CALENDAR 2012-13

College Calendar designed and executed by
Dr. K.S. G.A. Nasser, Principal
Dr. P. Rupkumar
Dr. G. Sriramapabhu
Dr. R.Supraja (C.R.R.I.)

CONTENTS

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. PERSONAL DETAILS</td>
<td>4</td>
</tr>
<tr>
<td>2. THE HIPPOCRATIC OATH</td>
<td>5</td>
</tr>
<tr>
<td>3. DESCRIPTION OF THE EMBLEM</td>
<td>6</td>
</tr>
<tr>
<td>4. HISTORY OF THE INSTITUTION</td>
<td>7</td>
</tr>
<tr>
<td>5. FACULTY MEMBERS</td>
<td>11</td>
</tr>
<tr>
<td>6. LIST OF DENTAL INSTITUTIONS IN TAMIL NADU</td>
<td>16</td>
</tr>
<tr>
<td>7. LIST OF COURSES OFFERED</td>
<td>17</td>
</tr>
<tr>
<td>8. FEES PARTICULARS</td>
<td>18</td>
</tr>
<tr>
<td>9. TIME TABLE</td>
<td>19</td>
</tr>
<tr>
<td>10. SYLLABUS</td>
<td>27</td>
</tr>
<tr>
<td>11. EXAMINATION PATTERN</td>
<td>78</td>
</tr>
<tr>
<td>12. LIST OF BDS CANDIDATES PASSED IN FEB 2011</td>
<td>80</td>
</tr>
<tr>
<td>13. LIST OF BDS CANDIDATES PASSED IN AUG 2010</td>
<td>81</td>
</tr>
<tr>
<td>14. LIST OF MDS CANDIDATES PASSED IN MAR 2011</td>
<td>84</td>
</tr>
</tbody>
</table>
1. PERSONAL DETAILS

NAME: ......................................................................................................................

FATHER'S NAME :..............................................................................................

REGISTRATION NUMBER: ................................................................................

DESIGNATION: ....................................................................................................

YEAR OF STUDY: .................................................................................................

ADDRESS:
TEMPORARY: ........................................................................................................
..............................................................................................................................
..............................................................................................................................

PERMANENT: ........................................................................................................
..............................................................................................................................
..............................................................................................................................
..............................................................................................................................

PHONE NO: ........................................ MOBILE: ........................................

BLOOD GROUP: ......................................................................................................

ALLERGIC TO: .....................................................................................................

VEHICLE NO: ........................................................................................................

DRIVING LICENCE NUMBER: ............................................................................

IN THE EVENT OF EMERGENCY, PERSON TO CONTACT.

ADDRESS: ................................................................................................................
..............................................................................................................................
..............................................................................................................................
..............................................................................................................................

PHONE NO: ........................................................................................................

2. HIPPOCRATIC OATH

I Swear that I will follow
that system of regimen
which according to my ability and judgement,
I consider for the benefit of my patients,
and abstain from whatever is deleterious and mischievous

I will give no deadly medicine to anyone even if asked
nor suggest any such counsel
with purity and holiness,
I will pass my life and practice my art
Into whichever houses I enter,
I will go into them for the benefit of the sick,
and will abstain from every voluntary act of mischief and corruption,
and all actions in connection with it.

What I see or hear in the life of men
which ought not to be spoken of abroad
I will not divulge as reckoning that all such should be kept secret
while I continue to keep this oath unviolated,
may it be granted to me, to enjoy life
And the practice of the art respected by all man at all times.
But should I trespass and violate this oath,
may the reverse be my lot.

3. DESCRIPTION OF THE EMBLEM

THE TUSKER:
The elephant has been selected to symbolically represent the dental profession. With its large tusks and gentle nature, it is an ideal mascot, seen prominently on many emblems associated with the dental profession, including those of the Indian Dental Association and the Dental Council of India.

CADUCEUS:
(The staff of mercury) It was originally the staff of Aesculapius, the emblem of the medical profession all around the world. The staff of Aesculapius has been represented by the trunk of the elephant to symbolize medico-dental harmony.

BOOK AND LIGHT:
The book and the light represent the inextinguishable thirst for knowledge

THE TEMPLE:
The awe inspiring, beautiful temple is a symbol of the TamilNadu State Government which finances the Government Dental College.
ROUNDED PETALS:
Numbering ten on either side, the rounded petals represent the deciduous teeth.

DUTY, DIGNITY AND DISCIPLINE:
These attributes are of prime importance in moulding character in all individuals, more so in those associated with the dental profession.

THE THIRTY TWO LEAVED WREATH:
The thirty two leaved wreaths represents the thirty two permanent teeth which form the base of the dental profession.

4. HISTORY OF TAMILNADU GOVERNMENT DENTAL COLLEGE AND HOSPITAL

Dentistry, like all civilizations of the human race, began at the dawn of history. Even the neolithic man has been reported to have practiced extraction of teeth. Ancient Indian ayurvedic literature contains many interesting observations about dental diseases and their treatment. Susrutha, the ancient Indian Sage has been universally acknowledged as the first dental anatomist of the world. Dentists figure prominently in the medical history of Rome. In fact, one of the laws of the twelve tables has direct dealing with the dental profession stating that no gold was to be buried with the corpse except that which was ‘fastened to the tooth’. The word ‘dentist’ is derived from the Latin word ‘dentista’ and was first used by Pierre Fauchard of France, who is considered the father of Modern Dentistry.

PROGRESS OF DENTAL SCIENCE IN INDIA:
The year 1920 saw the first milestone in the progress of dental education in India when a full fledged autonomous institution was founded in Calcutta by the Late Padma Bhushan, Dr. Rafuddin Ahmed.

DENTISTS ACT 1948:
The All India Dental Journal and IDA Review provided an effective medium for the publication of the scientific advances and stressed the need for ethical practice in the field of Dentistry.

The Dental Act in 1948 proved a turning point in the history of dental education and enforced the practice of dentistry in a regulated, systematic manner. The act stipulated that the practice of dentistry without registration was a punishable offence and also helped to standardize the growing educational requirements of dentistry. This was followed by the formation of the Dental Council of India in 1949, at the central and state levels.

HISTORY OF DENTISTRY IN MADRAS PRESIDENCY:
In 1935, Dr. H. Venkata Rao, started the first dental college in Madras which was named the ‘Madras Dental College & Hospital’ but it closed in 1942. A few years later, during the early forties, Dr. H.M. Rao, a medical practitioner obtained the DDS qualification from the USA and started the ‘American Dental College’ in Madras. The institution was well equipped and the course methodically organized. This institution was the only scientifically standardized school at that time and produced many successful practitioners. This college again, was unfortunately shut down due to the untimely demise of its principal Dr.H.M.Rao.

The origin of the Dental Department in the Government Hospital dates back to 1883 when the Madras Education Department initiated a clinic in the government hospital for treating patients with dental problems and it was run by a Royal Army Dental Assistant. Several decades later, a civil surgeon’s post was created and a succession of qualified people were recruited as Professors of Dental Surgery, Madras Medical College and Dental Surgeons, Government General Hospital. They attended to the hospital duties and also taught the medical students minor dental procedures.

The Government of India in 1943 instituted a health survey community headed by Sir Joseph Bhore to furnish suggestions for augmenting health services in the country. This committee recommended the improvement of dental services and the establishment of dental colleges to obtain the necessary qualified personnel.

The Indian Dental Association, supported the Bhore recommendations and made repeated representations to the Government for establishing a dental institution in Madras. The Madras Dental Council was constituted on 2nd February 1951 and simultaneously petitioned to the Government to start the BDS course. The Government of Madras accepted the request and senior professors of the dental wing were posted abroad for higher training.

SEMINARS AND VISITING PROFESSORS:
The Dental Wing of MMC was fortunate to have many dental teachers from various parts of the world to exchange information and conduct seminars for the benefit of the P.G. students. Their researches, the results of various seminars and symposiums have been adequately documented and have been presented at various national and international conferences.

RESEARCH PROGRAMMES:
In 1963, the first research program under the guidance of the PL480, with American aid of 4.5 lakhs was initiated at the Dental Wing, MMC and proved to be a milestone in the field of Periodontics in South India. In addition, schemes like the SRC funds are utilized for Research Programmes and are widely appreciated.

HISTORY OF THE COLLEGE:
The Dental Wing of Madras Medical College came into existence on 8th October, 1953. Fifteen candidates were selected on the basis of representation from Kerala, Karnataka, Tamil Nadu and Andhra Pradesh. The number of admissions was increased to meet the shortage of dental surgeons in the state later. There was a progressive expansion in the staffing pattern with the creation of various specialties and the work load correspondingly increased due to the paucity of space and on the recommendation of the Dental Council of India, a separate building was constructed and started functioning from 1961 in the new premises.

In the year 1954, the number admitted to the BDS course was increased from fifteen to eighteen and in 1956 it was increased to twenty and periodically increased to the present 100 seats as per the recommendations of the Dental Council of India. Regarding the need for more space, the Govt. of Tamil Nadu accepted the petition for the construction of a separate building under the second five year programme. The construction began in the year 1958 and was completed by 1961 (the present building).

PG courses began in the year 1966. Initially, the Post Graduation Programme was in the department of Oral Medicine and Periodontics which was later followed by its commencement in the departments of Conservative Dentistry, Orthodontics, Prosthodontics, Oral Surgery and Oral Pathology. MDS courses in Public Health Dentistry began in the Academic year 2007 - 2008.
During separation, the Dean of Madras Medical College was relieved of charge and Dr. B.P. Rajan was appointed as the Principal. It was affiliated to Madras University and later all the medical colleges and the Dental Colleges were shifted to The Tamil Nadu M.G.R. Medical University. From then onwards, the Madras Dental College and Hospital has been functioning with excellence to maintain the dignity and honor of the dental profession and educating hundreds of dental students throughout Tamil Nadu and all over India. Today many of the students from this Institution are faculty members in leading institutions all over the world, serving in Government Hospital Services and Indian Administrative Services. Some of our past college students are Chancellors and Vice Chancellors of Universities.

The years have also seen a rapid development in rural hospital services and the appointment of dental surgeons at various districts and taluk head quarters hospitals which was possible due to the availability of graduates from the Dental Wing of Madras Medical College. Later, the Government instituted MDS degree in various specialties and auxiliary courses namely the dental mechanics and dental hygienists courses.

SCHOLARSHIPS:

Scholarships for the socially and economically backward are awarded every year and a book bank is available in the college exclusively for their use.

HANUMANTHA RAO P.G. LAB

A laboratory for post graduates specialising in Prosthodontics is functioning since 1983 with all the necessary equipments funded by the Hanumantha Rao Trust and is hence, called the Hanumantha Rao Lab.

A plea was made at the time to grant independent status to the college on grounds of administrative efficiency and productivity which resulted in the college becoming independent. However the hostel facilities, teaching of basic subjects, the operation and ward facilities are fortunately still associated with the Madras Medical College and Government General Hospital.

SILVER JUBILEE CELEBRATIONS:

The Silver Jubilee celebrations were organized at the Madras Medical College in 1978 and the function was inaugurated by the Chief Minister, Shri M.G.Ramachandran. While celebrating the Silver Jubilee of Dental Wing in 1978, a proposal was submitted which was accepted by the Government and an order was passed stating the separation of Dental Wing from the Madras Medical College forming an Independent Dental College with an Independent Budget from 3rd October. Inauguration of Madras Dental College was done by His Excellency Prabhudas Patwari the Governor of Tamil Nadu on 26th February 1980.

GOLDEN JUBILEE CELEBRATIONS:

The year 2003 was the Golden Jubilee year of Tamil Nadu Government Dental College. The Golden Jubilee celebration was inaugurated by the Honorable Health Minister, Health Secretary, and Director of Medical Education. The first (1953) Batch of students of Tamil Nadu Government Dental College were felicitated. The 50th year college magazine was released & the cultural programmes & sports were conducted in a vibrant fashion.

TAMIL NADU GOVERNMENT DENTAL COLLEGE & HOSPITAL:

In the year 1992, the institution was renamed as the Tamil Nadu Government Dental College and Hospital and was affiliated to the Tamil Nadu Dr. M.G.R. Medical University, Chennai.

New Building

To fulfill one of the conditions of the Dental Council of India and to accommodate the facilities for the Students and to meet the needs for increasing the number of seats for BDS & MDS courses, the Tamil Nadu Government has allotted the land at the Old MUC (MADRAS UNITED CLUB).

The Government has issued a G.O. No. 309, Revenue Department, 27/4/2006 which states that 52 grounds 1385 sq.ft. have been allotted in the Survey No. 101161 for construction of the building for TNGDC & Hospital.

G.O. No. 15, Health & Family Welfare Dept., 18/1/2008, states that the construction of new multi storeyed building will be at a cost of Rs.13.66 crores/administrative/financial sanction-order was issued.

To get this land various IAS officers like Mr. Audiseshaiah IAS, Mr. Sundara Devan, IAS, Dr. M. Rajaram IAS, Mrs. Sheila Rani Chunkath IAS have helped in getting the land. Out of this Mr. Audiseshaiah was the key person who played the major role in getting the land and issued the order as Revenue Secretary. The Tamil Nadu Government Dental College should ever be thankful to the above officers for their timely help otherwise the college could not have obtained the land.

A sum of Rs. 6.97 crores was sanctioned by G.O.Ms. No. 373 H&FW (J1) Dept. dated 31.12.2010 to provide various provisions such as Four Lifts, Gas connection Ductable A/C Units, Name Board, Well, Lawn & garden, Pavement and Drain, Generator Room, Air Compressor Room, Canteen Block, Gas Room, LPG connection, Generator, Audio Video System, Stainless Steel plate for Operation Theatre and for other accessories.

Tamil Nadu Govt. Dental College & Hospital should be thankful to Thiru V.K. Shanmugam, Finance Secretary and Dr. Vijay Pingalay, I.A.S. Deputy Secretary, Finance Department and other Senior I.A.S. officials for their timely help.

The Principal Secretary Health and Family Welfare department Mrs. Girija Vaidyanathan I.A.S. made a visit to the college on 03-02-2012 and verified the Infra structure facilities and appreciated the cleanliness of the college and promised to improve the Infra structure facilities as per the new Dental Council of India norms. In addition to this she has directed to send the proposal to buy the electrical Dental chairs. She along with the Director of medical Education Dr. Vamsadhara made a visit to the new Building.

The new building was also inspected by Hon’ble Minister of Public Works Department Mr. K.V. Ramalingam, Hon’ble Minister of Labour Mr. S.T. Chellapandian and Hon’ble Minister of Health Dr. V.S. Vijay.

The New building was constructed with 3 floors, 4 lifts and ramps. The stilt floor has got 3316.62 Sq.m, the ground floor has got 3280 Sq.m and the first floor has got 3130.05 Sq.m.

The new building has got 4 entrances, 2 staircases totally 9726.67 Sq.m. The stilt floor has laboratories, library, examination hall, Department of Periodontia, Department of oral pathology, cobalt chrome laboratory and the Main Store room. The ground floor has Department of Oral
Medicine and Radiology, Department of Public Health Dentistry, Department of Prosthodontics, Department of Conservative Dentistry. The first floor has Department of Maxillo facial surgery, Department of orthodontia, Department of Paedodontia, VIP clinic, Principal’s Chamber, and office room.

The Entire Excellent Elevated Building was Inaugurated by our Hon’ble Chief Minister Selvi J Jayalalitha on 03-03-2012 at 1.50 PM through video conferencing. Our Principal Dr.K.S.G.A.Nasser gave an elegant introductory speech in Tamil to our Hon’ble Chief minister about the number of Out-patients in our college as 326450in last year2011, presence of NCC, NSS, And Red Ribbon Club was mentioned and in addition to this our II year student K. Deepthi gave an excellent presentation in English about the college to our Hon’ble Chief Minister.

In addition to this our Hon’ble Chief Minister looking at the performance of the college she has announced Rupees 10crores and declared our college as the Centre of Excellence In Dentistry.

Based on the performance of the only one Government dental college the Hon’ble Chief Minister has made the Statement under rule 110 of Tamil Nadu Assembly Secretariat rules on 20 -04 -2012 to establish the Centre of Excellence in dentistry at Tamil Nadu Government Dental College at cost of 10crores with the development of Infrastructure, creation of New posts and thereby the public and the students will be benefitted.

It has been planned to construct one more floor with facilities for a good Major Operation Theatre, students Auditorium and 2 class rooms. In addition to this the college will have increase in number of posts and equipments to upgrade it as Centre of excellence in Dentistry.

Our Hon’ble Chief Minister is kind enough to sanction 149 Electrical Dental Chairs for the new building at a cost of rupees 1crore 24 lakhs and 75 thousand only. This is first time in the History of dental college wherein the college is being moved to the new building inaugurated by our Hon’ble Chief Minister declared the college as the Centre of Excellence, creation of new posts in Reader, Assistant Professors, Staff Nurses, Medical Record Technician & Biostatistician and bought 149 electrical dental chairs.

CONCLUSION:
The Tamil Nadu Government Dental College and Hospital has created the right atmosphere to help students cope with changes in materials, processes and techniques and has prepared them to meet the expectations of patients undergoing dental treatment. The college has a tradition of laying emphasis on providing students with all the tools for learning and resources possible. With their impressive education, the Dental College students are fully equipped to face the challenges of the future with confidence.

Over the years, there have been many people, who have been responsible for the growth and development of the college. It is not possible to identify them by name, but we salute them all.

STATISTICS:
TNGDC takes pride in creating health care professionals who are competent and efficient. At the forefront is the innovative curriculum that aims to provide patient centered education. Their extensive clinical experience enhances the education.

Number of patients treated in the year:

<table>
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<th>Year</th>
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<td>2005</td>
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</tr>
<tr>
<td>2006</td>
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<tr>
<td>2007</td>
<td>2, 85,910</td>
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<tr>
<td>2008</td>
<td>3, 77,042</td>
</tr>
<tr>
<td>2009</td>
<td>3, 80,595</td>
</tr>
<tr>
<td>2010</td>
<td>3,13003 (without camp &amp; EC)</td>
</tr>
<tr>
<td>2011</td>
<td>3,26,465 (EC-2510)</td>
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5. FACULTY MEMBERS

TAMILNADU GOVERNMENT DENTAL COLLEGE AND HOSPITAL, CHENNAI-3.
Dr. K.S.GAMAL ABDUL NASSER : Principal
Dr. M.C. SAINATH : Vice Principal

DEPARTMENT OF ORAL MEDICINE AND RADIOLOGY:
Dr. S. JAYACHANDRAN : Professor & HOD
Dr. G. MURALI GOPIKAR MANOHARAN : Professor
Dr. L. KAYAL : Civil Sur. & Reader
Dr. P. REGU : Asst. Professor

DEPARTMENT OF ORAL AND MAXILLOFACIAL SURGERY:
Dr. G. UMA MAHESWARI : Professor & HOD
Dr. B. SARAVANAN : Professor
Dr. B. Durairaj : Associate Professor
Dr. G. Suresh Kumar : Asst. Professor
Dr. S. B. Sethurajan : Asst. Professor
Dr. S. Vinayakam : Asst. Professor
Dr. D. Karthikeyan : Asst. Professor

DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPAEDICS:
Dr. M. C. Sainath : Professor & HOD
Dr. G. Vimala : Professor
Dr. S. Prem Kumar : Associate Professor
Dr. P. Bala Shanmugam : Assistant Professor
Dr. K. Usha : Assistant Professor
Dr. G. Usha Rao : Assistant Professor

DEPARTMENT OF CONSERVATIVE DENTISTRY AND ENDOdontICS:
Dr. M. Kavitha : Professor & HOD
Dr. S. Jai Kailash : Associate Professor
Dr. P. Ramaprabha : Associate Professor
Dr. K. Amudhalakshmi : Civil Sur. & Asst. Professor
Dr. P. Shakuntala : Assistant Professor
Dr. A. Nandini : Assistant Professor
Dr. D. Arunraj : Assistant Professor
Dr. G. Vinodh : Assistant Professor
Dr. Sharmila M. S. : Assistant Professor

DEPARTMENT OF ORAL PATHOLOGY:
Dr. I. Ponniah : Professor & HOD
Dr. R. Bharathi : Associate Professor
Dr. N. Gnana Deepam : Assistant Professor
Dr. Sumathi : Assistant Professor

DEPARTMENT OF PROSTHODONTICS:
Dr. C. Thulasisingam : Professor & HOD
Dr. A. Meenakshi : Professor
Dr. C. Sabari Girinathan : Associate Professor
Dr. P. Rup Kumar : Assistant Professor
Dr. T. Jayanthi Kumari : Assistant Professor
Dr. G. Sri Ram Prabhu : Assistant Professor
Dr. G. Gomathi : Assistant Professor
Dr. K. Ramkumar : Assistant Professor
Dr. M. Kanmani : Assistant Professor
Dr. V. Harishnath : Assistant Professor

DEPARTMENT OF PERIODONTICS:
Dr. K. Malathi : Professor & HOD
Dr. S. Kalaiyani : Professor
Dr. Maheashwari Rajendran : Professor
Dr. M. Jeeva Rekha : Assistant Professor
Dr. A. Muthukumaraswamy : Assistant Professor
Dr. P. Kavita : Assistant Professor

DEPARTMENT OF PUBLIC HEALTH DENTISTRY:
Dr. M. B. Aswath Narayanan : Professor & HOD
Dr. D. Jayanthi : Assistant Professor
Dr. S. G. Ramesh Kumar : Assistant Professor
Dr. A. LEENA SELVAMARY : Assistant Professor

DEPARTMENT OF PEDODONTICS:
Dr. MOHAMMED IQBAL : Assistant Professor
Dr. SELVARANI : Assistant Professor
Dr. JEYANTHI : Assistant Professor

DEPARTMENT OF GENERAL MEDICINE:
Dr. K. PURUSHOTHAMAN : Associate Professor

LIBRARIAN : Mr. D. KRISHNAMURTHY

NURSING STAFF:
NURSING SUPERINTENDENT: Grade II
Tmt. FATHIMA REHANA

STAFF NURSES:
Tmt. T. THAIYAL NAYAKAM
Tmt. N. USHA RANI
Tmt. P. KANCHANA
Tmt. V. CHANDRA
Tmt. SARADHA
Tmt. R. LEELAVATHY
Tmt. S. VIMALA
Tmt. S. VIJAYA
Tmt. LATHA
Tmt. C. POONGODI SANKARI
Tmt. P. SANGEETHA
Tmt. N. LAKSHMI

MALE NURSING ASSISTANTS:
Thiru. D. MANI
Thiru. SYED KAFEL AHMED

SWEEPERS:
Tmt. E. MUNIAMMAL
Thiru MAHESAN
Thiru K. BABU
Tmt. KOUSALYA

FEMALE SANITARY WORKERS:
Tmt. BAVANI
Tmt. BHAVANI
Tmt. JYOTHI
Tmt. G. KARPAKAM

MALE SANITARY WORKERS:
Thiru K. C. PERUMAL
Thiru S. BHASKAR
Thiru RAMESH
Thiru S. KUMAR

LASCAR : Tmt. DEVAKI
GARDENER : Tmt. SUMATHI
ELECTRICIAN : Thiru. V. SRINIVASAN
N.M.R. WORKER : Thiru. SURESH
PLUMBER : Thiru. K. UDAYA KUMAR
GAS MAN : Thiru. GIRIS ANTONY MICHAEL
DRIVER : Thiru. D. DILLI
LIFT ATTENDANT : 
WATCHMAN : Thiru. SASI KUMAR
HOSPITAL WORKER: Thiru. PUNNIYA VEL

OFFICE STAFF:

1. JUNIOR ADMIN. OFFICER: 

2. OFFICE SUPERINTENDENT: Tmt. T.KALYANI
   Tmt. V.TAMILSELVI

3. ASSISTANT: Thiru. R.JAYAPRAKASH

4. JUNIOR ASSISTANT: Tmt. S.JYOTHI

5. STENO TYPIST: Thiru. SHANTHARAMAN

6. RECORD ASSISTANT: Thiru. B.PARTHASARATHY

7. RECORD CLERK: Thiru. M.MANI

8. OFFICE ASSISTANTS:
   Tmt. S.JYOTHI
   Thiru. SHANTHARAMAN
   Tmt. S.BANUMATHY
   Thiru. M.R.DAMODHARAN

9. TYPIST: Tmt. L.PANDYMEENA

10. TELEPHONE OPERATOR: Thiru. S.N.ENOCH

PARAMEDICAL STAFF:

RADIOGRAPHER: Thiru. SAKTHI GANESH

DARK ROOM ASSISTANT: 

PHARMACIST:
   Smt. FLORENCE PRABAVATHY
   Thiru. T.Venkateswaran

PHOTOGRAPHER: 

LAB TECHNICIAN GRADE-I: Tmt. G.MEENAKSHI

LAB TECHNICIAN GRADE-II: Tmt. HILDA MARGARET

DENTAL MECHANICS: Tmt. M.PARIMALADEVI
   Thiru. A. GOWRI SHANKAR
   Thiru. G.SENTHIL
   Thiru. P.D. EBENEZAR SAMUEL
   Thiru. R.SUDHAKAR
   Thiru. V.MANIVEL

DENTAL HYGIENIST:
   Tmt. MANJULA
   Tmt. THENMOZHI

PWD STAFF:

ASSISTANT ENGINEER (CIVIL): Thiru. VENKATACHALAM

JUNIOR ENGINEER (ELEC.): Thiru. GOPALAKRISHNAN

HIGH TENSION OPERATOR: Thiru. ANANDAVEL

WORKS INSPECTOR: Thiru. MADHAVAN

ASSISTANT EXECUTIVE ENGINEER: Thiru. PANDIARAJ

6. LIST OF DENTAL INSTITUTIONS IN TAMIL NADU

I. GOVERNMENT DENTAL COLLEGE:
   1. TAMIL NADU GOVERNMENT DENTAL COLLEGE AND HOSPITAL
      CHENNAI - 600 003; PH: 044-25340441, 25340343, 25341342

II PRIVATE DENTAL COLLEGES:
   1. ADHIPARASAKTHI DENTAL COLLEGE AND HOSPITAL
      MELMARUVATHUR - 603319; PH: 04115-229628, 229230
   2. BEST DENTAL SCIENCE COLLEGE
      MADURAI - 625 020; PH: 0452-2423291, 2423290
   3. CHETTINAD DENTAL COLLEGE & RESEARCH INSTITUTE
      ANNA SALAI, CHENNAI - 600 006.
   4. CSI COLLEGE OF DENTAL SCIENCES & RESEARCH
      MADURAI.
   5. J.K.K NATARAJA DENTAL COLLEGE
      KOMARAPALAYAM - 638183; PH: 04288-260203, 260625
   6. KARPAGA VINAYAGA INSTITUTE OF DENTAL SCIENCES & RESEARCH
      PUDUKKOTTAI - 622 001.
   7. K.S.R.INSTITUTE OF DENTAL SCIENCE AND RESEARCH
      THIRUCHENGODE – 637209; PH: 04288-274761, 274745.
   8. MATHA DENTAL COLLEGE, KUNDRATHUR,
9. MOOKAMBIKA INSTITUTE OF DENTAL SCIENCES
KULASEKHARAM, KANYAKUMARI - 629161;
PH: 04651-2580745, 2580746.
10. MEENAKSHI AMMAL DENTAL COLLEGE AND HOSPITAL
MADURAVOYAL - CHENNAI - 600 095; PH: 044-24872566, 2378552.
11. PRIYADARSHINI DENTAL COLLEGE & HOSPITAL
PANDUR, THIRUVELLUR TALUK & DIST; PH: 044-27650160, 27650161.
12. R.V.S. DENTAL COLLEGE & HOSPITAL
KANNAMPALAYAM, COIMBATORE-641402; PH: 0422-2680744, 26880746.
13. RAGAS DENTAL COLLEGE
UTHANDI, CHENNAI - 602102; PH: 044-22493194.
14. RAJAH MUTHIAH DENTAL COLLEGE AND HOSPITAL
ANNAMAILANAGAR, CHIDAMBARAM - 608 002;
PH: 04144-223080, 238992.
15. RAJAS DENTAL COLLEGE
VAADAKANKULAM, TIRUNELVELI - 627118; PH: 04367-230132, 230163.
16. SAVEETHA DENTAL COLLEGE AND HOSPITAL
VELAPPANCHAVADI, CHENNAI - 600 077; PH: 044-26801583-87.
17. SRI BALAJI DENTAL COLLEGE AND HOSPITAL
PALLIKARANAI, CHENNAI- 601 302; PH: 044-22461883, 22352883.
18. SRI MOOKAMBIKA INSTITUTE OF DENTAL SCIENCES
KANYAKUMARI - 629 101; PH: 04651-277550, 277551,277359.
19. SRI SRI RAMAKRISHNA DENTAL COLLEGE AND HOSPITAL
SIRPUPOOKALAM, KOCHI - 682 012; PH: 0484-2560381, 220075.
20. SRI RAMACHANDRA MEDICAL COLLEGE AND RESEARCH INSTITUTE
PORUR, CHENNAI - 600 116; PH: 044-24768423, 24765625.
21. SRM DENTAL COLLEGE
RAMAPURAM, CHENNAI- 600089; PH: 044-22496526, 24742836.
22. SRI SRI RAMAKRISHNA DENTAL COLLEGE AND HOSPITAL
THALAMBUR, CHENNAI - 603 103; PH: 044-27435061, 27435060.
23. TAGORE DENTAL COLLEGE, RATHINAMANGALAM,
VANDALUR, CHENNAI; PH: 044-28341865, 28341621.
24. THAI MOOGAMBIGAI DENTAL COLLEGE AND HOSPITAL
MADURAVOYAL, CHENNAI - 600 095; PH: 044-281553, 2625101.
25. THE TRICHY RAJAS DENTAL COLLEGE
TRICHIRAPALLI - 620 012; PH: 0431-3205736.
26. VINAYAGA MISSION'S SANKARACHARYA DENTAL COLLEGE
VEERAPANDI, SALEM - 636001; PH: 0427-247738.
27. VIVEKANANDHA DENTAL COLLEGE FOR WOMEN
ELAYAMPALAYAM, NAMAKKAL; PH: 04288-234670.
28. UNIVERSITY DENTAL COLLEGE, SRM NAGAR, KATTANKALTHUR,
TAMILNADU; PH: 044 – 27455715 , 27453433.
29. ASAN MEMORIAL DENTAL COLLEGE & HOSPITAL,
CHENGALPATTU,CHENNAI-603105;PH.NO 044-27448132,27447355.

7. LIST OF COURSES OFFERED IN TAMIL NADU GOVERNMENT DENTAL COLLEGE

1. BDS : 100 Seats
2. MDS : 35 Seats

BRANCH

ORAL & MAXILLOFACIAL SURGERY : 6
CONSERVATIVE DENTISTRY AND ENDODONTICS : 6
ORTHODONTICS : 6
PROSTHODONTICS : 6
ORAL & MAXILLOFACIAL PATHOLOGY : 2
PERIODONTICS : 6
ORAL MEDICINE AND RADIOLOGY : 2
PUBLIC HEALTH DENTISTRY : 1

3. DENTAL MECHANIC : 6
4. DENTAL HYGIENIST : 6
5. Ph.D (Prosthodontics, Oral Medicine and Radiology)

8. FEES PARTICULARS

FEES DETAILS:

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III MECHANIC & HYGIENIST

| TUITION FEES | 240 |
| SPECIAL FEES | 500 |
| LIBRARY FEES | 500 |
| HMF | 500 |
| CAUTION DEPOSIT | 500 |
| TOTAL | 2240 |

IV Ph.D FEES- 15,000

9. TIME TABLE

FIRST BDS TIME TABLE

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<th>Oral Histo. lecture 1-2 p.m</th>
<th>Prosthetic lab 2 - 4 p.m</th>
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<td>Lunch 1-2 p.m</td>
<td>Bio Chemistry lab 2 - 4 p.m</td>
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<td>Oral Histo. lecture 1-2 p.m</td>
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<td>Time</td>
<td>Mon</td>
<td>Tues</td>
<td>Wed</td>
<td>Thurs</td>
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**FINAL BDS TIME TABLE**

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<tr>
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**DENTAL MECHANICS I YEAR**

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DENTAL HYGIENIST I YEAR

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<tr>
<td></td>
<td>2 p.m</td>
<td>ANATOMY</td>
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<tr>
<td></td>
<td>3 p.m</td>
<td>NUTRITION</td>
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DENTAL HYGIENIST II YEAR

<table>
<thead>
<tr>
<th>DAY</th>
<th>TIME</th>
<th>SUBJECTS</th>
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</thead>
<tbody>
<tr>
<td>MONDAY</td>
<td>7.30 a.m</td>
<td>O.P</td>
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<tr>
<td></td>
<td>10.30 a.m</td>
<td>Nutrition &amp; Ethics</td>
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<td>12.00 noon</td>
<td>DENTAL RADIOLGY</td>
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<td>12 noon</td>
<td>CHAIR SIDE REQUIREMENTS &amp; ORAL HEALTH</td>
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<tr>
<td>TUESDAY</td>
<td>1.00 p.m</td>
<td>O.P</td>
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<td>2 p.m</td>
<td>PREVENTIVE DENTISTRY</td>
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<tr>
<td>WEDNESDAY</td>
<td>3 p.m</td>
<td>SOCIAL AND PUBLIC HEALTH DENTAL MATERIAL</td>
</tr>
</tbody>
</table>
|           | 4 p.m      | DENTAL HYGIENIST also have postings for 1 week in all the Department. (Oral Surgery, Oral Medicine, ODS, Ortho, Pedo, Prostho, Conservative Dentistry) During the II year.

10. SYLLABUS

SYLLABUS FOR I YEAR - B.D.S.

ANATOMY - PAPER I

Introduction to Anatomy:
Terms used -
Introduction to Osteology - Epiphyses- Ossification
Introduction to Joints - all types of joints.
Muscles - types-action-terms used.
Nervous system - Central & Peripheral,
Typical Spinal Nerve.
Autonomic Nervous system,

Embryology:
Gametogenesis - The Genital systems of Male and Female
Fertilization - When & Where it occurs & its results
Ectopic & normal Implantation
Development from Zygote to Chorionic vesicle
Formation of Notochord, Neural Tube, Neural Crest
Formation of the Trilaminar Germ Disc.
Foldings of the Embryo
Foetal Membranes - Fundamental idea
Development of Face, Nose, Lips, Oral cavity and Jaw
Development of Branchial arches, Pouches, Clefts & their derivatives.
(tongue, tonsil, Thymus, Thyroid, Parathyroid, Ear Cavities)
Development of Cranium & Vertebrae
Development of the Temporo mandibular Joint
Development of Teeth
Development of the Salivary Glands
Development of Pituitary and Pharynx
Development of the Respiratory Tract
Development of Blood Vessels of the head & neck

GROSS ANATOMY
1. Dissection:
   Regional Dissection of Head & Neck
   Cunningham's Manual of Practical Anatomy
   Vol.3 - latest edition is followed

2. Lectures:
   A. Osteology:
      (i)  Vertebrae in general
      (ii) Cervical Vertebrae in detail
      (iii) Skull-General architecture:
           Interior of Cranium
           Exterior of Cranium
           Norma Verticalis
           Norma Frontalis
           Norma Occipitalis
           Norma Lateralis
           Norma Basalis
      (iv) Foetal Skull
      (v) Individual skull Bones
           Mandible, Sphenoid, Parietal
           Frontal, Maxilla, Ethmoid, Vomer,
           Nasal, Zygomatic Temporal, Lacrimal, Occipital
           Inferior Nasal Concha etc.,

   B. Soft Parts: Scalp & Temple- Muscle, Vessels & Nerves
       Face - Muscles Vessels & Nerves (including Extra
       third part of
       Posterior Triangle - boundaries and contents
       Back - Suboccipital Triangle boundaries and
       Anterior Triangle - Subdivisions - boundaries &
       Digastric, Submental and
       Muscular Triangles.
       Median Region of the front of the Neck- Cervical
       Anterior Jugular Vein
       Sternocleidomastoid

   Cranial Cavity- Duramater- layers - folds Dural Venous sinuses- Diploic veins
   Meningeal Vessels, Emissary Veins.
   Cranial Fossae and their contents.
   Lobes of Brain
   Lacrimal Apparatus and structure of Eyelid
   Orbit- Muscles, Vessels, Nerves (II, III, IV, V, VI)
       Orbital Periosteum
       Fascial sheath of Eyeball
       Deep Dissection of Neck
       Thymus
       Thyroid and Parathyroid
       Subclavian Artery I & II parts
       Brachiocephalic Veins
       Thoracic Duct, Scalenae Muscles, Phrenic Nerve
   Trachea
   Oesophagus
   Cranial Nerves - Intracranial course of VII, VIII, IX, X, XI, XII cranial nerves.
   Common Carotid - its subdivisions, External carotid artery & its branches
Cervical Sympathetic Trunk
Cervical Plexus
Lymphatic drainage of head & neck
Pre- Vertebral region
Parotid region
Temporal and infratemporal regions including Muscles of mastication and Temperomandibular joint Submandibular region - Submandibular and Sublingual glands
Mouth & Pharynx: Roof & floor & Vestibule of the mouth
Muscles of Pharynx
Subdivisions of the cavity of Pharynx
Tonsil, Palate, Pharyngo-tympanic tube
Adenoids, Carotid, Canal
Tongue
Nose & Nasal Cavity: Apertures, Lateral Wall, Septum of
Nose, Floor, Roof, Blood vessels - nerves
Paranasal Air sinuses
Larynx -
Wall-muscles, ligaments, cartilages
Cavity - subdivisions
Vocal cord
Organs of hearing and equilibration
External Ear
Middle Ear
Internal Ear
Eyeball-
Spinal Cord: Coverings or Meninges
Contents of Vertebral canal
Gross Anatomy of spinal cord
Regional differentiation
Blood supply
Main ascending and descending tracts and their functions.
Joints of the Neck
Brain - Meninges
Subarachnoid Cisterns
Blood supply of Brain
External surface of bass of brain
Hind brain - Medulla- External, Internal Features & cranial nerves attached
Pons - External and internal Features and Cranial nerves attached.
Cerebellum - subdivisions & functions
Fourth Ventricle
Mid Brain - External and Internal Features - Cranial nerves attached
Cerebrum - Main Sulci Gyri
White matter of cerebrum
Lateral Ventricle
3rd Ventricle
Thalamus:
Geniculate Bodies
Internal Capsule
Basal Ganglia
Upper Limb:
Names of the bones & joints
Main Artery, Important, Muscles, nerves & veins

Thorax - Inlet - Outlet
   Subdivisions -
   Lungs & Pleura
   Heart, Pericardium & its blood vessels
   Diaphragm

Abdomen - Subdivisions -
   Location of the abdominal organs in relation to the abdominal wall
   Their blood supply & nerve supply

Histology - Structure of Epithelium - different types - connective tissue - fibres & cells
   Bone
   Cartilage
   Muscles
   Blood Vessels
   Lymphatic tissue - Lymph node, tonsil, spleen & thymus
   Alimentary System - Salivary glands, Tooth
   Oesophagus
   Stomach
   Intestines - small & large
   i.e., Duodenum, ileum, Jejunum
   Caecum, Appendix, Colon
   Liver, Gall bladder
   Pancreas

   Reproductive System - Testis, Epididymis, Ductus Deferns
   Prostate, Seminal Vesicle
   Ovary, Oviduct, Uterus
   Placenta, Mammary gland, umbilical Cord
   - Cornea, Retina
   - Cochlea

Skin - Thin skin, Thick skin

Respiratory system; Trachea, Lungs

Urinary system; Kidney, Ureter, Urinary Bladder

Nervous system-
   Spinal Cord - different levels
   Cerebrum
   Cerebellum
   Medulla -3 levels
   Pons - 2 levels
   Midbrain - 2 levels
   Sensory Nerve endings
   Motor nerve endings

Endocrines
   Pituitary
   Thyroid
   Parathyroid
   Supra - renal gland

Demonstration:
   1. Demonstration of dissected specimens
   2. Embryology models & charts
   3. Embryology slides
   4. Histology slides

Human Genetics Including Teratology

PHYSIOLOGY - PAPER II (Part A)

Introduction to Physiology
   The cell as the living unit of the body
   Body fluid and distribution
   The extra cellular fluid - composition
   Homeostasis
   Transport through the cell membrane
Membrane potentials and Action Potentials
Histophysiology of Epithelium connective tissue
Fat, Cartilage & Bone Tissues

Blood:
- Blood Volume
- Composition of Blood
- Composition of Plasma
- Red Blood Cells
- Haemorrhage - Haemolysis
- Blood groups OAB/RH systems
- White Cells - Types of immunity - Complement system
- Blood platelets
- Mononuclear - Macrophageal system
- Coagulation of blood
- Spleen

Cardio Vascular System
- Basic Haemodynamic principles - Properties of Blood Vessels. The structure and properties of Cardiac muscle.
- Origin and conduction of heart beat
- Cardiac cycle
- Electrocardiogram - Leads used clinically Normal pattern and interpretation.
- Cardiac output Terminology, Normal values, Venous return, Distribution of Cardiac output, Factors determining and controlling cardiac output
- Arterial blood pressure - Measurement of arterial blood pressure Normal values, Factors affecting and controlling arterial pressure.
- Radial Pulse.
- Heart rate and its regulation - Vasomotor centre, Nerves of the heart and their action.

Capillary circulation system
- Physiology of shock
- Special circulation: Pulmonary, Cerebral, Coronary, Skin, Hepatic Splanchnic and Renal.

Respiration
- Structure of the respiratory organs
- Mechanics of respiration
- Subdivisions of lung air
- Diffusion of gases in lungs and tissues
- Transport of respiratory gases in blood
- Control of respiration
- Physiological modification of respiration
- Role of respiration of Acid base balance
- Hypoxia
- Artificial respiration

Excretory System
- Structure of the nephron
- Volume and composition of urine
  - Formation of urine - glomerular filtration - tubular
  - Secretion and reabsorption
  - Renal function tests
- Role of Kidney in Homeostasis of body fluid volume and composition
- Micturition
- Dialysis.

Endocrines
- General chemistry of hormones
- Thyroid gland
- Parathyroid gland
- Endocrine Pancreas
- Adrenal glands
- Pituitary gland - Hypothalamus
- Pineal gland
- Kidney
- Thymus
- Local Hormones: Prostaglandins, Kinins

Reproduction
Male reproductive system
Androgens
Spermatogenesis
Female reproductive system
Menstrual cycle
Pregnancy
Lactation
Contraception

Muscle and the Nervous system
Skeletal muscle structure and properties
Muscle contraction & relaxation.
Smooth muscle: types, Structure properties
Structure and function of the nervous tissue
Reflex action
Sensory nervous system
Regulation of Posture
Cerebellum
Cerebral cortex
Voluntary movement
Basal Ganglia
Thalamus & Hypothalamus.
Brainstem spinal cord
Limbic system
Electroencephalogram
Autonomic Nervous system
C.S.F.

Special senses
Digestion
Structure of the digestive tract - Salivary glands
Saliva composition and functions
Regulation of salivary secretion
Digestion in the mouth
Digestion in the stomach
Exocrine functions of Pancreas
Digestion in the intestine
Absorption in the intestine
Movements of alimentary canal, Deglutition
Defaecation
Structure and functions of Liver

PHYSIOLOGY PRACTICALS AND DEMONSTRATIONS
1. Enumeration of Red Blood Cells
2. Enumeration of White Blood Cells
3. Differential Leucocyte Count
4. Determination of Haemoglobin
5. Determination of Blood Groups
6. Determination of bleeding time and clotting time
7. Clinical examination of chest
8. Determination of pulse and Blood Pressure

DEMONSTRATION
1. Properties of excitable tissues
   Skeletal muscle
   Cardiac muscle
2. Activity of Frog’s heart effects of vagal stimulation and of atropine and adrenaline
3. Perfusion of Frog’s heart effects of sodium calcium and potassium ions.

BIOCHEMISTRY - PAPER II (Part B)

Acid Base Regulation:
Chemistry Of Proteins, Carbohydrates & Lipids:

Proteins:

Protein structure — the peptide bond. Primary structure - amino acid - terminal & C - terminal Amino acids the effect of amino acid substitution in the primary structure. Rudimentary knowledge of secondary, tertiary and Quartenary structure - Protein conformation - Globular proteins and fibrous proteins - Protein denaturation. Simple proteins and conjugated protein.

Plasma proteins - Immunoglobulins.

Carbohydrate (Chemistry)
Classification and nomenclature — Aldoses and ketoses - Trioses, Tetroses, Pentoses, Hexoses and Heptoses. Examples of biologically important compounds.

Stereoisomerism - Epimers - D & L forms - optical activity - Ring form of sugars Mutarotation — configuration - Reducing property of sugars - Oxidation and reduction reactions - formation of uronic acid aldonic acids.

Deoxy sugars - Polyols like sorbitol and mannitol. Biologically important disaccharides, Sucrose, Lactose and Maltose. Polysaccharides, Starch and Glycogen. Glycosidic linkage - Mucopolysaccharides or Glycosaminoglycans - Hyaluronic acid, Heparin, Chondroitin sulfate their chemical nature and biological importance.

Lipids (Chemistry)
Criteria for Lipid - Classification - fatty acids. Short and long chain fatty acids. Saturated fatty acids - Palmitic acid and stearic acid - Monounsaturated fatty acid - Polyunsaturated fatty acid - Essential fatty acid, Fat or Triglycerides or Triacylglycerol - simple and mixed. Melting points. Phospholipids - Glycerophosphatides - phospholipids - amphipathic properties. Sphingomyelins - Cerebrosides - their nature. Sterols - Cholesterol and related compounds - Bile acids, Androgens, Estrogens, Progesterone, Cortisol Aldosterone and Vitamin D.

Nucleic Acids:

leading to protein biosynthesis - Replication - Transcription - Translation - Antimetabolites and Antibiotics that inhibit protein biosynthesis.

Metabolism Of Nucleic Acid:
General outline of the synthesis and catabolism of Purines and Pyrimidines in man.

Vitamins:
The vitamin concept, Chemical nature, dietary sources. Requirements (R.D.A), functions and deficiency manifestations of fat soluble and water soluble vitamins. Hypervitaminosis.

Enzymes:

Minerals:
Bulk minerals and Trace minerals. Sources, functions, requirements absorption with reference to calcium. Phosphorus and Iron Biological function of minerals like sodium, potassium, magnesium, iodine, copper zinc and fluoride.

Biological Oxidation or Tissue Respiration:
The structural organization of Mitochondria - Power house of the cell - Hydrogen carrier or Electron transport system. Redox potential concept of free energy. High and low energy compounds - oxidative phosphorylation and substrate level phosphorylation ATP as the common currency of bioenergetics Inhibitors of oxidation and uncoupling of oxidative phosphorylation. Oxygenases and the microsomal cytochrome P-450 and the Mitochondrial P-450 monoxygenase systems.

Hemoglobin And Porphyrins:

Nutrition:

Carbohydrate Metabolism:
Chemical process involved in the digestion of dietary carbohydrates and their absorption Glucose as the major sugar in the body - Utilization of
Glucose - Oxidation _ Glycolysis and Aerobic Oxidation in Citric Acid Cycle - Glycogenesis - Lipogenesis - their cellular and hormonal control -
Cyclonic AMP Glycogenolysis and Neoglucogenesis. Role of Liver in carbohydrate metabolism. Regulation of blood sugar level. Glycosuria -
Glucose tolerance test and it's importance.

Lipid Metabolism:
Digestion and absorption of dietary Lipids. Transport of lipids in serum. Lipoproteins Metabolism of adipose tissue - oxidation of fatty acids -
formation and metabolism of ketone bodies - ketosis. Outline of fatty acid synthesis - Cholesterol metabolism. Absorption, transport, general outline
of cholesterol synthesis its regulation. Excretion of cholesterol - Bile Acids - Compounds of biological importance that are formed from cholesterol -
Vitamin D and steroid hormones. Serum Cholesterol and it's relation to Atherosclerosis.

Protein Metabolism:
Digestion of proteins and the absorption of Amino acids. Amino acid pool - Protein turn over. Removal of Nitrogen from Amino Acids Transamination
- Role of Glutamate - Oxidative deamination by Glutamate dhydrogenase. Disposal of ammonia - urea cycle - importance of Glutamine - Catabolism
of the carbon skeleton of Amino Acids - Glucogenic and Ketogenic amino acids. Catabolism of phenylalaine and Tyrosine to illustrate inborn error or
7. Melanin Transmethylation and its biological importance.

Detoxication Reactions
(Metabolism Of Xenobiotics)

PRACTICAL

Reactions of Carbohydrates, lipids and proteins
Properties of haemoglobin, bile salts and bile pigments
Starch: Hydrolysis by acids
Blood sugar and urea, serum creatinine and total proteins - estimation
Milk analysis - Biochemical Mediators of Milk
Normal and abnormal urine: analysis
Lecture demonstration (to be recorded in the record note Book)

BMR, electrophoresis of plasma proteins
Chromatography - amino acids and sugars
Photometry
Gastric, liver and renal function tests
GTT

Gastric analysis - total acids and free acids - clinical importance

HUMAN ORAL ANATOMY, PHYSIOLOGY, HISTOLOGY & TOOTH MORPHOLOGY - PAPER III

i) Development and growth of face, teeth and jaws
ii) Development of enamel, dentine, cementum, pulp and periodontal membrane.
iii) Calcification of hard tissues of the teeth
iv) Microscopic anatomy of hard and soft tissues of the tooth and surrounding structures.
v) Microscopic anatomy of hard and soft tissues of the oral cavity such as lips, tongue, floor of the mouth, palate, salivary glands, alveolar bones etc.,
vi) Mastication and deglutition
vii) Age changes in teeth and surrounding structures.
viii) Shedding of the deciduous teeth
ix) Eruption of permanent teeth
x) Chronology of dentition
xi) Form and arrangement of teeth - occlusion.
xii) Functional anatomy of the oral cavity
xiii) Temperomandibular joint
xiv) Evolution of the jaws and teeth
xv) Chemical composition of teeth
xvi) Calcium, phosphorus and flouride metabolism
xvii) Effect of hormones on oral tissues
xviii) Influence of diet on oral structures
xix) Saliva

PRACTICAL: Carving of decidous and permanent teeth
Identification of the teeth

Microscopic appearance of normal oral soft & hard tissues

DEMONSTRATION

Preparation of Ground Sections of the teeth
Preparation of decalcified sections of hard tissues
Preparation of section of soft tissues

I. Tooth Morphology:
Carving of wax block for all upper & lower anterior teeth, Maxillary first premolar, first molar, mandibular second premolar & first and second molar.

SYLLABUS - II BDS

MATERIALS USED IN DENTISTRY - PAPER - I

1. Performance Standards for Dental Materials
2. Structure of Matter and Principles of Adhesion
3. Physical Properties of Dental Materials
4. Mechanical Properties of Dental Materials
5. Biocompatibility of Dental Materials
6. Hydrocolloid Impression Materials
7. Non-aqueous Elastomeric Impression Materials
8. Inelastic Impression Materials
10. Chemistry of Synthetic Resins
12. Restorative Resins
13. Bonding
14. Solidification and Microstructure of Metals
15. Constitution of Alloys
16. Corrosion
17. Dental Amalgam
   Structures and Properties
18. Dental Amalgam
   Technical Considerations
19. Direct Filling Gold and its Manipulation
20. Dental Casting Alloys
21. Inlay Casting Wax
22. Investments for Small Castings
23. Casting Procedures for Dental Alloys
24. Dental Cements for Restoration and Pulp Protection
25. Dental Cements for Bonding and luting Applications
26. Dental Ceramics.
27. Soldering
28. Wrought Base Metal and Gold Alloys
29. Dental Implants
30. Mechanics of Tooth cuttings, Burs & diamond points
31. Finishing and Polishing Materials
32. Dental Waxes
33. Welding.
34. Die Materials

MATERIALS USED IN DENTISTRY

PRACTICALS:

MANIPULATION AND MIXING OF THE FOLLOWING DENTAL MATERIALS:

1. Dental Plaster
2. Dental Stone
3. Investments - All types.
4. Impression materials
   a) Impression Compound
   b) Reversible Hydrocolloids - heating and conditioning
   c) Irreversible Hydrocolloids
   d) Zinc Oxide Eugenol paste
   e) Elastomeric Impression materials
5. Denture Base Materials
   a) Heat cure acrylin resin
   b) Cold cure acrylin resin
6. Cements
   a) Zinc Oxide - Eugenol cement
   b) Zinc Phosphate cement
   c) Zinc poly Carboxylate cement
   d) Glass ionomer cement
   e) Resin Cement
   f) Silver Amalgam

DEMONSTRATION:
1. Welding
2. Soldering
3. Annealing
4. Pickling
5. Investing
6. Casting procedure

Photometry
Gastric, liver and renal function tests
GTT
Gastric analysis - total acids and free acids - clinical importance

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Actinomycetes
Basics of Virology
Organisms causing tetanus, gas gangrene and dental caries
Common Parasites
Basics of Immunology
Blood - Immunology
Vaccines and Sera
Pyaemia, Septicaemia and Toxaemia
Fungal infections

MICROBIOLOGY - PRACTICALS II B.D.S.
1. Gram Staining
2. Acid Fast Staining
3. Spotter

PATHOLOGY - PRACTICALS II B.D.S.

URINE EXAMINATION
Benedict’s Test
Test for Protein
Rotha’s Test
Ray’s Test
Smith’s Test
Benzadine Test

**BLOOD**
- Blood counts: RBC, WBC, DLC
- Immature Cells

**SLIDES**
- Actinomycosis
- Carcinoma
- Ameloblastoma
- Fibroma
- Thrombosis
- Haemangioma
- Granulation Tissue
- Ulcerations
- Degeneration
- Acute inflammation
- Chronic inflammation
- Pathology of liver, spleen, glands, lungs
- Melanoma
- Chondroma
- Teratoma
- Papilloma
- Rhinosporidium
- Filarial Lymphadenopathy
- T.B. Lymphadenopathy
- Hodgkin’s disease
- Atherosclerosis

**GENERAL & DENTAL PHARMACOLOGY & THERAPEUTICS (PAPER - III)**

1. General Pharmacology
   - a) General principles of Pharmacology
   - b) Drug Receptors & Pharmacodynamics
   - c) Pharmacokinetics
   - d) Drug Biotransformation
   - e) Dosage forms and routes of drug administration
   - f) Adverse drug reactions

2. Drugs acting on Central Nervous System
   - a) General Anaesthetics
   - b) Sedatives - Hypnotics and Antianxiety Drugs
   - c) Analgesics
     - Narcotic
     - Non- Narcotic (NSAID)
   - d) Antiepileptic drugs
   - e) Analpeptcs

3. Drugs acting on Peripheral Nervous System
   - a) Cholinergic receptor stimulants
   - b) Cholinergic receptor Antagonists
   - c) Adrenergic receptor activating drugs
   - d) Local Anaesthetics
   - e) Skeletal muscle relaxants

4. Anti-infective Agents
   - a) Sulfonamides & Trimethoprim
   - b) Metronidazole & Tinidazole
   - c) Antibiotics
   - d) Cancer Chemotheraphy

5. Local anti-infective agents
   - Disinfectants and Antiseptics including antifungal and Antiviral agents.

6. Drugs acting on Cardiovascular System.
   - a) Drugs in Congestive Cardiac failure
   - b) Antihypertensive drugs
   - c) Vasodilators and Vasoconstrictors
   - d) Drug therapy of shock
   - e) Diuretics

7. Drugs acting on Haemopoetic System
8. Drugs acting on the Endocrine System
   a) Hypothalamic and Pituitary Hormones
   b) Insulin and anti-diabetic drugs
   c) Thyroid and Anti-Thyroid drugs
   d) Parathormone, Calcitonin, Calcium & Vitamin D
   e) Adrenocorticosteroids
   f) Sex Hormones
9. Autocoids
   a) Histamine and Antihistaminics
   b) Serotonin
   c) Prostaglandins
10. Drugs acting on Gastro intestinal Tract
    a) Emetics and Antiemetics
    b) Antidiarrhoeal
    c) Drugs used in Constipation
11. Drugs acting on Respiratory System
    a) Bronchodilators
    b) Antitussive Agents
12. Vitamins
13. Drugs Acting on Immune system
14. Miscellaneous Agents
    a) Astringents
    b) Obtundents
    c) Mummifying Agents
    d) Styptics
    e) Disclosing solutions
    f) Dentifrices & mouth washes
    g) Bleaching agents.
15. Prescription writing.
17. Nutritional supplement therapy.
18. Modern antibiotics
19. Oral contraceptives
21. Enzymes in therapy.
22. Drugs in pregnancy & new born
23. Chelating agents
24. Fluorides

PHARMACOLOGY - PRACTICALS
1. Preparation of Mouth washes
2. Preparation of gum paints
3. Analgesic powder
4. Dentifrices
5. Antiseptics
6. Pulp mummifying paste
7. Pulp capping agents

SYLLABUS FOR PRE-CLINICAL PROSTHODONTICS 1ST AND 2ND YEAR BDS DEGREE COURSE

Teaching pre-clinical prosthetics commences from the 1st year BDS

THEORY:
Weekly one session i.e., one hour theory class in basic complete denture Prosthodontics

PRACTICAL:
Weekly three sessions of practical class two hours duration.

TOTAL NO. OF THEORY AND PRACTICAL CLASSES
IN THE 1ST YEAR

There will be 40 Hrs theory class and 240 Hrs of practical classes.

PRACTICALS: EXERCISES:

1. One upper and one lower edentulous casts with alginate impression.
2. One upper, one lower edentulous casts using impression compound.
4. Special trays (Using shellac plate or acrylic resin materials)
5. Construction of record bases (using shellac base plate or acrylic).
6. Mounting of U/L Casts with occlusal rims in class I relation using fixed condylar path articulators.
7. Arrangement of teeth
8. Waxing, Carving & Polishing of wax setup.
9. Flasking, Dewaxing, Packing & Curing
10. Deflasking; Trimming & polishing of Acrylic Dentures.

II YEAR PRE-CLINICAL PROSTHODONTICS

Theory
Weekly one hour of theory classes on removable and fixed partial denture prosthodontics.

Practical:
Weekly one practical of removable prosthodontics and one for fixed partial denture prosthodontics.

TOTAL NO.OF CLASSES:
Theory and Practical.

THEORY CLASSES: 40 hours of theory classes.

PRACTICAL:
2 session per week or 4 hours per week.

TOTAL:
160 hours of practical in the second BDS pre clinical prosthodontics course (i.e. 80 Hrs of practical for removable partial denture and 80 Hrs for crown and bridge prosthodontics.)

IInd YEAR PRACTICAL SYLLABUS:

1. Repair of Lower complete denture.
2. Relining and Re-basing of upper complete denture
3. Construction of Kennedy Class IV Acrylic partial denture.
4. Construction of Kennedy class I (Lower)
5. Construction of Kennedy class II cast partial denture (Frame Work only)
6. 3 C.D settings as preliminary training for University exams.

SYLLABUS FOR PRE CLINICAL CROWN AND BRIDGE PROSTHODONTICS

1. Preparation of Tooth for Jacket crown on Maxillary Anterior tooth.
2. Construction of jacket crown.
3. Preparation of Mandibular molar for full veneer crown.

II BDS Practical Prosthodontic Examination

No theory Examination
Internal Assessment - 30 marks
Viva voce - 20 marks
Practicals - 50 marks (minimum of 25 marks for a pass)
Total - 100 (minimum of 50 marks for a pass)

Practical duration 3 hours.
Candidates failing in Prosthodontics Practicals and Vivavoice and having passed other examinations of Dental Anatomy, Pathology and Pharmacology will not be permitted to join the III year BDS course.

SYLLABUS FOR PRE-CLINICAL CONSERVATIVE DENTISTRY & ENDODONTICS IInd YEAR BDS DEGREE COURSE

Teaching of preclinical conservative Dentistry & Endodontics commences from the beginning of II year B.D.S. Course.

THEORY:
1. Weekly one session - 1 hour duration on the subjects mentioned in the list enclosed
PRACTICALS:
1. Weekly two sessions - 1 1/2 hour duration & 1 session 1/2 hour after 1 hour lecture.

Training on Plaster Blocks and Plaster models decided by Teaching Staff.

Training to be imparted to the students of II year B.D.S. on phantom head fitted with one Upper & Lower Jaw - Teeth either natural (Extracted teeth) or Teeth acrylic.

Phantom heads are provided to simulate the head & Jaws of the living patient. The teeth are treated by the student in the same way as they would a patient by making use of various hand instruments for retraction of the jaw, reflection of the light, and airrotor handpiece with high speed cutting efficiency mounted with friction grip burs of standard recommended sizes.

They are also trained to use three-in-one syringe for washing & drying the prepared tooth cavity. The students are trained to arrange and use the hand cutting instruments as done by a Clinical Conservative Dentist.

Total number of Theory Classes - 30 hours
Number of Practicals Classes - 90 hours
The subject of Conservative Dentistry for the II year B.D.S.

LECTURE CLASSES:
1. Introduction to Operative Dentistry
2. Glossary & Its significance.
3. Tooth designation & System Followed.
4. Classification of caries
5. Basic principles in cavity preparation
7. Cavity preparation for Amalgam.
8. Cavity preparation for Inlay
9. Tooth preparation for tooth coloured materials
10. Matrices and retainers
11. Deep caries management
12. Introduction to Rootcanal Treatment and Pulpotomy.
14. Basic aspects of sterilization of Instruments and Equipment
15. Basic aspects of management of various restorative materials.
   (Amalgam, Cement, Glass Ionomer, Composites)

DEPARTMENT OF CONSERVATIVE DENTISTRY
EXERCISES FOR PRECLINICAL TRAINING - II YEAR B.D.S.

Exercise I: Excavation of Deep Caries & Indirect Pulp capping: One Molar Tooth - 1
Exercise II: Excavation of Deep Caries & Direct Pulp capping: One Molar Tooth - 1
Exercise III: Pulpotomy: One Molar Tooth - 1
Exercise IV: Class I preparations to receive: One Lower Silver Amalgam Molar - 1
                                    One Lower Molar with Buccal Extension - 1
                                    One Lower Premolar - 1.
                                    One Upper Molar - 1.
Exercise V: Class II preparation for Silver Amalgam: One Lower Molar (Mesio Occlusal) - 1
                             One Lower Premolar (Disto Occlusal) - 1
                             One Upper Molar (Disto Occlusal) - 1
Exercise VI: Class III preparation for tooth Coloured Material: One Upper Central Incisor (Palatal Approach) - 1
                             One Lower Central Incisor (Labial Approach) - 1
Exercise VII: Class V Preparations One Upper Canine - (Tooth coloured Material) - 1
                             One Lower Molar (Amalgam)
Exercise VIII: Inlay Preparation: One Lower Molar (Mesio Occlusal Distal) - 1.
                             One Upper Molar (Occlusal) - 1
Exercise IX: Access cavity preparation: One Upper Lateral Incisor - 1
Exercise X: Demonstration on Fractured teeth
PRACTICAL CONSERVATIVE DENTISTRY & ENDOPTONICS EXAMINATION

All II year B.D.S. students will complete their training at the end of one academic year and will appear for University Examination for completing of II year B.D.S. course

THERE WILL NOT BE ANY THEORY EXAMINATIONS

<table>
<thead>
<tr>
<th>Assessment Type</th>
<th>Marks</th>
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<tbody>
<tr>
<td>Internal Assessment</td>
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<tr>
<td>Practical Examination</td>
<td>50 marks (minimum of 25 marks for a pass)</td>
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<tr>
<td>Viva voce</td>
<td>20 marks</td>
</tr>
<tr>
<td>Total</td>
<td>100 marks (Minimum of 50 marks for a pass)</td>
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</tbody>
</table>

Duration of the examination - 3 hours.

Candidates failing on Conservative Dentistry & Endodontics, Practicals and Viva voce and having passed other examinations Dental Anatomy, Pathology and Pharmacology will not be permitted to join the III year BDS course.

SYLLABUS - III BDS

1. ORAL PATHOLOGY & MICROBIOLOGY (PAPER-I)


Practicals:
(1) Identification of hard and soft tissue specimen.
(2) Identification of histo pathological and microbiological slides.
(3) Biopsy and Exfoliative cytology technique

Lectures ...... 50 Hours
Practicals ..... 90 Hours
Total ............ 140 Hours

2. GENERAL MEDICINE (PAPER-II)

Introduction:
Aims of Medicine, Definition of diagnosis, prognosis and treatment. History taking and physical examination of a medical case. Medical emergencies in dental practice.

G.I. Disorders:
Stomatitis, Glossitis, gastritis, Diarrhoea, Amoebiasis, Ascites, malabsorption syndrome.
Liver:
Jaundice, Viral hepatitis, cirrhosis liver, Tender hepatomegaly.
Cardiovascular System:
Respiratory System:
Pneumonia, Bronchitis, Emphysema, Lung Abscess, Eosinophilia, Pulmonary Embolism, Pulmonary Tuberculosis, Respiratory Failure.
Renal Diseases:
Acute glomerulo Nephritis, Nephrotic syndrome.
Hematology:
Anaemia, Coagulation defects, Bleeding disorders Agranulocytosis, Leukemia, Oral manifestations of hematological disorders, lymphadenopathy and splenomegaly.
Central Nervous System:
Meningitis, Facial Palsy, facial pain, epilepsy. Head ache, syncope.
Nutritional and Metabolic:
Balanced diet, Normal daily Protein, Calories requirements, Malnutrition Avitaminosis. Diabetes mellitus, calcium homeostasis.
Endocrine Disorders:
Hypo Thyroid & Hyper thyroid, Hypo and Hyperpituitary.  Hypo and Hyper parathyroid.

Infections:
Enteric fever: Mumps-Viral exanthema - Diphtheria - STD
Miscellaneous:
Allergy - Drug reactions - Drug interactions - Evaluation of a case for general anaesthesia

Lectures .... 50 Hours
Practicals .. 90 Hours
Total .......... 140 Hours

3. GENERAL SURGERY (PAPER- III)

1. Introduction to Surgery. Classification of diseases.  2.Inflammation, soft tissue and hard tissue-causes, varieties sequelae and treatment,

(i) Case Sheet writing and Demonstrations
(ii) Ward procedure, Including wound dressing
Lectures ..... 50 Hours
Practicals .... 90 Hours
Total .......... 140 Hours

QUOTA FOR III YEAR BDS
1. Operative and Conservative Dentistry
Class I - Silver Amalgam Cavity
(Lower-10 + Upper 5)
2. Prosthetics
Removal partial Dentures No. 30
Non clinical fixed partial denture - 1 case
3. Periodontia
Hand scaling 100 cases along with final year

SYLLABUS - IV B.D.S.

1. CONSERVATIVE DENTISTRY

ENDODONTICS

Lectures ... 70 Hours
Clinicals ... 240 Hours

2. ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS
1. Definitions, aims, objects and scope of Orthodontics
2. Growth and Development of jaws, teeth, face and skull and establishment of normal occlusion
3. Genetics as applied to Orthodontics
4. Normal occlusion and its characteristic factors responsible for establishment and maintenance of normal occlusion
5. Malocclusion - types & Different classifications,
6. Aetiology of malocclusion
7. History taking and examination of patient and case analysis and differential diagnosis including cephalometrics and treatment planning
8. (a) Preventive and interceptive treatment of malocclusion, (b) Extraction for Orthodontics,
9. Appliances, used in orthodontic treatment - Adequate knowledge of (a) removable appliances, (b) Mechanical appliance, (c) functional appliances
10. Tissue changes incident to Orthodontic treatment
11. Materials used in Orthodontics
12. Habit breaking appliances
13. Computers in orthodontics
14. Sterilization in orthodontics
15. Fixed functional appliances
16. Surgical orthodontics
17. Failures in orthodontic therapy

Lecture .... 40 Hours
Practical & Clinical ... 240 Hours

The teaching of Orthodontics clinic and Practicals should be arranged during III BDS and final B.D.S.

3. ORAL MEDICINE, ORAL DIAGNOSIS AND RADIOLOGY

Oral Medicine, Oral Diagnosis

Lectures .... 25 hours
Clinicals .... 150 hours

Dental Radiology:

Lectures .... 15 hours
Clinicals .... 90 hours

4. PERIODONTICS

1. Introduction to periodontics
   - Definition of Periodontology
   - Periodontia
   - Brief historical background
   - Scope of periodontics

2. Development of gingiva; Junctional epithelium in detail
   - Epithelial Mesenchymal interaction
   - Periodontal ligament
   - Cementum
   - Alveolar bone

3. Defence mechanisms in the oral cavity
   - Role of saliva and other defensive mechanisms in the oral environment
   - Gingival fluid

4. Age changes in periodontium
   - Age changes in teeth and periodontal structures

5. Classification of periodontal diseases
   - Need for classification, Scientific basis of classification.
   - Classification of gingival and periodontal diseases as described in world workshop 1989.
     - Gingivitis:
       - plaque associated, ANUG,
       - Steroid hormone influence,
       - Desquamative gingivitis, other forms of gingivitis as in nutritional deficiency, bacterial and viral infections etc.
     - Periodontitis:
       - Adult Periodontitis, Rapidly Progressive Periodontitis A & B,
       - Juvenile Periodontitis (localized, generalized and post juvenile),
       - Pubertal periodontitis,
       - Refractory Periodontitis.
       - Localized and generalized gingivitis.
       - Papillary, marginal and diffused
gingivitis, Etiology, pathogenesis, Clinical signs, symptoms and management

1. Plaque - associated gingivitis
2. Systemically aggravated (sex hormones, drugs and Systemic diseases).
3. Necrotizing ulcerative gingivitis
4. Desquamative gingivitis - Gingivitis associated with Lichen planus, pemphigoid, pemphigus and other Vesiculobullous lesions).
5. Allergic gingivitis

7. Epidemiology of Periodontal diseases
- Definition of index, incidence, prevalence, epidemiology, endemic, epidemic, pandemic
- Classification of indices. (irreversible & reversible)
- Deficiencies of earlier indices used in Periodontics. Detailed understanding of Silness & Loe Plaque index, Loe CPI, Prevalence of periodontal diseases in India and other countries. Public Health significance (All these topics are covered at length under questions may be asked from the topics in examination).

8. Extension of inflammation from gingiva
- Mechanism of spread of inflammation from gingival area to deeper periodontal structures.
- Factors that modify the spread

9. Pocket
- Definition signs and symptoms, Classification. Pathogenesis and histopathology, Root surface changes and contents of the pocket.

10. Etiology
- Dental Plaque (Bio-film)
- Definition
- Types, composition, formation; bacterial colonisation, growth and maturation, Disclosing agents.
- Role of dental plaque in periodontal diseases.
- Plaque micro-organisms in detail
- Bacteria associated with periodontal diseases.
- Plaque retentive factors
- Meteria alba
- Food debris

Calculus
Definition, types, composition, attachment, theories of formation.
Role of dental calculus in diseases.
- Food Impaction
Definition, types, etiology
Hirschfelds classification, signs symptoms and sequelae Treatments.

- Trauma from occlusion
Definition
Types
Histopathological changes
Role of trauma from occlusion in Periodontal diseases
Management, in brief.

- Habits
Their Periodontal significance
- Bruxism and parafunctional habits, Tongue thrusting, mouth breathing, lip biting, occupational habits.

- Iatrogenic factors
Conservative Dentistry restorations - Contact point, marginal ridge; surface roughness overhanging restorations, interface between restoration and teeth.

- Prosthodontics
- Interrelationship
- Bridges and other prosthesis pontics (Types), surface contour relationship of margins to the periodontium.
- Orthodontics:
  - Interrelation - removable appliance, fixed appliances.
  - Retention of plaque, bacterial changes.
- Systemic disease:
  - Diabetes, Sex hormones, Nutrition (Vit, C & Proteins)
  - AIDS and Periodontium
  - Hemorrhagic disease.
- Leukemia, Clotting factors disorder Platelet disorder
- PMN disorders

11. Risk Factors - Definition, risk factors for periodontal disease

12. Host Response - Mechanism of initiation and progression of periodontal diseases
  - Basic concepts-cells-mast cells, Neutrophils, macrophages, Lymphocytes, Immunoglobulins, complements, Immune Mechanism and Cytokines in brief.
  - Stages in gingivitis - initial, early established, advanced.
  - Periodontal diseases activity continuous paradigm, random burst and asynchronous multiple burst hypothesis.

13. Periodontitis - Etiology, Histopathology, Clinical signs and symptoms, diagnosis and treatment of
  - Adult periodontitis
  - Furcation involvement
    - Glickman’s classification, Prognosis and management.
  - Rapidly progressive: Localized Generalised
    - Post Juvenile periodontitis
      - Periodontitis associated with Systemic disease
  - Refractory periodontitis.

14. Diagnosis - Routine procedures, Methods of probing - types of probes.
  - Halitosis, Etiology and treatment (According to case history)
  - Mention advanced diagnostic aids and their role in brief.

15. Prognosis - Definition, types, purpose and factors to be taken into consideration

16. Treatment plan - Factors to be considered

17. Periodontal Therapy - A. General principles of periodontal therapy.
  - Definition of periodontal regeneration, repair, new attachment reattachment.
  - B. Plaque control
    - a) Mechanism - Tooth brushes, interdental cleaning aids,
    - b) Chemical - Classification and mechanism of action of each, pocket irrigation.

18. Pocket eradication

  Dentrifices
  - Scaling and Root Planing
  - Indications
  - Aims and Objectives
  - Armamentarium
    - Procedure
      - Healing following root planning
      - Hand instruments for scaling and sonic scalers.
      - Curettage and present concepts
  - Definition
  - Indication
- Aims and Objectives
- Procedure and healing
- Gingivectomy/Gingivoplasty
- including crown lengthening procedure
- Definition
- Indication and contraindication
- Armamentarium, Procedure and healing
- Flap - Surgery
- Definition of flap
- Types of flap
  (Design of flap - Papillae Preservation)
- Pocket eradication, healing.

19. Osseous Surgery
- Osseous defects in Periodontal disease
- Definition
- Classification of osseous defect and surgery.
- Resective, additive osseous surgery (osseous grafts)
- Healing

20. Periodontal management of medically compromised patients

21. Inter disciplinary
- Perio-Restorative Relations
- Perio-ortho Relations
- Pulpo-periodontal involvement
- Route of spread of infection
- Simon’s classification and management.

22. Systemic effects of periodontal disease in brief,
- Cardiovascular disease, low birth weight babies etc.

CLINICALS
1. Infection control
2. Periodontal instruments
3. Chair position and principles of instrumentation
4. Maintenance of instruments (Sharpening)
5. Ultrasonic, piezoelectric and sonic scaling demonstration of procedure.
6. Diagnosis of periodontal disease and determination of prognosis
7. Radiographic interpretation and lab investigations.
8. Motivation of patients - oral hygiene instructions. Students should be able to record a detailed periodontal case history.

5. ORAL AND MAXILLOFACIAL SURGERY

Local Anaesthesia:

General Anaesthesia:

Oral Surgery:


Exodontia:
1. Objectives
2. Indications for tooth extraction.
3. Pre-operative assessment.
4. Forceps extraction.
5. Surgical extraction (Trans-alveolar extraction)
6. Extraction technique under general anaesthesia in the Dental chair.
7. Complications of tooth extraction and their management.

LECTURES:
Anaesthesia (Local and general) .... 10
Exodontia .... 10
Oral Surgery .... 40
Clinical .... 320 hours

6. PROSTHODONTICS AND CROWN AND BRIDGE
A. COMPLETE DENTURES:
1. Introduction & scope.
3. Examination, diagnosis, treatment planning and prognosis.
5. Principles and techniques of impression making.
6. Preparation of casts, trays and temporary denture bases occlusal rims.
7. Jaw relations and methods of registration.
8. Artificial teeth, their selection and arrangements and esthetics.
9. Articulators and face bows.
10. Occlusion and articulation in complete dentures.
11. Processing and finishing of dentures.
12. Corrections of occlusal discrepancies.
13. Insertion and adjustments of complete dentures.
15. Repair, rebasing and relining.
16. Immediate dentures.
17. Implant dentures.

B. REMOVABLE PARTIAL DENTURES:
1. Introduction.
2. Scope.
3. Examination, diagnosis and treatment planning.
4. Components of removable partial dentures & their function.
5. Surveyors.
7. Impression procedures.
9. Fabrication of cast metal frame work.
11. Selection and arrangements of teeth.
13. Try in of partial dentures.
14. Processing, finishing, insertion and maintenance of partial dentures.
15. Immediate Partial dentures.

C. CROWN AND BRIDGE PROSTHODONTICS:
1. Introduction & Definition.
2. Indication and contra-indications.
3. Examination, diagnosis and treatment planning.
4. Selection and choice of abutment teeth.
5. Principles of tooth reduction.
6. Indications, Contra indications.
7. Procedures of preparation of abutment teeth for receiving various types of retainers.
8. Temporary protection of prepared tooth.
9. Gingival retractions and impression procedures.
10. Construction of dies and working casts.
11. Direct and indirect techniques.
12. Technique of fabrication of retainers.
13. Selection and Fabrication of pontics.
15. Finishing.
17. Maintenance of crowns and bridges.
18. Bridge failure Management.

D. MAXILLOFACIAL PROSTHESIS:
1. Splints.
2. Obturators.
3. Carriers.

Lectures - 80 hours
Clinicals - 360 hours

7. PEDODONTICS AND PREVENTIVE DENTISTRY
i. Introduction, definition, scope and importance of pedodontics.
ii. Growth & development of Dental and Oral facial structures and normal occlusion-Developmental anomalies.
iii. Morphology of Dentitions and its application.
(a) Applied morphology and histology of deciduous and permanent teeth.
(b) Importance of first permanent molar.
iv. Fundamentals of Dental Health
   Biological factors responsible for maintenance of Dental and Oral Health
v. Contributory local factors affecting oral health - plaque etc,
vi. Child psychology and management of child patient
vii. Examination, diagnosis and treatment planning
ix. Importance of Oral Hygiene in children
x. Feeding problem in cleft palate
   Lectures ... 40 hours
   Practicals & Clinicals ... 240 hours

4. PUBLIC HEALTH DENTISTRY (PAPER - VIII)

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

OBJECTIVES:

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

Skill and Attitude:
At the conclusion of the course the students shall have the skill of identifying health problems affecting the society, conducting health surveys, conducting health education classes and deciding health strategies - Students should develop a positive attitude towards the problems of the society and must take responsibilities in providing health. Communication abilities:
At the conclusions of the course the student should be able to communicate the needs of the community efficiently, inform the society of all the recent methodologies in preventing oral disease

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

DENTAL PUBLIC HEALTH:
1. Definition and difference between community and clinical health.
2. Epidemiology of dental diseases-dental caries, periodontal diseases, malocclusion, dental fluorosis and oral cancer.
4. Delivery of dental care: Dental auxiliaries, operational and non-operational, incremental and comprehensive health care, school dental health.
5. Payments of dental care: Methods of payments and, dental insurance, government plans
6. Preventive Dentistry- definition, Levels, role of individual, community and profession, fluorides in dentistry, plaque control programmes.
Research Methodology and Dental Statistics

1. Health Information: - Basic knowledge of Computers, MS Office, Window 2000, Statistical Programmes
2. Research Methodology: - Definition, types of research, designing a written protocol
4. sampling techniques-types, errors, bias, blind trials and calibration.

Practice Management

1. Place and locality
2. Premises & layout
3. Selection of equipments

- Dentist Act 1948 with amendment.
- Dental Council of India and State Dental Councils
- Composition and responsibilities.
- Indian Dental Association
- Head Office, State, local and branches.

PRACTICALS/CLINICALS/FIELD PROGRAMME IN COMMUNITY DENTISTRY:

- These exercises designed to help the student in W year students:
  1. Understand. the community aspects of dentistry
  2. To take up leadership role in solving community oral health programme Exercises:
    - Collection of statistical data (demographic) on population in India, morbidity and mortality, literacy, per capita income
    - Incidence and prevalence of common oral diseases like dental caries, periodontal disease, oral cancer, fluorosis at national and international levels
    - Preparation of oral health education material posters, models, slides., lectures, play acting skits etc.
    - Oral health status assessment of the community using indices and WHO basic oral health survey methods
    - Exploring and planning setting of private dental clinics in rural, semi urban and urban locations, availment of finances for dental practices-preparing project report.
    - Visit to primary health center-to acquaint with activities and primary health care delivery
    - Visit to water purification plant/public health laboratory! center for treatment of western and sewage water,
    - Visit to ‘schools-to, assess the oral health status of school children, emergency treatment and health education including possible preventive care at school (tooth brushing technique demonstration and oral rinse programme etc.)
    - Visit to institution for the care of handicapped, physically, mentally, or medically compromised patients
    - Preventive dentistry: in the 4partment application of pit and fissure sealants, fluoride gel application procedure, A. R. T., Comprehensive health for 5 pta at least 2 patients

The colleges are encouraged to involve in the N.S.S. programme for college students for carrying out social work in rural areas
SUGGESTED DTERNSHIP PROGRAMME IN COMMUNITY DENTISTRY:

I. AT TEE COLLEGE:

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

a. Total oral health care approach- in order to prepare the new graduates in their approach to diagnosis, treatment planning, cost of treatment, prevention of treatment on schedule, recall maintenance of records etc. at least, patients (both children and adults of all types posting for at least one month).

b. The practice of their si4e preventive dentistry including oral health education

II. AT THE COMMUNITY ORAL HEALTH CARE CENTRE (ADOPTED BY THE DENTAL COLLEGE IN RUR L AREAS)

Graduate posted for at least one month of familiarize in:


b. Participation in rural oral health education programmes

c. Stay in the village to understand the problems and life in rural areas

III. DESIRABLE: Learning use of computers—at least basic programme. - Examination Pattern

I. INDEX: CASE HISTORY

b) Oral hygiene indices simplified- Green and Vermilion

c) Silness and Loe index for Plaque

d) Loe and Silness index for gingival

e) CPI

f) DMF:T and S, df.t and s

g) Deans fluoride index

II. HEALTH EDUCATION

1. Make one - Audio visual aid

2. Make a health talk

III. PRACTICAL WORK

1. Pit and fissure sealant

2. Topical fluoride application


2. Community Dentistry by Dr. Soben Peter.

3. Introduction to Bio-statistics by B. K. Mahajan

4. Research methodology and Eio-statistics by

5. Introduction to Statistical Methods by Grewal

Lectures ..... 30 Hours

Community Programme ... 100 Hours

QUOTA FOR FINAL BDS

1. Operative and Conservative Dentistry

   Class II - Silver amalgam - 12 cases

   Class III, & Class IV - Glass Ionomer Cement - 5 cases

   Class V - Glass Ionomer Cement - 5 cases

   Jacket Crown - 2 cases

   Anterior Root canal treatment - 3 cases

   Inlay-1

2. Prosthetics :

   Complete Denture - 5 cases

3. Periodontia

   Hand Scaling - 70 cases (along with III year)

   Ultrasonic Scaling - 5 cases

   Oral Hygiene Instructions - 10 cases.

4. Pedodontia
Restoration of Teeth - 15 cases
Hand Scaling - 15 cases
Extraction - 40 cases
5. Orthodontia : 5 cases Discussion & 5 removable appliances
Demonstration of Fixed appliances.
6. Oral Surgery :
250 Extractions

M.D.S. PART-1

ANATOMY

Confined to those aspects of Anatomy which demonstrate the fundamental principles and processes and clinical application
General knowledge of regional, applied, radiological and histological anatomy of the human body.
Knowledge of the composition - gross and minute structures, development and function of dental and related tissues and such aspects of embryology as have special dental significance. Recent advances in relation to these matters.
Anatomy of head, neck, face, brain and spinal cord including histology and embryology.

DENTAL ANATOMY

1. Development and growth of the face, teeth and jaws
2. Form and relations of human teeth
   a. The form and relations of permanent teeth
   b. Tooth sockets
   c. Deciduous teeth
   d. Dental arches
   e. Occlusion
   f. Supporting structures of the teeth
3. Early development of the teeth
   a. Early development of the tooth germs
   b. Function of the enamel organ
   c. Tooth eruption
4. Establishment of the deciduous and permanent dentition
   a. Shedding of deciduous teeth
   b. Chronology of eruption of teeth
5. Developmental, macroscopic and microscopic appearance of dental tissue.
   a. Enamel
   b. Dentine
   c. Pulp
   d. Cementum
   e. Periodontal membrane
   f. Bone
   g. Mucosa
6. Temporomandibular joint - Development, anatomy, function and mechanics.
7. Fascial Planes in relation to dental structures and the pathway of dental infections
8. Age changes in teeth and jaws.

PHYSIOLOGY

Sound knowledge of the body, the general principles of nutrition and metabolism. The mechanism whereby normal growth structures of the skeleton and the composition of the body fluids are regulated. Candidate should be familiar with those techniques which are commonly employed in clinical investigations.

PATHOLOGY

Familiarity with the general characteristics of bacteria and viruses and detailed knowledge of those which are important in dental surgery. Wound infection and cross infection. General Knowledge of toxins, immunity, allergy and actions and uses of antibiotics.

PHARMACOLOGY

1. Introduction: Mechanism of drug action, absorption, distribution, fate and excretion of drugs. Factors modifying drug action, bioassay of drugs
2. Drugs acting on central nervous system:
a) Anaesthetics - History and theory of anesthesia, Stages of anesthesia, Pre-anesthetic medications. General and cyclopropane.


c) Analgesics - Morphine and opium alkaloids, Salicylates, Acetanilide, Aminopyrine and Antipyrine.

d) Stimulants - Strychnine, Picrotoxine, Metrazal, Coramine, Camphor, Xanthine, Caffeine, Theophylline and theobromine.

e) Local anesthetics - Structures, Mode of action, Dosage and toxicity of Procaine, Chincocaine, Lignocaine (Lidocaine).

3. Drugs acting on the Autonomic Nervous System - General considerations, Parasympathomimetic drugs, Sympathomimetic drugs and Autonomic blocking agents.

4. Cardiovascular Drugs - Digitalis, Cardiac glycosides, Quinidine and Nitrites.

5. Drugs affecting urine formation: Diuretics and antiuretics.

6. Antiseptics, Germicides, fungicides and parasiticides.


10. Drugs acting on blood forming organs: Iron and iron salts, Liver extracts, Hematinic principles, coagulants and anticoagulants.

11. Minerals: Calcium, Iron, Phosphours and Trace elements - Deficiency therapeutic uses.

12. Antihistamines and Anti-Allergic drugs.


BIOCHEMISTRY


Carbohydrates: Mono-Saccharides, di saccharides and poly saccharides - their chemical nature and metabolism.

Lipids: Characters of simple and compound lipids. Their absorption and metabolism. Steroids.


Enzymes: Properties and role of metabolism and factors that modify them.

Biological oxidation, reduction and other chemical degradation.

Water electrolyte balance - Energy exchange, Caloric values, B.M.R. - caloric requirements of a man.

M.D.S. PART II

ORAL AND MAXILLOFACIAL SURGERY

A broad outline of theoretical, clinical and practical courses:


3. Laboratory investigations.

4. Surgical anatomy and pathology of Head and Neck.


6. Surgical Procedures for
   a. Diseases and defects for orofacial region
   b. Surgical management
   c. Prosthetic and orthodontic problems including principles of plastic surgery.
   d. Recent advances in Oral and Maxillofacial Surgery.
   e. Reimplantation of teeth
   f. Implants - Commonly used surgical techniques for implant procedures.

The MDS written examination shall consist of four papers, out of which two shall be pertaining to the subject, one in Applied Basic Sciences and one shall be Essays with emphasis on recent advances. Each paper shall be of 3 hours duration.

Clinical and practical examination of not less than 2 days duration involving case studies, diagnosis and treatment planning and execution of commonly used surgical procedures in Oral and Maxillofacial Surgery.

PERIODONTICS
A board outline of theoretical, clinical and practical courses.
1. Applied anatomy, Physiology, biochemistry of the periodontium.
2. Characteristic of periodontal disease, etiology, pathogenesis and microbiology
3. Periodontal therapeutics.
4. Surgical aspects of periodontics.
5. Traumatic periodontal disturbances.
6. Interrelationship of periodontics with other dental and medical clinical disciplines
7. Public health aspects of periodontal disease-preventive periodontics.
8. Current advances in periodontics.

Clinical Proficiency: A candidate should attain clinical proficiency by treating not less than 50 cases of periodontal disease involving different therapeutic techniques.

The MDS written examination shall consist of four papers, out of which two shall be pertaining to the subject one in Applied Basic Sciences and one shall be Essays with emphasis on recent advances. Each paper shall be of 3 hours duration.

Clinical and practical examination of not less than 2 days duration involving case studies, diagnosis and treatment methods used in treating periodontal diseases.

**CONSERVATIVE DENTISTRY AND ENDODONTICS**

Broad outline of theoretical, clinical and practical courses:

**Conservative Dentistry:**
1. History and rationale of conservative procedures.
2. Occlusion
3. Pathologic and non-pathologic lesions of the hard tissue of teeth, advanced knowledge of etiology, diagnosis, treatment and prevention.
4. Modern development and advanced knowledge of restorative materials, procedures, cutting tools, drugs and chemicals used in conservative dentistry.
5. All types of restorations used in conservative dentistry.
6. Modern biological and mechanical concept
7. Dental caries-detailed study of research methods used in studying dental caries and its prevention.
8. Conservative dentistry in relation to other branches of dentistry including geriatric dentistry.

**Endodontics:**
1. History and rationale of endodontic procedures
2. Pulp and periapical pathology, advanced knowledge of etiology, diagnosis, treatment and management of pulp involved in teeth.
3. Bacteriological investigations and intracoronal medication
4. Advanced knowledge of development of root canal instruments their sterilization and use.
5. Advanced knowledge of restorative materials and operative procedures in endodontics.
7. Endodontic procedures for reimplantation of teeth and fundamentals of surgical procedures for reimplantation of teeth. Adequate number of cases should be treated by all available methods and restorative material including bleaching of discoloured teeth.

The MDS written examination shall consist of four papers, out of which two shall be pertaining to the subject one in applied basic sciences and one shall be Essays with emphasis on recent advances. Each paper shall be of 3 hours duration.

Clinical and practical examination of not less than 2 days duration involving case studies, diagnosis and treatment of different conditions involving conservative and endodontic procedures, which would demonstrate the clinical and technical ability of the individual.

Subject of Conservative Dentistry is concerned with those procedures which, applied to exposed surfaces of teeth in the dental arches, prevent pathologic process in these areas or which, if disease and deterioration has occurred and the consequence of these conditions have resulted, restore them in so far as possible to normal physiological condition, esthetic appearance and occlusal relationship, with a view of preservation of dental health and general health at an optimum level. The study includes endodontics.

**ORAL PATHOLOGY**

Broad outline of theoretical, clinical and practical courses:
1. Study of principles of routine and special techniques used for histopathology including principles of histochemistry as related to oral pathology.
2. Advanced and Histopathologic study of dental and oral tissues including embryologic consideration.
3. Study of special pathology of oral regions as well as relation of local pathologic and clinical findings to systemic conditions.
4. Oral microbiology and their relationship to various branches of dentistry
5. Oral diagnosis of soft tissue changes-study of basic clinical changes and their significance to dental and oral diseases as related to oral pathology.
6. Forensic dentistry.
7. Recent advances in oral pathology and oral microbiology
8. Study of principles and techniques of oral cytology and oral biopsy procedures.

The MDS written examination shall consist of four papers, out of which two shall be pertaining to the subject, one in Applied Basic Sciences and one shall be Essays with emphasis on recent advances. Each paper shall be of 3 hours duration.

Clinical practical and viva voce examination of not less than 2 days duration involving case studies, clinical and pathological diagnosis of oral diseases.
ORTHODONTICS AND DENTOFACIAL ORTHOPAEDICS

1. The MDS Programme should consist of seminars on various subjects on Orthodontics like growth and development, anthropology, genetics, embryology, statistics, nutrition, normal occlusion and variations, malocclusions, etiology of malocclusions, radiology and cephalometrics, preventive and interceptive orthodontics, corrective orthodontics, development of orthodontic appliance and techniques, histological changes related to orthodontic treatment and retention.

2. Practical training should consist of preparing orthodontic study models, fabrication of various components of removable and fixed appliances and fabrication of complete appliances.

3. Clinical training should consist of preparing case records, appliances and treatment of different types of malocclusions by different mechanisms.


5. Case presentation the candidate should prepare a complete record of atleast five fully treated cases by any techniques and present the same at the practical examination. Case presentation and discussion of the same will form an important part of the practical examination.

The MDS written examination shall consist of four papers out of which two shall be pertaining to the subject, one in Applied Basic Sciences and one shall be in Essays with emphasis on recent advances. Each paper shall be of three hours duration.

Clinical practical and viva voce examination of not less than two days duration involving diagnosis, case analysis and treatment planning of a case and discussion of the same followed by the fabrication of a fixed and removable and functional appliance.

PROSTHODONTICS

Its practical, clinical and practical courses in Prosthodontics shall broadly comprise of the following:

1. Study of human masticatory apparatus and its functions in health, in deranged occlusal states and in conditions incidental to partial or complete loss of teeth and/or facial structures.

2. Study of the principles, procedures and techniques of constructing and maintaining various types of dentures and allied prosthesis including the material used.

3. Study of biological and mechanical consideration related to various types of dentures and allied prosthesis.

4. A candidate should complete not less than 300 cases consisting of all types of prosthodontics appliances.

5. The MDS written shall consist of four papers, out of which two shall be pertaining to the subject, one in Applied Basic Sciences and one shall be an Essays with emphasis on recent advances. Each paper shall be of 3 hours duration.

Clinical and practical and viva voce examination of not less than two days duration involving case studies, diagnosis and treatment planning and execution of commonly used prosthodontics appliances and replacements.

ORAL MEDICINE AND RADIOLOGY

A broad outline of the theoretical, clinical and practical courses:

1. Clinical pathology and microbiology as applied to oral and facial lesions.

2. Congenital and hereditary disorders involving lesions of orofacial region.

3. Systemic disease with oral manifestations.

4. Haematological, dermatological and neurological conditions with oral manifestations.

5. Salivary glands disorders.

6. Diseases of reticuloendothelial system and autoimmune diseases.

7. T.M.J. dys function.

8. Allergy, forensic odontology and other miscellaneous conditions.


10. Therapy in above conditions.

RADIOLOGY


2. Hazards of radiation.

3. Radiological techniques of head and neck region.


5. Traces in diagnosis.

The MDS written examination shall consist of 4 papers out of which two shall be pertaining to the subject, one in applied basic sciences and one shall be Essays with emphasis on recent advances. Each paper shall be of 3 hours duration.

Clinical and practical and viva voce examination of not less than two days duration involving case studies, diagnosis and treatment planning for oral diseases, radiological technique and radio diagnosis to demonstrate the candidates proficiency.

PUBLIC HEALTH DENTISTRY

OBJECTIVES:

At the end of 3 years of training the candidate should be able to

KNOWLEDGE:

Apply basic science knowledge regarding etiology, diagnosis and management of the prevention, promotion and treatment of all the oral conditions at the individual and community level.

Identify social, economic, environmental and emotional, determinants in a given individual patient or a community for the purpose of planning and execution of Community Oral Health Program.

Ability to conduct Oral Health Surveys in order to identify all the oral health programs affecting the community and find solution using multidisciplinary approach.
Ability to act as a consultant in community Oral Health, tech guide and take part in research (both basic and clinical), present and publish the outcome at various scientific conference and journals, both national and international level.

**SKILLS:**
The candidate should be able to

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.

Plan appropriate Community Oral Health program, conduct the program and evaluate, at the community level.

Ability to make use of knowledge of epidemiology to identify causes and plan appropriate preventive and control measures.

Develop appropriate person power at various levels and their effective utilization

Develop Survey and use appropriate methods to impart Oral Health Education.

Develop ways of helping the community towards easy payment plan and followed by evaluation for their oral health care needs.

Develop the planning, implementation, evaluation and administrative skills to carry out successful community oral health programs.

**VALUES:**

Adopt ethical principles in all aspects of Community Oral Health Activities.

To apply ethical and moral standards while carrying out epidemiological researches.

Develop communication skills, in particular to explain the causes and prevention of oral diseases to the patient

Be humble and accept the limitations in his knowledge and skills and to ask for help from colleagues when needed and promote teamwork approach.

Respect patient's rights and privileges including patients right to information and right to seek a second opinion.

**COURSE CONTENTS:**

Paper – I: Applied Basic Sciences

**APPlied Anatomy and History**

A. Applied Anatomy in relation to

Development of face

Branchial arches

Muscles of facial expression

Muscles of mastication

TMJ

Salivary gland

Tongue

Salivary gland tongue

Hard and soft palate

Infratemporal fossa

Paranasal air sinuses
Pharynx and larynx

Cranial and spinal nerves – with emphasis on trigeminal, facial, glossopharyngeal and hypoglossal nerve

Osteology of maxilla and mandible

Blood supply, venous and lymphatic drainage of head and neck

Structure and relations of alveolar process and edentulous mouth

Genetics – fundamentals

B. Oral History:

Development of dentition, Innervations of dentin and pulp

Periodontium – development, history, blood supply, nerve supply and lymphatic drainage

Oral mucous membrane

Pulp-Periodontal complex

**APPLIED PHYSIOLOGY AND BIOCHEMISTRY**

Cell

Mastication and deglutition

Food and nutrition

Vitamins and minerals

Fluid and electrolyte balance

Pain pathway and mechanism – types, properties

Blood composition and functions, clotting mechanism and erythropoiesis, Blood groups and transfusions, Pulse and blood pressure

Dynamics of blood flow

Cardiovascular homeostasis – heart sounds

Respiratory system: Normal physiology and variations in health and disease, Asphyxia and artificial respiration

Endocrinology: thyroid, parathyroid, adrenals, pituitary, sex hormones and pregnancy, Endocrine regulation of blood sugar.

A. APPLIED PATHOLOGY:

Pathogenic mechanism of molecular level

Cellular changes following injury

Inflammation and chemical mediators

Oedema, thrombosis and embolism

Hemorrhage and shock

Neoplasia and metastasis

Blood disorders.

Histopathology and pathogenesis of dental caries, periodontal disease, oral mucosal lesions and malignancies, HIV

Propagation of dental infection.
B. MICROBIOLOGY:
Microbial flora of oral cavity
Bacteriology of dental caries and periodontal disease
Virology of HIV, herpes, hepatitis
Parasitology
Basic immunology – basic concepts of immune system in human body
Cellular and humoral immunity
Antigen and antibody system
Hypersensitivity
Autoimmune disease

C. ORAL PATHOLOGY:
Detailed description of disease affecting the oral mucosa, teeth, supporting tissues and jaws.

PHYSICAL AND SOCIAL ANTHROPOLOGY:
Introduction and definition
Appreciation of the biological basic of health and disease
Evaluation of human race, various studies of different races by anthropological methods.

APPLIED PHARMACOLOGY:
Definition, scope and relation to other branches of medicine, mode of action, bioassay, standardization, pharmacodynamics, Pharmacokinetics.
Chemotherapy of bacterial infections and viral infection – sulphonamides and antibiotics
Local anesthesia
Analgesics and anti-inflammatory drugs
Hypnotics, tranquilizers and antipyretics
Important hormones- ACTH, cortisone, insulin and oral antidiabetics.
Drug addition and tolerance
Important pharmacological agents in connection with autonomic nervous system adrenaline, noradrenaline, atropine
Brief mention of antihypertensive drugs
Emergency drugs in dental practice
Vitamins and haemopoietic drugs.

RESEARCH METHODOLOGY AND BIOSTATISTICS:
Health Informatics:
basic understanding of computer and its components, operating software (windows), Microsoft office, preparation of teaching materials like slides, project, multimedia knowledge.

Research methodology:
definitions, types of research, designing written protocol of research, objectivity in methodology, quantification, records and analysis.
Biostatics:
Introduction, applications, uses and limitations of bio-statistics in Public Health dentistry, collection of data, presentation of data, measures of central tendency, measures of dispersion, methods of summarizing, parametric and non parametric tests of significance, correlation and regression, multivariate analysis, sampling and sampling techniques – types errors, bias, trial and calibration.

Computers:
Basic operative skills in analysis of data and knowledge of multimedia.

PAPER – II PUBLIC HEALTH

Public Health

Definition concepts and philosophy of dental health

History of public health in India and at international level

Terminologies used in public health

Health

Definition, concepts and philosophy of health

Health indicators

Community and its characteristics and relation to health

Disease:

Definition, Concepts

Multifactorial causation, natural history, risk factors

Disease control and eradication, evaluation and causation, infection of specific diseases

Vaccines and immunization

General epidemiology:

Definition and aims, general principles

Multifactorial causation, natural history, risk factors

Methods in epidemiology, descriptive, analytical, experimental and classic epidemiology of specific disease, uses of epidemiology.

Duties of epidemiologist

General idea of methods of investigating chronic disease, mostly non – infectious nature, epidemic, endemic and pandemic

Ethical conversation in any study requirement

New knowledge regarding ethical subjects

Screening of diseases and standard procedures used.

Environmental health:

Impact of important components of the environment of health

Principles and methods of identification, evaluation and control of such health hazards

Pollution of air, water, soil, noise, food

Water purification, international standards of water

Domestic and industrial toxins, ionizing radiation

Occupational hazards
Waste disposal – various methods and sanitation.

Public health education:
Definition, aims, principles of health education
Health education, methods, models, contents, planning health education programs

Public Health practice and administration system in India

Ethics and jurisprudence:
Basic principles of law
Contract laws – dentist – patient relationships & Legal forms of practice
Dental malpractices
Person identification through dentistry
Legal protection for practicing dentist
Consumer protection act

Nutrition in Public Health:
Study of science of nutrition and its application of human problem
Nutritional surveys and their evaluations
Influence of nutrition and diet on general health and oral health, dental caries, periodontal disease and oral cancers
Dietary constituents and carcinogenicity
Guidelines for nutrition

Behavioral science:
Definition and introduction
Sociology: Social class, social group, family types, communities and social relationships, culture, its effect on oral health
Psychology: definition, development of child psychology, anxiety, fear and phobia, intelligence, learning, motivation, personalities, fear, dentist – patient relationship modeling and experience.

Hospital Administration
Departmental maintenance, organizational structures
Type of practices
Biomedical waste management

Health care delivery system:
International oral health care delivery systems – Review
Central and state system in general and oral health care delivery system if any
National and health policy
National health programme
Primary health care – concepts, oral health in PHC and its implications
National and international health organizations
Dentists Act 1928, Dental council of India, Ethics, Indian Dental Association
Role of W.H.O and Voluntary organizations in Health Care for the Community.

**Oral Biology and Genetics:**

A detailed study of cell structure
Introduction to Genetics, Gene structure, DNA, RNA
Genetic Counseling, gene typing
Genetic approaches in the study of orals disorder
Genetic Engineering – Answer to current health problems.

**PAPER – III DENTAL PUBLIC HEALTH**

**Dental public health**

History
Definition and concepts of dental public health
Difference between clinical and community dentistry
Critical review of current practice
Dental problems of specific population groups such as chronically ill, handicapped and institutionalized group.

**Epidemiology of oral disease and condition**

Dental caries, gingival, periodontal disease malocclusion, dental fluorosis, oral cancer, TMJ disorders and other oral health related problems.

**Oral survey procedures**

Planning
Implementation
WHO basic oral health methods 1997
Indices for dental diseases and conditions
Evaluation

**Delivery of Dental care:**

Dental person power – dental auxiliaries
Dentist – population ratios
Public dental care programs
School dental health programs – Incremental and comprehensive care
Private practice and group practice
Oral health policy – National and in international policy

**Payment for dental care**

Prepayment
Post – payment
Reimbursement plans
Voluntary agencies
Evaluation of quality of dental care:
Problems in public and private oral health care system program
Evaluation of quality of services, governmental control

Preventive dentistry:
Levels of prevention
Preventive oral health program screening, health education and motivation
Prevention of all dental disease – dental caries, periodontal disease, oral cancer, malocclusion and Dentofacial anomalies.
Role of dentist in prevention of oral disease at individual and community level

Fluoride
History
Mechanism of action
Fluoride toxicity
Fluorosis
Systemic and topical preparations
Advantages and disadvantages of each
Update regarding fluorosis
Epidemiological studies
Methods of fluoride supplements
Defluoridation techniques
Plaque control measures
Health education
Personal oral hygiene
Tooth brushing technique
Dentifrices, mouth rinses
Pit and fissure sealant, ART
Preventive oral health care for medically compromised individual
Update on recent preventive modalities
Caries vaccines
Dietary counseling

Practice management
Definition
Principles of Management of dental practice and types
Organization and administration of dental practice
Current trends

**STRUCTURED TRAINING SCHEDULE:**

First year

**SEMINARS**

5 seminars in basic sciences subject

To conduct 10 journals clubs

Library assignment on assigned topics – 2.

Submission of synopsis for dissertation – within 6 months

Periodic review of dissertation at two monthly intervals.

**CLINICAL TRAINING**

Clinical assessment of patient

Learning different criteria and instruments used in various oral indices – 5 cases each

Oral Hygiene Index – Greene and Vermillion

Oral Hygiene Index – Simplified

DMF – DMF (T), DMF (S)

Def

Fluorosis Indices – Dean’s Fluorosis Index, Tooth Surface Index for Fluorosis, Thylstrup and Fejerskov Index.

Community Periodontal Index (CPI)

Plaque Index – Silness and Loe

WHO oral Health Assessment Form – 1987

Carrying out treatment (under comprehensive oral health care) of 10 patients maintaining complete records.

**FIELD PROGRAMME**

Carrying out preventive programs and health education for school children of the adopted school.

School based preventive programs

Topical Fluoride application—Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes, Fluoride mouth rinses

Pit and Fissure sealant – Chemically cured (GIC) Light cured

Minimal Invasive Treatment—Preventive Resin Restoration (PRR), Atraumatic Restorative Treatment (ART)

Visit to slum, water treatment plant, sewage treatment plant and milk dairy, Public Health Institute, Anti-Tobacco Cell, Primary Health Center and submitting reports.

In additions the postgraduate shall assist and guide the under graduate students in their clinical and field programs.

Second year

**SEMINARS**

Seminars in Public Health and Dental Public Health Topics

Conducting journal clubs
Short term research project on assigned topics – 2

Period review of dissertation at monthly reviews.

**CLINICAL TRAINING CONTINUATION OF THE CLINICAL TRAINING**

Clinical assessment of patient

Learning different criteria and instrument used in various oral indices

Oral Hygiene Index – Greene and Vermillion

Oral Hygiene Index – Simplified

DMF – DMF (T), DMF (S)

Det t/s

Fluorosis indices – Dean’s Fluorosis Index, Tooth Surface Index for Fluorosis, Thylstrup and Fejerskov Index

Community Periodontal Index (CPI)

Plaque Index – Silness and Loe

WHO Oral Health Assessment Form – 1987

Carrying out treatment (under comprehensive oral health care) of 10 Patient – maintaining complete records

**FIELD PROGRAM – CONTINUATION OF FIELD PROGRAM**

Carrying out school dental health education

School based preventive programs


Pit and Fissure Sealant – Chemically cured (GIC) light cured

Minimal Invasive Treatment – Preventive Resin Restoration (PRR), Atraumatic Restorative Treatment (ART)

Organizing and carrying out dental camps in both urban and rural areas.

Assessing oral health status of various target groups like school children, Expectant mothers Handicapped, Underprivileged and geriatric populations. Planning dental manpower and financing dental health care for the above group.

Application of the following preventive measures in clinic – 10 cases each

Topical fluoride application – Sodium Fluoride, Stannous Fluoride, varnishes

Pit and Fissure Sealant

Planning total health care for school children in an adopted school:

Periodic surveying of school Children

Incremental dental care

comprehensive dental care

Organizing and conducting community oral health surveys for all over conditions – 3 surveys

In addition the post graduate shall assist and guide the under graduate students in their clinical and field programs

To take lecture classes (2) for undergraduate students in order to learn teaching methods (pedagogy) on assigned topic.
Third Year:

SEMINARS

Seminars on recent advances in preventive dentistry and dental public health

Critical evaluation of scientific articles – 10 articles.

Completion and submission of dissertation

CLINICAL TRAINING:

Clinical assessment of patient

Learning different criteria and instruments used in various oral indices – 5 each

Oral Hygiene Index – Greene and Vermillion

Oral Hygiene Index – Simplified

DMF – DMF (T), DMF (S)

Def t's

Fluorosis Indices- Dean's Fluorosis Index, Tooth Surface Index for Fluorosis, Thystrup and Fejerskov Index

Community Periontal Index (CPI)

Community Periodontal Index (CPI)

Plaque Index – Silness and Loe

WHO oral Health Assessment Form – 1987

Carrying out treatment (Under comprehensive oral health care) of 10 patients maintaining complete records

Carrying out school dental health education

School based preventive programs

Topical Fluoride application – Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparations and Fluoride varnishes

Pit and Fissure sealant

Minimal Invasive Techniques – Preventive Resin Restorations (PRR), Atraumatic Restorative Treatment (ART)

To take lecture classes (2) for undergraduate students in order to learn teaching methods (pedagogy)on assigned topic

Exercise on solving community health problems – 10 Problems

Application of the following preventive measure in Clinic – 10 cases each.

Topical Fluoride application – Sodium Fluoride, Stannous Fluoride, Acidulated Phosphate Fluoride preparation

Pit and Fissure sealants

Dental – health education training of school teachers, social workers, health workers,

Posting at dental satellite centers/ Nodal centers

In addition the post graduate shall assist and guide the under graduate students in their clinical and field programs.

Before completing the third year M.D.S., a student must have attended two national conference. Attempts should be made to present two scientific papers, publication of a scientific article in a journal.

MONITORING LEARNING PROCESS:

It is essential to monitoring the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on
participation of students in various teaching/learning activities. It may be structured and assessment be done using checklists that assess various aspects, checklists are given in section IV.

**SCHEME OF EXAMINATION:**

A. **Theory**: 300 Marks

Written examination shall consist of four question papers each of three hours duration. Total marks for each paper will be 100. Paper I, II and III shall consist of two long questions carrying 200 marks each and 6 short essay questions each carrying 10 marks. Paper IV will be on Essay questions on recent advances may be asked in any or all of the papers. Distribution of topics for each paper will be as follows.


Paper – II: Public Health

Paper – III: Dental Public Health

Paper – IV: Essay

Topics of current interest in community oral health

The topics assigned to the different papers are generally evaluated under those section. However a strict division of the subject may not be possible and some overlapping of topics is inevitable students should be prepared to answer overlapping topics.

B. **Practical / Clinical Examination**: 200 Marks

Clinical examination of at least 2 patient representing the community – includes history main complaints, examination and recording of the findings, using indices for the assessment of oral health and prescription of the observation including diagnosis comprehensive treatment planning

Performing:

- One of the treatment procedures as per treatment plan (Restorative, surgical rehabilitation) (50 marks – (1 ½ Hrs)

- Preventive oral health care procedure (50 marks – (1 ½ Hrs)

- One of the procedures specified in the curriculum

Critical evaluation of a given research article published in an international journal (50 marks – (1 Hrs)

Problem solving – a hypothetical oral health situation existing in a community is given with sufficient data. The student as a specialist in community dentistry is expected to suggest practical solutions to the existing oral health situation of the given community (50 marks – (1 ½ Hrs)

C. **Viva Voce**: 100 Marks

Viva voce examination : 80 Marks

All examiners will conduct viva-voce conjointly on candidate’s comprehensive, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentations and discussion on dissertation also.

Pedagogy Exercise: 20 Marks

A topic to given to each candidate in the beginning of clinical examination, He/She is asked to make a presentation on the topic for 8-10 Minutes.

11. **EXAM PATTERN AND SUBJECTS**

First year BDS

- Paper I - General Anatomy, Embryology and Histology
- Paper II - General Human Physiology and Bio Chemistry
- Paper III - Human Oral Anatomy, Physiology, Histology and Tooth Morphology

Second year BDS

- Paper I - Materials used in Dentistry
- Paper II - General Pathology and Microbiology
- Paper III - General and Dental Pharmacology and Therapeutics

Third year BDS

- Paper I - Oral Pathology and Oral Microbiology
- Paper II - General Medicine
- Paper III - General Surgery
Final year BDS

Paper I - Orthodontics and Dentofacial Orthopaedics
Paper II - Oral Medicine Oral Diagonosis and Radiology
Paper III - Pedodontics and Preventive Dentistry
Paper IV - Conservative Dentistry and Endodontics
Paper V - Periodontics
Paper VI - Oral and Maxillofacial Surgery
Paper VII - Prosthodontics

Paper VIII - Public Health Dentistry

FOR BDS: Consists of Theory, practical, Vivavoce and
Internal examinations.
Theory: 100 marks
a. Essay : 2
b. Short Notes : 12
Practicals: 100 marks
Vivavoce : 100 marks
Internals: 100 marks
Total: 400 marks
A candidate has to pass in theory, practicals, Vivavoce and Internals. Minimum marks for pass - 50 marks in each.

For MDS: Consists of theory (four papers) and practical examinations
Theory: Paper 1, 2 and 3 Essay question: 10 x10 = 100
Paper 4 (Recent Advances) 4 x 25 = 100

12. LIST OF BDS CANDIDATES PASSED IN FEB 2012

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<tr>
<th>NAME</th>
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<tr>
<td>MUTHUKUMAR M</td>
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<td>BALAKRISHNA RN</td>
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<td>DEEPTI HADA</td>
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<td>DEVI BREETHI M</td>
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<td>MOHAMED JAMEEL RAJA S</td>
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<td>PRAVEEN KUMAR L</td>
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<td>PRETTY PRIYADARSHINI</td>
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### List of BDS Candidates Passed in Aug 2011

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<th>Name</th>
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<tr>
<td>Suvedha B.J.</td>
<td>Manoj Kumar P A</td>
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<td>Arun Kumar M</td>
<td>Monica Ravi</td>
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<td>Periyadurai K.</td>
<td>Monika Garg</td>
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<td>Sivakumar K</td>
<td>Nandhini JVR</td>
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<td>Sivarajan S.</td>
<td>Nandhini M</td>
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<td>Subbulakshmi. S.</td>
<td>Naziya Sulthana F</td>
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<td>Amala Aarthi F</td>
<td>Owaiss Fathima F</td>
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<td>Ameerunisa F</td>
<td>Poonguzhali R</td>
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<td>Angelin Megha MP</td>
<td>Pradeepa R</td>
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<td>Anjali Agarwal</td>
<td>Priya Ranjani S</td>
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<td>Anna Poorani A V</td>
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<td>Saloni Angra</td>
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<td>Saranya R</td>
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<td>Saravanan R</td>
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<td>Bhuvaneswari G</td>
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<td>Deepiha D</td>
<td>Shamini Ravisandran</td>
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<td>DeepthiPriya S</td>
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<td>Durga Devi R</td>
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<td>Elzi Tephillah P</td>
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<td>Ganesan S</td>
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<td>Gayathri S</td>
<td>Sujana Catherine S</td>
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<td>Geethanjali G</td>
<td>Sumaiyya Fathima MS</td>
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<td>Hannah R</td>
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<td>HARSHPREET KAUR</td>
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<td>ISHA JUNEJA</td>
<td>SURYA PALLAVI S</td>
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<td>JASIMA RANI B</td>
<td>UMA PK</td>
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<td>JISHA G</td>
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<td>KANMANI M</td>
<td>VIKRAM A</td>
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<td>KARTHIK PRABU K</td>
<td>VINOTH KUMAR P</td>
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<tr>
<td>KAUSAR CHAND N</td>
<td>VISHNU M</td>
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<tr>
<td>LESLIE RANI S</td>
<td>YASMIN BANU B</td>
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<td>MALATHI T</td>
<td></td>
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<tr>
<td>MALIHA SAMAN A</td>
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**14. LIST OF MDS CANDIDATES COMPLETED THE COURSE IN MAY 2012**

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>GANDHIMATHI J</td>
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<tr>
<td>JAYESH KUMAR JAIN</td>
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<tr>
<td>KARTHIGA JOTHI C</td>
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<td>KRISHNA MEERA N.</td>
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<tr>
<td>NITAI DEBNATH</td>
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<td>PRATIBHA RAWAT</td>
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<td>DEEPALAKSHMI N.</td>
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<tr>
<td>NEHA SETHI</td>
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<tr>
<td>PRIYADHARSHINI V</td>
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<tr>
<td>SHANTA NEGI</td>
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<tr>
<td>DAVIDSON RAJIAH</td>
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<tr>
<td>PANGARIKAR ANUNAY BHASKARAO</td>
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<td>SHANMUGA PRIYA N</td>
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<tr>
<td>VARUN RANA</td>
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<tr>
<td>DISHA THAREJA</td>
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<td>MUTHU VALLI S.</td>
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<td>URMILA P</td>
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<tr>
<td>VARALAKSHMI R.P.</td>
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<td>VENKATESH S</td>
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<td>ARUNKUMAR C</td>
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<td>AWANINDRA KUMAR JHA</td>
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<td>DINESH B.</td>
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<td>KAVITHA N.</td>
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<td>MANONMANI A</td>
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<td>MITTALI SETHI</td>
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<td>LEENA SELVAMARY A</td>
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<td>KOJAM SASHIKUMAR SINGH</td>
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<td>NIRANZENA</td>
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15. CODE OF ETHICS

In order to uphold the dignity and honour of the dental profession and its standards, to extend its sphere of usefulness and to promote the advance of Dental science and understand more clearly the patients and the community at large, the following Code of Ethics have been prescribed.

It is the duty of every dentist to govern himself in accordance with the underlying principles which have motivated the formulation of the code. It is not assumed that following articles cover the whole field of dental ethics, the addition to those set forth herein. Briefly the “Golden rule” should be conscientiously applied by every member of the dental profession.

It is unprofessional for a dentist to advertise by handbills, poster, circulars, cards and signs, or in newspapers or in publications calling attention to special methods of practice or claiming excellence over other practitioners or to use or display advertisements of any kind. It is also unprofessional to publish reports or certificates in public prints. This does not exclude a practitioner either from using professional cards of suitable size with name, titles address and telephone number printed in modest type or from having the same character of card in a newspaper at the time of commencement of practice or change in address for not more than three insertions at a time or from merely announcing his speciality on his professional card.

It is unprofessional for dentists to pay or accept commission on fees, professional services or for radiographs or on other articles supplied to patients by pharmacists or others.

One dentist should not disparage the services of another to a patient, as criticism of operations which are apparently defective may not be just without complete knowledge of the conditions under which they were performed. However the welfare of the patient is paramount to every other consideration. It should be conserved to the practitioner’s knowledge even if he finds indisputable evidence that a patient is suffering from previous faulty treatment, but it is his duty to institute correct treatment at once doing, it with as little comment as possible and in such a manner as to avoid reflection on his predecessor.

If a dentist is consulted in an emergency by the patient of another practitioner who is temporarily absent from his office, or by a patient who is away from home, the duty of the dentist so consulted is to relieve the patient of any immediate disability by temporary service only and then refer the patient back to the regular dentist.

When a dentist is called in consultation by fellow practitioners he should hold the discussions held during the consultation as confidential and under no circumstances should he accept charge of the case without the request of the dentist who has been attending to it.

It is unethical for dentists to connive in or aid illegal activities indulged in by others. It is their duty to expose such persons without fear or favour.

It is unethical for dentists to give testimonial directly or indirectly concerning the supposed virtue of any unapproved therapeutic agent or medicines or to promise radical cures by employing secret method of treatment.

The dentist should be mentally and physically clean. He should be honest in all his dealings with his fellowmen, as is in keeping with the honor and dignity of a cultured and professional gentlemen.

16. LIST OF PRIZES & MEDALS

1. Dr. P.K.Saraswathy Prize in Periodontics – K. BHARATHI
   (Highest mark in the University Examination)
2. Dr. K.H.Panishankar Prize in Periodontics – T. MALATHI
   (Second highest mark in the University Examination)
3. The Indian Dental Association - Madras State Branch Gold Medal.
   (Best outgoing academic student in IV B.D.S.)—M. PREETHI
4. Colgate Best Outgoing student for I year.
5. Colgate Best Outgoing student for II year
6. Colgate Best Outgoing student for III year
7. Colgate Best Outgoing student for IV year
8. Dr.K.S.G.A.Nasser award in Prosthodontics. (Prosthetics - Prize Exam)
9. Best Outgoing Student Award from Old Student’s fund—M. VISHNU PRIYA
10. Dr. Perumal Pillai’s Prize for General Medicine – M. VISHNU PRIYA
11. Mankarsai’s Prize for highest mark in Orthodontics University Exam (BDS) --- SALONI ANGRA

STUDENTS TOPPERS IN 2011

I YEAR:

II YEAR:

III YEAR:

IV YEAR: M. PREETHI

INSTRUCTIONS FOR STUDENTS

Rules of the College:

(Parents and students must read and familiarize themselves with the rules of the college and extend full co-operation.)

1. Every student must possess a college diary.

2. Students must be in class 5 minutes before the scheduled class hours.

3. Clinical students must report to the respective departments in time.

4. It is compulsory for every student to come to college neatly dressed.

5. Wearing Jeans and T-shirts, leggings, Sleeveless Blouses, chappals, during college and hospital working hours is prohibited.

6. Students must keep their hair tidy, neat and well combed. Girls having long hair should pleat their hair properly. Wearing flowers is not accepted. Wearing a cap and Masks is mandatory for the students’ safety at the lab and clinic.

7. All students are answerable to the college authorities for their misbehavior.

8. Students are responsible for their books and belongings.

9. Students are strictly forbidden from bringing Mobile phones to the classrooms, Clinics & labs.

10. Every student is instructed to utilize the library for study purposes only.

11. Students are expected to take part in the co-curricular activities and clinical society meetings organized by the college authorities. Clinical society meetings will be held on Third Saturday of every month.

12. Cash collection by students for any purpose whatsoever requires the prior sanction by the college authorities.

13. Any communication (request/complaint) made by the parents should be addressed to The Principal, Tamil Nadu Government Dental College.

14. Parents are expected to co-operate with the working of the college by enforcing discipline, punctuality and regularity on their wards.

15. Reports sent to parents should be duly signed by the parent, taken note of and returned to the college promptly.

16. Parents are requested to keep track of their wards’ progress.

17. Irregular attendance, absence without prior permission? (i.e. leave application) Insubordination to teacher and any kind of cheating and misconduct or any habit and behavior objectionable to the management of the college are sufficient reasons for punishment.

18. Railway concession will be given for students only once a year for the summer vacation.

19. Request for bonafide letters must reach the college office well in advance.

20. No student must stay away from college except for unavoidable reasons. A written application in the prescribed format available in the college diary should be submitted. Medical leave will be granted only on production of medical certificate from a qualified medical practitioner.

21. Smoking is strictly forbidden in the college campus.

22. Wearing the coat with the name badge is compulsory during OP hours and in the lab.
23. As per the university regulations, 90% attendance is mandatory for undergraduates and postgraduates. This includes both regular and additional batch of students.

24. Haphazard parking of student’s two wheelers and four wheelers is to be avoided.

25. CRRI’s are permitted to avail 12 days of leave during their entire CRRI period.

26. PG’s are permitted to avail 12 days of leave per year.

27. Students must wear their name badges compulsorily.

28. Students must wear face mask and head cap while in lab or OP hours.

CONDUCT AND BEHAVIOUR
The college is particular about the conduct and behaviour of the student. Good behaviour is expected in all aspects.
1. Courtesy and good manners.
2. Self discipline and self control.
4. Punctuality.
5. Humane approach to the patients.
6. Honorable behaviour during exams and tests.
7. Good behaviour in the classrooms and corridors.
8. Work ethics.

9. RAGGING AND EVE TEASING ARE STRICTLY BANNED IN & OUT OF CAMPUS IN ACCORDANCE WITH THE SUPREME COURT ORDER
STUDENTS INVOLVED IN RAGGING WILL BE DISMISSED INSTANTANEOUSLY BY THE PRINCIPAL.

18. LIBRARY BOOKS

The air conditioned library established for the use of students and staff has developed into a multifaceted learning centre. The learning resources acquired on demand provide access to contemporary ideas and opinions of experts in the field of dentistry.

To cater to the education of students, the library has a rich collection of

5766 books
35 kinds of Foreign journals
12 kinds of Indian journals
Book bank : 410

Apart from the large number of books for UGs, a large number of reference books and journals are stocked for the PG students & those who are interested in pursuing research.

100 chairs and tables have been donated by Alumni association to the Library.

The library has been renovated with

(i) new air conditioners
(ii) new study tables and chairs
(iii) an index card system

(iv) Internet connection

Librarian : Mr. D. Krishnamurthy, M.A., M.L.I.S., C.F.M.S

Medical officers incharge of Library
Dr. G.Vimala, M.D.S.,
Dr. P.Rupkumar M.D.S.,
Dr. G.Vinodh M.D.S.,

19. STUDENT’S COUNCIL - 2011 - 12

PRINCIPAL : Dr. K.S.G.A. NASSER
VICE PRINCIPAL : Dr. M.C. SAINATH
STUDENTS COUNCIL
ADVISOR (ACADEMIC ) : Dr. C.THULASINGAM
STUDENTS COUNCIL
ADVISOR (CULTURALS ) : Dr. T. MALATHI
COUNCIL MEMBERS:

PRESIDENT - DR. S.AJANA CATHERINE
VICE PRESIDENT - Mr. MANIGANDAN
GENERAL SECRETARY - DR. A.VIKRAM
ASST. GEN.SECRETARY - M.R. MOHAMMED ISMAIL
TREASURER - DR. VIDHYA
CULTURALS SECRETARY - DR. D.DEEPHIKA
ASST. CULT.SECRETARY - MR. JAVID UR RAHMAN
EDITORIAL BOARD - DR. R.SUPRAJA

MR. CYRIL BENEDICT
First year anniversary celebrations of NCC was held on 23rd November 2011. Commodore Sartaj Imam was the chief guest on the occasion. Our beloved principal Dr. K. S. G. A. Nasser presided over the function. The function was started with the planting of tree saplings at the college campus by the chief guest and the principal. All the NCC cadets participated in the anniversary function, Commodore Sartaj Imam was the revered Guest Of Honour. The programme was widely covered by TV and all the newspapers.

A very well organized rally was held on 24th November 2011 to create awareness among the public about prevention of violence against women and children. This programme was covered by media.

A farewell function was held on 27.12.2011 to honour Commodore Sartaj Imam, Deputy Director General, NCC, Tamil Nadu, Puducherry and Andaman & Nicobar Island who was institutional in sanctioning 100 NCC cadets STRENGTH to TNGDC.

NCC cadets have shown their active participation in the blood donation camp held on 31.1.2012 jointly organized by NCC, NSS, Red Ribbon Club of TNGDC. About 100 units of blood was given to the Government Hospital blood bank.

A felicitation party was organized at the college auditorium for the NCC contingents who participated in Republic day parade in New Delhi.

20 NCC cadets participated in the annual training camp held in MMC. 7 NCC cadets participated in ‘boat sailing’.

**TNGDC NCC SCHOLARSHIP:**
A sum of Rs.2000 each was presented on 19th May 2012 to 6 NCC cadets. A sum of Rs.30,000 each (SAHARA) was also given totaling to an amount of Rs.1,02,000.

The NCC cadets also volunteered in the college activities like CSM, PRAKRITI’12. NCC activities were guided and encouraged by our Principal.

It is a great moment for the TNGDC NCC cadets to give Guard of Honour and ceremonial parade to welcome the new Deputy Director General, NCC Iyyappa.

The motto of NCC is Unity and Discipline which adds the 4th dimension Unity to our college motto Duty, Discipline and Dignity.

**NSS ACTIVITY TNGDC&H**

**NSS DAY SEPTEMBER 24 .9.2011**

NSS day falls on September 24th, to commemorate the event a programme fire safety and rescue drills was performed by Tamil Nadu fire and rescue department, Esplanade Chennai at the campus of TNGDC& on 23.9.2011.

The programme was inaugurated at 2.30pm, Dr. K. S. G. A. Nasser principal TNGDC&H presided the function, Dr. M. C. Sainath vice principal TNGDC&H and Dr. Jayachandran were present for the event. The resource person was Mr. Ravananan SFO, Esplanade Chennai with his team of 10 members demonstrated the rescue method during emergency and fire fighting procedure.

Rescue method during emergency, like various type of knots, method of carrying the person with NSS volunteers was performed it was very useful, various type of fire extinguishers like pressurized water, Carbon dioxide, foam were demonstrated, the event was watched by all the UG & PG students of the college and all the resource person were provided with tea and snacks. The arrangement for the programme was done by the NSS Programme officer Dr. K. Ramkumar and the NSS volunteers.
BLOOD DONATION AWARENESS DAY OCTOBER 1.10.2011

Blood donation awareness was created to the public attending the OP of TNGDC&H. Awareness pamphlets issued by the Tamil Nadu Aids control and prevention society were displayed in the OP near Department of oral medicine diagnosis and radiology. The pamphlets were well watched by the public. All the NSS volunteers participated in the programme and the event was organised by the NSS PO Dr. K. Ramkumar.

WORLD AIDS DAY
DECEMBER 1/2011

The NSS of TNGDC&H celebrated world aids day by donating sum of Rs 10,000 each to two orphan students, whose parents was HIV positive. The money was collected by donations from all the students of this college. The function for handing over the draft was organised in the college auditorium at 12.30 pm. Chief guest of the function was Dr. Jeevanandham NSS University coordinator of TN Dr. MGR Medical University, Guindy. Special guest of the function was Mrs. Dr. Sara Karunakaran, Professor Madras school of social work and Ms. Jeeva, Secretary Tamil Nadu Transgender right association. The function was preceded by Dr. K.S.G. Nasser Principal TNGDC & H, vote of thanks was proposed by Dr. K. Ramkumar NSS programme officer TNGDC&H.

NSS ORIENTATION PROGRAMME

The orientation programme for the NSS volunteers was conducted by NSS unit of TNGDC&H on 23.1.2012 at 3.30 pm in the college auditorium. The resource person was Prof. Dr. Sara Karunakaran and Mr. Moses of Madras school of social work Egmore, Chennai. Dr. K.S.G.A. Nasser welcomed the resource person and all the volunteers attended the programme. The participants were highlighted about the activity of NSS volunteers.

BLOOD DONATION CAMP 31.1.2012

The NSS, NCC & RRC of TNGDC&H jointly organised a blood donation camp on 31.1.2012 in the college auditorium at 10 am. The function started with prayer song and lighting of kuthuvilaku was done by Dr. K.S.G.A. Nasser Principal TNGDC&H, Dr. M.C. Sainath Vice principal and Dr. S. Jayachandran, our principal highlighted about the activity of NSS in the college. The blood donation started at 10.30 pm and ended at 3 pm. Total of 90 volunteers donated blood. The blood bank team from Ragiv Gandhi Government Hospital headed by Dr. Padma made the camp success with the help of our student volunteers.

DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPAEDICS, CDE- 2011

A scientific programme on 22.12.2011 was held on "Management of Dentofacial Deformities" by the Department of Orthodontics and Dentofacial Orthopaedics. This programme was honoured by the esteemed presence of

Chief Guest Hon'ble Dr. V. S. Vijay, Minister for Health & Family Welfare, Govt. of Tamil Nadu.
Guest of Honour – Dr. Muthu Raj, Dy. Director of medical education
Presided by Dr. K.S.G.A. Nasser M.D.S., Principal, TNGDC & H

Guest lectures were held regarding various topics by eminent speakers.

LECTURES

SPEAKERS:

Prof. Dr. J. G. KANNAPPAN’S ORATION
Prof. Dr. Sadashiva Shetty M.D.S.,
On “Non Surgical Management of Dentofacial deformities”

Prof. Dr. S. RANGACHARI’S ORATION
Prof. Dr. Mirza F. Baig M.D.S., (OMFS)
On “Overview of Orthognathic Surgeries”

GUEST SPEAKERS:

Prof. Dr. C. Kumaravelu M.D.S., (OMFS)
On “Surgical management of Mandibular Deformities”

Prof. Dr. L. Subramaniam M.D.S
ON “The theory and practice of orthodontics”

Prof. Dr. C. Venkataaraman M.D.S.,
"BREAKING BARRIERS 2012":

A national level scientific convention titled, "BREAKING BARRIER" was held in the month of January. The convention was for two days, 18th and 19th of January.

Undergraduates, Postgraduates, Faculty members and Private Practitioners from all over South India participated in this event. There were about 500 registrations. The Scientific meet was inaugurated on 18th January, by Dr.V.Kanagasabai, M.D., Dean, Rajiv Gandhi Govt. General Hospital. Dr.A.Parametersan, M.D.S., retired Principal of our college was the guest of honour. Different events like scientific paper presentations, poster presentations, symposium, quiz, table clinic were spread over these two days. The poster presentation was made paper less, i.e. e-posters were only displayed. The main attractions of this scientific meet were, Debate and Lectures. Proficient speakers from various colleges debated on the topic, "Is dental education at the cross roads?" Three lectures were given by the stalwarts of our profession. On the first day, our Principal, Dr.K.S.G.A. Nasser, M.D.S., spoke on, "Breaking Barriers in dentistry", later a presentation was given by Dr.Vijayalakshmi Acharya, M.D.S., on, "Tips and Tricks in dentistry". On the second day, Dr.Sridhar Premkumar, M.D.S., spoke on, "Love what you do!". There were totally about 300 paper presentations, 100 e-poster presentations, 10 symposia, 5 table clinic presentations and separate quiz event for clinical and pre-clinical students. There was also a separate faculty paper presentation session on a non-competitive basis.

This scientific convention emerged out to be one of the most successful and memorable event of this academic year. Breaking Barriers and its success will always remain engraved in our minds and in the history of our college.

Divine Dentistry

As a mark of excellence in academics and in the areas of scientific research, a national level conference was conducted on February 11th 2012 under the banner of "Divine Dentistry" for UG and PG dental students. Prof.Dr.S.Gethalakshmi,M.D.,Ph.D.,Dean , Stanley Medical College & Hospital inaugurated the programme by the lighting of Kuthuvilakku. Our college Principal Dr. K.S.G.A. Nasser presided the function and addressed the gathering.

About 300 participants from 12 different colleges spread across the country exhibited their enthusiastic participation in all the competitions held during the conference. About 18 sessions of scientific paper presentations, poster presentations, quiz and symposium were conducted during the day with our eminent Professors and Asst. Professors as the chairpersons. Lunch was provided by the conference committee in the venue. The day long thirst for knowledge came to a grand valedictory with prize distribution for the winners by Dr. K.S.G.A. Nasser.

The entire programme was organised with the able guidance of Dr. Sabarigirinathan Organising Chairman, Dr. Kanmani Organising Secretary & treasurer and Dr.V. Harishnath, Scientific Convenor.

NCC in TNGDC & H

23.11.2010 is an important day in the history of TNGDC, because for the first time in the history of Indian Dental Colleges NCC was started on this day.

Starting of NCC in TNGDC gets much more importance as it is the only Dental College in India to have NCC unit.

NCC is the second largest youth organisation and provides the cadets an opportunity to take part in activities like drill, sports, sailing, awareness camps, AIDS control, child labour, environmental concern, students exchange programmes, scholarship etc., TNGDC is granted with a cadet strength of 50. Proposal has been sent to raise the strength to 100.

The Inaugural function was held on 23-11-2010 at 10 am. Commodore Sartaj Imam, Deputy Director General, NCC, Tamilnadu, Puducherry and Andaman & Nicobar Island was the Chief Guest and hoisted NCC flag in the College campus, symbolising the start of NCC unit and received the guard of honour.

Thiru V.K. Subburaj IAS., Health Secretary, was the special guest and he released the college calendar. In his special address he said that he will take all the necessary steps to start NCC in all the Govt. Medical Colleges.

Dean MMC, Cdr. Rajiv Gyrothra, Naval officer on command, Dr. J.G. Kannappan Former Principal TNGDC, Col. Marwa, Lt. Col. Sunil Sharma, Col. Purushothaman were the other VIP guests who attended the function.

Capt. Dr. P. Regu MDS., Asst. Prof. Dept. of Oral Medicine & Radiology gave the vote of thanks.
Clinical Society Meeting From June 2011 – June 2012

Under the able guidance of the Principal Dr. K.S.G.A. Nasser, Prof. Dr.G.Uma Maheshwari, Assistant Professor Dr.Amudha Lakshmi, Assistant Professor Dr.Ram Kumar, college is conducting clinical society meeting every month on 3rd Saturdays. The undergraduates, postgraduates, and CRRI are given chances to present the rare cases, various clinical studies and procedures. Best Paper certificate is awarded to the best informative papers for the best paper and Runners up separately. This CSM is highly informative to the undergraduates and postgraduates as various speciality people meet at one place for discussion and comments.

<table>
<thead>
<tr>
<th>Month</th>
<th>S.No.</th>
<th>Topics</th>
<th>Name of the presentee</th>
<th>Department</th>
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</thead>
<tbody>
<tr>
<td>25 June 2011</td>
<td>1.</td>
<td>Toothbrush: The treacherous weapon</td>
<td>Dr.Priya Amara Sundari, CRRI</td>
<td>Department of Periodontics</td>
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<td>2.</td>
<td>Different treatment modalities to enhance esthetics in anterior- A case report</td>
<td>Dr. Ramesh, PG</td>
<td>Department of Conservative dentistry and Endodontics</td>
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<td>3.</td>
<td>Every coin has two sides</td>
<td>Dr.P.Niranzena, PG</td>
<td>Dept. of Oral Medicine and Radiology</td>
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<td>4.</td>
<td>Osteoblastoma of Condyle-A rare entity</td>
<td>Dr. Akash Kasatwar, PG</td>
<td>Dept. of Oral and Maxillofacial Surgery</td>
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<td>5.</td>
<td>Access osteotomy of bone Infratemporal lesion</td>
<td>Dr. Subbalkrishna, PG</td>
<td>Dept. of Oral and Maxillofacial Surgery</td>
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<tr>
<td>16th July 2011</td>
<td>1.</td>
<td>Pagets disease of bone</td>
<td>Dr.Anunay B.Pangarikar, III</td>
<td>Dept. of Oral and Maxillofacial Surgery</td>
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<td>Date</td>
<td>Title</td>
<td>Author(s)</td>
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<td>20th August 2011</td>
<td>Dentofacial deformity-The enigma Demystified</td>
<td>Dr. Anuandha Jha, III yr. PG</td>
<td>Department of Orthodontics</td>
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<tr>
<td>2nd September 2011</td>
<td>A glimpse of a rare salivary tumor:A case report</td>
<td>Dr. K. Subalakshmi, Final yr. PG</td>
<td>Dept. of Oral and Maxillofacial Surgery</td>
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<td>14th September 2011</td>
<td>Management of compromised ridge in maxillary anterior region-Grafting, immediate loading</td>
<td>Dr. J. Gandhimathi, III yr. PG</td>
<td>Dept. of Prosthodontics</td>
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<td>19.11.2011</td>
<td>Treatment of Class 2 division 1 Malocclusion- creating sublime smiles</td>
<td>Dr. Mithali Sethi, Third yr. PG</td>
<td>Dept. of Orthodontics &amp; Dentofacial Orthopaedics</td>
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<tr>
<td>15.10.2011</td>
<td>Approaches to the Infraorbital floor &amp; rim-transcaneous or transconjunctival incisions.</td>
<td>Dr. T. Rohini, Second yr. PG</td>
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<td>Distraction osteogenesis-a boon or bane</td>
<td>Dr. B. Vijayabahu, Third yr. PG</td>
<td>Dept. of Oral and Maxillofacial Surgery</td>
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<td>Nanotechnology in dentistry</td>
<td>Dr. Shanta Negi, Third yr. PG</td>
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<td>Management of skeletal Class 3 malocclusion in the Growth Phase</td>
<td>Dr. A. Manonmani, Third yr. PG</td>
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<td>21.01.2012</td>
<td>One stage full mouth disinfection-An insight</td>
<td>Dr. M. Ebnezer, III yr. PG</td>
<td>Department of Periodontics</td>
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<td>2.02.2012</td>
<td>Internal derangements of the temporomandibular joint</td>
<td>Dr. D. Pradeep, II yr. PG</td>
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<td>4.02.2012</td>
<td>Light with the power of healing</td>
<td>Dr. P. A. Niranjena, III yr. PG</td>
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<td>5th February 2012</td>
<td>A story of an eye</td>
<td>Dr. Nitai Debnath, III yr. PG</td>
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<td>Herpes Labialis-A case report</td>
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<td>Dr. Mohammed Junaid, I yr. PG</td>
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<td>Dr. Malathi, Professor and HOD</td>
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<td>Space closure mechanics: Transcending smile</td>
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<td>Straight wires and curved smiles</td>
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<td>Beauty and the proportion</td>
<td>Dr. S. Ilakia, Intern</td>
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<td>R. Bibin shekar, S. Rajesh kumar, M. Sudhakaran, Dental mechanic students</td>
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<td>Does the roller stop?</td>
<td>Dr. S. Radhika, Intern</td>
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<td>Hepatitis-B --- The frozen truth</td>
<td>Dr. P. K. Meenapriya, III yr. PG</td>
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21. IMPORTANT TELEPHONE NUMBERS

- Principal: 25340681
- College Office: 25340441, 25340343, 25341342
- MMC Dean's Office: 25305112
- MGR Medical University: 22353576
- Controller of Examination: 22301573
- Selection Committee: 28226674
- Men's Hostel: 25342898, 25342693
- Ladies Hostel
- MMC Main LH: 25342920
- ICH Hostel Egmore: 28190437

22. LEAVE LETTER

Application for leave/permission for undergraduate students

Date:..............
Name:
Year of study:

To
The Head of the Department
Department of

1) Leave Required (days/hours)
   from               to

2) Reason

3) What test or class will take place during your absence?

4) Details of previous leave

Students Signature         Class In-charge         H.O.D

Application for leave/permission for CRRI’s / Post Graduate students

Date:........................
Name:.............................
Year of study:.............................
Department:.............................

To: The Principal
Tamil Nadu Government Dental College & Hospital,
Chennai - 600 003

1) Leave required (days/hours)
   from               to

2) Reason

3) What appointment will be missed during your absence in the OP?

4) Do you have E.C/Secretariat/camp Duty / Sunday Duty on these days?

5) If Yes, Details of alternative arrangement

6) Details of previous leave

Students Signature         H.O.D’S Signature         Principal Signature

NOTE: Leave application must be given in advance and in person. In case of sudden sickness or any untoward incident, telephone message must be sent followed by written application. Medical certificate should be enclosed for sick leave.

POSTINGS FOR REGULAR BATCH IV YEAR BDS

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<th>Prosthodontics</th>
<th>O.D.S.</th>
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**POSTINGS FOR IV YEAR BDS 2007-2008 REGULATION BREAK STUDENTS**

**FROM 4.10.2011 TO 30.06.2012**

**POSTINGS FOR REGULAR BATCH**
### III Year BDS
**From 11.11.2011 To 30.6.2012**

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### POSTINGS FOR INTERMEDIATE BATCH
**III Year BDS**
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### 24. CLINICAL NORMS

#### Haematologic Values:
1) RBC Count:
   a) Males - 4.5 to 5.5 millions/cu.mm.
   b) Females - 4 to 4.5 millions/cu.mm.
2) WBC Count:
   a) Total Count – 4,000 to 11,000 cells/cu.mm.
   b) Differential Count:
      Neutrophils – 3000 to 6000 cells/cu.mm. (50 to 60%)
      Eosinophils – 150 to 450 cells/cu.mm. (2 to 4%)
Basophils - 0 to 100 cells/cu.mm. (0 to 1%)
Lymphocytes - 1500 to 2700 cells/cu.mm. (2 to 6%)
Monocytes - 200 to 600 cells/cu.mm. (20 to 30%)
3) Platelet Count – 2 to 5 lakhs/cu.mm.
4) Bleeding Time (BT) - less than 3 minutes (Duke’s method)
   - less than 5 minutes (IV)
5) Clotting Time (CT) – 3 to 8 minutes
6) Prothrombin Time – 10 to 15 seconds
7) Haemoglobin:
   a) Males – 15 to 17 gm/dl
   b) Females – 13 to 15 gm/dl
8) Mean Corpuscular Volume (MCV) – 78 to 98 fl (femtolitre)
9) Erythrocyte Sedimentation Rate (ESR):
   a) Males – 0 to 20 mm/hr
   b) Females – 0 to 30 mm/hr

**URINE VALUES:**
1) Calcium – 0 to 250 mg/day
2) Protein – 0 to 150 mg/day
3) Sodium – 100 to 250 mEq/day
4) Creatinine: Males – 1 to 2 gm/day
   Females – 0.5 to 1.5 gm/day

**SERUM BIOCHEMISTRY:**
1) Glucose fasting (plasma) - 65 to 110 mg/dl
2) Post Prandial Glucose - 100 to 140 mg/dl (2 hr.)
3) Random Blood Sugar - 80 to 120 mg/dl

**IMPORTANT NOTE**

**PTA MEETING 2013**

There will be parents teachers meeting in the month of May 2013.

On 13-5-2013 (Monday), The Principal will meet parents of I & II year students and on 15-5-2013 (Wednesday), parents of III & IV year students.

All parents are requested to attend the meeting with their wards without fail.

1. Fri Bank Year End Closing
2. Sat
3. Sun
4. Mon Telugu New Year
5. Tue
6. Wed
7. Thur
8. Fri
9. Sat II Saturday
10. Sun
11. Mon
12. Tue
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14. Thur Tamil New Year / Dr. Ambedkar Jayanthi
15. Fri
16. Sat Mahavir Jayanthi (Clinical Society Meeting)
17. Sun
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