

BRANCH IV - CONSERVATIVE DENTISTRY AND ENDODONTICS

OBJECTIVES:

The following objectives are laid out to achieve the goals of the course. These are to be achieved by the time the candidate completes the course. These objectives may be considered under the following subtitles.

Knowledge:

At the end of 36 months of training, the candidates should be able to:

- Describe etiology, pathophysiology, periapical diagnosis and management of common restorative situations, endodontic situations that will include contemporary management of dental caries, management of trauma and pulpal pathosis including periodontal situations.
- Demonstrate understanding of basic sciences as relevant to conservative / restorative dentistry and Endodontics.
- Identify social, economic, environmental and emotional determinants in a given case or community and take them into account for planning and execution at individual and community level.
- Ability to master differential diagnosis and recognize conditions that may require multi disciplinary approach or a clinical situation outside the realm of the specialty, which he or she should be able to recognize and refer to appropriate specialist.
- Update himself by self-study and by attending basic and advanced courses, conferences, seminars, and workshops in the specialty of Conservative Dentistry-Endodontics-Dental Materials and Restorative Dentistry.
- Ability to teach/guide, colleagues and other students.

Use information technology tools and carry out research both basic and clinical with the aim of his publishing his work and presenting the same at scientific platform.

Skills:

- Take proper chair side history, examine the patient and perform medical and dental diagnostic procedures as well as perform relevant tests and interpret to them to come to a reasonable diagnosis about the dental condition in general and Conservative Dentistry – Endodontics in particular. And undertake complete patient monitoring including preoperative as well as post operative care of the patient.
- Perform all levels of restorative work, surgical and non-surgical Endodontics as well as endodontic-periodontal surgical procedures as part of multidisciplinary approach to clinical condition.
- Provide basic life saving support in emergency situations.
- Manage acute pulpal and pulpo periodontal situations.
- Have a thorough knowledge of infection control measures in the dental clinical environment and laboratories.
- Should have proper knowledge of sterilization procedures

Human Values, Ethical Practice and Communication Abilities

- Adopt ethical principles in all aspects of restorative and contemporary Endodontics including non-surgical and surgical Endodontics.
- Professional honesty and integrity should be the top priority.
- Dental care has to be provided regardless of social status, caste, creed or religion of the patient.
- Develop communication skills in particular to explain various options available for management and to obtain a true informed consent from the patient.
- Apply high moral and ethical standards while carrying on human or animal research.

- He/She shall not carry out any heroic procedures and must know his limitations in performing all aspects of restorative dentistry including Endodontics. Ask for help from colleagues or seniors when required without hesitation.
- Respect patient's rights and privileges including patients right to information.

COURSE CONTENTS:

PART-I:

Applied Basic Sciences:

Applied Anatomy of Head and Neck:

- Development of face, paranasal sinuses and the associated structures and their anomalies, cranial and facial bones, TMJ anatomy and function, arterial and venous drainage of head and neck, muscles of face and neck including muscles of mastication and deglutition, brief consideration of structures and function of brain. Brief consideration of all cranial nerves and autonomic nervous system of head and neck. Salivary glands, Functional anatomy of mastication, deglutition and speech. Detailed anatomy of deciduous and permanent teeth, general consideration in physiology of permanent dentition, form, function, alignment, contact, occlusion.
- Internal anatomy of permanent teeth and its significance.
- Applied histology – histology of skin, oral mucosa, connective tissue, bone, cartilage, blood vessels, lymphatics, nerves, muscles, tongue.

Anatomy and Development of Teeth:

- Enamel – development and composition, physical characteristics, chemical properties, structure.
- Age changes – clinical structure.
- Dentin – development, physical and chemical properties, structure type of dentin, innervations, age and functional changes and clinical considerations.
- Pulp – development, histological structures, innervations, functions, regressive changes, clinical considerations.
- Dentin and pulp complex.
- Cementum – composition, cementogenesis, structure, function, clinical considerations.
- Knowledge of internal anatomy of permanent teeth, anatomy of root apex and its implications in endodontic treatment.
- Periodontal ligament – development, structure, function and clinical considerations.
- Salivary glands – structure, function, clinical considerations.
- Eruption of teeth

Applied Physiology:

- Mastication, deglutition, digestion and assimilation, fluid and electrolyte balance.
- Blood composition, volume, function, blood groups, haemostasis, coagulation, blood transfusion, circulation, heart, pulse, blood pressure, shock, respiration-control, anoxia, hypoxia, asphyxia, artificial respiration, and endocrinology – general principles of endocrine activity and disorders relating to pituitary, thyroid, parathyroid, adrenals including pregnancy and lactation.
- Physiology of saliva – composition, function, clinical significance.
- Clinical significance of vitamins, diet and nutrition – balanced diet.
- Physiology of pain, sympathetic and Para sympathetic nervous system, pain pathways, physiology of pulpal pain, Odontogenic and non Odontogenic pain, pain disorders – typical and atypical.
- Biochemistry such as osmotic pressure, electrolytic dissociation, oxidation, reduction etc. Carbohydrates, proteins, lipids and their metabolism, nucleoproteins, nucleic acid and

their metabolism. Enzymes, vitamins and minerals, metabolism of inorganic elements, detoxification in the body, anti metabolites, chemistry of blood lymph and urine.

Pathology:

- Inflammation, repair, degeneration, necrosis and gangrene.
- Circulatory disturbances – ischemia, hyperemia, edema, thrombosis, embolism, infarction, allergy and hypersensitivity reaction.
- Neoplasms – classifications of tumors, characteristics of benign and malignant tumors, spread of tumors.
- Blood dyscrasias.
- Developmental disturbances of oral and Para oral structures, dental caries, regressive changes of teeth, pulp, periapical pathology, pulp reaction to dental caries and dental procedures.
- Bacterial, viral, mycotic infections of the oral cavity.

Microbiology:

- Pathways of pulpal infection, oral flora and micro organisms associated with endodontic diseases, pathogenesis, host defense, bacterial virulence factors, healing, theory of focal infections, microbes relevance to dentistry – strepto, staphylococci, lactobacilli, cornybacterium, actinomycetes, clostridium, neisseria, vibrio, bacteriods, fusobacteria, spirochetes, mycobacterium, virus and fungi.
- Cross infection, infection control, infection control procedure, sterilization and disinfection.
- Immunology – antigen antibody reaction, allergy, hypersensitivity and anaphylaxis, auto immunity, grafts, viral hepatitis, HIV infections and aids. Identification and isolation of microorganisms from infected root canals. Culture medium and culturing technique (Aerobic and anaerobic interpretation and antibiotic sensitivity test).

Pharmacology:

- Dosage and route of administration of drugs, actions and fate of drug in body, drug addiction, tolerance of hypersensitivity reactions.
- Local anesthesia – agents and chemistry, pharmacological actions, fate and metabolism of anaesthetic, ideal properties, techniques and complications.
- General anesthesia – pre medications, neuro muscular blocking agents, induction agents, inhalation anesthesia, and agents used, assessment of anesthetic problems in medically compromised patients.
- Anaesthetic emergencies
- Antihistamines, corticosteroids, chemotherapeutic and antibiotics, drug resistance, haemostasis, and haemostatic agents, anticoagulants, sympathomimetic drugs, vitamins and minerals (A, B, C, D, E, K IRON), anti sialogogue, immunosuppressants, drug interactions, antiseptics, disinfectants, anti viral agents, drugs acting on CNS.

Biostatistics:

- Introduction, Basic concepts, Sampling, Health information systems – collection, compilation, presentation of data. Elementary statistical methods – presentation of statistical data, Statistical averages – measures of central tendency, measures of dispersion, Normal distribution. Tests of significance – parametric and non – parametric tests (Fisher extract test, Sign test, Median test, Mann Whitney test, Kruskal Wallis one way analysis, Friedmann two way analysis, ANOVA, Regression analysis), Correlation and regression, Use of computers.

Research Methodology:

- Essential features of a protocol for research in humans
- Experimental and non-experimental study designs

- Ethical considerations of research

Applied Dental Materials:

- Physical and mechanical properties of dental materials, biocompatibility.
- Impression materials, detailed study of various restorative materials, restorative resin and recent advances in composite resins, bonding- recent developments, tarnish and corrosion, dental amalgam, direct filling gold, casting alloys, inlay wax, die materials, investments, casting procedures, defects, dental cements for restoration and pulp protection (luting, liners, bases) cavity varnishes.
- Dental ceramics-recent advances, finishing and polishing materials.
- Dental burs – design and mechanics of cutting – other modalities of tooth preparation. Methods of testing biocompatibility of materials used.

Training in Research Methodology, Biostatistics, Ethics / Bioethics, in Dentistry, Jurisprudence and Audits:

- Respect human life and the dignity of human individual
- Refrain from supporting or committing crimes against humanity and condemn all such acts
- Treat the sick and injured with competence and compassion
- Protect the privacy and confidentiality of those whom we care.
- Work freely with colleagues
- Educate the public
- Teach and mentor those who follow us

All MDS candidates shall compulsorily attend the Research Methodology Workshop conducted by the University within 6 months from the date of joining the course. In this regard, the candidates will be issued a completion Certificate by the University.

PART-II:

Paper-I: Conservative Dentistry

1. Examination, diagnosis and treatment plan
2. Occlusion as related to conservative dentistry, contact, contour, its significance. Separation of teeth, matrices, used in conservative dentistry.
3. Dental caries- epidemiology, recent concept of etiological factors, pathophysiology, histopathology, diagnosis, caries activity tests, prevention of dental caries and management – recent methods.
4. Hand and rotary cutting instruments, development of rotary equipment, speed ranges, hazards.
5. Dental burs and other modalities of tooth reparation- recent developments (air abrasions, lasers etc.)
6. Infection control procedures in conservative dentistry, isolation equipments etc.
7. Direct concepts in tooth preparation for amalgam, composite, GIC and restorative techniques, failures and management.
8. Biologic response of pulp to various restorative materials and operative procedures.
9. Direct and indirect composite restorations.
10. Indirect tooth colored restorations- ceramic, inlays and onlays, veneers, crowns, recent advances in fabrication and gingival tissue management.
11. Impression procedures used for indirect restorations.
12. Cast metal restorations, indications, contraindications, tooth preparation for class II inlay, onlay, full crown restorations.

Restorative techniques, direct and indirect methods of fabrication including materials used for fabrication like inlay wax, investment materials and casting.

13. Direct gold restorations.
14. Recent advances in restorative materials.
15. Esthetics including smile design
16. Management of non-carious lesions.
17. Management of discolored tooth
18. Minimal intervention dentistry.
19. Recent advances in restoration of endodontically treated teeth and grossly mutilated teeth.
20. Hypersensitivity-theories, causes and management.
21. Lasers in Conservative Dentistry.
22. CAD-CAM in restorative dentistry.
23. Digital imaging and its applications in restorative dentistry.
24. Clinical Photography.
25. Principles of esthetics.

- Color
- Facial analysis
- Smile design
- Principles of esthetic integration
- Treatment planning in esthetic dentistry

Paper-II: Endodontics

1. Rationale of endodontics.
2. Knowledge of internal anatomy of permanent teeth, anatomy of root apex and its implications in endodontic treatment.
3. Dentin and pulp complex
4. Pulp and periapical pathology.
5. Pathobiology of periapex.
6. Diagnostic procedures – Orofacial dental pain emergencies: endodontic diagnosis and management, recent advances used for diagnosis.
7. Case selection and treatment planning.
8. Endodontic microbiology.
9. Infection control procedures used in Endodontics (aseptic techniques such as rubber dam, sterilization of instruments etc.)
10. Endodontic emergencies and management.
11. Access cavity preparation – objectives and principles
12. Endodontic instruments and instrumentation – recent developments, detailed description of hand, rotary, sonic, ultra sonic etc.
13. Working length determination, cleaning and shaping of root canal system and recent developments in techniques of canal preparation.
14. Root canal irrigants and intra canal medicaments.
15. Obturation materials, techniques and recent advances.
16. Traumatic injuries and management – endodontic treatment for young permanent teeth.
17. Endodontic surgeries, recent developments in technique and devices and wound healing.
18. Endoperio interrelationship and management.
19. Lasers in Endodontics.
20. Multidisciplinary approach to endodontic situations.
21. Radiology and CBCT in endodontic practice.
22. Procedural errors in endodontics and their management.
23. Endodontic failures and retreatment.
24. Resorptions and its management.
25. Microscopes and Microsurgery in endodontics.
26. Single visit endodontics, current concepts and controversies.
27. Regenerative Endodontics
28. Geriatric Endodontics
29. Biologic response of pulp to various restorative materials and operative procedures
30. Local anesthesia in endodontics.

31. Restoration of endodontically treated teeth, recent advances
32. Effect of age and systemic health endodontics, with emphasis on treatment of medically complex endodontic patient.
33. Rhinosinusitis and endodontic disease
34. Vital pulp therapy
35. Records and legal responsibilities
36. Inflammation and immunology in endodontics
37. Non microbial endodontic disease
38. Pulpal reaction to caries and endodontic procedures
39. Bleaching principles
40. Outcome of endodontic treatment
41. Cracks and fracture

Paper-III: Essays (descriptive and analyzing type questions)

TEACHING / LEARNING ACTIVITIES:

The post graduate is expected to complete the following at the end of :

The following is the minimum required to be completed before the candidate can be considered eligible to appear for final MDS exam.

First Year

●Pre Clinical Work – Conservative and Endodontics

●Preclinical work on typhodont teeth

- | | |
|---|------|
| 1. Class II amalgam cavities | |
| a. Conservative preparation | - 03 |
| b. Conventional preparation | - 03 |
| 2. Inlay cavity preparation including wax pattern and casting on premolars and molars – MO, DO, MOD | - 02 |
| 3. Onlay preparation on molars including wax pattern and casting | - 02 |
| 4. Full Crown | |
| a. Anterior | - 02 |
| b. Posterior | - 02 |
| (1 each to be processed) | |
| 5. 7/8 crown | - 02 |
| (1 to be processed) | |
| 6. 3 / 4 crown premolar | - 02 |
| (1 to be processed) | |

- **Pre Clinical work on natural teeth**

1. Wax Carving of all permanent teeth
2. Inlay on molars and premolars MO, DO, and MOD including wax pattern and casting - 05
3. Amalgam cavity preparation
 - a. Conventional - 02
 - b. Conservative - 02
4. Complex amalgam on molar teeth - 02
5. Onlay on molars including wax pattern and casting - 02
(1 to be processed)
6. Full crown premolars and molars (metal, PFM & Ceramic) - 04
7. Full crown anterior (PFM, composite& Ceramic) - 03
8. Veneers anterior teeth - 02
9. Composite
 - a. Composite Filling (Class I,II,III & V) -05 (each)
 - b. Inlay (Class I & II) -02
 - c. Veneer -02
 - d. Diastema Closure -02
 - e. Angle Buildups -02

Endodontics:

1. Sectioning of all maxillary and mandibular teeth (vertical & horizontal).
2. Access cavity opening in relation to maxillary and mandibular permanent teeth.
3. Access cavity preparation, BMP and Obturation
 - a) Anterior (3 maxillary and 3 mandibular) - 06
 - Conventional prep - 02
 - Step back - 02
 - Crown down - 02
 - Obturation - 03
(2 lateral compaction and 1 thermoplasticized)
 - b) Premolar - 04
(2 upper and 2 lower) obturation 1 each
 - c) Molar - 06
(3 upper – 2 first molars and 1 second molar
3 lower – 2 first molars and 1 second molar) obturation 1 each
4. Post and core preparation and fabrication in relation to anterior and posterior teeth
 - a. Anterior 10 (Cast Post 5 and prefabricated post 5)
 - b. Posterior 05 (Cast Post 2 and prefabricated post 5)
5. Removable dies - 04

Note : Technique work to be completed in the first four months

Clinical Work:

A	Amalgam (Cl II MO/DO/MOD)	30
B	Composite restorations	30
C	GIC Restorations	30

D	Complex amalgam restorations	05
E	Composite inlay + veneers (direct and indirect)	10
F	Ceramic jacket crowns	05
G	Post and core for anterior teeth	10
H	Bleaching vital	05
	Non vital	05
I	RCT Anterior	20
J	Endo surgery – observation and assisting	05

Presentation of:

- Seminars – 5 seminars by each student – should include topics in dental materials, conservative dentistry and endodontics
- Journal clubs – 5 by each student
- Submission of synopsis at the end of 6 months
- Library assignment work
- Internal assessment – theory and clinicals.

Second Year

Case discussion- 5

1	Ceramic jacket crowns	10
2	Post and core for anterior teeth	10
3	Post and core for posterior teeth	05
4	Composite restoration	15
5	Full crown for posterior teeth	15
6	Cast gold inlay	05
7	Other special types of work such as splinting - Reattachment of fractured teeth etc.	10
8	Anterior RCT	30
9	Posterior RCT	40
10	Endo surgery performed independently	05
11	Management of endo – Perio problems	05
12	Angle build up composite	05
13	Diastema closure	05
14	Composite Veneers	05

- Under graduate teaching program as allotted by the HOD
- Seminars – 5 by each student
- Journal club – 5 by each student
- Dissertation work
- Prepare scientific paper / poster and present in conference and clinical meeting
- Library assignment to be submitted 18 months after starting of the course
- Internal assessment – theory and clinical

Third Year

Dissertation work to be submitted 6 months before final examination.

Clinical work

Cast gold inlay- Onlay, cuspal restoration	10
Post and core	20
Molar endodontics	50
Endo surgery	05
Diastema Closure	05
Angle Build up	05

- All other types of surgeries including crown lengthening, perioesthetics, hemi sectioning, splinting, replantation.

Presentation of:

- Seminars – 5 by each student
- Journal club – 5 by each student
- Under graduate teaching program as allotted by the HOD - 1/year
- Internal assessment – theory and clinical
- Clinical Case Discussion – 5/year
- Scientific Publication – 1(during the M.D.S course)
- Scientific Presentations - 4(during the M.D.S course with a minimum of 2 papers)
- Specialty Conferences and/or PG Conventions attended - 3(during the M.D.S course)

Monitoring Learning Progress:

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV.

The teaching and learning activities in each speciality shall be as under

(a) LECTURES:

There shall be some didactic lectures in the speciality and in the allied fields. The departments shall encourage guest lectures in the required areas and integrated lectures by multi-disciplinary teams on selected topics, to strengthen the training programmes.

(b) JOURNAL REVIEW:

The journal review meetings shall be held at least once a week. All trainees, associate and staff associated with the post-graduate programme are expected to participate actively and enter relevant details in the logbook. The trainee shall make presentations from the allotted journals of selected articles.

(c) SEMINARS:

The seminars shall be held at least twice a week in each department. All trainees are expected to participate actively and enter relevant details in logbook.

(d) SYMPOSIUM:

It is recommended to hold symposium on topics covering multiple disciplines.

(e) CLINICAL POSTINGS:

Each trainee shall work in the clinics on regular basis to acquire adequate professional skills and competency in managing various cases.

(f) CLINICO-PATHOLOGICAL CONFERENCE:

The clinico pathological conference shall be held once a month involving the faculties of Oral Medicine and Radiology, Oral Pathology and allied clinical departments. The trainees shall be encouraged to present the clinical details, radiological and histo-pathological interpretations and participation in the discussions.

(g) INTER-DEPARTMENTAL MEETINGS:

To encourage integration among various specialities, there shall be inter-departmental meeting chaired by the Dean with all heads of post-graduate departments at least once a month.

(h) TEACHING SKILLS:

All the trainees shall be encouraged to take part in undergraduate teaching programmes either in the form of lectures or group discussion.

(i) DENTAL EDUCATION PROGRAMMES:

Each department shall organise dental education programmes on regular basis involving other institutions. The trainees shall also be encouraged to attend such programmes conducted outside their university or institute.

(j) CONFERENCES/WORKSHOPS/ADVANCED COURSES:

The trainees shall be encouraged to attend conference/workshops/advanced courses and also to present at least two scientific papers and two posters at State/national level speciality and allied conferences/conventions during the training period.

(k) ROTATION AND POSTING IN OTHER DEPARTMENTS:

To bring in more integration among the specialities and allied fields, each department shall workout a programme to rotate the trainees in related disciplines.

DISSERTATION

Every candidate appearing for the post-graduate degree examination shall at least six months prior to the examinations, submit with his form for examination, four typewritten copies of the dissertation undertaken by the candidate, prepared under the direction and guidance of his/her guide.

It must be approved by the Institutional Review Board consisting of Principal, all the HOD's, an advocate, medical specialties and social worker within the first six months after the commencement of the course. The application for registration of dissertation topic

must be sent through the Principal duly forwarded by the Professor/ HOD. The University will register such dissertation topic. In case the students want to change the topic of dissertation, they can do it within the next three months. No change in the Guide/dissertation topic shall be made without prior approval of the University.

The aim of dissertation is to train a postgraduate student in research methodology. It includes identification of a problem with recent advances, designing of research study on collection of data, practical analysis and comparison of results and drawing conclusions.

The dissertation should be written under the following headings.

Introduction / Aims and objective / Review and literature / Materials & Methods / Results / Discussion

Conclusion / Summary

The written text of dissertation shall not be less than 100 pages. It should be neatly typed in double line spacing on one side (A4 size, 8. 27"x 11.69") and bounded properly. Photos, charts, tables, graphs can be attached where ever necessary. Spiral binding should not be used. The dissertation shall be certified by the Guide and Head of the department and forwarded by the Principal to the University.

The dissertation so submitted shall be referred to the examiners for their examination and acceptance of it shall be a condition precedent to allow the candidate to appear for the written part of the examination.

Provided that a candidate whose dissertation has been accepted by the examiner, but declared failed at the examination, shall be permitted to re-appear at the subsequent examination without a new dissertation.

Provided further that if the dissertation is rejected by the examiner, the examiner shall assign reasons thereof with suggestions for its improvement to the candidate and such candidate shall re-submit his/ her dissertation to the examiner who shall accept it before appearing in the examination.

Scheme of Examination:

A. Theory: Part-I: Basic Sciences Paper	-	100 Marks
Part-II: Paper-I, Paper-II & Paper-III	-	300 Marks

(100 Marks for each Paper)

Written examination shall consist of Basic Sciences Paper (Part-I) of three hours duration and should be conducted at the end of First year of MDS course. Part-II Examination will be conducted at the end of Third year of MDS course. Part-II Examination will consist of Paper-I,

Paper-II & Paper-III, each of three hours duration. Paper-I & Paper-II shall consist of two long answer questions carrying 25 marks each and five questions carrying 10 marks each. Paper- III will be on Essays. In Paper-III three Questions will be given and student has to answer any two questions. Each question carries 50 marks. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be as follows:
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PART-I : Applied Basic Sciences: Applied Anatomy, Physiology, Pathology including Oral Microbiology, Pharmacology, Biostatistics and Research Methodology and Applied Dental Materials.

PART-II

- Paper-I** : Conservative Dentistry
Paper-II : Endodontics
Paper-III : Essays (descriptive and analyzing type questions)

**The topics assigned to the different papers are generally evaluated under those sections. However a strict division of the subject may not be possible and some overlapping of topics is inevitable. Students should be prepared to answer overlapping topics.*

B. Practical / Clinical Examination : 200 Marks

The duration of Clinical and Viva Voce examination will be 2 days for a batch of four students. If the number of candidates exceeds 4, the programme can be extended to 3rd day.

Day 1

Clinical Exercise I – Random case discussion – (2) - 10+10 Marks

(Diagnosis, Treatment, Planning & Discussion)

Cast core preparation	-	
(i) Tooth Preparation	-	20 marks
(ii) Direct Wax Pattern	-	10 marks
(iii) Casting	-	10 marks
(iv) Cementation	-	05 marks
(v) Retraction & Elastomeric Impression	-	05 marks

Clinical Exercise II – (Inlay Exercise) - 30 Marks

(i) Tooth preparation for Class II Inlay (Gold or Esthetic)	-	20 marks
(ii) Fabrication of Indirect Pattern	-	10 marks

Day 2

Clinical Exercise III – (Molar Endodontics) - 100 Marks

(i) Local Anaesthesia and Rubber Dam application	-	20 marks
(ii) Access Cavity	-	20 marks
(iii) Working length determination	-	20 marks
(iv) Canal Preparation	-	20 marks
(v) Master cone selection	-	20 marks

C. Viva Voce : 100 Marks

i. Viva-Voce examination : 80 marks

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression, interpretation of data and communication skills. It includes all components of course contents. It includes presentation and discussion on dissertation also.

ii. Pedagogy Exercise : ***20 marks***

A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes.

REFERENCE BOOKS

1. Fractures of the teeth, prevention and treatment of the vital and non-vital pulp by Basrani
2. Textbook of operative dentistry by Baum
3. Dentin and pulp in restorative dentistry by Brannstrom
4. Principles and practice of operative dentistry by Charbeneau
5. Operative dentistry by Gilmore
6. Esthetic composite bonding by Jordan
7. Operative dentistry: modern theory and practice by Marzook
8. Art, science and practice of operative dentistry by Sturdevant
9. Atlas of operative dentistry - pre clinical and clinical procedures by Evans & Wetzel
10. New concepts in operative dentistry by Fusiyama
11. Handbook of clinical Endodontics by Bence.
12. Pathways of the pulp by Cohen & Burns
13. Bleaching teeth by Feinman
14. Endodontic practice by Grossman
15. Problem solving in Endodontics, prevention, identification and management by Gutmann
16. Endodontics in clinical practice by Harty
17. Endodontics by Ingle & Taintor
18. Endodontics- science and practice by Schroeder
19. Endodontontology - biologic considerations in Endodontic procedures by Seltzer
20. Restoration of the endodontically treated tooth by Schillingberg & Kessler
21. Principles and practice of Endodontics by Walton & Torabinejad
22. Endodontic therapy by Franklin S Weine
23. Fundamentals of operative dentistry-James B summit
24. Surgical endodontics-Gutmann