



**ALTAMASH INSTITUTE OF DENTAL MEDICINE
(JINNAH SINDH MEDICAL UNIVERSITY)**

**BDS Fourth Year
Prosthodontics
Study Guide**

Introduction:

This course intends to teach basic clinical skills to final year BDS students leading to competency in the field of prosthodontics. It will provide them basic science foundation for clinical and technical skills, incorporating studies in diagnosis and treatment planning of partially and completely edentulous arches. It will give the final year students a platform to develop knowledge, skills and attitude, to develop critical thinking in problem solving and treatment planning for prosthodontic patients making them proficient in all elements of prosthodontics including partial, complete, fixed and implant prosthodontics.

Outcome:

By the end of the Prosthodontics course, BDS graduates will be able to demonstrate skills in rehabilitating the oral function of the patients by restoring chewing, esthetics and phonetics through the use of veneers, crowns and/or dental prostheses.

Teaching and learning:

- Flipped Classroom (FC)
- Interactive lectures (IL)
- Demonstration (Demo)
- Tutorials
 - a. Case Based Learning (CBL)
 - b. Small Group Discussion (SGD)

Assessment tools:

1. Multiple Choice Questions: (MCQs)
 - One Correct Type
 - One Best Type
2. Mini Clinical Examination (Mini-CEx)
3. Observed Structured Clinical Examination (OSCE)



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		<p>iii. lip according to Length, thickness, mobility, support</p> <p>iv. tongue according to size and position</p> <p>v. frenal and border muscle attachments</p> <p>vi. hard and soft palate</p> <p>Tongue form</p> <ul style="list-style-type: none"> • Classify tongue form according to House. • Describe Selection of occlusion depending on tongue condition: <ul style="list-style-type: none"> ○ Tongue position; ○ Examination of floor of mouth posture; ○ Tongue biting. <p>Saliva</p> <ul style="list-style-type: none"> • Discuss the importance of saliva in complete denture retention considering the following: <ul style="list-style-type: none"> a) salivary flow and viscosity b) medical conditions affecting the salivary flow and viscosity c) xerostomia • Discuss the salivary factors contributing to complete denture retention • Manage edentulous patients with altered salivary flow <p>Evaluation of patients and treatment-oriented planning</p> <ul style="list-style-type: none"> • Obtain complete history based on 	<p align="center">IL</p> <p align="center">IL SGD</p> <p align="center">IL CBL</p>	<p align="center">MCQs (1C)</p> <p align="center">MCQs (1C)</p> <p align="center">MCQs (1B)</p>
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	<p>prescribed format</p> <ul style="list-style-type: none">• Perform the following examinations of patient according to the recommended method:<ol style="list-style-type: none">a) General Examination (gait, complexion and personality, cosmetic index, mental attitude of patient)b) Extra Oral examination including facial features, facial form, facial profile, lower facial height, muscle tone, complexion, lip competency, Mouth opening, lip length, lip competency, Smile line (low, avg, high)c) TMJ examination (including muscles of mastication, deviation, deflection, clicking/crepitation of TMJ and mouth opening)d) Neuromuscular examinatione) Intra Oral Examinationf) existing teeth (number of teeth, tilting, drifting, supra-eruption, rotation, undercuts)g) mucosa (color, condition, thickness)h) tongue examination including frenal attachmenti) saliva [consistency (normal, thick, ropy), xerostomia]j) Maxillary arch (Shape/ form,		
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		<p>Contour/ cross section, Frenal and border muscle attachment, Palatal vault, Soft palate (classification), Tuberosity, Median palatine raphe and tori)</p> <p>k) Mandibular arch (Shape/ form, Contour/ cross section, Frenal and border muscle attachment, retromylohyoid fossa, floor of the mouth and tori)</p> <p>l) others (Inter-arch space, bony prominences, tori, undercuts, Ridge relationships, gag reflex)</p> <p>m) Previous prosthesis evaluation</p> <p>n) Radiographic examination (abutment evaluation (if any), periapical pathology, retained residual roots, thickness of mucosa, bone support and quality)</p> <ul style="list-style-type: none"> • Discuss the purpose of diagnostic casts • Discuss the materials and methods of recording centric relation. • Discuss the procedure of mounting diagnostic casts according to the correct jaw relation • Mount the diagnostic casts according to the correct jaw relation • Plan the correct treatment for patients requiring complete dentures • Justify the treatment plan for patients 		<p>MCQs (1B)</p> <p>MCQs (1B)</p>
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	<p>mucous membrane.</p> <ul style="list-style-type: none"> Describe the mucosal response to oral prosthesis. <p>Alveolar Bone Resorption</p> <ul style="list-style-type: none"> Discuss the importance of preservation of natural dentition. Discuss alveolar bone resorption after tooth extraction Discuss alveolar bone resorption in patients wearing complete dentures and overdentures Differentiate between bone resorption rate and pattern in maxilla and mandible Discuss bone conditions (osteoporosis and arthritis). Discuss the management of highly resorbed ridges <p>Face Forms</p> <ul style="list-style-type: none"> Classify patients according to various face forms and facial profiles Record lower facial height on patients <p>Fundamentals of Denture Retention and Contributing Factors</p> <ul style="list-style-type: none"> Discuss the anatomical, physiological, physical, mechanical and muscular factors and dislodging forces affecting the complete denture retention <p>Mouth Preparation for Edentulous Patients</p>	<p>SGD</p> <p>IL</p> <p>SGD</p>	<p>MCQs (1C)</p> <p>MCQs (1B)</p>
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		<ul style="list-style-type: none"> • Describe in detail the nonsurgical methods to improve the patient’s denture foundation • List the preprosthetic surgical methods to improve the patient’s denture foundation • Discuss the various surgical methods for mouth preparation of patients requiring complete dentures • List the Indications for maxillary tori removal • Describe the various methods used for the enlargement of the denture bearing areas <p>Biomechanics of Complete Denture Prosthodontics</p> <ul style="list-style-type: none"> • List the factors that affect the successful denture fabrication • Define Retention • Discuss the anatomical, physiological, physical, mechanical and muscular factors and dislodging forces affecting the complete denture retention • Define Pascal’s law. • Discuss the procedure and mechanism of evaluation of retention with considerations to the Pascal’s Law. • Define stability 	<p>IL SGD</p>	<p>MCQs (1C)</p> <p>MCQs (1B)</p> <p>MCQs (1B)</p>
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		<p style="text-align: center;">Wilson)</p> <p>Maxillomandibular Relations</p> <ul style="list-style-type: none"> • Define maxilla-mandibular relation. • Discuss mandibular movements in the frontal sagittal and horizontal planes. (Posselt's Envelope of motion) • Discuss the anatomic determinants of mandibular movements. • Define the Centric relation, Centric occlusion, rest position, muscular position, intercuspal position, retruded contact position, Excursive movements (working, non- working) • Define rest vertical dimension and occlusal vertical dimension. • Define the terms record base and occlusal rim. • List the materials used for record base and occlusal rims • Construct maxillary and mandibular occlusal rims for edentulous patients according to the correct protocol • Establish the labial form of occlusal rims considering the facial landmarks, fullness of upper lip, philtrum, nasolabial fold and oral commissures • Define Orientation relations, vertical relations and horizontal relations • Establish the occlusal plane and 	SGD	MCQs (1B)
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		<p>maxillomandibular relations for edentulous patients</p> <ul style="list-style-type: none"> • Classify maxillomandibular relations on the basis of orientation, vertical and horizontal relations and resting and occlusal vertical dimensions <p>Articulators; Theories of Articulation</p> <ul style="list-style-type: none"> • Discuss function, types, uses, advantages and disadvantages, purpose and requirements of an articulator • Identify the different types of articulators • Classify articulators on the basis of the following parameters: <ul style="list-style-type: none"> ○ theories of occlusion ○ simulation of jaw movements ○ their adjustability • Discuss protrusive and lateral records. • Write Hanau's formula <p>Facebow</p> <ul style="list-style-type: none"> • Discuss facebow and its types • Discuss errors in facebow recording • Describe situations where facebow is not required • List the steps for recording the transverse hinge axis <p>Selection And Arrangement Of Teeth</p> <ul style="list-style-type: none"> • Select anterior teeth according to size, 	<p style="text-align: center;">IL SGD</p> <p style="text-align: center;">IL SGD</p>	<p>MCQs (1C)</p> <p>MCQs (1B)</p> <p>MCQs (1B)</p> <p>MCQs (1B)</p>
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	<p>form and color of teeth on the basis of various patient factors for edentulous patients</p> <ul style="list-style-type: none">• Select posterior teeth according to size, form and color of teeth on the basis of various patient factors for edentulous patients• Discuss the nine parameters of smile• Discuss advantages and disadvantages of anatomic, non-anatomic and cusp less teeth• Justify the teeth selection for complete dentures considering various patient factors• Discuss the ten landmarks for CD teeth setup.• Arrange artificial teeth on edentulous models• Justify the arrangement of artificial teeth considering various patient factors• Discuss the setup for retrognathic and prognathic facial skeletons. <p>Speech Considerations For Complete Dentures</p> <ul style="list-style-type: none">• Discuss phonetical considerations relevant to complete dentures <p>Try-In Complete Denture Fabrication</p> <ul style="list-style-type: none">• Conduct preliminary evaluation of complete denture on articulator• Conduct complete denture try-in			<p>MCQs (1B)</p> <p>IL</p>
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		<p>considering the following:</p> <ul style="list-style-type: none"> ○ individual trial denture in mouth ○ lip and cheek support ○ occlusal plane ○ vertical height ○ centric relation ○ posterior palatal seal <p>Insertion of Complete Denture,</p> <p>Management of Post Insertion</p> <p>Complaints and Recall</p> <ul style="list-style-type: none"> ● Discuss in detail the final processing of the complete dentures. ● Discuss in detail the materials used as denture base ● Describe different types of curing cycles. ● Describe the role of Pressure indication paste in adjustment of denture base ● Insert the finished denture on the patient according to the recommended protocol. ● Assess the fitting and functioning of complete denture at insertion considering various factors pertinent 	<p align="center">IL</p> <p align="center">SGD</p>	<p align="center">MCQs (1B)</p> <p align="center">MCQs (1B)</p> <p align="center">MCQs (1B)</p>
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		<p>to the prosthesis and the patient</p> <ul style="list-style-type: none">• Manage the fitting and functioning of complete denture at insertion considering various factors pertinent to the prosthesis and the patients• Communicate post-insertion instruction to the complete denture patients effectively• Manage post-insertion complaints on complete denture patients on recall visit following the recommended guidelines• Justify the management of post-insertion complaints of complete denture patients <p>Immediate/ Replacement Dentures and Overdentures</p> <ul style="list-style-type: none">• Discuss the classification, purpose, indications, contraindication, clinical and laboratory procedures for immediate/replacement dentures and overdentures• Discuss the importance of multidisciplinary approach in the management of patients requiring immediate/replacement dentures and overdentures• Demonstrate the insertion, follow-up and maintenance of immediate dentures and overdentures	SGD	
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		<p>facial features, facial form, facial profile, lower facial height, muscle tone, complexion, lip competency, Mouth opening, lip length, smile line (low, avg, high)</p> <p>c) TMJ examination (including muscles of mastication, deviation, deflection, clicking/crepitation of TMJ and mouth opening)</p> <p>d) Neuromuscular examination</p> <p>e) Intra Oral Examination</p> <p>f) existing teeth (number of teeth, tilting, drifting, supra-eruption, rotation, undercuts)</p> <p>g) mucosa (color, condition, thickness)</p> <p>h) tongue examination including frenal attachment</p> <p>i) saliva [consistency (normal, thick, ropy), xerostomia]</p> <p>j) occlusion (canine guided, group function, mutually protective, inter-arch space)</p> <p>k) others (midline mouth opening, occlusal stops, periodontal condition, residual alveolar ridge classification, residual roots, tooth surface loss, prosthesis, gag reflex)</p> <p>l) Radiographic examination (crown to root ratio, periapical pathology, retained residual roots, thickness of</p>		
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		<p>mucosa, bone support and quality, root configuration of abutment teeth)</p> <ul style="list-style-type: none">• Discuss the purpose of diagnostic casts• Discuss the materials and methods of recording centric relation.• Discuss the procedure of mounting diagnostic casts according to the correct jaw relation• Mount the diagnostic casts according to the correct jaw relation• Discuss the various fixed treatment options• Discuss the various factors involved in the treatment planning of FDP• Discuss the Design consideration for individual conditions in FDP• Plan the correct treatment for patients requiring fixed partial dentures• Justify the treatment plan for patients requiring fixed partial dentures• Document the treatment plan for patients requiring fixed partial dentures• Discuss the treatment plan with patients requiring fixed partial dentures following the ethical guidelines• Refer partially edentulous patients		
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		<p>temporization</p> <ul style="list-style-type: none"> • Describe different materials used to fabricate provisional restoration • Discuss different techniques used to fabricate provisional restorations <p>Tissue Management and Recording</p> <p>Impression for Fixed Prosthesis</p> <ul style="list-style-type: none"> • Discuss the various techniques for fluid control and soft tissue management • Discuss various methods of tissue displacement in detail • Justify the impression technique employed for fixed prosthesis in various patients • Record the impression of jaws after tooth preparation using the recommended technique • Discuss disinfection of various impression materials <p>Shade selection</p> <ul style="list-style-type: none"> • Discuss factors influencing shade selection. • Describe guidelines for accurate shade matching. • Discuss various methods of shade selection. <p>Cementation</p>	<p align="center">FC</p>	<p align="center">MCQs (1B)</p>
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		<ul style="list-style-type: none"> • Discuss factors to assess at try-in stage • Classify different luting agents • Select the suitable material for cementation of fixed prosthesis • Justify the selection of material used for cementation of fixed prosthesis • Discuss cementation protocol for different types of fixed partial dentures <p>Follow-Up And Repair</p> <ul style="list-style-type: none"> • Discuss the follow-up and repair of FPD • Discuss the possible complications and management • Explain failures in fixed partial dentures 	IL SGD	
3.	Implantology	<p>Basics Of Implantology</p> <ul style="list-style-type: none"> • Define the basic terminologies pertinent to implantology • Discuss the various components and types of implants • Discuss the advantages, disadvantages, indications and contraindications of implants <p>Impression Techniques</p> <ul style="list-style-type: none"> • Discuss the various impression techniques in implantology <p>Osseointegration and Biocompatibility</p>	IL SGD IL SGD	MCQs (1C) MCQs (1B) MCQs (1B)



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		<ul style="list-style-type: none"> • Discuss osteointegration, bio-integration and pertinent factors and theories • Describe the various Factors influencing the osteointegration (patients and surgical related) • Discuss various methods of assessing osteointegration <p>Prosthodontic Options</p> <ul style="list-style-type: none"> • Discuss the various prosthodontics options for partially dentate and edentulous patients requiring implant prosthesis • Discuss the advantages and disadvantages of screw- and cement-retained prosthesis • Discuss indications and contraindications of implant supported restorations. <p>Limitations Of Implants</p> <ul style="list-style-type: none"> • Discuss the limiting factors pertinent to the placement of implants <p>Clinical and Laboratory Procedures in Implantology</p> <ul style="list-style-type: none"> • Discuss the clinical and laboratory procedures pertinent to fabrication of implant restorations 	IL	<p>MCQs (1B)</p> <p>MCQs (1B)</p> <p>MCQs (1B)</p>
4	Maxillofacial Prosthodontics	<p>Classification of Congenital and Acquired Defects</p> <ul style="list-style-type: none"> • Discuss the classification of various congenital and acquired defects in 		MCQs (1C)



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	<p>patients requiring maxillofacial prosthesis</p> <p>Principles of Governing Management of Patients Presenting with Various Defects</p> <ul style="list-style-type: none"> • Discuss the management of mandibular defects and mandibular guidance prosthesis • Discuss the management of soft and hard palate defects <p>Obturators</p> <ul style="list-style-type: none"> • Define obturators • Discuss the different types of obturators • Discuss different methods of retention of an obturator • Discuss the advantages and retention of surgical obturator prosthesis <p>Cleft Palate Prosthesis</p> <ul style="list-style-type: none"> • Describe various cleft palate prosthesis • Discuss presurgical nasoalveolar molding appliance <p>Speech Aid Prosthesis</p> <ul style="list-style-type: none"> • Discuss the classification of speech aid prosthesis based on various parameters • Discuss advantages of speech aid prosthesis <p>Facial Prosthesis</p> <ul style="list-style-type: none"> • Discuss the prosthodontic 	<p>IL SGD</p> <p>IL</p> <p>SGD</p>	<p>MCQs (1B)</p> <p>MCQs (1C)</p> <p>MCQs (1B)</p> <p>MCQs (1C)</p>
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		<p>management for patients presenting with auricular, nasal, ocular, lip and cheek defects</p> <p>TMD Splints</p> <ul style="list-style-type: none"> • Discuss the various types and indications of splints <p>Bite Raising Appliances</p> <ul style="list-style-type: none"> • Discuss the Dahl Appliance and anterior bite plane <p>Splints And Stents</p> <ul style="list-style-type: none"> • Describe the shielding and positioning stents <p>Occlusion Including Tmd/Mpd</p> <ul style="list-style-type: none"> • Discuss anatomy and physiology of temporomandibular joint and related tissues • Discuss the classification of temporomandibular joint disorders. • Discuss optimum functional occlusion • Discuss canine guided, group function and mutually protected occlusal schemes • Discuss various determinants of occlusal morphology • Discuss the etiology of TMDs. • Discuss the strategy to formulate provisional and definitive diagnosis of TMDs 		<p>MCQs (1B)</p> <p>MCQs (1C)</p>
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		<ul style="list-style-type: none"> • Formulate the management plans for various patients presenting with TMDs including supportive and definitive therapies • Justify the management plans for various patients presenting with TMDs 		
5	Gerodontology	<ul style="list-style-type: none"> • Discuss the Impact of edentulism in old age (Mucosa, Bone, Saliva, Jaw movement, Taste and smell sensations, Nutrition) • Discuss the consequences of bone loss in edentulous patients (anatomical, soft tissue, esthetics, psychological) • Discuss the effects of various medications on oral health of geriatric patients • Discuss the various medical conditions with oral manifestations in geriatric patients • Discuss the causes, clinical features, diagnosis and management of patients with xerostomia • Discuss the problems encountered in denture patients with xerostomia • Discuss microbiology, predisposing factors, clinical features, and diagnosis of root caries in prosthodontic patients 	IL SGD	MCQs (1B)



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	<ul style="list-style-type: none">• Discuss the nutritional balance in geriatric patients requiring prosthodontics• Discuss the etiology and classification of tooth wear.• Discuss the general and prosthodontic management of tooth wear.• Discuss the impact of edentulism in old age.• Prosthodontic considerations to the mucosa, bone, saliva, jaw movements, taste and smell sensations, teeth and nutrition related to ageing.		
	CLINICAL SKILLS By the end of the year student will be able to:	Teaching method	Assessment Tool



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1	Complete Denture	<p>Definitions, Applied Anatomy and Physiology, Peripheral Tissue Attachment of Denture Bearing Area</p> <ul style="list-style-type: none"> • Identify extra- and intra-oral landmarks of prosthetic importance • Identify the border structures that limit the periphery of the denture in the maxilla and the mandible <p>Saliva</p> <ul style="list-style-type: none"> • Manage edentulous patients with altered salivary flow <p>Evaluation Of Patients And Treatment Oriented Planning</p> <ul style="list-style-type: none"> • Obtain complete history based on prescribed format • Perform the following examinations of patient according to the recommended method: <ol style="list-style-type: none"> a) General Examination (gait, complexion and personality, cosmetic index, mental attitude of patient) b) Extra Oral examination including facial features, facial form, facial profile, lower facial height, muscle tone, complexion, lip competency c) TMJ examination (including muscles of mastication, deviation, deflection, clicking/crepitation of TMJ and mouth opening) 	Demo	MiniCEx/ OSCE
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		<p>d) Neuromuscular examination</p> <p>e) Intra Oral Examination</p> <p>f) existing teeth (number of teeth, tilting, drifting, supra-eruption, rotation, undercuts)</p> <p>g) mucosa (color, condition, thickness)</p> <p>h) tongue examination including frenal attachment</p> <p>i) saliva [consistency (normal, thick, ropy), xerostomia]</p> <p>j) occlusion (canine guided, group function, mutually protective, inter-arch space)</p> <p>k) others (midline mouth opening, occlusal stops, periodontal condition, residual alveolar ridge classification, residual roots, tooth surface loss, prosthesis, gag reflex)</p> <p>l) Radiographic examination (crown to root ratio, periapical pathology, retained residual roots, thickness of mucosa, bone support and quality, root configuration of abutment teeth)</p> <ul style="list-style-type: none"> • Mount the diagnostic casts according to the correct jaw relation • Plan the correct treatment for patients requiring complete dentures • Justify the treatment plan for patients requiring complete dentures • Document the treatment plan for 		
				<p>MiniCEx/ OSCE</p>



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		<p>b) lip and cheek support c) occlusal plane d) vertical height e) centric relation f) posterior palatal seal</p> <p>Insertion of Complete Denture, Management of Post Insertion Complaints and Recall</p> <ul style="list-style-type: none"> • Insert the finished denture on the patient according to the recommended protocol. • Assess the fitting and functioning of complete denture at insertion considering various factors pertinent to the prosthesis and the patient • Manage the fitting and functioning of complete denture at insertion considering various factors pertinent to the prosthesis and the patients • Communicate post-insertion instruction to the complete denture patients effectively • Manage post-insertion complaints on complete denture patients on recall visit following the recommended guidelines • Justify the management of post-insertion complaints of complete denture patients 		
2	Crowns	Evaluation of Patients and Patient	Demo	MiniCEx OSCE



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<p>and Fixed Partial Denture</p>	<p>Oriented Treatment Planning</p> <ul style="list-style-type: none"> • Obtain complete history based on prescribed format • Perform intra-oral and extra oral examination of patients presenting to the prosthodontics OPD following the recommended guidelines • Mount the diagnostic casts according to the correct jaw relation • Plan the correct treatment for patients requiring fixed partial dentures • Document the treatment plan for patients requiring fixed partial dentures • Discuss the treatment plan with patients requiring fixed partial dentures following the ethical guidelines • Refer partially edentulous patients requiring complex prosthodontic treatment following the recommended guidelines <p>Tooth Preparation and Crown Design</p> <ul style="list-style-type: none"> • Prepare teeth for crown placement for partially dentate patients considering various patient factors <p>Recording Impression For Fixed Prosthesis</p> <ul style="list-style-type: none"> • Record the impression of jaws after 	<p>Demo</p>	<p>OSCE</p>
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		tooth preparation using the recommended technique		
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Reading Sources:

Text Books:

- Prosthodontics Treatment for Edentulous Patient Zarb (latest edition)
- Complete Denture Prosthodontics by John J Manaplill (latest edition)
- Fundamentals Of Fixed Prosthodontics (Herbert T.Shillinburg) (latest edition)
- Contemporary Fixed Prosthodontics Rosenstiel (latest edition)
- Removable Partial Denture McCracken's (latest edition)
- Stewart's Clinical Removable Partial Denture (latest edition)

Internet resources: With easy excess to digital library students will use internet resources with added time flexibility to enrich and update their knowledge and its application.

Library: It provides wealth of resources, space to study alone or in a group. It also provide world of books to discover and borrow.

Assessment Criteria :

Please Note: Removable partial denture that was taught in third professional year will be assessed in 4th professional examination

Knowledge: MCQs (Multiple Choice Questions) are used to asses objectives covered in each module.

- A MCQ has a statement or clinical scenario followed by four options (likely answer).
- Students after reading the statement/scenario select ONE, the most appropriate response from the given list of options.
- Correct answer carries one mark, and incorrect 'zero mark'. There is no negative marking.
- Students mark their responses on an answer sheet provided by examination department.

Skills:

- OSCE: Objective Structured Clinical Examination:



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- Each student will be assessed on the same content and have same time to complete the task.
- Comprise of 12-25 stations.
- Each station may assess a practical tasks include practical skills and application of knowledge
- Stations are observed, interactive, application of knowledge based and rest.
- In Observed and Interactive Stations these will be assessed by internal or external examiners through structured viva or a task.
- Application of knowledge Stations: it will be static stations in which there will be pictures, clinical scenarios with related questions for students to answer on the provided answer copy.
- Rests: It is a station where there is no task given and in this time student can organize his/her thoughts.

AIDM Internal Assessment Policy

Students will be assessed to determine achievement of learning objectives through the following:

- Midterm Examination will be scheduled on completion of half of the course and OPD rotations
- Mock Examination will be scheduled on completion of whole course and OPD rotations
- The method of examination comprises theory exam which includes MCQs, and practical examination by OSCE (Objective Structured Clinical Examination).
- Student's behaviors and attitudes will be observed during all academic activities.

Annual Examination:

- Marks of both internal assessments will constitute 20% weightage as per JSMU policy.
- University Annual examination carries 90% marks. Theory exam will be based on MCQs and Clinical / Professional /communication skills will be assessed by OSCE.



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Attempts: There are 2 attempts in the fourth professional examination only. 2nd attempt is the supplementary examination which if not passed student has to repeat the year.

Course Evaluation:

- Pass/fail ratio of continuous and summative assessments will be evaluated.
- 75% attendance is mandatory to be eligible for annual professional examination
- Feedback will be taken
 - Regarding course from students and faculty
 - Student feedback regarding faculty
 - Faculty feedback of students

Teaching Faculty:

Prof. Dr. Naseer Ahmed
Professor, Head of Department
naseer.ahmed@altamash.pk

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