GUIDE BOOK

JINNAH MEDICAL AND DENTAL COLLEGE



DEPARTMENT OF PROSTHODONTICS

ACADEMIC YEAR: 2022-2023

AUTHORED

ΒY

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VISION

To set local and global standards for quality patient outcomes – creating a culture of excellence to promote a transformative experience for the 21st century clinicians, educators and researchers to benefit all humanity.

MISSION

We are committed to develop well rounded academics, thinkers, clinicians and researchers by strengthening a global view, broadening intellectual foundation and teaching effective communication. It is our aspiration to cultivate creative and critical thinking skills for problem solving, sensitive to cultural and ethical values and responsibilities. Our graduates will be role models and leaders for society.

VALUES

- **1.** Equity
- 2. Quality
- 3. Compassionate behavior
- **4.** Social accountability
- 5. Social Justice
- 6. Humanistic approach
- 7. Leadership
- 8. Innovation
- 9. Integrity
- 10. collaboration

PROGRAM LEARNING OUTCOMES -7 STAR DOCTORS – (PMDC)

A JMDC graduate should be able to:

- Demonstrate insight, imagination and curiosity, define one's unique self, one's values and one's place in the world, while incorporating the qualities of a good physician
- Answer complex questions facing physicians, including the role they should play in society, politics and promotion of social justice
- Engage in reflective practice through sound clinical decision making, critical selfassessment and commitment to lifelong learning
- Demonstrate mastery of entry level professional clinical skills used to provide services based on best available evidence
- Display enlightenment and moral virtues to prepare themselves for life and work in a problematic, changing and diverse world
- Be responsible leaders for the good of themselves, their family, community and country
- Be humane and socially equipped individuals, in tune with rights of patients and vulnerable groups
- Show expertise in critical situational analysis
- Respect diversity
- Display effective communication
- Be able to address population health and health system issues based on demography, statistics, epidemiology and cultural nuances

INTRODUCTION TO PROSTHODONTIC DEPARTMENT:

BRIEF OVERVIEW

Prosthodontics, also known as **dental prosthetics** or **prosthetic dentistry**, is the area of dentistry that focuses on dental prostheses. The ADA defines it as:

"The dental specialty pertaining to the diagnosis, treatment planning, rehabilitation and maintenance of the oral function, comfort, appearance and health of patients with clinical conditions associated with missing or deficient teeth or oral and maxillofacial tissues using biocompatible substitutes."

Dental prostheory was pioneered by French surgeon Pierre Fauchard during the late 17th and early 18th century. Despite the limitations of the primitive surgical instruments, Fauchard discovered many methods to replace lost teeth using substitutes made from carved blocks of ivory or bone. He also introduced dental braces to correct the position of teeth using gold wires and silk threads.

A **Prosthodontist** is a dentist who:

- Specializes in the aesthetic (cosmetic) restoration and replacement of teeth.
- Receives three to four years of additional training after dental school
- Restores optimal appearance and function to your smile. The planning, surgical placement (sub-crestal prosthodontics) and restoration of implants and rehabilitation of occlusion with prostheses all fall under the field of prosthodontics.

Prosthodontics Department deals with replacement of missing teeth and tissues of the stomatognathic system by **removable or fixed restorations** to rehabilitate the patient's **aesthetics, speech and masticatory function.** The patients here are treated with utmost care and empathy with standard protocols following cross-infection control and quality treatments. we have equipped the department with the most advanced technology and highly skilled doctors to give patient the best and advanced treatment options for their problems.

At the under-graduate level, we teach our students regarding the basic material handling, patient management, team-work and help them to develop clinical and laboratory skills in removable prosthodontics.

The house officers and post-graduates are also facilitated in our department for their clinical rotation. We provide them with optimal environment in order to help them develop their clinical skills through clinical group discussions, patient management, patient handling, crow preparations and different clinical steps of removable prosthodontics.

We also have acrylic and casting lab equipped with advanced technology for in house fabrication of acrylic partial dentures, fixed partial dentures and cast restorations to provide the quality and cost-effective care to our patients.

HIERARCHY OF THE DEPARTMENT





UNDER SUPERVISION OF SENIOR FACULTY

LEARNING OUTCOMES FOR BDS PROSTHODONTICS

SECOND YEAR

By the end of second year in Prosthodontics Department , the student should be able to :

- 1. Describe? Basic anatomy and landmarks of maxilla and mandible
- 2. Demonstrate or explain???Laboratory technique management based on knowledge and skills of dental materials, dental equipment and instrument management including:
 - A) Model pouring.
 - B) Wax pattern for custom tray.
 - C) Dewaxing.
 - D) Curing.
 - E) Finishing and polishing of custom tray.
 - F) Fabrication of occlusal rim.
 - G) Teeth setup.
- 3. Demonstrate the following:
 - A. Discipline
 - B. Record keeping.
 - C. Team work.

D. Respect for senior and junior colleagues, peers, dental assistants and other staff members.

E. Respect for privacy and confidentiality etc.

F. Compliance with sterilization and cross infection control protocols.

G. Compliance with rules and regulation of the department and institution.

H. Professionalism

THIRD YEAR

By the end of third year in Prosthodontics Department, the student should be able to :

- 1. Instruments and lab protocol
- 2. Removable Partial Denture lab fabrication steps overview
- 3. Maxilla and Mandible model pouring (ideal molds)
- 4. Marking of models for Kennedy class-I, II, III & IV
- 5. Wax-up for base plate formation
- 6. Fabrication of Maxillary and Mandibular wax occlusal rims
- 7. Articulation and mounting of the Maxillary and Mandibular occlusal rims
- 8. Selection of anterior and posterior teeth
- 9. Arrangement of anterior and posterior teeth
- 10. Final finishing (correction of denture base & tooth position)
- 11. Carving and festooning
- 12. Investment of the wax up in the flasks
- 13. De-waxing and packing with heat cure acrylic polymer
- 14. Finishing and polishing

Demonstrate the following:

- A. Discipline
- B. Record keeping.
- C. Team work.

D. Respect for senior and junior colleagues, peers, dental assistants and other staff members.

E. Respect for privacy and confidentiality etc.

F. Compliance with sterilization and cross infection control protocols.

G. Compliance with rules and regulation of the department and institution.

H. Professionalism

FINAL YEAR

By the end of Final year in Prosthodontics Department, the student should be able to :

- 1. Take an informed consent from the patient
- 2. Diagnostic skill to examine the patients requiring Prosthodontics therapy, investigate the patient systemically, analyse the investigation results, radiography, diagnose the ailment, plan a treatment, communicate it with the patient and execute it.
- 3. Perform clinical and laboratory procedures with understanding of biomaterials, tissue conditions related to prosthesis.
 - A) Impression material mixing
 - B) Primary and secondary Impression taking.
 - C) Jaw relation.
 - D) Try-in.
 - E) Insertion.
- 4. Laboratory technique management based on skills and knowledge of dental materials and dental equipment and instrument management.
 - A) Model pouring.
 - B) Wax pattern for custom tray.
 - C) Dewaxing.
 - D) Curing.
 - E) Finishing and polishing of custom tray.
 - F) Fabrication of occlusal rim.
 - G) Teeth setup.
- 5. Prosthodontics treatment for completely edentulous patients Complete denture, immediate complete denture, single complete denture, tooth supported complete denture, Implant supported Prosthesis for completely edentulous patients
- 6. Prosthodontics treatment for partially edentulous patients: Clasp- retained partial dentures, intra coronal and extra coronal precision attachments retained partial dentures

- 7. Apply theory to practice, while treating patients (and other procedural skills)
- 8. Identify the need to refer.
- 9. Demonstrate the following:

A. Effective communication skills including counselling.

B. Record keeping.

C. Team work.

D. Respect for senior and junior colleagues, peers, dental assistants and other staff members.

E. Respect for privacy and confidentiality etc.

F. Compliance with sterilization and cross infection control protocols.

G. Compliance with rules and regulation of the department and institution.

H. Professionalism.

TEACHING AND LEARNING STRATEGIES:

Lab tutorials (large group teachings)

Third year BDS, the students have their clinical rotation three days a week in which they are taught about the clinical and laboratory aspects of removable partial dentures through tutorials and lab demonstration. They are taught in regular classes once a week for 50mins.

Final year BDS, interactive lectures for large group predominates. The prosthodontics lectures are held twice every week total of 100mins.

For student's engagement and active participation to its fullest, following are employed:

Quizzes Active learning strategies Mini-student presentations

SKILL DEVLOPMENT SESSION:

The skills teaching begins on ideal mold's in the laboratory. Both the second year and third year learn the basic steps of removable partial dentures fabrication and their clinical significance. The learned skills are then employed in the final year on patients. Most of the clinical learning occurs in the out-patient department from which patients are allotted to each student to carry out clinical and laboratory steps under supervision of faculty. The final year students are engaged through:

Learning laboratory steps on ideal molds History and treatment planning for removable restorations On-patient demonstration of clinical and procedural skills. Communication skills and counselling tips Discussion for critical thinking, decision making and ethical issues.

ASSESSMENT TOOLS TO EVALUATE STUDENT LEARNING:

In-Class Assessment:

Attendance.
Quizzes.
Presentations.
Assignments.

Ward Assessment:

A test is conducted in mid and end of the clinical rotation to assess the learning of students. It is to ensure that the students develop the required proficiencies under a supervised environment.

Examination Assessment:

Mid Term examinations:

These are conducted in the mid of the academic year. It comprises of the following components;

Component	Marks
BCQs	100
OSCE	50
VIVA	50
TOTAL	200

Pre-Professional examinations:

These are conducted in the end of the academic year before the final professional examination. It comprises of the following components;

Component	Marks
BCQs	100
OSCE	75
VIVA	75
TOTAL	250

Professional Examinations:

At the end of each academic year, JSMU conducts the examination. After the final professional examination JSMU will award the students with the Bachelors in Dental Surgery (BDS) degree.

Component	Marks
BCQs	100
OSCE	75
VIVA	75
TOTAL	250

INTERNAL EVALUATION / CONTINOUOUS ASSESSMENT POLICY

Continuous Assessment

1	Assignments / class tests / ward tests	25%
2	Mid-term	35%
3	Pre-prof	35%
4	Extra effort	5%

Assignments / Tests / Mid-term / Pre-prof			
1	Present and Fail	25%	
2	Pass	Actual percentage	
3	Absent	Zero	

Professional annual examination:

Professional annual examination are conducted by the University (JSMU) and comprise theory examinations and OSPE/OSCE.

Eligibility for sitting in the Professional Annual Examinations will be as follows:

- 1. Minimum of **40% aggregate** marks in all the Internal Examinations (Mid-term, Pre-prof, Assignments and Tests).
- 2. Students with less then **75% overall class attendance** will not be allowed to sit in the Annual Professional Examinations.
- 3. Clinical attendance will be maintained separately. Attendance in any clinical rotation which falls below **75%** must be made up by the students.
- 4. Students must obtain **passing marks in the clinical ward tests**. Failing to do so, students will have to sit for a re-take ward test (only one retake is allowed).

The students must pass the theory and OSPE exam in annual professional examination

If any component of the professional exam is failed the students must appear in the supplementary examination in that specific component.

CIRRICULUM OF PROSTHODONTICS

SECOND YEAR

TOPICS	LEARNING OBJECTIVES By the end of second year BDS, the student should be able to:	MODE OF TEACHING	ASSESSMENT METHOD The students will be assessed during, mid and end of rotation
1.Preclinical Prosthodontics and its scope	 At the end of this unit, students will b able to: Summarize the scope of Preclinical Prosthodontics Name the various instruments and equipment to be used in the labs 	IL SGD Laboratory Demonstrations DOPs	Lab performance Completing the designated tasks
2. Wire bending and wrought wire clasp	 At the end of this unit, students will be able to: Identify the type of pliers Demonstrate the correct grip of pliers Perform straightening of a given wire piece Perform bending of wires into given shapes and alphabets Construct well adapted clasps on canines, premolars and molars without acute bends and proper tag at the end 	IL SGD Laboratory Demonstrations DOPs	Lab performance Completing the designated tasks
3. Gypsum	 At the end of this unit, students will be able to: Differentiate between hard and soft plaster Dispense appropriate amount of plaster for required work Manipulate with water Achieve a desired consistency of the mixture 	IL SGD Laboratory Demonstrations DOPs	Lab performance Completing the designated tasks

	 Fabricate a plaster slab of given dimensions Trim the slab up to required size Perform pouring of ideal moulds for complete dentures. Fabricate the ideal casts without bubbles Fabricate the base with soft plaster Evaluate the amount of time for setting Conduct trimming of the cast on the model trimmer 		
4.Removable partial denture exercise	 At the end of this unit, students will be able to: Identify various parts of an RPD State the uses of RPDs Classify the given casts according to Kennedy's classification Identify different parts of dental surveyor Perform surveying on ideal partially dentate casts Prepare a wax pattern of uniform thickness on the given cast Fabricate the bite rims Construct well adapted clasps without any acute bends and proper tags Arrange artificial teeth in the edentulous segments at occlusal level Identify the heat-cured acrylic resin powder and its liquid monomer Dispense and manipulate heat cured acrylic resin Perform packing of acrylic dough Execute trial closure on bench press Outline and execute the curing procedure Conduct devesting of flasks Perform finishing and polishing of the processed denture 	IL SGD Laboratory Demonstrations DOPs	Lab performance Completing the designated tasks

	At the end of this unit students will	11	Lah
5 Impression	be able to	SCD	nerformance
J. Impicasion Making		Laboratory	periormance
waking			
	Name and identify different	Demonstrations	Completing the
	impression materials		designated
	 Identify different types of 	DOPs	tasks
	impression travs		
	Select an appropriate		
	• Delect all appropriate		
	impression tray for a given		
	case		
	Perform material dispensing		
	and mixing according to		
	manufacturers' instructions		
	Demonstrate proper loading of		
	the impression trav		
	Carry the loaded tray in the		
	mouth		
	- Derferm berder melding where		
	Perform border molding where		
	required		
	 Identify the set material 		
	 Demonstrate tray removal 		
	Identify and inspect for any		
	faults		
	 Eabricate the bard plaster cast 		
	without hubbles		
	Fabricate the soft plaster base		
	Fabricate the solt plaster base		
	Retrieve the cast from the		
	impression		
	 Conduct trimming of the cast 		
	on the model trimmer		
6. Complete	At the end of this unit, students will	L	Lab
Denture	be able to	SGD	performance
		Laboratory	•
	Name the parts and surfaces of	Demonstrations	Completing the
	a complete denture	Domonoulationio	designated
		DOPo	toeke
	Fabricate the casts from ideal	DOFS	lasks
	moulds		
	Outline the steps of complete		
	denture fabrication		
	Identify the types of articulators		
	• Enumerate the various parts of		
	an articulator		
	 Identify the self sured acrulic 		
	 Identity the sen-cured acrylic regin and its liquid manamer 		
	Construct a well-adapted		
	record base with self cured		
	acrylic resin		
	Prepare occlusal rims		
	according to the		
	ideal dimensions		
	Perform mounting of record		
	bases on hinge type		
	articulators Perform anterior		
	tooth setup of upper arch		
1		1	1

according to ideal parameters
Perform posterior tooth setup
of upper arch according to ideal
parameters
Perform tooth setup of lower
arch in occlusion with the upper
arch
Carry out final wax up and
festooning

THIRD YEAR

S. NO.	TOPIC	LEARNING OBJECTIVES By the end of third year BDS, the student should be able to:	MODE OF TEACHING	ASSESSMENT METHOD The students will be assessed during, mid and end of rotation
1.	Introduction to removable partial dentures	 Define the term "Removable partial denture" Discuss the benefits of partial dentures Enumerate the basic component parts of a partial denture Differentiate between acrylic and cast partial dentures 	lecture	MCQs OSCE
2.	Tooth loss and aging	 Understand the demands of patients after tooth loss Understand the consequences of tooth loss Explain the benefits of restoration of the missing teeth 	lecture	MCQs OSCE
3.	Classification of partially edentulous arches	 Recall the requirements of a universally acceptable classification system Enlist a few classification systems in use Summarize the salient features of Kennedy's classification Enlist the Applegate rules (in correct order) Identify the given casts according to Kennedy's classification 	lecture	MCQs, OSCE

4.	Major connectors 1	 Define the term "Major connector" Describe the guidelines for designing the major connectors Enlist the mandibular major connectors Describe the features of different mandibular major connectors 	Lecture	MCQs, OSCE
5.	Major connectors 2	 Enlist the maxillary major connectors Describe the features of different maxillary major connectors 	Lecture	MCQs, OSCE
6.	Major connectors 3	 Describe the designing of mandibular major connectors Describe a systematic approach for designing the maxillary major connectors 	Lecture	MCQs, OSCE
7.	Minor connectors	 Define the term "Minor connector" Recall the functions of a minor connector Describe the form and location of minor connectors Discuss the role of tissue stops Locate the finishing lines 	lecture	MCQs, SAQs, OSCE

8.	Rests and rest seats	 Define the terms "Rest" and "Rest seat" Enlist the functions of a rest Recall the form of an occlusal rest and rest seat Explain the concept of an extended occlusal rest Discuss the features of the interproximal rest seats Describe the application of intracoronal rests Recall the support for occlusal rests Comprehend the application of lingual rests on anterior teeth Comprehend the application of incisal rests 	Lecture	MCQs, OSCE
9.	Direct retainers 1	 Define the term "Direct retainer" Summarize the role of direct retainer in prosthesis movement control Classify the direct retainers used in partial dentures 	Lecture	MCQs, , OSCE
10.	Direct retainers 2	 Carry out analysis of tooth contours for retentive clasps Discuss the factors affecting the amount of retention of clasps 	Lab demonstations	MCQs, OSCE
11.	Direct retainers 3	Recall the main types of clasp assemblies	lectures	MCQs, , OSCE
12.	Direct retainers 4	 Outline the criteria for selecting a given classp Recall the basic principles of clasp design 	lectures	MCQs, OSCE
13.	Direct retainers 5	 Recall the basic principles of clasp design (Continued) 	lecture	MCQs, OSCE

14.	Indirect retainers	 Define the term "Indirect retainer" Recall the functions of an indirect retainer Recall the factors affecting the effectiveness of indirect retainers Classify the forms of indirect retainers 	Lecture	MCQs, OSCE
15.	Denture base considerations	 Recall the functions of denture bases Enumerate the methods of attaching the denture bases to framework Describe the ideal denture base material Discuss the advantages of metal bases 	Lecture	MCQs, OSCE
16.	Principles of partial denture design 1	 Describe the design principles of Kennedy's Class I, II and III situations Outline the strategies for controlling the amount of stress transmitted to the abutment teeth Outline the essential steps in designing the partial denture 	Lecture	MCQs, OSCE
17.	Principles of partial denture design 2	 Explain the components of partial denture design Perform designing of partial dentures (exercise) 	Lecture	MCQs, OSCE
18.	Surveying 1	 Define the terms: Surveying, Surveyor, Path of placement Describe the parts of a dental cast surveyor Outline the purposes of surveyors 	Lecture	MCQs, OSCE

19.	Surveying 2	 Remember the factors that determine the path of placement and removal Illustrate the step by step procedure of surveying the diagnostic cast Perform the Tripoding Carry out the surveying of the master cast (exercise) 	Lecture	MCQs, OSCE
20.	Diagnosis and treatment planning 1	 Define the terms "Diagnosis" and "Treatment planning" Understand the uniqueness of treatment for a patient Perform a detailed history taking Perform a detailed clinical examination Order and interpret appropriate radiographs 	Lecture	MCQs, OSCE
21.	Diagnosis and treatment planning 2	Explain the role of diagnostic casts in treatment planning	Lecture	MCQs, OSCE
22.	Diagnosis and treatment planning 3	 Formulate a list of differential diagnosis Formulate a treatment plan for a given case 	Lecture	MCQs, OSCE
23.	Preparation of the mouth for removable partial dentures	 Identify the mouth preparations required for a given case Order the oral surgical preparation Implement procedures to manage/condition abused and irritated soft tissues Understand the need for periodontal preparation Understand the need for abutment teeth preparation 	Lecture	MCQs, OSCE

24.	Preparation of the abutment teeth	 Classify the abutment teeth according to need of modifications Understand the sequence of abutment preparations Plan the abutment preparations on sound enamel or existing restorations Plan the abutment preparations using conservative restorations Plan the abutment preparations using conservative restorations Plan the abutment preparations using complete coverage crowns Identify the need for splinting abutment teeth Plan using isolated teeth 	Lecture	MCQs, OSCE
25.	Impression materials and procedures for removable partial dentures	 as abutments Summarize the properties of available impression materials Understand the precautions to be observed in handling hydrocolloid impressions Perform the step-by-step procedure for making hydrocolloid impressions Perform the step-by-step procedure for making a stone cast Explain the possible causes of an inaccurate or weak cast Fabricate individual impression trays from acrylic resin 	Lecture	MCQs, OSCE

26.	Support for the distal extension denture base	 Understand the requirements of support for the distal extension denture base Outline the factors that influence the support of a distal extension denture base Plan for recording the anatomic form impression Plan for recording the functional form impression 	Lecture	MCQs, OSCE
27.	Occlusal relationships for removable partial dentures	 Describe the desirable occlusal contact relationships Enumerate the methods of establishing occlusal relationships Select appropriate materials for posterior teeth Understand the jaw relations for a mandibular removable partial denture opposing a maxillary complete denture 	Lecture	MCQs, OSCE
28.	Initial placement, adjustment and servicing of the removable partial denture	 Identify any adjustments to the bearing surfaces of denture bases Identify any interference from denture framework Adjust the occlusion in harmony with natural and artificial dentition Cite necessary instructions to the patients 	Lecture	MCQs, OSCE

29.	Repairs and additions to removable partial dentures	 Manage a case with broken clasp arms Manage a case with fractured occlusal rests Manage a case with distortion or breakage of other components— major and minor connectors Manage a case with loss of a tooth or teeth not involved in the support or retention of the restoration Manage a case with loss of an abutment tooth necessitating its replacement and making a new direct retainer 	Lecture	MCQs, OSCE
30.	Temporary removable partial dentures	 Outline the scope of temporary dentures Discuss different designs of temporary partial dentures Recall the effects on appearance, space maintenance and occlusal relationships Implement procedures to condition the patient for wearing a partial denture Understand the procedure for placement of temporary dentures 	Lecture	MCQs, OSCE

	FINAL YEAR BDS				
s. No.	ΤΟΡΙϹ	LEARNING OBJECTIVES By the end of final year BDS, the student should be able to:	MODE OF TEACHING	ASSESSMENT METHOD The students will be assessed during, mid and end of rotation	
01	Introduction to Removable partial denture; Partially edentulous patient's epidemiology, physiology & terminology.	 Define the following Removable partial denture Cast partial denture Abutment Retainer extra coronal partial denture tooth supported RPD tooth tissue supported RPD temporary RPD Interim denture Transitional denture Treatment denture Centric relation Centric relation Support Retention Reciprocation Bracing Appliance Stability Discuss the reasons and sequelae of partial tooth loss in detail Describe the benefits of an RPD Describe the tissue damages associated with RPDs Explain the need and demand of removable partial denture treatment. 	I.L. S.G.D	Class Test MCQs	

2	Applied anatomy	Discuss the Clinical application	I.L.	Class
	and physiology of	of anatomy of oral cavity	S.G.D	Test
	oral cavity	 Idenify the various maxillary and mandibular landmarka 	Clinical	MCOc
		mandibular landmarks	Demo	MCQS
	Classification of partially edentulous arches.	 Describe the requirements of an acceptable method of classification of RPDs Describe classification system based on Support Describe Bailyn, Skinner and Cummer classification Identify different Kennedy's classifications along with modifications Elaborate Applegate's rules for applying the Kennedy's classification 	Study Casts	
03	Oral manifestations of local and systemic diseases	 Discuss the following: Problem related to xerostomia Problem related to poor healing Problem related to osteoporosis Problem related to osteopenia Problem related to autoimmune diseases 	I.L. S.G.D Clinical Demo	ClassTe st MCQ
04	History, Examination, Diagnosis and treatment planning	 Outline introduction to history taking Construct medical and dental history taking: Define the significance of medical history taking Explain extra oral examination of a prosthodontic patient in detail Explain intra oral examination of a prosthodontic patient in details: (especially in terms of Saliva, Existing teeth, 	I.L S.G.D Clinical Demo	Class Test MCQs OSCE

		 Occlusion, midline, occlusal stops, periodontal Condition, Tooth surface loss) Describe radiographic examination with respect to the following: Crown to root ratio periapical pathology retained residual roots thickness of mucosa bone support and quality root configuration of abutment teeth Define Diagnostic cast, its procedure and purpose along with the diagnostic findings. Explain differential diagnosis with indications for fixed partial denture and removable partial denture in detail. Explain on the basis of diagnostic findings, how to choose between complete denture and removable partial denture 		
05	Biomechanics of removable partial dentures	 Describe the bio mechanical consideration and design solutions for an RPD Describe possible movements of an RPD Discuss the concept of Lever 1 Lever 2 Lever 3 Discuss the concept of differential support Describe the role of periodontal ligaments in removable partial denture. 	I.L S.G.D	Class Test MCQs OSCE

06	Connectors (major	 Identify the components of a 	I.L	Class
	and minor	removable partial denture.	800	Toot
	connectors)	 Define Major connector. 	3.G.D	Test
		 Enlist maxillary major 	Clinical	MCQs
		connectors.	Demo	OSCE
		 Enlist mandibular major 	Study Casts	
		connectors.	y -	
		List the location and ideal		
		requirements for each major		
		connector.		
		Discuss the indications and		
		 Explain design considerations 		
		for major connectors		
		Define Minor connectors		
		 Enlist the types of minor 		
		connectors.		
		 Describe the function, form and 		
		locations of different minor		
		connectors.		
		Define tissue stops and finishing		
		Index tissue stops		
		Discuss finishing lines		
07	Rests and Rest	Define rest and rest seat.	I.L	Class Test
	Seats	 Name the types of rests and rest 	SCD	
		seats.	3.6.0	M00-
		 Describe the form of occlusal rest 	Clinical	MCQS
		and rest seat in detail.	Demo	OSCE
		 Discuss the following types of rest 	Study Casts	
		wrt the form, indications, and		
		Capine rest		
		-Gamme rest		
		-Incisal rest		
		-Internal rest		
~~~	Dine et us ta is	- Define direct active a		Olasa
υð	Direct retainers	<ul> <li>Define direct retainer.</li> <li>Evaluation the means of achieving</li> </ul>	I.L	Class
		direct and indirect retention in	S.G.D	Test
		removable partial dentures.	Clinical	MCQs
		Discuss the role of direct	Demo	OSCE
		retainer in prosthesis movement	Study Casts	USUE
		control		
		<ul> <li>Classify direct retainers.</li> </ul>		

		<ul> <li>Differentiate between Extracoronal and Intracoronal retainers.</li> <li>Discuss the types, Indications, Contraindications, Advantages and disadvantages of Intracoronal retainers</li> <li>Discuss the types, Indications, Contraindications, Advantages and disadvantages of Extracoronal retainers</li> <li>Analyze tooth contours for retentive clasps</li> <li>Describe functional requirements of clasp</li> <li>Discuss the criteria for selecting a given clasp design.</li> <li>Discuss the reciprocal arm function</li> <li>List the types and basic parts of clasp assemblies.</li> <li>Explain basic principles of clasp design</li> </ul>		
09	Indirect retainers	<ul> <li>Define Indirect Retainer.</li> <li>Describe factors influencing effectiveness of indirect retainer.</li> <li>Discuss the forces acting on the denture</li> <li>Explain the concept of Fulcrum line.</li> <li>Discuss the auxiliary functions of indirect retainers</li> <li>Describe the different types of indirect retainers: Auxiliaryocclusal rests.</li> <li>Canine rests.</li> <li>Canine extension from occlusal rests.</li> <li>Cingulumbars(continuous bars)and linguoplates.</li> <li>Modification areas.</li> </ul>	I.L S.G.D Clinical Demo Study Casts	Class Test MCQs OSCE

		Rugae support.		
10	Denture base considerations.	<ul> <li>Define Denture base.</li> <li>Discuss the ideal materials and requirements of denture base</li> <li>Explain the functions of denture bases in terms of: Tooth supported partial denture base</li> <li>Distal extension partial denture base</li> <li>Discuss the methods of attaching denture bases.</li> <li>Enumerate the advantages and disadvantages of metal and acrylic denture bases.</li> <li>Describe the methods of attaching artificial teeth:</li> <li>Define Relining and discuss the need for relining a RPD</li> <li>Explain "Stress breakers"</li> </ul>	I.L S.G.D	Class Test MCQs
11	Principles of removable partial denture design.	<ul> <li>Identify difference in prosthesis support and the influence on design</li> <li>Differentiate between two main types of removable partial denture, in terms of support, impression registration and clasp design.</li> <li>Elaborate the essentials of partial denture design.</li> <li>Explain the following components of partial denture design <ul> <li>Tooth support</li> <li>Ridge support.</li> <li>Major and minor connectors.</li> <li>Direct retainer for tooth supported partial denture</li> <li>Direct retainer for distal extension partial denture.</li> <li>Stabilizing components</li> <li>Guiding plane.</li> <li>Indirect retainers.</li> </ul> </li> </ul>	I.L. Tutorial S.G.D Clinical Demo Study Casts	Class Test MCQs OSCE

		<ul> <li>Describe the various systemic approaches to partial denture design:         <ul> <li>Class I removable partial denture.</li> <li>Kennedy class II removable partial denture</li> <li>Kennedy class III removable partial denture</li> <li>Kennedy class III removable partial denture</li> <li>Kennedy class IV partial denture</li> </ul> </li> </ul>		
12	Dental Surveying	<ul> <li>Define a Surveyor</li> <li>Describe the purposes of Dental surveyor.</li> <li>Discuss and compare the different types of dental surveyor</li> <li>List the parts of dental surveyor.</li> <li>Illustrate the types of survey lines.</li> <li>Discuss the factors that determine path of placement and removal</li> <li>Discuss the Guide planes, their types and functions</li> <li>Explain the procedure of surveying a diagnostic cast (all steps) in detail.</li> <li>Explain the procedure of surveying a master cast (all steps) in detail</li> <li>Explain block out in detail</li> </ul>	I.L. S.G.D Study Casts Lab teaching	MCQs OSCE
13	Preparation of mouth and abutment for removable partial dentures	<ul> <li>Discuss the oral surgical procedures may be required for removable partial dentures?</li> <li>Discuss the management of abused and irritated tissue</li> <li>Explain the use of tissue conditioning materials.</li> <li>Enlist the periodontal preparations required for removable partial dentures</li> <li>Classify the abutment teeth.</li> </ul>	I.L. S.G.D Study Casts Clinical Demo	Class Test MCQs

		<ul> <li>Explain the sequence of abutment preparation on sound teeth and existing restorations</li> <li>Define guide planes</li> <li>Discuss the preparation of guide planes.</li> <li>Outline the preparation of rest seats.</li> <li>Explain the technique to create an undercut.</li> <li>Elaborate abutment preparation using crowns.</li> <li>Elaborate abutment preparation.</li> <li>Explain splinting of abutment teeth.</li> </ul>		
14	Impression techniques and modification	<ul> <li>Classify impression materials.</li> <li>Enlist the Impression materials used for RPD.</li> <li>Describe Anatomic or functional form of impression</li> <li>Discuss indication of functional impression.</li> <li>Identify the different types of impression trays.</li> <li>Explain the impression procedure for an RPD in detail.</li> <li>Explain the following Impression techniques:</li> <li>Mclean's physiologic impression technique</li> <li>Functional relining method Selective pressure impression Altered cast technique</li> <li>Modifications of altered cast technique.</li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs OSCE
15	Support for the Distal Extension Denture Base Trial of metal framework	<ul> <li>Discuss the factors influencing the support of a Distal Extension Denture Base</li> <li>Describe the protocol for an RPD framework try in and adjustment.</li> <li>Explain fitting of frame work to teeth and supporting structures.</li> <li>Explain fitting of framework to apposite occlusion</li> </ul>	I.L. S.G.D I.L. S.G.D Clinical Demo	Class Test MCQs Class Test MCQs
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		<ul> <li>Explain how discrepancies will be corrected in a metal framework</li> <li>Discuss the framework finishing.</li> </ul>		
17	Occlusal relations for removable partial denture. (Maxillo- mandibular relations)	<ul> <li>Explain desirable occlusal contact relationship for removable partial denture.</li> <li>Discuss methods for establishing occlusal relationship</li> <li>Demonstrate the use of facebow.</li> <li>Elaborate the use of articulators.</li> <li>Explain articulation techniques and discuss splint cast technique in detail.</li> <li>Establish jaw relations for mandibular removable partial denture opposing a maxillary complete denture</li> </ul>	I.L. S.G.D Clinical Demo Lab teaching	Class Test MCQs OSCE
18	Selection of teeth	<ul> <li>Determine the size, form and color of anterior teeth</li> <li>Determine the size and form of posterior teeth</li> </ul>	I.L S.G.D Clinical Demo	Class Test MCQs

19	Laboratory	- Describe the procedure of stone	I.L.	Class
	procedures.	cast duplication	SGD	Test
		- Explain the procedure of	0.0.0	1001
	1 Wayup and	construction of wax pattern and	Clinical	MCQs
	Casting	casting procedures	Demo	
	Ousting	- Discuss the Spruing, investing,		
		burnout, casting,		
		removing the casting from investment and finishing.	Lab teaching	
	2. Arrangement of teeth. 3.Processing and finishing denture.	<ul> <li>Demonstrate the fabrication of record bases.</li> <li>Demonstrate anterior teeth arrangement.</li> <li>Demonstrate posterior teeth arrangement.</li> <li>Demonstrate Characterization of teeth</li> <li>Discuss the arrangement of teeth to an occluding surface.</li> <li>Demonstrate the process of waxing and flasking of removable partial denture before processing acrylic resin bases.</li> <li>Explain remounting of denture for occlusal corrections.</li> <li>Demonstrate denture polishing.</li> </ul>		
20	Insertion and post	Explain the adjustment to	I.L.	Class
	insertion	denture bearing area.	SGD	Test
	instructions and recall.	<ul> <li>Describe the occlusal interferences from denture</li> </ul>	Clinical	MCQs
		framework	Demo	OSCE
		Evaluate occlusal		USCL
		interferences		
		<ul> <li>And adjustment of occlusion in harmony with natural and artificial dentition.</li> </ul>		
		Communicate post-insertion		
		instructions to the patient		
		<ul> <li>Discuss the patient's follow up</li> </ul>		
		services required after insertion visit.		

21	Relining,	<ul> <li>Define Relining and rebasing</li> </ul>	I.L.	Class
	Rebasing and	<ul> <li>Discuss the indications of relining</li> </ul>	SGD	Test
	Repair	of tooth supported partial denture	0.0.0	1031
		Discuss the procedure of relining	Clinical	MCQs
		of tooth supported partial denture	Demo	OSCE
		Discuss the indications of religing of tooth tissue supported		
		partial denture		
		<ul> <li>Discuss the different procedures of</li> </ul>		
		relining of tooth tissue supported		
		partial denture		
		Describe the methods of		
		restabilising occlusion on a relined		
		<ul> <li>Discuss the repair of denture wrt:</li> </ul>		
		Broken Clasp arms Fractured		
		occlusal rest		
		Distortion or breakage of Major/ minor connector		
		Loss of tooth/ tooth		
22	Types of partial	Define Interim partial denture.	I.L.	Class
	denture	<ul> <li>Explain Interim partial denture indications, impression, laboratorial</li> </ul>	S.G.D	Test
		procedure, insertion and follow up.	Clinical	MCQs
		Define Every denture.	Demo	
		Explain Every denture		
		indication, impression,		
		insertion and follow up		
		Define Spoon denture		
		Explain Spoon denture		
		indications, impression,		
		laboratorial procedure,		
		insertion and follow up.		
		Define Swing lock partial     depture		
		<ul> <li>Explain Swing lock partial</li> </ul>		
		denture indications,		
		impression, laboratorial		

	procedure, insertion and follow up.	

0 1	Introduction to Prosthodontics	<ul> <li>Define Prosthodontics</li> <li>Discuss the divisions in Prosthetic dentistry</li> <li>Discuss the objectives of prosthetic dentistry</li> <li>Define         <ul> <li>Oconventional complete denture</li> <li>Single complete denture</li> <li>Immediate complete dentures</li> <li>Implant supported complete dentures</li> <li>Retention</li> <li>Stability</li> <li>Support</li> </ul> </li> </ul>	I.L. S.G.D	Class Test (MCQs)
02	Applied anatomy and physiology of complete denture	<ul> <li>Discuss the anatomy and physiology of extraoral landmarks of prosthodontics importance</li> <li>Inter-pupillary line</li> <li>Ala-tragus line</li> <li>Canthus-tragus line</li> <li>Nasolabial sulcus</li> <li>Vermillion border</li> <li>Philtrum</li> <li>Modiolous</li> <li>Angle of the mouth</li> </ul>	I.L. S.G.D Study casts Clinical Demo	Class Test MCQs OSCE

	<ul> <li>Describe anatomical landmarks</li> </ul>	
	common to both maxillary and	
	mandibular arches (intraoral)	
	o In Maxilla:	
	- Residual ridge	
	- Maxillary tuberosity	
	- Palate	
	- Mid-palatine raphae	
	- Incisive nanilla	
	- Palatine rugae	
	Torus palatinus	
	- Totus palatinus	
	- Fovea palatiliae	
	- Post palatal seal	
	- Hamular notch	
	- Cuspia eminence	
	<ul> <li>Zygomatic process</li> </ul>	
	o In Mandible:	
	- Residual ridge	
	- External oblique ridge	
	- Buccal shelf area	
	- Mental foramen	
	- Retromolar pad area	
	- Mylohyoid ridge	
	- Torus mandibularis	
	Internal oblique ridge	
	Genial tubercle	
	<ul> <li>Identify various anatomic</li> </ul>	
	landmarks located in maxilla	
	<ul> <li>Identify various anatomic</li> </ul>	
	landmarks located in mandible	
	<ul> <li>Define and enlist primary and</li> </ul>	
	secondary denture stress bearing	
	areas	
	<ul> <li>Discuss the relief areas</li> </ul>	
	o Describe the border structures that limit	
	the periphery of the denture	
	- Describe the border structures	
	that limit the periphery of the	
	denture	
	MAXILLA	
	<ul> <li>I abial frepum</li> </ul>	
	$\circ$ Labial vestibule	
	<ul> <li>Buccal frepum</li> </ul>	

			Buccal vestibule Hamular notch Posterior palatal seal Muccogingival fold Fovea palatinae <b>MANDIBLE</b> Labilafrenum Labial vestibule Buccalfrenum Buccal vestibule Lingual frenum Alveololingual sulcus Retromolar pad Pterygomandibularraphae		
03	Classifications of various anatomical structures	•	Classify frontal face form (House classification) and lateral face form (Angle) Classify Residual ridge according to contour (atwood) and morphology (mc garry et al) Classify lip according to Length, thickness, mobility, support Classification of the tongue according to size and position Classify frenal and border muscle attachments Classify hard and soft palate	I.L. S.G.D Clinical Demo	Class Test MCQs OSCE
0 4	Identification and evaluation of patients	• • ii. iii. iv. v. vi. vii. vii. vii. x. xi.	Record brief patient's history Examine the Patient clinically wrt: <b>Extraoral examination:</b> Symmetry Face form Deviation/ deflection Lip Smile line (low, avg, high) Wrinkles Lateral face form Mouth opening Rest vertical dimension TMJ (palpation, movements, sounds) Muscles of mastication	I.L. S.G.D Study casts Clinical Demo	Class Test MCQs, OSCE

	ГГ		
		xii. Lymph nodes	
	n	traoral Examination	
	) ) X X	<ul> <li>kiii. Oral aperture</li> <li>kiv. Oral mucosa examination</li> <li>xv. Tongue</li> <li>xvi. Saliva</li> <li>vii. Maxillary arch (Shape/ form, Contour/ cross section, Frenal and border muscle attachment, Palatal vault, Soft palate (classification), Tuberosity, Median palatine raphe and tori)</li> <li>viii. OMandibular arch (Shape/ form, Contour/ cross section, Frenal and border muscle attachment, retromylohyoid fossa, floor of the mouth and tori)</li> </ul>	
	) X X) X)	Others         xix.       Inter-arch space         xx.       Bony prominences         xxi.       Gag reflex         xii.       Undercuts         xiii.       Ridge relationships         xiv.       Outline the Treatment Plan         •       Adjunctive care         •       Prosthodontic phase	
0 5	Gerodontology	<ul> <li>Discuss the Impact of edentulism in old age (Mucosa, Bone, Saliva, Jaw movement, Taste and smell sensations, Nutrition)</li> <li>Describe the consequences of bone loss in edentulous patients (anatomical, soft tissue, esthetics, psychological)</li> <li>Discuss various effects of medication</li> <li>Discuss various medical conditions having oral manifestation</li> <li>Explain the Principles of prosthodontics procedures in geriatric patients</li> </ul>	Class Test MCQs

0	Systemic health	Describe oral-systemic	I.L.	Class Test
6	aspects and nutritional considerations for edentulous patients	<ul> <li>considerations that may influence an adaptive prosthodontic experience</li> <li>Mucosal conditions</li> <li>esiculoerosive, Systemic lupus erythematosus, Burning mouth syndrome)</li> <li>Oral movement disorders</li> <li>Salivary dysfunction (Hyposalivation, Hypersalivation)</li> <li>Xerostomia</li> <li>Sjogren's syndrome</li> <li>Diabetes</li> <li>Discuss the Nutrition Guidelines for Patients Undergoing Removable Prosthodontic Treatment</li> <li>Describe the Risk Factors for Malnutrition in Patients with Dentures</li> </ul>	S.G.D Clinical Demo	MCQs OSCE
0 7	Role of saliva in completely edentulous patients	<ul> <li>Discuss the following</li> <li>a. Salivary flow</li> <li>b. Viscosity</li> <li>c. Medical conditions affecting the salivary flow and viscosity</li> <li>d. Xerostomia</li> <li>Describe the role of saliva in completely edentulous patients</li> <li>Explain the Management of altered salivary flow (xerostomia)</li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs
0 8	Biomechanics of complete denture prosthodontics	<ul> <li>Discuss the Factors that affect the successful denture fabrication?</li> <li>Define Retention</li> <li>Explain the factors by which retention can be achieved in complete dentures (anatomic, physical, physiological, mechanical, muscular, dislodging forces)</li> <li>Define stability</li> <li>Discuss the factors affecting the stability of complete dentures</li> <li>Define support</li> </ul>	I.L. S.G.D	Class Test MCQs,

		Discuss the factors affecting the support of complete dentures		
0 9	Sequalae caused by wearing complete denture	<ul> <li>What are the Direct Sequelae Caused by Wearing Removable Prostheses (Complete and partial denture)?</li> <li>(Mucosal reactions, Oral galvanic currents, altered taste perception, burning mouth syndrome, Gagging, Residual ridge reduction, Periodontal disease (abutments), Caries (abutments), Denture induced stomatitis, Flabby ridge, Traumatic ulcer, Epulisfissuratrum, Angular cheilitis, Candidiasis)</li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs, OSCE
		<ul> <li>Define Denture irritation hyperplasia, its causes, mechanism and management</li> <li>Enlist the etiological factors causing cheek biting and Discuss its management</li> <li>Enlist the etiological factors causing traumatic ulcers</li> <li>Discuss the management of traumatic ulcers</li> <li>Define Denture irritation hyperplasia, its cause mechanism and management</li> <li>Define Denture stomatitis.</li> <li>Describe the etiological factors causing DS</li> <li>Discuss the Factors predisposing to candida associated DS</li> <li>Explain the management and preventive measures</li> <li>Describe Kelly's Syndrome. Discuss its features</li> <li>Describe the Indirect Sequelae Caused by Wearing Removable Prostheses: (Complete or Partial Dentures)</li> <li>Control the sequelae caused by the use of Complete Dentures</li> </ul>		

10	Mouth preparations including pre- prosthetic surgery	<ul> <li>Describe in detail the nonsurgical methods to improve the patient's denture foundation</li> <li>Rest for denture bearing area</li> <li>Occlusal correction</li> <li>Good nutrition</li> <li>Conditioning of patient's musculature</li> <li>Enlist the preprosthetic surgical methods to improve the patient's denture foundation</li> <li>Discuss the Indications for maxillary tori removal</li> <li>Manage pressure on mental foramen in case of extreme residual ridge resorption</li> <li>Explain various methods used for the enlargement of the Denture bearing areas?</li> <li>Vestibuloplasty</li> <li>Ridge augmentation</li> </ul>	I.L S.G.D Clinical Demo	Class Test MCQs,
11	Impressions, theories and techniques	<ul> <li>Define impression materials? What are the various materials suitable for recording CD impressions</li> <li>Discuss the optimal qualities for prosthodontics impression material</li> <li>Classify impression material on the basis of setting reaction and elasticity</li> <li>Discuss impression materials used for CD in detail</li> <li>Discuss the disinfection of various impression materials</li> <li>Define impression tray? Describe requirements of an ideal impression tray.</li> <li>Classify the impression tray used for CD impression</li> <li>Discuss the requirements of custom tray</li> <li>List the objectives and principles of an impression for complete dentures</li> <li>Define primary impression and discuss the steps involved in recording the primary impression</li> </ul>	I.L. S.G.D Study casts Clinical Demo Lab teaching	Class Test MCQs, OSCE

		<ul> <li>Define secondary impressions.</li> <li>Define border molding</li> <li>List the steps involved in secondary impression procedure (including border molding movements)</li> <li>Describe different Impression techniques for CD</li> <li>Based on mouth opening</li> <li>Based on types of trays used</li> <li>Based on theories of impression</li> <li>Based on purpose of impression</li> <li>Based on material used</li> <li>Enlist lab steps involved after taking secondary impressions</li> </ul>		
12	Maxillomandibu lar relations	<ul> <li>Define maxilla-mandibular relation.</li> <li>Discuss mandibular movements in the frontal sagittal and horizontal planes. (Posselt's Envelope of motion)</li> <li>Discuss the anatomic determinants of mandibular movements.</li> <li>Define the Centric relation, Centric occlusion, rest position, muscular position, intercuspal position, retruded contact position, Excursive movements (working, non- working)</li> <li>Define rest vertical dimension and occlusal vertical dimension.</li> <li>Define the terms record base and occlusal rim.</li> <li>Discuss the materials used for record base and occlusal rims</li> <li>Discuss construction and specifications of maxillary and mandibular occlusal rims</li> <li>Establish the following</li> <li>Labial form of occlusal rims</li> <li>Define Orientation relations? How will you record it</li> <li>Define Vertical relations. What are the different Methods of determining vertical relations</li> </ul>	I.L. S.G.D Clinical Demo Lab teaching	Class Test MCQs, OSCE

		Discuss the different Methods of     determining contributions		
13	Articulations and	Define articulators     Discuss the Uses/ numbers of	I.L.	Class Test
		<ul> <li>Discuss the Uses/ purpose of articulators</li> </ul>	S.G.D	MCQs,
		<ul> <li>Discuss in details various types of articulators</li> </ul>	Clinical Demo	OSCE
		<ul> <li>Classify articulators on the basis of</li> <li>Adjustability</li> </ul>	Lab	
		<ul> <li>Adjustability</li> <li>Based on the theories of occlusion</li> <li>Based on the stability to stimulate jaw movements</li> <li>Differentiate between arcon and non arcon type's articulators.</li> <li>List parts of semi adjustable articulators.</li> </ul>	Teaching	
14	Dental	Describe face bow and its uses.	I.L.	Class Test
	Facebow	<ul> <li>Describe various types of face bows.</li> </ul>	S.G.D	MCQs,
		<ul> <li>Enlist the parts of facebow</li> <li>Discuss the transfer of face bow record on to semi adjustable articulator and mounting the casts on a semi adjustable articulator.</li> </ul>	Clinical Demo	OSCE
15	Selection and	Define neutral zone.	I.L.	Class Test
	teeth	<ul> <li>Define over jet and overbite.</li> <li>Define incisal guidance.</li> </ul>	S.G.D	MCQs,
		Explain the nine parameters of smile	Clinical Demo	OSCE
		• Discuss factors responsible for size, shape, color, shade of teeth	Lab	
		selection	teaching	
		used for denture teeth		
		Discuss the ten landmarks for CD teeth setup.		
		Discuss anterior and posterior		
		<ul> <li>Discuss the significance of</li> </ul>		
		compensating curve in teeth setup		
		Discuss the setup for retrognathic and prognathic facial skeletons.		

		<ul> <li>Explain the advantages and disadvantages of anatomic teeth and non-anatomic teeth</li> </ul>		
16	Concepts of Occlusion in complete dentures	<ul> <li>Define occlusion, centric occlusion and the balanced occlusion.</li> <li>Discuss the concepts of occlusion in CD patients (Types of occlusion) Unilateral Balanced occlusion</li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs OSCE
		Mono plane(non- balance) occlusion Lingualized		
		occlusion		
		<ul> <li>Describe the Importance of balanced occlusion</li> <li>Describe the Advantages, disadvantages, indications, contraindications of different types of occlusion</li> <li>Discuss the various Factors influencing balanced occlusion</li> <li>Condylar guidance</li> <li>Incisor guidance</li> <li>Occlusal plane</li> <li>Cuspal angulation</li> <li>Compensatory curves</li> </ul>		
17	Trial and	• List the objectives of the try in of	I.L.	Class Test
	insertion	<ul> <li>the trial denture.</li> <li>Evaluate the individual trial</li> </ul>	S.G.D	MCQs,
		<ul> <li>denture in mouth</li> <li>Discuss in detail the final processing of the complete dentures.</li> <li>Discuss in detail the materials used as denture base for CD</li> <li>Describe different types of curing cycles.</li> <li>Describe the role of PIP in adjustment of denture base</li> <li>Discuss the factors responsible for errors in occlusion? How will you correct them</li> <li>List post insertion instructions.</li> </ul>	Clinical Demo lab teaching	OSCE

		<ul> <li>Discuss post insertion follow up (complaints)</li> </ul>		
18	Speech considerations with complete dentures	<ul> <li>Discuss the role of teeth and other structures in speech production</li> <li>Describe the methods for speech analysis</li> <li>Discuss the Prosthetic considerations in complete edentate patient using complete dentures.</li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs,
19	Relining, Rebasing and repair	<ul> <li>ist indications and contraindication of relining and rebasing.</li> <li>Differentiate between relining and rebasing.</li> <li>Describe lab and clinical steps involved in relining and rebasing.</li> <li>Describe chairside technique of relining</li> <li>list causes of denture fracture.</li> <li>Describe different methods of denture repairing.</li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs, OSCE
20	Overdentures	<ul> <li>Define over dentures.</li> <li>List types of over dentures.</li> <li>List advantages and disadvantages of over dentures.</li> <li>List indications and contraindications of over dentures.</li> <li>Discuss the treatment planning for overdenture</li> <li>Describe clinical and laboratory procedures related to over dentures.</li> <li>Describe insertion, follow up and maintenance of over dentures.</li> </ul>	I.L. S.G.D Study casts Clinical Demo	Class Test MCQs, OSCE

21	Immediate	Define immediate denture.	I.L.	Class Test
	Dentures	<ul> <li>List types of immediate denture.</li> <li>List indications of immediate dentures.</li> <li>List contraindications of immediate denture.</li> <li>Discuss Clinical and laboratory procedures related to immediate dentures</li> <li>Discuss the preop and post op instructions given to the patients</li> <li>Discuss multi-disciplinary approach including care during surgery related to immediate denture.</li> <li>Describe insertion, follow up and maintenance of immediate dentures</li> </ul>	S.G.D Study casts Clinical Demo	MCQs OSCE
22	Single complete dentures	<ul> <li>Define single complete dentures</li> <li>Discuss the problems related to the single complete denture</li> <li>Discuss the common occlusal disharmonies and ways to adjust them.</li> <li>Describe the methods to achieve balanced occlusion in single CD</li> <li>Explain the tooth modifications techniques to harmonize occlusion in single CD patient</li> <li>Enlist the Occlusal materials for single complete dentures.</li> </ul>	I.L. S.G.D Demonstration Clinical Demo C.B.L	Class Test MCQs OSCE
23	Management of special prosthodontic conditions	<ul> <li>Define Combination syndrome. Enlist its etiological factors. How will you diagnose and manage the case?</li> <li>Define xerostomia. Enlist its etiological factors. What is the general and prosthodontic management of a xerostomic patient</li> <li>Discuss the various Factors affecting the resorption of residual ridge</li> <li>Manage a case with extreme residual ridge resorption</li> </ul>	I.L. S.G.D Clinical Demo	MCQs

<ul> <li>Discuss the management of an edentulous patient having diabetes.</li> <li>Discuss the management of an edentulous patient having hypertension.</li> </ul>	
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0	An introduction to	Define the following	I.L.	Class Test
1	fixed	terms: Fixed	SCD	MCOs
	Prosthodontic s	prosthodontics	5.6.0	WICQ5
		<ul> <li>crown and bridge</li> </ul>		
		● Inlay		
		Onlay		
		<ul> <li>laminated veneers</li> </ul>		
		Partial Veneer crown		
		full veneer crown		
		retainers		
		<ul> <li>connectors</li> </ul>		
		<ul> <li>pontics</li> </ul>		
		<ul> <li>abutment</li> </ul>		
		• saddle area		
		Enumerate indications		
		and contraindications for		
		crowns		
		Enumerate indications		
		and contraindications		
		for FDPs		
		Describe the different		
		components of FDP		

02	History, Examination, Diagnosis and treatment planning	<ul> <li>Discuss how history will be recorded</li> <li>Explain and demonstrate extra and intraoral examination of patient</li> <li>Discuss the key points of radiographic examination that include:         <ul> <li>Crown to root ratio</li> <li>periapical pathology</li> </ul> </li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs OSCE
		<ul> <li>thickness of mucosa</li> <li>bone support and quality</li> <li>root configuration teeth</li> <li>Discuss the cast examination in detail</li> <li>Explain Differential Diagnosis using Kennedy classification</li> </ul>		
03	Treatment planning of fixed dental prosthesis	<ul> <li>Describe the adjunctive care prior to fixed replacements:</li> <li>i. Elective endodontic procedure</li> <li>ii. Crown lengthening procedure</li> <li>iii. Restorations</li> <li>iv. Correction of occlusal plane</li> <li>v. Scaling and root planning</li> <li>Discuss the various fixed treatment options</li> <li>Discuss the Design consideration for individual conditions in FDP</li> <li>Discuss the various factors involved in the treatment planning of FDP</li> <li>Explain the criteria for the selection of retainers</li> <li>a. Alignment of abutment teeth and retention</li> <li>b. Appearance</li> <li>c. Condition of abutment teeth</li> <li>d. Cost</li> <li>e. Preservation of tooth structure</li> <li>Discuss the criteria for the selection of abutments?</li> </ul>	I.L. S.G.D Clinical Demo Study casts	Class Test MCQs OSCE

d. Root support e. Periodontal ligament area f. Assessment of pulpal health	
Discuss the different types of abutment	
<ul> <li>Healthy/ideal abutments</li> <li>Cantilever abutments</li> <li>Pier abutments</li> </ul>	
<ul> <li>Tilted abutments</li> <li>Extensively damaged abutments</li> <li>Implant abutments</li> </ul>	

04	Classifications and types of fixed partial dentures	<ul> <li>Classify fixed partial dentures</li> <li>Describe FDP on the basis of abutment teeth</li> <li>Discuss FDP on the basis of design in detail</li> <li>Discuss fixed partial denture on the basis of material</li> </ul>	I.L. S.G.D	Class Test MCQs
0 5	Principles of tooth preparation	<ul> <li>Enlist various partial and full coverage indirect restorations.</li> <li>Explain the principles tooth preparation in reference to:</li> <li>a. Biological consideration</li> <li>b. Mechanical consideration</li> <li>c. Esthetic consideration</li> </ul>	I.L. S.G.D Clinical Demo	MCQs OSCE
0 6	Tooth preparation (partial coverage)	<ul> <li>Enlist various partial and full coverage indirect restorations.</li> <li>Describe the indications and contraindications for provision of: <ul> <li>a. Inlay</li> <li>a. Onlay</li> </ul> </li> <li>Describe the clinical assessment required and the steps of preparation for inlay and onlay.</li> <li>Enlist materials available for these restorations.</li> <li>Discuss indications and contraindications for veneers.</li> </ul>	I.L. S.G.D Clinical Demo Phantom head	Class Test MCQs OSCE
		<ul> <li>Describe the diagnostic procedures involved in treatment planning.</li> <li>Explain the importance of quality and quantity of enamel for predictable bonding.</li> <li>Describe tooth preparation, soft tissue management and impression making for veneers.</li> </ul>		

0	Tooth preparation	•	Describe the indications and	I.L.	Class Test
7	(complete		contraindications for the following types:	S.G.D	MCQs OSCE
	coverage)	0	Porcelain fused to metal crown	Clinical Demo	
		0	All metal crown	Phantom head	
		0	All ceramic crown	Filantoni neau	
		•	Describe the advantages and		
			disadvantages for the following		
			types:		
		0	Porcelain fused to metal crown		
		0	All metal crown		
		0	All ceramic crown		
		•	Describe the clinical assessment		
			required and the steps of		
			preparation for:		
		0	Porcelain fused to metal crown		
		0			
0	Tissue	•	Explain the prerequisites of	11	Class Test
8	management		recording impression for Fixed	1	
Ū	and impression		dental prosthesis	S.G.D	MCQs OSCE
	making	•	Discuss the various techniques for	Clinical Demo	
			fluid control and soft tissue		
			management		
		•	Discuss various methods of		
			tissue displacement in detail		
		•	Enlist the various impression		
			materials used in FDP		
		•	Compare different impression		
			materials in fixed prosthodontics		
		•	Describe the following		
			Impression procedures		
		а.	Double mix technique		
		b.	Single mix technique		
		C.	Triple tray technique		
		•	Discuss disinfection of		
			various impression		
			materials		

0 9	Temporization and provisional restorations	<ul> <li>Discuss the various factors to be considered in making an interim restoration</li> <li>Biological</li> <li>Mechanical</li> <li>esthetics</li> <li>List the ideal requirements of provisional restorations</li> <li>Describe different materials used to fabricate provisional restorations</li> <li>Discuss different techniques used to fabricate provisional restorations</li> <li>Differentiate between direct and indirect techniques for anterior and posterior teeth</li> </ul>	I.L. S.G.D Clinical Demo	MCQs
10	Lab procedures involved in fabrication of FDP	<ul> <li>List different laboratory steps in construction of FDP</li> <li>Describe the following Lab procedures</li> <li>Waxing</li> <li>Spruing</li> <li>Investing</li> <li>Burnout</li> <li>Casting</li> <li>Soldering</li> <li>Ceramic veneering</li> <li>Discuss the different die materials used for fixed dental prosthesis</li> <li>Enlist different die and casts system</li> <li>Describe fabrication of working casts and dies</li> <li>Discuss wax pattern fabrication casting and soldering</li> </ul>	I.L. S.G.D Clinical Demo Lab Teaching	MCQs
11	Pontic design	<ul> <li>Define Pontic</li> <li>Classify ridge defects according to siberts</li> <li>Discuss the factors effecting pontic design <ul> <li>Available space</li> <li>Contour of ridge</li> <li>Amount of occlusal load</li> </ul> </li> <li>Discuss various biological, mechanical and esthetics considerations for successful pontic design</li> <li>Classify pontics and discuss in detail all its types</li> </ul>	I.L. S.G.D	Class Test MCQs OSCE

				· · · · · · · · · · · · · · · · · · ·
12	Shade selection	<ul> <li>Discuss factors influencing shade selection.</li> <li>Describe guidelines for accurate shade matching.</li> <li>Discuss various methods of shade selection.</li> </ul>	I.L. S.G.D Clinical Demo	MCQs
13	Dental cements and crown, bridge cementation	<ul> <li>Define and Classify different luting agents</li> <li>Describe properties of an ideal luting agent</li> <li>Describe indications of different luting agents</li> <li>Discuss different cementing materials briefly (properties, merits and demerits of materials)</li> <li>Discuss the latest innovations including CAD-CAM technology</li> <li>Discuss factors to assess at try-in stage</li> <li>Describe the clinical procedure for cementation of inlay onlay, veneer and full coverage</li> <li>Discuss the importance of Post cementation follow up</li> <li>Discuss the possible complications and management</li> <li>Explain failures in fixed partial dentures</li> </ul>	I.L. S.G.D Clinical Demo	MCQs
14	Resin bonded fixed dental prosthesis	<ul> <li>Define resin bonded bridge</li> <li>Identify resin bonded bridge and its types</li> <li>Give its indications and contraindications</li> <li>Discuss the advantages and disadvantages</li> <li>Describe the types of resin</li> </ul>	I.L. S.G.D Clinical Demo	Class Test MCQs OSCE

		bonded bridges:		
0	Introduction to implants	<ul> <li>Define Dental implants</li> <li>Discuss the advantages, disadvantages, indications and contraindications of dental implants.</li> <li>Discuss different types of implants</li> <li>Describe the components of dental implant</li> <li>Describe different biocompatible implant materials</li> <li>Discuss limitations of dental implants</li> <li>Identify different types of implants and its components</li> </ul>	I.L. S.G.D	MCQs OSCE

02	Osteointegration and biocompatibility	<ul> <li>Describe osteointegration and discuss Mechanism of osteointegration.</li> <li>Discuss the different stages of Stages of osteointegration.</li> <li>Discuss the Theories of bone to implant interface</li> <li>Fibro-osseous integration</li> <li>Osteointegration</li> <li>Describe the various Factors influencing the osteointegration (patients and surgical related)</li> <li>Discuss the Advantages, disadvantages, indications and contraindications of hydroxyapatite crystal and titanium plasma coating</li> <li>Enlist the different Methods to check osteointegration.</li> <li>Percussion test</li> <li>Radiographs</li> <li>Probing depth</li> </ul>	I.L. S.G.D	MCQs
0 3	Prosthodontic options	<ul> <li>Describe various implant supported restorations that can be used for replacement of missing teeth</li> </ul>	I.L. S.G.D	OSCE
		<ul> <li>Explain briefly the clinical and laboratory procedure of implant placement:</li> <li>Describe the impression techniques used for implants</li> <li>Discuss advantages and disadvantages of screw retained and cement retained prosthesis</li> </ul>		

01	Introduction to maxillofacial prosthodontics	<ul> <li>Define maxillofacial prosthodontics</li> <li>Classify and types of congenital and acquired defects</li> <li>Describe Principles governing treatment and management of patients presenting with various defects</li> <li>Define obturators. Discuss the different types of obturators</li> <li>Discuss different methods of retention of an obturator</li> <li>Discuss various cleft palate prosthesis</li> <li>Discuss various facial prosthesis</li> <li>Discuss various facial prosthesis</li> </ul>	I.L. S.G.D	OSCE
01	Theories and principles of occlusion	<ul> <li>Define Occlusion</li> <li>Describe optimum functional occlusion</li> <li>Discuss various Occlusal schemes</li> <li>Canine guided</li> <li>Group function</li> <li>Mutually protected</li> <li>Describe Determinants of occlusal morphology</li> <li>Posterior controlling factors (condylar guidance)</li> <li>Anterior guidance)</li> <li>Vertical determinants of occlusal morphology</li> </ul>	I.L. S.G.D	MCQs

		V. Horizontal determinant of occlusal morphology		
02	Concept, etiology, treatment planning and options	Discuss Etiology of TMDs. Describe Treatment options available for the management of TMDs? Discuss different Occlusal SPLINTS and its indications.	I.L. S.G.D	MCQs

# PRE-CLINICAL AND CLINICAL ROTATIONS

# PROSTHODONTICS ROTATION OF SECOND YEAR BDS

S.NO.	PROCEDURE SKILLS		ASSESSMENT
	By the end of rotation, the 2 nd year students should be able to demonstrate on ideal molds the following:	Teaching via laboratory	The students will be assessed mid- rotation and end-of rotation test
1.	Instruments and lab protocol	Genonstration	
2	Complete denture lab fabrication steps over-view	Teaching on the	Direct observation of procedural skills
3	Maxilla and Mandible model pouring (ideal molds)	poured in the agar molds	Will be assessed
4	Wax-up for base plate formation		during:
5	Investment of the wax up in the flasks		1.daily supervision
6	De-waxing and packing with heat cure acrylic polymer		2.Mid-roation test 3.End of rotation test
7	Fabrication of Maxillary and Mandibular wax occlusal rims		
8	Articulation and mounting of the Maxillary and Mandibular occlusal rims		
9	Selection of anterior and posterior teeth		
10	Arrangement of anterior and posterior teeth		

S.NO.	PROCEDURE SKILLS	TEACHING	ASSESSMENT
		METHODOLOGY	TOOLS
	By the end of rotation, the 3 rd year students should be able to demonstrate on the ideal molds/patient the following:		The students will be assessed mid- rotation and end-of rotation test
1.	Instruments and lab protocol		
2	Removable Partial Denture lab fabrication steps over-view		
3	Maxilla and Mandible model pouring (ideal molds)	Teaching via laboratory	Direct observation of
4	Marking of models for Kennedy class-I, II, III & IV	demonstration	
5	Wax-up for base plate formation	Teaching on the	Will be assessed
6	Fabrication of Maxillary and Mandibular wax occlusal rims	ideal models	auring:
7	Articulation and mounting of the Maxillary and Mandibular occlusal rims	molds	1.daily supervision 2.Mid-roation test 3.End of rotation
8	Selection of anterior and posterior teeth		test
9	Arrangement of anterior and posterior teeth		
10	Final finishing (correction of denture base & tooth position)		
11	Carving and festooning		
12	Investment of the wax up in the flasks		
13	De-waxing and packing with heat cure acrylic polymer		
14	Finishing and polishing		

# **PROSTHODONTICS ROTATION OF FINAL YEAR BDS**

S.NO.	PROCEDURE SKILLS	TEACHING METHODOLOGY	ASSESSMENT TOOLS
	By the end of rotation, the final year students should be able to demonstrate on the ideal mold/patient the following:		The students will be assessed mid-rotation and end-of rotation test
1.	Instruments, lab protocol and chair positioning		1. OSCEs 2. Chair side viva
2	History taking and examination		<b>3.</b> Direct observation of
3	Maxillary and mandibular		clinical skills
	impressions for removable		4. Direct observation of
	partial dentures and complete	Demonstration of	procedural skills
1	dentures Pouring of the impressions	clinical steps on	Will be assessed
- <del>4</del> - 5	Block outs and direct retainers	the patient	during.
6	Custom tray fabrication for		aannig.
0	secondary impression	Tooching via	1. Daily Supervision
7	Partial denture and complete	laboratory	2.Mid-Roation Test
-	denture (heat cure) base plate	demonstration	3.End Of Rotation Test
	fabrication	domonolididion	
8	Fabrication of wax occlusal rims	Teaching on the	
9	Maxilla mandibular relation	ideal models	
	record and mounting on the	poured in the agar	
	articulator	molds	
10	Selection of anterior and		
44	posterior teeth		
11	Arrangement of anterior and		
12	Clinical way try in		
12	Final finishing (correction of		
15	denture base & tooth position		
14	Carving and festooning		
15	Investment of the wax up in the		
	flasks		
16	De-waxing and packing with		
	heat cure acrylic polymer		
17	Finishing and polishing		
18	Clinical insertion of the		
_	prosthesis and adjustments		
19	Post-insertion instructions and		
	follow up visits		

# DETAILS OF CLINICAL ROTATION FINAL YEAR BDS ORIENTATION SESSION:

Introduction to Department and Laboratory

Introduction to Faculty

Standard Operating Procedures for Laboratory

Standard Operating Procedures for Clinics

Log Book Record Maintenance

## PROSTHODONTICS POSTING FOR FINAL YEAR

Eight weeks of posting

DEPARTMENT	DURATION	ACTIVITY/SKILLS TO BE
		LEARNT
REMOVABLE	08	Orientation
		<ul> <li>Chair positioning and history taking</li> </ul>
		<ul> <li>Impression taking</li> </ul>
		<ul> <li>Plaster pouring and making of cast</li> </ul>
		<ul> <li>Fabrication and finishing of custom tray</li> </ul>
		<ul> <li>Border molding and secondary impression</li> </ul>
		<ul> <li>Fabrication of baseplate and occlusal rims</li> </ul>
		<ul> <li>Jaw relation taking</li> </ul>

	<ul> <li>Mounting of cast on articulator</li> </ul>
	<ul> <li>Teeth selection and teeth setup</li> </ul>
	• Try- In
	<ul> <li>Finishing and festooning of teeth setup</li> </ul>
	<ul> <li>Investment of model</li> </ul>
	<ul> <li>Dewaxing</li> </ul>
	<ul> <li>Bench curing</li> </ul>
	<ul> <li>Finishing and polishing of denture</li> </ul>
	<ul> <li>Final insertion</li> </ul>
	<ul> <li>Post-operative Instructions</li> </ul>

## SAMPLE WEEK # 1 SCHEDULE- FINAL YEAR BDS CLINICAL ROTATION

## DAY 1:

10:30 AM to 11:30 AM (Orientation)

11:30 AM to 12:30 PM (Study Cast Demonstration and Model pouring)

12:30 PM to 01:30 PM (Diagnosis and Treatment Planning Demonstration)

# DAY 2:

10:30 AM to 11:30 AM (TEST Instruments/materials used in Prosthodontics – viva based)

11:30 PM to 01:30 PM (Pre-clinical demonstration & Students Hands-on : Base plate and Bite Rims)

## DAY 3:

10:30 AM to 12:00 PM (Pre-Clinical demonstration: Model Articulation and setting up teeth )

12:00 PM to 01:30 PM (Students Hands-on)

# DAY 4:

10:30 AM to 11:30 AM (Pre-Clinical demonstration: Waxing and Flasking)

11:30 AM to 01:30 PM (Students Hands-on)

## DAY 5:

**Final Denture Finishing** 

### **RECOMMENDED BOOKS (Latest Edition):**

### **REMOVABLE PARTIAL DENTURE:**

McCRACKEN'S REMOVABLE PARTIAL PROSTHODONTICS, THIRTEENTH EDITION Alan B. Carr

David T. Brown

### FIXED PARTIAL DENTURE:

CONTEMPORARY FIXED PROSTHODONTICS, FIFTH EDITION Stephen F. Rosenstiel Martin F. Land Junhei Fujimoto

#### **COMPLETE DENTURE**

PROSTHODONTIC TREATMENT FOR EDENTULOUS PATIENTS: COMPLETE DENTURES AND IMPLANT-SUPPORTED PROSTHESES

George Zarb, John A. Hobkirk, Steven E. Eckert, and Rhonda F. Jacob

### **OCCLUSION AND TMD'S**

MANAGEMENT OF TEMPOROMANDIBULAR DISORDERS AND OCCLUSION 7 ED

Jeffrey P. Okeson, Dmd

### IMPLANTOLOGY

DENTAL IMPLANT PROSTHETICS, SECOND EDITION

Carl E. Misch

### MAXILLOFACIAL PROSTHODONTICS

CLINICAL MAXILLOFACIAL PROSTHETICS

Thomas D. Taylor. DDS. MSD

## THREE MONTHS ROTATION OF HOUSE OFFICERS

Department of Prosthodontics

Three months of posting

DEPARTMENT	DURATION
	4 weeks
Informed consent, counselling	
Communication skills and professionalism	
History and examination of removable and fixed prosthodontics	
Diagnosis and treatment planning	
Patient selection for removable partial dentures and complete	4 weeks
dentures	
Pre-prosthetic evaluation and mouth preparation	
Fabrication of removable partial dentures through supervised clinical	
execution of steps and laboratory communication	
Patient selection and evaluation of abutments for fixed partial	4 weeks
dentures	
Tooth preparation mock ups on stone cast, phantom tooth and	
extracted teeth	
Planning of fixed partial denture bridges	
Supervised tooth preparation on tooth canal treated tooth	
Supervised Preparation of teeth for fixed partial dentures and	
crowns	

Each house officer will present any clinical case or case report on fixed and removable prosthodontics

Posting of in crown and bridge department is based upon the performance on the mock up tooth preparations

## DRESS CODE POLICY

All Students are responsible for maintaining clean, neat, and well-fitting clothing. Students not engaged in direct patient care but presenting in clinic, for whatever reason, must maintain infection control and safety standards and present themselves in a professional manner.

### A. Personal Hygiene and Hair

- 1. Hair should be clean and well groomed.
- 2. Beards and mustaches must be clean, neatly trimmed, and well groomed.
- 3. Hair must be kept out of the field of operation so that it does not require handling during treatment procedures.
- 4. Personal cleanliness and good oral hygiene must be maintained.
- 5. Body hygiene is required so that offensive body odor is avoided.
- 6. Strong perfumes, colognes, or after-shave lotions must be avoided.
- 7. Hands and fingernails must be kept clean.
- 8. Fingernails must be kept trimmed and well-manicured.

### **B. Jewelry**

- 1. All jewelry should be kept to a minimum and out of the field of operation.
- 2. Jewelry should not affect one's ability to wear gloves, masks or gowns.

### C. Attire

Professional attire or scrubs shall be worn in all classes and laboratories. Scrubs are required in clinic. In clinic and in lab, students must ensure that their attire meets infection control regulations as outlined in the Infection Control Manual.

When representing the JMDC at community service events, students must wear their JMDC scrubs or professional attire with Lab-coat along with their nametag. Students must abide by all infection control and safety standards with regards to dress.

### 1. Professional Attire (examples)

- a. Dress pants/slacks
- b. Khakis
- c. Dress shirts (e.g., oxford cloth)
- d. Knit or polo shirts with collars
- e. Blouses
- f. Closed-toed shoes (required for clinic and lab only)

### 2. Scrubs specifications

- a. Scrub colors are limited to Carolina Blue, surgical green, black, gray, or navy blue.
- b. Scrubs should be neat and clean with a scrub top and bottom.
- c. Scrub top and bottom must be a solid color, with no pattern.

- d. Scrub top and bottom must be a matched set.
- e. Scrubs must be worn with socks and closed-toe shoes.
- f. If worn, athletic shoes must be clean.
- g. A clean, plain T-shirt may be worn under scrubs.
- h. If long-sleeved, the T-shirt must be plain, with no pattern or other design.

#### 3. Unacceptable attire in class, clinic, or laboratory settings (examples)

- a. Shorts, sweats, gym attire
- b. Jeans
- c. Bare feet
- d. Halter tops, tube tops/strapless tops, tank tops with straps <2 inches
- e. Low-cut tops
- f. See-through clothing
- g. Visible undergarments when sitting or standing
- h. Head gear (excluding headbands and ties to hold back hair)

#### **D. General Considerations**

Each student is expected to keep locker areas, clinical facilities, and preclinical labs in order. All used gowns and trash should be placed in their respective receptacles. Students will be notified of any updates or changes to the JMDC Dress Code policy.

#### THE END
