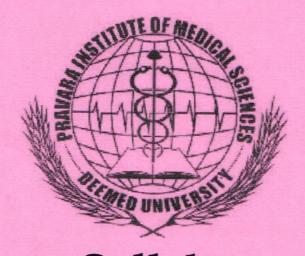
# Pravara Institute of Medical Sciences (Deemed to be University)

Loni Bk - 413 736, Tal. Rahata, Dist. Ahmednagar (M.S.) NAAC Re-accredited with 'A' Grade (CGPA 3.17)

Established Under Section 3 of UGC Act 1956, Vide Govt. of India Notification No. F.9-11/2000-U.3, dated 29th September, 2003



# Syllabus MDS Orthodontics & Dentofacial Orthopaedics

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# Pravara Institute of Medical Sciences Deemed University

Loni Bk. 413 736, Tal. Rahata. Dist. Ahmednagar (M.S.)

## Dental Faculty

Course :- MDS

Title: Orthodontics & Dentofacial Orthopaedics

Duration: Three years-

## **OBJECTIVES:**

The training programme in Orthodontics is to structure and achieve the following four objectives

# KNOWLEDGE:

- 1. The dynamic interaction of biologic processes and mechanical forces acting on the stomatognahtic systém during orthodontic treatment
- 2. The etiology, pathophysiology, diagnosis and treatment planning of various common Orthodontic problems.
- 3. Various treatment modalities in Orthodontics preventive interceptive and corrective
- 4. Basic sciences relevant to the practice of Orthodontics
- 5. Interaction of social, cultural, economic, genetic and environmental factors and their relevance to management of oro-facial deformities.
- 6. Factors affecting the long-range stability of orthodontic correction and their management
- Personal hygiene and infection control, prevention of cross infection and safe disposal
  of hospital waste, keeping in view the high prevalence of Hepatitis and HIV and other
  highly contagious diseases.

# SKILL:

- To obtain proper clinical history, methodical examination of the patient, perform essential daignostic procedures, and interpret them arrive at a reasonable diagnosis about the Dentofacial deformities.
- 2. To be competent to fabricate and manage the most appropriate appliance-intra or extra oral, removable or fixed, mechanical or functional, and active or passive -for the treatment of any orthodontic problem to be treated singly or as a part of multidisciplinary treatment of orofacial deformities.

### ATTITUDES:

- 1. Develop an attitude to adopt ethical principles in all aspects of Orthodontic practice.
- 2. Professional honesty and integrity are to be fostered.
- Treatment care is to be delivered irrespective of the social Status, část, creed or colleagues
- 4. Willingness to adopt, after acritical experience with professional colleagues.
- 5. Willingness to share the knowledge and clinical assessment, new methods and techniques of orthodontic management developed from time to time based on scientific research, which are in the best interest of the patient.
- Respect patients rights and privileges, including patients right to information and right to seek a second opinion
- 7. Develop attitude to seek opinion from allied medical and dental specialists as and when required.

# **COMMUNICATION SKILLS:**

- Develop adequate communication skills particularly with the patients giving them the
  various options available to manage a particular Dentofacial problem and to obtain a
  true informed consent from for the most appropriate treatment available at that point of
  time.
- Develop the ability to communicate with professional colleagues in Orthodontics or other specialities through various media like correspondence, Internet, e-video, conference, etc. To render the best possible treatment.

# **COURSE CONTENT:**

The program outlined, addresses both the knowledge needed in Orthodontics and allied Medical specialities in its scope. A minimum of three years of formal training through a graded systém of education as specifics, will equip the trainee with skill and knowledge at its completion to be able to practice basic Orthodontics and have the ability to intelligently pursue further apprenticeship towards advanced Orthodontics.

# SPREAD OF THE CURRICULUM:

Six months teaching of basic subjects including completion of pre-clinical exercises 2½ years of coverage of all the relevant topics in Orthodontics, clinical training involving treatment of patients and submission of dissertation. These may be divided into blocks of 6 to

8 months duration each, depending on the training policies of each institution.

### I. APPLIED ANATOMY:

# Prenatal growth of head:

Stages of embryontic development, origin of head, origin of face, origin of teeth.

# postnatal growth of head:

Bones of skull, the oral cavity, development of chin, the hyoid bone, general growth of head, face growth.

### e Bone growth:

Origin of bone, composition of bone, units of bone structure, schedule of Ossification, mechanical properties of bone, roentgen graphic appearance of bone

### • Assessment of growth and development:

Growth prediction, growth spurts, the concept of normality and growth increments of growth, differential growth, gradient of growth, methods of gathering growth data. Theories of growth and recent advances, factors affecting physical growth.

### Muscles of mastication:

Development of muscles, muscle change during growth, muscle function and facial development muscle function and malocclusion.

# Development of dentition and occlusion.:

Dental development periods, order of tooth eruption, chronology of permanent tooth formation, periods of occlusal development, pattern of occlusion.

# \* Assessment of skeletal age:

The carpal bones, carpal x-rays, cervical vertebrae

### II PHYSIOLOGY:

# Endocrinology and its disorders:

(Growth hormone, thyroid hormone, parathyroid hormone, ACTH) pituitary gland hormones, thyroid gland hormones, parathyroid gland hormones.

### • Calcium and its metabolism:

- Nutrition metabolism and their disorders: proteins, carbohydrates, fats, vitamins and minerals.
- Muscle physiology

- Craniofacial Biology: ell adhesion molecules and mechanism of adhesion.
- Bleeding disorders in orthodontics: Hemophilia

# III DENTAL MATERIALS:

- Gypsum products: dental plaster, dental stone and their properties, setting reaction etc.
- Impression materials: impression materials in general and particularly of alginate impression material.
- Acrylics: Chemistry, composition physical properties
- Composites: Composition types, properties setting reaction.
- Banding and bonding cements: Zn(PO<sub>4</sub>)<sub>2</sub> Zinc silicophosphate, Zinc polycarboxylate, resin cements and glass Ionomer cements.
- Wrought metal alloys: deformation, strain hardening, annealing, recovery, recrystallization, grain growth, porperties of metal alloys
- Orthodontic arch wires: stainless steel gold, wrought coblat chromium nickel alloys, alpha & beta titanium alloys
- Elastics: Latex and non-letex elastics.
- Applied physics: Bioengineering and metallurgy
- Specification and tests methods used for material used in Orthodontics
- Survey of all contempoary literature and Recent advances in above mentioned materials.

# IV. GENETICS:

- Cell structure, DNA, RNA, protein synthesis, cell division
- Chromossomal abnormalities
- Principles of orofacial genetics
- Genetics in malocclusion
- 5 Molecular basis of genetics
- Studies related to malocclusion
- Recent advances in genetics related to malocclusion
- Genetic counseling
- Biothics and relationship to Orthodontic Management of patient

# V. PHYSICAL BIOETHICS ANTHROPOLOGY:

Evolutionary development of dentition

Evolutionary development of jaws.

### VI. PATHOLOGY:

- Inflammation
- Necrosis

# VII. BIOSTASTICS:

- Statistical principles
  - ✓ Data Collection
  - Method of presentation
  - Method of Summarizing
  - ✓ Method of analysis different tests / errors
- Sampling and sampling technique
- Experimental models, design and interpretation
- Development of skills for preparing clear concise and cognent scientific abstracts and publication

### VIII. APPLIED RESEARCH METHODOLOGY ORTHODONTICS:

- Experimental design
- Animal experimental protocol
- Principles in the development execution and interpretation of methodologies in orthodontics
- 6 Critical Scientific appraisal of litreature

# IX. APPLIED PHARMACOLOGY:

# . ORTHODONTIC HISTORY:

- Historical perspective,
- Evolution of orthodontic applicances
- Pencil sketch history of Orthodontic peers
- History of Orthodontics in india

# XI. CONCEPTS OF OCCLUSION AND ESTHETICS:

- Structure and function of all anatomic components of occlusion,
- Mechanics of articulation,
- Recording of masticatory function,
- Diagnosis of Occlusal dysfunction
- Relationship of TMJ anatomy and pathology and related neuromuscular physiology

# XII. ETIOLOGY AND CLASSIFICATION OF MALOCCLUSION:

- A comprehensive review of the local and systemic factors in the causation of malocclusion.
- Various classifications of malocclusion.

# XIII. DENTOFACIAL ANOMALIES:

 Anatomical, physiological and pathological characteristics of major group of developmental defects of the orofacial structures.

# XIV. CHILD AND ADULT PSYCHOLOGY:

- Stages of child development
- Theories of phychological development
- Management of child in orthodontic treatment
- Management of handicapped child
- Motivation and Psychological problems related to malocclusion / orthodontics
- Adolescent psychology
- Behavioral psychology and communication

# XV. <u>DIAGNOSIS PROCEDURES AND TREATMENT PLANNING IN ORTHODONTICS</u>:

- Emphasis on the process of data gathering, synthesis and translating it into a treatment plan
- Problem cases- analysis of cases and its management
- Adult cases, handixapped and mentally retared cases and their special problems
- Critique of treated cases.

# Cephalometrics

- Instrumentation
- Image processing
- Tracing and analysis of errors and applications
- · Rdiation hygiene
- Advanced Cephalometrics techniques
- Comprehensive review of literature
- Video imaging principles and application

# XVII. PRACTICE MANAGEMENT IN ORTHODONTICS:

- Economics and dynamics of solo and group practices
- Personal management

- Material management
- e Public relations
- Professional relationship
- Dental ethics and jurisprudence
- Office sterilization procedures
- Community based Orthodontics.

# XVIII. CLINICAL ORTHODONTICS:

# Myofunctional Orthodontics:

- Basic principles
- Contemporary appliances- their design and manipulation
- Case selection and evaluation of the treatment results
- Review of the current litreature

## Dentofacial Orthopedics:

- Principles
- Biomechanics
- Appliance design and manipulation
- Review of contemporary literature

# Cleft lip and palate rehabilitions:

- Diagnosis and treatment planning
- Machanotherpy
- Special growth problem of cleft cases
- Speech psysiology, pathology and elements of therapy as applied to orthodontics
- Team rehabilitative procedures.

# Biology of tooth movement:

- Principles of tooth movement-review
- Review of contempoary literature
- Applied histophysiology of bone, periodontal ligament
- Molecular and ultra cellular consideration in tooth movement
   Orthodontic / Orthognathic surgery:
- Orthodontist 'role in conjoint diagnosis and treatment planning
- Pre and post-surgical orthodontics
- Participation in actual clinical cases, progress evaluation and post retention study

- Review of current lietrature
  - Ortho / Perio / Prostho inter relationship:
- Principles of interdisciplinary patient treatment
- Common problems and their management

# Basic principles of Mechanotherapy Includes Removable appliances and fixed appliances

- Design
- Construction
- ⇒ Fabrication
- Management
- Review of current literature on treatment methods and results

# Applied preventive aspects in Orthodontics

- Caries and periodontal disease prevention
- Oral hygiene measures
- Clinical procedures

# Interceptive Orthodontics

- Principles
- Growth guidance
- Diagnosis and treatment planning
- Therapy emphasis on:
  - a. Dento-facial problems
  - b. Tooth material discrepancies
  - c. Minor surgery for Orthodontics

# Retention and relapse

- Mechanotherapy special reference to stability of results with various procedures
- Post retention analysis
- Review of contempory literature

# XIX. RECENT ADVANCES LIKE:

- Use of implants
- Lasers
- Application of F.E.M.
- Distraction Osteogensis

### SKILLS:

### Pre – Clinical Exercises

A general outline of the type of exercise is given here. Every institution can decide the details of exercise under each category.

- 1. General wire bending exercises to develop the manual dexterity.
- 2. Clasps, Bows and springs used in the removable appliances
- 3. Soldering and welding exercises
- 4. Fabrication of removable habit breaking mechanical and functional appliances, also all types of space maintainers and space regainers.
- 5. Bonwill Hawlay Ideal arch preparation.
- Construction of orthodontic models trimmed and polished preferably as per specifications of Tweed or A.B.O.
- 7. Cephalometric tracing and various Analyses, also superimposition methods-
- 8. Fixed appliance typhodont exercise
  - a. Training shall be imparted in one basic technique i.e. Standard Edgewise / Begg technique or its derivative / straight wire etc., with adequate exposure to other techniques.
  - b. Typhodont exercise
    - i. Band making
    - ii. Bracket positioning and placement
    - iii. Different stages in treatment appropriate to technique taught
- 9. Clinical photography
- 10. Computerized imaging
- 11. Preparation of surgical splints and splints for TMJ problems
- 12. Handling of equipments like vacuum forming appliances and hydro solder etc.

### First Year:

# I. Basic Pre-Clinical Exercise work for the MDS Studies:

### First 6 Months

### 1. NON - APPLIANCE EXERCISE

All the following exercise should be done with 0.7 or 0.8 mm wire

Sr.No.	Exercise	No
1.   St	raightening of 6" & 8" long wire	l each

Sr.No.	Exercise	No
2.	Square	 1
3.	Rectangle	 
4.	Triangle of 2" side	 <u></u>
5.	Circle of 2" side	
6.	Bending of 5U's	
7.	Bending of 5v's	 1

# 2. CLASPS

Sr.No.	Exercise	No
1.	<sup>3</sup> / <sub>4</sub> Clasps	2
2	Full clasps	
3	Triangular Clasps	2
4	Adam's clasp - upper molar	$-\frac{1}{2}$
5	Adam's clasp - lowermolar	2
6	Adam's clasp - per molar	2
7	Adam's clasp - Incisor	2
8	Modification of Adam's - with Helix	
9	Modification of Adam's – with distel extension	2
10	Modification of Adam's – with soldered tube	
11	Duyzing clasps on Molars	
12	Southened Clasp	

# 3. LABIAL BOWS

Sr.No.	Exercise	No.
1.	Short labile bow (upper & lower)	No
2	Long labial bow (upper & lower)	1
3	Robert's retractor	
4	High labial bow- with apron springs	
5	Mill's labial bow	11
6	Reverse loap labial bow	1
7	Retention labial bow solded to Adam's clasp	11
8	Retention labial bow extending distal to second molar	$\frac{1}{1}$
9	Fitted labial bow	11
10	Split high labial bow	1

# 4. SPRINGS

Sr.No.	Exercise	No
1.	Finger spring-mesial movement	2
2.	Finger spring-distal movement	2
3.	Double cantilever spring	2
₫.	Flapper spring	2
5.	Confin spring	2
6.	T spring	2

# 5. CANINÉ RETRACTORS

Sr.No.	Exercise	No
1	U loop canine retractor	2 PAIRS
. 2	Helical canine retractor	2 PAIRS
3	Palated canine retractor	2 PAIRS
4	Self – supporting Canine retractor	2 PAIRS
5	Self – supporting Canine retractor	2 PAIRS

# 6. APPLIANCES

Sr.No.	Exercise
1	Hawley's retention appliance with anterior bite plane
2	Upper Hawlay's appliance with posterior bite plane
3	Upper expansion appliance with coffin spring
4	Upper expansion appliance with coffin spring
5	Upper expansion appliance with expansion screw
6	Habit breaking appliance with tongue crib
7	Oral screen and double oral screen
8	Lip bumper
9	Splint for Bruxism
10	Catalans appliance
. 11	Activator
12	Bionator
13	Frankel-FR 2 appliance
14	Twin block
15	Lingual arch
16	TPA
17	Quad helix

r.No.		Exercise
18	Buhelix	
19	Utility arches	
20	Pendulum appliance	

# 7. Soldering excercise

F.No.	Exercise	No
1	Star	1
-2	Comb	
3	chirstmas tree	<u></u>
4	Soldering buccal tube on molar-bands	1

# 8. Welding exercise

Sr.No.	Exercise
1	Pinching and welding of molar, permolar, canline and Incisor bands
	Welding of buccal tubes and brackets on molar bands and incisor bands

# 9. Impression of upper and lower arches in alginate

# 10. Study model preparation

# 11. Model analysis

Sr.No.	Exercise	 	
1	Impression of upper and lower dental arches	 	
2	PREPARATION OF STUDY MODEL- 1 And all the permanent dentition analyses to be done		
3 .	PREPARATION OF STUDY MODEL- 2 And all the permanent dentition analyses to be done		
4	PREPARATION OF STUDY MODEL- 3 And all the mixed dentition analyses to be done		

# 12. Cephalometrics

Sr.No.	Exercise	
1.	Lateral cephalogram to be traced in five different colors and super imposed to see the accuracy of	
2.	Steiner's analysis	
3.	Down's analysis	
4.	Tweed analysis	
5	Rickett;'s analysis	
6	Burrstone analysis	

20 000 5000	
Sr.No.	Exercise
7	Rakosis analysis
8	Mc Namara analysis
9	Bjork analysis
10	Coben's analysis
11	Harvold's analysis
12	Soft tissue analysis - Holdaway and Burstone

# .13. Basics of clinical Photograpy including Digital Photography

# 14. Light wire bending exercise for the Begg technique

Sr.No.	Exercise			
<u>ξ</u> .	Wire bending technique on 0.016' wide circle "Z" Omega			
2.	Bonwill- Haywey diagram			
3.	Making a standard arch wire			
4.	Inter maxillary hooks-Boot leg and Inter Maxillary type			
5	Upper and Lower arch wire			
6	Bending a double back arch wire			
7	Bayonet bends (vertical and horizontal offsets)			
8	Stage III arch wire			
9	Torquing auxiliary (upper)			
10	Reverse Torquing (lower)			
71	Up righting spring			

# 15. Typhodont exercises: (Begg or P.E.A. method)

Sr.No.	Exercise			
1.	Teeth setting in Class II division I malocclusion with maxillary anterior Proclination and mandibular anterior crowding			
2.	Band prinching, welding breckets and buccal tubes to the bands			
3.	Stage I			
4.	Stage I I			
5	Pre- Stage III			
6	Stage I II			

### CLINICAL WORK:

Once the basic pre-clinical work is completed the students can také up clinical cases and the clinical training is for the two and half years

Each postgraduate student start with a minimum of 50 cases of his / her own. Additionally he / she should handle a minimum of 20 transferred cases.

# The type of cases can be as follows:

- i. Removable active appliances 5 cases
- ii. Class I malocclusion with Crowding
- iii. Class I malocclusion with bi-maxillary protrusion
- iv. Class II division 1
- v. Class II division 2
- vi. Class III (Orthopedic, Surgical, Orthodontic cases)
- vii. Inter disciplinary cases
- viii.Removable functional appliance cases like activator, Bionator, functional regulator, twin block and new developments
- ix. Fixed functional appliances Herbst appliance, jasper jumper etc. 5 cases
- x. Dento-facial orthopedic appliance like head gears, rapid maxillary expansion niti expender etc., 5 cases
- xi. Appliance for arch development such as molar distalization m 5 cases
- xii. Fixed machano therapy cases (Begg, PEA, tip edge, Edgewise)
  Retention procedures of above treated cases.

# Other work to be done during FIRST YEAR

- Seminars: One Seminar per week to be conducted in the department. A minimum of five seminars should be presented by each year.
- 2. Journal club: One Journal club per week to re conducted in the department. A minimum of five seminars should be presented by each student each year.
- 3. Protocol for dissertation to be submitted on or before the end of six month from the date of admission.
- Under graduate classes: Around 4-5 classes should be handled by each post-graduate student
- 5. Field survey: To be conducted and submit the report
- 6. Inter-departmental meetings: should be held once in a month
- 7. Case discussions
- 8. Field visits: To attend dental camps and to educate the masses
- Basic subjects classes
- 10. Internal assessment or Term paper

### Second Year:

The clinical cases taken up should be followed under the guidance. More case discussion and cases to be taken up. Other routine work as follows.

1. Seminars: One seminar per week to be conducted in the department. Each student should

- present a minimum of five seminars each year.
- 2. Journal club: One Journal club per week to be conducted in the department. A minimum of five seminars should be presented by each student each year.
- 3. Library assignment to be sumitted on or before the end of six months.
- 4. Under graduate classes: each post-graduate student should handle Around 4-5 classes
- 5. Inter-departmental meetings: should be held once in a month
- 6. Case discussions
- 7. Field visits: To attend dental camps and to educate the masses
- 8. Internal assessment or term paper
- Disseration work: On getting the approval from the university work for the dissertation to be started.

### Third Year:

the clinical cases taken up should be followed under the guidance. More case discussion and cases to be taken up. Other routine work as follows.

- 1. Seminars: One seminar per week to be conducted in the department. Each student should present a minimum of five seminars each year.
- 2. **Journal Club**: One Journal club per week to be conducted in the department. A minimum of five seminars should be presented by each student each year.
- 3. Under graduate classes: each post graduate students, should handle Around 4-5 classes.
- 4. Inter-departmental meetings: should be held once in a month
- 5. The completed dissertation should be submitted six month 5 before the final earnination.
- 6. Case discussions
- 7. Field visits: To attend dental camps and to educate the masses
- 8. Finsihing and presenting the cases taken up
- 9. preparation of finished cases and presenting the cases (to be presented for the examination)
- 10. Mock examination

### DISSERTATION:

- a. The Protocol for Dissertation should be submitted on or before the end of six months from the date of admission as per admission to the Registrar, of the concerned University to which the college is affiliated as per the calender of events notified by the University concerned.
- b. The completed dissertation should be submitted six month before the final examination as per calender of events to the Registrar (Evaluation), Rajiv Gandi University of health Sciences, karnataka, through proper channel.
- c. The dissertation should not be just a repetition of a perviously undertaken study but if

should try to explore some new aspects.

d. Approval of dissertation is essential before a candidate appears for the University examination.

### **MONTITORING 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 given in Section IV.

### **SCHEME OF EXAMINATION:**

## A. Theory : 300 Marks

Written examination shall consist of four question papers each of three hours duration. Total marks for each paper will be 75. Paper I, II and III shall consist of two long questions carrying 20 marks each and 5 short essay questions carrying 7 marks each. Paper IV will be on Essay. Questions on recent advances may be asked in any or all the papers. Distribution of topics for each paper will be a as follows:\*

Papaer I: Applied Basic Sciences: Applied Anatomy, physiology, Dental Materials, Genetics pathology Physical Anthropology, Applied Research methodology, Bio-Statistics and Applied Pharmacology.

Paper II: Orthodontic history, Concepts of occlusion and esthetics, child and Adult Psychology, Etiology and classification of maloclussion, Dentofacial Anomalies, Diagnostic procedures and treatment planning in Orthodontics, Practice management in Orthodontics.

Paper III: Clinical Orthodontics

Paper IV: Essay

\*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

Exercise No. 1 Functional Case : 50 marks

Selection of case for Functional appliance and recording of construction bite.

Frbrication and delivery of the appliance the next day.

Exercise No.2 Multib and exercise : 50 marks

III stage with auxilliary springs.

Or

2. Bonding of SWA brackets and construction of suitable arch wire.

Exercise No. 3 Display of records of the treated cases (minimum of 5 cases)

5 cases\* 15 marks = 75 Marks

Exercise No. 4 longCase discussions :25 marks

No.	Exercise	Marks alloted	approximate Time
Ĭ.	Functional appliance	50	1 hour 1 hour
2.	III stage mechanics / Bonding and arch wire fabrication	50	1 hr. 30 min
3.	Display of case records (a minimum of 5 cases to be presented with all the cases)	75	1 hour
4.	Long cases	25	2 hours

### -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, inter pretation of data and communication skills. It includes all component's of course contents. It includes presentation and discussion on dissertation also.

# й. Pedagogy Exercise : 20 marks

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