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DEPARTMENT OF ORAL AND MAXILLOFACIAL SURGERY

STANDARD OPERATING PROCEDURES

INTRODUCTION

SCOPE - The Department of oral and maxillofacial surgery deals with Exodontia, minor oral surgeries and maxillofacial surgeries.

PURPOSE - To ensure that adequate and satisfactory treatments are provided to all the patients who require oral and maxillofacial surgical treatment.

To respond to the complaints and expectations of the patients and to enhance patient satisfaction and achieve all treatment objectives.

To ensure undergraduate and post graduate theory and practical university curriculum will be completed

RESPONSIBILITY -The department clerk is responsible for registering a patient who is referred to the department and segregating them into new patients and allotment to the post graduate students.

The department nurse is responsible for monitoring the respective OPD chair functioning, maintaining patient's records, sterilization of the instruments and assisting the working doctor.

The staff and post graduate student is responsible for examination of all new patients and for determining the line of management. The post graduate students are responsible for the treatment of oral and maxillofacial surgical patients and their follow up.

The department staffs are responsible for taking special cases and their follow up. The staffs are also responsible for taking seminars and JC for the PG students and theory and practical classes for undergraduate students.

The department peon is responsible for cleaning dental chairs, floor and waste disposal.

A. Teaching & Learning

1. UG CARICULUM

SCOPE—To introduce the under graduate students with the subject of oral surgery.

PURPOSE— To introduce & train the undergraduate students with instruments identification, nerve blocks technique and exodontia technique in the subject of oral surgery.

RESPONCIBILITY-Senior lecturer, reader, professor.

PROCEDURE—3rd year UG students will have Oral surgery class of 1hr 1 time a week. Senior lecturer will conduct the class. Basic about instrument identification will be taught to the students. In 3rd year student will have to complete the nerve blocks and mobile tooth extraction.

3rd year students will have one class of 1 hour /week. Students should complete nerve blocks and exodontia.

4th year students will have daily clinical postings in morning 10am-1pm and weekly 4 theory classes. Students will have to complete.

Theory Hours : 70 Hours.

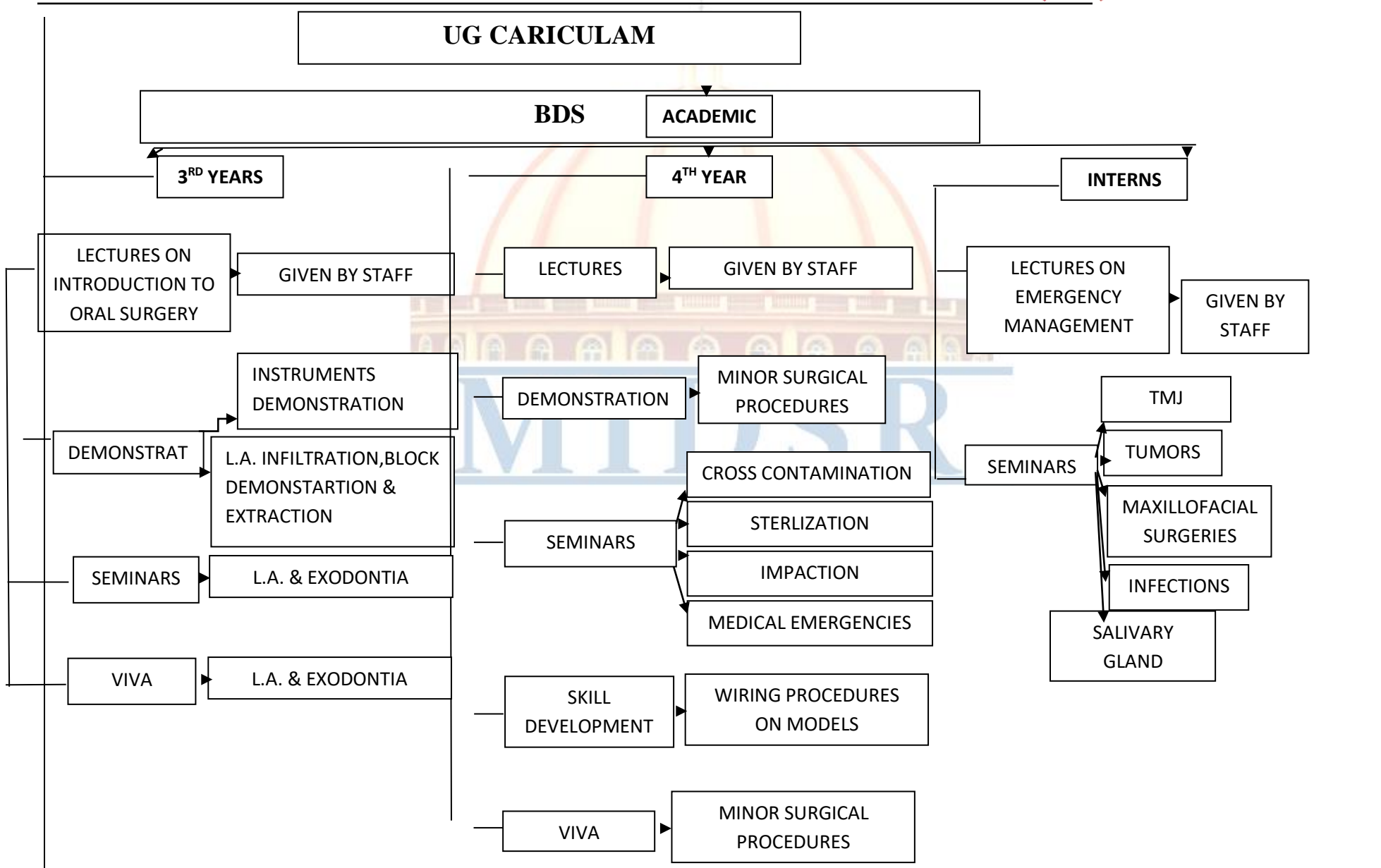
Practical& Clinical Hrs. : 160 Hours.

Theory classes will be conducted by Senior lecturer, reader, professors as per the allotment of the topics. Yearly 2 internal assessments & 1 preliminary theory & practical exam will be conducted.

Academic records like attendance register, journal, log book, LD, thesis etc. will be kept in department store.

FORMS —Attendance sheet, marks aggregate.

RECORDS - Academic records like attendance register, journal, log book, LD, thesis etc. will be kept in department store.



1. PG CURRICULUM

SCOPE– To train post graduate students in the subject of oral and maxillofacial surgery (pre clinical and clinical Exercise)

PURPOSE–To train& improve the clinical and theoretical knowledge of the postgraduate students under 3 year clinical and academic supervision.

RESPONCIBILITY- Professor, Reader, PG guide.

PROCEDURE-In 1st of year PG students will have to complete preclinical exercise, dissection, basic sciences, basic computer sciences, exodontia, seminar on basic topics, selection of dissertation topic, library assignment topic, attending O.T and ward rounds, prepration of synopsis and its submission within six months after admission to the university as per the MUHS quota. 2nd year students have to do rotatory postings in oncology, emergency, general medicine, general surgery, anesthesia, ophthalmology, neurology, ENT, orthopaedic, minor oral surgery and higher surgical training, submission of library assignment by the end of first term and 3rd year students have to perform maxillofacial surgery, submission of dissertation in the first term i.e six months before the final examination of the university. Examination of three hours duration three months before the final examination to be conducted by the college.

Academic records like attendance register, journal, log book, LD, thesis etc. will be kept in department store.

FORMS –Attendance sheet marks aggregate.

RECORDS-Academic records like attendance register, journal, log book, LD, thesis etc. will be kept in department store.

2. EXAM

2.1 U.G INTERNAL ASSESMENT EXAM

SCOPE – Train and evaluate students in the subject of oral surgery.

PURPOSE – To train & evaluate the learning capacity and knowledge of undergraduate students in the subject of oral surgery.

RESPONSIBILITY- Senior lecturer, reader, professor.

PROCEDURE-Yearly 3 theory & practical exams will be conducted for final year students every after 2-3 months namely 1st internal, 2nd internal and preliminary exam. Notification about date and time of meeting will be forwarded to the office and displayed on the notice board 1 week prior the exam.

Syllabus for the exam -1st internal theory exam will be conducted with 10-15 chapters.

2nd internal theory exam will be conducted with 10-15 chapters.

3rd internal preliminary exam will be conducted 4-5 months prior to the university exam. All syllabus will be included in the exam.

Marks distribution -1st internal theory exam will be of total 60 marks .

- 20 marks section A (MCQ)
- 20 marks section B (SAQ)
- 20 marks section C (LAQ)

2nd internal theory exam will be of total 60 marks .

- 20 marks section A (MCQ)
- 20 marks section B (SAQ)
- 20 marks section C (LAQ)

Preliminary theory exam will be of total 80 marks .

- 20 marks section A (MCQ)
- 20 marks section B (SAQ)
- 40 marks section C (LAQ)

Practical exams – Scheduled with the theory exam.

Syllabus for the exam – clinical case history, local anesthesia techniques, exodontia technique, post operative instructions, journal and communication skill will be included in each Practical exam.

Marks distribution -1st internal Practical exam will be of total 60 marks.

- Clinical case history 10 Marks
- Local anesthesia technique 10 Marks
- Exodontia 25 marks
- Post operative instruction management and chair side orals 10 Marks
- Journal and communication skill – 05 Marks

2nd internal Practical exam will be of total 60 marks.

- Clinical case history 10 Marks
- Local anesthesia technique 10 Marks
- Exodontia 25 marks
- Post operative instruction management and chair side orals 10 Marks
- Journal and communication skill – 05 Marks

Preliminary Practical exam will be of total 80 marks.

- Clinical case history 15 Marks
- Local anesthesia technique 15 Marks
- Exodontia 30 marks
- Post operative instruction management and chair side orals 10 Marks
- Journal and communication skill – 10 Marks

Result Display

Result will be displayed on the display board within 8 days after the theory & practical exam.

Compensatory or betterment

Compensatory or betterment exam will be conducted 15-20 days after result display of preliminary exam. Student who were absent for the exam with valid reason or students who have less score in internal assessment exam are eligible for Compensatory or betterment exam.

Students who were absent for any of the three exams should report to the department with application and reason of absentee. After evaluation of the application student are considered eligible for the betterment exam. Syllabus for Betterment exam will be same as preliminary exam. Mark distribution will be same as the preliminary exam.

FORMS – Exam papers, attendance sheet, mark sheet.

RECORDS-Exam papers and answers sheets of all exams, attendance sheet, mark distribution sheet

Sr. No.	Activity	Responsibility	Records, / documents
1	I st Internal theory exam	Sr. Lecturer & Clerk	Question paper, Answer sheets & Attendance sheet.
2	I st Internal Practical Exam	Sr. Lecturer, staff Nurse	Answer sheets, attendance sheet,
3	Result display	Clerk	Marksheets, soft and hard copy
4	II nd Internal theory exam	Sr. Lecturer & Clerk	Question paper, Answer sheets & Attendance sheet.
5	II nd Internal Practical Exam	Sr. Lecturer, staff Nurse	Answer sheets, attendance sheet,
6	Result display	Clerk	Marksheets, soft and hard copy
7	Preliminary theory exam	Sr. Lecturer & Clerk	Question paper, Answer sheets & Attendance sheet.
8	Preliminary Practical Exam	Sr. Lecturer, staff Nurse.	Answer sheets, attendance sheet
9	Result display	Clerk	Mark sheets, soft and hard copy

2.1 P.G PREPARATORY (MOCK) EXAM (THEORY AND CLINICAL)

SCOPE – Train and evaluate PG students in the subject of oral and maxillofacial surgery for the university exam.

PURPOSE – To train, build confidence and evaluate the learning capacity and knowledge of patient management and theory in the subject of oral and maxillofacial surgery.

RESPONSIBILITY- Professor and pg guide

PROCEDURE-Yearly theory& practical (MOCK) exam will be conducted for final year PG students one month before university exam . Notification about date and time of exam will be forwarded from the office and displayed on the notice board 1 week prior the exam.

Syllabus for the exam – applied basic sciences, minor oral surgery and trauma and maxillofacial surgery

Result Display

Result will be displayed on the display board within 8 days after the theory & practical exam.

FORMS – Exam papers, attendance sheet, mark sheet.

RECORDS-Exam papers and answers sheets of all exams, attendance sheet, mark distribution sheet.

Sr. No.	Activity	Responsibility	Records, / documents
1	Preparatory theory exam	Professor and pg guide	Question paper, Answer sheets & Attendance sheet.
2	Practical mock exam	Two internal and two external examiners	Answer sheets & Attendance sheet.
3	Result display	Clerk	Mark sheets

Theory Exam

Receiving circular from the office regarding conduction of theory and clinical exam



Preparing 4 sets of question paper of all part I to part IV



Question papers are submitted to office



After the completion of theory exam , papers are evaluated and results are displayed on notice board

Clinical exams

Two internal and two external examiners are appointed for the exam



mandibular 3rd molar impaction, 1 long case and 2 short cases are kept for the exam



two days exam will be conducted on scheduled date



Each pg has to perform one mandibular third molar impaction, 3 case history to be taken



Result will be displayed on notice board



2.2 UG UNIVERSITY EXAM

Display of university schedule for online filling of forms and last date of acceptance of forms.



After conduct of internal exam



Showing of mark of internal assessment & confirmation by student's signature prior to sending to university.



Receiving queries, doubts and problems in the mark entry in form of application within 2 days and rectification of the same from respective staff and recommunication to students.



After receipt of university time table for theory and practical commencement and end dates.



For practical exam – display of practical time table with details of batches for theory exam – Display of time table, hall arrangements and rules for conduct of exam.



Distribution of hall tickets



Conduct of exam

3. STUDENT (UG/PG)

3.1 ATTENDANCE OF UG AND PG STUDENTS

SCOPE– To check the regularity of under graduate students in theory and practical classes in the subject of oral surgery.

PURPOSE–to promote the students to attend each and every practical/ clinical and theory class to practice & improve the clinical and theoretical knowledge of the UG and PG students.

RESPONCIBILIT- Professor, Reader, Senior Lecturer, Clerk.

PROCEDURE- Theory and practical attendance register is maintained by the department. Register will be taken to each theory and practical class to note the presence of student in the class. Absentee is marked with red pen. After every month conducted lecture/practical and attended ratio for every student is noted in the register. After completion of the syllabus and prelim exams, total conducted lecture/practical and attended ratio for every student is formed and forwarded to the office. Students having lack of attendance are asked to attend the classes to fulfill the required attendance criteria for appearing university exam.

REQUIRED ATTENDANCE-

Sr. No.	Activity	Responsibility	Records, / documents
1	To update practical attendance of III rd year BDS per class	Sr. Lecturer	Attendance registers.
2	To update clinical posting attendance of IV th year BDS	Sr. Lecturer	Attendance register
3	To update MDS Students	Sr. Lecturer, Reader	Attendance register
4	To update daily attendance register and to mark the absentee of daily classes.	Clerk	Maintenance of register

FORMS – Attendance registers, leave applications, medical certificates.

RECORDS-Attendance registers, leave applications and medical certificate files for every batch.

3.2 QUOTA UG

THIRD YEAR: - UG students are introduced with oral surgery in third year. Every Wednesday 1 hr oral surgery class is scheduled. Introductory lectures and lecture about instruments, local infiltration and nerve blocks, Exodontia, medical emergencies are taken by the staff members in initial few classes and after that the students are given demonstration of the nerve blocks and Exodontia. Following work are completed during third year.

EXERCISES

- Case history (minimum 10)
- Local Infiltration
- Exodontia (minimum 20 extractions)

FORTH YEARE UG

Daily clinical posting (3hrs) and lecture 4 times weekly

Final years are trained to administer nerve blocks. 15 case history are expected to complete the final year quota.

2 internal assessment and one preliminary theory and practical exam are taken during final year. Revision practical classes are scheduled 4-5 days before every practical exam.

EXERCISES

- Case history (minimum 15)
- Local Infiltration, maxillary and Mandibular nerve blocks
- Exodontia (minimum 40 extractions)

3.2 QUOTA PG

MUHS guidelines for post graduate curriculum are strictly followed during 3 years of PG training.

Study of applied basic sciences including practical (wherever necessary), basic computer sciences, Exodontia, seminars on basic topics, selection of dissertation topic, library assignment topic, attending O.T, ward rounds, Medical Record keeping, Pre-clinical exercises, preparation of synopsis and its submission within the six months after admission to the university as per calendar of events.

Rotation and postings in other departments:

General medicine - 1 month

General surgery - 1 month

Ophthalmology - 15 days

Neuro Surgery - 15 days

ENT - 15 days

Orthopedic - 15 days

Plastic Surgery - 15 days

Casualty - 15 days

Anesthesia (ICU) - 15 days

Radiology (CT, MRI, USG) - 15 days

II Year

- Minor oral surgery and higher surgical training
- Submission of library assignment
- Oncology posting – 1 month

III Year

- Maxillofacial surgery
- Submission of dissertation to the university, six months before the final examination. It is desirable to enter general surgical skills and operative procedures.

Other work to be done during PG for first year

- Its mandatory to attend research methodology workshop for first year PG
- Topics for dissertations are allotted within first month of first year PG Protocol for dissertation to be submitted on or before the end of six months from the date of admission.
- **Seminars:** One Seminar per week to be conducted in the department. A minimum of five seminars should be presented by each student each year
- **Journal club:** One Journal club per week to be conducted in the department. A minimum of five JC should be presented by each student each year
- Under graduate classes: Around 4- 5 classes should be handled by each post-graduate student
- Inter-departmental meetings: should be held once in a month.
- Case discussions
- Basic subjects classes
- Term paper for basic subjects.

Other routine work as follows for second year

1. Seminars: One Seminar per week are conducted in the department. Each student presents a minimum of five seminars each year. Every Tuesday and Friday is scheduled for JC and seminar.
2. Journal club: One Journal club per week is conducted in the department. Each student should present a minimum of five seminars each year. Every Tuesday and Friday is scheduled for JC and seminar.
3. 5 copies of Library dissertation should be submitted on or before the end of second year.
4. Undergraduate classes: each post-graduate student takes around 4-5 classes.
5. Inter-departmental meetings: held's once in a month
6. Chair side Case discussions is done with all the staff members and students
7. Field visits: To attend dental camps and to educate the masses.
8. Internal assessment 15 days gap after every paper.
9. Dissertation work: On getting the approval from the university work for the dissertation to be started.

Third Year: exam going PGs should submit their dissertation before 6 months of exam. Incomplete dissertation will not be allowed to appear for the exam.

At least 2 departmental theory exams are conducted before the mock practical exam. Mock practical exam is conducted 2 months before final exam.

Other routine work as follows:

- Seminars: One Seminar per week to be conducted in the department. Each student should present a minimum of five seminars each year.
- Journal Club: One Journal club per week to be conducted in the department. A minimum of five seminars should be presented by each student each year.
- Under graduate classes: each post -graduate student, should handle around 4-5 classes.
- Exam cases revaluation.
- Inter-departmental meetings: held once in a month.
- The completed dissertation is submitted 6 months before the final examination
- Field visits: student should attend dental camps and to educate the masses.

B. CLINICAL & PATIENTS

1. SCREENING DIAGNOSIS & TREATMENT PLANNING

SCOPE-The Department of oral and maxillofacial surgery deals with screening, diagnosis and treatment planning of cases with carious tooth and impacted tooth, cyst, tumors, and other minor surgical procedures, maxillofacial surgery procedures.

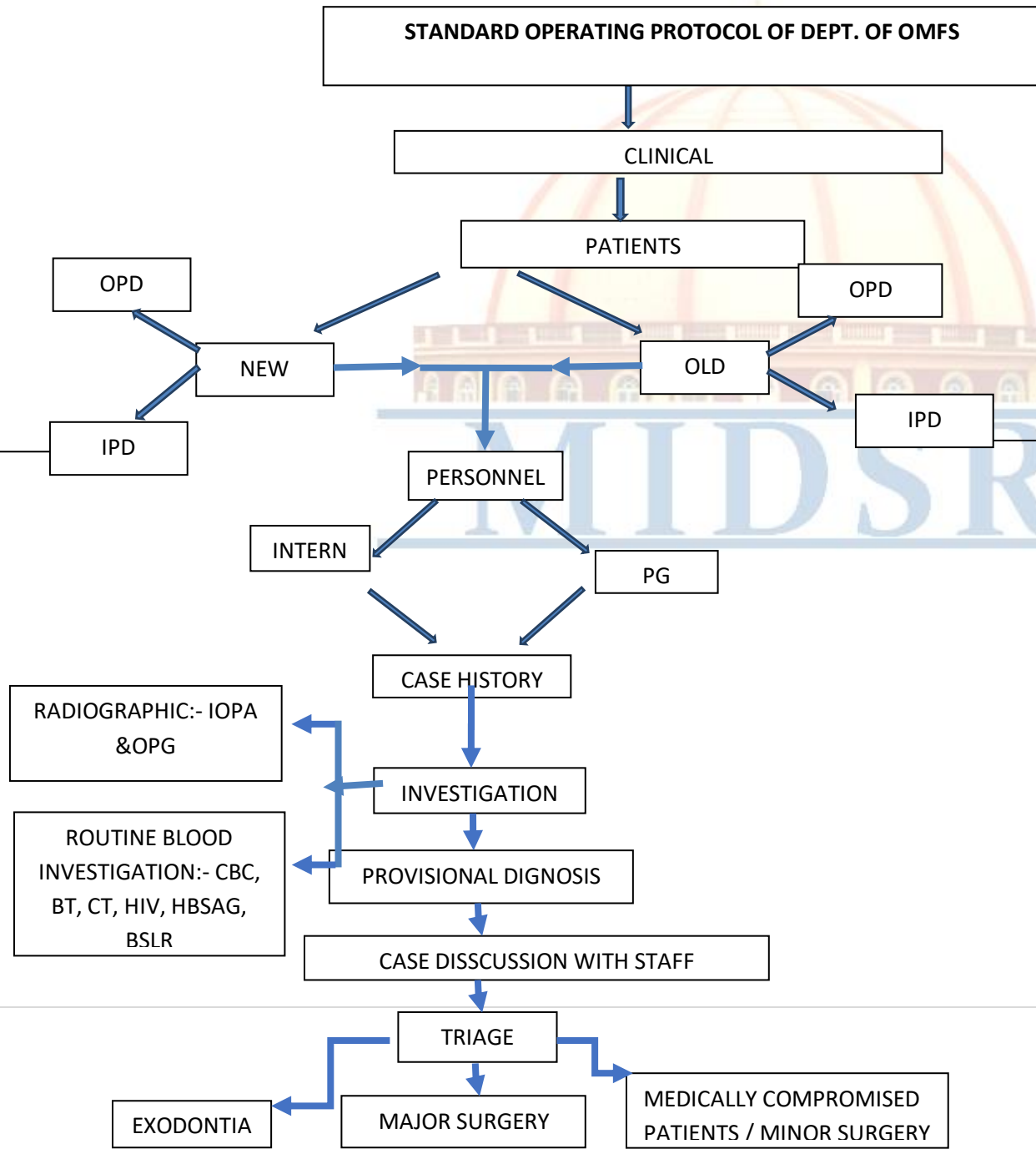
PURPOSE- To ensure that essential and adequate treatment will be provided to all the patients. To respond to the need and expectations of the patients and to enhance patient satisfaction.

RESPONSIBILITY - The department clerk is responsible for registering a patient who is referred to the department and segregating them into new patients and follow-up patients.

The department nurse is responsible for monitoring the respective OPD unit functioning, maintaining patients records, instrument sterilization and assisting the working doctor.

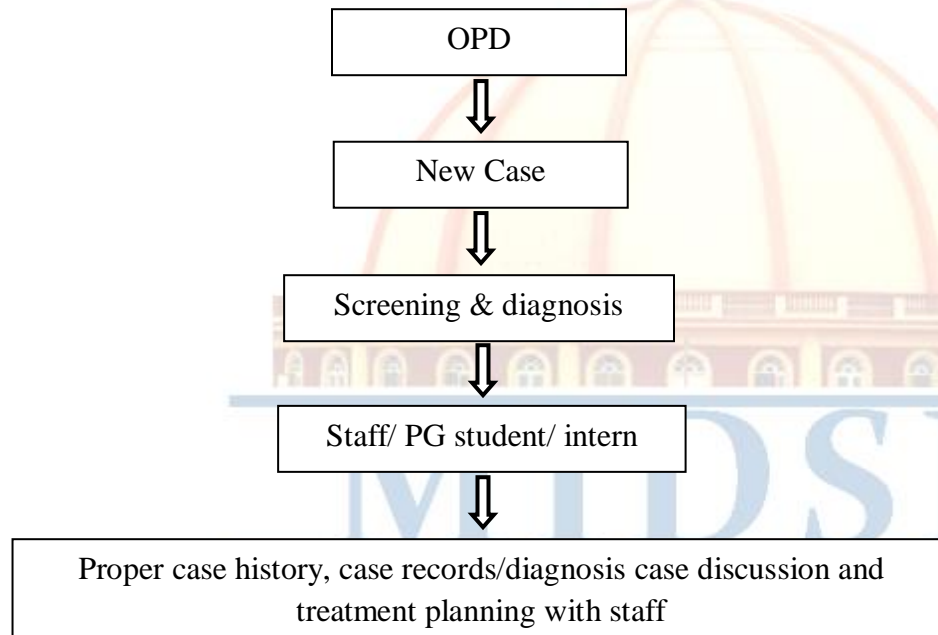
The staffs are responsible for screening diagnosis of all new patients and for determining the line of treatment.

The staffs and post graduate students are responsible for the diagnosis & treatment planning of orthodontic patients and their treatment follow up.



Sr. No.	Screening Diagnosis & Treatment Planning	Responsibility
1	Patient who reports to the college will be examined (new opd)	Staff /PG student/ Intern
2	New OPD patient will be allotted depending upon severity of condition of patient	Staff / PG student / Intern
3	Case history, intra-extra oral photographs, intraoral and extraoral radiographs.	Staff / PG student
4	Records of the patient, chair side assistant clerk, Instrument sterilization	Nurse
5	Diagnosis Case discuss on and treatment planning	Staff / PG student
6	Minor and major Surgical procedure	Staff / PG student
7	Patient follow up	Staff / PG student

Screening Diagnosis & Treatment Planning



2. ALLOTMENT

Scope-The Department of oral surgery deals with screening, diagnosis and treatment planning of cases with carious tooth and impacted tooth, cyst, tumors, and other minor surgical procedures, maxillofacial surgery procedures.

After proper screening and diagnosis these patients' are allotted to the staff/ pg/ interns.

Purpose-To ensure that examination, diagnosis and adequate treatment will be provided to all the patients. To respond to the need and expectations of the patients and to enhance patient satisfaction.

Responsibility-The department clerk is responsible for registering a patient who is referred to the department and segregating them into new patients and follow-up patients.

The staffs are responsible for screening diagnosis of all new patients and allotment will be done based on severity of case.

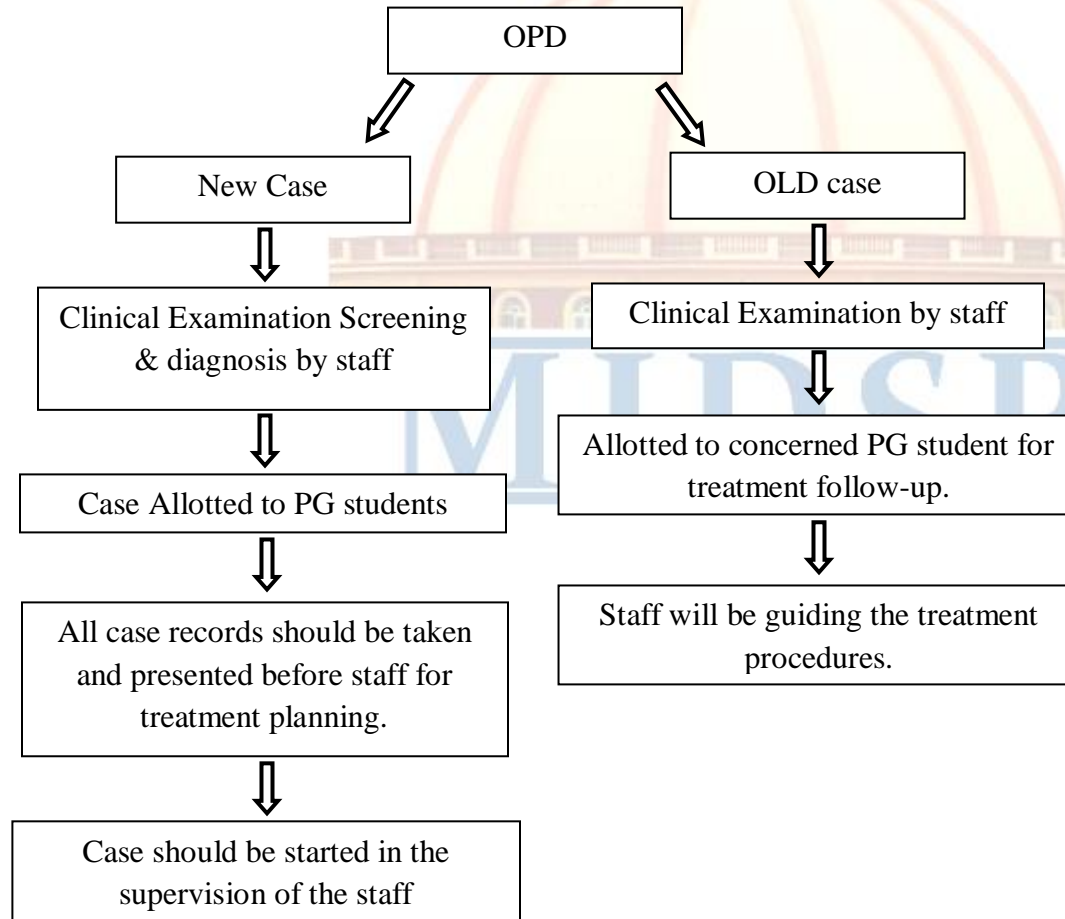
The staffs and post graduate students are responsible for the diagnosis & treatment planning of allotted surgical patients and their treatment follow up.

Sr. No.	Allotment	Responsibility
1	Patient who reports to the college will be examined (new opd)	Staff /PG student/ Intern
2	New OPD patient will be allotted depending upon severity of patients condition	Staff

3	Case history, intra-extra oral radiographs, impression, lateral ceph and opg. Model analysis will be done	PG student
4	Records of the patient, chair side assistant clerk, Instrument sterilization	Nurse
5	Diagnosis Case discuss on and treatment planning	Staff / PG student



Allotment



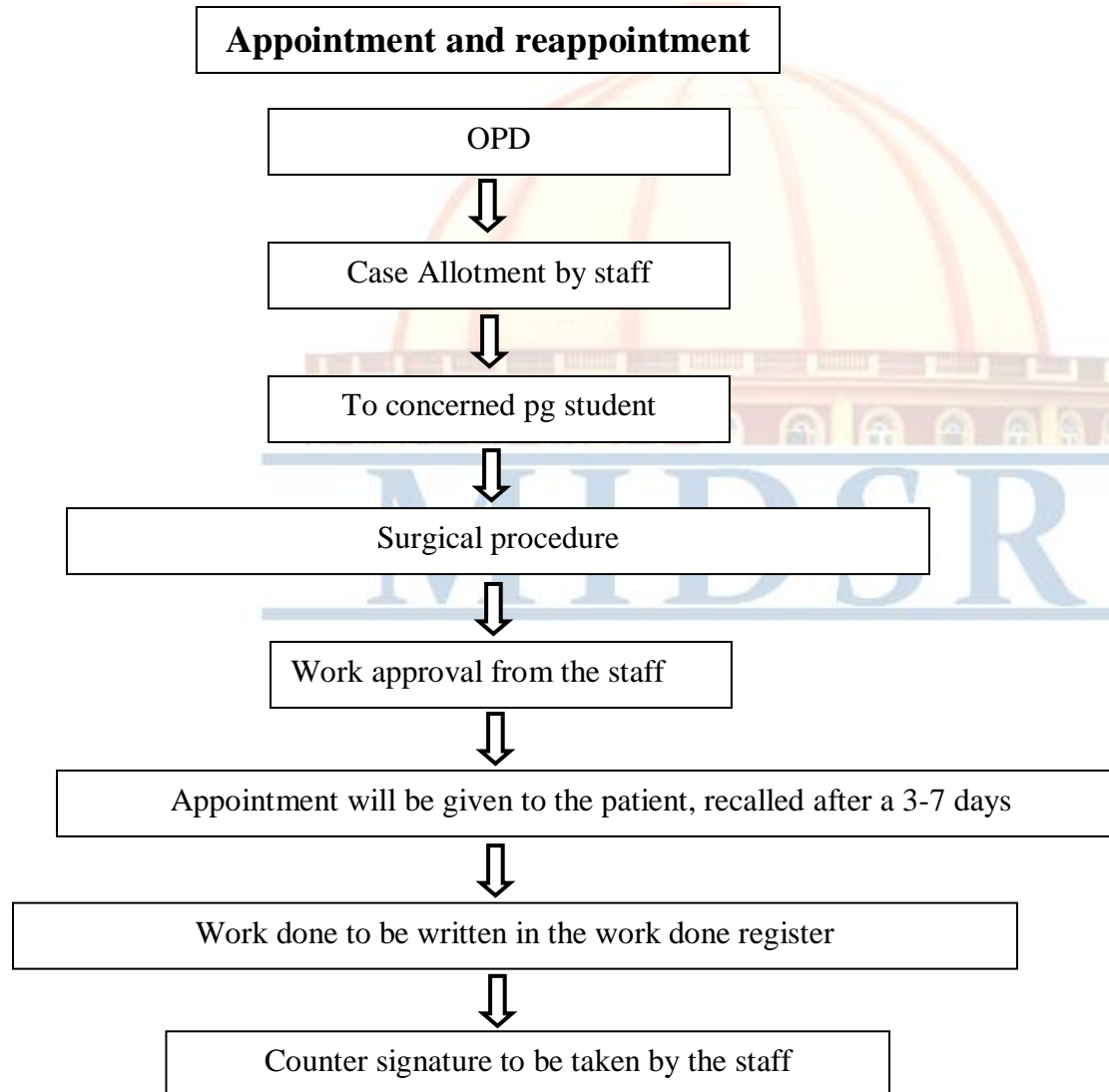
3. APPOINTMENT & REAPPOINTMENT

Scope- Since oral and maxillofacial surgical treatment is complex procedure so we need to call patients after a 3-7 days for follow up.

Purpose- To check for any postoperative complication. To treat if any complication occur.

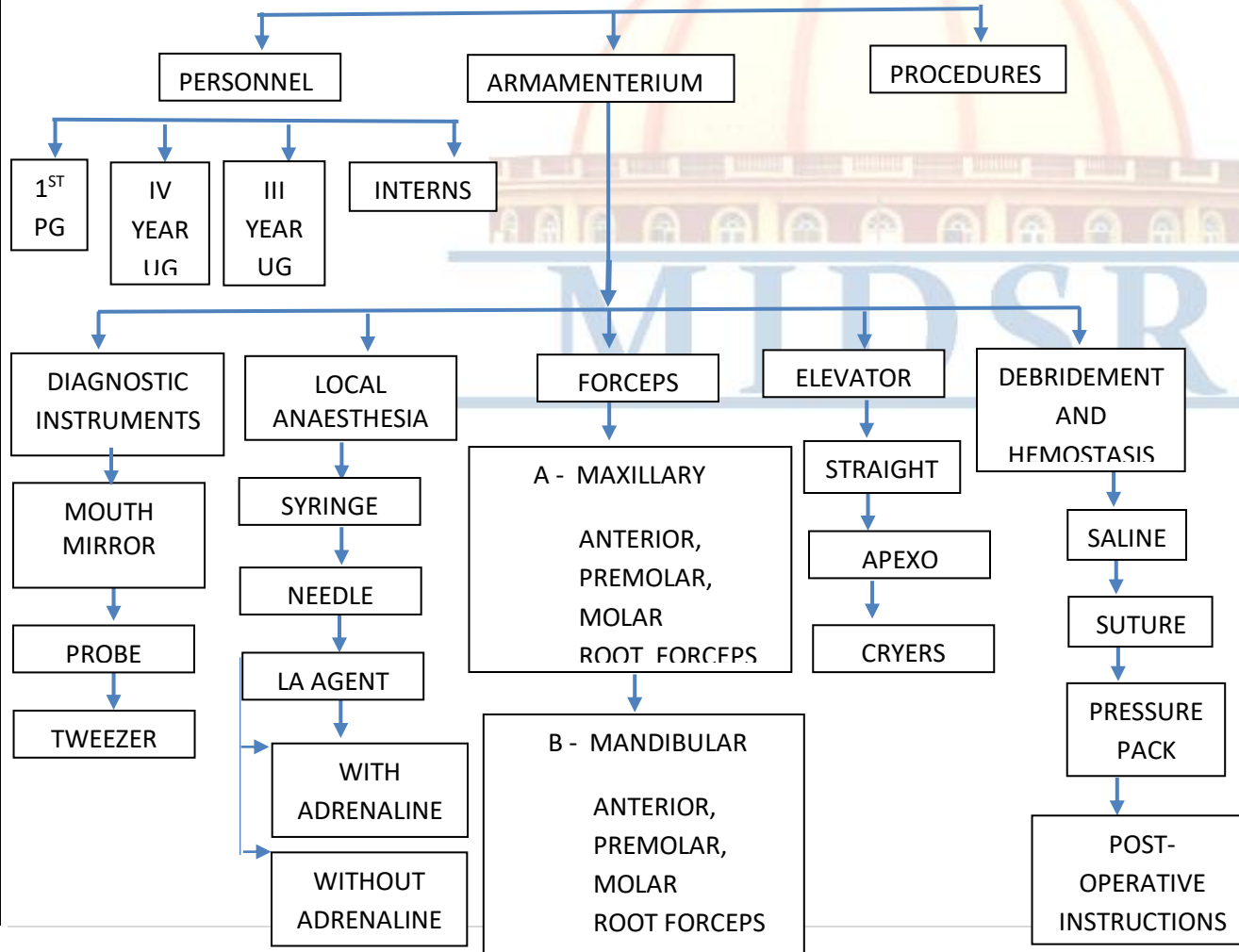
Responsibility- The patient appointment will be given after activation of the appliance. The appointment and reappointment will be given by the concerned staff/ pg students. All pg students should maintain appointment register The staff supervises the clinical work of Interns & PG students. The clerk maintains appointment information of the patient in the regi

Sr.No.	Activity	Responsibility	Records, / documents
1	OPD(OLD)	1 st yr PG and Intern	OPD registration, case paper, appointment card
2	Allotment	Concerned staff/ pg student	entered work done register
3	Surgical procedure	Respective PG /	Case history, diagnostic radiograph, intraoral and Extraoral photographs. Work done to be written in register and case paper
4	Appointment after a 3 days	Respective PG	Work done to be written in register and case paper
5	Reappointment after 7 days for follow up and suture removal if any	Respective PG	Work done (treating any complication if any and suture removal) to be written in register with staff counter signature

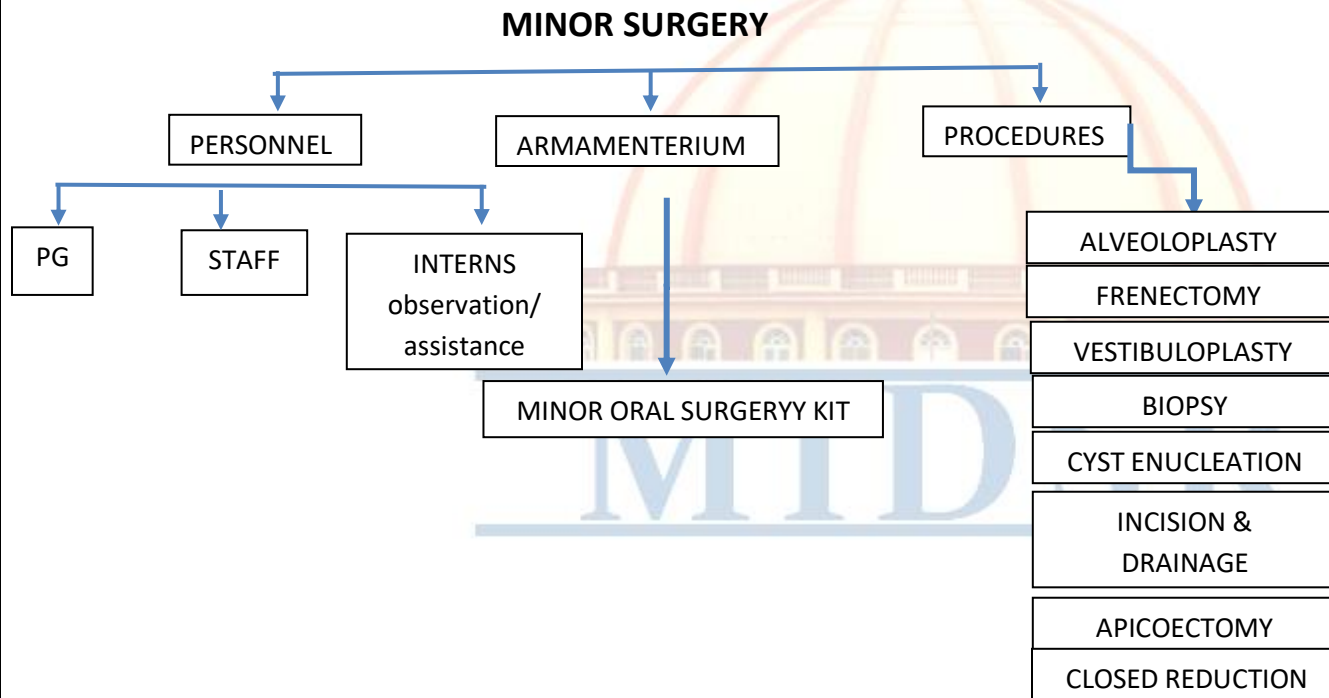


4. TREATMENT PROVIDED IN DEPARTMENT

4.1 STANDARD OPERATING PROTOCOL FOR EXODONTIA

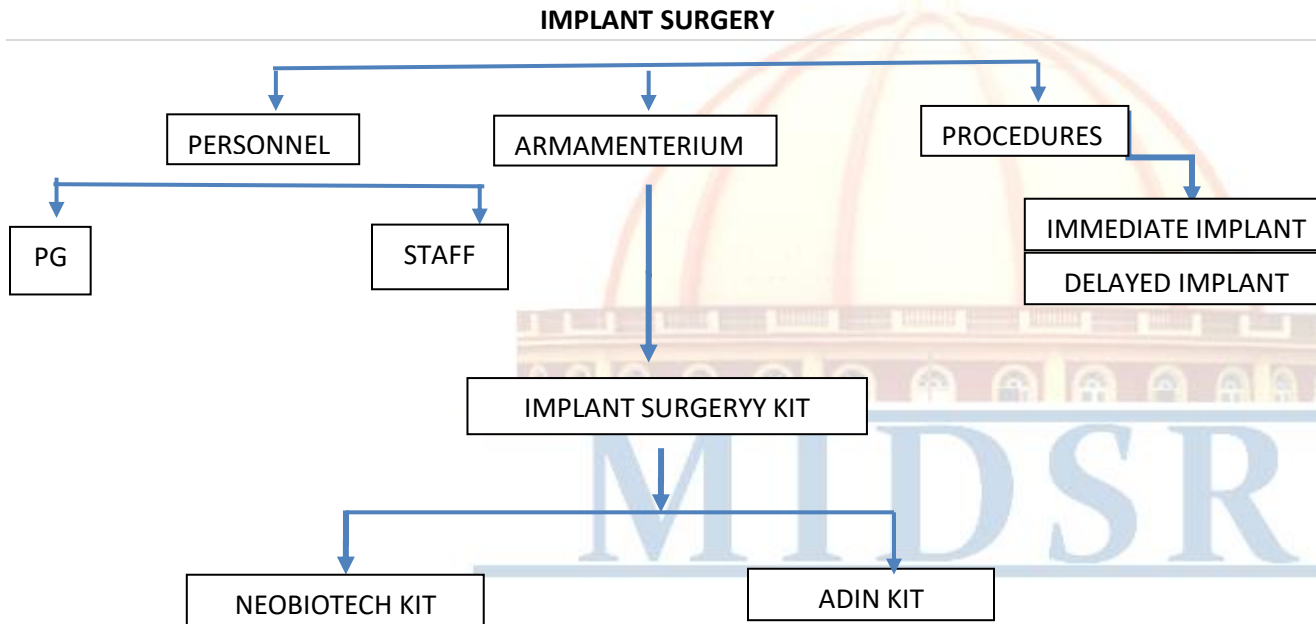


4.2 STANDARD OPERATING PROTOCOL FOR MINOR SURGERY



NOTE- All these procedures are done under Local anesthesia in department under aseptic conditions

4.3 STANDARD OPERATING PROTOCOL FOR IMPLANT SURGERY

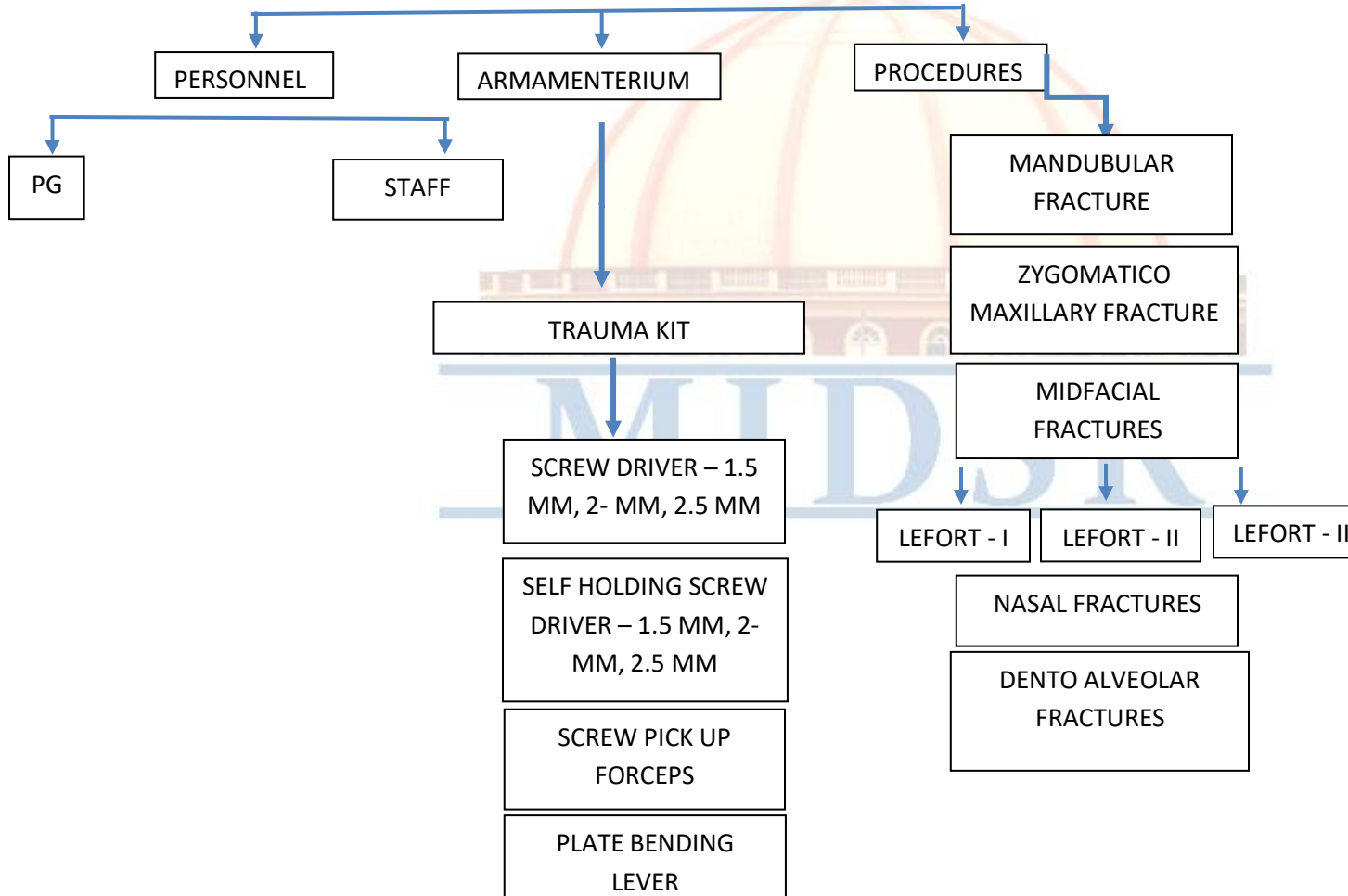


NOTE- All these procedures are done under Local anesthesia in department under aseptic conditions.

Physiodispenser and implants of different sizes if not available in department then it will be borrowed from department of Prosthodontics and Periodontics.

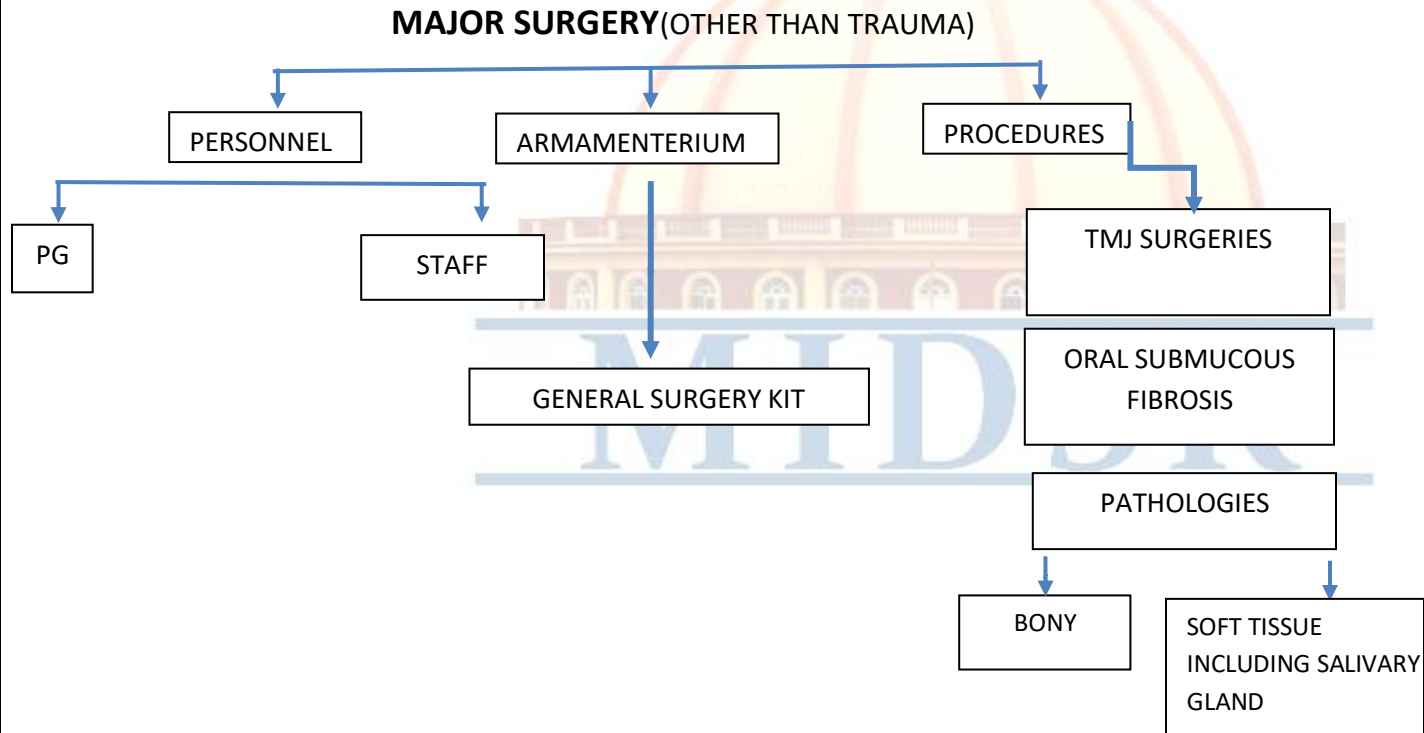
4.4 STANDARD OPERATING PROTOCOL FOR MAJOR SURGERY

MAJOR SURGERY (TRAUMA)



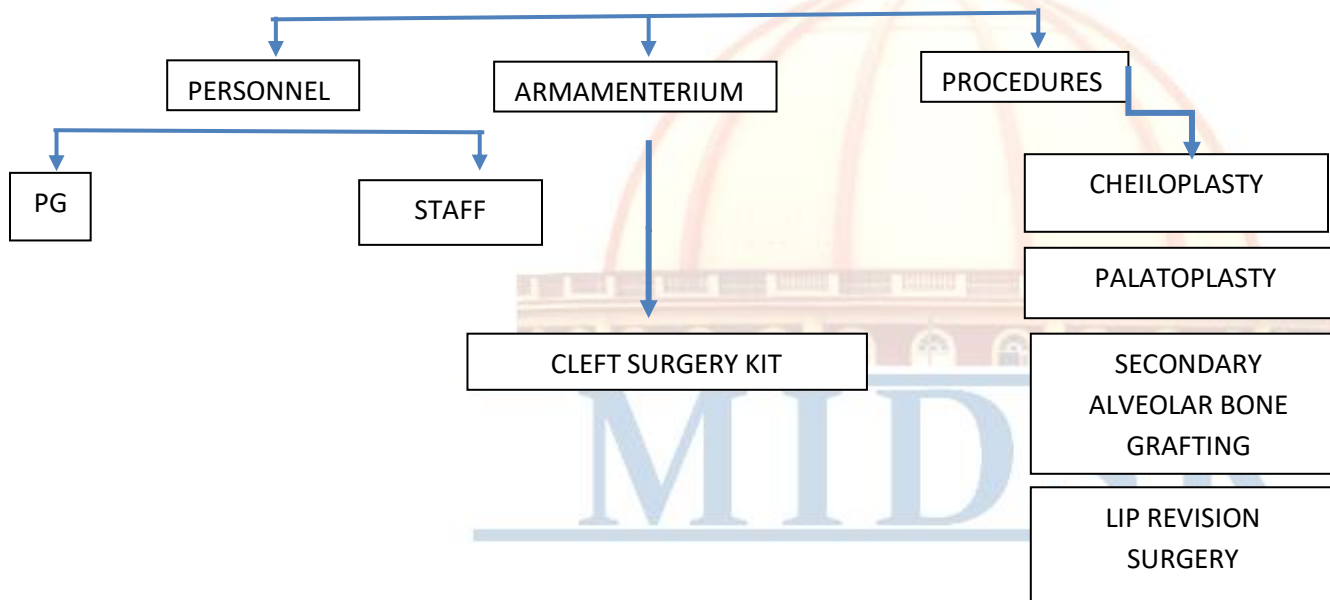
NOTE- All these procedures are done under General anesthesia in Operation Theater under aseptic conditions

4.5 STANDARD OPERATING PROTOCOL FOR MAJOR SURGERY



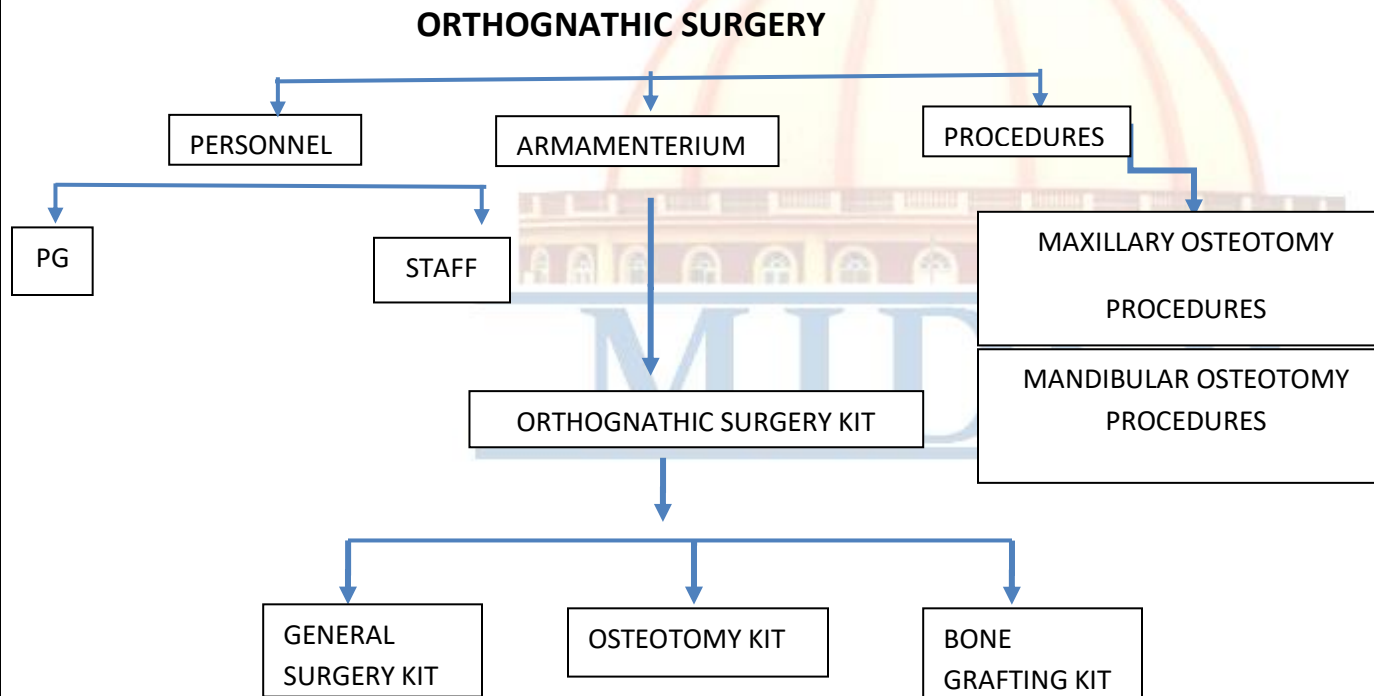
NOTE- All these procedures are done under General anaesthesia in Operation Theater under aseptic conditions

4.6 STANDARD OPERATING PROTOCOL FOR CLEFT SURGERY



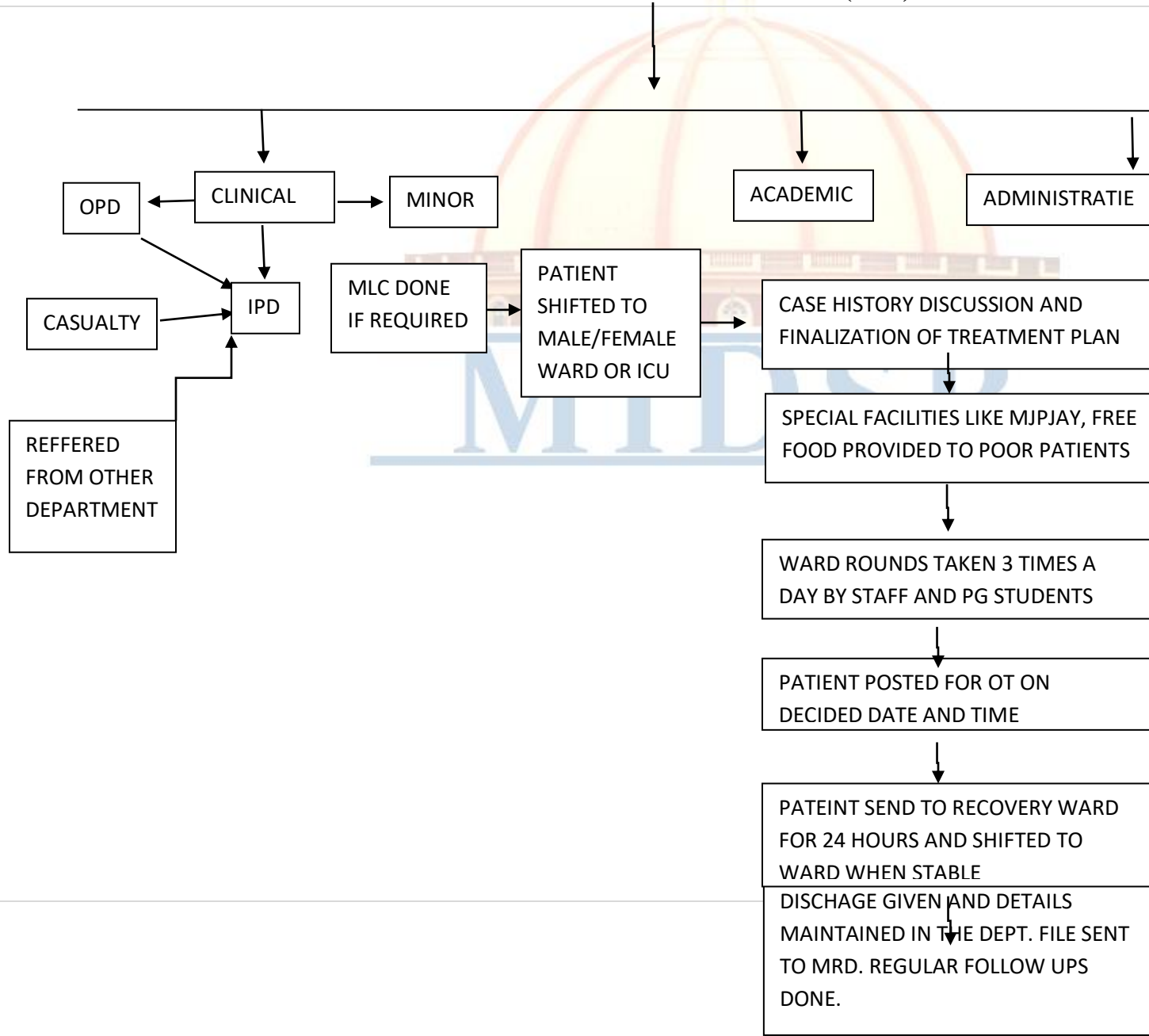
NOTE- All these procedures are done under General anesthesia in Operation Theater under aseptic conditions

4.7 STANDARD OPERATING PROTOCOL FOR ORTHOGNATHIC SURGERY



NOTE- All these procedures are done under General anesthesia in Operation Theater under aseptic conditions

4.8 STANDARD OPERATING PROTOCOL FOR IN PATIENTS (IPD) MANAGEMENT



REFERRAL MANAGEMENT

SCOPE- Interdisciplinary management.

PURPOSE – To obtain functional efficiency, esthetic harmony and structural balance.

RESPONCIBILITY- 2nd&3rd year PG will refer the case under the supervision of reader, professor, & PG guide.

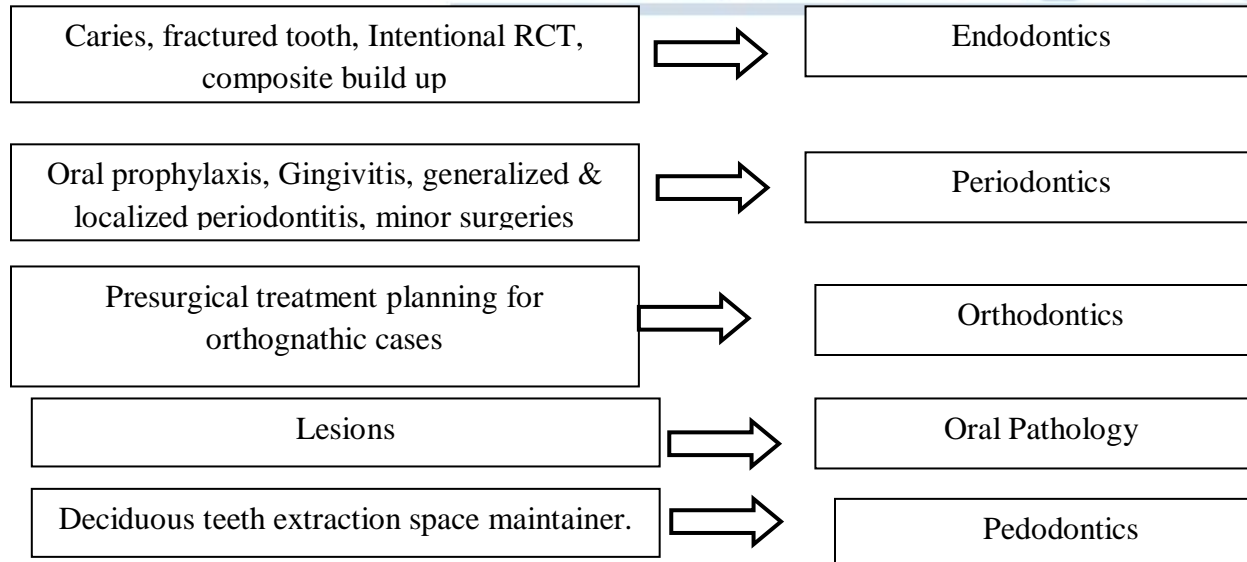
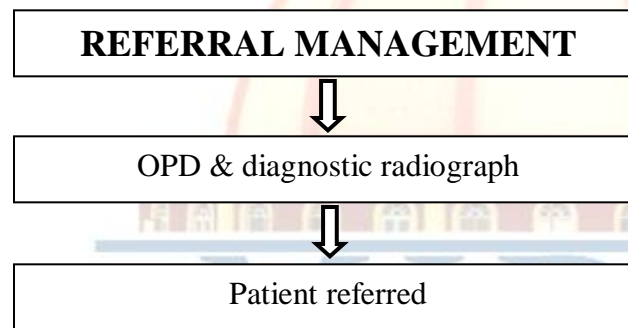
PROCEDURE-For referring the case before starting the treatment 1st year PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs and refer the patient as per need, then patient is then allotted to the 2nd year PG. the PG will take the diagnostic record, evaluate the case and prepare case file.

On the second visit the case will be presented in front of reader, professor and guide for treatment plan discussion. In between the treatment patient will be referred for oral prophylaxis, rehabilitation according to the need of case.

Sr. No.	Activity	Responsibility	Records, / documents
1	OPD	1 st yr PG	Diagnostic radiograph, OPD registration
2	Allotment	1 st yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radiograph, intraoral and extraoral photographs, blood investigations.
4	Case presentation	Respective PG	Consent form, staff from staff.
5	Referring the case	Respective PG	Inter departmental register

FORMS -Consent form, case history sheet, OPD register, work done register and inter diceplanery register.

RECORDS- Case history, intraoral & extraoral photographs, diagnostic radiographs, blood investigations.

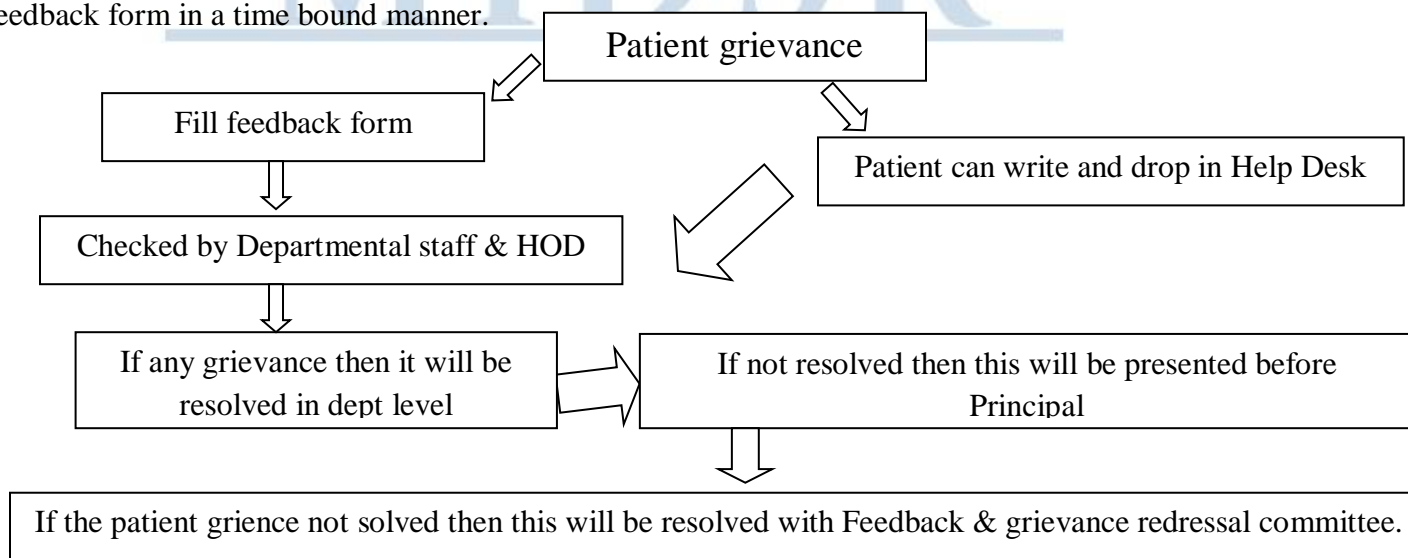


5. FEEDBACK & GRIEVANCE REDRESSAL MECHANISM

SCOPE- The procedures described in this document shall be followed by designated staff of the department and grievance committee of the college for dealing with patients grievances received through helpdesk and the treatment feedback received from the patients.

PURPOSE: A “grievance” is defined as any communication that expresses dissatisfaction about an action or lack of action, about the standard of service/deficiency of service or asks for remedial action. The purpose of this SOP is to outline an efficient and effective grievance redressal mechanism for the patients. Any grievance raised by an patients on various issues are logged in a defined manner. Complete transparency is maintained, Grievances logged should be attended to and resolved as per the defined turnaround time, To ensure that any unresolved grievance is escalated to the appropriate level

RESPONCIBILITY: Departmental staff and grievance redressal committee which shall be responsible for resolving patients grievances received from feedback form in a time bound manner.



6. PAYMENT METHODOLOGY

SCOPE- To keep record of patients and payments.

PURPOSE – To keep record of patients and payments for yearly audit & record maintenance.

RESPONCIBILITY- Interns, department Clerk and sister

PROCEDURE- Intern will attend the patient on his/her first& follow up visit's, they will register, and appointment register, once the patient is appointed to PG on first visit of treatment patient will pay the initial payment which will be noted on his case paper by PG, on Payment record by sister and on every follow up visit same will be done. Daily Clark will update the payment and patient entries in the college software

Sr. No.	Activity	Responsibility	Records, / documents
1	OPD register Entry	Intern	Case Paper Entry in opd register
2	Payment Entry	Sister	Payment Entry in payment Register
3	College Software Entry	Clerk	Will be update the payment and Daily work done entries in college software

FORMS –Attendance sheet, marks aggregate.

RECORDS - Academic records like attendance register, journal, log book, LD, thesis etc. will be kept in department store.

7. RECORD MAINTAINING

SCOPE-Preserving the data for academic and legal purposes.

PURPOSE –To make the data easily available for guidance and to help in study.

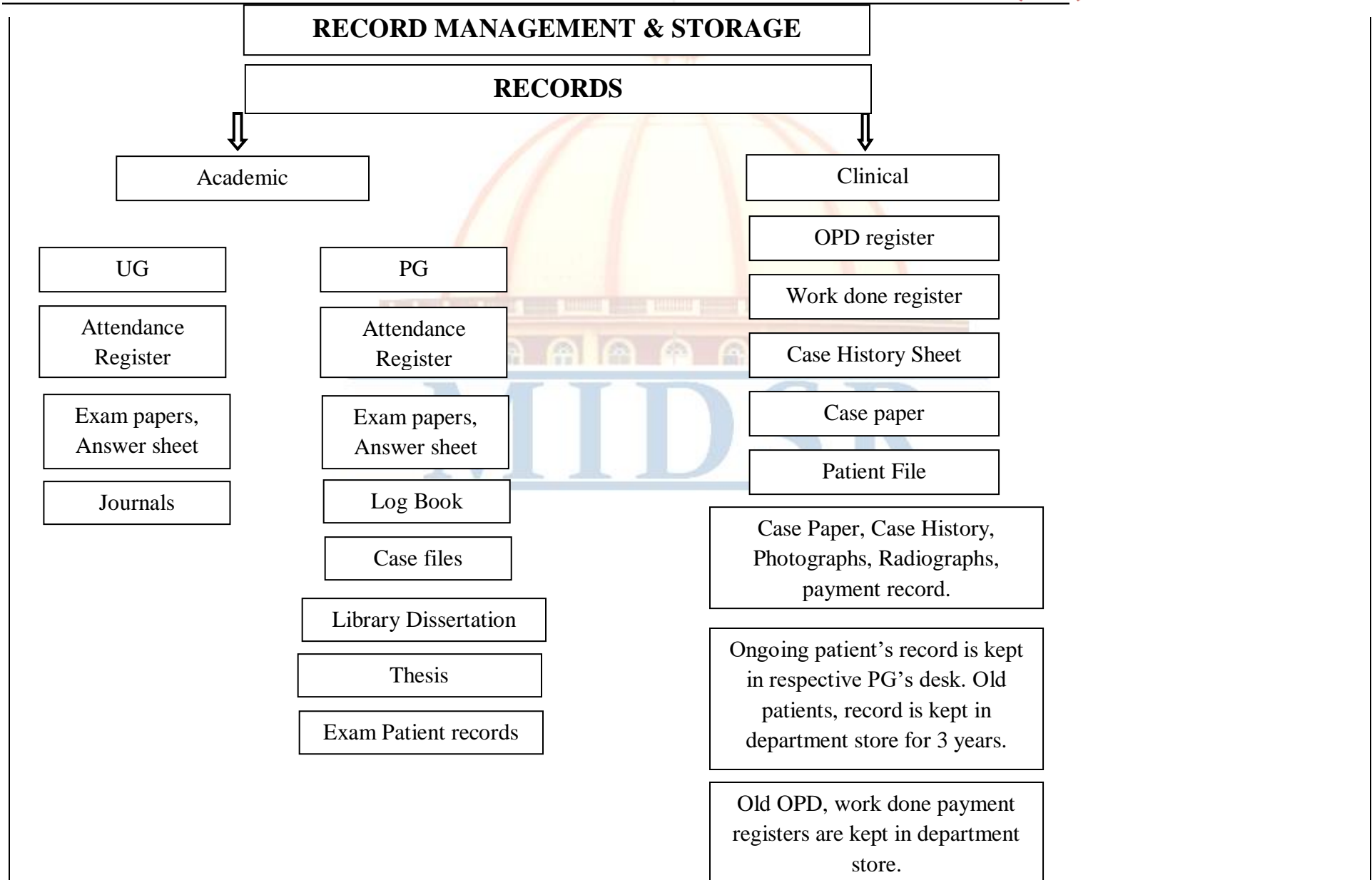
RESPONCIBILITY-Interns, 2nd&3rd year PG, Clark of department.

PROCEDURE- on the first visit to the department patient will be registered in departmental OPD register. After allotment patient will be entered in allotment register. As the case is started in the department case history will be recorded and case file will be prepared. With every visit patient will be entered in work done register. After finishing the case the records will be submitted to the department. These records will be kept in department store for 3 years.

Academic records like attendance register, journal, log book, LD, thesis etc will be kept in department store.

FORMS-consent form, case history sheet, OPD register, work done register, and inter disciplinary register.

RECORDS- case history, intraoral &extra oral photographs, radiographic investigations, blood investigations.



8. BIOMEDICAL WASTE MANAGEMENT

SCOPE-To dispose biomedical other departmental west.

PURPOSE –To maintain hygiene departmental working area by proper clinging and west disposal

RESPONCIBILITY-Clark, sister, class IV staff,

PROCEDURE- Every working chair has 2 dust bins one for gloves & masks, another for sharp objects like wires band materials etc. one big dust bin in wet lab for impression disposal. 2 containers in PG room, HOD cabin, reader room, waiting & reception area has one bin each separately. waste collection and transfer to the disposal is done by class IV staff of the department daily in morning before starting of clinical working. The west is disposed in the incinerator. Daily record of weight and timing of west collection is noted in the register. West is collected in following order.

Sr. No.	Activity	Responsibility	Records, / documents
1	Waste collection	Class IV staff	Biomedical Waste collection registers.
2	Waste disposal	Class IV staff & staff of biomedical waste department staff	Biomedical Waste collection registers.

1. Removable Appliances with wire component (Used/Broken not to be worn by patient anymore) Sharps	Container containing 1% Sodium hypochlorite
2. Wires, steel ligatures, Needles after being burnt, Sharps	Container containing 1% Sodium hypochlorite
3. Wax bite registrations	Red container
4. Mouth mask, Gloves	Red container
5. Head cap, Shoe covers	Black container
6. Infected cotton	Yellow container
7. Syringe (after breaking at Hub in Needle destroyer)	Red container
8. LA bottles	Black container If broken Sharps container.

FORMS – Biomedical Waste collection registers.

RECORDS-Biomedical Waste collection registers with daily weight of collected waste and time of Collection.

C. ADMINISTRATIVE WORK

1. LEAVE APPLICATION

SCOPE –All teaching and non-teaching staff of the department can avail leave (Casual/Medical/earned leave (non teaching staff))

PURPOSE – This is a procedure to avail leaves for the department staff for the purpose of personal work or any health problem.

RESPONSIBILITIES – All teaching/non-teaching staff are required to apply for relevant leave and ensure that the leave has been approved prior commencement of leave.

Leave application to be signed by receiver and Head of department.

HOD should approve the leave within the period allocated.

EST Section will check the attendance and ensure all absence is supported with a valid leave which has been approved.

PROCEDURES - Procedure for Leave Application. Applicant should fill leave application to apply for the leave. Fill Date; Leave Period, Leave Type and Reason. Name and signature of reliever should be mentioned. HOD Approval, through department outward register send it for principal approval. Leave is approved by principal.

Leave Application Policy

Application for continuous leaves which is 3 days and above (inclusive of Rest Day and Public Holiday) shall be submitted 14 days in advance.

Application for leave less than 3 days could be applied before the commencement date of the leave. However, for the ease of job arrangement, staff is advised to provide sufficient notification period.

The Leave Application will route to reliever within 10 minutes after the staff has submitted their leave application.

All leave applications shall be selected with a reliever, except for Medical Leave.

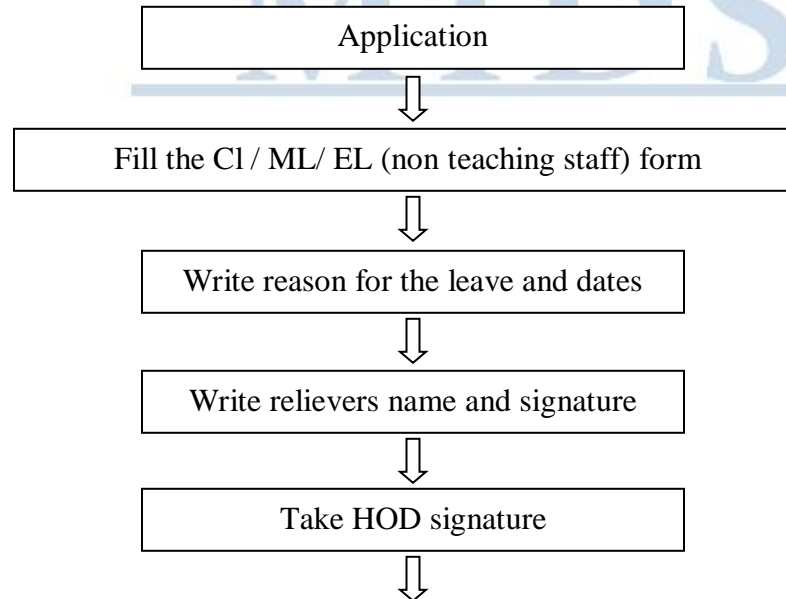
Leave Application Policy (Con't)

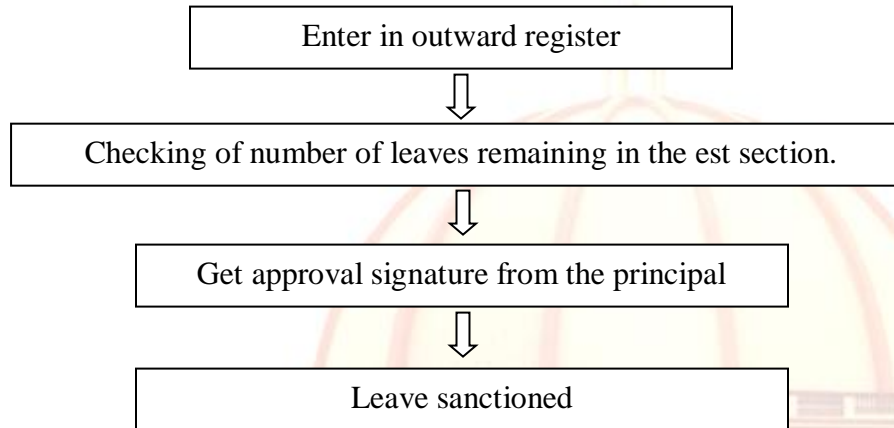
Medical Leave shall be applied when the staff resumes work and medical certificate should be forwarded to Principal for verification and recording which has been endorsed by respective superior.

For staff who entitles for Replacement Leave, application of Official Duty Leave shall be granted approval in which EST section will then include the entitled replacement leave onto their leave entitlement. The Replacement Leave shall be utilized within 2 weeks after the official duty, otherwise it will be forfeited.

Unless with valid reason(s) and documentary evidence, emergency leave or leave without prior approval is not encouraged and shall be avoided.

LEAVE APPLICATION





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2. NEW JOINING

Scope - The scope of this sop is applicable for the new joining staff at the department.

Purpose – The purpose is to promote and maintain high standards of professional requirement practice of encouraging new recruiter to achieve to best practices.

To maintain professional standards of the department and explain best practice to ensure recruiter.

Responsibility-The head of the department is responsible for the accepting the joining letter. The new joining staff is report to get letter of appointment from you principal the new joining staff should write a letter of joining and submit to the head of the department. The department HOD and the staff are supposed to explain department rules and regulation.

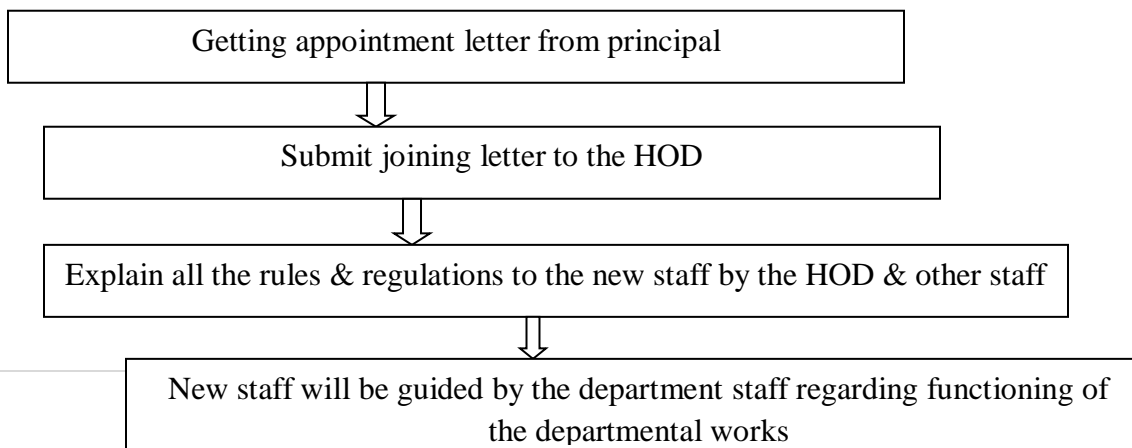
Procedure –An appointment letter shall be formally issued by the Principal.

On the day of joining the employee shall be formally given a letter of Appointment stating the Salary and other conditions of service prescribed from duly signed by the Principal.

On appointment, an employee shall be given a job description by Principal and Departmental Head.

Employee shall submit a joining report to head of the department.

New staff has to submit the required documents to the department and EST section.



3. SOP OF WORK DISTRIBUTION

Preface - Department of Oral & Maxillofacial Surgery encompasses undergraduate and post graduate sections with academic & clinical work. For smooth functioning of department work distribution among staff members is necessary.

Total number of Teaching Staff: 09

1. Professor and HOD- 01
2. Professor- 0
3. Reader- 03
4. Lecturer- 03
5. Tutor- 02

Total number of Non-Teaching Staff: 05

1. Clerk- 01
2. Nurses/Sister- 02
3. Peon- -02

1. Work distribution among teaching staff

In-charge (Work) distribution:-

Professor and HOD - Administration (UG & PG)
PG academic and clinical work

Professor and P.G Guide: Dental Implant Incharge
PG academic and clinical work

Reader: PG Department Incharge

Lecturer: UG 3rd & Final year students (theory & lectures).

UG Section Work Distribution:-

Days	OPD & Clinical work	Academic & Discussion
Monday	PG student & Lecturer	PG Guide & Reader
Tuesday	PG student & Lecturer	PG Guide & Reader
Wednesday	PG student & Reader	PG Guide & Reader
Thursday	PG student & Reader	PG Guide & Reader
Friday	PG student & Lecturer	PG Guide & Reader
Saturday	PG student & Lecturer	PG Guide & Reader

PG Section Work Distribution

PG seminar and JC days: Tuesday:- 9am to 10:30am Friday:- 9am to 10:30am	All teaching staff
PG Clinical work (Case discussion, treatment planning patient monitoring)	HOD, Professor & Reader
PG Academic work (Thesis, LD, Article publication work)	Professor, PG Guide & Reader

Clerk-

- To store and maintain record of department
- To help in patient management OPD and patient allotment, patient payment record management.
- To maintain record of internal assessment of UG students and PG students

- To coordinate with office clerks.
- Help during various inspections
- Provide feedback forms to the patients and maintain record of feedback and grievance.

Nurses/Sister – Assisting for staff and PG students in patient management.

- To store and maintain record of department
- To keep record of all consumable and non consumable materials.
- To coordinate with the store for all consumable and non consumable materials.
- To monitor work of peons in the department
- To maintain record of laundry and Bio-Medical waste management.
- To maintain record of maintenance of dental chairs and equipments.

Peon-

- Cleanliness of the department .
- Help nurse in administrative work of department.
- To coordinate with laundry and Bio-Medical waste department.

4. DEPARTMENTAL RECORD KEEPING & DOCUMENTATION

SCOPE – The scope of this SOP is to maintain department records and storage of these records & standardize academic protocols.

PURPOSE – The purpose of the procedure is to outline the responsibility & requirements in the record maintenance of the storage.

RESPONSIBILITY- The departmental teaching & non teaching staff are responsible for maintaining, updating and storage of the departmental records.

Sr. No.	Records	Responsibility
1	Staff Personal Files	Staff / Clerk
2	Staff Publication file	Staff / Clerk
3	OPD Register (OLD/NEW)	Clerk / Staff Nurse
4	Case paper Files	Staff / PG students
5	Ward Registers	Staff / PG students
6	Appointment register	PG students/ Clerk
7	Stock Register	Staff Nurse
8	Material Issue Register	Staff Nurse
9	Indent register	Staff Nurse

10	Seminar Register	PG students/ Clerk
11	III BDS theory attendance register	Staff / Clerk
12	III BDS clinical posting register	Staff / Clerk
13	IV BDS theory Attendance register	Staff / Clerk
14	IV BDS clinical posting Register	Staff / Clerk
15	Interns attendance register	Staff / Clerk
16	PG students attendance register	Staff / Clerk
17	Circular File	Clerk
18	PG leave letter file	Clerk
19	Movement register	Clerk
20	CDE files	Staff / Clerk
21	Fumigation register	Staff Nurse
22	PG Academic Files	PG Students
23	UG Exam Paper Files	Staff/ Clerk/ Staff Nurse

24	UG Record Books	Staff / Clerk
25	PG Exam paper files	Staff / Clerk
26	PG record books	Staff / PG students
27	NAAC files	Staff / Clerk
28	Photography Room register	Staff / PG students
29	Museum Register	Technician
30	Interns work done register	Staff
31	Loan Book	Staff Nurse
32	Laundry register	Peon
33	Waste disposal register	Peon
34	DCI Inspection File	Staff Clerk

5. SOP OF DATA STORAGE

SCOPE -It comprises manual and digital storage of various academic, clinical and administrative records.

PURPOSE - Department encompasses various sections like academics of undergraduate postgraduate, clinical part of undergraduates and postgraduates, along with administration. It is necessary to store required data for smooth functioning of department.

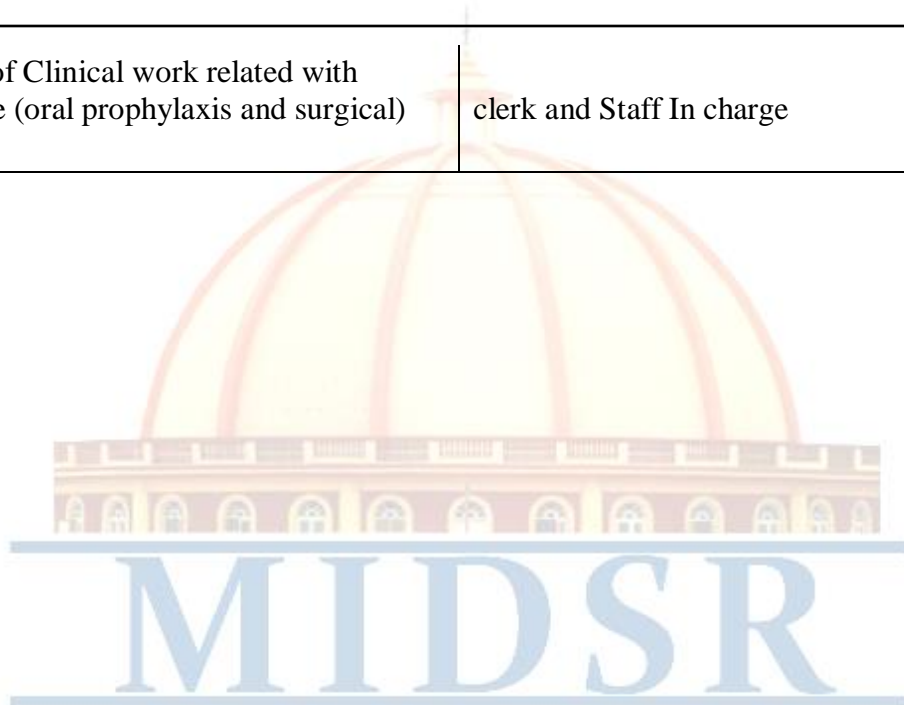
Sr. No.	Activity	Responsibility	Record
1	Theory lecture attendance of 3 rd year and 4 th year	Staff conducting the lecture.	Attendance register
2	Clinical posting attendance of 3 rd year and 4 th year recorded in attendance register	Staff Incharges of 3 rd year and 4 th year respectively	Attendance register
3	Interns attendance of rotatory posting	Interns Staff Incharges	Attendance register
4	Storing personal file of Under graduates comprising formative assessment answer sheets.	Clerk and Staff In charge of 4 th year	Answer sheet
5	Betterment Exam Answer sheets of Undergraduate Repeaters	Clerk and Staff In charge of 4 th year	Answer sheet
6	Postgraduates attendance recorded in attendance register	Staff In charges (Post graduates)	Attendance register
7	Storing Post Graduates Thesis	Clerk and Post graduate Staff In charges	Hard copy in dept. library

8	Storing personal file of postgraduates comprising formative assessment answer sheets	Clerk and Post graduate Staff In charges	Files
9	Personal files of all teaching and non-teaching staff	Clerk and Staff In charge	Files
10	Record of Clinical work related with OPDs, work done (oral prophylaxis and surgical) and payments.	Clerk and Staff In charge	Work done register
11	Completed cases files, photograph file, seminar conducted by pgs hard copy	Clerk and nurse	Dept. store

**SOP OF ACADEMIC MANUAL DATA STORAGE
SOP OF DIGITAL DATA STORAGE**

Sr. No.	Activity	Responsibility	Record
1	Annual report of Theory lecture attendance of 3 rd year and 4 th year	Staff conducting the lecture	Dept. computer in excel format
2	Annual report of Clinical posting attendance of 3 rd year and 4 th year	Staff In charges of 3 rd year and 4 th year	Dept. computer in excel format
3	Annual report of attendance of rotatory posting of Interns	staff In charge of interns	Dept. computer in excel format
4	Data storage of internal assessment of final year students.	clerk and Staff In charge of 4 th year	Dept. computer in excel format
5	Data storage of seminars and power point presentations of third year and final year students	clerk and Staff In charge of 3 rd and 4 th years	Dept. computer
6	Annual report of Postgraduate students attendance	clerk & Post graduate Staff In charge	Dept. computer
7	Six Monthly Progress Report Of Post Graduates	clerk and Post graduate Staff In charge	Dept. computer
8	Data storage of soft copy of library dissertation and thesis	clerk and Post graduate Staff In charges	Dept. computer
9	Data storage power point presentations of Seminars, Journal club & Case presentation	clerk and Post graduate Staff In charges	Dept. computer
10	Soft copy of Personal document files of all teaching and non-teaching staff	clerk and Staff In charge	Dept. computer

11	Monthly census of Clinical work related with OPDs, work done (oral prophylaxis and surgical) and payments.	clerk and Staff In charge	Dept. computer
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6. DEPARTMENTAL STORE & EQUIPMENT MANAGEMENT

SCOPE – Department receives a vast number of old & new patients on a day to day basis.

PURPOSE –To ensure that surgical material is always available to patients at all times and adequate services are provided.

RESPONCIBILITY- Interns, PG students and staffs. HOD is responsible for the final approval.

PROCEDURE –

Sr. No.	Activity	Responsibility
	<u>Standard protocol for Material inventory</u>	
1	• Material inventory is done once every week contact.	
2	• If material levels are low, storekeeper of the central store for material availability list entered in book	
3	• If stock is available, material is indent by taking HOD signature.	Nurse
4	• Indent book sent to principal approval.	
5	• Material indented form central store.	
6	• Material checked and entered in consumable and non consumable book.	

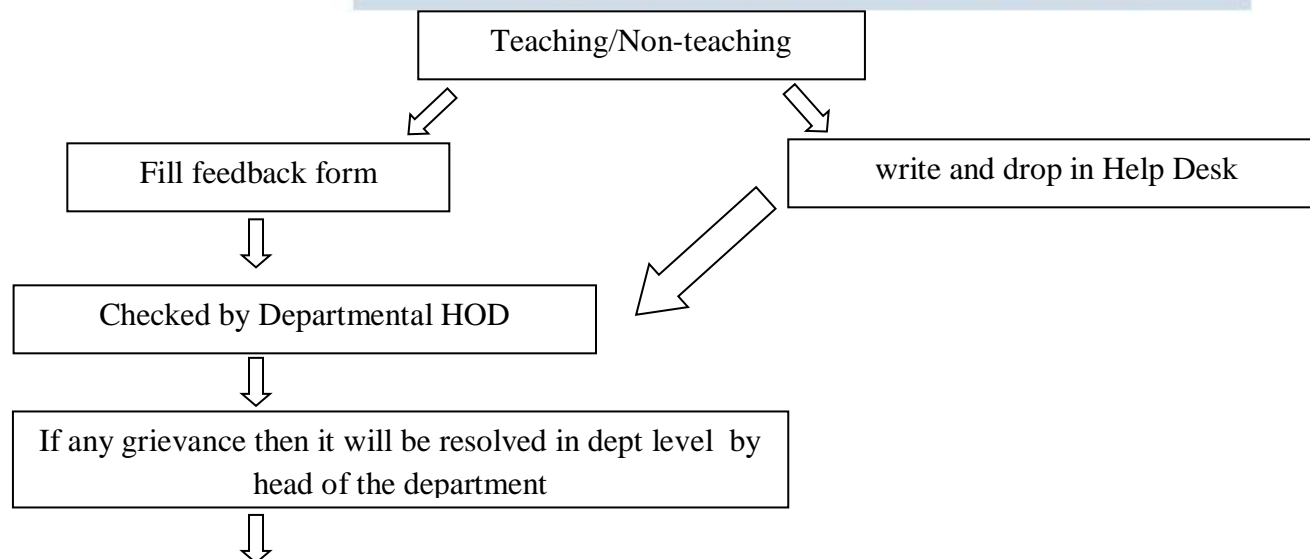
Hot air oven	1] no corrosion 2] Large capacity per cost 3] Items are dry after cycle	1] longer sterilization time 2] Cannot sterilize liquids 3] May damage plastic and rubber items
Rapid heat sterilizer	1] no corrosion 2] Short cycle 3] Items are dry after cycle	1] cannot sterilize liquids 2] May damage plastic and rubber items 3] Small capacity per cost.
Autoclave	1] good penetration 2] Time efficient 3] Sterilize water based liquids	1] non stainless items may corrode 2] Closed containers cannot be used 3] May damage plastic or rubber items
Unsaturated Chemical Vapour Sterilization Suitable	method for orthodontic instruments	Drawback of this is the odor, even though not toxic requires adequate ventilation
Ethylene Oxide Sterilization	Suited for large institutions	1] Slow procedure-- 4 hours at 54o C and 12 hours at room temperature 2] Costly 3] If moisture is present it reacts with ethyleneoxide to form ethylene glycol coating. 4] After sterilization articles should be aerated for 24 hours for dissipation of gas

5. STAFF GRIEVANCE & REDRESSAL

SCOPE- The procedures described in this document shall be followed by Head of the department of the Principal and grievance committee of the college for dealing with teaching and non-teaching staff grievances received through feedback form received.

PURPOSE: The purpose of this SOP is to outline an efficient and effective grievance redressal mechanism for the teaching & non-teaching staff. Any grievance raised by an staff on various issues are logged in a defined manner. Complete transparency is maintained; Grievances logged should be attended to and resolved as per the defined turnaround time, to ensure that any unresolved grievance is escalated to the appropriate level

RESPONCIBILITY: Departmental Head, Principal and grievance redressal committee which shall be responsible for resolving staffs grievances received from feedback form in a time bound manner.



If not resolved then this will be presented before
Principal



If the patient grievance not solved then this will be resolved with Feedback & grievance redressal committee.



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LAUNDRY AND HOUSE KEEPING

SCOPE -Department receives a vast number of patients on a day to day basis on OPD as well as ongoing oral surgical patients.

PURPOSE –Adequate services are provided to all new OPD and running oral surgical patients. To make sure that every patient receives clean and sterile drapes during treatment.

RESPONCIBILITY-Attendant and nurse are responsible for collection, reception and storage of drapes.

PROCEDURE –

Sr. No.	Activity	Responsibility
	<u>Standard protocol for laundry & linen</u>	
1	• Soiled drapes and linen is collected stored in closed bins.	Nurse/Attendant
2	• Count is maintained in register.	Nurse
3	• Sent to cleaning dept, The disinfected linen and drapes are then collected from the collection depot,	Attendant
4	• Counted and stored in the department, The patient's drapes are always autoclaved before use.	Attendant/Nurse
5	• The protocol is followed biweekly.	Nurse

