



# Bahria University Dental College BUHSC-(K)



**Third Year BDS  
Batch 11  
STUDY GUIDE**

## FROM THE DESK OF PRINCIPAL

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Consultant Oral and Maxillofacial Surgeon

Principal,

BUDC



Bahria University was established in the year 2000 with the vision to become knowledge-based and creativity-driven international center of learning. The Dental College, established in 2012 has continued to uphold this mantle, and has emerged as a preferred destination for students to study Dental Medicine. Consistent with BU's mission, the Dental School is committed to provide quality education with emphasis on research at the undergraduate level.

In line with BU's core values, the Dental College has a strong focus on integrity, diversity, tolerance, and humility. At the Dental College, we strive to inculcate these attributes in our students, so that when they graduate, they are able to contribute towards society as caring oral physicians, educators and leaders of tomorrow.

Dear students, I and my team, extend a very warm welcome to you. I am sure that the time you spend here will be most productive, fulfilling, and memorable.

## MESSAGE FROM THE DESK OF VICE PRINCIPAL

**Prof. Dr. Farzeen Tanwir**

Post Doctorate (Canada), Post Doc &

PhD (Sweden), C-Ortho (USA), BDS

Professor & HOD Department of Periodontology

Vice Principal BUDC



Dear students, the evolutionary fields of Medicine and Dentistry call for continuous learning and persistence on behalf of the clinician. My goal as Vice Principal is to provide the leadership that will facilitate Dental College to provide the best possible academic guidance to meet the needs of students and patients to the best of our ability. Through a close partnership with faculty members and parents, I am confident we can make our college a place where our students can continue to grow academically and socially for life in the 21st Century. We, at Bahria University Dental College, are committed to transforming our students into dental surgeons who are life-long learners, who can lead fearlessly and selflessly, and are compassionate and impregnated with a deep sense of commitment towards humanity. We meet international standards of professional education by installing the system of integrated curriculum, interdisciplinary and thematic teaching of basic and clinical sciences. We advocate interactive sessions to improve comprehension of students as well as training them with skills of communication and self-expression. We provide our students with a stimulating environment for undertaking research projects in their undergraduate years to build a strong basis for their future career, professional growth and stand unmatched with students at other colleges, both local and international. With a state-of-the-art campus, experienced faculty, an up-to-date digital library, transport and hostel facilities, I assure you that your decision to study at BUDC will surely be a wise one, your experience here will be profoundly enriching, and you will become a valuable asset to the nation.

## ABBREVIATIONS

ASSIG/AS	Assignment
BCQS	Best Choice Questions
CBL	Case Based Learning
CDC	Curriculum Development Committee
CME	Continuous Medical Education
CP	Class Presentation
CQ	Class Quiz
CR/CW	Clinical Rotation/Clinical Work in OPD
CS	Clinical Session
DOPS	Direct Observational Procedural Skills
HEC	Higher Education Commission
HO	House Officers
HOD	Head of the Department
IL	Interactive Lecture
MIT	Modes of Information Transfer
MOD	Modular
Mini-CEX	Mini Clinical Evaluation Exercise
OMFS	Oral And Maxillofacial Surgery
OPD	Outpatient Department
OSCE	Objective Structured Clinical Evaluation
OSPE	Objective Structured Practical Evaluation
PBL	Problem Based Learning
PMC	Pakistan Medical & Dental Council
PPT	Power Point Presentation
PW	Practical work
QEC	Quality Enhancement Cell
SC	Short case
SAQS	Short Essay Questions
SGD/S	Small Group Discussion/Session
SGIS	Small Group Interactive Session
Skill Lab	Phantom Lab
SS	Self -Study
Viva	Viva
VD	Visual Display



# Bahria University Dental College

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## **VISION**

To become a knowledge and creativity driven international university that contributes towards development of society.

## **MISSION STATEMENT**

To produce competent and skilled dental professionals and researchers by ensuring excellence in dental education, applied research and practices in a collegiate environment supported through national and international linkages, to exhibit highest principles of professional humanism towards community and society.

## **Program Learning Outcomes**











- Correlate the theoretical knowledge with clinical practices to provide best possible treatment option for patient.
- Perform basic dental treatment and minor dental surgeries on patients independently.
- Guide community and society towards prevention of oral disease.
- Demonstrate professionalism and ethics in patient care.
- Conduct simple research independently.
- Demonstrate leadership qualities while working in a team.

## **SECTION 1: POLICIES AND COMMITTEES**

This section summarizes some key aspects of policies in vogue at Bahria University. The student is advised to read the detail in the latest edition of Bahria University's Student Handbook







### **STUDENT'S CODE OF CONDUCT**

Every student shall observe the following code of conduct in the University premises, in the University administered hostels (on and off-campus) and places of other activities being held under the auspices of the University:

-  Loyalty to Pakistan and refraining from doing anything which is repugnant to its honor and prestige in any way.
-  Respect for convictions and traditions of others in matters of religion, conscience and customs while observing own religious duties/customs.
-  Truthfulness and honesty in dealing with other people.
-  Respect for elders and politeness to all, especially to women, children, elders, the weak and the helpless.
-  Special respect for teachers and others in authority in the CUs and BU.
-  Cleanliness of body, mind, speech and habits.
-  Helpfulness to fellow beings.
-  Devotion to studies and prescribed co-curricular activities.
-  Observance of thrift and protection of public property.
-  Observance of the rules and regulations of the CU in force from time to time.






#### **Prohibited Acts & Misconduct/ill-Discipline**

The following acts shall be unacceptable, and their commission shall be construed as misconduct or ill-discipline:

-  Breach of the Code of Conduct.
-  Smoking in the areas prohibited by the University.
-  Consumption or possession of alcoholic drinks or other intoxicating drugs within the CU/ vicinity or while attending off-site instructions, sports, cultural tours or survey camps.
-  Organizing or taking part in any function inside the campus, or organizing any club or society of students, except were permitted and in accordance with the prescribed rules and regulations.
-  Collecting donations or receiving funds or pecuniary assistance for or on behalf of the CU except with the written permission of the Head of the CU or any other person authorized in this behalf.
-  Staging, inciting or participating in or abetting any walk-out, strike or other form of agitation against BU, its CUs or students, teachers, officers or authorities; inciting others to violence; disruption of the peaceful atmosphere in any way; making inflammatory speeches or gestures which may cause resentment; issuing of pamphlets or cartoons which cast aspersions on the students, teachers, staff or University authorities/bodies; doing anything in a way likely to promote rift and hatred amongst the students; issuing



statements in the press; making false accusations against or lowering the prestige of BU or its students, teachers, administrators, staff or bodies.

-  Disobeys the lawful orders of a teacher or other person in authority.
-  Habitually neglects work or absents from the classroom without valid reason.
-  Willfully damages public property or the property of fellow students or any teacher or employees of BU and its CUs.
-  Does not pay the fees, fines, or other dues payable under the laid down rules and regulations; uses indecent language; wears immodest dress; makes indecent remarks; gestures; behaves in a disorderly manner; commits any criminal, immoral or dishonorable act (whether committed within the CU or outside) or any act which is prejudicial to the interests of BU and its CUs; and/or
-  Commits an act of sexual harassment, as defined in the HEC's document 'Policy Guideline against Sexual Harassment in Institutions of Higher Learning'.

### **Action against Misconduct**

Every member of the faculty shall have the power to check any disorder or improper conduct, or any breach of the rules, by students in any part of the campus or outside when the visit is sponsored or organized by it. Misconduct in a classroom when a student is under the charge of a teacher shall not be allowed and a punitive action such as a fine, removal from the classroom or a punishment of greater magnitude may be imposed as decided by the authority so empowered. The Student Advisor, the Admin Officer or any other employee authorized by the Head of the CU shall be responsible for the maintenance of good behavior and law and order amongst the students on the premises of the CU.

### **Penalties:**

A student guilty of an act of indiscipline shall be liable to the penalties specified below or promulgated through written orders/notifications:

<b>Penalty Code</b>	<b>Penalty</b>	<b>Awarding Authority</b>	<b>Appellate Authority</b>
1	Removal from classroom, laboratory, or field work, for a maximum period of two contact hours	Teacher In-Charge	HOD
2	Expulsion from games or field work for not more than one week	Games/ Field Work In-Charge	Director

3	Expulsion from educational visits and sports tours	DD (Admin & Coord) or an officer authorized by the Head of the CU	Director
4	Suspension from classes for a period not exceeding two weeks	Director/ Principal	Head of the CU
5	Fine not exceeding Rs 10,000	Director/ Principal	Head of the CU
6	Removal from a position of authority on the advice of the Student Advisor / HOD	Director/ Principal	Head of the CU
7	Expulsion from the hostel	Head of the CU	Next Higher 42 Authority
8	Cancellation of remission of fees/assistantship/scholarship etc.	Head of the CU	Next Higher 42 Authority
9	Rustication for one or more semester	Head of the CU with concurrence of BUHO	Rector
10	Expulsion from the CU	Head of the CU with concurrence of BUHO	Rector

### **Procedure in Case of Breach of Discipline:**

A teacher, a staff member or a BU Officer in whose presence or in relation to whom an act of indiscipline has been committed or who gets to know of such act, may deal with the case him/herself, or if in his/her view the case is one which can be more appropriately dealt by another authority or which warrants a penalty of greater magnitude than they are competent to impose, shall refer the case to the Student Advisor or Deputy Director (Admin & Coord) or the higher authority as the case maybe.

All cases of serious breach of discipline shall be referred to the Disciplinary Committee for investigation which, after due process of investigation, will either impose the penalties if within its powers or recommend them to the Campus Head/Head of the CU/Rector, as the case may be.

When a case against a student is referred to the Disciplinary Committee, it may, if it deems fit, suspend the student from the classes till the finalization of the case, with the approval of the Head of the CU.

### **Rustication**

Rustication may be awarded up to a maximum of 3 years. The penalty when imposed on a student shall always mean a minimum loss of one semester as far as his/her appearance in the examinations is concerned. The actual

period of absence from the CU will, however, depend upon the time of the academic year when the penalty is imposed. Period of rustication shall have no effect on the maximum duration of the program. No student shall be rusticated from the CU unless he/she has been allowed a reasonable chance of defense against the accusations. No fee shall be charged from a rusticated student for the time period during which his/her name remained struck off the rolls. However, the previously deposited fee shall not be refunded.

A student under rustication shall have the right of readmission after the period of suspension and subject to availability of the missed courses in the normal semester list of courses being offered.

### **Expulsion**

The Head of the CU shall report the name of the student who has been found guilty of an offence warranting expulsion to the Rector stating the reasons for the proposed action, who will then have the authority to sanction expulsion after allowing reasonable chance to the student to defend him/herself against the expulsion.

The name of the expelled student shall immediately be removed from the CU rolls, and fee for remaining month(s) of the semester shall not be refunded.

A student expelled from the CU shall not be readmitted to any of the University's Constituent or Affiliated Units. Cases of expulsion shall be registered in BU records and notified to all the CUs.

### **Appeals**

An appeal against the penalty may be filed by the student with the Appellate Authority within 30 days of announcement of the punishment. No appeal by a student shall be entertained unless it is presented within 30 days from the date of communication of the decision, provided that the Rector may, for valid reasons, extend this period.

No appeal shall lie against the decision of an authority imposing a penalty other than rustication or expulsion except on the grounds that such authority imposed a penalty which it was not competent to impose.

An appeal on the grounds that an authority imposed a penalty which it was not competent to impose, shall lie with the body or person of higher authority than the one who imposed the 44 penalty.

### **Compensation for Loss**

The Head of the CU, or any teacher or officer to whom he may delegate the powers, may instruct a student to pay compensation for any loss or damage to property belonging to the CU/University, public authority, a fellow student or an employee of the CU/University, caused by a willful act or gross negligence of the student. If the student does not pay such compensation within a specified period, the Head of the CU will proceed against the student in the manner as prescribed in these rules.

### **Offences during Examination**

Cases of indiscipline in or around the Examination Hall, and use of unfair means, shall be dealt with by the Examination Committee.

## **Dress code:**

### **Male students:**

1. Dress/Casual Trousers
2. Jeans (Plain blue) without an image, graphics, and write ups
3. Casual Shirts (Half/ Full sleeves)
4. T Shirts without any messages, images, graphics, and write ups
5. Dress/Casual shoes or Joggers with socks (no sandals)
6. Shalwar Kameez with shoes (only on Friday)
7. Suit/ Combination
8. Coat/ Pullovers/ Sweaters/ Jackets in winter

### **Female students:**

1. Shalwar Qameez (no sleeveless)
2. Hijab, Abaya, Chaddar etc
3. Full length Jeans(no tights) with long shirt/ kurta (knee length)
4. Light jewelry and light makeup
5. Shoes, Sandals and Joggers
6. Dupatta/ Scarf is compulsory with all dresses

**NOTE: BUDC students are expected to wear white coat during classes, hospital rotations and other wise.**

## **Student Card:**

Students shall be issued ID Cards. The students shall be required to wear their ID Cards in the campus and show them to the authorized persons on demand.

### **Loss of ID Card:**

In case ID Card is lost, it should be immediately reported to the Office of the Dy Director (Academics) who will make arrangements for re-issue of a new card by the University after payment of fine.

## **Personal behavior.**

The University expects that all students should sustain professional manner when interacting with colleagues and others. The University recognizes that personalities, characters, and management styles may differ but, notwithstanding these differences, as a minimum standard, all are expected to:

- Work co-operatively with each other to achieve objectives and establish good working relationships.
- All should behave and speak professionally, respectfully, and courteously at all times.

- Tidiness and cleanliness must be always adhered to within the BUDC premises which will help us maintain a safe, clean, and professional learning environment.
- Use the college's property, facilities, supplies, and other resources in the most effective and efficient manner.
- Unacceptable behavior such as aggressive or abusive behavior, shouting or personal insults or spreading rumors or gossip, or insulting someone is to be avoided at all costs. All these matters, if experienced, should be reported to the vice principal or your mentor or a senior faculty member.

### **Punctuality:**

Students are expected to arrive in class well in time. All cell phones, smartphones, and other electronic devices (e.g., pagers, iPods) must be turned off and hidden from view during class time. Talking and other disruptive behaviors are not permitted while classes are in session. If the students miss a class, they are themselves responsible for the missed part of the course. It is the student's responsibility to contact a classmate or teacher to determine and cover what was missed.

At BUDC classes start immediately after holidays. There is no lag period after leave. There will be no relaxation for students who are absent. **Please inform your parents of this and make your travel arrangements accordingly.** Avoid taking leave for personal reasons like weddings during the academic year.

### **Conduct in hospital:**

While working in hospital and when dealing with patients, treat those whom you serve, with whom you work, and the public with same degree of respect you would wish them to show you.

Treat patients and colleagues with kindness, gentleness, and dignity. Respect the privacy and modesty of patients. Do not share the medical or personal details of a patient with anyone except those health care professionals who are integrals to the well-being of the patient or within the context of an educational endeavor. Lastly students are required to strictly follow the college dress code during and outside the college hours inside the campus & at hospital.

### **Conduct in Library:**

The University campuses have well stocked libraries, and time spent by the students there will meet your research requirements in a calm place. The libraries also provide electronic access through the internet to databases throughout the world.

Library also provides plagiarism detection services

While using the library, Mobile Phones/ iPods/ laptops should be kept on silent mode. Sleeping, listening/ watching drama and music etc, while staying at library is prohibited.

## **RULES FOR BORROWING BOOKS**

1. Students are permitted to borrow 3 books at a time for a maximum period of 14 days. Books borrowed may be re-issued on completion of the time period.
2. A valid University card is must for borrowing the Book(s) and other material
3. Textbooks will be issued for 7 working days only but may be reissued the next day of the due date
4. For the Book(s) returned after the due date, a fine of Rs.10/- per day would be charged.
5. Book Bank books will be issued for a period of whole/ one semester.
6. Writing, underling or marking any book is strictly prohibited. Library books are carefully examined on return and the borrower will be held responsible for any damage
7. Following library material will not be issued and must be consulted in the library:
  - a. Reference Material.
  - b. Thesis/ Project Reports.
  - c. Audio/ Video cassettes/ CDs/ DVD's.
  - d. Magazines and periodicals.
  - e. Newspapers.

## **LIBRARY TIMINGS**

➤ DAY	➤ TIMINGS
➤ WEEKDAYS: MON- FRI	➤ 8:30 AM to 8:30 PM
➤ WEEKENDS	➤ 9:00 AM to 8:30 Pm

## **CONDUCT IN CAFETERIA AND COMMON ROOMS**

Campus has a cafeterias with a variety of food items and snacks available at reasonable rates

Students are expected to show care, courtesy towards the cafeteria staff as well as to others.

Place garbage and recyclables in the appropriate containers.

This behavior will maintain a clean and enjoyable environment for all.

## ACADEMIC MISCONDUCT AND DISCIPLINARY COMMITTEE

The Discipline Committee is responsible for maintaining discipline (both academic as well as conduct), and deals with all cases of indiscipline on the part of students.

It recommends award of penalties/ punishments and renders advice to the Director on administrative matters needed to maintain a peaceful environment on the campus. Intimation will be sent to BUHO for all penalties awarded to a student.

### MEMBERS OF THE COMMITTEE

Chairperson	Brig (Retd) Prof. Syed Pervez Ashgar, BUMC
Secretary	Dr. Jaweria Zeeshan, BUMC
Members	Prof. Dr. Khalid Aziz, Principal, BUCPT Prof. Dr. Ahmed Omer, BUDC Prof. Dr. Yasmeen Mehar, BUMC Associate Prof. Abida Razzaq, VP PNNC
Co-opted member	Varies according to the case

### STUDENTS ARE TO AVOID THE FOLLOWING:

- Unauthorized use of University's name or logo which is property of university.
- Harassment, sexual or otherwise, or intimidation of any member of university.
- Coming late for classes. The student may be considered absent and marked accordingly.
- Improper/inappropriate dress
- Loud and aggressive behavior in Cafeteria or Common rooms or within the premises of BUHS or PNS Shifa.
- Non clearance of bills/dues. Non-clearance of dues may prevent student from appearing in the professional examination. The student may also be refused permission to attend classes.

### USE OF MOBILE PHONE

- Use of mobile phone for photography at cafeteria is restricted.
- Library is 'NO Mobile Zone' area.
- Use of mobile in class room is prohibited.
- Students are not allowed to use mobile phone for photography/ video capturing during farewell parties.
- Making videos, images, Vlogs etc are monitored through CCTV cameras installed inside and outside building.

## SMOKING

Student guilty of an act of smoking in the premises of Bahria University/ Constituent Unit or while entering/ attending offsite instructions like sports, cultural tours or survey campus shall be liable to the penalties asunder:

### Occasion

### Penalties

1st occasion of offence on act of smoking.

Fine of Rs.5000/- along with warning letter with copy to parents from Director Campus

2nd or onward occasion of offense(s).

Fine of Rs.10,000/- along with warning letter (s) with copy to parents from DG Campus on each offence.

Student guilty of an act of possession/ consumption/ usage/ supplying of intoxication drugs/ Alcoholic drinks in premises of CU and or entering CU or events of BU being intoxicated and or during official/ informal offsite events of the University shall be liable to expulsion from the CU.

## CRIMINAL CONVICTION

- a) Applicants are required to inform BU of any criminal conviction. Full details are to be provided.
- b) The University reserves the right to refuse admission to any applicant with a criminal conviction that may jeopardize the reputation of the University.
- c) Failure to declare any criminal conviction by a student already enrolled in BU shall result in immediate cancellation of his/her admission.
- d) Where admission to the program is denied on the basis of the criminal conviction, the applicant will be notified of the decision in writing by respective Campuses/CUs

## ACADEMIC MISCONDUCT

Following acts shall constitute academic misconduct:

- a. Cheating.
- b. Fabrication.
- c. Misuse.
- d. Forgery.
- e. Plagiarism.
- f. Facilitating academic misconduct.
- g. Academic Dishonesty.

The student is advised to refer to their Student Handbook to become fully cognizant of these terms.



## PENALTIES FOR ACADEMIC MISCONDUCT

TYPE OF MISCONDUCT	PENALTY
Attempt (Successful/ unsuccessful) to know contents of question papers through unfair means prior to examination	<p><b>Minor punishment</b></p> <p>a. Warning letter (Copy to parents)</p> <p>b. Fine of Rs.2,000.</p> <p><b>Major punishment</b></p> <p>a. Expulsion from the University</p> <p>b. Fine Rs. 5000/00.</p> <p>c. Letter to parents</p>
<p>Possession of written material, relevant to the subject/paper concerned.</p> <ul style="list-style-type: none"> <li>• Writing on palm, arm or anywhere on the candidate's body or clothes whether the written material is relevant or irrelevant to the concerned paper.</li> <li>• Possession of Mobile phones, Smartwatches, PDAs and other electronics devices, whether carrying any relevant or irrelevant material in the memory.</li> </ul>	<p>a. Grade 'F' in the subject.</p> <p>b. Fine Rs 5,000.</p> <p>c. Warning, copy to parents.</p> <p>d. Mobile phones/electronic devices to be confiscated. (will be returned after investigation)</p>
Giving/receiving assistance or allowing any other candidate to copy from his/her answer books.	<p><b>Minor Punishment</b></p> <p>a. Cancellation of the relevant paper.</p> <p>b. Fine Rs 2,000/-.</p> <p>c. Letter of Warning.</p> <p><b>Major Punishment</b></p> <p>a. Grade 'F' in the subject.(for students involved)</p> <p>b. Fine Rs 5,000/-</p> <p>c. Letter of Warning.</p>
<p>Removing a leaf from answer book.</p> <p>Taking the whole or a part of an answer book or a continuation sheet into or out of examination hall.</p>	<p>a. Grade "F" in the subject. (for students involved)</p> <p>b. Fine Rs. 5,000.</p> <p>c. Letter of warning</p>
Substituting the whole or a part of an answer book or a continuation sheet not duly issued to him for the examination;	<p>a. Grade 'F' in the subject. (For students involved)</p> <p>b. Fine Rs 5,000.</p>

	c. Letter of Warning.
Forging, mutilating, altering, erasing or otherwise tampering with marked answer scripts	a. Grade "F" in the subject. (for students involved) b. Fine Rs 5,000. c. Letter of Warning
Impersonation	a. Grade "F" in all subjects of relevant semester studied at BU (including the impersonator/facilitator, if a BU's student) b. Expulsion from the university (including the impersonator/facilitator, if a student of BU). c. In case the impersonator/facilitator is an ex-student of BU or not a BU student, an FIR may be lodged for the offence, as per law of the land.
Using abusive or obscene language in answer book	a. Grade 'F' in the relevant course. b. Fine Rs 5,000. c. Letter of Warning.
Refusing to obey the Invigilator or Head Invigilator in the Examination Hall and misbehaving, resorting to misconduct, or creating any kind of disturbance in or around the Examination Hall	<b><i>Minor Punishment</i></b> a. Grade 'F' in the course. b. Fine Rs 5,000. c. Letter of Warning. <b><i>Major Punishment</i></b> a. Rustication for one Semester. b. Grade 'F' in the course. c. Fine Rs5,000/ d. Letter of Warning.
Communicating or attempting to communicate with Examiners with the intention of influencing them in the award of marks.	a. Cancellation of relevant paper. b. Fine Rs 5,000. c. Letter of Warning.
Possession of firearms, knives etc. inside and in the close vicinity of Examination Hall	a. Expulsion from the University. b. Fine Rs 5,000. c. Letter of Warning.

## SEXUAL HARASSMENT

All students are required to educate and familiarize themselves about the act/actions categorized as "Sexual Harassment" may it be physical, verbal or while utilizing electronic media and refrain from it being a punishable offence.

Higher Education Commission has issued very strict policy guideline against "Sexual Harassment in Higher Education Institutions (HEI)".

All such policies are strictly applicable and followed in Bahria University.

All students are therefore required to go through the entire policy's contents which are available with campus (concerned HODs) and University/ HEC website.

- The Protection against Harassment of Women at Workplace Act, 2010
- The Protection against Harassment of Women at Workplace (Amndt) Ac& 2022.
- HEC Policy on Protection against Sexual Harassment in HEIs effective 01 July 2020

## COMMITTEE FOR PROTECTION AGAINST SEXUAL HARASSMENT IN BUHSCK

FOCAL PERSONS	
Prof. Dr. Khalid Mustafa  Vice Principal (Medical)	Cell 0300-21 30868  Phone: 021-35319491-9, ext: 1038 & 1070  Email: khalid.bumdc@bahria.edu.pk  drkhaaidmm@yahoo.com
Prof. Dr. Shazia Shakoor  HOD, Physiology	Phone: 021-35319491-9 Ext: 1056  Email: shazia.bumdc@bahria.edu.pk  shazia2304@hotmail.com
INQUIRY COMMITTEE	
Prof. Shama Asghar, Chairperson  Vice Principal, Dental  Professor of Operative Dentistry	Cell 0334-3078082  Phone: 021-35319491-9 ext: 1121  Email: sham.burndc@bahria.edu.pk  sham.asghar24@gmail.com

Prof. Dr. Nasim Karim  Principal, BUHS-PGI  HOD Pharmacology  Member	Cell m51774  Phone: 021-35319491-9, ext: 1057 & 1072  Email: nasimkarim.bumdc@bahria.edu.pk
Dr Aini Samreer  Associate Professor, Gyn & Obs  Member	He 0333-3763592  Phone: 021-35319491-9 ext: 1064  Email aini.bumdc@bahria.edu.pk  drsam222@yahoo. Com
<b>APPELLATE BODY</b>	
Capt (R) Noaman Imam PN  Director Campus  Chairman	Cell 0336-9369222  Phone: 021-35319491-9 Ext: 1001  Email: dac.burndc@bahria.edu.pk
Dr. Farzeen Tanwir  HOD Periodontology  Member	Cell 0336-1802464  Phone: 021-35319491-9 Ext: 1104  Email: farzeentanwir21@ gmail.com
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## **CODE OF CONDUCT FOR PROTECTION AGAINST HARASSMENT OF WOMAN AT THE WORK PLACE**

1. An informal approach to resolve a complaint of harassment may be through mediation between the parties involved and by providing advice and counseling on a strictly confidential basis.
2. A complainant or a staff member designated by the complainant for the purpose may report an incident of harassment informally to her supervisor, or a member of the Inquiry committee, in which case the supervisor or the committee member may address the issue at her discretion in the spirit of this Code. The request may be made orally or in writing.

3. If the incident or the case reported does constitute harassment of a higher degree and the officer or a member reviewing the case feel that its needs to be complainant, the case can be taken as a formal complaint.
4. A complainant does not necessarily have to take a complaint of harassment through the informal channel. She can launch a formal complaint at any time.
5. The harassment usually occurs between colleagues when they are alone, therefore usually, it is difficult to produce evidence. It is strongly recommended that staff should report offensive behavior immediately to someone they trust, even if they do not wish to make a formal complaint at the time.

## **HEC POLICY ON PROTECTION AGAINST SEXUAL HARASSMENT IN HIGHER EDUCATION INSTITUTIONS**

1. Higher Education Institutions ("HEIs") are highly consequential institutions in society that are dedicated to the pursuit and dissemination of knowledge. Members of the HEI community have several important rights and privileges, central among which is the right to pursue inquiry and search for knowledge without hindrance from unlawful or otherwise unacceptable constraints. The HEC, takes very seriously the freedom of teachers, researchers, scholars, students to live and work in a safe environment in which their dignity is protected.
2. Protection against sexual harassment is important not only because it threatens the freedom and conduciveness of the environment and the institutions of higher learning. At a more fundamental level, such conduct is unacceptable because it violates personal dignity and shall not be tolerated at HEIs in Pakistan under any circumstance.
3. All administrators, deans, managers, faculty, department chairs, directors of schools or program and others in supervisory or leadership positions have an obligation to be familiar with and to uphold this policy and its procedures along with informing members of their staff about its existence.
4. In order to ensure protection of women against harassment complaint may be lodge by any person who has experienced sexual harassment with either the focal person or with any member of the Sexual Harassment Inquiry Committee.

## **STUDENTS GRIEVANCES OVERSIGHT COMMITTEE**

There shall be a Student Grievances Oversight Committee (SGOC), at CU level for each department, to address grievances of students against any teacher, instructor, or administrative staff, with respect to matters of code of conduct, grades, or any administrative matter. The committee shall comprise:

- a) Head of CU.
- b) HOD.
- c) CU Exam-In-charge.
- d) Two (2) seniors-most FMs of the department.

If grievance is about the award of a grade, the procedure shall be as follows:

- a) The student must submit the grievance, in writing, within seven working days of the receipt of the grade, to the HOD who shall forward it to the SGOC
- b) The SGOC shall hear both sides and will give its decision, which shall be final and binding on all parties, within five working days or before the start of registration for the new semester, whichever is earlier.

## **ATTENDANCE POLICY FOR STUDENTS**

1. It shall be mandatory for students to attend at least 75% of the Total Contact Hours in a Subject/Course of Study, failing which they will not be allowed to sit in the final examination. The 25% relaxation in attendance is to cater for unforeseen situations like sickness, bereavement in the family, law and order situation, untoward incident etc. On no account, any shortfall in attendance shall be condoned. Attendance once marked shall not be changed.

2. Where class attendance clashes with a sports event or any other extra-curricular activity, prior approval of the BUHO shall be sought for participation in the sports event or the extra-curricular activity. If BUHO approves such participation, tutorials shall be arranged to make up for the loss of academic activity. Only after the tutorials for the missed classes have been held that attendance for the missed classes shall be marked and credited to the student's attendance record

## **RESEARCH**

BU has a strong emphasis on research and students are not only taught research methodology as part of their curriculum, but also actively engage in research work, under the supervisor of faculty members.

BUHSC has a Research Advisory Committee that has been specifically formulated to guide students in every aspect of their research, from synopsis writing through to publications in peer reviewed journals.

## **ELIGIBILITY CRITERIA FOR APPEARING IN ANNUAL PROFESSIONAL EXAMINATIONS**

A student will be eligible to appear in the annual professional examination if he/she fulfills the following criteria:

- a. 75% attendance.
- b. Have cleared all financial dues.
- c. Must appear in all three end-of-module examinations.
- d. Must have scored passing marks in at least two of end of module examinations.
- e. No breach of discipline should have occurred for which the Disciplinary Committee has advocated a punishment.
- f. A student who has failed 2 end-of-module tests will be permitted a “re-sit” at the end of the academic year.
- g. Students who did not appear in end of module tests will not be allowed in the “re-sit”.
- h. No student can appear in one subject in an annual professional examination but must appear in all the subjects for that year.
- i. Subjects may be designated for the supplementary exams or for students repeating a year.
- j. There will be no remedial or extra classes in any subject for making good the shortfall in attendance.
- k. Departments may offer revision classes, but these will not be considered formal classes and will not be entered in the regular attendance.



**POLICY FOR MATERIAL USED DURING TRAINING AND STUDENTSHIP  
NOT CHARGED BY STUDENTS**

- a. Pre-clinical Students posted in skill lab works on simulations, all of the training material is provided by the institute.
- b. Student during their clinical rotation in dental OPD, perform clinical procedures after undergoing relevant training in different clinical departments. No cost will be charged to students whilst they undergo training for various clinical procedures and the dental materials used whilst performing procedures.

# ASSESSMENT POLICY FOR MODULES

There is a policy of ongoing or formative assessment of all students and summative assessment at the end of the module.

## **Formative or ongoing assessment:**

- Formative assessment will be done on:
  - CBL/PBL/WPBAs sessions
  - Logbooks
  - Presentations assignments
  - End of OPD rotation examinations, quizzes and tests held in a department.

## **Summative Assessment:**

- The end-of-module test comprises:
  - OSCE or OSPE examination
  - Viva voce exam.
  - Written theory examination
  - The written examination has 2 parts an MCQ and a short answer or short essay type examination.

## **Generation of internal evaluation marks from each module.**

- 20% MARKS will be calculated from each end of module exam and will be counted in the final examinations.

# STUDENTS AWARD POLICY

## 1. **Baseline Eligibility Criteria for Academic Honors & Awards:**

1. Student has completed the program within the Regular program duration (i.e. 5 x Professional years for MBBS and 4 x Professional years for BDS).
2. Student has taken full annual load for the entire degree program (as per applicable academic roadmap) without having supplementary exam in any subject prescribed for any Professional year.
3. Student has Scored minimum 75% aggregate marks in combined results of all the subjects during the MBBS/ BDS program.
4. Student does not have any Migration (excluding transfer from one CU of BU to another). This condition will not be applicable to migrated students for award of Merit and Distinction Certificates. Student has never been penalized in any disciplinary case at the University. (See Disciplinary Policy)\*\*\*.

## 2. **Conditions for Award of Medals:**

The MBBS and BDS graduates shall be awarded Gold and Silver medals as enunciated below

1. **Gold Medal** will be awarded to the graduate scoring highest overall percentage based on aggregate percentage of all Professional Examinations. The graduate getting second highest aggregate marks will be awarded **Silver Medal**.
2. Where two or more graduates have the same highest aggregate percentage, then all the graduates will be awarded Gold Medals. In such a case, no Silver Medal will be awarded.
3. In a tie situation for Silver medal between two or more graduates, all the graduates will be awarded the Silver Medal.

## 4. **Condition for Award of Certificates of Merit:**

1. The students who score highest marks in a particular subject in their respective batch shall be awarded “Certificate of Merit” in that subject.
2. In case where two or more students score exactly same highest marks in their respective batch, then all the students will be awarded “Certificate of Merit” in that subject.
3. Students who have migrated from other Medical / Dental colleges shall be eligible for award of “Certificate of Merit” in MBBS / BDS subject(s) for which examinations were held at a CU/AU of BU and after meeting all the conditions given above.

## 5. **Conditions for award of Certificates of Distinction:**

1. Students of MBBS/ BDS programs obtaining 85% or above marks in a particular subject shall be awarded “Certificate of Distinction” in that subject after meeting the following conditions.
2. The student must have qualified all the subjects in the first attempt i.e. annual exams of the respective MBBS/ BDS exam of that Professional year.

3. Subjects qualified in supplementary examinations with 85% or above marks shall NOT be counted for award of Certificate of Distinction.
4. Certificates of Distinction shall be finalized on yearly basis after declaration of the results of preceding academic MBBS / BDS Professional Examination by Exams Dte, BUHO.
5. Students who have migrated to or from other Medical / Dental colleges shall be eligible for award of “Certificate of Distinction” in MBBS / BDS subject(s) for which examinations were held at a CU/AU of BU and meet the conditions given above.
6. **Rector’s Honors List.**
  - (1) After each professional year, MBBS/ BDS students achieving 80% or above overall percentage on cumulative basis combined for all Professional years completed so far will be included in the Rector’s Honors List of that academic year.
  - (2) The names of students placed on the Rector’s Honours List will be displayed on BU / CU web page and Campus Notice Boards. 9.3.5.3 Rector’s Honours List will be prepared and promulgated by the Examinations Dte, BUHO after declaration of results of each Professional year.

## 1. SCHOLARSHIP POLICY:

For BDS programs, merit scholarships shall be awarded on the basis of the result of annual examination except the final professional examination. The award shall be a lump sum amount for the year following the annual examination, as follows:

### For BDS Students

Batch Positions	Scholarship Amount
1 <sup>st</sup> Position Holder	Rs. 100,000/-
2 <sup>nd</sup> Position Holder	Rs. 75,000/-

### Criteria:

- a. 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> position holder from each professional examination for MBBS.
- b. 1<sup>st</sup> and 2<sup>nd</sup> Position holder from each professional examination for BDS
- c. Highest marks in the class not less than 70%
- d. Eligible students must have appeared and passed in all modular exams of the same year.

## POLICY FOR ELECTIVES

- a. Electives are not mandatory nor are they a part of the curriculum. Electives are considered an add on extra-curricular activity, with benefits of selection for jobs or postgraduate training after BDS.
- b. The Electives Rotation will be of 2-4 weeks duration.
- c. It will be planned at least three months in advance during the 3<sup>rd</sup> or 4<sup>th</sup> Year.
- d. The Elective will be planned during the **SUMMER HOLIDAYS** preferably.
- e. The institution or department will be of the student's choice.
- f. During the elective, the student will not get credit for attendance at BUDC.
- g. It is the student's responsibility to ensure that his/her overall attendance record is not affected adversely by the elective.
- h. The student will not proceed on an elective without informing the Dean/Principal.
- i. The student will sign a waiver to the effect that any shortfall in attendance is his /her own responsibility and will be dealt with as per rules of Bahria University Health Sciences.
- j. The adequacy of education during the elective is the student's own responsibility.
- k. Permission to attend an elective is given by the Dean/Principal at BUDC, This simply implies that the college authorities are aware that the student is away for this period so that admission is not cancelled.
- l. The student will ensure that the Elective Supervisor completes an evaluation report at the end of the elective.
- m. BUDC will not provide any financial assistance for the elective.
- n. Opportunities for electives will be disclosed on notice boards & whatsapp groups of students.

## Student Course and Teacher Feedback Policy

Policy outlining mechanisms for monitoring and considering student feedback received in formal settings and through student surveys.

<b>Purpose</b>	To monitor and improve the quality of the student learning experience through the collection, use and reporting of student feedback about teaching and the learning environment.
<b>Responsible Officer</b>	Vice Principal (Dental)
<b>Approving authority</b>	<b>Principal</b>
<b>Next scheduled review</b>	To be reviewed on a periodic basis, with allowance for minor annual updates of roles and responsibilities by Educational Quality Committee, as required.

Feedback from students is essential to inform the development of the University's programs and to help shape all aspects of their current and future learning and broader experience. The University actively seeks and encourages students to share their views. Our approach aims to create openness, responsiveness and a sense of partnership.

### Definitions:

#### Feedback

Feedback is a process in which the effect or impact of an action or interaction is communicated back (feedback) to modify or improve the next action or interaction.

#### Course Evaluation

A course evaluation is a process of collecting opinions of students on a paper or electronic questionnaire which requires a written or selected response answer to a series of questions in order to evaluate the relevance, contents, assessment and instruction of a given course.

#### Unit

A unit (also called subject) is a branch of knowledge studied or taught in a school, college or university that forms a part of a degree program or course.

#### Teaching Evaluation

Teaching evaluation refers to the formal vetting process of teachers that an educational institution uses to review and rate teachers' performance and effectiveness in the classroom in order to maintain its teaching standards.

## **POLICY**

- A. It is policy that the Institute will survey students to collect feedback on:
  - 1. Courses and units;
  - 2. Quality of teaching; and
  - 3. Experience with the Institute.
- B. Feedback processes will be anonymous, systematic, rigorous and respectful of the rights of students and staff and incorporate strategies to maximize student participation. Full privacy and confidentiality will be ensured at all stages of the process.
- C. For every course/Unit, and teacher a HEC proforma will be administered annually.
- D. All students will be provided with the opportunity to provide feedback in full confidence of anonymity.
- E. Student Feedback will be used:
  - 1. To improve the quality of courses and units through the development of annual improvement plans.
  - 2. To inform the professional development needs of academic staff.
  - 3. To enhance course and unit design.
  - 4. To improve the provision of learning resources, facilities, equipment and services through the development of annual improvement plans; and
  - 5. To compare and benchmark the Institute's performance against the sector or other providers.

# Co-curricular Activities Policy

In the Bahria University Dental College, (BUHS), the co-curricular program is integral to the educational opportunities provided for students. The co-curricular program offers additional opportunities for students to achieve the goals through a broad offering of purposeful learning experiences, some of which are conducted outside, but in concert with, the approved curriculum.

Co-curricular programs shall encourage the development of the physical, intellectual, interpersonal skills, social and emotional development of students.

## **Objectives of Co-curricular programs:**

1. Provide purposeful learning experiences which promote the development of knowledge and skill in the affective, psychomotor and cognitive domains.
2. Provide activities which promote participation as well as competition.
3. Create a positive learning environment which enhances university climate.
4. Provide for individual enjoyment as well as the development of citizenship skills within the context of group activity.
5. Provide opportunities for the transfer of skills and knowledge gained through academic activities to career and life goals.

## **Selection of Co-Curricular Content**

The selection of the content of co-curricular activities shall be the responsibility of the person(s) responsible for the activity. Prior to the use of any content for an activity the person(s) responsible for the activity shall evaluate the content under consideration with respect to the following criteria:

- a. Content adheres to the co-curricular philosophy of the subject.
- b. Content enables the attainment of the goals of the specific co-curricular activity.
- c. Language appropriateness. Literary value. Ability appropriateness with respect to content.
- d. Availability of facilities and equipment.

Prior to the implementation of any co-curricular activity, the person(s) responsible for the activity shall convey the content of the activity to the principal in writing. If the principal has any concerns with respect to the content adhering to the criteria for co-curricular activities the principal shall meet with the person(s) responsible for the activity.



## Policy for fair & formal process of students' Academic complaints

### Purpose

The goal of this procedure is to provide a simple and fair process that allows for both informal and formal resolution of conflicts.

### Scope

This procedure applies to "student academic complaints," which are complaints brought by students regarding the University's provision of education and academic services affecting their role as students.

### *Process for Resolving Student Academic Complaints*

#### *1. Informal Resolution*

The first step of any resolution should be at the lowest unit level, between the parties involved or the parties and an appropriate third party (e.g., other faculty, department chair, director of graduate studies, administrator). If no informal resolution is reached at the lowest unit level, a student may seek informal resolution at the collegiate level with the other party and higher level administrators. If the issue is not resolved informally, the student may seek formal resolution as outlined below.

#### *2. Formal Resolution of Student Academic Complaints*

If no informal resolution has been reached, colleges and administrative units will provide a review process appropriate to the issue raised by the student academic complaint, as described below.

#### *Within Colleges*

The Student Files a Complaint.

A student must file a written student academic complaint to the Dean's/Principal Office in the college where the incident is alleged to have occurred. The complaint must be filed within 15 calendar days from the occurrence or notice of the action being challenged.

The nominated faculty member will receive and review the complaint. The faculty member will meet as needed with the student and the respondent or other individuals involved to try again to reach a satisfactory, mutually acceptable informal resolution.

If the faculty member determines that a complaint or any portion of it is not a "student academic complaint" subject to this procedure, the FM will notify the student of that decision in writing.

*The student may appeal that decision to the senior academic administrator.*

A hearing panel will be established to hear the complaint. Members of the hearing panel will be drawn from faculty and academic staff. The hearing panel will have a minimum of three and a maximum of five members. Parties must be notified of the hearing panel membership and given an opportunity to object to members who they allege have a bias or unfair interest in the case. Disputes about the membership of the panel will be decided by the dean.

The Hearing Panel Hears the Complaint and Issues Recommendations. The hearing panel will provide a fair opportunity for the student and the respondent(s) to present their views and information. The hearing panel will review the complaint and the response, and will review information and hear testimony where appropriate.

The panel will prepare a written report, recommending findings and a resolution of the matter. The panel must submit its report within 07 calendar days of the close of the hearing, unless there are compelling reasons for delay. The chair will send the report to the dean of the college, who will distribute the report to the parties.

#### *Decision by the Dean*

The dean will review the panel's report and may review any other parts of the hearing record. The dean has full discretion to accept, modify, or reject the panel recommendations. Within 07 calendar days of receipt of the panel report, the dean will issue a decision to the parties, unless there are compelling reasons for delay. The dean must inform the student of the right to appeal an adverse decision.

#### *Appeal*

If any party is not satisfied with the dean's decision, the party may appeal to the appropriate senior academic administrator within 07 calendar days. The party must explain the basis for the appeal. The senior academic administrator has the discretion to decide how to process the appeal. The appeal may be handled by written submissions or oral presentations to the senior academic administrator or delegate, or the senior academic administrator may set up an appellate hearing panel to hear the appeal and provide a recommendation before making a decision. In any case, the senior academic administrator will provide a written decision to the parties. The senior academic administrator will issue a decision within 15 calendar days of the filing of the appeal, unless there are compelling reasons for delay. The decision of the senior academic administrator is final and cannot be appealed further within the University.

# Political Activity Policy

## *Policy Purpose*

The purpose of this policy is to specify permitted use and restrictions of University facilities and resources for politically-related activity on campus by students and employees.

## **To Whom the Policy Applies**

This policy applies to Bahria University Health Sciences faculty, staff, and students.

## **Policy Statement**

As a non-profit, private institution of higher education, The University is prohibited from participating in political campaigns for Candidates, political parties and political organizations or ballot initiatives, and is restricted in conducting Lobbying activities. This prohibition extends to faculty, staff and students.

Students, Faculty, and staff may take part in partisan political activities freely on their own time, but they must not do so in the course of their regular classes, work and responsibilities for the University. Faculty, and staff who hold public office are prohibited from using University funds, logos/marks, services, supplies, vehicles, inter-office mail, or a bahria.edu email account when conducting political activities.

## **Responsibilities**

All individuals to whom this policy applies are responsible for becoming familiar with and following this policy. University supervisors are responsible for promoting the understanding of this policy and for taking appropriate steps to help ensure compliance with it.

## *Consequences for Violating this Policy*

Failure to comply with this and related policies is subject to disciplinary action, up to and including suspension without pay, or termination of employment or association with the University, in accordance with applicable (e.g., staff, faculty, student) disciplinary procedures.

## **STUDENT AFFAIRS COMMITTEE**

The Student Affairs Committee studies the needs and problems of the students and conveys its recommendations on the subject to the Director. It conveys to the students (through their representatives) University policies on various administrative matters and also obtains and conveys the views of the students to the Director with its recommendations.

## **THE EQUIVALENCE COMMITTEE**

The Equivalence Committee examines the cases of admission of candidate to the university from other Universities, Colleges, Institutes, etc. whose examinations are recognized as equivalent to the corresponding examinations of the university recognized by the Higher Education Commission and makes recommendations to Bahria University through the Campus Director for final approval. The Committee also scrutinizes all applications for transfer of credits and determines the equivalent status.

## **SECTION 2: INTRODUCTION To STUDY GUIDE**

When a dental student enters dental college, a new era of academic life begins. This study guide has been designed to help students sail smoothly during their transitional phase. The very first week is spent in familiarizing the students with the environment of Bahria University Dental College.

### **1- Objectives of Study Guide**

The purpose of this study guide is to:

- Inform students what they are expected to learn during their study period.
- Guide students on how the student-learning program has been organized, and how it would be implemented.
- Help students organize and manage their studies throughout the year.
- Inform students about the code of conduct at Bahria University Dental College
- Inform on organization and management of the team at BUDC. This will help you contact the right individual in case you have any difficulty.
- Describe the course content which will be taught and what the students are expected to learn.
- Impart the information on learning methods that you will experience during the course. The methods include tutorials, lectures, practical skills, experiments, dissection, field visits and research. These learning methods should help you to achieve the course objectives.
- Guides you about the available learning resources for the terms. These include books, computer-assisted learning programs, videos, and other aids
- Makes you aware about the contribution of internal evaluation and term examinations, on student's overall performance.
- Passes the information on the methods of assessment.
- Inform regarding the examination policy, rules and regulations.

### **2- Curriculum:**

You will be taught an integrated/hybrid modular curriculum followed by annual professional examination in every year of BDS program.

### **Term Schedule:**

Academic calendar is given at the end of the document.

### **Course Objectives:**

The learning objectives in terms of what students are expected to achieve on completion of each lecture (Module), including learning methods and assessment strategies, have been mentioned in this document

### 3- Mode of Information Transfer

The following teaching / learning methods / strategies are used to promote better understanding:

- Lectures
- Guest Lectures
- Case based learning (CBL)
- Problem Based Learning
- Team Based Learning
- Flipped Class Room
- Tutorials
- Assignments
- Practical's/Clinical Teaching
- Mini-CEX/DOPS
- Research projects
- Library sessions

### 4- Self-Directed Learning:

Self-directed learning is a learning model adopted by students from a more teacher-directed learning to a more student-centered pedagogy. Self-directed learning is a process in which individuals take the initiative, with or without the help of others, in identifying their learning needs, formulating learning goals, identifying human and material resources for learning, choosing, and implementing appropriate learning strategies, and evaluating their learning experiences.

***P.S: Please refer to Students Handbook 4-November 2021 for all applicable policies and is available on BU website***

## **SECTION 3: PROGRAM STRUCTURE AND OVERVIEW**

### **THE MODULAR SYSTEM**

#### **Organization of modular curriculum and teaching**

- a. Each Academic Year is divided into 3 Modules of 3 months' duration each

•	<b>First Year</b>	-	<b>Modules</b>	-	<b>1,2,3</b>
•	<b>Second Year</b>	-	<b>Modules</b>	-	<b>4,5,6</b>
•	<b>Third Year</b>	-	<b>Modules</b>	-	<b>7,8,9</b>
•	<b>Final Year</b>	-	<b>Modules</b>	-	<b>10,11,12</b>

- b. Learning objectives for each module are written down in the study guide issued at the beginning of each academic year to each student. Curriculum for each module can be provided on request.
- c. A schedule is issued for each module re-enforced by a weekly schedule issued 2 weeks in advance of the teaching dates.
- d. This includes lecture, CBL, Practical's, Demonstrations, Ward Clinics, and Classes in Skills Lab, Self-Study, and Library period.
- e. The assessment schedules i.e., end of modules tests as well as period of preparation leave and timing of OSCE/ OSPE is given in the above schedule.
- f. The assessment result is displayed on departmental notice boards and recorded in the Examinations Department BUDC.

# LEARNING STRATEGIES

## **Interactive Lectures**

The traditional lecture system is used to introduce a subject and discuss the broad concepts in that specific field of study. Interactive lectures to smaller groups remain an effective and essential way of teaching. More recent methods of learning and teaching, such as case-based learning and small group-based problem-solving sessions are also employed.

## **Small Group Based Learning**

Small group and tutorial sessions are regularly held to enable students to discuss the details of a lecture topic. Students are expected to prepare presentations on applied topics and discuss their implications with their fellow students. The lecturer acts as a facilitator. By participating in these group discussions, students can interact and learn from one another such as PBL, CBL and TBL etc.

## **Hands on Training**

Being in final year students will deal daily with patients in OPD, to gain, enhance and polish their clinical knowledge and skills. Lectures and tutorials will regularly be held for providing clinical orientation on the subjects.

## **Mini-CEX (Mini Clinical Evaluation Exercise) and DOPS (Direct Observational Procedural Skills):**

These are work place based assessment tools (WPBAs) used in clinical settings by supervisors. In Mini-CEX, the trainee is evaluated regarding history taking, physical examination skills, communication skills, clinical judgment, professionalism, organization/efficiency, and overall clinical care. In DOPS, the **focus lies on procedural skills** followed by feedback.

## **Community-based Learning**

BUDC is committed to provide the environment and training that would enable professionals to successfully contribute to the improvement of the health sector, particularly in less privileged communities under the Community-Oriented Medical Education Program.

The university involves its students in research-developing work in these designated communities. Students are encouraged to participate in the preventive and curative care and management of patients and their families in Primary Health Care field settings.

## **Problem Based Learning (PBL)**

PBL promotes active learning and critical thinking in small collaborative groups. In PBL, problem introduces a real patient or as hypothetical case. Students identify the key elements of the case, develop and test hypothesis



based on pathophysiological mechanisms, decide on diagnosis, and discuss principles of management. Content of PBL reflects horizontal integration of curriculum. The development of PBL cases is a challenging process, as each case must reflect a defined set of learning objectives, have face validity, suit the student's stage of maturity, and fit with restraints of time and resources. A typical PBL tutorial consists of usually 8 to 10 students and a tutor, who facilitates the session with minimum interference. The PBL tutorials comprised of three sessions of two hours and the time is scheduled in timetable approximately two weeks before.

The PBL comprised of seven-jumps (Maastricht) such as clarifying terms, defining problem(s), brainstorming, structuring and hypothesis, learning objectives, independent study, and synthesis/presentation.

### **Case-Based Learning (CBL)**

Case-based learning (CBL) is an adaptation of the PBL process and more generally used in clinical context to develop clinical reasoning and judgment. Written case studies, prepared by tutors and students are required to work together to identify clinical problems, prepare differential diagnoses and suggest potential investigations and treatment. Students set their own learning objectives and identify the learning resources required to confirm or refute their diagnostic possibilities. The CBL format is flexible. CBLs are overseen by facilitators who guide the students in case they are not on the right track as unlike PBLs, the CBL session must be completed in one day.

### **Team Based Learning**

Team Based Learning provides students with resource effective, authentic experience of working in teams to solve real life clinical problems.

# COMPETENCIES AND LEARNING OUTCOMES OF DENTAL UNDER-GRADUATES

## COMPETENCIES

1. Skillful
2. Knowledgeable
3. Community health promoter
4. Critical thinker
5. Professional
6. Researcher
7. Leader

### i. Skillful:

*Under Graduates must be competent to:*

- 1.1 Apply appropriate interpersonal and communication skills.
- 1.2 Apply psycho-social and behavioral principles in patient-centered health care.
- 1.3 Communicate effectively with individuals from diverse populations.
- 1.4 Apply basic dental morphology and application of dental materials on patients.

### ii. Knowledgeable

#### A. Assessment, Diagnosis, and Treatment Planning

*Under Graduates must be competent to:*

- 2.1 Manage the oral health care of infant, child, adolescent, and adult, as well as unique needs of women, geriatric, and special needs patients.
- 2.2 Identify, prevent, and manage trauma, oral diseases, and other disorders.
- 2.3 Obtain, and interpret patient / medical data, including a thorough intra/extra oral examination, and use these findings to accurately assess and manage patients.
- 2.4 Select, obtain, and interpret diagnostic images for the individual patient.
- 2.5 Recognize the manifestations of systemic disease and how the disease and its management may affect the delivery of dental care.
- 2.6 Formulate a comprehensive diagnosis, treatment, and/or referral plan.

#### B. Establishment and Maintenance of Oral Health

*Under Graduates must be competent to:*

- 2.7 Follow universal infection control guidelines for all clinical procedures.
- 2.8 Manage pain and anxiety in the dental patient.
- 2.9 Diagnose temporo-mandibular joint disorders.
- 2.10 Manage periodontal diseases.
- 2.11 Develop and implement strategies for the clinical assessment and management of caries

- 2.12 Manage restorative procedures that preserve tooth structure, replace missing or defective tooth structure, maintain function, are esthetic, and promote soft and hard tissue health.
- 2.13 Manage developmental or acquired occlusal abnormalities.
- 2.14 Manage the replacement of teeth for the partially or completely edentulous patient.
- 2.15 Manage pulpal and peri-radicular diseases.
- 2.16 Manage oral surgical treatment needs.
- 2.17 Manage medical and dental emergencies.
- 2.18 Manage patient abuse and/or neglect.
- 2.19 Manage substance abuse.
- 2.20 Evaluate outcomes of comprehensive dental care.
- 2.21 Manage oral mucosal and osseous diseases.

### **iii. Community Health Promoter**

*Under Graduates must be able to:*

- 3.1 Demonstrate skill in providing prevention, intervention, and educational strategies.
- 3.2 Demonstrate competency in promoting health and managing various oro-facial diseases while working in a team.
- 3.3 Recognize and appreciate the need to contribute to the improvement of oral health beyond those served in traditional practice settings.

## **2. Critical Thinker**

*Under Graduates must be competent to:*

- 4.1 Evaluate and integrate emerging trends in health care as appropriate.
- 4.2 Apply critical thinking and problem-solving skills while dealing with patients.
- 4.3 Evaluate and integrate best research outcomes with clinical expertise and patient values for evidence-based practice.

## **3. Professional**

*Under Graduates must be competent to:*

- 5.1 Apply ethical and legal standards in the provision of dental care.
- 5.2 Practice within one's scope of competence and consult with or refer to professional colleagues when indicated.

#### **4. Researcher**

*Under Graduates must be competent to:*

- 6.1 Apply the current research for innovations in treatment, keeping at par with international standards
- 6.2 Conduct independent research based on the community requirements

#### **5. Leader**

*Under Graduates must be able to:*

- 7.1 Manage self, taking responsibility and utilizing the time to the best of his/her ability.
- 7.2 Demonstrate leadership skills effectively while working in a group or in a team.
- 7.3 Recognize and comply with the working system of any Institute.

# COUNCELING & MENTORING

## MENTORS

1. Dr. Imtiaz Ul Haq

2. Dr. Adeel Ahmed

3. Dr. Anum Baqar

4. Dr. Israa Ahmed

5. Dr. Farah Javaid



Program Incharge/Head Mentor

Prof Dr. Syed Ahmed Omar

## Who to contact?

The class is divided into equal groups of students and each group has a designated teacher, who works as their mentor. The students will meet their mentor once a month, third Thursday of the month, in their office to discuss the academic, social, and other matters and seek their advice and guidance.

The mentor will report to the head mentor monthly in case any concern/matter is not resolved even at that level, then the head mentor can refer the case to Principal accordingly.

## **SECTION 4: DEPARTMENTS & ACADEMIC SCHEDULES**

### **DEPARTMENT OF DENTAL EDUCATION**

High-quality medical /dental education is a vital prerequisite for high-quality patient care. Dental education's aim is to supply society with a knowledgeable, skilled, and up-to-date cadre of professionals who put patient care above self-interest, along with developing their expertise over the course of a lifelong career.

The department of Dental Education has expanded beyond the classroom all around the world and quality patient care is learned by the bedside teaching and with the practical introduction of clinical cases in preclinical years. The Dental Education department ensures that the educational content synchronizes with the learning strategies, the assessment tools and provides effective feedback to enhance the learning process. The department of Dental Education at Bahria University Dental College is interested in raising the standards of the teaching by continuously developing a pool of trained faculty members. For this purpose, interactive sessions and hands-on workshops are constantly designed, focusing on current and effective modes of evidence-based teaching and assessment tools. It fosters flexible and a learner-centered approach during teaching. Self-reflection and critique of teaching techniques are also vital in propelling an institute towards excellence. Our Dental Education department aims to achieve that and more.

#### **Faculty:**

<b>HOD</b>	Dr. Akbar Abbas	Assistant Professor
<b>Members:</b>	Dr. Farzana	Senior Lecturer
	Dr. Kulsoom Zahir	Lecturer

# **INTRODUCTION TO DEPARTMENTS**

**Department of Oral Pathology**

**Department of Periodontology**

**Department of Oral Medicine**

**Department of Operative Dentistry**

**Department of Prosthodontics**

**Department of Oral Maxillofacial Surgery**

**Department of General Medicine**

**Department of General Surgery**

# **DEPARTMENT OF ORAL PATHOLOGY**

Oral Pathology is the specialty of dentistry which deals with the nature, identification and management of diseases affecting the oral and maxillofacial region. The practice of oral pathology includes research, diagnosis of diseases using clinical, radiographic, microscopic, biochemical and other examinations and management of patients. The Oral Pathology lab is well equipped with research and multimedia facilities along with highly trained faculty and staff. Research on oral pathological lesions is the integral ambition of department. The department is receiving the best faculty researcher award for the past three years.



## **FACULTY:**

**HOD:** Prof. Dr Daud Mirza

## **FACILITATORS:**

Dr. Afsheen Maqsood  
Dr Saima Mazhar  
Dr. M. Shahrukh Khan Sadiq

Associate Professor  
Senior Lecturer  
Lecturer



# **DEPARTMENT OF PERIODONTOLOGY**

Periodontology is the specialty of dentistry that studies supporting structures of teeth, as well as diseases and conditions that affect them. The supporting tissues are known as the periodontium, which includes the gingiva (gums), alveolar bone, cementum, and the periodontal ligament. A professional who practices this specialty field of dentistry is known as a Periodontist.



## **FACULTY:**

### **HOD:**

**Dr. Farzeen Tanwir**

**Professor**

### **Facilitators:**

Dr. Ahmed Bin Khalid Khan  
Dr. Tauqeer Bibi  
Dr. Natasha Zaidi  
Dr. Bushra Ijaz

Assistant Professor  
Assistant Professor  
Senior Registrar  
Registrar

# **DEPARTMENT OF ORAL MEDICINE**

Oral medicine is the area of special competence in dentistry concerned mainly with diagnosis, investigations and non-surgical management of diseases involving the oral & perioral structures as well as medically compromised patients. The subject of Oral Medicine at the Bahria University Medical and dental college is designed to provide extensive diagnostic and therapeutic skills for students to diagnosis and non-surgical treatment of oral and perioral diseases, and management of systemic diseases that have a significant impact on the oral health.



## **FACULTY:**

### **HOD**

**Dr. Arsalan Khalid**

**Assistant Professor**

### **Facilitators:**

Dr. Farah Irshad  
Dr. Moona Mumtaz  
Dr. Farheen Anwar

Assistant Professor  
Senior Registrar  
Registrar

# **DEPARTMENT OF OPERATIVE DENTISTRY**

It is the branch of dentistry concerned with the diagnosis, prevention, and treatment of diseases of the tooth structure including the repair or restoration of defective teeth. It also includes the care and treatment of children's teeth.



The objective of this session is to give basic knowledge of operative instruments, dental terms, principles of cavity preparations, and fundamentals of tooth restorations. The skills with a hand piece are mainly accomplished through the use of patients' simulation approaches. The new dentist must be competent at assessing patient risk for caries and implement caries prevention strategies and removing or treating carious tooth tissue using techniques that maintain pulp vitality and restore the tooth to form, function and aesthetics with appropriate materials, preventing hard tissue disease and promoting soft tissue health. The development and practice of these skills using a hand piece (dental drill) begins at orientation and continues throughout the academic year.

## **Faculty:**

### **HOD**

Facilitator  
Facilitator  
Facilitator  
Facilitator  
Facilitator  
Facilitator  
Facilitator  
Facilitator

### **Dr. Shama Asghar**

Dr. Faisal Bhangar  
Dr. Ayesha Zafar  
Dr. Meisha Gul  
Dr. Maliha  
Dr. Syed Adeel Ahmed  
Dr. Umeed Jawaaid  
Dr. Imtiaz ul Haq  
Dr. Saad Lakhani

### **Professor**

Professor  
Assistant Professor  
Assistant Professor  
Senior Registrar (Pedo)  
Lecturer  
Lecturer  
Lecturer  
Lecturer (Pedo)

# **DEPARTMENT OF PROSTHODONTICS**

Prosthodontics dentistry is the branch of dentistry pertaining to the restoration and maintenance of oral functions, comfort, appearance and health of the patient by restoration of teeth and/or replacement of the missing structures with removable and fixed dental prosthesis.

The department caters to patients through provision of removable complete and partial denture prosthesis; fixed prosthesis, maxillofacial prosthesis and temporary mandibular disorders management.



## **FACULTY:**

**HOD:** **Prof. Dr Saman Hakeem**

## **Facilitators:**

Dr. Farnaz Ilyas

Assistant Professor

Dr. Asim Monpuri

Senior Registrar

Dr. Anum Baqar

Senior Lecturer

Dr. Muhammad Rameez

Registrar

Dr. Farah Javaid

Registrar

# **DEPARTMENT OF ORAL SURGERY**

Oral Surgery is a specialty that deals with the treatment and management of pathology of the jaws and mouth that requires surgical intervention. Although the surgical removal of teeth is the most common procedure performed by oral surgeons, there is a broad scope to the specialty. This includes the management of hard and soft tissue pathology, oral infections, dento alveolar trauma and orofacial pain along with provision of surgery to support orthodontics and insertion of osseointegrated implants.



## **FACULTY**

**HOD: Professor Dr. Kashif Naqvi**

### **Facilitators:**

Dr. Atif Ahmed Zubairi

Dr. Fatima Khaleeq

Dr. Abdul Wasay

Dr. Rida Zulfiqar

Senior Registrar

Senior Registrar

Registrar

Registrar



# **DEPARTMENT OF GENERAL MEDICINE**

The Department of General Medicine contains the following facilities and students will be taught in detail about the relevant subjects: Cardiology, Infectious diseases, Gastro enterology, Hepatology, Nephrology, Pulmonology, Rheumatology, Hematology Dermatology, Psychiatry.



## **FACULTY**

### **HOD:**

**Prof Muhammad Sajid Abbas Jaffri**

### **Facilitators:**

Prof Dr. Brig (Retd) Parvez Asghar  
Dr. Sehrish Shafiq  
Dr. Sannia Perwaiz Iqbal  
Dr. Faryal Gul  
Dr. Navaid Siddiqui  
Dr. Zainab Fakhar  
Dr. Lalarukh

Senior Professor  
Associate Professor  
Assistant Professor  
Senior Registrar  
Senior Registrar  
Senior Registrar  
Senior Registrar

# **DEPARTMENT OF GENERAL SURGERY**

The Department of General Surgery contains the following facilities and students will be taught in detail about the relevant subjects: Neurosurgery, Urology, Orthopedic surgery, Plastic surgery, Surgical ICU, Burn unit.



## **FACULTY**

### **HOD:**

**Prof Dr Naheed Sultan Ahmed**

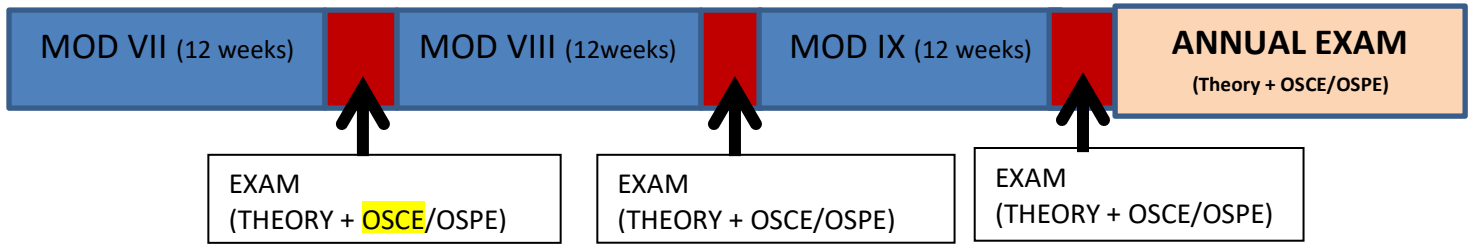
**Professor**

### **Facilitators:**

Prof. Dr. Najam Shabbir  
Surg Cdre Tariq Mehmood  
Surg Cdre Khalid Ibrahim Akhtar  
Surg Capt Sohail Aslam  
Surg Capt Asim Ishafaq  
Surg Capt Danish Almas  
Surg Capt Mohammad Rashid Hasnain  
Surg LT CDR Abdul Qaiyoume Amini  
Surg LT CDR Noureen Shoukat  
Dr Shireen Sabir  
Dr. Amna Gul

Professor  
Professor  
Associate Professor  
Associate Professor  
Associate Professor  
Associate Professor  
Assistant Professor  
Assistant Professor  
Senior Registrar  
Senior Registrar  
Lecturer

## THIRD YEAR BDS



## DEPARTMENTS

- ORAL PATHOLOGY
- PERIODONTOLOGY
- ORAL MEDICINE
- GENERAL MEDICINE
- GENERAL SURGERY
- OPERATIVE DENTISTRY—MOD VII
- PROSTHODONTICS – MOD VIII
- ORAL AND MAXILLOFACIAL SURGERY



## **MODULE VII**

At the end of the module, students should be able to:

S.no		Teaching Strategies	Online Teaching	Assessment Tool
	<b><u>ORAL PATHOLOGY</u></b>			
1.	Describe the developmental disturbances in number and shape of teeth.	IL	✓	BCQs/SAQs
2.	List the syndromes associated with hypodontia.	SGD	✓	BCQs
3.	Discuss briefly about hypohidrotic ectodermal dysplasia.	SGD	✓	OSPE
4.	Define hyperdontia; discuss its various types and its implication on oral health.	IL	✓	BCQs
5.	Compare the taurodont tooth with a normal tooth on a radiograph	PW	✓	OSPE
6.	Describe the causes and classification of environmental enamel hypoplasia.	IL	✓	BCQs
7.	Demonstrate the different steps involved in the preparation of slide.	PW	✓	OSPE
8.	Identify anatomical features on a panoramic radiograph.	PW	✓	OSCE
9.	Describe the developmental disturbances in structure of teeth.	IL/SGD	✓	SAQs
10.	Identify the different types of intraoral x-rays and study OPG x-rays.	PW	✓	OSPE
11.	Describe the causes and clinical features of pulpitis.	IL	✓	BCQs/SAQs
12.	Discuss the histopathological features of pulpitis.	IL	✓	BCQs/SAQs
13.	Describe the clinical and histological features of pulp polyp	IL	✓	BCQs/SAQs/ OSPE
14.	Discuss briefly about pulp calcification and pulp necrosis.	IL	✓	BCQs
15.	Interpret the carious lesions on a periapical x-ray.	PW	✓	OSPE
16.	Identify the normal anatomical landmarks on orthopantomogram x-ray.	PW	✓	OSPE
17.	Describe the acute and chronic periapical periodontitis.	IL	✓	BCQs/SAQs
18.	Describe the Sequelae of pulpitis.	SGD	✓	SAQs
19.	Define Dental caries.	IL	✓	SAQs
20.	Describe the various theories of cariogenesis.	IL	✓	BCQs/SAQs

21.	Explain the widely accepted theories of dental caries.	IL	✓	SAQs
22.	Describe the role of microorganism in the etiology of dental caries	SGD	✓	BCQs/SAQs
23.	Describe the clinical aspects of dental caries.	IL	✓	SAQs/OSPE
24.	Discuss the contributing factors in dental caries.	SGD	✓	BCQs/SAQs
25.	Explain the histopathology of enamel and dentin caries.	IL	✓	SAQs/OSPE
26.	Describe the methods of caries prevention.	IL	✓	SAQs
27.	Define the following terms: Incipient caries, rampant caries, nursing bottle caries, arrested caries.	IL/SGD	✓	BCQs/SAQs
28.	Discuss the route of spread of periapical infections.	IL	✓	SAQs
29.	Describe the etiology and clinical features of cellulitis.	IL	✓	BCQs/SAQs
30.	Describe the clinical features and complications of Ludwig's angina.	IL	✓	BCQs
31.	a. Perform Blood sugar test. b. Make a blood smear to examine the blood cells	PW	✓	OSPE
32.	Explain the techniques of using Field's stain	PW	✓	OSPE
33.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate the professional attributes of a learner, colleague and physician in training.	SGD	✓	OSCE
	Discuss the role of doctor in community and duties of a doctor.	IL	✓	BCQ/SAQ
	Demonstrate competency in behaving in ethical manner with patients, coworkers and the public.	SGD	✓	OSCE
	<b>PATIENT'S SAFETY</b>			
	Explain to the patients the importance of using lead apron & thyroid collar for X-ray taking	SGD	✓	OSCE
	Recognize high risk situations and describe approaches and processes associated with risk management	SGD		OSCE
	Reflect on how patient safety practices can help to minimize the incidence and impact of medical errors, adverse events, and maximize recovery from them	SGD		OSCE
	Discuss safety precautions to avoid accidents in the laboratory.	SGD	✓	OSCE
	<b>COMMUNICATION SKILLS</b>			
	Inquire about symptoms and history of the presenting complaint	SGD	✓	OSCE/Role play
	Inquire about relevant information from the patients for the diagnosis of periapical lesion	SGD	✓	OSCE

	<b><u>PERIODONTOLOGY</u></b>			
34.	Describe the anatomy of healthy periodontium/ Aging of gingiva, bone cementum, PDL	IL/SGD	✓	SAQs/OSCE/CP
35.	Describe the clinical features of healthy gingiva.	IL/SGD	✓	SAQs/OSCE/CP
36.	List and describe different types of gingiva.	IL/CR	✓	BCQs/CP
37.	Describe the correlation of clinical & Microscopic features of gingiva.	IL/CR	✓	BCQs/CP
38.	Explain the blood, lymphatic & nerve supply of Periodontium.	IL/CR	✓	BCQs/CP
39.	Describe various types of fibers and cellular element of periodontal ligaments and their functions.	IL/CR	✓	SAQs/CP
40.	Describe the anatomy and physiology of alveolar process.	IL	✓	SAQs/CP
41.	Describe fenestration and dehiscence.	IL/CR	✓	BCQs/CP
42.	Explain the plaque index, gingival index and Community periodontal index for treatment need (CPITN).	IL/CR	✓	BCQs/CP
43.	Describe the role of epidemiology in providing etiology & its relationship in making diagnosis.	IL/CR	✓	SAQs/CP
44.	Define dental Plaque.	IL	✓	BCQs/CP
45.	Discuss the types of dental plaque.	IL/SGD/CR	✓	BCQs/SAQs/OSCE/CP
46.	Describe the stages involved in formation of dental plaque.	IL	✓	BCQs/SAQs/CP
47.	Explain the structure & composition of Plaque.	IL/CR	✓	SAQs/CP
48.	Discuss the physiological properties of Dental Plaque.	IL/CR	✓	BCQs/CP
49.	Define dental calculus.	IL	✓	BCQs/CP
50.	Describe the formation of dental calculus.	IL/SGD	✓	BCQs/OSCE/CP
51.	Discuss the types of calculus.	IL	✓	BCQs/SAQs/CP
52.	Describe the composition of dental calculus.	IL	✓	BCQs/SAQs/CP
53.	Discuss the role of microorganisms in mineralization of calculus.	IL/CR	✓	BCQs/SAQs/CP

54.	Discuss the role of dental calculus & other predisposing factors in the etiology of dental Diseases.	IL	✓	SAQs/CP
55.	Discuss supra gingival & sub gingival calculus and their effects on periodontal tissues.	IL	✓	SAQs/CP
56.	Enlists and describe the intraoral surfaces for bacterial adhesion.	IL	✓	SAQs/CP
57.	Describe the principles of bacterial transmission, translocation and cross-infection associated with Periodontal Diseases.	IL/SGD/C R	✓	BCQs/CP
58.	Discuss the association of plaque microorganisms with periodontal diseases.	IL	✓	BCQs/CP
59.	Discuss the microbial specificity of periodontal diseases.	IL	✓	BCQs/CP
60.	Describe the criteria for Identification of Periodontal pathogens (Koch's postulates).	IL/CR	✓	BCQs/CP
61.	Identify the key characteristics of specific periopathogens.	IL	✓	BCQs/SAQs/ CP
62.	Describe the microbial shift during periodontal disease.	IL	✓	BCQs/SAQs/ CP
63.	Describe the histological features of initial, early, established and advanced lesions of gingivitis.	IL	✓	SAQs/CP
64.	Discuss the clinical features of Gingivitis.	IL	✓	MCQs, SEQs, OSCE
65.	Differentiate between Acute gingivitis and Chronic gingivitis	IL	✓	MCQs, SEQs, OSCE
66.	Discuss the correlation of clinical and histopathological features of periodontal pocket.	IL/SGD	✓	SAQs/CP
67.	Discuss the role of saliva in host defense.	IL/CR	✓	SAQs/CP
68.	Discuss the role of sulcular fluid in healthy and diseased periodontal tissues.	IL/SGD/C R	✓	BCQs/SAQs
69.	Describe the Inflammatory cell response in periodontal diseases.	IL/CR	✓	BCQs
70.	Discuss the correlation of gingival manifestations in immune mediated disorders	IL/CR	✓	BCQs
71.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate skills in introducing himself/ herself to the patient before history taking	CR		Role play
	Communicate to the patient confidently & respectfully during history taking and patient examination	CR		OSCE/ Role play
	Communicate the problem list to the patients	CR		OSCE/ Role play

	Take informed consent from the patient before commencing treatment.	CR		Role play
	Counsel the patients regarding the preventive treatments Scaling and root planning	CR	✓	OSCE/ Role play
	Discuss the risk factors for Gingivitis and Periodontitis	CR	✓	OSCE/ SAQs
	Use NICE guidelines for patient recall interval	CR	✓	SAQs
	Give post-treatment instruction to the patient	CR	✓	OSCE
	Demonstrate the professional attributes of a learner, colleague and physician in training.	CR	✓	Role play
	Describe the basic principles of ethics with reference to social, cultural and religious perspectives.	SGD	✓	BCQs
	Describe the role of doctor in community and duties of a doctor.	SGD	✓	BCQs/SAQ
	Demonstrate competency in behaving in ethical manner with patients, coworkers and the public.	CR		OSCE
	<b>PATIENT'S SAFETY</b>			
	Explain to the patient the use of isolation methods for their safety	CR		OSCE
	Prescribe medication correctly as per patient needs	CR		OSCE
	Explain to the patient the use of saliva ejector for isolation	CR		OSCE
	Develop competency in maintaining appropriate patient record for future reference	CR		OSCE
	Explain to the patients the importance of using lead apron & thyroid collar for X-ray taking	CR		OSCE
	Recognize high risk situations and describe approaches and processes associated with risk management	CR		OSCE
	Describe the proper handling of patient care equipment and describe approaches and processes associated with risk management	CR		OSCE
	Demonstrate competency in establishing a therapeutic and professional relationship with patients and their families.	SGD		OSCE
	Recognize the magnitude and the importance of patient safety	SGD		OSCE
	Reflect on how patient safety practices can help to minimize the incidence and impact of medical errors, adverse events, and maximize recovery from them	SGD		OSCE
	Discuss safety precautions to avoid accidents in the laboratory.	SGD		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Inquire about symptoms and history of the presenting complaint	CR		OSCE/Role play

	Inquire about relevant information from the patients for the diagnosis of Gingival diseases and Periodontal diseases	CR		OSCE
	Communicate with superiors and juniors respectfully	CR		-----
	Demonstrate empathy and respect towards patient during history taking and treatment	CR		Role play
	Communicate clearly and confidently to the patient	CR		Role play
	Demonstrate positive gestures to the patient	CR		Role play
	Demonstrate competency in preparing and delivering high impact presentations.	CR		Competition
	Demonstrate sensitivity, honesty and compassion in difficult conversations, including those about death, end of life, adverse events, bad news, disclosure of errors and other sensitive topics.	CR		OSCE
	Demonstrate competency in communicating effectively with patients.	CR		OSCE
	Demonstrate competency in breaking the bad news to patient.	CR		OSCE
	<b><u>ORAL MEDICINE</u></b>			
72.	Take relevant history	IL/ CR	✓	OSPE
73.	Perform Extra-oral and Intra-oral examination.	IL/ CR	✓	OSPE
74.	Interpret basic investigations required for making diagnosis (Hematology, Radiology, Histopathology and biochemistry).	IL	✓	BCQs/ SAQs/ OSCE
75.	List the indication of special investigations in relation to various diseases/conditions	IL/ CBL	✓	BCQs/ Viva
76.	List the differential diagnosis for common diseases manifested in oral & maxillofacial region.	IL/CBL	✓	SAQs/ Viva
77.	Formulate treatment plan and give various treatment options to patient.	IL/ CBL	✓	CP
78.	Identify the role of immunity for maintenance of adequate oral health.	IL	✓	SAQs
79.	Explain sterilization and disinfection	IL/ SGD	✓	BCQs/ OSCE
80.	Discuss the rational for sterilization and disinfection.	IL/ SGD	✓	BCQs/SAQs
81.	Discuss and select appropriate methods of sterilization and disinfection	IL/ SGD	✓	BCQs/SAQs
82.	Understand radiation physics including X-rays production, different components of X-ray machines, and the various properties of X-ray	IL/ SGD	✓	SAQs/ OSCE/ Viva
83.	Recognize and describe different carious lesions, periapical pathology and radiographic methods of their evaluation	IL/ SGD	✓	BCQs/SAQs

84.	Compare paralleling and bisecting angle technique	IL/ SGD	✓	
85.	Understand advantages disadvantages of OPG	IL/ SGD	✓	
86.	Describe clinical features, diagnostic and manifestations of ludwigs angina, cellulitis, osteomyelitis.	IL/ SGD	✓	BCQs/SAQs
87.	List the causative agent and classification for syphilitic infections.	IL/ SGD	✓	BCQs/SAQs
88.	Describe the etiology, clinical presentation of primary, secondary and tertiary syphilis.	IL/ SGD	✓	SAQs/OSCE/ Viva
89.	Interpret the investigations involved in diagnosis of syphilitic infections.	IL/ CBL	✓	SAQs/OSCE/ Viva
90.	Describe the management of syphilitic infection	IL/CBL	✓	SAQs/ Viva
91.	Identify and describe the clinical features of oral tuberculous ulceration.	IL/ SGD	✓	SAQs/ Viva
92.	Enumerate various special investigations involved in making diagnosis of tuberculous ulcer.	IL/ SGD	✓	OSCE/ Viva
93.	Describe the management of patient with oral tuberculous ulcer	IL/CBL/ SGD	✓	SAQs/ OSCE/ Viva
94.	Describe the causes, Clinical features, diagnostic aids and management of various viral infections of Oro-facial region.	IL/CBL/ SGD	✓	SAQs/ Viva
95.	Describe the clinical features, diagnosis and management of herpes simplex infection	IL/CBL/ SGD	✓	SAQs / OSCE/ Viva
96.	Describe the clinical features, diagnosis and management of herpes zoster infection.	IL/CBL/ SGD	✓	SAQs / Viva
97.	Describe the classification of oral candidal infection.	IL	✓	SAQs / OSCE/ Viva
98.	Identify the predisposing factors of oral candidiasis.	IL	✓	SAQs / OSCE/ Viva
99.	Describe the clinical features and management of acute hyperplastic candidiasis.	IL/ SGD	✓	BCQs/SAQs
100.	Discuss etiological factors, clinical features and management of angular stomatitis.	IL/ SGD	✓	BCQs/SAQs
101.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate skills in introducing himself/ herself to the patient before history taking	SGD		OSCE/VIVA
	Take informed consent from the patient before commencing treatment.	SGD		OSCE/VIVA
	Demonstrate the professional attributes of a learner, colleague and physician in training.	SGD		OSCE/VIVA

	Describe the basic principles of ethics with reference to social, cultural and religious perspectives.	SGD		OSCE/VIVA
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate positive gestures to the patient.	SGD		OSCE/VIVA
	Demonstrate competency in preparing and delivering high impact presentations	SGD		OSCE/VIVA
	Communicate with superiors and juniors respectfully	SGD		OSCE/VIVA
	Inquire about symptoms and history of the presenting complaint	SGD		OSCE/VIVA
	<b><u>OPERATIVE DENTISTRY</u></b>			
102.	Revise the dental caries	IL	✓	Viva
103.	Enlist the Etiology of dental caries	IL	✓	BCQs/SAQs
104.	Review the pathogenesis of dental caries	IL	✓	BCQs/SAQs
105.	Suggest the steps for prevention of dental caries	IL	✓	BCQs/SAQs
106.	Identify restorative instruments	CR/SGD	✓	OSCE
107.	Describe use of every restorative instrument	CR/SGD	✓	OSCE
108.	Apply different grips to hold hand instruments	CR/SGD	✓	OSCE
109.	Demonstrate the positioning of patient and dentist in operatory field	CR/SGD	✓	OSCE
110.	Perform Clinical Examination & Diagnosis of Dental Caries	CR/SGD	✓	BCQs/ OSCE
111.	Know the importance of Radiographs	CR/SGD	✓	OSCE
112.	Perform basic intraoral radiography	CR/SGD		OSCE
113.	Demonstrate ability to identify dental pathology on radiographs	CR/SGD		OSCE
114.	Recognize the differences between primary and permanent teeth clinically and radio-graphically	SGD	✓	OSCE
115.	Apply the methods of sterilization and cross infection control in Operative dentistry	IL/CR/SGD	✓	BCQs/SAQs
116.	Perform Class 1 cavity preparation on patient tooth	CR/SGD		OSCE
117.	Demonstrate placement of lining on patient tooth	CR/SGD		OSCE
118.	Perform filling & finishing of Amalgam in Class I and Class I compound cavities	CR/SGD		OSCE
119.	Review dental amalgam as a restorative material	SGD	✓	BCQs
120.	Enlist parts of rubber dam system	SGD	✓	BCQs
121.	Understand advantages of rubber dam application	CR/SGD	✓	OSCE
122.	Practice application of rubber dam on phantom head	Skill LAB		OSCE
123.	Execute placement of fissure sealant	CR		OSCE



124.	Conduct clinical Examination and Diagnosis of Erosion, Attrition, Abrasion	IL/CR		BCQs/SAQs
125.	Execute Class V cavity preparation and its restoration on patient tooth	CR		OSCE
126.	Perform clinical Examination and Diagnosis of cracked tooth	IL/CR		BCQs/SAQs/ OSCE
127.	Prepare Class II slot cavity on patient tooth	CR/SGD		OSCE
128.	Enlist parts of matrix band retainer	Skill LAB	✓	OSCE
129.	Practice application of matrix band retainer with band & wedge in phantom lab	Skill Lab		OSCE
130.	Perform Class III cavity and its restoration on patient tooth	CR		OSCE
131.	Describe tooth colored restorative materials	IL/SGD	✓	BCQs
132.	Recognize the causes of Restorative failure and postoperative problems	IL/SGD	✓	BCQs/SAQs
133.	Introduce the use of lasers in dentistry	IL	✓	BCQs
134.	Employ aesthetic considerations in diagnosis and treatment planning	IL	✓	BCQs/SAQs
135.	Identify Endodontic instruments	CR		OSCE
136.	Introduce the basic principles of root canal therapy (technical aspects)	IL	✓	BCQs/SAQs
137.	Observe steps involved in root canal treatment	CR/SGD		OSCE
138.	<b>PROFESSIONALISM AND ETHICS</b>			
	Introduce himself/ herself to the patient before history taking	CR	✓	Role play
	Communicate to the patient confidently & respectfully during history taking and patient examination (Dental caries, NCCL, trauma)	CR		OSCE/ Role play
	Informs patient about the problem list	CR		OSCE/ Role play
	take consent from the patient before start of treatment	CR		OSCE
	Explain various types of filling to the patient	CR		OSCE/ Role play
	Explain preventive treatments for dental caries to the patient	CR	✓	SAQs
	Discuss the risk factors for root caries to patient	CR	✓	OSCE/ SAQs
	Use NICE guidelines for patient recall interval	CR	✓	SAQs
	Give post-filling instruction to the patient	CR	✓	Role play
	Ask correct questions about longitudinal tooth fractures in history taking	CR		Role play
	<b>PATIENT'S SAFETY</b>			

	Show to the patient about use of lead apron & thyroid collar for X-ray taking	CR		OSCE
	Explain to the patient, about the use of isolation methods for safety	CR		OSCE
	Explain patient to the use of rubber dam and saliva ejector for isolation	CR		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Speak the correct questions about history and symptoms of the presenting complaint	CR		OSCE/Role play
	Inquire relevant questions from the patients for the diagnosis of pulpal and periapical lesion	CR		OSCE
	Able to communicate with superiors and juniors respectfully	CR		-----
	Display empathy and respect to the patient during history taking	CR		Role play
	Speak clearly and confidently to the patient	CR		Role play
	Show positive gestures to the patient	CR		Role play
	Presentation skill	CR		Competition
	<b><u>GENERAL MEDICINE</u></b>			
<b>139.</b>	Discuss the approach to a patient with chest pain & describe the investigations, management and complications of ischemic heart disease including acute coronary syndrome and myocardial infarction.	IL		BCQs/SAQs/OSCE
<b>140.</b>	Discuss the pathophysiology, clinical manifestations and management of different types of heart failure.	IL		BCQs/SAQs/OSCE
<b>141.</b>	Diagnose and interpret a normal and abnormal ECG, arrhythmias & MI	IL/SGD		BCQs/SAQs/OSCE
<b>142.</b>	Discuss the approach to a patient with primary and secondary hypertension with its investigations & management.	IL		BCQs/SAQs/OSCE
<b>143.</b>	Discuss and describe the Valvular Heart Diseases & its management.	IL		BCQs/SAQs/OSCE
<b>144.</b>	Describe the usual presentations of rheumatic fever and infective endocarditis	IL/SGD		BCQs/SAQs/OSCE
<b>145.</b>	Describe in detail the pathogenesis, clinical features, evaluation and treatment plan for asthma.	IL		BCQs/SAQs/OSCE
<b>146.</b>	Discuss in detail the pathogenesis, clinical features, evaluation and treatment plan for COPD.	IL		BCQs/SAQs/OSCE
<b>147.</b>	Define TYPE 1 And TYPE 2 respiratory failure and understand the causes.	IL		BCQs/SAQs/OSCE
<b>148.</b>	Assess the benefits and hazards of long term oxygen therapy.	IL		BCQs/SAQs/OSCE

149.	Differentiate between community acquired and hospital acquired pneumonia, assessment of severity and its management.	IL		BCQs/SAQs/ OSCE
150.	Discuss the clinical manifestations, evaluation and investigation of pulmonary thromboembolism.	IL		BCQs/SAQs/ OSCE
151.	Discuss the pathogenesis, etiology, clinical picture and management of Pleural effusion and pneumothorax	IL		BCQs/SAQs/ OSCE
152.	Describe in detail the etiology, pathogenesis, clinical features, diagnostic tests, and treatment of Tuberculosis.	IL/SGD		BCQs/SAQs/ OSCE
153.	Differentiate inflammatory arthritis from osteoarthritis and management.	IL/ SGD		BCQ/SAQ/O SCE
154.	Diagnose the clinical features and extra articular manifestations of rheumatoid arthritis.	IL/ SGD		BCQ/SAQ/O SCE
155.	Describe the presentations of seronegative arthritis and ankylosing spondylitis, reactive and psoriatic arthritis.	IL		BCQ/SAQ/O SCE
156.	Discuss the clinical features, diagnostic criteria of Systemic Lupus Erythematosus and its management.	IL		BCQ/SAQ/O SCE
157.	Describe the rationale for prescribing disease modifying drugs and approach to modern therapy in rheumatoid arthritis.	IL		BCQ/SAQ/O SCE
158.	Discuss the diagnosis of systemic sclerosis and CREST their similarities and differences.	IL		BCQ/SAQ/O SCE
159.	Discuss the clinical features and management of Sjogren's syndrome.	IL/ SGD		BCQ/SAQ/O SCE
160.	Identify the risk factors for osteoporosis and how to prevent and manage it.	IL		BCQ/SAQ/O SCE
161.	Discuss the clinical manifestation and management of patients with crystal arthropathy.	IL		BCQs/SAQs/ OSCE
162.	Discuss the evaluation and management of dyslipidemia.	IL		BCQs/SAQs/ OSCE
163.	Discuss the evaluation and treatment of folic acid, Vitamin A, B1, B2 and B12 deficiency	IL		BCQs/SAQs/ OSCE
164.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate skills in introducing himself/ herself to the patient before history taking	CR		OSCE/ Role play
	Communicate the problem list to the patients	CR		OSCE/ Role play
	<b>PATIENT'S SAFETY</b>			
	Prescribe medication correctly as per patient needs	CR		OSCE

	Recognize high risk situations and describe approaches and processes associated with risk management	CR		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Inquire about symptoms and history of the presenting complaint	CR		OSCE/ <b>Role Play</b>
	Demonstrate sensitivity, honesty and compassion in difficult conversations, including those about death, end of life, adverse events, bad news, disclosure of errors and other sensitive topics.	CR		OSCE
	<b><u>GENERAL SURGERY</u></b>			
165.	Demonstrate the responses to homeostasis & metabolic changes in response to Trauma and stress	IL	✓	BCQs/SAQs
166.	Describe Pathophysiology of shock ,types & management	IL	✓	BCQs/SAQs/ OSCE
167.	Describe the management of hemorrhage, blood transfusion indication reaction and management.	IL/SGD	✓	BCQs/SAQs/ OSCE
168.	Explain Sterilization, asepsis techniques of sterilization & Sterilization of OT, prevention of infection in OT and the preventive measures for doctors.	IL/CR	✓	BCQs/SAQs
169.	Discuss wounds types & management	IL/CR	✓	BCQs/SAQs
170.	Diagnose surgical infections and their management. Role of antibiotics.	IL/CR	✓	BCQs/SAQs/ OSCE
171.	Describe the management of Chronic infection, Leprosy & TB	IL	✓	BCQs/SAQs
172.	Identify Abscess, Sinus fistula, subcutaneous swellings, ulcer types, cellulitis etc.	IL/SGD/C R	✓	BCQs/SAQs/ OSCE
173.	Describe the problems of fluid electrolyte disturbances and the correction	IL/CR	✓	BCQs/SAQs
174.	Discuss the Acid Base disturbances	IL/CR/PW	✓	BCQs/SAQs/ OSCE
175.	Describe the Types of nutrition, values of various fluids, complications	IL/CR	✓	BCQs/SAQs/ OSCE
176.	Discuss the principles of management of pre-op, post op cases	IL/CR/PW	✓	BCQs/SAQs/ OSCE

177.	Describe various types of anesthesia and complications and pre-operative care of patient & pain management.	IL/CR/PW	✓	BCQs/SAQs
178.	Describe skin & subcutaneous lesions.	IL/CR/PW/SGD	✓	BCQs/SAQs/OSCE
179.	Describes the diseases involving the salivary glands	IL/CR/PW/	✓	BCQs/SAQs/OSCE
180.	Describe the common benign Breast diseases and describe the malignant lesions their diagnosis, risk factors and principles of management of Skin grafts.	IL/CR	✓	BCQs/SAQs
181.	<b>PROFESSIONALISM AND ETHICS</b>			
	Describe basic principles of ethics with reference to social, cultural and religious perspective.	SGD		BCQs
	Discuss the role of doctor in community & Duties of a doctor.	SGD		BCQs
	<b>PATIENT'S SAFETY</b>			
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	Role play		OSCE
	Demonstrate competency in seeking and developing relevant information from other sources, including the patient's family, with patient's consent.	Role play		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate competency in communicating effectively with patients.	Role Play		OSCE
	Use effective and efficient communication and management strategies	Role Play		OSCE
	Communicate in a manner that is respectful of and sensitive to the patient's and family's age, orientation, culture and beliefs	CR		OSCE
<b><u>ORAL SURGERY</u></b>				
182.	Inquire about symptoms and history of the presenting complaint	IL	✓	BCQs
183.	Perform thorough History and Examination.	IL/ CR		OSCE
184.	Diagnose pattern & ways of making tentative diagnosis.	IL/ CR		OSCE
185.	Discuss different treatment modalities for various common conditions seen in oral surgery.	IL/CR	✓	OSCE

186.	List different methods of Sterilization and their relevance to OMFS.	IL	✓	BCQs
187.	Identify various Instruments used in Oral Surgery	CR		OSCE
188.	Discuss the Principles of Oral Surgery	IL	✓	BCQs
189.	Discuss types of incisions & flaps	IL	✓	CQ
190.	Identify methods of tissue handling	IL	✓	CQ
191.	Define Hemostasis	IL	✓	CQ
192.	Identify types of hemorrhage along with its management.	IL	✓	CQ
193.	Implement Pre & Post-Operative Care	CR	✓	OSCE
194.	Discuss the hazards of cross-infection and its prevention	IL	✓	BCQs/SAQs
195.	Discuss the rational for sterilization and disinfection.	IL/ SGD	✓	BCQs/SAQs
196.	Discuss and select appropriate methods of sterilization and disinfection	IL/ SGD	✓	BCQs/SAQs
197.	Discuss the procedure for Simple & Complex Exodontia.	IL/CR	✓	SAQs
198.	Describe the complications of extraction along with its management.	IL	✓	SAQs/ OSCE
199.	List post-op instructions	IL/ CR	✓	OSCE
200.	Discuss the significance of consent taking before initiating dental procedure	CR	✓	OSCE
201.	List ways to manage post-operative bleeding	IL	✓	SAQs/OSCE
202.	<b>PROFESSIONALISM AND ETHICS</b>			
	Apply ethical decision-making in all interactions with patients and their families, colleagues and other health care professionals.	CR		OSCE
	Demonstrate Competencies in avoiding potential ethical conflicts with pharmaceutical and other health industry providers.	CR		OSCE
	Differentiate between justice and equality.	CR	✓	SAQ
	Demonstrate skills in introducing himself/ herself to the patient before history taking	CR		Role play
	Communicate to the patient confidently & respectfully during history taking and patient examination	CR		OSCE/ Role play

	Communicate the problem list to the patients	CR		OSCE/ Role play
	Take informed consent from the patient before commencing treatment.	CR		Role play
	Counsel the patients regarding the preventive treatments Scaling and root planning	CR	✓	OSCE/ Role play
	Describe infection control, including aseptic technique, hand hygiene, screening and surveillance.	CR		OSCE
	Describe injury prevention, safe patient transport, handling and transfers, and removal of hazards.	CR		OSCE
	Identify and respond to safety concerns raised by others.	CR		OSCE
	Apply infection control procedures and processing of intra oral radiographs.	CR		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate effective learning, verbal and written communication skills.	CR		OSCE
	Use effective and efficient communication and management strategies.	CR		OSCE
	Use written record, electronic medical record or other digital technologies while communicating with supervisor and patient.	SGD		OSCE
	Demonstrate competency in establishing a therapeutic and professional relationship with patients and their families.	CR		OSCE
	Explain to the patient, about the use of isolation methods for safety	CR		OSCE
	Explain patient to the use of rubber dam and saliva ejector for isolation	CR		OSCE
	Speak the correct questions about history and symptoms of the presenting complaint	CR		OSCE/Role play
	Inquire relevant questions from the patients for the diagnosis of pulpal and periapical lesion	CR		OSCE
	Able to communicate with superiors and juniors respectfully	CR		-----
	Display empathy and respect to the patient during history taking	CR		Role play
	Speak clearly and confidently to the patient	CR		Role play
	Show positive gestures to the patient	CR		Role play
	Presentation skill	CR		Competition
	<b>Behavioral Sciences</b>			
	<b>Stress Management</b>			

203.	Define and differentiate between anxiety and stress in the context of dental care.	Lecture & SGD	✓	MCQs + SAQs
204.	Recognize the impact of patient anxiety and stress on oral health and treatment outcomes.	Lecture & SGD	✓	MCQs + SAQs
205.	Explore psychological theories related to stress and anxiety.	Lecture & SGD	✓	MCQs + SAQs
206.	Understand how these theories can be applied to the dental setting to better manage patient experiences.	Lecture & SGD	✓	MCQs + SAQs
207.	Recognize the psychological components of pain and their relevance in dental practice.	Lecture & SGD		MCQs + SAQs
	<b>History Taking &amp; interviewing.</b>	Lecture & SGD	✓	MCQs + SAQs
208.	Recognize the importance of collecting psychosocial data in the dental context.	Lecture & SGD	✓	MCQs + SAQs
209.	Identify psychosocial factors relevant to oral health and dental treatment outcomes.	Lecture & SGD	✓	MCQs + SAQs
210.	Define the concept of an interview in the context of healthcare and dentistry.	Lecture & SGD	✓	MCQs + SAQs
211.	Differentiate between various types of interviews, including structured, semi-structured, and unstructured interviews.	Lecture & SGD	✓	MCQs + SAQs
212.	Develop effective communication skills for conducting interviews in a dental setting.	Clinical Practice & SGD	✓	OSCE
213.	Demonstrate active listening skills to enhance the quality of information gathered during patient interviews.	Clinical Practice & SGD	✓	OSCE
	<b>Dentist-patient relationship</b>			
214.	Define and understand the dynamics of the dentist-patient relationship.	Lecture & SGD	✓	MCQs + SAQs
215.	Recognize the significance of a positive and effective dentist-patient relationship in oral healthcare.	Lecture & SGD	✓	MCQs + SAQs
216.	Explore the concept of professional boundaries in the dentist-patient relationship.	Lecture & SGD	✓	MCQs + SAQs
217.	Recognize the psychological reactions that may occur in both dentists and patients during interactions and treatment.	Lecture & SGD	✓	MCQs + SAQs
218.	Develop skills to establish rapport and build a trusting relationship with patients.	Clinical Practice & SGD		OSCE



219.	Understand the importance of effective communication in fostering a positive dentist-patient connection.	Lecture & SGD	✓	MCQs + SAQs
	<b>Ethics</b>			
220.	Understand the rights of patients and doctors as outlined by professional Medical codes (e.g., PMDC) and ethical principles.	Lecture & SGD	✓	MCQs + SAQs
221.	Define informed consent and its significance in dental practice.	Lecture & SGD	✓	MCQs + SAQs
222.	Recognize the ethical and legal aspects of obtaining informed consent from patients.	Lecture & SGD	✓	MCQs + SAQs
223.	Identify the essential components that must be included in the process of obtaining informed consent.	Lecture & SGD	✓	MCQs + SAQs
224.	Understand the importance of providing comprehensive information to patients about proposed treatments.	Lecture & SGD	✓	MCQs + SAQs
	<b>Leadership and Management</b>			
225.	Understand the principles of financial management specific to dental practices.	Lecture & SGD	✓	MCQs + SAQs
226.	Explore dental economics and its impact on the financial viability of a dental practice.	Lecture & SGD	✓	MCQs + SAQs

# ACADEMIC SCHEDULE

Commencement of 7 <sup>th</sup> Module		Weekly Schedule of Module VII PERIODONTOLOGY	
Activity	Week	Lecture 1	
Academic Session – BDS Third Professional	Week- 1	Knowledge Of Healthy Periodontium/Aging of Periodontium <b>LO (34-41)</b>	
	Week- 2	Epidemiology/Etiology of Periodontal diseases <b>LO (42-43)</b>	
	Week- 3	Dental Plaque <b>LO (44-48)</b>	
	Week- 4	Dental Calculus <b>LO (49-55)</b>	
	Week- 5	Microbiology Of Plaque Associated Periodontal Disease <b>LO (56-62)</b>	
	Week- 6	Histopathogenesis Of Plaque Associated Periodontal Disease <b>LO (63-66)</b>	
	Week- 7	Host Response In Periodontal Disease <b>LO (67-70)</b>	
	Week- 8	Revision Of Module 7 topics	
	Week- 9	Presentations	
	Week- 10	Class Test	
	Week-11	Revision	
	Week-12	Revision	
Commencement of 7 <sup>th</sup> Module	Week-13 and 14	THEORY AND VIVA EXAMINATION <b>ORAL PATHOLOGY</b>	
Activity	Week	Lecture 1	Lecture 2

Commencement of 7 <sup>th</sup> Module		Weekly Schedule of Module VII ORAL PATHOLOGY	
Activity	Week	Lecture 1	Lecture 2
Academic Session – BDS Third Professional	Week- 1	Anomalies of number of teeth <b>LO (1-5)</b>	Anomalies of Size and Shape of teeth I <b>LO (1)</b>
	Week- 2	Anomalies of Size and Shape of teeth II <b>LO (1)</b>	Anomalies of Structure of teeth <b>LO (6-9)</b>
	Week- 3	Amelogenesis imperfect <b>LO (10)</b>	Dentinogenesis Imperfecta  Hypercementosis <b>LO (10)</b>
	Week- 4	Definition and Etiology of dental Caries <b>LO (19-22, 24)</b>	Pathology of dental caries <b>LO (23, 27)</b>
	Week- 5	Histopathology of enamel caries <b>LO (25)</b>	Histopathology of dentin caries <b>LO (25)</b>
	Week- 6	Prevention of dental caries <b>LO (26)</b>	Pulpitis (Clinical features, Aetiology and Histopathology) <b>LO (11-12, 18)</b>
	Week- 7	Pulp polyp, Pulp calcification & Necrosis <b>LO (13 - 14)</b>	Periapical Periodontitis (Acute and chronic) <b>LO (17)</b>
	Week- 8	Spread of oral infections I <b>LO (29-30)</b>	Spread of oral infections II <b>LO (29-30)</b>
	Week- 9	Revision	<b>CAT -2</b>
	Week- 10	<b>Guest Lecture</b>	Case-Based Presentation of Students
	Week-11	Revision	Revision
	Week-12	Revision	Revision
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>	

Commencement of 7 <sup>th</sup> Module		Weekly Schedule of Module VII ORAL MEDICINE
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	History and examination <b>LO (70-72)</b>
	Week- 2	Investigations and X-Rays <b>LO (73-75)</b>
	Week- 3	Immunity <b>LO (76)</b>
	Week- 4	<b>Sterilization and disinfection</b> <b>LO(77-79)</b>
	Week- 5	<b>X_ray</b> <b>LO(80-81)</b>
	Week- 6	<b>Xray</b> <b>LO(82-83)</b>
	Week- 7	Bacterial infection <b>LO (84-91)</b>
	Week- 8	Fungal infection <b>LO (95- 98)</b>
	Week- 9	Viral infection <b>LO (91-94)</b>
	Week- 10	Revision
	Week-11	<b>CAT</b>
	Week-12	Revision
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>

Commencement of 7 <sup>th</sup> Module		Weekly Schedule of Module VII OPERATIVE DENTISTRY	
Activity	Week no.	Interactive Lectures (Groups A,B,C,D)	Clinical Rotation in OPD/SGD/Skill Lab (Groups A,B,C,D)
Academic Session – BDS Third Professional	W/1	1. Introduction of Operative Dentistry 2. Definition & Etiology of Dental caries <b>LO (100-101)</b>	- Orientation to the Operative OPD - Identify restorative instruments - Demonstrate about positioning the patients and Dentist in OPD  <b>LO (104-107)</b>
	W/2	1. Pathogenesis of Dental caries. 2. Prevention of Dental caries. <b>LO (102-103)</b>	- Revision of the principles of cavity design of Class I, class I compound & V its restoration on patient tooth in OPD <b>LO (114,116,123)</b>
	W/3	Examination and Diagnosis of Dental Caries. <b>LO (108)</b>	- Application of matrix band retainer, band & wedge on phantom tooth in skill lab  <b>LO(126,127)</b> - Understanding of Radiographs <b>LO (109-112)</b>
	W/4	Examination and Diagnosis of Erosion, Attrition, Abrasion <b>LO (122)</b>	- Preparation & restoration of Class II Slot and III cavities on patients teeth in OPD  <b>LO (125 and 128)</b>
	W/5	Examination and Diagnosis of cracked Tooth <b>LO (124)</b>	- Application of Rubber dam on phantom teeth in skill lab <b>LO (118-120)</b>
	W/6	Selection of restorative materials. (Dental amalgam, tooth colored materials) <b>LO (129,136)</b>	Practice of Rubber dam on phantom teeth in skill lab <b>LO (118-120)</b>
	W/7	Understand the methods of isolation, control of the operating field <b>LO (136)</b>	-Demonstration of Endodontic Instruments <b>LO (133)</b>
	W/8	Cross infection control & sterilization in dentistry <b>LO (113 )</b>	- Demonstration for root canal procedure on extracted tooth <b>LO (133-135)</b>
	W/9	Causes of restorative failure & postoperative problems <b>LO (130)</b>	Poster /Presentation/Quiz competition <b>Clinical OPD test (OSCE)</b>
	W/10	Discuss steps of root canal procedure <b>LO(135)</b>	
	W/11	Discuss esthetic considerations in diagnosis and treatment planning <b>LO (132)</b>	
	W/12	Introduce the use of lasers in dentistry <b>LO (131)</b>	
	W/13	<b>Theory Exam</b>	
	W/14	<b>Practical/viva Exam</b>	

Commencement of 7 <sup>th</sup> Module		Weekly Schedule of Module VII GENERAL MEDICINE	
Activity	Week	Lecture 1	Lecture 2
Academic Session – BDS Third Professional	Week- 1	ACS and MI <b>LO (137)</b>	Obstructive lung diseases- Asthma <b>LO (143)</b>
	Week- 2	Heart failure <b>LO (138)</b>	COPD <b>LO (144)</b>
	Week- 3	ECG <b>LO (139)</b>	Bronchiectasis and Respiratory failure <b>LO (145)</b>
	Week- 4	Hypertension <b>LO (140)</b>	Pulmonary thromboembolism <b>LO (148)</b>
	Week- 5	Valvular Heart Diseases <b>LO (141)</b>	Pneumonia <b>LO (147)</b>
	Week- 6	Rheumatic fever and infective endocarditis <b>LO (142)</b>	Tuberculosis <b>LO (150)</b>
	Week- 7	Osteoarthritis <b>LO (151)</b>	Pleural effusion and pneumothorax <b>LO (149)</b>
	Week- 8	Rheumatoid arthritis <b>LO (152)</b>	Restrictive lung diseases <b>LO (146)</b>
	Week- 9	Systemic Lupus Erythematosus <b>LO (154)</b>	Sjögren's syndrome <b>LO (157)</b>
	Week- 10	Dyslipidemia <b>LO (160)</b>	Seronegative arthritis <b>LO (153)</b>
	Week-11	Osteoporosis <b>LO (158)</b>	Systemic sclerosis and CREST <b>LO (156)</b>
	Week-12	Crystal arthropathy <b>LO (159)</b>	Vitamins deficiency <b>LO (161)</b>
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>	

Commencement of 7 <sup>th</sup> Module		Weekly Schedule of Module VII GENERAL SURGERY
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	Metabolic response to trauma. <b>LO (163)</b>
	Week- 2	Shock, Types and their management. <b>LO (164)</b> Hemorrhage, types and management, Blood transfusion, indications, risks, complications, Blood Products. How to write transfusion notes. <b>LO (165)</b>
	Week- 3	Sterilization, asepsis, techniques of sterilization. OT Protocols & prevention of infection in Operation Theater. <b>LO (166)</b>
	Week- 4	Wounds types, factors affecting wound healing. Acute wounds, chronic wounds, scar and contractures. <b>LO (167)</b> Surgical infection, classification, SIRS & MODS, Role of Antibiotics. <b>LO (168)</b>
	Week- 5	Chronic infections & leprosy & tuberculosis. <b>LO (169)</b>
	Week- 6	Abscess, sinus, fistula, subcutaneous swellings, ulcer types, cellulitis etc. <b>LO (170)</b> Acid base, fluid electrolyte balance. <b>LO (171-172)</b>
	Week- 7	Surgical nutrition, calculation and products use. <b>LO (173)</b>
	Week- 8	General Anesthesia, Drugs and gases used and their complications. Spinal anesthesia, Local anesthesia, uses & complications. <b>LO (175)</b>
	Week- 9	Pain control methods, chronic pain, caused by malignancy. <b>LO (177)</b>
	Week- 10	Preop care with high risk cases, post op care & management. <b>LO (174)</b> Benign & malignant lesions of skin and skin vascular lesions. Abscess, sinus, fistula, subcutaneous swellings, ulcer types, cellulitis etc. <b>LO (176)</b>
	Week-11	<b>Revision</b> <b>LO (177)</b>
	Week-12	Breast Benign diseases. <b>LO (178)</b> Breast cancer & diagnostic methods used to detect malignancy. <b>LO (178)</b>
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>
Commencement of 7 <sup>th</sup> Module		Weekly Schedule of Module VII

		ORAL SURGERY
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	History & examination 1 LO (180-182,197)
	Week- 2	History & examination 2 LO (180-182,197)
	Week- 3	History & examination 3 LO (180-182,197)
	Week- 4	health status evaluation 1 LO (15...20)
	Week- 5	health status evaluation 2 LO (194-198)
	Week- 6	health status evaluation 3 LO (194-198)
	Week- 7	health status evaluation 4 LO (194-198)
	Week- 8	Sterilization & Cross Infection control 1 LO (183,184,185,191-195)
	Week- 9	Sterilization & Cross Infection control 2 LO (183,184,185,191-195)
	Week- 10	Sterilization & Cross Infection control 3 LO (183,184,185,191-195)
	Week-11	Sterilization & Cross Infection control 4 LO (183,184,185,191-195)
	Week-12	Sterilization & Cross Infection control 5 LO (183,184,185,191-195)
	Week- 13 and 14	THEORY AND VIVA EXAMINATION



## **MODULE VIII**

At the end of the module, students should be able to:

S.No	Learning Objectives	Teaching strategy	Online Teaching	Assessment tool
	<b><u>ORAL PATHOLOGY</u></b>			
1.	Classify the cyst of jaws.	IL	✓	BCQs/SAQs
2.	Explain the mechanism of radicular cyst formation.	SGD	✓	SAQs
3.	Describe the clinical and histopathological features of odontogenic cysts.	IL	✓	BCQs/SAQs/ OSPE
4.	Compare clinical, histological and radiological features of dentigerous cysts and odontogenic keratocyst.	SGD	✓	BCQs/SAQs/ OSPE
5.	Discuss odontogenic developmental cysts in detail.	SGD	✓	BCQs/SAQs
6.	Describe the features of naevoid basal cell carcinoma syndrome (NBCCS).	SGD	✓	BCQs/OSPE
7.	Give an account of non-odontogenic epithelial cysts.	IL	✓	BCQs/SAQs
8.	Discuss the clinical and histological features of soft tissue cysts (skin, mucous membrane and glandular).	IL	✓	BCQs/SAQs/ OSPE
9.	Discuss in detail the non-epithelial cysts of jaws.	IL	✓	BCQs/SAQs
10.	Classify odontogenic and non-odontogenic tumors of jaws.	IL	✓	BCQs/SAQs
11.	Describe the clinical, radiological and histological features of Ameloblastoma.	IL	✓	BCQs/SAQs
12.	Discuss clinical, radiological and histological features of calcifying epithelial odontogenic tumor.	SGD	✓	BCQs/SAQs
13.	Define odontomes and differentiate between Compound and Complex odontomes.	SGD	✓	OSPE
14.	Discuss mesenchymal tumors	IL	✓	BCQs/SAQs
15.	Differentiate between the premalignant lesions & conditions of oral cavity.	SGD	✓	BCQs/SAQS/ OSPE
16.	Discuss etiopathogenesis, histological and clinical features of oral submucous fibrosis.	IL/SGD	✓	BCQs/SAQs/ OSPE
17.	Describe etiopathogenesis, types, and clinical features of oral lichen planus.	IL	✓	BCQs/SAQs/ OSPE
18.	Define the key features of epithelial dysplasia.	SGD	✓	SAQs

19.	Describe etiology, types, and clinical features of leukoplakia.	IL	✓	BCQs/SAQs/ OSPE
20.	Discuss etiology and clinical features of oral squamous cell carcinoma	SGD	✓	BCQs/SAQs
21.	Discuss the infective, obstructive and traumatic disorders of major salivary glands.	IL/SGD	✓	BCQs/SAQs/ OSPE
22.	Discuss necrotizing sialometaplasia and sjögren syndrome in detail.	IL/SGD	✓	BCQs/SAQs
23.	Classify the tumors of salivary glands.	IL	✓	BCQs/SAQs
24.	Define xerostomia and enlist its causes.	IL	✓	BCQs/SAQs
25.	Describe the clinical and histological features of pleomorphic adenoma, warthin's tumour and mucoepidermoid carcinoma.	IL	✓	BCQs/SAQs/ OSPE
26.	Identify the Stafne bone defect on a radiograph	PW	✓	OSPE
27.	Identify the clinical images of precancerous lesions & conditions	PW	✓	OSPE
28.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate Competency in behaving ethical manner with patients, coworkers and the public to gain interest.	PBL		OSCE
	<b>PATIENT'S SAFETY</b>			
	To know the use and significance of Personal protective Equipments in patient management. To follow WHO guide line in PPE use.	SGD	✓	OSCE
	Discusses impact of human factors on patient safety	SGD	✓	OSCE
	<b>COMMUNICATION SKILLS</b>			
	Use written record, electronic medical record or other digital technologies while communicating with supervisor and patient.	SGD	✓	OSCE
	Demonstrate interpersonal, intercultural and technologically mediated communication from multiple perspective.	PBL		BCQ
	<b><u>PERIODONTOLOGY</u></b>			
29.	Define periodontal disease.	CR	✓	BCQs/SAQs
30.	Describe the classification system of periodontal diseases.	CR	✓	BCQs/SAQs
31.	Discuss the need for classification.	CR	✓	BCQs/SAQs
32.	Discuss Dental plaque induced gingival diseases	CR	✓	BCQs/SAQs /CP
33.	Define Desquamative gingivitis.	IL/CR	✓	BCQs/SAQs/ OSCE/CP

34.	List the diseases that can clinically present as Desquamative gingivitis.	SGD/CR	✓	BCQs/SAQs/CP
35.	Recognize the clinical features of Desquamative gingivitis.	IL	✓	MCQs/SEQs/OSCE
36.	Differentiate between mild, moderate and severe forms of Desquamative gingivitis.	IL/SGD	✓	MCQs/SEQs/OSCE
37.	Discuss the various etiological factors involved in Desquamative gingivitis.	IL	✓	MCQs/SEQs/OSCE
38.	Discuss the management of Desquamative gingivitis.	IL/SGD	✓	MCQs/SEQs/OSCE
39.	Classify Acute gingival infections.	IL/SGD	✓	MCQs/SEQs/OSCE
40.	Discuss the etiology, clinical features, differential diagnosis and treatment of Acute Necrotizing Ulcerative Gingivitis in detail.	IL/SGD/CR	✓	MCQs/SEQs/OSCE
41.	Discuss the etiology, clinical characteristics, differential diagnosis and management of Acute Herpetic Gingivostomatitis in detail.	IL/SGD/CR	✓	MCQs/SEQs/OSCE
42.	Define Pericoronitis.	IL/SGD	✓	MCQs/SEQs/OSCE
43.	Discuss the clinical features, complications and treatment of Pericoronitis in detail.	IL/SGD/CR	✓	MCQs/SEQs/OSCE
44.	Define periodontal pockets	IL/SGD	✓	BCQs/SAQs/OSCE/CP
45.	List the classification of periodontal pockets.	IL	✓	BCQs/SAQs/OSCE/CP
46.	Describe the procedure of determining the pocket depth.	IL/CR	✓	BCQs/SAQs/CP
47.	Describe and differentiate true and false pockets.	IL/CR	✓	BCQs/SAQs/CP
48.	Enumerate the clinical features of periodontal pockets.	IL/CR	✓	BCQs/SAQs/OSCE/CP
49.	Explain the pathogenesis of periodontal diseases.	IL	✓	BCQs/SAQs/OSCE/CP
50.	Discuss the histopathology of periodontal pockets with emphasis on changes in the soft tissue and hard tissue wall.	IL/CR	✓	BCQs/SAQs/CP
51.	Discuss healing of periodontal pockets.	IL	✓	BCQs/SAQs/CP

52.	Discuss the contents of periodontal pockets.	CR	✓	BCQs/SAQs/O SCE/ CP
53.	Define and distinguish between supra bony and infra bony pockets.	SGD	✓	BCQs/SAQs/O SCE/ CP
54.	Describe the pattern of bone Loss in periodontal disease.	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
55.	Define and discuss periodontal cyst.	CR	✓	BCQs/SAQs/O SCE/ CP
56.	Discuss benign and malignant tumors of gingiva.	CR	✓	BCQs/SAQs/O SCE/ CP
57.	Discuss etiology, clinical features and management of Fibrous epulis, Fibroma, Papilloma	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
58.	Discuss etiology, clinical features and management of Central giant cell granuloma	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
59.	Discuss etiology, clinical features and management of Peripheral giant cell granuloma	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
60.	Discuss etiology, clinical features and management of Leukoplakia	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
61.	Discuss etiology, clinical features and management of Gingival cyst	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
62.	Discuss etiology, clinical features and management of Squamous cell carcinoma	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
63.	Discuss etiology, clinical features and management of Malignant melanoma	SGD/CR	✓	BCQs/SAQs/O SCE/ CP
64.	Discuss false enlargements of gingival tissues.	IL	✓	BCQs/SAQs/O SCE/ CP
65.	Define abscess.	IL/CR	✓	BCQs/SAQs/O SCE/ CP
66.	Discuss classification of abscess.	SGD	✓	BCQs/SAQs/C P
67.	Define periodontal abscess.	IL/SGD/CR	✓	BCQs/SAQs/O SCE/CP
68.	Define pericoronal abscess.	SGD	✓	BCQs/SAQs/O SCE/ CP
69.	Discuss the difference between Acute and chronic periodontal abscess.	SGD/CR	✓	BCQs/SAQs/C P
70.	List the clinical features of acute and chronic periodontal abscess.	IL/CR	✓	BCQs/SAQs/C P

71.	Describe radiographical signs of periodontal abscess.	IL/CR	✓	BCQs/SAQs/O SCE/ CP
72.	Discuss treatment options for periodontal abscess.	CR	✓	BCQs/SAQs/O SCE/ CP
73.	Describe the indications for antibiotic therapy in patients with acute periodontal abscess.	CR	✓	BCQs/SAQs/O SCE/ CP
74.	Classify Gingival enlargement.	IL/SGD	✓	MCQs/SEQs/ OSCE
75.	Discuss the etiology & grading of gingival enlargement.	IL/SGD	✓	MCQs/SEQs/ OSCE
76.	Discuss various types of gingival enlargements in detail.	IL/SGD	✓	MCQs/SEQs/ OSCE
77.	Discuss the management of Gingival enlargement.	IL/SGD	✓	MCQs/SEQs/ OSCE
78.	<b>PROFESSIONALISM AND ETHICS</b>			
	Describe basic principles of ethics with reference to social, cultural and religious perspective.	CR/SGD	✓	BCQs
	Discuss the role of doctor in community & Duties of a doctor.	CR/SGD	✓	BCQs
	Demonstrate competency in behaving in ethical manner with patients, coworkers and the public to gain trust.	CR		OSCE
	Analyze ethical issues/dilemmas in healthcare practice.	CR		OSCE
	Demonstrate competencies in resolving ethical issues faced during common clinical scenarios.	CR		OSCE
	Demonstrate competencies in avoiding potential ethical conflicts with pharmaceutical and other health industry providers.	CR		OSCE
	Differentiate between justice and equity.	CR/SGD	✓	BCQ
	Apply professional code of ethics guidance given in PMC & HEC in given clinical scenarios.	CR		OSCE
	Demonstrate through knowledge and behavior, a commitment to the highest standards of competence, ethics, integrity and accountability to the patient and profession.	CR		OSCE
	Demonstrate Competency in behaving ethical manner with patients, coworkers and the public to gain interest.	CR		OSCE
	<b>PATIENT'S SAFETY</b>			
	Demonstrate competency in a establishing a therapeutic and professional relationship with patients and their families.	CR		OSCE

	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	CR		OSCE
	Demonstrate competency in seeking and developing relevant information from other sources, including the patient's family, with patient's consent.	CR		OSCE
	Recognize adverse events and errors.	CR/SGD	✓	OSCE
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	CR		OSCE
	Discusses modern theory and principles of safety—for healthcare and non-healthcare industries	CR/SGD	✓	OSCE
	Discusses impact of human factors on patient safety	CR		OSCE
	Describes clinical and administrative indicators of safety and safe delivery of high-quality care	CR		OSCE
	Demonstrates ability to analyze process and outcomes measures, data and impact on quality and safety	CR		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate competency in communicating effectively with patients.	CR		OSCE
	Demonstrate competency in breaking the bad news to patient.	Role Play		OSCE
	Demonstrate competency communicating effectively about ethical issues with patients and their family.	CR		OSCE
	Use effective and efficient communication and management strategies	Role Play		OSCE
	Use written record, electronic medical record or other digital technologies while communicating with supervisor and patient.	SGD	✓	OSCE
	Communicate in a manner that is respectful of and sensitive to the patient's and family's age, orientation, culture and beliefs	CR		OSCE
	Demonstrate competency communicating effectively about ethical issues with patients and their family.	CR		OSCE
	Communicate patient using non-verbal behavior & appropriate voice tone.	CR		OSCE
	Communicate using patient-centered approach that encourages patient trust and autonomy which should be characterized by empathy, respect and compassion.	CR		OSCE
	Demonstrate empathy while communicating with patients.	CR		OSCE

	Demonstrate interpersonal, intercultural and technologically mediated communication from multiple perspectives.	PBL	✓	BCQ
	<b><u>ORAL MEDICINE</u></b>			
79.	List and differentiate normal oral mucosal variants from pathological lesions.	IL/ SGD	✓	SAQs
80.	Classify Red and White lesions	IL/SGD	✓	SAQs/OSCE
81.	Enumerate the causes of red and white lesions of oral mucosa.	IL/ SGD	✓	BCQs/SAQs/ OSCE
82.	Classify the types of leukoplakia.	IL	✓	BCQs/SAQs/O SCE
83.	Describe management for leukoplakia.	IL/ CBL	✓	SAQs
84.	Discuss clinical features and management of Erythroplakia.	IL/CBL	✓	BCQs/SAQs
85.	Discuss the clinical features of Oral Submucous Fibrosis	IL	✓	SAQs
86.	Classify Oral ulcers	IL/ CR	✓	SAQs/Viva
87.	List etiological factors for recurrent Aphthous ulceration.	IL	✓	SAQs
88.	Discuss the types and clinical features of recurrent Aphthous ulceration	IL/ CR	✓	SAQs/ Viva
89.	Interpret investigations involved in diagnosis of recurrent Aphthous ulceration	IL/ CR	✓	SAQs/ Viva
90.	Describe the management of recurrent Aphthous ulceration.	IL/ CR	✓	SAQs/OSCE
91.	Define vesiculo-bullous diseases.	IL	✓	SAQs
92.	List differential diagnosis of various vesiculo-bullous lesions of oral cavity.	IL/ SGD	✓	SAQs/ OSCE
93.	Discuss the clinical features and management of Behçet's syndrome	IL	✓	CQ
94.	Differentiate between Mucous membrane pemphigus and Mucous membrane pemphigoid.	IL/CBL	✓	SAQs/ Viva
95.	Discuss the cause and clinical features of Mucous membrane pemphigoid	IL/CBL	✓	SAQs/OSCE/ Viva
96.	Discuss the cause and clinical features of pemphigus vulgaris.	IL/CBL	✓	SAQs/OSCE/ Viva
97.	Discuss investigations necessary to diagnose pemphigus vulgaris and Mucous membrane pemphigoid.	IL/CBL	✓	SAQs
98.	Describe the histological difference between Mucous membrane pemphigus and Mucous membrane pemphigoid.	IL/ SGD	✓	CQ

99.	Discuss various treatment options involved in pemphigus vulgaris and Mucous membrane pemphigoid.	IL/ SGD/ CBL	✓	SAQs/OSCE
100.	Describe the causes, clinical features and management of erythema multiforme.	IL/ SGD/ CBL	✓	SAQs/OSCE
101.	Define premalignant lesion.	IL	✓	SAQs/ Viva
102.	Define premalignant condition.	IL	✓	SAQs/ Viva
103.	Differentiate between premalignant lesion and premalignant condition	IL/CBL	✓	BCQs/ SAQs
104.	List and discuss various premalignant lesions of oral cavity.	IL/CBL	✓	BCQs/ SAQs
105.	List and discuss various premalignant conditions of oral cavity	IL/SGD	✓	BCQs/ SAQs
106.	Discuss the principles for management of dysplastic lesions	IL/ SGD	✓	Viva
107.	Discuss various risk factors for malignant changes in oral lesions.	IL/ SGD	✓	SAQs/ Viva
108.	Discuss clinical features and management of Erythroplakia.	IL	✓	SAQs/ OSCE
109.	Discuss clinical features and management of Leukoplakia.	IL	✓	SAQs/ OSCE
110.	Discuss clinical features and management of chronic hyperplastic candidiasis.	IL	✓	SAQs/SAQ/VI VA
111.	Discuss the causes, clinical features and management of Oral sub mucous fibrosis.	IL/ SGD/CBL	✓	SAQs/OSCE/ Viva
112.	Describe the role of general dental practitioner in management of precancerous and cancerous lesions.	IL	✓	Viva/OSCE
113.	Discuss prevention and medical management of pre-cancerous lesions and conditions	IL	✓	SAQs
114.	List the causes of Glossitis.	IL	✓	SAQs
115.	Discuss the clinical features and management of Erythema migrans.	IL	✓	BCQs/ SAQs
116.	Discuss the clinical features and management of median rhomboid glossitis.	IL	✓	BCQs/SAQs
117.	Describe the causes of macroglossia.	IL	✓	BCQs/ SCQ/VIVA
118.	Discuss the cause, investigations and treatment options involved in Amyloidosis	IL	✓	BCQ/SAQ/VI VA
119.	List the causes of pain in oral and maxillofacial region.	IL/ SGD/ CBL	✓	Viva/SAQ



120.	Discuss clinical features, diagnosis and management of trigeminal neuralgia.	IL/ SGD/ CBL	✓	BCQs/ SAQs/ Viva
121.	Discuss the clinical features and management of atypical facial pain.	IL	✓	BCQs/ CQ
122.	Discuss the clinical features and management of burning mouth syndrome.	IL	✓	BCQs/ CQ
123.	List the causes of facial palsy	IL/ SGD/	✓	BCQs/SAQs/ OSCE
124.	Describe the management of Bell's palsy.	IL/ SGD/	✓	BCQs/SAQs/O SCE
125.	Discuss basic anatomy and physiology of Temporomandibular Joint and the pathologies related to it,	IL/ SGD/	✓	BCQs/SAQs/ viva
126.	Evaluate TMJ pain and dysfunction	IL/ SGD/	✓	BCQs/SAQs/ viva
127.	Assess patients for potential TMD risk factors	IL/ SGD/	✓	BCQs/SAQs/ viva
128.	Apply clinical examination findings to determine patient's TMD diagnoses	IL/ SGD/	✓	BCQs/SAQs/ viva
129.	List the most commonly used physical, medication, and behavioral treatment modalities for TMD	IL/ SGD/	✓	BCQs/SAQs/ viva
130.	Implement a TMD treatment protocol, including TMD self-management strategies	IL/ SGD/	✓	BCQs/SAQs/ viva
131.	Assess the patient with TMJ disc derangement	IL/ SGD/	✓	BCQs/SAQs/ viva
132.	List the management of TMJ disc derangement	IL/ SGD/	✓	BCQs/SAQs/vi va
133.	Discuss the adverse effects of radiotherapy in Oral & Maxillofacial region.	IL/ SGD	✓	OSCE/ Viva
134.	Discuss the role of general dentist in management of patients undergoing radiotherapy.	IL/ SGD	✓	BCQs/ OSCE/ Viva
135.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate skills in introducing himself/ herself to the patient before history taking	SGD		OSCE/ Viva
	Take informed consent from the patient before commencing treatment.	SGD		OSCE/ Viva
	Demonstrate the professional attributes of a learner, colleague and physician in training.	SGD		OSCE/ Viva

	Describe the basic principles of ethics with reference to social, cultural and religious perspectives.	SGD		OSCE/ Viva
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate positive gestures to the patient.	SGD		OSCE/ Viva
	Demonstrate competency in preparing and delivering high impact presentations	SGD		OSCE/ Viva
	<b><u>PROSTHODONTICS</u></b>			
136.	Inquire about symptoms and history of the presenting complaint	IL	✓	CQ
137.	Interpret consequences of tooth loss	IL	✓	CQ
138.	Rationalize the need of prosthesis	IL	✓	CQ
139.	Identify the types of prosthodontics treatment modalities.	CBL	✓	OSCE/VIVA
140.	Identify partial dentulism according to Kennedy's Classification	CBL	✓	OSCE/VIVA
141.	Apply Applegate's rules on different dentate states	CBL	✓	OSCE/VIVA
142.	Enumerate the need for classifications systems	CBL	✓	OSCE/VIVA
143.	Choose appropriate treatment modality according to number of teeth missing with justification.	CBL	✓	OSCE/VIVA
144.	Justify the prescription of removable partial denture in a patient.	CBL	✓	OSCE/VIVA
145.	Classify removable partial dentures according to support.	CBL	✓	OSCE/VIVA
146.	Enumerate the types of removable partial dentures on the basis of material, uses and clinical requirements.	CBL	✓	OSCE/VIVA
147.	Apply material science for fabrication of cast removable partial dentures.	CBL	✓	OSCE/VIVA
148.	List the uses of interim removable partial dentures.	IL	✓	OSCE/VIVA
149.	Justify the prescription of interim removable partial dentures.	IL/CR		OSCE/VIVA
150.	Design interim removable partial dentures.	CR		OSCE/VIVA
151.	Outline clinical and laboratory procedures for interim removable partial dentures.	IL/CR		OSCE/VIVA
152.	Design interim removable prosthesis	CR		SC
153.	Demonstrate skill in provide block out and relief according to the situation	CR		SC
154.	Demonstrate skill in recording occlusal relationships in partially dentate individuals.	CR		SC
155.	Select appropriate occlusal relationships method in partially dentate individuals.	CR		SC

156.	Perform the process of acrylic processing, finishing and polishing the dentures.	CR		PW
157.	Adjust acrylic removable partial dentures in patient's mouth.	CR		PW
158.	Identify common pressure areas encountered.	IL/CR		OSCE/PW
159.	Apply disinfection protocols for impressions and removable prosthesis.	IL/CR		OSCE/VIVA
160.	Sequencing of clinical and laboratory procedures for interim removable partial dentures.	CR		OSCE
161.	Recognize the need of omitting or joining one or more fabrication steps of removable partial denture.	CR		OSCE
162.	Fabricate removable partial dentures for partially dentate patients.	CR		PW
163.	Outline treatment planning protocol of a prosthodontics patient.	IL	✓	OSCE/VIVA
164.	Enumerate favorable history and examination in Sequence	IL	✓	OSCE/VIVA
165.	Record a comprehensive history of a prosthodontics patient.	CR		OSCE/VIVA
166.	Perform extra oral and intraoral examination on a patient.	CR		OSCE/VIVA
167.	Identify functional and non-functional cusps.	IL/CR		OSCE
168.	Identify occlusal scheme clinically.	IL/CR		OSCE
169.	Perform basic dental charting and periodontal examination of teeth	CR		OSCE
170.	Prescribe basic investigations like periapical and OPG radiographs.	IL/CR		OSCE/VIVA
171.	Identify the need of impression tray modification.	CR		OSCE/VIVA
172.	Make diagnostic impressions with alginate impression material.	CR		PW
173.	Identify problems in alginate impressions with reasons.	CR		OSCE/VIVA
174.	Manage a patient with an exaggerated gag reflex under supervision	CR		PW
175.	Rationalize the need of diagnostic maxillomandibular relation in different partially dentate states.	CR/CBL		PW/VIVA
176.	Analyze diagnostic casts.	CR/IL		OSCE
177.	Measure pontic space.	CR		OSCE/PW
178.	Delineate the steps of performing definitive oral examination.	IL	✓	OSCE/VIVA
179.	Interpret diagnostic data.	IL/CR		OSCE
180.	Develop the basic phases of treatment plan.	IL/CR		OSCE

181.	Formulate a differential and a definitive diagnosis.	CR/CBL		OSCE
182.	Refer a patient to appropriate specialist.	CR		OSCE
183.	Write a referral.	CR		OSCE
184.	Counsel the patient regarding consequences of tooth removal without replacement.	CR		OSCE
185.	Identify patient needs.	CR		PW
186.	Formulate treatment options in relation to patient needs.	CR/CBL		OSCE/PW
187.	Communicate the diagnosis and treatment options to the patient in an appreciable manner.	CR		OSCE
188.	Write a patient record note.	CR		OSCE
189.	Select appropriate material used for denture framework.	IL	✓	OSCE
190.	Define connector, major connector and minor connector.	IL	✓	CQ
191.	Enumerate the functions and requirements of major connectors.	IL	✓	CQ
192.	Explain the basic types of mandibular and maxillary major connectors.	IL/CBL		CQ
193.	Outline the guidelines related to location of connectors in the oral cavity.	IL	✓	CBL
194.	Select mandibular major connectors according to space requirements in a given clinical scenario.	IL/CBL		CBL
195.	Describe the basic design characteristics of major connectors.	IL	✓	CQ
196.	Define minor connector.	IL	✓	CQ
197.	Enumerate the functions of minor connectors.	IL	✓	CQ
198.	Distinguish between rest and rest seat.	IL	✓	CQ
199.	Delineate the functions of rests.	IL	✓	CQ
200.	Differentiate between the different types of rests and rest seats in relation to their form and location.	IL/CBL		CQ
201.	Outline the guidelines for support of rests.	IL	✓	CQ
202.	Define direct retainers.	IL	✓	CQ
203.	Classify types of direct retainers.	IL	✓	CQ
204.	Define clasp assembly.	IL	✓	CQ
205.	Distinguish between parts of clasp assembly in regard to retention, support, stability and reciprocation.	IL	✓	CQ

206.	Relate height of contour, supra bulge and infrabulge areas for retentive clasps.	IL	✓	CQ
207.	Associate retentive factors of clasps with tooth factors	IL	✓	CQ
208.	Outline the basic principles governing clasp design.	IL	✓	CQ
209.	Define denture bases	IL	✓	CQ
210.	Enumerate the ideal requirements of denture bases.	IL	✓	CQ
211.	Relate denture base requirements to support mechanism of removable partial denture.	IL/CBL		CBL
212.	Differentiate between metal and acrylic resin denture bases.	IL	✓	CBL
213.	Outline the functions of denture bases.	IL	✓	CQ
214.	Anticipate changes in denture base design for tooth tissue supported prosthesis.	IL	✓	CBL
215.	List movements of tooth tissue supported dentures	IL	✓	CQ
216.	Correlate concepts of fulcrum, effort and resistance in lever principle.	IL	✓	CQ
217.	Relate the movement of the removable partial denture to lever principle.	IL	✓	CQ
218.	Differentiate between tooth supported and tooth tissue supported removable partial dentures.	IL/CBL		CBL
219.	Select an impression material in different partially dentate conditions.	CR		OSCE/VIVA/ PW
220.	Select an impression technique in different partially dentate states.	IL/CR		OSCE/VIVA/ PW
221.	Demonstrate skill in pouring a cast.	CR		PW
222.	Identify inaccurate or weak cast.	CR		OSCE/VIVA
223.	Rationalize the need for making individual trays.	IL/CR		OSCE/VIVA
224.	Enumerate the steps for making individual trays.	IL/CR		OSCE/VIVA
225.	Distinguish between anatomic and functional form of residual ridge.	IL	✓	OSCE/VIVA
226.	Make an impression using composition and alginate for distal extension bases.	CR		PW
227.	Define overjet, overbite, buccal overlap, centric relation, centric occlusion, and maximum intercuspation, curve of Spee and curve of Monsoon.	IL	✓	CQ

228.	Enumerate desirable occlusal contact relationships for removable partial dentures.	IL	✓	CQ
229.	Select a method for establishing occlusal relationships according to different partially dentate conditions.	CBL/CR		CBL/PW
230.	Demonstrate the making of proper record blocks and occlusal rims on cast framework.	CR		OSCE/PW
231.	Perform acrylic processing, finishing and polishing the dentures.	CR		PW
232.	Explain the methods for adjusting the bearing surfaces of denture bases.	IL	✓	VIVA
233.	Adjust acrylic removable partial dentures in patient's mouth.	CR		PW
234.	List common pressure areas encountered.	IL	✓	VIVA
235.	Outline Sequence protocol for fitting of framework in the oral cavity.	IL/CR		VIVA
236.	Enumerate methods for adjusting occlusion.	IL/CR		VIVA
237.	Instruct the patient for difficulties that may be encountered during denture service.	CR		OSCE
238.	Rationalize the follow up appointments for partial denture patients.	IL/CR		OSCE/VIVA
239.	<b>PROFESSIONALISM AND ETHICS</b>			
	Discuss the role of doctor in community & Duties of a doctor.	CR		OSCE
	Demonstrate competency in behaving in ethical manner with patients, coworkers and the public to gain trust.	CBL		OSCE
	Analyze ethical issues/dilemmas in healthcare practice.	CBL		OSCE
	Demonstrate competencies in resolving ethical issues faced during common clinical scenarios.	CBL		OSCE
	Demonstrate competencies in avoiding potential ethical conflicts with pharmaceutical and other health industry providers.	Role Play		OSCE
	Apply professional code of ethics guidance given in PMDC & HEC in given clinical scenarios.	Role Play		OSCE
	<b>PATIENT'S SAFETY</b>			OSCE
	Demonstrate competency in establishing a therapeutic and professional relationship with patients and their families.	CBL		OSCE
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	Role Play		OSCE

	Demonstrate competency in seeking and developing relevant information from other sources, including the patient's family, with patient's consent.	Role Play		OSCE
	<b>COMMUNICATION SKILLS</b>			OSCE
	Demonstrate competency in communicating effectively with patient.	CBL		OSCE
	Demonstrate competency in breaking the bad news to patient.	Role Play		OSCE
	Demonstrate competency communicating effectively about ethical issues with patients and their family.	CBL		OSCE
	Use effective and efficient communication and management strategies	Role Play		OSCE
	Use written record, electronic medical record or other digital technologies while communicating with supervisor and patient.	SGD		OSCE
	<b><u>GENERAL MEDICINE</u></b>			
<b>240.</b>	Discuss the pathogenesis, clinical manifestations, investigations and management of gastroesophageal reflux disease	IL		BCQ/SAQ/OSCE
<b>241.</b>	Discuss the approach to a patient with peptic ulcer disease its pathogenesis, investigation and their management.	IL		BCQ/SAQ/OSCE
<b>242.</b>	Prescribe the management of Helicobacter pylori gastritis and other gastritis	IL		BCQ/SAQ/OSCE
<b>243.</b>	Understands the different causes of upper GI bleeding; can prescribe the emergency management of hematemesis.	IL		BCQ/SAQ/OSCE
<b>244.</b>	Discuss the approach to diagnose and manage irritable bowel syndrome	IL/ SGD		BCQ/SAQ/OSCE
<b>245.</b>	Discuss the pathogenesis, clinical manifestations, investigations and management of inflammatory bowel disease.	IL/ SGD		BCQ/SAQ/OSCE
<b>246.</b>	Differentiate between acute and chronic pancreatitis in symptoms and management.	IL		BCQ/SAQ/OSCE
<b>247.</b>	Describe the signs and symptoms of cirrhosis of the liver and its complications as portal hypertension	IL		BCQ/SAQ/OSCE
<b>248.</b>	Differentiate between acute and chronic hepatitis.	IL/ SGD		BCQ/SAQ/OSCE
<b>249.</b>	Describe the etiology, pathogenesis, clinical features, diagnostic tests, and treatment of Nephritic syndrome	IL		BCQs/SAQs/OSCE
<b>250.</b>	Discuss the etiology, pathogenesis, clinical features, diagnostic tests, and treatment of acute renal failure	IL		BCQs/SAQs/OSCE

251.	Define Urinary tract infections along with their evaluation and treatment	IL		BCQs/SAQs/O SCE
252.	Discuss the etiology, pathogenesis, clinical features, diagnostic tests, and treatment of chronic renal failure	IL		BCQs/SAQs/O SCE
253.	Describe the clinical features, diagnostic tests, and treatment of post streptococcal glomerulonephritis	IL		BCQs/SAQs/O SCE
254.	Understands the relationship between the various clinical presentations of intrinsic renal disease and their underlying cause.	IL/ SGD		BCQs/SAQs/O SCE
255.	Describe the etiology, pathogenesis, clinical features, diagnostic tests, and treatment of Nephrotic syndrome	IL		BCQs/SAQs/O SCE
256.	Discuss the approach to diagnose and manage electrolyte imbalance.	IL/ SGD		BCQs/SAQs/O SCE
257.	Understand the basis of metabolic acidosis and lactic acidosis.	IL		BCQs/SAQs/O SCE
258.	Discuss the approach and management of dehydration and shock.	IL		BCQs/SAQs/O SCE
259.	Describe the different types and clinical manifestations of diabetes.	IL/SGD		BCQs/SAQs/O SCE
260.	<b>PROFESSIONALISM AND ETHICS</b>			
	Describe basic principles of ethics with reference to social, cultural and religious perspective.	SGD		BCQs
	Discuss the role of doctor in community & Duties of a doctor.	SGD		BCQs
	<b>PATIENT'S SAFETY</b>			
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	Role play		OSCE
	Demonstrate competency in seeking and developing relevant information from other sources, including the patient's family, with patient's consent.	Role play		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate competency in breaking the bad news to patient.	Role Play		OSCE
	Use effective and efficient communication and management strategies	Role Play		OSCE
	<b><u>GENERAL SURGERY</u></b>			
261.	Describe Primary & Secondary survey and the management	IL/CR/PW	✓	BCQs/SAQs/O SCE



262.	Describe Triage and blast injuries	IL/CR/PW	✓	BCQs/SAQs/O SCE
263.	Explain the role of ICU in the management of trauma	IL/CR	✓	BCQs/SAQs
264.	Describes Types and management of burns and can write principles of Fluid electrolytes management	IL/CR	✓	OSCE
265.	Describe types of fractures & management of extremity fracture.	IL/CR	✓	BCQs/SAQs
266.	Describe fractures of pelvic bone & spine	IL	✓	BCQs
267.	Describe the management of Head injury and cervical spine	IL/SGD	✓	BCQs/SAQs/O SCE
268.	Describe the maxillofacial fracture and complications& immediate management	IL/CR	✓	BCQs/SAQs/O SCE
269.	Describe the traumatic injuries of neck, trachea and oropharynx.	IL	✓	BCQs
270.	Describe the chest injuries and their management	IL/CR	✓	BCQs/SAQs/O SCE
271.	Describe the Abdominal injuries	IL/SGD/CR	✓	BCQs/SAQs/O SCE
272.	Describe the Pelvic injuries and associated perineal injuries	IL/SGD/CR	✓	BCQs/SAQs/O SCE
273.	Describe the congenital problems of face, lips & palate	IL	✓	BCQs/SAQs
274.	Discuss infections and tumors of bones especially of Head and Neck area	IL/CR/PW	✓	BCQs/SAQs/O SCE
275.	Describe the management of diabetic foot and other acute and chronic infections of bone.	IL/CR/PW	✓	BCQs/SAQs/O SCE
276.	Describe metabolic diseases of bone & parathyroid.	IL	✓	BCQs/SAQs
277.	Describe the benign and malignant diseases of thyroid	IL/CR/PW	✓	BCQs/SAQs/O SCE
278.	Demonstrate the various other neck lesions	IL	✓	BCQs
279.	<b>PROFESSIONALISM AND ETHICS</b>			

	Describe basic principles of ethics with reference to social, cultural and religious perspective.	SGD		BCQs
	Discuss the role of doctor in community & Duties of a doctor.	SGD		BCQs
	<b>PATIENT'S SAFETY</b>			
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	Role play		OSCE
	Demonstrate competency in seeking and developing relevant information from other sources, including the patient's family, with patient's consent.	Role play		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate competency in communicating effectively with patients.	Role Play		OSCE
	Use effective and efficient communication and management strategies	Role Play		OSCE
	Communicate in a manner that is respectful of and sensitive to the patient's and family's age, orientation, culture and beliefs	CR		OSCE
<b>Oral Surgery</b>				
<b>268.</b>	Inquire about symptoms and history of the presenting complaint	IL	✓	BCQs
<b>269.</b>	Perform thorough History and Examination.	IL/ CR		OSCE
<b>270.</b>	Diagnose pattern & ways of making tentative diagnosis.	IL/ CR		OSCE
<b>271.</b>	Discuss different treatment modalities for various common conditions seen in oral surgery.	IL/CR	✓	OSCE
<b>272.</b>	List different methods of Sterilization and their relevance to OMFS.	IL	✓	BCQs
<b>273.</b>	Identify various Instruments used in Oral Surgery	CR		OSCE
<b>274.</b>	Discuss the Principles of Oral Surgery	IL	✓	BCQs
<b>275.</b>	Discuss types of incisions & flaps	IL	✓	CQ
<b>276.</b>	Identify methods of tissue handling	IL	✓	CQ
<b>277.</b>	Define Hemostasis	IL	✓	CQ
<b>278.</b>	Identify types of hemorrhage along with its management.	IL	✓	CQ
<b>279.</b>	Implement Pre & Post-Operative Care	CR	✓	OSCE

280.	Discuss the hazards of cross-infection and its prevention	IL	✓	BCQs/SAQs
281.	List types of Local Anesthesia and recall their pharmacology.	IL/ CP	✓	CQ
282.	Identify different indications and contra-indications of using Local anesthesia.	IL/ CP	✓	CQ
283.	Discuss techniques of administration of Local anesthesia.	IL/CR	✓	OSCE
284.	Describe complications of local anesthesia and its management.	IL/CR	✓	OSCE
285.	Explain the hazards of ionizing radiation	IL	✓	CQ
286.	Identify components of dental X-ray machine	IL	✓	CQ/OSCE
287.	Describe interaction of X-rays with matter	IL	✓	SAQ/BCQ
288.	Discuss risk and risk estimates and exposure risk from dental radiography	IL	✓	SAQs
289.	Describe optimization for dental radiography and the ALARA concept	IL	✓	SAQs
290.	Explain chemical processing of a conventional X-ray film	IL	✓	SAQs
291.	Describe quality assurance mechanism for dental practice	IL	✓	CQ
292.	<b>PROFESSIONALISM AND ETHICS</b>			
	Apply ethical decision-making in all interactions with patients and their families, colleagues and other health care professionals.	CR		OSCE
	Uphold the principle of ALARA	SGD		BCQ
	Acknowledge hazard of ionizing radiation	SGD		SAQ
	Establish quality assurance for dental radiography .	SGD	✓	BCQ
	Demonstrate competencies in resolving ethical issues faced during common clinical scenarios.	CR		OSCE
	<b>PATIENT'S SAFETY</b>			
	Identify high risk situations and safety risks.	CR		OSCE
	Show to the patient about use of lead apron & thyroid collar for X-ray taking	CR		OSCE
	Perform proper handling and maintenance of patient care equipment.	CR		OSCE

	Describe injury prevention, safe patient transport, handling and transfers, and removal of hazards.	CR		OSCE
	Identify and respond to safety concerns raised by others.	CR		OSCE
	Apply infection control procedures and processing of intra oral radiographs.	SGD		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Perform basic intraoral radiographic techniques	CR		OSCE
	Prepare patient for X-ray exposure	CR		OSCE
	Arrange correct positioning of the patient for OPG and LATERAL CEPH Radiograph	CR		OSCE
	Perform chemical processing of a conventional X ray film	CR		OSCE
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	CR		OSCE
<b>Behavioral Sciences</b>				
	<b>Stress Management</b>			
<b>293.</b>	Explore psychological techniques, including hypnosis, for managing patient anxiety and pain in dental procedures.	Clinical Practices & SGD		OSCE
<b>294.</b>	Understand the ethical considerations and limitations of using psychological techniques in dental practice.	Lecture & SGD	✓	MCQs + SAQs
<b>295.</b>	<b>History taking and interviewing</b>			
<b>296.</b>	Understand the importance of establishing rapport with patients during history taking.	Lecture & SGD	✓	MCQs + SAQs
<b>297.</b>	Develop skills for building trust and creating a comfortable environment for open communication.	Clinical Practices & SGD		OSCE
<b>298.</b>	Recognize the impact of cultural factors on patient communication.	Lecture & SGD	✓	MCQs + SAQs
<b>299.</b>	Develop cultural competence to ensure sensitivity and inclusivity during history taking.	Clinical Practices & SGD		OSCE
<b>300.</b>	Shift from a provider-centric to a patient-centered approach in communication.	Clinical Practices & SGD		OSCE
<b>301.</b>	Incorporate patient preferences and values into the history-taking process.	Clinical Practices & SGD		OSCE

	<b>Dentist-Patient Relationship</b>			
302.	Develop skills to establish rapport and build a trusting relationship with patients.	Clinical Practices & SGD		OSCE
303.	Understand the importance of effective communication in fostering a positive dentist-patient connection.	Lecture & SGD	✓	MCQs + SAQs
304.	Shift from a provider-centric to a patient-centered approach in dental care.	Clinical Practices & SGD		OSCE
305.	Recognize the role of patient preferences, values, and collaboration in treatment decisions.	Lecture & SGD	✓	MCQs + SAQs
	<b>Ethics</b>			
306.	Develop effective communication skills for explaining treatment options, risks, and benefits to patients.	Clinical Practices & SGD		OSCE
307.	Demonstrate the ability to use clear and understandable language in the informed consent process.	Clinical Practices & SGD		OSCE
308.	Understand the concept of decision-making capacity in the context of obtaining informed consent	Lecture & SGD	✓	MCQs + SAQs
309.	Recognize factors that may impact a patient's ability to make informed decisions about their dental care.	Lecture & SGD	✓	MCQs + SAQs
	<b>Leadership and Management</b>		✓	
310.	Define ethical decision-making and its importance in dental practice.	Lecture & SGD	✓	MCQs + SAQs
311.	Recognize ethical dilemmas commonly faced in dentistry and explore strategies for resolution.	Lecture & SGD	✓	MCQs + SAQs
312.	Identify common sources of conflict in dental teams and practice settings.	Lecture & SGD	✓	MCQs + SAQs
313.	Develop skills for effective conflict resolution and negotiation within the dental team.	Clinical Practices & SGD		OSCE

Commencement of 8 <sup>th</sup> Module		Weekly Schedule of Module VIII ORAL PATHOLOGY	
Activity	Week	Lecture 1	Lecture 2
Academic Session – BDS Third Professional	Week- 1	Classification of Cyst of Jaws Dentigerous Cyst <b>LO (1, 4)</b>	Radicular Cyst <b>LO (2)</b>
	Week- 2	Odontogenic Keratocyst tumor <b>LO (4, 6)</b>	Odontogenic cyst of jaws <b>LO (3)</b>
	Week- 3	Non-Odontogenic cyst of jaws <b>LO (7)</b>	False Cyst and soft tissue cyst of Jaws <b>LO (9- 10)</b>
	Week- 4	<b>CAT -3</b>	Pre-cancerous Lesions and Conditions I <b>LO(15)</b>
	Week- 5	Pre-cancerous Lesions and Conditions II <b>LO (16- 17)</b>	Pre-cancerous Lesions and Conditions III <b>LO (18- 20, 27)</b>
	Week- 6	Classify Odontogenic and Non – Odontogenic tumors and Odontogenic Epithelial tumors I <b>LO (10- 11)</b>	Odontogenic Epithelial tumors <b>LO (11-12)</b>
	Week- 7	Mesenchymal tumors <b>LO (14)</b>	Odontomes <b>LO (13)</b>
	Week- 8	Infective, obstructive, traumatic diseases of salivary glands I <b>LO (21)</b>	Infective, obstructive, traumatic diseases of salivary glands II <b>LO (21)</b>
	Week- 9	Sjogren syndrome <b>LO (22, 24)</b>	Benign & Malignant tumors of salivary glands I <b>LO (23, 25)</b>
	Week- 10	Benign & Malignant tumors of salivary glands II <b>LO (25-26)</b>	<b>CAT -4</b>
	Week-11	Revision	Revision
	Week-12	Revision	Revision
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>	

Commencement of 8 <sup>th</sup> Module		Weekly Schedule of Module VIII PERIODONTOLOGY
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	Classification Of Periodontal Diseases <b>LO (29-32)</b>
	Week- 2	Desquamative Gingivitis <b>LO (33-38)</b>
	Week- 3	Acute Gingival Infections (Necrotizing Ulcerative Gingivitis) <b>LO (39-40)</b>
	Week- 4	Acute Gingival Infections (Primary herpetic gingivostomatitis & Pericoronitis) <b>LO (41-43)</b>
	Week- 5	Periodontal Pocket <b>LO (44-55)</b>
	Week- 6	Tumor & Tumor Like Lesions <b>LO (56-64)</b>
	Week- 7	Periodontal Abscess & Treatment <b>LO (65-73)</b>
	Week- 8	Gingival Enlargement <b>LO (74-77)</b>
	Week- 9	Revision of Module 8 Topics
	Week- 10	OSCE Slides Revision
	Week- 11	Class Test
	Week-12	Revision
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>

Commencement of 8 <sup>th</sup> Module		Weekly Schedule of Module VIII
		ORAL MEDICINE
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	White and red lesion <b>LO (67-61)</b>
	Week- 2	White and red lesion <b>LO (71-73)</b>
	Week- 3	Vesiculo-bullous lesion <b>LO (79-82)</b>
	Week- 4	Vesiculo-bullous lesion <b>LO (83-88)</b>
	Week- 5	Premalignant lesion and conditions <b>LO (89-101)</b>
	Week- 6	Oral ulcers <b>LO (74-78)</b>
	Week- 7	Tongue disorder <b>LO (102-106)</b>
	Week- 8	Effect of radiotherapy on oral mucosa <b>LO (121-122)</b>
	Week- 9	Facial palsy <b>LO (111-112)</b>
	Week- 10	Orofacial pain <b>LO (107-110)</b>
	Week-11	Temporomandibular joint disorder LO(113-120)
	Week 12	Revision
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>



Commencement of 8 <sup>th</sup> Module		Weekly Schedule of Module VIII PROSTHODONTICS
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	The partial Denture Equation <b>LO (124-126)</b>
	Week- 2	Dental Prostheses and Classification systems <b>LO (127-132)</b>
	Week- 3	Interim Removable Partial Dentures <b>LO (133-150)</b>
	Week- 4	Treatment Planning <b>LO (151-158, 164-177)</b>
	Week- 5	Maxillary and Mandibular major connectors <b>LO (178-183)</b>
	Week- 6	Minor Connectors <b>LO (184-185)</b>
	Week- 7	Rests and Rests seats <b>LO (183-189)</b>
	Week- 8	Direct Retainers <b>LO (190-196)</b>
	Week- 9	Denture Bases and Impression Techniques <b>LO (159-163,197-201, 207-214)</b>
	Week- 10	Tooth tissue supported Dentures <b>LO (202-206)</b>
	Week- 11	Maxillomandibular Relations and Occlusion <b>LO (215-218, 224)</b>
	Week- 12	Delivery of Dentures <b>LO (219-223, 225-226)</b>
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>

Commencement of 8 <sup>th</sup> Module		Weekly Schedule of Module VIII GENERAL MEDICINE	
Activity	Week	Lecture 1	Lecture 2
Academic Session – BDS Third Professional	Week- 1	Gastroesophageal reflux disease <b>LO (228)</b>	Acute and chronic hepatitis <b>LO (236)</b>
	Week- 2	Peptic ulcer disease <b>LO (229)</b>	Cirrhosis of the liver and its complications <b>LO (235)</b>
	Week- 3	Gastritis <b>LO (230)</b>	Nephrotic syndrome <b>LO (243)</b>
	Week- 4	Upper GI bleeding <b>LO (231)</b>	Nephritic syndrome <b>LO (237)</b>
	Week- 5	Irritable bowel syndrome <b>LO (232)</b>	Post streptococcal glomerulonephritis <b>LO (241)</b>
	Week- 6	Inflammatory bowel disease <b>LO (233)</b>	Urinary tract infections <b>LO (239)</b>
	Week- 7	Acute and chronic pancreatitis <b>LO (234)</b>	Acute renal failure <b>LO (238)</b>
	Week- 8	Diabetes mellitus <b>LO (247)</b>	Chronic renal failure <b>LO (240)</b>
	Week- 9	Diabetes mellitus treatment <b>LO (248)</b>	Miscellaneous renal disorders <b>LO (242)</b>
	Week- 10	DM complications and emergencies <b>LO (249)</b>	Electrolyte imbalance <b>LO (244)</b>
	Week-11	Obesity <b>LO (250)</b>	Acid base disorders <b>LO (245)</b>
	Week-12	Dehydration and shock <b>LO (246)</b>	Revision
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>	

Commencement of 8 <sup>th</sup> Module		Weekly Schedule of Module VIII GENERAL SURGERY
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	Trauma, Primary Survey, Secondary survey and management. <b>LO (249)</b>
	Week- 2	Principles of Triage and poly trauma and disaster management. <b>LO (250)</b> Ventilator working, use, ICU care, monitoring criteria. <b>LO (251)</b>
	Week- 3	Burns types and management. <b>LO (252)</b>
	Week- 4	Fractures of Limbs & Joint injury. <b>LO (253)</b> Fractures of Spine and pelvis. <b>LO (254)</b>
	Week- 5	Head & cervical spine injury. <b>LO (255)</b>
	Week- 6	Maxillo facial injury. <b>LO (256)</b> Trauma of oral cavity, larynx, pharynx & neck. <b>LO (257)</b>
	Week- 7	Chest & Mediastinal trauma & esophagus injury. <b>LO (258)</b>
	Week- 8	Abdominal injury. <b>LO (259)</b> Pelvic organ injury with perineal injuries. <b>LO (260)</b>
	Week- 9	Revision <b>LO (261)</b>
	Week- 10	Congenital problems of face lips and palate. <b>LO (261)</b> Infections and tumors of bone. <b>LO (262-263)</b>
	Week-11	Metabolic diseases of bone diseases. <b>LO (264)</b>
	Week-12	<b>LO (265)</b> Extra Thyroid neck lesions. Revision <b>LO (266)</b>
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>

Commencement of 8 <sup>th</sup> Module		Weekly Schedule of Module VIII
Activity		ORAL SURGERY
Week		Lecture 1
Academic Session – BDS Third Professional	Week- 1	Local Anesthesia 1 LO (281-284)
	Week- 2	Local Anesthesia 2 LO (281-284)
	Week- 3	Local Anesthesia 3 LO (281-284)
	Week- 4	Local Anesthesia 4 LO (281-284)
	Week- 5	Local Anesthesia 5 LO (281-284)
	Week- 6	Radiology 1 LO (283-292)
	Week- 7	Radiology 2 LO (283-292)
	Week- 8	Radiology 3 LO (283-292)
	Week- 9	Radiology 4 LO (283-292)
	Week- 10	Radiology 5 LO (283-292)
	Week-11	Radiology 6 LO (283-292)
	Week-12	Radiology 7 LO (283-292)
	Week- 13 and 14	THEORY AND VIVA EXAMINATION

## **MODULE IX**

At the end of the module, students should be able to:

S.N o		Teaching strategy	Online Teaching	Assessment tool
	<b><u>ORAL PATHOLOGY</u></b>			
1.	Enumerate the inflammatory, metabolic and endocrine disorders of bone.	IL	✓	BCQs/SAQs
2.	Enumerate the developmental disorders of bone.	IL	✓	BCQs/SAQs
3.	Explain types and clinical features of osteogenesis imperfecta.	IL/SGD	✓	BCQs/SAQs/ OSPE
4.	Identify the clinical slide of osteogenesis imperfecta.	PW	✓	OSPE
5.	Describe the clinical features of marble bone disease (osteopetrosis).	IL/SGD	✓	BCQs/SAQs
6.	Differentiate between cleidocranial dysplasia and achondroplasia.	IL	✓	BCQs/SAQs/ OSPE
7.	Classify the fibro-osseous lesions.	IL	✓	BCQs/SAQs/ OSPE
8.	Differentiate between monostotic and polyostotic fibrous dysplasia.	SGD	✓	OSPE
9.	Identify the clinical picture of cleidocranial dysplasia.	PW	✓	OSPE
10.	Interpret the radiological features of fibrous dysplasia of maxilla on an OPG x-ray.	PW	✓	OSPE
11.	Discuss the clinical features of cherubism.	SGD	✓	BCQs/SAQs
12.	Discuss the radiographic features of cherubism	SGD	✓	BCQs/SAQs
13.	Explain the mechanism of healing of an extraction socket.	SGD	✓	BCQs
14.	Discuss briefly about dry socket.	SGD	✓	BCQs
15.	Define osteomyelitis. Describe its classification.	IL	✓	BCQs/SAQs
16.	Enumerate the metabolic and endocrine disorders of bone.	IL	✓	BCQs/SAQs
17.	Classify the tumors of bone.	IL	✓	BCQs/SAQs
18.	Recognize the clinical presentation of bony exostosis.	SGD	✓	BCQs/SAQs
19.	Discuss the types of giant cell lesions.	IL	✓	SAQs
20.	Discuss briefly the process of healing of extraction socket.	SGD	✓	BCQs
21.	Define the following terms: Attrition, abrasion, erosion and abfraction.	IL	✓	BCQs/SAQs/ OSPE

22.	Discuss the causes of pathological attrition.	SGD	✓	BCQs/OSPE
23.	Classify the types of abrasion of teeth.	SGD	✓	BCQs/OSPE
24.	Describe the internal and external resorption of teeth.	SGD	✓	SAQs
25.	List the causes of discoloration of teeth	SGD	✓	BCQs/SAQs
26.	Classify the infective lesions of oral mucosa (bacterial, viral and fungal infections).	IL	✓	BCQs/SAQs/ OSPE
27.	Describe the clinical features and oral manifestations of tuberculosis.	IL	✓	BCQs/SAQs
28.	Describe the etiology and clinical features of acute necrotizing ulcerative gingivitis.	IL	✓	BCQs/SAQs
29.	Describe the types and oral manifestations of syphilis.	IL	✓	BCQs/SAQs
30.	Differentiate between acquired and congenital syphilis.	SGD	✓	BCQs/SAQs
31.	Discuss briefly about actinomycosis, leprosy and sarcoidosis.	IL	✓	BCQs/SAQs
32.	Describe the clinical features of herpetic gingivostomatitis.	SGD	✓	BCQs/SAQs
33.	Discuss the clinical features of herpes zoster.	IL	✓	BCQs/SAQs
34.	Classify oral candidosis. Discuss the clinical features of thrush and angular cheilitis.	IL	✓	BCQs/SAQs/ OSPE
35.	List the factors predisposing to oral candida infection	SGD	✓	SAQs
36.	Discuss the classification of oral candidosis	IL	✓	SAQs
37.	Identify clinical images and discuss its etiology and clinical presentation (MRG, AC, GT, Thrush)	SGD/PW	✓	SAQs/OSPE
38.	Enumerate the immune mediated oral diseases.	IL	✓	BCQs/SAQs
39.	Identify the clinical pictures of vesiculobullous disease	PW	✓	OSPE
40.	Discuss the types, etiopathogenesis, clinical and histological features of pemphigus.	IL	✓	BCQs/SAQs
41.	Describe the clinical and histological features of mucous membrane pemphigoid.	IL	✓	SAQs/OSPE
42.	Discuss the erythema multiforme.	IL	✓	SAQs/OSPE
43.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate competencies in resolving ethical issues faced during common clinical scenarios.	SGD/PBL		OSCE
	To know the basic safety rules for laboratory & observed whenever working in a laboratory.	SGD	✓	OSCE

	<b>PATIENT'S SAFETY</b>			
	Identify high risk situations and safety risks.	SGD	✓	OSCE
	Perform proper handling and maintenance of patient care equipment.	SGD	✓	OSCE
	Describe infection control, including aseptic technique, hand hygiene, screening and surveillance.	SGD /IL	✓	OSCE/BCQ
	Describe injury prevention, handling and transfers, and removal of hazards.	SGD	✓	OSCE
	Identify and respond to safety concerns raised by others.	SGD	✓	OSCE
	Apply infection control procedures and processing of intra oral radiographs.	SGD	✓	OSCE
	<b>COMMUNICATION SKILLS</b>			
	Use written record, electronic medical record or other digital technologies while communicating with supervisor and patient.	SGD	✓	OSCE
	<b><u>PERIODONTOLOGY</u></b>			
<b>44.</b>	Define furcation defect.	IL/SG D/CR	✓	BCQs/SAQs/ OSCE
<b>45.</b>	Discuss the diagnosis and indices of furcation defects.	IL/SG D/CR	✓	BCQs/SAQs /OSCE
<b>46.</b>	Describe various important factors involved in treatment and prognosis of furcation involvement.	IL/CR	✓	BCQs/SAQs/ OSCE
<b>47.</b>	Discuss the treatment of furcation defect	IL/SG D/CR	✓	BCQs/SAQs /OSCE
<b>48.</b>	Describe various surgical procedures used for treatment of teeth with furcation involvement.	IL/CR	✓	BCQs/SAQs/ OSCE
<b>49.</b>	Distinguish between various patterns of bone loss in periodontal disease.	IL	✓	MCQs/SEQs/ OSCE
<b>50.</b>	Describe Aggressive Periodontitis in detail.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>51.</b>	Discuss the clinical features and radiographic findings of different types of aggressive periodontitis.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>52.</b>	Define chronic periodontitis.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>53.</b>	Discuss the etiology of chronic periodontitis.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>54.</b>	Discuss the clinical features and radiographic signs of chronic periodontitis.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>55.</b>	Differentiate between different types of chronic periodontitis.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE

56.	Discuss the treatment of aggressive and chronic periodontitis.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
57.	Differentiate between aggressive periodontitis and chronic periodontitis.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
58.	Explain the concept of GTR. (Guided Tissue Regeneration)	IL/SG D/CR	✓	BCQs/SAQs /OSCE
59.	Describe the surgical Procedures used for GTR along with clot stabilization, wound protection and space creation and types of materials used.	IL/CR	✓	BCQs/SAQs/ OSCE
60.	Discuss the importance of Medical, Dental and Social history in periodontal diseases.	IL/SG D/CR	✓	BCQs/SAQs
61.	Discuss the importance of complete examination of oral cavity.	IL/CR	✓	BCQs/SAQs
62.	Discuss signs and symptoms for diagnosis of gingivitis and periodontitis.	IL/SG D/CR	✓	BCQs/SAQs/ OSCE
63.	Discuss various techniques for plaque recognition.	IL/CR	✓	BCQs/SAQs
64.	Formulate treatment plan for patients with periodontal diseases, including counseling, motivation and oral hygiene instructions.	IL/SG D/CR	✓	BCQs/SAQs
65.	Discuss role and importance of topical and systemic chemotherapeutic agents in periodontology.	IL/SG D/CR	✓	BCQs/SAQs
66.	Define trauma from occlusion	IL/SG D/CR	✓	BCQs/SAQs/ OSCE
67.	Differentiate between primary & secondary trauma from occlusion	IL/CR	✓	BCQs/SAQs/ OSCE
68.	Discuss Clinical & Radiographic features of Trauma from occlusion	IL/CR	✓	BCQs/SAQs /OSCE
69.	Discuss the surgical methods to control dental plaque.	IL/CR	✓	BCQs/SAQs
70.	Describe indications and contraindications for following periodontal surgical procedures.	IL/SG D/CR	✓	BCQs/SAQs
71.	Define Gingival Curettage	IL/CR	✓	BCQs/SAQs/ OSCE
72.	Define Gingivectomy	IL/CR	✓	BCQs/SAQs/ OSCE
73.	Classify Periodontal flap surgeries.	IL/CR	✓	BCQs/SAQs/ OSCE
74.	Describe Grafts used in periodontium.	IL/CR	✓	BCQs/SAQs/ OSCE



<b>75.</b>	Discuss Crown lengthening procedure	IL/CR	✓	BCQs/SAQs/ OSCE
<b>76.</b>	Describe the Indications of Frenectomy	IL/CR	✓	BCQs/SAQs/ OSCE
<b>77.</b>	Describe the various techniques of Vestibuloplasty/Splinting procedures	IL/CR	✓	BCQs/SAQs
<b>78.</b>	Describe the rationale for suturing in periodontal surgery.	IL/SG D/CR	✓	BCQs/SAQs /OSCE
<b>79.</b>	Describe the types of sutures.	IL/CR	✓	BCQs/SAQs/ OSCE
<b>80.</b>	Discuss various suturing techniques used in periodontal surgery.	IL/SG D/CR	✓	BCQs/SAQs /OSCE
<b>81.</b>	Classify Endodontic-Periodontal lesions.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>82.</b>	Discuss the diagnosis of Endodontic-Periodontal lesions.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>83.</b>	Discuss the treatment of Endodontic-Periodontal lesions.	IL/SG D/CR	✓	MCQs/SEQs/ OSCE
<b>84.</b>	Discuss the effects of following on periodontal health	IL	✓	BCQs/SAQs
<b>85.</b>	Describe the various Oral/Periodontal Manifestations of Diabetes mellitus	IL	✓	BCQs/SAQs
<b>86.</b>	Describe the various Oral/Periodontal Manifestations of Pregnancy	IL	✓	BCQs/SAQs
<b>87.</b>	Describe the various Oral/Periodontal Manifestations of Leukaemia	IL	✓	BCQs/SAQs
<b>88.</b>	Describe the various Oral/Periodontal Manifestations of Anaemia	IL	✓	BCQs/SAQs
<b>89.</b>	Describe the various Oral/Periodontal Manifestations of Vitamin deficiency	IL	✓	BCQs/SAQs
<b>90.</b>	Describe the various Oral/Periodontal Manifestations of AIDS	IL	✓	BCQs/SAQs
<b>91.</b>	Discuss the effects and management of following on periodontal health	IL	✓	BCQs/SAQs
<b>92.</b>	Discuss the effects of Mal-alignment on periodontal health	IL/CR	✓	BCQs/SAQs
<b>93.</b>	Discuss the effects of Crowding on periodontal health	IL/CR	✓	BCQs/SAQs
<b>94.</b>	Discuss the effects of Anterior open bite on periodontal health	IL/CR	✓	BCQs/SAQs
<b>95.</b>	Discuss the effects of Tongue thrusting on periodontal health	IL/CR	✓	BCQs/SAQs
<b>96.</b>	Discuss the effects of Thumb sucking on periodontal health	IL/CR	✓	BCQs/SAQs

97.	Discuss the effects of Mouth breathing on periodontal health	IL/CR	✓	BCQs/SAQs
98.	Discuss the effects of Orthodontic treatment on periodontal health	IL/CR	✓	BCQs/SAQs
99.	Discuss the effects of Dental restorations on periodontal health	IL/CR	✓	BCQs/SAQs
100.	Discuss the effects of Removable dentures on periodontal health	IL/CR	✓	BCQs/SAQs
101.	Define Splinting.	IL	✓	MCQs, SEQs
102.	Enlist the aims of splinting.	IL	✓	MCQs, SEQs
103.	Discuss the requirements of splinting.	IL	✓	MCQs, SEQs
104.	Discuss the indications of splinting.	IL	✓	MCQs, SEQs
105.	Classify different types of splints with examples.	IL	✓	MCQs, SEQs
106.	<b>PROFESSIONALISM AND ETHICS</b>			
	Apply ethical decision-making in all interactions with patients and their families, colleagues and other health care professionals.	CR		OSCE
	Demonstrate Competencies in avoiding potential ethical conflicts with pharmaceutical and other health industry providers.	CR		OSCE
	Differentiate between justice and equality.	SGD	✓	SAQ
	Demonstrate competencies in resolving ethical issues faced during common clinical scenarios.	CR		OSCE
	<b>PATIENT'S SAFETY</b>			
	Identify high risk situations and safety risks.	CR		OSCE
	Describe approaches and processes associated with risk management.	CR		OSCE
	Perform proper handling and maintenance of patient care equipment.	CR		OSCE
	Describe infection control, including aseptic technique, hand hygiene, screening and surveillance.	CR		OSCE/BCQ
	Describe injury prevention, safe patient transport, handling and transfers, and removal of hazards.	CR		OSCE
	Identify and respond to safety concerns raised by others.	CR		OSCE
	Apply infection control procedures and processing of intra oral radiographs.	SGD		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate effective learning, verbal and written communication skills.	CR		OSCE
	Use effective and efficient communication and management strategies.	CR		OSCE
	Use written record, electronic medical record or other digital technologies while communicating with supervisor and patient.	SGD		OSCE

	Demonstrate competency in establishing a therapeutic and professional relationship with patients and their families.	CR		OSCE
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	CR		OSCE
	<b><u>ORAL MEDICINE</u></b>			
<b>107.</b>	Discuss the frequency and causative factors of salivary calculi among major salivary gland	IL	✓	SAQs/ Viva
<b>108.</b>	List clinical features of salivary gland obstruction	IL	✓	SAQs/ OSCE
<b>109.</b>	Outline the management of salivary gland obstruction.	IL/ SGD	✓	SAQs
<b>110.</b>	List various causes of salivary gland infections	IL/ SGD	✓	BCQs/SAQs
<b>111.</b>	Discuss causes, clinical features and management of viral sialadenitis.	IL/ SGD	✓	BCQs/ SAQs
<b>112.</b>	Discuss causes, clinical features and management of bacterial sialadenitis.	IL/ CBL	✓	BCQs/ SAQs
<b>113.</b>	List the causes of xerostomia.	IL/ CBL	✓	BCQs/SAQs/ OSCE
<b>114.</b>	Differentiate between primary and secondary Sjogren's syndrome.	IL/ CBL	✓	SAQs/ Viva
<b>115.</b>	Discuss clinical features of Sjogren's syndrome.	IL/ CBL	✓	SAQs/ Viva
<b>116.</b>	Discuss the investigations and management of Sjogren's syndrome	IL/ CBL	✓	BCQs/ SAQs
<b>117.</b>	Enumerate the causes of pigmented lesions in oral cavity.	IL/ SGD	✓	BCQs
<b>118.</b>	Differentiate racial pigmentation from other pigmented lesions of oral cavity..	IL/ SGD	✓	SAQs/ CQ
<b>119.</b>	Enumerate the clinical features of Peutz-Jehgers syndrome.	IL/ SGD	✓	CQ/ OSCE
<b>120.</b>	Classify salivary gland tumors	IL/ SGD	✓	SAQs
<b>121.</b>	Discuss clinical presentation and investigations for pleomorphic adenoma.	IL/ SGD/CBL	✓	SAQs/ OSCE
<b>122.</b>	Enumerate the causes of sialadenosis.	IL	✓	SAQs/ OSCE
<b>123.</b>	List and discuss various causes of halitosis	IL	✓	SAQs/ OSCE
<b>124.</b>	Describe various modalities used for diagnosing halitosis.	IL	✓	BCQs/ SAQs
<b>125.</b>	Discuss the management of halitosis.	IL	✓	SAQs/Viva
<b>126.</b>	Discuss the diagnosis and management of anaphylactic shock during dental treatment.	IL	✓	SAQs/ OSCE

<b>127.</b>	Discuss various drug interactions among commonly used drugs in dental practice.	IL	✓	CQ
<b>128.</b>	Lists various local and systemic conditions that influences taste perception.	SGD	✓	CQ
<b>129.</b>	Discuss the importance of healthy nutrition in maintaining oral health.	IL/ SGD	✓	BCQs/ CQ
<b>130.</b>	Discuss the management for cardiac patients during dental treatment	IL/ SGD/ CR	✓	SAQs/ OSCE
<b>131.</b>	Discuss the oral effects of drugs used by cardiac patients.	IL/ SGD	✓	BCQs/ CQ
<b>132.</b>	Identify the role of antibiotic prophylaxis for prevention of infective endocarditis in dental patients.	IL/ SGD	✓	SAQs/ CQ
<b>133.</b>	Enumerate the causes of hypersensitivity among dental patients.	IL/ SGD/ CR	✓	SAQs/ OSCE
<b>134.</b>	Discuss the management of asthmatic patient during dental treatment.	IL/ SGD/ CR	✓	SAQs/ OSCE
<b>135.</b>	Discuss the management of patient with COPD during dental treatment.	IL/ SGD/ CR	✓	SAQs/ OSCE
<b>136.</b>	Identify the features of tooth/root displacement into the upper or lower respiratory tract.	IL/ SGD/ CR	✓	SAQs/ OSCE
<b>137.</b>	Identify the causes of oro-antral communication	IL	✓	SAQs/ OSCE
<b>138.</b>	Discuss the principles of management of root displaced in maxillary antrum.	IL/ SGD	✓	SAQs/ OSCE
<b>139.</b>	Define orofacial granulomatosis.	IL	✓	SAQs
<b>140.</b>	Discuss various oral manifestations of gastrointestinal tract diseases	IL	✓	SAQs
<b>141.</b>	Identify and discuss oral manifestations of Crohn's disease and their management	IL	✓	SAQs
<b>142.</b>	Discuss the modes of transmission for viral hepatitis.	IL/ CR	✓	SAQs/ OSCE
<b>143.</b>	Discuss the important aspects of various liver diseases relevant to dentistry	IL/ CP	✓	BCQs
<b>144.</b>	Discuss hazards to dental staff and other patients from Hepatitis B/C patient	IL/CR	✓	SAQs/ Viva
<b>145.</b>	Interpret various serological studies involved in screening Hepatitis patients.	IL/CR	✓	CQ/ Viva
<b>146.</b>	Discuss the basic precautionary measures for prevention of viral hepatitis.	IL	✓	SAQs/ Viva

<b>147.</b>	Discuss various aspects of renal diseases which can affect treatment in dental patient.	IL	✓	CQ
<b>148.</b>	Identify the role of sterilization in preventing communicable diseases.	IL	✓	SAQs/ CQ
<b>149.</b>	Discuss the protocol of dental treatment in patients undergoing Hemo-dialysis.	IL	✓	SAQs/ CQ
<b>150.</b>	Discuss the effects of pregnancy on oral health.	IL	✓	BCQs/ CQ
<b>151.</b>	Discuss the management considerations during dental treatment of pregnant patient.	IL	✓	BCQs/ CQ
<b>152.</b>	Enumerate the drugs that can be safely prescribed in pregnant patients.	IL	✓	BCQs/ CQ
<b>153.</b>	Identify possible hazards to fetus from various dental procedures and medications.	IL	✓	BCQs/ CQ
<b>154.</b>	Define Anemia	IL	✓	SAQs/ Viva
<b>155.</b>	Enlist the clinical features of anemia	IL/ CBL	✓	SAQs/ Viva
<b>156.</b>	Discuss the important features of anemia in dentistry and their management.	IL/ CBL	✓	SAQs/ Viva
<b>157.</b>	Discuss the dental aspects of sickle cell disease and their management	IL	✓	SAQs/ Viva
<b>158.</b>	Identify the effects of acute leukemia and their management.	IL	✓	SAQs/ Viva
<b>159.</b>	Discuss various bleeding disorders and their causes.	IL/ CBL	✓	BCQs/SAQs/ OSCE
<b>160.</b>	Discuss the causes of various clotting disorders.	IL	✓	BCQs/SAQs/ OSCE
<b>161.</b>	Discuss the types and causes of hemophilia.	IL	✓	BCQs/SAQs
<b>162.</b>	Discuss the principles of dental management of patient with hemophilia	IL/ CBL	✓	BCQs/SAQs
<b>163.</b>	Discuss the effects of anticoagulant therapy on dental treatment	IL	✓	BCQs
<b>164.</b>	Discuss the management of dental patient taking anticoagulant therapy.	IL	✓	BCQs/ SAQs
<b>165.</b>	Discuss the importance of INR in dental extractions and oral surgical procedures	IL/CR	✓	SAQs
<b>166.</b>	Discuss the management of prolonged bleeding during oral surgical procedures	IL/CR	✓	SAQs/ Viva
<b>167.</b>	Discuss oral manifestations and their management in HIV patients.	IL/SGD	✓	SAQs/ Viva

168.	Discuss oral manifestations and their management in patients with syphilis.	IL/SGD	✓	SAQs
169.	<b>PROFESSIONALISM AND ETHICS</b>			
	Demonstrate skills in introducing himself/ herself to the patient before history taking	SGD		OSCE/VIVA
	Take informed consent from the patient before commencing treatment.	SGD		OSCE/VIVA
	Demonstrate the professional attributes of a learner, colleague and physician in training.	SGD		OSCE/VIVA
	Describe the basic principles of ethics with reference to social, cultural and religious perspectives.	SGD		OSCE/VIVA
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate positive gestures to the patient.	SGD		OSCE/VIVA
	Demonstrate competency in preparing and delivering high impact presentations	SGD		OSCE/VIVA
	<b><u>ORAL SURGERY</u></b>			
170.	Inquire about symptoms and history of the presenting complaint	IL	✓	BCQs
171.	Perform thorough History and Examination.	IL/ CR		OSCE
172.	Diagnose pattern & ways of making tentative diagnosis.	IL/ CR		OSCE
173.	Discuss different treatment modalities for various common conditions seen in oral surgery.	IL/CR	✓	OSCE
174.	List different methods of Sterilization and their relevance to OMFS.	IL	✓	BCQs
175.	Identify various Instruments used in Oral Surgery	CR		OSCE
176.	Discuss the Principles of Oral Surgery	IL	✓	BCQs
177.	Discuss types of incisions & flaps	IL	✓	CQ
178.	Identify methods of tissue handling	IL	✓	CQ
179.	Define Hemostasis	IL	✓	CQ
180.	Identify types of hemorrhage along with its management.	IL	✓	CQ
181.	Implement Pre & Post-Operative Care	CR	✓	OSCE
182.	Discuss the hazards of cross-infection and its prevention	IL	✓	BCQs/SAQs
183.	List types of Local Anesthesia and recall their pharmacology.	IL/ CP	✓	CQ
184.	Identify different indications and contra-indications of using Local anesthesia.	IL/ CP	✓	CQ

<b>185.</b>	Discuss techniques of administration of Local anesthesia.	IL/CR	✓	OSCE
<b>186.</b>	Describe complications of local anesthesia and its management.	IL/CR	✓	OSCE
<b>187.</b>	Describe the principles of Exodontia.	IL	✓	SAQs
<b>188.</b>	Identify the armamentarium used for Exodontia	CR		OSCE
<b>189.</b>	List the indications and contraindications of removal of teeth.	IL	✓	BCQs/ SAQs
<b>190.</b>	Discuss the procedure for Simple & Complex Exodontia.	IL/CR	✓	SAQs
<b>191.</b>	Describe the complications of extraction along with its management.	IL	✓	SAQs/ OSCE
<b>192.</b>	List post-op instructions	IL/ CR	✓	OSCE
<b>193.</b>	Discuss the prevention and management of Medical Emergencies	IL	✓	CQ
<b>194.</b>	Evaluate Life threatening Emergencies in Dental Office	IL	✓	BCQs/OSCE
<b>195.</b>	Describe guideline for prevention and management of various Medical Emergencies	IL	✓	CQ
<b>196.</b>	Discuss the significance of General Anesthesia and Sedation in Dentistry	IL	✓	CQ
<b>197.</b>	Enumerate the indications of General Anesthesia & Sedation in children, adults and geriatric patients	IL	✓	CQ
<b>198.</b>	Discuss Conscious Sedation & its types	IL	✓	CQ
<b>199.</b>	Describe the significance of IV Sedation, Oral Sedation, Inhalation Sedation in Dentistry	IL	✓	CQ
<b>200.</b>	Define impacted teeth	IL	✓	SAQs
<b>201.</b>	Classify impacted teeth	IL	✓	SAQs/ OSCE
<b>202.</b>	Describe the Indications and contra-indications of wisdom tooth surgery.	IL/CR	✓	CQ
<b>203.</b>	Discuss various surgical techniques.	IL/CR	✓	SAQs
<b>204.</b>	Discuss the complications of surgery and its management.	IL	✓	CQ
<b>205.</b>	Define exodontia	IL/CR	✓	CQ
<b>206.</b>	List the Indications and contra-indications of exodontia	IL/CR	✓	CQ
<b>207.</b>	Enumerate the principles and application of forceps extraction	CR		OSCE
<b>208.</b>	Discuss the steps for surgical removal of erupted/broken down teeth.	CR	✓	OSCE
<b>209.</b>	List the complications of extraction.	IL	✓	SAQs

<b>210.</b>	Discuss the significance of consent taking before initiating dental procedure	CR	✓	OSCE
<b>211.</b>	Identify Oro-antral communication and its causes	IL		BCQs/ SAQs
<b>212.</b>	List ways to manage post-operative bleeding	IL	✓	SAQs/OSCE
<b>213.</b>	<b>PROFESSIONALISM AND ETHICS</b>			
	Apply ethical decision-making in all interactions with patients and their families, colleagues and other health care professionals.	CR		OSCE
	Demonstrate Competencies in avoiding potential ethical conflicts with pharmaceutical and other health industry providers.	CR		OSCE
	Differentiate between justice and equality.	SGD	✓	SAQ
	Demonstrate competencies in resolving ethical issues faced during common clinical scenarios.	CR		OSCE
	<b>PATIENT'S SAFETY</b>			
	Identify high risk situations and safety risks.	CR		OSCE
	Describe approaches and processes associated with risk management.	CR		OSCE
	Perform proper handling and maintenance of patient care equipment.	CR		OSCE
	Describe infection control, including aseptic technique, hand hygiene, screening and surveillance.	CR		OSCE
	Describe injury prevention, safe patient transport, handling and transfers, and removal of hazards.	CR		OSCE
	Identify and respond to safety concerns raised by others.	CR		OSCE
	Apply infection control procedures and processing of intra oral radiographs.	SGD		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate effective learning, verbal and written communication skills.	CR		OSCE
	Use effective and efficient communication and management strategies.	CR		OSCE
	Use written record, electronic medical record or other digital technologies while communicating with supervisor and patient.	SGD		OSCE
	Demonstrate competency in establishing a therapeutic and professional relationship with patients and their families.	CR		OSCE
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	CR		OSCE
	<b><u>GENERAL MEDICINE</u></b>			



<b>214.</b>	Discuss the common disorders of the thyroid, parathyroid, pituitary and adrenal glands; its clinical manifestations, investigation and their management.	IL/SGD		BCQs/SAQs/ OSCE
<b>215.</b>	Discuss the common causes of metabolic bone diseases and its management.	IL		BCQs/SAQs/ OSCE
<b>216.</b>	Describe the different types of hematological disorders.	IL		BCQs/SAQs/ OSCE
<b>217.</b>	Understands the classification and causes of anemia and how to investigate and manage anemia.	IL/SGD		BCQs/SAQs/ OSCE
<b>218.</b>	Differentiate between acute and chronic leukemia.	IL		BCQs/SAQs/ OSCE
<b>219.</b>	Describe the different causes of thrombocytopenia and bleeding disorders and its management.	IL		BCQs/SAQs/ OSCE
<b>220.</b>	Describe the types of Lymphomas (Classification, Clinical features and Treatment).	IL		BCQs/SAQs/ OSCE
<b>221.</b>	Describe the types of Myeloproliferative disorders (Classification, Clinical features and Treatment).	IL		BCQs/SAQs/ OSCE
<b>222.</b>	Describe and investigate different types of bacterial and viral infections.	IL		BCQ/SAQ/O SCE
<b>223.</b>	Diagnose viral infections with emphasis on: COVID-19, herpes simplex, herpes zoster, influenza, bird flu, dengue, hemorrhagic fever and currently prevalent viruses.	IL		BCQ/SAQ/O SCE
<b>224.</b>	Discuss various types of viral infections and how to manage them.	IL		BCQ/SAQ/O SCE
<b>225.</b>	Describe the types, clinical features, evaluation and treatment of malaria.	IL/ SGD		BCQ/SAQ/O SCE
<b>226.</b>	Recognize different Helminthic infections and can treat the infestations.	IL		BCQ/SAQ/O SCE
<b>227.</b>	Discuss the clinical features, evaluation and treatment of HIV and AIDS.	IL		BCQ/SAQ/O SCE
<b>228.</b>	Discuss the approach to a patient with meningitis and encephalitis, its investigations and treatment.	IL		BCQs/SAQs/ OSCE
<b>229.</b>	Discuss different causes of headache and how to investigate a patient with headache and its management.	IL/SGD		BCQs/SAQs/ OSCE
<b>230.</b>	Describe the characteristic features, differential diagnosis and management of cerebrovascular disease.	IL/SGD		BCQs/SAQs/ OSCE
<b>231.</b>	Discuss the clinical manifestations, classification, differential diagnosis and management of epilepsy.	IL/SGD		BCQs/SAQs/ OSCE

232.	Describe the clinical features and management of disabling neurological conditions such as Parkinson's disease, multiple sclerosis and motor neuron disease.	IL/SGD		BCQs/SAQs/ OSCE
233.	Recognize the clinical features of eczema and psoriasis.	IL		BCQ/SAQ/O SCE
234.	Recognize fungal and viral infections of skin and its management.	IL		BCQ/SAQ/O SCE
235.	Discuss the skin manifestation of systemic diseases	IL		BCQ/SAQ/O SCE
236.	Recognize erythema nodosum and the conditions with which it is associated.	IL		BCQ/SAQ/O SCE
237.	Discuss various types of psychiatric disorders clinical features, evaluation and treatment	IL		BCQ/SAQ/O SCE
238.	Describe the types of environmental disorders ; their clinical manifestations and management	IL/SGD		BCQs/SAQs/ OSCE
239.	<b>PROFESSIONALISM AND ETHICS</b>			
	Apply ethical decision-making in all interactions with patients and their families, colleagues and other health care professionals.	CR		OSCE
	Differentiate between justice and equality.	IL		SAQs
	<b>PATIENT'S SAFETY</b>			
	Identify high risk situations and safety risks	CR		OSCE
	Describe approaches and processes associated with risk management.	CR		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate effective learning, verbal and written communication skills.	CR		OSCE
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	CR		OSCE
	<b><u>GENERAL SURGERY</u></b>			
240.	Differentiate the abdominal pain in various quadrants according to underlying viscera	IL/CR/C BL	✓	BCQs/SAQs/ OSCE
241.	Discuss various upper GI symptoms to common diseases	IL	✓	BCQs/SAQs
242.	Describe features of upper intestinal obstruction (esophageal and stomach) and management	IL	✓	BCQs/SAQs/ OSCE

243.	Diagnose perforation of Abdominal Viscera and understand D/D and S/S of peritonitis.	IL/SGD/CR	✓	BCQs/SAQs/OSCE
244.	Describe D/D of bleeding PR and anal area.	IL	✓	BCQs/SAQs
245.	Describe common lesions of large gut	IL/CR/CBL	✓	BCQs/SAQs/OSCE
246.	Describe Appendicitis, complications d/d	IL/CR	✓	BCQs/SAQs
247.	Describe gall stone problems, complications Diagnosis and management	IL/CR/CBL	✓	BCQs/SAQs
248.	Discuss Obstructive Jaundice and pancreatic cancer	IL/CR	✓	BCQs/SAQs/OSCE
249.	Diagnose liver masses	IL/CR	✓	BCQs/OSCE
250.	Diagnose the role of spleen and Lymphadenopathy in various diseases	IL	✓	BCQs/SAQs
251.	Manages empyema thoracis and lung abscess	IL/CR	✓	BCQs/SAQs/OSCE
252.	Diagnose d/d of haematuria, Urine d/r its features	IL/CR/CBL	✓	BCQs/SAQs/OSCE
253.	Manage Obstructive uropathy	IL	✓	BCQs/SAQs
254.	Manage urological calculous disease	IL/SGD	✓	BCQs/SAQs/OSCE
255.	Differentiate ventral hernia, S/S and complications	IL/SGD/CR	✓	BCQs/SAQs/OSCE
256.	List the D/d of scrotal swellings	IL/SGD	✓	BCQs/SAQs/OSCE
257.	Identify arterial complications and management	IL/SGD	✓	BCQs/SAQs/OSCE
258.	Describe the Risk factors of DVT, Varicose veins & venous insufficiency and their management	IL/SGD	✓	BCQs/SAQs
259.	<b>PROFESSIONALISM AND ETHICS</b>			
	Describe basic principles of ethics with reference to social, cultural and religious perspective.	SGD		BCQs
	Discuss the role of doctor in community & Duties of a doctor.	SGD		BCQs
	<b>PATIENT'S SAFETY</b>			
	Demonstrate competency in using patient-centered interviewing skills in gathering biomedical and psychological information.	Role play		OSCE

	Demonstrate competency in seeking and developing relevant information from other sources, including the patient's family, with patient's consent.	Role play		OSCE
	<b>COMMUNICATION SKILLS</b>			
	Demonstrate competency in communicating effectively with patients.	Role Play		OSCE
	Use effective and efficient communication and management strategies	Role Play		OSCE
	Communicate in a manner that is respectful of and sensitive to the patient's and family's age, orientation, culture and beliefs	CR		OSCE
<b>Behavioral Sciences</b>				
<b>260.</b>	<b>History Taking and Interviewing</b>			
	Shift from a provider-centric to a patient-centered approach in communication.	Clinical Practices & SGD		OSCE
	Incorporate patient preferences and values into the history-taking process.	Clinical Practices & SGD		OSCE
	Understand the ethical considerations involved in collecting and handling patient information.	Clinical Practices & SGD		OSCE
	Maintain confidentiality and privacy in the history-taking process.	Clinical Practices & SGD		OSCE
<b>261.</b>	<b>Dentist-Patient Relation</b>			
	Identify strategies for managing patient anxiety and fear in the dental setting.	Clinical Practices & SGD		OSCE
	Implement techniques to create a calming and supportive environment for patients.	Clinical Practices & SGD		OSCE
	Understand the impact of cultural factors on dentist-patient interactions.	Clinical Practices & SGD		OSCE
	Develop cultural competence to enhance communication and build rapport with patients from diverse backgrounds.	Clinical Practices & SGD		OSCE
	Understand the ethical considerations involved in the dentist-patient relationship.	Clinical Practices & SGD		OSCE

	Recognize the importance of respecting patient autonomy, informed consent, and confidentiality.	Clinical Practices & SGD		OSCE
<b>262.</b>	<b>Ethics</b>			
	Demonstrate the ability to work ethically within a multidisciplinary healthcare team.	Clinical Practices & SGD		OSCE
	Understand the legal ramifications of inadequate or absent informed consent documentation.	Clinical Practices & SGD		OSCE
	Recognize special considerations for obtaining informed consent in vulnerable populations..	Clinical Practices & SGD		OSCE
	Understand the importance of continuous communication throughout the treatment process.	Clinical Practices & SGD		OSCE
	Analyze how Islamic ethics intersect with professional responsibilities in dentistry.	Clinical Practices & SGD		OSCE
<b>263.</b>	<b>Leadership and Management</b>			
	Identify various leadership styles applicable to dental practice.	SGD	✓	MCQs
	Analyze the effectiveness of different leadership styles in different dental settings.	SGD	✓	MCQs
	Identify opportunities for ongoing professional development in dental leadership.	SGD	✓	MCQs
	Understand the impact of unresolved conflict on team dynamics and patient care.	SGD	✓	MCQs
	Develop skills in conflict resolution and negotiation.	Clinical Practices & SGD		OSCE
	Understand the importance of teamwork in the dental office.	Clinical Practices & SGD		OSCE
	Develop strategies for fostering a positive and collaborative team culture.	Clinical Practices & SGD		OSCE
	Foster an environment where each team member feels valued and contributes to the overall success of the practice.	Clinical Practices & SGD		OSCE

Commencement of 9 <sup>th</sup> Module		Weekly Schedule of Module IX ORAL PATHOLOGY	
Activity	Week	Lecture 1	Lecture 2
Academic Session – BDS Third Professional	Week- 1	Classify inflammatory, metabolic and endocrine disorders of bone and Genetic disorders of bone I <b>LO (1-6, 9,11-12)</b>	Genetic disorders of bone II <b>LO (9,11-12)</b>
	Week- 2	Fibrous Dysplasia <b>LO (7-8, 10)</b>	Metabolic & Inflammatory disorders of bone <b>LO (14-16)</b>
	Week- 3	Tumors of bone <b>LO (17)</b>	Wound Healing <b>LO (13, 20)</b>
	Week- 4	<b>CAT</b>	Non-Bacterial loss of Tooth substance I <b>LO(21-22)</b>
	Week- 5	Non-Bacterial loss of Tooth substance II <b>LO (23-25)</b>	Classify infections of oral mucosa and Bacterial infections I <b>LO (26-28)</b>
	Week- 6	Bacterial infections II <b>LO(29-31)</b>	Viral infections <b>LO (32-33)</b>
	Week- 7	Fungal infections <b>LO(34-37)</b>	Immunology I <b>LO(39-40)</b>
	Week- 8	Immunology II <b>LO(41-42)</b>	<b>CAT</b>
	Week- 9	<b>CME on Ameloblastoma</b>	Revision
	Week- 10	Revision	Revision
	Week-11	Revision	Revision
	Week-12	Revision	Revision
	Week- 13 and 14	<b>THEORY AND VIVA EXAMINATION</b>	

Commencement of 9 <sup>th</sup> Module		Weekly Schedule of Module IX <b>PERIODONTOLOGY</b>
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	Furcation Involvement & Patterns Of Bone Destruction in Periodontal Disease. <b>LO (44-49)</b>
	Week- 2	Aggressive Periodontitis & Chronic Periodontitis <b>LO (50-57)</b>
	Week- 3	Guided Tissue Regeneration <b>LO (58-59)</b>
	Week- 4	Diagnosis Of Cause Related Disease <b>LO (60-65)</b>
	Week- 5	Trauma From Occlusion <b>LO (66-68)</b>
	Week- 6	Re-evaluation Of Cause Related Disease <b>LO (69-77)</b>
	Week- 7	Periodontal Dressing & Sutures <b>LO (78-80)</b>
	Week- 8	Endodontic – Periodontal Lesions <b>LO (81-83)</b>
	Week- 9	Periodontal Treatment Of Medically Compromised Patients <b>LO ( 84-90)</b>
	Week- 10	Occlusal Analysis & Periodontal Splinting. <b>LO (91-105)</b>
	Week- 11	OSCE Revision
	Week- 12	Class Test/ Assessment
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>

Commencement of 9 <sup>th</sup> Module		Weekly Schedule of Module IX <b>ORAL MEDICINE</b>
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	Pigmented Lesions I <b>LO (98-100)</b>
	Week- 2	Pigmented Lesions II <b>LO (98-100)</b>
	Week- 3	Salivary gland disorder <b>LO (88- 97)</b>
	Week- 4	Salivary gland tumor <b>LO (101-106)</b>
	Week- 5	Oral manifestations of systemic disease and their management (Cardiac) <b>LO (107-113)</b>
	Week- 6	Oral manifestations of systemic disease and their management (Respiratory) <b>LO (114-119)</b>
	Week- 7	Oral manifestations of systemic disease and their management (Renal), (G.I.T.) <b>LO (120-130)</b>
	Week- 8	Oral manifestations of systemic disease and their management (Endocrine) <b>LO (131-144)</b>
	Week- 9	Oral manifestations of systemic disease and their management (Hematological) <b>LO (145-149)</b>
	Week- 10	CAT
	Week-11& 12	Revision
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>



Commencement of 9 <sup>th</sup> Module		Weekly Schedule of Module IX
Activity	Week	ORAL SURGERY Lecture 1
Academic Session – BDS Third Professional	Week- 1	Medical Emergencies 1 <b>LO (176-177-176)</b>
	Week- 2	Medical Emergencies 2 <b>LO (176-177-176)</b>
	Week- 3	Medical Emergencies 3 <b>LO (176-177-176)</b>
	Week- 4	Medical emergencies 4 <b>LO (176-177-176)</b>
	Week- 5	Medical Emergencies 5 <b>LO (176-177-176)</b>
	Week- 6	Basic principles of oral surgery 1 <b>LO (159-160-161--164--195)</b>
	Week- 7	Basic principles of oral surgery 2 <b>LO (159-160-161--164--195)</b>
	Week- 8	Basic principles of oral surgery 3 <b>LO (159-160-161--164--195)</b>
	Week- 9	Basic principles of oral surgery 4 <b>LO (159-160-161--164--195)</b>
	Week- 10	Simple Exodontia 1 <b>LO (170--175,188--192)</b>
	Week-11	Simple Exodontia 2 <b>LO (170--175,188--192)</b>
	Week-12	Simple Exodontia 3 <b>LO (170--175,188--192)</b>
	Week- 13 and 14	<b>THEORY AND VIVA EXAMINATION</b>

Commencement of 9 <sup>th</sup> Module		Weekly Schedule of Module IX GENERAL MEDICINE	
Activity	Week	Lecture 1	Lecture 2
Academic Session – BDS Third Professional	Week- 1	Thyroid disorders <b>LO (197)</b>	Parathyroid gland disorders <b>LO (197)</b>
	Week- 2	Pituitary gland disorders <b>LO (197)</b>	Adrenal gland disorders <b>LO (197)</b>
	Week- 3	Metabolic bone disorders <b>LO (198)</b>	Anemia <b>LO (200)</b>
	Week- 4	Headache <b>LO (212)</b>	Thrombocytopenia <b>LO (202)</b>
	Week- 5	Cerebrovascular disease <b>LO (213)</b>	Lymphomas and leukaemia <b>LO (201, 203)</b>
	Week- 6	Epilepsy <b>LO (214)</b>	Myeloproliferative disorders <b>LO (204)</b>
	Week- 7	Parkinson's disease, multiple sclerosis and motor neuron disease. <b>LO (215)</b>	Approach to fever and fever of unknown origin. <b>LO (205)</b>
	Week- 8	Meningitis and encephalitis <b>LO (211)</b>	Common Bacterial infections- (typhoid ) and Viral infections - (dengue, COVID) <b>LO (206-207)</b>
	Week- 9	Dermatology 1 <b>LO (216-217)</b>	Fungal infections and Parasitic infections <b>LO (209)</b>
	Week- 10	Dermatology 2 <b>LO (218-219)</b>	Malaria <b>LO (208)</b>
	Week-11	Psychiatric disorders 1 <b>LO (220)</b>	HIV and AIDS <b>LO (210)</b>
	Week-12	Psychiatric disorders 2 <b>LO (220)</b>	Environmental disorders <b>LO (221)</b>
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>	

Commencement of 9 <sup>th</sup> Module		Weekly Schedule of Module IX GENERAL SURGERY
Activity	Week	Lecture 1
Academic Session – BDS Third Professional	Week- 1	Acute Abdomen. <b>LO (223)</b>
	Week- 2	Upper GI symptoms and causes, dysphagia causes. <b>LO (224)</b> Intestinal obstruction. <b>LO (225)</b>
	Week- 3	Peritonitis, perforation. <b>LO (226)</b>
	Week- 4	Bleeding P/R, anal region, rectum and colon. <b>LO (227)</b> Common specific lesions of lower GIT (amebiasis, TB, CA). <b>LO (228)</b>
	Week- 5	Appendicitis, D/D and management. <b>LO (229)</b>
	Week- 6	Cholelithiasis, Complications, management and causes. <b>LO (230)</b> Obstructive Jaundice & Pancreatic lesions. <b>LO (231)</b>
	Week- 7	Liver, mass lesions, abscess, Hydatid disease and tumors. <b>LO (232)</b>
	Week- 8	Spleen and Lymphadenopathy. <b>LO (233)</b> Empyema thoracis and lung abscess. <b>LO (234)</b>
	Week- 9	UTI, Haematuria, BPH. <b>LO (235-236)</b>
	Week- 10	Calculous diseases of Urinary Tract. <b>LO (237)</b> Ventral wall Hernia and Inguinal hernia. <b>LO (238)</b>
	Week-11	Inguino scrotal, scrotal swellings & D/D. <b>LO (239)</b>
	Week-12	Arterial Obstruction, both Acute & chronic, Gangrene & Amputation. <b>LO (240)</b> DVT & Varicose Veins. <b>LO (241)</b>
	Week-13 and 14	<b>THEORY AND VIVA EXAMINATION</b>

## Learning Resources

### ORAL PATHOLOGY

#### RECOMMENDED BOOKS

1. J V Soames, J C Southam, Textbook of Oral Pathology, 5<sup>th</sup> Edition
2. R A Cawson, E W Odell, Essentials of Oral Pathology and Oral Medicine, 8<sup>th</sup> Edition
3. Shafer, Hine, Levy, Textbook of Oral Pathology, 6<sup>th</sup> Edition
4. Regezi, Oral Pathology, 6<sup>th</sup> Edition
5. Neville, Damm, Oral and Maxillofacial Pathology, 3<sup>rd</sup> Edition.

#### RECOMMENDED E-BOOKS

1. Atlas of Oral Microbiology by Zhou
2. Oral Pathology Clinical Pathologic Correlation by Regezi
3. Oral Pathology by Soames, 4<sup>th</sup> edition.
4. Oral Radiology by Eric Waites

### PERIODONTOLOGY

#### RECOMMENDED BOOKS

1. Neman and Carranza's Clinical Periodontology 13<sup>th</sup> edition.
2. Linda's Clinical Periodontology and Implant Dentistry.
3. Shanti Priya Reddy, Essentials of Clinical Periodontology & Periodontics 5<sup>th</sup> Edition.

#### RECOMMENDED E-BOOKS

1. Clinical periodontology Implant Dentistry by Lindhe

### ORAL MEDICINE

### RECOMMENDED BOOKS

1. William R.Tyldesley, Oral Medicine, 5<sup>th</sup> Edition
2. Lester W. Burket, Oral Medicine, 11<sup>th</sup> Edition
3. Roderick A.Cawson, Oral Medicine, 8<sup>th</sup> Edition
4. Crispian Scully, Oral Medicine, 3<sup>rd</sup> Edition

### RECOMMENDED E-BOOKS

1. Text Book of Oral Medicine ,Oral Diagnosis and Oral Radiology by Ongole

## **OPERATIVE DENTISTRY**

### RECOMMENDED BOOKS

1. Joseph R Evans, John H Wilke. Atlas of Operative Dentistry: Preclinical and clinical procedures. Quintessence books Publishing Co.
2. Richard L Kahn, Pinkerton RJ, Kagihara LE. Fundamentals of Preclinical Operative Dentistry. [www.bookdepository.co.uk](http://www.bookdepository.co.uk)
3. The Art & Science of Operative Dentistry by Sturdevant.
4. Pickard's Manual of Operative Dentistry by EAM Kidd.
5. Fundamentals of Operative Dentistry by Schwartz
6. Dental Restorative Materials – Craig
7. Textbook of Operative Dentistry by Vimal K Sikri

## **PROSTHODONTICS**

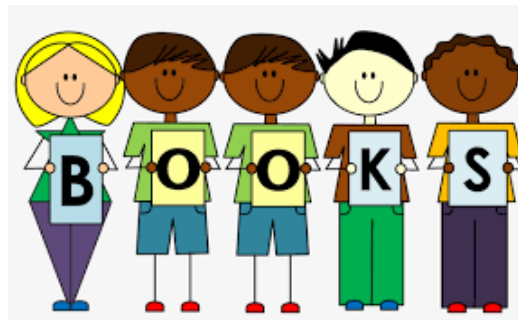
### RECOMMENDED BOOKS

1. Carr, McCracken's Removable Partial Prosthodontics, 12th Edition
2. Phoenix, Stewart's Clinical Removable Partial Prosthodontics, 4th Edition

### RECOMMENDED E-BOOKS

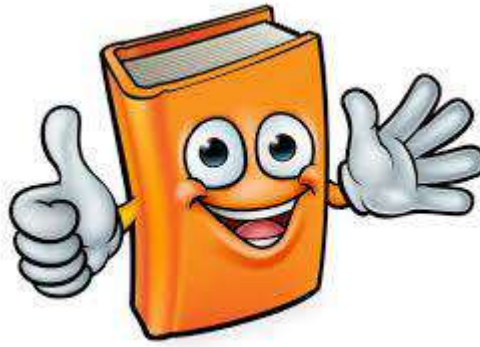
1. A Guide to Complete Denture Prosthetics
2. Prosthodontics at Glance by Irfan Ahmed
3. Fixed Removal Prosthodontics (color guide) by C.W.Barcaly
4. Fundamentals of fixed Prosthodontics by Shillingburg

### ORAL MAXILLOFACIAL SURGERY



### RECOMMENDED BOOKS

- James, Contemporary Oral & Maxillofacial Surgery, 7<sup>th</sup> Edition
- Mitchell, An Introduction to Oral & Maxillofacial Surgery, 1<sup>st</sup> Edition
- Laskin, Oral & Maxillofacial Surgery, 1<sup>st</sup> Edition
- Singh, Atlas of Oral Implantology, 3<sup>rd</sup> Edition
- Norman, Differential Diagnosis of Oral & Maxillofacial Lesions, 5<sup>th</sup> Edition



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### RECOMMENDED E-BOOKS

- Oral & Maxillofacial Surgery Secrets by Omar Abubakar
- Oral Radiology by White
- Textbook of Dental & Maxillofacial Radiology
- Oral & Maxillofacial Surgery

### GENERAL MEDICINE

#### RECOMMENDED BOOKS

1. Parveen Kumar, Kumar and Clark's Clinical Medicine, 8<sup>th</sup> Edition
2. Maxine A Papadakis, Current Medical Diagnosis and Treatment, Edition 2016

### GENERAL SURGERY

#### RECOMMENDED BOOKS

1. Short Practice of Surgery by Bailey & Love. 27<sup>th</sup> Edition
2. An Introduction to the Symptoms & Signs of Surgical Diseases by Norman S Bros
3. Manual of Clinical Surgery by S. Das

**BAHRIA UNIVERSITY DENTAL COLLEGE**  
**3<sup>RD</sup> PROFESSIONAL BDS**  
**11<sup>TH</sup> BATCH**  
**ACADEMIC CALENDAR 2025**

**SESSION START:**

**30<sup>TH</sup> DECEMBER 2024 (MONDAY)**

**SEVENTH MODULE (12 WEEKS):**

MODULE START  
MODULE ENDS

30<sup>TH</sup> DECEMBER 2024 (MONDAY)  
21<sup>TH</sup> MARCH 2025 (FRIDAY)

**THEORY AND OSCE EXAMINATION**

**24<sup>TH</sup> MARCH → 28<sup>TH</sup> MARCH 2025**

**EID UL FITR VACATIONS:**

**31<sup>ST</sup> MARCH → 4<sup>TH</sup> APRIL 2025**

**EIGHTH MODULE (12 WEEKS):**

**PRE EID VACATION SESSION (9 WEEK)**

MODULE START  
MODULES BREAK

7<sup>TH</sup> APRIL 2025 (MON)  
6<sup>TH</sup> JUNE 2025 (FRIDAY)

**EID UL ADHA & SUMMER VACATIONS:**

**9<sup>TH</sup> JUNE → 20<sup>TH</sup> JUNE 2025**

**POST EID VACATIONS SESSION (3 WEEKS)**

MODULE STARTS  
MODULE ENDS

23<sup>RD</sup> JUNE 2025 (MON)  
11<sup>TH</sup> JULY 2025 (FRIDAY)

**THEORY AND OSCE EXAMINATION**

**14<sup>TH</sup> JULY → 18<sup>TH</sup> JULY 2025**

**NINTH MODULE (12 WEEKS):**

MODULE STARTS  
MODULE ENDS

21<sup>ST</sup> JULY 2025 (MONDAY)  
10<sup>TH</sup> OCT 2025 (FRIDAY)

**THEORY AND OSCE EXAMINATION**


**13<sup>TH</sup> OCT → 17<sup>TH</sup> OCT 2025**

**FINAL EXAMINATION:**

**NOVEMBER/ DECEMBER 2025**

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**PROF. DR KASHIF NAQVI**  
**PRINCIPAL DENTAL COLLEGE**