



**VINAYAKA MISSION'S  
RESEARCH FOUNDATION**  
(Deemed to be University under section 3 of the UGC Act 1956)



**VINAYAKA MISSION'S  
SANKARACHARIYAR  
DENTAL COLLEGE**



# **BACHELOR OF DENTAL SURGERY IV BDS GUIDE BOOK 2023 - 2024**



NH-47, Sankari Main Road, Ariyanoor, Salem - 636 308. Tamilnadu, India.  
Phone : 0427-2477723 E-Mail : dean@vmsdc.edu.in

College Website : [www.vmsdc.salem.com](http://www.vmsdc.salem.com)

University Website : <https://vinayakamission.com>

Any clarifications / corrections in Guidebook kindly contact IV BDS Guide  
book staff in-charge -

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Department of Periodontology  
Mobile No: 9952716937



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DENTAL COLLEGE**



## Personal Memoranda

## Affix Photo

**Name** : \_\_\_\_\_

**Registration Number** : \_\_\_\_\_

**Father/Mother's Name** : \_\_\_\_\_

**Address** : \_\_\_\_\_  
\_\_\_\_\_

**Email Id** : \_\_\_\_\_

**Mobile No.** : \_\_\_\_\_

**Date Of Birth** : \_\_\_\_\_

**Blood Group** : \_\_\_\_\_

**Year of Admission** : \_\_\_\_\_

**Year of Study** : \_\_\_\_\_

**Student Academic Coordinator** : **Dr.Anitha. A**  
**Mobile No:** **6379448862**

**Mentor's Name** : \_\_\_\_\_

**Dept. Name & Room. No** : \_\_\_\_\_

**Phone No** : \_\_\_\_\_

**Other Details if any** : \_\_\_\_\_

NH 47 Sankari Main Road, Ariyanoor, Salem - 636 308. Tamilnadu, India.

Phone : 0427-2477723 E Mail : dean@vmsdc.edu.in



## DEAN'S MESSAGE

I am happy to note that you have taken a decision to join our Institution after a serious thought and discussion amongst your loved and learned ones. I congratulate you for the wise decision.

Vinayaka Mission's Sankarachariayar Dental College was started in the year 1986 and has crossed leaps and bounds, to attain the present status. I wish to state that dentistry is an art & science which needs a good sculptor and source.

Our asset is experienced and dedicated staff, good infrastructure and clinical cases, provides an environment for student centric learning in a holistic manner. The skill needed for the art and the knowledge needed for science is delivered by keeping the present generation's need to face the global challenge.

I therefore, assure you that your decision will not go futile and you will not only be a successful dentist but also a good statesman by making our country proud in all endeavors.

**Prof. Dr. J. BABY JOHN, M.D.S.,**  
Dean, VMSDC, Salem .



## VINAYAKA MISSION'S SANKARACHARIYAR DENTAL COLLEGE (VMSDC) PROFILE

Vinayaka Mission's Sankarachariyar Dental college, Salem was instituted in the year 1986 as an affiliated institution under the University of Madras and later on affiliated to the Tamilnadu Dr. MGR Medical University, Chennai with courses viz. Bachelor of Dental Surgery (BDS), Master of Dental Surgery (MDS), Diploma in Dental Mechanics and Diploma in Dental Hygienist.

The Vinayaka Mission's Sankarachariyar Dental college later on became the constituent of VINAYAKA MISSION'S RESEARCH FOUNDATION (DEEMED TO BE UNIVERSITY) from 2001. The institution is located on NH 47, Sankari Main Road, Ariyanoor, Salem-636008 in 10.14 acre campus with a build up area of 1,14,149 sq.ft.



**Mrs. ANNAPOORANI SHANMUGASUNDARAM &  
Dr. A. SHANMUGASUNDARAM**

The institution has committed to impart quality education to the students from different socioeconomic & Cultural backgrounds. The institution offers Undergraduate programme, 9 Postgraduate programmes, PhD in Dentistry, Diploma courses in Dental Mechanics & Dental Hygienist. The campus has well equipped library with internet facility & Central Research Laboratory for the staff and students.



## ACADEMIC & ADMINISTRATIVE PROFILE

S. No.	Name	Academic Profile	Mobile No.
1	Dr. J. Baby John	Professor & Dean	9842753645
2	Dr.Reena Rachel John	Professor & Associate Dean (Research & Scientific) Oral & Maxillofacial Surgery	9443118756
3	Dr.R.Saranyan	Professor & HOD Periodontology Associate Dean (Academic Affairs)	9842748071

Dept. No.	Name	Academic Profile	Mobile No.
1	Dr.G.V.Ramachandra Reddy	Professor & HOD Oral Medicine & Radiology	9844065968
2	Dr.R.Saranyan	Professor & HOD Associate Dean (Academic Affairs) Periodontology	9842748071
3	Dr.J.Arunkumar	Professor & HOD Oral & Maxillofacial Surgery	9443273347
4	Dr.R.Ramesh	Professor & HOD Prosthodontics and Crown & Bridge	9443155211
5	Dr.Maya Ramesh	Professor & HOD Oral & Maxillofacial Pathology and Oral Microbiology	9600918804
6	Dr.Veena Arali	Professor & HOD Pediatric & Preventive Dentistry	9535444112
7	Dr.Yadav Chakravarthy	Professor & HOD Conservative Dentistry & Endodontics	8072404507
8	Dr.N.Saravanan	Professor & HOD Public Health Dentistry	9442262950
9	Dr.Prabhakar Krishnan	Professor & HOD Orthodontics & Dentofacial	9843688271

S. No.	Name	Administrative Profile	Mobile No.
1	Mr.R.Natarajan	Administrative Officer	9843044140
2	Mr.I.Sapnath Panea Ray	Academic Officer	9245478556
3	Mr.A.Syed Nizamuddin	Senior Accountant	8825805997
4	Mrs.J.Sudhishna	Senior executive hospital admin	9994619822





## HIPPOCRATIC OATH

I do solemnly vow, to that which I value and hold most dear:

That I will honor the Profession of Medicine, be just and generous to its members, and help sustain them in their service to humanity;

That just as I have learned from those who preceded me, so will I instruct those who follow me in the science and the art of medicine;

That I will recognize the limits of my knowledge and pursue lifelong learning to better care for the sick and to prevent illness;

That I will seek the counsel of others when they are more expert so as to fulfill my obligation to those who are entrusted to my care;

That I will not withdraw from my patients in their time of need;

That I will lead my life and practice my art with integrity and honor, using my power wisely;

That whatsoever I shall see or hear of the lives of my patients that is not fitting to be spoken, I will keep in confidence;

That into whatever house I shall enter, it shall be for the good of the sick;

That I will maintain this sacred trust, holding myself far aloof from wrong, from corrupting, from the tempting of others to vice;

That above all else I will serve the highest interests of my patients through the practice of my science and my art;

That I will be an advocate for patients in need and strive for justice in the care of the sick.

I now turn to my calling, promising to preserve its finest traditions, with reward of a long experience in the joy of healing.

I make this vow freely and upon my honor.





## HIPPOCRATIC OATH FOR DENTISTRY

I swear to fulfill, to the best of my ability and judgment, this covenant:

- I will respect the hard-won scientific gains of those dental professionals in whose steps I walk, and gladly share such knowledge as is mine with those who are to follow.

- I will apply, for the benefit of the sick, all measures which are required, avoiding those twin traps of overtreatment and therapeutic nihilism.

- I will remember that there is art to dentistry as well as science, and that warmth, sympathy, and understanding may outweigh the surgeon's knife or the chemist's drug.

- I will not be ashamed to say "I know not"; nor will I fail to call in my colleagues when the skills of another are needed for a patient's well being.

- I will respect the privacy of my patients, for their problems are not disclosed to me that the world may know. Most especially must I tread with care in matters of life and death. If it is given me to save a life, all thanks. But it may also be within my power to take a life; this awesome responsibility must be faced with great humility and awareness of my own frailty. Above all, I must not play at God.

- I will remember that I do not treat a fever chart or a cancerous growth, but a sick human being, whose illness may affect the person's family and economic stability. My responsibility includes these related problems, if I am to care adequately for the sick.

- I will prevent disease whenever I can, for prevention is preferable to cure.

- I will remember that I remain a member of society, with special obligations to all my fellow human beings, those sound of mind and body as well as the infirm.

- If I do not violate this oath, may I enjoy life and art, respected while I live and re-membered with affection thereafter. May I always act so as to preserve the finest traditions of my calling and may I long experience the joy of healing those who seek my help.



# **VINAYAKA MISSION'S SANKARACHARIYAR DENTAL COLLEGE**

## **VISION & MISSION**

### **OUR MOTTO**

Service to humanity is service to God.

### **VISION**

To make dental education and dental health available to the poor and needy in the rural sector.

### **MISSION**

To spread knowledge with recent advances and to promote research in the field of dentistry.

### **QUALITY POLICY**

To prepare students to have in depth knowledge in both pre-clinical and clinical dentistry and update advances in diagnosis and therapeutics to meet the present dental disease pattern in the society.



## **VMSDC EMBLEM**

### **THE LORD VINAYAKA**

Vinayaka is in the centre of the emblem.

He is the God of Health, Wisdom, Education & Prosperity and God for Nirvigna in the various walks of human -life.

The tusks of the elephant are placed on either side of rod of Aesculapius. It represents the symbol of dentistry.

### **GOD OF MEDICINE**

The God of Aesculapius is an ancient symbol associated with astrology, the Greek God Aesculapius and with healing.

It consists of a serpent entwined around a staff. The name of the symbol derives from its early and widespread association with Aesculapius, the son of Apollo, who was a practitioner of medicine in ancient Greek mythology.

### **GOD OF DENTISTRY**

Our Emblem design uses at its centre a twin serpent entwined about an ancient Arabian cautery.

### **LEAVES**

The leaves encircling Lord Vinayaka and God of Aesculapius represents human teeth.

The 20 leaves on the left side represent the deciduous dentition.

The 32 leaves on the right side represent the permanent dentition.



## GENERAL RULES & REGULATIONS

### 1. Dress Code :

All students should wear ID cards issued by college as per the respective year of study. Students should not enter the LAB without Apron. Foot wear must be clean and well polished. Open toe shoes are not allowed. Clothing must be neat & wrinkle free. Jeans, T-Shirts, Leggings & Sleeveless tops are not allowed. Finger nails must be clean & short to allow proper grasp of instruments. Gold ornaments, Bracelets & rings are not allowed. Formal, Trousers and shoes should be worn by the boys. Hair should be trimmed properly and face should be clean shaved or facial hair should be trimmed properly. Girls hair to be pinned and braided properly. Students are strictly advised to adhere to the rules and regulations that will be monitored by the Institutional Code of conduct Monitoring committee and appropriate action will be taken for those who are not complying with the college regulations.

### 2. Safety Code :

Long hair must be tied and put back for safety measures. Wear face mask in clinical session as & when required. Always work with good ventilation. Do not keep inflammable materials (Spirit, monomer) near open flame. Students should take care of their own instruments and their costlier belongings. Borrowing instruments from others is not allowed. LPG tap should always be kept closed after working in the lab.

### 3. Cleanliness Code :

Lab must be kept clean. This includes working tables, model trimmers, polishing & furnishing areas. Dental plaster, waxes & other working wastes must be properly discarded in the separate dustbin. They should not be discarded in the sink (Waxes should not be discarded on the floor / Veranda). Before leaving the LAB make sure your working area is clean. Apron should be washed regularly & kept clean.

### 4. Mobile Phones & Two Wheelers :

The use of Mobile phones is strictly forbidden during the learning hours in lectures, clinical posting and laboratories. In case of emergency, parents / guardians are requested to use college communications. Any student, not abiding by this protocol will face severe disciplinary action. Mobile phones will be allowed in college only for academic purpose with prior approval of staffs. Unwanted download or usage of institutional WiFi is strictly prohibited. If unethical use of mobile phones are found, fine amount will be levied towards " The poor patient fund". Two wheelers are banned and college is not responsible for any eventuality.

### 5. Ragging (Banned) :

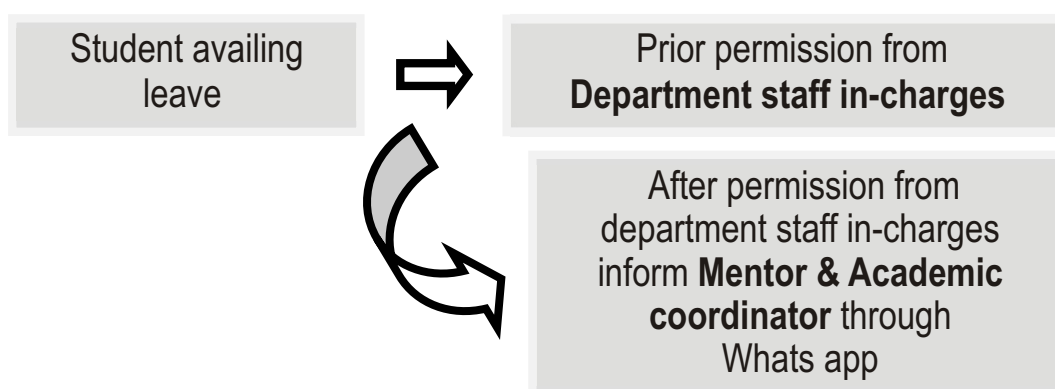
Any student found indulging in ragging or submitting to it, is strictly forbidden inside or outside the college campus. Ragging in any form is a punishable offence and shall warrant severe disciplinary action, by the concerned committee. Any incidence of ragging, should be immediately brought to notice of the Anti Ragging Committee. Displayed at College.

### 6. Any Damage, Misuse Of College Property Shall Warrant Disciplinary Action.



## 7. Leave application :

- Students availing leave should take prior permission except under medical/emergency reasons.
- Students availing prior leave should first take permission from the respective department staff in-charge of that day timetable .i.e., Clinical posting / Theory / Practical class of all the department which he/she is supposed to attend on that particular day.
- Then after permission from the department staff in-charges, he/she has to inform their mentor and then to their academic coordinator through WhatsApp as message or photocopy of their leave form approved by respective department staff in-charges



- Students availing leave because of medical reason/emergency has to submit a written leave letter through his/her batch mate or a mail informing of the leave on the same day to their respective department staff in-charge / Dean and forward the screenshot / image / scanned copy of the leave letter to his/her Mentor and Academic coordinator through official mail ID .
- In case of medical leave, copy of your medical report should be submitted to respective department at the time of entry after approval from Dean.
- Any leave taken without prior communication will not be considered as leave and marked as absent.

## 8. Attendance :

A minimum of 75% attendance in theory and 75% in practical/clinical in all subjects in each year is mandatory for appearing in the university examinations. 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%. The work quota of that subject has to be completed before entering into the subsequent year. However, at the time of appearing for the professional examination in the subject, the aggregate percentage of attendance in the subject should satisfy above condition. A quarterly report of each student will be noted, from the departments & parents / guardians, duly intimated. Candidates who are found to be irregular & held for any misconduct shall not be permitted to appear for university examinations.



## 9. Lost record books

In case of lost record books it has to be duly approved & attested by the concerned Head of the department and Head of the Institution for duplication of records.

## 10. Term Fees / Hostel fees:

Students are strictly advised to pay their prescribed fee on the stipulated date without fail.

## 11. Grievances:

Any grievances can be brought to the notice of the Students Grievance Redressal Committee. For further details of Grievance Redressal Committee see link: <https://www.vinayakamission.com/Grievance-Redressal.php>

## 12. Confidential Suggestion Box :

The suggestions / complaints / feedback can be deposited in the form of a written letter / email addressed to the Dean. The suggestion box is placed in first floor near Dean's office / Women's common room/Men's common room/First floor of Library . The box will only be accessed by the Dean in the presence of Grievance Committee Head .

Dean Mail ID : [dean@vmsdc.edu.in](mailto:dean@vmsdc.edu.in)

## 13. Social Media Policy:

The VMSDC Social Media policy applies to all employees and students of the college. Comments and posts damaging the welfare of the institution will be taken up seriously by the concerned authorities. Therefore avoid the misuse of social media and any issues can be discussed directly with the Head of the Institution or by using the suggestion box or online feedback, that is being practiced for the betterment for the institution.

## 14. Code of Conduct

Kindly refer [https://vmrfdu.edu.in/code\\_of\\_conduct.php](https://vmrfdu.edu.in/code_of_conduct.php) for the Rules & Regulations for the code of conduct for Vinayaka Mission's Sankarachariyar Dental College - Students of Vinayaka Mission's Research Foundation – Deemed to be University (VMRF-DU)

Note: Kindly refer the VMSDC website regarding Regulations of Bachelor of Dental Surgery (New)

<https://www.vmsdcsalem.com/Regulations.php>



## FACILITIES

VMSDC has good infrastructure with a total of 9 specialities & comprehensive dental clinic fulfilling the basic requirements of the council. It also has a central research laboratory including immunohistochemistry, chrom cobalt lab, ceramic lab, hematology lab & histopathology lab. All of them are well equipped & have trained technicians. For students to get training before entering clinicals we have a separate pre-clinical prosthodontics, pre-clinical conservative lab and simulation lab where they can improve their hand skills before treating the patients.

For basic sciences & medical science subjects in I, II & III year, students have to attend both theory & practical classes ( as per the time table provided) in Vinayaka Mission's Kirupanandavariyar Medical college & hospital. Bus transportation will be provided by the college on those days as per the scheduled time.

### RESEARCH:

At VMSDC Research & Innovation are an integral part of curriculum and training. Students are encouraged to do Research by granting seed money for selected project.

### CO-CURRICULAR ACTIVITIES:

Students are encouraged to participate in various paper, poster, table clinic and Quiz competitions in Conferences/Symposium at their own expense after presenting and getting approved by the Students Conference committee existing at VMSDC.

### LIBRARY :

The central library is spread over 9303sq.ft. The Library was well equipped with the latest books and journals. The library has 7977 books, 13 National & 11 International journals, 1251 E-Books & 700 E-journals. Our institution is registered in National Digital Library.

Central Library is using Koha software for Library automation and has implemented RFID technology, with OPAC (Online Public Access Catalogue), and online renewal facility. Biometric based E-Gate Register used in the library. Books circulation is managed by Biometric and RFID Technology by staff and students. All the books are tagged with RFID & the RFID scanners are used for books transaction. Digital library section is available for students to use computers with internet facility and fire wall protection.

Library is accommodated in two floors. In the ground floor, sections available for Book Circulation, Basic science books, rare books, books for Higher Education, Magazines, and Dissertations are made available. In the First Floor Journals, Back volume Journals, Clinical science books, and Reference books are available with Digital Library section and Discussion area.

Library Hours : 8.30 am to 6.00 pm

Services:

- Biometric E- Gate Register.
- Biometric Based circulation (Issue, Return and Renewal).
- Digital Library
- Computing Facility
- Wi-fi Facility
- Question Bank
- OPAC
- Reprography Service





#### Best Practices:

- Best Library user Awards for Students.
- Library Orientation Program
- Exhibitions
- New Arrivals Display
- Reminders for Overdue books (E-mail alerts)

#### Rules & Regulations:

- Personal belongings are not permitted inside the libraries; Users must keep their belongings at the property counter in the Entrance.
- Enter your finger print in the biometric register kept at the entrance before entering and leaving the library.
- Mobile phones and other devices should be in silent mode.
- Library books should be handled with utmost care. Marking or any kind of scribbling on pages or folding of page is strictly prohibited.
- In case of loss of any book, the borrower has to replace the same Edition of the book.
- Reference books, journals, back volumes, Thesis will not be issued to any users.
- Laptops may be used inside the libraries (without any audio).
- Users are allowed to take photocopies of the required articles in the reprography section.
- Photocopying of full – book is not permitted due to copyright issues.
- While accessing the E-resources of the library, proper entries are to be made in the records of the Library. Downloading the information is also permitted.

#### Useful Links:

**E-Journals:** <https://dvlidental.com/>

**E-Books :** <https://dental-library.com>

**NDLI:** <https://ndl.iitkgp.ac.int>

#### **EXTRA-CURRICULAR ACTIVITIES:**

The college has active National Service Scheme (NSS) and Red Ribbon Club (RRC) doing numerous social activities to help the society in and around the rural parts of Salem. The students are encouraged to be a part of these club's right from first year.

#### **MENTORING ACTIVITIES:**

There is an effective Mentor-Mentee system in the function of our college, where every student is allotted a faculty (Mentor) in the first year itself and asked to monitor the overall academic, social and emotional well-being of the student (Mentee). The parents also can keep in touch with the Mentors to know about their wards performance throughout the year.

#### **SPORTS & CULTURALS:**

Our college is having an excellent indoor and outdoor sports facilities. A well qualified physical trainer is available full time to train the students in the evenings. We encourage our students to participate in the sports and cultural shows without affecting their academic activities.

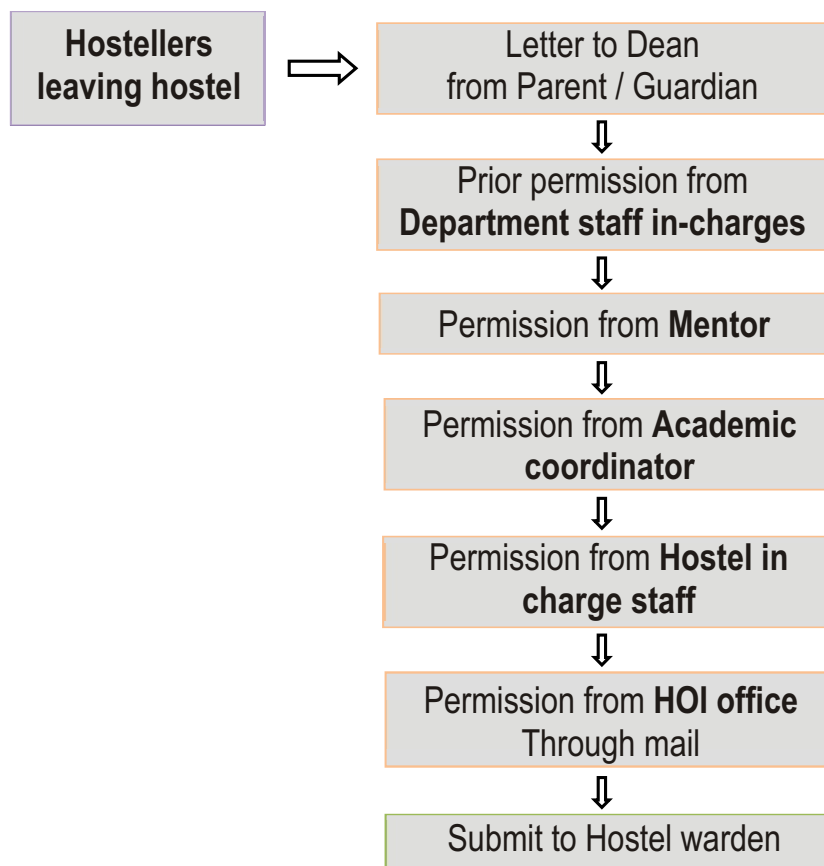
#### **HOSTEL**

Hostel for Boys & Girls are available along with Medical Hostel. Details pertaining to hostel and associated facilities parents can approach the hostel warden.



## Rules & Regulations:

- **Hostel Timing** : Students should report back to Hostel before 8.00 pm
- Hostellers leaving the hostel should take prior permission from department staff in-charges, Mentor, Academic coordinator, Hostel incharge staff, he/she has to get final approval from the HOI office. This leave form with above said faculty signatures needs to be submitted to the warden before leaving the hostel.



- Hostellers leaving the hostel for emergency reasons after college hours should ask their parent to get permission from the hostel warden either in person or by phone along with permission letter for college leave mentioning the days and also to leave the hostel, which can be sent by mail to the Hostel warden, Hostel in-charge staff and the Head of the Institution. The same mail communication copy has to be forwarded by the student or his/her friend to the respective Department staff in-charges, Mentor and the Academic coordinator by Whats App/Mail/hardcopy.
- Students who are staying outside the hostel as well day scholars have to submit a No objection letter from their parent stating that the parents are responsible for the overall welfare of their wards and for problems arising outside the college premises.
- Students who wish to live in hostel under any circumstances for overnight stay should get prior permission from respective year academic coordinator & Dean and the permission letter to be submitted to the warden.



## EXAMINATION SCHEME

The VMRF DU Examinations shall be held at the end of every Academic year in the month of August and February. Results can be viewed at: [www.vinayakamissions.com](http://www.vinayakamissions.com).

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. (REVISED BDS DEGREE COURSE (7 AMENDMENT) REGULATIONS 2015)

### Rules of examination:

Students are eligible to appear for university exams only if they have 75% of attendance in both theory & Practical and should have completed their preclinical / Clinical record work & Quota to be fulfilled for that year.

Students have to mandatorily appear for all class test & Internal examinations. Both Theory & Practical Internal examinations will be conducted minimum 3 per year including 1 model examination conducted prior to study holidays. If the student is unable to write the examinations then the re-examinations shall be conducted based on the recommendations of HOD & HOI.

An aggregate of three internal examinations will be calculated separately for Theory & Practicals and will be provided as Theory & Practical Internal Marks for Final University Examinations.

Marks obtained for viva voce (for 20 marks) conducted during the university practical examination will be added to their University Theory marks. The written examination in each subject consist of one paper of three hours duration and have maximum marks of 70 including 20 marks of multiple choice questions.

A student (passed/failed) who appeared in an Examination is eligible for retotaling on payment of prescribed fee.

A student who has failed in practical Examination is not eligible to apply for retotaling.

### PASS CRITERIA:

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, candidate should secure 50% marks in the university examination both in Theory and Practical / Clinical examination separately, as stipulated below.

A candidate should secure 50% 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 should secure 50% of University practical marks and internal assessment combined together.

### BREAK STUDENTS :

Students failing in more than two subjects ( except Environmental studies) will be considered as break in the course of 6 months duration and should attend the theory / practicals / internal assessment without fail. Deficiency in attendance will debar the students from attending the subsequent examinations.

### CARRY OVER STUDENTS :

Failing in one subject will be considered to have carry over subject and should clear the paper in Subsequent examination before appearing for the next year exam.

The carry-over students should appear for the internal assessment examination as & when instructed by that department.



## GENERAL RULES OF EXAMINATION

1. Hall tickets for exams will be issued only upon producing the No Objection Certificate [NOC] from both academic & administration section.
2. Candidates will be allowed inside the examination hall fifteen minutes before the commencement of examination only. No candidate will be allowed to enter the hall after ½ hour of commencement of the examination.
3. Candidates should bring the identification card and hall ticket during university examination.
4. Candidates are not allowed to leave the examination hall until 2.30 hrs has elapsed from the commencement of the examination. Thereafter, the candidate will only be permitted to leave after submission of answer booklet.
5. Candidates are not allowed to bring along book or other written or printed material or blank papers or information in any form into the examination hall.
6. Students should wear clothes with half sleeves as long sleeves are not permitted. Hair should be tied properly .
7. Electronic pens & watches are not allowed.
8. All bags and books must be kept in a quarantine area.
9. Mobile phones and electronic devices must be switched off and handed over to the invigilator at the beginning of the examination. If found with any device, action will be taken based on the guidelines of university.
10. Only blue/black ball point pen and graphite pencils are allowed.
11. No pencil pouches permitted into examination halls for theory.
12. No colouring or highlighting or using correction ink/liquid paper in the answer scripts.
13. Histopathological/microscopic picture to be drawn using Hematoxylin & Eosin (H&E) pencils only.
14. No writing on the question paper.
15. Multiple choice questions (MCQ) must be answered separately in answer sheet provided for MCQ's. Any correction done in the answer must be signed by the invigilator.
16. Candidates found copying or communicating with one another will be handed over to the Chief Superintendent for further action to be taken.
17. Candidates are not allowed to continue writing or add anything to the answer booklet after the invigilator has announced the end of the examination.
18. Any misconduct will be dealt as per the University Norms.

VMSDC follows a strict student code of conduct for examination, any form of fraud/ copying/infringement of examination rules may lead to severe disciplinary action amounting to cancellation of the candidature in all subjects for university examination and/or disqualification from the degree program.



## METHOD OF INTERNAL ASSESSMENT

Method Of Assessments	Details	Marks with Percentage
<b>1. Formative assessment</b>	<i>Minimum of two (2) unit test &amp; 2 competency / clinical test should be conducted</i>	<i>No marks (Only Remarks) Provides Only feedback for improvement</i>
<b>2. Internal assessment</b>	<i>Theory internal - 10marks Practical internal -10 marks</i>	<i>20 (10%)</i>
<b>3. Summative assessment</b>	<i>Theory :</i>	<i>90 (45%)</i>
<b>a) Professional examination</b>	<input type="checkbox"/> <i>MCQ'S -20 marks</i> <input type="checkbox"/> <i>SAQ'S -30 marks</i> <input type="checkbox"/> <i>LAQ'S -20 marks</i> <i>Viva voce - 20 marks</i>	
	<i>Clinical /Practical</i>	<i>90 (45%)</i>
	<b>Total marks</b>	<b>200</b>

<b>Continuous (Internal) assessment (Total Marks -20)</b>		
<b>Theory internal -10 mark's distribution</b>		
Criteria	Details	Marks
<b>Exam</b>	<ul style="list-style-type: none"> <li><i>2 terminal test &amp;1 Model exam (Average of 3 will be considered &amp; more weightage for model exam marks)</i></li> </ul>	<i>10</i>
	<b>Practical internal -10 marks distribution</b>	
<b>Clinical /Practical skills</b>	<ul style="list-style-type: none"> <li><i>Average of Three (3) Practical /Clinical Assessment test.</i></li> </ul> <p><i>While assessing clinical skills, the following parameters of soft skill should be considered. (Weightage of each parameter based on the individual dept. preference.)</i></p>	<i>10 marks</i>
	<ul style="list-style-type: none"> <li><i>Communication skills</i></li> <li><i>Critical thinking &amp; problem solving skills</i></li> <li><i>Team work</i></li> <li><i>Lifelong learning &amp; information management</i></li> <li><i>Professional ethics &amp; moral</i></li> <li><i>Leadership skills</i></li> </ul>	

### a) Formative Assessment

☛ Mainly to improve the educational methods & student feedback throughout the teaching & learning process.

### b) Summative Assessment

☛ Typically used to evaluate the effectiveness of Educational Programs and services at the end of an academic year or at a pre - determined time.

☛ Summative internal assessments will be complemented by formative assessments and shall consist of such written, clinical, practical (laboratory) and oral assessments, either singly or as part of a group, as the Faculty requires.



## ANTI - RAGGING

Ragging constitutes one or more of any of the following acts:

- a. any conduct by any student or students whether by words spoken or written or by an act which has the effect of teasing, treating or handling with rudeness a fresher or any other student;
- b. indulging in rowdy or indisciplined activities by any student or students which causes or is likely to cause annoyance, hardship, physical or psychological harm or to raise fear or apprehension thereof in any fresher or any other student;
- c. asking any student to do any act which such student will not in the ordinary course do and which has the effect of causing or generating a sense of shame, or torment or embarrassment so as to adversely affect the physique or psyche of such fresher or any other student;
- d. any act by a senior student that prevents, disrupts or disturbs the regular academic activity of any other student or a fresher;
- e. exploiting the services of a fresher or any other student for completing the academic tasks assigned to an individual or a group of students.
- f. any act of financial extortion or forceful expenditure burden put on a fresher or any other student by students;
- g. any act of physical abuse including all variants of it: sexual abuse, homosexual assaults, stripping, forcing obscene and lewd acts, gestures, causing bodily harm or any other danger to health or person;
- h. any act or abuse by spoken words, emails, post, public insults which would also include deriving perverted pleasure, vicarious or sadistic thrill from actively or passively participating in the discomfiture to fresher or any other student ;
- i. any act that affects the mental health and self-confidence of a fresher or any other student with or without an intent to derive a sadistic pleasure or showing off power, authority or superiority by a student over any fresher or any other student.
- j. Any act of physical or mental abuse (including bullying and exclusion) targeted at another student (fresher or otherwise) on the ground of colour, race, religion, caste, ethnicity, gender (including transgender), sexual orientation, appearance, nationality, regional origins, linguistic identity, place of birth, place of residence or economic background.





## ANTI - RAGGING

Ragging in any form is banned inside and outside the college premises.

Download  
**ANTI RAGGING**  
App

# SAY NO TO RAGGING

# YES TO JOYFUL CAMPUS

### What is Ragging? Any Act Resulting in:

- Mental/physical/sexual Abuse
- Verbal Abuse
- Indecent Behaviour
- Criminal Intimidation/wrongful Restraint
- Undermining Human Dignity
- Financial Exploitation/extortion
- Use Of Force

#### A STUDENT INDULGING IN RAGGING CAN BE:

- Cancellation of admission.
- Suspension from attending classes.
- Withholding/withdrawing Scholarship/Fellowship and other benefits.
- Debarring from appearing in any test/ examination or other evaluation process.
- Withholding results.
- Debarring from representing the institution in any regional, national or international meet, tournament or youth festival etc.
- Collective punishment : when the persons committing or abetting the crime of ragging are not identified the institution shall resort to collective punishment as a deterrent to ensure community pressure on potential ragger.



Immediately call  
**UGC Anti-Ragging Helpline**  
1800-180-5522 (24X7 toll free)  
or send an e-mail to [helpline@antiragging.in](mailto:helpline@antiragging.in)



**MHRD**

DEPARTMENT OF HIGHER EDUCATION  
MINISTRY OF HUMAN RESOURCE DEVELOPMENT  
GOVERNMENT OF INDIA



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## ANTI - RAGGING COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. S. Sunantha</b>	Coordinator & Record Keeper	Prosthodontics and Crown & Bridge	<b>9994066144</b>
<b>Dr. N. Saravanan</b>	Member	Public Health Dentistry	<b>9442262950</b>
<b>Dr. Saramma Mathew Fenn</b>	Member	Oral Medicine & Radiology	<b>8754569193</b>
<b>Dr. C. Suresh</b>	Member	Oral and maxillofacial surgery	<b>9487630871</b>
<b>Dr. S. Ashna</b>	Member	Prosthodontics And Crown & Bridge	<b>9843693385</b>
<b>Saranrakav</b>	Student Member		<b>7708681577</b>
<b>Sampreetha.K</b>	Student Member		<b>6385725788</b>
<b>Mr. N. Vijayasarithi</b>	Student Member		<b>8973689276</b>
<b>Ms. S. P. Kamali</b>	Student Member		<b>8072124825</b>
<b>Mr. A. K. Varadharajan</b>	Non-Teaching Staff Member		<b>9787388309</b>
<b>Mr. I. Sapnath Panea Ray</b>	Non-Teaching Staff Member		<b>9245478556</b>



## ANTI RAGGING SQUAD

Name	Designation	Department	Mobile No.
<b>Dr.Sunantha.S</b>	Member	Prosthodontics and Crown & Bridge	<b>9943300333</b>
<b>Dr.M.Assmee</b>	Member	Conservative Dentistry and Endodontics	<b>9789146075</b>
<b>Dr.D.V.Bhuvanesh Kumar</b>	Member	Prosthodontics and Crown & Bridge	<b>9944422297</b>
<b>Dr.M.Subhashini</b>	Member	Conservative Dentistry and Endodontics	<b>9994392006</b>
<b>Dr.Mohammed Adil</b>	Member	Periodontology	<b>7010374054</b>
<b>Dr.Pavithran</b>	Member	Oral & Maxillofacial Surgery	<b>8667720806</b>
<b>Dr.Shanthi</b>	Member	Prosthodontics and Crown & Bridge	<b>9384215228</b>
<b>Dr.Saradha</b>	Member	Periodontology	<b>9494046417</b>
<b>Mr.R.Natarajan</b>	Member		<b>9843044140</b>
<b>Mr.E.Prabhu</b>	Member		<b>9677410412</b>
<b>Mr.S.Rajendran</b>	Member		<b>8883078595</b>
<b>Mr.R.Chandran</b>	Member		<b>9360676466</b>
<b>Mr.R.Ravi</b>	Member		<b>9500597046</b>

- Students can contact any member of the squad in case of emergency.

**Highly confidential :-The Complainant will be protected at any cost**



## KIND ATTENTION TO STUDENTS

### BEWARE OF RAGGING

A Student indulging in Ragging can be **PUNISHED** by:

- **CANCELLATION OF ADMISSION.**
- Suspension from attending classes.
- Withholding / withdrawing Scholarship / Fellowship & other benefits.
- **DEBARRING** from appearing in any test / examination or other evaluation process.
- Withholding results.
- Debarring from representing the institution in any Regional, National or International meet, tournament or Youth festival etc.,
- **COLLECTIVE PUNISHMENT:** When the persons committing or abetting the crime of ragging are not identified the Institution shall resort to collective punishment as a deterrent to ensure community pressure on potential ragger.



## CODE OF CONDUCT MONITORING COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. J.Baby John</b>	Chairperson	Professor & Dean	<b>9842753645</b>
<b>Dr. Yadav Chakravarthy</b>	Convener – Boys	Conservative Dentistry & Endodontics	<b>8072404507</b>
<b>Dr. Bindu Kamaraj</b>	Convener – Girls	Prosthodontics and Crown & Bridge	<b>9176777876</b>
<b>ANTI RAGGING COMMITTEE (Details in Pg. No. 16,17)</b>			
<b>Dr. S. Sunantha</b>	Coordinator & Record Keeper	Prosthodontics and Crown & Bridge	<b>9994066144</b>
<b>GRIEVANCE REDRESSAL CELL</b>			
<b>Dr. Bindu Kamaraj</b>	Coordinator & Record Keeper	Prosthodontics and Crown & Bridge	<b>9176777876</b>
<b>Dr. R. Saranyan</b>	Member	Periodontology	<b>9942093071</b>
<b>Dr. J. Arunkumar</b>	Member	Oral & Maxillofacial Surgery	<b>9443273347</b>
<b>Mrs.J.Sudhishna</b>	Senior executive hospital admin		<b>9994619822</b>
<b>Miss. Mahmudha Rila. M</b>	Student Member		<b>9361473112</b>
<b>INTERNAL COMPLAINTS CELL (Sexual Harassment)</b>			
<b>Dr. Vyapaka Pallavi</b>	Presiding Officer	Conservative Dentistry & Endodontics	<b>9655465438</b>
<b>Dr. A. Pavithran</b>	Member	Oral & Maxillofacial Surgery	<b>8667720806</b>
<b>Dr. Shantham Krishnamoorthy</b>	Member	Paediatric & Preventive Dentistry	<b>9790228237</b>
<b>Mrs. J. Sudhishna</b>	Member		<b>9994619822</b>
<b>Miss. P. Parimala Jothi</b>	Member		<b>6381770025</b>
<b>Mr. Prem Amirtharaj</b>	External Member		<b>9443288688</b>
<b>Miss. Logeshwari</b>	Student Member		<b>9344574264</b>
<b>Miss. Christeena Benny</b>	Student Member		<b>8281939562</b>
<b>Mr. Vijayasarithi</b>	Student Member		<b>8973689276</b>



## CLASS MONITORING & FEEDBACK CELL

Name	Designation	Department	Mobile No.
<b>Dr. Saramma Mathew Fenn</b>	Coordinator & Record Keeper	Oral Medicine & Radiology	<b>8754569193</b>
<b>Dr. T. Mercy Vinolia</b>	Member	Paediatric & Preventive Dentistry	<b>9003625744</b>
<b>Dr. A. Aarthee</b>	Member	Oral & Maxillofacial Surgery	<b>7598171088</b>
<b>Dr. Madhushree</b>	Member	Periodontology	<b>9740575508</b>

## MENTOR COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. J. Baby John</b>	Chairperson	Professor & Dean	<b>9842753645</b>
<b>Dr. Vyapaka Pallavi</b>	Coordinator & Record Keeper	Conservative Dentistry & Endodontics	<b>9655465438</b>
<b>Dr. Vanitha D Revankar</b>	PG Mentor	Conservative Dentistry & Endodontics	<b>8122092727</b>
<b>Dr. Diana Prem</b>	CRRRI Mentor	Oral Pathology and Oral Microbiology	<b>9443708899</b>
<b>Dr. Anitha A</b>	Final Year Mentor	Periodontology	<b>6379448862</b>
<b>Dr. Madhusree</b>	Third Year Mentor	Periodontology	<b>9483544607</b>
<b>Dr. Ambika M</b>	Second Year Mentor	Oral Pathology and Oral Microbiology	<b>9444365461</b>
<b>Dr. Indra Priyadharshini K</b>	First Year Mentor	Oral Pathology and Oral Microbiology	<b>9894105232</b>



## LIBRARY ADVISORY COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. J. Baby John</b>	Chairperson	Professor & Dean	<b>9842753645</b>
<b>Dr. M. Ambika</b>	Coordinator & Record Keeper	Oral Pathology and Oral Microbiology	<b>9444365461</b>
<b>Dr. Sucratha Susie John</b>	Representative	Oral & Maxillofacial Surgery	<b>7306781299</b>
<b>Dr. A Kumar</b>	Representative	Oral Medicine & Radiology	<b>9787144666</b>
<b>Dr. Prasanta Majumder</b>	Representative	Public Health Dentistry	<b>8431270501</b>
<b>Dr. Mithunraja. S</b>	Representative	Conservative Dentistry and Endodontics	<b>9942099519</b>
<b>Dr. R. Pradeep Daniel Gainneos</b>	Representative	Paediatric & Preventive Dentistry	<b>9952723311</b>
<b>Dr. Mohamed Adhil</b>	Representative	Periodontology	<b>7010374054</b>
<b>Dr .Kasarla Himaja</b>	Representative	Prosthodontics and Crown & Bridge	<b>9959031504</b>
<b>Dr. A. Udhayan</b>	Representative	Orthodontics & Dentofacial Orthopaedics	<b>9865224533</b>
<b>Dr. Ramya C.V</b>	Student UG Member		<b>9597438668</b>
<b>Dr. Nandhinidevi. G</b>	Student PG Member		<b>8072231886</b>
<b>Mrs. Kokila</b>	Librarian		<b>9944718094</b>



## INSTITUTIONAL RESEARCH COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. J. Baby John</b>	Chairman	Professor & Dean	<b>9842753645</b>
<b>Dr. Reena Rachel John</b>	Convener	Associate Dean - Research	<b>9443118756</b>
<b>Dr. Mathew Jacob</b>	Coordinator & Record Keeper	Oral Pathology and Oral Microbiology	<b>8754569194</b>
<b>Dr. R. Saranyan</b>	Member	Periodontology	<b>9942093071</b>
<b>Dr. G.V.Ramachandra Reddy</b>	Member	Oral Medicine and Radiology	<b>9844065968</b>
<b>Dr. J. Arunkumar</b>	Member	Oral & Maxillofacial Surgery	<b>9443273347</b>
<b>Dr. Yadav Chakravarthy</b>	Member	Conservative Dentistry and Endodontics	<b>9488156929</b>
<b>Dr. Prabhakar Krishnan</b>	Member	Orthodontics and Dentofacial Orthopedics	<b>9843688271</b>
<b>Dr. Veena Arali</b>	Member	Paediatric & Preventive Dentistry	<b>9535444112</b>
<b>Dr. R. Ramesh</b>	Member	Prosthodontics and Crown & Bridge	<b>9443155211</b>
<b>Dr. N. Saravanan</b>	Member	Public Health Dentistry	<b>9442262950</b>
<b>Dr. Maya Ramesh</b>	Member	Oral Pathology and Oral Microbiology	<b>9600918804</b>

## NATIONAL SERVICE SCHEME CELL AND RED RIBBON COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. C. Bharath</b>	Coordinator (NSS)	Public Health Dentistry	<b>8946035788</b>
<b>Dr. A. Pavithran</b>	Member	Oral & Maxillofacial Surgery	<b>8667720806</b>
<b>Dr. Dhanalakshmi</b>	Member	Prosthodontics and Crown & Bridge	<b>9791944160</b>
<b>Dr. C. Manoj</b>	Coordinator (RRC)	Oral & Maxillofacial Surgery	<b>9894592638</b>
<b>Dr. S. Karthikraja</b>	Member	Orthodontics and Dentofacial Orthopedics	<b>7708535296</b>
<b>Dr. B. S. Nandhini</b>	Member	Paediatric & Preventive Dentistry	<b>9677750616</b>





## STUDENT SUPPORT COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. J. Baby John</b>	Chairperson	Professor & Dean	<b>9842753645</b>
<b>Dr. D. Jayachandran</b>	Convener	Periodontology	<b>7708225522</b>
<b>Dr. D. Jayachandran</b>	STUDENTS' COUNCIL - Faculty Advisor	Periodontology	<b>7708225522</b>
<b>Dr. G.V. Ajith</b>	FINE ARTS CLUB – Faculty Advisor	Orthodontics and Dentofacial Orthopedics	<b>8098585233</b>
<b>Dr. S. Karthikraja</b>	SPORTS CLUB – Faculty Advisor	Orthodontics and Dentofacial Orthopedics	<b>7708535296</b>
<b>Dr. G.V. Ajith</b>	College Magazine – Faculty Advisor	Orthodontics and Dentofacial Orthopedics	<b>8098585233</b>
<b>Dr. Kasarla Himaja</b>	Member	Prosthodontics and Crown & Bridge	<b>9959031509</b>
<b>Dr. T. Mercy Vinolia</b>	Member	Paediatric & Preventive Dentistry	<b>7829275353</b>
<b>Dr. P. I. Nainan</b>	Member	Oral & Maxillofacial Surgery	<b>9500235245</b>
<b>Dr. Dinesh Dharshan. S</b>	Member	Conservative Dentistry and Endodontics	<b>8883078595</b>
<b>Mr. S. Rajendran</b>	Physical Education Teacher		<b>8883078595</b>

## VMSSDC MEDIA COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. J. Baby John</b>	Chairperson	Professor & Dean	<b>9842753645</b>
<b>Dr. A. Narendran</b>	Web upgradation in charge	Oral & Maxillofacial Surgery	<b>9940748600</b>
<b>Dr. Maya Ramesh</b>	Social media update in charge	Oral Pathology and Oral Microbiology	<b>9600918804</b>
<b>Dr Shantamkrishnamoorthy</b>	News Letter – Editor	Paediatric & Preventive Dentistry	<b>9790228237</b>
<b>Dr. J. Shantha Ruban</b>	News Letter – Associate Editor	Conservative Dentistry and Endodontics	<b>9952163866</b>



## INSTITUTIONAL INNOVATION CELL

Name	Designation	Department	Mobile No.
<b>Dr Reena Rachel John</b>	Asst. Dean Research / Advisor	Oral & Maxillofacial Surgery	<b>9443118756</b>
<b>Dr G Raj Kumar</b>	President	Prosthodontics & Crown and Bridge	
<b>Dr Sabitha Gokul Raj</b>	Vice President	Oral Medicine & Radiology	<b>9443285888</b>
<b>Dr Divya Krishnamoorthi</b>	Convenor	Prosthodontics & Crown and Bridge	<b>9150299824</b>
<b>Dr Indrapriyadarshini</b>	ARIIA Coordinator	Oral Pathology & Oral Microbiology	<b>9840706554</b>
<b>Dr Saravanan N</b>	NIRF & NISP Coordinator	Public Health Dentistry	<b>9894105232</b>
<b>Dr Vanitha D</b>	IPR Coordinator	Conservative & Endodontics	<b>9442262950</b>
<b>Dr Ajith GV</b>	Startup & Entrepreneurship activity Coordinator	Orthodontics & Dentofacial Orthopaedics	<b>8122092727</b>
<b>Dr John Paul</b>	Incubation activity Coordinator	Prosthodontics & Crown and Bridge	<b>8098585233</b>
<b>Dr Kumar A</b>	Social Media Coordinator	Oral Medicine & Radiology	<b>8883670136</b>
<b>Dr Shanthakumari</b>	IIC Activity Coordinator	Public Health Dentistry	<b>9787144666</b>
<b>Dr Jayachandran</b>	Student Coordinator	Periodontology	<b>9443420681</b>
<b>Dr Shanthi</b>	Member	Prosthodontics & Crown and Bridge	<b>7708225522</b>
<b>Dr Mercy</b>	EDTN Coordinator	Paediatric & Preventive Dentistry	<b>9003625744</b>

## STUDENT CONFERENCE COMMITTEE

Name	Designation	Department	Mobile No.
<b>Dr. J. Baby John</b>	Chair Person	Professor & Dean	<b>9842753645</b>
<b>Dr. B. Manovijay</b>	Coordinator	Periodontology	<b>9952716937</b>
<b>Dr. Saranyan R</b>	Core Member	Periodontology	<b>9842748071</b>
<b>Dr. Sekar B</b>	Core Member	Oral Pathology & Oral Microbiology	<b>9976840554</b>
<b>Dr. D. Jayachandran</b>	Core Member	Periodontology	<b>7708225522</b>
<b>Dr. Sabitha Gokul Raj</b>	Core Member	Oral Medicine & Radiology	<b>9150299824</b>
<b>Dr. Divya Krishnamoorthi</b>	Core Member	Prosthodontics & Crown and Bridge	<b>9840706554</b>



## TENTATIVE ACADEMIC CALENDAR FOR FINAL BDS ( SEP 2023 - AUG 2024 )

DATE	DAY	EVENT
11.09.2023	Monday	College Re-opens for Final Year August 2023-2024 batch
18.09.2023	Monday	Vinayakar Chathurthi - Holiday
23.09.2023	Saturday	Fourth Saturday - Holiday
02.10.2023	Monday	Gandhi Jayanthi - Holiday
14.10.2023	Saturday	Second Saturday - Holiday
23.10.2023	Monday	Ayutha Pooja - Holiday
24.10.2023	Tuesday	Vijaya Dasami - Holiday
28.10.2023	Saturday	Fourth Saturday - Holiday
11.11.2023	Saturday	Second Saturday - Holiday
12.11.2023	Sunday	Diwali - Holiday
15.11.2023	Wednesday	II Internal Assessment - Feb 2023-2024 batch – Commences
23.11.2023	Thursday	II Internal Assessment - Feb 2023-2024 batch -Ends
25.11.2023	Saturday	Fourth Saturday - Holiday
09.12.2023	Saturday	Second Saturday - Holiday
11.12.2023	Monday	I Internal Assessment - August 2023-24 batch - Commences
19.12.2023	Tuesday	I Internal Assessment - August 2023-24 batch - Ends
23.12.2023	Saturday	Fourth Saturday -Holiday / Winter vacation starts - Aug 2023-2024 batch
25.12.2023	Monday	Christmas-Holiday
01.01.2024	Sunday	NewYear - Holiday
02.01.2024	Tuesday	College Reopens - Aug 2023-2024 batch
13.01.2024	Saturday	Second Saturday - Holiday
15.01.2024	Monday	Pongal -Holiday
16.01.2024	Tuesday	Thiruvalluvar Day-Holiday
17.01.2024	Wednesday	Uzhavar Thirunal -Holiday
25.01.2024	Thursday	PTA Meeting - August 2023-24 batch
26.01.2024	Friday	Republic day - Holiday
27.01.2024	Saturday	Fourth Saturday - Holiday
02.02.2024	Friday	Problem Based Learning Session 1 For Aug 2023-2024 batch



DATE	DAY	EVENT
07.02.2024	Wednesday	Model exam -Feb 2023-24 Batch - Commences
10.02.2024	Saturday	Second Saturday - Holiday
23.02.2024	Friday	Problem Based Learning Session 2 For Aug 2023-2024 batch
23.02.2024	Friday	Model exam - Feb 2023-24 Batch - Ends
24.02.2024	Saturday	Fourth Saturday - Holiday
26.02.2024	Monday	Model exam - practicals -Feb 2023-24 Batch - Commences
05.03.2024	Tuesday	Model exam - practicals - Feb 2023-24 Batch - Ends
09.03.2024	Saturday	Second Saturday - Holiday
18.03.2024	Monday	II Internal Assessment -August 2023-24 batch- Commences
27.03.2024	Wednesday	II Internal Assessment - August 2023-24 batch - Ends
23.03.2024	Saturday	Fourth Saturday - Holiday
29.03.2024	Friday	Good Friday - Holiday
8.04.2024	Monday	University exam- Commences - Feb 2023-2024 Batch
10.04.2024	Wednesday	Ramzan - Holiday
13.04.2024	Saturday	Second Saturday - Holiday
14.04.2024	Sunday	Tamil new year - Holiday
27.04.2024	Saturday	Fourth Saturday - Holiday
01.05.2024	Wednesday	May day - Holiday
11.05.2024	Saturday	Second Saturday - Holiday
08.06.2024	Saturday	Second Saturday - Holiday
17.06.2024	Monday	Bakrid - Holiday
22.06.2024	Saturday	Fourth Saturday - Holiday
01.07.2024	Monday	Model exam - practicals - Aug 2023-24 batch - Commences
17.07.2024	Wednesday	Model exam - practicals - Aug 2023-24 batch - Ends
13.07.2024	Saturday	Second Saturday - Holiday
27.07.2024	Saturday	Fourth Saturday - Holiday
10.08.2024	Saturday	Second Saturday - Holiday
24.08.2024	Saturday	Fourth Saturday - Holiday
26.08.2024	Monday	University exam - Aug 2023-24 batch - Commences

Note : \* 2<sup>nd</sup> and 4<sup>th</sup> Saturdays of every month are holidays,

\*-Subject to change according to the situation,



**TENTATIVE EXAMINATION SCHEDULE (FINAL YEAR B.D.S. AUGUST 2023-2024 BATCH)**

<b>SUBJECT</b>	<b>I INTERNAL EXAMINATION</b>	<b>II INTERNAL EXAMINATION</b>	<b>MODEL EXAMINATION</b>	<b>UNIVERSITY THEORY EXAMINATION</b>
Oral Medicine & Radiology	11.12.2023	18.03.2024	01.07.2024	26.08.2024
Paediatric & Preventive Dentistry	12.12.2023	19.03.2024	03.07.2024	28.08.2024
Orthodontics & Dentofacial Orthopaedics	13.12.2023	20.03.2024	05.07.2024	30.08.2024
Periodontology	14.12.2023	21.03.2024	08.07.2024	02.09.2024
Conservative Dentistry & Endodontics	15.12.2023	22.03.2024	10.07.2024	04.09.2024
Prosthodontics & Crown & Bridge	16.12.2023	25.03.2024	12.07.2024	06.09.2024
Oral & Maxillofacial Surgery	18.12.2023	26.03.2024	15.07.2024	09.09.2024
Public Health Dentistry	19.12.2023	27.03.2024	17.07.2024	11.09.2024

**TENTATIVE EXAMINATION SCHEDULE (FINAL YEAR B.D.S. FEBRUARY 2023-2024 BATCH)**

<b>SUBJECT</b>	<b>I INTERNAL EXAMINATION</b>	<b>II INTERNAL EXAMINATION</b>	<b>MODEL EXAMINATION</b>	<b>UNIVERSITY THEORY EXAMINATION</b>
Oral Medicine & Radiology	09.08.2023	15.11.2023	07.02.2024	08.04.2024
Paediatric & Preventive Dentistry	10.08.2023	16.11.2023	09.02.2024	10.04.2024
Orthodontics & Dentofacial Orthopaedics	14.08.2023	17.11.2023	12.02.2024	12.04.2024
Periodontology	16.08.2023	18.11.2023	14.02.2024	15.04.2024
Conservative Dentistry & Endodontics	17.08.2023	20.11.2023	16.02.2024	17.04.2024
Prosthodontics & Crown & Bridge	18.08.2023	21.11.2023	19.02.2024	19.04.2024
Oral & Maxillofacial Surgery	19.08.2023	22.11.2023	21.02.2024	22.04.2024
Public Health Dentistry	21.08.2023	23.11.2023	23.02.2024	24.04.2024

\* Practical / clinical examinations will commence within a week after completion of theory examinations



## **BDS CURRICULUM**

BDS Curriculum is available in VMSDC website and is subject to change from time to time based on council norms.

### **SUBJECTS OF STUDY**

#### **FIRST YEAR**

- i) General Human Anatomy including Embryology and Histology
- ii) General Human Physiology and Biochemistry, Nutrition and Dietetics
- 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
- xii) Public Health dentistry



## 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

### VALUE-ADDED COURSES:

The following Value-added courses are available for students. Value Added Courses are aimed to enhance the life of the students and thereby improve employability. Out of the 3, each student can join one course before completion of their final year.

S. No.	Course Code	Name of the Course	Participants	Approved Intake
1.	VA 128	Introduction to MS Office	UG	40
2.	VA 122	Gst for Dental Practice	UG & PG	20
3.	VA 138	Sign language for Specil need Patiens	UG & PG	40
4.	VA 200	Soft skill development on English Language	UG & PG	20

### COMPULSORY ROTATING PAID INTERNSHIP (CRI)

A pass in all the eight subjects is mandatory for completion of the 4<sup>th</sup> BDS Course before undergoing internship programme. The internship shall be compulsory and rotating as per the DCI norms. Twelve days of casual leave can be availed with prior intimation. Any absentism without informing will lead to disciplinary action. The degree- BDS shall be granted after completion of internship.



## IV YEAR

S.No.	SUBJECT	MARKS	
		THEORY	PRACTICAL
1	ORAL MEDICINE & RADIOLOGY	100	100
2	ORAL & MAXILLO FACIAL SURGERY	100	100
3	PERIODONTOLOGY	100	100
4	CONSERVATIVE DENTISTRY & ENDODONTICS	100	100
5	ORTHODONTICS AND DENTOFACIAL ORTHOPAEDICS	100	100
6	PAEDODONTICS AND PREVENTIVE DENTISTRY	100	100
7	PROSTHODONTICS AND CROWN AND BRIDGE	100	100
8	PUBLIC HEALTH DENTISTRY	100	100

### Theory & Practical Mark Distribution for all Subjects :

Theory - 100 Mark		Practicals / Clinicals - 100 Mark	
University written exam	70	University exam	90
Viva voce	20	Internal assessment	10
Internal assessment	10	<b>Total -</b>	<b>100</b>
<b>Total -</b>	<b>100</b>		





## University Exam Theory Question Pattern:

**Time : Three Hours**

**Maximum : 100 Marks**

### **SECTION - A**

**(20 Marks)**

1. Multiple choice questions	-	20 X 1	=	20 Marks
<b>Total</b>	-			<b><u>20 Marks</u></b>

### **SECTION - B**

**(25 Marks)**

1. Essay	-	1 X 10	=	10 Marks
2. Short notes	-	3 X 5	=	15 Marks
<b>Total</b>	-			<b><u>25 Marks</u></b>

### **SECTION - C**

**(25 Marks)**

3. Essay	-	1 X 10	=	10 Marks
4. Short notes	-	3 X 5	=	15 Marks
<b>Total</b>	-			<b><u>25 Marks</u></b>

**Viva Voce** - **20 Marks**

**Internal Marks** - **10 Marks**



## UNIVERSITY PRACTICAL EXAMINATION PATTERN

### ORAL MEDICINE AND RADIOLOGY Total - 100 Marks

Clinical case presentation	-	45 Marks
Case sheet	-15 Marks	
Chair side viva	-15 Marks	
Provisional diagnosis	-15 Marks	
Intra-oral radiograph	-	45 Marks
Technique	-15 Marks	
Processing	-15 Marks	
Interpretation	-15 Marks	
Internal assessment Marks	-	<u>10 Marks</u>
<b>Total</b>	-	<b><u>100 Marks</u></b>

### ORAL AND MAXILLOFACIAL SURGERY Total - 100 Marks

Case History	-	30 Marks
Local Anaesthesia	-	30 Marks
Exodontia	-	30 Marks
Internal Exam	-	<u>10 Marks</u>
<b>Total</b>	-	<b><u>100 Marks</u></b>

### PERIODONTOLOGY Total - 100 Marks

Clinical case presentation	-	25 Marks
Oral prophylaxis	-	25 Marks
Clinical case discussion	-	20 Marks
Spotters	-	20 Marks
Internals assessment marks	-	<u>10 Marks</u>
<b>Total</b>	-	<b><u>100 Marks</u></b>

### CONSERVATIVE DENTISTRY AND ENDODONTICS Total - 100 Marks

Cavity Preparation	-	25 Marks
Base matrix wedge	-	15 Marks
Restoration	-	10 Marks
Clinical case discussion + Chair side Viva	-	10 Marks
Major Spotter (10X3)	-	30 Marks
Internals assessment marks	-	<u>10 Marks</u>
<b>Total</b>	-	<b><u>100 Marks</u></b>



## UNIVERSITY PRACTICAL EXAMINATION PATTERN

### ORTHODONTICS AND DENTOFACIAL ORTHOPAEDICS

	<b>Total - 100 Marks</b>
Case History	- 40 Marks
Wire Bending 1	- 15 Marks
Wire Bending 2	- 15 Marks
Spotters	- 20 Marks
Internal Assessment	- 10 Marks
<b>Total</b>	<b>- 100 Marks</b>

### PAEDODONTICS AND PREVENTIVE DENTISTRY **Total - 100 Marks**

Spotters	- 20 Marks
Case History Taking and Treatment	- 50 Marks
Chair Side Viva	- 20 Marks
Internal Assessment	- 10 Marks
<b>Total</b>	<b>- 100 Marks</b>

### PROSTHODONTICS , CROWN AND BRIDGE **Total - 100 Marks**

Case History	- 10 Marks
Cast and Special Tray	- 5 Marks
Stage Viva	- 5 Marks
Border Moulding	- 15 Marks
Secondary Impression	- 15 Marks
Anterior Tooth Preparation	- 40 Marks
Internal Assessment	- 10 Marks
<b>Total</b>	<b>- 100 Marks</b>

### PUBLIC HEALTH DENTISTRY **Total - 100 Marks**

Case Sheet	- 30 Marks
Indices	- 20 Marks
Preventive Procedure	- 10 Marks
Record Book	- 10 Marks
Chair Side Viva	- 20 Marks
Internal Assessment	- 10 Marks
<b>Total</b>	<b>- 100 Marks</b>



## DEPARTMENT OF ORAL MEDICINE AND RADIOLOGY

### VISION

To impart the knowledge and skills of diagnosis and treatment planning and medical aspects of dentistry to all the dental students.

To promote research in the field of oral medicine and radiology.

To provide diagnostic and non-surgical treatment solutions to oral and maxillofacial problems including Oro-facial pain and TMJ.

### MISSION

Our mission is to produce high quality dentists with a very strong basics in oral medicine and radiology and to serve and help the community in the fight against tobacco habits and oral cancer.

### 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 lesion like swelling , 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

Emphasis shall be given on diagnostic aspects including differential diagnosis

1. Teeth: Developmental abnormalities, causes of destruction of teeth, sequelae, discolouration
2. Diseases of bone and osteodystrophies: Development disorders : Anamolies, exostosis and tori, infantile cortical hyperostosis, osteogenesis imperfect, marfans syndrome.
3. Osteopetrosis. Inflammation-Injury, infection and spread of infection, facial space infection, osteoradionecrosis, Metabolic disorders - Histiocytosis, Endocrine - Acromegaly and hyperparathyroidism. Miscellaneous - Paget's disease, Mono and polyostotic fibrous dysplasia, cherubism



4. Temporomandibular joint: Developmental abnormalities of the condyle, Rheumatoid arthritis, osteoarthritis, sub-luxation and luxation.
5. Common cysts and Tumours:
  - a. Cysts
    - i. Cyst of soft tissue: Mucocele and Ranula
    - ii. Cyst of bone: Odontogenic and non odontogenic.
  - b. Tumors
    - i. Soft tissue:
      1. Epithelial:- Papilloma, carcinoma, melanoma
      2. Connective tissue:- Fibroma, Lipoma, Fibrosarcoma
      3. Vascular:- Haemangioma, Lymphangioma.
      4. Nerve tissue:- Neurofibroma, traumatic neuroma, Neurofibromatosis.
      5. Salivary glands: Pleomorphic adenoma, Adenocarcinoma, Wharthin's Tumour, Adenoid cystic carcinoma
    - ii. Hard Tissue:
      1. **Non Odontogenic:** Osteoma, Osteosarcoma, Osteoclastoma, Chondroma, Chondrosarcoma, central giant cell tumour, central hemangioma.
      2. **Odontogenic:** Enameloma, Ameloblastoma, calcifying epithelial odontogenic tumour, adenomatoid odontogenic tumour, periapical cemental dysplasia and odontomas.
6. Periodontal diseases: Gingival hyperplasia, gingivitis, periodontitis, pyogenic granuloma.
7. Granulomatous disease: Tuberculosis, sarcoidosis, midline lethal granuloma, Crohn's disease and Histiocytosis X.
8. Miscellaneous Disorders: Burkitt lymphoma, Sturge-Weber syndrome, CREST syndrome, Rendu-Osler-Weber disease.

### **SECTION C: ORAL MEDICINE AND THERAPEUTICS:**

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

#### **1. Infections of oral and paraoral structures:**

**Bacterial:** Streptococcal, Tuberculosis, syphilis, Vincent's, 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:**

a. **White lesions:** Chemical burns, leukoedema, leukoplakia, Fordyce spots, stomatitis, nicotinic stomatitis, white sponge nevus, candidiasis, lichen planus, discoid lupus erythematosus.

b. **Vesiculo-bullous lesions:** Herpes simplex, Herpes zoster, herpangina, bullous lichen planus, pemphigus, cicatricial pemphigoid erythema multiforme.

c. **Ulcers:** Acute and Chronic ulcers

d. **Pigmented lesions:** Exogenous and Endogenous

e. **Red lesions:** Erythroplakia, stomatitis venenata and medicamentosa, erosive lesions



and denture sore mouth.

### 3. Cervico-facial lymphadenopathy

#### 4. Facial pain:

- a. **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 gland etc.
- b. **Pain arising due to CNS diseases:**
  - a. Pain due to intra and extra cranial involvement of cranial nerves. (multiple sclerosis, cerebrovascular diseases, trojter's syndrome etc)
  - b. Neuralgic pain due to unknown causes: trigeminal neuralgia, glossopharyngeal neuralgia, sphenopalatine ganglion neuralgia, pediatric migrainous neuralgia and atypical facial pain.
- c. **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, scrotle 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 disorders
  - i. Porphyria
  - ii. Hemochromatosis
  - iii. Histiocytosis X diseases
- ii. Endocrine disorders
  - i. Pituitary : gigantism, acromegaly, hypopituitarism
  - ii. Adrenal cortex : Addison's disease (hypofunction).
  - iii. Parathyroid glands : hyperparathyroidism
  - iv. Thyroid gland: (hypothyroidism, cretinism, myxedema
  - v. Pancreas : diabetes
- iii. Nutritional deficiencies: vitamins: riboflavin, nicotinic acid, folic acid, vitamin B 12, vitamin C (scurvy)
- iv. Blood disorders :
  - i. Red blood cell diseases- deficiency anemias (iron deficiency, Plummer-Vinson syndrome, pernicious anemia); hemolytic anemias: (thalassemia, sickle cell anemia, erythroblastosis fetalis); aplastic anemia; polycythemia
  - ii. White blood cell disease- neutropenia, cyclic neutropenia, agranulocytosis, infectious mononucleosis, leukemias.
  - iii. Hemorrhagic disorders: thrombocytopenia, purpura, hemophilia, Christmas disease & von Willebrand disease

#### 8. Disease of salivary glands:

- a. Developmental disturbances: aplasia, atresia and adhesion
- b. Functional disturbances: xerostomia, ptyalism
- c. Inflammatory conditions: nonspecific sialadenitis, mumps, sarcoidosis, Heerfordt's



syndrome (uveparotid fever), necrotising sialometaplasia

- d. Cyst and tumours: mucocele, ranula, pleomorphic adenoma, mucoepidermoid carcinoma
- e. Miscellaneous: sialotithiasis, sjogren's syndrome, mikulicz's disease, sialosis

**9. Dermatological diseases with oral manifestations:**

- a. Ectodermal dysplasia
- b. Hyperkeratosis palmarplantaris
- c. Scleroderma
- d. Lichen planus including grinspan's syndrome
- e. Lupus erythematosus
- f. Pemphigus
- g. Erythema multiforme
- h. Psoriasis

**10. Immunological disease with oral manifestations:**

- a. Leukemia
- b. Lymphomas
- c. Multiple myeloma
- d. AIDS clinical manifestation, opportunistic infections, neoplasms
- e. Thrombocytopenia
- f. Lupus erythematosus
- g. Scleroderma
- h. Dermatomyositis
- i. Submucous fibrosis
- j. Rheumatoid arthritis
- k. Recurrent oral ulcerations including behcet's syndrome, reiter's syndrome

**11. Allergy:** local allergic reactions, anaphylaxis, serum sickness (local and systemic allergic manifestation to food, drug and chemicals)

**12. Foci of oral infection and their ill effects on general health**

**13. Management of dental problems of medically compromised patients:**

- a. Physiological changes: pregnancy, puberty, and menopause
- b. Patients suffering from cardiac, respiratory, liver, kidney and bleeding disorders, hypertension, diabetes and AIDS. Post-irradiated patients

**14. Precancerous lesions and conditions**

**15. Nerve and muscle diseases:**

- a. **Nerves:** (a) Neuropraxia (b) neurotmesis (c) neuritis (d) facial nerve paralysis including Bell's palsy, Heerfordt's syndrome, Melkersson-Rosenthal syndrome and Ramsay Hunt syndrome (e) neuroma (f) neurofibromatosis (g) Frey's syndrome
- b. **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 remnants





## 17. Therapeutics:

General therapeutic measures- drugs commonly used in oral medicine viz., antibiotics, chemotherapeutic agents, anti-inflammatory and analgesic drugs, astringents, mouth washes, styptics, demulcents, local surface anaesthetic, sialogauges, antisialogauges and drugs used in treatment of malignancy

### Part-2 BEHAVIOURAL SCIENCES AND ETHICS

### Part-3 ORAL RADIOLOGY

- 1) Scope of the subject and history of origin
- 2) Physics of radiation: (a) nature and type of radiations (b) source of radiations (c) productions of x-rays (d) properties of x-rays (e) Crompton 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:
  - a. **Intra-oral:** (a) periapical radiographs (b) bitewing radiographs (c) occlusal radiographs
  - b. **Extra-oral:** (a) lateral projections of skull and jaw bones and paranasal sinuses (c) Cephalograms (d) orthopantomograph (e) projections of temporomandibular joint and condyle of the mandible (f) projections of the zygomatic arches
  - c. **Specialised techniques:** (a) sialography (b) xeroradiography (c) tomography
- 7) **Factors in production of good radiographs:**
  - a. K.V.P and mA of x-ray machines
  - 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) **Intpretation of radiographs in various abnormalities of teeth bones and other oro-facial tissues**
- 11) **Principles of radiotherapy of oro-facial malignancies and complications of radiotherapy**
- 12) **Contrast radiography and basic knowledge of radio-active isotopes**
- 13) **Radiography in Forensic odontology- 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 procedure of history taking and examination of orofacial region. Training is also imparted in management wherever possible. Training also shall be imparted on saliva diagnostic procedures. Training shall also be imparted in various radiographic procedures 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:**

### **1. Oral diagnosis, Oral medicine and Oral pathology**

- a. Burkit-Oral Medicine-J.B.Lippincott company
- b. Coleman-Principles of Oral diagnosis-Mosby year Book
- c. Jones- Oral manifestations of systemic diseases-W.B.Saunders company
- d. Mitchell-Oral diagnosis and treatment
- e. Kerr- oral diagnosis
- f. Miller-Oral diagnosis and treatment
- g. Hutchinson-Clinical methods
- h. Oral pathology- shafers
- i. Sonis.S.T.,Fazio.R.C.andFang.L-Principles and practice of oral medicine

### **2. Oral radiology**

- a. White and Goaz-Oral radiology-Mosby year book
- b. Weahrman-Dental Radiology-C.V.Mosby Company
- c. Stafne- Oral Roentgenographic diagnosis-W.B.saunders Co.,

### **3. Forensic Odontology**

- a. Derek H.clark-Practical forensic odontology-Butterworth-Heinemann(1992)
- b. C Michael Bowers, Gray Bell-Manual of Forensic odontology- Forensic Pr (1995)

## **WORK QUOTA IV YEAR BDS**

- Total Clinical cases 15 (with Radiograph& Case discussion)
- Interpretation of IOPA radiograph - 20
- Special Case - 1 (with Treatment & Follow up)
- Schedule (Completion dates) will be given prior 2 months of University exam for Record completion and attestation
- A clinical internal assessment exam with VIVA and OSCE will be conducted during the clinical postings.
- A grand VIVA will be conducted at the end of academic year before university exam.
- Two internal exams with one model exam will be conducted per year



## DEPARTMENT OF ORAL AND MAXILLOFACIAL SURGERY

### VISION OF THE DEPARTMENT

To excel in imparting knowledge and surgical skills to our students and provide the best possible surgical care to the patients who report to our department.

### MISSION OF THE DEPARTMENT

We take great care in preparing lectures and conducting case discussions and letting the students observe minor and major surgical procedures performed in our department.

We have visiting surgeons from other institutions who help us perform the best surgical procedures even in challenging cases.

### FINAL YEAR SYLLABUS:

1. Definition and Scope.
2. Diagnosis in Oral Surgery.
  - (a) History taking, (b) Clinical examination, (c) Special investigations.
3. Importance of general condition of the patient in relation to Oral Surgery.
4. Treatment planning.
5. Sterilization.
6. Use of antibiotics in Oral Surgery.
7. Diagnosis, pre-operative assessment and treatment of impacted teeth.
8. Pre-prosthetic Surgery.
9. Surgical aid to Orthodontics.
10. Facial infections, their diagnosis and treatment.
11. Inflammatory diseases of Jaws bone and their management.
12. Diagnosis and management of Cysts of Oral Cavity.
13. Diagnosis and treatment of the fracture of the mandible.
14. General outline of the fracture of the middle-third of the facial skeleton.
15. Diagnosis and treatment of benign neoplastic lesions of the Oral Cavity (Odontogenic and non-odontogenic).
16. Surgical procedure in relation to endodontic therapy Apicectomy.
17. Surgical treatment of tumour like lesions of the Oral Cavity including odontome.
18. Diseases of maxillary sinus, with special reference to oro-antral fistula.
19. Management of haemorrhage in Oral Surgery.
20. Diseases of salivary glands, diagnosis and treatment of Salivary Calculi and neoplasms arising from minor salivary glands.



21. Surgical aspects of histopathological diagnosis.
22. Oral Surgical complications and their management.
23. Diagnosis of malignant condition of Oral Cavity, a broad outline about the different modalities of treatment.
24. Diseases of temporomandibular joint, such as arthritis, hypoplasia, subluxation, dislocation, ankylosis. Other causes of inability to open the mouth.
25. Anatomy of trigeminal and facial nerves.
26. Cleft lip and Palate.

## **CLINICALS**

- 1) End Posting Viva : Two
  - A. Local Anaesthesia & Exodontia
  - B. Minor Oral Surgical Procedure
- 2) Quota : 30 Extraction

## **RECOMMENDED BOOKS:**

1. Impacted Teeth: alling John & et Al
2. Principle Of Oral And Maxillofacial Surgery; Vol1,2 Peterson LJ ET Al.
3. Textbook Of Oral And Maxillofacial Surgery; Srinivasan B
4. Handbook Of Medical Emergencies In Dental Office, Malamed SF
5. Killey Fracture Of Mandible-peterbanks
6. Killeys Fracture Of Middle 3rd Of Facial Skeleton- Peterbanks
7. The Maxillary Sinus And Its Dental Implication; killey And Kay
8. Killey And Kay Outline Of Oral Surgery.vol 1&2.
9. Oral And Maxillofacial Surgery, Vol2, laskin Dm
10. Extraction Of Teeth; howe, gl
11. Textbook Of Medical Emergency, Cawson And Scully
12. Textbook Of Oral Surgery- Neelima Malik.



## DEPARTMENT OF PERIODONTOLOGY

### VISION

A rational sequence of dental procedures that includes periodontal and other measures necessary to create a well-functioning dentition in a healthy periodontal environment.

### MISSION

This 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 students 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 attitude to prevent iatrogenic diseases; to conserve the tooth to the maximum possible time by maintaining periodontal health and refer the patients who require speciality treatment.

### SYLLABUS FOR FINAL YEAR BDS

#### TOPICS

##### I BASICS

1. Gingiva
2. Epithelial Attachment
3. Periodontal Ligament
4. Cementum
5. Alveolar Bone
6. Age Changes In Periodontium
7. Epidemiology of Gingival and Periodontal Diseases

##### ii

1. Clinical Diagnosis
2. Prognosis
3. Treatment Plan
4. Advanced Diagnostic Techniques

##### iii

1. Classification Of Gingival and Periodontal Diseases
2. Periodontal Instruments and Instrumentation
3. Classification, Principles

##### iv. ETIOLOGY

1. Dental Plaque
2. Dental Calculus
3. Iatrogenic Factors and Periodontium
4. Host Response
  - Immunity And Inflammation
  - Microbial Interaction With The Host In Periodontal Diseases
5. Systemic Influence of Periodontium
  - Hormonal
  - Nutritional
  - Haematological

##### v. GINGIVAL PATHOLOGY

1. Defence Mechanism of Gingiva
2. Gingival Inflammation and Clinical Features of Gingivitis



3. Gingival Enlargement
  4. Acute Gingival Lesions and Management
  5. Desquamative Gingivitis
  - vi. PERIODONTAL PATHOLOGY
    1. Chronic Periodontitis and Management
    2. Aggressive Periodontitis and Management
    3. Necrotising Ulcerative Periodontitis
      - Refractory Periodontitis
      - Periodontitis as a Manifestation of Systemic Diseases & management
    4. AIDS & periodontium & management
    5. Periodontal Pocket
    6. Periodontal Abscess and Management
    7. Bone loss and Patterns of Bone Destruction
    8. Periodontal Response to External Forces
    9. Furcation and Its Management
    10. Tooth Mobility and Management
    11. Periodontal Medicine
    12. Smoking and Periodontal Diseases
    13. Host Modulation
    14. Halitosis - Oral Malodour
  - vii PERIODONTAL TREATMENT OF MEDICALLY COMPROMISED PATIENTS
  - viii PHASE I PERIODONTAL THERAPY
    1. Plaque Control Measures
    2. Chemotherapeutic Agents in the Treatment Of Periodontal Diseases
    3. Scaling & Root Planing (SRP)
    4. Periodontic-endodontal Continuum
    5. Periodontal Splints
  - ix PERIODONTAL MAINTENANCE PHASE
    1. Supportive Periodontal treatment
  - X
    1. General Principles Of Periodontal Surgery
    2. Gingival Curettage
    3. Gingivectomy
    4. Periodontal Flap Surgery
    5. Resective Osseous Surgery
    6. Regenerative Osseous Surgery
    7. Mucogingival Surgery
  - xi DENTAL IMPLANTS
  - xii LASERS IN PERIODONTAL TREATMENT
- RECOMMENDED TEXT BOOK**
- Newman and Carranza's clinical Periodontology Third south Asia Edition
- REFERENCE BOOKS**
- Atlas of cosmetic and reconstructive surgery 3rd edition - Edward S. Cohen
  - A clinical atlas of periodontal surgery - Naoshi Sato
  - Textbook of clinical periodontology and implant dentistry 6th edition - Jan Lindhe
- FINAL YEAR BDS CLINICALS**
- Oral prophylaxis with OHI-30 cases
- Case sheet recording - 10 case sheets
  - Ultra sonic scaling / assist in minor periodontal surgeries after completion of the above quota.



## DEPARTMENT OF CONSERVATIVE DENTISTRY & ENDODONTICS

### VISION

**Learner centered education**

**Patient centered service**

**Community oriented research of excellence**

### MISION

**To make the department a center of excellence through innovative and need-based teaching, learning and service.**

**To empower students appropriate knowledge of the subject and practical skills through problem based learning.**

**To encourage and inculcate the spirit of research among the faculty and the students.**

**Development of parameters of quality in various activities of the department and the institution.**

### COURSE CONTENTS

#### CONSERVATIVE DENTISTRY

- Anterior restorations , Direct filling gold restorations, applied dental materials
- Preventive measures in restorative practice , Temporization or Interim restorations
- Pin amalgam restoration , Management of deep carious lesions
- Non-carious destruction of tooth structures, Hypersensitive dentine and its management
- Cast restorations, Die materials and preparation of dies
- Gingival tissue management for cast restoration and impression procedures
- Differences between amalgam and inlay cavity preparation with note on all bevels used for cast restorations
- Control of pain during operative procedures
- Treatment planning for operative dentistry, detailed clinical and radiographic examination

#### ENDODONTICS

- Introduction, definition, scope and future of endodontics, Clinical diagnostic methods
- Emergency endodontic procedures, Pulpal diseases
- Periapical diseases, Vital pulp therapy
- Apexogenesis and apexification or problems of open apex
- Rationale of endodontic treatment, Principles of root canal treatment





- Anatomy of the pulp cavity, Preparation of root canal space, Disinfection of root canal

- Methods and problems during cleaning and shaping of root canal spaces
- Obturation of the root canal system, Root canal sealers, Post endodontic restoration

- Smear layer and its importance in endodontics and conservative treatment
- Discoloured teeth and its management, Traumatized teeth, Endodontic surgeries
- Root resorption, Emergency endodontic procedures
- Lasers in conservative endodontics (introduction only) practice management
- Professional association dentists act 1948 and its amendment in 1993
- Duties towards the government , Financial management of practice
- Dental material and basic equipment management, Ethics

## REFERENCE BOOKS

### CONSERVATIVE DENTISTRY:

- Textbook of art and science of operative dentistry Sturdevant's - 5th edition
- Textbook of operative dentistry Nishagarg, Amit garg -2nd edition
- Textbook of operative dentistry Vimalsikri -3rd edition

### ENDODONTICS

- Endodontic practice - Grossman Gopikrishna -13th edition
- Textbook of endodontics Nishagarg, Amit garg 3rd edition, cohen & Ingle

### WORK QUOTA (CLINICAL WORK QUOTA IV YEAR BDS)

DUMMY WORK			CLINICAL PATIENT WORK			
Class II Restorations (Amalgam)			Class I Restorations	Class I Extensions	Class II Restorations	Pulp Capping
Maxillary Molar	Conservative	1	25 - 30 Amalgam-25 Composite-5	5	5	5
Maxillary Molar	Conventional	1				
Mandibular Molar	Conservative	1				
Mandibular Molar	Conventional	1				

**NOTES:** In case of prior completion of the prescribed clinical work quota, the students will be allowed to proceed with the preclinical work of the specialty treatment procedures. practical evaluation done based on osche method during first and second postings (minimum -3) to the concerned staff incharge, per evaluation - 100 marks.



## ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS SYLLABUS

### VISION

A rational sequence of dental procedures that includes orthodontic treatment and other measures necessary to improve patient's life by enhancing function and dentofacial esthetics.

### MISSION

To improve the standards in Orthodontic treatment care.

To modernize our treatment modalities and improve our standard at par with international level.

To transfer the skills from the teachers to the students.

To render quality treatment to the patients.

To enhance patient satisfaction.

### Syllabus:

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 Orthodontic 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
  - 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 Occlusion
  - a. Factors influencing functional development of dental arches and occlusion.
  - b. Forces of occlusion
  - c. Wolff'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 Principles, description, advantages and disadvantages of classification of malocclusion by Angle, Simon, Lischer and Ackerman and Proffitt.
8. Normal and Abnormal Function of Stomatognathic System
9. Aetiology of Malocclusion
  - a. Definition, importance, classification, local and general aetiological 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, disadvantages 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 use in orthodontics
  - h. Wrist X-rays and its importance in orthodontics
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, Carey's, 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 Orthodontics - indications and selection of teeth for extraction.
- 17. 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, Principles of welding and soldering, fluxes and antfluxes.
  - e. Preliminary knowledge of acid etching and direct bonding.
- 18. Ethics

### **REMOVABLE ORTHODONTIC APPLIANCES**

- 1) Components of removable appliances
- 2) Different types of clasps and their use
- 3) Different types of labial bows and their use
- 4) Different types of springs and their use
- 5) Expansion appliances in orthodontics:
  - i) 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
- 2. Component parts and their uses
- 3. Basic principle of different techniques: Edgewise, Begg's, straight wire.

### **EXTRA ORAL APPLIANCES**

- 1. Headgears
- 2. Chin cup
- 3. Reverse pull headgears

### **MYOFUNCTIONAL APPLIANCES**

- 1. Definition and principles
- 2. Muscle exercises and their uses in orthodontics
- 3. Functional appliances:
  - i) Activator, Oral screens, Frankels function regulator, bionator twin blocks, lip bumper



- ii) Inclined planes: upper and lower
- 19. Orthodontic Management of Cleft Lip and Palate
- 20. 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
- 21. Principle, Differential Diagnosis & Methods of Treatment of:
  - 1. Midline diastema
  - 2. Cross bite
  - 3. Open bite
  - 4. Deep bite
  - 5. Spacing
  - 6. Crowding
  - 7. Class I, Division 1, Division 2
  - 8. Class II, Division 1, Division 2
  - 9. Class III Malocclusion - True and Pseudo Class III
- 22. 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**

- I. Basic wire bending exercises (Gauge 22 or 0.7mm)
  - 1. Straightening of wires (4 Nos.)
  - 2. Bending of an equilateral triangle
  - 3. Bending of a rectangle
  - 4. Bending of a square
  - 5. Bending of a circle
  - 6. Bending of UV
- II. Construction of Clasps (Both sides upper and 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 Cantilever Spring
  - 3. Double Cantilever 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 -24 gauge or 0.5mm
- b) Sleeve - 19 gauge needle on any one side.
- 4. Palatal canine retractor (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 FINAL YEAR B.D.S.**

1. Case History taking
2. Case discussion
3. Discussion on the given topic
4. Cephalometric tracings
  - a. Down's Analysis
  - b. Steiner's Analysis
  - c. Tweed's Analysis
5. Model Analysis

#### **PRACTICAL TRAINING DURING FINAL YEAR BDS**

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 Appliance
7. Upper Expansion plate with Expansion Screw

#### **RECOMMENDED AND REFERENCE BOOKS**

1. Contemporary Orthodontics William R. Proffit - 5<sup>th</sup> & 6<sup>th</sup> Edition
2. Orthodontics for Dental Students White & 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: Vol 1 & 2 Salzmann
7. Handbook of Orthodontics Martin T cobourne



## WORK SCHEDULE

### FINAL YEAR BDS

#### 1) Pre-clinical work

##### APPLIANCES

- Hawley's appliance
- Hawley's appliance with tongue guard
- Inclined plane
- Activator
- Oral Screen
- Space maintainer- Fixed and removable types

#### 2) Clinical

- Case History - 5 cases
- Impression taking for patient
- Photographs
- Cephalometric tracing
- Model Analysis
- Basing of Models
- OSPE

#### 3) Lecture Topics

- Arch expansion
- Extractions
- Orthodontics appliance-General principles
- Fixed appliances
- Myofunctional appliances
- Orthopaedic appliances
- Treatment planning
- Management of some common malocclusions
- Management of Class II malocclusion
- Management of Class III malocclusion
- Management of Open Bite
- Management of Deep Bite
- Management of Cross Bite
- Cleft lip and palate
- Surgical orthodontics
- Retention and relapse
- Genetics in orthodontics
- Computers in orthodontics
- Adult orthodontics





## DEPARTMENT OF PAEDODONTICS AND PREVENTIVE DENTISTRY

### VISION

Focused on providing compassionate, child-centered, coordinated, Interdisciplinary, High-quality oral health care.

To develop an awareness among Child patients, Parents, Dental professionals, and other Healthcare Providers.

We emphasize on oral health and prevention of oral disease for Comprehensive Healthcare System.

### MISSION

Committed to comprehensively prepare competent individuals for the practice of pediatric dentistry in the private, hospital based and/or academic setting.

To play an active role in advancing the oral health knowledge by means of community activities, scholarly activity, research, and outreach programs.

### AIMS AND OBJECTIVES OF PAEDODONTICS:-

- Able to instill a positive attitude and behavior 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 guardian/ parents with regard to various treatment modalities including different facets of preventive dentistry.
- Able to treat dental diseases occurring in the child patient
- Able to manage physically and mentally challenged / disabled children effectively and efficiently, tailored to the needs of individual requirement and conditions.

### THEORY:

#### 1. INTRODUCTION TO PAEDODONTICS & PREVENTIVE DENTISTRY

- Definition, scope, objectives and importance

#### 2. GROWTH & DEVELOPMENT

- Importance of study of growth and development in pedodontics
- Prenatal and postnatal factors in growth and development
- Theories of growth and development
- Development of maxilla and mandible and related age changes

#### 3. DEVELOPMENT OF OCCLUSION FROM BIRTH THROUGH ADOLESCENCE

- Study of variations and abnormalities
- Infant oral health care
- Anticipatory guidance

#### 4. DENTAL ANATOMY AND HISTOLOGY

- Development of teeth and associated structures
- Eruption and shedding of teeth
- Teething disorders and their management
- Chronology of eruption of teeth
- Difference between deciduous and permanent teeth
- Development of dentition from birth through adolescence
- Importance of first permanent molar



## **5. DENTAL RADIOLOGY RELATED TO PEDODONTICS**

## **6. ORAL SURGICAL PROCEDURES IN CHILDREN**

- Indications & contraindications of extractions of primary and permanent teeth in children
- Knowledge of local and general anesthesia
- Minor oral surgical procedures in children

## **7. DENTAL CARIES**

- Historical background
- Definition, etiology and pathogenesis
- Caries pattern in primary, young permanent and permanent teeth in children
- Nursing caries, rampant caries, early childhood caries and extensive caries  
Definition, etiology, pathogenesis, clinical features, complications and management
- Role of diet, nutrition in dental caries
- Dietary modifications and diet counselling
- Caries activity tests, caries prediction, caries susceptibility & their clinical application

## **8. GINGIVAL AND PERIODONTAL DISEASES IN CHILDREN**

- Normal gingiva & periodontium in children
- Definition, etiology & pathogenesis
- Prevention & management of gingival & periodontal diseases

## **9. CHILD PSYCHOLOGY**

- Definitions
- Theories of child psychology
- Psychological growth and development while managing child patient
- Principles of psychological growth and development while managing child patient
- Dental fear and its management
- Factors affecting child's reaction to dental treatment
- Emotional development of children

## **10. BEHAVIOUR MANAGEMENT**

- Definitions
- Types of behavior encountered in the dental clinic
- Non-pharmacological and pharmacological methods of behavior management
- Behavior shaping and modification

## **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 teeth in children using various restorative materials like glass ionomer, compomer, composites, silver amalgam, stainless steel, poly carbonate and resin crowns.

## **12. PEDIATRIC ENDODONTICS**

- Principal & Diagnosis
- Classification of pulpal pathology in primary, young permanent and permanent teeth
- Management of pulpally involved primary, young permanent and permanent teeth



- Pulp capping direct & indirect
- Pulpotomy
- Pulectomy
- Apexogenesis
- Apexification
- Obturation techniques & material used for primary , young permanent and permanent tooth

### **13. TRAUMATIC INJURIES IN CHILDREN**

- Classification and importance
- Sequelae and reaction of teeth to trauma
- Management of traumatized teeth

### **14. PREVENTIVE AND INTERCEPTIVE ORTHODONTICS**

- Definitions
- Problems encountered during primary and mixed dentition phases and their managements
- Mixed dentition analysis
- Malocclusion and management
- Serial extractions
- Space management

### **15. ORAL HABITS IN CHILDREN**

- Definition, etiology and 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, etiology, classification, behavioural, clinical features and management of children with
- Physically handicapping conditions
- Mentally compromising conditions
- Medically compromising conditions
- Genetic disorders

### **17. CONGENITAL ABNORMALITIES IN CHILDREN**

- Definition, classification, clinical features and management.

### **18. DENTAL EMERGENCIES IN CHILDREN AND THEIR MANAGEMENT.**

### **19. DENTAL MATERIALS USED IN PEDIATRIC DENTISTRY.**

### **20. PREVENTIVE DENTISTRY.**

- Definitions.
- Principles and scope.
- Types of prevention.
- Different preventive measures used in pediatric dentistry including pit and fissure sealants and caries vaccine.
- Preventive resin restoration, ART, MID.

### **21. DENTAL HEALTH EDUCATION AND SCHOOL DENTAL HEALTH PROGRAMMES.**

### **22. FLUORIDES.**

- Historical background.



- Systemic and topical fluorides.
- Mechanism of action.
- Toxicity and management.
- Defluoridation techniques.

**23. CASE HISTORY RECORDING**

- Outline of principles of examination, diagnosis and treatment planning.

**24. DRUGS USED IN PEDIATRIC DENTISTRY.**

**25. CHILD ABUSE AND NEGLECT.**

**26. SETTING UP OF PEDODONTIC CLINIC.**

**27. ETHICS.**

**IV BDS LECTURE TOPICS**

1. Introduction to Paedodontics
2. Pulp therapy
3. Development of occlusion
4. Preventive orthodontics
5. Interceptive orthodontics
6. Cleft lip & palate
7. Pulp & pulpal diseases
8. Trauma
9. Semi-permanent restoration
10. Child psychology Theories
11. Emotional development
12. Non-pharmacological and Pharmacological management
13. Dental caries
14. Infant oral health care and diet counselling
15. Pit & fissure sealants and PRR
16. Radiographs
17. Child abuse & neglect
18. Oral habits
19. Restorative dentistry
20. Systemic fluoride
21. Topical fluoride
22. Minor Oral surgical procedures
23. Handicapped children
24. Medically compromised

**PRACTICALS:**

Recommended clinical quota for Undergraduates

1. Clinical procedures=25  
(Restorations, Extractions, Oral prophylaxis, Fluoride application & Pit and fissure sealants)
2. FDI=20  
Education & motivation of the patients using disclosing agents, educating parents about oral hygiene measures like tooth brushing, flossing, etc.



## CLINICAL WORK

- Long case history-01
- Short case history-05
- Final posting viva
- Clinical Demonstrations

## BOOKS RECOMMENDED & REFERENCES:

1. Pediatric dentistry (Infancy through adolescence)-Pinkham
2. Kennedy's Pediatric operative dentistry-Kennedy & Curzon
3. Occusal guidance in pediatric dentistry-Stephen.H.Wei
4. Clinical use of fluorides- Stephen.H.Wei
5. Pediatric Oral and Maxillofacial surgery-Kaban
6. Pediatric medical emergencies-P.S.Whatt
7. Understanding dental caries-Nikiforuk
8. 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. Snawder
13. Preventive dentistry-Forrester
14. The metabolism & toxicity of fluoride-Garry .M.Whitford
15. Dentistry for the child and adolescent-Mc Donald
16. Pediatric Dentistry-S.G.Damle
17. Behavior management-Wright
18. Pediatric Dentistry-Mathewson
19. Traumatic Injuries-Andreasen
20. Occlusal guidance in Pediatric Dentistry-Nakata
21. Pediatric drug therapy-Tomare
22. Contemporary Orthodontics-Proffit
23. Preventive dentistry-Depaola
24. Metabolism and 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
30. Dentistry for the adolescent-Castaldi Brass
31. Textbook of pedodontics-Shoba Tandon
32. Textbook of pediatric dentistry- Nikhil Marwah
33. Principles and practices in pediatric dentistry-M.S.Muthu,N.Sivakumar



## DEPARTMENT OF PROSTHODONTICS , CROWN AND BRIDGE

### VISION :

Rejuvenation of the stomatognathic system of the society by implementing the advanced knowledge of prosthetic dentistry.

### MISSION :

To inculcate the technical skills and recent advancement in the field of prosthodontics among students to give best patient care.

### FINAL YEAR TEACHING PROGRAMME

Practical :-

Total no of Cases - 4 CDS

Tooth Preparation in maxillary anteriors - 10 (Dummy)

Tooth preparation in maxillary posteriors - 5 (Dummy)

### SYLLABUS

#### Complete Dentures

- A. Applied Anatomy and Physiology
  1. Introduction
  2. Biomechanics of the edentulous state
  3. Residual ridge resorption.
- B. Communicating with the patient Understanding the patients,
  1. Mental attitude.
  2. Instructing the patient.
- C. Diagnosis and treatment planning for patients
  1. With some teeth remaining
  2. With no teeth remaining.
    - a) Systemic status.
    - b) Local factor
    - c) The geriatric patient.
    - d) Diagnostic procedures.
- D. Articulators - Discussion, Types and uses
- E. Improving the patient's denture foundation and ridge relation -an overview
  - a) Pre-operative examination.
  - b) Initial hard tissue & soft tissue procedure,
  - c) Secondary hard & soft tissue procedure.
  - d) Implant procedure.
  - e) Congenital deformities.
  - f) 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,
  - e) Impression techniques.
  - f) Maxillary and mandibular impression procedures.
    - i. Preliminary impressions.
    - ii. Final impressions.
  - g). Laboratory procedures involved with impression making (Beading & Boxing, and cast preparation).
- H. 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.
  - a) Mandibular movements.
  - b) Maxillo -mandibular relation including vertical and horizontal jaw relations.
  - c) 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) Neurocentric 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.
  - f) Recovery of dentures.



- g) Lab remount procedures.
- h) Recovering the complete denture from the cast.
- i) Finishing and polishing the complete denture.
- j) Plaster cast for clinical denture remount procedure:
- P. Denture insertion.
  - a) Insertion procedures.
  - b) Clinical errors.
  - c) Correcting occlusal disharmony.
  - d) Selective grinding procedures.
- R. Treating problems with associated denture use - discuss in brief (tabulation/flow-chart form).
- S. Treating abused tissues - discuss in brief.
- T. Relining and rebasing of dentures- discuss in brief.
- V. Immediate complete denture construction procedure- discuss in brief.
- W. The single complete denture- discuss in brief.
- X. Overdentures - discuss in brief.
- 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)
3. Types / Classification
4. Materials
5. Methodology - Lab /Clinical
6. Advantages & disadvantages
7. Indications. contraindications
8. Maintenance Phase
9. Oral Implantology
10. Ethics

### **Removable Flexible Dentures**

1. Introduction
  - Terminologies and scope
2. Classification
3. Examination, Diagnosis & Treatment planning & evaluation diagnostic data
4. Components of a removable partial denture. )
  - 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 aesthetic 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. Post-insertion 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 SQft. Tissue Management
12. Impressions
13. Working Casts and Dies
14. Wax Patterns



15. Politics and Edentulous Ridges
16. Aesthetic Considerations
17. Finishing and Cementation

### **Oral implantology -**

1. History of implants
2. Scope
3. Bone-biology
4. Diagnosis and treatment plan
5. Stages of implant surgeries

### **Books**

1. Contemporary implant dentistry- Carl. E. Misch

### **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. EL.
5. Preparations for extensively damaged teeth. fl
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.
2. Boucher's "Prosthodontic treatment for edentulous patients"
3. Essentials of complete denture prosthodontics by - Sheldon Winkler.
4. Maxillofacial Prosthetics by Taylor
5. McCracken's Removable partial prosthodontics
6. Removable partial prosthodontics by - Ernest L. Miller and Joseph E. Grasso.
7. Removable Partial Prosthodontics by Deepak Nallasamy
8. Textbook of Prosthodontics - V Rangarajan and T.V.Padnanabban
9. Fundamentals of Fixed Prosthodontics - H.T.Schillinburg



## PUBLIC HEALTH DENTISTRY

### VISION

To prevent and control oral diseases and promote oral health through organized Community efforts.

### MISSION

To prepare students to have a knowledge of the basics of Public Health, Dental Public Health, Preventive Dentistry, Public Health Problems in India, Nutrition, Environment and their role in health, Dental Statistics, Epidemiology and National Oral Health Policy.

### COMPETENCIES

At the completion of undergraduate training Programme the graduates shall be competent in the following

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 community based preventive measures

Have knowledge of the social, cultural and environmental factors which contribute to health or illness

Administer oral hygiene instructions, topical fluoride therapy and fissure sealing

Educate patients about the etiology and prevention of oral disease and encourage them to assume responsibility for their oral health

### 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, and National Oral Health Policy

#### SKILL AND ATTITUDE

At the conclusion of the course the student shall acquire 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 conclusion 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.

#### MINIMUM WORKING HOURS

Subject	Lecture Hours	Clinical Hours	Total Hours
Public Health Dentistry	60	200	260



## SYLLABUS FOR UNDERGRADUATES ACCORDING TO DCI PUBLIC HEALTH DENTISTRY

- I. INTRODUCTION TO DENTISTRY**
- II. BIOSTATISTICS**
- III. RESEARCH METHODOLOGY**
- IV. PUBLIC HEALTH**
- V. DENTAL PUBLIC HEALTH**
- VI. PREVENTIVE DENTISTRY**
- VII. SOCIAL SCIENCES**

### **INTRODUCTION TO DENTISTRY**

- 1. Definition
- 2. Aims
- 3. Objectives
- 4. History of Dentistry
- 5. Scope

### **BIOSTATISTICS & RESEARCH METHODOLOGY**

- 1. Introduction
- 2. Sampling And Sample Designs
- 3. Sampling Methods
- 4. Sample Size
- 5. Collection of Data
- 6. Presentation of Data
- 7. Uses of Biostatistics
- 8. Measures of Central Tendency
- 9. Measures of Dispersion
- 10. Normal Curve
- 11. Test of Significance

### **PUBLIC HEALTH**

- 1. Definition
- 2. History
- 3. Changing Concepts in Public Health

### **CONCEPT OF HEALTH AND DISEASE**

#### **Chapter-2-Concept of Health and Disease-Park**

- 1. Definition of health
- 2. Changing concepts of health
- 3. Dimensions of health
- 4. Spectrum of health
- 5. Determinants of health
- 6. Indicators of health
- 7. Concepts of causation
  - Germ theory
  - Epidemiological triad
  - Multifactorial causation
  - Web of causation
- 8. Natural history of diseases
  - Pre pathogenesis factor
  - Pathogenesis factor
  - Risk factors
  - Ice berg phenomenon
- 9. Concepts of prevention



- Primordial
- Primary
- Secondary
- Tertiary

## **EPIDEMIOLOGY**

### **Chapter-3-Principles of Epidemiology and Epidemiologic Methods-Park**

1. Definition
2. Objectives of Epidemiology
3. Epidemiological Approach
4. Tools of Measurement
  - Incidence
  - Prevalence
  - Bimodality
5. Uses of Epidemiology
6. Epidemiological Methods
  - Descriptive Epidemiology
  - Analytical Epidemiology
  - Case-Control Study
  - Matching
  - Bias
  - Cohort Study
  - Experimental Epidemiology
    - o Randomized Controlled Trial
    - o Blinding

## **ENVIRONMENT AND HEALTH**

### **Chapter-13- Environment and Health-Park**

#### **Water**

1. Source of water
2. Water Pollution
3. Water borne diseases
4. Hazards of water pollution
5. Water Purification
  - a. Large scale
  - b. Small scale
6. Chlorination

#### **Waste**

1. Methods of disposal
2. Bangalore method

## **HEALTH EDUCATION**

### **Chapter-20-Communication for Health Education-Park**

1. Definition
2. Aims & Objectives
3. Approaches
4. Contents
5. Principles
6. Aids Used in Health Education
7. Methods
8. Barriers of Communication
9. Planning of Dental Health Education Program



## **HEALTH CARE DELIVERY SYSTEM**

### **Chapter-22- Health Care of the Community-Park**

1. Primary Health Care
  - Definition
  - Elements
  - Principles
2. Health Care System
3. Village Health Guide
4. Local Dais
5. Anganwadi Workers
6. ASHA
7. Sub center Level
8. Primary Health Center Level
  - Staffing Pattern
  - Functions
9. Indigenous System of Medicine
10. Voluntary Health Agencies In India

## **INTERNATIONAL HEALTH ORGANIZATIONS**

### **Chapter-23- International Health-Park**

- International Health Organizations
- WHO

## **NATIONAL HEALTH PROGRAMS**

### **Chapter-7-Health Programs in India-Park**

- National Health Programs

## **OTHERS**

- Occupational hazards
- Mass disaster

## **DENTAL PUBLIC HEALTH**

1. Definition
2. Characteristic of Public Health Works
3. Tools of Dental Public Health
4. Duties of a Public Health Dentist
5. Procedural Steps in Dental Public Health
6. Differences Between Private Practice and Public Health Dentistry
7. Oral Health Goals
8. IAPHD
9. Milestones In Dental Public Health

## **DENTAL EPIDEMIOLOGY**

### **1. Epidemiology of Dental caries**

1. Theories of Caries Etiology
2. Microflora
3. Role of Dental Plaque
4. Dietary Studies on Dental Caries
5. Caries Risk Assessment
6. Cariogram
7. Caries Vaccine



8. Caries Activity Tests
9. Prevention of Dental Caries

## **2. Epidemiology of Periodontal diseases**

1. Etiology of Periodontal Diseases
2. Dental Plaque
3. Plaque Control
4. Mechanical
5. Chemical
6. Disclosing Agents
7. Tooth Brushes
8. Dentifrices
9. Interdental Cleaning Aids
10. Prevention of Dental Caries

## **3. Epidemiology of Oral cancer**

1. Etiology of Oral Cancer
2. Risk Factors of Oral Cancer
3. Types of Tobacco
4. Tobacco Counselling
5. Prevention of Oral Cancer

## **4. Epidemiology of Malocclusion**

1. Etiology of Malocclusion
2. Prevention of Malocclusion

### **INDICES**

1. Definition
2. Ideal Requisition
3. Classification
4. Uses
5. Indices for Oral Diseases

### **PLANNING**

1. Steps In Planning Process
2. Types of Evaluation

### **SURVEY**

1. Introduction
2. Types of Surveys
3. Uses of Surveys
4. Methods of Data Collection
5. Steps in Surveying
6. Calibration
7. Type of Examination
8. Pilot Survey
9. National Pathfinder Survey
10. WHO Form-1997

### **DENTAL AUXILIARIES**

1. Classification
2. Expanded Function Auxiliaries
3. Frontier Auxiliaries
4. New Auxiliaries
5. Dental Manpower in India

### **FINANCE IN DENTAL CARE**

1. Mechanism of Payment for Dental Care
2. Financing In Dental Health Services in India
3. Dental Insurance



## **SCHOOL ORAL HEALTH PROGRAM**

1. Definition
2. Objectives
3. Ideal Requirements
4. Advantages
5. School Oral Health Programs
6. Comprehensive Care
7. Incremental Care

## **ETHICS**

1. Principles
2. Consent
3. Ethical Rules for Dentist

## **WHO AND ORAL HEALTH**

### **DCI**

### **IDA**

### **COPRA**

### **DENTIST ACT**

### **NATIONAL ORAL HEALTH POLICY**

## **PREVENTIVE DENTISTRY**

### **FLUORIDES**

1. History
2. Mechanism of Action
3. Topical
4. Systemic
5. Water Fluoridation Studies
6. Toxicity
7. Defluoridation

## **PIT & FISSURE SEALANTS**

1. Types
2. Materials
3. Procedure
4. Indications & Contra Indications

## **ART**

1. Definition
2. Principles
3. Indications & Contra Indications
4. Procedure

## **NUTRITION AND ORAL HEALTH**

1. Classification of Food
2. Balanced Diet
3. Trace Elements in Dental Caries
4. Nutrition and Dental Caries
5. Nutrition and Periodontal Diseases
6. Nutrition and Malocclusion
7. Nutrition and Oral Cancer

## **SOCIAL SCIENCES**

### **BEHAVIOURAL SCIENCES**

1. Sociology
2. Anthropology
3. Psychology





4. Taboos in Dentistry
5. Behavioural Management

### **ORAL HEALTH CARE FOR SPECIAL GROUPS**

1. Systemic Patients
2. Handicapped
3. Elderly
4. Pregnancy

### **CLINICAL TRAINING PROGRAMME**

#### **Name of the exercise No. of cases/exercises to be Completed**

1. Case sheet 15
2. Indices

#### **A. Oral Hygiene Assessment**

- Oral Hygiene Index 3
- Oral Hygiene Index – Simplified 3
- Plaque Index 3

#### **B. Dental Caries**

- DMFT/DMFS 3

#### **C. Gingival and Periodontal Health assessment**

- Gingival Index 3

#### **D. Fluorosis Index**

- Dean's Fluorosis Index –Modified Criteria 3

#### **3. W.H.O- oral health assessment form (1997) 3**

#### **4. Preventive procedures**

- a. A traumatic Restorative Technique 2
- b. Pit & fissure sealants 2
- c. Acidulated phosphate fluoride gel application 2
- d. Preventive Resin Restoration (PRR) 2

#### **5. Health Education**

- a) Make one-Audio visual aid 1
- b) Make a health talk 1

### **ASSESSMENT**

- Class Test
- Assignment
- Problem Based Learning
- Spotters
- Simulation Lab
- OSCE & OSPE
- End Posting Viva

### **LIST OF BOOKS**

1. Name: Parks Textbook of Preventive and Social Medicine
  - a. Author: K.PARK
  - b. Publisher: Banarsidass Bhanot Publishers
  - c. Edition: 26TH Edition
2. Name: Essentials of Public Health Dentistry
  - a. Author: Soben Peter
  - b. Publisher: Arya Medi Publishing House Pvt, Ltd
  - c. Edition: 7th Edition

**FINAL YEAR BDS-INSTRUMENT LIST - STUDENTS TO DEPOSIT IN STORES**

<b>S.NO.</b>	<b>INSTRUMENTS</b>	<b>QUANTITY</b>
1	Mouth Mirror	2
2	Explorer	2
3	Straight Probe	2
4	Williams Periodontal Probe	1
5	Cpi Probe	1
6	Tweezer	2
7	Kidney Tray	2
8	Rectangular Tray With Lid-small	1
9	Impression Trays	2
10	Enamel Chisel	1
11	Hatchet	1
12	Gmt (set Of 2)	2
13	Cement Spatula	1
14	T Burnisher	1
15	Ball Burnisher	1
16	Conical Burnisher	1
17	Holland Back Carver	1
18	Diamond Carver	1
19	Wards Carver	1
20	Amalgam Carrier	1
21	Ivory No 8 Retainer	1
22	Bite Block	1
23	Surface Scalers (gdc Manipal)	1
24	Sickle Scalers (gdc Manipal)	1
25	Posterior Scalers (gdc Manipal)	1
26	Periosteal Elevator (molt No 9)	1
27	Pedo-periosteal Elevator	1
28	Adson's Toothed Forceps	2
29	Spoon Excavator	2
30	Plastic Filling Instrument	2
31	Condenser-parallelogram	2
32	Condenser-cylindrical	1
33	Bp Handle	1



<b>FINALYEAR BDS- LIST OF ITEMS - TO BE ISSUED FROM THE DEPARTMENTS</b>	
<b>S.NO.</b>	<b>INSTRUMENTS</b>
1	Impression Paste
2	Glass Inomer for Filling Type II
3	Zinc Phosphate Power & Liquid
4	Stone Plaster 1 kg pkt
5	Heat Cure acrylic U/P
6	Wax sheet
7	Self cure acrylic U/P Pink
8	Impression Compound
9	Green Stick Compound
10	Vaseline
11	Alginate
12	Silver Alloy Powder
13	Mercury 30 gms
14	Disposable Patient Apron pkt of 25
15	Tray Sheet PKT OF 50
16	BP Blade No 15
17	Typo teeth No 11-5 nos, No 21-5 Nos
18	SS Wire 23 Gauge all gauges
19	GREEN CLOTH
20	MC INTOSH SHEET
21	THREAD
22	ADHESIVE TAPE
23	Suction tips
24	Composite Material
25	Dycal
26	Zinc Oxide & Euginol
27	Cellophane Matrix (Transperant)
28	Articulating paper
29	Pumice



FINAL YEAR BDS-INSTRUMENT LIST - LIST OF ITEMS - STUDENTS TO CARRY WITH THEM	
S.NO.	INSTRUMENTS
1	Cotton Rolls
2	Wooden Wedges
3	Crown Prep Bur Kit-1 (tapering Fissure -1, Double Cone-1, End Utting Bur-1, Tapering Round -1, Pear Shape Bur-1,wheel Bur-1,tapering Round Finishing Bur-1)
4	Burs (short Shank): Round, Straight Bur, inverted Cone-sf-s41, br41, si-546
5	Mask
6	Head Hap
7	Composite Filling Instrument Kit
8	Airotor Hps
9	Ipad For Pms
10	Matrix Band No 8
11	Matrix Band No 1
12	Gloves
13	Micromotor Burs Straught, Round, Inverted Cone, Tapering Fissure
14	Micromotor Polishing Cups And Points
15	Dappen Dish
16	Rubber Bowl -big
17	Ceramic Bowl
18	Rubber Bowl - Small
19	Straight Spatula
20	Curved Spatula
21	Cotton Holder
22	Mortar And Pestle
23	Agate Spatula
24	Universal Fold
25	Adam's Universal Fold -gdc
26	Young's Universal Plier-gdc
27	Heavy Duty Wire Cutter-gdc
28	Glass Slab
29	Fox Plane [metal & Plastic]
30	Hot Plate
31	Wax Knife
32	Wax Carver
33	Something With A Spatula
34	Metal Scale-small
35	Acrylic Stone Trimmer [white, Pink,grey,-collar Bur,tc Bur,straigh Fissure]
36	Blow Torch With Sprit
37	Spirit Lamp With Spirit
38	Eosin Pencil
39	Glass Marking Pencil
40	Acrylic Trimmer
41	Round Bur For Micromotor
42	Straight Fissure Bur For Micromotor



<b>TIME TABLE : IV BDS</b> <b>VENUE : VINAYAKA MISSON'S SANKARACHARIYAR DENTAL COLLEGE, SALEM</b>						
DAYS	8.30 am to 9.30 am	9.31 am to 10.30 am	10.31 am to 10.45 am	10.46 am to 1.15 pm	1.15 pm to 2.00 pm	2.00 pm to 3.30 pm
<b>MONDAY</b>	Conservative	Periodontics	<b>TEA BREAK</b>  <b>CLINICS</b>  <b>LUNCH BREAK</b>  <b>CLINICS</b>  Tutorials			
<b>TUESDAY</b>	Orthodontics (1 <sup>st</sup> Week) Oral Surgery (2 <sup>nd</sup> 3 <sup>rd</sup> & 4 <sup>th</sup> week)	Prosthodontics				
<b>WEDNESDAY</b>	Oral Medicine	PHD				
<b>THURSDAY</b>	Perio (1 <sup>st</sup> & 3 <sup>rd</sup> Week) / PHD(2 <sup>nd</sup> & 4 <sup>th</sup> week)	Pedodontics				
<b>FRIDAY</b>	Prosthodontics	Conservative				
<b>SATURDAY</b>	Orthodontics	Oral Surgery				
<b>Library hour : Every Tuesday and Friday    TIMINGS : 3.30 pm - 4.30 pm</b>						



