8. PAEDONTICS & PREVENTIVE DENTISTRY

OBJECTIVES:

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

- Create not only a good oral health in the health in the child but also a good citizen tomorrow.
- 2. Instill a positive attitude and behavior in children
- 3. Understand the Principles of 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 dental diseases which are occurring in child patient.
- 3. Manage to repair and restore the lost / tooth structure to maintain harmony between both hard and soft tissues of the oral cavity.
- 4. Manage the disabled children effectively and efficiently, tailored to the need of individual requirement and conditions.
- 5. To acquire skills in managing efficiency life threatening condition with emphasis on basic life support measure.

ATTUTUDES:

- 1. Develop an attitude to adopt ethical principles in all aspects of Pedodontic practice.
- 2. Professional honesty and integrity are to be fostered
- 3. Treatment care is to be delivered irrespective of the social status, cast, creed, and religion of the patients.
- 4. Willingness to share the knowledge and clinical experience with professional colleagues.
- 5. Willingness to adopt, after a critical assessment, new methods and techniques of Pedodontic management developed from time to time, based on scientific research, which are in the best interest of the child patient.
- 6. Respect child patient's rights and privileges, including child patients right to information and right to seek a second opinion.
- 7. Develop an attitude to seek opinion from allied medical and dental specialities, as and when required

COURSE CONTENTS:

- 1. Applied Anatomy & genetics
- 2. Applied Physiology
- 3. Applied pathology
- 4. Nutrition and Dietics
- 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.
- Child Psychology: Development & Classification of behavior, personality, intelligence in children, theories of child psychology, stages of psychological, child development, fear anxiety, apprehension & its management
- 7. Behavior Management: Non Pharmacological & Pharmacological methods.
- 8. Child Abuse & Dental Neglect

- Conscious Sedation, Deep Sedation & General Anesthesia in Pediatric Dentistry: (Including other Drugs, Synergic & Antagonistic Actions of Various Drugs Used in Children
- 10. Preventive Pedodontics: Concepts, chair side preventive measures for dental diseases, high-risk caries including rampant & extensive caries Recognition, Features & Preventive Management, Pit and Fissures Sealants, Oral Hygiene measures, Correlation of brushing with dental caries and periodontal disease. Diet & Nutrition as related to dental caries. Diet Counseling
- Dental Plaque: Definition, Initiation, Pathogenesis, Biochemistry, and Morphology & Metabolism.
- 12. Microbiology & Immunology as related to oral Diseases in Children: Basic concepts, immune system in human body, Auto Immune diseases, Histopathology, Pathogenesis, Immunology of dental caries, Periodontal diseases, Tumors, Oral Mucosal lesions etc.
- 13. Gingival & Periodontal diseases in Children.
 - Normal Gingiva & Periodontium in children:
 - Gingival & Periodontal diseases Etiology, Pathogenesis, Prevention & Management
- 14. Pediatric Of Operative Dentistry
 - Principle Of Operative Dentistry along with modifications of materials / past, current & latest including tooth colored materials.
 - Modifications required for cavity preparations in primary and young permanent teeth.
 - Various Isolation Techniques
 - Restorations of decayed primary, young permanent and permanent teeth in children using various restorative materials like Glass Ionomer, Composite, Sliver, Amalgam & latest materials (gallium)
 - Stainless steel, Polycarbonate & Resin Crowns / Veneers & fiber pvit systems.
- 15. Pediatric Endodontics:
 - a. Primary Dentition: Diagnosis of pulpal disease and their management –Pulp capping, Pulpotomy, Pulpectomy (Materials & Methods), Controversies & recent concepts.
 - b. Young permanent teeth and permanent teeth, Pulp capping,
 Pulpotomy, Apexogenesis, Apexification, Concepts, Techniques and
 Materials used for different procedures.
 - Recent advances in Pediatric diagnosis and Endodontics.
- 16. Prosthetic consideration in Pediatric Dentistry.
- 17. Traumatic Injuries in Children:
 - Classification & Importance.
 - Segualae & reaction of teeth to trauma
 - Management of Traumatized teeth with latest concepts.
 - Management of jaw fracture in children.
- 18. Interceptive Orthodontics:
 - a. Concepts of occlusion and esthetics: Structure and function of all anatomic components of occlusion, mechanics of articulation, recording of masticatory function, diagnosis of Occlusal dysfunction, relationship of TMJ anatomy and pathology and related neuromuscular physiology.
 - A comprehensive review of the local and systemic factors in the causation of malocclusion.
 - Reorganization 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 (Cephalometrics, Image processing, Tracing, Radiation hygiene, Video imaging & advance Cephalometric techniques).
- h. Space Management: Etiology, Diagnosis of space problems, analysis, Biomechanics, Planned extraction in interception orthodontics.
- 19. Oral Habits in Children:
 - Definition, Etiology & Classification
 - Clinical features of digit sucking, tongue trusting, mouth breathing and various other Secondary habits.
 - Management of oral habits in children
- 20. Dental care of children with special needs:
 - Definition Etiology, Classification, Behavioral, Clinical features & management of children with:
 - Physically handicapping conditions
 - Mentally compromising conditions
 - Medically compromising conditions
 - Genetic disorders
- 21. Oral manifestations of Systemic Conditions in children & their Management
- 22. Management of Minor Oral Surgical Procedures in Children
- 23. Dental Radiology as related to Pediatric Dentistry
- 24. Cariology
 - Historical background
 - Definition, Aeitology & Pathogenesis
 - Caries pattern in primary, young permanent and permanent teeth in children.
 - Rampant caries, early childhood caries and extensive caries. Definition, aeitology, Pathogenesis, Clinical features, Complications & Management.
 - Role of diet and nutrition in Dental Caries
 - Dietary modifications & Diet counseling.
 - Subjective & objective methods of Caries detection with emphasis on Caries Activity tests, Caries prediction, Caries susceptibility & their clinical Applications.
- 25. Pediatric Oral Medicine & Clinical Pathology: Recognition & Management of development dental anomalies, teething disorders, stomatological conditions, mucosal lesions, viral infections etc.
- 26. Congenital Abnormalities in children: Definition, Classification, Clinical features & Management.
- 27. Dental Emergencies in Children and their Management.
- 28. Dental Materials used in Pediatric Dentistry.
- 29. Preventive Dentistry:
 - Definition
 - Principles & Scope
 - Types of prevention
 - Different preventive measures used in Pediatric Dentistry including fissure sealants and caries vaccine.
- 30. Dental Health Education & School Dental Health Programmes

- 31. Dental health concepts, Effects of civilization and environment, Dental Health delivery system, Public Health measures related to children along with principles of Pediatric Preventive Dentistry
- 32. Fluorides:
 - Historical background
 - Systemic & Topical fluorides
 - · Mechanism of action
 - Toxicity & Management.
 - Defluoridation techniques.
- Medicological aspects in Paediatric Dentistry with emphasis on informed concept.
- 34. Counseling in Paediatric Dentistry
- 35. Case History Recording, Outline of principles of examination, diagnosis & treatment planning.
- 36. Epidemiology: Concepts, Methods of recording & evaluation of various oral diseases. Various national & global trends of epidemiology of oral diseases.
- 37. Comprehensive Infant Oral Health care.
- 38. Principles of Bio-Statistics & Research Methodology & Understanding of Computers and Photography
- 39. Comprehensive cleft care management with emphasis on counseling, feeding, nasoalvcile bone remodeling, speech rehabilitation.
- 40. Setting up of Pedodontics & Preventive Dentistry Clinic.
- 41. Emerging concept in Paediatric Dentistry of scope of lasen / minimum inovasive procedures: Paediatric Dentistry.

First Year

Preclinical work

(Duration – first 6 Months of First Year MDS) (One On Each Exercise)

- 1. Carving of all deciduous teeth
- 2. Basic wire bending exercises
- 3. Fabrication of
 - a. Maxillary bite plate / Hawley's
 - b. Maxillary expansion screw appliance
 - c. Canine retractor appliance
 - d. All habit breaking appliances
 - i. Removable type
 - ii. Fixed type
 - iii. Partially fixed and removable
 - e. Two Myofunctional appliance
 - f. Making of inclined plane appliance
 - g. Feeding appliance
- 4. Basic soldering exercise I making of a lamppost of stainless steel wire pieces of different gauges soldering on either side of heavy gauge main post.
- 5. Fabrication of space maintainers
 - a. Removable type
 - Unilateral Non Functional space maintainer
 - Bilateral Non Functional space maintainer
 - Unilateral functional space maintainer
 - Bilateral functional space maintainer
 - b. Space Regainers -
 - Hawley's appliances with Helical space regainer

- Removable appliances with Slingshot space regainer
- Removable appliances with Dumbell space regainer
- c. Fixed Space maintainer
 - Band & long loop space maintainer
 - Band & short loop space maintainer
 - Mayne's space maintainer
 - Transpalatal arch space maintainer
 - Nance Palatal holding arch
 - Nance Palatal holding arch with canine stoppers
 - Gerber space regainer
 - Distal shoe appliance
 - a. Active space maintainers
 - b. For guiding the eruption first permanent molar
 - c. Arch holding device
 - d. Functional space maintainer
- 6. Basic for spot welding exercise
- 7. Collection of extracted deciduous and permanent teeth
 - a) Sectioning of the teeth at Various levels and planes
 - b) Drawing of section and shapes of pulp
 - Phantom Head Excersies: Performing ideal cavity preparation for various restorative materials for both Deciduous and permanent teeth
 - d) Performing Pulpotomy, root canal treatment and Apexification procedure
 - Tooth preparation and fabrication of various temporary and permanent restorations on fractured anterior teeth.
 - ii) Preparation of teeth for various types of crowns
 - iii) Laminates / veneers
 - iv) Bonding & banding exercise
- 5. Performing of behavioral rating and IQ tests for children.
- 6. Computation of:
 - a. Caries index and performing various caries activity test.
 - b. Oral Hygiene Index
 - c. Periodontal Index
 - d. Fluorris Index
- 7. Surgical Exercises: a. Fabrication of splints b. Type of Wiring c. Suteering, Various pvit system, prcing & perm. tuli
- 8. a. Taking of periapical, occlusal, bitewing radiographs of children
 - b. Developing and processing of films, thus obtained
 - c. 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.
 - d. Mixed dentition cast analysis
- 8. Library assignment
- 9. Synopsis

Clinical work Requirements from 7 to 36 months

The following is the minimum requirement to be completed before the candidate can be considered eligible to appear in the final M.D.S. Examinations:

No.	Clinical Work	Total	7 To 12	13 To 24	25 To 36
			Months	Months	Months
1.	Behavior Management of different age groups children with complete records.	17	2	10	5
2.	Detailed Case evaluation with complete records, treatment planning and presentation of cases with chair side and discussion	17	2	10	5
3.	Step-by-step chair side preventive dentistry scheduled for high risk children with gingival and periodontal diseases & Dental Caries	11	1	5	5
4.	Practical application of Preventive dentistry concepts in a class of 35-50 children & Dental Health & Motivation.	7	1	4	2
5.	Pediatric Operative Dentistry with application of recent concepts. (a). Management of Dental Caries				
	(I) Class I	50	30	10	10
	(II) Class II	100	40	50	10
	(III) Other Restorations	100	20	50	30
	(b) Management of traumatized anterior teeth	15	04	06	05
	(c) Aesthetic Restorations	25	05	10	10
	(d) Pediatric EndodonticProceduresDeciduous teeth				
	Pulpotomy / Pulpectomy	150 20	30	50 7	70 10
	Permanent MolarsPermanent Incisor	20 15	3 2	3	10
	 Apexification & Apexogenesis 	20	02	08	10
6.	Stainless Steel Crowns	50	10	20	20
7.	Other Crowns	05	01	02	02
8.	Fixed : Space Maintainers Habit breaking appliances	30	08	12	10
9.	Removable : Space Maintainers Habit breaking appliances	20	05	07	08
10.	Functional Appliances	05	01	02	02
11.	Preventive measures like fluoride applications & pit & Fissure Sealants applications with complete follow-up and diet counseling	20	08	08	04
12.	Special Assignments (i) School Dental Health Programmes	03	01	01	01
13.	(ii) Campus etc.,	02	01	01	-

- 13. Library usage
- 14. Laboratory usage
- 15. Continuing Dental Health Programmes

(The figures given against SI. No. 4 to 12 are the minimum number of recommended procedure to be performed)

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 doneby the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV.

SCHEME OF EXAMINATION:

A. Theory 300 Marks

Written examination shall consist of four question papers each of three hours duration. Total marks for each paper will be 100. Paper I, II and III shall consist of two long questions carrying 20 marks each and 6 short essay questions carrying 10 marks. Paper IV will be on Essay. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows: -

PAPER-I: Applied Basic Sciences: Applied Anatomy, Physiology, Microbiology, Nutrition & Dietics, Growth & Development and Dental plague, Genetics.

PAPER-II: Clinical Paedodontics

- 1. Conscious sedation, Deep Sedation & General Anesthesia in Pediatric Dentistry
- 2. Gingival & Periodontal Diseases in Children
- 3. Pediatric Operative Dentistry
- 4. Pediatric Endodontics
- 5. Traumatic Injuries in Children
- 6. Interceptive Orthodontics
- 7. Oral Habits in Children
- 8. Dental Care of Children with special needs
- 9. Oral Manifestations of systemic Conditions in Children & their Management
- 10. Management of Minor Oral Surgical Procedures in Children
- 11. Dental Radiology as Related to Pediatric Dentistry
- 12. Pediatric Oral Medicine & Clinical Pathology
- 13. Congenital Abnormalities in Children
- 14. Dental Emergencies in Children & Their Management
- 15. Dental Materials Used in Pediatric Dentistry
- 16. Case History Recording
- 17. Setting up of Pedodontic & Preventive Dentistry Clinic

PAPER-III: Preventive and Community Dentistry as applied to Pediatric Dentistry

- 1. Child Psychology
- 2. Behavior Management
- 3. Child Abuse & Dental Neglect
- 4. Preventive Pedodontics
- 5. Cardiology
- 6. Preventive Dentistry
- 7. Dental Health Education & School Dental Health Programmes:
- 8. Fluorides

- 9. Epidemiology
- 10. Comprehensive Infant Oral Health Care / Comprehensive cleft care
- 11. Principles of Bio-Statistics & Research Methodology & Understanding of Computers and Photography

PAPER-IV: Essay

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

B. Practical Examination: 200 Marks

The Clinical / Practical and Viva – Voce Examination are conducted for a minimum of two days.

First Day:

1. Case Discussion, Pulp Therapy i.e. Pulpectomy in a Primary Molar

Case Discussion : 20 marks
Rubber Dam application : 10 marks
Working length x-ray : 20 marks
Obturation : 20 marks
Total 70 marks

2. Case Discussion, Crown preparation on a Primary Molar for Stainless steel Crown and cementation of the same.

Case discussion : 10 marks
Crown Preparation : 20 marks
Crown Selection and Cementation: 20 marks
Total 50 marks

Case Discussion, band adaptation for fixed type of space maintainer and impression making.

Case discussion : 20 marks
Band adaptation : 20 marks
Impression : 20 marks
Total 60 marks

Second Day:

1. Evaluation of fixed Space Maintainer and Cementation: 20 Marks

C. Viva Voce: 100 Marks

i. Viva – Voce examination: 80 marks

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

ii. Pedagogy Exercise: 20 marks

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