

**MAEER PUNE'S** 

MAHARASTRA INSTITUE OF DENTAL SCIENCE AND RESEARCH DENTAL COLLEGE, LATUR.



# Standard Operating Protocol for <u>Department of</u> <u>Orthodontics &</u> <u>Dentofacial</u>

# **Orthopedics**

Dr. Suresh Kangane Prof. & HOD Dr. Suresh Kamble Principal

# **ORTHODOTNICS AND DENTOFACIAL ORTHOPEDICS**

# Scope:-

The Department of Orthodontics deals with malaligned / crooked teeth, facial deformities and rehabilitation of cleft lip and palate patients.

# Purpose: -

To ensure that adequate and satisfactory treatments are provided to all the patients who require orthodontic 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 orthodontic patients and their follow up.

The department lab technician is responsible for fabrication of plates and soldering and welding of the appliances.

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. Curriculum

#### a.<u>UG curriculum</u>

## Scope:-

To introduce the under graduate students with the subject of Orthodontics.

# Purpose:-

To introduce & train the undergraduate students with basic wire bending and the subject of orthodontics.

# Responsibility:-

Senior Lecturer, Reader, Professor.

### Procedure:

 $2^{nd}$  year UG students will have Ortho-tech class of 2 hrs 3 days a week. Senior lecturer will conduct the class. Basic about stainless steel and orthodontics will be taught to the students. In  $2^{nd}$  year student will have to complete the basic wire bending (straightening of 4 wires, triangle, and rectangle, square).

3<sup>rd</sup> year students will have 1 class of 2 hours /week. Students should complete wire bending of clasp, bows, springs, & retractors.

4<sup>th</sup> year students will have daily clinical postings in morning 10am-1pm and weekly 2 theory classes. Students will have to complete 10 model analysis & appliance wire bending & fabrication.

Theory Hours......40 Hours. Practical & Clinical Hrs....150 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.

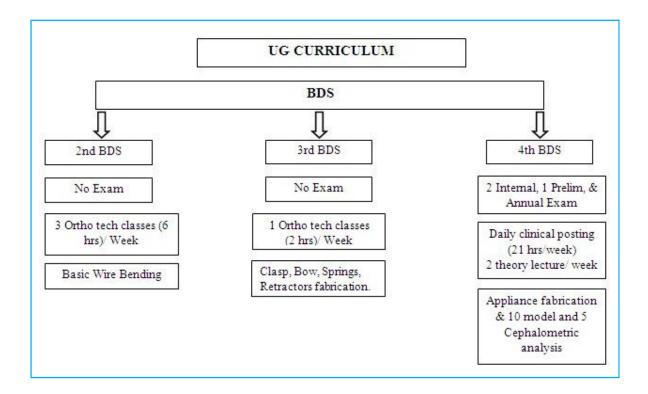
Academic records like attendance register, log book, LD, thesis etc. will be kept in department store.

# Forms:-

Attendance sheet marks aggregate.

#### <u>Records:</u>-

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



### b. PG CURRICULUM

#### Scope:-

To train post graduate students in the subject of Orthodontics (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.

#### Responsibility:-

Professor, Reader, PG guide.

#### Procedure:-

In 1<sup>st</sup> of year PG students will have to complete preclinical exercise as per the MUHS quota. An II and III year student has to take up orthodontic Cases and treatment to be completed and if Case is not completed then those Cases has to transferred to junior post graduates.

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

## <u>Forms:</u>-

Attendance sheet marks aggregate.

#### Records:-

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

# 2. <u>Exam</u>

# a. U.G INTERNAL ASSESMENT EXAM

# Scope:-

Train and evaluate students in the subject of Orthodontics.

# Purpose:-

To train & evaluate the learning capacity and knowledge of undergraduate students in the subject of orthodontics.

# **Responsibility:-**

Senior lecturer, reader, professor.

# Procedure:

Yearly 3 theory & practical exams will be conducted for final year students every after 2-3 months namely 1<sup>st</sup> 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  $-1^{st}$  internal theory exam will be conducted with 10-15 chapters.  $2^{nd}$  internal theory exam will be conducted with 10-15 chapters.

3<sup>rd</sup> internal preliminary exam will be conducted 4-5 months prior to the university exam. All Syllabuses will be included in the exam.

# Marks distribution -1<sup>st</sup> internal theory exam will be of total 60 marks.

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

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

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

# Preliminary theory exam will be of total 80 marks.

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

# Practical exams - Scheduled with the theory exam.

# Syllabus for the exam:-

Spotters, wire bending, model analysis, Journal and viva will be included in each Practical exam.

# Marks distribution -1<sup>st</sup> internal Practical exam will be of total 60 marks.

- Spotters 20 Marks
- Model analysis 10 Marks

- Wire Bending 15 marks
- Journal 5 Marks
- Viva 10 Marks

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

- Spotters 20 Marks
- Model analysis 10 Marks
- Wire Bending 15 marks
- Journal 5 Marks
- Viva 10 Marks

# Preliminary Practical exam will be of total 80 marks.

- Spotters 20 Marks
- Model analysis 20 Marks
- Wire Bending 20 marks
- Journal 5 Marks
- Viva 15 Marks

# <u>Result Display</u>

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.

#### <u>Forms:</u>-

Exam papers, attendance sheet, mark sheet.

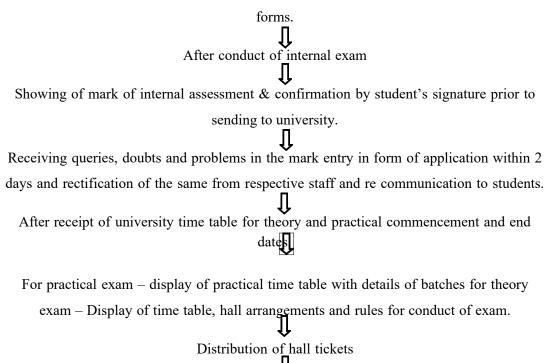
# <u>Records:</u>-

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

Sr. No.	Activity	RESPONSIBILITY	Records, / documents
1	I <sup>st</sup> Internal theory exam	Sr. Lecturer & Clerk	Question paper, Answer sheets & Attendance sheet.
2	I <sup>st</sup> Internal Practical Exam	Sr. Lecturer, staff Nurse & Dental Tech.	Answer sheets, attendance sheet, wire bending and cast
3	Result display	Clerk	Mark sheets, soft and hard copy
4	II <sup>nd</sup> Internal theory exam	Sr. Lecturer & Clerk	Question paper, Answer sheets & Attendance sheet.
5	II <sup>nd</sup> Internal Practical Exam	Sr. Lecturer, staff Nurse & Dental Tech.	Answer sheets, attendance sheet, wire bending and cast
6	Result display	Clerk	Mark sheets, 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 & Dental Tech.	Answer sheets, attendance sheet, wire bending and cast
9	Result display	Clerk	Mark sheets, soft and hard copy

#### b. <u>UG University Exa</u>m

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



#### c. P.G PREPARATORY (MOCK) EXAM (THEORY AND CLINICAL)

#### Scope:-

Train and evaluate students in the subject of Orthodontics 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 orthodontics.

Conduct of exam

#### 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:-

Basic subject, diagnosis, clinical and management of orthodontics

#### **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	Each pg has to display atleast 7 Cases
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 My functional and long Cases are kept for the exam with all records 2 day exam day's exam will be conducted on scheduled date Each pg has to display at least 7 Cases each and, wire bind exercise, bite Registration. Bonding and viva Result will be displayed on notice board

#### 3. <u>Student (UG/PG)</u>

#### Attendance of UG And Pg Students

#### Scope:-

To check the regularity of under graduate students in theory and practical classes in the subject of Orthodontics.

#### 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.

# Responsibility:-

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.

<b>Required</b>	Attendance:-
-	

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

# <u>Forms:</u>-

Attendance registers, leave applications, medical certificates.

#### <u>Records:</u>-

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

# <u>Quota UG</u>

# Second Year:-

UG students are introduced with orthodontics in second year. Every Wednesday and Friday 2 hrs ortho tech class is scheduled. Introductory lectures and lecture about stainless steel are taken by the staff members in initial few classes and after that the students are given demonstration of the wire endings. Following exercises are completed during second year.

# <u>Exercises</u>

- Straightening of 19 guage wire of 15 cms
- Straightening of 19 guage wire of 15 cms
- Straightening of 21 guage wire of 15 cms
- Straightening of 21 guage wire of 15 cms
- Preparation of equilateral triangle with 19 guage wires of 2 inch each side.
- Preparation of rectangle with 19 guage wires of 2\*1 inch each side.
- Preparation of square with 19 guage wires of 2 inch each side.
- Preparation of circle with 5cm diameter 19 guage wire.
- Preparation of 5 U, V loops in a series with circle 19 guage wire.

# <u>Third Year:-</u>

Weekly one Orthotech class (2 hrs) and daily clinical posting (3 hrs). Lectures of removable appliances are taken during the Orthotech class. Following exercises are completed during  $3^{rd}$ 

- Preparation of "C" clasp with 19-gauge wire on ideal cast.
- Preparation of "C" clasp with 19-gauge wire on patient cast.
- Preparation of Full clasp with 19- gauge wire on ideal cast.
- Preparation of Full clasp with 19-gauge wire on *patient cast*.
- Preparation of Adam's clasp with 22 gauge wire on *ideal cast*
- Preparation of Adam's clasp with 22-gauge wire on patient cast.
- Preparation of Short Labial Bow with 21 &23 gauge wire on ideal cast
- Preparation of Short Labial Bow with 21& 23 gauge wire on patient cast
- Preparation of Long Labial Bow with 21&23 gauge wire on *ideal cast*
- Preparation of Single Cantilever spring with 23 gauge wire on 11 and 21 ideal cast.
- Preparation of Single Cantilever spring with 23 gauge wire on 11 and 21 patient cast
- Preparation of "Z" spring with 23 gauge wire on 11 and 21 *ideal cast*
- Preparation of "Z" spring with 23 gauge wire on 11 and 21patient cast
- Preparation of Finger spring with 23 gauge wire on 11 and 21 ideal cast
- Preparation of Finger spring with 23 gauge wire on 11 and 21 patient cast
- Preparation of 'T' spring with 23 gauge wire on premolars in *ideal cast*
- Preparation of 'T' spring with 23 gauge wire on premolars in patient cast.
- Preparation of **Self Supported**, **u loop**, **palatal**, **reverse loop Canine Retractor** with 23 gauge wire on both sides.

# Forth Years UG

Daily clinical posting (3hrs) and lecture 2 days a weekly

Final years are trained to fabricate removable appliances.10 diagnostic cast analysis 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.

# <u>Quota PG</u>

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

In first six months of first year PG every student is trained to obtain proper clinical history, methodical examination of the patient, perform essential diagnostic procedures, and interpret them and arrive at a reasonable diagnosis about the Dentofacial deformities , And should be competent to fabricate and manage the most appropriate appliance -intra or extra oral, removable or fixed, mechanical or functional, and active or passive - for the treatment of any orthodontic problem to be treated singly or as a part of multidisciplinary treatment of orthofacial deformities.

OPD days are divided among the students and every new Case is first analyzed by the student and then is supervised and discussed by the senior staff members. This helps the students to develop an attitude to adopt ethical principles and Professional honesty in all aspects of Orthodontic practice. Students will learn that. Treatment care is to be delivered irrespective of the social Status, cast, creed or colleagues & Willingness to adopt, after a critical assessment, new methods and techniques of orthodontic management developed from time to time based on scientific research, which are in the best interest of the patient and also to respect patients rights and privileges, including patients right to information and right to seek as second opinion.

#### Pre- Clinical Exercises

A general outline of the preclinical exercises is

- General Wire bending exercises to develop the manual dexterity.
- Clasps, Bows and springs used in the removable appliances.
- Soldering and welding exercises.
- Fabrication of removable habit breaking, mechanical and functional appliances, also all types of space maintainers and space retainers.
- Bonwill Hawley Ideal arch preparation.
- Construction of orthodontic models trimmed and polished preferably as per specifications of A.B.O.
- Cephalometric tracing and various Analyses, also superimposition methods
- Fixed appliance MBT & typhodont exercises.
- Clinical photography
- Computerized imaging
- Handling of equipments like vacuum forming appliances and hydro solder etc.

#### Other work to be done during 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 re 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.

#### Second Year:

The clinical Cases taken up are followed under the guidance of the staff. **Minimum 60 Cases** should be taken up by every pg. after finishing Pri-clinics pg students are allowed to do the patients. Chair side Case presentation is done and treatment will be decided in the presence of all the teaching staff members. Treatment progress will be supervised and guided by the staff members. Each and every PG student should have following Cases –

Removable active appliances -	Minimum 5Cases			
Class - I malocclusion with Crowding-	5 Cases			
Class - I malocclusion with bi-maxillary protrusion-	4 Cases			
Class - II division-1-	5 Cases			
Class - II division-	4 Cases			
Class - III (Orthopaedic, Surgical, Orthodontic Cases)	1 each			
Inter disciplinary Cases-	2Cases			
Removable functional appliance Cases -	5 Cases			
Fixed functional appliances -	5 Cases			
Dento-facial orthopaedic appliances -	5 Cases			
Appliance for arch development -	5 Cases			
Fixed mechano therapy Cases (Begg, PEA, Tip edge, Edgewise, lingual)				
Retention procedures of above treated Cases.				

#### Other routine work as follows.

- 1. Seminars: One Seminar per week are conducted in the department. Each student presents a minimum of five seminars each year. Every Thursday and Wednesday 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 Thursday and Wednesday 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.

# <u>Third Year:</u>

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 Orthodontics deals with screening, diagnosis and treatment planning of Cases with irregular teeth, facial deformities and congenital deformities.

# 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 patient's records, instrument sterilization and assisting the working doctor.

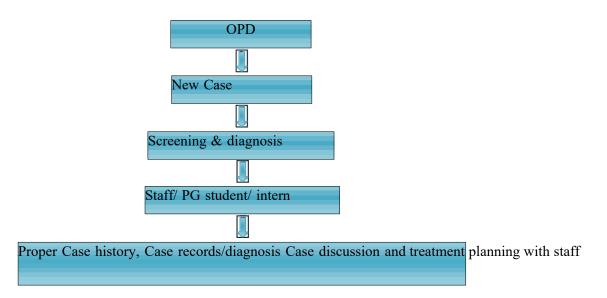
The staffs are responsible for screening diagnosis of all new patients and for determining the line of treatment.

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

The lab technician is responsible for fabrication of retention plate to the completed Cases.

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	Staff / PG student /
	malocclusion	Intern
3	Case history, intra-extra oral photographs, impression, lateral	Staff / PG student
	ceph and opg. Model analysis	
4	Records of the patient, chair side assistant clerk, Instrument	Nurse
	sterilization	
5	Diagnosis Case discussion on and treatment planning	Staff / PG student
6	Fabrication of removable appliance / banding and bonding	Staff / PG student/ lab
		technician
7	Patient follow-up and treatment procedure	Staff / PG student
	ratione follow up and reaction procedure	Suit / 1 & Student

### Screening Diagnosis & Treatment Planning



# 2. <u>Allotment</u>

#### Scope:-

The Department of Orthodontics deals with screening, diagnosis and treatment planning of Cases with irregular teeth, facial deformities and congenital deformities. 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.

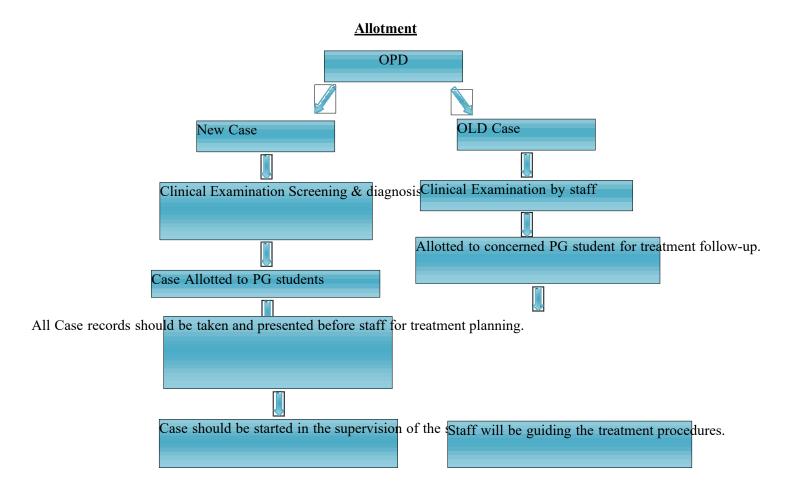
#### **Responsibility:-**

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 malocclusion.

The staffs and post graduate students are responsible for the diagnosis & treatment planning of allotted orthodontic 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 malocclusion	Staff
3	Case history, intra-extra oral photographs, 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



### 3. Appointment & Reappointment

# Scope:-

Since orthodontic treatment is lengthy procedure so we need to call orthodontic patients after a month for activation of the appliance. After the activation patients will be reappointed.

# Purpose:-

To align teeth into desired position. To treat minor orthodontic problems associated with upper and lower teeth. To obtain esthetic demand of the patient, to achieve adequate occlusal improvement and functional efficiency.

# 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 register.

Sr. No.	Activity	RESPONSIBILITY	Records, / documents
1	OPD ( OLD)	1 <sup>st</sup> yr PG and Intern	OPD registration, Case paper, appointment card
2	Allotment	Concerned staff/ pg student	entered work done register
3	activation of the appliance	Respective PG /	Case history, diagnostic radiograph, intraoral and Extraoral photographs, SMI, WMI, model analysis, cephal analysis will be evaluated
5	Activation should be shown to staff	Respective PG	WMI Case history, diagnostic radiograph, intraoral and Extraoral photographs, SMI, WMI, model analysis, cephal analysis will be evaluated
6	Appointment after a month	Respective PG	Work done to be written in register and Case paper
7	Reappointment	Respective PG	Work done ( activation ) to be written in register with staff counter signature
8	Monthly appointments	Respective PG / intern	Work done ( activation ) to be written in register with staff counter signature

Appointment and reappointment	
OPD	
Case Allotment by satff	
To concerned pg student	
Appliance activation	
Work approval from the staff	
Appointment will be given to the patient, recalled after a month	
Work done to be written in the work done register	
Counter signature to be taken by the staff	
Patient will be recalled after 1 month	
Activation	
Re appointment will be given to the patient	

### 4. Treatment Provided In Department

### **Removable Appliance**

# Scope:-

To achieve adequate Occlusal improvement, Case is selected where only tipping movement is required. To obtain functional efficiency and esthetic harmony.

# Purpose:-

To align teeth into desired position. To treat minor orthodontic problems associated with upper and lower teeth. To obtain esthetic demand of the patient.

# Responsibility:-

The patient is allotted to the Post graduate students. The staffs supervise the clinical work of Interns & PG students. The clerk maintains contact information of the patient in the register.

The lab technician is responsible for fabrication of appliance. The interns/ PG students responsible for patient follow

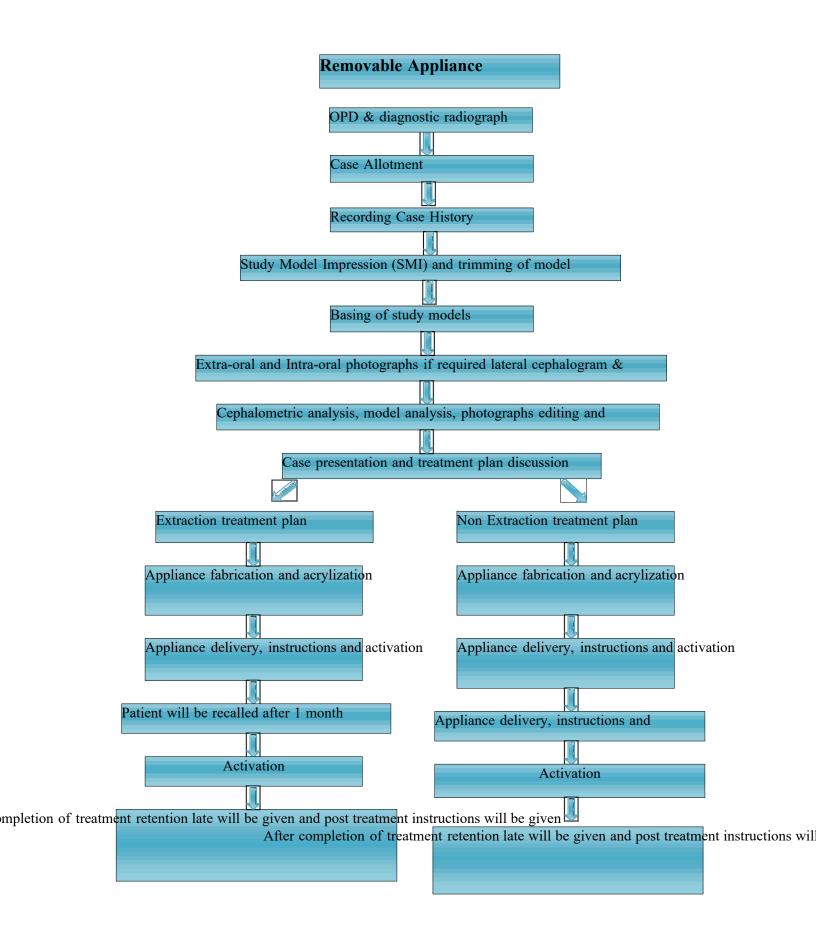
# <u>Forms:</u>-

Consent form, Case History sheet, OPD register, work done register

# Records:-

Case history, intraoral & extra-oral photographs, laterals cephalogram OPG, SMI, WMI.

Sr. No.	Activity	RESPONSIBILITY	Records, / documents
1	OPD	1 <sup>st</sup> yr PG and Intern	Diagnostic radiograph, OPD registration
2	Allotment	1st yr PG / Intern	entered in allotment register
3	Case preparation and treatment plan discussion	Respective PG / intern	Case history, diagnostic radiograph, intraoral and Extra oral photographs, SMI, WMI, model analysis, cephal analysis.
5	Appliance fabrication	Respective PG / intern	Working Model Impression
6	Acrylization and polishing	Lab technician	Work done record to be maintained
7	Appliance delivery and instructions	Respective PG / intern	Work done ( activation ) to be written in register with staff counter signature
8	Monthly appointments	Respective PG / intern	Work done ( activation ) to be written in register with staff counter signature



# **Fixed Appliance Therapy**

# <u>Scope</u>:-

Treating moderate to severe dental malocclusion

# Purpose:-

To obtain functional efficiency, esthetic harmony and structural balance.

# Responsibility:-

2<sup>nd</sup>&3<sup>rd</sup> year PG will treat the Case under the supervision of reader, professor,& PG guide **Procedure:**-

 $1^{st}$  yr PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs, patient is then allotted to the  $2^{nd}$  yr 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. Separators will be placed.

On 3<sup>rd</sup> visit patent will be bonded and evaluated every after 1 month

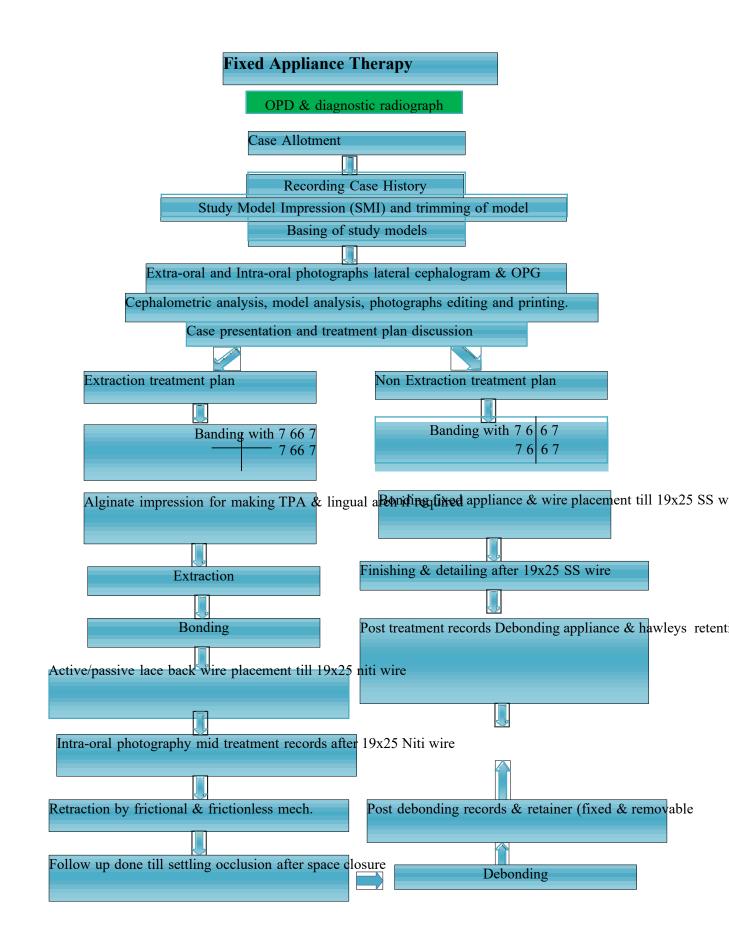
# <u>Forms:</u> -

Consent form, Case History sheet, OPD register, work done register.

# Records:-

Case history, intraoral &extra oral photographs, lateral cephalogram, OPG, SMI, WMI.

Sr	Activity	RESPONSIBILITY	Records, / documents
no			
1	OPD	1 <sup>st</sup> yr PG	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radiograph, intraoral and extraoral photographs, SMI, WMI, model analysis, cephal analysis.
4	Case presentation	Respective PG	Consent form, staff from staff.
5	Banding	Respective PG	WMI for TPA, work done records
6	Bonding	Respective PG	Intraoral photographs
7	Monthly appointments	Respective PG	Mid treatment record
8	Debonding & lingual bonded retainer.	Respective PG	Post treatment records



# **Growth Modulations**

# Scope:-

Treating growing patients with maxillary & Mandibular skeletal deficiency Cases.

# Purpose:-

To obtain functional efficiency, esthetic harmony and structural balance, to redirect upper & lower jaw growth.

# Responsibility;-

2<sup>nd</sup> PG will treat the Case under the supervision of reader, professor & PG guide

# Procedure:-

1<sup>st</sup> yr PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs, patient is then allotted to the 2<sup>nd</sup> yr 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. Bite registration will be done.

Respective PG will mount the bite and give it to the lab for appliance construction. On 3<sup>rd</sup> visit appliance is delivered to the patient, instructions given to the patient and parents, recalled every after 1 month.

# <u>Forms</u>-

Consent form, Case history sheet, OPD register, work done register

# <u>Records:</u>-

Case history, intraoral &extraoral photographs, lateral cephalogram, OPG, hand wrist, SMI, WMI.

Sr. No.	Activity	RESPONSIBILITY	Records, / documents
1	OPD	1 <sup>st</sup> yr PG	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radiograph, intraoral and extraoral photographs, hand wrist radiograph, SMI, WMI, model analysis, cephalometric analysis.
4	Case presentation	Respective PG	Consent form, staff from staff.
5	Bite registration	Respective PG	Bite
6	Appliance fabrication	Respective PG	Wire bending approval Case history ,Case paper
7	Monthly appointments	Respective PG	Work done Casepaper
8	Completion of phase - I	Respective PG	Post treatment records
9	Phase 2- bonding & banding	Respective PG	Work done , Case history, Case paper

# **Myofunctional Appliance Therapy**

#### Scope:-

To achieve adequate occlusal improvement, mastication efficiency and pleasing profile.

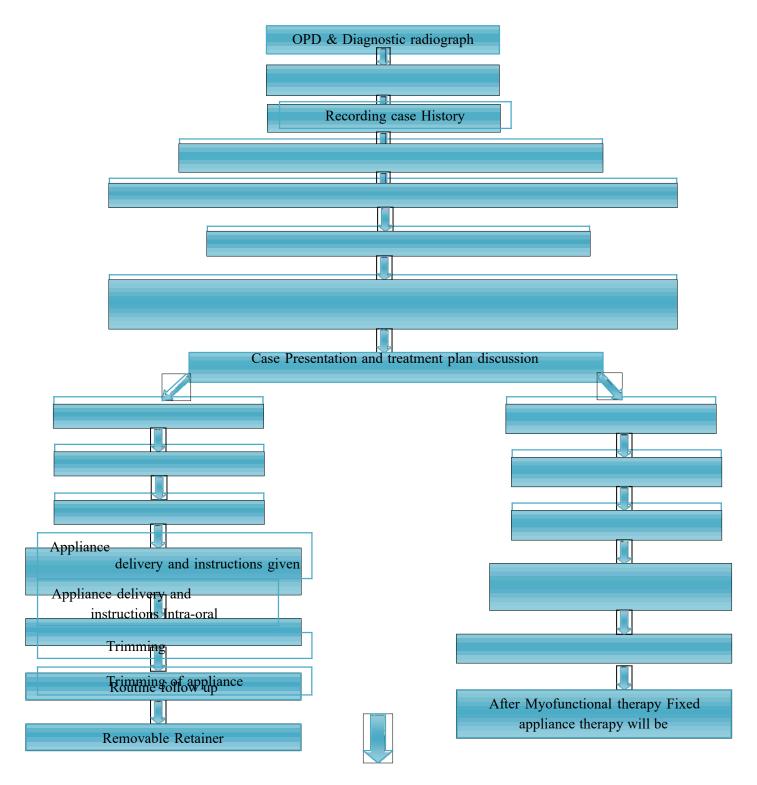
# Purpose:-

To obtain esthetic demand of the patient, functional efficiency of esthetic harmony the patient screening and diagnosis will be done by staff after diagnosis.

#### **Responsibility:-**

The patient i allotted to the Post graduate students. The staff supervises the clinical work of PG students. The clerk maintains contact information of the patient in the register. The lab technician is responsible for fabrication of Myofunctional appliance. The PG students responsible for appliance regular activation maintaining records and followup of the patient.

# **Myofunctional Appliance Therapy**



Achievement of class I molar relation & improvement in facial profile

# **Orthognathic Surgery**

# Scope:-

Treating non growing maxillary&/ Mandibular skeletal deficiency Cases.

# Purpose:-

To obtain functional efficiency, esthetic harmony and structural balance, to correct upper & lower skeletal discrepancies.

# **Responsibility:**-

2nd /3<sup>rd</sup> PG will treat the Case under the supervision of reader, professor, & PG guide.

# Procedure:-

 $1^{st}$  yr PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs, patient is then allotted to the  $2^{nd}$  yr/  $3^{rd}$  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 diagnosis & treatment planning. Treatment plan will be discussed with the patient and his/her parents.

On 3<sup>rd</sup> visit upper and lower arches will be banded & bonded.

After alignment and leveling, mid treatment records will be taken, prediction tracing will be done, & Case will be presented in interdepartmental discussion with oral surgery.

After completion of pre surgical orthodontics, Splint will be prepared Patient will be ready for respective surgery.

After 1 month of surgery splint will be removed and post-surgical orthodontics will be started for settling of occlusion.

After settling the occlusion patient is deboned and upper and lower fixed lingual retainer will be bonded.

# <u>Forms:</u>-

Consent form, Case history sheet, OPD register, work done register.

# <u>Records:</u>-

Case history, intraoral & extra oral photographs, lateral cephalogram, OPG, hand wrist, PA cephal view, kesling set up, digital and cephalometric prediction tracing, SMI, WMI, midtreatment records, post treatment records.

Sr. No.	Activity	Responsibility	Records, / documents
1	OPD	1 <sup>st</sup> yr PG	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radiograph, intraoral and extra oral photographs, SMI, WMI, model analysis, cephal analysis.
4	Case presentation	Respective PG	Consent form, staff from staff.
5	Banding	Respective PG	WMI for TPA, work done records
6	Bonding	Respective PG	Intraoral photographs
7	Monthly appointments	Respective PG	Mid treatment record
8	Preparation for surgery & splint	Respective PG	Keslings set up, digital prediction tracing, COGS analysis.
9	Surgical procedure	Respective PG & oral surgeons	Photographs
10	Post surgical orthodontics	Respective PG	Intra oral & extra oral photographs
11	Debonding & retention	Respective PG	Post treatment records

# **Orthognathic Surgery**

	OPD & diagnostic radiograph		
	Case allotment		
	Recording Case history		
r			
	1. Recording & Trimming of model		
		[	
	2. Basing of study models		
3. Extra-Oral 8	Intra-Oral Photography lateral cephalogram & PA view OPG		
		4	
4. (	cephalometric analysis (cog's) and model analysis		
	<u> </u>		
5	Case presentation & treatment plan Discussion		
	V		
	6. Surgical Treatment		
	Phase I		
Dro Surgical or	hodontics will be done up to 0.019 x 0.025"" 5.5 wire		
	Mock surgery & digital predication surgery		
	Preparation of surgical splint		
	Phase II		
	÷		
	Performance respective surgery		
	÷		
	Phase III		
	Finishing & detailing		
Debonding & ling	ual bonded retainer & retention plate, post treatment records		
	<u>↓</u>		
Correction	of skeletal discrepancy & improvement of facial profile		

# **Lingual Orthodontics**

# Scope: -

Fulfill the esthetic need of patient by treating with lingual appliance.

# Purpose: -

To obtain functional efficiency, esthetic harmony and structural balance with maintaining the esthetic throughout the treatment.

# **Responsibility:-**

2nd / 3<sup>rd</sup> PG will treat the Case under the supervision of reader, professor, & PG guide.

# Procedure:-

 $1^{st}$  yr PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs, patient is then allotted to the  $2^{nd}$  yr/  $3^{rd}$  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 diagnosis & treatment planning. Treatment plan will be discussed with the patient and his/her parents.

Kesling setup for indirect lingual bracket positioning will be done in the departmental laboratory by respective Pg student.

On 3<sup>rd</sup> visit upper and lower arches will be banded & bonded.

After alignment and leveling, mid treatment records will be taken,

After settling the occlusion patient is deboned and upper and lower fixed lingual retainer will be bonded.

# <u>Forms:</u>-

Consent form, Case history sheet, OPD register, work done register.

# Records:-

Case history, intraoral & extraoral photographs, lateral cephalogram, OPG, kesling set up, SMI, WMI, midtreatment records, post treatment records.

Sr. No.	Activity	Responsibility	Records, / documents
1	OPD	1 <sup>st</sup> yr P	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radio raph, intraoral and extraoral photographs, hand wrist radiograph, SMI, WMI, model analysis, cephal analysis.
4	Case presentation	Respective PG	Consent form, staff from staff.
5	Set of impressions	Respective PG	
6	Lab procedure	Respective PG	Photographs, work done
7	Bonding	Respective PG	Work done, Case paper
8	Retraction	Respective PG	Mid treatment records
9	Debonding & retention	Respective PG	Post treatment records Work done , Case history, Case paper

# **Lingual Orthodontics**

	OPD& diagnostic radiographs	
	ration with model &ceph analysis Case presentation ocedures for indirect lingual bracket bonding	& treatment plan di
	Bonding and wire placement	
	Leveling & alignment	
Space c	losure by sliding or loop mechanics Debonding	
Correct	tion of malocclusion & profile improvement	
	÷	

# **Aligners**

# Scope:-

Fulfill the esthetic and functional demand of the patient.

# Purpose:-

To obtain functional efficiency, esthetic harmony and structural balance with maintaining the esthetic throughout the treatment.

# Responsibility:-

2nd / 3<sup>rd</sup> PG will treat the Case under the supervision of reader, professor, & PG guide. **Procedure:**-

 $1^{st}$  yr PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs, patient is then allotted to the  $2^{nd}$  yr/  $3^{rd}$  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 diagnosis & treatment planning. Treatment plan will be discussed with the patient and his/her parents.

Kesling setup for making sets of Invisalign removable appliance & preparation of the sets of appliance with vacuum molding machine will be done in the departmental laboratory by respective Pg student.

On  $3^{rd}$  visit appliance will be delivered and instructions regarding use will be given to the patient.

After alignment and leveling, mid treatment records will be taken,

After settling the occlusion patient is deboned and upper and lower fixed lingual retainer will be bonded.

# <u>Forms</u>:-

Consent form, Case history sheet, OPD register, work done register

# Records:-

Case history, intraoral & extra oral photographs, lateral cephalogram, OPG, kesling set up, SMI, WMI, midtreatment records, post treatment records.

Sr.No.	Activity	Responsibility	Records, / documents
1	OPD	1 <sup>st</sup> yr P	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radio raph, intraoral and extra oral photographs, hand wrist radiograph, SMI, WMI, model analysis, cephalometric analysis.
4	Case presentation	Respective PG	Consent form, staff from staff.
5	Set of impressions	Respective PG	
6	Lab procedure	Respective PG	Photographs, work done
7	Delivery of appliance	Respective PG	Photographs ,Work done, Cas paper
8	retention	Respective PG	Post treatment records Work done , Case history, Case paper

	ALIGNER CASE
	JPD & diagnostic radiographs
ase allotment, case history, dia	gnostic recolds, case preparation withouer a cepharanary
tation & treatment plan discus	sion patti impression Lab procedures for removable invesili
	and patient instructions Levening & angriment
Space closu	re by sliding or loop mechanics Settling
Correction	f malecelusion & improved facial profile

# Habit Breaking Therapy

# Scope:-

To treat abnormal behaviors involved in ortho facial myofuncton.

# Purpose:-

To obtain functional efficiency, esthetic harmony and structural balance while maintaining the esthetic throughout the treatment.

# **Responsibility:**-

 $1^{st} / 2^{nd}$  PG will treat the Case under the supervision of reader, professor, & PG guide.

# Procedure:-

 $1^{st}$  yr PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs, patient is then allotted to the  $2^{nd}$  yr/  $3^{rd}$  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 diagnosis & treatment planning. Treatment plan will be discussed with the patient and his/her parents.

Preparation of the appliance will be done in the departmental laboratory by respective Pg student.

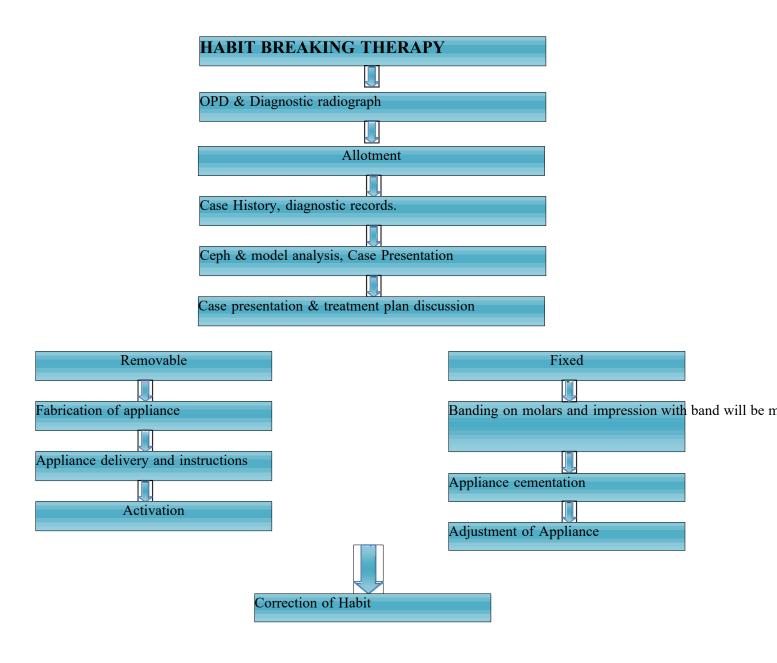
On 3<sup>rd</sup> visit appliance will be delivered and instructions regarding use will be given to the patient.

Appliance will be used by the patient till 6 months or till cassation of habit. Fixed appliance therapy will be started if required

Sr. No.	Activity	Responsibility	Records, / documents
1	OPD	1 <sup>st</sup> yr PG	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radiograph, intraoral and extra oral photographs, hand wrist radiograph, SMI, WMI, model analysis, cephalic analysis.
4	Case presentation	Respective PG	staff.
5	Set of impressions	Respective PG	
6	Lab procedure for appliance fabrication	Respective PG	Photographs, appliance fabrication
7	Appliance delivery	Respective PG	Work done, Case paper
8	Retention	Respective PG	Post treatment records
9	Deboning & retention	Respective PG	Post treatment records Work done , Case history, Case paper

Forms:- Consent form, Case history sheet, OPD register, work done register

**Records:** - Case history, intraoral & extra oral photographs, lateral cephalogram, OPG, SMI, WMI.



# Temporo Mandibular Disfunction (TMD)

#### Scope:-

To **improve** jaw muscles function and relieve associated pain by creating a muscle - skeletally stable position of the joint.

# Purpose:-

Treatment of clinical problems affecting temporal mandibular joint, myofacial muscles and other Temporo mandibular disorders. To obtain functional efficiency, esthetic harmony and structural balance with maintaining the esthetic throughout the treatment.

# Responsibility:-

 $1^{st}$  /  $2^{nd}$  PG will treat the Case under the supervision of reader, professor, & PG guide.

# Procedure:-

 $1^{st}$  yr PG will attend the patient on his/her first visit, they will do the OPD and advice diagnostic radiographs, patient is then allotted to the  $1^{st}$  yr/ $2^{nd}$  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 diagnosis & treatment planning. Treatment plan will be discussed with the patient and his/her parents.

Preparation of the appliance will be done in the departmental laboratory by respective Pg student.

On 3<sup>rd</sup> visit appliance will be delivered and instructions regarding use will be given to the patient. The patient is checked regularly at 7 day intervals until the pain subsides and then followed every 30 days.

The patient is then reviewed post splint therapy to assess the need for fixed mechanotherapy/any other treatment and necessary treatment is carried out.

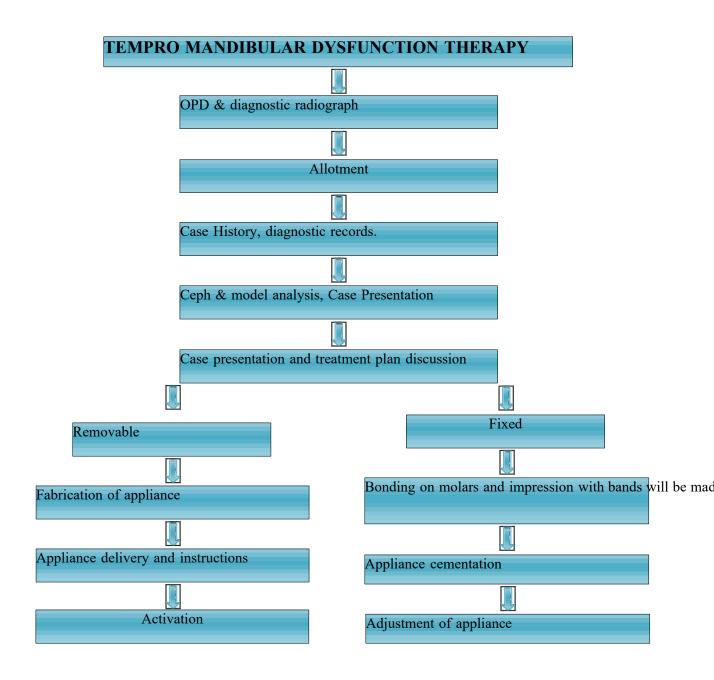
# Forms:-

Consent form, Case history sheet, OPD register, work done register

#### Records:-

Case history, intraoral & Extraoral photographs, lateral cephalogram, OPG,TMJ radiographs SMI, WMI.

Sr. No.	Activity	Responsibility	Records, / documents
1	OPD	1 <sup>st</sup> yr PG	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radiograph, intraoral and extra oral photographs, TMJ radiograph, SMI, WMI, model analysis, cephalometric analysis.
4	Case presentation	Respective PG	Consent form of patient, counter sign from staff.
5	Set of impressions	Respective PG	SMI.WMI
6	Lab procedure for appliance fabrication	Respective PG	Photographs, work done
7	Appliance delivery	Respective PG	Work done, Case paper
8	Follow up	Respective PG	Mid treatment records
9	Appliance removal & retention	Respective PG	Post treatment records Work done , Case history, Case paper



## <u>Referral Management</u>

#### Scope:-

Interdisciplinary management.

#### Purpose –

To obtain functional efficiency, esthetic harmony and structural balance.

## Responsibility:-

 $2^{nd}$  &  $3^{rd}$  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 perneed, then patient is then allotted to the 2<sup>nd</sup> 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 extraction, oral prophylaxis, or orthognathic surgeries according to the need of Case.

After the completion of ortho treatment patient is referred for minor surgeries or oral prophylaxis.

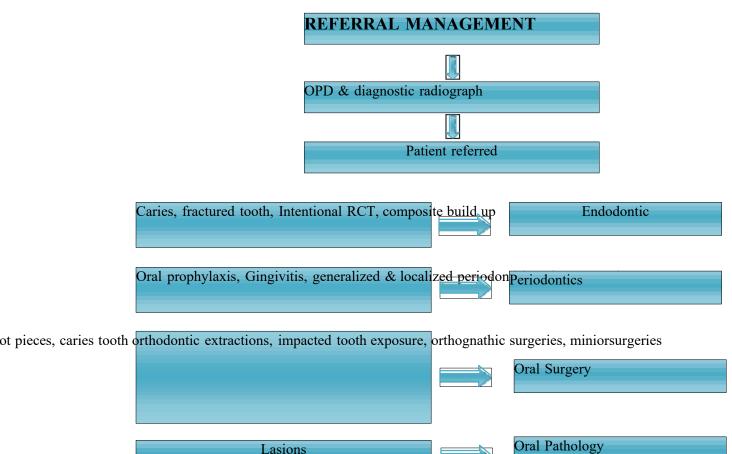
## <u>Forms:</u>-

Consent form, Case history sheet, OPD register, work done register and interdiceplanery register.

## <u>Records:</u>-

Case history, intraoral & extra oral photographs, lateral cephalogram, OPG, SMI, WMI.

Sr. No.	Activity	Responsibility	Records, / documents
1	OPD	1 <sup>st</sup> yr PG	Diagnostic radiograph, OPD registration
2	Allotment	1 <sup>st</sup> yr PG	Allotment register
3	Case preparation	Respective PG	Case history, diagnostic radiograph, intraoral and extraoral photographs, hand wrist radiograph, SMI, WMI, model analysis, cephal analysis.
4	Case presentation	Respective PG	Consent form, staff from staff.
5	Referring the Case	Respective PG	Inter departmental register



 Lasions
 Oral Pathology

 Decidues teeth extraction space maintainer.
 Pedodontics

## 5. Feedback & Grievance Redressal Mechanism

#### Scope:-

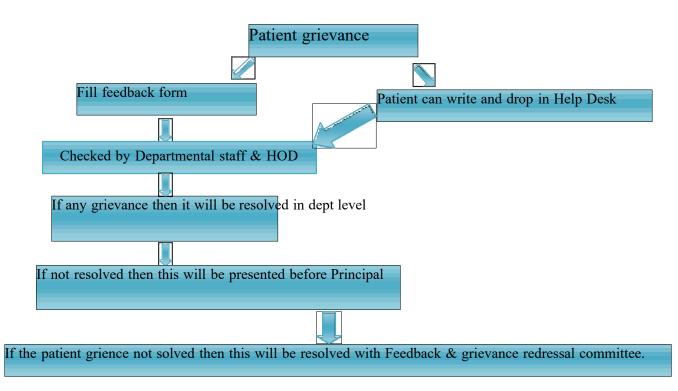
The procedures described in this document shall be followed by designated staff of the department and grievance committee of the college for dealing with patients grievances received through helpdesk and the treatment feedback received from the patients.

## 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 Standard operating procedure 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

#### **Responsibility:-**

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.

## Responsibility:-

Interns, department Clerk and Nurse

## 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 Clerk will update the payment and patient entries in the college software

#### <u>Forms:</u>-

Attendance sheet marks aggregate.

#### Records:-

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

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

## 7. <u>Record\_Management</u>

## Scope:-

Preserving the data for academic and legal purposes.

# Purpose: -

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

# Responsibility:-

Interns, 2<sup>nd</sup> & 3<sup>rd</sup> year PG, Clerk of department, technician.

# 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.

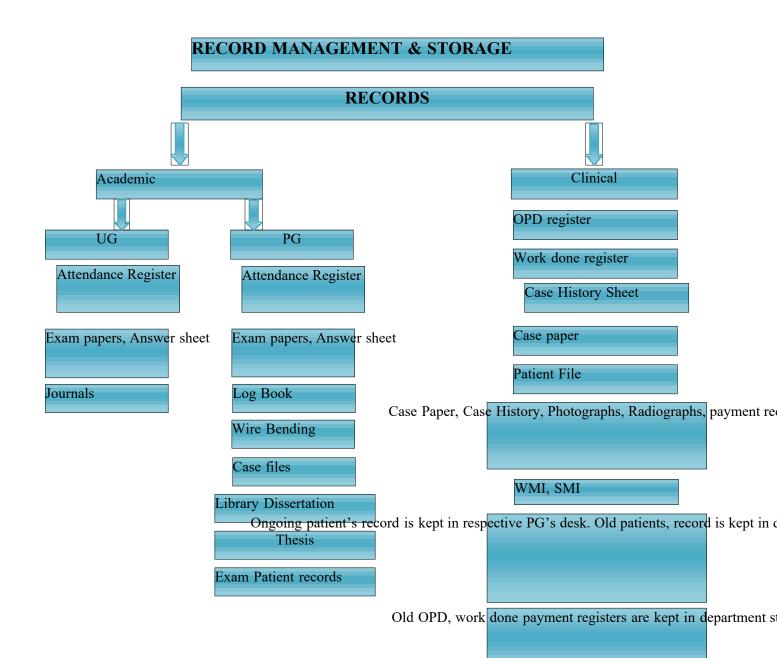
Academic records like attendance register, journal, log book, LD, thesis etc will be kept in department store.

# Forms:-

Consent form, Case history sheet, OPD register, work done register, and inter disciplinary register.

# Records:-

Case history, intraoral & extra oral photographs, lateral cephalogram, OPG, SMI, WMI.



## 8. Biomedical Waste Management

#### Scope: -

To dispose biomedical waste of the department.

## Purpose: –

To maintain hygiene departmental working area by proper cleaning and waste disposal **Responsibility:-**

Clerk, 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 dry lab for lab waste. PG room, HOD cabin, photography room, reader room, tracing 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 waste collection is noted in the register. Waste is collected in following order.

## <u>Forms</u>:-

Biomedical Waste collection registers.

**<u>Records:</u>**- Biomedical Waste collection registers with daily weight of collected waste and time of Collection.

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. Impression material (Discarded/Used)	Immerse 1% Sodium hypochlorite solution bucket for 24 hours and then Dispose in Black container
	2. Dental Casts (Discarded/Used)	Immerse 1% Sodium hypochlorite solution bucket for 24 hours and then Dispose in Black container
	3. Removable Appliances with wire component (Used/Broken not to be worn by patient anymore) Sharps	Container containing 1% Sodium hypochlorite
Material	4. Wires, steel ligatures, orthodontic	Container containing 1%
Disposal	miniimplants, Needles after being burnt, Sharps	Sodium hypochlorite
	5. Wax bite registrations	Red container
	6. Deboned brackets, buttons and other attachments	Red container
	7. E-chain, elastic ligatures, elastics	Red container
	8. Mouth mask, Gloves	Red container
	9. Head cap, Shoe covers	Black container
	10. Infected cotton	Yellow container
	11. Syringe (after breaking at Hub in Needle destroyer)	Red container
	12. LA bottles	Black container If broken Sharps container.

## 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.

#### Procedure:-

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.

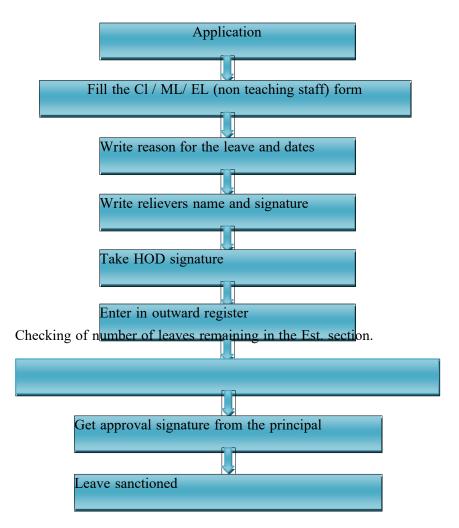
## Leave Application Policy

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**



## 2. <u>New Joining</u>

#### 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 staffs 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:-

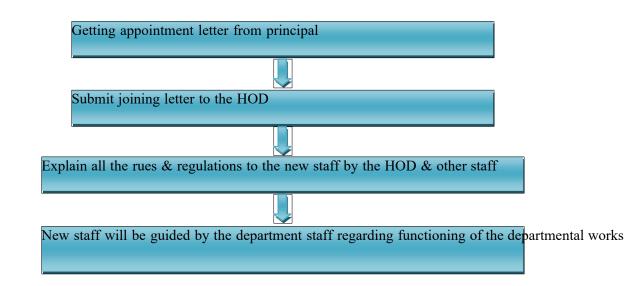
An appointment letter shall be formally issued by the Principal.

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. Work Distribution

## Preface:-

Department of Orthodontics 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: 08

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

## Total number of Non-Teaching Staff: 07

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

#### Work distribution among teaching staff

#### In-charge (Work) distribution:-

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

## • Professor and P.G Guide:

- 1. Dental Implant Incharge
- 2. PG academic and clinical work

#### • Reader:

- 1. PG Department Incharge
- Lecturer:
  - 1. UG 2<sup>nd</sup>, 3<sup>rd</sup> & 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 Thursday:- 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 BMW department.

## <u>Technician</u>:-

- Appliance fabrication, soldering & welding.
- Maintenance of patients records.
- Repair of broken appliances.

# 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	Cast	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	II BDS Ortho-Tech register	Staff / Clerk
12	III BDS Ortho-Tech register	Staff / Clerk
13	III BDS clinical posting register	Staff / Clerk
14	IV BDS theory Attendance register	Staff / Clerk
15	IV clinical posting Register	Staff / Clerk
16	Interns attendance register	Staff / Clerk
17	PG students attendance register	Staff / Clerk
18	Circular File	Clerk
19	PG leave letter file	Clerk
20	Movement register	Clerk

21	CDE files	Staff / Clerk
22 Fumigation register		Staff Nurse
23	PG Academic Files	PG Students
24	UG Exam Paper Files	Staff/ Clerk/ Staff Nurse
25	UG Record Books	Staff / Clerk
26	PG Exam paper files	Staff / Clerk
27	PG record books	Staff / PG students
28	NAAC files	Staff / Clerk
29	Photography Room register	Staff / PG students
30	Lab work done register	Technician
31	Hydro solder register	Technician
32	Bracket kit Book	Staff Nurse
33	Museum Register	Technician
34 Wet lab register		Staff Nurse
35 Interns work done register		Staff
36	VIP-Ortho Material Register	Staff Nurse
37	Loan Book	Staff Nurse
38	Laundry register	Peon
39	Model analysis cast register	Staff Nurse
40	Bioster register	Staff Nurse
41	Waste disposal register	Peon
42	Nemoceph Software Register	PG students
43	Telecommunication register	Clerk
44	DCI Inspection File	Staff Clerk

#### 5. 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 2 <sup>nd</sup> year3 <sup>rd</sup> year and 4 <sup>th</sup> year	Staff conducting the lecture.	Attendance register
2	Clinical posting attendance of 3 <sup>rd</sup> year and 4 <sup>th</sup> year recorded in attendance register	Staff Incharges of 3 <sup>rd</sup> year and 4 <sup>th</sup> 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 <sup>th</sup> year	Answer sheet
5	Betterment Exam Answer sheets of Undergraduate Repeaters	Clerk and Staff In charge of 4 <sup>th</sup> 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	Orthodontics completed Cases files cast, photograph file, seminar conducted by pgs hard copy	Clerk, lab technician and nurse	Dept. store

# ACADEMIC MANUAL DATA STORAGE

# DIGITAL DATA STORAGE

Sr. No.	Activity	Responsibility	Record
1	Annual report of Theory lecture attendance of 3 <sup>rd</sup> year and 4 <sup>th</sup> year	Staff conducting the lecture	Dept. computer in excel format
2	Annual report of Clinical posting attendance of 3 <sup>rd</sup> year and 4 <sup>th</sup> 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 <sup>th</sup> 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

# 5. DEPARTMENTAL STORE & EQUIPMENT MANAGEMENT

# Scope:-

Department receives a vast number of old & new patients on a day to day basis. **Purpose:**-

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

# **Responsibility:**-

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

# Procedure:-

Sr. No.	Activity	Responsibility
	Standard protocol for Material	Nurse
	inventory	
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.	
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	<ol> <li>1] no corrosion</li> <li>2] Large capacity per cost</li> <li>3] Items are dry after cycle</li> </ol>	1] longer sterilization time 2] Cannot sterilize liquids 3] May damage plastic and rubber items	
Rapid heat sterilizer	1] no corrosion 2] Short	1] cannot sterilize liquids 2] May	
	cycle 3] Items are dry after	damage plastic and rubber items 3]	
	cycle	Small capacity per cost.	
Autoclave	1] good penetration 2] Time	1] non stainless items may	
	efficient 3] Sterilize water	corrode 2] Closed containers	
	based liquids	cannot be used 3] May damage	
		plastic or rubber items	
<b>Unsaturated Chemical</b>	method for orthodontic	Drawback of this is the odor, even	
Vapour Sterilization	instruments	though not toxic requires adequate	
Suitable		ventilation	
Ethylene Oxide	Suited for large institutions	1] Slow procedure 4 hours at 540	
Sterilization		C and 12 hours at room	
		temperature 2] Costly 3] If	
		moisture is present it reacts with	
		ethylene oxide to form ethylene	
		glycol coating. 4] After	
		sterilization articles should be	
		aerated for 24 hours for dissipation	
		of gas	

## Staff Grievance & Redressal

#### Scope:-

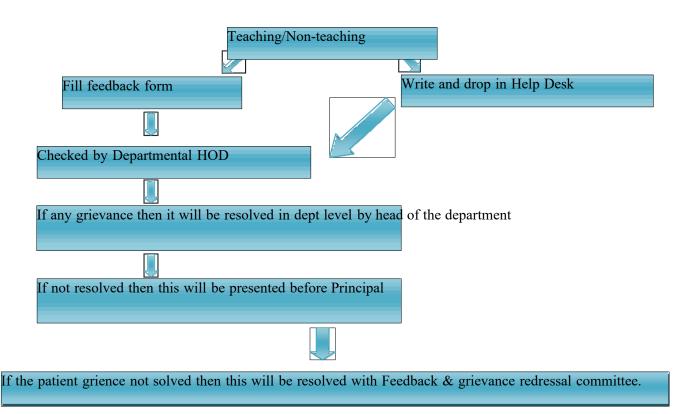
The procedures described in this document shall be followed by Head of the department of the Principal and grievance committee of the college for dealing with teaching and non-teaching staff grievances received through feedback form received.

## 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 a staff on various issues is 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.

#### Responsibility:-

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



#### Laundry and House Keeping

#### Scope -

The scope of the laundry department is to provide clean and hygiene cloth to the department and the peon is responsible to keep clinical area clean.

## Purpose:-

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

#### **Responsibility:**-

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

## Procedure:-

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