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# MDS ORTHODONTICS CURRICULUM

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## AIIMS KALYANI



JANUARY 8, 2024

ACADEMIC SECTION

AIIMS Kalyani

## PROPOSAL FOR MDS COURSE at AIIMS, Kalyani

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### **Speciality : ORTHODONTICS and DENTOFACIAL ORTHOPAEDICS**

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**COURSE NAME** : MDS

**SPECIALITY** : ORTHODONTICS and DENTOFACIAL ORTHOPAEDICS

**DURATION OF COURSE** : 3 years

**ELIGIBILITY** : B.D.S.

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#### **GOAL :**

The goal Master of Dental Surgery (M.D.S.) course in Orthodontics and Dentofacial Orthopaedics is to provide comprehensive training for teaching theoretical, practical and clinical aspects of Orthodontics, practice the clinical science of orthodontics efficiently and effectively, backed by scientific knowledge and skill, as well as the research methodology.

#### **OBJECTIVES:**

The candidate qualifying for the award of M.D.S. (Orthodontics and Dentofacial Orthopaedics) should ensure and achieve the following four objectives

#### **Knowledge:**

1. The dynamic interaction of biologic processes and mechanical forces acting on the stomatognathic system 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
7. 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.

**Skills:**

1. To obtain proper clinical history, methodical examination of the patient, perform essential diagnostic procedures, and interpret them and arrive at a reasonable diagnosis about the Dento-facial 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 oro-facial deformities.

**Attitude:**

1. Develop an attitude to adopt ethical principles in all aspects of Orthodontic practice.
2. Professional honesty and integrity are to be fostered
3. Treatment care is to be delivered irrespective of the social status, cast, creed and religion of the patients.
4. Willingness to share the knowledge and clinical experience with professional colleagues
5. Willingness to adopt, after a critical 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

6. 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:**

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

## **COURSE CONTENT:**

### **THEORY**

The program outlined, addresses both the knowledge needed in Orthodontics and allied Medical specialties in its scope.

### **Spread of the Curriculum:**

#### **PART-I:**

##### **A. Applied Basic Sciences:**

###### **Applied Anatomy:**

- a) Prenatal growth of head:
- b) Postnatal growth of head:
- c) Bone growth:
- d) Assessment of growth and development:
- e) Muscles of mastication:
- f) Development of dentition and occlusion:
- g) Assessment of skeletal age.

###### **Physiology:**

- a) Endocrinology and its disorders:
- b) Calcium and its metabolism:
- c) Nutrition-metabolism and disorders:
- d) Muscle physiology:
- e) Craniofacial Biology:
- f) Bleeding disorders in orthodontics:

###### **Dental Materials:**

- a) Gypsum products:
- b) Impression materials:
- c) Acrylics:
- d) Composites:
- e) Banding and bonding cements:
- f) Wrought metal alloys:
- g) Orthodontic arch wires
- h) Elastics:

###### **Genetics:**

- a) Cell structure, DNA, RNA, protein synthesis, cell division
- b) Chromosomal abnormalities
- c) Principles of orofacial genetics
- d) Genetics in malocclusion
- e) Molecular basis of genetics
- f) Studies related to malocclusion
- g) Recent advances in genetics related to malocclusion
- h) Genetic counseling
- i) Bioethics and relationship to Orthodontic management of patients.

###### **Physical Anthropology:**

- a) Evolutionary development of dentition
- b) Evolutionary development of jaws.

###### **Pathology:**

- a) Inflammation
- b) Necrosis

### **Biostatistics:**

- a) Statistical principles
- b) Sampling and Sampling technique
- c) Experimental models, design and interpretation
- d) Development of skills for preparing clear concise and cogent scientific abstracts and publication

### **Applied Research Methodology In Orthodontics:**

- a) Experimental design
- b) Animal experimental protocol
- c) Principles in the development, execution and interpretation of methodologies in Orthodontics
- d) Critical Scientific appraisal of literature.

### **Applied Pharmacology**

- a) Definitions & terminologies
- b) Dosage and mode of administration
- c) Action and fate of drugs in the body,
- d) Vitamins:

## **PART-II:**

### **Paper-I:Basic Orthodontics**

#### **Orthodontic History:**

- a) Historical perspective,

- b) Evolution of orthodontic appliances,
- c) Pencil sketch history of Orthodontic peers
- d) History of Orthodontics in India

#### **Concepts of Occlusion and Esthetics:**

- a) Structure and function of all anatomic components of occlusion,
- b) Mechanics of articulation,
- c) Recording of masticatory function,
- d) Diagnosis of Occlusal dysfunction,
- e) Relationship of TMJ anatomy and pathology and related neuromuscular physiology.

#### **Etiology and Classification of Malocclusion:**

- a) A comprehensive review of the local and systemic factors in the causation of malocclusion
- b) Various classifications of malocclusion

#### **Dentofacial Anomalies:**

- a) Anatomical, physiological and pathological characteristics of major groups of developmental defects of the orofacial structures.

#### **Diagnostic Procedures and Treatment**

#### **Planning in Orthodontics:**

- a) Emphasis on the process of data

gathering, synthesis and translating it into a treatment plan

- b) Problem cases – analysis of cases and its management
- c) Adult cases, handicapped and mentally retarded cases and their special problems
- d) Critique of treated cases.

### **Cephalometrics**

- a) Instrumentation
- b) Image processing
- c) Tracing and analysis of errors and applications
- d) Radiation hazards
- e) Advanced Cephalometrics techniques including digital cephalometrics
- f) Comprehensive review of literature
- g) Video imaging principles and application.

### **Practice Management in Orthodontics:**

- a) Economics and dynamics of solo and group practices
- b) Personal management
- c) Materials management
- d) Public relations
- e) Professional relationship
- f) Dental ethics and jurisprudence
- g) Office sterilization procedures
- h) Community based Orthodontics.

### **Paper-II:Clinical Orthodontics**

### **Myofunctional Orthodontics:**

- a) Basic principles
- b) Contemporary appliances –design, manipulation and management
- c) Case selection and evaluation of the treatment results
- d) Review of the current literature.

### **DentofacialOrthopedics:**

- a) Principles
- b) Biomechanics
- c) Appliance design and manipulation
- d) Review of contemporary literature

### **Cleft lip and palate rehabilitation:**

- a) Diagnosis and treatment planning
- b) Mechanotherapy
- c) Special growth problems of cleft cases
- d) Speech physiology, pathology and elements of therapy as applied to orthodontics
- e. Team rehabilitative procedures.

### **Biology of tooth movement:**

- a) Principles of tooth movement-review
- b) Review of contemporary literature
- c) Applied histophysiology of bone, periodontal ligament
- d) Molecular and ultra cellular consideration in tooth movement

- b) Clinical procedures

### **Orthodontic / Orthognathic surgery:**

- a) Orthodontist's role in conjoint diagnosis and treatment planning
- b) Pre and post-surgical Orthodontics
- c) Participation in actual clinical cases, progress evaluation and post retention study
- d) Review of current literature

### **Ortho / Perio / Prostho/Endo inter relationship:**

- a) Principles of interdisciplinary patient treatment
- b) Common problems and their management

### **Basic principles of mechanotherapy** (includes removable appliances and fixed appliances):

- a) Design
- b) Construction
- c) Fabrication
- d) Management
- e) Review of current literature on treatment methods and results

### **Applied preventive aspects in Orthodontics:**

Caries and periodontal disease prevention

- a) Oral hygiene measures

### **Interceptive Orthodontics:**

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

### **Evidence Based Orthodontics:**

### **Different types of fixed Mechanotherapy:**

### **Orthodontic Management of TMJ problems, sleep-apnoea etc.:**

### **Retention and relapse:**

- a) Mechanotherapy – special reference to stability of results with various procedures
- b) Post retention analysis
- c) Review of contemporary literature

### **Recent Advances :**

- a) Use of implants
- b) Lasers
- c) Application of F.E.M.
- d) Distraction Osteogenesis
- e) Invisible Orthodontics
- f) 3D imaging Digital Orthodontics, Virtual Treatment Planning
- g) CAD-CAM bracket Customization
- h) Robotic Wire Bending

- i) Accelerated Orthodontics
  - 1. Surgical
  - 2. Device assisted or mechanical stimulation
  - 3. Biochemical Mediators
- j) Lingual Orthodontics

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

**PRE – CLINICAL EXERCISES**  
(Should be completed within 3 months)

A general outline of the type of exercises is given here:

- 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 Hawley Ideal arch preparation.
- 6. Construction of orthodontic models trimmed and polished.

- 7. Cephalometric tracing and various Analyses, also superimposition methods –
- 8. Fixed appliance typodont exercises.
  - 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. Typodont 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 equipment like vacuum forming appliances and hydro solder etc.

## CLINICAL WORK:

Once the basic pre-clinical work is completed in three months, the students can take up clinical cases and the clinical training.

*Each postgraduate student should start with a minimum of 50 fixed orthodontics cases and 20 removable including myofunctional cases of his/her own. Additionally he/she should handle a minimum of 25 transferred cases.*

The type of cases can be as follows:

- Removable active appliances
- Class-I malocclusion with Crowding
- Class-I malocclusion with bi-maxillary protrusion
- Class-II division – 1
- Class-II division – 2
- Class-III (Orthopedic, Surgical, Orthodontic cases)
- Inter disciplinary cases
- Removable functional appliance cases like activator, Bionator, functional regulator, twin block and new developments
- Fixed functional appliances – Herbst appliance, jasper jumper etc
  - Dento-facial orthopedic appliances like head gears, rapid maxillary expansion, NiTi expander etc.,

- Appliance for arch development such as molar distalization
- Fixed mechano therapy cases (Begg, PEA, Tip edge, Edgewise, lingual)
- Retention procedures of above treated cases.

## TEACHING LEARNING METHODS :

The following are the TEACHING LEARNING methods suggested for being adopted during the MDS Orthodontics and Dentofacial Orthopedics course. Each student shall take part actively in learning and teaching activities.

### A. LECTURES: ..... 02 Days / WEEK

There shall be some didactic lectures in the speciality and in the allied fields. Guest lectures shall be encouraged in the required areas and integrated lectures by multi-disciplinary teams on selected topics.

### B. JOURNAL REVIEW:

..... 02 Days / 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: ... 02 Days / WEEK**

All trainees are expected to participate actively and enter relevant details in logbook. The trainee shall make presentations from the allotted Topics.

**D. SYMPOSIUM:** It is recommended to hold symposium on topics covering multiple disciplines.**E. CLINICAL POSTINGS:**

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

**F. INTER-DEPARTMENTAL****MEETINGS: ... 01 Day / MONTH**

To encourage integration among various specialities, there shall be interdepartmental meeting.

**G. TEACHING SKILLS: ..... 02 Days / SEMESTER**

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

**H. DENTAL EDUCATION PROGRAMMES:**

The department shall organise dental education programmes on regular basis involving other speciality and other institutions. The trainees shall also be encouraged to attend such programmes conducted outside our institute.

**I. 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.

**J. 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.

**K. EVALUATION OF TRAINING**

Written / practical assessment every semester. Feedback on teaching/training programmes.

**L. RESEARCH WORK**

Writing Thesis protocol, Collection of data, Statistical analysis, Result submission

Progress monitoring of research work every semester,

Result presentation and submission at the end of 2 & ½ yrs

Presenting paper/poster at conferences

Preparing manuscripts for documentation/publication

Design a project for research

**NOTE: The Teaching Learning Skills will be assessed using the Pre-Formed Evaluation Performa - - - attached as ANNEXURE - I to VIII**

## ASSESSMENT

### FORMATIVE ASSESSMENT

#### Examination on Research Methodology & Biostatistics

- Timing: End of 2nd Semester
- Total marks: 100
- Will be considered as an internal examination
- Candidate should pass to appear in Final examination
- No marks will be added to final / summative examination

#### Internal Examination: (Theory and Clinical)

- Theory examination will comprise of both Class tests, MCQs.
- Clinical Examination will comprise of both chair side test.
- Timing: At the end of the 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> semester, pre-final (2 months before final examination).
- Total marks: 100
- Candidate should pass in all examination to appear in Final examination

#### LOG BOOK:

The candidate should maintain a log book which has to be signed periodically by the faculty.

## SUMMATIVE ASSESSMENT

### A. Theory: 400 Marks

#### 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. PaperIII 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:

**PART-I:** Applied Basic Sciences: Applied anatomy, Physiology, Dental Materials, Genetics, Pathology, Physical Anthropology, Applied Research methodology, Bio-Statistics and Applied Pharmacology.

## **PART-II**

Paper I: Orthodontic history, Concepts of occlusion and esthetics, Child and Adult Psychology, Etiology and classification of malocclusion, Dentofacial Anomalies, Diagnostic procedures and treatment planning in Orthodontics, Practice management in Orthodontics

Paper II: Clinical Orthodontics

Paper III: Essays (descriptive and analyzing type questions)

### **B. Practical / Clinical Examination :**

**200 Marks**

**Exercise No: 1** **50 Marks**

#### **Functional Case :**

Selection of case for functional appliance and recording of construction bite. Fabrication and delivery of the appliance the next day.

**Exercise No: 2 :** **50 Marks**

1. III stage with auxiliary springs/Wire bending of any stage of fixed orthodontics (OR)
2. Bonding of SWA brackets and construction of suitable arch wire.

**Exercise No. 3** **75 Marks**

Display of records of the treated cases (Minimum of 5 cases)

### **Exercise No: 4**

**25 Marks**

Long case discussions

### **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**

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.

### **CERTIFICATION REQUIREMENT:**

1. It will be mandatory to complete all pre-clinical exercises before the candidate appears for Part -I Basic Science Examination, (First Summative assessment , at the end of First year)
2. A candidate shall be deemed to have passed the first year examination if he/she obtains not less than 50 percent

of the total marks.

3. A candidate who fails to pass, or who does not present himself/herself for the examination, may be admitted to one or more subsequent examination.

A candidate failing in the May examination can reappear in following December examination and vice versa.

4. A candidate, who fails to pass in Part – I Basic Science Examination, shall be permitted to continue studies into the second year.
5. A candidate must be passed in Part –I Basic Science Examination at least 6 months prior to appearing Part- II Examination ( i.e; Final Summative Examination at the end of 3rd year).
6. A candidate shall be deemed to have passed the Final Summative Examination if he/she obtains not less than 50 % of the total marks separately in all the papers separately.

within SIX months from the date of the commencement of the course.

### **SUBMISSION OF THESIS**

The last date for submission of thesis of M.D.S. Orthodontics and Dentofacial Orthopaedics course students is 31 st January.

Any student who does not submit his/her thesis on the aforementioned date may be given extension up to 15 days i.e. up to 15<sup>th</sup> February with the permission of the Dean.

In case, he/she fails to submit the thesis within the extended period, i.e. by 15<sup>th</sup> February, then he/she will not be eligible to appear in the final examination.

### **LEAVE and STIPEND**

As per the Prevailing rule of AIIMS, Kalyani.

## **THESIS SUBMISSION**

### **SUBMISSION OF PLAN OF PROTOCOL OF THESIS**

Students registered for M.D.S. Orthodontics and Dentofacial Orthopaedics course shall have to submit the plan of thesis to the Dean's office

**JOURNALS RECOMMENDED  
FOR M.D.S. (ORTHODONTICS and  
DENTOFACIAL ORTHOPAEDICS )  
COURSE**

*Both Current and Back Volumes  
Preferred*

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1. American Journal of Orthodontics  
and Dentofacial Orthodontics
2. Seminars in Orthodontics
3. Journal Of Clinical Orthodontics
4. Journal of Indian Orthodontic  
Society
5. Angle Orthodontist
6. European Journal Of Orthodontics
7. Orthodontics and Craniofacial  
Research
8. APOS Trends in Orthodontics

**LIST OF BOOKS - RECOMMENDED  
FOR M.D.S. (ORTHODONTICS and  
DENTOFACIAL ORTHOPAEDICS )  
CURRICULUM**

*All the books are to be recent editions*

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1. William Proffit, Henry Fields,  
Brent Larson, David Sarver.  
**Contemporary Orthodontics.**  
**6th Edition**
2. Jeryl D. English, Sercan Akyalcin,  
Timo Peltomaki, Kate Litschel.  
**Mosby's Orthodontic Review,**
3. Richard Parkhouse. **Tip-Edge  
Orthodontics and the Plus Bracket.**
4. **D. M. Sarver. Esthetic  
Orthodontics & Orthodontics  
Surgery,**
5. Richard P. McLaughlin, John C.  
Bennett, Hugo Trevisi **Systemized  
Orthodontic Treatment  
Mechanics.,**
6. William J Clark. **Twin Block  
Functional Therapy-Applications  
In Dentofacial Orthopaedics.**
7. Rafi Romano, Silvia Geron.  
**Lingual & Esthetic Orthodontics**

**ANEXURE – I -- MODEL CHECKLIST**  
**FOR EVALUATION OF JOURNAL REVIEW PRESENTATIONS.**

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Name of the Trainee :					Date :	
Name of the Faculty / Observer						
Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Article chosen was					
2.	Extent of understanding of scope and objectives of the paper by the candidate					
3.	Whether cross-references have been consulted.					
4.	Whether other relevant publications consulted.					
5.	Ability to respond to questions on the paper / subject					
6.	Audio – Visual aids used.					
7.	Ability to defend the paper.					
8.	Clarity of presentation.					
9.	Any other observation.					
<b>Total Score</b>						

**ANEXURE – II -- MODEL CHECKLIST**  
**FOR EVALUATION OF SEMINAR PRESENTATIONS.**

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Name of the Trainee :					Date :	
Name of the Faculty / Observer :						
Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Completeness & Preparation.					
2.	Clarity of presentation.					
3.	Understanding of subject.					
4.	Whether other relevant publications consulted.					
5.	Whether cross-references have been consulted.					
6.	Ability to answer the questions.					
7.	Time scheduling.					
8.	Appropriate use of audio – visual aids.					
9.	Overall performance.					
10.	Any other observation.					
<b>Total Score</b>						

**ANEXURE – III -- MODEL CHECKLIST**  
**FOR EVALUATION OF CLINICAL WORK IN OUTPATIENT DEPARTMENT**  
(To be completed once a month by unit head including posting in other department).

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Name of the Trainee :						Date :	
Name of the Unit Head :							
Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4	
1.	Regularity of attendance.						
2.	Punctuality.						
3.	Interaction with colleagues and supportive staff.						
4.	Maintenance of case records.						
5.	Presentation of cases.						
6.	Investigations work up.						
7.	Chair-side manners.						
8.	Rapport with patients.						
9.	Over all quality of clinical work.						
10.	Any other observation.						
<b>Total Score</b>							

**ANEXURE – IV -- MODEL CHECKLIST OF CLINICAL CASE PRESENTATION**

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Name of the Trainee :						Date :	
Name of the Faculty / Observer :							
Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4	
1.	Completeness of history.						
2.	Whether all relevant points elicited.						
3.	Clarity of presentation						
4.	Logical order.						
5.	Mentioned all positive and negative points						
6.	Accuracy of general physical examination.						
7.	Diagnosis: Whether it follows logically from history and findings.						
8.	Investigations required. Complete list. Relevant order. Interpretation of investigations						
9.	Ability to react to questioning Whether it follows logically from history and finding						
10.	Ability to defend diagnosis						
11.	Ability to justify differential diagnosis.						
12.	Others						
<b>Total Score</b>							

*Please use a separate sheet for each faculty member.*

## **ANEXURE –V--MODEL CHECKLIST FOR EVALUATION OF TEACHING SKILL**

Name of the Trainee :					Date :	
Name of the Faculty / Observer :						
Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Communication of the purpose of the talk					
2.	Evokes audience interest in the subject					
3.	The introduction.					
4.	The sequence of ideas.					
5.	The use of practical examples and / or illustrations.					
6.	Speaking style (enjoyable, monotonous, etc. specify).					
7.	Attempts audience participation.					
8.	Summary of the main points at the end.					
9.	Asks questions.					
10.	Answers questions asked by the audience.					
11.	Rapport of speaker with his audience.					
12.	Effectiveness of the talk.					
13.	Uses audio-visual aids appropriately.					
14.	Any other observation.					
	<b>Total Score</b>					

*Please use a separate sheet for each faculty member.*

## **ANEXURE – VI - MODEL CHECKLIST FOR DISSERTATION PRESENTATION**

Name of the Trainee :					Date :	
Name of the Faculty / Observer :						
Sl. No.	Points To Be Considered	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Interest shown in selecting topic.					
2.	Appropriate review.					
3.	Discussion with guide and other faculty.					
4.	Quality of protocol.					
5.	Preparation of proforma					
	<b>Total Score</b>					

**ANEXURE – VII -- MODEL CONTINUOUS EVALUATION  
OF DISSERTATION WORK BY GUIDE / CO-GUIDE**

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Name of the Trainee :					Date :	
Name of the Faculty / Observer :						
Sl. No.	Items For Observation During Presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Periodic consultation with guide / coguide.					
2.	Regular collection of case material					
3.	Depth of analysis / discussion.					
4.	Quality of final output.					
5.	Others					
<b>Total Score</b>						

**ANEXURE – VIII -- MODEL OVERALL ASSESSMENT SHEET**

Name of the Trainee :		Date :
Sl. No.	Name of Faculty	Mean Score
1.		
2.		
3.		
4.		
5.		
	<b>Total Score</b>	

Signature of Head of the Department

Signature of Principal / Dean

*Note: The overall assessment sheet used along with the logbook shall form the basis for certifying satisfactory completion of course of study, in addition to the attendance required.*

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