

Study Guide OF ORAL MEDICINE

For BDS 3RD YEAR



MESSAGE FROM THE PRINCIPAL

AVICENNA DENTAL COLLEGE



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{MDS, Dip Op (Hons) BDS}

It is a matter of immense honour and privilege as the first Principal of Avicenna Dental College to welcome you to prospectively one of the finest dental institutes in the private sector of Pakistan. Avicenna Dental College is a private dental college, which aims to provide the finest dental education to dental undergraduate student in accordance with the latest trends in Medical Education, and to develop them to practice dentistry in the 21stcentury.

While educating dental students to become licensed, empathetic and competent professionals, Avicenna Dental College endeavours to educate students in a supportive environment in which they provide dental care for a diverse populace. In the times to come, we wish to transform our graduates into unfeigned teachers, researchers and consultants by starting post-graduation programs as well.

Avicenna Dental College aims to achieve an enterprising curriculum integrating the basic sciences with clinical experience while utilizing modern technological modalities.

In addition to the production of outstanding oral health professionals, we at Avicenna Dental College recognize our responsibility as a private dental institution to the citizens of the country in making the provision of oral the provision of oral health care available to those who are deprived of ready access.

I feel proud to lead this dental establishment such an inspiring time and hope all of you at Avicenna Dental College will share this pride and play your respective roles in materializing the dream of making this institution the premier dental educator in Pakistan.

AVICENNA DENTAL COLLEGE

MESSAGE FROM HOD – ORAL MEDICINE

Oral Medicine has generally been defined as that discipline within dentistry which deals with the diagnosis and essentially non-surgical treatment of the diseases of oral cavity and the oral manifestations of systemic diseases. Oral radiology uses ionizing radiation in diagnosis and therapy. The subject of Oral Medicine & Radiology is taught during the 3rd year of BDS.

Our aim is to acquaint the students with the subject and teach how to, as future clinicians, independently make a case report, integration of the oral and systemic signs and symptoms, making a diagnosis using various investigative procedures including radiotherapy and planning the individualized treatment for the patient.

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PURPOSE OF STUDY GUIDE?

ESSENCE OF A STUDY GUIDE:

It is an aid to:

- Inform students how student learning program has been organized according to their learning objectives.
- Help students organize and manage their studies throughout the course.
- Guide students on assessment methods, rules and regulations

PURPOSE OF A STUDY GUIDE:

- Communicates information on organization and management of the course. This will help the student to contact the right person in case of any difficulty.
- Defines the objectives which are expected to be achieved at the end of the course.
- Identifies the learning strategies such as lectures, small group teachings, clinical skills, demonstration, tutorial and case-based learning that will be implemented to achieve the course objectives.
- Provides a list of learning resources such as books, computer assisted learning programs, weblinks, journals, for students to consult in order to maximize their learning.
- Includes information on the assessment methods that will be held to determine every student's
- Focuses on information pertaining to examination policy, rules and regulations.

GENERAL COURSE INFORMATION

A. COURSE APPROVAL

This course has been reviewed, revised and approved by

- Pakistan Medical and Dental Council
- University of Health Sciences
- College Curriculum Committee

Course Title	ORAL MEDICINE		
Course Components	Theory	Practical	
	Marks: 50	Marks:50	
PRE-REQUISTES	General	Human Physiology	General Pathology
	Anatomy		
REQUISTES	Oral Medicine	·	<u>.</u>
YEAR	3 RD Year BDS		

B. COURSE DESCRIPTION

The oral medicine course constitutes of two main components: theoretical and clinical parts. The theoretical part is delivered to students through oral medicine interactive lectures that will provide insight into most primary and secondary lesions affecting oral and para-oral structures of hard and soft tissues. The clinical part includes cases representative of the primary and secondary oral lesions, covered in oral medicine lectures. They will be evaluated and discussed with the students in small group discussion forms, to refine the students' clinical abilities, and emphasize that treatment of oral medicine cases is multidisciplinary.

Students are assigned to individual clinical cases, and are required to follow up the patients' management, and to present their cases in the form of oral presentations. It is a requirement of the course that every student presents a complete case (initial and final presentations).

Clinical cases include:

- 1. Red and white lesions
- 2. Single and multiple ulcerations
- 3. Central and peripheral exophytic lesions
- 4. Pigmented lesions
- 5. Acute and chronic infections
- 6. Systemic diseases with oral manifestations (e.g. diabetes, dermatological diseases...etc).
- 7. Lymph-node and salivary gland swellings
- 8. Orofacial pain and TMJ disorders.
- 9. Neoplasms (benign and malignant)

Students are assigned to individual cases, are required to follow up the patients' management (supervised by a faculty member), and to initially present their cases in the form of oral presentations as minimum procedural experience. Subsequently, completed cases will be presented to the class in conjunction with other diagnostic department's staff. Case presentations should be supplemented with initial and follow- up clinical photographs and radiographs, as well as with histopathological, laboratory investigation and consultation reports. In addition, the students should give a short presentation of recent advances and/or researches related to their cases.

C. COURSE OBJECTIVES

By the end of this course, students will be able to:

1. Classify, identify the etiology, and describe the clinical pictures of the most common oral lesions.

2. Clarify the diagnostic basis for diseases and conditions in the oral and para-oral structures .

3. Explain the risk factors, prevention and control of common oral and systemic diseases.

4. Execute a systematic clinical extra and intra-oral examination.

5. Perform full documentation of cases by taking extra-oral and full mouth intraoral photographs, and recording all patient data.

6. Differentiate clinically between normal oral variants and pathologic oral lesions, and distinguish suspicious or difficult lesions to be referred for consultation.

7. Develop differential diagnosis of the most common oral lesions, select appropriate diagnostic aids and interpret their results to reach diagnosis of oral lesions .

8. Diagnose and manage the most common oral lesions, formulate appropriate prescriptions for oral medicine cases, recognize the role of the general dental practitioner in early diagnosis of oral lesions, and apply referral or consultation for advanced cases and cases that need different treatment considerations.

9. Outline dental management of some selected systemic disorders by installing precautions and modifications of conventional dental treatment, and describe how to prevent and manage some medical emergencies in the dental clinic.

10. Review mechanisms of action of the most commonly used drugs in dental practice to prescribe proper medication as part of patient management.

11. Show efficient and professional communication with patients, colleagues, instructors, clinical and laboratory staff.

12. Illustrate the importance of lifelong learning and show a strong commitment to it

D. Oral Medicine Skill Development Program (OMSDP)

It is the training and development provided for oral medicine students throughout the fifth year within the Oral Medicine (OM) clinical sessions.

OMSDP supports the division to achieve its aims in the teaching process and represents an essential part of the training in oral medicine. The OMSDP is introduced to help develop and expand students' clinical and skills in specific areas through a set of sessions as part of their undergraduate education. The training will be provided primarily by the OM staff; however some skills will be provided or supervised by experts from other departments.

The class will be subdivided into small groups. There will be a timetable for these groups, so that each student attends a specific skill every week throughout the academic year.

A. The teaching of Oral Medicine skills is achieved by various methods:

- Verbal instructions
- Demonstration
- Small group teaching (problem solving sessions)
- Video presentations
- Active learning and presentations
- Team work and projects (web-based assignments)

B. Skills covered in Oral medicine clinical sessions include:

- Reviewing thorough intra and extra-oral examination (mainly cranial nerve examination and oral lesions description)
- Properly describing oral and para-oral lesions
- Writing referral letters and formulating prescription
- Developing critical thinking in case based learning and problem solving sessions
- Selecting appropriate laboratory investigations for the most common oral lesions and systemic diseases encountered in dental clinic
- Screening of oral cancer
- Introduction to auditing
- Applying presentation skills and scientific net searching in active learning sessions where web based assignments were presented.

C. Description of skills covered in OMSDP:

1- Description of oral lesions

A standardized technique to describe oral lesions is introduced to students in a small group teaching session. It is followed by thinking based learning where students are given clinical examples of oral lesions, and asked to apply the lesion description system to their clinical cases.

2- Writing a referral letter

In this small group teaching session, students will be divided into smaller groups, given 2-3 clinical scenarios and asked as a group (team work) to write a referral/consultation letter to different medical and dental specialists. The proper letters will be presented and each students' group will evaluate others' work based on different items presented by the supervisor (peer-assessment). The aims of this session is to practice the writing up of actual referral/consultations letters.

3-Problem solving sessions

In these problem-based learning sessions, different clinical scenarios are presented to students who are divided into small groups. These scenarios cover almost all topics dealt with in lectures, and cases are discussed with students. These sessions compensate for the limitation of clinical cases , and allow students be exposed and be familiar with most primary and secondary lesions affecting oral and para-oral structures of hard and soft tissues. Students, by practicing problem solving throughout their practical sessions as part of OMSDP, are prepared for their final (OSPE) which is a written competency examination at the end of the course composed of clinically based questions.

4-Laboratory investigations

This topic is covered in two small group teaching sessions: one covering oral biopsy, immunofluorescence techniques, and investigations carried for HIV, HBV and HCV; while the other session is dealing with routine hematologic screening (blood analysis), as well as investigations requested for the most common systemic diseases encountered in dental clinics: diabetes mellitus and hypertension. Students will be more familiar with oral biopsy techniques, indications, and limitations. Clinical examples are given to enhance the information. Different immunofluorescence techniques are also explained along with clinical

indications and examples. Basic HIV and Hepatitis B investigations are also included .General hematologic laboratory investigations are explained in details, including normal and abnormal variations as well as clinical examples. Moreover, diabetes and hypertension investigations are discussed with students thoroughly.

5-Screening of oral cancer

Given the significant morbidity and mortality associated with advanced oral cancer and its treatment, the need to provide clinicians with accurate diagnostic techniques that will increase the screening and detection of early stage oral cancer has been found to be very important. Screening of oral cancer was discussed in a tutorial. It includes recognition of signs symptoms, and clinical presentation of oral cancer, comprehensive oral examination of every patient for the early detection of oral cancer or premalignant lesions. The standard-of-care examination includes a thorough examination of every intraoral mucosal surface and the extraoral head and neck tissues, including the lymph nodes, TMJ, muscles of mastication

and parotid gland. Conventional screening for oral cancer involves visual inspection and digital palpation of oral lesions. In addition, radiographic evaluation and aids to oral examination are discussed including vital tissue staining using toluidine blue, computer-assisted cytology or oral brush biopsy specimens, purpose of this course is for the students to understand and know how to

apply and identify oral and maxillo-facial diseases and how these diseases to be studied. The pattern of study should be as follow:

- Definition of the diseases
- Pathogenesis/etiology of the diseases
- Clinical Characteristics of the diseases:
 - o Prevalence
 - o Age
 - Gender
 - o Site
 - o Color
 - o Texture
 - Chief Complaints
- Radiographic Features:
 - o Radiolucent/Radio-opaque/Mixed
 - Borders of lesion
 - Effect on surrounding structure
 - \circ Root resorption
 - \circ Root divergence
 - Characteristic radiographic appearance.
- Histopathological Features:
 - \circ Capsule
 - o Patterns
 - o Epithelium lining
 - Connective tissue
 - Characteristic Features of the lesion
- Diagnostic aids used in diagnosis.
- Differential diagnosis
- Prognosis of the lesion
- Treatment of the lesion

E. UHS COURSE CONTENTS

F. TABLE OF SPECIFICATION

According to the syllabi & TOS of UHS, LHR are as follows:

Sr. No	Topics	No. of MCQ	% (x)	No. of SEQs	% (y)	Combi ned % (x + y)
1.	Investigations	1	4.7%	00	0%	4.7%
2.	Immunity	1	4.7%	00	0%	4.7 %
3.	Oral cancer and precancer	2	9.5%	1	4.1%	13.6 %
4.	Oral pigmentation	1	4.7%		0%	4.7%
5.	Oral ulceration		0%	1	4.1%	4.1 %
6.	Vesicullo-bullous diseases	2	9.5%	1	4.1%	13.6%
7.	Salivary Gland Diseases	2	9.5%	0	0%	9.5 %
8.	Infections	3	14.2%	1	4.1%	18.3%
9.	Tempro-mandibular Joint Diseases	1	4.7%		0%	4.7%
10.	Orofacial Pain	3	14.2%	1	4.1%	18.3%
11.	Oral Manifestations & Systemic Diseases	2	9.5%	1	4.1%	13,6%
12.	Medical Emergencies	3	14.2%	1	4.1%	18.3%
13	Total	45	100%	15	100 % арр	100 % арр.

G. CURRICULUM OUTLINE WITH LEARNING OUTCOME

Oral Ulcerations	a) Traumatic Ulcers
	b) Recurrent Aphthous Stomatitis
	c)Behcet's Disease
Diseases Of lips and tongue	a)Diseases of the lips
	b) Diseases of the tongue
	c) Disturbances of taste and halitosis
Swellings of face and neck	a) Facial swellings
	b) Swellings in the neck
	c) Cervical Lymphadenopathy
Salivary Glands and Saliva	a) Saliva and Salivary Glands
	b) Assessment of the Salivary Glands
	c) Diseases of the Salivary Glands
	d) Disturbances of Salivary Flow
Inflammatory Overgrowths,	a) Inflammatory Overgrowth
Pigmentation	b) Developmental Leisons
	c) Benign Neoplasms
	d) Miscellaneous Benign Conditions
	e) Pigmentation of the Oral Mucosa
Precancerous Lesions and Conditions, Carcinoma And	a) Precancerous Lesions
Carcinogenesis	B) Precancerous Conditions
	c) Oral Carcinoma and Carcinogenesis

Muss sutersous diseases	Mucocutaneous Disease	
And Connective Tissue Disorders	Lichen Planus and Lichenoid Reactions	
	Immunobullous Disease	
	Epidermolysis Bullosa	
	Erythema Multiform	
	Idiopathic Oral Blood Blisters	
	Connective Tissue Diseases	
Gastrointestinal Diseases	A) Celiac Disease	
	B) Inflammatory Bowel Disease	
	C) Gastro-Oesophageal Reflux Disorder	
Blood and Nutrition,	a) Disorders of the Blood	
Disturbances And	b) Disorders of Nutrition	
Renal Diseases	c) Endocrine Disturbances	
	d) Renal Disease	
Immunodeficiency, Hypersonsitivity And Autoimmuno Discossos	a)Immunodeficiency	
Typersensitivity And Autominune Diseases	b) Hypersensitivity	
	c) Angioedema	
	d) C1 Esterase Inhibitor Deficiency	
	e)Autoimmunity	
	f) Oral reactions to Drug Therapy	
Facial Pain And	a) Facial Pain Overview	
Neurological Disturbances	b) Neuropathic Pain	
	c) Migraine	
	d) Cluster Headache	
	f) Tension type Headache	
	g) Miscellaneous Pain Conditions	
	h) Neurological Disturbances	

Temporomandibular Joint Disorders	a) Investigation of the stomatognathic system
	b) Temporomandibular Pain Dysfunction Syndrome
	c) Internal Derangement
	d) Internal Derangement
	e) Rheumatoid Arthritis
	f) Osteoarthrosis
	g) Masseteric Hypertrophy
	h) Tumors
Psychogenic Orofacial Problems	a) Chronic Orofacial Pain
	b) Disturbances in taste and salivation
	c) Delusional Symptoms
	d)Dysmorphophobia
	e) Self Injurious behaviour
	f) Eating Disorders
	g) Drugs and Alcohol
Disorders Of The Teeth and Bome	a) Disorders of the teeth
	b) Disorders of bone
Medical Emergencies	a) Prevention of Medical Emergencies
	b) Administration of Drugs
	c) Emergency Drugs and Equipment
	d) Management of Emergencies
	a) Normal Functions
1 IVIJ	b) TMJ Disorders

FACILITIES FOR STUDNETS

A. MENTORSHIP PROGRAM

In Additional to the lectures in the college hours the student is expected to put in 5 hours of private study/learning hours per week. (This is an average for the course).

The students are encouraged to interact with the tutors of the course for any additional help required during the course. The staff members are instructed to inform the students regarding the office hours when they can approach the faculty for their help.

After each class the faculty member allocates a few minutes to clear the doubts of the students if needed.

Group of ten students are allotted to head of department, who is their mentor, the students can even approach their respective mentors if they have any additional problems with the subject.

B. TEACHING TOOLS

- Power point presentations
- Quizzes
- Tell and show
- Poster competition
- Discussion on last year UQS
- Discussion of important questions during class would also aid in developing cognitive skills.
- Design assignments in such a way that the students would have to correlate the various topics and information given to them.
- The students will be asked oral questions after every session, group discussions, group tasks will be designed so that the students learn to interact with their batch mates.
- In addition, project work i.e. review article will be assigned to small groups so that they learn to take up the responsibility and complete it.
- Summer Vacations Homework.
- Clinical Demonstrations, assistance and supervised performance of tasks.

C. Learning Resources & References:

1. Essential References

- Greenberg MS, Glick M, Ship JA (eds): Burket's Oral Medicine, 11th ed. Hamilton, Ontario: BC Decker Inc. 2008.
- · Silverman S, Eversole LR, Truelove EL Essentials of oral medicine, 2002 BC Decker Inc
- Laskaris G. (2006). Pocket Atlas of Oral Diseases, 2nd edition. Stuttgart, New York: Thieme.
- Wood NK, Goaz PW. (1997) Differential Diagnosis of Oral and Maxillofacial Lesions. 5th Edition. Mosby

2. Recommended Books and Reference Material

- Regezi JA, SciubbaJJ, Jordan RCK. (2008) Regezi: Oral Pathology: Clinical Pathologic Correlations, 5th ed. St. Louis, Missouri: Saunders.
- Cawson RA, Odell EW, Pporter S (2002). Cawson's Essentials of Oral Pathology and Oral Medicine, 7th edition. Edinburgh, London, Churchill Livingstone
- Principles and Practice of Oral Medicine; (1995). Sonis et al- 2nd edition; Saunders Co.
- Lecture outline

3. Electronic Material (URL), Websites etc

- http://www.ncbi.nlm.nih.gov/pubmed/
- www.aaom.com
- http://www.nlm.nih.gov/medlineplus/
- www.Youtube.com (Videos for cranial nerve examination)

4. Other Learning Material

• College oral medicine Library and Handouts

D. STUDY SKILLS

1. TAKING NOTES IN CLASSROOM LECTURES:

- You can develop your own note taking system and study strategy with the five "R's" of notetaking: **Record * Reduce * Recite * Reflect * Review**
- Get a good loose-leaf notebook: This will enable you to add, delete, and re-sequence pages and materials. Begin each session's notes with a cover page for later summaries and test preparation.

 Heading: Date: Subject: 	 Lecture taught Teacher name Fellow student contribution
2. Reduce:	Record/take notes in class here:
 After the class Summarize: Key/cue words Questions Link to information from your textbook, Websites or other sources that helps you understand or study the material 	 Identify the main points Capture the main ideas Use outlines or concept maps Use words and pictures and graphs or whatever it takes to get the information down quickly. Avoid quoting unless it is very necessary.

A TYPICAL NOTES PAGE:

2. MAKE COMPARISON CHARTS/DIFFERENCES

A comparison chart allows you to organize information visually so that you can see relationships among categories or characteristics. It is a very effective format when you need to be able to understand the differences or similarities among facts, theories, theorists, processes, etc.

LESIONS YOU ARE COMPARING	CHA	ARACTI	ERISTIC	S YOUR ARE (COMPARING
	AGE	GENDER	SITE	RADIOGRAPHIC	HISTOPATHOLOGICAL
				FEATURES	FEATURES
CANDIDIOSIS					
LICHEN PLANUS					

3. DRAW FLOW CHARTS & DIAGRAMS

Diagrams & Flow chart allow you to visually represent dynamic information such as a process, procedure, stages, and steps. For example, in a oral pathology class, you could create a diagram to describe how HIV virus enter in the host cell.

4. CONCEPT CARD

Concept cards are flash cards you create them using index cards that are 3x5 or larger. On the <u>FRONT OF THE CARD</u>, you write the:

- \star Key idea or concept you want to learn
- ★ Organizing term or phrase (upper right-hand corner). This is the category or term that allows you to see how your key ideas or concepts are organized.
- \star Source of the information (textbook page, date of lecture, etc.).

4. On the <u>BACK OF THE CARD</u>, you write what is most important to know and learn about the concept, in your own words.

- ★ To ensure you do more than just memorize the information, include examples, summaries, and synthesis of main points as well as definitions.
- ★ Include diagrams, time lines, or other visuals that will help you understand the information at the level your professor expects.

5. MAKING YOUR DAILY SCHEDULE

- * Review how you spend your time in order to help you prioritize your goals and objectives.
- ★ Determine how you spend a "typical" 24-hour day: Enter the hours or parts of hours for each activity, the total is 24 hours! Don't be discouraged if you have to go back and change time spent on each activity.

Classes:	Studying:	Family commitments:
Sleeping:	Personal care/ grooming:	Meal preparation/ eating/clean-up:
Exercise/sports:	Socializing/entertainment (with friends):	Relaxing/TV/ video games, etc. (alone):
Transportation (College, work, etc):	Work/internship:	Other:

STUDNET INTERNAL EVALUATION GUIDELINES

A. POLICY OF INTERNAL EVALUATION

- Continuous internal assessment consists of appropriate evaluation at the end of each assignment, term, major/monthly test or course of the curriculum. Proper records of internal evaluations should be maintained and the scores obtained in these tests should contribute 10% to the final total score of the candidates.; that 10% may include class tests, monthly test, sand-up, assignment, reviews which all have specific marks allocation.
- 2) Final university examination of each subject should contribute 90% to the total score, and the students should secure passing marks on the aggregate of the total marks.

- 3) 10% marks of internal evaluation will be added in theory of semester exam. Students should know what is expected of them. They should be able to identify the characteristics of a satisfactory answer and understand the relative importance of those characteristics. This can be achieved in many ways; you can provide feedback on assignments, describe your expectations in class, or post model solutions.
- 4) No grace marks should be allowed in any examination.
- 5) Written examinations consist of MCQ's, short structured essays, (according to curriculum) questions.
- 6) During the course, students will be assessed to determine achievement of course objectives. The test will be scheduled on completion of each chapter. The method of examination comprises of theory exam which includes SEQS, MCQS, practical (Objective Structured Practical Examination) and viva voce.

B. STUDENT EVALUATION CRITERIA

SEMESTER	INTERNAL EVALUATION	TOTAL
EXAMINATION MARKS	(Class tests + Journals + Assignments + Modular	THEORY
	Exam	
90%	10%	100%

INTERNAL ASSESSMENT

The internal assessment will be based on the overall performance in the following:

- lectures and Clinic attendance assessments
- Test records
- Sendup results
- If the student score 80% in overall internal assessment the he/she will be giving complete 10% of internal assessment.
- Maintaining a record of all tests and attendance of each student in the form of specially designed personal proforma.

C. INTERNAL ASSESSMENT OF 3RD YEAR

The internal assessment of 3rd year consist of the following pattern:

SR.NO	MARKS DISTRIBUTION
CLASS TEST	0.25
MAJOR TEST	1
OSPE	0.5
VIVAS	1
REVIEW	2
ASSIGNMENTS	0.5
TERMS	2
SANDUP	3

D. ATTENDANCE POLICY

- The Maximum absence of a medical excuse acceptable is not more than 25%. If any student of ADC crosses the limit of absenteeism, he/she will not be allowed to enter in the Examination.
- After 3 months of the beginning of every session announcement of the percentages of students who exceeded their absence will be posted in the college.
- Students who are not allowed to take the examination, will not receive any warning letters,
 instead an announcement will be posted in the academic affairs in the college.
- If there is an absence due to a medical condition, students should provide a medical progress reports to the department of Academic Affairs in a period of not more than five days from the date of the condition. A medical report has to be submitted by the student or their parents within the time frame mentioned. In case of any delay in the submission of medical report, college is not responsible for any excuse after this period.
- If the student's absence from the lecture, practical midterm or test examination, crash courses and sand-up examination, a medical excuse is accepted only by the principal of Avicenna Dental College.
- At the end of session, a final announcement of the students who have short attendance above
 25% have no right to enter in the final examination.

E. ACADEMIC COUNSELLING

- Student who finds difficulty in understanding the subject can report to the concerned teacher for clarifications during above mentioned office hours.
- If the difficulty persists even after consultation with the teacher then report to Head of Department during office hours with a written note.
- If difficulty is not sorted out at the HOD level then student can report to the academic guide appointed for the specified year.

F. ETHICAL & PROFESSIONAL BEHAVIOUR

- Students are expected to behave in an ethical and professional manner during the lectures and laboratories as part of their development towards competent dental professional.
- During classes students should respectfully hear and shouldn't disturb or interrupt the teacher and students raising the doubts.
- Students are expected to not create noise during lectures, practical's and tutorials.
- Students are expected to maintain security of questions in written exams and quizzes and shouldn't give or receive unauthorized aid in examinations.
- During practical/laboratory sessions students should accept criticism in a professional manner and be respectful of the needs and time of others.
- Self assessment should be done accurately and admit to learn through weakness and strive to improve.