

SECTION I

REGULATIONS

1. Title of the Course: Fellowship in Myofunctional Interceptive and Biofunctional Therapy

2. Branches of Study: Department of Paedodontics & Preventive Dentistry

3. Eligibility

A candidate for admission to the Fellowship in Myofunctional Interceptive and Biofunctional Therapy must have a recognized degree of BDS (Bachelor of Dental Surgery) awarded by an Indian University in respect of recognized Dental College under Section 10(2) of the Dentists Act, 1948 or an equivalent qualification recognized by the Dental Council of India and should have obtained permanent registration with the State Dental Council. Candidates not possessing a recognized Dental qualification for the above purpose should secure the prior approval of his qualifications by the Dental Council of India before he can be admitted to the Fellowship in interceptive and myofunctional therapy course.

Provided that in the case of a foreign national, the Dental Council of India may, on payment of the prescribed fee for registration, grant temporary registration for the duration of the Fellowship training restricted to the dental college/institution to which he is admitted for the time being exclusively for postgraduate studies.

Provided that further temporary registration to such foreign national shall be subject to the condition that such person is duly registered as dental practitioner in his own country from which he has obtained his basic dental qualification and that his degree is recognized by the corresponding dental council or concerned authority.

4. Criteria for Selection for Admission

Students for Fellowship in Myofunctional Interceptive and Biofunctional Therapy Course shall be admitted based on performance at the competitive examinations held by Institutions.

1. BDS pass / degree certificate issued by the University.
2. Marks cards of all the university examinations passed (I to IV BDS year course).
3. Certificate regarding the recognition of the Dental college by the Dental Council of India.
4. Completion of paid rotatory internship certificate from a recognized college.
5. Registration by any State Dental Council.

5. Duration of the Course

The Course shall be of one year duration.

This is split into 4 modules in an academic year. Each module is of 3 days duration starting from September 2024.

OFFLINE MODULES

Module 1: September 2024 : 19 20 21

Module 2: December 2024 : 26 27 28

Module 3: April 2025 : 03 04 05

Module 4: July 2025 : 24 25 26

ONLINE MODULES

October 2024 : 10 24 March 2025 : 13 27

November 2024 : 14 28 April 2025 : 10 24

December 2024 : 12 May 2025 : 08 22

January 2025 : 09 21 June 2025 : 12 26

February 2025 : 13 27 July 2025 : 10

Graduation ceremony: January 2026

Dates are subjected to university approval which will be done 6 months prior to the class.

6. Method of training

The training of this program shall be part time with graded responsibilities in the management and treatment of patients entrusted to his/her care. The participation of the students in all facets of educational process is essential. Every candidate should take part in seminars, group discussions, grand rounds, case demonstration, clinics, journal review meetings, CPC and clinical meetings. Training should include involvement in laboratory and experimental work, and mini research studies(optional).

7. Attendance, Progress and Conduct

Each module shall be taken as a unit for the purpose of calculating attendance. Every candidate shall attend symposia, seminars, conferences, journal review meetings, grand rounds, CPC, case presentation, clinics and lectures during each year prescribed by the department and not absent himself / herself from work without reasons.

Every candidate shall have not less than 80 percent of attendance during the Fellowship course.

8. Monitoring Progress of Studies

8.1 Work diary / Log Book: Every candidate shall maintain a work diary and record of his/ her participation in the training programme conducted by the department such as journal reviews, seminars, etc. Please see Chapter IV for model checklists and logbook. Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate. The work diary shall be scrutinized and certified by the Head of the programme and presented in the final practical/clinical examination.

8.2 Periodic assessment:

The periodic assessment may include written papers, practical / clinical and viva voce. Records and marks obtained in such tests will be maintained by the Head of the Department and presented in the final practical/clinical examination.

8.3 Records:

Records and marks obtained in tests will be maintained by the Head of the Department and presented in the final practical/clinical examination.

9. Short Mini Project

Every candidate pursuing Fellowship course is required to carry out work on a selected mini research project under the guidance of a recognized post graduate teacher. The results of such a work shall be submitted in the form of a Short Mini Project.

The Short Mini Project is aimed to train a student in research methods. Candidates must find a topic related to the subject and prepare a detailed review of literature, recent advances, critical analysis and draw conclusions

Every candidate shall submit to the head of the program in the prescribed proforma, a synopsis containing particulars of proposed Short Mini Project work within six months from the date of commencement of the course on or before the dates notified by the institution.

The Short Mini Project should be written under the following headings:

- a. Introduction**
- b. Aims or Objectives of topic**
- c. Review of literature**
- d. Discussions**
- e. Conclusion**
- f. Summery**
- g. Reference**
- h. Tables**
- i. Annexures**

The written text of Short Mini Project shall be not less than 10 pages and shall not exceed 15 pages excluding references, tables, questionnaires and other annexure. It should be typed in double line spacing on one side of paper (A4 size, 8.27" x 11.69") and properly. Spiral binding should be avoided. The Short Mini Project shall be certified by the guide, head of the department.

3 copies of Short Mini Project thus prepared shall be submitted to the program head, institution and one for personal usage.

10. Guide: The academic qualification and teaching experience required for recognition by this University as a guide for Short Mini Project work is as laid down by Dental Council of India and Kerala university of health science.

10.1 Change of guide: In the event of a registered guide leaving the college for any reason in the event of death of guide, guide may be changed with prior permission from the institution.

11. Scheme of Examination

Eligibility: The following requirements shall be fulfilled by every candidate to eligible to appear for the final examination.

- i) **Attendance:** Every candidate shall have fulfilled the attendance prescribed by the institution during each academic year of the Fellowship course.
- ii) **Progress and conduct:** Every candidate shall have participated in seminars, review meetings, symposia, case presentations, clinics and didactic during each year as designed by the concerned department
- iii) **Work diary and Logbook:** Every candidate shall maintain a work diary and logbook for recording his/her participation in the training programmes conducted by the department. The work diary and logbook shall be verified and certified by the Head of the Department. (Please see Section VII for Model Checklist and Logbook)

The certification of satisfactory progress by the head of the department and head of the institution shall be based on (i), (ii) and (iii) mentioned above.

Schedule of Examination: The examination for Fellowship courses shall be held at the end of three academic years (4 modules).

12. Final Examination

This Fellowship in Myofunctional Interceptive and Biofunctional Therapy examinations shall consist of Short Mini Project, 5 completed case log, OSCE Practical/Clinical and Viva voce.

(a) Short Mini Project: Acceptance of Short Mini Project shall be a precondition for the candidate to appear for the final examination.

(b) Completed case log: all candidates to submit 5 cases with complete record including completed case history, before and after photographs, models with base , cephalometric tracing with superimposition. Viva voice related to the case will done.

(c) OSCE Practical/Clinical and Viva voce. 5 clinical scenario will set and each station candidate have 10 minutes to take the records, 10 minutes case discussion, 30 minutes to complete written notes related to the case given. In case of practical examination, it should be aimed at assessing competence and skills of techniques and procedures. It should also aim at testing student's ability to make relevant and valid observations, interpretation and inference of laboratory or experimental or clinical work relating to his/her subject for undertaking independent work.

The actual format of clinical examination are given in Section III. The total marks for practical / clinical examination shall be 200.

12.1 Examiners

There shall be at least four examiners to evaluate the candidates. Out of four, two shall be external examiners and two shall be internal examiners. The qualification and teaching experience for appointment as an examiner shall be as laid down by KUHS and Dental Council of India from time to time

13. Criteria for Declaring as Pass

To pass in the examination, a candidate shall secure 50% of total marks allotted (100 marks out of 200). A candidate securing less mark as described above shall be declared to have failed in the examination.

SECTION II

GOALS & OBJECTIVES OF THIS PROGRAM

Goals:

The goal of this training is to train B.D.S. graduate who will, after successful completion of the course:

Practice respective specialty efficiently and effectively, backed by scientific knowledge and skill.

Exercise empathy and a caring attitude and maintain high ethical standards.

Continue to evince keen interest in continuing professional education in the specialty and allied specialties irrespective of whether in teaching or practice.

Willing to share the knowledge and skills with any learner, junior or a colleague.

Develop the faculty for critical analysis and evaluation of various concepts and views, to adopt the most rational approach.

Objectives:

The objective is to train a candidate so as to ensure higher competence in both general and special area of interest and prepare him for a career in teaching, research and speciality practice. A candidate must achieve a high degree of clinical proficiency in the subject matter and develop competence in research and its methodology as related to the field concerned.

The above objectives are to be achieved by the time the candidate completes the course. The objectives may be considered as under -

1. Knowledge (Cognitive domain)
2. Skills (Psycho motor domain)
3. Human values, ethical practice and communication abilities

Knowledge:

Demonstrate understanding of basic sciences relevant to specialty.

Describe etiology, pathophysiology, principles of diagnosis and management of common problems within the specialty in adults and children.

Identify social, economic, environmental and emotional determinants in a given case and take them into account for planning treatment.

Recognize conditions that may be outside the area of specialty/competence and to refer them to an appropriate specialist.

Update knowledge by self- study and by attending courses, conference, seminars relevant to specialty.

Undertake audit, use information technology and carryout research.

Skills:

1. Take a proper clinical history, examine the patient, perform essential diagnostic procedures and order relevant tests and interpret them to come to a reason for diagnosis about the condition.

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

Human values, ethical practice and communication abilities:

Adopt ethical principles in all aspects of practice.

Professional honesty and integrity are to be fostered.

Patient care is to be delivered irrespective of social status, caste, creed or religion of the patient.

Develop communication skills, in particular and skill to explain various option available in management and to obtain a true informed consent from the patient

Provide leadership and get the best out of his team in a congenial working atmosphere.

Apply high moral and ethical standards while carrying out human or animal research.

Be humble and accept the limitations in his knowledge and skill and to ask for help from colleagues when needed.

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

Develop an attitude to seek opinion from allied medical and dental specialties, as and when required

Specific goals and objective for this program.

Objectives

At the end of training the candidate should be able to

1. Create not only a good oral health in the child but also a good citizen tomorrow.
2. Instill a positive attitude and behavior in children
3. Understand the principles of prevention and preventive dentistry right from birth to adolescence
4. Guide and counsel, the parents in regards to various treatment modalities including different facets of preventive dentistry

5. Prevent and intercept developing malocclusion

Skills

1. Obtain proper clinical history, methodological examination of the child patient, perform essential diagnostic procedures and interpret them, and arrive at a reasonable diagnosis and treat appropriately.
2. Be competent to treat malocclusion which are occurring in child patient.
3. Manage to understand the innate relationship between skeletal, dental and soft issue and to maintain harmony between both hard and soft tissues of the oral cavity.
4. Manage the various functional problem leading to malocclusion and guide the developing dentition.
5. Acquire skills in clinical management of various fixed and removable appliances used for the correction of developing malocclusion.

Section III

Course Content

1. Applied Anatomy & genetics: related to interceptive and myofunctional therapy
2. Applied Physiology: applied aspect to the course
3. Applied Pathology: applied aspect to the course
4. Nutrition and Dietetics: applied aspect to the course
5. Growth & Development: Prenatal and postnatal development of cranium, face, jaws, teeth and supporting structures. Chronology of dental development and development of occlusion. Dimensional changes in dental arches. Cephalometric evaluation of growth.
6. Child Psychology: Development & Classification of behavior, personality, intelligence in children, theories of child psychology, stages of psychological child development, fear anxiety, apprehension and its management.
7. Behavior Management: Non- pharmacological methods.
8. Preventive Pedodontics: Concepts, chair side preventive measures for dental diseases, Preventive Management: Pit and Fissures Sealants, Oral Hygiene measures, Correlation of brushing with dental caries and periodontal diseases
9. Interceptive Orthodontics:
 - a. Concepts of occlusion and esthetics: Structure and function of all anatomic components of occlusion, mechanics of articulations, recording of masticatory function, diagnosis of Occlusal dysfunction, relationship of TMJ anatomy and pathology and related neuromuscular physiology.
 - b. A comprehensive review of the local and systemic factors in the causation of malocclusion.
 - c. Recognition and management of normal and abnormal developmental occlusions in primary, mixed and permanent dentitions in children (Occlusal Guidance).
 - d. Biology of tooth movement: A comprehensive review of the principles of teeth movement
Review of contemporary literature. Histopathology of bone and Periodontal ligament, Molecular and ultra cellular consideration in tooth movement.
 - e. Myofunctional appliances: Basic principles, contemporary appliances: Design & Fabrication
 - f. Removable appliances: Basic principles, contemporary' appliances: Design & Fabrication

g. Case selection & diagnosis in interceptive Orthodontics (Cephalometric, Image processing, Tracing, Radiation hygiene, Video imaging and advance Cephalometric techniques).

h. Space Management: Etiology, Diagnosis of space problems, analysis, Biomechanics, Planned extraction in interception orthodontics.

10. Oral Habits in Children:

- Definition, Etiology & Classification
- Clinical features of digit sucking, tongue thrusting, mouth breathing & various other secondary habits.
- Management of oral habits in children.

11. Case History Recording, Outline of principles of examination, diagnosis & treatment planning.

12. Principles of Bio-Statistics & Research Methodology & Understanding of Computers and Photography

13. Emerging concept in Paediatric Dentistry.

Preclinical Work

(Duration- 3 Months of 1st module) (One On Each Exercise)

1. Basic wire bending exercises
2. Fabrication of
3. Adams clasp
4. Roberts retractor
5. Labial bow
6. Finger spring
7. Double cantilever spring
8. Hawley's appliance with 2 or 3D slow maxillary expansion appliance
9. Impression of ideal and crowded cast with cast pour with base
10. Full set of a patient orthodontic photography
11. Tracing of soft tissue dental and skeletal landmarks as observed on Cephalometric radiographs and drawing of various planes and angles, further interpretation of Cephalometric radiographs is analysis.
12. Mixed dentition cast analysis
13. CVMI growth prediction.

Library assignment

SECTION IV

Clinical Case Discussion and Record Taking Requirements

Clinical work Requirements from 4 to 12 months

No,	Clinical Case Discussion and Record Taking (Following Varieties of Case records should be taken during clinical posting)	4 To 12 Months
1	Interceptive management of Non-Skeletal Malocclusion	2
2	Space management/ Space Regainers	2
3	Crowding and its management	2
4	Frenum and its management: upper labial or lower lingual with speech difficulties and complete speech re-education	1
5	Habit and management	2
6	Expansion in Paediatric dentistry	2
7	Twin block (Mandibular Retrognathism)	1
8	Orthopedic case: RME/FACE MASK/TANDUM/CHIN CUP	1
9	2x2/2x4/2x6 set up with utility arch	2
10	Myofunctional exercise and breathing retraining:	5
	TOTAL	20

Monitoring Learning Progress

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

Scheme of examination**TOTAL MARKS: 200 Marks**

The OSCE Clinical / Practical and Viva-Voce Examinations are conducted

ATTENDANCE: 80% and above: 10 marks

Short Mini Project: 30 marks

Completed cases: 50 marks OSCE

MARK DISTRIBUTION

Case Discussion: 30 marks

Case notes: 30 marks

Viva voice: 50 marks

Need 50% to pass for the fellowship from MUCM, Malaysia.

SECTION V

TEACHING / LEARNING ACTIVITIES AND MONITORING LEARNING PROGRESS

All the candidates registered for this course shall pursue the course for a period of 1 year according to the time table set for the academic year 2024-25. During this period, each student shall take part actively in learning activities designed by the institution. A list is given below. Institutions may include additional activities, if so, desired.

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also helps students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities using checklists. Model Checklists are given in this section. They may be copied and used. The number of activities attended and the topics prevented are to be recorded in log book. The log book should periodically be validated by the supervisors.

i) Acquisition of Knowledge

Journal Review Meeting (Journal Club): The trainees should make presentation from the allotted journals of selected article at least five times in a year. The ability to do literature search, in depth study, presentation skills, and use of audio- visual aids are to be assessed during presentation. The assessment be made by faculty members and peers attending the meeting using Model Checklist 1 in Section VII.

Short Seminars: The seminars may be held at least twice a week in each postgraduate department. All candidates are expected to participate actively and enter relevant detail in the logbook. Each candidate shall make at least five seminars presentations in each year. The topics should be assigned to the student well in advance to facilitate in depth study. The ability to do literature search, in depth study, presentation skills and use of audio- visual aids are to be assessed using the Model Checklist 2, in Section VII.

Symposium: It is recommended to hold symposiums on topics covering multiple disciplines
Clinico-Pathological Conferences (CPC): The CPCs should be held once in a month involving the faculties in orthodontics. The PG student should be encouraged to present the clinical details, interpretations, and participation in the discussion. All departments should attend CPCs.

Interdepartmental meetings: To bring in more integration among various specialties, interdepartmental meetings are recommended, chaired by the dean, with all heads of post graduate departments, at least once a month.

ii) Clinical skills

Day to Day work: Skills in outpatient and ward work should be assessed periodically, this should include the candidate's sincerity and punctuality, analytical ability and communication skills (see Model Checklist 3 & 4 Section VII).

Clinical meetings: Candidates should periodically present cases to his peers and faculty members. This should be assessed using a check list (see Model checklist 4, Section IV).

Clinical and Procedural skills: The candidate should be given graded responsibility to enable learning by apprenticeship. The performance is assessed by the guide by direct observation. Particulars are recorded by the student in the logbook. (Table No.3, Section VII)

iv) Periodic tests: The concerned departments may conduct three tests, two of them be annual tests, one at the end of first year and the other in the second year. The third test may be held three months before the final examination. The tests may include written papers, practical's / clinicals and viva voce.

vii) Work Diary / Log Book: Every candidate shall maintain a work diary and record his/her participation in the training programmes conducted by the department such as journal reviews, seminars, etc. Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate.

viii) Records: Records, log books and marks obtained in tests will be maintained by the Head of the Department and will be made available to the institution when required.

Continuing Dental education Programmes: will be organizing these programs on regular basis involving other institutions. The trainees shall also be encouraged to attend such programs conducted elsewhere

Conferences / workshops / advance courses: The trainee shall be encouraged not only to attend conferences/workshops/advanced courses during their training period.

Short Mini Project: Every candidate shall prepare a Short Mini Project based on the clinical or experimental work or any other study conducted by them under the supervision of the guide. (See Model checklist 5 & 6, Section VII)

Log book

The log book is a record of the important activities of the candidates during the training. Internal assessment should be based on the evaluation of the log book. Collectively, log books are a tool for the evaluation of the training programme of the institution by external agencies. The record includes academic activities as well as the presentations carried out by the candidate.

Format for the log book for the different activities is given in Tables 1, 2 and 3 of Section VII. Copies may be made and used by the institutions.

Procedure for defaulters: we have a committee to review such situations. The defaulting candidate is counseled by the guide and head of the department. In extreme cases of default the departmental committee may recommend

that defaulting candidate be withheld from appearing the examination, if she/he fails to fulfill the requirements in spite of being given adequate chances to set himself or herself right.

Section VI

Ethics in Dentistry

Introduction: There is a definite shift now from the traditional patient and doctor relation and delivery of dental care. With the advances in science and technology and the increased needs of the patient, their families and community, there is a concern for the health of community as a whole. There is a shift to greater accountability to the society. specialists like the other health professionals are confronted with many ethical problems is therefore absolutely necessary for each and every one in the health care delivery to prepare themselves to deal with these problems. To accomplish this and develop human values, it is desired that all the trainees undergo ethical sensitization by lectures or discussion on ethical issues, discussion of cases with an important ethical component.

Course Content:

Introduction to ethics -

- What is ethics?
- What are values and norms?
- How to form a value system in one's personal and professional life? Hippocratic oath.
- Declaration of Helsinki, WHO declaration of Geneva, International code of ethics,
- D.C.I. Code of ethics.

Ethics of the individual -

- The patient as a person.
- Right to be respected
- Truth and confidentiality
- Autonomy of decision
- Doctor Patient relationship

Professional Ethics-

- Code of conduct
- Contract and confidentiality
- Charging of fees, fee splitting
- Prescription of drugs
- Over-investigating the patient
- Malpractice and negligence

Research Ethics -

Animal and experimental research/humanness Human experimentation

Human volunteer research-informed consent for trials

Drug trials

Ethical workshop of cases

Gathering all scientific factors

Gathering all value factors

Fortifying areas of value - conflict, setting of priorities

Working out criteria towards decisions **Recommended**

Reading:

1. Francis CM., Medical Ethics, 2nd Edn, 2004, Jaypee Brothers, New Delhi.
2. Ethical Guidelines for Biomedical Research on Human Subjects, Indian Council of Medical Research, New Delhi, 2000.

SECTION - VII
CHECKLISTS AND LOG BOOKS

CHECKLIST- 1
MODEL CHECK LIST FOR EVALUATION OF JOURNAL REVIEW PRESENTATIONS.

Name of the Trainee:

Date:

Name of the Faculty / Observer:

<u>Sl. No</u>	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	<i>Article chosen was</i>					
2.	<i>Extent of understanding of scope & objectives of the paper by the candidate</i>					
3.	<i>Whether cross-references</i>					
	<i>have been consulted</i>					
4.	<i>Whether other relevant publications consulted</i>					
5.	<i>Ability to respond to questions on the paper/ subject</i>					
6.	<i>Audio - Visual aids used</i>					
7.	<i>Ability to discuss the paper</i>					
8.	<i>Clarity of presentation</i>					
9.	<i>Any other observation</i>					
	<i>Total Score</i>					

CHECKLIST-2
MINI PROJECT COMPILATION AND SUBMISSION

Name of the Trainee:

Date:

Name of the Unit Head:

<u>Sl.</u> <u>No.</u>	Items for observation	<i>Poor</i>	<i>Below</i>	<i>Average</i>	<i>Good</i>	<i>Very</i>
	during presentation	<i>0</i>	<i>Average 1</i>	<i>2</i>	<i>3</i>	<i>Good 4</i>
1.	<i>Regularity of attendance</i>					
2.	<i>Punctuality</i>					
3.	<i>Interaction with colleagues and supportive staff</i>					
4.	<i>Maintenance of case records</i>					
5.	<i>Presentation of cases</i>					
6.	<i>Investigations work -up</i>					
7.	<i>Chair - side manners</i>					
8.	<i>Rapport with patients</i>					
9.	<i>Overall quality of clinical work</i>					
	<i>Total score</i>					

Please use a separate sheet for each faculty member

CHECKLIST-3

EVALUATION FORM FOR CLINICAL CASE PRESENTATION

Name of the Trainee:

Date:

Name of the faculty / Observer:

Sl.No	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Completeness of history					
2.	Whether all relevant points elicited					
3.	Clarity of presentation					
4.	Logical order					
5.	Mentioned all positive and negative					
6.	Accuracy of general physical examination					
7.	Investigations required					
	Complete list					
8.	Relevant order					
	Interpretation of Investigations					
	Ability to discuss differential diagnosis.					
9.	Ability to discuss diagnosis.					
10.	Others					
	Grand Total					

Please use a separate sheet for each faculty member

CHECKLIST-4

MODEL CHECKLIST FOR SHORT MINI PROJECT PRESENTATION

Name of the Trainee:

Date:

Name of the faculty / Observer:

Sl.No	Prints to be considered	Poor <i>0</i>	<i>Below</i> <i>Average 1</i>	<i>Average</i> <i>2</i>	<i>Good</i> <i>3</i>	<i>Very</i> <i>Good 4</i>
1.	<i>Interest show in selecting topic</i>					
2.	<i>Appropriate review</i>					
3.	<i>Discussion with guide and other faculty</i>					
4.	<i>Quality of protocol</i>					
5.	<i>Preparation of Proforma</i>					
	Total Score					

CHECKLIST- 5

CONTINUOUS EVALUATION OF SHORT MINI PROJECT WORK BY GUIDE/CO-GUIDE

Name of the Trainee:

Date

Name of the Faculty/Observer:

Sl.No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Periodic consultation with guide / co- guide					
2.	Regular collection of case material					
3.	Depth of Analysis / Discussion					
4.	Department presentation of findings					
5.	Quality of final output					
6.	Others					
	Total score					

CHECKLIST - 7
OVERALL ASSESSMENT SHEET

Name of the College:

Date:

Check List No	PARTICULARS									
		A	B	C	D	E	F	G	H	I
1.	Journal Review Presentation									
2.	Mini Project									
3.	Clinical work in wards									
4.	Clinical presentation									
5.	Overall Competence									
6.										
	TOTAL									

Signature of HOD

Signature of Principal

The above overall assessment sheet used along with the logbook should form the basis for certifying satisfactory completion of course of study, in addition to the attendance requirement.

Key:

Mean score: Is the sum of all the scores of checklists 1 to 6

A, B,.....Name of trainees

LOG BOOK

Table 1

Academic activities attended

Name:

Admission Year: College:

Date	Type of activity - Journal club and Case presentation	Particulars
	Any Additional CDE/ Conferences / Value added courses Attended during the current 1 year	

LOGBOOK

Table 2

Diagnostic and operative procedures performed

Name

Admission Year:

College:

Date	Name	OP No.	Procedure	Category 0, A, PA, PI

Key:

C - WASHED UP AND OBSERVED - INITIAL MONTHS OF
ADMISSION A - ASSISTED A MORE SENIOR SURGEON
PA - PERFORMED PROCEDURE UNDER THE DIRECT SUPERVISION OF A
SENIOR SURGEON
PI - PERFORMED INDEPENDENTLY

SECTION VIII

LIBRARY & EQUIPMENT REQUIREMENTS

1. Infrastructure & Functional Requirements:

1. **Space:** In addition to the BDS functional programme the following physical facilities shall be made available to start Fellowship training programmes.

- a. A clinical area for students. Minimum Area-600 sq feet
- b. A seminar room furnished with proper seating arrangement and audio-visual equipment's - Minimum area -300 sq. ft.
- c. A room for the use of students - Minimum area -200 sq.ft.

2. **Library:** A departmental library shall be provided with copies of relevant books. In addition a central library should provide all the recent editions of books pertaining to the speciality and allied subjects as per the recommendations of Dental Council of India.

All the journals of relevant specialty and allied subjects shall be made available.

2. *Recommended Books And Journals*

1. WILLIAM R.PROFFIT, Contemporary Orthodontics
2. GRABER & VANARSDALL, Orthodontics - Current Principles & Techniques
3. MOYERS, Text Book of Orthodontics
4. GRABER, Orthodontics Principles and practice.
5. GRABER, PETROVIC, & RAKOSI Dentofacial Orthopedics with Functional Appliances
6. ATHENASIOU E ATHENASIOU, Orthodontic cephalometry
7. JACOBSON, Radiographic Cephalometry
8. RAKOSI, An Atlas And Manual of Cephalometric Radiography
9. ENLOW, Handbook of Facial Growth
10. EPKER & FISH, Dentofacial Deformities Vol. 1
11. PROFFIT & WHITE, Surgical Orthodontic Treatment
12. NANDA, Biomechanics in Clinical Orthodontics
13. NANDA & BURSTONE, Retention and Stability in Orthodontics
14. OKESON, Management of T.M. Disorders And Occlusion
15. LOU NORTON & DAVIDOWITCH, Biology of tooth movement
16. OKESON, TMJ Disorders.

17. L. JOHNSTON, New Vistas in Orthodontics
18. LEE GRABER, Orthodontics - State of the Art-The Essence of Science
19. M. RAKOSI & GRABER, A Color Atlas of Dental Medicine
20. BURSTONE, Modern Edgewise Mechanics and Segmented Arch Technique
21. W J CLARK, The Twin Block Functional Therapy
22. McNAMARA & BRUDON, Mixed Dentition
23. R D ROBLEE, Interdisciplinary Dentofacial Therapy
24. NANDA, The Developmental Basics of Occlusion and Malocclusion
25. TIMMS, Rapid Maxillary Expansion
26. WILLIAMS & COOKS, Fixed Orthodontic Appliances
27. RICKETTS, Bioprogressive Therapy
28. VAN DER LINDEN, Quintessence Series
29. MICHIGAN CENTER, Craniofacial Growth Series for human growth and Development
30. SALZMAN, Practice of Orthodontics Vol II and I
31. ROHIT SACHDEVA, Orthodontics for the next millennium
32. SCHWIDLING, The Jasper Jumper
33. ROBERT RICKETTS, Provocations and preceptions in Craniofacial Orthopedics
34. Pediatric Dentistry (Infancy through Adolescence) - Pinkham.
35. Occlusal guidance in Pediatric Dentistry - Stephen H. Wei.
36. Clinical Use of Fluorides - Stephen H. Wei.
37. Pediatric Medical Emergencies - P. S. Whitt.
38. Understanding of Dental Caries - Niki Foruk.
39. An Atlas of Glass Ionomer cements - G J. Mount.
40. Clinical Pedodontics - Finn.
41. Textbook of Pediatric Dentistry - Braham Morris.
42. Dentistry for the Child and Adolescence - Mc. Donald.

43. Pediatric Dentistry - Damle S. G
44. Behaviour Management – Wright
45. Occlusal guidance in Pediatric Dentistry - Nakata.

JOURNALS:

The journals are best source of information for professionals to keep abreast with the recent developments and trends in their respective specialties. Considering the array of journals that are available today the council requires that the institutions provide as a minimum requirement the list of journals mentioned below:

1. Journal of Indian Dental Association
2. British Dental Journal
3. Journal of American Dental Association
4. Journal of Dentistry
5. Dental Clinics of North America
6. Quintessence International
7. Australian Dental Journal
8. American Journal of Orthodontics and Dentofacial Orthopedics
9. Journal of Orthodontics (formerly British Journal of Orthodontics)
10. Angle Orthodontics
11. Journal of Clinical Orthodontics
12. Journal of Indian Orthodontic Society
13. Seminars in Orthodontics
14. Journal of Orthodontics and Dentofacial Orthopedics
15. European Journal of Orthodontics
16. Australian Journal of Orthodontics
17. International Journal of Adult Orthodontics and Orthognathic surgery
18. The Functional Orthodontist.
19. ASDC Journal of Dentistry for children.

20. International Journal of Pediatric Dentistry
21. Pediatric Dentistry
22. Journal of Indian Society of Pedodontics & Preventive Dentistry

EQUIPMENT REQUIREMENTS

NAME	SPECIFICATION	QTY.
Dental Chairs and Units	With shadowless lamp, spittoon, 3 way syringe, instrument tray and suction, micro motor, airtor, lightcure	10
Autoclave	Front loading	1
Automatic developer		1
Orthodontic Welder		1
Ultrasonic Scalars		2
Needle Destroyer		3
Ultrasonic Cleaner		2
Plaster Dispenser		2
Dental Lathe		1
Vibrator		1
Frassico Typodonts		6

Soldering Unit		1
Band pinching peek pliers		2 sets

NAME	SPECIFICATION	QTY.
Intra Oral Radiography Machine	55- 70 kVp with Digital Compatibility	1
Extra Oral Radiography machine	100 kVp	1
Panoramic Radiography (OPG) Machine	Digital Compatibility	1
Intra -Oral Camera		1

Surgical Trolley		2
Emergency Medicines kit		1
Extra Oral Cassettes with Intensifying Screens (Conventional & Rare Earth)		4
Lead Screens		2
Lead Aprons		2
Lead Gloves		2
Radiographic Filters (Conventional & Rare Earth)		1
Dark Room with safe light facility		1
Automatic Radiographic Film Processors		2
Radiographic Film storage Lead Containers		1
X- ray Viewer boxes		5
Vacuum Moulding Unit		1
Hydrosolder'		1
Lab Micromotor		4
Spot Welders		4
Model Trimmer (Double Disc)		2
Light Curing unit		2
Polishing Lathers		2
Tracing Tables		3
Digital Camera		1
Computers with all accessories		1
Scanner with transparency adapter		1
O.H.P.		1
Slide Projector (35 mm) / LCD Projector		1

<i>Sets of Orthodontic Pliers</i>		3 Sets
<i>Orthodontic impression trays</i>		4 Sets
<i>Typodonts with full teeth set</i>		6