

Dept of Public Health Dentistry, DAPMRVDC

Module 1: Introduction to Dental Public Health

By: Dr. Jyotsna

Lesson Plan and Specific Learning objectives

Chapter title : Introduction to Dental Public Health			
SLO: At the end of the class, students should be able to			
<ol style="list-style-type: none"> 1. Identify the role that dental public health plays within dentistry. 2. Identify the role that the private practice dentist plays within the dental public health infrastructure and delivery of care systems. 3. Identify the core functions and accomplishments of dental public health 4. Have an overview of the concept of DPH 			
Topics to be covered & method of teaching			
	Introduction to dental public health	How it will be taught	Time required
1.	What is Dental Public health?	Jig saw puzzle	30 mins
2.	Functions of dental public health		
3.	Tools of dental public health	Each group will be named after one tool. Each group gets 5 minutes to convince the others as to why that tool is important to DPH	40 minutes
4.	Difference between Clinical dentistry & dental public health.	Collage- 1 team	10 minutes of briefing + 30 minutes of activity +15 minutes of debriefing
5.	Behavioral sciences in dental public health	Collage- 3 teams	
6.	Career prospects in PHD	Collage-1 team	
Suggested textbooks			
Textbook of Preventive & Community Dentistry-SS Hiremath, Essentials of Public Health Dentistry- Soben Peter			
Materials provided			
Handout containing all the relevant information, frequently asked exam questions, viva questions			
Assignment:			
1. Write the answers to the frequently asked exam questions.			

Plan of Module 2:

1. Introduction to epidemiology	4 hours	How it will be taught
2. What is epidemiology	15 min	
3. Tools of epidemiology	15 min	
4. Measurements in epidemiology – incidence, prevalence, Odd's ratio, relative risk		
5. What is sampling and sampling methods	1 hour	Activity using different colored beads
6. & jurisprudence	1 hour	
7. EBD		Handout for further discussion

Sl.no	Topic	Method of teaching	Time required
1.	Introduction to epidemiology	Discussion	10 mins
2.	Measurements in epidemiology		
2a.	Measures of frequency <ul style="list-style-type: none"> • Rate • Ratio • Proportion • Incidence • Prevalence 	<ul style="list-style-type: none"> • Each group will be given some beads. • Each color designating a specific disease/exposure/healthy status. • Activity will be done to simplify the concepts. • Role play for incidence & prevalence. 	40 mins
2b.	Measures of association		30 mins

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Lesson Planning document

Domain: Cognitive

Class: 3rd year BDS (odd batch)

Date: 2.9.21

No of Students: 08

Time: 8.30am -9.30am

Topic: School Oral Health Programs

Specific learning objectives:

1. To understand the need for school oral health programs
2. To enlist the various school oral health programs
3. To enumerate the roles of all school oral health program..

SLO	Content	TL Method/ media	Assessment	Time
1.	Need for school oral health programs	Discussion	--	10 minutes
2.	Various school oral health programs	Lecture	--	20 minutes
3.	Role of school oral health	Lecture	--	20 minutes


Summarization and follow up activity – buss session on various school oral health programs

References:

1. Essentials of Public health Dentistry by Dr Soben Peter
2. Textbook of Public Health Dentistry by Dr SS Hiremath

Important questions

1. Discuss in details about tattle tooth program.
2. What is blanket referral
3. Enumerate School oral health programs in India and discuss in detail the colgate bright smile bright future program


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Lesson Planning document

Domain: Cognitive

Class: 3rd year BDS

Date: 9.9.21

No of Students:8

Time: 8.30am -9.30am

Topic: Nutritional and oral health

Specific learning objective:

1. To understand functioning of school oral health program

SLO	Content	TL Method/ media	Assessment	Time
1.	Different school oral health program	Discussion	--	10 minutes
2.	Details description of all macro and micro nutrients	Power point presentation		20 minutes
3.	Recap about each micro and macro nutrients	Discussion	--	8 minutes for each group

Summarization and follow up activity –Summarization of the important points for 5 minutes by each group

Format for Discussion:

1. Classification of nutrients
2. Each nutrients to be briefly described including their physiological functions, deficiencies and supplements
3. Brief discussion about national nutritional programs of India.

Topics:

1. Discuss the start and functions of Tattle tooth program, Askov Dental demonstration, north Carolina state wide preventive program,
2. Discuss the start and functions blanket referral, school water fluoridation, SHARP, Comprehensive dental care and increment dental care.

References:

1. Essentials of Public health Dentistry by Dr Soben Peter
2. Textbook of Public Health Dentistry by Dr SS Hiremath
3. Text book of Pathology by Kumar
4. Text book of Pharmacology by Tripati

Important questions

1. Classify nutrients and discuss in detail the physiology pathological features of Vit B complex deficiencies.
2. Enumerate all nutritional programs of India and discuss in detail the midday meal program.


D.A.P.M.R.V. ...

J.P. ...

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Dr. K. Vinodhini

Lesson Planning document

Domain: Cognitive

Class: 4th year BDS

Date: 4.9.21

No of Students: 10

Time: 8.30am -9.30am

Topic: Primary Health care

Specific learning objective:

1. To understand the concept of primary health care
2. To understand functioning of primary health care
3. To be sensitized regarding various health care workers trained in PHCs

SLO	Content	TL Method/ media	Assessment	Time
1.	Concept of PHC	Discussion	--	10 discussion
2.	Detailed description of PHC, principles, functions etc	Discussion		20 minutes discussion
3.	Detailed discussion about the health care workers trained in PHC	Discussion	--	10 minutes for each group followed by recap of important point

Summarization and follow up activity –Summarization of the important PHC and health care workers - 5 minutes

Format for Discussion:

1. Type of health care worker
2. Duration of training
3. Functioning of health care worker

Topics:

1. Discuss about all health care workers trained in PHCs like Anganwadi worker, local dais, ASHA worker, etc

References:

1. Essentials of Public health Dentistry by Dr Soben Peter
2. Textbook of Public Health Dentistry by Dr SS Hiremath
3. Text book of preventive and social medicine – Park

important questions

1. What is primary health care. discuss in detail the functions of phcs
2. ASHA – discuss in detail the functions of ASHA worker
3. Discuss in detail principles of Primary health care.


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Bengaluru

Lesson Planning document				
Domain: Cognitive				
Class: 4th year BDS			Date: 11.9.21	
No of Students: 58			Time: 8.30am -9.30am	
Topic: National and International health Organizations				
Specific learning objective:				
<ol style="list-style-type: none"> To understand the importance national and international health agencies To understare the structure and a functioning of the national and international agencies 				
SLO	Content	TL Method/ media	Assessment	Time
1.	Orientation national and international health agencies	Discussion	--	10 minutes
2.	Discussion of each national and international health agencies in detail	Flip classroom		10 minutes for each group
3	Debriefing after every discussion	classroom	--	8 minutes for each group
Summarization and follow up activity –Summarization of the important outcomes of national and international health agencies- 5 minutes				
Format for Discussion:				
<ol style="list-style-type: none"> Establishment of the health agencies Head quartered and functions of the health agency Their contribution to India 				
Topics:				
<ol style="list-style-type: none"> Discuss national health agencies like hindu kusht nivaran sangh, Tuberculosis eradication program , Kasturba women health, National Rural Health Mission and international health agency like WHO, UNICEF, FAO, RED CROSS, BLUE CROSS 				
References:				
<ol style="list-style-type: none"> Essentials of Public health Dentistry by Dr Soben Peter Textbook of Public Health Dentistry by Dr SS Hiremath Text book of preventive medicine by Park 				
Important questions				
<ol style="list-style-type: none"> Discuss role of WHO in prevention of oral diseases Enumerate the functions of UNICEF 				

Lesson Plan				
Domain: Cognitive				
Class: 4th year BDS		Date: 20.2.21 & 27.2.21		
No of Students: 58		Time: 9:00am -10.00am		
Topic: Research Ethics				
Specific learning objectives:.				
<ol style="list-style-type: none"> To enumerate the various Ethical Principles. To identify the ethical issues in their research projects. 				
Pre Reading:				
Real life Case scenarios on allocated topic –				
Tuskegee Syphilis study				
Vipeholm Study				
Nazi atrocities				
Thalidomide study				
SLO	Content	TL Method/ media	Assessment	Time
1.	Session 1- Presentation followed by debrief on allocated topics	Flipped classroom	--	Presentation - 40 minutes Debrief – 20 minutes
2.	Session 2- Recap of previous session	--	Quiz	Recap – 10 minutes
	Application to their research projects	Group Activity – Think pair & Share		Activity -20 minutes
	Discussion on ethical issues in each project	Discussion	--	Discussion – 20 mins
Summarization and follow up activity – 10 minutes summary on concepts covered in the session				

Deepti Vadavi

2021

Lesson Plan				
Domain: Cognitive				
Class: 3rd year BDS		Date: 19.8.21		
No of Students: 8		Time: 8.30am -9.30am		
Topic: Methods of Health Education				
Specific learning objectives:				
<ol style="list-style-type: none"> To enumerate the various methods of health education To demonstrate the choice of appropriate methods and media of health education for various scenarios 				
Pre Reading:				
Methods of health education				
SLO	Content	TL Method/ media	Assessment	Time
1.	Methods of health education	Flipped Classroom & Group activity Students are divided into 2 groups. Each group is provided with a case scenario and asked to work upon the same and present to the class.	--	30 mins – activity 15 mins presentation
3.	Debrief	Discussion mode	--	15minutes
Summarization– 15 minutes debrief on concepts covered in the session (Mentioned above)				
References:				
<ol style="list-style-type: none"> Essentials of Public health Dentistry by Dr Soben Peter Textbook of Public Health Dentistry by Dr SS Hiremath Textbook of Social and Preventive Dentistry by K Park 				

Lesson Planning document				
Domain: Cognitive				
Class: 3rd year BDS		Date: 3.6.21		
No of Students: 58		Time: 8.30am -9.30am		
Topic: IDA, DCI, State Dental Council				
Specific learning objectives:				
<ol style="list-style-type: none"> 1. To understand the need for establishment of DCI, State Dental Council and IDA 2. To enlist the hierarchy in the DCI, State Dental Council and IDA 3. To enumerate the functions and role of DCI, State Dental Council and IDA in Dental Education & Practice in the country. 				
SLO	Content	TL Method/ media	Assessment	Time
1.	Need for these organizations	Discussion	--	10 minutes
2.	Organization of DCI, State Dental Council and IDA	Lecture	--	20 minutes
3.	Role and functions of DCI, State Dental Council & IDA	Lecture	--	20 minutes
Summarization and follow up activity –Orientation to Mock DCI, State Dental Council and IDA simulations - 10 minutes				
References:				
<ol style="list-style-type: none"> 1. Essentials of Public health Dentistry by Dr Soben Peter 2. Textbook of Public Health Dentistry by Dr SS Hiremath 3. Relevant websites of DCI, Karnataka State Dental Council and IDA 				
Important questions				
<ol style="list-style-type: none"> 1. Enumerate the role and functions of IDA. 2. Discuss State Dental Council 3. Discuss the role of DCI. 				

Lesson Planning document				
Domain: Cognitive				
Class: 3rd year BDS No of Students: 58		Date: 10.6.21 Time: 8.30am -9.30am		
Topic: IDA, DCI, State Dental Council				
Specific learning objective: 1. To understand the functioning of DCI, State Dental Council and IDA				
SLO	Content	TL Method/ media	Assessment	Time
1.	Mock DCI, State Dental Council and IDA	Role play	--	10 minutes for each group
2.	Debriefing after every role play	Discussion	--	8 minutes for each group
Summarization and follow up activity –Summarization of roles and importance of these organizations - 5 minutes				
Format for Role Play: Topics: 1. Need for remodelling the BDS curriculum with newer technologies -DCI 2. Integrating professional continuing development program points for professional competency and renewal of registration. - State Dental Council 3. Need for integrating VR, AR and simulations to ensure clinical skill training during Covid 19. - IDA				
Format: Debate 1. Roll Call 2. Opening Statements 3. General Speakers List 4. Moderated caucus(discussion) 5. Unmoderated caucus(discussion) 6. Return to speakers list 7. Working papers 8. Draft Resolutions 9. Voting procedures				
References: 1. Essentials of Public health Dentistry by Dr Soben Peter 2. Textbook of Public Health Dentistry by Dr SS Hiremath 3. Relevant websites of DCI, Karnataka State Dental Council and IDA				
Important questions 1. Enumerate the role and functions of IDA. 2. Discuss State Dental Council 3. Discuss the role of DCI.				

Dept of Public Health Dentistry, DAPMRVDC,

Module 2- Introduction to Research Methodology & Epidemiology

Dr.Jyotsna & Dr.Deepti

Lesson Plan and Specific Learning objectives

Chapter title : Introduction to Research Methodology and Epidemiology																			
SLO: At the end of the class, students should be able to																			
<ol style="list-style-type: none"> 1. Understand the concept of epidemiology, its tools and measurements. 2. Apply & utilize the tools & measurements of epidemiology in different case scenarios 3. Explain the different methods of sampling 4. Apply the ethical principles 5. Understand the terms Negligence, Medical malpractice, Consent, Professionalism 6. Explain the basics of COPRA and Professional Indemnity Act 																			
Topics to be covered:																			
<ol style="list-style-type: none"> 1. Introduction to epidemiology <ol style="list-style-type: none"> a. What is epidemiology b. Tools of epidemiology c. Measurements in epidemiology – incidence, prevalence, Odd's ratio, relative risk d. What is sampling and sampling methods e. Ethics f. Jurisprudence 																			
Method of teaching:																			
<table border="1"> <thead> <tr> <th>Sl.no</th> <th>Topic</th> <th>Method of teaching</th> <th>Time required</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>Introduction to epidemiology</td> <td>Discussion</td> <td>10 mins</td> </tr> <tr> <td>2.</td> <td>Measurements in epidemiology</td> <td></td> <td></td> </tr> <tr> <td>2a.</td> <td>Measures of frequency <ul style="list-style-type: none"> • Rate • Ratio • Proportion • Incidence • Prevalence </td> <td> <ul style="list-style-type: none"> • Each group will be given some beads. • Each color designating a specific disease/exposure/healthy status. </td> <td>40 mins</td> </tr> </tbody> </table>				Sl.no	Topic	Method of teaching	Time required	1.	Introduction to epidemiology	Discussion	10 mins	2.	Measurements in epidemiology			2a.	Measures of frequency <ul style="list-style-type: none"> • Rate • Ratio • Proportion • Incidence • Prevalence 	<ul style="list-style-type: none"> • Each group will be given some beads. • Each color designating a specific disease/exposure/healthy status. 	40 mins
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1.	Introduction to epidemiology	Discussion	10 mins																
2.	Measurements in epidemiology																		
2a.	Measures of frequency <ul style="list-style-type: none"> • Rate • Ratio • Proportion • Incidence • Prevalence 	<ul style="list-style-type: none"> • Each group will be given some beads. • Each color designating a specific disease/exposure/healthy status. 	40 mins																

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Module 2- Introduction to Research Methodology & Epidemiology

Dr.Jyotsna & Dr.Deepti

		<ul style="list-style-type: none"> • Activity will be done to simplify the concepts. • Role play for incidence & prevalence. 	
2b.	Measures of association <ul style="list-style-type: none"> • Relative risk • Odds ratio 	•	30 mins
3.	What is sampling and sampling methods	Sampling strategies will be taught using beads of different colour	1 hour
4.	Ethics	Case scenario discussion	1.5 hours
5.	Jurisprudence	Buzz group discussion	1.5 hours
6.	Assignment	Work sheet, solving the ethical case scenarios	
Time required			
5 hours 30 minutes			
Suggested textbooks			
1. Textbook of Preventive & social Medicine – Dr. K Park 2. Textbook of preventive & community Dentistry – Dr. SS Hiremath 3. Essentials of Public Health Dentistry – Dr. Soben Peter			
Materials provided			
Handout containing all the relevant information			

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Unique procedure of Conducting Internals and External Evaluations

Undergraduate Program:

Internal Assessment:

1. OSCE - Objective Structured Clinical Examination -

As per RGUHS, The clinical skills of the student to record comprehensive case history, indices, arrive at a diagnosis and provide preventive treatment procedures needs to be assessed.

In order to enable the students to learn and reflect on the comprehensive case history procedure, the first internal examination is usually conducted in the OSCE format using templates of total 25 stations (23 workstations and 3 rest stations). The stations consist of hypothetical case scenarios to assess history taking and diagnosis, Models for recording indices, and observed stations for performing preventive procedures on models and providing oral health talk to the examiner.

Benefits of using OSCE for internals:

- Assessing and providing a 360 degree view of the students competency in recording of case history and its various procedures,
- Enabled to provide a feedback immediately to motivate and help the students reach their desired competency levels.
- Eliminated the subjective component of traditional assessment systems by using an objective checklist at each station.
- Ensured similar level of complexity for all students.
- Enabled to assess the problem solving abilities, skills and factual knowledge better than the traditional method of examination.

2. Computing of Final Internal Assessment Marks:

The Undergraduate students receive the internal assessment marks out of ten each for theory and practical. Usually the internal assessment marks are calculated based on the students performance in the three internal examinations conducted. This method overlooks the students' other activities and their overall performance. Hence, to overcome this lacunae, the department of Public Health Dentistry designed its own method of computing internal assessment marks that considers all aspects of the student performance - The theory marks are calculated based on the average of two best of three internal assessments conducted, the research work contribution of the student, their attendance and their overall performance and behavior during their theory Public Health Dentistry Classes. For the practical internal assessment computation - the average of two best of three internal assessments conducted, their cumulative grades in comprehensive case recording, oral health talks, their attendance and their overall performance and behavior during their practical Public Health Dentistry Classes. An extra additional mark is provided to the students who have participated in any additional conferences or extra academic related activities. The faculty in consultation with

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

DAPM RV DENTAL COLLEGE

FINAL YEAR EXAM APPEARING June 2019, RS 3 BATCH

INTERNAL ASSESSMENT MARKS - THEORY

Sl.no	Student Name	First IA	Second	Third	IA out of 6	Research grade	Research Credit	Research out of 4	Attendance	Attendance credit	Total	Additional credit for behavior/performance etc	FINAL IA
1	Madhuhasitha Bangaru	16.5	3.5		0.6	c	50	2.5	37.2	0	3		3
2	Nilesh	29	18		1.3	c	50	2.5	65.4	0	4	1	5
3	Monisha	30	27		1.6	a	82	4.1	87.2	0	6	1	7
4	Amrutha Rao	37.5	39.5		2.1	a	85	4.3	94.9	1	7	1	8
5	Anamika Agarwal	27	33		1.7	a	85	4.3	84.6	0	6	1	7
6	Ananya Nagaraj	33	26		1.6	b	70	3.5	78.2	0	5	0	5
7	Ankita Agarwal	48.5	55.5		2.9	a	90	4.5	88.5	0	7	1	8
8	Avinash Kumar Singh	31	24		1.5	b+	70	3.5	75.6	0	5	1	6
9	Bhawna Kumari	57	36.5		2.6	a	90	4.5	79.5	0	7	0	7
10	Chetan Ravi Sabarad	43	33.5		2.1	b	65	3.3	92.3	1	6	0	6
11	Chunduru Uday Kiran	42.5	36.5		2.2	b	65	3.3	85.9	0	5	0	5
12	Desna Vinay Shroff	49	40		2.5	a	80	4.0	76.9	0	6	1	7
13	Diksha	39.5	44		2.3	a	90	4.5	94.9	1	8	0	8
14	Gowri Alekhya D	41	46		2.4	a	85	4.3	89.7	0	7	0	7
15	Harsh Abhigyan	34	28		1.7	b+	70	3.5	75.6	0	5	1	6
16	Jesna Xavier	41	41		2.3	a	86	4.3	89.7	0	7	1	8
17	Kavya D	29	36		1.8	a	90	4.5	92.3	1	7	0	7
18	Kevin Reji K	32	33		1.8	c	60	3.0	83.3	0	5	0	5
19	M Ashalatha	39	40		2.2	a	85	4.3	98.7	1	7	1	8
20	M Sudha Rani	35.5	41.5		2.1	a	85	4.3	89.7	0	6	1	7
21	Madhushree N	33.5	36		1.9	a	80	4.0	84.6	0	6	1	7
22	Nidhi Niharika	52.5	48.5		2.8	a	90	4.5	96.2	1	8	0	8
23	Payal Mishra	46.5	53		2.8	a	90	4.5	97.4	1	8	0	8
24	Pooja S	35	40.5		2.1	a	90	4.5	93.6	1	8	0	8
25	Poornima	38.5	37		2.1	a	80	4.0	89.7	0	6	1	7
26	Prashant Kumar	23	16.5		1.1	b	70	3.5	91	1	6	0	6
27	Pratibha Sheelin	34.5	38.5		2.0	a	84	4.2	89.7	0	6	1	7
28	Pujitha Nagartapeta	37	39		2.1	a	80	4.0	93.6	1	7	0	7
29	Rachana S N	43	51		2.6	a	85	4.3	87.2	0	7	1	8
30	K R Raksha Shastry	38.5	34		2.0	a	90	4.5	85.9	0	7	1	8
31	G L Revathy	39.5	41		2.3	a	87	4.4	91	1	8	0	8
32	Riya Garg	31	42		2.0	a	85	4.3	83.3	0	6	1	7
33	Samar Ibrahim	37	48		2.4	a	85	4.3	89.7	0	7	1	8
34	Sarvaprada S S	40	19		1.6	a	90	4.5	84.6	0	6	1	7
35	Shivani Gupta	46	34		2.2	a	80	4.0	88.5	0	6	1	7
36	Shruthi Ramchandran	30	27		1.6	a	80	4.0	80.8	0	6	0	6
37	Shruti	36	33.5		1.9	a	80	4.0	88.5	0	6	1	7
38	Smriti Srivastava	37	35.5		2.0	a	85	4.3	83.3	0	6	1	7
39	Sowmya N M	34.5	35		1.9	a	85	4.3	80.8	0	6	1	7
40	Suhas K	18.5	15.5		0.9	c	55	2.8	85.9	0	4	1	5
41	Swastika Rathore	52.5	38.5		2.5	a	90	4.5	79.5	0	7	0	7
42	Thara Elizabeth	32	44		2.1	a	84	4.2	89.7	0	6	1	7
43	Vasundhara	40	31		2.0	a	80	4.0	67.9	0	6	1	7
44	Zwata Mathew	25	37		1.7	a	85	4.3	88.5	0	6	1	7
45	Anita Mathew	43	29.5		2.0	a	90	4.5	79.5	0	7	1	8
46	Ayushi Gupta	28.5	41.5		1.9	a	82	4.1	87.2	0	6	1	7
47	Sarah Firdousi Shah	43	36		2.2	a	80	4.0	96.2	1	7	1	8
48								0.0					
49													

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

DAPM RV DENTAL COLLEGE

FINAL YEAR EXAM APPEARING June 2019, RS 3 BATCH

INTERNAL ASSESSMENT MARKS - PRACTICAL

Sl.no	Student Name	I IA	II IA	III IA	IA out of 5	Case history marks	OHE marks	Field visit marks	total of practical work done	Practical work Out of 6	Attendance	Attendance credit out of 1	Total	Additional	Final IA out of 10
1	Madhuhasitha Bangaru	12	0		0.3	0	0		0	0	44.5	0	0	0	0
2	Nilesh	53	57		2.4	1	2		3	2	62.2	0	4	1	5
3	Monisha	46	52		2.2	2	2		4	2	95.8	1	5	1	6
4	Anrutha Rao	52	69		2.7	3	3		6	3	94.1	1	7	1	8
5	Anamika Agarwal	48	46		2.1	3	3		6	3	79.8	0	5	1	6
6	Ananya Nagaraj	35	67		2.3	3	3		6	3	81.5	0	5	1	6
7	Ankita Agarwal	26	78		2.3	4	3		7	4	90.8	1	7	1	8
8	Avinash Kumar Singh	43	58		2.2	2	2		4	2	86.6	0	4	1	5
9	Bhawna Kumari	59	67		2.8	4	4		8	4	79	0	7	0	7
10	Chetan Ravi Sabarad	51.5	54		2.3	3	3		6	3	91.6	1	6	0	6
11	Chunduru Uday Kiran	56	59		2.6	4	3		7	4	84.9	0	6	0	6
12	Desna Vinay Shroff	57	69		2.8	4	3		7	4	79	0	6	0	6
13	Diksha	56.5	69		2.8	4	3		7	4	91.6	1	7	0	7
14	Gowri Alekhya D	58	65		2.7	3	2		5	3	89.1	0	5	0	5
15	Harsh Abhigyan	50.5	68		2.6	2	2		4	2	80.7	0	5	0	5
16	Jesna Xavier	41	61		2.3	3	3		6	3	95	1	6	1	7
17	Kavya D	30	69		2.2	4	3		7	4	89.9	0	6	0	6
18	Kevin Reji K	49	50		2.2	3	3		6	3	85.7	0	5	0	5
19	M Ashalatha	44.5	65		2.4	4	3		7	4	98.3	1	7	1	8
20	M Sudha Rani	30	57		1.9	4	3		7	4	91.6	1	6	0	6
21	Madhusree N	42	62		2.3	4	3		7	4	89.1	0	6	0	6
22	Nidhi Niharika	50	63		2.5	4	3		7	4	95.8	1	7	1	8
23	Payal Mishra	49	71		2.7	4	3		7	4	97.5	1	7	1	8
24	Pooja S	71	61		2.9	4	3		7	4	92.4	1	7	1	8
25	Poornima	60	59		2.6	3	3		6	3	85.7	0	6	1	7
26	Prashant Kumar	43	56		2.2	3	3		6	3	89.1	0	5	0	5
27	Pratibha Sheelin	59	63		2.7	4	4		8	4	80.7	0	7	1	8
28	Pujitha Nagartapeta	41	60		2.2	4	3		7	4	89.1	0	6	0	6
29	Rachana S N	74	64		3.1	4	3		7	4	87.4	0	7	0	7
30	K R Raksha Shastry	74	60		3.0	3	3		6	3	91.6	1	7	0	7
31	G L Revathy	67	64		2.9	3	3		6	3	88.2	0	6	1	7
32	Riya Garg	53	65		2.6	3	3		6	3	73.1	0	6	1	7
33	Samar Ibrahim	55	66		2.7	3	3		6	3	84.9	0	6	1	7
34	Sarvapradha S S	55	65		2.7	4	3		7	4	84.9	0	6	1	7
35	Shivani Gupta	53	51		2.3	3	3		6	3	93.3	1	6	1	7
36	Shruthi Ramchandran	51.5	44		2.1	2	3		5	3	80.7	0	5	1	6
37	Shruti	57	70		2.8	4	3		7	4	89.9	0	6	1	7
38	Smriti Srivastava	53.5	61		2.5	3	3		6	3	77.3	0	6	0	6
39	Sownya N M	54	56		2.4	3	3		6	3	72.3	0	5	1	6
40	Sulhas K	37	59		2.1	2	2		4	2	87.4	0	4	1	5
41	Swastika Rathore	35	50		1.9	3	3		6	3	84.9	0	5	1	6
42	Thara Elizabeth	59	52		2.5	3	3		6	3	81.5	0	5	1	6
43	Vasundhara	39	43		1.8	2	3		5	3	76.5	0	4	1	5
44	Zvata Mathew	30	53		1.8	3	3		6	3	86.6	0	5	1	6
45	Anita Mathew	40	60		2.2	4	4		8	4	69.7	0	6	1	7
46	Ayushi Gupta	37	60		2.2	3	3		6	3	83.2	0	5	1	6
47	Sarah Firdousi Shah	42	68		2.4	3	3		6	3	84.9	0	5	1	6
48												0			
49															
50															
51															

DAPM RV Dental College
J.P. Nagar
Bangalore - 56

Dept of Public Health dentistry
DAPM RVDC


Details of teaching learning Methods followed in the dept.

The dept. of Public Health Dentistry follows a Modular approach of teaching learning. The entire syllabus of Public Health dentistry is divided into 7 modules. Each module comprises theory topics, related practical activities and evaluation at the end of the module. This helps in:

- Better understanding of the concept
- Interlinking of the topics
- Application of theory into practice
- Achieving desired competencies

The dept. faculty have completed a basic course in educational methodologies from Rajiv Gandhi University of Health Sciences. Two faculty of the dept. have also completed their fellowship from Foundation of Advancement of International medical Education and Research (FAIMER) and are the members of the HPE Unit of the institution. The dept faculty uses a variety of teaching learning methods in the classroom. A few of which are mentioned below:

- Lecture
- Buzz Sessions
- Group Discussions
- Mock UN
- OSCE
- Quiz & Collage
- Think, Pair & Share
- Brainstorming
- Reflective Writing & Discussions


D.A.P.M.R.V. Dept.
J.P. Nagar 1 Phase,
Bengaluru - 560 076.

Topic - Ridge Split

Presented by Dr. Ramya

Attended by

Staff

Dr. Kalavathy P. ✓
Dr. Mitha Mithy ✓
Dr. Archana ✓
Dr. Reshan M

Dr. Deepak ✓
Dr. Balakrishnan ✓
Dr. Sahana ✓

Student

Dr. Ramya ✓
Dr. Rutuja ✓
Dr. Navin ✓
Dr. Nadia ✓
Dr. Anghya ✓
Dr. Harishtha ✓

Dr. Parthi ✓
Dr. Shreya ✓
Dr. Jehan ✓
Dr. Manisha ✓

Topic - Lasers

Presented by Dr. Anghya

Attended by

STAFF

Dr. Kalavathy P. ✓
Dr. Mitha Mithy ✓
Dr. Archana ✓
Dr. Reshan M

Dr. Suchetha ✓
Dr. Divya ✓
Dr. Sapna ✓
Dr. Apoorva ✓
Dr. Darshan ✓

STUDENTS

Dr. Ramya ✓
Dr. Rutuja ✓
Dr. Navin ✓
Dr. Nadia ✓
Dr. Anghya ✓
Dr. Harishtha ✓

Dr. Rameshwari ✓
Dr. Dhavini ✓
Dr. Freeda ✓
Dr. Aparna ✓
Dr. Kushmi ✓
Dr. Swati ✓

Dr. Ramya
Principal
D.A.P.M.S. ...
J.B. Nagar ...
Bangalore ...

Topic: Fabrication of surgical stent with the help of CBCT for implant placement.

Topic: Crown lengthening.

Presented by: Dr. Ramya.

Presented by: Dr. Rutuja

Attended by:

Attended by:

Staff	Student
Dr. Kalavathy <i>[Signature]</i>	Dr. Ramya <i>[Signature]</i>
Dr. Mitha <i>[Signature]</i>	Dr. Rutuja <i>[Signature]</i>
Dr. Roshan <i>[Signature]</i>	Dr. Harshita <i>[Signature]</i>
Dr. Archana <i>[Signature]</i>	Dr. Gayathri <i>[Signature]</i>
Dr. Seema <i>[Signature]</i>	Dr. Lakshmi <i>[Signature]</i>
Dr. Subash <i>[Signature]</i>	Dr. Abirami <i>[Signature]</i>
Dr. Joshi <i>[Signature]</i>	Dr. Latha <i>[Signature]</i>
	Dr. Aditi <i>[Signature]</i>
	Dr. Sojia <i>[Signature]</i>

Staff	Students
Dr. Kalavathy <i>[Signature]</i>	Dr. Rutuja <i>[Signature]</i>
Dr. Mitha <i>[Signature]</i>	Dr. Ramya <i>[Signature]</i>
Dr. Roshan <i>[Signature]</i>	Dr. Harshita <i>[Signature]</i>
Dr. Archana <i>[Signature]</i>	Dr. Anitha <i>[Signature]</i>
Dr. Anuradha <i>[Signature]</i>	Dr. Bunish <i>[Signature]</i>
Dr. Suchetha <i>[Signature]</i>	Dr. Aparna <i>[Signature]</i>
Dr. Divya <i>[Signature]</i>	Dr. Rushmi <i>[Signature]</i>
Dr. Sapna <i>[Signature]</i>	Dr. Swathi <i>[Signature]</i>
Dr. Apoorva <i>[Signature]</i>	Dr. Swathi <i>[Signature]</i>
Dr. Dareshan <i>[Signature]</i>	Dr. Poojika <i>[Signature]</i>
	Dr. Tushar <i>[Signature]</i>

[Signature]
 D.A.P.M.R.V.
 J.P. Nagar 1 Phase,
 Bangalore - 560 075

23/4/21

chandra's

Topic: Fronectomy

Presented by: Dr. Karthiban

Attended by

Staff

Dr. Kalavathy P
Dr. Mitha Shetty
Dr. Roshan Kumar
Dr. Archana
Dr. Anuradha

Student

Dr. Karthiban
Dr. Grayathri
Dr. Bunesk
Dr. Ranuja
Dr. Harshita

Dr. Sucheltha
Dr. Divya
Dr. Sapna
Dr. Apoorva
Dr. Darshan

Dr. Aparna
Dr. Reshmi
Dr. Sunathi
Dr. Tushar
Dr. Poojitha
Dr. Sunathi

2/7/21

chandra's

Topic: Alveoplasty

Presented by: Dr. Grayathri

Attended by

Staff

Dr. Kalavathy
Dr. Mitha
Dr. Roshan
Dr. Archana
Dr. Anuradha

Student

Dr. Grayathri
Dr. Karthiban
Dr. Anitha
Dr. Rutuja
Dr. Ranuja

Dr. Deepak
Dr. Balavikram
Dr. Sahana

Dr. Jehan
Dr. Manisha
Dr. Niranjanai
Dr. Shaigya

CLINICAL PROBLEM SOLVING

Study the following case histories and select the best answer to the questions following them.

An 8-year-old girl was taken to a pediatrician because her mother had noticed a small painless swelling below and behind the angle of the jaw on the right side. On examination, the swelling was superficial, cool to touch, and showed no redness. Careful palpation of the neck revealed two firm lumps matted together beneath the anterior border of the right sternocleidomastoid muscle. Examination of the palatine tonsils showed moderate hypertrophy on both sides with a few pustules exuding from the tonsillar crypts on the right side. The patient did not have a pyrexia.

1. The following statements concerning this case are consistent with the patient having chronic cervical lymphadenitis except which?
 - (a) The lymph drains from the tonsil into the superficial cervical lymph nodes, which when enlarged produce a swelling below and behind the angle of the jaw.
 - (b) Tuberculous cervical lymphadenitis is a chronic infection that can enter the tonsil and spread to the lymph nodes.
 - (c) The investing layer of deep cervical fascia can limit the spread of infection in the neck.
 - (d) Tuberculous infection of a lymph node commonly spreads to other nodes in the group and they become matted together.


- (e) Tuberculous infection results in the destruction of the node with the formation of pus that later erodes through the deep fascia, producing a large cold abscess beneath the skin.
- (f) Secondary infection of a cold abscess causes the abscess to break through the skin to form a discharging sinus.

A 25-year-old woman complaining of a swelling on the front of the neck and breathlessness visited her physician. On examination, a small, solitary swelling of firm consistency was found to the left of the midline of the neck below the thyroid cartilage of the larynx. The swelling was not attached to the skin but moved upward on swallowing. About 2 weeks previously the swelling had suddenly increased in size and become tender to touch; following this increase in size the patient became breathless.

2. The following statements concerning this case would suggest a diagnosis of adenoma of the thyroid gland except which?
 - (a) The pretracheal layer of deep cervical fascia binds the thyroid gland to the larynx, which moves upward on swallowing.
 - (b) Each lobe of the thyroid gland is closely related to the sides of the trachea.
 - (c) The isthmus of the thyroid gland was found to cross in front of the third, fourth, and fifth rings of the trachea.

problem based questions

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D.A.P.M.R.V. Pooja
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- (d) The sudden increase in the size of the swelling can be explained by a hemorrhage into the adenoma.
- (e) The swelling was located superficial to the left sternothyroid muscle.
- (f) The breathlessness was caused by the adenoma pressing on the trachea, partially occluding the lumen.

A 70-year-old man complaining of a small painless swelling below his chin visited his physician. On questioning, he said that he had first noticed the swelling 4 months earlier and that it was gradually increasing in size. Because it had not caused any discomfort, he had chosen to ignore it. On examination, a single, small, hard swelling could be palpated in the submental triangle. It was mobile on the deep tissues and not attached to the skin.

3. The following statements suggest that the hard swelling was a secondary malignant deposit in a lymph node except which?
- (a) The submental lymph nodes are located in the submental triangle just below the chin.
 - (b) The submental lymph nodes drain the tip of the tongue, the floor of the mouth in the region of the frenulum of the tongue, the gums and incisor teeth, the middle third of the lower lip, and the skin over the chin.
 - (c) A small, hard-based carcinomatous ulcer was found on the right side of the tongue near the tip.
 - (d) The deep cervical group of lymph nodes beneath the sternocleidomastoid muscle receive lymph from the submental lymph nodes.
 - (e) The submental lymph nodes lie deep to the superficial part of the submandibular salivary gland.

A 45-year-old man with extensive maxillofacial injuries after an automobile accident was brought to the emergency department. Evaluation of the airway revealed partial obstruction. Despite an obvious fractured mandible, an attempt was made to move the tongue forward from the posterior pharyngeal wall by pushing the angles of the mandible forward. This maneuver failed to move the tongue, and it became necessary to hold the tongue forward directly to pull it away from the posterior pharyngeal wall.

4. The most likely reason the physician was unable to pull the tongue forward in this patient is which?
- (a) The hypoglossal nerves were damaged on both sides of the neck.
 - (b) Spasm of the styloglossus muscles
 - (c) The mandibular origin of the genioglossus muscles was floating because of bilateral fractures of the body of the mandible.
 - (d) The presence of a blood clot in the mouth
 - (e) The resistance of the patient

Having passed a laryngoscope into a patient, the anesthetist viewed the following anatomic structures in order from the base of the tongue to the trachea.

5. All the following structures were correctly recognized except which?
- (a) The median glossoepiglottic fold and the valleculae

- (d) The aryepiglottic folds
- (e) The rounded swellings of the cuneiform and corniculate cartilages
- (f) The mobile vestibular folds
- (g) The whitish vocal cords (folds) with the rima glottidis

A 17-year-old boy was seen in the emergency department after receiving a stab wound at the front of the neck. The knife entrance wound was located on the left side of the neck just lateral to the tip of the greater cornu of the hyoid bone. During the physical examination the patient was asked to protrude his tongue, which deviated to the left.

6. The following statements would explain the physical signs in this patient except which?
- (a) The genioglossus muscles are responsible for protruding the tongue.
 - (b) The genioglossus muscle is supplied by the glossopharyngeal nerve.
 - (c) Paralysis of the left genioglossus muscle permitted the right genioglossus to pull the tongue forward and turned the tip to the left side.
 - (d) The hypoglossal nerve descends in the neck between the internal carotid artery and the internal jugular vein.
 - (e) At about the level of the tip of the greater cornu of the hyoid bone the hypoglossal nerve turns forward and crosses the internal and external carotid arteries and the lingual artery to enter the tongue.
 - (f) The point of the knife blade severed the left hypoglossal nerve.

A 43-year-old woman was seen in the emergency department with a large abscess in the middle of the right posterior triangle of the neck. The abscess was red, hot, and fluctuant. The abscess showed evidence that it was pointing and about to rupture. The physician decided to incise the abscess and insert a drain. The patient returned to the department for the dressings to be changed 5 days later. She stated that she felt much better and that her neck was no longer painful. However, there was one thing that she could not understand. She could no longer raise her right hand above her head to brush her hair.

7. The following statements explain the signs and symptoms in this case, suggesting that the spinal part of the accessory nerve had been incised, except which?
- (a) To raise the hand above the head, it is necessary for the trapezius muscle, assisted by the serratus anterior, to contract and rotate the scapula so that the glenoid cavity faces upward.
 - (b) The trapezius muscle is innervated by the spinal part of the accessory nerve.
 - (c) As the spinal part of the accessory nerve crosses the posterior triangle of the neck, it is deeply placed, being covered by the skin, the superficial fascia, the investing layer of deep cervical fascia, and the levator scapulae muscle.
 - (d) The surface marking of the spinal part of the accessory nerve is as follows: Bisect at right angles a line joining the angle of the jaw to the tip of the mastoid

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D. Clinical Problem Solving 845
J.P. Nagar 1
Bangalore 560 075

(e) The knife opening the abscess had cut the accessory nerve.

A 35-year-old woman had a partial thyroidectomy for the treatment of thyrotoxicosis. During the operation a ligature slipped off the right superior thyroid artery. To stop the hemorrhage, the surgeon blindly grabbed for the artery with artery forceps. The operation was completed without further incident. The following morning the patient spoke with a husky voice.

8. The following statements about this patient would explain the husky voice except which?
- (a) Laryngoscopic examination revealed that the right vocal cord was slack, causing the huskiness of the voice.
 - (b) The vocal cord is tensed by the contraction of the cricothyroid muscle.
 - (c) The cricothyroid muscle tilts back the cricoid cartilage and pulls forward the thyroid cartilage.
 - (d) The cricothyroid muscle is innervated by the recurrent laryngeal nerve.
 - (e) The superior thyroid artery is closely related to the external laryngeal nerve.

A 46-year-old man was seen in the emergency department after being knocked down in a street brawl. He had received a blow on the head with an empty bottle. On examination, the patient was conscious and had a large doughlike swelling over the back of the head that was restricted to the area over the occipital bone. The skin was intact, and the swelling fluctuated on palpation.

9. The following statements concerning this patient are correct except which?
- (a) The hematoma, although large, did not extend forward to the orbital margins and did not extend laterally as far as the temporal lines.
 - (b) The hematoma was located just beneath the epicranial aponeurosis and was superficial to the periosteum of the occipital bone.
 - (c) The swelling did not occupy the subcutaneous tissue of the scalp.
 - (d) The hematoma is restricted to one skull bone and is situated beneath the periosteum.
 - (e) The edge of the swelling is limited by the attachment of the periosteum to the sutural ligaments.

A 17-year-old girl visited her dermatologist because of severe acne of the face. On examination, it was found that a small abscess was present on the side of the nose. The patient was given antibiotics and was warned not to press the abscess.

10. The following facts concerning this patient emphasize why it is important to adequately treat this condition except which?
- (a) The skin area between the eye, the upper lip, and the side of the nose is a hazardous area to have an infection of the skin.
 - (b) The danger area is drained by the facial vein.
 - (c) Interference with a boil by squeezing or pricking it can lead to spread of the infection and thrombosis of the facial vein.
 - (d) The facial vein communicates with the cavernous sinus via the superior and inferior ophthalmic veins.

- (e) Cavernous sinus thrombosis can occur by the spread of infection by the venous blood.
- (f) The blood in the facial vein is unable to spread upward because of valves.

A 7-year-old boy with right-sided otitis media was treated with antibiotics. The organisms did not respond to the treatment, and the infection spread to the mastoid antrum and the mastoid air cells. The surgeon decided to perform a radical mastoid operation. After the operation, it was noticed that the boy's face was distorted.

11. The following signs and symptoms suggest that the right facial nerve had been damaged during the operation except which?
- (a) The mouth was drawn upward to the right.
 - (b) He was unable to close his right eye.
 - (c) Saliva tended to accumulate in his right cheek.
 - (d) The saliva tended to dribble from the corner of his mouth.
 - (e) All the muscles of the right side of his face were paralyzed.

A 43-year-old woman visited her physician complaining of severe intermittent pain on the right side of her face. The pain was precipitated by exposing the right side of her face to a draft of cold air. The pain was stabbing in nature and lasted about 12 hours before finally disappearing. When asked to point out on her face the area where the pain was experienced, the patient mapped out the skin area over the right side of the lower jaw extending backward and upward over the side of the head to the vertex.

12. The following signs and symptoms in this patient strongly suggest a diagnosis of trigeminal neuralgia except which?
- (a) The skin area where the patient experienced the pain was innervated by the mandibular division of the trigeminal nerve.
 - (b) The stabbing nature of the pain is characteristic of the disease.
 - (c) The trigger mechanism, stimulation of an area that received its sensory innervation from the trigeminal nerve, is characteristic of trigeminal neuralgia.
 - (d) Examination of the actions of the masseter and the temporalis muscles showed evidence of weakness on the right side.
 - (e) The patient experienced hyperesthesia in the distribution of the right auriculotemporal nerve.

A 10-year-old boy was playing darts with his friends. He bent down to pick up a fallen dart when another dart fell from the dart board and hit him on the side of his face. On examination in the emergency department a small skin wound was found over the right parotid salivary gland. Then 6 months later, the boy's mother noticed that before mealtimes the boy began to sweat profusely on the facial skin close to the healed dart wound.

13. The following statements can explain this phenomenon except which?
- (a) The point of the dart had entered the parotid salivary gland and damaged the parasympathetic secretomotor fibers to the gland.

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of the condition was found to be a rapidly expanding intracranial tumor.

15. The following statements concerning this patient are correct except which?
- An intracranial tumor causes a rise in cerebrospinal fluid pressure.
 - The optic nerves are surrounded by sheaths derived from the pia mater, arachnoid mater, and dura mater.
 - The intracranial subarachnoid space extends forward around the optic nerve for about half its length.
 - The thin walls of the retinal vein will be compressed as the vein crosses the extension of the subarachnoid space around the optic nerve.
 - Because both subarachnoid extensions are continuous with the intracranial subarachnoid space, both eyes will exhibit papilledema and congestion of the retinal veins.

A 52-year-old man was eating his dinner in a seafood restaurant when he suddenly choked on a piece of fish. He gasped that he had a bone stuck in his throat.

16. Assuming that the fish bone was stuck in the piriform fossa, the following statements are correct except which?
- The piriform fossae lie on either side of the entrance into the larynx.
 - The mucous membrane lining the piriform fossae is sensitive and innervated by the recurrent laryngeal nerve.
 - The piriform fossa is bounded laterally by the thyroid cartilage and the thyrohyoid membrane.
 - The piriform fossa is bounded medially by the aryepiglottic fold.
 - The piriform fossa leads inferiorly into the esophagus.

- The secretomotor fibers to the parotid gland arise in the otic ganglion.
- The preganglionic parasympathetic fibers originate in the superior salivatory nucleus of the facial nerve.
- The skin over the parotid salivary gland is innervated by the great auricular nerve, which was also damaged by the dart.
- On regeneration of the damaged nerves some of the parasympathetic nerves to the parotid salivary gland had crossed over and joined the sympathetic secretomotor nerves to the sweat glands in the distal end of the great auricular nerve.
- The patient has Frey's syndrome.

A 26-year-old baseball player was struck on the right side of the head with a ball. The player fell to the ground but did not lose consciousness. After resting for 1 hour and then getting up, he was seen to be confused and irritable. Later, he staggered and fell to the floor. On questioning, he was seen to be drowsy, and twitching of the lower left half of his face and left arm was noted.

14. A diagnosis of extradural hemorrhage was made based on the following statements except which?
- A minor blow on the side of the head can easily fracture the thin anteroinferior part of the parietal bone.
 - The posterior branch of the middle meningeal artery may be sectioned at the site of the fracture.
 - Arterial hemorrhage outside the meningeal layer of the dura mater may occur.
 - A large blood clot outside the dura can exert pressure on the lower end of the precentral gyrus.
 - The lower end of the precentral gyrus or motor area supplies the facial muscles and the muscles of the upper limb.

A 49-year-old woman was found on ophthalmoscopic examination to have edema of both optic discs (bilateral papilledema) and congestion of both retinal veins. The cause

ANSWERS TO CLINICAL PROBLEMS

- The lymph drains from the tonsil into the jugulodigastric member of the deep cervical lymph nodes.
- The thyroid gland lies deep to the sternothyroid muscles.
- The submental lymph nodes are not covered by the superficial parts of the submandibular salivary glands.
- The genioglossus muscles arise from the superior mental spines behind the symphysis menti of the mandible.
- The vestibular folds of the larynx are fixed and reddish and the vocal folds are mobile and whitish.
- The genioglossus muscle is supplied by the hypoglossal nerve.
- The spinal part of the accessory nerve lies superficial to the levator scapulae muscle in the posterior triangle of the neck.
- The cricothyroid muscle is innervated by the external laryngeal nerve, which was damaged in this patient.
- The hematoma was located deep to the periosteum of the occipital bone.
- F. The facial and ophthalmic veins do not possess valves so that infected blood from the face can spread to the cavernous sinus.
- A. The facial muscles on the left side of the mouth on contraction pull the mouth upward and to the left because the muscles on the right side were paralyzed.
- D. The motor portion of the trigeminal nerve is unaffected in patients with trigeminal neuralgia.
- C. The secretomotor fibers to the parotid salivary gland originate in the inferior salivatory nucleus of the glossopharyngeal nerve.
- B. The anterior branch of the middle meningeal artery may be sectioned at the site of the fracture.
- C. The intracranial subarachnoid space extends forward around the optic nerve as far as the back of the eyeball.
- B. The mucous membrane lining the piriform fossa is innervated by the internal laryngeal branch of the superior laryngeal nerve from the vagus.

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Interdepartmental Activity – 1

Introduction to the terms in Anatomy, Physiology and Biochemistry

Date: 18.01.2021, 12pm-1pm

Department of Human Anatomy

Questions

Prof. J. S. Rao
18/01/21

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Jayanagar, Bangalore

1. Who is the Father of Medicine?
2. Who is the Father of Anatomy ?
3. What is the meaning of term anatomy?
4. Name the different organ systems of human body?
5. Define Anatomical position of Human body?
6. What is Supine Position?
7. Lying down position with the face directed down is called as?
8. What is Lithotomy position?
9. What is Median or Midsagittal plane
10. Name the sectional plane that divides the body into anterior and posterior portions?

11. What is transverse plane?

12. Describe following terms
 - a) Superior
 - b) Inferior
 - c) Anterior/ventral
 - d) Posterior/Dorsal
 - e) Medial
 - f) Lateral
 - g) Proximal
 - h) Distal
 - i) Superficial
 - j) Deep

13. Describe following terms which are used for describing movements?

17/2/21 Interdepartmental Activity

- Instructions for conducting quiz.
- Batches for quiz. - 1, 2, 3, 4.
(practical batches).
- Each batch has to frame 5 objective question from each subject.
- Both class representatives will be moderators for the quiz.
- All questions should be given to moderators.
- 15 mins Time is for framing of the questions.
- Rest 45 mins will be for quiz.
- Moderators will shuffle questions and conduct quiz online.
- All questions should be shared with all departments on whatsapp, post quiz.
- Winners will be moderators for next quiz.

For Hod

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18/02/21

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18/2/21