# **OSCE STATION 1**

# Recording Case history

# OSCE

# STATION 5

Intraoral Peri apical radiographic techniques

# OSCE

# STATION 9

# Pit and fissure sealants

# OSCE station 2 - Clinical examination (extra oral and intra oral examination)

Time allotted - 5 minutes

## Guidelines to the students

- Please assume that the person sitting on the dental chair is the same patient for whom you have recorded the history in the previous OSCE station
- Demonstrate how you would carry out a thorough extra oral and intra oral examination, recording all the findings according to the format in the Pedodontic Record book.
- Use the photographs, provided to record hard tissue findings.

1. All the interns are instructed to complete their assignments (Seminars and Posters/models) and submit during their postings in the department on or before the dates mentioned in the

list.

2. If the last date mentioned is a holiday, the work has to be submitted on the previous working day.

3. Seminars have to be prepared in power point by individual intern and presented before the staff for about 15 mins. The dates for presentations will be given during the postings.

Once the seminar is presented, all the seminars of the batch have to be burned on the single CD and submitted to the department as per the dates mentioned in the list.

4. Posters/ models have to be discussed with the staff before finalizing and then the final project should be submitted.

For posters, printout should be taken on the photographic paper. Posters/ models have to be neatly framed and covered with the suitable material.

5. During submissions, all the interns responsible for the work should be present. Otherwise, their work will not be accepted.

6. All the work has to be approved by the H.O.D. and has to be submitted to the H.O.D.

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# INTERNS PROJECT AND SEMINAR LIST

SLNa	Name of the student	Seminar topic	Poster/model topic	Last date for submission	Student signature	Submitted date	Signatu of the staff
1	Mona Bineshan	Cliinical features of gingiva			趣杜	7	
2	Aditi Deb	Microscoopic features of gingival epithelium			Agri		
3	Saurabh Paul	Microscoopic features of gingival Connective tissue	Poster-TFO- Definition, Classifications, clinical and radiographic	12.03.2015	full	C.D Subsided	
4	Abhishek .M.A	Correlation of clinical and microscopic features of gingiva	features.		2	Schriden	
5	Aliye	Development of gingival sulcus and continuous tooth eruption			diger.		
6	Anjali jayaraj	Composition of Periodontal ligament	willed.		South		
7	Antara Sinha	Functions of Periodontal ligament	- builted Constant		Managa	ILCD.	1.0
8	Anuja verma	Structure, types and classification of cementum	Periodontal pocket- Definition,	23.04.2015	Mins	Culou	
9	Balaraj,B.V	Ceementum in disease	classification and		Ball	计片	
10	Fiza Mariyam	Development of periodontium	management		(Figa)	1/3/N	
11	Madhu Singh	Structure of alveolar bone			Bul		
12	Mahvash Naaz	Russerl's index	<u>Poster-</u> Classifications		Me	2	
13	Megha.D.B	OHI's index	of gingival	03.06.201	5 Della		

# INTERNS PROJECT AND SEMINAR LIST (April 2016- April 2017)

SL	Name of		Poster	Last	Stude	Subm	nitted [	)ate	Signat ure of
O.	the student	topic (Last date for	Topic	date   for	signat	Prese	c.D.	Pos	the staff
		presentation)		submis sion of poster	ure	ntatio n	The state of the s		31 <b>.a.</b>
1	Vivek James	Host modulating agents (30/05/2016)	Peri		John Stranger	15/6/16	D.		
2	Yasaman	(07/07/2016)	impaintit is and its	18/08/	E				
3	Apoorva V.	Hand scalers (Supragingiva I &Subgingival) (18/08/2016)	manage ment	2016	Heoris	13/9/16			
4	Cheden Tamang	Ultrasonic scalers (28/09/2016)				iolalie			
5	Majid Nameni	General principles of instrumentati on 08/11/2016)	Aggressiv		K projiel.	olille	·C显	10/21	1
6	Souvik Bakshi	Systemic antibiotics in Periodontics (19/12/2016)	e periodon titis	30/01/ 2017	Burning Burning	少し	13		
7	Sumin S.G.	Local drug delivery in Periodontics (30/01/2017)			3	19 =	)CP N		

SL NO.		INTERNS PROJECT  Seminar topic	Poster Topic	Last date for submission	Student sign		omitted Da	ite	Sign of
1	Ali Masoud Risk factors of Sinaki aggressive periodontifi	Risk factors of				Present	C.D.	Poster	the stat
		aggressive periodontitis		The first Hammer Cont.					
12	Kaushik raju	Classification and staging of AIDS	Antibiotics used in periodontal therapy	15/02/2019				$\Rightarrow$	
3	Gautam Kumar Tiwari	Oral manifestations of AIDS		12/02/2019	Goutan	19	14.1.	丛	
4	Sara Anjum Hussain	Periodontal manifestations of AIDS and treatment protocol			Que Dir	351413	13/19		
5	Sushma N	Wasting diseases	C. Part of the		b	. 0			
5	Keerthana S.	Tooth mobility			Sulle.	40	NS		
	Mukul Kumar Pal	Periodontal examination	Smoking cessation-		N.	1		b Ns	
The state of the s	Reshma R.	Radiographic appearance of periodontal diseases		30/09/2018	Port of	DS.	NS	765	

	No.		2		ω,		4	5	6	I			<b>*</b>	9			5		
	Name of the student	Vikramanka	Shamshul		Kamran		Saptharshi	Divya Das	Di∳ya Susan Jose		Manjula		Pouya Shafei	Sagar Bhargav		• • • • • • • • • • • • • • • • • • •	Sushil Kumar	Ashiq Ajit	
INTERNS PROJECT AND SEMINAR LIST (March 2017-March 2017)	Seminar topic	Cementum in disease	Development of periodontium Structure of alveolar bone Russel's index OHIs index CPITN index								Structure, types and classification of								
CT AND SEMINAL	Poster Topic					Coronoplasty						Management of dentinal Hypersensitivity							
R LIST (Mare	Last date for submission			# <b>8</b> .		18/03/2018	E.J.							National Property	(107/11/20				
II 2017∠Ma	Student sign			Strawner of the strain of the	1			7			Marjula	13.ft	$\langle h \rangle$		Sogove	2			
	niitted Date  C.D. Poster	RIGOT		PI Van			1.18		一をい言れ	VIIII V SIS IS		3/4/16		e ISIN	18/15/12/14/14/15/18/18/18/18/18/18/18/18/18/18/18/18/18/			1 No.	
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SL NO.	Name of the student	Seminar topic	Poster Topic	Ollidana Communication of the		Student Submitted Date		ite	Sign of
	AUNG					Present	C.D.	C.D. Poster	
1	Ali Masoud Sinaki	Risk factors of aggressive periodontitis	The state of the s	100		ation			
1/2	Kaushik raju	Classification and staging of AIDS	Antibiotics used in periodontal therapy	15/02/2019				$\Rightarrow$	
3	Gautam Kumar Tiwari	Oral manifestations of AIDS —		10.922015	Goutan	13	12	14	
4	Sara Anjum Hussain	Periodontal manifestations of AIDS and treatment protocol			law In	3512113	200311		
5	Sushma N	Wasting diseases	Section of the section of		- h	<b>.</b> N O	1.0	100 (100 (100 )	
6	Keerthana S.	Tooth mobility			Swill	100	18		
7	Mukul Kumar Pal	Periodontal examination	Smoking cessation-		N	- LL		DNS.	1000
8	Reshma R.	Radiographic appearance of periodontal diseases	programme  7 History &	30/09/2018	por o	NS.	139	7/3/01	

·	7	5 4 3	2	NO.
Aparna G. Apoorva Basur	Aparajita	M. Kalibhat Anju Prakash Anushree Thilakan Anwesha Patra Divya	Aditi Singh Anagha	Name of the student
inflammation in periodontitis  Bone destruction patterns in periodontal disease Trauma from Occlusion- Definition, classification and stages	Pathways of	Erythema multiformae Pocket- Classification, clinical features and pathogenesis Pocket histopathology Periodontal abscess- Formation, classification and histopathology	Pemphigus vulgaris Lupus erythematoria	INTERNS PROJECT AND SEMINAR LIST (September 2017- September 2018)  Seminar topic Poster Topic Last date for Student Submitter  Submission sign Poster Topic Poster Topic Poster Topic Poster Topic Submitter
Guided tissue regeneration	ВАТСН П	Local drug delivery	BATCHI	AND SEMINAR I  Poster Topic
07/08/2018		22/06/2018		IST (Septemb  Last date for submission
Aparejita Aparejita	B	The Same of the state of the st	Adul	er 2017. S Student sign
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SL NO.	Name of the student	Seminar topic	Last date for presentation	Student sign	Su	Parte	Sign of	
					Present ation	C.D.	Manuse ript for Publicati	the staff
1	Kona Mounika	Classification and			A L	<u>~</u>	on (Option al)	
		stagingof AIDS			22/5	)		
2	Mena C.	Oral manifestations of AIDS			22/5	N.		
3	Madhura	Periodontal manifestations of AIDS and treatment protocol	24.05.2019		22/5	186		
4	Ahalya k.	Wasting diseases			Sail -	19		
5	Aida Nikhil Sait	Tooth mobility			136			
6	Anas Ahammed	Periodontal examination	Part of		21 22			50.0
7	Anju C. Devan	Radiographic appearance of periodontal diseases			8/7/19			
8	Anupama	Advances in clinical diagnosis			Malala			
9	Anushka S.	Advances in radiographic assessment			Fol The			
			08.07.2019					

Lace 10/9/18

## INTERNS PROJECT AND SEMINAR LIST (February 2017- February 2016)

SL NO.	Name of the	Seminar topic	Last date	Student sign	Subm	Sign of the		
			presentation		Present ation	C.D.	Manusc ript for publicat ion (Option al)	staff
i	Bharath Kumar K.	Local drug delivery in periodontics	01.08.2019					
2	Shivendra Kumar	Gingival curettage	15.06.2019	BOR.				
3	Sandra Ann George	Gingivectomy	02.05.2019					
4	Sruthy S.	General principles of Instrumentation	16.03.2019	\$ 5 S	13/3/19			
5	Vignesh B. Kasal	Systemic antibiotics in periodontics	28.01.2020					

	15	14	13	12	=======================================	10	9	S.NO.
VITAMIN A	DISTURBANCES IN MINERAL & TRACE ELEMENT METABOLISM (MAGNESIUM,IRON, ZINC,FUORIDE)	CALCIUM & PHOSPHORUS METABOLISM PATHOLOGIC CALCIFICATION	CLOTTING FACTOR DEFICIENCIES	COAGULATION OF BLOOD PLATELET DISORDERS	CHRONIC LEUKAEMIAS	ACUTE LEUKAEMIAS	LEUKOCYTOSIS- DEFINITION, CAUSES & INFECTIOUS MONONUCLEOSIS	TOPIC
		-			-			NAME
	27					76 <u>5</u> 18		Date of submissio
84	v			5		-		Scheduled date Date of presentation presented
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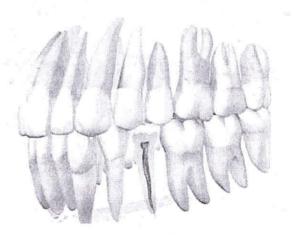
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	ii .										Staff sign					

8-18 Oral Pathology Record - 193

# Department of Oral & Maxillofacial Pathology

**Dental Anatomy** 

UNDERGRADUATE JOURNAL I B.D.S



D. A. PANDU MEMORIAL R. V. DENTAL COLLEGE AND HOSPITAL BANGALORE

## Index of Work Done

SI No	Tooth	Date of Demonstration	Expected Date of Submission	Sample	Grade	Signature With Date
1	Basic Shapes Rectangle			1		
	Cube			I		
	Cylinder	<b>-</b>				
	Cone			1		
	Single Sided Dumbbell	-		1		
2	Permanent			1		
-	Maxillary Central Incisor			11		
				111		
	Permanent			1		
3	Maxillary Lateral Incisor			11		
2755Y-				111		
4	Permanent Maxillary Canine			11		
-				111		
	Permanent					
•	Mandibular Central Incisor			11		
				111		

SI No	Tooth	Date of Demonstration	Expected Date of Submission	Sample	Grade	Signature With Date
6	Permanent			1		
0	Mandibular Lateral Incisor			11		
***************************************	corora mesor	<		Ш		
	Permanent			I		
7	Mandibular Canine					
***************************************				Ш		
8	Maxillary First  Premolar					
	A 4 200		-	11		
9	Maxillary Second Premolar					
10	Mandibular First			1		
10	Premolar			- <u>'</u>		
11	Mandibular			1		
	Second Premolar			11		
12	Permanent Maxillary First			1		
	Molar			II -		
13	Permanent Maxillary Second			1		
	Molar			11		
4	Permanent Mandibular First			T T		
	Molar			11		
5	Permanent Mandibular Second Molar					
_				11		
6	Tooth Numbering S	ystems				

CUSHING'S SYNDROME
PROTEIN ENERGY MALNUTRITION

Dral Pattology Record 2 of 3

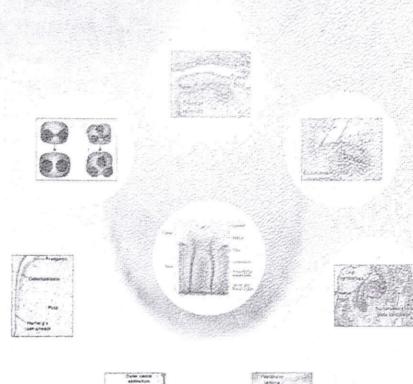
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DEPARTMENT OF ORAL & MAXILLOFACIAL PATHOLOGY

#### ORAL HISTOLOGY

UNDERGRADUATE JOURNAL

I BDS



D. A. PANDU MEMORIAL R. V. DENTAL COLLEGE AND HOSPITAL
BANGALORE

SL. NO.	TOPIC	PAGE NO.	DATE	SIGNATURE	REMARKS
	ODONTOGENESIS (TOOTH DEVELOPMENT)				
TD1	Dental lamina	-			
TD2	- Bud stage	***************************************	PRODUCTION OF THE STATE OF THE		And the second s
TD3	Cap stage				
TD4	Early bell stage				
TD5	Advanced bell stage	***************************************			
TD6	Hertwig's epithelial root sheath	***************************************	Mdfilite A Anni mar Called Color (Color Color Co	***************************************	
	ENAMEL	***************************************			
Ent	Enamel rods		**************************************		
EN2	Striae of Retzius		***************************************		
EN3	Neonatal line in enamel				
EN4	Enamel lamellae				
EN5	Enamel tufts		***************************************		
EN6	Enamel spindles		***************************************		
EN7	Gnaried enamel				······································
EN8	Hunter-Schreger bands				
EN9	Dentinoenamel junction				
***************************************	DENTIN				•••••
DE1	'S'-Shaped dentinal tubules				***************************************
DE2	Y-Shaped dentinal tubules				
DE3	Incremental lines of von Ebner				
DE4	Contour lines of Owen				
DE5	Interglobular dentin				
DE6	Tomes' granular layer				
DE7	Secondary dentin			***************************************	
DE8	Tertiary dentin			***************************************	
DE9	Dead tracts			***************************************	
DE10	Sclerotic dentin				***************************************
	CEMENTUM				
Έ1	Acellular cementum				***************************************
E2	Cellular cementum				***************************************
E3	Sharpey's fibres				***************************************
E4	Cementoenamel junction - Overlap type				
	Cementoenamel junction – butt joint				
	Cementoenamel junction – gap type				
E5	Hypercementosis				
			***************************************	***************************************	·····
					····

SL. NO.	TOPIC	PAGE NO.	DATE	SIGNATURE	REMARKS
	PULP				
PU1	Zones of pulp	***************************************	entantantanta (Azirantan		
PU2	Pulp stones (ground section)		***************************************	***************************************	
PU3	Linear calcifications of pulp				
	(decalcified section)				
	PERIODONTAL LIGAMENT		***************************************		
PL1	Principal fibres of periodontal ligament		Manuel Consocration of Spinish a Annual	***************************************	
	ALVEOLAR BONE	***************************************	Wilder to American Constitution of the Constit		
AB1	Haversian system		***************************************		
AB2	Trabecular bone		20000000000000000000000000000000000000		
AB3	Mature and Immature bone		***************************************		
	SALIVARY GLANDS		***************************************		
SG1	Serous salivary gland		***************************************		
SG2	Mucous salivary gland				
SG3	Mixed salivary gland				***************************************
	MAXILLARY SINUS		***************************************		
MS1	Sinus lining				
	ORAL MUCOUS MEMBRANE				
OM1	Parakeratinized oral mucosa				***************************************
OM2	Orthokeratinized oral mucosa				
ОМ3	Non-keratinized oral mucosa				
OM4	Palate – anterolateral zone			***************************************	***************************************
OM5	Palate – posterolateral zone				
OM6	Alveolar mucosa				
OM7	Vermilion border of lip				***************************************
8MO	Tongue – Circumvallate papilla				
OM9	Tongue – Fungiform papilla				
OM10	Tongue – Filiform papilla				a l
OM11	Dentogingival junction			· · · · · · · · · · · · · · · · · · ·	
OM12	Skin				
	TEMPOROMANDIBULAR JOINT				
TJ1	Histologic section				***************************************
	GROUND SECTION OF TOOTH				
GS1	Labeling of structures				***************************************
		***************************************		***************************************	***************************************
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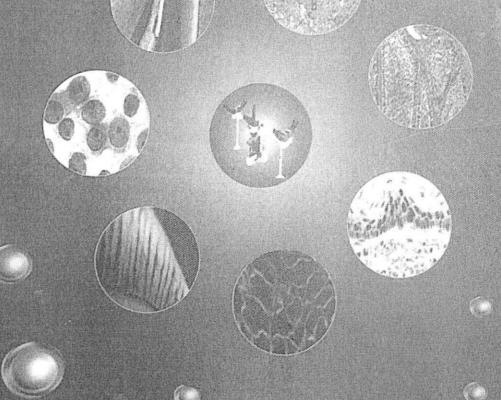
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# ORAL PATHOLOGY

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III BDS -



D. A. PANDU MEMORIAL R. V. DENTAL COLLEGE AND HOSPITAL BANGALORE

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	DENTAL CARIES		***************************************	<del> </del>				
1	Pit and fissure caries		***************************************		***************************************			
2	Smooth surface caries	<del> </del>	***************************************					
3	Dentinal caries – liquefaction foci			***************************************				
	PULP AND PERIAPICAL DISEASES			***************************************				
4			***************************************					
5	Periapical granuloma		***************************************					
	PREMALIGNANT LESIONS AND CONDITIONS							
6	Leukoplakia (Epithelial dysplasia)							
7	Carcinoma in situ							
8	Oral submucous fibrosis							
	DEVELOPMENTAL DISTURBANCES							
9	Fordyce's spots							
	CYSTS							
10	Odontogenic Keratocyst							
	(Keratocystic odontogenic tumour)							
11								
12	Radicular cyst		***************************************					
13	Cholesterol clefts /cholesterol crystals							
14	Rushton bodies							
15	Calcifying Odontogenic cyst							
16	Mucocele		***************************************					
	NON-ODONTOGENIC EPITHELIAL NEOPLASMS							
17	Papilloma				***************************************			
18	Well differentiated squamous cell carcinoma				***************************************			
19	Moderately differentiated squamous cell		•••••••••••••••••••••••••••••••••••••••					
	carcinoma							
20	Verrucous carcinoma		***************************************					
21	Malignant melanoma	***************************************			***************************************			
22	Basal cell carcinoma							
	NON-ODONTOGENIC CONNECTIVE TISSUE	•••••••••••						
	NEOPLASMS							
23	Fibroma		***************************************		***************************************			
24	Lipoma	~~~~						
25	Capillary haemangioma				***************************************			
26	Cavernous haemangioma		···					
7	Lymphangioma		***************************************					

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N		PAGE NO.	DATE	SIGNATURE	REMARKS
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29					The second secon
***************************************	TUMOUR-LIKE LESIONS OF ORAL CAVITY		***************************************	-	
30	- 1 - 2 - 3 - 110 Argundollia				
31	The second digital con digital constant		***************************************		
32	Central giant cell lesion				
	BONE DISEASES		***************************************		
33	Osteomyelitis (acute)				
34	Osteomyelitis (chronic)				
35	Fibrous dysplasia				
36	Ossifying fibroma				
37	Paget's disease				
	ODONTOGENIC NEOPLASMS				
38	Ameloblastoma (follicular)				
39	Ameloblastoma (plexiform)				
40	Ameloblastoma (acanthomatous)				
41	Ameloblastoma (granular cell variant)				
42	Adenomatoid odontogenic tumour				
43	Ameloblastic fibroma				
44	Compound odontome				
45	Cementoblastoma				
	SALIVARY GLAND TUMOURS & TUMOUR-				
	LIKE CONDITIONS				
46	Necrotizing sialometaplasia				
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48	Warthin's tumour				
49	Mucoepidermoid carcinoma (low grade)				
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51	Adenoid cystic carcinoma				
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52	Lichen planus with civatte bodies				
53	Pemphigus				
	INFECTIONS				
54	Tuberculosis				
5	Actinomycosis				
6	Candidiasis				
				·····	

SL.		PAGE NO.	DATE	SIGNATURE	REMARKS
	HARD TISSUE SPECIMENS	NO.	***************************************		NEMARKO
****************	DENTAL CARIES			*	
1	Proximal caries		ACCORDING TO SECURITY OF THE S		4.000.00
2	Root caries		***************************************		***************************************
	DEVELOPMENTAL ANOMALIES		***************************************		
3	Macrodontia Macrodontia				
4	Fusion				
5	Concrescence				
6	Dilaceration				***************************************
7	Taurodontism				***************************************
8	Enamel pearl				***************************************
9	Talon cusp				
10	Supernumerary root				
11	Multiple supernumerary teeth				
12	Mesiodens Mesiodens				
13	Submerged tooth				
	Cabinoigea tootii				
	BONE DISEASES				
4	Torus palatinus				
15	Torus mandibularis				
	ODONTOGENIC TUMOURS				
6	Odontome				
	REGRESSIVE ALTERATIONS				
7	Attrition				
8	Abrasion				-
9	Erosion				
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### DIAGNOSTIC AND OPERATIVE PROCEDURES PERFORMED

SNO	DATE	OPNO	NAME OF THE PATIENT	PROCEDURE PERFORMED	CATEGORY O, A PA,PI
+					

KEY WORDS: O- Washed up and observed.

A – Assisted a more senior surgeon.

PA- Performed procedure under the direct supervision of senior surgeon

PI- Performed independently

# D.A.P.M.R.V. DENTAL COLLEGE AND HOSPITAL

DEPARTMENT
OF
ORAL & MAXILLOFACIAL SURGERY



CLINICAL RECORD

## D.A.P.M.R.V. DENTAL COLLEGE & HOSPITAL

J. P. NAGAR, BANGALORE - 560 078.

## Certificate

This is to Certify that

Mr. Ms.	3	A Company of the Comp
Reg. No.	has	satisfactorily
completed	the clinical w	ork in
Department of Ora	l & Maxillo	Facial Surgery
Prescribed by the	Rajiv Gandhe	University of
Health Sciences for the	he III 8.D.S	3 & IV B.D.S
Course during th	e Year	

Date:

Professor and Head
Department of Oral & Maxillo Facial Surgery
D.A.P.M.R.V. Dental College
Bangalore

1) Consolidated Work done Record	Page 01
2) List of Seminars Presented	Page 02
3) Case Record Sheet	
a) Exodontia	Page 03 - 22
b) Major/Minor Surgical Cases	Page 23 - 42
4) Extraction Record	Page 43 - 62

#### HIPPOCRATE'S OATH

I solemnly pledge myself to consecrate my life to the service of humanity.

I will give to my teachers the respect and gratitude which is their due.

I will practice my profession with conscience and dignity.

The health of my patient will be my first consideration.

I will respect the secrets, which are confined in me.

I will maintain by all the means in my power the honor and noble tradition of my profession.

My colleagues will be my brothers/Sisters.

I will not permit consideration of religion, nationality, race, party politics and social standing to intervene between my duty and my patient.

I will maintain the utmost respect for human life from the time of conception.

Even under threat, I will not use my medical knowledge contrary to laws of Humanity.

I make these promises solemnly, freely and upon my honour.

#### CONSOLIDATED WORK DONE RECORD

PROCEDURES	MUST DO	DONE
Extraction Cases Recorded	5	
Forceps Extraction Done	30	
Surgical Extraction Assisted	5	
Surgical Extractions Done	5	
Surgical (Major / Minor) Cases Recorded	5	
Surgical (Major / Minor) Cases Observed	Desirable	

#### LOCAL ANESTHETIC NERVE BLOCKS GIVEN:

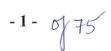
Classical Inferior Alveolar Nerve Block with Lingual & Long Buccal Nerve     Block	10	
2) Akkinosi Close Mouth Technique For Mandibular Nerve Block	2	
3) Mental Nerve Block	2	
4) Incisive Nerve Block	2	
5) Posterior Superior Alveolar Infiltration / Block	10	
6) Greater Palatine Nerve Block	10	
7) Infra Orbital Nerve Block	2	***************************************
8) Nasopalatine Nerve Block	4	

#### PRE SURGICAL WORK DONE

1) Scrubbing Technique
2) CPR Technique
3) Suturing Technique
4) Wiring Technique

SEMINARS PRESENTED

Signature of Staff Incharge



#### LIST OF SEMINARS PRESENTED

### CASE HISTORY SHEET FOR ORAL & MAXILLOFACIAL CASES

Name	:			
Age				
Sex	:			
Address	3			
Chief Co	mplaint:			
History of Present Illness :				
	edical History :			
	hma, Chest or heart disease, Rheumatic fever, Diabetes, nsion, Epilepsy, Any other please mention.			
	·			
Drug A	lergies:			

# Personal History: Occupation: Habits: Smoking, Alcohol, Pan/and Tobacco Chewing, Drugs, Any others please mention below: Forestant: Parter. Occupation: Italians: The term of the personal and the personal a

**Current Medication:** 

Head	and	Neck	Examination	:
------	-----	------	-------------	---

- 1) Face -
- 2) Neck -
- 3) Oral Cavity -
  - A) Soft tissue Lips

Buccal mucosa:

Tongue

Palate

Gingiva

B) Hard tissue - Teeth:

Bone:

C) Other Findings -

Provisional diagnosis:

### Investigations:

- a) Radiographs -
- b) Blood Tests -
- c) Other Tests -

# D.A.P.M. R.V. DENTAL COLLEGE AND HOSPITAL, BANGALORE



Intern LOG BOOK
2018-2019
DEPARTMENT OF ORAL MEDICINE AND RADIOLOGY

# D.A.P.M.R. V. DENTAL COLLEGE (Affiliated to RGUHS, Karnataka)

### Intern Log book

Name of the student

Degree : BDS

Academic Year : August 2018- July 2019

Name of staff in charge :

Signature of the student

### D. A. P. M. R. V. DENTAL COLLEGE

### **CERTIFICATE**

Certified that the contents of this Logbook is the Bonafide work of

Intern posted in Department of Oral Medicine & Radiology of D. A. P.M. R.V. Dental College for the Academic Year 2018-'19.

Dr.SEEMA PATIL

Signature, Name

of the staff in-charge

Signature, Name

and seal of

Professor & HoD

Date:

Date:

Place:

Place:

# Oral Medicine work done

SI no	Name of the patient	Diagnosis	Investigation	Treatment plan	Follow up	Sign
					*	

# RADIOGRAPHS TAKEN

SI No	Radiograph taken	Diagnosis	Signature

### **CBCT** interpretation

SI No	Patient Name	CBCT diagnosis	Signature
2			

# Research

Sl no	Title of the study	Signature
	,	

# Department of Oral Medicine and Radiology

### Criteria 8.1.8

### **Quota for Interns**

All interns who are posted in the department are required to check the routine out patients who come to the department. The following is the quota for interns which is in addition to the above mentioned activity.

### **Quota in Oral Medicine**

- 1. Intralesional injections in Oral Sub mucous Fibrosis patients 1
- 2. Perform Chair side investigations -2
  (Monitoring vital signs, BP, pulse & respiratory rate, toluidine blue staining, exfoliativecytology, punch biopsy, brush biopsy, pulp testing, and sialographykit)
- 3. Management of a patient with mucosal lesion1 (Red and white lesion)

### Quota in Maxillofacial Radiology

1.	Intra oral periapical radiographs	- 10
2.	Extra oral radiographs	- 5
3.	PSP	- 5
4.	Assist CBCT interpretations	- 2

### Research

1. Assist one PG student in their short term research project.

# CLINICAL PRACTICAL RECORD

DEPARTMENT OF ORAL MEDICINE AND RADIOLOGY

# R.V. DENTAL COLLEGE BANGALORE

NAME	:	
REG. NO.	:	



# <u>Certificate</u>

This is to Certify that Mr. / Ms	
has satisfactorify completed the	elinical practicals in Oral Medicine
	Gandhi University of Health Sciences for the
IV W.D.S Course auring the year	Secretarian services of manufactures of the services of the se
Date:	
	Professor and Head Department of Oral Medicine & Radiology
Reg. No.	•

		O.P. CASES	3	
	Q P No	PATIENT'S NAME	AGE / SEX	SIGNATURE
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# CASE HISTORY SHEET

A. Name: B. Age: E. Address:	C. Sex:	D. Occupation	*
2. CHEIF COMPI	<u>LAINT</u> :		
3. HISTORY OF I	PRESENT ILI	NESS:	
			O.V. O.E. C.E.V.T.
A DACT MEDIC	AL, DENTAL	AND SURGICAL HISTO	RY (RECENT):
A. Systemic Diseas			
<ul><li>A. Systemic Diseas</li><li>B. Medications:</li></ul>			
<ul><li>A. Systemic Diseas</li><li>B. Medications:</li><li>C. Transfusions:</li></ul>	se.		
A. Systemic Disease B. Medications:	se.		
<ul><li>A. Systemic Discas</li><li>B. Medications</li><li>C. Transfusions</li><li>D. Hospitalization</li></ul>	TORY:		

Crepitus:
Clicking or popping:
Salivary Glands:
Extra oral- Examination of pre auricular and submandibular region:

Intra oral- Examination of orifices of Wharton's and Steuson's duct:

Examination for pooling of saliva in floor of the mouth:

### **B. Intraoral Examination:**

Hard Tissue Examination:

Teeth present:

Missing Teeth:

Decayed Teeth:

Filled Teeth:

Attrition / Abrasion / Erosion

Others:

Occlusion:

Soft Tissue Examination:

Gingiva: Colour:

Shape:

Contour:

Surface:

Bleeding on Probing:

Consistency:

Position:

Pockets / Furcation involvement

Local Factors:

	Lips:	
	Buccal / Labial Mucosa	
	Vestibule:	
	Frenal Attachment	
	Hard and Soft Palate	
	Tongue	
	Floor of the mouth:	
	" Others	
	9. EXAMINATION OF AREA OF CHEFF COMPLAINT:	
	$\epsilon$ ,	
S common control in 1972 (Supervisor control c	10. PROVISIONAL DIAGNOSIS:	

### 12. INVESTIGATIONS:

Laboratory: Blood.

Urine

Histopathology

11. DIFFERENTIAL DIAGNOSIS:

Others:

				namen and the second second
e de la constitución de la const				
	Radiographic investigations and interpretation:			
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		will be		
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	13. FINAL DIAGNOSIS:			
				9
	14. TREATMENT PLAN:	2		
	a) Immediate:	15 E		
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	b) Planned:			W
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### D.A.P.M. R.V. DENTAL COLLEGE AND HOSPITAL, BANGALORE



POST GRADUATE LOG BOOK
2018-2019
DEPARTMENT OF ORAL MEDICINE AND RADIOLOGY

# D.A.P.M.R. V. DENTAL COLLEGE (Affiliated to RGUHS, Karnataka)

# POST GRADUATE LOG BOOK

Name of the student

Post Graduate Degree

: M.D.S

Academic Year

: MAY 2018- MAY 2019

Name and Designation of Guide

Signature of the student

# D. A. P. M. R. V. DENTAL COLLEGE

# **CERTIFICATE**

Certified that the contents of this Lo	gbook
is the Bonafide work of	

post graduate student of Department of Oral Medicine & Radiology of D. A. P.M. R.V. Dental College for the Academic Year 2018-'19.

Dr.ASHA.R.IYENGAR

Signature, Name

and seal of Guide

Dr.SEEMA PATIL

Signature, Name

and seal of

Professor & HoD

Date:

Date:

Place:

Place:

# **INDEX**

Sl. No	Academic Activities	Page No.
1.	Case records	
2.	Chair Side Clinical Procedure	
3.	Seminars	
4.	Journal Clubs	
5.	Conference attended	
6.	Continuing Dental Education Programme attended	
7. Workshops attended		
8.	Scientific paper presented and Research	
9.	Practical Demonstrations	
10.	Teaching Skills	

### **OUT PATIENT RECORD**

Sl.No.	Outpatient
,	

### **RADIOGRAPHS TAKEN**

### Intraoral radiographs:

Intraoral periapical radiographs taken:

Bitewing radiographs taken:

Occlusal radiographs:

Tracing of intraoral radiographs done: Bisecting angle technique -

Paralleling technique –

Bite wing technique-

Occlusal technique-

### CHAIR SIDE CLINICAL PROCEDURE

Pulp vitality testing

Cytological smears

Case history recordings

Interesting cases recorded

### **OUT PATIENT RECORD**

Sl.No.	Outpatient

### RADIOGRAPHS TAKEN

### **Intraoral radiographs:**

Intraoral periapical radiographs taken:

Bitewing radiographs taken:

Occlusal radiographs:

Tracing of intraoral radiographs done: Bisecting angle technique -

Paralleling technique -

Bite wing technique-

Occlusal technique-

### CHAIR SIDE CLINICAL PROCEDURE

Pulp vitality testing

Cytological smears

Case history recordings

Interesting cases recorded

### SEMINARS ATTENDED

Sl.No.	DATE	TOPIC
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2		

### SEMINARS ATTENDED

Sl.No.	DATE	TOPIC
	5	

### JOURNAL CLUB PRESENTED

SL NO	DATE	JOURNAL CLUB TOPIC

# JOURNAL CLUB ATTENDED

Sl.No.	DATE	TOPIC
,	~	
	3	

# **CONFERENCE ATTENDED**

Sl No	Date	Particulars
	Bute	1 at ticulars
	4.	

### Signature

### **CDE ATTENDED**

Sl No	Date	Particulars

# SCIENTIFIC POSTER PRESENTATION

Sl No	Date	Title	Conference

### Signature

# SCIENTIFIC PAPER PRESENTATION

Sl No	Date	Title	Conference

# **WORKSHOPS**

Sl. No	Date	Particulars
0		

Signature

# PRACTICAL DEMONSTRATIONS

SI N o	Date		Details of work done				
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# **WORKSHOPS**

Sl. No	Date	Particulars

Signature

# PRACTICAL DEMONSTRATIONS

SI N o	Date	Details of work done

### TEACHING SKILLS

Sl No	Date	Topic taught	Class to whic taught	

 $\rightarrow \times$  -

RGUHS has approved our department for one year Fellowship programme in Aesthetic dentistry from 1st January 2009

### **COURSE CURRICULUM FOR AESTHETIC DENTISTRY**

Esthetic Dentistry is actually the fourth dimension in clinical dentistry. In addition to biologic, Physiologic, and mechanical factors, all of which must be understood in order to achieve a successful clinical result. Comprehensive Patient treatment can be counteracted only if relationships of various treatment modalities have been established.

### **CONSERVATIVE**

- Human Anatomy Face muscles, Symmetry of Face, Face analysis, dimensions of face as applied to aesthetic dentistry.
- Esthetic and its relationship to function Dental anatomy of the Permanent teeth, Physiology of occlusion, Mastication, occlusal loading, clinical aspects of bioaesthetic functions.
- Structural esthetic rules.
- Fundamentals of esthetic Light and shadow, the principals of colour hue, chroma, value, opacity, translucency, depth.
- Principle of form illusion, law of face, alteration of face.

### ADHESION

- Basic concept of adhesion, Enamel Adhesion, Dentin Adhesion
- Development of dentin bonding systems, clinical factors in dentin adhesion.
- Types of esthetic restorative materials such as composites, compomers, flow able composites, ceramic material aspect- composition properties, manipulation, insertion, finishing and polishing of restoration.
- Direct composite restoration indications, contraindications, advantages, disadvantages, clinical procedure of restorations of teeth with composite, class III, class V Angle build up, conservative – alteration of tooth contours and contacts – alteration of shape of embrasure and correction of diastema.
- Direct Posterior composite restoration class I, class II, cavity preparation, restoration techniques.
- Indirect posterior composite restoration inlay, onlay, tooth preparation, fabrication, cementation.
- Porcelain laminate veneer advantages, disadvantages, indication, contraindication, clinical procedures for tooth preparation, gingival retraction, impression taking, shade selection, laboratory procedure for the fabrication of veneers (Die making the master cast, working cast, firing, glazing, etching of the fitting surface, trying cementation and finishing.
- Cast ceramic lamination system.
- Composite veneer Direct method, tooth preparation, techniques of restoration.
- Veneer for indirect restoration.
- Repair of Veneer.

### MANAGEMENT OF DISCOLORED TEETH

- Etiology of tooth Discoloration, indications and contraindications bleaching agents used, bleaching of non vital root canal treated tooth, different technique, vital bleaching.
- Alternative to bleaching, micro abrasion and macro abrasion techniques.
- Other techniques.

### PRECLINICAL TRAINING

.PRECLINICAL WORK IN CONSERVATIVE: (on extracted teeth)

Anterior crowns -

- a) PFM 2
- b) All ceramic 2
- c) Veneers 2 (composite and ceramic including Processing)

Anterior composite restorations:

- a) class 3 ----- 2 each
- b) class 4 ----- 2 each
- c) class 5 ----- 2 each.

### **CLINICAL TRAINING**

CONSERVATIVE - case discussion and treatment planning

- Anterior composite restoration (class III, class V, angle build up, closure of diastema, shaping)
- Laminate veneer, direct composite, indirect ceramic veneers
- Direct Posterior composite restoration
- Composite inlays and ceramic inlays and onlays
- Bleaching vital and non vital
- Demonstration of post and core for anterior teeth
- Ceramic crown for anterior teeth

# CLINICAL WORK TO BE CARRIED OUT

Conservative type of	Performed	Performed	Assisting	Observation
restoration	independently	under	rissisting	Obscivation
		supervision		
1) Anterior composite				
restoration, class III, angle				
build up, Diastema closure,				¥
shaping and contouring of				
teeth.	20			
Paradi del				
2) Laminate veneers, direct	5			
and indirect composite				
veneers.				
2) G				
3)Ceramic Veneers	5			
4) D:				
4) Direct Posterior	10			
composite restorations.		22		
5) Planching (cit 1	50.00			
5)Bleaching (vital and nonvital)	5			
1				
6)Demonstration of post and core for anterior teeth				
I I	_	1		5
7) Anterior jacket crown 8) Posterior PFM	5			
o) i ostellor Privi				2

#### **PROSTHODONTICS**

- 1. Esthetics in Dental Prosthesis:
  - Symmetry
  - Proportion
  - Dominance
  - Cosmetics
  - Esthetics in region of oral cavity
  - Principals of esthetic integration
  - Morphological integration
  - Biologic integration
  - Functional integration

#### PRINCIPLES OF ESTHETIC SETUP

- Facial analysis
- Clinical approaches to restoration of VDO
- Integration of mandibular anterior segment
- Integration of posterior segment
- Posterior occlusal plane and increase of VDO
- Integration of anterior and posterior occlusal planes
- Integration to maxillary anterior segment
- Functional integration of maxillary anterior segment.
- 2. Diagnosis and treatment planning of esthetic problems
- 3. Metal ceramic crowns indications, tooth preparations, finishing lines, position of incisal edge of the preparation, margin design metal collar, metal feather edge, porcelain margin.
- 4. All ceramic crowns and foil crowns
  - Ceramic jacket crowns
  - Glass ceramic crown
  - Leucite reinforced porcelain
  - Injection molded glass ceramic
  - In cream
  - Indications, selection of crown systems, esthetic performance tooth preparation and finish lines.
- 5. Crown and bridge All ceramic, modified metal ceramic restorations, current ceramic systems.

- Basic consideration in full coverage restorations, indications, contraindications, tooth preparation techniques, gingival tissue management, impression, provisional restoration, lab procedure, try in, cementation of ceramic jacket crown and bridge.
- Aesthetic gerodontics, endoesthetic, post and core, laboratory procedures.
- 6. Removable prosthesis, aesthetics, impression making, impression materials, laboratory procedures.
- 7. Over Dentures treatment options for decimated dentition.
- 8. Immediate replacement prosthesis.
- 9. Esthetics and implants.
- 10. Gingival Veneers.
- 11. Esthetic aspects in complete denture prosthesis impression, jaw relation, teeth selection, and arrangement, denture characterization

Students should be posted on rotation as follows for case discussion and treatment planning 6 months – Conservative, 3 months – Prosthodontics, 1 month – Periodontics.

Prosthodontics type of restoration	Performed independently	Performed under supervision	Assisting	Observation
1) Complete denture removable prosthesis.		2		5
2) Immediate removable prosthesis		1		2
3) Maryland bridge				2
4)Resin bonded fixed partial denture		,		2
5) Implant supported anterior replacement				2
6) Cast Partial denture			2	2
7) Anterior ceramic bridge (fixed prosthesis)	1	2	2	2
8) Anterior ceramic crown (all ceramic and full ceramic)	3			

#### **AESTHETIC PERIODONTAL THERAPY**

#### PERIO AESTHETIC INCLUDES:

- Aesthetic osseous surgery
- Periodontal prosthetic consideration
- Aesthetic crown lengthening
- Aesthetic surgical corrections.
- I) Cosmetic treatment of maxillary anterior pocketing
  - Papilla preservation flap
  - Curtain procedure
- II) Depigmentation
- III) Ridge augmentation
- IV) Treatment of gummy smile.
  - Coverage of denuded root surface
  - Clinical orthodontic periodontic appliances
    - a) Aesthetic orthodontic appliances
    - b) Gingival marginal discrepancies
    - c) Missing papilla
    - d) Gummy smile
  - Aesthetic and drug induced gingival enlargements
    - a) Gingivoplasty
    - b) Gingivectomy
    - c) Flap surgery
  - Aesthetic and drug induced gingival enlargements
    - a) Gingivoplasty
    - b) Gingivectomy
    - c) Flap surgery
  - Single unit implant in aesthetic areas.

Periodontal type of re	estoration	Performed	Performed	Assisting	Observation
		independently	under		
1) Scaling and Root P	lannina	5	supervision		
1) Scannig and Root I	laillillig	3			
2) Gingivectomy		2			
3)Gingivoplasty		2			
4) Crown lengthening					5
5) Depigmentation		2			
6)Soft tissue graft					5
7) Papillary graft					5

#### **SCHEME OF EXAMINATION**

There shall be a university examination at the end of one calendar year which includes theory, Practicals and vivavoce.

#### Scheme of theory paper

These shall be one theory Paper of 3 hrs duration of 100 marks.

Long essay -2\*15 mks = 30 (1 from Conservative dentistry and 1 from Prosthodontics)

**Short essays** - 5\*10 = 50 (3 from conservative dentistry including Dental Materials and other 2 from Prosthodontics and Periodontics each)

**Short answers -** 2\*10 = 20 (5 from conservative dentistry including Dental Materials and other 5 from Prosthodontics and Periodontics)

Practical exams One day examination carrying 100mks

There shall be 1 external examiner and 2 internal examiners (outside university) PG teacher at the rank of professor who is actively engaged in PG teaching is eligible to become the examiner.

Out of the 2 internal examiners 1 shall be from conservative dentistry and endodontics and the other from Periodontics. One external examiner shall be from Prosthodontics.

Exercise 1 – Management of Anterior discolored vital or non vital tooth for PFM crown 50 mks

(Marks carry for case selection, tooth preparation, gingival retraction, impression making and cementation of temporary crown)

**Exercise II Case Presentation and Discussion** 

25 mks

Viva voce

25 mks

Criteria for Passing: - The candidate should secure 50% in university theory examination and 50% in clinicals and viva voce together

Successful candidate will be awarded Fellowship in Aesthetic Dentistry approved by RGUHS

18D0499

TAL CONSTRAINTS SINSTANDARY SI



BANGALORE

# HISTOLOGY RECORD **DEPARTMENT OF ANATOMY**

Name DEBA	TRA KUNDO	
Class: TBDS		
Roll. No12		
Year : <b>2018</b>	13	

# HISTOLOGY

# PRACTICAL RECORD



## DEPARTMENT OF ANATOMY

Name DEBATRA KUNDU
Class J. B. D.S
Roll No.
Year 2018 - 19

# CERTIFICATE

This is to Certify that

Satisfactorily completed the Histology Practicals

Prescibed by the University for the First BD5 course

During th year 2018 to 2019

Date: 02.07.2019

Staff:

Dightig

Regd.No. 18D0499

Professor & Head

Department of Anatomy

PROFESSOR AND HEAD DEPARTMENT OF ANATOMY R. V. DENTAL COLLEGE layanagar, Bangalore

External Examiner

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Date	Ex. No.	Particulars	Page	Marks	Remarks	Initials
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	60.	Study of connecti- ne sistues (confd	37-40			
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	110	Study of Blood &	83-86, 87-90			
	120	Study of fympholi				
	130	Study of Sevielory:				
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	17	Study of Igum.	127-130		Ψ
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	202	study of respirato	141-144		
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	24°	Steedy of sections of Pahre Vsurface of	223- 228	×	
	251	Filusporm Papillos	23		
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Hoph.

Sikshana Sanja





# ANATOMY PRACTICAL RECORD DEPARTMENT OF ANATOMY

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# ANATOMY PRACTICAL RECORD

Name Debatera Kundu
Class I.B.D.S
Roll No. 12
Year 2018 - 19

# **CERTIFICATE**

Certified that this is the bonafide Anatomy Practical
Record of .DEBAIRA KUNDU
He / She has satisfactorily completed the Anatomy
Practicals prescribed by the university for the
FirstBDS Course during the year
20.18.to 20.19. and his / her University Examination
Reg .No. is

Date: 02.07.2019

Staff: 25/6/2019

University Regd.No . 1800499

Professor & Head
Department of Anatomy

PROFESSOR AND HEAD DEPARTMENT OF ANATOMY R. V. DENTAL GOLLEGE lavanagar, Rangalere

External Examiner

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# PRACTICAL RECORD

#### DEPARTMENT OF PHYSIOLOGY

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Staff:

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Professor & Head
Department of Physiology



External Examiner

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#### DEPARTMENT OF BIOCHEMISTRY

D. A. PANDU MEMORIAL R. V. DENTAL COLLEGE & HOSPITAL RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES

BANGALORE

#### CERTIFICATE

This is to	certify that	Mr./Ms			~~~	100 Sec. 100			
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## PRACTICAL RECORD

#### DEPARTMENT OF PHYSIOLOGY

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Date :

Professor & Head
Department of Physiology

Staff:

university Regd. No.



External Examiner

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## DEPARTMENT OF BIOCHEMISTRY

#### Biochemistry Practical Record



Name : YASHASWINI K	-
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#### D. A. PANDU MEMORIAL R. V. DENTAL COLLEGE AND HOSPITAL

CA No.37, 24th Main, 1st Phase J. P. Nagar, Bangalore - 560 078 E-mail: rvdc@vsnl.com Website: www.rvdentalcollege.org





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D. A. PANDU MEMORIAL R. V. DENTAL COLLEGE & HOSPITAL RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES

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# Laboratory Certificate

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