# <u>Subjective & Objective Planning of I BDS Students Evaluation.</u> PHYSIOLOGY & BIOCHEMISTRY

### PHYSIOLOGY:-

Students should be able to learn:-

- 1) Heart rate
- 2) Pulse rate
- 3) Measure of Blood pressure
- 4) Examination of Respiratory system
- 5) Examination of Cardiovascular system
- 6) Knowing Blood Group
- 7) Knowing Bleeding time& Clotting time
- 8) Determination of Hb%
- 9) Management of Vaso-vagal shock

### BIOCHEMISTRY :-

- 1 ) Determination of Sugar in Urine
- 2) Determination of Protein in Urine
- 3) Determination of Acetone in Urine

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#### 1st BDS - DADH

# SUBJECTIVE AND OBJECTIVE PLANNING OF 1<sup>ST</sup> BDS STUDENTS EVALUATION UNDER FOLLOWING HEADS

At the end of the 1<sup>st</sup> year BDS course, the student will be able to understand and explain the normal anatomy and development of teeth.

The broad goal of the teaching undergraduate students in Dental Anatomy and Dental Histology is to give brief review of development of teeth, face, jaws, lip, palate and tongue with applied aspects.

In Dental Anatomy: 1st BDS students should have the knowledge of tooth morphology, human dentition, types of teeth and their functions, about all tooth notations systems, tooth surfaces, their junctions – line angles and point angles, basic glossary and terms used in Dental Morphology, geometric concepts in tooth morphology and clinical significance.

Students should have the knowledge of morphology of deciduous and permanent teeth, description of individual teeth along with their anatomy and chronology of development.

Differences between similar class of teeth and identification of individual tooth. Student should know variations and anomalies commonly seen in individual teeth.

Generalized differences between deciduous and permanent teeth, descriptions of individual deciduous and permanent teeth including their chronology of development, endodontic anatomy, about occlusion of posterior teeth with the definitions and factors affecting occlusion, also inclinations of individual teeth – compensatary curves, centric relations and centric occlusion – protrusive, retrusive, and lateral occlusion with clinical significance of normal occlusion and basal bone, external and internal forces and sequence of eruption.

In Dental Histology and Oral Embryology: Students should have the basic knowledge of development of tooth, face, jaw, lips, oral structures and tooth.

In Development of teeth, they should know detailed study of different stages of development of crown and root and supporting tissues of tooth and detailed study of formation of calcified tissues.

About eruptions of deciduous and permanent teeth: The mechanisms in tooth eruptions, different theories and histology of eruptions, formation of dentogingival junctions.

In shedding of teeth, the factors and mechanisms of shedding of deciduous teeth and its complications.

In Oral Histology: 1st BDS students should have the knowledge of detailed microscopic study of Enamel, Dentin, Cementum and pulp tissues, periodontal ligament, alveolar bone and alveolar mucosa; age changes and applied aspects of histological considerations; mechanisms of keratinizations, clinical parts of gingiva and tongue papilla; age changes and clinical considerations of above mentioned tissues. In salivary glands, detailed microscopic study of acini and ductal system with their age changes and clinical considerations.

In TMJ, review of basic anatomy and microscopic study; clinical relevance of TMJ and maxillary sinus in detail. Students should also have the knowledge of processing of hard and soft tissues for microscopic study, knowledge about ground sections, decalcified sections, and routine H and E staining procedure of oral tissues.

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### Objectives of General Pathology and Microbiology

### Microbiology

- 1. Student should have the knowledge of bacterial organisms and their clinical presentation.
- 2. They should know appropriate specimen collection.
- 3. Microscopic appearance cultural characteristics, diagnostic test drug sensitivity.
- 4. Knowledge of common fungal parasitic and viral organisms in specimen and to utilize serology and culture investigations for diagnosis.
- 5. Operating microscope, fixing of slides.

### General Pathology

- Perform morphological assessments and diagnosis of blood disorders.
- Use of microscope for morphologic assessment of urine analysis.
- 3. Student should know to find RBC count, WBC count, DLC count, Bleeding and Clotting time of their own blood.

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# Subjective and Objective planning of second year students evaluation under following heads:

Students should have thorough knowledge of Preclinical Endodontics in following heads:

### A. Exercises to improve the dexterity:

- i) Preparation of plaster models of teeth
- ii) Finishing and polishing of plaster models
- iii) Marking of cavity as per Black's classification on these plaster models for Dental Amalgam fillings and inlays.
- iv) Preparation of cavities for Amalgam fillings and Inlays on plaster model.
- v) Restoration of the prepared cavities with modelling wax.

### B. Exercises for cavity preparation of Dental Amalgam restoration on natural/ivory teeth

- 1) Mounting of the Natural/Ivory teeth on phantom head.
- 2) Preparation of Class I/Class I Comp./Class II/Class V /MOD cavities of posterior teeth with special emphasis on Class II cavities.
- 3) Cavity lining on all the prepared cavities.
- 4) Restoration & polishing of all teeth restored with dental amalgam.

### C. Exercises for anterior teeth restoration.

- 1) Preparation of Class III/Class IV cavities in anterior teeth.
- 2) Preparation of wax pattern for the same with inlay wax.

Teaching faculty carry out following methods of teaching:

- Lectures
- Table discussions
- One on one discussion with students during pre-clinical postings
- MCQ tests
- Viva

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## Subjective & Objective Planning of H BDS Students Evalution for

General & Dental Pharmacology under following heads. Students should have the thorough knowledge about:

- 1) Mechanism of action, uses adverse effects & drug interactions of different drugs used for diseases of different systems like Respiratory system, CVS, CNS, Renal, GIT & for different bacterial, viral & fungal infections
- Therapeutic index of drugs for safety of drugs.
- 3) Rationale Pharmacotherapy including STEP i.e.
  - Safety
  - Tolerability
  - Efficacy
  - Prize or cost of drug

As per the health care needs & drug resistance

- Drugs needed in emergency treatment & essential drugs
- 5) Local anaesthetic drugs, their route of administration & allergy Reactions with its treatment
- Drugs to control the bleeding mainly after tooth extraction
- 7) Which combinations of drugs are allowed
- 8) Should have knowledge of drugs for treatment of anaphylaxis
- 9) Should know the drugs for treatment of common poisonings
- 10) Should know about which drugs patient is already receiving for Diabetis Mellitus & Hypertension so that which drugs should be stopped before dental treatment like Aspirin is stopped before extraction
- 11) During pregnancy, which drugs should be avoided while treating dental problems
- 12) Antibiotics & their combinations as per common causative micro-organisms of oral cavity lesions.
- 13) Broad spectrum antibiotics
- 14) Dental Pharmacology including importance of fluorides, Obtundents, Astringents, Oxidizing agents, Styptics, Mummifying agents, Dentifrices, Mouth rinses, Gum paints etc.
- 15) Adverse drug reactions & Pharmaco vigilance(means identification of adverse Drug reactions by health personnel like doctor, nurses or technician)

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# Subjective & Objective Planning of HIrd BDS Students Evaluation for General Medicine

Student should have knowledge of Gen. Medicine under following heads.

### Practical

#### Long Case :-

Detail history taking of Patient under :-

1) Chief Complaints :-

Proper evaluation of all the complaints of patient by asking relevant questions about that complaint or symptoms.

- 2) Past History :-
- 3) Family History :-
- 4) Personal History :-

Including dietary, bad habits like drinking, smoking etc.

- 5) Allergic History :-
- 6) Previous Treatment :-
- 7) Occupational History :-

### Systemic Examination :-

Detail examination of mainly C.V.S., R.S. & abdomen

#### C.V.S. :-

- Auscultation of heart sounds
- identification of murmur if any
- examination of 7th cranial nerve.
  - Investigations required
  - Treatment planning and advise to be given

#### Short Case :-

- Physical examination of various peripheral signs
- Like examination of radial pulse identification of pallor, cyanosis, clubbing etc.
- Precise & accurate measurement of B.P.

# Identification & Management of Patients having:-

- Syncopal attack
- Anaphylactic shock
- Hypotension
- Hypoglycaemia
- Convulsions

#### O.S.C.E. :-

- Radial pulse examination
- Identification of murmur
- Measurement of B.P.

### O.S.P.E. :-

- Making the patient cooperative with our proper attitude
- Gaining his confidence
- Advise & follow up

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### Subjective and objective planning of 3rd year students evaluation in Oral Pathology and Microbiology

### (Teaching and learning outcomes for Oral Pathology & Microbiology)

### KNOWLEDGE, SKILL and UNDERSTANDING

- Adequate knowledge of basic sciences and principles of biological function that make "Oral Pathology & Microbiology" as a bridge to clinical dentistry.
- \* Adequate knowledge of variation in structure and function of oral and para-oral tissues in health and diseases.
- \* The student should thereby understand and be able to coherently grasp anomalies, lesions and diseases of the mouth and jaws that include development, inflammatory, traumatic and neoplastic besides others.
- \* Adequate knowledge of concept of healing, spread of infection and basic aspects of forensic odontology.
- \* Understand etiological and causal factors of these anomalies/diseases, as well as effect on general and oral health.
- \* Skill to acknowledge interrelationship and association of deficiencies to systemic diseases/disorders and manifestations in oral cavity.
- \* Promote oral health and help prevent oral diseases whenever possible.
- \* Understanding and skill to carry out investigative procedures and ability to interpret laboratory findings.
- \* Should imbibe the concept of histopathology as the core basis of final diagnosis and its significance.
- \* Should develop curiosity for radiological findings and the concept of 'clinicopathological diagnosis'.
- \* Be aware of Advanced Diagnostic Aids that assist in diagnosis.

### Attainment of competancy is achieved via

- Didactic lectures
- Group discussions
- Seminars
- Quiz
- Histopathological slide study
- Histopathological journal/record maintenance
- -Table discussions of gross specimens/anomalies (dry & wet)
- Anti-tobacco sensitisation through pledge, lectures and day celebration.

Timely evaluation of competency achievement is done via internal assessment exams involving both subjective (essay, short answers) and objective (MCQ's)

# OSPE (Objective Structured Practical Examination)

- Histopathological slide/histopathological photo-micrograph.
- Gross specimen/anomaly.
- \* Spotters.

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# ORTHODONTICS SUBJECTIVE AND OBJECTIVE PLANNING OF FINAL YEAR STUDENTS' EVALUATION UNDER FOLLOWING HEADS

### PRECLINICAL EXERCISE: -

- 1. Students should know the fabrication of different components of all appliances.
- 2. They should be able to make clasps, springs, bows for removable appliances.
- 3. They should know fabrication of acrylic base plate and properties of various materials used.
- 4. Students should be able to analyze study models and form a probable diagnosis from it.
- They should be able to perform various cephalometric analysis on a lateral cephalogram anddevelop a probable diagram for treatment.

### CLINICAL EXERCISE: -

- 1. They should be able to make good alginate impressions for study models of an orthodontic patient.
- They should be able to communicate with the patient properly and take thorough case historywhen needed.
- They should be able to examine a patient in an orderly manner.
- They should have knowledge and understanding of various malocclusions to form a different diagnosis.
- They should be able to form bases on study models for record maintenance.

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They should have the ability to guide and manage the patients accordingly.

### TEACHING FACULTY CARRY OUT FOLLOWING METHODS OF TEACHING: -

- 1. Lectures
- 2. Demonstration of wire bending.
- 3. Demonstration of model analysis and cephalometric tracing and analysis.
- 4. Table discussions
- 5. Micro teaching
- 6. Case history recording.
- 7. Impression making.
- 8. Seminars
- 9. MCQ test
- 10. Viva voice

### OSCE (OBJECTIVE STRUCTED CLINICAL EXAMINATION):-

- Case history recording
- 2. Cephalometric interpretation.
- 3. Models' evaluation

# OSPE (OBJECTIVE STRUCTED PRATICAL EXAMINATION): -

- Impression making
- Study model fabrication
- Fabrication of removable appliances and management.
- Identification of all the appliances and armamentarium used for treatment.

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# Subjective and Objective planning of final year students evaluation under following heads

Students should have thorough knowledge of Conservative Dentistry and Endodonties in following heads:

### A. Pre-operative procedure -

- 1. Examination of patient in anorderly manner.
- 11. Ability to record thorough case history of patient.
- III. Thorough clinical examination.

### B. Diagnostic procedure -

- 1. Diagnostic radiograph should be taken.
- 11. Visual and tactile inspection.
- III. Percussion test.
- IV. Palpation.
- Periodontal examination. V.
- Pulp vitality test. E.g. Heat test, cold test, electric pulp testing. VI.
- VII. Bite test.
- Recent pulp vitality tests. e.g. Laser Doppler flowmetry, pulp oximetry etc. VIII.

### C. Treatment -

- Caries removal. 1.
- Cavity preparation for silver amalgam, modified class II MO or DO or Class I with Buccal and П. Lingual extension.
- Base / Lining along with matrix band application. III.
- Permanent filling restoration like amalgam and GIC. IV.
- Knowledge about pain control, LA administration and medications to be given. ٧.
- Emergency endodontic treatment. VI.

### D. Post-treatment -

- Occlusal reduction of restoration. I.
- Finishing and polishing of restoration. 11.
- Follow-up after 24 hours. III.

# E. Complication during treatment –

- Use of water coolant during cavity preparation to prevent pulpal damage. 1.
- Local anesthesia administration. 11.
- Knowledge of emergency medications to be prescribed. III.

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Teaching faculty carry out following methods of teaching:

Lectures

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- Table discussions
- Case history of patients
- One on one discussion with students during clinical postings
- Seminars
- MCQ tests
- Viva
- Chair side evaluation
  - Internal Assessments exams are carried out to evaluate the knowledge and skills of the students.

## OSCE (Objective Structured Clinical Examination)

- Case history recording
- Radiographic Interpretation

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# Subjective and Objective planning of final year students evaluation under following heads

Students should have through knowledge of Oral and MaxillofacialSurgery in following heads:

- Examination of patient with an oral surgical problem in an orderly manner
- Ability to formulate differential diagnosis.
- Ablility to carry out certain minor oral surgical procedures under L.A. like frenectomy, alveolar procedures and biopsy
- Extraction of teeth under both local and general annesthesia,
- Prevention and management of associated complications
- infections injuries, various diseases, the understanding and Knowledge occurring in the Oral & Maxillofacial region
- Ability to provide primary care and manage medicalemergencies

Pre-surgical Evaluation:

Students should be able to recognize existing medical conditions like hepatitis B, diabetes mellitus, hypertension, asthma, anemia, nutritional deficiencies, by way of

- History recording
- Students should be able to identify oral manifestations of systemic diseases and implications of systemic Clinical examination diseases in the surgical patients.

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# Pre-surgical Preparation:

The aim of pre-surgical preparation is to maximize the physical condition of the patient prior to the surgery. This includes:

- Alteration in medications taken by patients
- High protein diet may be instituted in patients with nutritional deficiency to aid in wound healing and body defense.
- Prophylactic medications.

# Control of Pain and Anxiety;

### This includes

- Psychological aspect of pain and anxiety control
- Techniques of administration of Local Anesthesia
- Pharmacokinetics of commonly used drugs in oralsurgery.

### **Examination and Diagnosis:**

### This includes:

- Clinical interpretation
- Physical examination(both intraoral and extraoral)
- Radiographic examination
- Clinical laboratory diagnosis

Emergency Phase: Should be able to prevent and treat medical emergencies.

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Surgical Phase: Students should be efficient enough to carry out extractions (exodontia techniques), minor surgical procedures like frenectomy, alveoloplasty and biopsy.

## Complication Management:

Students should be able to deal with intra-operative and post-operative complications

# Post-operative Management:

Giving proper postoperative instructions and medications and handling post-operative complications if it occurs.

Teaching faculty carry out following methods of teaching:

- Lectures
- Table discussion
- Case history of patients
- One on one discussion with students during clinical posting
- Seminars
- MCQ test
- Viva

Internal Assessments exams are carried out to evaluate the knowledge and skills of the students. Chair side evaluation

# OSCE (Objective Structured Clinical Examination)

- Case history recording
- Radiographic Interpretation
- Evaluation of systemic status of the patients.

## OSPE (Objective Structured Practical Examination)

- Local Anesthesia administration technique
- Chair Positioning
- Identification and application of instruments
- Post-operative instructions

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# Subjective and objective planning of final year students evaluation under following heads Final year students should have thorough knowledge of pediatric dentistry in following heads

- Histology, anatomy, physiology, morphological differences as well as developmental anomalies . pathology, identification and implementation from predentate period to permanent
- To have knowledge and importance of primary teeth and its associated diseases. And itsimpact on oral and general health and ability to explain to the parents of pedo patients

### Preventive dentistry

- ☐ Final year students should know importance as well as implications of preventivemeasures
  - Fluoride application
  - Pit fissure sealant
  - Counselling Oral hygiene measures
  - Diet counselling

### Preparatory

Final year students should know

- Dental and oral diseases like
  - o Caries
    - Rampant caries
    - Early childhood caries
- To know the pathology of various soft tissue lesions
- Gingival and periodontal diseases
- Space infections
- Facial swellings
- Render emergency care

### Corrective phase

Final year students should have knowledge of

- Space maintainers
- Crowns
- Permanent restorations
- Early correction of various habits through interceptive orthopedic appliance
- Minimally invasive dentistry
- Dental home
- First dental visit of child
- How to treat child with special health care needs Pharmacological and non-pharmacological behavior management technique

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Teaching faculty provide knowledge of pediatric dentistry through given topics to students by following methods

- Lectures
- Table discussions
- Case history of patients
- Viva
- Seminar
- MCQ test
- Case discussion
- Chairside evaluations

Timely evaluation by internal assessment exam

□ Performance achieve in theoretical and practical exam

### OSCE (Objective Structured Clinical Examination)

- ☐ Fluoride application
- ☐ Class I cavity cutting

The objective structured practical examination (OSPE)

- Spotting of appliances
- ☐ X ray inter-pretention

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# Subjective and objective planning of final year students evaluation under following heads

Final year students should have thorough knowledge of Periodontics in following heads

- Histology, anatomy, physiology, morphological differences as well as developmental anomalies, pathology, microbiology, immunology related to periodontal tissues.
- To have knowledge and importance of periodontium and its associated diseases and its impact on oral and general health and ability to explain to the patients.

### Emergency phase

- Emergency pain management
  - Abscess management
  - Extraction of mobile teeth

### Preliminary phase

- Final year students should know importance as well as implications of preliminary phase like
  - Case history record
    - To know the pathology of various soft tissue lesions
    - Gingival and periodontal diseases
    - Space infections
    - Facial swellings
    - Render emergency care
  - Scaling and root planing
  - Counselling of patient for different Oral hygiene measures
  - Diet counselling
  - Caries excavation and restoration
  - o splinting

### Surgical Phase

Final year students should know

- Revaluation of periodontal status after scaling
- Identification of periodontal surgical procedure to treat patient.
  - Flap surgery
  - Mucogingival surgery
  - Osseous surgery

### Restorativephase

Final year students should have knowledge of

- Permanent restorations
- Replacement of missing teeth

### Maintenance phase

- Revaluation of periodontal parameters like probing pocket depth, Clinical attachment loss, gingival condition, oral hygiene index.
- Importance of recall interval.
- Reinforcement of oral hygiene measures and motivation of patient for the same.

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Lectures

- Table discussions
- Case history of patients
- Viva
- Seminar
- MCQ test
- Case discussion
- Chairside evaluations

Timely evaluation by internal assessment exam

Performance achieved in theoretical and practical exam

Objective Structured Clinical Examination (OSCE)

- Case history record

Objective structured practical examination (OSPE)

Scaling and root planing

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# Subjective and Objective planning of final year Students evaluation

Students should have through knowledge of Public Health dentistry in following heads:

### FIELD PROGRAMME

- In rural areas to conduct survey of Dental diseases. Provide Dental Health Education, emergency treatment.
- School-Health programme, Dental Care for school children and preventive programme. Topical fluoride application and oral hygiene demonstrations.

### Knowledge

- Apply basic sciences knowledge regarding etiology, diagnosis and management of the prevention, promotion
  and treatment of all the oral conditions at the individual and community level.
- Identify social, economic, environmental and emotional determinants in a given individual patient or a community for the purpose of planning arid execution of Community Oral Health Program.
- Ability to conduct Oral Health Surveys in order to identify all the oral health problems affecting the community and find solutions using multi - disciplinary approach.

### Skills

The candidate should be able to:

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- Take history, conduct clinical examination including all diagnostic procedures to arrive at diagnosis at the
  individual level and conduct survey of the community at state and national level of all conditions related to oral
  health to arrive at community diagnosis.
- Plan and perform all necessary treatment, prevention and promotion of Oral Health at the individual and community level.
- 3. Conduct survey and use appropriate methods to impart Oral Health Education.

#### Values

- 1. Adopt ethical principles in all aspects of Community Oral Health Activities
- Develop communication skills, in particular to explain the causes and prevention of oral diseases to the patient.

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# DEPARTMENT OF PROSTHETIC DENTISTRY

Subjective and Objective planning of first- to-final yearStudents evaluation under following

Students should have thorough knowledge of Prosthetic dentistry infollowing heads:

### History and examination:

1. Take a proper clinical history, examine the patient, perform essential diagnostic procedure and other relevant tests and interpret them to come to a reasonable diagnosis about the condition.

2. Acquire adequate skills and competence in performing various procedures required in the competence.

The candidate should be able to examine the patients requiring Prosthodontics therapy, investigate the patient systemically, analyzethe investigation results, radiography, diagnose the ailment, plan a treatment, communicate it with the patient and execute it.

Understand the prevalence and prevention of diseases of craniomandibular system related to Prosthetic dentistry.

5. The candidate should be able to restore lost functions of stomatognathic system namely mastication, speech, appearance and psychological comforts.

6. By understanding biological, biomedical, bioengineering principles and systemic condition of the patient to provide a quality health careof the craniofacial region.

7. The candidate should be able to interact with other specialty including medical speciality for a planned team management of patients for a craniofacial and oral acquired and congenital defects, temporomandibular joint syndromes, esthetics, Implant supported Prosthetics and problems of Psychogenic origin,

Should be able to demonstrate the clinical competence necessary tocarry out appropriate treatment at higher level of knowledge, training and practice skills currently available in their specialty area.

Identify target diseases and awareness amongst the population for Prosthodontic therapy.

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11. Laboratory technique management based on skills and knowledge of Dental Materials and dental equipment

12. To understand demographic distribution and target diseases of Cranio mandibular region related to

# Examination and Diagnosis:

### This includes:

- Clinical interpretation
- Physical examination (both intraoral and extraoral)
- Radiographic examination
- Clinical laboratory diagnosis

## Pre-prosthetic Evaluation:

Students should be able to recognize existing medical conditions like hepatitis B, diabetes mellitus,

- History recording
- Clinical examination

Students should be able to identify oral manifestations of systemic diseases and implications of systemic diseases in the surgical patients.

## Pre-Prosthetic Surgery:

The aim of pre-prosthetic preparation is to maximize the physical condition of the patient prior to the prosthesis fabrication.

Students should be efficient enough to identify the need of extractions, minor surgical procedures like frenectomy, alveoloplasty and biopsy.

### This also includes:

- Alteration in medications taken by patients,
- High protein diet may be instituted in patients with nutritional deficiency to aid in wound healing
- Prophylactic medications.

## Psychological attitudes of patients:

### This includes

- Psychological aspect of anxiety control
- Philosophic, skeptical, indifferent, exacting personalities

Emergency Phase:

Should be able to prevent and treat medical emergencies

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# DENTAL MATERIALS:

- 1. Physical properties, manipulation and handling of dentalmaterials
- 2. Impression materials
- 3. Dental waxes
- Gypsum products
- Die materials.
- Investment matrerials
- 7. Luting agents
- 8. Ceramics
- 9. Implant materials

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# Prosthetic Phase:

# COMPLETE DENTURE

- 1. Microscopic and macroscopic structures of maxilla andmandible
- 2. Impressions in complete denture
- 3. Border molding and posterior palatal scal
- 4. Secondary impression material
- 5. Jaw relations
- 6. Selection of teeth
- Articulation
- 8. Balanced occlusion
- 9. Try-in
- 10. Post-insertion instruction in complete denture
- 11. Relining and rebasing
- 12. Case history in fixed partial dentures
- 13. Principles of tooth preparation
- 14. Pouring of primary cast by Inversion method, Pouring of primary cast by Beading and
- 15. Preparation of custom tray
- 16. Preparation of temporary denture base
- 17. Making of occlusal rims
- 18. Orientation and securing Jaw relation records to thearticulator
- 19. Arrangement of artificial teeth in the mean valuearticulator
- 20. Processing of dentures
- 21. Microscopic and macroscopic structures of maxilla andmandible
- 22. Impressions in complete denture
- Border molding and posterior palatal seal 23.
- 24. Secondary impression material
- 25. Jaw relations
- Selection of teeth 26.

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- 27. Articulation
- Balanced occlusion 28.
- 29. Try-in
- 30. Post-insertion instruction in complete denture
- Relining and rebasing 31.

# FIXED PARTIAL DENTURE

- 1. Case history in fixed partial dentures
- 2. Principles of tooth preparation
- 3. Steps in preparation of crowns.

## REMOVABLE PARTIAL DENTURE

- Pouring of primary cast by Inversion method
- 2. Pouring of primary cast by Beading and Boxing
- 3. Preparation of custom tray
- Preparation of temporary denture base
- 5. Making of occlusal rims
- 6. Orientation and securing Jaw relation records to the articulator
- 7. Arrangement of artificial teeth in the mean value articulator
- 8. Processing of dentures

## Maxillofacial Prosthodontics

- Impression materials and recording
- Retention aids 2.
- Eye, ear, nose, guide flange, splints and stents prosthesis

# Prosthetic Driven Implantolgy

- Implant material 1.
- Single tooth implant
- Implant overdentures 2.
- Implant supported bridge 3.
- Occlusion in implantology 5.





# Post-operative Management:

Giving proper postoperative complications if it occurs. andhandling postinstructions medications and

Teaching faculty carry out following methods of teaching:

- Table discussion
- Case history of patients
- One on one discussion with students during clinical posting
- MCQ test
- Viva
- Chair side evaluation

Internal Assessment exams are carried out to evaluate theknowledge and skills of the

# OSCE(Objective Structured Clinical Examination)

- Case history recording
- Radiographic Interpretation
- Evaluation of systemic status of the patient.
- Prosthodontic evaluation and treatment

## OSPE(Objective Structured Practical Examination)

- Handling of dental materials and prosthodontics rehabilitation
- Chair Positioning
- Identification and application of dental materials and instruments
- Post-prosthodontic rehabilitation instructions.

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# Subjective and objective planningof final year students evaluation in OMDR underfollowingheads.

# Clinical/Medicine

## Short case

-Case history taking including demographic data, chief complaint, past medical history, past dental history, history of present illness, extraoral and intraoral examination. On the basis of above findings formulating provisional diagnosis.

Advice appropriate investigation and arriving at final diagnosis. Advice treatment planning on the basis of final diagnosis.

### Long case

Case history taking including personal data, chief complaint, history of present illness, past medical history, past dental history, drug history, family history, personal history.

Extra oral examination (Facial profile, lymph-nodes, TMJ,muscles of mastication) and intra oral examination.

Detailed examination or description of the lesion.

Formulate provisional diagnosis and differential diagnosis. Advice investigations and arrive at final diagnosis and suggesttreatment planning.

State prognosis and follow up of patients for regular check ups.

### Radiology

Follow steps of radiograph taking, right from chair position, patient positioning, placement and stabilisation of film insidepatient's oral cavity and making exposure.

Knowledge of all exposure parameters for all tooth types.

Dark Room procedures - Development and fixation of the exposed film.

Complete knowledge of all anatomical landmarks and normal structure present in radiograph. Interpretation of the tooth or pathology present in a radiograph. Identification of the extra oral radiograph along with their indications and contraindications.

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