.

Agents for pulpal protection., Modifications and recent advances, Principles of cementation. Special emphasis on cavity liners and cement bases and luting agents.

13). DENTAL CERAMICS

 $\label{thm:control} \mbox{Historical background \& General applications.}$

Dental ceramics: definition, classification, application, mode of supply, manufacturing procedure, methods of strengthening. Properties of fused ceramic: Strength and factors affecting, modulus of elasticity, surface hardness, wear resistance, thermal properties, specific gravity, chemical stability, esthetic properties, biocompatability, technical considerations.

Metal Ceramics (PFM): Alloys - Types and composition of alloys. Ceramic - Type and Composition.

Metal Ceramic Bond - Nature of bond. Bonding using electro deposition, foil copings, bonded platinum foil, swaged gold alloy foil coping. Technical considerations for porcelain and porcelain fused metal restorations. Recent advances - all porcelain restorations, Manganese core, injection moulded, castable ceramics, glass infiltrated alumina core ceramic (In ceram), ceramic veners, inlays and onlays, and CAD - CAM ceramic. Chemical attack of ceramic by fluoride. Porcelain furnaces.

14). ABRASION & POLISHING AGENTS

Definition of abrasion and polishing. Need of abrasion and polishing. Types of abrasives: Finishing, polishing & cleaning. Types of abrasives: Diamond, Emery, aluminium oxides garnet, pumice, Kieselgurh, tripoli, rouge, tin oxide, chalk, chromic oxide, sand, carbides, diamond, zirconium silicate Zinc oxide

ABRASIVE ACTION:

Desirable characteristics of an abrasive, Rate of abrasion, Size of particle, pressure and speed.

Grading of abrasive & polishing agents. Binder, Polishing materials & procedures used. Technical consideration - Material and procedure used for abrasion and polishin Electrolytic polishing and burnishing.

15). DIE AND COUNTER DIE MATERIALS INCLUDING ELECTROFORMING AND ELECTROPOLISHING.

Types – Gypsum products, Electroforming, Epoxy resin, Amalgam.

- 16). DENTAL IMPLANTS: Evolution of dental implants, types and materials.
- 17). MECHANICS OF CUTTING: Burs and points.

At the end of the course the student should have the knowledge about the composition, properties, manipulative techniques and their various commercial names. The student should also acquire skills to select and use the materials appropriately for laboratory and clinical use.

RECOMMENDED BOOKS:

- 1. Phillips Science of Dental Materials 10th edn.- Kenneth J. Anusavice
- 2. Restorative Dental Materials 10 edn. Robert G.Craig
- 3. Notes on Dental Materials E.C. Combe

7. PRE CLINICAL CONSERVATIVE DENTISTRY LABORATORY EXERCISES

- 1. Identification and study of handcutting instruments chisles, gingival margin trimmers, excavators and hatchet.
- 2. Identification and use of rotary cutting instruments in contra angle hand pieces burs (Micromotor)
- 3. Preparation class I and extended class I and class II and MOD's and class V amounting to 10 exercises in plaster models.
- 4. 10 exercises in mounted extracted teeth of following class I, 4 in number class I extended cavities 2, class II 4 in number and Class V 2 in number. Cavity preparation base application matrix and wedge placement restoration with amalgam.
- 5. Exercises on phantom head models which includes cavity preparation base and varnish application matrix and wedge placement followed by amalgam restoration.

Class I 5
Class I with extension 2
Class II 10
Class II Mods 2
Class V and III forglass ionmers 4
Class V for amalgam 2

- 6. Polishing of above restorations.
- 7. Demonstration of Class III and Class V cavity preparation. For composites on extracted tooth completing the restoration.
- 8. Polishing and finishing of the restoration of composites.
- 9. Identification and manipulation of varnish bases like Zinc Phosphate, Poly carboxylate, Glass Ionomers, Zinc Oxide, Euginol cements.
- 10. Identification and manipulation of various matrices, tooth separators and materials like composites and modified glassionomer cements.
- 11. Cast Restoration
 - 1. Preparation of Class II inlay cavity
 - 2. Fabrication of wax pattern
 - 3. Sprue for inner attachment investing
 - 4. Investing of wax pattern
 - 5. Finishing and cementing of class II inlay in extracted tooth.

12. Endodontics

- $1. \ Identification \ of \ basic \ endodontic \ instruments$
- 2. Cornal access cavity preparation on extracted. Upper central incisiors
- 3. Determination of working length.
- 4. Biomechanical preparation of root canal space of central incisor
- 5. Obfuration of root canal spaces. Absens of cornal access cavity.
- 6. Closure of acess cavity

8. ORAL PATHOLOGY & ORAL MICROBIOLOGY

OBJECTIVES:

At the end of Oral Pathology & Oral Microbiology course, the student should be able to comprehend -

- 1. The different types of pathological processes, that involve the oral cavity.
- 2. The manifestations of common diseases, their diagnosis & correlation with clinical pathological processes.
- 3. An understanding of the oral manifestations of systemic diseases should help in correlating with the systemic physical signs & laboratory findings.
- 4. The student should understand the underlying biological principles governing treatment of oral diseases.
- 5. The principles of certain basic aspects of Forensic Odontology.

SKILLS:

- Microscopic study of common lesions affecting oral tissues through microscopic slides & projection slides.
- 2. Study of the disease process by surgical specimens.
- 3. Study of teeth anomalies/polymorphisms through tooth specimens & plaster casts.
- 4. Microscopic study of plaque pathogens.
- 5. Study of haematological preparations (blood films) of anaemias & leukemias.

- 6. Basic exercises in Forensic Odontology such as histological methods of age estimation and appearance of teeth in injuries.
- 1. <u>INTRODUCTION:</u>
- ♦ A bird's eye view of the different pathological processes involving the oral cavity & oral cavity involvement in systemic diseases to be brought out. Interrelationship between General Medicine & General Surgery & Oral pathology to be emphasized.
- 2. Developmental disturbances of teeth, jaws and soft tissues of oral & paraoral region :
- Introduction to developmental disturbances Hereditary, Familial mutation, Hormonal etc. causes to be highlighted.
- Developmental disturbances of teeth Etiopathogenesis, clinical features, radiological features & histopathological features as appropriate:-
 - The size, shape, number, structure & eruption of teeth & clinical significance of the anomalies to be emphasized.
- ♦ Forensic Odontology.
- Developmental disturbances of jaws size & shape of the jaws.
- Developmental disturbances of oral & paraoral soft tissues lip & palate clefts, tongue, gingiva, mouth, salivary glands & face.
- 3. Dental Caries:
- Etiopathogenesis, microbiology, clinical features, diagnosis, histopathology, immunology, prevention of dental caries & its sequelae.
- 4. Pulp & Periapical Pathology & Osteomyelitis.
- Etiopathogenesis & interrelationship, clinical features, microbiology, histopathology & radiological features (as appropriate) of pulp & periapical lesions & osteomyelitis.
- Sequelae of periapical abscess summary of space infections, systemic complications & significance.
- 5. Periodontal Diseases:
- Etiopathogenesis, microbiology, clinical features, histopathology & radiological features (as appropriate) of gingivitis, gingival enlargements & periodontitis. Basic immunological mechanisms of periodontal disease to be highlighted.
- 6. Microbial infections of oral soft tissues:
- ♦ Microbiology, defence mechanisms including immunological aspects, oral manifestations, histopathogy and laboratory diagnosis of common bacterial, viral & fungal infections namely:-Bacterial: Tuberculosis, Syphilis, ANUG & its complications Cancrum Oris.

Viral: Herpes Simplex, Varicella zoster, Measles, Mumps & HIV infection.

Fungal: Candidal infection. Apthous Ulcers.

- 7. Common non-inflammatory diseases involving the jaws:
- ♦ Etiopathogenesis, clinical features, radiological & laboratory values in diagnosis of : Fibrous dysplasia, Cherubism, Osteogenesis Imperfecta, Paget's disease, Cleidocranial dysplasia, Rickets, Achondroplasia, Marfan's syndrome & Down's syndrome.
- 8. Diseases of TM Joint:
- Ankylosis, summary of different types of arthritis & other developmental malformations, traumatic injuries & myofascial pain dysfunction syndrome.
- 9. Cysts of the Oral & Paraoral region:
- Classification, etiopathogenesis, clinical features, histopathology, laboratory & radiological features (as appropriate) of Odontogenic cysts, Non-Odontogenic cysts, Pseudocysts of jaws & soft tissue cysts of oral & paraoral region.
- 10. Tumours of the Oral Cavity:
- ♦ Classification of Odontogenic, Non-Odontogenic & Salivary Gland Tumours. Etiopathogenesis, clinical features, histopathology, radiological features & laboratory diagnosis (as appropriate) of the following common tumours:
 - a) Odontogenic all lesions.
 - b) Non-odontogenic
 - Benign Epithelial Papilloma, Keratoacanthoma & Naevi.
 - Benign Mesenchymal Fibroma, Aggressive fibrous lesions, Lipoma, Haemangioma, Lymphangioma, Neurofibroma,

Schwannoma, Chondroma, Osteoma & Tori.

- Malignant Epithelial - Basal Cell Carcinoma, Verrucous Carcinoma, Squamous Cell carcinoma &

Malignant Melanoma.

- Malignant Mesenchymal Fibrosarcoma, Osteosarcoma, Giant cell tumour, Chondrosarcoma, Angiosarcoma, Kaposi's sarcoma, Lymphomas, Ewing's sarcoma & Other Reticuloendothelial tumours.
- c) Salivary Gland
- Benign Epithelial neoplasms Pleomorphic Adenoma, Warthin's tumour, & Oncocytoma.
- Malignant Epithelial neoplasms Adenoid Cystic Carcinoma, Mucoepidermoid Carcinoma, Acinic Cell Carcinoma & Adenocarcinomas.

- d) Tumours of Disputed Origin Congenital Epulis & Granular Cell Myoblastoma.
- e) Metastatic tumours Tumors metastasizing to & from oral cavity & the routes of metastasis.
- 11. Traumatic, Reactive & Regressive lesions of Oral Cavity:
- Pyogenic & Giant cell granuloma, exostoses Fibrous Hyperplasia, Traumatic Ulcer & Traumatic Neuroma.
- Attrition, Abrasion, Erosion, Bruxism, Hypercementosis, Dentinal changes, Pulp calcifications & Resorption of teeth.
- Radiation effects of oral cavity, summary of Physical & Chemical injuries including allergic reactions of the oral cavity.
- Healing of Oral wounds & complications Dry socket.
- 12. Non neoplastic Salivary Gland Diseases:
- Sialolithiasis, Sialosis, Sialadenitis, Xerostomia & Ptyalism.
- 13. Systemic Diseases involving Oral cavity:
- Brief review & oral manifestations, diagnosis & significance of common Blood, Nutritional, Hormonal & Metabolic diseases of Oral cavity.
- 14. Mucocutaneous Lesions:
- Etiopathogenesis, clinical features & histopathology of the following common lesions. Lichen Planus, Lupus Erythematosus, Pemphigus & Pemphigoid lesions, Erythema Multiforme, Psoriasis, Scleroderma, Ectodermal Dysplasia, Epidermolysis bullosa & White sponge nevus...
- 15. Diseases of the Nerves:
- Facial neuralgias Trigeminal & Glossopharyngeal. VII nerve paralysis, Causalgia.
- Psychogenic facial pain & Burning mouth syndrome.
- 16. Pigmentation of Oral & Paraoral region & Discolouration of teeth:
- causes & clinical manifestations.
- 17. Diseases of Maxillary Sinus:
- Traumatic injuries to sinus, Sinusitis, Cysts & Tumours involving antrum.
- 18. a) ORAL PRECANCER - CANCER; Epidemiology, aetiology, clinical and histopatholotgical features, TNM classification. Recent advances in diagnosis, management and prevention.
 - b) Biopsy: Types of biopsy, value of biopsy, cytology, histo chemistry & frozen sections in diagnosis of oral diseases.
- 19. Principles of Basic Forensic Odontology (Pre-clinical Forensic Odontology):
- Introduction, definition, aims & scope.
- Sex and ethnic (racial) differences in tooth morphology and histological age estimation
- Determination of sex & blood groups from buccal mucosa / saliva.
- Dental DNA methods
- Bite marks, rugae patterns & lip prints.
- Dental importance of poisons and corrosives.
- Overview of forensic medicine and toxicology

RECOMMENDED BOOKS

- A Text Book of Oral Pathology 1.
- Oral Pathology Clinical Pathologic correlations 2.
- 3. Oral Pathology
- Oral Pathology in the Tropics 4.

- Shafer, Hine & Levy.
- Regezi & Sciubba.
- Soames & Southam.
- Prabhu, Wilson, Johnson & Daftary

GENERAL MEDICINE

GUIDELINES:

Special emphasis should be given throughout on the importance of various diseases as applicable to dentistry.

- Special precautions/ contraindication of anaesthesia and various dental procedures in different systemic diseases.
- Oral manifestations of systemic diseases.
- 3. Medical emergencies in dental practice.

A dental student should be taught in such a manner he/she is able to record the arterial pulse, blood pressure and be capable of suspecting by sight and superficial examination of the body - diseases of the heart, lungs, kidneys, blood etc. He should be capable of handling medical emergencies encountered in dental practice.

THEORY SYLLABUS

CORE TOPICS

COLLATERAL TOPICS (Must Know) (Desirable to Know)

1. Aims of medicine Definitions of signs, symptoms, diagnosis, differential diagnosis treatment & prognosis.

2. Infections. Enteric fever, AIDS, herpes simplex, herpes zoster, rubella, malaria. syphilis diphtheria.

Infectious mononucleosis mumps, measles,

3. G.I.T.

Stomatitis, gingival hyperplasia, dysphagia, acid peptic disease, jaundice, acute and chronic hepatitis, cirrhosis of liver ascites.

Dysentery Amoebiasis Malabsorhtion

Diarrhea

4. CVS

Acute rheumatic fever rheumatic valvular heart disease, hypertension, ischemic heart disease, infective endocarditis, common arrhythmias, congenital heart disease, congestive cardiac failure.

Pneumonia, COPD, Pulmonary TB, Bronehial asthma

Lung Abscess Pleural effusion Pneumothorax Bronchiectasis Lung cancers.

Renal failure

Balanced diet

Examination of cranial nerves. Addison's disease, Cushing's syndrome.

PEM

6. Hematology

disorders, leukemias, Anemias, bleeding & clotting lymphomas, agranulocytosis, splenomegaly, manifestations of hematologic disorders, generalized Lymphadenopathy.

7. Renal System

Acute nephritis

Nephrotic syndrome

8, Nutrition Avitaminosis

Avitaminosis 9. CNS Meningitis Examination of comatose patient

Facial palsy, facial pain including trigeminal neuralgia, epilepsy, headache including migraine.

10. Endocrines

Diabetes Mellitus Acromegaly, Hypothyroidism,

Thyrotoxicosis, Calcium metabolism and parathyroids.

11. Critical care Ac LVF Syncope, cardiac arrest, CPR, shock ARDS

CLINICAL TRAINING:

The student must be able to take history, do general physical examination (including build, nourishment, pulse, BP, respiration, clubbing, cyanosis, jaundice, lymphadenopathy, oral cavity) and be able to examine CVS, RS and abdomen and facial nerve.

GENERAL SURGERY 10.

AIMS:

To acquaint the student with various diseases, which may require surgical expertise and to train the student to analyze the history and be able to do a thorough physical examination of the patient. The diseases as related to head and neck region are to be given due importance, at the same time other relevant surgical problems are also to be addressed. At the end of one year of study the student should have a good theoretical knowledge of various ailments, and be practically trained to differentiate benign and malignant diseases and be able to decide which patient requires further evaluation.

HISTORY OF SURGERY:

The development of surgery as a speciality over the years, will give the students an opportunity to know the contributions made by various scientists, teachers and investigators. It will also enable the student to understand the relations of various specialities in the practice of modern surgery.

GENERAL PRINCIPLES OF SURGERY: 2.

Introduction to various aspects of surgical principles as related to orodental diseases. Classification of diseases in general. This will help the student to understand the various diseases, their relevance to routine dental practice.

WOUNDS: 3.

Their classification, wound healing, repair, treatment of wounds, medico-legal aspects of accidental wounds and complications of wounds.

4. INFLAMMATION:

Of soft and hard tissues. Causes of inflammation, varieties, treatment and sequelae.

5.

Acute and chronic abscess skin infections, cellulitis, carbuncle, and erysepelas. Specific infections such as tetanus, gangrene, syphilis, gonorrhoea, tuberculosis, Actinomycosis, Vincents angina, cancrum oris. Pyaemia, toxaemia and septicaemia.

6. TRNSMISSABLE VIRAL INFECTIONS:

HIV and Hepatitis B with special reference to their prevention and precautions to be taken in treating patients in a carrier state.

7. SHOCK AND HAEMORRHAGE:

Classification, causes, clinical features and management of various types of shock. Syncope, Circulatory collapse. Haemorrhage – different types, causes, clinical features and management. Blood groups, blood transfusion, precautions and complications of blood and their products. Hemophilia's, their transmission, clinical features and management especially in relation to minor dental procedures.

8. TUMOURS, ULCERS, CYSTS, SINUS AND FISTULAE:

Classification, clinical examination and treatment principles in various types of benign and malignant tumours, ulcers, cysts, sinus and fistulae.

9. DISEASES OF LYMPHATIC SYSTEM:

Especially those occurring in head and neck region. Special emphasis on identifying diseases such as tubercular infection, lymphomas, leukaemias, metastatic lymph node diseases.

10. DISEASES OF THE ORAL CAVITY:

Infective and malignant diseases of the oral cavity and oropharynx including salivary glands with special emphasis on preventive aspects of premalignant and malignant diseases of the oral cavity.

11. DISEASES OF LARYNX, NASOPHARYNX:

Infections and tumours affecting these sites. Indications, procedure and complications of tracheostmy.

12. NERVOUS SYSTEM:

Surgical problems associated with nervous system with special reference to the principles of peripheral nerve injuries, their regeneration and principles of treatment. Detailed description of afflictions of facial nerve and its management. Trigeminal neuralgia, its presentation and treatment.

13. FRACTURES:

General principles of fractures, clinical presentation and treatment with additional reference to newer methods of fracture treatment. Special emphasis on fracture healing and rehabilitation.

14. PRINCIPLES OF OPERATIVE SURGERY:

Principles as applicable to minor surgical procedures including detailed description of asepsis, antiseptics, sterilisation, principles of anaesthesia and principles of tissue replacement. Knowledge of sutures, drains, diathermy, cryosurgery and use of Laser in surgery.

15. ANOMOLIES OF DEVELOPMENT OF FACE:

Surgical anatomy and development of face. Cleft lip and cleft palate—principles of management.

16. DISEASES OF THYROID AND PARATHYROID:

Surgical anatomy, pathogenesis, clinical features and management of dysfunction of thyroid and parathyroid glands. Malignant diseases of the thyroid—classification, clinical features and management.

17. SWELLINGS OF THE JAW:

Differential diagnosis and management of different types of swellings of the jaw.

18. BIOPSY:

Different types of biopsies routinely used in surgical practice.

Skills to be developed by the end of teaching is to examine a routine swelling, ulcer and other related diseases and to perform minor surgical procedures such as draining an abscess, taking a biopsy etc.

11. CONSERVATIVE DENTISTRY AND ENDODONTICS

OBJECTIVES:

- A. Knowledge and understanding
- B. Skills and
- C. Attitudes

A). Knowledge and under standing:

The graduate should acquire the following knowledge during the period of training.

- i. To diagnose and treat simple restorative work for teeth.
- ii. To gain knowledge about aesthetic restorative material and to translate the same to patients
- iii. To gain the knowledge about endodontic treatment on the basis of scientific foundation.
- iv. To carry out simple endodontic treatment.
- v. To carry out simple luexation of tooth and its treatment and to provide emergency endodontic treatment.

SKILLS:

He should attain following skills necessary for practice of dentistry

- i) To use medium and high speed hand pieces to carry out restorative work.
- ii) Poses the skills to use and familiarise endodontic instruments and materials needed for carrying out simple endodontic treatment.
- iii) To achieve the skills to translate patients esthetic needs along with function.

ATTITUDES:

- i). Maintain a high standard of professional ethics and conduct and apply these in all aspects of professional life.
- ii). Willingness to participate in CDE programme to update the knowledge and professional skill from time to time.
- iii). To help and participate in the implementation of the national oral health policy.
- iv). He should be able to motivate the patient for proper dental treatment at the same time proper maintenance of oral hygiene should be emphasise which will help to maintain the restorative work and prevent future damage.

INTRODUCTION:

Definition aims objectives of Conservative Dentistry scope and future of Conservative Dentistry.

- 1. Nomenclature Of Dentition:
 - Tooth numbering systems A.D.A. Zsigmondy Palmer and F.D.I. systems.
- 2. Principles Of Cavity Preparation:
 - Steps and nomenclature of cavity preparation classification of cavities, nomenclature of floors angles of cavities.
- 3. Dental Caries:
 - Aetiology, classification clinical features, morphological features, microscopic features, clinical diagnosis and sequel of dental caries.
- 4. Treatment Planning For Operative Dentistry:
 - Detailed clinical examination , radiographic examination, tooth vitality tests, diagnosis and treatment planning, preparation of the case sheet.
- 5. Gnathological Concepts Of Restoration:
 - Physiology of occlusion, normal occlusion, Ideal occlusion, mandibular movements and occlusal analysis. Occlusal rehabilitation and restoration.
- 6. Aramamentarium For Cavity Preparation:
 - General classification of operative instruments, Hand cutting instruments design formula and sharpening of instruments. Rotary cutting instruments dental bur, mechanism of cutting, evaluation of hand piece and speed current concepts of rotary cutting procedures. Sterilisation and maintenance of instruments. Basic instrument tray set up.
- 7. Control of Operating Filed:
 - Light source sterilisation field of operation control of moisture, rubber dam in detail, cotton rolls and anti sialogagues.
- 8. Amalgam Restoration:
 - Indication contraindication, physical and mechanical properties , clinical behaviour. Cavity preparation for Class I , II, V and III. Step wise procedure for cavity preparation and restoration. Failure of amalgam restoration.
- 9. Pulp Protection:
 - Liners, varnishes and bases, Zinc phosphate, zinc polycarboxylate, zinc oxide eugenol and glass inomer cements.
- 10. Anterior Restorations:
 - Selection of cases, selection of material, step wise procedures for using restorations, silicate (theory only) glass inomers, composites, including sand witch restorations and bevels of the same with a note on status of the dentine bonding agents.
- 11. Direct Filling Gold Restorations:
 - Types of direct filling gold indications and limitations of cohesive gold. Annealing of gold foil cavity preparation and condensation of gold foils.
- 12. Preventive Measures In Restorative Practice:
 - Plaque Control, Pitand fissure sealants dietary measures restorative procedure and periodontal health. Contact and contour of teeth and restorations matrices tooth separation and wedges.
- 13. Temporisation or Interim Restoration.
- 14. Pin Amalgam Restoration Indication Contra Indication:
 - Advantages disadvantages of each types of pin methods of placement use of auto matrix. Failure of pin amalgam restoration.
- 15. Management Of Deep Carious Lesions Indirect And Direct Pulp Capping.
- 16. Non Carious Destruction's Tooth Structures Diagnosis and Clinical Management
- 17. Hyper Sensitive Dentine And Its Management.
- 18. Cast Restorations
 - Indications, contra indications, advantages and disadvantages and materials used for same Class II and Class I cavity preparation for inlays fabrication of wax pattern spurring inverting and casting procedures & casting defects.

- 19. Die Materials And Preparation Of Dies.
- 20. Gingival Tissue Management For Cast Restoration And Impression Procedures
- 21. Recent Cavity Modification Amalgam Restoration.
- 22. Differences between Amalgam And Inlay Cavity preparation with note on all the types of Bewels used for Cast Restoration.
- 23. Control Of Pain During Operative Procedures.
- 24. Treatment Planning For Operative Dentistry Detailed Clinical Examination Radiographic Examination
- 25. Vitality Tests, Diagnosis And Treatment Planning And Preparation Of Case Sheet.
- 26. Applied Dental Materials.
 - 1. Biological Considerations.
 - Evaluation, clinical application and adverse effects of the following materials. Dental cements, Zinc oxide euginol cements zinc phosphate cements, polycarboxylates glass ionomer cements, silicate cement calcium hydroxides varnishes.
 - 2. Dental amalgam, technical considerations mercury toxicity mercury hygiene.
 - 3. Composite, Dentine bonding agents, chemical and light curing composites
 - 4. Rubber base Imp. Materials
 - 5. Nobel metal alloys & non noble metal alloys
 - 6. Investment and die materials
 - 7. Inlay casting waxes
 - 8. Dental porcelain
 - 9. Aesthetic Dentistry
- 27. Endodontics: introduction definition scope and future of endodontics
- 28. Clinical diagnostic methods
- 29. Emergency endodontic procedures
- 30. Pulpal diseases causes, types and treatment.
- 31. Periapical diseases: acute periapical abscess, acute periodontal abscess phoeix abscess, chronic alveolar abscess granuloma cysts condensing osteits, external resorption.
- 32. Vital pulp therapy: indirect and direct pulp capping pulpotomy different types and medicaments used.
- 33. Apexogenisis and apexification or problems of open apex.
- 34. Rationale of endodontic treatment case selection indication and contraindications for root canal treatments.
- 35. Principles of root canal treatment mouth preparation root canal instruments, hand instruments, power driven instruments, standardisation color coding principle of using endodontic instruments. Sterilisation of root canal instruments and materials rubber dam application.
- 36. Anatomy of the pulp cavity: root canals apical foramen. Anomalies of pulp cavities access cavity preparation of anterior and premolar teeth.
- 37. Preparation of root canal space. Determination of working length, cleaning and shaping of root canals, irrigating solution chemical aids to instrumentation.
- 38. Disinfection of root canal space intracanal medicaments, poly antibiotic paste ross mans paste, mummifying agents. Out line of root canal treatment, bacteriological examinations, culture methods.
- 39. Problems during cleaning and shaping of root canal spaces. Perforation and its management. Broken instruments and its management, management of single and double curved root canals.
- 40. Methods of cleaning and shaping like step back crown down and conventional methods.
- 41. Obturation of the root canal system. Requirements of an ideal root canal filling material obturation methods using gutta percha healing after endodontic treatment. Failures in endodontics.
- 42. Root canal sealers. Ideal properties classification. Manipulation of root canal sealers.
- 43. post endodontic restoration fabrication and components of post core preparation.
- 44. smear layer and its importance in endodontics and conservative treatment.
- 45. discoloured teeth and its management. Bleaching agents, vital and non vital bleaching methods.
- 46. traumatised teeth classification of fractured teeth. Management of fractured tooth and root. Luxated teeth and its management.
- 47. endodontic surgeries indication contraindications, pre operative preparation. Pre medication surgical instruments and techniques apicectomy, retrograde filling, post operative sequale terphination hemisection, radiscetomy techniques of tooth reimplantation (both intentional and accidental) endodontic implants.
- 48. root resorption.
- 49. emergency endodontic procedures.
- 50. lasers in conservative endodontics (introduction only) practice management
- 51. professional association dentist act 1948 and its amendment 1993.
- 52. duties towards the govt. Like payments of professional tax, income tax.
- 53. financial management of practice
- 54. dental material and basic equipment management.
- 55. Ethics

12. **ORAL & MAXILLOFACIAL SURGERY**

AIMS:

To produce a graduate who is competent in performing extraction of teeth under both local and general anaesthesia, prevent and manage related complications, acquire a reasonable knowledge and understanding of the various diseases, injuries, infections occurring in the Oral & Maxillofacial region and offer solutions to such of those common conditions and has an exposure in to the in-patient management of maxillofacial problems.

OBJECTIVES:

a) Knowledge & Understanding:

At the end of the course and the clinical training the graduate is expected to -

- 1. Able to apply the knowledge gained in the related medical subjects like pathology, microbiology and general medicine in the management of patients with oral surgical problem.
- Able to diagnose, manage and treat (understand the principles of treatment of) patients with oral surgical problems.
- 3. Knowledge of range of surgical treatments.
- 4. Ability to decide the requirement of a patient to have oral surgical specialist opinion or treatment.
- 5. Understand the principles of in-patient management.6. Understanding of the management of major oral surgical procedures and principles involved in patient management.
- 7. Should know ethical issues and communication ability.
- 1. A graduate should have acquired the skill to examine any patient with an oral surgical problem in Be able to understand requisition of various clinical and laboratory investigations and is capable of formulating differential diagnosis.
- 2. Should be competent in the extraction of teeth under both local and general anaesthesia.
- 3. Should be able to carry out certain minor oral surgical procedures under L.A. like frenectomy, alveolar procedures & biopsy etc.
- 4. Ability to assess, prevent and manage various complications during and after surgery.
- 5. Able to provide primary care and manage medical emergencies in the dental office.
- 6. Understanding of the management of major oral surgical problems and principles involved in inpatient management.

DETAILED SYLLABUS

- 1. Introduction, definition, scope, aims and objectives.
- 2. Diagnosis in oral surgery:
 - (A) History taking
 - (B) Clinical examination
 - (C) Investigations.
- 3. Principles of infection control and cross-infection control with particular reference to HIV/AIDS and Hepatitis.
- 4. Principles of Oral Surgery
 - a) Asepsis: Definition, measures to prevent introduction of infection during surgery.
 - 1. Preparation of the patient
 - 2. Measures to be taken by operator
 - 3. Sterilisation of instruments various methods of sterilisation etc.4. Surgery set up.
 - b) Painless Surgery:
 - 1. Pre-anaesthetic considerations. Pre-medication: purpose, drugs used
 - 2. Anaesthetic considerations
 - a) Local b) Local with IV sedations
 - 3. Use of general anaesthetic
 - c) Access:

Intra-oral: Mucoperiosteal flaps, principles, commonly used intra oral incisions.

Bone Removal: Methods of bone removal.

Use of Burs: Advantages & precautions

Bone cutting instruments: Principles of using chisel & osteotome.

Extra-oral: Skin incisions - principles, various extra-oral incision to expose facial skeleton.

- a) Submandibular
- b) Pre auricular
- c) Incision to expose maxilla & orbit
- d) Bicoronal incision
- d) Control of haemorrhage during surgery

Normal Haemostasis

Local measures available to control bleeding

Hypotensive anaesthesia etc.

Drainage & Debridement

Purpose of drainage in surgical wounds

Types of drains used

Debridement: purpose, soft tissue & bone debridement.

f) Closure of wounds

Suturing: Principles, suture material, classification, body response to various materials etc.

g) Post operative care

Post operative instructions

Physiology of cold and heat

Control of pain - analgesics

Control of infection - antibiotics

Control of swelling - anti-inflammatory drugs

Long term post operative follow up - significance.

5. Exodontia: General considerations

Ideal Extraction.

Indications for extraction of teeth

Extractions in medically compromised patients.

Methods of extraction -

(a) Forceps or intra-alveolar or closed method.

Principles, types of movement, force etc.

(b) Trans-alveolar, surgical or open method, Indications, surgical procedure.

Dental elevators: uses, classification, principles in the use of elevators, commonly used elevators.

Complications of Exodontia -

Complications during exodontia

Common to both maxilla and mandible.

Post-operative complications -

Prevention and management of complications.

6. Impacted teeth:

Incidence, definition, aetiology.

(a) Impacted mandibular third molar.

Classification, reasons for removal,

Assessment - both clinical & radiological

Surgical procedures for removal.

Complications during and after removal,

Prevention and management.

(b) Maxillary third molar,

Indications for removal, classification,

Surgical procedure for removal.

(c) Impacted maxillary canine

Reasons for canine impaction,

Localization, indications for removal,

Methods of management, labial and palatal approach,

Surgical exposure, transplantation, removal etc.

7. Pre-prosthetic Surgery:

Definition, classification of procedures

(a) Corrective procedures: Alveoloplasty,

Reduction of maxillary tuberosities, Frenoctemies and removal of tori.

(b) Ridge extension or Sulcus extension procedures Indications and various surgical procedures

(c) Ridge augmentation and reconstruction.

Indications, use of bone grafts, Hydroxyapatite

Implants - concept of osseo integration

Knowledge of various types of implants and

surgical procedure to place implants.

8. Diseases of the maxillary sinus

Surgical anatomy of the sinus.

Sinusitis both acute and chronic

Surgical approach of sinus - Caldwell-Luc procedure

Removal of root from the sinus.

Oro-antral fistula - aetiology, clinical features and various surgical methods for closure.

9. Disorders of T.M. Joint

Applied surgical anatomy of the joint.

Dislocation - Types, aetiology, clinical features and management.

Ankylosis - Definition, aetiology, clinical features and management

Myo-facial pain dysfunction syndrome, aetiology, clinical features, management-Non surgical and surgical. Internal derangement of the joint.

Arthritis of T.M. Joint.

10. Infections of the Oral cavity

Introduction, factors responsible for infection, course of odontogenic

infections, spread of odontogenic infections through various facial spaces.

Dento-alveolar abscess - aetiology, clinical features and management.

Osteomyelitis of the jaws - definition, aetiology, pre-disposing factors, $% \left(1\right) =\left(1\right) \left(1\right)$

classification, clinical features and management.

Ludwigs angina - definition, aetiology, clinical features, management and complications.

11. Benign cystic lesions of the jaws -

Definition, classification, pathogenesis.

Diagnosis - Clinical features, radiological, aspiration biopsy, use of contrast media and histopathology.

Management - Types of surgical procedures, Rationale of the techniques, indications, procedures, complications etc.

12. Tumours of the Oral cavity -

General considerations

Non odontogenetic benign tumours occuring in oral cavity - fibroma, papilloma,

lipoma, ossifying fibroma, mynoma etc.

Ameloblastoma - Clinical features, radiological appearance and methods of management.

Carcinoma of the oral cavity -

Biopsy - types

TNM classification.

Outline of management of squamous

Cell carcinoma: surgery, radiation and chemotherapy

Role of dental surgeons in the prevention and early detection of oral cancer.

13. Fractures of the jaws -

General considerations, types of fractures, aetiology, clinical features and general principles of management.

mandibular fractures - Applied anatomy, classification.

Diagnosis - Clinical and radiological

Management - Reduction closed and open

Fixation and immobilisation methods

Outline of rigid and semi-rigid internal fixation.

Fractures of the condyle - aetiology, classification, clinical features, principles of management.

Fractures of the middle third of the face.

Definition of the mid face, applied surgical anatomy, classification, clinical

features and outline of management.

Alveolar fractures - methods of management

Fractures of the Zygomatic complex

Classification, clinical features, indications for treatment, various methods of reduction and fixation.

Complications of fractures - delayed union, non-union and malunion.

14. Salivary gland diseases -

Diagnosis of salivary gland diseases'

Sialography, contrast media, procedure.

Infections of the salivary glands

Sialolithiasis - Sub mandibular duct and gland and parotid duct.

Clinical features, management.

Salivary fistulae

Common tumours of salivary glands like Pleomorphic adenoma including minor salivary glands.

15. Jaw deformities -

Basic forms - Prognathism, Retrognathism and open bite.

Reasons for correction.

Outline of surgical methods carried out on mandible and maxilla.

16. Neurological disorders -

Trigeminal neuralgia - definition, aetiology, clinical features and methods of management including surgical.

Facial paralysis - Aetiology, clinical features.

Nerve injuries - Classification, neurorhaphy etc.

17. Cleft Lip and Palate -

Aetiology of the clefts, incidence, classification, role of dental surgeon in the management of cleft patients. Outline of the closure procedures.

18. Medical Emergencies in dental practice -

Primary care of medical emergencies in dental practice particularly -

(a)Cardio vascular

(b) Respiratory(c) Endocrine

(d)Anaphylactic reaction (e) Epilepsy (f) Epilepsy 19. Emergency drugs & Intra muscular I.V. Injections -

Applied anatomy, Ideal location for giving these injections, techniques etc.

20. Oral Implantology

21. Ethics

LOCAL ANAESTHESIA:

Introduction, concept of L.A., classification of local anaesthetic agents, ideal requirements, mode of action, types of local anaesthesia, complications.

Use of Vaso constrictors in local anaesthetic solution -

Advantages, contra-indications, various vaso constrictors used.

Anaesthesia of the mandible -

Pterygomandibular space - boundaries, contents etc.

Interior Dental Nerve Block - various techniques

Complications

Mental foramen nerve block

Anaesthesia of Maxilla -

Intra - orbital nerve block.

Posterior superior alveolar nerve block

Maxillary nerve block - techniques.

GENERAL ANAESTHESIA -

Concept of general anaesthesia.

Indications of general anaesthesia in dentistry.

Pre-anaesthetic evaluation of the patient.

Pre-anaesthetic medication - advantages, drugs used.

Commonly used anaesthetic agents.

Complication during and after G.A.

I.V. sedation with Diazepam and Medozolam.

Indications, mode of action, technique etc.

Cardiopulmonary resuscitation

Use of oxygen and emergency drugs.

Tracheostomy.

RECOMMENDED BOOKS:

- 1. Impacted teeth; Alling John F & etal.
- 2. Principles of oral and maxillofacial surgery; Vol.1,2 & 3 Peterson LJ & etal.
- 3. Text book of oral and maxillofacial surgery; Srinivasan B.
- 4. Handbook of medical emergencies in the dental office, Malamed SF.
- 5. Killeys Fractures of the mandible; Banks P.
- 6. Killeys fractures of the middle 3rd of the facial skeleton; Banks P.
- 7. The maxillary sinus and its dental implications; McGovanda
- 8. Killey and Kays outline of oral surgery Part-1; Seward GR & etal
- 9. Essentials of safe dentistry for the medically compromised patients; Mc Carthy FM
- 10. Oral & maxillofacial surgery, Vol 2; Laskin DM
- 11. Extraction of teeth; Howe, GL
- 12. Minor Oral Surgery; Howe.GL
- 13. Contemporary oral and maxillofacial surgery; Peterson I.J.& EA
- 14. Oral and maxillofacial infections; Topazian RG & Goldberg MH

13. ORAL MEDICINE AND RADIOLOGY

AIMS:

- (1) To train the students to diagnose the common disorders of Orofacial region by clinical examination and with the help of such investigations as may be required and medical management of oro-facial disorders with drugs and physical agents.
- (2) To train the students about the importance, role, use and techniques of radiographs/digital radiograph and other imaging methods in diagnosis.
- (3) The principles of the clinical and radiographic aspects of Forensic Odontology.

The syllabus in ORAL MEDICINE & RADIOLOGY is divided into two main parts.

(I) Diagnosis, Diagnostic methods and Oral Medicine (II) Oral Radiology. Again the part ONE is subdivided into three sections. (A) Diagnostic methods (B) Diagnosis and differential diagnosis (C) Oral Medicine & Therapeutics.

COURSE CONTENT

- (1) Emphasis should be laid on oral manifestations of systemic diseases and ill-effects of oral sepsis on general health.
- (2) To avoid confusion regarding which lesion and to what extent the student should learn and know, this elaborate syllabus is prepared. As certain lesions come under more than one group, there is repetition.

Part-I ORAL MEDICINE AND DIAGNOSTIC AIDS

SECTION (A) - DIAGNOSTIC METHODS.

- (1) Definition and importance of Diagnosis and various types of diagnosis
- (2) Method of clinical examinations.
- (a) General Physical examination by inspection.
- (b) Oro-facial region by inspection, palpation and other means
- (c) To train the students about the importance, role, use of saliva and techniques of diagnosis of saliva as part of oral disease
- (d) Examination of lesions like swellings, ulcers, erosions, sinus, fistula, growths, pigmented lesions, white and red patches
- (e) Examination of lymph nodes
- (f) Forensic examination Procedures for post-mortem dental examination; maintaining dental records and their use in dental practice and post-mortem identification; jurisprudence and ethics.
- (3) Investigations
- (a) Biopsy and exfoliative cytology
- (b) Hematological, Microbiological and other tests and investigations necessary for diagnosis and prognosis

SECTION (B) - DIAGNOSIS, DIFFERENTIAL DIAGNOSIS

While learning the following chapters, emphasis shall be given only on diagnostic aspects including differential diagnosis

- (1) Teeth: Developmental abnormalities, causes of destruction of teeth and their sequelae and discoloration of teeth
- (2) Diseases of bone and Osteodystrophies: Development disorders: Anomalies, Exostosis and tori, infantile cortical hyperostosis, osteogenisis imperfecta, Marfans syndrome, osteopetrosis. Inflamation Injury, infection and sperad of infection, fascial space infections, osteoradionecrosis. Metabolic disorders Histiocytosis

Endocrine - Acro-megaly and hyperparathyroidism

Miscellaneous - Paget's disease, Mono and polyostotic fibrous dysplasia, Cherubism.

- (3) Temparomandibular joint: Developmental abnormalities of the condyle. Rheumatoid arthritis, Osteoarthritis, Sub-luxation and luxation.
- (4) Common cysts and Tumors:

CYSTS: Cysts of soft tissue: Mucocele and Ranula

Cysts of bone: Odontogenic and nonodontogenic.

TUMORS:

Soft Tissue:

Epithelial: Papilloma, Carcinoma, Melanoma

Connective tissue: Fibroma, Lipoma, Fibrosarcoma

Vascular: Haemangioma, Lymphangioma

Nerve Tissue: Neurofibroma, Traumatic Neuroma, Neurofibromatosis

Salivary Glands: Pleomorphic adenoma, Adenocarcinoma, Warthin's Tumor, Adenoid cystic carcinoma.

Hard Tissue:

Non Odontogenic: Osteoma, Osteosarcoma, Osteoclastoma, Chondroma, Chandrosarcoma, Central giant cell rumor, and Central haemangioma

Odontogenic: Enameloma, Ameloblastoma, Calcifying Epithelial Odontogenic tumor, Adenomatoid Odontogenic tumor, Periapical cemental dysphasia and odontomas

- (5) Periodontal diseases: Gingival hyperplasia, gingivitis, periodontitis, pyogenic granuloma
- (6) Granulomatous diseases: Tuberculosis, Sarcoidosis, Midline lethal granuloma, Crohn's Disease and Histiocytosis X
- (7) Miscellaneous Disorders: Burkitt lymphoma, sturge Weber syndrome, CREST syndrome, renduosler-weber disease

SECTION (C): ORAL MEDICINE AND THERAPEUTICS.

The following chapters shall be studied in detail including the eiology, pathogenesis, clinical features, investigations, differential diagnosis, management and prevention

(1) Infections of oral and paraoral structures:

Bacterial: Streptococcal, tuberculosis, syphillis, vincents, leprosy, actinomycosis, diphtheria and tetanus

Fungal: Candida albicans

Virus: Herpes simplex, herpes zoster, ramsay hunt syndrome, measles, herpangina, mumps, infectious mononucleosis, AIDS and hepatitis-B

(2) Important common mucosal lesions:

White lesions: Chemical burns, leukodema, leukoplakia, fordyce spots, stomatitis nicotina palatinus, white sponge nevus, candidiasis, lichenplanus, discoid lupus erythematosis

Veiculo-bullous lesions: Herpes simplex, herpes zoster, herpangina, bullous lichen planus, pemphigus, cicatricial pemphigoid erythema multiforme.

Ulcers: Acute and chronic ulcers

Pigmented lesions: Exogenous and endogenous

Red lesions: Erythroplakia, stomatitis venenata and medicamentosa, erosive lesions and denture sore mouth.

- (3) Cervico-facial lymphadenopathy
- (4) Facial pain:
 - (i)Organic pain: Pain arising from the diseases of orofacial tissues like teeth, pulp, gingival, periodontal tissue, mucosa, tongue, muscles, blood vessels, lymph tissue, bone, paranasal sinus, salivary glands etc.,
 - (ii) Pain arising due to C.N.S. diseases:
 - (a) Pain due to intracranial and extracranial involvement of cranial nerves. (Multiple sclerosis, cerebrovascular diseases, trotter's syndrome etc.)
 - (b) Neuralgic pain due to unknown causes: Trigeminal neuralgia, glossopharyngeal neuralgia, sphenopalatine ganglion neuralgia, periodic migrainous neuralgia and atypical facial pain
 - (iii) Referred pain: Pain arising from distant tissues like heart, spine etc.,
- (5) Altered sensations: Cacogeusia, halitosis
- (6) Tongue in local and systemic disorders: (Aglossia, ankyloglossia, bifid tongue, fissured tongue, scrotal tongue, macroglossia, microglossia, geographic tongue, median rhomboid glossitis, depapillation of tongue, hairy tongue, atrophic tongue, reactive lymphoid hyperplasia, glossodynia, glossopyrosis, ulcers, white and red patches etc.)
- (7) Oral manifestations of:
 - (i) Metabolic disordeers:
 - (a) Porphyria
 - (b) Haemochromatosis
 - (c) Histocytosis X diseases
 - (ii) Endocrine disorders:
 - (a) Pituitary: Gigantism, acromegaly, hypopitutarism
 - (b) Adrenal cortex: Addison's disease (Hypofuntion) Cushing's syndrome (Hyperfunction)
 - (c) Parathyroid glands: Hyperparathyroidism.
 - (d) Thyroid gland: (Hypothyroidism) Cretinism, myxedema
 - (e) Pancreas: Diabetes
 - (iii) Nutritional deficiency: Vitamins: riboflavin, nicotinic acid, folic acid Vitamin B12, Vitamin C (Scurvy)
 - (iv) Blood disorders:
 - (a) Red blood cell diseases

Defficiency anemias: (Iron deficiency, plummer – vinson syndrome, pernicious anemia) Haemolytic anemias: (Thalassemia, sickle cell anemia, erythroblastosis fetalis) Aplastic anemia Polycythemia

(b) White Blood cell diseases

Neutropenia, cyclic neutropenia, agranulocytosis, infectious mononeucleosis and leukemias

(c) Haemorrhagic disorders:

Thrombocytopenia, purpura, hemophillia, chrismas disease and von willebrand's disease

- (8) Disease of salivary glands:
 - $\label{eq:continuous} \mbox{(i)} Development \ distrubances: Aplasia, at resia \ and \ aberration$
 - (ii) Functional disturbances:Xerostomia, ptyalism
 - (iii) Inflammatory conditions: Nonspecific sialadenitis, mumps, sarcoidosis heerdfort's syndrome (Uveoparotid fever), Necrotising sialometaplasia
 - (iv) Cysts and tumors: Mucocele, ranula, pleomorphic adenoma, mucoepidermoid carcinoma
 - (v) Miscellaneous: Sialolithiasis, sjogren's syndrome, mikuliez's disease and sialosis
- (9) Dermatological diseases with oral manifestations:
 - (a) Ectodermal dysplasia (b) Hyperkerotosis palmarplantaris with periodont0opathy (c) Scleroderma (d) Lichen planus including ginspan's syndrome (e) Luplus erythematosus (f) Pemphigus (g) Erythema multiforme (h) Psoriasis
- (10)Immunological diseases with oral manifestations
 - (a) Leukemia (b) Lymphomas (c) Multiple mycloma (d) AIDS clinical manifestations, opportunistic infections, neoplasms (e) Thrombcytopenia (f) Lupus erythematosus (g) Scleroderma (h) dermatomyositis (I) Submucous fibrosis (j) Rhemtoid arthritis (k) Recurrent oral ulcerations including behcet's syndrome and reiter's syndrome
- (11)Allergy: Local allergic reactions, anaphylaxis, serum sickness (local and systemic allergic manifestations to food drugs and chemicals)
- (12)Foci of oral infection and their ill effects on general health
- (13) Management of dental problems in medically compomised persons:
 - (i)Physiological changes: Puberty, pregnancy and menopause
 - (ii) The patients suffering with cardiac, respiratory, liver, kidney and bleeding disorders, hypertension, diabetes and AIDS. Post-irradiated patients.
- (14)Precancerous lesions and conditions
- (15)Nerve and muscle diseases:

- (i)Nerves: (a) Neuropraxia (b) Neurotemesis (c) Neuritis (d) Facial nerve paralysis including Bell's palsy, Heerfordt's syndrome, Melkerson Rosenthel syndrome and ramsay hunt syndrome (e) Neuroma (f) Neurofibromatosis (g) Frey'syndrome
- (ii) Muscles: (a) Myositis ossificans (b) Myofascial pain dysfunction syndrome (c) Trismus
- (16) Forensic odontology:
 - (a) Medicolegal aspects of orofacial injuries
 - (b) Identification of bite marks
 - (c) Determination of age and sex
 - (d) Identification of cadavers by dental appliances, Restorations and tissue remanants
- (17)Therapeutics: General therapeutic measures drugs commonly used in oral medicine viz., antibiotics, chemotherapeutic agents, anti-inflammatory and analgesic drugs, astringents, mouth washes, styptics, demelucents, local surface anaesthetic, sialogogues, antisialogogues and drugs used in the treatment of malignancy

Part - II BEHAVIOURAL SCIENCES AND ETHICS. Part - III ORAL RADIOLOGY

- (1) Scope of the subject and history of origin
- (2) Physics of radiation: (a) Nature and types of radiations (b) Source of radiations (c) Production of X-rays (d) Properties of X-rays (e) Compton effect (f) Photoelectric effect (g) Radiation measuring units
- (3) Biological effects of radiation
- (4) Radiation safety and protection measures
- (5) Principles of image production
- (6) Radiographic techniques:
 - (i)Intra-Oral: (a) Periapical radiographs (Bisecting and parallel technics) (b) Bite wing radiographs (c) Occlusal radiographs
 - (ii) Extra-oral: (a) Lateral projections of skull and jaw bones and paranasal sinuses (c) Cephalograms (d) Orthopantomograph (e) Projections of temperomandibular joint and condyle of mandible (f) Projections for Zygomatic arches
 - (iii) Specialised techniques: (a) Sialography (b) Xeroradiography (c) Tomography
- (7) Factors in production of good radiographs:
 - (a) K.V.P. and mA.of X-ray machine (b) Filters (c) Collimations (d) Intensifying screens (e) Grids (f) X-ray films (g) Exposure time (h) Techniques (i) Dark room (j) Developer and fixer solutions (k) Film processing
- (8) Radiographic normal anatomical landmarks
- (9) Faculty radiographs and artefacts in radiographs
- (10) Interpretation of radiographs in various abnormalities of teeth, bones and other orofacial tissues
- (11) Principles of radiotherapy of oro-facial malignancies and complications of radiotherapy
- (12) Cantrast radiography and basic knowledge of radio-active isotopes
- (13)Radiography in Forensic Odontoloy Radiographic age estimation and post-mortem radiographic methods

PRACTICALS / CLINICALS:

- 1. Student is trained to arrive at proper diagnosis by following a scientific and systematic proceedure of history taking and examination of the orofacial region. Training is also imparted in management wherever possible. Training also shall be imparted on saliva diagnostic procedures. Training also shall be imparted in various radiographic proceedures and interpretation of radiographs.
- 2. In view of the above each student shall maintain a record of work done, which shall be evaluated for marks at the time of university examination
- 3. The following is the minimum of prescribed work for recording
 - (a) Recording of detailed case histories of interesting cases 10
 - (b) Intra-oral radiographs (Periapical, bitewing, occlusal) 25
 - (c) Saliva diagnostic check as routine procedure

BOOKS RECOMMENDED:

- a) Oral Diagnosis, Oral Medicine & Oral Pathology
- 1. Burkit Oral Medicine J.B. Lippincott Company
- 2. Coleman Principles of Oral Diagnosis Mosby Year Book
- 3. Jones Oral Manifestations of Systemic Diseases W.B. Saunders company
- 4. Mitchell Oral Diagnosis & Oral Medicine
- 5. Kerr Oral Diagnosis
- 6. Miller Oral Diagnosis & Treatment
- 7. Hutchinson clinical Methods
- 8. Oral Pathology Shafers
- 9. Sonis.S.T., Fazio.R.C. and Fang.L Principles and practice of Oral Medicine
- b) Oral Radiology
- 1. White & Goaz Oral Radiology Mosby year Book
- 2. Weahrman Dental Radiology C.V. Mosby Company
- 3. Stafne Oral Roentgenographic Diagnosis W.B.Saunders Co.,

- c) Forensic Odontology
- 1. Derek H.Clark Practical Forensic Odontology Butterworth-Heinemann (1992)
- 2.C Michael Bowers, Gary Bell Manual of Forensic Odontology Forensic Pr (1995)

14. ORTHODONTICS & DENTAL ORTHOPAEDICS

COURSE OBJECTIVE:

Undergraduate programme in Orthodontics is designed to enable the qualifying dental surgeon to diagnose, analyse and treat common orthodontic problems by preventive, interceptive and corrective orthodontic procedures. The following basic instructional procedures will be adapted to achieve the above objectives.

- 1. Introduction, Definition, Historical Background, Aims And Objectives Of Orthodontics And Need For Orthodontics Care.
- 2. Growth And Development: In General
 - a. Definition
 - b. Growth spurts and Differential growth
 - c. Factors influencing growth and Development
 - d. Methods of measuring growth
 - e. Growth theories (Genetic, Sicher's, Scott's, Moss's, Petrovics, Multifactorial)
 - f. Genetic and epigenetic factors in growth
 - g. Cephalocaudal gradient in growth.
- 3. Morphologic Development Of Craniofacial Structures
 - a. Methods of bone growth
 - b. Prenatal growth of craniofacial structures
 - c. Postnatal growth and development of: cranial base, maxilla, mandible, dental arches and occlusion.
- 4. Functional Development Of Dental Arches And Occlusioin
 - a. Factors influencing functional development of dental arches and occlusion.
 - b. Forces of occlusion
 - c. Wolfe's law of transformation of bone
 - d. Trajectories of forces
- 5. Clinical Application Of Growth And Development
- 6. Malocclusion In General
 - a. Concept of normal occlusion
 - b. Definition of malocclusion
 - c. Description of different types of dental, skeletal and functional malocclusion.
- 7. Classification of Malocclusion

Principle, description, advantages and disadvantages of classification of malocclusion by Angle's, Simon's, Lischer's and Ackerman and Proffitt's.

- 8. Normal And Abnormal Function Of Stomatognathic System
- 9. Etiology Of Malocclusion
 - a. Definition, importance, classification, local and general etiological factors.
 - b. Etiology of following different types of malocclusion:
 - 1) Midline diastema
 - 2) Spacing
 - 3) Crowding
 - 4) Cross-Bite: Anterior/Posterior
 - 5) Class III Malocclusion
 - 6) Class II Malocclusion
 - 7) Deep Bite
 - 8) Open bite
- 10. Diagnosis And Diagnostic Aids
 - a. Definition, Importance and classification of diagnostic aids
 - b. Importance of case history and clinical examination in orthodontics
 - c. Study Models: Importance and uses Preparation and preservation of study models
 - d. Importance of intraoral X-rays in orthodontics
 - e. Panoramic radiographs: Principles, Advantages, disad vantages and uses
 - f. Cephalometrics: Its advantages, disadvantages
 - 1. Definition
 - 2. Description and use of cephalostat
 - 3. Description and uses of anatomical landmarks lines and angles used in cephalometric analysis
 - 4. Analysis- Steiner's, Down's, Tweed's, Ricket's-E-line
 - g. Electromyography and its uses in orthodontics
 - h. Wrist X-rays and its importance in othodontics
- 11. General Principles In Orthodontic Treatment Planning Of Dental And Skeletal Malocclusions
- 12. Anchorage In Orthodontics Definition, Classification, Types and Stability Of Anchorage
- 13. Biomechanical Principles In Orthodontic Tooth Movement
 - a. Different types of tooth movements
 - b. Tissue response to orthodontic force application

- c. Age factor in orthodontic tooth movement
- 14. **Preventive Orthodontics**
 - a. Definition
 - b. Different procedures undertaken in preventive orthodontics and their limitations.
- 15. **Interceptive Orthodontics**
 - a. Definition
 - b. Different procedures undertaken in interceptive orthodontics
 - c. Serial extractions: Definition, indications, contra-indication, technique, advantages and disadvantages.
 - d. Role of muscle exercises as an interceptive procedure
- 16. Corrective Orthodontics
 - a. Definition, factors to be considered during treatment planning.
 - b. Model analysis: Pont's, Ashley Howe's, Bolton, Careys, Moyer's Mixed Dentition Analysis
 - c. Methods of gaining space in the arch:- Indications, relative merits and demerits of proximal stripping, arch expansion and extractions
 - d. Extractions in Orthdodontics indications and selection of teeth for extraction.
- 17. Orthodontic Appliances: General
 - a. Requisites for orthodontic appliances
 - b. Classification, indications of Removable and Functional Appliancesc. Methods of force application

 - d. Materials used in construction of various orthodontic appliances uses of stainless steel, technical considerations in curing of acrylic, Principles of welding and soldering, fluxes and antifluxes.
 - e. Preliminary knowledge of acid etching and direct bonding.
- 18.

REMOVABLE ORTHODONTIC APPLIANCES

- Components of removable appliances
- 2) Different types of clasps and their uses
- 3) Different types of labial bows and their uses
- 4) Different types of springs and their uses
- 5) Expansion appliances in orthodontics:
 - Principles
 - ii) Indications for arch expansion
 - iii) Description of expansion appliances and different types of expansion devices and their uses.
 - iv) Rapid maxillary expansion

FIXED ORTHODONTIC APPLIANCES

- 1. Definition, Indications & Contraindications
- Component parts and their uses
- 3. Basic principles of different techniques: Edgewise, Begg's, straight wire.

EXTRAORAL APPLIANCES

- 1. Headgears
- 2. chincup
- 3. reverse pull headgears

MYOFUNCTIONAL APPLIANCES

- 1. Definition and principles
- 2. Muscle exercises and their uses in orthodontics
- 3. Functional appliances:
 - Activator, Oral screens, Frankels function regulator, bionator twin blocks, lip bumper
 - ii) Inclined planes upper and lower
- 18 Orthodontic Management Of Cleft Lip And Palate
- 19. Principles Of Surgical Orthodontics

Brief knowledge of correction of:

- a. Mandibular Prognathism and Retrognathism
- b. Maxillary Prognathism and Retrognathism
- c. Anterior open bite and deep bite
- d. Cross bite
- Principle, Differential Diagnosis & Methods Of Treatment Of: 20.
 - 1. Midline diastema
 - Cross bite
 - 3. Open bite
 - 4. Deep bite
 - 5. Spacing 6. Crowding
 - 7. Class II Division 1, Division 2
 - 8. Class III Malocclusion True and Psuedo Class III

21. Retention And Relapse

Definition, Need for retention, Causes of relapse, Methods of retention, Different types of retention devices, Duration of retention, Theories of retention.

CLINICALS AND PRACTICALS IN ORTHODONTICS

PRACTICAL TRAINING DURING II YEAR B.D.S.

- I. Basic wire bending exercises Gauge 22 or 0.7mm
 - 1. Straightening of wires (4 Nos.)
 - 2. Bending of a equilateral triangle
 - 3. Bending of a rectangle
 - 4. Bending of a square
 - 5. Bending of a circle
 - 6. Bending of U.V.
- II. Construction of Clasps (Both sides upper/lower) Gauge 22 or 0.7mm
 - 1. 3/4 Clasp (C-Clasp)
 - 2. Full Clasp (Jackson's Crib)
 - 3. Adam's Clasp
 - 4. Triangular Clasp
- III. Construction of Springs (on upper both sides) Gauge 24 or 0.5mm
 - 1. Finger Spring
 - 2. Single Cantelever Spring
 - 3. Double Cantelever Spring (Z-Spring)
 - 4. T-Springs on premolars
- IV. Construction of Canine retractors Gauge 23 or 0.6mm
 - 1. U Loop canine retractor

(Both sides on upper & lower)

2. Helical canine retractor

(Both sides on upper & lower)

- 3. Buccal canine retractor:
 - Self supported buccal canine retractor with
 - a) Sleeve 5mm wire or 24 gauge
 - b) Sleeve 19 gauge needle on any one side.
- 4. Palatal canine retractor on upper both sides

Gauge 23 or 0.6mm

V. Labial Bow

Gauge 22 or 0.7mm

One on both upper and lower

CLINICAL TRAINING DURING III YEAR B.D.S.

- NO. EXERCISE
- 01. Making upper Alginate impression
- 02. Making lower Alginate impression
- 03. Study Model preparation
- 04. Model Analysis
 - a. Pont's Analysis
 - b. Ashley Howe's Analysis
 - c. Carey's Analysis
 - d. Bolton's Analysis
 - e. Moyer's Mixed Dentition Analysis

CLINICAL TRAINING DURING FINAL YEAR B.D.S.

- NO. EXERCISE
- 01. Case History taking
- 02. Case discussion
- 03. Discussion on the given topic
- 04. Cephalometric tracings
 - a. Down's Analysis
 - b. Steiner's Analysis
 - c. Tweed's Analysis

PRACTICAL TRAINING DURING FINAL YEAR B.D.S.

- 1. Adam's Clasp on Anterior teeth Gauge 0.7mm
- $2. \ \ Modified \ Adam's \ Clasp \ on \ upper \ arch \ \ Gauge \ 0.7mm$
- 3. High Labial bow with Apron spring on upper arch (Gauge of Labial bow 0.9mm, Apron spring 0.3mm)
- 4. Coffin spring on upper arch Gauge 1mm

Appliance Construction in Acrylic

- 1. Upper & Lower Hawley's Appliance
- 2. Upper Hawley's with Anterior bite plane
- 3. Upper Habit breaking Appliance

- 4. Upper Hawley's with Posterior bite plane with 'Z' Spring
- 5. Construction of Activator
- 6. Lower inclined plane/Catalan's Appliance7. Upper Expansion plate with Expansion Screw

RECOMMENDED AND REFERENCE BOOKS

1. CONTEMPORARY ORTHODONTICS WILLIAM R. PROFFIT 2. ORTHODONTICS FOR DENTAL STUDENTS WHITE and GARDINER

3. HANDBOOK OF ORTHODONTICS **MOYERS GRABER**

4. ORTHODONTICS - PRINCIPLES AND PRACTICE

5. DESIGN, CONSTRUCTION AND USE OF REMOVABLE

6. ORTHODONTIC APPLIANCES C. PHILIP ADAMS

7. CLINICAL ORTHODONTICS: VOL1 & 2 SALZMANN

15. PAEDIATRIC & PREVENTIVE DENTISTRY

THEORY:

- INTRODUCTION TO PEDODONTICS & PREVENTIVE DENTISTRY. 1.
 - Definition, Scope, Objectives and Importance.
- 2. GROWTH & DEVELOPMENT:
 - Importance of study of growth and development in Pedodontics.
 - Prenatal and Postnatal factors in growth & development.
 - Theories of growth & development.
 - Development of maxilla and mandible and related age changes.
- DEVELOPMENT OF OCCLUSION FROM BIRTH THROUGH ADOLESCENCE. 3.
 - Study of variations and abnormalities.
- DENTAL ANATOMY AND HISTOLOGY: 4.
 - Development of teeth and associated structures.
 - Eruption and shedding of teeth.
 - Teething disorders and their management.
 - Chronology of eruption of teeth.
 - Differences between deciduous and permanent teeth.
 - Development of dentition from birth to adolescence.
 - Importance of first permanent molar.
- 5. DENTAL RADIOLOGY RELATED TO PEDODONTICS.
- ORAL SURGICAL PROCEDURES IN CHILDREN. 6.
 - Indications and contraindications of extractions of primary and permanent teeth in children.
 - Knowledge of Local and General Anesthesia.
 - Minor surgical procedures in children.
- 7. DENTAL CARIES:
 - Historical background.
 - Definition, aetiology & pathogenesis.
 - Caries pattern in primary, young permanent and permanent teeth in children.
 - Rampant caries, early childhood caries and extensive caries:
 - Definition, aetiology, Pathogenesis, Clinical features, Complications & Management
 - Role of diet and nutrition in Dental Caries.
 - Dietary modifications & Diet counseling.
 - Caries activity, tests, caries prediction, caries susceptibility & their clinical application.
- GINGIVAL & PERIODONTAL DISEASES IN CHILDREN. 8.
 - Normal gingiva & periodontium in children.
 - Definition, aetiology & Pathogenesis.
 - Prevention & Management of gingival & Periodontal diseases.
- 9. CHILD PSYCHOLOGY:
 - Definition.
 - Theories of child psychology.
 - Psychological development of children with age.
 - Principles of psychological growth & development while managing child patient.
 - Dental fear and its management.
 - Factors affecting child's reaction to dental treatment.

10. BEHAVIOUR MANAGEMENT:

- Definitions.
- Types of behaviour encountered in the dental clinic.
- Non-pharmacological & pharmacological methods of Behaviour Management.
- 11. PEDIATRIC OPERATIVE DENTISTRY:
 - Principles of Pediatric Operative Dentistry.
 - Modifications required for cavity preparation in primary and young permanent teeth.
 - Various Isolation Techniques.
 - Restorations of decayed primary, young permanent and permanent teeth in children using various restorative materials like Glass Ionomer, Composites & Silver Amalgam. Stainless steel, Polycarbonate & Resin Crowns.

12. PEDIATRIC ENDODONTICS

- Principles & Diagnosis.
- Classification of Pulpal Pathology in primary, young permanent & permanent teeth.
- Management of Pulpally involved primary, young permanent & permanent teeth.
 - Pulp capping direct & indirect.
 - Pulpotomy
 - Pulpectomy
 - Apexogenesis
 - Apexification
- Obturation Techniques & material used for primary, young permanent & Permanent teeth in children.

13. TRAUMATIC INJURIES IN CHILDREN:

- Classifications & Importance.
- Sequelae & reaction of teeth to trauma.
- Management of Traumatized teeth.

14. PREVENTIVE & INTERCEPTIVE ORTHODONTICS:

- Definitions.
- Problems encountered during primary and mixed dentition phases & their management.
- Serial extractions.
- Space management.

15. ORAL HABITS IN CHILDREN:

- Definition, Aetiology & Classification.
- Clinical features of digit sucking, tongue thrusting, mouth breathing & various other secondary habits.
- Management of oral habits in children.

16. DENTAL CARE OF CHILDREN WITH SPECIAL NEEDS:

- Definition, Aetiology, Classification, Behavioural and Clinical features & Management of children with:
 - Physically handicapping conditions.
 - Mentally compromising conditions.
 - Medically compromising conditions.
 - Genetic disorders.

17. CONGENITAL ABNORMALITIES IN CHILDREN:

- Definition, Classification, Clinical features & Management.
- 18. DENTAL EMERGENCIES IN CHILDREN & THEIR MANAGEMENT.
- 19. DENTAL MATERIALS USED IN PEDIATRIC DENTISTRY.

20. PREVENTIVE DENTISTRY:

- Definition.
- Principles & Scope.
- Types of prevention.
- Different preventive measures used in Pediatric Dentistry including pit and fissure sealants and caries vaccine.
- 21. DENTAL HEALTH EDUCATION & SCHOOL DENTAL HEALTH PROGRAMMES.

22. FLUORIDES:

- Historical background.
- Systemic & Topical fluorides.
- Mechanism of action.
- Toxicity & Management.
- Defluoridation techniques.

23. CASE HISTORY RECORDING:

- Outline of principles of examination, diagnosis & treatment planning.
- 24. SETTING UP OF PEDODONTIC CLINIC.
- 25. ETHICS.

PRACTICALS:

Following is the recommended clinical quota for under-graduate students in the subject of pediatric & preventive dentistry.

- 1. Restorations Class I & II only: 45
- Preventive measures e.g. Oral Prophylaxis 20.
 Fluoride applications 10
- 4. Extractions 25
- 5. Case History Recording & Treatment Planning 10
- 6. Education & motivation of the patients using disclosing agents. Educating patients about oral hygiene measures like tooth brushing, flossing etc.

BOOKS RECOMMENDED & REFERENCE:

- 1. Pediatric Dentistry (Infancy through Adolescences) Pinkham.
- 2. Kennedy's Pediatric Operative Dentistry Kennedy & Curzon.
- 3. Occlusal guidance in Pediatric Dentistry Stephen H. Wei.
- 4. Clinical Use of Fluorides Stephen H. Wei.

- 5. Pediatric Oral & Maxillofacial Surgery Kaban.
- 6. Pediatric Medical Emergencies P. S. whatt.
- Understanding of Dental Caries Niki Foruk.
 An Atlas of Glass Ionomer cements G. J. Mount.
- 9. Clinical Pedodontics Finn.
- 10. Textbook of Pediatric Dentistry Braham Morris.
- 11. Primary Preventive Dentistry Norman O. Harris.
- 12. Handbook of Clinical Pedodontics Kenneth. D.
- 13. Preventive Dentistry Forrester.
- 14. The Metabolism and Toxicity of Fluoride Garry M. whitford.
- 15. Dentistry for the Child and Adolescence Mc. Donald.
- 16. Pediatric Dentistry Damle S. G.
- 17. Behaviour Management Wright
- 18. Pediatric Dentistry Mathewson.
- 19. Traumatic Injuries andreason.
- 20. Occlusal guidance in Pediatric Dentistry Nakata.
- 21. Pediatric Drug Therapy Tomare
- 22. Contemporary Orhtodontics Profitt..
- 23. Preventive Dentistry Depaola.
- 24. Metabolism & Toxicity of Fluoride whitford. G. M.
- 25. Endodontic Practice Grossman.
- 26. Principles of Endodontics Munford.
- 27. Endodontics Ingle.
- 28. Pathways of Pulp Cohen.
- 29. Management of Traumatized anterior Teeth Hargreaves.

PUBLIC HEALTH DENTISTRY **16**.

GOAL:

To prevent and control oral diseases and promote oral health through organized community efforts

OBJECTIVES:

Knowledge:

At the conclusion of the course the student shall have a knowledge of the basis of public health, preventive dentistry, public health problems in India, Nutrition, Environment and their role in health, basics of dental statistics, epidemiological methods, National oral health policy with emphasis on oral health policy.

Skill and Attitude:

At the conclusion of the course the students shall have require at the skill of identifying health problems affecting the society, conducting health surveys, conducting health education classes and deciding health strategies. Students should develop a positive attitude towards the problems of the society and must take responsibilities in providing health.

Communication abilities:

At the conclusions of the course the student should be able to communicate the needs of the community efficiently, inform the society of all the recent methodologies in preventing oral disease Syllabus:

- 1. Introduction to Dentistry: Definition of Dentistry, History of dentistry, Scope, aims and objectives of Dentistry.
- 2. Public Health:
 - Health & Disease: Concepts, Philosophy, Definition and Characteristics i.
 - Public Health: Definition & Concepts, History of public health ii
 - General Epidemiology: Definition, objectives, methods iii.
 - Concepts, principles, protection, Environmental Health: iv. sources, environmental sanitation of water disposal of waste sanitation, then role in mass disorder
 - Health Education: Definition, concepts, principles, methods, and health education aids \mathbf{v} .
 - vi. Public Health Administration: - Priority, establishment, manpower, private practice management, hospital management.
 - Ethics and Jurisprudence: Professional liabilities, negligence, malpractice, consents, vii. evidence, contracts, and methods of identification in forensic dentistry.
 - viii. Nutrition in oral diseases
 - Behavioral science: Definition of sociology, anthropology and psychology and their in dental ix. practice and community.
 - Health care delivery system: Center and state, oral health policy, primary health care, X. national programmes, health organizations.

Dental Public Health:

- Definition and difference between community and clinical health. 1.
- 2. Epidemiology of dental diseases-dental caries, periodontal diseases, malocclusion, dental fluorosis and oral cancer.
- Survey procedures: Planning, implementation and evaluation, WHO oral health survey 3. methods 1997, indices for dental diseases.

- 4. Delivery of dental care: Dental auxiliaries, operational and non-operational, incremental and comprehensive health care, school dental health.
- 5. Payments of dental care: Methods of payments and dental insurance, government plans
- 6. Preventive Dentistry- definition, Levels, role of individual, community and profession, fluorides in dentistry, plaque control programmes.

Research Methodology and Dental Statistics

- 1. Health Information: Basic knowledge of Computers, MS Office, Window 2000, Statistical Programmes
- 2. Research Methodology: -Definition, types of research, designing a written protocol
- 3. Bio-Statistics: Introduction, collection of data, presentation of data, Measures of Central tendency, measures of dispersion, Tests of significance, Sampling and sampling techniques-types, errors, bias, blind trails and calibration.

Practice Management

- 1. Place and locality
- 2. Premises & layout
- 3. Selection of equipments
- 4. Maintenance of records/accounts/audit.

Dentist Act 1948 with amendment.

Dental Council of India and State Dental Councils

Composition and responsibilities.

Indian Dental Association

Head Office, State, local and branches.

PRACTICALS/CLINICALS/FIELD PROGEAMME IN COMMUNITY DENTISTRY:

These exercises designed to help the student in IV year students:

- 1. Understand the community aspects of dentistry
- 2. To take up leadership role in solving community oral health programme

Exercises:

- a) Collection of statistical data (demographic) on population in India, birth rates, morbidity and mortality, literacy, per capita income
- b) Incidence and prevalence of common oral diseases like dental caries, periodontal disease, oral cancer, fluorosis at national and international levels
- c) Preparation of oral health education material posters, models, slides, lectures, play acting skits etc.
- d) Oral health status assessment of the community using indices and WHO basic oral health survey methods
- e) Exploring and planning setting of private dental clinics in rural, semi urban and urban locations, availment of finances for dental practices-preparing project report.
- f) Visit to primary health center-to acquaint with activities and primary health care delivery
- g) Visit to water purification plant/public health laboratory/ center for treatment of western and sewage water
- h) Visit to schools-to assess the oral health status of school children, emergency treatment and health education including possible preventive care at school (tooth brushing technique demonstration and oral rinse programme etc.)
- i) Visit to institution for the care of handicapped, physically, mentally, or medically compromised patients
- j) Preventive dentistry: in the department application of pit and fissure sealants, fluoride gel application procedure, A. R. T., Comprehensive health for 5 pts at least 2 patients

The colleges are encouraged to involve in the N.S.S. programme for college students for carrying out social work in rural areas

SUGGESTED INTERNSHIP PROGRAMME IN COMMUNITY DENTISTRY:

I. AT THE COLLEGE:

Students are posted to the department to get training in dental practice management.

- (a) Total oral health care approach- in order to prepare the new graduates in their approach to diagnosis, treatment planning, cost of treatment, prevention of treatment on schedule, recall maintenance of records etc. at least 10 patients (both children and adults of all types posting for at least one month).
- (b) The practice of chair side preventive dentistry including oral health education
- II. AT THE COMMUNITY ORAL HEALTH CARE CENTRE (ADOPTED BY THE DENTAL COLLEGE IN RURAL AREAS)

Graduates posted for at least on month to familiarize in:

- (a) Survey methods, analysis and presentation of oral health assessment of school children and community independently using WHO basic oral health survey methods.
- (b) Participation in rural oral health education programmes
- (c) Stay in the village to understand the problems and life in rural areas
- III. DESIRABLE: Learning use of computers-at least basic programme.

Examination Pattern

I. Index: Case History

- b) Oral hygiene indices simplified- Green and Vermilion
- c) Silness and Loe index for Plaque
- d) Loe and Silness index for gingival
- CPI e)
- DMF: T and S, df:t and s
- g) Deans fluoride index
- II. Health Education
 - Make one Audio visual aid
 - 2. Make a health talk
- Ш Practical work

 - Pit and fissure sealant
 Topical fluoride application

BOOKS RECOMMENDED & REFERENCE:

- Dentistry Dental Practice and Community by David F. Striffler and Brain A. Burt, Edn. -1983, W. B. Saunders Company
- 2. Principles of Dental Public Health by James Morse Dunning, IVth Edition, 1986, Harward University Press.
- Dental Public Health and Community Dentistry Ed by Anthony Jong Publication by The C. V. 3 Mosby Company 1981
- 4. Community Oral Health-A system approach by Patricia P. Cormier and Joyce I. Levy published by Appleton-Century-Crofts/New York, 1981
- 5. Community Dentistry-A problem oriented approach by P. C. Dental Hand book series Vol.8 by Stephen L. Silverman and Ames F. Tryon, Series editor-Alvin F. Gardner, PSG Publishing company Inc. Littleton Massachuseltts, 1980.
- 6. Dental Public Health- An Introduction to Community Dentistry. Edition by Geoffrey L. Slack and Brain Burt, Published by John Wrigth and sons Bristol, 1980
- 7. Oral Health Surveys- Basic Methods, 4th edition, 1997, published by W. H. O. Geneva available at the regional office New Delhi.
- 8. Preventive Medicine and Hygiene-By Maxcy and Rosenau, published by Appleton Century Crofts,
- 9. Preventive Dentistry-by J. O. Forrest published by John Wright and sons Bristoli, 1980.
- 10. Preventive Dentistry by Murray, 1997.
- 11. Text Book of Preventive and Social Medicine by Park and park, 14th edition.
- Community Dentistry by Dr. Soben Peter. 12.
- 13. Introduction to Bio-statistics by B. K. Mahajan
- 14. Research methodology and Bio-statistics by
- 15. Introduction to Statistical Methods by Grewal

17. PERIODONTOLOGY

OBJECTIVES:

The student shall acquire the skill to perform dental scaling ,diagnostic tests of periodontal diseases; to use the instruments for periodontal therapy and maintenance of the same.

The student shall develop attitude to impart the preventive measures namely, the prevention of periodontal diseases and prevention of the progress of the disease. The student shall also develop an attitude to perform the treatment with full aseptic precautions; shall develop an attitude to prevent iatrogenic diseases; to conserve the tooth to the maximum possible time by maintaining periodontal health and to refer the patients who require specialist's care.

- 1. Introduction: Definition of Periodontology, Periodontics, Periodontia, Brief historical background, Scope of Periodontics
- 2. Development of perio-dontal tissues, micro-structural anatomy and biology of periodontal tissues in detail Gingiva. Junctional epithelium in detail, Epithelial-Mesenchymal interaction, Periodontal, ligament Cementum, Alveolar bone.
- 3 Defensive mechanisms in the oral cavity: Role of-Epithelium, Gingival fluid, Saliva and other defensive mechanisms in the oral environment.
- 4. Age changes in periodontal structures and their significance in Geriatric dentistry
- 5. Classification of periodontal diseases

Age changes in teeth and periodontal structures and their 1 association with periodontal diseases

1

Need for classification, Scientific basis of classification Classification of gingival and periodontal diseases as described in World Workshop1989 Gingivitis:

associated, ANUG, steroid hormone influenced. Medication influenced, Desquamative gingivitis, other forms of gingivitis as in nutritional deficiency, bacterial and viral infections etc.

Periodontitis:

Adult periodontitis, Rapidly progressive periodontitis A&B, Juvenile periodontitis(localized, generalized, and post-juvenile), Prepubertal periodontitis, Refractory periodontitis

6. Gingival diseases

Localized and generalized gingivitis, Papillary, marginal and 6 diffuse gingivitis

Etiology, pathogenesis, clinical signs, symptoms and management of

- i) Plaque associated gingivitis
- ii) Systemically aggravated gingivitis(sex hormones, drugs and systemic diseases)
- iii) ANUG
- iv) Desquamative gingivitis-Gingivitis associated with lichen planus, pemphigoid, pemphigus, and other vesiculobullous lesions
- v) Allergic gingivitis
- vi) Infective gingivitis-Herpetic, bacterial and candidial
- vii) Pericoronitis
- viii) Gingival enlargement (classification and differential diagnosis)
- 7 Epidemiology of periodontal diseases

Extension of

gingiva

Pocket

Etiology

inflammation from

8.

9

10.

- Definition of index, incidence, prevalence, epidemiology, endemic, epidemic, and pandemic
- Classification of indices(Irreversible and reversible)
- Deficiencies of earlier indices used in Periodontics
- Detailed understanding of Silness &Loe Plaque Index ,Loe&Silness Gingival Index, CPITN &CPI.
- Prevalence of periodontal diseases in India and other countries.
- Public health significance(All these topics are covered at length under community dentistry. Hence, the topics may be discussed briefly. However, questions may be asked from the topics for examination

Mechanism of spread of inflammation from gingival area to 1 deeper periodontal structures

Factors that modify the spread

Definition, signs and symptoms, classification, pathogenesis, histopathology, root surface changes and contents of the pocket

5

- Dental Plaque (Biofilm)

- Definition, New concept of biofilm

- Types, composition, bacterial colonization, growth, maturation & disclosing agents
- Role of dental plaque in periodontal diseases
- Plaque microorganisms in detail and bacteria associated with periodontal diseases
- Plaque retentive factors
- Materia alba
- Food debris
- Calculus
- Definition
- Denintion
- Types, composition, attachment, theories of formation
- Role of calculus in disease

Food Impaction

- Definition
- Types, Etiology
- Hirschfelds' classification
- Signs ,symptoms &sequelae of treatment

Trauma from occlusion

- Definition, Types
- Histopathological changes
- Role in periodontal disease
- Measures of management in brief

Habits

- Their periodontal significance
- Bruxism ¶functional habits, tongue thrusting ,lip biting, occupational habits

IATROGENIC FACTORS

Conservative Dentistry

- Restorations
- Contact point, marginal ridge, surface roughness, overhanging restorations, interface between restoration and teeth

Prosthodontics

- Interrelationship
- Bridges and other prosthesis, pontics(types) ,surface contour, relationships of margins to the periodontium, Gingival protection theory, muscle action theory& theory of access to oral hygiene.

Orthodontics

- Interrelationship, removable appliances &fixed appliances
- Retention of plaque, bacterial changes

Systemic diseases

- Diabetes, sex hormones, nutrition(Vit.C &proteins)
- AIDS & periodontium
- Hemorrhagic diseases, Leukemia, clotting factor disorders, PMN disorders
- 11. Risk factors12. Host response

Periodontitis

13.

14.

15.

17.

- Definition. Risk factors for periodontal diseases
- periodontal 3

5

- Mechanism of initiation and progression of periodontal diseases
- Basic concepts about cells, Mast cells, neutrophils, macrophages, lymphocytes, immunoglobulins, complement system, immune mechanisms & cytokines in brief
- Stages in gingivitis-Initial, early, established & advanced
- Periodontal disease activity, continuous paradigm, random burst & asynchronous multiple burst hypothesis
- Etiology ,histopathology, clinical signs & symptoms, diagnosis and treatment of adult periodontitis
- Periodontal abscess; definition, classification, pathogenesis, differential diagnosis and treatment
- Furcation involvement, Glickmans' classification, prognosis and management
- Rapidly progressive periodontitis
- Juvenile periodontitis: Localized and generalized
- Post-juvenile periodontitis
- Periodontitis associated with systemic diseases
- Refractory periodontitis
- Routine procedures, methods of probing, types of 2 probes,(According to case history)
- Halitosis: Etiology and treatment. Mention advanced diagnostic aids and their role in brief.
- Definition, types, purpose and factors to be taken into 1 consideration
- 16. Treatment plan

Prognosis

Periodontal therapy

Diagnosis

- Factors to be considered
- A. General principles of periodontal therapy. Phase I,II, III, IV therapy.
 - Definition of periodontal regeneration, repair, new attachment and reattachment.
- B. Plaque control
- Mechanical tooth brushes, interdental cleaning aids, dentifrices
- i. Chemical; classification and mechanism of action of each & pocket irrigation
- 18. Pocket eradication procedures
- Scaling and root planing:
- Indications
- Aims & objectives
- Healing following root planning
- Hand instruments, sonic, ultrasonic &piezo-electric scalers
- Curettage &present concepts
- Definition
- Indications
- Aims & objectives
- Procedures & healing response
- Flap surgery
- Definition
- Types of flaps, Design of flaps, papilla preservation

		 Indications & contraindications Armamentarium Surgical procedure & healing 	
		response	
9.	Osseous Surgery	Osseous defects in periodontal disease	2
		- Definition	
		- Classification	
		- Surgery: resective, additive osseous surgery (osseous grafts with classification of grafts)	
		- Healing responses	
		- Other regenerative procedures; root conditioning	
20		- Guided tissue regeneration	_
20.	Mucogingival surgery	Definition	3
	&periodontal plastic surgeries	Mucogingival problems: etiology, classification of gingival recession (P.D.Miller Jr. and Sullivan and Atkins)	
		Indications & objectives Gingival extension procedures: lateral pedicle graft,	
		Gingival extension procedures: lateral pedicle graft, frenectomy, frenotomy	
		Crown lengthening procedures	
		Periodontal microsurgery in brief	
21.	Splints	- Periodontal splints	1
	1	- Purpose & classification	
		- Principles of splinting	
22.	Hypersensitivity	Causes, Theories & management	1
23.	Implants	Definition, types, scope &biomaterials used.	1
		Periodontal considerations: such as implant-bone interface,	
		implant-gingiva interface, implant failure, peri-implantitis &	
0.4		management	
24.	Maintenance phase	- Aims, objectives, and principles	1
	(SPT)	- Importance	
		- Procedures Maintanana of implants	
25.	Pharmaco-therapy	Maintenance of implantsPeriodontal dressings	2
20.	Tharmaco-therapy	- Antibiotics & anti-inflammatory drugs	4
		- Local drug delivery systems	
26.	Periodontal management	Topics concerning periodontal management of medically	1
	of medically	compromised patients	
	compromised patients		
27.	Inter-disciplinary care	- Pulpo-periodontal involvement	1
		- Routes of spread of infection	
		- Simons' classification	
		- Management	
28.	Systemic effects of periodontal diseases in brief	Cardiovascular diseases, Low birth weight babies etc.	1
29.	Infection control protocol	Sterilization and various aseptic procedures	1
30.	Ethics	Stermization and various ascente procedures	1

TUTORIALS DURING CLINICAL POSTING;

- 1. Infection control
- 2. Periodontal instruments
- 3. Chair position and principles of instrumentation
- 4. Maintenance of instruments (sharpening)
- 5. Ultrasonic, Piezoelectric and sonic scaling demonstration of technique
- 6. Diagnosis of periodontal disease and determination of prognosis
- 7. Radiographic interpretation and lab investigations
- 8. Motivation of patients- oral hygiene instructions

Students should be able to record a detailed periodontal case history, determine diagnosis, prognosis and plan treatment. Student should perform scaling, root planning local drug delivery and SPT. Shall be given demonstration of all periodontal surgical procedures.

DEMONSTRATIONS:

- 1. History taking and clinical examination of the patients
- 2. Recording different indices
- 3. Methods of using various scaling and surgical instruments
- 4. Polishing the teeth
- 5. Bacterial smear taking
- 6. Demonstration to patients about different oral hygiene aids

- 7. Surgical procedures- gingivectomy, gingivoplasty, and flap operations
- 8. Follow up procedures, post operative care and supervision

REQUIREMENTS:

- Diagnosis, treatment planning and discussion and total periodontal treatment 25 cases 1.
- Dental scaling, oral hygiene instructions 50 complete cases/ equivalent
- 3 Assistance in periodontal surgery – 5 cases
- A work record should be maintained by all the students and should be submitted at the time 4. of examination after due certification from the head of the department.

Students should have to complete the work prescribed by the concerned department from time to time and submit a certified record for evaluation.

PRESCRIBED BOOK:

1. Glickman's Clinical Periodontology — Carranza

REFERENCE BOOKS

- 1. Essentials of Periodontology and periodontics- Torquil MacPhee
- Contemporary periodontics- Cohen
- 3. Periodontal therapy- Goldman
- 4. Orbans' periodontics- Orban
- 5. Oral Health Survey- W.H.O.
- 6. Preventive Periodontics- Young and Stiffler
- Public Health Dentistry- Slack 7.
- 8. Advanced Periodontal Disease- John Prichard
- 9 Preventive Dentistry- Forrest
- 10. Clinical Periodontology- Jan Lindhe
- 11. Periodontics- Baer & Morris.

PROSTHODONTICS AND CROWN & BRIDGE

Complete Dentures

- Applied Anatomy and Physiology.
 - 1. Introduction
 - Biomechanics of the edentulous state.
 - 3. Residual ridge resorption.
- B. Communicating with the patient
 - 1. Understanding the patients.
 - Mental attitude.
 - Instructing the patient.
- C. Diagnosis and treatment planning for patients-
 - With some teeth remaining.
 With no teeth remaining.

 - a) Systemic status.
 - b) Local factor.
 - The geriatric patient. c)
 - d) Diagnostic procedures.
- D. Articulators- discussion
- E. Improving the patient's denture foundation and ridge relation -an overview.
 - a) Pre-operative examination.
 - b) Initial hard tissue & soft tissue procedure.
 - Secondary hard & soft tissue procedure. c)
 - d) Implant procedure.
 - Congenital deformities. e)
 - Postoperative procedure.
- F Principles of Retention, Support and Stability
- G. Impressions - detail.
 - a) Muscles of facial expression.
 - b) Biologic considerations for maxillary and mandibular impression including anatomy landmark and their interpretation.
 - c) Impression objectives.
 - d) Impression materials.
 - Impression techniques.
 - Maxillary and mandibular impression procedures.
 - Preliminary impressions.
 - ii. Final impressions.
 - Laboratory procedures involved with impression making (Beading & Boxing, and cast preparation).
- Н Record bases and occlusion rims- in detail.
 - a) Materials & techniques.
 - b) Useful guidelines and ideal parameters.
 - c) Recording and transferring bases and occlusal rims.

- I. Biological consideration in jaw relation & jaw movements - craniomandibular relations.
 - Mandibular movements.
 - b) Maxillo -mandibular relation including vertical and horizontal jaw relations.
 - Concept of occlusion- discuss in brief.
- J. Relating the patient to the articulator.
 - a) Face bow types & uses-discuss in brief.
 - b) Face bow transfer procedure discuss in brief.
- K. Recording maxillo mandibular relation.
 - a) Vertical relations.
 - b) Centric relation records.
 - c) Eccentric relation records.d) Lateral relation records.
- L. Tooth selection and arrangement.
 - a) Anterior teeth.
 - b) Posterior teeth.
 - c) Esthetic and functional harmony.
- M. Relating inclination of teeth to concept of occlusion- in brief.
 - a) Neutrocentric concept.
 - b) Balanced occlusal concept.
- N. Trial dentures.
- O. Laboratory procedures.
 - a) Wax contouring.
 - b) Investing of dentures.
 - c) Preparing of mold.
 - d) Preparing & packing acrylic resin.
 - e) Processing of dentures.
 - Recovery of dentures. f)
 - Lab remount procedures.
 - h) Recovering the complete denture from the cast.
 - Finishing and polishing the complete denture. i)
 - Plaster cast for clinical denture remount procedure. j)
- P. Denture insertion.
 - a) Insertion procedures.
 - b) Clinical errors.
 - Correcting occlusal disharmony. c)
 - d) Selective grinding procedures.
- Treating problems with associated denture use discuss in brief (tabulation/flow-chart form). R.
- Treating abused tissues discuss in brief. S.
- Т. Relining and rebasing of dentures- discuss in brief.
- V Immediate complete dentures construction procedure- discuss in brief.
- W. The single complete denture- discuss in brief.
- Overdentures denture- discuss in brief. Χ.
- Y. Dental implants in complete denture - discuss in brief.

Note: It is suggested that the above mentioned topics be dealt with wherever appropriate in the following order so as to cover -

- 1. Definition
- 2. Diagnosis (of the particular situation/patient selection/treatment planning)
- Types / Classification 3.
- 4. Materials
- 5. Methodology – Lab / Clinical
- 6. Advantages & disadvantages
- 7. Indications, contraindications
- 8. Maintenance Phase
- 9. Oral Implantology
- 10. Ethics

2

Removable Flexible Dentures

- 1. Introduction
 - Terminologies and scope
 - Classification.
- 3. Examination, Diagnosis & Treatment planning & evaluation of diagnostic data.
- Components of a removable partial denture. 4.
 - Major connectors,
 - minor connectors,
 - Rest and rest seats.
- 5. Components of a Removable Partial Denture.
 - Direct retainers,
 - Indirect retainers,
 - Tooth replacement.

- 6. Principles of Removable Partial Denture Design.
- 7. Survey and design in brief.
 - > Surveyors.
 - Surveying.
 - Designing.
- 8. Mouth preparation and master cast.
- 9. Impression materials and procedures for removable partial dentures.
- 10. Preliminary jaw relation and esthetic try-in for some anterior replacement teeth.
- 11. Laboratory procedures for framework construction-in brief.
- 12. Fitting the framework in brief.
- 13. Try-in of the partial denture in brief.
- 14. Completion of the partial denture in brief.
- 15. Inserting the Removable Partial Denture in brief.
- 16. Postinsertion observations.
- 17. Temporary Acrylic Partial Dentures.
- 18. Immediate Removable Partial Denture.
- 19. Removable Partial Dentures opposing Complete denture.

Note: It is suggested that the above mentioned topics be dealt with wherever appropriate in the following order so as to cover –

- 1. Definition
- 2. Diagnosis (of the particular situation /patient selection /treatment planning)
- 3. Types / Classification
- 4. Materials
- 5. Methodology Lab / Clinical
- 6. Advantages & disadvantages
- 7. Indications, contraindications
- 8. Maintenance Phase

Fixed Partial Dentures

Topics To Be Covered In Detail -

- 1. Introduction
- 2. Fundamentals of occlusion in brief.
- 3. Articulators in brief.
- 4. Treatment planning for single tooth restorations.
- 5. Treatment planning for the replacement of missing teeth including selection and choice of abutment teeth.
- 6. Fixed partial denture configurations.
- 7. Principles of tooth preparations.
- 8. Preparations for full veneer crowns in detail.
- 9. Preparations for partial veneer crowns in brief.
- 10. Provisional Restorations
- 11. Fluid Control and Soft Tissue Management
- 12. Impressions
- 13. Working Casts and Dies
- 14. Wax Patterns
- 15. Pontics and Edentulous Ridges
- 16. Esthetic Considerations
- 17. Finishing and Cementation

Topics To Be Covered In Brief -

- 1. Solder Joints and Other Connectors
- 2. All Ceramic Restorations
- 3. Metal Ceramic Restorations
- 4. Preparations of intracoronal restorations.
- 5. Preparations for extensively damaged teeth.
- 6. Preparations for periodontally weakened teeth
- 7. The Functionally Generated Path Technique
- 8. Investing and Casting
- 9. Resin Bonded Fixed Partials Denture

Note: It is suggested that the above mentioned topics be dealt with wherever appropriate in the following order so as to cover -

- 1. Definition
- 2. Diagnosis(of the particular situation /patient selection /treatment planning)
- 3. Types / Classification
- 4. Materials
- 5. Methodology Lab / Clinical
- 6. Advantages & disadvantages
- 7. Indications, contraindications
- 8. Maintenance Phase

RECOMMENDED BOOKS:

- 1. Syllabus of Complete denture by Charles M. Heartwell Jr. and Arthur O. Rahn.
- Boucher's "Prosthodontic treatment for edentulous patients"
 Essentials of complete denture prosthodontics by Sheldon Winkler.
- 4. Maxillofacial prosthetics by Willam R.Laney.
- 5. McCraken's Removable partial prosthodontics
- 6. Removable partial prosthdontics by Ernest L. Miller and Joseph E. Grasso.

19. **AESTHETIC DENTISTRY**

Aesthetic Dentistry is gaining more popularity since last decade. It is better that undergraduate students should understand the philosophy and scientific knowledge of the esthetic dentistry.

- 1. Introduction and scope of esthetic dentistry
- 2. Anatomy & physiology of smile
- 3. Role of the colour in esthetic dentistry
- 4. Simple procedures (roundening of central incisors to enhance esthetic appearance)
- Bleaching of teeth
- Veneers with various materials
- 7. Prevedntive and interceptive esthetics
- 8. Ceramics
- Simple gingival contouring to enhance the appearance
- 10. Simple clinical procedures for BDS students

Recommended books:

- 1. Esthetic guidelines for restorative dentistry; Scharer & others
- 2. Esthetics of anterior fixed prosthodontics; Chiche (GJ) & Pinault (Alain)
- Esthetic & the treatment of facial form, Vol 28; Mc Namara (JA)

20. FORENSIC ODONTOLOGY (30 hrs of instruction)

Forensic is derived from the Latin word forum, which means 'court of law.' Odontology literally implies 'the study of teeth.' Forensic odontology, therefore, has been defined by the Fédération Dentaire International (FDI) as "that branch of dentistry which, in the interest of justice, deals with the proper handling and examination of dental evidence, and with the proper evaluation and presentation of dental findings.'

Objectives of the undergraduate curriculum

At the end of the programme, the dental graduate should:

- 1. Have sound knowledge of the theoretical and practical aspects of forensic odontology.
- 2. Have an awareness of ethical obligations and legal responsibilities in routine practice and forensic
- 3. Be competent to recognise forensic cases with dental applications when consulted by the police, forensic pathologists, lawyers and associated professionals.
- 4. Be competent in proper collection of dental evidence related to cases of identification, ethnic and sex differentiation, age estimation and bite marks.
- 5. Be able to assist in analysis, evaluation, and presentation of dental facts within the realm of law.

Curriculum for forensic odontology

- 1. Introduction to forensic dentistry
 - Definition and history
 - Recent developments and future trends
- 2. Overview of forensic medicine and toxicology
 - Cause of death and postmortem changes
 - Toxicological manifestations in teeth and oral tissues
- 3. Dental identification
 - Definition
 - Basis for dental identification
 - Postmortem procedures
 - Dental record compilation and interpretation
 - Comparison of data, and principles of report writing
 - Identification in disasters and handling incinerated remains
 - Postmortem changes to oral structures
- 4. Maintaining dental records
 - Basic aspects of good record-keeping
 - Different types of dental records
 - Dental charts
 - Dental radiographs
 - Study casts
 - Denture marking
 - Photographs

- Dental notations
- Relevance of dental records in forensic investigation

5. Age estimation

- Age estimation in children and adolescents
 - Advantages of tooth calcification over 'eruption' in estimating age
 - Radiographic methods of Schour & Massler, Demirjian et al
- Age estimation in adults
 - Histological methods Gustafson's six variables and Johanson's modification, Bang & Ramm's dentine translucency
 - Radiographic method of Kvaal et al
- Principles of report writing
- 6. Sex differentiation
 - Sexual dimorphism in tooth dimensions (Odontometrics)
- 7. Ethnic variations ('racial' differences) in tooth morphology
 - Description of human population groups
 - Genetic and environmental influences on tooth morphology
 - Description of metric and non-metric dental features used in ethnic differentiation

8. Bite mark procedures

- Definition and classification
- Basis for bite mark investigation
- Bite mark appearance
- Macroscopic and microscopic ageing of bite marks
- Evidence collection from the victim and suspect of bite mark
- Analysis and comparison
- Principles of report writing
- Animal bite investigation
- 9. Dental DNA methods
 - Importance of dental DNA evidence in forensic investigations
 - Types of DNA and dental DNA isolation procedures
 - DNA analysis in personal identification
 - Gene-linked sex dimorphism
 - Population genetics

10. Jurisprudence and ethics

- Fundamentals of law and the constitution
- Medical legislation and statutes (Dental and Medical Council Acts, etc)
- Basics of civil law (including torts, contracts and consumer protection act)
- Criminal and civil procedure code (including expert witness requirement)
- Assessment and quantification of dental injuries in courts of law
- Medical negligence and liability
- Informed consent and confidentiality
- Rights and duties of doctors and patients
- Medical and dental ethics (as per Dentists' Act)

Theory sessions and practical exercises

Total hours for the course

- Didactic 10-12 hours
- Practical 20-25 hours

Detailed didactic sessions for the above components, either in the form of lectures or as structured student-teacher interactions, is essential. Specialists from multiple disciplines, particularly from legal and forensic sciences, can be encouraged to undertake teaching in their area of expertise.

An interactive, navigable and non-linear (INN) model may also be utilised for education.

Practical exercises (real-life casework and/or simulated cases) must complement didactic sessions to facilitate optimal student understanding of the subject. Mandatory practical training in dental identification methods, dental profiling (ethnic and sex differences, radiographic age estimation), and bite mark procedures, is of paramount importance. In addition, practical exercises/demonstrations in histological age estimation, comparative dental anatomy, DNA methods, medical autopsy, court visits, and other topics may be conducted depending on available expertise, equipment and feasibility.

Approach to teaching forensic odontology

Forensic odontology could be covered in two separate streams. The divisions include a preclinical stream and a clinical stream.

Preclinical stream

- Introduction to forensic odontology
- Sex differences in odontometrics
- Ethnic variations in tooth morphology
- Histological age estimation
- Dental DNA methods

- Bite marks procedures
- Overview of forensic medicine and toxicology

It could prove useful to undertake the preclinical stream in II or III year under Oral Biology/Oral Pathology since these aspects of forensic odontology require grounding in dental morphology, dental histology and basic sciences, which, students would have obtained in I and/or II BDS.

Clinical stream

- Dental identification
- Maintaining dental records
- Radiographic age estimation
- Medical jurisprudence and ethics

It would be suitable to undertake these topics in the IV or V year as part of Oral Medicine and Radiology, since students require reasonable clinical exposure and acumen to interpret dental records, perform dental postmortems and analyse dental radiographs for age estimation.

21. ORAL IMPLANTOLOGY (30 hrs of instruction)

INTRODUCTION TO ORAL IMPLANTOLOGY

Oral Implantology is now emerged as a new branch in dentistry world wide and it has been given a separate status in the universities abroad. In India day to day the practice of treating patients with implants are on rise. In this contest inclusion of this branch into under graduate curriculum has become very essential. The objective behind this is to impart basic knowledge of Oral Implantology to undergraduates and enable them to diagnose, plan the treatment and to carry out the needed pre surgical mouth preparations and treat or refer them to speciality centres. This teaching programme may be divided and carried out by the Dept. of Oral Surgery, Prosthodontics and Periodontics.

- 1. History of implants, their design & surface characteristics and osseo-integration
- 2. Scope of oral & maxillofacial implantology & terminologies
- 3. A brief introduction to various implant systems in practice
- 4. Bone biology, Morphology, Classification of bone and its relevance to implant treatment and bone augmentation materials.
- 5. Soft tissue considerations in implant dentistry
- 6. Diagnosis & treatment planning in implant dentistry
 Case history taking/Examination/Medical evaluation/Orofacial evaluation/ Radiographic evaluation/ Diagnostic evaluation/ Diagnosis and treatment planning/ treatment alternatives/
 Estimation of treatment costs/ patient education and motivation
- 7. Pre surgical preparation of patient
- 8. Implant installation & armamentarium for the Branemark system as a role model
- 9. First stage surgery Mandible Maxilla
- 10. Healing period & second stage surgery
- 11. Management of surgical complications & failures
- 12. General considerations in prosthodontic reconstruction & Bio mechanics
- 13. Prosthodontic components of the Branemark system as a role model
- 14. Impression procedures & Preparation of master cast
- 15. Jaw relation records and construction of suprastructure with special emphasis on occlusion for osseointegrated prosthesis
- 16. Management of prosthodontic complications & failures
- 17. Recall & maintenance phase.

Criteria for success of osseointegrated implant supported prosthesis

SUGGESTED BOOKS FOR READING

1. Contemporary Implant Dentistry - Carl .E. Misch

Mosby 1993 First Edition.

2. Osseointegration and Occlusal Rehabilitation

Hobo S., Ichida. E. and

Garcia L.T.

Quintessence Publishing Company, 1989 First

Edition

22. BEHAVIOURAL SCIENCES (20 hrs of instruction)

<u>GOAL:</u>

The aim of teaching behavioural sciences to undergraduate student is to impart such knowledge & skills that may enable him to apply principles of behaviour –

- a) For all round development of his personality
- b) In various therapeutic situations in dentistry.

The student should be able to develop skills of assessing psychological factors in each patient, explaining stress, learning simple counselling techniques, and improving patients compliance behaviour.

OBJECTIVES:

A) KNOWLEDGE & UNDERSTANDING:

At the end of the course, the student shall be able to:

- 1) Comprehend different aspects of normal behaviour like learning, memory, motivation, personality & intelligence.
- Recognise difference between normal and abnormal behaviour.
- 3) Classify psychiatric disorders in dentistry.
- 4) Recognise clinical manifestations of dental phobia, dental anxiety, facial pain, orofacial manifestations of psychiatric disorders, and behavioural problems in children. Addictive disorders, psychological disorders in various dental departments.
- 5) Should have understanding of stress in dentistry and knowledge of simple counselling techniques.
- 6) Have some background knowledge of interpersonal, managerial and problem solving skills which are an integral part of modern dental practice.
- 7) Have knowledge of social context of dental care.

B) SKILLS

The student shall be able to:

- 1) Interview the patient and understand different methods of communication skills in dentist patient relationship.
- 2) Improve patients compliance behaviour.
- 3) Develop better interpersonal, managerial and problem solving skills.
- 4) Diagnose and manage minor psychological problems while treating dental patients.

The training in Behavioural sciences shall prepare the students to deliver preventive, promotive, curative and rehabilitative services to the care of the patients both in family and community and refer advanced cases to specialised psychiatric hospitals.

Training should be integrated with all the departments of Dentistry, Medicine, Pharmacology, Physiology and Biochemistry.

PSYCHOLOGY:

- Definition & Need of Behavioural Science. Determinants of Behaviour. of 1. Hrs 1 Scope Behavioural Science.
- 2. Sensory process & perception perceptual process- clinical applications.
- 3. <u>Attention</u> - Definition - factors that determine attention. Clinical application.
- 4. Memory - Memory process - Types of memory , Forgetting:
 - Methods to improve memory, Clinical assessment of memory & clinical applications.
- <u>Definition</u> Laws of learning 5.
 - Type of learning. Classical conditioning, operant conditioning, cognitive learning, Insight learning, social learning, observational learning, principles of learning- Clinical application.
- 6. <u>Intelligence-</u> Definition: Nature of intelligence stability of intelligence
 - Determinants of intelligence, clinical application
- 7. <u>Thinking -</u> Definition: Types of thinking, delusions, problem solving
- Motivation Definition: Motive, drive, needs classification of motives 8.
- Emotions Definition differentiation from feelings Role of hypothalamus, Cerebral cortex, 9. adrenal glands ANS. Theories of emotion, Types of emotions.
 - Personality. Assessment of personality: Questionnaires, personality inventory, rating scales, Interview projective techniques - Rorshach ink blot test, RAT, CAT

Social class, social groups - family, types of family, types of marriages, communities and Nations and institutions.

REFERENCE BOOKS:

- 1. General psychology -- S.K. Mangal
- General psychology -- Hans Raj, Bhatia General psychology -- Munn 2.
- 3.
- 4. Behavioural Sciences in Medical practise -- Manju Mehta
- 5. Sciences basic to psychiatry -- Basanth Puri & Peter J Tyrer

ETHICS (20 hrs. of instruction) 23.

There is a definite shift now from the traditional patient and doctor relationship and delivery of dental care. With the advances in science and technology and the increasing needs of the patient, their families and community, there is a concern for the health of the community as a whole. There is a shift to greater accountability to the society. Dental specialists like the other health professionals are confronted with many ethical problems. It is therefore absolutely necessary for each and every one in the health care delivery to prepare themselves to deal with these problems. To accomplish this and

develop human values Council desires that all the trainees undergo ethical sensitization by lectures or discussion on ethical issues, discussion of cases with an important ethical component.

Course content:

Introduction to ethics -

- what is ethics?
- What are values and norms?
- How to form a value system in one's personal and professional life?
- Hippocratic oath.
- Declaration of Helsinki, WHO declaration of Geneva, International code of ethics, DCI Code of ethics.

Ethics of the individual -

The patient as a person.

Right to be respected

Truth and confidentiality

Autonomy of decision

Doctor Patient relationship

Profession Ethics -

Code of conduct

Contract and confidentiality

Charging of fees, fee splitting

Prescription of drugs

Over-investigating the patient

Malpractice and negligence

Research Ethics -

Animal and experimental research/humanness

Human experimentation

Human volunteer research-informed consent

Drug trials

Ethical workshop of cases

Gathering all scientific factors

Gathering all value factors

Identifying areas of value – conflict, setting of priorities

Working our criteria towards decisions

Recommended Reading:

Medical Ethics, Francis C.M., I Ed. 1993, Jaypee Brothers, New Delhi p. 189.

DENTAL COUNCIL OF INDIA Revised Internship Programme, 2011

CURRICULUM OF DENTAL INTERNSHIP PROGRAMME.

- 1. The duration of Internship shall be one year.
- 2. All parts of internship shall be done in a Dental College duly recognized/approved by the Dental Council of India for the purpose of imparting education and training to Dental graduates in the country.
- 3. The Internss shall be paid stipendiary allowance during the period of an Internship not extending beyond a period of one year.
- 4. The internship shall be compulsory and rotating as per the regulations prescribed for the purpose.
- 5. The degree- BDS shall be granted after completion of internship.

Determinants of Curriculum for internship for Dental Graduates:

The curricular contents of internship training shall be based on.

- Dental health needs of the society.
- ii) Financial, material and manpower resources available for the purpose.
- iii) National Dental Health Policy.
- iv) Socio-economic conditions of the people in general.
- v) Existing Dental as also the primary health care concept, for the delivery of health services.
- vi) Task analysis of what graduates in Dentistry in various practice settings, private and government service actually perform.
- vii) Epidemiological studies conducted to find out prevalence of different dental health problems, taking into consideration the magnitude of dental problems, severity of dental problems and social disruption caused by these problems.

Objectives:

- A. To facilitate reinforcement of learning and acquisition of additional knowledge:
 - a) Reinforcement of knowledge.
 - b) Techniques & resources available to the individual and the community; Social and cultural setting.
 - c) Training in a phased manner, from a shared to a full responsibility.
- B. To facilitate the achievement of basic skills: attaining competence Vs. maintaining competence in:
 - i) History taking.
 - ii) Clinical Examination.
 - iii) Performance and interpretation of essential laboratory data.
 - iv) Data analysis and inference.
 - v) Communication skills aimed at imparting hope and optimism in the patient.
 - vi) Attributes for developing working relationship in the Clinical setting and Community team work.
- C To facilitate development of sound attitudes and habits:
 - i) Emphasis on individual and human beings, and not on disease/symptoms.
 - ii) Provision of comprehensive care, rather than fragmentary treatment.
 - iii) Continuing Dental Education and Learning of accepting the responsibility.
- D To facilitate understanding of professional and ethical principles:-
 - Right and dignity of patients.
 - Consultation with other professionals and referral to seniors/institutions.
 - Obligations to peers, colleagues, patients, families and Community.
 - Provision of free professional services in an emergent situation.

E To initiate individual and group action, leading to disease prevention and dental health promotion, at the level of individuals families and the community.

Content (subject matter)

The compulsory rotating paid Dental Internship shall include training in Oral Medicine & Radiology; Oral & Maxillofacial Surgery; Prosthodontics; Periodontics; Conservative Dentistry; Pedodontics; Oral Pathology & Microbiology; Orthodontics and Community Dentistry.

General Guidelines:

- 1. It shall be task-oriented training. The interns should participate in various institutional and field programmes and be given due responsibility to perform the activities in all departments of the Dental Colleges and associated Institutions.
- 2. To facilitate achievement of basic skills and attitudes the following facilities should be provided to all dental graduates:
 - i) History taking, examination, diagnosis, charting and recording treatment plan of cases.
 - ii) Presentation of cases in a group of Seminar.
 - iii) Care and sterilization of instruments used.
 - iv) Performance and interpretation of essential laboratory tests and other relevant investigations.
 - v) Data analysis and inference.
 - vi) Proper use of antibiotics, anti-inflammatory and other drugs, as well as other therapeutic modalities.
 - vii) Education of patients, their relatives and community on all aspects of dental health care while working in the institution as also in the field.
 - viii) Communication aimed at inspiring hope, confidence and optimism.
 - ix) Legal rights of patients and obligations of dental graduate under forensic jurisprudence.

1. Oral Medicine & Radiology:

1.	Standardized examination of patients	25 Cases
2.	Exposure to clinical, pathological laboratory procedures	
	and biopsies.	5 Cases
3.	Effective training in taking of Radiographs:	2 Full mouth
	(Intra-oral) I.O. (Extra oral) E.O.	1
	Cephalogram	1
4.	Effective management of cases in wards	2 Cases

2. Oral and Maxillofacial surgery

A. The Interness during their posting in oral surgery shall perform the following procedures:

1.	Extractions	50
2.	Surgical extractions	2
3.	Impactions	2
4	Simple Intra Maxillary Fixation	1
5	Cysts enucleations	1
6.	Incision and drainage	2
7.	Alveoloplasties, Biopsies & Frenectomies, etc.	3

- B. The Interness shall perform the following on Cancer Patients:
 - 1. Maintain file work.
 - 2. Do extractions for radiotherapy cases.
 - 3. Perform biopsies.
 - 4. Observe varied cases of oral cancers.
- C. The interness shall have 15 days posting in emergency services of a dental/general hospital with extended responsibilities in emergency dental care in the wards. During this period they shall attend to all emergencies under the direct supervision of oral surgeon during any operation:

1. Emergencies.

- (i) Toothache; (ii) trigemminal neuralgia; (iii) Bleeding from mouth due to trauma, post extraction, bleeding disorder or haemophylia; (iv) Airway obstruction due to fracture mandible and maxilla; dislocation of mandible; syncope or vasovagal attacks; ludwig's angina; tooth fracture; post intermaxillary fixation after general Anaesthesia.
- 2. Work in I.C.U. with particular reference to resuscitation procedures.
- 3. Conduct tutorials on medico-legal aspects including reporting on actual cases coming to casualty. They should have visits to law courts.

3. **Prosthodontics**

The dental graduates during their internship posting in Prosthodontics shall make:-

1.	Complete denture (upper & lower)	2
2.	Removable Partial Denture	4
3.	Fixed Partial Denture	1
4.	Planned cast partial denture	1
5.	Miscellaneous-like reline/overdenture/repairs of Maxillofacial	
	Prosthesis	1
6.	Learning use of Face bow and Semi anatomic articulator technique	
7.	Crowns	
8.	Introduction of Implants	1

4. **Periodontics**

A. The dental graduates shall perform the following procedures

1.	Prophylaxis	15 Cases
2.	Flap Operation	2 Cases
3.	Root Planning	1 Case
4.	Currettage	1 Case
5.	Gingivectomy	1 Case
6	Perio-Endo cases	1 Case

B. During their one week posting in the community health centers, the internss shall educate the public in prevention of Periodontal diseases.

5. **Conservative Dentistry**

To facilitate reinforcement of learning and achievement of basic skills, the interns shall perform atleast the following procedures independently or under the guidance of supervisors:

1.	Restoration of extensively mutilated teeth	5 Cases
2.	Inlay and onlay preparations	1 Case
3.	Use of tooth coloured restorative materials	4 Cases
4.	Treatment of discoloured vital and non-vital teeth	1 Case
5.	Management of dento alveolar fracture	1 Case
6.	Management of pulpless, single-rooted teeth without	
	periapical lesion.	4 Cases
7.	Management of acute dento alveolar Infections	2 Cases
8.	Management of pulpless, single-rooted teeth	
	with periapical lesion.	1 Case
9.	Non-surgical management of traumatised teeth during	
	formative period.	

6. **Pedodontics and Preventive Dentistry**

During their posting in Pedodontics the Dental graduates shall perform:

1.	Topical application of fluorides including varnish	5 Cases
2.	Restorative procedures of carious deciduous teeth in	
	children.	10 Cases
3.	Pulpotomy	2 Cases
4.	Pulpectomy	2 Cases
5.	Fabrication and insertion of space maintainers	1 Case

6. 1 Case Oral habit breaking appliances

7. **Oral Pathology and Microbiology**

The interns shall perform the following:

1.	History-recording and clinical examination	5 Cases
2.	Blood, Urine and Sputum examination	5 Cases
3.	Exfoliative Cytology and smears study	2 Cases
4.	Biopsy- Laboratory Procedure & reporting	1 Case

8. **Orthodontics**

- A. The interns shall observe the following procedures during their posting in Orthodontics:
 - Detailed diagnostic procedures for 5 patients 1.
 - 2. Laboratory techniques including wire-bending for removable appliances, soldering and processing of myo-functional appliances.
 - 3. Treatment planning options and decisions.
 - Making of bands, bonding procedures and wire insertions. 4.
 - Use of extra oral anchorage and observation of force values. 5.
 - 6. Retainers.
 - 7. Observe handling of patients with oral habits causing malocclusions.

The dental graduates shall do the following laboratory work:-

Wire bending for removable appliances and space maintainers including weldoing and heat treatment procedure. 2.

Soldering exercises, banding & bonding procedures - 2 Cases

- 5 Cases

Cold-cure and heat-cure acrylisation of simple 3.

Orthodontic appliances - 5 Cases

Public Health Dentistry 9.

- The internss shall conduct health education sessions for individuals and groups on oral health public health nutrition, behavioral sciences, environmental health, preventive dentistry and epidemiology.
- They shall conduct a short term epidemiological survey in the community, or I n 2. the alternate, participate in the planning and methodology.
- 3. They shall arrange effective demonstrations of:
 - Preventive and interceptive procedures for prevalent dental diseases.
 - b) Mouth-rinsing and other oral hygiene demonstrations 5 Cases Tooth brushing techniques 5 Cases c)
- 4. Conduction of oral health education programmes at

School setting 2 Community setting B) 2 Adult education programmes C) Preparation of Health Education materials

Exposure to team concept and National Health Care systems: 6.

- Observation of functioning of health infrastructure. a)
- b) Observation of functioning of health casre team including multipurpose workers male and female, health educators and other workers.
- Observation of atleast one National Health Programme:c)
- Observation of interlinkages of delivery of oral health care with Primary d)

Mobile dental clinics, as and when available, should be provided for this teachings.

10 **Elective Posting**

5.

The Interns shall be posted for 15 days in any of the dental departments of their choice mentioned in the foregoing.

Organisation of content:

The Curriculum during the 4 years of BDS training is subject based with more emphasis on learning practical skills. During one year internship the emphasis will be on competency-based, community oriented training. The practical skills to be mastered by the interns along with the minimum performance level are given under the course content of different departments of Dental Education. The supervisors should seding it that proper facilities are provided in all departments and attached institutions for their performance.

Specification of teaching activities:

Didactic lectures are delivered during the four years training in BDS. These shall be voided during the internship programme. Emphasis shall be on chair-side teaching, small group teaching and discussions tutorials, seminars, ward posting, laboratory posting, field visits and self learning.

Use of Resource Materials:

Overhead projectors, slide projectors, film projectors, charts, diagrams, photographs, posters, specimens, models and other audiovisual aids shall be provided in all the Dental Colleges and attached institutions and field area. If possible, television, video and tapes showing different procedures and techniques to be mastered by the interns should be provided.

Evaluation

1. Formative Evaluation:

Day-to-day assessment of the internss during their internship posting should be done. The objective ius that asll the interns must acquire necessary minimum skills required for carrying out day-to-day professional work competently. This can be achieved by maintaining records and performance data book by all internss. This will not only provide a demonstrable evidence; of the processes of training but more importantly, of the interns own acquisition of competencies as rolated to performance. It shall form a part of formative evaluation and shall also constitute a component of final grading of interns.

2. Summative Evaluation:

It shall be based on the observation of the supervious of different departments and the records and performance data book maintained by the interns. Grading shall be done accordingly.

11. Rural Services

In the rural services, the student will have to participate in-

- 1. Community Health Monitoring programmes and services which include Preventive, Diagnostic and corrective procedures
- 2. To create educational awareness about dental hygiene and diseases.
- 3. Conduction of Oral Health Education Programmes at -
 - (a) School Setting 5
 (b) community Setting 5
 (c) Adult Education Programme 5
- 4. compulsory setup of satellite clinics in remote areas 1
- 5. Lectures to create awareness and education in public forums about the harmful effects of tobacco consumption and the predisposition to oral cancer two Lectures per student.

Period of Postings

1	Oral Medicine & Radiology	_	1 month
2	Oral & Maxillofacial Surgery	_	1 ½ months
3	Prosthodontics	-	1 ½ months
4	Periodontics	_	1 month
5	Conservative Dentistry	_	1 month
6	Pedodontics	_	1 month
7	Oral Pathology and Microbiology	-	15 days

8	Orthodontics	-	1 month
9	Community Dentistry/ Rural Services	-	3 months
10	Elective	-	15 days

[Published in the Gazette of India, Part III, Section 4.]

DENTAL COUNCIL OF INDIA

NOTIFICATION

New Delhi, dated 5th November, 2017.

No.DE-87-2017—In exercise of the powers conferred by clauses (g), (h) and (ha) of subsection (2) of section 20 of the Dentists Act, 1948 (16 of 1948), the Dental Council of India, after consultation with the State Governments as required under clause (g) and (h) of the said Act, and in supersession of the Dental Council of India Revised MDS Course Regulations, 2007 except as respects things done or omitted to be done before such supersession, the Dental Council of India with the approval of the Central Government hereby makes the following regulations, namely:—

PART-I

PRELIMINARY

- **1. Short title and commencement**.— (1) These regulations may be called the Dental Council of India, Master of Dental Surgery Course Regulations, 2017.
 - (2) They shall come into force on the date of their publication in the Official Gazette.
- 2. **Definitions –** In these regulations unless the context otherwise requires:-
 - (a) "Act" means the Dentists Act, 1948 (16 of 1948)
 - (b) "the Council" means the Dental Council of India constituted under section 3 of the Act;
 - (c) "dentistry" includes._
 - (i) the performance of any operation on, and the treatment on any disease, deficiency or lesion of, human teeth or jaws, and the performance of radiographic work in connection with human teeth or jaws or the oral cavity;
 - (ii) the giving of any anesthetic in connection with any such operation or treatment;
 - (iii) the mechanical construction or the renewal of artificial dentures or restorative dental appliances;
 - (iv) the performance of any operation on, or the giving of any treatment, advice or attendance to, any person preparatory to, or for the purpose of, or in connection with, the fitting, inserting, fixing, constructing, repairing or renewing of artificial dentures or restorative dental appliances, and the performance of any such operation and the giving of any such treatment, advice or attendance, as is usually performed or given by dentists;
 - (d) "NEET" means the National Eligibility-cum-Entrance Test conducted by the National Board of Examination for admission to post-graduate courses;
 - (e) "University" means a university established or incorporated by or under a Central Act, a Provincial Act or a State Act, and includes any such institution as may, in consultation with the university concerned, be recognised by the University Grant Commission in accordance with the regulations made in this behalf under this Act.

PART - II

GENERAL CONDITIONS TO BE OBSERVED BY POST GRADUATE TEACHING INSTITUTIONS

- **3. GENERAL CONDITIONS.**_ (1) The institutions recognised by the Central Government and after consultation with the Council shall be eligible for conducting the post-graduate degree or diploma course(s).
 - (2) The maximum number of students for a post-graduate course, for training for the award of post-graduate degree or diploma by the affiliating university, shall be determined by the facilities available in the department in terms of infrastructure, teaching staff and clinical teaching material. However, to start with, a maximum of three post-graduate students, (one Unit) shall be permitted in a speciality department. The annual intake capacity recommended by the Council and approved by the Central Government for the academic year shall be final. No institution shall be permitted to increase more than three seats at a time in its annual intake capacity in a particular speciality in a given academic year. Not more than two units consisting of six seats (including increase of seats) shall be granted to any dental institutions for each speciality.
 - (3) The students undergoing post-graduate courses shall be exposed to the following:-
 - (i) basics of bio-statistics and research methodology;
 - (ii) basics of human behaviour studies;
 - (iii) basics of pharmaco-economics;
 - (iv) introduction to the non-linear mathematics.

4. ETHICS IN DENTISTRY._

There is a definite shift from the traditional patient and doctor relationship and delivery of dental care. With the advances in science and technology and the increasing needs of the patient, their families and community, there is a concern for the health of the community as a whole. There is a shift to greater accountability to the society. Dental specialists like the other health professionals are confronted with many ethical problems. It is therefore absolutely necessary for each and every one in the health care delivery to prepare themselves to deal with these problems. To accomplish this and develop human values, it is desired that all the trainees undergo ethical sensitization by lectures or discussion on ethical issues, discussion of cases with an important ethical component.

5. ELIGIBILITY FOR ADMISSION._

A candidate for admission to the Master in Dental Surgery course, must possess a recognised degree of Bachelor in Dental Surgery awarded by a university or institute in India and registered with the State Dental Council and has obtained provisional or permanent registration and has undergone compulsory rotatory internship of a year in an approved/recognised dental college:

Provided that in the case of a foreign national, the following procedure shall be followed:-

The Council may, on payment of the prescribed fee for registration, grant temporary registration for the duration of the post-graduate training restricted to the dental college/institution to which he or she is admitted for the time being exclusively for post-graduate studies:

Provided further that temporary registration to such foreign national shall be subject to the condition that such person is duly registered as medical practitioner in his/her own country from which he/she has obtained his/her basics dental qualification and that his/her degree is recognized by the corresponding state dental council or concerned authority.

6. SELECTION OF CANDIDATE FOR POST-GRADUATE COURSES.

There shall be a uniform NEET for admission to the post-graduate dental courses in each academic year conducted in the manner, as prescribed by the National Board of Examination or any other authority appointed by the Central Government in this behalf. The overall superintendence, direction and control of the NEET shall vest with the Council.

7. QUALIFYING CRITERIA FOR ADMISSION TO POST-GRADUATE COURSES._ (1) The candidate has to secure the following category-wise minimum percentile in NEET for admission to post-graduate courses held in a particular academic year.

General	50 th Percentile
Person with locomotory disability of	45 th Percentile
lower limbs	
Scheduled Castes, Scheduled Tribes,	40 th Percentile
Other Backward Classes	

Provided that the percentile shall be determined on the basis of highest marks secured in the All-India common merit list in NEET for post-graduate courses:

Provided further, that when sufficient number of candidates in the respective categories fail to secure minimum marks as prescribed in NEET held for any academic year for admission to post-graduate courses, the Central Government in consultation with the Council may, at its discretion lower the minimum marks required for admission to post-graduate courses for candidates belonging to respective categories and marks so lowered by the Central Government shall be applicable for the said academic year only.

The above proviso has been substituted in terms of (1st Amendment) notification published on 15.03.2018 in the Gazette of India and the same is as under:-

Provided further that when the number of qualifying candidates in the respective categories on the basis of the above mentioned percentile are less than three times the number of vacancies, the cut-off percentile will be automatically lowered in such a manner that the number of eligible candidates shall be minimum three times the number of seats in each respective category.

(2) The reservation of seats in dental college/institutions for respective categories shall be as per applicable laws prevailing in States/Union territories. An all India merit list as well as State-wise merit list of the eligible candidates shall be prepared on the basis of the marks obtained in NEET Test and candidates shall be admitted to post-graduate courses from the said merit list only:

The following words has been substituted in terms of (2nd Amendment) notification published on 18.09.2018 in the Gazette of India

Provided that in determining the merit of candidates who are in service of Government/public authority, weightage in the marks may be given by the Government/competent authority as an incentive upto 10% of the marks obtained for each year of service in remote and/or difficult areas remote and/or difficult or rural areas upto the maximum of 30% of the marks obtained in NEET. The remote and difficult areas remote, difficult and rural areas shall be as defined by State Government / competent authority from time to time.

- (3) A candidate who has failed to secure the minimum percentile as prescribed in these regulations, shall not be admitted to any post-graduate courses in any academic year.
- (4) Minimum 5% seats of the annual sanctioned intake capacity shall be filled up by candidates with locomotory disability of lower limbs between 50% to 70%:

Provided that in case any seat in this quota remains unfilled on account of unavailability of candidates with locomotory disability of lower limbs between 50% to 70% then any such unfilled seat shall be filled up by persons with locomotory disability of lower limbs between 40% to 50% - before they are included in the annual sanctioned seats for general category candidates:

Provided further that this entire exercise shall be completed by each dental college/institution as per the statutory time schedule for admissions.

8. COMMENCEMENT OF ACADEMIC SESSION AND CUT-OFF DATE FOR ADMISSION. $_$

- (1) The academic session shall be commenced from 1st of May and the cut-off date for admission, even for stray vacancies, in the Master of Dental Surgery course shall be 31st of May, every year. The universities and other institutions shall start the admission process in such a way that teaching in post-graduate courses starts by 1st May each year for which they shall strictly adhere to the time schedule specified in the Dental Council of India (Establishment of new dental colleges, opening of higher courses of study and increase of admission capacity in existing dental colleges) Regulations, 2006.
- (2) There shall be no admission of students in respect of any academic session beyond the 31st May for post-graduate courses under any circumstances. The universities or institute shall not register any student beyond the said date; in case, any institution which grants admission to any student after the last date specified for the same shall also be liable to face such action including surrender of seats equivalent to the extent of such admission made from its sanctioned intake capacity for the succeeding academic year.
- (3) The Council may direct, that any student identified as having obtained his/her admission after the last date for closure of admission be discharged from the course of study, or any dental qualification granted to such a student shall not be a recognised qualification for the purpose of the Act.
- 9. **COMMON COUNSELING. (1)** There shall be a common counseling for admission to all post-graduate courses (Diploma/MDS) in all dental educational institutions on the basis of merit list of the NEET.
 - (2) The designated authority for counseling for the 50% All India Quota seats of the contributing States, as per the existing scheme for post graduate (Diploma/MDS) courses shall be the Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India. Further Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India shall conduct counseling for all post-graduate (Diploma/MDS) Courses in Dental Educational Institutions of the Central Government, Universities established by an Act of Parliament and the Deemed Universities.
 - (3) The counseling for admission to post-graduate (Diploma/MDS) courses in all dental Educational Institutions in a State/Union Territory, including dental educational institutions established by the State Government, University established by an Act of State/Union Territory Legislature, Trust, Society, Minority Institutions shall be conducted by the State/Union Territory Government.
 - (4) In case, any dispute arises on such common counseling, the matter to the Central Government and its decisions shall be final, in this regard.

- 10. INFORMATION ON ADMISSION AND SCHEDULE OF EXAMINATION. Every dental institution and its affiliating university shall furnish information on admissions in the courses of study, schedule of examinations to the Council, in such form as the Council may specify, within stipulated period from time to time.
- 11. PERIOD OF TRAINING._ (1) The period of training for the award of the MDS course shall be of three years duration for three academic years as full time candidates in an institution including the period of examination:

Provided that the time period required for passing out of the MDS course shall be a maximum of six years from the date of admission in said course:

Provided further that the duration of the post-graduate course for the post-graduate Diploma holders shall be of two years in the respective speciality. The syllabus and curriculum shall be the same as MDS Course in the concerned speciality except that they are not required (i) to undergo study and training in Basic Sciences and (ii) pass the PART-I Examination of MDS Course. However, they have to submit the dissertation work, as part of the post-graduate programme.

(2) During the period, each student shall take part actively in learning and teaching activities design of training, by the institution or the university. The teaching and learning activities in each speciality, shall be as under:-

(a) LECTURES:

There shall be some didactic lectures in the speciality and in the allied fields. The departments shall encourage guest lectures in the required areas and integrated lectures by multi-disciplinary teams on selected topics, to strengthen the training programmes.

(b) JOURNAL REVIEW:

The journal review meetings shall be held at least once a week. All trainees, associate and staff associated with the post-graduate programme are expected to participate actively and enter relevant details in the logbook. The trainee shall make presentations from the allotted journals of selected articles. A model check list for the evaluation of journal review presentation is annexed at Schedule-I of these regulations.

(c) SEMINARS:

The seminars shall be held at least twice a week in each department. All trainees are expected to participate actively and enter relevant details in logbook. A model check list for the evaluation of seminar presentation is annexed at Schedule-II of these regulations.

(d) SYMPOSIUM:

It is recommended to hold symposium on topics covering multiple disciplines.

(e) CLINICAL POSTINGS:

Each trainee shall work in the clinics on regular basis to acquire adequate professional skills and competency in managing various cases, A model check list for evaluation of clinical postings is annexed at Schedule-III of these regulations.

(d) Lectures taken for undergraduates

Scientific Paper / Poster Presentations In State / National Level Conferences / : 1 in a year

: 4 papers/posters during three years of training workshop period

(f) Clinico Pathological Conferences : 2 presentations during

three years of training period

(g) Scientific Publications (optional) : one publication

in any indexed scientific

journal

h) Submission of Synopsis : one synopsis within six

months from the date of commencement of the course

(i) Submission of Dissertation : one dissertation within six

months

(e)

before appearing for the university examination

(j) Submission of Library Dissertation : one dissertation within

eighteen months from

the date of commencement of

the course

- **12. STIPEND.** The post-graduate students shall be paid stipend only for duration of three years of the course, as may be fixed by the Central Government/State Government/Union territory Administration or such authority as the respective government/administration may authorise. Where any dispute arises regarding any such stipend, including, quantum of stipend, it shall be considered and decided by the Central Government/respective State Government/Union territory Administration at its own level and its decision shall be final.
- **MIGRATION:** Under no circumstances, the migration or the transfer of students undergoing post-graduate Degree/Diploma shall not be permitted by the university or the authority. No inter-change of the speciality in the same institution or in any other institution shall be permitted after the date of the commencement of session.

PART-III

14. INFRASTRUCTURE AND FUNCTIONAL REQUIREMENTS:

- (1) **Space**: In addition to the undergraduate functional, facilities, the following physical facilities shall be made available to start a post-graduate training programme, namely:-
 - (a) a minimum of 125 sq ft. area for each dental chair in the clinic. The area of the clinic shall be in accordance with the number of dental chairs required to be placed in the department;
 - (b) each department shall be equipped with a seminar hall, library, sterilization room, (800 to 1000 sq.ft.)
- (2) **Equipment**: Each department shall have adequate number of standard equipments available in the market as approved by the ISI.

The details of equipments specialities / unit wise is annexed as Schedule –VII to these regulations.

- (3) **Library**: (a) There shall be a central library which shall provide the latest editions of books pertaining to the speciality and allied subjects. In additions to this, the departmental library shall be equipped with the latest books in the subjects concerned. In case, the central library is shared with the medical college, there shall be provision for additional space and separate budget for the dental college.
 - (b) In addition to books and journals in the library, internet, CDs, audio-visual facilities should be available.
 - (c) Minimum 15-20 titles of renowned authors, 4-6 international journals of the concerned speciality, alongwith 8-10 volumes of back issues of atleast 3 international journals of the concerned speciality should be available.
 - (d) All the journals of the speciality and allied subjects shall be available out of which 50% should be in print form.

Note: All the existing dental institutions shall comply with these requirements except the land requirement of five acres within a period of *three* years from the date of publication of these regulations in the Official Gazette.

Part - IV

STAFFING PATTERN FOR POST-GRADUATE COURSE

15. TEACHING STAFF:

In a unit, two post-graduate students shall be guided by a Professor and one student by a Reader or an Associate Professor. To strengthen and maintain the standards of post-graduate training, the following unit-wise staffing pattern has been made mandatory, for the starting of a post-graduate course, namely:-

<u>Unit 1 :-</u>

Departments/Specialty	Minimum faculty requirement of 1st Unit in an undergraduate institute having basic infrastructure of 50 admissions			
Departments/Specialty	Professor (HOD)	Readers/ Associate Professors		
Prosthodontics and Crown & Bridge	1	3	4	
Conservative Dentistry and Endodontics	1	3	4	
Periodontology	1	2	2	
Orthodontics & Dentofacial Orthopedics	1	2	2	
Oral & Maxillofacial Surgery	1	2	2	
Oral & Maxillofacial Pathology and Oral Microbiology	1	2	2	
Oral Medicine & Radiology	1	2	2	
Pediatric Dentistry	1	2	2	

DIE II II DEC	4		
Public Health Dentistry	1	2	2

Deportments/Specialty	Minimum faculty requirement of 1 st Unit in an undergraduate institute having basic infrastructure of 100 admissions				
Departments/Specialty	Professor (HOD)	Readers/Associate Professor	Lecturer/Assistant Professors		
Prosthodontics and Crown & Bridge	1	3	6		
Conservative Dentistry and Endodontics	1	3	6		
Periodontology	1	3	3		
Orthodontics & Dentofacial Orthopedics	1	2	3		
Oral & Maxillofacial Surgery	1	3	3		
Oral & Maxillofacial Pathology and Oral Microbiology	1	2	3		
Oral Medicine & Radiology	1	2	3		
Pediatric Dentistry	1	2	3		
Public Health Dentistry	1	2	3		

Unit 2:-

Each department shall have the following additional teaching faculty, over and above the requirement of Unit 1.

Professor	1
Reader/Associate Professor	1
Lecturer/Asst. Professor	2

Note:- The department, which does not have the above staffing pattern, shall not start post-graduate course in that speciality.

16. PART-TIME PROFESSOR._

Part-time professor who can put in at list four hours a day or eighty hours in a month are eligible to enroll only one post-graduate student under them and they shall be entitled to 50% of leave entitled for regular teaching faculty.

17. AGE, EDUCATIONAL QUALIFICATIONS AND TEACHING EXPERIENCE._

(a) HEAD OF THE DEPARTMENT:

A Bachelors Degree in Dental Surgery from an Indian University with Masters in Dental Surgery / Diplomate of National Board recognised by the Government of India on the recommendations of the Council, and with one year teaching

experience in the speciality as Professor, and shall have to acquire minimum points for publications as per the scheme given in the table.

(b) PROFESSOR:

A Bachelors Degree in Dental Surgery from an Indian University with Masters in Dental Surgery / Diplomate of National Board recognised by the Government of India on the recommendations of the Council, and with five years of teaching experience in the speciality as Reader/Associate Professor, and shall have to acquire minimum points for publications as per the scheme given in the table.

(c) READER/ASSOCIATE PROFESSOR:

A Bachelors Degree in Dental Surgery from an Indian University with Masters in Dental Surgery / Diplomate of National Board recognised by the Government of India on the recommendations of the Council, and with four years of teaching experience in the speciality after post-graduation, and shall have to acquire minimum points for publications as per the scheme given in the table.

(d) LECTURER/ASSISTANT PROFESSOR:

A Bachelors Degree in Dental Surgery from an Indian University with Masters in Dental Surgery / Diplomate of National Board recognised by the Government of India on the recommendations of the Council, in the speciality.

Note:

- 1. All the regular teaching faculty shall be full time.
- 2. Teaching experience gained in medical college, where there are no dental courses, shall not be accepted for teaching post-graduate students. Dental faculty with post-graduate qualification in dentistry, shifting from the dental department of a medical college shall have to complete minimum of three years of teaching experience in a dental college or institution before being accepted as post-graduate faculty.
- 3. In exceptional cases, the teaching experience, in Government dental colleges, may be considered for further promotion on the basis of total teaching experience.
- 4. The Reader/Associate Professor in a dental college shall attend teachers training program once in three years.
- 5. The Senior Residents with post-graduate qualification or Diplomate of National Board recognised by the Council, in the speciality having teaching experience in dental colleges may be considered equivalent to Lecturer/Assistant Professor.
- 6. Teaching experience in a private dental institution for less than one year shall not be considered relevant for post-graduate faculty.
- 7. The maximum age limit upto which a person can be appointed or granted extension or re-employed in service against the posts of dental teachers or Dean or Principal, as the case shall be, sixty five years.

Table - 1

Category			Points
Category I:			15
 (1) Journals Indexed to Pubmed – Medline Please see- www.ncbi.nlm.nih.gov/pubmed (2) Journals published by Indian/International Associations approved by Dental Council of India. 	Dental	Speciality	

Category II: (1) Medical / Dental Journals published by Government Health Universities awarding dental degree or Govt. Universities awarding dental degree (2) Original Research/Study approved by I.C.M.R/Similar Govt. Bodies (3) Author of Text / Reference Book concerned to respective specialty (4) PhD. or any other similar additional qualification after MDS	10
Category III: (1) Journals published by Deemed Universities / Dental Institutions / Indian Dental Association (2) Contribution of Chapters in the Text Book	5

Note:-

- 1. For any publication, except original research, first author (principal author) shall be given 100% points and remaining authors (co-authors) shall be given 50% points and upto a maximum of 5 co-authors will be considered.
- 2. For original research, all authors shall be given equal points and upto a maximum of 6 authors shall be considered.
- 3. Maximum of 3 publications shall be considered for allotting points in Category III.
- 4. Publication in tabloids / souvenirs / dental news magazines / abstracts of conference proceedings / letter of acceptance shall not be considered for allotment of points.

Total Score Required:

For Head of Department:

Professor:

Reader/Associate Professor:

40 marks
30 marks
20 marks

IMPORTANT:

- 1. A post-graduate teacher would be re-evaluated every three years and shall have at least an additional 15 points in their score.
- 2. A **Journal Review Expert Committee** may be formed which shall enlist all the available international and Indian dental journals in various categories. The list would be displayed on the Council's website. The Committee shall also be responsible for making annual review of the list of journals and shall continuously monitor the standard of publications in various journals and the categories of publications may be upgraded / downgraded, if the standard is not maintained by the journal. In case of any dispute, the recommendation of the Expert Committee shall be reviewed by the Executive Committee and decision of the Executive Committee would be final.

PART – V EXAMINATIONS

18. **EXAMINATIONS.**_

(a) ELIGIBILITY:

The following requirements shall be fulfilled by the candidate to become eligible for the final examination.

- (i) Attendance: Every candidate shall secure (80% attendance during each academic year).
- (ii) Progress and conduct: Every candidate shall participate in seminars, journal review meetings, symposia, conferences, case presentations, clinics and didactic lectures during each year organised by the concerned department.
- (iii) Work diary and log book: Every candidate shall maintain a work diary and log book as per Annexure-I appended to these regulations for recording his or her

participation in the training programmes conducted by the department. The work diary and log book shall be verified and certified by the Head of the Department of the institution. The certification of satisfactory progress is based on the work diary and log book.

(b) UNIVERSITY EXAMINATION._

The university examination shall consist of theory, practical and clinical examination and viva-voce and Pedagogy

(i) Theory:

Part-I: Shall consist of one paper

There shall be a theory examination in the Basic Sciences at the end of 1st year of course. The question papers shall be set and evaluated by the concerned Department/Specialty. The candidates shall have to secure a minimum of 50% in the Basic Sciences and shall have to pass the **Part-I** examination at least six months prior to the final (Part-II) examination.

Part-II: Shall consist of three papers, namely:-

- (ii) Practical and Clinical Examination;
- (iii) Viva-voce; and
- (iv) Pedagogy.

A candidate who wishes to study in a second speciality, shall have to undergo the full course of three years duration in that speciality.

(c) DISSERTATION:

Every candidate appearing for the post-graduate degree examination shall at least six months prior to the examinations, submit with his form for examination, four typewritten copies of the dissertation undertaken by the candidate, prepared under the direction and guidance of his/her guide. The dissertation so submitted shall be referred to the examiners for their examination and acceptance of it shall be a condition precedent to allow the candidate to appear for the written part of the examination:

Provided that a candidate whose dissertation has been accepted by the examiner, but declared failed at the examination, shall be permitted to re-appear at the subsequent examination without a new dissertation:

Provided further that if the dissertation is rejected by the examiner, the examiner shall assign reasons therefor with suggestions for its improvement to the candidate and such candidate shall re-submit his/ her dissertation to the examiner who shall accept it before appearing in the examination.

(d) CLINICAL/PRACTICAL EXAMINATION:

Clinical/practical examination is designed to test the clinical skill, performance and competence of the candidate in skills such as communication, clinical examination, medical/dental procedures or prescription, exercise prescription, latest techniques, evaluation and interpretation of results so as to undertake independent work as a specialist. The affiliating university shall ensure that the candidate has been given ample opportunity to perform various clinical procedures.

The practical/clinical examination in all the specialities shall be conducted for six candidates in two days:

Provided that practical/clinical examination may be extended for one day, if it is not complete in two days.

(e) VIVA-VOCE EXAMINATION:

Viva voce examination aims at assessing the depth of knowledge, logical reasoning, confidence and communication skill of the students.

(f) SCHEME OF EXAMINATION:

Theory: Part-I: Basic Sciences Paper - **100 Marks**

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each

Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS course. Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows:

Part-l :

Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics, Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology, Applied pharmacology, Research Methodology and bio statistics,. Applied Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II

Paper-I : Removable Prosthodontics and Implant supported prosthesis

(Implantology), Geriatric dentistry and Cranio facial Prosthodontics

Paper-II: Fixed Prosthodontics, occlusion, TMJ and esthetics.

Paper-III : Essays

*The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

(g) DISTRIBUTION OF MARKS:

Theory : (Total 400 Marks)

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

- (2) Part II (3 papers of 100 Marks):-
- (i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (iii) Paper III: 2 out of 3 essay questions (50 x 2 = 100 Marks)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy : 100 Marks

19. EXAMINERS:

Part I: There shall be one internal and one external examiner for three students appointed by the affiliating university for evaluating the answer scripts of the same speciality. However, the number of examiner/s may be increased with the corresponding increase in number of students.

<u>Part II:</u> There shall be four examiners in each subject. Out of them, two (50%) shall be external examiners and two (50%) shall be internal examiners. Both external examiners shall be from a university other than the affiliating university and one examiner shall be from a university of different State.

20. QUALIFICATION AND EXPERIENCE FOR EXAMINERS:

The qualification and experience for appointment of an examiner shall be as under:-

- (i) shall possess qualification and experience of a Professor in a post-graduate degree programme;
- (ii) a person who is not a regular post-graduate teacher in the subject shall not be appointed as an examiner;
- (iii) the internal examiner in a subject shall not accept external examinership in a college for the same academic year;
- (iv) no person shall be appointed as an external examiner for the same institution for more than two consecutive years. However, if there is a break of one year, the person can be re-appointed.

21. EXAMINATION CENTRE:

- (1) In the event of university exam being conducted in the same city or town having more than one post-graduate institution under the same university, one central examination centre shall be fixed by the university and the students from all the institutions of the city shall take the examination in that center: Provided that the clinical and viva-voice shall be conducted at their institute.
- (2) Rotation of the institutions as center of examination shall be as per direction of the university.

22. VALUATION OF ANSWER BOOKS:

Part-I: Answer book/s shall be evaluated by the internal and external examiner/s

Part-II: Answer books shall be evaluated by four examiners, two internal and two external and the average marks shall be computed.

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23. CRITERIA FOR PASS CERTIFICATE:

To pass the university examination, a candidate shall secure in both theory examination and in practical/clinical including viva voce independently with an aggregate of 50% of total marks allotted (50 out of 100 marks in Part I examination and 150 marks out of 300 in Part II examination in theory and 150 out of 300, clinical plus viva voce together). A candidate securing marks below 50% as mentioned above shall be declared to have failed in the examination.

A candidate who is declared successful in the examination shall be granted a Degree of Master of Dental Surgery in the respective speciality.

PART – VI SYLLABUS

The syllabus for post-graduate course includes both Applied Basic Sciences and subjects of concerned specialty. The syllabus in Applied Basic Sciences shall vary according to the particular speciality, similarly the candidates shall also acquire adequate knowledge in other subjects related to their respective speciality.

24. SYLLABUS DISTRIBUTION IN VARIOUS SPECIALITIES:

(i) PROSTHODONTICS AND CROWN & BRIDGE

Part-I

Paper-I: Applied Basic Sciences: Applied anatomy, embryology, growth

and development Genetics, Immunology, anthropology, Physiology, nutrition and Biochemistry, Pathology and Microbiology, virology, Applied pharmacology, Research Methodology and bio statistics,. Applied Dental anatomy and histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental

materials.

Part-II

Paper-I : Removable Prosthodontics and Implant supported

prosthosis(Implantology), Geriatric dentistry and Cranio facial

Prosthodontics

Paper-II : Fixed Prosthodontics, occlusion, TMJ and esthetics.

Paper-III : Descriptive and analysing type question

(ii) PERIODONTOLOGY

Part- I

Paper-I: Applied Basic Sciences: Applied Anatomy, Physiology, and

Biochemistry, Pathology, Microbiology, Pharmacology, Research

Methodology and Biostatistics.

Part-II

Paper I: Normal Periodontal structure, Etiology and Pathogenesis of

Periodontal diseases, epidemiology as related to Periodontics

Paper II : Periodontal diagnosis, therapy and Oral implantology

Paper III : Descriptive and analysing type question

(iii) ORAL & MAXILLOFACIAL SURGERY

Part-I

Paper-I: Applied Basic Sciences: Applied Anatomy, Physiology, &

Biochemistry, Pathology, Microbiology, Pharmacology, Research

Methodology and Biostatistics.

Part- II:

Paper-I : Minor Oral Surgery and Trauma

Paper-II : Maxillo-facial Surgery

Paper-III : Descriptive and analysing type question

(iv) CONSERVATIVE DENTISTRY AND ENDODONTICS

Part-I

Paper-I: Applied Basic Sciences: Applied Anatomy, Physiology, Pathology

including Oral Microbiology, Pharmacology, Biostatistics and

Research Methodology and Applied Dental Materials.

Part-II

Paper-I : Conservative Dentistry

Paper-II : Endodontics

Paper-III : Descriptive and analysing type question

(v) ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

Part-I

Paper-I : Applied Basic Sciences: Applied anatomy, Physiology, Dental

Materials, Genetics, Pathology, Physical Anthropology, Applied Research methodology, Bio-Statistics and Applied Pharmacology.

Part-II

Paper-I : Orthodontic history, Concepts of occlusion and esthetics, Child

and Adult Psychology, Etiology and classification of maloclusion, Dentofacial Anomalies, Diagnostic procedures and treatment planning in Orthodontics, Practice management

in Orthodontic

Paper II : Clinical Orthodontics

Paper III : Descriptive and analysing type question

(vi) ORAL AND MAXILLOFACIAL PATHOLOGY AND ORAL MICROBIOLOGY:

Part-I

<u>Paper-I</u>: Applied Basic Sciences: Applied anatomy, Physiology (General

and oral), Cell Biology, General Histology, Biochemistry, General Pathology, General and Systemic Microbiology, Virology, Mycology, Basic Immunology, Oral Biology (oral and dental

histology), Biostatistics and Research Methodology

Part-II:

Paper-I : Oral pathology, Oral Microbiology and Immunology and Forensic

Odontology

Paper-II : Laboratory techniques and Diagnosis and Oral Oncology

Paper-III : Descriptive and analysing type question

(vii) PUBLIC HEALTH DENTISTRY

Part-I

<u>Paper</u>-I : Applied Basic Sciences: Applied Anatomy and Histology, Applied

Physiology and Biochemistry, Applied Pathology, Microbiology, Oral Pathology, Physical and Social Anthropology, Applied

Pharmacology and Research Methodology and Biostatistics.

Part-II:

Paper-I : Public Health

Paper-II : Dental Public Health

Paper-III : Descriptive and analysing type question

(viii) PEDIATRIC DENTISTRY

Part-I

Paper I: Applied Basic Sciences: Applied Anatomy, Physiology, and

Biochemistry, Pathology, Microbiology, Pharmacology, Research Methodology and Biostatistics Growth and Development and

Dental plaque, Genetics.

Part-II:

Paper-I : Clinical Pedodontics

Paper-II : Preventive and Community Dentistry as applied to pediatric

dentistry

Paper-III : Descriptive and analysing type question

(ix) ORAL MEDICINE AND RADIOLOGY

Part-I

Paper I: Applied Basic Sciences: Applied Anatomy, Physiology, and

Biochemistry, Pathology, Microbiology, Pharmacology, Research

Methodology and Biostatistics

Part-II:

Paper-I : Oral and Maxillofacial Radiology

Paper-II : Oral Medicine, therapeutics and laboratory investigations

Paper-III : Descriptive and analysing type question

The following provision has been inserted in terms of (3rd Amendment) notification published on 26.08.2019 in the Gazette of India

"(x) The detailed syllabus for all the specialities is annexed as SCHEDULE-IX to these regulations."

CHAPTER - VII

GOALS AND OBJECTIVES OF THE CURRICULUM

(25) **GOALS**._

The goals of the post-graduate training in various specialities is to train the graduate in Dental Surgery who will,

- practice respective speciality efficiently and effectively, backed by scientific knowledge and skill;
- (ii) exercise empathy and a caring attitude and maintain high ethical standards;
- (iii) continue to evince keen interest in professional education in the speciality and allied specialities whether in teaching or practice;
- (iv) willing to share the knowledge and skills with any learner, junior or a colleague;
- (v) to develop the faculty for critical analysis and evaluation of various concepts and views and to adopt the most rational approach.

(26) OBJECTIVES._

The objective of the post-graduate training is to train a student so as to ensure higher competence in both general and special area of interest and prepare him or her for a career in teaching, research and speciality practice. A student must achieve a high degree of clinical proficiency in the subject and develop competence in research and its methodology in the concerned field.

The objectives to be achieved by the candidate on completion of the course may be classified as under:—

- (a) Knowledge (Cognitive domain)
- (b) Skills (Psycho motor domain)
- (c) Human values, ethical practice and communication abilities

(a) KNOWLEDGE.

- (i) demonstrate understanding of basic sciences relevant to speciality;
- (ii) describe etiology, pathophysiology, principles of diagnosis and management of common problems within the speciality in adults and children:
- (iii) identify social, economic, environmental and emotional determinants in a given case and take them into account for planned treatment;
- (iv) recognise conditions that may be outside the area of speciality or competence and to refer them to the concerned specialist;
- (v) update knowledge by self study and by attending courses, conferences and seminars pertaining to speciality;
- (vi) undertake audit, use information technology and carry out research in both basic and clinical with the aim of publishing or presenting the work at various scientific gathering;

(b) SKILLS:

- (i) take a proper clinical history, examine the patient, perform essential diagnostic procedures and order relevant tests and interpret them to come to a reasonable diagnosis about the condition;
- (ii) acquire adequate skills and competence in performing various procedures as required in the speciality.

(c) HUMAN VALUES, ETHICAL PRACTICE AND COMMUNICATION ABILITIES.

- (i) adopt ethical principles in all aspects of practice;
- (ii) foster professional honesty and integrity;
- (iii) deliver patient care irrespective of social status, caste, creed, or religion of the patient;
- (iv) develop communication skills, to explain various options available and obtain a true informed consent from the patient;
- (v) provide leadership and get the best out of his team in a congenial working atmosphere;
- (vi) apply high moral and ethical standards while carrying out human or animal research;
- (vii) be humble and accept the limitations in his knowledge and skill and to ask for help from colleagues when needed;
- (viii) respect patient's rights and privileges including patient's right to information and right to seek a second opinion.

PART-VIII SPECIALITIES

27. The following specialties for the post-graduate course to be followed by the university / institute are detailed asunder:-

(i) Prosthodontics and Crown & Bridge:

Prosthodontics and Crown & Bridge is a branch of dental art and science pertaining to the restoration and maintenance of oral function, health, comfort and appearance by the replacement of mission or lost natural teeth and associated tissues either by fixed or removable artificial substitutes.

(ii) Periodontology:

Periodotology is the science dealing with the health and diseases of the investing and supporting structures of the teeth and oral mucous membrane.

(iii) Oral & Maxillofacial Surgery:

Oral and Maxillofacial surgery deals with the diagnosis and surgical and adjunctive treatment of diseases, injuries and defects of the human jaws and associated oral and facial structures.

(iv) Conservative Dentistry and Endodontics:

Conservative dentistry deals with prevention and treatment of the diseases and injuries of the hard tissues and the pulp of the tooth and associated periapical lesions, alongwith restoration of those teeth to normal form function and aesthetics.

(v) Orthodontics and Dentofacial Orthopedics:

Orthodontics and Dentofacial Orthopedics deals with prevention and correction of oral anomalies and malocclusion and the harmonising of the structures involved, so that the dental mechanisms function in a normal way.

(vi) Oral & Maxillofacial Pathology and Oral Microbiology

Oral & Maxillofacial Pathology and Oral Microbiology deals with the nature of oral diseases, their causes, processes and effects. It relates the clinical manifestation of oral diseases to the physiologic and anatomic changes associated with these diseases.

(vii) Public Health Dentistry

Public Health Dentistry is the science and art of preventing and controlling dental diseases and promoting dental health through organised community efforts.

(viii) Pediatric and Preventive Dentistry

Pediatric and Preventive Dentistry deals with prevention and treatment of oral and dental ailments that may occur during childhood.

(ix) Oral Medicine and Radiology

Oral Medicine is a speciality of dentistry concerned with the basic diagnostic procedures and techniques useful in recognising the diseases of the oral tissues of local and constitutional origin and their medical management.

Radiology is a science dealing with x-rays and their uses in diagnosis and treatment of diseases in relation to orofacial diseases.

28. CLINICAL MATERIAL.

The minimum requirement of clinical material in each speciality of the post-graduate course is detailed in schedule-VIII of these regulations.

(Dr. Sabyasachi Saha) Secretary

[F. No.]

SCHEDULE – I (See clause (b) of sub-regulation (2) of regulation 11)

MODEL CHECKLIST FOR EVALUATION OF JOURNAL REVIEW PRESENTATIONS.

Name of the Trainee :	Date:
Name of the Faculty / Observer :	

SI. No.	Items for observation during presentation	Poor	Below Average	Average	Good	Very Good
	•	0	1	2	3	4
1.	Article chosen was					
2.	Extent of understanding of scope and objectives of the paper by the candidate.					
3.	Whether cross-references have been consulted.					
4.	Whether other relevant publications consulted.					
5.	Ability to respond to questions on the paper / subject.					
6.	Audio – Visual aids used.					
7.	Ability to defend the paper.					
8.	Clarity of presentation.					
9.	Any other observation.					
	Total Score					

SCHEDULE-II (See clause (c) of sub-regulation (2) of regulation 11)

MODEL CHECK LIST FOR EVALUATION OF SEMINAR PRESENTATIONS

Name of the Trainee : Date : Name of the Faculty / Observer :

SI. No.	Items for observation during presentation	Poor	Below Average	Average	Good	Very Good
		0	1	2	3	4
1.	Completeness & Preparation.					
2.	Clarity of presentation.					
3.	Understanding of subject.					
4.	Whether other relevant publications consulted.					
5.	Whether cross-references have been consulted.					
6.	Ability to answer the questions.					
7.	Time scheduling.					
8.	Appropriate use of audio – visual aids.					
9.	Overall performance.					
10.	Any other observation.					
	Total Score					

SCHEDULE-III (See clause (e) of sub-regulation (2) of regulation 11)

(a) MODEL CHECK LIST FOR EVALUATION OF CLINICAL WORK IN Outpatient Department

(To be completed once a month by respective unit heads including posting in other department)

Name of the Trainee : Date : Name of the Unit Head :

SI. No.	Items for observation during presentation	Poor	Below Average	Average	Good	Very Good
		0	1	2	3	4
1.	Regularity of attendance.					
2.	Punctuality.					
3.	Interaction with colleagues and					
	supportive staff.					
4.	Maintenance of case records.					
5.	Presentation of cases.					
6.	Investigations work up.					
7.	Chair-side manners.					
8.	Rapport with patients.					
9.	Over all quality of clinical work.					
	Total Score					

(b) EVALUATION OF CLINICAL CASE PRESENTATION

Name of the Trainee :	Date :
Name of the Faculty / Observer:	

SI. No.	Items for observation during presentation	Poor	Below	Average	Good	Very Good
INO.	presentation	0	Average 1	2	3	4
1.	Completeness of history.					
2.	Whether all relevant points elicited.					
3.	Clarity of presentation.					
4.	Logical order.					
5.	Mentioned all positive and negative points					
6.	Accuracy of general physical examination.					
7.	Diagnosis: Whether it follows logically from history and findings.					
8.	Investigations required.					
	Complete list.					
	Relevant order.					
	Interpretation of investigations.					
9.	Ability to react to questioning Whether it follows logically from history and findings.					
10.	Ability to defend diagnosis.					
11.	Ability to justify differential diagnosis.					
12.	Others.	·				
	Grand Total	- <u>-</u>				

Note: Please use a separate sheet for each faculty member.

SCHEDULE-IV (See clause (h) of sub-regulation (2) of regulation 11)

MODEL CHECKLIST FOR EVALUATION OF TEACHING SKILL

Name of the Trainee : Date : Name of the Faculty / Observer :

SI. No	Items for observation	Poor	Below Average	Average	Good	Very Good
		0	1	2	3	4
1.	Communication of the purpose of the talk					
2.	Evokes audience interest in the subject.					
3.	The introduction.					
4.	The sequence of ideas.					
5.	The use of practical examples and / or illustrations.					
6.	Specking style (enjoyable, monotonous, etc. specify)					
7.	Attempts audience participation.					
8.	Summary of the main points at the end.					
9.	Asks questions.					
10.	Answers questions asked by the audience.					
11.	Rapport of speaker with his audience.					
12.	Effectiveness of the talk.					
13.	Uses audio-visual aids appropriately.					

SCHEDULE-V (See clause (I) of sub-regulation (2) of regulation 11)

(a) MODEL CHECKLIST FOR DISSERTATION PRESENTATION

Name of the Trainee : Date :

Name of the Faculty / Observer:

SI. No.	Prints to be considered.	Poor	Below Average	Average	Good	Very Good
		0	1	2	3	4
1	Interest shown in selecting topic.					
2	Appropriate review.					
3	Discussion with guide and other faculty.					
4	Quality of protocol.					
5	Preparation of proforma					
	Total Score					

(b) CONTINUOUS EVALUATION OF DISSERTATION WORK BY GUIDE / CO-GUIDE

Name of the Trainee : Date :

Name of the Faculty / Observer:

SI. No.	Items for observation during presentation	Poor	Below Average	Average	Good	Very Good
		0	1	2	3	4
1	Periodic consultation with guide / coguide.					
2	Regular collection of case material					
3	Depth of analysis / discussion.					
4	Quality of final output.					
5	Others					
_	Total Score					

SCHEDULE-VI (See clause (I) of sub-regulation (2) of regulation 11)

OVERALL ASSESSMENT SHEET

Date:

SI.	Faculty		Name of Trainee and Mean Score								
No.	Member	Α	В	С	D	E	F	G	Н	I	J
1											
2											
3											

Signature of Head of the Department

Signature of Principal

Note: The overall assessment sheet used along with the logbook shall form the basis for certifying satisfactory completion of course of study, in addition to the attendance required.

KEY:

Faculty member : Name of the faculty doing the assessment.

Mean score: Sum total of all the scores of checklists.

A, B,...: Name of the trainee.

SCHEDULE-VII (See sub-regulations (2) of regulation 14)

EQUIPMENTS

DEPARTMENT: PROSTHODONTICS AND CROWN & BRIDGE

S. No.	NAME	SPECIFICATION	Qua	ntity	Availability
1.	Electrical Dental Chairs and Units	With shadowless		nair and	
		lamp, spittoon, 3	unit p	er PG	
		way syringe,	stude	nt and	
		instrument tray and	two ch	airs with	
		motorized suction,	unit f	or the	
		micromotor and	fac	ulty.	
		airotor attachment			
		with handpieces.			
			1	2	
0	A (' 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1		Unit	Units	
2.	Articulators – semi adjustable/ adjustable with face bow		6	12	
3.	Micromotor – (Lab Type can also		2	4	
.	be attached (fixed) to wall		_		
4.	Ultrasonic scaler		2	2	
5.	Light cures		2	2	
6.	Hot air oven		1	1	
7.	Autoclave		2	2	
8.	Surveyor		2	2	
9.	Refrigerator		1	1	
10.	X-ray viewer		1	2	
11.	Pneumatic, Crown bridge remover		2	3	
12.	Needle destroyer		1	2	
13.	Intra oral camera		1	1	
14.	Digital SLR camera		1	1	
15.	Computer with internet connection		1	1	
13.	with attached printer and scanner		'	ı	
16.	LCD projector		1	1	
10.	projector		'	'	
	Clinical Lab for F	Prosthetics			
1.	Plaster dispenser		2	2	
2.	Model trimmer with carborandum Disc		1	2	
3.	Model trimmer with diamond disc		1	2	
4.	High speed lathe		2	3	
5.	Vibrator		2	4	
6.	Acrylizer		1	2	
7.	Dewaxing unit		1	2	
8.	Hydraulic press		1	1	
9.	Mechanical press		1	1	
10.	Vacuum mixing machine		1	1	
11.	Micro motor lab type		2	3	
12.	Curing pressure pot		1	1	
13.	Pressure molding machine		1	1	
13.	1 1033ule moluling machine		'	'	
			l		

	Chrome – Cobalt L	ab Equipment			
1.	Duplicator		1	1	
2.	Pindex system		1	1	
3.	Burn-out furnace		1	1	
4.	Welder		1	1	
5.	Sandblaster	Micro and macro	1	1	
6.	Electro – polisher		1	1	
7.	Model trimmer with carborandum		1	1	
	disc		·	•	
8.	Model trimmer with diamond disc		1	1	
9.	Model trimmer with double disc		1	1	
	(one Carborandum and one				
	diamond disc)				
10.	Casting machine, motor cast with		1	1	
	the safety door closure, gas blow		•	•	
	torch with regulator				
11.	Dewaxing furnace		1	1	
	Induction casting machine with		1	1	
	vacuum pump, capable of casting		•	•	
	titanium chrome cobalt precision				
	metal				
12.	Spot welder with soldering,		1	1	
	attachment of cable				
13.	Steam cleaner		1	1	
14.	Vacuum mixing machine		1	1	
15.	Spindle grinder 24,000 ROM with		1	1	
	vacuum suction		•	•	
16.	Wax heater		2	3	
17.	Wax carvers (Full PKT Set)		2	3	
18.	Milling machine		1	1	
19.	Stereo microscope		1	1	
20.	Magnifying work lamp		1	1	
21.	Heavy duty lathe with suction		1	1	
22.	Preheating furnace		1	1	
23.	Dry model trimmer		1	1	
24.	Die cutting machine		1	2	
25.	Ultrasonic cleaner		1	1	
26.	Composite curing unit		1	1	
	Ceramic Lab E	guipment		-	
1.	Fully programmable porcelain		1	1	
	furnace with vacuum pump				
2.	Ceramic kit (instruments)		3	3	
3.	Ceramic materials (kit)		1	1	
4.	Ceramic polishing kit		2	2	
	Implant Equ	ipment	L		
1.	Electrical dental chair and unit	-	1	1	
2.	Physio dispenser		1	1	
3.	Implant kit	Minimum 2 systems	2	2	
4.	Implants	Í	10	10	
5.	Prosthetic components		10	10	
6.	Unit mount light cure		1	2	
7.	X-ray viewer		1	2	
8.	Needle destroyer		1	2	
9.	Ultrasonic cleaner capacity 3.5 Its		1	1	
10.	Autoclave programmable for all		1	2	
	recommended cycles				
<u> </u>	•	•			

11.	X-ray machine with RVG	1	1	
12.	Refrigerator	1	1	
13.	Surgical kit/prosthetic kit	2	2	
14.	Educating models	1	1	
15.	Implant removing instruments	1	1	

DEPARTMENT: PERIODONTOLOGY

S. No.	NAME	SPECIFICATION	Quantity One chair and unit per post-graduate student and Two chairs with unit for the faculty		Availability
1.	Dental Chairs and Units	Electrically operated with shadowless lamp, spittoon, 3 way syringe, instrument tray and motorized suction, micromotor attachment with contra angle handpiece, airoter attachment, ultrasonic scaler (Piezo) with detachable autoclavable hand piece			
			1 Unit	2 Units	
2.	Auto clave (fully automatic) front loading		1	2	
3.	Steel bin		4	6	
4.	Airoter hand pieces		2	2	
5.	UV chamber		1	1	
6.	Formalin chamber		1	1	
7.	W.H.O probe		2	2	
8.	Nabers probe		2	2	
9.	Williams probe		2	2	
10.	UNC-15 probe		4	4	
11.	Gold Man fox probe		1	1	
12.	Pressure sensitive probe		1	1	
13.	Marquis color coded probe		1	1	
14.	Supra gingival scalers	set	2	2	
15.	Sub gingival scaler	set	2	2	
16.	Arkansas sharpening stone		1	1	
	Surgical Inst	ruments			
1.	Routine surgical instrument kit (Benquis periosteal elevator, periotome)	set	2	3	
2.	Surgery trolleys		6	6	
3.	X ray viewer		1	2	
4.	Surgical cassette with sterilisation pouches		4	6	
5.	Electro surgery unit		1	1	
	Special Surgical	Instruments			
1.	Kirkland's knife	set	1	1	
2.	Orban's knife	set	1	1	
			•		

3.	Paquette blade handle		1	1	
4.	Krane kaplan pocket marker	set	1	1	
5.	Mc Calls universal curettes	set	1	1	
6.	Gracey's curettes (No.1-18)	set	2	2	
7.	Mini five curettes	set	1	1	
8.	Cumine scalar		1	1	
9.	Mallet		1	1	
10.	Chisel		1	1	
11.	Oschenbein chisel	straight, curved	1	1	
12.	Schluger bone file	otraignt, our vou	1	1	
13.	Bone fixation screw kit		1	1	
14.	Bone scrapper		1	1	
15.	Bone trephines for harvesting autografts	1 set	1	1	
16.	Bone regenerative materials	Bone graft and GTR membranes	5	5	
17.	Local drug delivery systems	At least two different agents	1 each	1	
18.	Root conditioning agent	At least two different agents	2	2	
19.	Micro needle holder		1	1	
20.	Micro scissors		1	1	
21.	Magnifying loop (2.5 – 3.5)		1	2	
22.	Operating microscope	optional	1	1	
23.	3 rd generation digital probe	optional	1	1	
24.	Bone expander and bone crester	optional	1	1	
25.	Distraction osteogenesis kit	optional	1	1	
26.	Bone mill	optional	1	1	
27.	Bone graft / membrane placement spoon		1	1	
28.	Bone condenser		1	1	
29.	Peizo-surgery unit	optional	1	1	
30.	Centrifuge for PRP/PRF preparation	optional	1	1	
31.	Soft tissue laser (8 watt)		1	1	
32.	Osteotome	set optional	1	1	
	MISCELLANEOUS INS				
1.	Composite gun with material kit		1	1	
2.	Splinting kit with material		2	3	
3.	Composite finishing kit		1	1	
4.	Glass Ionomer cement		1	1	
5.	Digital camera		1	1	
6.	Intra Oral camera		1	1	
7.	Ultrasonic cleaner		1	1	
8.	Emergency kit		1	1	
9.	Refrigerator		1	1	

10.	X-ray viewer		2	2	
11.	LCD projector		1	1	
12.	Computer with internet		1	1	
	connection with attached				
	printer and scanner				
13.	Implant Equipment				
14.	Electrical dental chair and unit		1	1	
	Physio dispenser		1	1	
15.	Implant kit	At least two	2	2	
		different systems			
16.	Implants		10	10	
17.	Implant maintenance kit		1 set	1 set	
	(plastic instruments)				
18.	Implant guide		1	1	
19.	X-ray viewer		1	2	
20.	Needle destroyer		1	2	
21.	Ultrasonic cleaner capacity 3.5		1	1	
	Its				
22.	Autoclave programmable for all		1	1	
	recommended cycles				
23.	RVG with x-ray machine		1	1	
24.	Refrigerator		1	1	
25.	Surgical kit		2	2	
26.	Sinus lift kit		1	1	
27.	Educating models		1	1	
28.	Implant removing kit		1	1	

DEPARTMENT: ORAL & MAXILLOFACIAL SURGERY

S.No.	NAME	SPECIFICATION	Quar	ntity	Availability
1.	Dental Chairs and Units	Electrically operated with shadowless lamp, spittoon, 3 way syringe, instrument tray	One chair per post-g student a chairs with the fa	graduate and Two n unit for culty	
		and high otorized suction, with micromotor and micro motor attachment	1 Unit	2 Units	
2.	Autoclave	Front loading	2	3	
3.	Fumigators		1	1	
4.	Oscillating saw	With all hand pieces	1	1	
5.	Surgical instruments General surgery kit including tracheotomy kit		2 5	2	
	Minor oral surgery kit Osteotomy kit) 1	10	
	Cleft surgery kit		1		
	Bone grafting kit		1		
	Emergency kit		1	1	
	Trauma set including bone		2	2	
	plating kit		1	1	
	Implantology kit	Minimum 2	2	2	
	with implants	systems	10	10	
	with implants	systems	10	10	

6.	Distraction osteogenesis kit		1	1	
7.	Peizo surgical unit		1	1	
8.	Magnifying loops		1	1	
9.	Operating microscope and Microsurgery kit	desirable	1	1	
10.	Dermatomes		1	1	
11.	Needle destroyer		2	3	
12.	Ultrasonic Cleaner capacity 3.5 lts		1	1	
13.	Formalin chamber		1	1	
14.	Pulse oxymeter		1	1	
15.	Ventilator		1	1	
16.	Major operation theatre with all facilities		1	1	
17.	Recovery and Intensive Care Unit with all necessary life support equipments		2 beds	2 beds	
18.	Fibrooptic light		1	1	
19.	Inpatient beds		20	20	
20.	Fiber optic laryngoscope		1	1	
21.	Computer with internet connection with attached printer and scanner		1	1	
22.	LCD projector		1	1	
23.	Refrigerator		1	1	-

<u>DEPARTMENT</u>: CONSERVATIVE DENTISTRY AND ENDODONTICS

S.No.	NAME	SPECIFICATION	Quan	tity	Availability
1.	Dental Chairs and Units	Electrically operated with shadowless lamp, spittoon, 3 way syringe, instrument tray and motorized suction, micromotor, airotor attachment with hand pieces	One chair & unit per post-graduate student and two chairs with unit for the faculty		
			1 Unit	2 Units	
2.	ENDOSONIC HANDPIECES – Micro endosonic Tips, retro treatment		2	3	
3.	Mechanised rotary instruments including hand pieces (speed and torque control) and hand instruments various systems		3	6	
4.	Rubber dam kit		1 per chair	1 per chair	
5.	Autoclaves for bulk instrument sterilization vacuum (Front loading)		2	3	
6.	Autoclaves for hand piece sterilization		1	1	
7.	Apex locators one for every two chairs		2	4	

8.	Pulp tester		2	4	
9.	Equipments for injectable		1	2	
	thermoplasticized gutta percha				
10.	Operating microscopes 3 step		1	1	
	or				
	5 step magnification				
11.	Surgical endo kits		2	2	
	(Microsurgery)				
12.	Set of hand instruments		1	2	
	(specifications required)				
13.	Sterilizer trays for autoclave		4	4	
14.	Ultrasonic cleaner capacity		1	1	
	3.5 lts				
15.	Variable Intensity	Desirable	1	1	
	polymerization equipments -				
	VLC units				
16.	Conventional VLC units one		2	4	
	for every two chairs				
17.	Needle destroyer		2	2	
18.	Magnifying loupes one for		1	2	
	students and one for faculty				
19.	LCD projector		1	1	
20.	Composite kits with different		2	4	
	shades and polishing kits				
21.	Ceramic finishing kits, metal	In ceramic labs	2	3	
	finishing kits				
22.	Amalgam finishing kits		2	3	
23.	RVG with x-ray machine		1	1	
	developing kit		_		
24.	Chair side micro abrasion		1	1	
25.	Bleaching unit		1	1	
26.	Instrument retrieval kits		1	1	
27.	Computer with internet		1	1	
	connection with attached				
	printer and scanner		_		
28.	Refrigerator		1	1	
29.	Equipments for casting				
-00	procedures		4	4	
30.	Equipments for ceramics		1	1	
	including induction casting				
	machines/ burnout preheat				
	furnaces/ wax elimination				
21	furnaces Lab micro motor/ metal		1	1	
31.			1	1	
	grinders / sand blasters/				
	polishing lathes/ duplicator equipment/ vacuum				
	investment equipments				
32.	Laser (preferably hard tissue)		1	1	
33.	Face bow with semi adjustable		1	2	
55.	articulator		'		
	articulatol]	

DEPARTMENT: ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

S. No.	NAME	SPECIFICATION	Quantity	Availability
				Į.

1.	Dental Chairs and Unit	Electrically operated with shadow less lamp, spittoon, 3 way syringe, instrument tray and	One chair & unit per PG student and Two chairs with unit for the		
		motorized suction		ulty	
2.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1 Unit	2 Units	
3.	Vacuum /pressure moulding unit		1	1	
4.	Hydrogen soldering unit		1	1	
5.	Lab micromotor		3	5	
6.	Spot welders		3	5	
7.	Model trimmer (Double disc)		2	3	
8.	Light curing unit		2	2	
9.	High intensity light curing		1	2	
9.	unit		'		
10.	Polishing lathes		2	3	
11.	Tracing tables		3	5	
12.	SLR digital camera		1	1	
13.	Scanner with transparency adapter		1	1	
14.	X-ray viewer		3	4	
15.	LCD projector		1	1	
16.	Autoclaves for bulk		1	1	
10.	instrument Sterilization vacuum (Front loading)			·	
17.	Needle destroyer		1	1	
18.	Dry heat sterilizer		1	1	
19.	Ultrasonic scaler		1	1	
20.	Sets of Orthodontic pliers		3	3	
21.	Orthodontic impression trays		3	5	
22.	Ultrasonic cleaner capacity 3.5 lts		1	1	
23.	Electropolisher		1	1	
24.	Typodonts with full teeth set		3	3	
25.	Anatomical articulator with face bow attachments		1	1	
26.	Free plane articulators		1	1	
27.	Hinge articulators		4	4	
28.	Computer software for cephalometrics		1	1	
29.	Computer with internet connection with attached printer and scanner		1	1	
30.	Refrigerator		1	1	

DEPARTMENT: ORAL & MAXIILOFACIAL PATHOLOGY AND ORAL MICROBIOLOGY

S. No.	NAME	SPECIFICATION	Qu	Quantity	
1.			1 Unit	2 Units	

		Γ	Т _	Τ_	T
2.	Dental Chairs and Units	Electrically operated with shadow less lamp, spittoon, 3 way syringe, instrument tray and suction	3	6	
2.	Adequate laboratory glassware's as required for processing of biopsy specimens and staining.	Reasonable quantity should be made available			
3.	Adequate tissue capsules / tissue embedding cassettes	Reasonable quantity should be made available			
4.	Paraffin wax bath	thermostatically controlled	1	1	
5.	Leuckhart pieces		10	10	
6.	Block holders		25	25	
7.	Microtome	Manual	1	1	
8.	Microtome	semi – automated	1	1	
9.	Tissue floatation water bath	thermostatically controlled	1	1	
10.	Slide warming table		1	1	
11.	Steel slide racks for staining		5	5	
12.	Diamond glass marker		2	2	
13.	Research microscope with phase contrast, dark field, polarization, image analyzer, photomicrography attachments		1	1	
14.	Multi head microscope	Penta headed	1	1	
15.	Binocular compound microscope		2 for faculty and one per student	4 for faculty and one per student	
16.	Stereo microscope		1	1	
17.	Aluminum slide trays		5	5	
18.	Wooden / plastic slide boxes		5	5	
19.	Wax block storing cabinet		5,000 capacity	10,000 capacity	
20.	Slide storing cabinet		5,000 capacity	10,000 capacity	
21.	Refrigerator		1	1	
22.	Pipettes		5	5	
23.	Surgical kit for biopsy		3	6	
24.	Immuno histo chemistry lab		1	1	
25.	Computer with Internet Connection with attached printer and scanner		1	1	
26.	LCD projector		1	1	
27.	Desirable Equipment				
28.	Cryostat		1	1	
29.	Fluorescent microscope		1	1	

30.	Hard tissue microtome	1	1	
31.	Tissue storing cabinet	1	1	
	(frozen)			
32.	Microwave	1	1	

DEPARTMENT: PUBLIC HEALTH DENTISTRY

S. No.	NAME	SPECIFICATION	Quantity		Availability
	Instruments in the department for comprehensive Oral				
	health o	care programme			
1.	Dental chairs	Electrically operated with shadowless lamp, spittoon, 3 way syringe, instrument tray and motorized suction, micromotor attachment with contra angle handpiece, airoter attachment, ultrasonic scaler (Piezo) with detachable autoclavable hand piece with min 3 tips.	One chair and unit per post- graduate student and one chair with unit for the faculty		
2.		proce man num e aper	1 Unit	2 Unit	s
3.	Extraction forceps		4 sets	6 sets	
4.	Filling instruments		4 sets	6 sets	S .
_				0 1	
5.	Scaling instruments	Supra gingival scaling	4 sets	6 sets	5
6.	Amalgamator		1	1	
7.	Pulp tester		1	1	
8.	Autoclave		1	1	
9.	X-ray viewer		1	1	
10.	Instrument cabinet		1	1	
11.	LCD or DLP multimedia projector		1	1	
12.	Computer with internet connection with attached printer and scanner		1	1	
13.	For peripheral dent	tal care or field progran	mme		
14.	Staff bus		1	1	
15.	Mobile dental clinic fitted		1	1	
	with at least 2 dental				
	chairs with complete				
	dental unit with fire				
4.6	extinguisher				
16.	Ultrasonic scaler,		1	2	
17.	Ultrasonic cleaner		1	1	
10	capacity 3.5 lts	0 10 1			
18.	Compressor	One with chair		4	
19.	Generator Dublic address system		1	1	
20.	Public address system,		1	1	

	audio-visual aids			
21.	Television	1	1	
22.	Digital Versatile Disc	1	1	
	Player			
23.	Instrument cabinet,	1	1	
	emergency medicine kits,			
	Blood pressure apparatus			
24.	Portable oxygen cylinder	1	1	
25.	Portable chair	1	1	
26.	Refrigerator	1	1	

DEPARTMENT: PAEDODONTICS AND PREVENTIVE DENTISTRY

S. No.	NAME	SPECIFICATION	Quantity		Availability
1.	Dental Chairs and Units	Electrically operated	One chair ar	nd unit	-
		with shadowless	per post-gra	duate	
		lamp, spittoon, 3 way	student and Two		
		syringe, and	chairs with u	ınit for	
		motorised suction,	the facu	lty	
		micromotor			
		attachment with			
		contra angle			
		miniature			
		handpiece,airotor			
		attachment with miniature handpiece,			
		dental operater stool			
		(40% dental chairs			
		shall be pedo chairs)			
2.		orian po podo oriano)	1 Unit	2	
				Units	
3.	Pedo extraction forceps		3	4	
	sets				
4.	Autoclaves for bulk		1	2	
	instrument sterilization				
	vacuum (Front loading)				
5.	RVG with intra oral x-ray		1	1	
	unit				
6.	Automatic developer		1	1	
7.	Pulp tester		2	3	
8.	Apex locator		1	1	
9.	Rubber dam kit	One set per student	1	1	
10.	Injectable GP condenser		1	1	
11.	Endodontic pressure		1	1	
40	syringe		0	4	
12. 13.	Glass bead steriliser		2 2	3	
	Spot welder		2	4	
14.	Ultrasonic scalers		1	1	
15.	Needle destroyer		•		
16. 17.	Formalin chamber Ultrasonic cleaner		1 1	1	
17.	capacity 3.5 Its		'	'	
18.	X-ray viewer		2	3	
19.	Amalgamator		1	2	
20.	Plaster dispenser		2	2	
21.	Dental lathe		1	2	
22.	Vibrator		2	3	
	VIDIGIOI				2.4

23.	Typodonts	One set per student	1	1	
24.	Soldering unit		1	1	
25.	Band pinching beak pliers		2 Sets	2	
				Sets	
26.	Proximal contouring pliers		2	3	
27.	Crown crimping pliers		2	3	
28.	Double beak pliers		2	3	
	anterior and posterior				
29.	Lab micro motor		2	3	
30.	Acryliser		1	2	
31.	Magnifying loupes		1	1	
32.	Conscious sedation unit	Desirable	1	1	
33.	Pulse oxymeter		1	1	
34.	Phantom head table with	One set per each	1	1	
	attached Light, Airotor	P.G. Student			
	and micro motor				
35.	Computer with internet		1	1	
	connection with attached				
	printer and scanner				
36.	LCD projector		1	1	
37.	Refrigerator		1	1	

DEPARTMENT: ORAL MEDICINE AND RADIOLOGY

S. No.	NAME	SPECIFICATION	Quan	tity	Availability
1.	Dental Chairs and Units	Electrically operated	One chair	and unit	
		with shadowless	per post-g		
		lamp, spittoon, 3 way	student a		
		syringe, instrument	chair with u	nit for the	
		tray and suction	facu		
2.			1 Unit	2 Units	
3.	RVG with intra oral	55-70 kVp with digital	1	1	
	radiography machine	compatibility			
	(FDA Approved)				
4.	Extra oral radiography	100 kvp	1	1	
	machine				
5.	Panoramic radiography	Digital compatibility	1	1	
	(OPG) machine with				
	cephalometric and TMJ				
	attachment with printer				
	Intra-oral camera		1	2	
	Pulp tester		2	4	
	Autoclave		1	1	
	Punch biopsy tool		2	3	
	Biopsy equipment		1	2	
	Surgical trolley		2	2	
	Emergency medicines kit		1	1	
	Extra oral cassettes with		4	6	
	intensifying screens				
	(Conventional and rare				
	earth)				
	Lead screens		2	2	
	Lead aprons		2	2	
	Lead gloves		2	2	
	Radiographic filters		1	1	
	(Conventional and rare				

earth)			
Dark room with safe light	1	1	
facility			
Automatic radiographic	2	2	
film processors			
Radiographic film storage	1	1	
lead containers			
Thyroid collars	1	1	
Digital	1	1	
sphygmomanometer			
Digital blood glucose	1	1	
tester			
Digital camera	1	1	
X-ray viewer boxes	2	3	
Lacrimal probes	2 sets	2 Sets	
Sialography cannula	2 sets	2 Sets	
Illuminated mouth mirror	2	2	
and probe			
Computer with internet	1	1	
connection with attached			
printer and scanner			
LCD projector	1	1	
Refrigerator	1	1	

SCHEDULE-VIII (See regulation 28)

CLINICAL MATERIAL

FOR COLLEGES WITH 50 UG ADMISSIONS Minimum Requirement (both UG & PG together)

Conservative Dentistry and Endodontics

Unit	Starting MDS	1 st Renewal	2 nd & 3 rd Renewal	Recognition
1 st Unit	35	40	50	50
2 nd Unit	60	70	80	80

Oral Medicine & Radiology

Unit	Starting MDS	1 st Renewal	2 nd & 3 rd Renewal	Recognition
1 st Unit	75	80	90	100
2 nd Unit	110	120	130	130

Oral & Maxillofacial Surgery

Unit	Starting MDS	1 st Renewal	2 nd & 3 rd Renewal	Recognition
1 st Unit	30	35	40	40
	(1+4)	(1+8)	(2+10)	(2+10)
2 nd Unit	50	60	70	70
	(2+12)	(2+14)	(2+16)	(2+16)

The average of Major Surgeries + Minor Surgeries per week are mentioned above in the brackets

Oral & Maxillofacial Pathology and Oral Microbiology

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	1+2+3	1+3+3	1+3+5	1+3+5
2 nd Unit	2+4+6	2+5+8	2+6+10	2+6+10

^{* (}Biopsy + Cytology + Hematology per week)

Orthodontics & Dentofacial Orthopedics

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	15	20	25	25

2 nd Unit 30 35 40 40	2 nd Unit	30	35	40	40
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Pediatric Dentistry

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	20	25	30	30
2 nd Unit	35	40	45	45

Periodontology

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	30	35	40	40
2 nd Unit	50	60	70	70

Prosthodontics and Crown & Bridge

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	20	25	30	30
2 nd Unit	35	40	50	50

Public Health Dentistry (including Patients in Satellite Clinics)

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	30	35	40	40
2 nd Unit	50	55	60	60

FOR COLLEGES WITH 100 UG ADMISSIONS: Minimum Requirement (both UG & PG together)

Conservative Dentistry and Endodontics

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	50	60	70	70
2 nd Unit	80	90	100	100

Oral Medicine & Radiology

Unit Starting MDS 2 nd R	newal 3 rd & 4 th Renewal	Recognition
-------------------------------------	--	-------------

1 st Unit	100	120	140	150
2 nd Unit	160	170	180	180

Oral & Maxillofacial Surgery

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	40	50	60	60
	(1+4)	(1+8)	(2+10)	(2+10)
2 nd Unit	70	80	100	100
	(2+12)	(2+14)	(2+16)	(2+16)

The average of Major Surgeries + Minor Surgeries per week are mentioned above in the brackets()

Oral & Maxillofacial Pathology and Oral Microbiology

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	1+3+5	1+6+5	2+6+10	2+6+10
2 nd Unit	3+6+12	3+7+12	3+7+14	3+7+14

^{* (}Biopsy + Cytology + Hematology per week)

Orthodontics & Dentofacial Orthopedics

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	20	25	30	30
2 nd Unit	40	45	50	50

Pediatric Dentistry

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	30	35	40	40
2 nd Unit	50	55	60	60

Periodontology

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
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1 st Unit	40	50	60	60
2 nd Unit	80	90	100	100

Prosthodontics and Crown & Bridge

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	30	35	40	40
2 nd Unit	50	55	60	60

Public Health Dentistry (including Patients in Satellite Clinics)

Unit	Starting MDS	2 nd Renewal	3 rd & 4 th Renewal	Recognition
1 st Unit	40	45	50	50
2 nd Unit	60	65	70	70

LOG BOOK <u>TABLE 1</u> ACADEMIC ACTIVITIES ATTENDED

Name : Admission Year:

College:

Date	Type of activity (Specify Seminar, Journal club, presentation, under-graduate teaching)	Particulars

TABLE 2 ACADEMIC PRESENTATIONS MADE BY THE TRAINEE

Name : Admission Year:

College:

Date	Торіс	Type of activity (Specify Seminar, Journal club, presentation, under-graduate teaching)

TABLE 3 DIAGNOSTIC AND OPERATIVE PROCEDURES PERFORMED

Name: Admission Year:

College:

Date	Name	OP No	Procedure	Category O, A, PA, PI

Key:
O-Washed up and observed-Initial six months of admission
A-Assisted senior surgeon-I year MDS
PA- Performed procedure under the direct supervision of a senior surgeon-II year MDs

PI-Performed independently -III year MDS

SCHEDULE - IX

(See regulation 24)

29. SYALLBUS FOR M.D.S. IN VARIOUS SPECIALTIES

The syllabus for MDS course includes both Applied Basic Sciences and subjects of concerned specialty. The syllabus in Applied Basic Sciences shall vary according to the particular specialty; similarly the candidates shall also acquire adequate knowledge in other subjects related to their respective specialty.

1. PROSTHODONTICS AND CROWN & BRIDGE

AIM:

To train the dental graduates so as to ensure higher level of competence in both general and specialty areas of Prosthodontics and prepare candidates with teaching, research and clinical abilities including prevention and after care in Prosthodontics – removable dental prosthodontics, fixed dental prosthodontics (Crown &Bridge), implantology, maxillofacial prosthodontics and esthetic dentistry.

GENERAL OBJECTIVES OF THE COURSE:

Training program for the dental graduates in Prosthetic dentistry— removable dental prosthodontics, fixed dental prosthodontics (Crown & Bridge), implantology, maxillofacial prosthodontics and esthetic dentistry and Crown & Bridge including Implantology is structured to achieve knowledge and skill in theoretical and clinical laboratory, attitude, communicative skills and ability to perform research with a good understanding of social, cultural, educational and environmental background of the society.

- To have adequate acquired knowledge and understanding of applied basic and systemic medical sciences, both in general and in particularly of head and neck region.
- The postgraduates should be able to provide Prosthodontic therapy for patients with competence and working knowledge with understanding of applied medical, behavioral and clinical science, that are beyond the treatment skills of the general BDS graduates and MDS graduates of other specialties,
- To demonstrate evaluative and judgment skills in making appropriate decisions regarding prevention, treatment, after care and referrals to deliver comprehensive care to patients.

KNOWLEDGE:

The candidate should possess knowledge of applied basic and systemic medical sciences.

- On human anatomy, embryology, histology, applied in general and particularly to head and neck, Physiology & Biochemistry, Pathology Microbiology & virology; health and diseases of various systems of the body (systemic) principles in surgery and medicine, pharmacology, nutrition, behavioral science, age changes, genetics, Immunology, Congenital defects & syndromes and Anthropology, Bioengineering, Bio-medical & Biological Principles
- The student shall acquire knowledge of various Dental Materials used in the specialty and be able to provide appropriate indication, understand the manipulation characteristics, compare with other materials available, be adept with recent advancements of the same.
- Students shall acquire knowledge and practice of history taking, Diagnosis, treatment planning, prognosis, record maintenance of oral, craniofacial and systemic region.
- Ability for comprehensive rehabilitation concept with pre prosthetic treatment plan including surgical re-evaluation and prosthodontic treatment planning, impressions, jaw relations, utility of face bows, articulators, selection and positioning of teeth, teeth

- arrangement for retention, stability, esthetics, phonation, psychological comfort, fit and insertion.
- Instructions for patients in after care and preventive Prosthodontics and management of failed restorations shall be possessed by the students.
- Understanding of all the applied aspects of achieving physical, psychological well-being
 of the patients for control of diseases and / or treatment related syndromes with the
 patient satisfaction and restoring function of Cranio mandibular system for a quality life of
 a patient.
- Ability to diagnose and plan treatment for patients requiring Prosthodontic therapy
- Ability to read and interpret radiographs, and other investigations for the purpose of diagnosis and treatment planning.
- The theoretical knowledge and clinical practice shall include principles involved for support, retention, stability, esthetics, phonation, mastication, occlusion, behavioral, psychological, preventive and social aspects of Prosthodontics science of Oral and Maxillofacial Prosthodontics and Implantology
- Tooth and tooth surface restorations, Complete denture Prosthodontics, removable partial denture Prosthodontics, fixed prosthodontics and maxillofacial and Craniofacial Prosthodontics, implants and implant supported Prosthodontics, T.M.J. and occlusion, craniofacial esthetics, and biomaterials, craniofacial disorders, problems of psychogenic origin.
- Should have knowledge of age changes, geriatric psychology, nutritional considerations and prosthodontic therapy in the aged population.
- Should have ability to diagnose failed restoration and provide prosthodontic therapy and after care.
- Should have essential knowledge on ethics, laws, and Jurisprudence and Forensic Odontology in Prosthodontics.
- Should know general health conditions and emergency as related to prosthodontics treatment like allergy of various materials and first line management of aspiration of prosthesis
- Should identify social, cultural, economic, environmental, educational and emotional determinants of the patient and consider them in planning the treatment.
- Should identify cases, which are outside the area of his specialty / competence, refer them to appropriate specialistsand perform interdisciplinary case management.
- To advice regarding case management involving surgical and interim treatment
- Should be competent in specialization of team management in craniofacial prosthesis design.
- To have adequate acquired knowledge, and understanding of applied basic, and systemic medical science knowledge in general and in particular to head and neck regions.
- Should attend continuing education programmes, seminars and conferences related to Prosthodontics, thus updating himself/herself.
- To teach and guide his/her team, colleagues and other students.
- Should be able to use information technology tools and carry out research both in basic and clinical areas, with the aim of publishing his/ her work and presenting his/her work at various scientific forums.
- Should have an essential knowledge of personal hygiene, infection control, prevention of cross infection and safe disposal of waste, keeping in view the risk of transmission of potential communicable and transmissible infections like Hepatitis and HIV.
- Should have an ability to plan and establish Prosthodontics clinic/hospital teaching department and practice management.
- Should have a sound knowledge (of the applications in pharmacology, effects of drugs on oral tissues and systems of body and in medically compromised patients.

SKILLS:

 The candidate should be able to examine the patients requiring Prosthodontic therapy, investigate the patient systemically, analyze the investigation results, radiographs, diagnose the ailment, plan the treatment, communicate it with the patient and execute it.

- To understand the prevalence and prevention of diseases of craniomandibular system related to prosthetic dentistry.
- The candidate should be able to restore lost functions of stomatognathic system like mastication, speech, appearance and psychological comforts by understanding biological, biomedical, bioengineering principles and systemic conditions of the patients to provide quality health care in the craniofacial regions.
- The candidate should be able to demonstrate good interpersonal, communication skills and team approach in interdisciplinary care by interacting with other specialties including medical specialty for planned team management of patients for craniofacial & oral acquired and congenital defects, temporomandibular joint syndromes, esthetics, Implant supported Prosthetics and problems of Psychogenic origins.
- Should be able to demonstrate the clinical competence necessary to carry out appropriate treatment at higher level of knowledge, training and practice skills currently available in their specialty area with a patient centered approach.
- Should be able to interpret various radiographs like IOPA, OPG, CBCT and CT. Should and be able to plan and modify treatment plan based on radiographic findings
- Should be able to critically appraise articles published and understand various components of different types of articles and be able to gather the weight of evidence from the same
- To identify target diseases and create awareness amongst the population regarding Prosthodontic therapy.
- To perform Clinical and Laboratory procedures with a clear understanding of biomaterials, tissue conditions related to prosthesis and have required dexterity & skill for performing clinical and laboratory all procedures in fixed, removable, implant, maxillofacial, TMJ and esthetics Prosthodontics.
- To carry out necessary adjunctive procedures to prepare the patient before prosthesis like tissue preparation and preprosthetic surgery and to prepare the patient before prosthesis / prosthetic procedures
- To understand demographic distribution and target diseases of Cranio mandibular region related to Prosthodontics.

ATTITUDES:

- To adopt ethical principles in Prosthodontic practice, Professional honesty, credibility and integrity are to be fostered. Treatment to be delivered irrespective of social status, caste, creed or religion of patient.
- Should be willing to share the knowledge and clinical experience with professional colleagues.
- Should develop an attitude towards quality, excellence, *non-compromising* in treatment.
- Should be able to self-evaluate, reflect and improve on their own.
- Should pursue research in a goal to contribute significant, relevant and useful information, concept or methodology to the scientific fraternity.
- Should be able to demonstrate *evidence-based* practice while handling cases
- Should be willing to adopt new methods and techniques in prosthodontics from time to time based on scientific research, which are in patient's best interest.
- Should respect patient's rights and privileges, including patient's right to information and right to seek second opinion.

COMMUNICATIVE ABILITIES:

- To develop communication skills, in particular **and** to explain treatment options available in the management.
- To provide leadership and get the best out of his / her group in a congenial working atmosphere.
- Should be able to communicate in simple understandable language with the patient and explain the principles of prosthodontics to the patient. He/She should be able to guide and counsel the patient with regard to various treatment modalities available.

 To develop the ability to communicate with professional colleagues through various media like Internet, e-mails, videoconferences etc. to render the best possible treatment. Should demonstrate good explanatory and demonstrating ability as a teacher in order to facilitate learning among students

COURSE CONTENTS:

The course content has been identified and categorized as essential knowledge given below.

ESSENTIAL KNOWLEDGE:

The topics to be considered are Applied Basic Sciences, Oral and Maxillofacial Prosthodontics and Implantology

APPLIED BASIC SCIENCES:

Should develop thorough knowledge on the applied aspects of Anatomy, Embryology, Histology particularly head and neck, Physiology, Biochemistry, Pathology, Microbiology, Virology, Pharmacology, Health and systematic diseases principles in surgery medicine and Anesthesia, Nutrition, Behavioral sciences, age changes, genetics, Dental Material Science, congenital defects and Syndromes and Anthropology, Biomaterial Sciences, Bio-engineering and Bio-medical and Research Methodology as related to Masters degree Prosthodontics and Crown & Bridge including Implantology

It is desirable to have adequate knowledge in Bio-statistics, Research Methodology and use of computers to develop necessary teaching skills in the specialty of Prosthodontics including crown and bridge.

APPLIED ANATOMY OF HEAD AND NECK:

General Human Anatomy –Gross Anatomy, anatomy of Head and Neck in detail:Cranial and facial bones, TMJ and function, muscles of mastication and facial expression, muscles of neck and back including muscles of deglutition and tongue, arterial supply and venous drainage of the head and neck, anatomy of the Para nasal sinuses in relation to the Vth cranial nerve. General considerations of the structure and function of the brain, brief considerations of V, VII, XI, XII, cranial nerves and autonomic nervous system of the head and neck. The salivary glands, Pharynx, Larynx Trachea, Oesophagus, Functional Anatomy of masticatory muscles, Deglutition, speech, respiration, and circulation, teeth eruption, morphology, occlusion and function. Anatomy of TMJ, its movements and myofacial pain dysfunction syndrome.

Embryology –Development of the face, tongue, jaws, TMJ, Paranasal sinuses, pharynx, larynx, trachea, esophagus, Salivary glands, Development of oral and Para oral tissues including detailed aspects of tooth formation.

Growth & Development –Facial form and Facial growth and development overview of Dentofacial growth process and physiology from foetal period to maturity and old age,. General physical growth, functional and anatomical aspects of the head, changes in craniofacial skeletal development, relationship between development of the dentition and facial growth.

Dental Anatomy –Anatomy of primary and secondary dentition, concept of occlusion, mechanism of articulation, and masticatory function. Detailed structural and functional study of the oral and Para oral tissues, normal occlusion, development of occlusion in deciduous mixed and permanent dentitions, root length, root configuration & tooth-numbering systems.

Histology –histology of enamel, dentin, Cementum, periodontal ligament and alveolarbone, pulpal anatomy, histology and biological consideration. Salivary glands and Histology of epithelial tissues including glands.

Histology of general and specific connective tissue including bone, , Salivary glands, Histology of skin, oral mucosa, respiratory mucosa, connective tissue, bone, cartilage, cellular elements of blood vessels, blood, lymphatics, nerves, muscles, tongue and tooth

Cell biology –Brief study of the structure and function of the mammalian cell Components of the cell and functions of various types of cells and their consequences with tissue injury

APPLIED PHYSIOLOGY AND NUTRITION:

Introduction, Mastication, deglutition, digestion and assimilation, Homeostasis, fluid and electrolyte balance, blood composition, volume, function, blood groups and hemorrhage, Blood transfusion, circulation, Heart, Pulse, Blood pressure, capillary and lymphatic circulation. Shock, respiration, control, anoxia, hypoxia, asphyxia, artificial respiration. Endocrine glands in particular reference to pituitary, parathyroid and thyroid glands and sex hormones. Role of calcium and Vit D in growth and development of teeth, bone and jaws. Role of Vit. A, C and B complex in oral mucosal and periodontal health. Physiology and function of the masticatory system. Speech mechanism, mastication, swallowing and deglutition mechanism, salivary glands and Saliva

Endocrines – General principles of endocrine activity and disorders relating to pituitary, thyroid, pancreas, parathyroid, adrenals, gonads, including pregnancy and lactation. Physiology of saliva, urine formation, normal and abnormal constituents, Physiology of pain, Sympathetic and parasympathetic nervous system, neuromuscular co-ordination of the stomatognathic system.

Applied Nutrition – General principles, balanced diet, effect of dietary deficiencies and starvation, Diet, digestion, absorption, transportation and utilization & diet for elderly patients.

APPLIED BIOCHEMISTRY:

General principles governing the various biological activities of the body, such as osmotic pressure, electrolytic dissociation, oxidation-reductionCarbohydrates, proteins, liquids and their metabolism, Enzymes, Vitamins, and minerals, Hormones, Blood, Metabolism of inorganic elements, Detoxification in the body & anti metabolites.

APPLIED PHARMACOLOGY AND THERAPEUTICS:

Dosage and mode of administration of drugs. Action and fate of drugs in the body, Drug addiction, tolerance and hypersensitive reactions, Drugs acting on the central nervous system, general anesthetics hypnotics, analeptics and tranquilizers. Local anesthetics, Chemotherapeutics and antibiotics, Antitubercular and anti syphilitic drugs, Analgesics and antipyretics, Antiseptics, styptics, Sialogogues and antisialogogues, Haematinics, Cortisones, ACTH, insulin and other antidiabetics vitamins: A, D, B – complex group C, K etc. Chemotherapy and Radiotherapy. Drug regime for antibiotic prophylaxis and infectious endocarditis and drug therapy following dental surgical treatments like placement of implants, pre and peri prosthetic surgery

APPLIED PATHOLOGY:

Inflammation, repair and degeneration, Necrosis and gangrene, Circulatory disturbances, Ischaemia, hyperaemia, chronic venous congestion, oedema, thrombosis, embolism and infarction. Infection and infective granulomas, Allergy and hypersensitive reactions, Neoplasms; Classification of tumors, Carcinogenesis, characteristics of benign and malignant tumors, spread of tumors. Applied histo pathology and clinical pathology.

APPLIED MICROBIOLOGY:

Immunity, knowledge of organisms commonly associated with diseases of the oral cavity (morphology cultural characteristics etc) of strepto, staphylo, , Clostridia group of organisms, Spirochaetes, organisms of tuberculosis, leprosy, diphtheria, actinomycosis and moniliasis etc. Virology, Cross infection control, sterilization and hospital waste management

APPLIED ORAL PATHOLOGY:

Developmental disturbances of oral and Para oral structures, Regressive changes of teeth, Bacterial, viral and mycotic infections of the oral cavity. Dental caries, diseases of pulp and periapical tissues, Physical and chemical injuries of the oral cavity, oral manifestations of metabolic and endocrine disturbances, Diseases of the blood and blood forming organism in relation to the oral cavity, Periodontal diseases, Diseases of the skin, nerves and muscles in relation to the Oral cavity.

LABORATORY DETERMINATIONS:

Blood groups, blood matching, R.B.C. and W.B.C. count, Bleeding and clotting time, PT, PTT and INR Smears and cultures – urine analysis and culture. Interpretation of RBS, Glycosylated Hb, GTT

BIOSTATISTICS:

Characteristics and limitations of statistics, planning of statistical experiments, sampling, collection, classification and presentation of data (Tables, graphs, pictograms etc) & Analysis of data, parametric and non parametric tests

Introduction to Biostatistics - Scope and need for statistical application to biological data. Definition of selected terms – scale of measurements related to statistics, Methods of collecting data, presentation of the statistical diagrams and graphs.

Frequency curves, mean, mode of median, Standard deviation and co-efficient of variation, Correlation – Co-efficient and its significance, Binominal distributions normal distribution and Poisson's distribution, Tests of significance.

RESEARCH METHODOLOGY:

Understanding and evaluating dental research, scientific method and the behavior of scientists, understanding to logic – inductive logic – analogy, models, authority, hypothesis and causation,. Measurement and Errors of measurement, presentation of results, Reliability, Sensitivity and specificity diagnosis tests and measurements, Research Strategies, Observation, Correlation, Experimentation and Experimental design. Logic of statistical in(ter)ferences, balance judgements, judgement under uncertainty, clinical vs., scientific judgement, problems with clinical judgement, forming scientific judgements, the problem of contradictory evidence, citation analysis as a Means of literature evaluation, influencing judgement:

Protocol writing for experimental, observational studies, survey including hypothesis, PICO statement, aim objectives, sample size justification, use of control/placebo, standardization techniques, bias and its elimination, blinding, evaluation, inclusion and exclusion criteria.

APPLIED RADIOLOGY:

Introduction, radiation, background of radiation, sources, radiation biology, somatic damage, genetic damage, protection from primary and secondary radiation, Principles of X-ray production, Applied principles of radio therapy and after care.

ROENTGENOGRAPHIC TECHNIQUES:

Intra oral, extra oral roentgenography, Methods of localization digital radiology and ultra sounds. Normal anatomical landmarks of teeth and jaws in radiograms, temporomandibular joint radiograms, neck radiograms. Use of CT and CBCT in prosthodontics

APPLIED MEDICINE:

Systemic diseases and (its) their influence on general health and oral and dental health. Medical emergencies like syncope, hyperventilation, angina, seizure, asthma and allergy/anaphylaxis in the dental offices — Prevention, preparation, medico legal consideration, unconsciousness, respiratory distress, altered consciousness, seizures, drug related emergencies, chest pain, cardiac arrest, premedication, prophylaxis and management of ambulatory patients, resuscitation, applied psychiatry, child, adult and senior citizens.

APPLIED SURGERY & ANESTHESIA:

General principles of surgery, wound healing, incision wound care, hospital care, control of hemorrhage, electrolyte balance. Common bandages, sutures, splints, shifting of critically ill patients, prophylactic therapy, bone surgeries, grafts, etc, surgical techniques, nursing assistance, anesthetic assistance.

Principles in speech therapy, surgical and radiological craniofacial oncology, applied surgical ENT and ophthalmology.

APPLIED PLASTIC SURGERY:

Applied understanding and assistance in programs of plastic surgery for prosthodontics therapy.

APPLIED DENTAL MATERIALS:

- Students should have understanding of all materials used for treatment of craniofacial disorders – Clinical, treatment, and laboratory materials, associated materials, technical considerations, shelf life, storage, manipulations, sterilization, and waste management.
- Students shall acquire knowledge of testing biological, mechanical and other physical properties of all materials used for the clinical and laboratory procedures in prosthodontic therapy.
 - Students shall acquire full knowledge and practice of Equipments, instruments, materials, and laboratory procedures at a higher level of competence with accepted methods.

All clinical practices shall involve personal and social obligation of cross infection control, sterilization and waste management.

ORAL AND MAXILLOFACIAL PROSTHODONTICS AND IMPLANTOLOGY:

I. NON-SURGICAL AND SURGICAL METHODS OF PROSTHODONTICS AND IMPLANTOLOGY

- a. Prosthodontic treatment for completely edentulous patients Complete dentures, immediate complete dentures, single complete dentures, tooth supported complete dentures & Implant supported Prosthesis for completely edentulous patients for typical and atypical cases
- b. Prosthodontic treatment for partially edentulous patients: Clasp-retained acrylic and cast partial dentures, transitional dentures, immediate dentures,

intra coronal and extra coronal precision attachments retained partial dentures & maxillofacial prosthesis for typical and atypical cases

Prosthodontic treatment for edentulous patients: - Complete Dentures and Implant supported Prosthesis.

Complete Denture Prosthesis – Definitions, terminologies, G.P.T., Boucher's clinical dental terminology

Scope of Prosthodontics – The Cranio Mandibular system and its functions, the reasons for loss of teeth, consequences of loss of teeth and treatment modality with various restorations and replacements

- a) **Edentulous Predicament**, Biomechanics of the edentulous state, Supportmechanism for the natural dentition and complete dentures, Biological considerations, Functional and Para functional considerations, Esthetic, behavioral and adaptive responses, Temporomandibular joints changes.
- b) **Effects of aging of edentulous patients** –aging population, distribution andedentulism in old age, impact of age on edentulous mouth Mucosa, Bone, saliva, jaw movements in old age, taste and smell, nutrition, aging, skin and teeth, concern for personal appearance in old age
- c) Sequelae caused by wearing complete denture —the denture in the oralenvironment Mucosal reactions, altered taste perception, burning mouth syndrome, gagging, residual ridge (reduction) resorption, denture stomatitis, flabby ridge, denture irritation hyperplasia, traumatic Ulcers, Oral cancer in denture wearers, nutritional deficiencies, masticatory ability and performance, nutritional status and masticatory functions.
- d) **Temporomandibular disorders in edentulous patients** –Epidemiology,etiology and management, Pharmacotherapy, Physical modalities, and Bio-behavioral modalities
- e) **Nutrition Care for the denture wearing patient** –Impact of dental status onfood intake, Gastrointestinal functions, nutritional needs and status of older adults, Calcium and bone health, vitamin and herbal supplementation, dietary counseling and risk factor for malnutrition in patients with dentures and when teeth are extracted.
- Preparing patient for complete denture patients —Diagnosis and treatment planning for edentulous and partially edentulous patients familiarity with patients, principles of perception, health questionnaires and identification data, problem identification, prognosis and treatment identification data, problem identification, prognosis and treatment planning contributing history patient's history, social information, medical status —

systemic status with special reference to debilitating diseases, diseases of the joints, cardiovascular disorders, diseases of the skin, neurological disorders, oral malignancies, climacteric, use of drugs, mental health – mental attitude, psychological changes, adaptability, geriatric changes – physiologic, pathological, pathological and intra oral changes. Intra oral health – mucus membrane, alveolar ridges, palate and vestibular sulcus and dental health.

Data collection and recording, visual observation, radiography, palpation, measurement of sulci or fossae, extra oral measurement, the vertical dimension of occlusion, diagnostic casts.

Specific observations – existing dentures, soft tissue health, hard tissue health – teeth, bone

Biomechanical considerations – jaw relations, border tissues, saliva, muscular development – muscle tone, neuromuscular co-ordination, tongue, cheek and lips. Interpreting diagnostic findings and treatment planning

- g) **Pre prosthetic surgery** –Improving the patients denture bearing areas andridge relations.
- h) **Non surgical methods** –rest for the denture supporting tissues, occlusal correction of the old prosthesis, good nutrition, conditioning of the patients musculature,
- i) **Surgical methods** –Correction of conditions, that preclude optimal prosthetic function hyperplastic ridge epulis fissuratum and papillomatosis, frenular attachments

and pendulous maxillary tuberosities, ridge augmentation, maxillary and mandibular oral implants, corrections of congenital deformities, discrepancies in jaw size, relief of pressure on the mental foramen, enlargement of denture bearing areas, vestibuloplasty, ridge augmentation, replacement of tooth roots with Osseo integrated denture implants.

j) **Immediate Denture** –Advantages, Disadvantages, Contraindications, Diagnosis, treatment planning and Prognosis, Explanation to the patient, Oral examinations, Examination of existing prosthesis, Tooth modification, Prognosis, Referrals/adjunctive care, oral prophylaxis and other treatment needs.

First visit, preliminary impressions and diagnostic casts, management of loose teeth, custom trays, final impressions and master casts, two tray or sectional custom impression tray, location of posterior limit and jaw relation records, setting of the posterior denture teeth / verifying jaw relations and the patient try in.

Laboratory phase, setting of anterior teeth, Wax contouring, flasking and boil out, processing and finishing, surgical templates, surgery and immediate denture insertion, post operative care and patient instructions, subsequent service for the patient on the immediate denture.

- k) **Over dentures** (tooth supported complete dentures)—indications andtreatment planning, advantages and disadvantages, selection of abutment teeth, loss of abutment teeth, tooth supported complete dentures. Non-coping abutments, abutment with copings, abutments with attachments, submerged vital roots, preparations of the retained teeth.
- I) Single Dentures: Single Mandibular denture to oppose natural maxillaryteeth, single complete maxillary denture to oppose natural Mandibular teeth to oppose a partially edentulous Mandibular arch with fixed prosthesis, partially edentulous Mandibular arch with removable partial dentures. Opposing existing complete dentures, preservation of the residual alveolar ridge, necessity for retaining maxillary teeth and preventing mental trauma.
- m) Art of communication in the management of the edentulous predicament Communication—scope, a model of communication, why communication is important? What are the elements of effective communication? special significance of doctor / patient communication, doctor behavior, The iatro sedative (doctor & act of making calm) recognizing and acknowledging the problem, exploring and identifying the problem, interpreting and explaining the problem, offering a solution to the problem for mobilizing their resources to operate in a most efficient way, recognizing and acknowledging the problem, interpreting and explaining the problem, offering a solution to the problem.
- n) Materials prescribed in the management of edentulous patients Denture base materials, General requirements of biomaterials for edentulous patients, requirement of an ideal denture base, chemical composition of denture base resins, materials used in the fabrication of prosthetic denture teeth, requirement of prosthetic denture teeth, denture lining materials and tissue conditioners, cast metal alloys as denture bases – base metal alloys.
- Articulators Evolution of concepts, Classification, selection, limitations, precision, accuracy andsensitivity, and Functions of the articulator and their uses. Recent advancements including virtual articulator
- Fabrication of complete dentures –complete denture impressions–muscles of facial expressions and anatomical landmarks, support, retention, stability, aims and objectives of preservation, support, stability, aesthetics, and retention. Impression materials and techniques need of 2 impressions the preliminary impression and final impressions.

Developing an analogue / substitute for the maxillary denture bearing area – anatomy of supporting structures – mucous membrane, hard palate, residual ridge, shape of the supporting structure and factors that influence the form and size of the supporting bones, incisive foramen, maxillary tuberosity, sharp spiny process, torus palatinus, Anatomy of peripheral or limiting structures, labial vestibule, Buccal vestibule, vibrating lines. Preliminary and final impressions, impression making, custom tray and refining the custom tray, preparing the tray to secure the final impression, making the final impression, boxing impression and making the casts

Developing an analogue / substitute for the Mandibular denture bearing areaanatomy of supporting structure, crest of the residual ridge, buccal shelf, shape of supporting structure, mylohyoid ridge, mental foramen, genial tubercles, torus mandibularis, Anatomy of peripheral or limiting structure – labial vestibule, Buccal vestibule, lingual border, mylohyoid muscle, retromylohyoid fossa, sublingual gland region, alveolingual sulcus, Mandibular impressions – preliminary impressions, custom tray, refining, preparing the tray\, final impressions.

q) Mandibular movements, Maxillo mandibular relations and concepts of occlusion – Gnathology, identification of shape and location of arch form–Mandibular and maxillary occlusion rims, level of occlusal plane and recording of trail denture base, tests to determine vertical dimension of occlusion, interocclusal & centric relation records. Biological and clinical considerations in making jaw relation records and transferring records from the patients to the articulator, Recording of Mandibular movements – influence of opposing tooth contacts, temporomandibular joint, muscular involvements, neuromuscular regulation of Mandibular motion, the envelope of motion, rest position.

Maxillo – Mandibular relations – the centric, eccentric, physiologic rest position, vertical dimension, occlusion, recording methods – mechanical, physiological, Determining the horizontal jaw relation – Functional graphics, tactile or interocclusal check record method, Orientation / sagittal relation records, Arbitrary / Hinge axis and face bow record, significance and requirement, principles and biological considerations and securing on articulators.

r) Selecting and arranging artificial teeth and occlusion for the edentulous patient – anterior tooth selection, posterior tooth selection, and principles in

arrangement of teeth, and factors governing the position of teeth – horizontal & vertical relations. The inclinations and arrangement of teeth for aesthetics, phonetics and mechanics – to concept of occlusion.

- s) The Try in –verifying vertical dimension, centric relation, establishment ofposterior palatal seal, creating a facial and functional harmony with anterior teeth, harmony of spaces of individual teeth position, harmony with sex, personality and age of the patient, co-relating aesthetics and incisal guidance.
- t) Speech considerations with complete dentures & speech production –structural and functional demands, neuropsychological background, speech production and the roll of teeth and other oral structures bilabial sounds, labiodental(s) sounds, linguodental sounds, linguoalveolar sound, articulatoric characteristics, acoustic characteristics, auditory characteristics, linguopalatal and linguoalveolar sounds, speech analysis and prosthetic considerations.
- u) Waxing contouring and processing the dentures their fit and insertion and after care –laboratory procedure–wax contouring, flasking and processing, laboratory remount procedures, *selective grinding*, finishing and polishing.

Critiquing the finished prosthesis – doctors evaluation, patients evaluation, friends evaluation, elimination of basal surface errors, errors in occlusion, interocclusal records for remounting procedures – verifying centric relation, eliminating occlusal errors.

Special instructions to the patient – appearance with new denture, mastication with new dentures, speaking with new dentures, oral hygiene with dentures, <u>preservation</u> of residual ridges and educational material for patients, maintaining the comfort and health of the oral cavity in the rehabilitated edentulous patients. Twenty-four hours oral examination and treatment and (preventive) Prosthodontic – periodontic recall for oral examination 3 to 4 months intervals and yearly intervals.

v) Implant supported Prosthesis for partially edentulous patients —Scienceof Osseo integration, clinical protocol (diagnostic, surgical and prosthetic) for treatment with implant supported over dentures, managing problems and complications. Implant Prosthodontics for edentulous patients: current and future directions.

Implant supported prosthesis for partially edentulous patients – Clinical and laboratory protocol: Implant supported prosthesis, managing problems and complications

- o Introduction and Historical Review
- o Biological, clinical and surgical aspects of oral implants
- Diagnosis and treatment planning

- Radiological interpretation for selection of fixtures
- Splints for guidance fort surgical placement of fixtures
- o Surgical and Intra oral plastic surgery, if any
- o Guided bone and Tissue regeneration consideration for implants fixture.
- Implant supported prosthesis for complete edentulism and partial edentulism
- Occlusion for implant supported prosthesis.
- Peri-implant tissue and Management of peri-implantitis
- Maintenance and after care
- Management of failed restoration.
- Work authorization for implant supported prosthesis definitive instructions, legal aspects, delineation of responsibility.

Prosthodontic treatment for partially edentulous patients – Removable partial Prosthodontics –

- a. **Scope**, **definition** and terminology, Classification of partially edentulous arches requirements of an acceptable method of classification, Kennedy's classification, Applegate's rules for applying the Kennedy classification
 - b. Components of RPD -
 - i) major connector-mandibular and maxillary
 - ii) minor connectors, design, functions & form and location of major and minor connectors, tissue stops, finishing lines, reaction of tissue to metallic coverage
- iii) Rest and rest seats form of the Occlusal rest and rest seat, interproximal Occlusal rest seats, internal Occlusal rests, possible movements of partial dentures, support for rests, lingual rests on canines and incisor teeth, incisal rest and rest seat.
- iv) Direct retainers- Internal attachments & extracoronal direct retainers. Relative uniformity of retention, flexibility of clasp arms, stabilizing reciprocal clasp, criteria for selecting a given clasp design, the basic principles of clasp design, circumferential clasp, bar clasp, combination clasp and other type of retainers.
- v) Indirect Retainers denture rotation about an axis, factors influencing effectiveness of indirect retainers, forms of indirect retainers, auxiliary Occlusal rest, canine extensions from Occlusal rests, canine rests, continuous bar retainers and linguoplates, modification areas, rugae support, direct indirect retention.
 - (vi) Teeth and denture bases types, materials, advantages and dis-advantages, indications and contraindications and clinical use.

Principles of removable partial Denture design — Bio mechanical considerations, and the factors influencing after mouth preparations — Occlusal relationship of remaining teeth, orientation of Occlusal plane, available space for restoration, arch integrity, tooth morphology, response of oral structure to previous stress, periodontal conditions, abutment support, tooth supported and tooth and tissue supported, need for indirect retention, clasp design, need for rebasing, secondary impression, need for abutment tooth modification, type of major connector, type of teeth selection, patients past experience, method of replacing single teeth or missing anterior teeth.

Difference between tooth supported and tissue supported partial dentures. Essentials of partial denture design, components of partial denture design, tooth support, tissue support, stabilizing components, guiding planes, use of splint bar for denture support, internal clip attachments, overlay abutment as support for a denture base, use of a component partially to gain support.

- c. Education of patient
- d. Diagnosis and treatment planning
- e. Design, treatment sequencing and mouth preparation
- f. Surveying –Description of dental surveyor, purposes of surveying, Aims andobjectives in surveying of diagnostic cast and master cast, Final path of insertion, factors that determine path of insertion and removal, Recording relation of cast to surveyor, measuring amount of retentive area Blocking of

- master cast paralleled blockout, shaped blockout, arbitrary blockout and relief.
- g. **Diagnosis and treatment planning** —Infection control and cross infectionbarriers clinical and laboratory and hospital waste management, Objectives of prosthodontic treatment, Records, systemic evaluation, Oral examination, preparation of diagnostic cast, interpretation of examination data, radiographic interpretation, periodontal considerations, caries activity, prospective surgical preparation, endodontic treatment, analysis of occlusal factors, fixed restorations, orthodontic treatment, need for determining the design of components, impression procedures and occlusion, need for reshaping remaining teeth, reduction of unfavorable tooth contours, differential diagnosis: fixed or removable partial dentures, choice between complete denture and removable partial dentures, choice of materials
- h. **Preparation of Mouth for removable partial dentures** –Oral surgicalpreparation, conditioning of abused and irritated tissues, periodontal preparation objectives of periodontal therapy, periodontal diagnosis, control therapy, periodontal surgery.
- i. **Preparation of Abutment teeth** –Classification of abutment teeth, sequenceof abutment preparations on sound enamel or existing restorations, conservative restorations using crowns, splinting abutment teeth, utilization, temporary crowns to be used as abutment.
- j. Impression Materials and Procedures for Removable Partial Dentures –Rigid materials, thermoplastic materials, Elastic materials, Impressions of the partially edentulous arch, Tooth supported, tooth tissue supported, Individual impression trays.
- k. **Support for the Distal Extension Denture Base** –Distal extension removable partial denture, Factors influencing the support of distal extension base, Methods of obtaining functional support for the distal extension base.
- Laboratory Procedures –Duplicating a stone cast, Waxing the partialdenture framework, Anatomic replica patterns, Spruing, investing, burnout, casting and finishing of the partial denture framework, making record bases, occlusion rims, making a stone occlusal template from a functional occlusal record, arranging posterior teeth to an opposing cast or template, arrangement of anterior teeth, waxing and investing the partial denture before processing acrylic resin bases, processing the denture, remounting and occlusal correction to an occlusal template, polishing the denture.
- m. **Initial placement, adjustment and servicing of the removable partial denture**-adjustments to bearing surfaces of denture framework, adjustmentof occlusion in harmony with natural and artificial dentition, instructions to the patient, follow up services
- n. **Relining and Rebasing the removable partial denture** —Relining toothsupported dentures bases, relining distal extension denture bases, methods of reestablishing occlusion on a relined partial denture.
- o. **Repairs and additions to removable partial dentures** —Broken clasp arms,fractured occlusal rests, distortion or breakage of other components major and minor connectors, loss of a tooth or teeth not involved in the support or retention of the restoration, loss of an abutment tooth necessitating its replacement and making a new direct retainer, Other types of repairs & repair by soldering.
- p. Removable partial denture considerations in maxillofacial prosthetics Maxillofacial prosthetics, intra oral prosthesis, design considerations,
 - maxillary prosthesis, Obturators, speech aids, palatal lifts, palatal augmentations, mandibular prosthesis, treatment planning, framework design, class I resection, Class II resection, mandibular flange prosthesis, jaw relation records.
 - q. Management of failed restorations and work authorization details.

II. MAXILLOFACIAL REHABILITATION:

Scope, terminology, definitions, cross infection control and hospital waste management, work authorization.

Behavioral and psychological issues in Head and neck cancer, Psychodynamic interactions between clinician and patient. **Cancer Chemotherapy:** Oral Manifestations, Complications, and management, **Radiation therapy of head and neck tumors:** Oral effects, Dental manifestations and dental treatment: Etiology, treatment and rehabilitation (restoration).

Acquired defects of the mandible, acquired defects of hard palate, soft palate, clinical management of edentulous and partially edentulous maxillectomy patients, Facial defects, Restoration of speech, Velopharyngeal function, cleft lip and palate, cranial implants, maxillofacial trauma, Lip and cheek support prosthesis, Laryngectomy aids, Obstructive sleep apnoea, Tongue prosthesis, Oesophageal prosthesis, radiation carriers, Burn stents, Nasal stents, Vaginal and anal stents, Auditory inserts, Trismus appliances, mouth controlled devices for assisting the handicapped, custom prosthesis, conformers, and orbital prosthesis for ocular and orbital defects. Osseo integrated supported facial and maxillofacial prosthesis. Resin bonding for maxillofacial prosthesis, cranial prosthesis Implant rehabilitation of the mandible compromise by radiotherapy, Prosthodontic treatment, Material and laboratory procedures for maxillofacial prosthesis.

III. OCCLUSION

EVALUATION, DIAGNOSIS AND TREATMENT OF OCCLUSAL PROBLEMS:

Scope, definition, terminology, optimum oral health, anatomic harmony, functional harmony, occlusal stability, causes of deterioration of dental and oral health. Anatomical, physiological, neuro – muscular, psychological considerations of teeth; muscles of mastication; temporomandibular joint; intra oral and extra oral and facial musculatures and the functions of Cranio mandibular system.

Occlusal therapy, the stomatognathic system, centric relation, vertical dimension, the neutral zone, the occlusal plane, differential diagnosis of temporomandibular disorders, understanding and diagnosing intra articular problems, relating treatment to diagnosis of internal derangements of TMJ, Occlusal splints. Selecting instruments for occlusal diagnosis and treatment, mounting casts, Pankey-Mann-Schuyler philosophy of complete occlusal rehabilitation, long

centric, anterior guidance, restoring lower anterior teeth, restoring upper anterior teeth, determining the type of posterior occlusal contours, methods for determining the plane of occlusion, restoring lower posterior teeth, restoring upper posterior teeth, functionally generated path techniques for recording border movements intra orally, occlusal equilibration.

Bruxism, Procedural steps in restoring occlusion, requirements for occlusal stability, solving occlusal problems through programmed treatment planning, splinting, solving – occlusal wear problems, deep overbite problems, anterior overjet problems, anterior open bite problems. Treating – end to end occlusion, splaed anterior teeth, cross bite problems, Crowded, irregular, or interlocking anterior bite. Using Cephalometric for occlusal analysis, solving severe arch malrelationship problems, transcranial radiography, postoperative care of occlusal therapy.

IV. FIXED PROSTHODONTICS

Scope, definitions and terminology, classification and principles, design, mechanical and biological considerations of components – Retainers, connectors, pontics, work authorization.

Diagnosis and treatment planning —patients history and interview, patientsdesires and expectations and needs, systemic and emotional health, clinical examinations — head and neck, oral — teeth, occlusal and periodontal, Preparation of diagnostic cast, radiographic interpretation, Aesthetics, endodontics considerations, abutment selection — bone support, root proximities and inclinations, selection of abutments for cantilever, pier

- abutments, splinting, available tooth structures and crown morphology, TMJ and muscles of mastication and comprehensive planning and prognosis.
- Management of Carious teeth —caries in aged population, caries control,removal caries, protection of pulp, reconstruction measure for compromised teeth — retentive pins, horizontal slots, retentive grooves, prevention of caries, diet, prevention of root caries and vaccine for caries.
- Periodontal considerations –attachment units, ligaments, prevention ofgingivitis, periodontitis. Microbiological aspect of periodontal diseases, marginal lesion, occlusal trauma, periodontal pockets in attached gingiva, interdental papilla, gingival embrasures, gingival/periodontal prosthesis, radiographic interpretations of Periodontia, intraoral, periodontal splinting Fixed prosthodontics with periodontially compromised dentitions, placement of margin restorations.
- Biomechanical principles of tooth preparation —individual tooth preparations Complete metal Crowns P.F.C., All porcelain Cerestore crowns, dicor crowns, inceram etc. porcelain jacket crowns; partial 3/4, 7/8, telescopic, pin—ledge, laminates, inlays, onlays. Preparations for restoration of teeth—amalgam, glass Ionomer and composite resins. Resin bond retainers, Gingival marginal preparations Design, material selection, and biological and mechanical considerations intracoronal retainer and precision attachments custom made and prefabricated.
- **Isolation and fluid control** Rubber dam application(s), tissue dilation–softtissue management for cast restoration, impression materials and techniques, provisional restorations, interocclusal records, laboratory support for fixed Prosthodontics, Occlusion, Occlusal equilibration, articulators, recording and transferring of occlusal relations, cementing of restorations.
- Resins, Gold and gold alloys, glass lonomer, restorations.
- Restoration of endodontically treated teeth, Stomatognathic Dysfunction and management
- Management of failed restorations
 Osseo integrated supported fixed Prosthodontics –Osseo integrated supported and tooth supported fixed Prosthodontics
- CAD CAM Prosthodontics

V. TMJ - Temporomandibular joint dysfunction - Scope, definitions, and terminology

Temporomandibular joint and its function, Orofacial pain, and pain from the temporomandibular joint region, temporomandibular joint dysfunction, temporomandibular joint sounds, temporomandibular joint disorders, Anatomy related, trauma, disc displacement, Osteoarthrosis/Osteoarthritis, Hyper mobility and dislocation, infectious arthritis, inflammatory diseases, Eagle's syndrome (Styloid – stylohyoid syndrome), Synovial chondromatosis, Osteochondrosis disease, Ostonecrosis, Nerve entrapment process, Growth changes, Tumors, Radiographic imaging

- Etiology, diagnosis and cranio mandibular pain, differential diagnosis and management of orofacial pain – pain from teeth, pulp, dentin, muscle pain, TMJ pain – psychologic, physiologic – endogenous control, acupuncture analgesia, Placebo effects on analgesia, Trigeminal neuralgia, Temporal arteritis
- Occlusal splint therapy construction and fitting of occlusal splints, management of
 occlusal splints, therapeutic effects of occlusal splints, occlusal splints and general
 muscles performance, TMJ joint uploading and anterior repositioning appliances, use
 and care of occlusal splints.
- Occlusal adjustment procedures Reversible occlusal stabilization splints and physical therapies, jaw exercises, jaw manipulation and other physiotherapy or irreversible therapy – occlusal repositioning appliances, orthodontic treatment,

Orthognathic surgery, fixed and removable prosthodontic treatment and occlusal adjustment, removable prosthodontic treatment and occlusal adjustment. Indication for occlusal adjustment, special nature of orofacial pain, Psychopathological considerations, occlusal adjustment philosophies, mandibular position, excursive guidance, occlusal contact scheme, goals of occlusal adjustment, significance of a slide in centric, Preclinical procedures, clinical procedures for occlusal adjustment.

VI. ESTHETICS

SCOPE, DEFINITIONS:

Morpho psychology and esthetics, structural esthetic rules –facialcomponents, dental components, gingival components and physical components. Esthetics and its relationship to function – Crown morphology, physiology of occlusion, mastication, occlusal loading and clinical aspect in bio esthetic aspects, Physical and physiologic characteristic and muscular activities of facial muscle, perioral anatomy and muscle retaining exercises Smile – classification and smile components, smile design, esthetic restoration of smile, Esthetic management of the dentogingival unit, intraoral materials for management of gingival contours, and ridge contours, Periodontal esthetics, Restorations – Tooth colored restorative materials, the clinical and laboratory aspects, marginal fit, anatomy, inclinations, form, size, shape, color, embrasures & contact point.

Prosthodontic treatment should be practiced by developing skills, by treating various and more number of patients to establish skill to diagnose and treatment and after care with bio-mechanical, biological, bio-esthetics, bio-phonetics. All treatments should be carried out in more numbers for developing clinical skills.

 Infection control, cross infection barrier – clinical & lab; hospital & lab waste management

Teaching / Learning Activities:

The post graduate is expected to complete the following at the end of:

I YEAR M.D.S.

- Theoretical exposure of all applied sciences
- *Pre-clinical* exercises involved in prosthodontic therapy for assessment
- Commencement of library assignment within six months
- To carry out short epidemiological study relevant to prosthodontics.
- Acquaintance with books, journals and referrals.
- To differentiate various types of articles published in and critically appraise based on standard reference guidelines.
- To develop the ability to gather evidence from published articles.
- To acquire knowledge of published books, journals and websites for the purpose
 of gaining knowledge and reference in the field of *Oral and Maxillofacial*Prosthodontics and Implantology
- Acquire knowledge of instruments, equipment, and research tools in Prosthodontics.
- To acquire knowledge of Dental Material Science Biological and biomechanical & bio-esthetics, knowledge of using material in laboratory and clinics including testing methods for dental materials.
- Submit a protocol for their dissertation before Institutional Review Board and Institutional Ethics Committee.
- Participation and presentation in seminars, didactic lectures.

II YEAR M.D.S.

- Acquiring confidence in obtaining various phases and techniques in removable and fixed prosthodontics therapy
- Acquiring confidence by clinical practice with sufficient number of patients requiring tooth and tooth surface restorations
- Fabrication of adequate number of complete denture prosthesis following, higher clinical approach by utilizing semi-adjustable articulators, face bow and graphic tracing.
- Understanding the use of dental surveyor and its application in diagnosis and treatment plan in R.P.D.
- Adequate number of R.P.D's covering all partially edentulous situations.
- Adequate number of Crowns, Inlays, laminates, FDP (fixed dental prosthesis)
 covering all clinical situations.
- Selection of cases and following principles in treatment of partially or complete edentulous patients by implant supported prosthesis.
- Treating single edentulous arch situations by implant supported prosthesis.
- Diagnosis and treatment planning for implant prosthesis.
- Ist stage and IInd stage implant surgery
- Understanding the maxillofacial *Prosthodontics, treating craniofacial and management of orofacial defects*
- Prosthetic management of TMJ syndrome
- Occlusal rehabilitation
- Management of failed restorations.
- Prosthodontic management of patient with psychogenic disorder.
- Practice of child and geriatric prosthodontics.
- Participation and presentation in seminars, didactic and non didactic Teaching and Training students.

III YEAR M.D.S

- Clinical and laboratory practice continued from IInd year.
- Occlusion equilibration procedures fabrication of stabilizing splint for parafunctional disorders, occlusal disorders and TMJ functions.
- Practice of dental, oral and facial esthetics
- The clinical practice of all aspects of Prosthodontic therapy for elderly patients.
- Implants Prosthodontics Rehabilitation of Partial Edentulism, Complete edentulism and craniofacial rehabilitation.
- Failures in all aspects of Prosthodontics and their management and after care.
- Team management for esthetics, TMJ syndrome and Maxillofacial & Craniofacial Prosthodontics
- Management of Prosthodontic emergencies, resuscitation.
- Candidate should complete the course by attending a large number and variety of patients to master the prosthodontic therapy. This includes the practice management, examinations, treatment planning, communication with patients, clinical and laboratory techniques materials and instrumentation required in different aspects of prosthodontic therapy, Tooth and Tooth surface restoration, Restoration of root treated teeth, splints for periodontal rehabilitations and fractured jaws, complete dentures, R.P.D's, F.D.P's,

Immediate dentures, over dentures, implant supported prosthesis, maxillofacial and body prosthesis, occlusal rehabilitation.

- Prosthetic management of TMJ syndrome
- Management of failed restorations
- Should complete and submit Main Dissertation assignment 6 months prior to examination.

- Candidates should acquire complete theoretical and clinical knowledge through seminars, symposium, workshops and reading.
- Participation and presentation in seminars, didactic lectures

PROSTHODONTIC TREATMENT MODALITIES

- 1) Diagnosis and treatment planning prosthodontics
- 2) Tooth and tooth surface restorations
 - Fillings

 - Veneers composites and ceramics Inlays- composite, ceramic and alloys Onlay composite, ceramic and alloys Partial crowns ¾ th, 4/5th, 7/8th, Mesial ½ crowns Pin-ledge

 - Radicular crowns
 - Full crowns

3) Tooth replacements

		Partial	Complete
•	Tooth supported	Fixed partial denture	Overdenture
•	Tissue supported	Interim partial denture Intermediate partial denture	Complete denture Immediate denture
			Immediate complete denture
•	Tooth and tissue Supported	Cast partial denture Precision attachment	Overdenture
•	Implant supported	Cement retained Screw retained Clip attachment	Bar attachment Ball attachment
•	Tooth and implant Supported	Screw retained Cement retained	Screw retained Cement retained
•	Root supported	Dowel and core Pin retained	Over denture

- Precision attachments
 - Intra coronal attachments
 - Extra coronal attachments
 - Bar slide attachments
 - Joints and hinge joint attachments
- 4) Tooth and tissue defects (Maxillo- facial and Cranio-facial prosthesis)

A. Congenital Defects

- a. Cleft lip and palate
- b. Pierre Robin Syndrome
- c. Ectodermal dysplasia
- d. Hemifacial microstomia
- e. Anodontia
- f. Oligodontia
- g. Malformed teeth

cast partial dentures implant supported prosthesis complete dentures fixed partial dentures

B. Acquired defects

- a. Head and neck cancer patients prosthodontic splints and stents
- b. Restoration of facial defects
 - Auricular prosthesis
 - Nasal prosthesis
 - Orbital prosthesis
 - Craniofacial implants
- c. Midfacial defects

h.

- d. Restoration of maxillofacial trauma
 - e. Hemimandibulectomy
 - f. Maxillectomy

Dentures

g. Lip and cheek support prosthesis

- Ocular prosthesis
- i. Speech and Velopharyngeal prosthesis
- j. Laryngectomy aids
- k. Esophageal prosthesis
- Nasal stents
- m. Tongue prosthesis
- n. Burn stents
- o. Auditory inserts
- p. Trismus appliances

5) T.M.J and Occlusal disturbances

- a. Occlusal equilibration
- b. Splints Diagnostic
 - Repositioners / Deprogrammers
- c. Anterior bite planes
- d. Posterior bite planes
- e. Bite raising appliances
- f. Occlusal rehabilitation

6) Esthetic/Smile designing

- a. Laminates / Veneers
- b. Tooth contouring (peg laterals, malformed teeth)
- c. Tooth replacements
- d. Team management

7) Psychological therapy

cast partial denture implant supported

complete dentures

- a. Questionnaires
- b. Charts, papers, photographs
- c. Models
- d. Case reports
- e. Patient counseling
- f. Behavioral modifications
- g. Referrals

8) Geriatric Prosthodontics

- a. Prosthodontics for the elderly
- b. Behavioral and psychological counseling
- c. Removable Prosthodontics
- d. Fixed Prosthodontics
- e. Implant supported Prosthodontics
- f. Maxillofacial Prosthodontics
- g. Psychological and physiological considerations

9) Preventive measures

- a. Diet and nutrition modulation and counseling
- b. Referrals

The bench work should be completed before the start of clinical work during the first year of the MDS Course

I. Complete dentures

- 1. Arrangements on adjustable articulator for
 - Class I
 - Class II
 - Class III
- 2. Various face bow transfers to adjustable articulators
- 3. Processing of characterized anatomical dentures

II. Removable partial dentures

- 1. Design for Kennedy's Classification
 - (Survey, block out and design)
 - a. Class I
 - b. Class II
 - c. Class III
 - d. Class IV
- 2. Designing of various components of RPD
- 3. Wax pattern on refractory cast
 - a. Class I
 - b. Class II
 - c. Class III
 - d. Class IV
- 4. Casting and finishing of metal frameworks
- 5. Acrylisation on metal frameworks for

Class I

Class III with modification

III. Fixed Partial Denture

- 1. Preparations on ivory teeth / natural teeth
 - FVC for metal
 - FVC for ceramic
 - Porcelain jacket crown
 - Acrylic jacket crown
 - PFM crown
 - 3/4th (canine, premolar and central)

- 7/8th posterior
- Proximal half crown
- Inlay Class I, II, V
- Onlay Pin ledged, pinhole
- Laminates

2. Preparation of different die systems

- 3. Fabrication of wax patterns by drop wax build up technique
 - Wax in increments to produce wax coping over dies of tooth preparations on substructures
 - · Wax additive technique
 - 3-unit wax pattern (maxillary and Mandibular)
 - Full mouth

4. Pontic designs in wax pattern

- Ridge lap
- Sanitary
- Modified ridge lap
- Modified sanitary
- · Spheroidal or conical

5. Fabrication of metal frameworks

- Full metal bridge for posterior (3 units)
- Coping for anterior (3 unit)
- Full metal with acrylic facing
- · Full metal with ceramic facing
- Adhesive bridge for anteriors
- Coping for metal margin ceramic crown
- Pin ledge crown

6. Fabrication of crowns

- · All ceramic crowns with characterisation
- Metal ceramic crowns with characterisation
- Full metal crown
- Precious metal crown
- Post and core

7. Laminates

- Composites with characterisation
- · Ceramic with characterisation
- Acrylic

8. Preparation for composites

- Laminates
- Crown
- Inlay
- Onlay
- Class I
- Class II
- Class III
- Class IV
- · Fractured anterior tooth

IV. Maxillofacial prosthesis

Eye

- Ear
- Nose
- Face
- Body defects
- o Cranial
- Maxillectomy
- Hemimandibulectomy
- o Finger prosthesis
- Guiding flange
- Obturator

V. Implant supported prosthesis

1. Step by step procedures - Surgical and laboratory phase

VI. Other exercises

- TMJ splints stabilization appliances, maxillary and Mandibular repositioning appliances
- 2. Anterior disocclusion appliances
- 3. Chrome cobalt and acrylic resin stabilization appliances
- 4. Modification in accommodation of irregularities in dentures
- 5. Occlusal splints
- 6. Periodontal splints
- 7. Precision attachments custom made
- 8. Over denture coping
- 9. Full mouth rehabilitation (by drop wax technique, ceramic build up)
- 10. TMJ appliances stabilization appliances

ESSENTIAL SKILLS:

*Kev

O – Washes up and observes

A – Assists a senior

PA – Performs procedure under the direct supervision of a senior specialist

PI - Performs independently

The following list of procedures are expected of the post graduate to complete in the post graduate programme under faculty guidance [PA] or independently [PI]. Each of the following procedures should be evaluated for the competencies like critical thinking, patient centered approach, use of evidence based approach, professionalism, systems based practice approach and communication skills of the student. The mentioned numbers denote minimal requirement. However, the head of the department has the discretion to fix the quota and assess them systematically. There may be procedures which the student has observed [O] or assisted [A]. The student can however make his entry into his log book or portfolio wherein he/she can make his comments with remarks of the facilitator in the form of a feedback which would reinforce his learning.

PROCEDURE		CATE	GORY	
	0	Α	PA	PI
Tooth and tooth surface restoration				
a) Composites – fillings, laminates, inlay, onlay				5
b) Ceramics – laminates, inlays, onlays				5
c) Glass Ionomer				5
CROWNS				

FVC for metal	I	1	I	10
FVC for ceramic				10
Precious metal crown or Galvanoformed crown	1	_	1	5
Intraradicular crowns (central, lateral, canine,	'		'	
premolar,		_	_	5
and molar)				
Crown as implant supported prosthesis	As many	5	5	5
	AS IIIally	5)	<u> </u>
FIXED PARTIAL DENTURES	T			1 40
Porcelain fused to metal (anterior and posterior)				10
Multiple abutments – maxillary and Mandibular				_
full arch				5
Incorporation of custom made and				
prefabricated			2	
precision attachments				
Adhesive bridge for anterior/posterior		_		5
CAD – CAM Anterior/Posterior FPD	_	_		5
Grib Grim Function Frederick Fred				for all
Interim provisional restorations (crowns and				crowns and
FPDs)				bridges
Immediate fixed partial dentures (interim) with				
ovate pontic		-	-	5
Fixed prosthesis as a retention and rehabilitation				
means				5
for acquired and congenital defects -				
maxillofacial				
Prosthetics				
Implant supported prosthesis		-		1
Implant – tooth supported prosthesis		-		1
REMOVABLE PARTIAL DENTURE	•		•	•
Provisional partial denture prosthesis				10
Cast removable partial denture (for Kennedy's	1			
Applegate				3
classification with modifications)				
Removable bridge with precision attachments				
and				1
Telescopic crowns for anterior and posterior				
edentulous				
Spaces				
Immediate RPD				5
Partial denture for medically compromised				<u> </u>
and				2
				_
Handicapped patients	<u> </u>			
COMPLETE DENTURES	1			
Anatomic characterized prosthesis (by using				25
semi	-	-		25
adjustable articulator)				_
Single dentures	-	-		5
	ı - I	-		5
Overlay dentures	1			I
Interim complete dentures as a treatment				_
Interim complete dentures as a treatment prosthesis for	-	-		5
Interim complete dentures as a treatment prosthesis for abused denture supporting tissues	-	-		5
Interim complete dentures as a treatment prosthesis for abused denture supporting tissues Complete denture prosthesis (for abnormal ridge	-	-		
Interim complete dentures as a treatment prosthesis for abused denture supporting tissues	-	-		5

Complete dentures for patients with				
TMJsyndromes	-	-		2
Complete dentures for medically compromised				
and	-	-		2
handicapped patients				
GERIATRIC PATIENTS				
Handling geriatric patients requiring nutritional				
counseling, psychological management and				
management of co-morbitity including xerostomia				
and systemic problems. Palliative care to elderly.				
IMPLANT SUPPORTED COMPLETE				
PROSTHESIS				
Implant supported complete prosthesis (maxillary				
and	-	-		1
Mandibular)				
MAXILLOFACIAL PROSTHESIS	·	·	<u>-</u>	

e.g. Guiding flange/ obturators/ Speech and palatal lift prosthesis/ Eye/ Ear/ Nose/ Face/Finger/Hand/Foot	5 different types as PI
prosthesis/ Eye/ Ear/ Nose/ Face/Finger/Hand/Foot	5 different types as F1

TMJ SYNDROME MANAGEMENT				
Splints – periodontal, teeth, jaws	-	-	1	1
TMJ supportive and treatment prosthesis	-	-	1	1
Stabilization appliances for maxilla and				
mandible with	-	-	-	1
freedom to move from IP to CRCP				
In IP without the freedom to move to CRCP	-	-	-	1
diso cclu Repositioning appliances, anterior sion appliances	-	-	-	1
Chrome cobalt and acrylic resin stabilization appliances for modification to accommodate for the	-	-	-	1
irregularities in the dentition				
Occlusal adjustment and occlusal equilibrium appliances	-	-	1	4
FULL MOUTH REHABILITATION				
Full mouth rehabilitation – restoration of esthetics and	-	-	1	2
function of stomatognathic system				
INTER-DISCIPLINARY TREATMENT MODALITIES				
Inter-disciplinary management – restoration of Oro	-	-	1	2
craniofacial defects for esthetics, phonation, mastication				
and psychological comforts				
MANAGEMENT OF FAILED RESTORATION				
Tooth and tooth surface restorations	-	-	-	5

Removable prosthesis	-	-	-	5
Crowns and fixed prosthesis	-	-	-	5
Maxillofacial prosthesis	-	-	-	2
Implant supported prosthesis	-	-	-	1
Occlusal rehabilitation and TMJ syndrome	-	-	-	2
Restoration failures of psychogenic origin	-	-	-	2
Restoration failures to age changes	-	-	-	2

SCHEME OF EXAMINATION:

A. Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks

(100 Marks for

each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part 1 examination consists of two essays of 25 marks each and 10 short answers of 5 marks each. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I , Paper-II and Paper III shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Distribution of topics for each paper will be as follows:

Part-I : Applied Basic Sciences: Applied Anatomy

Nutrition & Biochemistry, Pathology & Microbiology, virology, Applied Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II

Paper-I: Removable Prosthodontics and Implant supported prosthesis

(Implantology), Geriatric dentistry and Cranio facial

Prosthodontics

Paper-II: Fixed Prosthodontics, Occlusion, TMJ and esthetics.

Paper-III: Essays (descriptive and analyzing type questions)

A. Practical / Clinical Examination:

200 Marks

1. Presentation of treated patients and records during their 3 years
Training period 35 Marks

a.	C.D.	1 mark
b.	R. P.D.	2 marks
C.	F.P.D. including single tooth and surface restoration	2 marks
d.	I.S.P.	5 marks
e.	Occlusal rehabilitation	5 marks
f.	T.M.J.	5 marks
g.	Maxillofacial Prosthesis	5 marks
h.	Pre Clinic Exercises	10 marks

^{*}The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

2. Presentation of Clinical Exam CD patient's prosthesis including insertion 75 Marks

1.	Discussion on treatment plan and patient review	10 marks
2.	Tentative jaw relation records	5 marks
3.	Face Bow – transfer	5 marks
4.	Transferring it on articulators	5 marks
5.	Extra oral tracing and securing centric and	15 marks
	protrusive/lateral, record	
6.	Transferring records on articulator and programming.	5 marks
7.	Selection of teeth	5 marks
8.	Arrangement of teeth	10 marks
9.	Waxed up denture trial	10 marks
10.	Check of Fit, insertion and instruction of previously	5 marks
	processed characterised, anatomic complete denture	
	Prosthesis	

ALL STEPS WILL INCLUDE CHAIRSIDE. LAB AND VIVA VOCE

Αl	L STEPS WILL INCLUDE CHAIRSIDE, LAB AND VIVA VOCE	
3.	Fixed Partial Denture	35 Marks
a.	Case discussion including treatment planning and selection of patient for F.P.D.	5 Marks
b.	Abutment preparation isolation and fluid control	15 marks
	Gingival retraction and impressions (conventional/ CAD CAM impressions	10 marks
d.	Cementation of provisional restoration	5 marks
4.	Removable Partial Denture	25 Marks
	a. Surveying and designing of partial dentate cast.	5 marks
b.	Discussion on components and material selection including occulsal schemes.	10 marks

5. Implant supported prosthesis (2nd stage- protocol) a. Case discussion including treatment planning and selection of patient for ISP b. Il stage preparation, Abutment selection, placement, evaluation c. Implant impression and making of cast 30 marks 10 marks 10 marks

B. Viva Voce : 100 Marks I. Viva-Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expressions, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

II. Pedagogy 20 marks

2. PERIODONTOLOGY:

OBJECTIVES:

The following objectives are laid out to achieve the goals of the course

A) KNOWLEDGE:

Discuss historical perspective to advancement in the subject proper and related topics.

- Describe etiology, pathogenesis, diagnosis and management of common periodontal diseases with emphasis on Indian population
- Familiarize with the biochemical, microbiologic and immunologic genetic aspects of periodontal pathology
- Describe various preventive periodontal measures
- Describe various treatment modalities of periodontal disease from historical aspect to currently available ones
- Describe interrelationship between periodontal disease and various systemic conditions
- Describe periodontal hazards due to estrogenic causes and deleterious habits and prevention of it
- Identify rarities in periodontal disease and environmental/Emotional determinates in a given case
- Recognize conditions that may be outside the area of his/her Speciality/ competence and refer them to an appropriate Specialist
- Decide regarding non-surgical or surgical management of the case
- Update the student by attending courses, conferences and seminars relevant to periodontics or by self-learning process.
- Plan out/ carry out research activity both basic and clinical aspects with the aim of publishing his/her work in scientific journals
- Reach to the public to motivate and educate regarding periodontal disease, its prevention and consequences if not treated
- Plan out epidemiological survey to assess prevalence and incidence of early onset periodontitis and adult periodontitis in Indian population (Region wise)
- Shall develop knowledge, skill in the science and practice of Oral Implantology
- Shall develop teaching skill in the field of Periodontology and Oral Implantology
- Principals of Surgery and Medical Emergencies.
- To sensitize students about inter disciplinary approach towards the soft tissues of the oral cavity with the help of specialist from other departments.

B) SKILLS:

- Take a proper clinical history, thorough examination of intra oral, extra oral, medical history evaluation, advice essential diagnostic procedures and interpret them to come to a reasonable diagnosis
- Effective motivation and education regarding periodontal disease maintenance after the treatment
- Perform both non-surgical & education regarding periodontal disease, maintenance after the treatment
- Perform both non-surgical and surgical procedures independently
- Provide Basic Life Support Service (BLS) recognizes the need for advance life support and does the immediate need for that.
- Human values, ethical practice to communication abilities

- Adopt ethical principles in all aspects of treatment modalities; Professional honesty & integrity are to be fostered. Develop Communication skills to make awareness regarding periodontal disease Apply high moral and ethical standards while carrying out human or animal research, Be humble, accept the limitations in his/her knowledge and skill, and ask for help from colleagues when needed, Respect patients rights and privileges, including patients right to information and right to seek a second opinion.
- To learn the principal of lip repositioning and perio esthetics surgeries.

COURSE CONTENTS:

PART-I:

APPLIED BASIC SCIENCES

APPLIED ANATOMY:

- 1. Development of the Periodontium
- 2. Micro and Macro structural anatomy and biology of the periodontal tissues
- 3. Age changes in the periodontal tissues
- 4. Anatomy of the Periodontium
 - Macroscopic and microscopic anatomy
 - Blood supply of the Periodontium
 - Lymphatic system of the Periodontium
 - Nerves of the Periodontium
- 5. Temporomandibular joint, Maxillae and Mandible
- 6. Tongue, oropharynx
- 7. Muscles of mastication / Face
- 8. Blood Supply and Nerve Supply of Head & Neck and Lymphatics.
- 9. Spaces of Head & Neck

PHYSIOLOGY:

- 1. Blood
- 2. Respiratory system knowledge of the respiratory diseases which are a cause of periodontal diseases (periodontal Medicine)
- 3. Cardiovascular system
 - a. Blood pressure
 - b. Normal ECG
 - c. Shock
- 4. Endocrinology hormonal influences on Periodontium
- 5. Gastrointestinal system
 - a. Salivary secretion composition, function & regulation
 - b. Reproductive physiology
 - c. Hormones Actions and regulations, role in periodontal disease
 - d. Family planning methods
- 6. Nervous system
 - a. Pain pathways
 - b. Taste Taste buds, primary taste sensation & pathways for sensation
- 7. Hemostasis

BIOCHEMISTRY:

- 1. Basics of carbohydrates, lipids, proteins, vitamins, enzymes and minerals
- 2. Diet and nutrition and periodontium
- 3. Biochemical tests and their significance
- 4. Calcium and phosphorus

PATHOLOGY:

- 1. Cell structure and metabolism
- 2. Inflammation and repair, necrosis and degeneration
- 3. Immunity and hypersensitivity
- 4. Circulatory disturbances edema, hemorrhage, shock, thrombosis, embolism, infarction and hypertension
- 5. Disturbances of nutrition
- 6. Diabetes mellitus
- 7. Cellular growth and differentiation, regulation
- 8. Lab investigations
- 9. Blood

MICROBIOLOGY:

- 1. General bacteriology
 - a. Identification of bacteria
 - b. Culture media and methods
 - c. Sterilization and disinfection
- 2. Immunology and Infection
- 3. Systemic bacteriology with special emphasis on oral microbiology staphylococci, genus actinomyces and other filamentous bacteria and actinobacillus actinomycetum comitans
- Virology
 - a. General properties of viruses
 - b. Herpes, Hepatitis, virus, HIV virus
- 5. Mycology
 - a. Candidiasis
- 6. Applied microbiology
- 7. Diagnostic microbiology and immunology, hospital infections and management

PHARMACOLOGY:

- 1. General pharmacology
 - a. Definitions Pharmacokinetics with clinical applications, routes of administration including local drug delivery in Periodontics
 - b. Adverse drug reactions and drug interactions
- 2. Detailed pharmacology of
 - a. Analgesics opiod and nonopiod
 - b. Local anesthetics
 - c. Haematinics and coagulants, Anticoagulants
 - d. Vit D and Calcium preparations
 - e. Antidiabetics drugs
 - f. Steroids
 - g. Antibiotics
 - h. Antihypertensive
 - i. Immunosuppressive drugs and their effects on oral tissues
 - j. Antiepileptic drugs
- 3. Brief pharmacology, dental use and adverse effects of
 - a. General anesthetics
 - b. Antipsychotics
 - c. Antidepressants
 - d. Anxiolytic drugs
 - e. Sedatives
 - f. Antiepileptics
 - g. Antihypertensives
 - h. Antianginal drugs
 - i. Diuretics

- j. Hormones
- k. Pre-anesthetic medications
- 4. Drugs used in Bronchial asthma, cough
- 5. Drug therapy of
 - a. Emergencies
 - b. Seizures
 - c. Anaphylaxis
 - d. Bleeding
 - e. Shock
 - f. Diabetic ketoacidosis
 - g. Acute addisonian crisis
- 6. Dental Pharmacology
 - a. Antiseptics
 - b. Astringents
 - c. Sialogogues
 - d. Disclosing agents
 - e. Antiplaque agents
- 7. Fluoride pharmacology

BIOSTATISTICS:

- 1. Introduction, definition and branches of biostatistics
- 2. Collection of data, sampling, types, bias and errors
- 3. Compiling data-graphs and charts
- 4. Measures of central tendency (mean, median and mode), standard deviation and variability
- 5. Tests of significance (chi square test, t-test and z-test) Null hypothesis

PART II

PAPER 1

ETIOPATHOGENESIS:

- 1. Classification of periodontal diseases and conditions
- 2. Epidemiology of gingival and periodontal diseases
- 3. Defense mechanisms of gingival
- 4. Periodontal microbiology
- 5. Basic concepts of inflammation and immunity
- 6. Microbial interactions with the host in periodontal diseases
- 7. Pathogenesis of plaque associated periodontal diseases
- 8. Dental calculus
- 9. Role of iatrogenic and other local factors
- 10. Genetic factors associated with periodontal diseases
- 11. Influence of systemic diseases and disorders of the periodontium
- 12. Role of environmental factors in the etiology of periodontal disease
- 13. Stress and periodontal diseases
- 14. Occlusion and periodontal diseases
- 15. Smoking and tobacco in the etiology of periodontal diseases
- 16. AIDS and periodontium
- 17. Periodontal medicine
- 18. Dentinal hypersensitivity

PAPER-II

CLINICAL AND THERAPEUTIC PERIODONTOLOGY AND ORAL IMPLANTOLOGY

Please note:

Clinical periodontology includes gingival diseases, periodontal diseases, periodontal instrumentation, diagnosis, prognosis and treatment of periodontal diseases.

(i) GINGIVAL DISEASES

- 1. Gingival inflammation
- 2. Clinical features of gingivitis
- 3. Gingival enlargement
- 4. Acute gingival infections
- 5. Desquamative gingivitis and oral mucous membrane diseases
- 6. Gingival diseases in the childhood

(ii) PERIODONTAL DISEASES

- 1. Periodontal pocket
- 2. Bone loss and patterns of bone destruction
- 3. Periodontal response to external forces
- 4. Masticatory system disorders
- 5. Chronic periodontitis
- 6. Aggressive periodontitis
- 7. Necrotising ulcerative periodontitis
- 8. Interdisciplinary approaches
 - Orthodontic
 - Endodontic

(iii) TREATMENT OF PERIODONTAL DISEASES

- A. History, examination, diagnosis, prognosis and treatment planning
 - 1. Clinical diagnosis
 - 2. Radiographic and other aids in the diagnosis of periodontal diseases
 - 3. Advanced diagnostic techniques
 - 4. Risk assessment
 - 5. Determination of prognosis
 - 6. Treatment plan
 - 7. Rationale for periodontal treatment
 - 8. General principles of anti-infective therapy with special emphasis on infection control in periodontal practice
 - 9. Halitosis and its treatment
 - 10. Bruxism and its treatment

B. Periodontal instrumentation

- 1. Periodontal Instruments
- 2. Principles of periodontal instrumentation

C. Periodontal therapy

- 1. Preparation of tooth surface
- 2. Plaque control
- 3. Anti microbial and other drugs used in periodontal therapy and wasting diseases of teeth
- 4. Periodontal management of HIV infected patients
- 5. Occlusal evaluation and therapy in the management of periodontal diseases
- 6. Role of orthodontics as an adjunct to periodontal therapy
- 7. Special emphasis on precautions and treatment for medically compromised patients
- 8. Periodontal splints

- 9. Management of dentinal hypersensitivity
- D. Periodontal surgical phase special emphasis on drug prescription
 - 1. General principles of periodontal surgery
 - 2. Surgical anatomy of periodontium and related structures
 - 3. Gingival curettage
 - 4. Gingivectomy technique
 - 5. Treatment of gingival enlargements
 - 6. Periodontal flap
 - 7. Osseous surgery (resective and regenerative)
 - 8. Furcation; Problem and its management
 - 9. The periodontic endodontic continuum
 - 10. Periodontic plastic and esthetic surgery
 - 11. Recent advances in surgical techniques
- E. Future directions and controversial questions in periodontal therapy
 - 1. Future directions for infection control
 - 2. Research directions in regenerative therapy
 - 3. Future directions in anti-inflammatory therapy
 - 4. Future directions in measurement of periodontal diseases
- F. Periodontal maintenance phase
 - 1. Supportive periodontal treatment
 - 2. Results of periodontal treatment

(iv) ORAL IMPLANTOLOGY

- 1. Introduction and historical review
- 2. Biological, clinical and surgical aspects of dental implants
- 3. Diagnosis and treatment planning
- 4. Implant surgery
- 5. Prosthetic aspects of dental implants
- 6. Diagnosis and treatment of Peri implant complications
- 7. Special emphasis on plaque control measures in implant patients
- 8. Maintenance phase

(v) MANAGEMENT OF MEDICAL EMERGENCIES IN PERIODONTAL PRACTICE

Periodontology treatment should be practiced by various treatment plans and more number of patients to establish skill for diagnosis and treatment and after care with bio-mechanical, biological, bio-esthetics, bio-phonetics and all treatment should be carried out in more number for developing clinical skill.

TEACHING / LEARNING ACTIVITIES:

The post graduate is expected to complete the following at the end of :

S.NO	Year Wise	ACTIVITIES WORKS TO BE DONE
1.	Module 1	Orientation to the PG program
	(First Year)	Pre-clinical work (4 months)
		a. Dental
		 Practice of incisions and suturing techniques on the typodont models.
		Fabrication of bite guards and splints.
		Occlusal adjustment on the casts mounted on the

r		
		 articulator 4. X-ray techniques and interpretation. 5. Local anaesthetic techniques. 6. Identification of Common Periodontal Instruments. 7. To learn science of Periodontal Instruments maintance (Sharpening, Sterlization and Storate) 8. Concept of Biological width a. Typhodont Exercise (i) Class II Filling with Band and Wedge Application (ii) Crown cuttings
		 b. Medical 1. Basic diagnostic microbiology and immunology, collection and handling of sample and culture techniques. 2. Introduction to genetics, bioinformatics. 3. Basic understanding of cell biology and immunological
		diseases.
		Clinical work
		Applied periodontal indices 10 cases
		2. Scaling and root planning:- with Proper written history
		a. Manual 20 Cases
		b. Ultrasonic20 Cases3. Observation / assessment of all periodontal
		procedures including implants
2.	Module 2	Interpretation of various bio-chemical investigations.
	(First Year)	Practical training and handling medical emergencies
	,	and basic life support devices.
		Basic biostatistics – Surveying and data analysis.
		Clinical
		1. Case history and treatment planning 10 cases
		2. Root planning 50 cases
		Observation / assessment of all periodontal precedures including implent
		procedures including implant. 4. Selection of topic for Library dissertation and
		submission of Dissertation Synopsis.
3.	Module 3	Minor surgical cases 20 cases
	(First Year)	(i) Gingival Depigmentation 3 Cases
		(ii) Gingival Curettage no limits
		(iii) ENAP 1 Case
		(iv) Gingivectomy/ Gingivoplasty 5 cases
		(v) Operculectomy 3 cases
		Poster Presentation at the Speciality conference
4.	Module 4	Clinical work
	(Second Year)	Case history and treatment planning 10 cases
	,	Occlusal adjustments 10 cases
		3. Perio splints 10 cases
		4. Local drug delivery techniques 5 cases
_	84 1 7 7	5. Screening cases for dissertation
5.	Module 5	Periodontal surgical procedures.
	(Second Year)	a. Basic flap procedures 20 cases
		Periodontal plastic and esthetic 10 cases Ingressing width of attached gingival. Faces
		a. Increasing width of attached gingival 5 cases

		b. Root coverage procedures / Papilla Preservation and				
		Reconstruction 5 cases				
		c. Crown lengthening procedures 5 cases				
		d. Frenectomy 5 cases				
		e. Vestibuloplasty 5 cases				
		3. Furcation treatment (Hemisection, Rootsection,				
		Tunelling) 5 cases				
		4. Surgical closure of diastema. 2 cases				
6.	Module 6	Ridge augmentation procedures 5 cases				
	(Third Year)	2. Implants Placements and monitoring 5 cases				
	(**************************************	3. Sinus lift procedures 2 cases				
		4. Case selection, preparation and investigation of				
		implants.				
		5. Interdisciplinary Periodontics 2 each				
		(i) Ortho – Perio				
		(ii) Endo – Perio				
		(iii) Restorative Perio				
		(iv) Preprosthetic				
		(v) Crown Prep				
		6. Osseous Surgery 2 each				
		(i) Resective				
		(ii) Regenerative7. Scientific paper/ poster presentation at the conference.				
7.	Module 7	Clinical work				
7.						
	(Third Year)	Flap surgeries & regenerative techniques 25 cases (value a various grafts & barrier membranes)				
		(using various grafts & barrier membranes)				
		Assistance / observation of advanced surgical				
		procedure 5 each				
		Micro Surgery 5 each				
		4. Record maintenance & follow-up of all treated cases				
		including implants.				
		Submission of dissertation – 6 months before				
		completion of III year.				
		6. Scientific paper presentation at conferences.				
8.	Module 8	Refining of surgical skills.				
	(Third Year)	2. Publication of an article in a scientific journal.				
		Preparation for final exams.				
9.	Module 9	Preparation for final exams.				
	(Third Year)	University exam				

Note: Maintenance of Work Diary / Check list / Log books as prescribed.

ASSESSMENT EXAMINATION:

In addition to regular evaluation, log book etc., Assessment examination should be conducted after every 3 modules & progress of the student monitored.

MONITORING LEARNING PROGRESS:

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring is to be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects.

SCHEME OF EXAMINATION:

A. Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each

Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows:

Part-I: Applied Basic Sciences: Applied Anatomy, Physiology, & Biochemistry,

Pathology, Microbiology, Pharmacology, Research Methodology and

Biostatistics.

Part-II

Paper I: Normal Periodontal structure, Etiology & Pathogenesis of Periodontal

diseases, epidemiology as related to Periodontics

Paper II: Periodontal diagnosis, therapy & Oral Implantology **Paper III:** Essays (descriptive and analyzing type questions)

B. Practical / Clinical Examination : Marks

200

The clinical examination shall be of two days duration

1st day

Case discussion

- Long case One
- Short case One

Periodontal surgery – Periodontal Surgery on a previously prepared case after getting approval from the examiners

2nd dav

Post-surgical review and discussion of the case treated on the 1st day

Presentation of dissertation & discussion

All the examiners shall participate in all the aspects of clinical examinations / Viva Voce

Distribution of Marks for Clinical examination (recommended)

a) Long Case discussion		75		
b) 1 short case		25		
c) Periodontal surgery	1.	Anesthesia	10	
	2.	Incision	20	
	3.	Post Surgery	25	
		Evaluation		
	4.	Sutures	10	

^{*}The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

		5.	Pack (if any)	10
Post – operative review			25	
	Total		200	

C. Viva Voce : 100
Marks
i. Viva-Voce examination: 80
marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise : 20 marks

A topic will be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

3. ORAL AND MAXILLOFACIAL SURGERY

OBJECTIVES:

The training program in Oral and Maxillofacial Surgery is structured to achieve the following five objectives-

- Knowledge
- Skills
- Attitude
- Communicative skills and ability
- Research

Knowledge:

- To have acquired adequate knowledge and understanding of the etiology, pathophysiology and diagnosis, treatment planning of various common oral and Maxillofacial surgical problems both minor and major in nature
- To have understood the general surgical principles like pre and post surgical management, particularly evaluation, post surgical care, fluid and electrolyte management, blood transfusion and post surgical pain management.
- Understanding of basic sciences relevant to practice of oral and maxillofacial surgery
- Able to identify social, cultural, economic, genetic and environmental factors and their relevance to disease process management in the oral and Maxillofacial region.
- Essential knowledge of personal hygiene and infection control, prevention of cross infection and safe disposal of hospital waste keeping in view the high prevalence of hepatitis and HIV.

Skills:

- To obtain proper clinical history, methodical examination of the patient, perform essential diagnostic procedures and order relevant laboratory tests and interpret them and to arrive at a reasonable diagnosis about the surgical condition.
- To perform with competence minor oral surgical procedures and common maxillofacial surgery. To treat both surgically and medically the problems of the oral and Maxillofacial and the related area.
- Capable of providing care for maxillofacial surgery patients.

Attitude:

- Develop attitude to adopt ethical principles in all aspect of surgical practice, professional honesty and integrity are to be fostered. Surgical care is to be delivered irrespective of the social status, caste, creed or religion of the patient.
- Willing to share the knowledge and clinical experience with professional colleagues.
- Willing to adopt new techniques of surgical management developed from time to time based on scientific research which are in the best interest of the patient
- Respect patient right and privileges, including patients right to information and right to seek a second opinion.
- Develop attitude to seek opinion from an allied medical and dental specialists as and when required.

Communication Skills:

- Develop adequate communication skills particularly with the patients giving them the various options available to manage a particular surgical problem and obtain a true informed consent from them for the most appropriate treatment available at that point of time
- Develop the ability to communicate with professional colleagues.
- Develop ability to teach undergraduates.

COURSE CONTENT:

The speciality of Oral & Maxillofacial Surgery deals with the diagnosis and management of the diseases of stomatognathic system, jaw bones, cranio-maxillofacial region, salivary glands and temporomandibular joints etc. Within this framework it also supports many vital organs like eye, oropharynx, nasopharynx and major blood vessels and nerves. The traumatic injuries of maxillofacial skeleton are independently managed by Oral & Maxillofacial Surgeons. Whenever there are orbital injuries the ophthalmologists are trained only to tackle injuries of the eve ball (globe) but if there are associated injuries of the orbital skeleton, the Maxillofacial Surgeon is involved in its re-construction. Similarly, nasal bone fracture may be managed by ENT surgeons. Most of the time nasal bone fractures are associated with fractures of the maxilla, mandible and zygomatic bones which are being managed by Oral & Maxillofacial Surgeons. The maxillofacial facial injuries at times are associated with head injuries also. The Oral & maxillofacial Surgeon is involved in the management of cleft lip & cleft palate, orthognathic surgery, micro vascular surgery, reconstructive and oncological surgical procedures of maxillofacial region. The speciality of Oral & Maxillofacial Surgery is a multi disciplinary speciality and needs close working in co-ordination with Neurosurgeons, Oncosurgeons, Opthalmologists, ENT Surgeons and Plastic Surgeons. The Oral & Maxillofacial Surgeons, Ophthalmologist, ENT Surgeons, Plastic Surgeons, Neuro-Surgeons and Oncologists complement each other by performing Surgical Procedures with their respective expertise and knowledge thereby benefiting the patients and students of the respective specialities.

The program outline addresses both the knowledge needed in Oral and Maxillofacial Surgery and allied medical specialties in its scope. A minimum of three years of formal training through a graded system of education as specified will equip the trainee with skill and knowledge at its completion to be able to practice basic oral and Maxillofacial surgery competently and have the ability to intelligently pursue further apprenticeship towards advanced Maxillofacial surgery.

The topics are considered as under:-

- A) Applied Basic sciences
- B) Oral and Maxillofacial surgery
- C) Allied specialties

A) Applied Basic Sciences:

Applied Anatomy, Physiology, Biochemistry, General and Oral Pathology and Microbiology, Pharmacology and Knowledge in Basic Statistics.

Applied Anatomy:

- 1. Surgical anatomy of the scalp, temple and face
- 2. Anatomy of the triangles of neck and deep structures of the neck
- 3. Cranial and facial bones and its surrounding soft tissues with its applied aspects in maxillofacial injuries.
- 4. Muscles of head and neck; chest, lower and upper extremities (in consideration to grafts/flaps)
- 5. Arterial supply, venous drainage and lymphatics of head and neck

- 6. Congenital abnormalities of the head and neck
- 7. Surgical anatomy of the cranial nerves
- 8. Anatomy of the tongue and its applied aspects
- 9. Surgical anatomy of the temporal and infratemporal regions
- 10. Anatomy and its applied aspects of salivary glands, pharynx, thyroid and parathyroid gland, larynx, trachea, esophagus
- 11. Tooth eruption, morphology, and occlusion.
- 12. Surgical anatomy of the nose.
- 13. The structure and function of the brain including surgical anatomy of intra cranial venous sinuses.
- 14. Autonomous nervous system of head and neck
- 15. Functional anatomy of mastication, deglutition, speech, respiration and circulation
- 16. Development of face, paranasal sinuses and associated structures and their anomalies
- 17. TMJ: surgical anatomy and function

Physiology:

1. Nervous system

 Physiology of nerve conduction, pain pathway, sympathetic and parasympathetic nervous system, hypothalamus and mechanism of controlling body temperature

2. Blood

- Composition
- Haemostasis, various blood dyscrasias and management of patients with the same
- Hemorrhage and its control
- Capillary and lymphatic circulation.
- Blood grouping, transfusing procedures.

3. Digestive system

- Saliva composition and functions of saliva
- Mastication, deglutition, digestion, assimilation
- Urine formation, normal and abnormal constituents

4. Respiration

- Control of ventilation, anoxia, asphyxia, artificial respiration
- Hypoxia types and management

5. CardioVascular System

- · Cardiac cycle,
- Shock
- Heart sounds,
- Blood pressure,
- Hypertension:

6. Endocrinology

- · General endocrinal activity and disorder relating to thyroid gland,
- Parathyroid gland, adrenal gland, pituitary gland, pancreas and gonads:
- Metabolism of calcium

7. Nutrition

- General principles of a balanced diet, effect of dietary deficiency, protein energy malnutrition, Kwashiorkor, Marasmus.
- Fluid and Electrolytic balance in maintaining haemostasis and significance in minor and major surgical procedures.

Biochemistry:

- General principles governing the various biological activities of the body, such as osmotic pressure, electrolytes, dissociation, oxidation, reduction etc.
- General composition of the body
- Intermediary metabolism
- Carbohydrates, proteins, lipids, and their metabolism
- Nucleoproteins, nucleic acid and nucleotides and their metabolism
- Enzymes, vitamins and minerals
- Hormones
- · Body and other fluids.
- Metabolism of inorganic elements.
- Detoxification in the body.
- Antimetabolites.

Pathology:

1. Inflammation -

- Repair and regeneration, necrosis and gangrene
- Role of component system in acute inflammation,
- Role of arachidonic acid and its metabolites in acute inflammation,
- Growth factors in acute inflammation
- Role of molecular events in cell growth and intercellular signaling cell surface receptors
- Role of NSAIDs in inflammation,
- Cellular changes in radiation injury and its manifestation:

2. Haemostasis

- · Role of endothelium in thrombogenesis,
- Arterial and venous thrombi,
- Disseminated Intravascular coagulation

3. Shock:

- Pathogenesis of hemorrhagic, neurogenic, septic, cardiogenic shock
- Circulatory disturbances, ischemia, hyperemia, venous congestion, edema, infarction

4. Chromosomal abnormalities:

Marfans Syndrome, Ehler's Danlos Syndrome, Fragile X- Syndrome

5. Hypersensitivity:

- Anaphylaxis, type 2 hypersensitivity, type 3 hyper sensitivity and cell mediated reaction and its clinical importance, systemic lupus erythematosus.
- Infection and infective granulomas.

6. Neoplasia:

- · Classification of tumors.
- Carcinogenesis and carcinogens- chemical, viral and microbial
- Grading and staging of cancers, tumor Angiogenesis, Paraneoplastic syndrome, spread of tumors
- Characteristics of benign and malignant tumors

7. Others:

- Sex linked agammaglobulinemia.
- AIDS
- Management of immuno deficiency patients requiring surgical procedures
- De George Syndrome

• Ghons complex, post primary pulmonary tuberculosis – pathology and pathogenesis.

Oral Pathology:

- Developmental disturbances of oral and Para oral structures
- Regressive changes of teeth.
- Bacterial, viral and mycotic infections of oral cavity
- Dental caries,, diseases of pulp and periapical tissues
- Physical and chemical injuries of the oral cavity
- Oral manifestations of metabolic and endocrinal disturbances
- Diseases of jawbones and TMJ
- Diseases of blood and blood forming organs in relation to oral cavity
- Cysts of the oral cavity
- Salivary gland diseases
- Role of laboratory investigations in oral surgery

Microbiology:

- Immunity
- Knowledge of organisms commonly associated with diseases of oral cavity.
- Morphology cultural characteristics of strepto, staphylo, pneumo, gono, meningo, clostridium group of organisms, spirochetes, organisms of TB, leprosy, diphtheria, actinomycosis and moniliasis
- Hepatitis B and its prophylaxis
- Culture and sensitivity test
- · Laboratory determinations
- Blood groups, blood matching, RBC and WBC count
- Bleeding and clotting time etc, smears and cultures,
- Urine analysis and cultures.

Applied Pharmacology and Therapeutics:

- 1. Definition of terminologies used
- 2. Dosage and mode of administration of drugs.
- 3. Action and fate of drugs in the body
- 4. Drug addiction, tolerance and hypersensitivity reactions.
- 5. Drugs acting on the CNS
- 6. General and local anesthetics, hypnotics, analeptics, and tranquilizers.
- 7. Chemo therapeutics and antibiotics
- 8. Analgesics and antipyretics
- 9. Antitubercular and antisyphilitic drugs.
- 10. Antiseptics, sialogogues and antisialogogues
- 11. Haematinics
- 12. Antidiabetics
- 13. Vitamins A, B-complex, C, D, E, K

B) Oral and Maxillofacial Surgery:

- Evolution of Maxillofacial surgery.
- Diagnosis, history taking, clinical examination, investigations.
- Informed consent/medico-legal issues.
- Concept of essential drugs and rational use of drugs.

- Communication skills with patients- understanding, clarity in communication, compassionate explanations and giving emotional support at the time of suffering and bereavement
- Principles of surgical audit understanding the audit of process and outcome.
 Methods adopted for the same. Basic statistics.
- Principles of evidence based surgery- understanding journal based literature study; the value of textbook, reference book articles, value of review articles; original articles and their critical assessment, understanding the value of retrospective, prospective, randomized control and blinded studies, understanding the principles and the meaning of various Bio-statistical tests applied in these studies
- Principles of surgery- developing a surgical diagnosis, basic necessities for surgery, aseptic technique, incisions, flap designs, tissue handling, hemostasis, dead space management, decontamination and debridement, suturing, edema control, patient general health and nutrition.
- Medical emergencies Prevention and management of altered consciousness, hyper sensitivity reaction, chest discomfort, respiratory difficulty.
- Pre operative workup Concept of fitness for surgery; basic medical work up; work up in special situation like diabetes, renal failure, cardiac and respiratory illness; risk stratification
- Surgical sutures, drains
- Post operative care- concept of recovery room care, Airway management, Assessment of Wakefulness, management of cardio vascular instability in this period, Criteria for shifting to the ward, pain management
- Wound management- Wound healing, factors influencing healing, basic surgical techniques, Properties of suture materials, appropriate use of sutures.
- Surgical Infections Asepsis and antisepsis, Microbiological principles, Rational use of antibiotics, special infections like Synergistic Gangrene and Diabetic foot infection, Hepatitis and HIV infection and cross infection.
- Airway obstruction/management Anatomy of the airway, principles of keeping the airway patent, mouth to mouth resuscitation, Oropharyngeal airway, endotracheal intubation, Cricothyroidectomy, Tracheostomy.
- Anesthesia stages of Anesthesia, pharmacology of inhalation, intravenous and regional anesthetics, muscle relaxants.
- Facial pain; Facial palsy and nerve injuries.
- Pain control acute and chronic pain, cancer and non-cancer pain, patient controlled analgesia
- General patient management competence in physical assessment of patients of surgery, competence in evaluation of patients presenting with acute injury, particularly to maxillofacial region. Competence in the evaluation of management of patients for Anesthesia
- Clinical oral surgery all aspects of dento alveolar surgery
- Pre-prosthetic surgery A wide range of surgical reconstructive procedures involving their hard and soft tissues of the edentulous jaws.
- Temporomandibular joint disorders TMJ disorders and their sequelae need expert evaluation, assessment and management. It is preferable to be familiar with diagnostic and therapeutic arthroscopic surgery procedures.
- Tissue grafting Understanding of the biological mechanisms involved in autogenous and heterogeneous tissue grafting.
- Reconstructive oral and maxillofacial surgery hard tissue and soft tissue reconstruction.
- Cyst and tumors of head and neck region and their management including principles of tumor surgery, giant cell lesion of jaw bones, fibro osseous lesions of jaw.

- Neurological disorders of maxillofacial region-diagnosis and management of Trigeminal Neuralgia, MPDS, Bells palsy, Frey's Syndrome, Nerve injuries
- Maxillofacial trauma basic principles of treatment, primary care, diagnosis and management of hard and soft tissue injuries, Comprehensive management including polytrauma patients
- Assessment of trauma-multiple injuries patient, closed abdominal and chest injuries, penetrating injuries, pelvic fractures, urological injuries, vascular injuries.
- Orthognathic surgery The trainee must be familiar with the assessment and correcting of jaw deformities
- Laser surgery The application of laser technology in the surgical treatment of lesions amenable to such therapy
- Distraction osteogenesis in maxillofacial region.
- Cryosurgeries Principles, the application of cryosurgery in the surgical management of lesions amenable to such surgeries.
- Cleft lip and palate surgery- detailed knowledge of the development of the face, head and neck, diagnosis and treatment planning, Current concepts in the management of cleft lip and palate deformity, knowledge of nasal endoscopy and other diagnostic techniques in the evaluation of speech and hearing, concept of multi disciplinary team management.
- Aesthetic facial surgery detailed knowledge of structures of face & neck including skin and underlying soft tissues, diagnosis and treatment planning of deformities and conditions affecting facial skin, underlying facial muscles, bone, eyelids, external ear etc., surgical management of post acne scaring, face lift, blepharoplasty, otoplasty, facial bone recountouring etc.
- Craniofacial surgery basic knowledge of developmental anomalies of face, head and neck, basics concept in the diagnosis and planning of various head and neck anomalies including facial cleft, craniosynostosis, syndromes, etc., Current concepts in the management of craniofacial anomalies.
- Head and neck oncology understanding of the principles of management of head and neck oncology including various pre cancerous lesions, Experience in the surgical techniques of reconstruction following ablative surgery.
- Micro vascular surgery.
- Implantology principles, surgical procedures for insertion of various types of implants.
- Maxillofacial radiology/ radio diagnosis
- · Other diagnostic methods and imaging techniques

C) Allied Specialties:

- General medicine: General assessment of the patient including children with special emphasis on cardiovascular diseases, endocrinal, metabolic respiratory and renal diseases, Blood dyscrasias
- General surgery: Principles of general surgery, exposure to common general surgical procedures.
- Neuro surgery: Evaluation of a patient with head injury, knowledge & exposure of various Neuro – surgical procedures
- ENT/Ophthalmology: Examination of ear, nose, throat, exposure to ENT surgical procedures, ophthalmic examination and evaluation, exposure to ophthalmic surgical procedures.

- Orthopedic: basic principles of orthopedic surgery, bone diseases and trauma as relevant to Maxillofacial surgery, interpretation of radiographs, CT, MRI and ultrasound
- Anesthesiology: Evaluation of patients for GA technique, general anesthetic drugs use and complications, management of emergencies, various IV sedation techniques.
- Plastic Surgery- Basic Principles

TEACHING / LEARNING ACTIVITIES:

The post graduate is expected to complete the following at the end of :

I Year

Study ofapplied basic sciences including practicals (wherever necessary), basic computer sciences, exodontia, seminars on basic topics, selection of dissertation topic, library assignment topic, attending O.T, ward rounds, Medical Record keeping, Pre-clinical exercises, preparation of synopsis and its submission within the six months after admission to the university as per calendar of events.

Rotation and postings in other departments:

General medicine	- 1 month
General surgery	- 1 month
Ophthalmology	- 15 days
Neuro Surgery	- 15 days
ENT	- 15 days
Orthopedic	- 15 days
Plastic Surgery	- 15 days
Casualty	- 15 days
Anesthesia (ICU)	- 15 days
Radiology (CT, MRI, USG)	- 15 days

II Year

- Minor oral surgery and higher surgical training
- Submission of library assignment
- Oncologyposting 1 month

III Year

- Maxillofacial surgery
- Submission of dissertation to the university, six months before the final examination.

It is desirable to enter general surgical skills and operative procedures that are observed, assisted or performed in the log book in the format as given below:-

SI.No	Procedure	Category	Number
1	Injection I.M. and I.V.	PI	50, 20
2	Minor suturing and removal of sutures	PI	N,A
3	Incision & drainage of an abscess	PI	10
4	Surgical extraction	PI	15
5	Impacted teeth	PI, A	30,20

6	Pre prosthetic surgery-		
	corrective procedures	PI	10
	ridge extension	Α	3
	ridge reconstruction	Α	3
7	OAF closure	PI, A	3,2
8	Cyst enuleation	PI,A	5,5
9	Mandibular fractures	PI,A	10,10
10	Peri-apical surgery	PI,A	5
11	Infection management	PI,A	3,3
12	Biopsy procedures	PI, A	10, 3
13	Removal of salivary calculi	Α	3
14	Benign tumors	Α	3,3
15	mid face fractures	PI,A	3,5
16	Implants	PI,A	5,5
17	Tracheotomy	А	2
18	Skin grafts	PI,A	2,2
19	Orthognathic surgery	A,O	3,5
20	Harvesting bone & cartilage	A,O	3,5
	grafts	A,O	3,3
	Iliac crest	A,O	2,2
	Rib	A,O	2,2
	Calvarial		
	Fibula		
21	T.M. Joint surgery	Α	3
22	Jaw resections	A,O	3,5
23	Onco surgery	A,O	3,3
24	Micro vascular anastomosis	A,O	2,2
25	Cleft lip & palate	A,O	3,5
26	Distraction osteogenesis	A,O	2,3
27	Rhinoplasty	A,O	2,3
28	Access osteotomies and base of skull surgeries	A,O	1,3
29	Emergency Management for OMFS Patients in Casualty / Accident & Emergency	PI,O	5,5

PI:- Performed Independently

A:- Assisted
O:- Observed

Monitoring Learning Progress:

It is essential to monitor the learning progress to each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring to be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV.

Paper wise distribution of syllabus:

PART-I:

Applied Basic Sciences

PART-II:

Paper- I:Minor Oral Surgery and Maxillofacial Trauma

Minor Oral Surgery:

- Principles of Surgery: Developing A Surgical Diagnosis, Basic Necessities For Surgery, Aseptic Technique, Incisions, Flap Design Tissue Handling, Haemostasis, Dead Space Management, Decontamination And Debridement, Suturing, Oedema Control, Patient General Health And Nutrition.
- Medical Emergencies: Prevention and management of altered cons-ciousness (syncope, orthostatic hypotension, seizures, diabetes mellitus, adrenal insufficiency), hypersensitivity reactions, chest discomfort, and respiratory difficulty.
- **Examination and Diagnosis**: Clinical history, physical and radiographic, clinical and laboratory diagnosis, oral manifestations of systemic diseases, implications of systemic diseases in surgical patients.
- **Haemorrhage and Shock**: Applied physiology, clinical abnormalities of coagulation, extra vascular hemorrhage, and hemorrhagic lesions, management of secondary hemorrhage, shock.
- **Exodontia**: Principles of extraction, indications and contraindications, types of extraction, complications and their management, principles of elevators and elevators used in oral surgery.
- **Impaction:** Surgical anatomy, classification, indications and contraindications, diagnosis, procedures, complications and their management.
- **Surgical aids to eruption of teeth**: Surgical exposure of unerupted teeth, surgical repositioning of partially erupted teeth.
- Transplantation of teetH
- **Surgical Endodontics:** Indications and contraindications, diagnosis, procedures of periradicular surgery
- **Preprosthetic Surgery:** Requirements, types (alvoloplasty, tuberosity reduction, mylohyoid ridge reduction, genial reduction, removal of exostosis, vestibuloplasty)
- Procedures to Improve Alveolar Soft Tissues: Hypermobile tissues- operative / sclerosing method, epulis fissuratum, frenectomy and frenotomy
- Infectionsof Head and Neck: Odontogenic and non Odontogenic infections, factors affecting spread of infection, diagnosis and differential diagnosis, management of facial space infections, Ludwig angina, cavernous sinus thrombosis.
- Chronic infections of the jaws: Osteomyelitis (types, etiology, pathogenesis, management) osteoradionecrosis
- Maxillary Sinus: Maxillary sinusitis types, pathology, treatment, closure of Oro
 antral fistula, Caldwell- luc operation
- Cysts of the Orofacial Region: Classification, diagnosis, management of OKC, dentigerous, radicular, non Odontogenic, ranula
- Neurological disorders of the Maxillofacial Region: Diagnosis and management of trigeminal neuralgia, MPDS, bell's palsy, Frey's syndrome, nerve injuries.
- **Implantology**: Definition, classification, indications and contraindications, advantages and disadvantages, surgical procedure.

Anesthesia

Local Anesthesia:

Classification of local anesthetic drugs, mode of action, indications and contra indications, advantages and disadvantages, techniques, complications and their management.

General Anesthesia:

Classification, stages of GA, mechanism of action, indications, and contra indications, advantages and disadvantages, post anesthetic complications and emergencies, anesthetic for dental procedures in children, pre medication, conscious sedation, legal aspects for GA

Maxillofacial Trauma:

- Surgical Anatomy of Head and Neck.
- Etiology of Injury.
- Basic Principles of Treatment
- Primary Care: resuscitation, establishment of airway, management of hemorrhage, management of head injuries and admission to hospital.
- Diagnosis: clinical, radiological
- Soft Tissue Injury of Face and Scalp: classification and management of soft tissue wounds, injuries to structure requiring special treatment.
- Dento Alveolar Fractures: examination and diagnosis, classification, treatment, prevention.
- Mandibular Fractures: classification, examination and diagnosis, general principles of treatment, complications and their management
- Fracture of Zygomatic Complex: classification, examination and diagnosis, general principles of treatment, complications and their management.
- Orbital Fractures: blow out fractures
- Nasal Fractures
- Fractures of Middle Third of the Facial Skeleton: emergency care, fracture of maxilla, and treatment of le fort I, II, III, fractures of Naso orbito ethmoidal region.
- Opthalmic Injuries: minor injuries, non-perforating injuries, perforating injuries, retro bulbar hemorrhage, and traumatic optic neuropathy.
- Traumatic Injuries To Frontal Sinus: diagnosis, classification, treatment
- Maxillofacial Injuries in Geriatric and Pediatric Patients.
- Gun Shot Wounds and War Injuries
- Osseointegration in Maxillofacial Reconstruction
- Metabolic Response to Trauma: neuro endocrine responses, inflammatory mediators, clinical implications
- Healing of Traumatic Injuries: soft tissues, bone, cartilage, response of peripheral nerve to injury
- Nutritional consideration following Trauma.
- Tracheostomy: indications and contraindications, procedure, complications and their management.

Paper - II : Maxillofacial Surgery

a) Salivary gland

- Sialography
- Salivary fistula and management
- Diseases of salivary gland developmental disturbances, cysts, inflammation and sialolithiasis
- Mucocele and Ranula
- Tumors of salivary gland and their management
- Staging of salivary gland tumors
- Parotidectomy

b) Temporomandibular Joint

- Etiology, history signs, symptoms, examination and diagnosis of temporomandibular joint disorders
- Ankylosis and management of the same with different treatment modalities
- MPDS and management
- Condylectomy different procedures
- Various approaches to TMJ
- Recurrent dislocations Etiology and Management

c) Oncology

- Biopsy
- · Management of pre-malignant tumors of head and neck region
- Benign and Malignant tumors of Head and Neck region
- Staging of oral cancer and tumor markers
- Management of oral cancer
- Radical Neck dissection
- Modes of spread of tumors
- Diagnosis and management of tumors of nasal, paranasal, neck, tongue, cheek, maxilla and mandible
- Radiation therapy in maxillofacial regions
- Lateral neck swellings

d) Orthognathic surgery

- Diagnosis and treatment planning
- Cephalometric analysis
- Model surgery
- Maxillary and mandibular repositioning procedures
- Segmental osteotomies
- Management of apertognathia
- Genioplasty
- Distraction osteogenesis

e) Cysts and tumors of oro facial region

- Odontogenic and non-Odontogenic tumors and their management
- Giant Cell lesions of jawbone
- Fibro osseous lesions of iawbone
- Cysts of jaw

f) Laser surgery

The application of laser technology in surgical treatment of lesions

g) Cryosurgery

Principles, applications of cryosurgery in surgical management

h) Cleft lip and palate surgery

- Detailed knowledge of the development of the face, head and neck
- Diagnosis and treatment planning
- Current concepts in the management of cleft lip and palate deformity
- Knowledge of Naso endoscopy and other diagnostic techniques in the evaluation of speech and hearing
- · Concept of multidisciplinary team management

i) Aesthetic facial surgery

- Detailed knowledge of the structures of the face and neck including skin and underlying soft tissue
- Diagnosis and treatment planning of deformities and conditions affecting facial skin
- Underlying facial muscles, bone, Eyelids, external ear
- Surgical management of post acne scarring, facelift, blepharoplasty, otoplasty, facial bone recontouring, etc

j) Craniofacial surgery

- Basic knowledge of developmental anomalies of the face, head and neck
- Basic concepts in the diagnosis and planning of various head and neck anomalies including facial clefts, craniosynostosis, syndromes, etc.
- Current concept in the management of Craniofacial anomalies

Paper – III: Essays (descriptive and analyzing type questions)

Scheme of Examination:

A. Theory: Part-I: Basic Sciences Paper - 100 Marks
Part-II: Paper-I, Paper-II & Paper-III - 300 Marks

(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: *

<u>PART-I</u>: Applied Basic Sciences: Applied Anatomy, Physiology, & Biochemistry, Pathology, Microbiology, Pharmacology, Research Methodology and Biostatistics.

PART-II

Paper – I: Minor Oral Surgery and Maxillofacial Trauma

Paper - II: Maxillofacial Surgery

Paper – III: Essays (descriptive and analyzing type questions)

*The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

B. Practical / Clinical Examination - 200 Marks

1. Minor Oral Surgery - 100 Marks

Each candidate is required to perform the minor oral surgical procedures under local anaesthesia. The minor surgical cases may include removal of impacted lower third

molar, cyst enucleation, any similar procedure where students can exhibit their professional skills in raising the flap, removing the bone and suturing the wound.

2.Case presentation and discussion: 100 Marks

(a) One long case - 60 Marks (b) Two short cases - 40 Marks

(20 marks each)

C. Viva Voce - 100 Marks

i. Viva-Voce examination:

80 Marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy: 20 Marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

4. CONSERVATIVE DENTISTRY AND ENDODONTICS

OBJECTIVES:

The following objectives are laid out to achieve the goals of the course. These are to be achieved by the time the candidate completes the course. These objectives may be considered under the following subtitles.

Knowledge:

At the end of 36 months of training, the candidates should be able to:

- Describe etiology, pathophysiology, periapical diagnosis and management of common restorative situations, endodontic situations that will include contemporary management of dental caries, management of trauma and pulpal pathosis including periodontal situations.
- Demonstrate understanding of basic sciences as relevant to conservative / restorative dentistry and Endodontics.
- Identify social, economic, environmental and emotional determinants in a given case or community and take them into account for planning and execution at individual and community level.
- Ability to master differential diagnosis and recognize conditions that may require multi disciplinary approach or a clinical situation outside the realm of the specialty, which he or she should be able to recognize and refer to appropriate specialist.
- Update himself by self-study and by attending basic and advanced courses, conferences, seminars, and workshops in the specialty of Conservative Dentistry-Endodontics-Dental Materials and Restorative Dentistry.
- Ability to teach/guide, colleagues and other students.
 Use information technology tools and carry out research both basic and clinical with the aim of his publishing his work and presenting the same at scientific platform.

Skills:

- Take proper chair side history, examine the patient and perform medical and dental diagnostic procedures as well as perform relevant tests and interpret to them to come to a reasonable diagnosis about the dental condition in general and Conservative Dentistry – Endodontics in particular. And undertake complete patient monitoring including preoperative as well as post operative care of the patient.
- Perform all levels of restorative work, surgical and non-surgical Endodontics as well as endodontic-periodontal surgical procedures as part of multidisciplinary approach to clinical condition.
- Provide basic life saving support in emergency situations.
- Manage acute pulpal and pulpo periodontal situations.
- Have a thorough knowledge of infection control measures in the dental clinical environment and laboratories.
- Should have proper knowledge of sterilization procedures

Human Values, Ethical Practice and Communication Abilities

- Adopt ethical principles in all aspects of restorative and contemporary Endodontics including non-surgical and surgical Endodontics.
- Professional honesty and integrity should be the top priority.
- Dental care has to be provided regardless of social status, caste, creed or religion of the patient.
- Develop communication skills in particular to explain various options available for management and to obtain a true informed consent from the patient.
- Apply high moral and ethical standards while carrying on human or animal research.

- He/She shall not carry out any heroic procedures and must know his limitations in performing all aspects of restorative dentistry including Endodontics. Ask for help from colleagues or seniors when required without hesitation.
- Respect patient's rights and privileges including patients right to information.

COURSE CONTENTS:

PART-I:

Applied Basic Sciences:

Applied Anatomy of Head and Neck:

- Development of face, paranasal sinuses and the associated structures and their anomalies, cranial and facial bones, TMJ anatomy and function, arterial and venous drainage of head and neck, muscles of face and neck including muscles of mastication and deglutition, brief consideration of structures and function of brain. Brief consideration of all cranial nerves and autonomic nervous system of head and neck. Salivary glands, Functional anatomy of mastication, deglutition and speech. Detailed anatomy of deciduous and permanent teeth, general consideration in physiology of permanent dentition, form, function, alignment, contact, occlusion.
- Internal anatomy of permanent teeth and its significance.
- Applied histology histology of skin, oral mucosa, connective tissue, bone, cartilage, blood vessels, lymphatics, nerves, muscles, tongue.

Anatomy and Development of Teeth:

- Enamel development and composition, physical characteristics, chemical properties, structure.
- Age changes clinical structure.
- Dentin development, physical and chemical properties, structure type of dentin, innervations, age and functional changes and clinical considerations.
- Pulp development, histological structures, innervations, functions, regressive changes, clinical considerations.
- Dentin and pulp complex.
- Cementum composition, cementogenesis, structure, function, clinical considerations.
- Knowledge of internal anatomy of permanent teeth, anatomy of root apex and its implications in endodontic treatment.
- Periodontal ligament development, structure, function and clinical considerations.
- Salivary glands structure, function, clinical considerations.

Applied Physiology:

- Mastication, deglutition, digestion and assimilation, fluid and electrolyte balance.
- Blood composition, volume, function, blood groups, haemostasis, coagulation, blood transfusion, circulation, heart, pulse, blood pressure, shock, respiration-control, anoxia, hypoxia, asphyxia, artificial respiration, and endocrinology – general principles of endocrine activity and disorders relating to pituitary, thyroid, parathyroid, adrenals including pregnancy and lactation.
- Physiology of saliva composition, function, clinical significance.
- Clinical significance of vitamins, diet and nutrition balanced diet.
- Physiology of pain, sympathetic and Para sympathetic nervous system, pain pathways, physiology of pulpal pain, Odontogenic and non Odontogenic pain, pain disorders – typical and atypical.
- Biochemistry such as osmotic pressure, electrolytic dissociation, oxidation, reduction etc. Carbohydrates, proteins, lipids and their metabolism, nucleoproteins, nucleic acid and

their metabolism. Enzymes, vitamins and minerals, metabolism of inorganic elements, detoxification in the body, anti metabolites, chemistry of blood lymph and urine.

Pathology:

- Inflammation, repair, degeneration, necrosis and gangrene.
- Circulatory disturbances ischemia, hyperemia, edema, thrombosis, embolism, infarction, allergy and hypersensitivity reaction.
- Neoplasms classifications of tumors, characteristics of benign and malignant tumors, spread of tumors.
- Blood dyscrasias.
- Developmental disturbances of oral and Para oral structures, dental caries, regressive changes of teeth, pulp, periapical pathology, pulp reaction to dental caries and dental procedures.
- Bacterial, viral, mycotic infections of the oral cavity.

Microbiology:

- Pathways of pulpal infection, oral flora and micro organisms associated with endodontic diseases, pathogenesis, host defense, bacterial virulence factors, healing, theory of focal infections, microbes relevance to dentistry – strepto, staphylococci, lactobacilli, cornyebacterium, actinomycetes, clostridium, neisseria, vibrio, bacteriods, fusobacteria, spirochetes, mycobacterium, virus and fungi.
- Cross infection, infection control, infection control procedure, sterilization and disinfection.
- Immunology antigen antibody reaction, allergy, hypersensitivity and anaphylaxis, auto immunity, grafts, viral hepatitis, HIV infections and aids. Identification and isolation of microorganisms from infected root canals. Culture medium and culturing technique (Aerobic and anaerobic interpretation and antibiotic sensitivity test).

Pharmacology:

- Dosage and route of administration of drugs, actions and fate of drug in body, drug addiction, tolerance of hypersensitivity reactions.
- Local anesthesia agents and chemistry, pharmacological actions, fate and metabolism of anaesthetic, ideal properties, techniques and complications.
- General anesthesia pre medications, neuro muscular blocking agents, induction agents, inhalation anesthesia, and agents used, assessment of anesthetic problems in medically compromised patients.
- Anaesthetic emergencies
- Antihistamines, corticosteroids, chemotherapeutic and antibiotics, drug resistance, haemostasis, and haemostatic agents, anticoagulants, sympathomimitic drugs, vitamins and minerals (A, B, C, D, E, K IRON), anti sialogogue, immunosupressants, drug interactions, antiseptics, disinfectants, anti viral agents, drugs acting on CNS.

Biostatistics:

Introduction, Basic concepts, Sampling, Health information systems – collection, compilation, presentation of data. Elementary statistical methods – presentation of statistical data, Statistical averages – measures of central tendency, measures of dispersion, Normal distribution. Tests of significance – parametric and non – parametric tests (Fisher extract test, Sign test, Median test, Mann Whitney test, Kruskal Wallis one way analysis, Friedmann two way analysis, ANOVA, Regression analysis), Correlation and regression, Use of computers.

Research Methodology:

- Essential features of a protocol for research in humans
- Experimental and non-experimental study designs

Ethical considerations of research

Applied Dental Materials:

- Physical and mechanical properties of dental materials, biocompatibility.
- Impression materials, detailed study of various restorative materials, restorative resin and recent advances in composite resins, bonding- recent developments, tarnish and corrosion, dental amalgam, direct filling gold, casting alloys, inlay wax, die materials, investments, casting procedures, defects, dental cements for restoration and pulp protection (luting, liners, bases) cavity varnishes.
- Dental ceramics-recent advances, finishing and polishing materials.
- Dental burs design and mechanics of cutting other modalities of tooth preparation.
 Methods of testing biocompatibility of materials used.

PART-II:

Paper-I: Conservative Dentistry

- 1. Examination, diagnosis and treatment plan
- 2. Occlusion as related to conservative dentistry, contact, contour, its significance. Separation of teeth, matrices, used in conservative dentistry.
- 3. Dental caries- epidemiology, recent concept of etiological factors, pathophysiology, histopathology, diagnosis, caries activity tests, prevention of dental caries and management recent methods.
- 4. Hand and rotary cutting instruments, development of rotary equipment, speed ranges, hazards.
- 5. Dental burs and other modalities of tooth reparation- recent developments (air abrasions, lasers etc.)
- 6. Infection control procedures in conservative dentistry, isolation equipments etc.
- 7. Direct concepts in tooth preparation for amalgam, composite, GIC and restorative techniques, failures and management.
- 8. Biologic response of pulp to various restorative materials and operative procedures.
- 9. Direct and indirect composite restorations.
- 10. Indirect tooth colored restorations- ceramic, inlays and onlays, veneers, crowns, recent advances in fabrication and gingival tissue management.
- 11. Impression procedures used for indirect restorations.
- 12. Cast metal restorations, indications, contraindications, tooth preparation for class II inlay, onlay, full crown restorations.
 - Restorative techniques, direct and indirect methods of fabrication including materials used for fabrication like inlay wax, investment materials and casting.
- 13. Direct gold restorations.
- 14. Recent advances in restorative materials.
- 15. Esthetics including smile design
- 16. Management of non-carious lesions.
- 17. Management of discolored tooth
- 18. Minimal intervention dentistry.
- 19. Recent advances in restoration of endodontically treated teeth and grossly mutilated teeth.
- 20. Hypersensitivity-theories, causes and management.
- 21. Lasers in Conservative Dentistry.
- 22. CAD-CAM in restorative dentistry.
- 23. Digital imaging and its applications in restorative dentistry.
- 24. Clinical Photography.

Paper-II: Endodontics

1. Rationale of endodontics.

- 2. Pulp and periapical pathology.
- 3. Pathobiology of periapex.
- 4. Diagnostic procedures Orofacial dental pain emergencies: endodontic diagnosis and management, recent advances used for diagnosis.
- 5. Case selection and treatment planning.
- 6. Endodontic microbiology.
- 7. Infection control procedures used in Endodontics (aseptic techniques such as rubber dam, sterilization of instruments etc.)
- 8. Endodontic emergencies and management.
- 9. Access cavity preparation objectives and principles
- 10. Endodontic instruments and instrumentation recent developments, detailed description of hand, rotary, sonic, ultra sonic etc.
- 11. Working length determination, cleaning and shaping of root canal system and recent developments in techniques of canal preparation.
- 12. Root canal irrigants and intra canal medicaments.
- 13. Obturation materials, techniques and recent advances.
- 14. Traumatic injuries and management endodontic treatment for young permanent teeth.
- 15. Endodontic surgeries, recent developments in technique and devices and wound healing.
- 16. Endoperio interrelationship and management.
- 17. Lasers in Endodontics.
- 18. Multidisciplinary approach to endodontic situations.
- 19. Radiology and CBCT in endodontic practice.
- 20. Procedural errors in endodontics and their management.
- 21. Endodontic failures and retreatment.
- 22. Resorptions and its management.
- 23. Microscopes and Microsurgery in endodontics.
- 24. Single visit endodontics, current concepts and controversies.
- 25. Regenerative Endodontics

Paper-III: Essays (descriptive and analyzing type questions)

TEACHING / LEARNING ACTIVITIES:

The post graduate is expected to complete the following at the end of :

The following is the minimum required to be completed before the candidate can be considered eligible to appear for final MDS exam.

First Year

Pre Clinical Work – Conservative and Endodontics

Preclinical work on typhodont teeth

1. Class II amalgam cavities

a. Conservative preparation - 03b. Conventional preparation - 03

2. Inlay cavity preparation including wax pattern and casting on premolars and molars – MO, DO, MOD - 02

Onlay preparation on molars including wax pattern and casting - 02

4. Full Crown

	90	
	a. Anteriorb. Posterior(1 each to be processed)	- 02 - 02
•	Pre Clinical work on natural teeth	
1. 2.	Wax Carving of all permanent teeth Inlay on molars and premolars MO, DO, and MOI wax pattern and casting - 05	O including
3.	Amalgam cavity preparation a. Conventional b. Conservative	- 02 - 02
1	Complex amalgam on molar teeth	- 02 - 02
5.	•	-
6.	Full crown premolars and molars (metal, PFM & Ceramic)	- 04
7.	Full crown anterior (PFM, composite& Ceramic)	- 03
_	Veneers anterior teeth	- 02
9.	Composite	
	a. Composite Filling (Class I,II,III & V)	-05 (each)
	b. Inlay (Class I & II)	-02
	c. Veneer	-02
	d. Diastema Closure	-02
	e. Angle Buildups	-02

Endodontics:

- 1. Sectioning of all maxillary and mandibular teeth (vertical & horizontal).
- 2. Access cavity opening in relation to maxillary and mandibular permanent teeth.
- 3. Access cavity preparation, BMP and Obturation

a)	Anterior (3 maxillary and 3 mandibular)	- 06
	- Conventional prep	- 02
	- Step back	- 02
	- Crown down	- 02
	- Obturation	- 03
	(2 lateral compaction and 1 thermoplasticized)	
b)	Premolar	- 04
	(2 upper and 2 lower) obturation 1 each	
c)	Molar	- 06
	(3 upper – 2 first molars and 1 second molar	
	3 lower - 2 first molars and 1 second molar) of	oturation 1 each

- 4. Post and core preparation and fabrication in relation to anterior and posterior teeth
 - a. Anterior 10 (Cast Post 5 and prefabricated post 5)
 - b. Posterior 05 (Cast Post 2 and prefabricated post 5)
- 5. Removable dies 04

Note: Technique work to be completed in the first four months

Clinical Work:

Α	Composite restorations	30
В	GIC Restorations	30

С	Complex amalgam restorations	05
D	Composite inlay + veneers (direct and indirect)	10
Е	Ceramic jacket crowns	05
F	Post and core for anterior teeth	10
G	Bleaching vital	05
	Non vital	05
Н	RCT Anterior	20
1	Endo surgery – observation and assisting	05

Presentation of:

- Seminars 5 seminars by each student should include topics in dental materials, conservative dentistry and endodontics
- Journal clubs 5 by each student
- Submission of synopsis at the end of 6 months
- Library assignment work
- Internal assessment theory and clinicals.

Second Year Case discussion- 5

1	Ceramic jacket crowns	10
2	Post and core for anterior teeth	10
3	Post and core for posterior teeth	05
4	Composite restoration	15
5	Full crown for posterior teeth	15
6	Cast gold inlay	05
7	Other special types of work such as splinting	10
	- Reattachment of fractured teeth etc.	
8	Anterior RCT	30
9	Posterior RCT	40
10	Endo surgery performed independently	05
11	Management of endo – Perio problems	05
12	Angle build up composite	05
13	Diastema closure	05
14	Composite Veneers	05

- Under graduate teaching program as allotted by the HOD
- Seminars 5 by each student
- Journal club 5 by each student
- Dissertation work
- Prepare scientific paper / poster and present in conference and clinical meeting
- Library assignment to be submitted 18 months after starting of the course
- Internal assessment theory and clinical

Third Year

Dissertation work to be submitted 6 months before final examination.

Clinical work

•	Cast gold inlay- Onlay, cuspal restoration	10
•	Post and core	20
•	Molar endodontics	50
•	Endo surgery	05
•	Diastema Closure	05

Angle Build up 05

• All other types of surgeries including crown lengthening, perioesthetics, hemi sectioning, splinting, replantation.

Presentation of:

- Seminars 5 by each student
- Journal club 5 by each student
- Under graduate teaching program as allotted by the HOD
- Internal assessment theory and clinical

Monitoring Learning Progress:

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV.

Scheme of Examination:

A. Theory: Part-I: Basic Sciences Paper - 100 Marks
Part-II: Paper-I, Paper-II & Paper-III - 300 Marks

(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: *

<u>PART-I</u>: Applied Basic Sciences: Applied Anatomy, Physiology, Pathology including Oral Microbiology, Pharmacology, Biostatistics and Research Methodology and Applied Dental Materials.

PART-II

Paper-I: Conservative Dentistry

Paper-II: Endodontics

Paper-III : Essays (descriptive and analyzing type questions)

B. Practical / Clinical Examination : 200 Marks

The duration of Clinical and Viva Voce examination will be 2 days for a batch of four students. If the number of candidates exceeds 4, the programme can be extended to 3rd day.

Day 1

Clinical Exercise I – Random case discussion – (2) - 10+10 Marks

^{*}The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

(Diagnosis, Treatment, Planning & Discussion)

· · · · · · · · · · · · · · · · · · ·	ioni, i laming a biood	33.31.)
Cast core preparation		20 marks
(i) Tooth Preparation	-	20 marks
(ii) Direct Wax Pattern	-	10 marks
(iii) Casting	-	10 marks
(iv) Cementation	-	05 marks
(v) Retraction & Elastomeric Impression	-	05 marks
Clinical Exercise II	-	30 Marks
(Inlay Exercise)		
(i) Tooth preparation for Class II	-	20 marks
Inlay (Gold or Esthetic)		
(ii) Fabrication of Indirect Pattern	-	10 marks
Day 2 Clinical Exercise III (Molar Endodontics)	-	100 Marks
(i) Local Anaesthesia and Rubber Dam application	-	20 marks
(ii) Access Cavity	-	20 marks
(iii) Working length determination	-	20 marks
(iv) Canal Preparation	-	20 marks
(v) Master cone selection	-	20 marks
Viva Voce	:	100 Marks

i. Viva-Voce examination : 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise

C.

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

20 marks

5. ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

OBJECTIVES:

The training programme in Orthodontics is to structure and achieve the following four objectives

Knowledge:

- 1. The dynamic interaction of biologic processes and mechanical forces acting on the stomatognathic system during orthodontic treatment
- 2. The etiology, pathophysiology, diagnosis and treatment planning of various common Orthodontic problems
- 3. Various treatment modalities in Orthodontics preventive, interceptive and corrective.
- 4. Basic sciences relevant to the practice of Orthodontics
- 5. Interaction of social, cultural, economic, genetic and environmental factors and their relevance to management of oro facial deformities
- 6. Factors affecting the long-range stability of orthodontic correction and their management
- Personal hygiene and infection control, prevention of cross infection and safe disposal of hospital waste, keeping in view the high prevalence of Hepatitis and HIV and other highly contagious diseases.

Skills:

- 1. To obtain proper clinical history, methodical examination of the patient, perform essential diagnostic procedures, and interpret them and arrive at a reasonable diagnosis about the Dento-facial deformities.
- 2. To be competent to fabricate and manage the most appropriate appliance intra or extra oral, removable or fixed, mechanical or functional, and active or passive for the treatment of any orthodontic problem to be treated singly or as a part of multidisciplinary treatment of oro-facial deformities.

Attitude:

- 1. Develop an attitude to adopt ethical principles in all aspects of Orthodontic practice.
- 2. Professional honesty and integrity are to be fostered
- 3. Treatment care is to be delivered irrespective of the social status, cast, creed and religion of the patients.
- 4. Willingness to share the knowledge and clinical experience with professional colleagues
- 5. Willingness to adopt, after a critical assessment, new methods and techniques of orthodontic management developed from time to time based on scientific research, which are in the best interest of the patient
- 6. Respect patients' rights and privileges, including patients right to information and right to seek a second opinion
- 7. Develop attitude to seek opinion from allied medical and dental specialists as and when required

Communication Skills:

- Develop adequate communication skills particularly with the patients giving them the
 various options available to manage a particular Dento-facial problem and to obtain a true
 informed consent from them for the most appropriate treatment available at that point of
 time.
- 2. Develop the ability to communicate with professional colleagues, in Orthodontics or other specialties through various media like correspondence, Internet, e-video, conference, etc. to render the best possible treatment.

COURSE CONTENT:

The program outlined, addresses both the knowledge needed in Orthodontics and allied Medical specialties in its scope.

Spread of the Curriculum:

PART-I:

A. Applied Basic Sciences:

Applied Anatomy:

- a. Prenatal growth of head:
 - Stages of embryonic development, origin of head, origin of face, origin of teeth.
- b. Postnatal growth of head:
 - Bones of skull, the oral cavity, development of chin, the hyoid bone, general growth of head, growth of the face.
- c. Bone growth:
 - Origin of bone, composition of bone, units of bone structure, schedule of Ossification, mechanical properties of bone, roentgen graphic appearance of bone
- d. Assessment of growth and development:
 - Growth prediction, growth spurts, the concept of normality and growth increments of growth, differential growth, gradient of growth, methods of gathering growth data. Theories of growth and recent advances, factors affecting physical growth.
- e. Muscles of mastication:
 - Development of muscles, muscle change during growth, muscle function and facial development, muscle function and malocclusion
- f. Development of dentition and occlusion:
 - Dental development periods, order of tooth eruption, chronology of permanent tooth formation, periods of occlusal development, pattern of occlusion.
- g. Assessment of skeletal age.

Physiology:

- a. Endocrinology and its disorders:
 - Growth hormone, thyroid hormone, parathyroid hormone, ACTH.
- b. Calcium and its metabolism:
- c. Nutrition-metabolism and their disorders:
 - Proteins, carbohydrates, fats, vitamins and minerals
- d. Muscle physiology:
- e. Craniofacial Biology:
 - Adhesion molecules and mechanism of adhesion
- f. Bleeding disorders in orthodontics: Hemophilia

Dental Materials:

- a. Gypsum products:
 - Dental plaster, dental stone and their properties, setting reaction etc.
- b. Impression materials:
 - Impression materials in general and particularly of alginate impression material.
- c. Acrylics:
 - Chemistry, composition physical properties

- d. Composites:
 - Composition types, properties, setting reaction
- e. Banding and bonding cements:
- f. Wrought metal alloys:
 - Deformation, strain hardening, annealing, recovery, recrystallization, grain growth, properties of metal alloys
- g. Orthodontic arch wires
- h. Elastics:
 - Latex and non-latex elastics.
- i. Applied physics, Bioengineering and metallurgy:
- j. Specification and tests methods used for materials used in Orthodontics:
- k. Survey of all contemporary literature and recent advances in above mentioned materials:

Genetics:

- a. Cell structure, DNA, RNA, protein synthesis, cell division
- b. Chromosomal abnormalities
- c. Principles of orofacial genetics
- d. Genetics in malocclusion
- e. Molecular basis of genetics
- f. Studies related to malocclusion
- g. Recent advances in genetics related to malocclusion
- h. Genetic counseling
- i. Bioethics and relationship to Orthodontic management of patients.

Physical Anthropology:

- a. Evolutionary development of dentition
- b. Evolutionary development of jaws.

Pathology:

- a. Inflammation
- b. Necrosis

Biostatistics:

- a. Statistical principles
 - Data Collection
 - Method of presentation
 - Method of Summarizing
 - Methods of analysis different tests/errors
- b. Sampling and Sampling technique
- c. Experimental models, design and interpretation
- d. Development of skills for preparing clear concise and cognent scientific abstracts and publication

Applied Research Methodology In Orthodontics:

- a. Experimental design
- b. Animal experimental protocol
- c. Principles in the development, execution and interpretation of methodologies in Orthodontics
- d. Critical Scientific appraisal of literature.

Applied Pharmacology

Definitions & terminologies used – Dosage and mode of administration of drugs. Action and fate of drugs in the body, Drug addiction, tolerance and hypersensitive reactions, Drugs acting on the central nervous system, general anesthetics hypnotics, analeptics and tranquilizers. Local anesthetics, Chemotherapeutics and antibiotics. Vitamins: A, D, B – complex group, C & K etc.

PART-II:

Paper-I:Basic Orthodontics

OrthodonticHistory:

- a. Historical perspective,
- b. Evolution of orthodontic appliances,
- c. Pencil sketch history of Orthodontic peers
- d. History of Orthodontics in India

Concepts of Occlusion and Esthetics:

- a. Structure and function of all anatomic components of occlusion,
- b. Mechanics of articulation,
- c. Recording of masticatory function,
- d. Diagnosis of Occlusal dysfunction,
- e. Relationship of TMJ anatomy and pathology and related neuromuscular physiology.

Etiology and Classification of Malocclusion:

- a. A comprehensive review of the local and systemic factors in the causation of malocclusion
- b. Various classifications of malocclusion

Dentofacial Anomalies:

a. Anatomical, physiological and pathological characteristics of major groups of developmental defects of the orofacial structures.

Diagnostic Procedures and Treatment Planning in Orthodontics:

- a. Emphasis on the process of data gathering, synthesis and translating it into a treatment plan
- b. Problem cases analysis of cases and its management
- c. Adult cases, handicapped and mentally retarded cases and their special problems
- d. Critique of treated cases.

Cephalometrics

- a. Instrumentation
- b. Image processing
- c. Tracing and analysis of errors and applications
- d. Radiation hazards
- e. Advanced Cephalometrics techniques including digital cephalometrics
- f. Comprehensive review of literature
- g. Video imaging principles and application.

Practice Management in Orthodontics:

- a. Economics and dynamics of solo and group practices
- b. Personal management
- c. Materials management
- d. Public relations

- e. Professional relationship
- f. Dental ethics and jurisprudence
- g. Office sterilization procedures
- h. Community based Orthodontics.

Paper-II: Clinical Orthodontics

Myofunctional Orthodontics:

- a. Basic principles
- b. Contemporary appliances -design, manipulation and management
- c. Case selection and evaluation of the treatment results
- d. Review of the current literature.

Dentofacial Orthopedics:

- a. Principles
- b. Biomechanics
- c. Appliance design and manipulation
- d. Review of contemporary literature

Cleft lip and palate rehabilitation:

- a. Diagnosis and treatment planning
- b. Mechanotherapy
- c. Special growth problems of cleft cases
- d. Speech physiology, pathology and elements of therapy as applied to orthodontics
- e. Team rehabilitative procedures.

Biology of tooth movement:

- a. Principles of tooth movement-review
- b. Review of contemporary literature
- c. Applied histophysiology of bone, periodontal ligament
- d. Molecular and ultra cellular consideration in tooth movement

Orthodontic / Orthognathic surgery:

- a. Orthodontist's role in conjoint diagnosis and treatment planning
- b. Pre and post-surgical Orthodontics
- c. Participation in actual clinical cases, progress evaluation and post retention study
- d. Review of current literature

Ortho / Perio / Prostho/Endo inter relationship:

- a. Principles of interdisciplinary patient treatment
- b. Common problems and their management

Basic principles of mechanotherapy includes removable appliances and fixed appliances:

- a. Design
- b. Construction
- c. Fabrication
- d. Management
- e. Review of current literature on treatment methods and results

Applied preventive aspects in Orthodontics:

- a. Caries and periodontal disease prevention
- b. Oral hygiene measures

c. Clinical procedures

Interceptive Orthodontics:

- a. Principles
- b. Growth guidance
- c. Diagnosis and treatment planning
- d. Therapy emphasis on:
 - Dento-facial problems
 - Tooth material discrepancies
 - Minor surgery for Orthodontics

Evidence Based Orthodontics:

Different types of fixed Mechanotherapy:

Orthodontic Management of TMJ problems, sleep-apnoea etc.:

Retention and relapse:

- a. Mechanotherapy special reference to stability of results with various procedures
- b. Post retention analysis
- c. Review of contemporary literature

Recent Advances:

- a. Use of implants
- b. Lasers
- c. Application of F.E.M.
- d. Distraction Osteogenesis
- e. Invisible Orthodontics
- f. 3D imaging Digital Orthodontics, Virtual Treatment Planning
- g. CAD-CAM bracket Customization
- h. Robotic Wire Bending
- i. Accelerated Orthodontics
 - Surgical
 - Device assisted or mechanical stimulation
 - Biochemical Mediators
- j. Lingual Orthodontics

Paper-III: Essays (descriptive and analyzing type questions)

PRE - CLINICAL EXERCISES

(Should be completed within 3 months)

A general outline of the type of exercises is given here:

- 1. General Wire bending exercises to develop the manual dexterity.
- 2. Clasps, Bows and springs used in the removable appliances.
- 3. Soldering and welding exercises.
- 4. Fabrication of removable, habit breaking, mechanical and functional appliances, also all types of space maintainers and space regainers.
- 5. Bonwill Hawley Ideal arch preparation.
- 6. Construction of orthodontic models trimmed and polished.
- 7. Cephalometric tracing and various Analyses, also superimposition methods –
- 8. Fixed appliance typodont exercises.

- a) Training shall be imparted in one basic technique i.e. Standard Edgewise / Begg technique or its derivative / Straight wire etc., with adequate exposure to other techniques.
- b) Typodont exercise
 - Band making
 - Bracket positioning and placement
 - Different stages in treatment appropriate to technique taught
- 9. Clinical photography
- 10. Computerized imaging
- 11. Preparation of surgical splints, and splints for TMJ problems.
- 12. Handling of equipment like vacuum forming appliances and hydro solder etc.

Basic Pre-Clinical Exercise Work for the MDS Students:

1. Clasps:

SI.No	Exercise	No.
1	³ / ₄ Clasps	1
2.	Triangular Clasps	1
3.	Adam's clasp	2
4.	Modification of Adam's – With Helix	2
5.	Southend Clasp	1

2. Labial Bows:

SI.No.	Exercise	No.
1	Short labial bow (upper & lower)	1
2	Long labial bow (upper & lower)	1
3.	Split high labial bow	1

3. Springs:

SI.No.	Exercise	No.
1	Double cantilever spring	1
2	Coffin spring	1
3	T spring	1

4. Appliances:

SI.No.	Exercise	No.
1.	Hawley's retention appliance with anterior bite plane	1
2.	2. Upper Hawley's appliance with posterior bite plane	
3.	Upper expansion appliance with expansion screw	1
4.	Habit breaking appliance with tongue crib	1
5.	Oral screen and double oral screen	1
6.	Lip bumper	1
7.	Splint for Bruxism	1
8.	Catalans appliance	1
9.	Activator	1
10.	Bionator	1
11.	Frankel-FR 1& 2 appliance	2
12.	Twin block	1
13.	Lingual arch	1
14.	TPA	1

15.	Quad helix	1
16.	Utility arches	1
17.	Pendulum appliance	1
18.	Canine Retractor(Marcotte & PG Spring)	1

5. Soldering exercises:

SI.No.	Exercise	No.
1	Star/Comb/Christmas tree	1

6. Study model preparation:

7. Model analysis - Mixed and permanent Dentition:

8. Cephalometrics:

SI.No.	Exercise		
1	Lateral cephalogram to be traced in different colors and super		
	imposed to see the accuracy of tracing		
2	Vertical and Anterio-Posterior Cephalometric analysis		
3	Soft tissue analysis – Holdaway and Burstone		
4	Various superimposition methods		

9. Basics of Clinical Photography including Digital Photography:

10. Typodont exercises: Begg or P.E.A. method/Basic Edgewise:

SI.No	Exercise		
1	Teeth setting in Class-II division I malocclusion with maxillary		
	anterior Proclination and mandibular anterior crowding		
2	Band pinching, welding brackets and buccal tubes to the bands		
3	Different Stages dependent on the applied technique		

CLINICAL WORK:

Once the basic pre-clinical work is completed in three months, the students can take up clinical cases and the clinical training.

Each postgraduate student should start with a minimum of 50 fixed orthodontics cases and 20 removable including myofunctional cases of his/her own. Additionally he/she should handle a minimum of 25 transferred cases.

The type of cases can be as follows:

- Removable active appliances
- Class-I malocclusion with Crowding
- Class-I malocclusion with bi-maxillary protrusion
- Class-II division 1
- Class-II division 2
- Class-III (Orthopedic, Surgical, Orthodontic cases)
- Inter disciplinary cases
- Removable functional appliance cases like activator, Bionator, functional regulator, twin block and new developments
- Fixed functional appliances Herbst appliance, jasper jumper etc
- Dento-facial orthopedic appliances like head gears, rapid maxillary expansion, NiTi expander etc.,
- Appliance for arch development such as molar distalization

Fixed mechano therapy cases (Begg, PEA, Tip edge, Edgewise, lingual)

Retention procedures of above treated cases.

Scheme of examination:

A. Theory: Part-I: Basic Sciences Paper - 100 Marks
Part-II: Paper-II & Paper-III - 300 Marks

(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: *

<u>PART-I</u>: Applied Basic Sciences: Applied anatomy, Physiology, Dental

Materials, Genetics, Pathology, Physical Anthropology, Applied

Research methodology, Bio-Statistics and Applied Pharmacology.

PART-II

Paper I: Orthodontic history, Concepts of occlusion and esthetics, Child and

Adult Psychology, Etiology and classification of maloclusion, Dentofacial Anomalies, Diagnostic procedures and treatment planning

in Orthodontics, Practice management in Orthodontics

Paper II: Clinical Orthodontics

Paper III: Essays (descriptive and analyzing type questions)

* The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

B. Practical / Clinical Examination : 200 Marks

Exercise No: 1 50 Marks

Functional Case:

Selection of case for functional appliance and recording of construction bite. Fabrication and delivery of the appliance the next day.

Exercise No: 2 : 50 Marks

1. III stage with auxiliary springs/Wire bending of any stage of fixed orthodontics (OR)

2. Bonding of SWA brackets and construction of suitable arch wire.

Exercise No. 3 75 Marks

Display of records of the treated cases

(Minimum of 5 cases)

Exercise No: 4 25 Marks

Long case discussions

<u>Time allotted for each exercise:</u>

No	Exercise	Marks allotted	Approximate Time
1	Functional appliance	50	1 hour (each day)
2	III stage mechanics / Bonding and arch wire fabrication	50	1 hr 30 min
3	Display of case records (a minimum of 5 cases to be presented along with all the patients and records)	75	1 hour
4	Long cases	25	2 hours

Note: The complete records of all the cases should be displayed (including transferred cases)

C. Viva Voce : 100 Marks

i. Viva-Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise:

20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

6. ORAL & MAXILLOFACIAL PATHOLOGY AND ORAL MICROBIOLOGY

Objectives:

- To train a post graduate dental surgeon so as to ensure higher competence in both general and special pathology dealing with the nature of oral diseases, their causes, processes and effects.
- An oral pathologist is expected to perform routine histopathological evaluation of specimens relating to oral and perioral tissues, to carry out routine diagnostic procedures including hematological, cytological, microbiological, Immunological and ultra structural investigations.
- He/she is expected to have an understanding of current research methodology, collection
 and interpretation of data, ability to carry out research projects on clinical and or
 epidemiological aspects, a working knowledge on current databases, automated data
 retrieval systems, referencing and skill in writing scientific papers.
- He/she is expected to present scientific data pertaining to the field, in conferences both as poster and verbal presentations and totake part in group discussions.

Teaching / Learning Activities:

Broad Outline of Theoretical, Clinical and Practical Courses

<u>I MDS:</u>

1. Biostatistics and Research Methodology:

- Basic principles of biostatistics and study as applied to dentistry and research
- Collection/ organization of data/ measurement scales / presentation of data and analysis
- Measures of central tendency
- Measures of variability
- Sampling and planning of health survey
- Probability, normal distribution & indicative statistics
- Estimating population values
- Tests of significance(parametric/non-parametric qualitative methods)
- Analysis of variance
- Association, correlation and regression

Approach:

Didactic Lectures

2. Applied Gross Anatomy of head and neck, histology and genetics :

- Temporo-mandibular joint
- Trigeminal nerve and facial nerve
- Muscles of mastication
- Tongue
- Salivary glands
- Nerve supply, blood supply, lymphatic drainage & venous drainage of oro-dental tissues
- Development of face, palate, mandible, maxilla, tongue and applied aspects of the same
- Development of teeth & dental tissues and developmental defects of oral and maxillafacial region & abnormalities of teeth
- Maxillary sinus
- Jaw muscles and facial muscles

- Introduction to genetics
- Modes of inheritance
- Chromosomal anomalies of oral tissues & single gene disorders

- Didactic Lectures
- Postings in the Department of Anatomy for dissection of Head, Face and Neck

3. Physiology (General & Oral):

- Saliva
- Pain
- Mastication
- Taste
- Deglutition
- Wound healing
- Vitamins (influence on growth, development and structure of oral soft and hard tissues & paraoral tissues)
- Calcium metabolism
- Theories of mineralization
- Tooth eruption and shedding
- Blood and its constituents
- Hormones (influence on growth, development and structure of oral soft and hard tissues & paraoral tissues)

Approach:

Didactic Lectures

4. Cell Biology:

- Cell structure and function (ultra structural & molecular aspects)
- Intercellular junctions
- Cell cycle and division
- Cell cycle regulators
- Cell-cell & cell-extracellular matrix interactions
- Detailed molecular aspects of DNA,RNA and intracellular organelles, transcription and translation and molecular biology techniques

Approach:

Seminars & Didactic Lectures

5. General Histology:

- Light & electron microscopy considerations of epithelial tissues and glands, bone.
- Light & electron microscopy considerations of hemopoetic system, lymphatic system, muscle, neural tissue, endocrinal system (thyroid, pituitary, parathyroid)

Approach:

- Didactic Lectures
- Postings in the Department of Anatomy & Histology for slide discussion
- Record book to be maintained

6. Biochemistry:

• Chemistry of carbohydrates, lipids and proteins

- Methods of identification and purification
- Metabolism of carbohydrates, lipids and proteins
- Biological oxidation
- Various techniques-cell fractionation and ultra filtration, centrifugation, electrophoresis, spectrophotometry and radioactive techniques

- Didactic Lectures
- Postings in the Department of Biochemistry to familiarize with various techniques
- Record book to be maintained

7. General Pathology:

- Inflammation and chemical mediator
- Thrombosis
- Embolism
- Necrosis
- Repair
- Degeneration
- Shock
- Hemorrhage
- Pathogenic mechanisms at molecular level
- Blood dyscrasias
- Carcinogenesis and neoplasia

Approach:

Didactic Lectures & Seminars

8. General Microbiology:

- Definitions of various types of infections
- · Routes of infection and spread
- Sterilization , disinfection and antiseptics
- · Bacterial genetics
- Physiology, growth of microorganisms

Approach:

Didactic Lectures & Seminars

9. Basic Immunology:

- Basic principles of immunity, antigen and antibody reaction
- Cell mediated and humoral immunity
- Immunology of hypersensitivity
- Immunological basis of auto immune phenomena
- Immunodeficiency with relevance to opportunistic infections
- Basic principles of transplantation and tumor immunity

Approach:

Didactic Lectures & Seminars

10. Systemic Microbiology / Applied Microbiology :

Morphology, classification, pathogenicity, mode of transmission, methods of prevention, collection and transport of specimen for laboratory diagnosis, staining methods, common culture media, interpretation of laboratory reports and antibiotic sensitivity tests.

- Staphylococci
- Streptococci
- Corynebacterium diphtheria
- Mycobacteria
- Clostridia, bacteroids & fusobacteria
- Actinomycetales
- Spirochetes
- General structure, broad classification of viruses, pathogenesis, pathology of viral infections
- Herpes virus
- Hepatitis virus
- HIV
- General properties of fungi
- Superficial, subcutaneous, deep opportunistic infections
- General principles of fungal infections, method of collection of samples, diagnosis and examination of fungi

- Didactic Lectures & Seminars
- Postings in the Department of Microbiology to familiarize with relevant diagnostic methods
- Record book to be maintained

11. Oral biology (Oral and Dental Histology):

- Study of morphology of permanent and deciduous teeth
- Structure and function of oral, dental and paraoral tissues including their ultra structure, molecular and biochemical aspects

Approach:

- Didactic Lectures & Seminars
- Slide discussion on histological appearance of normal oral tissues
- Record book to be maintained.

12. Basic Histo-Techniques and Microscopy:

- Routine hematological tests and clinical significance of the same
- Biopsy procedures for oral lesions
- Tissue processing
- Microtome and principles of microtomy
- Various stains used in histopathology and their applications
- Microscope, principles and theories of microscopy
- Light microscopy and various other types including electron microscopy
- Fixation and fixatives
- Ground sections and decalcified sections
- Cytological smears

Approach:

- Didactic Lectures & Seminars
- Postings in Clinical Pathology and Microbiology for relevant training
- Preparation of Ground and decalcified sections, tissue processing, sectioning and staining
- Tooth Carving (Permanent Dentition)
- Record book to be maintained

II MDS:

1. Oral and Dental Pathology:

- Developmental disorders of oral and paraoral structures
- Potentially malignant disorders
- Benign and malignant tumors of the oral cavity
- Odontogenic cysts and tumors
- Pathology of salivary glands
- Regressive alterations of teeth
- Bacterial, fungal, viral and protozoal infections of the oral cavity
- Dental caries
- Diseases of pulp and periapical region
- Spread of oral infection
- Healing of oral wounds
- Physical and chemical injuries of oral cavity
- Oral aspects of metabolic diseases
- · Diseases of bones and joints
- Diseases of skin and mucous membrane
- Diseases of periodontia
- Diseases of blood and blood forming organs
- Diseases of nerves and muscles
- Oro-facial pain
- Immunological diseases of oral cavity including tumor immunology
- Molecular pathology
- Oral Microbiology

Approach:

- Didactic Lectures & Seminars
- Postings in the Department of Dermatology of a Medical College
- Postings in a Cancer Centre

2. Basic histo-techniques and microscopy:

- Enzyme histochemistry
- Principles, techniques and applications of immunofluorescence
- Principles, techniques and applications of immunohistochemistry
- Preparation of frozen sections
- Museum set up
- Quality control
- Animal models

Approach:

- Didactic Lectures & Seminars
- Training to be imparted in the Department or in other institutions having the facility
- Visit to the centre of animal experimentation to be familiarize with laboratory techniques, upkeep and care of animals
- Record book to be maintained

3. Recent Molecular Techniques:

- Basic principles, techniques and applications of
 - PCR
 - BLOTS
 - Hybridization
 - Recombinant DNA technology
 - Micro array
 - DNA sequencing
 - Cell culture and cloning

- Didactic Lectures & Seminars
- Training to be imparted in the Department or in other institutions having the facility
- Record book to be maintained

4. Recording of Case History and Clinico-Pathological Discussions:

Approach:

- Postings in the Department of Oral Medicine, Diagnosis & Radiology
- Record of minimum 10 case histories to be maintained

5. Histopathology – Slide discussion:

Record book to be maintained

III MDS:

- Forensic odontology
- Giant cell lesions
- Clear cell lesions
- Round cell lesions
- Spindle cell lesions
- Pigmented lesions
- Fibro-osseous lesions
- Mechanism of formation and expansion of cysts of orofacial region
- Mechanism of growth and metastasis of tumors
- Lab diagnosis of bacterial infections
- Lab diagnosis of viral infections
- Lab diagnosis of fungal infections
- Hamartomas
- Phakomatoses
- Vascular tumors of oro-facial region
- Genodermatoses
- Tumor markers
- Histogenesis of salivary gland tumors
- Tumor angiogenesis
- Concept of premalignancy
- Blue cell lesions
- Molecular basics of oral squamous cell carcinoma
- Matrix remodelling in pathological condition
- Etiopathogenesis of developmental defects of teeth
- Viral oncogenesis
- Lesions associated with impacted and missing teeth
- Syndromes affecting oro-facial region
- Hereditary oral defects

- Techniques to assess the prognosis of neoplastic lesions
- Vesiculo-bullous lesions
- Lymphoreticular malignancy
- Haemopoietic malignancy
- Micronutrients
- Oral aspects of metabolic disorders
- Hormones and oro-maxillofacial lesions
- Matrix metalloproteinases
- Current concepts in HIV related oral diseases
- Current concepts in OSMF
- Epithelial –connective tissue interaction
- Stem cell research

- **Didactic Lectures & Seminars**
- Postings in the Department of Forensic Medicine / Sciences
- Record book to be maintained

Monitoring Learning Progress:

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring should be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment is done using checklists that assess various aspects. Checklists are given in Section IV.

Scheme of Examination:

A. Theory: Part-I: Basic Sciences Paper 100 Marks Part-II: Paper-I, Paper-II & Paper-III 300 Marks

(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. Three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: *

PART-I

: Applied Basic Sciences: Applied Anatomy, Physiology (General and oral), Cell Biology, General Histology, Biochemistry, General Pathology, General Pharmacology specially related to drug induced oral mucosal lesions, General and systemic Microbiology, Virology, Mycology, Basic Immunology, Oral Biology (Oral and Dental Histology), Biostatistics and Research Methodology

PART-II

Paper-I : Oral pathology, Oral Microbiology & Immunology and Forensic Odontology

: Laboratory techniques & Diagnosis and Oral Oncology Paper-II **Paper-III**: Essays (descriptive and analyzing type questions)

* The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

B. Practical/Clinical Examination – 200 Marks

1. Case Presentation

a) Long case
 b) Short case
 Clinical Hematology (any two investigations)
 20 marks
 20 Marks

Hb%, bleeding time, clotting time, Total WBC count, Differential WBC count and ESR

3. Smear Presentation – 20 marks

Cytology or microbial smear and staining

4. Paraffin sectioning and H & E Staining – 30 Marks

5. Histopathology slide discussion – 100 Marks

C. Viva Voce – 100 Marks

i. Viva-Voce examination – 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents.

ii. Pedagogy Exercise

20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

7. PUBLIC HEALTH DENTISTRY

OBJECTIVES:

At the end of 3 years of training the candidate should be able to:

Knowledge:

- Applied basic sciences knowledge regarding etiology, diagnosis and management of the prevention, promotion and treatment of all the oral conditions at the individual and community level.
- Identify social, economic, environmental and emotional determinants in a given individual patient or a community for the purpose of planning and execution of Community Oral Health Program.
- Ability to conduct Oral Health Surveys in order to identify all the oral health problems affecting the community and find solutions using multi – disciplinary approach.
- Ability to act as a consultant in community Oral Health, teach, guide and take part in research (both basic and clinical), present and publish the outcome at various scientific conferences and journals, both national and international level.

Skills:

The candidate should be able to

- 1. Take history, conduct clinical examination including all diagnostic procedures to arrive at diagnosis at the individual level and conduct survey of the community at state and national level of all conditions related to oral health to arrive at community diagnosis.
- 2. Plan and perform all necessary treatment, prevention and promotion of Oral Health at the individual and community level.
- 3. Plan appropriate Community Oral Health Program, conduct the program and evaluate, at the community level.
- 4. Ability to make use of knowledge of epidemiology to identify causes and plan appropriate preventive and control measures.
- 5. Develop appropriate person power at various levels and their effective utilization.
- 6. Conduct survey and use appropriate methods to impart Oral Health Education.
- 7. Develop ways of helping the community towards easy payment plan, and followed by evaluation for their oral health care needs.
- 8. Develop the planning, implementation, evaluation and administrative skills to carry out successful community Oral Health Programs.

Values:

- Adopt ethical principles in all aspects of Community Oral Health Activities.
- 2. To apply ethical and moral standards while carrying out epidemiological researches.
- 3. Develop communication skills, in particular to explain the causes and prevention of oral diseases to the patient.
- 4. Be humble and accept the limitations in his knowledge and skill and to ask for help from colleagues when needed and promote teamwork approach.
- 5. Respect patient's rights and privileges including patients right to information and right to seek a second opinion.

A) Applied Basic Sciences:

Applied Anatomy and Histology:

a) Applied Anatomy in relation to:

- Development of face
- Bronchial arches
- Muscles of facial expression
- Muscles of mastication
- TMJ
- Salivary gland
- Tongue
- · Hard and soft palate
- Infratemporal fossa
- Paranasal air sinuses
- Pharynx and larynx
- Cranial and spinal nerves- with emphasis on trigeminal, facial, glossopharyngeal and hypoglossal nerve
- Osteology of maxilla and mandible
- Blood supply, venous and lymphatic drainage of head and neck
- Lymph nodes of head and neck
- · Structure and relations of alveolar process and edentulous mouth
- Genetics-fundamentals

b)Oral Histology:

- Development of dentition, Innervations of dentin and pulp
- Periodontium-development, histology, blood supply, nerve supply and lymphatic drainage
- Oral mucous membrane
- Pulp-periodontal complex

Applied Physiology and Biochemistry:

- Cell
- Mastication and deglutition
- Food and nutrition
- Metabolism of carbohydrates, proteins and fats
- Vitamins and minerals
- Saliva and Oral health
- Fluid and electrolyte balance
- Pain pathway and mechanism-types, properties
- Blood composition and functions, clotting mechanism and erythropoiesis, Blood groups and transfusions, Pulse and blood pressure,
- Dynamics of blood flow
- Cardiovascular homeostasis-heart sounds
- Respiratory system: Normal physiology and variations in health and diseases, Asphyxia and artificial respiration
- Endocrinology: thyroid, parathyroid, adrenals, pituitary, sex hormones and pregnancy, Endocrine regulation of blood sugar.

Applied Pathology:

- Pathogenic mechanism of molecular level
- Cellular changes following injury
- Inflammation and chemical mediators
- Oedema, thrombosis and embolism
- Hemorrhage and shock
- · Neoplasia and metastasis
- Blood disorders
- Histopathology and pathogenesis of dental caries, periodontal disease, oral mucosal lesions, and malignancies
- HIV
- Propagation of dental infection

Microbiology:

- Microbial flora of oral cavity
- Bacteriology of dental caries and periodontal disease
- Methods of sterilization
- Infection control in dental office / camps
- Virology of HIV, herpes, hepatitis
- Parasitology
- Basic immunology basic concepts of immune system in human body
 - Cellular and humoral immunity
 - Antigen and antibody system
 - Hypersensitivity
 - Autoimmune diseases

Oral Pathology:

 Detailed description of diseases affecting the oral mucosa, teeth, supporting tissues and jaws.

Physical and Social Anthropology:

Anthropology is a part of Social Sciences, which also constitutes behavioral sciences i.e., Psychology and Sociology. Behavioral Sciences has been mentioned in Public Health.

- Introduction and definition
- Appreciation of the biological basis of health and disease
- Evolution of human race, various studies of different races by anthropological methods

Applied Pharmacology:

- Definition, scope and relations to other branches of medicine, mode of action, bioassay, standardization, pharmacodyanamics, pharmcokinetics.
- Chemotherapy of bacterial infections and viral infections sulphonamides and antibiotics.
- Local anesthesia
- Analgesics and anti-inflammatory drugs
- Hypnotics, tranquilizers and antipyretics
- Important hormones-ACTH, cortisone, insulin and oral antidiabetics.
- Drug addiction and tolerance
- Important pharmacological agents in connection with autonomic nervous systemadrenaline, noradrenaline, atropine
- Brief mention of antihypertensive drugs
- Emergency drugs in dental practice
- Vitamins and haemopoietic drugs

· Effect of drugs on oral health

Research Methodology and Biostatistics:

Health Informatics— basic understanding of computers and its components, operating software (Windows), Microsoft office, preparation of teaching materials like slides, project, multimedia knowledge. Operative skills in analyzing the data.

Research Methodology – definitions, types of research, designing written protocol for research, objectivity in methodology, quantification, records and analysis.

Biostatistics – introduction, applications, uses and limitations of bio – statistics in Public Health dentistry, collection of data, presentation of data, measures of central tendency, measures of dispersion, methods of summarizing, parametric and non parametric tests of significance, correlation and regression, multivariate analysis, sampling and sampling techniques – types, errors, bias, trial and calibration

B) Public Health

Public Health:

- Definition, concepts and philosophy of dental health
- History of public health in India and at international level
- Terminologies used in public health

Health:

- Definition, concepts and philosophy of health
- Health indicators
- Health determinants
- · Community and its characteristics and relation to health

Disease:

- Definition, concepts
- Multifactorial causation, natural history, risk factors
- Disease control and eradication, evaluation and causation, infection of specific diseases
- Vaccines and immunization

General Epidemiology:

- Definition and aims, general principles
- Multifactorial causation, natural history, risk factors
- Methods in epidemiology, descriptive, analytical, experimental and classic epidemiology of specific diseases, uses of epidemiology
- Duties of epidemiologist
- General idea of method of investigating chronic diseases, mostly non-infectious nature, epidemic, endemic, and pandemic.
- Ethical conversation in any study requirement
- New knowledge regarding ethical subjects
- Screening of diseases and standard procedures used

Environmental Health:

- Impact of important components of the environment of health
- Principles and methods of identification, evaluation and control of such health hazards
- Pollution of air, water, soil, noise, food
- Water purification, international standards of water
- Domestic and industrial toxins, ionizing radiation

- Occupational hazards
- Waster disposal- various methods and sanitation

Public Health Education:

- Definition, aims, principles of health education
- Health education, methods, models, contents, planning health education programs

Public Health Practice and Administration System in India.

Ethics and Jurisprudence:

- Basic principles of law
- Contract laws- dentist patient relationships & Legal forms of practice
- Dental malpractice
- Person identification through dentistry
- Legal protection for practicing dentist
- Consumer protection act

Nutrition in Public Health:

- Study of science of nutrition and its application to human problem
- Nutritional surveys and their evaluations
- Influence of nutrition and diet on general health and oral health, dental caries, periodontal disease and oral cancers
- Dietary constituents and cariogenecity
- Guidelines for nutrition

Behavioral Sciences:

- Definition and introduction
- Sociology: social class, social group, family types, communities and social relationships, culture, its effect on oral health.
- Psychology: definition, development of child psychology, anxiety, fear and phobia, intelligence, learning, motivation, personalities, fear, dentist-patient relationship, modeling and experience

Hospital Administration:

- Departmental maintenance, organizational structures
- Types of practices
- Biomedical waste management

Health Care Delivery System:

- International oral health care delivery systems Review
- Central and state system in general and oral health care delivery system if any
- National and health policy
- National health programmes
- Health Planning and Evaluation
- Primary health care concepts, oral health in PHC and its implications
- National and international health organizations
- Dentists Act 1928, Dental council of India, Ethics, Indian Dental Association
- Role of W.H.O. and Voluntary organizations in Health Care for the Community

Oral Biology and Genetics:

- A detailed study of cell structure
- Introduction to Genetics, Gene structure, DNA, RNA
- Genetic counseling, gene typing
- Genetic approaches in the study of oral disorders

Genetic Engineering - Answer to current health problems

Demography & Family Planning:

Demographic trends, family planning methods, milestones in population control in India.

Health Economics:

Health benefit analysis and Cost effective analysis

C) Dental Public Health:

Dental Public Health:

- History
- Definition and concepts of dental public health
- Differences between clinical and community dentistry
- Critical review of current practice
- Dental problems of specific population groups such as chronically ill, handicapped and institutionalized group

Epidemiology of Oral Diseases and Conditions:

 Dental caries, gingival, periodontal disease malocclusion, dental Fluorosis, oral cancer, TMJ disorders and other oral health related problems.

Oral Survey Procedures:

- Planning
- Implementation
- WHO basic oral health methods 1997
- Indices for dental diseases and conditions
- Evaluation

Delivery of Dental Care:

- Dental person power dental auxiliaries
- Dentist population ratios,
- Public dental care programs
- School dental health programs- Incremental and comprehensive care
- Private practice and group practice
- Oral health policy National and international policy

Payment for Dental Care:

- Prepayment
- Post-payment
- Reimbursement plans
- Voluntary agencies
- Health insurance

Evaluation of Quality of Dental Care:

- Problems in public and private oral health care system program
- Evaluation of quality of services, governmental control

Preventive Dentistry:

- Levels of prevention
- Preventive oral health programs screening, health education and motivation
- Prevention of all dental diseases-dental caries, periodontal diseases, oral cancer, malocclusion and Dentofacial anomalies
- Role of dentist in prevention of oral diseases at individual and community level.
- Fluoride

- History
- Mechanism of action
- Metabolism
- Fluoride toxicity
- Fluorosis
- Systemic and topical preparations
- Advantages and disadvantages of each
- Update regarding Fluorosis
- Epidemiological studies
- Methods of fluoride supplements
- Defluoridation techniques
- Antifluoridation lobby
- Plague control measures-
 - Health Education
 - Personal oral hygiene
 - Tooth brushing technique
 - Dentifrices, mouth rinses
- Pit and fissure sealant, ART, Preventive resin restoration
- Preventive oral health care for medically compromised individual
- Update on recent preventive modalities
- · Caries vaccines
- Dietary counseling

Practice Management:

- Definition
- Principles of management of dental practice and types
- Organization and administration of dental practice
- · Ethical and legal issues in dental practice
- Current trends
- Infection control in dental practice

Tobacco Counseling:

- Health Consequences
- Tobacco dependence
- Benefits of intervention
- Tobacco cessation
- Role of dentist

Health Man Power Planning:

Structured Training Schedule:

FIRST YEAR

Seminars:

- 5 seminars in basic sciences subject,
- To conduct 10 journal clubs
- Library assignment on assigned topics 2
- Submission of synopsis for dissertation-within 6 months
- Periodic review of dissertation at two monthly intervals

Clinical Training:

1. Clinical assessment of patient

- 2. Learning different criteria and instruments used in various oral indices assessing oral hygiene, periodontal disease, wasting disease, flourosis and malocclusion 5 cases each
 - Oral Hygiene Index Greene and Vermillion
 - Oral Hygiene Index Simplified
 - DMF DMF (T), DMF (S)
 - def t/s
 - Fluorosis Indices Dean's Fluorosis Index, Tooth Surface Index for Fluorosis, Thylstrup and Fejerskov Index
 - Community Periodontal Index (CPI)
 - Plaque Index-Silness and Loe, gingival index Loe and Silness
 - Russels periodontal disease index
 - WHO Oral Health Assessment Form 1997
 - Carrying out treatment (under comprehensive oral health care) of 10 patients
 - maintaining complete records.

Field Programme:

- Carrying out preventive programs and health education for school children of the adopted school.
- · School based preventive programs-
- Topical Fluoride application-Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes, Fluoride mouth rinses
- Pit and Fissure Sealant chemically cured (GIC), light cured
- Minimal Invasive Treatment-Preventive Resin Restorations (PRR), Atraumatic Restorative Treatment (ART)
- Organizing and carrying out dental camps in both urban and rural areas.
- 3. Visit to slum, water treatment plant, sewage treatment plant, and Milk dairy, Public Health Institute, Anti-Tobacco Cell, Primary Health Center and submitting reports.
- 4. In additions the postgraduate shall assist and guide the under graduate students in their clinical and field programs.

SECOND YEAR

Seminars:

- Seminars in Public Health and Dental Public Health topics
- Conducting journal clubs
- Short term research project on assigned topics 2
- Periodic review of dissertation at monthly reviews

Clinical Training-Continuation of the Clinical Training:

- 1. Clinical assessment of patient
- 2. Learning different criteria and instruments used in various oral indices assessing oral hygiene, periodontal disease, wasting disease, flourosis and malocclusion 5 each
 - Oral Hygiene Index Greene and Vermillion
 - Oral Hygiene Index Simplified
 - DMF DMF (T), DMF (S)
 - def t/s
 - Fluorosis Indices Dean's Fluorosis Index, Tooth Surface Index for Fluorosis, Thylstrup and Fejerskov Index
 - Community Periodontal Index (CPI)
 - Plaque Index-Silness and Loe, gingival index Loe and Silness
 - Russels periodontal disease index

- WHO Oral Health Assessment Form 1987
- Carrying out treatment (under comprehensive oral health care) of 10 patients maintaining complete records

Field Program - Continuation of Field Program:

- Carrying out school dental health education
- · School based preventive programs-
 - Topical Fluoride application-Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes, Fluoride mouth rinses
 - Pit and Fissure Sealant chemically cured (GIC), light cured
 - Minimal Invasive Treatment-Preventive Resin Restorations (PRR), Atraumatic Restorative Treatment (ART)
 - Organizing and carrying out dental camps in both urban and rural areas.
- Assessing oral health status of various target groups like School children, Expectant mothers Handicapped, Underprivileged, and geriatric populations. Planning dental manpower and financing dental health care for the above group.
- Application of the following preventive measures in clinic-10 Cases each.
 - Topical Fluoride application Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes.
 - Pit and Fissure Sealant
- Planning total health care for school children in an adopted school:
 - Periodic surveying of school children
 - Incremental dental care
 - Comprehensive dental care
- Organizing and conducting community oral health surveys for all oral conditions-3 surveys
- In addition the post graduate shall assist and guide the under graduate students in their clinical and field programs
- To take lecture classes (2) for Undergraduate students in order to learn teaching methods (pedagogy) on assigned topic.

THIRD YEAR:

Seminars:

- Seminars on recent advances in Preventive Dentistry and Dental Public Health
- Critical evaluation of scientific articles 10 articles
- Completion and submission of dissertation

Clinical Training:

- Clinical assessment of patient
- Learning different criteria and instruments used in various oral indices assessing oral hygiene, periodontal disease, wasting disease, flourosis and malocclusion – 5 each
 - Oral Hygiene Index Greene and Vermillion
 - Oral Hygiene Index Simplified
 - DMF DMF (T), DMF (S)
 - def t/s
 - Fluorosis Indices Dean's Fluorosis Index, Tooth Surface Index for Fluorosis, Thylstrup and Fejerskov Index
 - Community Periodontal Index (CPI)
 - Plaque Index-Silness and Loe, gingival index Loe and Silness
 - Russels periodontal disease index

- WHO Oral Health Assessment Form 1987
- Carrying out treatment (under comprehensive oral health care) of 10 patients maintaining complete records
- Carrying out school dental health education
- School based preventive programs-
 - Topical Fluoride application Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes.
 - Pit and Fissure Sealant
 - Minimal Invasive Techniques Preventive Resin Restorations (PRR), Atraumatic Restorative Treatment (ART)
- To take lecture classes (2) for Undergraduate students in order to learn teaching methods (pedagogy) on assigned topic
- Exercise on solving community health problems 10 problems
- Application of the following preventive measures in clinic 10 cases each.
 - Topical Fluoride application Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations
 - Pit and Fissure sealants
- Dental health education training of school teachers, social workers, health workers,
- Posting at dental satellite centers/ nodal centers
- In addition the post graduate shall assist and guide the under graduate students in their clinical and field programs.

Monitoring Learning Process:

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV.

Scheme of Examination

A. Theory: Part-I: Basic Sciences Paper - 100 Marks
Part-II: Paper-I, Paper-II & Paper-III - 300 Marks

(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: *

<u>PART-I</u>: Applied Basic Sciences:Applied Anatomy and Histology, Applied Physiology and Biochemistry, Applied Pathology, Microbiology, Oral Pathology, Physical and Social Anthropology, Applied Pharmacology and Research Methodology and Biostatistics.

PART-II:

Paper-I: Public Health

Paper-II: Dental Public Health

Paper-III: Essays (descriptive and analyzing type questions)

* The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

B. Practical / Clinical Examination

: 200 Marks

- 1. Clinical examination of at least 2 patients representing the community includes history, main complaints, examination and recording of the findings, using indices for the assessment of oral health and presentation of the observation including diagnosis, comprehensive treatment planning. (50 Marks 1 ½ Hrs)
- 2. Performing

(50 Marks- 1 ½ Hrs)

- a. One of the treatment procedures as per treatment plan. (Restorative, surgical, rehabilitation)
- b. Preventive oral health care procedure.
- c. One of the procedures specified in the curriculum
- 3. Critical evaluation of a given research article published in an international journal

Marks – 1 Hour)

4. Problem solving – a hypothetical oral health situation existing in a community is given with sufficient data. The student as a specialist in community dentistry is expected to suggest practical solutions to the existing oral health situation of the given community.
(50 Marks – 1 ½ Hours)

C. Viva Voce : 100 Marks

i. Viva-Voce examination

80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise

20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

8. PEDIATRIC AND PREVENTIVE DENTISTRY

OBJECTIVES:

At the end of 3 years of training the candidate should be able to

- 1. Create not only a good oral health in the child but also a good citizen tomorrow.
- 2. Instill a positive attitude and behavior in children
- 3. Understand the principles of prevention and preventive dentistry right from birth to adolescence
- 4. Guide and counsel the parents in regards to various treatment modalities including different facets of preventive dentistry
- 5. Prevent and intercept developing malocclusion

Skills:

- 1. Obtain proper clinical history, methodological examination of the child patient, perform essential diagnostic procedures and interpret them. and arrive at a reasonable diagnosis and treat appropriately
- 2. Be competent to treat dental diseases which are occurring in child patient.
- 3. Manage to repair and restore the lost / tooth structure to maintain harmony between both hard and soft tissues of the oral cavity.
- 4. Manage the disabled children effectively and efficiently, tailored to the needs of individual requirement and conditions.
- 5. To acquire skills in managing efficiently life threatening conditions with emphasis on basic life support measures.

Attitudes:

- 1. Develop an attitude to adopt ethical principles in all aspects of Pedodontic practice.
- 2. Professional honesty and integrity are to be fostered
- 3. Treatment care is to be delivered irrespective of the social status, cast, creed, and religion of the patients.
- 4. Willingness to share the knowledge and clinical experience with professional colleagues.
- 5. Willingness to adopt, after a critical assessment, new methods and techniques of Pedodontic management developed from time to time, based on scientific research, which are in the best interest of the child patient.
- 6. Respect child patient's rights and privileges, including child patients right to information and right to seek a second opinion.
- 7. Develop an attitude to seek opinion from allied medical and dental specialities, as and when required

COURSE CONTENTS:

A) Applied Basic Sciences:

Applied Anatomy of Head and Neck:

- Anatomy of the scalp, temple and face
- Anatomy of the triangles of neck and deep structures of the neck
- Cranial and facial bones and its surrounding soft tissues with its applied aspects
- Muscles of head and neck
- Arterial supply, venous drainage and lymphatics of head and neck
- Congenital abnormalities of the head and neck
- Anatomy of the cranial nerves

- Anatomy of the tongue and its applied aspects
- Anatomy and its applied aspects of salivary glands, pharynx, thyroid and parathyroid gland, larynx, trachea, esophagus
- Autonomous nervous system of head and neck
- Functional anatomy of mastication, deglutition, speech, respiration and circulation
- TMJ: anatomy and function

Applied Physiology:

Introduction, Mastication, deglutition, digestion and assimilation, Homeostasis, fluid and electrolyte balance. Blood composition, volume, function, blood groups and hemorrhage, Blood transfusion, circulation, Heart, Pulse, Blood pressure, Normal ECG,capillary and lymphatic circulation, shock, respiration, control, anoxia, hypoxia, asphyxia, artificial respiration. Endocrine glands in particular reference to pituitary, parathyroid and thyroid glands and sex hormones. Role of calcium and Vit D in growth and development of teeth, bone and jaws.Role of Vit.A, C and B complex in oral mucosal and periodontal health.Physiology and function of the masticatory system. Speech mechanism, swallowing and deglutition mechanism, salivary glands and Saliva

Applied Pathology:

Inflammation and chemical mediators, Thrombosis, Embolism, Necrosis, Repair, Degeneration, Shock, Hemorrhage, Blood dyscrasias, Pathogenesis of Dental Caries, Periodontal diseases, tumors, oral mucosal lesions etc. in children

Applied Microbiology:

Microbiology & Immunology as related to Oral Diseases in Children: Basic concepts, immune system in human body, Auto Immune diseases and Immunology of Dental caries.

Applied Nutrition & Dietics:

- General principles, balanced diet, effect of dietary deficiencies and starvation, protein energy, malnutrition, Kwashiorkor, Marasmus.
- Fluid and Electrolytic balance in maintaining haemostasis
- Diet, digestion, absorption, transportation and utilization

Genetics:

- Introduction to genetics
- Cell structure, DNA, RNA, protein synthesis, cell division
- Modes of inheritance
- Chromosomal anomalies of oral tissues & single gene disorders

Growth & Development:

Prenatal and Postnatal development of cranium, face, jaws, teeth and supporting structures. Chronology of dental development and development of occlusion. Dimensional changes in dental arches. Cephalometric evaluation of growth.

B) Pediatric Dentistry:

Child Psychology:

Development & Classification of behavior, personality, intelligence in children, theories of child psychology, stages of psychological child development, fear, anxiety, apprehension & its management.

Behavior Management: Non- pharmacological & Pharmacological methods.

- Child Abuse & Dental Neglect:
- Conscious Sedation:
- Deep Sedation & General Anesthesia in Pediatric Dentistry: (Including Other Drugs, Synergic & Antagonistic Actions of Various Drugs Used in Children

Preventive Pedodontics:

Concepts, chair side preventive measures for dental diseases, high-risk caries including rampant & extensive caries – Recognition, Features & Preventive Management, Pit and Fissures Sealants, Oral Hygiene measures, Correlation of brushing with dental caries and periodontal diseases. Diet & Nutrition as related to dental caries. Diet Counseling

Dental Plaque:

Definition, Initiation, Pathogenesis, Biochemistry, and Morphology & Metabolism.

Gingival & Periodontal diseases in Children:

- Normal Gingiva & Periodontium in children.
- Gingival & Periodontal diseases Etiology, Pathogenesis, Prevention & Management

Pediatric Operative Dentistry:

- Principle of Operative Dentistry along with modifications of materials/past, current & latest including tooth colored materials.
- Modifications required for cavity preparation in primary and young permanent teeth.
- Various Isolation Techniques
- Restorations of decayed primary, young permanent and permanent teeth in children using various restorative material like Glass Ionomer, Composites, Silver, Amalgam & latest material (gallium)
- Stainless steel, Polycarbonate & Resin Crowns / Veneers & fibre post systems.

Pediatric Endodontics:

- Primary Dentition: Diagnosis of pulpal diseases and their management Pulp capping, Pulpotomy, Pulpectomy (Materials & Methods), Controversies & recent concepts.
- Young permanent teeth and permanent teeth, Pulp capping, Pulpotomy, Apexogenesis, Apexification, Concepts, Techniques and Materials used for different procedures.
- Recent advances in Pediatric diagnosis and Endodontics.
 Prosthetic consideration in Pediatric Dentistry.

Traumatic Injuries in Children:

- Classifications & Importance.
- Seguelae & reaction of teeth to trauma.
- Management of Traumatized teeth with latest concepts.
- Management of jaw fractures in children.

Interceptive Orthodontics:

 Concepts of occlusion and esthetics: Structure and function of all anatomic components of occlusion, mechanics of articulations, recording of masticatory function, diagnosis of Occlusal dysfunction, relationship of TMJ anatomy and pathology and related neuromuscular physiology.

- A comprehensive review of the local and systemic factors in the causation of malocclusion.
- Recognition and management of normal and abnormal developmental occlusions in primary, mixed and permanent dentitions in children (Occlusal Guidance).
- Biology of tooth movement: A comprehensive review of the principles of teeth movement. Review of contemporary literature. Histopathology of bone and Periodontal ligament, Molecular and ultra cellular consideration in tooth movement.
- Myofunctional appliances: Basic principles, contemporary appliances: Design & Fabrication
- Removable appliances: Basic principles, contemporary appliances: Design & Fabrication
- Case selection & diagnosis in interceptive Orthodontics (Cephalometrics, Image processing, Tracing, Radiation hygiene, Video imaging & advance Cephalometric techniques).
- Space Management: Etiology, Diagnosis of space problems, analysis, Biomechanics, Planned extraction in interceptive orthodontics.

Oral Habits in Children:

- Definition, Etiology & Classification
- Clinical features of digit sucking, tongue thrusting, mouth breathing & various other secondary habits.
- Management of oral habits in children

Dental care of Children with special needs:

Definition, Etiology, Classification, Behavioral, Clinical features & Management of children with:

- Physically handicapped conditions
- Mentally compromising conditions
- Medically compromising conditions
- · Genetic disorders

Oral manifestations of Systemic Conditions in Children & their Management Management of Minor Oral Surgical Procedures in Children Dental Radiology as related to Pediatric Dentistry

Cariology:

- Historical background
- Definition, Aeitology & Pathogenesis
- Caries pattern in primary, young permanent and permanent teeth in children.
- Rampant caries, early childhood caries and extensive caries. Definition, aeitology, Pathogenesis, Clinical features, Complications & Management.
- Role of diet and nutrition in Dental Caries
- Dietary modifications & Diet counseling.
- Subjective & objective methods of Caries detection with emphasis on Caries Activity tests, Caries prediction, Caries susceptibility & their clinical Applications

Pediatric Oral Medicine & Clinical Pathology: Recognition & Management of developmental dental anomalies, teething disorders, stomatological conditions, mucosal lesions, viral infections etc.

Congenital Abnormalities in Children: Definition, Classification, Clinical features & Management.

Dental Emergencies in Children and their Management.

Dental Materials used in Pediatric Dentistry.

C) Preventive Dentistry:

- Definition
- Principles & Scope
- Types of prevention
- Different preventive measures used in Pediatric Dentistry including fissure sealants and caries vaccine.

Dental Health Education & School Dental Health Programmes:

Dental health concepts, Effects of civilization and environment, Dental Health delivery system, Public Health measures related to children along with principles of Pediatric Preventive Dentistry

Fluorides:

- Historical background
- Systemic & Topical fluorides
- Mechanism of action
- Toxicity & Management.
- Defluoridation techniques.

Medico legal aspects in Pediatric Dentistry with emphasis on informed concert.

Counseling in Pediatric Dentistry

Case History Recording: Outline of principles of examination, diagnosis & treatment planning.

Epidemiology: Concepts, Methods of recording & evaluation of various oral diseases. Various national & global trends of epidemiology of oral diseases.

Comprehensive Infant Oral Health Care.

Principles of Bio-Statistics& Research Methodology & Understanding of Computers and Photography

Comprehensive cleft care management with emphasis on counseling, feeding, nasoalveolar bone remodeling, speech rehabilitation.

Setting up of Pediatric Dentistry Clinic.

Emerging concepts in Pediatric Dentistry of scope of lasers / minimum invasive procedures in Pediatric Dentistry.

Preclinical Work

(Duration – first 6 Months of First Year MDS)

(One on Each Exercise)

- 1. Carving of all deciduous teeth
- 2. Basic wire bending exercises(Clasps, Bows, Retractors and Springs, etc., on patient models)
- 3. Basics for Spot welding exercises
- 4. Fabrication of
 - a. Maxillary bite plate / Hawley's'
 - b. Maxillary expansion screw appliance
 - c. Canine retractor appliance

- d. All habit breaking appliances
 - Removable type
 - Fixed type
 - Partially fixed and removable
- e. Myofunctional appliances Twin block, Activator, Lip bumper, Oral Screen
- f. Making of inclined plane appliance
- g. Feeding appliances
- 5. Basic soldering exercises making of a lamppost of stainless steel wire pieces of different gauges soldered on either side of heavy gauge main post.
- 6. Fabrication of space maintainers
 - a. Removable type-
 - Unilateral Non Functional space maintainer
 - Bilateral Non-Functional space maintainer
 - b. Space Regainers -
 - Gerber or Opencoil space regainer
 - c. Fixed Space maintainers
 - Band & loop space maintainer
 - Transpalatal arch space maintainer
 - Nance Palatal holding arch
 - Distal shoe appliance
- 7. Basics for spot welding exercise
- 8. Collection of extracted deciduous and permanent teeth
 - a. Sectioning of the teeth at various levels and planes
 - b. Drawing of section and shapes of pulp
 - c. Phantom Head Exercises: Performing ideal cavity preparation for various restorative materials for both Deciduous and permanent teeth
 - d. Performing pulpotomy, root canal treatment and Apexification procedure
 - i) Tooth preparation and fabrication of various temporary and permanent restorations on fractured anterior teeth.
 - ii) Preparation of teeth for various types of crowns
 - iii) Laminates/veneers
 - iv) Bonding & banding exercise
- 9. Performing of behavioral rating and IQ tests for children.
- 10. Computation of:
 - a. Caries index and performing various caries activity tests.
 - b. Oral Hygiene Index
 - c. c. Fluorosis Index
- 11. Surgical Exercises:
 - a. Fabrication of splints
 - b. Type of Wiring
 - c. Suturina
- 12. a. Taking of periapical, occlusal, bitewing radiographs of children
 - b. Developing and processing of films, thus obtained
 - c. Tracing of soft tissue dental and skeletal landmarks as observed on Cephalometric radiographs and drawing of various planes and angles, further interpretation of Cephalometric radiographs.
 - d. Mixed dentition cast analysis
- 13. Library assignment
- 14. Synopsis

Clinical work Requirements from 7 to 36 months

The following is the minimum requirement to be completed before the candidate can be considered eligible to appear in the final M.D.S Examinations:

			Months	Months	Months
1.	Behavior Management of different age groups children with complete records.	17	2	10	5
2.	Detailed Case evaluation with complete records, treatment planning and presentation of cases with chair side and discussion	17	2	10	5
3.	Step-by-step chair side preventive dentistry scheduled for high risk children with gingival and periodontal diseases &Dental Caries	11	1	5	5
4.	Practical application of Preventive dentistry concepts in a class of 35-50 children& Dental Health Education & Motivation.	7	1	4	2
5.	Pediatric Operative Dentistry with application of recent concepts. (a). Management of Dental Caries				
	(I) Class I	50	30	10	10
	(II) Class II	100	40	50	10
	(III) Other Restorations	100	20	50	30
	(b). Management of traumatized anterior teeth	15	04	06	05
	(c) Aesthetic Restorations	25	05	10	10
	(d). Pediatric Endodontic Procedures				
	Deciduous teeth				
	Pulpotomy / Pulpectomy	150	30	50	70
	Permanent Molars	20	3	7	10
	Permanent Incisor	15	2	3	10
	Apexification & Apexogenesis	20	02	08	10
6.	Stainless Steel Crowns	50	10	20	20
7.	Other Crowns	05	01	02	02
8.	Fixed : Space Maintainers Habit breaking appliances	30	08	12	10
9.	Removable : Space Maintainers Habit breaking appliances	20	05	07	08
10.	Functional Appliances	05	01	02	02
11.	Preventive measures like fluoride applications & Pit & Fissure Sealants applications with complete follow-up and diet	20	08	08	04
40	counseling	00	04	0.4	0.4
12.	Special Assignments (i) School Dental Health Programmes	03	01	01	01
	(ii) Camps etc.,	02	01	01	-
13	Library usage				
14	Laboratory usage				
15	Continuing Dental Health Programmes				

(The figures given against SI. No. 4 to 12 are the minimum number of recommended procedures to be performed)

Monitoring Learning Progress:

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring is to be done by the staff of the department based on participation of students in various teaching / learning activities. It may be

structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV

Scheme of Examination:

A. Theory: Part-I: Basic Sciences Paper - 100 Marks
Part-II:Paper-I, Paper-II & Paper-III - 300 Marks
(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: *

<u>Part-I</u>: Applied Basic Sciences – Applied Basic Sciences: Applied Anatomy, Physiology, & Biochemistry, Pathology, Microbiology, Pharmacology, Research Methodology and Biostatistics Growth & Development and Dental plaque, Genetics.

Part-II:

Paper-I: Clinical Paedodontics

- 1. Conscious sedation, Deep Sedation & General Anesthesia in Pediatric Dentistry
- 2. Gingival & Periodontal Diseases in Children
- 3. Pediatric Operative Dentistry
- 4. Pediatric Endodontics
- 5. Traumatic Injuries in Children
- 6. Interceptive Orthodontics
- 7. Oral Habits in children
- 8. Dental Care of Children with special needs
- 9. Oral Manifestations of Systemic Conditions in Children & their Management
- 10. Management of Minor Oral Surgical Procedures in Children
- 11. Dental Radiology as Related to Pediatric Dentistry
- 12. Pediatric Oral Medicine & Clinical Pathology
- 13. Congenital Abnormalities in Children
- 14. Dental Emergencies in Children & Their Management
- 15. Dental Materials Used in Pediatric Dentistry
- 16. Case History Recording
- 17. Setting up of Pedodontic & Preventive Dentistry Clinic

Paper-II: Preventive and Community Dentistry as applied to Pediatric Dentistry

- 1. Child Psychology
- 2. Behavior Management
- 3. Child Abuse & Dental Neglect
- 4. Preventive Pedodontics
- 5. Cariology
- 6. Preventive Dentistry
- 7. Dental Health Education & School Dental Health Programmes:
- 8. Fluorides
- 9. Epidemiology
- 10. Comprehensive Infant Oral Health Care/Comprehensive cleft care
- 11. Principles of Bio-Statistics & Research Methodology & Understanding of Computers and Photography

Paper-III: Essays (descriptive and analyzing type questions)

* The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

B. Practical / Clinical Examination

200 Marks

The Clinical / Practical and Viva-Voce Examinations are conducted for a minimum of two days.

First Dav:

1. Case Discussion, Pulp Therapy i.e. Pulpectomy on a Primary Molar.

Case Discussion : 20 marks
Rubber Dam application : 10 marks
Working length X-ray : 20 marks
Obturation : 20 marks
Total 70 marks

2. Case Discussion, Crown preparation on a Primary Molar for Stainless steel crown and cementation of the same.

Case discussion : 10 marks
Crown Preparation : 20 marks
Crown selection and Cementation
Total : 50 marks

3. Case Discussion, band adaptation for fixed type of space maintainer and impression making.

Case discussion : 20 marks
Band adaptation : 20 marks
Impression : 20 marks
: 20 marks
60 marks

Second Day:

1. Evaluation of Fixed Space Maintainer and Cementation : 20 marks

C. Viva Voce : 100 Marks

i. Viva-Voce examination : 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise : 20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

9. ORAL MEDICINE AND RADIOLOGY

OBJECTIVES:

At the end of 3 years of training the candidate should be able to acquire adequate knowledge of the discipline.

Knowledge:

Theoretical, Clinical and practical knowledge of all oral mucosal lesions, skeletal involvement of maxillofacial region, diagnostic procedures pertaining to them and latest information of imaging modules.

<u>Skills:</u>

Three important skills need to be imparted in maxillofacial diseases

- 1. Diagnostic skill in recognition of oral diseases with radiographic diagnosis and their management
- 2. Research skills in handling scientific problems pertaining to oral treatment
- 3. Clinical and Didactic skills in encouraging younger doctors to attain learning objectives

Attitudes:

The positive mental attitude and the persistence of continued learning need to be inculcated

COURSE CONTENTS:

A) Applied Basic Sciences:

Applied Anatomy:

- 1. Gross anatomy of the face:
 - a. Muscles of Facial Expression and Muscles of Mastication
 - b. Facial nerve
 - c. Facial artery
 - d. Facial vein
 - e. Parotid gland and its relations
 - f. Sub mandibular salivary gland and its relations
- 2. Neck region:
 - a. Triangles of the neck with special reference to Carotid, Digastric triangles and midline structures
 - b. Facial spaces
 - c. Carotid system of arteries, Vertebral Artery, and Subclavian arteries
 - d. Jugular system
 - Internal jugular
 - External jugular
 - e. Lymphatic drainage
 - f. Cervical plane
 - g. Muscles derived from Pharyngeal arches
 - h. Infratemporal fossa in detail and temporomandibular joint
 - i. Endocrine glands
 - Pituitary
 - Thyroid
 - Parathyroid
 - j. Exocrine glands
 - Parotid
 - Thyroid

- Parathyroid
- k. Sympathetic chain
- I. Cranial nerves- V, VII, IX, XI, & XII
- 3. Oral Cavity:
 - a. Vestibule and oral cavity proper
 - b. Tongue and teeth
 - c. Palate soft and hard
- 4. Nasal Cavity
 - a. Nasal septum
 - b. Lateral wall of nasal cavity
 - c. Paranasal air sinuses
- 5. Pharynx:
- 6. Gross salient features of brain and spinal cord with references to attachment of cranial nerves to the brainstem
 - Detailed study of the cranial nerve nuclei of V, VII, IX, X, XI, XII
- 7. Osteology:
 - a) Comparative study of fetal and adult skull
 - b) Mandible: Development, ossification, age changes and evaluation of mandible in detail

Embryology:

- 1. Development of face, palate, nasal septum and nasal cavity, paranasal air sinuses
- 2. Pharyngeal apparatus in detail including the floor of the primitive pharynx
- 3. Development of tooth in detail and the age changes
- 4. Development of salivary glands
- 5. Congenital anomalies of face must be dealt in detail.

Histology:

- 1. Study of epithelium of oral cavity and the respiratory tract
- 2. Connective tissue
- 3. Muscular tissue
- 4. Nervous tissue
- 5. Blood vessels
- 6. Cartilage
- 7. Bone and tooth
- 8. Tongue
- 9. Salivary glands
- 10. Tonsil, thymus, lymph nodes

Physiology:

- 1. General Physiology:
 - a. Cell
 - b. Body Fluid Compartments
 - c. Classification
 - d. Composition
 - e. Cellular transport
 - f. RMP and action potential
- 2. Muscle Nerve Physiology:
 - a. Structure of a neuron and properties of nerve fibers
 - b. Structure of muscle fibers and properties of muscle fibers
 - c. Neuromuscular transmission
 - d. Mechanism of muscle contraction
- 3. Blood:

- a. RBC and Hb
- b. WBC Structure and functions
- c. Platelets functions and applied aspects
- d. Plasma proteins
- e. Blood Coagulation with applied aspects
- f. Blood groups
- g. Lymph and applied aspects

4. Respiratory System:

- a. Air passages, composition of air, dead space, mechanics of respiration with pressure and volume changes
- b. Lung volumes and capacities and applied aspects
- c. Oxygen and carbon dioxide transport
- d. Neural regulation of respiration
- e. Chemical regulation of respiration
- f. Hypoxia, effects of increased barometric pressure and decreased barometric pressure

5. Cardio-Vascular System:

- a. Cardiac Cycle
- b. Regulation of heart rate/ Stroke volume / cardiac output / blood flow
- c. Regulation of blood pressure
- d. Shock, hypertension, cardiac failure

6. Excretory System:

a. Renal function tests

7. Gastro – intestinal tract:

- a. Composition, functions and regulation of:
 - Saliva
 - Gastric juice
 - Pancreatic juice
 - Bile and intestinal juice
 - Mastication and deglutition

8. Endocrine System:

- a. Hormones classification and mechanism of action
- b. Hypothalamic and pituitary hormones
- c. Thyroid hormones
- d. Parathyroid hormones and calcium homeostasis
- e. Pancreatic hormones
- f. Adrenal hormones

9. Central Nervous System:

a. Ascending tract with special references to pain pathway

10. Special Senses:

a. Gustation and Olfaction

Biochemistry:

- 1. Carbohydrates Disaccharides specifically maltose, lactose, sucrose
 - a. Digestion of starch/absorption of glucose
 - b. Metabolism of glucose, specifically glycolysis, TCA cycle, gluconeogenesis
 - c. Blood sugar regulation
 - d. Glycogen storage regulation

- e. Glycogen storage diseases
- f. Galactosemia and fructosemia

2. Lipids

- a. Fatty acids- Essential/non essential
- b. Metabolism of fatty acids- oxidation, ketone body formation, utilization ketosis
- c. Outline of cholesterol metabolism- synthesis and products formed from cholesterol

3. Protein

- a. Amino acids- essential/non essential, complete/ incomplete proteins
- b. Transamination/ Deamination (Definition with examples)
- c. Urea cycle
- d. Tyrosine-Hormones synthesized from tyrosine
- e. In born errors of amino acid metabolism
- f. Methionine and transmethylation

4. Nucleic Acids

- a. Purines/Pyrimidines
- b. Purine analogs in medicine
- c. DNA/RNA Outline of structure
- d. Transcription/translation
- e. Steps of protein synthesis
- f. Inhibitors of protein synthesis
- g. Regulation of gene function

5. Minerals

- a. Calcium/Phosphorus metabolism specifically regulation of serum calcium levels
- b. Iron metabolism
- c. lodine metabolism
- d. Trace elements in nutrition

6. Energy Metabolism

- a. Basal metabolic rate
- b. Specific dynamic action (SDA) of foods

7. Vitamins

a. Mainly these vitamins and their metabolic role- specifically vitamin A, Vitamin C, Vitamin D, Thiamin, Riboflavin, Niacin, Pvridoxine

Pathology:

- 1. Inflammation:
 - a. Repair and regeneration, necrosis and gangrene
 - b. Role of complement system in acute inflammation
 - c. Role of arachidonic acid and its metabolites in acute inflammation
 - d. Growth factors in acute inflammation
 - e. Role of molecular events in cell growth and intercellular signaling cell surface receptors
 - f. Role of NSAIDS in inflammation
 - g. Cellular changes in radiation injury and its manifestations

2. Homeostasis:

- a. Role of Endothelium in thrombo genesis
- b. Arterial and venous thrombi
- c. Disseminated Intravascular Coagulation

d. Shock:Pathogenesis of hemorrhagic, neurogenic, septic, cardiogenic shock, circulatory disturbances, ischemic hyperemia, venous congestion, edema, infarction

3. Chromosomal Abnormalities:

- a. Marfan's syndrome
- b. Ehler's Danlos Syndrome
- c. Fragile X Syndrome

4. Hypersensitivity:

- a. Anaphylaxis
- b. Type II Hypersensitivity
- c. Type III Hypersensitivity
- d. Cell mediated Reaction and its clinical importance
- e. Systemic Lupus Erythmatosus
- f. Infection and infective granulomas

5. Neoplasia:

- a. Classification of Tumors
- b. Carcinogenesis & Carcinogens Chemical, Viral and Microbial
- c. Grading and Staging of Cancer, tumor Angiogenesis, Paraneoplastic Syndrome
- d. Spread of tumors
- e. Characteristics of benign and malignant tumors

6. Others:

- a. Sex linked agamaglobulinemia
- b. AIDS
- c. Management of Immune deficiency patients requiring surgical procedures
- d. De George's Syndrome
- e. Ghons complex, post primary pulmonary tuberculosis pathology and pathogenesis

Pharmacology:

- 1. Definition of terminologies used
- 2. Dosage and mode of administration of drugs
- 3. Action and fate of drugs in the body
- 4. Drugs acting on CNS
- 5. Drug addiction, tolerance and hypersensitive reactions
- 6. General and local anesthetics, hypnotics, antiepileptics and tranquilizers
- 7. Chemotherapeutics and antibiotics
- 8. Analgesics and anti pyretics
- 9. Anti tubercular and anti syphilitic drugs
- 10. Antiseptics, sialogogues, and anti sialogogues
- 11. Haematinics
- 12. Anti diabetics
- 13. Vitamins A, B Complex, C, D, E & K
- 14. Steroids

B) Oral and Maxillofacial Radiology:

Study includes Seminars / lectures / Demonstrations

1. History of radiology, structure of x – ray tube, production of x – ray, property of x – rays

- 2. Biological effects of radiation
- 3. Films and recording media
- 4. Processing of image in radiology
- 5. Design of x –ray department, dark room and use of automatic processing units
- 6. Localization by radiographic techniques
- 7. Faults of dental radiographs and concept of ideal radiograph
- 8. Quality assurance and audit in dental radiology
- 9. Extra oral-imaging techniques
- 10. OPG and other radiologic techniques
- 11. Advanced imaging techniques like CBCT,CT Scan, MRI, Ultrasound
- 12. Basic Anatomy of sectional imaging with case interpretations of CT / CBCT / MRI
- 13. Radio nucleotide techniques
- 14. Contrast radiography in salivary gland, TMJ, and other radiolucent pathologies
- 15. Radiation protection and ICRP guidelines
- 16. Art of radiographic report, writing and descriptors preferred in reports
- 17. Radiograph differential diagnosis of radiolucent, radio opaque and mixed lesions
- 18. Digital radiology and its various types of advantages

C) Oral Medicine, therapeutics and laboratory investigations:

Study includes seminars / lectures / discussion

- 1. Methods of clinical diagnosis of oral and systemic diseases as applicable to oral tissues including modern diagnostic techniques
- 2. Laboratory investigations including special investigations of oral and oro facial diseases
- 3. Teeth in local and systemic diseases, congenital, and hereditary disorders
- 4. Oral manifestations of systemic diseases
- 5. Oro facial pain
- 6. Psychosomatic aspects of oral diseases
- 7. Management of medically compromised patients including medical emergencies in the dental chair
- 8. Congenital and Hereditary disorders involving tissues of oro facial region
- 9. Systemic diseases due to oral foci of infection
- 10. Hematological, Dermatological, Metabolic, Nutritional, & Endocrinal conditions with oral manifestations
- 11. Neuromuscular diseases affecting oro -facial region
- 12. Salivary gland disorders
- 13. Tongue in oral and systemic diseases
- 14. TMJ dysfunction and diseases
- 15. Concept of immunity as related to oro facial lesions, including AIDS
- 16. Cysts, Neoplasms, Odontomes, and fibro osseous lesions
- 17. Oral changes in Osteo dystrophies and chondro dystrophies
- 18. Pre malignant and malignant lesions of oro facial region
- 19. Allergy and other miscellaneous conditions
- 20. Therapeutics in oral medicine -clinical pharmacology
- 21. Forensic odontology
- 22. Computers in oral diagnosis and imaging
- 23. Evidence based oral care in treatment planning
- 24. Molecular Biology

Essential Knowledge:

Basic medical subjects, Oral Medicine, Clinical Dentistry, Management of Medical Emergencies, Oral Radiology techniques and Interpretation, Diagnosis of Oro – facial disorders

Procedural and Operative Skills:

1st Y	'ear:
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•	i cai.			
1.	Examination of Patient	Case history recordingsFNAC	_ _	100 50
0	lates and radiographs.	BiopsyObserve, Assist, & Perform	– n under supervi	50 sion
۷.	Intra – oral radiographs:	- Perform and interpretation	-	500
3.	Full mouth intra oral radiogra	ph tracings	_	3
4.	Age estimation using radiogr	aphs –		10
2nd	Year:			
_	Dental treatment to medically - Observe, assist, and perfor	•	-	2
2.	Extra oral radiographs, digita	ıl radiography	_	20
	- Observe, assist and perform under supervision, Interpretation			
3.	Extra Oral radiographs tracin	ngs	_	3
4.	CBCT Interpretations	-	5	

Operative skills:

- 1. Giving intra muscular and intravenous injections
- 2. Administration of oxygen and life saving drugs to the patients
- 3. Performing basic CPR and certification by Red Cross or similar authorized organization

3rd Year

•	i oui			
All the above				
-	Performed independently – Case history: Routine cases	_		100
-	Interesting Cases	_		25
-	OPG	_		50
-	Periapical view	_		100
-	Bitewing view	_		50
-	Occlusal view	_		50
-	Extra – oral radiographs of different views	_		25
-	CBCT Interpretations –		10	
-	Treatment of mucosal lesions with LASER –		3	

Monitoring Learning Progress:

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring is to be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV

Schemes of Examination:

A. Theory: Part-I: Basic Sciences Paper 100 Marks Part-II: Paper-I, Paper-II & Paper-III 300 Marks

(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I, Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: *

PART-I : Applied Basic Sciences: Applied Basic Sciences: Applied Anatomy,

Physiology, & Biochemistry, Pathology, Microbiology, Pharmacology, Research

Methodology and Biostatistics

PART-II:

Paper-I: Oral and Maxillofacial Radiology

Paper-II: Oral Medicine, therapeutics and laboratory investigations

Paper-III : Essays (descriptive and analyzing type questions)

B. Practical / Clinical Examination

: 200 Marks

1st Day

Clinical Case Presentation

2 Spotters 2 x 10 = 20 Marks
2 Short Cases 2 x 15 = 30 Marks
1 Long Case 1 x 50 = 50 Marks

Total = 100 Marks

Radiology Exercise

I. A) One Intra Oral Radiograph : 10 MarksB) One Occlusal Radiograph : 30 Marks

II. A) Two Extra Oral Radiograph :2 x 30 = 60 Marks Including technique and interpretation

2nd Dav

C. Viva Voce : 100 Marks

i. Viva-Voce examination : 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise : 20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

^{*} The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.

Revised Ordinance Governing

BACHELOR OF DENTAL SURGERY (BDS)

Degree Course 2011



RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES KARNATAKA

4th 'T' Block, Jayanagar, Bangalore 560041



CONTENTS

NOTIFICATION

SECTION I: Goals of Education and Training in Dental Science of RGUHS

SECTION II: Aims and Objectives of BDS Course SECTION III: Regulation Relating to BDS Course

SECTION IV: B. D.S course Syllabus

IBDS

- I. General Human Anatomy including Embryology and Histology.
- ii. General Human Physiology, Biochemistry, Nutrition and Deities.
- iii. Dental Anatomy, Embryology and Oral Histology.
- iv. Dental Materials.
- v. Preclinical Prosthodontics and Crown & Bridge.

II BDS

- I. General Pathology and Microbiology.
- ii. General and Dental Pharmacology and Therapeutics.
- iii. Dental Materials.
- iv. Preclinical Conservative Dentistry.
- v. Preclinical Prosthodontics and Crown & Bridge.
- vi. Oral Pathology & Oral Microbiology.

III BDS

- I. General Medicine.
- ii. General Surgery.
- iii. Oral Pathology and Oral Microbiology.
- iv. Conservative Dentistry & Endodontics.
- v. Oral & Maxillofacial Surgery.
- vi. Oral Medicine and Radiology
- vii. Orthodontics & Dentofacial Orthopaedics.
- viii. Paediatric & Preventive Dentistry.
- ix. Periodontology.
- x. Prosthodontics and Crown & Bridge.
- xi. Public Health Dentistry.

IV BDS

- I. Orthodontics & Dentofacial Orthopaedics.
- ii. Oral Medicine and Radiology.
- iii. Paediatric & Preventive Dentistry.
- iv. Periodontology.
- v. Oral & Maxillofacial Surgery.
- vi. Prosthodontics and Crown and Bridge.
- vii. Conservative Dentistry & Endodontics.
- viii. Public Health Dentistry.

SECTION V: Ethics in Dentistry



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ

4ನೇ ಟಿ ಬ್ಲಾಕ್, ಜಯನಗರ, ಬೆಂಗಳೂರು - 560 041.

RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA

4th `T' Block, Jayanagar, Bangalore - 560 041.

Phone: 080-26961934, 080-26961395 Fax: 080-26961929 website: www.rguhs.ac.in, E-mail: rguhsregistrar@gmail.com

AUTH/BDS-Regulation/172/2011-12		27/01/2012
Ref.:	NOTIFICATION	Date:
	of DCID I IDDO	

Sub: Implementation of DCI Revised BDS Regulations 2011 – Reg. Ref:1) RGUHS Notification No.AUTH/Revised BDS Regulation-317/2008-09,

dated:04/08/2008
 DCI Notification in Gazette of India extraordinary No.DE-130-2011, dated:25/08/2011.

3) DCI letter No.DE-130-2011/B.2211, dated:26/08/2011.

4) Letter of Dean, Faculty of Dentistry, RGUHS, Bangalore No.DAPM RVDC/928/2011-12, dated: 27/01/2012.

5) Orders of Hon'ble Vice-Chancellor dated: 28/01/2011.

In exercise of the powers conferred under Section 13(2) of RGUHS Act, 1994, Hon'ble Vice-Chancellor is pleased to order the "Implementation of DCI Revised BDS Course (3rd Amendment) Regulations, 2011" applicable to the students admitted from the year 2008-09. The students appearing the for IV BDS examination are required to appear for examination in the following subjects.

- 1. Oral Medicine & Radiology
- 2. Oral & Maxillofacial Surgery
- 3. Periodontics
- 4. Prosthodontics Crown & Bridge
- 5. Conservative Dentistry & Endodontics
- 6. Community Dentistry
- 7. Orthodontics
- 8. Pedodontics

The above Ordinance shall come into force with immediate effect.

By Order

REGISTRAR

To

Principals of all Dental Colleges affiliated to RGUHS.

Copy to:

- 1. The Secretary to Governor, Governor's Secretariat, Raj Bhavan, Bangalore 560 001.
- 2. Principal Secretary to Government, Health & Family Welfare Department, (Medical Education), Vikasa Soudha, Bangalore –560 001.
- The Director, Department of Medical Education, Anand Rao Circle, Bangalore 560 009.
- 4. Secretary, DCI, Aiwan-E-Galib Marg, Kotla Road, New Delhi 110002
- 5. Dean, Faculty of Dentistry, RGUHS, Bangalore
- 6. Director, Curriculum Development Cell, RGUHS, Bangalore
- 7. PA to Vice-Chancellor / Registrar / Registrar (Eva.) / Finance Officer.
- 8. The Home Page of RGUHS Websitehttp://www.rguhs.ac.in/Authoritysection/Fellowship.html.
- 9. Office Copy/Guard File.

Annexure to University Notification dated :Auth/BDS-Regulation/172/2011-12,Dated 27/1/2012.



GOALS OF EDUCATION AND TRAINING IN DENTAL SCIENCE OF RGUHS

The Dental curriculum shall be oriented towards educating students of B.D.S. Course to:

- Take up the responsibilities of dental surgeon of first contact and be capable of functioning independently in both urban and rural environment.
- 2. Provide educational experience that allows hands-on-experience both in hospital as well as in community setting.
- 3. Make maximum efforts to encourage integrated teaching and de-emphasize compartmentalisation of disciplines so as to achieve horizontal and vertical integration in different phases.
- 4. Offer educational experience that emphasizes health rather than only disease.
- 5. Teach common problems of health and disease and to the national programmes.
- 6. Use learner oriented methods, which would encourage clarity of expression, independence of judgement, scientific habits, problem solving abilities, self initiated and self-directed learning.
- 7. Use of active methods of learning such as group discussions, seminars, role play, field visits, demonstrations, peer interactions etc., which would enable students to develop personality, communication skills and other qualities which are necessary may be done.

Regular periodic assessment be done throughout the course. Examinations be designed with a view to assess not merely the knowledge but also practical and clinical skills, habits and values which are necessary for a graduate to carry out professional day to day work competently.

Towards achieving these goals every Dental College should:

- Evolve institutional objectives, which would be in consonance with the national goals and health policy. The institutional objectives should describe the attributes of their product.
- Shift the role of Dental teachers from merely imparting knowledge to that of a facilitator and motivator of student learning.
- Establish a Dental Education Unit for faculty development, preparation of learning resource materials and for improving evaluation methods.



AIMS AND OBJECTIVE OF BDS COURSE

Aims

The dental graduates during training in the institutions should acquire adequate knowledge, necessary

skills and such attitudes which are required for carrying out all the activities appropriate to general dental practice involving the prevention, diagnosis and treatment of anomalies and diseases of the teeth, mouth, jaws and associated tissues. The graduate should also understand the concept of community oral heath education and be able to participate in the rural health care delivery programmes

existing in the country.

Objectives

The objectives are dealt under three headings namely (a) knowledge and understanding (b) skills and (c) attitudes.

a. Knowledge and understanding

The graduate should acquire the following during the period of training.

- Adequate knowledge of the scientific foundations on which dentistry is based and good understanding of various relevant scientific methods, principles of biological functions and should be able to evaluate and analyse scientifically various established facts and data.
- 2. Adequate knowledge of the development, structure and function of the teeth, mouth and jaws and associated tissues both in health and disease and their relationship and effect on general-state of health and also the bearing on physical and social well-being of the patient.
- Adequate knowledge of clinical disciplines and methods, which provide a coherent picture of anomalies, lesions and diseases of the teeth, mouth and jaws and preventive, diagnostic and therapeutic aspects of dentistry.
- 4. Adequate clinical experience required for general dental practice.
- Adequate knowledge of biological function and behaviour of persons in health and sickness as well as the influence of the natural and social environment on the state of health so far as it affects dentistry.

b. Skills

A graduate should be able to demonstrate the following skills necessary for practice of dentistry.

- 1. Able to diagnose and manage various common dental problems encountered in general dental practice, keeping in mind the expectations and the right of the society to receive the best possible treatment available wherever possible.
- 2. Acquire skill to prevent and manage complications if encountered while carrying out various dental surgical and other procedures.
- 3. Possess skill to carry out required investigative procedures and ability to interpret laboratory findings.
- 4. Promote oral health and help to prevent oral diseases wherever possible.
- 5. Competent in control of pain and anxiety during dental treatment.

c. Attitudes

A graduate should develop during the training period the following attitudes.

- Willing to apply current knowledge of dentistry in the best interest of the patients and the community.
- 2. Maintain a high standard of professional ethics and conduct and apply these in all aspects of professional life.
- 3. Seek to improve awareness and provide possible solutions for oral health problems and needs throughout the community.
- 4. Willingness to participate in the continuing education programmes to update knowledge and professional skills from time to time.
- 5. To help and to participate in the implementation of national health programmes.



REGULATION RELATING TO BDS COURSE

I. ELIGIBILITY:

1.1 Qualifying Examination:

A candidate seeking admission to first BDS course:

- a. Shall have passed the two years Pre-University Examination of Pre-University Board of Karnataka with English and Physics Chemistry and Biology as optional subjects. The candidate shall have passed subjects of English, Physics, Chemistry and Biology individually* also
- b. Shall have passed any other examination conducted by Boards/Councils/Intermediate Education established by State Governments/ Central Government and recognised as equivalent to two year Pre University examination by the Rajiv Gandhi University of Health Sciences/Association of Indian Universities (AIU), with English as one of the subjects and Physics, Chemistry and Biology as optional subjects and the candidate shall have passed subjects of English, Physics, Chemistry and Biology individually.
- c. Shall have passed Intermediate examination in Science of an Indian University/Board/Council or other recognised examining bodies with Physics, Chemistry and Biology, which shall include a practical test in these subjects and also English as compulsory subject. The candidate shall have passed subjects of English, Physics, Chemistry and Biology individually. OR
- d. Shall have passed pre- professional/ pre- medical examination with Physics, Chemistry and Biology, after passing either the higher secondary school examination. The pre-professional/ pre-medical examination, shall include a practical test in Physics, Chemistry and Biology and also English as compulsory subject.
- e. Shall have passed first year of the three year degree course of a recognised University with Physics, Chemistry and Biology including a practical test in these subjects provided the Examination is an 'University Examination' provided that the candidate shall have passed subjects of English, Physics, Chemistry and Biology individually in the pre university or other examinations mentioned in the clauses above.
- f. Shall have passed B.Sc. Examination of an Indian University, provided that he/she has passed the B.Sc. examination with not less than two of the following subjects: Physics, Chemistry, Biology (Botany, Zoology) provided the candidate has passed subjects of English, Physics, Chemistry and Biology individually in the qualifying examinations mentioned in clauses (a), (b) and ©.

1.2 Qualifying Marks:

The selection of students to dental colleges shall be based on merit provided that:

- a. In case of admission on the basis of qualifying examination, a candidate for admission to BDS course must have passed individually in the subjects of Physics, Chemistry, Biology and English and must have obtained a minimum of 50% marks taken together in Physics, Chemistry and Biology in the qualifying examination. In respect of candidates belonging to Scheduled Castes, Scheduled Tribes or Other Backward Classes, the marks obtained in Physics, Chemistry and Biology taken together in qualifying examination be 40% instead of 50% as above and must have passing marks in English.
- b. In case of admission on the basis of competitive entrance examination, a candidate must have passed individually in the subjects of Physics, Chemistry, Biology and English and must have obtained a minimum of 50% marks in Physics, Chemistry and Biology taken together at the qualifying examination and in addition must have come in the merit list prepared as a result of such competitive entrance examination by securing not less than 50% marks in Physics, Chemistry and Biology taken together in the competitive examination. In respect of candidates belonging to Scheduled Castes, Scheduled Tribes or Other Backward Classes notified by the Government, the marks obtained in Physics, Chemistry and Biology taken together in qualifying examination and competitive entrance examination be 40% instead of 50% as stated above. (Vide Amendment to DCI Regulations, 2007, notified in Gazette of Government of India dated 10.09.2007).

II. Age Requirement:

The candidate shall have completed the age of 17 years at the time of admission or will complete this age on 31st December of the year in which he/she seeks admission.

III. Duration of the Course:

Four academic years with 240 teaching days in each academic year, and One year of internship.

IV. Attendance requirement, Progress and Conduct:

Attendance requirement shall be as follows:

- a. 75% in Theory and 75% in Practical/Clinicals in each subject in each year.
- b. In case of subject in which the instructional programme extends through more than one academic year and hence there is no University Examination in the subject (i.e. non- exam going subjects), the attendance requirement shall not be less than 70% in Theory and Practical/ Clinical. However, at the time of appearing for the professional examination in the subject the candidate should satisfy the condition (a) above.

V. Titles of subjects of study

First Year

- I. General Human Anatomy including Embryology and Histology.
- ii. General Human Physiology and Biochemistry, Nutrition and Dietics.
- iii. Dental Anatomy, Embryology and Oral Histology.
- iv. Dental Materials.
- v. Preclinical Prosthodontics and Crown & Bridge.

Second Year

- I. General Pathology and Microbiology.
- ii. General and Dental Pharmacology and Therapeutics.
- iii. Dental Materials.
- iv. Preclinical Conservative Dentistry.
- v. Preclinical Prosthodontics and Crown & Bridge.
- vi. Oral Pathology & Oral Microbiology.

Third Year

- I. General Medicine.
- ii. General Surgery.
- iii. Oral Pathology and Oral Microbiology.
- iv. Conservative Dentistry & Endodontics.
- v. Oral & Maxillofacial Surgery.
- vi. Oral Medicine and Radiology
- vii. Orthodontics & Dentofacial Orthopaedics.
- viii. Paediatric & Preventive Dentistry.
- ix. Periodontology.
- x. Prosthodontics and Crown & Bridge.
- xi. Public Health Dentistry.

Final Year

- I. Orthodontics & Dentofacial Orthopaedics.
- ii. Oral Medicine and Radiology.
- iii. Paediatric & Preventive Dentistry.
- iv. Periodontology.
- v. Oral & Maxillofacial Surgery.
- vi. Prosthodontics and Crown and Bridge.
- vii. Conservative Dentistry & Endodontics.
- viii. Public Health Dentistry.

VI. Teaching Hours

Teaching hours for each subject from first to final year - Theory and Practical are shown in the Tables-I to ${\sf V}$

TABLE - I Subjects and Hours of Instruction (B.D.S Course)

SI. No.	Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
1.	General Human Anatomy including Embryology, Osteology and Histology	100	175		275
2.	General Human Physiology, Biochemistry, Nutrition and Dietics	120 70	60 60		180 130
3.	Dental Materials	80	240	,	320
4.	Dental Anatomy, Embryology, and Oral Histology	105	250		355
5.	Dental Pharmacology and Therapeutic	s 70	20		90
6.	General Pathology & Microbiology	55 65	55 50		110 115
7.	General Medicine	60		90	150
8.	General Surgery	60		90	150
9.	Oral Pathology and Microbiology	145	130	18	275
10.	Oral Medicine and Radiology	65		170	235
11.	Paediatric & Preventive Dentistry	65		170	235
12.	Orthodontics & Dental Orthopaedics	50		170	220
13.	Periodontology	80		170	250
14.	Oral & Maxillofacial Surgery	70		270	340
15.	Conservative Dentistry and Endodont	ics 135	200	370	705
16.	Prosthodontics & Crown & Bridge	135	300	370	805
17.	Public Health Dentistry	60		200	260
16 P	Total	1590	1540	2130	5200

Note: There should be a minimum of 240 teaching days every academic year consisting of 8 working hours including one hour of lunch break. Internship-240x8 hours=1920 clinical hours.

TABLE - II Subjects and Hours of Instruction for First year B.D.S

SI. No.	Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
1.	General Human Anatomy including Embryology, Osteology and Histology	100	175		275
2.	General Human Physiology,	120	60		180
3.	Biochemistry, Nutrition and Dietics	70	60		130
4.	Dental Anatomy, Embryology, and Oral Histology	105	250		355
5.	Dental Materials	20	40		60
6.	Preclinical Prosthodontics and Crown & Bridge		100		100
	Total	415	685		1100

TABLE - III Subjects and Hours of Instruction for Second year B.D.S

SI. No.	Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
1.	General and Dental Pharmacology and Therapeutics	70	20		90
2.	General Pathology	55	55		110
3.	Microbiology	65	50		115
4.	Dental Materials	60	200		260
5.	Oral Pathology and Oral Microbilogy	25	50		75
6.	Preclinical Prosthodontics and Crown & Bridge	25	200		225
7.	Preclinical conservative Dentistry	25	200		225
	Total	325	775		1100

TABLE - IV Subjects and Hours of Instruction for Third year B.D.S

SI. No.	Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
1.	General Medicine.	60		90	150
2.	General Surgery.	60		90	150
3.	Oral Pathology and Oral Microbiology.	120	80		200
4.	Conservative Dentistry & Endodontics	30		70	100
5.	Oral & Maxillofacial Surgery.	20		70	90
6.	Oral Medicine and Radiology	20		70	90
7.	Orthodontics & Dentofacial Orthopaedic	s. 20		70	90
8.	Paediatric & Preventive Dentistry.	20		70	90
9.	Periodontology.	30		70	100
10.	Prosthodontics and Crown & Bridge.	30		70	100
	Total	410	80	670	1160

TABLE - V Subjects and Hours of Instruction for Fourth year B.D.S

SI. No.	Subject	Lecture Hours	Practical Hours	Clinical Hours	Total Hours
1.	Orthodontics & Dentofacial Orthopaedics.	30		100	130
2.	Oral Medicine and Radiology.	45		100	145
3.	Paediatric & Preventive Dentistry.	45		100	145
4.	Periodontology.	50		100	150
5.	Oral & Maxillofacial Surgery.	50		200	250
6.	Prosthodontics and Crown and Bridge.	80		300	380
7.	7. Conservative Dentistry & Endodontics.			300	380
8.	Public Health Dentistry.	60		200	260
	Total	440		1400	1840

VII.Schedule of Examinations

The University shall conduct two examinations annually at an interval of not less than four to six months as notified by the University from time to time.

A candidate who satisfies the requirement of attendance, progress, and conduct as stipulated by the university shall be eligible to appear in the University examination. Certificate to the above effect should be produced from the Head of the Institution along with the application for examination and the prescribed fee.

VIII.Scheme of Examination

The scheme of examination of B.D.S. course shall be divided into 4 professional examinations, viz., I.B.D.S. Examination at the end of first academic year, II B.D.S. at the end of second academic year, III B.D.S. at the end of third academic year and Final year B.D.S. examination at the end of fourth academic year.

VIII. i. Internal Assessment

The internal assessment need not be limited to written tests. It should relate to other items such as maintenance of records, participation in seminars and group discussions, clinical case study, proficiency in carrying out practical or clinical skill or participation in projects and assignments (even) during vacation. These be evaluated objectively and recorded. The weightage given to internal assessment is 10% out of total marks assigned for a subject separetely for theory and practical/clinical examinations.

A minimum of three internal assessments to be held in an academic year and the average of these tests shall be sent to the university.

VIII. ii. University Examination:

There shall be two examinations annually conducted at an interval of not less than four to six months. The written examination in each subject shall consist of one paper of three hours duration and shall have maximum of 70 marks.

X. Type of questions and distribution of marks:

Each question paper shall be of 3 hours duration, carrying maximum marks of 70. There shall be three types of questions with distribution of marks as shown in Table VII:

Table - VII

Type of Questions	No. of Questions	Marks of Questions	Total Marks
Long Essay Type	2	10	20
Short Essay Type	8	5	40
Short Answer Type 5		2	10
	GRAND TOTAL		70

Note: In case of Physiology & Biochemistry and Pathology & Microbiology The distribution of marks and types of questions will be as follows:

- 1. In the subject of General Human Physiology and Biochemistry, Section 'A' (Gen. Physiology) shall contain one Long essay type question carrying 10 marks and second question containing three short Essay type questions carrying five marks each, third question containing five Short Answer questions carrying two marks each. Section 'B' (Biochemistry) shall contain one Long essay type question of 10 marks and second question containing three short Essay type questions of five marks each, third question containing five Short Answer type questions carrying two marks each. As shown in Table-VIII.
- 2. In the subject of Gen. Pathology, Section 'A' (Gen. Pathology) shall contain one Long essay type question carrying 10 marks and second question shall contain three Short Essay type question carrying five marks each, third question containing five Short Answer questions of two marks each. Section 'B' (Microbiology) shall contain one Long essay type question carrying 10 marks and second question shall contain three Short essay type questions carrying five marks each, third question containing five short answer questions of two marks each. As shown in Table-IX.

Table - VIII

	Type of Questions	No. of Questions	Marks of Questions	Total Marks
	Long Essay Type	01	10	10
Physiology	Short Essay Type	03	05	15
Thysiology	Short Answer Type	05	02	10
7.1	GRA	35		

	Type of Questions	No. of Questions	Marks of Questions	Total Marks
	Long Essay Type	01	10	10
Biochemistry	Short Essay Type	03	05	15
Nutrition and Dietics	Short Answer Type	05	02	10
	GRA	35		

TABLE - IX

	Type of Questions	No. of Questions	Marks of Questions	Total Marks
19	Long Essay Type	01	10	10
Dothology	Short Essay Type	03	05	15
Pathology	Short Answer Type	05	02	10
	GRA	35		

	Type of Questions	No. of Questions	Marks of Questions	Total Marks
	Long Essay Type	01	10	10
Microbiology	Short Essay Type	03	05	15
Microbiology	Short Answer Type	05	02	10
	GR/	35		

XI. Distribution of Marks in University Examination and Internal Assessment for various subjects from First year to Fifth year is shown in Table X:

TABLE-X
Distribution of Marks in University Examination and Internal Assessment for various subjects from First year to Fifth year :

		THEORY			PRACTIO			
Subjects	Univer sity Paper	Viva voce	Internal Assess ment	Total	Univer sity exami nation	Internal Assess ment	Total	Grand Total
I BDS 1. General Anatomy including Embryology and Histology	70	20	10	100	90	10	100	200
2 . Section- A General Human Physiology And	35	10	05	50	45	05	50	200
Section- B Biochemistry Nutrition and Dietics	35	10	05	50	45	05	50	200
3. Dental Anatomy, Embryology and Oral Histology.	70	20	10	100	90	10	100	200

II BDS Section - A 1. General Pathology	35	10	05	50	45	05	50	200
Section - B & Microbiology	35	10	05	50	45	05	50	200
2. General and Dental Pharmacology and Therapeutics	70	20	10	100	90	10	100	200
3. Dental Materials	70	20	10	100	90	10	100	200
4. *Pre-clinical Conservative Dentistry		20		20	60	20	80	100
5. *Pre-clinical Prosthodontics * No theory paper, Practical/Viva voce only.		20		20	60	20	80	100
III BDS 1. General Medicine	70	20	10	100	90	10	100	200
2. General Surgery	70	20	10	100	90	10	100	200
Oral Pathology and Oral Microbiology	70	20	10	100	90	10	100	200
IV BDS 1. Oral Medicine and Radiology	70	20	10	100	90	10	100	200
2. Paediatric & preventive dentistry	70	20	10	100	90	10	100	200
3. Orthodontics & Dento-facial orthopaedics	70	20	10	100	90	10	100	200
4. Periodontology	70	20	10	100	90	10	100	200
5. Prosthodontics and Crown and Bridge	70	20	10	100	90	10	100	200
6. Conservative Dentistry and Endodontics	70	20	10	100	90	10	100	200
7. Oral and maxillofacial Surgery.	70	20	10	100	90	10	100	200
8. Public Health Dentistry	70	20	10	100	90	10	100	200

XII. Eligibility to appear in University examination:

A candidate who has failed in any one subject only in either I year B.D.S or II year B.D.S or III year BDS university examination shall be permitted to study in the next class provided that inorder to avail the carry over facility such a candidate should fulfills the following requirements:

- a. student shall have not less than 75% of attendance in Theory and Practical separately in all the examination subjects prescribed for that year.
- b. should have appeared in all the examination subjects prescribed for that year in the University examination simultaneously.

A Candidate has to pass the carry over subject before being eligible to appear for higher B.D.S Examination.

XIII. Criteria for Pass in the University Examination:

- 1. For declaration of pass in a subject, a candidate shall secure 50% marks in the University examination both in Theory and Practical/Clinical examinations separately, as stipulated below:
- a. For pass in Theory, a candidate shall secure 50% marks in aggregate in University theory examination i.e. marks obtained in University written examination, viva voce examination and internal assessment (theory) combined together i.e. fifty out of One hundred marks.
- b. In the University Practical/clinical examination, a candidate shall secure 50% marks in aggregate i.e. Practical /Clinical and Internal Assessment combined together i.e. 50/100 marks.
- c. In case of pre-clinical Prosthetic Dentistry and Pre-clinical Conservative Dentistry in II BDS, where there is no written examination, minimum for pass is 50% of marks in Practical and Viva voce combined together in University Examination including Internal Assessment i.e. 50/100 marks.
- d. Successful candidates who obtain 65% of the total marks or more shall be declared to have passed the examination in First Class. Other successful candidates will be placed in Second Class. A candidate who obtains 75% and above is eligible for Distinction. Only those candidates who pass the whole examination in the first attempt will be eligible for distinction or class.

XIV. Field Programme in Community Dentistry:

As a part of community dentistry program, students in the Clinical years will have to attend the various dental camps/ field programmes as part fulfillment of requirements of BDS examination to the satisfaction of the head of the Institution.

XV. Miscellaneous:

A. Migration/Transfer of Students

- a. A student studying in a recognized Dental College may be allowed to migrate/ transfer to another recognized Dental College under another/same University provided the candidate has passed I B.D.S. examination.
- b. The migration / transfer can be allowed by the University concerned within one month after the announcement of results of I B.D.S. examination. However, migration or transfer should be avoided in the middle of any year, and in no case before the completion of I BDS examination.
- c. The number of students migrating/ transferring from one Dental College to another Dental College during one year will be kept to the minimum but should not exceed the limit of 5% of its intake subject to a maximum of five students in any one Dental College in one year.
- d. Cases not covered under the above regulations may be referred to the Dental Council of India for consideration on individual merits.
- e. Intimation about the admissions of migrated transferred students into any dental college should be sent to the Dental Council of India immediately.

Note: In cases where a candidate who seeks admission to this university has already completed subject(s), exemption in the subject(s) will be given after admitting the student to the particular year.

B. Re-admission of candidates who discontinued the course:

A candidate who discontinues the course is eligible for re-admission subject to the following conditions:

- 1. Provision for re-admission is only once during the entire course.
- 2. He/she should seek readmission within three years from the date of discontinuation of the course
- 3. He/she should pay the prescribed fees for the year for which he/she seeks admission and cannot claim readmission on the strength of fees paid earlier.
- 4. If the candidate discontinues after University Examination, he/she should reappear for the subjects in which he/she failed before seeking admission to the next higher class by paying examination fee etc.
- 5. He/she should put in two terms of attendance in the class for which he/she seeks readmission before appearing for the University Examination.



B.D.S COURSE SYLLABUS

I BDS HUMAN ANATOMY INCLUDING EMBRYOLOGY, OSTEOLOGY & HISTOLOGY

Theory -100 Hrs.

I. Introduction: 10 hrs.

Scope, subdivisions, definitions and interpretation of anatomical terms, planes, anatomical positions, elements of anatomy including fascia muscles, blood vessels, nerves, joints and lymph vessels.

II. Osteology of Head & Neck: 20 hrs.

Skull - exterior - Norma and vault : Interior - Cranial fossae. Individual bones - mandible, maxilla, frontal, parietal, occipital, temporal, zygomatic, ethmoid, sphenoid, vomer, palatine, nasal bones.

Cervical vertebrae in general; C 1, C 2 & C 7 in particular Hyoid bone.

- III. Gross Anatomy of Head and Neck: 30 hrs.
 - a. Scalp layers, blood supply, nerve supply, lymphatic drainage.
 - b. Face Muscles, blood supply, nerve supply, lymphatic drainage, lacrimal apparatus.
 - c. Neck -
 - i. Cervical fascia
 - ii. Posterior triangle
 - iii. Anterior triangle submental, digastric, carotid & muscular
 - iv. Midline structures of neck
 - d. Cranial cavity meninges; dural folds and sinuses; Hypophysis cerebri.
 - e. Orbit nerves, vessels, extrinsic muscles of eyeball.
 - f. Parotid region parotid gland.
 - g. Temporal and infra-temporal fossae muscles of mastication, Maxillary artery, maxillary nerve
 - and mandibular nerve.
 - h. Temporo-mandibular joint.
 - i Submandibular region submandibular salivary gland.
 - j. Thyroid and parathyroid glands.
 - k. Vessels of head & neck Carotid, subclavian arteries, Internal jugular vein.
 - I. Mouth, tongue and palate.
 - m. Pharynx.

- n. Larynx.
- o. Cervical part of trachea and oesophagus.
- p. Nasal cavity and para nasal air sinuses.
- q. Lymphatic drainage of head & neck.
- r. Joints of neck atlanto occipital, atlanto-axial.

IV. Neuroanatomy: 12 hrs.

- a. Detailed description of cranial nerves V, VII, IX, X (in the region of head and neck) XI, XII including their nuclei of origin, intra and extra cranial courses.
- b. Cervical spinal nerves and cervical plexus.
- c. Autonomic nervous system of head and neck.

V. Embryology: 12 hrs.

- a. Gametogenesis spermatogenesis and oogenesis, fertilisation implantation, germ layer formation, fetal membranes and placenta.
- b. Development of branchial apparatus, pharyngeal arches, pouches and clefts.
- c. Development of face, jaws, oral cavity, tongue, palate, nasal cavity, paranasal air sinuses, salivary glands, thyroid gland, hypophysis cerebri, temporo-mandibular joint.

VI. Histology: 16 hrs.

- a. Introduction of cytology and histology.
- b. Basic tissues epithelial simple; compound
- c. Connective tissue cells, fibres collagen, elastic, reticular
- d. Cartilage hyaline, elastic, white fibro cartilages,
- e. Spongy and compact bones TS, LS
- f. Muscular tissue skeletal, cardiac and smooth,
- g. Nervous tissue peripheral nerve and ganglia.
- h. Blood vessels artery & vein.
- i. Glands serous, mucous, mixed salivary glands.
- j. Lymphoid tissue lymph node, palatine tonsil, thymus & Spleen.
- k. Skin hairy and non hairy
- I. Endocrine glands pituitary, thyroid, parathyroid, suprarenal & pancreas.
- m. Lip, tongue & oesophagus
- n. Trachea and lung.

PRACTICALS

70 Classes of (2 1/2 hrs. each) (175 hrs)

- The following topics are included for examination - MUST KNOW.

Dissection Topics:

- 1. Scalp
- 2. Face including deeper dissection
- 3. Posterior triangle of neck.
- 4. Anterior triangles of neck
 - a. median region
 - b. digastric
 - c. Carotid triangles.
- 5. Deep dissection of neck
 - a. Thyroid gland
 - b. Great vessels of neck.
- 6. Parotid region.
- 7. Infra temporal fossa
 - a. Muscles of mastication
 - b. Mandibular nerve and its branches
 - c. Maxillary artery
 - d. Temporo mandibular joint
- 8. Sub mandibular region gland, hyoglossus and its relations
- 9. Mouth, palate and pharynx.
- 10. Nasal cavity and paranasal air sinuses
- 11. Tongue
- 12. Larynx

Surface Anatomy: (to be included in practicals only)

MUST KNOW

Superior sagittal sinus; middle meningeal artery; pterion; facial artery; parotid gland and duct; facial nerve on face; common, external, internal carotid arteries; palatine tonsil; vocal cords; thyroid gland, Ext. Jng vein.

Radiological Anatomy: (Practicals only)

AP & Lateral views of head and neck. MUST KNOW Interpretation of normal radiological anatomy.

Histology Slides: - for Practical exam as Spotters & for Discussion.

- 1. Epithelium simple squamous (mesentry)
- 2. Epithelium simple Cuboidal (thyroid)
- 3. Epithelium simple Columnar (Gallbladder)
- 4. Epithelium simple Ciliated columnar
- 5. Epithelium Pseudo-stratified ciliated columnar (Trachea)
- 6. Epithelium Compound stratified squamous kertinised (skin)
- 7. Epithelium stratified squamous non keralinised- do -non-keratinised (oesophagus)
- 8. Compound transitional (urinary bladder)
- 9. Areolar tissue.

- 10. Collagen fibres.
- 11. Elastic fibres.
- 12. Tendon.
- 13. Cartilage hyaline
 - Elastic
 - White fibrous.
- 14. Bone T.S.
 - L.S.
- 15. Muscle Skeletal (LS/TS)
 - cardiac
 - smooth.
- 16. Blood vessels large sized artery
 - Medium sized artery
 - large vein
 - Medium vein
- 17. Peripheral nerve & ganglia
- 18. Serous salivary gland.
- 19. Mucous Salivary Gland.
- 20. Mixed Salivary Gland.
- 21. Lymph node.
- 22. Palatine tonsil.
- 23. Thymus
- 24. Spleen
- 25. Skin hairy
- 26. Skin non hairy
- 27. Lip
- 28. Tooth
- 29. Tongue
- 30. Trachea
- 31. Oesophagus
- 32. Lung
- 33. Thyroid & parathyroid
- 34. Pituitary
- 35. Suprarenal gland.
- 36. Pancreas.

Desirable to Know (to be Demonstrated)

- 1.Ear external, middle & internal.
- 2.Spinal cord;
- 3 Brain Stem
- 4.Cerebellum
- 5.Cerebral hemispheres important gyri & sulci of superolateral, medial and inferior surfaces; functional areas - sensory, motor, auditory, visual, gustatory speech & splanchnic areas; blood supply of brain;
- 6.Cranial nerves in general with functions other than V, VII, IX, XII.

- 7. Genetics definitions, chromosomes, chromosomal aberrations;
- 8. Anthropology

- Organs of thorax and abdomen.
 Organs of thorax and abdomen.
 Extremities upper & lower limbs
 Histology of
 Stomach fundus and pylorus;
 Small intestine duodenum, jejunum & ileum;
 Large intestine colon and appendix
- d. Liver and gall bladder

Scheme of Examination

A. Theory: 70 Marks

Distribution of Topics and Type of Questions:

Contents	Type of Questions and Marks	Marks
Gross Anatomy of Head and Neck - Scalp, Face, Triangles of Neck, Dural folds and Venous sinuses, contents of the Orbit excluding Eyeball, Parotid Gland, Infratemporal fossa, Temporo mandibular joint, Submandibular region, Thyroid gland, Pharynx, Tongue, Nasal Cavity and paranasal air sinuses. Cranial nerves - V, VII, IX and XII Development of Branchial arches poranecial pouches apparatus, Face Systemic Embryology and Systemic Histology.		20
Gross Anatomy of Head and Neck - Scalp, Face, Cervical fascia, Midline structures of the neck, Vertebral Joints of Neck, Contents of the Orbit excluding Eyeball, Vessels of Head and Neck, Infratemporal fossa, Mouth, Palate, Pharynx, Nasal Cavity, Cervical Part of Trachea and Oesophagus, Lymphatic drainage of Head and Neck Cranial nerves - V, VII, IX, XI and XII and Cervical Plexus General and Systemic embryology and Histology, Osteology of Head and Neck	Short Essays 08 x 5 marks + Short Answers 05 x 2 marks	40
	Total	70

B. Viva Voce : 20 Marks

a. Osteology of Head and Neck
b. Soft part from Head and Neck
c. Embryology Models
d. Radiological Anatomy
O5 marks
O5 marks
O5 marks

C. Internal Assessment - Theory: 10 Marks, Practical: 10 Marks

D. Practicals : 90 Marks

Gross Anatomy

Histology

a. Identification of 10 Slides of 02 mark each b. Discussion on TWO given slides (One General and one Systemic) $02 \times 10 = 20 \text{ marks}$ $10 \times 2 = 20 \text{ marks}$

Text Books Recommended:

al .	ett		12		
Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
Cunningham's Manual of practical Anatomy (Vol-I)	G.J. Romanes	15th	1998	ELBS Oxford	£ 3.95
Cunningham's manual of practical Anatomy (Vol-3)	G.J. Romanes	15th	1998	ELBS Oxford	£ 3.95
Essentials of Human Anatomy (Head & Neck)	A.K. Dutta		1999	Current Books International	Rs. 200/-
Human Embryology	Inderbir Singh	6th	1996	Mc Milan India Ltd. Delhi	Rs. 242/-
Langman's Medical Embryology	Langman	5th	Nov 1994	William & Wilkins Pub. Baltimore, USA	Rs. 899/-
Text Book of Human Histology	Inderbir Singh	3rd	1997	J.P Brothers Medical. Publishers Delhi	Rs. 200/-

Reference Books

Gray's Anatomy Peter L. Williams		39th	1995	ELBS	£ 40.00
Last's Anatomy Regional and Applied RMH		10th	1999	Churchill Livingston, Edinburgh	£ 35.00
Grant's Method Anatomy	John V. Basmajian	11th (Ind)	1997	D.I. Publishers	Rs. 725/-
Lee. Mc Gregor's Synopsis of Surgical Anatomy	G.A.G. Decker	12th		K.M. Varghese Bombay	Rs. 350/-

General Human Physiology

Theory: 120 Hrs

	MUST KNOW		
l.	General Physiology:	4	
1.	Cell- Morphology - Functions of organelles: Cell membrane, nucleus, mitochondria. ribosomes. Lvsosomes.		
2.	Muscle nerve physiology: Neurons: Morphology, classification Nerve Fibres classification, resting membrane potential, action potential, properties, conduction of impulses in myelinated & nonmyelinated fibres.	8	
3.	Neuroglia: Types & functions. Muscles: Types, structure of skeletal & smooth muscles, Sarcomere, mechanism of contraction, strength-duration curves, utilization time, rheobase & chronaxie.		
4.	Blood : Composition, properties, functions. RBC; Morphology, functions, count, physiological variations and life span Ervthropoiesis - stages. essential factors. regulation.	15	
5.	Haemoglobin: Function, concentration, physiological variations Fate of Hb - Jaundice tynes Determination of color index, MCH, MCV, MCHC, PCV - normal values M = Mean, C = Corpuscular, H = Haemoglobin concentration.		
6.	WBCs Morphology, functions of all types including T & B lymphocytes, total and differential counts, physiological variations, leukocytosis & Leukopenia.		
7.	Platelets:Morphology, count, functions, thrombocytopenia & bleeding time.		

	Plasma proteins: Concentrations and functions. Blood groups " Basis of blood grouping, Landsteiner's laws, ABO system, determination of blood groups, blood transfusion, complications of incompatible blood transfusion, RH group, erythroblastosis foetalis, prevention and treatment.	
8.	Haemostasis: mechanisms. Clotting mechanism: factors, intrinsic and extrinsic pathways, Disorders of clotting - haemophilia, vitamin K deficiency. Anti-clotting mechanisms: Antithrombin III, heparin, thrombomodulin & plasminogen, anticoagulants.	
9.	Anaemias: nutritional, aplastic, megaloblastic, iron deficiency. Effects of anaemia.	
10.	Blood volume : Normal values, determination, regulation.	
11.	Lymph : formation, circulation, composition, functions.	
II.	Gastrointestinal System:	10
1.	Salivary secretion : composition, functions, regulation (Deglutition - DESIRABLE TO KNOW).	
2.	Stomach : functions. Gastric juice : composition, functions, regulation, gastrin, gastric emptying time.	
3.	Pancreas : composition, function, regulation of pancreatic juice secretion. Secretion, cholecystokinin - pacreozymin.	
4.	Liver : functions. Bile : composition, functions, Gall bladder: functions, regulation of emptying	
5.	Succus entericus : composition, function, regulation of secretion.	
6.	Movements of small and large intestines. Defaecation.	
III.	Respiratory System :	12
1.	Physiological anatomy of the lungs.	
2.	Definitions of terms used in respiratory physiology : Eupnoea, Hyperpnoea, tachypnoea, apnoea, dyspnoea.	
3.	Mechanics of breathing - intrapulmonary and intrapleural pressure changes during a respiratory cycle.	
4.	Spirometry-lung volumes and capacities. Vital capacity, times vital capacity, maximal voluntary ventilation.	
5.	Dead space : types, measurement of anatomical dead space. Pulmonary & alveolar ventilation.	
6.	Surfactant : production, functions, respiratory distress syndrome. (Ventilation perfusion ration: DESIRABLE TO KNOW)	
7.	Oxygen transport : Oxy Hb dissociation curves, factors affecting it.	
8.	Carbon dioxide transport : forms. chloride shift (Hamburgers phenomenon)	

9.	Regulation of respiration : Neural regulation : centers - Dorsal Group of Respiratory Neurons (DRG), Ventral group of respiratory neurons (VRG), Nuclear Para Brachialis medialis (NPBL), Hering-breuer reflex.	
10.	Chemical regulation : peripheral and central chemoreceptors, ventilatory responses to oxygen lack, carbon-di-oxide and H - ions, effect of voluntary hyper ventilation.	
11.	Hypoxia: Types and effects, acclimatization to high attitudes. Cyanosis, asphyxia, Artificial respiration.	
IV.	Cardiovascular System:	
1.	Plan of CVS Greater and Lesser Circulation. Physiological anatomy of the heart, nerve supply. Origin and spread of cardiac impulse. Structure and properties of cardiac muscle. Cardiac cycle: Intraventricular pressure and volume curves Heart sounds, causes, characteristics and significance Normal ECG, leads causes of waves, P-R interval	15
2.	Cardiac output : Definitions, normal values, physiological variations, determination, (Principles underlying the methods only), regulation.	
3.	Arterial blood pressure: Definitions, normal values, physiological variations, factors maintaining blood pressure, Regulation - Vasomotor control, role of afferents to Vasomotorceutee (VMC)-barp receptors, Bainbridge reflex, chemoreceptros, hypertension. Heart rate-physiological variations, sinus arrhythmia, Marey law, Bainbridge reflex, chemo receptors, radial pulse.	
4.	Hypovolaemic (Haemorrhagic) shock, physiological basis of signs and symptoms	
5.	Coronary circulation.	
٧.	Renal System:	
1.	Functions of kidneys. Nephrons - cortical & juxtamedullary. Juxta glomerular apparatus - functions.	8
2.	Mechanism of urine formation : ultra filtration, GFR - Factors affecting, selective reabsorption- sodium, urea, water, glucose.	
3.	Tubular secretion	
4.	Water excretion, mechanism of urine concentration. Concept of clearance-insulin, PAH & urea clearances. Micturition, Innervation of bladder, cystometrogram, diuriesis.	
VI.	Endocrinology:	
1.	Major endocrine glands. Hormone: definition, properties, mechanisms of action. Anterior pituitary: Hormones and their functions, regulation of each hormone, disorders - Gigantism, acromegaly, dwarfism.	14
9		

2.	Posterior pitrtary : hormones - site of synthesis, regulation, diabetes insipidus.	
3.	Thyroid: synthesis of hormones, actions and functions, regulation, disorders: simple goitre, myxoedema, cretinism, Graves disease.	
4.	Adrenal cartex: classification of hormones, actions, functions, regulation of secretion of cortisol and aldosterone.	
5.	Adrenal medulla: actions of adrenaline and noradrenaline, regulation of secretion.	
6.	Endocrine pancreas : hormones, actions, functions, regulation of secretion. Regulation of blood glucose level, diabetes mellitus.	
7.	Parathyroids: hormones, actions of hormones, regulation of secretion. Hypo- & hyper parathyroid conditions, tetany - signs. Calcitonin - source, actions.	
8.	Regulation of blood calcium level - Calcitriol.	
VII.	Reproductive Physiology:	06
1.	Male reproductive system : functions of testes, puberty, spermatogenesis, actions of testosterone, regulation of secretion, of semen.	
2.	Female reproductive system: Structure of ovary & Uterus, hormones, actions, regulation. Menstrual cycle, Hormonal basis of changes in menstrual cycle physiological changes during pregnancy. Action of oestrogen and progesterone, Functions of placenta, Lactation, milk ejection reflex.	
3.	Family Planning Methods : In the males : Coitus interruptus, condoms, vasectomy.	
4.	In females: Rhythm method, Intra Uterine Contraceptive Devise (IUCD), oral contraceptives, tubectomy.	
VIII.	Nervous System:	10
1.	Synapse: Types, properties Sensory receptors: definition, classification, properties. Reflex action: Definition reflex arc, classification, general properties. Pathways for fine touch, pressure, proprioception, crude touch, thermal and pain sensations, referred pain.	
2.	Spino-cerebellar tracts: pathway and function. Pyramidal tracts: origin, course, termination and functions. Sings of upper & lower motor neurone lesions. Functions of Cerebellum, Basal ganglia, Thalamus, Hypothalamus. Signs of Cerebellar disorders & Parkinson's disease. (Reticular formation, EEG, Sleep (NREM, REM)) Functions of Limbic system, Higher function of Brain - Memory, Learning & Motivation. (DESIRABLE TO KNOW)	
3.	Cerebral cortex : lobes & functions.	
4.	Autonomic nervous system : Organization & functions.	
5.	Cerebrospinal fluid : formation, circulation, composition and function, Lumbar puncture.	
	11 11	

6.	Regulation of body temperature.	
IX.	Special Senses:	18
1.	Vision : physiological anatomy of eye ball, functions of iris, aqueous humor, lens, rods & cones. Accommodation to near vision.	
2.	Refreactive errors : Myopia, hypermetropia, presbyopia & astigmatism. Visual acuity, pupillary reflexes.	
3.	Visual pathways.	
4.	Audition: Anatomic consideration, functions of outer, middle & inner ear, cochlea, organ of corti, mechanism of hearing.	
5.	Auditory pathways, deafness - types & tests	
6.	Taste : taste buds, primary taste sensation, pathway for taste sensation	
7.	Smell : receptors, olfactory pathways.	

Practicals: 60 Hours

SI. No.	To be done by Students :	Hours
1.	Study of Microscope and its uses	02
2.	Collection of blood and study of haemocytometer	02
3.	Haemoglobinometry	02
4.	Determination of RBC count	08
5.	Determination of WBC count	04
6.	Determination of blood groups	02
7.	Leishman's staining and differential leucocyte count	10
8.	Calculation of blood indices	02
9.	Determination of bleeding time	01
10.	Determination of clotting time	01
11.	Blood pressure recording	04
12.	Auscultation of Heart sounds	04

Demonstrations (only)

SI. No.	To be done by Students :	Hours
1.	Determination of Erythrocyte Sedimentation rate (ESR)	02
2.	Determination of packed cell volume (PCV)	02
3.	Determination of specific gravity of blood	02
4.	Fragility test for RBC	02
5.	Clinical examination of chest	02
6.	Determination of vital capacity	02
7.	Artificial respiration	02
8.	Demonstration of deep and superficial reflexes	02
9.	Activity of frog's heart and effects of Acetyl Choline, Atropine and Adrenaline.	02
	Total	60

DESIRABLE TO KNOW

Transport mechanisms

Neuromuscular junction, excitation contraction coupling, Myasthenia gravis, Rigor Mortis

Body fluid compartments Principles of measurement, normal values

Blood:

Development of WBC's & platelets Electrophoresis, Plasma pheresis Blood bank.

Respiratory system:
Compliance of the lungs
P 50 value, Co-efficient of oxygen utilization
Dysbarism, Dyspnoea - Dyspnoeic index
Non-respiratory function of respiratory system.

Cardio vascular system:

Cardiovascular changes in muscular exercise.

Renal system:

TmG, rental threshold for glucose, tubular load for glucose.

Counter current mechanism

Endocrinology:

Synthesis of thyroid hormone.
Disorders - Addison's disease, Cushings syndrome, Conn's Syndrome,
Adrenogenital syndrome, Pheochromocytoma
Methods of study of endocrine glands.
Central nervous system.

Reflexes - Flexion reflex, stretch reflex, reverse stretch reflex.

Connections of cerebellum, basal ganglia, Thalamus & hypothalamus

Functions of Vestibular apparatus - Reticular formation EEG - sleep, Wakefulness.

Methods of study of functions of nervous system special senses, Effects of lesions of visual pathways.

Field of vision, colour vision, colour blindness.

Structure of thyroid, pituitary, pancreas, parathyroid, Adrenal cortex and medulla.

Gastrointestinal function: Deglutition.

Respiratory System: Ventilation perfusion ration.

Nervous system: Reticular formation, EEG, Sleep (NREM, REM), functions of Limbic system, Higher functions of brain - Memory, Learning & Motivation.

Scheme of Examination

A. Theory: 35 Marks

Distribution of Topics and Types of Questions

Contents	Type of Questions and Marks	Marks
Long Essay Questions preferably from 1. Blood 2. Gastro intestinal tract 3. Cardio Vascular System 4. Respiratory System 5. Endocrines 6. Reproductive System	Long Essays 01 x 10 marks	10
Short Essay Questions should be set from all the chapters. (Except the chapter on which a Long Essay Question has been set)	Short Essay 03 X 5 marks	15
Short Answer Questions should be set from all the chapters. (Except the chapter on which a Long Essay Question has been set)	Short Answers 05 x 2 marks	10
	Total	35 marks

B. Viva Voce : 10 Marks
C. Internal Assessment - Theory : 05 marks, Practicals : 05 marks
D. Practicals : 45 Marks

Major Experiments - 30 Marks Any one of the Major Experiments

- 1. R.B.C. Count
- 2. W.B.C. Count
- 3. Differential Count
- 4. Blood Pressure Recording

Minor Experiments - 15 Marks Any one of the minor Experiments

- 1. Determination of Blood Groups
- 2. Determination of Bleeding & Clotting time
- 3. Haemoglobin Estimation
- 4. Calculation of absolute Haematological Indices MCH , MCV, MCHC

Text Books Recommended:

Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
Text book of Medical Physiology.	Guyton Arthur	09th	1999	Prism & Sounder's Bangalore	Rs.515/-
Concise medical physiology	Chaudhuri Sujit. K	2nd	1998	Central Book Agency Calcutta	Rs.495/-
Human Physiology Vol - I	Chatterjee C. C.	11th	1998	Medical Allied Agency Calcutta	Rs.130/-
Human Physiology Vol - II	Chatterjee C. C.	10th	1998	Medical Allied Agency Calcutta	Rs.120/-

Reference Books:

Review of Medical Physiology	Ganong William. F	18th	1989	Appleton & Lang USA	\$18.00
Physiological basis of Medical practice	Best & Taylor	10th	1999	Willian & Wilkins Hongkong London	\$40.00

Biochemistry, Nutrition and Dietics Theory: 70 hours

SI.No	Must Know	Desirable to Know
1.		Introduction to biochemistry and its scope in dentistry. (1 hrs)
2.	Carbohydrates: (4 Hrs.) 1. Definition 2. Classification 3. Isomerism of Sugars 4. Physiologically important mono, di and polysaccharides 5. Glycogen, starch, cellulose 6. Mucopolysaccharides - hyaluronic acid, chondroitin sulphate, heparin	
3.	Amino Acids (6 Hrs.) 1. Classification based on structure and nutritional importance 2. Optical activity 3. Isoelectric pH 4. Physiologically active peptides Proteins- 5. Definition 6. Functions 7. Classification 8. Structure 9. Denaturation 10. Plasma Proteins and their separation by electrophoresis 11. Immunoglobulins 12. Haemoglobin and its abnormal forms	Special features and organisation of Proteins, collagen, structure and composition, muscle proteinactin and myosin
4.	Lipids: (4 Hrs.) 1. Definition 2. Classification 3. Functions 4. Fatty Acids 5. Neutral Fats 6. Phospholipids 7. Cholesterol 8. Lipoproteins	
5.	Nucleic Acids: (3 hrs) 1. Composition 2. Structure & Types of Deoxy ribonucleic acid (DNA) & Ribonucleic acid (RNA) 3. Nucleosides and Nucleotides and their importance	

SI.No	Must Know	Desirable to Know
6.	Vitamins: (8 Hrs.) 1. Definition 2. Classification, Chemistry, Sources, Requirement, Function, Metabolic role and Deficiency signs of vitamins: A, D, E, K, C,. Thiamin, Riboflavin, Niacin, Pyridoxine, Folic Acid, Cyanocobalamine.	Genetic Code
7.	Enzymes: (6 Hrs.) 1. Definition 2. Classification 3. Chemical nature 4. Enzyme specificity, mechanism of action 5. Properties of enzymes 6. Coenzymes and cofactors 7. Holoenzyme 8. Proenzyme 9. Isoenzyme 10. Factors influencing enzyme activity 11. Enzyme inhibition-types and examples	Diagnostic enzymes
8.	Carbohydrate Metabolism (8 Hrs.) 1. Digestion and absorption of carbohydrates 2. Glycolysis 3. Cori's cycle 4. Citric acid cycle 5. Energetics of glucose oxidation 6. Glycogenolysis 7. Glycogenesis 8. Hexose monophosphate shunt 9. Regulation of blood glucose	Fermentation, biochemical changes during muscular contraction, electron transport chain, oxidative phoaphorylation, respiratory poisons, oxygen toxicity, gluconeogenesis, glycogen storage disorders.
9.	Lipid Metabolism (6 Hrs.) 1. Digestion and absorption of lipid 2. Beta oxidation of fatty acids and its energetics 3. Ketone body formation 4. Utilization 5. Ketoacidosis	Synthesis of palmitic acid and triglycerides, fatty liver, and lipotropic action, metabolism during starvation
10.	Protein Metabolism (8 Hrs.) 1. Digestion and absorption of Amino acids 2. Synthesis of Proteins 3. Deamination of Amino acids 4. Transamination 5. Decarboxylation	Glycine metabolism Synthesis of important products like creatine, noradrenaline, adrenaline, thyroxin, serotonine, heme from amino acids

SI.No	Must Know	Desirable to Know
	6. Production and fate of ammonia 7. Urea cycle pathway 8. Methionine metabolism 9. Phenylalanine metabolism 10. Phenylketonuria, albinism, Alkaptouria	
11.	Nutrition and Dietics (5 Hrs.) 1. Dietary factors 2. Basal metabolic rate 3. Biological value of protein 4. Glucose sparing action 5. Essential amino acids 6. Dietary fibre 7. Essential fatty acids 8. Balanced diet	Principles of calorimetry, Respiratory quotient, Specific Dynamic Action of foods,protein- calorie malnutrition (kwashiorkor and marasmus),nitrogen balance, milk-composition and functions, determination of Basal Metabolic Rate (BMR)
12.	Mineral metabolism (5 Hrs.) Distribution, sources, functions, requirements, absorption, metabolism, effect of deficiencies of 1. Calcium and phosphorus 2. Iron 3. Iodine 4. Fluorine	
13.	Liver Function Tests: (3 hrs) 1. Liver function tests 2. Importance of alkaline phosphatase 3. Galacose tolerance test	Van den Bergh reaction Albumin / Globulin Ratio Bromsulphathalein Excretion test Serum Glutamate Pyruvate Transaminase (SGPT) and other enzymes
14.	pH and its biological importance (2 Hrs.) 1. Acids and bases 2. Buffers 3. Acid base balance 4. Acidosis and alkalosis	Henderson-Hasselbatch equation, role of the kidney in acid base balance.
15.	Renal Function Test (1 Hr.) 1. Urea clearance test 2. Creatinine Clearance	
16.	Blood Constituents (1Hr.) Normal and abnormal variations of 1. Calcium and phosphorous 2. Creatinine 3. Alkaline and acid phosphatase	Normal and abnormal variations of Urea, cholesterol, bilirubin, uric acid, transaminases.

Practicals: 60 hrs

- 1. Reactions of monosaccharides glucose & fructose
- 2. Reactions of disaccharides lactose, maltose and sucrose.
- 3. Preparation of osazones from glucose, fructose, lactose & maltose
- 4. Reactions of polysaccharides starch
- 5. Identification of unknown carbohydrate
- 6. Colour reactions of proteins albumin.
- 7. Colour reactions of proteins gelatin & peptone.
- 8. Colour reactions of proteins casein.
- 9. Precipitation reactions of albumin
- 10. Precipitation reactions of gelatin and peptone
- 11. Precipitation reactions of casein
- 12. Identification of unknown protein
- 13. Reactions of urea, uric acid and creatinine
- 14. Identification of physiologically important constituents.
- 15. Composition of saliva and starch digestion by salivary amylase.
- 16. Qualitative analysis of gastric juice normal and abnormal contents
- 17. Urine analysis normal constituents.
- 18. Urine analysis abnormal or pathological constituents.
- 19. Determination of titrable acidity and ammonia content in urine.
- 20. Determination of creatinine content in urine, calculation of creatinine clearance.
- 21. Estimation of Blood glucose.

Demonstration Sessions: (Desirable to know)

- 1. Colorimeter
- 2. Electrophoresis & Chromatography
- 3. Estimation of Serum calcium and phosphorus
- 4. Estimation of Bilirubin
- 5. Estimation of Urea in blood
- 6. Estimation of total protein in blood serum
- 7. Preparation of haemin crystals
- 8. Discussion of clinical charts Glucose Tolerance Test (GTT)
- 9. Spotting of specimens -

Haemin, Osazone - Microscopy, Ryle's tube, Folin -wu tube, Urinometer, Tests - Biuret reaction, Millon's reaction, Jaffe's reaction, Barfoed's reaction.

Scheme of Examination

A. Theory: 35 Marks

Distribution of Topics and Types of Questions

Contents	Type of Questions and Marks	Marks
Chemistry of Carbohydrates, proteins, lipids and amino acids. Fat soluble and water soluble vitamins. Enzymes. Metabolism of carbohydrates, proteins, lipids and minerals.	Long Essays 01 x 10 marks	10
Chemistry and metabolism of: carbohydrates, lipids, proteins, nucleic acids, minerals. Fats soluble and water soluble vitamins, Nutrition and dietetics, Liver function tests, pH and its biological importance, Renal function tests, Blood constituents, Biological oxidation.	Short Essay 03 X 5 marks	15
Chemistry and metabolism of: carbohydrates, lipids, proteins, nucleic acids, minerals. Fats soluble and water soluble vitamins, Nutrition and dietetics, Liver function tests, pH and its biological importance, Renal function tests, Blood constituents.	Short Answers 05 x 2 marks These questions may be selected from both 'must know' and 'desirable to know category	10
	Total	35 marks

Preferably, 75% of questions can come from the 'must know' category which helps the candidate to pass, remaining may come from 'desirable to know' category, which places him/her in the merit category.

B. Viva - Voce: 10 Marks

C. Internal Assessment - Theory: 05 Marks, Practicals: 05 Marks

Internal Assessment (for theory):

75% - Questions from MUST KNOW Category

25% - Questions from DESIRABLE TO KNOW Category

D. Practicals: 45 Marks

The following are suggested:

Quantitative Estimation (Any ONE estimation to be done)

- 1. Estimation of Blood Glucose using Folin-wu method, using deproteinized blood.
- 2. Determination of Creatinine in Urine using Jaffes's method
- 3. Determination of Titrable acidity and Ammonia content of Urine using Malfatti's Method

Qualitative Analysis (Any ONE analysis to be done)

- 1. Identification of Carbohydrates glucose, fructose, sucrose, lactose, maltose, starch.
- 2. Colour Reactions albumin
- 3. Precipitation Reactions albumin
- 4. Identification of Proteins albumin, gelatin, casein, peptone
- 5. Urine Analysis normal constituents
- 6. Urine Analysis pathological constituents

Chart Interpretation (Interpretation of ONE Clinical chart)

- 1. Glucose Tolerance Test
- 2. Values of Blood Constituents and their clinical variation: urea, cholesterol, calcium, phosphorus, bilirubin.

Recommended Books:

Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
A Text book of Biochemistry for Dental Students	Harbans lal	1st	1995	CBS Pub. New Delhi	Rs. 130/-
Concise Clinical Medical Biochemistry	Pattabhi raman		1986	Prithvi Pub Bangalore	Rs. 85/-
Fundamentals of Biochemistry	A. C. Deb	6th	1998	New Central Book Agency Calcutta	Rs. 395/-
Text Book of Biochemistry	AVS Rama Rao	7th	1995	UBSPD with LKS pub. Vishakapatnam	Rs. 135/-
Textbook of Medical Biochemistry	S. Rama krishnan K.G.Prasa nnan R. Rajan	3rd	2001	Orient Longman Hyderabad	Rs. 410/-

Reference Books

Review of Biochemistry	Harpers	24th	1996	USA Appleton and Lange Pub.	US \$ 19.50
Basic and Applied Dental Biochemistry	William R.D & Elliot J.C.	2nd	1990	Singapore Langman Pub.	US \$ 19.50
Principles of Biochemistry	Albert Lehninger	2nd	1993	New Delhi CBS pub.	Rs. 695/-

I BDS Human Oral and Dental Anatomy, Embryology, Physiology and Histology

Theory - 105 Hrs.

Introduction, Dental Anthropology & Comparative Dental Anatomy	
2. Function of teeth.	SI.No. 1 To 4 - 3
3. Nomenclature.	HRS.
Tooth numbering systems (Different system) (Dental formula).	
Chronology of deciduous and permanent teeth.(First evidence of calcification, crown completion, eruption and root completion).	2 Hrs
6. Deciduous teeth - a. Nomenclature. b. Importance of deciduous teeth. c. Form & function, comparative dental, Anatomy, fundamental curvature.	4 Hrs.
7. Gross morphology of deciduous teeth.	5 Hrs.
8. General differences between deciduous and permanent teeth.	
9. Morphology of permanent teeth Chronology, measurements, description of individual surface and variations of each tooth.	3 Hrs.
10. Morphological differences between incisors, premolars and molars of same arch.	10 Hrs.
11. Morphological differences between maxillary and mandibular. incisors, canines, premolars and molars of the opposite arch.	5 Hrs.
12. Internal Anatomy of Pulp.	1 Hr.
 13. Occlusion: a. Development of occlusion. b. Dental arch form. c. Compensating curves of dental arches. d. Angulations of individual teeth in relation to various planes. e. Functional form of the teeth at their incisal and occlusal thirds. f. Facial relations of each tooth in one arch to its antagonist or antagonists in the opposing arch in centric occlusion. g. Occlusal contact and interscusp relations of all the teeth of one arch with those in the opposing arch in centric occlusion. h. Occlusal contact and intercusp relations of all the teeth during the various functional mandibular movements. 	8 Hrs.

T. T.	
i. Neurobehavioural aspect of occlusion. Tempero Mandibular Joint (T.M.J.): Gross Anatomy and articulation. Muscles (Muscles of mastication). Mandibular position and movements. Histology. Clinical considerations with special emphasis on Myofacial Pain Dysfunction Syndrome (MPDS) - (Desirable to Know)	
ORAL PHYSIOLOGY:	
1. Theories of calcification.	01 hr.
2. Mastication and deglutition.	01 hr.
Oral Embryology, Anatomy and Histology:	
Development and growth of face and jaws.	1 hr.
2. Development of tooth.	6 hrs.
3. Cranial nerves with more emphasis on V.VII and IX.	1 hr.
Blood supply, nerve supply and lymphatic drainage of teeth and surrounding structures.	1 hr.
5. Cell - structure and function.	1 hr.
Maxillary sinus - Structure, Variations, Histology function and clinical considerations.	3 hrs.
7. Salivary Glands - Classification, structure, function, Histology, Clinical Considerations and age changes.	4 hrs.
8. Oral Mucous membrane: - Definitions, General consideration. - Functions and classifications. - Structure and microscopic appearance of gingiva, palate, lips, alveolar mucosa, tongue, floor of mouth. - Gingival sulcus and dento gingival junction. - Clinical considerations and age changes.	8 hrs.
ENAMEL: - Physical characteristics, chemical properties structure Development - Life cycle of ameloblasts Amelogenesis and Mineralisation Clinical considerations Age changes.	8 hrs.
DENTIN: - Physical characteristics, chemical properties, structure Types of dentin Dentin innervation and hypersensitivity Development - Dentinogenesis and mineralisation Clinical considerations Age Changes.	6 hrs.

PULP: Anatomy, structural features, functions, pulp organs Developments Clinical consideration - Age changes.	5 hrs.
CEMENIUM: - Physical characteristics, chemical properties, structure Cementogenesis Clinical consideration - Age changes.	5 hrs.
PERIODONTAL LIGAMENT: - Cells and fibers - Functions - Development - Clinical Considerations Age Changes	5 hrs.
ALVEOLAR BONE: - Physical characteristics, chemical properties structure Structure - Development Internal reconstruction Clinical consideration.	5 hrs.
HISTOCHEMISTRY OF ORAL TISSUES. (Tissue processing) THEORIES OF ERUPTION AND SHEDDING. (Physiological tooth movement)	4 Hrs. 4 Hrs.

PRACTICAL: 250 Hours

Preparation of Ground sections, haematoxylin & Eosin sections & decalcified section - (Desirable to know).

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DENTAL ANATOMY: Carving on wax blocks:- a. Cube, rectangle, cone and cylinder b. Individual tooth - Only permanent teeth of both arches Central, Incisors, Lateral, Canines, Premolars and 1st molar.	
HISTOLOGY: List of Histology slides: Development of tooth: 1. Bud stage of tooth development. 2. Cap stage of tooth development. 3. Early bell stage of tooth development. 4. Late Bell stage of tooth development. 5. Root formation.	
ENAMEL: 1. Enamel rod. 2. Hunter-Schreger Bands 3. Tufts, Lamellae, Spindles. 4. Incremental lines of Retzius. 5. Neonatal line. 6. Gnarled Enamel.	
DENTIN: 1. Dentino - Enamel junction. 2. Dentinal Tubules. 3. Incremental lines of Von Ebner. 4. Contour lines of owen. 5. Neonatal line. 6. Tomes granular layer. 7. Interglobular Dentin. 8. Secondary Dentin. 9. Intratubular Dentin. 10. Intertubular Dentin. 11. Dead Tracts 12. Tertiary Dentin 13. Sclerotic Dentin	
CEMENTUM: 1. Cellular cementum. 2. Acellular cementum.	

3. Cemento enamel junction - Type 1 - 60% type - Overlapping Type 2 - 30% type - Butt - Type 3 - 10% type - GAP type 4. Sharpey's fibers. 5. Hypercemntosis. 6. Cementum	
PULP: 1. Zones of Pulp. 2. Pulp stones.	
PERIODONTAL PRINCIPAL LIGAMENT: 1. Principal fibers of Periodontal ligament - Apical, Horizontal, Oblique, Aveolar crest, Interradicular, Transeptal	
ALVEOLAR BONE: 1. Haversian system. 2. Trabeculated bone. 3. Mature and immature bone.	
SALIVARY GLANDS: 1. Mucous gland. 2. Serous gland. 3. Mixed gland.	
MAXICILLARY SINUS: Sinus lining (Pseudostratified ciliated columnar) (Desirable to know)	
ORAL MUCOUS MEMBRANE: 1. Parakeratinised epithelium. 2. Orthokeratinised epithelium. 3. Palate - Anterolateral zone. 4. Palate - Posterolateral zone. 5. Alveolar mucosa. 6. Vermilion border of lip. 7. Tongue - Circumvallate Papillae Fungiform Papillae - Filiform Papillae 8. Dentogingival junction. 9. Skin	
Tempero Mandibular Joint (T.M.J.): 1. Histological section (Desirable to know).	

LECTURE DEMONSTRATION:

- 1. Identification of Individual teeth.
 - Deciduous.
 - Permanent.
- 2. Mixed dentition using study models.
- 3. Cross Section & T.S. of mandible and maxilla with teeth present using study models.

 Demonstration of preparation of ground section, Decalcification, Paraffin section & H & E Staining.

Scheme of Examination

A. Theory: 70 Marks

Distribution of Topics and Type of Questions

Contents	Type of Questions and Marks	Marks
A. Dental anatomy - one question - 10 marks B. Dental histology - one question - 10 marks	Long Essays 2 x 10 marks	20
A. Oral histology - five questions - 25 marks B. Dental anatomy - two questions - 10 marks C. Oral physiology - one question - 05 marks	Short Essays 08 x 5 marks	40
A. Oral histology - two questions - 04 marks B. Dental anatomy - one question - 02 marks C. Oral physiology - one question - 02 marks D. Oral embryology - one question - 02 marks	Short Answers 05 x 2marks	10
2	Total	70

B. Viva Voce : 20 Marks

C. Internal Assessment - Theory: 10 marks, Practicals: 10 marks

D. Practicals : 90 Marks

1. Carving 30 marks 1 hour 15 min 2. Spotters 60 marks (20 spotter x 3 marks) 1 hour 15 min

- 13 histology and ground section slides
- 4 tooth identification
- 3 casts for identifications of teeth, numbering system and age assessment.

Text Books Recommended:

Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
Orban's Oral Histology and Embryology	Orban's	10th	1990	American Publication Ontoria, Canada	Rs. 350/-
Oral Histology - Development, Structure and Functions	A. R. Tencate	5th	1998	Mosby A Harcourt Health Science Company USA	\$ 25.00
Dental Anatomy, P hysiology and Occlusion	Wheeler's	7th	1993	Prism Book Pvt. Ltd. Bangalore	Rs. 300/-

REFERENCE BOOK:

- Dental anatomy by Scoot & Simon.
 Oral Physiology by Lavelle.
 Oral Physiology by Jenkins.
 Dental Anatomy by Krauss.
 Dental Anatomy It's relevance to dentistry 5th edition by Woelfel
 Illustrated Dental Embryology, Histology and Anatomy- 2nd editon By Bath- Balogh

I BDS DENTAL MATERIALS

SI. No.	Theory - 20 Hrs. Practical - 40 Hrs.	Total 60 Hrs.
1.	Introduction: a. Brief History of the development of the science of Dental Materials b. Aim of studying the subject of Dental Materials. c. Scope and requirements of Dental materials d. Spectrum of materials - Classification Clinical and laboratory applications	01
2.	Structure and behaviour of matter: a.Basic principles - Physical and mechanical properties, Chemical properties, biological properties, rheological properties, thermal properties, light, colour and esthetics. Tarnish and corrosion, surface properties and adhesion, biocompatibility allergy, toxicity, setting reactions. b. Enamel and Dentine and bone. c. Polymers d. Metals and alloys e. Ceramics f. Composites g. Standardisation and assessment of dental materials.	02
3.	Impression materials and duplicating materials: a. Requirements, classification. b. Desirable properties, composition, setting properties, advantages, disadvantages, indications and manipulation of inelastic and elastic materials. (Tray compound, impression compound, Low fusing compound, Impression plaster, Zinc oxide Eugenol impression paste, Non Eugenol paste, Alginate, Agar Elastomeric impression materials) Comparative studies between all.	03
4.	Gypsum products (Detail), die, cast and model materials (including brief account of electroformed dies):	02
5.	Waxes and baseplate materials - Contents, properties, manipulation and uses (Modeling wax, casting wax, boxing wax, utility wax, Sticky wax, impression wax, carding wax, preformed wax patterns	02
6.	Denture base resins a. Tray materials. b. Temporary base materials - contents, properties, manipulation, advantages and disadvantages.	02

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	c. Permanent base resins - types, composition, properties and technical consideration (Flasking, packing, curing, deflasking and processing errors) d. Others - Tissue conditioners, soft liners and hard liners.	
7.	Tooth restorative materials - Classification and ideal properties: a. Dental cements - classification ideal requirements of liners, base and luting cements. Composition, properties, chemistry of setting, manipulation and uses of silicate and silico phosphate cements (in brief), zinc phosphate, zinc polycarbxylate, calcium hydroxide, glass ionomer, modified glass ianomer and resin cement. Comparative studies of mechanical, biological and esthetic properties of all cements.	10
8.	Metals and Alloys - Solidification and microstructure of metals, classification of alloys, relevant physical and mechanical properties, annealing, heat treatment, soldering, welding, fluxes and ant fluxes.	03

Practical Exercises : 40 Hours

Il Exercises to be done by each student :

a. Impression material 20 hours Manipulation and making impression and identifying setting time and defects. (Comparative studies included)

b. Gypsum products

- 20 nours

20 hours

Recommended Text Books

Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
Science of Dental Materials	Kennet. J. Anusavice	11th	2007	W.B. Sunder's Company, USA	\$35.00
Notes on Dental Materials	E.C. Combe	06th	1992	Churchill Livingstone, UK	4.95 pounds
Applied Dental Material	John. F. Mc. Cabe	07th	1992	Oxford Blackwell Scientific pub. London	Rs. 320/-
Text Book of Dental Material	Craig. O. Brien	06th	1996	Mosby, USA	\$ 15.00
Restorative Dental Materials	Craig.	11th	2002	Mosby, USA	Rs. 675/-

I BDS PRE-CLINICAL PROSTHODONTICS AND CROWN AND BRIDGE

Practical: 100 Hours

- 1. Preparation of special trays
- 2. Preparation of temporary and permanent denture bases
- 3. Preparation of occlusion rims
- 4. Orientation of occlusion rims on articulator
- 5. Arrangement of teeth
- 6. Processing of complete dentures

RECOMMENDED TEXT BOOKS

Author	Name of the Book & Title	Edition	Year. of Publ.	Publishers Name Place of Publ.	Price
Boucher	Prosthodontic Treatment of Edentulous Patients	ΧI	1997	Mosby St. Louis, Missouri, USA	\$ 76
Heartwell	Syllabus of Complete Denture	IV	1992	Varghese Publishing House	Rs 595
Tylman	Theory and Practice of Fixed Prosthodontics	VIII	1993	Ishiyaku Euro America Inc. 716, Hanley Industrial Court St. Louis Missouri, USA	\$ 69
McCracken	Removable Partial Denture	VIII	1989	CBS Publishers & Distributors Shadara, Delhi	Rs 350
Skinner	Science of Dental Materials	X	1996	W.B Saunders Company, Philadelphia, USA	\$ 35
Craig	Dental Materials, Properties & Manipulation	VI	1996	Mosby, St. Louis Missouri, USA	\$ 35

II Year - BDS DENTAL MATERIAL

	Theory - 60 Hrs. Practical - 200 Hrs.	
1.	Chemistry of synthetic resins used in dentistry.	02
2.	Dental porcelains - types, composition, role played by each ingredient, manipulation, advantages and disadvantages, aluminous, porcelain, castable porcelain, metal fused porcelain, and porcelain repair materials.	05
3.	Tooth restorative materials - Classification and ideal properties: b. Cavity bases, liners and varnishes. c. Restorative resins - Brief history of resins as tooth restorative materials, filled resins (composite resins) - classification, chemistry of setting, composition, properties, uses, manipulation advantages and disadvantages, acid etching, bonding agents (Enamel and dentin bonding systems), Pit and fissure sealants.	12
4.	Direct filling Gold - types, advantages, disadvantages, brief study of manipulation (cold welding).	03
5.	Silver amalgam alloy - Brief history, classification, composition, role played by each ingredient, setting reaction, properties, manipulation and uses, comparative study of all types of silver amalgams Mercury Hygiene and Toxicity	04
6.	Casting gold alloys - Classification, corrosion, contents and role played by each ingredient, indications, white gold, uses.	03
7.	Dental casting investments - (Refractory materials) Classification, composition, setting reaction, manipulation and technical consideration.	03
8.	Casting procedures and casting defects, in general	04
9.	Base metal casting alloys - properties, composition and uses of Co-Cr, St. steel.	04
10.	Materials used in orthodontia - Luting cements, direct bonding agents, St. Steel, properties and gauzes of wires of gold, st. steel, Co-Cr and titanium alloys, brackets, sensitization.	06
11.	Abrasives and polishing agents - a. Clinical b. Laboratory.	04
11.	a. Clinical	04

SI. No.	Theory - 20 Hrs. Practical - 40 Hrs.	Total 60 Hrs.
12.	Dental implant materials - History, biological properties and different designs.	02
13.	Miscellaneous - a. Infection control b. Artificial tooth material. c. Separating media d. Die spacers e. Tray adhesives f. Petroleum jelly g. Articulating paper h. Pressure indicating paste i. Endodontic materials j. Comparative studies between metallic and nonmetallic denture base. k. Bioglass l. Sprues m. Setting expansion, hygroscopic expansion, thermal expansion n. Dentifrices.	08

Practical Exercises : 200 Hours

| Demonstration of manipulation of all materials for a batch not more than 8 students.

Il Exercises to be done by each student:

- a. Manipulation and pouring impressions identify setting time and working time and working time with reference to proportion, water temp, and spatulation time.
- b. Self-cure and heat cure acrylic resin manipulation and curing.
- c. Cements manipulation and studying setting time and working time for luting, base & restoration.
- d. Silver Amalgam manipulation, trituaration.

Scheme of Examination A. Theory : 70 Marks

Distribution of Topics and Type of Questions:

Contents	Type of Questions and Marks	Marks
Conservative Dentistry Topics	Long Essays 1 x 10 marks	10
Prosthodontics topics	Long Essays 1 x 10 marks	10
Conservative and Prosthetic topics (Four questions from each subject)	Short Essays 8 x 5 marks	40
Orthodontia*	Short Essays 2 x 2 marks	04
Conservative and Prosthetics topics* (Five questions from each subject)	Short Answers 3 x 2 marks	06
	Total	70

B. Viva Voce : 20 Marks

C. Internal Assessment - Theory : 10 marks, Practicals : 10 marks

D. Practicals : 90 Marks

1. Spotters: Identify and write the composition and two important uses:

Spotters - 25 Nos. Marks - 01 Each

Time - 02 Minutes each - 25 Marks

2. Exercise No. 1 - 20 Marks

Any one exercise of the following:

- a. Manipulation of impression compound and preparation of a plaster cast of U/L arch.
- b. Manipulation of alginate impression material and preparation of plaster cast of U/L arch.
- c. Manipulation of Zinc Oxide Eugenol impression paste, and preparation of cast of U/L arch.
- d. Manipulation of Rubber Base impression material and preparation of Stone cast

3. Exercise No. 2 - 20 marks

Manipulation of any one of the following Dental Cements.

- a. ZOE (Luting and Filling consistency)
- b. Zinc Phosphate Cement (Luting and Base consistency)
- c. Glass Ionomer Cement Type I/II (Luting/Filling consistency)

d. Polycarboxylate Cement (Luting consistency).

(Cements which are mixed for filling consistency should be filled in the cavity prepared in the extracted natural looth / typhodont.)

4. Exercise No. 3 - 25 marks

- a. Trituration of Silver Amalgam and Condensation into the cavity prepared in extracted natural tooth/typhodont.
- b. Mixing to heat cure Acrylic resin and recording of time taken for all stages.

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Science of Dental Materials	Kennet. J. Anusavice	11th	2008	W.B. Sunder's Company, USA	\$ 35.00
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II B.D.S PRE-CLINICAL PROSTHODONTICS

THEORY: 25 hrs, PRACTICALS -200 hrs 10 hrs / week]

. Introduction to Prosthodontics - Scope and Definition	
A. Masticatory apparatus and function: 1. Maxillae & Mandible with & without teeth. 2. Muscles of mastication and accessory muscles of mastication. 3. Brief anatomy of TMJ. 4. Mandibular movements. 5. Functions of teeth.	Must Know 2 hrs
B. Various branches of Prosthodontics and prosthesis: 1. Scope & limitation. 2. Appliances v/s prosthesis. 3. Dental prosthesis v/s non-dental prosthesis.	Must Know 1 hr
C. Effect of loss of teeth: 1. On general health. 2. On masticatory apparatus. 3. Need of replace lost teeth.	Must Know 1 hr
D. Outline of Prosthodontics: 1. Types of Prosthesis. 2. Requirements of prosthesis- Physical, biological, esthetic considerations.	Must Know 1 hr
II. Introduction to components of Prosthesis	
A. Complete Denture Prosthesis: 1. Various surfaces (Border and surface anatomy). 2. Components - Base and Teeth.	Must Know 1 hrs
B. Removable Partial Denture: 1. Classification. 2. Major and minor Connectors. 3. Direct retainers. 4. Rests. 5. Indirect retainers. 6. Denture base. 7. Artificial teeth.	Must Know 2 hrs
C. Fixed Partial Denture: 1. Classification. 2. Retainers.	Must Know 1 hr

3. Pontics. 4. Connectors. III.All related definitions and terminologies from glossary • Model • Cast • Impression • Occlusion rim • Temporary denture base • Permanent denture base • Permanent denture base • Occlusion • Face Bow & Articulator • Jaw relation - orientation, vertical and centric • Christensten's phenomenon • Key of occlusion • Balanced occlusion • Abutment etc	Must Know 1 hr
IV. Introduction to mouth preparation - in brief A. Complete Dentures 1. General considerations 2. Pre-prosthetic surgery	Must Know 1 hr
B. Removable partial dentures 1. General considerations 2. Occlusal rest preparation 3. Modifying contours of the abutments 4. Guide planes 5. Elimination of undercuts	Desirable to Know 1 hr
C. Fixed Partial Dentures 1. Principles of tooth preparation - in brief 2. Retainers in brief	Desirable to Know
V. Introduction to all steps involved in fabrication of Prosthesis	Must Know 1 hrs
Clinical Steps in brief and laboratory steps in detail	
Impression Making 1. Definition and requirements and types of impressions 2. Various materials used for different impressions 3. Different theories of impression making	Must Know 2 hrs
Impression Trays 1. Definition, classification, materials, advantages and disadvantages 2. Selection of trays 3. Special trays 4. Spacer design	Must Know 1 hr

Introduction to jaw relation record	Must Know
1. Definition and type	2 hrs.
2. Temporary denture base - Indications, Advantages, Disadvantage	\$,
materials used	
Occlusion rims - materials, shape, dimensions	
Clinical procedures of jaw relation recording in brief	
Articulators and face bow	Must Know
1. Basic out line	2 hrs.
2. Need for articulators	
Definition, classification, parts, advantages, disadvantages of articulators	
4. Definitions, classification, parts, advantages, disadvantages and	
purpose of face bow transfer	
5. Demonstration of face bow transfer to an articulator on a dummy	
Selection of Teeth	Must Know
Various guidelines for selection of teeth including dentogenic	1 hr
concept	
2. Arrangement of teeth in detail with various factors of esthetics,	
overjet, overbite etc	
Occlusion	Must Know
Balanced Occlusion - need and advantages	1 hrs
Various factors of balanced occlusion	
Try in Procedures	Must Know
1. Anterior try - in	1 hr
2. Posterior try - in	
3. Waxing, carvin, polishing and final try - in	
Processing Procedures	Must Know
• Flasking	1 hr
Dewaxing Dealing	
• Packing	
Curing Finishing and polishing of comilia dentures.	
Finishing and polishing of acrylic dentures	
VI.Casting Procedures	Desirable to Kn
Preparation of die	1 hrs
Wax pattern	
• Investing	
Burnout Cooding	
Casting Finishing and polishing	
Finishing and polishing	I

II BDS PRACTICAL EXCERCISES 200 hours

- 1. Arrangement of teeth Must Know
- 2. Surveying of partially edentulous models and preparing modified master cast Desirable to Know
- 3. Preparing of was patterns spruing, casting and finishing (in batches of students not more than 8) Desirable to Know
- 4. Preparation of plaster models of various preparation of teeth to receive retainers for FPD
 - Desirable to Know
- 5. Prepare wax patterns for minimum of 3 unit FPD and investing, casting and porcelain facing (for Batch of 8 students) Desirable to Know

Note:

- 1. Students shall submit one processed denture mounted on an articulator to present on university practical exam along with record book.
- 2. Exercises of RPD and FPD to be submitted in groups along with the record book.

Scheme of Examination

A. Practical Exercise: (Duration- 3 hrs): 60 Marks

Arrangement of teeth in class I relation, Waxing, Carving, Polishing

B. University Viva-Voce : 20 Marks C. Internal Assessment : 20 Marks

RECOMMENDED TEXT BOOKS

Author	Name of the Book & Title	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
Boucher	Prosthodontic Treat ment of Edentulous Patients	ΧI	1997	Mosby St.Louis, Missouri,USA	\$ 76
Heartwell	Syllabus of Complete Denture	IV	1992	Varghese Publishing House	Rs 595
Tylman	Theory and Practice of Fixed Prosthodontics	VIII	1993	Ishiyaku Euro America Inc. 716, Hanley Industrial Court St. Louis Missouri, USA	\$ 69
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II BDS PRE-CLINICAL CONSERVATIVE DENTISTRY

Theory: 25 Hours

SI. No.			
1.	Introduction to Conservative Dentistry.	1 hour	
2.	Definition, Aim & Scope of Conservative Dentistry & Endodontics	1 Hour	
3.	Classification of Cavities.	1 hour	
4.	Nomenclature.	- Thou	
5.	Various chair side positions.		
6.	Tooth Numbering.	1 hour	
7.	Restoration - Definition & Objectives		
8.	Instruments - Classification, Nomenclature, Design, Formula of hand cutting instruments, Care, Grasps and Rests.	4 hours	
9.	Rotary Cutting instruments - Burs, Design & use. Various speeds in Cavity preparation.	2 hours	
10.	Principles of cavity /Tooth preparation for :	5 hours	
	a. Silver Amalgam		
	b. Cast gold inlay		
	c. Composite resins.		
	d. Glass Ionomer		
11.	Matrices, Retainers, Wedges.	2 hours	
12.	Separators - different methods of separation.	2 hours	
13.	Finishing & polishing of restorations.	1 hours	
14.	Management of deep carious lesions - pulp capping and pulpotomy.	3 hours	
15.	Access cavity and brief introduction of root canal instruments.	3 hours	

PRACTICAL EXCERCISES - 200 Hours

Preparation of 1" cube in Plaster of paris - 6 Nos.

Preparation of geometric cavities in the above cubes.

Preparation of Tooth models in plaster and preparation of cavities and restoration with modeling wax.

a. Incisors - 4 Nos. b. Pre-Molars - 2 Nos. c. Molars - 8 Nos.

30 Hours

Preparation of Cavities on Typhodont and/or Extracted Natural Teeth

I. CAVITIES Class I Class II	PREPARATION 6 with 2 extensions 5 DO Conventional	RESTORATION 4 8	25 Hours 25 Hours
	5 MO 5 Conservative 2 MOD (1 Upper molar) (1 Lower Molar) 3	4 1	15 Hours 15 Hours
Class III Class V	3 on Anteriors 2 on Posteriors	AII AII AII	15 Hours 15 Hours 15 Hours

II. INLAY PREPARATION:

Class I1 To prepare Wax patterns 15 Hours

Class II2+1 MOD

To prepare wax patterns and one to be casted

Class V 1 (posterior)

III. CUSPAL PREPARATION: (Demonstration)

IV. a. Pulp capping: Direct/ Indirect on extracted teeth

- b. Pulpotomy on extracted posterior teeth
- c. Root canal access cavity opening on Upper Central incisor. (Extracted Tooth)
- V. Demonstration of Light cure composite and Glass Ionomer Restorations.
- VI. Demonstration of Instrumentation and Obturation of root canal.
- VII. Demonstration Wax pattern, investing, casting, polishing and cementation of cast restoration.

NOTE: The II year student should complete the prescribed quota of work before appearing for final internal assessment for the subject. This should be certified by the Head of the department before the

candidate takes up final internal assessment exam.

Scheme of Examination

A. University Practicals : 60 Marks

Practical Exercise No.1: 10 Marks

Spotters: 10 Nos., Marks: 01 Each, Time: 02 Minutes Each

Spotters

- a. Hand instruments used to prepare cavity and restoration
- b. Identification of Root Canal Instruments

Practical Exercise No.2: 50 Marks

Preparation of Class II Conventional Cavity for Silver Amalgam in Maxillary or Mandibular I or II Molar tooth (Typhodont/Natural Tooth)

Cavity preparation 45 Minutes 25 Marks Lining and Matrix 15 Minutes 10 Marks Filling and carving 30 Minutes 15 Marks

B. University Viva-Voce : 20 Marks

C. Internal Assessment : 20 Marks

Total : 100 Marks

TEXT BOOKS RECOMMENDED:

Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
The Art & Science of Operative Dentistry	Sturdevan	: 3rd	1997	Mosby, USA	\$ 30.00
Principle & Practice of Operative Dentistry	Charbeneu	3rd	1989	Varghese Publication, Bombay	Rs. 315/-
Endodontic Practice	Grossman		1988	Varghese Publication, Bombay	Rs. 323/-

II BDS GENERAL AND DENTAL PHARMACOLOGY AND THERAPEUTICS

Theory: 70 Hrs.

SI. No.		
1.	General Pharmacology : a. Definitions : Pharmacology, drug, Pharmacy, sources of drugs with examples.	1 hour
	b. Pharmacokinetics with clinical implications.	2 hours
	c. Routes of administration : oral, inhalation, intradermal, Subcutaneous, intramuscular, intravenous intrathecal, perineural & Newer drug regimes (Advantages and disadvantages with the examples of drugs administered).	1 hour
	d. Pharmacodynamics: mechanism of action, factors modifying drug actions with emphasis on factors like - age, sex, dose, frequency & route of administration, presence of other drugs, Pharmacogenetics and Pathological conditions.	2 hours
	e. Therapeutics: Principles of drug therapy, Adverse drug reactions and drug interactions.	3 hours
2.	ANS drugs: Clinically used examples, their important pharmacological actions (which form the basis for the uses), clinical uses along with dental uses if any and specific adverse effects of - a. Sympathomimetics b. Sympatholytics - alpha blockers, Beta - blockers. c. Cholinomimetics. d. Anticholinergics.	1 hour 2 hours 2 hours 2 hours
3.	Detailed pharmacology of : A. a. Clinically used opiod and non-opiod analgesics. b. Clinically used local anesthetics.	2 hours 2 hours
	B. Enumeration of clinically used agents, their brief Pharmacology, clinical uses along with dental uses if any, and specific adverse effects of : a. Ethyl alcohol - actions, uses and drug interactions.	1 hour
В	. General anesthetics	2 hours
c.	Preanaesthetic medication.	
d.	Antipsychotics, antidepressants, anxiolytics.	2 hours
e.	Sedative hypnotics	2 hours
f.	Antiepileptics	1 hour

4.	CVS drugs: Enumeration/Classification of clinically used agents their important pharmacological actions (that form the basis of their uses) Clinical uses along with dental uses if any, and specific adverse effects of:	
	a. Cardiac glycosides	1 hour
	b. Antianginal drugs	1 hour
	c. Antihypertensives	1 hour
	d. Diuretics	1 hour
	e. Pharmacotherapy of shocks - anaphylactic, cardiogenic hypovolemic & Septic.	1 hour
5.	Drugs acting on blood : Detailed pharmacology of :	
	a. Coagulants, anticoagulants, fibrinolytics, anti platelet drugs and styptics	3 hours
	b. Hematinics : Iron preparation Vit.B12, Folic acid Vit. C	3 hours
	c. Vit.D and calcium preparations.	1 hour
6.	Endocrines: Enumeration/Classification of clinically used agents and their preparations, Mechanism of action, clinical uses along with dental uses if any and specific adverse effects of:	
	a. Drugs used in diabetes mellitus	2 hours
	b. Corticosteroids	2 hours
7.	Chemotherapy: Enumeration/Classification of clinically used Agents, their mechanism of action clinical uses along with Dental uses if any and specific adverse effects of:	
	a. Sulfonamides	1 hour
	b. Beta-lactum antibiotics	2 hours
	c. Macrolides and aminoglycosides	1 hour
Ì	d. Broad spectrum antibiotics	1 hour
	e. Antifungal and antiviral (acyclovir) agents.	2 hours
	f. Metronidazole and fluoroquinolones	1 hour
	g. Antineoplastic Drugs: Alkylating agents, Antimetabolities, Radio active Isotopes, Vinka Alkaloids, Anti Cancerous antibiotics.	2 hours
	h. Drug Therapy of Tuberculosis, Leprosy & Malaria.	3 hours
8.	Other drugs: Enumeration of clinically used agents, general uses along with dental uses if any and specific adverse effects of	
	a. Antihistamines and antiemetics	2 hours
	b. Drugs used in bronchial asthma and cough	1 hour
	c. Drugs used in peptic ulcer	2 hours
1	d. Chelating agents - BAL, EDTA & Penicillamine.	1 hour
	e. Antihelmenthics	2 hours

9.	Dental Pharmacology	1 hour
	A. a. Fluoride pharmacology	1 hour
(2) (c)	b. Antiseptics, astringents & Sialogogues	1 hour
	c. Obtundents, Mummifying agents and disclosing agents.	2 hours
Ø.	B. Prevention and drug therapy of emergencies in dental practice.	
6	a. Seizures	
	b. Anaphylaxis	
3	c. Severe bleeding	
	d. Shock	
	e. Tetany	
	f. Status asthmaticus	
	g. Acute addisonian crisis	
	h. Diabetic Ketoacidosis	

PRACTICALS: 20 Hrs.

1. Introduction - equipments used in dispensing pharmacy, prescription - parts and model prescription. 2. Demonstration of common dosage forms used in clinical practice. 3. Mixtures - one example (Expectorant/Salicylate) of simple and diffusible (Bismuth Kaolin/chalk) mixtures. 4. Emulsion - Types and example (Liniment turpentine / Shark liver oil) of emulsion. 5. Powders - tooth powder 6. Mandl's paint/Gum paint percentage dilution - concept and calculations with suitable examples. 7. Mouth washes - Alkaline, antiseptic, astringent. 8. Tooth pastes 9. Prescription writing for 15 general conditions commonly encountered in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with swelling, oral candidiasis, scurvy etc.			
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and diffusible (Bismuth Kaolin/chalk) mixtures. 2 hours Emulsion - Types and example (Liniment turpentine / Shark liver oil) of emulsion. 2 hours 5. Powders - tooth powder 6. Mandl's paint/Gum paint percentage dilution - concept and calculations with suitable examples. 7. Mouth washes - Alkaline, antiseptic, astringent. 8. Tooth pastes Prescription writing for 15 general conditions commonly encountered in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	2.	Demonstration of common dosage forms used in clinical practice.	2 hours
5. Powders - tooth powder 2 hours 6. Mandl's paint/Gum paint percentage dilution - concept and calculations with suitable examples. 2 hours 7. Mouth washes - Alkaline, antiseptic, astringent. 2 hours 8. Tooth pastes 2 hours Prescription writing for 15 general conditions commonly encountered in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	3.		2 hours
6. Mandl's paint/Gum paint percentage dilution - concept and calculations with suitable examples. 7. Mouth washes - Alkaline, antiseptic, astringent. 8. Tooth pastes 2 hours Prescription writing for 15 general conditions commonly encountered in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	4.		2 hours
6. and calculations with suitable examples. 7. Mouth washes - Alkaline, antiseptic, astringent. 8. Tooth pastes Prescription writing for 15 general conditions commonly encountered in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	5.	Powders - tooth powder	2 hours
8. Tooth pastes 2 hours Prescription writing for 15 general conditions commonly encountered in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	6.		2 hours
Prescription writing for 15 general conditions commonly encountered in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	7.	Mouth washes - Alkaline, antiseptic, astringent.	2 hours
in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus, iron deficiency & pernicious anaemia. Dental prescriptions for about fifteen dental conditions commonly encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	8.	Tooth pastes	2 hours
encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	9.	in clinical practice. eg. Bronchial asthma, hypertension congestive heart failure, angina pectoris, peptic ulcer, bacillary dysentery, pseudomembranous colitis, diabetes mellitus, diabetic coma osteoarthritis, anaphylaxis, status asthmaticus, Status epilepticus,	2 hours
	10.	encountered in practice eg. Acute necrotising ulcerative. gingivitis, acute herpetic gingivitis/stomatitis, acute gingival abscess, pericoronal abscess (impacted teeth), dental caries, aphthous ulcers, hypersensitive dentine, dentoalveolar abscess, xerostomia, acute tooth ache, post operative pain, post extraction pain with	2 hours

Scheme of Examination

A. Theory (Written) Examination : 70 Marks

Type of questions, topics and marks distribution

Contents	Type of Questions and Marks	Marks
Topics to be covered: One long essay from dental pharmacology Second long essay from: - Pharmacokinetics - Pharmaco dynamics - Antibiotics - NSAIDS - Local anesthetics - Anti coagulants - Beta blockers - Glcocorticoids - Cium channel blockers - ACE Inhibitors - Opiod Analgesics - Sympathomimetics - Anti-Cholinergics - Cardiac Glycosides	Long Essay 2 x 10 = 20 marks	20
For Short notes Please refer chapters at sl. no. l, 1 b, c, d, e, 2 b, 3 B, 4 b, d, e., 5, 6 a, 7 e, f, g., 8, 9. A. b, c, 9. B. Compare and contrast type from Physostigmine and Neostigmine Atropine and Scopolamine Procaine and Cocaine Heparin and Dicoumoral Iron Dextran and Iron Sorbitol Citric Acid complex Digoxin and Digitoxin Frusemide and Spiranolactone / Triamterene	Short essay type Short notes 06 x 5 = 30 marks Compare and contrast 02 x 5 = 10 marks	40
To classify the drug and write its mechanism of action or adverse effect or clinical use or specific antidote indicated in its poisoning, if any.	Short Answer type 05x 02= 10 marks	10
	TOTAL	70

B. Viva Voce : 20 Marks

C. Internal Assessment - Theory : 10 marks, Practicals : 10 marks

D. Practicals : 90 Marks

1. Spotters 10 nos. x 1 = 10 marks

2. Prescriptions2 nos. (10+10 marks) = 20 marks (one medical plus one dental prescription)

3. Preparations2 nos.x 30 marks = 60 marks (one medical plus one dental preparation)

TEXT BOOKS RECOMMENDED:

Name of the Book & Title	Author	Edn	Yr. of Publ	Publ.'s Name Place of Publ.	Price
R.S.Satoskar and S.D.Bhandarkar	Pharma cology & Pharmaco therapeu tics	21st	2009	Bombay Popular Prakashan	Rs. 605/-
Tripathi K.D.	Essentials of Medical Pharma cology	6th	2008	New Delhi Jaypee Brothers Medical Publishers	Rs. 795/-
Tripathi K.D.	Essentials of Medical Pharma cology	1st	2006	do	Rs. 395/-
P N Bennett M J Brown	Clinical Pharma cology	9th	2003	New York Churchill Livingston	\$ 11.00
Kartzung Betram G	Basic and clinical Pharma cology	11th	2007	USA Lange Medical Books	Rs. 3024/-
H L Sharma K K Sharma D K Gupta	Text book of Dental Pharma cology	1st	2008	Hyderabad, New Delhi Paras Medical Publishers	Rs. 695/-
Padmaja Udaykumar	Medical Pharmacology	Illrd		Publishers & Distributors Pvt Ltd	

II - BDS GENERAL PATHOLOGY

Theory: 55 Hours

	Hours
Introduction to pathology as scientific study of disease, evolution of modern pathology, subdivisions in pathology, techniques used in the study of pathology and terms used in pathology	02
 Disturbances of metabolism of cells-Intra cellular accumulations (Degenerations) Fatty change, accumulation of lipids, proteins and glycogen. cellular swelling, hydropic change, Hyaline change and mucoid degeneration. Disorders of pigmentation and pathologic calcification. 	03
3. Cell injury- Causes Types, mechanism, intracellular changes, morphology with examples, Cell death. Necrosis - definitions, types of necrosis with examples and cellular changes (morphology), mechanism. Apoptosis - definition, examples, morphology Gangrene- definition, types with examples, differences between dry and wet gangrene, stressing mainly on cancrum oris.	05
Amyloidosis - definition, pathogenesis and emphasis on localised amyloidosis, special stains for amyloidosis.	02
5. Inflammation and Repair-Acute and chronic inflammation. Chemical mediators of acute inflammation, Outcome of acute inflammation. Granulomatous inflammation - definition of granuloma, Types of granuloma, with examples. Patterns and systemic effects of inflammation.	05
Healing of a wound in general with special emphasis on healing of a fracture. Factors affecting wound healing.	03
7. Immunity and hypersensitivity, definition, types mechanisms of immunology tissue injury with examples. Brief Introduction to Auto-Immune diseases.	06

8. Infection and infestation - Bacterial- like pyogenic infections, typhoid fever, viral like AIDS, Hepatotropic viruses. Tuberculosis, Leprosy&syphilis, Actinomycosis. Viral- Hiv, Hepatotropic Viruses, Htlv. Fungal- Candidiasis, Mucormycosis.	08
Circulatory disturbances - Hyperaemia, congestion, Haemorrhage shock, oedema, thrombosis, embolism and infarction.	08
Disturbances of Nutrition; Starvation, Obesity, Malnutrition, Pathogenesis of Deficiency Diseases with Special Reference to Disorders of Vitamins & Minerals	05
Diabetes mellitus types, Aetio Pathogenesis, morphological changes in different organs, complications and lab investigations.	02
12. Brief Introduction to Growth and Differention. Adoptive Disorders of Growth-Arophy, Hypertrophy Hyperplasia, Metaplasia. Types and Pathologic Changes Of Dysplasia And Premalignant Lesions.	03
13. Neoplasia: Introduction, Definition, Classification, Characteristics of Benign and Malignant Tumours. Routes of Spread of Malignant Tumours, Aetiology, Epidemiology and Pathogenesis of Neoplasia, Oncogenes, Clinical Aspects & Laboratory Diagnosis of Cancer.	08
14. Common Diseases of Bone - Osteomyelitis, Tumours and Tumours Like Lesions of Bone.	04
15. Introduction to Diseases of Oral Cavity & Salivary Glands-inflammatory Conditions, Infections, Premalignant Conditions and Squamous Cell Carcinoma of Oral Cavity Sialadenitis, Pleomorphic Adenoma and Warthin's Tumour. (exclude Diseases of Teeth, Periodontal Diseases and Odontogenic Tumours)	04
Haematology and Clinical Pathology	
Introduction to Haematology-brief Introduction to Haemopoiesis, Bone Marrow Aspiration & Biopsy.	02
Diseases of RBCS-Anaemias -classification, Iron Deficiency Anemia, Vit.b12 Or Folic Acid Deficiency Anaemia and Haemolytic Anaemias and Their Lab Investigations. Polycythaemia	07
CO.	

Diseases of WBCS- Pathologic Variations in white cell counts and Leukemoid Reactions.	02
Neoplastic Proliferation of Leucocytes - Leukaemias - Acute & Chronic Leukaemias with Brief Introduction to Lymphomas.	05
Haemorrhagic Disorders with their Lab Investigations.	02

PRACTICALS AND LECTURE DEMONSTRATIONS: 50 hours

Lecture Demonstrations -----10 Hours

- 1. Anti Coagulants, Blood Indices
- 2. Pcv And Erythrocyte Sedimentation Rate
- 3. Instruments & Their Uses:
 - A. Neubauer's Counting Chamber.
 - B. Haemoglobinometer
 - C. W.b.c.pipette
 - D. Wintrobe Tube
 - E. Urinometer.
- 4. Cytologic Techniques Fnac And Buccal Smear
- 5. Study Of Anaemias Microcytic, Macrocytic And Dimorphic Blood Picture.
- 6. Study Of Acute Leukemias- Any One Type
- 7. Study Of Chronic Leukemias-any One Type.

Histopathology Slides And Specimens -----20 Hours

- 1. Acute Appendicitis
- 2. Granulation Tissue.
- 3. Actinomycosis
- 4. Tubercular Lymphadenitis
- 5. Fatty Liver.
- 6. Chronic Venous Congestion (cvc) Liver / Spleen / Lung.
- 7. Squamous Papilloma / Transitional Cell Papilloma
- 8. Pleomorphic Adenoma
- 9. Capillary And Cavernous Haemangioma
- 11. Fibroma,
- 12. Lipoma
- 13. Osteoma, Chondroma
- 14. Squamous Cell Carcinoma
- 15. Basal Cell Carcinoma
- 16. Adenocarcinoma.
- 17. Malignant Melanoma.
- 18. Osteosarcoma
- 19. Osteoclastoma.

Specimens

- 1. Acute Appendicitis.
- 2. Tuberculosis Lymph Node /any Other Organ
- 3. Fatty Liver.
- 4. Infarction Spleen.
- 5. Chronic Venous Congestion (c.v.c.) Liv
- 6. Lipoma /any Other Benign Tumours
- 7. Carcinoma-breast /any Other Malignant Tumour
- 7. Adenocarcinoma
- 8. Osteosarcoma
- 9. Osteoclastoma.
- 10. Gangrene.

Practicals That Must Be Done By Students: 20 Hours

- Determination Of Haemoglobin Percentage
- Blood Grouping.
- Total Leukocyte Count
- Bleeding Time, Clotting Time
- Peripheral Blood Smear Staining & Study
- Differential Leukocyte Count.
- Urine Examination For Sugar, Ketone Bodies, Protein, Blood, Bile Pigments And Bile Salts Any One Standard Test.

Scheme of Examination

To Conduct General Pathology and Microbiology Exams on Separate Days.

A. Theory: 45 Marks

Distribution of Topics and Type of Questions:

Contents	Type of Questions and Marks	Marks
One Main Question from General Pathology Inflammation, Healing and Repair, Tuberculosis, Leprosy, Thrombosis, Diabetes Mellitus, Neoplasia. Anaemias Due to Nutritional Deficiency, Amyloidosis, Cell Injury and Cell Death	Long Essays 1 x 10 marks	10
Three from General Pathology One from Haematology One from Clinical Pathology Intracellular Accumulations, Necrosis, Gangrene, Apoptosis, Amyloidosis, Pathologic Calcification, Hypersensitivity Reactions, Infections, Shock, Oedema, Infarction, Congestion, Hypertension, Diabetes Mellitus,	Short Essays 3 x 5 marks	15

Contents	Type of Questions and Marks	Marks
Premalignant Conditions, Neoplasia, Osteomyelitis, Anaemias, Neoplastic Proliferation of Wbcs - Leukaemias and Lymphomas, Haemorrhagic Disorders, Erythrocyte Sedimentation Rate (Esr).		
2 From Haematology 1 From Clinical Pathology 2 From General Pathology	Short Answers 5 x 2 marks	10
	Total	45

B. Viva Voce : 10 Marks

C. Internal Assessment - Theory: 05 Marks, Practical: 05 Marks

D. Practicals : 55 Marks

2. To examine given sample of urine for abnormal constituents
3. To do differential count on the given peripheral blood smear
- 15 Marks
- 15 Marks

4. To estimate haemoglobin percentage in the given sample of blood

or

To determine blood groups (abo and rh) in the given sample of blood - 10 marks

Text Books Recommended:

Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
Robbin's pathologic basis of disease	Cotran & Kumar, Robins	7th	2003	Prism & Saunders Bangalore	
De.Gruchy Clinical Haematology in Medical Practice	Frank Firskin Colin Chester man David Penington Bryan Rush	5th	2003	Oxford University Press New Delhi	
Pathology for dental students	Harsh Mohan	recent	2003		
Medical Laboratory Technology (Methods and Interpretation)	Dr. Ramnik Sood	5th	1994	Jaypee Brothers New Delhi	Rs. 250/-

Reference Books

Name of the Book & Title	Author	Edn	Yr. of Publ.	Publ.'s Name Place of Publ.	Price
Clinical Diagnosis and Management by Laboratory Methods	Todd, Sanford, John Bernard Davidson	20th	2001	Veerendar Kumar Arya for AITBS with Saunders New Delhi	Rs.1250/-
Haematology an illustrated colour text	Martin R. Howard Peter J Hamilton	1st	1997	Churchill Livingston USA	£ 4.95
General Pathology Vol. I & II	Y.M. Bhende & S.G. Deodhare	5th edn. Under print		Popular Prakashan Bombay	
Colour Atlas of Histopathology	R. C. Curran	4th (Revised)	2000	Harvey Miller Oxford university press	Rs. 1250/-

II - BDS MICROBIOLOGY

Theory: 63 Hrs.

		Teaching Hours
	GENERAL BACTERIOLOGY	
1.	Introduction, History and classification.	02
2.	Morphology, Physiology of Bacterial cell.	02
3.	Bacterial Genetics	02
4.	Infection	02
	IMMUNOLOGY	
1.	Immunity	02
2.	Antigen	01
3.	Antibodies	01
4.	Structures and functions of Immune system	01
5.	Immune response	01
6.	Antigen and antibody reactions & compliment	04
7.	Hypersensitivity	02
8.	Auto immunity	01
9.	Immunology of transplantation	01
	SYSTEMATIC BACTERIOLOGY	
1.	Staphylococci	01
2.	Streptococci (Dental Caries)	02
3.	Pneumococci	01
4.	Meningococci & Gonococci	01
5.	Coryne bacterium diphtheriae	02
6.	Bacillus	01
7.	Clostridia	02
8.	Non sporing Anaerobes	02
9.	Mycobacteria	03
10.	Spirochaetes (Treponema, Leptospira and Borrelia)	03
11.	Normal Bacterial flora of the oral cavity	01
	VIROLOGY	
1.	General properties of viruses	03
2.	Herpes viruses	02
3.	Measles and Mumps	01

4.	Rabies virus.	01
5.	Hepatitis viruses	02
6.	Human Immuno deficiency Virus (HIV)	01
7.	Adeno oncogenic viruses.	02
£ 30	PARASITOLOGY	2
1.	Introduction to parasitic diseases	01
2.	Entamoeba histolytica, E. Gingivalis Malaria, Leishmania	03
3 S	MYCOLOGY	
1.	Candidiasis (in detail)	02
2.	Rhinosporidiosis	02
	APPLIED MICROBIOLOGY	
1.	Immunisation schedule, Collection of materials, Experimental animals & hospital infections - In Brief	02

MUST KNOW - MANDATORY TO KNOW

I GENERAL BACTERIOLOGY

- 1. Morphology Structure, appendages, demonstration.
- 2. Physiology Nutritional requirement, growth curve.
- 3. Bacterial genetics Mechanism of genetic transfer, drug resistance.
- 4. Infection- definition, bacterial factors, Host factors, types of infection, carrier, septecaemia, bacteraemia, pyemia, toxemia, epidemic, endemic, pandemic, nosocomial infection.

II. IMMUNOLOGY

- 1. Immunity Definition, classification, factors, mechanisms examples
- 2. Antigens definition, types and properties.
- 3. Antibodies structure, functions of diff. types of Immuno globulins.
- 4. Immune system structure, function of T cells, B cells, differences.
- 5. Immune response factors responsible for immune variations, adjuvants, mechanism.
- Antigen Antibody reactions definition, mechanism, examples, clinical applications of AG-AB reactions like agglutination, precipitation, Complement Fixation Test (CFT), Neutralisation, Fluorescent Immune test, Opsonisation, ELISA test etc.
- 7. Hypersensitivity definition, classification, mechanisms.
- 8. Autoimmunity Theories, definition, classification, mechanisms.

III. SYSTEMATIC BACTERIOLOGY

- 1. Staphylococci Classification, morphology, pathogenesis, pathogenecity tests, lesions, lab diagnosis and treatment.
- 2. Streptococci Classification, morphology, cultural characters, Pathogenesis, lab diagnosis, sequelae, Dental plaque, Dental caries & its diagnosis.
- 3. Pneumococci Morphology, cultural characters, diff. between pneumococci and streptococci, pathogenecity and lab diagnosis.
- 4. Meningococci Causes of bacterial meningitis, Morphology, lab diagnosis of bacterial meningitis including meningococcal meningitis.

- Corynebacterium diphtheriae Morphology, cultural characters toxigenecity, its occurrence, spread, lab diagnosis, prophylaxis.
- 6. Bacillus species Morphology, lesions and lab diagnosis.
- Clostridia Classification, pathogenesis, lab diagnosis of gas gangrene tetanus, prophylaxis and clinical features.
- 8. Nansporing anaerobes Classification, pathogenesis, lesions, Lab diagnosis in respect to dental infections.
- Mycobacteria Mycobacterium leprae, Mycobacterium tuberculosis, Atypical mycobacteria, Morphology, classification, cultural characters, pathogenesis, lab diagnosis, susceptibility test and prophylaxis.
- 10. Actinomycosis Morphology, lesions in respect to orofacial lesions, lab diagnosis
- Spirochaets classification, morphology, pathogenesis & lab diagnosis of Treponema, Borrelia, Leptospira.
- 12. Normal Bacterial flora of the oral cavity Enumerating the organisms opportunistic importance

in dental practice.

IV. VIROLOGY

- 1. General virology general properties, definition, classification, structure, pathogenesis, cultivation, lab diagnosis, antiviral agents immunology.
- 2. Herpes viruses structure, classifications, lesions and lab diagnosis HSV 1, 2, EBV CMV, Virus Zoster (VZ) virus
- 3. Measles & Mumps viruses structure, lesions, prophylaxis and lab diagnosis.
- 4. Hepatitis viruses ABCDE; structure, route of entry, lesions, lab diagnosis and prophylaxis.
- 5. HIV classification, structure, pathogenesis, route of entry opportunistic infection in AIDS, lab diagnosis prophylaxis

V. MYCOLOGY

- 1. Candida Morphology, lesions, lab diagnosis, diff. Species in relation to oral candidiasis
- 2. Rhinosporidiosis

VI. PARASITOLOGY

Introduction to parasitology - classification, general diseases caused by them.

Entamoeba, Malaria, Leishmania - Morphology, Clinical features, pathogenesis and lab diagnosis.

DESIRABLE TO KNOW (Theory questions need not be asked from this list)

I. GENERAL BACTERIOLOGY:

- 1. Introduction
- 2. Historical aspects

II. IMMUNOLOGY:

- 1. Complement properties and functions.
- 2. Immuno deficiency diseases, enumerating the diseases
- 3. Immunology of transplantation, classification and brief description of transplantation.

III. BACTERIOLOGY:

- 1. Gonococci Morphology, lesions, lab diagnosis.
- 2. Coliforms Classification, pathogenesis, infections caused by them and lab diagnosis.
- 3. Proteus Classification, pathogenesis, infections caused by them and lab diagnosis.
- 4. Salmonella pathogenesis, lab diagnosis, prophylaxis.
- 5. Shigella classification, pathogenesis, lab diagnosis
- 6. Vibrio pathogenesis & lab diagnosis
- 7. Pseudomonas Importance in hospital infection and drug resistance.

IV. VIROLOGY:

- 1. Adeno & oncogenic viruses.
- 2. Rabies viruses- structure, pathogenesis, clinical feature, lab diagnosis, prophylaxis.
- 3. Poliomyelitis Pathogenesis, clinical feature, lab diagnosis, prophylaxis.

V. PARASITOLOGY:

1. Important Helminthic parasites.

VI. APPLIED MICROBIOLOGY:

- 1. Immunisation schedule prophylaxis
- 2. Collection of materials for lab diagnosis
- 3. Experimental animals Uses of animals in dentistry

PRACTICALS & PRACTICAL DEMONSTRATIONS: 50 Hours MUST KNOW:

PRACTICAL DEMONSTRATIONS

Sterilisation and disinfection in detail	06x02 = 12
2. Culture media	03x02 = 06
3. Cultural methods & Anaerobic methods	02x02 = 04
4. Identification of bacteria & demonstration	02x02 = 04
5. Microscopy	02x02 = 04

PRACTICALS

6. Simple stain and hanging drop	01x02 = 02
(Not form exams)	
7. Grams stain	03x02 = 06
8. Alberts stain	*****
9. Ziehl Neilsen's stain	03x02 = 06
o. Ziom realison o stam	03x02 = 06
	Total Hrs. 50

Sterilization - definition, classification, methods, physical, filteration, radiation, chemicals - used in dental practice, hospital practice.

Culture media - Classification, uses.

Culture methods - Inoculation methods, antibiotic sensitivity, Anaerobic culture techniques.

Microscopy - maintenance, uses, different parts, different types.

LIST OF PRACTICAL MATERIALS

SLIDES FOR DEMONSTRATION:

- 1. Staphylococcus
- 2. Streptococcus
- 3. Gonococcus
- 4. Pneumococcus
- 5. M Tuberculosis
- 6. M Leprae
- 7. Anthrax
- 8. Cl. Tetani
- 9. Spirochaetes
- 10. Gram Negative Bacilli
- 11. Candida
- 12. (Actinomyces)

SLIDES FOR PRACTICAL EXERCISES:

Grams stain -Staphylococci

- Gram negative bacilli
 - Mixture of any two organisms
 - Gram stain of the oral cavity.

Alberts stain - Kleb's Loffeler's Bacilli (KLB) culture slide

Ziehl-Neelson's stain - Sputum positive for AFB

MEDIA FOR DEMONSTRATION:

UNINOCULATED MEDIA:

- 1. Nutrient agar plate
- 2. Blood agar plate
- 3. Chocolate agar plate
- 4. Macconkey agar plate
- 5. Glucose citrate broth (Blood culture bottle)
- 6. Lowenstein Johnson's Media slope
- 7. Loefflers serum slope
- 8. Sabourauds slope
- 9. Robert Cooked Meat broth

INOCULATED MEDIA:

- 1. Nutrient agar with staphylococci
- 2. Blood Agar with Alpha Haemolytic Streptococci.
- 3. Blood Agar with Beta Haemolytic Streptococci.
- 4. Potassium Tellurite with growth of C.diphtheriae5. Milk agar with staphylococci
- 6. Antibiotics sensitivity plate

INSTRUMENTS:

- 1. VDRL slide
- 2. Tuberculin syringe
- 3. Sterile swab
- 4. Seitz filter
- 5. Macintosh filds jar6. Widal rack with tubes7. Microtitre plate
- 8. Disposable syringe
- 9. Surgical gloves

Scheme of Examination

A. Theory: 35 Marks

Distribution of Topics and Type of Questions:

Contents	Type of Questions and Marks	Marks
One Long Essay question from Systematic Bacteriology	Long Essays 1 x 10 marks	10
One question from General bacteriology One question from Immunology One question from Mycology One question from Parasitology / Oral Microbiology One question from Systematic Bacteriology	Short Essays 3 x 5 marks	15
One question from General bacteriology One question from Immunology One question from Systematic Bacteriology Two questions from Virology	Short Answers 5 x 2 marks	10
	Total	35

B. Viva Voce: 10 Marks

C. Internal Assessment - Theory: 05 marks, Practicals: 05 marks

D. Practicals: 45 Marks

Spotters: 10 Slides- 05

Media- 03

Instruments- 02 15 Marks Gram's Stain 10 Marks Ziehl - Neelsen's Stain 10 Marks

Text Books Recommended:

Name of the Book & Title	Author	Edn. and Yr. of Publication	Publisher's Name and Place of Publication	Price
Text Book of Microbiology	R.Anantha Narayan and C. K. Jayaram Paniker	7th 2005	Orient Longman Private Ltd. Chennai	Rs. 310/-
Medical Microbiology Volume I	Cruickshank	13th 1989	Medical Division Orient Longman group Edinburg	£ 10.50
Text Book of Bacteriology	Fair Brothers			

Reference Books

Name of the Book & Title	Author	Edn. and Yr. of Publication	Publisher's Name and Place of Publication	Price
Bacteriology for Dental Students	T.H. Merville and G.L. Slack		Medical Book Ltd. London	
Bacteriology for students of Dental Surgery	R.B. Lucas and IvorR.H.Kramer		Calcutta	
Oral Microbiology and Infectious Diseases	Burnett and Scherp		Oxford Book Company Calcutta	
Immunology	Donald M Weir	7th 1993	Longman Singapore Pub. Lt. Singapore	£ 2.50
Medical Parasitology	N. C. Dey and T.K.Dey	10th 1997	New Central Book Agency Pvt.Ltd. Calcutta	Rs. 150/-
Notes on Medical Virology	Morag C. Timbury			£ 5.00
Manual of Clinical Mycology	Conant and Smith			

II BDS ORAL PATHOLOGY AND MICROBIOLOGY

Theory: 25 Hours Practical: 50 Hours

MUST KNOW

- 1. Developmental Disturbances of oral and para oral structures :(15 hrs)
- a. Developmental disturbances of Jaws
 - Agnathia, Micrognathia, Macrognathia, Facial Hemihypertrophy, Facial Hemiatropy
- b. Developmental Disturbances of lips and palate
 - Congenital Lip pits and Commissural pits and fistulas
 - Double lip, Cleft lip, cleft Palate, Chelitis Glandularis, Chelitis Granulomatosa, Hereditary Intestinal Polyposis, Hereditary Melanotid Macule
- c. Developmental disturbances of Oral Mucosa
 - Fordyce's Granules
 - Focal epithelial Hyperplasia
- d. Developmental disturbances of gingiva
 - Fibromatosis Gingiva, Retrocuspid Papilla
- e. Developmental Disturbances of Tongue
 - Macroglossia, Microglossia, Ankyloglossia, Cleft Tongue, Fissured Tongue, Median Rhomboid Glossitis, Benign Migratory Glossitis, Hairy Tongue.
 - Aglossia, macroglossia, Microglossia, Ankyloglossia, Cleft Tongue, Fissured Tongue, Median Rhomboid Glossitis, Benign Migratory Glossitis, Hairy Tongue, lingual Varices, lingual Thyroid Nodule
- f. Development disturbances of oral lymphoid tissue:
 - Reactive lymphoid aggregates
 - Lymphoid hamartoma
 - Lympho-epithelial cyst
- g. Developmental disturbances of salivary glands:
 - Aplasia, Xerostomia, Hyperplasia of the palatal glands, Atresia, Abberrancy, Stafine's cyst Anterior Lingual Depression
- h. Developmental disturbances in size of teeth:
 - Microdontia, Macrodontia
- I. Developmental disturbances in the shape of the teeth:
 - Fusion, Germination, Concrescence, Dilacerations, Talon's Cusp, Dens in Dente, Dens Evaginatus, Taurodontism, Supernumerary Roots, Enamel Pearl
- j. Developmental Disturbances in number of teeth
 - Anodontia, Supernumerary teeth, Predecidious and Post Permanent dentition
- k. Developmental Disturbances in Structure of Teeth:
 - Amelogenesis Imperfecta, Enamel Hypoplasia, Dentinogenesis Imperfecta, Dentinal dysplasia, Regional Odontodysplasia, Shell Teeth.
- I. Developmental Disturbances in eruption of teeth:
 - Premature Eruptions, Eruption Sequestrum, Delayed Eruption, Multiple Unerupted teeth, Submerged Teeth. Embedded and Impacted Teeth

- m. Developmental / Fissural cysts of the Oral cavity
 - Median palatal cyst, Globulomaxillary cyst, Median Mandibular cyst, Naso-alveolar cyst, Palatal cyst of neonates, Thyroglossal duct cyst, Epidermoid, and Dermoid cyst, Nasopalatine duct cyst.

2. Dental Caries (5 hrs)

- Theories and Etiology
- Clinical features
- Classification
- Histopathology
- Immunology
- Caries activity Tests
- Factors Influencing Caries

3. Diseases of the pulp and Periapical tissues(5 hrs)

(5 hrs)

- a. Diseases of the Dental Pulp
 - Focal Reversible Pulpitis, Acute Pulpitis, Chronic Pulpitis, Chronic Hyperplastic Pulpitis.
- b. Diseases of the Periapical Tissues
 - Acute Apical Periodontitis, Periapical Granuloma, Periapical Abscess, Periapical Cyst
- c. Osteomyelitis
 - Acute Suppurative Osteomyelitis, Chronic Suppurative Osteomyelitis, chronic Focal And Diffuse Sclerosing Osteomyelitis, Chronic Osteomyelitis With Proliferative Periostitis

Practicals: 50 hours

Identification of Hard and Soft Tissue Specimens

Text Books Recommended:

Name of the Book & Title	Author	Edn.	Yr. of Publ	Publisher's Name and Place of Publication	Price
Shafer's Text Book of Oral Pathology	R. Rajendran & BShivapathasu -ndaram	6th	2009	Elsevier	Rs. 876/-
Oral Pathology Clinical Pathologic Correlation	Regezi & Scuiba	5th	2007	W. B. Saunders Company USA	\$ 25
Textbook of Oral and Maxillofacial Pathology	Neville, Damm. Allen, Bouquot	3rd	2009	Elsevier	-
Oral Diseases in The Tropics	Prabu, Wilson, Duftry, Johnson	1st	1992	Oxford University Press	Rs. 400/-

Other suggested reading

- 1. Pathology of Tumors-Lucas
- 2. Oral Immunology Lehner
- 3. Oral Pathology Soames and Southam4. Contemporary Oral and Maxillofacial Pathology SAPP Eversole, Wysocki,
- 5. Colour Atlas of Oral Pathology John Everson And Crispian Scully

III BDS GENERAL MEDICINE

Special emphasis should be given throughout on the importance of various diseases as applicable to dentistry e.g.: indications and contraindications for anesthesia in oral and dental procedures in different diseases. A dental student should be taught in such a manner that he is able to record the pulse, blood pressure and be capable of suspecting by sight and superficial examination of the body, diseases of the heart, lungs, kidneys, blood etc. He should be capable of handling medical emergencies encountered in dental practice. Too much details and treatment aspect (therapeutics) should be avoided.

Theory: 60 Hours (Medicine - 52 Hours, Psychology - 8 hours)

Must know	Desirable to know	Hours
Aims of Medicine, definition of diagnosis, treatment & prognosis. History taking, physical examination of the patient, diagnosis and management of disease.	Genetics and disease Medical Ethics	2 Hours
Infections: Enteric fever, HIV, Herpes simplex, Herpes zoster, Syphilis, Diphtheria, Malaria, Actinomycosis, Viral hepatitis, Tuberculosis.	Infectious mononucleosis, Mumps, Measles, R u b e I I a, Le p ro s y, Organisation and functions of the immune systems.	5 Hours
3. GIT: Stomatitis, Gingival hyperplasia, Dysphagia, Acid peptic disease, Jaundice, Acute and chronic hepatitis, Cirrhosis of liver, Ascitis, Amoebiasis, Tender hepatomegaly, Hepatotoxic drugs, Portal hypertension.	Diarrhoea and dysentery including Malabsorption syndromes, Helicobacter pylori	5 Hours
4.C.V.S: Acute rheumatic fever, Valvular heart disease, Hypertension, Ischemic heart disease (myocardial infarction), Infective Endocarditis, Common arrhythmias, Classification of congenital heart disease	Heart failure, Fallot's tetralogy, ASD, VSD.	7 Hours
5. Respiratory system: Applied anatomy and physiology of RS, Pneumonia, COPD, Pulmonary Tuberculosis, Bronchial asthma, Pleural effusion, Acute respiratory tract infections, Pulmonary embolism, Suppurative lung diseases, Lung abscess,	Bronchiectasis, Lung cancer. Empyema, Sleep apnea, ARDS, Respiratory failure	5 Hours
Hematology: Hematopoiesis, Anaemias, Clotting and Bleeding disorders, Acute and chronic myeloid leukemias, Agranulocytosis &	Principles of blood and blood products transfusion, Thromboembolic disease,	7 Hours

Neutropenia, Thrombocytopenia, SplenomegalyLymphomas,ora manifestations of haematological disorders.	Oncogenesis, Hemolytic anemia, DIC, (disseminated intravascular coagulation)	
Renal System: Acute Nephritis & Nephrotic syndrome, U.T.I	Renal function tests, CRF	4 Hours
Nutrition: Balanced diet, PEM, Vitamin deficiency disease, Calcium and phosphate metabolism. Flurosis	Osteomalacia, Osteoporosis	4 Hours
C N S: Facial Palsy, Facial pain, Trigeminal neuralgia, Epilepsy, Headache including migraine	Meningitis (acute and chronic), Anticonvulsants	5 Hours
Endocrine: Diabetes Mellitus, Acromegaly, Hypothyroidism,	Addison's disease, Cushing's syndrome, Parathyroid disease and calcium metabolism Preoperative assessment of diabetic patients, Acute adrenal deficiency	5 Hours
11. Critical care medicine: Syncope, Cardiac Pulmonary Resuscitation (CPR), Anaphylaxis, Allergy, Angio-neurotic edema.	Acute LVF, ARDS, Cardiogenic Shock, Coma	3 Hours
Miscellaneous: Adverse drug reactions, Drug interactions	Rheumatoid disease, Osteoarthritis Scleroderma	

Psychology / Psychiatry

Must know	Desirable to know	Hours
Introduction to behavioural sciences: Definition Over lapping of social, behavioural and biological sciences	Holistic approach to medical care	2 Hours
Pain: Behavioural, emotional, autonomic, conscious and unconscious, components of pain Role of anxiety in worsening pain (vicious circle)		5 Hours
Interview technique: Doctor-patient relation, listening and questioning.		5 Hours
Pre and post treatment counselling, probing Of the fears, anxiety and anger, guilt in cases Of extraction, surgery, HIV, cancer etc.		
Psychiatric disorders: Classification of mental illnesses. Aetiology - Biopsychological aspects.	Psychosis psychosomatic illnesses, alcoholism and drug dependence, dementia, illness behaviour, socio-cultural aspects stressing on personalities (anxisus, obsessive)	7 Hours
5. Neurotic disorders and psychosomatic: Definition, classification, aetiology, clinical manifestations (anxiety, depression, phobia, somatoform disorders, conversion reaction, adjustment reaction), stress, coping, alexithymia.	Management - Stress	5 Hours
Chiaison psychiatry: Dental care in mental retardation, dementia, Schizophrenia Eating disorders - deficiencies. Psychotropic drugs- side effects and drug interactions.		7 Hours

Clinical: 90 Hours (posting in a general hospital)

- 1. Five complete cases must be written in a record book before the student takes the final examination.
- 2. The student must be able to take history, do general physical examination (including build, nourishment, pulse, BP temperature, edema, cyanosis, clubbing, jaundice, lymphadenopathy, oral, cavity) and be able to examine cardiovascular and respiratory systems, abdomen and the facial nerve and signs of meningeal irritation.

Scheme of Examination

A. Theory: 100 Marks

Distribution of Topics and Type of Questions:

Contents	Type of Questions and Marks	Marks
From Must Know topics only (sl. no. 1 to 11 under Theory)	Long Essays 2 x 10 marks	20
From Must Know topics only (sl. no. 1 to 11 under Theory) And Psychology/Psychiatry	Short Essays 10 x 5 marks	50
From Must Know topics only (sl. no. 1 to 11 under Theory)	Short Answers 10 x 3 marks	30
	Total	100

B. Viva Voce: 25 Marks

C. Internal Assessment - Theory: 25 marks, Practicals: 25 marks

D. Clinicals: 75 Marks

i. Case History
ii. Clinical Examination
iii. Investigation
iv. Diagnosis & D. D.

Management
i. Clinical Examination
iii. Investigation
iv. Diagnosis & D. D.
iv. Management
iii. O5 marks

Textbooks recommended:

Name of the Book & Title	Author	Edn.	Yr. of Publ	Publisher's Name and Place of Publication	Price
Davidson's Principles of Practice of Medicine	Edward Christopher	18th	1991	Churchill Livingstone UK	Rs. 1168/-
Hutchison's Clinical Practice	Swash Michael	21st	2001	Churchill Livingstone UK	Rs. 595/-
Principles of Internal Medicine (for further reading)	Harrison	15th	2001	Mc. Graw Hill US	Rs. 1895/-
API Textbook of Medicine	Association of Physicians of India		1999	India	Rs. 900/-

GENERAL SURGERY

Theory: 60 Hours

1. Introduction - History of Surgery	1 hour
Principles of surgery, Tissue care, Asepsis and anti sepsis, Theatre technique, Sterilization, Suture materials, diathermy, Laser.	2 hour
 Classification of Diseases, General Scheme of Studying a disease - Etio- pathology, Clinical features, Investigations, Diagnosis, Management, Complications, Prognosis 	2 hour
4. Wounds - Classification, Clinical Assessment, Treatment, Complications, Wound Healing.	1 hour
5. Skin Grafting	1 hour
6. Inflammation and Infection - Definition, Etiology, Pathology, Classification	1 hour
7. Acute Infections - Non-specific, and Specific - Aerobic and Anaerobic abscess, Cellulites, Carbuncle, Erysipelas, Anthrax, Gonorrhea, gas Gangrene, Tetanus, Cancrum Oris, Ludwig's Angina.	2 hour
Chronic Infections - Nonspecific, and Specific - Tuberculosis, Syphilis, Actinomycosis, Leprosy.	2 hour
9. AIDS	2 hour
10. Bacteraemia, Septicemia, Pyaemia, Toxaemia	1 hour
11. Hemorrhage - Classification, emergency Management, Definitive Treatment, Assessment of Blood Loss.	1 hour
12. Bleeding Disorders - Coagulation Mechanism.	1 hour
13. Syncope, Shock, Cardiac Arrest - Causes, clinical Features, Haemodynamic Changes, emergency Care, Monitoring, Definitive Treatment, Septic Shock (warm shock), Anaphylaxis.	1 hour
14. Blood Groups - Blood Transfusion - Complications of Transfusion and Management, Massive Transfusion.	1 hour
15. Blood Fractions and their uses.	1 hour
16. Ulcers - Definition, classification, etiology, Nonspecific Ulcers, Specific Ulcers - Tuberculous Ulcers, Syphilitic Ulcer, Malignant Ulcers - Squamous	2 hour

cell Carcinoma, Basal Cell Carcinoma, Malignant Melanoma, Marjolin's Ucler, Diabetic Ulcer.	
17. Sinus and Fistula	1 hou
 Gangrene - Gas Gangrene, Dry Gangrene, Moist Gangrene - Causes, Management. 	1 hou
19. Cysts - Definition, Classification, Clinical Features, Complications, Management.	1 hou
20. Common Cysts - Mucous Cyst, Sebaceous Cyst, Dermoid Cyst, Ranula, Cystic Hygroma, Branchial Cyst, Thyroglossal cyst, Ganglion.	1 hou
21. Tumours - Definition, Classification, Etiology of Cancer, Spread of Cancer, Early Diagnosis, Investigations, Modalities of Treatment and Prognosis, Recent Advances	2 hou
22. Common Benign and Malignant Tumours of Head and Neck Region - Lipoma, Fibroma, Neurofibroma, Haemangioma, Lymphangioma, Osteoma, Carcinoma, Sarcoma	1 hou
23. Biopsy - Indications and Methods	1 hou
24. Diseases of Lymphatic and Lymph nodes - a. Lymphangitis - Acute and Chronic, chronic Lymphoedema b. Lymphadenopathy - Classification i. Inflammatory - Acute and Chronic, Non-specific and Specific - Tubercular Lymphadenitis, Cold abscess - Collar Stud Abscess. ii. Malignant Tumours Primary: Hodgkin's Disease, Non Hodgkin's Lymphoma - Secondary carcinoma	1 hou
25. Diseases of Mouth, Lip, Tongue, Palate & Tonsils Ulcers, Stomatitis, Leukoplakia, Carcinoma of Lip, Check, Tongue - Ranula - Sublingual Dermoid - Tonsillitis, Quinsy	1 hou
 26. Salivary Glands - - Acute and Chronic Infections - Parotid Abscess, Salivary Calculus - Salivary Tumours - Classification, Mixed Parotid Tumours - Carcinoma, Adenolymphoma, Sjogren's Disease. 	1 hou
27. Neck Swellings - Midline and Lateral Swellings, Cystic and Solid Swellings Classification, Differential diagnosis, Treatment.	1 hou
28. Head Injury Management	1 hou

29. Facio-Maxillary Injuries	1 hour
30. Management of Severely Injured Patient - Resuscitation	1 hour
31. Fractures and Dislocations - Causes, General Principles of Management, Healing of Fractures and Complications	1 hour
32. Fractures of Mandible	1 hour
33. Jaw Swellings - Epulis, Odontomes, Bone Cysts and Tumours, Burkitf's Lymphoma	1 hour
34. Osteomyelitis of Mandible	1 hour
35. Thyroid Gland - Development, Congenital anomalies, Classification of goitres, Acute and Chronic Thyroiditis, Hashimoto's Disease, Reidel's Thyroiditis, Hyperthyroidism, Hypothyroidism, Adenoma, Carcinoma.	1 hour
36. Parathyroid - Hyperparathyroidism, Tetany, Calcium Metabolism.	1 hour
37. Pituitary Gland	1 hour
38. Tracheostomy - Indications, Steps of Operation, Post Operative Care	1 hour
39. Diseases of Arteries and Veins in general - Varicose Veins, Atherosclerosis, Aneurysm, Carotid Body Tumours	1 hour
40. Nervous System - Nerve Injury, Regeneration, Repair, Nerve Grafting Facial Nerve Palsy, Trigeminal Neuralgia	1 hour
41. Burns and Scalds	1 hour
42. Development of Face - Cleft Lip and Palate repair	1 hour
43. Principles of Anaesthesia	1 hour

Desirable to Know:

- 1. Brief Surgical Anatomy of Pharynx, Oesophagus, Paranasal Airsinuses. Diseases related to obstructive ones in pharynx and Oesophagus.
- 2. Introduction to Oncology, Radiotherapy, Surgery and Genetic Engineering. 1 Hour

Ophthalmology

Curriculum for III B.D.S. students

Suggestions: 2 lectures-cum-demonstration (clinical \ visual) I Lecture:- brief Outline of Surgical Anatomy of Eye and Orbit

5 Hours

 An outline of Ocular and Orbital Involvement in relation to Oral Diseases (Infections, Inflammations of the eye like Uveitis / Exopthalmitis / Optic Neuritis / Post-operative infections of the eye due to Dental sepsis / Invasion of tumours of Oral Cavity to the Orbit etc.) / Oral Surgery / Facial Injuries.

II Lecture: - Clinical Assessment of Ocular / Orbital Involvement.

- Recognition of common symptoms and signs of ocular and orbital involvement (Ecchymosis of lids, sub-conjunctival haematoma, Conjunctival Ecchymosis Chemosis, Proptosis: pupils: Diplopias: vision recording etc.)
- Management of superficial foreign bodies in the eye. (Prevention bye protection/through eye
 wash with normal saline/removal of superficial conjunctival foreign bodies/for corneal or
 intraocular-foreign bodies to refer immediately)
- Timely referral to Ophthalmologist for any ocular/orbital problem.

E.N.T.

Ear : Middle Ear Infection

Nose: Para nasal sinuses Infection

Throat: Tonsilitis & Peritonsillar Abscess

5 hours

Clinicals : 90 Hours (posting in a general hospital)

Scheme of Examination A. Theory: 100 Marks

Distribution of Topics and Type of Questions:

Contents	Type of Questions and Marks	Marks
Principles of surgery, Tissue care, Asepsis and anti sepsis, Theatre technique, Sterilization, Suture materials, diathermy, Laser.	Long Essays 2 x 10 marks	20
Wounds - Classification, Clinical Assessment, Treatment, Complications, Wound Healing.		
Acute Infections - Non-specific, and Specific - Aerobic and Anaerobic abscess, Cellulites, Carbuncle, Erysipelas, Anthrax, Gonorrhea, gas Gangrene, Tetanus, Cancrum Oris, Ludwig's Angina.		
Bacteraemia, Septicemia, Pyaemia, Toxaemia		
Hemorrhage - Classification, emergency Management, Definitive Treatment, Assessment of Blood Loss.		
Syncope, Shock, Cardiac Arrest - Causes, clinical Features, Haemodynamic Changes, emergency Care, Monitoring, Definitive Treatment, Septic Shock (warm shock), Anaphylaxis.		
Gangrene - Gas Gangrene, Dry Gangrene, Moist Gangrene - Causes, Management.		
Questions may be asked from all the topics	Short Essays 10 x 5 marks + Short Answers	30
	10 x 3 marks	20
	Total	70

B. Viva Voce: 20 Marks

C. Internal Assessment - Theory: 10 marks, Practicals: 10 marks

D. Clinicals: 90 Marks

Long Case: One which includes

Case History10 MarksClinical Examination30 MarksSuggested investigations10 MarksDiagnosis, DD20 MarksManagement05 Marks

Books for Reading:

Name of the Book & Title	Author	Edn.	Yr. of Publ	Publisher's Name and Place of Publication	Price
A Manual on Clinical Surgery	Somen Das	4th	1996	Dr.S.Das Calcutta	Rs. 430/-
Bailey & Love's Short Practice of Surgery	Charles. V. M. Ann	23rd	2000	Oxford University Press	\$ 29.00
Hamilton Baileys Demonstrations of Physical signs in Clinical Surgery	Hamilton Bailey	18th	1997	Butterworth Heinemann U.K.	\$ 67.50

Other Books for Reference:

- 1. Oxford Text Book of Surgery
- 2. Text Book of Surgery by Devita
- 3. Surgery by Sebastin
- 4. Surgery by somalal
- 5. Text Book of Surgery by Chatterjee
- 6. Surgical Anatomy by Heereggor
- 7. Diseases of Eye by Parson
- 8. Text Book of Ophthalmology by Vasudev Anand Rao
- 9. E.N.T. Diseases by Mohammed Muqbool
- 10. E.N.T. Diseases by N.C.Day
- 11. E.N.T. Diseases by K.K.Ramalingam

III BDS ORAL PATHOLOGY AND MICROBIOLOGY

Theory: 120 Hours

ORAL PATHOLOGY

MUST KNOW

1. Benign and Malignant Tumours of the Oral Cavity

(30 hrs)

- a. Benign tumours of epithelial tissue origin
- Papilloma, Keratoacanthoma, Nevus
 - b. Premalignant lesions and conditions:
 - Definition, classification
 - Epithelial dysplasia
 - Leukoplakia, Carcinoma in-situ, Erythroplakia, Palatal changes associated with reverse smoking, Oral submucous fibrosis
 - c. Malignant tumours of epithelial tissue origin
 - Basal Cell Carcinoma, Epidermoid Carcinoma (Including TNM staging), Verrucous carcinoma, Malignant Melanoma.
 - d. Benign tumours of connective tissue origin:
 - Fibroma, Giant cell Fibroma, Peripheral and Central Ossifying Fibroma, Lipoma, Haemangioma (different types). Lymphangioma, Chondroma, Osteoma, Osteoid Osteoma, Benign Osteoblastoma, Tori and Multiple Exostoses.
 - e. Tumour like lesions of connective tissue origin :
 - Peripheral & Central giant cell granuloma, Pyogenic granuloma, Peripheral ossifying fibroma
 - f. Malignant Tumours of Connective tissue origin:
 - Fibrosarcoma, Chondrosarcoma, Kaposi's Sarcoma Ewing's sarcoma, Osteosarcoma Hodgkin's and Non Hodgkin's Lymphoma, Burkitt's Lymphoma, Multiple Myeloma, Solitary Plasma cell Myeloma.
 - g. Benign Tumours of Muscle tissue origin :
- Leiomyoma, Rhabdomyoma, Congenital Epulis of newborn, Granular Cell tumor.
- h. Benign and malignant tumours of Nerve Tissue Origin
- Neurofibroma & Neurofibromatosis-1, Schwannoma, Traumatic Neuroma, Melanotic Neuroectodermal tumour of infancy, Malignant schwannoma.
- i. Metastatic Tumours of Jaws and Soft Tissues of Oral Cavity

2. Tumours of the salivary glands

(8 hrs)

Classification

- a. Benign tumours
- Pleomorphic adenoma
- Warthin's tumor
- Basal cell adenoma
- Canalicular adenoma
- b. Malignant tumors of the salivary glands
- Malignant pleomorphic adenoma
- Adenoid Cystic carcinoma
- Acinic Cell carcinoma
- Mucopepidermoid carcinoma
- Central Mucoepidermoid carcinoma
- Clear cell carcinoma
- c. Non Neoplastic enlargement of Salivary glands
- Sjogrens syndrome
- Mickulicz's disease
- Necrotising Sialometaplasia

3. Cysts of Odontogenic Origin & Pseudocysts

(8 hrs)

- Introduction and Classification of Cysts of Oral Region
- Odontogenic Cysts
- Odontogenic Keratocyst, Dentigerous Cyst, Dental Lamina Cyst of newborn, Gingival Cyst of adults, Lateral Periodontal Cyst, Calcifying Odontogenic Cyst, Radicular Cyst.
- Pseudocysts
- Aneurysmal bone cyst, Traumatic bone cyst, Mucous extravasation phenomenon

4. Tumours of Odontogenic Origin

(9 hrs)

- Classification

BENIGN:

- a. Odontogenic epithelium without Odontogenic ectomesenchyme- Ameloblastoma, Calcifying Epithelial Odontogenic Tumour, Adenomatoid Odontogenic Tumour, Squamous Odontogenic Tumor
- b. Odontogenic epithelium with Odontogenic ectomesenchyme with or without hard tissue formation-- Ameloblastic Fibroma, Ameloblastic Fibro-odontoma, Odontoma, Dentinogenic Ghost cell Tumor
- c. Odontogenic ectomesenchyme with or without included Odontogenic epithelium- Peripheral and Central Odontogenic Fibroma, Odontogenic Myxoma, Benign Cementoblastoma.

MALIGNANT

a. Odontogenic carcinomas : Metastasizing ameloblastoma, Ameloblastic carcinoma

5. Regressive alterations of teeth

(2 hrs)

- a. Attrition, abrasion, erosion, abfraction
- b. Dentinal sclerosis, dead tracts, secondary dentin, pulp calcifications
- c. Resorption of teeth (internal & external)
- d. Hypercementosis and Cementicles

6. Infections of the Oral cavity(10 hrs)

- a. Bacterial Infections: Scarlet fever, Diphtheria, Tuberculosis, Syphilis, actinomycosis, Tetanus. Noma.
- b. Viral Infections: Herpes Simplex, Measles, Mumps, Chicken Pox, Herpes Zoster, Cytomegalic Inclusion disease, H.I.V and Oral Manifestations of AIDS
- c. Fungal Infections: Candidiasis, Histoplasmosis, Phycomycosis and Rhinosporidosis.

7. Allergic and Immunological Diseases of the Oral cavity

(2 hrs)

- Immunological Diseases: Recurrent Aphthous Stomatitis, Bechet's Syndrome, Reiter's Syndrome, Sarcoidosis, Wegener's Granulomatosis
- Allergic Diseases: Angioedema, Stomatitis Medicamentosa, Stomatitis Venenata

8. Spread of Oral Infection

(2 hrs)

a. Cellulitis, Ludwig's Angina, Intra Cranial Complication of Dental Infection, Maxillary sinusitis, Focal Infection and foci of Infection (Definition, Mechanism and significance)

9. Physical and Chemical Injuries of the Oral Cavity

(5 hrs)

- a. Physical Injuries of Teeth
- Bruxism, Ankylosis
- b. Physical Injuries of Bone
- Traumatic Bone Cyst
- c. Physical Injuries of Soft tissues
- Traumatic Ulcer, Denture Injuries of the Mucosa, Mucous Retention Phenomena
- d. Chemical Injuries of Oral Cavity
- Aspirin Burn
- Lead, Mercury and Bismuth Poisoning
- Acrodynia
- Silver poisoning
- Dilantin sodium -induced gingival enlargement
- Tetracycline
- e. Effects of Radiation on bone and Oral Mucosa

10. Biopsy, Cytology and Healing of Oral Wounds(5 hrs)

- Factors affecting the healing of wounds
- Healing of Extraction Wound and Dry Socket
- Healing of Fracture
- Biopsy:
- Biopsy Techniques, Processing Of Tissues With A Brief Account Of Routine Stains Used, Healing Of The Biopsy Wound
- Basic Aspects of Cytology:
- Indications, Staining of Cytosmears, Interpretation of Cytosmears
- Re-Implantation and Transplantation of Teeth

11. Disease of Bone

(8 hrs)

- Genetic:
- Osteogenesis Imperfecta, Cleidocranial Dysplasia, Craniofacial Dysostosis, Mandibulofacial Dysostosis, Pierre Robin Anomalad, Marfan's Syndrome, Down's Syndrome, Osteopetrosis, Achondroplasia, Cherubism
- Fibro-Osseous Lesions
- Fibrous Dysplasia
- Cemento-osseous dysplasias
- Unknown Etiology:
- Paget's Disease, Histiocytosis-X-Disease
- Disorders of the Temproromandibular Joint:
- Developmental disturbances of the TMJ
- Ankylosis of the TMJ
- Subluxation and luxation
- Myofascial pain dysfunction syndrome

12. Blood Dyscrasias

(4 hrs)

 Clinico-pathological aspects and oral manifestations of Anemias, Polycythemia, Leukopenia, Neutropenia, Agranulocytosis, Chediak-Higashi Syndrome, Leukocytosis, Infectious mononucleosis, Leukaemias, Purpura, Haemophilia

13. Diseases of Periodontology

(5 hrs)

- Stains, Calculus, Dental Plaque
- Gingivitis, Acute Necrotizing Ulcerative Gingivitis (ANUG), Gingival hyperplasia, Periodontitis, Juvenile periodontitis

14. Diseases of Skin

(10 hrs)

- Hereditary:
- Hereditary Ectodermal Dysplasia, Chondroectodermal Dysplasia, Dyskeratosis Congenita, White Sponge Nevus, Hereditary Benign Intra Epithelial Dyskeratosis, Ehler-Danlos Syndrome
- Immune-mediated:

Lichen Planus, Pemphigus, Benign Mucous Membrane Pemphigoid, Cicatricial Pemphigoid,
 Psoriasis, Erythema Multiformae, Epidermolysis Bullosa, Scleroderma, Lupus Erythematosus

15. Defence Mechanisms of the Oral Cavity

(1 hrs)

16. Introduction to Forensic Odontology

(2hrs)

- Introduction, definition, aims & scope.
- Sex and ethnic (racial) differences in tooth morphology and histological age estimation
- Determination of sex & blood groups from buccal mucosa/ saliva
- Dental DNA methods
- Bite marks, rugae patterns and lip prints
- Dental importance of poisons and corrosives
- Overview of forensic medicine and toxicology

17. Oral Aspects Of Metabolic Disease:

(5 Hrs)

- Oral Aspects of Disturbances in Mineral Metabolism: Calcium, Phosphorus, Magnesium, Zinc, Fluorine, Iron
- Oral Aspects of Avitaminoses and Hypervitaminoses: Vitamin A, Vitamin D, Vitamin C, Vitamin

B complex

 Oral Aspects of Disturbances in Hormone Metabolism: Hypopituitarism, Hyperpituitarism, Hyperthyroidism, Hypothyroidism, Hypoparathyroidism, Hyperparathyroidism, Addison's disease, Cushing's Syndrome, Diabetes Mellitas

18. Diseases of Nerves:

(2hrs)

- Trigeminal neuralgia, Sphenopalatine neuralgia, Frey's Síndrome, Burning Mouth Síndrome

Oral Microbiology

(3 Hrs)

- 1. Normal Oral Microbial Flora
- 2. Microbiology of Dental Caries
- Streptococcus mutans, Lactobacillus acidophilus, Actinomyces israelii, Veillonella
- 3. Microbiology of Periodontal Diseases:
- Borrelia vincentii, Fusobacteria, Actinomycetes actinomycetum-comitans
- 4. Microbiology of Oral Infections:
- Bacteria: Mycobacterium tuberculosis, Treponema pallidum
- Viruses: Herpes group of viruses, Human immunodeficiency virus
- Fungi: Candida albicans

Practicals: 80 hours

- a. Identification of Hard and Soft Tissue Specimens
- b. Demonstration of Cytosmear and bacteriology smear
- c. Identification of Microscopic slides of Various Oral Lesions

Identification of the histopathologic slides of the following lesions:

- 1. Pit & fissure caries
- 2. Smooth surface caries
- 3. Dental caries liquefaction foci
- 4. Pulp polyp
- 5. Periapical granuloma
- 6. Dentigerous cyst
- 7. Radicular cyst
- 8. Cholesterol clefts / cholesterol crystals
- 9. Rushton bodies
- 10. Calcifying odontogenic cyst
- 11. Mucocele
- 12. Leukoplakia
- 13. Carcinoma-in-situ
- 14. Oral submucous fibrosis (h/e)
- 15. Fordyce's spots
- 16. Papilloma
- 17. Fibroma
- 18. Lipoma
- 19. Capillary hemangioma
- 20. Cavernous hemangioma
- 21. Lymphangioma
- 22. Schwannoma
- 23. Well differentiated squamous cell carcinoma
- 24. Moderately differentiated squamous cell carcinoma
- 25. Verrucous carcinoma
- 26. Malignant melanoma
- 27. Osteosarcoma
- 28. Pyogenic granuloma
- 29. Fibrous dysplasia
- 30. Ossifying fibroma
- 31. Paget's disease
- 32. Osteomyelitis (acute)
- 33. Osteomyelitis (chronic)
- 34. Peripheral giant cell granuloma
- 35. Central gaint cell granuloma
- 36. Ameloblastoma (follicular)
- 37. Ameloblastoma (plexiform)
- 38. Ameloblastoma (granular cell variant)
- 39. Adenomatoid odontogenic tumour
- 40. Cementoblastoma
- 41. Ameloblastic fibroma
- 42. Compound odontome
- 43. Pleomorphic adenoma, preferably with metaplastic areas
- 44. Warthin's tumour
- 45. Mucoepidermoid carcinoma (high grade)

- 46. Mucoepidermoid carcinoma (low grade)
- 47. Adenoid cystic carcinoma (pas)
- 48. Necrotizing sialometaplasia
- 49. Lichen planus with civatte bodies
- 50. Pemphigus
- 51. Tuberculosis
- 52. Actinomycosis
- 53. Candidiasis

ADDITIONAL TOPICS:

- 1. Ultrastructural features, Immunofluorescence techniques for muco-cutaneous lesions and viral infections
- 2. Basics of immunology
- 3. Different type of Microscopy used in the diagnosis of oral lesions
- 4. Syndromes

Scheme of Examination

A. Theory: 70 Marks

Distribution of Topics and Type of Questions

Contents	Type of Questions and Marks	Marks
Both questions from Oral Pathology only	Long Essays 02 x 10 marks	20
a. 6 questions on Oral pathology b. 2 questions on Oral microbiology	Short Essays 08 x 5 marks	40
a. 4 questions on Oral pathology b. 1 question on Oral microbiology	Short Answers 05 x 2marks	10
	Total	70

B. Viva Voce: 20 Marks

C. Internal Assessment - Theory: 10 Marks, Practicals: 10marks

D. PRACTICALS: 90 Marks

Spotters (total 15 spotters)

1. Specimen : Identification & Points in Support 6x5=30 marks

2. Slides: Slides, diagrams, Labelling & Salient features, 12 slides 12x5=60 marks

Text Books Recommended:

Name of the Book & Title	Author	Edn.	Publisher's Name and Place of Publication	Price
Oral pathology -Clinical Pathologic Correlation	Regezi & Scuiba	5th	W. B. Saunders Company USA, 2007	\$ 25
Shafer's Text Book of Oral Pathology	R. Rajendran B. Sivapathasundharam	6th	Elsevier, 2009	Rs. 876/-
Text Book of Oral and Maxillofacial Pathology	Neville, Damm, Allen, Bouquot	3rd	Elsevier, 2009	-
Essentials of Oral Microbiology	Lakshman P Samaranayake	3rd	Churchill Livingstone, 2006	\$ 86.95

Other suggested reading

- Sapp,Eversole ,Wysocki :Contemporary Oral And Maxillofacial Pathology, 3rd edition
 R B Lucas: Pathology of tumors of oral tissues, 5th edition
 Peter.A.Reichart, Hans P.Philipsen: Odontogenic tumors and allied lesions

- 4. Mervyn Shear, Paul M.Speigh: Cysts of oral and maxillofacial regions, 4th edition
- 5. S R Prabhu: Oral diseases of the tropics
- 6. Roitt, Lehner: Oral Immunology
- 7. Russel J Nisengard, Michael G Newman: Oral Microbiology & Immunology, 2nd edition
- 8. John Eveson, Crispian Scully: Colour atlas of oral pathology

III BDS ORAL MEDICINE AND RADIOLOGY

THEORY: 20 HOURS PRACTICALS: 70 HOURS

MUST KNOW

III YEAR ORAL MEDICINE THEORY: 12 HOURS

Introduction to Oral Medicine- Definition Scope and Clinical Applications	1 hour
 Principles of oral diagnosis Definitions. Importance of diagnosis and various types of diagnosis Case history and components. Physical examination methodologies - general examination, extra oral & neck examination , intra oral examination Concepts of provisional diagnosis, differential diagnosis. Clinical chair side investigations and radiological investigations, exfoliative cytology; hematological, microbiological, histopathological investigations. Special investigationsbiochemical, sialochemical studies, serology, immunological studies. Final /confirmed diagnosis. Formulation of treatment plan & prognosis Referral for opinions. 	3hour
Examination of swelling, ulcer, erosions, sinus, fistula, pigmented lesions, red and white mucosal lesions, pain, TMJ, and lymphnodes Procedures for post-mortem dental examination; maintaining dental records and their use in dental practice and post mortem identification; jurisprudence and ethics.	
Regressive alterations of teeth, Developmental malformations, discoloration of teeth.	1 hour
Priniciples, procedures, and protocol for asepsis, sterilisation, infection control.	1 hour
Oral sepsis and its effect on general system. Inflammation- injury, infection and spread of infection, facial space infections, osteoradionecrosis.	1 hour
6. Periapical Diseases, And Diseases Of Dental Pulp, Diagnosis Of Dental Caries, Periodontal Diseases Such As Gingival Hyperplasia, Gingivitis, Periodontitis, Pyogenic Granuloma	1 hour
7. Differential diagnosis of orofacial pain: i. Pain arising from diseases of orofacial tissues like teeth, pulp, gingival and periodontal tissues, mucosa, tongue, muscles, blood vessels, lymph nodes, bone, paranasal sinuses, salivary glands etc.	2 hour

ii. Pain arising due to CNS diseases: pain due to intracranial and extracranial involvement of cranial nerves. (multiple sclerosis, cerebrovascular diseases, trotter's syndrome etc.). Neuralgic pain due to unknown causes: trigeminal neuralgia, glossopharyngeal neuralgia, sphenopalatine ganglion neuralgia, periodic migrainous neuralgia and atypical facial pain. iii. Referred pain: pain arising from distant tissues & organs like heart, spine	
Neuromuscular disorders: i. Nerves:(a) neuropraxia, (b) neurotemesis (c) neuritis (d) facial nerve paralysis including Bell's palsy, Heerfordt's syndrome, Melkerson Rosenthal syndrome and Ramsay Hunt syndrome (e) neuroma (f) neurofibromatosis (g) Frey's syndrome. ii. Muscles: (a) Myositis ossificans (b) Myofacial pain dysfunction syndrome (c) trismus.	
8. Orofacial Pigmentation: Exogenous And Endogenous Pigmentations	1 hour
9.Pharmcotherapeutics: General therapeutic measures- drugs commonly used in oral medicine viz. Antibiotics, chemotherapeutic agents, anti-inflammatory and analgesic drugs, corticosteriods, antiviral drugs, antifungal drugs, a ntituberculardrugs, a ntituberculardrugs, a ntituberculardrugs, a ntituberculardrugs, sialogogues, antisialogogues.	1 hour

III BDS ORAL MEDICINE AND RADIOLOGY

Radiology III YEAR THEORY : 8 Hours

Introduction to Oral Radiology -History, origin, Definitions, scope & limitations.	1 hour
Basic physics in radiology Radiographic equipment Radiographic accessories (film holders, beam directional devices, intensifying screens, extra oral cassettes, grids etc.) Radiographic image receptors	1 hour
Factors responsible for ideal radiographs: i. KvP and ma of X-ray machine ii. Filters iii. Collimations iv. Intensifying screens v. Grids Faulty radiographs and artefacts in radiographs.	
Production of X rays (dark room procedures, composition of developer fixer, safe lighting, processing technique- manual/ automatic, storage of films)	1 hour
Properties of X rays Sources of radiation. Electromagnetic spectrum & types of radiation Electro physical factors Collimation, Filtration Films Principles of Shadow Casting Projection Geometry Object localization techniques	2 hour
Principles of Intra oral Radiography, techniques, indications of - IOPA Bitewing, Occlusal radiography - lecture	1 hour
4. Radiographic interpretation - I - Principles, procedures Normal radiographic landmarks of jaws & adjacent structures Radiographic interpretations & differential diagnosis in dental caries periodontal diseases, periapical disease	2 hour

III BDS ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

Course Details - III Year B.D.S and IV Year B.D.S

TEACHING HOURS:

Mode of Teaching	III Year B.D.S	IV Year B.D.S
Theory	20 Hours	30 Hours
Clinical	70 Hours	100 Hours
Total	90 Hours	130 Hours

III YEAR B.D.S - COURSE SYLLABUS:

Subject	Hours
Introduction, Definition, Historical Background, Aims and Objectives of Orthodontics and Need for Orthodontic care.	1 Hour
2. Growth and Development: In General a. Definition b. Growth spurts and Differential growth c. Factors influencing growth and development d. Methods of measuring growth e. Growth theories (Genetic, Sicher's, Scott's, Moss's, Petrovics, Multifactorial) f. Genetic and epigenetic factors in growth g. Cephalocaudal gradient in growth Morphologic Development of Craniofacial Structures a. Methods of Bone growth b. Prenatal growth of craniofacial structures c. Postnatal growth and development of: cranial base, maxilla, mandible, dental arches and occlusion	6 Hours
Functional Development of Dental Arches and Occlusion a. Factors influencing functional development of dental arches & occlusion b. Forces of occlusion c. Wolfe's law of transformation of bone d. Trajectories of forces Clinical Application of Growth and Development	2 Hours
Malocclusion - In General a. Concept of normal occlusion	3 Hours

b. Definition of malocclusion c. Description of different types of Dental, skeletal and functional malocclusion Classification of Malocclusion Principle, description, advantages and disadvantages of classification of malocclusion by Angle and modification, Simon, Lischer and Ackerman and Proffitt.	
5. Normal and Abnormal Function of Stomatognathic System	1 Hour
6. Aetiology of Malocclusion a. Definition, importance, classification, local & general aetiological factors b. Etiology of following different types of malocclusion i. Midline diastema ii. Spacing iii. Crowding iv. Cross-Bite: Anterior / Posterior v. Class III Malocclusion vi. Class II Malocclusion vii. Deep Bite viii. Open Bite	3 Hours
7. Diagnosis and Diagnostic Aids a. Definition, Importance and classification of diagnostic aids b. Importance of case history and clinical examination in orthodontics c. Study Models: - Importance and uses - Preparation and preservation of study models d. Importance of intraoral X-rays in orthodontics e. Panoramic radiographs - Principles, Advantages, Disadvantages and uses f. Cephalometrics: Its advantages and disadvantages i. Definition ii. Description and use of cephalostat iii. Description and uses of anatomical landmarks lines and angles used in cephalometric and analysis iv. Analysis - Steiner's, Down's, Tweed's. Ricket's E-line g. Electromyography and its use in orthodontics h. Wrist X-rays and its importance in orthodontics	4 Hours

CLINICALS AND PRATICALS IN ORTHODONTICS DURING III B.D.S - 70 Hours

PRATICAL TRAINING DURING III B.D.S

- 1. Basic wire bending exercises Gauge 22 or 0.7mm
 - a. Straightening of wires (4 Nos)
 - b. Bending of equilateral triangle
 c. Bending of a rectangle
 d. Bending of a square
 e. Bending of a circle

- f. Bending of U.V.
- 2. Construction of Clasps (upper / lower) Gauge 22 or 0.7mm
 - a. 34 clasp (C-Clasp)
 - b. Full clasp (Jackson's Crib)
 - c. Adam's Clasp
 - d. Triangular Clasp
- 3. Construction of Springs (On upper both sides) Gauge 24 or 0.5mm
 - a. Finger Spring
 - b. Single Cantilever Spring
 - c. Double Cantilever Spring (Z-Spring)
 - d. T-Springs on premolars
- 4. Construction of Canine retractors Gauge 23 or 0.6mm
 - e. U loop canine retractor (Upper and lower)

 - f. Helical canine retractor (Upper and lower)
 g. Buccal canine retractor: Self supported Buccal canine retractor with
 i. Sleeve 5mm wire of 24 Gauge

 - ii. Sleeve 19 Gauge needle on any one side
 - h. Palatal canine retractor on upper both sides Gauge 23 or 0.6mm
- 5. Labial Bow
 - i. Gauge 22 or 0.7mm
 - j. One on both upper and lower

CLINICAL TRAINING DURING III B.D.S

- 1. Making upper Alginate impression
- 2. Making lower Alginate impression
- 3. Study model preparation
- 4. Model Analysis
 - a. Pont's Analysis
 - b. Ashley Howe's Analysis
 - c. Carey's Analysis
 - d. Bolton's Analysis
 - e. Moyer's Mixed Dentition analysis
 - f. Hakhoba's Analysis

III BDS PEDIATRIC AND PREVENTIVE DENTISTRY

Teaching hours: Theory: 65 Hours,

Pedodontics and Preventive Dentistry Lectures

Practicals/Clinics: 170 Hours

III Year: 70 Hours IV Year: 100 Hours

Theory

III Year: 20 Hours IV Year: 45 Hours

III YEAR PEDODONTICS AND PREVENTIVE DENTISTRY: 20 HOURS

	(4)
Introduction to Pediatric and Preventive Dentistry Definition, Scope, Objectives and Importance	1hours
Growth and Development(will be covered by department of orthodontics also) Importance of study of growth and development in Pedodontics Prenatal and postnatal factors in growth and development Theories of growth and development Methods to measure growth Development of maxilla and mandible and age related changes	2 hours
3. Development of Occlusion from birth to adolescence - Mouth of neonate, gumpads - Primary dentition period - Mixed dentition period - Establishment of occlusion - Study of variations and abnormalities	2 hours
4. Dental Anatomy and Histology - Chronology of eruption of teeth - Differences between primary and permanent teeth - Eruption disorders and their management including teething, ectopic eruption, ankylosis - Importance of first permanent molar	2 hours
Dental Caries Diagnostic procedures and caries detection Caries pattern in primary, young permanent and permanent teeth Early childhood caries, rampant caries-definition, classification, etiology, pathogenesis, clinical features, complications and management	3 hours

 Role of diet and nutrition in dental caries & sugar substitutes Diet counselling and dirtart modifications Caries activity tests, caries prediction, susceptibility and their clinical application 	
Dental materials used commonly in children and adolescents (outline revision)	1 hour
Case history recording Principles of history taking, examination, investigations, diagnosis and treatment planning	1 hour
8. Pediatric operative dentistry - Principles of operative dentistry - Isolation-importance and techniques - Modifications in cavity preparation and recent cavity designs for primary and young permanent teeth - Atraumatic/ Alternative Restorative Technique (ART) - Other methods of caries removal - Restoration of carious teeth (primary, young permanent and permanent teeth) using various restorative materials like glass ionomers, composites, silver amalgam - Preformed crowns: stainless steel, polycarbonate and strip crowns	5 hours
9. Gingival and periodontal diseases in children - Normal gingival and periodontium in children - Definition. Classification - Aetiology, pathogenesis and management of giggival and periodontal conditions seen in children and adolescents	2 hours
10. Dental radiology as related to Pedodontics	1 hour

III BDS ORAL AND MAXILLOFACIAL SURGERY

Total Thoery Teaching hours : 70 hours Total Practicals/ Clinicals: 270 hours

III year : 20 hours Theory , 70 Clinical hours IV year : 50 hours Theory , 200 Clinical hours

III year BDS Theory: 20 hours

Lesson No	Topic	Details of the Topic	Duration
1.	Introduction	Definition, Aims & objectives of Oral surgery	1 hour
2.	Diagnosis in oral surgery	History Taking	
		Clinical Examination	2 hour
		Investigations	
3.	Infection control	Principles of infection control Cross infection , HIV/AIDS and hepatitis	1 hour
4.	Local Anaesthesia	Neurology of facial pain Historical aspects, definition, types of LA, indications, contraindications, advantage and disadvantage. Local anaesthetic drugs, Classification Ideal requirements of LA solutions, composition and mode of action Choice of particular mode of anaesthesia Complications of LA, prevention and management. Anaesthesia technique- Mandible Anaesthesia technique- Maxilla	5 hours 2 hours 2 hours
5.	Exodontia	Introduction, indications, contra indication	1 hours
		Methods of extraction	1 hours
		Use of instruments and complications – Prevention and management	2 hours
6.	Medical Emergency		
7.	Medical Compromised Patients		3 hour
		Total	20 hours

Text Books:

Alling John F et al	Impacted teeth
Peterson L J et al	Principles of Oral and Maxillofacial Surgery Vol 1,2 & 3
Srinivasan B	Textbook of Oral and Maxillofacial Surgery
Malamed S F	Handbook of medical emergencies in the dental office
Banks P	Killey's fracture of mandible
Banks P	Killey's fracture of middle third of the facial skeleton
McGovanda	The Maxillary sinus and its dental implication
Seward G R et al	Killey and Kays outline of oral surgery Part I
Mc Carthy F M	Essentials of safe dentistry for the medically compromised patients
Laskin D M	Oral and Maxillofacial Surgery
Howe G L	Extraction of teeth
Howe G L	Minor oral surgery
Peterson I J et al	Contemporary Oral and Maxillofacial Surgery
Topazian R G & Goldberg M H	Oral and Maxillofacial infections

Practical and Clinicals hours

III year BDS : 70 clinical hours. Students are required to learn the following exercises:

Case history taking
Examination of the patient
Recording blood pressure
Use of different instruments in Oral & Maxillofacial surgery
Various local anaesthetic injection techniques on patients

Practical and Clinicals Quota

Year	Clinical exercises	Quota	Category
III year BDS:			
	Various local anaesthetic injection techniques on patients	10 cases	must do
	Wiring techniques on models	1 exercise	must do
	Suturing techniques on models.	1 exercise	must do

III BDS PROSTHODONTICS, CROWN AND BRIDGE INCLUDING IMPLANTOLOGY

Teaching Hours:

Clinical: III year: 70 hours IV year: 300 hours

Theory: III year: 30 hours IV year: 80 hours

III year Prosthodontics Theory: 30 hours

1. Introduction 1 hour a. Terminology - Definitions - History - Scope in Prosthodontic therapy b. Stomatognathic system, Craniomandibular system (Masticatory apparatus) c. Components of masticatory apparatus - Functions d. Applied Anatomy. Histology & Physiology of the components of mandibular system. e. Applied growth and development including genetics, immunity. f. Reasons for loss of teeth and associated structures. g. Clinic and laboratory - facilities for Prosthodontic therapy (Equipments, instruments, materials). h. Prosthodontic therapy for diseases of craniomandibular system. i. Asepsis and cross infection control in clinic and laboratory. Hospital laboratory waste disposal system and management. Physiology, nutrition, occlusion, occlusal curves, vertical overlap, horizontal overlap, condylar path, saliva, pain and other reflexes. Neuro muscular mechanism and applied psychiatry medicine **COMPLETE DENTURE PROSTHESIS** 2. BIOMECHANICS OF THE EDENTULOUS STATE 2 hours Mechanism of tooth support Mechanism of complete denture support Masticatory load Mucosal support Residual ridge Psychologic effect on retention Functional and Para functional considerations Occlusion Functions: Mastication & swallowing

Mandibular movements Para-functions Distribution of stresses to the denture supporting tissues, changes in morphological face height and the temporomandibular joint Face height Centric relation Temporomandibular joint changes Individual behavioral or adaptive response Cosmetic changes Dietary changes Adaptive and psychological changes Adaptive potential of the patient	
3. Tissue response to complete denture prosthesis in the aging edentulous patient Soft tissue changes. Soft tissue hyperplasia Denture stomatitis Treatment of denture stomatitis Denture sore mouth	1 hour
4. Effects of aging Oral changes Mucosa and skin Residual bone and the Maxillo-mandibular Relation Disuse atrophy Changes in the size of the basal seat Maxillo-mandibular relations- Tongue and taste Salivary flow and nutritional impairment- Degenerative changes. Dietary problems Psychologic changes	1 hour
5. Preparing the patient for complete denture prosthesis	1 hour
6. Diagnosis and treatment planning for patient with some teeth remaining Diagnostic procedures History and records Immediate complaints Systemic evaluation - CVS, respiratory, Renal, Endocrines, CNS and other systemic conditions Temporomandibular joint disorders Intra Oral examination Diagnostic cast Interarch space problems Radiographs & other investigations	3 hours

Treatment plan

Deciding whether to extract the remaining teeth

Pre extraction record

The patient recently made edentulous

New Problems of the recently edentulous patient

The patient's concept of the permanence of dentures

The patient edentulous for a long time

Mental attitudes & classification

The House classification: Philosophic

Indifferent

Critical

Skeptical

Application of the house classifications

Desires and expectations

7. Diagnosis of patient with no teeth remaining

Examination charts and records

General observations affecting diagnosis

- age, sex, occupation, ethnic
- general health & nutrition
- social training
- patient complaints
- gait
- lip support
- lip thickness
- lip length
- lip fullness
- profile and contour of features
- tone of the facial tissues
- vertical face length

Radiographic and intraoral examination

- advantages of a radiographic examination
- intra oral examination
- color, resiliency and attachments of the mucosa
- abrasions & ulcers
- pathoses
- the maxillary basal seat
- torus palatinus
- adhesions
- The mandibular basal seat
- Arch size

Disharmony in jaw sizes

Ridge form

Ridge relations

Arch shape

Sagittal profile of the residual ridge

Shape of the palatal vault

Relation of the hard and soft palate

2 hours

Muscular development Saliva Checks and lips Muscle tonus Muscular control Jaw movements Temporomandibular joint problems Tongue size and position Throat form Gagging 8. Development of treatment plan 1 hour Communicating with the patient - Nutrition care of the denture patient - Nutritional needs and status of the elderly - Impact of wearing dentures on dietary intake - calcium and bone health - vitamin supplementation - Nutrition counseling 9. Identification and management of the patient with problems 1 hour Basic rules to follow to avoid problems - Conduction of the comprehensive examination - Correctional procedures prior to making prosthesis - Patient behavior characteristics observed during the exam nation appointment that may indicate future management problems - Disrupting regular office routine - Overreacting to normal examination procedures - Downgrading or criticizing treatment provided by a previous dentist Refusing to divulge the name of a previous dentist or dentists Not having paid for previous dental care Dissatisfaction with existing prosthesis that does not coincide with you evaluation of the prosthesis Numerous sets of prostheses made in a short time(for example, / three in two years) Unrealistic desires to change facial appearance Recent major catastrophe in the immediate family(such as a death, divorce, or severe illness) Legal action pending with the former dentist History of severe gagging and inability to wear prosthesis Crying during discussion of previous dental experience Evidence of excessive smoking Evidence of severe bruxing and/or clenching Restlessness in the dental chair When and how to refer the patient to a specialist for treatment Background information Procedures

10. Use of Consultation Report Contents of the Report Economics of prosthodontic service Improving the patient's denture foundation and ridge relations Nonsurgical Methods Rest for the prosthesis supporting tissues Occlusal and vertical dimension correcting of old prostheses Good nutrition and Conditioning of the patient's musculature Surgical Methods correcting conditions that preclude optimal prosthetic function Hyperplastic ridge, epulis fissuratum, and papillomatosis Frenular attachments and pendulous maxillary tuberosities Bony prominences, undercuts, spiny ridges, and nonparallel bony ridges Discrepancies in jaw size Pressure on the mental foramen Enlargement of denture-bearing areas Vestibuloplasty Ridge augmentation Replacing tooth roots by Osseo integrated dental implants Management of remaining teeth and pulp for over dentures	3 hours
11. Rehabilitation of the Edentulous Patient Biologic considerations for Maxillary Impressions Macroscopic Anatomy of Supporting Structures - support for the maxillary denture - Residual ridge - Stress-bearing areas - incisive papilla - posterior palatal area - bone of the basal seat Macroscopic Anatomy of Limiting Structures - Resistant and non resistant areas (Peripheral valvular sealing area of a prosthesis) - Labial frenum - Orbicularis oris - Buccal frenum - Buccal vestibule - Pterygomaxillary notch - Palatine fovea region - Vibrating line of the palate Microscopic anatomy - Histologic nature of soft tissue and bone - Microscopic anatomy of limiting structures	2 hours
Clinical considerations of microscopic anatomy Maxillary Impression Procedures Principles and objectives of Impression making	2 hours

Factors of retention of Dentures

Physical factors

- Adhesion
- Cohesion
- Interfacial surface tension
- Capillary attraction
- Atmospheric pressure

Anatomic factor

Mechanical factors

Acquired muscular control

Oral and facial musculature

Balanced occlusion

Health of the basal seat tissues

- Inflammation of the mucosa
- Distortion of the denture-foundation tissues
- Excessive amounts of hyper plastic tissue
- Degeneration of mucous membrane
- Insufficient space between the upper and lower ridges

Impressions for the edentulous patient

Primary impression-Patients position, operators position, stock trays, materials & step by step procedure for making primary impression

- Impression trays-special trays and design for final impression
- Final impression materials

Impression techniques

- First technique-border molded special tray
- Second technique-one step border molded tray
- Third technique-custom tray design based on the previously worn prosthesis

13. Biologic considerations for mandibular impressions

Sequelae of tooth loss

Macroscopic Anatomy of the supporting structures

- Crest of the residual ridge
- Buccal flange area and the buccal shelf
- flat mandibular ridges
- bone of the basal seat
- stages of change in the mandible
- mylohyoid ridge
- throat form and tongue positions
- mental foramen area resorption
- insufficient space between the mandible and the tuberosity
- low mandibular ridges
- direction of ridge resorption
- torus mandibularis

Macroscopic Anatomy of Limiting Structures

Buccal and labial borders

Buccal vestibule

External oblique ridge and the buccal flange

2 hours

Masseter muscle region Distal extension of the mandibular impression Retromolar region and pad Lingual borders Influence and action of the floor of the mouth Mylohyoid muscle and mylohyoid ridge Sublingual gland region Direction of the lingual flange Alveololingual sulcus Lingual frenum and lingual notch Lingual flange Microscopic Anatomy Supporting tissues - crest of the residual ridge - buccal shelf	
14. Mandibular Impression procedures Classification of Mandibular Impressions Aims and objectives, and theories of impression making - selective pressure impressions - pressure less impressions Construction Procedures - First technique-selective pressure mandibular impression border-molded special tray - Second technique-selective pressure mandibular impression-one step border- molded tray - Third technique-selective pressure Mandibular impression custom design based on the previously worn prosthesis	
15. Biologic considerations in jaw relations and jaw movements Anatomic factors Temporomandibular Articulation Classification of Jaw relations - orientation relations Face bow - Vertical relations - Horizontal relations	2 hours
16. Movements of mandible practical significance of understanding mandibular movements methods of studying mandibular movements factors that regulate jaw motion influence of opposing tooth contacts influence of tempormandibular joints axes of mandibular rotation muscular involvement in jaw motion clinical understanding of mandibular movement	1 hours

17. Biological considerations in vertical jaw relations Anatomy and Physiology of Vertical jaw Relations Establishment of the vertical maxillomandibular relations for complete den prosthesis Methods of determining the vertical dimension - Mechanical methods	1 hour ture
 Physiologic methods Tests of vertical jaw relations with the occlusion rims 	
18. Biological considerations in horizontal jaw relations Muscle involvement in centric relations Harmony between centric relation and centric occlusion Orienting centric relation to hinge axis Orienting centric relation and vertical relations Significance of centric relation Recording centric relation - Methods of recording centric relation Graphic, static, functional & cephalometric - Extraoral tracing and devices - Intraoral tracing devices - Interocclusal centric relation records	1 hour
19. Recording and transferring bases and occlusion rims Trial denture base, or recording base Occlusion rims Guide for esthetics - Central line, lip line, canine line, smile line level of the occlusal plane preliminary centric relations records	2 hours

III BDS PERIODONTOLOGY

Knowledge:

- To have adequate knowledge and understanding of the etiology, pathophysiology, diagnosis & treatment planning of various periodontal problems.
- To have understood the periodontal surgical principles like pre and post surgical management of periodontal diseases.
- Essential knowledge of personal hygiene and infection control, prevention of cross infection and safe disposal of hospital waste keeping in view the high prevalence of infectious disease

Skills

- To obtain proper clinical history, examination of the patient, perform diagnostic procedures and order essential laboratory tests and interpret them and to arrive at a provisional diagnosis about the periodontal condition.
- To perform with competence various periodontal nonsurgical procedures. To treat non-surgically the various periodontal diseases.

Attitude:

- Periodontal surgical care is to be delivered irrespective of the social status, caste, creed or religion
 of the patient.
- Willing to share the knowledge and clinical experience with professional colleagues.
- Respect patient right and privileges, including patients right to information and right to seek a second opinion.

 Develop attitude to seek opinion from an allied medical and dental specialists as and when required.

Communicative Skills and Ability:

- Develop adequate communication skills particularly with the patients giving them the various options available to manage a particular periodontal problem and obtain a true informed consent from them for the most appropriate treatment available at that point of time.
- Develop the ability to communicate with professional colleagues.
- Develop ability to teach undergraduates, present seminars and develop leadership skills

Teaching Hours: Theory: 80 Hours (III BDS-30 Hours, IVBDS- 50 Hours)

SI. No.	Topic	Expected to know	Hours
1.	Introduction	Definition of Periodontology, Periodontics Periodontia. Brief historical background Scope of Periodontics	1
2.	Gingiva	Development , Structure , morpholog y histopathology of gingival tissues, functions.	2
3.	Tooth supporting structures	Periodontal ligament, cementum and alveolar bone: functions, histology, development	2
4.	Periodontal instrumentation	Sonic, Ultra sonic instrumentation gingival irrigation manual instrumentation	1
5.	Defense mechanism in the oral cavity	Role of Epithelium; Gingival crevicular fluid; Saliva and other defensive mechanisms in the Oral environment	2
6.	Age changes in periodontal structures & their significance in. geriatric dentistry	Age changes in teeth and Periodontal Structures, their association	1
7.	Plaque control	a. Mechanical- tooth brushes, interdental cleansing aids, dentifrices. b. Chemical – Classification and mechanism of action of each, pocket irrigation.	2
8.	Gingivitis	Plaque associated, ANUG ,steroid, hormone influenced, Medication influenced, desquamative gingivitis, gingivitis, other forms of gingivitis as in nutritional deficiency, bacterial and viral infections etc.	2

10.	Gingival Diseases	Localised & generalize diseases gingivitis. Papillary, marginal and diffused gingivitis. Etiology, pathogenesis clinical signs, symptoms and management of-Plaque-associated gingivitis Systemically aggravated gingivitis (Sex hormones, Drugs and systemic diseases) Necrotizing ulcerative gingivitis Desquamative gingivitis associated with Lichen planus, Pemphigoid pemphigus and other Vesic ulob ullous lesions. Allergic gingivitis Infective gingivitis - Herpetic, bacterial and candidial, pericoronitis. Gingival diseases in childhood	2
11.	Gingival enlargement	Types of Gingival enlargement (Classification and differential diagnosis)	2
12.	Epidemiology of Periodontal disease	Definition of index, Incidence, Prevalence. Classification of indices.(Irreversible & reversible) Deficiencies of earlier indices used in Periodontics Detailed understanding of Sillness & Loe Plaque index, Loe and Sillness gingival index, CPITN & CPI.Prevalence of periodontal diseases in India and ther countries. Public Health significance (All these topics are covered at under community dentistry. Hence the topics may be discussed briefly however; questions may be asked from the topics for examination).	2
13.	Extension of inflammation from gingiva	Mechanism of spread of Inflammation from Gingival to deeper periodontal structures. Factors that modify the spread	1
14.	AIDS and periodontium	AIDS and periodontium	1

Various chemotherapeutic agents used in periodontal therapy

1

9.

Chemotherapeutic

agents

15.	Etiology of Periodontal diseases	Dental Plaque (Biofilm)Definition, Types, composition; Formation: Bacterial colonisation, Growth& maturation, Disclosing agents. Role Of dental plaque in Periodontal disease Plaque microorganisms in detail Bacteria associated with periodontal diseases. Plaque retentive factors, Materia alba, Food debris, Food impaction: Definition, Types, Etiology Hirschfelds classification, Signs, symptoms & sequelae. Treatment.	2
16.	Calculus	Role of Dental calculus in disease. Definition, Types, composition, attachment, theories of formation	1
17.	Dentinal hypersensitivity	Causes, theories and management.	1
18.	Habits	Their Periodontal significance. Bruxism & parafunctional habits, Tongue thrusting, mouth breathing, lip biting, occupational habits.	1
19.	latrogenic factors.	Conservative Dentistry- Restorations. Contact point, marginal ridge, surface roughness, overhanging restorations, interface between restoration and teeth . Prosthodontic Interrelationship-Bridges and other prosthesis, Pontics (types),surface contour, relationship of margins to the Periodontium . Orthodontics - Interrelation- Retention of plaque, bacterial changes.	1
20.	Systemic diseases	Diabetes, Sex hormones, Nutrition (Vitamins & Proteins)Hemorrhagic disease, Leukemia, Clotting factor disorder. Platelet disorders. PMN disorders	2

Tutorial (During Clinical Posting)

- 1. Infection control
- 2. Periodontal instruments
- Periodonial institutions
 Chair position and principles of instrumentation, Maintenance of instruments
 Basic tissues: Gingiva, periodontal ligament, cementum, alveolar bone.
 Plaque control: mechanical amd chemical

- 6. Motivation of patient oral hygiene instructions

Desirable to Know

- 1. Histochemistry of periodontal tissues
- 2. Masticatory apparatus and functions
- 3. Immunology- current concepts of host response
- 4. Applied periodontal microbiology5. Advanced diagnostic techniques
- 6. Regeneration

Teaching Hours: Theory - 80 Hours III BDS - 30 Hours; IV BDS - 50 Hours

Clinical work and case discussion (III BDS & IV BDS)

25 Detailed Case History And Discussion	75 Hours
50 Oral Prophylaxis	150 Hours
Demonstration of all Surgical Procedures	30 Hours
Maintenance Therapy	30 Hours
Total	285 Hours

Recommended Books

Name of the Book & Title	Author	Edn.		Publisher's Name and Place of Publication
Standard Book Carranza and Newman	Clinical Periodontology	10th	2007	SB saunders Company
Recommended Books Robert Genco. Henry. M.Goldman D.Walter Cohen	Contemporary Periodontics	6th		C.V.Mosby Company St. Louis
Jan Lindhe, T.Karring, N. P Lang.	Clinical Periodontology & Implant Dentistry	5th	1997	Munksgaurd Copenhagen
Grant Strern. Listgarten	Periodontics	6th	1998	Mosby CBSn Publishers Indian Edition
S. P Ramfjord M. M. Ash.	Periodontology and Periodontics Modern Theory and Practice		1996	AITBS Publishers, India
T. ITO J. D. johnson	Colour Atlas of Periodontal Surgery			Mosby & Wolfe. U.S.A
Cohen	Atlas of Periodontal Surgery			C. V. Mosby Company U.S.A
Glickman	Manual of periodontal instruments		1990	W.B. Saunders and co
Wilson and Kornman	Fundamentals of periodontics	2cnd	2003	Quintessence publishing

III BDS CONSERVATIVE DENTISTRY AND ENDODONTICS

Minimum Working hours for each subject of study (BDS course)

Year	Lecturer Hours	Clinical Hours	Total Hours
III year BDS:	30	70	100
IV year BDS:	80	300	380

III year

Sl.No	Subjects	Hours
1	Nomenclature Of Dentition: Tooth numbering systems A D A,Zsigmondy Palmer-and FDIsystems	1 hour
2	Gnathological Concepts Of Restoration: Physiology Of occlsion, normal occlusion, Ideal occlusion, Mandibular movements and occlusal analysis. Contours and contacts	2 hours
3	Dental Cariers: Aetiology,Classification.Clinical features,morphological features, Microscopic features,clinical diagnosis and sequel of dental caries	3 hours
4	Preventive measures in restorative practice: Plaque Control Pit and fissure sealants, dietary measure restorative Procedure and periodontal health	2 hours
5	Armamentarium for cavity preparation- Hand cutting instruments Terminology and classification Applications Designs, formula and sharpening of instruments. Rotary cutting instruments Dental bur Mechanism of cutting, Common design characteristics Diamond abrasive and other abrasive instruments Cutting mechanism Hazards and precautions	2 hours

6	Isolation of operating field Purpose and methods of isolation	2 hours
7	Infection control Routes of transmission of dental infection Personal barrier protection Control of onfection from aerosol and spatter sterilization procedure for Operatory Dental water line contamination and biofilm Disposal of wastes	3 hours
8	Patient assessment, examination, diagnosis, and treatment planning Patients and operator position	3 hours 1 hour
9	Principles of Cavity dentistry- Steps and nomenclature of Cavity preparation classification of cavities	1 hour
10	Pain control in operative dentistry	1 hour
11	Matricing and tooth separation	2 hours
12	Amalgam Resolution- Indication, contraindication Advantages, disadvantages Cavity preparation for class I,IIV Step wise procedure for cavity Preparation and restoration including modifies designs Bonded amalgams, failure and repair of amalgam restorations	5 hours
13	Hypersensitivity of dentin Theories of hypersensitivity management	1 hour

III BDS PUBLIC HEALTH DENTISTRY

Theory:15 Hours Clinical/Practical:50

MUST KNOW Syllabus:

l No.	Topic	No.of hours	Year of study
Iistory	Dentistry, Scope, aims and objectives of Dentistry.	4	III BDS
	Public Health:		
&	i. Health & Disease: - Concepts, Philosophy, Definition Characteristics	5	
ublic	ii. Public Health: - Definition & Concepts, History of health	4	
	iii. Dentist Act 1948 with amendment. Dentist Council of India and state Dental Councils Composition and responsibilities.	1	
	iv. Indian Dental association Head Office,State and local branches	1	

PRACTICALS/CLINICALS/FIELD PROGRAMMES IN PUBLIC HEALTH DENTISTRY

These exercises designed to help the student in III year:

- 1. To Understand the community aspects of dentistry
- 2. To take up leadership role in solving community oral health programme
- 3. To gain hands on experience on research methodology.

Exercises: III BDS

. No.	Торіс	Year of stu
1 Short torm	a receased preject. Enidemiology & Advancey	15 hrs
	n research project: Epidemiology & Advocacy	
	pply the theory and practice of epidemiology, planning and evaluation,	
	dental public health. Most of the students are unfamiliar with research	
	this short term project which will be divided across 2 years	
[IV & V BDS		
	ess this issue.	
	on the topic chosen student can incorporate	
	of statistical data (demographic) on population in India, birth rates,	
•	and mortality, literacy, per capita income	
	and prevalence of common oral diseases like dental caries,	
•	al disease, oral cancer, fluorosis at national and international levels.	
 Oral healt 	h status assessment of the community using indices and WHO basic	
oral health	n survey methods collection.	
2. Field visits		20 hrs
	mary health centre-to acquaint with activities and primary health	20 hrs
Visit to princare deliv	mary health centre-to acquaint with activities and primary health	20 hrs
Visit to prince care delivered. Visit to wa	mary health centre-to acquaint with activities and primary health very	20 hrs
Visit to prince care delivityVisit to was of wester	mary health centre-to acquaint with activities and primary health very ter purification plant/public health laboratory/ centre for treatment	20 hrs
Visit to princare delivingVisit to was of westerVisit to ins	mary health centre-to acquaint with activities and primary health very ter purification plant/public health laboratory/ centre for treatment in and sewage water	20 hrs
Visit to princare delivingVisit to was of westerVisit to ins	mary health centre-to acquaint with activities and primary health very ter purification plant/public health laboratory/ centre for treatment n and sewage water titution for the care of handicapped, physically, mentally, or	20 hrs
Visit to princare delivingVisit to was of westerVisit to ins	mary health centre-to acquaint with activities and primary health very ter purification plant/public health laboratory/ centre for treatment in and sewage water titution for the care of handicapped, physically, mentally, or it compromised patients	20 hrs
Visit to pring care delivible. Visit to was of wester Visit to ins medically. Preventive.	mary health centre-to acquaint with activities and primary health very ter purification plant/public health laboratory/ centre for treatment in and sewage water titution for the care of handicapped, physically, mentally, or it compromised patients	
Visit to princare delivered visit to ware of wester Visit to insomedically Preventive Including of	mary health centre-to acquaint with activities and primary health very ter purification plant/public health laboratory/ centre for treatment in and sewage water titution for the care of handicapped, physically, mentally, or compromised patients Dentistry:	

Note: Recording of oral health assessment using indices and WHO basic oral health survey methods should be in context of how information collected will be used or utilised. Therefore it is desirable for this exercise to be part of short term research project and not merely for recording.

IV BDS PERIODONTOLOGY

Teaching Hours: Theory: 50 Hours

SI. No.	Topic	Expected to know	Hours
1.	Classification of periodontal diseases	Need and scientific basis, classification of gingival and periodontal diseases- world workshop 1999.	1
2.	Risk Factors	Definition, Risk factors for periodontal diseases. Smoking and periodontal diseases, Role of Stress factors	1
3.	Genetic factors	Genetic factors associated with periodontal diseas	e 1
4.	Host Response	Mechanism of initiation & progression of Periodontal disease, Basic concepts, cells, Mast cells, Neutrophils, macrophages, Lymphocytes, Immunoglobulins, complement, Immune Mechanisms and Cytokines in brief. Stages in gingivitis - Initial, early established, advanced Periodontal disease activity continuous paradigm, random burst and asynchronous multiple burst hypothesis	2
5.	Furcation involvement	Furcation involvement Various Classifications, prognosis and management.	1
6.	Bone loss patterns	Bone loss and patterns of bone destruction in periodontal disease	1
7.	Diagnosis	Routine procedures, methods of probing types of probescase history	2
		Halitosis, Etiology and treatment.	1
8.	Radiographic aids	Radiographs aids in the diagnosis of periodontal diseases	1
9.	Advanced diagnostic aids	Advanced diagnostic aids - Their role in brief	1
10.	Prognosis	Definition, types, purpose and factors	1
11.	Treatment plan	Factors to be considered	1
12.	Rationale for periodontal therapy	Regeneration, Repair, Re-attachment, New attachment	1

13.	Periodontitis	Etiology, histopathology, clinical signs& symptoms diagnosis and treatment of chronic periodontitis, aggressive periodontitis, refractory periodontitis, Necrotising ulcerative periodontitis Periodontal abscess- definition, classification, pathogenesis, differential diagnosis & treatment	3
14.	Periodontal pocket	Definition, signs and symptoms, classification, pathogenesis histopathology, root surface changes & contents of pocket.	1
15.	Periodontal treatment of medically compromised Patients	Different systemic conditions and their effects of the periodontium. Management of patients with the various systemic complications	n 2
16.	Periodontal therapy in the female patient	PDL changesassociated with Puberty, Menopause, pregnancy, Oral contraceptives	1
17.	Periodontal therapy	General principles of periodontal therapy. Preparation of the patient for surgical therapy	1
18.	Pocket eradication	Scaling and root planing procedures Indications, Aims and Objectives. Armamentarium - and procedure Healing following root planing. Curettage and present concepts- Definition, Indication; Aims and Objectives Procedures and healing Gingivectomy / Gingivoplasty including crown lengtheningprocedure-Definition Indication and contra indication Armamentarium, Procedure and healing.	3
19.	Flap Surgery	Definition of flap; Types of flap (Design of flap- papilla preservation) Pocket eradication, Indications, armamentarium, surgical procedure and healing	2
20.	Osseous surgery	Definition; Resective and additive osseous surgery (Osseous grafts, classification of grafts)-healing; other regenerative procedures root conditioning. Guided tissue regeneration.	2
21.	Mucogingival surgery	Definition; Mucogingival problems,,Etiology & Classification of gingival recession (P.D.Miller Jr. and Sullivan and Atkins) Indications, various mucogingival surgical procedures	2
22.	Occlusion	Occlusal evaluation and therapy	1

23.	Microsurgery	Periodontal Microsurgery in brief, Electrosurgery, cryosurgery	1
24.	Splints	Periodontal splints - purpose, classification- principles of splinting	1
25.		definition, types, histopathological changes, role in periodontal disease, measures of management	1
26.	Implants	Definition, Types, Scope, biomaterials used. Periodontal considerations such as implant- gingiva and implant-bone interface. Implant failure Peri-implantitis and management. Advanced surgical techniques	3
27.	Periodontal medicine	PDL infection associated with various systemic Diseases.	1
28.	Host modulation therapy	Principles, Agents used	1
29.	Lasers	Lasers in periodontal therapy	1
30.	Supportive periodontal therapy	Definition, Rationale. Patient Classification Factors affecting S P T; Implant maintenance	1
31.	Pharmacotherapy	Periodontal dressings ; antibiotics and antiinflammatory drugs - local drug delivery	1
32.	Pulpo-periodontal Lesions	Pulpo-periodontal involvement - Routes of Spread of infection management	1
33.	Evidence based decision making	Assessing evidence, implementing evidence based decisions in clinical practice	1
34.	Patient management	Ethical, legal and practical issues in the management of periodontal patients	1

Tutorial (During Clinical Posting)

- 1. Third year tutorial topics
- 2. Diagnosis of periodontal disease
- 3. Determination of prognosis and treatment plan
- 4. Radiographic interpretation and lab investigation
- 5. Ultrasonic instrumentation
- 6. Principles of periodontal surgery
- 7. Periodontal surgical procedures and suturing techniques
- 8. Concepts of subgingival irrigation and LDD
- 9. Occlusion, correction & management
- 10. Splinting techniques in Periodontics

Desirable to Know

- 1. Immunology- current concepts of host response
- 2. Applied periodontal microbiology
- 3. Advanced diagnostic techniques
- 4. Regeneration
- 5. Application of microsurgery and LASERS in periodontics
- 6. Implants

Teaching Hours: Theory - 80 Hours III BDS - 30 Hours; IV BDS - 50 Hours Clinical work and case discussion (III BDS & IV BDS)

25 Detailed Case History And Discussion 75 Hours
50 Oral Prophylaxis- 40 handscaling, 10 ultrasonic 150 Hours
Demonstration of all Surgical Procedures 30 Hours
Maintenance Therapy 30 Hours
Total 285 Hours

Recommended Books

Name of the Book & Title	Author	Edn.	Yr. of Publ	Publisher's Name and Place of Publication
Standard Book Carranza and Newman	Clinical Periodontology	10th	2007	SB saunders Company
Recommended Books Robert Genco. Henry. M. Goldman D.Walter Cohen	Contemporary Periodontics	6th		C. V. Mosby Company St. Louis
Jan Lindhe, T. Karring, N.P Lang.	Clinical Periodontology & Implant Dentistry	5th	1997	Munksgaurd Copenhagen
Grant Strern. Listgarten	Periodontics	6th	1998	Mosby CBSn Publishers Indian Edition
S. P Ramfjord M. M. Ash.	Periodontology and Periodontics Modern Theory and Practice		1996	AITBS Publishers, India
T. ITO J. D. johnson	Colour Atlas of Periodontal Surgery			Mosby & Wolfe. U.S.A
Cohen	Atlas of Periodontal Surgery			C. V. Mosby Company U.S.A
Glickman	Manual of periodontal instruments		1990	W.B. Saunders and co
Wilson and Kornman	Fundamentals of periodontics	2cnd	2003	Quintessence publishing

IV BDS ORAL MEDICINE AND RADIOLOGY

Theory: 45 Hours Practicals: 100 Hours

MUST KNOW

IV YEAR ORAL MEDICINE THEORY: 31 HOURS

Acute infections of oral and para oral structures - bacterial, viral, fungal, parasitic including cervico facial lymphadenopathy. Bacterial: Streptococcal, tuberculosis, syphilis, vincent's, leprosy, actinomycosis, diphtheria and tetanus. Fungal: Candida albicans, deep seated fungal infections Virus: Herpes simplex, Herpes zoster, Ramsy Hunt Syndrome, measles, herpangina, mumps, infectious mononucleosis, HIV, hepatitis -B, hepatitis-C Granulomatous diseases: tuberculosis, sarcoidosis, midline lethal granuloma, Crohn's disease and histiocytosis X	2 hour
White and red lesions of oral mucosa. White lesions: chemical burns, leukoedema, leukoplakia, fordyce's spots, stomatitis nicotina palatinus, white spongy nevus, candidiasis, lichen planus, discoid lupus erythematosis, oral submucous fibrosis Red lesions: Erythroplakia, stomatitis venenata and medicamentosa, erosive lesions and denture sore mouth.	2 hour
Ulceerative lesions : Acute and chronic ulcers. Vesiculobullous lesions of oral mucosa: herpes simplex, herpes zoster, herpangina, bullous lichen planus, pemphigus, cicatricial pemphigoid, erythema multiforme.	2 hours
4. Diagnostic protocol for differential diagnosis of cysts, odontogenic, non-odontogenic and developmental cysts. Cysts of soft tissues: Mucocele and Ranula Cysts of bone: odontogenic and non-odontogenic. Tumors: Soft tissue: Epithelial: Papilloma, Carcinoma, Melanoma. Connective tissue: Fiborma, lipoma, fibrosarcoma. Vascular: Haemangioma, Lymphangioma. Nerve tissue: Neurofibroma, traumatic neuroma, Neurofibromatosis. Salivary Glands: Pleomorphic adenoma, Adenocarcinoma, Warthin's tumor, Adenodid cystic carcinoma. Hard tissue: Non-odontogenic tumors: Odontogenic tumors: Fibro osseous lesions of oral paraoral structures.	2 hours

 Oral manifestations of Metabolic disorders: Porphyria Haemochromotosis Histocytosis, Oral manifestations of endrocrinal disorders: 	2 hours
6. Dermatological diseases importance to dentistry: i. Ectodermal dysplasia ii. Hyperkeratosis palmoplantaris with periodontopathy iii. Scleroderma iv. Lichen planus including grinspan syndrome v. lupus erythematoses vi. Pemphigus vii. Erythema multifore viii. Psoriasis.	2 hours
7. Disease of tongue and tongue in systemic diseases: Aglossia, ankyloglossia, bifid tongue, fissured tonge, scrotal tongue, macroglossia, microglossia, geographic tongue, median rhomboid glossitis, depapillation of tonge, hairy tongue, atrophic tongue, reactive lymphoid hyperplasia, glossodynia, glossopyrosis, ulcers, white and red lesions.	1 hour
8. Concept of pre malignancy, Premalignant lesions and conditions	1 hour
9. Oral Cancer, Etiology and Classification Epidemiology Screening Clinical Features and Clinical staging - Diagnosis Laboratory Investigations and Diagnosis Immune concepts in Oral Malignancies Management Chemotherapy / Radiotherapy.	2 hour

10. Diseases of salivary glands: i. Developmental disturbances: Aplasia, atresia and aberration. ii. Functional disturbances: Xerostomia, ptyalism. iii. Inflammatory conditions: Non-specific sialadenitis, mumps, sarcodiosis, heerdfort's syndrome (uveoparotid fever), necrotizing sialometaplasia. iv. Cysts and tumors: Mucocele, ranula, ;pleomorphic adenoma, mucoepidermoid carcinoma. v. Miscellaneous: sialolithiais, Sjogren's syndrome, mikuliez's disease and sialosis.	1 hour
11. Autoimmune diseases affecting oral cavity	2 hour
12. Allergic: Local allergic reactions, anaphylaxis, serum sickness (local and systemic allergic manifestations to drugs and chemicals) limmunological lesions of oral cavity: i. Multiple myeloma ii. HIV clinical manifestations, oppourtunistic infections, neoplasms iii. Thrombocytopenia iv. Lupus erythematosus v. Scleroderma vi. Dermatomyositis vii. Rheumatoid arthritis viii. Recurrent oral ulcerations including behcet's syndrome and reiter's syndfrome.	1 hour
13. Diseases of TMJ: Developmental abnormalities of condyle, rheumatoid arthritis, osteoarthritis, subluxation and luxation, internal derangement of TMJ, myofacial pain dysfunction sydrome. Diseases of Bone: Development disorders, anomalies, exostosis and tori, infantile cortical hyperostosis, osteogenesis imperfecta, marfans syndrome, osteoporosis. Miscellaneous- Paget's disease, mono and polyostotic fibrous dysplasia, cherubism,	3 hour
14. Diseases of maxillary sinus	1 hour
Oral manifestations of systemic diseases and medical emergency management, cardiac patient,cardias arrest, specific infections, syncope, anaphylaxis. Phsiologic changes: Puberty, pregnancy and menopause.	1 hour
16. Maxillofacial trauma clinical diagnostic protocol	1 hour
Psychosomatic diseases, burning mouth syndrome, glossopyrosis glossodynia, orofacial dysaesthesia, cancerophobia., MPDS, taste abnormalities	1 hour
Forensic Odontology including radiography in forensic odontology: i. Medicolegal aspects of orofacial injuries ii. Identification of bite marks	1 hour

iii.	Dete	ermir	nation	of	age	and sex

iv. Identification of cadavers by dental appliances, restorations and tissue remnants

1 hour

IV BDS ORAL MEDICINE AND RADIOLOGY

MUST KNOW

IV YEAR RADIOLOGY THEORY: 14 HOURS

<u> </u>
1 hour
2 hour
1 hour
2 hours
1 hour
2 hour
1 hour
1 hour
1 hour

Clinicals

III & IV year BDS (inclusive) ORAL MEDICINE

1. Detailed presentation of case histories of (minimum) tem special cases.

RADIOLOGY

- 1. Taking IOPA for at least 25 cases and processing them.
- 2. Taking at least 2 Bite wing radiographs and processing them.
- 3. Interpretation of at least 25 IOPA Radiographs.

CLINICAL DEMONSTRATIONS

- 1. Demonstrations of the following radiographic techniques:
 - a. Maxillary and mandibular occlusal view
 - b. Orthopanthamograph
 - c. Lateral cephalogram
 - d. Postero anterior view of mandible
 - e. Paranasal sinus view
 - f. Reverse towne's view
 - g. Submentovertex view
 - h. Lateral oblique view for ramus and body of mandible
- 2. Identification Of The Above Mentioned Radiographs And Their Interpretation

Scheme of Examination

A. Theory (university written examination) 70 Marks

Distribution of Topics and Types of Questions

Contents	Type of Questions and Marks	Marks
a. 1 Question from Oral Medicine	Long Essays	20
b. 1 Question from Radiology	2 x 10 marks	
a. 4 Questions from Oral Medicine	Short Essays	40
b. 4 Questions from Radiology	8 x 5 marks	
a. 3 Questions from Oral Medicine	Short Answers	40
b. 2 Questions from Radiology	2x5	10
	Total	70

B. Internal Assessment Theory: 10 marks, Practicals:10 marks

C. Clinicals: 90 Marks

I. Clinicals in Oral Medicine: 60 Marks (recording of Long Case)

a. Case History taking
b. Diagnosis & Differential Diagnosis
c. Investigations
d. Management
30 Marks
10 Marks
10 Marks

- II. Clinicals in Radiology: 30 Marks (One Intra.a-Oral Periapical Radiograph to be taken)
 - a. Technique10 Marks
 - b. Processing10 Marks
 - c. Interpretation10 Marks

D. Viva Voce 20 Marks
Theory : 100
University written exam : 70

Viva Voce : 20
Internal assessment (written) : 10
Total : 100

Clinical:100 University exam

University exam : 90
Internal assessment (written) : 10
Total : 100

BOOKS RECOMMENDED:

a. Oral Diagnosis, Oral Medicine, Oral Pathology

- 1. Burkit Oral medicine J.B. Lippincott Company
- 2. Coleman Principles of Oral Diagnosis Mosby Year Book
- 3. Jones Oral Manifestations of Systemic Diseases W. B. Saunders company
- 4. Mitchell Oral Diagnosis & Oral Medicine
- 5. Kerr Oral Diagnosis
- 6. Miller Oral Diagnosis & Treatment
- 7. Hutchinson Clinical Methods
- 8. Shafers Oral Pathology
- 9. Sonis. S.T., Fazio.R.C. and Fang. L Principles and Practice of Oral Medicine
- 10. Differential diagnosis of oral lesions Norman wood KW and Paul W. HGoaz 4th edition, 1997, Mosby Philadelphia.
- 11. Hand book of medical emergencies in dental office by Malamed Stanley 3rd edition 1989, AITBS, Mosby.
- 12. Orofacial pains, classification, diagnosis and management by Bell Welden, 4th edition 1989, year book Medical publishers, Chicago.
- 13. Oral & Marillofacial Injections Topazian Richard
- 14. Oral & Marillofacial Pathology Neville
- 15. Oral Pathology Clinical Pathology Carrelation Reglzi

b. Oral Radiology

- 1. White & Goaz Oral Radiology Mosby Year Book
- 2. Weaheman Dental radiology C. V. Mosby Company
- 3. Stafine Oral Roentgenographic Diagnosis W.B. Saunders company
- 4. Fundamentals of oral medicine and radiology by Bailoor DN and Nagesh KS 1st and 2nd edition 1994, 2001. Contemporary dental publishers
- 5. Dental Radiography Principles & Technique Haring, Howerlow
- 6. Essentials of Dental Radiography & Radiology Eevie Whailes

c. Forensic Odontology

- 1. Derek H. Clark Practical Forensic Odontology Butterworth Heinmann (1992)
- 2. C. Michel Bowers, Gary Bell Manual of Forensic Odontology Forensic Pr. (1995)

IV BDS

PUBLIC HEALTH DENTISTRY

Theory: 45 hours Clinical/Practical:150 hour

SI.No. Topic	No. of hours	Year of study
4. DUDI IC UEAL TU	2	
 PUBLIC HEALTH General Epidemiology:-definition,objectives,methods 		
ii.Environment Health: -Concepts,principles,protection,	2	
sources, purification environmental sanitation of water		
disposal of waste sanitation, then role in mass disorders		
iii. Health Education: -Definition,concepts,principles,methods,	2	
and health education aids		
iv.Public Health Administration: -Priority,establishment,	2	
manpower,private practice management, hospital		
management. v.Ethics and Jurisprudence: Professional liabilities,negligence,	2	
malpractice, consents, evidence, contrasts, and methods of	2	
identification in forensic dentistry.		
vi.Behavior sciences:Definition of sociology,anthropology and	2	
psychology and their in dental practice and community.		
vii. Health care delivery system: Center and state, oral health	2	
policy,primary health care, national programmes, health		
organizations.		
2. Dental Public Health		
i. Definition and difference between community and clinical health	n. 2	
ii. Nutrition in oral diseases	2	
Delivery of dental care: Dental auxiliaries, operational and non- operational, incremental and comprehensive health care, school dental health		IV PDC
Planning & Evaluation	1	IV BDS
iv. Payments of dental care: Methods of payments and dental insurance, government plans	2	
3. Preventive Dentistry	5	
 Definition, Levels, role of individual community and profession, fluorides in dentistry, plaque control programmes. 	1	
ii. Prevention of dental caries Prevention of periodontal disease Prevention of oral cancer Prevention of malocclusion Atraumatic Restorative Treatment(ART) Occupational Hazards Evidence Based Dentistry(ERD)	6	
Evidence Based Dentistry(EBD)	6	

Research Methodology and Dental Statistics	
Health Information: - Basic knowledge of Computers, MS Office, Window 2000, Statistical Programmes	1
 Research Methodology: -Definition, types of research, designing a written protocol 	1
 Bio-Statistics: - Introduction, collection of data, presentation of data, Measures of Central tendency, measures of dispersion, Tests of significance, Sampling and sampling techniques-types, errors, bias, blind trail and calibration. 	5
Practice Management	
 Place and locality Premises & layout Selection of equipments Maintenance of records/accounts/audit. 	2

PRACTICALS/CLINICALS/FIELD PROGRAMMES IN PUBLIC HEALTH DENTISTRY

These exercises designed to help the student in V year:

- 1. To Understand the community aspects of dentistry
- 2. To take up leadership role in solving community oral health programme
- 3. To gain hands on experience on research methodology.

Exercises: IV BDS

SI. No	Торіс	Hours of study
1.	Oral health education material preparation • Preparation of health education materials posters, models, slides Lectures, play acting skits etc.	10 hours
2.	Visit to school • To asses the oral health status of school children, Emergency treatment and health education including possible preventive Care at school (tooth brushing technique demonstration and oral rinse programme etc.)	20 hours
3.	Preventive dentistry and health talk: • Including case history, recording of indices, application of pit and fissure Sealants, fluoride gel application procedure, A.R.T. Health talk: Minimum of 12 per year	30 hours
4.	Exploring the setting of dental practice • Exploring and planning setting of private dental clinics in rural,semi- Urban and urban locations,availment of finances for dental practices, Preparing project report.	10 hours
5.	Rural postings • Comprehensive care including oral health education in rural areas for Disadvantaged population.	80 hours

Note: Recording of oral health assessment using indices and WHO basic oral health survey methods should be in context of how information collected will be used or utilised. Therefore it is desirable for this exercise to be part of short term research project and not merely for recording.

The colleges are encouraged to involve in the N.S.S.programme for college students for carrying out Social work in rural areas.

Type of questions and distribution of marks:

Each question paper shall be of 3 hours duration, carrying maximum marks of 70. There shall be three types of questions with distribution of marks as shown in Table:

Table

Type of Questions	No. of Questions	Marks per question	Total marks
Long Essay Type	2	10	20
Short Essay Type	8	5	40
Short Answer Type	5	2	10
		Grand Total	70

Scheme of Examination Theory Examination

SI. No	Type of Question	No.	Marks	Total (Maximum Marks- 100)
1	Long Essays	2	10	20
ii	Short Essays	8	5	40
iii	Short Answers	5	2	10

Clinical Examination

SI.No.	Exercise	Marks allotted (Maximum Marks- 100)
1.	Case History Taking	15
2	. Assessment of Oral Health Status using any two relevant Indices	35
3.	Preventive Clinical procedures(Any one) (Topical fluoride application, Pit and fissure sealants and ART)	25
4	Oral Health Education Talk / Presentation of Oral Health Education Material / short term student research project presentation	15

	Theory	Clinicals
Internal Assessment	10	10
University Examination	70	90
Viva voce	20	-
Total	100	100

BOOKS RECOMMENED & REFERENCE:

- 1. Dentistry Dental Practice and Community by David F.Striffler and Brain A.Burt, Edn. -1983, W,B,Saunders Company.
- Principles of Dental Public Health by James Morse Dunning,4th Edition, 1986, Harwarduniversity Press.
- Jong,s Community Dental Health ,5th Edition, by George Gluck and warren Morganstein.
- 4. Community Oral Health- A system approach by Patricia P.Cormier and Joyee I.Levy Published by Application-Century-Crofts/New York, 1881.
- Community Dentistry- A problem oriented approach by P.C.Dental Hand book series Vol.8 by Stephen I.Silverman and Ames F.Tryon, series editor-Alvin F.Gardner, PSG Publishing company inc.littleton Massachuseltts, 1980.
- 6. Clinical Use of Fluorides- Stephen H. Wei
- Oral healthsurveys- Basic methods,4th edition,1997,published by W.H.O.Geneva Available at the regional office New Delhi.
- 8. Preventive Dentistry-by J.O.Forrest published by John Wright and sons Bristoli, 1980.
- 9. Preventive Dentistry by Murray, 1997.
- 10. Textbook of Preventive and Social Medicine by park, 20th edition..
- 11. Textbook of Preventive and Community dentistry by Dr S S Hiremath.
- 12. Introduction to Bio-statistics by B.K.Mahajan.
- 13.Research methodology- Methods and techniques by C.R.Kothari, 2nd edition.
- 14.Introduction to statistics methods by grewal.
- Dentistry, Dental Practice and the community, 6th Edition, by Brain A Burt and Stephen a eklund.

IV BDS ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

Course Details -IV Year B.D.S

TEACHING HOURS:

Mode of Teaching	IV Year B.D.S
Theory	30 Hours
Clinical	100 Hours
Total	130 Hours

MUST KNOW

IV YEAR - COURSE SYLLABUS:

SI. No.	Subjects	Hours
General Principles in Malocclusions	n Orthodontic Treatment Planning of Dental and Skeletal	1 Hour
Anchorage in Orthor Anchorage	dontics - Definition, Classification, Types and Stability of	2 Hours
a. Different types of the b. Tissue response to the contract to the contr	ciples in Orthodontic Tooth movement tooth movements o orthodontic force application odontic tooth movement	2 Hours
limitations Interceptive Orthodont a. Definition b. Different procedu c. Serial Extraction: advantages and	ures undertaken in preventive orthodontics and their cics ures undertaken in interceptive procedure Definition, indications, contra-indication, technique,	Will Be Covered by Departme nt of Pedodont ia
· · · · · · · · · · · · · · · · · · ·	to be considered during treatment planning ont's, Ashley Howe's, Bolton, Careys, Moyer's Mixed	2 Hours

c. Methods of gaining space in the arch: - Indications, relative merits and demerits of proximal stripping, arch expansion and extractions d. Extractions in Orthodontics - indications and selection of teeth for extraction	
6. Orthodontic Appliances: General a. Requisites for orthodontic appliances b. Classification, indications of Removable and Functional Appliances c. Methods of force application d. Materials used in construction of various orthodontic appliances - use of stainless steel, technical considerations in curing of acrylic, Prinicples of welding and soldering, fluxes and antifluxes e. Preliminary knowledge of acid etching and direct bonding	2 Hours
7. Removable Orthodontic Appliance a. Components of removable appliances b. Different type of clasps and their use c. Different type of labial bows and their use d. Different types of springs and their use e. Expansion appliances in orthodontics i. Principles ii. Indication for arch expansion iii. Description of expansion appliances and different types of expansion devices and their uses iv. Rapid maxillary expansion	2 Hours
8. Fixed Orthodontic Appliances a. Definition, Indication and Contraindications b. Component parts and their uses c. Basic principles of different techniques: Edgewise, Begg straight wire	2 Hours
9. Extraoral Appliances a. Headgears b. Chincup c. Reverse pull headgears	1 Hour
10. Myofunctional Appliances a. Definition and principles b. Muscle exercises and their uses in orthodontics c. Functional appliances: i. Activator, Oral Screens, Frankels function regulator, bionator twin blocks, lip bumper ii. Inclined planes - upper and lower	3 Hours
11. Orthodontic Management of Cleft Lip and Palate	2 Hours
Principles of Surgical Orthodontics a. Maxillary Prognathism and Retrognathism b. Mandibular Prognathism and Retrognathism	2 Hours

c. Anterior open bite and deep bite d. Cross bite	
13. Principle, Differential Diagnosis and Methods of Treatment of: a. Midline diastema b. Cross bite c. Open bite d. Deep bite e. Spacing f. Crowding g. Class II - Division 1, Division 2 h. Class III - Malocclusion - True and Pseudo Class III	3 Hours
14. Retention and Relapse Definition, Need for retention, Causes of relapse, Methods of retention, Different types of retention devices, Duration of retention, Theories of retention	2 Hours
15. Ethics	1 Hour
16. Genetic in Orthodontics	1 Hour
17. Computers in Orthodontics	1 Hour
18. Adult Orthodontics in brief	1 Hour

CLINICALS AND PRATICALS IN ORTHODONTICS DURING IV B.D.S - 130 Hours

CLINICAL TRAINING DURING IV B.D.S

- 1. Case History Training
- 2. Case Discussion
- 3. Discussion on the given topic
- 4. Cephalometric tracings
 - a. Down's Analysis
 - b. Steiner's Analysis
 - c. Tweed's Analysis

PRATICAL TRAINING DURING IV YEAR B.D.S

- 1. Adam's Clasp on Anterior teeth Gauge 0.7mm
- 2. Modified Adam's Clasp on upper arch Gauge 0.7mm
- 3. High Labial bow with Apron spring on upper arch (Gauge of Labial bow 0.9mm, Apron Spring 0.3mm)
- 4. Coffin spring on upper arch Gauge 1mm
- 5. Appliance Construction in Acrylic
 - a. Upper and lower Hawley's Appliance
 - b. Upper Hawley's with Anterior bite plane
 - c. Upper Habit breaking Appliance

- d. Upper Hawley's with Posterior bite plane with 'Z' spring
- e. Lower inclined plane / Catalan's Appliance
- f. Upper Expansion plate with Expansion Screw
- g. Construction of Activator

RECOMMENDED AND REFERENCE BOOKS

- Contemporary Orthodontics William R Proffit
- 2. Orthodontics for Dental Students White and Gradiner
- 3. Handbook for Dental Students Movers
- 4. Orthodontics Principles and Practice Graber
- 5. Design, Construction and Use of Removable Orthodontic Appliances C. Philip
- 6. Adams
- 7. Clinical Orthodontics: Vol 1 & 2 Salzmann Orthodontics - Graber and Swine
- Textbook of Orthodontics-III Edition, M S Rani, All India Publishers & Distributors, New Delhi Dr G V N

SCHEME OF EXAMINATION OF B.D.S (ORTHODONTICS) Total Theory Marks - 100 Marks

Theory Written Examination - 70 Marks
Vivavoce - 20 Marks
Internal Assessment - 10 Marks
Total 100 Marks

Theory Written Examination- 70 Marks

Type of Questions	Marks	Total
Long Essays - 2	2 x 10	20
Short Essays - 8	8x5	40
Short Answers - 5	5x2	10
Total		70

Clinical Examination - 100 Marks

University Clinical Examination 90 Marks
Internal Assessment - 10 Marks
Total 100 Marks

University Clinical Examination - 90 Marks

Clinical Work	Marks	Total
Spotters - 10 Nos	10 x 3	30
Wire Bending - 3 Exercises a. Labial Bow - b. Adams Clasp c. Fingers Spring / Z Spring	15 Marks 15 Marks 10 Marks	40
Clinical Case Discussion		20
	Total	90

IV BDS PEDIATRIC AND PREVENTIVE DENTISTRY

Lectures Theory

IV Year: 45 Hours

Practicals/Clinics: IV Year: 100 Hours

IV YEAR PEDODONTICS AND PREVENTIVE DENTISTRY: 45 HOURS

SI. No.	Subjects	Hours
Theories Psychological de Dental fear, anxion Application of psy	nderstanding child psychology in pedodontics evelopment from birth through adolescence ety and their management, types of cry eychology principles in dental management sorders including anorexia, bulimia	4 hours
Factors influenci Non-pharmacolo Pharmacological Pharmacological Analgesics, anti i children	d types of behaviour ng child behaviour ngical management of behaviour I management of behaviour I management of behaviour: I principles in pediatric dentistry-drug dosage formulae inflammatory and antibiotics commonly prescribed for tion including nitrous oxide-oxygen inhalation anaesthesia	5 hours
disadvantages Topical fluorides professional and Mechanism of ac	es-availability, agents, concentrations, advantages and -agents, composition, methods of application both for I home use, advantages and disadvantages ction and its anti cariogenic effect and its management	4 hours

4. Pediatric Endodontics Principles and diagnosis Classification of pulp pathology Management of pulpally involved primary, young permanent and permanent teeth including materials used and techniques followed Pulp capping Pulpotomy Pulpectomy Apexogenesis Apexification	4 hours
5. Traumatic injuries to teeth Definition Classification Etiology and incidence Management of trauma to primary teeth Sequelae and reaction following trauma to primary teeth Management of trauma to young permanent teeth Prevention of trauma: mouth protectors	5 hours
6. Preventive and Interceptive Orthodontics Definitions Problems seen during primary and mixed dentition periods and their management Mixed dentition analysis Serial extraction Space management	4 hours
7. Oral Habits in children Definition, classification and aetiology of all habits Clinical features of deleterious oral habits including non-nutritive sucking, mouth breathing, non functional grinding, masochistic and occupational habits Management of oral habits in children	4 hours
8. Dental management of children with special needs Definition, classification, aetiology, clinical features, special considerations in the dental management of: Physically handicapping conditions Mentally handicapping conditions Medically compromising conditions Genetic disorders and importance of genetic counselling	5 hours
9. Oral surgical procedures in children Indications and contra indications for extraction Minor surgical procedures in children Knowledge of local and general anaesthesia	2 hours
10. Preventive dentistry Definition, principles and scope	3 hours

Levels and types of prevention Preventive measures: Minimal Intervention Pit and fissure sealants Preventive resin restorations (PRR, CARR) Newer agents available for caries prevention and re mineralization Caries vaccine	
11. Nanodentistry- introduction, principles and technique -an outline	1 hour
12. Dental health education and school dental health programmes	1 hour
13. Importance of Dental Home	1 hour
14. Dental emergencies in children and their management	1 hour
15. Setting up of Paediatric dental practice including ethics	1 hour

PRACTICALS / CLINICS

- Student is trained to arrive at proper diagnosis by following a scientific and systematic procedure of history taking and examination of orofacial region. Training is also imparted in management whenever possible.
- 2. In view of the above each student shall maintain a record of work done, which shall be evaluated for marks at the time of university examination.
- 3. The following is the minimum prescribed work:

Pre-clinical (III Year)

Drawing of individual primary teeth morphology

Preparation of various cavity designs on typhodont teeth and extracted primary and permanent teeth

Fabrication of habit breaking appliances

Clinical exercises (IV Year)

Case History Recording and Treatment Planning

Communication and Management of child patient

Preventive measures - oral prophylaxis, topical fluoride application

Restoration of carious teeth using different materials

Extraction of primary teeth

SCHEME OF EXAMINATION

A. Theory (University written examination) 70 Marks
Distribution of Types of Questions

Type of Questions and Marks	Marks
Long Essay - 2 x 10 Marks	20
Short Essays - 8 x 5 Marks	40
Short Answers - 2 x 5 Marks	10
Total	70

- B. Internal Assessment Theory: 10 Marks, Practicals: 10 Marks
- C. Clinical: 90 Marks
- 1. Clinical in Pedodontics and Preventive Dentistry: 60 Marks
 - a. Case History, Clinical Examination, Diagnosis and Treatment Planning: 30 Marks
 - b. Clinicalprocedure: 40 Marks
 - i. Oral prophylaxis and topical fluoride application
 - ii. Restoration of decayed tooth
 - iii. Extraction of primary tooth
 - c. Overall management of child patient and post-operative instructions: 20 Marks
- D. Viva Voce: 20 Marks

Theory - 100

University written exam: 70 Viva Voce: 20

Internal assessment (written): 10
Total

tal _____

Clinical - 100

University exam:

Internal assessment (written): Total:

90 10 100

BOOKS RECOMMENED

- 1. Dentistry for the Child and Adolescent- Mc Donald
- 2. Pediatric Dentistry (Infancy Through Adolescence)- Pinkham
- 3. Clinical Pedodontics- Sidney B.Finn
- 4. Paediatric Operative Dentistry-Kennedy
- 5. Behaviour Management- Wright
- 6. Clinical Use of Fluorides- Stephen H. Wei
- 7. Textbook of Pediatric Dentistry-Braham Morris
- 8. Primary Preventive Dentistry-Norman O Harris, Franklin Garcia-Godoy
- 9. Understanding of Dental Caries-Nikiforuk
- 10. Textbook and Color Atlas of Traumatic Injuries to the Teeth J.O Andreason, C.M Andreason
- 11. Textbook of Pedodontics- Shobha Tandon
- 12. Handbook of Clinical Pedodontics- Kenneth D

IV BDS PROSTHODONTICS, CROWN AND BRIDGE INCLUDING IMPLANTOLOGY

Teaching Hours:

Clinical:

III year :70 hours IV year 300 hours

Theory:

III year :30 hours IV year :80 hours

IV PROSTHODONTICS THEORY: 30 HOURS

SI. No.	Subjects	Hours
Articulators - articulators t - articulators t	iculator	1 hour
Anterior tooth Pre extraction size of the and form of the an The dentogen Posterior tooth Bucco lingual mesiodistal le cervico Occlu- types of poste	guides terior teeth terior teeth ic concept in selecting artificial teeth	1 hour
Guides for pre Relationship t	arrangement Of Artificial Teeth Sliminarily arranging anterior teeth o incisive papilla ning the anteroposterior position of the dental arch	1 hour

Setting Maxillary anterior teeth in wax for try in Importance of proper Anteroposterior positioning of the anterior teeth Setting mandibular anterior teeth in the wax for try in Horizontal overlap Preliminary arrangement of Posterior teeth Orientation of occlusal plane tentative buccolingual position of the posterior teeth tentative arch form of the posterior teeth Setting posterior teeth for try in guidelines for centric occlusion esthetics and leverage	
4. Perfection and verification of jaw relation records Verifying Vertical Dimension Verifying the centric relation Intraoral observation of intercuspation. Intraoral interocclusal records Extra oral articulator method Creating Facial And Functional Harmony With Anterior Teeth Anatomy of natural appearance and facial expression normal facial landmarks maintaining facial support and neuromuscular balance Basic guides to developing facial and functional harmony preliminary selection of the artificial teeth horizontal orientation of the anterior teeth vertical orientation of the anterior teeth phonetics in the orientation of the anterior teeth inclination of the anterior teeth harmony in the general composition of anterior teeth refinement of individual tooth positions concept of harmony with sex personality and age of the patient correlating esthetics and incisal guidance Patient acceptance of arrangement of anterior teeth	1 hour
5. Completion of the try in: Eccentric Jaw relation adjustment, establishing the posterior palatal seal Protrusive and lateral relations Controlling factors of movement Eccentric relation records Establishing the posterior palatal seal Arranging posterior teeth for functional harmony Importance of occlusion Maintenance of the arches Maintenance of occlusal harmony differences in artificial occlusion and natural occlusion rational for arranging posterior teeth in Temporomandibular joint disturbances Factors of Centric occlusion Critical components in arranging posterior teeth Laws protrusive occlusion	2 hours

Laws of lateral occlusion

Occlusal schemes used in complete dentures for the edentulous patients

- Anatomic teeth
- Non anatomic teeth
- Other tooth forms

Techniques for arranging cusped teeth in Balanced occlusion techniques for arranging cuspless teeth in occlusion.

Appearance and Functional Harmony of Denture Bases materials used for denture bases

- Acrylic Resin
- Metal

formation and preparation of the mold packing the mold preserving the orientation relations construction of remounting casts completing the rehabilitation of the patient

dentists evaluations

patients evaluations

friends evaluations

elimination of basal surface errors

errors in occlusion

interocclusal records for remounting dentures

interocclusal record of centric relation

remounting the mandibular denture

verifying centric relation

Phonetics - Production of voice and Articulation of sounds

Position of teeth and phonetics

Neutral, Zone, Relief

Processing errors - Reasons and care

Selective grinding

Remount and correction of occlusal discrepancies

Prosthesis - Insertion

6. Patient instructions, after care and recall and management of patient complaints

protrusive inter occlusal record

alternative use of plaster inter occlusal records

advantages of balanced occlusion in complete dentures

special instructions to the patient

- individuality of patients
- appearance with new dentures
- mastication with new dentures
- speaking with new dentures
- oral hygiene with dentures

Maintaining the comfort and health of the oral cavity in a rehabilitated edentulous patient

Post Insertion Adjustments

- adjustments relaxed to the occlusion
- adjustments relaxed to the Denture bases
- subsequent oral examinations and treatments

1 hour

7. Rehabilitation of the partially edentulous patients (overdentures) tooth-supported complete dentures - indications and contraindications for over dentures - selection of abutment teeth - clinical procedures	1 hou
8. Immediate Denture Treatment - indication for immediate dentures - contraindications to immediate denture service - delayed and transitional dentures - treatment planning - clinical procedures - waxing and flasking - preparation of the surgical template - processing occlusal correcting, and final preparation of the immediate dentures - surgery and the insertion of the dentures - postoperative patient instructions - perfecting the occlusion - subsequent service for immediate dentures Single complete dentures opposing natural teeth - maxillary single dentures - clinical and laboratory procedures - subsequent problems with single dentures against natural teeth - mandibular single dentures - supplemental prosthodontic procedures for the edentulous patient	2 hour
9. Relining or Rebasing of Complete Dentures - treatment rationale - diagnosis - clinical procedures Static impression technique closed and open mouth relines/rebases - functional impression technique - chair side technique Repair of Complete Dentures And Duplication Of Casts - Maxillary and mandibular fracture repair - repairs using cold-curing resin - duplication of casts - reversible hydrocolloid technique - irreversible hydrocolloid technique	2 hour
10. Osteo Integrated Supported Prosthesis (Dental Implants) For The Edentulous Patient - maladaptive denture behavior - use of dental implants - patient considerations - tissue integration in the edentulous patient Management of japer-plastic ridges - Atrophied flat mandibular ridges in complete denture prosthesis therapy	1 hou

Geriatric Dentistry: Management of aged, senior citizens, physically, mentally handicapped patients	
REMOVABLE PARTIAL DENTURE PROSTHESIS	
 Introduction and scope Terminology Classifications Examination. diagnosis and treatment planning Components of removable partial dentures and their functions 	3 hours
12. Major connectors Mandibular Major connectors Maxillary Major connectors	2 hours
13. Minor connectors Functions Form and location Tissue stops Finishing lines. reaction of tissues to metallic coverage form of occlusal rests and rest seats	1 hour
14. Rests and rest seats Interproximal occlusal rest seats Internal occlusal rests Incisal rests and rest seats Lingual rests on canines and incisor teeth Possible movements of partial denture Support for rests	1 hour
15. Direct retainers Internal attachments Extra coronal direct retainers Relative uniformity of retention Criteria for selecting a given clasp design Basic principles of clasp design Designs of clasps	3 hours
16. Indirect retainers Denture rotation about an axis Factors influencing effectiveness of indirect retainers Auxiliary functions of indirect retainers Forms of indirect retainers Auxiliary occlusal rests Canine extensions from occlusal rests Canine rests Continuous bar retainers and lingual plates	2 hours

Modification areas Rugae support Direct indirect retention Denture base considerations Tooth supported partial denture base	
17. Distal extension partial denture base: Functions of denture bases Methods of attaching denture bases Ideal denture base material Advantages of metal bases Methods of attaching artificial teeth Need for relining	1 hour
18. Impression materials and procedures for removable partial dentures Rigid materials thermoplastic materials elastic materials impressions of the partially edentulous arch individual impression trays support for distal extension removable partial dentures - factors influencing the support of distal extension bases method for obtaining functional support for distal extension base	3 hour
Description of a dental surveyor Purposes of a surveyor Factors that determine path of placement and removal Step by step procedures in surveying a diagnostic cast Final path of placement Recording relation of cast to surveyor Surveying the master cast Measuring retention and balancing of retention Influence of survey line in designing of clasps Blocking out the master cast Relieving the master cast Paralleled block out. shaped block out, arbitrary block out and relief Preparation of the mouth for removable partial denture Oral surgical preparation Conditioning of abused and irritated tissues Periodontal preparation Periodontal diagnosis and treatment planning Initial disease control therapy Definitive periodontal therapy	3 hour

Recall and maintenance Advantages of periodontal therapy Preparation of abutment teeth Classification of abutment teeth	
Classification of abutment teeth	
Sequence of abutment preparation on sound enamel	
Abutment preparation using conservative restorations	
Abutment preparation using crowns	
Splinting of abutment teeth	
Use of isolated teeth as abutment	
Missing anterior teeth	
Temporary crowns when a partial denture is being worn	
Fabricating restorations to fit existing denture retainers	
2 have	
20 Occlusal relationship for removable partial denture 3 hours	
difference in natural and artificial occlusion	
desirable occlusal contact relationship for removable partial denture	
method for establishing occlusal relationship	
materials for artificial posterior teeth	
establishing jaw relation for mandibular removable partial denture opposing a	
maxillary complete denture	
labatory procedures	
duplicating a stone cast	
waxing the partial denture framework	
anatomic replica pattern	
spruing, investing. burnout, casting and finishing of the partial denture	
framework	
making record base	
occlusal rims	
making a stone occlusal template from a functional occlusal record	
arranging posterior teeth to an opposing cast	
types of anterior teeth	
waxing & investing the partial denture before processing the acrylic resin base	
processing the denture	
remounting and occlusal corrections to an occlusal template	
polishing the denture	
work authorization for removable partial denture	
work authorization	
definitive instructions by work authorization	
Legal aspects of work authorization	
Relining and rebasing the removable partial denture	
Relining tooth support - supported denture base	
Relining distal extension denture base	
Method of reestablishing occlusion of a relined partial denture	
21. Stress breakers	
Types of stress breakers	
Advantages of stress breakers	
Disadvantages of stress breakers	
Advantages of a rigid design	
Disadvantages of a rigid design	
Stress breaking principles	
Principles of removable partial denture design	
Biomechanical considerations	
Other factors influencing	
Differentiation between two main types of removable partial dentures	
Fecontials of partial dopture decian	
Essentials of partial denture design	
Components of partial denture design Additional considerations influencing design	

22. Repair and additions to removable partial denture Broken clasp arms Fractured occlusal rests Distortion or breakage of other components Loss of teeth not involved in the support or retention of the restoration Loss of an abutment tooth necessitating its replacement and making a new direct retainer Other types of repair Repair by soldering	2 hours
23. Temporary removable partial denture Appearance Space maintenance Reestablishing occlusal relationships Conditioning teeth and residual ridge Conditioning the patient for wearing a prosthesis	2 hours
24. Removable partial denture considerations in maxillofacial prosthodontics - 1 Maxillofacial Prosthodontics Intraoral prosthesis design considerations Maxillary prosthesis Mandibular prosthesis Treatment planning Framework design Class I resections Class II resections Mandibular flange prosthesis	1 hour
ELEMENTS OF FIXED PROSTHODONTICS (CROWN AND BRIDGE PROSTHESIS)	
25. Introduction and definitions. Terminologies Indication and contraindications	2 hours

26. Examination, diagnosis and treatment planning and radiological interpretations.	1 hour
27. Selection and choice of abutment teeth	1 hour
28. Biomechanical principles of tooth preparation Preservation of tooth structure Retention and resistance form Structural durability of the restoration Marginal integrity Preservation of the periodontium Finish lines and the periodontium Occlusal bevels Flares Gingival finish lines Preservation of the periodontium Instrumentation Water air cooling Armamentarium	3 hours
29. Full veneer crowns Maxillary and mandibular posterior three quarter crowns Anterior three quarter crown Pin modified three quarter crowns Seven eighths crown Proximal half crowns Inlay MOD onlay	3 hours
30. Anterior/ posterior porcelain fused to metal crowns All ceramic crowns Preparation modifications for damaged teeth Modifications for damaged vital teeth Conversion of defects into retentive features Solution to common problems	3 hours
31. Endodontically treated tooth Preparation modifications for special situations Preparation for fixed bridge abutment Preparation for removable partial denture abutments	3 hours
32. Isolation of working field and temporary protections of prepared tooth Gingival retractions and impression procedures. Construction of DIES of working models, direct and indirect technique. Techniques of fabrication of retainers and materials used, its application with reference to esthetics.	3 hours
33. Selection and fabrication of pontics and esthetics. Connectors, stress - breakers and assembly of fixed bridges.	3 hours

Finishing, cementing and maintenance of crowns and bridges Laser and high speed.	
IMPLANTS	
34. Osseo integrated - Supported prosthesis. Introduction and scope advantages and disadvantages. Classification Applied material science, patient Evaluation pre-surgical preparation treatment plan, applied Linical, surgical and Laboratory Procedure. Osseointegrated supporting prosthesis occlusion, esthetics, insertion and maintenance. Examination, diagnosis and treatment planning and other clinical and Laboratory procedures	5 hours
35. Maxillofacial Prosthesis Restoration of congenital and acquired oral and para-oral Defects. (Facial Prostheses, including implant support Maxillo Facial prosthesis). Splints Obturators Carriers Bruxism and management of occlusal attrition	5 hours
36. Miscellaneous Patient and practice management in Prosthodontic clinic Ethics, Law, Jurisprudence an Forensic Odontology - in Prosthodontic practice Assistants - Laboratories and clinic Communication methods - Technician work Authorization, methods and legality	5 hours
37. Emergencies in Prosthodontics During impression recording in Partially, Completely Edentulous Situation and Maxillofacial Defects. Precautions and management of traumatic accidents in tooth preparation use vasoconstrictor in anaesthetic solutions and retraction cords. ill fitting dentures Broken clasps, facings Broken prosthesis Swallowing Prosthesis General Management of elderly and C.V.S. and immuno compromised patients.	2 hours

CLINICAL ASSIGNMENTS

III & IV BDS

- 1. Treatment for completely edentulous patients- 3 Patients
- 2. Treatment for Partially Edentulous Patients
 - Provisional R.P 5.D
 (Minimum one for each Kennedy's classification)
- 3. F.P preparation of crown anterior and posterior, one each.D.
- 4. Relining & Rebasing, Repair 1 each.
- 5. Immediate denture 1
- 6. Single denture -1

Demonstrations of Clinical and Laboratory procedures for :

3- Unit Fixed Partial Denture, Maxillofacial prosthesis, Obturators and implant supported prosthesis.

SCHEME OF EXAMINATION

a. **THEORY**(university written examination) 70 marks Distribution of topics and types of questions.

Contents	Type of questions & marks	Marks
One long essay from complete denture One long essay from removable partial denture/fixed partial denture		20
3 short essays from complete denture 3 short essays from removable partial denture 2 short essays from fixed partial denture	Short essays 8x5 marks	40
2 short answers from complete denture 1 short answer from removable partial denture 2 short answers from fixed partial denture	Short answer 2x5 marks	10
5	Total	70

B. Internal assessment theory: 10 marks, practicals:10 marks.

C. CLINICALS:90 marks

- i. Case history 10 marks
- ii. Complete denture exercise 50 marks
- iii. RPD Designing or Tooth Preparation on Typhodont- 20 Marks

D. Viva-voce 20 marks

Theory- 100 University written exam- 70 Viva-voce- 20 Internal assessment (written)-10 Total- 100 Clinical-100 University exam-90 Internal assessment(written) 10 Total- 100

TEXT BOOKS AND REFERENCE BOOKS

	Author	Name of the Book & Title	Edn.	Yr. of Publ	Publisher's name
1.	Boucher	Prosthodontic Treatment of Edentulous Patients	XI	1997-	Mosby St. Louis, Missouri, USA
2.	Heartwell	Syllabus of Complete Dentu	ire IV	1992	Varghese Publishing House Hind Rajasthan Building Bombay, India
3.	Rosenstiel	Contemporary Fixed Prosthodontics	III	2001	Mosby, St. Louis, Missouri, USA
4.	Sharry	Complete Denture Prosthetics			
5.	Shillingburg	Fundamentals of Tooth Preparation	I	1987	Quintessence Publications 551 North Kimberly Drive, Carol Stream IL-60188-1881
6.	Tylman	Theory and practice of Fixed Prosthodontics	VIII	1993	Ishiyaku EuroAmerica, Inc 716, Hanley Industrial Court, St. Louis Missouri, USA

7	Jhonston	Modern practice in Fixed Prosthodontics			
8.	Mc Giveney Glen P	MC Cracken's removable Partial Prosthodontics	9th	1995	Mosby
9.	Shillingburg	Fundamentals of Fixed Prosthodontics	III	1997	Quintessence Publications 551, North Kimberly Drive, Carol Street, IL
10.	Stewart	Clinical Removable Partial Prosthodontics	II	1997	All India Publishers & Distributors
11.	Skinner	Science of Dental Materials	X	1996	W.B. Saunders Company, Philadelphia, USA
12.	Craig	Dental Materials, Properties & Manipulation	VI	1996	Mosby, St. Louis Missouri, USA
13.	Combe	Notes on Dental Materials	VI	1992	Churchill Living stone, NY, USA
14.	Carl Misch	Contemporary Implant Dentistry			
15.	Branemark	Tissue Integrated Prosthesis			
16.	Bernard G. N. Smith	Dental Crowns and Bridges: Design and preparation	-	1986	
17.	A.A. Grant / W Johnson	Removable Denture Prosthodontics	2nd	-	
18.	Dr. Sybille K. Leehner, Prof. A. Roy, Mc Gregor	Removable Partial Prosthodontics	2nd		
19.	Grant Heath Mc Cord	Complete Denture			Wolfe Publishing Europe
20.	George F. Kantorowicz	A Clinical Handbook Inlays, Crowns and Bridges			Indian Edition by Varghese Company
21.	Bengt 'O' wall Arud F. Kayser	Prosthodontics			Mosby - Wolfe
22.	Gunnar E. Carlsson	Principles and Management Strategies			Mosby - Wolfe

IV Year - BDS

CONSERVATIVE TOPICS - 80 hours

1. Casts restorations	3 hours
Indications, contraindications, advantages and disadvantages Materials used	
Class II cavity preparation for inlays	
Types of bevels in cast restoration	
Differences in tooth preparation for amalgam and cast restorations	
Fabrication of wax paterns	
2. Casting	2 hours
Die materials and preparation of dies	
Refractory materials	
Alloys used for casting Casting machines	
Casting procedure and defects	
cementation of restoration	
2. Tompovication or interim restauration	1 hours
Temporisation or interim restoration Materials and procedure	1 hours
4. Esthetics in dentistry	4 hours
Introduction and scope	
Anatomy and physiology of smile	
Role of colour and translucency Esthetic recontouring	
Alteration of tooth form, shape , size and colour	
Management of discoloured teeth	
5. Composite restorations	3 hours
Recent advances in posterior composite resins.	3110015
Indications ,contraindications, advantages and disadvantages	
Clinical technique for posterior direct composite restorations	
Finishing and polishing of composite restoration	
Indirect posterior composite restoration	
6. Non carious destruction of tooth structure -	2 hours
Definition ,etiology ,diagnosis ,clinical features and management	
7. Ceramic Restorations Record advances in coramic materials & techniques including CADCAM	3 hours
Recent advances in ceramic materials & techniques including CADCAM (in brief)	
Ceramic laminates, inlays, onlays and crowns. Indications, contraindications,	
advantages, disadvantages and techniques (in brief)	
8. Direct Filling gold Rëstorátions :	1 hours
Introduction	1 110013
Types of direct filling gold,	
indications contraindications advantages disadvantages tooth preparation	
and restoration	

ENDODONTIC TOPICS - 28 hours

1. Emergency endodontic procedures	2 hours
Internal anatomy of pulp space Root canal anatomy of maxillary and mandibular teeth. Classification of cana configuration and variations in pulp space	2 hours
3. Access cavity preparation Objectives Principles Instruments used Sequential steps of access cavity preparation for individual tooth	2 hours
4. Preparation of root canal space . a. Determination of working length definition and methods of determining working length b. cleaning and shaping of root canals objectives principles instruments used techniques-hand and rotary	2 hours
5. Disinfection of root canal space a. irrigation Introduction Function of irrigants Methods and techniques of irrigation b. intracanal medicaments functions requirements types method of placement and limitations	2hours
6. Problems during cleaning and shaping of root canal spaces. Perforation and its management. Broken instruments and its management, management of curved root canals.	2 hours
7. Obturation of the root canal system. a. Materials- Ideal root canal filling material, classification of materials b. Obturation techniques Classification and procedure	2 hours
8. Root canal sealers. Ideal properties classification.,functions Manipulation and application of root canal sealers	2 hours

9. Post endodontic restoration Principles of post endodontic Restorations Post and core-materials and procedure (in brief)	2hours
10. Smear layer and its importance in endodontics and conservative treatment	1 hour
11. Traumatised teeth Classification of fractured teeth. Management of fractured tooth.	2 hours
12. Endodontic surgeries indication contraindications, pre operative preparation. surgical instruments and techniques apicectomy, retrograde filling, post operative sequale, trephination, hemisection, radisectomy reimplantation (both intentional and accidental)	3 hours
13. Root resorption Etiology and management	1 hour
14. Use of specialized equipments like Lasers and microscopes in conservative dentistry and endodontics	1hour

CLINICAL EXERCISES

- 1. Case history recording, diagnosis and treatment planning.
- 2. Clinical examination and use of various diagnostic aids
- 3. Pit and fissure sealants -10
- 4. Pulp Capping-10
- 5. Glass ionomer restorations-10
- 6. Composite restorations in anterior teeth-10 $\,$
- 7. Composite restorations in posterior teeth-10
- 8. CLASS I Amalgam restorations-10
- 9. CLASS II Amalgam restoration-10
- 10. Rootcanal treatment for Anterior teeth- 2

Demonstration:

- 1. Cast inlay restoration
- 2. Post core restoration
- 3. Molar endodontic treatment
- 4. Peri apical surgery
- 5. Esthetic restorative procedures

- Bleaching of teeth
- Veneers
- Diastema closures etc..
- 6. Tooth coloured inlays, onlays, crowns.

Scheme of Examination

A. Theory: 70 Marks

Distribution of Topic and Type of Questions

Contents	Type of questions and marks	Marks
One long essay from conservative topics One long essay from endodontics topics		20
Five questions from conservative topics including aesthetic dentistry Three questions from endodontics topics	Short essay 08× 5=40	40
Three questions from conservative topics including esthetic dentistry Two questions from endodontics topics	Short answer 5×2=10	10
	Total	70

- **B. VIVA VOICE= 20 MARKS**
- C. INTERNAL ASSESMENT -THEORY :10MARKS, PRACTICALS :10 MARKS
- D. PRACTICAL EXERCISE:90 MARKS
- 1. Preparation of class 2 cavity for amalgam and restoration
- 2. Anterior composite restoration

3. Root canal treatment for anterior tooth up to selection of master cone

Details of marks distribution of the practical examinations

- 1. Class II amalgam restoration
 - a. Case history recording, examination, diagnosis and treatment planning $\,$ $\,$ 15marks
 - b. Cavity preparation
 - c. Lining and matrix
 - d. Restoration and finishing

Total

- 30 marks

- 15 marks

- 30 marks

- 90 marks

- 2. Anterior composite restoration
 - a. Case history recording, examination, diagnosis and treatment planning

 15marks
 35 marks
 - b. Tooth preparation, shade selection and isolation
 - c. Restoration and finishing Total

- 40 marks

- 90 marks

3. Anterior RCT

- a. Case history recording, examination, diagnosis and treatment planning b. Access cavity preparation
- c. Working length
- d. Chemomechanical preparation and master cone selection
 Total
- 20marks
- 25marks
- 20 marks
- 25marks 90 marks

IV BDS ORAL AND MAXILLOFACIAL SURGERY

IV year BDS Theory: 50 hours

	T.		
1.	Dento-alveolar surgery	Trans alveolar extraction Impacted teeth: General factors, incidence, etiology Classification and indications Assesment: clinical & radiological Anaesthetic considerations Surgical procedure Impacted maxillary third molar & Impacted Canine	1 hour 4 hours
2.	Endodontic surgery	Introduction, classification, apicectomy, replantation	
3.	Infections of the oral cavity	Introduction, microbiology, anatomy of fascial spaces, course of odontogenic infections, Spread of infection, classification, clinical features, management Dentoalveolar abscess, ludwigs angina osteomyelitis and ORN. Hepatitis B and HIV	4 hours
4.	Cystic lesions of jaws	Definition, classification and pathogenesis Diagnosis, clinical features, radiological, aspiration biopsy, use of contrastmedia and histopathology Management-types of surgical procedures, and complications	3 hours
5.	Oral Implantology	Principles of implantology	2 hours
6.	Ethics		1 hour
7.	Preprosthetic surgery	Introduction, aims, classification Corrective procedures - hard & soft tissues Ridge extension and augmentation procedures	2 hours
8.	Diseases of maxillary Sinus	Surgical anatomy, Acute & chronic sinusitis	1 hour
		Oro antral fistula & Surgical approach for sinus	1 hour

9.	TMJ disorders	Surgical anatomy	1 hour
		Subluxation & Dislocation	1 hour
		Ankylosis	1 hour
		Myofunctional pain dysfunction syndrome	1 hour
		Internal derangement & Arthritis and other disorders	1 hour
10.	Tumors of the oral Cavity	General considerations, Carcinoma of oral cavity, TNM classification	1 hour
		Non odontogenic benign tumors - lipoma,fibroma, papilloma,ossifying fibroma, myoma etc	1 hour
		Ameloblastoma	1 hour
		Biopsy - types	1 hour
		Outline of management of squamous cell carcinoma, surgery, radiotherapy,chemotherapy.	1 hour
11.	Fractures of the jaws	General consideration, types of the fractures, etiology, C/F, and general principles. Dento-alveolar #methods of management	1 hour
		Mandibular Fractures – Applied Anatomy, Classification Diagnosis – Clinical and Radiological Features	1 hour
		Management -# of condyle - aetiology, classification, clinical features and general principles of management reduction and fixation	1 hour
		Fractures of middle third of the face, Definition of midface, applied surgical anatomy, classification, clinical features and outline of management	2 hour
		Orbital fractures & # of Zygomatic complex	1 hour
		Classification, C/F, indications for treatment, various methods of reduction and fixation.	2 hour
		Complications - delayed union, non-union and malunion.	1 hour
12.	Developmental deformities	Basic forms, prognathism, retrognathism and open bite. Reasons for correction, Outline of surgical methods carried out on maxilla and mandible	4 hour

13.	Salivary gland diseases	Salivary calculi and Infections of the salivery glands its management	1 hour
		Tumours of the salivary gland and management	1 hour
14.	Neurological disorders	Trigeminal neuralgia - definition, etiology , C/F and methods of management including surgery. Glossopharyngeal and Facial paralysis - etiology , clinical features	1 hour
		Nerve injuries - classification, neurorhaphy etc.	1 hour
15.	Cleft lip and cleft palate	Etiology, of the clefts, incidence, classifications role of dental surgeon in the management of cleft patients. Outline of the closure procedures.	4 hour

PRACTICAL AND CLINICALS: 200 HOURS

STUDENTS ARE REQUIRED TO LEARN THE FOLLOWING EXERCISES:

Case history taking Examination of the patient Recording blood pressure

Use of different instruments in Oral & Maxillofacial surgery Various local anaesthetic injection techniques on patients

Extraction of mobile and firm teeth

Trans-alveolar extraction of root stumps

Surgical removal of Simple impacted teeth

Management of dento-alveolar fractures with arch bar fixation, eyelets and inter-maxillary fixations.

Training in basic life support skills.

PRACTICAL AND CLINICALS QUOTA

Year	Clinical exercises	Quota	Category
IV year BDS			
	Extraction of mobile and firm teeth	60 cases	must do
	Trans-alveolar method of extraction with suturing	10 cases	must do
	Surgical removal of Simple impactions	5 cases	Desirable to do
	Management of dento-alveolar fractures with arch bar fixation, eyelets and inter-maxillary fixations	5 cases	Desirable to do
	IM & IV Injection techiniques	5 cases	Desirable to do
	Assisting major surgical procedures under general anaesthesia	5 cases	Desirable to do
	Training in Handling medical emergencies, CPR and basic life support		must do

SCHEME OF EXAMINATION

A. THEORY (UNIVERSITY WRITTEN EXAMINATION)

70 MARKS

DISTRIBUTION OF TOPICS AND TYPES OF QUESTIONS

Contents	Type of questions and marks	Marks
a. 1 Question from Local anaesthesia b. 1 Question from Oral surgery	Long Essays 2 x 10 marks	20
a. 5 Questions from Oral surgery b. 1Question from General anesthesia	Short Essays 6 x 5 marks	30
a. 9 Questions from Oral surgery b. 1 Question from Local anaesthesia	Short Answers 2 x 10	20
Local Anaesthesia		
Total		70

B. Internal Assessment-Theory: 10 marks, Clinicals: 10 marks

C. Clinicals: 90 Marks

I. Clinicals in Oral Surgery:

90 Marks (Extraction of firm tooth)

30 Marks 30 Marks 30 Marks

A. Case History B. Local anaesthesia technique

C. Extraction of firm tooth

(Maxillary/ Mandibular tooth) and management of the patient

20 Marks D. Viva Voce

Theory-100 marks

University written exam: 70 Viva Voce: 20 Internal assessment: 10 Total 100

Clinical:100 marks. 90 University exam: 10 Internal assessment 100

Total



ETHICS IN DENTISTRY

Introduction

There is a definitie shift now from the traditional patient and doctor relationship and delivery of dental care. With the advances in science and technology and the increasing needs of the patient, theirs families and community, there is a concern for the health of the community as a whole . There is a shift to greater accountability to the society. Dental specialists like the other health professionals are confronted with many ethical problems. It is therefore absolutely necessary for each and every one in the health care delivery to prepare themselves to deal with these problems. To accomplish this and develop human values, it is desired that all the trainess undergo ethical sensitization by lectures or discussion on ethical issues, discussion of cases with an important ethical component.

Course content:

Introduction to Ethics

- What is ethics?
- What are values and norms?
- How to form a value system in one's personal and professional life?
- Hippocratic oath.
- Declaration of Helsinki, WHO declaration of Geneve, International code of ethics, D.C.I.Code
 of ethis.

Ethics of the Individual

The patient as a person Right to be respected Truth and confidentiality Autonome of decision Doctor Patient relationship

Professional Ethics

Code of conduct Contract and confidentiality Charging of fees, fee splitting Prescription of drugs Over-investigating the patient Malpractice and negligence

Research Ethics:

Animal and experimental research/humanness Human experimentation Human volunteer research-informed consent Drug trials

Ethical workshop of cases Gathering all scientific factors Gathering all value factors Identifying areas of value-conflict, setting of priorities Working out criteria towards decisions

Recommended Reading:

Francis C.M., Medical Ethics, I Ed. 1993, Jaypee Brothers, New Delhi p.189.

REVISED RGUHS M.D.S. SYLLABUS

APPLICABLE TO MAY- 2018 ADMITTED MDS STUDENTS AND ONWARDS

SECTION I REGULATIONS

- 1. Title of the Course: It shall be called Master of Dental Surgery (MDS).
- 2. Branches of Study: The following are the subjects of specialty for the MDS degree:
 - a. Prosthodontics and Crown & Bridge
 - b. Periodontology
 - c. Oral & Maxillofacial Surgery
 - d. Conservative Dentistry and Endodontics
 - e. Orthodontics & Dentofacial Orthopedics
 - f. Oral & Maxillofacial Pathology & Oral Microbiology:
 - g. Public Health Dentistry
 - h. Pediatric Dentistry
 - i. Oral Medicine & Radiology

3. Eligibility

A candidate for admission to the MDS course (Master of Dental Surgery) must have a recognized degree of BDS (Bachelor of Dental Surgery) awarded by an Indian University in respect of recognized Dental College under Section 10(2) of the Dentists Act, 1948 or an equivalent qualification recognized by the Dental Council of India and should have obtained permanent registration with any of the State Dental Council.

Candidates who possess PG Diploma recognized by the DCI with the duration of 2 years in particular specialty is eligible for admission in MDS in the same specialty and the duration will be 2 years. The syllabus of the two years programme i.e PG- Diploma will be as per the existing DCI/university guidelines.

4. Criteria for Selection for Admission

Students for MDS Course shall be admitted based on performance at the competitive examinations held by Central Government and as per the orders issued by the state government from time to time.

There shall be a uniform NEET for admission to the post-graduate dental courses in each academic year conducted in the manner, as prescribed by the Central Government in this behalf.

5. Eligibility Certificate from RGUHS

No candidate shall be admitted to any postgraduate MDS course unless the candidate has obtained and produced eligibility certificate issued by University. The candidate has to make an application to the University with the following documents along with the prescribed fee:

- 1. BDS Pass / Degree certificate issued by the University.
- 2. Marks cards of all the university examinations passed (I to IV BDS year course).
- 3. Attempt Certificate issued by the Principal.
- 4. Completion of rotatory internship certificate from a recognized college.
- 5. Registration by any State Dental Council and
- 6. Proof of SC / ST or Category I, as the case may be. Candidates should obtain the Eligibility Certificate before the last date for admission as notified by the University.

6. Duration of the Course

The Course shall be of three years duration.

All the candidates for the degree of MDS are required to pursue the recommended course for at least three academic years as full time candidates in an institution affiliated to and approved for Postgraduate studies by Rajiv Gandhi University of Health Sciences, Karnataka, and recognized by the Dental Council India.

Provided that the time period required for passing out of the MDS course shall be a maximum of six years from the date of admission in said course.

7. Method of training

The training of postgraduate for degree shall be full time with graded responsibilities in the management and treatment of patients entrusted to his/her care. The participation of the students in all facets of educational process is essential. Every candidate should take part in seminars, group discussions, grand rounds, case demonstration, clinics, journal review meetings, CPC and clinical meetings. Every candidate should participate in the teaching and training programme of

undergraduate students. Training should include involvement in laboratory and experimental work, and research studies.

8. Attendance, Progress and Conduct

A candidate pursuing degree/diploma course should work in the concerned department of the institution for the full period as a full time student. No candidate is permitted to own a clinic/work in clinic/laboratory/nursing home while studying postgraduate course, no candidate shall join any other course of study or appear for any other examination conducted by this university or any other university in India or abroad during the period of registration.

Each year shall be taken as a unit for the purpose of calculating attendance from the date of commencement of academic session as per the COE of university or from the date of admission.

Every candidate shall attend symposia, seminars, conferences, journal review meetings, grand rounds, CPC, case presentation, clinics and lectures during each year prescribed by the department and not absent himself / herself from work without reasons.

Every candidate shall have not less than 80 percent of attendance in each year of the course. However, candidates should not be absent continuously as the course is a full time one.

9. Monitoring Progress of Studies

Work diary / Log Book: Every candidate shall maintain a work diary and record of his/ her participation in the training programme conducted by the department such as journal reviews, seminars, etc. Please see Chapter IV for model checklists and logbook.

Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate. The work diary shall be scrutinized and certified by the Head of the Department and Head of the Institution, and presented in the university practical/clinical examination.

Periodic tests:

In case of degree courses of three years duration, the concerned departments may conduct tests, one test three months before the Part I examination, the other in the second year. The third test may be held three months before the final examination. The tests may include written papers, practical / clinical and viva voce. Records and marks obtained in such tests will be maintained by the Head of the Department and sent to the University, when called for.

Records:

Records and marks obtained in tests will be maintained by the Head of the Department and will be made available to the University, when called for.

10. Dissertation

Every candidate pursuing MDS degree course is required to carry out work on a selected research project under the guidance of a recognized post graduate teacher. The results of such a work shall be submitted in the form of a dissertation.

The dissertation is aimed to train a postgraduate student in research methods and techniques. It includes identification of a problem, formulation of a hypothesis, search and review of literature, getting acquainted with recent advances, designing of a research study, collection of data, critical analysis and comparison of results and drawing conclusions.

Every candidate shall submit to the Registrar of the University in the prescribed proforma, a synopsis containing particulars of proposed dissertation work within six months from the date of commencement of the course on or before the dates notified by the University. The synopsis shall be sent through the proper channel.

Such synopsis will be reviewed and the dissertation topic will be registered by the University. No change in the dissertation topic or guide shall be made without prior approval of the University.

The dissertation should be written under the following headings:

- i. Introduction
- ii. Aims or Objectives of study
- iii. Review of literature
- iv. Results
- v. Discussions
- vi. Conclusion
- vii. Summarv
- viii. Reference
- ix. Tables
- x. Annexures

The written text of dissertation shall be not less than 50 pages and shall not exceed 150 pages excluding references, tables, questionnaires and other annexures. It should be typed in double line spacing on one side of paper (A4 size, 8.27" x 11.69"). Spiral binding should be avoided. The dissertation shall be certified by the guide, head of the department and head of the Institution.

Dissertation thus prepared shall be submitted online to the Registrar (Evaluation), six months before final examination on or before the dates notified by the University.

The dissertation shall be valued by two internal and two external examiners appointed by the University. Of the four examiners, accepted by any three shall be considered as approval. Approval of dissertation work is an essential precondition for a candidate to appear in the University examination.

Guide: The academic qualification and teaching experience required for recognition by this University as a guide for dissertation work is as laid down by Dental Council of India / Rajiv Gandhi University of Health Sciences.

Co-guide: A co-guide may be included provided the work requires substantial contribution from a sister department or from another institution. If the co-Guide is from a different institution, then it should be intimated to the RGUHS.

Change of guide: In the event of a registered guide leaving the college for any reason, in the event of death of guide, guide may be changed with prior permission from the university.

11. Scheme of Examination

Eligibility: The following requirements shall be fulfilled by every candidate to be eligible to appear for the final examination.

- i) **Attendance:** Every candidate shall have put in minimum of 80% attendance in each academic year in order to be eligible for the university examination.
- ii) Progress and conduct: Every candidate shall have participated in seminars, review meetings, symposia, conferences, case presentations, clinics and didactic during each year as designed by the concerned department
- iii) **Work diary and Logbook:** Every candidate shall maintain a work diary and logbook for recording his/her participation in the training programmes conducted by the department. The work diary and logbook shall be verified and certified by the Head of the Department and Head of the institution. (Please see Section IV for Model Checklist and Logbook)

The certification of satisfactory progress by the head of the department and head of the institution shall be based on (i), (ii) and (iii) mentioned above.

Schedule of Examination:

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of 1ST year and Part II at the end of 3 years including Practical/Clinical and Viva voce.

The Part - I examination for M.D.S. courses shall be held at the end of Ist year of the course and

Part – II examination shall be held at the end of Three years. The university shall conduct two examinations in a year at an interval of four to six months between the two examinations. Not more than two examinations shall be conducted in an academic year.

The university examination shall consist of theory, practical and clinical examination and viva-voce and Pedagogy.

(i) Theory:

Part-I: Basic Sciences Paper shall consist of one paper of 100 marks

There shall be a theory examination in the Basic Sciences at the end of 1st year of course. The question papers shall be set and evaluated by the eligible examiners appointed by the university. The candidates shall have to secure a minimum of 50% in the Basic Sciences and shall have to pass the **Part-I** examination at least six months prior to the final (Part-II) examination.

Part-II: Paper-I, Paper-II & Paper III Shall consist of three papers of 300 marks (100 marks for each paper)

In addition

- (ii) Practical and Clinical Examination;
- (iii) Viva-voce; and
- (iv) Pedagogy.

12. UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of 1ST year and Part II at the end of 3 years including Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS course.

Part-I: Applied Basic Sciences as specified in the syllabus of each course

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five

questions carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any

two questions. Each question carries 50 marks. Questions on recent advances may be asked in any

or all the papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory: (Total 400 Marks)

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

(2) Part II (3 papers of 100 Marks):-

(i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

EXAMINERS:

Part I: There shall be one internal and one external examiner for evaluating the answer scripts of

the same specialty.

Part II: There shall be four examiners in each subject. Out of them, two (50%) shall be external

examiners and two (50%) shall be internal examiners. Both external examiners shall be from a

university other than the affiliating university and one examiner shall be from a university of

different State.

CRITERIA FOR PASS.

To pass the university examination, a candidate shall secure in both theory examination and in

practical/clinical including viva voce independently with an aggregate of 50% of total marks allotted

(50 out of 100 marks in Part I examination and 150 marks out of 300 in Part II examination in

theory and 150 out of 300, clinical plus viva voce together). A candidate securing marks below 50%

as mentioned above shall be declared to have failed in the examination.

Sl	Year /part	Theory		Practical including viva		
no						
		Maximum marks	Passing criteria	Not applicable		
1.	Part – 1	100	50			
				Maximum	Passing	-
				marks	criteria	
		300	150	300	150	
2.	Part-II					

A candidate who is declared successful in the examination shall be granted a Degree of Master of Dental Surgery in the respective specialty.

Dissertation: Acceptance of dissertation shall be a precondition for the candidate to appear for the final examination.

13. Distribution of Topics in theory papers in various branches of study specialties:

SYLLABUS DISTRIBUTION AMONG 4 PAPERS IN VARIOUS SPECIALITIES:

(i) PROSTHODONTICS AND CROWN & BRIDGE

Part-I

Paper-I: **Applied Basic Sciences**: Applied anatomy, embryology, growth and development Genetics, Immunology, anthropology, Physiology, nutrition and Biochemistry, Pathology and Microbiology, virology, applied pharmacology, Research Methodology and bio statistics, Applied Dental anatomy and histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II

Paper-I: Removable Prosthodontics and Implant supported prosthosis(Implantology), Geriatric dentistry and Crania Facial Prosthodontics

Paper-II: Fixed Prosthodontics, occlusion, TMJ and esthetics.

Paper-III: Descriptive and analyzing type question

(ii) PERIODONTOLOGY

Part- I

Paper-I: **Applied Basic Sciences**: Applied Anatomy, Physiology, and Biochemistry, Pathology, Microbiology, Pharmacology, Research Methodology and Biostatistics.

Part-II

Paper I: Normal Periodontal structure, Etiology and Pathogenesis of Periodontal diseases, epidemiology as related to Periodontics

Paper II: Periodontal diagnosis, therapy and Oral implantology

Paper III: Descriptive and analysing type question

(iii) ORAL & MAXILLOFACIAL SURGERY

Part-I

Paper-I: **Applied Basic Sciences:** Applied Anatomy, Physiology, & Biochemistry, Pathology, Microbiology, Pharmacology, Research Methodology and Biostatistics.

Part- II:

Paper-I: Minor Oral Surgery and Trauma

Paper-II: Maxillo-facial Surgery

Paper-III: Descriptive and analysing type question

(iv) CONSERVATIVE DENTISTRY AND ENDODONTICS

Part-I

Paper-I: **Applied Basic Sciences:** Applied Anatomy, Physiology, Pathology including Oral Microbiology, Pharmacology, Biostatistics and Research Methodology and Applied Dental Materials.

Part-II

Paper-I: Conservative Dentistry

Paper-II: Endodontics

Paper-III: Descriptive and analysing type question

(v) ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

Part-I

Paper-I: Applied Basic Sciences: Applied anatomy, Physiology, Dental Materials, Genetics, Pathology, Physical Anthropology, Applied Research methodology, Bio-Statistics and Applied Pharmacology.

Part-II

Paper-I: Orthodontic history, Concepts of occlusion and esthetics, Child and Adult Psychology, Etiology and classification of malocclusion, Dentofacial Anomalies, Diagnostic

procedures and treatment planning in Orthodontics, Practice management in Orthodontic

Paper II: Clinical Orthodontics

Paper III: Descriptive and analyzing type question

(vi) ORAL AND MAXILLOFACIAL PATHOLOGY AND ORAL MICROBIOLOGY:

Part-I

Paper-I: Applied Basic Sciences: Applied anatomy, Physiology (General and oral), Cell Biology, General Histology, Biochemistry, General Pathology, General and Systemic Microbiology, Virology, Mycology, Basic Immunology, Oral Biology (oral and dental

histology), Biostatistics and Research Methodology

Part-II:

Paper-I: Oral pathology, Oral Microbiology and Immunology and Forensic Odontology

Paper-II: Laboratory techniques and Diagnosis and Oral Oncology

Paper-III: Descriptive and analyzing type question

(vii) PUBLIC HEALTH DENTISTRY

Part-I

Paper-I: **Applied Basic Sciences:** Applied Anatomy and Histology, Applied Physiology and Biochemistry, Applied Pathology, Microbiology, Oral Pathology, Physical and Social Anthropology, Applied Pharmacology and Research Methodology and Biostatistics.

Part-II:

Paper-I: Public Health

Paper-II: Dental Public Health

Paper-III: Descriptive and analyzing type question

(viii) PEDIATRIC DENTISTRY

Part-I

Paper I: **Applied Basic Sciences**: Applied Anatomy, Physiology, and Biochemistry, Pathology, Microbiology, Pharmacology, Research Methodology and Biostatistics Growth and Development and Dental plaque, Genetics.

Part-II:

Paper-I: Clinical Pedodontics

Paper-II: Preventive and Community Dentistry as applied to pediatric dentistry

Paper-III: Descriptive and analyzing type question

(ix) ORAL MEDICINE AND RADIOLOGY

Part-I

Paper I: **Applied Basic Sciences:** Applied Anatomy, Physiology, and Biochemistry, Pathology, Microbiology, Pharmacology, Research Methodology and Biostatistics

Part-II:

Paper-I: Oral and Maxillofacial Radiology

Paper-II: Oral Medicine, therapeutics and laboratory investigations

Paper-III: Descriptive and analyzing type question

SECTION II

GOALS & OBJECTIVES OF MDS COURSE

Goals:

The goals of postgraduate training in various specialties is to train B.D.S. graduate who will, after successful completion of the course:

- © Practice respective specialty efficiently and effectively, backed by scientific knowledge and skill.
- © Exercise empathy and a caring attitude and maintain high ethical standards.
- © Continue to evince keen interest in continuing professional education in the specialty and allied specialties irrespective of whether in teaching or practice.
- © Willing to share the knowledge and skills with any learner, junior or a colleague.
- ©Develop the faculty for critical analysis and evaluation of various concepts and views, to adopt the most rational approach.

Objectives:

The objective is to train a candidate so as to ensure higher competence in both general and special area of interest and prepare him for a career in teaching, research and specialty practice. A candidate must achieve a high degree of clinical proficiency in the subject matter and develop competence in research and its methodology as related to the field concerned.

The above objectives are to be achieved by the time the candidate completes the course. The objectives may be considered as under -

- 1. Knowledge (Cognitivedomain)
- 2. Skills (Psycho motordomain)
- 3. Human values, ethical practice and communication abilities

Knowledge:

- © Demonstrate understanding of basic sciences relevant to specialty.
- © Describe etiology, pathophysiology, principles of diagnosis and management of common problems within the specialty in adults and children.
- © Identify social, economic, environmental and emotional determinants in a given case and take them into account for planning treatment.
- © Recognize conditions that may be outside the area of specialty/competence and to refer them to an appropriate specialist.
- © Update knowledge by self-study and by attending courses, conferences, seminars relevant to specialty.
- © Undertake audit, use information technology and carry out research with the aim of publishing or presenting the work at various scientific gatherings.

Skills:

- 1. Take a proper clinical history, examine the patient, perform essential diagnostic procedures and order relevant tests and interpret them to come to a reasonable diagnosis about the condition.
- 2. Acquire adequate skills and competence in performing various procedure required in the specialty.

Human values, ethical practice and communication abilities:

- © Adopt ethical principles in all aspects of practice.
- © Professional honesty and integrity are to be fostered.
- © Patient care is to be delivered irrespective of social status, caste, creed or religion of the patient.
- © Develop communication skills, in particular and skill to explain various options available in management and to obtain a true informed consent from the patient
- © Provide leadership and get the best out of his team in a congenial working atmosphere.
- © Apply high moral and ethical standards while carrying out human or animal research.
- © Be humble and accept the limitations in his knowledge and skill and to ask for help from colleagues when needed.
- © Respect patient's rights and privileges including patient's right to information and right to seek a second opinion.

SECTION III

COURSE DESCRIPTION OF VARIOUS SPECIALTIES

1. DEFINITIONS OF VARIOUS SPECIALITIES:

1. Prosthodontics and Crown & Bridge

Prosthodontics and Crown & Bridge and Oral Implantology i.e. that branch of Dental art and science pertaining to the restoration and maintenance of oral function, health, comfort and appearance by the replacement of missing or lost natural teeth and associated tissues either by fixed or removable artificial substitutes.

2. Periodontology

Periodontology and Oral Implantology is the science dealing with the health and diseases of the investing and supporting structures of the teeth and oral mucous membrane.

3. Oral & Maxillofacial Surgery

Oral and Maxillofacial surgery and Implantology deals with the diagnosis and surgical and adjunctive treatment of diseases, injuries and defects of the human jaws and associated oral and facial structures.

4. Conservative Dentistry and Endodontics

Conservative dentistry deals with prevention and treatment of the diseases and injuries of the hard tissues and the pulp of the tooth and associated periapical lesions.

5. Orthodontics and Dentofacial Orthopedics

Deals with prevention and correction of oral anomalies and malocclusion and the harmonizing of the structures involved, so that the dental mechanisms will function in a normal way.

6. Oral Pathology & Microbiology

Oral Pathology deals with the nature of oral diseases, their causes, processes and effects. It relates the clinical manifestation of oral diseases to the physiologic and anatomic changes associated with these diseases.

7. Public Health Dentistry

Community Dentistry is the science and art of preventing and controlling Dental diseases and promoting Dental health through organized community efforts.

8. Pedodontics and Preventive Dentistry

Deals with prevention and treatment of oral and Dental ailments that may occur during childhood.

9. Oral Medicine and Radiology

Oral Medicine is that specialty of dentistry concerned with the basic diagnostic procedures and techniques useful in recognizing the diseases of the oral tissues of local and constitutional origin and their medical management.

Radiology is a science dealing with x-rays and their uses in diagnosis and treatment of diseases in relation to orofacial diseases.

2. Course contents

Prosthodontics

To train dental graduates so as to ensure higher competence in both general and special area of Prosthodontics and prepare a candidate for teaching, research and clinical abilities including prevention and after care in prosthodontics including crown and bridge-and implantology.

General Objectives of the Course:

- © Training programme in Prosthodontic dentistry including Crown & Bridge & Implantology is structured to achieve knowledge and skill in theoretical and clinical laboratory, attitude, communicative skills and ability to research with understanding of social, cultural, education and environmental background of the society
- © To have acquired adequate knowledge and understanding of applied basic and systematic medical science knowledge in general and particular to head and neck.
- © The postgraduates will be able to provide Prosthodontic therapy for patients with competence and working knowledge with understanding of applied medical, behavioral and clinical science that are beyond the treatment skills of the general BDS graduate and MDS graduate of other specialties to demonstrate evaluative and judgment skills in making appropriate decisions regarding prevention, treatment aftercare and referral to deliver comprehensive care to patients.

Knowledge

The candidate should possess knowledge applied basic and systematic medical sciences.

© On human anatomy, embryology, histology, applied in general and particular to head and neck, Physiology & Biochemistry, Pathology and microbiology, virology, Health and diseases of various systems of the body (systemic) principles in surgery and medicine, Pharmacology, Nutrition,

behavioral Science, Age changes, genetics, Immunology, Congenital defects and syndrome and Anthropology, Bioengineering, Bio-medical and Biological Principle and application Dental material science

- © Ability to diagnose and plan treatment for patients requiring a Prosthodontic therapy
- © Ability to read and interpret a radiograph and other investigations for the purpose of diagnosis treatment planning.
- © Tooth and tooth surface restorations, Complete denture prosthodontics, removable partial dentures Prosthodontics, fixed prosthodontics and maxillofacial and Craniofacial Prosthodontics, implants supported Prosthodontics, T.M.J, and occlusion, craniofacial esthetic, and biomaterials. Craniofacial disorders, problems of psychogenic origin.
- © Age changes and Prosthodontic Therapy for aged.
- © Ability to diagnose failed restoration and provide Prosthodontic therapy and after care.
- © Should have essential knowledge on ethics, laws and Jurisprudence and forensic odontology in Prosthodontics
- © General health conditions and emergency as related to prosthodontics treatment,
- © Identify social, cultural, economic, environmental, educational and emotional determinants of the patient and consider them in planning the treatment.
- © Identify cases, which are outside the area of his specialty/ competence and refer them to appropriate specialists.
- © Advice regarding case management involving surgical, interim treatment etc.
- © Competent specialization in team management of craniofacial design.
- © Should attend continuing education programmes, seminars and conferences related to prosthodontics in thus updating himself/herself.
- © Teach and guide his / her team, colleague and other students.
- © Should be able to use information technology tools and carry out research basic and clinical, with the aims of publishing his/her work and presenting his/her work at various scientific forums.
- © Should have essential knowledge of personal hygiene, infection control, prevent of cross infection and safe disposal of waste, keeping in view the risks of transfer of Hepatitis & HIV
- © Should have an ability to plan to establish Prosthodontic clinic/department in a teaching hospital

© Should have a sound knowledge for the application of pharmacology, effects of drugs on oral tissues and systems of the body and on medically compromised individuals.

Skills

- © The candidate should be able to examine the patients requiring Prosthodontic therapy, investigate the patient systemically, analyze the investigation results,
- radiography, diagnose the ailment, plan a treatment, communicate it with the patient and execute it.
- © Understand the prevalence and prevention of diseases of craniomandibular system related to Prosthetic dentistry.
- © The candidate should be able to restore the lost functions of the stomatognathic system namely speech, mastication etc to provide a quality health care for craniofacial region
- © The candidate should be able to interact with other speciality including a medical speciality for a planned team management of patients for a craniofacial and oral acquired and congenital defects, Temporomandibular joint syndromes, esthetics, Implant supported Prosthetics and problems of Psychogenic origin,
- © Should be able to demonstrate the clinical competence necessary to carry out appropriate treatment at higher level of knowledge, training and practice skills currently available in their specialty area.
- © Identify target diseases and awareness amongst the population for Prosthodontic therapy.
- © Perform clinical and Laboratory procedure with understanding of biomaterials, tissue conditions related to prosthesis and have competent dexterity and skill for performing clinical and laboratory procedures in fixed, removable, implant and maxillofacial TMJ, esthetics Prosthodontics.
- © Laboratory technique management based on skills and knowledge of Dental Materials and dental equipment and instruments,
- © To understand demographic distribution and target diseases of Cranio mandibular region related to Prosthodontic including crown & bridge and implantology.

Attitudes

- © Adopt ethical principles in all Prosthodontic practice. Professional honesty and integrity are to be fostered. Treatment to be delivered irrespective of social status, caste, creed or religion of patient.
- © Willing to share the knowledge and clinical experience with professional colleagues.

- © Willing to adopt new methods and techniques in prosthodontics from time to time based on scientific research, which is in patient's best interest.
- © Respect patient's rights and privileges including patients right to information and right to seek second opinion.

Communication Abilities

- © Develop communication skills, in particular, to explain treatment option available in management.
- © Provide leadership and get the best out of his group in a congenial working atmosphere.
- © Should be able to communicate in simple understandable language with the patient and explain the principles of prosthodontics to the patient. He should be able to guide and counsel the patient with regard to various treatment modalities available.
- © Develop the ability to communicate with professional colleagues through various media like Internet, e-mail, videoconference, and etc. to render the best possible treatment.

Course Contents

- © The candidates shall undergo training for 3 academic years with satisfactory attendance of 80% for each year.
- © The course includes epidemiology and demographic studies, research and teaching skills.
- © Ability to prevent, diagnose and treat with after care for all patients for control of diseases and / or treatment related syndromes with patient satisfaction for restoring functions of Stomatognathic system by Prosthodontic therapy

The program out line addresses the knowledge, procedural and operative skills needed in Masters Degree in Prosthodontics. A minimum of 3 years of formal training through a graded system of education as specified will enable the trainee to achieve Masters Degree in Prosthodontics including Crown & Bridge and Implantology, competently and have the necessary skills/ knowledge to update themselves with advancements in the field. The course content has been identified and categorized as Essential knowledge as given below.

Essential Knowledge

The topics to be considered are: Basic Sciences, Biological and mechanical considerations in Prosthodontics including Crown and Bridge Implantology and Material Science.

APPLIED BASIC SCIENCES

© Although knowledge on the applied aspects of Anatomy, Embryology, Histology and applied in general and particular to head and neck, Physiology, Biochemistry, Pathology and Microbiology, Virology.

© Pharmacology, Health and diseases of various systems of Body (systemic) principles in surgery medicine and Anesthesia, Nutrition, Behavioral sciences, age changes, genetics, Dental Material Science, congenital defects and Syndromes and Anthropology, Biomaterial Sciences Bioengineering and Biomedical and Research Methodology as related to Masters degree prosthodontics including crown & bridge and implantology.

It is desirable to have adequate knowledge in Bio-statistics Research Methodology and use of computers. To develop necessary teaching skills in Prosthodontics including crown and bridge and implantology

Applied anatomy of Head and Neck

General Human Anatomy - Gross Anatomy, anatomy of Head & Neck in detail. Cranial and facial bones, TMJ and function, muscles of mastication and facial expression, muscles of neck and chain of back muscles including muscles of deglutition and tongue, arterial supply and venous drainage of the head and neck, anatomy of the Para nasal sinuses with relation** to the Vth cranial nerve. General consideration of the structure and function of the brain, ^considerations of V, VII, XI, XII, cranial nerves and autonomic nervous system of the dand neck. The salivary glands, Pharynx, Larynx Trachea, Esophagus, Functional Anatomy mastication, Deglutition, speech, respiration, and circulation, teeth eruption, morphology, elusion and function. Anatomy of TMJ, its movements and myofacial pain dysfunction syndrome.

Embryology- Development of the face, tongue, jaws, TMJ, Paranasal sinuses, pharynx, larynx, trachea, esophagus, Salivary glands, Development of oral and Para oral tissue including detailed aspects of tooth and dental hard tissue formation

Growth & Development - Facial form and Facial growth and development overview of Dentofacial growth process and physiology from fetal period to maturity and old age, comprehensive study of craniofacial biology. General physical growth, functional and anatomical aspects of the head, changes in craniofacial skeletal, relationship between . development of the dentition and facial growth.

Dental Anatomy - Anatomy of primary and secondary dentition, concept of occlusion, mechanism of articulation, and masticatory function. Detailed structural and functional study of the oral dental and Para oral tissues. Normal occlusion, development of occlusion in deciduous mixed and permanent dentitions, root length, root configuration, tooth-numbering system.

Histology - histology of enamel, dentin, Cementum, periodontal ligament and alveolar bone, pulpal anatomy, histology and biological consideration. Salivary glands and Histology of epithelial tissues including glands.

Histology of general and specific connective tissue including bone, hematopoietic system, lymphoid etc.

Muscle and neural tissues Endocrinal system including thyroid Salivary glands Histology of skin, oral mucosa, respiratory mucosa, connective tissue, bone, cartilage, cellular elements of blood vessels, blood, lymphatic, nerves, muscles, tongue, tooth and its surrounding structures.

Anthropology & Evolution - Comparative study of tooth, joints, jaws, muscles of mastication and facial expression, tongue, palate, facial profile and facial skeletal system. Comparative anatomy of skull, bone, brain, musculo - skeletal system, neuromuscular coordination, posture and gait - planti gradee and ortho gradee posture.

Applied Genetics and Heredity - Principles of orofacial genetics, molecular basis of genetics, genetic risks, counseling, bioethics and relationship to Orthodontic management. Dentofacial anomalies, Anatomical, psychological and pathological characteristic of major groups of developmental defects of the orofacial structures

cell biology - Detailed study of the structure and function of the mammalian cell with special emphasis on ultra structural features and molecular aspects. Detailed consideration of Intercellular junctions. Cell cycle and division, cell-to-cell and cell- extra cellular matrix interactions.

Applied Physiology and Nutrition - Introduction, Mastication, deglutition, digestion and assimilation, Homeostasis, fluid and electrolyte balance. Blood composition, volume, function, blood groups and hemorrhage, Blood transfusion, circulation, Heart, Pulse, Blood pressure, capillary and lymphatic circulation, shock, respiration, control, anoxia, hypoxia, asphyxia, artificial respiration. Endocrine glands in particular reference to pituitary, parathyroid and thyroid glands and sex hormones. Role of calcium and Vit D in growth and development of teeth, bone and jaws. Role of Vit. A, C and B complex in oral mucosal and periodontal health. Physiology and function of the masticatory system. Speech mechanism, mastication, swallowing and deglutition mechanism, salivary glands and Saliva

Endocrines- General principles of endocrine activity and disorders relating to pituitary, thyroid, pancreas, parathyroid, adrenals, gonads, including pregnancy and lactation. Physiology of saliva, urine formation, normal and abnormal constituents, Physiology of pain, Sympathetic and parasympathetic nervous system. Neuromuscular co-ordination of the stomatognathic system.

Applied Pharmacology and Therapeutics- Definition of terminologies used - Dosage and mode of administration of drugs. Action and fate of drugs in the body, Drug addiction, tolerance and hypersensitive reactions, Drugs acting on the central nervous system, general anesthetics hypnotics. Analeptics and tranquilizers, Local anesthetics, Chemotherapeutics and antibiotics, Antitubercular and anti syphilitic drugs, Analgesics and antipyretics, Antiseptics, styptics, Sialogogues and antisialogogues, Haematinics, Cortisone, ACTH, insulin and other antidiabetics

Applied Pathology - Inflammation, repair and degeneration, Necrosis and gangrene, Circulatory disturbances, Ischemia, hyperemia, chronic venous congestion, edema, thrombosis, embolism and infarction. Infection and infective granulomas, Allergy and hypersensitive reaction, Neoplasm; Classification of tumors, Carcinogenesis, characteristics of benign and malignant tumors, spread of tumors. Applied histo pathology and clinical pathology.

Applied Microbiology- Immunity, knowledge of organisms commonly associated with diseases of the oral cavity (morphology cultural characteristics etc) of strepto, staphylo, pneumo, gono and meningococci, Clostridia group of organisms, Spirochetes, organisms of tuberculosis, leprosy, diphtheria, actinomycosis and moniliasis etc. Virology, Cross infection control, sterilization and hospital waste management

- a) Applied Oral Pathology -Developmental disturbances of oral and Para oral structures, Regressive changes of teeth, Bacterial, viral and mycotic infections of oral cavity, Dental caries, diseases of pulp and periapical tissues, Physical and chemical injuries of the oral cavity, oral manifestations of metabolic and endocrine disturbances, Diseases of the blood and blood forming organism in relation to the oral cavity, Periodontal diseases, Diseases of the skin, nerves and muscles in relation to the Oral cavity.
- **b) Laboratory determinations-** Blood groups, blood matching, R.B.C. and W.B.C. count, Bleeding and clotting time, Smears and cultures urine analysis and culture

BioStatistics- Study of Biostatistics as applied to dentistry and research. Definition, aim characteristics and limitations of statistics, planning of statistical experiments, sampling, collection, classification and presentation of data (Tables, graphs, pictograms etc) Analysis of data

Introduction to biostatistics- Scope and need for statistical application to biological data. Definition of selected terms - scale of measurements related to statistics, Methods of collecting data, presentation of the statistical diagrams and graphs.

Frequency curves, mean, mode of median, Standard deviation and co-efficient of variation, Correlation - Co-efficient and its significance, Binominal distributions normal distribution and Poisson distribution, Tests of significance

Research methodology - Understanding and evaluating dental research, scientific method and the behavior of scientists, understanding to logic - inductive logic - analogy, models, authority, hypothesis and causation, Quacks, Cranks, Abuses of Logic, Measurement and Errors of measurement, presentation of results, Reliability, Sensitivity and specificity diagnosis test and measurement, Research Strategies, Observation, Correlation, Experimentation and Experimental design. Logic of statistical interference balance judgements, judgement under uncertainty, clinical

vs., scientific judgement, problem with clinical judgement, forming scientific judgements, the problem of contradictory evidence, citation analysis as a Means of literature evaluation, influencing judgement: Lower forms of Rhetorical life, Denigration, Terminal, Inexactitude.

Applied Radiology- Introduction, radiation, background of radiation, sources, radiation biology, somatic damage, genetic damage, protection from primary and secondary radiation, Principles of X-ray production, Applied principles of radio therapy and after care.

Roentgenographs Techniques- Intra oral: Extra oral roentgenography, Methods of localization digital radiology and ultra sound, Normal anatomical landmarks of teeth and jaws in radiograms, temporomandibular joint radiograms, neck radiograms.

Applied medicine-Systemic diseases and its influence on general health and oral and&fenta! health. Medical emergencies in the dental offices - Prevention, preparation, medico legal consideration, unconsciousness, respiratory distress, altered consciousness, seizures, drug related emergencies, chest pain, cardiac arrest, premedication, and management of ambulatory patients, resuscitation, applied.

psychiatry, child, adult and senior citizens. Assessment of case, premaliation, inhibition, monitoring, extubalin, complication assist in O.T. for anesthesia.

Applied surgery & Anesthesia-General principles of surgery, wound healing, incision wound care, hospital care, control of hemorrhage, electrolyte balance. Common bandages, sutures, splints, shifting of critically ill patients, prophylactic therapy, bone surgeries, grafts, etc, surgical techniques, nursing assistance, anesthetic assistance.

Principles in speech therapy, surgical and radiological craniofacial oncology, applied surgical ENT and ophthalmology.

Plastic surgery - Applied understanding and assistance in programmes of plastic surgery for prosthodontics therapy.

Applied Dental Material

- © All materials used for treatment of craniofacial disorders Clinical, treatment, and laboratory materials, Associated materials, Technical consideration, shelf life, storage, manipulations, sterilization, and waste management.
- © Students shall be trained and practiced for all clinical procedures with an advanced knowledge of theory of principles, concepts and techniques of various honorably accepted methods and materials for Prosthodontics, treatment modalities including honorably accepted methods of diagnosis, treatment plan, records maintenance, and treatment and laboratory procedures and after care and preventive.

- © Understanding all applied aspects for achieving physical, psychological well being of the patients for control of diseases and / or treatment related syndromes with the patient satisfaction and restoring function of Cranio mandibular system for a quality life of a patient
- © The theoretical knowledge and clinical practice shall include principles involved for support, retention, stability, esthetics, phonation, mastication, occlusion, behavioral, psychological, preventive and social aspects of science of Prosthodontics including Crown & Bridge and Implantology
- © Theoretical knowledge and clinical practice shall include knowledge for laboratory practice and material science. Students shall acquire knowledge and practice of history taking, systemic and oro and Craniofacial region and diagnosis and treatment plan and prognosis record maintaining. A comprehensive rehabilitation concept with pre prosthetic treatment plan including surgical Reevaluation and prosthodontic treatment plan, impressions, jaw relations, utility of face bow and articulators, selection and positioning of teeth for retention, stability, esthetics, phonation and psychological comfort. Fit and insertion and instruction for patients after care and preventive Prosthodontics, management of failed restorations.
- © TMJ syndromes, occlusion rehabilitation and craniofacial esthetics. State of the art clinical methods and materials for implants supported extra oral and intra oral prosthesis.
- © Student shall acquire knowledge of testing biological, mechanical and other physical property of all materials used for the clinical and laboratory procedures in prosthodontic therapy.
- © Students shall acquire full knowledge and practice Equipments, instruments, materials, and laboratory procedures at a higher competence with accepted methods.
- © All clinical practice shall involve personal and social obligation of cross infection control, sterilization and waste management.

I. REMOVABLE PROSTHODONTICS AND IMPLANTS

- a. Prosthodontic treatment for completely edentulous patients Complete denture, immediate complete denture, single complete denture, tooth supported complete denture, Implant supported Prosthesis for completely edentulous.
- b. Prosthodontic treatment for partially edentulous patients: Clasp- retained partial dentures, intra coronal and extra coronal precision attachments retained partial dentures, maxillofacial prosthesis.

Prosthodontic treatment for edentulous patients: -Complete Dentures and Implant supported Prosthesis for Edentulous in both the arches

Complete Denture Prosthesis - Definitions, terminology, G.P.T., Boucher's clinical dental terminology

Scope of Prosthodontics - the Cranio Mandibular system and its functions, the reasons for loss of teeth and methods of restorations,

Infection control, cross infection barrier - clinical and laboratory and hospital and lab waste management

- a) Edentulous Predicament, Biomechanics of the edentulous state, Support mechanism for the natural dentition and complete dentures, Biological considerations, Functional and Para functional considerations, Esthetic, behavioral and adaptive responses, Temporomandibular joints changes.
- b) Effects of aging of edentulous patients aging population, distribution and edentulism in old age, impact of age on edentulous mouth Mucosa, Bone, saliva, jaw movements in old age, taste and smell, nutrition, aging, skin and teeth, concern for personal appearance in old age
- c) Sequalae caused by wearing complete denture the denture in the oralenvironment Mucosal reactions, altered taste perception, burning mouth syndrome, gagging, residual ridge reduction, denture stomatitis, flabby ridge, denture irritation hyperplasia, traumatic Ulcers, Oral cancer in denture wearers, nutritional deficiencies, masticatory ability and performance, nutritional status and masticatory functions.
- d) Temporomandibular disorders in edentulous patients Epidemiology, etiology and management, Pharmacotherapy, Physical modalities, and Bio-behavioral modalities
- e) Nutrition Care for the denture wearing patient Impact of dental status of food intake, Gastrointestinal functions, nutritional needs and status of older adults, Calcium and bone health, vitamin and herbal supplementation, dietary counseling and risk factor for malnutrition in patients with dentures and when teeth are extracted.
- f) Preparing patient for complete denture patients Diagnosis and treatment planning for edentulous and partially edentulous patients familiarity with patients, principles of perception, health questionnaires and identification data, problem identification, prognosis and treatment identification data, problem identification, prognosis and treatment planning contributing history patient's history, social information, medical status systemic status with special reference to debilitating diseases, diseases of the joint, cardiovascular, disease of the skin, neurological disorders, oral malignancies, climacteric, use of drugs, mental health mental attitude, psychological changes, adaptability, geriatric changes physiologic, pathological, pathological and intra oral changes. Intra oral health mucosa membrane, alveolar ridges, palate and vestibular sulcus and dental health.

Data collection and recording, visual observation, radiography, palpation, measurement

- sulci or fossae, extra oral measurement is the vertical dimension of occlusion, diagnostic casts.

Specific observations - existing dentures, soft tissue health, hard tissue health - teeth, bone.

Biomechanical considerations - jaw relations, border tissues, saliva, muscular development - muscle tones, neuromuscular co-ordination, tongue, cheek and lips.

Interpreting diagnostic findings and treatment planning

g) Pre prosthetic surgery - Improving the patients denture bearing areas and "relations: - non surgical methods - rest for the denture supporting tissues, 0m! correction of the old prosthesis, good nutrition, conditioning of the patients musculature, surgical methods - Correction of conditions, that preclude optimal prosthetic function - hyperplastic ridge - epulis fissuratum and papillomatosis, frenular attachments and pendulous maxillary tuberosities, ridge augmentation,

maxillary and Mandibular oral implants, corrections of congenital deformities, discrepancies in jaw size, relief of pressure on the mental foramen, enlargement of denture bearing areas, vestibuloplasty, ridge augmentation, replacement of tooth roots with Osseo integrated denture implants.

h) Immediate Denture - Advantages, disadvantages, contra indication, diagnosis treatment plan and prognosis, Explanation to the patient, Oral examinations, examination of existing prosthesis, tooth modification, prognosis, referrals / adjunctive care, oral prophylaxis and other treatment needs.

First extraction / surgical visit, preliminary impressions and diagnostic casts, management of loose teeth, custom trays, final impressions and final casts two tray or sectional custom impression tray, location of posterior limit and jaw relation records, setting the denture teeth / verifying jaw relations and the patient try in, laboratory phase, setting of anterior teeth, Wax contouring, flasking and boil out, processing and finishing, surgical templates, surgery and immediate denture insertion, post operative care and patient instructions, subsequent service for the patient on the immediate denture, over denture tooth attachments, implants or implant attachments.

- i) Over dentures (tooth supported complete dentures) indications and treatment planning, advantages and disadvantages, selection of abutment teeth, lose of abutment teeth, tooth supported complete dentures. Non-coping abutments, abutment with copings, abutments with attachments, submerged vital roots, preparations of the retained teeth.
- j) Single Dentures: Single Mandibular denture to oppose natural maxillary teeth, single complete maxillary denture to oppose natural Mandibular teeth to oppose a partially edentulous Mandibular arch with fixed prosthesis, partially edentulous Mandibular arch with removable partial dentures. Opposing existing complete dentures, preservation of the residual alveolar ridge,

necessity for retaining maxillary teeth and mental trauma.

- k) Art of communication in the management of the edentulous predicament Communication scope, a model of communication, why communication . important, what are the elements of effective communications, special significance of doctor / patient communication, doctor behavior, The iatrosedative (doctor & act of making calm) recognizing and acknowledging the problem, exploring and identifying the problem, interpreting and explaining the problem, offering a solution to the problem for mobilize their resources to operate most efficient way, recognizing and acknowledging the problem, interpreting and explaining the problem, offering a solution to the problem.
- I) Materials prescribed in the management of edentulous patients Denture base materials, General requirements of biomaterials for edentulous patients, requirement of an ideal denture base, chemical composition of denture base resins, materials used in the fabrication of prosthetic denture teeth, requirement of prosthetic denture teeth, denture lining materials and tissue conditioners, cast metal alloys as denture, bases base metal alloys.
- m) Articulators Classification, selection, limitations, precision, accuracy and sensitivity, and Functional activities of the lower member of the articulator and uses,
- n) Fabrications of complete dentures complete denture impressions muscles of facial expressions and anatomical landmarks, support, retention, stability, aims and objectives preservation, support, stability, aesthetics, and retention. Impression materials and techniques need of 2 impressions the preliminary impression and final impression.

 Developing an analogue / substitute for the maxillary denture bearing area -anatomy of supporting structures mucous membrane, hard palate, residual ridge, shape of the supporting structure and

factors that influence the form and size of the supporting bones, incisive foramen, maxillary tuberosity, sharp spiny process, torus palatinus, Anatomy of peripheral or limiting structures, labial vestibule, Buccal vestibule, vibrating line, preliminary and final impressions, impression making, custom tray and refining the custom tray, preparing the tray to secure the final impression, making the final impression, boxing impression and making the casts

Developing an analogue / substitute for the Mandibular denture bearing area-Mandible - anatomy of supporting structure, crest of the residual ridge, the Buccal shelf, shape of supporting structure, mylohyoid ridge, mental foramen, genial tubercles, torus mandibularis, Anatomy of peripheral or limiting structure - labial vestibule, Buccal vestibule, lingual border, mylohyoid muscle, retromylohyoid fossa, sublingual gland region, alveolingual sulcus, Mandibular impressions - preliminary impressions, custom tray, refining, preparing the tray\, final impressions.

m) Mandibular movements, Maxillo mandibular relation and concepts of occlusion - Gnathology, identification of shape and location of arch form - Mandibular and maxillary, occlusion rim, level of occlusal plane and recording of trail denture base, tests to determine vertical dimension of occlusion, interocclusal, centric relation records, Biological and clinical considerations in making jaw relation records and transferring

records from the patients to the articulator, Recording of Mandibular movements - influence of opposing tooth contacts, Temporomandibular joint, muscular involvements, neuromuscular regulation of Mandibular motion, the envelope of motion, rest position, Maxillo - Mandibular relations - the centric, eccentric, physiologic rest position, vertical dimension, occlusion, recording methods - mechanical, physiological, Determining the horizontal jaw relation - Functional graphics, tactile or interocclusal check record method, Orientation / sagittal relation records, Arbitrary / Hinge axis and face bow record, significance and requirement, principles and biological considerations and securing on articulators.

- n) Selecting and arranging artificial teeth and occlusion for the edentulous patient anterior tooth selection, posterior tooth selection, and principles in arrangement of teeth, and factors governing position of teeth - horizontal, vertical. The inclinations and arrangement of teeth for aesthetics, phonetics and mechanics -to concept of occlusion.
- o) The Try in verifying vertical dimension, centric relation, establishment of posterior palatal seal, creating a facial and functional harmony with anterior teeth, harmony of spaces of individual teeth position, harmony with sex, personality and age of the patient, co-relating aesthetics and incisalguidance.
- p) Speech considerations with complete dentures speech production structural and functional demands, neuropsychological background, speech production and the roll of teeth and other oral structures bilabial sounds, labiodentals sounds, linguodental sounds, linguoalveolar sound, articulatoric characteristics, acoustic characteristics, auditory characteristics, linguopalatal and linguoalveolar sounds, speech analysis and prosthetic considerations.
- q) Waxing contouring and processing the dentures their fit and insertion and after care laboratory procedure wax contouring, flasking and processing, laboratory remount procedures and selective, finishing and polishing. Critiquing the finished prosthesis doctors evaluation, patients evaluation, friends evaluation, elimination of basal surface errors, errors in occlusion, interocclusal records for remounting procedures verifying centric relation, eliminating occlusal errors, special instructions to the patient appearance with new denture, mastication with new dentures, speaking with new dentures, oral hygiene with dentures, preserving of residual ridges and educational material for patients, maintaining the comfort and health of the oral cavity in the rehabilitated edentulous patients. Twenty-four hours oral examination and treatment and preventive Prosthodontic periodontic recall for oral examination 3 to 4 months intervals and yearly intervals.
- m) Implant supported Prosthesis for partially edentulous patients Science of Osseo integration, clinical protocol for treatment with implant supported over dentures, managing problems and complications, implant Prosthodontics for edentulous patients: current and future directions.
- Implant supported prosthesis for partially edentulous patients Clinical and laboratory protocol:
 Implant supported prosthesis, managing problems and implications.

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- © Introduction and Historical Review
- © Biological, clinical and surgical aspects of oral implants
- © Diagnosis and treatment planning
- © Radiological interpretation for selection of fixtures
- © Splints for guidance fort surgical placement of fixtures
- © Intra oral plastic surgery © Guided bone and Tissue generation consideration for implants fixture. © © Implants supported prosthesis for complete edentulism and partial edentulism
- © Occlusion for implants support prosthesis.
- © Peri-implant tissue and Management
- © Peri-implant and management
- © Maintenance and after care
- © Management of failed restoration.
- © Work authorization for implant supported prosthesis definitive instructions, legal aspects, delineation of responsibility.

Prosthodontic treatment for partially edentulous patients - Removable partial Prosthodontics -

a. Scope, definition and terminology, Classification of partially edentulous arches - requirements of an acceptable methods of classification, Kennedy's classification, Applegate's rules for applying the Kennedy classification.

b.Components of RPD - major connector - mandibular and maxillary, minor connectors, design, functions, form and location of major and minor connectors, tissue stops, finishing lines, reaction of tissue to metallic coverage

Rest and rest seats - from of the Occlusal rest and rest seat, interproximal Occlusal rest seats, internal Occlusal rests, possible movements of partial dentures, support for rests, lingual rests on canines and incisor teeth, incisal rest and rest seat.

Direct retainer- Internal attachment, extracoronal direct retainer, relative uniformity of retention, flexibility of clasp arms, stabilizing - reciprocal clasp are, criteria for selecting a given clasp design, the basic principles of clasp design, circumferential clasp, bar clasp, combination clasp and other type of retainers.

Indirect Retainer - denture rotation about an axis, factors influencing effectiveness of indirect retainers, forms of indirect retainers, auxiliary Occlusal rest, canine extensions from Occlusal

an opposing cast or template, types of anterior teeth, waxing and investing tinW partial denture before processing acrylic resin bases, processing the denture, remounting and occlusal correction to

an occlusal template, polishing the denture.

- m. Initial placement, adjustment and servicing of the removable partial denture adjustments to bearing surfaces of denture framework, adjustment of occlusion in harmony with natural and artificial dentition, instructions to the patient, follow up services
- n. Relining and Rebasing the removable partial denture Relining tooth supported dentures bases, relining distal extension denture bases, methods of reestablishing occlusion on a relined partial denture.
- o. Repairs and additions to removable partial dentures Broken clasp arms, fractured occlusal rests, distortion or breakage of other components major and minor connectors, loss of a tooth or teeth not involved in the support or retention of the restoration, loss of an abutment tooth necessitating its replacement and making a new direct retainer, Other types of repairs, Repair by soldering.
- p. Removable partial denture considerations in maxillofacial prosthetics Maxillofacial prosthetics, intra oral prosthesis, design considerations, maxillary prosthesis. Obturators, speech aids, palatal lifts, palatal augmentations, mandibular prosthesis, treatment planning, framework design, class I resection, Class II resection, mandibular flange prosthesis, jaw relation record
 - q. Management of failed restorations, work authorization.

I. MAXILLOFACIAL REHABILITATION:

Scope, terminology, definitions, cross infection control and hospital waste management, work authorization.

Behavioral and psychological issues in Head and neck cancer, Psychodynamic interactions - clinician and patient - Cancer Chemotherapy: Oral Manifestations, Complications, and management, Radiation therapy of head and neck tumors: Oral effects, Dental manifestations and dental treatment: Etiology, treatment and rehabilitation (restoration)- Acquired defect of the mandible, acquired defects of hard palate, soft palate, clinical management of edentulous and partially edentulous maxillectomy patients, Facial defects, Restoration of speech, Velopharyngeal function, cleft lip and palate, cranial implants, maxillofacial trauma, Lip and cheek support prosthesis, Laryngectomy aids, Obstructive sleep apnoea, Tongue prosthesis, Esophageal prosthesis, Vaginal radiation carrier, Burn stents, Nasal stents, Auditory inserts, trismus appliances, mouth controlled devices for assisting the handicapped, custom prosthesis for lagophthalomos of the eye. Osseo integrated supported facial and maxillofacial prosthesis. Resin bonding for maxillofacial prosthesis, Implant rehabilitation of the mandible compromise by radiotherapy, Craniofacial Osseo integration, Prosthodontic treatment, Material and laboratory procedures for maxillofacial prosthesis.

II. OCCLUSION

Evaluation, Diagnosis and Treatment of Occlusal Problems

Scope, definition, terminology, optimum oral health, anatomic harmony, functional harmony, occlusal stability, causes of deterioration of dental and oral health, Anatomical, physiological, neuro - muscular, psychological, considerations of teeth, muscles of mastication, temporomandibular joint, intra oral and extra oral and facial musculatures, the functions of Cranio mandibular system.

Occlusal therapy, the stomatognathic system, centric relation, vertical dimension, the neutral zone, the occlusal plane, differential diagnosis of temporomandibular disorders, understanding and diagnosing intra articular problems, relating treatment to diagnosis of internal derangements of TMJ, Occlusal splints, Selecting instruments for occlusal diagnosis and treatment, mounting casts, Pankey-mann-schuyler philosophy of complete occlusal rehabilitation, long centric, anterior guidance, restoring lower anterior teeth, restoring upper anterior teeth, determining the type of posterior occlusal contours, methods for determining the plane of occlusion, restoring lower posterior teeth, restoring upper posterior teeth, functionally generated path techniques fro recording border movements intra orally, occlusal equilibration, Bruxism, Procedural steps in restoring occlusions, requirements for occlusal stability, solving occlusal problems through programmed treatment planning, splinting, solving - occlusal wear problems, deep overbite problems, anterior overjet problems, anterior open bite problems. Treating - end to end occlusion, splayed anterior teeth, cross bite patient, Crowded, irregular, or interlocking anterior bite, using Cephalometric for occlusal analysis, solving severe arch malrelationship problems, transcranial radiography, postoperative care of occlusal therapy.

III.FIXED PROSTHODONTICS

Scope, definitions and terminology, classification and principles, design, mechanical and biological considerations of components - Retainers, connectors, pontics, work authorization.

- © **Diagnosis and treatment planning -** patients history and interview, patients desires and expectations and needs, systemic and emotional health, clinical examinations -head and neck, oral teeth, occlusal and periodontal, Preparation of diagnostic cast, radiographic interpretation, Aesthetics, endodontics considerations, abutment selection bone support, root proximities and inclinations, selections of abutments, for cantilever, pier abutments, splinting, available tooth structures and crown morphology, TMJ and muscles mastication and comprehensive planning and prognosis.
- © **Management of carious teeth** caries in aged, caries control, removing infected carious materials, protection of pulp, reconstruction measure for compromising teeth retentive pins, horizontal slots, retention grooves, prevention of caries, diet, prevention of root caries and vaccine for caries.

- © **Periodontal considerations** attachment units, ligaments, gingivitis, periodort^l Microbiological aspect of periodontal diseases, marginal lesion, occlusal trauma, periodontal pockets attached gingiva, interdental papilla, gingival embrasures, radiographic interpretations of Periodontia, intraoral plastics, periodontal splinting -Fixed prosthodontics with periodontially compromised dentitions, placement of margin restorations.
- © Biomechanical principle of tooth preparations individual tooth preparations Complete metal Crowns P.F.C., All porcelain Cerestore crowns, dicor crowns, incerem etc. porcelain jacket crowns partial 3/4, half and half, ridiculer, telescopic, telescopic, pin hole, pin ledge, laminates, inlays, onlays and preparations for restoration of teeth amalgam, glass lonomer and composite resins, Resin Bond retainer, Gingival marginal preparations Design, material selection, and biological and mechanical considerations intracoronal retainer and precision attachments custom made and ready made
- © **Isolation and fluid control** Rubber dam applications, tissue dilation soft tissue management for cast restoration, impression materials and techniques, provisional restoration, interocclusal records, laboratory support for fixed Prosthodontics' Occlusion, Occlusal equilibration, articulators, recording and transferring of occlusal relations, cementing of restoration.
- © Resins, Gold and gold alloys, glass lonomer, restorations.
- © Restorations of endodontically treated teeth, Stomatognathic Dysfunction and managements
- © Management of failed restorations
- © **Osseo integrated supported fixed Prosthodontics** Osseo integrated supported and tooth supported fixed Prosthodontics

IV. TMJ - Temporomandibular joint dysfunction - Scope, definitions, and terminology

Temporomandibular joint and its function, Orofacial pain, and pain from the temporomandibular joint region, temporomandibular joint dysfunction, temporomandibular joint sounds, temporomandibular joint disorders

Anatomy related, trauma, disc displacement, Osteoarthrosis/Osteoarthritis, Hyper mobility and dislocation, infectious arthritis, inflammatory diseases, Eagle's syndrome (Styloid -stylohyoid syndrome), Synovial chondromatosis, Osteochondrrosis disease, Ostonecrosis, Nerve entrapment process, Growth changes, Tumors, Radiographic imaging

© Etiology, diagnosis and cranio mandibular pain, differential diagnosis and management, orofacial pain - pain from teeth, pulp, dentin, muscle pain, TMJ pain - psycho logic, physiologic - endogenous control, acupuncture analgesia, Placebo effects on analgesia, Trigeminal neuralgia, Temporal arteritis

- © Occlusal splint therapy construction and fitting of occlusal splints, management of occlusal splints, therapeutic effects of occlusal splints, occlusal splints and general muscles performance, TMJ joint uploading and anterior repositioning appliances, use and care of occlusal splints.
- © Occlusal adjustment procedures Reversible occlusal stabilization splints and physical therapies, jaw exercises, jaw manipulation and other physiotherapy or irreversible therapy occlusal repositioning appliances, orthodontic treatment, Orthognathic surgery, fixed and removable prosthodontic treatment and occlusal adjustment, removable prosthodontic treatment and occlusal adjustment, Indication for occlusal adjustment, special nature of orofacial pain, Indication for occlusal adjustment, special nature of orofacial pain, Psychopathological considerations, occlusal adjustment philosophies, mandibular position, excursive guidance,, occlusal contact scheme, goals of occlusal adjustment, significance of a slide in centric, Preclinical procedures, clinical procedures for occlusal adjustment.

V. AESTHETIC

Scope, definitions -

Morpho psychology and esthetics, structural esthetic rules - facial components, dental components, gingival components physical components. Esthetics and its relationship to function - Crown morphology, physiology of occlusion, mastication, occlusal loading and clinical aspect in bio esthetic aspects, Physical and physiologic characteristic and muscular activities of facial muscle, perioral anatomy and muscle retaining exercises Smile - classification and smile components, smile design, esthetic restoration of smile, Esthetic management of the dentogingival unit, intraoral plastic for management of gingival contours, and ridge contours, Periodontal esthetics, Restorations - Tooth colored restorative materials, the clinical and laboratory aspects, marginal fit anatomy, inclinations, form, size, shape, color, embrasures, contact point.

Teaching and learning activities:

All the candidates registered for MDS course shall pursue the course for a period of three years as full - time students. During this period each student shall take part actively in learning and teaching activities designed by the Institution/ University. The following are the teaching and learning activities in each speciality.

- 1. **Lectures:** There shall be didactic lectures both in the speciality and in the allied fields. The postgraduate departments should encourage the guest lectures in the required areas to strengthen the training programmes. It is also desirable to have certain integrated lectures by multidisciplinary teams on selected topics
- 2. **Journal club:** The journal review meetings shall be held at least once a week. All trainees are expected to participate actively and enter relevant details in logbook. The trainee should make

presentations from the allotted journal of selected articles at least 5 times in a year.

- 3. **Seminars:** The seminars shall be held at least twice a week in the department, all trainees associated with postgraduate teachers are expected to participate actively and enter relevant details in logbook. Each trainee shall make at least 5-seminar presentation in each year.
- 4. **Symposium:** It is recommended to hold symposium on topics covering multiple disciplines one in each academic year.
- 5. **Workshops:** It is recommended to hold workshops on topics covering multiple disciplines one in each academic year.
- 6. **Clinical Postings:** Each trainee shall work in the clinics on regular basis to acquire adequate professional skills and competency in managing various cases to be treated by a specialist
- 7. **Clinico Pathological Conference:** The Clinico pathological conferences should be held once in a month involving the faculties of oral biology, oral medicine and radiology, oral pathology, oral surgery, period ontology, endodontia and concerned clinical department. The trainees should be encouraged to present the clinical details, ft radiological and histo-pathological interpretations and participation in the discussions, j
- 8. **Interdepartmental Meetings:** To bring in more integration among various specialities there shall be interdepartmental meeting chaired by the dean with all heads of postgraduate departments at least once a month.
- **9. Rural oriented prosthodontic health care** To carry out a prosthodontic therapy interacting with rural centers and the institution.
- 10. **Teaching skills:** All the trainees shall be encouraged to take part in undergraduate teaching programmes either in the form of lectures or group discussions
- 11. **Evaluation skills:** All the trainees shall be encouraged to take part evaluating the skills and knowledge in clinical laboratory practice including theory by formulating question banks and model answers.
- 12. **Continuing dental education programmes**: Each Postgraduate department shall organize these programmes on regular basis involving the other institutions. The trainees shall also be encouraged to attend such programmes conducted elsewhere.
- 13. **Conferences/Workshops/Advanced courses**: The trainees shall be encouraged not only to attend conference/workshops/advance courses but also to present at least two papers at state/national speciality meeting during their training period.
- 14. **Rotation and posting in other departments**: To bring in more integration between the speciality and allied fields each post graduate department shall workout a programme to rotate the

trainees in related disciplines and Craniofacial and maxillofacial ward.

15. **Dissertation:** Trainees shall prepare a dissertation based on the clinical or laboratory experimental work or any other study conducted by them under the supervision of the post graduate guide.

I YEAR M.D.S.

- © Theoretical exposure of all applied sciences of study
- © Clinical and non-clinical exercises involved in Prosthodontic therapy for assessment and acquiring higher competence.
- © Commencement of Library Assignment within six months.
- © Short epidemiological study relevant to Prosthodontics.
- © Acquaintance with books, journals and referrals To acquire knowledge of list of published books, journal and website for the purpose of gaining knowledge and reference in the fields of Prosthodontics including Crown & bridge and implantology
- © Acquire knowledge of instruments, equipment, and research tools in Prosthodontics.
- © To acquire knowledge of Dental Material Science Biological and biomechanical, bio- esthetics knowledge of using in laboratory and clinics including testing methods
- . © Participation and presentation in seminars, didactics lecture
- © Evaluation Internal Assessment examinations on Applied subjects

II YEAR M.D.S.

- © Acquired confidence in obtaining various phases and techniques for providing Prosthodontic therapy.
- © Acquiring confidence by clinical practice with sufficient numbers of patient requiring tooth and tooth surface restorations.
- © Adequate number of complete denture prosthesis and techniques with higher clinical approach by utilizing in semi-adjustable articulators, face bow and graphic tracing.
- © Understanding the use of the dental surveyor and its application in diagnosis and treatment plan in R.P.D.
- © Adequate numbers of R.P.D. covering all clinical partially edentulous situation
- © Adequate number of Crowns, Inlays, laminates F.P.D. covering all clinically, partial edentulous situation.
- © Selection of cases and principles in treatment of edentulous patients, partial or complete by implant supported prosthesis.
- © Treating single edentulous situation by implant support.
- © Diagnosis and treatment planning.
- © 1st stage and 2nd stage implant surgery
- © Understanding the maxillofacial Prosthodontics
- © Treating craniofacial defects
- © Management of orofacial esthetics
- © Prosthetic management of TMJ syndrome
- © Occlusal rehabilitation
- © Maintenance and management of filled restoration
- © Prosthodontic Management of patient with psychogenic origin.
- © Practice of child and geriatric prosthodontics
- © Participation and presentation in seminars, didactics lectures
- © Evaluation Internal Assessment examinations

III YEAR M.D.S

- © Clinical and laboratory practice continued from IInd year
- © Occlusal equilibration procedures Fabrication of stabilizing splint for parafunctional disorders, occlusal disorders and TMJ functions.
- © Practice of dental, oral and facial esthetics
- © The clinical practice of all aspects of Prosthodontic therapy for elderly patients.
- © Implants Prosthodontics Rehabilitation of Partial Edentulous, Complete edentulism and for craniofacial rehabilitation
- © Failures in all aspects of Prosthodontics and its management and after care
- © Team management for esthetics, TMJ syndrome and Maxillofacial and Craniofacial Prosthodontics
- © Management of Prosthodontics emergencies, resuscitation.
- © Candidate should complete the course by attending by large number and variety of patients to master the prosthodontic therapy. This includes the practice management, examinations, treatment planning, communication with patients, clinical and laboratory techniques materials and instrumentation requiring different aspects of prosthodontic therapy, Tooth and Tooth surface restoration, Restoration of root treated teeth, splints for periodontal rehabilitations and fractured jaws, complete dentures, R.P.D. FPD. Immediate dentures over dentures implant supported prosthesis, maxillofacial and body prosthesis, occlusal rehabilitation.
- © Prosthetic management of TMJ syndrome
- © Management of failed restorations
- © Complete and submit Library Assignment 6 months prior to examination.
- © Candidates should acquire complete theoretical and clinical knowledge through seminars, symposium, workshops and reading.
- © Participation and presentation in seminars, didactic lectures.
- © Evaluation Internal Assessment examinations three months before University examinations.

PROSTHODONTIC TREATMENT MODALITIES

- 1. Diagnosis and treatment plan in prosthodontics
- 2. Tooth and tooth surface restorations
- > Fillings
- Veneers composites and ceramics
- ► Inlays- composite, ceramic and alloys

> Onlay - composite, ceramic and alloys

Management of failed restoration

- ➤ Partial crowns % m, 4/5,h, 7/8,h, Vz crowns
- > Pin-ledge
- > Radicular crowns
- > Full crowns

Management of failed restorations

	PARTIAL	COMPLETE
© Tooth supported ©Tissue Supported	Fixed partial denture Interim partial denture	Overdenture Complete denture
© 1133uc Supporteu	Intermidiate partial denture	-
©Tooth and tissue supported	Cast partial denture	Immediate complete Denture Overdenture
	Precision attachment	
©Implant supported	Cement retained	Bar attachment Screw retained Ball attachment Clip attachment
©Tooth and implant supported	Screw retained	ban accacimient onp accacimient
Cement retained		
©Root supported	Dowel and core	Overdenture

Pin retained

Management of failed restorations

- > Distal extension prosthesis
 - © Tooth borne prosthesis
 - © Combination distal extension and tooth borne prosthesis
 - © Retainers for partial dentures intra coronal, extra coronal or Para coronal intraproximal with cantilevered pontics
- > Attached to cantilevered pontics
 - ©Pontics between bridge retainers
 - ©Attached to root coping
 - ©Spring loaded bolts or plungers
 - © Ring springs
 - © Bolts
 - © Rubber device
 - © Slide cap attachments
 - © Cones crown
 - © Hybrid telescope
 - © Ring telescope
 - © Prefabricated cap-post system
 - >Precision attachments
 - © Intra coronal attachments
 - © Extra coronal attachments
 - © Bar slide attachments
 - © Joints and hinge joint attachments

Management of failed restorations

4. Tooth and tissue defects (Maxillo-facial and Cranio-facial prosthesis)

A. Congenital Defects

a. Cleft lip and palate

Obturators

- > Feeding
- > Surgical
- © Immediate
- © Delayed
- > Interim
- > Definitive
- > implant supported prosthesis
- b. Pierre Robin Syndrome
- c. Ectodermal dysplasia
- d. Hemifacial microsomia
- e. Anodontia
- f. Oligodontia
- g. Malformed teeth

cast partial denture implant supported dentures complete dentures

B. Acquired defects

- a. Head and neck cancer patients prosthodontic splints and stents
- b. Restoration of facial defects
- -Auricular prosthesis
- Nasal prosthesis
- -Orbital prosthesis
- Craniofacial implants
- c. Midfacial defects
- d. Restoration of maxillofacial trauma
- e. Hemimandibulectomy
- f. Maxillectomy
- g. Lip and cheek support prosthesis
- h. Ocular prosthesis
- i. Speech and Velopharyngeal prosthesis
- j. Laryngectomy aids
- k. Esophageal prosthesis
- I. Nasal stents
- m. Tongue prosthesis
- n. Burn stents
- o. Auditory inserts
- p. Trismus appliances
- q. Prosthesis for lagopthalmos of the eye

Management of failed restorations.

- 5. T.M.J and Occlusal disturbances
- a. Occlusal equilibration
- b.Splints
- -Diagnostic
- -Repositioners / Deprogrammers

c.	Anterior bite plate
d.	Posterior bite plate
e.	Bite raising appliances
f.	Occlusal rehabilitation
g.	Behavioral and psychological care for the cancer patient Management of failed restorations
6.	Esthetic/Smile designing
a.	Laminates / Veneers
b.	Tooth contouring (peg laterals, malformed teeth)
c.	Tooth replacements
d.	Team management
Manag	gement of failed restorations
7.	Psychological therapy
a. Que	estionnaires
b Cha	rts, papers, photographs
c. Mo	dels
d Case	e reports
e.	Patient counseling
f.	Behavioral modifications
g Refe	errals
-	
8.	Geriatric Prosthodontics
a.	Prosthodontics for the elderly
b.	Behavioral and psychological counseling
c.	Removable Prosthodontics
d.	Fixed Prosthodontics
e.	Implant supported Prosthodontics
f.	Maxillofacial Prosthodontics
g.	Psychological and physiological considerations

Management of	of	failed	restor	ations
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- 9. Preventive measures
- a. Diet and nutrition modulation and counseling
 - a. Referrals

THE BENCH WORK SHOULD BE COMPLETED BEFORE THE CLINICAL WORK STARTS DURING THE FIRST YEAR OF THE M.D.S COURSE

I. Complete dentures

- 1. Arrangements in adjustable articulator for
- © Class I
- © Class II
- © Class III
- © Cross bite
- 2. Various face bow transfer to adjustable articulators
- 3. Processing of characterized anatomical denture
- II. Removable partial denture
- 1. Design for Kennedy's Classification (Survey, block out and design)
- a. Class I
- b. Class II
- c. Class III
- d. Class IV
- 2. Designing of various components of RPD
- 3. Wax pattern on refractory cast
- a. Class I
- b. Class II
- c. Class III
- d. Class IV
- 4- Casting and finishing of metal frameworks
- 5- Acrylisation on metal frameworks for

Class I

Class III with modification

III. Fixed Partial Denture

- © Preparation of ivory teeth/natural teeth
- © Fvc for metal
- © FVC for ceramic
- © Porcelain jacket crown
- © Acrylic jacket crown
- © PFM crown
- © 3/4th (canine, premolar and central)
- © 7/8th posterior
- © Proximal half crown
- © Inlay Class I, II, V
- © Onlay-Pin ledged, pinhole
- © Laminates
- 2. Preparation of different die system
- 3. Fabrication of wax pattern by drop wax build up technique
 - © Wax in increments to produce wax coping over dies of tooth preparations on substructures.
 - © 3-unit wax pattern (maxillary and Mandibular)
 - © Full mouth
 - © Wax additive technique
- 4. Pontic design in wax pattern
 - © Ridge lap Sanitary
 - © Modified ridge lap
 - © Modified sanitary
 - © Spheroidal or conical
- 5. Fabrication of metal framework
 - © Full metal bridge for posterior (3 units)
 - © Coping for anterior (3 unit)
 - © Full metal with acrylic facing
 - © Full metal with ceramic facing

- © Adhesive bridge for anterior© Coping for metal margin ceramic crown
- © Pin ledge crown

6. Fabrication of crowns

- © Post and core
- © All ceramic crowns with characterized
- © Metal ceramic crowns with characterized
- © Full metal crown
- © Precious metal crown

7. Laminates

- © Composites with characterized
- © Ceramic with characterized
- © Acrylic

8. Preparation for composites

- © Laminates
- © Crown
- © Inlay
- © Onlay
- © Class 1
- © Class II
- © Class III
- © Class IV
- © Fractured anterior tooth

IV. Maxillofacial prosthesis

- 1. Eye
- 2. Ear
- 3. Nose
- 4. Face
- 5. Body
- 6. Cranial

- 7. Hemimaxillectomy
- 8. Hemimandibulectomy
- 9. Finger prosthesis
- 10. Guiding flange
- 11. Obturator

V. Implant supported prosthesis

1. Step by step procedures - laboratory phase

VI. Other exercises

- 1. TMJ splints stabilization appliances, maxillary and Mandibular repositioning appliances
- 2. Anterior disclusion appliances
- 3. Chrome cobalt and acrylic resin stabilization appliances
- 4. Modification in accommodation in irregularities in dentures
- 5. Occlusal splint
- 6. Periodontal splint
- 7. Precision attachments custom made
- 8. Over denture coping
- 9. Full mouth rehabilitation (by drop wax technique, ceramic build up)
- 10. TMJ appliances -stabilization appliances Essential Skills

O -Washes up and observes. A-Assists a senior

PA- performs procedure under the direct supervision of a senior specialist PI- Performs independently

PROCEDURE	CATEGORY			
	0	A	PA	PI
"Tooth and tooth surface restorationa)	2	2	2	10
Composites - fillings, laminates, inlay, onlayb) Ceramics -	2	2	2	10
laminates, inlays, onlaysc) Glass lonomer	1	1	1	10
CROWNS				
FVC for metal	1	2	2	10
FVC for ceramic	1	2	2	10
Precious metal crown	1	-	1	5

^{*} Key

Galvanoformed crown	_	-	1	1
3/4th crowns (premolars, canines and centrals)	1	_	-	5
7/8th posterior crown	1	_	-	5
Proximal half crown	1	-	-	5
Pinledge and pinhole crowns	1	_	-	5
Telescopic crowns	1	-	-	5
Intraradicular crowns (central, lateral, canine, premolar, and molar)	1	-	-	5
Crown as implant supported prosthesis	1		1	5

FIXED PARTIAL DENTURES

Cast porcelain(3 unit)	1	-	-	5
Cast metal-precious and non precious	1	-	-	5
(3 unit posterior)				
Porcelain fused metal (anterior and posterior)	1	1	1	10
Multiple abutment- maxillary and mandibular full arch	1	1	1	5
Incorporation of custom made and readymade precision joint or	1	1	1	4
Attachment				
Adhesive bridge for anterior/ posterior	1	-	1	10
Metal fused to resin anterior FPD	-	-	1	5

Interim provisional restorations (crowns and FPDs)	1	1	1	10
Immediate fixed partial dentures (interim)	1	-	-	5
Fixed prosthesis as a retention and rehabilitation	1	1	-	5
for acquired and congenital defects – maxillofacial	-	-	-	-

Prosthetics				
	-	-	-	-
Implant supported prosthesis	1	-	1	1
Implant - tooth supported prosthesis	1	-	1	1
REMOVABLE PARTIAL DENTURE	-	-	-	-
Provisional partial denture prosthesis	1	1	1	10
Cast removable partial denture (for Kennedy's	1	1	1	6
Applegate classification with modification)				
Removable bridge with precision attachments and telescopic	1	1	2	4
crowns for anterior and posterior				
Immediate RPD	1	1	1	5
Partial denture for medically compromised and handicapped	1	1	1	5
patients				
COMPLETE DENTURES	-	-	-	-
Neurocentric occlusion & characterized prosthesis	-	-	1	5
Anatomic characterized prosthesis (by using semi adjustable	-	-	1	25
articulator)				
Single dentures	-	-	1	5
Overlay dentures	-	-	1	5
Interim complete dentures as a treatment prosthesis for	-	-	1	5
abused denture supporting tissues				
Complete denture prosthesis (for abnormal ridge relation,	-	-	1	5
ridge form and ridge size)				
Complete dentures for patients with TMJsyndromes	-	-	1	5
Complete dentures for medically compromised and	-	-	1	5
handicapped patients				
GERIATRIC PATIENTS	-	-	-	-
Tooth and tooth surface restorations, crowns, fixed prosthesis,	-	-	1	5
removable prosthesis				
IMPLANT SUPPORTED COMPLETE PROSTHESIS	-	-	-	-
Implant supported complete prosthesis (maxillary and	-	-	1	1
Mandibular)				
	•	•	•	•

MAXILLOFACIAL PROSTHESIS				
Guiding flange and obturators	-	-	1	4
Speech and palatal lift prosthesis	-	-	1	2
Eye prosthesis	-	-	1	2
Ear prosthesis	-	-	1	2
Nose prosthesis	-	-	1	2
Face prosthesis	-	-	'-	1
Hemimaxillectomy	-	-	1	2
Hemimandibulectomy	-	-	1	2
Cranioplasty	-	-	1	1
Finger/ hand, foot	-	-	1	2
Body prosthesis	-	-	1	1
Management of burns, scars	-	-	-	1
TMJ SYNDROME MANAGEMENT				
Splints - periodontal, teeth, jaws	-	-	1	4
TMJ supportive and treatment prosthesis	-	-	1	1
Stabilization appliances for maxilla and mandible with	-	-	-	1
freedom to move from IP to CRCP				
In IP without the freedom to move to CRCP	-	-	-	1

Repositioning appliances, anterior disclusion	-	-	-	1
Chrome cobalt and acrylic resin stabilization appliances				2
for modification to accommodate for the irregularities in	ı			
the dentition				
Occlusal adjustment and occlusal equilibrium	-	-	1	4
FULL MOUTH REHABILITATION				
Full mouth rehabilitation – occlusion	-	-	1	4
Full mouth rehabilitation - restoration of esthetics and	_		1	4
function of stomatognathic system				
INTER-DISCIPLINARY TREATMENT MODALITIES				
Inter-disciplinary management - restoration of Oro			1	2
craniofacial defects for esthetics, phonation, mastication				
and psychological comforts				
MANAGEMENT OF FAILED RESTORATION				
Tooth and tooth surface restorations	-	-	-	5
Removable prosthesis	-	-	-	10
Crowns and fixed prosthesis				5
				ı
Maxillofacial prosthesis -		-	-	2
Implant supported prosthesis -		-	-	1
Occlusal rehabilitation and TMJ syndrome -	-	-	-	2
Restoration failure of psychogenic origin -		-	-	5

UNIVERSITY SCHEME OF EXAMINATION

Restoration failure to age changes

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

2

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the

end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS

course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics,

Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology.

Applied pharmacology, Research Methodology and bio statistics,. Applied Dental anatomy & histology, Oral

pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I. Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions

carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two

questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the

papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

(2) Part II (3 papers of 100 Marks):-

(i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

50

A. Practical / Clinical Examination : 200 Marks

Examination shall be for three days. If there are more than 6 candidates, it may be extended for one more day. Each candidate shall be examined for a minimum of three days, six hours per day including viva voce

1. Presentation of treated patients and records during their three year training period.

- 25 Marks

2. Present actual treated patients CD. Prosthesis and Insertion	- 90 Marks				
1. Discussion on treatment plan and patient review	-10 marks				
2. Tentative jaw relation records	- 5 marks				
3. Face Bow - transfer	- 5 marks				
4. Transferring it on articulators	- 5 marks				
5. Extra oral tracing and securing centric and protrusive/lateral.	- 25 marks				
6. Transfer in on articulator.	- 5 marks				
7. Selection of teeth	- 5 marks				
8. Arrangement of teeth	-15 marks				
9. Waxedup denture trial	-10 marks				
10. Fit, insertion and instruction of previously processed					
characterized, anatomic complete denture prosthesis	- 5 marks All steps will include				
chair side, lab and viva voce					
3. Fixed Partial Denture - 50Marks					
a. Case discussion and selection of patients for F.P.D.	- 5 marks				
b. Abutment preparation isolation and fluid control	- 25 marks				
c. Gingival retraction and impressions	-10 marks				
d. Cementation of provisional restoration	-10 marks				
4. Removable Partial Denture	4. Removable Partial Denture - 35 Marks				

B. Viva Voce

i. Viva-Voce examination: 80 marks

100 Marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes

presentation and discussion on dissertation also.

ii. Pedagogy Exercise: 20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

PERIODONTOLOGY

Objectives

The following objectives are laid out to achieve the goals of the course

Knowledge

- © Discuss historical perspective to advancement in the subject proper and related topics
- © Describe etiology, pathogenesis, diagnosis and management of common periodontal diseases with emphasis on Indian population
- © Familiarize with the biochemical, microbiologic and immunologic genetic aspects of periodontal pathology
- © Describe various preventive periodontal measures
- © Describe various treatment modalities of periodontal disease from historical aspect to currently available ones
- © Describe interrelationship between periodontal disease and various systemic conditions
- © Describe periodontal hazards due to iatrogenic causes and deleterious habits and prevention of it
- © Identify rarities in periodontal disease and environmental/ Emotional determinates in a given case
- © Recognize conditions that may be outside the area of his Speciality/competence and refer them to an appropriate Specialist
- © Decide regarding non-surgical or surgical management of the case
- © Update him by attending course, conferences and seminars relevant to periodontics or by self-learning process.
- © Plan out/ carry out research activity both basic and clinical aspects with the aim of publishing his/her work in scientific journals
- © Reach to the public to motivate and educate regarding periodontal disease, its prevention and consequences if not treated
- © Plan out epidemiological survey to assess prevalence and incidence of early onset periodontitis

and adult periodontitis in Indian population (Region wise)

- © Shall develop knowledge, skill in the science and practice of Oral Implantology
- © Shall develop teaching skill in the field of Periodontology and Oral Implantology

SKILL

- © *Take a* proper clinical history, thorough examination intra orally, extra orally, medical history evaluation, advice essential diagnostic procedures and interpret them to come to a reasonable diagnosis
- © Effective motivation and education regarding periodontal disease and maintenance after the treatment
- ©Perform both non-surgical & education regarding periodontal disease, maintenance after the treatment
- ©Perform both non-surgical and surgical procedures independently
- ©Provide Basic Life Support Service (BLS)

Human values, ethical practice & communication abilities

© Adopt ethical principles in all aspects of treatment modalities, Professional honesty & integrity are to be fostered. Develop Communication skills to make awareness regarding periodontal disease Apply high moral and ethical standards while carrying out human or animal research, Be humble, accept the limitations in his/her knowledge and skill, and ask for help from colleagues when needed, Respect patients rights and privileges, including patients right to information and right to seek a second opinion.

Course Contents

Applied Anatomy:

- 1. Development of the Periodontium
- 2. Micro and Macro structural anatomy and biology of the periodontal tissues
- 3. Age changes in the periodontal tissues
- 4. Anatomy of the Periodontium
 - ©Macroscopic and microscopic anatomy
 - ©Blood supply of the Periodontium
 - ©Lymphatic system of the Periodontium
 - ©Nerves of the Periodontium
- 5. Temporomandibular joint, Maxillae and Mandible

- 6. Cranial nerves (5,7,9,11,12)
- 7. Tongue, oropharynx
- **8**. Muscles of mastication

Physiology

- 1. Blood
- 2. Respiratory system Acknowledge of the respiratory diseases which are a cause of periodontal diseases (periodontal Medicine)
- 3. Cardiovascular system
 - h. Blood pressure
 - i. Normal ECG
 - j. Shock
- 4. Endocrinology hormonal influences on Periodontium
- 5. Gastrointestinal system
 - a. Salivary secretion composition, function & regulation
 - b. Reproductive physiology
 - i. Hormones Actions and regulations, role in periodontal disease
 - ii. Family planning methods
- 6. Nervous system
- a. Pain pathways
- b. Taste Taste buds, primary taste sensation & pathways for sensation

Biochemistry

- 1. Basics of carbohydrates, lipids, proteins, vitamins, proteins, enzymes and minerals
- 2. Diet and nutrition and periodontium
- 3. Biochemical tests and their significance
- 4. Calcium and phosphorus

Pathology

- 1. Cell structure and metabolism
- 2. Inflammation and repair, necrosis and degeneration
- 3. Immunity and hypersensitivity
- 4. Circulatory disturbances edema, hemorrhage, shock, thrombosis, embolism, infarction and hypertension
- 5. Disturbances of nutrition
- 6. Diabetes mellitus
- 7. Cellular growth and differentiation, regulation

- 8. Lab investigations
- 9. Blood

Microbiology:

- 1. General bacteriology
 - a. Identification of bacteria
 - b. Culture media and methods
 - c. Sterilization and disinfection
- 2. Immunology and Infection
- 3. Systemic bacteriology with special emphasis on oral microbiology staphylococci, genus actinomyces and other filamentous bacteria and actinobacillus actinomycetumcomitans
- 4. Virology
 - a. General properties of viruses
 - b. Candidasis
- 6. Applied microbiology
- 7. Diagnostic microbiology and immunology, hospital infections and management

Pharmacology:

- 1. General pharmacology
- a. Definitions Pharmcokinetics with clinical applications, routes of administration including local drug delivery in Periodontics
 - b. Adverse drug reactions and drug interactions
- 2. Detailed pharmacology of
 - a. Analgesics opiod and nonopoid
 - b. Local anesthetics
 - c. Haematinics and coagulants, Anticoagulants
 - d. Vit D and Calcium preparations
 - e. Antidiabetics drugs
 - f. Steroids
 - g. Antibiotics
 - h. Antihypertensive
 - i. Immunosuppressive drugs and their effects on oral tissues
 - j. Antiepileptic drugs
- 3. Brief pharmacology, dental use and adverse effects of
 - a. General anesthetics

- b. Antipsychotics
- c. Antidepressants
- d. Anxiolytic drugs
- e. Sedatives
- f. Antiepileptics
- g. Antihypertensives
- h. Antianginal drugs
- i. Diuretics
- j. Hormones
- k. Pre-anesthetic medications
- 4. Drugs used in Bronchial asthma cough
- 5. Drug therapy of
 - a. Emergencies
 - b. Seizures
 - c. Anaphylaxis
 - d. Bleeding
 - e. Shock
 - f. Diabetic ketoacidosis
 - g. Acute addisonian crisis
- 6. Dental Pharmacology
 - a. Antiseptics
 - b. Astringents
 - c. Sialogogues
 - d. Disclosing agents
 - e. Antiplaque agents
- 7. Fluoride pharmacology

Biostatistics:

- © Introduction, definition and branches of biostatistics
- © Collection of data, sampling, types, bias and errors

- © Compiling data-graphs and charts
- © Measures of central tendency (mean, median and mode), standard deviation variability
- © Tests of significance (chi square test't'test and Z-test)
- © Null hypothesis

Etiopathogenesis

- 1. Classification of periodontal diseases and conditions
- 2. Epidemiology of gingival and periodontal diseases
- 3. Defense mechanisms of gingiva
- 4. Periodontal microbiology
- 5. Basic concepts of inflammation and immunity
- 6. Microbial interactions with the host in periodontal diseases
- 7. Pathogenesis of plaque associated periodontal diseases
- 8. Dental calculus
- 9. Role of iatrogenic and other local factors
- 10. Genetic factors associated with periodontal diseases 11. Influence of systemic diseases and disorders of the periodontium 12: Role of environmental factors in the etiology of periodontal disease 13. Stress and periodontal diseases
- 14. Occlusion and periodontal diseases
- 15. Smoking and tobacco in the etiology of periodontal diseases 16.AIDS and periodontium
- 17. Periodontal medicine 18. Dentinal hypersensitivity

Clinical and Therapeutic Periodontology and Oral Implantology Please note:

Clinical periodontology includes gingival diseases, periodontal diseases, periodontal instrumentation, diagnosis, prognosis and treatment of periodontal diseases.

- I. GINGIVAL DISEASES
- 1. Gingival inflammation
- 2. Clinical features of gingivitis
- 3. Gingival enlargement
- 4. Acute gingival infections

- 5. Desquamative gingivitis and oralmucous membrane diseases
- 6. Gingival diseases in the childhood

II. PERIODONTAL DISEASES

- 1. Periodontal pocket
- 2. Bone loss and patterns of bone destruction
- 3. Periodontal response to external forces
- 4. Masticatory system disorders
- 5. Chronic periodontitis
- 6. Aggressive periodontitis
- 7. Necrotising ulcerative periodontitis
- 8. Interdisciplinary approaches

Orthodontic

- -Endodontic
- 9. Periodontic considerations

III. TREATMENT OF PERIODONTAL DISEASES

A. History, examination, diagnosis, prognosis and treatment planning

- 1. Clinical diagnosis
- 2. Radiographic and other aids in the diagnosis of periodontal diseases
- 3. Advanced diagnostic techniques
- 4. Risk assessment
- 5. Determination of prognosis
- 6. Treatment plan
- 7. Rationale for periodontaltreatment
- 8. General principles of anti-infective therapy with special emphasis on infection control in periodontal practice
- 9. Halitosis and its treatment
- 10. Bruxism and itstreatment

B. Periodontal instrumentation

1. Instrumentation

- 2. Principles of periodontal instrumentation
- 3. Instruments used in different parts of the mouth

C. Periodontal therapy

- 1. Preparation of tooth surface
- 2. Plaque control
- 3. Anti microbial and other drugs used in periodontal therapy and wasting diseases of teeth
- 4. Periodontal management of HIV infected patients
- 5. Occlusal evaluation and therapy in the management of periodontal diseases
- 6. Role of orthodontics as an adjunct to periodontal therapy
- 7. Special emphasis on precautions and treatment for medically compromised patients
- 8. Periodontal splints
- 9. Management of dentinal hypersensitivity

D. Periodontal surgical phase - special emphasis on drug prescription

- General principles of periodontal surgery
- 2. Surgical anatomy of periodontium and related structures
- 3. Gingival curettage
- 4. Gingivectomy technique
- 5. Treatment of gingivalenlargements
- 6. Periodontal flap
- 7. Osseous surgery (resective and regenerative)
- 8. Furcation; Problem and its management
- 9. The periodontic endodontic continuum 10.Periodontic plastic and esthetic surgery 11.Recent advances in surgical techniques

E.Future directions and controversial questions in periodontal therapy

- 1. Future directions for infection control
- 2. Research directions in regenerative therapy
- 3. Future directions in anti-inflammatory therapy
- 4. Future directions in measurement of periodontal diseases
- E. Periodontal maintenance phase

- 1. Supportive periodontal treatment
- 2. Results of periodontal treatment

IV. ORAL IMPLANTOLOGY

- 1. Introduction and historical review
- 2. Biological, clinical and surgical aspects of dental implants
- 3. Diagnosis and treatment planning
- 4. Implant surgery
- 5. Prosthetic aspects of dental implants
- 6. Diagnosis and treatment of Peri implant complications
- 7. Special emphasis on plaque control measures implant patients
- 8. Maintenance phase

V. MANAGEMENT OF MEDICAL EMERGENCIES IN PERIODONTAL PRACTICE Teaching / learning Activities

- © Seminars: A minimum of 15 seminars to be presented by each student during the P.G. course (At least 5 Seminars per year)
- © Journal clubs: a minimum of 25 Journal articles to be reviewed by each student during the P.G. course
- © Interdepartmental Seminars: Each P.G. student should present at least t seminar in an Interdepartmental meeting during the P.G course. Such meetings maybe held at least once every month © Library Assignment: one to be presented at the end of 18 months of the course.

Academic Activities:

I Year

Submission of synopsis for Dissertation - within 6 months from the start of the course

II Year

Scientific Paper presentation at the conferences by the end of the 2nd year

III Year

Scientific Paper/ Poster presentation at conferences

Submission of Dissertation - 6 months before completion of III year

Skills First year

Pre - Clinical work

Dental

- 1. Practice of incisions and suturing techniques on the typhodont models
- 2. Fabrication of bite guards and splints
- 3. Occlusal adjustments on the casts mounted on the articulator
- 4. X- Ray techniques and interpretation
- 5. Local anesthetic techniques

1. Applied periodontal indices

4. Periodontal surgical procedures

-Pocket therapy

-Muco-gingival surgeries

-Implants (2 implants)

Medical

- 1. Basic diagnostic microbiology and immunology, collection and handling sample, culture techniques.
- 2. Basic understanding of immunological diseases
- 3. Interpretation of various biochemical investigations
- 4. Practical training and handling medical emergencies and basic life support devices
- 5. Basic Biostatistics Surveying and data analysis Clinical work

	P P P						
2.	Scaling and root planning (SRP)						
	a. Hand	15 CASES					
	b. Ultrasonic	15 CASES					
3.	Curettage	10 CASES					
4.	Gingivectomy	20 CASES					
5.	Ginqivoplasty	10 CASES					
Cli	Clinical Work						
2.	Case history and treatment planning	-Management of perio endo					
3.	Local Drug Delivery techniques	problems					

10 CASES

10 CASES 5 CASES

5. Occlusal adjustments 10 CASES

6. Perio splints 10 CASES

Third Year

Clinical work

1. Regenerative techniques

- Using various graft and barrier membranes

2. Record, maintenance and follow up of all treated cases including implants **Assessment examinations:** - In addition to the regular evaluation, log book etc., assessment examination should be

conducted once every six months & progress of the student monitored

Note: The number of cases mentioned are minimum number to be performed by each candidate.

Submission of Synopsis for Dissertation should be done within 6 months of the commencement of the course.

Submission of two copies of Library Assignments at the end of 1 and 2nd year Submission of preclinical work as scheduled. Submission of Dissertation - 6 months before completion of III year.

Maintenance of Work Diary/Log book as prescribed by RGUHS.

Monitoring Learning Progress

It is essential to monitor the learning progress to each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring to be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics, Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology, Applied pharmacology, Research Methodology and bio statistics, Applied Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

- (2) Part II (3 papers of 100 Marks):-
- (i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (iii) Paper III: 2 out of 3 essay questions (50 x 2 = 100 Marks)

B. Practical / Clinical Examination : 200 Marks

The clinical examination shall be of two days duration

1st day

Case discussion

- Long case- One
- Short case One

Periodontal surgery - Periodontal flap surgery on a previously prepared case in one quadrant of the mouth after getting approval from the examiners

2nd day

Post-surgical review and discussion of the case treated on the 1st day Presentation of dissertation & discussion All the examiners shall participate in all the aspects of clinical examinations / Viva Voce

Distribution of Marks for Clinical examination (recommended)

a) Long Case discussion	50
b) 2 short cases	50
c) Periodontal surgery	75
d) Post — operative review	25
Total	200

C. Viva Voce: 100 Marks

i. Viva- Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy: 20 marks

A topic is given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes

Topic be given to each candidate in the beginning of clinical examination. He/she is asked make a presentation on the topic for 8-10 minutes.

ORAL AND MAXILLOFACIAL SURGERY

Objective:

The training program in Oral and Maxillofacial Surgery is structured to achieve the following four objectives-

- © Knowledge
- © Skills
- © Attitude
- © Communicative skills and ability

Knowledge:

© To have acquired adequate knowledge and understanding of the etiology, patho physiology and diagnosis, treatment planning of various common oral and Maxillofacial surgical problems both minor and major in nature.

- © To have understood the general surgical principles like pre and post surgical management, particularly evaluation, post surgical care, fluid and electrolyte management, blood transfusion and post surgical pain management.
- © Understanding of basic sciences relevant to practice or oral and maxillofacial surgery.
- © Able to identify social, cultural, economic, genetic and environmental factors and their relevance to disease process management in the oral and Maxillofacial region.
- © Essential knowledge of personal hygiene and infection control, prevention of cross infection and safe disposal of hospital waste keeping in view the high prevalence of hepatitis and HIV.

 Skill
- © To obtain proper clinical history, methodical examination of the patient, perform essential diagnostic procedures and order relevant laboratory tests and interpn them and to arrive at a reasonable diagnosis about the surgical condition.
- © To perform with competence minor oral surgical procedures and common maxillofacial surgery. To treat both surgically and medically (or by other means of the oral and Maxillofacial and the related area).
- © Capable of providing care for maxillofacial surgery patients.

Attitude:

- © Develop attitude to adopt ethical principles in all aspect of surgical practice, professional honesty and integrity are to be fostered. Surgical care is to be delivered irrespective of the social status, caste, creed or religion of the patient.
- © Willing to share the knowledge and clinical experience with professional colleagues.
- © Wiling to adopt new techniques of surgical management developed from time to time based on scientific research which are in the best interest of the patient
- © Respect patient's right and privileges, including patients right to information and right to seek a second opinion.
- © Develop attitude to seek opinion from an allied medical and dental specialists as and when required. Communication skills:
- © Develop adequate communication skills particularly with the patients giving them the various options available to manage a particular surgical problem and obtain a true informed consent from them for the most appropriate treatment available at that point of time
 - © Develop the ability to communicate with professional colleagues.
 - © Develop ability to teach undergraduates.

Course content:

The program outline addresses both the knowledge needed in Oral and Maxillofacial Surgery and allied medical specialties in its scope. A minimum of three years of formal training through a graded system of education as specified will equip the trainee with skill and knowledge at its completion to be able to practice basic oral and Maxillofacial surgeon competently and have the ability to intelligently pursue

further apprenticeship towards advance Maxillofacial surgery.

The topics are considered as under:-

- © Basic sciences
- © Oral and Maxillofacial surgery
- © Allied specialties

Applied Basic Sciences:

A thorough knowledge both on theory and principles in general and in particular the basic medical subjects as relevant to the practice of maxillofacial surgery. It is desirable to have adequate knowledge in bio-statistics, Epidemiology, research methodology, nutrition and computers.

© Anatomy

Development of face, paranasal sinuses and associated structures and their anomalies: surgical anatomy of scalp temple and face, anatomy and its applied aspects of triangles of neck, deep structures of neck, cranial facial bones and its surrounding soft tissues, cranial nerves tongue, stemporal and infratemporal region, orbits and its contents, muscles of face and neck, paranasal sinuses, eyelids and nasal septum teeth gums and palate, salivary glands, pharynx, thyroid and parathyroid glands, larynx, trachea and esophagus, congenital abnormality of orofacial regions, General consideration of the structure and

© Physiology

Nervous system-physiology of nerve conduction, pain pathway, sympathetic and parasympathetic nervous system, hypothalamus and mechanism of controlling body temperature; Blood-its composition hemostasis, blood dyscrasias and its management, hemorrhage and its control, blood grouping, cross matching, blood component therapy, complications of blood transfusion, blood substitutes, auto transfusion, cell savers; digestive system composition and functions of saliva mastication deglutition, digestion, assimilation, urine formation, normal and abnormal constituents; Respiration control of ventilation anoxia, asphyxia, artificial respiration, hypoxia - types and management; CVS - cardiac cycle, shock, heart sounds, blood pressure, hypertension; Endocrinology- metabolism of calcium; endocrinal activity and disorder relating to thyroid gland, parathyroid gland, adrenal gland, pituitary gland, pancreas and gonads; Nutrition- general principles balanced diet. Effect of dietary deficiency, protein energy malnutrition, Kwashiorkor, Marasmus, Nutritional assessment, metabolic responses to stress, need for nutritional support, entrails nutrition, roots of access to GI tract, Parenteral nutrition, Access to central veins, Nutritional support; Fluid and Electrolytic balance/Acid Base metabolism- the body fluid compartment, metabolism of water and electrolytes, factors maintaining hemostasis, causes for treatment of acidosis and alkalosis.

©Biochemistry

General principles governing the various biological principles of the body, such as osmotic pressure,

electrolytes, dissociation, oxidation, reduction etc; general composition *of* body, intermediary metabolism, carbohydrate, proteins, lipids, enzymes, vitamins, minerals and antimetabolites.

© General Pathology

Inflammation - Acute and chronic inflammation, repair and regeneration, necrosis and gangrene, role of component system in acute inflammation, role of arachictonic acid and its metabolites in acute inflammation, growth factors in acute inflammation role of NSAIDS in inflammation, cellular changes in radiation injury and its manifestation; wound management - Wound healing factors influencing healing; properties if suture materials, appropriate uses of sutures; hemostasis - role of endothelium in thrombogenesis; arterial and venous thrombi, disseminated intravascular coagulation; Hypersensitivity; Shock and pulmonary failure: types of shock, diagnosis, resuscitation, pharmacological support, ARDS and its causes and prevention, ventilation and support, Neoplasm I | of tumors, Carcinogenes and Carcinogenesis, grading and staging of tumors, various laboratory investigation.

©General microbiology

Immunity, Hepatitis B and its prophylaxis, Knowledge of organisms, commonly associated with diseases of oral cavity, culture and sensitivity tests, various staining techniques-Smears and cultures, urine analysis and culture.

© Oral pathology and microbiology:

Developmental disturbances of oral and para oral structures, regressive changes of teeth, bacterial, viral, mycotic infection of oral cavity, dental caries, diseases of pulp and Periapical tissues, physical and chemical injuries of oral cavity, wide range of pathological lesions of hard and soft tissues of the orofacial regions like the cysts odontogenic infection, benign, malignant neoplasms, salivary gland diseases, maxillary sinus diseases, mucosal diseases, oral aspects of various systemic diseases, role of laboratory investigation in oral surgery.

©Pharmacology and therapeutics:

Definition of terminology used, pharmacokinetics and pharmadynamic dosage and mode of administration of drugs, action and fate in the body, drug addiction, tolerance and hypersensitive reactions, drugs acting on CNS, general and local anesthetics, antibiotics and analgesics, antiseptics, antitubercular, sialagogues, hematinics, anti diabetic, Vitamins A, B-complex, C.D.E.K

©Computer science

Use of computers in surgery, components of computer and its use in practice-principles of word processing, spreadsheet function database and presentations; the internet and its use. The value of computer based systems in biomedical equipment.

ORAL AND MAXILLOFACIAL SURGERY:

- © Evolution of Maxillofacial surgery.
- © Diagnosis, history taking, clinical examination, investigations.
- © Informed consent/medico-legal issues.
- © Concept of essential drugs and rational use of drugs.
- © Communication skills with patients- understanding clarity in communication, compassionate explanations and giving emotional support at the time of suffering and bereavement
- © Principles of surgical audit understanding the audit of process and outcome. Methods adopted for the same Basic statistics.
- © Principles of evidence bases surgery- understanding journal based literature study; the value of textbook, reference book articles, value of review articles; original articles and their critical assessment, understanding the value of retrospective, prospective, randomized control and blinded studies, understanding the prinyples and the meaning of various Bio-statistical tests applied in these studies.
- © Principles of surgery- developing a surgical diagnosis, basic necessities for surgery, aseptic techniques, incisions, flap designs, tissue handling, homeostasis, dead space management, decontamination and debridement, suturing, edema control, patient general health and nutrition.
- © Medical emergencies Prevention and management of altered consciousness, sensitivity reaction, chest discomfort, respiratory difficulty.
- © Pre operative workup Concept of fitness for surgery; basic medical work up; work up in special situation like diabetes renal failure, cardiac and respiratory illness; risk stratification
- © Surgical sutures, drains
- © Post operative care- concept of recovery room care, Airway management, Assessment of Wakefulness, management of cardio vascular instability in this period, Criteria for shifting to the ward, pain management
- © Wound management-Wound healing, factors influencing healing, basic surgical techniques, Properties of suture materials, appropriate use of sutures.
- © Surgical Infections Asepsis and antisepsis, Microbiological principles, Rational use of antibiotics, special infections like Synergistic Gangrene and Diabetic foot infection, Hepatitis and HIV infection and cross infection.
- © Airway obstruction/management Anatomy of the airway, principles of keeping the airway patent, mouth to mouth resuscitation, Oropharyngeal airway, endotracheal intubation, Cricothyroidectomy, Tracheostomy.
- © Anesthesia stages of Anesthesia, pharmacology of inhalation, intravenous and regional anesthetics, muscle relaxants.
- © Facial pain; Facial palsy and nerve injuries.

- © Pain control acute and chronic pain, cancer and non-cancer pain, patient controlled analgesia
- © General patient management competence in physical assessment of patients of surgery, competence in evaluation of patients presenting with acute injury, particularly to maxillofacial region. Competence in the evaluation of management of patients for anesthesia
- © Clinical oral surgery all aspects of dento alveolar surgery
- © Pre-prosthetic surgery A wide range of surgical reconstructive procedures inv their hard and soft tissues of the edentulous jaws.
- © Temporomandibular joint disorders TMJ disorders and their sequelae need e> evaluation, assessment and management. It is preferable to be familiar with diagrand therapeutic arthroscopic surgery procedures.
- © Tissue grafting Understanding of the biological mechanisms involved in auto and heterogeneous tissue grafting.
- © Reconstructive oral and maxillofacial surgery hard tissue and so reconstruction.
- © Anesthesia Stages of anesthesia, pharmacology of inhalation, intravenous and regional anesthesia, muscle relaxants.
- © Cyst and tumors of head and neck region and their management including principles of tumor surgery, giant cell lesion of jaw bones, fibro osseous lesion of jaw lesions. © Neurological disorders of maxillofacial region-diagnosis and management of Trigeminal Neuralgia, MPDS, Bells palsy, Frey's Syndrome, Nerve injuries
- © Maxillofacial trauma basic principles of treatment, primary care, diagnosis and management of hard and soft tissue injuries, Comprehensive, management including polytrauma patients
- © Assessment of trauma-multiple injuries patients/closed abdominal and chest injuries/penetrating injuries, pelvic fractures, urological injuries, vascular injuries.
- © Orthognathic surgery The trainee must be familiar with the assessment and correcting of jaw deformities
- © Laser surgery The application of laser technology in the surgical treatment of lesions amenable to such therapy
- © Distraction osteogenesis in maxillofacial region.
- © Cryosurgeries Principles, the application of cryosurgery in the surgical management of lesions amenable to such surgeries.
- © Cleft lip and palate surgery- detailed knowledge of the development of the face, head and neck, diagnosis and treatment planning, Current concepts in the management of cleft lip and palate deformity, knowledge of nasal endoscopy and other diagnostic techniques In the evaluation of speech and hearing, concept of multi disciplinary team management.
- © Aesthetic facial surgery detailed knowledge of structures of facial neck including skin and

underlying soft tissues, diagnosis and treatment planning of deformities and conditions affecting facial kin, underlying facial muscles, bone, eyelids, external ear etc. surgical management of post acne scaring, face lift, blepharoplasty, otoplasty, facial bone recountouring etc.

- © Craniofacial surgery basic knowledge of developmental anomalies of face, head and neck, basics concept in the diagnosis and planning of various head and neck anomalies including facial cleft, craniosynostosis, syndromes, etc., Current concepts in the management of craniofacial anomalies
- © Head and neck oncology understanding of the principles of management of head and neck oncology including various pre cancerous lesions, Experience in the surgical techniques of reconstruction following ablative surgery.
- © Micro vascular surgery.
- © Implantology principles, surgical procedures for insertion of various types of implants.
- © Maxillofacial radiology/radio diagnosis
- © Other diagnostic methods and imaging techniques

Allied specialties:

- © General medicine: General assessment of the patient including children with special iphasis on cardiovascular diseases endocrinal and metabolic respiratory and renal eases, Blood dyscrasias
- © General surgery: Principles of general surgery, exposure to common general surgical procedures.
- © Neuro surgery: Evaluation of a patient with head injury, examination of various Neuro-surgical procedures
- © ENT/Ophthalmology: Examination of ear, nose throat, exposure to ENT surgical procedures, ophthalmic examination and evaluation, exposure to ophthalmic surgical procedures.
- © Orthopedic: basic principles of orthopedic surgery, bone diseases and trauma as relevant to Maxillofacial surgery, interpretation of radiographs, CT, MRI and ultrasoi
- © Anesthesia: Evaluation of patients for GA techniques and management of emergencies, various IV sedation techniques

Academic Clinical programme (applicable for all three years):

- © Seminars to be presented attended once in a week.
- © Journal clubs (departmental and interdepartmental) to be conducted once in fifteen days.
- © Departmental and interdepartmental discussions to be held once in a month.
- © Minimum 2 scientific papers should be presented.
- © Every candidate shall maintain a logbook to record his/hers wok or participate all activities such as journal clubs, seminars, CDE programs etc. this wove| scrutinized and certified by the head of the departmental and head of the institute and presented to the university every year

Year by year programme: I Year First 6 Months:

Dissection, basic sciences, basic computer sciences, exodontias, seminars on basic selection of dissertation topic, library assignment topic, attending O.T and ward preparation of synopses and its submission within the six months after admission to the university as per calendar of events.

Second six Months (rotation and postings in other department):

Oncology - 2 months

Emergency - 1 month

General medicine- - 15 days

General surgery/anesthesia - 15 days

Ophthalmology -15 days

Neurology -15 days

ENT -15 days

II Year

Minor oral surgery and higher surgical training Submission of library assignment by the end of first term

Examination on minor oral surgical procedures - one paper of three hours duration to be conducted by the college.

III Year

Maxillofacial surgery, submission of dissertation in the first term, i.e. six months before the final examination to the university.

Examination of three hours duration three months before the final examination to be conducted by the college. It is desirable to enter general surgical skills and operative procedure that are observed, assisted or performed in the log book in the format as given by RGUHS in the revised ordinance governing MDS degree course.

Final examination at the end of the third

SL	Procedure	Category	Year	Number

No				
	Injection I.M. and I.V.	PI	I,II	50,20
2	Minor suturing and removal of sutures	Pi	I	N,A
3	Incision & drainage of an abscess	PI	I	10
	Surgical extraction	PI	I	15
5	Impacted teeth	PI, PA	I, II	20,10
6	Pre prosthetic surgery-	PI		
	a) corrective procedures	PI	I	15
	b) ridge extension	PA	I,II	3
	c) ridge reconstruction	A	II,III	3
7	OAF closure	PI, PA	I, II	3,2
	Cyst enuleation	Pl.PA	I, H	5,5
	Mandibular fractures	PI,PA	I,II	10,10
10	Peri-apical surgery	PI,PA	I	5
11	Infection management	PI,PA	I, II	N,A
12	Biopsy procedures	PI	I, H	N,A
13	Removal of salivary calculi	PA	I, H	3,5
14	Benign tumors	PA, A	II, III	3,3
15	mid face fractures	PA, A	II, III	3,5
16	Implants	PA.A	II, III	5,5
17	Tracheotomy	PA.A	II, III	2,2
18	Skin grafts	PA	III	3,5
19	Orthognathic surgery	PA,A	II, III	3
20	Harvesting bone & cartilage grafts a) Iliac crest b) Rib c) Calvarial d) Fibula	PA A A A,0		3 2 2
21	T.M. Joint surgery	PA, A	II, I,	1
22	Jaw resections	PA, A	III, II	3,3

23	Onco surgery	A,0	III, III	3,3
24	Micro vascular anastomosis	A,0	III	5,10
25	Cleft lip & palate	PA,A	II, III	10,15
26	Distraction osteogenesis	A,0	II, III	2,3
27	Rhinoplasty	A,0	III	3,5
28	Access osteotomies and base of skull surgeries	A,0	III	1,3

ORAL AND MAXILLOFACIAL SURGERY

Paper I: Applied Basic Sciences: Applied Anatomy, Physiology, Biochemistry, General and Oral Pathology and Microbiology and Pharmacology Applied Anatomy

- 1. Surgical anatomy of the scalp, temple and face
- 2. Anatomy of the triangles of neck and deep structures of the neck
- 3. Cranial and facial bones and its surrounding soft tissues with its applied aspects in maxillofacial injuries.
- 4. Muscles of head and neck
- 5. Arterial supply, venous drainage and lymphatics of head and neck
- 6. Congenital abnormalities of the head and neck
- 7. Surgical anatomy of the cranial nerves
- 8. Anatomy of the tongue and its applied aspects
- 9. Surgical anatomy of the temporal and infratemporal regions
- 10. Anatomy and its applied aspects of salivary glands, pharynx, thyroid and parathyroid gland, larynx, trachea esophagus
- 11. Tooth eruption, morphology, and occlusion.
- 12. Surgical anatomy of the nose.
- 13. The structure and function of the brain including surgical anatomy of intra cranial venous sinuses.
- 14. Autonomous nervous system of head and neck
- 15. Functional anatomy of mastication, deglutition, speech, respiration and circulation 16. Development of face, paranasal sinuses and associated structures and their anomalies 17. TMJ: surgical anatomy and function

Physiology: 1.Nervous system

© Physiology of nerve conduction, pain pathway, sympathetic and parasympathetic nervous system, hypothalamus and mechanism of controlling body temperature

2. Blood

- **©**Composition
- © Haemostasis, various blood dyscrasias and its management of patients with the same
- © Hemorrhage and its control
- © Capillary and lymphatic circulation.
- © Blood grouping, transfusing procedures.

3. Digestive system

- © Saliva composition and functions of saliva
- © Mastication deglutition, digestion, assimilation
- © Urine formation, normal and abnormal constituents

4. Respiration

- © Control of ventilation anoxia, asphyxia, artificial respiration
- © Hypoxia types and management

5. Cardiovascular System

- © Cardiac cycle,
- © Shock
- © Heart sounds,
- © Blood pressure,
- © Hypertension:

6. Endocrinology

- © General endocrinal activity and disorder relating to thyroid gland,
- © Parathyroid gland, adrenal gland, pituitary gland, pancreas and gonads:
- © Metabolism of calcium

7. Nutrition

© General principles balanced diet, effect of dietary deficiency, protein malnutntton, Kwashiorkor,

Marasmus:

© Fluid and Electrolytic balance in maintaining haemostasis and significance in minor and major surgical procedures

Biochemistry

General principles governing the various biological activities of the body, such as osmotic pressure, electrolytes, dissociation, oxidation, reduction etc. General composition of the body Intermediary metabolism

Carbohydrates, proteins, lipids, and their metabolism Nucleoproteins, nucleic acid and nucleotides and their metabolism Enzymes, vitamins and minerals Hormones

Body and other fluids. Metabolism of inorganic elements. Detoxification in the body. Antimetabolites.

Pathology:

1. Inflammation-

- © Repair and regeneration, necrosis and gangrene
- © Role of component system in acute inflammation,
- © Role of arachidonic acid and its metabolites in acute inflammation,
- © Growth factors in acute inflammation
- © Role of molecular events in cell growth and intercellular signaling cell surface receptors
- © Role of NSAIDs in inflammation,
- © Cellular changes in radiation injury and its manifestation:

2. Haemostasis

- © Role of endothelium in thrombogenisis,
- © Arterial and venous thrombi,
- © Disseminated Intravascular coagulation

3. Shock:

- © Pathogenesis of hemorrhagic, neurogenic, septic, cardiogenic shock
- © Circulatory disturbances, ischemia hyperemia, venous congestion, eden infarction

4. Chromosomal abnormalities:

© Marians Syndrome, Ehler's Danlos Syndrome, Fragile X- Syndrome

5. Hypersensitivity:

- © Anaphylaxis, type 2 hypersensitivity, type 3 sensitivity and cell mediated reaction. And its clinical importance, systemic lupus erythematosus.
- © Infection and infective granulomas.

6. Neoplasia:

© Classification of tumors.

- © Carcinogenesis and carcinogen- chemical, viral and microbial
- © Grading and staging of cancers, tumor Angiogenesis, Paraneoplastic syndrome, spread of tumors.
- © Characteristics of benign and malignant tumors

7. Others:

- © Sex linked a gamma globulinemia.
- © AIDS
- © Management of immune deficiency patients requiring surgical procedures
- © De George Syndrome
- C Ghons complex, post primary pulmonary tuberculosis pathology and pathogenesis.

8. Oral Pathology:

- © Developmental disturbances of oral and Para oral structures
- © Regressive changes of teeth.
- © Bacterial, viral and mycotic infections of oral cavity
- © Dental caries,, diseases of pulp and periapical tissues
- © Physical and chemical injuries of the oral cavity
- © Oral manifestations of metabolic and endocrinal disturbances
- © Diseases of jawbones and TMJ
- © Diseases of blood and blood forming organs in relation ot oral cavity
- © Cysts of the oral cavity © Salivary gland diseases © Role of laboratory investigations in oral surgery

9. Microbiology:

- © Immunity
- © Knowledge of organisms commonly associated with disease of oral cavity.
- © Morphology cultural characteristics of strepto, staphylo, pneumo, gono, meningo, Clostridium group of organism, spirochetes, organisms of TB, leprosy, diphtheria, actinomycosis and moniliasis
- © Hepatitis B and its prophylaxis
- © Culture and sensitivity test
- © Laboratory determinations
- © Blood groups, blood matching, RBC and WBC count
- © Bleeding and clotting time etc, smears and cultures,
- © Urine analysis and cultures. Applied Pharmacology and Therapeutics:
- 1. Definition of terminologies used
- 2. Dosage and mode of administration of drugs.
- 3. Action and fate of drugs in the body

- 4. Drug addiction, tolerance and hypersensitive reactions.
- 5. Drugs acting on the CNS
- 6. General and local anesthetics, hypnotics, analeptics, and tranquilizers.
- 7. Chemo therapeutics and antibiotics
- 8. Analgesics and antipyretics
- 9. Antitubercular and antisyphilitic drugs. 10. Antiseptics, sialogogues and antisialogogues
- 11.Haematinics
- 12. Antidiabetics
- 13. Vitamins A, B-complex, C, D, E, K

MINOR ORAL SURGERY AND TRAUMA

- © Principles of Surgery: Developing a surgical diagnosis, basic necessities!

 Surgery, Aseptic Techinque, Incisions, Flap Design Tissue handling, Haemostas dead space management, decontamination and debridment, Suturing, Oedema control, patient general health and nutrition.
- © Medical Emergencies: prevention and management of altered consciousness (syncope, orthostatic hypotension, seizures, diabetes mellitus, adrenal insufficiency hypersensitivity reactions, chest discomfort, and respiratory difficulty.
- 1. Examination and Diagnosis: clinical history, physical and radiographic, clinical and laboratory diagnosis, oral manifestations of systemic diseases, implications systemic diseases in surgical patients.
- 2. Haemorrhage and Shock : applied physiology, clinical abnormalities coagulation, extra vascular hemorrhage, and hemorrhagic lesions, management secondary hemorrhage, shock.
- 3. Exodontia: principles of extraction, indications and contraindications, types of extraction, complications and their management, principles of elevators and elevators used in oral surgery.
- 4. Impaction: surgical anatomy, classification, indications and contraindications, diagnosis, procedures, complications and their management.
- 5. Surgical Aids to Eruption Of Teeth: surgical exposure of unerupted teeth, surgical repositioning of partially erupted teeth.
- 6. Transplantation of Teeth
- 7. Surgical Endodontics: indications and contraindications, diagnosis, procedures of periradicular surgery
- 8. Precedures To Impove Alveolar soft tissues: requirements, types (alveloplasty, tuberosity reduction, mylohyoid ridge reduction, genial reduction, removal of exostosis, vestibuloplasty)
- 9. Procedures to Improve Alveloar soft Tissues: hypermobile tissues- operative / sclerosing method, epulis fissuratum, frenectomy and frenotomy

- 10. Infection of Head and Neck: Odontogenic and non Odontogenic infections, factors affecting spread of infection, diagnosis ad differential diagnosis, management of facial space infections, Ludwig angina, cavernous sinus thrombosis.
- 11. Chronic Infections of the Jaws: Osteomyelitis (types, etiology, pathogenesis, management) osteoradionecrosis
- 12. Maxillary Sinus: maxillary sinusitis types, pathology, treatment, closure of Oro antral fistula. Caldwell-luc operation
- 13. Cysts of the Orofacial region: classification, diagnosis, management of OKC, dentigerous, radicular non Odontogenic, ranula
- 14. Neurological Disorders of the maxillofacial region: diagnosis and management of trigeminal neuralgia, MPDS, bell's palsy, Frey's syndrome, nerve injuries.
- 15. Implantlogy: definition, classification, indications and contraindications, advantages and disadvantages, surgical procedure.
- 16. Anesthesia

Local Anesthesia: classification of local anesthetic drugs, modes of action indications and contra indications, advantages and disadvantages, techniques, complications and their management.

General Anesthesia: classification, stages of GA, mechanism of action, indications, and contra indications, advantages and disadvantages, post anesthetic complications and emergencies, anesthetic for dental procedures in children, pre medication, conscious sedation, legal aspects for GA

- 17. Trauma
- 18. Surgical Anatomy of head and Neck
- 19. Etiology of Injury
- 20. Basic Principles of Treatment
- 21. Primary Care: resuscitation, establishment of airway, management of hemorrhage, management of head injuries and admission to hospital.
- 22. Diagnosis: clinical, radiological
- 23. Soft Tissue Injury of Face and Scalp: classification and management of soft tissue wounds, injuries to structure requiring special treatment.
- 24. Dento Alveoalr Fractures: examination and diagnosis, classification, treatment, prevention.
- 25. Mandibular Fractures: classification, examination and diagnosis, general principles of treatment, complications and their management
- 26. Fracture of Zygomatic Complex: classification, examination and diagnosis, general principles of treatment, complications and their management.

- 27. Orbital Fractures: blow out fractures
- 28. Nasal Fractures
- 29. Fractures of Middle third of the Facial Skeleton: emergency care, fractured maxilla, and treatment of le fort I, II, III, fractures of Naso orbito ethmoidal region.
- 30. Opthalmic Injuries: minor injuries, non-perforating injuries, perforating injuries, retiobulbar hemorrhage, and traumatic optic neuropathy.
- 31. Traumatic Injuries to Frontal sinus: diagnosis, classification, treatment
- 32. Maxillofacial injuries in Geriatric and pediatric Patients 33.Gun shot wounds and War Injuries
- 34.Osseointegration in Maxillofacial Reconstruction
- 35. Matabolic response to Trauma: neuro endocrine responses, inflammatory medi clinical implications
- 36. Healing of Traumatic Injuries: soft tissues, bone, cartilage, response of periph nerve to injury
- 37. Nutritional Consideration following Trauma
- 38. Tracheostomy: indications and contraindications, procedure, complications and their management.

MAXILLOFACIAL SURGERY

Salivary gland

- © Sialography
- © Salivary fistula and management
- © Diseases of salivary gland developmental disturbances, cysts, inflam and sialolithiasis
- © Mucocele and Ranula
- © Tumors of salivary gland and their management
- ©Staging of salivary gland tumors
- ©Parotidectomy

Temporomandibular Joint

- © Etiology, history signs, symptoms, examination and diagnosis of temporomandibular joint disorders
- © Ankylosis and management of the same with different treatment modalities
- © MPDS and management
- © Condylectomy different procedures
- © various approaches to TMJ
- © Recurrent dislocations Etiology and Management

Oncology

- © Biopsy
- © Management of pre-malignant tumors of head and neck region

- © Benign and Malignant tumors of Head and Neck region
- © Staging of oral cancer and tumor markers
- © Management of oral cancer
- © Radial Neck dissection
- © Modes of spread of tumors
- © Diagnosis and management of tumors of nasal, paranasal, neck, tongue, cheek, maxilla and mandible
- © Radiation therapy in maxillofacial regions.
- © Lateral neck swellings

Orthognathic surgery

- © Diagnosis and treatment planning
- © Cephalometric analysis
- © Model surgery
- © Maxillary and mandibular repositioning procedures
- © Segmental osteotomies
- © Management of apertognathia
- © Genioplasty
- © Distraction osteogenesis

Cysts and tumor of oro facial region

- © Odontogenic and non-Odontogenic tumors and their management
- © Giant lesions of jawbone
- © Fibro osseous lesions of jawbone
- © Cysts of jaw

Laser surgery

- © The application of laser technology in surgical treatment of lesions Cryosurgery
- © Principles, applications of cryosurgery in surgical management of Cleft lip and palate surgery
- © Detailed knowledge of the development of the face, head and neck
- © Diagnosis and treatment planning
- © Current concepts in the management of cleft lip and palate deformity
- © Knowledge of Naso endoscopy and other diagnostic techniques in the evaluation of speech and hearing
- © Concept of multidisciplinary team management

Aesthetic facial surgery

© Detailed knowledge of the structures of the face and neck including skin a underlying soft tissue

© Diagnosis and treatment planning of deformities and conditions affecting facial skin

© Underlying facial muscles, bone. Eyelids external ear

© Surgical management of post acne scarring, facelift, blepharoplasty, otoplasty, facial bone

recontouring, etc

Craniofacial surgery

© Basic knowledge of developmental anomalies of the face, head and neck

© Basic concepts in the diagnosis and planning of various head and neck anomalies including facial

clefts, craniosynostosis, syndromes, etc.

© Current concept in the management of Craniofacial anomalies

Monitoring Learning Progress

It is essential to monitor the learning progress to each candidate through continuous appraisal and

regular assessment. It not only helps teachers to evaluate students, but also students to evaluate

themselves. The monitoring to be doneby the staff of the department based on participation of

students in various teaching / learning activities. It may be structured and assessment be done using

checklists that assess various aspects. Checklists are given in Section IV

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory)

Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - **300 Marks** (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the

end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS

course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics,

Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology,

Applied pharmacology, Research Methodology and bio statistics,. Applied Dental anatomy & histology, Oral

pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

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Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions

carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two

questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the

papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

(2) Part II (3 papers of 100 Marks):-

(i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

Practical / Clinical Examination: 200 Marks.

a. Minor Oral Surgery -100 Marks

Each candidate is required to perform the minor oral surgical procedures under local anaesthesia. The minor surgical cases may include removal of impacted lower third molar, cyst enucleation, any similar

procedure where students can exhibit their professional skills in raising the flap, removing the bone

and suturing the wound.

b. One long case - 60 marks

c. Two short cases - 20 marks each

Viva Voce:

100 Marks

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i. Viva-voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise: 20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked make a presentation on the topic for 8-10 minutes.

CONSERVATIVE DENTISTRY and ENDODONTICS

The following objectives are laid out to achieve the goals of the course. These are to be achieved by the time the candidate completes the course. These objectives may be considered under the following subtitles. Knowledge

At the end of 36 months of training, the candidates should be able to:

- © Describe aeitology, pathophysiology, periapical diagnosis and management of common restorative situations, endodontic situations that will include contemporary management of dental caries, management of trauma and pulpal pathoses including periodontal situations.
- © Demonstrate understanding of basic sciences as relevant to conservative / restorative dentistry and Endodontics.
- © Identify social, economic, environmental and emotional determinants in a given case or community and take them into account for planning and execution at individual and community level.
- © Ability to master differential diagnosis and recognize conditions that may require multi disciplinary approach or a clinical situation outside the realm of the specialty, which he or she should be able to recognize and refer to appropriate specialist.
- © Update himself by self-study and by attending basic and advanced courses, conferences, seminars, and workshops in the specialty of Conservative Dentistry- Endodontics-Dental Materials and Restorative Dentistry.
- © Ability to teach, guide, colleagues and other students. Use information technology tools and carry out research both basic and clinical with the aim of publishing his/her work and presenting the same at scientific platforms

Skills

© Take proper chair side history, examine the patient and perform medical and dental diagnostic procedures and order as well as perform relevant tests and interpret to them to come to a reasonable diagnosis about the dental condition in general and Conservative Dentistry - Endodontics in particular. And undertake complete patient monitoring including preoperative as well as post operative care of the patient.

- © Perform all levels of restorative work and surgical and non-surgical Endodontics including endodontic endoosseous implants, as well as endodontic-periodontal surgical procedures as part of multidisciplinary approach to clinical condition.
- © Provide basic life saving support in emergency situations.
- © Manage acute pulpal and pulpo periodontal situations.
- © Have a thorough knowledge of infection control measures in the dental clinical environment and laboratories.

Human Values, Ethical Practice and Communication Abilities

- © Adopt ethical principles in all aspects of restorative and contemporaries Endodontics" including nonsurgical and surgical Endodontics. © Professional honesty and integrity should be the top priority.
- © Dental care has to be provided regardless of social status, caste, creed or religion of the patient.
- © Develop communication skills- in particular to explain various options available management and to obtain a true informed consent from the patient.
- © Apply high moral and ethical standards while carrying on human or animal research .He / She shall not carry out any heroic procedures and must know his limitations in performing all aspects of restorative dentistry including Endodontics. Ask for help from colfeagues or seniors when required without hesitation O Respect patient's rights and privileges including patients right to information.

Course Contents:

Applied Anatomy of Head and Neck

- © Development of face, paranasal sinuses and the associated structures and their anomalies, cranial and facial bones, TMJ anatomy and function, arterial and venous drainage of head and neck, muscles of face and neck including muscles of mastication and deglutition, brief consideration of structures and function of brain. Brief consideration of all cranial nerves and autonomic nervous system of head and neck. Salivary glands, Functional anatomy of mastication, deglutition and speech. Detailed anatomy of deciduous and permanent teeth, general consideration in physiology of permanent dentition, form, function, alignment, contact, occlusion.)
- © Internal anatomy of permanent teeth and its significance
- © Applied histology, histology of skin, oral mucosa, connective tissue, bone cartilage, blood vessels, lymphatics, nerves, muscles, tongue.

Development of Teeth

- © Enamel development and composition, physical characteristics, chemical properties, structure
- © Age changes clinical structure
 - © Dentin development, physical and chemical properties, structure type of dentin, innervations, age and functional changes.
 - © Pulp development, histological structures, innervations, functions, regressive changes, clinical considerations.

- © Cementum composition, cementogenesis, structure, function, clinical consideration.
- © Periodontal ligament development, structure, function and clinical consideration.
- © Salivary glands structure, function, clinical considerations.

Applied Physiology

- © Mastication, deglutition, digestion and assimilation, fluid and electrolyte balance.
- © Blood composition, volume, function, blood groups, haemostasis, coagulation, blood transfusion, circulation, heart, pulse, blood pressure, shock, respiration, control, anoxia, hypoxia, asphyxia, artificial respiration, and endocrinology general principles of endocrine activity and disorders relating to pituitary, thyroid, parathyroid, adrenals including pregnancy and lactation.
- © Physiology of saliva composition, function, clinical significance.
- © Clinical significance of vitamins, diet and nutrition balanced diet.
- © Physiology of pain, sympathetic and Para sympathetic nervous system, pain pathways, physiology of pulpal pain, Odontogenic and non Odontogenic pain, pain disorders typical and atypical, biochemistry such as osmotic pressure, electrolytic dissociation, oxidation, reduction etc., carbohydrates, proteins, lipids and their metabolism, nucleoproteins, nucleic acid and their metabolism. Enzymes, vitamin and minerals, metabolism of inorganic elements, detoxification in the body, anti metabolites, chemistry of blood lymph and urine.

Pathology

- © Inflammation, repair, degeneration, necrosis and gangrene.
- © Circulatory disturbances ischemia, hyperemia, edema, thrombosis, embolism, infarction, allergy and hypersensitivity reaction.
- © Neoplasms classifications of tumors, characteristics of benign and malignant tumors, spread tumors.
- © Blood dyscrasias
- © Developmental disturbances of oral and Para oral structures, dental caries, regressive changes of teeth, pulp, periapical pathology, pulp reaction to dental caries and dental procedures.
- © Bacterial, viral, mycotic infections of the oral cavity.

Microbiology

© Pathways of pulpal infection, oral flora and micro organisms associated with endodontic diseases, pathogenesis, host defense, bacterial virulence factors, healing, theory of focal infections, microbes or relevance to dentistry - strepto, staphylococci, lactobacilli, comyebacterium, actinomycetes, Clostridium, neisseria, vibrio, bacteriods, fusobacteria, spirochetes, mycobacterium, virus and fungi.

- © Cross infection, infection control, infection control procedure, sterilization and disinfection.
- © Immunology antigen antibody reaction, allergy, hypersensitivity and anaphylaxis, auto immunity, grafts, viral hepatitis, HIV infections and aids. Identification and isolation of microorganisms from infected root canals. Culture medium and culturing technique (Aerobic and anaerobic interpretation and antibiotic sensitivity test).

Pharmacology

- © Dosage and route of administration of drugs, actions and fate of drug in body, drug addiction, tolerance of hypersensitivity reactions.
- © Local anesthesia agents and chemistry, pharmacological actions, fate and metabolism of anaesthetic, ideal properties, techniques and complications.
- © General anesthesia pre medications, neuro muscular blocking agents, induction agents, inhalation anesthesia, and agents used, assessment of anesthetic problems **in** medically compromised patients.
- © Anaesthetic emergencies
- © Antihistamines, corticosteroids, chemotherapeutic and antibiotics, drug resistance, haemostasis, and haemostatic agents, anticoagulants, sympathomimitic drugs, vitamins and minerals (A, B, C, D, E, K IRON), anti sialogogue, immunosupressants, drug interactions, antiseptics, disinfectants, anti viral agents, drugs acting on CNS.

Biostatistics

© Introduction, Basic concepts, Sampling, Health information systems - collection, compilation, presentation of data. Elementary statistical methods - presentation of statistical data, Statistical averages - measures of central tendency, measures of dispersion, Normal distribution. Tests of significance - parametric and non - parametric tests (Fisher extract test, Sign test, Median test, Mann Whitney test, Krusical Wallis one way analysis, Friedmann two way analysis, Regression analysis), Correlation and regression, Use of computers.

Research Methodology

- © Essential features of a protocol for research in humans
- © Experimental and non-experimental study designs
- © Ethical considerations of research

Applied Dental Materials

- © Physical and mechanical properties of dental materials, biocompatibility.
- © Impression materials, detailed study of various restorative materials, restorative resin and recent advances in composite resins, bonding- recent developments- tarnish and corrosion, dental amalgam, direct filling gold, casting alloys, inlay wax, die materials, investments, casting procedures, defects, dental cements for restoration and pulp protection (luting, liners, bases) cavity varnishes.

© Dental ceramics-recent advances, finishing and polishing materials. © Dental burs - design and mechanics of cutting - other modalities of tooth preparation. © Methods of testing biocompatibility of materials used.

CONSERVATIVE DENTISTRY

- 1. Examination, diagnosis and treatment plan
- 2. Occlusion as related to conservative dentistry, contact, contour, its significance. Separation of teeth, matrices, used in conservative dentistry.
- 3. Dental caries- epidemiology, recent concept of etiological factors, pathophysiology, Histopathology, diagnosis, caries activity tests, prevention of dental caries and management recent methods.
- 4. Hand and rotary cutting instruments, development of rotary equipment, speed ranges hazards.
- 5. Dental burs and other modalities of tooth reparation- recent developments (air abrasions, lasers etc)
- 6. Infection control procedures in conservative dentistry, isolation equipments etc.
- 7. Direct concepts in tooth preparation for amalgam, composite, GIC and restorative techniques, failures and management.
- 8. Direct and indirect composite restorations.
- 9. Indirect tooth colored restorations- ceramic, inlays and onlays, veneers, crowns, recent advances in fabrication and materials.

a. Tissue management

- 10. Impression procedures used for direct restorations.
- 11. Cast metal restorations, indications, contraindications, tooth preparation for class! inlay, Onlay full crown restorations.

Restorative techniques, direct and indirect methods of fabrication including materi used for fabrication like inlay wax, investment materials and

- 12. Direct gold restorations.
- 13. Recent advances in restorative materials and procedures.
- 14. Management of non-carious lesion.
- 15. Advance knowledge of minimal intervention dentistry.
- 16. Recent advances in restoration of endodontically treated teeth and grossly mutilated teeth
- 17. Hypersensitivity, theories, causes and management.

- 18. Lasers in Conservative Dentistry
- 19. CAD-CAM & CAD-CIM in restorative dentistry
- 20. Dental imaging and its applications in restorative dentistry (clinical photography)
- 21. Principles of esthetics
- -Facial analysis
- -Smile design
- -Principles of esthetic integration
- -Treatment planning in esthetic dentistry

Endodontics

- 1. Rationale of endodontics.
- 2. Knowledge of internal anatomy of permanent teeth, anatomy of root apex and its implications in endodontic treatment.
- 3. Dentin and pulp complex.
- 4. Pulp and periapical pathology
- 5. Pathobiology of periapex.
- 6. Diagnostic procedure recent advances and various aids used for diagnosis-
- a. Orofacial dental pain emergencies: endodontic diagnosis and management
- 7. Case selection and treatment planning
- 8. Infection control procedures used in endodontics (aseptic techniques such as rubber dam, sterilization of instruments etc.)
- 9. Access cavity preparation objectives and principles
- 10. Endodontic instruments and instrumentation recent developments, detailed description of hand, rotary, sonic, ultra sonic etc..
- 11. Working length determination / cleaning and shaping of root canal system and recent development in techniques of canal preparation.
- 12. Root canal irrigants and intra canal medicaments used including non surgical endodontics by calcium hydroxide.
- 13. Endodontic microbiology.
- 14. Obturating materials, various obturation techniques and recent advances in obturation of root canal.
- 15. Traumatic injuries and management endodontic treatment for young permanent teeth. Pediatric endodontics treatment of immature apex.

- 16. Endodontic surgeries, recent developments in technique and devices, endoosseous endodontic implants biology of bone and wound healing.
- 17. Endoperio interrelationship, endo + Perio lesion and management
- 18. Drugs and chemicals used in endodontics
- 19. Endo emergencies and management.
- 20. Restoration of endodontically treated teeth, recent advances.
- 21. Geriatric endodontics
- 22. Endo emergencies and management.
- 23. Biologic response of pulp to various restorative materials and operative procedures.
- 24. Lasers in endodontics.
- 25. Multidisciplinary approach to endodontic situations. 26. Endodontic radiology- digital technology in endodontic practice. 27. Local anesthesia in endodontics.
- 28. Procedural errors in endodontics and their management. 29. Endodontic failures and retreatment.
- 30. Resorptions and its management. 31. Microscopes in endodontics.
- 32. Single visit endodontics, current concepts and controversies.

First Year

Pre Clinical Work - Operative and Endodontics

Preclinical work on typhodont teeth

1.	Class 2 amalgam cavities	
a.	Conservative preparation	
b.	Conventional preparation	- 0 3 - 0 3
2.	Inlay cavity preparation on premolars And molars - MO, DO, MOD	0.5
a.	Wax pattern	-10
b.	Casing	-06
3.	Onlay preparation oh molars a. Casting	
4.	Full Crown	- 0 4
a.	Anterior	- 0 2
b.	Posterior	-01
(2	each to be processed)	05
5.	7/8 crown (1 to be processed)	05
6.	3 / 4 crown premolars (1 to be processed) Pre Clinical work on natural teeth	- 0 2
		- 0 2
1.I	nlay on molars and premolars MO, DO, and MOD	08
a.	Casting	02
b.	Wax pattern	02
	•	

2. Amalgam cavity preparation

a.Conventional 02

b. Conservative	02		
3. Pin retained amalgam on molar teeth	02		
4. Post and core build up			
Anterior teeth	10		
Posterior teeth	05		
5. Casting			
Anterior	04		
Posterior	02		
6. Onlay on molars	03		
(1 to be processed)		0.4	
7. Full crown premolars and molars8. Full crown anterior		04 06	
(2 and 3 to be processed)		00	
9. Veneers anterior teeth (indirect method)		02	
10. Composite inlay (class 2)		03	
11. Full tooth wax carving - all permanent teeth			
Endodontics 1. Continuing of all maniflague and mandibular tooth			
1. Sectioning of all maxillary and mandibular teeth.			
2. Sectioning of teeth - in relation to deciduous molar, 2nd prin	mary upper and lower	molar 1 each	
3. Access cavity opening and root canal therapy in relation to	3. Access cavity opening and root canal therapy in relation to maxillary and mandibular permanent		
teeth			
4. Access cavity preparation and BMP Anterior			
a. Conventional prep			
b. Step back			
c. Crown down			
Obturation 03			
5. BMP Premolar 06 (2 upper and 2 lower) obturation 1 ea	ach		
6. BMP Molar 06 (3 upper - 2 first molars and 1 second	6. BMP Molar 06 (3 upper - 2 first molars and 1 second molar, 3 lower - 2 first molars and 1		
second molar) obturation 1 each	second molar) obturation 1 each		
7. Post and core preparation and fabrication in relation to anterior and posterior teeth			
a. Anterior 10 (casting 4)			
b. Posterior 05 (casting 2)			
c. Removable dies 04			
Note: Technique work to be completed in the first four months Clinical work			
A. Composite restorations 30			

B. GIC restorations

C. Complex amalgam restorations	05	
D. Composite inlay + veneers	05	
Direct + Indirect		
E. Ceramic jacket crown	05	
F G Post and core for anterior teeth	Bleaching 05	
vital		
	05	
Non Vital	05	
H. RCT Anterior	20	
I. Endo surgery - observation as	nd assisting 05	
Presentation of		
© Seminars - 5 seminars by each stu	dent - should include topics in dental conservative dentistry and	
endodontics		
© Journal clubs - by each student		
© Submission of synopsis at the end	of 6 months	
© Library assignment work		
© Internal assessment - theory and clinicals.		
Second Year		
Case discussion-5		
1 Ceramic jacket crowns	10	
2 Post and core for anterior teeth	10	
3 Post and core for posterior teeth	05	
4 Composite restoration	05	
5 Full crown for posterior teeth	15	
6 Cast gold inlay	05	
7 Other special types of work such a		
Reattachment of fractured teeth e		
8 Anterior RCT 9 Posterior RCT	20 30	
10 Endo surgery performed indepen		
11 Management of endo - Perio prob		
_	ing program as allotted by the HOD	
© Seminars - 5 by each s	tudent	

- © Journal club 5 by each student
- © Dissertation work
- © Prepare scientific paper and present in conference and clinical meeting
- © Library assignment to be submitted 18 months after starting of the course
- © Internal assessment theory and clinical

Third Year

Dissertation work to be submitted 6 months before final examination. Clinical work

© Cast gold inlay- Onlay, cuspal restoration 10

©Post and core 20

©Molar endodontics 50

©Endo surgery 05

All other types of surgeries including crown

lengthening, perioesthetics, hemi sectioning, splinting, replantation, endodontic implants.

05

Presentation of

- © Seminars
- © Journal club

Teaching - lecture (under graduates)

© Internal assessment - theory and clinical

Monitoring Learning Progress

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV.

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the

end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS

course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics,

Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology,

Applied pharmacology, Research Methodology and bio statistics, Applied Dental anatomy & histology, Oral

pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions

carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two

questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the

papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

(2) Part II (3 papers of 100 Marks):-

(i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

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A. Clinical 200 Marks

The duration of Clinical and Viva Voce examination will be 2 days for a batch of four students. If the number of candidates exceeds 4, the programe can be extended to 3rd day.

Day 1

Clinical Exercise I - 50 Marks Cast core preparation

(i)Tooth Preparation- 10 marks(ii)Direct Wax Pattern- 10 marks(iii)Casting- 10 marks

(iv) Cementation - 10 marks

Clinical Exercise II - 50 Marks (inlay Exercise)

retention & Elastomeric Impression - 10 marks

(i) Tooth preparation for Class II Gold Inlay-25 marks

(ii) Fabrication of Direct Wax Pattern- 25 marks

Day 2

(v)

Clinical Exercise III - 100 Marks (Molar Endodontics)

- (i) Local Anesthesia and Rubber Dam application-20 marks
- (ii) Access Cavity-20 marks
- (iii) Working length determination-20 marks
- (iv) Canal Preparation- 20 marks
- (v) Master bone selection-20marks

B. Viva Voce: 100 Marks

i. Viva-Voce examination: 80 marks

ii. All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also Pedagogy Exercise: 20 marks

A topic is given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

Day 3:

Viva-Voce (Continued if more than 4 students are taking examination or shortage of time on 2nd day)

Objectives

ORTHODO NTICS & DENTOFACIAL ORTHOPAEDICS

The training programme in Orthodontics is to structure and achieve the following four objectives K**nowledge** of

- 1. The dynamic interaction of biologic processes and mechanical forces acting on the stomatognathic system during orthodontic treatment
- 2. The etiology, pathophysiology, diagnosis and treatment planning of various common Orthodontic problems
- 3. Various treatment modalities in Orthodontics preventive interceptive and corrective.
- 4. Basic sciences relevant to the practice of Orthodontics
- 5. Interaction of social, cultural, economic, genetic and environmental factors and their relevance to management of oro facial deformities
- 6. Factors affecting the long-range stability of orthodontic correction and their management
- 7. Personal hygiene and infection control, prevention of cross infection and safe disposal of hospital waste, keeping in view the high prevalence of Hepatitis and HIV and other highly contagious diseases.

Skills

- To obtain proper clinical history, methodical examination of the patient, perform
 essential diagnostic procedures, and interpret them and arrive at a reasonable diagnosis about the
 Dentofacial deformities.
- 2. To be competent to fabricate and manage the most appropriate appliance intra or extra oral, removable or fixed, mechanical or functional, and active or passive for the treatment of any orthodontic problem to be treated singly or as a part of multidisciplinary treatment of orofacial deformities.

Attitudes:

- 1. Develop an attitude to adopt ethical principles in all aspects of Orthodontic practice.
- 2. Professional honesty and integrity are to be fostered
- 3. Treatment care is to be delivered irrespective of the social Status, cast, creed or colleagues
- 4. Willingness to share the knowledge and clinical experience with professional colleagues
- 5. Willingness to adopt, after a critical assessment, new methods and techniques of orthodontic management developed from time to time based on scientific research, which are in the best interest of the patient
- 6. Respect patients rights and privileges, including patients right to information and right to seek a second opinion
- 7. Develop attitude to seek opinion from allied medical and dental specialists as and when required

Communication skills

- 1. Develop adequate communication skills particularly with the patients giving them various options available to manage a particular Dentofacial problem and to obtain a true informed consent from them for the most appropriate treatment available at that point of time.
- 2. Develop the ability to communicate with professional colleagues, in Orthodontics or other specialities through various media like correspondence, Internet, e-video, conference, etc. To render the best possible treatment.

Course Content

The program outlined, addresses both the knowledge needed in Orthodontics and allied Medical specialities in its scope. A minimum of three years of formal training through a graded system of education as specifies, will equip the trainee with skill and knowledge at its completion to be able to practice basic Orthodontics and have the ability to intelligently pursue further apprenticeship towards advanced Orthodontics.

Spread of the Curriculum

Six months teaching o basic subjects including completion of pre - clinical exercises 2 ft years of coverage of all the relevant topics in Orthodontics, clinical training invoMng treatment of patients and submission of dissertation. These may be divided into blocks of 6 to 8 months duration each, depending on the training policies of each institution.

- I. Applied Anatomy:
- © Prenatal growth of head:

Stages of embryonic development, origin of head, origin of face, origin of teeth.

© Postnatal growth of head:

Bones of skull, the oral cavity, development of chin, the hyoid bone, general growth of head, face growth.

© Bone growth:

Origin of bone, composition of bone, units of bone structure, schedule of Ossification, mechanical properties of bone, roentgen graphic appearance of bone

© Assessment of growth and development:

Growth prediction, growth spurts, the concept of normality and growth increments of growth, differential growth, gradient of growth, methods of gathering growth data. Theories of growth and recent advances, factors affecting physical growfo.

© Muscles of mastication:

Development of muscles, muscle change during growth, muscle function facial development, muscle function and malocclusion

© Development of dentition and occlusion:

Dental development periods, order of tooth eruption, chronology of permanent tooth formation, periods of occlusal development, pattern of occlusion.

© Assessment of skeletal age

The carpal bones, carpal x - rays, cervical vertebrae II

Physiology

© Endocrinology and its disorders

(Growth hormone, thyroid hormone, parathyroid hormone, ACTH) pituitary gland hormones, thyroid gland hormones, parathyroid gland hormones

- © Calcium and its metabolism
- © Nutrition-metabolism and their disorders: proteins, carbohydrates, fats, vitamins and minerals.
- © Muscle physiology
- © Craniofacial Biology: ell adhesion molecules and mechanism of adhesion
- © Bleeding disorders in orthodontics: Hemophilia

III Dental materials:

- © Gypsum products: dental plaster, dental stone and their properties, setting reaction etc.
- © Impression materials: impression materials in general and particularly of alginate impression material.
- © Acrylics: chemistry, composition physical properties
- © Composites: composition types, properties setting reaction
- © Banding and bonding cements: Zn (P04)2, zinc silicophosphate, Zinc polycarboxylate, resin cements and glass lonomer cements
- © Wrought metal alloys: deformation, strain hardening, annealing, recovery, recrystallization, grain growth, properties of metal alloys
- © Orthodontic arch wires: stainless steel gold, wrought cobalt chromium nickel alloys, alpha&beta titanium alloys
- © Elastics: Latex and non-latex elastics.
- © Applied physics, Bioengineering and metallurgy.
- © Specification and tests methods used for materials used in Orthodontics
- © Survey of all contemporary literature and Recent advances in above mentioned materials.

IV. Genetics:

- © Cell structure, DNA, RNA, protein synthesis, cell division
- © Chromosomal abnormalities © Principles of orofacial genetics •
- © Genetics in malocclusion
- © 5 Molecular basis of genetics

- © Studies related to malocclusion
- © Recent advances in genetics related to malocclusion
- © Genetic counseling
- © Bioethics and relationship to Orthodontic management of patients.

V Physical Anthropology:

- © Evolutionary development of dentition
- © Evolutionary development of jaws.

VI Pathology:

- © Inflammation
- © Necrosis

VII Biostatistics:

- © Statistical principles
- © Data Collection
- © Method of presentation
- © Method of Summarizing
- © Methods of analysis different tests/errors
- © Sampling and Sampling technique
- © Experimental models, design and interpretation
- © Development of skills for preparing clear concise and cognent scientific abstracts and publication

VIII. Applied research methodology in Orthodontics

- © Experimental design
- © Animal experimental protocol
- © Principles in the development, execution and interpretation of **methodologies in**

Orthodontics

© Critical Scientific appraisal of literature.

IX. Applied Pharmacology:

X. Orthodontic history:

© Relationship of TMJ anatomy and pathology and related neuromuscular physiology.

XII. Etiology and Classification of malocclusion:

- © A comprehensive review of the local and systemic factors in the causation of malocclusion
- ©Various classifications of malocclusion

XIII. Dentofacial Anomalies:

© Anatomical, physiological and pathological characteristics of major groups of developmental defects of the orofacial structures.

XIV. Child and Adult Psychology:

- © Stages of child development.
- © Theories of psychological development.
- © Management of child in orthodontic treatment.
- © Management of handicapped child.
- © Motivation and Psychological problems related to malocclusion / orthodontics
- © Adolescent psychology
- © Behavioral psychology and communication

XV. Diagnostic procedures and treatment planning in orthodontics

- © Emphasis on the process of data gathering, synthesis and translating it into a treatment plan
- © Problem cases analysis of cases and its management
- © Adult cases, handicapped and mentally retarded cases and their special problems
- © Critique of treated cases. Cephalometrics
- © Instrumentation
- © Image processing
- © Tracing and analysis of errors and applications
- © Radiation hygiene
- © Advanced Cephalometrics techniques
- © Comprehensive review of literature
- © Video imaging principles and application.

XVII. Practice management in Orthodontics

- © Economics and dynamics of solo and group practices
- © Personal management
- © Materials management
- © Public relations
- © Professional relationship
- © Dental ethics and jurisprudence
- © Office sterilization procedures
- © Community based Orthodontics.

XVIII. Clinical Orthodontics Myofunctional Orthodontics:

- © Basic principles
- © Contemporary appliances their design and manipulation
- © Case selection and evaluation of the treatment results
- © Review of the current literature.

Dentofacial Orthopedics

- © Principles
- © Biomechanics
- © Appliance design and manipulation
- © Review of contemporary literature

Cleft lip and palate rehabilitation:

- © Diagnosis and treatment planning
- © Mechanotherapy
- © Special growth problems of cleft cases
- © Speech physiology, pathology and elements of therapy as applied to orthodontics
- © Team rehabilitative procedures.

Biology of tooth movement:

- © Principles of tooth movement-review
- © Review of contemporary literature
- © Applied histophysiology of bone, periodontal ligament
- © Molecular and ultra-cellular consideration in tooth movement

Orthodontic / Orthognathic surgery:

- © Orthodontist' role in conjoint diagnosis and treatment planning
- © Pre and post-surgical Orthodontics
- © Participation in actual clinical cases, progress evaluation and post retension study
- © Review of current literature

Ortho / Perio / Prostho inter relationship

© Principles of interdisciplinary patient treatment © Common problems and their management

Basic principles of Mechanotherapy Includes Removable appliances and fixed appliances

- © Design
- © Construction
- © Fabrication
- © Management
- © Review of current literature on treatment methods and results

Applied preventive aspects in Orthodontics

- $\hbox{@}$ Caries and periodontal disease prevention
- © Oral hygiene measures
- © Clinical procedures

Interceptive Orthodontics

- © Principles
- © Growth guidance
- © Diagnosis and treatment planning
- © Therapy emphasis on:
 - a. Dento-facial problems
 - b. Tooth material discrepancies
 - c. Minor surgery for Orthodontics

Retention and relapse

- © Mechanotherapy special reference to stability of results with various procedures
- © Post retention analysis
- © Review of contemporary literature

XIX. Recent advances like:

- ©Use of implants
- © Lasers
- © Application of FE.M.
- © Distraction Osteogenesis

Skills:

II. Pre - Clinical Exercises

A general outline of the type of exercises is given here. Every institution can decide the details of exercises under each category.

- 1. General Wire bending exercises to develop the manual dexterity.
- 2. Clasps, Bows and springs used in the removable appliances.
- 3. Soldering and welding exercises.
- 4. Fabrication of removable habit breaking, mechanical and functional appliances, also all types of space maintainors and space regainers.
- 5. Bonwill Hawley Ideal arch preparation.
- 6. Construction of orthodontic models trimmed and polished preferably as per specifications of Tweed or A.B.O.
- 7. Cephalometric tracing and various Analyses, also superimposition methods -
- 8. Fixed appliance typhodont exercises.
- a) Training shall be imparted in one basic technique i.e. Standard Edgewise / Begg technique or its derivative / Straight wire etc., with adequate exposure to other techniques.

- b) Typhodont exercise
- i. Band making
- ii. Bracket positioning and placement
- iii. Different stages in treatment appropriate to technique taught
- 9. Clinical photography
- 10. Computerized imaging
- 11. Preparation of surgical splints, and splints for TMJ problems.
- 12. Handling of equipments like vacuum forming appliances and hydro solder etc

First Year

I. Basic Pre-Clinical Exercise Work for the MDS Students:

First 6 Months

1. Non-appliance exercises

All the following exercises should be done with 0.7 or 0.8mm wire

SI. No.	Exercise	No.
1	Straightening of 6" & 8" long wire	1 each
2	Square	1
3	Rectangle	1
4	Triangle of 2" side	1
5	Circle of 2" side	1
6	Bending of 5U's	1
7	Bending of 5V's	1

1. Clasps

SI. No	Exercise	No.
1	³ / ₄ Clasps	2
2	Full clasps	2
3	Triangular Clasps	2
4	Adam's clasp - upper molar	2
5	Adam's Clasp - lower molar	2
6	Adam's Clasp - Pre-molar	2

7	Adam's Clasp – Incisor	2
8	Modification of Adam's - With Helix	2
9	Modification of Adam's - With distal extension	2
10	Modification of Adam's - With soldered tube	2
11	Duyzing Clasps on Molars	2
12	Southend Clasp	1

2. LABIAL BOWS

SL NO	EXERCISE	NO
1	Short labial bow (upper & lower)	1
2	Long labial bow (upper & lower)	1
3	Robert's retractor	1
4	High labial bow-with apron spring's	1
5	Mill's labial bow	1
6	Reverse loop labial bow	1
7	Retention labial bow soldered to Adam's clasp	1
8	Retention labial bow extending distal to second molar	
9	Fitted labial bow	
10	Split high labial bow	1

3. SPRINGS

SL NO	EXERCISE	NO
1	Finger spring-mesial movement	2
2	Finger spring-distal movement	2
3	Double cantilever spring	2
4	Flapper spring	2
5	Coffin spring	2
6	T spring	2

1. CANINE RETRACTORS

SL NO	EXERCISE	NO
1	u loop canine retractor	2PAIRS
2	Helical canine retractor	2PAIRS
3	Palatal canine retractor	2PAIRS
4	Self-supporting canine retractor	2PAIRS
5	Self -supporting canine retractor	2PAIRS

2. Appliances

SL NO	EXERCISE
1	Hawley's retention appliance with anterior bite plane
2	Upper Hawley's appliance with posterior bite plane
3	Upper expansion appliance with coffin spring
4	Upper expansion appliance with coffin spring
5	Upper expansion appliance with expansion screw
6	Habit breaking appliance with tongue crib
7	Oral screen and double oral screen
8	Lip bumper
9	Splint forBruxism
10	Catalans appliance
11	Activator
12	Bionator
13	Frankel-FR 2 appliance
14	Twin block
15	Lingual arch
16	TPA

17	Quad helix
18	Bihelix
19	Utility arches
2 0	Pendulum appliance

3. Soldering exercises

SI.No.	Exercise	No.
1	Star	1
2	Comb	1
3	Christmas tree .	1
4	Soldering buccaltube on molar bands	1

4. Welding exercises

SI.No.	Exercise
1	Pinching and welding of molar, premolar, canine and Incisor bands
2	Welding of buccal tubes and brackets on molar bands and incisor bands

- **5.** Impression of upper and lower arches in alginate
- **6.** Study model preparation
- 7. Model analysis

SI. No.	EXERCISE			
1	Impression of upper and lower dental arches			
2	PREPARATION OF STUDY MODEL -1 And all the permanent dentition analyses to be done.			
3	PREPARATION OF STUDY MODEL - 2And all the permanent dentition analyses to be done.			
4	PREPARATION OF STUDY MODEL - 3And all the mixed dentition analyses to be done.			

8. Cephalometrics

SI. No.	EXERCISE
1	Lateral cephalogram to be traced in five different colors and super imposed to see the
	accuracy of tracing
2	Steiner's analysis
3	Down's analysis
4	Tweed analysis
5	Rickett's analysis
6	Burrstone analysis
7	Rakosi's analysis
8	Mc Namara analysis
9	Bjork analysis
10	Coben's analysis
11	Harvold's analysis
12	Soft tissue analysis - Holdaway and Burstone

• Basics of Clinical Photography including Digital Photography

Light wire bending exercises for the Begg technique

SI. No.	Exercise	
1	Wire bending technique on 0.016' wire circle "Z" Omega	
2	Bonwill-Hawley diagram	
3	Making a standard arch wire	
4	Inter maxillary hooks- Boot leg and Inter Maxillary type	
5	Upper and Lower arch wire	
6	Bending a double back arch wire	
7	Bayonet bends (vertical and horizontal offsets)	
8	Stage-Ill arch wire	
9	Torquing auxiliary (upper)	
10	Reverse Torquing (lower)	
11	Up righting spring	

2. Typhodont exercises

- 1. Teeth setting in Class-II division I malocclusion with maxillary anterior proclination and mandibular anterior crowding
 - 2. Band pinching, welding brackets and buccal tubes to the bands
 - 3. Stage-I
 - 4. Stage-ll
 - 5. Pre Stage-I
 - 6. Stage-Ill

CLINICAL WORK:

Once the basic pre-clinical work is completed the students can take up clinical cases and clinical training is for the two and half years.

Each postgraduate student should start with a minimum of 50 cases of his/her own. Additionally he / she should handle a minimum of 20 transferred cases.

The type of cases can be as follows:

- i. Removable active appliances-5cases
- ii. Class-I malocclusion with Crowding
- iii. Class-I malocclusion with bi-maxillary protrusion
- iv. Class-ll division-1
- v. Class-ll division-2
- vi. Class-Ill (Orthopedic, Surgical, Orthodontic cases)
- vii. Inter disciplinary cases
- viii. Removable functional appliance cases like activator, Bionator, functional regulator, twin block and new developments
- ix. Fixed functional appliances Herbst appliance, jasper jumper etc 5 cases
- x. Dento-facial orthopedic appliances like head gears, rapid maxillary expansion niti expander etc., 5 cases
- xi. Appliance for arch development such as molar distalization -m 5 cases
- xii. Fixed mechano therapy cases (Begg, PEA, Tip edge, Edgewise) Retention procedures of above treated cases.

Other work to be done during FIRST YEAR

- 1. **Seminars:** One Seminar per week to be conducted in the department. A minimum of five seminars should be presented by each student each year
- 2. **Journal club:** One Journal club per week to re conducted in the department. A minimum of five seminars should be presented by each student each year
- 3. Protocol for dissertation to be submitted on or before the end of six months from the date of admission.
- 4. **Under graduate classes**: Around 4 5 classes should be handled by each post- graduate student
- 5. **Field survey:** To be conducted and submit the report
- 6. **Inter-departmental meetings:** should be held once in a month.
- 7. Case discussions
- 8. **Field visits:** To attend dental camps and to educate the masses
- 9. Basic subjects classes

10. Internal assessment or Term paper Second Year:

The clinical cases taken up should be followed under the guidance. More case discussions and cases to be taken up. Other routine work as follows.

- 1. Seminars: One Seminar per week to be conducted in the department. Each student should present a minimum of five seminars each year.
- 2. Journal club: One Journal club per week to be conducted in the department. Each student should present a minimum of five seminars each year.
- 3. Library assignment to be submitted on or before the end of six months.
- 4. Undergraduate classes: each post-graduate student should handle Around 4-5 classes.
- 5. Inter-departmental meetings: Should be held once in a month
- 6. Case discussions
- 7. Field visits: To attend dental camps and to educate the masses.
- 8. Internal assessment or term paper.
- 9. Dissertation work: On getting the approval from the university work for the dissertation to be started.

Third Year:

The clinical cases taken up should be followed under the guidance. More cases discussions and cases to be taken up. Other routine work as follows:

1. **Seminars:** One Seminar per week to be conducted in the department. E student should present a

minimum of five seminars each year.

2. **Journal Club:** One Journal club per week to be conducted in the departments minimum of five

seminars should be presented by each student each year

3. Under graduate classes: each post - graduate student, should handle Around 4-5 classes.

4. Inter-departmental meetings: Should be held once in a month.

5. The completed dissertation should be submitted six months before the final examination

6. Case discussions

7. Field visits: To attend dental camps and to educate the masses.

8. Finishing and presenting the cases taken up.

9. Preparation of finished cases and presenting the cases (to be presented for the examination)

10. Mock examination Dissertation:

The protocol for dissertation should be submitted on or before the end of six months from the a.

date of admission as per calendar of events to the Registrar, Rajiv Gandhi University of Health Sciences,

Karnataka, through proper channel.

b. The completed dissertation should be submitted 6 months before the final examination

as per calendar of events to the Registrar (Evaluation), Rajiv Gandhi University of Health Sciences,

Karnataka, through proper channel.

The dissertation should not be just a repetition of a previously undertaken study but should try c.

to explore some new aspects.

d. Approval of dissertation is essential before a candidate appears for the Univ examination.

Monitoring Learning Progress

It is essential to monitor the learning progress of each candidate through continuous app and regular

assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves.

The monitoring be done by the staff of the department' participation of students in various teaching

/ learning activities. It may be structured assessment be done using checklists that assess various

aspects. Checklists are given in Section IV.

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory)

Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - **300 Marks** (100 Marks for each Paper)

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Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the

end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS

course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics,

Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology,

Applied pharmacology, Research Methodology and bio statistics, Applied Dental anatomy & histology, Oral

pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions

carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two

questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the

papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

(2) Part II (3 papers of 100 Marks):-

(i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

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Viva-voce and Pedagogy: 100 Marks

B. Practical / Clinical Examination : 200 Marks

No	Exercise	Marks	Approximate
		allotted	time
1	Functional appliance,	50	1 hour
	• case discussion, bite registration, fabrication		1 hour
	and delivering of the appliance		
2	III stage mechanics/ Bonding/ arch wire fabrication	50	1 hour 30 min
3	Display of case records (a minimum of 5 patients to	75	1 hour
	be presented with all the records)		
4	Long cases	25	2 hours

C Viva Voce: 100 Marks

i. Viva-Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise: 20 marks

A topic is given to each candidate in the beginning of clinical examination. He/she is asked t make a presentation on the topic for 8-10 minute

ORAL AND MAXILLOFACIAL PATHOLOGY; AND ORAL MICROBIOLOGY

objectives

- © To train a post graduate dental surgeon so as to ensure higher competence in both general and special pathology dealing with the nature of oral diseases, their causes, processes and effects.
- © An oral pathologist is expected to perform routine histopathological evaluation of specimens relating to oral and perioral tissues, to carry out routine diagnostic procedures including hematological, cytological, microbiological, Immunological and ultrastructural investigations.
- © He/she is expected to have an understanding of current research methodology, collection and interpretation of data, ability to carry out research projects on clinical and/or epidemiological aspects,

a working knowledge on current databases, automated data retrieval systems, referencing and skill in writing scientific papers.

© He/she is expected to present scientific data pertaining to the field, in conferences both as poster and verbal presentations and to take part in group discussions.

Broad outline of theoretical, clinical and practical courses.

- 1. Study of principles of routine and special techniques used for histopathology including principles of histochemistry, Immunochemistry, applied and theoretical biochemical basis of histochemistry as related to oral pathology.
- 1. Advanced histological and histopathological study of dental and oral tissues including embryonic considerations, clinical considerations, biology, histology, Pathology, prognosis and management of oral oncology, Concepts of oral premalignancy
- 2. Study of special and applied pathology of oral tissues as well as relation of local pathologic and clinical findings to systemic conditions.
- 3. Oral microbiology and their relationship to various branches of dentistry.
- 4. Oral microbiology affecting hard and soft tissues. Study of clinical changes and their significance to dental and oral diseases as related to oral pathology
- 5. Forensic odontology
- 6. Inter institutional postings such as cancer hospital, dermatology clinics, regional HIV detection centers, 'sophisticated instrumentation centers for electron microscopy and other techniques.
- 7. Maintenance of records of all postgraduates activities.
- 8. Library assignment.
- 9. University Dissertation.

A. Course contents First year

1) Biostatistics and Research Methodology

- © Basic principles of biostatistics and study as applied to dentistry and research
- © Collection/organization of data/measurement scales presentation of data analysis.
- © Measures of central tendency.
- © Measures of variability.
- © Sampling and planning of health survey.
- © Probability, normal distribution and indicative statistics.
- © Estimating population values.
- © Tests of significance (parametric/non-parametric qualitative methods.)

- © Analysis of variance
- © Association, correlation and regression.

Approach:

- © Didactic lectures on biostatistics and discussion on research methodology by eminent researchers.
- © Two day P.G. orientation course including general approach PG course, library and main dissertation, journal club topic selection and presentation, seminars, clinico- pathological meets, teaching methodology and use of audiovisual aids.

2) Applied Gross Anatomy of Head and Neck including Histology:

- © Temporomandibular joint
- © Trigeminal nerve and facial nerve
- © Muscles of mastication
- © Tongue
- © Salivary glands
- © Nerve supply; blood supply, lymphatic drainage and venous drainage of Oro-dental tissues.
- © Embryology
- -Development of face, palate, mandible, maxilla, tongue and applied aspects of the same
- -Development of teeth and dental tissues and developmental defects of oral and maxillofacial region and abnormalities of teeth
- © Maxillary sinus
- © Jaw muscles and facial muscles

Genetics:

Introduction modes of inheritance, chromosomal anomalies of oral tissues and single genetic disorders.

Approach:

To be covered as didactic lectures.

© Posting in department of anatomy for dissection of head, face and neck.

3) Physiology (General and oral)

- © Saliva
- © Pain
- © Mastication
- © Taste
- © Deglutition
- © Wound healing
- © Vitamins (Influence on growth, development and structure of oral soft and hard tissues and para oral

tissues.)

- © Calcium metabolism.
- © Theories of mineralization.
- © Tooth eruption and shedding.
- © Hormones. (Influence on growth, development and structure of oral soft and hard tissues and para oral tissues.)
- © Blood and its constituents.

Approach:

To be covered as didactic lectures.

4) Cell Biology:

- © Cell-structure and function (ultrastructural and molecular aspects), intercellular junctions, cell cycle and division, cell cycle regulators, cell cell and cell extra cellular matrix interactions.
- © Detailed molecular aspects of DNA, RNA, and intracellular organelles, transcription and translation and molecular biology techniques.

Approach:

To be covered as seminars and didactic lecture.

5) General Histology:

Light and electron microscopy considerations of Epithelial tissues and glands, bone, hematopoietic system, lymphatic system, muscle, neural tissue, endocrinal system (thyroid, pituitary, parathyroid)

Approach:

- © Topics to be covered as didactic lectures.
- © Postings in the department of anatomy and histology for slide discussion
- © Record book to be maintained.

6) Biochemistry:

- ©Chemistry of carbohydrates, lipids and proteins.
- ©Methods of identification and purification.
- ©Metabolism of carbohydrates, lipids and proteins.
- ©Biological oxidation.
- ©Various techniques cell fractionation and ultra filtration, centrifugation, Electrophor Spectrophotometry, and radioactive techniques.

Approach:

- © Topics to be covered as didactic lectures.
- © Postings to the department of biochemistry to familiarize with various techniques

© Record book to be maintained.

7) General Pathology:

© Inflammation and chemical mediators, thrombosis, embolism, necrosis, repair, degeneration, shock, hemorrhage pathogenic mechanisms at molecular level and blood dyscrasias, Carcinogenesis and Neoplasia.

Approach:

To be covered as seminars and didactic lectures.

8) General Microbiology:

- © Definitions of various types of infections.
- © Routes of infection and spread
- © Sterilization, disinfection and antiseptics.
- © Bacterial genetics.
- © Physiology and growth of microorganisms.

Approach:

©To be covered as seminars and didactic lectures.

©Record book to be maintained.

9) Basic Immunology

- © Basic principles of immunity, antigen and antibody reactions.
- © Cell mediated immunity and Humoral immunity.
- © Immunology of hypersensitivity.
- © Immunological basis of the autoimmune phenomena.
- © Immunodeficiency with relevance to opportunistic infections.
- © Basic principles of transplantation and tumor immunity.

Approach:

To be covered as didactic lectures.

10) Systemic microbiology/applied microbiology

Morphology, classification, pathogenicity, mode of transmission, methods of pre collection and transport of specimen, for laboratory diagnosis, staining methods, come culture media, interpretation of laboratory reports and antibiotic sensitivity tests.

© Staphylococci

- © Streptococci
- © Corynebacterium diphtheria
- © Mycobacteria
- © Clostridia, Bacteroides and fusobacteria © Actinomycetis
- © Spirochetes

Virology:

General properties: structure, broad classification of viruses, pathogenesis, pathology of viral infections.

Herpes virus: list of viruses included, lesions produced, pathogenesis, latency principles and laboratory diagnosis.

Hepatitis virus: list of viruses, pathogenesis, and mode of infection, list of diagnostic tests, and their interpretations, methods of prevention and control.

Human Immunodeficiency virus: structure with relevance to laboratory diagnosis, type of infection, laboratory tests and their interpretation, universal precautions, specific precautions and recent trends in diagnosis and prophylaxis.

Mycology:

- © General properties of fungi, classification bases on disease, superficial, subcutaneous, deep opportunistic infections.
- © General principles of fungal infections, diagnosis rapid diagnosis method of collection of sample and examination for fungi.

Approach:

- © To be covered as seminars and didactic lectures
- © Postings to the dept. of microbiology to familiarize with relevant diagnostic methods
- © Record book to be maintained

11) Oral Biology (oral and dental histology)

- © Structure and function of oral, dental and paraoral tissues including their ultra structure, molecular and biochemical aspects.
- © Study of morphology of permanent and deciduous teeth (Lectures and practical demonstrations to be given by PG students)

Approach:

- © To be covered as seminars and didactic lectures.
- © Slide discussion on histological appearance of normal oral tissues.

- © Record book to be maintained.
- **12) Basic molecular biology and techniques:** experimental aspects DNA extraction, PCR, western blotting. **Approach:**
- © To be covered as didactic lectures
- © Postings in centers where facilities are available for demonstration of routine molecular biology techniques.
- © Record book to be maintained.

13) Basic histo techniques and microscopy:

- © Routine hematological tests and clinical significance of the same.
- © Biopsy procedures for oral lesions.
- © Processing of tissues for Paraffin lesions.
- © Microtome and principles of microtomy.
- © Routine stains, principles and theories of staining techniques
- © Microscope, principles and theories of microscopy.
- © Light microscopy and various other types including electron microscopy.
- © Methods of tissue preparation for ground sections, decalcified sections.

Approach:

- © Topics to be covered as seminars.
- © Preparation of ground and decalcified sections, tissue processing, sectioning and staining.
- © Record book to be maintained

Academic activities:

- © Submission of synopsis of dissertation at the end of six months.
- © Journal clubs and seminars to be presented by every post graduate student twice a month.
- © To attend interdepartmental meetings.
- © To attend dental camps based on the survey to be done.
- © Part -1 year ending examination to be conducted by the college.

SECOND YEAR

Oral pathology

- © Developmental defects of oral and maxillofacial region and abnormalities of teeth Dental caries (Introduction, Epidemiology, microbiology, cariogenic bacterial including properties, acid production in plaque, development of lesion, response of dentine pulp unit, histopathology, root caries, sequelae and immunology).
- © Pulpal and Periapical diseases
- © Infections of oral and Para oral regions (bacterial, viral and fungal infection)
- © Non neoplastic disorders of salivary glands

- © Bone pathology
- © Hematological disorders
- © Physical and chemical injuries, allergic and Immunological diseases.
- © Cysts of odontogenic origin
- © Dermatologic diseases.
- © Periodontal diseases
- © Oral manifestations of systemic diseases
- © Facial pain and neuromuscular disorders including TMJ disorders
- © Regressive alterations of teeth

Clinical Pathology:

- © Laboratory investigations Hematology, Microbiology and Urine analysis
- © Postings to Clinical Pathology for relevant training
- © Record book to be maintained.

Specialized histological techniques and special stains: Special staining techniques for different tissues.

Immunohistochemistry

Preparation of frozen sections and cy to logical smears

Approach:

Training to be imparted in the department or in other institutions having the facility Record book to be maintained

Recording of Case history and Clinicopathological discussions: Approach

Posting to the department of Oral medicine, Diagnosis and Radiology and Oral and Maxillofacial surgery Record of case histories to be maintained Dermatology

Study of selected mucocutaneous lesions-etiopathogenesis, pathology, clinical presentation and diagnosis.

Approach

- © Posting to the dept of Dermatology of a Medical college
- © Topics to be covered as Seminars
- © Record of cases seen to be maintained.

Oral oncology

Detailed study including Pathogenesis, molecular and biochemical changes of tumor like lesions and Premalignant lesions affecting the hard and soft tissues of oral and para oral tissues

Tumor markers

Approach

To be covered as seminars

Posting to a Cancer center to familiarize with the pathological appearances, diagnosis, radio-diagnosis and treatment modalities.

Oral Microbiology and immunology

- © Normal Oral microbial flora
- © Defense mechanism of the oral cavity
- © Microbiology and immunology of Dental caries and Periodontal diseases © Dental caries (Introduction, epidemiology, microbiology, cariogenic bacteria including properties, acid production in plaque, development of lesion, response of dentin-pulp unit, histopathology, root caries, sequelae and immunology)
- © Tumor immunology
- © Infections of Pulp and Periapical and periodontal tissues
- © Oral sepsis and Bacteremia
- © Microbial genetics
- © Infections of oral and Para oral regions (bacterial, viral and fungal infections)

Approach

To be covered as seminars Forensic Odontology:

Legal procedures like inquest, medico-legal evidences post mortem examination of violence around mouth and neck, identification of deceased individual-dental importance.

Bite marks rugae patterns and lip prints.

Approach

To be covered as seminars

Posting to a Cancer center to familiarize with the pathological appearances, diagnosis, and radio-diagnosis and treatment modalities

Histopathology - slide discussion Record book to be maintained Laboratory techniques and Diagnosis

- © Routine hematological tests and clinical significance of the same
- © Microtome and principles of microtomy
- © Routine stains, principles and theories of staining techniques
- © Microscope, principles and theories of microscopy
- © Light microscopy and various other types including electron microscopy
- © Methods of tissue preparation for ground sections, decalcified sections.
- © Special stains and staining techniques for different tissues
- © Immunohistochemistry
- © Preparation of frozen sections and cytological smears

Other Topics in Oral Pathology.

- # Detailed description of diseases affecting oral mucosa, teeth, supporting tissues & jaws
- # Cysts of the oral & Para-oral regions

- # Systemic diseases affecting oral cavity
- . Approach: Seminars & Slide discussions. Record notebook to be maintained. Training in histopathology slide reporting.

Experimental aspects of Oral diseases

Approach: Posting is desirable in Centers where animal experimentation is carried out to familiarize with laboratory technique's, upkeep & care of experimental animals.

Recent advances in Oral Pathology.

Approach: Update of knowledge in Oral Pathology through study of recent journals & Internet browsing. Journal Clubs & Group discussions

Academic activities

- © Library assignment to be submitted at the end of 6 months © Commencement of dissertation work
- © Journal clubs and seminars to be presented by every PG student © Clinicopathological discussions once in a month by every PG student © To attend interdepartmental meetings.
- © Lecture and practical classes and slide discussions to be taken for II BDS students in oral and dental anatomy, dental histology and oral physiology. © Year ending examination (theory and practical) to be conducted by the college.

IIIRD YEAR

- © Non-neoplastic disorders of salivary glands.
- © Bone pathology
- © Physical and chemical injuries, allergic and Immunological diseases.
- © Cysts of odontogenic origin
- © Oral manifestations of systemic diseases

Approach

To be covered as seminars Slide discussions of the same Record book to be maintained

Academic activities

- © Visit to center out Animal experimentation to familiarize with Laboratory techniques, upkeep and care of animals
- © Completion of Dissertation work and submission of the same, six months before the Final Examination
- © Study of Journals, Internet Browsing, and group discussions, to update knowledge in the recent advances in Oral Pathology
- © Lecture and Practical demonstrations for third B.D.S students in Oral pathology and Microbiology
- © Reporting of histopathology slides
- © Journal clubs and Seminars to be presented by every post graduate student twice a month
- © Clinicopathological discussions by every student once in a month
- © To attend Interdepartmental meetings.

Monitoring learning Progress

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured, and assessment is done using checklists that assess various aspects. Checklists are given in Section

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of 1st year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics, Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology, Applied pharmacology, Research Methodology and bio statistics, Applied Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

- (2) Part II (3 papers of 100 Marks):-
- (i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

- B. Practical/Clinical 200 Marks
- 1. Case Presentation
- a) Long case 20 marks
- b) Short case 10 marks
- 2. Clinical Hematology (any two investigations) 20 Marks

Hb%, bleeding time, clotting time, Total WBC count, Differential WBC count and ESR

- 3. Smear Presentation 20 marks
- 4. Cytology or microbial smear and staining
- 5. Paraffin sectioning and H & E Staining 30 Marks
- 6. Histopathology slide discussion 100 Marks
- C. Viva Voce 100 Marks
- i. Viva-Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes rill components of course contents. It includes presentation and discussion on dissertation also.

iii. Pedagogy Exercise: 20 marks

A topic is given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes

PUBLIC HEALTH DENTISTY

Objectives

At the end of 3 years of training the candidate should be able to: Knowledge

- © apply basic sciences knowledge regarding etiology, diagnosis and management of the prevention, promotion and treatment of all the oral conditions at the individual and community level.
- © Identify social, economic, environmental and emotional determinants in a given individual patient or a community for the purpose of planning and execution of Community Oral Health Program.
- © Ability to conduct Oral Health Surveys in order to identify all the oral health problems affecting the community and find solutions using multi disciplinary approach. © Ability to act as a consultant in community Oral Health, teach, guide and take part in research (both basic and clinical), present and publish the outcome at various scientific conferences and journals, both national and international level.

Skills

The candidate should be able to

- 1. Take history, conduct clinical examination including all diagnostic procedures to arrive at diagnosis at the individual level and conduct survey of the community at state and national level of all conditions related to oral health to arrive at community diagnosis. Plan and perform all necessary treatment, prevention and promotion of Oral Heal at the individual and community level.
- 2. Plan appropriate Community Oral Health Program, conduct the program and evaluate, at the community level.
- 3. Ability to make use of knowledge of epidemiology to identify causes and appropriate preventive and control measures.
- 4. Develop appropriate person power at various levels and their effective utilization.
- 5. Conduct survey and use appropriate methods to impart Oral Health Education.
- 6. Develop ways of helping the community towards easy payment plan, and followed by evaluation for their oral health care needs.
- 7. Develop the planning, implementation, evaluation and administrative skills to carry out successful community Oral Health Programs.

Values:

- 1. Adopt ethical principles in all aspects of Community Oral Health Activities.
- 2. To apply ethical and moral standards while carrying out epidemiological researches.
- 3. Develop communication skills, in particular to explain the causes and prevention of oral diseases to the patient.
- 4. Be humble and accept the limitations in his knowledge and skill and to ask for help from colleagues when

needed and promote teamwork approach.

5. Respect patient's rights and privileges including patients right to information and right to seek a second opinion.

Course Contents:

Paper I: Applied Basic Sciences

I. Applied Anatomy and Histology

A. Applied Anatomy in relation to:

- # Development of face
- # Bronchial arches
- # Muscles of facial expression
- # Muscles of mastication
- # TMJ
- # Salivary gland
- # Tongue
- # Salivary gland
- # Tongue
- # Hard and softpalate
- # Infratemporal fossa
- # Paranasal air sinuses
- # Pharynx and larynx
- # Cranial and spinal nerves- with emphasis on trigeminal, facial, glossopharyngeal and hypoglossal nerve
- # Osteology of maxilla and mandible
- # Blood supply, venous and lymphatic drainage of head and neck
- # Lymph nodes of head and neck
- # Structure and relations of alveolar process and edentulous mouth
- # Genetics-fundamentals

B. Oral Histology

- # Development of dentition, Innervations of dentin and pulp
- # Periodontium-development, histology, blood supply, nerve supply and lymphatic drainage
- # Oral mucous membrane

II. Applied Physiology and Biochemistry:

- Cell
- Mastication and deglutition
- Food and nutrition
- Metabolism of carbohydrates, proteins and fats
- 2 Vitamins and minerals
- Fluid and electrolyte balance
- Pain pathway and mechanism-types, properties
- Blood composition and functions, clotting mechanism and erythropoiesis, Blood groups and transfusions, Pulse and blood pressure,
- Dynamics of blood flow
- Cardiovascular homeostasis-heart sounds
- Respiratory system: Normal physiology and variations in health and diseases, Asphyxia and artificial respiration
- ☑ Endocrinology: thyroid, parathyroid, adrenals, pituitary, sex hormones and pregnancy, Endocrine regulation of blood sugar.

III. A. Applied Pathology:

- # Pathogenic mechanism of molecular level
- # Cellular changes following injury
- # Inflammation and chemical mediators
- # Oedema, thrombosis and embolism
- # Hemorrhage and shock
- # Neoplasia and metastasis
- # Blood disorders
- # Histopathology and pathogenesis of dental caries, periodontal disease, oral mucosal lesions, and malignancies, HIV
- # Propagation of dental infection
- B. Microbiology
- Microbial flora of oral cavity
- Bacteriology of dental caries and periodontal disease
- · Methods of sterilization
- Virology of HIV, herpes, hepatitis

- Parasitology
- Basic immunology basic concepts of immune system in human body Cellular and humoral immunity
 Antigen and antibody system

Hypersensitivity and Autoimmune diseases

- C. Oral Pathology
- Detailed description of diseases affecting the oral mucosa, teeth, supporting tissues and jaws.
- IV. Physical and Social Anthropology
- · Introduction and definition
- Appreciation of the biological basis of health and disease
- Evolution of human race, various studies of different races by anthropological methods
- V. Applied Pharmacology:
- Definition, scope and relations to other branches of medicine, mode of action, bioassay, standardization, pharmacodynamics, pharmacokinetics.
- Chemotherapy of bacterial infections and viral infections sulphonamides and antibiotics.
- Local anesthesia
- Analgesics and anti-inflammatory drugs
- Hypnotics, tranquilizers and antipyretics
- Important hormones-ACTH, cortisone, insulin and oral antidiabetics.
- Drug addiction and tolerance
- Important pharmacological agents in connection with autonomic nervous system-adrenaline, noradrenaline, atropine
- Brief mention of antihypertensive drugs
- Emergency drugs in dental practice
- Vitamins and haemopoietic drugs
- VI. Research Methodology and Biostatistics:

Health informatics: basic understanding of computers and its components, operating software (Windows), Microsoft office, preparation of teaching materials like slides, project, multimedia knowledge.

Research methodology- definitions, types of research, designing written protocol for research, objectivity in methodology, quantification, records and analysis.

Biostatistics-introduction, applications, uses and limitations of bio - statistics in Public Health dentistry, collection of data, presentation of data, measures of central tendency, measures of dispersion, methods of summarizing, parametric and non-parametric tests of significance, correlation and regression, multivariate analysis, sampling and sampling techniques - types, errors, bias, trial and calibration COMPUTERS-Basic operative skills in analysis of data and knowledge of multimedia.

Paper II - Public Health

- 1. Public Health
- Definition, concepts and philosophy of dental health
- · History of public health in India and at international level
- Terminologies used in public health
- 2. Health
- Definition, concepts and philosophy of health
- Health indicators
- Community and its characteristics and relation to health
- 3. Disease
- Definition, concepts.
- Multifactorial causation, natural history, risk factors
- Disease control and eradication, evaluation and causation, infection of specific diseases
- Vaccines and immunization
- 4. General Epidemiology
- Definition and aims, general principles
- Multifactorial causation, natural history, risk factors
- Methods in epidemiology, descriptive, analytical, experimental and classic epidemiology of specific diseases, uses of epidemiology
- Duties of epidemiologist
- General idea of method of investigating chronic diseases, mostly non-infectious nature, epidemic, endemic, and pandemic.
- Ethical conversation in any study requirement
- New knowledge regarding ethical subjects
- Screening of diseases and standard procedures used

5.Environmental Health:

- Impact of important components of the environment of health
- Principles and methods of identification, evaluation and control of such health hazards
- Pollution of air, water, soil, noise, food
- Water purification, international standards of water
- Domestic and industrial toxins, ionizing radiation
- Occupational hazards
- · Waste disposal- various methods and sanitation

6. Public Health Education:

- Definition, aims, principles of health education
- Health education, methods, models, contents, planning health education programs

- 7. Public Health Practice and Administration System In India
- 8. Ethics and Jurisprudence
- · Basic principles of law
- Contract laws- dentist patient relationships & Legal forms of practice
- Dental malpractice
- Person identification through dentistry
- Legal protection for practicing dentist.
- Consumer protection act
- 9. Nutrition In Public Health:
- Study of science of nutrition and its application to human problem e Nutritional surveys and their evaluations
- e Influence of nutrition and diet on general health and oral health, dental caries, periodontal disease and oral cancers
- Dietary constituents and carcinogenicityGuidelines for nutrition
- 10. Behavioral Sciences:
- Definition and introduction
- Sociology: social class, social group, family types, communities and social relationships, culture, its effect on oral health.
- Psychology: definition, development of child psychology, anxiety, fear and phobia, intelligence, learning, motivation, personalities, fear, dentist-patient relationship, modeling and experience 11 Hospital Administration:
- Departmental maintenance, organizational structures
- Types of practices
- Biomedical waste management

12..Health Care Delivery System:

- International oral health care delivery systems Review
- Central and state system in general and oral health care delivery system if any
- National and health policy
- National health programme
- Primary health care concepts, oral health in PHC and its implications
- National and international health organizations
- Dentists Act 1928, Dental council of India, Ethics, Indian Dental Association
- Role of W.H.O. and Voluntary organizations in Health Care for the Community
- 13. Oral Biology And Genetics:
- # A detailed study of cell structure

- # Introduction to Genetics, Gene structure, DNA, RNA
- # Genetic counseling, gene typing
- # Genetic approaches in the study of oral disorders
- # Genetic Engineering Answer to current health problems

Paper III: Dental Public Health

- 1. Dental Public Health:
- # History
- # Definition and concepts of dental public health
- # Differences between clinical and community dentistry
- # Critical review of current practice
- # Dental problems of specific population groups such as chronically ill, handicapped and institutionalized group
- 2. Epidemiology of Oral Diseases and Conditions
- Dental caries, gingival, periodontal disease malocclusion, dental Fluorosis, oral cancer, TMJ disorders and other oral health related problems.
- 3. Oral Survey Procedures:
- # Planning
- # Implementation
- # WHO basic oral health methods 1997
- # Indices for dental diseases and conditions
- # Evaluation
- 4. Delivery of Dental Care
- # Dental person power dental auxiliaries
- # Dentist population ratios,
- # Public dental care programs
- # School dental health programs- Incremental and comprehensive care
- # Private practice and group practice
- # Oral health policy National and international policy
- 5. Payment for Dental care
- Prepayment
- Post-payment
- Reimbursement plans
- Voluntary agencies
- Health insurance
- 6. Evaluation of Quality of Dental care
- Problems in public and private oral health care system program

- Evaluation of quality of services, governmental control
- 7. Preventive Dentistry
- # Levels of prevention
- # Preventive oral health programs screening, health education and motivation
- # Prevention of all dental diseases-dental caries, periodontal diseases, oral cancer, malocclusion and Dentofacial anomalies
- Role of dentist in prevention of oral diseases at individual and community level.
- Fluoride
- -History
- -Mechanism of action
- -Metabolism
- -Fluoride toxicity
- -Fluorosis
- -Systemic and topical preparations
- -Advantages and disadvantages of each
- -Update regarding Fluorosis
- -Epidemiological studies
- -Methods of fluoride supplements
- -Defluoridation techniques
- Plaque control measures-
- -Health Education
- -Personal oral hygiene
- -Tooth brushing technique
- -Dentifrices, mouth rinses
- Pit and fissure sealant, ART
- Preventive oral health care for medically compromised individual
- Update on recent preventive modalities
- Caries vaccines
- Dietary counseling
- 8. Practice Management
- Definition
- Principles of management of dental practice and types
- Organization and administration of dental practice
- Ethical and legal issues in dental practice
- Current trends Structured Training Schedule First Year Seminars

- 5 seminars in basic sciences subject,
- To conduct 10 journal clubs Library assignment on assigned topics 2
- Submission of synopsis for dissertation-within 6 months
- Periodic review of dissertation at two monthly intervals

Clinical Training

- 1. Clinical assessment of patient
- 2. Learning different criteria and instruments used in various oral indices 5 cases each
- Oral Hygiene Index Greene and Vermillion
- Oral Hygiene Index Simplified
- DMF DMF (T), DMF (S)
- Def
- Fluorosis Indices Dean's Fluorosis Index, Tooth Surface Index for Fluorosis and the Thylstrup Fejerskov Index.

Community Periodontal Index (CPI) Plaque Index-Silness and Loe WHO Oral Health Assessment Form - 1997

• Carrying out treatment (under comprehensive oral health care) of 10 patients - maintaining complete records.

Field Programme:

- 1. Carrying out preventive programs and health education for school children of the adopted school.
- 2. School based preventive programs-
- Topical Fluoride application-Sodium Fluoride, Stannous Fluoride, AckW* Phosphate Fluoride preparations and Fluoride varnishes, Fluoride mouth

rinses

- Pit and Fissure Sealant chemically cured (GIC), light cured
- Minimal Invasive Treatment-Preventive Resin Restorations (PRR), Atraumatic Restorative Treatment (ART)
- Organizing and carrying out dental camps in both urban and rural areas.
- 3. Visit to slum, water treatment plant, sewage treatment plant, and Milk dairy, Public Health Institute, Anti-Tobacco Cell, Primary Health Center and submitting reports.
- 4. In additions the postgraduate shall assist and guide the under graduate students in their clinical and field programs.

Second Year Seminars

- Seminars in Public Health and Dental Public Health topics
- Conducting journal clubs
- Short term research project on assigned topics 2

- Periodic review of dissertation at monthly reviews Clinical Training-Continuation of the clinical training
- 1. Clinical assessment of patient
- 2. Learning different criteria and instruments used in various oral indices e Oral Hygiene Index Greene and Vermillion
- Oral Hygiene Index Simplified
- DMF DMF (T), DMF (S)
- Deft/s
- Fluorosis Indices Dean's Fluorosis Index, Tooth Surface Index for Fluorosis, Thylstrup and Fejerskov Index
- Community Periodontal Index (CPI)
- Plaque Index-Silness and Loe
- WHO Oral Health Assessment Form -1987
- Carrying out treatment (under comprehensive oral health care) of 10 patients maintaining complete records

Field Program - Continuation of field program

- 1. Carrying out school dental health education
- 2. School based preventive programs-
- Topical Fluoride application-Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes, Fluoride mouth rinses
- Pit and Fissure Sealant chemically cured (GIC); light cured
- Minimal Invasive Treatment-Preventive Resin Restorations (PRR), Atraumatic Restorative Treatment (ART)
- Organizing and carrying out dental camps in both urban and rural areas.
- 5. Assessing oral health status of various target groups like School children, Expectant mothers Handicapped, Underprivileged, and geriatric populations. Plan dental manpower and financing dental health care for the above group.
- 6. Application of the following preventive measures in clinic-10 Cases each.
- Topical Fluoride application Sodium Fluoride, Stannous Fluoride, Acidula' Phosphate Fluoride preparations and Fluoride varnishes.
- Pit and Fissure Sealant
- 7. Planning total health care for school children in an adopted school:
- a) Periodic surveying of school children
- b) Incremental dental care
- c) Comprehensive dental care
- 8. Organizing and conducting community oral health surveys for all oral condition- 3 surveys

- 9. In addition the postgraduate shall assist and guide the under graduatestuc in their clinical and field programs
- 10. To take lecture classes (2) for Undergraduate students in order to learn teaching met (pedagogy) on assigned topic.

Third Year: Seminars

- Seminars on recent advances in Preventive Dentistry and Dental Public Health
- Critical evaluation of scientific articles -10 articles
- Completion and submission of dissertation

Clinical Training

- 1. Clinical assessment of patient
- 2. Learning different criteria and instruments used in various oral indices 5 each
- Oral Hygiene Index Greene and Vermillion
- Oral Hygiene Index Simplified
- DMF DMF (T), DMF (S)
- Def t/s
- Fluorosis Indices Dean's Fluorosis Index, Tooth Surface Index for FluortT Thylstrup and Fejerskov Index
- Community Periodontal Index (CPI)
- Plaque Index-Silness and Loe
- WHO Oral Health Assessment Form -1987
- Carrying out treatment (under comprehensive oral health care) of 10 patients maintaining complete records
- 3. Carrying out school dental health education
- 4. School based preventive programs-
- Topical Fluoride application Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes.
- Pit and Fissure Sealant
- Minimal Invasive Techniques Preventive Resin Restorations (PRR), Atraumatic Restorative Treatment (ART)
- 5. To take lecture classes (2) for Undergraduate students in order to learn teaching methods (pedagogy) on assigned topic
- 6. Exercise on solving community health problems -10 problems
- 7. Application of the following preventive measures in clinic -10 cases each.

• Topical Fluoride application - Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride

preparations

• Pit and Fissure sealants

8. Dental - health education training of school teachers, social workers, health workers,

9. Posting at dental satellite centers/ nodal centers

10. In addition the post graduate shall assist and guide the under graduate students in their

clinical and field programs

Before completing the third year M.D.S., a student must have attended two national conferences.

Attempts should be made to present two scientific papers, publication of a scientific article in a journal.

Monitoring Learning Process:

It is essential to monitor the learning progress of each candidate through continuous appraisal and

regular assessment. It not only helps teachers to evaluate students, but also students to evaluate

themselves. The monitoring be done by the staff of the department based on participation of students

in various teaching / learning activities. It may be structured and assessment be done using checklists

that assess various aspects. Checklists are given in Section IV.

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory)

Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted

at the end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year

of MDS course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics,

Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology,

Applied pharmacology, Research Methodology and bio statistics, Applied Dental anatomy & histology,

Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five

questions carrying 10 marks each.

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Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any

two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or

all the papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

(2) Part II (3 papers of 100 Marks):-

(i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

B. Practical / Clinical Examination :

200 Marks

1. Clinical examination of at least 2 patients representing the community-includes history, main

complaints, examination and recording of the findings, using indices for the assessment of oral health

and presentation of the observation including diagnosis, comprehensive treatment planning. (50

Marks -1 Hrs)

2. Performing - MAXIMUM - 50 marks

• One of the treatment procedures as per treatment plan. (Restorative, surgical, rehabilitation)

a. Preventive oral health care procedure.

b. One of the procedures specified in the curriculum

3 Critical evaluation of a given research article published in an international journal

(50 Marks -1 Hour)

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4 Problem solving - a hypothetical oral health situation existing in a community is given with sufficient data. The student as a specialist in community dentistry is expected to suggest practical solutions to the existing oral health situation of the

given community.

(50 Marks -1 Hour)

C. Viva Voce 100 Marks

i. Viva-Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise: 20 marks

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minute.

PEDIATRIC DENTISTRY

At the end of 3 years of training the candidate should be able to

- 1. Create not only a good oral health in the child but also a good citizen tomorrow.
- 2. Instill a positive attitude and behavior in children
- 3. Understand the principles of prevention and preventive dentistry right from birth to adolescence
- 4. Guide and counsel the parents in regards to various treatment modalities including different facets of preventive dentistry
- 5. Prevent and intercept developing malocclusion

Skills

- 1. Obtain proper clinical history, methodological examination of the child patient, perform essential diagnostic procedures and interpret them, and arrive at a reasonable diagnosis and treat appropriately
- 2. Be competent to treat dental diseases which are occurring in child patient.
- 3. Manage to repair and restore the lost tooth structure to maintain harmony between both hard and soft tissues of the oral cavity.
- 4. Manage the disabled children effectively and efficiently, tailored to the needs of individual requirement and conditions.

Attitudes

- 1. Develop an attitude to adopt ethical principles in all aspects of Pedodontic practice.
- 2. Professional honesty and integrity are to be fostered

- 3. Treatment care is to be delivered irrespective of the social status, cast, creed, and religion of the patients.
- 4. Willingness to share the knowledge and clinical experience with professional colleagues.
- 5. Willingness to adopt, after a critical assessment, new methods and techniques of Pedodontic management developed from time to time, based on scientific research, which are in the best interest of the child patient.
- 6. Respect child patient's rights and privileges, including child patients right to information and right to seek a second opinion.
- 7. Develop an attitude to seek opinion from allied medical and dental specialities, as and when required

Course contents

- 1. Applied Anatomy & genetics
- 2. Applied Physiology
- 3. Applied Pathology
- 4. Nutrition and Die tics
- 5. Growth & Development: Prenatal and postnatal development of cranium, face, jaws, teeth and supporting structures. Chronology of dental development and development of occlusion. Dimensional changes in dental arches. Cephalometric evaluation of growth.
- 6. Child Psychology: Development & Classification of behavior, personality, intelligence in children, theories of child psychology, stages of psychological child development, fear anxiety, apprehension dt its management
- 7. Behavior Management: Non-pharmacological 8b Pharmacological methods.
- 8. Child Abuse & Dental Neglect
- 9. Conscious Sedation, Deep Sedation 8s General Anesthesia in Pediatric Dentistry: (Including Other Drugs, Synergic & Antagonistic Actions of Various Drugs Used in Children
- 10. Preventive Pedodontics: Concepts, chair bide preventive measures for dental diseases, high-risk caries including rampant & extensive caries Recognition, Features & Preventive Management, Pit and Fissures Sealants, Oral Hygiene measures, Correlation of brushing with dental caries and periodontal diseases. Diet 8s Nutrition as related to dental caries. Diet Counseling
- 11. Dental Plaque: Definition, Initiation, Pathogenesis, Biochemistry, and Morphology' & Metabolism.
- 12. Microbiology & Immunology as related to Oral Diseases in Children. Basic concepts, immune system in human body, Auto Immune diseases, Histopathology, Pathogenesis, Immunology of dental caries, Periodontal diseases. Tumors, Oral Mucosal lesions etc.
- 13. Gingival 8s Periodontal diseases in Children:

- Normal Gingiva & Periodontium in children.
- Gingival & Periodontal diseases Etiology, Pathogenesis, Prevention & Management
- 14. Pediatric Operative Dentistry
- Principle Of Operative Dentistry along with modifications of materials/past, current & latest including tooth colored materials.
- Modifications required for cavity preparation in primary and young permanent teeth.
- Various Isolation Techniques
- Restorations of decayed primary, young permanent and permanent teeth in children using various restorative material like Glass Ionomer, Composites, Silver, Amalgam & latest material (gallium)
- Stainless steel, Polycarbonate 8s Resin Crowns / Veneers & fibre pvit systems.
- 15. Pediatric Endodontics:
- a. Primary Dentition: Diagnosis of pulpal diseases and their management Pulp capping, Pulpotomy, Pulpectomy (Materials & Methods), Controversies 8s recent concepts.
- b. Young permanent teeth and permanent teeth, Pulp capping, Pulpotomy, Apexogenesis, Apexification, Concepts, Techniques and Materials used for different procedures.
- c. Recent advances in Pediatric diagnosis and Endodontics.
- 16. Prosthetic consideration in-Paediatric Dentistry.
- 17. Traumatic Injuries in Children:
- Classifications & Importance.
- Sequalae & reaction of teeth to trauma.
- Management of Traumatized teeth with latest concepts.
- Management of jaw fracture in children.
- 18. Interceptive Orthodontics:
- a. Concepts of occlusion and esthetics: Structure and function of all anatomic components of occlusion, mechanics of articulations, recording of masticatory function, diagnosis of Occlusal dysfunction, relationship of TMJ anatomy and pathology and related neuromuscular physiology.
- b. A comprehensive review of the local and systemic factors in the causation of malocclusion.
- c. Recognition and management of normal and abnormal developmental occlusions in primary, mixed and permanent dentitions in children (Occlusal Guidance).
- d. Biology of tooth movement: A comprehensive review of the principles of teeth movement Review of contemporary literature. Histopathology of bone and Periodontal ligament, Molecular and ultra cellular consideration in tooth movement.
- e. Myofunctional appliances: Basic principles, contemporary appliances: Design & Fabrication
- f. Removable appliances: Basic principles, contemporary' appliances: Design & Fabrication
- g. Case selection & diagnosis in interceptive Orthodontics (Cephalometric, Image processing, Tracing, Radiation hygiene, Video imaging 8s advance Cephalometric techniques).

- h. Space Management: Etiology, Diagnosis of space problems, analysis, Biomechanics, Planned extraction in interception orthodontics.
- 19. Oral Habits in Children:
- Definition, Etiology & Classification
- Clinical features of digit sucking, tongue thrusting, mouth breathing 8s various other secondary habits.
- Management of oral habits in children
- 20. Dental ware of Children with special needs:
- Definition Etiology, Classification, Behavioral, Clinical features 8s Management of children with:
- Physically handicapping conditions
- Mentally compromising conditions
- Medically compromising conditions
- Genetic disorders
- 21. Oral manifestations of Systemic Conditions in Children 8s their Management
- 22. Management of Minor Oral Surgical Procedures in Children
- 23. Dental Radiology as related to Pediatric Dentistry
- 24. Cariology
- Historical background
- Definition, Etiology & Pathogenesis
- Caries pattern in primary, young permanent and permanent teeth in children.
- Rampant caries, early childhood caries and extensive caries. Definition, etiology, Pathogenesis, Clinical features, Complications 8s Management.
- Role of diet and nutrition in Dental Caries
- Dietary modifications 8s Diet counseling.
- Subjective 8s objective methods of Caries detection with emphasis on Caries Activity tests, Caries prediction, Caries susceptibility 8s their clinical Applications
- 25. Pediatric Oral Medicine 8s Clinical Pathology: Recognition 8s Management of developmental dental anomalies, teething disorders, stomatological conditions, mucosal lesions, viral infections etc.
- 26. Congenital Abnormalities in Children: Definition, Classification, Clinical features of Management.
- 27. Dental Emergencies in Children and their Management.
- 28. Dental Materials used in Pediatric Dentistry.
- 29. Preventive Dentistry:
- Definition

- Principles 8s Scope
- Types of prevention
- Different preventive measures used in Pediatric Dentistry including fissure sealants and caries vaccine.
- 30. Dental Hearth Education 8s School Dental Health Programmes
- 31. Dental health concepts, Effects of civilization and environment, Dental Health delivery system, Public Health measures related to children along with principles of Pediatric Preventive Dentistry
- 32. Fluorides:
- Historical background
- Systemic &' Topical fluorides
- Mechanism of action
- Toxicity & Management.
- Defluoridation techniques.
- 33. Medicological aspects in Paediatric Dentistry with emphasis on informed concept.
- 34. Counseling in Padeiatric Dentistry
- 35. Case History Recording, Outline of principles of examination, diagnosis & treatment planning.
- 36. Epidemiology: Concepts, Methods of recording & evaluation of various oral diseases. Various national & global trends of epidemiology of oral diseases.
- 37. Comprehensive Infant Oral Health Care.
- 38. Principles of Bio-Statistics & Research Methodology & Understanding of Computers and Photography
- 39. Comprehensive cleft care management with emphasis on counseling, feeding, nasoalveolar bone remodeling, speech rehabilitation.
- 40. Setting up of Pedodontics & Preventive Dentistry Clinic.
- 41. Emerging concept in Paediatric Dentistry of scope of laser/minimum invasive procedures :

1ST YEAR

Preclinical Work

(Duration - first 6 Months of First Year MDS) (One On Each Exercise)

- 1. Carving of all deciduous teeth
- 2. Basic wire bending exercises
- 3. Fabrication of
- a. Maxillary bite plate / Hawley's'
- b. Maxillary expansion screw appliance
- c. Canine retractor appliance

d. All habit breaking appliances

- e. Two Myofunctional appliance
- i. Removable type
- ii. Fixed type
- iii.Partially fixed and removable
- f. Making of inclined plane appliance
- g. Feeding appliances
- 4. Basic soldering exercise I making of a lamppost of stainless steel wire pieces of different gauges soldered on either side of heavy gauge main post.
- 5. Fabrication of space maintainers
- a. Removable type-
- Unilateral Non functional space maintainer
- Bilateral Non-Functional space maintainer
- Unilateral functional space maintainer
- Bilateral functional space maintainer
- b. Space Regainers -
- Hawley's appliances with Helical space regainer
- Removable appliance with Slingshot space regainer
- Removable appliance with Dumbbell space regainer
- c. Fixed Space maintainers
- Band & long loop space maintainer
- Band & short loop space maintainer
- Mayne's space maintainer
- Transpalatal arch space maintainer
- · Nance Palatal holding arch
- Nance Palatal holding arch with canine stoppers
- Gerbcr space regainer
- Distal shoe appliance
- a. Active space maintainers
- b. For guiding the eruption of first permanent molar rags

- c. Arch holding device
- d. Functional space maintainer
- 6. Basics for spot welding exercise
- 7. Collection of extracted deciduous and permanent teeth
- a. Sectioning of the teeth at various levels and planes
- b. Drawing of section and shapes of pulp
- c. Phantom Head Excersies : Performing ideal cavity preparation for various restorative materials for both Deciduous and permanent teeth
- d. Performing pulpotomy, root canal treatment and Apexification procedure
- i) Tooth preparation and fabrication of various temporary and permanent restorations on fractured anterior teeth.
- ii) Preparation of teeth for various types of crowns
- iii) Laminates/veneers
- iv) Bonding & banding exercise
- 8. Performing of behavioral rating and IQ tests for children.
- 9. Computation of: -

Caries index and performing various carrier activity test. Oral Hygiene Index

Periodontal Index

Fluorosis Index

- 10. Surgical Exercises : a. Fabrication of splints b. Type of Wiring c. Suturing, various pvit system, prcing & porm. tuli
- a. Taking of periapical, occlusal, bitewing radiographs of children
- b. Developing and processing of films, thus obtained
- c. Tracing of soft tissue dental and skeletal landmarks as observed on Cephalometric radiographs and drawing of various planes and angles, further interpretation of Cephalometric radiographs is analysis.
- d. Mixed dentition cast analysis
- 11. Library assignment 12.Synopsis

Clinical work Requirements from 7 to 36 months

The following is the minimum requirement to be completed before the candidate can be considered eligible to appear in the final M.D.S Examinations: -

No,	Clinical Work	Total	7 To 12 Months	13 To 24 Months	25 To 36 Months
	Behavior Management of different age groups children with complete records.		2	10	5

2	Detailed Case evaluation with	17	2	10	5
_	complete records, treatment				
	planning and presentation of cases				
	with chair side and discussion				
3	Step-by-step chair side preve -	11	1	5	5
	ntive dentistry scheduled for high				
	risk children with gingival and periodontal diseases & Dental				
	Caries				
4	Practical application of Preve - ntive dentistry concepts in a class	7	1	4	2
	of 35-50 children& Dental Health				
	Education & Motivation.				
	Pediatric Operative Dentistry with	50	30	10	10
5	application of recent concepts.(a).				
	Management of Dental Caries (l)				
	Class I				
	(II) Class II	100	40	50	10
	(II) Class II	100	40	30	10
	(III) Other Restorations 100	20	50	30	
	(b). Management of traumatized	15	04	06	05
	anterior teeth				
	(c) Aesthetic Restorations	25	05	10	10
	(c) restricte restorations	-			
	(I) Pallata Pallata				
	(d). Pediatric Endodontic				

	Procedures-				
	1100000103-				
	Deciduous teeth				
	Pulpotomy /Pulpectomy	150	30	50	70
	Permanent Molars-	20	3	7	10
		4.5			10
	Permanent Incisor-	15	2	3	10
	Apexification &	20	02	08	10
	Apexogenesis				
	Apexogenesis				
6	Stainless Steel Crowns	50	10	20	20
	Other Crowns	05	01	02	02
7					
		0.0	000	40	40
8	Fixed Space Maintainers	30	08	12	10
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9	Removable Space Maintainers	20	05	07	08
10	Functional Maintainers	05	01	02	02
11	Preventive measures like fluoride applications & Pit & Fissure Sealants applications with complete follow-up and diet counseling	20	08	08	04
12	Special Assignments(i) School Dental Health Programmes	03	01	01	01
	(ii) Camps etc.,	02	01	01	

13 Library usage

- 14. Laboratory usage
- 15. Continuing Dental Health Programme

(The figures given against SI. No. 4 to 12 are the minimum number of recommended procedures to be performed)

Monitoring Learning Progress

It is essential to monitor the learning progress to each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring to be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment shoul be done using checklists that assess various aspects. Checklists are given Section IV.

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS course.

Part-I: Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics, Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology, Applied pharmacology, Research Methodology and bio statistics, Applied Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

- (2) Part II (3 papers of 100 Marks):-
- (i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of 100 Marks)
- (iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

A. Practical Examination 200 Marks

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First Day:

1. Case Discussion, Pulp Therapy i.e. Pulpectomy on a Primary Molar.

Case Discussion 20 marks

Rubber Dam application 10 marks

Working length X-ray 20 marks

Obturation : 20 marks

Total 70 marks

Case Discussion, Crown preparation on a Primary Molar for Stainless steel crown and cementation of the same.

Case discussion 10 marks

Crown Preparation 20 marks

Crown selection and Cementation 20 marks

Total 50 marks

Case discussion, band adaptation for fixed type of space maintainer and-impression making.

Case discussion 20 marks

Band adaptation 20 marks

Impression 20 marks

Total 60 marks

Second Day:

1. Evaluation of Fixed Space Maintainer and Cementation : 20 marks

B. Viva Voce: 100 Marks

i. Viva-Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise: 20 marks

A topic is given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes

ORAL MEDICINE AND RADIOLOGY

Objectives:

At the end of 3 years of training the candidate should be able to

Knowledge: Theoretical, Clinical and practical knowledge of all mucosal lesions, diagnostic procedures pertaining to them and latest information of imaging modules.

Skills and Attitude: Three important skills need to be imparted

- 1. . Diagnostic skill in recognition of oral lesions and their management
- 2. Research skills in handling scientific problems pertaining to oral treatment
- 3. Clinical and Didactic skills in encouraging younger doctors to attain learning objectives Attitudes:

Positive mental attitude and the persistence of continued learning need to be inculcated

Course Contents

Paper I: Applied Basic Sciences Applied Anatomy

- 1. Gross anatomy of the face:
- a. Muscles of Facial Expression And Muscles Of Mastication
- b. Facial nerve
- c. Facial artery
- d. Facial vein
- e. Parotid gland and its relations
- 2. Neck region:
- a. Triangles of the neck with special reference to Carotid, Digastric triangles and midline structures
- b. Facial spaces
- c. Carotid system of arteries, Vertebral Artery, and Subclavian arteries
- d. Jugular system Internal jugular

External jugular

- e. Lymphatic drainage
- f. Cervical plane
- g. Muscles derived from Pharyngeal arches
- h. Infratemporal fossa in detail and temporomandibular joint
- i. Endocrine glands Pituitary
- j. Sympathetic chain
- k. Cranial nerves-V, VII, IX, XI, & XII
- Thyroid
- Parathyroid
- I. Exocrine glands
- Parotid

- Thyroid
- Parathyroid
- 3. Oral Cavity:
- a. Vestibule and oral cavity proper b. Tongue and teeth
- c.Palate soft and hard 4.Nasal Cavity
- a. Nasal septum
- b. Lateral wall of nasal cavity c.Paranasal air sinuses 5.Pharynx:

Gross salient features of brain and spinal cord with references to attachment of cranial nerves to the brainstem.

Detailed study of the cranial nerve nuclei of V, VII, IX, X, XI, XII Osteology: Comparative study of fetal and adult skull Mandible:

Development, ossification, age changes and evaluation of mandible in detail

Embryology

- 1. Development of face, palate, nasal septum and nasal cavity, paranasal air sinuses
- 2. Pharyngeal apparatus in detail including the floor of the primitive pharynx
- 3. Development of tooth in detail and the age changes
- 4. Development of salivary glands
- 5. Congenital anomalies of face must be dealt in detail.

Histology:

- 1. Study of epithelium of oral cavity and the respiratory tract
- 2. Connective tissue
- 3. Muscular tissue
- 4. Nervous tissue
- 5. Blood vessels
- 6. Cartilage
- 7. Bone and tooth
- 8. Tongue
- 9. Salivary glands
- 10. Tonsil, thymus, lymph nodes

Physiology:

- 1. General Physiology:
- Cell
- Body Fluid Compartments
- Classification
- Composition

- Cellular transport
- RMP and action potential Muscle Nerve Physiology
- 2. Structure of a neuron and properties of nerve fibers
- 3. Structure of muscle fibers and properties of muscle fibers
- 4. Neuromuscular transmission
- 5. Mechanism of muscle contraction

Blood:

- 2. RBC and Hb
- 3. WBC Structure and functions
- 4. Platelets functions and applied aspects
- 5. Plasma proteins
- 6. Blood Coagulation with applied aspects
- 7. Blood groups
- 8. Lymph and applied aspects

Respiratory System:

- Air passages, composition of air, dead space, mechanics of respiration with pressure and volume changes
- # Lung volumes and capacities and applied aspects
- # Oxygen and carbon dioxide transport
- # Neural regulation of respiration
- # Chemical regulation of respiration
- # Hypoxia, effects of increased barometric pressure and decreased barometric pressure
- Cardio-Vascular System:
- Cardiac Cycle
- Regulation of heart rate/ Stroke volume / cardiac output / blood flow
- Regulation f blood pressure
- Shock, hypertension, cardiac failure

Excretory system

• Renal function tests

Gastro - intestinal tract:

- Composition, functions and regulation of:
- Saliva
- Gastric juice
- Pancreatic juice
- Bile and intestinal juice
- Mastication and deglutition

Endocrine system:

- Hormones classification and mechanism of action
- Hypothalamic and pituitary hormones
- Thyroid hormones
- Parathyroid hormones and calcium homeostasis
- Pancreatic hormones
- Adrenal hormones

Central Nervous System:

Ascending tract with special references to pain pathway

Special Senses:

• Gustation and Olfaction

Biochemistry

- 3. Carbohydrates Disaccharides specifically maltose, lactose, sucrose
- -Digestion of starch/absorption of glucose
- -Metabolism of glucose, specifically glycolysis, TCA cycle, gluconeogenesis
- -Blood sugar regulation
- -Glycogen storage regulation
- -Glycogen storage diseases
- -Galactosemia and fructosemia
- 2. Lipids
- Fatty acids- Essential/non essential
- Metabolism of fatty acids- oxidation, ketone body formation, utilization ketosis
- Outline of cholesterol metabolism- synthesis and products formed from cholesterol
- 3. Protein
- -Amino acids- essential/non essential, complete/incomplete proteins
- Transamination/ Deamination (Definition with examples)
- -Urea cycle
- Tyrosine- Hormones synthesized from tyrosine
- -In born errors of amino acid metabolism
- Methionine and transmethylation
- 4. Nucleic Acids
- Purines/Pyrimidines Purine analogs in medicine
- DNA/RNA-Outline of structure
- Transcription/translation Steps of protein synthesis Inhibitors of protein synthesis Regulation of gene function

- 5. Minerals
- Calcium/Phosphorus metabolism specifically regulation of serum calcium levels
- -Iron metabolism
- Iodine metabolism
- -Trace elements in nutrition
- 6. Energy Metabolism
- Basal metabolic rate
- Specific dynamic action (SDA) of foods
- 7. Vitamins
- Mainly these vitamins and their metabolic role- specifically vitamin A, Vitamin C, Vitamin D, Thiamin, Riboflavin, Niacin, Pyridoxine

Pathology:

- **1.** Inflammation:
- Repair and regeneration, necrosis and gangrene
- Role of complement system in acute inflammation
- Role of arachidonic acid and its metabolites in acute inflammation
- Growth factors inacute inflammation
- Role of molecular events in cell growth and intercellular signaling cell surface receptors
- Role of NSAIDS in inflammation
- · Cellular changes in radiation injury and its manifestations

Homeostasis

- Role of Endothelium in thrombo genesis
- · Arterial and venous thrombi
- · Disseminated Intravascular Coagulation

Shock

- Pathogenesis of hemorrhagic, neurogenic, septic, cardiogenic shock, circulatory disturbances, ischemic hyperemia, venous congestion, edema, infarction Chromosomal Abnormalities:
- Mar fan's syndrome
- Ehler's Danlos Syndrome
- Fragile X Syndrome

Hypersensitivity:

- Anaphylaxis
- Type II Hypersensitivity
- · Type III Hypersensitivity

- Cell mediated Reaction and its clinical importance
- Systemic Lupus Erythmatosus
- Infection and infective granulomas

Neoplasia:

- Classification of Tumors
- Carcinogenesis & Carcinogens Chemical, Viral and Microbial
- Grading and Staging pf Cancer, tumor Angiogenesis, Paraneoplastic Syndrome
- Spread of tumors
- Characteristics of benign and malignant tumors

Others:

- · Sex linked agamaglobulinemia
- AIDS
- Management of Immune deficiency patients requiring surgical procedures
- De George's Syndrome
- Ghons complex, post primary pulmonary tuberculosis pathology and pathogenesis

Phamacology:

- 1. Definition of terminologies used
- **1.** Dosage and mode of administration of drugs
- **2.** Action and fate of drugs in the body
- **3.** Drugs acting on the CNS
- **4.** Drug addiction, tolerance and hypersensitive reactions

- **5.** General and local anesthetics, hypnotics, analeptics, and & tranquilizers
- **6.** Chemotherapeutics and antibiotics
- **7.** Analgesics and anti pyretics
 - 8. Anti tubercular and anti syphilitic drugs 10. Antiseptics, sialogogues, and anti sialogogues
 - 11.Haematinics
 - 12. Anti diabetics
 - 13. Vitamins A B Complex, C, D, E, K
 - 14. Steroids

Paper II: Oral And Maxillofacial Radiology

Study includes Seminars / lectures / Demonstrations

- 1. History of radiology, structure of x ray tube, production of x ray, property of x rays
- 2. Biological effects of radiation
- 3. Filtration of collimation, grids and units of radiation
- 4. Films and recording media
- 5. Processing of image in radiology
- 6. Design of x -ray department, dark room and use of automatic processing units
- 7. Localization by radiographic techniques
- 8. Faults of dental radiographs and concept of ideal radiograph
- 9. Quality assurance and audit in dental radiology
- 10. Extra oral-imaging techniques
- 11. OPG and other radiologic techniques
- 12. Advanced imaging technique like CT Scan, MRI, Ultras one & thermo graphic
- 13. Radio nucleotide techniques
- 14. Contrast radiography in salivary gland, TMJ, and other radiolucent pathologies
- 15. Radiation protection and ICRP guidelines
- 16. Art of radiographic report, writing and descriptors preferred in reports
- 17. Radiograph differential diagnosis of radiolucent, radio opaque and mixed lesions
- 18. Digital radiology and its various types of advantages

Paper III: Oral Medicine, therapeutics and laboratory investigations

- 1. Study includes seminars / lectures / discussion
- 2. Methods of clinical diagnosis of oral and systemic diseases as applicable to oral tissue including modern diagnostic techniques
- 3. Laboratory investigations including special investigations of oral and bro facial diseases
- 4. Teeth in local and systemic diseases, congenital, and hereditary disorders

- 5. Oral manifestations of systemic diseases
- 6. Oro facial pain
- 7. Psychosomatic aspects of oral diseases
- 8. Management of medically compromised patients including medical emergencies in the dental chair
- 9. Congenital and Hereditary disorders involving tissues of oro facial region
- 10. Systemic diseases due to oral foci of infection
- 11. Hematological, Dermatological, Metabolic, Nutritional, & Endocrinal conditions with oral manifestations
- 12. Neuromuscular diseases affecting oro -facial region
- 13. Salivary gland disorders
- 14. Tongue in oral and systemic diseases
- 15. TMJ dysfunction and diseases
- 16. Concept of immunity as related to oro facial lesions, including AIDS
- 17. Cysts, Neoplasms, Odontomes, and fibro osseous lesions 18.0ral changes in Osteo dystrophies and chondro dystrophies 19.Pre malignant and malignant lesions of oro facial region 20.Allergy and other miscellaneous conditions
- 21. Therapeutics in oral medicine -clinical pharmacology
- 22. Forensic odontology
- 23. Computers in oral diagnosis and imaging
- 24. Evidence based oral care in treatment planning

Essential Knowledge

Basic medical subjects, Oral Medicine, Clinical Dentistry, Management of Medical Emergencies, Oral Radiology, Techniques and Inter - Operation, Diagnosis of Oro-facial

Disorders

Procedural and Operative Skills:

(The numbers mentioned are minimum to be performed by each candidate)

1st Year

Observe, Assist, & Perform under supervision

- 1. Examination of Patient Case history recordings -50
- FNAC & Biopsy 5 each

Observe, Assist, & Perform under supervision

2. Intra - oral radiograph

Perform an interpret -100

2nd year

- 1. Dental treatment to medically compromised patients
- Observe, assist, and perform under supervision
- 2. Extra oral radiographs, digital radiography 25
- - Observe, assist and perform under supervision

Operative skills:

- 1. Giving intra muscular and intravenous injections
- 2. Administration of oxygen and life saving drugs to the patients
- 3. Performing basic CPR and certification by Red Cross

3rd Year

All the above

- Occlusal view

Performed independently-Case history: Routine cases -25 Interesting Cases - 25 Intra - oral Radiographs -100
Periapical view -50
Bitewing view -25

Extra-oral radiographs of different views

- 50 Monitoring Learning Progress

- 25

It is essential to monitor the learning progress to each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but

also students to evaluate themselves. The monitoring to be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV

UNIVERSITY SCHEME OF EXAMINATION

M.D.S. Degree examinations in any branch of study shall consist of dissertation, written paper (Theory) Part I at the end of Ist year and Part II at the end of 3 years Practical/Clinical and Viva voce.

Theory: Part-I: Basic Sciences Paper - 100 Marks

Part-II: Paper-I, Paper-II & Paper-III - 300 Marks (100 Marks for each Paper)

Written examination shall consist of Basic Sciences (Part-I) of three hours duration shall be conducted at the end of First year of MDS course. Part-II Examination shall be conducted at the end of Third year of MDS course.

Part-I : Applied Basic Sciences: Applied Anatomy, embryology, growth and development Genetics.

Immunology, anthropology, Physiology, nutrition & Biochemistry, Pathology & Microbiology, virology, Applied pharmacology, Research Methodology and bio statistics,. Applied Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.

Part-II Examination shall consist of Paper-I, Paper-II and Paper-III, each of three hours duration.

Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each.

Paper-III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows:

DISTRIBUTION OF MARKS:

Theory:

(1) Part I University Examination (100 Marks):-

There shall be 10 questions of 10 marks each (Total of 100 Marks)

- (2) Part II (3 papers of 100 Marks):-
- (i) Paper-I: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each. (Total of

100 Marks)

(ii) Paper-II: 2 long essay questions of 25 marks each and 5 short essays of 10 marks each.

(Total of

100 Marks)

(iii) Paper III: 2 out of 3 essay questions ($50 \times 2 = 100 \text{ Marks}$)

Practical and Clinical Examination: 200 Marks

Viva-voce and Pedagogy: 100 Marks

B. Practical / Clinical Examination 200 Marks

1st Day

Clinical Case Presentation

2 Spotters $2 \times 10 = 20$ Marks

2 Short Cases $2 \times 15 = 30$ Marks

1 Long Case $1 \times 50 = 50$ Marks

Total =100 Marks Radiology Exercise

I.A) One Intra Oral Radiograph 10 Marks

B) One Occlusal Radiograph 30 Marks

II. A) Two Extra Oral Radiograph 2 x 30 = 60 Marks Including technique and interpretation

2"* Day

C. Viva Voce: 100 Marks

i. Viva-Voce examination: 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise: 20 marks

A topic is given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8 10 minutes

SECTION IV

TEACHING/LEARNING ACTIVITIES AND MONITORING

LEARNING PROGRESS

All the candidates registered for MDS course in various specialties shall pursue the course for a period of 3 years as full time students. During this period, each student shall take part actively in learning activities designed by the institution / university. A list is given below. Institutions may include additional activities, if so, desired.

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also helps students

to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities using checklists. Model Checklists are given in this section. They may be copied and used. The number of activities attended and the topics prevented are to be recorded in log book. The log book should periodically be validated by the supervisors.

i) Acquisition of Knowledge

Journal Review Meeting (Journal Club): The trainees should make presentation from the allotted journals of selected article at least five times in a year. The ability to do literature search, in depth study, presentation skills, and use of audio- visual aids are to be assessed during presentation. The assessment be made by faculty members and peers attending the meeting using Model Checklist 1 in Section IV.

Seminars: The seminars may be held at least twice a week in each postgraduate department. All candidates are expected to participate actively and enter relevant detail in the logbook. Each candidate shall make at least five seminar presentations in each year. The topics should be assigned to the student well in advance to facilitate in depth study. The ability to do literature search, in depth study, presentation skills and use of audio- visual aids are to be assessed using the Model Checklist 2, in Section IV.

Symposium: It is recommended to hold symposiums on topics covering multiple disciplines Clinico-Pathological Conferences (CPC): The CPCs should be held once in a month involving the faculties in Oral Medicine and Radiology, Oral Pathology and concerned clinical departments. The PG student should be encouraged to present the clinical details, radiological, and histopathological interpretations, and participation in the discussion. All departments should attend CPCs.

Interdepartmental meetings: To bring in more integration among various specialities, interdepartmental meetings are recommended, chaired by the dean, with all heads of post graduate departments, at least once a month.

ii) Clinical skills

Day to Day work: Skills in outpatient and ward work should be assessed periodically. The assessment should include the candidate's sincerity and punctuality, analytical ability and communication skills (see Model Checklist 3, Section IV).

Clinical meetings: Candidates should periodically present cases to his peers and faculty members. This should be assessed using a check list (see Model checklist 4, Section IV). Clinical and Procedural skills: The candidate should be given graded responsibility to enable learning by apprenticeship. The performance is assessed by the guide by direct observation. Particulars are recorded by the student in the log book. (Table No.3, Section IV)

- iii) Teaching skills: All the candidates shall be encouraged to take part in undergraduate teaching programs, either in the form of lectures or group discussions. This performance should be based on assessment by the faculty members of the department and from feedback from the undergraduate students (See Model checklist 5, Section IV)
- iv) Periodic tests: The concerned departments may conduct three tests, two of them be annual tests, one at the end of first year and the other in the second year. The third test may be held three months before the final examination. The tests may include written papers, practicals / clinicals and viva voce.
- vii) Work Diary / Log Book: Every candidate shall maintain a work diary and record his/her participation in the training programmes conducted by the department such as journal reviews, seminars, etc. Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate.
- viii) Records: Records, log books and marks obtained in tests will be maintained by the Head of the Department and will be made available to the University or DCI.

Continuing dental education programmes: Each postgraduate department is recommended to organize these programs on regular basis involving other institutions. The trainees shall also be encouraged to attend such programs conducted elsewhere

Conferences / workshops / advance courses: The trainee shall be encouraged not only to attend conferences/workshops/advanced courses, but also to present at least 2 papers at state, national specialty meetings during their training period.

Dissertation: Every candidate shall prepare a dissertation based on the clinical or experimental work or any other study conducted by them under the supervision of the post graduate guide. (See Model checklist 6 & 7, Section IV) Log book

The log book is a record of the important activities of the candidates during the training, Internal assessment should be based on the evaluation of the log book. Collectively, log books are a tool for the evaluation of the training programme of the institution by exte agencies. The record includes academic activities as well as the presentations and p carried out by the candidate.

Format for the log book for the different activities is given in Tables 1,2 and 3 of Section IV Copies may be made and used by the institutions.

Procedure for defaulters: Every department should have a committee to review such situations. The defaulting candidate is counseled by the guide and head of the department. In extreme cases of default the departmental committee may recommend that defaulting candidate be withheld from appearing the examination, if she/he fails to fulfill the requirements in spite of being given adequate chances to set himself or herself right.

Section V Ethics in Dentistry

Introduction: There is a definite shift now from the traditional patient and doctor relation and delivery of dental care. With the advances in science and technology and the increased needs of the patient, their families and community, there is a concern for the health of community as a whole. There is a shift to greater accountability to the society. specialists like the other health professionals are confronted with many ethical problems is therefore absolutely necessary for each and every one in the health care delivery to prepare themselves to deal with these problems. To accomplish this and develop human values, it is desired that all the trainees undergo ethical sensitization by lectures or discussion on ethical issues, discussion of cases with an important ethical component.

Course Content: Introduction to ethics -

- What is ethics?
- What, are values and norms?
- How to form a value system in one's personal and professional life? Hippocratic oath.
- Declaration of Helsinki, WHO declaration of Geneva, International code of ethics,
- D.C.I. Code of ethics.

Ethics of the individual -

- The patient as a person.
- Right to be respected
- Truth and confidentiality
- Autonomy of decision
- Doctor Patient relationship

Professional Ethics-

- Code of conduct
- Contract and confidentiality
- Charging of fees, fee splitting
- Prescription of drugs
- Over-investigating the patient
- Malpractice and negligence

Research Ethics -

Animal and experimental research

Human volunteer research-informed consent for trials Drug trials

Ethical workshop of cases Gathering all scientific factors Gathering all value factors

Fortifying areas of value - conflict, setting of priorities Working out criteria towards decisions.

Recommended Reading:

- 1. Francis CM., Medical Ethics, 2nd Edn, 2004, Jaypee Brothers, New Delhi, Rs 150/.
- 2. Ethical Guidelines for Biomedical Research on Human Subjects, Indian Council of Medi, Research, New Delhi, 2000.

CHECKLISTS AND LOGBOOKS

CHECKLIST- 1

MODEL CHECK LIST FOR EVALUATION OF JOURNAL REVIEW PRESENTATIONS.

Name of the Trainee:	Date:

Name of the Faculty / Observer:

<u>SI</u> . <u>No</u>	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Article chosen was					
2.	Extent of understanding of scope & objectives of the paper by the candidate					
3.	Whether cross- References					
	have been consulted					
4.	Whether other relevant publications consulted					
5.	Ability to respond to questions on the paper/ Subject					
6.	Audio - Visual aids used					
7.	Ability to discuss the Paper					
8.	Clarity of presentation					
9.	Any other observation					
	Total Score					

CHECKLIST-2

MODEL CHECK LIST FOR EVALUATION OF SEMINAR PRESENTATIONS.

Name of the Trainee:	Date:
Name of the Faculty / Observer:	

Sl	Items for observation	Poor	Below	Average 2	Good 3	Very
<u>no</u>	during presentation	0	Average 1	11,01080 7	40040	Good 4
1	Whether other relevant publications consulted					
2	Whether cross - references have been consulted					
3	Completeness of Preparation					
4	Clarity of Presentation					
5	Understanding of subject					
6	Ability to answer the questions					
7	Time scheduling					
8	Appropriate use of Audio -Visual aids					
9	Overall performance					
10	Any other observation					
	Total score					

Please use a separate sheet for each faculty member

CHECKLIST- 3

MODEL CHECK LIST FOR EVALUATION OF CLINICAL WORK IN OPD

MODEL GILLOIT LIGHT TOTAL VILLOITION C	or definitional worth in or
Name of the Trainee:	Date:
Name of the Unit Head:	

<u>SI</u> .	Items for observation	Poor	Below	Average	Good	Very
<u>No</u> .	during presentation	0	Average 1	2	3	Good 4
1.	Regularity of attendance					
2.	Punctuality					
3.	Interaction with colleagues and supportive Staff					
4.	Maintenance of case Records					
5.	Presentation of cases					
6.	Investigations work –up					
7.	Chair - side manners					
8.	Rapport with patients					
9.	Overall quality of clinical Work					
	Total score					

Please use a separate sheet for each faculty member

CHECKLIST - 4 EVALUATION FORM FOR CLINICAL CASE PRESENTATION

Name of the Trainee: Date:

Name of the faculty / Observer:

11011110	-,,,					
SI.No	Items for observation	Poor	Below	Average 2	Good	Very Good
	during presentation	0	Average 1		3	4
1.	Completeness of history					
2.	Whether all relevant points elicited					

3.	Clarity of presentation			
4.	Logical order			
5.	Mentioned all positive and negative			
6.	Accuracy of general physical examination			
7.	Investigations required			
	Complete list			
8.	Relevant order			
	Intepretation of Investigations			
	Ability to discuss differential diagnosis.			
9.	Ability to discuss diagnosis.			
10.	Others			
	Grand Total			

Please use a separate sheet for each faculty member

CHECKLIST-5 MODEL CHECK LIST FOR EVALUATION OF TEACHING SKILL

Name of the Trainee:	D	ate:

Name of the faculty Observer:

	Strong Point	Weak Point
Communication of the purpose of the talk		
Evokes audience interest in the subject		
The introduction		
The sequence of ideas		
The use of practical examples and / or illustrations		
Specking style (enjoyable,		
	the talk Evokes audience interest in the subject The introduction The sequence of ideas The use of practical examples and / or illustrations	Communication of the purpose of the talk Evokes audience interest in the subject The introduction The sequence of ideas The use of practical examples and / or illustrations Specking style (enjoyable,

7.	Attempts audience participation	
8.	Summary of the main points at the end	
9.	Ask questions	
10.	Answer questions asked by the Audience	
11.	Rapport of speaker with his Audience	
12.	Effectiveness of the talk	
13.	Uses AV aids appropriately	

Please use a separate sheet for each faculty member

CHECKLIST- 6
MODEL CHECKLIST FOR DISSERTATION PRESENTATION

Name of the Trainee:	Date:
----------------------	-------

Name of the faculty / Observer:

SI.No.	Prints to be considered	Poor	Below	Average	Good	Very
		0	Average 1	2	3	Good 4
1.	Interest show in selecting topic					
2.	Appropriate review					
3.	Discussion with guide and other faculty					
4.	Quality of protocol					
5.	Preparation of Proforma					
	Total Score		ı	1	I	

CHECKLIST- 7	
CONTINUOUS EVALUATION OF DISSERTATION WORK BY GUIDE,	/CO-GUIDE

Name of the Trainee:	Date
Name of the Faculty/Observer:	

SI.No	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Periodic consultation with guide / co- guide					
2.	Regular collection of case material					
3.	Depth of Analysis / Discussion					
4.	Department presentation of findings					
5.	Quality of final output					
6.	Others					
	ToTotal score					

CHECKLIST - 8 OVERALL ASSESSMENT SHEET

Name of the College: Date:

Check	PARTICULARS									
List No		A	В	С	D	Е	F	G	t	J
1.	Journal Review Presentation									
2.	Seminars									
3.	Clinical work in wards									
4-	Clinical presentation									
5.	Teaching skill practice									
6.										
	TOTAL									

Signature of HOD

Signature of Principal

The above overall assessment sheet used along with the logbook should form the basis for certifying satisfactory completion of course of study, in addition to the attendance requirement.

Tabl	LOG BOOK Table 1 Academic activities attended					
Name:	on Voor, Collogo					
Aumssic	on Year: College:					
Date	Type of activity - Specify Seminar, Journal club, Presentation, UG teaching	Particulars				

LOG BOOK

Table 2

Key:

Mean score: Is the sum of all the scores of checklists 1 to 7

A, B,..... Name of trainees

Academic Presentations made by the trainee

Name :					
Admissi	on Year:				
College:					
Date		Topic		Type of activity - Specify Ser Journal club, Presentation, U teaching	
		LOGBO	ок		
		Table	3 Diagnostic and ope	erative procedures performed	
Name					
Admissio	n Year:				
College:					
Date	Name	OP No.	Procedure	Category 0, A, PA, PI	
		,			

к	217	
7.	C V	

- C WASHED UP AND OBSERVED INITIAL 6 MONTHS OF ADMISSION A ASSISTED A
 MORE SENIOR SURGEON -1 YEAR MDS
- PA PERFORMED PROCEDURE UNDER THE DIRECT SUPERVISION OF A SENIOR SURGEON II YEAR MDS
- PI PERFORMED INDEPENDENTLY III YEAR MDS

SECTION VI

LIBRARY & EQUIPMENT REQUIREMENTS

- 1. Infrastructure & Functional Requirements:
- 1. Space: In addition to the BDS functional programme the following physical facilities shall be made available to start postgraduate training programmes leading to MDS degree.

feet visual

- a. A separate clinical area for postgraduate students. Minimum Area-600 sq
- b. A seminar room furnished with proper seating arrangement and audio-

equipments - Minimum area -300 sq. ft.

- c. A separate room for the use of postgraduate students Minimum area -200 sq.ft.
- 2. Equipment: Each postgraduate department shall be provided with the required equipments as recommended by Dental Council of India.
- 3. Library: A departmental library shall be provided with copies of relevant books. In addition a central library should provide all the recent editions of books pertaining to the speciality and allied subjects as per the recommendations of Dental Council of India.

All the journals of relevant specialty and allied subjects shall be made available..

2. Recommended Books And Journals

I. Prosthodontics Implantology

	Title	Author
1.	Osseo integration in skeletal reconstruction and joint	Branemark
	Replacement	
2.	Advanced osseointegration surgery	Philip
3.	Surgical atlas of dental implant technique	Bubbush
4.	Contemporary implant dentistry	Carl Misch
5.	Dental implant are they for me?	Thomas d Taylor
6_	A color atlas of dental implant surgery	Block
7.	A color atlas of dental and maxillofacial implantology	John Hobkrick
8.	The Branemark novum protocol for same day	Branemark
9.	Osseo integration and esthetics	Branemark
10.	Color atlas of Branemark system of oral reconstruction	Richard A/ Rassmuser
11.	Color atlas of dental medicine (implantology)	Spekerman
12	Osseo integration in craniofacial reconstruction	Branemark
13	Endosteal implant	McKiney
14	Implant Prosthodontics	M. Fagan

15.	Dental Implant		Wolfe
16.	Dental Implant: Implant support prosthesis		Vincente Jimenz
17.	Periodontal and Prosthodontic management of Advanced c	ase.	Marvian
18.	Oral implantology: Basic ITV cylinder		Schroeder
19.	Dental Implant		McKiney
20.	Tissue Integrated prosthesis		Branemark/ Zarb/
			Alberketson
21.	Dental implants (The art and science)		Charles Bubbush
22.	Implant and restorative dentistry		Gerald M.
	Carl Misch /Klaus U. Benner		Scortecci/
23.	Tissue integration in orthopedic and maxillofacial		William R. Laney
	Reconstruction		
24.	Oral Implantology		Andre
25.	Implant therapy	Myron	
26.	Guided bone regeneration: InImplant dentistry	Daniel Buser	
27.	Laboratory techniques for Branemark system	Taylor &Bergman	
28.	Implant Prosthodontics: Surgical and prosthetic techniques	S	Fagan
	For dental implants		
29.	A color atlas of the Branemark system on oral reconstruction	on	George A. Zarb
30.	Dental implant color atlas fundamentals and advance		Robert
	Laboratory technology		
Dent	al Materials		
Title		Auth	nor
1.	Dental ceramics; proceedings of the First international	John	W. McLean
	symposium on ceramics		
2.	The science and art of dental ceramics	John	W. McLean
3.	Science of dental materials (9th and 10th edition)	ps	
4.	Biocompatibility of dental materials (Vol 1 - 4)	Deni	nis G Smith / David
		Willi	iams
5.	Dental materials; Multiple-choice questions		
6.	Dental materials, properties and manifestations William O. Brien		
7.	Porcelain and composite inlays and onlays	Grab	oer and Goldstein

8.	Applied dental materials	Anderson
9.	Dental material science	Basu
10.	Notes on dental materials	Combe
11.	Dental materials a problem oriented approach	Craig
12.	Restorative dental materials	Craig
13	Dental materials: Properties and manipulation	Craig
14	Clinical restorative materials and techniques	Leineelder and Lemons
15.	Restorative dental materials - A preview	Reese and Valega
16.	Dental materials in clinical dentistry	Reisbick
17.	Science of dental materials	Skinner
18.	Clinical handling of dental materials	Smith
TMJ	and Occlusion	
SI.	Title	Author
No		
1	Introduction to Gnathology	Dr.E.GR. Solomon
2	Clinical management of head, neck and TMJ pain and	Harold Gelb
	dysfunction	
3	The TMJ; a biological basis for clinical practice	Sarnat Laskin
4	Clinical management of TM Disorder and orofacial pain	Richard Pertes / Sheldon
		G. Gross Gerber

5	Dental occlusion and the TMJ	
6	Imaging atlas of TMJ	Leslie B. Heffez/
		Mehmood
7	A color atlas of occlusion and malocclusion	A.P. Howard/N.J. Capp
8	Occlusion (3rd edition)	Ramfjord/Ash
9	Current controversies in TM disorders	Charles McNeill
10	Anthroscopic atlas of TMJ	David I. Blaustein/Leslie
		B. Heffez
11	Craniomandibular disorders and oro facial pain	Iven Klineberg
12	A text and color atlas of TM JOral rehabilitation; Clinical	John Norman/Paul
	determination of occlusion	BramelySumiya Hobo
13	Total TMJ reconstruction	
14	Medical management of TM disorders	

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15	Modern g-nathological concepts (updated)	1	or Lucian
16	Principles and practice of TMJ anthroscopy		oh P McCain
17	Evaluation, Diagnosis and treatment of occlusal problems	Daws	son
18	Management of TMD and occlusion	Okes	on
19	TMD Classification, diagnosis and management	Weld	len E. Bell
20	TMJ and craniofacial pain diagnosis and management	Jame	s R. Fricton
21	TMJ dysfunction: A practice guide	Anni	ka Isberg
22	Occlusion principles and concepts	Jose	Dos Santos Jr.
23	Oral rehabilitation problem cases: treatment and Evaluation	Schw	veizer
24	Occlusion collection of monographs	Guich	het
25	Conjoint in occlusion	Marq	quette. University
26	Occlusion in clinical practice	Thon	nson
l	rillatacial Surgical Conciderations And Reconstruction		
Max	cillofacial Surgical Considerations And Reconstruction		
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SI. No	Title		
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SI. No	Title Color atlas of dental medicine. Oral surgery for the general Dentist	Hern	nann F. Seiler
SI. No	Title Color atlas of dental medicine. Oral surgery for the general Dentist Maxillofacial rehabilitation; Prosthodontic and surgical	Hern John Thon	nann F. Seiler Berumer III /
SI. No 1	Title Color atlas of dental medicine. Oral surgery for the general Dentist Maxillofacial rehabilitation; Prosthodontic and surgical Consideration	Hern John Thom Barry	nann F. Seiler Berumer III / nas A. Curtis
SI. No 1	Title Color atlas of dental medicine. Oral surgery for the general Dentist Maxillofacial rehabilitation; Prosthodontic and surgical Consideration	John Thom Barry E. Zu	Berumer III / nas A. Curtis y C. Cooper / Frank
SI. No 1 2	Title Color atlas of dental medicine. Oral surgery for the general Dentist Maxillofacial rehabilitation; Prosthodontic and surgical Consideration Management of facial head and neck pain	John Thom Barry E. Zu Keith	Berumer III / mas A. Curtis y C. Cooper / Frank cente
SI. No 1 2 3	Title Color atlas of dental medicine. Oral surgery for the general Dentist Maxillofacial rehabilitation; Prosthodontic and surgical Consideration Management of facial head and neck pain Prosthetic rehabilitation	John Thom Barry E. Zu Keith John	nann F. Seiler Berumer III / nas A. Curtis y C. Cooper / Frank cente n F. Thomas
SI. No 1 2 3	Title Color atlas of dental medicine. Oral surgery for the general Dentist Maxillofacial rehabilitation; Prosthodontic and surgical Consideration Management of facial head and neck pain Prosthetic rehabilitation Maxillofacial rehabilitation; Prosthodontic and Surgical	John Thom Barry E. Zu Keith John	nann F. Seiler Berumer III / mas A. Curtis y C. Cooper / Frank cente n F. Thomas Beumer III / Thomas
SI. No 1 2 3 4 5	Title Color atlas of dental medicine. Oral surgery for the general Dentist Maxillofacial rehabilitation; Prosthodontic and surgical Consideration Management of facial head and neck pain Prosthetic rehabilitation Maxillofacial rehabilitation; Prosthodontic and Surgical consideration	John Thom Barry E. Zu Keith John	nann F. Seiler Berumer III / mas A. Curtis y C. Cooper / Frank cente n F. Thomas Beumer III / Thomas
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25	Planned partials	t	Applegate
26	Color atlas of Removable Partial Denture		I.C. Devenport

General Prosthodontics

SI.	Title	Author
No		
1	DENTISTRY: An illustrated history	Malvin E. Ring
2	Text book of Geriatric dentistry	Paul Holm/Pedersor
3	Prosthodontics: Principle and management strategies	Bengt OwaW
4	Prosthodontics for the elderly: Diagnosis and Treatment	Ejvind Budtz
5	Dental secrets	Stephen
6	Essentials of Clinical dental assisting	Joseph
7	Clinical Dental Prosthesis	Fenn
8	Essentials of dental Technology	Fowler
9	Management of Geriatric dental patients	Freedman
10	Diagnosis and treatment plan of maxillofacial prosthodontics	Laney and Gibilisco
11	Facial growth and Facial Orthopedics	Wander Linden
12	Lasers in Dentistry	Leo '
13	Pharmacology and therapeutics for dentistry	John A. Yagiela
14	Dental drug reference	Delmars
15	Modern concepts in diagnosis and treatment of fissure caries	Paterson / Watts
16	Biomechanics in clinical dentistry	Caputo and Standlee
17	Color atlas of preprosthetic surgery	Hopkins
18	Clinical epidemiology and biostatistics	Rebecca Knapp
19	Legal procedure in medical cases	Apurva Nandy
20	Law and medicine	Jogaroa
21	Modern dental assisting	Torres
22	Preservation and restoration of tooth structure, esthetics	Graham J. Mount
23	Fundamentals of esthetics	Claud R. Rufenacht
24	Esthetic dentistry and ceramic restorations	Bernard Tauti
25	Esthetic dentistry - Ceramic restorations	loraWc
26	Esthetics in dentistry	Goldstein
27	Esthetics	Lauller

28	Esthetic guidelines for restorative dentistry	Schareer
29	Suggested chair side procedures for natural esthetics in	Branemark
	complete denture	
30	Esthetic approach in metal ceramic restoration for the	Muthethies
	mandibular anterior region	
31	Natural ceramics	Korson
32	The polychromatic layering techniques	Rinn
33	Creative ceramic color - a practical system	Hegenbarth
34	Basic techniques for metai ceramics	Yamamoto
35	Porcelain laminate	Garber
36	Fundamentals of esthetics	Rufenacht
37	Color atlas of porcelain laminate veneers	Freedman
38	Perspective in dental ceramics	Preston
39	Techniques for porcelain laminate veneers	Haga and Nakazawa

3	Planning and making crowns and bridges	Bernard G.N. Smith
4	Johnston's modern practice in fixed prosthodontics	Dykema
5	Failures in restored dentition; management and	Michael D. Wise
	Treatment	
6	Precision fixed prosthodontics; Clinical and lab aspects	M.Martigone ;
7	Contemporary fixed Prosthodontics	SteephenS. Rosenstie
8	Theory and practice of Fixed Prosthodontics	Tyllman
9	Fundamentals of esthetics	Rufeflacht
10	Esthetics of anterior fixed prosthodontics	Gerald J. Chiche
11	Precision attachment	Gareth
12	Color atlas of ceramo metal technology	Kuwata
13	Inlays, crown and bridges	Krantirowich
14	Advanced restorative dentistry	Bacom
15	Fixed and removable prosthodontics	Bardy
16	Metal ceramic crown and fixed partial denture	Calomn
17	_aboratory manual for fixed partial denture	Douglas
18	Adhesive metal free restorations	Dietschi & Spreafico
19	Ceramo metal fixed partial denture	George
20	Essentials of dental ceramics - an artistic approach	Chuiche&Alspnault
21	Direct bonded retainers	McLaughlin
22	Crown and Bridge Prosthodontics	Allan and Foreman
23	Inlays crowns and Bridges	Cowell
24	Clinical procedures for partial crowns, inlays and pontics	Ravasini
25	Fixed Prosthodontics manual of procedures	Riis
26	Fixed Prosthodontics manual of procedures	Schorr
27	Multiple cantilevers in fixed prosthetics	Schweikert
28	Laboratory procedures for inlays. Crowns and bridges	Stananought
29	Precision fixed prosthodontics	Martignoni
		Schonenberger
Con	nplete Dentures	•
SI.	Title	Author
No		
1	Treatment of edentulous patient	Victor 0. Lucia
2	A color of Complete Dentures	JA. Hobkirk

3	Esthetics in Complete Dentures	Dr. E.G.R. Solomon
4	Syllabus of Complete Denture	Heartwell
5	Prosthodontic treatment for edentulous patients	Zarb/Boucher
6	Dental lab procedure - Complete Denture	Morrow and Rudd
7	Color atlas of complete denture fabrication	Hirosh Muraoka
8	Complete Denture Prosthodontics (3rd edition)	Sharry
9	Principles and practice of Complete Dentures	Iwao Hayakawa
10	Handbook of immediate over dentures	Robert
11	Over denture	Allen
12	Occlusal correction: Principles and Practice	John
13	Immediate and replacement dentures	Albert
14	Sectional dentures: A clinical and treatment manual	Pullen
15	Mastering the art of complete dentures	Alexander
16	Dental laboratory procedures in complete dentures	Robert
"	Overdenture made easily	Harold
21		
7		
18	Full dentures	Mack
19	Sectional dentures	Pullen-Wamer&
		Lestrance
20	Atlas of over dentures and attachments	Kumber
21	Immediate and Replacement dentures	Anderson and Storer
22	Complete dentures	Hobkirk
23	Impressions for Complete Dentures	Levin
24	Complete denture prosthetics, clinical and laboratory	Nell and Niern
	manual	
25	Complete denture prosthetics	Nell and Niern
26	Designing Complete Dentures	Watt and Maggregor
27	Atlas of complete denture	Passamonti
28	Fundamental of complete denture prosthodontics	Shillingburg
29	Essentials of complete denture Prosthodontics	Coinkler
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Removable Partial Prosthodontics

SI.	Title	Author
No		
1	Removable Partial Prosthodontics	Mc Cracken's

2	Clinical Removable Partial Prosthodontics	Sterward
3	Color atlas of dental medicine	
4	Removable Partial Prosthodontics	George Graber
5	Attachments for Prosthetic Dentistry	Michael Sherring
6	Laboratory procedures forfull and partial dentures	Derek Stannought
7	Fundamentals of removable partial dentures	Owen
8	Designing partial dentures	David
9	Advanced removable partial dentures	James Brudvik
10	Partial dentures Singer	
11	Restoration of partially dentate mouth	Bates
12	Removable partial denture construction	Bates
13	Treatment of partially edentulous patients	Boucher and
		Renner
14	Introduction to removable denture prosthetics	Grant and Johnson
15	Partial removable prosthodontics	Kratochvil
16	Partial denture prosthetics	Neill and Walter
17	Removable partial denture laboratory manual	Reitz and
		Yokoyama
18	Removable partial dentures	Renner and
		Boucher
19	Removable partial dentures	Taylor
20	Prosthodontic treatment of partially edentulous patients	Zarb
21	Atlas of removable partial denture design	Starrttpm
22	Removable partial denture	Grassoand Miller
23	Precision attachments in prosthodontics	Preiskel

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- 2. The periodontium by Schroeder
- 3. Periodontal Ligament by Berkovitz
- 4. Contemporary Periodontics by Geneo R. J. and. Cohen S.

- 5. Periodontics by Grant, Stern and Listgarten
- 6. Periodontal regeneration-current concepts-further directions by Aban Poison
- 7. Periodontal Instrumenarium by Gill and Ginger
- 8. Periodontitis in man and other animals by Page and Schroeder
- 9. Crevicular fluid updated by Cimason
- 10. Colour Atlas of Periodontal surgery by Cohen E.
- 11. Colour Atlas of Periodontal surgery by Cohen E.
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II. Oral & Maxillofacial Surgery

- 1. Principles of Oral & Maxillofacial Surgery; Vol. 1,2 & 3; Peterson I.J & etal.
- 2. Rowe and Williams Maxillofacial injuries Vol. 1 & 2; Williams Ilied
- 3. Handbook of Medical emergencies in the dental office; Malamed S.F.
- 4. Plastic surgery; Vol. 1 5; McCarthy JG
- 5. Cancer of the face and mouth; McGregor IA & Mc
- 6. Oral & Maxillofacial Surgery Vol. 1 & 2; Laskin DM
- 7. Oral & Maxillofacial Trauma; Vol 1 & 2; Fonseca RJ & Davis
- 8. Oral & Maxillofacial infections; Topazian RG & Goldberg MH
- 9. Surgical correction of dentofacial deformities Vol 1,2 & 3; Bell WH & etal
- 10. Surgery of the mouth and jaws; Moore JR.
- 11. Dentofacial deformities:integrated orthodontic and surgical correction; Vol 1 to 4; Epker BN & Fish LC
- 12. Maxillofacial Surgery; Peter Wardbooth

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- 1. Fractures of the teeth, prevention and treatment of the vital and non-vital pulp by Basrani
- 2. Textbook of operative dentistry by Baum
- 3. Dentin and pulp in restorative dentistry by Brannstorm
- 4. Principles and practice of operative dentistry by Charbeneau
- 5. Operative dentistry by Gilmore
- 6. Esthetic composite bonding by Jordan

- 7. Operative dentistry: modem theory and practice by Marzook
- 8. Art, science and practice of operative dentistry by Sturdevant
- 9. Atlas of operative dentistry pre clinical and clinical procedures by Evans & Wetz
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- 11. Handbook of clinical Endodontics by Bence.
- 12. Pathways of the pulp by Cohen & Burns
- 13. Bleaching teeth by Feinman
- 14. Endodontic practice by Grossman
- 15. Problem solving in Endodontics, prevention, identification and management by Gutmann
- 16. Endodontics in clinical practice by Harty
- 17. Endodontics by Ingle & Taintor
- 18. Endodontics- science and practice by Schroeder
- 19. Endodontology biologic considerations in Endodontic procedures by Seltzer
- 20. Restoration of the endodontically treated tooth by Schillingberg & Kessler
- 21. Principles and practice of Endodontics by Walton & Torabinejad
- 22. Endodontic therapy by Weine
- 23. Colour atlas of Endodontics by Messing & Stock
- 24. The dental pulp by Seltzer & Bender
- 25. Experimental Endodontics by Spangberg
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- 28. Glass lonomer cement by Wilson & Mcclean
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- 31. Color atlas and text of Endodontics by Stock
- 32. Why root canal therapy? By Berns 1986.
- 33. Contemporary esthetic dentistry- practice fundamentals by Crispin 1994
- 34. Enamel micro abrasion by Croll 1991
- 35. Advances in Glass lonomers by Davidson 1991
- **36**. Complete dental bleaching by Goldstein 1995
 - 37. Fiber reinforced composite in clinical dentistry by Freilich 2000
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- 40. Esthetic approach to metal ceramic restorations by Muterthies 1990
- 41. Life and times of GV. Black by Pappas 1983
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- 46. Operative dentistry by Marzook 1996
- 47. Inlays, crowns and bridges by GF.Kantorowicz 19.93

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- 2. GRABER & VANARSDALL, Orthodontics Current Principles & Techniques
- 3. MOYERS, Text Book of Orthodontics
- 4. GRABER, Orthodontics Principles and practice.
- 5. GRABER, PETROVIC, & RAKOSI Dentofacial Orthopedics with Functional Appliances
- 6. ATHENASIOU E ATHENASIOU, Orthodontic cephalometry
- 7. JACOBSON, Radiographic Cephalometry
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- 9. ENLOW, Handbook of Facial Growth
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- 11. PROFFIT & WHITE, Surgical Orthodontic Treatment
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- 15. LOU NORTON &DAVIDOWITCH, Biology of tooth movement
- 16. GERHARD PFIEFER, Craniofacial Abnormalities and clefts of thelip, Alveolus and Palate.
- 17. OKESON, TMJ Disorders.

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- 2. LEE GRABER, Orthodontics State of the Art-
- 3. The Essence of Science
- 4. NIKOLAI, Bio Engineering Analysis of Orthodontic Mechanics
- 5. M. RAKOSI & GRABER, A Color Atlas of Dental Medicine
- 6. BURSTONE, Modern Edgewise Mechanics and Segmented Arch Technique
- 7. W J CL ARK, The Twin Block Functional Thepary
- 8. McNAMARA & BRUDON, Mixed Dentition
- 9. R D ROBLEE, Interdisciplinary Dentofacial Therapy
- 10. NANDA, The Developmental Basics of Occlusion and Malocclusion
- 11. TIMMS, Rapid Maxillary Expansion
- 12. WILLIAMS & COOKS, Fixed Orthodontic Appliances
- 13. RICKETTS, Bioprogresssive Therapy
- 14. VAN DER LINDEN, Quintessence Series
- 15. MICHIGAN CENTER, Craniofacial Growth Series for human growth and Development
- 16. SALZMAN, Practice of Orthodontics Vol II and I
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- 18. SCHWIDLING, The Jasper Jumper
- 19. ROBERT RICKETTS, Provocations and preceptions in Craniofacial Orthopedics

ORAL PATHOLOGY

I. Oral Anatomy, Histology & Physiology & Biochemistry

- 1. Oral Histology, development, structure & function A Color atlas & text book of Oral Anatomy, histoLogy & embryoLogy A.R.Tencate
- 2. B.K.B.Berkovitz, GR.Holland & B.J.Moxham
- 3. Ham's HistoLogy -David.H.Cormaek
- 4. AppLied OraL PhysioLogy Lavelle

5. Basic & AppLied DentaL Biochemistry - R.A.D.WiLLiams & J.C.Elliot

II. Microbiology, Immunology & Basic Molecular Biology & Genetics

- 1. Text book of Microbiology R.Ananthnarayan & C.K.J.Paniker
- 2. Essential Immunology-Ivan.M.Roitt
- 3. Immunology of OraL diseases -Thomas lehner
- 4. OraL Microbiology & Immunology-Newman & Nisengard
- 5. PCR a practical approach Me Pherson, Quirke P & TayLor
- 6. MoLecuLar Cloning a Laboratory manual Sambrook J, FriLsch E.F & Maniafjs

III. Physiology

1. Review of Medical Physiology - Ganong

IV. General Pathology & Haematology

- 1. Cell, tissue & Disease Wolf
- 2. Robbin's pathologic basis of disease Cotran, Kumar & Robbins
- 3. Clinical Haematology R.D.Eastham

V. Oral Medicine & Radiology

- 1. Burket's Oral Medicine Lynch, Brightman & Greenberg
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VI. Oral Pathology & Forensic Odontology & Histopathology Techniques.

- 1. A Text Book of Oral Pathology -Shafer W.G, M.K.Hine & B.M.Levy
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- 5. Color atlas of Oral disease, Clinical & Pathologic Correlations Cawson R.A, Binnie W.H, J.H.Eveson
- 6. Atlas & text of pathology of tumours of the oral tissues R.B.Lucas
- 7. Evan's histological appearances of tumours -David B.Ashley
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- 11. Surgical Pathology of Salivary Glands Ellis, Auclair, Gnepp
- 12. Syndromes of Head & Neck Smith.D.W
- 13. Forensic Dentistry Cameroone J.M, Sims
 - 1. Dentistry, dental practice and community by Striffler DF
 - 2. Primary preventive dentistry by Harris N & Christen AG
 - 3. Community dental health by Jong AW
 - 4. Principles of dental public health vol I part 1 &2 vol 2 by Dunning JM
 - 5. Dental public health: an introduction to community dentistry by Slack G.L.
 - 6. Fluoride in dentistry by Fejerskar Ok & Etal Ed
 - 7. Fluorides & dental caries by Tiwari A
 - 8. Text book of preventive and social medicine by Mahajan BK & Gupta Mc
 - 9. Dental health education by Who Expert Committee
 - 10. Metabolism and toxicity of fluoride vol I by Whitford GM.
 - 11. Epidemiology bio-statistics and preventive medicine by Jekel JF & Etal
 - 12. Introduction to oral preventive medicine: a programme for the first clinical experience by Muhlemann HR
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 - 21. Oxford text book of public health vol.3 by Holland WW & Et Al
 - 22. Guidelines for drinking water quality vol 1 recommendations by WHO
 - 23. Introduction to Bio-statistics by Mahajan B.K.

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- 25. Dentistry, dental practice and the community by Burt BA & Et Al
- 26. Occupational hazards to dental staff by Scully C
- 27. Forensic dentistry by Cameron JM
- 28. Research methodology: methods & techniques Kothari R
- 29. Law & ethics in dentistry by Shear J & Walters L
- 30. Health research methodology: a guide for training in research methods (western pacific education in action series no.5) by WHO
- 31. Community oral health by Pine CM
- 32. Park's text book of preventive and social medicine by Park K
- 33. Epidemiology, bio-statistics and preventive medicine by Katz Dl
- 34. Oral health surveys basic methods by WHO
- 35. Essentials of preventive and community dentistry by Peter S
- 36. Fluorides in caries prevention by Murry Jl ED
- 37. Preventive dentistry by Forrest John 0
- 38. Fluorine and fluorides: a report by World Health Organisation
- 39. Planning and evaluation of public dental health services: a technical report by World Health Organization
- 40. Prevention methods and programmes for oral diseases: a technical report by World Health Organization
- 41. Community periodontal index of treatment needs development, field-testing and statically evaluation by World Health Organization
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- 43. Guide to epidemiology and diagnosis of oral mucosal diseases and conditions by World Health Organization
- 44. Community dentistry (pgd hand book series vol 8) by Silberman SI & Tryon AF.ED.

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- 2. Kennedy's Pediatric Operative Dentistry Kennedy & Curzon.
- 3. Occlusal guidance in Pediatric Dentistry Stephen H. Wei.
- 4. Clinical Use of Fluorides Stephen H. Wei.
- 5. Pediatric Oral & Maxillofacial Surgery Kaban.
- 6. Pediatric Medical Emergencies P. S. whatt.
- 7. Understanding of Dental Caries Niki Foruk.
- 8. An Atlas of Glass lonomer cements G J. Mount.
- 9. Clinical Pedodontics Finn.
- 10. Textbook of Pediatric Dentistry Braham Morris.
- 11. Primary Preventive Dentistry Norman 0. Harris.
- 12. Handbook of Clinical Pedodontics Kenneth. D.
- 13. Preventive Dentistry Forrester.
- 14. The Metabolism and Toxicity of Fluoride Garry M. whitford.
- 15. Dentistry for the Child and Adolescence Mc. Donald.
- 16. Pediatric Dentistry Damle S. G
- 17. Behaviour Management Wright
- 18. Pediatric Dentistry Mathewson.
- 19. Traumatic Injuries andreason.
- 20. Occlusal guidance in Pediatric Dentistry Nakata.
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- 22. Contemporary Orhtodontics Profitt.
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- 24. Endodontics-Ingle.
- 25. Pathways of Pulp Cohen.
- 26. Management of Traumatized anteriorTeeth Hargreaves.
- 27. Essentials of Community & Preventive Dentistry Soben Peters.
- 28. Post graduate hand book by Barber
- 29. Scientific foundation of Pediatric Dentistry by Stewart and Barber

- 30. Diet and Nutrition in dentistry by Rutgunn
- 31. Preventive Dentistry by Murray.

ORAL MEDICINE AND RADIOLOGY

a)	Oral Diagnosis, Oral Medicine & Oral Pathology
1.	Burkit - Oral Medicine - J.B. Lippincott Company
2.	Coleman - Principles of Oral Diagnosis - Mcsby Year Book
3.	Jones - Oral Manifestations of Systemic Diseases - W.B. Saunders company
4.	Wood and Goaz - Differential diagnosis of Oral Lesions - Mosby Year Book
5.	Langlais - Oral Diagnosis / Oral Medicine and Treatment planning Lea & Febiger & Waverly Co.,
6.	Mitchell - Oral Diagnosis & Oral Medicine
7.	Pindburg- Syndromes of the Head & Neck
8.	Stones - Oral Diseases
9.	Irwin Walter Scopp - Oral Medicine
10.	Kerr - Oral Diagnosis
11.	Miller - Oral Diagnosis & Treatment
12.	Bennier - Differential diagnosis & Oral Lesions
13.	Munford - Orofacial pain
14.	Bell - Oral facial pain
15.	Tullmen - Systemic diseases in Dental Treatment
16.	Mean - Diseases of the Mouth
17.	Hutchinson - clinical Methods
18.	McCleods - Clinical Examination
19.	Chamberlin - Symptoms & Signs of Clinical Medicine
20	Davidson - Principles and : ctice of Medicine

21. Harrison - Principles of Interns Medicine 22. Schweitner - Oral Rehabilitation problem cases 23. Burkhardt - Oral Cancer 24. Dolby - Oral Mucosa in Hearth & Diseases 25. Sonis.S.T, Fazio.R.C. and Fang.L - Principles and practice of Oral Medicine 26. Nally F.F. and Eggleston.D. J. - A Manual of Oral Medicine 27. Prabhu.S.R. et al - Oral Diseases in the Tropics 28. Samaranayake L.Ret al - Oral Candidos is b) **Oral Radiology** 1. White & Goaz - Oral Radiology - Mosby year Book Weahrman - Dental Radiology - C.V. Mosby Company 2. 3. Stafne - Oral Roentgenographic Diagnosis - W.B.Saunders Co., 4. Langlairs - Diagnostic Imaging of the Jaws - William & Wilkins Smith - Dental Radiography - Blackwell Scientific Publication 5. Eric Whaites - essentials of Dental Radiography - Churchill Livingstone 6. 7. Sonis.S.T., Fazio.R.C. and Fang.L - Principles and practice of Oral Medicine 8. Malamed S.F. - Book of Medical Emergencies in the Dental 9. Cawson.R.A. and Scully CM. - Medical Problems in Dentistry 10. Pindborg.J.J. - Atlas of diseases of the oral mucosa 11. Linch M.A. - ET'S Oral Medicine, Diagnosis and Treatment

- 12. Dayal P.K. Text book of Oral Medicine
- c) Forensic Odontology
- 1. Derek H.CLark Practical Forensic Odontology Wright
- 2. Cottone Standish Outline of Forensic Dentistry
- 3. Whittaker A colour atlas of Forensic Dentistry

JOURNALS:

The journals are best source of information for professionals to keep abreast with the recent developments and trends in their respective specialties. Considering the array of journals that are available today the council xjesires that !he institutions provide as a minimum requirement the list of journals mentioned below:

Pertaining to Dental education and practice.

- 1. Journal of Indian Dental Association
- 2. British Dental Journal
- 3. Journal of American Dental Association
- 4. Journal of Dentistry
- 5. Dental Clinics of North America
- 6. Journal of Dental Education
- 7. Dental Abstracts
- 8. Journal of Dental Research
- 9. Dental Index '
- 10. Quintessence International
- 11. International Dental Journal
- 12. Australian Dental Journal

- 13. Journal of dental materials
- 14. Journal of aesthetic dentistry
- 15. Journal of cleft palate

PROSTHODONTICS

- 1. International Journal of Oral & Maxillofacial Implants
- 2. International Journal of Prosthodontics
- 3. Journal of Dental Materials
- 4. Journal of Esthetic Dentistry
- 5. Journal of Geriatric Dentistry
- 6. Journal of Prosthetic Dentistry
- 7. Journal of Prosthodontics
- 8. International Journal of Oral & MaxiLLofacial Surgery
- 9. Journal of ClinicaL PeriodontoLogy.
- 10. Journal of PeriodontoLogy.
- 11. Dental Technician.
- 12. Journal of Endodontics.
- 13. European Journal of Prosthetics & Restorative Dentistry.
- 14. The Journal of Adhesive Dentistry.
- 15. International Journal of Endodontics.
- 16. Journal of OraL & MaxillofaciaL Surgery

PERIODONTICS

- 1. Journal of periodontoLogy
- 2. Journal of clinicaL periodontoLogy
- 3. Journal of periodontal Research
- 4. International journal of periodontics
- 5. Journal of Indian Society of periodontics
- 6. Journal of oral and maxillofacial implants
- 7. Periodontology 2000
- 8. Annals of periodontology

ORAL & MAXILLOFACIAL SURGERY

- 1. Journal of Oral & MaxillofaciaL Surgery
- 2. International Journal of OraL & Maxillofacial Surgery
- 3. Journal of Cranio Maxillofacial Surgery
- 4. British JournaL of Oral & Maxillofacial Surger
- 5. Oral, Surgery, Oral Medicine, Oral Pathology
- 6. Oral & Maxillofacial clinics of North America
- 7. Journal of oro-facial pain
- 8. Int. Journal of Oral & Maxillofacial Implants
- 9. Indian Journal of Oral & Maxillofacial Surgery
- 10. Plastic & Reconstructive Surgery
- 11. Cancer

CONSERVATIVE DENTISTRY

- 1. Endodontics & Dental Traumatology
- 2. International Endodontic Journal
- 3. Operative Dentistry
- 4. Esthetic Dentistry
- 5. Endodontology
- 6. Dental Materials
- 7. OraL Surgery, Oral Medicine, Oral Pathology
- 8. Oral Radiology & Endodontics
- 9. Journal of Prosthetic Dentistry
- 10. International Journal of Prosthetic Dentistry
- 11. Periodontics & Restorative Dentistry
- 12. Index to Dental Literature

ORTHODONTICS

- 1. American Journal of Orthodontics and Dentofacial Orthopedics
- 2. Journal of Orthodontics (formerly British Journal of Orthodontics)
- 3. Angle Orthodontics
- 4. Journal of Clinical Orthodontics
- 5. JournaL of Indian Orthodontic Society
- 6. Seminars in Orthodontics
- 7. Journal of Orthodontics and Dentofacial Orthopedics

- 8. European Journal of Orthodontics
- 9. Australian Journal of Orthodontics
- 10. International Journal of Adult Orthodontics and Orthognathic surgery
- 11. The Functional Orthodontist.

ORAL PATHOLOGY

- 1. Journal of Oral Pathology
- 2. Journal of Oral Medicine, Oral Surgery, Oral Pathology
- 3. Journal of Oral and Maxillofacial Surgery
- 4. British journal of Oral and Maxillofacial Surgery
- 5. International journal of Oral and Maxillofacial Surgery
- 6. Journal of Craniofacial surgery
- 7. Cancer

COMMUNITY DENTISTRY

- 1. Journal of Community Dentistry and Oral Epidemiology
- 2. Journal of Public Health Dentistry
- 3. Fluoride Journal of International Society
- 4. Journal of Community Dental Health
- 5. Journal of Fluoride research
- 6. Journal of clinical preventive dentistry

PEDODONTICS & PREVENTIVE DENTISTRY.

- 1. ASDC Journal of Dentistry for children.
- 2. International Journal of Pediatric Dentistry
- 3. Pediatric Dentistry
- 4. Journal of Indian Society of Pedodontics & Preventive Dentistry

ORAL MEDICINE AND RADIOLOGY

- 1. Journal of Oral Pathology/Oral Medicine and Radiology/Oral Surgery
- 2. Journal of Oral Diseases
- 3. Journal of Oral Pathology / Medicine
- 4. Journal of Community Dentistry & Oral Epidemiology
- 5. Journal of Indian Academy of Oral Medicine and Radiology
- 6. Journal of Indian association of Oral Pathology

EQUIPMENTS DEPARTMENT: PROSTHODONTICS AND CROWN & BRIDGE

S. No.	NAME	SPECIFICATION	Qua	ntity	Availability
1.	Electrical Dental Chairs and Units	With shadowless lamp, spittoon, 3 way syringe, instrument tray and motorized suction, micromotor and airotor attachment with handpieces.	per PG and tw with un fac	ir and unit is student to chairs it for the ulty.	
			1 Unit	2 Units	
2.	Articulators – semi adjustable/ adjustable with face bow		6	12	
3.	Micromotor – (Lab Type can also be attached (fixed) to wall		2	4	
4.	Ultrasonic scaler		2	2	
5.	Light cures		2	2	
6.	Hot air oven		1	1	
7.	Autoclave		2	2	
8.	Surveyor		2	2	
9.	Refrigerator		1	1	
10.	X-ray viewer		1	2	
11.	Pneumatic, Crown bridge remover		2	3	
12.	Needle destroyer		1	2	
13.	Intra oral camera		. ! .	ļ .	
14.	Digital SLR camera		. 1 .	L.	
15.	Computer with internet connection with		- 1	L	
	attached printer and scanner				
16.	1.CD projector			L	
	Clinical Lab for P	rosthetics			
1.	Plaster dispenser		2	2	
2.	Model trimmer with earborandum Disc			2	
3.	Model trimmer with diamond disc			2	
4.	High speed lathe		2	3	
5.	Vibrator			4	
6.	Acrylizer		<u> </u>	2	
7.	Dewaxing unit		<u> </u>	-	
8.	Hydraulic press		1	L	
9.	Mechanical press			L	
10.	Vacuum mixing machine		<u> </u>	L	
11.	Micro motor lab type		2	3	
12.	Curing pressure por		<u> </u>	L	
15.	Pressure molding machine		- 1	't	

Chrome - Cohalt Lab Equipment	F				ļ	l
2. Pindex system	ļ.,		Equipment			
3,				. !	ļ I	
	1	i '		. 1		
S. Sandislaster Micro and macro 1 1 1 1 1 1 1 1 1	- h			. 1	ļ l	
1 1 1 1 1 1 1 1 1 1	La Company				<u> </u>	
Model trimmer with diamond disc	5.		Micro and macro	. 1] [
Model trimmer with double disc one Carborandian and one diamend disc)	6.			. 1] [
Model triumer with doable disc tone Carborandum and one channend dose) 1 1 1 1 1 1 1 1 1	7.	Model trimmer with carborandum disc		1		
Carborandum and ene deamond dase) 1	[8,	Model trimmer with diamond disc		1] [
Casting machine, motor cast with the safety	9,			1	ı	
1	10.			ı	l l	
Induction casting machine with vacuum pump, expable of casting itanium chrome colucts precision menal	— —					
pump, expable of casting titanium chrome cobult precision metal 12	11.				l.	
cobalt precision metal					l I	
12. Spott welder with soldering, attachment of cable 1						
Cable	12					
13.	12.					
14. Vacuum mixing muchine 1	13.			100	i L	
15. Spindle grinder 24,000 ROM with vacuum 1 1 1	- It			1 i	i	
Max. heater	li .			t in	i	
16. Wax heater				•		
18. Milling machine	16.	L		2	3	
19. Stereo microscope	17.	Wax carvers (Full PKT Set)		2	3	
19. Stereo microscope	18.	Milling machine		·		
21. Heavy dary lathe with saction 1 1 1	19.			· I	ı	
21. Heavy dary lathe with saction	20).				ı	
23. Dry model trimmer	21.			<u> </u>	ı	
24. Die cutting machine 1 2 25. Uhrasonic cleaner 1 1 1 1 2 26. Composite curing unit 1 1 1 1 1	22.	Preheating furnace		1	L	
25. Ultrasonic cleaner 1 1 1	23.	Dry model trimmer			L	
Ceramic Lab Equipment	24.	Die cutting machine			2	
Ceramic Lab Equipment	25.	Ultrasonic cleaner			ı	
1. Fully programmable porcelain furnace with vacuum pumps 2. Ceramic kit rinstruments) 3 3 3 3 3 3 3 4 4 4	26.	Composite curing unit			L	
Vacuum pump 2. Ceramic kit (instruments) 3 3 3 3 3 3 4 4 4 4			uipment			
2. Ceramic hit (instruments) 3 3 3 3 4 4 4 4 4 4	1.			1	L	
3. Ceramic materials (kit)]	
4. Ceramic polishing kit 2 2 2				3] 3	
Implant Equipment	3.	Ceramic materials (kit)] 1	j l	
Implant Equipment						
I. Electrical dental chair and unit 1 1 2. Physio dispenser 1 1 3. Implant kit Minimum 2 systems 2 2 4. Implants 10 10 5. Prosthetic components 10 10 6. Unit mount light cure 1 2 7. X-ray viewer 1 2 8. Needle destroyer 1 2 9. Ultrasonic cleaner capacity 3.5 lts 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Sungical kit/prosthetic kit 2 2 14. Educating models 1 1	4.			2		
2. Physio dispenser 1 1 3. Implant kit Minimum 2 systems 2 2 4. Implants 10 10 5. Prosthetic components 10 10 6. Unit mount light core 1 2 7. X-ray viewer 1 2 8. Needle destroyer 1 2 9. Ultrasonic cleaner capacity 3.5 hs 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Sungical kit/prosthetic kit 2 2 14. Educating models 1 1	10		ment			
3. Inoplant kit Minimum 2 systems 2 2 4. Implants 10 10 5. Prosthetic components 10 10 6. Unit mount light cure 1 2 7. X-ray viewer 1 2 8. Needle destroyer 1 2 9. Ultrasonic cleaner capacity 3.5 hs 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Sungical kit/prosthetic kit 2 2 14. Educating models 1 1				. ! .	- ! -	
4.			and the second second		-	
5. Prosthetic components 10 10 6. Unit mount light cure 1 2 7. X-ray viewer 1 2 8. Needle destroyer 1 2 9. Ultrasonic cleaner capacity 3.5 lts 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Sungical kit/prosthetic kit 2 2 14. Educating models 1 1			Minimum 2 systems			
6. Unit mount light cure 1 2 7. X-ray viewer 1 2 8. Needle destroyer 1 2 9. Ultrasonic cleaner capacity 3.5 hs 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Sungical kit/prosthetic kit 2 2 14. Educating models 1 1	+ + -					
7. X-ray viewer 1 2 8. Needle destroyer 1 2 9. Ultrasonic cleaner capacity 3.5 lts 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Surgical kit/prosthetic kit 2 2 14. Educating models 1 1		-		. 177		
8. Needle destroyer 1 2 9. Ultrasonic cleaner capacity 3.5 hs 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Surgical kit/prosthetic kit 2 2 14. Educating models 1 1	-0.					
9. Ultrasonic cleaner capacity 3.5 lts 1 1 10. Autoclave programmable for all recommended cycles 1 2 11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Surgical kit/prosthetic kit 2 2 14. Educating models 1 1				 -		
10. Autoclave programmable for all recommended cycles 11. X-ray machine with RVG 1 1 1 1 1 1 1 1 1				<u> </u>	 -	
1				<u> </u>	7	
11. X-ray machine with RVG 1 1 12. Refrigerator 1 1 13. Sungical kit/prosthetic kit 2 2 14. Educating models 1 1	677.				_	
12. Refrigerator 1 1 13. Surgical kit/prosthetic kit 2 2 14. Educating models 1 1	11.				1	
13. Singleal kit/prosthetic kit 2 2 14. Educating models 1 1		-				
14. Educating models 1 1					7	
				Ī.		
	15.	Implant removing instruments			Ι.	

$\underline{DEPARTMENT: PERIODONTOLOGY}$

S. No.	NAME	SPECIFICATION	Qua	Quantity	
I.	Dental Chairs and Units	shadowless lamp, spittoon, post-gra 3 way syringe, instrument Two ch	ittoon, ment uction, ent ite		
			1 Unit	2 Units	
2.	Auto clave (fully automatic) front loading	-	l I	3	
3.	Steel bin		4	6	
4.	Airoter hand pieces	_	2	2	
5.	UV chamber		I	I	
6.] Formalin chamber	•	1	1	
7.	W.H.O probe	•	2	2	
8,	Nabers probe		2	2	
9.	Williams probe		2	2	
10.	UNC-15 probe	-	4	4	
TL.	Gold Man fox probe		1	I	
12.	Pressure sensitive probe		I	I	
13.	Marquis color coded probe		I	I	
144,	Supra gingival scalers	set	2	3	
15.	Sub-gingival scaler	sgl	2	2	
16.	Arkan sas sharpening stone		I		
	Surgical Inst	ruments			
T.	Routine surgical instrument kit (Benquis periosteal elevator, periotome)	set	2	3	
2.	Surgery trolleys	- -	6	6	
3.	X ray viewer		1	2	

4.	Surgical cassette with sterilisation pouches		4	6	
5.	Electro surgery unit		1	1	•
		Special Surgical Instru	ments		-
1.	Kirkland's knife	set	<u> </u>	1	
2.	Orban's knife	set	. 1	1	
3	Paquette blade handle		1	I	
4.	Krane kaplan pocket marker	set	i I	1	
5	Me Calls universal curettes	Set	1	1	
6.	Gracey's curettes (No.1-18)	set	2	2	
7.	Mini five curettes	Set	<u> </u>	1	
8.	Cumine scalar		1	1	
9.	Mallet		· I	1	
10.	Clusel		100	1	•
11.	Oschenbein chisel	straight, curved	<u> </u>	1	
12.	Schluger bone tile		<u> </u>	1	
13.	Bone fixation screw kit		<u> </u>	1	
14.	Bone scrapper		<u> </u>	1	
15.	Bone trephines for harvesting autografts	1 set	i I	1	
16.	Bone regenerative materials	Bone graft and GTR membranes	5	5	
17.	Local drug delivery systems	At least two different agenty	Leach	1	
18.	Root conditioning agent	At least two different agents	2	2	
19.	Micro needle holder			1	
20,	Micro scissors		100	1	
21.	Magnifying loop (2.5 - 3.5)		 	2	
22.	Operating microscope	optional	4 P		
23.	3 st generation digital probe	optional	· ·		
24.	Bone expander and hone crester	optional	· · · · · · · · · · · · · · · · · · ·	'	
25.	Distraction osteogenesis kn	optional	. 1		
26.	Bone mill	optional	1	T I	
27.	Bone graft / membrane placement spoon		· I	I	
28.	Bone condenser		· I	1	
20.	Peizo-surgery unit	optional	100	1	1
30.	Centrifuge for PRP/PRF	optional	· I	1	
31.	preparation Soft (issue laser (8 watt)			1	
32.	Osteotome	Net .	· I		
· Camer	V. 2004 (1904) (1916)		'	'	
	MISCELLANEOUS IX	optaonal			

Ι.	Composite gun with material kit		T.	I	
2.	Splinting kit with material	•	2	.3	•
ŝ.	Composite finishing kit	•	I	L	
4,	Glass Ionomer cement	•	1	ı	
5.	Digital camera		П	I.	
6,	Intra Oral camera	•	1	ı	
7.	Ultrasonic cleaner	*	П	I.	
8.	Emergency kit	•	1	I	
9.	Refrigerator	1	' I	I.	
10.	X-ray viewer	*	2	2	
Hi.	LCD projector	•	, I	I.	
12.	Computer with internet connection with attached printer and scanner		1	I	
1,3.	Implant Equipment		•		
14,	Effectiveal dental chair and unit		Ī	I	
ı	Physio dispenser	•	1	ı	•
15.	Implant kit	At least two different systems	2	2	
16.	Implants	*	10	10	
17.	Implant maintenance kit (plastic instruments)	-	1 ser	1 ser	
18.	Implant guide		ı	I	
19.	X-ray viewer	*	ĺ	2	
20.	Needle destroyer		, I	2	
21.	Ultrasonic elemen capacity 3.5 lts	-	I	I.	
22.	Autoclave programmable for all recommended cycles		ı	I	
23.	RVG with x-ray machine		I	l.	
24.	Refrigerator	•	ı	L	
25.	Surgical kit	•	2	2	
26.	Sinus lift kit	*	ı	L	
27.	Fiducating models	•	1	ı	
28.	Implant removing kit		I	I.	

$\underline{\textbf{DEPARTMENT: ORAL \& MAXILLOFACIAL SURGERY}}$

S.No.	NAME	SPECIFICATION	Quar	itity	A vaila bility
l.	Dental Chairs and Units	Electrically operated with shadowless lamp, spittoon, 3 way syringe, instrument tray and high otorized suction,	One chair at post-gradua and Two cha for the f	ite student irs with unit	
	with micromotor and micro motor attachment	I Unit	2 Units		

2.	Autoclave	Front loading	2	3 [
3.	Funigators			I	
4.	Oscillating saw	With all hand pieces pieces	ı	I	
5.	Surgical instruments General surgery kit including tracheotomy kit Minor oral surgery kit Osteotomy kit		2 5	2 10	
	Cleft surgery kit		· i	· ·	
	Bone grafting kit		1	1 1	
	Emergency kit Trauma set including bone plating kit		1	1	
	Implantology kit with implants		2	2	
			1	1	
		Minimum 2 systems	2	2	
			10	10-	
6	Distraction osteogenesis kit			I	
7.	Peizo surgical unit		I	I	
8,	Magnifying loops		1		
9.	Operating microscope and Microsurgery kit	desirable		I	
10),	Dermatomes		1	l l	
11.	Needle destroyer		2	3	
12.	Ultrasonic Cleaner capacity 3.5 hs		1		
13.	Formalin chamber			I	
14.	Pulse oxymeter		I	I	
15.	Ventilator		ı	I	
16.	Major operation theatre with all		1	I	
17.	Recovery and letensive Care Unit with all necessary life support exampments		2 beds	2 heds	
18.	Fibrooptic light		· I	I	
19.	Inpatient beds		20	201	
20.	Fiber optic laryngoscope		1	1	
21.	Computer with internet connection with attached printer and scanner		· I	I	
22.	LCD projector		I	I	
23.	Refrigerator		· I	1	

DEPARTMENT: CONSERVATIVE DENTISTRY AND ENDODONTICS

S.No.	NAME	SPECIFICATION	Quantity	Availability
1.	Dental Chairs and Units	Electrically operated with shudowless lamp, spittoon. 3 way syringe, instrument tray and motorized	One chair & unit per post-graduate student and two chairs with unit for the faculty	

		suction, micromotor, anotor attachment with hand pieces	I Unit	· 2 Units]
2.	ENDOSONIC HANDPIECES Micro endosonic Tips, retro-		2	3	
3.	Mechanised rotary instruments including hand pieces (speed and torque control) and hand instruments various systems	•	ļ	6	
ļ.,	Rubber dam kit	•	I per chair	1 per chair	
5.	Autoclaves for bulk instrument sterilization vacuum (Front loading)		<u>*</u>	3	
ñ.	Autoclaves for hand piece sterilization	-	I	1	
7.	Apex locators one for every two chairs		2	4	
8.	Pulp tester		2*	4	
9.	Equipments for injectable thermoplasticized gutta percha		ı	2	
10.	Operating microscopes 3 step or 5 step magnification	•	1	1	
11.	Surgical endo kits (Microsurgery)	•	2	2	
12.	Set of hand instruments (specifications required)	*	1	2	
1.3.	Sterilizer trays for autoclaye	1	4	4	
14.	Ultrasonic cleaner capacity 3.5 lts	•	' I	1	- '
15.	Variable Intensity polymerization equipments - VLC units	Desirable	l	1	-
16.	Conventional VLC units one for every two chairs	•	2	. 4	
17.	Needle destroyer		2*	2	
18.	Magnifying loupes one for students and one for faculty		1	2	
[19,	LCD projector	•	1	1	•
20.	Composite kits with different shades and polishing kits		3	-1	
21.	Ceramic timshing kits, metal finishing kits	In ceramic labs	<u>+</u>	3	
22.	Amalgam finishing kits	_	2	3	
23.	RVG with x-ray machine developing kit	•	1	1	
24.	Chair side micro abrasion		I		
25.	Bleaching unit				
26.	Instrument retrieval kits		T		
27.	Computer with internet connection with attached printer and scanner				
28.	Refrigerator		. 1		
29.	Equipments for casting procedures				
[3O,	Equipments for ceramics including induction casting machines/ burnout preheat furnaces/ wax elimination furnaces				
31.	Lab micro motor/ metal grinders / sand blasters/ polishing lathes/ duplicator equipment/ vacuum investment equipments	-	1	l 	

32.	Laser (preferably hard tissue)	1	I	
33.	Face bow with semi adjustable	1	2	
	articulator			

<u>DEPARTMENT: ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS</u>

S. No.	NAME SPECIFICATION Quantity		ntity	Availability	
l.	Dental Chairs and Unit	Electrically operated with shadow less lamp, spittoon, 3 way syringe, instrument tray and motorized suction	PG studen chairs wit the fa	One chair & unit per PG student and Two chairs with unit for the faculty	
2.			I Unit	2 Units	
3.	Vacuum/pressure moulding unit		1	I	
4.	Hydrogen soldering unit		1	1	
5.	Lab inferometer		3	5	
6.	Spot welders		3	5	
7.	Model trimmer (Double disc)		2	3	
8.	Light curing unit		2	2	
9.	High intensity light curing unit		1	2	
10.	Polishing lathes		2	3	
11.	Tracing tables		3	5	
12.	SLR digital camera		1	1	
13.	Scanner with transparency adapter		1	1	
14.	X ray viewer		3	4	
15.	LCD projector		1	ı	
16.	Autoclaves for bulk instrument Sterilization vacuum (Front Joading)		1	ı	
17.	Needle destroyer		1 1	1	Ī
18.	Dry heat sterilizer		1 '	1	Ī
19.	Ultrasonic scaler	ĺ	1	1	
200,	Sets of Orthodontic pliers		3 .	3	Ì
21.	Orthodontic impression trays	ĺ	3	5	
22.	Ultrasonic cleaner capacity 3.5 lts		1	1	
2.5.	Electropolisher		1	1	
24.	Typodonts with full teeth set		3	3	
25.	Anatomical articulator with face bow attachments		1	I	
264.	Free plane articulators		1 '	1	I
27.	Hinge articulators	Į į	1 4	-4	I
28.	Computer software for cephalometries		1 '	ı	
29.	Computer with internet connection with attached printer and scanner		1	I	
310.			. , .		†
304,	Refugerator		٠,		

DEPARTMENT: ORAL & MANIILOFACIAL PATHOLOGY AND ORAL MICROBIOLOGY

S. No.	NAME	SPECIFICATION	Q	uan tity	Availability
			I Unit	2 Units	
I.	Dental Chairs and Units	Electrically operated with shadow less lump, spittoon, 3 way syringe, instrument tray and suction	_3	6	_

2.	Adequate laboratory glassware's as required for processing of biopsy specimens	Reasonable quantity should be made available			
	and staining.				
3.	Adequate tissue capsules / tissue embedding cassettes	Reasonable quantity should be made available			
4,	Paraffin wax bath	thermostatically controlled	1	1	
5.	Leuckhart pieces		10	10	•
6.	Block holders		25	25	
7.	Microtome	Manual	1	1	
7. 8.	Microtome	semi automated	1	1	
9.	Tissue floatation water both	thermostatically controlled	1	1	
10	Stide warming table		1	1	
111	Steel slide racks for staining		5	1.5	•
12	Diamond glass marker		2] 5 2	•
13	Research microscope with phase contrast, dark field, polarization, image analyzer, photomerography attachments	•	1	1	
14.	Multi head microscope	Penta headed	1	1	
15.	Binocular compound microscope		2 for faculty and one per student	4 for faculty and one per student	
16.	Stereo microscope		1	1	
17.	Aluminum slide trays		5	5	
18.	Wooden / plastic slide boxes		5	5	
19.	Wax block storing cabinet		5,000	10,000	
			capacity		
20.	Slide storing cabinet		5,000 capacity	capacity 10,000 capacity	
21.	Refrieerator		1	1	
22.	Pipettes		5	5	
2.3.	Surgical kit for biopsy		3	6	
24.	In mano histo chenústry lab		T	1	
25.	Computer with Internet Connection with attached or inter and scanner		I	1	•
26.	LCD projector		1	1	-
27.	Desirable Equipment		'	_ =	
28.	Cryostal			1	-
29.	Fluorescent microscope		l i	* <u>i</u>	
30.	Hard ti sage microtome		i	† i	
31.	Tissue storing cabinet (frozen)		T i	1	•
32.	Microwave		İ	1	

DEPARTMENT: PUBLIC HEALTH DENTISTRY

S. No.	NAME	SPECIFICATION	Quantity	Availability
	Instruments in the d	epartment for comprehensive Oral programme	health care	
1.	Dental chairs	Electrically operated with shadowless lamp, spittoon, 3 way syringe, instrument tray and motorized suction, micromotor attachment	One chair and unit per post graduate student and one chair with unit for	

		with contra angle handpiece, airoter affachment, ultrasonic scaler (Piezo) with detachable autoclayable hand piece with min 3 tips.	the faculty		
3.	Extraction forceps		1 Unit 4 sets	2 Units 6 sets	
4,	Filling instruments		4 sets	6 sets	
5.	Scaling instruments	Supra gingival scaling	4 xetx	6 xeb	
(t)	Amalgamator		I	1	
7.	Pulp tester			1	
8.	Autoclave		I	1	
9.	X ray viewer		I	1	
10.	Instrument cabinet		ı	1	
11,	LCD or DLP multimedia projector			1	
	Computer with internet connection with attached printer and scanner		i	1	
13.	For peripheral de	ntal care or field programm	ic		
14.	Staff bus		1	1	
15.	Mobile dental clinic fitted with at least 2 dental chairs with complete dental unit with five extinguisher		, ,	1	
16.	Ultrasonic scaler,			3	
17.	Ultrasome 'cleaner capacity 3.5'		1	1	
18.	Compressor	One with chair			
19.	Generator		l l	1	
20.	Public address system, audio- visual aids		1	1	
21.	Television		1	1	
22.	Digital Versatile Disc Player		ı	1	
23.	Instrument cabinet, emergency medicing kits, Blood pressure apparatus		1	1	
24.	Portable oxygen cylinder		İ ' :	1	
25.	Portable chair		1	1	
26.	Refrigerator		j '	1	

DEPARTMENT: PAEDODONTICS AND PREVENTIVE DESTISTRY

S. No.	NAME	SPECIFICATION	Quantity	Availability
1	Dental Chairs and Units	Electrically operated with shadowless lamp, spittoon, 3 way syringe, and motorised suction.	One chair and unit per post-graduate student and Two chairs with unit for the faculty	

		micromotor attachment with contra angle miniature handpiece, airotor attachment with miniature handpiece, dental operator stool (40% dental chairs shall be pedo chars)			
2.	•		1 Unit	2 Units	'
3.	Pedo extraction forceps sets	•	3.	4	
4.	Autoclaves for bulk instrument sterilization vacuum (Front loading)	·	I	2	
5.	RVG with intra oral x-ray unit		I		
6.	Automatic developer		1	 	
7.	Pulp tester	·	2	3	
8	Aprex Jocator	† .	1	1 1	'
9.	Rubber dam kit	One set per student	i	and the first	
10.	Injectable GP corulenser		1		1
11.	Endodontic pressure syringe		i		
12.	Glass bead steriliser	·	2	4	
13.	Spot welder		2		
14.	Ultrasonic scalers		2	4	
15.	Needle destroyer	·	1	i i	
16.	Formalin chamber	† .	1	- i - i - i - i - i - i - i - i - i - i	'
17.	Ultrasonic cleaner capacity 3.5		i	- i - i - i	'
	lis	_			
18.	X-ray wiewer		2	3	
19.	Annalgamaator		<u> </u>	2	
20),	Plaster dispenser		2	2	
21.	Dental lathe		1	2 .	
22.	Vibrator	<u>.</u>	2	3	
2.3.	Typodonts	One set per student	<u> </u>		
24.	Soldering unit		<u> </u>	<u> </u>	
25.	Band pinching beak pliers		2 Sets	2 Sets	
26.	Proximal contouring pilers		2	3 3	
27.	Crown crimping pliers		2	3 1	
28.	Double beak pliers anterior and posterior		2	.3	
29.	Lab micro motor	† ·	2	3 3	
30.	Acryliser		ī	2	
31.	Magnitying loupes		1	ī	
32.	Conscious sedation unit	Desirable	1		
33.	Pulse oxymeter		1	7 (1)	'
34.	Phantorn head table with attached Light, Airotor and micro motor	One set per each P.G. Student	1		,
35.	Computer with internet		1	15 mg 15 mg	
100	connection with attached				
	printer and searmer				
36.	LCD projector		1		
37.	Refrigerator		1	<u> </u>	

DEPARTMENT: ORAL MEDICINE AND RADIOLOGY

S. No.	NAME	SPECIFICATION	Quantity	Availability
T.	Dental Chairs and Units	Electrically operated with shadowless lamp, spittoon, 3 way syringe,	One chair and unit per post-graduate student and one chair with unit	

		instrument tray and suction	for the	faculty	
2.			1 Unit	2 Units	*
Ã.	RVG with intra oral radiography machine (FDA Approved)	55-70 kVp with digital compatibility	I	1	•
4.	Extra oral radiography machine	100 ksp	ı	1	
5.	Panoramic radiography (OPG) machine with cephalometric and TMI attachment with printer	Digital compatibility	I	1	
	Intra-oral camera] 2	
	Pulp tester		2	1 4	
	Autoclave] 1	4
	Punch biopsy tool		2] 3	
	Biopsy equipment		I	2	
	Surgical trolley		2	2	
	Ermergency medicines kit		ı	1	
	Extra oral cassettes with intensifying screens (Conventional and rare earth)		4	6	•
	Lead screens		2	2	
	Lead aprons		2	2	1
	Lead gloves		2	2	
	Radiographic filters (Conventional and rare earth)		ı	1	
	Dark room with safe light facility		I	1	
	Automatic radiographic film processors		2	2	
	Radiographic film storage lead containers		l	1	
	Thyroid collars			1	
	Digital sphygmomanometer		<u> </u>	1 1	
	Digital blood glucose tester		<u> </u>	1 1	*
	Digital camera	ļ	<u> </u>	1 1	
	X-ray wiewer hoses		3	3	•
	Lagrimal probes		2 sets	2 Sgs	•
	Sialography campula		2 sets	2 Sets	•
	Illuminated mouth mirror and probe		2	2	
	Computer with internet connection with attached printer and scanner		'	1	
	LCD projector			1	
	Refrigerator		1	1	•

Note: Any regulations, clause which is not mentioned in the above, shall be as per the DCI – MDS Regulations notified vide ref No. DE-87-2017, Dated 1st September 2017.



September 1, 2022

DSCDS/Internal/OO/2022/ 37

OFFICE ORDER ANNUAL REPORT COMMITTEE

The Annual Report Committee has been reconstituted to collect and compile data for the Annual Report of DSCDS. The term of the committee will be for three years. The members of the committee are as follows:

51. No	Department	Co-coordinator Name
1.	Institution Co-ordinators	Dr. Sarandha DL Dr. Ramnarayan BK
2.	Oral Medicine	Dr. Darshana S Nayak
3.	Public Health Dentistry	Dr. Nayana M
4.	Oral Surgery	Dr. Shavari Shetty
5.	Conservative Dentistry	Dr. Akshata Airsang
6.	Prosthodontics	Dr. Mir Shahid Ulla
7.	Periodontics	Dr. Koduru Sravani
8.	Pedodontics	Dr. Kavitha M
9.	Orthodontics	Dr. Jayanth NR
10.	Oral Pathology	Dr. Vidya MA
11.	Basic Sciences	Mr. Sakthivel Dr. Krishnanand PS
12.	Sports Committee	Dr. Pradeep Chandra K
13.	Cultural Committee	Dr. Ranjini MA
14.	Librarian	Mr. Narasimha Murthy
15.	Office Superintendent	Mr. Venkataramaiah

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April 8, 2021

DSCDS/Internal/OO/2021/ 64

OFFICE ORDER ANNUAL REPORT COMMITTEE

The Annual Report Committee has been reconstituted to collect and compile data for the Annual Report of DSCDS. The term of the committee will be for three years. The members of the committee are as follows:

Sl. No	Department	Co-coordinator Name
1.	Institution Co. andingt	Dr. Nagesh L
	Institution Co-ordinators	Dr. Ramnarayan BK
2.	Oral Medicine	Dr. Darshana S Nayak
3.	Public Health Dentistry	Dr. Sourabha KG
4.	Oral Surgery	Dr. Vinod Rangan
5.	Conservative Dentistry	Dr. Yashwanth G
6.	Prosthodontics	Dr. Pradeep Chandra
7.	Periodontics	Dr. Pallavi Nanaiah
8.	Pedodontics	Dr. Kavitha M
9.	Orthodontics	Dr. Fatima Khalidi
10.	Oral Pathology	Dr. Vidya MA
11.	Basic Sciences	Mrs. Swathi C Shetty Dr. Krishnanand PS
12.	Sports Committee	Dr. Karthik Kabbur
13.	Cultural Committee	Dr. Gargi S Murthy
14.	Librarian	Mr. Narasimha Murthy
15.	Office Superintendent	Mr. Venkataramaiah

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Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.



April 8, 2019

DSCDS/Internal/OO/2019-20/ //

OFFICE ORDER ANNUAL REPORT COMMITTEE

The Annual Report Committee has been constituted to collect and compile data for the Annual Report of Dayananda Sagar Institutions. The term of the committee will be for three years. The members of the committee are as follows:

Sl. No	Department	Co-coordinator Name
1.	Institution Co-ordinators	Dr. Nagesh L Dr. Ramnarayan BK
2.	Oral Medicine	Dr. Darshana S Nayak
3,	Public Health Dentistry	Dr. Sourabha KG
4.	Oral Surgery	Dr. Tulasi Nayak
5.	Conservative Dentistry	Dr. Yashwanth G
6.	Prosthodontics	Dr. Pradeep Chandra
7.	Periodontics	Dr. Remya RM
8.	Pedodontics	Dr. Kavitha M
9.	Orthodontics	Dr. Fatima Khalidi
10.	Oral Pathology	Dr. Vidya MA
11.	Basic Sciences	Mrs. Neena Ninan Dr. Krishnanand PS
12.	Sports Committee	Dr. Karthik Kabbur
13.	Cultural Committee	Dr. Gargi S Murthy
14.	Librarian	Mr. Narasimha Murthy
15.	Office Superintendent	Mr. Venkataramaiah

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OSCDS/Off.Order /2022/033

Date: 01/09/2022

OFFICE ORDER - ACADEMIC ADVISORY COUNCIL- Reconstitution w.e.f 01/09/2022

Academic Advisory Council has been reconstituted w.e.f 01/09/2022. The term of the committee shall be for three years.

The committee members are as follows:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2	Dr. Nagesh L	Professor Emeritus – Research Head - Public Health Dentistry	Member
3	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member
4	Dr. Savita AM	Prof & Head - Periodontics	Member
5	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member
6	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member
7	Dr. Avinash J	Professor & Head - Public Health Dentistry	Member
8	Dr. Krishnanand PS	Prof & Head – Oral Pathology	Member
10	Dr. Vedavathi B	Prof & Head – Conservative Dentistry	Member
11	Dr. Prashanth NT	Professor – Oral & Maxillofacial Surgery	Member
12	Dr. Sunil S	Professor - Periodontics	Member
13	Dr. Ramnarayan BK	Professor – Oral Medicine & Radiology	Member Secretary
14	Dr. Aravind M	Professor - Orthodontics	Member
15	Dr. Gargi S Murthy	Reader - Pedodontics	Member
16	Dr. Smitha Sharan	Reader – Prosthodontics	Member
17	Dr. Veena Pai S	Reader - Conservative Dentistry	Member
18	Dr. Mohamed Nizam Al Deen Shah	Asst Prof - Physiology	Member
19	Dr. Ambili C	Senior Lecturer – Conservative Dentistry	Member
20	Dr. Mir Shahid Ulla	Senior Lecturer – Prosthodontics	Member





DSCDS/Off.Order /2022/02

Date: 05/01/2022

OFFICE ORDER - ACADEMIC ADVISORY COUNCIL- Reconstitution w.e.f 05/01/2022

Academic Advisory Council has been reconstituted w.e.f 05/01/2022. The term of the committee shall be for three years.

The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member
3	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member
4	Dr. Savita AM	Prof & Head - Periodontics	Member
5	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member
6	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member
7	Dr. Krishnanand PS	Prof & Head - Oral Pathology	Member
8	Dr. Vedavathi B	Prof & Head - Conservative Dentistry	Member
9	Dr. Karthik J Kabbur	Professor - Orthodontics	Member
10	Dr. Prashanth NT	Professor – Oral & Maxillofacial Surgery	Member
11	Dr. Sunil S	Professor - Periodontics	Member
12	Dr. Ramnarayan BK	Professor – Oral Medicine & Radiology	Member Secretary
13	Dr. Gargi S Murthy	Reader - Pedodontics	Member
14	Dr. Smitha Sharan	Reader - Prosthodontics	Member
15	Dr. Veena Pai S	Reader - Conservative Dentistry	Member
16	Dr. Mohamed Nizam Al Deen Shah	Asst Prof - Physiology	Member
17	Dr. Fatima Khalidi	Senior Lecturer - Orthodontics	Member





OSCDS/Internal/2017 34

Date: 14/08/2019

OFFICE ORDER ACADEMIC ADVISORY COUNCIL

Academic Advisory Council shall be the principle academic body of the intuition and shall exercises general supervision over the academic policies of the institution. The council shall prepare and discuss the road map for all academic activities with regard to undergraduate, postgraduate and Ph.D courses in the institution. The term of the committee shall be for three years.

The committee members are as follows:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member
3	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member
4	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member
5	Dr. Savita AM	Prof & Head - Periodontics	Member
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member
7	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member
8	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member
9	Dr. Sunil S	Associate Professor - Periodontics	Member
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member
13	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member

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Kumaraswamy Layout, Bangalore - 560 078



DSCDS/Internal/2018-19/

Date: 02/07/2018

OFFICE ORDER ACADEMIC ADVISORY COUNCIL

Academic Advisory Council shall be the principle academic body of the institution and shall exercises general supervision over the academic policies of the institution. The council shall prepare and discuss the road map for all academic activities with regard to undergraduate, postgraduate and Ph.D courses in the institution. The term of the committee shall be for **one year**.

The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member
3	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member
4	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member
5	Dr. Savita AM	Prof & Head - Periodontics	Member
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member
7	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member
8	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member
9	Dr. Sunil S	Associate Professor - Periodontics	Member
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member
13	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member

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DSCDS/Internal/2017-18/

Date: 13/11/2017

OFFICE ORDER ACADEMIC ADVISORY COUNCIL

Academic Advisory Council shall be the principle academic body of the institution and shall exercises general supervision over the academic policies of the institution. The council shall prepare and discuss the road map for all academic activities with regard to undergraduate, postgraduate and Ph.D courses in the institution. The term of the committee shall be for one year. The committee shall prepare a policy document within three months.

The committee members are as follows:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member
4	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member
5	Dr. Savita AM	Prof & Head - Periodontics	Member
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member
7	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member
9	Dr. Sunil S	Associate Professor - Periodontics	Member
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member
13	Dr. Pallavi Nanaiah	Sr. Lecturer	Member
14	Dr. Vinod Rangan	Sr. Lecturer	Member
15	Dr. Brunda K	Sr. Lecturer	Member

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Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.



DSCDS/Internal/2022/ 33

Date: 16/08/2022

OFFICE ORDER COMMITTEE FOR ADVANCED RESEARCH STUDIES

Committee for Advanced Research Studies has been reconstituted to implement setting up of Centers for Learning and Excellence and to promote research culture among faculty and students at Dayananda Sagar College of Dental Sciences. The committee shall also look into Research Funding Avenues for Faculty and Student Research and shall also monitor Faculty and Student Publication and Publications. Tenure of committee will be of three years.

The committee members are as follows:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Professor Emeritus – Research Head	Co-Chairperson
3	Dr. Shobha ES	Prof & Head – Oral Surgery	Member
4	Dr. Avinash J	Prof & HOD – Public Health Dentistry	Member
5	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member
6	Dr. Prashanth NT	Professor- Oral Surgery	Member
7	Dr. Gargi S Murthy	Reader - Pedodontics	Member
8	Dr. Veena Pai S	Reader - Conservative Dentistry & Endodontics	Member
9	Dr. Mahesh DR	Reader – Oral Medicine & Radiology	Member Secretary
10	Dr. Sreeharsha TV	Reader - Prosthodontics	Member
11	Dr. Afshan Saman Waremani	Reader - Orthodontics	Member
12	Dr. Koduru Sravani	Senior Lecturer - Periodontics	Member
13	Dr. Ambili C	Senior Lecturer — Conservative Dentistry	Member
14	Ms. Shilpa K	Asst. Professor – Microbiology	Member
15	Ms. Ashitha Mariam Leslie	Lecturer – Pharmacology	Member

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DSCDS/Internal/2019-20/31

Date: 14/08/2019

OFFICE ORDER COMMITTEE FOR ADVANCED RESEARCH STUDIES

Committee for Advanced Research Studies has been constituted to implement setting up of Centers for Learning and Excellence and to promote research culture among faculty and students at Dayananda Sagar College of Dental Sciences. Tenure of committee members will be of three years.

The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Prof & HOD - Public Health Dentistry	Member Secretary
3	Dr. Shobha ES	Prof & Head - OMFS	Member
4	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member
5	Dr. Prashanth NT	Associate Professor- Oral Surgery	Member
6	Dr. Gargi S Murthy	Reader - Pedodontics	Member
7	Dr. Veena Pai S	Reader - Conservative Dentistry & Endodontics	Member
8	Dr. Mahesh DR	Reader – Oral Medicine & Radiology	Member
9	Dr. Sreeharsha TV	Reader - Prosthodontics	Member
10	Dr. Sharmada BK	Reader - Orthodontics	Member
11	Dr. Pallavi K	Senior Lecturer - Periodontics	Member
12	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member

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Davananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



DSCDS/Internal/2018-19/

Date: 14/08/2018

OFFICE ORDER COMMITTEE FOR ADVANCED RESEARCH STUDIES

Committee for Advanced Research Studies has been constituted to implement setting up of Centers for Learning and Excellence and to promote research culture among faculty and students at Dayananda Sagar College of Dental Sciences. Tenure of committee will be of One year.

The committee members are as follows:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Prof & HOD - Public Health Dentistry	Member Secretary
3	Dr. Shobha ES	Prof & Head - OMFS	Member
4	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member
5	Dr. Prashanth NT	Professor- Oral Medicine & Radiology	Member
6	Dr. Gargi S Murthy	Reader - Pedodontics	Member
7	Dr. Veena Pai S	Reader - Conservative Dentistry & Endodontics	Member
8	Dr. Mahesh DR	Reader – Oral Medicine & Radiology	Member
9	Dr. Sreeharsha TV	Reader - Prosthodontics	Member
10	Dr. Sharmada BK	Reader - Orthodontics	Member
11	Dr. Pallavi K	Senior Lecturer - Periodontics	Member
12	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member

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Kumaraswamy Layout,

Bangalore - 560 078,



DSCDS/Internal/2022/049

Date: 01/09/2022

OFFICE ORDER COMMITTEE FOR DENTAL EDUCATION TECHNOLOGY

Committee for Dental Education Technology has been reconstituted to instill and train the faculty members and postgraduate students in systematic methods of teaching and learning in dental schools. Tenure of committee will be of three years.

The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Professor Emeritus – Research Head, DSCDS	Co-Chairperson
3	Dr. Chaya M David	Prof & HOD - Oral Medicine & Radiology	Member
4	Dr. Vedavathi.B	Professor & Head - Conservative Dentistry & Endodontics	Member
5	Dr. Sunil S	Professor- Periodontics	Member
6	Dr. Ramnarayan BK	Professor - Oral Medicine & Radiology	Member
7	Dr. Sangeetha R	Reader – Oral Pathology	Member Secretary
8	Dr. Nizam Al- Deen Shah	Asst. Professor, Physiology	Member
9	Dr. Brunda K	Senior Lecturer Prosthodontics	Member
10	Dr. Suchitra MP	Senior Lecturer Orthodontics	Member
11 ⁻	Dr. Rayan Malick	Senior Lecturer Oral Surgery	Member
12	Dr. Nayana M	Senior Lecturer Public Health Dentistry	Member
13	Dr. Deepthi M	Senior Lecturer Conservative Dentistry	Member
14	Dr. Pavithra Prabhakaran	Senior Lecturer Conservative Dentistry	Member





SCDS/Internal/2019 -20/3 D

Date: 14/08/2019

OFFICE ORDER COMMITTEE FOR DENTAL EDUCATION TECHNOLOGY

Committee for Dental Education Technology has been constituted to instill and train the faculty members and postgraduate students in systematic methods of teaching and learning in dental schools. Tenure of committee will be of three years. The committee shall prepare a policy document within three months.

The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Prof & HOD - Public Health Dentistry	Member Secretary
3	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry & Endodontics	Member
4	Dr. Chaya M David	Prof & HOD - Oral Medicine & Radiology	Member
5	Dr. Sunil S	Associate Professor- Periodontics	Member
6	Dr. Ramnarayan BK	Reader - Oral Medicine & Radiology	Member
7	Dr. Vedavathi.B	PROF - Conservative Dentistry & Endodontics	Member
8	Dr. Sangeetha R	Reader - Oral Pathology	Member
9	Dr. Brunda K	Senior Lecturer Prosthodontics	Member
10	Dr. Fatima Khalidi	Senior Lecturer Orthodontics	Member



Bayananda Sagar College of Dental Science Kumaraswamy Layout, Bangalore - 500 078.



1/09/2022

DSCDS/Internal/OO/2022/44

OFFICE ORDER FEED BACK COMMITTEE

(for Student, Patient feedback)

Feed back committee has been constituted to receive feed back from students with regard to theory classes and patients and to give recommendation for necessary changes based on the feed back.

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Professor Emeritus, Research Head	Advisor
3	Dr. Prashanth NT	Associate Professor - Oral & Maxillofacial Surgery	Member Secretary
4	Dr. Veena Pai S	Reader - Conservative Dentistry	Member
5	Dr. Pallavi Nanaiah	Sr. Lecturer – Periodontics	Member
6	Dr. Darshana S Nayak	Sr. Lecturer - Oral Medicine & Radiology	Member
7	Dr. Pradeep Chandra	Sr. Lecturer - Prosthodontics	Co-ordinator
8	Dr. Md. Nizam Al-Deen Shah	Asst. Prof - Physiology	Member
9	Dr. Prajwal P	Sr. Lecturer - Orthodontics	Member
10	Dr. Nayana M	Sr. Lecturer – Public Health Dentistry	Member
12	Dr. Shavari Shetty	Sr. Lectuer - Oral & Maxillofacial Surgery	Member
13	Mrs. Vidya G	Lecturer - Biochemistry	Member

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Nayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

SCDS/Internal/00/2018-19/07

Date:15-02-2019

Sl. No.	NAME	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Advisor
3	Dr. Prashanth NT	Associate Professor - Oral & Maxillofacial Surgery	Co-Chairperson
4	Dr. Swapna DV	Reader - Conservative Dentistry	Member
5	Dr. Namitha J	Reader - Oral Medicine & Radiology	Member
6	Dr. Fatima Khalidi	Sr. Lecturer - Orthodontics	Member
7	Dr. Pradeep Chandra	Sr. Lecturer - Prosthodontics	Co-ordinator
8	Dr. Mayank Jaiswal	Salec - Oral & Maxillofacial Surgery	Member
9	Dr. Md. Nizam Al-Deen Shah	Asst. Prof - Physiology	Member
10	Mrs. Neena Ninan	Lecturer - Biochemistry	Member

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Nayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



September 1, 2022

DSCDS/Internal/OO/2022/43

OFFICE ORDER

FACILITY MANAGEMENT COMMITTEE

The Facility Management Committee has been constituted which will look into the maintenance of Dental Chairs and other equipment of the Dental College and purchase of spares. The term of the committee will be for three years. The members of the committee are as follows:

St No.	Name of the Staff	Department & Designation	Position
1	Dr Hemanth M	Principal, Prof. & Head Dept. Of Orthodontics	Chair-person
2	Dr Mahesh DR	Reader, Dept. of Oral Medicine & Radiology	Member
3	Dr Sreeharsha TV	Reader, Dept. of Prosthodontics	Member Secretary
4	Dr Sangeetha R	Reader, Dept. of Oral Pathology	Member
5	Dr Ashok HK	Reader , Dept. of Conservative Dentistry	Member
6	Dr Mahesh PC	Senior Lecturer, Dept. of Public Health Dentistry	Member
7	Dr Rayan Mallik	Senior Lecturer, Dept. of Oral Surgery	Member
8	Dr Archana R Naik	Reader , Dept. of Periodontics	Member
9	Dr Jayanth NR	Senior Lecturer , Dept. of Orthodontics	Member
10	Dr Kavitha M	Senior Lecturer, Dept. of Pedodontics	Member
11	Dr. Mir Shahid Ulla	Senior Lecturer, Dept. of Prosthodontics	Member
12	Mrs. Vidya G	Lecturer, Dept. of Biochemistry	Member
13	Mrs. Manasa MB	Office Assistant	Member
14	Mr. Kumara Swamy	Dental Chair Technician	Member

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Bangalore - 560 078.



August 14, 2019

DSCDS/Internal/OO/2019-20/ 29

OFFICE ORDER

FACILITY MANAGEMENT COMMITTEE

The Facility Management Committee has been constituted which will look into the maintenance of Dental Chairs and other equipment of the Dental College and purchase of spares. The term of the committee will be for three years. The members of the committee are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr Hemanth M	Principal, Prof. & Head Dept. Of Orthodontics	Chair-person
2	Dr Mahesh DR	Reader, Dept. of Oral Medicine & Radiology	Member
3	Dr Krishna Kumar	Senior Lecturer, Dept. of Conservative & Endodontics	Member Secretary
4	Dr Sangeetha R	Reader, Dept. of Oral Pathology	Member
5	Dr Nithin Bhaskar	Reader, Dept. of Public Health Dentistry	Member
6	Dr Vinod Rangan	Reader, Dept. of Oral Surgery	Member
7	Dr Archana Naik	Reader, Dept. of Periodontics	Member
8	Dr Sree Harsha	Reader, Dept. of Prosthodontics	Member
9	Dr Sharmada Joyan	Reader, Dept. of Orthodontics	Member
10	Dr Kavitha	Senior Lecturer, Dept. of Pedodontics	Member
11	Mrs. Vijaya V	Office Assistant	Member
12	Mr. Kumara Swamy	Dental Chair Technician	Member

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December 12, 2017

DSCDS/Internal/OO/2017-18/

OFFICE ORDER

FACILITY MANAGEMENT COMMITTEE

The Facility Management Committee has been constituted which will look into the maintenance of Dental Chairs and other equipment of the Dental College and purchase of spares. The term of the committee will be for two years. The members of the committee are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr Hemanth M	Principal, Prof. & Head Dept. Of Orthodontics	Chair-person
2	Dr Mahesh DR	Reader, Dept. of Oral Medicine & Radiology	Member
3	Dr Krishna Kumar	Senior Lecturer, Dept. of Conservative & Endodontics	Member Secretary
4	Dr Sangeetha R	Reader, Dept. of Oral Pathology	Member
5	Dr Nithin Bhaskar	Reader, Dept. of Public Health Dentistry	Member
6	Dr Vinod Rangan	Reader, Dept. of Oral Surgery	Member
7	Dr Archana Naik	Reader, Dept. of Periodontics	Member
8	Dr Smitha Sharan	Reader, Dept. of Prosthodontics	Member
9	Dr Sharmada	Reader, Dept. of Orthodontics	Member
10	Dr Kavitha	Senior Lecturer, Dept. of Pedodontics	Member
11	Mrs. Vijaya V	Office Assistant	Member
12	Mr. Eshwar C	Dental Chair Technician	Member

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Payananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



September 1, 2022

DSCDS/Internal/2022/053

OFFICE ORDER INTER DEPARTMENTAL MEETINGS COMMITTEE

The Inter Departmental Meetings Committee has been reconstituted to plan and conduct interdepartmental Meetings / Programs. The term of the committee will be for three years.

SI no	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head, Dept. of Orthodontics	Chairman
2	Dr. Chaya M David	Prof & Head, Dept. of Oral Medicine & Radiology	Member
3	Dr. Savita AM	Prof. & Head Dept. of Periodontics	Member
4	Dr. Shobha ES	Prof. & Head Dept. of Oral & Maxillofacial Surgery	Member
5	Dr. Avinash J	Professor & Head, Public Health Dentistry	Member
6	Dr. Sarandha DL	Prof. & Head Dept. of Prosthodontics	Member secretary
7	Dr. Krishnananda PS	Prof. & Head Dept. of Oral Pathology	Member
8	Dr. Vedavathi.B	Professor & Head , Dept. of Conservative Dentistry	Member
9	Dr. Prashanth NT	Professor. Professor, Dept. of Oral & Maxillofacial Surgery	Member
10	Dr. Sunil S	Professor, Dept. of Periodontics	Member
11	Dr. Ramnarayan BK	Professor, Dept. of Oral Medicine & Radiology	Member
12	Dr. Aravind M	Professor, Dept. of Orthodontics	Member
13	Dr. Gargi S Murthy	Reader, Dept. of Pedodontics	Member
14	Dr. Smitha B Kulkarni	Reader, Dept. of Public Health Dentistry	Member
15	Dr. Smitha Sharan	Reader, Dept. of Prosthodontics	Member
16	Dr. Ranjini MA	Reader, Dept. of Conservative Dentistry	Member
17	Dr. Md. Nizam Al-Deen Shah	Asst. Professor, Physiology	Member





November 20, 2021

DSCDS/Internal/2021/06/

OFFICE ORDER INTER DEPARTMENTAL MEETINGS COMMITTEE

The Inter Departmental Meetings Committee has been reconstituted to plan and conduct interdepartmental Meetings / Programs. The term of the committee will be for three years.

SI no	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head, Dept. of Orthodontics	Chairman
2	Dr. L Nagesh	Prof. & Head Dept. of Public Health Dentistry	Member
3	Dr. Chaya M David	Prof & Head, Dept. of Oral Medicine & Radiology	Member
4	Dr. Savita AM	Prof. & Head Dept. of Periodontics	Member
5	Dr. Sarandha DL	Prof. & Head Dept. of Prosthodontics	Member secretary
6	Dr. Shobha ES	Prof. & Head Dept. of Oral & Maxillofacial Surgery	Member
7	Dr. Krishnananda PS	Prof. & Head Dept. of Oral Pathology	Member
8	Dr. Karthik J Kabbur	Professor, Dept. of Orthodontics	Member
9	Dr. Vedavathi.B	Professor, Dept. of Conservative Dentistry	Member
10	Dr. Prashanth NT	Asso. Professor, Dept. of Oral & Maxillofacial Surgery	Member
11	Dr. Sunil S	Asso. Professor, Dept. of Periodontics	Member
12	Dr. Ramnarayan BK	Reader, Dept. of Oral Medicine & Radiology	Member
13	Dr. Gargi S Murthy	Reader, Dept. of Pedodontics	Member
14	Dr. Swapna DV	Reader, Dept. of Conservative Dentistry	Member
15	Dr. Smitha B Kulkarni	Reader, Dept. of Public Health Dentistry	Member
16	Dr. Smitha Sharan	Reader, Dept. of Prosthodontics	Member
17	Dr. Md. Nizam Al-Deen Shah	Asst. Professor, Physiology	Member

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June 1, 2018

DSCDS/Internal/2018-19/

OFFICE ORDER INTER DEPARTMENTAL MEETINGS COMMITTEE

The Inter Departmental Meetings Committee has been constituted to plan and conduct interdepartmental Meetings / Programs. The term of the committee will be for three years.

SI no	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head, Dept. of Orthodontics	Chairman
2	Dr. Roopa R Nadig	Dean, Prof & Head, Dept. of Conservative Dentistry	Member
3	Dr. L Nagesh	Prof. & Head Dept. of Public Health Dentistry	Member
4	Dr. Chaya M David	Prof & Head, Dept. of Oral Medicine & Radiology	Member
5	Dr. Savita AM	Prof. & Head Dept. of Periodontics	Member
6	Dr. Kalpana D	Prof. & Head Dept. of Prosthodontics	Member
7	Dr. Shobha ES	Prof. & Head Dept. of Oral & Maxillofacial Surgery	Member
8	Dr. Ramamurti T	Prof & Head, Dept. of Pathology	Member
9	Dr. Krishnananda PS	Prof. & Head Dept. of Oral Pathology	Member
10	Dr. Vedavathi.B	Professor, Dept. of Conservative Dentistry	Member
11	Dr. Karthik J Kabbur	Professor, Dept. of Orthodontics	Member
12	Dr. Prashanth NT	Asso. Professor, Dept. of Oral & Maxillofacial Surgery	Member
13	Dr. Sunil S	Asso. Professor, Dept. of Periodontics	Member Secretary
14	Dr. Ramnarayan BK	Reader, Dept. of Oral Medicine & Radiology	Member
15	Dr. Gargi S Murthy	Reader, Dept. of Pedodontics	Member
16	Dr. Smitha B Kulkarni	Reader, Dept. of Public Health Dentistry	Member
17	Dr. Smitha Sharan	Reader, Dept. of Prosthodontics	Member





DSCDS/Internal/2022/032

Date: 16/08/2022

OFFICE ORDER LIBRARY ADVISORY COMMITTEE

Library advisory Committee has been reconstituted to advice and look into the purchase of books and journals for the library. The committee shall also monitor the various digital platforms of the library. Tenure of committee members will be of three years. Committee shall prepare a policy document within three months.

The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairman
2	Dr. Vedavathi B	Prof & Head - Conservative Dentistry	Member
3	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member
4	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member
3	Dr. Avinash J	Prof & Head - Public Health Dentistry	Member
4	Dr. Sunil S	Professor - Periodontics	Member
5	Dr. Preeti Patil	Senior Lecturer - Oral Medicine & Radiology	Member
6	Dr. Prajwal P	Senior Lecturer - Orthodontics	Member
7	Mr. Narasimha Murthy	Librarian	Member Secretary
8	Dr. Zameer Ahmed CM	PG Student -Prosthodontics	Member
9	Dr. Sindhu P	PG Student -Oral Medicine	Member

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Bayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.



DSCDS/Internal/2019*29/33

Date: 14/08/2019

OFFICE ORDER LIBRARY ADVISORY COMMITTEE

Library advisory Committee has been constituted to advice and look into the purchase of books and journals for the library. The committee shall also monitor the various digital platforms of the library. Tenure of committee members will be of three years. Committee shall prepare a policy document within three months.

The committee members are as follows:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairman
2	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member
3	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member
4	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member
5	Dr. Sunil S	Associate Professor Periodontics	Member
6	Dr. Preeti Patil	Senior Lecturer – Oral Medicine & Radiology	Member
7	Mr. Narasimha Murthy	Librarian	Co-ordinator
8	Dr. Iti Bhodala	PG Student Prosthodontics	Member
9	Dr. Gayathri Shreedhar	PG Student Public Health Dentistry	Member



Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Shavige Malleswara Hills, Kumaraswamy Layout Bangalore 560 078.

DSCDS/LIB-COM/2017-18/

Date: 13/12/2017

OFFICE ORDER LIBRARY ADVISORY COMMITTEE

Library advisory Committee has been constituted to advice and look into the purchase of books and journals for the library. The committee shall also monitor the various digital platforms of the library. Tenure of committee members will be of two years. The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairman
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member
3	Dr. Chaya M David	Prof & Head - OMDR	Member
4	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member
5	Dr. Sunil S	Associate Professor Periodontics	Member
6	Dr. Preeti Patil	Senior Lecturer - Oral Medicine & Radiology	Member
7	Mr. Narasimha Murthy A V	Librarian	Co-ordinator
8	Dr. Shravya .S. Girji	PG Student Conservative	Member
9	Dr. Shambhu Sharan Yadav	PG Student OMDR	Member

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DSCDS/Internal/2022/045

Date: 01/09/2022

OFFICE ORDER MENTORSHIP COMMITTEE

Student mentorship committee has been reconstituted to implement mentorship program for students. This will enable better staff-student interaction, enhance efficiency and provide better support for students. Tenure of committee members will be of three years and the committee will meet three times every year.

The committee members are as follows:

SI. No. Name		Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Professor Emeritus – Research Head	Advisor & Chief Mentor
3	Prof. Capt. Nagaraj Subbarao	CEE & Professor SCMS, DSU	External Member
4	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Mentor
5	Dr. Sunil S	Asso Professor - Periodontics	Mentor
6	Dr. Gargi S Murthy	Reader- Pedodontics	Mentor
7	Dr. Smitha B Kulkarni	Reader - Public Health Dentistry	Mentor & Member Secretary
8	Dr. Veena Pai S	Reader - Conservative Dentistry & Endodontics	Mentor
9	Dr. Sangeetha R	Reader - Oral Pathology	Mentor
10	Dr. Preethi Patil	Sr. Lecturer- Oral Medicine & Radiology	Mentor
11	Dr. Suchitra MP	Sr. Lecturer - Orthodontics	Mentor
12	Dr. Shavari Shetty	Sr. Lecturer - Oral Surgery	Mentor
13	Dr. Brunda K	Senior Lecturer - Prosthodontics	Mentor
14	Dr. Md. Nizam Al- Deen Shah	Senior Lecturer - Physiology	Mentor

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Bangalore - 560 078.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/Internal/2021/067

Date: 01/09/2021

OFFICE ORDER MENTORSHIP COMMITTEE

Student mentorship committee has been reconstituted to implement mentorship program for students. This will enable better staff-student interaction, enhance efficiency and provide better support for students. Tenure of committee members will be of three years and the committee will meet three time every year.

The committee members are as follows:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Prof & HOD - Public Health Dentistry	Co-Chairperson &. Chief Mentor
3	Prof. Capt. Nagaraj Subbarao	CEE & Professor SCMS, DSU	External Member
4	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Mentor
5	Dr. Sunil S	Asso Professor - Periodontics	Mentor
6	Dr. Gargi S Murthy	Reader- Pedodontics	Mentor
7	Dr. Smitha B Kulkarni	Reader - Public Health Dentistry	Mentor & Member Secretary
8	Dr. Veena Pai S	Reader - Conservative Dentistry & Endodontics	Mentor
9	Dr. Sangeetha R	Reader - Oral Pathology	Mentor
10	Dr. Sharmada BK	Reader - Orthodontics	Mentor
11	Dr. Vinod Rangan	Reader - Oral Surgery	Mentor
12	Dr. Preethi Patil	Sr. Lecturer- Oral Medicine & Mentor Radiology	
13	Dr. Brunda K	Senior Lecturer - Mentor Prosthodontics	
14	Dr. Md. Nizam Al- Deen Shah	Senior Lecturer - Physiology	Mentor

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Bangalore - 560 078.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/Internal/ (5) /2018-19/05

Date: 3/4 /01/2019

OFFICE ORDER MENTORSHIP COMMITTEE

Student mentorship committee has been constituted to implement mentorship program for students. This will enable better staff-student interaction, enhance efficiency and provide better support for students. Tenure of committee members will be of three years and the committee will meet three time every year.

The committee members are as follows:

Sl. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal	Chairperson
2	Dr. Nagesh L	Prof & HOD - Public Health Dentistry	Co-Chairperson & Chief Mentor
3	Prof. Capt. Nagaraj Subbarao	CEE & Professor SCMS, DSU	External Member
4	Dr. Ramamurti T	Prof & HOD - Pathology	Mentor
5	Dr. Manasa Anand Meundi	Professor- Oral Medicine & Radiology	Mentor
6	Dr. Sunil S	Associate Professor - Periodontics	Mentor
7	Dr. Gargi S Murthy	Reader- Pedodontics	Mentor
8	Dr. Smitha B Kulkarni	Reader - Public Health Dentistry	Mentor
9	Dr. Veena Pai S	Reader - Conservative Dentistry & Endodontics	Mentor
10	Dr. Sangeetha R	Reader - Oral Pathology	Mentor
11	Dr. Sharmada BK	Reader - Orthodontics	Mentor
12	Dr. Brunda K	Senior Lecturer - Prosthodontics	Mentor
13	Dr. Mayank Jaiswal	Senior Lecturer - Oral Surgery	Mentor
14	Dr. Md. Nizam Al- Deen Shah	Senior Lecturer - Physiology	Mentor





DSCDS/Internal/OO/2022//03

November 2, 2022

OFFICE ORDER PARENT TEACHER MEETING COMMITTEE - 2022-23

A Parent Teacher committee has been constituted for the year 2022-23 to conduct Parent – Teacher review meets Term of the committee will be one year

SL NO	NAME	Designation	Position Held	
1.	Dr. Hemanth M	Principal	Chairperson	
2.	Dr. Savita AM	Prof & Head, Dept. of Periodontology	Member	
3.	Dr. Shobha ES	Prof & Head, Dept. of Oral & Maxillofacial Surgery	Member	
4.	Dr. Avinash J	Prof & Head, Dept. of Public Health Dentistry	Member	
5.	Dr. Sarandha DL	Prof & Head, Dept. of Prosthodontics	Member	
6.	Dr. Krishnanand PS	Prof & Head, Dept. of Oral Pathology	Member Secretary	
7.	Dr. Vedavathi B	Prof & Head, Dept. of Conservative Dentistry	Member	
8.	Dr. Ramnarayan BK	Professor, I/c Head, Dept. of Oral Medicine & Radiology	Member	
9.	Dr. Gargi S Murthy	Reader, Dept. of Pedodontics	Member	
10.	Dr. Md. Nizam Al-Deen Shah	Asst. Prof., Dept. of Physiology	Member	
11.	Dr. Pradeep Chandra K	Sr. Lecturer, Dept. of Prosthodontics	Member	
12,			Member	
13.			Member	
14.	14. Mr. Lokesh Parent Representa		Member	
15.	15. Mr. Adamya KA Student Representation		Member	
16.	Dr. Shantanu Kumar	Student Representative MDS	Member	

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Dayananda Sagar College of Dental Sciences Kumaraewamy Layout, Bangalore - 560 078.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

July 1, 2021

DSCDS/Office Order/2021/41

OFFICE ORDER

In view of some of the faculty members having left/joined the institution the following staff members shall replace them in the respective committees as mentioned below:

		Soft Skill De	velopment Committee	0	
SI No	Name	In Place of	Designation	Position	Signature
1	Dr. Suchit	a Dr. Tulasi Nayak	Sr. Lecturer, Dept. of Orthodontics	Member	
2	Dr. Sarandl DL	na Dr. Roopa R Nadig	Prof & Head, Dept. of Prosthodontics	Member	A S
		Academi	Advisory Council		
1	Dr. Vedavat B	hi Dr. Roopa R Nadig	Professor, Dept. of Conservative Dentistry	Member	Vederatte.
2	Dr. Sarandi DL	na Dr. Kalpana D	Prof & Head, Dept. of Prosthodontics	Member	De
		Feed 1	Back Committee		
1.	Dr. Archana Naik	R Dr. Mayank Jaiswal	Reader, Dept. of Periodontics	Member	Paid
2	Mrs. Vid Gantela	Naina	Biochemistry	Member	wilys
70		EMPANEL	MGNCommittee		
1	Dr. Vin Rangan			Member	194

The term of the committees shall remain unchanged.

Copy to:

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Dayananda Sagar College of Dental Sciences

1. Dr. Prashanth NT - Co-Chairperson - Feed Back Committee umaraswamy Layout,

2. Mr. Narasimha Murthy - Co-ordinator - Library Advisory Committee

3. Dr. Krishnananda S - Coordinator - Soft Skill Development Committee

4. Dr. Ramnarayan BK - Member Secretary - Academic Advisory Council

5. Committee File.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

August 20, 2019

DSCDS/Office Order/2019-20/36

OFFICE ORDER

In view of some of the faculty members having left the institution the following staff members shall replace them in the respective committees as mentioned below:

		Mentorship	Committee			
Sl	Name In Place of Designation 1		Position	Signature		
No			_			
1.	Dr. Mahesh DR	Dr. Manasa	Reader - OMR	Mentor	The .	
		Anand Meundi			42	
	Cultural Committee					
1	Dr. Vidya MA	Dr. Kavya	Sr. Lecturer	Member		
	- 4		Oral Pathology		-(4)	
2	Mrs. Vidya		Lecturer,	Member	O	
	Gantela	4	Biochemistry		(V)	
	Feed Back Committee					
1	Dr. Preeti Patil	Dr. Namitha J	Sr. Lecturer -	Member	Muth	
			OMR		years.	

The term of the committees shall remain unchanged.

Copy to:

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout,

- 1. Dr. Nagesh L Co-Chairperson Mentorship Committee Bangalore 569 678.
- 2. Dr. Gargi S Murthy Co-ordinator Cultural Committee

3. Dr. Prashanth NT - Co-Chairperson - Feed Back Committee

4. Committee File.

Mulu 19/19.



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

Date: 01/09/2022

SOFT SKILL DEVELOPMENT COMMITTEE

Soft skill development committee has been constituted to implement soft skill program for undergraduate and postgraduate students so as to inculcate these essential skills during their day to day activities with patients, teachers and fellow students. The committee will have a term of three years with the following members.

S1. No.	NAME	Designation	Position
1	Dr. Hemanth .M	Principal	Chairperson
2	Ms. Praveena	Head Training & Operations - CIL	External Member
3	Dr. Sarandha DL	Prof & HOD Prosthodontics	Member
4	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member Secretary
5	Dr. Sunil S	Professor- Periodontics	Member
6	Dr. Ranjini MA	Reader - Conservative Dentistry'	Member
7	Dr. Archana R Naik	Reader - Periodontics	Member
8	Dr. Darshana S Nayak	Senior Lecturer - Oral Medicine & Radiology	Member
9	Dr. Suchitra MP	Senior Lecturer - Orthodontics	Member
10	Ms. Ashitha Mariam Lesl	Lecturer - Pharmacology	Member
11	Dr. Akshata Airsang	Senior Lecturer - Conservative Dentistry	Member
12	Dr. Shavari Shetty	Senior Lecturer - Oral Surgery	Member
13	Dr. Mir Shahid Ulla	Senior Lecturer - Prosthodotics	Member

Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout

Bangalore - 560 078

SOFT SKILL DEVELOPMENT COMMITTEE

Date: 24/1/109

10	SCDSI	201	ernal	10	0/	20	18-1	9	106
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SI. No.	NAME	Designation	Designation
1	Dr. Hemanth M	Principal	Chairperson
2	Dr.Roopa R Nadig	Dean	Co-Chairperson
3	Ms. Praveena	Head Training & Operations - CIL	External Member
4	Dr. Chaya M David	Prof & HOD Oral Medicine & Radiology	Member
5	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Co-ordinator
6	Dr. Ranjini MA	Reader - Conservative Dentistry'	Member
7	Dr. Nithin N Bhaskar	Reader - Public Health Dentistry	Member
8	Dr. Preeti Patil	Senior Lecturer - Oral Medicine & Radiology	Member
9	Mrs. Swathi Shetty	Lecturer - Microbiology	Member
10	Dr. Tulasi Nayak	Senior Lecturer - Oral Surgery	Member

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Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

Date: 13/11/2017

SOFT SKILL DEVELOPMENT COMMITTEE

DSCDS/Internal 100 plan 7-18

Soft skill development committee has been constituted to implement soft skill program for undergraduate and postgraduate students so as to inculcate these essential skills during their day to day activities with patients, teachers and fellow students. The committee will have a term is for one year with the following members.

Head Training &	Sl. No.	NAME	Designation	Position
3 Ms. Praveena Head Training & External Mem 4 Dr. Chaya M David Prof & HOD Oral Medicine & Radiology 5 Dr. Sunil S Associate Professor - Periodontics 6 Dr. Ranjini MA Reader - Conservative Dentistry' 7 Dr. Nithin N Bhaskar Reader - Public Health Dentistry 8 Dr. Preeti Patil Senior Lecturer - Oral Member	1	Dr. Hemanth .M	Principal	Chairperson
Operations - CIL Dr. Chaya M David Dr. Sunil S Dr. Sunil S Dr. Ranjini MA Dr. Nithin N Bhaskar Operations - CIL Prof & HOD Oral Medicine & Radiology Associate Professor - Periodontics Reader - Conservative Dentistry' Reader - Public Health Dentistry Senior Lecturer - Oral Member Member	2	Dr.Roopa R Nadig	Dean	Co-Chairperson
4 Dr. Chaya M David Prof & HOD Oral Medicine & Radiology 5 Dr. Sunil S Associate Professor - Periodontics 6 Dr. Ranjini MA Reader - Conservative Dentistry' Member 7 Dr. Nithin N Bhaskar Reader - Public Health Dentistry 8 Dr. Preeti Patil Senior Lecturer - Oral Member	3	Ms. Praveena		External Member
5 Dr. Sunil S Associate Professor - Periodontics Co-ordinator Reader - Conservative Dentistry' Dr. Nithin N Bhaskar Reader - Public Health Dentistry Senior Lecturer - Oral Member	4	Dr. Chaya M David	Prof & HOD Oral	Member
7 Dr. Nithin N Bhaskar Dentistry' 8 Dr. Preeti Patil Dentistry' Reader - Public Health Dentistry Senior Lecturer - Oral Member	5	Dr. Sunil S	Associate Professor -	Co-ordinator
7 Dr. Nithin N Bhaskar Dentistry Member 8 Dr. Preeti Patil Senior Lecturer - Oral Member	6	Dr. Ranjini MA	-	Member
8 IDr. Preeti Patil IMember	7	Dr. Nithin N Bhaskar		Member
	8	Dr. Preeti Patil		Member
9 Mrs. Swathi Shetty Lecturer - Microbiology Member	9	Mrs. Swathi Shetty	Lecturer - Microbiology	Member

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Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



DSCDS/Internal/00/2022/*0*55

Date: 14/11/2022

OFFICE ORDER

STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

Student support, Welfare and Grievance Redressal Committee has been reconstituted to look into welfare measures and grievances of undergraduate and postgraduate students. The term of the committee shall be for One year.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-Person
2.	Dr. Avinash J	Professor & Head, Dept. of Public Health Dentistry	Member
3.	Dr. Prashanth NT	Professor, Dept. of Oral & Maxillofacial Surgery	Member
4.	Dr. Ramnarayan BK	Professor, Dept. of Oral Medicine & Radiology	Member
5.	Dr. Veena Pai S	Reader, Dept. of Conservative Dentistry	Member
6.	Dr. Vinod Rangan	Reader, Dept. of Oral & Maxillofacial Surgery	Member Secretary
7.,	Dr. Pallavi Nanaiah	Senior Lecturer, Dept. of Periodontics	Member
8.	Dr. Brunda K	Senior Lecturer, Dept. of Prosthodontics	Member
9.	Mr. Nanjundaswamy	Director PED	Member
10.	Mr. Narasimha Murthy AV	Librarian	Member
11.	Dr. Syed Majdi Mohammadi	Undergraduate Student	Member
12.	Dr. Punja Samika Shankara	Undergraduate Student	Member
13.	Dr.Shantanu Kumar	Postgraduate Student	Member
14	Dr. Swathi S	Postgraduate Student	Member

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Kumaraswamy Layout
Bangalore - 560 078



DSCDS/Internal//00/2021/069

Date: 11/11/2021

OFFICE ORDER

STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

Student support, Welfare and Grievance Redressal Committee has been reconstituted to look into welfare measures and grievances of undergraduate and postgraduate students. The term of the committee shall be for One year.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-Person
2.	Dr. Chaya M David	Professor & Head, Dept. of Oral Medicine & Radiology	Member
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral & Maxillofacial Surgery	Member
4.	Dr. Ramnarayan BK	Reader, Dept. of Oral Medicine & Radiology	Member
5.	Dr. Veena Pai S	Reader, Dept. of Conservative Dentistry	Member
6.	Dr. Vinod Rangan	Reader, Dept. of Oral & Maxillofacial Surgery	Member Secretary
7.	Dr. Pallavi Nanaiah	Senior Lecturer, Dept. of Periodontics	Member
8.	Dr. Brunda K	Senior Lecturer, Dept. of Prosthodontics	Member
9.	Mr. Nanjundaswainy	Director PED	Member
10.	Mr. Narasimha Murthy AV	Librarian	Member
11.	Mr. Manoj Kumar TV	Undergraduate Student	Member
12.	Ms. Gargi Prakash GC	Undergraduate Student	Member
13.	Dr.Sindhu P	Postgraduate Student	Member
14	Dr. Zameer Ahmed CM	Postgraduate Student	Member

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Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



DSCDS/Internal//OO/2020/

Date: 10/11/2020

OFFICE ORDER

STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

Student support, Welfare and Grievance Redressal Committee has been reconstituted to look into welfare measures and grievances of undergraduate and postgraduate students. The term of the committee shall be for One year.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-Person
2.	Dr. Chaya M David	Professor & Head, Dept. of Oral Medicine & Radiology	Member
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral & Maxillofacial Surgery	Member
4.	Dr. Ramnarayan BK	Reader, Dept. of Oral Medicine & Radiology	Member
5.	Dr. Veena Pai S	Reader, Dept. of Conservative Dentistry	Member
6.	Dr. Vinod Rangan	Reader, Dept. of Oral & Maxillofacial Surgery	Member Secretary
7.	Dr. Pallavi Nanaiah	Senior Lecturer, Dept. of Periodontics	Member
8.	Dr. Brunda K	Senior Lecturer, Dept. of Prosthodontics	Member
9.	Mr. Nanjundaswamy	Director PED	Member
10.	Mr. Narasimha Murthy AV	Librarian	Member .
11.	Mr. Parikeerthan YP	Undergraduate Student	Member
12.	Ms. Aishwarya Vijay	Undergraduate Student	Member
13.	Dr.Subbu Kashyap	Postgraduate Student	Member
14	Dr. Mir Shahid Ulla	Postgraduate Student	Member



Dayananda Sagar College of Bental Sciences Kumaraswamy Layeut, Bangalore - 560 078.



OSCDS/Internal//00/2019/048

Date: 8/11/2019

OFFICE ORDER

STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

Student support, Welfare and Grievance Redressal Committee has been reconstituted to look into welfare measures and grievances of undergraduate and postgraduate students. The term of the committee shall be for One year.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-Person
2.	Dr. Chaya M Davic	Professor & Head, Dept. of Oral Medicine & Radiology	Member
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral & Maxillofacial Surgery	Member
4.	Dr. Ramnarayan BK	Reader, Dept. of Oral Medicine & Radiology	Member
5.	Dr. Veena Pai S	Reader, Dept. of Conservative Dentistry	Member
6.	Dr. Vinod Rangan	Reader, Dept. of Oral & Maxillofacial Surgery	Member Secretary
7	Dr. Pallavi Nanaiah	Senior Lecturer, Dept. of Periodontics	Member
8.	Dr. Brunda K	Senior Lecturer, Dept. of Prosthodontics	Member
9.	Mr. Nanjundaswamy	Director PED	Member
10.	Mr. Narasimha Murthy AV	Librarian	Member
11.	Mr. Kishen KS	Undergraduate Student	Member
12.	Ms. Deepashree	Undergraduate Student	Member
13.	Dr.Vaishali	Postgraduate Student	Member
14	Dr. Nageswaran GR	Postgraduate Student	Member



Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



DSCDS/Internal//00/2019/048

Date: 12/11/2018

OFFICE ORDER

STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

Student support, Welfare and Grievance Redressal Committee has been reconstituted to look into welfare measures and grievances of undergraduate and postgraduate students. The term of the committee shall be for One year.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-Person
2.	Dr. Chaya M David	Professor & Head, Dept. of Oral Medicine & Radiology	Member
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral & Maxillofacial Surgery	Member
4.	Dr. Ramnarayan BK	Reader, Dept. of Oral Medicine & Radiology	Member
5.	Dr. Veena Pai S	Reader, Dept. of Conservative Dentistry	Member
6.	Dr. Vinod Rangan	Reader, Dept. of Oral & Maxillofacial Surgery	Member Secretary
7.	Dr. Pallavi Nanaiah	Senior Lecturer, Dept. of Periodontics	Member
8.	Dr. Brunda K	Senior Lecturer, Dept. of Prosthodontics	Member
9,	Mr. Nanjundaswamy	Director PED	Member ^a
10.	Mr. Narasimha Murthy AV	Librarian	Member
11.	Mr. Praveen Kuma G	Undergraduate Student	Member
12.	Ms. Aditi UA	Undergraduate Student	Member
13.	Dr.Varsha Venugopalan	Postgraduate Student	Member
14	Dr. Apurba C Saharia	Postgraduate Student	Member





DSCDS/Internal//OO/2017-18/

Date: 7/11/2017

OFFICE ORDER

STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

Student support, Welfare and Grievance Redressal Committee has been constituted to look into welfare measures and grievances of undergraduate and postgraduate students. The term of the committee shall be for two years.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-Person
2.	Dr. Chaya M David	Professor & Head, Dept. of Oral Medicine & Radiology	Member
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral & Maxillofacial Surgery	Member
4.	Dr. Ramnarayan BK	Reader, Dept. of Oral Medicine & Radiology	Member
5.	Dr. Veena Pai S	Reader, Dept. of Conservative Dentistry	Member
6.	Dr. Vinod Rangan	Senior Lecturer, Dept. of Oral & Maxillofacial Surgery	Member Secretary
7.	Dr. Pallavi Nanaial	Senior Lecturer, Dept. of Periodontics	Member
8.	Dr. Brunda K	Senior Lecturer, Dept. of Prosthodontics	Member
9.	Mr. Nanjundaswamy	Director PED	Member
10.	Mr. Narasimha Murthy	Librarian	Member
11.	Mr. R Ritvik Vinayak	Undergraduate Student	Member
12.	Ms. Thejaswini L	Undergraduate Student	Member
13.	Dr. Rose Maria Jose	Postgraduate Student	Member
14	Dr. Mahesh PC	Postgraduate Student	Member

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Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



DSCDS/Internal/OO/2018/

September 3, 2018

OFFICE ORDER STUDENT COUNCIL MEMBERS - 2018

A student council has been reconstituted for the year 2018-19 to implement and promote sports and cultural activities in the academic year in co-ordination with the respective committees. The Student Council is required to adhere to the college policies. Term of the committee will be one year

SL NO	NAME	DESIGNATION	POSITION HELD
1.	Mr. Sanket Nayak	Intern	President
2.	Mr. Anil Kumar	Intern	Vice President
3.	Ms. Shruthi J	Intern	General Secretary
4.	Ms. Sharanya P	Intern	Cultural Secretary
5.	Mr. Nischal CG	Intern	Sports Secretary
6.	Mr. Mervin Harris	Intern	Magazine Editor
7.	Mr. R Michael Sam	I BDS	Student Member
8.	Ms. Inara Salim Isani	I BDS	Student Member
9.	Mr. Chiraag S	II BDS	Student Member
10.	Ms. Atika Ifath	II BDS	Student Member
11,	Mr. Allen S Joseph	III BDS	Student Member
12.	Ms. Arshiya Kauser A	III BDS	Student Member
13.	Mr. Vishnu Aithal PB	IV BDS	Student Member
14.	Ms. Raksha Kumari	IV BDS	Student Member
15.	Mr. Shantanu	Intern	Student Member
16.	Ms. Raksha Prasad	IVBDS	Student Member
17.	Mr. Mojtaba Balouch Akbari	III BDS	International Student Member
18.	Joel Koshy Joseph	III MDS	Student Member (PG)
19.	Dr Chaya David	Prof & Head, Oral Medicine & Radiology	Member Secretary (Faculty)
20.	Dr Karthik Kabbur	Professor, Dept. of Orthodontics	Sports Secretary (Faculty)
21.	Dr Gargi Murthy	Reader, Dept. of Pedodontics	Cultural Secretary (Faculty)

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Bengalore - 560 078,



December 1, 2017

DSCDS/Internal/OO/2017/

OFFICE ORDER STUDENT COUNCIL MEMBERS -2017

A student council has been constituted for the academic year 2017-18 to implement and promote sports and cultural activities in the academic year in co-ordination with the respective committees. The Student Council is required to adhere to the college policies. Term of the committee will be one year

SL NO	NAME	DESIGNATION	POSITION HELD
1.	Mr. Rithvik Vinayak	Intern	President
2.	Ms. Subbu Kashyap	Intern	Vice President
3.	Ms. Kritika Agarwal	Intern	General Secretary
4.	Ms. Ritika Pundir	Intern	Cultural Secretary
5.	Mr. Venkata Sai Rohit	Intern	Sports Secretary
6.	Ms. Payal Mazumdar	Intern	Magazine Editor
7.	Ms. Soya Alfred Xavier	Intern	Associate Editor
8.	Mr. Samarth P	I BDS	Student Member
9.	Ms. Arpitha Murali	I BDS	Student Member
10.	Ms. Parikeerthan Y.P.	II BDS	Student Member
11.	Ms. Amulya M Gowda	II BDS	Student Member
12.	Mr. Kishen KS	III BDS	Student Member
13.	Ms. Swetha Chandran	III BDS	Student Member
14.	Ms. Sreekar Gade	IV BDS	Student Member
15.	Ms. Anusha KV	IV BDS	Student Member
16.	Ms. Keerthana Uday	Intern	Student Member
17.	Ms. Shiva Rafie	Intern	International student member
18.	Dr. Kulkarni Shriram Gururaj	III MDS	Student Member (PG)
19.	Dr Chaya David	Prof & Head, Oral Medicine & Radiology	Member Secretary (Faculty)
20.	Dr Karthik J Kabbur	Professor, Orthodontics	Sports Secretary (Faculty)
21.	Dr Gargi Murthy	Reader, Pedodontics	Cultural Secretary (Faculty)





January 10, 2022

DSCDS/Internal/OO/2022/ 086

OFFICE ORDER STUDENT COUNCIL MEMBERS – 2021-22

A student council has been reconstituted for the year 2021-22 to implement and promote sports and cultural activities in the academic year in co-ordination with the respective committees. The Student Council is required to adhere to the college policies. Term of the committee will be one year.

SL NO	NAME	Designation	Position Held
1:	Mr. Manoj Kumar TV	Intern	President
2.	Ms. Gargi Prakash	Intern	Vice President
3.	Mr. Manu K	Intern	General Secretary
4.	Ms. Harshita BN	Intern	Cultural Secretary
5.	Mr. Gajare Ganesh	Intern	Sports Secretary
6.	Ms. Geetha Priya Y.B	Intern	Magazine Editor
7.	Ms. Hima Girish	Intern	Associate Editor
8.	Mr. Santhosh	I BDS	Student Member
9.	Ms. Debonita	IBDS	Student Member
10.	Mr. Dheeraj	1 BDS	Student Member
11.	Ms. Isiri	II BDS	Student Member
12.	Mr. Jeff Patrick	III BDS	Student Member
13.	Ms. Madhura	III BDS	Student Member
14.	Mr. Monish	IV BDS	Student Member
15.	Ms. Simran	IV BDS	Student Member
16.	Mr. Chiraag	Intern	Student Member
17,	Ms. Komal Jain	Intern	Student Member
18.	Mr. Khaldoon Atta Amer	II BDS	International Student Member
19.	Mr. Shantanu Kumar	I MDS	Student Member (PG)
20.	Dr Avinash J	Prof & Head, Public Health Dentistry	Member Secretary (Faculty)
21.	Dr Smitha Sharan	Reader, Prosthodontics	Cultural Secretary (Faculty)
22.	Dr Ashok HK	Sr. Lecturer, Conservative Dentistry	Sports Secretary (Faculty)

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Davananda Sagar College of Benial Sciences

Kuroacaswamy Layout.



December 21, 2020

DSCDS/Internal/OO/2020/ O48

OFFICE ORDER STUDENT COUNCIL MEMBERS – 2020-21

A student council has been reconstituted for the year 2020-21 to implement and promote sports and cultural activities in the academic year in co-ordination with the respective committees. The Student Council is required to adhere to the college policies. Term of the committee will be one year

SL NO	NAME	DESIGNATION	Position Held
1.	Mr. Parikeerthan YP	Intern	President
2.	Ms. Kruthi MS	Intern	Vice President
3.	Ms. Niharika RV	Intern	General Secretary
4.	Ms. Shivani S	Intern	Cultural Secretary
5,	Ms. Minu Kumari	Intern	Sports Secretary
6.	Mr. Navneeth Acharya	Intern	Magazine Editor
7,	Ms. Ishani Das	Intern	Associate Editor
8.	Mr. Dheeraj	I BDS	Student Member
9.	Ms. Meghana	I BDS	Student Member
10.	Ms. Gagan CP	II BDS	Student Member
11.	Ms. Malavikha V	II BDS	Student Member
12.	Mr. Devashish Manibhushan Pandit	III BDS	Student Member
13.	Ms. Sukanya I Kashyap	III BDS	Student Member
14.	Mr. Manoj Kumar TV	IV BDS	Student Member
15.	Ms. Gargi Prakash	IV BDS	Student Member
16.	Ms. Nikitha	Intern	Student Member
17.	Mr. Momik Roy	Intern	Student Member
18.	Mr. Mojtaba Balouch Akbari	Intern	International Student Member
19.	Dr. Suryavanshi Vinaykumar Gurunath	III MDS	Student Member (PG)
20.	Dr Chaya David	Professor & HOD, Oral Medicine	Member Secretary (Faculty)
21.	Dr Karthik Kabbur	Professor, Orthodontics	Sports Secretary (Faculty)
22.	Dr Gargi Murthy	Reader, Pedodontics	Cultural Secretary (Faculty)

PARNOPAPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,



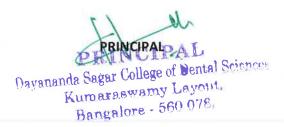
November 15, 2019

DSCDS/Internal/00/2019/049

OFFICE ORDER STUDENT COUNCIL MEMBERS -2019

A student council has been reconstituted for the year 2019-20 to implement and promote sports and cultural activities in the academic year in co-ordination with the respective committees. The Student Council is required to adhere to the college policies. Term of the committee will be one year

SL NO	NAME	Designation	Position Held
1.	Mr. Hemanth Kumar	Intern	President
2.	Ms. Swasthi Bharadwaj	Intern	Vice President
3.	Mr. Kishen KS	Intern	Member Secretary
4.	Ms. Harsha Mohandas	Intern	Cultural Secretary
5.	Mr. Swapnil Rastogi	Intern	Sports Secretary
6.	Ms. Krishna Mohandas	Intern	Magazine Editor
7.:	Ms. Charu Sonagere	Intern	Associate Editor
8.	Mr. Naveen John	Intern	Student Member
9.	Ms. Divya Babu	Intern	Student Member
10.	Mr. Jeff Patrick	I BDS	Student Member
11.	Ms. Shiksha Sunil Mukundappanavar	II BDS	Student Member
12.	Mr. Deepak MP	II BDS	Student Member
13.	Ms. Adamya KA	II BDS	Student Member
14.	Mr. Chandan N	III BDS	Student Member
15.	Ms. Komal Jain	III BDS	Student Member
16,	Mr. Ananthu T Suresh	IV BDS	Student Member
17.	Ms. Rashika Tripathi	IV BDS	Student Member
18.	Mr. Mehrab Mesgarani	IV BDS	International Student Member
19.	Subbu Kashyap	I MDS	Student Member (PG)
20.	Dr Chaya David	Professor & Head, Oral Medicine & Radiology	Member Secretary (Faculty)
21,	Dr Karthik Kabbur	Professor, Dept. of Orthodontics	Sports Secretary (Faculty)
22.	Dr Gargi Murthy	Reader, Dept. of Pedodontics	Cultural Secretary (Faculty)





Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/Internal//OO/2022/35

Date: 01/09/2022

OFFICE ORDER STAFF WELFARE COMMITTEE

Staff Welfare Committee has been reconstituted to look into measures for staff welfare and also redressal of any grievances. The term of the committee shall be for three years.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-person
2.	Dr. Savita AM	Professor and Head, Dept of Periodontics	Member . Secretary
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral Surgery	Member
4.	Dr. Ranjini MA	Reader, Dept. of Conservative Dentistry	Member
5.	Dr. Vidya MA	Senior Lecturer, Dept. of Oral Pathology	Member
6.	Dr. Deepthi M	Senior Lecturer, Dept. of Conservative Dentistry	Member
7.	Dr. Mir Shahid Ulla	Senior Lecturer, Dept. of Prosthodontics	Member
8.	Dr. Prajwal P	Senior Lecturer, Dept. of Orthodontics	Member
9.	Roopa KV	Office Assistant	Member

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Dayananda Sagar College of ficial Sciences Kumaraswamy Layout,

Bangalore - 560 078.



OSCDS/Internal//00/2019/047

Date: 08/11/2019

OFFICE ORDER STAFF WELFARE COMMITTEE

Staff Welfare Committee has been extended over a period of three years to look into measures for staff welfare and also redressal of any grievances.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-person
2.	Dr. Savita AM	Professor and Head, Dept of Periodontics	Member Secretary
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral Surgery	Member
4.	Dr. Ranjini MA	Reader, Dept. of Conservative Dentistry	Member
5.	Dr. Vidya MA	Senior Lecturer, Dept. of Oral Pathology	Member
6.	Roopa KV	Office Assistant	Member

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Dayananda Sagar College & Marital Sciences Kumaraswamy Layout, Bangalore - 560 078.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/Internal//OO/2017-18/

Date: 7/11/2017

OFFICE ORDER

STAFF WELFARE COMMITTEE

Staff Welfare Committee has been constituted to look into measures for staff welfare and also redressal of any grievances. The term of the committee shall be for two years. Committee shall bring out a staff welfare policy.

The committee members are as follows:

SI No.	Name of the Staff	Department & Designation	Position
1	Dr. Hemanth M	Principal, Prof. & Head Dept. of Orthodontics	Chair-person
2.	Dr. Savita AM	Professor and Head, Dept of Periodontics	Member Secretary
3.	Dr. Prashanth NT	Associate Professor, Dept. of Oral Surgery	Member
4.	Dr. Ranjini MA	Reader, Dept. of Conservative Dentitry	Member
5.	Dr. Vidya MA	Senior Lecturer, Dept. of Oral Pathology	Member
6.	Roopa KV	Office Assistant	Member

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Dayananda Sagar College of Santal Sciences

Kumaraewamy Layout,

Bangalore - 560 078.

TEACHING SCHEDULE & CALENDAR OF EVENTS



Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

UNDERGRADUATE ACADEMIC CALENDAR - REGULAR BATCH 2017-18 W.E.F AUGUST 2017

SI. No	Particulars	Month & Year	
1,	Commencement of Classes – I BDS	August 2017	
2.	Term days	01/08/2017 to 31/05/2018	
3.	Last date to Pay the tuition fee – II BDS to IV BDS	10/11/2017	
4.	Vacation for I & II BDS students	Last week of December 2017	
5.	1st Internal Assessment Exam	January 2018	
6.	2 nd Internal Assessment Exam	March 2018	
7,	3 rd Internal Assessment Exam	May 2018	
8.	RGUHS Final Examination	July 2018	

SI. No	Particulars	Month & Year
1,	III BDS Clinical Postings	August 2017 to May 2018
2.	IV BDS Clinical Postings	August 2017 to May 2018
3.	interns postings	September 2017 to September 2018

College Events

SI. No	Particulars Particulars	Month & Year
1.	Orientation Day	August 2017
2.	Antiragging Workshop	August 2017
3.	Fresher's Day	September 2017
4.	Orientation for Interns	September 2017
5.	Cultural Week	October / November 2017
6.	Sports Day	October / November 2017
7.	College Day / Graduation Day	October / November 2017
8.	Clinical Induction and White coat ceremony for III BDS	December 2017
₽.	CDE Program	Two in a Month

List of Holidays

Saturday Thursday Friday Wednesday Friday Saturday Monday Monday Tuesday	Uttrarayana Punyakala, Makara Sankranti Festival Republic Day Mana Shivaratri Chandrama Yugadi Good Friday, Dr. B.R. Ambedkar Jayanthi Basva Jayanti May Day Khutub-E-Ramzan Independence Day
Friday Wednesday Friday Saturday Monday Monday	Mana Shivaratri Chandrama Yugadi Good Friday, Dr. B.R. Ambedkar Jayanthi Basva Jayanti May Day Khutub-E-Ramzan
Wednesday Friday Saturday Monday Monday	Chandrama Yugadi Good Friday, Dr. B.R. Ambedkar Jayanthi Basva Jayanti May Day Khutub-E-Ramzan
Friday Saturday Monday Monday	Good Friday, Dr. B.R. Ambedkar Jayanthi Basva Jayanti May Day Khutub-E-Ramzan
Saturday Monday Monday	Basva Jayanti May Day Khutub-E-Ramzan
Monday Monday	May Day Khutub-E-Ramzan
Monday	Khutub-E-Ramzan
Tuesday	Independence Day
	meeperidense bay
Friday	Varasiddhi Vinayaka Vrata
Saturday	Bakrid \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
Tuesday	Mahalaya Amavasye
Friday	Maha Navmi, Ayudhapooja
Saturday	Vijyayadasami Gandhi Jayanti Dayananda Sagar College of Dandal Sagar College
Monday	Gandhi Jayanti Dayananda Sagar College of Layanth. Kumaraswamy Layanth. Kumaraswamy Cayanth.
	Saturday



Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

16.	05.10.2017	Thursday	Maharshi Valmiki Jayanthi , Eid- Milad	
17.	18.10.2017	Wednesday	Naraka Chaturdashi	
18.	20.10.2017	Friday	Balipadyami, Deepavali	
19.	01.11.2017	Wednesday	Kannada Rajyothsava	
20.	0611.2017	Monday	Kanakadasa Jayanthi	
21.	01.12.2017	Friday	Eid-Meelad	
22.	25.12.2017	Monday	Christmas	

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

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Sha'rige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

UNDERGRADUATE ACADEMIC CALENDAR - REGULAR BATCH 2018-19 W.E.F AUGUST 2018

SI. No	Particulars	Month & Year	
1.	Commencement of Classes	August 2018	
2.	. Term days 23/8/2018 to 31/05,		
3.	Last date to Pay the tuition fee – II BDS to IV BDS 19/09/2018		
4.	Vacation for I & II BDS	Last week of December 2018	
5.	1st Internal Assessment Exam December 2018		
6.	2 nd Internal Assessment Exam February 2019		
J.	3 rd Internal Assessment Exam April 2019		
8.	RGUHS'Final Examination	July 2019	

Clinical Postings

SI. No	Particulars	Month & Year
1.	III BDS Clinical Postings August 2018 to July	
2.	IV BDS Clinical Fostings	August 2018 to July 2019
3.	Interns postings	September 2018 to Sept 2019

College Events

SI. No	Particulars Particulars	Month & Year
1,	Orientation Day	August 2018
2.	Antiragging Workshop	August 2018
3.	Clinical Induction and White Coat Ceremony for III BDS students	August 2018
4.	Orientation for Interns	August 2018
5،	Fresher's Day	September 2018
6.	Cultural Week	October / November 2018
7.	Sports Day	October / November 2018
8.	College Day / Graduation Day	October / November 2018
9.	Soft skill program	May 2019
10,	CDE Program	Two in a Month

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Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

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Bangalore - 560 078.



Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

List of Holidays

SL. NO.	DATE	DAYS	PUBLIC HOLIDAYS
1	15.01.2018	Monday	Uttrarayana Punyakala, Makarr Sankranti Festival
2	26.01.2018	Friday	Republic Day
3	01.03.2022	Tuesday	Maha Shivaratri
4	29.03.2018	Thursday	Mahaveera Jayanthi
5	30.03.2018	Friday	Good Friday
6	18.04.2018	Wednesday	Basva Jayanti
7	01.05.2018	Tuesday	May Day
8	16.06.2018	Saturday	Khutub-E-Ramzan
9	15.08.2018	Wednesday	Independence Day
10	22.082018	Wednesday	Bakrid
11	19.09.2018	Thursday	Varasiddhi Vinayaka Vrata
12	21.09.2018	Friday	Last Day of Moharam
13	02.10.2018	Tuesday	Gandhi Jayanti
14	08.10.2018	Monday	Mahalaya Amavasye
15	18.10.2018	Thursday	Maha Navmi, Ayudhapooja
16	09.102018	Friday	Vijyayadasami
17	24.10.2018	Wednesday	Maharshi Valmiki Jayanthi
18	01.11.2018	Thursday	Kannada Rajyothsava
19	24.10.2022	Tuesday	Naraka Chaturdashi
20	08.11.2018	Thursday	Balipadyami, Deepavali
21	21.11.2018	Wednesday	Idd-Meelad
22	26.11.2018	Monday	Kanakadasa Jayanthi
23	25.12.2018	Tuesday	Christmas Day

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

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Dayananda Sagar College of Bental Sciences

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

Undergraduate Academic Calendar – Regular Batch 2019-20 w.e.f August 2019

SI. No	Particulars	Month & Year	
1.	Commencement of Classes	August 2019	
2.	Term days	01/08/2019 to 31/05/2020	
3.	Last date to Pay the tuition fee – II BDS to IV BDS	14/11/2019	
4.	Vacation for I & II BDS	Last week of December 2019	
5.	1st Internal Assessment Exam	November 2019	
6.	2 nd Internal Assessment Exam	February 2020	
7.	3 rd Internal Assessment Exam	April 2020	
8.	RGUHS Final Examination	June /July 2020	

Clinical Postings

SI. No	Particulars	Month & Year
1.	III BDS Clinical Postings	August 2019 to July 2020
2.	IV BDS Clinical Postings	August 2019 to July 2020
3.	Interns postings	September 2019 to Sept 2019

College Events

SI. No	Particulars	Month & Year	
1.	Orientation Day	August 2019	
2.	Antiragging Wo: kshop	August 2019	
3.	Clinical Induction and White Coat Ceremony for III BDS students	August 2019	
4.	Fresher's Day	September 2019	
5.	Orientation for Interns	September 2019	
6.	Cultural Week	October / November 2019	
7.	Sports Day	October / November 2019	
8.	. College Day / Graduation Day October / Nov		
9.			
10.	Mentorship program	Feb & May 2020	
11.	CDE Program	Two in a Month	

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Shavige Malleshwara Hills, Kumaraswamy Layo It Bangalore – 560 078

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS	
1	15.01.2019	Tuesday	Uttrarayana Punyakala, Makara Sankranti Festival	
2	26.01.2019	Saturday	Republic Day	
3	04.03.2019	Monday	Maha Shivaratri	
4	06.04.2019	Saturday	Ugadi Festival	
5	17.04.2019	Wednesday	Mahaveera Jayanthi	
6	19.04.2019	Friday	Good Friday	
7	01.052019	Wednesday	May Day	
8	07.04.2019	Tuesday	Basva Jayanti	
9	05.06.2019	Wednesday	Khutub-E-Ramzan	
10	12.08.2019	Monday	Bakrid	
11	15.08.2019	Thursday	Independence Day	
12	02.09.2019	Monday	Varasiddhi Vinayaka Vrata	
13	10.09.2019	Tuesday	Last Day of Moharam	
14	28.09.2019	Saturday	Mahalaya Amavasye	
15	02.10.2019	Wednesday	Gandhi Jayanti	
16	07.10.2019	Monday	Maha Navmi, Ayudhapooja	
17	08.10.2019	Tuesday	Vijyayadasami	
18	29.10.2019	Tuesday	Balipadyami, Deepavali	
19	01.11.2019	Friday	Kannada Rajyothsava	
20	15.11.2019	Friday	Kanakadasa Jayanthi	
21	25.12.2019	Wednesday	Christmas Day	

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalora - 560 078.

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Shavige Malleshwara Hills, Kumaraswamy Layout
Bangalore – 560 078

UNDERGRADUATE ACADEMIC CALENDAR - REGULAR BATCH 2020-21

SI. No	Particulars	Month & Year
1.	Commencement of Classes for II BDS to IV BDS	December 2020
2.	Term days	21/12/2020 to 09/09/2021
3.	Last date to Pay the tuition fee – II BDS to IV BDS	30/01/2021
4.	Commencement of Classes for I BDS	December 2020
5.	1st Internal Assessment Exam	January 2021
6.	2 nd Internal Assessment Exam	March 2021
7.	3 rd Internal Assessment Exam	April 2021
8.	RGUHS Final Examination	October 2020

Clinical Postings

SI. No	Particulars	Month & Year
1.	III BDS Clinical Postings	December 2020 to September 2021
2.	IV BDS Clinical Postings	December 2020 to September 2021
3.	Interns postings	December 2020 to December 2021

College Events

SI. No	Particulars	Month & Year
1.	Orientation Day	December 2020
2.	Antiragging Workshop	December 2020
3.	Clinical Induction and White Coat Ceremony for III BDS students	December 2020
4.	Orientation for Interns	December 2020
5.	Cultural Week	November / December 2021
6.	Sports Day	November / December 2021
7.	College Day / Graduation Day	November / December 2021
8.	CDE Program	2 in a month
9.	Mentorship Meetings	Feb 2021 and September 2021

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS
1.	15.01.2020	Wednesday	Uttrarayana Punyakala, Makara Sankranti Festival
2.	21.02.2020	Friday	Maha Shivaratri
3.	25.03.2020	Wednesday	Ugadi Festival
4.	06.04.2020	Monday	Mahaveer Jayanthi
5.	10.04.2020	Friday	Good Friday
6.	14.04.2020	Tuesday	Dr. B.R. Ambedkar Jayanthi
7	01.05.2020	Friday	May Day
8.	25.05.2020	Monday	Khutub-E-Ramzən
9.	01.08.2020	Saturday	Bakrid
10.	15.08.2020	Saturday	Independence Day
11.	17.09.2020	Thursday	Mahalaya Amavasye
12.	02.10.2020	Friday	Gandhi Jayanti
13.	26.10.2020	Monday	Vijyayadasami
14.	30.10.2020	Friday	Eid-Milad
15,	31.10.2020	Saturday	Maharshi Valmiki Jayanthi , Eid- Milad
16.	16:11.2020	Monday	Balipadyami, Deepavali
17.	03.12.2020	Thursday	Kanakadasa Jayanthi
18.	25.12.2020	Friday	Christmas

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



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UNDERGRADUATE ACADEMIC CALENDAR – REGULAR BATCH 2021-22

SI. No	Particulars	Month & Year
1.	Commencement of Classes for II to IV BDS	December 2021
2.	Term days	18/12/2021 to 18/10/2022
3.	Commencement of Classes for I BDS	March 2022
4.	Term days	01/03/2021 to 31/01/2023
5.	1st Internal Assessment Exam for II to IV BDS	June 2022
6.	1st Internal Assessment Exam for I BDS	July 2022
7.	2 nd Internal Assessment Exam for II to IV BDS	Aug 2022
8.	2 nd Internal Assessment Exam for I BDS	September 2022
9.	3 rd Internal Assessment Exam for II to IV BDS	October 2022
10.	3 rd Internal Assessment Exam for I BDS	November 2022
11.	RGUHS Final Examination for !! 3DS to IV BDS	November 2022
12.	RGUHS Final Examination for 1 BDS	Tentatively Feb 2023

Clinical Postings

SI. No	Particulars	Month & Year
1.	III BDS Clinical Postings	December 2021 to Oct 2022
2.	IV BDS Clinical Postings	December 2021 to Oct 2022
3.	Interns postings	December 2021 to December 2022

College Events

SI. No	Particulars	Month & Year
1.	Orientation for Interns	December 2021
2.	Orientation Day & White coat Ceremony	April 2022
3.	Antiragging Workshop	June 2022
4.	Fresher's Day	July 2022
5.	Soft skill	August 2022
6.	Cultural Week	October / November 2022
7.	Sports Day	October / November 2022
8.	College Day / Graduation Day	October / November 2022
9.	CDE Program	2 in a Month
10.	Mentorship Pro gram	Jan, June 2022

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS
1.	14.01.2021	Thursday	Uttrarayana Punyakala, Makara Sankranti Festival
2.	26.01.2021	Tuesday	Republic Day
3.	11.01.2021	Thursday	Maha Shivaratri
4.	02.04.2021	Friday	Good Friday
5.	13.04.2021	Tuesday	Ugadi Festival
6.	14.04.2021	Wednesday	Dr. B.R. Ambedkar Jayanthi
7.	01.05.2021	Saturday	May Day
8.	14.05.2021	Friday	Basva Jayanti/ Akshaya Tritiya, Khutub-E-Ramzan
9.	21.07.2021	Wednesday	Bakrid
10.	20.08.2021	Friday	Last Day of Moharam
11.	10.09.2021	Friday	Varasiddhi Vinayaka Vrata
12.	02.10.2021	Saturday	Gandhi Jayanti
13.	06.10.2021	Wednesday	Mahalaya Amavasye
14.	14.10.2021	Thursday	Maha Navmi, Ayudhapooja
15.	15.10.2021	Friday	Vijyayadasami
16.	20.10.2021	Wednesday	Maharshi Valmiki Jayanthi , Eid- Milad
17.	01.11.2021	Monday	Kannada Rajyothsava
18.	03.11.2021	Wednesday	Naraka Chaturdashi
19.	05.11.2021	Friday	Balipadyami, Deepavali
20.	22.11.2021	Monday	Kanakadasa Jayanthi

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

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Dayananda Sagar College of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

UNDERGRADUATE ACADEMIC CALENDAR – ODD BATCH 2017-18

SI. No	Particulars	Month & Year
1.	Commencement of Classes – II to IV BDS	February 2017
2.	Term days	01/02/2017 to 30/11/2017
3.	Last date for payment of tuition Fee for II to IV BDS	25/04/2017
4.	1st Internal Assessment Exam	July 2017
5.	2 nd Internal Assessment Exam	September 2017
6.	3 rd Internal Assessment Exam	November 2017
7.	RGUHS Final Examination	December 2017

Clinical Postings

SI. No	Particulars	Month 8: Year
1.	III BDS Clinical Postings	Feb 2017 to Nov 2017
2.	IV BDS Clinical Postings	Feb 2017 to Nov 2017
3.	Interns postings	March 2017 to March 2018

College Events

SI. No Particulars	Month & Year
1. Orientation for Interns	March 2017
2. Clinical Induction and White coat ceremony for III i	BDS August 2017
3. Fresher's Day	September 2017
4. Cultural Week	September 2017
5. Sports Day	September 2017
6. College Day / Graduation Day	September 2017
7. CDE Program	2 in a Month

List of Holidays

SL.NO.	DATE	DAYS	GENERAL HOLIDAYS	
1.	14.01.2017	Saturday	Uttrarayana Punyakala, Makara Sankranti Festival	
2.	26.01.2017	Thursday	Republic Day	
3.	21.02.2017	Friday	Maha Shivaratri	
4.	29.03.2017	Wednesday	Chandrama Yugadi	
5,	14.04.2107	Friday	Good Friday, Dr. B.R. Ambedkar Jayanthi	
6.	29.04.2017	Saturday	Basva Jayanti	
7.	01.05.2017	Monday	May Day	
8.	26.06.2017	Monday	Khutub-E-Ramzan	
9.	15.08.2017	Tuesday	Independence Day	
10.	25.08.2017	Friday	Varasiddhi Vinayaka Vrata	
11.	02.09.2017	Saturday	Bakrid	
12.	19.09.2017	Tuesday	Mahalaya Amavasye	
13.	29.09.2017	Friday	Maha Navmi, Ayudhapooja	
14.	30.09.2017	Saturday	Vijyayadasami	
₋ 15.	02.10.2017	Monday	Gandhi Jayanti	
16.	05.10.2017	Thursday	Maharshi Valmiki Jayanthi , Eid- Milad	
17.	18.10.2017	Wednesday	Naraka Chaturdashi	
18.	20.10.2017	Friday	Balipadyami, Deepavali	
19.	01.11.2017	Wednesday	Kannada Rajyothsava	
20.	0611.2017	Monday	Kanakadasa Jayanthi	
21.	01.12.2017	Friday	Eid-Meelad \\	
22.	25.12.2017	Monday	Christmas	

Note: Dates mentioned are tentative, any changes as per Government and RGU POTE ALL will be notified accordingly.

Dayananda Sagar College of Bental Science.

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UNDERGRADUATE ACADEMIC CALENDAR – ODD BATCH 2018-19

SI. No	Particulars	Month & Year February 2018	
1.	Commencement of Classes – II to IV BDS		
2.	Term days	01/02/2018 to 30/11/2018	
3.	Last date to Pay the tuition fee – II BDS to IV BDS		
4.	1st Internal Assessment Exam	August 2018	
5.,	2 nd Internal Assessment Exam	October 2018	
6.	3 rd Internal Assessment Exam	November 2018	
7.	RGUHS Final Examination	Dec / Jan - 2018-19	

Clinical Postings

SI. No	Particulars	Month & Year	
1. III BDS Clinical Postings		Feb 2018 to Nov 2019	
2.	IV BDS Clinical Postings	Feb 2018 to Nov 2019	
3.	Interns postings	Feb 2018 to Feb 2019	

College Events

SI. No	Particulars	Month & Year February 2018		
1.	Orientation for Interns			
2.	Clinical Induction and White coat ceremony for III BDS	August 2018		
3.	Fresher's Day	September 2018		
4.	Cultural Week	October / November 2018		
5.	Sports Day	October / November 2018		
€.	College Day / Graduation Day October / November			
7.	. CDE Prógram 2 in a month			

List of Holidays

SL. NO.	DATE	DAYS	PUBLIC HOLIDAYS	
1	15.01.2018	Monday	Uttrarayana Punyakala, Makara Sankranti Festival	
2	26.01.2018	Friday	Republic Day	
3	01.03.2022	Tuesday	Maha Shivaratri	
4	29.03.2018	Thursday	Mahaveera Jayanthi	
5	30.03.2018	Friday	Good Friday	
6	18.04.2018	Wednesday	Basva Jayanti	
7	01.05.2018	Tuesday	May Day	
8	16.06.2018	Saturday	Khutub-E-Ramzan	
9	15.08.2018	Wednesday	Independence Day	
10	22.082018	Wednesday	Bakrid	
11	19.09.2018	Thursday	Varasiddhi Vinayaka Vrata	
12	21.09.2018	Friday	Last Day of Moharam	
13	02.10.2018	Tuesday	Gandhi Jayanti	
14	08.10.2018	Monday	Mahalaya Amavasye	
15	18.10.2018	Thursday	Maha Navmi, Ayudhapooja	
16	09.102018	Friday	Vijyayadasami	
17	24.10.2018	Wednesday	Maharshi Valmiki Jayanthi	
18	01.11.2018	Thursday	Kannada Rajyothsava	
19	24.10.2022	Tuesday	Naraka Chaturdashi	
20	08.11.2018	Thursday	Balipadyami, Deepavali	
21	21.11.2018	Wednesday	Idd-Meelad	
22	26.11.2018	Monday	Kanakadasa Jayanthi	
23	25.12.2018	Tuesday	Christmas Day	

Note: Dates mentioned are tentative, any changes as per Government and REPIRITE IN CEPTAL will be notified accordingly. Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,



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UNDERGRADUATE ACADEMIC CALENDAR - ODD BATCH 2019-20

SI. No	Particulars	Month & Year January 2019	
1.	Commencement of Classes for II BDS to IV BDS		
2.	Term days	20/01/2019 to 30/11/2019	
3.	Last date to Pay the tuition fee – If BDS to IV BDS	28/02/2019	
4.	1st Internal Assessment Exam	April 2019	
5.	2 nd Internal Assessment Exam	July 2019	
6.	3 rd Internal Assessment Exam	October 2019	
7	RGUHS Final Examination	Dec / Jan - 2019-20	

Clinical Postings

SI. No	Particulars	Month & Year	
1. III BDS Clinical Postings		Jan 2019 to Nov 2019	
2.	IV BDS Clinical Postings	Jan 2019 to Nov 2019	
3.	Interns postings	Feb 2019 to Feb 2020	

College Events

SI. No	Particulars	Month & Year · February 2019	
1.	Orientation for Interns		
2.	Soft skill program	May 2019	
3.	Clinical Induction and White Coat Ceremony for III BDS students	August 2019	
4.	Fresher's Day	September 2019	
5.	Cultural Week	October / November 2019	
6.	Sports Day	October / November 2019	
7	College Day / Graduation Day	October / November 2019	
8.	CDE Program	2 in a Month	

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS	
1	15.01.2019	Tuesday	Uttrarayana Punyakala, Makara Sankranti Festival	
2	26.01.2019	Saturday	Republic Day	
3	04.03.2019	Monday	Maha Shivaratri	
4	06.04.2019	Saturday	Ugadi Festival	
5	17.04.2019	Wednesday	Mahaveera Jayanthi	
6	19.04.2019	Friday	Good Friday	
7	01.052019	Wednesday	May Day	
8	07.04.2019	Tuesday	Basva Jayanti	
9	05.06.2019	Wednesday	Khutub-E-Ramzan	
10	12.08.2019	Monday	Bakrid	
11	15.08.2019	Thursday	Independence Day	
12	02.09.2019	Monday	Varasiddhi Vinayaka Vrata	
13	10.09.2019	Tuesday	Last Day of Moharam	
14	28.09.2019	Saturday	Mahalaya Amavasye	
15	02.10.2019	Wednesday	Gandhi Jayanti	
16	07.10.2019	Monday	Maha Navmi, Ayudhapooja	
17	08.10.2019	Tuesday	Vijyayadasami	
18	29.10.2019	Tuesday	Balipadyami, Deepavali	
19	01.11.2019	Friday	Kannada Rajyothsava	
20	15.11.2019	Friday	Kanakadasa Jayanthi	H
21	25.12.2019	Wednesday	Christmas Day	PRINCIPAL

Note: Dates mentioned are tentative, any changes as per Governant and Sagar College of Dental Sciences will be notified accordingly.

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<u>UNDERGRADUATE ACADEMIC CALENDAR - ODD BATCH 2020-21</u>

Sl. No	Particulars	Month & Year	
Commencement of Classes for II BDS to IV BDS		January 2020	
2.	Term d'ays	16/01/2020 to 15/03/2021	
3.	Last date to Pay the tuition fee – II BDS to IV BDS	10/03/2020	
4.	1st Internal Assessment Exam	April 2020	
5.	2 nd Internal Assessment Exam	August 2020	
6.	3 rd Internal Assessment Exam	November 2020	
7	RGUHS Final Examination	Dec / Jan 2021-22	

Clinical Postings

SI. No	Particulars	Month & Year
1	III BDS Clinical Postings	Jan 2020 to Mar 2021
2. IV BDS Clinical Postings		Jan 2020 to Mar 2021
3.	Interns postings	Feb 2020 to Feb 2021

College Events

SI. No	Particulars Particulars	Month & Year January 2020	
1.	Clinical Induction and White Coat Ceremony for III BDS students		
2.	Orientation for Interns	February 2020	
3.	Soft skill	July 2020	
4.	Cultural Week	November / December 2021	
* 5.	Sports Day	November / December 2021	
6.	College Day / Graduation Day	November / December 2021	
7.	CDE Program	2 in a month	
8.	Mentorship Meetings	May 2020 and Feb 2021	

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS	
1.	15.01.2020	Wednesday	Uttrarayana Punyakala, Makara Sankranti Festival	
2.	21.02.2020	Friday	Maha Shivaratri	
3.	25.03.2020	Wednesday	Ugadi Festival	
4.	06.04.2020	Monday	Mahaveer Jayanthi	
5.	10.04.2020	Friday	Good Friday	
6.	14.04.2020	Tuesday	Dr. B.R. Ambedkar Jayanthi	
7.	01.05.2020	Friday	May Day	
8.	25.05.2020	Monday	Khutub-E-Ramzan	
9.	01.08.2020	Saturday	Bakrid	
10,	15.08.2020	Saturday	Independence Day	
11.	17.09.2020	Thursday	Mahalaya Amavasye	
12.	02.10.2020	Friday	Gandhi Jayanti	
13.	26.10.2020	Monday	Vijyayadasami	
^ 14.	30.10.2020	Friday	Eid-Milad	
15.	31.10.2020	Saturday	Maharshi Valmiki Jayanthi , Eid- Milad	
16.	16.11.2020	Monday	Balipadyami, Deepavali	
17.	03.12.2020	Thursday	Kanakadasa Jayanthi	
18.	25.12.2020	Friday	Christmas	

Note: Dates mentioned are tentative, any changes as per Government and a Contraction Dental Sciences will be notified accordingly.

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

UNDERGRADUATE ACADEMIC CALENDAR – ODD BATCH 2021-22

SI. No	Particulars	Month & Year April 2021	
1.	Commencement of Classes for II to IV BDS		
2.	Term days	26/04/2021 to 28/02/2022	
3.	Last date to Pay the tuition fee – II BDS to IV BDS	10/07/2021	
4.	1st Internal Assessment Exam for II to IV BDS	August 2021	
5.	2 nd Internal Assessment Exam for II to IV BDS	January 2022	
6.	3 rd Internal Assessment Exam for II to IV BDS	February 2022	
7.	RGUHS Final Examination for II BDS to IV BDS	March / April 2022	

Clinical Postings

SI. No	Particulars	Month & Year	
1.	III BDS Clinical Postings	April 2021 to Feb 2022	
2. IV BDS Clinical Postings		April 2021 to Feb 2022	
3.	Interns postings	May 2021 to May 2022	

College Events

SI. No	Particulars	Month & Year	
1.	Orientation for interns	May 2021	
2.	Clinical Induction and White coat ceremony for III BDS	February 2022	
3.	Orientation Day & White coat Ceremony	April 2022	
4.	Fresher's Day	July 2022	
5.	Cultural Week	October / November 2022	
6.	Sports Day	October / November 2022	
7.	College Day / Graduation Day	October / November 2022	
8.	CDE Program	2 in a month	
9.	Mentorship Meetings	September 2021, January 2022	

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS
1.	14.01.2021	Thursday	Uttrarayana Punyakala, Makara Sankranti Festival
2.	26.01.2021	Tuesday	Republic Day
3.	11.01.2021	Thursday	Maha Shivaratri
4.	02.04.2021	Friday	Good Friday
5.	13.04.2021	Tuesday	Ugadi Festival
6.	14.04.2021	Wednesday	Dr. B.R. Ambedkar Jayanthi
7.	01.05.2021	Saturday	May Day
8.	14.05.2021	Friday	Basva Jayanti/ Akshaya Tritiya, Khutub-E-Ramzan
9.	21.07.2021	Wednesday	Bakrid
10.	20.08.2021	Friday	Last Day of Moharam
11.	10.09.2021	Friday	Varasiddhi Vinayaka Vrata
12.	02.10.2021	Saturday	Gandhi Jayanti
13.	06.10.2021	Wednesday	Mahalaya Amavasye
14.	14.10.2021	Thursday	Maha Navmi, Ayudhapooja
15.	15.10.2021	Friday	Vijyayadasami
16.	20.10.2021	Wednesday	Maharshi Valmiki Jayanthi , Eid- Milad
17,	01.11.2021	Monday	Kannada Rajyothsava
18.	03.11.2021	Wednesday	Naraka Chaturdashi
19.	05.11.2021	Friday	Balipadyami, Deepavali
20.	22.11.2021	Monday	Kanakadasa Jayanthi

Note: Dates mentioned are tentative, any changes as per Government and Research Dental Sciences will be notified accordingly.

Dayananda Sagar College of Bental Sciences

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560 078

POSTGRADUATE ACADEMIC CALENDAR - 2017-18 W.E.F MAY 2017

SI. No	Particulars	Month & Year		
1.	Commencement of Classes	June 2017		
2.	Term day	June 2017 to June 2018		
3.	Last date for payment of tuition Fee for II & III MDS			
4.	Orientation Day	June 2017		
5.	Synopsis Presentation – Institutional Review Board	October 2017		
6.	Synopsis Submission to RGUHS	November 2017		
7.	Submission of Dissertation	November 2017		
8.	Mock Examination	March / April 2018		
9.	RGUHS Final Examination	June / July 2018		
10.	Conference and PG Convention	2 per year		

College Events

SI. No	Particulars	Month & Year
1. Fresher's Day		September 2017
2.	Cultural Week	October / November 2017
3.	Sports Day	October / November 2017
4.	College Day / Graduation Day	October / November 2017
5,	CDE Program	1 in a month

List of Holidays

SL.NO.	DATE	DAYS	GENERAL HOLIDAYS
1.	14.01.2017	Saturday	Uttrarayana Punyakala, Makara Sankranti Festival
2.	26.01.2017	Thursday	Republic Day
3.	21.02.2017	Friday	Maha Shivaratri
4.	29.03.2017	Wednesday	Chandrama Yugadi
5.	14.04.2107	Friday	Good Friday, Dr. B.R. Ambedkar Jayanthi
6.	29.04.2017	Saturday	Basva Jayanti
7,	01.05.2017	Monday	May Day
8.	26.06.2017	Monday	Khutub-E-Ramzan
9.			Independence Day
ĩ0.	10. 25.08.2017 Friday		Varasiddhi Vinayaka Vrata
11.	02.09.2017	Saturday	Bakrid
12.	19.09.2017	Tuesday	Mahalaya Amavasye
13.	29.09.2017	Friday	Maha Navmi, Ayudhapooja
14.	30.09.2017	Saturdáy	Vijyayadasami
15.	02.10.2017	Monday	Gandhi Jayanti
16.	05.10.2017	Thursday	Maharshi Valmiki Jayanthi , Eid- Milad
17.	18.10.2017	Wednesday	Naraka Chaturdashi
18.	20.10.2017	Friday	Balipadyami, Deepavali
19.	01.11.2017	Wednesday	Kannada Rajyothsava

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20.	0611.2017	Monday	Kanakadasa Jayanthi
21.	01.12.2017	Friday	Eid-Meelad
22.	25.12.2017	Monday	Christmas

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

Dayananda Sagar College of Bental Sci Kumaraswamy Layout, Bangalore - 560 078.



Postgraduate Academic Calendar – 2018-19 w.e.f May 2018

SI. No	Particulars	Month & Year
1.	Commencement of Classes	June 2018
2.	Term days	June 2018 to June 2019
3.	Last date for payment of tuition Fee for II & III MDS	15/06/2018
4.	Orientation Day	June 2018
5.	Synopsis Presentation – Institutional Review Board	October 2018
6.	Synopsis Submission to RGUHS	November 2018
7,.	Submission of Dissertation	November 2018
8.	Mock Examination (I & III MDS)	March / April 2019
9.	RGUHS Final Examination for I and III MDS	June / July 2019
10.	Conference and PG Convention	2 per year

College Events

SI. No	Particulars	Month & Year	
1.	Fresher's Day	September 2018	
2.	Cultural Week	October / November 2018	
3. Sports Day		October / November 2018	
4. College Day / Graduation Day		October / November 2018	
5.	CDE Program	1 in a month	

List of Holidays

SL. NO.	DATE	DAYS	PUBLIC HOLIDAYS
1	15.01.2018	Monday	Uttrarayana Punyakala, Makara Sankranti Festival
2	26.01.2018	Friday	Republic Day
3	01.03.2022	Tuesday	Maha Shivaratri
4	29.03.2018	Thursday	Mahaveera Jayanthi
5	30.03.2018	Friday	Good Friday
6	18.04.2018	Wednesday	Basva Jayanti
7	01.05.2018	Tuesday	May Day
8	16.06.2018	Saturday	Khutub-E-Ramzan
9	15.08.2018	Wednesday	Independence Day
10	22.082018	Wednesday	Bakrid
11	19.09.2018	Thursday	Varasiddhi Vinayaka Vrata
12	21.09.2018	Friday	Last Day of Moharam
13	02.10.2018	Tuesday	Gandhi Jayanti
14	08.10.2018	Monday	Mahalaya Amavasye
15	18.10.2018	Thursday	Maha Navmi, Ayudhapooja
16	09.102018	Friday	Vijyayadasami
17	24.10.2018	Wednesday	Maharshi Valmiki Jayanthi
18	01.11.2018	Thursday	Kannada Rajyothsava
19	24.10.2022	Tuesday	Naraka Chaturdashi
20	08.11.2018	Thursday	Naraka Chaturdashi Balipadyami, Deepavali Idd-Meelad Kanakadasa Javanthi
21	21.11.2018	Wednesday	Balipadyami, Deepavali Idd-Meelad Kanakadasa Jayanthi
22	26.11.2018	Monday	Kanakadasa Jayanthi

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ij	23	25.12.2018	Tuesday	Christmas Day

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

Dayananda Sagar College of Bental Sciences
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Postgraduate Academic Calendar – 2019-20 w.e.f May 2019

SI. No	Particulars	Month & Year	
1.	Commencement of Classes	June 2019	
2.	Term days	June 2019 to June 2020	
3.	Last date for payment of tuition Fee for II & III MDS	20/06/2019	
4.	Orientation Day	June 2019	
5.	Synopsis Presentation – Institutional Review Board	October 2019	
6.	Synopsis Submission to RGUHS	October 2019	
7.	Submission of Dissertation	July 2019	
8.	Mock Examination (I & III MDS)	March / April 2020	
9.	RGUHS Final Examination for I and III MDS	June / July 2019	
10.	Conference and PG Convention	2 per year	

College Events

Sl. No	Particulars Particulars	Month & Year
1.	Fresher's Day	September 2019
2.	Cultural Week	October / November 2019
3.	Sports Day	October / November 2019
4.	Collège, Day / Graduation Day	October / November 2019
5.	CDE Program	1 in a month

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS	
1	15.01.2019	Tuesday	Uttrarayana Punyakala, Makara Sankranti Festival	
2	26.01.2019	Saturday	Republic Day	
3	04.03.2019	Monday	Maha Shivaratri	
4	06.04.2019	Saturday	Ugadi Festival	
5	17.04.2019	Wednesday	Mahaveera Jayanthi	
6	19.04.2019	Friday	Good Friday	
7	01.052019	Wednesday	May Day	
8	07.04.2019	Tuesday	Basva Jayanti	
9	05.06.2019	Wednesday	Khutub-E-Ramzan '	
10	12.08.2019	Monday	Bakrid	
11	15.08.2019	Thursday	Independence Day	
12	02.09.2019	Monday	Varasiddhi Vinayaka Vrata	
13	10.09.2019	Tuesday	Last Day of Moharam	
14	28.09.2019	Saturday	Mahalaya Amavasye	
15	02.10.2019	Wednesday	Gandhi Jayanti	
16	07.10.2019	Monday	Maha Navmi, Ayudhapooja Vijyayadasami Balipadyami, Deepavali Deepavali	
17	08.10.2019	Tuesday	Vijyayadasami PR Callege of Bentall	
18	29.10.2019	Tuesday	Balipadyami, Deepavali Dayananda Sagar College of Dayant Rumarnawany Layant Rangalore - 560 078	



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19	01.11.2019	Friday	Kannada Rajyothsava
20	15.11.2019	Friday	Kanakadasa Jayanthi
21	25.12.2019	Wednesday	Christmas Day

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

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POSTGRADUATE ACADEMIC CALENDAR - 2020-21

SI. No	Particulars	Month & Year
1.	Commencement of Classes	August 2020
2.	Term days	August 2020 to May 2021
3.	Last date for payment of tuition Fee for II & III MDS	20/06/2020
4.	Orientation Day	August 2020
5.	Submission of Dissertation for III MDS	November 2020
6.	Synopsis Presentation – Institutional Review Board	February 2021
7.	Synopsis Submission to RGUHS for I MDS	February 2021
8.	Mock Examination for I & III MDS	March /April 2021
9.	RGUHS Final Examination for I &III MDS	May 2021
10.	Conference and PG Convention	2 per year

College Events

SI. No	Particulars	Month & Year September 2020		
1.	Fresher's Day			
2.	Cultural Week	October / November 2020		
3.	Sports Day	October / November 2020		
4.	College Day / Graduation Day	October / November 2020		
5.	CDE Program	1 in a month		

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS			
1.	15.01.2020	Wednesday	Uttrarayana Punyakala, Makara Sankranti Festival			
2.	21.02.2020	Friday	Maha Shivaratri			
3.	25.03.2020	Wednesday	Ugadi Festival			
4.	06.04.2020	Monday	Mahaveer Jayanthi			
5.	10.04.2020	Friday	Good Friday			
6.	14.04.2020	Tuesday	Dr. B.R. Ambedkar Jayanthi			
7.	01.05.2020	Friday	May Day			
8.	25.05.2020	Monday	Khutub-E-Ramzan			
9.	01.08.2020	Saturday	Bakrid			
10.	15.08.2020	Saturday	Independence Day			
11.	17.09.2020	Thursday	Mahalaya Amavasye			
12.	02.10.2020	Friday	Gandhi Jayanti			
13.	26.10.2020	Monday	Vijyayadasami			
14.	30.10.2020	Friday	Eid-Milad			
15.	31.10.2020	Saturday	Maharshi Valmiki Jayanthi , Eid- Milad			
16.	16.11.2020	Monday	Balipadyami, Deepavali			
17.	03.12.2020	Thursday	Kanakadasa Jayanthi			
18.	25.12.2020	Friday	Christmas			

Note: Dates mentioned are tentative, any changes as per Government and RGPRINCTPAL

will be notified accordingly.

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Postgraduate Academic Calendar – 2021-22

Sl. No	Particulars	Month & Year		
1.	Submission of Dissertation for III MDS	November 2020		
2,,	Term days for II & III MDS	June 2021 to June 2022		
3.	Mock Examination for III MDS	May 2022		
4.	RGUHS Final Examination for III MDS	June 2022		
5,	Last date to Pay the tuition fee – II to III MDS	10/08/2021		
6.	Commencement of Classes for I MDS	Feb 2022		
7.	Term days for I MDS	Feb 2022 to Feb 2023		
8.	Orientation Day	February 2022		
9,	Synopsis Presentation – Institutional Review Board	June 2022		
10.	Synopsis Submission to RGUHS for I MDS	June 2022		
11.	RGUHS Final Examination for I MDS	Tentatively Feb 2023		
12.	Conference and PG Convention	2 per year		

College Events

SI. No	Particulars	Month & Year		
1.	Fresher's Day	July 2022		
2.	Cultural Week	November 2022		
3.	Sports Day	November 2022		
4.	College Day / Graduation Day	November 2022		
5.	CDE Program	1 in a month		

List of Holidays

SL.NO.	DATE	DAYS	PUBLIC HOLIDAYS			
1.	14.01.2021	Thursday	Uttrarayana Punyakala, Makara Sankranti Festival			
2.	26.01.2021	Tuesday	Republic Day			
3.	11.01.2021	Thursday	Maha Shivaratri			
4.	02.04.2021	Friday	Good Friday			
5.	13.04.2021	Tuesday	Ugadi Festival			
6.	14.04.2021	Wednesday	Dr. B.R. Ambedkar Jayanthi			
7.	01.05.2021	Saturday	May Day			
8.	14.05.2021	Friday	Basva Jayanti/ Akshaya Tritiya, Khutub-E-Ramzan			
9,	21.07.2021	Wednesday	Bakrid			
10.	20.08.2021	Friday	Last Day of Moharam			
11.	10.09.2021	Friday	Varasiddhi Vinayaka Vrata			
12.	02.10.2021	Saturday	Gandhi Jayanti			
13.	06.10.2021	Wednesday	Mahalaya Amavasye			
14.	14.10.2021	Thursday	Maha Navmi, Ayudhapooja			
15.	15.10.2021	Friday	Vijyayadasami			
16.	20.10.2021	Wednesday	Maharshi Valmiki Jayanthi , ARAN CIPAL			

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17.	01.11.2021	Monday	Kannada Rajyothsava
18.	03.11.2021	Wednesday	Naraka Chaturdashi
19.	05.11.2021	Friday	Balipadyami, Deepavali
20.	22.11.2021	Monday	Kanakadasa Jayanthi

Note: Dates mentioned are tentative, any changes as per Government and RGUHS notifications will be notified accordingly.

Dayananda Sagar College of Bental Science

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August 16, 2016

TIME TABLE FOR I B.D.S 2016 - 2017 (Regular) batch w.e.f 01/09/2016

Days	9 - 10am	10-11am	11-12am	12-1pm		2-4pm	
Monday	Dental Materials Theory	Physiology Theory	DM/Pre-clinical (Cons/Prostho) Batch -A			DA / DH Practicals	
Tuesday	Internal Assessment / Kannada Class	Anatomy Theory	Anatomy Practicals		LUNCH	DM/Pre-clinical (Cons/Prostho) Batch -B	
Wednesday	DA/DH Theory	Physiology Theory	DA / DH Practicals		BREAK	Physiology & Biochemistry Practicals	
Thursday	Biochemistry Theory	Anatomy Theory	Anatomy Practicals			Physiology & Biochemistry Practicals	
Friday	DA/DH	Practicals	Biochemistry DA/DH Theory Theory			Physiology Theory	
Saturday ——————	DA/ DH Theory	Ana	Anatomy Practicals			-	
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Copy to:

5. Human Anatomy

6. Physiology

7. Biochemistry

8. Dental Materials

5. DA / DH 🙈

6. Pre Clinical Conservative

7. Pre Clinical Prosthodontics and

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March 20, 2017

REPEATERS TIME TABLE FOR I B.D.S 2017 - 2018 Odd batch w.e.f 20/03/2017

Days	9 – 10am	10-11am	11-12am	12-1pm		2-4pm
Monday	Dental Materials Theory	Physiology Theory	DM/Pre-clinical (Cons/Prostho) Batch -A Anatomy Practicals			DA /DH Practicals
Tuesday	Internal Assessment / Kannada Class	Anatomy Theory			LUNCH	DM/Pre-clinical (Cons/Prostho) Batch -B
Wednesday	DA/DH Theory	Physiology Theory	DA /DH Practicals		BREAK	Physiology & Biochemistry Practicals
Thursday	Biochemistry Theory	Anatomy Theory	Anatomy Practicals			Physiology & Biochemistry Practicals
Friday	DA /DH	Practicals	Biochemistry DA/ DH Theory Theory			Physiology Theory
Saturday	DA/ DH Theory	Ar	Anatomy Practicals			

Copy to:

1. Human Anatomy

5. DA / DH

2. Physiology

6. Pre Clinical Conservative

3. Biochemistry

7. Pre Clinical Prosthodontics

4. Dental Materials

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September 1, 2018

TIME TABLE FOR I B.D.S 2018 - 2019 (Regular) batch w.e.f 03/09/2018

Darra	9 – 10am	10-11am	11-12am	12-1pm	1	2-4pm DA /DH
Days 1 onday	Dental Materials Theory	Physiology Theory	Anatomy I			Practicals DM/Pre-clinical
Гuesday	Internal Assessment / Kannada	Anatomy Theory	Anaton	ny Practicals	LUNCH	(Cons/Prostho) Batch -B
Wednesday	Class DA/DH Theory	Physiology Theory	DA /DH Practicals		BREAK	Physiology & Biochemistry Practicals
Thursday	Biochemistry Theory	Anatomy Theory	DA / DH	Practicals		Physiology & Biochemistry Practicals
Friday	Anatomy	Anatom	y Practicals	DA/ Di Theory	- 1	Physiology Theory
Saturday	DA/ DH Theory	Biochemist	DM/Pre-clinical		-A	1111111111

Copy to:

5. Human Anatomy

5. DA / DH

6. Physiology

6. Pre Clinical Conservative

7. Biochemistry

7. Pre Clinical Prosthodontics

8. Dental Materials

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January 21, 2019

TIME TABLE FOR I B.D.S 2019 - 2020 (Odd) batch w.e.f 01/02/2019

Days	9 - 10am	10-11am	11-12am	12-1pm		2-4pm	
Monday	Dental Materials Theory	Physiology Theory	Anatomy Practicals				DA / DH Practicals
Tuesday	Internal Assessment / Kannada Class	Anatomy Theory	Anatomy	Practicals	LUNCH	DM/Pre-clinical (Cons/Prostho) Batch -B	
Wednesday	DA/DH Theory	Physiology Theory	DA / DH Practicals		BREAK	Physiology & Biochemistry Practicals	
Thursday	Biochemistry Theory	Anatomy Theory	DA / DH Practicals			Physiology & Biochemistry Practicals	
Friday	Anatomy Theory	Anatomy]	Practicals	DA/ DH Theory		Physiology Theory	
Saturday	DA/ DH Theory	Biochemistry Theory	DM/Pre-clinical (Cons/Prostho) Batch -A				

Copy to:

1. Human Anatomy

2. Physiology

3. Biochemistry \

4. Dental Materials

5. DA / DH for d

6. Pre Clinical Conservative Ju Chal-

7. Pre Clinical Prosthodontics

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DSCDS/Internal/2019-20/

August 20, 2019

TIME TABLE FOR I B.D.S 2019 - 2020 (Regular) batch w.e.f 26/08/2019

Days	9 – 10am	10-11am	11-12am	12-1pm		2-4pm		
Monday	Dental Materials Theory	Physiology Theory	Anatomy Practicals					DA /DH Practicals
Tuesday	Internal Assessment / Kannada Class	Anatomy Theory		y Practicals	LUNCH B	DM/Pre-clinical (Cons/Prostho) Batch -B		
Wednesday	DA/DH Theory	Physiology Theory	DA /DH Practicals DA /DH Practicals		Physiology DA / DH Practicals Theory	DA /DH Practicals	BREAK	Physiology & Biochemistry Practicals
Thursday	Biochemistry Theory	Anatomy Theory				Physiology & Biochemistry Practicals		
Friday	Anatomy Theory	Anatomy		DA/ DH Theory		Physiology Theory		
Saturday	DA/ DH Theory	Biochemistry Theory	DM/Pre-clinical (Cons/Prostho) Batch -A		1			

Copy to:

- 1. Human Anatomy
- 5. DA / DH
- 2. Physiology

- 6. Pre Clinical Conservative
- 3. Biochemistry
- 7. Pre Clinical Prosthodontics
- 4. Dental Materials

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DSCDS/Office-Order/2020-21/06

January 15, 2021 TIME TABLE FOR I B.D.S 2020 - 2021 (Regular) batch w.e.f. 18/01/2021

DAYS	9:00am to 1:00pm	1:00 pm- 1:45 pm	1:45pm - 2:45pm	3:00pm - 4:00pm
	Practicals		The	ory
	Batch A & B : DA / DH	L	DA / DH	Anatomy
Monday Tuesday	Batch A & B: Anatomy – (Dissection / Gen. Histology)	U	DA / DH	Physiology
Wednesday	Batch A & B: Anatomy – (Dissection / Gen. Histology)	N	Anatomy	Biochemistry
Thursday	Batch A & B : DA / DH	C	Biochemistry	Physiology
Friday	Batch – A: Physiology Batch – B: Biochemistry	Н	DA / DH	Anatomy
Saturday	Batch – B: Physiology Batch – A: Biochemistry			

Note: All theory classes shall be through online mode till further information.

Copy to:

- 1. Human Anatomy
- 5. DA / DH
- 2. Physiology
- 6. Pre Clinical Conservative
- 3. Biochemistry
- 7. Pre Clinical Prosthodontics

4. Dental Materials and the same

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November 12, 2016

	Revised TIME	E TABLE FOR II B.D.5	2016 - 2017 Regular Batch w.c		3.00 to 4.00pm
Days	9,00 - 10.00am	10.00 to 11.00am	11.00 to 1.00pm	2.00 to 3.00pm	9
Monday	Pathology / Microbiology Theory	Batch -	Practicals 1 PATHOLOGY 2 Microbiology	PROSTHO	DONTICS
Tuesday	Pre. Clinical Dental Material - Conservative Theory Theory		Dental Materials Practicals Batch-A. Prosthodontics Batch-B. Conservative	Batch 2 - PROSTH Batch 1 - Conserva	
Wednesday	Dental Mater Batch-B. Prosthodontics Batch-A. Conservative	rial Practicals	Pre Clinical Practicals Batch 2 - CONSERVATIVE Batch 1 - Prosthodontics	Theory	Microbiology / Practical
Thursday	With the same of t	heory / Practical	Pre Clinical Practicals Batch 1 -Conservative Batch 2 - Prosthodontics	Pathology / Microbiology Theory / Practical	
Friday	Pre. Clinical Prosthodontics Theory	Microbiology Theory	Pre Clinical Practicals Batch 1 -Prosthodontics Batch 2 - Conservative	Dental Material Theory Prosthodontics	Theory - Oral Pathology
Saturday	Dental Material Theory Conservative	Pharmacology Theory	Pharmacology Practical		

Copy to: 1. Gen. Pathology & Microbiology

4. Pre Clinical Conservative Dentistry / $\ensuremath{\mathsf{DM}}$

2. Pharmacology

5. Pre Clinical Prosthodontics / DM

3. DA / DH

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January 30, 2016

		10.00 to 11.00am	S 2016 - 2017 Odd Batch w.e.f 11.00 to 1.00pm	2.00 to 3.00pm	3,00 to 4.00pm
Days	9.00 - 10.00am		racticals	Dental Material - Theory PROSTHODONTICS	
Monday	Pathology / Microbiology Theory	Batch -	L PATHOLOGY 2 Microbiology		al Practicals
Tuesday	Pre. Clinical Conservative Theory	Dental Material - Theory PROSTHODONTICS	Dental Materials Practicals Batch-A. Prosthodontics Batch-B. Conservative	Batch 2 - PROSTHODONTICS Batch 1 - Conservative	
Wednesday	Batch-B. Prosthodontics	rial Practicals	Pre Clinical Practicals Batch 2 - CONSERVATIVE Batch 1 - Prosthodontics	Pathology / Microbiology Theory / Practical Pathology / Microbiology	
Thursday	Batch-A. Conservative Pharmacology	Theory / Practical	Pre Clinical Practicals Batch 1 - Conservative Batch 2 - Prosthodontics	Theory	/ Practical
Friday	Pre, Clinical Prosthodontics Theory	Microbiology Theory	Pre Clinical Practicals Batch 1 -Prosthodontics Batch 2 - Conservative	Dental Material Theory - Prosthodontics	Theory - Oral Pathology
Saturday	Dental Material Theory Conservative	Pharmacology Theory	Pharmacology Practical		<u></u>

Copy to: 1. Gen. Pathology & Microbiology

2. Pharmacology

3. DA / DH

4. Pre Clinical Conservative Dentistry / DM

5. Pre Clinical Prosthodontics / DM

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Dayananda Sagat Culber of Lated School

March 20, 2017

Days	9.00 – 10.00am	10.00 to 11.00am	11.00 to 1.00pm	2.00 to 3.00pm	3.00 to 4.00pm	
Monday	Pathology / Microbiology Theory	Batch -	Practicals 1 PATHOLOGY 2 Microbiology		erial - Theory ODONTICS	
Tuesday	Pre. Clinical Conservative Theory	Dental Material - Theory PROSTHODONTICS	Theory Dental Materials Practicals Batch-A Prosthodontics		Pre Clinical Practicals Batch 2 - PROSTHODONTICS Batch 1 - Conservative	
Wednesday	Dental Mate Batch-B. Prosthodontics Batch-A. Conservative	rial Practicals	Pre Clinical Practicals Batch 2 - CONSERVATIVE Batch 1 - Prosthodontics		Microbiology / Practical	
Thursday	Pharmacology T	heory / Practical	Pre Clinical Practicals Batch 1 –Conservative Batch 2 – Prosthodontics		Microbiology / Practical	
Friday	Pre. Clinical Prosthodontics Theory	Microbiology Theory	Pre Clinical Practicals Batch 1 –Prosthodontics Batch 2 – Conservative	Dental Material Theory - Prosthodontics	Theory - Oral Pathology	
Saturday	Dental Material Theory Conservative	Pharmacology Theory	Pharmacology Practical	-		

Copy to:

1. Gen. Pathology & Microbiology

4. Pre Clinical Conservative Dentistry / DM

2. Pharmacology

5. Pre Clinical Prosthodontics / DM

3. DA / DH

PRINCIPAL

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Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

March 2, 2018

	Revis	ed TIME TABLE FOR I	I B.D.S 2017 - 2018 Regular Ba	2.00 to 3.00pm	3.00 to 4.00pm
1000	9.00 - 10.00am	10.00 to 11.00am	11,00.40 2.1-1	Dental Mate	rial - Theory
Days Monday	Pre. Clinical Prosthodontics Theory	Naturb -	racticals 1 <u>PATHOLOGY</u> 2 Microbiology	V ====	al Practicals
	Pre. Clinical Conservative Theory	Dental Material - Theory PROSTHODONITICS	Dental Material - Dental Materials Practicals Theory Rathle A. Prosthodontics		ative
Tuesday	T)ental Mate	rial Practicals	Pre Clinical Practicals	Theory	Microbiology / Practical
Wednesday	Batch-B. Prosthodontics Batch-A. Conservative		Pre Clinical Practicals Pre Clinical Practicals Pre Clinical Practicals	Pathology Theory	/ Microbiology / Practical
Thursday	Pharmacology	Theory / Practical Microbiology	Batch 2 - Prosthodontics	Dental Material Theory -	Theory - Oral Pathology
Briday	Pathology / Microbiology	Theory	Batch 1 -Prosthodontics Batch 2 - Conservative	Prosthodontics	
	Dental Material Theory	Pharmacology Theory	Pharmacology Practical		
Saturday	Conservative	1	Clinical Conservative Dentistry /	DM	

- Copy to: 1. Gen. Pathology & Microbiology
 - 2. Pharmacology
 - 2 DA/DH

- 5. Pre Clinical Prosthodontics / DM

PRINCIPAL

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August 16, 2018

Days	9.00 – 10.00am	10.00 to 11.00am	11.00 to 1.00pm	2.00 to 3.00pm	3.00 to 4.00pm
Monday	Pre. Clinical Prosthodontics Theory	Batch -	Practicals 1 PATHOLOGY 2 Microbiology		erial - Theory ODONTICS
Tuesday	Pre. Clinical Conservative Theory	Dental Material - Theory PROSTHODONTICS	Dental Material - Theory Dental Materials Practicals Batch-A, Prosthodontics		al Practicals ODONTICS ative
Wednesday	Dental Mater Batch-B. Prosthodontics Batch-A. Conservative	rial Practicals	Pre Clinical Practicals Batch 2 - CONSERVATIVE Batch 1 - Prosthodontics		Microbiology Practical
Thursday	Pharmacology T	heory / Practical	Pre Clinical Practicals Batch 1 -Conservative Batch 2 - Prosthodontics		Microbiology Practical
Friday	Pathology / Microbiology Theory	Microbiology Theory	Pre Clinical Practicals Batch 1 - Prosthodontics Batch 2 - Conservative	Dental Material Theory - Prosthodontics	Theory - Oral Pathology
Saturday	Dental Material Theory Conservative	Pharmacology Theory	Pharmacology Practical		

1. Gen. Pathology & Microbiology

2. Pharmacology gas 3. DA / DH | S B

4. Pre Clinical Conservative Dentistry / DM Valantu b

5. Pre Clinical Prosthodontics / DM

Dayana RESINCE FAL of Dental Sciences

988 Journaraswamy Layout,

Bangalora - 560 078

September 3, 2018

Days	9.00 - 10.00am	10.00 to 11.00am	11.00 to 12.00 Noon	12:00 to 1:00pm	2.00 to 3.00pm	3.00 to 4.00pm
* Monday	Pathology Theory	Pre. Clinical Prosthodontics Theory	Microbiology Theory	Pathology / Microbiology	Dental Ma	erial - Theory ODONTICS
Tuesday	Pre, Clinical Conservative Theory	Dental Material - Theory PROSTHODONTICS	Dental Mater Batch-A. Prosth Batch-B. Conser	odontics	Pre Clinic Batch 2 - <u>PROSTE</u> Batch 1 - Conserv	al Practicals IODONTICS ative
Wednesday	Dental Mate Batch-B. Prosthodontics Batch-A. Conservative	rial Practicals	Pre Clinical Pra Batch 2 - CONS Batch 1 - Prosth	ERVATIVE	Pathology / Pra	Microbiology
Thursday	k	heory / Practical	Pre Clinical Prac Batch 1 - Conser Batch 2 - Prostho	cticals vative *		Microbiology ctical
Friday	Dental Material Theory - Prosthodontics	Microbiology Theory	Pre Clinical Batch 1 -Prostho Batch 2 - Conser	Practicals dontics	Pathology Theory	Theory - Oral Pathology
Saturday	Dental Material Theory Conservative	Pharmacology Theory	Pharmacolog		\ * .	

1. Gen. Pathology & Microbiology

2. Pharmacology

3. DA / DH

4. Pre Clinical Conservative Dentistry / DM

5. Pre Clinical Prosthodontics / DM

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Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout



DSCDS/Internal/2019-20/

Days

Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

1

July 29, 2019

1)

Theory

TIME TABLE FOR II B.D.S 2019 - 2020 Regular Batch w.e.f 1/08/2019

10.00 to 11.00am 11.00 to 12.00 12:00 to 2.00 to 9.00 - 10.00am 3.00 to 4.00pm Pre-Clinical 2.00 to 3.00pm Noon 1:00pm Microbiology Pathology Pathology /

Monday	Prosthodontics Theory	Theory	Pathology Theory	Pathology / Microbiology	Dental N PROST	Material - Theory
Tuesday	Pre. Clinical Conservative Theory	Dental Material - Theory PROSTHODONTICS	Dental Mater Batch-A. Prosth Batch-B. Conser	Theory rials Practicals odontics	Pre Cli	nical Practicals
Wednesday	Dental Mate Batch-B. Prosthodontics Batch-A. Conservative	rial Practicals	Pre Clinical Pra Batch B - CONS	cticals SERVATIVE	P	racticals
Thursday	Pharmacology T		Batch A - Prosth Pre Clinical Prac Batch A - Conser	cticals	Batch B-	A - Pathology Microbiology acticals
Friday	Dental Material Theory - Prosthodontics	Theory	Pre Clinical Batch A -Prostho	odontics Practicals	Pathology	- Pathology Microbiology Theory - Oral
Saturday	Dental Material Theory	Pharmacology	Batch B - Conserv	vative	Theory	Pathology

Copy to:

1. Gen. Pathology & Microbiology

Theory

Conservative

2. Pharmacology

3. DA / DH

4. Pre Clinical Conservative Dentistry / DM

Pharmacology Practical

5. Pre Clinical Prosthodontics / DM

PRINCIPAL Dayananda Sagar PRINCIPAL Sciences



DSCDS/Internal/2019-20/

<u>Dayananda Sagar College of Dental Sciences,</u> <u>Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru</u>

October 21, 2019

Days	9.00 - 10.00am	ised TIME TABLE F	11.00 to 12.00 Noon	12:00 pm to 1:00pm	1.00 pm to 2.00 pm	2.00 to 3.00pm	3.00 to 4.00pm
Monday	Pre -Clinical Prosthodontics Theory	Pharmacology Theory	Pre. Clinical Conservative Theory	Microbiology Theory		Dental Material - Theory Prosthodontics	Dental Material Theory Conservative
Tuesday	Gen. Pathology Theory	Dental Materials Batch-A. Prosti Batch-B. Cons	Practicals nodontics	Gen. Pathology Theory		Batch A - C Batch B - Pr	l Practicals onservative osthodontics
Wednesday	Batch A	cro Practicals - Pathology Microbiology	Pre Clinic Batch A – F	cal Practicals Prosthodontics Conservative	LUNCI		ogy Practical
Thursday	Path/ Mi Batch A -	cro Practicals Microbiology - Pathology	Batch A -	cal Practicals Conservative Prosthodontics	LUNCH BREAK	Statute Forum Andrews	ogy Practical
Friday	Dental Material Theory - Prosthodontics	Pharmacology Theory	Batch A -F	cal Practicals Prosthodontics Conservative		Batch-A. C	rial Practicals onservative osthodontics
Saturday	Dental Material Theory Conservative	Microbiology Theory	Oral Pathology Theory	Pharmacology Theory			
Microl	athology biology (Sacology	5. Pre Clini	ical Conservative l cal Prosthodontics hology	Dentistry / DM (Por		

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Dayananda Sagar Callago of Dontal Sciences
Kumaraswamy Layout,

Bangalore - 560 078 TIME TABLE FOR II B.D.S 2019 - 2020 Odd Batch

January 21, 2019

D		TIDEBIOK II B.D.S	2019 - 2020 Odd Batch w.e.f 1	/02/2019	January
Days	9.00 - 10.00am	10.00 to 11.00am	11.00 to 1.00pm	2.00 to 3.00pm	3.00 to 4.00pm
Monday	Pre. Clinical Prosthodontics Theory	Batch - Batch -	Practicals - 1 PATHOLOGY - 2 Microbiology	Dental Ma	terial - Theory
Tuesday	Pre. Clinical Conservative Theory	Dental Material - Theory PROSTHODONTICS	Dental Material - Theory DISTHODONTICS Batch-A. Prosthodontics Batch-B. Conservative		cal Practicals HODONTICS rative
Wednesday	Dental Mater Batch-B. Prosthodontics Batch-A. Conservative	rial Practicals	Pre Clinical Practicals Batch 2 - CONSERVATIVE Batch 1 - Prosthodontics	Pathology / Theory	/ Microbiology / Practical
Thursday	Pharmacology Ti		Pre Clinical Practicals Batch 1 - Conservative Batch 2 - Prosthodontics	Pathology / Theory	Microbiology / Practical
Friday	Pathology / Microbiology Theory	Microbiology Theory	Pre Clinical Practicals Batch 1 - Prosthodontics Batch 2 - Conservative	Dental Material Theory -	Theory - Oral Pathology
Saturday Opy to:	Dental Material Theory Conservative	Pharmacology Theory	Pharmacology Practical	Prosthodontics	

1. Gen. Pathology & Microbiology

4. Pre Clinical Conservative Dentistry / DM For GDXIL

2. Pharmacology — pt 6 June 1 2019 3. DA / DH In a

5. Pre Clinical Prosthodontics / DM

PRINCIPAL PRINCIPAL Davananda Sagar College of Dental Sciences



DSCDS/Internal/2019-20/

Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

October 21, 2019

3.00 to 4.00pm

1.00 pm to 12:00 pm to 11.00 to 12.00 2.00 to 3.00pm 9.00 - 10.00am 10,00 to 11.00am Days 1:00pm 2.00 pm Noon Dental Material Dental Material -Microbiology Pharmacology Pre. Clinical Pre -Clinical Theory Theory Conservative Theory **Prosthodontics** Theory Conservative Monday Prosthodontics Theory Theory Pre Clinical Practicals Gen. Pathology Dental Materials Practicals Gen. Pathology Batch A - Conservative Theory Batch-A. Prosthodontics Theory Tuesday Batch B - Prosthodontics Batch-B. Conservative Pharmacology Practical **Pre Clinical Practicals** Path/ Micro Practicals LUNCH BREAK Batch A - Prosthodontics Batch A - Pathology Wednesday Batch B - Conservative Batch B - Microbiology Pharmacology Practical Pre Clinical Practicals Path/ Micro Practicals Batch A -Conservative Batch A - Microbiology Batch B - Prosthodontics Thursday Batch B - Pathology Dental Material Practicals Pre Clinical Practicals Pharmacology Dental Material Batch-A. Conservative Batch A -Prosthodontics Theory -Theory Batch-B. Prosthodontics Friday Batch B - Conservative Prosthodontics

Revised TIME TABLE FOR II B.D.S 2019 - 2020 Regular Batch w.e.f 22/10/2019

Copy to:

Saturday

Gen. Pathology
 Microbiology

Dental Material

Theory

Conservative

3. Pharmacology

4. Pre Clinical Conservative Dentistry / DM CHAP

5. Pre Clinical Prosthodontics / DM &

Pharmacology

Theory

Oral

Pathology

Theory

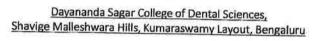
6. Oral Pathology

Microbiology

Theory

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DSCDS/Internal/2020/

January 28, 2020

Days	9.00 - 10.00am	10.00 to 11.00am	11.00 to 12.00 Noon	12:00 to 1:00pm	2.00 to 3.00pm	3.00 to 4.00pm
Monday	Pre -Clinical Prosthodontics Theory	Microbiology Theory	Pathology Theory	Pathology / Microbiology Theory	Dental Mat	erial - Theory ODONTICS
Tuesday	Pre. Clinical Conservative Theory	Dental Material - Theory PROSTHODONTICS	Dental Mater Batch-A. Prosth Batch-B. Conser	ials Practicals iodontics	Pre Clinic Batch B -PROSTE Batch A - Conserv	
Wednesday	Dental Ma Batch-B. Prosthodontic Batch-A. Conservative		Pre Clinical Pra Batch B - CONS Batch A - Prostl	SERVATIVE	Prac Batch A -	ticals Pathology ficrobiology
Thursday		Theory / Practical	Pre Clinical Pra Batch A -Conse Batch B - Prosth	rvative	Prac Batch B -	ticals Pathology ficrobiology
Friday	Dental Material Theory - Prosthodontics	Microbiology Theory	Pre Clinical Batch A -Prosth Batch B - Conse	l Practicals odontics	Pathology Theory	Theory - Oral Pathology
Saturday	Dental Material Theory Conservative	Pharmacology Theory	Pharmacolog		<u>.</u>	-

opy to: 1. Gen. Pathology & Microbiology

2. Pharmacology

3. DA / DH

4. Pre Clinical Conservative Dentistry / DM

5. Pre Clinical Prosthodontics / DM

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Dayananda Sagar College of Dental Sciences
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Parantas - Ford S.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru – 560 078, Telephone: 080 26663654, 7483693035 Email: principal_dscdsblr@rediffmail.com

DSCDS/Office-Order/2020-21/43

December 17, 2020

TIME TABLE FOR II B.D.S 2020 - 2021 (REGULAR/ ODD) BATCH w.e.f: 21/12/2020

DAYS	9:00am-11:00am	11am-1:00pm	1:00pm- 1:45pm	1:45pm-2:45pm	3:00pm-4:00pm
Monday	Dental Material Practical Prosthodontics - A Conservative - B	PRE CLINICALS Prosthodontics - B Conservative - A	L	Theory DM/ Pre Clinical Prosthodontics	Theory Microbiology
Tuesday	Gen. Pathology - A Microbiology - B	Gen. Pathology - A Microbiology - B	U	Theory DM/Pre Clinical Conservative	Theory Pharmacology
Wednesday	Gen. Pathology - A Microbiology - B	Pharmacology	N	PRE CLINICALS (2.0 Prosthodontics - A Conservative - B	0pm-4.00pm)
Thursday	Dental Material Practical Prosthodontics - B Conservative - A	PRE CLINICALS Prosthodontics - A Conservative - B	С	Theory Microbiology	Theory Microbiology
Friday	Gen. Pathology - A Microbiology - B	Gen. Pathology - A Microbiology - B	Н	PRE CLINICALS Prosthodontic - B Conservative - A	
Saturday	Pharmacology				

Note: All theory classes shall be through online mode till further information.

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DSCDS/Office-Order/2021/057

December 9, 2021

REVISED TIME TABLE FOR II B.D.S 2021 - 2022 (REGULAR/ODD) BATCH w.e.f: 13/12/2021

DAYS	9:00am- 10:00am	10:00am- 11:00am	11am-1:00pm	1:00pm- 2:00pm	2:00pm-3:00pm	3:00pm- 4:00pm
Monday	Theory Pre-clinical Prosthodontics	Theory Microbiology	Practicals Pre Cli, Cons -A Pre Cli, Prostho - B	L e	'Theory DM Prostho	DM Conservative Theory
Tuesday	Theory General Pathology	Theory DM Prosthodontics	Practical Gen. Pathology – A Microbiology – B	Ū	Theory Microbiology	Pre-clinical Conservative Theory
Wednesday	Theory General Pathology	Theory DM Orthodontics	Practical Gen. Pathology - B Microbiology - A	N	Practicals Pre Cli, Prostho - A Pre Cli, Cons - B	
Thursday	Theory Oral Pathology	Theory Microbiology	Practical DM Prostho - A DM Cons - B	С	Practicals Pre Cli. Cons -A Pre Cli. Prostho - B	
Friday	Theory General Pathology	Theory DM Conservative	Practicals Pre Cli. Prostho - A	ಲ H	Practicals DM Cons - A 2 DM Prostho - B	
Saturday		Pharmacology			la 190	

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Dayananda Sagar Cellage of Dantal Sciences Kumaraswamy Layout Romaine - 560 079

August 10, 2015

TIME TABLE FOR III B.D.S 2015 - 2016 Regular Batch w.e.f 10/08/2015

Days	9.00 - 10.00am	10.00 - 11.00 am	11.00 to 12.00noon	12.00pm to 1.00 pm	2.00 to 4.00 pm
Monday	Oral Pathology Theory	Oral Pathology Practical		General Surgery	Dental Clinics
Tuesday	Oral Pathology Theory	General Medicine Theory	General Medicine Practical	Pedodontics Theory	Dental Clinics
Wednesday	Oral Surgery Theory	Conservative Dentistry Theory	General Surgery Theory & Practical		Dental Clinics
Thursday	Oral Medicine Theory	General Medicine Theory & Practical		Dental Clinics	
Friday	Prosthodontics Theory	Oral Pathology Theory	Oral Pathology Practical	Periodontics Theory	Ortho Theory/Wire bending class
Saturday	Public Health Dentistry Theory		alth Dentistry	Practical	-

Copy to:

1. General Medicine

7. Pedodontics

2. General Surgery

8. Prosthodontics

3. Oral Pathology

9. Conservative

4. Public Health Dentistry

10. Oral Surgery

5. Oral Medicine

11. Periodontics

6. Orthodontics

Dr. H.P. Raghuveer PRINCIPAL

Payonando Jager (Islega of Borsel Science Elizabetarwa say Leayout, Bangalore - 500 078.

January 31, 2015

TIME TABLE FOR III B.D.S 2015 - 2016 Odd Batch w.e.f 02/02/2015

Days	9.00 – 10.00am	10.00 - 11.00 am	11.00 to 12.00noon	12.00pm to 1.00 pm	2.00 to 4.00 pm
Monday	Oral Pathology Theory	Oral Pathology Practical		General Surgery	Dental Clinics
Tuesday	Oral Pathology Theory	General General Per Medicine Medicine Per Practical		Pedodontics Theory	Dental Z
Wednesday	Oral Surgery Theory	Conservative Dentistry Theory	General Surgery Theory & Practical		Dental Clinics
Thursday	Oral Medicine Theory	General Medicine Theory / Practical			Dental Clinics
Friday	Prosthodontics Theory	Oral Pathology Theory	Oral Pathology Practical	Periodontics Theory	Ortho Theory/Wire
Saturday	Public Health		Practical	bending class	

Copy to:

- 1. General Medicine
- 2. General Surgery
- 3. Oral Pathology
- 4. Public Health Dentistry
- 5. Oral Medicine
- 6. Orthodontics

- 7. Pedodontics 🕡
- 8. Prosthodontics
- 9. Conservative
- 10. Oral Surgery
- 11. Periodontics

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Bangalore - 580 078

Bangalore - 560 078

August 16, 2016

TIME TABLE FOR III B.D.S 2016 - 2017 Regular Batch w.e.f 16/08/2016

Days	9.00 - 10.00am	10.00 – 11.00 am	11.00 to 12.00noon	12.00pm to 1.00 pm	2.00 to 4.00 pm
Monday	Oral Pathology Theory	Oral Pathology Practical		General Surgery	Dental Clinics
Tuesday	Oral Pathology Theory	General Medicine Theory	General Medicine Practical	Pedodontics Theory	Dental Clinics
Wednesday	Oral Surgery Theory	Conservative Dentistry Theory	General Surgery Theory & Practical		Dental Clinics
Thursday	Oral Medicine Theory	General Medicine Theory & Practical			Dental Clinics
Friday	Prosthodontics Theory	Oral Pathology Theory	Oral Pathology Practical	Periodontics Theory	Dental Clinics
Saturday Ortho Theory/Class		U		lth Dentistry / /Practical	

Copy to:

1. General Medicine

2. General Surgery

3. Oral Pathology

4. Public Health Dentistry

5. Oral Medicine

6. Orthodontics

7. Pedodontics 🛊

a D. Prosthodontics and

9. Conservative 18

10. Oral Surgery 🛭

11. Periodontics

Dr. H.P. Raghuveer PRINCIPAL

PRINCIPAL

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078,

January 30, 2016

TIME TABLE FOR III B.D.S 2016 - 2017 Odd Batch w.e.f 01/02/2016

Days	9.00 - 10.00am	10.00 - 11.00 am	11.00 to 12.00ngon	12.00pm to 1.00 pm	2.00 to 4.00 pm
Monday	Oral Pathology Theory	Oral Pathology Practical		General Surgery	Dental Clinics
Tuesday	Oral Pathology Theory	General Medicine Theory	General Medicine Practical	Pedodontics Theory	Dental Clinics
Wednesday	Oral Surgery Theory	Conservative Dentistry Theory	General Surgery Theory & Practical		Dental Clinics
Thursday	Oral Medicine Theory	General Medicine Theory / Practical			Dental Clinics
Friday	Prosthodontics Theory	Oral Pathology Theory	Oral Pathology Practical	Periodontics Theory	Ortho Theory/Wire bending class
Saturday	Public Health Dentistry Theory	Public Health Dentistry Practical			2

Copy to:

7. General Medicine

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7. Pedodontics

8. General Surgery

8. Prosthodontics

9. Oral Pathology

9. Conservative

10. Public Health Dentistry

10. Oral Surgery

11. Oral Medicine

11. Periodontics

12. Orthodontics

PRINCIPAL 38-11

PROLITORPAR Dayananda Sagar (APaparé Parak) Salasana (Sugana apapara apapara Esta Alba - 1820 (1931)

August 1, 2017

TIME TABLE FOR III B.D.S 2017 - 2018 Regular Batch w.e.f 1/08/2017

Days	9.00 – 10.00am	10.00 - 11.00 am	11.00 to 12.00noon	12.00pm to 1.00 pm	2.00 to 4.00 pm
Monday	Oral Pathology Theory	Oral Pathology Practical		General Surgery	Dental Clinics
Tuesday	Oral Pathology Theory	General Medicine Theory	General Medicine Practical	Pedodontics Theory	Dental Clinics
Wednesday	Oral Surgery Theory	Conservative Dentistry Theory	General Surgery Theory & Practical		Dental Clinics
Thursday	Oral Medicine Theory	General Medicine Theory & Practical			Dental Clinics
Friday	Prosthodontics Theory	Oral Pathology Theory	Oral Pathology Practical	Periodontics Theory	Dental Clinics
Saturday	Ortho Theory/Wire bending class			alth Dentistry /Practical	_

1. General Medicine

7. Pedodontics

2. General Surgery

8. Prosthodontics

3. Oral Pathology

9. Conservative

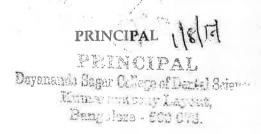
4. Public Health Dentistry

10. Oral Surgery

5. Oral Medicine

6. Orthodontics

11. Periodontics



Dayananda Sagar College of Dental Sciences

Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

January 31, 2017

TIME TABLE FOR III B.D.S 2017 - 2018 Odd Batch w.e.f 01/02/2017

Days	9.00 - 10.00am	10.00 - 11.00 am	11.00 to 12.00noon	12.00pm to 1.00 pm	2.00 to 4.00 pm
Monday	Oral Pathology Theory	Oral Patholog	gy Practical	General Surgery	Dental Clinics
Tuesday	Oral Pathology Theory	General Medicine Theory	General Medicine Practical	Pedodontics Theory	Dental Clinics
Wednesday	Oral Surgery Theory	Conservative Dentistry Theory		ıl Surgery & Practical	Dental Clinics
Thursday	Oral Medicine Theory		eneral Medicii eory & Practio		Dental Clinics
Friday	Prosthodontics Theory	Oral Pathology Theory	Oral Pathology Practical	Periodontics Theory	Dental Clinics
Saturday	Ortho Theory/clas	•		alth Dentistry /Practical	i

Copy to:

1. General Medicine

7. Pedodontics

2. General Surgery

8. Prosthodontics

3. Oral Pathology

9. Conservative

4. Public Health Dentistry

10. Oral Surgery

5. Oral Medicine

11. Periodontics

6. Orthodontics

Dr. H.P. Raghuveer PRINCIPAL

PRINCIPAL

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout, Cangalore - 550 078

L. Jananda Sagar College of Dental Sciences

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore

REVISED TIME TABLE FOR III YEAR BDS 2018-19 Regular and 2020-2021 Odd BATCH W.E.F 16/01/2019

DSCDS/ Internal/2020/

Dave	8.000 21 22 0008		10.00				Date: 28/01 /2020	0000/1
36	o.coam to 7:00am	9:00am - 10:00pm		12:00am -	12:00 noon to	1:00 to		201/
	Oral Pathologic		III	12:00n00n	1:00pm	2:00pm	2:00 to 4:00pm	
Monday	(Theory)	Ferrodonites (Theory)	Oral Pathol	Oral Pathology (Practical)	Conservative (Theory)	EVK	Dental Clinics	
	General Modicino				15	BKE		
Tuesday	(Theory - Dr. Shobha Naidu)	Prosthodontics / Conservative (Practical)	/ Conservative ical)	Oral Pathology (Theory)	General Surgery (Dr. Ashok,	מאכם ו	Dental Clinics	
	General Medicine				(5CT)	7		
Wednesday		General Surgery	rgery (Theory & Practical) Dr. Prakash Babu (SKSH)	al) Dr. Prakash	Lunch Break	General	Dental Clinics	
Thursday	Oral Medicine					(DSCDS)		
Tildisday	(Theory)	Pedodontics	Ceneral Medi	General Medicine (Theroy & Practical) Dr. Girish	ctical) Dr. Girish			
**************************************				Arisimamuruny (SKSH)	SH)		Dental Clinics	
Friday	(Theory.)	Oral Pathology (Theory)	Oral Pathology (Practical)	Orthodontics - The	Orthodontics - Theory /Wire bending	BREA	Dental Clinics	
	O"ol C							
Saturday	General Surgery / General Surgery / Anesthesia (Theory)	Public Helath (Theory)	Public]	Public Health Dentistry (Practical)	ractical)			

Copy to:

1. Genreal Medicine - Dr. Girsh Krishna Murthy, Dr. Shobha Naidu, (Dr. Darshana S Nayak -Coordinator- No.9739875369)

2. General Surgery - Dr. Ashok AC, Dr. Prakash Babu MN (Dr. Prashanth NT- Coordinator - 9845034720)

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Felath Dentistry	9 Concounting
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CILLING & KACHOLOGY	10 Oral Graceman
	ve. orangely
אומנא	11 Periodoniae
T. S.	- CTOMOTICE
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Dayananda Sagar College of Dental Sciences

Dayananda Sagar College of Dental Science

Shavıge Malleshwara Hills, Kumaraswanıy Layout, Bangalore

REVISED TIME TABLE FOR III YEAR BDS 2018-19 Regular and 2019-20 Odd BATCH W.E.F 25/02/2019 DSCDS/ Internal/2019-20//6

Days	000		-				Date: 20/02/2019	/2019
Lays	8:00an to 9:00am	9:00am - 10:00pm	11:00am	11:00am -	12:00 noon to	1:00 to	2.00 to 4.00	
Monday	Oral Pathology (Theory)	Periodonites	Oral Patholo	Oral Pathology (Practical)	L:U0pm	K 5:00pm	indoors or oor	
		(friedly)		(1000)	(Theory)	KEV	Dental Clinics	
Tuesday	General Medicine (Theory - Dr. Shobha Naidu)	Prosthodontics / Conservative (Practical)	' Conservative ical)	Oral Pathology (Theory)	General Surgery (Dr. Ashok,	ПИСН В	Dental Clinics	
	General Medicina				(carca)	I		
Wednesday		General Surgery	General Surgery (Theory & Practical) Dr. Prakash Babu (SKSH)	al) Dr. Prakash	Lunch Break	General	Dental Clinics	
*	Oral Medicine					(DSCDS)		
Inursday	(Theory)	Pedodontics	General Medi	General Medicine (Theroy & Practical) Dr. Girish Krishnamuthy (Sector	ctical) Dr. Girish		Dental Climica	
	Becaute J			AC) (mmmmmmmm)	(LIC		Scrittar Cantiles	
Friday	r.rosmodomucs (Theory)	Oral Pathology (Theory)	Oral Pathology (Practical)	Orthodontics - The	Oral Pathology (Practical)	BKE\	Dental Clinics	
Saturday	Oral Surgery / General Surgery / Anesthesia (Theory)	Public Helath (Theory)	Public]	Public Health Dentistry (Practical)	Practical)			
Copy to:								

1. Genreal Medicine - Dr. Girsh Krishna Murthy, Dr. Shobha Naidu, (Dr. Darshana S Nayak -Coordinator- No:9739875369)

2. General Surgery - Dr. Ashok AC, Dr. Prakash Babu MN (Dr. Prashanth NT- Coordinator - 9845034720)

5. Oral Pathology	8 Prosthodontice // /
	Samonana :
. Public Helath Dentistry	9 Conservative Doutieter
N. C. J.	William State Delinsity
. Oral Medicine & Radiology	(10 10 1/16, 110 Oral Survey 1) 40 NO
Outhodown	/ Wall Cui Cau Cui gelly U.
Of this confides	7 11 Pariodontice
	di.
Ledodontics	Short Strate

Daymande Segar College of Dental Sections and Kumaraswamy Layout, PRINCIPAL

Shavige Malleshwara Hills, Kumaraswamy Layout
Bangalore – 560 078

August 24, 2018

REVISED TIME TABLE FOR III B.D.S 2018 - 2019 Odd Batch w.e.f 01/09/2018

1.00 to 2.00 2.00 to 4.00 pm pm	Dental Clinics	Dental Clinics	Dental Clinics	A Dental Clinics	Dental Clinics	Ï			0.71.	2/2/2	tal Section be	מת ההימונים
12.00pm to 1.00 pm	General Surgery (DSCDS)	General Surgery (DSCDS)	General Surgery (Theory & Practical) (DSCDS)	& Practical) am)	lontics ending)	stry			The state of the s	13	1 PRINCIPAL INTERPRETATION OF CHARACTER SPECIES CONTRACTOR OF CONTRACTOR OF CONTRACT	SPATRICATION.
11.00 to 12.00noon	rology ical)	Oral Pathology (Theory)	General Surgery (Theory & Practica (DSCDS)	Medicine (Theory & Pr Sri Krishna Sevashram)	Orthodontics (Wire Bending)	Public Health Dentistry Practical		Samo	الخاط	大学	Dayananda S	PAR KI
10.00am - 11.00 am	Oral Pathology (Practical)	'Conservative icals)	Conservative (Theory)	General Medicine (Theory & Practical) (Sri Krishna Sevashram)	Oral Pathology (Practical)	Public	7. Fedodontics 301 Bit	8. Prosthodontics For	9. Conservative	10. Oral Surgery	11. Periodontics	
09.00am - 10.00am	Periodontics Theory	Prothodontics/Conservative (Practicals)	Oral Surgery/ General Anesthesia	Pedodontics	Oral Pathology (Theory)	Public Health Theory	7. Fedor	8. Prost	9. Cons	3	7 11. Perid	1
8.00am - 09.00am	Oral Pathology (Theory)	General Medicine (DSCDS)	General Medicine (DSCDS)	Oral Medicine (Theory)	Prosthodontics (Theory)	Orthodontics Theory	I Medicine	General Surgery	thology	Public Health Dentistry	Oral Medicine	ontics Mary
Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Copy to: 1. General Medicine	2. General	3. Oral Pathology	4. Public F	5. Oral Me	6. Orthodontics



Dayananda Sagar College of Dental Sciences

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore

TIME TABLE FOR III YEAR BDS 2019-20 Regular Batch W.E.F 01/08/2019

DSCDS/ Inter	DSCDS/ Internal/2019-20/)			Date: 01/08/2019	,2019
Days	8:00am to 9:00am	9:00ат - 10:00рт	10:00am - 11:00am	11:00am - 12:00noon	12:00 noon to 1:00pm	1:00 to 2:00pm	2:00 to 4:00pm	
Monday	Oral Pathology (Theory)	Periodonitcs (Theory)	Oral Patholo	Oral Pathology (Practical)	Conservative (Theory)	BKEVK	Dental Clinics	
Tuesday	General Medicine (Theory - Dr. Shobha Naidu)	Prosthodontics / Conservative (Practical)	Conservative :al)	Oral Pathology (Theory)	General Surgery (Dr. Ashok, DSCDS)	TONCH I	Dental Clinics	
Wednesday	General Medicine (Theory - Dr. Shobha Naidu)	General Surgery (Theory & Practical) Dr. Prakash Babu (SKSH)	Theory & Practic Babu (SKSH)	al) Dr. Prakash	Lunch Break	General Surgery (DSCDS)	Dental Clinics	
Thursday	Oral Medicine (Theory)	Pedodontics	General Medi F	General Medicine (Theroy & Practical) Dr. Girish Krishnamurthy (SKSH)	actical) Dr. Girish (SH)		Dental Clinics	
Friday	Prosthodontics (Theory)	Oral Pathology (Theory)	Oral Pathology (Practical)	Orthodontics - Th	Oral Pathology Orthodontics - Theory /Wire bending (Practical)	BREA	Dental Clinics	
Saturday	Oral Surgery / General Surgery / Anesthesia (Theory)	Public Helath (Theory)	Public	Public Health Dentistry (Practical)	(Practical)		·	8

Copy to:

1. Genreal Medicine - Dr. Girsh Krishna Murthy, Dr. Shobha Naidu, (Dr. Darshana S Nayak -Coordinator- No.9739875369)

2. General Surgery - Dr. Ashok AC, Dr. Prakash Babu MN (Dr. Prashanth NT-Coordinator - 9845034720)

3. Oral Pathology	8. Prosthodontics	The second second
4. Public Helath Dentistry	9. Conservative Dentistry	20 T
5. Oral Medicine & Radiology	10. Oral Surgery	
6. Orthodontics	11. Periodontics	25.
7. Pedodontics		,

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gar College of Dental Sciences

Dayananda Sagar College of Dental Sci res Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078 TIME TABLE FOR III B.D.S 2019 - 2020 Regular Batch w.e.f 01/08/2019

E	ξί	δί	જ	છ	8							
2.00 to 4.00 pm	Dental Clinics	Dental Clinics	Dental Clinics	Dental Clinics	Dental Clinics	ı						nces
1.00 to 2.00 pm		LUN	ICH BRE	AK					5	1	VI.	Dental Scie
12.00pm to 1.00 pm	General Surgery (DSCDS)	General Surgery (DSCDS)	General Surgery (Theory & Practical) (DSCDS)	& Practical) ram)	Orthodontics (Wire Bending)	stry				4	PRINCIPAL	Sananda Sagay Rolego of Dental Sciences Kumaraswamy Layout,
11.00 to 12.00noon	tology ical)	Oral Pathology (Theory)	General Surgery (Theory & Practica (DSCDS)	l Medicine (Theory & Pr. (Sri Krishna Sevashram)	Orthoc (Wire B	Public Health Dentistry Practical					יםי	gananda Se
10.00am - 11.00 am	Oral Pathology (Practical)	Conservative icals)	Conservative (Theory)	General Medicine (Theory & Practical) (Sri Krishna Sevashram)	Oral Pathology (Practical)	Public	7. Pedodontics	8. Prosthodontics	9. Conservative	10. Oral Surgery	11. Periodontics	
09.00am - 10.00am	Periodontics Theory	Prothodontics/Conservative (Practicals)	Oral Surgery/ General Anesthesia	Pedodontics	Oral Pathology (Theory)	Public Health Theory	7. Pedo	8. Pros	9. Con	10. Ora	11. Per	
8.00am - 09.00am	Oral Pathology (Theory)	General	General Medicine (DSCDS)	Oral Medicine (Theory)	Prosthodontics (Theory)	Orthodontics Theory	py to: 1. General Medicine	al Surgery	Oral Pathology	Public Health Dentistry	Oral Medicine	Iontics
Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Copy to: 1. Genera	2. General Surgery	3. Oral P.	4. Public	5. Oral M	6. Orthodontics

Dayananda Sagar College of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

TIME TABLE FOR III B.D.S 2019 - 2020 Odd Batch w.e.f 21/01/2019

1 00 to		-			LUI	NCF		REAL			Dental Clinics		,									PRINCIPAL	
	11.00 to 12.00pm		logy Surgery al) (DSCDS)	Oral General		(Theory) (USCU)	(Theory & Practical)	(DSCDS)	General Medicine (Theory & Practical)	(Sri Krishna Sevasuram)	Orthodontics	(Wire Bending)	rr - 1d- Dontishrv	Public Healun Denustry Practical								PRJ	
		TI.00 am	Oral Pathology (Practical)	Conservative	ticals)		Conservative	(Theory)	General Medici	(Sri Kri	Oral	Pathology	(Liacure)			7. Pedodontics	8. Prosthodontics	O Conservative		10. Oral Surgery	11. Periodontics		
TIME TABLE FOR III B.D.S.	09.00am -	10.00am	Periodondes Theory	- Aontice/Conservative	Prothodoliucs/ Com (Practicals)))	Oral Surgery/	General Anesthesia		Pedodontics	Oral	Pathology	(Theory)	Public Health Theory		- 7. Pe	8. P.		, ,				
TIME TA	8 00am -	09.00am	Oral Pathology (Theory)		General	Medicine	General	Medicine	(Dace)	Oral Medicine	(Comm)	Prosthodontics	(Yroenty)	Orthodontics	THEOLY	Medicine	I. General Measure	General Surgery	Oral Pathology	D. Blic Health Dentistry	TAC T TOTAL	5. Oral Medicine	c Orthodontics
		Days		Monday		Tuesday		Wednesday		Thursday		TACK!	Filtray	Saturday		Copy to:	I. Gelit	2. Gene	3. Oral		4. 1.	5. Ora	A Ort

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore Dayananda Sagar College of Dental Sciences

TIME TABLE FOR III YEAR BDS 2020-21 Regular / Odd Batch W.E.F 21/12/2020

Date: 17/12/2020

Dental Clinics Dental Clinics Dental Clinics Dental Clinics Dental Clinics 2:00 to 4:00pm BREVK 1:00 to 2:00pm *FONCH BREVK* LUNCH Oral Medicine Orthodontics - Theory / Wire bending General Surgery General Medicine (Theroy & Practical) Dr. Girish Conservative 12:00 noon to (Theory) (Theory) 1:00pm Public Flealth Dentistry (Practical) Oral Pathology (Theory / Practical) Krishnamurthy (SKSH) General Surgery (Theory & Practical) Dr. Prakash Prosthodontics 11:00am -12:00noon (Theory) Oral Pathology (Theory) Babu (SKSH) 10:00am -11:00am (Theory) Oral Pathology Public Helath 9:00am - 10:00pm Pedodontics (Theory) Oral Surgery (Theory) Periodonites (Theory) (Theory) General Medicine General Medicine Dr. Channaraya) 8:00am to 9:00am (Theory - Dr. Channaraya) DSCDS/office order/2020-21/44 (Theory -Wednesday Thursday Days Tuesday Monday Friday

1. Genreal Medicine - Dr. Girsh Krishna Murthy, Dr. Channaraya, (Dr. Darshana S Nayak -Coordinator- No:9739875369) Note: All theory classes shall be through online mode till further information.

2. General Surgery - Dr. Prakash Babu MN (Dr. Prashanth NT- Coordinator - 9845034720)

				Jan mary State of the state of	PRINC
8. Prosthodontics	9. Conservative Dentistry	10. Oral Surgery	11. Periodontics		
8.	.6				
	3. Oral Pathology	4. Public Helath Dentistry	5. Oral Medicine & Radiology	6. Orthodontics	7. Pedodontics

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore Dayananda Sagar College of Dental Sciences

TIME TABLE FOR III YEAR BDS 2021-22 Odd Batch W.E.F 26/04/2021

Days

Monday

Tuesday

Date: 19/04/2021

Dental Clinics Dental Clinics Dental Clinics Dental Clinics 2:00 to 4:00pm Dental Clinics BKEYK 1:00 to 2:00pm *PONCH BKEVK* LUNCH Orthodontics - Theory / Wire bending General Surgery General Medicine (Theroy & Practical) Dr. Girish Conservative 12:00 noon to (Theory) (Theory) 1:00pm Public Health Dentistry (Practical) Oral Pathology (Theory / Practical) Krishnamurthy (SKSH) General Surgery (Theory & Practical) Dr. Prakash Prosthodontics 12:00noon 11:00am -(Theory) Oral Medicine Oral Pathology (Theory) Babu (SKSH) 10:00am -11:00am (Theory) 9:00am - 10:00pm Oral Pathology Public Helath Pedodontics Oral Surgery Periodonites (Theory) (Theory) (Theory) General Medicine General Medicine Dr. Channaraya) 8:00am to 9:00am (Theory - Dr. Channaraya) DSCDS/office order/2021/25 Wednesday Saturday Thursday

Note: All theory classes shall be through online mode till further information.

Friday

1. Genreal Medicine - Dr. Girsh Krishna Murthy, Dr. Channaraya, (Dr. Darshana S Nayak -Coordinator- No:9739875369)

2. General Surgery - Dr, Prakash Babu MN (Dr. Prashanth NT- Coordinator - 9845034720)

8, Prosthodontics	Pathology 9. Conservative Dentistry		5. Oral Medicine & Kadiology 11. Periodontics	odontics	
	3. Oral Pathology	4. Public Helatr	5. Oral Medicin	6. Orthodontics	7 Padadontics

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Dayananda Sagar College of Dental Sciences

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore

Revised TIME TABLE FOR III YEAR BDS 2021-22 Regular Batch W.E.F 18/12/2021

Date: 10/12/2021

CALIFORNIA (ACTIONS	050/12021/2051 /058				יין ווייטיו 12:01	1:00 to	m.00.1 - 100 0
Decided on the	, , , , , , , , , , , , , , , , , , ,	9.00an - 10:00pm	10:00am -	11:00am -	1:00pm	2:00pm	Z:00 10 4:00 m
Days	8:00am to 9:00am	1	LEODAIN		Witewaran		
Monday		Periodonites (Theory)	Oral Pathology Prosthodontics (Theory)	Prosthodontics (Theory)	(Theory)	VK	Dental Cillics
						ВЕ	
Tuesday	General Medicine (Theory -	Oral Surgery (Theory)	Oral P	Oral Pathology (Theory / Practical)	/ Practical)	ИСН В	Dental Clinics
	Dr. Channaraya)					ເທົ	
Wednesday	General Medicine (Theory - Dr.	General Surgery	General Surgery (Theory & Practical) Dr. Prakash Babu (SKSH)	cal) Dr. Prakash	General Surgery (Theory)	I	Dental Clinics
	Channaraya)		Most Information	Committee (Therov & Practical) Dr. Girish	ractical) Dr. Girish	>	Dental Clinics
Thursday		Pedodontics	Cellel at Med	Krishnamurthy (SKSH)	KSH)	KEV)	
Camping						181	
Friday	General Surgery- Theory Dr. Venkatesh Vikram (Sagar	Oral Pathology (Theory)	Oral Medicine (Theory)		Orthodontics - Theory / Wire bending	LUNCH	Dental Clínics
	Hospital @ DSCDS)				2		
-		Public Helath	Pub	Public Health Dentistry (Prachcal)	y (Prachcal)		
Saturday		(Theory)					

1. Genreal Medicine - Dr. Girsh Krishna Murthy, Dr. Channaraya, (Dr. Darshana S Nayak -Coordinator- No:9739875369)

2, General Surgery - Dr. Prakash Bahu MN, Dr. Venkatesh Vikram (Dr. Prashanth NF- Coordinator - 9845034720)

	8. Prosthodontics	
3. Oral Pathology	9. Conservative Dentistry	
4. Public Helath Definish y	10 Out Company	
5 Oral Medicine & Radiology	10. Oral Surgery	
O Clarity	11. Periodontics	
6. Orthodontics		
7. Pedodontics		

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Dayananda Sagar Coollege of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

August 10, 2015

TIME TABLE FOR IV B.D.S 2015 - 2016 Regular Batch w.e.f 10/08/2015

Days	9.00am - 10.00am	10.00 – 1.00pm	2.00am - 3.00pm	3.00pm - 4.00pm
Monday	Oral Medicine Theory	Dental Clinics	Prosthodontics Theory	Pedodontics Theory
Tuesday	Oral Surgery Theory	Dental Clinics	Conservative Theory	Prosthodontics Theory
Wednesday	Conservative	Dental Clinics	Prosthodontics Theory	Public Health Theory
Thursday	Orthodontics Theory	Dental Clinics	Oral Medicine Theory	Periodontics Theory
Friday	Oral Surgery Theory	Dental Clinics	Pedodontics Theory	Conservative Theory
	Periodontics	10.00 - 11.00am	11.00 - 1.00pm	-
Saturday	Theory	Public Health Theory	Public Health Practical	

Copy to:

1. Oral Medicine 🗸

3. Pedodontics

4. Prosthodontics

2. Orthodontics

5. Conservative Dentistry

7. Periodontics

8. Public Health for Somaths

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Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Dayananda Sagar College of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

January 31, 2015

TIME TABLE FOR IV B.D.S 2015 - 2016 Odd Batch w.e.f 02/02/2015

Days	9.00am - 10.00am	10.00 – 1.00pm	2.00am - 3.00pm	3.00pm - 4.00pm
Monday	Oral Medicine Theory	Dental Clinics	Prosthodontics Theory	Pedodontics Theory
Tuesday	Oral Surgery Theory	Dental Clinics	Conservative Theory	Prosthodontics Theory
Wednesday	Conservative Theory	Dental Clinics	Prosthodontics Theory	Public Health Theory
Thursday	Orthodontics Theory	Dental Clinics	Oral Medicine Theory	Periodontics Theory
Friday	Oral Surgery Theory	Dental Clinics	Pedodontics Theory	Conservative Theory
	Periodontics	10.00 - 11.00am	11.00 - 1.00pm	_
Saturday	Theory	Public Health Theory	Public Health Practical	

Copy to:

1. Oral Medicine

2. Orthodontics 3. Pedodontics

4. Prosthodontics

5. Conservative Dentistry 2.

6. Oral Surgery

7. Periodontics

8. Public Health Dentistry

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August 16, 2016

TIME TABLE FOR IV B.D.S 2016 - 2017 Regular Batch w.e.f 16/08/2018

Days	9.00am - 10.00am	10,00 - 1.00pm	2.00am - 3.00pm	3.00pm - 4.00pm
Monday	Oral Medicine Theory	Dental Clinics	Prosthodontics Theory	Pedodontics Theory
Tuesday	Oral Surgery Theory	Dental Clinics	Conservative Theory	Prosthodontics Theory
Wednesday	Conservative Theory	Dental Clinics	Prosthodontics Theory	Public Health Theory
Thursday Orthodontics Theory		Dental Clinics	Oral Medicine Theory	Periodontics Theory
Friday	Oral Surgery		Pedodontics Theory	Conservative Theory
Saturday	Periodontics Theory	Dental Clinics	-	-

Copy to:

1. Oral Medicine

5. Conservative Dentistry

2. Orthodontics 1/2

6. Oral Surgery

3. Pedodontics

7. Periodontics

4. Prosthodontics

8. Public Health Dentistry

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Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

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Bangalore - 560 078

August 16, 2016

TIME TABLE FOR IV B.D.S 2016 - 2017 Regular Batch w.e.f 16/08/2018

Days	9,00am - 10,00am	10.00 - 1.00pm	2.00am - 3.00pm	3.00pm - 4.00pm
Monday	Oral Medicine Theory	Dental Clinics	Prosthodontics Theory	Pedodontics Theory
Tuesday	Oral Surgery Theory	Dental Clinics	Conservative Theory	Prosthodontics Theory
Wednesday	Conservative Theory	Dental Clinics	Prosthodontics Theory	Public Health Theory
Thursday Orthodontics Theory		Dental Clinics	Oral Medicine Theory	Periodontics Theory
Friday Oral Surgery Theory		Dental Clinics	Pedodontics Theory	Conservative Theory
Saturday	Periodontics Theory	Dental Clinics	-	-

Copy to:

1. Oral Medicine

5. Conservative Dentistry

2. Orthodontics 1/2

3. Pedodontics

6. Oral Surgery

7. Periodontics for al 816

4. Prosthodontics and

8. Public Health Dentistry

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PRINCIPAL Payananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Dayananda Sagar Coollege of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

January 31, 2017

TIME TABLE FOR IV B.D.S 2017 - 2018 Odd Batch w.e.f 01/02/2017

Days	9.00am -	10.00 - 1.00pm	2.00am - 3.00pm	3.00pm - 4.00pm	
•	10.00am Oral Medicine	Dental Clinics	Prosthodontics Theory	Pedodontics Theory	
Monday	Theory Oral Surgery	Dental Clinics	Conservative Theory	Prosthodontics Theory	
Tuesday	Theory Conservative	Dental Clinics	Prosthodontics	Public Health Theory	
Wednesday	Theory Orthodontics	Dental Clinics	Oral Medicine Theory	Periodontics Theory	
Thursday	Theory Oral Surgery	Dental Clinics	Pedodontics	Conservative	
Friday ———	Theory	Denta -	Theory		
Saturday	Periodontics Theory	Dental Clinics	-	•	

Copy to:

- 1. Oral Medicine
- 5. Conservative Dentistry
- 2. Orthodontics
- 6. Oral Surgery
- 3. Pedodontics
- 7. Periodontics
- 4. Prosthodontics
- 8. Public Health Dentistry

Dr. H.P. Raghuveer PRINCIPAL

PRINCIPAL -

Dayananda Sagar College of Dental Sciences

Kurnaraswamy Layout, Pangalore - 560 078,



Dayananda Sagar College of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

August 23, 2018

TIME TABLE FOR IV B.D.S 2018 - 2019 Regular Batch w.e.f 01/09/2018

Days	8.00am - 9.00am	9.00am - 1.00pm	1.00 pm to 2.00 pm	2.00 pm -3.00 pm	3.00pm - 4.00pm
Monday	Pedodontics (Theory)	Dental Clinics		Oral Medicine (Theory)	Oral Surgery (Theory)
Tuesday	Public Health (Theory)	Dental Clinics	F		s/Conservative acticals)
ednesday	Conservative (Theory)	Dental Clinics	LUNCH BREAK		cs/Conservative acticals)
Thursday	Orthodontics (Theory)	Dental Clinics	BREAK	Oral Medicine (Theory)	Public Health (Theory)
Friday	Oral Surgery (Theory)	Dental Clinics		Periodontics (Theory)	Pedodontics (Theory)
oaturday	Periodontics (Theory)	Dental Clinics			

Copy to:

1. Oral Medicine

5. Conservative Dentistry

2. Orthodontics 2

6. Oral Surgery Va (10)

3. Pedodontics m ≤ 0

7. Periodontics $\frac{9}{2}$

4. Prosthodontics

8. Public Health Dentistry

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Kumaraswamy Layout,

Francisco - 580 078



Dayananda Sagar College of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560 078

August 23, 2018

TIME TABLE FOR IV B.D.S 2018 - 2019 Odd Batch w.e.f 01/09/2018

Days	8.00am - 9.00am	9.00am - 1.00pm	1.00 pm to 2.00 pm	2.00 pm -3.00 pm	3.00pm - 4.00pm
Monday	Pedodontics (Theory)	Dental Clinics		Oral Medicine (Theory)	Oral Surgery (Theory)
Tuesday	Public Health (Theory)	Dental Clinics		(Pra	s/Conservative acticals)
Wednesday	Conservative (Theory)	Dental Clinics	LUNCH BREAK	1	es/Conservative acticals)
Thu rsday	Orthodontics (Theory)	L L		Oral Medicine (Theory)	Public Health (Theory)
Friday	Oral Surgery (Theory)	Dental Clinics		Periodontics (Theory)	Pedodontics (Theory)
Saturday	Periodontics (Theory)	Dental Clinics		*	

Copy to:

1. Oral Medicine 2. 5. Conservative Dentistry

2. Orthodontics 6. Oral Surgery

3. Pedodontics 7. Periodontics

4. Prosthodontics Polyton

8. Public Health Dentistry

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Dayananda Sagar College of Dental Sciences Kumaraswamy Layout.

Bangalore - 560 078



<u>Dayananda Sagar College of Dental Sciences,</u> <u>Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru</u>

DSCDS/Office Order/2020-21/45

December 17, 2020

REVISED TIME TABLE FOR IV B.D.S 2020 - 2021 Regular Batch w.e.f 21/12/2020

Days	8.00am <i>–</i> 9.00am	9:00am to 9:15am	9.15am – 1.00pm	1.00 pm to 1.45 pm	1.45 pm -2.45 pm	3.00pm - 4.00pm
Monday	Oral Medicine /Pedodontics (Theory)		Dental Clinics		Prosthodontics (Theory)	Oral Surgery (Theory)
` Tuesday	Public Health (Theory)		Dental Clinics	1	Prothodontics/ (Pract	
Wednesday	Conservative (Theory)	BR	Dental Clinics	LUNCH BREAK	Prothodontics/ (Pract	
Thursday	Orthodontics (Theory)	BREAK	Dental Clinics	BREAK	Oral Medicine (Theory)	Public Health (Theory)
` Friday	Oral Surgery (Theory)		Dental Clinics		Periodontics (Theory)	Pedodontics (Theory)
Saturday	Periodontics (Theory)		Dental Clinics			
	Copy to: 1. Oral Med 2. Orthodor 3. Pedodont 4. Prosthodo	ntics	6. Oral	servative D Surgery odontics olic Health	- 7	

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Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/Internal/2020/

January 28, 2020

REVISED TIME TABLE FOR IV B.D.S 2020 - 2021 Odd Batch w.e.f 16/01/2020

Days	8.00am - 9.00am	9:00am to 9:20am	9.20am – 1.00pm	1.00 pm to 2.00 pm	2.00 pm -3.00 pm	3.00pm - 4.00pm
Monday	Oral Medicine '/Pedodontics (Theory)		Dental Clinics	Î	Prosthodontics (Theory)	Oral Surgery (Theory)
Tuesday	Public Health (Theory)		Dental Clinics	LI.	Prothodontics/ (Pract	icals)
Wednesday	Conservative (Theory)	BR	Dental Clinics	LUNCH BREAK	Prothodontics/ (Pract	Conservative icals)
Thursday	Orthodontics (Theory)	BREAK	Dental Clinics	BREAK	Oral Medicine (Theory)	Public Health (Theory)
Friday	Oral Surgery (Theory)	•	Dental Clinics		Periodontics (Theory)	Pedodontics (Theory)
Saturday	Periodontics (Theory)		Dental Clinics			
	Copy to: 1. Oral Me			nservative al Surgery	Dentistry	
	2. Orthod 3. Pedodo			riodontics		
	4. Prostho				h Dentistry	

Dayananda Sagar College of Dental Sciences

Rumaraswamy Layout,

Bangalore - 560 078.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/Office Order/2021/055

December 17, 2021

TIME TABLE FOR IV B.D.S 2021 - 2022 Regular and Odd Batch w.e.f 20/12/2021

Days	8.00am - 9.00am		9.15am ~ 1.00pm	1.00 pm to 2.00 pm	2.00 pm -3.00 pm	3.00pm – 4.00pm
Monday	Oral Medio /Pedodon (Theory	cine tics	Dental Clinics		Prosthodontics , (Pract	icals)
Tuesday	Public Heary	alth	Dental Clinics	נט	Prosthodontics (Pract	icals)
Wednesday	Conserva (Theory	tive 🛱	Dental Clinics	NCH	Theory Prosthodontics	Theory Oral Surgery
Thursday	Orthodon (Theor		Dental Clinics	LUNCH BREAK	Oral Medicine (Theory)	Public Health (Theory)
Friday	Oral Surg	gery	Dental Clinics	K	Periodontics (Theory)	Pedodontics (Theory)
Saturday	Periodon (Theor	1	Dental Clinics		-	
	2. Or 3. Pe	al Medicine thodontics dodontics osthodontics	6. ¹	Oral Surg Periodont	_	

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Deyquanda Segat Collect of Posts Science
Kumaran samp Layout,
Bangalane - 500 072.



Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/Office Order/2021/24

April 19, 2021

TIME TABLE FOR IV B.D.S 2021 - 2022 ODD Batch w.e.f 26/04/2021

Monday / Pedodontics (Theory) Tuesday Public Health (Theory) Wednesday Conservative (Theory) Dental Clinics	Days	8.00am – 9.00am	9:00am to 9:15am	9.15am – 1.00pm	1.00 pm to 1.45 pm	1.45 pm -2.45 pm	3.00pm - 4.00pm		
Tuesday Public Health (Theory) Conservative (Theory) Pontal Clinics Dental Clinics Periodontics (Theory) Dental Clinics Dental Clinics Periodontics (Theory) Tothlototricals) Prothodontics (Practicals) Prothodontics (Theory) Dental Clinics Periodontics (Theory) Total Medicine (Theory) Periodontics (Theory) Total Medicine (Theory) Periodontics (Theory) Total Medicine (Theory) Total Medicin	Monday	/Pedodontics				(Theory)			
Friday Oral Surgery (Theory) Periodontics (Theory) Dental Clinics Dental Clinics Copy to: 1. Oral Medicine 2. Orthodontics 3. Pedodontics 7. Periodontics 8. Pedodontics 8. Pedodontics 8. Pedodontics 9. P	Tuesday	Public Health		_	15	11.	11.	(Pract	icals)
Friday Oral Surgery (Theory) Periodontics (Theory) Dental Clinics Dental Clinics Copy to: 1. Oral Medicine 2. Orthodontics 3. Pedodontics 7. Periodontics 8. Pedodontics 8. Pedodontics 8. Pedodontics 9. P	Wednesday	Conservative	BR	Dental Z Clinics H		(Pract	icals)		
Friday Oral Surgery (Theory) Periodontics (Theory) Dental Clinics Dental Clinics Copy to: 1. Oral Medicine 2. Orthodontics 3. Pedodontics 7. Periodontics 8. Pedodontics 8. Pedodontics 8. Pedodontics 9. Ped	Thursday	Orthodontics	EAK		BREAK	(Theory)	(Theory)		
Copy to: 1. Oral Medicine 2. Orthodontics 3. Pedodontics 7. Periodontics	Friday	Oral Surgery	1 1			Pedodontics (Theory)			
1. Oral Medicine 2. Orthodontics 3. Pedodontics 7. Periodontics 7. Periodontics	Saturday								
121		1. Oral M 2. Orthoo 3. Pedod	1. Oral Medicine 2. Orthodontics 3. Pedodontics 7. Periodontics 7. Periodontics						

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DAYANAND SAGAR COLLEGE OF DENTAL SCIENCES REVISED TIME TABLE FOR 1ST YEAR MDS - 2017-18 Batch

From 01/06/2017

DAY	Time	Subject	Teacher Incharge
MONDAY	2.00 PM to 3.00 PM	ANATOMY	Dr. Umesh S.N
TUESDAY	2.00 PM to 3.00 PM	MICROBIOLOGY	Mrs. Swathi C Shetty
WEDNESDAY	2.00 PM TO 3.00 PM	PHYSIOLOGY	Dr. Ramdev B.N Ms. Shesharaju
THURSDAY	2.00 PM TO 3.00 PM	PATHOLOGY	
FRIDAY	2.00 PM TO 3.00 PM	BIOCHEMISTRY	Mrs. Swathi Shetty
SATURDAY	09.00 AM TO 10.00 AM	PHARMACOLOGY	Dr. R.S. Nadig

Note: The attendance must be submitted to the concerned PG Departments every quarterly.

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Dayananda Sagar College of Dental Sciences Kumaraswamy layout, Bangalore - 560078

Teaching Schedule for I Year MDS course for the Basic Sciences 2018-2019 Batch w.e.f June 2018

DAYS SUBJECT		TIME
Monday	Physiology / Biochemistry	3:00 - 4:00pm
Tuesday	General Pathology	3:00 - 4:00pm
Wednesday	Microbiology	3:00 - 4:00pm
Thursday	Anatomy	3:00 - 4:00pm
Friday	Bioengineering	3:00 - 4:00pm
Saturday	Research Methodology / Pharmacology	9:00 - 10:00am

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Bangalore - 560 078.

Dayananda Sagar College of Dental Sciences Kumaraswamy layout, Bangalore - 560078

Teaching Schedule for I Year MDS course for the Basic Sciences 2019- 2020 Batch w.e.f 17th June 2019

DAYS	SUBJECT	TIME
Monday	Physiology / Biochemistry	3:00 - 4:00pm
Tuesday	General Pathology	3:00 - 4:00pm
Wednesday	Microbiology	3:00 - 4:00pm
Thursday	Anatomy	3:00 - 4:00pm
Friday	Bioengineering	3:00 - 4:00pm
Saturday	Research Methodology / Pharmacology	9:00 - 10:00am

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Dayananda Sagar College of Dental Sciences Ku naraswamy layout, Bangalore - 560078

Teaching Schedule for I Year MDS course for the Basic Sciences 2020- 2021 Batch w.e.f September 1st 2020

DAYS	SUBJECT	TIME
Monday	Physiology	3:00 - 4:00pm
Tuesday	Biochemistry	3:00 - 4:00pm
Wednesday	General Pathology Bioengineering	12.00pm to 1.00 pm 3:00 - 4:00pm
Thursday	Anatomy Microbiology	12.00pm to 1.00 pm 3:00 - 4:00pm
Friday	Pharmacology	3:00 - 4:00pm
Saturday	Research Methodology	9:00 - 10:00am

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Dayananda Sagar College of Dental Sciences Kumaraswamy layout, Bangalore - 560078

OSCDS/Office Order/2022/03

Date: 09/02/2022

Teaching Schedule for I Year MDS course for the Basic Sciences 2021- 2022 Batch w.e.f 14/02/2022

DAYS	SUBJECT	TIME
Monday	Physiology - Dr. Nizam	3:00 - 4:00pm
Tuesday	Biochemistry - Mrs. Vidya G	3:00 - 4:00pm
Wednesday	Bioengineering -	3:00 - 4:00pm
Thursday	Anatomy - Dr. Shekarappa Pharmacology (Online CDSIMER)	12.00pm to 1.00 pm 3:00 - 4:00pm
Friday	General Pathology - Dr. Apoorva Microbiology - Mrs. Swathi Shetty	12.00pm to 1.00 pm 3:00 - 4:00pm
Saturday	Research Methodology - Dept. of Public Health Dentistry	9:00 - 10:00am

Incharge: Dr. Suchitra MP - Basic Science Students

Incharge: Dr. JP Darshan - Bio Engineering Students

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Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalore - 560 073.

Dr. Chaya.

DEPARTMENT OF ORAL MEDICINE AND RADIOLOGY DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

WEEKLY SCHEDULE FOR POST GRADUATES

Days	9am -10am	10am – 1 pm	1.00pm- 2.00pm	2.00pm-4.00pm
Mon	Seminar	Clinics	L U N	Clinics/ Duscussion
Tue	Journal Club	Clinics	C H B	Clinics/ discussion
Wed	Seminar	Clinics	R E	Clinics/ discussion
Thur	Seminar	Clinics	A K	Clinics/ discussion
Fri	Case presentation	Clinics		Clinics/discussion
Sat	Clinics/ Test	Clinics		

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU

DEPARTMENT OF ORAL AND MAXILLOFACIAL SURGERY

MDS TIME TABLE

IMDS

- Exodontia theory exam + Viva
- Preclinical work (3 months)
- Basic Sciences (Schedule)
- Seminars
- LD Topic Selection
- RGUHS Dissertation Selection
- Comprehensive Implant workshop + Implant exam
- LD Submission (6 Months)
- Basic Sciences Mock Exam
- RGUHS Basic Sciences Exam
- Conference/ Presentation

II MDS

- Implant Seminars
- Impaction Exam/ Viva
- Peripheral Posting
 - a. KIDWAI INSTITUTE OF ONCOLOGY, BANGALORE- 1 month
 - b. MAZUMDAR SHAW CANCER CENTRE, NARAYANA HEALTH CITY- 2 Months
 - c. NITTE MEENAKSHI INSTITUTE OF CRANIOFACIAL SURGERRY AB SHETTY 1 month
 - d. NIMHANS, BANGALORE- 1 month
- Dissertation Protocol
- Seminars /JC's / Case presentation
- Conference / Presentation

III MDS

- Seminars
- · JC
- Case discussion
- RGUHS Dissertation Submission
- Conference / Presentation
- Mock Exams

RGUHS Exam

Dept. of Oral & Maxillofacia: Surgery Daymanda Sagar College of Dental Sciences and Hospital Bangalore - 560 078 PRINCIPAL

Dayananda Samr College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

Department of Conservative Dentistry and Endodontics Dayananda Sagar College Of Dental Sciences, Bengaluru

TIME TABLE - I MDS (1st 6 months)

DAYS	9:30 am - 10:30 am	10:30 am - 1:00 pm	2:00 pm - 3:00 pm	3:00 pm - 4:00 pm
Monday	Seminar	Preclinical work	Preclinical work	Basic science theory class
Tuesday	Theory test	Topic discussion	Preclinical work	Basic science theory class
Wednesday	Journal Club	Preclinical work	Preclinical work	Basic science theory class
Thursday	Case Report / Instrument demo	Preclinical work	Preclinical work	Basic science theory class
Friday	Seminar	Preclinical work	Preclinical work	Basic science theory class
Saturday	Basic science theory class	Preclinical work		

TIME TABLE FOR I, II, III MDS

DAYS	9:30 am - 10:30 am	10:30 am - 1:15 pm	2:00 pm - 4:00 pm
Monday	Seminar	Clinics	Clinics
Tuesday	Theory test	N R Colony postings	Clinics
Wednesday	Journal Club	Clinics	Clinics
Thursday	Case Report / Instrument demo	Clinics	Clinics
Friday	Seminar	Clinics	Clinics
Saturday	Clinics	Clinics	Clinics

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DEPARTMENT OF PROSTHODONTICS TIME TABLE FOR 1ST YEAR MDS COURSE

DAYS	TIME SCHEDULE				
DATE	9:00 – 10:00 am	10:00 am – 1:00 pm	2:00-4:00 pm		
Monday	Basic Sciences Class	Clinics	Clinics/ Discussion		
Tuesday	Basic Sciences Class	Clinics	Clinics		
Wednesday	Seminar Presentation	Clinics	Clinics		
Thursday	JC Presentation	Clinics	Clinics / Discussion		
Friday	Basic Sciences Class	Clinics			
Saturday	Basic Sciences Class	Clinics	-		

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Bangalore 560 078

DAYS	TIME SCHEDULE				
	9:00 – 10:00 am	10:00 am – 1:00 pm	2:00-4:00 pm		
Monday	Clincs	Clinics	Clinics/ Discussion		
Tuesday	Clinics	Clinics	Clinics		
Wednesday	Seminar Presentation	Clinics	Clinics		
Thursday	JC Presentation	Case discussion/ Interdepartmental case presentation	Clinics		
Friday	Clinics	Clinics	Clinics/ Implant Case Presentation		
Saturday	Clinics	Clinics	-		

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DEPARTMENT OF PERIODONTICS TIME TABLE FOR I MDS COURSE

DAY	TIME SCHEDULE				
***	9 am -10 am	10-1 pm	2-3pm	3-4 pm Basic science classes	
MONDAY	Clinics	Clinics	Clinics	Physiology/ Biochemistry	
TUESDAY	Seminar	Clinics	Clinics	General Pathology	
WEDNESDAY	Journal club	Clinics	Clinics	Microbiology	
THURSDAY	Seminar	Clinics	Clinics/ Discussion	General Anatomy	
FRIDAY	Journal Club	Clinics	Clinics	Bio Engineering	
SATURDAY	Research Methodology/ Pharmacology	Clinics			

12/1/18

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DEPARTMENT OF PERIODONTICS TIME TABLE FOR II MDS COURSE

DAY	TIME SCHEDULE			
	9 am -10 am	10-1 pm	2-4 pm	
MONDAY	Clinics	Clinics	Clinics/ Discussion	
TUESDAY	Seminar	Clinics	Clinics	
WEDNESDAY	Journal club/ Case discussion/ Inter Department case presentation	Clinics	Clinics	
THURSDAY	Seminar	Clinics	Clinics/ Discussion	
FRIDAY	Journal Club	Clinics	Clinics	
SATURDAY	Case presentation	Clinics		

12/1/18

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DEPARTMENT OF PERIODONTICS TIME TABLE FOR III MDS COURSE

DAY	TIME SCHEDULE			
	9 am -10 am	10-1 pm	2-4 pm	
MONDAY	Clinics	Clinics	Clinics/ Discussion	
TUESDAY	Seminar	Clinics	Clinics	
WEDNESDAY	Journal club/ Case discussion/ Inter Department case presentation	Clinics	Clinics	
THURSDAY	Seminar	Clinics	Clinics/ Discussion	
FRIDAY	Journal Club	Clinics	Clinics	
SATURDAY	Case presentation	Clinics		

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS TIME TABLE FOR MDS COURSE

DAY	TIME SCHEDULE			
	9 am to 11 am	11 am to 1 pm	2 pm to 4 pm	
MONDAY	SEMINAR/CASE	CLINICS	CLINICS	
	PRESENTATION			
TEUSDAY	CASE	CLINICS	CLINICS	
=	PRESENTATION			
WEDNESDAY	JC/CASE	CLINICS	CLINICS	
	PRESENTATION			
THURSDAY	CASE	CLINICS	CLINICS	
	PRESENTATION	· ·		
FRIDAY	SEMINAR/CASE	CLINICS	CLINICS	
	PRESENTATION			
SATURDAY	CLINICS	CLINICS		

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Bangalore - 560 078.

FACULTY TRAINING – BCEM,RAATI,TOT, MENTORSHIP





DSCDS/Internal/2022/061

August 18, 2022

CIRCULAR

Inview of the LIC inspection, the concerned faculty may kindly notice that the **BCEM (Basic course** on Educational Methodology) course 25th and 26th August 2022 is rescheduled to 29th and 30th August 2022.

The faculty are instructed to attend all the sessions on both the days. Be on time and actively participate in theory and group activity sessions. A certificate would be issued after undergoing the course and the copy of the same should be submitted to the DETU Coordinator Dr. Sangeetha and Principal's Office (Mrs. Roopa KV).

The list of the faculty members who have so far not undergone the BCEM course is enclosed herewith for your benefit. No leaves can be availed on those days.

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CC to

1. All concerned teaching faculty

2. IQAC

3. Office file

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Dayananda Sagar College of Bental

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DAYANANDA SAGAR COLLEGE OF DENTALSCIENCES

Shavige Malleshwara Hills, Kumaraswamy layout Bengaluru.

Committee for Dental Education Technology

Presents a Training Program on

BASIC COURSE ON EDUCATION METHODOLOGY

Date: 29th & 30th August 2022

Venue: Seminar Hall - Department of Orthodontics

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PROGRAM INVITE

Education is a process, the ultimate goal of which is to bring about desirable changes in the behavior of learners. The changes are

- A) Acquisition of knowledge
- B) Proficiency in skills
- C) Development of attitudes

Education is not teaching (learners) what they do not know but making them behave as they do not behave – Ruskin.

Every student who enters a professional institute would bring his/her own level of competencies (entry level competencies). It is the sole duty of the institution to turn him/her into a competent finished product so that he/she would serve to the expectations of all the stakeholders. Faculty play a vital role in turning the student into a fine professional by imparting favorable changes in knowledge, skills and attitude of the students. Hence faculty need to refine their teaching skills periodically, keeping this in view the "Committee for Dental Education Technology (DET)" of Dayananda Sagar College of Dental Sciences, Bengaluru, is organizing a BCEM (Basic course in education methodology) to the faculty members on 29th and 30th of August 2022. We extend a hearty invitation and warm welcome to the participants.

Member Secretary

Dr. Nagesh L

Chair Person

Dr Hemanth M

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout,

Bangalore - 500 078.

PROGRAM SCHEDULE

Day 1 (29th August 2022)

Time	Schedule	Resource Person
9:00 AM to 9:30 AM	Inauguration	Faculties, Resource Persons, Participants
0.70 414- 0.40 414	Pre-test Pre-test	Dr. Harsha M B
9:30 AM to 9:40 AM 9:40 AM to 10:00 AM	Getting to know	Dr Sangeetha R
10:0 OAM to 10:15 AM	Program Objectives	Dr. Fiarsha M B
10:1 ⁵ AM to 10:45 AM	Definition of Education and its relation to Educational Spiral	Dr.Nagesh L
10:4-5 AM to 11:00 Tea		
11:00 AM to 11:45 AM	Bloom's Taxonomy Group Task 1	Dr.:Nagesh L
11:45 AM to 12:30 PM	Guilbert's Hierarchy Group Task 2	Dr. Harshu M B
12:30 PM to 1:15 PM	Levels and function of Educational Objectives	Dr.Sangeetha R
1:15 PM to 1:45 PM	Lunch	
1:45 PM to 2:30 PM	Adult Learning Principles	Dr. Harsha M B
2:30 PM to 3:45PM	Teaching Learning Methods Group Task - 3A	Dr.Sangeetha R
3:45 PM to 4:15 PM	Introduction to Microteaching	Dr. Harsha M B

Day 2 (30th August 2022)

Time	Schedule	Resource Person	
9:30 AM to 9:45 AM	Review & Preview	Dr.Sangeetha R	
9:45 AM to 10:30 AM	Educational Communication - T - L Media Group Task 3b	Dr. Harsha M B	
10:30 AM to 11:00 AM	Lesson Plan	Dr.Nagesh L	
11:00 AM to 11:15 AM	Теа		
11:15 AM to 12:30 PM	Principles of Student Assessment	Dr. Harsha M B	
12:30 PM to 1:00 PM	Group Task 4		
1:00 PM to 1:15 PM	Post-test	Dr.Sangeetha R	
1:15 PM to 1:45 PM	Lunch		
1:45 PM to 3:45 PM	Microteaching Sessions	Dr. Harsha M B & Dr.Sangeetha R	
3:45 PM to 4:15 PM	Valedictory	Faculty, Resource Persons, Participants	

Dayananda Sagar College of Bental Sciences

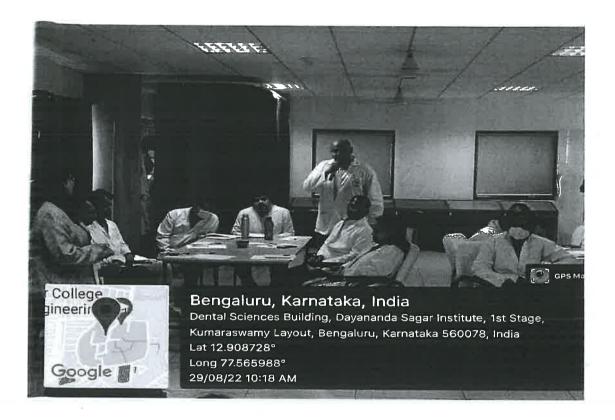
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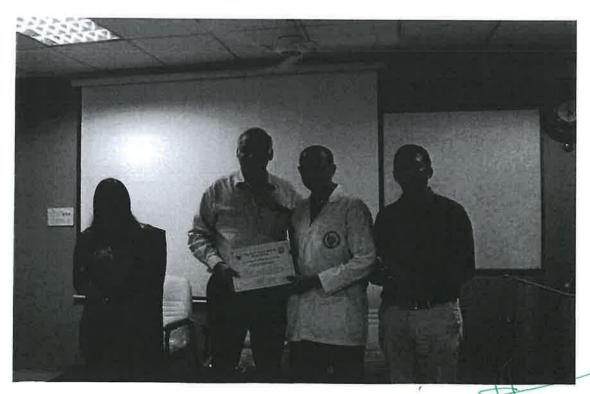
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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 076





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Dayananda Sagar College of Rental Sciences

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Bangalore - 500 078.



Basic Course on Education methodology Workshop Report

The Committee for Dental Education Technology DSCDS organized a Basic Course on Educational Methodology workshop on 29th and 30th of August 2022 for the new faculty and few faculty who had not got trained previously. The program was conducted by an External resource person, namely Dr. Harsha MB, Professor and HOD, Sri Hasanamba Dental College and Hospital, Hassan, who is a recognized resource person under RAATI, RGUHS and two in-house resource persons Dr. Nagesh L and Dr. Sangeetha R both recognised by RAATI, RGUHS.

The program was attended by 26 faculty members. The program began with the pretest and included various lectures and group tasks on various aspects of teaching and assessment and ended with a post test and micro teaching session. Valedictory program was done on 30th Aug 2022. The participants were issued the certificate for being trained in the program.



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RESOURCE PERSONS



Dr Nagesh L PGDHPE Professor Emeritus Research Head DSCDS, Bengaluru.



Dr Harsha M B
Professor & Head, Department of Periodontics,
Sri Hasanamba Dental College, Hassan.
Resource person for RAATI – Rajiv Gandhi
University of Health Sciences.



Dr Sangeetha R
Reader, Department of Oral Pathology,
DSCDS, Bengaluru.
Resource person for RAATI – Rajiv Gandhi
University of Health Sciences.

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Basic Course in Educational Methodology

Venue: OUTHODONTICS SEMINAR HALL.
Dates: 29th > 30th Aug 2022

	O	Signature	
SI No	Participant Details	Day 1	Day 2
	DR. VARADA : A HIREMATH	June of History	James of Hissentt
2	Dr. Rayer Malick Sa. lecturer Dept of OMFS	27 ==	27
3	Ms. Ashitha M Leslie Lecturer Dept of Pharmacology	andla.	3 dula
4	Dr. Kavitha M Simor Lutiur Supt of Pedodontics	Suchan 12	the dantes
5	Dr. Koduru Sravani Senior lecturer Dept of Periodontes	ahors.	Sion
G	De Mile Lumis Una Lerior Lecturer Dept of Arosmodonica	llund	Une i
I.	Dr. M.P. Suchitra. Sr. Lecturer Dept. of Orthodontics		
8.	Dr. Pradeop Chandra C Son Lecture Ryo of Probleds	B	BINOXPA

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9.	Dr. As HOK. HK READER Dept-y CON 1 Ends	the you -	But the "
10	Dr BRUNDA. K Senior Lecturer Dept. of Prosthodontis	Rose	Bos
15	Prof & HOD, Opt of oness Oscol	dra	gr
12.	Dr. Nayana M Br. Leltiner Dept of PUD	fre w	Hay my
13	Dr. Aravind H Professor Deft: Of Orthogontion	Acaril P	Devilop
14)	Pro- hajned Riebhe. Venia lections Orthodoto.	W.	E.
15)	Dr. Megha Kasheri Serior Lecturer Cone 4 Endo	Machaeri	Macheri
16)	Dr. Deepth. M. Benion lectures Com & Endro.	2. epti	1) with
15)	De Pavetter Peabakaran Serior dectreses Cars & Endo	Par the	f-0-
	DR. MATTESTI. P.C. SENIOR LECTURER PUBLIC HERCTH DENTICIPY	U	RINCIPAL gan Callege of Bental Science
	PERIOLE	Dayananda Sa	gar College of Bental Science

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Basic Course in Educational Methodology

Venue: Dates:

		Signa	ture
SI No	Participant Details		
	•	Day 1	Day 2
19.	D. Ambili C Service hecliers Cons and Endo	all.	why
20	PND & (40), PENTOPHD	M.	M
21.	Dr. Jayanth N.R. Sr. Lecturer/Dept-of Optho	Agh	Agen
ત્રર.	Rr Alechata Airsang. Sr. 1 echurer Dept of Cons & Endo.	Hirang	Higrand
£3.	De-PRIYANICA GIRISH Si- Lecturer Dept of Com & Endo	Pula gich	
24.	Dr. Alshan S. L.I. Senser Schellente Deft of Orthogonlas	Jan Jana	Jan Jun
25	vidya. Gr Lecturer Dept of Biochamietry	Cidy	width
26.	Shirlark 155+ Proft Dept-of Ricadain	ng h	M. RINK

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Bangalore 560 076

Basic Course on Education methodology Workshop Report

The Committee for Dental Education Technology DSCDS organized a Basic Course on Educational Methodology workshop on 29th and 30th of August 2022 for the new faculty and few faculty who had not got trained previously. The program was conducted by an External resource person, namely Dr. Harsha MB, Professor and HOD, Sri Hasanamba Dental College and Hospital, Hassan, who is a recognized resource person under RAATI, RGUHS and two in-house resource persons Dr. Nagesh L and Dr. Sangeetha R both recognised by RAATI, RGUHS.

The program was attended by 26 faculty members. The program began with the pretest and included various lectures and group tasks on various aspects of teaching and assessment and ended with a post test and micro teaching session. Valedictory program was done on 30th Aug 2022. The participants were issued the certificate for being trained in the program.



PRINCIPAL

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

ATTENDANCE CERTIFICATE

This is to certify that Dr Harsha MB, Professor and Head, Department of Periodontics, Sri Hasanamba Dental College, Hassan has conducted Workshop on Basic Course in Education Methodology as Resource Person at Dayananda Sagar College of Dental Sciences on 29th & 30th August, 2022.

Prof. Dr. Hemanth.M

M.D.S.,Ph.D

PRINCIPAL

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

PRINCIPAL

Dayananda Sagar College of Bontal Sciences

Kumaraswamy Layout,

Bangalore - 566 078.



Bangalore 560 076



S\s/Internal/2022/058

August 5, 2022

CIRCULAR

It is hereby informed to all the faculty who have not attended the BCEM (Basic course on Educational Methodology) course conducted by RAATI, RGUHS earlier in our college are directed to altend the same which will be organized by DET unit (Dental Education Technology), DSCDS on 25th and 26th August 2022 and obtain a certificate. This course provides the basic knowledge and skills for honing teaching and learning skills. Since none of us are qualified teachers we need to learn and upskill ourselves.

The faculty are instructed to attend all the sessions on both the days. Be on time and actively participate in theory and group activity sessions. A certificate would be issued after undergoing the course and the copy of the same should be submitted to the DETU Coordinator Dr. Sangeetha and Principal's Office (Mrs. Roopa KV).

The list of the faculty members who have so far not undergone the BCEM course is enclosed herewith for your benefit. No leaves can be availed on those days.

PRINCIPAL.

PRINCIPAL

Dayananda Sagar College of Dental Science Kumarnawanny Layout,

Bangalore - 560 078.

CC to

1. All concerned teaching faculty

2. Office file

PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

Circular



<u>Dayananda Sagar College of Dental Sciences.</u> <u>Shavige Malleshwara Hills, Kumaraswamy Layout,</u>

List of Teaching Faculty to attend BCEM on 25th & 26th Aug 2022

SI, No	Name of the Full-time teacher	Designation	Department	Signature
1	Dr. Shobha E S	Prof & Head	Oral Surgery	my/
2	Dr. Avinash J	Prof & Head	Public Health Dentistry	FN.
3	Dr. Sarandha D L	Prof & Head	Prosthodontics	1 Contraction
4	Dr. Goutham K	Reader	Orthodontics	Ol -
5	Dr. Mahesh P C	Sr. Lecturer	Public Health Dentistry	6.
6	Dr. Brunda K	Sr. Lecturer	Prosthodontics	RM
7	Dr. Pradeep Chandra K	Sr. Lecturer	Prosthodontics	B
8	Dr. Kavitha M	Sr. Lecturer	Pedodontics	Julies
9	Dr. Rayan Mallick	Sr. Lecturer	Oral Surgery	BF
10	Dr. M P Suchitra	Sr.Lecturer	Orthodontics	1
11	Dr. Ashok H K	Sr.Lecturer	Conservative Dentistry	Bank
12	Dr. Prajwal P	Sr.Lecturer	Orthodontics	
13	Dr. Jayanth NR	Sr.Lecturer	Orthodontics	Hyd
14	Dr. AFSHAN SAMAN WAF	Sr,Lecturer	Orthodontics	din 11
15	Dr. Nayana M	Sr.Lecturer	Public Health Dentistry	Vin
16	Dr. Shavari Shetty	Sr.Lecturer	Oral Surgery	Slade
17	Dr. Akshatha Airsang	Sr.Lecturer	Conservative Dentistry	Francis
18	Dr. Pavithra Prabhakaran	Sr.Lecturer	Conservative Dentistry	Vantle+
19	Dr. Megha Kachari	Sr.Lecturer	Conservative Dentistry	Wahar
20	Dr. Deepthi M	Sr.Lecturer	Conservative Dentistry	Descale
21	Dr. Ambili C	Sr.Lecturer	Conservative Dentistry	alti
22	Dr. Mir Shahid Ulla	Sr.Lecturer	Prosthodontics	the
23	Dr. Koduru Sravani	Sr.Lecturer	Periodontics	01:12
24	Mrs. Shilpa K	Asst. Professor	Microbiology	1 11-
25	Mrs Vidya Gantela	Lecturer	Biochemistry	(With the
26	Ms. Ashita Mariam L	Lecturer	Pharmacology	Wall day

PAINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 569 078.





Dayananda Sagar College of Dental Sciences, Kumaraswamy Layout, Bangalore- 78.

Department of Public Health Dentistry

Ref. No.: PHD/ BLU/2022/46

Date: 23/05/2022

TO.

The Principal,

DSCDS,

Bangalore.

Respected Sir,

Sub: RAATILMS online faculty development program

With respect to the above subject, I would like to bring to your kind notice that our department staff were unable to login and attend the faculty development program that was supposed to be completed online in 2 modules on or before 22nd as we were unable to access the video modules on Sunday. All the four of us need an extension to complete this online training. Please consider this and do the needful.

Thanking you.

Yours Sincerely

(Dr. Avinash J)

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout,

Bangalore - 560 078.



Atten dance Report - RAATI LMS

2 mess les

To: sup Ort@raatilms.in

Fri, May 27, 2022 at 3:57 PM

Respected Sir,

Pleas@find herewith attached herewith report of attendance of the RAATI LMS Program.

Attended: 23

Not at tended / login problem: 25

This is for your kind information.

Thank-ing you

Yours sincerely

Dr. Hemanth M, M.D.S, Ph.D Principal Dayarlanda Sagar College of Dental Sciences Kumaraswamy Layout Bangalore - 560 078

Tel: 080 26663654 Mob: 7483693035

Pending Staff list for LMS platform.xlsx 20K

support@raatilms.in <support@raatilms.in> To: "Principal ." <pri>principal@dscds.edu.in> Fri, May 27, 2022 at 9:23 PM

On 2022-05-27 15:57, Principal . wrote:

Respected Sir,

Please find herewith attached herewith report of attendance of the RAATI LMS Program.

Attended: 23

Not attended / login problem: 25

This is for your kind information.

Thanking you

Yours sincerely

Dr. Hemanth M, M.D.S, Ph.D PrincipalDayananda Sagar College of Dental Sciences Kumaraswamy Layout Bangalore - 560 078 Tel: 080 26663654 Mob: 7483693035

Noted:

Retained to the last batch FCEM.

Thanks

Team support raati

PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BANGALORE TEACHING STAFF LIST - RAATI LMS REPORT ATTENDANCE

	TEACH	HING STAFF LIST - RAATI LMS	REPORT ATTEN	IDANCE	
SI. No.	Name of the Faculty	Official Mail ID	Telephone No.	Remarks	
	Department of Orthodontics				
1	Dr Hemanth .M.	hemanthm@dscds.edu.in	9845459666	Attended	
2	Dr Karthik J. Kabbur	karthikkabbur@dscds.edu.in	9900093738	Not attended	
3	Dr. Goutham K	gouthamk@dscds.edu.in		Attended only one module. Not completed	
4	Dr Jayaprasad Darsan	darsanjp@dscds.edu,in	9901941040	Not attended	
5	Dr Fatima Khalidi	fatimakhalidi@dscds.edu.in		Not attended	
6	Dr Suchita MP	suchitramp@dscds.edu.in	89717 97272	Not attended	
		Department of Oral Medicin	e & Radiology		
7	Dr Chaya M David	chayamdavid@dscds.edu.in	9844253310	Not attended	
8	Dr Ramnarayan B.K.	ramnarayanbk@dscds.edu.in	9844677090	Attended	
9	Dr Mahesh D.R.	maheshdr@dscds.edu.in	8147606650	Attended	
10	Dr Preeti Patil	preetipatil@dscds.edu.in	9008369002	Attended	
11	Dr Darshana S Nayak	darshananayak@dscds.edu.in	2732073307	Attended	
		Department of Public Heal	h Dentistry		
12	Dr. Avinash J	avinashj@dscds.edu.in	9845200492	Unable to login	
13	Dr Smitha B. Kulkarni	smithakulkarni@dscds.edu.in	9880577585	Unable to login	
14	Dr Nithin N Bhaskar	nithinbhaskar@dscds.edu.in	9980524729	Unable to login	
15	Dr. Mahesh PC	maheshpc@dscds.edu.in	9844478710	Unable to login	
		Department of Oral St	ırgery		
16	Dr Shobha E. S.	shobhaes@dscds.edu.in	9880821614	Attended	
17	Dr Prashant N. T.	prashanthnt@dscds.edu.in	9845034720	Attended	
18	Dr Vinod Rangan	vinodrangan@dscds.edu.in	9845178514	Attended	
19	Dr. Rayan Malick	drrayan14@gmail.com	9986566961	Attended	
20	Dr. Shavari Shetty	shavarishetty@dscds.edu.in	9663299480	Attended	
		Department of Conservative	Dentistry		
21	Dr Vedavathi .B	vedavathib@dscds.edu.in	9880648007	Attended	
22	Dr Sapna.D.V	swapnadv@dscds.edu.in	9448110601	Not attended	
23	Dr Veena S. Pai	veenapai@dscds.edu.in	9886861743	Attended	
24	Dr Ranjini M.A.	ranjinima@dscds.edu.in	9900696386	Attended	
25	DI IGIOTE I	krishnakumargr@dscds.edu.in	8553036155	Attended	
26	Dr Ashok .H.K	ashokhk@dscds.edu.in	9880570766	Attended RINCIPAL	
		Department of Prosthod		ananda Sagar College of Bental Sch	nence
27	Dr. Sarandha DL	sarandhadl@dscds.edu.in		Kumaraswamy Layout, Attendedangalore - 560 078	

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BANGALORE TEACHING STAFF LIST - RAATI LMS REPORT ATTENDANCE

s1. \(Name of the Faculty	Official Mail ID	Telephone No.	Remarks	
lo.		kalpanad71@yahoo.com	9741455346	Not attended	
28	Dr. Kalpana D			Attended	
29	Dr Smitha Sharan	smithasharan@dscds.edu.in	9449087923	Not attended	
30	Dr Sreeharsha TV	sreeharshatv@dscds.edu.in	9401300443	CONTROL OF THE PARTY OF THE PARTY.	
31	Dr Brunda K.	brundak@dscds.edu.in	9008482700	Attended	
32	Dr Pradeep Chandra K	pradeepchandrak@dscds.edu.in	8892501243	Attended	
		Department of Pedodo	ontics		
33	Dr Gargi S Murthy	gargismurthy@dscds.edu.in	9844005148	Attended	
34	Dr Kavitha M	kavitham@dscds.edu.in	9916471276	Attended	
		Department of Period	ontics		
35	Dr Savita A.M.	savitaam@dscds.edu.in	9845433660	Not attended	
36	Dr Sunil.S	sunils@dscds.edu.in	9845802787	Not attended	
37	Dr Archana R Naik	archananaik@dscds.edu.in	9986204322	NT 1 11 - Jod	
38	Dr Pallavi Nanaiah	pallavinanaiah@dscds.edu.in	9845609238	Attended	
Department of Oral Pathology					
39	Dr Krishnanand PS	krishnanandps@dscds.edu.in	9886266776	Not attended	
40	Dr Sangeetha.R	sangeethar@dscds.edu.in	7760400400	Attended	
41	Dr Vidya.M.A	vidyama@dscds.edu.in	9945421369	Not attended	
		Department of Gen. Pathology	& Microbiology		
40	D. Assessed ANI	apoorva@dscds.edu.in	74113 86215	Not attended	
42	Dr. Apoorva AN Mrs. Swathi C Shetty	swathishetty@dscds.edu.in	9482676332 7892604372	Not attended	
40	Mis. Swadi C steery	Department of Physiology &	Biochemistry		
	D. Mahamad Missam Al	D mdnizam@dscds.edu.in	866063233	2 Not attended	
44		vidyag@dscds.edu.in	720488916	NI-1-Handad	
45	Mrs. Vidya Gantela	Department of General			
	Dr. Namitha Rao	nami.rao.91@gmail.com		Not attended	
46	DI. Namuua Nao		I Surgery		
	T	Department of Genera		50 Not attended	
47	Dr. Vikram Venkatesh	vicky.hcv@gmail.com		92 Not attended	
48	Dr. Prakash Babu MN	prakash pavdoc@yahoo.co.in	94400441	- Itot attended	

Attended: 23 Not attended: 25 PRINCIPAL
Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078





Basic Course in Educational Methodology

Venue: OCTHODONTICS SEMINAR HALL.

Dates: 29th & 30th Aug 2022

Sl No	Participant Details	Signature	
	•	Day 1	Day 2
Ĺ	DR. VARADA. VE HIREMATH	Junel of Hisrard	James & Hisrauth
2	Dr. Rayon Mobile Sa. lecturer Dept of OMFS	P27=	27-
3	Ms. Ashitha M Leslie Lecturer Dept of Pharmacology	Mula	Alule
4	Dr. Kavitha M Sunior Lutur Supt of Pedodontics	Sustants	Ale Nantre
5	Dr. Koduru Sravani Senior lecturer Dept of Periodontice	Shop -	Son
6	D. MIR Sumis Una Senior Leener Dept of Prosmodonica	lhoi	Mare 1
J.	Dr. M.P. Suchitra. Sr. Lecturer Dept. of Orthodontics	- Topo -	
3.	Dr. Bradeop Chandra IC Sr. Lecture. Dyo of Brothody	B	B

Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.





9.	Dr. As HOK. HK READER REPT- J. COM 1 Ends	the in.	Brx. Mr.
10	Dr BRUNDA. K Senior Lecturer Dept. of Prosthodontics	Rol	Boy-
11	De Shobha: ES Pref & HORD, Oupt of orups DSCOL	do	gh/
اع .	Dr. Nlayana M Br. Lelturer Dept of PUD	fry W	fay w
13	Dr. Aravind H Professor Deflic Of Carthodomtor	Jean I.P	Jenvil 1-9
14)	Dir hajned Rubh. Venia lections Orthodoto.		E.
15)	Dr. Megha Kasheri Sevior Lecturer Cons 4 Endo	Machaeri	Meduri
14)	Dr. Deepthi. M. Benion lectures Com E Endo.	Diegthi.	Despti
15)	De Parties Peabakaran Serior dectreber Cons & Endo	Van De	f-0-
18	DR. MATTESTI. P.C. SENIOR LECTURER PUBLIC HERCTH NTICTE	G	G

Nayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Pangaloge - 560 078.





Basic Course in Educational Methodology

Venue: Dates:

		Signa	ture
SI No	Participant Details		
		Day 1	Day 2
19.	Dr Ambili C Serios hecliers	12	ph.
	Cons and Endo	and.	
20	PND & (40), PENTSPHD	M.	M
21.	Dr. Tayanth N.R. Sr. Lecturer/Dept-of ortho	Ant	Agen
22.	Dept of Cons & Endo.	Hirang	Higger
23.	De-PRIYANKA GIRISH Si- Kenturer Dept of Cours & Endo	Ryke Jih	E
24.	Dr. Ashan . S.1.1 . Sensei Xeelluse Deft of Osthodonlas	Sign June	Alm Jun
25'	Vidya. Gr Lecturer Dept of Biochanistry	Widey A	Oid A
26.	Shirpaik 155+- 9+ of Microbian		My

PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Mss. Shirpa. K....

DAMA!

Member Secretary, DET Dr. L Nagesh

Dr. Sangeetha R

Resource Person

M.B. Hasto Dr. Harsha M B

Dr. Hemanth M

Resource Person
PAINCIPAL Chairperson, DET

Bangalore - 560 078,





Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Ms. ASHITA MARIAM L

Dr. L Nagesh

Member Secretary, DET

0

Dr. Sangdetha R

Resource Person

M.B. Haske Dr. Harsha M B

Resource Person

or. Hemanth M

PAlchairperson, DET **Principal**

Bangalore - 560 078.





Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Mrs.: VIDYA GANTELA.

Dr. L Nagesh

Member Secretary, DET

Resource Person

K.B. Holyston Dr. Sangeetha R

Dr. Harsha M.B. W. Dr. Hemanth M









Committee of Dental Education Technology

Certificate of Participation

Presented to Dr. MAYANA.M.

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022.

Member Secretary, DET Dr. L Nagesh

Dr. Sangeetha R

Resource Person

A. B. House Dr. Harsha M B

Resource Person INCIPAL

Dr. Kemanth M Jollege of Beneal Striplerson, DET





Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. M. P. Sugentra.....

) mm

Member Secretary, DET Dr. L. Nagesh

Dr. Sangeetha R

Resource Person

M.B. Harsha M.B.

Resource Person INCIPAL

Dr. Hemanth M

nyananda Sagar College of Bentachamperson, DET







Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. JAYANIH. N. R.

MMM/

Member Secretary, DET Dr. L Nagesh

2 Supertua R Dr. Sangeetha R

Resource Person

W. B. HODERA

Dr. Harsha M.B.

Resource Berson College of Bental Charlegerson, DET





Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Akstora. Arsang.....

Dr. L Nagesh

Member Secretary, DET

Dr. Sangeetha R

U.B. Hallalla Dr. Harsha M B

Resource Person

Resource Person

Dr. Hemanth M Principal

Principal Chairperson, DET

FRINCIPAL
-yananda Sagar College of Bental
Kumaraswamy Layout,





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Panithra, Rabhakaran

Dr. L Nagesh

Member Secretary, DET

Dr. Sangeetha R Dr.

Dr. Harsha MB

Resource Person

Resource Person

Dr. Hemanth M Principal Chairperson, DET

> Kumaraswamy Layout, Bangalore - 560 078,





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Afshan Saman Maremani....

Dr. L Nagesh

Member Secretary, DET

Dr. Sangeetha R Dr

Dr. Harsna IVI E

Resource Person

Resource Person

M.B. Handle

Dr. Hemanth M Principal

Principal Chairperson, DET







Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Megna. Kachael

Dr. L. Nagesh My / Mude

Member Secretary, DET

2 enjeutro B Dr. Sangeetha R RATICIDA Resource Person

Dr. Harsha M B

Resource Person

Chairperson, DET Dr. Hemanth M Principal

Perananda Sagar College of Bental Sciences





Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Rayan Mayick.

MMM/

Member Secretary, DET Dr. L Nagesh



Dr. Sangeetha R

Resource Person CIPAL Resource Person

M.B. H. Dele Dr. Harsha M B

Chairperson, DET Dr. Hemanth M Principal

Mangalore - 560 073.





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Amelil. 6.....

MMM) Dr. L Nagesh

Member Secretary, DET

M. B. Klarke Dr. Harsha M B Doyletha R Dr. Sangeetha R

Resource Person INCIPA Resource Person

Chairperson, DET Dr. Hemanth M

Dayananda Sagar College of Bental Sciences







Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Kodura Sraveni

MM/

Member Secretary, DET Dr. L Nägesh

Dr. Sangeetha R. J.

M.B. Hagle Dr. Harsha M B

PKINCIPAL.

Resource Person

Dr. Hemanth M

Chairperson, DET Principal







Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. WARADA HIREMATH.

Member Secretary, DET Dr. L Nagesh

Resource Person

Dopetha R Dr. Sangeetha R

M.B. Marsha Dr. Harsha M B

Resource Person

Dr. Hemanth M Principal

Chairperson, DET





Committee of Dental Education Technology

Certificate of Participation

Presented to Dr. Degrin M.

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022.

Member Secretary, DET Dr. L Nagesh

Donaturo B Dr. Sangeetha R

M. E. Hagde Dr. Harsha M B

Resource Person

Resource Person

Dr. Hemanth M Phincipal

Chairperson, DET

ananda Sagar College of Bental Sciences Bangalore - 560 078.





Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Mg. Shatip. Ulla

Dr. L Nagesh MMI

Member Secretary, DET

Resource Person

Soyenthro B Dr. Sangeetha R

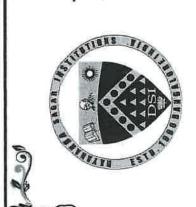
M. J. Hassla Dr. Harsha M B

Resource Person

Chairperson, DET Dr. Hemanth M Principal

> Nollege of Bental Sciences Kumaraswamy Layout,

Bangalore - 566 678.





Committee of Dental Education Technology

Certificate of Participation

Presented to Dr. BRUNDA K

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022.



Dr. L Nagesh Member Secretary, DET



M. J. Holysho

Dr. Sangeetha R, Dr. Har Resource Person 4 Resource

Dr. Harsha M B Resource Person

Dr. Hemanth M Principal Chairperson, DET



Bangalore - 560 078.





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. ARANING M.....

Dr. L Nagesh

Member Secretary, DET

2 another & Dr. Sangeetha R

Dr. Harsha M B

Resource Person

Chairperson, DET Dr. Hemanth M Principal

PRINCIPAL

Bangalore - 560 078.





Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Ashok. A.K......

LAMM

Dr. L Nagesh Member Secretary, DET

Dr. Sangeetha R.

M.B. Halsha MB

Resource Person

Resource Person

e Person

Dr. Hemanth M Principal

Principal Chairperson, DET

> Kumaraswamy Layou Bangelore - 560 078.





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. MAHESH P. G.



Member Secretary, DET Dr. L Nagesh

0



Dr. Harsha M B

Resource Person

Resource Person

Dr. Hemanth M

Chairperson, DET

ada Sagar College of Bental Sciences

Pangalore - 590 078





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Pradeep Chander K.

MMM Dr. L Nagesh

Member Secretary, DET

Dr. Sangeetha R

Resource Person

M. B. H. 1860 Dr. Harsha M B

Resource Person

Chairperson, DET Dr. Hemanth M Principal

> Kumaraswamy Layout, Bangalore - 560 078.





Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Kautha..M.....

Dr. L Nagesh

Member Secretary, DET

0

Dr. Sangeetha R

N.B. Hogela Dr. Harsha M B

Resource Person

Resource Person

"allege of Bental Sciences"

Chairperson, DET Dr. Hemanth M Principal







Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. Avinash. J...

Dr. L Nagesh MMM

Member Secretary, DET

M. B. Harsha M B Dr. Sangeetha R

Resource Person, INCIPA Resource Person

Chairperson, DET Dr. Hemanth M "Principal





0

Committee of Dental Education Technology

Certificate of Participation

Presented to Dr. SHOBHA E.S...

for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022 Educational Methodology held at Dayananda Sagar College of

Dr. L Nagesh
Member Secretary, DET

Dr. Sangeetha R
Resource Person

Dr. Harsha M B

Dr. Hemanth M
Principal



Kumaraswamy Layout, Bangalore - 560 078,





Certificate of Appreciation

Presented to

Dr. Harsha M B

Professor and Head, Periodontology Sri Hasanamba Dental College & Hospital

In recognition to his invaluable contribution as a RESOURCE PERSON

at the BCEM workshop held at Dayananda Sagar College of Dental Sciences on 29th and 30th of August 2022

Dr. I. Nagesh

Member Secretary, DET

Dr. Hemanth M

Principal Chairperson, DET

Carananda Sagar College of Bental Sciences

PRINCIPAL

Kumaraswamy Layout,







Committee of Dental Education Technology

Certificate of Appreciation

Presented to

Dr. Sangeetha R

Dayananda Sagar College of Dental Sciences, Bengaluru Reader, Oral Pathology

In recognition to her invaluable contribution as a RESOURCE PERSON

at the BCEM workshop held at Dayananda Sagar College of Dental Sciences on 29th and 30th of August 2022



Member Secretary, DET





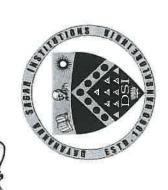
Chairperson, DET

Kumaraswamy Layout, Sangalore - 859 078.

RINCIPAL









Committee of Dental Education Technology

Certificate of Participation

for having attended the two day workshop on Basic Course in Educational Methodology held at Dayananda Sagar College of Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. RATWAR. P.

MM/

Member Secretary, DET Dr. L Nagesh

Sorteethoo (C Dr. Sangeetha-R

M.B. Shale Dr. Harsha MB

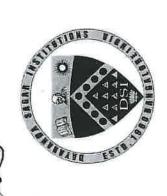
Resource Person Cotto Resource Person namenda Sagar College of Bental Sciences

Dr. Hemanth M

Chairperson, DET Principal









Committee of Dental Education Technology

Certificate of Participation

Educational Methodology held at Dayananda Sagar College of for having attended the two day workshop on Basic Course in Dental Sciences, Bangalore on 29th and 30th of August 2022. Presented to Dr. PRWANKA. GIRLSH.

MMM Dr. L Nagesh

Member Secretary, DET

Dr. Sangeetha R

M.B. Maligha

Dr. Harsha M B Resource Person CIPAL Resource Person

Kumaraswamy Lavout.

Hemanth M Principal





4th 'T' Block, Jayanagar, Bengaluru - 560 041.

No. RGU/RAA/LMS/ 01/2022-23

Date: 12.04.2022

CIRCULAR

As per the resolution No. 152/2 of 142nd Syndicate dated: 09.10.2020, the University has established a Learning Management System (LMS) Platform to train the teachers of affiliated colleges in educational methodology, which is made obligatory for all teachers of affiliated colleges.

The data of teachers as updated by the institutions has been added to create participant ist. All the teachers who are enrolled will receive an email from support@raatilms.in this week. You are informed to bring to the attention of your teachers to check their mail and whate their profile.

In case any teacher of your institution has not received the mail, the head of the respective institution has to consolidate their details as Name, Email, and Mobile Number in Excel Sheet, and mail it to support@raatilms.in, on or before 25th April, 2022.

Please note that the certification of this course is compulsory for all teachers, ir respective of the cadre. Therefore, the heads of intuitions are informed to prioritise this matter.

To

Heads of all institutions affiliated to RGUHS, Karnataka.

Copy to:

1. PA to Vice-Chancellor/Registrar/Registrar (E), FO.

2. Director, RGUHS Academic & Administrative Training Institute (RAATI).

3. System Analyst, to host the Circular on the University Website under the Notifications.

4. Office copy.

PRINCIPAL

PRINCIPAL

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



Rajiv Gandhi University of Health Sciences, Karnataka. RGUHS Academic & Administrative Training Institute (RAATI) Basic Course in Educational Methodology.

Venue: Dayananda Sagar Of Dental Scineces, Bengaluru.

Dates: 10th and 11th Oct 2019.

SI No	Participant Details	Signature			
		Da	y 1	Da	y 2
	Ī	* tolic	2019	11)10	2219
1	Dr. HEMANTH M Principal, Prof & Head	Hhr:	Aluc	Ph	M.
2	DV: CHAYA M DAVID	Po	(PP	Op	ef?
	Professor & Head	-	 		1
3	Dr. RAMNARAYAN B.K Reader	a	R	R	m
4	Mr. MAHESH . D. R Reader	82	1	8	3
5	Dr. PREETI PATIL Sn. Lecturer	Quiti	Quality	gentl'	publ
6	Dr. DARSHANA S. NAYAK. Sn. Lecturer	A.	Ages.	fei.	Les
7	Dr. SMITHA.B.KULKARNI Reader	and the second). Ya	J. M.	& Ma
8	Br. NITHIN N. BHASKAR Reader	No.	No.	pales .	A).
9	Dr. SOURABHA. K-G Sn. Lecturer	Gmarke	Emacha.	Jonarda	Comusha

Dayananda Sagar College of Dental Sciences Sagar College of Dental Sciences Bangalore - 560 078.

TRINCIPAL

Kumaraswany Lave



Rajiv Gandhi University of Health Sciences, Karnataka.
RGUHS Academic & Administrative Training Institute (RAATI)
Basic Course in Educational Methodology.

Venue: Dayananda Sagar Of Dental Scineces, Bengaluru.

Dates: 10th and 11th	ⁿ Oct 2019.
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	Dates. 10	and it	JUL 2017.		
I O	Dr. SAPNA. D. V Reader	LN LN	AN AN	BY	for for
1 1	Dr. PRASHANT. N.T Asso. Professor	Jun 19 19	10/10/19	Jus 11/10/19	Hul)
12	Br. VINOD RANGAN Reader	1) Ardioter	10/Andri	194 1010	DATION
13	Or. VEDAVATHIB Professor	2	1	2	1
14	Or. VEENA. S. PAI Reader	1988	Joh	YX	VSP
15	Or. RANJINI. M. A Reader	P	9	Q/	9
16	Dr. YASHWANTH G Reader	y.	yey	ya	Ha
17	Br. KRISHNA KUMAR.G.R Sn. Leeturev	(BOL) IC	10/10	Cardan legion	Carrie
18	Dr. SMITHA SHARAN Reader	8-110 10/10	S-10/10	1.110	Stro
19	Dr. SREEHARSHA. T.V Reader	Sh. 10/10	Shiolio.	Shi 10	shijo

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout, Bangalore - 560 078. PRINCIPAL

Nevananda Sagar College of Dental Sciences Kumaraswemy Lawout.



Rajiv Gandhi University of Health Sciences, Karnataka. RGUHS Academic & Administrative Training Institute (RAATI) Basic Course in Educational Methodology.

Venue: Dayananda Sagar Of Dental Scineces, Bengaluru.
Dates: 10th and 11th Oct 2019.

_	Dates, 10) and Fi	JUL 2019.		
20					
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	Reader	Sois. Nel	301 S. P. C.	1- S.V	BO'S.
21		1		0	0
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	Professor & Head	1	X	X	1 1
22					
	Dr. SUNIL.S	. Uhr	1	\ Ju	1 le
	Associate Professor	1			
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2 1	Dr. PALLAVI NANAIAH	a De	1	W	
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25	Dr. KARTHIK J. KABBUR	ho	-M/	h	h
43		1/		1/	00
	Professor				
26	Dr. SHARMADA , B.K	197	10	00	la
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	Reader				
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	Dr. KRISHNAND P.S	Kul	1 July 1	In the	1 Ld 13
	Professor		1	4	No
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	Sn. Lecturer				
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29	Or. NITAM SHAH	3/	341	N	NV
	Sn. Lecturer	14	A	17	170
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PRINCIPAL
Dayananda Sagar College of Bental Sciences ananda Sagar College of Bental Sciences Kumaraswamy Layout, Kumaraswamy Layout,

Date: 23-05-2022

From,

^{Dr} Savita AM, Prof and Head

Department of Periodontics

DSCDS, BANGALORE

Τo,

The Principal

DSCDS

Bangalore

Subject: Report regarding attendance of RAATI LMS program by RGUHS

Staff name	ATTENDED
Dr Savita AM	No
Dr Sunil S	NO
Dr Archana R Naik	No
Dr Pallavi Nanaiah	Yes

Regards,

Dr Savita AM

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.



This is to certify that

Dr. Pallavi Nanaiah K

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

(And James

Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar

Dr. M. K. R

Dr. M. K. Ramesh Vice Chancellor RGUHS Academic & Administrative Training Institute (RAATI)





BASIC SCIENCE FCEM DEPORT

70

The poincipal DSCDS Bangalore

Respected Sin,

The below mentioned foculties have not attended the LMS, dust origintered.

- 1 Dr. Krishnomend PS
- a Dr. vidyo mA
- B) Der. vidya G
- Q Dr misam
- (5) and smothi
- 6) for Aportion

Altended

On Sangeetha. R. I home attached the Certificate along with this letter.

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078. your sincerely Sopietro P



This is to certify that

Dr. Sangeetha R

has completed the Foundation Course in Educational Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI



M R Ravi Kumar Registrar

Sound HPRINGE

Dr. M. K. Ramesh Vice Chancellor RGUHS Academic & Administrative Training Institute (RAATI)

Certificate

This is to certify that

Dr. Darshana Sachin Nayak

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

Munir Ahmed R Director, RAATI

M R Ravi Kumar

Dr. M. K. Ramesh

Vice Chancellor Dayananda Sagar Colles

RGUHS Academic & Administrative Training Institute (RAATI)

Department of Pediatric and Preventive Dentistry

Report on LMS training

23-5-2022

Sl.No.	Faculty	Status
1.	Dr.Gargi.S.Murthy	Attended (Certificate enclosed)
2.	Dr.Kavitha.M.	Attended (Certificate not received. Complaint is lodged regarding
		the same. Issue will be resolved shortly as assured by RAATI)

5 235/22

Head of Department Paedodontia

Dayananda Sagar College of Dental Sciences :

BANGALORE - 78.

PRINCIPAL

nd Cagar College of Bental Sciences

Kumar dawany Layout,

Bangalora - 560 078.

DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

REPORT OF FOUNDATION COURSE IN EDUCATIONAL METHODOLOGY (RAATI LMS PROGRAM)

S.No	Name of Faculty with designation	Attended/Not attended	Signature
1.	Dr Hemanth M- Professor and Head	Attended	
2.	Dr Karthik J Kabbur- Professor	Not attended	p
3.	Dr Goutham K- Reader	Attended only 1 module. Not completed.	The state of the s
4.	Dr Darsan Jayaprasad- Senior Lecturer	Not attended	Q/.
5.	Dr Fatima Khalidi- Senior Lecturer	Not attended	Habine.
6.	Dr Suchitra MP- Senior Lecturer	Not attended	

PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangators - 500 078.



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout

Bangalore 560 076



DS/Internal/2022/061

August 18, 2022

CIRCULAR

In View of the LIC inspection, the concerned faculty may kindly notice that the BCEM (Basic course or Educational Methodology) course 25th and 26th August 2022 is rescheduled to 29th and 30th A ≠ gust 2022.

The faculty are instructed to attend all the sessions on both the days. Be on time and actively participate in theory and group activity sessions. A certificate would be issued after undergoing the course and the copy of the same should be submitted to the DETU Coordinator Dr. Sangeetha arnd Principal's Office (Mrs. Roopa KV).

The list of the faculty members who have so far not undergone the BCEM course is enclosed herewith for your benefit. No leaves can be availed on those days.

PRINCIPAL

PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

CC to

1. All concerned teaching faculty

2, IQAC

Office file

Barananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Circular

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

DEPARTMENT OF ORAL MEDICINE AND RADIOLOGY

May 23, 2022

Report on KMS Training

SI. No.	Name	Remarks
1	Dr. Chaya M David	Not Attended
2	Dr. Ramnarayan BK	Attended
3	Dr. Mahesh DR	Attended
4	Dr. Preeti Patil	Attended
5	Dr. Darshana S Nayak	Attended

head of the Department

Oral Medicine & Radiology

PRINCIPAL
Payananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalogs - 500 078.

Certificate

This is to certify that

Dr. Ramnarayan Bk

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

Munir Ahmed R Director, RAATI

M R Ravi Kumar

manda Sagar College of Bental Kumaraswamy Lay

Vice Chancellor

Bangaig

RGUHS Academic & Administrative Training Institute (RAATI)

Certificate

RAATI

This is to certify that

has completed the Foundation Course in Educational Dr Mahesh D R

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar

Vice Chancellor Dayananda Sagar College

Certificate No: 0506224023

RGUHS Academic & Administrative Training Institute (RAATI)

Certificate

This is to certify than

has completed the Foundation Course in Educational Preeti

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar

Vice Chancellor

byananda Sagar College of Kumaraswamy Bangatore .

RGUHS Academic & Administrative Training Institute (RAATI)





This is to certify that

Vidya

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar

Sympt Stranger

r. M. K. Ramesh Vice Chancellor

Tyananda Sagar College of

RGUHS Academic & Administrative Training Institute (RAATI)

Certificate

This is to certify that

Dr. Krishnanand P Satelur

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATILMS

Munit Ahmed R Director, RAATT

M R Ravi Kuma Registra

Dr. M. K. Ramesh

Vice Chancellogayerrands Sagar College of Kumaraswam Hangalore

RGUHS Academic & Administrative Training Institute (RAATI)



This is to certify that

Kavitha M

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

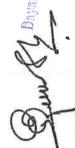
on RAATI LMS



Munir Ahmed R Director, RAATI



M R Ravi Kumar Registrar



Dr. M. K. Ramesh Vice Chancellor RGUHS Academic & Administrative Training Institute (RAATI)

Certificate

This is to certify that

Gargi S Murthy

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R

M R Ravi Kumar

Dr. M. K. Ramesh Vice Chancellor

RGUHS Academic & Administrative Training Institute (RAATI)





This is to certify that

Dr. Hemanth M

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

(m) Jun

Munir Ahmed R Director, RAATI AND ROUGH KINDS

M R Ravi Kumar Registrar Sul !

Dr. M. K. Ramesh Vice Chancellor

RGUHS Academic & Administrative Training Institute (RAATI)

Certificate No: 0506223765

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswany Layout, Bangalore - 560 078. From,
Dr Sarandha D L,
Prof & Head,
Department of Prosthodontics, DSCDS.

Date: 23/05/2022

To, The Principal, DSCDS, Bengaluru

Respected Sir,

Subject: Report on RAATI LMS training.

This is to report regarding the RAATI LMS training attended/not attended by the faculty of Department of Prosthodontics. Certificates of the same have been enclosed.

SI No	Staff	Attended/Not Attended
1	Dr Sarandha D L	Attended
2	Dr Smitha Sharan	Attended
3	Dr Sreeharsha T V	Not Attended
4	Dr Brunda K	Attended
5	Dr Pradeep Chandra K	Attended

Thanking You

Yours Sincerely,

Dr Sarandha D L

Prof & Head,

Department of Prosthodontics, DSCDS.

yananda Sagar College of Dental Sciences Kumaraswamy Layout,

Aumaraswamy Layout Bangalore - 560 078.



This is to certify that

Dr Sarandha D L

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar

RGUHS Academic & Administrative Training Institute (RAATI)

Kumaraswamy Bangalore - 860 073

This is to certify that

Smitha Sharan

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar

Vice Chancellor

RGUHS Academic & Administrative Training Institute (RAATI)

This is to certify that

Brunda K

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar

Vice Chancellor Dayananda Sagar College 9 Kumaraswall Bangalore -

RGUHS Academic & Administrative Training Institute (RAATI)



This is to certify that

Pradeep Chandra K

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

Munir Ahmed R

M R Ravi Kumar

Dr. M. K. Ramesh Vice Chancello Vananda Sagar College of David Sciences

Kumaraswamy

RGUHS Academic & Administrative Training Institute (RAATI)



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DEPARTMENT OF CONSERVATIVE DENTISTRY & ENDODONTICS

Report on RGUHS LMS Training

Following faculty have attended the LMS training Programme conducted by RGUHS

- 1. Dr. Vedavathi.B
- 2. Dr. Veena .S. Pai
- 3. Dr.Ranjini M.A.
- 4. Dr.Krishna Kumar G.R.
- 5. Dr. Ashok H.K.

Following faculty did not attend the LMS training Programme conducted by RGUHS

1. Dr.Swapna D.V.- Has taken leave of absence due to family emergency. (Her father passed away on 17.05.2022 & her presence at Nanjangud, Mysore District was required).

> Veleretti. B Dr. VEDAVATHI.B.

Professor Essando HOD Dept. of Conservative Dentistry & Endodontics Dayananda Sagar College of Dental

> Sciences and Hospital Bangalore-560 078.

Certificates of the are enclosed.

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

PRIN

Dertificate

This is to certify that

Vedavathi B

has completed the Foundation Course in Educational

Methodology (FGEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar



Dr. M. K. Ramesh Vice Chancellor



RGUHS Academic & Administrative Training Institute (RAATI)



This is to certify that

Veena Suresh Pai

has completed the Foundation Course in Educational Methodology (FCEM) held during May-June 2022

on RAATILMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar



Ranghiere - 560 g

PRINCIPAL

Dr. M. K. Ramesh Vice Chancellor

RGUHS Academic & Administrative Training Institute (RAATI)







This is to certify that

Dr Ranjini M.a

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Almed R Director, RAATI

M R Ravi Kumar Registrar

Dr. M. K. Ramesh Vice Chancellor

gride Sagar College of Ben Mumaraswamy I Bangalore - 69

RGUHS Academic & Administrative Training Institute (RAATI)





This is to certify that

Dr.krishna Kumar G R

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

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Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar

ST.

Dr. M. K. Ramesh Vice Chancellor RGUHS Academic & Administrative Training Institute (RAATI)







This is to certify that

Dr Ashok Hk

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS

Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar

Dr. M. K. Ramesh Vice Chancellor RGUHS Academic & Administrative Training Institute (RAATI)



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078

DEPARTMENT OF ORAL & MAXILLO-FACIAL SURGERY

Ref: No.: DSCDS/OMFS/2022/005

Date: Monday, 23 May 2022

TO
TIME Principal
DSCDS

R⊜spected Sir,

Sub LMS Training undertaken Report (May 2022)

With respect to the above-mentioned subject, I wish to inform you that the following faculty from Department of Oral and Maxillofacial Surgery have undertaken the LNIS training by RGUHS under Foundation Course in Educational Methodology.

- 1. Prof. Dr. Shobha ES
- 2. Prof. Dr. Prashanth N T
- 3. Dr. Vinod Rangan
- 4. Dr. Rayan Malick
- 5. Dr. Shavari Shetty

This is for your information. Attached herewith are the copies of the Certificates of all faculty.

Thanking you,

Yours truly,

PRINCIPAL

Nayananda Sagar College of Bental Sciences

Kumaras wa my Layout

Panishme - 866 O'B.

Prof. Dr. Shobha E S Head of Department Dept. of Oral & Maxillofacial Surgery Dayananda Sagar College of Dental Sciences and Hospital

Bangalore - 560 078.



This is to certify that

Shobha E.s

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATILMS





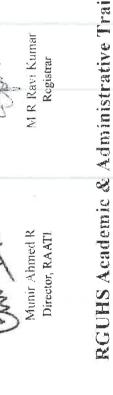
Dr. M. K. Ramesh Vice Chancellor



Bangalore - 560

RGUHS Academic & Administrative Training Institute (RAATI)







This is to certify that

Dr. Prashanth N T

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATILMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar



Dr. M. K. Ramesh Vice Chancellor



RGUHS Academic & Administrative Training Institute (RAATI)

Certificate

This is to certify that

Dr. Vinod Rangan

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATILMS

Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar

Dayananda Sagar College of B Kumaraswamy Le Bangalore - 560

RGUHS Academic & Administrative Training Institute (RAATI)

Certificate No: 0506223751



Dr. M. K. Ramesh Vice Chancellor



This is to certify that

Dr. Rayan Malick

has completed the Foundation Course in Educational

Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI



M R Ravi Kumar Registrar



Dr. M. K. Ramesh Vice Chancellor

Kumaraswam

Bangalore / 560 078

RGUHS Academic & Administrative Training Institute (RAATI)





This is to certify that

Shavari Shetty

has completed the Foundation Course in Educational Methodology (FCEM) held during May-June 2022

on RAATI LMS



Munir Ahmed R Director, RAATI

M R Ravi Kumar Registrar



Vice Chancellor

Bangalore

Sumareswam

RGUHS Academic & Administrative Training Institute (RAATI)



Rajiv Gandhi University of Health Sciences, Karnataka RGUHS Academic & Administrative Training Institute (RAATI)

4th 'T' Block, Jayanagar, Bengaluru - 560 041.

No. PGU/RAATI/BCEM/01/2019-20

Date: 27/09/2019

Circul	lar		

SI	Dates	Venue	is being organised as per the following schedule. Resource Persons	
1	10th & 11th October 2019	Dayanand Sagar Dental College, Bengaluru.	 Dr. Nagashree SR, VS Dental College, Bengaluru. Dr. Umashankar S, Padmashree School of Public Health, Bengaluru. 	
2	15th & 16th October 2019	Sri Rajiv Gandhi Dental College, Bengaluru.	 Dr. Keerthi G, KLE IDS, Bengaluru. Dr. Deepti Vadavi, DAPM RVDC, Bengaluru. 	
3	16 th & 17 th October 2019	Raja Rajeshwari Dental College, Bengaluru.	Dr. Nagabhushan, Sapthagiri IMS, Bengaluru. Dr. Prashant BR, KLE IDS, Bengaluru.	
4	16 th & 17 th October 2019	AJ Shetty Dental College, Mangaluru.	 Dr. Munir Ahmed R, GHMC, Bengaluru. Dr. Harsha MB, Hasanamba Dental College, Hassan. 	
5	17 th & 18 th October 2019	Sri Rajiv Gandhi Dental College, Bengaluru.	 Dr. Amita Coutinho, The Oxford Dental College Bengaluru. Dr. Seema Pradeep, Sri Sri College of Ayurveda, Bengaluru. 	
6	18 th & 19 th October 2019	Raja Rajeshwari Dental College, Bengaluru.	 Dr. Keerthi G, KLE IDS, Bengaluru. Dr. Nagashree SR, VS Dental College, Bengaluru. 	
7	18th & 19th October 2019	College of Dental Sciences, Davanagere.	 Dr. Umashankar S, Padmashree School of Public Health, Bengaluru. Dr. Chandrakala V, KLE IDS, Bengaluru. 	
8	21st & 22nd October 2019	Krishnadevaraya College of Dental Sciences, Bangalore.	 Dr. Saraswathi Naik, Bapuji Dental College, Davanagere. Dr. Nandini TN, Bapuji Dental College, Davanagere. 	
9	21st & 22nd October 2019	Acharya BM Reddy College of Pharmacy, Bengaluru.	 Dr. Nagabhushan, Sapthagiri IMS, Bengaluru. Dr. Prashant BR, KLE IDS, Bengaluru. 	
10	25th & 26th October 2019	Mangala College of Para Medical Sciences, Mangaluru.	Dr. Harsha MB, Hasanamba Dental College, Hassan. Dr. Ravi Kiran Kisan, Kodagu IMS, Madikeri.	
11	25th & 26th October 2019	Raja Rajeshwari Dental College, Bengaluru.	Dr. Jayanthi V, Sapthagiri IMS, Bengaluru. Prof. Jasmine, Krupanidhi CoN, Bengaluru.	
12	30th & 31st October 2019.	College of Dental Sciences, Davanagere	 Dr. Poornima, Bapuji Dental College, Davanagere. Dr. Ranjani Bapuji Dental College, Davanager 	

The Resources Persons are eligible for reimbursement of LCA / TA, DA as per the norms for postgraduate examiners. They are also eligible for honorarium of Rs. 3000/- (Rupees three thousand only) per day. The heads of institutions from where the resource persons are drawn shall depute them as University assignment.

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078. The besting college are eligible for reimbursement of Rs. 200=00 (Rupees two hundred) per day per participant and source persons for refreshments; and Rs. 150=00 (Rupees one hundred fifty only) per participant towards expenses for stationary, including certificates.

The Pincipal of the hosting college will have to provide actual receipts endorsed by him / her, utilisation certificate, attendance sheet of participants marked for each session on both days, and a report with photographs, for claiming the reimbursements.

To

- Principals of the Colleges where the workshops are scheduled
- Resource persons to conduct the workshops as per schedule
- Principals of the colleges from where the resource persons are drawn

Director

Copy to:

1. PA to Vice-Chancellor/Registrar/Registrar(E)

2. Finance Officer, to provide reimbursements to resource persons and hosting colleges.

3. Office copy.

yananda Sagar College of Bental Science. Kumaraswamy Layout,

Bangalore - 560 073.

Date: 11.10.2019

ATTENDANCE CERTIFICATE

This is to certify that Dr. Nagashree S.R, Reader of Public Health Dentistry, V.S. Dental College, Bangalore has conducted two days Work Shop on *The Basic Course in Education Methodology (BCEM)* on 10.10.2019 and 11.10.2019 at Dayananda Sagar College of Dental Sciences, Bangalore.

Dr. Hemanth M. M.D.S., Ph.D.,

PRINCIPAL

PRINCIPAL

Dayananda Sagar College of Dental Science Kumaraswamy Layout,

tumaraswamy Layout, Bangalore - 560 078.

Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

Date: 11.10.2019

ATTENDANCE CERTIFICATE

This is to certify that Dr. Umashankar S. Principal , Padmashree School of Public Health ,Bangalore has conducted two days Work Shop on *The Basic Course in Education Methodology (BCEM)* on 10.10.2019 and 11.10.2019 at Dayananda Sagar College of Dental Sciences, Bangalore.

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Toyananda Sagar College of Bental Science Kumaraswamy Layout, Bangalore - 560 073. Dr. Hemanth M.
M.D.S., Ph.D.,
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yananda Sagar College of Dental Sciences Kumaraswamy Layout,

Bangalore - 560 078.



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore)
(Recognised by Dental Council of India, New Delhi)
ISO 9001: 2008 Certified Institution

To,

03/05/19

Prof. Capt. Nagaraj Subbarao

DSI, Campus 3

Hosur Road

Bangalore

Respected sir,

Sub: Invitation to conduct workshop on mentorship at DCSDS, Bangalore

DSCDS is planning to adopt mentorship programme for under graduate and post graduate students from the academic year 2019 onwards. In this connection, we have formed a mentorship committee and we are happy to have you as an external member of the committee. Sir, we are happy to collaborate with you and receive your valuable inputs. We thank you for accepting the membership and for reviewing our policy document.

As per the oral communication with you, we are conducting a workshop titled "Demystifying mentorship" under your guidance on 17th May 2019 from 10.30 AM -12.30 PM in CIL, DSI, Campus 1, Bangalore. We are extending you a warm invitation to be the resource person for the workshop and provide us the benefit of your expertise. Looking forward eagerly to your workshop.

Thanking you,

Yours faithfully,

(Dr Nagesh L)

Member secretary

Dr. Nagesh .L M.D.S., PGDHPE Professor & HOD

Department of Public Health Dentistry Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout, Bangalore - 560 078. Her Hemanth M)

Principal

Dayananda Sagar College of Dental Science

Kumaraswamy Layout, Bangalore - 560 078.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654

Website: www.dayanandasagar.edu

Dayananda Sagar College of Bensal Sciences
Kumaraswamy Layout,
Rangalore - 560 078.



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore) (Recognised by Dental Council of India, New Delhi) ISO 9001: 2008 Certified Institution

DSCDS/2019-20/

May 21, 2019

To Prof. Capt. Nagaraj Subbarao Dean, Center for Executive Education Dayananda Sagar Institutions Bangalore

Dear Sir,

I, on behalf of Mentorship Committee, DSCDS, would like to extend my sincere gratitude for your motivational presentation on mentorship and sharing your knowledge with the faculty of DSCDS. We would like to have many more inspirational programmes with you in future and seek your guidance in carrying out the mentorship programme at Dayananda Sagar College of Dental Sciences, Bangalore.

Thanking you Sir,

Yours faithfully

Dr. Hemanth.M

M.D.S, Ph.D

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SENATE MEMBER RGUHS
PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout,

Bangalore - 560 078.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654

Website: www.dayanandasagar.edu

MENTORSHIP COMMITTEE

As an initiative in 2019, Dayananda Sagar college of Dental Sciences, formulated a Mentorship Committee along various other committees in January under the leadership of the Head of the Institution Prof. Dr Hemanth M as the Chairperson of the Committee and Dr Nagesh L, Professor and Head, Department of Public health dentistry as the Co-Chairperson and chief mentor of the committee. Prof. Capt Nagaraj Subbarao was included as the external member of the committee as per the direction of Vice Chairperson Dr Premachandra Sagar. The committee conducted meetings couple of times and formulated a policy document, which was approved by all the committee members and also the external member Prof. Capt. Nagaraj Subbarao. The committee has planned to conduct a series of workshops on mentorship to enhance the knowledge as well as train the faculty of DSCDS to take up the mentees and make a head start of the mentorship programme in the institution including and involving 1st Year BDS students from Aug 2019.

In this connection the mentorship committee organized its 1st workshop titled "Demystifying Mentorship" at CIL on 17th May 2019 between 11.30 AM to 2.00 PM. The resource person for the workshop was Prof. Capt. Nagaraj Subbarao, Dean, Center for Executive Education and Professor, School of commerce and Management Studies. The workshop was conducted for all the teaching faculty of DSCDS. The participants were segregated into five groups to facilitate group activities.

The workshop was very inspiring and informative. The presentations were engaging, highly informative and very productive with multiple group activities. We extend our thanks and gratitude to the resource person for such inspiring presentations. Organizing this programme was a learning experience for the Mentorship Committee of DSCDS and the committee looks forward to organize many more such programmes.

Dayananda Sagar Callest of Boneal Sciences

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Bangalore, 560 078.



LECTURE BY Prof. Capt. NAGARAJ SUBBARAO



DELAGATES SEGREGATED INTO GROUPS

tal Sciences Kumaraswaii 560 078.



GROUP ACTIVITY SESSION



GROUP ACTIVITY SESSION

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INAUGURATION OF THE PROGRAMME



GROUP PHOTO OF ALL THE DELAGATES WITH THE RESOURCE PERSON

Chairperson Mentorship Committee

Co- Chairperson Mentorship Committee

(Dr Hemanth M)

(Dr Nagesh L)

PRITYCIP AD tol Science

Regar College

Kumaraswamy

Bangalore

Bangalore

Demystifying Mentorship

A Workshop: Prof. (CAPT) Nagaraj Subbarao

Friday, May 17, 2018

Venue: CIL Auditorium

Dayananda Sagar College of Dental Sciences

From (Hours)	To (Hours)	Event
10:30	11:30	The talk
11:30	11:45	Break
11:45	12:45	Walking the talk
12:45	13:00	Winding down

Daymenda Select College of Bonke Sciences

WORKSHOP ON MENTORSHIP TRAINING

JUNE 11TH AND 12TH 2019

Mentorship program when implemented is a value addition and feather in the cap for any institution. It provides an effective support system for the students and helps the faculty to know the students better. In this connection, the Mentorship Committee of DSCDS organized and conducted an exclusive workshop to orient the faculty of DSCDS to mentorship. This program was the result of constant encouragement and support extended by Dr. D. Premachandra Sagar, Vice-Chairman of DSI.

Our Principal Dr.Hemanth.M, is also the Chairperson of the committee who whole heartedly extended his support and provided the required inputs for organizing and conducting the program. The committee selected two very able resource persons for the program, namely:

1. Dr. Medha A Joshi

Professor and HOD,

Dept. of Allied Sciences

Faculty of Life and Allied Health Sciences

M.S. Ramaiah University of Applied Sciences

2. Dr. Pushpanjali

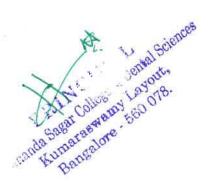
Professor and HOD,

Dept. of Public Health Dentistry

Faculty of Dental Sciences

M.S. Ramaiah University of Applied Sciences

They accepted our invitation and planned a curriculum for the workshop very successfully.



The workshop was held on 11th and 12th June 2019, in the CIL classroom. A copy of the schedule is hereby enclosed. The sessions were very interactive and also encouraged participatory learning. Participants enjoyed learning and they have given a very positive feedback. KSDC has granted nine credit points for this program.

We, the mentorship committee extend our heartfelt thanks to our Vice Chairman Dr. D. Premachandra Sagar, our Secretary Sri. Galiswamy, and our Principal Dr Hemanth M for all the support.

A copy of the brochure, certificate are hereby enclosed.

(DR. NAGESH.L)

Dr. Nagesh .L M.D.S., PGDHPE Professor & HOD

Department of Public Health Dentistry Dayananda Sagar College of Dental Sciences

Kumaraswamy La" Bangalore - 560

PRINCIPAL Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout, Bangelore - 560 078.

Dayananda Sagar College of Benkal Sciences Kumaraswamy Layout, Bangalore - 560 078.



RESOURCE PERSONS DR MEDHA JOSHI AND DR PUSHPANJALI K



PRINCIPAL DR HEMANTH M ADDRESSING THE DELEGATES



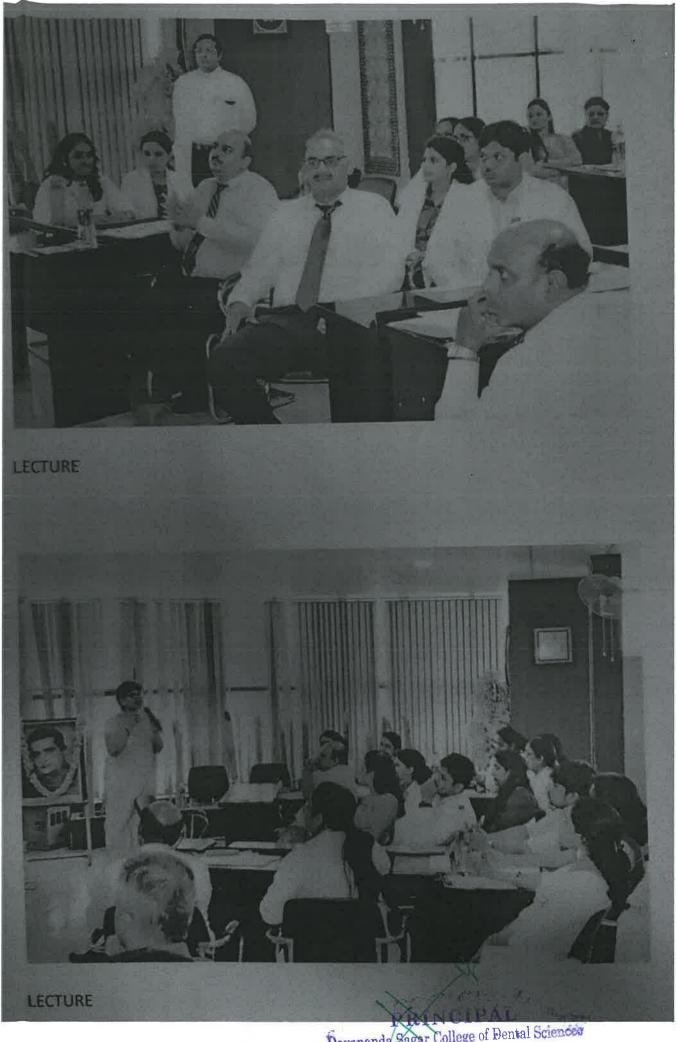
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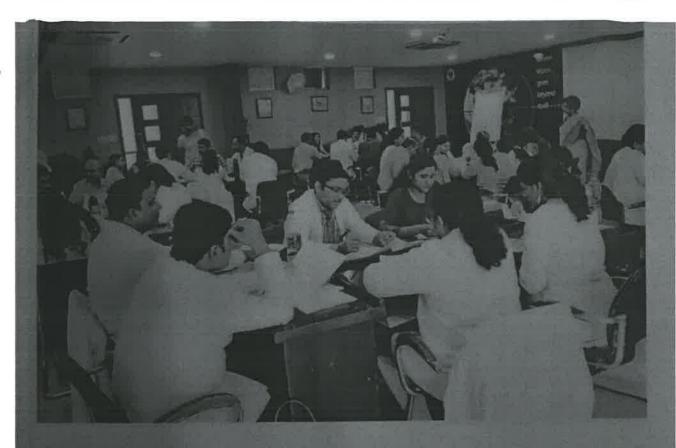
PRINCIPAL DR HEMANTH M FALICITATING DR MEDHA JOSHI

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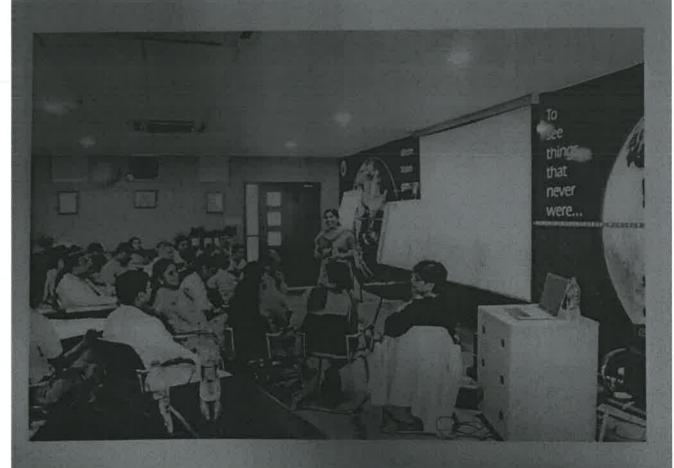
Rangalore - 560 078.



Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.



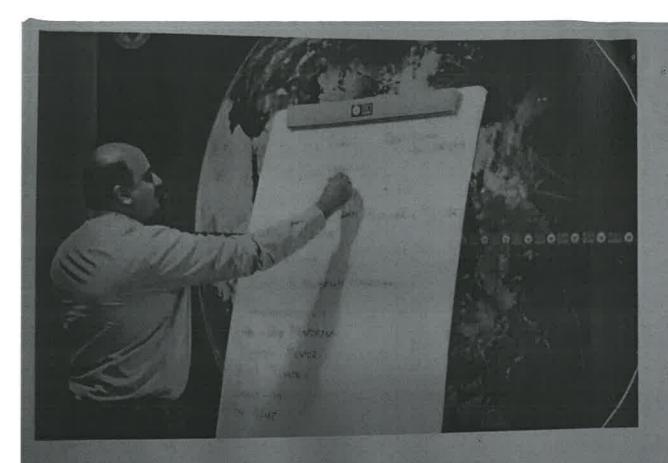
GROUP ACTIVITY



PRESENTATION OF GROUP LEADER

ananda Sagar College of Bental Sciences

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PRESENTATION OF GROUP LEADER



GROUP PHOTO OF ALL THE DELAGATES WITH THE RESOURCE PERSONS

Dayananda Sago Layout,

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleswara Hills, Kumaraswamy Layout

Bangalore 560 078.

03 June 2019

CIRCULAR

This is to bring to the notice of all the faculty members that, the Mentorship Committee of DSCDS is conducting a 2 days workshop on 11.06.2019 and 12.06.2019. The resource persons for the workshop are Dr. Pushpanjali, Professor & HOD, department of Public Health Dentistry, Faculty of Dental Sciences, M.S.Ramaiah University of Applied Sciences and Dr. Medha Joshi, Prof. & HOD, Department of Allied Health Sciences, M.S.Ramaiah University of Applied Sciences.

It is mandatory for all the faculty members to attend the programme.

Venue:

CIL Auditorium

Time:

9.00 am - 4 pm on 11.6.2019

9.00 am - 12.30 PM on 12.06.2019

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Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

CERTIFICATE ISSUED FOR MENTORSHIP PROGRAM(11th&12th Jun2019)

SI	Staff Names	Signature
No 1	Dr Chaya M David	Pp 12/6/19
2	Dr Nagesh .L	1) Jul
3	Dr Ramamurt Ni T.	12/1/2019
4	Dr Savita .A M	The state of the s
5	Dr Kalpana .D	By.
6	Dr Shobha E S.	dry
7	Dr Vedavati .B	Veda
8	Dr Karthik J Kabbur	12/6/13
9	Dr Krishnanda P S	Thui
10	Dr Prashanth N T	Hand
11	Dr Sunil .S	Jh.
12	Dr Gargi S Murthy	· his
13	Dr Mahesh .D R	Maheet 12/6/19
14	Dr Nithin N Bhaskar	and istoles
15	Dr Ramnarayan	
16	Dr Ranjini .M A	Parzies
17	Dr Sangeetha .R	Day and a
18	Dr Sreeharsha T V	8h de
19	Dr Sharmada B K	Sharmad. 12/6/19.
20	Dr Smitha B Kuikarni	10/s/2/0/19
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22	DrSwapna D V	St
23	Dr Veena S Pai	Surapor
24	Dr VinodRangan	1010 ptt 19'

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25	Dr Yashwant G	M
26	Dr Archana R Naik	Join 12/4/19
27	Dr Mohamed Nizam Al Deen Shah	11/01/2010
28	Dr Ashok H K	ALM 12/6/19
29	Dr Brunda.K	Dr. Bound 9216(19
30	Dr Darshana S Nayak	Des.
31	Dr Fatima Khalidi	(John !
32	Dr JayaprasadDarshan	
33	Dr Kavitha M	ah dani S
34	Dr Krishna Kumar G R	LA CRACOUR
35	Dr MayankJaiswal	layar
36	Dr Pallavi .N	bell
37	Dr Pradeep Chandra K	freely
38	Dr PreetiPatil	Deatel
39	Dr R # mya . R.M.	de
40	Dr Sourbha K G	Somasha K.g.
41	Dr TulsiNayak	170
42	Dr Vidya M A	DE TY
43	Mrs Swathi C Shetty	(Salah)
44	Mrs NeenaNian	

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Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES ATTENDANCE FOR MENTORSHIP PROGRAM(11th&12th Jun2019)

	N!		5. 53 507
51	Staff Names	Day 1	Day 2
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1	Dr Chaya M David	Chaya. M. Dairl	Cheya. M. David
2	Dr Nagesh .L	Num	Minh 127019
3	Dr Ramamurt ji i T.	July	Ja
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7	Dr Vedavati .B	DedCait	Dedrais
8	Dr Karthik J Kabbur	Un	Mrs
9	Dr Krishnanda P S	Mar	Frank
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11	Dr Sunil .S	Dh.	Lh.
12	Dr Gargi S Murthy	so-s.rity	· L DS. rty
13	Dr Mahesh .D R	Mulus	Holy
14	Dr Nithin N Bhaskar	Sur	Quet-
15	Dr Ramnarayan	Ma Lemenyer,	Melennir
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17	Dr Sangeetha .R	Sayetti of	20 Metter P
18	Dr Sreeharsha T V	86.	8

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21	Dr SmithaSharan	S-H	15-12-16
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24	Dr VinodRangan	Ut illin	19 publia
25	Dr Yashwant G	M my	The state of the s
26	Dr Archana R Naik	fail	12/8/19
27	Dr Mohamed Nizam Al Deen Shah	Marzolo	11 342 5 6 (19)
28	Dr Ashok H K	Ari HC.	And 146/19
29	Dr Brunda.K	Dr. Bruda.	In Brida
30	Dr Darshana S Nayak	ze.	Bula
31	Dr Fatima Khalidi	Intre.	fative .
32	Dr JayaprasadDarsaan		
33	Dr Kavitha M	dr. Lank	alic akan U
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8	Dr PreetiPatil	Pentil	Death
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42	Dr Vidya M A		<u>d</u>
43	Mrs Swathi C Shetty	Skully .	(Sulf)
44	Mrs NeenaNian	Near Aliver	

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RESEARCH METHODOLOGY



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Shavige Malleshwara Hills, KS Layout Bangalore-78

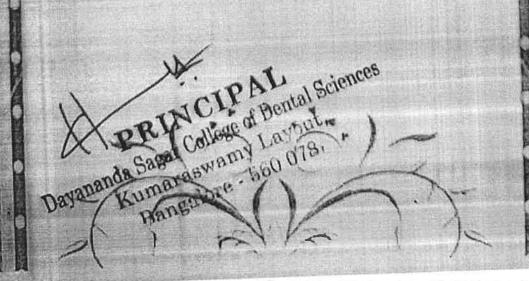
INVITATION

Department Of Public Health Dentistry is glad to inform you that a workshop on Health Research methodology and Health Statistics is being organized from 28th of August to 31st of August 2018. We take the pleasure of inviting you and your department faculty for the inaugural ceremony on 28th of August 2018 at 11.45 AM presided by Dr Hemanth.M, Principal, DSCDS.

Venue: CIL Auditorium, 4th Floor, CD Sagar

Building

Time: 11.45 AM







ORKSHOP ON HEALTH RESEARCH METHODOLOGY AND HEALTH STATISTICS

"DAYANANDA SAGAR – SAMSHODHANA" DEPARTMENT OF PUBLIC HEALTH DENTISTRY DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DATE: 28TH, 29TH, 30TH AND 31ST AUG 2018

Resource Persons:-

- 1. Dr Nagesh Lakshminarayan, MDS, PGDHPE(KLEU and University of Illinois, USA), 'MPhil'. Professor and Head of Department, Dept. of Public Health Dentistry, DSCDS.
 - 2. Dr Ravi Shirahatti, MDS, PGDHPE (KLEU and University of Illinois, USA), 'MHPE'(University of Dundee, Scotland), PGDB.
 - 3. Dr Shyam Sivasamy, MDS, PGDB (Madurai Kamraj University).

We from the Department of Public Health Dentistry, DSCDS are proud to report you that we successfully organized and conducted a WORKSHOP ON HEALTH RESEARCH METHODOLOGY AND HEALTH STATISTICS from the 28th -31st of August 2018 at the CIL AUDITORIUM, DSI.

Dr Nagesh L, the chief resource person for the workshop, along with Dr Ravi Shirahatti and Dr Shyam Sivasamy (speakers), are faculty in the discipline of Public Health Dentistry and have been conducting. workshops on Research Methodology, Biostatistics, Critical Evaluation of Scientific Articles, Research Ethics, Scientific Writing and other allied topics for many years. They have conducted workshops on above said subjects in medical colleges and dental colleges across the country.

The inaugural function took place on 28th August, 2018 at 11:45 AM, and the occasion was graced by Shri Galiswamy, Secretary, DSI, Dr. Hemanth M, Principal, DSCDS and Dr. Roopa R Nadig, Dean, DSCDS.

We had an overwhelming response from the staff of different specialties from our college, and around 10 staff from other medical and dental colleges across Bangalore. There were around 50 registrations for the CDE Programme which was beyond our expectations and the Karnataka State Dental Council has awarded 18 CDE points for the research workshop.

PRINCIPAL Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

The workshop helped every participant to know the fundamentals of Health research and Health statistics, to identify a Research problem, formulate Research question, Research hypothesis, and Null hypothesis and defend. They were able to clearly formulate the objectives of a research engines and literature search (basic and advanced) on a research topic using Pub med and other search using compile the available literature. They were also able to calculate sample size for a given research using G power soft ware and enter the dummy data into the excel sheet, import, analyze the data using SPSS and interpret the data.

At the end of the CDE Programme we received very good feedback for organizing such a programme. Most of them were happy to have gained more knowledge and take home messages. Each and every one of the delegates went home with eager minds to pen down their research works and to do further research with the skills that they had acquired in these 4 days.

The programme was a huge success, and this is a remarkable achievement for the Department of Public Health Dentistry, DSCDS, and for the DSI as a whole.

PHOTOS



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Kumaraswamy Layout,

Bangalore - 560 0 ***

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In	r. Pallavi Nanaiah	00,20 02,20	15680-A	9900093738	-	professor	drsharmada@gmail.com
D	r, Karthik J Kabbur	08/28-31/2010	20871-A	9743216677		reader	darsnip@gmail.com
D	r. Sharmada .B.K	08/20-31/2047	8351	9901941040		Sr.iecture.	drfaimakhalidi@gmail.com
	or. Jayaprasad Darsan	08/28-31/2048		97424818962		Sr.lecturer	kpstlur @gmail.com
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	Dr. Krishnanda.P.S	08/28-31/2050	10230-14			MDS ORAL	sangeethasrikanth04@gmail.com
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4	Dr. Sangeetha.R	08/20-34/2031				MDS ORAL	drvidyaz@rediffmail.com
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5	Dr. Vidya.M.A			9740056942	30	MD PHYSIOLOGY	nizamshah64@gmail.com
6	Dr. Mohammed Nizam Al	08/28-31/2053	KMC 100212	97400303.10			swathishettychoradi@gmail.com
	Deen Shah		100222	9482676332		Msc Medical	swathishettychoradile grid
37	Mrs. Swathi C	08/28-31/2054		9739593877	30	Msc Medical	ninatiagrace@gmail.com swathinagesh2000@gmail.com
38	Mrs. Neena Ninan	08/28-31/2055	Kmc	99167788479	30	mbbs	swathinagesh2000(aghiamaces
39	Dr. Swathi.N	08/28-31/2056	112238				ganusuha080@gmail.com
To	(Service of Charles and Charles	08/28-31/2057	30721A	9916785479		MDS	drsowmyan@gmail.com
40	Dr. Gurusuhas.P	08/28-31/2058	6089A	9448318210		o MDS	pvrnima_gdc@yahoo.com
41	Dr. Sowmya.K.R	08/28-31/2059	5436A	8105254678		0 mds perio	nagarathragiri 1975@yahoo.co.i
42	Dr. Poornima Bandari	08/28-31/2060	6549A	9449631391		0 mds pedo	nature79gali@gmail.com
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46	Dr. Vibha Shetty	08/28-31/2064	896 A	9844035470	HITTO CO.	30	drsmithabk@gmail.com
47	Dr. Nagesh L	08/28-31/2065			SOUGHAN P	30	dmithinbhaskar@gmail.com
48	Dr. Smitha B Kulkarni	08/28-31/2066				30	dr11sourabha@gmail.com
49	Dr. Nithin N Bhaskar	08/28-31/2067			65 / 5	30 MDS	jeswinbds@gmail.com
50	Dr. Sourabha.K.G Dr. Jeswin Jacob	08/28-31/2068		9008565800		30	ISSUED TO THE REAL PROPERTY OF

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				984467709	30	READER	ramnarayanbk@gmail.com
5013 963	Dr. Ramnarayan.B.K	08/28-31/2020	12155_a	9845007180		READER	drnamij@gmail.com
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52 53 54 55	Dr. Hemanth Dr. A Malhira Dr. Remya Dr. Puja Yavagal	08/28-31/2069 08/28-31/2070 08/28-31/2071	(kerala) 5170 A 725-A 7213-A 12411-A	9845459666 9880712716 8861350410 9972946664	30 30 30 30 Professor	mallika3gdc@gamil.com itsremyagovind@gmail.com pujacyavagal@gmail.com

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CRITICAL EVALUATION



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Kumaraswamy Layout, Bangalore-78 DEPARTMENT OF PUBLIC HEALTH DENTISTRY



DS - SAMSHODDHANA

Cordially invites you to the CDE program and workshop on

CRITICAL EVALUATION OF SCIENTIFIC ARTICLES

FOR STAFF AND POST GRADUATE STUDENTS

30th and 31st January 2019 Histology Lab, IInd Floor, DSCDS

RESOURCE PERSONS

DR NAGESH LAKSHMINARAYAN DR SHYAM SIVASAMY Dr PWA YAVAGAL

"Critical reading is one of the most important competencies required for a doctor."

Dr. Nagesh L Chief Coordinator Organizing Secretary

Dr. Smitha B Kulkarni Dr. Nithin N Bhaskar Counting to:

Dr. Hemanth M. Principal & Organizing Chairperson

Dr. Roopa R Nadig Dean & Organizing Co-Chairperson

MANAGEMENT DAYANANDA SAGAR INSTITUTIONS

Dayananda Sagar College of Bontal Sciences Bangulore . 560 L.d.

ABOUT THE PROGRAM:

This workshop aims at enabling the delegates to develop critical evaluation skills for different designs and convert the descriptive journal clubs into critical evaluation journal clubs. This can drive the concepts of research methodology and biostatistics deep into the realm of 'Known' in the delegates. Articles with different study designs will be critically evaluated using different check lists. The idea is to practice the principle of 'Learning by Doing'. We expect post workshop Journal clubs to become intense learning sessions for all the participants.

PROGRAM SCHEDULE

DAY 1 (30th January 2019)

Time	Торіс	Speaker
9.15AM-9.30AM	Ice breaking	
9.30AM-10.15AM	What is critical review and Why critical review?	Dr Nagesh L
1015AM-1045AM	Taking journal clubs to next level Critical evaluation journal clubs	Dr Shyam Sivasamy L
10.45AM-11.00AM	Break	
11.00AM -12.30PM	Group Activity - 1 Critical evaluation of a CONSORT trial	Moderators Dr Nagesh L Dr Shyam Sivasamy
12.30PM-1.00PM	Open House	
1.00PM-1.45PM	Lunch Break	
1,45PM-3,00PM	Group Activity - 2 Critical Evaluation of a poorly reported RCT	Moderators Dr Nagesh L Dr Shyam Sivasamy
3,00PM-4,00PM	Presentations and Open House	

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DAY 2 (31st January 2019)

Time	Торіс	Speaker
9.15AM-9.45AM	PEDro Critical Appraisal Score	Dr Nagesh L
9.45AM-10.15AM	Checklists for Observational Studies	Dr Puja Yavagal
1015AM-1115AM	Group Activity - 3 Critical evaluation of an Observational Study	Moderators Dr Nagesh L Dr Puja Yavagal
11 15AM-11 30AM	Break	
1130AM-12.00PM	Presentation and Discussion	
12 00PM- 12.30PM	Checklists for Systematic Reviews and Meta-analysis	Dr Nagesh L
12.30PM- 1 00PM	Open House	
1.00PM-1.45PM	Lunch Break	
1.45PM-2.15PM	General Checklists	Dr Puja Yavagal
2.15PM-3.00PM	Group Activity-4 Critical Evaluation using JADAD and CASP	Moderators: Dr Nagesh L Dr Puja Yavagal
3.00PM-3.30PM	Presentations and Discussion	PIT
3.30PM-4.00PM	Valedictory	

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WORKSHOP ON CRITICAL EVALUATION OF SCIENTIFIC ARTICLES.

"DAYANANDA SAGAR – SAMSHODHANA" DEPARTMENT OF PUBLIC HEALTH DENTISTRY DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES DATE: 30TH AND 31ST JAN 2019

Resource Persons:-

- 1. Dr Nagesh Lakshminarayan, MDS, PGDHPE(KLEU and University of Illinois, USA), 'MPhil'. Professor and Head of Department, Dept. of Public Health Dentistry, DSCDS.
- 2. Dr Puja C Yavagal, MDS. Professor, Dept. of Public Health Dentistry, Bapuji Dental College and Hospital.
- 3. Dr Shyam Sivasamy, MDS, PGDB (Madurai Kamraj University). Reader, Meenakshi Ammal Dental College, Chennai, Tamil Nadu.

We from the Department of Public Health Dentistry, DSCDS are proud to report you that we successfully organized and conducted a WORKSHOP ON CRITICAL EVALUATION OF SCIENTIFIC ARTICLES on the 30th and 31st of January 2019 at the Histology Lab, Dental College Building, DSI. We thank the management and Principal profusely for providing the facilities and encouragement to do the workshop.

The proposal for this program was first suggested in a staff meeting, in the department of Public Health Dentistry. Our intention was to conduct a research program which would be a continuation of our first workshop on Health Research Methodology and Health Statistics. The workshop was designed to help every participant to apply the knowledge of basics of Health research and Health statistics into application through group activities. The idea was to practice the principle of 'Learning by Doing'. This can also drive the concepts of research methodology and biostatistics deep into the realm of 'Known' in the delegates.

The registration for the research program was first opened up to the faculty and PG students of our college, till 18th Jan 2019. Later, the brochure was sent through emails and whatsapp groups to the Heads of the Department, Dept. of Public Health Dentistry of other dental colleges in Karnataka. We had an overwhelming response from the staff of different specialties from our college, and around 10 staff from other dental colleges across Bangalore. One staff also from Rama Dental College, Kanpur attended the program. Around 55 postgraduates from the Department of Public Health Dentistry of different dental colleges in Karnataka also attended the research program and workshop. We stopped the



registrations once we reached 80 participants. Karnataka State Dental Council has awarded 12 CDE points for the workshop. The registration fee for the workshop was Rs. 900/-.

Dr Nagesh L, the chief resource person for the workshop, along with Dr Puja C Yavagal and Dr Shyam Sivasamy (speakers), are faculty in the discipline of Public Health Dentistry and have been conducting workshops on Research Methodology, Blostatistics, Critical Evaluation of Scientific Articles, Research workshops on Research Writing and other allied topics for many years. They have conducted workshops on above said subjects in medical colleges and dental colleges across the country.

The inaugural function took place on 30th January 2019 at 10:30 AM, and the occasion was graced by Dr. Roopa R Nadig, Dean, DSCDS. She lighted the lamp and rendered a formal welcome to the resource persons and delegates.

All the participants were assigned into seven different groups for active learning and discussion. This workshop enabled the delegates to develop critical evaluation skills for different study designs and will help them in future to convert the descriptive journal clubs into critical evaluation journal clubs. Articles with different study designs were critically evaluated using different check lists like; (STROBE, CASP, PRISMA and JEDAD). Group activities were carefully designed to facilitate learning. The delegates participated with lot of enthusiasm. The sessions were very interactive and productive discussions happened between the participants and the resource persons. Google forms for feedback were sent to all the participants with a request to sincerely send their feedback without fail on both days. The feedback analysis was done and the report was found to be very positive and encouraging.

The valedictory function took place on 31st January 2019 at 3:30 pm, and the occasion was graced by Shri. Galiswamy, Secretary, DSI; Dr. Hemanth M, Principal, DSCDS and Dr. Roopa R Nadig, Dean, DSCDS. Our honorable Secretary Sir distributed the certificates to all the participants.

A copy of the brochure with schedule, certificate and feedback are hereby enclosed.

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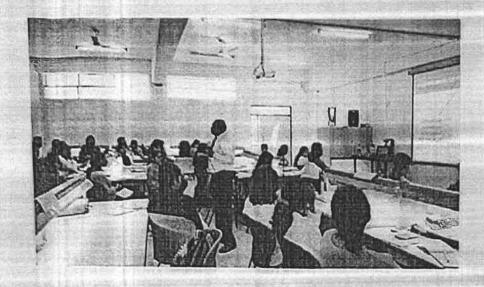
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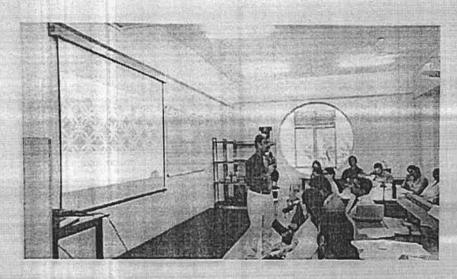
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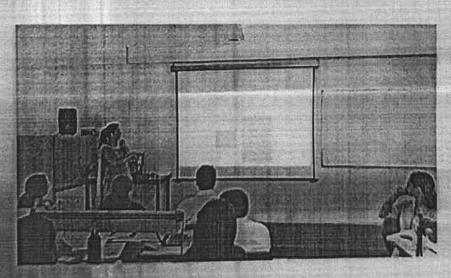
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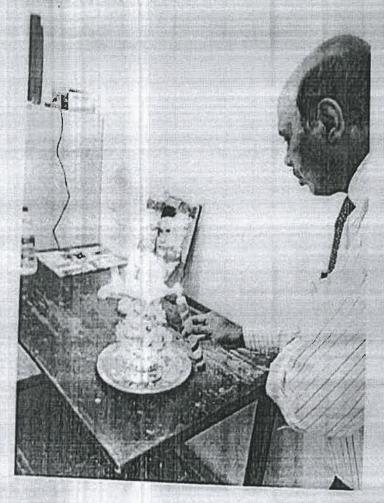
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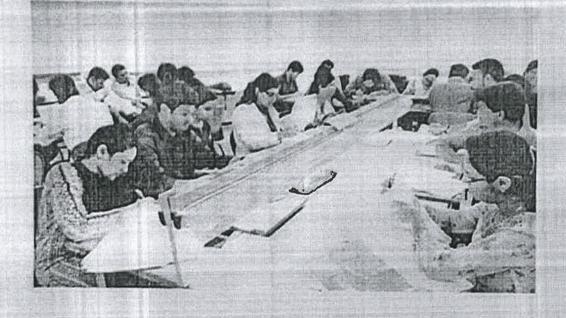


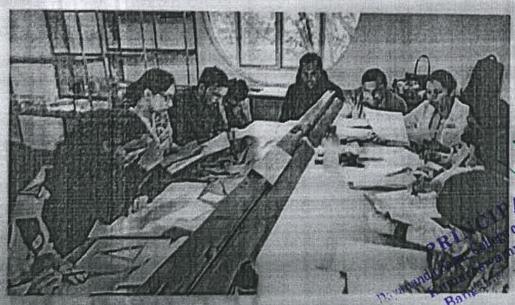


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GROUP ACTIVITIES BY THE PARTICIPANTS

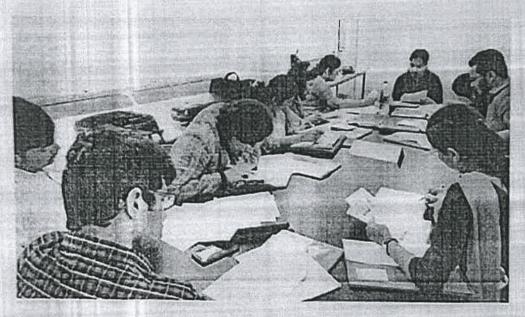






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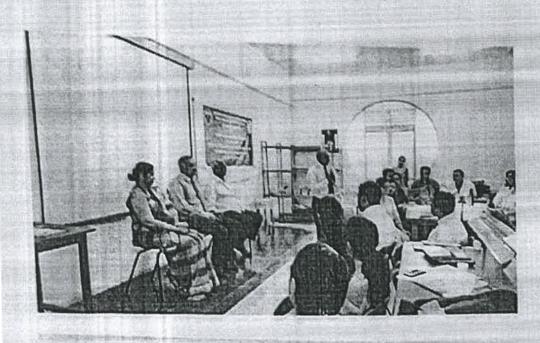






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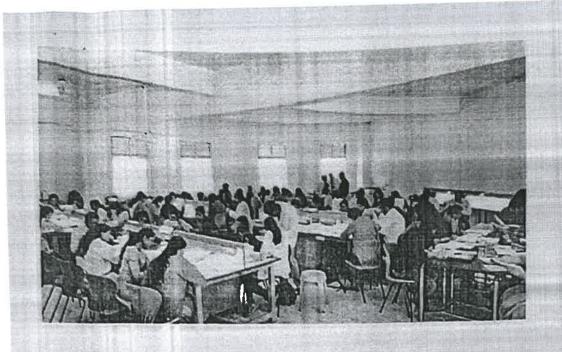
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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

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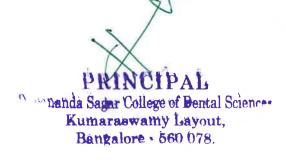
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24	Dr. Guru Suhas	1677_A	9845433660	trop & Head	amsavita@ established con
25	Dr. Suma	30721 A	9916788439	Stay (5+62)	gurusularge Kargual-car
26	Dr. Sivaranjini	\$234-A		pla	Sumajeryo co / Demail or
27	Dr. Vaishali	A. 23089	136231233	leady	notice to be guait on
28	Dr. Mayank Trivedi	11007-4	9620912255	Realer	Yould I V
29	Dr. Faizal Arshid		9945312417	Reader	rayantitely marcan
30	Dr. Anita		9008716729	Reader	Tagalarshide great. on
31	Dr. Fatima Khalidi	14417-A	815192-7097	Associate Traj	with plac @ risecrasacion
32	Dr. Rajflikanth	32765A	9742818962	Su. lecturer V	diffahuerhalidi @ gnade
33	Dr. SreeHarsha	7602-A	9480730896	prof	Jajanikanthba@gmail.com
14	Dr. Chethan M	15932 A	4481308443	Ready	dechard of our
35	Dr. Indhu Malar	33938 A	9535487882		drichercharola @ Yalovia
6	Dr. Bedkekar Sushma	21351 28149 A	72 59702552		do the tharmaticula grande with the smith war



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37	Dr. Evan Cloff Rebello	1 41830 - 4	4567124394	1 96	while our organist
-38	Dr. Aparna R	3847.0	9840 7566	T Too	ajamosalm & ymork
-39	Dr. Seemala Jyostna	41884 A	974068 4001	y per.	do jyoko se mos chows c
40	Dr. Teenu Thomas	35893 A	9164530293	M PG	tune thomas (99) @ gmas
41	Dr. Sharanya Sreekumar	37396A	8547354306	THYCK	do showing Barate Ogmail
92	Dr. Aparna M	37365 A	4400年635年1	10 (Pt)	anciental Egiptic semi
43	Dr. Indu Nair	36406 A	97398 3-634	Ti PG	indunairs q (agraculico m
98	Dr. Rasheed Minhaz	trousing	9571870300	J 150 5 60	I have do I am what & the
45	Dr. Sruthi K.S		77604565 10	11 MIDS (PG)	Szuthitischer 72 (w grad 1
98	Dr. Santhiya B		9787033272	amos cog	disantina 92 @ gmail-con
47	Dr. Mohd Umar Farooq	21741- A	1386437834	I MOS	dellangung Dand. a
48	Dr. Vinitha Vijayan		97-1666 8008	I PHI (AC)	Vinda Vijeyon in Cognoci
49	Dr. Sunil Kumar	30199-2	8197630684	F-MBS	1850011231217 @ 7-400 com
50	Dr. Avisek Mukherjee		8867242477	I-MAS	arisek of 2012 agrant lo
51	Dr. Sona G Therathil	36683-A	9449834722	I Pa	sonagajanar.@gmail.w
52/	Dr. Akshata Agnihotri	19595P	9620996149		aines akshála 28@ gn
53	Dr. Bhuvaneshwari G Nadar	\$ 23819-1		TI PG	V.
54	Dr. Gargi M Patel		3426895739	77 76	bhovana 15689@guoil
55	Dr. Apoorva Shukla				gargipatel 485 8 D grad
56	Dr. Anindita Dutta	21483 A	9167119013	五水	anta deta. 03 dista

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Dayananda Sagar College of Bental Science

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Bangalore - 560 078.

MASTER TRAINERS

Dr. Sangeetha R

"Short course on Educational Methodology' conducted by RGUHS, Karnataka in 2014.

- 'BOOT CAMP FOR MASTER TRAINERS' at RGUHS from 17/12/2018 to 19/12/2018. The three day intense session is to provide the professional support to evolve as an independent trainer in Health Professionals Education.
- Recognised Master Faculty trainer by RGUHS for all health care professionals like Medical,
 Dental, Pharmacy, Physiotherapy, Unani, Yoga, Ayurveda, Homeopathy and nursing
 faculties in 2022(www.raatilms.in)

Faculty Development Programme:

Resource person in collaboration with RAATI, Dayananda Sagar University in collaboration with APTI and other:

RGUHS resource person for Teachers' Training Program from June 2014.

- Resource person for the induction program on Educational Methodology and Innovative methods of Teaching organized by KLES institute of dental sciences, Bengaluru in association with Department of Health Professionals' Education and Development RGUHS in Aug 2014.
- Faculty Development Programme on Basic Course in Education Methodology (Level 1, Phase
 under RGUHS Academic and Administrative Training Institute (RAATI) on 27th & 28th
 March 2019 at T- John Pharmacy College, Bangalore.
- Faculty Development Programme on Basic Course in Education Methodology (Level 1, Phase
 under RGUHS Academic and Administrative Training Institute (RAATI) on 4th & 5th April
 at Ikon Pharmacy College, Bidadi .
- 4. Faculty Development Programme on Basic Course in Education Methodology (Level 1, Phase 1) organized by Dayananda Sagar university in collaboration with APTI on 12th & 13th July 2019 at Dayananda Sagar University (Pharmacy, Physiotherapy and Nursing Faculty).
- Faculty Development Programme on Basic Course in Education Methodology (Level 1, Phase
 under RGUHS Academic and Administrative Training Institute (RAATI) on 6th & 7th Aug
 at Vydehi Institute of dental sciences, Bengaluru.

Dayananda Sagar College of Bentel Sciences
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- Faculty Development Programme on Basic Course in Education Methodology (Level 1, Phase
 under RGUHS Academic and Administrative Training Institute (RAATI) on 30th & 1st Oct
 at Bangalore Institute of dental sciences, Bengaluru.
- Faculty Development Programme on "Sensitizing Teachers in Education and Assessment
 Methodology (STEAM)" organized by College of Pharmaceutical Sciences, Dayananda
 Sagar university in collaboration with APTI from 26th to 30th July 2021.
- Faculty Development Programme on Basic Course in Education Methodology (Level 1, Phase
 under RGUHS Academic and Administrative Training Institute (RAATI) on 13th & 14th July
 at Ambedkar Dental College and Hospital, Bengaluru.
- FDP on "Digital Skills for Educating Health Care Professionals" held on 13th Oct 2021, organized by College of Nursing, Suyog Group of Institution, Mysore.
- Faculty Development online webinar on Assessment methods to the teachers of Ayurveda,
 Yoga, Unani and under (RAATI) in zone wise batches on 14th & 16th Feb 2022.
- Faculty Development Programme on Basic Course in Education Methodology organized by Committee of Dental Education Technology on 29 th & 30 th Aug 2022 at DSCDS,
 Bengaluru.

Coordinator:

- Dr. Sangeetha R, worked as a coordinator in the Faculty Development Programme on Basic Course in Education Methodology (Level 1, Phase 1) under RGUHS Academic and Administrative Training Institute (RAATI) on 10th & 11th Oct 2019 at Dayananda Sagar College of dental sciences, Bengaluru.
- Dr. Sangeetha R, worked as a coordinator in the Faculty Development Programme on Basic Course in Education Methodology under DETU on 29th & 30th Aug 2022 at Dayananda Sagar College of dental sciences, Bengaluru.
- Dr. Sangeetha R, worked as a coordinator in the Faculty Development Programme on OSCE and OSPE under DETU on 10th & 11th Oct 2022 at Dayananda Sagar College of dental sciences, Bengaluru.

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Bootcamp	3 days
	17-19 th Dec2019
	www.raatilms.in

NO. DATE	VENUE
17 - 19 Dec 2010	Rajiv Condni University of Health Sciences, Kurnataka
08 - 10 May 20	Rájiv Gandrii University of resulth Sciences, Karnataka
09 -11 Dec 2019	Rajik Gandri ürmersity oli Histin Sciences, Karnataku
14 - 16 Dec 202	Trief, Society's Dr. Hamain autor Flomo-Lipatric Medical Cyllege.
09 -11 Dec 2019	Rajik Gandin Urmertity of Hisatri Sciences Karnataka

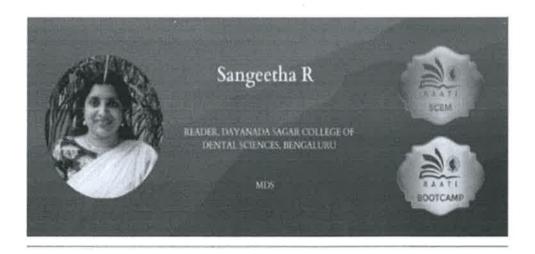
2022	Dr. Sangeetha R	1	Foundation course in Education methodology	April 2022 (1 week)
			Part of the pilot study	



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Bangalore - 560 078.

2022	Dr.Sangeetha R	1	RAATI Master trainers	Short course on
				Education
				Methodology (2014)
				Boot camp for
				master trainers (
				2019)
				Training health care
				professionals from
				2014 till date as
				allotted by RGUHS
				Gave recognition in
				2022 as RAATI
				master trainers in
				webpage
				www.raatilms.in
				total: 9yrs

RAATI MASTER TRAINERS RECOGNISED BY RGUHS WWW.RAATILMS.IN



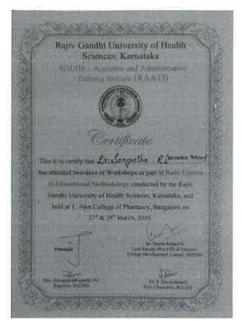
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Bangalore - 560 078.

Resource person Certificate





Rajiv Gandhi University of Health Sciences, Karnataka

RGUHS – Academic and Administrative Training Institute (RAATI)

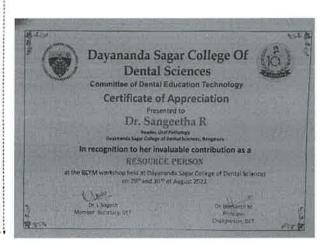


Certificate

this is to certify that Dr SANGEETHA .R. Dayanand sugar Dental College, Bengaluru has conducted two-day Wartshop as Resource Person in Basic Course in Educational Methodology conducted by Rajiv Gandhi annustry of Health Sciences, Karnasaka, held at itangulore Institute of Dental Sciences, Bengaluru on 30th September and 01th October 2019.

Or Vinaya S. Pel Procipal, thangalore institute of Dr. Mantr Abared R
Lead Faculty (RAATII: ii) Director,
College Development Council, RG-UHS

ShrL Shlvanende Kepashi IAS Resistar, RGUIS Dr. S. Snorbidanoud
Vice Chamathy RGHIS



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Bacquature 569 978



Rajiv Gandhi University of Health Sciences, Karnataka RUHHS Academic and Administrative Training Institute (RAATI)

4" T Block, Jayanagar, Bengalaru - 560 041.

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Data horoszánta

Consider

Consider the approved given by Hon ble Vice Chancellor, the Level 1 Phase I of Basic Course in Educational Methodology is being organized at Versignoya College of Pharmacy, Mangalieru, and Davanard Segar College of Pharmacy, Bengaluru as per the following schedule.

54) 1463	Lieton	Venue	Resource Fersons
1	27" B. 28" June 2012	Yenepoya College of Pharmacy Mangakiru	Dr. Mass Ahmad R. Land Floury, RAAT: Dr. Urnashankar S, Padmisshme School of Public Health, Bengakari.
2	12m g. 13m July 2019	Osymend Sagar Cotege of Premiscy Rengasins	Dr. Nagovice, Department hager Durchel Gellegis, bengennes. Dr. Sengonines, Department Segar Durchal Cathage, Bengenhard.

The LCA, TA, DA, and Horozanian for the resource persons shall be binned by the binding instruction. The beach of highlesters from where the recourse persons are dressed are informed to depute the resource persons as the vertile assignment.

Cartification for the participation (ba) business the bunner of RAALI.

- Principals of the Colleges where the nucleonys are scheduled
 Resource persons to conduct the workshops as per schedule
 Principals of the colleges from where the resource persons are drawn.

Day in.

1. PA to Vice-Charcethe Registra/Registra/E)/Finance Officar - RGJHS

2. Dr. Mow'r Abried R. Director (schiitoral charge), College Development Courell, RGHHS

1. Office cigs.





PRINCIPAL Dayananda Sagar College of Bental Sciences Kumaraswamy Leyout, Bangalogo - 591 973.



Rajiv Gandhi University of Health Sciences, Karnataka

4th 'T' Block, Jayanagar, Bengaluru - 560 041.

No. RGU/RAA/NRS/01/2021-22

Date: 08.02.2022

Circular

The Rajiv Gandhi University of Health Sciences, Karnataka has been pioneering quality academic practices in all aspects of educational governance. As an illustration of this commitment, we engage with the faculty development programs to capacity-build our teachers to match the quality benchmarks in assessment practices.

In this context, the University is organising an Online Training in Assessment Methods to the teachers of Ayurveda, in zone wise batches on 14th to 16th February 2022, as per the following schedule:

SI No	Timing		Topic	Resource Person		
1		01.45 p.m. to 02.00 p.m.	Inaugu	guration by the Hon'ble Vice Chancellor		
, М		10.00 a.m. to 10.30 a.m.	Basics of	Dr. Munir Ahmed R, Director, RAATI,		
2	A	02.00 p.m. to 02.30 p.m.	assessment	RGUHS.		
3	M	10.30 a.m. to 11.30 a.m.	Types of Dr. Blaze Rozario, Profess	Types of	Dr. Blaze Rozario, Professor, St. Philomina's	
3 A	A	02.30 p.m. to 03.00 p.m.	assessment	College of Nursing, Bengaluru		
4	M	11.00 a.m. to 11.30 a.m.	Theory-based	Dr. Sangeetha S, Reader, Dayanand Sagar Dental College, Bengaluru.		
4	Α	03.00 p.m. to 03.30 p.m.	assessment			
5	М	11.30 a.m. to 12.00 Noon	Quality issues	Dr. Umashankar S, Principal, Padmashree		
3	Α	03.30 p.m. to 04.00 p.m.	in assessment	School of Public Health, Bengaluru		
_	M	12.00 Noon to 12.30 p.m.	00101	Dr. Ahalya Sharma, Principal, GAMC,		
6	Α	04.00 p.m. to 04.30 p.m.	Q & A Session	Bengaluru.		

The Principals of affiliated Ayurveda Colleges are informed to instruct the eligible theory evaluators of their respective institutions to attend the program without fail, and obtain certificate, which may be made obligatory to conduct theory paper evaluation.

The resource persons are eligible to draw local conveyance and honorarium as per the University norms. The Dean of Ayurveda Faculty and the Chairpersons of Board of Studies will coordinate with the Principals to clarify on the zone-wise schedule.

To

Principals of all affiliated Ayurveda Colleges.

Resource Persons, and the Principals of their respective institutions.

Copy to:

1. PA to Vice-Chancellor/Registrar/Registrar(E)

Finance Officer, to provide reimbursements to resource persons and hosting colleges as mentioned in the Circular.

3. Director, Microline Electronics (P) Ltd, Bengaluru, to provide the technical support for the Webinar.

Dean of Ayurveda Faculty, and the Chairpersons of Boards of Studies, Ayurveda, RGUHS.

5. Director, RAATI.

6. Office copy.

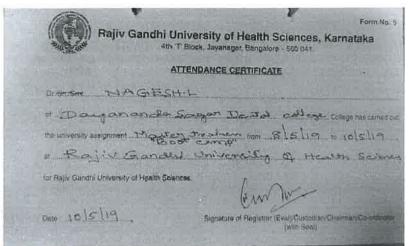
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DR.NAGESH L



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Training institute (RAAT)

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Bangalors - 560 078.



Rajly Gandhi University of Health Sciences, Karnataka 4th T Block, Jayanagar, Bangalore - 560 041

26961937. FAX: 26961931

RGUHS/R&D/Ph.D/Dental-Advisory-Comm /2020-2021

Date: 17.08.2020

MEETING NOTICE

A meeting is scheduled on 25.08.2020 at 11.00 A M in Sushrutha, I^{tt} Floor, RGUHS Bengaluns for Presentation of Ph.D Preliminary synopsis. In view of prevailing COVID -1 pandemic, the advisory Committee members and subject experts may join the meeting through online the supporting link of the online meeting will be shared to you.

AGENDA -- Presentation of Preliminary Synopsis in Dental Faculty-2020-2021. The following members are requested to attend the meeting without fall.

SI No	Name	Designation
I NO	Dr. Jayakara S M Principal AECS Manuthi College of Dental Sciences 108, Hulimaru Tank Bund Road, Off Bannerghatta Road, Bengaluru - 560 076 Mob - 9448064349 Email Id - shettyjayakarargmail.com	Dean faculty of Dental
	Dr. Deinesh M R Principal D A Pandu Memorial R. V. Dental College, No CA 37, 24 th Main, 1 th Phase. J P Nagar, Bengaluru – 560078, Mob – 9880056639 Email Id – drolings/b64@yahop.com	
1	Dr. Sushma R Galagali Professor D A Pandu Memorial R. V. Dental College, K R Road, Bengaluru — 560 004 Mob9845127266	Chairman Board of Studies in Dental (P G)
4	Dr. Krishna Murthy Professor Dept of Oral Surgery Bengalore Institute of Dental Sciences, Hosur Road, Bengahiru – 560 074 Mob. – 9845348530 Email Id. –	Senior Faculty
5	Dr. A. R. Pradeen Principal Oxford Dental College Bengaluru Bengaluru Ernalt Id pradeepraju53@yalico.co.in	Senior Faculty
6	Dr. Chaya M David Prof & HOD Dept of Oral Medicine & Radiology Dayananda Sagar College of Dental Sciences Kumarswarmy Layout, Hengalura – 560 078 Mob – 984425310 Emall – chawa affred@yahoo.com	Subject Expert

7	Dr. M. K. Sunil Prof & HOD Dept of Oral Medicine & Radiology Teerthanker Mahaveer Dentni Cothege & Research Centre Delhi Road, Moradabad, Ul* – 244001 Mob – 09914934090 Email Id – preethipranav2001@gmail.com	Subject Expert
X	Dr. Pushpa Sarkar Director R& D, RGUHS, Bengaluru	Member Socretary

TATD will be paid as per RGUHS norms.

REGISTRAR

TO: The Concerned members

Copy to:
1. PA to Vice Chancellor / PA to Registrar / PA to Finance Officer / Estate Office
2. Office Copy

PRINCIPAL Dayananda Sagar College of Bental Sciences

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



CIDSIMER

TO WHOMSOEVER IT MAY CONCERN

This is to certify that, I BDS 2021-222 batch students are utilizing Anatomy Department Facilities of our Sister concern Medical College Dr. Chandramma Dayananda Sagar institute of Medical Education and Research (CDSIMER).

Prof.Dr. Hemanth.M

PRINCIPAL M.D.S, Ph.D

NayanandPBINGIPAlbge of Bental Sciences

Kumaraswamy Layout, Bangalore - 560 078.



Regarding anatomy dissection / practical classes in Histology and osteology for I BDS students

1 message

Principal. <principal@dscds.edu.in>
To: principalcdsimer <principal.cdsimer@dsu.edu.in>

Wed, Apr 20, 2022 at 3:19 PM

Dear Sir.

As discussed with you earlier subsequent to Hon. Vice-Chairman Sir's approval, we would be sending the First BDS students for Anatomy dissection classes, Histology and Osteology practical classes to CDSIMER once a week. The same has been discussed with Dr. Martin Lucos, HOD, Dept. of Anatomy and he has suggested Tuesday as being convenient to take the classes.

As admissions have been completed this year and the academic session has commenced. Kindly let me know when I could start sending the students, and also request you to kindly instruct the concerned in this regard.

Than king you

Warm regards

Dr. Hemanth M, M.D.S, Ph.D Principal Daya nanda Sagar College of Dental Sciences Kumaraswamy Layout Bangalore - 560 078 Tel: 080 26663654

Mob: 7483693035

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

I BDS Regular - 2021-2022

The following students are admitted to I BDS during the academic year 2021-22.

Sl. No.	Students are admitted to I BDS during the academic year 2021-22. Student Name
1	A Swetha
2	Amal Aqsa
3	Anam Zara Khan
4	Ananya C
5	Anuja Trivedi
6	Anusha KS
7	Anushree Prasad Katte
8	Aparna Dwivdei
9	Arunachalam DV
10	Dari Anu
11	Debonita Goala
12	Deeksha N
13	Deepak AS
14	Deepika V
15	Dharun Prasanth K
16	Gagana HT
17	Hemavathi V
18	Hithendarsingh G
19	Inchara P
20	Ivana G Joanne
21	Kavana L
22	Keerthi k
23	Mahalakshmi RN
24	Meghana M
25	Mohammed Adnan Khan
26	N Lahari
27	Nabam Mate
28	Nandini Mirje
29	Nicole Lasrado
30	Niharika J

Sl. No.	Student Name	
31	Poornima TN	
32	Pravasi Neva Sachin	٠
33	Priyanka Jadhav	g.
34	Pushpalekha HS	
35	S Sri Gayathri Devi	
36	Samridhi Mathur	
37	Sange Dorjee Thungon	
38	Sanjana Bharadwaj	
39	Sanjana R	
40	Santhosh T	
41	Shifa Nazima	
42	Sindhu S	
43	Sindhushree M	
44	Smrithi.S	
45	Sufiyah Siddiqua	
4 6	Sujith PS	
47	Thanishka Talreja	
48	Thrishika M	
49	V C Vetha Vikasini	-
50	Vaibhavi Prakash Patil	
51	Vasunita S	
52	Vignesh V	
53	Zaara Jasmine	

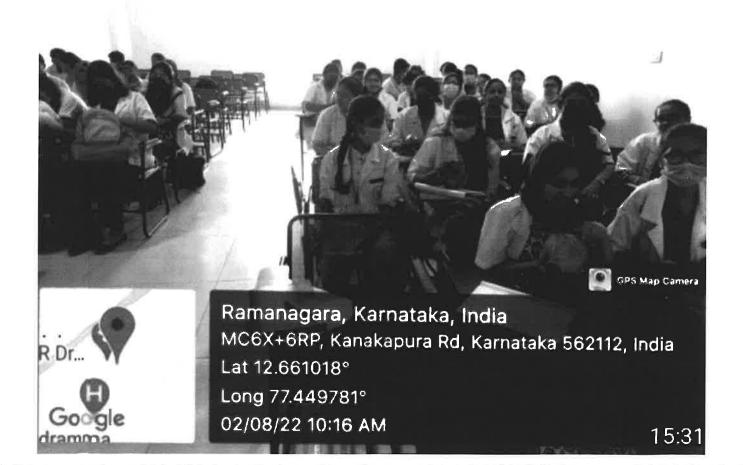
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Bangalore - 560 078.















Go gle ramma Ramanagara, Karnataka, India MC6X+6RP, Kanakapura Rd, Karnataka 562112, India Lat 12.660899°

Long 77.450126° 02/08/22 11:20 AM

15:31

INTERDEPARTMENTAL MEETING

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

<u>Interdisciplinary presentations – (Department of Prosthodontics – Department of Orthodontics)</u>

SI	DATE	TOPIC	Presenter	Prosthodontic	Orthodontics
NO	DATE	10110	rresenter	S	Orthodonnes
1	20/5/2017	SEVERE MIDLINE DIASTEMA CORRECTION FOR ACHIVING IDEAL OVERJET AND OVERBITE FOR VENEER PREPRATION	Dr.Priyanka Bhat Dr.Sachin Shaji M	Dr.Pathi Venkatesh Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween	Dr.Sumitra B Dr.Yogitha Gupta Dr.Cunha Costa Maria Nilosha Dr.Reshma S
2	18/9/2017	ORTHODONTIC CORRECTION OF TILTED MANDIBULAR SECOND MOLAR FOR IMPLANT PLACEMENT IRTMANDIBULAR FIRST MOLAR	Dr.Pathi Venkatesh Dr.Yogitha Gupta	Dr.Priyanka Bhat Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween	Dr.Sumitra B Dr.Sachin Shaji M Dr.Cunha Costa Maria Nilosha Dr.Reshma S
3	15/6/2018	ORTHODONTIC CORRECTION OF BIMAXILLARY PROTRUSION FOR PROSTHETIC REHABILITATION (FPD) OF MISSING CENTRALS AND PEG LATERALS	Dr. Joel Koshy Joseph Dr.Cunha Costa Maria	Dr.Pathi Venkatesh Dr.Priyanka Bhat Dr. Kumara Raju Kurapati Dr.Naila Perween	Dr.Reshma S Nilosha Dr.Yogitha Gupta Dr.Sumitra B Dr.Sachin Shaji M
4	3/1/2019	ORTHODONTIC CORRECTION OF HYPODONTIA AND GENERALISED SPACAING TO GAIN CLASS 1 MOLAR AND CANINE RELATION FOLLOWED BY PROSTHODONTIC REHABILITATION	Dr. Kumara Raju Kurapati Dr.Amtul Salma	Dr. Joel Koshy Joseph Dr.Naila Perween Dr. Iti Badola Dr. Nadira Jabeena. S	Dr.Reshma Banu Dr.Aparna K Dr.Apurba C Saharia Dr.Dhruvi Parikh
5 Agama	16/9/2020	A COMBINED PROSTHODONTIC AND ORTHODONTIC	Dr.Naila Perween Dr.Theresa	Dr. Iti Badola Dr. Nadira Jabeena. S	Dr.Prakruthi SN Dr.Sujina

Them - invegends

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		TREATMENT APPROACH IN A CASE OF GROWTH INHIBITION INDUCED BY DENTAL IMPLANTS	Mathew	Dr Shahid Dr Shreyasee	Sudarsanan Dr.B.R Shreya Dr.Sanda Aamani
6	12/3/2021	SURGICAL CROWN LENGTHENING OF THE WORN ANTERIOR TEETH	Dr. Iti Badola Dr. Sanda Aamani	Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee Dr. Shelvi Pandey Dr. Zameer Ahmed.C M	Dr. B.R. Shreya Dr.Prakruthi . S. N Dr. Sujina Sudarsanan Dr. Theresa Mathew
7	15/6/2021	ENHANCEMENT OF THE VERTICAL DIMENSION THROUGH RESTORATION OF THE OCCLUSAL SURFACE OF POSTERIOR TEETH, THEREBY GAINING THE SPACE NEEDED FOR RESTORATION OF ANTERIOR TEETH.	Dr Shahid Dr. B.R. Shreya	Dr. Iti Badola Dr. Nadira Jabeena. S Dr SHREYASEE Dr. Shelvi Pandey Dr. Zameer Ahmed.C M	Dr.Prakruthi . S. N Dr. Sanda Aamani Dr. Sujina Sudarsanan Dr. Theresa Mathew
8	2/3/2022	TEMPORO MANDIBULAR JOINT DISORDERS	Dr Subbu Dr Shreyasee	Dr Shahid Dr. Shelvi Pandey Dr. Zameer Ahmed.C M Dr Sujana Dr Monika	Dr. Kiran Shad Dr. Kiran Shadani ani Dr. Manas. G Dr. Shwetha .S. Prasad
9	4/3/2022	TEMPORO MANDIBULAR JOINT DISORDERS	Dr Subbu Dr Shreyasee	Dr Shahid Dr. Shelvi Pandey Dr. Zameer Ahmed.C M Dr Sujana Dr Monika	Dr. Kiran Shad Dr. Kiran Shadani ani Dr. Manas. G Dr. Shwetha .S. Prasad

Total No Yearly discussions

SINO	YEAR	Discussions
1	2017	2
2	2018	1
3	2019	1
4	2020	1
5	2021	2
6	2022	2

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

<u>Interdisciplinary presentations –(Department of Prosthodontics –Department</u> of Periodontics)

SI	DATE	TOPIC	Presenter	PG - Periodontics
NO 1	21.08.2017	Crown lengthening- scalpel	Dr.Priyanka Bhat Dr.Prerana Gopal Krishna	Dr.Pathi Venkatesh Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween
2	04.09.2017	Crown lengthening- scalpel	Dr.Pathi Venkatesh Dr.Takhelmayu m Priyambada Devi	Dr.Priyanka Bhat Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween
3	23.10.2017	Crown lengthening- scalpel	Dr.Priyanka Bhat Dr.Ammu Varghese	Dr.Pathi Venkatesh Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween
4	02.01.2018	Frenectomy and ostectomy	Dr. Joel Koshy Joseph Dr.Mitta Mounisha	Dr.Pathi Venkatesh Dr.Priyanka Bhat Dr. Kumara Raju Kurapati Dr.Naila Perween
5	12.02.2018	Frenectomy and ostectomy	Dr. Kumara Raju Kurapati Dr. Varsha Venugopalan	Dr. Joel Koshy Joseph Dr.Naila Perween Dr. Iti Badola Dr. Nadira Jabeena. S
6	22.11.2018	Gummy smile correction	Dr. Joel Koshy Joseph Dr.Mitta Mounisha	Dr.Pathi Venkatesh Dr.Priyanka Bhat Dr. Kumara Raju Kurapati Dr.Naila Perween
7	08.12.2018	Frenectomy and ostectomy	Dr. Kumara Raju Kurapati Dr. Varsha Venugopalan	Dr. Joel Koshy Joseph Dr.Naila Perween Dr. Iti Badola Dr. Nadira Jabeena. S
8	08.04.2019	Crown lengthening- Electrocautery	Dr.Naila Perween Dr.Nageswaran GR	Dr. Iti Badola Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasde

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			I D 37 1	D 1.1 D 1.1
	10.06.2019	Hemisection	Dr.Naila Perween Dr.Nageswaran GR	Dr. Iti Badola Dr. Nadira Jabeena. S Dr. Shahid
9			GR	Dr Shreyasee
10	02.09.2019	Hemisection	Dr. Iti Badola Dr.Tejashwini Annigeri	Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee Dr.Naila Perween
11	09.09.2019	Pocket correction	Dr. Nadira Jabeena. S Dr. Varsha Venugopalan	Dr. Iti Badola Dr Shahid Dr Shreyasee Dr.Naila Perween
42	16.09.2019	Pocket correction	Dr.Naila Perween Dr.Mitta Mounisha	Dr. Iti Badola Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee
12	14.10.2019	Pocket	Dr. Nadira	Dr. Iti Badola
13	14.10.2019	correction	Jabeena. S Dr.Tejashwini Annigeri	Dr. In Badola Dr Shahid Dr Shreyasee Dr.Naila Perween
44	13.07.2020	Crown lengthening- laser	Dr Shreyasee Dr.Mrudula I	Dr. Nadira Jabeena. S Dr. Iti Badola Dr Shahid
15	20.07.2020	Çrown lengthening- laser	Dr Shahid Dr.T Pavithra	Dr. Nadira Jabeena. S Dr. Iti Badola Dr Shreyasee
16	24.08.2020	Crown lengthening- Electrocautery	Dr Shreyasee Dr.T Pavithra	Dr. Nadira Jabeena. S Dr. Iti Badola Dr. Shahid
17	26.10.2020	Hemisection	Dr Shahid Dr.Mrudula I	Dr. Nadira Jabeena. S Dr. Iti Badola Dr Shreyasee
	08.02.2021	Hemisection	Dr Shreyasee Dr.Mrudula I	Dr. Shahid Dr. Shelvi Pandey Dr. Zameer Ahmed.C M
19	19.04.2021	Pocket correction	Dr Shahid Dr.T Pavithra	Dr. Shelvi Pandey Dr. Zameer Ahmed.C M Dr Shreyasee
20	10.05.2021	Pocket	Dr. Zameer	Dr Shahid

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		correction	Ahmed.C	Dr. Shelvi Pandey
			Dr.Niveditha S	Dr Shreyasee
	14.06.2021	Crown	Dr. Shelvi	Dr Shahid
		lengthening-	Pandey	Dr. Zameer Ahmed.C
		laser	Dr.Ashwini	M
21			Uppin	Dr Shreyasee
	05.07.2021	Crown	Dr. Zameer	Dr Shahid
		lengthening	Ahmed.C	Dr. Shelvi Pandey
		–laser	Dr.Ashwini	Dr Shreyasee
22			Uppin	
	19.07.2021	Crown	Dr. Shelvi	Dr Shahid
		lengthening-	Pandey	Dr. Zameer Ahmed.C
		Electrocautery	Dr.Niveditha S	M
23		,		Dr Shreyasee

Total No Yearly discussions

SI NO	YEAR	Discussions
1	2017	3
2	2018	4
3	2019	6
4	2020	4
5	2021	6

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PEDO- ENDO

DATE	TOPIC/PROCEDURE	PRESENTER	LIST OF ATTENDEES
9.02.2017	Case discussion on apexification	Dr Paramarshi	Dr Gargi S Murthy Dr Roopa Nadig Dr Vedavathi Dr Swapna Dr Veena Dr Ranjini Dr Yashwanth Dr Krishna Kumar Dr Ashok HK
2.06.2017	Case discussion on apexification	Dr Shruthi	Dr Gargi S Murthy Dr.Kavitha.M Dr Roopa Nadig Dr Vedavathi Dr Swapna Dr Veena Dr Ranjini Dr Yashwanth Dr Krishna Kumar Dr Ashok HK
22.06.2017	Case discussion on Apexification	Dr Sathendra	Dr Gargi S Murthy Dr.Kavitha.M Dr Roopa Nadig Dr Vedavathi Dr Swapna Dr Veena Dr Ranjini Dr Yashwanth Dr Krishna Kumar Dr Ashok HK
6.09.2017	Case discussion on apexification	Dr Sathendra	Dr Gargi S Murthy Dr Roopa Nadig Dr Vedavathi Dr Swapna Dr Veena Dr Ranjini Dr Yashwanth Dr Krishna Kumar Dr Ashok HK
2.03.2017	Case discussion on	Dr Paramarshi	Dr Gargi S Murthy

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			D.D. M. P.
	apexification		Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
9.08.2018	Case discussion on vital	Dr Shruthi	Dr Gargi S Murthy
	pulp therapy		Dr Kavitha. M
			Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
	1		Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
22.11.2018	Case discussion on	Dr Niveditha	Dr Gargi S Murthy
22.11.2010	apexification	Di Niveditila	Dr Kavitha. M
	apexilication		Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
10.10.0010	G II	70.01	Dr Ashok HK
13.12.2018	Case discussion on	Dr Shravya	Dr Gargi S Murthy
	apexification		Dr Kavitha .M
			Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
6.6.2019	Case discussion on	Dr Chandni	Dr Gargi S Murthy
	apexification		Dr Kavitha .M
	·		Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Yashwanth Dr Krishna Kumar
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11.04.2019	Case discussion on apexification	Dr Niveditha	Dr Gargi S Murthy Dr Kavitha. M Dr Roopa Nadig Dr Vedavathi Dr Swapna Dr Veena Dr Ranjini Dr Yashwanth
			Dr Krishna Kumar

24.04.2019	Case discussion on	Dr Shravya	Dr Gargi S Murthy
	apexification		Dr Kavitha .M
	•		Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
1.06.2019	Case discussion on	Dr Nivedita	Dr Gargi S Murthy
	Pulpotomy		Dr Kavitha. M
			Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
	1		Dr Krishna Kumar
			Dr Ashok HK
13.2.2019	Case discussion on vital	Dr Shruthi	Dr Gargi S Murthy
	pulp therapy		Dr Kavitha .M
			Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
11.05.2020	Case discussion on	Dr Bharathi	Dr Gargi S Murthy
	apexification		Dr Kavitha M
			Dr Roopa Nadig
11			1

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pit-			
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
23.01.2021	Case discussion on	Dr Ridyumna	Dr Gargi S Murthy
	revascularisation		Dr Kavitha. M
			Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
3.04.2021	Case discussion	Dr Pratheeksha	Dr Gargi S Murthy
	apexification		Dr Kavitha .M
			Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK
1.05.2021	Case discussion on post	Dr Urvashi	Dr Gargi S Murthy
	and Core		Dr Kavitha. M
			Dr Roopa Nadig
			Dr Vedavathi
			Dr Swapna
			Dr Veena
			Dr Ranjini
			Dr Yashwanth
			Dr Krishna Kumar
			Dr Ashok HK

YEAR	NO OF CASES
2017	5
2018	3
2019	5
2020	1
2021	3

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PEDO- ORAL SURGERY

DATE	TOPIC/PROCEDURE	PRESENTER	LIST OF ATTENDEES
26.6.2019	Right mandibular body fracture Pt name : Deepak 8y/M	Dr.Shaurya	Dr Gargi S Murthy Dr Kavitha .M Dr. Shobha Dr. Prasanth Dr.Vinodh Ragan
4.10.2021	Right mandibular body and left parasymphysis fracture Pt name : Manoj 12y/M	Dr. Sowmya	Dr Gargi S Murthy Dr Kavitha. M Dr. Shobha Dr. Prasanth Dr.Vinodh Ragan
11.3.2022	Left mandibular body fracture Pt name : Santhosh 6y/M	Dr.Sindhu	Dr Gargi S Murthy Dr Kavitha M Dr. Shobha Dr. Prasanth Dr.Vinodh Ragan
4.7.2022	Antibioma in the left submandibular region USG guided FNAC Pt name: Akshaya 9yr/F	Dr.Neha.	Dr Gargi S Murthy Dr Kavitha M Dr. Shobha Dr. Prasanth Dr.Vinodh Ragan

YEAR	NO OF CASES
2019	1
2021	1
2022	2

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PEDO-PROSTHO CASES

DATE	TOPIC/PROCEDURE	PRESENTER	LIST OF ATTENDEES
11.11.2020	Clinically missing wrt 11	Dr Shahid	Dr Gargi S Murthy
	Decreased pontic space – Pt		Dr Kavitha M
	name: Mohit 12 yr/M		Dr Smitha
			Dr Harsha
			Dr Brunda
			Dr Shreyasee
			Dr Shelvi
			Dr Zameer
8.9.2021	Dentoalveolar fracture in	Dr Mir Shahid	Dr Gargi S Murthy
	mandible		Dr Kavitha M
	Pt name; Rahul 9yr/M		Dr Smitha
			Dr Sarandha
			Dr Harsha
			Dr Brunda
			Dr Shreyasee
			Dr Shelvi
			Dr Zameer
23.9.2021	Immediate RPD wrt 11, 21	Dr Mastha	Dr Gargi S Murthy
	,12	Pruthvi	Dr Kavitha M
			Dr Sarandha
			Dr Smitha
			Dr Harsha
			Dr Pradeep
			Dr Zameer
2.7.2022	RPD Upper Anterior	Dr Sneha Sharma	Dr Gargi S Murthy
	Taurodontism Unerupted		Dr Kavitha M
	maxillary central incisor and		Dr Sarandha
	lateral incisor		Dr Smitha
			Dr Harsha
			Dr Brunda
L			Dr Zameer

YEAR	NO OF CASES
2018	<u>0</u>
2019	1
2020	1
2021	2
2022	1

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Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

PEDO-ORTHO

DATE	TOPIC/PROCEDURE	PRESENTER	LIST OF ATTENDEES
20.12.2018	Case discussion (young class 3 patient)	Dr Apurba	Dr Gargi S Murthy Dr Kavitha M Dr.Hemanth Dr.Karthik Dr.Darshan Dr. Fatima
10.1.2019	Case discussion (Multiple carious of deciduous teeth wrt class 2 patient)	Dr Salma	Dr Gargi S Murthy Dr Kavitha M Dr.Hemanth Dr.Karthik Dr.Darshan Dr. Fatima
Table of the second	Case discussion -Treatment of open bite	Dr Shruthi	Dr Gargi S Murthy Dr Kavitha M Dr.Hemanth Dr.karthik Dr.Suchitra Dr.Darshan Dr. Fatima

YEAR	NO OF CASES
2018	1
2019	1
2022	1

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PEDO- PERIO

DATE	TOPIC/PROCEDURE	PRESENTER	LIST OF ATTENDEES
19/7/2021	Case discussion-	Dr .Pavitra	Dr Gargi S Murthy
	Operculectomy wrt 11, 21		Dr Kavitha M
	,		Dr.Savitha.M
			Dr. sunil
	1		Dr. Archana
			Dr.Pallavi

YEAR	NO OF CASES	
2021	1	
2022	0	

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PEDO-ORTHO- ORAL PATHO

DATE	TOPIC/PROCEDURE	PRESENTER	LIST OF
			ATTENDEES
11.3.2022	Case discussion- Pyogenic granuloma. Pt name: Dilip. 11/M	Dr. Manas	Dr Gargi S Murthy Dr Kavitha M Dr.Hemanth Dr.Karthik Dr.Darshan Dr. Fatima Dr.krishnanandh Dr. Sangeetha Dr,Vidhya

YEAR	NO OF CASES	
2022	1	

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

<u>Interdisciplinary presentations –(Department of Prosthodontics –Department of Endodontics)</u>

SI NO	DATE	TOPIC	Presenter	Prosthodontics
1	07.09.2017	Bridge	Dr Aparajitha Dr.Priyanka Bhat	Dr.Pathi Venkatesh Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween
2	21.12.2017	Full mouth rehabilitation - bridge	Dr Ayesha Dr.Pathi Venkatesh	Dr.Priyanka Bhat Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween
3	23.08.2017	Bridge	Dr Saumya Dr.Priyanka Bhat	Dr.Pathi Venkatesh Dr. Joel Koshy Joseph Dr. Kumara Raju Dr.Naila Perween
4	06.12.2018	Bridge	Dr Shravya Dr. Joel Koshy Joseph	Dr.Pathi Venkatesh Dr.Priyanka Bhat Dr. Kumara Raju Kurapati Dr.Naila Perween
5	04.01.2018	Bridge	Dr Saumya Dr. Kumara Raju Kurapati	Dr. Joel Koshy Joseph Dr.Naila Perween Dr. Iti Badola Dr. Nadira Jabeena. S
6	15.11.2018	Rampant caries- bridge	Dr. Naval Dr. Joel Koshy Joseph	Dr.Pathi Venkatesh Dr.Priyanka Bhat Dr. Kumara Raju Kurapati Dr.Naila Perween
7	22.02.2018	Full mouth rehabilitation- bridge	Dr Sathendra Dr. Kumara Raju Kurapati	Dr. Joel Koshy Joseph Dr.Naila Perween Dr. Iti Badola Dr. Nadira Jabeena. S
8	14.02.2019	Amelogenesis imperfecta- bridge	Dr. Naval Dr. Kumara Raju Kurapati	Dr. Joel Koshy Joseph Dr.Naila Perween Dr. Iti Badola Dr. Nadira Jabeena. S

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9	11.04.2019	Bridge	Dr.Nivedita Dr.Naila Perween	Dr. Iti Badola Dr. Nadira Jabeena. S Dr. Shahid Dr. Shreyasee
10	01.06.2019	Rampant caries – Bridge	Dr.Nivedita Dr. Iti Badola	Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee Dr.Naila Perween
11	14.02.2019	Enamel hypoplasia- Bridge	Dr Naval Dr. Nadira Jabeena. S	Dr. Iti Badola Dr Shahid Dr Shreyasee Dr.Naila Perween
12	20.06.2019	Fluorosis- Brigde	Dr.Shravya Dr.Naila Perween	Dr. Iti Badola Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee
13	26.09.2019	Rampant caries- bridge	Dr Naval Dr. Iti Badola	Dr. Nadira Jabeena. S Dr. Shahid Dr. Shreyasee Dr. Naila Perween
14	30.10.2019	Amelogenesis Imperfecta - Bridge	Dr Naval Dr. Nadira Jabeena. S	Dr. Iti Badola Dr Shahid Dr Shreyasee Dr.Naila Perween
15	28.09.2019	Anterior aesthetic rehabilitation	Dr.Chandini Dr.Naila Perween	Dr. Iti Badola Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee
16	12.09.2019	Partial denture	Dr Shravya Dr. Nadira Jabeena. S	Dr. Iti Badola Dr Shahid Dr Shreyasee Dr.Naila Perween
17	04.04.2019	Anterior aesthetic rehabilitation of anterior teeth	Dr.Chandini Dr. Iti Badola	Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee Dr.Naila Perween
18	16.10.2019	Rampant caries -bridge	Dr.Nivedita Dr. Nadira Jabeena. S	Dr. Iti Badola Dr Shahid Dr Shreyasee Dr.Naila Perween
19	12.09.2019	Dental fluorosis- Long span bridge	Dr Shravya Dr. Iti Badola	Dr. Nadira Jabeena. S Dr Shahid Dr Shreyasee Dr.Naila Perween
20	20.09.2019	Aesthetic	Dr Shravya	Dr. Nadira Jabeena. S

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		rehabilitation of anterior teeth	Dr. Iti Badola	Dr Shahid Dr Shreyasee Dr.Naila Perween
21	11.07.2020	Bridge placement	Dr Vinay Dr Shreyasee	Dr. Nadira Jabeena. S Dr. Iti Badola Dr Shahid
22	18.07.2020	Partial denture fabrication	Dr Saumya Dr Shahid	Dr. Nadira Jabeena. S Dr. Iti Badola Dr Shreyasee
23	29.08. 2020	Full mouth rehabilitation	Dr Bharathi Dr Shreyasee	Dr. Nadira Jabeena. S Dr. Iti Badola Dr. Shahid
24	24.10.2020	Bridge Placement	Dr Ridyumna Dr Shahid	Dr. Nadira Jabeena. S Dr. Iti Badola Dr Shreyasee
25	13.02.2021	Bridge Placement	Dr Saumya Dr Shreyasee	Dr Shahid Dr. Shelvi Pandey Dr. Zameer Ahmed.C M
26	10.04.2021	Bridge Placement	Dr Pracheth Dr Shahid	Dr. Shelvi Pandey Dr. Zameer Ahmed.C M Dr Shreyasee
27	17.04.2021	FPD	Dr Abijeth Dr Shreyasee	Dr Shahid Dr. Shelvi Pandey Dr. Zameer Ahmed.C M
28	24.04.2021	Bridge Placement	Dr Payel Dr Shahid	Dr. Shelvi Pandey Dr. Zameer Ahmed.C M Dr Shreyasee
29	15.05.2021	Bridge Placement	Dr Saumya Dr. Zameer Ahmed.C	Dr Shahid Dr. Shelvi Pandey Dr Shreyasee
30	19.06.2021	Over denture	Dr Prateeksha Dr. Shelvi Pandey	Dr Shahid Dr. Zameer Ahmed.C M Dr Shreyasee
31	17.07.2021	Bridge Placement	Dr Bharathi Dr. Zameer Ahmed.C	Dr Shahid Dr. Shelvi Pandey Dr Shreyasee
32	24/07/2021	Bite raise	Dr Prathiksha Dr. Shelvi Pandey	Dr Shahid Dr. Zameer Ahmed.C M

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			Dr Shreyasee		

Total No Yearly discussions

SI NO	YEAR	Discussions
1	2017	3
2	2018	4
3	2019	13
4	2020	4
5	2021	8

MINCIPAL Daymenda Sugar College of Bental Sciences Kulmaraswamy Layout, Baugalore - 560 078

000 DEPARTMENTMENTAL MEETING 2018-2022

20-03-2022 HOMOGENOUS LEUKOPLAKIA ON LEFT BUCCAL MUCIOSA DR BIDYAPATI DR CHAYA M DAVID DR MAHESH DR DR RAMNARAYAN BK DR NITHIN DR CHETHANA **DR SINDHU**

DR VINOD DR SAMIKSHA
DR SHOBHA DR POOJA
DR PRASHANTH
DR VIDYA
DR SANGEETHA

DR PREETI PATIL

DR NEHA

15-01-2022 IRRITATIONAL FIBROMA ON RIGHT BUCCAL MUCOSA DR CHETHANA DR SINDHU

DR CHAYA M DAVID

DR RAMNARAYAN BK

DR NITHIN

DR MAHESH D R

DR PREETI PATIL

DR VINOD

DR SHOBHA

DR PRASHANTH

DR VIDYA

DR VIDYA

DR DR BIDYAPATI

DR NITHIN

DR NITHIN

DR POOJA

20-06-2021 TYPE II DENTURE STOMATITIS

DR SINDHU.P DR CHAYA M DAVID

DR SANGEETHA

DR RAMNARAYAN BK DR MAHESH D R DR PREETI PATIL DR VINOD

DR CHETHANA

DR BIDYAPATI
DR NITHIN
DR NEHA
DR SOWMYA

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Bangalore - 50

27-03-2021 HOMOGENOUS LEUKOPLAKIA

DR FARZANA

DR CHAYA M DAVID

DR SANGEETHA DR VIDYA DR PRASHANTH DR SHOBHA

> DR MOHAN DR SINDHU

DR FARZANA

DR PREETI PATIL DR MAHESH DR DR RAMNARAYAN BK

DR VINOD

DR SHOBHA

DR VIDYA

DR PRASHANTH

DR SINDHU DR SOWMYA DR NEHA DR NITHIN DR BIDYAPATI DR CHETHANA DR MOHAN

DR SINDHU P

DR SONIKA

DR NANCY DR VAISHALI

DR NITHIN DR SOWMYA DR NEHA

DR SINDHU P DR SINDHU

DR SONIKA

DR VAISHALI

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04-01-2021 PEMPHIGUS ON RIGHT BUCCAL MUCOSA

DR NANCY

DR CHAYA M DAVID DR RAMNARAYAN BK

DR CHETHANA DR BIDYAPATI

DR MOHAN

DR MAHESH DR

DR PREETI PATIL

DR VINOD

DR PRASHANTH DR SHOBHA

DR VIDYA

DR FARZANA

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11-01-2019	03-03-2020	12-12-2020
ERYTHEMATOIUS CANDIDIASIS	HOMGENOUS LEUKOPLAKIA	ORAL LICHENPLANUS
DR SONIKA	DR VAISHALI	DR MOHAN
DR CHAYA M DAVID DR RAMNARAYAN BK	DR CHAYA M DAVID DR RAMNARAYAN BK DR MAHESH D R DR PREETI PATIL DR VINOD DR SHOBHA DR PRASHANTH DR VIDYA	DR CHAYA M DAVID DR RAMNARAYAN BK DR MAHESH D R DR PREETI PATIL DR VINOD DR SHOBHA DR PRASHANTH DR VIDYA
DR MOHAN	DR MOHAN Dr SAMBHU DR SOWMYA DR SINDHU P DR NANCY DR VAISHALI DR FARZANA	DR MOHAN DR CHETHANA DR BIDYAPATI DR NITHIN DR NEHA DR SOWMYA DR SINDHU DR SINDHU DR SINDHU P DR NANCY DR VAISHALI DR FARZANA

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Bangalore - 560 078. DR SOWMYA PRINCIPAL

DR MAHESH DR DR RAMNARAYAN BK

02-07-2018 TYPE II DENTRURE STOMATITIS

SAMBHU

DR VINOD

DR PREETI PATIL

DR SINDHU P DR NANCY

DR VIDYA DR PRASHANTH DR SHOBHA

> DR FARZANA DR VAISHALI

DR RAMNARAYAN BK

DR VIDYA

DR CHAYA M DAVID

DR ROSE

DR MAHESH DR

DR PREETI PATIL

DR VINOD

DR SHOBHA

DR PRASHANTH

DR ANCY

DR BALAJI

ORAL LICHEN PLAY DR CHAYA M DAVID

01-05-2018

ORAL LICHEN PLANUS

DR RAMNARAYAN BK

Dr SAMBHU DR ROSE

DR SOWMYA

DR PREETI PATIL DR MAHESH DR

DR VINOD DR SHOBHA

> DR NANCY DR SINDHU P

DR VAISHALI

DR PRASHANTH

DR VIDYA

DR BALAJI CIPAL

Arrananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

DR VAISHALI DR NANCY DR SINDHU P DR SOWMYA Dr SAMBHU

DR BHARGAVI

DR NADHIRA

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INTER DEPARTMENTAL LASER PRESENTATION

		INTER	DEPARTMENTAL LASER I	PRESENTATION		
DAT	PATIENT NAME	DATE	PROVISIONAL DIAGNOSIS	NAME OF PRESENTER	STAFF ATTENDED	PGs ATTENDED
		2.03.18	soft tissue swelling excision wrt 36,37	dr. prerana	DR. PALLAVI DR. SAVITHA DR. CHAYA M DAVID DR. MAHESH D R DR. SUNIL DR. VIDYA DR. KRISHNANAND PS	DR. AMMU DR. VARSHA DR. ROSE DR. ANCY
		02.01.2019	Excision of soft tissue growth in retromolar reg	io Dr. prerana	DR. SAVITHA DR. PALLAVI DR. SUNIL DR. MAHESH DR. PREETI DR. DARSHANA DR. SANGEETHA DR. VIDYA	DR. VARSHA DR. TEJASWINI DR. BHARGAVI DR. ANCY
		16.07.2019	Soft tissue excison on left buccal mucosa	DR. VARSHA	DR. SAVITHA DR. PALLAVI DR. SUNIL DR. KRISHNANAND PS DR. SANGEETHA DR. RAMNARAYAN DR. DARSHANA DR. MANASA	Dr. pretana DR. TEJASWINI DR.ROSE DR. ANCY DR. SONIKA DR. NANCY
		14.12.2019	TRAUMATIC FIBROMA	DR. TEJASWINI	DR. SAVITHA DR. SUNIL DR. PALLAVI DR. ARCHANA DR. KRISHNANAND PS DR. DARSHANA DR. PREETI	DR. SONIKA DR. VAISHALI DR. VARSHA DR. PAVITRA DR. NAGESH
		12.12.2019	IRRITATIONAL FIBROMA WRT 42,43,44	DR. VARSHA	DR. SAVITHA DR. PALLAVI DR. ARCHANA DR. CHAYA M DAVID DR. RAMNARAYAN DR. PREETI DR. VIDYA DR. SANGEETHA	DR. ROSE DR.ANCY DR. VAISHALI DR. SHAMBU DR. NAGESH DR. MRUDHULA DR. PAVITRA
		25.10.2020	FIBROMA	DR. NAGESH	DR. SAVITHA DR.SUNIL DR ARCHANA DR. KRISHNANAND PS DR. VIDYA DR. PREETI DR. DARSHANA	DR. VARSHA DR. MRUDHULA DR. SONIKA DR. SHAMBU DR. NANCY
	7	28.11.2020	OPERCULECTOMY	DR. MRUDULA	DR. SAVITHA DR. PALLAVI DR ARCHANA DR.SUNIL DR. KRISHNANAND PS DR. DARSHANA DR. MAHESH	DR. SONIKA DR. PAVITRA DR. SHAMBU DR. FARZANA DR. NANCY DR. VAISHALI DR. NAGESH
		30.07,2021	EXCISION AROUND IMPLANT	DR. PAVITRA	DR. PALLAVI DR ARCHANA DR. SAVITHA DR. CHAYA M DAVID DR. MAHESH DR. VIDYA	DR. MRIDULA DR. FARZANZ DR. MOHAN DR. SHAMBU
16-	.12-2021 DEEPAK B J	08.09.2021	Traumatic Fibroma in right labial mucosa Traumatic Fibroma in tip of tongue	Dr. Sindhu p Dr. Pavitra Dr. Mohan K. Littla 20 5 5 5	Dr. Pallavi Dr. Sangeetha Dr. Archana Dr. Chaya M David Dr. Savitha AM	Dr. Mrudhula Dr. Farzana Dr. Niveditha
		27.12.2021	Traumatic Fibroma	Dr. Mohan & Ballo	Dr. Chaya M David Dr. Savitha Dr. Pallavi Dr. sunil Dr. Vidya	Dr. Sindhu Dr. Ashwini Dr. Bidya

Inter departmental meeting Department of Oval patrology

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FEEDBACK REPORT ON CURRICULUM



Ref: DSCDS/

Feedback on the curriculum for the year 2017-18 by Students, Faculty, Alumni, Employers and Professionals.

Contents

- 1. Summary of the feedback
- 2. Action taken by the committee
- 1.1.Student feedback on the curriculum
- 90.5% Students felt that the course objectives were clear.
- 72% of them said the content was completed at the end of the term.
- 82% felt they were encouraged to actively participate in the teaching learning process, and was supported by theory /practical classes.
- 70% of the students felt that the learning resources in the library were adequate.
- 60% of the students felt curriculum was effective in developing innovative thinking.
- 50% of the students were happy with the assessment system and said that the feedback helped them to learn while 38% remained neutral on this.
- . 55% of the students felt that the course created curiosity.
- 71% felt assessment in practical classes were adequate where as 15% remained neutral on this.
- 67% felt assessment in theory classes were adequate where as 25% remained neutral on this aspect.
- 1.2 Faculty feedback on the curriculum
- 55% of the faculty felt the content addressed the objectives of learning in their respective specialty 25% disagreed 20% remained neutral.
- 65% felt the curriculum addresses the training need for the student in dental education 30% disagreed and 5% remained neutral.
- 74% felt there is flexibility for innovation and newer ideas.
- .60% felt curriculum involves technology and recent advances, whereas 40% strongly disagreed.
- 45% felt institutional infrastructural for innovative teachings were provided 45% disagreed and 10% remained neutral.
 - 56% of the faculty feel that the assessment methods are in alignment with the course objectives.





1.3. Feedback by Alumni

69.5% of Our alumni rated the sylabus as good.

75% felt there were few irrelevant parts that needs to be changed.

35% rated the career assistance given was good, 45% rated it as neither good nor poor.

46% rated the offering of electives in relation to healthcare advancements as neither good nor poor.30% remained neutral.

67% felt their learning experience in college was good.

56.5% felt the relevance to of curriculum to practice was good.

61% rated the practical experience to be good.

80% were wanting to be a part of guest lecture to the juniors if needed by institution.

1.4. Feed back by employers

87% rated our student's performance as good.

74% rated academic system to be satisfactory, 20% rated good.

67.5% felt our students were encouraged to newer ideas and techniques.

55% rated curriculum provided vast opportunities for research, 45% remained neutral.

81.5% strongly agreed that our student could handle patients independently.

15% said our student involved in social and extracurricular activity, 85% remained neutral.

69% said our students had leadership qualities.

1.5. Feedback by professionals

55% professional said the curriculum somewhat fitted the needs of students for job placement 19% said somewhat disagree.

71% strongly agreed curriculum and syllabi fitted the needs of student's higher education.

32% of professionals have opinion that the curriculum is inadequate to face real life situations, 65% remained neutral.

51% strongly agreed the program and curriculum is sufficient for dental health care entrepreneurship, 42% remained neutral.

86% strongly agreed theory and practical are sufficiently balanced in curriculum and syllabus.

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- 2. Actions taken by the college for the feedback and suggestions given by the stakeholders on curriculum
- 1. Improving the availability and access to learning resources
- 2. Patient exposure Measures to be taken to address this in consultation with all stakeholders.
- 3. Increase in number of faculty to strengthen the teaching learning environment will be discussed with concerned personnel in the management.
- 4. Infrastructure —Computers and internet
- Workshops and CDE programs on recent advances. Managing medical emergencies.
- 8. Faculty development programs- Faculty will be encouraged to enhance their skills in health professional education.

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Ref:DSCDS/

Feedback on the curriculum for the year 2018-19 by Students, Faculty, Alumni, Employers and Professionals.

Contents

- 1. Summary of the feedback
- 2. Action taken by the committee

1.1. Student feedback on the curriculum

56% Students felt that the course objectives were clear.

76% of them said the content was completed at the end of the term.

87% felt they were encouraged to actively participate in the teaching learning process, and was supported by theory /practical classes.

65% of the students felt that the learning resources in the library were adequate.

65% of the students felt curriculum was effective in developing innovative thinking.

68% of the students were happy with the assessment system.

59% of the students felt that the course created curiosity.

69% felt assessment in practical classes were adequate.

67% felt assessment in theory classes were adequate where as 25% remained neutral on this aspect.

1.2 Faculty feedback on the curriculum

51% of the faculty felt the content addressed the objectives of learning in their respective specialty 15% disagreed 25% remained neutral.

, 59% felt the curriculum addresses the training need for the student in dental education 30% disagreed and 15% remained neutral.

69% felt there is flexibility for innovation and newer ideas.

59% felt curriculum involves technology and recent advances, whereas 30% strongly disagreed.

38% felt institutional infrastructural for innovative teachings were provided 25% disagreed and 10% remained neutral.

56% of the faculty feel that the assessment methods are in alignment with the course objectives.

They have suggested to include the current concepts and advances in the respective. Specialties. They have asked for more experiential learning and competency based education to be included.



Davananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, **Bengaluru**

1.3. Feedback by Alumni

71 % of Our alumni rated the syllabus as good.

65% felt there were few irrelevant parts that needs to be changed.

41% rated the career assistance given was good, 45% rated it as neither good nor poor.

49% rated the offering of electives in relation to healthcare advancements as neither good nor poor and 21% remained neutral.

61.5% felt their learning experience in college was good.

56 % felt the relevance to of curriculum to practice was good.

49% rated the practical experience to be good.

69% were wanting to be a part of guest lecture to the juniors if needed by institution.

They have suggested that the dental faculty team be strengthened further

1.4. Feedback by employers

79% rated our student's performance as good.

71% rated academic system to be satisfactory, 20% rated good.

54% felt our students were encouraged to newer ideas and techniques.

59% rated curriculum provided vast opportunities for research, 31% remained neutral.

76% strongly agreed that our student could handle patients independently.

17% said our students involved in social and extracurricular activity, 82% remained neutral.

70.5% said our students had leadership qualities.

The employers have stated that the clinical and technical skills of our students have been good. The students need to be aware of the latest advances in the different specialties.

1.5. Feedback by professionals

55% professional said the curriculum somewhat fitted the needs of students for job placement 19% said somewhat disagree.

71% strongly agreed curriculum and syllabi fitted the needs of student's higher education.

32% of professionals have opinioned that the curriculum is inadequate to face real life situations, 65% remained neutral.

51% strongly agreed the program and curriculum is sufficient for dental health care entrepreneurship, 42% remained neutral.

86% strongly agreed theory and practical are sufficiently balanced in curriculum and syllabus.



Suggested the need for more patient exposure and the outdated concepts need to be removed from the curriculum.

- 2. Actions taken by the college for the feedback and suggestions given by the stakeholders on curriculum
- 1. Improving the availability and access to learning resources
- 2. Patient exposure Measures to be taken to address this in consultation with all stakeholders.
- 3. Increase in number of faculty to strengthen the teaching learning environment will be discussed with concerned personnel in the management.
- 4. Infrastructure —Computers and internet
- 5. Workshops and CDE programs on recent advances. Managing medical emergencies are already in place. They will be further strengthened.

Dayananda Sagar College of Bental Sciences

Rumananamy Layout

Rengalore 560 078



Ref: DSCDS/

Feedback on the curriculum for the year 2019-20 by Students, Faculty, Alumni, Employers and Professionals.

Contents

- 1. Summary of the feedback
- 2. Action taken by the committee

1.1. Student feedback on the curriculum

59% Students felt that the course objectives were clear.

79% of them said the content was completed at the end of the term.

86.5% felt they were encouraged to actively participate in the teaching learning process, and was supported by theory /practical classes.

57% of the students felt that the learning resources in the library were adequate.

67% of the students felt curriculum was effective in developing innovative thinking.

50% of the students were happy with the assessment system and said that the feedback helped them to learn while 29% remained neutral on this.

47% of the students felt that the course created curiosity.

75% felt assessment in practical classes were adequate where as 15% remained neutral on this.

87% felt assessment in theory classes were adequate where as 5% remained neutral on this aspect.

1.2 Faculty feedback on the curriculum

65% of the faculty felt the content addressed the objectives of learning in their respective specialty 10% disagreed 10% remained neutral.

51% felt the curriculum addresses the training need for the student in dental education 27% disagreed and 5% remained neutral.

66% felt there is flexibility for innovation and newer ideas.

51% felt curriculum involves technology and recent advances, whereas 35% strongly disagreed.

39% felt institutional infrastructural for innovative teachings were provided 40% disagreed and 10% remained neutral.

61% of the faculty feel that the assessment methods are in alignment with the course objectives.

They have suggested the inclusion of current concepts and advances in the respective Specialties, increased clinical exposure, training of students in patient management skills. The have asked for more experiential learning and competency based education to be included.

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1.3. Feedback by Alumni

59.5% of our alumni rated the syllabus as good.

78% felt there were few irrelevant parts that needs to be changed.

29% rated the career assistance given was good, 25% rated it as neither good nor poor.

46% rated the offering of electives in relation to healthcare advancements as neither good nor poor.30% remained neutral.

67% felt their learning experience in college was good.

56.5% felt the relevance to of curriculum to practice was good.

61% rated the practical experience to be good.

80% were wanting to be a part of guest lecture to the juniors if needed by institution.

They have suggested that the dental faculty team be strengthened further and newer advances to be included in the curriculum. The students need to be trained in soft skills which helps them to further their skills in people management.

1.4. Feedback by employers

87% rated our student's performance as good.

74% rated academic system to be satisfactory, 20% rated good.

67.5% felt our students were encouraged to newer ideas and techniques.

55% rated curriculum provided vast opportunities for research, 45% remained neutral.

81.5% strongly agreed that our student could handle patients independently.

15% said our students involved in social and extracurricular activity, 85% remained neutral.

69% said our students had leadership qualities.

The employers have stated that the clinical and technical skills of our students have been good. The students need to be aware of the latest advances in the different specialties and emphasis should be increased on providing clinically relevant training 55% of the faculty felt the content addressed the objectives of learning in their respective specialty 25% disagreed 20% remained neutral.

1.5. Feedback by professionals

55% professional said the curriculum somewhat fitted the needs of students for job placement 19% said somewhat disagree.

71% strongly agreed curriculum and sylabi fitted the needs of student's higher education.

32% of professionals have opined that the curriculum is inadequate to face real life situations, 65% remained neutral.

51% strongly agreed the program and curriculum is sufficient for dental health care

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entrepreneurship, 42% remained neutral.

86% strongly agreed theory and practical are sufficiently balanced in curriculum and syllabus

Suggested the need for more patient exposure and the outdated concepts need to be removed from the curriculum. Workshops and training programs on clinical practice based and future trends to be conducted to prepare our students for practice in the community.

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Actions taken by the college for the feedback and suggestions given by the stakeholders on curriculum

1. Patient exposure to be increased with number of camps in and around

2. Faculty development programs conducted where faculty were trained in a phase wise manner to strengthen the support system, formative assessment and feedback systems.

3. Infrastructure —Computers and internet facility available to the whole campus... Students can

access eBooks and journals.

4. Workshops- Workshops and CDE programs on recent advances. Managing medical emergencies are already in place. They will be further strengthened. Soft skill training — the current Patient safety training program will be expanded to cover all students.





Ref: DSCDS/

Feedback on the curriculum for the year 2020-21 by Students, Faculty, Alumni, Employers and Professionals.

Contents

- 1. Summary of the feedback
- 2. Action taken by the committee

1.1. Student feedback on the curriculum

77% Students felt that the course objectives were clear.

78% of them said the content was completed at the end of the term.

89% felt they were encouraged to actively participate in the teaching learning process, and was supported by theory /practical classes.

69% of the students felt that the learning resources in the library were adequate.

63% of the students felt curriculum was effective in developing innovative thinking.

61% of the students were happy with the assessment system and said that the feedback helped them to learn while 22% remained neutral on this.

55% of the students felt that the course created curiosity.

67% felt assessment in practical classes were adequate where as 15% remained neutral on this.

72% felt assessment in theory classes were adequate where as 25% remained neutral on this aspect.

They expressed their displeasure and issue concentrating in the online classes

1.2 Faculty feedback on the curriculum

51% of the faculty felt the content addressed the objectives of learning in their respective specialty 22% disagreed 20% remained neutral.

75% felt the curriculum addresses the training need for the student in dental education 10% disagreed and 5% remained neutral.

64% felt there is flexibility for innovation and newer ideas.

61% felt curriculum involves technology and recent advances, whereas 20% strongly disagreed.

50.5% felt institutional infrastructural for innovative teachings were provided 35.6% disagreed and 10% remained neutral.

61% of the faculty feel that the assessment methods are in alignment with the course objectives.

Training for Online teaching methods and computer knowledge

They have asked for removal of outdated concepts, theoretical aspects which have no practical significance or relevance.

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1.3. Feedback by Alumni

59.5% of Our alumni rated the syllabus as good.

80% felt there were few irrelevant parts that needs to be changed.

45% rated the career assistance given was good, 25% rated it as neither good nor poor.

36% rated the offering of electives in relation to healthcare advancements as neither good nor poor.30% remained neutral.

71% felt their learning experience in college was good.

62.5% felt the relevance to of curriculum to practice was good.

59% rated the practical experience to be good.

83% were wanting to be a part of guest lecture to the juniors if needed by institution.

They have suggested that the dental faculty team be strengthened further and newer advances to be included in the curriculum. The students need to be trained in soft skills which helps them to further their skills in people management.

1.4. Fcedback by employers

87% rated our student's performance as good.

64% rated academic system to be satisfactory, 20% rated good.

71.5% felt our students were encouraged to newer ideas and techniques.

56% rated curriculum provided vast opportunities for research, 35% remained neutral.

83.5% strongly agreed that our student could handle patients independently.

25% said our students involved in social and extracurricular activity, 75% remained neutral.

59% said our students had leadership qualities.

The employers have stated that the clinical and technical skills of our students have been good. The students need to be aware of the latest advances in the different specialties and emphasis should be increased on providing clinically relevant training.

1.5. Feedback by professionals

57% professional said the curriculum somewhat fitted the needs of students for job placement 19% said somewhat disagree.

69% strongly agreed curriculum and syllabi fitted the needs of student's higher education.

42% of professionals have opined that the curriculum is inadequate to face real life situations, 55% remained neutral.

57% strongly agreed the program and curriculum is sufficient for dental health care entrepreneurship, 32% remained neutral.

The College has the hand of B



76%

strongly agreed theory and practical are sufficiently balanced in curriculum

Suggested the need for more patient exposure and the outdated concepts need to be removed from the curriculum. workshops and training programs on clinical practice based and future trends to be conducted to prepare our students for practice in the community.



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Actions taken by the college for the feedback and suggestions

Faculty support system — It is good. 40% of the students want additional support. In this context, the faculty will be trained in a phase wise manner to strengthen the support system, formative assessment and feedback systems.

Infrastructure — increased number of e-books and e journals.

Workshops- Mentor ship committee formed and one on one mentoring of students undertaken to address the issue as due to pandemic students were expressing their issues over online classes. Soft skill training — the current Patient safety training program will be expanded to cover all students.

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Ref: DSCDS/

Feedback on the curriculum for the year 2020-21 by Students, Faculty, Alumni, Employers and Professionals.

Contents

- 1. Summary of the feedback
- 2. Action taken by the committee
- 1.1. Student feedback on the curriculum
- 75.3% Students felt that the course objectives were clear.
- 67% of them said the content was completed at the end of the term.
- 71.5% felt they were encouraged to actively participate in the teaching learning process, and was supported by theory /practical classes.
- 74% of the students felt that the learning resources in the library were adequate.
- 66% of the students felt curriculum was effective in developing innovative thinking.
- 54% of the students were happy with the assessment system and said that the feedback helped them to learn while 34% remained neutral on this.
- 65% of the students felt that the course created curiosity.
- 61% felt assessment in practical classes were adequate where as 15% remained neutral on this.
- 69% felt assessment in theory classes were adequate where as 20% remained neutral on this aspect.
- They were concerned on the practical aspects as lockdowns did not expose them to patient work
- 1.2 Faculty feedback on the curriculum
- 59% of the faculty felt the content addressed the objectives of learning in their respective specialty 15% disagreed 10% remained neutral.
- 67% felt the curriculum addresses the training need for the student in dental education 20% disagreed and 5% remained neutral.
- 70% felt there is flexibility for innovation and newer ideas.
- 63% felt curriculum involves technology and recent advances, whereas 30% strongly disagreed.
- 49% felt institutional infrastructural for innovative teachings were provided 35% disagreed and 10% remained neutral.
- 61% of the faculty feel that the assessment methods are in alignment with the course objectives.

Practical classes are lesser, difficult for students to correlate what is thought in the theory class



1.3. Feedback by Alumni

49.5% of Our alumni rated the syllabus as good.

77% felt there were few irrelevant parts that needs to be changed.

37% rated the career assistance given was good, 43% rated it as neither good nor poor.

40.5% rated the offering of electives in relation to healthcare advancements as neither good nor poor.23% remained neutral.

69% felt their learning experience in college was good.

50.5% felt the relevance to of curriculum to practice was good.

67% rated the practical experience to be good.

80% were wanting to be a part of guest lecture to the juniors if needed by institution.

Wanted alumni meets to influence and motivate the students towards clinical practices

1.4. Feedback by employers

67% rated our students performance as good.

64% rated academic system to be satisfactory, 20% rated good.

61.5% felt our students were encouraged to newer ideas and techniques.

39% rated curriculum provided vast opportunities for research, 45% remained neutral.

71.5% strongly agreed that our student could handle patients independently.

25% said our students involved in social and extra curricular activity, 75% remained neutral.

69% said our students had leadership qualities

1.5. Feedback by professionals

47% professional said the curriculum somewhat fitted the needs of students for job placement 19% said some what disagree.

66% strongly agreed curriculum and sylabi fitted the needs of students higher education.

37% of professionals have opined that the curriculum is inadequate to face real life situations,35% remained neutral.

57% strongly agreed the program and curriculum is sufficient for dental health care entrepreneurship, 31% remained neutral.

72% strongly agreed theory and practical are sufficiently balanced in curriculum and syllabus.

Davananda Salat College of Levental Actions



Actions taken by the college for the feedback and suggestions

- 1. Improving the availability and access to learning resources LMS software is being procured to address this issue
- 2. Patient exposure improved through many camps where students are posted.
- 3. Faculty training programs in research methodology to improve the research and innovation quality of the institution s.
- 4. Increase in number of faculty to strengthen the teaching learning environment will be discussed with concerned personnel in the management.
- 5. Career development programs being initiated for students, knowledge on our role in clinical trials and medical writing.
- 6. Alumni meet planned

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RECOGNITION CERTIFICATES AND CONTINUATION OF AFFILIATION

https://dscds.edu.in/mandatory-disclosures.htm



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



education and training, aiming to increase the engagement of the community as defined above in providing BLS (i.e., any kind of CPR and early defibrillation).

The two said institutions agree to the following general areas of interest and cooperation: Sharing of Intellectual expertise for skill based / simulation oriented training of under Graduate / postgraduate Students, Teaching and Non teaching staff as well as Basic life support in terms of hands on training for Engineering staff and students

Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of it's signing and shall be valid immediately.

This MoU is being signed on 23rdMay 2022 and will stand effective from this date onwards.

Prof. Dr.Hemanth M M.D.S, Ph.D

Principal

Dayananda Sagar College of Dental Sciences,

Bengaluru

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout,

Bangalore - 560 078.

Prof. Dr CPS Prakash, M.E, Ph.D

Principal

Dayananda Sagar College of

Engineering Bengaluru

Principal

Dayananda Sagar College of Engineeri

Kumaraswamy Layout, Bangalore -560 111

Patient communication ethical values and waste disposal program



Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 076

DSCDS/Internal/2017

July 29, 2017

CIRCULAR

All heads of the department and faculty members are here by informed that Clinical Induction Program for III BDS students will be held between 04/12/2017 and 06/12/2017. The White Coat Ceremony will be held on 06/12/2017 at 11:00am @ CD Sagar Auditorium. All faculty members are cordially invited to attend the program. Necessary arrangements shall be made for the smooth functioning of the Clinics and Hospital.

Classes for III BDS students are suspended as per the below mentioned schedule.

Date	Time
04/12/2017	9:00am to 1:00pm
05/12/2017	9:00am to 1:00pm
06/12/2017	10:00am to 1:00pm

Classes between 8:00am to 9:00am and Clinics from 2:00pm to 4:00pm will be as usual.

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Bayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

Cc to:

- Heads of the Departments for circulating among staff members
- 2. Office File

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 076

DSCDS/Internal/2018-19/

July 27, 2018

CIRCULAR

All heads of the department and faculty members are here by informed that Clinical Induction Program for III BDS students will be held between 07/08/2018 and 09/08/2018. The White Coat Ceremony will be held on 09/08/2018 at 11:00am @ CD Sagar Auditorium. All faculty members are cordially invited to attend the program. Necessary arrangements shall be made for the smooth functioning of the Clinics and Hospital.

Classes for III BDS students are suspended as per the below mentioned schedule.

Date	Time
07/08/2018	9:00am to 1:00pm
08/08/2018	9:00am to 1:00pm
09/08/2018	10:00am to 1:00pm

Classes between 8:00am to 9:00am and Clinics from 2:00pm to 4:00pm will be as usual.

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Dayananda Sagar College of Dental Science
Kumaraswamy Layout,
Bangalore - 560 078.

Cc to:

- 1. Heads of the Departments for circulating among staff members
- 2. Office File

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 076

DSCDS/Internal/2019-20/61

August 2, 2019

CIRCULAR

All heads of the department and faculty members are here by informed that Clinical Induction Program for III BDS students will be held between 07/08/2019 and 09/08/2019. The White Coat Ceremony will be held on 09/08/2019 at 11:00am @ CD Sagar Auditorium. All faculty members are cordially invited to attend the program. Necessary arrangements shall be made for the smooth functioning of the Clinics and Hospital.

Hepatitis B Vaccination will be administered from 12:00noon onwards on 09/08/2019.

Classes for III BDS students are suspended as per the below mentioned schedule.

Date	Time
07/08/2019	9:00am to 1:00pm
08/08/2019	9:00am to 1:00pm
09/08/2019	10:00am to 1:00pm

Classes between 8:00am to 9:00am and Clinics from 2:00pm to 4:00pm will be as usual.

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PRINCIPAL Dayananda Sagar College of Dental Science Kumaraswamy Layout, Bangalore - 560 078.

Cc to:

- 1. Heads of the Departments for circulating among staff members
- 2. Office File



Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 076

December 14, 2020

DSCDS/Internal/2020/

CIRCULAR

All heads of the department and faculty members are here by informed that Clinical Induction Program for III BDS students will be held between 21/12/2020 and 23/12/2020. The White Coat Ceremony will be held on 23/12/2020 at 11:00am @ CD Sagar Auditorium. All faculty members are cordially invited to attend the program. Necessary arrangements shall be made for the smooth functioning of the Clinics and Hospital.

Classes for III BDS students are suspended as per the below mentioned schedule.

Date	Time
21/12/2020	9:00am to 1:00pm
22/12/2020	9:00am to 1:00pm
23/12/2020	10:00am to 1:00pm

Classes between 8:00am to 9:00am and Clinics from 2:00pm to 4:00pm will be as usual.

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Bangalore - 560 078.

Cc to:

1. Heads of the Departments for circulating among staff members

2. Office File

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Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 076

DSCDS/Internal/2022/20

February 10, 2022

CIRCULAR

All heads of the department and faculty members are here by informed that Clinical Induction Program for III BDS students will be held between 14/02/2022 and 15/02/2022. The White Coat Ceremony will be held on 16/02/2022 at 11:00am @ CD Sagar Auditorium. All faculty members are cordially invited to attend the program. Necessary arrangements must be made for the smooth functioning of the Clinics and Hospital.

Classes for III BDS students are suspended as per the below mentioned schedule.

Time
9:00am to 1:00pm
9:00am to 1:00pm
10:00am to 1:00pm

Classes between 8:00am to 9:00am and Clinics from 2:00pm to 4:00pm will be as usual.

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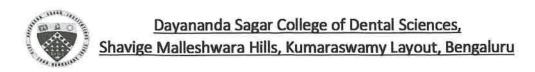
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Clinical induction program

	DAY — 1 (4-12-2017)				
SI. No	TOPIC	SPEAKERS	TIMING		
1.	Ice breaking Session	Dr. Roopa Nadig	9.15-9.45 AM		
2.	Maintenance of Clinical Case records	Dr. Goutham K	9.45-10.15 AM		
3.	Professional Ethics	Dr. Sourabha KG	10.15-10.45 AM		
	Tea Break		10.45-11.00 am		
4.	Professional Etiquette	Dr. Vidya	11.00-11.30 AM		
5	CDC guidelines & OSHA regulations	Dr. Swapna	11.30 AM-12.00 PM		
6.	Radiographs in Dentistry and radiation safety	Dr. Preethi Patil	12.00-12.30 PM		
7.	Infection control, Sterilization & importance of hand hygiene	Dr.Rayan	12.30-1.00 PM		
8	Importance of soft skills in the management of patients	Dr. Sunil S	1.00PM -1.30PM		

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Dayananda Sagar College of Bental Science

Kumaraswamy Layout.

Bangalore - 560 078.



DAY 2 - (5-12-2017)			
SI. No	TOPIC	SPEAKERS	TIMING
1	Errors: Communication & Medical	Dr. Tulasi	9.15-9.45 AM
2.	Evidence Based Dentistry	Dr. Yashwanth	9.45-10.30 AM
3.	Ergonomics	Dr. Pallavi	10.30-11.00 AM
	Tea Break		11.00-11.15 AM
4.	Medical emergencies & its management	Dr. Mayank	11.15AM- 12.00PM
5	Importance of vaccination	Mrs. Swathi Shetty	12.00PM-12.30PM
6.	Clinical Software	Dr.Vinod	12.30 PM-1.00 PM
7	Conducting theory Examination/MCQs	Dr. Smitha sharan	1.00PM-1.30 PM

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Doyananda Sagar College of Berstal Sciences

Kumaraswamy Layout.

Bangalore - 560 078.

PROGRAM SCHEDULE

Invocation

Welcome address

Lighting the lamp

Address by Shri Galiswamy

Address by Principal

Vote of thanks

PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 072



DAY - 1 (07/08/2018)				
TOPIC	SPEAKERS	TIMING		
Ice breaking Session	Dr. Shobha.	9.15-9.45 AM		
Maintenance of Clinical Case records	Dr. Pallavi	9.45-10.15 AM		
Professional Ethics	Dr. Sourabha KG	10.15-10.45 AM		
Tea Break	1	10.45-11.00 am		
Professional Etiquette	Dr. Vidya	11.00-11.30 AM		
CDC guidelines & OSHA regulations	Dr. Krishna Kumar	11.30 AM-12.00 PM		
Radiographs in Dentistry and radiation safety	Dr. Darshana	12.00-12.30 PM		
Infection control, Sterilization & Biomedical waste management	Dr.Vinod	12.30-1.00 PM		
Importance of soft skills in the management of patients	Dr. Sunil S	1.00PM -1.30PM		
	Ice breaking Session Maintenance of Clinical Case records Professional Ethics Tea Break Professional Etiquette CDC guidelines & OSHA regulations Radiographs in Dentistry and radiation safety Infection control, Sterilization & Biomedical waste management Importance of soft skills in the	Ice breaking Session Maintenance of Clinical Case records Professional Ethics Tea Break Professional Etiquette Dr. Vidya CDC guidelines & OSHA regulations Radiographs in Dentistry and radiation safety Infection control, Sterilization & Biomedical waste management Importance of soft skills in the Dr. Shobha. Dr. Pallavi Dr. Sourabha KG Dr. Vidya Dr. Vidya Dr. Vidya Dr. Darshana Dr. Darshana		

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Kumaradwamy Layout,
Bangalore - 560 078.



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<u>Dayananda Sagar College of Dental Sciences,</u> <u>Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru</u>

DAY - 2 (08/08/2018)				
SI. No	TOPIC	SPEAKERS	TIMING	
1,	Errors: Communication & Medical	Dr. Archana	9.15-9.45 AM	
2,	Evidence Based Dentistry	Dr. Ranjini	9.45-10.30 AM	
3.	Ergonomics	Dr. Pradeep Chandra	10.30-11.00 AM	
	Tea Break	1	11.00-11.15 AM	
4.	Medical emergencies & its management	Dr. Vinod	11.15AM- 12.00PM	
5	Importance of vaccination	Mrs. Swathi Shetty	12.00PM-12.30PM	
6.	Clinical Software	Dr. Darsan	12.30 PM-1.00 PM	
7	Conducting theory Examination/MCQs	Dr. Brunda	1.00PM-1.30 PM	

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Dayananda Sagar College of Bental Sciences

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Bangalore - 560 078.

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PROGRAMME SCHEDULE

Call for Attention

Invocation

Welcome Address by Dr. Krishnanad

Lighting the Lamp

Address by Principal Dr. Hemanth M

Oath Taking

Distribution of White Coats

Address by Dr. Sanjay Subbaiah, Guest of honor

Address by Chief Guest Dr. Ashok A.C

Address by Secretary, Shri Galiswamy

Vote of Thanks

National Anthem

Vaccination for UGs & PGs



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Hilly field a new day mail



Clinical induction program

	DAY - 1 (07/08/2019)				
SI. No	TOPIC	SPEAKERS	TIMING		
1.	Ice breaking Session	Dr. Hemanth M	9.15-9.45 AM		
2.	Maintenance of Clinical Case records	Dr. Goutham K	9.45-10.15 AM		
3.	Professional Ethics	Dr. Sourabha KG	10.15-10.45 AM		
	Tea Break	Į.	10.45-11.00 am		
4.	Professional Etiquette	Dr. Vidya	11.00-11.30 AM		
5.	CDC guidelines & OSHA regulations	Dr. Swapna	11.30 AM-12.00 PM		
6.	Radiographs in Dentistry and radiation safety	Dr. Preethi Patil	12.00-12.30 PM		
7.	Infection control, Sterilization & Biomedical waste management	Dr.Rayan	12.30-1.00 PM		
8	Importance of soft skills in the management of patients	Dr. Sunil S	1.00PM -1.30PM		

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Kumaraswamy Layout,

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	DAY - 2 (08/08/2019)			
SI. No	TOPIC	SPEAKERS	TIMING	
1.	Errors: Communication & Medical	Dr. Archana	9.15-9.45 AM	
2.	Evidence Based Dentistry	Dr. Ranjini	9.45-10.30 AM	
3.	Ergonomics	Dr. Kavitha	10.30-11.00 AM	
	Tea Break		11.00-11.15 AM	
4.	Medical emergencies & its management	Dr. Vinod	11.15AM- 12.00PM	
5	Importance of vaccination	Mrs. Swathi Shetty	12.00PM-12.30PM	
6.	Clinical Software	Dr. Darsan	12.30 PM-1.00 PM	
	Conducting theory Examination/MCQs	Dr. Smitha sharan	1.00PM-1.30 PM	

Dayananda Sagar College of Cartal Sciences

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Clinical induction program

DAY -1 (21-12-2020)			
SI. No	TOPIC	SPEAKERS	TIMING
1.	Ice breaking Session	Dr. Shobha	9.15-9.45 AM
2.	Maintenance of Clinical Case records	Dr. kartick	9.45-10.15 AM
3.	Professional Ethics	Dr. Sourabha KG	10.15-10.45 AM
	Tea Break		10.45-11.00 am
4.	Professional Etiquette	Dr. krishnanand	11.00-11.30 AM
5.	CDC guidelines & OSHA regulations	Dr. Veena	11.30 AM-12.00 PM
6.	Radiographs in Dentistry and radiation safety	Dr. Preethi Patil	12.00-12.30 PM
7,	Infection control, Sterilization & Biomedical waste management	Dr. Tulasi Nayak	12.30-1.00 PM
8	Importance of soft skills in the management of patients	Dr. Sunil S	1.00PM -1.30PM

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Nyananda Sagar College of Sental Sciences

Kumaranwamy Layout,

Bangalore - 560 978.



DAY -2(22-12-2020)			
SI. No	TOPIC	SPEAKERS	TIMING
1.	Errors: Communication & Medical	Dr. Pallavi	9.15-9.45 AM
2.	Evidence Based Dentistry	Dr. Kavitha	9.45-10.30 AM
3.	Ergonomics	Dr. Ranjani	10.30-11.00 AM
	Tea Break		11.00-11.15 AM
4.	Medical emergencies & its management	Dr. Vinod	11.15AM- 12.00PM
5	Importance of vaccination	Mrs. Swathi Shetty	12.00PM-12.30PM
6.	Clinical Software	Dr. Vinod	12.30 PM-1.00 PM
7	Conducting theory Examination/MCQs	Dr.Pradeep Chandra	1.00PM-1.30 PM

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Dayananda Sagar College of Bental Sciences

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Bangalore - 560 078.

PROGRAM SCHEDULE

Invocation

Welcome address

Lighting the lamp

Address by Chief Guest

Address by Shri Galiswamy

Address by Principal

Vote of thanks

National Anthem

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Experimental Sciences

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Clinical induction program

	T	
TOPIC	SPEAKERS	TIMING
Ice breaking Session	Dr. Savita AM	9.15-9.45 AM
Maintenance of Clinical Case records	Dr. Goutham K	9.45-10.15 AM
Professional Ethics	Dr. Sourabha KG	10.15-10.45 AM
Tea Break		10.45-11.00 am
Professional Etiquette	Dr. Vidya	11.00-11.30 AM
CDC guidelines & OSHA regulations	Dr. Swapna	11.30 AM-12.00 PM
Radiographs in Dentistry and radiation safety	Dr. Preethi Patil	12.00-12.30 PM
Infection control, Sterilization & Biomedical waste management	Dr. Rayan	12.30-1.00 PM
Importance of soft skills in the management of patients	Dr. Sunil S	1.00 PM -1.30 PM
	Ice breaking Session Maintenance of Clinical Case records Professional Ethics Tea Break Professional Etiquette CDC guidelines & OSHA regulations Radiographs in Dentistry and radiation safety Infection control, Sterilization & Biomedical waste management Importance of soft skills in the	Ice breaking Session Maintenance of Clinical Case records Professional Ethics Tea Break Professional Etiquette Dr. Vidya CDC guidelines & OSHA regulations Radiographs in Dentistry and radiation safety Infection control, Sterilization & Biomedical waste management Importance of soft skills in the management of patients Dr. Savita AM Dr. Goutham K Dr. Sourabha KG Dr. Vidya Dr. Preethi Patil Dr. Rayan Dr. Rayan

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Bangalore - 560 078.



	DAY – 2 (15-02-2022)			
SI. No	TOPIC	SPEAKERS	TIMING	
1.	Errors: Communication & Medical	Dr. Archana	9.15-9.45 AM	
2.	Evidence Based Dentistry	Dr. Ranjini	9.45-10.30 AM	
3.	Ergonomics	Dr. Kavitha	10.30-11.00 AM	
	Tea Break		11.00-11.15 AM	
4	104 (5.1			
4.	Medical emergencies & its management	Dr. Vinod	11.15AM- 12.00PM	
5	Importance of vaccination	Dr. Vinod Mrs. Swathi Shetty	11.15AM- 12.00PM 12.00PM-12.30PM	

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Kumaraswamy Layout,
Bangalore - 560 078.



SL.NO.	EVENT PARTICULARS	WHITE COURT CEREMONY REPORT DETAILS
I.	DATE	06/12/2017
2.		
	VENUE	CD Sagar Auditorium, DSI Campus –I, Kumaraswamy Layout, Bangalore -78.
3.	TIME	11:00 am onwards
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR. HEMANTH.M, PRINCIPAL, DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	Two days i.e., 4.12.2017 and 5.12.2017 of clinical induction lectures have been conducted and this undergraduate orientation program intended to help those from different backgrounds to cope up with challenges of the course. The agenda of the orientation is to make the students understand importance of clinical work, patient care, risk assessment, team work and good communication skills which are vital to make them canable health professional
8.	SEAL & SIGNATURE OF PRINCIPAL	Hake them capable health professional.

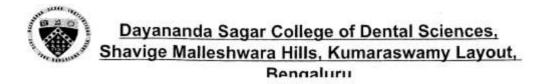
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ANNEXURE 1



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Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.



SL.NO.	EVENT PARTICULARS	VHITE COURT CEREMONY REPORT DETAILS
1.	DATE	09/08/2018
2.		
	VENUE	CD Sagar Auditorium, DSI Campus –I, Kumaraswamy Layout, Bangalore -78
3.	TIME	11 .00 AM onwards.
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR. HEMANTH.M, PRINCIPAL, DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	On 7.8.2018 and 8.8.2018 clinical induction lectures were conducted with the plan to make the students understand that clinical skills, decision making attitude leadership quality, team work and good communication skills are imperative to become a great clinician.
8.	SEAL & SIGNATURE OF PRINCIPAL	the state of the s

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Kumaraswamy Layout,

Bangalore - 560 078.

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ANNEXURE 1





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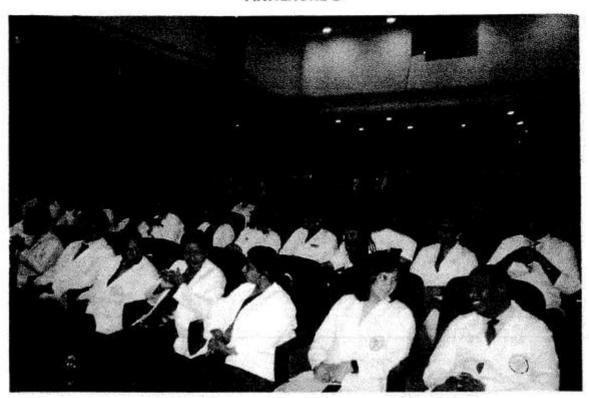
CLINICAL INDUCTIONAND WHITE COAT CEREMONY REPORT				
SL.NO.	EVENT PARTICULARS	DETAILS		
1.	DATE	09/08/2019		
2.				
	VENUE	CD Sagar Auditorium, DSI Campus –I, Kumaraswamy Layout, Bangalore -78		
3.	TIME	11.00AM Onwards		
4.	CHIEF GUEST	DR. ASHOK A.C DR. SANJAY SUBBAIAH		
5.	OTHER DIGNITARIES	SHRI. GALISWAMY, SECRETARY, DSI DR. HEMANTH.M, PRINCIPAL, DSCDS		
6.	PICTURES	Attached as annexure -1		
7.	REMARKS	Clinical induction program is a rite passage, welcoming the new dental students into dental profession. It serves to welcome students to healthcare practice and elevate the value of humanism as the core of healthcare. On 07.08.2019 and 08.08. 2019 clinical induction lectures have been taken.		
8.	SEAL & SIGNATURE OF PRINCIPAL	H My I galenno		

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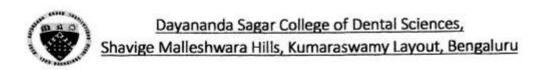


ANNEXURE 1



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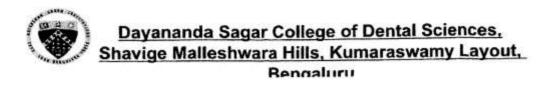
Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.



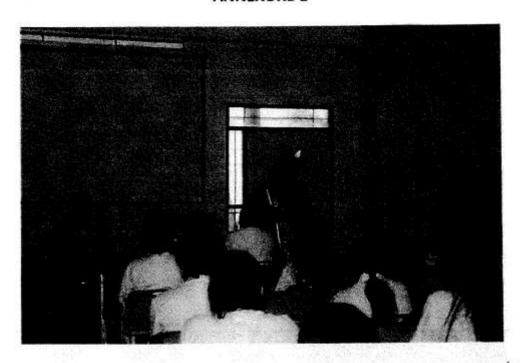
SL.NO.	EVENT PARTICULARS	DETAILS
1.	DATE	23/12/2020
2.	VENUE	CD Sagar Auditorium, DSI Campus -I, Kumaraswamy Layout, Bangalore -78
3,	TIME	11.00AM Onwards
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR. HEMANTH.M, PRINCIPAL, DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	Clinical induction program is a ceremony, welcoming the new health professionals into the profundity of clinical practice. It serves to comfortable students to healthcare practice and elevate the value of humanism as the core of healthcare. From 21.12.2020 to 22.12.2020 clinical induction lectures have been taken accordingly.
8.	SEAL & SIGNATURE OF PRINCIPAL	accordingly.

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Bangalore - 560 078.



ANNEXURE 1



PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

CLINICAL INDUCTION AND WHITE COAT CEREMONY REPORT			
SL.NO.	EVENT PARTICULARS	DETAILS	
I.	DATE	16/02/2022	
2.	VENUE	CD Sagar Auditorium, DSI Campus –I, Kumaraswamy Layout, Bangalore -78	
3.	TIME	11.00AM Onwards	
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI	
5.	OTHER DIGNITARIES	DR. HEMANTH.M, PRINCIPAL, DSCDS	
6.	PICTURES	Attached as annexure -1	
7.	REMARKS	Clinical induction program is a ceremony, welcoming the new health professionals into the profundity of clinical practice. It serves to comfortable students to healthcare practice and elevate the value of humanism as the corroc of healthcare. From 14.02.2022 to 15.02.2022	
8.	SEAL & SIGNATURE OF PRINCIPAL	Clinical induction lectures have been taken.	

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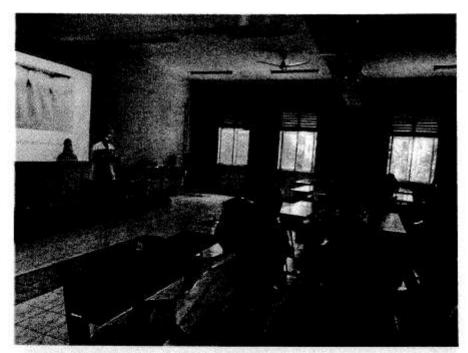
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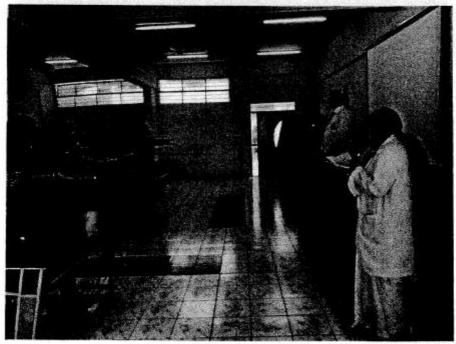
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ANNEXURE 1





PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



Certificate of Attendance

Presented to

Mr/ Miss Ananthesh HS for his/her participation in the "White Coat Ceremony For

Undergraduate Students " held on 4-6th December 2017 by DSCDS at CD Sagar Auditorium.

Sahi Ces

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance

Presented to

Mr/ Miss Akshata Ohm for his/her participation in the "White Coat Ceremony For

Undergraduate Students " held on 4-6th December 2017 by DSCDS at CD Sagar Auditorium.

Sahi Ges

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance

Presented to

Mr/ Miss Mohammed Saad Qasim for his/her participation in the "White Coat Ceremony For Undergraduate Students" held on 7-8 th August 2018 organized by DSCDS.

Salvi Cess-

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance

Presented to

Mr/ Miss Priyanka Raj for his/her participation in the "White Coat Ceremony For

Undergraduate Students "held on 7-9th August 2019 organized by DSCDS.

Salvices.

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance

Presented to

Mr/ Miss Dishamani Sarma for his/her participation in the "Clinical induction and White Coat

Ceremony For Undergraduate Students "held on 21st & 23nd December 2020 organized by

DSCDS

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance

Presented to

Mr/ Miss Dishamani Sarma for his/her participation in the "Clinical induction and White Coat

Ceremony For Undergraduate Students "held on 21st & 23nd December 2020 organized by

DSCDS

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance

Presented to

Mr/ Miss Indu . K his/her participation in the "Clinical induction and White Coat Ceremony For

Undergraduate Students "held on 21st & 23nd December 2020 organized by DSCDS

Salices.

Shri . Galiswamy Secretary , DSI

Hemanth -.

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance Presented to

Mr/ Miss Tejas Rajeev Pikle his/her participation in the "Clinical induction and White Coat Ceremony For Undergraduate Students" held on 14-16 Feb 2022 organized by DSCDS

Salica est

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal



Certificate of Attendance Presented to

Mr/ Miss Nithya his/her participation in the "Clinical induction and White Coat Ceremony For

Undergraduate Students" held on 14-16 Feb 2022 organized by DSCDS

Salicaes.

Shri . Galiswamy Secretary , DSI

Dr. Hemanth M. MDS, Ph.D Principal

An overview of Post graduate curriculum program



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 076

May 25, 2017

DSCDS/Circular/2017

CIRCULAR

All the Postgraduate Students admitted during the academic year 2017 -2018 are hereby informed to attend the orientation and inaugural function which is scheduled on 01/06/2017 and 02/06/2017 (Schedule enclosed) at CD Sagar Auditorium.

Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bannelore - 580 078

Copy to:

- 1. Dept. of Oral Medicine & Radiology
- 2. Dept. of Community Dentistry
- 3. Dept. of Oral Surgery
- 4. Dept. of Conservative Dentistry
- 5. Dept. of Prosthodontics
- 6. Dept. of Periodontics
- 7. Dept. of Orthodontics

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Pavananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



DSCDS/2018/

June 4, 2018

CIRCULAR

All the Postgraduate Students admitted during the academic year 2018 -2019 are hereby informed to attend the orientation and inaugural function which is scheduled on 06/06/2018 & 07/06/2018 (Schedule enclosed) at Seminar Hall, Dept. of Orthodontics @:10:30am.

Cc to:

All the HOD's & Staff of the PC destands Sear College of Bental Sciences

1. All the HOD's & Staff of the PG departments wamy Layout

Bangalore - 560 078.

- 2. Postgraduates 2018-19 batch
- 3. Office Copy



DSCDS/Internal/2019-20/47

June 19, 2019

CIRCULAR

The Postgraduate Orientation program & Inaugural for the academic year 2019-20 will be held on 9th & 10th July 2019 (Schedule enclosed).

All Heads of the Department of and staff of Postgraduate Department along with 1st year Postgraduates are requested to attend.

Venue: Seminar Room, Dept. of Orthodontia

Time: 9:15Am onwards.

Program details enclosed, all concerned staff and students will have to attend.

Cc to:

All the HOD's & taff of the PG departments

2. Postgraduates 2019-20 batch

3. Office File

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ananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



DSCDS/Internal/2020/13A

August 20, 2020

CIRCULAR

The Postgraduate Orientation & Inaugural program for the academic year 2020 will be held between 25th & 26th August 2020 (Schedule enclosed).

All Heads of the departments and staff of Postgraduate departments along with their 1st year Postgraduates are requested to attend.

Venue: Seminar Room, Dept. of Orthodontia

Time: 9:15Am onwards.

Program details enclosed, all concerned staff and students will have to attend.

PRINCIPAL PRINCIPAL

Kumaraswamy Layout,
Bangalore - 560 078.

Cc to:

- 1. All the HOD's & Staff of the PG departments
- 2. Postgraduates 2020-21 batch
- 3. Office File





DSCDS/Internal/2022/18

February 3; 2022

CIRCULAR

The Postgraduate Orientation & Inaugural program for the academic year 2021-22 will be held between 08/02/2022 & 09/02/2022 (Schedule enclosed).

All Heads of the departments and staff of Postgraduate departments along with their 1st year Postgraduate students are informed to attend.

It is mandatory for I Year Postgraduate students to attend the same.

Venue:

Class Room No.1

AV team shall make necessary arrangements.

Copy to:

1.DSCDS Staff whatsapp group

2. Postgraduate whatsapp group

PRINCIPAL

Davananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078

PROGRAM SCHEDULE

Invocation

Welcome address

Lighting the lamp

Address by Shri Galiswamy

Address by Principal

Vote of thanks

National Anthem

Dayananda Sagar College of Bantal Science.

Kumaraswamy Layout,

Bangalore - 560 078.



POST GRADUATE ORIENTATION PROGRAM SCHEDULE 2017

	DAY 1 (01.06.2017)	
TIME	TOPICS	STAFF
9.15 am to 9.45 am	Welcome Address	Dr. Savita AM- Prof & Head of
	Staff Introduction Department wise	Periodontics
9:45 am to 10:30am		Dr. Hemanth M – Principal, Prof &
	Ice Breaking Session	Head of Orthodontics
10:30am to 11:30am	Covid Norms & Protocol	Dr. Kartik .Kabbur
		Prof, Department of Orthodontics
	11:30 am to 11.45 am Tea Brea	k
11: 45am to 12: 30pm	How to prepare and present a seminar	Dr. Kalpana D
	Insight interdepartmental meeting	Prof & Head of Prosthodontics
12.30 pm to 01.30pm	Managing your emotions during your PG	Dr. Veena S Pai – Reader of
	program.	Conservative Dentistry
	1.30pm to 2.30 pm Lunch brea	k
2.00pm to 3.00pm	Basic Etiquette in Post Graduate program	Dr. Savita A M – Prof & Head of Periodontics
3.00pm to 3.30pm	Quiz	Dr. Veena S Pai Reader of
		Conservative Dentistry
3.30pm to 4.00pm	Synopsis Writing – How to go about it?	Dr. Shobha ES
1為14	Note on Dissertation	Prof & Head of Oral Surgery
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Deyananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078

	DAY 2 (02.06.2017)	
9.30am to 10.30 am	Joy of Learning	Dr. Roopa Nadig Prof & Head ,Dept of Conservative Dentistry
10.30am to 11.30am	Journal Club- How to go about it?	Dr. Prashanth.N T . Asso.Prof, Dept of Oral surgery.
	Tea break 11.30am to 11.45am	
11.45am to 12.45 pm	Infection control, Sterilization & Biomedical waste management	Dr. Vinod Rangan Senior lecturer, Dept of Oral Surgery
	Lunch break 12.45pm to 1.30pm	
1.30pm to 2.30pm	Professional Ethics	Dr.Harsha.M.B , Reader, Dept. of Periodontics.
2:30pm to 3:30pm	Importance of soft skills in the management of patients.	Dr.Sunil.S, Asso. Prof, Dept of Periodontics

Mumaraswamy Layout,
Rangalore - 560 078.

PROGRAM SCHEDULE

Invocation

Welcome address

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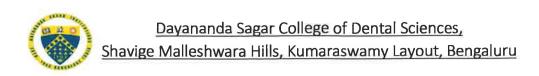
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Dayananda Sagar College of Bantal Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



POST GRADUATE ORIENTATION PROGRAM SCHEDULE 2018

	DAY 1 (06.06.2018)	
TIME	TOPICS	STAFF
9.15 am to 9.45 am	Welcome Address	Dr. Savita AM- Prof & Head of
	Staff Introduction Department wise	Periodontics
9:45 am to 10:30am		Dr. Hemanth M – Principal, Prof &
	Ice Breaking Session	Head of Orthodontics
10:30am to 11:30am	Covid Norms & Protocol	Dr.Kartik .Kabbur
		Prof, Department of Orthodontics
	11:30 am to 11.45 am Tea Brea	ık
11: 45am to 12: 30pm	How to prepare and present a seminar	Dr. Kalpana D
	Insight interdepartmental meeting	Prof & Head of Prosthodontics
12.30 pm to 01.30pm	Managing your emotions during your PG	Dr. Veena S Pai – Reader of
	program.	Conservative Dentistry
	1.30pm to 2.30 pm Lunch brea	ık
2.00pm to 3.00pm	Basic Etiquette in Post Graduate program	Dr. Savita A M – Prof & Head of Periodontics
3.00pm to 3.30pm	Quiz	Dr. Veena S Pai – Reader of
	×	Conservative Dentistry
3.30pm to 4.00pm	Synopsis Writing – How to go about it?	Dr. Shobha ES
100	Note on Dissertation	Prof & Head of Oral Surgery

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Bangalore - 560 078.



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Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

	DAY 2 (07.06.2018)	
9.30am to 10.30 am	Joy of Learning	Dr. Vedavathi B Prof, Dept of Conservative
		Dentistry
10.30am to 11.30am	Journal Club- How to go about it?	Dr. Nagesh L
		Prof & Head of Public Health
		Dentistry
	Tea break 11.30am to 11.45am	
11.45am to 12.45 pm	Infection control, Sterilization & Biomedical	Dr. Vinod Rangan Reader, Dept of
	waste management	Oral Surgery
	Lunch break 12.45pm to 1.30pm	
1.30pm to 2.30pm	Professional Ethics	Dr.Swapna D V Professor, Dept.
		of Cons & Endo.
2:30pm to 3:30pm	Importance of soft skills in the management of	Dr.Sunil.S, Prof, Dept of
	patients.	Periodontics

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Bangalore - 560 078.

PROGRAM SCHEDULE

Invocation

Welcome address

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Davananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



POST GRADUATE ORIENTATION PROGRAM SCHEDULE 2019

	DAY 1 (09.07.2019)	
TIME	TOPICS	STAFF
9.15 am to 9.45 am	Welcome Address	Dr. Savita AM- Prof & Head of
	Staff Introduction Department wise	Periodontics
9:45 am to 10:30am		Dr. Hemanth M – Principal, Prof &
	Ice Breaking Session	Head of Orthodontics
10:30am to 11:30am	Covid Norms & Protocol	Dr.Kartik .Kabbur
		Prof, Department of Orthodontics
	11:30 am to 11.45 am Tea Brea	ak
11: 45am to 12: 30pm	How to prepare and present a seminar	Dr. Kalpana D
	Insight interdepartmental meeting	Prof & Head of Prosthodontics
12.30 pm to 01.30pm	Managing your emotions during your PG	Dr. Veena S Pai – Reader of
	program.	Conservative Dentistry
	1.30pm to 2.30 pm Lunch brea	ık
2.00pm to 3.00pm	Basic Etiquette in Post Graduate program	Dr. Savita A M – Prof & Head of
		Periodontics
3.00pm to 3.30pm	Quiz	– Dr. Veena S Pai – Reader of
47.4		Conservative Dentistry
3.30pm to 4.00pm	Synopsis Writing – How to go about it?	Dr. Shobha ES
# concess	Note on Dissertation	Prof & Head of Oral Surgery

Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

	DAY 2 (10.07.2019)	
9.30am to 10.30 am	Joy of Learning	Dr. Vedavathi B Prof, Dept of Conservative Dentistry
10.30am to 11.30am	Journal Club- How to go about it?	Dr. Nagesh L Prof & Head of Public Health Dentistry
	Tea break 11.30am to 11.45am	•
11.45am to 12.45 pm	Infection control, Sterilization & Biomedical waste management	Dr. Vinod Rangan Reader, Dept of Oral Surgery
	Lunch break 12.45pm to 1.30pm	
1.30pm to 2.30pm	Professional Ethics	Dr.Swapna D V Professor, Dept. of Cons & Endo.
2:30pm to 3:30pm	Importance of soft skills in the management of patients.	Dr.Sunil.S, Prof, Dept of Periodontics

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Bangalore - 560 078.

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PROGRAM SCHEDULE

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Dayananda Sagat College of Sental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.



POST GRADUATE ORIENTATION PROGRAM SCHEDULE 2021-22

	DAY 1 (08.02.2022)	
TIME	TOPICS	STAFF
9.15 am to 9.45 am	Welcome Address, Inaguration	Dr. Savita AM- Prof & Head of
	Staff Introduction Department wise	Periodontics
9:45 am to 10:30am		Dr. Hemanth M – Principal, Prof &
	Ice Breaking Session	Head of Orthodontics
10:3 0am to 11:30am	Covid Norms & Protocol	Dr.Kartik .Kabbur
		Prof, Department of Orthodontics
	11:30 am to 11.45 am Tea Brea	ık
11: 45am to 12: 30pm	How to prepare and present a seminar	Dr Sarandha D L
	Insight interdepartmental meeting	Prof & Head of Prosthodontics
12.30 pm to 01.30pm	Managing your emotions during your PG	Dr. Veena S Pai – Reader of
	program.	Conservative Dentistry
	1.30pm to 2.00 pm Lunch brea	k
2.00pm to 2.30 pm	Introduction to DIMS software	Dr.Vinod Rangan, Reader. Dept of
		Oral and maxillofacial surgery.
2.30pm to 3.00pm	Basic Etiquette in Post Graduate program	Dr. Savita A M – Prof & Head of
•		Periodontics
3.00pm to 3.30pm	Quiz	Dr.Krishnanad – Prof & Head of
		Oral Pathology
3.30pm to 4.00pm	Synopsis Writing – How to go about it?	Dr. Shobha ES
•	Note on Dissertation	Prof & Head of Oral Surgery
3.30pm to 4.00pm Synopsis Writing – How to go about it?		Dr. Shobha ES

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Dayananda Sagar College of Bental Sciences

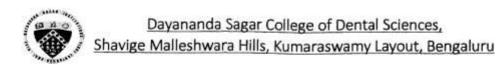
Kumaraswamy Layout,

Bangalore - 560 078:



	DAY 2 (09.02.2022)	
9.30am to 10.30 am	Joy of Learning	Dr. Vedavathi B Prof & Head of Conservative Dentistry
10.30am to 11.30am	Journal Club- How to go about it?	Dr. Nagesh L Prof & Head of Public Health Dentistry
	Tea break 11.30am to 11.45am	
11.45am to 12.45 pm	Infection control, Sterilization & Biomedical waste management	Dr. Vinod Rangan Reader, Dept of Oral Surgery
	Lunch break 12.45pm to 1.30pm	*
1.30pm to 2.30pm	Professional Ethics	Dr.Swapna D V Professor, Dept. of Cons & Endo.
2:30pm to 3:30pm	Importance of soft skills in the management of patients.	Dr.Sunil.S, Prof, Dept of Periodontics

Dayananda Sagar College of Sental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.



REPORT

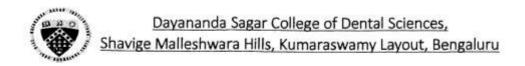
	ORIENTATION	DAY FOR I YEAR POST GRADUATES 2017 BATCH
SL.NO.	EVENT PARTICULARS	DETAILS
1,	DATE	01/06/2017 & 02/06/2017
2.	VENUE	CD Sagar Auditorium, DSI Campus –I, Kumaraswamy Layout, Bangalore -78
3.	TIME	9.00am am onwards
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL,DSCDS DR.ROOPA NADIG, DEAN, DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	This two days post graduate orientation program was conducted to focus on important factors relating to moral values, ethics, professionalism, increased responsibilities owing to transition of undergraduate to post graduate students.
8.	SEAL & SIGNATURE OF PRINCIPAL	Dayananda Sagar College of Rental Science. Dayananda Sagar College of Layout, Bangalore, 560 078.

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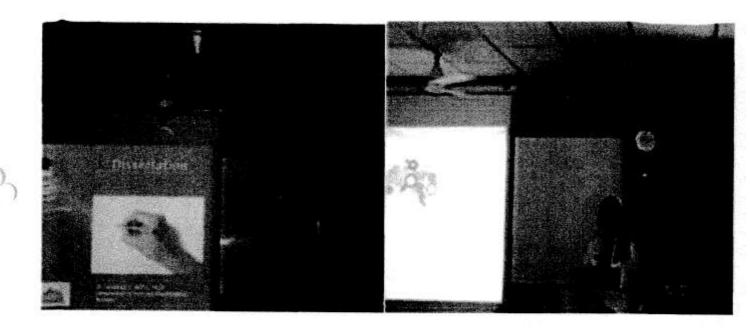
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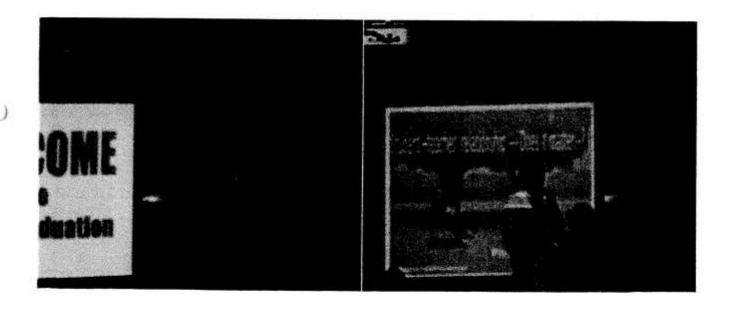
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Bangalore - 560 078.



ANNEXURE 1





PRINCIPAL

Dayananda Sagar Cellege of Bertal Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



REPORT

SL.NO.	EVENT	DETAILS
	PARTICULARS	
1.	DATE	06/06/2018 & 07/06/2018
2.	VENUE	Seminar Hall, Dept. of Orthodontics
3.	TIME	9.00am am onwards
4.		2.000m am onwards
	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.		
	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL,DSCDS DR.ROOPA NADIG, DEAN, DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	The orientation program was conducted for two days several motivational and educational lectures were presented specifically intended to provide an overview of the PG curriculum to the students and also benefit students prepare for an effective career with clear revelation about what lies ahead and what can be attained at the end of their courses.
8.	SEAL & SIGNATURE OF PRINCIPAL	Dayaranda Sagar College of Bental Sciences Dayaranda Sagar College of Bental Sciences Dayaranda Sagar College of Bental Sciences Bangalore 560 073.

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Davananda Sagar Cellege of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



REPORT

-	ORIENTATIO	ON DAY FOR POST GRADUATES 2019 BATCH
SL.NO.	EVENT PARTICULARS	DETAILS
1.	DATE	9 th & 10 th July 2019
2,	VENUE	Seminar Room, Dept. of Orthodontia
3.	TIME	9:15AM ONWARDS
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL, DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	These two days orientation PG program directed to manage the quality and the quantity of the work as well as groom their personalities to effectively perform their duties and responsibilities effortlessly. Various motivational, professional and educational lectures were conducted to make the student sensible towards his or her aims and goals
8.	SEAL & SIGNATURE OF PRINCIPAL	PRINCIP OF Bental Sciences

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Kumaraswamy Layout,

Bangalore - 560 078.





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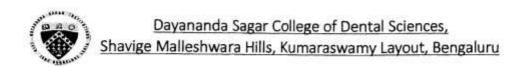
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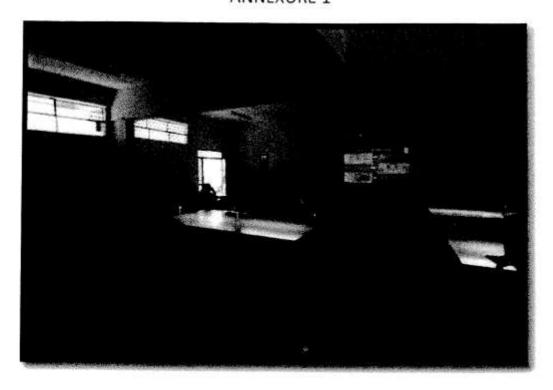
Pavananda Sagar College of Bental Sciences

Kumaraewamy Layout,

Bangalore - 560 078.



ANNEXURE 1



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Davananda Sagar College of Bental Sciences
Kumaraewamy Layout.
Bangalore - 560 078.



REPORT

ORIENTATION FOR I MDS BATCH 2021		
SL.NO.	EVENT PARTICULARS	DETAILS
1.	DATE	08/02/2022 & 09/02/2022
2.		
	VENUE	Preclinical block, first floor in Class Room No.1
3.	TIME	9:30 am Onwards
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL ,DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	The program was conducted with an aim to signify the changing roles and responsibilities of dental students and marks the student's transition from Undergraduate to Postgraduate studies.
8.	SEAL & SIGNATURE OF PRINCIPAL	HOLKAL Sciences

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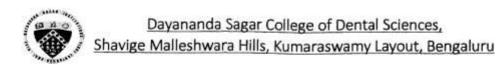
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Glimses –Post Graduate Orientation 2021-2022









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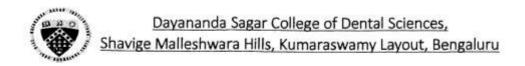
	ORIENTATION	DAY FOR I YEAR POST GRADUATES 2017 BATCH
SL.NO.	EVENT PARTICULARS	DETAILS
1,	DATE	01/06/2017 & 02/06/2017
2.	VENUE	CD Sagar Auditorium, DSI Campus –I, Kumaraswamy Layout, Bangalore -78
3.	TIME	9.00am am onwards
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL,DSCDS DR.ROOPA NADIG, DEAN, DSCDS
6.	PICTURES	Attached as annexure -1
7.	REMARKS	This two days post graduate orientation program was conducted to focus on important factors relating to moral values, ethics, professionalism, increased responsibilities owing to transition of undergraduate to post graduate students.
8.	SEAL & SIGNATURE OF PRINCIPAL	Dayananda Sagar College of Bental Science. Dayananda Sagar College of Layout, Bangalore, 560 078.

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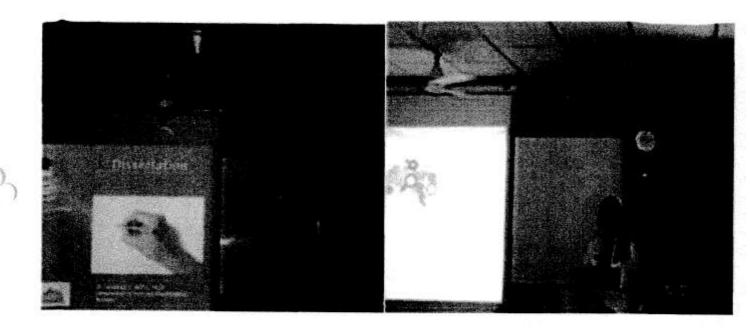
Dayananda Sagar College of Bontal Sciences

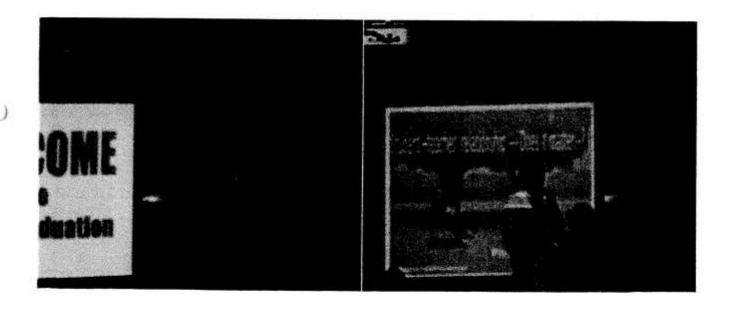
Kumaraswamy Layout,

Bangalore - 560 078.



ANNEXURE 1





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Dayananda Sagar Cellege of Bertal Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



REPORT

SL.NO.	EVENT	DETAILS
	PARTICULARS	
1.	DATE	06/06/2018 & 07/06/2018
2.	VENUE	Seminar Hall, Dept. of Orthodontics
3.	TIME	9.00am am onwards
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	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.		
	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL,DSCDS DR.ROOPA NADIG, DEAN, DSCDS
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8.	SEAL & SIGNATURE OF PRINCIPAL	Dayaranda Sagar College of Bental Sciences Dayaranda Sagar College of Bental Sciences Dayaranda Sagar College of Bental Sciences Bangalore 560 073.

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Dayananda Sagar Celloge of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



ANNEXURE 1



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Davananda Sagar Cellege of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



REPORT

-	ORIENTATIO	ON DAY FOR POST GRADUATES 2019 BATCH
SL.NO.	EVENT PARTICULARS	DETAILS
1.	DATE	9 th & 10 th July 2019
2,	VENUE	Seminar Room, Dept. of Orthodontia
3.	TIME	9:15AM ONWARDS
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL, DSCDS
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8.	SEAL & SIGNATURE OF PRINCIPAL	PRINCIP OF Bental Sciences

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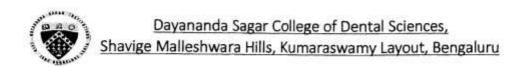
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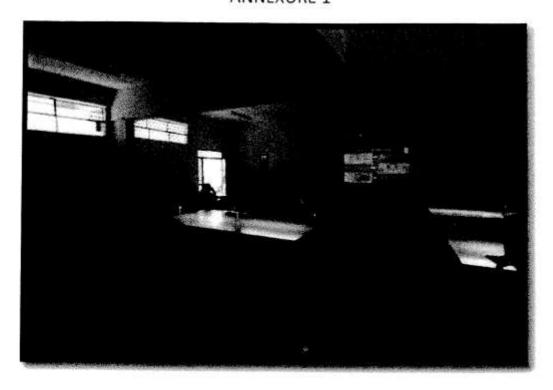
Pavananda Sagar College of Bental Sciences

Kumaraewamy Layout,

Bangalore - 560 078.



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Dayananda Sagar College of Bental Sciences
Kumaraewamy Layout.
Bangalore - 560 078.



REPORT

ORIENTATION FOR I MDS BATCH 2021		
SL.NO.	EVENT PARTICULARS	DETAILS
1.	DATE	08/02/2022 & 09/02/2022
2.		
	VENUE	Preclinical block, first floor in Class Room No.1
3.	TIME	9:30 am Onwards
4.	CHIEF GUEST	SHRI. GALISWAMY, SECRETARY, DSI
5.	OTHER DIGNITARIES	DR.HEMANTH.M, PRINCIPAL ,DSCDS
6.	PICTURES	Attached as annexure -1
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8.	SEAL & SIGNATURE OF PRINCIPAL	HOLKAL Sciences

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Glimses –Post Graduate Orientation 2021-2022







ACADEMIC ADVISORY COUNCIL



Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2017-18/01

Date: 14-11-2017

Academic Advisory Council

Sub: Academic Advisory Council meeting on 14-11-2017

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 14-11-2017 at 02.30 pm at Principal board room to discuss the below mentioned agenda:

- 1. Welcoming the members
- 2. Roles and Responsibilities of the Committee
- 3. Policy document

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2017-18/02

Date: 16-11-2017

Academic Advisory Council

Sub: Academic Advisory Council meeting on 21-11-2017

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 21-11-2017 at 10.30am at Principal board room to discuss the below mentioned agenda:

- 1. Approval of Roles and Responsibilities of the Committee
- 2. ODD batch exams 2017-18
- 3. Update on academic activity of regular batch 2017-18
- 4. Post graduate academic activity
- 5. Any other

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2017-18/03

Date: 16-01-2018

Academic Advisory Council

Sub: Academic Advisory Council meeting on 18-01-2018

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 18-01-2018 at 02.30pm at Principal board room to discuss the below mentioned agenda:

- 1. Discussion and approval of the policy document
- 2. Monitoring the regular batch academic activity happening in each department-
- 3. Plan the calendar of events for the academic year for the odd batch 2018-19
- 4. Post graduate academics
- 5. Discussion on starting implant workshop for UG and PG
- 6. Discussion to start Laser workshop for UG and PG
- 7. Discussion on Library Advisory committee report

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2017-18/04

Date: 14-03-2018

Academic Advisory Council

Sub: Academic Advisory Council meeting on 19-03-2018

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 19-03-2018 at 02.30pm at Principal board room to discuss the below mentioned agenda:

- 1. Monitoring the academic activity of each department
- 2. Interdepartmental meets
- 3. Post graduate academic updates

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2017-18/05

Date: 08-05-2018

Academic Advisory Council

Sub: Academic Advisory Council meeting on 11-05-2018

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 11-05-2018 at 03.00 pm at Principal board room to discuss the below mentioned agenda:

1. Monitoring the Undergraduate academic activity of each department

Post Graduate exams - university exams scheduled in the month of june. All post graduates
have submitted the required documents and completed the quota of work. Mock exam
results were discussed.

3. Post graduate calendar of events-Calendar of events for post graduate training for the new batch to be submitted to AAC. Conduct orientation day for the new batch

 Approval of policy documents of Institutional review board, Soft Skill Development committee, Carrier guidance and placement committee, Feedback Committee, Student support, Welfare and Grievance Redressal Committee, Interdepartmental Meeting Committee,

5. Feedback on curriculum

6. Any Other

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2018-19/01

Date: 07-07-2018

Academic Advisory Council

Sub: Academic Advisory Council meeting on 10-07-2018

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 10-07-2018 at 03.00 pm at Principal board room to discuss the below mentioned agenda:

- 1. Welcoming and introduction of new member
- 2. University exams undergraduate regular batch
- 3. CDE/INTERDEPARTMENTAL meets
- 4. Academic calendar for Undergraduate 2018-19 batch
- 5. Curriculum planning for 2018-19 regular batch
- 6. Post graduate calender(1st mds)

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2018-19/02

Date: 05-09-2018

Academic Advisory Council

Sub: Academic Advisory Council meeting on 10-09-2018

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 10-09-2018 at 03.00 pm at Principal board room to discuss the below mentioned agenda:

- 1. odd batch Academics
- 2. Update on post graduate dissertation submission and synopsis
- 3. Discussion on feedback-analysis

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2018-19/03

Date: 02-11-2018

Academic Advisory Council

Sub: Academic Advisory Council meeting on 06-11-2018

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 06-11-2018 at 03.00 pm at Principal board room to discuss the below mentioned agenda:

- 1. Odd batch exams
- 2. Update on regular batch academic activities
- 3. Update on post graduate dissertation and synopsis submission
- 4. Implant workshop 2019

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2018-19/04

Date: 17-01-2019

Academic Advisory Council

Sub: Academic Advisory Council meeting on 19-01-2019

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 19-01-2019 at 11.00 am at Principal board room to discuss the below mentioned agenda:

- 1. Monitoring the regular batch academic activity happening in each department
- 2. Academic calendar for 19-20 odd batch
- 3. Curriculum planning for Odd batch
- 4. Post graduate academics
- 5. Calendar for Implant workshop 2019
- 6. Discussion on Library Advisory committee report

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2018-19/05

Date: 09-03-2019

Academic Advisory Council

Sub: Academic Advisory Council meeting on 12-03-2019

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 12-03-2019 at 11.00 am at Principal board room to discuss the below mentioned agenda:

- 1. Monitoring the regular batch academic activity happening in each department
- 2. interdepartmental meets update
- 3. Post graduate activities update.

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2018-19/06

Date: 09-05-2019

Academic Advisory Council

Sub: Academic Advisory Council meeting on 13-05-2019

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 13-05-2019 at 11.00 am at Principal board room to discuss the below mentioned agenda:

- 1. Approval of policy document / Roles and Responsibilities of Committee for Advanced Research Studies, Mentorship Committee
- 2. Monitoring the academic activity of each department
- 2. Post Graduate exams university practical exam planned.
- 3. Post graduate calendar of events for 2019-20 batch -Any other
- 4. Any other

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2019-20/01

Date: 05-07-2019

Academic Advisory Council

Sub: Academic Advisory Council meeting on 08-07-2019

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 08-07-2019 at 03.00 pm at Principal board room to discuss the below mentioned agenda:

- 1. University exams undergraduate regular batch 2018-19
- 2. Academic calendar and curricular planning for Undergraduate 2019-20 batch
- 3. Odd batch internal assessment analysis
- 4. Academic activities to be conducted for period October 2022-June 2023
- 5. Post graduate calendar

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2019-20/02

Date: 22-09-2019

Academic Advisory Council

Sub: Academic Advisory Council meeting on 23-09-2019

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 23-09-2019 at 03.00 pm at Principal board room to discuss the below mentioned agenda:

- 1. Introduction of the new committee members
- 2. Forth coming Odd batch undergraduate theory examination
- 3. Odd batch 2nd internal
- 4. Update on post graduate dissertation and synopsis submission
- 5. feedback analysis on curriculum

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2019-20/03

Date: 21-11-2019

Academic Advisory Council

Sub: Academic Advisory Council meeting on 25-11-2019

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 25-11-2019 at 03.00 pm at Principal board room to discuss the below mentioned agenda:

- 1. Forth coming undergraduate THEORY examination
- 2. Progress on interdepartmental meets discussed
- 3. Update on post graduate dissertation submission
- 4. Mentorship committee update

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2019-20/04

Date: 16-01-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 18-01-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 18-01-2020 at 11.00 am at Principal board room to discuss the below mentioned agenda:

- 1. Monitoring the regular batch academic activity happening in each department
- 2. Academic calendar for 20-21 odd batch and Curriculum planning for Odd batch
- 3. Post graduate academics
- 4. Calendar for Implant workshop 2020
- 5. Discussion on LAC Report

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2019-20/05

Date: 27-02-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 02-03-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 02-03-2020 at 11.00 am at Principal board room to discuss the below mentioned agenda:

- 1. Regular batch academics
- 2. interdepartmental meets
- 3. Post graduate Academics

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2019-20/06

Date: 23-03-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 23-03-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 23-03-2020 at 5.00 pm through zoom to discuss the below mentioned agenda

- 1. Online training for Cisco Webex platform from RGUHS for online classes
- 2. Timetable for online classes
- 3. Postponement of Implant workshop 2020

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2019-20/07

Date: 23-04-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 24-04-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 24-04-2020 at 11.00 through Cisco Webex to discuss the below mentioned agenda:

- 1. Discussion of circular received from RGUHS regarding Conducting online exams for UG and PG, conducting practical classes/clinical teaching. Conducting internal assessment.
- 2. Post Graduate Mock exam dates

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2019-20/08

Date: 21-05-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 24-05-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 24-05-2020 at 11.00 am through Cisco Webex to discuss the below mentioned agenda:

- 1. Online classes
- 2. Online internal assessments
- 3. UG regular batch 19-20 batch RGUHS exam
- 4. Post graduate exams

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2019-20/09

Date: 25-07-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 26-07-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 26-07-2020 at 11.00 am through Cisco Webex to discuss the below mentioned agenda:

1. Challenges faced with regards to conducting/appearing for final year university examinations 2020. – meet with final BDS Students.

Dr. Ramnarayan BK

Member Secretary, AAC

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Final BDS students group



DSCDS/AAC/2020-21/01

Date: 3-08-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 4-08-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 4-08-2020 at 11.00 am through Cisco Webex to discuss the below mentioned agenda:

- 1. Online classes progress
- 2. University exams for 1st,2nd and 3rd BDS 19-20 batch
- 3. Start of next academic year
- 4. Post graduate academic year 2020-21
- 5. PG Synopsis and dissertation
- 6. implant workshop 2020 for the UG and PG

Dr. Ramnarayan BK

Member Secretary, AAC

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore 560 07

ACADEMIC ADVISORY COUNCIL - DSCDS

DSCDS/AC C/2020/02

August 10, 2020

CIRCULAR

A meeting of the academic advisory council has been called on 11/08/2020 at 11:00am to discuss the following agenda.

Undergraduate:

- 1. Conducting Undergraduate Examiantion
- 2. Guidelines for phased reopening of the college with return of IV BDs students.
- 3. Completing remaining practical postings of undergraduate
- 4. Starting of next Academic year for I, II, and III BDS regular batch students,
- 5. Interns Postings / return.

Postgraduate:

- 1. Academic program for existing PG students, Post Covid
- 2. Orientation program for PG students of Academic year 2020-21

Clinics:

Functional modifications to reopen the Dental Hospital

Request all members to make it convinent to attend.

Dr. Ramnarayan BK Member Secretary

AAC-DSCDS

Dr. Hemanth M

Principal and Chairman

AAC-DSCDS



DSCDS/AAC/2020-21/02

Date: 02-09-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 4-09-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 03-09-2020 at 11.00 am at principal board room to discuss the below mentioned agenda:

- 1. Online classes
- 2. 4th BDS RGUHS exams
- 3. Revised schedule for exam
- 4. Implant workshop 2020
- 5. Feedback on curriculum

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/03

Date: 03-10-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 03-10-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 03-10-2020 at 3.00 pm at principal board room to discuss the below mentioned agenda

- 1. Welcoming the new member
- 2. Online classes
- 3. RGUHS university exams

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/04

Date: 17-10-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 19-10-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 19-10-2020 at 10.00 am at principal board room to discuss the below mentioned agenda:

1. RGUHS exams

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/05

Date: 10-11-2020

Academic Advisory Council

Sub: Academic Advisory Council meeting on 13-11-2020

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 13-11-2020 at 10.00 am at principal board room to discuss the below mentioned agenda:

- 1. Academic calendar for 2nd, 3rd and 4th BDS and interns regular batch 2020-21
- 2. 2nd internal for odd batch
- 3. Clinical posting for 4th BDS Odd batch
- 4. Academic calendar for Regular batch second to final year (2020-21) to start from Dec 21st 2020.
- 5. Curriculum plan
- 6. Feedback report and action plan from feedback committee

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/06

Date: 04-01-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 05-01-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 05-01-2021 at 10.00 am at principal board room to discuss the below mentioned agenda:

- 1. Resignation of committee member
- 2. University exam for ODD Batch 2020-21
- 3. Internal assessment dates
- 4. Regular batch 2019-20 batch academics
- 5. Remedial classes for repeater of 2020 November examination
- 6. Post graduate academics
 - 7. 5. Discussion on LAC Report

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/07

Date: 22-01-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 25-01-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 25-01-2021 at 10.00 am at principal board room to discuss the below mentioned agenda:

1. Posting for Odd batch 2020-21

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/08

Date: 09-04-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 14-04-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 14-04- 2021 at 10.00 am at principal board room to discuss the below mentioned agenda:

- 1. Odd batch Academic calendar
- 2. Regular batch 2020-21 academics
- 3. Post graduate exams

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/09

Date: 20-04-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 20-04-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 20-04- 2021 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. Online classes for BDS
- 2.Internal assessment exams

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2020-21/10

Date: 26-06-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 26-06-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 26-06- 2021 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. Regular batch Academics
- 2.Post graduate exams
- 3. Any other

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2020-21/11

Date: 16-07-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 16-07-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 16-07-2021 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. Welcoming new member
- 2. Approval of policy document / roles and responsibilities of Committee for Dental Education Technology.
- 3. line classes commencement

Dr. Ramnarayan BK

Member Secretary, AAC

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2021-22/01

Date: 31-08-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 01-09-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 01-09-2021 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. Regular batch (2020-21) exams
- 2. Feedback analysis

Dr. Ramnarayan BK

Member Secretary, AAC

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Committee file

IQAC



DSCDS/AAC/2021-22/02

Date: 06-12-2021

Academic Advisory Council

Sub: Academic Advisory Council meeting on 06-12-2021

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 06-12-2021 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- Academic year regular batch 2021-22
 Academic year for 2nd year to begin from 13th December,3rd and Final year from 18th.
- 2. Curriculum planning
- 3. Odd batch academics

Dr. Ramnarayan BK

Member Secretary, AAC

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Committee file

IQAC



DSCDS/AAC/2017-18/01

Academic Advisory Council

Sub: Academic Advisory Council meeting on 14-11-2017

Date and Time: 14-11-2017 02.30pm -03.pm

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member
4	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member
5	Dr. Savita AM	Prof & Head - Periodontics	Member
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member
7	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member
9	Dr. Sunil S	Associate Professor - Periodontics	Member
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member
13	Dr. Pallavi Nanaiah	Sr. Lecturer	Member
14	Dr. Vinod Rangan	Sr. Lecturer	Member
15	Dr. Brunda K	Sr. Lecturer	Member

Agenda and points discussed

1. Welcoming the members

The chairperson Dr. Hemanth M welcomed all the member of the newly constituted Academic Advisory Council.



2. Roles and Responsibilities of the Committee

The broad roles and responsibilities of the committee were discussed and it was decided to draft the Roles and Responsibilities of the Committee to be finalized at the next meeting

3. Policy document

The member Secretary along with the Dean- Dr. Roopa r Nadig, Dr. Chaya M David, Dr. Sunil, Dr. Vinod Rangan were asked to prepare a draft of the Policy document of the committee with in 3 months and place it before the committee for discussion.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2017-18/02

Academic Advisory Council

Sub: Academic Advisory Council meeting on 21-11-2017

Date and Time: 21-11-2017 10.30AM to 11-00AM.

Venue: Principal office board room.

The following members were present:

Si. No.	Name	Designation	Position	
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2	Dr. Roopa R Nadig	Dean, Prof & Head — Conservative Dentistry	Member	
4	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
5	Dr. Savita AM	Prof & Head - Periodontics	Member	
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
7	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
9	Dr. Sunil S	Associate Professor - Periodontics	Member	
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
13	Dr. Pallavi Nanaiah	Sr. Lecturer	Member	
14	Dr. Vinod Rangan	Sr. Lecturer	Member	
15	Dr. Brunda K	Sr. Lecturer	Member	

Agenda and points discussed

1. Approval of Roles and Responsibilities of the Committee

The committee approved the roles and responsibilities of the committee

2. ODD batch exams 2017-18



ODD BATCH 2017-18- update on the progress of classes conducted and attendance to be monitored by the Head of departments and abstract sent to office within a week as exams are announced from 14th dec 2017. complete theory and practical portions on time.

2. Update on academic activity of regular batch 2017-18

All department informed that theory and practical/ clinical are going on as per schedule. Internal assessment is scheduled for Jan, March, May 2018. Time table to be sent.

3. Post graduate academic activity

Departments updated that synopsis for 1st year MDS and dissertation for 3rd MDS as going on as per university schedule.

4. Any other

Member suggested that we conduct Implant workshop for the benefit of Post graduate in the department of Oral Surgery, Oral Medicine, Prosthodontics, Periodontics and Interns which as accepted and Core committee was formed. To come with details by the next meeting.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2017-18/03

Academic Advisory Council

Sub: Academic Advisory Council meeting on 18-01-2018

Date and Time: 18-01-2018 02.30PM to 03-00PM

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2.	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member
3.	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member
4.	Dr. Savita AM	Prof & Head - Periodontics	Member
5.	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member
6.	Dr. Sunil S	Associate Professor - Periodontics	Member
7.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary
8.	Dr. Gargi S Murthy	Reader - Pedodontics	Member
9.	Dr. Pallavi Nanaiah	Sr. Lecturer	Member
10	Dr. Brunda K	Sr. Lecturer	Member

Agenda and points discussed

1. Discussion and approval of the policy document

The draft of the policy document was discussed. Few changes were suggested and the same was approved.

2. Monitoring the regular batch academic activity happening in each department

Results of 1st IA was discussed. Departments informed to take measures for the slow learners

3. Plan the calendar of events for the academic year for the odd batch 2018-19



Academic calendar to start from 1st feb 2018. time table and clinical posting to be sent

4. Post graduate academics

Exam going post graduates - details of attendance to be sent and mock exams to be planned in the month of march

5. Discussion on implant workshop for UG and PG

Implant workshop was planned for Feb 2018

6. Discussion on Laser workshop for UG and PG

Laser workshop planned for April 2018 to be conducted by Oral Medicine, Oral Surgery and Periodontics.

7. Discussion on Library Advisory committee report

The members were informed of the report of the LAC which mentioned the calling of book exhibition and allocation of budget and expenditure for 2017-18 which was approved by the committee.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2017-18/04

Academic Advisory Council

Sub: Academic Advisory Council meeting on 19-03-2018

Date and Time: 19-03-2018_02.30PM to 03-00PM.

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1,	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	
2.	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
3.	Dr. Savita AM	Prof & Head - Periodontics	Member	
4.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
5.	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
6.	Dr. Sunil S	Associate Professor - Periodontics	Member	
7.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
8.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Pallavi Nanaiah	Sr. Lecturer	Member	
11.	Dr. Vinod Rangan	Sr. Lecturer	Member	
12.	Dr. Brunda K	Sr. Lecturer	Member	

Agenda and points discussed

1. Monitoring the academic activity of each department

Internal assessment for ODD batch 2018-19 dates to be conducted in August, September and November. Regular batch 2017-18 departments to analyze the results of the 2nd internal and take up remedial actions.



2. Interdepartmental meets

to be planned and conduct on regular basis

3. Post graduate academic updates

Profile, work done was assessed and found to be on par with the planned curriculum for each department. List of eligible candidates for exam to be sent to university.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2017-18/05

Academic Advisory Council

Sub: Academic Advisory Council meeting on 11-05-2018

Date and Time: 11-05-2018, 03.00 pm- 3.30 pm

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson
2.	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member
3.	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member
4.	Dr. Savita AM	Prof & Head - Periodontics	Member
5.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member
6.	Dr. Sunil S	Associate Professor - Periodontics	Member
7	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary
8.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member
9.	Dr. Pallavi Nanaiah	Sr. Lecturer	Member
10.	Dr. Vinod Rangan	Sr. Lecturer	Member
11,	Dr. Brunda K	Sr. Lecturer	Member

Agenda and points discussed

1. Monitoring the Undergraduate academic activity of each department

ODD BATCH 2018-19- update on the progress of classes conducted and attendance to be monitored by the head of departments. And check the calendar of events and plan further classes, identify slow and fast learners and plan accordingly.

REGULAR BATCH 2017-18- exam dates announced for July 3rd. Attendance and internal marks to be submitted and portions to be completed. Revision classes to be taken wherever required.



2. Post Graduate exams

University exams scheduled in the month of June. All post graduates have submitted the required documents and completed the quota of work. Mock exam results were discussed.

3. Post graduate calendar of events 2018-19 batch

Calendar of events for post graduate training for the new batch to be planned as per RGUHS. Conduct orientation day for the new batch

4. Approval of policy documents of various Committees

Member Sretary informed the member that Institutional review board, Soft Skill Development committee, Carrier guidance and placement committee, Feedback Committee, Student support, Welfare and Grievance Redressal Committee, Interdepartmental Meeting Committee have prepared the policy documents. The same was discussed and approved for placement before the Governing Council.

5. Feedback on curriculum

Members suggested Feedback to be taken from stake holders on the curriculum - Feedback committee to prepare a structured feedback form and take feedback.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2018-19/01

Academic Advisory Council

Sub: Academic Advisory Council meeting on 10-07-2018

Date and Time: 10-07-2018 at 03.00 pm- 3.45 pm

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	
3	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	
4	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
5	Dr. Savita AM	Prof & Head - Periodontics	Member	
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
7	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
8	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	
9	Dr. Sunil S	Associate Professor - Periodontics	Member	
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
11	Dr. Gargi S Murthy	Member		
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
13	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

1. Welcoming and introduction of new members

Chairperson welcomed and introduced the new member Dr. Darshan to the committee and briefed him about the functioning of the committee.

2. University exams undergraduate regular batch

Regular batch 2017-18- students to be informed to meet the teacher in charge for



approval of patients, spotters discussion and record submission

3. CDE/interdepartmental meets

Departments to conduct value added courses and interdepartmental meets.

- Academic calendar for Undergraduate 2018-19 batch
 Begin the academic year October after the practical exams. Internal assessments
- 5. Curriculum planning for 2018-19 regular batch

Academic calendar planning for this year, send the curricular planning to the AAC within a week.

5. Post graduate calendar

The committee noted the change in the exam pattern and curriculum of MDS with basic science exams going to be held at the end of first year as Part 1 exams. All department to be informed about the same.

Dr. Ramnarayan BK

Member Secretary

or Hemanth M



DSCDS/AAC/2018-19/02

Academic Advisory Council

Sub: Academic Advisory Council meeting on 10-09-2018

Date and Time: 10-09-2018 03-00PM to 03-30PM.

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	
4.	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
5.	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
6.	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	
7,,	Dr. Sunil S	Associate Professor - Periodontics	Member	
8.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
9.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
10.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

1. odd batch exams

update on the progress of classes conducted and attendance to be monitored by the head of departments. And check the calendar of events and plan further classes

2. Update on post graduate dissertation submission and synopsis

each department gave an update on synopsis and dissertation submission.

Library dissertation topic selection and completion date were discussed.



3. Discussion on feedback-analysis

Analysis of feedback from stake holders received from the feedback committee, action plan from each department to improve on teaching learning process and implement it.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2018-19/03

Academic Advisory Council

Sub: Academic Advisory Council meeting on 06-11-2018

Date and Time: 06-11-2018 at 03.00 pm

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	
3.	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
4.	Dr. Savita AM	Prof & Head - Periodontics	Member	
5.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
6.	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
7.	Dr. Sunil S	Associate Professor - Periodontics	Member	
8.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
9.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
10.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	

Agenda and points discussed

1. Odd batch exam

exams announced 11th dec 2018. attendance abstract and internal assessments to be sent to office

2. Update on regular batch academic activities

Regular batch - update on the progress of classes conducted and attendance to be monitored by the departments. And check the calendar of events and plan further classes. Assess the internals marks and identify the slow and fast learner and plan for the action to be taken for the same.



- 3. Update on post graduate dissertation and synopsis submission synopsis and dissertations to be submitted as per university notifications
- 3. implant workshop 2019

it was decided that the implant workshop will be conducted in a more comprehensive manner with 4 modules

Dr. Ramnarayan BK

Member Secretary

Hemanth M



DSCDS/AAC/2018-19/04

Academic Advisory Council

Sub: Academic Advisory Council meeting on 19-01-2019

Date and Time: on 19-01-2019 at 11.00 am

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	
3	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	
4	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
5	Dr. Savita AM	Prof & Head - Periodontics	Member	
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
7	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
8	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	
9	Dr. Sunil S	Associate Professor - Periodontics	Member	
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
12	Dr. Karthik J Kabbur	Professor - Orthodontics Member		
13	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics Member		

Agenda and points discussed

Monitoring the regular and Odd batch academic activity happening in each department

Update on the academic activity was received from all departments and revision for the 2nd internals to be done. It was decided that department shall send attendance of students to their parents once very three months.



2. Academic calendar for 19-20 odd batch

To begin from Feb 2019. Odd batch - internal dates finalized in april, july and october 2019.

3. Curriculum planning for Odd batch

Plan to be made and implement

4. Post graduate academics

library dissertation submissions to be monitored. Decision on mock exams for final years March April and mock for First MDS Part 1 as 1st years will have exams for the basic science paper 1 in the month on may 3rd 2019

5. Calendar for Implant workshop 2019

To conduct in March

6. Discussion on Library Advisory Committee report

The members were informed of the report of the LAC which mentioned the calling of book exhibition and allocation of budget and expenditure for 2018-19, and review to OPAC which suggested orientation to students which was approved by the committee.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2018-19/05

Academic Advisory Council

Sub: Academic Advisory Council meeting on 12-03-2019

Date and Time: 12-03-2019 at 11.00 am

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	
4	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
7	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
8	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	
9	Dr. Sunil S	Associate Professor - Periodontics	Member	
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
13	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

- 1. Monitoring the regular batch academic activity happening in each department departments to analyze the results of the 2nd internal and take up remedial actions.
 - 2. interdepartmental meets Update
 Received from Interdepartmental meet committee and discussed.
- 3. Post graduate activities update

profile, work done was assessed and found to be on par with the planned curriculum for each department. List of eligible candidates to be sent to university.



Each department training for the paper one exams were discussed. Exams theory scheduled from may3rd 2019

Dr. Ramnarayan BK

Member Secretary

Hemanth M



DSCDS/AAC/2018-19/06

Academic Advisory Council

Sub: Academic Advisory Council meeting on 13-05-2019

Date and Time: 13-05-2019 at 11.00 am

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	
3	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	
4	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
5	Dr. Savita AM	Prof & Head - Periodontics	Member	
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
7	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	
8	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	
9	Dr. Sunil S	Associate Professor - Periodontics	Member	
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Orthodontics Member	
13	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

Approval of policy document / Roles and Responsibilities of Committee for Advanced Research Studies, Mentorship Committee

The policy document for Advanced Research Studies, Mentorship Committee was placed for approval. Member discussed and approved the same for placement before the Governing Council.

.2. Monitoring the academic activity of each department



Odd batch 2019-20 update on the progress of classes conducted and attendance received and discussed. Analysis of 1st internals discussed and action plan for slow and fast learners discussed.

Regular batch 2018-19- exam dates announced - june 18th . Attendance and internal marks to be submitted and portions to be completed. Revision classes to be taken wherever required.

3. Post Graduate exams

University practical exam planned.

4. Post graduate calendar of events for 2019-20 batch

Calendar of events for post graduate training for the new batch to be planned.

Conduct orientation day for the new batch

5. Any other

Members suggested mentorship committee formation to monitor progress on students one on one basis. Decided to have a structured mentorship program

Dr. Ramnarayan Bk

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2019-20/01

Academic Advisory Council

Sub: Academic Advisory Council meeting on 08-07-2019

Date and Time: 08-07-2019 at 03.00 pm

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics Chairperson		
2	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	
3	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	
4	Dr. Chaya M David	Prof & Head – Oral Medicine & Radiology	Member	
5	Dr. Savita AM	Prof & Head - Periodontics	Member	
6	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	
7	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	ofacial Member	
8	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	
9	Dr. Sunil S	Associate Professor - Periodontics	Member	
10	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
11	Dr. Gargi S Murthy	Reader - Pedodontics	Member	
12	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
13	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

- University exams undergraduate regular batch 2018-19
 students to report to the department, submit records revise spotters and get their patients approved for the practical exams.
- 2. Academic calendar and curricular planning for Undergraduate 2019-20 batch



Begin the academic year in August after the practical exams. Internals assessments decided to be conducted in the month of November, February, April, Academic calendar planning for this year to be done by the departments. Interns Orientation to be done.

- Odd batch internal assessment analysis
 internal assessment performance of the odd batch was discussed and revision where
- 4. Academic activities to be conducted for period October 2022-June 2023
 departments to prepare and plan academic and non academic programs, value added
- Post graduate calendarto conduct orientation day july 9th & 10th

courses to be included in the calendar of events.

ever needed was suggested.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M.



DSCDS/AAC/2019-20/02

Academic Advisory Council

Sub: Academic Advisory Council meeting on 23-09-2019

Date and Time: 23-09-2019 at 03.00 pm

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	M
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Millo
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Or,
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	A A
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	Asent
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	de
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	166
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	0
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Jh.
11,	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	enis. M
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	NA P
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	Absal

Agenda and points discussed

1. Introduction of the new committee members

Chairperson welcomed and introduced the new member Dr. Tulsi and briefed about



functioning of the committee

2. Forth coming Odd batch undergraduate theory examination

Theory exams announced for odd batch from 11th December 2019. attendance, internal assessment marks to be sent to university to be submitted to the office. Portions and quota to be completed before November.

3. Odd batch 2nd internal

Discussion on the 2nd internals done.

4. Update on post graduate dissertation and synopsis submission

All post graduate thesis are going on as per schedule - dissertation submission to be done as per university notification without fail.

5. feedback analysis on curriculum

feedback analysis on curriculum by stake holders and action suggested by feedback committee discussed.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2019-20/03

Academic Advisory Council

Sub: Academic Advisory Council meeting on 25-11-2019

Date and Time: 25-11-2019 at 03.00 pm

Venue: Principal office board room.

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1,	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	M
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	1 July
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Ale V
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	A M
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	As sent
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	de
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	The
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	b
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	J.M.
11,	Dr. Ramnarayan BK	Reader - Oral Medicine & Radiology	Member Secretary	R
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	CAS.
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	No.
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

Agenda and points discussed

1. Forth coming undergraduate THEORY examination

Revision to be done where ever required for the exam going odd batch from 11th



December 2019. Discussion on the 3rd internals done.

- Progress on interdepartmental meets discussed scheduled regular meets were satisfactorily conducted.
- Update on post graduate dissertation submission and academic activities
 All post graduate thesis is going on as per schedule. Didactic activities going on as per schedule.
- 4. Mentorship committee update

The mentorship program is in place with training of all mentors and structured program planned.

Dr. Ramnarayan BK

Member Secretary

r Hemanth M



DSCDS/AAC/2019-20/04

Academic Advisory Council

Sub: Academic Advisory Council meeting on 18-01-2020

Date and Time: 18-01-2020 at 11.00 am

Venue: Principal office board room.

The following members were present:

S1. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	~
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Minte
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Pr.
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	1
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	About
7,	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dy
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	The
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Th.
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	R
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	8 M.S. PO
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

Agenda and points discussed

Monitoring the regular batch academic activity happening in each department
 Regular batch internal assessments- 1st internal assessments were discussed and action taken for slow and fast learners were discussed



2. Academic calendar for 20-21 odd batch and Curriculum planning for Odd batch To begin from Feb 2020. Odd batch - internal dates finalized in April, August and November 2020. plan the curricular activity accordingly

3. Post graduate academics

University examination dates announced. library dissertation submissions to be monitored. Decision on mock exams for final years in the month of march. 1st years also to give mock exams

4. Calendar for Implant workshop 2020
Implant workshop to be conducted in March 2020

5. . Discussion on LAC Report

The members were informed of the report of the LAC which mentioned the calling of book exhibition and allocation of budget and expenditure for 2019-20 for an amount of Rs. 20 Lakhs, Conduct Orientation program for new students every year.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2019-20/05

Academic Advisory Council

Sub: Academic Advisory Council meeting on 02-03-2020

Date and Time: 02-03-2020 at 11.00 am

Venue: Principal board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head – Conservative Dentistry	Member	M
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Minh
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Rr
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	Aug.
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	Assed
7,	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	de
8.	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	12
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Jh.
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Rom
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	en som
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

Agenda and points discussed

1. Regular batch academics

2nd internals marks discussed, action taken by each department for slow and fast learners were followed up.



2. interdepartmental meets

Last year activities discussed.

3. Post graduate Academic

work done was assessed and found to be on par with the planned curriculum for each department. List of eligible candidates to be sent to university. Each department training for the paper one exams were discussed. Exams theory scheduled from may 2020

Dr. Ramnarayan BK

Member Secretary

r. Hemanth M



DSCDS/AAC/2019-20/06

Academic Advisory Council

Sub: Academic Advisory Council meeting on 23-03-2020

Date and Time: 23-03-2020 at 5.00 pm through zoom

The following members were present:

SI. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	N
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	W Junh
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	QP .
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	AU
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	Ospel.
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dy
8.	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	16-
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	PW.
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Q.
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	ens. T
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	Sp
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

Agenda and points discussed

1. Online training for Cisco Webex platform from RGUHS for online classes

RGUHS is providing online platform for online classes in view of Lock down. To inform all teaching faculty to download cisco webex app and attend Cisco Webex platform



training at 11 am on 24-03-20 for online classes

2. Timetable for online classes

Decided to conduct theory classes online and finish portions as early as possible so as to give extra clinical hours to students when they return to classes in the campus

3. Postponement of Implant workshop 2020

In view of covid implant workshop to be deferred till further notice

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2019-20/07

Academic Advisory Council

Sub: Academic Advisory Council meeting on 24-04-2020

Date and Time: 24-04-2020 at 11.00 through Cisco Webex

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	
3,	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Milmer
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Ap.
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	Asicus
7.	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	dy
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	The
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Ih
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Pr
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	KRSVEL
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	WP
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

Agenda and points discussed

 Discussion of circular received from RGUHS regarding Conducting online exams for UG and PG, conducting practical classes/clinical teaching. Conducting internal assessment.



Updates on online theory classes taken. Attendance to be sent to university periodically as required. It was decided to revise the theory time table for UG students so as to finish all theory topics by 30th April 2020. And start online practical/ clinical from 1st may 2020.

2. Post Graduate Mock exam dates

to be revised and online from 5-05-2020

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2019-20/08

Academic Advisory Council

Sub: Academic Advisory Council meeting on 24-05-2020

Date and Time: 24-05-2020 at 11.00 am through Cisco Webex

The following members were present:

S1. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	\
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	A July
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	, Ar
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	A LIVE
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	Asial
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dr
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	1
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Jh.
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Qu .
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	ems ru
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	7

Agenda and points discussed

1. Online classes

progress on theory classes for UG and didactic activity for PG was discussed and found to be going on as per schedule to enable maximum clinical time once the students



return to campus.

2. Online internal assessments

were decided to be conducted online from 22nd $\,$ june keeping in view the exams . Revised time table to be sent

3. UG regular batch 19-20 batch RGUHS exam announced for 28th July. Departments to plan accordingly

4. PG exams

14th July 2020. Plan the academic calendar accordingly

Dr. Ramnarayan BK

Member Secretary

r. Hemanth M



DSCDS/AAC/2019-20/09

Academic Advisory Council

Sub: Academic Advisory Council meeting on 26-07-2020

Date and Time: 26-07-2020 at 11.00 am through Cisco Webex

The following members were present:

Agenda and points discussed

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	~
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Minn
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	
5	Dr. Savita AM	Prof & Head - Periodontics	Member	July 1
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	OSevent
7:	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	de
8.	Dr. Krishnanand PS	Prof & HOD – Oral Pathology	Member	12
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	h
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	J.h.
11,	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Ru
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	en, sir
13,	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	Sho
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	* /

1. Challenges faced with regards to conducting/appearing for final year university examinations 2020.

Dr. Ramnarayan briefed the agenda of the meet and the purpose. The meet was conducted along with the final year students to allay fears of exam and postponement of exam and the



impact it would have on their academic calendar.

The chairperson informed the students that Engineering students could be promoted this year and then give exams. However BDS final year can't go out without the exams. Students have not had many postings which means they lack the practical knowledge of those departmental skills needed for patient management. Dr. Ram was asked to to read the calendar of events.

Calendar events

June July exams and internships begins in Sep 20 and finishes 21 Sep Pg exams 2021 for which eligibility will be to finish internship by march 2022.

Exams even in September can still be done

Dr. Roopa Nadig informed the students that Training and exams- two aspects. Patients' work is a must. How long you need after working on patients. she suggested September theory, oct and November posting then the practical's in dec or jan.

Students concern was travelling from native through air, road ways. Stay in Bangalore as hostels and PGs are not allowing them back. Quarantine place once they are back.

People in assam have no access to classes or online study materials due to floods. They cant even travel back right now

They suggested exit exams in internship, but according to DCI PDC is required to start the internship program. Students said if we can have practical on typho or something now and again a exit exams in internship. Even localities concerned about travelling to and fro and infecting their people back home. As the situation is unpredictable students don't want to postpone the exams too much. They were concerned of their course getting extended and being incompetent when they finish the course and start their practice.

Principal , Dean and Dr.Chaya counselled the students and assured them that all their concerns will be put forth to the university and there is no need to panic. All staff are with the students for support.

It was decided to bring to the notice of the university the concerns of the students in the next meeting of Principals.

Dr. Ramnarayan BK

Member Secretary

r. Hemanth M



DSCDS/AAC/2020-21/01

Academic Advisory Council

Sub: Academic Advisory Council meeting on 4-08-2020

Date and Time: 4-08-2020 at 11.00 am through Cisco Webex

The following members were present:

SI. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	#
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	W links
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	APD.
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	1
7,	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dy
8,	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	b
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Joh.
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Or -
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	snis or
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	Asial

Agenda and points discussed

1. Online classes progress

progress on theory classes for UG and didactic activity for PG was discussed. As per notification the final year students to be asked to report to the college and informed



to attend the postings scheduled from 1st to 10th September as the revised date of exams have been announced from 15th September 2020. Attendance to be sent and also their online assessment performance was discussed.

- University exams for 1st,2nd and 3rd BDS 19-20 batch deferred till further orders as per university notification 3-8-2020. Online classes and practicals to continue.
- Start of next academic year
 As per university notification academic to start from 17th august 2020 irrespective of
- university exams
 4. Post graduate academic year 2020-21
 To begin from 25-08-2020. Orientation to conducted 25th &26th august 2020
- 5. PG Synopsis and dissertation for synopsis submission revised dates announced by university in the month January. Dissertation submission revised date 2nd November.
- 6. Implant workshop for the UG and PG
 Feasibility of conducting offline implant workshop which was postponed in march was discussed. Implant committee to come with dates by the next meeting

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2020-21/02

Academic Advisory Council

Sub: Academic Advisory Council meeting on 4-09-2020

Date and Time: 03-09-2020 at 11.00 am

Venue: principal office board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head – Orthodontics	Chairperson	Hu
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	1
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	White
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Op.
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	July 1
6.	Dr. Kalpana D	Prof & Head - Prosthodontics	Member	Alsent
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dr>
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	16
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor – Periodontics	Member	Joh.
11,	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Ph
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	g ps. of
13.	Dr. Jayaprasad Darsan	Senior Lecturer – Orthodontics	Member	
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	7

Agenda and points discussed

1. Online classes progress

progress on theory classes for $\mathbf{1}^{st}$, $\mathbf{2}^{nd}$ and third BDS was discussed and was going on as per schedule

2. 4th BDS RGUHS exams



As per notification university exams will not commence from 15th September. Hence clinical posting to be extended till 30th September.

3. Revised schedule for exam

Revised schedule for exam for all years to start from 13th October. Attendance and internal assessment to be sent to university

4. Implant workshop 2020

Scheduled to October 2020

5. Feedback analysis

Analysis of feedback from stake holders received from the feedback committee, action plan from each department to improve on teaching learning process and implement it.

Dr. Ramnarayan BK

Member Secretary

or Hemanth M



DSCDS/AAC/2020-21/03

Academic Advisory Council

Sub: Academic Advisory Council meeting on 03-10-2020

Date and Time: 03-10-2020 at 3.00 pm

Venue: principal office board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	# 4
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Numb
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Op _
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	1
6.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	0
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	16
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	W
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	John
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	h
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	ens. Th
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

Agenda and points discussed

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on at principal board room to discuss the below mentioned agenda

1. Welcoming new Member



The Chairperson welcomed Dr.Sarandha DL and briefed the working of the committee.

2. Online classes progress

progress on theory classes for 1^{st} , 2^{nd} and third BDS was discussed.

3. RGUHS university exams

As per notification university exams 4th bds exams to start from 14th October. Practical from 11th Nov. 1st,2nd,3rd BDS exams deferred

Dr. Ramnarayan BK

for Carnery

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2020-21/04

Academic Advisory Council

Sub: Academic Advisory Council meeting on 19-10-2020

:Date and Time: 19-10-2020 at 10.00 am

Venue: Principal office board room.

S1. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	H H
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	1/
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	hulo
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Of The Control of the
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	1
6.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	<u>e</u>
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	W.
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	Jb!
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	K
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	John.
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	an
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	& MISIT
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	6
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

The following members were present:

Agenda and points discussed

1. RGUHS exams

As per notification university exams for 1st, 2nd and 3rd year BDS to start from 19th



November. Discussion on practical exams on patients/models for the regular batch discussed. Department to follow case scenarios instead of patients in view of covid.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2020-21/05

Academic Advisory Council

Sub: Academic Advisory Council meeting on 13-11-2020

Date and Time: 13-11-2020 at 10.00 am

Venue: Principal board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	Hu.
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	11/
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Strike
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Off
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	1
6.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	<u>e</u>
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dry
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	165
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	W The second sec
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	The
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Ph 1
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	ms-re
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	
14.	Dr. Tulasi Nayak	Senior Lecturer - Oral & Maxillofacial Surgery	Member	

Agenda and points discussed

Academic calendar for 2nd , 3rd and 4th BDS and interns regular batch 2020-21
to commence from December 21 2020. Intern batch 20-21 to start from 7th December
. orientation to be conducted

2. 2nd internal for odd batch



to be revised for 27-11-2020

3. Clinical posting for 4th BDS Odd batch

Revision of clinical posting for 4th BDS odd batch in view of students returning to campus.

4. Academic calendar for Regular batch second to final year (2020-21) to start from Dec 21st 2020.

Academic year for 2020-21 First BDS to start from 7th December. Orientation on 7-12-20 and 08-12-20. To plan academic calendar.

5. Curriculum plan 2020-21

Departments to be informed to make plan ready.

6. Feedback report and action plan from feedback committee

received, discussed. departments to plan accordingly

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M



DSCDS/AAC/2020-21/06

Academic Advisory Council

Sub: Academic Advisory Council meeting on 05-01-2021

Date and Time: 05-01-2021 at 10.00 am

Venue: Principal office board room.

The following members were present:

S1. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	# 12
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	1, h
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	1) July
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	PR
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	
6.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	Q to
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	A>>
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	164
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	John
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Re
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	Misort
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

1. Resignation of member

The member secretary informed that Dr. Tulsi Nayak is no longer a member of the committee as she had reigned from the institution.

2. University exam for ODD Batch 2020-21

Exams commences from 24-03-21. To send attendance and internal assessment.

Analysis of 2nd internal assessment discussed. Revision for ODD Batch 2020-21 by the



departments

3. Internal assessment dates

Internal dates revised to 15 -02-2021

4. Regular batch 2019-20 batch academics

First internal for first BDS to be held in April . 2nd to 4th bds in feb and second internal in May. And third internal in june

5. Remedial classes for repeater of 2020 November examination

Student shall be informed to attend remedial classes / posting from 11th Jan and schedule to be issues.

6. Post graduate academics

Post graduate exams for 2021 exams announced from May 11th 2021.. conduct mock exam in March 2021.

7. Discussion on LAC Report

The members were informed of the report of the LAC which mentioned the calling of book exhibition and allocation of budget and expenditure for 2019-20 for an amount of Rs. 21 Lakhs, Purchase of book cupboards to accommodate new books, binding of old books and journals.. the same was approved.

Dr. Ramnaravan BK

Member Secretary

Dr. Hemanth M

Chairperson

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DSCDS/AAC/2020-21/07

Academic Advisory Council

Sub: Academic Advisory Council meeting on 25-01-2021

Date and Time: 25-01-2021 at 10.00 am **Venue**: Principal office board room. The following members were present:

Sl. No.	Name	Designation	Position	Signature
1,	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	1
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	1,1
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	My July
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Plon
5.	Dr. Savita AM	Prof & Head = Periodontics	Member	A LAND
6.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	D' &
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	gh>
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	Jal.
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Lh
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Q.
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	en.s.r
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	B

Agenda and points discussed

1. Posting for Odd batch 2020-21:Posting to be revised from 28-01-2021 in view of exams being postponed

Dr. Hemanth M

Chairperson

Dr. Ramnarayan BK

Member Secretary

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DSCDS/AAC/2020-21/08

Academic Advisory Council

Sub: Academic Advisory Council meeting on 14-04-2021

Date and Time: 14-04- 2021 at 10.00 am

Venue: Principal office board room.

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	Assel
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Muh
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	"Ar
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	Dosed
6.	Dr. Sarandha DL	Prof & Head Prosthodontics	Member	0
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	de la
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	16-
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	h
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	1h
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Bu
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	SUS W
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

The following members were present:

Agenda and points discussed

1. Odd batch Academic calendar

Commencement of Academic year 2021-22 -- Second , third and Fourth year to start from 26th April- internal assessment to be conducted tentatively in august, dec and feb 2022. Interns Odd batch posting to start from May



2. Regular batch 2020-21 academics

1st internal assessment marks discussed and action taken for slow and fast learners were discussed.

3. Post graduate exams

Postponed to second July 2021. advised to practice more of exam-oriented cases.

Dr. Ramnaravan BK

Member Secretary

Dr. Hemanth M

Chairperson

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DSCDS/AAC/2020-21/09

Academic Advisory Council

Sub: Academic Advisory Council meeting on 20-04-2021

Date and Time: 20-04- 2021 at 03.00 pm

Venue: Principal office board room.

The following members were present:

Sl. No.	Name	Designation	Position	Signature
14.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
15.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	4
16.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	White.
17.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	OF ,
18.	Dr. Savita AM	Prof & Head - Periodontics	Member	July
19.	Dr. Sarandha DL	Prof & Head Prosthodontics	Member	De C
20.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	%
21.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	Jh-
22.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
23.	Dr. Sunil S	Associate Professor - Periodontics	Member	Th
24.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	gr.
25.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	AN-SADA
26.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

1. Online classes for BDS

In view of surge in cases, it is decided that theory / practical classes will be through online mode from 21st April.

2.Internal assessment exams

To be conducted online if required.



Postponed to 13th July 2021. Student to practice clinical exercises. And may be given study holidays

3. Any other

Chairperson informed the committee that this would be the last meeting of Dr. Roopa R Nadig as she was attaining superannuation . All member conveyed their best wished to the Dean.

Dr. Ramnaravan BK

Member Secretary

pr. Hemanth M

Chairperson

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DSCDS/AAC/2020-21/11

Academic Advisory Council

Sub: Academic Advisory Council meeting on 16-07-2021

Date and Time: 16-07-2021 at 03.00 pm

Venue: Principal office board room.

The following members were present:

S1.			D. Milan	Signature
No.	Name	Designation	Position	
1,	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	1) No
2.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	a Min
3.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	am
4.	Dr. Savita AM	Prof & Head - Periodontics	Member	July 1
5.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	Q en
6.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	de,
7.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	The
8.	Dr. Vedavathi B	Prof & HOD - Conservative Dentistry	Member	Vederation B
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	17
11.	Dr. Ramnarayan BK	Reader - Oral Medicine & Radiology	Member Secretary	b
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	grs.M
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	de

Agenda and points discussed

1. Welcoming of New Member

The chairperson welcomed and introduced Dr. Vedavathi to the committee and briefed her about the role of the committee.

2. Approval of policy document / roles and responsibilities of Committee for Dental Education Technology.



The council approve the Policy document of Committee for Dental Education Technology.

2. Off line classes commencement

Students to be asked to report back on 19th July 2021 in view of govt notification. students shall be vaccinated with at least one dose. To submit vaccination certificate to the covid response team.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M

Chairperson

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Committee file



Dayananda Sagar College of Dental Sciences,

Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2020-21/10

Academic Advisory Council

Sub: Academic Advisory Council meeting on 26-06-2021

Date and Time: 26-06- 2021 at 03.00 pm

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	
2.	Dr. Roopa R Nadig	Dean, Prof & Head - Conservative Dentistry	Member	
3.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Minh
4.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	(A)
5.	Dr. Savita AM	Prof & Head - Periodontics	Member	J. J.
6.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	A So
7.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	Or,
8.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	h
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	سلل
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	gr.
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	ens-ret
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	de

Agenda and points discussed

1. Regular batch Academics

2nd internals marks (2nd,3rd,4th) discussed and revisions and more practical exposure to be given to students, keeping in mind the lost practical in the previous year due to lock-downs.

1st year - 1st internal marks discussed and action planned for slow learners discussed

2.Post graduate exams



Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M

Chairperson

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DSCDS/AAC/2021-22/01

Academic Advisory Council

Sub: Academic Advisory Council meeting on 01-09- 2021

Date and Time: 01-09-2021

Venue: 03.00 pm at principal board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	HV
2.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Mull
3.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Of p
4.	Dr. Savita AM	Prof & Head - Periodontics	Member	Lil
5.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	<u>e</u>
6.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dy
7.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	164
8.	Dr. Vedavathi B	Prof & HOD - Conservative Dentistry	Member	Vedovath.
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	Absent
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	John .
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	R.
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	fr.s.rt
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	Absorat

Agenda and points discussed

1. Regular batch (2020-21) exams

To start from 21st October. Department to plan completion of portions and clinical. Prepare attendance and internal assessment marks to be sent to university.

2. Feedback Analysis

Analysis of feedback from stake holders received from the feedback committee, action plan



from each department to improve on teaching learning process and implement it.

Dr. Ramnarayan BK

Member Secretary

r. Hemanth M

Chairperson

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DSCDS/AAC/2021-22/02

Academic Advisory Council

Sub: Academic Advisory Council meeting on 06-12-2021

Date and Time: 06-12-2021 03.00 pm

Venue: principal board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
14.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	# 1
15.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	1) July
16.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Pr.
17.	Dr. Savita AM	Prof & Head - Periodontics	Member	A STATE OF THE PARTY OF THE PAR
18.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	Q en
19.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	do
20.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	164
21.	Dr. Vedavathi B	Prof & HOD - Conservative Dentistry	Member	Vedarath &
22.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
23.	Dr. Sunil S	Associate Professor - Periodontics	Member	Sh
24.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Ru
25.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	gris. ot
26.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

1. Academic year regular batch 2021-22

Academic year for 2nd year to begin from 13th December,3rd and Final year from 18th.

2. Curriculum planning

Department to plan the curriculum. Plan the calendar of events. Internal assessment



to be conducted in June august, Sep 2022

3. Odd batch academics

internal assessment marks discussed.

Dr. Ramnaravan Bk

Member Secretary

Dr. Hemanth M

Chairperson

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Dayananda Sagar College of Dental Sciences,

Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2021-22/03

Date: 21-01-2022

Academic Advisory Council

Sub: Academic Advisory Council meeting on 24-01-2022

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 24-01-2022 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. Undergraduate academics
- 2. Post graduate academics
- 3. Discussion on LAC Report

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2021-22/03

Academic Advisory Council

Sub: Academic Advisory Council meeting on 24-01-2022

Date and Time: 24-01-2022 at 03.00 pm

Venue: principal board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	Hy
2.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	1 July
3.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	OPP.
4.	Dr. Savita AM	Prof & Head - Periodontics	Member	1
5.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	O'e
6.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dr/
7.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	164
8.	Dr. Vedavathi B	Prof & HOD - Conservative Dentistry	Member	Ved anoth &
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	ph.
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	R.
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	KN.S.V
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

Agenda and points discussed

1. Undergraduate academics

ODD BATCH 2021-22 Attendance, Internal assessment marks analyzed. Inform the students if attendance shortage and ask them to make it up. Update parents if any student has shortage of attendance as university exams tentatively may be in march 2022.

2. Post graduate academics



2021-2024 batch commencing from feb 2022. Each department shall plan their academic activity. Orientation scheduled 8th and 9th feb 2022.

3. Discussion on LAC Report

To conduct book exhibition in Jan 2022, Expenditure d of Rs. 22 lakhs and upgradation of library management software. And new systems for the library. The same were approved. Members informed that there were issues with RGUHS Helinet access. It was decided to ask the Member secretary/ Librarian to take up the issue with RGUHS through proper channels.

Dr. Ramnaravan BK

Member Secretary

pr. Hemanth M

Chairperson

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Dayananda Sagar College of Dental Sciences,

Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2021-22/04

Date: 18-03-2022

Academic Advisory Council

Sub: Academic Advisory Council meeting on 21-03-2022

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 21-03-2022 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. Odd batch exams
- 2. Academic year odd batch 2022-23
- 3. Academic calendar for 1ST BDS 2021-22
- 4. Curriculum planning for Odd batch and regular batch 2021-22(first BDS)
- 5. Post graduate academics

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2021-22/04

Academic Advisory Council

Sub: Academic Advisory Council meeting on 21-03-2022

Date and Time: 21-03-2022 at 03.00 pm

Venue: principal board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
27.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	H.
28.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	July-
29.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	APB.
30.	Dr. Savita AM	Prof & Head - Periodontics	Member	1
31.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	
32.	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	dr
33.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	1ht
34.	Dr. Vedavathi B	Prof & HOD – Conservative Dentistry	Member	Dedarathi B
35.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
36.	Dr. Sunil S	Associate Professor - Periodontics	Member	Th.
37,	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Re
38.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	sn.s.rt
39.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	W

Agenda and points discussed

1. Odd batch exams

ODD BATCH 2021-22 -students to report to the department fro patient approval and submission of records. to revise spotters.

2. Academic year odd batch 2022-23

plan the academic activity for the odd batch, starts form April 25th. internal assessments to



be held in august, November and jan 2023.

3. Academic calendar for 1ST BDS 2021-22

to start on 28th march 2011, orientation day and white coat ceremony to be held on 29th april 2022 internal to be conducted in the month of june, august and november.

4. Curriculum planning for Odd batch and regular batch 2021-22 (first BDS)Department shall plan their curriculum for the odd batch.

5. Post graduate academics

2021-2024 batch -synopsis to selected and pilot study if required done before the IRB submissions

2019-2022 batch- attendance abstract to be sent to office and mock exams to be scheduled on 16th and 17th may 2022

Dr. Ramnarayan BK

Member Secretary

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Dr. Hemanth M



DSCDS/AAC/2021-22/04

Academic Advisory Council

Sub: Academic Advisory Council meeting on 21-03-2022

Date and Time: 21-03-2022 at 03.00 pm

Venue: principal board room

SI. No.	Name	Designation	Position	Signature
1.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	Hy y
2.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	1 July
3.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	OB
4.	Dr. Savita AM	Prof & Head - Periodontics	Member	1
5.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	<u>e</u>
6.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	dr>
7.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	lat a
8.	Dr. Vedavathi B	Prof & HOD - Conservative Dentistry	Member	Oedaroth A
9.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
10.	Dr. Sunil S	Associate Professor - Periodontics	Member	Lh
11.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	en a
12.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	1050
13.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	

The following members were present:

Agenda and points discussed

1. Odd batch exams

ODD BATCH 2021-22 -students to report to the department for patient approval and submission of records. to revise spotters.

2. Academic year odd batch 2022-23

plan the academic activity for the odd batch, starts form April 25th. internal assessments to



be held in august, November and jan 2023.

3. Academic calendar for 1ST BDS 2021-22

to start on 28th march 2022, orientation day and white coat ceremony to be held on 29th april 2022 internal to be conducted in the month of june, august and november.

4. Curriculum planning for Odd batch and regular batch 2021-22 (first BDS)

Department shall plan their curriculum for the odd batch.

5. Post graduate academics

2021-2024 batch -synopsis to selected and pilot study if required done before the irb submissions

2019-2022 batch- attendance abstract to be sent to office and mock exams to be scheduled on 16th and 17th may 2022

Dr. Ramnarayan BK

Member Secretary

Hemanth M

Chairperson

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DSCDS/AAC/2021-22/05

Date: 11-05-2022

Academic Advisory Council

Sub: Academic Advisory Council meeting on 13-05-2022

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 13-05-2022 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. Regular batches 2021-22 Academics
- 2. Post graduate Academics

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2021-22/05

Academic Advisory Council

Sub: Academic Advisory Council meeting on 13-05-2022

Date and Time: 13-05-2022 at 03.00 pm

Venue: principal board room

The following members were present:

Sl. No.	Name	Designation	Position	Signature
40.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	1
41.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	1 July
42.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Pp
43.	Dr. Savita AM	Prof & Head - Periodontics	Member	July 1
44.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	De
45.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	A-
46.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	BY
47.	Dr. Vedavathi B	Prof & HOD – Conservative Dentistry	Member	Redavalle B
48.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
49.	Dr. Sunil S	Associate Professor - Periodontics	Member	bli
50.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Qu ,
51.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	2005 Pel
52.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	N/P

Agenda and points discussed

1 Regular batches 2021-22 Academics

update on the progress of classes conducted and attendance was discussed And check the calendar of events and plan further classes. Identify slow and fast learners and plan action to for each.



2. Post graduate Academics

2021-2024 BATCH -status of synopsis discussed and found as per schedule 2020-2021 BATCH- status of dissertation discussed and found to be as per schedule 2019-2022 BATCH- exams announced in the month of june 2022. to complete quota of work and update their profile.

Dr. Ramnarayan BK

Member Secretary

Dr. Hemanth M

Chairperson

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Dayananda Sagar College of Dental Sciences,

Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2021-22/06

Date: 10-06-2022

Academic Advisory Council

Sub: Academic Advisory Council meeting on 10-06-2022

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 10-06-2022 at 03.00 pm at principal board room to discuss the below mentioned agenda:

- 1. University exam preponement for regular batches 2021-22
- 2. Revision of ODD batch 2022-23 and first BDS academic calendar

Dr. Ramnarayan BK

Member Secretary, AAC

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DSCDS/AAC/2021-22/06

Academic Advisory Council

Sub: Academic Advisory Council meeting on 10-06-2022

Date and Time: 10-06-2022 at 03.00 pm

Venue: principal board room

The following members were present:

SI. No.	Name	Designation	Position	Signature
53.	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	T.
54.	Dr. Nagesh L	Prof & Head - Public Health Dentistry	Member	Wy July
55.	Dr. Chaya M David	Prof & Head - Oral Medicine & Radiology	Member	Ap.
56.	Dr. Savita AM	Prof & Head - Periodontics	Member	Jule
57.	Dr. Sarandha DL	Prof & Head - Prosthodontics	Member	0 e
58.	Dr. Shobha ES	Prof & Head - Oral & Maxillofacial Surgery	Member	W.
59.	Dr. Krishnanand PS	Prof & HOD - Oral Pathology	Member	164
60.	Dr. Vedavathi B	Prof & HOD – Conservative Dentistry	Member	Vedavathis B
61.	Dr. Karthik J Kabbur	Professor - Orthodontics	Member	
62.	Dr. Sunil S	Associate Professor - Periodontics	Member	the
63.	Dr. Ramnarayan BK	Reader – Oral Medicine & Radiology	Member Secretary	Q-
64.	Dr. Gargi S Murthy	Reader - Pedodontics	Member	00.5.M
65.	Dr. Jayaprasad Darsan	Senior Lecturer - Orthodontics	Member	l° Vô

Agenda and points discussed

1. University exam preponement for regular batches 2021-22

revision of calendar of events in view of the preponement of university exams to august 16th 2022 . internal assessment dates to be revised and also the posting schedule to be completed before august 5th for 3rd and final year BDS.

Departments informed to complete the postings and portions before august 5^{th} and take



extra classes if required.

2. Revision of ODD batch 2022-23 and first BDS academic calendar

to be revised- revised internals to july, september and november keeping in mind probable preponement of odd batch calendar as done with regular batch.

Internal assessment for 1st BDS 2021-22- revised to july, september and November.

Ma Larreyur Dr. Ramnarayan BK

Member Secretary

🖪 Hemanth M

Chairperson

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Dayananda Sagar College of Dental Sciences,

Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

DSCDS/AAC/2022-23/01

Date: 05/09/2022

Academic Advisory Council

Sub: Academic Advisory Council meeting on 06-09-2022

All the members of the Academic Advisory Council are hereby informed and requested to attend the meeting on 6th September 2022 at 11.30am at Principal board room to discuss the below mentioned agenda:

1. Welcoming new members

2. Forth coming undergraduate practical examination

3. Academic calendar 2022-23 regular batch

4. Curriculum planning for regular batch 2022-23

5. Theory Time table

6. Clinical posting schedule

7. Internal assessment schedule

8. Academic activities to be conducted for period October 2022-june2023

9. Update on post graduate dissertation submission

10. Changes to be incorporated in the student record books

11. Best practices for 2022-23

Dr. Ramnarayan BK

Member Secretary, AAC

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Committee file

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DSCDS/AAC/2022-23/01

Academic Advisory Council

Sub: Academic Advisory Council meeting on 06-09-202

Date and Time: 06-09-2022 10.30AM to 11-30AM.

Venue: Principal office board room.

The following members were present:

SI. No.	Name	Designation	Position	Signature
1	Dr. Hemanth M	Principal, Prof & Head - Orthodontics	Chairperson	40
2	Dr. Nagesh L	Professor Emeritus – Research Head - Public Health Dentistry	Member	auty_
3			Member	OP.
4	Dr. Savita AM	Prof & Head – Periodontics	Member	11-
5	Dr. Shobha ES	Prof & Head – Oral & Maxillofacial Surgery	Member	de
6	Dr. Sarandha DL	Prof & Head – Prosthodontics	Member	10
7	Dr. Avinash J	Professor & Head - Public Health Dentistry	Member	AN
8	Dr. Krishnanand PS	Prof & Head – Oral Pathology	Member	Ihala
10	Dr. Vedavathi B	Prof & Head – Conservative Dentistry	Member	Vedarath. B
11	Dr. Prashanth NT	Professor – Oral & Maxillofacial Surgery	Member	Lui
12	Dr. Sunil S	Professor – Periodontics	Member	J.h
13	Dr. Ramnarayan BK	Professor – Oral Medicine & Radiology	Member Secretary	Pu
14	Dr. Aravind M	Professor – Orthodontics	Member	Marine H,
15	Dr. Gargi S Murthy	Reader – Pedodontics	Member	Consoret
16	Dr. Smitha Sharan	Reader – Prosthodontics	Member	2 00-
17	Dr. Veena Pai S	Reader - Conservative Dentistry	Member	Sof
18	Dr. Mohamed Nizam Al Deen Shah	Asst Prof – Physiology	Member	Abrev
19	Dr. Ambili C	Senior Lecturer – Conservative Dentistry	Member	arly!
20	Dr. Mir Shahid Ulla	Senior Lecturer – Prosthodontics	Member	Abrah

Agenda and points discussed

1. Welcoming the new members

Chairperson welcomed and introduced the new members to the committee and also briefed them about the working of the committee. Member secretary also informed

the committee of resignation of Dr. Karthik Kabur.

2. Forth coming undergraduate practical examination

Circular to be sent -Inform students to report to their respective departments for spotters and practical exam related discussion.

Report to the in-charge staff get the patient approved for the practical exam.

3. Academic calendar 2022-23 regular batch

Begin the academic year October after the practical exams keeping in mind the probable revision of academic year by university.

4. Curriculum planning for regular batch 2022-23

Academic calendar planning for this year, send the curricular planning to the AAC within a week.

4. Theory Time table

Changes suggested by the members:

- 1. 1ST YEAR TIME TABLE 2-3KANNNDA CLASS, 3-4 BIOCHEMISTRY.
- 2. Third BDS additional OP class

5. Clinical posting schedule

Clinical posting - COMMUNITY POSTING change.to be included into regular third year posting instead of sat

3rd year -Saturday postings to be included.

Final year postings to be split into 15days two posting instead of one 30 day posting

6. Internal Assessment Schedule

One practical internal at the end of posting of 3rd year, two in the final year.

Theory Internal Assement for 2022-23 batch - $Dec 2^{nd}$ week, 3^{rd} week February . 2^{nd} or 3^{rd} week April.

7. Academic activities to be conducted for period October 2022-June 2023

Academic and non academic program at department and criteria level to be sent by 15th September. Including interdepartmental meet.

8. Update on post graduate dissertation submission

All post graduate thesis are going on as perschedule for 2020-2023 BATCH- dissertation submission 2nd jan 2023.-15th jan without fine.

9. Changes to be incorporated in the student record books.



OBEJECTIVE assessment at dept level for theory. Include evaluation form to record.

10. Best practices for 2022-23

Questions of internals to be followed by keys. Implementation of blooms taxonomy while formulating the questions.

Submit to AAC the best practices for this academic activity by Sep 15.

11. Any other

Departments were updated about the new mail ID of AAC - academia@dscds.edu.in .

Dr. Ramnarayan BK

Member Secretary

Hemanth M

Chairperson

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore)
(Recognised by Dental Council of India, New Delhi)
ISO 9001: 2008 Certified Institution

TERMS AND CONDITIONS OF MEMORANDUM OF UNDERSTANDING

This is to state that a MOU has been signed on this day of between Dayananda Sagar College of Dental Sciences and Konankunte Urban Primary Health Centre (UPHC), regarding the management of dental wing under the following terms and conditions.

- 1. All the facilities like space, water, power and housekeeping with permanent attender to be provided by Konankunte UPHC.
- 2. The college management will provide equipments like dental chair, compressor, and other instruments necessary to carry out the treatment.
- 3. Faculty members, interns and post graduate students will be posted on rotation basis from 9:00AM to 1:00PM.
- 4. The procedures include routine dental checkup and treatments like oral prophylaxis, fillings and simple extractions.
- 5. Those patients who require extensive treatment such as RCT, Crowns, RPD, and orthodontic treatment will be referred to DSCDS and treatment will be done at nominal charges.
- 6. Basic materials such as gloves, mouth masks and GIC cement to be provided by the PHC.

7. Any absence/negligence on part of the interns and postgraduate students should be brought to the notice of the Principal, DSCDS immediately.

Dr. Hemanth.M

PRINCIPAL

PRINCIPAL

ayananda Sagar College of Dental Science

Kumaraswamy Layout, Bangalore - 560 078 Sri Galiswamy

SECRETARY

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654

Website: www.dayanandasagar.edu

TO SAGAR INSTITUTE OF THE PROPERTY OF THE PROP

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore)
(Recognised by Dental Council of India, New Delhi)
ISO 9001: 2008 Certified Institution

DSCDS/2017-18/

March 6, 2018

To,

Mr. M Krishnappa, Ju Member of Legislative Assembly, Bangalore South

Respected Sir,

Sub: Provision of IOPA radiograph unit, ultrasonic scalar and light cure unit for dental establishment at Konankunte PHC under the Public Private Partnership

At the outset I would like to thank you for all the help rendered to us in the initiating and processing of our request to start a dental unit at the Konankunte Primary Health Centre. As per the instructions from the DHO office letter addressed to Taluk Health Officer (reference no 20/2017-18, dated 19/2/2018), we had a detailed discussion with Dr. Ravi Shankar, the medical officer, Konanakunte PHC regarding the planning and utilization of space for the dental unit in the new upcoming PHC building. We are happy to inform that we had a fruitful discussion.

We are planning to provide basic treatment procedures such as extractions and oral prophylaxis for free as well as complex treatment procedures. We would require your help to provide an Intra oral radiograph unit, ultrasonic scalar and LED light curing unit for the centre so that complex procedures like root canal treatment and composite fillings can also be done in the centre. We were able to procure the following equipment at our other centre at NR colony maternity centre with the help from Corporator Mr. Sathyanarayana through BBMP funds. We are expecting your help in this regard to provide uninterrupted dental service.

Thanking you.

Thanking you.

Yours Sincerely

Prof.Dr. Hemanth.M

M.D.S, Ph.D

PRINCIPAL

PRINCIPAL

gayananda Sagar College of Dental Sciences
KumaraswShayige MalleshWara Hills, Kumaraswamy Layout, Bangalore - 560 078.
Bangalore Hone 07891 80 26663654 / 26913718 / 26661104, Fax: 080-26663654
Website: www.dayanandasagar.edu



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DAYANANDA SAGAR DENTAL COLLEGE

Article 37 Note or Memorandum

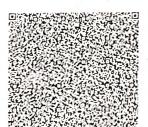
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ಒಪ್ಪಂದದ ಕರಾರು ಪತ್ತ

ಬೆಂಗಳೂರು ನಗರ ಜಿಲ್ಲೆ ಬಸವನಗುಡಿ ವಿಧಾನ ಸಭಾ ಕ್ಷೇತ್ರ. ವಾರ್ಡ್ ನಂ.154 ಎನ್.ಆರ್.ಕಾಲೋನಿ, ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯ ಆರೋಗ್ಯ ವೈದ್ಯಕೀಯ ಇಲಾಖೆ ವ್ಯಾಪ್ತಿಯ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯ ಮೊದಲನೆ ಮಹಡಿ ಒಂದು ಕೊಠಡಿಯಲ್ಲಿ ಡೆಂಟಲ್ ಕ್ಷಿನಿಕ್ ಮೃ ಪ್ರಾರಂಭಿಸಿ, ವಾರದಲ್ಲಿ 6 ದಿನ 'ಬೆಳಿಗ್ಗೆ 10 ರಿಂದ ಮಧ್ಯಾಹ್ನ 1 ಗಂಟೆಯವರೆಗೆ ಸಾರ್ವಜನಿಕರಿಗೆ ಸಂಪೂರ್ಣ ಉಚಿತವಾಗಿ ದಂತಚಿಕಿತ್ಸೆ ಸೇವಾಸೌಲಭ್ಯವನ್ನು ನೀಡಲು ಆಯುಕ್ತರು, ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆ ಹಾಗೂ ದಯಾನಂದಸಾಗರ ದಂತ ಮಹಾ ವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆಯವರು, ಇವರ ಜಂಟಿ ಸಹಭಾಗಿತ್ವದಲ್ಲಿ ಸಾರ್ವಜನಿಕರಿಗೆ ಉತ್ತಮ ಸೇವೆ ನೀಡಲು ಎರಡು ವರ್ಷದ ಅವಧಿಗೆ ಒಪ್ಪಂದದ ಒಪ್ಪಿಗೆ ಪತ್ರ ಪಡೆಯಲಾಗಿದೆ. "ಆಯುಕ್ತರು, ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆ ಇವರನ್ನು ಮೊದಲನೇ ಪಕ್ಷದಾರರು" ಎಂದು ಕರೆಯಲಾಗಿದೆ. " ಪ್ರಾಂಶುಪಾಲರು, ಹೈಯಾನಿಕಟ್ಟ್ ದಂತ ಮಹಾ ವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆ ರವರನ್ನು ಎರಡನೆಯ ಪಕ್ಷದಾರರು" ಎಂದು ಕರೆಯಲಾಗಿದೆ ಹಾಗೂ ಅದರಂತೆ ಮಾರ್ಚ್ 2019 ರ ಅವಧಿಯವರೆಗೆ ಈ ಒಪ್ಪಂದದ 2 ಪಕ್ಷದಾರರು ಈ ಕೆಳಕಂಡಂತೆ ಸೇವೆಗಳನ್ನು ನೀಡಲು ಒಪ್ಪಿರುತ್ತಾರೆ.

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(ಮೊದಲನೆಯ ಪಕ್ಷದಾರರು)

ಬೃ.ಬೆಂ.ಮ.ಪಾಲಿಕೆಯು, ಮೊದಲನೇ ಪಕ್ಷದಾರರಾಗಿದ್ದು ಈ ಕೆಳಕಂಡಂತೆ ಸೇವೆಗಳನ್ನು ಒದಗಿಸಬೇಕಾಗಿರುತ್ತದೆ:

ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಒಂದು ಉನ್ನತ ದರ್ಜೆಯ ದಂತ ವೈದ್ಯಕೀಯ ಚಿಕಿತ್ಸಾ ಕೇಂದ್ರದಲ್ಲಿ ಸೇವೆಗಳನ್ನು ಮುಂದುವರೆಸಲು ಅವಶ್ಯಕವಾದ ಆಸ್ಪತ್ರೆಯ ಮೊದಲನೆ ಮಹಡಿ ಒಂದು ಕೊಠಡಿ, ವಿದ್ಯುಚ್ಛಕ್ತಿ, ನೀರು ಸರಬರಾಜು ಮತ್ತು ಒಳಚರಂಡಿ ವ್ಯವಸ್ಥೆಯನ್ನು ನಗರ ಪಾಲಿಕೆ ವತಿಯಿಂದ ಒದಗಿಸಬೇಕಾಗಿರುತ್ತದೆ.

1.ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಪ್ರಸ್ತುತ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯ ಕಟ್ಟಡದ ಒಂದು ಕೊಠಡಿಯನ್ನು ದಂತ ಚಿಕಿತ್ಸೆ ಕ್ಲಿನಿಕ್ ನಡೆಸಲು ಒದಗಿಸಲಾಗುತ್ತದೆ.

2. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಗೆ ಪಾಲಿಕೆಯ ಖಾಯಂ ಸಿಬ್ಬಂದಿ

ವರ್ಗದ ನಾಲ್ಕನೇ ದರ್ಜೆ ಬಬ್ಬ ನೌಕರರನ್ನು ಸೇವೆಗಾಗಿ ಒದಗಿಸಲಾಗುತ್ತದೆ.

3. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯ ದಂತ ಚಿಕಿತ್ಸೆ ಕ್ಲಿನಿಕ್ ಕೊಠಡಿಗೆ ವಿದ್ಯುಚ್ಛಕ್ತಿ. ನೀರು ಸರಬರಾಜು ಮತ್ತು ಒಳಚರಂಡಿ ವ್ಯವಸ್ಥೆ ಒದಗಿಸಲಾಗುತ್ತದೆ.

4. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯ ದಂತಚಿಕಿತ್ಸಾಲಯದಲ್ಲಿ ಒದಗಿಸುವ ಎಲ್ಲಾ ಸೇವೆಗಳು ಉಚಿತವಾಗಿರುತ್ತವೆ.

5. ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯ ಸೇವಾ ಶುಲ್ಕದ ಹಣವನ್ನು ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಉಪಯೋಗಿಸಲು ಬರುವುದಿಲ್ಲ. ಅದಕ್ಕಾಗಿ ಪ್ರತ್ಯೇಕ ಮಾರ್ಗಸೂಚಿಗಳನ್ನು ನೀಡಲಾಗಿರುತ್ತದೆ.

(ಎರಡನೆಯ ಪಕ್ಷದಾರರು)

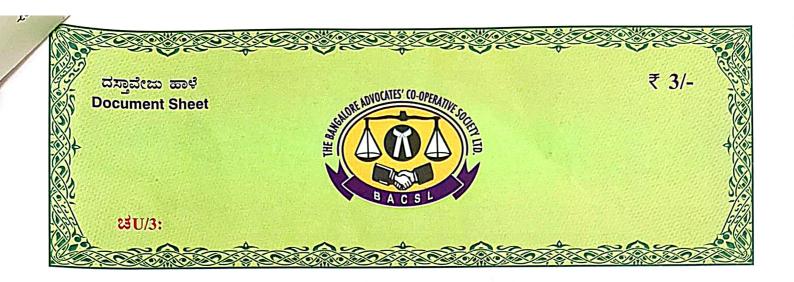
ಈ ಒಪ್ಪಂದದ ಎರಡನೇ ಪಕ್ಷದಾರರಾದ ದಯಾನಂದಸಾಗರ ದಂತಮಹಾವಿದ್ಯಾಲಯ ಸಂಸ್ಥೆಯು ಈ ಕೆಳಕಂಡಂತೆ ಸೇವೆಗಳನ್ನು ಒದಗಿಸಲು ಒಪ್ಪಿರುತ್ತಾರೆ. (ಮಾರ್ಚ್ 2019 ರ ಅವಧಿಯವರೆಗೆ)

- 1.ಈ ಒಡಬಂಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಪ್ರಸ್ತುತ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಗೆ ದಂತ ಚಿಕಿತ್ಸೆಗಾಗಿ ಬರುವ ಸಾರ್ವಜನಿಕರಿಗೆ ಸಂಪೂರ್ಣ ಉಚಿತವಾಗಿ ಸೇವೆ ಒದಗಿಸಲು ಕನಿಷ್ಠ 3 ವರ್ಷಗಳ ಅನುಭವವುಳ್ಳ ನುರಿತ ದಂತ ವೈದ್ಯರು ಹಾಗೂ ಸಹಾಯಕ ದಂತ ವೈದ್ಯರ ಸೇವೆಯನ್ನು ಉಚಿತವಾಗಿ ಒದಗಿಸಲಾಗುತ್ತದೆ.
- 2. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಗೆ ಡೆಂಟಲ್ ಚಿಕಿತ್ಸೆಗಾಗಿ ಬೇಕಾಗುವ ಆಕ್ಸೆಸರಿಸ್ ಹಾಗೂ ಇತರೇ ಪ್ರಮುಖ ಸಲಕರಣೆಗಳನ್ನು ಉಚಿತವಾಗಿ ಒದಗಿಸಲಾಗುತ್ತದೆ.
- 3. ಹಲ್ಲುಗಳನ್ನು ಲೋಕಲ್ ಅನೆಸ್ತೇಶಿಯಾದಲ್ಲಿ ತೆಗೆಯುವುದು.
- 4. ಹುಳುಕು ಹಲ್ಲುಗಳ ರಂದ್ರಗಳನ್ನು ಮುಚ್ಚಲು ಸಿಲ್ವರ್ ಅಮಾಲ್ಗಮ್, ಜಿಂಕ್ ಆಕ್ಸೈಡ್ ಮತ್ತು ಗ್ಲಾಸ್ಲರ್ಲೀನೋಮಾರ್ನಲ್ಲಿ ತುಂಬುವುದು.

5. RPD (Removable Partial Denture)

- 6. ರೂಟ್ ಕೆನಾಲ್ ಟ್ರೀಟ್ ಮೆಂಟ್ ಹಾಗೂ ಇತರೇ ಚಿಕಿತ್ಸೆಗಳನ್ನು ದಯಾನಂದಸಾಗರ ಮಹಾ ವಿದ್ಯಾಲಯದಲ್ಲಿ 25% ರಿಯಾಯಿತಿಯಲ್ಲಿ ಒದಗಿಸಲಾಗುವುದು.
- 8. ಮಾರ್ಚ್ 2019ರ ಅವಧಿಗೆ, ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯ ಈ ಉಚಿತ ದಂತ ಚಿಕಿತ್ಸಾಲಯದಲ್ಲಿ ಸೇವೆ ಪಡೆಯುವ ಸಾರ್ವಜನಿಕರಿಗೆ ಉಚಿತವಾಗಿ ಔಷಧಿಗಳನ್ನು ವಿತರಿಸುವುದರ ಜೊತೆಗೆ ಚಿಕಿತ್ಸಾಲಯಕ್ಕೆ ಅವಶ್ಯವಿರುವ ಸಾಧನ ಸಾಮಗ್ರಿಗಳನ್ನು ಉಚಿತವಾಗಿ "ದಯಾನಂದಸಾಗರ ದಂತಮಹಾವಿದ್ಯಾಲಯ" ಸಂಸ್ಥೆಯ ವತಿಯಿಂದಲೇ ಒದಗಿಸಲಾಗುತ್ತದೆ.

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ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯ ಆರೋಗ್ಯ ವೈದ್ಯಕೀಯ ಇಲಾಖೆ ವ್ಯಾಪ್ತಿಯ ಎನ್.ಆರ್.ಕಾಲೋನಿ ಹೆರಿಗೆ ಆಸ್ಪತ್ರೆಯ ಮೊದಲನೆ ಮಹಡಿಯ ಒಂದು ಕೊಠಡಿಯಲ್ಲಿ ಡೆಂಟಲ್ ಕ್ಲಿನಿಕ್ನನ್ನು ಈ ಪ್ರದೇಶದ ಸಾರ್ವಜನಿಕರಿಗಾಗಿ ಸೇವೆಯನ್ನು ನೀಡುವ ಸಂಬಂಧ ಖಾಸಗಿ ಸಂಸ್ಥೆಯಾದ "ಪ್ರಾಂಶುಪಾಲರು, ದಯಾನಂದಸಾಗರ ದಂತ ಮಹಾ ವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆಯವರು" ರವರು 01/03/2017 ರಿಂದ 31/03/2019 ರ ಅವಧಿಯವರೆಗೆ ಸೇವೆಗಳನ್ನು ನೀಡಲು ಒಪ್ಪಿಗೆ ನೀಡಿದ್ದು, ಈ ಸಂಸ್ಥೆಯೊಂದ್ರಿಗ್ಗೆ ಒಡಂಬಡಿಕೆಯನ್ನು ಪಾಲಿಕೆಯು ರೂ.200 ಮೌಲ್ಯದ ಕರಾರು ಪತ್ರದಲ್ಲಿ ಮಾಡಿಕೊಳ್ಳಬೇಕಾಗುತ್ತದೆ. ಯಾವುದೇ ಸಮಯದಲ್ಲಿ ಸದರಿ ಒಡಂಬಡಿಕೆಯನ್ನು ರದ್ದುಪಡಿಸುವ ಅಧಿಕಾರವನ್ನು ಬಿಬಿಎಂಪಿ ಕಾಯ್ದಿರಿಸಿಕೊಳ್ಳಲಾಗುತ್ತದೆ ಎಂಬ ಸಾರ್ವಜನಿಕ ಆರೋಗ್ಯ ಸ್ಥಾಯಿ ಸಮಿತಿಯ ನಿರ್ಣಯದಂತೆ ಷರತ್ತನ್ನು ಮುಂದುವರೆಸಲಾಗಿದೆ.

ಈ ಒಡಂಬಡಿಕೆಯು ಮಾರ್ಚ್ 2019 ರ ಅವಧಿಯವರೆಗೆ ಸೀಮಿತವಾಗಿರುತ್ತದೆ.

ಮೊದಲನೆಯ ಪಕ್ಷದಾರರು ಹಾಗೂ ಎರಡನೆಯ ಪಕ್ಷದಾರರು ಈ ಕೆಳಗೆ ನಮೂದಿಸಿರುವ ಸಾಕ್ಷಿಗಳ ಸಮ್ಮುಖದಲ್ಲಿ ಒಪ್ಪಿ ರುಜು ಮಾಡಿರುತ್ತಾರೆ.

ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆ (ಮೊದಲನೆಯ ಪಕ್ಷದಾರರು)

ದಯಾನಂದ ಸಾಗರ ದಂತ ಮಹಾ ವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆಯವರು (ಎರಡನೆಯ ಪಕ್ಷದಾರರು)

PRINCIPAL

ಸಾಕ್ಷಿಗಳು:

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout

Dr. NITHIN N. BHASKA Bangalore - 560 078.

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



Campus - 1, Kumaraswamy Layout, Bangalore 560 078, Karnataka Website: www.dscds.edu.in/Tel: 080-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

For knowledge exchange and research in bioengineering.

BETWEEN

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BANGALORE AND

DAYANANDA SAGAR COLLEGE OF ENGINEERING, BANGALORE

Prof. Dr. Hemanth M MDS, Ph.D Principal Dayananda Sagar College of Dental Sciences, Bangalore

Prof.C.P.S PRAKASH.M E,Ph.D

Principal Dayananda Sagar College of Engineering, K.S.Layout, Bangalore

As on 18/05/2018

Principal@dscds.edu.in Website: www.dscds.edu.in

Introduction and Background:

Dayananda Sagar College of Engineering is approved by All India Council for Technical Education (AICTE), Govt. of India and affiliated to Visvesvaraya Technological University. It has widest choice of engineering branches having 18 Under Graduate courses & 13 Post Graduate courses. The Institute is spread over 23 acres of land with large infrastructure supported by laboratories with state-of-the-art, Equipment & Machines. The College has good faculty strength with highest professional integrity and committed to the academics and research.

The Dayananda Sagar College of Dental Sciences is a part of the Dayananda Sagar Institutions located at Campus - 1, Kumaraswamy Layout Bangalore was begun in 1991 as an Institution that caters to all the Oral Health Care needs of patients and provides training to Under Graduate, Post-Graduate and Ph. D students and functions under the aegis of the prestigious Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka. There are 9 sub-specialties of Dentistry out of which Post Graduation is being held in 7 specialities.

Now, in accordance to the mutual desire to promote and develop activities between two Institutions, namely Dayananda Sagar college of Engineering and Dayananda Sagar College of Dental Sciences and Hospital,

we agree to the following statement of intent on skill /simulation based educational training programme for Metallurgy and materials in Dentistry, Physical and Mechanical Properties of metals, Biomechanics in orthodontics and recent advances in Dentistry, support training for the undergraduate/, postgraduate students. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

Physical and Mechanical Properties of metals involves properties of metals, tarnish and corrosion, Stress, Strain demonstration and elastic demonstration

Biomechanics aspects includes Center of resistance and center of rotation with mulligans common sense mechanics

Recent advances in dentistry includes application of FEM,CAD-CAM technology, medical imaging and Robotics.

The two said institutions agree to the following general areas of interest and cooperation: Sharing of Intellectual expertise for skill based / simulation oriented training of under Graduate / postgraduate Students, Teaching staff.

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Sciences
Cananda Sagar College of Bendal Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 18th May 2018 and will stand effective from this date onwards.

Prof. Dr. Hemanth M M.D.S, Ph.D

Principal

Dayananda Sagar College of Dental Sciences,

Bengaluru

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078. Prof. Dr CPS Prakash, M.E, Ph.D

Principal

Dayananda Sagar College of Engineering

Bengaluru

Principal

Dayananda Sagar College of Engineering

Kumaraswamy Layout, Bangalore -560 111



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DEPARTMENT OF PUBLIC HEALTH DENTISTRY

Article 12 Bond

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KARNATAKA VIDHYARTHI KOOTA

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Memorandum of Understanding

This Memorandum of understanding is between Department of Public Health Dentistry, Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumarswamy Layout, Bangalore 560078 and Karnataka Vidhyarthi Koota, (KVK), No 646, 18th main, Padmanabhnagar, Bangalore-560070.

Statutory Alert:

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- 2. The onus of checking the legitimacy is on the users of the certificate.
- 3. In case of any discrepancy please inform the Competent Authority.

After the mutual discussion, an understanding is reached between the afore mentioned two parties (organizations) with respect to catering of Danta Bhaghya Scheme introduced by Department of Health and Family Welfare under the purview of NHM, Government of Karnataka

- 1. Dayananda Sagar College of Dental Sciences intends to provide complete dentures and partial dentures for eligible people who have lost either all their teeth or some of their teeth. This would be done under the Danta Bhaghya Scheme, introduced on 8th July 2015 by the Government of Karnataka. The eligible person to receive the benefit is the one who is aged 45 years and above residing in Karnataka and has a BPL card issued by the Government authority.
- 2. In this connection KVK, has volunteered to collaborate with Dayananda Sagar College of Dental Sciences and provide their services as well the expertise. KVK would organise the camps and engage in mobilising the people to seek oral health screening and consultation from the doctors of Dayananda Sagar College of Dental Sciences at free of cost.
- 3. Based on the aforementioned criteria (Point No 1), eligible candidates would be identified and selected for denture fabrication by the participating doctors of Dayananda Sagar College of Dental Sciences.
- 4. After selecting eligible persons, dentures are fabricated and provided free of cost to them under the Dantha Bhaghya Scheme.
- 5. The procedure of denture fabrication includes five sittings, a part of the procedure would be done in the field at the site of screening and a part of the treatment would be done in the department of Prosthodontics, Dayananda Sagar College of Dental Sciences, Kumarswamy Layout.
- 6. However the doctors would try to provide all the services related to denture fabrication at the camp site by giving repeated visits whenever it is convenient and possible.
- 7. KVK foundation would create awareness by distributing IEC material, engage in campaigning and mobilise the people to participate in the program. The IEC material would be provided by the department of Prosthodontics, Dayananda Sagar College of Dental Sciences.
- 8. KVK foundation would plan and organize camps, and collaborate with the Department of Public Health dentistry, Dayananda Sagar College of Dental Sciences in conducting all the activities.

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9. Access to eligible recipients under the Danta Bhagya scheme would be gained through school screening programs. The selected schools are invited to allow free oral health screening of the respective school children and their parents/wards.

This Memorandum of Understanding is signed by representatives of Dayananda Sagar college of Dental Sciences and Karnataka Vidhyarthi Koota.

Dr. Hemanth M. MDS, Ph.D.

Principal,

Dayananda Sagar College of Dental Sciences,

Bangalore

B. V. 17 30/7/18

Dr. Divya Venkatesha. B.E, M.Sc, Ph.D.

Advisor,

Karnataka Vidhyarthi Koota,

Padmanabhnagar,

Bangalore

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ಶ್ರೀ ಬನಶಂಕಲ ದೇವಸ್ಥಾನ

ಎಸ್. ಕರಿಯಪ್ಪ ರಸ್ತೆ, ಬೆಂಗಳೂರು - 560 070.

e-mail: sribanashankaritemple@gmail.com

ಣ.ಎಸ್.ಣ.7/ಸಿಆರ್.ಜನರಲ್ /2017**-**2018

ದಿನಾಂಕ: 13-03-2018

ಗೆ,

1) Principal
Dayananda Saga College Dental Sciences
Shavige malleshwara hills,
Kumaraswamy Layout,
Bangalore-78

- Udayachandra B.P Sardar Vallabhai Patel Society # 6B, Near HDFC Bank, Karthik Nagar, Bangalore-37
- K. Prashanth Kumar Raibagi Naada World Welfare Trust (R) # 13, B Street, Sirur Park Road, Sheshadripuram, Bangalore-20

ಮಾನ್ಯರೇ,

ವಿಷಯ: ಬೆಂಗಳೂರು ನಗರ ಎಸ್. ಕಲಿಯಪ್ಪ ರಸ್ತೆಯಲ್ಲರುವ

ಶ್ರೀ ಬನಶಂಕರಿ ದೇವಾಲಯದಲ್ಲ ಆರೋಗ್ಯ ತಪಾಸಣೆ

ಶಿಜರಕ್ಕೆ ಅನುಮತಿ ಕೋಲಿರುವ ಬಗ್ಗೆ.

ಉಲ್ಲೇಖ: ತಮ್ಮ ಮನವಿ ದಿನಾಂಕಗಳು ದಿನಾಂಕ:27-02-2018

ದಿನಾಂಕ: 06-02-2018 ಮತ್ತು ದಿನಾಂಕ:4-1-2018

ವಿಷಯಕ್ಕೆ ಸಂಬಂಧಿಸಿದಂತೆ, ಬೆಂಗಳೂರು ನಗರ ಶ್ರೀ ಬನಶಂಕರಿ ದೇವಾಲಯದಲ್ಲ ಉಚಿತ ಆರೋಗ್ಯ ತಪಾಸಣ ಶಿಜರವನ್ನು ಆಯೋಜಿಸಲು ಉಲ್ಲೇಖತ ಪತ್ರಗಳನ್ವಯ ಕೋಶಿರುವುದಕ್ಕೆ ಸಂಬಂಧಿಸಿದಂತೆ, ದೇವಾಲಯದಲ್ಲ ದಿನಾಂಕ: 3–3–2018 ರಂದು ನಡೆದ ವ್ಯವಸ್ಥಾಪನಾ ಸಮಿತಿ ಸಭೆಯ ನಿರ್ಣಯ ಸಂಖ್ಯೆ: 04 ರಲ್ಲ ಸಂಬಂಧಪಟ್ಟ ಸಂಸ್ಥೆಯವರು ಪ್ರತಿ ತಿಂಗಳಲ್ಲ ಒಂದು ದಿನ ಅಂದರೆ ಪ್ರತಿ ಮಂಗಳವಾರದಂದು ಮಾತ್ರ ಉಚಿತ ಆರೋಗ್ಯ ತಪಾಸಣಾ ಶಿಭರವನ್ನು ಆಯೋಜಿಸಲು ಅನುಮತಿ ನೀಡುವ ಬಗ್ಗೆ ತೀರ್ಮಾನಿಸಲಾಗಿರುತ್ತದೆ.

ಸಭೆಯ ತೀರ್ಮಾನದನ್ವಯ ಎಲ್ಲಾ ೦૩ ಸಂಸ್ಥೆಯವರು ಈ ಕೆಳಗೆ ಸೂಚಿಸಿರುವ ದಿನಗಳಂದು ಕೆಳಕಂಡ ಷರತ್ತುಗಳಗೆ ಬದ್ಧರಾಗಿ ಶಿಣರನ್ನು ಆಯೋಜಿಸಲು ಅನುಮತಿ ನೀಡಿದೆ.

	ದಯಾನಂದ ಸಾಗರ್ ಕಾಲೇಜು	ಪ್ರತಿ	ತಿಂಗಳು 1ನೇ ಮಂಗಳವಾರ	7
2	ಸರದಾರ್ ವಲ್ಲಬಾಯ್ ಪವೇಲ್ ಸೊಸೈೞ	ಪ್ರತಿ	ತಿಂಗಳು 2ನೇ ಮಂಗಳವಾರ	1
3	ನಂದ ವರ್ಲ್ಡ್ ಟ್ರಸ್ಟ್ (ರಿ)		ತಿಂಗಳು 3ನೇ ಮಂಗಳವಾರ	1

ಷರತ್ತುಗಳು

1) ಶಿಜರವನ್ನು ಆಯೋಜಿಸುವ ದಿನದಂದು ದೇವಾಲಯಕ್ಕೆ ಬರುವ ಭಕ್ತಾದಿಗಳಗೆ ಯಾವುದೇ ತೊಂದರೆಯಾಗದಂತೆ ತಪಾಸಣಾ ಕಾರ್ಯವನ್ನು ನಿರ್ವಹಿಸುವುದು.

2) ಶಿಜರ ಆಯೋಜಸುವ ದಿನದಂದು ತಪಾಸಣೆಗೊಳಪಡುವ ಯಾವುದೇ ಭಕ್ತಾದಿಗಳು/ ಸಾರ್ವಜನಿಕರಿಗೆ ಚಿಕಿತ್ಸೆ ಸಮಯದಲ್ಲ ಯಾವುದೇ ತೊಂದರೆಗಳು ಉಂದಾದಲ್ಲ ಅದಕ್ಕೆ ಶಿಜರ

ಆಯೋಜಿಸುವ ಸಂಸ್ಥೆಯವರೇ ಸಂಪೂರ್ಣ ಜವಾಬ್ದಾರರಾಗಿರುತ್ತಾರೆ.

3) ಶಿಜರದ ದಿನಗಳಂದು ದೇವಾಲಯದಲ್ಲ ವಿಶೇಷ ಉತ್ಸವ. ಮಹೋತ್ಸವಗಳು ಜರುಗುವುದಿದ್ದಲ್ಲ ಆಯೋಜಸುವ ಸಂಸ್ಥೆಯವರು ತಮ್ಮ ಶಿೞರವನ್ನು ಮುಂದಿನ ದಿನಾಂಕಕ್ಕೆ ಮುಂದೂಡಿಕೊಳ್ಳುವುದು.

4) ದೇವಾಲಯದ ಕಾರ್ಯನಿರ್ವಾಹಕ ಅಧಿಕಾರಿಗಳು ಸೂಚಿಸುವಂತಹ ಸ್ಥಳದಲ್ಲ ಶಿಣರವನ್ನು

ನಡೆಸತಕ್ಕದ್ದು.

5) ಉಚಿತ ಅರೋಗ್ಯ ತವಾಸಣಾ ಶಿಣರವಾಗಿರುವುದರಿಂದ ಚಿಕಿತ್ಸೆಗಾಗಿ ಬರುವ ಭಕ್ತದಿಗಳಂದ/ ಸಾರ್ವಜನಿಕರಿಂದ ಯಾವುದೇ ಶುಲ್ಕ ವಸೂಅಸತಕ್ಕದ್ದಲ್ಲ.

6) ದೇವಾಲಯದ ಪಾವಿತ್ರತೆಗೆ ಭಂಗ ಉಂಟು ಮಾಡಬಾರದು.

7) ದೇವಾಲಯದ ವ್ಯವಸ್ಥಾಪನಾ ಸಮಿತಿಯಾಗಲೇ ಅಥವಾ ಕಾರ್ಯನಿರ್ವಾಹಕ ಅಧಿಕರಿಗಳಾಗಲೇ ಸಂದರ್ಭಕ್ಕನುಸಾರವಾಗಿ ಶಿಣರವನ್ನು ನಿಲ್ಲಸಲು ಸೂಚಿಸಿದಲ್ಲ ಅದರಂತೆ ಕ್ರಮ ಕೈಗೊಳ್ಳುವುದು.

ಕಾರ್ಯನಿರ್ವಾಹಕ ಅಧಿಕಾರ್ನಿ



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MARIDI BIO INDUSTRIES PVT LTD

Article 12 Bond

AGREEMENT

(Zero)

MARIDI BIO INDUSTRIES PVT LTD

DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES

MARIDI BIO INDUSTRIES PVT LTD

(Twenty only)



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MEMORANDUM OF UNDERSTANDING

Reg.No: 330

M/s. Maridi Bio Industries Pvt Ltd., having its registered office at No .8, SUNAGA ARCADE, 4th Floor, 1st Main, 8th Cross, S.R.nagar, Bangalore-560027, Phone No: 080-41512958/22103270, maridibmw@maridibio.com .and having Its Plant at Sy.No.1/37 & 1/38, 35th Milestone, Gabbadi Kaval, Kanakapura Road, Ramanagar District, here in after referred to as, M/s. Maridi Bio Industries Pvt Ltd. represented by its Authorized Signatory and M/s. DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES - KUMARSWAMY LAYOUT having its

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In case of any discrepancy please inform the Competent Authority

centre at shiavige malleswara hills, kumaraswamy layout, bangalore-78. Mob: 9741117159, Email; principal@dscds.edu.in . Here in after referred to as M/s. DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES - KUMARSWAMY LAYOUT is hereby agreed and come to the Memorandum of Understanding on this 22nd Day of August month year 2022 as detailed below:

- a. M/s. **Maridi Bio Industries Pvt Ltd.** with consent from Karnataka State Pollution Control Board is having a common treatment facility for Managing Bio-Medical Waste in Ramanagaram district at 36th Mile Stone, Kanakapura Road. The facility is having a state of art Auto clave system along with the shredder and Incinerator.
- b. M/s. DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT gives its bio-medical waste properly packed in color-coded bags as per pollution control Board regulations for treatment and final disposal to M/s. Maridi Bio Industries Pvt Ltd. The waste should be given at one single point by the M/s. DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT at given time of M/s. Maridi Bio Industries Pvt Ltd. Vehicle.
- c. M/s. Maridi Bio Industries Pvt Ltd. will charge a price of Rs.10000/Per Month (Rupees ten thousand only); (Up to 100 kgs per month, if it
 exceeds Rs.65/- per Kg will be charged extra),(GST Extra as applicable)
 (Excluding Poly bags) transportation, treatment and final disposal of
 biomedical waste. This Price will be fixed for a period of one (1) year
 from date of this agreement and thereafter there will be 12% (Twelve
 Percent) escalations in the price for every one-year on existing rate.
- d. M/s. DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT will not enter into any agreement with any other party or organization for the waste treatment and disposal unless cancel of this agreement.
- e. M/s DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT is assuring that payment should be made through Account Payee cheque In favour of M/s. Maridi Bio Industries Pvt Ltd. on or before 5th of every month.
- f. M/s. **Maridi Bio Industries Pvt Ltd**. is not responsible for any cash payments and also we will collect cheque bounce charges.
- g. In case of non-receipt of payment on the agreed date from M/s. DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT M/s. Maridi Bio Industries Pvt Ltd., will stop the collection of waste immediately with intimation to Karnataka State Pollution Control Board. The delayed payments will be collected with an interest of 18% per annum.



- h. M/s. Maridi Bio Industries Pvt Ltd. will collect bio medical Waste daily (Except Sunday) and treat the waste as per the regulations. M/s. Maridi Bio Industries Pvt Ltd. will not collect any General waste that is not segregated or not properly packed M/s. Maridi Bio Industries Pvt Ltd. will not collect general garbage.
- i. M/s. Maridi Bio Industries Pvt Ltd. will issue a proof of waste collection from M/s. DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT as per your declarations in the application form. This will help the individual Clinic for getting compliance with the State Pollution Board. The individual Clinic/Nursing home can take their Authorization from the pollution control board by informing the board that M/s Maridi Bio Industries Pvt Ltd. treats their waste (The same has to be mentioned in the Authorization Form.
- j. In case DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT find any irregularities in collection of waste, they can send a notice in writing to M/s. Maridi Bio Industries Pvt Ltd. for immediate action.
- k. M/s Maridi Bio Industries Pvt Ltd. will maintain their plant in good running condition all the time and ensure continuity of service as per agreement with your DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT.
- 1. This Memorandum of understanding is entered into on the express understanding that M/s **Maridi Bio Industries Pvt Ltd**. will maintain and run the facilities and collect transport and treat the waste at their plant strictly in accordance with the consent of the Karnataka State Pollution Control Board and it shall be the responsibility to obtain the consent and keep the same always current.
- m. In case of violation of any of the agreed condition of the MOU by either side. Issue of notice may terminate this MOU three months in advance by either party for terminating their respective obligations.
- n. All disputes to this understanding are subject to the Jurisdiction of the court in Bangalore only.
- o. MOU Renewal Charges of Rs.200 Extra for next Year.
- p. This Agreement is effective from 01.08.2022 TO 31.07.2023.

q. For M/s. Maridi Bio Industries Pvt Ltd

For M/s DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES -KUMARSWAMY LAYOUT

Authorized Signatory

Authorized Signatory PRINCIPAL

Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.



DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT 330



Maridi Bio Industries Pvt Ltd

No.8, Sunaga Arcade, 4th Floor 1st Main, 8th Cross, Sampangiram Nagar Maridi-Blr 560027

080-41512958 maridibmw@maridibio.com



DAYANANDA SAGAR COLLAGE OF DENTAL SCIENCES KUMARSWAMY LAYOUT 330



Maridi Bio Industries Pvt Ltd

No.8, Sunaga Arcade, 4th Floor 1st Main, 8th Cross, Sampangiram Nagar Maridi-Blr 560027

080-41512958 maridibmw@maridibio.com

080-41512958 maridibmw@maridibio.com

No.8, Sunaga Arcade, 4th Floor 1st Main, 8th Cross, Sampangiram Nagar Maridi-Blr 560027

Maridi Bio Industries Pvt Ltd



COLLAGE OF DENTAL SCIENCES KUMARSWAMY DAYOUT 330



080-41512958 maridibine@waridibio.com

No.8, Sunaga Arcade, 4th Floor 1st Main, 8th Cross, Sampangiram Nagar Maridi-Blr 560027

Maridi Bio Industries Pvt Ltd



DAYANANDA SAGAR SCIENCES KUMARSWAMY LAYOUT





DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore) (Recognised by Dental Council of India, New Delhi)

ISO 9001: 2008 Certified Institution

MEMORANDUM OF UNDERSTANDING (MOU)

This Memorandum of Understanding is between Dayananda Sagar College of Dental Sciences, Bengaluru and Central Research Laboratory, Maratha Mandals Nathajirao G.Halgekar Institute of Dental Sciences and Research Centre, Belagavi.

NOW THE MEMORANDUM OF UNDERSTANDING WITNESSETH AS UNDER:

- 1. A joint committee comprising of designated staff members from both colleges explores newer opportunities for further research in the field of dental sciences and associated medical subjects. The joint committee also decides regarding the streaming of the funds for the research projects with the consent of both colleges.
- 2. Dayananda Sagar College of Dental Sciences, Bengaluru agrees to provide access to Maratha Mandal's Nathajirao G. Halgekar Institute of Dental Sciences & Research Centre, Belagavi for the use of required samples with all relevant details.
- 3. Maratha Mandal's Nathajirao G. Halgekar Institute of Dental Sciences & Research Centre, Belagavi will use all the samples and relevant information provided by Dayananda Sagar College of Dental Sciences for conducting research only in the Central Research Laboratory.
- 4. The information about the samples and the results are the property of both the institutions.
- 5. The information about the samples and the results are not allowed to be transferred to any other institution.
- 6. All credentials arising out of the research work undertaken under this MOU is to be appropriately shared by both institutes as decided by the joint committee.
- 7. The expenditure incurred for all research projects will be borne by the Dayananda Sagar College of Dental Sciences. Maratha Mandal's Nathajirao G. Halgekar Institute of Dental Sciences & Research Centre, Belagavi should allow the students / staff access to the laboratory only with the permission letter issued by Principal.
- 8. Both the institutes can take projects individually without consent of other institution.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654

Website: www.dayanandasagar.edu

- 9. Dayananda Sagar College of Dental Sciences is permitted to access all the details of the progress of the study, data and results of the joint studies or projects undertaken under this venture.
- 10. Maratha Mandal's Nathajirao G. Halgekar Institute of Dental Sciences & Research Centre, Belagavi shall submit a progress report at periodical intervals of three months to Dayananda Sagar College of Dental Sciences, Bengaluru
- 11. Both institutes shall put all their efforts into inviting grants for various research projects from funding agencies.

12. The MOU is effective from 05-02-2018 till 04-02-2023.

PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumarswamy layout, Bengalure-78

PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 588 078. PRINCIPAL

Maratha Mandal's Nathajirao G. Halgekar Institute of Dental Sciences & Research Centre, Belagavi

Dr. Ramakant Nayak
Principal
M.M's. N.G. Halgekar Institute of Dental Sciences
& Research Centre, Belagavi-590010.



ORAL-3D HEALTH CARE PVT LTD



MALLIGE, No. 340, GROUND FLOOR, 5TH MAIN, VINAYAKA LAYOUT, 9TH BLOCK, NAGARABHAVI 2ND STAGE, BANGALORE -72

PH: 08023397595, 9986006648, CIN: U85200KA2019PTC127004

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (herein after called "MOU" is entered into on this date 03-01-2018 by and between

Dayananda Sagar College of Dental Sciences, Bangalore, the First Party represented by its Principal, (here in after referred to as " First Party)

AND

Oral-D Pvt Ltd, Bangalore. the Second Party represented by its Director, (here in after referred to as "Second Party)

This memorandum of understanding is intended to promote cooperation between the Dayananda Sagar College of Dental Sciences and Oral-D Pvt Ltd, Bangalore recognizing the benefits to their respective institutes from the establishment of institutional links, hereby agree to enter into this agreement for the following purposes.

Purpose

The purpose of this agreement is to develop a scope for future research programs, establish the guidelines for collaboration the two institutions and to cooperate in their mutual interest for a range of educational activities.

Agreement:

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore 560 078.

Both parties hereby agree to work together to:

- 1. Utilize advanced imaging modalities for research purposes.
- 2. Persue knowledge and distant education facilities on 3D printing, digital impressions and CAD CAM facilities.
- 3. Conduct Joint research and development project
- 4. Provide opportunities for Professors and researchers to give lectures
- Provide employment opportunities where possible to the post graduate students passing out from the Department of Oral Medicine and Radiology, Dayananda Sagar College of Dental Sciences through campus placements

Meetings & Reporting:

To accomplish these objectives , partners will meet at least once a year for the purpose of program planning and monitoring and evaluating outcomes. Decisions at the meeting will be decided by mutual consensus.

Funding and financial responsibilities:

Nothing in this MOU shall be deemed to be a commitment or obligation of funds from either Dayananda Sagar College of Dental Sciences, Bangalore or Oral D Pvt Ltd, Bangalore or any of their various components. The entities acknowledge that all or any financial arrangements must be negotiated and will depend upon the availability of funds. Each or the participating institutions shall be fully responsible financially for the activities carried out under its direction or by its staff, except as otherwise agreed by the parties

Intellectual Property

Intellectual property rights carried out at each partner institutions shall normally vest with the respective institutions

Duration:

Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078

This MOU is at will and be modified with the mutual consent of the authorized individuals of Dayananda Sagar College of Dental Sciences, Bangalore and Oral D Pvt Ltd, Bangalore. Once signed by authorized officials of both parties, this MOU will be effective for a period of 5 years.

Termination of Agreement

This agreement may, at any time during its period of validity be terminated by either party upon prior notice to the other in writing provide the termination shall not affect the completion of any program underway at the time of termination notice being given.

In agreement with the above terms of participation, the authorized representatives of Dayananda Sagar College of Dental Sciences, Bangalore and Oral D Pvt Ltd, Bangalore hereby affix signatures.

For: Dayananda Sagar College of

Dental Sciences, Bangalore

For: Oral D 3D Digital Dental

Diagnostics, Bangalore

Dr. Hemanth M

Principal PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout,

Bangalore - 560 078.

Director

हराहरू इस्तरहरू

ಆರೋಗ್ಯ ಮತ್ತು ಕುಟುಂಬ ಕಲ್ಯಾಣ ಸೇವೆಗಳು, ಸಾರ್ವಜನಿಕ ಆಸ್ಪತ್ರೆ, ಕನಕಪುರ, ರಾಮನಗರ ಜಿಲ್ಲೆ

Email:-nophblordiv@gmail.com

Ph No:-9620162467

NO:-NOHP/BNG/13/20219-20

DATE:-08/03/2019

MEMORANDUM OF UNDERSTANDING (MOU)

This DEED OF AGREEMENT is made on 8th of March, 2019 BETWEEN THE GOVERNMENT GENERAL HOSPITAL, KANAKAPURA TALUK, RAMANAGAR DISTRICT (herein after referred as 'FIRST PARTY')

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, Kumaraswamy Layout, Bengaluru, (herein after referred as 'SECOND PARTY')

Now ,in accordance to the mutual desire to promote and develop activities between two centres, namely Government General Hospital, Kanankapura and the Dayananda Sagar College of Dental Sciences and Hospital, we agree to the following statement of intent on providing treatment for the Oral Health care for the out patients. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

The two said parties agree to the following general areas of interest and cooperation in the interest of patient care.

- a. First party to provide the space and basic amenities at the Centre to provide treatment for the patients.
- b. Treatment would be provided to the patients after receiving their consent.
- c. Any complaints regarding this to be brought into notice of the concerned authority of both the parties.

ಡಾ. ಶರತ್ ಚಂದ್ರವಿ BD8,MPH ವಿಧಾಗೀಯ ನೋಡಲ್ ಅಧಿಕಾರಿಗಳು ರಾಷ್ಟ್ರೀಯ ವಾಯಿ ಆರೋಗ್ಯ ಕಾರ್ಯಕ್ರಮ (NOHP) ವೆಂಗಳೂರು ವಿಭಾಗ. Dr. Hemanth .M MDS., Ph.D.
PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

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Email:-nophblordiv@gmail.com

Ph No:-9620162467

NO:-NOHP/BNG/13/20219-20

DATE:-08/03/2019

Scope of Association:

- 1. To benefit the patients since the treatment is provided at free of cost by the Second party.
- 2. Screening and treatment of oral health related problems.
- 3. Huge scope for preventive services and interventions like oral cancer screening, tobacco cessation services etc and also for identification and referral of cleft lip and palate cases.
- 4. It will be of academic interest to the undergraduate and postgraduate students in enhancing their skills.
- 5. Patients who require advanced oral health care treatment would be referred to Dayananda Sagar College of Dental Sciences, Bengaluru. The treatment would be provided at free of cost.

Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 08/03/2019 and will stand effective from this date onwards.

Dr. Sharat Chandra. B BDS, MPH

Divisional Nodal Officer,

National Oral Health Program,

Bengaluru Division

ಡಾ. ಶರತ್ ಚಂದ್ರ್ಯಬಿ BD8,MPH ವಿಧಾಗೀಯ ನೋಡಲ್ ಆಧಿಕಾರಿಗಳು ರಾಷ್ಟ್ರೀಯ ವಾಯ ಆರೋಗ್ಯ ಕಾರ್ಯಕ್ರಮ (NOHF) Dr. Hemanth M MDS, PhD

Principal,

Dayananda Sagar College of Dental Sciences

Bengaluru PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

हर्द्रा : +91 80 2287 4039

+91 80 2235 4085

ಪ್ರಾಕ್ಸ್: +9180 2228 5591

ಇ-ಮೇಲ್ : com-hfws@karnataka.gov.in

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ಸಂಪ್ರ:: DD/ಡಂತ/OFFICE/01/2017-18/No-2020-21/05

DETGO #: 24.08.2020

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ಮಾಡಿಕೊಂಡಿರುವ

ಒಡಂಬಡಿಕೆಯನ್ನು ಮುಂದುವರೆಸುವ ಇನ್ನೆ.

ಉಲ್ಲೇವಿ: ಆಕುಕ 114 ಸಚಿಎಂ 2014, ದಿನಾಂಕ:30.03.2015.

ರಾಜ್ಯದಲ್ಲಿ ದಂತ ಮತ್ತು ಬಾಯಿಯ ಅರೋಗ್ಯ ರಕ್ಷಣೆಗೆ ರಾಜ್ಯ ಸರ್ಕಾರವು "ಒರಲ್ ಜೆಲ್ಡ್ ಬಾಲಿಸಿ"ಯನ್ನು 2014-15ನೇ ಸಾಲಿನಲ್ಲಿ ಜಾರಿಗೆ ತಂದಿದ್ದು. ಈ ಯೋಜನೆಯ ಒಂದು ಭಾಗವಾಗಿ ರಾಜ್ಯದಲ್ಲಿರುವ, ಜಿ.ಜಿ.ಎಲ್ ವರ್ಗಕ್ಕೆ ಸೇರಿದ 45 ವರ್ಷ ಮೇಲ್ಪಟ್ಟ ನಾಗರಿಕರಿಗೆ ಸಂಶೋಣ ದಂತ ಪಂಕ್ತಿ ಮತ್ತು 3 ಅಥವಾ ಅದಕ್ಕಿಂತ ಹೆಚ್ಚು ಹಲ್ಲುಗಳನ್ನು ಕಳೆದುಕೊಂಡವರಿಗೆ ಉಚಿತವಾಗಿ ಕೃತಕ ದಂತಪಂಕ್ತಿ ನೀಡಲು ಕರ್ನಾಟಕ ಸರ್ಕಾರದ ಆರೋಗ್ಯ ಇಲಾಖೆ ಮತ್ತು ರಾಜ್ಯದಲ್ಲಿರುವ 45 ದಂತ ವೈದ್ಯ (43 ಖಾಸಗಿ ಮತ್ತು 2 ಸರ್ಕಾರ) ಕಾಲೇಜುಗಳ ಸಹ ಭಾಗಿತ್ವದಲ್ಲಿ ರಾಜ್ಯ ಸರ್ಕಾರವು "ದಂತ ಭಾಗ್ಯ" ಯೋಜನೆಯನ್ನು ತಾರಿಗೆ ತಂದಿದೆ.

ಮೇಲ್ಕಂಡ ಅಲ್ಲೇಖದನ್ನಯ ರಂತ ಭಾಗ್ಯ ಯೋಜನೆಯಡಿಯಲ್ಲಿ 45 ದಂತ ಮಹಾ ವಿದ್ಯಾಲಯಗಳೊಂದಿಗೆ (43 ಖಾಸಗಿ ಮತ್ತು 2 ಸರ್ಕಾರಿ) 5 ವರ್ಷಗಳಿಗೆ ಒಡಂಬಡಿಕೆಯನ್ನು ಮಾಡಿಕೊಂಡು ಯೋಜನೆಯನ್ನು ನಡೆಸಲಾಗುತ್ತಿದೆ. ರಂತ ಭಾಗ್ಯ ಯೋಜನೆಯಲ್ಲಿ ಈಗಾಗಲೇ ಭಾಗಿಯಾಗಿರುವ ದಂತ ಮಹಾ ವಿದ್ಯಾಲಯಗಳು 5 ವರ್ಷ ಪೂರ್ಣಗೊಂಡಲ್ಲಿ, ಸದರಿ ದಂತ ಮಹಾ ವಿದ್ಯಾಲಯಗಳು ಮುಂದಿನ ಆದೇಶದವರೆಗೆ ಯೋಜನೆಯಲ್ಲಿ ಮುಂದುವರೆಸಬೇಕಾಗಿ ಈ ಮೂಲಕ ಸೂಚಿಸಿದೆ.

essores.

ಅರೋಗ್ಯ ಮತ್ತು ಕುಟುಂಬ ಕಲ್ಯಾಣ ಸೇವೆಗಳು.

ಪ್ರತಿಯನ್ನು:

- l. ಅಭಿಯಾನ ನಿರ್ದೇಶಕರು, ರಾಷ್ಟ್ರೀಯ ಆರೋಗ್ಯ ಅಭಿಯಾನ.
- 2. ನಿರ್ದೇಶಕರು, ಆರೋಗ್ಯ ಮತ್ತು ಕುಟುರಬ ಕಲ್ಯಾಣ ಸೇವೆಗಳು.
- ಸಂಬಂಧಪಟ್ಟ ರಂತ ಮಹಾ ವಿದ್ಯಾಲಯಗಳ ಪ್ರಾಂಕುಪಾಲರು/ಜೀವ್,
- 4. ವಿಧಾಗೀಯ ಜಂಟಿ ನಿರ್ದೇಶಕರು, ಬೆಂಗಳೂರು, ಮೈಸೂರು, ಬೆಳಗಾಂ ಮತ್ತು ಕಲಲುರುಗಿ.
- ಎಲ್ಲ ಜಿಲ್ಲ ಅರೋಗ್ಯ ಮತ್ತು ಕುಟುಂಬ ಕಲ್ಯಾಣ ಅಧಿಕಾರಿಗಳು/ಜಿಲ್ಲಾ ಶಸ್ತ್ರ ಚಿಕಿತ್ಸಕರು.
- ಎನ್ಓಡೆಚ್ ಪಿ ವಿಧಾಗೀಯ ನೋಡಲ್ ಅಧಿಕಾರಿಗಳು ಹಾಗೂ ಜಿಲ್ಲಾ ಎನ್ಓಡೆಚ್ ಪಿ ಕಾರ್ಯಕ್ರಮಾಧಿಕಾರಿಗಳು.
- 7. ಕಥೇರಿ ಪತ್ರಿ.

3ನೇ ಮಹಡಿ, ಐಪಿಪಿ ಕಟ್ಟಡ, ಆನಂದ್ ರಾವ್ ವೃತ್ತ, ಬೆಂಗಳೂರು = 560 009

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Payananda Sagar College of Bental Science
Kumaraswamy Layout,

Bangalore - 560 078.



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COMMISSIONER HEALTH AND FAMILY WELFARE BERVICES

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DAYANANDA ÇAGAR COLLEGE OF DENTAL SCIENCES

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MEMORANDUM OF UNDERSTANDING

This Memorandum of Linderstanding made on the 24th day of February 2021 by and

BETWEEN: Commissioner, Health and Family Welfare Services, Government of Karnataka, whose headquarters are located at 5th Floor, West Wing. Arogya Souda, 1st Cross Mugadi road, Bangalore, 560023 (here in other referred to as. The First Party). (Which expression shall unless it be repugnant to the context or meaning there of be deemed to mean and include their successors, executive, permitted arriging and administrators) of the first part

Statutory Alert

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rananda Sagar College of Bental Science Kumaraswamy Layout.

Bangalore - 560 078.

AND: Dayananda Sagar College of Dental Sciences (herein referred to as 'The Second Party') whose address is Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore 560 078 (which expression shall unless repugnant to be context or meaning there of be deemed to mean and include their successors, executors, administrators and permined assigns) of the other part.

WHEREAS Commissioner, Health and Family Welfare Services, Government of Karnataka (GoK), is the Competent Authority at State level to implement various Programmes and Schemes of the Health & Family Welfare Services and shall implement the Oral Health Policy to provide complete/Partial Dentures to the needy citizens (45 years and above) who live below poverty line and this part of the policy shall be herein called as "Danta Bhagya Yojane".

WHEREAS Dayananda Sagar College of Dental Sciences, located at Kumaraswamy Layout established in the year 1991-92 has professional, academic and technical proficiency in implementing the scheme "Danta Bhagya Yojane" and henceforth has agreed to provide the technical support and treatment for providing the complete dentures to the needy senior citizens who live below poverty line.

AND WHEREAS Commissioner, Health and Family Welfare Services, Government of Karnataka, and Dayananda Sagar College of Dental Sciences recognize the necessity to synergize and mutually co-operate to provide removable complete/Partial Dentures to the needy citizens who live below poverty line in Karnataka and thereby to effectively implement the scheme of "Danta Bhagya Yojane" as part of the Oral Health Policy.

NOW THERFORE, this MoU hereby bestows the covenants in terms of certain roles and responsibilities for the parties for the smooth functioning of the "Danta Bhagya Yojane" and other schemes of Oral Health Policy as and when announced by the First Party.

Responsibilities of Commissioner, Health and Family Welfare Services, Government of Karnataka: [FIRST PARTY]

- Health & Family Welfare Department shall implement the scheme of Danta Bhagya Yojane" in 30 Districts of Kamataka through the Government& Private Dental Colleges of Kamataka and District and Sub divisional Hospitals.
- Eligibility criteria for identifying the beneficiaries, referring to the nearby facility shall be made by the Health & Family Welfare Department.
- 3. Health & Family Welfare Department shall pay an amount that Rs. 2000 (Rupees two thousandsOnly) per complete denture and Rs 1000 (Rupees One thousands only) per

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Towananda Sagar College of Bental Science

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Partial denture to the Dental College and District Hospitals & Sub divisional Hospitals (Mean and include their successors, executors, administrators and permitted assigns of the first part.) Which includes the cost of treatment plan, manpower, materials, technical services, and other incidental expenses.

- Health & Family Wetfare Department shall provide the format for referral slips and monthly reports to all the concerned Institutions.
- 5. The Dental Officer/Medical Officer working at any State-run Government Health Centre/Government Hospital shall ONLY authorize the beneficiaries to avail the benefits of the scheme after scrutinizing the necessary documents. This does not include the Health Centers/Hospitals run by the Central Government.
- The payments to the Colleges shall be made into their bank accounts on a monthly basis after submitting their monthly report and invoice through treasury.
- Health & Family Welfare Department shall train the ANM's/ASHA's paramedical
 personnel within their jurisdictional District to identify diagnose and refer the
 beneficiaries to the referring Dental Surgeons.

Responsibilities of the Dental College: [SECOND PARTY]

- Dental College shall conduct dental outreach camps in association with concerned District Dental Nodal Officers and District Health authorities to select the beneficiaries. Shall follow the Covid 19 Guidelines for Dental Procedure issued by the Government of India and Government of Kamataka.
- 2. Dental College shall not charge any kind of additional fees such as OPD eard charges or registration fees, etc. The scheme does not include the cost of drugs, medications and other incidental expenses related to the complete/Partial dentaires. However, any beneficiary having a few remaining teeth indicated for total extraction or any other minor procedures indicated as treatment plan for insertion of complete/partial dentaires shall be free of cost including tooth extractions.
- Complete/Partial dentures shall be made using standard treatment procedures and materials.
- 4. The Dental College shall not deny or delay treatment for the eligible beneficiaries of this scheme. However, the beneficiaries can be allotted appointment on first-com-first serve basis and preferably on fixed days of the month to avoid undue delay of treatment.

- 5. The Dental College shall treat the beneficiaries of this scheme as its own petient and take all necessary measures such as informed consent.
- 6. The Dental College shall submit their monthly reports to the District Health & Family Welfare Officer and Deputy Director (Oral Health Policy and Dental Health) periodically as agreed by both the parties.
- 7. Heneficiaries of this project must be referred to dental colleges only by Dental Officer/Medical Officer working at any State-run Government Health Centre/Government Hospital

The parties agree as follows:

- 1. Term: The Project implementation will commence on signing of MOU. The term of this Memorandum of Understanding is for a period of Five years and may be renewed unless terminated within the terms of this agreement under clause 15 and further subject to satisfactory performance and decision of the GoK.
- 2 Financial provisions and management of funds: All the payments for project activities will be paid directly to the Second party/Dental College upon timely submission of their monthly reports to the District Health & Family Welface Officer and Deputy Director (Oral Health Policy and Dental Health) periodically as agreed by both the parties The payments to the Colleges shall be made into their bank accounts. on a monthly basis after submitting their monthly report and invoice through treasury.
- 3. The Second Party shall not make any changes without prior approval from the Commissioner, Health & Family Welfare Department, and Government of Kamataka. Changes in the line nem shall not after the coain purpose of the project and shall be done only to ensure smooth implementation of the agreed project goal.
- 4. Statutory liabilities such as TDS (Tax deduction in Source). Professional Tax, etc. will be the responsibility of the Member Secretary. Oral Health Policy, and the deductions will be made accordingly as applicable.
- 5. Visibility: The second party must take all necessary steps to publicize the fact that the Health and Family Welfare Department, Government of Karnataka, has financed the activities funded under this scheme. The Health and Family Welfare Department. Government of Kamataka, shall acknowledge the second party for its effort and teclinical support in implementing the project.

Beyananda Sagar College of Bental Sciences Kumaraswamy Layout,

Rangalore - 560 078.

चारत सरकार अंतरिय विषय

क. कार. सन्द्र जयसङ् केन्द्र

विमान पुर शक्, बेंगलून - 500 017, भारत

फैक्स :

No. 020 (I) URSC CHSS 2019



Government of India Department of Specs

U.R. RAO SATELLITE CENTRE

Post Box No. 1786, HAL Airport Road, Vimanoura Post Bengalow-500 017, Inda

For:

April 22 2019

The Administrator Medical Director. M/x. Dayananda Sagar College of Dental Sciences Shavige Malleshwara Hills Kumaraswami Lawaa BANGALORE 500 078

Kind Attn: Prof. Dr. Hemanth Principal Dr.Makesh D.R., Asst. Professor

Win Sir

Sub: ISRO/DOS-Contributory Health Service Scheme (CHSS) -Recognition of Ms. Dayananda Sagar College of Dental Sciences. Bangalore for Dental treatment. - reg.

This has reference to your letter No.Nli duted 18.01.2019 and subsequent signing of the memorandum of agreement with us. We are pleased to inform the recognition of Mis. Devananda Sagar College of Dental Sciences, Bangalore for CHSS beneficiaries of the DOSISRO Centres Units in Bangalore including Department of Atomic Energy & TIFR Units for Dental treatment with intenediate A signed copy of the Memorandian of Agreement entered by this Centre recognizing M/s. Dayananda Sagar College of Dental Sciences, Bangelore is enclosed

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Language by Hole Park

(Gautami Sudarsan)

Sr. Administrative Officer-CHSS Phone: 2508 4141 4139/Fax: 2508 4103

Email: chssagurse.cov.at

Encl: As above.

PRINCIPAL

Dayananda Sagar College of Dental Care Kumaraswamy Layout.

Bangalore - 560 078.

AGREEEMENT BETWEEN URRAO SATELLITE CENTRE AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, KUMARASWAMY LAYOUT, BANGALORE

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, SHAVIGE MALLESHWARA HILLS, KUMARASWAMY LAYOUT, BANGALORE 560078 hereinafter called the Hospital of the Second Part. WHEREAS, the Contributory Health Service Scheme (CHSS) Department of Space ISRO, administered through U R Rao Satellite Centre (URSC) is providing comprehensive medical care facilities to the beneficiaries.

AND WHEREAS, Contributory Health Service Scheme hereinafter called CHSS proposes to provide treatment facilities to the Beneficiaries in the Private Recognized Hospital in Bangalore.

AND WHEREAS, DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, KUMARASWAMY LAYOUT, BANGALORE 560078 offered to give the following treatment/diagnostic facilities to the Contributory Health Service Scheme Beneficiaries.

Dental Treatment

PRINCIPAL

Kumaraswamy Layout,

Bangalore - 560 078.

NOW, THEREFORE, IT IS HEREBY AGREED between the Parties as follows:

1. DEFINITIONS & INTERPRETATIONS

- 1.1 The following terms and expressions shall have the following meanings for purpose of this Agreement:
 - 1.1.1 "Agreement" shall mean this Agreement and all Schedules, supplements, appendices, appendages and modifications thereof made in accordance with the terms of this Agreement
 - 1.1.2 "Benefit" shall means the extent or degree of service the beneficiaries are entitled to receive as per the rules on the subject.
 - 1.1.3 "Card" shall mean the CHSS Card issued by URSC/ISRO.
 - 1.1.4 "Beneficiary" shall mean a person who is eligible for coverage of CHSS and hold a valid CHSS card for the benefit.
 - 1.1.5 "Hospital" shall mean the Columbia Asia Hospital.
 Sarjapur Road, Bangalore performing tests / investigations
 X-ray etc.
 - 1.1.6 "Emergency" shall mean any condition or symptom resulting from any cause, arising suddenly and if not treated at the early convenience, be detrimental to the health of the patient or will jeopardize the life of the patient.
 - 1.1.7 "Recognition of Hospital" shall mean the Hospital empanelled for a particular period for providing treatment facilities and procedures etc., to the beneficiaries at the rates appended to this agreement.

PRINCIPAL

- 1.1.8 "De-recognition of Hospital" shall mean debarring the hospital on account of adopting unethical practices or fraudulent means in providing medical treatment to or not following the good industry practices of the health care for the CHSS beneficiaries after following certain procedure of inquiry.
- 1.1.9 "Party" shall mean either URSC or the Hospital and "Parties" shall mean both URSC and Hospital.
- 1.1.10 "Specialized treatment" shall mean the treatment in a particular speciality.
- 1.1.11 "Accounts Officer" shall mean the Officer authorized by URSC to process the medical bills reimbursement claims or to carry out medical audit
- 1.1.12 "Rates" Shall mean the CHSS Schedule of Rates.
- 1.1.13 "Competent Authority" shall mean the authority to whom the powers delegated as such from time to time at URSC & DOS as per the CHSS Scheme.
 - 1.2 Following Annexures shall be deemed to be an integral part of this Agreement.
 - 1. Refferai Letter (Form No.15) specimen-Annexure I
 - 2. List of Accounts Officers for sending Bills for payment Annexure II
 - 3. CHSS SOR Annexure III.

2. DURATION

The Agreement shall remain in force for a period of 2 years or till it is modified or revoked, whichever is earlier. The agreement may be extended for subsequent periods as required by URSC, subject to fulfillment of all the terms and conditions of this Agreement and with mutual consent.

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Pavananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

3. REVISION OF RATES

In case the notified rates are revised by URSC after empanelment and such revised rates are not acceptable to the empanelled hospital, or for any other reason, the hospital no longer wishes to continue on the list of empanelled hospitals, it can apply for exclusion from the panel by giving three months notice.

4. GENERAL CONDITIONS

- 4.1 The rate being charged shall not be more than what is being charged for same procedure from other (non-CHSS) patients or institutions. An authenticated list of rates being charged for other non-CHSS institutions shall be forwarded to URSC within 10 days of this Agreement.
- 4.2 The empanelled Hospital shall provide services only for which it has been empanelled by URSC at rates fixed.
- 4.3 The Hospital agrees that any liability arising due to any default or negligence in providing or performance of the medical services shall be borne exclusively by the hospital centre which shall alone be responsible for the defect and / or deficiencies in rendering such services.
- 4.4 On production of a valid referral letter by the beneficiary the hospital shall provide credit facilities to the beneficiary after verifying the photo in the CHSS card. URSC is not liable to pay in cases of impersonation or treatment of ineligible persons.

4.5 In case of any change in the infrastructure, the same shall be informed to URSC.

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- 4.6 Authorized representative of the hospital shall attend the periodic meeting held by URSC required in connection with improvement of functioning of the Scheme.
- 4.7 The Hospital shall not make any commercial publicity projecting the empanelment of the Hospitals under this scheme.
- 4.8 The Hospital shall on completion of the treatment obtain the signature of the prime beneficiary on the final bill in token of verification. A copy of the bill shall be handed over to the beneficiary.
- 4.9 The Hospital shall not charge any extra amount from the beneficiary towards consumables used for procedures and for any treatment/procedures included in the Schedule of Rates(SOR).
- 4.10 <u>Additional Instructions</u>: As per DOS letter No 11012/5/2015-V dated 20.03.2015, the following instructions are to be followed for Dental treatment and Dental procedure in addition to the earlier instructions. The below instructions are to be complied with strictly.
 - a) Number of fillings in a single sitting not to exceed 3.
 - b) On a single sitting, crowning should be done on one side and not to exceed 4.
 - c) Two procedures like gingival surgery and gingivoplasty should not be done on the same side on the same day. In the claim form, precise procedure name should be used, rather than using generic terms like gingivoplasty/gingival surgery.
 - d) Whether a full mouth gingival procedure is done, it should be done dividing the mouth into 4 quadrants and not 6.

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- e) Multiple crowns are done in one sitting. This is not practiced usually. This may be a bridge work which is essentially a fixed partial denture. Splitting the bills as multiple crowns may be camouflage for fixed partial denture.
- f) Billing may be done for admissible procedures only and not for inadmissible procedures.

5. RESPONSIBILITIES OF THE HOSPITAL

- 5.1 The Hospitals should be professionally managed, well equipped and should be adequately staffed with qualified medical, paramedical and other personnel.
- 5.2 The Hospital should provide all necessary preventive, therapeutic, surgical or other services as may be required for beneficiaries.
- 5.3 The Hospital shall raise bills for payment only in terms of the rates specified in the Annexure to this contract
- 5.4 The Hospital shall provide a monthly report in digital format to the Chief Medical Officer, URSC giving admission and discharge details of all the beneficiaries under treatment during the month in the following format:

Name of the Patient
CHSS Registration No
Diagnosis
Date of admission
Date of discharge (if any)
Consultant Doctor
Ward / Room No.

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- 5.5 Hospitals shall provide all necessary information for the purpose of settling bills expeditiously.
- 5.6 The Hospital shall along with the bill submit a Discharge Summary for each beneficiary containing the admission details, diagnosis, medical procedures and management, diagnosis test, etc.

6. RESPONSIBILITIES OF URSC

URSC shall endeavor to make all payments due to the Hospital/Diagnostic Centre within reasonable period.

7. CONTACT PERSONS

- 7.1 For U R Rao Satellite centre: Chief Medical Officer (CMO)
- 7.2 For Hospital: General Manager(GM)

8. NON ASSIGNMENT

- 8.1 The Hospital shall not assign, in whole or in part, its obligations to perform under the agreement, except with the prior written consent of URSC. Any such assignment shall not relieve the Hospital from any liability or obligation under this agreement.
- 8.2 For over-billing and unnecessary procedures, the extra amount so charged will be deducted from the pending / future bills of the Hospital and URSC shall have the right to issue a written warning to Hospital not to do so in future. The recurrence, if any will lead to the stoppage of referral to that Hospital.

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9. TERMINATION FOR DEFAULT

- **9.1 URSC** may without prejudice to any other remedy for breach of Agreement, by written notice of default sent to the Hospital, terminated the Agreement in whole or part.
 - (a) If the Hospital fails to provide any or all of the service for which it has been recognized within the period (s) specified in the Agreement, or within any extension there of if granted by URSC pursuant to condition of Agreement
 - (b) If the Hospital fails to perform any other obligation (s) under the Agreement.
 - (c) If the Hospital, in the judgment of URSC has engaged in corrupt or fraudulent practices in competing for or in executing the Agreement.
- 9.2 If the Hospital found to be involved in or associated with any unethical illegal or Unlawful activities, the Agreement will be summarily suspended by URSC without any notice and thereafter may terminate the Agreement; after giving show cause notice and considering its reply if any, received within 10 days of the receipt of show cause notice.
- 9.3 In case of any violation of the provision of the Agreement by the Hospital such as a (but not limited to), refusal of service, refusal of credit facilities to eligible beneficiaries and direct charging from the beneficiary undertaking the unnecessary procedures, prescribing unnecessary drugs / tests, deficient of defective service, over billing and negligence in treatment, the URSC shall have the right to de-recognize the hospital as the case may be.

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10 INDEMNITY

The Hospital shall at all times, indemnify and keep indemnify made against all action, suits claims and demands brought or done in the Hospital in execution of or in connection with the services under this Agreement and against any loss or damage to URSC/ the Government in consequence to any action or suit being brought against the CHSS/The Government along with (or otherwise) Hospital as a party for anything done in the course of execution of this Agreement. The Hospital all times abide by the job safety measure and other statutory requirements prevalent in URSC from all demands or responsibilities arising from accidents or loss of life, the cause or result of which is attributable the Hospital.

The Hospital will pay all indemnities arising from such incidents without any extra cost to URSC and will not hold URSC responsible or obligated. URSC may at its discretion and shall always be entirely at the cost of the Hospital defend such suit, either jointly with the Hospital or independently in case the latter chooses not to defend the case.

11 RATES:

- 11.1 The Hospital shall be paid for the services rendered in terms of the Annexure to this contract.
- 11.2 The Hospital will be entitled to payment only in terms of the rates contained in the CHSS Schedule of Rates and no additional amount relating to consultation, cross-consultation, treatment, procedures, tests, operations or any other related matter shall be claimed in the bills submitted to URSC.
- 11.3 Diet charges are not admissible under the CHSS and should be claimed directly from the beneficiary

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- 11.4 All other miscellaneous charges like telephones calls, etc are not admissible under the CHSS and should be claimed directly from the beneficiary.
- 11.5 The charges for the operations listed in the schedule are inclusive of the Surgeon's fee, Anesthetist fee and operation theatre charges and the hospital shall not bill these items separately.
- 11.6 If, during an operation for the primary ailment, a second surgical procedure is to be undertaken as a part of the primary surgical procedure, the rate for second procedure will be limited to 50% of CHSS Schedule of Rates.

12 PAYMENT:

- 12.1 The bills towards the treatment of beneficiaries are required to be submitted in prescribed format to the respective Accounts Officer as indicated in the **ANNEXURE**. A Xerox copy of CHSS card (both sides) may be enclosed.
- 12.2 The Hospital shall extend its services to the beneficiaries on credit basis and the beneficiaries shall not be made to pay any charges directly to the Hospital except for the charges mentioned in the clauses 12.3 & 12.4.

13. ARBITRATION

If any dispute or difference of any kind whatsoever (the decision is not herein otherwise provided for) arises between URSC and the Hospital / Diagnostic Centre upon or in relation to or in connection with or arising out of the Agreement, shall be referred to Controller, UR Rao Satellite Centre, Bangalore for arbitration who will give written award of his/her decision to the parties. The decision of the Controller (Arbitration) be final and binding. The provisions of the Arbitration and Conciliation Act, 1996 shall apply to the arbitration proceedings. The venue of the arbitration proceedings shall be decided by the Arbitrator.

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Kumaraswamy Layout,

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MISCELLANEOUS

- Nothing under this Agreement shall be construed as establishing or creating between the parties any relationship of Master and Servant or Principal and Agent between URSC and the Hospital.
 - a. The Hospital shall not represent or hold itself out as agent of the URSC.
 - b. URSC will not be responsible in any way for any negligence or misconduct of the Hospital and its employees for any accident, injury or damage sustained or suffered by any beneficiary or any third party resulting from or by any operation conducted by and on behalf of the Hospital in particular where such change would have an impact on the performance of obligation under this Agreement.

c. This Agreement can be modified or altered only on written agreement signed by both the parties.

d. Should the Hospital get wound up or partnership is dissolved, URSC shall have the right to terminate the Agreement and shall not relieve the hospital or their heirs or legal representatives from the liability in respect of the services provided by the Hospital during the period when the Agreement was in force.

15. OTHER GENERAL TERMS:

- 15.1 Dental treatment shall not be undertaken in the hospital unless it is required to be done as part of general surgical treatment or in the case of patients who have developed serious systemic diseases.
- 15.2 Treatment for infertility is not approved under the CHSS.
- 15.3 Treatment taken in branches of the Hospital will not be admissible for re-imbursement.
- 15.4 The recognition of the Hospital under the CHSS may be by either party on one month's notice in terminated writing.

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16. DISPUTES

All disputes & differences, arising out of this agreement shall be settled mutually by the parties. If there is no settlement reached the matter shall be referred to the Arbitration.

在2月20日 10月1日 10月1日 10日

17. INCOME TAX.

Tax at Source as applicable will be deducted from time to time.

18. **EFFECTIVE DATE OF CONTRACT**

The contract is	entered into and eff	ective from the	15 th day of
April	Two Thousand a	and Nineteen in Vi	VITNESS WHERE
OF the parties he the day, month a	ereto have signed, sea and year written above	aled and delivered in presence of the	this agreement on

Signed By:

Sr. Haad P & GA URSC For agold on behalf of President of

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Signed By:

HOSPITAL / DIAGNOSTIC CENTRE

Name:

Designation: PRINCIPAL Seal Dymnande Sagar College of Dental Sciences

Kumaraswam Layout, Bangalore - 78.

WITNESSES:

Dayananda Sagar College of Bental Scie. Kumaraswamy Layout. Bangalore - 560 078.

WITNESSES:

1. Gautami Sudarsa Sr. Administrative Officer (C) URSC

2. Anantha V Admin. Officer (C) URSC



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



MEMORANDUM OF UNDERSTANDING (MOU) FOR PROVIDING ORAL HEALTH CARE SERVICES

This memorandum of understanding is entered on 04.11.2019.

BY AND BETWEEN

Shrishti Special Academy, Sy No 20, Chennenahalli, Off Magadi road, Bangalore- 562 130, herein after referred to as FIRST PARTY (Which expression shall unless it be repugnant to the context or meaning thereof be deemed to mean and include their successors, executors, assigns and administrators) of one part.

Principal, Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore 560078, herein after referred to as SECOND PARTY(Which expression shall unless it be repugnant to the context or meaning thereof be deemed to mean and include their successors, executors, assigns and administrators) of other part.

WHEREAS

- 1. The first Party is a non-profit dedicated to helping those with Intellectual and Developmental Disabilities.
- 2. The Second party is affiliated to Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka and also recognized by Dental Council Of India, New Delhi and ISO 9001-2008 certified institution. Since its inception, the Department of Public Health Dentistry has been involved in the prevention of oral diseases, promotion of oral health to the under privileged and needy through various outreach activities and school health programmes both in urban and rural areas.

The first party and the second party have agreed mutually based on the request of second party to provide regular oral health care services to the children of the organization.

NOW THE MEMORANDUM OF UNDERSTANDING WITNESSETH AND IT IS HEREBY AGREED BY AND BETWEEN THE PARTIES HERE TO AS FOLLOWS.

1. Roles and responsibilities of the first party

a. The organization should provide facilities in terms of suitable space, water and electricity connection for providing the dental services.

b. The first party shall provide lunch and clean bathroom facilities for the doctors during the visit.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111.

Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 93035

E-mail:principal@dscds.edu.in Website: www.dscds.edu.in

- c. For grievances if any the chief functionary of first party shall submit a written complaint to the Principal, Dayananda Sagar College of Dental Sciences for verification and redressal.
- d. To provide duly signed consent forms for the treatment procedures or to make sure the parents are present during the doctors' visit.

2. Roles and responsibilities of the second party

- a. Regular oral health check-up and treatment facilities will be offered by Dayananda Sagar College of Dental Sciences once in 6 months. A team of doctors accompanied by a faculty member will be providing the services at the organization free of cost. The treatment facilities include scaling, restorations, simple extractions and root canal treatment and preventive procedures.
- b. Faculty, PG students and interns from Dayananda Sagar College of Dental Sciences shall provide services to the patients and will frame guidelines for the treatment of patients depending on the nature of illness. The treatment to such patients shall be as per the Standard Treatment Guidelines.
- c. Second party shall ensure that best and complete diagnostic, therapeutic and follow up services based on standard protocol and dental practices or recommendations are extended to the beneficiary. It is also mandatory for the provider to assess the appropriate need and subject the beneficiary for treatment or procedure free of cost without causing any burden to the first party.
- d. All the equipments, instruments and logistics required will be borne by the second party.

3. Duration of MOU

The duration of this agreement shall be for 5 years and shall be renewed unless terminated within the terms of this agreement.

4. Settlement of disputes

The arbitration shall be held in accordance with provision of the arbitration and conciliation act 1996.

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5. Third party rights

Nothing in this agreement shall be taken as granted in any rights explicitly or implicitly whether contractual or statutory other than the head of Shrishti Special Academy or Principal Dayananda Sagar College of Dental Sciences.

6. Intellectual Property Rights

The parties acknowledge that nothing in this MOU shall affect ownership of any Intellectual Property Rights.

7. Confidentiality

a) Both parties shall treat as strictly confidential and prevent disclosure there of all confidential information exchanged pertaining to the activities under this MOU between DSCDS and Shrishti Special Academy. Both parties shall or disclose or use such confidential information for any other party in any manner and shall use only such information for the purposes of this MOU.

8) Termination:

- a) On non performance of the obligations as specified in this MOU, either parties shall be entitled to terminate this MOU for any such breach of the terms of the MOU remains uncured for a period of 30 working days from the date of the notice to cure such breach. For the purpose of this clause, any breach of the terms of the MOU shall be deemed to have taken place from the date of the receipt of written intimation that a claim of breach has been raised.
- b) Not withstanding anything contrary stated here in above, both parties shall have the right to terminate this MOU without assigning any reasons by giving 30 days written notice to other party

9) Force Majeure:

a) Neither party shall be liable for any failure or delay in performance under this MOU to this extent the said failures or delays are proximately caused by causes beyond that parties reasonable control and occurring without its fault or negligence including without limitations performance failures of parties outside the control of the contracting party, acts of God, war, floods, earthquakes, strikes, lockouts, epidemics, riots, civil disturbance among others, provided that force majeure will apply only if the failure to perform could not be avoided by

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the exercise of due care by the party invoking this clause and such party does everything reasonably possible to resume its performance under this MOU.

B) A party affected by an event of force majeure shall give the other party written notice, with full details as soon as possible and in any event not later than 14 calendar dates of the occurrence of the cause relied upon. If force majeure applies, dates by which performance obligations are scheduled to be met will be extended for a period of time equal to the time lost due to any delay so caused.

However, if the performance of the MOU is delayed beyond 8 weeks from the date of this MOU, either party may at it's discretion terminate this MOU.

10) General

- a) Severity: if any provision of this MOU is found by any court of competent jurisdiction to be invalid of un enforceable, the invalidity of such provision shall not affect the other provisions of the MOU and all provisions not affected by such invalidity shall remain in full force and effect.
- b) Waiver: the waiver by either party of a breach or default in any of the provisions of this MOU by the other party shall not be construed as a waiver of ant succeeding breach of the same or other provisions nor shall any delay or omission the part of either party to exercise or avail itself of any right, power or privilege operate as a waiver of any breach or default by the other party.
- C) Relationship: this MOU is being entered into on a principle-to-principle basis.
- D) Notices: any notice shall be given by a way of registered posts with acknowledgement due at the address given in the description of the parties. Email communications shall not be accepted as valid legal notices. The address and other details of the parties for the purpose of communication, unless otherwise notified in writing, to the other parties shall be as provided in this MOU.
- E) Binding nature and assignment:
- i) This MOU shall be binding upon and inure solely to the benefit of the parties here to and their successor and permitted assigns and nothing in this MOU shall confer upon any other person or entity any legal or equitable right, benefit or remedy of any nature whatsoever under or by reason of this MOU. Neither party shall have the power to assign or transfer this MOU without the prior, written consent of the other party.

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- ii) The MOU constitutes the entire MOU between the parties here to. There are no prior or contemporaneous, oral or written, representations, understandings or MOUs, which are not fully expressed in this MOU.
- iii) Amendment no amendment, change order, waiver or discharge shall be valid unless it is in writing and signed by an authorized representative of the party against whom such amendment, change order, waiver or discharge is sought to been forced.
- G) Limitation of liability: in no event shall either party be liable to the other party or any other entity for any kid of losses including any loss profits, or for any indirect, special, consequential or incidental damages arising out of this MOU. Under any cause of action, whether or not such party or its agents have been advised of the possibility of such damage.

H) Dispute resolution:

- i) Any dispute or difference arising between the parties under this MOU or the implementation of the obligation arising there from shall be discussed mutually and resolved within a period of 30 days.
- ii) In the event that no such mutual settlement is reached, any and all disputes arising out of or in relation to this MOU shall be subject t the exclusive jurisdiction of the courts at Bangalore, Karnataka to the exclusion of all other courts.
- iii) Any research activities related to the data collected by both parties will be informed prior to publishing.
- iv) All notices, communication under this MOU shall be sent by registered AD and shall be addressed to designated contact person's for parties to the MOU, Dr. Hemanth M, Principal, DSCDS and

IN WITNESS THERE OF,

The parties of this MOU, intending to be legally bound, have duly executed this MOU to become effective as of the date first written above.

Authorized Signatory Shrishti Special Acad Authorized Signatory
Dayananda Sagar College of Dental
Sciences, Bengaluru

Dr. Hemanth .M MDS., Ph.D. PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore) (Recognised by Dental Council of India, New Delhi) ISO 9001: 2008 Certified Institution

MEMORANDUM OF UNDERSTANDING

This memorandum of understanding is entered into on this day of 12-9-2019 between the Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Shavige Malleshwara hills, Kumaraswamy layout, Bangalore- 560078 and the SRVS English Medium School, Geetha Colony, Yelachenahalli, Bengaluru-560078 represented by the Principal, SRVS English Medium School.

The Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Bangalore is adopting SRVS English Medium School to provide comprehensive dental care to the students. The memorandum of understanding will be valid for a period of five years.

The terms of this understanding are as under:

- 1. Dental health education will be provided to the staff and students in the school.
- 2. Dental health screening for the school children will be conducted in the school free of
- 3. Treatments like Oral prophylaxis, Topical fluoride application, Restoration of small cavities will be done in the Department of Pedodontics and Preventive Dentistry, DSCDS free of cost to those students referred after screening at school and whose parents consent for the treatment by signing the consent form sent to them through the child.

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Head of the Department,

Department of Pedodontics & Preventive Dentistry, BN FSRVS English Medium School Dayananda Sagar College of Dental Sciences

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Principal

Dayananda Sagar College of Dental Sciences

PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 500 078.

> Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore)
(Recognised by Dental Council of India, New Delhi)
ISO 9001: 2008 Certified Institution

MEMORANDUM OF UNDERSTANDING

This memorandum of understanding is entered into on this day of 12-9-2019 between the Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Shavige Malleshwara hills, Kumaraswamy layout, Bangalore- 560078 and the Urdu Higher Primary School, Faizabad, J P Nagar post, Kanakanagar, Bangalore- 560078 represented by the Principal, Urdu Higher Primary School.

The Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Bangalore is adopting Urdu Higher Primary School to provide comprehensive dental care to the students. The memorandum of understanding will be valid for a period of five years.

The terms of this understanding are as under:

- 1. Dental health education will be provided to the staff and students in the school.
- 2. Dental health screening for the school children will be conducted in the school free of cost.
- 3. Treatments like Oral prophylaxis, Topical fluoride application, Restoration of small cavities will be done in the Department of Pedodontics and Preventive Dentistry, DSCDS free of cost to those students referred after screening at school and whose parents consent for the treatment by signing the consent form sent to them through the child.

Head of the Department

Department of Pedodontics & Preventive Dentistry,
Dayananda Sagar College of Dental Sciences
Head of Department Paedodontia

Payananda Sagar College of Dental Science.

BANGALORE - 78.

Principal

Dayananda Sagar College of Dental Sciences
PRINCIPAL

Dayanenda Sagar College of Dental Seigness Kumaraswamy Layout, Bangalore - 560 078 Principal

Urdu Higher Primary School

HEAD MISTRESS

GOVT. URDU H.P. SCHOOL

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654



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MEMORANDUM OF UNDERSTANDING

This memorandum of understanding is entered into on this day of 12-9-2019 between the Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Shavige Malleshwara hills, Kumaraswamy layout, Bangalore- 560078 and Flora English School, Geetha colony, Yelachenahalli, Bengaluru-560078 represented by the Principal, Flora English school.

The Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Bangalore is adopting Flora English School to provide comprehensive dental care to the students. The memorandum of understanding will be valid for a period of five years.

The terms of this understanding are as under:

- 1. Dental health education will be provided to the staff and students in the school.
- 2. Dental health screening for the school children will be conducted in the school free of cost.
- 3. Treatments like Oral prophylaxis, Topical fluoride application, Restoration of small cavities will be done in the Department of Pedodontics and Preventive Dentistry, DSCDS free of cost to those students referred after screening at school and whose parents consent for the treatment by signing the consent form sent to them through the child.

Head of the Department,

Department of Pedodontics & Preventive Dentistry, Dayananda Sagar College of Dental Sciences

Head of Department Paedodontia Payananda Sagar College of Dental Sciences BANGALORE-78.

Flora English School

FLORA ENGLISH SCHOOL Yelachenahalli, Bangalore - 78

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Kumaraswamy Layout, Bangalore - 500 078.

> Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore) (Recognised by Dental Council of India, New Delhi) ISO 9001: 2008 Certified Institution

MEMORANDUM OF UNDERSTANDING

This memorandum of understanding is entered into on this day of 12-9-2019 between the Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Shavige Malleshwara hills, Kumaraswamy layout, Bangalore- 560078 and JSS High school, Krishnappa layout, Ganapathipura, Konanakunte, Kanakapura road, Bengaluru-560062 represented by the Principal, JSS High school.

The Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Bangalore is adopting JSS High School to provide comprehensive dental care to the students. The memorandum of understanding will be valid for a period of five years.

The terms of this understanding are as under:

- 1. Dental health education will be provided to the staff and students in the school.
- 2. Dental health screening for the school children will be conducted in the school free of cost.
- 3. Treatments like Oral prophylaxis, Topical fluoride application, Restoration of small cavities will be done in the Department of Pedodontics and Preventive Dentistry, DSCDS free of cost to those students referred after screening at school and whose parents consent for the treatment by signing the consent form sent to them through the child.

Head of the Department,

Department of Pedodontics & Preventive Dentistry. Dayananda Sagar College of Dental Sciences

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Dayananda Sagar College of Dental Sciences

PR College Layout Dental Sciences

Layout Bangalore 560 078.

Principal

JSS High School

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Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654





Memorandum Of Understanding

Shared commitment to create advocacy to provide a centralized pooling of data on precancerous lesions and conditions and oral cancer cases across the nation. This will function as a database that will not only provide us with oral cancer statistics but shall also support us in planning and building strategies for fighting the increasing occurrence of oral cancer in our country.

Parties collaborating:

- A. Indian Dental Association (IDA): Indian Dental Association (IDA) is an independent and recognized voice of dental professionals in India. IDA has its registered office at: Block No. 6, 1st Floor, 386, Sane Guruji Building, Veer Sawarkar Marg, Opposite Siddhivinayak Temple, Prabhadevi, Mumbai-400025, Maharashtra, India. (Hereinafter referred to as Party A)
- B. Name of Dental College with Address: Dayanand Sagar College of Dental Sciences, Shavige Malleswara Hills, Kumara Swamy Layout, Bangalore – 560078, Karnataka. (Hereinafter referred to as Party B)

Commitment to Action:

The parties recognize that the people of the country, suffering from Oral Precancerous lesion & conditions and Oral Cancer are yet to benefit from early diagnosis, awareness and quality oral cancer treatment. The parties have together agreed to develop an atlas of oral precancerous lesions and conditions and established cancer cases.

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Bangalore - 560 078.

- Party A will provide Party B with the software to enter all the information regarding premalignant lesion, conditions and oral cancer cases and maintain the database.
- Party B will systemically collect the said data in order to understand trends in oral
 cancer occurrence over the country, and enter it in the National Oral Cancer Registry
 (NOCR) database using the software that Party A has equipped them with.
- Enter correct, authentic & complete information of all the pre-malignant lesions, conditions & c
- 4. Party B will have access to all the data entered by them.
- Only Party A and Party B will have access to the data and the patients' confidentiality will be maintained.
- 6. All the data collected in this database will be compiled in a report at the end of the year and party B will get credit for the data entered by them, if and where Party A publishes this data.
- At the end of each year, the institution that provides and maintains maximum authentic
 data in that year will be recognised at the Indian Dental Conference of the following
 year, and be felicitated for the same.

This Collaboration will be in place through this MoU from 1st Day of January 2019 for a period of 3 years, till 31st December, 2021.

Signatures

Head of institution's signature and stamp:

Dayananda Sagar Concern Layou

E.

PRINCIPAL

Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 1778.



Indian Dental Association (Head Office):

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



INDIA NON JUDICIAL

Government of Karnataka

LAYOUT UPHC BBMP K S LAYOUT Certificate No. IN-KA70359362633322R Certificate Issued Date LAYOUT 11-Mar-2019 11:13 AM Account Reference NONACC (BK)/ kakscub08/ KUMARA SWAMY LAYOUT/ KA-BA Unique Doc. Reference : SUBIN-KAKAKSCUB0872472782664227RIMP K S LAYOUT UPHC B Purchased by MP KSL DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Description of Document : Article 12 Bond WP KS LAYOUT UPHC BBMR Description C BBMP K MOU MP KS LAYOUT UPHC BBN IP K S LAYOUT UPHC BBM Consideration Price (Rs.) 0 (Zero) YOUT UPHC BBMP KS First Party-IC BBMR K ! : K S LAYOUT UPHC BBMP MP KS LAYOUT UPHC BBM Second Party BBMP K ST : DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Stamp Duty Paid By : DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Stamp Duty Amount(Rs.) LAYOUT UPHO BBMP K'S LAY (One Hundred only) YOUT UPHO BEMP KS LAYOU! LAYOUT (IPHIC BENIP K'S LAYOUTS EYOUR UPHE BEMR K & LAYOUT UPHE ATOUT UPHE BOMP K'S LAYOUT UPHE BBM AYOUT GEEC BEMP KS LAYOUT UPHO BEMP KS E DOMP KS LAYOUT

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ಒಪ್ಪಂದದ ಕರಾರು ಈ ಕೆಳಕಂಡಂತೆ ಇರುತ್ತದೆ.

ಬೆಂಗಳೂರು ನಗರ ಜಿಲ್ಲೆ, ಪದ್ಮನಾಭನಗರ ವಿಧಾನಸಭಾ ಕ್ಷೇತ್ರದ ವಾರ್ಡ್ ನಂ.181, ಕುಮಾರಸ್ವಾಮಿ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯ ಆರೋಗ್ಯ ಬಡಾವಣೆಯ, ಬೃಹತ್ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರದಲ್ಲಿ ಒಂದು ಕೊಠಡಿಯಲ್ಲಿ ಡೆಂಟಲ್ ಕ್ಲಿನಕ್ ನ್ಯು ಪ್ರಾರಂಭಿಸಿ. ವಾರದಲ್ಲಿ 5 ದಿನ ಬೆಳಿಗ್ಗೆ 10 ರಿಂದ ಮದ್ರಾಹ್ನ 1 ಗಂಟೆಯವರೆಗೆ ಸಾರ್ವಜನಿಕರಿಗೆ ಸಂಪೂರ್ಣ ಉಚಿತವಾಗಿ ದಂತ ಚಿಕಿತ್ಸೆ ಸೇವಾ ಸೌಲಭ್ಯವನ್ನು ನೀಡಲು ಇಚ್ಚಿಸಿರುತ್ತಾರೆ.

PRINCIPAL

- Statutory Alert: Dands Sagar College of Dental Sciences

 1. The author Very man Stamp Certificate shows I sayout www.shcilestamp.com*. Any discrepancy in the details on this Certificate and as 2. The onus of checking the legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in the Legitimacy in the Legitimacy in the Legitimacy is on the Legitimacy in on the Legitimacy in the Legi
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ಆಯುಕ್ತರು, ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆ ಹಾಗೂ ದಯಾನಂದ ಸಾಗರ್ ದಂತ ಮಹಾವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆಯವರು ಇವರ ಜಂಟಿ ಸಹಭಾಗಿತ್ವದಲ್ಲಿ ಸಾರ್ವಜನಿಕರಿಗೆ ಉತ್ತಮ ಸೇವೆ ನೀಡುವುದೆಂದು ಒಪ್ಪಂದಕ್ಕೆ ಒಪ್ಪಿದ್ದಾರೆ. "ಆಯುಕ್ತರು, ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆ ಇವರನ್ನು ಮೊದಲನೇ ಪಕ್ಷದಾರರು ಎಂದು ಕರೆಯಲಾಗಿದೆ". ಪ್ರಾಂಶುಪಾಲರು, ದಯಾನಂದ ಸಾಗರ್ ದಂತ ಮಹಾವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆಯವರನ್ನು ಎರಡನೇ ಪಕ್ಷದಾರರು ಎಂದು ಕರೆಯಲಾಗಿದೆ ಹಾಗೂ ಅದರಂತೆ ಈ ಒಪ್ಪಂದದ 2 ಪಕ್ಷದಾರರು ಈ ಕೆಳಕಂಡಂತೆ ಸೇವೆಗಳನ್ನು ನೀಡಲು ಒಪ್ಪಿರುತ್ತಾರೆ (2 ವರ್ಷದ ಅವಧಿಗೆ).

ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯು ಮೊದಲನೆಯ ಪಕ್ಷದಾರರಾಗಿದ್ದು, ಈ ಕೆಳಕಂಡಂತೆ ಸೇವೆಗಳನ್ನು ಒದಗಿಸಬೇಕಾಗಿರುತ್ತದೆ.

ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರದಲ್ಲಿ ಒಂದು ಉನ್ನತ ದರ್ಜೆಯ ದಂತ ವೈದ್ಯಕೀಯ ಚಿಕಿತ್ಸಾ ಕೇಂದ್ರದಲ್ಲಿ ಸೇವೆಗಳನ್ನು ಮುಂದುವರೆಸಲು ಅವಶ್ಯಕವಾದ ಆಸ್ಪತ್ರೆಯ ಕಟ್ಟಡದ ಒಂದು ಕೊಠಡಿ ಹಾಗೂ ವಿದ್ಯುಚ್ಚಕ್ತಿ, ನೀರು ಸರಬರಾಜು ಹಾಗೂ ಒಳಚರಂಡಿ ವ್ಯವಸ್ಥೆಯನ್ನು ನಗರ ಪಾಲಿಕೆ ವತಿಯಿಂದ ಒದಗಿಸಬೇಕಾಗುತ್ತದೆ.

- 1. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಪ್ರಸ್ತುತ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರದ ಒಂದು ಕೊಠಡಿಯಲ್ಲಿ ದಂತ ಚಿಕಿತ್ಸೆ ಕ್ಲಿನಿಕ್ ನಡೆಸಲು ಒದಗಿಸಲಾಗುತ್ತದೆ.
- 2. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರಕ್ಕೆ ಪಾಲಿಕೆಯ ಖಾಯಂ ಸಿಬ್ಬಂದಿ ವರ್ಗದ ನಾಲ್ಕನೇ ದರ್ಜೆ ಒಬ್ಬ ನೌಕರರನ್ನು ಸೇವೆಗಾಗಿ ಬದಗಿಸಲಾಗುತ್ತದೆ.
- 3. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರದ ದಂತ ಚಿಕಿತ್ಸೆ ಕ್ಲಿನಿಕ್ ಕೊಠಡಿಗೆ ವಿದ್ಯುಚ್ಚಕ್ತಿ, ನೀರು ಸರಬರಾಜು ಮತ್ತು ಒಳಚರಂಡಿ ವ್ಯವಸ್ಥೆ ಒದಗಿಸಲಾಗುತ್ತದೆ.
- 4. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರ ದಂತ ಚಿಕಿತ್ಸಾಲಯದಲ್ಲಿ ಒದಗಿಸುವ ಎಲ್ಲಾ ಸೇವೆಗಳೂ ಉಚಿತವಾಗಿರುತ್ತದೆ.
- 5. ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರದ ಸೇವಾ ಶುಲ್ಕದ ಹಣವನ್ನು ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಉಪಯೋಗಿಸಲು ಬರುವುದಿಲ್ಲ. ಅದಕ್ಕಾಗಿ ಪ್ರತ್ಯೇಕ ಮಾರ್ಗಸೂಚಿಗಳನ್ನು ನೀಡಲಾಗಿರುತ್ತದೆ.

ಈ ಒಪ್ಪಂದದ ಎರಡನೇ ಪಕ್ಷದಾರರಾದ ದಯಾನಂದ ಸಾಗರ್ ದಂತ ಮಹಾವಿದ್ಯಾಲಯದ ಸಂಸ್ಥೆಯು ಈ ಕೆಳಕಂಡಂತೆ ಸೇವೆಗಳನ್ನು ಒದಗಿಸಲು ಒಪ್ಪಿರುತ್ತಾರೆ.

1. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಪ್ರಸ್ತುತ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರಕ್ಕೆ ದಂತ ಚಿಕಿತ್ಸೆಗಾಗಿ ಬರುವ ಸಾರ್ವಜನಿಕರಿಗೆ ಸಂಪೂರ್ಣ ಉಚಿತವಾಗಿ ಸೇವೆ ಒದಗಿಸಲು ದಂತ ವೈದ್ಯರು ಹಾಗೂ ಸಹಾಯಕ ದಂತ ವೈದ್ಯರ ಸೇವೆಯನ್ನು ಉಚಿತವಾಗಿ ಒದಗಿಸಲಾಗುತ್ತದೆ.

PRINCIPAL

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

- 2. ಈ ಒಡಂಬಡಿಕೆ ಅಡಿಯಲ್ಲಿ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರಕ್ಕೆ ಡೆಂಟಲ್ ಚಿಕಿತ್ಸೆಗಾಗಿ ಬೇಕಾಗುವ ಆಕ್ಸೆಸರಿಸ್ ಹಾಗೂ ಇತರೇ ಪ್ರಮುಖ ಸಲಕರಣೆಗಳನ್ನು ಉಚಿತವಾಗಿ ಒದಗಿಸಲಾಗುತ್ತದೆ.
- 3. ಹಲ್ಲುಗಳನ್ನು ಲೋಕಲ್ ಅನೇಸ್ತಿಶಿಯದಲ್ಲಿ ತೆಗೆಯುವುದು.
- 4. ಹುಳುಕು ಹಲ್ಲುಗಳ ರಂಧ್ರಗಳನ್ನು ಮುಚ್ಚಲು ಸಿಲ್ವರ್ ಅಮಾಲ್ಗಮ್, ಜಿಂಕ್ ಆಕ್ಸೈಡ್ ಮತ್ತು ಗ್ಲಾಸ್ ಐಯೋನೋಮರ್ ತುಂಬುವುದು.
- 5. ತೆಗೆದು ಪುನಃ ಹಾಕಲು ಆಗುವ ಭಾಗಶಃ ದಂತ ಪಂಕ್ತಿಗಳು (ಆರ್ಪಿಡಿ)
- 6. ರೂಟ್ ಕೆನಾಲ್ ಟ್ರೀಟ್ ಮೆಂಟ್ ಹಾಗೂ ಇತರೇ ಚಿಕಿತ್ಸೆಗಳನ್ನು ದಯಾನಂದ ಸಾಗರ್ ದಂತ ಮಹಾವಿದ್ಯಾಲಯದಲ್ಲಿ ರಿಯಾಯಿತಿ ದರದಲ್ಲಿ ಒದಗಿಸುವುದು.
- 7. ಒಪ್ಪಂದದ ಅವಧಿಯಲ್ಲಿ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರದ ಈ ಉಚಿತ ದಂತ ಚಿಕಿತ್ಸಾಲಯದಲ್ಲಿ ಸೇವೆ ಪಡೆಯುವ ಸಾರ್ವಜನಿಕರ ಚಿಕಿತ್ಸೆಗೆ ಸಾಧನ ಸಾಮಗ್ರಿಗಳನ್ನು ಉಚಿತವಾಗಿ "ದಯಾನಂದ ಸಾಗರ್ ದಂತ ಮಹಾವಿದ್ಯಾಲಯ" ಸಂಸ್ಥೆಯ ವತಿಯಿಂದ ಒದಗಿಸಲಾಗುತ್ತದೆ.

ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯ ಆರೋಗ್ಯ ಇಲಾಖೆಯ ವ್ಯಾಪ್ತಿಯ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಆರೋಗ್ಯ ಕೇಂದ್ರ ಕಟ್ಟಡದ ಒಂದು ಕೊಠಡಿಯಲ್ಲಿ ಡೆಂಟಲ್ ಕ್ಲಿನಿಕ್ ನ್ನು ಈ ಪ್ರದೇಶದ ಸಾರ್ವಜನಿಕರಿಗಾಗಿ ಸೇವೆಯನ್ನು ನೀಡುವ ಸಂಬಂಧ ಖಾಸಗಿ ಸಂಸ್ಥೆಯಾದ ಪ್ರಾಂಶುಪಾಲರು. ದಯಾನದಂದ ಸಾಗರ್ ದಂತ ಮಹಾವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆಯವರು ಸೇವೆಗಳನ್ನು ಮುಂದುವರೆಸಲು ಒಪ್ಪಿಗೆ ನೀಡಿದ್ದು. ಈ ಸಂಸ್ಥೆಯೊಂದಿಗೆ ಒಡಂಬಡಿಕೆಯನ್ನು ಪಾಲಿಕೆಯು ರೂ.100/– ಮೌಲ್ಯದ ಕರಾರು ಪತ್ರದಲ್ಲಿ ಮಾಡಿಕೊಳ್ಳಬೇಕಾಗುತ್ತದೆ. ಯಾವುದೇ ಸಮಯದಲ್ಲಿ ಸದರಿ ಒಡಂಬಡಿಕೆಯನ್ನು ರದ್ದು ಪಡಿಸುವ ಅಧಿಕಾರವನ್ನು ಬಿಬಿಎಂಪಿ ಕಾಯ್ದಿರಿಸಿಕೊಳ್ಳಲಾಗುತ್ತದೆ ಎಂಬ ಸಾರ್ವಜನಿಕ ಆರೋಗ್ಯ ಸ್ಥಾಯಿ ಸಮಿತಿಯ ನಿರ್ಣಯದಂತೆ ಪರತ್ತು ಮುಂದುವರೆಸಲಾಗಿದೆ.

ಬೃಹತ್ ಬೆಂಗಳೂರು ಮಹಾನಗರ ಪಾಲಿಕೆಯ ವಾರ್ಡ್ ನಂ.181ರಲ್ಲಿ ಕಾರ್ಯ ನಿರ್ವಹಿಸುತ್ತಿರುವ ಕುಮಾರಸ್ವಾಮಿ ಬಡಾವಣೆಯ ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರದಲ್ಲಿ ಖಾಸಗಿ ಸಂಸ್ಥೆಯಾದ ದಯಾನಂದ ಸಾಗರ್ ದಂತ ಮಹಾವಿದ್ಯಾಲಯ ಮತ್ತು ಆಸ್ಪತ್ರೆರವರುಗಳೊಂದಿಗೆ ಜಂಟಿ ಸಹಭಾಗಿತ್ವದಲ್ಲಿ ದಿ: 01.04.2017 ರಿಂದ ವಾರದಲ್ಲಿ 5 ದಿನ ಉಚಿತ ದಂತ ಚಿಕಿತ್ಸಾಲಯವನ್ನು ಪ್ರಾರಂಭಿಸಿದ್ದು. ಈ ಉಚಿತ ದಂತ ಚಿಕಿತ್ಸಾಲಯದ ಸೇವೆಗಳನ್ನು ಮುಂದುವರೆಸಲು ಒಪ್ಪಿಗೆ ಸೂಚಿಸಿ, ಪತ್ರವನ್ನು ಸಲ್ಲಿಸಿರುವ ಹಿನ್ನಲೆಯಲ್ಲಿ ಸದರಿ ಖಾಸಗಿ ಸಂಸ್ಥೆಯೊಂದಿಗೆ ಪಾಲಿಕೆಯು ಒಡಂಬಡಿಕೆ ಮಾಡಿಕೊಳ್ಳಲು ಇಚ್ಛಿಸಿದ್ದು, ಸಾರ್ವಜನಿಕರ ಆರೋಗ್ಯ ಸ್ಥಾಯಿ ಸಮಿತಿಯ ಸೂಕ್ತ ನಿರ್ಣಯಕ್ಕಾಗಿ ಟಿಪ್ಪಣಿಯನ್ನು ಮಂಡಿಸಲಾಗಿದೆ.

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Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

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INDIA NON JUDICIAL

Government of Karnataka

Rs. 200

e-Stamp

ANGALORE DIRECTOR NIMHANS BANGALORE SAPIGALORE DIRECTOR NIMHANS BEINGAL Certificate No. 5 BANGALORE DIRECT. IN-KA06530493581218R ORE DIRECTOR NIMHANIS BANGALORE HREC Certificate Issued Date 27-Sep-2019 01:28 PM Account Reference OR NIMHA NONACC (FI)/ kacrsfl08/ KUMARA SWAMY LAYOUT1/ SUBIN KAKACRSFL0834055546212765R TOR NIMHANS BANGALORE Burique Doc. Reference PRINCIPAL DSCDS BANGALORE Purchased by RECTOR N TOR NIMHANS BANGA! OPE INGALORE DIRECTOR NIME Article 37 Note or Memorandum Description of Document OR NIMHANS BANGALORE MEMORANDUM OF UNDERSTANDING NGALORE DIRECTOR NIME DIR Description and band OR NIMHANS BANGALORE Consideration Price (Rs.) VGALORE DIRECTOR NUMBER (Zero) OR NIMHANS BANGALORE IS BANGALORE DIRECTOR DIRECTOR NIMHANS BANGALORE NGALORE DIRECTOR NIME DIRGINST PartyHANS BANG OR NIMHANS BANGALORE PRINCIPALIDSCDS BANGALORE NGALORE DIRECTOR NUMBER OR NIMHANS BANGALORE PRINCIPAL DSCDS BANGALORE SANGALORE DIRECTOR NIME Stamp Duty Amount(Rs. (Two Hundred only). DIRECTOR NIMHANS BANGALO IS BANGALORE DIRECTOR NIMM सत्यमव जयत DIRECTOR NIMHANS BANGALORE NS BANGALORE DIRECTOR NIMHANS & DIRECTOR NIMHANS BANGALORE DIRECT NS BAINGALORE DIRECTOR NIMHANS BANGAS TE DIRECTOR NIMHANS BA DIRECTOR NIMHANS BANGALORE DIRECTOR NIMHA IS BANGALORE DIRECTOR NIMHANSBANGALORE DIRECTOR NIMHANS BANGALORE DIRECTOR GALORE DIRECTOR NIMHANS BANGALORE DIRECTOR NIMHANS BANGAL DIRECTOR NIMHANS BANGALORE DIRECTOR NIMHANS BANGALORE DIRECTOR NIMHANS BANGALO BANGALORE DIRECTOR NIMHANS BANGALORE DIRECTOR NIMHANS BANGALORE DIRECTOR NIMHANS BANGALORE

MEMORANDUM OF AGREEMENT

AGREEMENT
BETWEEN
DIRECTOR, NIVIHANS

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, SHAVIGE MALLESHWARA HILLS, KUMARASWAMY LAYOUT, BANGALORE – 560 078 (Name & Address of Hospital/Centre)

This Agreement is made on 2rd day December 2019 between the Director, National Institute of Mental Health & Neuroscience, Bangalore (Hereinafter called NIMHANS which expression shall, unless repugnant

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, SHAVIGE MALLESHWARA HILLS, KUMARASWAMY LAYOUT, BANGALORE – 560 078 (Name & Address of Hospital/ Centre)

Second Part

WHEREAS, The NIMHANS is providing comprehensive medical care facilities to Employees/Pensioners and their dependent family members.

AND WHEREAS, NIMHANS HEALTH SCHEME (NHS) proposes to provide treatment facilities in Allopathy to the NHS beneficiaries in the Private Recognized Hospitals/Centers.

AND WHEREAS DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Hospital/Centre offered to give the treatment to the NHS Beneficiaries who may produce a permission letter from their NIMHANS HEALTH CENTRE.

NOW, THEREFORE, IT IS HEREBY AGREED between the Parties as follows:

1. DEFINITIONS & INTERPRETATIONS

- 1.1 The following terms and expressions shall have the following meanings for purposes of this Agreement:
- 1.1.1 "Agreement" shall mean this Agreement and all Schedules, supplements, appendices, appendages and modifications thereof made in accordance with the terms of this Agreement.
- 1.1.2 "Benefit" shall mean the extent or degree of service the beneficiaries are entitled to receive as per the rules on the subject.
- 1.1.3 "Card" shall mean the NHS Card. Issued by any competent authority of NIMHANS.
- 1.1.4 "Card Holder" shall mean a person having a NHS Card.
- 1:1.5 "NHS Beneficiary" shall mean a person who is eligible for coverage of NHS and hold a valid NHS card for the benefit.
- 1.1.6 "Coverage" shall mean the hospital/diagnostic center authorized by the NIMHANS for HEALTH SCHEME.
- 1.1.7 "Empanelment' shall mean the hospital/diagnostic center authorized by the NIMHANS for treatment purposes for a particular period.
- 1.1.8 'Hospital' shall mean the DAYANANDA SGAR COLLEE OF DENTAL SCIENCES while performing under this Agreement providing medical investigation, treatment and the Healthcare of human beings.
- 1.1.9 < 'Recognition of Hospital' shall mean the Hospital empanelled by the NHS for a particular period for providing teatment facilities and procedures etc. to the NHS beneficaries at the rules laid down.
- 1.1.10 'De-recognition of Hospital" shall mean debarring the hospital on account of adopting unethical practices or fraudulent means in providing medical treatment to or not following the good industry practices of the health care for the NHS beneficiaries after following certain procedure of inquiry.
- 1.1.11 "Party" shall mean either the NIMHANS or the Hospital/Centre and "Party" shall mean both the NIMHANS and the Hospital/Diagnostic Centre.
- 1.1.12 (a)"Package Rate" means rates for a package of treatment of standard set of procedures that administered to the patient while undergoing treatment for a pre-diagnosed disease-condition for the specified time period.

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- This includes all charges pertaining to a particular treatment/procedure including registration charges, admission charges, accommodation charges, cost of medicines, Panchakarma charges, Labour Room Charges, Charges for Ksharasutra, operation/procedure charges, doctor/consultant visit charges, monitoring charges, operation theatre charges and cost of all sundries used during hospitalization, related routine investigations, physiotherapy charges etc. form the time of admission till discharge. This also is inclusive of all sub-procedures and all related procedures to complete the treatment:
- ii) No additional charge on account of extended period shall be allowed if that extension is due to any improperly conducted procedure.
- 1.1.13 "Bill Clearing Agency" (BCA means the agency appointed by NIMHANS for processing of Data/Bills of all NHS beneficiaries (both serving and pensioner) attending the empanelled private Hospitals and for making payment.

2. SERVICE AREA

The Hospital/Diagnostic Centre shall provide treatment facilities to the NHS beneficiaries who may produce a permission letter from NIMHANS HEALTH CENTRE (NHC).

3. SERVICE CHARGES

The Hospital/Center shall charges from the NHS beneficiaries as per the rates for a particular procedure/ package deal as prescribed by the CGHS which shall be an integral part of this Agreement. This also includes the ward entitlement as per CGHS rules. It further includes description of General ward, semiprivate ward, private ward as per CGHS norms.

4. DURATION

The Agreement shall remain in force for a period of 2 years or till it is modified or revoked, whichever is earlier. The Agreement may be extended for subsequent periods as required by NIMHANS subject to fulfillment of all the terms and conditions of this Agreement and with mutual consent.

5. MEDICAL AUDIT OF BILLS

The medical audit of the bills of the hospital/center will be conducted by the NIMHANS or any authority designated by NIMHANS or the Ministry of Health & Family Welfare for that purpose within 90 days of discharge of the NHS beneficiary, as the case may be, from Hospital.

6. REVISION OF RATES

In case the notified rates are revised by the Ministry of Health & Family Welfare after empanelment and such revised rates are not acceptable to the empanelled hospital/center no longer whishes to continue on the list empanelled hospitals/centers, it can apply for exclusion from the panel by giving three months notice and by depositing an exit fee equivalent to the average monthly bill submitted by it to the NIMHANS in the preceding one year.

7. TREATMENT IN EMERGENCY

In emergency the hospital shall not refuse admission or demand an advance payment from the beneficiary or his family member and shall provide credit facilities to the patient whether the patient is a serving employee or a pensioner availing NHS facilities, on production of a valid NHS card within 24 hrs and the hospital shall submit the bill to BCA. The refusal to provide the treatment to bonafide NHS beneficiaries in emergency cases without valid ground, would attract disqualification for continuation of empanelment.

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- 8.1 All investigations regarding fitness for the surgery will be done prior to the admission for any elective procedure and are part of package. For any material/ additional procedure / investigation other than the condition for which the patient was initially permitted, would require the permission of the competent authority.
- 8.2 The package rate will be calculated as per the duration specified in the tender document under the "treatment requirements". No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.
- 8.3 The rate being charged will not be more than what is being charges for same procedure from other (CGHS, non-CGHS and non Central Govt.) patient s or institutions. An authenticated list of rates being charged from other non-CGHS, non-Central Govt. Institutions if available will also be supplied within 10 days of this agreement.
- 8.4 The procedure and package rates for any procedure and other medical treatment for NHS beneficiary under this Agreement shall not be increased during the validity period of this Agreement.
- 8.5 The empanelled Hospital/Centre shall provide services only for which it has been empanelled at rates that will be fixed from time to time and shall be binding.
- 8.6 The Hospital will intimate all instances of patients admitted on the basis of the Authority letter issued by the NHS authorities in the prescribed format within one working day through fax/email (the number of which shall be notified) followed by post.
- 8.7 The Hospital /Centre shall provide reports on monthly basis by the 10th day of the succeeding calendar month in the prescribed format to the NIMHANS in respect of the beneficiaries treated.
- 8.8 The Hospital/Center agrees that any liability arising due to any default or negligence in providing or performance of the medical services shall be borne exclusively by the hospital/center who shall alone be responsible for the defect and /or deficiencies in rendering such services.
- 8.9 The Hospital agrees that during the in-patient treatment of the NHS beneficiary, the Hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package deal rate, which includes the cost of all the items. Appropriate action, including removing from NHS empanelment and / or Termination of this Agreement, may be initiated on the basis of a complaint, medical audit or inspections carried out by NHS teams
- 8.10 On production of a valid permission by the NHS/beneficiaries, the hospital/center shall provide credit facilities to the NHS beneficiaries after verifying the photo in the card . The NIMHANS is not liable to pay in cases of impersonation or treatment of ineligible persons.
- 8.11 The Hospital/Centre will submit an annual report regarding number of referrals received, admitted, bills submitted to the NHS and payment received.
- 8.12 Authorized signatory/representative of the hospital/center shall attend the periodic meetings held by Director, NIMHANS.
- 8.13 The Hospital/Diagnostic Centre will not make any commercial publicity projecting the name of NIMHANS. However, the fact of empanelment under NHS shall be displayed at the premises of the empanelled center, indicating that the charges will be as per CGHS approved rates.
- 8.14 The hospital will investigate/treat the NHS beneficiary patient only for the condition for which they are referred with permission, and in the specialty and / or purpose for which they are approved by NHS.
- 8.15 The Hospital shall not undertake treatment of referred cases in the system of medicine for which it is not empanelled.
- 8.16 The hospital will not refer the patient to other specialist / other hospital without prior permission of NIMHANS. Prior intimation shall be given by the NHS whenever patient needs further referral.
- 8.17 The rates notified by CGHS shall be available on web site of Ministry of Health & Family Welfare Govt. of India at www.notifw.nic.in.

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SUBMISSION OF BILLS TO BILL CLEARING AGENCY

The Hospital/Centre shall submit the bills of the NHS beneficiaries both electronically as well as physically to the BCA for processing the same for payment.

Payment within twenty days:

NIMHANS shall appoint a Bill Clearing Agency (BCA), for processing of Data / Bills of all NHS beneficiaries attending these Hospitals, NIMHANS would ensure that payment of hospital claims would be done in time bound manner - within a period of 20 working days from the date of submission of bills in physical format / complete information related to the claim to the designated BCA.

NHS beneficiary attending hospital:

In such a situation the Hospital shall intimate to BCA within 2 hours of admission and BCA shall respond in 4 working hours (however treatment shall not be denied to any NHS member and this is only an initiation of the e-workflow). Post discharge, hospital would upload bills and download documents as per requirements of NHS within 96 hours.

Infrastructure for interaction with BCA

The Hospital shall have:

Dedicated personal Computer with Dual Core /core 2 DUO processor and minimum 2 GB RAM supported by UPS. OS should be Windows. Dedicated Colour scanner with a minimum resolution 200dpi. Scalable Broad Band Internet connectivity with minimum assured speed of 512 kbps.

Necessary security systems should be taken care of A designated Nodal Person to interact with BCA The Private Hospital would be legally responsible for user authentication.

Processing of Claims / Bills by BCA:-

The actual auditing shall start when physical copies containing complete information of these bills are submitted by concerned Hospital to the BCA on behalf of the NIMHANS.

The BCA during the course of the auditing shall restrict the claims as per CGHS rules and regulations. BCA shall also examine in terms of the following:

- * Appropriateness of treatment including screening of patients records to identify unnecessary admissions and unwarranted treatments.
- * Whether the planned treatment is shown as emergency treatment
- * Whether the diagnostic medical or surgical procedures that were not required were conducted by hospital including unnecessary investigations.
- * Maintaining database of such information of NHS beneficiaries for future use.
- * whether the treatment procedures have been provided as per the approved rates and the
- *Whether procedures performed were only those for which permission has been granted.

The BCA shall record their findings and intimate the same to the Hospital concerned with a copy endorsed to NIMHANS. The payment of the bill / claim to the hospital concerned shall be made directly by NIMHANS after receipt of the bills which are duly adjudicated by the BCA.

The Hospital / Centre is required to pay processing fee to the builded in as under:

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Claim Amount Range	Process fee (Rs)
Below Rs. 500.00	7-00
Rs 501 to Rs 1000.00	15.00
Rs 1001 to Rs 5000.00	30.00
Rs 5001 to Rs 10000.00	150.00
Above Rs 1000.00	266.00

10. DUTIES AND RESPONSIBILITIES OF HOSPITALS / CENTERS

It shall be the duty and responsibility of the Hospital / Centre, at all times, to obtain, maintain and sustain the valid registration, recognition and high quality and standard of its services and health care and to have all statutory / mandatory licenses, permits or approvals of the concerned authorities under or as per the existing laws.

11. NON ASSIGNMENT

The hospital / centre shall not assign, in whole or in part, its obligations to perform under the agreement, except with the NIMHANS's prior written consent at its sole discretions and on such terms and conditions as deemed fit by the NIMHANS. Any such assignment shall not relieve the Hospital / Centre from any liability or obligation under this agreement.

12. HOSPITAL'S / CENTER'S INTEGRIT AND OBIGATIONS DURING AGREEMENT PERIOD

THE Hospital's / Centre is responsible for and obliged to conduct all contracted activities in accordance with the Agreement using state- of -the —art methods and economic principles and exercising all means available to achieve the performance specified in the Agreement. The Hospital / Centre is obliged to act within its own authority and abide by the directives issued by the NIMHANS. The Hospital / Centre is responsible for managing the activities of its personnel and will hold itself responsible for their misdemeanors, negligence, misconduct or deficiency in services, if any.

13. LIQUIDATED DAMAGES

- 13.1 The Hospital / Diagnostic Centre shall provide the services as per the requirements specified by the NIMHANS in terms of the provisions of this Agreement. In case of initial violation of the provisions of the agreement by the Hospital / Centre such as refusal of service or direct charging from the NHS Beneficiaries or defective service and negligence, in the first instance, the complaint will be examined by the NIMHANS authorities and if the complaint is found to be true the NIMHANS shall have the right to give a show cause notice to the Hospital to be replied within 10 days of its receipt, and the reply of the Hospital will be examined by a standing committee constituted for the purpose of deciding the appropriateness of the treatment or diagnostic procedures, as the case maybe. If the Committee concludes that the Hospital / Diagnostic Centre has violated the provisions of the Agreement necessary action will be taken for de-recognition of that Hospital. The decision of the Alminans will be final.
- 13.2 For over-billing and unnecessary procedures, the extra amount so charged will be deducted from the pending / future bills of the Hospital / Diagnostic Centre and the NIMHANS shall have the right to issue a written warning to the Hospital / Centre not to do so in future. The recurrence, if any, will lead to stoppage of referral to the Hospital / Diagnostic Centre.

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14. TREATMINATION FOR DEFAULT

- 14.1 The NIMHANS May, without prejudice to any other remedy for breach of Agreement, by written notice of default sent to the Hospital / Centre terminate the Agreement in whole or part:
 - If the Hospital / Centre fails to provide any or all of the services for which it has been recognized a)
 - within the period (s) specified in the Agreement, or within any extension thereof if granted by the NIMHANS as the case may be, pursuant to Condition of Agreement, or If the Hospital / Center fails to perform any other obligation (s) under the Agreement.
 - c) If the Hospital / Center in the Judgment of the NIMHANS has engaged in corrupt or fraudulent practices in competing for or in executing the Agreement.
- 14.2 If the hospital/center found to be involved in or associated with any unethical illegal or unlawful activities, the Agreement will be summarily suspended by NIMHANS without any notice and thereafter may terminate the Agreement, after giving a show cause notice and considering its reply if any, received within 10 days of the receipt of show cause notice.
- 14.3 In case of any violation of the provisions of the Agreement by the Hospital/Center such as (but not limited to), refusal of service, refusal of credit facilities to eligible beneficiaries and direct charging from the NHS beneficiaries, undertaking unnecessary procedures, prescribing unnecessary drugs / tests. deficient or defective service, over billing and negligence in treatment, the NIMHANS shall have the right to de-recognize the hospital/center as the case may be.

15. INDEMNITY

The hospital / Center shall at all times, indemnify and keep indemnified NIMHANS against all actions, suits, claims and demands brought or made against it in respect of anything done or purported to be done by the Hospital / Center in execution of or in connection with the services under this Agreement and against any loss or damage to NIMHANS consequent to any action or suit being brought against the NIMHANS along with (or otherwise), Hospital / Center as a party for anything done or purported to be done in the course of the execution of this Agreement. The Hospital /Diagnostic Center will at all times abide by the job safety measures and other statutory requirements prevalent in India and will keep free and indemnify the NIMHANS from all demands or responsibilities arising from accidents or loss of life, the cause or result of which is the Hospital / Center negligence or misconduct.

The Hospital / Center will pay all indemnities arising from such incidents without any extra cost to NIMHANS and will not hold the NIMHANS responsible or obligated. The NIMHANS may at its discretion and shall always be entirely at the cost of the Hospital Center defend such suit, either jointly with the Hospital / Center or singly in case the latter chooses not to defend the case.

16. PAYMENT

The payment will be made to the Hospital / Center within a period of 20 days from the date of submission of the bill accompanied with all necessary and supporting document. This clause should be read with clause Number 09.

17. MISCELLANEOUS

- 17.1 Nothing under this Agreement shall be construed as establishing or creating between the parties any relationship of Master and Servant or Principal and Agent between the NIMHANS and the Hospital /Center.
- 17.2 The Hospital / Center shall not represent or hold itself out as agent of the NIMHANS.
- 17.3 The NIMHANS will not be responsible in any way for any negligence or misconduct of the Hospital / Center and its employees for any accident, injury or damage sustained or suffered by any NHS beneficiary or any third party resulting from or by any operation conducted by and on behalf of the Hospital / Center or in the course of doing its work or perform their duties under this Agreement or otherwise. A of Bental Sciences (Bengslore) = Dayananda Sagar

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- The Hospital/Center shall notify the Government of any material change in their status and their shareholdings or that of any Guarantor of the Hospital / Center in particular Where such change would have an impact on the performance of obligation under this Agreement.
- 17.5. This agreement can be modified or altered only on written agreement signed by both the parties.
- 17.6. Should the hospital get wound up, partnership is dissolved, the NIMHANS shall have the right to terminate the Agreement. The termination of Agreement shall not relieve the hospital or their heirs and legal representatives from the liability in respect of the services provided by the Hospital during the period when the Agreement was in force.
- 17.7. The Hospital shall bear all expenses incidental to the preparation and stamping of this agreement.

18. NOTICES:

18.1 Any notice given by one party to the other pursuant to this Agreement shall be sent to other party in writing by registered post or by facsimile and confirmed by copy post the other party's address as below.

Director, NIMHANS, Hosur road, Bangalore - 560029

Hospital / Diagnostic Center with Address: DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560078

18.2 A notice shall be effective when served or on the notice's effective date, whichever is later Registered communication shall be deemed to have been served even if it is returned with remarks like refused.Left, premises locked etc.

IN WITNESSES WHERE OF, the parties have caused this Agreement to be signed and executed on the day, month and the year first above mentioned.

In the Presence of

Witnesses

in the presence of

(Witnesses)

Signed by

Registrar

कुलसर्विव / REGISTRAR राष्ट्रीय भानसिक स्वास्थ्य और

NIMHANS विशिष्टा विशास रोड्डाम, वेंगर

National Institute of Montal Health & Neuro Sciences, Burgalura-560 02!

Signed By

For and or behalf of (Hospital / Center)

Duly authorized vide resolution No...... dated.......

of (name of Hospital / Center

Dr. Hemanth .M MDS., Ph.D. PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

PRINCIPAL

Dayananda Sagar College of Beautiful Kumaraswamy La-Bangalore - 560

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore)
(Recognised by Dental Council of India, New Delhi)
ISO 9001: 2008 Certified Institution

MEMORANDUM OF UNDERSTANDING

This memorandum of understanding is entered into on this day of 12-9-2019 between the Department of Pedodontics and Preventive Dentistry. Dayananda Sagar College of Dental Sciences, Shavige Malleshwara hills, Kumaraswamy layout, Bangalore- 560078 and Indian Public School, Faizabad, J P Nagar post, Kanakanagar, Bangalore-560078 represented by the Principal, Indian Public School.

The Department of Pedodontics and Preventive Dentistry, Dayananda Sagar College of Dental Sciences, Bangalore is adopting Indian Public School to provide comprehensive dental care to the students. The memorandum of understanding will be valid for a period of five years.

The terms of this understanding are as under:

- 1. Dental health education will be provided to the staff and students in the school.
- 2. Dental health screening for the school children will be conducted in the school free of cost.
- 3. Treatments like Oral prophylaxis, Topical fluoride application, Restoration of small cavities will be done in the Department of Pedodontics and Preventive Dentistry, DSCDS free of cost to those students referred after screening at school and whose parents consent for the treatment by signing the consent form sent to them through the child.

Head of the Department,

Department of Pedodontics & Preventive Dentistry,
Dayananda Sagar College of Dental Sciences

Paedodontia

Sayananda Sayar College of Dental Sciences
BANGALORE - 78.

Principal

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout, Bangalore - 560 078. Principal

Indian Public School

HIGH SCHOOL

No. 84. Faziabad Yelechanahalli J.P. Nagar Post

700 4/1

ologite.



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



MEMORANDUM OF UNDERSTANDING (MoU)

BETWEEN

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU



AND

SAGAR HOSPITALS



FOR

PROVIDING HEALTH CARE FACILITIES TO STAFF MEMBERS & STUDENTS

As on 12-09-2019



INDIA NON JUDICIAL

Government of Karnataka

e-Stamp

Certificate No. : IN-KA46687992116087R
Certificate Issued Date : 08-Jul-2019 12:19 PM

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Description of Document : Article 12 Bond

Description : MOU

Consideration Price (Rs.) : 0

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First Party : DISTRICT HEALTH AND FAMILY WELFARE OFFICER BLORE

Second Party : PRINCIPAL D S C D S BANGALORE

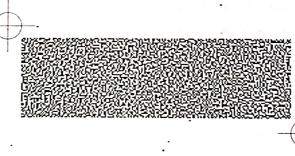
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Oral Health and Bengaluru - Ogyana Bengaluru - Ogyana Health Bengaluru - Ogyana Health Bengaluru - Ogyana Health

Please write or type below this line

Memorandum of Understanding (MOU) for providing Oral Health Care Services

This MEMORANDUM OF UNDERSTANDING is entered on this 29th day March 2019

BY AND BETWEEN:

District Health and Family Welfare Officer (DHO) Department of Health and Family Welfare Services, Bangalore -560009, herein after referred to as the **First Party** (Which expression shall unless it be repugnant to the context or meaning there of be deemed to mean and include their successors, executors, assigns and administrators) of the one part.

AND

Walen Derry and Very Only

PRINCIPAL

Dayananda Sagar College of Dental Sciences

The autheriticity of this Stamp Certificate should be verified at "www.shcilestamp.com". Any discrepance of the Vetails on this Certificate and as the onus of checking the legitimacy is on the users of the certificate.

3 In case of any disorepancy please inform the Competent Authority

Principal, *Dayananda Sagar College of Dental Sciences*, Kumarswamy Layout Bangalore 560078 herein after referred to as the **Second Party** (which expression shall unless it be repugnant to the context or meaning there of be deemed to mean and include their successor, executors, assigns and administrators) of the other part.

WHEREAS

- 1. The First Party is engaged in Health and Family Welfare Services in the state of Karnataka
- 2. The Second Party is affiliated to Rajiv Gandhi University of Health Sciences. Bangalore Karnataka and also recognized by Dental Council of India, New Delhi and ISO 9001-2008 Certified Institution. Since its inception the department of Public Health Dentistry has been involved in the prevention of oral diseases, promotion of oral health to the underprivileged and needy through various outreach activities and school health programmes both in urban and rural areas. The First Party and Second Party have agreed mutually based on the request of second party to utilize the technical expertise of second party for providing Oral Health Care Services at PHC Konanakunte.

NOW THE MEMORANDUM OF UNDERSTANDING WITHNESSETH AND IT IS HEREBY AGREED BY AND BETWEEN THE PARTIES HERETO AS FOLLOWS

1. Roles and Responsibilities of the First Party:

- 1.1 The Government Facility/Hospital Should provide facilities in terms of consultation rooms with water and electricity connection for operation of Dental Services.
- 1.2 For grievances if any the chief Functionary of 2nd Party or Director HFWs or Deputy Director Oral Health Policy and Dental Health shall submit a written complaint to the Principal, *Dayananda Sagar College of Dental Sciences*, Kumarswamy Layout Bangalore 560078 for verification and redressal.

2. Roles and Responsibilities of the Second Party:

2.1 Regular Outpatient services will be offered by the *Dayananda Sagar College dental sciences and Research Center* Kumarswamy Layout Bangalore 560078 on all working days of the Hospital excluding Government holidays, in the following schedule. Monday, Tuesday, Wednesday, Thursday, Friday, Saturday,

Deputy Director Heering Deputy Director Welfare Ber

Dayananda Sagar College of Dental Sciences
Kumaraawamy Layout.

- 2.2 On the above mentioned days the designated team of faculty will be available to the patients in the dental unit at PHC Konanakunte between 9.00AM to 4.00PM for rendering Oral Health Care services
- 2.3 Under the supervision of faculty, post graduate students and interns will take part in all the activities of Dental unit established at government Facility.
- 2.4 Faculty, post graduate students and interns from Dayananda Sagar College of Dental Sciences, Kumarswamy Layout Bangalore 560078, shall provide services to the patients on outpatient basis and will frame guidelines for the treatment of patients depending on the nature of illness. The treatment to such patients shall be as per Standard Treatment Guidelines.
- 2.5 The Second party agrees to provide free OPD Consultation as well as further management of patients.
- 2.6 The Second party shall ensure that the best and complete diagnostic, therapeutic and Follow-up services based on Standard protocol and Dental practices/ recommendations are extended to the beneficiary. It is also mandatory for the provider to assess the appropriate need and subject the beneficiary for treatment/procedure free of cost without causing any burden to First Party. The treatment will be followed as per guidelines from department of Health and Family welfare services. The Second party will be accountable/responsible for all the legal issues regarding the treatment and management of all dental and related procedures carried out by them in the Dental Unit.
- 2.7 The Second Party agrees to render complete oral Health needs for all the beneficiaries who visits the facility which would include Oral screening, including Oral Screening in ANC, Oral prophylaxis, Restorations, extractions, IOPARs, and other necessary treatment including Dantha Bhagya Yojane.
- **2.8** All the equipments, Instrument and logistics required will be borne by the Second Party.
- 2.9 Second Party shall submit monthly reports in accordance with the Statement of Work in the prescribed format to First Party regularly.

3. Standard Scope and Services:

3.1 Dental unit at PHC Konanakunte will be working on all the days of the Hospital excluding Government holidays, Regular Outpatient services will be offered by the *Dayananda Sagar College of Dental Sciences*, Kumarswamy Layout Bangalore 560078. A designated team of faculty, post graduate students and

PRINCIPAL

Dayananda Sagar College of Bontal Sola.

Kumarnewany Layout.

- interns will be available to the patients in the dental unit at *PHC-Konanakunte* between 9.00AM to 4.00PM for rendering Oral Health Care services
- 3.2 Faculty, post graduate students and interns from *Dayananda Sagar College Dental Sciences*, Kumarswamy Layout Bangalore 560078 shall provide services to the patients on outpatient basis and will frame guidelines for the treatment of patients depending on the nature of illness. The treatment to such patients shall be as per Standard Treatment Guidelines.
- 3.3 The Second Party agrees to provide free OPD Consultation as well as further management of patients.
- 3.4 The Second Party shall ensure that the best and complete diagnostic, therapeutic and Follow-up services based on Standard protocol and Dental practices/recommendations are extended to the beneficiary. It is also mandatory for the provider to assess the appropriate need and subject the beneficiary for treatment/procedure free of cost without causing any burden to First Party. The treatment will be followed as per Standard guidelines.
- 3.5 Periodical updates to be communicated to the Deputy Director, Oral Health Policy and Dental Health office authorities on the functioning and status of Dental Unit.

4. Duration of MoU:

4.1 The duration of this agreement shall be for 5 years/or till the faculty appointment are made from the Government, whichever is earlier and shall be renewed unless terminated within the terms of this agreement.

5. General:

31

- **5.1** Settlement of disputes:
 - 5.1.1 In case of dispute arising upon or in relation to or in connection with the agreement between the parties, which has been not been settled amicably in the first place, be referred to Principal Secretary to the government (Health and Family Welfare). Either party may refer the dispute to the Principal Secretary (Health and Family Welfare), who shall give a decision in writing within 30 days of reference of dispute or such extended time as may be deemed fit and proper.

Either party may refer a written decision of the Principal Secretary (Health and Family Welfare) to arbitration (Karnataka arbitration) if aggrieved. If neither party refers the disputes to arbitration within 30 days of the date of such decision, the decision of Principal Secretary

day

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(Health and Family Welfare) will be final and binding on both the parties.

5.1.3 The arbitration shall be held in accordance with provision of the arbitration and conciliation Act 1996.

6. Third Party Rights

- 6.1 Nothing in this agreement shall be taken as granted in any rights explicitly or implicitly whether contractual or statutory other than Commissioner HFWs or Dayananda Sagar College of Dental Sciences, Kumarswamy Layout Bangalore 560078.
- 6.2 On expiry of the validity of MoU, the access provided to Dental unit would be deactivated unless revived by Commissioner HFWs.

7. Costing

- 7.1 PHC Konanakunte shall provide facilities in terms of consultation rooms with water and electricity connection for operation of Dental Services.
- **7.2** No Financial assistance shall be provided by DHO/Commissioner HFWs/PHC Konanakunte to *Dayananda Sagar College Dental Sciences*, Kumarswamy Layout Bangalore 560078.

8. Intellectual Property Rights

The Parties acknowledge that nothing in this MoU shall affect ownership of any intellectual property rights.

9. Notice of Communication

- 9.1 No claim shall be preferred by *Dayananda Sagar College of Dental Sciences*, Kumarswamy Layout Bangalore 560078 in any court or tribunal against Commissioner HFWs without giving 60 days' notice as contemplated in section 80 of CPC after the award of Arbitration
- 9.2 If at any time during the continuance of this MoU, the performance in whole or in part by any of the parties to any of the objectives under this MoU is prevented or delayed by reason of governmental decision, war, hostilities, act of a public enemy, civil commotion, fire, flood, explosion, epidemics, quarantine restrictions, disturbance in supplies from normally reliable source (including bytath polynot limited to electricity, water, fuel and the like), strike, lockout or other exacts beyond the reasonable control of the party concerned (hereinafter referred to as "the Eventuality"), then notice of such eventuality shall be given by the affected party to the other parties within 15 days from the date of occurrence thereof.

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9.3 In the event of any of the parties not being able to by reason of an eventuality, meet any of its obligations under this MoU, such obligation shall be suspended for as long as the inability to continue or any date mutually agreed between the parties. This MoU may be terminated by any of the parties by providing Three (3) month's written notice if the inability to undertake activities under this MoU continues even after expiry of 90 days since the commencement of eventuality.

10. Termination.

Either party may at any time at its sole discretion giving 3 months prior notice may terminate this MoU. Upon termination the premises at PHC Konanakunte shall be returned back to PHC Konanakunte.

Upon termination of the contract, dental chairs, equipments, instruments and what all is provided, installed or stored by Dayananda Sagar College of Dental Sciences would be taken back by Dayananda Sagar College of Dental Sciences

11. Indemnity

The Second party will be accountable/responsible for all the legal issues on account of bodily injury, death or damage to tangible personal property arising in favour of any person, corporation or other entity attributable to the negligence or willful default in performance or non-performance under this agreement including regarding the treatment and management of all dental and related procedures carried out by them in the Dental Unit.

12. Amendments & Modifications

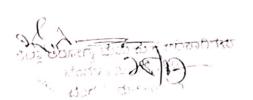
Any of the parties may request in writing for a revision, amendment or modification of all or any part of this MoU. Any revision, amendment or modification agreed mutually between the parties shall be in writing and shall come into force on such date as determined by the parties and shall for part of this MoU.

13. Assignments or Transfer

No signatory of this MoU shall sub-contract or transfer any part of this MoU without prior written approval of the other signature.

14. Liabilities

Each party shall be solely responsible for any, all claims and/or damages of its own in connection with this MoU unless such claims and damages arise as a result of the misconduct, fault, negligence of any of the parties or breach of any of the terms and conditions of this MoU.



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Dayananda Sagar College of Doutal Science

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15. Confidentiality:

- a) It is agreed by the parties that during the term of this MoU, all information shall be held in confidence by both the parties and they shall not disclose to any third party without mutual agreement,
- b) Nothing in this section shall prevent any party from disclosing any information, under any law or in pursuance of any decree or order of any court or tribunal require disclosing.

In witness whereof, the said parties hereto have set their hands at the place and on this day,

Signature Signature

District Health & Family Welfare Officer

For PHC Konanakunte

Bangalore

Bignature IPAL

Dayananda Sagar College of Dental Sciences

Kumaripal my Layout,

Dayananda Sagar Cottele of Bental Sciences,

Kumarswamy Layout Bangalore 560078

Witness:

1. Name: DR PRAMILA Ale
Signature: Planica Ha
Address DID, oral health
Anandene carele
Mobile Number: Bicca

2. Name: Dr. Shereth chandra & Signature: Shereth chandra & Address programal Nobal Africa NOTE. Bringelic is vivos

Mobile Number: 96201-62463

Witness:

2. Name: Dr. Shylaja KS.

Signature: Slight

Address Dental health officer

CHC, Falhalli, Rangalote

Mobile Number: 9740464789.

2. Name: Dr. NITHIN, N. BHASKAR Signature: Didni. D. Otoshal

Address DAYANANDA SAGAR WLIELE OF DENTAL SCIENCES,

ES LAMONT, BANGALORE -78

Mobile Number: 9980524729

Place: Bangalore

Dated: 25 | 7 | 2019

Deputy Director
Deputy Director

J Health Policy & Dental Health

J Health Policy & Welfare Services

Bengalum 109

MEMORANDUM OF UNDERSTANDING

This **Memorandum of Understanding** (herein after called as the 'MOU') is entered in to on this the **12-09-2019**, by and between

Dayananda Sagar College of Dental Sciences (DSCDS), Kumaraswamy Layout, Bangalore 560078, Karnataka. The FIRST PARTY represented here in by its Principal, (here in after referred as 'First Party', the institution which expression, unless excluded by or repugnant to the subject or context shall include its successors—in-office, administrators and assigns).

AND

Sagar Hospitals, Kumaraswamy Layout, Bangalore 560078, Karnataka, the Second party, and represented herein by its Medical Director, Dr. Venkatesh Vikram, (herein after referred to as "Second Party").

About Dayananda Sagar College of Dental Sciences

Dayananda Sagar College of Dental Sciences was formerly affiliated to Bangalore University & presently to Rajiv Gandhi University of Health Sciences, approved & recognized by Dental Council of India. DSCDS is located in the heart of the city & is equipped with the state of the art equipments to treat Dental & Oral Diseases. **DSCDS** has academically sound faculty in all the branches of Dentistry with good teaching and clinical experience.

The College offers the Bachelor of Dental Surgery (BDS) course that is of 5 years duration including one year of compulsory rotatory internship. The College offers Postgraduate course in 7 specialties of Dentistry.

About Sagar Hospitals

Sagar multispecialty hospital is a state-of the-art super – specialty hospital having 200 beds for the indoor stay of the patients. A 128 slice CT Scan that helps achieve a high degree of efficiency and accuracy in diagnostic procedures for cardiac and other arterial problems, the imaginative concept of 'birthing suit', a forerunner has set standards for pre and post natal care for the modern woman.

Facilities like video conferencing with relatives living in any part of the globe from the ICU'S sophisticated cubicles provide a new experience to patients.

The nursing staff, a product of Sagar group's own nursing school lends to the atmosphere of caring and competence towards providing the best medical care for its patients.

(First Party and Second Party are hereinafter jointly referred to as 'Parties' and individually as 'Party') as

WHEREAS:

- A) First Party is a Higher Educational Institution named: Dayananda Sagar College of Dental Sciences.
- B) First Party & Second Party believe that collaboration and co-operation between themselves will promote more effective use of each of their resources, and provide each of them with enhanced opportunities.
- C) Both Parties, being legal entities in themselves desire to sign this MOU for advancing their mutual interests.

NOW THIS MEMORANDUM OF UNDERSTANDING WITNESSETH AS FOLLOWS A. Joint Responsibility

1. Cooperation: Both Parties are united by common interests and objectives, and they shall establish channels of communication and co-operation that will promote and advance their respective operations within their related constituents. The Parties shall keep each other informed of potential opportunities and shall share all information that may be relevant to secure additional opportunities for one another.

Activities under the scope of Dayananda Sagar College of Dental Sciences (First Party)

- DSCDS will work as a knowledge partner and will be the hub for Research, Training Demonstration and Dissemination of information through its student and faculty base.
- 2. **DSCDS** will provide dental treatment at concession rate to Sagar Hospital faculties visiting to dental college.
- 3. The designated faculty of dental college will provide dental treatment to patients visiting to dental unit at Sagar hospitals. The medical faculty attached to Sagar hospitals will contribute for knowledge and guidance in management of the patients.

Activities under the scope of Sagar Hospitals (Second Party)

- 1. Sagar hospitals will provide concession in health care facilities for staff members and students of Dayananda Sagar College of Dental Sciences
- 2. Sagar hospitals will contribute for knowledge dissemination and guidance in management of dental patients.

AMENDMENTS TO THE MOU:

No amendment or modification of this MoU shall be valid unless the same is made in writing by both the parties or their authorized representatives and specifically stating the same to be an amendment of this MoU. The modifications / changes shall be effective from the date on which they are made / executed unless otherwise agreed to.

ASSIGNMENT OF THE MOU

The rights or / and liabilities arising to any part of this MoU shall not be assigned except with the written consent of the other party and subject to such terms and conditions as may be agreed upon between the involved parties.

DISPUTE RESOULTION

Any divergence or difference derived from the interpretation or application of the MoU shall be resolved by arbitration between the parties as per the Arbitration Act, 1996. The place of the arbitration shall be at District Head Quarters of the First Party. This undertaking is to be construed in accordance with Indian Law with exclusive jurisdiction in the Courts of Bangalore.

VALIDITY

The agreement will be to form and terminate by mutual consent. Both Parties may terminate this MOU upon 30 calendar days' notice in writing. In the event of Termination, both parties have to discharge their obligations. This MoU will last for five years from the date of agreement.

DATE: 12 September 2019 (First November Two Thousand Twenty-One)

First Party

Second Part

AGREED:

For Dayananda Sagar College of Dental Sciences

For Sagar Hospitals

RRINCIPAL

Dr. Hemanth .M MDS., Ph.D.

PRINCIPAL

Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

MEDICAL DIRECTOR,

Medical Director
Sagar Hospitals - DSI
Banashankari, Bangalore-78.

Dayananda Sagar College of Dental Sciences	Sagar Hospitals
Address:	Address:
Kumaraswamy Layout, Bangalore 560078, Karnataka.	Kumaraswamy Layout, Bangalore 560078, Karnataka.
Contact Detail: 9845459666	Contact Details: 9972028550
E-mails: principal@dscds.edu.in	E-mails: infobsk@sagarhospitals.in
Website: dscds.edu.in	Website: www.sagarhospitals.in

PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore)
(Recognised by Dental Council of India, New Delhi)
ISO 9001: 2008 Certified Institution

DAYANANDA SAGAR INSTITUTIONS

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Campus – 1, Kumaraswamy Layout, Bangalore 560 078, Karnataka Website: www.dscds.edu.in/Tel: 080-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

BETWEEN

DAYANANDA SAGAR COLLEGE OF PHYSIOTHERAPY, BENGALURU

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU

IPAI

As on 09/11/2020

eyənanda Sagar College of Physiother, Bangalore - 5-

(ANIL JOHN, 9986033863)

PRINCIPAL

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore 560 078.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26661104, Fax: 080-26663654

Website: www.dayanandasagar.edu

Now, in accordance to the mutual desire for the treatment of Faculty and students of Dayananda Sagar College of dental sciences and Physiotherapy College, we agree to the following statement of intent to provide the required dental and physiotherapy treatment at the free of cost. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 09/11/2020 and will stand effective from this date onwards.

Principal,

Dayananda Sagar College of Physiotherapy, Bengaluru

PRINCIPAL

Sayananda Sagar Gollege of Physiotherapy Bangalore - 560 679

(Mr. ANIL JOHN).

Prof. Dr. Hemanth M

MDS, Ph.D

Principal

Dayananda Sagar College of Dental Sciences, Bengaluru

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 500 078.



Govt. of Karnataka

BANGALORE MEDICAL COLLEGE & RESEARCH INSTITUTE [AN AUTONOMOUS INSTITUTE OF GOVT. OF KARNATAKA]

Fort, K.R. Road, Bangalore - 560002.

Telephone: 26700810; Tele fax 26704342

email: director_bmcri@yahoo.co. in

No. BMCRI/PS/45/2019-20



Office of the Director cum Dean Bangalore, Dated: 18/06/2019

To

Principal
Professor & Head,
Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout
Bangalore-560 078

Sir,

Sub:-

Collaborative Work with Dept of Forensic Medicine-reg

Ref:

1. Your Letter Dated 14.03.2018

* * * *

With reference to the above subject under ref, we have decided to execute a MOU initially for a period of six months on a trial basis. Further if found beneficial to both the institutes we may extend and execute the MOU for longer period.

So you are requested to re-submit the MOU for the period six months.

Thanking You

Yours faithfully,

Director cum Dean

Bangalore Medical College & Research Institute, Bangalore.





GOVT. OF KARNATAKA

BANGALORE MEDICAL COLLEGE & RESEARCH INSTITUTE

[An Autonomous Institute of Govt. of Karnataka] K.R. Road, Fort, Bengaluru – 560 002.

2: 080-2670 0810, **2** Fax: 080-2670 4342.

E-mail: director_bmcri@yahoo.co.in Web: www.bmcri.org

Office of the Director cum Dean

"ಪ್ಲಾಸ್ಟಿಕ್ ಬಳಸಬೇಡಿ"

Date: 07.09.2020

Ref. No.: BMCRI/PS/45/2019-20

The Principal,

Professor & Head,

Dayananda Sagar College of Dental Sciences,

Kumarswamy Layout,

Bengaluru-560 078.

Sir,

Sub: Extension of MoU between DSCDS and BMCRI.

Ref: Your office letter No. DSCDC/2020/294, dated: 31.08.2020.

** * **

With reference to the above, permission was accorded to execute an MoU between Department of Forensic Odontology DSCDS and Department of Forensic Medicine BMCRI for a period of six months on a trial basis as requested during July 2019.

With reference to your letter dated: 31.08.2020, it is once again requested by you for the extension and continuation of MoU between the above said Institutions for a period of two years.

Hence, it has been decided and permitted to extend and continue the above said MoU between BMCRI and DSCDS for a period of two years from the date of MoU for the benefit of the students and faculty of both the Departments with a request to submit the Memorandum of Understanding (MoU) as per terms and conditions to this office.

Thanking you,

Yours faithfully

Dean cum Director

Bangalore Medical College &

Research Institute, Bengaluru.

The First & Second parties shall collaborate with each other to provide space and classroom requirements as and when required by either party to conduct classes, seminars, etc. The First & Second parties shall also be allowed to constructively participate & actively contribute by providing access to all Continuing Dental Education (CDE), Continuing Medical Education (CME), Workshops, Conventions& Conferences that will be hosted by either of them in their respective institutions to the other party which are related to the field of Forensic Medicine & Forensic Odontology.

This MOU is purely based on the grounds of academic interest & purpose.

DURATION

This MOU is at-will and may be modified by mutual communication & understanding of authorized officials from the either of the involved parties. This MOU shall become effective upon signature by the authorized officials from both parties and will remain in effect for a period of Six months. The MoU maybe renewed after assessment of the productivity of the MoU by both parties through mutual communication & understanding.

In Witness whereof, the duly authorized representatives of both Institutions have signed this MoU at Bangalore, India on the 22nd of July 2019, in two original copies in English.

FOR DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES (DSCDS):

Dr. Krishnanand P. Sens MPSS MDS. Professor & Head, Forensig Odontology,

Department of Oral Pathology Dayananda Sagar College of Dental Sciences Kumaraswamy Layout.

Bangalore - 560 078.

Dr. Hemanth MMDS, PhD PRINCIPAL, DSCDS

PRINCIPAL

Dayananda Segar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.

FOR BANGALORE MEDICAL COLLEGE & RESEARCH INSTITUTE (BMCRI):

WHEN WO CLESKY WELL STATE Botton aftern and Decho

Dr. Satish H SMBBS, MS (ENT) **DEAN & DIRECTOR, BMCRI** DIRECTOR CUM DEAN BANGALORE MEDICAL COLLEGE AND RESEARCH INSTITUTE

Page | 2

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) sets for the terms and understanding between the Principal, Dayananda Sagar College of Dental Sciences represented by the Head, Department of Forensic Odontology, Dayananda Sagar College of Dental Sciences, hereafter referred to as the 'First Party' and Director & Dean, Bangalore Medical College & Research Institute, Bangalore represented by the Head, Department of Forensic Medicine, Bangalore Medical College & Research Institute, Bangalore, here after referred to as the 'Second Party' to Collaborate in the field of Forensic Odontology.

BACKGROUND

Forensic odontology is established as an indispensable science in medico-legal matters and in areas of individual identification. The dental tissues are often preserved even if the deceased person is skeletonized, decomposed, burnt, or dismembered. Various methods have been developed to determine age, sex, and ethnicity of the person, using dental tissues. Forensic Odontology offers very specific analyses & tools to help in identification, gender determination, age estimation, bite mark analysis in cases of abuse, etc.

PURPOSE

This MOU will entail the First party to collaborate with the Second party in cases for providing expert dental opinion and services related to the following mentioned areas of interest namely, Dental Age estimation, Forensic dental radiography, Bite-mark analysis, Dental autopsy, Disaster victim identification, Comparative dental identification & Facial reconstruction. This collaboration will purely be on a 'On Call' basis as and when a dental opinion is required. None of these services offered by the First party will be charged. They will all be purely honorary in nature.

All the above mentioned services for the First party will be carried out by Dr.Krishnanand PS, who is qualified with a Fellowship in Forensic Odontology after having completed his Post-Graduate Dental Degree, MDS, in Oral & Maxillofacial Pathology.

The First party will post Bachelor of Dental Surgery (BDS) internees on a rotational basis asper the schedule & convenience of the Second party to help in co-ordination of cases of interest. The Second party shall provide the First party with access to a predetermined number of Autopsy procedures for each batch of posted BDS internees for the betterment of their clinical experience resulting in the overall betterment of their knowledge in terms of Forensic Odontology.

Any and all clinical material, data, photographs required by the First party will be procured with prior permission of the Second party. All the material in the form of Clinical data, Photographs, etc procured by the First party should obtain clearance from the Ethical Committee of BMCRI before it could be used in any sort of scientific publication.

Page | 1

H.P.S MDS. RINCIPAL Oral Pethylayananda Sagar College of Dental A mb toleton are . . 200 dos. do



DAYANANDA SAGAR COLLEGE OF ENGINEERING





MEMORANDAM OF UNDERSTANDING

This MEMORANDOM OF UNDERSTANDING ("MoU") is made and entered into effective as of on 18.01.2021 by and between

DAYANANDA SAGAR COLLEGE OF ENGINEERING

Kumarswamy Layout, Bangalore – 560078

and

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCE

Banashankari, Bangalore – 560078

- 1. This agreement will be valid for a period of 3 years. However termination can be resorted to by the parties by giving one month's notice on either side.
- 2. Students of Medical Electronics will undergo internship program. They will undergo training, hands on experience on equipment, project work in batches & visit at their convenience.
- 3. At the end of the training the students will be given a completion certificate by Dayananda Sagar college of Dental Science and the Department of Medical Electronics, DSCE.
- 4. Sharing the equipment to be disposed, or under repair equipment for potential Biomedical engineering and / or frugal instrumentation as has been done in the recent past and will continue for the upcoming semesters.

5. Knowledge exchange programs will be carried out on fixed frequency where faculty from Medical Electronics department & doctors will give talks, which will help technicians, doctors, students & clinicians

For Dayananda Sagar College of Dental Science

PRINCIPAL

Dayananda Sagar College of Dental Sciences Authorised Signatory Layout,

Bangalore - 560 078.

Date:

Dayananda Sagar College of

Engineering Principal Dayananda Sagar College of Engineering Kumaraswamy Lavout Bangalore -560 111

ಸಾರ್ವಜನಿಕ ಶಿಕ್ಷಣ ಇಲಾಖೆ



ಕರ್ನಾಟಕ ಪಜ್ಞಕ್ ಸ್ರೂ

ಹೊಸಯಳನಾಡು-577 598.

ಹಿರಿಯೂರು ತಾಲ್ಲೂಕು, ಚಿತ್ರದುರ್ಗ ಜಿಲ್ಲೆ. ದೈಸ್ ಕೊಡ್ : 29130319003

xo2:21/2021-22

ದಿನಾಂಕ: 08-06-2021

ಒಪ್ಪಂದದ ಕರಾರು ಪತ್ರ

ಹೊಸಯಳನಾಡು ಹಿರಿಯೂರು ತಾಲ್ಲೂಕು ಕರ್ನಾಟಕ ಪಜ್ಞಿಕ್ ಸ್ಕೂಲ್ ನಲ್ಲಿ ಇರುವ ಮಕ್ಕಳಿಗೆ ಉಚಿತವಾಗಿ ದಂತ ತಪಾಸಣೆ ಹಾಗೂ ಚಿಕಿತ್ಸೆ ನೀಡಲು ಕರ್ನಾಟಕ ಪಬ್ಲಿಕ್ ಸ್ಕೂಲ್ ಪ್ರಾಂಶುಪಾಲರು ಇವರು ಜಂಟಿ ಸಭಾಗಿತ್ವದಲ್ಲಿ ಉತ್ತಮ ಸೇವೆ ನೀಡಲು ಐದು ವರ್ಷದ ಅವಧಿಗೆ ಒಪ್ಪಂದದ ಒಪ್ಪಿಗೆ ಪತ್ರ ಪಡೆಯಲಾಗಿದೆ " ಪ್ರಾಂಶುಪಾಲರು ಕರ್ನಾಟಕ ಪಬ್ಲಿಕ್ ಸ್ಕೂಲ್" ಇವರನನ್ನು ಮೊದಲನೇಯ ಪಕ್ಷದಾರರು ಎಂದು ಕರೆಯಲಾಗಿದೆ. **"ಪ್ರಾಂಶುಪಾಲರು ದಯಾನಂದ ಸಾಗರ ದಂತ ಮಹಾವಿದ್ಯಾಲಯ"** ಇವರನ್ನು ಎರಡನೇಯ ಪಕ್ಷಕಾರರು ಎಂದು ಕರೆಯಲಾಗಿದೆ ಹಾಗೂ ಅದರಂತೆ 8 ನೇ ಜೂನ್ 2021 ರ ಅವಧಿಯಿಂದ ಈ ಒಪ್ಪಂದದ ಎರಡು ಪಕ್ಷದಾರರು ಈ ಕೆಳಕಂಡಂತೆ ಸೇವೆಗಳನ್ನು ನೀಡಲು ಒಪ್ಪಿರುತ್ತಾರೆ.

ಮೊದಲೇಯ ಪಕ್ಷದಾರರು

ಕರ್ನಾಟಕ ಪಬ್ಲಿಕ್ ಸ್ಕೂಲ್, ಹೊಸಯಳನಾಡು ಹಿರಿಯೂರು ತಾಲ್ಲೂಕು ಇದು ಒಂದು ಸರ್ಕಾರಿ ಶಾಲೆಯಾಗಿದ್ದು ಹಿರಿಯೂರು ತಾಲ್ಲೂಕಿನ ಸುತ್ತ–ಮುತ್ತ ಎಲ್ಲಾ ಹಳ್ಳಿಯ ಮಕ್ಕಳಿಗೆ ಉಚಿತವಾಗಿ ವಿದ್ಯೆ ಮತ್ತು ಊಟವನ್ನು ನೀಡುತ್ತಿದೆ. ಇದಲ್ಲದೆ ಮಕ್ಕಳ ದೈಹಿಕ, ಮಾನಸಿಕ, ಸಾಮಾಜಿಕ, ಹಾಗು ಸಾಂಸ್ಕೃತಿಕ ಬೆಳವಣಿಗೆಗಾಗಿ ವಿವಿಧ ತರಹದ ಆಟ–ಪಾಠಗಳು ಮತ್ತು ಕಂಪ್ಯೂಟರ್ ಲ್ಯಾಬ್ ಸೌಲಭ್ಯವನ್ನು ಕಲ್ಪಿಸಲಾಗಿದೆ.

- 1. ಈ ಒಡಂಬಡಿಕೆಯ ಅಡಿಯಲ್ಲಿ ಶಾಲೆಯು ದಂತ ತಪಾಸಣೆ ಹಾಗೂ ಚಿಕಿತ್ತೆಗಾಗಿ ಶುಚಿಯಾದ ಬೆಳಕಿರುವ ಜಾಗ ನೀರು ಮತ್ತು ವಿದ್ಯುತ್ ನೀಡಬೇಕಾಗುತ್ತದೆ. ವಿದ್ಯುತ್ ಇಲ್ಲದ ಪಕ್ಷದಲ್ಲಿ ಜನರೇಟರ್ ಉಪಯೋಗಿಸಲು ಪೆಟ್ರೋಲ್ ನೀಡಬೇಕಾಗುತ್ತದೆ.
- 2. ದಂತ ವೈದ್ಯರಿಗೆ ಊಟ ತಿಂಡಿ ಮತ್ತು ಶುಚಿಯಾದ ಶೌಚಾಲಯಗಳ ವ್ಯವಸ್ಥೆ ಮಾಡಿಕೊಡಬೇಕಾಗುತ್ತದೆ.
- 3. ಈ ಒಡಂಬಡಿಕೆಯಲ್ಲಿ ಏನೇ ಕುಂದು ಕೊರತೆ ಬಂದರು ಕರ್ನಾಟಕ ಪಬ್ಲಕ್ ಸ್ಕೂಲ್ ಪ್ರಾಂಶುಪಾಲರು ಮತ್ತು ದಯಾನಂದ ಸಾಗರ ಪ್ರಾಂಶುಪಾಲರಿಗೆ ಗಮನಕ್ಕೆ ತರಬೇಕು
- 4. ಮಕ್ಕಳಿಗೆ ಚಿಕಿತ್ತೆ ನೀಡಲು ಅವರ ತಂದೆ/ತಾಯಿ ಸಹಿಯಿರುವ ಒಪಿಗೆ ಪತ್ರ ನೀಡಬೇಕು ಅಥಾವ ತಂದೆ /ತಾಯಿಯನ್ನು ಚಿಕಿತ್ಸೆ ಮಾಡುವ ಸಮಯದಲ್ಲಿ ಹಾಜರಿರಲು ತಿಳಿಸಬೇಕು.

Dr. Hemanth .M MDS., Ph.D. PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout,

Bangalore - 560 078.
Scanned with OKEN Scanner

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES (Affiliated to Rájiv Gandhi University of Health Sciences, Kamataka, Bangaloze)

(Recognised by Sental Council of India, New Delh.) SOUND 2008 Continue technical

pscps/2021

March 5, 2021

To: The Commissioner, Bruhat Bengaluru Mahanagara Palike, Bengaluru.

Respected Sir,

Sub: Consent for Renewal of Memorandum of Understanding at NR Colony UPHC, Bangalore

With respect to the above subject, I would like to bring to your kind notice that Dayananda Sagar College of Dental Sciences, Bangalore has been associated with N.R. Colony UPHC and Maternity Hospital from the past 4 years and has been catering to the needy for all dental concerns. In this regard, I wish to inform you that in the past 2 years 1818 patients have been screened for various dental diseases and 718 patients have been treated for the same. This is in spite of the GOVID 19 pandemic. We have reopened the dental centre again 2 months ago and have already been carrying out the routine dental procedures. We will be doing around 10-15 Rout Caral Treatments (RCT) a month along with other treatments that are being provided. The Memorandum of Understanding is due for renewal in March 2021. I would like to give my consent for the continuation of the MOU for the next 3 years so that the Dental College can continue the provide treatment facilities free of cost to all

Kindly do the needful and oblige

Thanking you

Yours Sincerely,

Prof. Dr. Hemanth.M M.O.S, Ph.O

PRINCIPAL

SENATE MEMBER - R.G.U.H.S

AL Daysmands Sagar (Tellife of Dental School Kumarasasiny Layout,

Baugalore - 560 078.

PRINCIPAL

ananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Snavige Malleshwara Hills, Kumaraswarny Layout, Bangatore - 560 078 Phone +91 80 26663654 / 26913718 / 26661104, Fax 080-26663654

Website I www.dayanandesagar.edu

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Raily Gandhi University of Health Sciences, Karronesa, Bascistore).
(Recognised by Dental Council of India, New Delhi).
ISO 9001 - 2008 Certified Institution.

05005/2021/

February 9, 2003

To, The Commissioner, Bruhath Bengaluru Mahanagara Palike, Bengaluru

Respected Sir,

Sub: Consent for Renewal of Memorandum of Understanding at NR Colony UPHC, Bengaluru

With respect to the above subject, I would like to bring to your kind notice that Dayananda Sagar College of Dental Sciences has been associated with NR Colony UPHC and Maternity home from the past 4 years and have been catering to the needy for all dental concerns. In this regard I would wish to inform you that in the past 2 years 1818 patients have been screened for various dental diseases and more than 700 patients have been treated for the same. This is inspite of the COVID 19 pandemic. We have reopened the dental centre again two months ago and are already carrying out the routine dental procedures. The Memorandum of Understanding is due for renewal in March 2021. I would like give my consent for the continuation of the MOU so that the dental college can continue to provide dental treatment facilities to all. Kindly do the needful.

Thanking You.

Yours Sincerely.

Dr. Hemanth M. Mos, Ph.D.

Principal

Shavige Malleshware Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone +91 80 26663654 / 26913718 / 26861104, Fax 080 26663654

Websile www.dayanandasagar.edu

PRINCIPAL

Devananda Sagar College of Bental Sciences

Kumaraswamy Layout, Bangalore - 560 078.



CONFIDENT DENTAL LABORATORY PVT LTD.

DAYANANDA SAGAR INSTITUTIONS

Dayananda sagar college of dental sciences

Campus - 1, Kumaraswamy Layout, Bangalore 560078, Karnataka

Website: www.dscds.edu.in / Tel: 808-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

Between

CONFIDENT DENTAL LABORATORY PVT LTD.

And

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU

As on 08/11/2021

#15, Pete Channappa Indl.Este., Magadi Main Road, Kamakshipalya, Bangdi Wang College of Pental Scient Scien

Now, in accordance to the mutual desire to promote and develop activities between two centres, namely Confident Dental lab and the Dayananda Sagar College of Dental Sciences and Hospital, we agree to the following statement of intent on technology and Research based educational training programme for the faculty and students in using the Confident digital lab. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

- 1. The two said institutions agree to the following general areas of interest and cooperation:
 - a. Sharing technical infrastructure with regard to using the Laboratory and R& D facilities at Confident dental lab , Bengaluru.
 - b. Sharing of Intellectual expertise for skill oriented training of Faculty, under Graduate and postgraduate Students
 - c. Sharing of knowledge and promotion of skill based training in the field of Research and Development for the benefit of Post Graduate Students as well as per the existing University requirements.
 - d. Joint promotion of each other's' expertise and capabilities

2. Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 08/11/2021 and will stand effective from this date onwards.

Confident Dental

Bengaluru

(DR. ASHISH SHETTY)
9886159790

Prof. Dr. Hemanth M

MDS, Ph.D

Principal

Dayananda Sagar College of

Dental Sciences, Bengaluru

PRINCIPAL

Dayananda Sagar College of Bennal Sciences

Kumaraswamy Layout, Bangalore - 500 078.



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Raiiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



DAYANANDA SAGAR INSTITUTIONS

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Campus – 1, Kumaraswamy Layout, Bangalore 560 078, Karnataka

Website: www.dscds.edu.in/Tel: 080-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

BETWEEN

DAYANANDA SAGAR COLLEGE OF PARA MEDICAL SCIENCES, **BENGALURU**

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU

As on 08/03/2022

PRINCIPAL

Coyananda Sagar College of Paramedical Sciences (MIS. SWATI PRAIAD) Kumara Swamy Layout, Bangaiore-560 076

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078,

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111. Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 93035 E-mail:principal@dscds.edu.in Website:www.dscds.edu.in

Now, in accordance to the mutual desire to promote and develop activities between two centres, namely Dayananda sagar college of para medical sciences and the Dayananda Sagar College of Dental Sciences and Hospital, we agree to the following statement of intent on technology and Research based educational training programme for the students. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

- 1. The two said institutions agree to the following general areas of interest and cooperation:
 - a. Sharing technical infrastructure with regard to using the Laboratory and R & D facilities at Dayananda sagar college of dental sciences, Bengaluru.
 - b. Sharing of Intellectual expertise for skill oriented training of under Graduate and postgraduate Students
 - c. Sharing of knowledge and promotion of skill based training in the field of Research and Development for the benefit of Student as per the existing University / Board requirements.
 - d. Joint promotion of each other's' expertise and capabilities

2. Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 08/03/2022 and will stand effective from this date onwards.

Principal,

Dayananda sagar college of para medical sciences.

Bengaluru

PRINCIPAL

Cayananda Sagar College of Paramedical Science

Kumara Swamy Layout, Bangaiore-560 076

Prof. Dr.Hemanth M MDS, Ph.D

Principal

Dayananda Sagar College of Dental Sciences, Bengaluru

PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 500 078

(Mus. SWATI PRASAD, 9036004133)



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



DAYANANDA SAGAR INSTITUTIONS

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Campus - 1, Kumaraswamy Layout, Bangalore 560 078, Karnataka

Website: www.dscds.edu.in/Tel: 080-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

BETWEEN

CONFIDENT DENTAL EQUIPMENTS PVT. LTD., BENGALURU

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU

Moksha Shetty As on 08/11/2021

For Coeffident Dental Equipments Pvt. Ltd.

PRINCIPAL Dayananda Sagar College of Sental Sciences Kumaraswamy Layout, Bangalore - 500 078.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111. Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 93035

E-mail:principal@dscds.edu.in Website:www.dscds.edu.in

Now, in accordance to the mutual desire to promote and develop activities between two centres, namely Confident Dental equipments pvt. Ltd. and the Dayananda Sagar College of Dental Sciences and Hospital, we agree to the following statement of intent on technology and Research based educational training programme for the faculty and students. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

- 1. The two said institutions agree to the following general areas of interest and cooperation:
 - a. Sharing technical infrastructure with regard to using the facilities at Confident dental equipments pvt. Ltd., Bengaluru.
 - b. Sharing of Intellectual expertise for skill oriented training of Faculty, under Graduate and postgraduate Students
 - c. Sharing of knowledge and promotion of skill based training in the field of Research and Development for the benefit of Post Graduate Students as well as per the existing University requirements.
 - d. Joint promotion of each other's' expertise and capabilities

2. Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 08/11/2021 and will stand effective from this date onwards.

Moksha Shetty

Confident Dental Equipments Pvt. Ltd.,

For Conflident Dental Landing Pvt. Ltd.

Director

or Hemanth M

MDS, Ph.D

Principal

Dayananda Sagar College of Dental Sciences, Bengaluru

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 500 078.

MEMORANDUM OF UNDERSTANDING (MoU)

OF ACADEMIC AND SURGICAL CO-OPERATION BEIWIEN

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BANGALORE

AND

DR. CHANDRAMMA DAYANANDA SAGAR INSTITUTE OF MEDICAL SCIENCES (CDSIMER) AND HOSPITAL, HAROHALLI

Prof. Dr. Hemanth M MDS, Ph.D

13

Principal

Dayananda Sagar College of Deptal Sciences, Bangalore

Prof. Dr. A. C. Ashok

Principal & Deap

Dr. Chandramma Dayananda Sagar Institute of Medical Education and Research (CDSIMIER), Haroballi

As on 01/09/2021

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 078. Phone: +91 80 26663654 / 26913718 / 26861104, Fax: 080-26663654

Website: www.dayanandasagar.edu

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

- contents will be carefully scrutinized by both Parties to evaluate the value for the proposed joint effort, the qualifications of the proposed decision is made by both Parties to approve the proposed decision is made by both Parties to approve the proposed project as a possible joint effort, both Institutions will actively seek outside funding for the proposed securing funding deemed sufficient by each Institution.
- d) In such joint projects between the two Institutions, care will be taken to assure that there will be parity in the numbers and institutional ranks of the personnel involved. Any resulting publications shall include an acknowledgement of the contributions of each Institution in accordance with customary scientific practices.
- All such discussions of the concerned Parties regarding these matters will at all
 times strive to preserve a harmonious and continuing relationship between the
 institutions.
- the Institutions agree to comply with all applicable laws that pertain to occessary becases certification standards, and legal considerations with regard to research where applicable.
- g) If and when any collaborative research projects/ funding proposals are undertaken, a detailed collaboration agreement will be negotiated between the two institutions.
- 3. During Post Graduate training, when posted, the Post Graduate students must comply with all of the policies, procedures, and rules of the hospital (CDSIMER) and the hospital's medical staff, as applicable.
- 4. Both Institutions agree that all the linancial agreements necessary to implement this MoLi or any subsequent agreement must be negotiated according to the regulation of each of the institutions and depends on the availability of funds.
- 5 It is mutually agreed that feed and accommodation will be provided for faculty / postgraduate students at C125001-X campus

6. Applicable Rules in case of Emergencies.

The Institutions agree that the clinical and academic requirements of both educational Institutions will be respected and that all current policies, rules, regulations, and/or judicians will be respected and that all current policies, rules, regulations and/or judicians covering matters applicable to a Program/patient care will be squared with

PRINCIPAL

Dayananda Sagar College of Bental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

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- componintage
 - a Sharing technical advantagement with regard to using Operation Theats, facilities at CINDADA and beaptial at Harshallt.
 - h Sharing of Intellectual expertise for skill oriented training of Pour Candings Students in terms of hands on training during specific postargs of structures by CESIMIER
- c. Sharing of knowledge and protromon of skill based training in Surgical specialities for the benefit of Post Chadrate Students as per the existing University requirements.
- d. Joint promotion of each others expertise and capabilities
- e. Collaboration for Direct access to Maxillofacial Surgical requirements at CINSMER with Department of Chal and Massilotacial Surgery, DSCIS for emergency management and patient care

Score of Society for Maxillofacial Surgery and Emergency Care-

- Avoid the need to travel to distant hospitals for Maxillotacial Surgical meets.
- · Availability of Post Graduate. Residents from the Department of CRIES. DSCDS for emergency care when required at CLNIMER.
- On Site tristning for Post Gradient-Students
- Laculty from Department of CMUS, USC DS will be available for Surgical cases requiring admission and management at CLEANER.

2. Intellectual Property and Research Collaborations:

- a) Buth institutions will encourage research collaborations in areas of matual interest. Public it is expected that such collaboration would include resourciving Maxillotacial Surgery, collaborations in other areas are also encouraged. Details shall be specified in the particular written agreement for each collaboration.
- b) Both Institutions will promote and facilitate exchange programs for post decional fellow training, in Maxillotacial Surgery Such collaborative effort should be based on the murual inherests of the involved Principal live entigation in both Institutions and the prospective trainers

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 500 078.

and carefully tellowed by the faculty members and their Candinate students in this amangement. In the event of a faculty member or Post Crachate student expansive to indections or environmental barants or other occupational injuries as a result of the

clinical or research assignment, the faculty member or student will seek immediate medical attention consistent with the CESIMER's occupational expensive procedures. Such emergency care will be provided at the usual and customary charges.

7. Both the Institutions recognize that:

a) This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.

b) This MoU will take effect from the date of it's signing and shall be valid mamediately.

This MoU is being signed on 01/09/2021 and will stand effective from this date onwards.

Prof. Dr. Hemanth M. Stos. ch.D. Dayamanda Sagar College of Dental Sciences, Kumaraswamie Lavout Sangalore - 560 078

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Dr Chandramma Dayapanda Sagar hastitute of Medical Education and Research (CDSIMIR), Harryhalli

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



MEMORANDUM OF UNDERSTANDING (MoU)

of Usage of Incubation Centre

BETWEEN

DERBI FOUNDATION, BENGALURU

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU

Dr. LAKSHMI JAGANNATHAN

CEO

DERBI Foundation, Bengaluru

Prof. Dr. Hemanth M MDS, Ph.D

Principal

Dayananda Sagar College of Dental Sciences, Bangalore

As on 18/10/2021

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111.

Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 93035

E-mail:principal@dscds.edu.in Website:www.dscds.edu.in

Introduction and Background:

DERBI Foundation is not for profit section 8 company, a healthtech focused technology business hosted by the Dayananda Sagar Institutions and is recognized and supported by Department of Science & technology, Ministry of Electronics & IT and Invest India from Government of India and Karnataka Innovation Society, Government of Karnataka. It supports healthcare startups across their business cycle, viz, from idea to commercialization through mentoring, go- to market strategies, pilot trials, prototyping support and grants and seed fund.

The Dayananda Sagar College of Dental Sciences is a part of the Dayananda Sagar Institutions located at Campus - 1, Kumaraswamy Layout Bangalore was begun in 1991 as an Institution that caters to all the Oral Health Care needs of patients and provides training to Under Graduate, Post-Graduate and Ph. D students and functions under the Legis of the prestigious Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka. There are 9 sub-specialties of Dentistry out of which Post Graduation is being held at 7 specialties.

Now, in accordance to the mutual desire to promote and develop activities between two Institutions, namely DERBI Foundation and the Dayananda Sagar College of Dental Sciences and Hospital, we agree to the following statement of intent on technology and Research based educational training programme for the faculty and students in using the incubation Centre. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

- 1. The two said institutions agree to the following general areas of interest and cooperation:
 - a. Sharing technical infrastructure with regard to using the Incubation centre and R & D facilities at DERBI Foundation, Bengaluru.
 - b. Sharing of Intellectual expertise for skill oriented training of Faculty, under Graduate and postgraduate Students

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- c. Sharing of knowledge and promotion of skill based training in the field of Research and Development for the benefit of Post Graduate Students as well as per the existing University requirements.
- d. Joint promotion of each other's' expertise and capabilities
- e. Supporting innovators and startups in idea validation, pilot testing and clinical trials
- 2. The institution using the facility for training students at the Incubation Centre agree to pay the financial agreements necessary to implement this MoU or any subsequent agreement must be negotiated according to the regulation of the institution providing the facility.

3. Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 18/10/2021 and will stand effective from this date onwards.

Dr. Lakshmi Jagannathan

CEO

DERBI Foundation,

Bengaluru

Prof. Dr. Hemanth M MDS, Ph.D

Principal

Dayananda Sagar College of Dental

Sciences, Bengaluru

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



(Aminted to Rajiv Ganghi University of Health Sciences, Kampataka) (Recognised by Dental Council of India, New Delhi)



MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) sets for the terms and understanding between the Dayanandz Sagar College of Dental Sciences (DSCDS) represented by the Principal, hereafter referred to as the "First Party" and Chandramma Dayananada Sagar Institute Of Medical Education & Research (CDSIMER), Bangalore represented by the Principal & Dean, here after referred to as the "Second Party to Collaborate in the field of Human Anatomy Including Embryology, Osteology & Histology.

BACKGROUND

Human Anatomy including Embryology, Osteology & Histology is a part of the First BOS corriculum. Students, should gain the knowledge and insight into the functional anatomy of the normal human head and neck, functional histology and embryological development of clinically important, structures. This is so that relevant anatomical & scientific foundations are laid down for the future clinical years of BOS course. For this, we wish our sister organization, COSIMER also to be a part of this teaching-learning process, given the rich legacy of Dayananada Sagar Institutions in the field of pioneering education which would be imparted to students attending this training schedule.

PURPOSE

This MOU will entail the co-operative collaboration & participation of both the signatories of this MoU the following areas:

- Training of 1 BDS students in relevant areas of Head & Neck Dissection, Histology of tissues of Head & Neck region, Osteology of the Head & Neck area as well as in relevant simulation lab.
- Exchange of academic information on a regular basis in terms of conducting subject symposia, case discussions, conferences, etc wherein both parties will actively participate & contribute constructively, wherever such a meet is conducted at.

The First party will send the First year BDS students as per the schedule & convenience of the Second party in the Department of General Anatomy, CDSIMER.

The First & Second parties shall collaborate with each other to provide space and classroom requirements as and when required by either party to conduct classes, seminars, subject symposia etc. The First & Second parties shall also be allowed to constructively participate & actively contribute by providing access to all Continuing Dental Education (CDE), Continuing Medical Education (CME), Workshops, Conventions& Conferences that will be hosted by either of them in their respective institutions which are related to the field of General Anatomy.

This MoU is purely based on the grounds of academic interest & purpose.

DURATION

Secretary !

This MoU is at-will and may be modified by mutual communication & understanding of authorized officials from either of the involved parties. This MoU shall become effective upon signature by the authorized officials from both parties and will remain in effect until decided otherwise by both involved parties.

In Witness whereof, the duly authorized representatives of both Institutions have SIGNED this MoU at Bangalore, India on the, in two original copies in English.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560 thenthe Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 9335

E-mail:principal@dscds.edu.in Website: www.dscds.edu.invarakagi

PRINCIPAL



Afrilated to Ruly Garron University of nearby Sciences Kamataka) (Recognised by Dental Council or India New Delhi)



Any and all clinical material, data, photographs required by the First party will be procured with prior permission of the Second party. All the material in the form of Clinical data, Photographs, etc procured by the First party should obtain clearance from the Ethical Committee of CDSIMER before it can be used in any sort of scientific publication.

The First & Second parties shall collaborate with each other to provide space and classroom requirements as and when required by either party to conduct classes, seminars, subject symposia etc. The First & Second parties shall also be allowed to constructively participate & actively contribute by providing access to all Continuing Dental Education (CDE), Continuing Medical Education (CME), Workshops, Conventions& Conferences that will be hosted by either of them in their respective institutions which are related to the field of Forensic Medicine & Forensic Odoncology

This Moti is purely based on the ground-init academic interest & ourpose

DURATION

This MoU is at-will and may be modified by mutual communication & understanding of authorized officials from either of the involved parties. This MoU shall become effective upon signature by the authorized officials from both parties and will remain in effect until decided otherwise by both involved parties.

In Witness whereof, the duly authorized representatives of both Institutions have SIGNED this Mou at Bangalore, India on the 20 10 122 in two original copies in English.

COPHET S

FOR DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES (DSCDS):

Dr. Krishnanand P S 805, MOS Professor & Head, Forensic Odontology,

DSCDS.

Dr. Heptanth M Mos. Pho PRINCIPAL, DSCDS Dr. Hemanth .M MDS., Ph.D.

PRINCIPAL Dayananda Sagar College of Dental Sciences Kumaraswamy Layout,

Bangalore - 550 078.

FOR CHANDRAMMA DAYANANADA SAGAI INSTITUTE OF MEDICAL EDUCATION & RESEARCH (CDSIMER)

Professor & Head, Forensit Med & Hard, Foreits CDSIMER. COSIMER- DSU

DIPPED DE PRINCIPAL & DEAN, COSIMER

Dr. Chandramote Dayananda Sacar Institute Medical Education & Propagation (DR)

arakaggalahalli, Kanpogony loos PROGRAM Dist. 5

RINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111. Phone: +91 80 26663654, 26662226 Fax: 26660780 Mobile: 74836 93035 E-mail principal@dscds.edu.in Website : www.dscds.edu.in

Page | 2



(Affiliated to Rayy Caristic University of Hourith Sciences, Humanics) (Recognised by Lagries Council of India New Line)



FOR DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES (DSCDS):

Dr. Krishnanand P S 805 Mps Professor & Co-Ordinator, Basic Sciences, DSCDS.

Dr. Hemanth M MOL PAD PRINCIPAL DSCDS Dr. Hemanth M MDS., Ph.D.

PRINCIPAL Dayananda Sagar College of Dental Sciences Kumaraswamy Layout. Bangalore - 560 078.

FOR CHANDRAMMA DAYANANADA SAGAR INSTITUTE OF MEDICAL EDUCATION & RESEARCH (CDSIMER)

Dr. Martin Lucas A MBBS, MD

Professor & Head, Dept of General Anatomy,

Without Hard Wit Help

CDSIMER. Education & Hear-

Manual !

PROF. Dr. A C Astrol Mans, mo PRINCIPAL & DEAN, COSIMER

seathfule of block or instantion & Research, 690 Devarable es anam, Kanakapura Road Ramanagwa Dat - 562112, Karnetako

PRINCIPAL

~-vananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



(Artificiant to Rapy Carethi Oronematy of Hemith Sciences, Karcatako) (Recognised by Dental Countries) India, New Delta.



MEMORANDUM OF UNDERSTANDING

This Memorandum of Liederstanding (MOD) serv for the terms and understanding between the Dayananda Sagar College of Dental Sciences (DSCOS) represented by the Principal, hereafter referred to as the 'First Party' and Chandramina Dayanamada Sagar Institute Of Medical Education 2. Resistant [CDSIMER], Bangalore represented by the Principal & Dean, here after referred to as the 'Second Party' to Collaborate in the field of Forenaic Medicine & Forenaic Odontology.

BACKGROUND

Forensic Odontology is established as an indispensable science in medica-legal matters and in acess of individual identification. The dental tissues are often preserved even if the deceased person is alreletorized, decomposed, burns, or dismembered. Various methods have been developed to determine age, sex, and ethnicity of the person, using dental tissues. Forensic Odontology offers very specific analyses & cools to help in identification, gender determination, age estimation, bits mark analysis in cases of above, etc. With this background, we at DSCDS wish to equip our students with exposure in the field of Forensic Odontology as an added advantage when compared to students dissipations. For this, we have planned a comprehensive program, a part of which we would wish our state departmentage. CDSMACR also to be a part of, given the rich legacy of Dayanumada Sagar Institutions in the field of planeering education which would be imported to students attending this observership.

PURPOSE

This MCU will entail the co-operative collaboration & participation of both the signatories of this McU tive following areas:

- Posting of Intern students & Post-graduate students of Department of Oral Medicine, Diagnosis & Radiology of DSCDS at Dept of Forence Medicine, CDSIMER for a period of One week to observe & assist in Autopsy procedures conducted in the Department & also be trained in relevant simulation labs.
- Exchange of academic information on a regular basis in terms of conducting subject symposia, case discussions, conferences, etc wherein both parties will actively participate 8 contribute constructively, wherever such a neet is conducted at
- Iii. The first party will also provide expert dental opinion and services related to the following mentioned areas of interest namely, Dental Age estimation, Forensic dental radiography, Bite-mark analysis, Dental autopsy, Disaster victim identification, Comparative dental dentification & Facial reconstruction. This will be on a 'On Call' basis as and when a dental opinion is required.

All the above mentioned services for the first party will be carried out by Dr.Krishnanand PS, who is qualified with a Fellowship in Forensic Odontology after having completed his Post-Graduate Dental Degree, MDS, in Oral & Maxillofacial Pathology.

The First party will post Bechelor of Dental Surgery (BDS) internees & Post-graduate students of Department of Oral Medicine, Diagnosis & Radiology on a rotational basis as per the schedule & convenience of the Second party in the Department of Forensic Medicine, CDSIMER to help students in observership of autopsy procedures in cases of interest. The Second party shall provide the First party with access to Autopsy procedures for each batch of posted 805 internees for the betterment of their directly experience resulting in the overall betterment of their knowledge in terms of Forensic Odomology.

Dr. A.C. SHOR MBS MS ONE DIRECTOR

Shavige Malleshwara Has, Kumaraswamy Layout, Bangalore 1

Phone: +91 80 26663654, 26862226 Fax: 26660789 Mobile in Website www.cscds.edu.in

PRINCIPAL



BELAKU VRIDDHASHRAMA (R)

"Mayur" No. 1966/B, South End 'D' Road, 9th Block, Jayanagar, (Near Entrance of Ragigudda Temple)
Bangalore - 560 069. © 2649 4588

MEMORANDUM OF UNDERSTANDING (MOU)

This DEED OF AGREEMENT is made on 14th of March, 2022 BETWEEN BELAKU VRIDDHASHRAMA, Jayanagar, Bengaluru (herein after referred as 'FIRST PARTY')

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES,

Kumaraswamy Layout, Bengaluru, (herein after referred as 'SECOND PARTY')

Now, in accordance to the mutual desire to promote and develop activities between two centres, namely BELAKU VRIDDHASHRAMA, home for Aged woman and the DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, we agree to the following statement of intent on providing treatment for the Oral Health care for the aged women. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

The two said parties agree to the following general areas of interest and cooperation in the interest of patient care.

 First party to provide the space and basic amenities at the Centre to provide treatment for the patients.

b. Treatment would be provided to the patients after receiving their consent.

c. Any complaints regarding this to be brought into notice of the concerned authority of both the parties.

For BELAKU VRIDHASHRAMA

Authorised Signatories

Dr. Hemanth .M MDS., Ph.D., PRINCIPAL

Payananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

ಬೆಳಕು ವೃದ್ಧಾಶ್ರಮ (ರಿ)



BELAKU VRIDDHASHRAMA (R)

(A LOVELY AND PEACEFUL HOME FOR ORPHAN WOMEN)

"Mayur" No. 1966/B, South End 'D' Road, 9th Block, Jayanagar, (Near Entrance of Ragigudda Temple)
Bangalore - 560 069. ② 2649 4588

Scope of Association:

- 1. To benefit the patients since the treatment is provided at free of cost by the Second party.
- 2. Screening and treatment of oral health related problems.
- 3. Huge scope in helping senior citizens to maintain a healthy lifestyle.
- 4. It will be of academic interest to the undergraduate and postgraduate students in enhancing their skills.
- Patients who require advanced oral health care treatment would be referred to Dayananda Sagar College of dental sciences, Bengaluru. The treatment would be provided at free of cost.

Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 14/03/2022 and will stand effective from this date onwards.

For BELAKU VRIDHASHRAMA

Authorised Signatories

Authorized Signatory, Belaku Vriddhashrama, Bengaluru 4

Dr. Hemanth M MDS, PhD Principal, Dayananda Sagar College of Dental Sciences Bengaluru

PRINCIPAL

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout,

Bangalore - 560 078,



3H India Limited 36 D, WIPRO Avenue, Bectronic Oty Phase 1, Bectronic City.

Banquiore - 560 100 INDIA Phone : +9160 2223 1414

MEMORANDUM OF UNDERSTANDING (MoU)

BETWEEN

3M INDIA Limited, BENGALURU

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU



3M India Limited S6 D, WIFRO Avenue, Electronic City Phase 1, Electronic City.

Bengalore - 560 100 INDIA Phone +9180 2223 1414

As on 08/06/2021

Now, in accordance to the mutual desire to promote and develop activities between two centres, namely 3M India (Oral care solutions division, innovation and R & D) and the Dayananda Sagar College of Dental Sciences and Hospital, we agree to the following statement of intent on technology and Research based educational training programme for the faculty and students in using the innovation centre. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

- The two said institutions agree to the following general areas of interest and cooperation:
 - a. Sharing technical infrastructure with regard to using the Innovation centre and R & D facilities at 3M India, Bengaluru.
 - Sharing of Intellectual expertise for skill oriented training of Faculty, under Graduate and postgraduate Students
 - c. Sharing of knowledge and promotion of skill based training in the field of Research and Development for the benefit of Post Graduate Students as well as per the existing University requirements.
 - d. Joint promotion of each other's' expertise and capabilities



3M India Limited 56 D, WIPRO Avenue, Blectronic City Phase 1, Blectronic City.

Bangalore - 560 100 INDIA Phone: +9180 2223 1414

Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 08/06/2021 and will stand effective from this date onwards.

Mp.

Nagarajan K, l Regional Sales Manager Oral care solutions division, 3M India, Bengaluru Dr. Hemanth M | Principal

Dayananda Sagar College of Dental Sciences Bengaluru

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



DAYANANDA SAGAR INSTITUTIONS

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Campus – 1, Kumaraswamy Layout, Bangalore 560 078, Karnataka Website: www.dscds.edu.in/Tel: 080-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

of Usage of skill / simulation lab

BETWEEN

DR. CHANDRAMMA DAYANANDA SAGAR INSTITUTE OF MEDICAL SCIENCES (CDSIMER) AND HOSPITAL, HAROHALLI

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BANGALORE

Prof. Dr. A. C. Ashok DNB, DA

Brincipal & Dean nda Sagar

Dr. Chandramma Dayanandat Sagar Institute of Medical Education and Research (CDSIMER), Harohalliannataka

Prof. Dr. Hemanth M MDS, Ph.D

Principal

Dayananda Sagar College of Dental Sciences, Bangalor

As on 20/09/2021

Introduction and Background:

Conceptualized by Dr.D.Hemachandra Sagar, Chancellor, Dayananda Sagar University (DSU) and Dr. D. Premachandra Sagar, Pro-Chancellor, DSU, the Dr. Chandramma Dayananda Sagar Institute of Medical Education and Research (CDSIMER) is a state-of-the-art 300 bedded tertiary care hospital which will be augmented to a 1350 bedded hospital that provides comprehensive health care under one roof to the needs of over 200 villages at Harohalli, Ramnagara District, Karnataka. The Medical College is situated at a smart campus of 140 acres with the Medical College equipped with modern lecture theatres, laboratories, excellent libraries, skill / simulation labs and computer networking facilities to provide an atmosphere for interactive learning. The clinical facilities will provide opportunities for practical, hands-on clinical experience under guidance of senior & experienced medical doctors.

The Dayananda Sagar College of Dental Sciences is a part of the Dayananda Sagar Institutions located at Campus - 1, Kumaraswamy Layout Bangalore was begun in 1991 as an Institution that caters to all the Oral Health Care needs of patients and provides training to Under Graduate, Post-Graduate and Ph. D students and functions under the aegis of the prestigious Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka. There are 9 sub-specialties of Dentistry out of which Post Graduation is being held in 7 specialities.

Now, in accordance to the mutual desire to promote and develop activities between two Institutions, namely Dr.Chandramma Dayananda Sagar Institute of Medical Education and Research (CDSIMER) and Hospital and the Dayananda Sagar College of Dental Sciences and Hospital, we agree to the following statement of intent on skill / simulation based educational training programme for undergraduates in using the skill / simulation lab for the basic life support training and simulation models for the undergraduate and postgraduate training as per the university norms every year. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

Dr. A.C. ASHOK MBBS, MS, DNB, DA
Principal & Dean
Or Chandramula Dayananda Sagar
Institute to Medical Education & Research, DSU
Devarakas Britanalli, Kanakapura Road
Ramanagara Dist. - 562112, Karnataka

PRINCFPAL

Dayananda Sagar College of Bental ScienceKumaraswamy Layout,
Bangalore - 560 078.

- 1. The two said institutions agree to the following general areas of interest and cooperation:
 - a. Sharing technical infrastructure with regard to using the skill / simulation lab facilities at CDSIMER and Hospital at Harohalli.
 - b. Sharing of Intellectual expertise for skill based / simulation oriented training of under Graduate and postgraduate Students as well as Basic life support in terms of hands on training during specific postings of students to CDSIMER.
 - c. Sharing of knowledge and promotion of skill based / simulation based training in Surgical specialities for the benefit of Post Graduate Students as well as per the existing University requirements.
 - d. Joint promotion of each others' expertise and capabilities
- 2. The institution using the facility for training students at the skill / simulation lab agree to pay the financial agreements necessary to implement this MoU or any subsequent agreement must be negotiated according to the regulation of the institution providing the facility.
- 3. Both the Institutions recognize that:
 - a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
 - b. This MoU will take effect from the date of it's signing and shall be valid immediately.

This MoU is being signed on 20/09/2021 and will stand effective from this date onwards.

Principal & Dean a Sagar

Dr. Odiandiamma Dayananda Sagar Devarakaggalandia 662112, Karnataka Institutarof Medical Education and

Research (CDSIMER), Harohalli

Prof. Dr. Hemanth M MDS, Ph.D

Principal

Dayananda Sagar College of Dental

Sciences, Bangalore

PRINCIPAL

Dayananda Sagar College of Sental Sciences Kumaraswamy Layout, Bangalore - 560 078.



INDIA NON JUDICIAL

Government of Karnataka

Certificate No.

Certificate Issued Date

Account Reference

Unique Doc. Reference

Purchased by

Description of Document

Description

Consideration Price (Rs.)

First Party

Second Party

Stamp Duty Paid By

Stamp Duty Amount(Rs.)

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Article 12 Bond

AGREEMENT

(Zero)

: INDIAN CANCER SOCIETY

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(One Hundred only) 선근 선칙 하다

Please write or type below this line

Memorandum of Understanding

By and Between

Dayananda Sagar College of Dental Sciences, Bengaluru

Indian Cancer Society, Bengaluru

This MoU is entered into on the 6th July 2021 (here after the "Effective Date") by and between:

Indian Cancer Society, Bengaluru, with its registered office at 268/1-4, Ground Floor, 9th A Main Road, 2nd Block, Jayanagar, Bengaluru, Karnataka 560011(hereafter referred to as "ICS")

Dayananda Sagar College of Dental Sciences at Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru 560078 (hereafter referred to as "DSCDS")

- 1. The authenticity of this Stamp certificate should be verified at 'www.shcilestamp.com' or using e-Stamp Mobile App of Stock Holding. Any discrepancy in the details on this Certificate and as available on the website / Mobile App renders it invalid.
- The onus of checking the legitimacy is on the users of the certificate.
- 3. In case of any discrepancy please inform the Competent Authority.

Who are referred to, collectively, as "Parties" or, individually, as "Party",

PREAMBLE:

WHEREAS DSCDS and ICS, recognize the benefits to be derived from collaboration, cooperation and mutual interaction for the development and promotion of joint activities to address issues of mutual interest, designed to foster and promote collaboration in the field of Oral cancer education, Oral cancer screening and Oral cancer care.

NOW THE PARTIES HAVE AGREED AS HERE UNDER!

1) NATURE AND SCOPE OF JOINT ACTIVITIES:

The parties have agreed to undertake the following activities jointly:

- a) Oral cancer prevention activities in Urban and Rural Karnataka.
- b) Empowerment & Education of Health Care Workers specific to Oral Cancer.
- c) Cancer Survey, Oral Cancer Screening and Tobacco Cessation Counseling
- d) Confirmatory Diagnostics for probable Oral cases referred by ICS
- e) Referral of screened and diagnosed Oral premalignant and malignant lesions to DSCDS for further care.
- f) Increase the awareness levels and initiate steps for the early detection of oral cancer among general public.

Specific activities and responsibilities undertaken under this MoU are listed in Annexure1.

2) INTELLECTUALPROPERTY:

- a) All material and information provided by either Party under this MoU towards the activities envisaged shall remain the exclusive property of such Party and the Other Party does not and shall not derive or be deemed to have acquired any right, title or interest in the same.
- b) Each Party to this MoU represents that it shall not infringe or cause to be infringed any intellectual property rights of the other Party including any brand name, logo, trade name or those associated with any information or material provided under this MOU and shall keep the same strictly confidential.

3) PUBLICITY&MARKETING:

Both Parties agree to consult each other in case of any requirement for publicity of the said project to the media or any other agency and to act diligently in the best interest of the project.

4) CONFIDENTIALITY:

a) Both Parties shall treat as strictly confidential and prevent disclosure there of all confidential Information exchanged pertaining to the activities under this MoU including, but not limited to, information related to any processes, techniques, plans, formulations, products, testing, storage and other methodologies and norms, services, trade secrets and other technical knowledge and the fact and contents of and relating to this MoU between DSCDS and ICS ("Confidential Information"). Both parties shall not disclose or use such confidential Information for any other party in any manner and shall only use such information for the purposes of this MoU.

- b) Confidential information does not include information which
 - (i) At the time of such disclosure was, or subsequently became, publicly available (other than as a result of its disclosure by either Party, in breach of this MoU)
 - (ii) At the time of such disclosure, was or subsequently became available on a non-confidential basis from a third Party source provided that such source was not subject to any duty of confidentiality in respect thereof;

OR

(iii) Has been independently acquired or developed by it without relying on any information or material which is disclosed by or available from the other Party or by breaching any of its obligations under this MOU.

5) TERMS OF MoU:

This MoU shall come into force from the 'Effective Date' and shall remain in force for a period of 3 years (36 months), from the 'Effective Date' of the MoU. The term of the MoU may be mutually extended on terms mutually agreed to by the Parties.

6) FINANCIAL RESPONSIBILITY:

- a) The financial responsibility of organizing, conducting, reporting of any program and follow-up investigations (Annexure 1) under this MoU lies with Indian Cancer Society.
- b) Indian Cancer Society is hereby agreeing to pay a suitable honorarium (as per their approved budget) to the doctors and the auxiliary staff of the Dayananda Sagar College of Dental Sciences for the services rendered as per this MoU. Payment for the same shall be made to Principal, Dayananda Sagar College of Dental Sciences, on a monthly basis (after deduction of TDS, as may be applicable), either by cheque or bank transfer.

7) TERMINATION:

- a) On non-performance of the obligations as specified in this MoU, either Party shall be entitled to terminate this MoU for any such breach of the terms of the MOU remains uncurred for a period of 15working days from the date of the notice to cure such breach. For the purpose of this clause, any breach of the terms of the MOU shall be deemed to have taken place from the date of the receipt of written intimation that a claim of breach has been raised.
- b) Notwithstanding anything contrary stated herein above, both parties shall have the right to terminate this MoU without assigning any reasons by giving 30days written notice to the other Party.

8) FORCE MAJEURE:

a) Neither Party shall be liable for any failure or delay in performance under this MOU to the extent the said failures or delays are proximately caused by causes beyond that party's reasonable control and occurring without its fault or negligence, including, without limitation, performance failures of parties outside the control of the contracting Party, Acts of God, War, Floods,

Earthquakes, Strike, Lockouts, Epidemics, Riots, Civil disturbance among others, provided that, force majeure will apply only if the failure to perform could not be avoided by the exercise of due care by the Party invoking this clause and such Party does everything reasonably possible to resume its performance under this MoU.

b) A Party affected by an event of force majeure shall give the other Party written notice, with full details as soon as possible and in any event not later than fourteen calendar days of the occurrence of the cause relied upon. If force majeure applies, dates by which performance obligations are scheduled to be met will be extended for a period of time equal to the time lost due to any delay so caused. However, if the performance of the MOU is delayed beyond eight (8) weeks from the date of this MoU either party may, at its discretion, terminate this MoU.

9) GENERAL:

a) Severability:

If any provision of this MoU is found by any court of competent jurisdiction to be invalid or unenforceable, the invalidity of such provision shall not affect the other provisions of this MoU, and all provisions not affected by such invalidity shall remain in full force and effect.

b) Waiver:

The waiver by either Party of a breach or default in any of the provisions of this MoU by the other Party shall not be construed as a waiver of any succeeding breach of the same or other provisions; nor shall any delay or omission the part of either Party to exercise or avail itself of any right, power or privilege, operate as a waiver of any breach or default by the other Party.

c) Relationship:

This MoU is being entered into on a principle-to-principle_basis.

d) Notices:

Any notice shall be given by way of registered post with acknowledgment due at the address given in the description of the parties. Email communications shall not be accepted as valid legal notices. The address and other details of the parties for the purpose of communication, unless otherwise notified in writing, to the other parties shall be as provided in this MoU.

e) Binding Nature and Assignment

- This MoU shall be binding upon and inure solely to the benefit of the parties here to and their successor and permitted assigns and nothing in this MoU shall confer upon any other person or entity any legal or equitable right, benefit or remedy of any nature whatsoever under or by reason of this MoU. Neither Party shall have the power to assign or transfer this MoU without the prior, written consent of the other Party.
- ii. This MoU constitutes the entire MOU between the parties hereto. There are no prior or contemporaneous, oral or written, representations, understandings or MoUs, which are not fully expressed in this MoU.

f) Amendment

No amendment, change order, waiver or discharge shall be valid unless it is in writing and signed by an authorized representative of the Party against whom such amendment, change order, waiver or discharge is sought to been forced.

g) Limitation of Liability:

In no event shall either party be liable to the other party or any other entity for any kind of losses including any lost profits, or for any indirect, special, consequential or incidental damages arising out of this MOU, under any cause of action, whether or not such party or its agents have been advised of the possibility of such damage.

h) Dispute Resolution

- i. Any dispute or difference arising between the parties under this MOU or the implementation of the obligation arising there from shall be discussed mutually and resolved within a period of 30 days.
- ii: In the event that no such mutual settlement is reached, any and all disputes arising out of or in relation to this MOU shall be subject to the exclusive jurisdiction of the courts at Bengaluru, Karnataka, to the exclusion of all other courts.
- lii Any research activities related to the data collected by both parties will be informed prior to publishing.
 - iii. All notices, communication under this MOU will be sent by Registered AD and shall be addressed to:

Designated contact persons for parties to the MOU

Dr Hemanth M Principal, DSCDS Bangalore Dr Kanchan Banerjee Honorary Secretary Indian Cancer Society, Bangalore

IN WITNESS WHERE OF,

The parties to this MOU, intending to be legally bound, have duly executed this MOU to become effective as of the date first written above.

For

Dayananda Sagar College of Dental Sciences, Bangalore

Driffementh M. M.D.S, Ph.D. Principal, DSCDS

PRINCIPAL

Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

For

Indian Cancer Society, Bangalore

Ms Kanchan Bannerjee

Honorary Secretary

CANCER SOCIET

*

Authorised Signatory

ANNEXURE 1

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Kumaraswamy Layout, Shavige Malleshwara Hills, Bangalore

Charges for diagnostic and treatment procedures for Oral Potentially Malignant Disorders (OPMD) and Oral Cancer

SI No	Diagnostic procedures	Charges
1	Vital staining	75
2	Incisional biopsy	100 (procedure)+300 (laboratory charges)
3	Punch biopsy	100 (procedure)+300 (laboratory charges)
4	Cytology/smear	75 (procedure)+ 100 (laboratory charges)
5	Laser biopsy	500 (procedure) +300(laboratory charges)
6	Oral cancer screening/ Sascan	50

SI No	Treatment procedures	Charges
1	Intralesional injection per sitting (total	75
	sitting required- 8-10)	
s2	Laser ablation of OPMD (per region)	800 .
3	Cryosurgery of OPMD (per region)	800
4	OSMF	Rs. 1000 (graft if procured to be
	-Fibrotomy under LA	charged extra)
	8	
	-Fibrotomy + coronoidectomy under GA	Hospital charges

PRINCIPAL

Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout, Bangalore - 560 078.

FOR INDIAN CANCER SOCIETY

Havelan Baneyin.

HONORARY SECRETARY.

For INDIAN CANCER SOCIETY

Authorised Signatory



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



Campus - 1, Kumaraswamy Layout, Bangalore 560 078, Karnataka Website: www.dscds.edu.in/Tel: 080-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

of Basic life support training for teachers and students

BETWEEN

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BANGALORE AND

DAYANANDA SAGAR COLLEGE OF ENGINEERING, BANGALORE

Prof Dr. Hemanth M MDS, Ph.D

Principal

Dayananda Sagar College of Dental Sciences, Bangalore

ananda Sagar College o. Kumaraswamy La.

Bangalore - 560 078.

Prof.C.P.S PRAKASH.M E,Ph.D

Principal

Dayananda Sagar College of Engineering, K.S.Layout, Bangalore

Principal

Dayananda Sagar College of Engineering Kumaraswarny Layout, Bangalore -560 111

As on 23/05/2022



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



Introduction and Background:

Dayananda Sagar College of Engineering is approved by All India Council for Technical Education (AICTE), Govt. of India and affiliated to Visvesvaraya Technological University. It has widest choice of engineering branches having 18 Under Graduate courses & 13 Post Graduate courses. The Institute is spread over 23 acres of land with large infrastructure supported by laboratories with state-of-the-art, Equipment & Machines.. The College has good faculty strength with highest professional integrity and committed to the academics and research.

The Dayananda Sagar College of Dental Sciences is a part of the Dayananda Sagar Institutions located at Campus - 1, Kumaraswamy Layout Bangalore was begun in 1991 as an Institution that caters to all the Oral Health Care needs of patients and provides training to Under Graduate, Post-Graduate and Ph. D students and functions under the aegis of the prestigious Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka. There are 9 sub-specialties of Dentistry out of which Post Graduation is being held in 7 specialities.

Now, in accordance to the mutual desire to promote and develop activities between two Institutions, namely DayanandaSagar college of Engineering and Dayananda Sagar College of Dental Sciences and Hospital in association with sagar hospitals we agree to the following statement of intent on skill /simulation based educational training programme for basic life support training for the undergraduate/ , postgraduate students, Teaching and non teaching staff. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

Early intervention of bystanders (the first links of the chain of survival) have been shown to improve survival and good neurological outcomes of patients in an emergency. Involvement of communities in early basic life support (BLS) and cardiopulmonary resuscitation (CPR), especially of lay people is of prime importance as with no duty to respond. A better knowledge of the most effective initiatives might help improve survival and health system organization. Simplicity and brevity of the community training programs are important to allow for maximal efficiency and the training of individuals who do not wish to participate in a longer course or seek BLS certification. For the purpose of this review, we defined "community" as the general population of a defined geographical area (i.e., a group of neighborhoods, one or more cities/towns or regions, a part of or a whole country), in which individuals with no duty or organized role to respond can act as potential witnesses or bystanders of a Cardiac arrest victim. This definition does not include healthcare professionals or first responders with a role as rescuer or part of a response system. We defined "initiative" as any intervention promoting BLS or providing

Kuma: Esmail: principal@dscds.edu.in Website: www.dscds.edu.in Kumaraswamy Layout, Bangalore - 560 111



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



education and training, aiming to increase the engagement of the community as defined above in providing BLS (i.e., any kind of CPR and early defibrillation).

The two said institutions agree to the following general areas of interest and cooperation: Sharing of Intellectual expertise for skill based / simulation oriented training of under Graduate / postgraduate Students, Teaching and Non teaching staff as well as Basic life support in terms of hands on training for Engineering staff and students

Both the Institutions recognize that:

- a. This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institutions.
- b. This MoU will take effect from the date of it's signing and shall be valid immediately.

This MoU is being signed on 23rdMay 2022 and will stand effective from this date onwards.

Prof. D. Hemanth M. M.D.S, Ph.D.

Principal

Dayananda Sagar College of Dental Sciences,

Bengaluru

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Prof. Dr CPS Prakash, M.E, Ph.D

Principal

Dayananda Sagar College of Engineering Bengaluru

Principal Dayananda Sagar College of Engineerii Kumaraswamy Layout, Bangalore -560 111

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111. Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 93035 E-mail:principal@dscds.edu.in Website: www.dscds.edu.in







Dayananda Sagar College of Dental Sciences,

Kumaraswamiy Layout, Bangalore, 78

Department of Public Health Dentistry

Rel No. PHD/ BLU/2022/30

Date: 10/03/2022

To,
The Health Officer,
BBMP, Bangalore South,
Bangalore.

Respected Sir.

Sub: Renewal of Memorandum of Understanding

With respect to the above subject, I would like to bring to your kind notice that Dayananda Sagar College of Dental Sciences has established a satellite dental clinic at UPHC, Kumarswamy Layout and have been rendering dental services since 01/04/2017 as per Memorandum of understanding with Bruhath Bengaluru Mahanagara Palike. The existing MOU has expired on 31" of March 2021. Due to covid 19 pandemic we were unable to renew the MoU. However we have been part of the covid 19 vaccination activities of the PHC till date and have been posting our interns and post graduate students to the UPHC Kumarswamy sayous everyday. I request you to renew our existing MoU from 01/04/2021 for another 5 years. Kindly do the needful and oblige.

Thanking You

Yours Sincerely

Professor & HOD

Depitation to the Health Dentistry Dayananda Sagar College of Dental Sciences

Kumaraswamy Layout.

PS: Copy of the previous MoU

PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.



(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



DAYANANDA SAGAR INSTITUTIONS

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

Campus – 1, Kumaraswamy Layout, Bangalore 560 078, Karnataka

Website: www.dscds.edu.in/Tel: 080-2666-3654

MEMORANDUM OF UNDERSTANDING (MoU)

BETWEEN

DAYANANDA SAGAR UNIVERSITY, BENGALURU

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BENGALURU

As on 04/04/2022

Dayananda Sagar University

Bangalore

Deyananda Sagar College of Dontal Sciences Kumaraswamy La Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111 Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 93035

Hemanth M MDS., Ph.D.

PRINCIPAL

E-mail:principal@dscds.edu.in Website:www.dscds.edu.in

This Memorandum of Understanding is between Dayananda Sagar University, Kumaraswamy Layout, Bengaluru (hereinafter referred to as the First Party) and The Principal, Dayananda sagar College of Dental Sciences (hereinafter referred to as the Second Party). Together are referred to as the "Parties".

Purpose

The purpose of this MOU is to state the intentions of the parties in undertaking a collaboration and providing Grants by First Party in the field of research and development. Both the parties have common scientific and research interests and will cooperate in performing the activities stated below.

Types of Cooperative Activities

The scope of collaboration on research activities to be pursued through this MOU includes the following:

- 1. Research collaboration and providing Grants by First party to second party in the areas of mutual interest.
- 2. Exchange of academic materials which are made available by both parties.
- 3. Exchange of visiting research scholars.
- 4. Cooperative symposia, seminars, workshops and conferences.

General Terms

- 1. This MOU is effective from the date when both parties have signed it.
- 2. This MOU shall remain in force for a period of five (5) years from the Effective Date. Either Party may terminate the MOU by providing at 60 days' advance written notice to the other Party. Termination or expiration of this MOU does not automatically terminate any separate agreement between the Parties related to the subject matter of this MOU.
- 3. The MOU may be amended or extended by mutual consent in writing signed by authorized representatives of the Parties.
- 4. Each party is liable for its own acts and omissions under this MOU, which, for the prevention of doubt, does not include any liability based on the acts or omissions of a third party.
- 5. Confidential information shall be exchanged only under the terms of a separate agreement, whether a non-disclosure agreement, sponsored research agreement, material transfer agreement, or data use agreement. No confidential information shall be disclosed pursuant to this MOU.

Dayananda sagar University BengaluruRegistrar

Dayananda Sagar University Bangalore

(Authorized Signatory)

Dayananda Sagar College of Dental

Sciences, Bengaluru.

Dr. Hemanth .M MDS., Ph.B. PRINCIPAL

Doyananda Sagar College of Dental Sciences Kumaraswamy Layout, Bangalore - 560 078.



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Government of Karnataka

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Unique Doc. Reference

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Description of Document

Article 5(J) Agreement (In any other cases)

Property Description

MEMORANDUM OF UNDERSTANDING

Consideration Price (Rs.)

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First Party

(---)

Second Party

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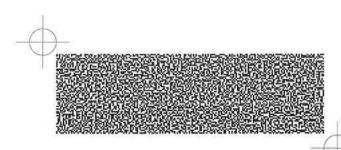
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Stamp Duty Amount(Rs.)

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(Two Hundred only)







Please write or type below this line

MEMORANDUM OF UNDERSTANDING

Minutes of discussions held between the representatives of Dayananda Sagar College of Dental Sciences and Sri Krishna Sevashrama Hospital on Wednesday the 9th of March 2022 regarding permitting Dayananda Sagar College of Dental Sciences to utilize the clinical facilities of Sri Krishna Sevashrama Hospital and tarin their students.

Statutory Alert:

The authenticity of this Stamp certificate should be verified at 'www.suchestamp.com' or using e-Stamp Mobile App of Stock Holding Any discrepancy in the details on this Certificate and as available on the postsite / Mobile App renders it invalid.

2. The onus of checking the legitimacy is on the users of the certificate.

3. In case of any discrepancy please inform the Competent Authority.

BANG

The following were present;

From Dayanada Sagar College of Dental Sciences;

1. Sri. Galiswamy

Secretary

2. Dr. Hemanth M

Principal

3. Dr. Ramnarayan B K

: Professor of Oral Medicine & Radiology

From Sri Krishna Sevashrama Hospital;

1. Dr. U Vasudeva Rao

: Medical Director

2. Sri. V K Haridas

Hon Secretary

Terms and Conditions mutually agreed by both the parties:

- 1. The bedside clinical teaching and practical demonstration in General Medicine and General Surgery will be carried out by the consultants of Sri Krishna Sevashrama Hospital in the premises of Sri Krishna Sevashrama Hospital. The consultant will be designated as per their experience. The remuneration time schedule, syllabus etc as stipulated by Dayanada Sagar College of Dental Sciences for such bedside clinical teaching and practical demonstration will be fixed by mutual agreement between Dayanada Sagar College of Dental Science / concerned consultants of Sri Krishna Sevashrama Hospital.
- 2. Sri Krishna Sevashrama Hospital shall make arrangements to patients and provide a designated place for conducting university examinations as and when they are conducted. Which is usually twice a year.
- 3. Sri Krishna Sevashrama Hospital shall provide all necessary support in terms of number of beds, patient statistics etc., during RGUHS and dental council of India Inspections.
- 4. Hours of training at Sri Krishna Sevashrama Hospital premises; Training will be three hours a week each in General Medicine and General Surgery as per the timetable fixed.
- 5. Strength of batches:

Students for medical and surgical clinics at a time, will be as per the strength of the batch and attendance shall be maintained by the Consultants.

6. Consideration:

In consideration of the facilities provided, Dayanada Sagar College of Dental Sciences has kindly agreed to pay a sum of Rs. 4,50,000/- (Rupees Four Lakhs Fifty Thousand Only) to Sri Krishna Sevashrama Hospital per year. This amount will be paid in advance by Dayanada Sagar College of Dental Sciences to Sri Krishna Sevashrama Hospital before the beginning of the next financial year. The financial year is considered as 1st April to 31st March next year.

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- 7. Duration of this arrangement: This understanding is valid for five years but may be renewed for further period by mutual agreement subject to such terms and conditions as may be agreed upon at the time of such renewal. This mutual understanding comes into effect from 1st April 2022.
- 8. Overall control: The hospital administrative committee under the overall guidance of governing council of Sri Krishna Sevashrama Hospital has the right to

revise, modify, amend or substitute any of the conditions of this contractual understanding, however in consultation with the Management

of Dayanada Sagar College of Dental Sciences.

9. This contractual understanding may be terminated by either party by giving six months' notice to the other. In the event of such cancellation Dayanada Sagar College of Dental Sciences will not be entitled to claim any portion of the consideration agreed to in clauses 6 and 7 or any other claim.

The terms and conditions as set out on this memorandum are agreeable to both the parties.

Signed on behalf of Sri Krishna Sevashrama Hospital

5th BLOCK

Signed on behalf of Dayanada Sagar College of Dental Science

Hon Secretar

Mr. Galiswamy Secretary

Witness:

1. Dr. Hemanth M

Principal

Dayanada Sagar College of Dental Sciences

2. Dr. U Vasudeva Rao Medical Director Sri Krishna Sevashrama Hospital

Dr. U. VASUDEVA RAO

MBBS, MS, FRCS FICS FIAS **Medical Director**

Sri Krishna Sevashrama Hospital Jayanagar, Bangalore-560 041. Reg. No.: 12654

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MEMORANDUM OF UNDERSTANDING

BETWEEN



Dayananda Sagar College of Dental Sciences Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore – 560078

&



YOUTH FOR SEVA

75,76, 4rth Cross, 2nd Main Soudamini Layout Konanakunte, Bangalore – 560 062

FOR

SKILL DEVELOPMENT, VOLUNTEERISM AND COMMUNITY ORIENTED SERVICES

Jagadeesh Mary

HM

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (herein after called as the 'MOU') is entered in to on this date 13th June 2022, by and between

Dayananda Sagar College of Dental Sciences, Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore – 560078, The FIRST PARTY represented here in by its Principal, (here in after referred as 'First Party', the institution which expression, unless excluded by or repugnant to the subject or context shall include its successors—in-office, administrators and assigns).

AND

YOUTH FOR SEVA, 75, 76, 4th Cross, 2nd Main Soudamini Layout, Konanakunte, Bangalore – 560 062, the Second Party, and represented herein by its President, Shri Jagadeesh Maiya (herein after referred to as "Second Party", NGO which expression, unless excluded by or repugnant to the subject or context shall include its successors – in-office, administrators and assigns).

About Dayananda Sagar College of Dental Sciences

Dayananda Sagar College of Dental Sciences was established in the year 1991 formerly affiliated to Bangalore University & presently to Rajiv Gandhi University of Health Sciences, approved & recognized by Dental Council of India. Dayananda Sagar College of Dental Sciences is located in a lush green 23 Acers campus spacious building & equipped with the state of the art equipments to treat Dental & Oral Diseases. Dayananda Sagar College of Dental Sciences has a academically sound faculty in all the branches of Dentistry with vast experience.

The College offers the Bachelor of Dental Surgery (BDS) course, that is of 5 years duration, including one year of compulsory rotatory internship. At present the college is imparting training in BDS degree (Bachelor of Dental Surgery). The College offers Postgraduate course in all the 7 specialties of Dentistry and Ph.D in 4 specialities.

About Youth for Seva

Youth for Seva (YFS), founded in April 2007, is a nation-wide volunteering movement that inspires youth to volunteer, and provides them with meaningful opportunities to serve the community.

The goal of YFS is to support schools, destitute shelters, government hospitals and other organizations in the social sector through volunteers who can help them mitigate some of their shortcomings and challenges. Volunteering is made easy and customized to the individual's interests, time availability and skill sets.

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YFS aims to create positive change agents in the society, through the culture of volunteering. (First Party and Second Party are hereinafter jointly referred to as 'Parties' and individually as 'Party') as

WHEREAS:

- A) First Party is a Higher Educational Institution named: Dayananda Sagar College of Dental Sciences
- B) First Party & Second Party believe that collaboration and co-operation between themselves will promote more effective use of each of their resources, and provide each of them with enhanced opportunities.
- C) The Parties intent to cooperate and focus their efforts on cooperation within area of Community Services.
- D) Both Parties, being legal entities in themselves desire to sign this MOU for advancing their mutual interests.
- E) -YOUTH FOR SEVA-, the Second Party is engaged in Skill Development, Volunteerism and Community oriented services and related fields.

NOW THIS MEMORANDUM OF UNDERSTANDING WITNESSETH AS FOLLOWS

A. Joint Responsibility

1. Cooperation: Both Parties are united by common interests and objectives, and they shall establish channels of communication and co-operation that will promote and advance their respective operations within their related constituents. The Parties shall keep each other informed of potential opportunities and shall share all information that may be relevant to secure additional opportunities for one another.

General terms of co-operation shall be governed by this MOU.

The Parties shall cooperate with each other and shall, as promptly as is reasonably practical, enter into all relevant agreements, deeds and documents (the 'Definitive Documents') as may be required to give effect to the actions contemplated in terms of this MOU. The term of Definitive Documents shall be mutually decided between the Parties. Along with the Definitive Documents, this MOU shall represent the entire understanding as to the subject matter hereof and shall supersede any prior understanding between the Parties on the subject matter hereof.

2. NMMS: The National Means cum Merit Scholarship Examination, also known as NMMS Exam, is sponsored by the Central Government. The examination is conducted by the local authority. To prevent the dropping out of economically backward students from school at class VIII and to encourage them to complete their education till the secondary stage, the exam seeks to identify meritorious students and fund their education expenses. Shall encourage and enroll

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hundred (100) students to volunteers for six (6) hours and three (3) days in a week over a period of three (3) Months during every calendar year. Student Volunteers from **Dayananda Sagar College of Dental Sciences** students will attend training programs and later train children on Mental Aptitude Test. (MAT) and Scholastic Aptitude Test. (SAT). Volunteers will support children train, appear and crack the NMMS examination. Youth for Seva shall train the student volunteers on NMMS and assign nearby schools to render training by student volunteers to government or aided school children.

- 3. Chiguru: is a flagship annual event by Youth for Seva created to bring out the artist in every child. It provides a strong and unique platform for students from Government schools and learning centers to showcase their inbuilt talents in various forms of arts and culture. Dayananda Sagar College of Dental Sciences, will co-host Chiguru through 50 (Fifty) student volunteers as "organizers" of the event with provision of campus space (auditorium or playground) for government school children to exhibit their talent. Student volunteers will spend their time with children, share knowledge, help in improving skills while they take back a true experience of the joy in giving. Chiguru is a great platform for volunteers to understand the importance of being empathetic, considerate and supportive towards the under-privileged sections of the society.
- 3.Volunteer Base and Internship: A volunteer base of not less than fifty (50) regular student volunteers and a faculty mentor/supervisor under the Youth for Seva forum/club will be formed to render volunteering service. Student volunteers will participate in the YFS volunteer service activities as and when requested, based on the need for volunteer support required to address social issues or social developmental activities. Not less than fifty (50) students will take up full time internship program with youth for seva for a duration of not less than 1 (one) Month during every calendar year.
- 4. Joint Publications. Joint publications of research articles, papers, books to develop research aptitude and to contribute to the world of knowledge concerning volunteerism and community will be taken by both the parties.
- 5. Joint Holding of Conference / Seminar / Workshop / Training / Symposia concerning volunteerism and community service, etc: Joint organization of conferences / workshops / seminars / symposia / summer schools / training / lectures, etc to improve the exchange of knowledge and experience.
- 6. Exchange of Knowledge Resource. Share books, journals and teaching materials including textbooks, audio-videos, publications, reports and other teaching aids pertaining to volunteerism and community service.
- 7. Impact Assessment: The volunteers from the university will support YFS in analyzing the impact of the initiatives on the students and the local community in terms of its social, environmental and economic aspects.

B. Activities under the scope of Dayananda Sagar College of Dental Sciences (First Party)

1. Dayananda Sagar College of Dental Sciences will work as a knowledge partner and will be the hub for Research, Training Demonstration and Dissemination of information through its student and faculty base.

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- 2. Dayananda Sagar College of Dental Sciences will create Youth for Seva Volunteer base and provide students with internship opportunity at youth for Seva.
- 3. Dayananda Sagar College of Dental Sciences will plan and execute community oriented development activities in the area of Health, Education, Livelihood, and Environment.

C. Activities under the scope of YFS (Second Party)

- 1. Students from **Dayananda Sagar College of Dental Sciences** will play a key role in participating in the Skill Development, Volunteerism and community service based activities. YFS will mentor and initiate the students for involvement in these activities.
- 2. Youth for Seva will host student volunteers and internship program through its intervention programs in the local region.
- 4. Implementation partner of community oriented development activities in the area of Health. Education, Livelihood, and Environment.

II. FINANCIAL COMMITMENTS.

There is no financial commitment on the part of the **Dayananda Sagar College of Dental Sciences**, the First Party to take up any program mentioned in the MoU. If there is any financial consideration, it will be dealt separately. Similarly there are no financial or monetary commitments on the part of the **YOUTH FOR SEVA-NGO** the Second Party to take up any program mentioned in the MoU. If there is any financial consideration, it will be dealt separately.

III. INTELLECTUAL PROPERTY

Nothing contained in this MoU shall, by express grant, implication, Estoppel or otherwise, create in either Party any right, title, interest, or license in or to the intellectual property of the other Party.

IV.RELATIONSHIP BETWEEN THE PARTIES.

It is expressly agreed that Dayananda Sagar College of Dental Sciences and YOUTH FOR SEVA- NGO are acting under this MoU as independent contractors, and the relationship established under this MoU shall not be construed as a partnership. Neither Party is authorized to use the other Party's name in any way, to make any representations or create any obligation or liability, expressed or implied, on behalf of the other Party, without the prior written consent of the other Party. Neither Party shall have, nor represent itself as having, any authority under the terms of this MOU to make agreements of any kind in the name of or binding upon the other Party, to pledge the other Party's credit, or to extend credit on behalf of the other Party.

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V. AMENDMENTS TO THE MOU:

No amendment or modification of this MoU shall be valid unless the same is made in writing by both the parties or their authorized representatives and specifically stating the same to be an amendment of this MoU. The modifications / changes shall be effective from the date on which they are made / executed unless otherwise agreed to.

VLASSIGNMENT OF THE MOU

The rights or / and liabilities arising to any part of this MoU shall not be assigned except with the written consent of the other party and subject to such terms and conditions as may be agreed upon between the involved parties.

VII. DISPUTE RESOULTION

Any divergence or difference derived from the interpretation or application of the MoU shall be resolved by arbitration between the parties as per the Arbitration Act, 1996. The place of the arbitration shall be at District Head Quarters of the First Party. This undertaking is to be construed in accordance with Indian Law with exclusive jurisdiction in the Courts of Bengaluru.

VIII. VALIDITY

The agreement will be considered null and void and subject to termination by default if there are no activities organized or hosted by either of the parties for three consecutive months in a calendar year from the date the MoU is signed by both the first and second parties. Both Parties may terminate this MOU upon 30 calendar days' notice in writing. In the event of Termination, both parties have to discharge their obligations. This MoU will last for three years from the date of agreement.

IN WITNESS WHEREOF, Dayananda Sagar College of Dental Sciences and YOUTH FOR SEVA- NGO each acting through its representative duly authorized there to have signed this Memorandum of Understanding on the date written in two original sets in English, after the signature and seal of the parties hereto.

First Party

Second Party

DATE: 13th June 2022 (13th June Two Thousand Twenty Two)

Any divergence or difference derived from the interpretation or application of the MoU shall be resolved by arbitration between the parties as per the Arbitration Act, 1996. The place of the arbitration shall be at District Head Quarters of the Second Party. This undertaking is to be construed in accordance with Indian Law with exclusive jurisdiction in the Courts of **Bengaluru**.

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AGREED:

For Dayananda Sagar College of Dental Sciences

For YOUTH FOR SEVA

Dr. Hemanth .M MDS., Ph.D.

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Authorized Signatory

Dayananda Sagar College of Dental Sciences	Name of NGO: YOUTH FOR SEVA
Address: Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore – 560078	Address: 75,76, 4th Cross, 2 nd Main Soudamini Layout, Konanakunte, Bengaluru – 560 062
Contact Detail: 080 26663654, 74836 93035	Contact Details: 7259958595
E-mails: principal@dscds.edu.in	E-mails: contact@youthforseva.org
Web: www.dscds.edu.in	Web: www.youthforseva.org

Witness 1: Shruhanha T.V. Dayanarda Sagar College let Dental Sciences. mab: 9481308443.

Witness 1: Suma TS. Youter for Seva. Mob. 7349296279.

Witness 2: Legen lev

Payanander Dagal Collegieg

Dental Diences.

Nob: 9480185352

Witness 2: Viney & B (VS) Youth For Seva. Mob. 998068976



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DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR MAAN PECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMH MANS DIRECTOR NIMHANS DIRECTOR NIMHANS ECTOR MIMHANS DIRECTOR NIMHANS DIRECTOS DIR Certificate No.S DIRECTOR NIMHANS ANS DIRECTOR NIMHANS DIRECTOR NIMH IN-KA59707098061017U DIRECTOR NIMHANS ECTOR NIMHANS DIRECTOR NIMHANS DIRECT Flicate Issued Dateor NIMH RECTOR NIMHANS DIRECTOR NIMHANS 08-Mar-2022 03:22 PM RECTOR NIMHANS DIRECTOR NIMH NONACC (BK)/ kakscub08/ KUMARA SWAMY LAYOUT/ KA SUBIN-KAKAKSCUB0854966688588826UMHANS DIRECTOR NIMHANS ECT/Unique/Doc: Reference/III DIRECTOR NIMHANS DIRECTOR OR NIMHANS DIRECTOR NIMH DIRECTOR NIMHANS IMHANS DIRECTOR NIMHANS CTOR MINHANS DIRECTOR NIMHANS DIRECTOR NIMH Article 12 Bond THANS DIRECTOR NIMHANS DIREDescriptionANS DIREC MOA NIMHANS DIRECTOR NIMH Consideration Price (Rs.) HANS DIRECTOR NIMHANS NIMHANS DIRECTOR NIMH ECTOR NIMHANS DIRECTOR HANS DIRECTOR NIMHANS DIRECTOR NIMHANS NIMHANS DIRECTOR NIMH DIREFIRST Party ANS DIREC DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES NIMHANS ECTOR NIMHANS DIRECTOR MINIANS DIRECTOR NIMHANS ECT(StatholDutý Paid(Bý)R DIRECTOR NIMHANS CT Stamp Duty Amount(Rs.) MANS DIRECTOR (Two Hundred only) NIMHANS JA DIRECTOR NIMHANS DIRECTOR ECTOR NIMHANS DIRECTOR NIMHA सत्यमव जयत RECTOR WILL ANS CONTEST OF NIMHOR SECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMH DIRECTOR NIMHANS DIRECTOR NIME ECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS ANS DIRECTOR NIMA OF THE CON NIMHANS ECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR LIOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHA ECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS TOR NIMIANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHAN STOR NIMHAM NIMHAN TOR NIMHA ECTOR N RS. 200 NIMHANS TOR NIMH TOR NIMHA

MEMORANDUM OF AGREEMENT

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DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS DIRECTOR NIMHANS

AGREEMENT BETWEEN DIRECTOR, NIMHANS AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, SHAVIGE MALLESHWARA HILLS, KUMARASWAMY LAYOUT, BANGALORE - 560 078 (Name & Address of Hospital/Centre)

This Agreement is made on 2nd day December 2021 between the Director, National Institute of Mental Health & Neuroscience, Bangalore (Hereinafter called NIMHANS which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include its successors the office and assigns) of the First Part

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 In case of any discrepancy please into the competent Authority.

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, SHAVIGE MALLESHWARA HILLS, KUMARASWAMY LAYOUT, BANGALORE – 560 078 (Name & Address of Hospital/ Centre)

Second Part

WHEREAS, The NIMHANS is providing comprehensive medical care facilities to Employees/Pensioners and their dependent family members.

AND WHEREAS, NIMHANS HEALTH SCHEME (NHS) proposes to provide treatment facilities in Allopathy to the NHS beneficiaries in the Private Recognized Hospitals/Centers.

AND WHEREAS DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Hospital/Centre offered to give the treatment to the NHS Beneficiaries who may produce a permission letter from their NIMHANS HEALTH CENTRE.

NOW, THEREFORE, IT IS HEREBY AGREED between the Parties as follows:

1. DEFINITIONS & INTERPRETATIONS

- 1.1 The following terms and expressions shall have the following meanings for purposes of this Agreement:
- 1.1.1 "Agreement" shall mean this Agreement and all Schedules, supplements, appendices, appendages and modifications thereof made in accordance with the terms of this Agreement.
- 1.1.2 "Benefit" shall mean the extent or degree of service the beneficiaries are entitled to receive as per the rules on the subject.
- 1.1.3 "Card" shall mean the NHS Card. Issued by any competent authority of NIMHANS.
- 1.1.4 "Card Holder" shall mean a person having a NHS Card.
- 1.1.5 "NHS Beneficiary" shall mean a person who is eligible for coverage of NHS and hold a valid NHS card for the benefit.
- 1.1.6 "Coverage" shall mean the hospital/diagnostic center authorized by the NIMHANS for HEALTH SCHEME.
- 1.1.7 "Empanelment' shall mean the hospital/diagnostic center authorized by the NIMHANS for treatment purposes for a particular period.
- 1.1.8 'Hospital' shall mean the DAYANANDA SAGAR COLLEE OF DENTAL SCIENCES while performing under this Agreement providing medical investigation, treatment and the Healthcare of human beings.
- 1.1.9 'Recognition of Hospital' shall mean the Hospital empanelled by the NHS for a particular period for providing treatment facilities and procedures etc. to the NHS beneficiaries at the rules laid down.
- 1.1.10 'De-recognition of Hospital" shall mean debarring the hospital on account of adopting unethical practices or fraudulent means in providing medical treatment to or not following the good industry practices of the health care for the NHS beneficiaries after following certain procedure of inquiry.
- 1.1.11 "Party" shall mean either the NIMHANS or the Hospital/Centre and "Party" shall mean both the NIMHANS and the Hospital/Diagnostic Centre.
- 1.1.12 (a)"Package Rate" means rates for a package of treatment of standard set of procedures that administered to the patient while undergoing treatment for a pre-diagnosed disease-condition for the specified time period.
- This includes all charges pertaining to a particular treatment/procedure including registration charges, admission charges, accommodation charges, cost of medicines, Panchakarma charges, Labour Room Charges, Charges for Ksharasutra, operation/procedure charges, doctor/consultant visit charges, monitoring charges, operation theaties charges and cost of all sundries used during hospitalization, related routine investigations, physiotherapy charges

कुलसचिव र REGISTRAR राष्ट्रीय मानसिक स्वास्थ्य और तंत्रिका विज्ञान संस्थान, हेंगलूक National Institute of Mental Health Dayananda Sagar College of Bental Science Kumaraswamy Layout, Bangalore - 500 078. etc. form the time of admission till discharge. This also is inclusive of all sub-procedures and all related procedures to complete the treatment.

ii) No additional charge on account of extended period shall be allowed if that extension is due to any improperly conducted procedure.

1.1.13 "Bill Clearing Agency" (BCA means the agency appointed by NIMHANS for processing of Data/Bills of all NHS beneficiaries (both serving and pensioner) attending the empanelled private Hospitals and for making payment.

2. SERVICE AREA

The Hospital/Diagnostic Centre shall provide treatment facilities to the NHS beneficiaries who may produce a permission letter from NIMHANS HEALTH CENTRE (NHC).

3. SERVICE CHARGES

The Hospital/Center shall charges from the NHS beneficiaries as per the rates for a particular procedure/ package deal as prescribed by the CGHS which shall be an integral part of this Agreement. This also includes the ward entitlement as per CGHS rules. It further includes description of General ward, semiprivate ward, private ward as per CGHS norms.

4. DURATION

The Agreement shall remain in force for a period of 2 years or till it is modified or revoked, whichever is earlier. The Agreement may be extended for subsequent periods as required by NIMHANS subject to fulfillment of all the terms and conditions of this Agreement and with mutual consent.

5. MEDICAL AUDIT OF BILLS

The medical audit of the bills of the hospital/center will be conducted by the NIMHANS or any authority designated by NIMHANS or the Ministry of Health & Family Welfare for that purpose within 90 days of discharge of the NHS beneficiary, as the case may be, from Hospital.

6. REVISION OF RATES

In case the notified rates are revised by the Ministry of Health & Family Welfare after empanelment and such revised rates are not acceptable to the empanelled hospital/center no longer whishes to continue on the list empanelled hospitals/centers, it can apply for exclusion from the panel by giving three months notice and by depositing an exit fee equivalent to the average monthly bill submitted by it to the NIMHANS in the preceding one year.

TREATMENT IN EMERGENCY

In emergency the hospital shall not refuse admission or demand an advance payment from the beneficiary or his family member and shall provide credit facilities to the patient whether the patient is a serving employee or a pensioner availing NHS facilities, on production of a valid NHS card within 24 hrs and the hospital shall submit the bill to BCA. The refusal to provide the treatment to bonafide NHS beneficiaries in emergency cases without valid ground, would attract disqualification for continuation of empanelment.

8. GENERAL CONDITIONS

8.1 All investigations regarding fitness for the surgery will be done prior to the admission for any elective procedure and are part of package. For any material/ additional procedure investigation other than the condition for which the patient was initially permitted would require the permission of the competent authority.

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Bangalore - 560 078.

8.2 The package rate will be calculated as per the duration specified in the tender document under the "treatment requirements". No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

8.3 The rate being charged will not be more than what is being charges for same procedure from other (CGHS, non-CGHS and non Central Govt.) patient s or institutions. An authenticated list of rates being charged from other non-CGHS, non-Central Govt. Institutions if available will also be

supplied within 10 days of this agreement.

8.4 The procedure and package rates for any procedure and other medical treatment for NHS beneficiary under this Agreement shall not be increased during the validity period of this Agreement.

8.5 The empanelled Hospital/Centre shall provide services only for which it has been empanelled at

rates that will be fixed from time to time and shall be binding.

8.6 The Hospital will intimate all instances of patients admitted on the basis of the Authority letter issued by the NHS authorities in the prescribed format within one working day through fax/email (the number of which shall be notified) followed by post.

8.7 The Hospital /Centre shall provide reports on monthly basis by the 10th day of the succeeding calendar month in the prescribed format to the NIMHANS in respect of the beneficiaries treated.

8.8 The Hospital/Center agrees that any liability arising due to any default or negligence in providing or performance of the medical services shall be borne exclusively by the hospital/center who shall alone be responsible for the defect and /or deficiencies in rendering such services.

8.9 The Hospital agrees that during the in-patient treatment of the NHS beneficiary, the Hospital will separately purchase attendant to his beneficiary or ask the not medicines/sundries/equipment or accessories from outside and will provide the treatment within the package deal rate, which includes the cost of all the items. Appropriate action, including removing from NHS empanelment and / or Termination of this Agreement, may be initiated on the basis of a complaint, medical audit or inspections carried out by NHS teams

8.10 On production of a valid permission by the NHS/beneficiaries, the hospital/center shall provide credit facilities to the NHS beneficiaries after verifying the photo in the card . The NIMHANS is not liable to pay in cases of impersonation or treatment of ineligible persons.

8.11 The Hospital/Centre will submit an annual report regarding number of referrals received, admitted, bills submitted to the NHS and payment received.

8.12 Authorized signatory/representative of the hospital/center shall attend the periodic meetings

held by Director, NIMHANS.

8.13 The Hospital/Diagnostic Centre will not make any commercial publicity projecting the name of NIMHANS. However, the fact of empanelment under NHS shall be displayed at the premises of the empanelled center, indicating that the charges will be as per CGHS approved rates.

8.14 The hospital will investigate/treat the NHS beneficiary patient only for the condition for which they are referred with permission, and in the specialty and / or purpose for which they are approved by NHS.

8.15 The Hospital shall not undertake treatment of referred cases in the system of medicine for which

it is not empanelled.

8.16 The hospital will not refer the patient to other specialist / other hospital without prior permission of NIMHANS. Prior intimation shall be given by the NHS whenever patient needs further referral.

8.17 The rates notified by CGHS shall be available on web site of Ministry of Health & Family Welfare Govt. of India at www.mohfw.nic.in.

SUBMISSION OF BILLS TO BILL CLEARING AGENCY

The Hospital/Centre shall submit the bills of the NHS beneficiaries both electronically as well as physically to the BCA for processing the same for payment.





PRINCIPAL Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

The Hospital / Centre is required to pay processing fee to the bill Clearing Agency. The processing Fee is as under:

Claim Amount Range	Process fee (Rs)		
Below Rs. 500.00	7-00		
Rs 501 to Rs 1,000.00	15.00		
Rs 1,001 to Rs 5,000.00	30.00 150.00		
Rs 5,001 to Rs 10,000.00			
Above Rs 10,000.00	266.00		

10. DUTIES AND RESPONSIBILITIES OF HOSPITALS / CENTERS

It shall be the duty and responsibility of the Hospital / Centre, at all times, to obtain, maintain and sustain the valid registration, recognition and high quality and standard of its services and health care and to have all statutory / mandatory licenses, permits or approvals of the concerned authorities under or as per the existing laws.

11. NON ASSIGNMENT

The hospital / centre shall not assign, in whole or in part, its obligations to perform under the agreement, except with the NIMHANS's prior written consent at its sole discretions and on such terms and conditions as deemed fit by the NIMHANS. Any such assignment shall not relieve the Hospital / Centre from any liability or obligation under this agreement.

12. HOSPITAL'S / CENTER'S INTEGRITY AND OBIGATIONS DURING AGREEMENT PERIOD

THE Hospital's / Centre is responsible for and obliged to conduct all contracted activities in accordance with the Agreement using state- of -the -art methods and economic principles and exercising all means available to achieve the performance specified in the Agreement. The Hospital / Centre is obliged to act within its own authority and abide by the directives issued by the NIMHANS. The Hospital / Centre is responsible for managing the activities of its personnel and will hold itself responsible for their misdemeanors, negligence, misconduct or deficiency in services, if any.

13. LIQUIDATED DAMAGES

- 13.1 The Hospital / Diagnostic Centre shall provide the services as per the requirements specified by the NIMHANS in terms of the provisions of this Agreement. In case of initial violation of the provisions of the agreement by the Hospital / Centre such as refusal of service or direct charging from the NHS Beneficiaries or defective service and negligence, in the first instance, the complaint will be examined by the NIMHANS authorities and if the complaint is found to be true the NIMHANS shall have the right to give a show cause notice to the Hospital to be replied within 10 days of its receipt, and the reply of the Hospital will be examined by a standing committee constituted for the purpose of deciding the appropriateness of the treatment or diagnostic procedures, as the case maybe. If the Committee concludes that the Hospital / Diagnostic Centre has violated the provisions of the Agreement necessary action will be taken for de-recognition of that Hospital. The decision of the NIMHANS will be final.
- 13.2 For over-billing and unnecessary procedures, the extra amount so charged will be deducted from the pending / future bills of the Hospital / Diagnostic Centre and the NIMHANS shall have the right to issue a written warning to the Hospital / Centre not to do so in future. The recurrence, if any, will lead to stoppage of referral to the Hospital / Diagnostic Centre.

14. TREATMINATION FOR DEFAULT

14.1 The NIMHANS May, without prejudice to any other remedy for breach of Agreement by written notice of default sent to the Hospital / Centre terminate the Agreement in whole or part:

Kumaraswamy Layout,

Bangalore - 560 078.

off the Hospital / Centre fails to provide any

(Bengalore)

Payment within twenty days:

NIMHANS shall appoint a Bill Clearing Agency (BCA), for processing of Data / Bills of all NHS beneficiaries attending these Hospitals, NIMHANS would ensure that payment of hospital claims would be done in time bound manner – within a period of 20 working days from the date of submission of bills in physical format / complete information related to the claim to the designated BCA.

NHS beneficiary attending hospital:

In such a situation the Hospital shall intimate to BCA within 2 hours of admission and BCA shall respond in 4 working hours (however treatment shall not be denied to any NHS member and this is only an initiation of the e-workflow). Post discharge, hospital would upload bills and download documents as per requirements of NHS within 96 hours.

Infrastructure for interaction with BCA

The Hospital shall have:

Dedicated personal Computer with Dual Core /core 2 DUO processor and minimum 2 GB RAM supported by UPS. OS should be Windows. Dedicated Colour scanner with a minimum resolution 200dpi. Scalable Broad Band Internet connectivity with minimum assured speed of 512 kbps.

Necessary security systems should be taken care of A designated Nodal Person to interact with BCA The Private Hospital would be legally responsible for user authentication.

Processing of Claims / Bills by BCA:-

The actual auditing shall start when physical copies containing complete information of these bills are submitted by concerned Hospital to the BCA on behalf of the NIMHANS.

The BCA during the course of the auditing shall restrict the claims as per CGHS rules and regulations. BCA shall also examine in terms of the following:

- * Appropriateness of treatment including screening of patients records to identify unnecessary admissions and unwarranted treatments.
- * Whether the planned treatment is shown as emergency treatment
- * Whether the diagnostic medical or surgical procedures that were not required were conducted by hospital including unnecessary investigations.
- * Maintaining database of such information of NHS beneficiaries for future use.
- * whether the treatment procedures have been provided as per the approved rates and the packages.
- *Whether procedures performed were only those for which permission has been granted.

The BCA shall record their findings and intimate the same to the Hospital concerned with a copy endorsed to NIMHANS. The payment of the bill / claim to the hospital concerned shall be made directly by NIMHANS after receipt of the bills which are duly adjudicated by the BCA.

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Dayananda Sagar College of Dental Sciences
Kumaraswamy Layout,
Bangalore - 560 078.

- b) within the period (s) specified in the Agreement, or within any extension thereof if granted by the NIMHANS as the case may be, pursuant to Condition of Agreement, or If the Hospital / Center fails to perform any other obligation (s) under the Agreement.
- c) If the Hospital / Center in the Judgment of the NIMHANS has engaged in corrupt or fraudulent practices in competing for or in executing the Agreement.
- 14.2 If the hospital/center found to be involved in or associated with any unethical illegal or unlawful activities, the Agreement will be summarily suspended by NIMHANS without any notice and thereafter may terminate the Agreement, after giving a show cause notice and considering its reply if any, received within 10 days of the receipt of show cause notice.
- 14.3 In case of any violation of the provisions of the Agreement by the Hospital/Center such as (but not limited to), refusal of service, refusal of credit facilities to eligible beneficiaries and direct charging from the NHS beneficiaries, undertaking unnecessary procedures, prescribing unnecessary drugs / tests, deficient or defective service, over billing and negligence in treatment, the NIMHANS shall have the right to de-recognize the hospital/center as the case may be.

15. INDEMNITY

The hospital / Center shall at all times, indemnify and keep indemnified NIMHANS against all actions, suits, claims and demands brought or made against it in respect of anything done or purported to be done by the Hospital / Center in execution of or in connection with the services under this Agreement and against any loss or damage to NIMHANS consequent to any action or suit being brought against the NIMHANS along with (or otherwise), Hospital / Center as a party for anything done or purported to be done in the course of the execution of this Agreement. The Hospital /Diagnostic Center will at all times abide by the job safety measures and other statutory requirements prevalent in India and will keep free and indemnify the NIMHANS from all demands or responsibilities arising from accidents or loss of life, the cause or result of which is the Hospital / Center negligence or misconduct.

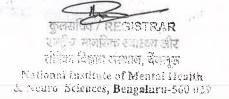
The Hospital / Center will pay all indemnities arising from such incidents without any extra cost to NIMHANS and will not hold the NIMHANS responsible or obligated. The NIMHANS may at its discretion and shall always be entirely at the cost of the Hospital Center defend such suit, either jointly with the Hospital / Center or singly in case the latter chooses not to defend the case.

PAYMENT

The payment will be made to the Hospital / Center within a period of 20 days from the date of submission of the bill accompanied with all necessary and supporting documents. This clause should be read with clause Number 09.

17. MISCELLANEOUS

- 17.1 Nothing under this Agreement shall be construed as establishing or creating between the parties any relationship of Master and Servant or Principal and Agent between the NIMHANS and the Hospital /Center.
- 17.2 The Hospital / Center shall not represent or hold itself out as agent of the NIMHANS.
- 17.3 The NIMHANS will not be responsible in any way for any negligence or misconduct of the Hospital / Center and its employees for any accident, injury or damage sustained or suffered by any NHS beneficiary or any third party resulting from or by any operation conducted by and on behalf of the Hospital / Center or in the course of doing its work or perform their duties under this Agreement or otherwise.
- 17.4 The Hospital/Center shall notify the Government of any material change in their status and their shareholdings or that of any Guarantor of the Hospital / Center in particular Where such change would have an impact on the performance of obligation under this Agreement.
- 17.5. This agreement can be modified or altered only on written agreement signed by both the parties





Dayananda Sagar College of Dental Sciences Kumaraswamy Leyout, Bangalore - 560 078.

- 17.6. Should the hospital get wound up, partnership is dissolved, the NIMHANS shall have the right to terminate the Agreement. The termination of Agreement shall not relieve the hospital or their heirs and legal representatives from the liability in respect of the services provided by the Hospital during the period when the Agreement was in force.
- 17.7. The Hospital shall bear all expenses incidental to the preparation and stamping of this agreement.

18. NOTICES:

18.1 Any notice given by one party to the other pursuant to this Agreement shall be sent to other party in writing by registered post or by facsimile and confirmed by copy post the other party's address as below.

Director, NIMHANS, Hosur road, Bangalore - 560029

Hospital / Diagnostic Center with Address: DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES Shavige Malleshwara Hills, Kumaraswamy Layout Bangalore - 560078

18.2 A notice shall be effective when served or on the notice's effective date, whichever is later Registered communication shall be deemed to have been served even if it is returned with remarks like refused. Left, premises locked etc.

IN WITNESSES WHERE OF, the parties have caused this Agreement to be signed and executed on the day, month and the year first above mentioned.

In the Presence of

Witnesses

2.

Signed by

राष्ट्रीय मानसिक स्याख्या और

Registrar

तंत्रिका दिझान संस्थान, बेनपुल

NIMHANS Varional Institute of Meatal Health & Neuro Sciences, Bengaluru-560 029

In the presence of

Signed By

For and or behalf of (Hospital / Center)

Duly authorized vide resolution No...... dated.......

of (name of Hospital / Center Dr. Hemanth .M MDS., Ph.D.

PRINCIPAL

Dayananda Sagar College of Dental Sciences Kumaraswamy Layout,

Bangalore - 560 078.

PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.



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PRINCIPAL DSCDS BANGALORE

Description of Document

: Article 12 Bond

Description

: MOU

Consideration Price (Rs.)

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First Party

: PRINCIPAL DSCDS BANGALORE

Second Party

: DIRECTOR KIDWAI BANGALORE

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PRINCIPAL DSCDS BANGALORE

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(One Hundred only)







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MEMORANDUM OF UNDERSTANDING (MoU)

FOR REFERRAL OF PATIENTS FOR MAXILLOFACIAL PROSTHETIC REHABILITATION FREE OF COST

BETWEEN

KIDWAI MEMORIAL INSTITUTE OF ONCOLOGY, CANCER RESEARCH AND TRAINING CENTRE, BANGALORE

AND

DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES, BANGALORE

- Any discrepancy in the details on this Certificate should be verified at 'www.shcilestamp.com' or using e-Stamp Mobile App of Stock Holding Any discrepancy in the details on this Certificate and as available on the website / Mobile App renders it invalid.

 The onus of checking the legitimacy is on the users of the certificate.

 In case of any discrepancy please inform the Competent Authority.

Dr. C Ramachandra Director Kidwai Memorial Institute of Oncology. Cancer Research and Training Centre, Bangalore

Prof. Dr. Hemanth M MDS, Ph.D

Principal

Dayananda Sagar College of Dental Sciences, Bangalore

As on 10/01/2022

Introduction and Background:

The Dayananda Sagar College of Dental Sciences is a part of the Dayananda Sagar Institutions located at Campus - 1. Kumaraswamy Layout Bangalore. It started in 1991 as an Institution that caters to all the Oral Health Care needs of patients and provides training to Under Graduate, Post-Graduate and Ph. D students and functions under the aegis of the prestigious Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka. There are 9 sub-specialties of Dentistry out of which Post Graduation is being held in 7 specialties.

The Department of Prosthodontics commenced its Post Graduate Program in the year 2009 and caters to intra oral and extra oral prosthetic rehabilitation. The treatment includes Complete Denture, Removable Partial Denture, Fixed Partial Denture, Maxillofacial Prosthesis and Implants.

Now, in accordance to the mutual desire to promote and develop activities between two Institutions, namely the Dayananda Sagar College of Dental Sciences and Hospital & Kidwai Memorial Institute of Oncology, Cancer Research and Training Centre, Bangalore, we agree to the following statement of intent on skill-based education and cooperation in regard to prosthetic rehabilitation of patients with maxillofacial defects. This cooperation in specific areas may be designed by mutual consent and incorporated into specific additional agreements upon signature by the appropriate authorities of both the institutions.

- 1. The two said institutions agree to the following general areas of interest and cooperation in the interest of patient care and teaching.
- a. Referral of patients for rehabilitation with maxillofacial prosthesis post oncology surgery, which will be **free of cost** at the dental college.
- b. Prosthetic assistance from the prosthodontic post graduate students during the surgical phase.

Scope of association:

- To benefit the patients since the treatment would be free of cost.
- It will be of academic interest to the postgraduate students in enhancing their knowledge and skill.
- On-site presence of postgraduate students during surgery if prosthetic assistance would be required.
- 2. Both the Institutions recognize that:
- a) This MoU establishes a foundation of mutual understanding and interest and does not itself entail any financial obligations for either institution.
- b) This MoU will take effect from the date of its signing and shall be valid immediately.

This MoU is being signed on 10/01/2022 and will stand effective from this date for a period of two years.

Prof. Dr. Hemanth. M MDS, Ph.D. Principal,

Dayananda Sagar College of Dental Sciences, Kumaraswamy Layout Bangalore - 560 078

PRINCIPAL

Dayananda Sagar College of Denkal Sciences Kumaraswamy Layout, Bangakore - 560 078.

Dr. C. Ramachandra

Director

Kidwai Memorial Institute of Oncology,

Cancer Research and

Training Centre, Bangalore
Kidwai Memorial Institute of Oncology Cancer Research & Training Centre

Dr. M.H. Marigowda Road, Bengaluru-560 FT9



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



AGREEMENT LETTER

Dayananda Sagar College of Dental Sciences, Kumaraswamy Layout, Bengaluru is hereby making an agreement with Govindan Ideal Imaging Ultimate X-ray Solutions, #239, Venkatesh Nagar, Hosur-635109, Krishnagiri District, (T.N), mobile number 9790145860, 8618594755, email: idealimaging7@gmail.com for the disposal of fixer solution and used X-ray films/lead foil for a period of 5 years starting from 01/02/2018 to 31/01/2023.

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Authorized Signature

S. GOVINDAHAN D. No. 239, Venkatesh Nagar HOSUR-635 109, Knshnagiri Olst. (F N.) Cell : 97901 45869 Authorized Signature

Dr. Hemanth .M MDS., Ph.D.
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yananda Sagar College of Dental Sciences
Kumaraswamy Layout,

Bangalore - 560 078.





DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

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AGREEMENT LETTER

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Authorized Signature

S. GOVINDAHAN D. No. 239, Venkatesh Ragar MOSUR-633 109, Krishnagiri Dist. (T H.) Ceft : 97901 45869 Authorized Signature

Dr. Hemanth .M MDS., Ph.D. PRINCIPAL

'ayananda Sagar College of Dental Kumaraswamy Layout,
Bangalore - 560 078.

Shavige Malleshwara Hills, Kumaraswamy Layout, Bangalore - 560111.

Phone: +91 80 26663654, 26662226 Fax: 26660789 Mobile: 74836 93035

E-mail:principal@dscds.edu.in Website: www.dscds.edu.in



DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka) (Recognised by Dental Council of India, New Delhi)



Memorandum of Understanding By and Between Dayananda Sagar College of Dental Sciences, Bengaluru Abhalashrama, Bengaluru

This MoU is entered into on the 1st April 2022 (here after the "Effective Date") by and between: Abhalashrama, with its registered office at 125,6, DVG Road, Basavanagudi, Bangalore 560004 and Dayananda Sagar College of Dental Science at Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru 560078 (hereafter referred to as "DSCDS")

Who are referred to, collectively, as "Parties" or, individually, as "Party".

PREAMBLE: WHEREAS DSCDS and Abhalashrama, recognize the benefits to be derived from collaboration, cooperation and mutual interaction for the development and promotion of joint activities to address issues of mutual interest, designed to foster and promote oral screening and oral care.

NOW THE PARTIES HAVE AGREED AS HERE UNDER:

- 1) NATURE AND SCOPE OF JOINT ACTIVITIES: The parties have agreed to undertake the following activities jointly:
- a) Oral screening and treatment of patients at the dental clinic, Abhalashrama.
- b) General hygiene and oral health education to all the patients coming to the clinic.
- c) Periodic oral cancer screening and referral.
- 2) PUBLICITY & MARKETING:

Both Parties agree to consult each other in case of any requirement for publicity of the said project to the media or any other agency and to act diligently in the best interest of the project.

- 3) CONFIDENTIALITY:
- a) Both Parties shall treat as strictly confidential and prevent disclosure there of all confidential Information exchanged pertaining to the activities under this MoU between DSCDS and Abhalashrama ("Confidential Information"). Both parties shall not disclose or use such confidential Information for any other party in any manner and shall only use such information for the purposes of this MoU.
- 4) TERMS OF MoU:

This MoU shall come into force from the 'Effective Date' and shall remain in force for a period of 3 years (36 months), from the 'Effective Date' of the MoU. The term of the MoU may be mutually extended on terms mutually agreed to by the Parties. For ABALASHRAMA

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5) RESPONSIBILITY:

- a) The Manpower responsibility of providing dental doctors (Staff, PGs and interns) 1 day in a week under this MoU lies with Dayananda Sagar College of Dental Sciences. Once the demand increases, the two parties can discuss to increase the number of days.
- b) Abhalashrama has agreed to provide a space with 2 working dental chairs, equipments, and non consumable materials required to run the dental unit at Abhalashrama.
- c) Consumable dental materials to be provided periodically by Abhalashrama for smooth functioning of the dental clinic.
- d) It will be the sole responsibility of Abhalashrama to take care of the cleaning of instruments and the premises as well as biomedical waste management.

6) TERMINATION:

- a) On non-performance of the obligations as specified in this MoU, either Party shall be entitled to terminate this MoU for any such breach of the terms of the MOU remains uncured for a period of 30 working days from the date of the notice to cure such breach. For the purpose of this clause, any breach of the terms of the MOU shall be deemed to have taken place from the date of the receipt of written intimation that a claim of breach has been raised.
- b) Notwithstanding anything contrary stated herein above, both parties shall have the right to terminate this MoU without assigning any reasons by giving 30 days written notice to the other Party.

7) FORCE MAJEURE:

- a) Neither Party shall be liable for any failure or delay in performance under this MOU to the extent the said failures or delays are proximately caused by causes beyond that party's reasonable control and occurring without its fault or negligence, including, without limitation, performance failures of parties outside the control of the contracting Party, Acts of God, War, Floods, Earthquakes, Strike, Lockouts, Epidemics, Riots, Civil disturbance among others, provided that, force majeure will apply only if the failure to perform could not be avoided by the exercise of due care by the Party invoking this clause and such Party does everything reasonably possible to resume its performance under this MoU.
- b) A Party affected by an event of force majeure shall give the other Party written notice, with full details as soon as possible and in any event not later than fourteen calendar days of the occurrence of the cause relied upon. If force majeure applies, dates by which performance obligations are scheduled to be met will be extended for a period of time equal to the time lost due to any delay so caused.

However, if the performance of the MOU is delayed beyond eight (8) weeks from the date of this MoU either party may, at its discretion, terminate this MoU.

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Dayananda Sagar College of Dental Science
Kumaranwamy Layout,
Kumaranwamy Layout,
Bangalore - 560 078.

ABALASHRAMA 125-6, Dr. D.V.G. Road Basavanagudi BENGALURU-560 004 For ABALASHRAMA

MON. SECRETARY

9) GENERAL:

- a) Severability: If any provision of this MoU is found by any court of competent jurisdiction to be invalid or unenforceable, the invalidity of such provision shall not affect the other provisions of this MoU, and all provisions not affected by such invalidity shall remain in full force and effect.
- b) Waiver: The waiver by either Party of a breach or default in any of the provisions of this MoU by the other Party shall not be construed as a waiver of any succeeding breach of the same or other provisions; nor shall any delay or omission the part of either Party to exercise or avail itself of any right, power or privilege, operate as a waiver of any breach or default by the other Party. Relationship: This MoU is being entered into on a principle-to-principle basis.
- d) Notices: Any notice shall be given by way of registered post with acknowledgment due at the address given in the description of the parties. Email communications shall not be accepted as valid legal notices. The address and other details of the parties for the purpose of communication, unless otherwise notified in writing, to the other parties shall be as provided in this MoU.
- e) Binding Nature and Assignment
- i. This MoU shall be binding upon and inure solely to the benefit of the parties here to and their successor and permitted assigns and nothing in this MoU shall confer upon any other person or entity any legal or equitable right, benefit or remedy of any nature whatsoever under or by reason of this MoU. Neither Party shall have the power to assign or transfer this MoU without the prior, written consent of the other Party.
- ii. This MoU constitutes the entire MOU between the parties hereto. There are no prior or contemporaneous, oral or written, representations, understandings or MoUs, which are not fully expressed in this MoU.
- f) Amendment No amendment, change order, waiver or discharge shall be valid unless it is in writing and signed by an authorized representative of the Party against whom such amendment, change order, waiver or discharge is sought to been forced.
- g) Limitation of Liability: In no event shall either party be liable to the other party or any other entity for any kind of losses including any lost profits, or for any indirect, special, consequential or incidental damages arising out of this MOU, under any cause of action, whether or not such party or its agents have been advised of the possibility of such damage.
- h) Dispute Resolution:

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i. Any dispute or difference arising between the parties under this MOU or the implementation of the obligation arising there from shall be discussed mutually and resolved within a period of 30 days. Namanda Sagar College of Derival Sciences

ABALASHRAMA 125-6, Dr. D.V.G. Road Basavanagudi BENGALURU-560 004

HON. SECRETARY

ii. In the event that no such mutual settlement is reached, any and all disputes arising out of or in relation to this MOU shall be subject to the exclusive jurisdiction of the courts at Bengaluru, Karnataka, to the exclusion of all other courts.

lii Any research activities related to the data collected by both parties will be informed prior to publishing.

iii. All notices, communication under this MOU will be sent by Registered AD and shall be addressed to: Designated contact persons for parties to the MOU Dr. Hemanth M, Principal, DSCDS and Sri. B V Shesha, Honorary Secretary, Abhalashrama, Bangalore

IN WITNESS THERE OF,

The parties to this MOU, intending to be legally bound, have duly executed this MOU to become effective as of the date first written above.

Dr. Hemanth M, MDS, Ph.D.

Principal,

Dayananda Sagar College of Dental Sciences **PRINCIPAL**

Dayananda Sagar College of Dental Scient Kumaraswamy Layout, Bangalore - 560 078. For ABALASHRAMA

Sri. B V Shesha,

Secretary,

Abhalashrama

ABALASHRAMA 125-6, Dr. D.V.G. Road Basavanagudi

BENGALURU-560 004



ORAL-3D HEALTH CARE PVT LTD



PMALIGE, No. 340, GROUND FLOOR, 5TH MAIN, VINAYAKA LAYOUT, 9TH BLOCK, NAGARABHAVI 2ND STAGE, BANGALORE -72
PH: 08023397595, 9986006648, CIN: U85200KA2019PTC127004

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (herein after called "MOU" is entered into on this date 03-01-2023 by and between

Dayananda Sagar College of Dental Sciences, Bangalore, the First Party represented by its Principal, (here in after referred to as "First Party)

AND

Oral-D Pvt Ltd, Bangalore. the Second Party represented by its Director, (here in after referred to as "Second Party)

This memorandum of understanding is intended to promote cooperation between the Dayananda Sagar College of Dental Sciences and Oral-D Pvt Ltd, Bangalore recognizing the benefits to their respective institutes from the establishment of institutional links, hereby agree to enter into this agreement for the following purposes.

Purpose

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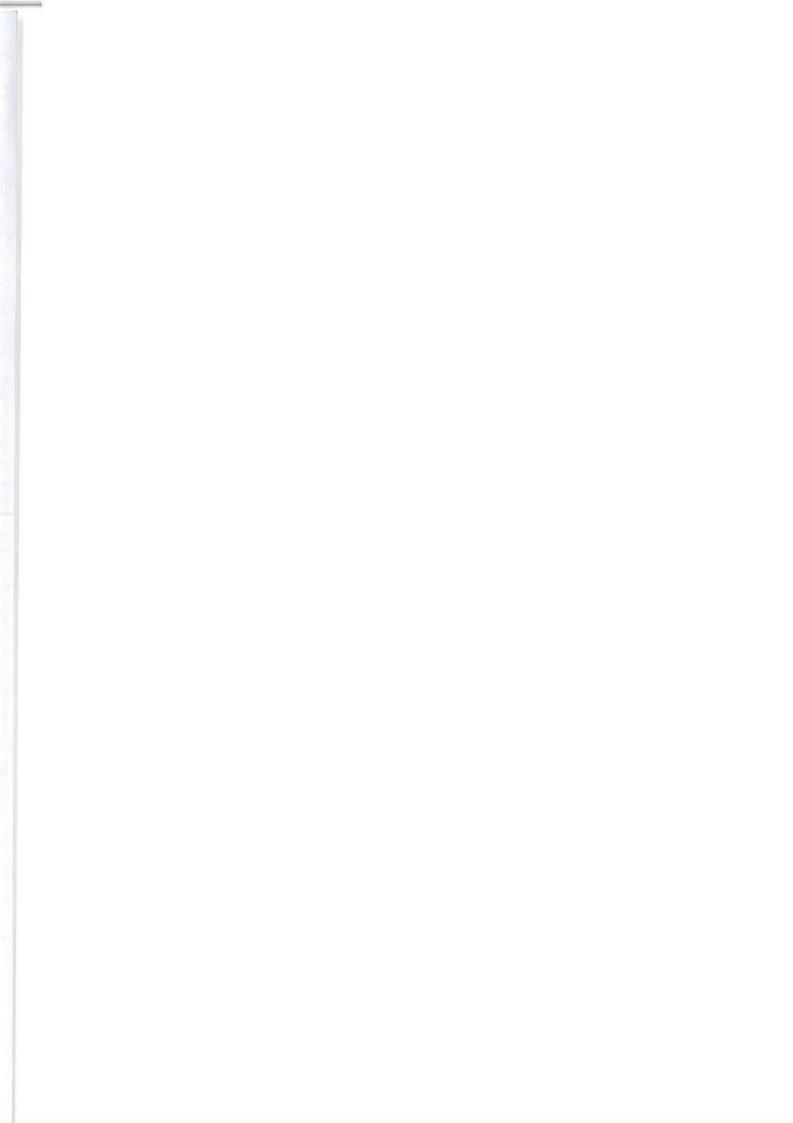
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Bangalore of Dental Sciences

Rumaraswamy Layout,

Rumaraswamy Layout,

Bangalore 560 078.



The purpose of this agreement is to develop a scope for future research programs, establish the guidelines for collaboration the two institutions and to cooperate in their mutual interest for a range of educational activities.

Agreement:

Both parties hereby agree to work together to:

- 1. Utilize advanced imaging modalities for research purposes.
- 2. Persue knowledge and distant education facilities on 3D printing, digital impressions and CAD CAM facilities.
- 3. Conduct Joint research and development project
- 4. Provide opportunities for Professors and researchers to give lectures
- 5. Provide employment opportunities where possible to the post graduate students passing out from the Department of Oral Medicine and Radiology, Dayananda Sagar College of Dental Sciences through campus placements

Meetings & Reporting:

To accomplish these objectives , partners will meet at least once a year for the purpose of program planning and monitoring and evaluating outcomes. Decisions at the meeting will be decided by mutual consensus.

Funding and financial responsibilities:

Nothing in this MOU shall be deemed to be a commitment or obligation of funds from either Dayananda Sagar College of Dental Sciences, Bangalore or Oral D Pvt Ltd, Bangalore or any of their various components. The entities acknowledge that all or any financial arrangements must be negotiated and will depend upon the availability of funds. Each or the participating institutions shall be fully responsible financially for the activities carried out under its direction or by its staff, except as otherwise agreed by the parties

Intellectual Property

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Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.

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Intellectual property rights carried out at each partner institutions shall normally vest with the respective institutions

Puration:

This MOU is at will and be modified with the mutual consent of the authorized individuals of Dayananda Sagar College of Dental Sciences, Bangalore and Oral D Pvt Ltd, Bangalore. Once signed by authorized officials of both parties, this MOU will be effective for a period of 5 years.

Termination of Agreement

This agreement may, at any time during its period of validity be terminated by either party upon prior notice to the other in writing provide the termination shall not affect the completion of any program underway at the time of termination notice being given.

In agreement with the above terms of participation, the authorized representatives of Dayananda Sagar College of Dental Sciences, Bangalore and Oral D Pvt Ltd, Bangalore hereby affix signatures.

For: Dayananda Sagar College of

Dental Sciences, Bangalore

For: Oral D 3D Digital Dental

Diagnostics, Bangalore

Dr. Hemanth M

Principal PRINCIPAL

Dr. Vinod AR
Director

Dayananda Sagar College of Bental Sciences

Kumaraswamy Layout,

Bangalore - 560 078.



MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding is made effective from this day 10th of February 2022 (10/02/2022) binding between **Disha Bharat** a trust registered under the Indian Trusts Act1882 (hereinafter referred to as the First Party, which term shall mean and include its successors, assigns and legal representatives, having its office at 57/3, 17th Cross, Margosa Road, Malleswaram, Bangalore - 560055, is represented by its **Secretary Smt. Rekha Ramachandran**) and **Dr. Hemanth M, The Principal, Dayananda sagar College of Dental Sciences, Kumaraswamy Layout, Bengaluru - 560078** (Hereinafter both First Party and Second Party referred to as the Parties).

RECITAL:

WHEREAS the First party is a Trust registered under the Indian Trusts Act1882 (**Reg. No. BK IV 13/14-15**) with an aim of equipping the students with eternal values and is involved in conducting workshops and faculty development programs for different colleges in Bangalore.

WHEREAS the First Party has agreed to conduct such workshops and faculty development programs for the Second Party.

WHEREAS the Second Party has agreed to facilitate in every possible way for such workshops and faculty development programs conducted by the First Party.

NOW THEREFORE in consideration of mutual promises and obligations set out in this agreement, the sufficiency of which is hereby acknowledged, the above parties intending to be legally bound agree to the following:

1. PURPOSE:

- 1.1 The present education system equips the person with three Rs' i.e. Reading, Writing and Arithmetic while it is of utmost importance to imbibe within the students the three C's (Country, Character and Culture). With a noble intention of combining the three Rs' and the three C's, the Second Party approached the First Party to conduct workshops for the students and faculty development programs for the faculty of the Second Party.
- 1.2 This Memorandum of Understanding is a framework of coordination and cooperation for the purposes of conducting the Workshops and Faculty Development Programs.

Contact: Rekha Ramachandran,57/3, Margosa Road, Malleswaram, Bangalore-560055 Phone: 080-23311469 Mob: 9845681573, Email: info@dishabharat.org



2. RESPONSIBILTIES OF THE SECOND PARTY:

- 2.1 The Second Party covenants to bear the expenses including the costs incurred by the coordinators relating to various events that shall be conducted by the First Party.
- 2.2 The Second Party shall provide at least a minimum of 90 students but however shall limit the students to a maximum of 120 students per workshop.
- 2.3 The Second Party agrees to dedicate an entire working day for the purpose of conducting the workshops and the faculty development program.
- 2.4 The Second Party agrees to provide the required space within their institution for the purpose of conducting the workshops and the faculty development programs which involve yoga and games.
- 2.5 The Second Party shall depute one faculty representative to coordinate with the First Party to ensure the attendance of the students for the workshop and aid in making the necessary arrangements for the same.

3. RESPONSIBILITIES OF THE FIRST PARTY:

- 3.1 The First Party shall conduct a quality and brainstorming workshop for the students and faculty members of the Second Party.
- 3.2 The First Party shall inform the Second Party all the details of the workshop well in advance to allow the Second Party to make the necessary arrangements.
- 3.3 The choice of the Resource Person shall be at the sole discretion of the First Party. However, the suggestions of the Second Party shall also be considered before deciding the Resource Persons.
- 3.4 The First Party shall submit all the necessary vouchers required by the Office of the Second Party in order to maintain accounts.
- 3.5 The number of workshops to be conducted by the First Party shall be mutually decided by the parties.

4. CONFIDENTIALITY:

4.1 Both the Parties agree to hold in confidence all the information or data designated as confidential which is obtained by either of the parties or created during the performance of this Memorandum and shall not reveal it to a third party without a written consent by the other party. Either parties shall not involve the name, banner, or logo of the other party

Contact: Rekha Ramachandran,57/3, Margosa Road, Malleswaram, Bangalore-560055 Phone: 080-23311469 Mob: 9845681573, Email: info@dishabharat.org



for any other programs other than the workshops and faculty development programs conducted by the First Party without the written consent of the other party.

5. DURATION:

5.1 This Memorandum of Understanding shall remain valid for the next three Academic Year unless terminated by a written notice by either of the parties. The duration may be extended upon mutual consent of both the parties.

6. INTELLECTUAL PROPERTY:

6. The First Party shall be the sole owner of all the intellectual properties generated through the workshop or the faculty development programs conducted in the premises of the Second Party.

7. AMENDMENT:

This Memorandum of Understanding may be amended as when required upon the mutual consent of both the parties.

8. COMMUNICATION:

All the communications with respect to this Memorandum of Understanding shall be addressed to

Dr. Hemanth M, The Principal, Dayananda sagar College of Dental Sciences, Kumaraswamy Layout, Bengaluru.

9. SIGNED IN DUPLICATE:

This Memorandum of Understanding is executed in duplicate with each copy being the official version and having equal legal validity.

Smt. Rekha Ramachandran, Secretary, Disha Bharat Bengaluru.

DISHA CHARITABLE TRUST FOR VALUE INITIATIVES (R) # 57/3, Margosa Road, 17th Cross, Malleswaram, Rengaluru-560055 Dr Hemanth M

Principal,

Dayananda Sagar College of Dental Sciences, Bengaluru.
PRINCIPAL

Dayananda Sagar College of Bental Sciences Kumaraswamy Layout, Bangalore - 560 078.

Contact: Rekha Ramachandran,57/3, Margosa Road, Malleswaram, Bangalore-560055 Phone: 080-23311469 Mob: 9845681573, Email: info@dishabharat.org