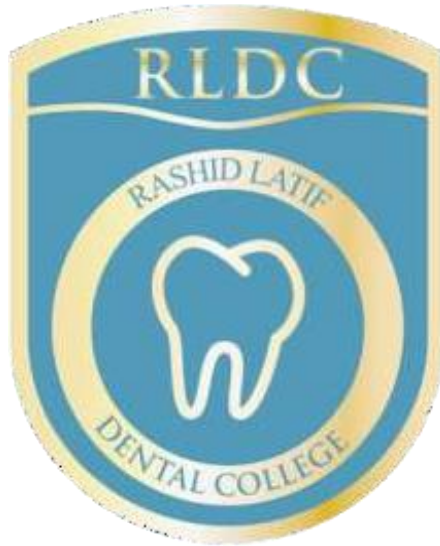




Rashid Latif Dental College
Department Of Oral Medicine
3rd Year BDS
Study Guide



RASHID LATIF DENTAL COLLEGE

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RASHID LATIF DENTAL COLLEGE

Mission & Vision

MISSION:

To educate dental students with the knowledge, clinical skills, and professional values required to address oral health needs while fostering ethical and patient-centered practice.

VISION:

To prepare competent dental professionals through hands-on clinical training, structured teaching standards, and ethical patient care.



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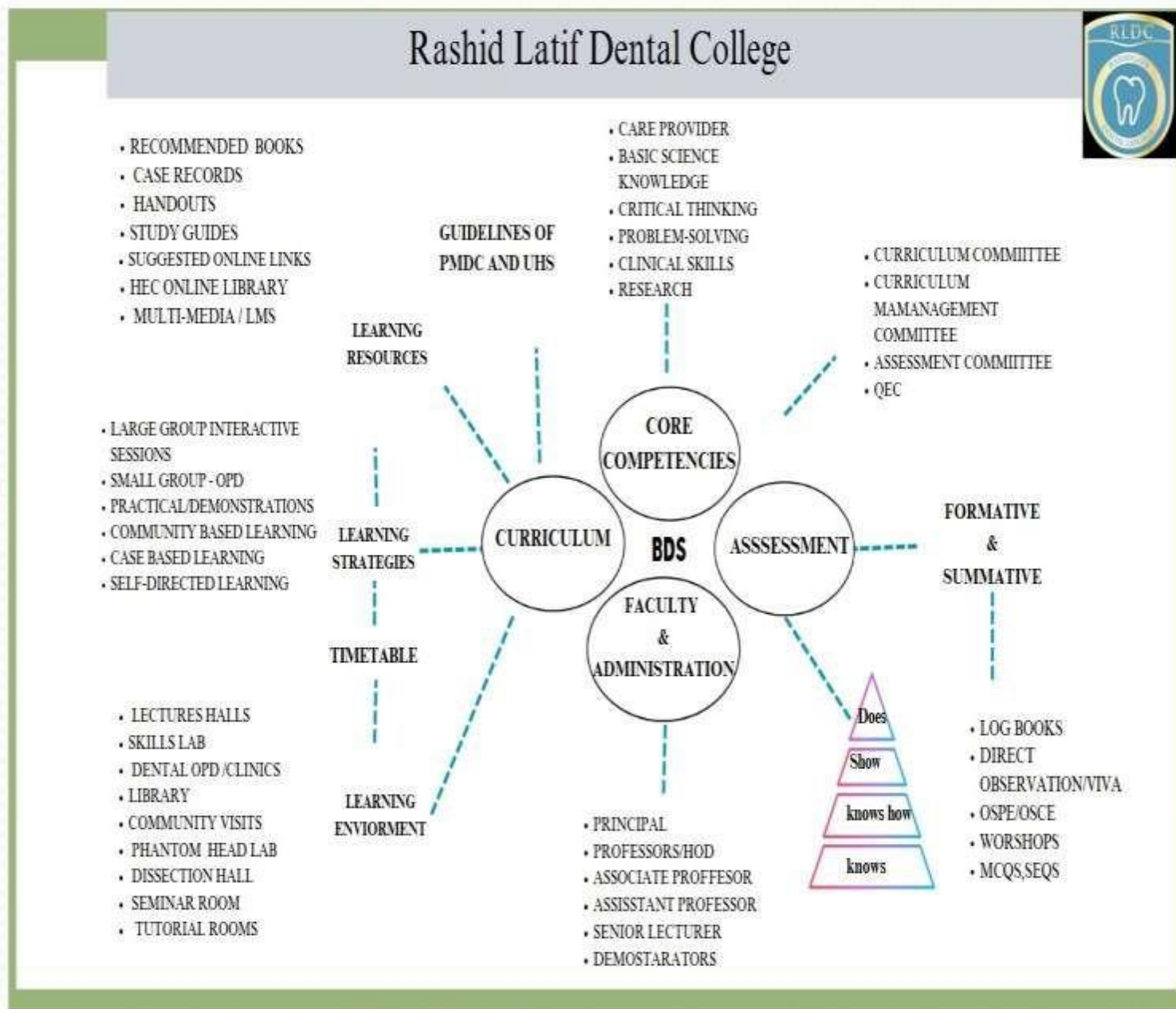
CURRICULUM DETAILS CURRICULAR FRAMEWORK (PMDC)

BDS			
Basic Dental Sciences / Preclinical Year		Clinical Dental Sciences / Clinical Years	
1st Professional Year	2nd Professional Year	3rd Professional Year	4th Professional Year
Anatomy	General Pathology	General Medicine	Operative Dentistry
Physiology	Pharmacology	General Surgery	Prosthodontics
Oral biology	Science of Dental Materials	Oral Pathology	Orthodontics
Biochemistry	Community Dentistry	Oral Medicine	Oral & Maxillofacial Surgery
Islamiyat & P. Studies	Preclinical Operative Dentistry	Periodontology	Pediatric Dentistry
	Pre-clinical Prosthodontics	Clinical Operative	General Education (Research, ICT)
	General Education (Behavioral Sciences, Research, ICT)	Clinical Prosthodontics	
		Clinical Oral & Maxillofacial Surgery	
		General Education (Research, Humanities, ICT)	
1200 hours	1200 hours	1200 hours	1200 hours



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BDS CURRICULUM





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ACADEMIC AND ASSESSMENT FRAMEWORK OF RLDC

Academic Year	PMDC Credit Hours	Educational strategies	Learning Outcomes	Assessment	Yearly Session			Sendup	UHS Professional Examination	Internal Assessment 20%
					Block 1	Block 2	Block 3			
1 st Year	1200	• CBL • Assignments • Chairside Teachings • Practical's • SDL	Knowledge	Cognitive: MCQ, SEQ, VIVA	Anatomy +Physiology+ Oral Biology+ Biochemistry+ Islamic/Pak Studies+ Research			MCQ+SEQ, OSPE/OSCE+VIVA	MCQ+SEQ, OSPE/OSCE+VIVA	Continuous Assessment (Class Test+ Mock Exams, Assignments+ Attitudes) Block Result+ Attendance
2 nd Year			Competence	Psychomotor OSPE OSCE Practical Logbook	Dental Materials+ Pharmacology+ General Pathology+ Community Dentistry+ Behavior Sciences+ Pre Operative +Pre Prosthetics+ Research					
3 rd Year			Behavior	Affective: OSCE Viva Logbook	Oral Pathology+ Oral Medicine+ Periodontology+ General Medicine+ General Surgery+ Research Operative Dentistry+ Prosthodontics+ Oral and Maxillofacial Surgery					
Final Year					Operative Dentistry+ Prosthodontics+ Oral and Maxillofacial Surgery+ Orthodontics+ Research					

Timetable= Course Duration:4 years

Timings: 8:00am to 3:00pm

Venue: Lecture Halls, Dental Clinics, Clinical Wards, Phantom Heads.

Learning Resources: Text Books, Study Models, Case Records, Histology Sleds, Dental Materials and Dental Instruments, Study Guide, Google Classes.



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PROPOSED TIMETABLE FOR 3RD YEAR BDS

DAY/TIME	3 rd Year BDS						Week
	08:00 am-09:00 am	09:00 am-10:00 am	10:00 am-11:00 am	11:00m 11:30am	11:30 am-12:30 pm	12:30 pm-01:30 pm	01:30 pm-03.00 pm
MONDAY	<u>Lecture Oral Medicine</u>	<u>Lecture Oral Pathology</u>	<u>Lecture Periodontology</u>	B R E A K	<u>Dental Clinical Rotation Clinical In Batches</u>		
TUESDAY	<u>Lecture Oral Pathology</u>	<u>Lecture General Medicine</u>	<u>Lecture General Surgery</u>		<u>Clinical Wards</u>		
WEDNESDAY	<u>Test Oral Pathology</u>		<u>Lecture Oral Medicine</u>		11:30am12:30pm		12:30 pm-03:00 pm
					<u>Lecture Oral Pathology</u>	<u>Dental Clinical Rotation</u>	
THURSDAY	<u>Lecture General Medicine</u>	<u>Lecture Periodontology</u>	<u>Lecture General Surgery</u>		<u>Clinical Wards In Batches</u>		
	08:00am-9:00am	09:00am-10:00am	10:00am-11:00am	11:00m- 11:15m	11:15 am-02:15 pm		02:15pm-03.00pm
FRIDAY	<u>Lecture Periodontology</u>	<u>SGD/Practical Oral Pathology</u>	<u>Lecture Operative Dentistry</u>	B R E A K	<u>Dental Clinical Rotation Clinical In Batches</u>		Jumma Prayer Break



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FACULTY INVOLVED IN TEACHING 3RD YEAR BDS

Department	Designation	Name of Faculty
General Medicine	HOD	Prof. Dr. Anjum Rasheed Butt
	Associate Professor	Dr. Mohsin Masud
	Assistant Professor	Dr. Hafiz Muhammd Irfan
	Junior Registrar/Trainee Registrar	Dr. Sher Nawab
General Surgery	Head Of Department	Prof. Dr. Ahsan Khan
	Junior Registrar/Trainee Registrar	Dr. Iqra Javed
Oral Pathology	Associate Prof	Dr. Asifa Iqbal
	Assistant Professor	Dr. Shahrayne Rashid
	Demonstrators	Dr. Muhammad Talha Dr. Abdul Razzaq
Periodontology	Assistant Professor	Dr. Moeez Ansari
	Demonstrators	Dr. Zia Ud Din Dr. Usama
Oral Medicine	HOD	Prof. Dr. Muhammad Shairaz Sadiq
	Assistant Professor	Dr. Zain Akram
Operative Dentistry (Pre-Clinical)	HOD	Prof. Dr. Hanna Abdul Majeed
	Assistant Professor	Dr. Mahrukh Anwar
	Specialist Registrar	Dr. Qura Tul Ain Manzoor
	Demonstrators	Dr. Huzaifa Munawar Dr. Zahra Malik
Oral Surgery (Pre-Clinical)	Associate Professor	Dr. Saadia Manzar
	Assistant Professor	Dr. Minam Qureshi
		Dr. Ahmad Abdul Haseeb
	Specialist Registrar	Dr. Muhammad Bilal Basit
	Demonstrators	Dr. Muhammad Shahroz Ali Dr. Muhammad Tazeem ul Husnain



RASHID LATIF DENTAL COLLEGE

Teaching Methodologies

Sr.#	Pedagogical Methodologies	
1.	Lectures	The traditional method is where an instructor presents information to a large group of students (large group teaching).
2.	Tutorial	Tutorials involve small group discussions (SGD) where students receive focused instruction and guidance on specific topics.
3.	Practical's	Hands-on sessions where students apply theoretical knowledge to real-world tasks. This might include lab work, clinical procedures, or simulations.
4.	Community-based Learning	RLDC provides the environment and training that would enable professionals to successfully contribute to the improvement of the health sector, particularly in less privileged communities
5.	Student Presentations & Assignment	Students prepare and deliver presentations on assigned topics. Tasks given to students to complete outside of class. Assignments can include research papers, case studies, or practical reports.
6.	Self-directed Learning	Students take initiative and responsibility for their learning process. Students are encouraged to seek resources, set goals, and evaluate their progress. This is a learner-centered approach where students take the initiative to plan, execute, and assess their learning activities.
7.	Case-based Learning (CBL)	A structured form of small group learning where students work in teams on application-based tasks and problems. Teams are responsible for achieving learning objectives through collaborative efforts, promoting accountability, and deeper understanding of the material.
8.	Problem-based Learning (PBL)	Students work on complex, real-world problems without predefined solutions. They research, discuss, and apply knowledge to develop solutions. PBL fosters critical thinking, problem-solving skills, and the ability to integrate knowledge from various disciplines.



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www.pmdc.pk

PAKISTAN
MEDICAL & DENTAL COUNCIL
G-10/4, MAUVE AREA
ISLAMABAD
Tel: (92 51) 9190000

PF-1-C-PM&DC/Notification/2025/911

3rd November 2025

NOTIFICATION

SUBJECT: CLARIFICATION REGARDING MINIMUM PASSING PERCENTAGE AND ATTENDANCE REQUIREMENTS IN MBBS / BDS PROGRAMS

The Council, in its meeting held on 21st October 2025, deliberated on the matter concerning the minimum passing percentage in annual professional MBBS and BDS examinations, along with feedback received from universities, comments from medical and dental colleges, and representations and petitions submitted by students and parents regarding the retrospective enforcement of revised benchmarks during the ongoing academic session (2024–25).

After detailed consideration, the Council resolved that there shall be no retrospective enforcement of revised attendance or passing mark requirements. Students already enrolled up to and including the academic session 2024–25 shall continue under the previously applicable criteria, namely 50% minimum passing marks and 75% minimum attendance, as stipulated at the time of their admission or enrolment in MBBS or BDS programs.

For future admissions, a proposed increase of 5% each in both attendance and passing mark requirements shall be reviewed in consultation with universities, medical educationists, and other relevant stakeholders. The finalized criteria will be communicated in due course.

This notification is issued in compliance with the decision of the PM&DC Council and supersedes earlier Notifications dated 31st January 2025, 10th February 2025, and 15th April 2025 on the same subject. All medical and dental institutions and their affiliated universities are directed to ensure strict compliance with the above.

Deputy Registrar
Head of Council Department

Distribution:

- PM&DC Recognized Medical / Dental Colleges (All)
- Affiliating / Admitting Universities (All)
- Regional / Provincial Health Departments
- Head of IT Department PM&DC, Islamabad
- P S to Secretary M/o NHC&C Islamabad



RASHID LATIF DENTAL COLLEGE



UNIVERSITY OF HEALTH SCIENCES LAHORE

Khayaban-e-Zamir Punjab, Lahore - Pakistan. Website: www.uhs.edu.pk
Ph: 99231304-9 Fax: 9923070-0401 111 31 13 66

NOTIFICATION

Syndicate, in its 93rd meeting held on 4th November 2025, approved the adoption and implementation of the PM&DC Notification No. PF-1-C-PM&DC/Notification/2025/911 dated 03-11-2025, with the following provisions:

- I. Students already enrolled up to and including the academic session 2024-2025 shall continue under the previously applicable criteria, namely 50% minimum passing marks and 75% minimum attendance, as stipulated at the time of their admission or enrollment in MBBS or BDS program.
- II. However, the policy for assessment, for the session 2025-2026, will be notify separately.
- III. The minimum number of marks required to pass the professional examination for each subject/paper shall be fifty percent (50%) in 'Theory' and fifty percent (50%) in the 'Oral/Practical/Clinical' components of the examination and fifty percent (50%) in aggregate, independently, and concomitantly.
- IV. To become eligible to appear in the professional examinations conducted by the university the candidates shall be required having attended not less than cumulative 75% of the full course of lectures delivered and practical/clinical classes conducted in the particular academic session, as well as in the individual block/semester for the Modular Integrated Curriculum/Semester scheme of studies.
- V. The above criteria shall also be applicable to all undergraduate degree programs of the university, on parity basis.

This is in supersession of this office Notification No. UHS/REG-25/1121 dated 21-05-2025.

REGISTRAR

No. UHS/REG-25/2351

Dated: 13-11-2025

Copy forwarded for information to:

- i. Principals/Heads of all the constituent & affiliated undergraduate colleges/Institutions of UHS
- ii. Director, Institute of Allied Health Sciences, UHS
- iii. Head, College of Pharmacy, UHS
- iv. Head, Institute of Nursing, UHS
- v. Controller of Examinations, UHS
- vi. Treasurer, UHS
- vii. Director, Directorate of Undergraduate Studies, UHS
- viii. Director Students' Affairs, UHS
- ix. Additional Registrar (Registration), UHS
- x. PSO to Vice Chancellor
- xi. PS to Pro-Vice Chancellor
- xii. PS to Registrar

Shahida Fatima
REGISTRAR



RASHID LATIF DENTAL COLLEGE



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Fax: +92 49 2451099 Website: www.rlmc.edu.pk

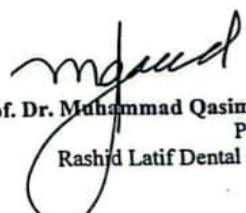
Ref No. RLDC/037725

1st December, 2025

Notification

This is to inform the faculty that the following distribution of marks has been proposed for Internal Assessment criteria of UHS for Oral Medicine. The following matter shall be discussed in the upcoming assessment meetings of the respective classes. A total of 10 marks (10% of the overall 100 marks) have been allocated to Internal Assessment for each block, distributed as follows:

- Attendance (Theory + Practical): (25%) → 2.5 marks
- Formative Assessment:
 - 1) (Class Test) : (25%) → 2.5 marks
 - 2) (Block Examination): (25%) → 2.5 marks
- Log Books/ Practical Note Books/ Assignments/ Attitude: (25%) → 2.5 marks


Prof. Dr. Muhammad Qasim Saeed
Principal
Rashid Latif Dental College

C.C:
Vice Principal, RLMC
Director Medical Education
All HODs & Conveners of 2nd Year – Final Year BDS
Office Copy



RASHID LATIF DENTAL COLLEGE

INTRODUCTION TO STUDY GUIDE

This study guidebook has been thoughtfully developed for dental undergraduates through the collaborative efforts of faculty across all disciplines. It serves as a valuable resource for the students of Rashid Latif Dental College, emphasizing key aspects of the curriculum. The guide aims to foster self-regulated learning by empowering students to take ownership of their academic journey.

Entering dental college marks the beginning of a new academic chapter, and this guide has been carefully crafted to support students through this transitional phase. It encompasses undergraduate competencies, assessment policies, and curriculum coordination, all systematically mapped within this guidebook.

The study guide provides a comprehensive overview of the intended course outcomes and objectives in alignment with the course content. It outlines the institution's tailored assessment methodologies, offering students a clear understanding of the strategies used to evaluate their progress.



RASHID LATIF DENTAL COLLEGE

DEPARTMENT & SUBJECT OVERVIEW

HEAD OF DEPARTMENT

PROF. DR. MUHAMMAD SHAIRAZ SADIQ

The primary aim of this department is to educate students using a modern scientific approach to dentistry and co-relate basic medical and dental education with clinical merit. Its mission is to cultivate an environment that encourages intellectual growth, critical thinking, creativity, and problem-solving skills that can help in diagnosing basic dental and oral diseases and help to create a differential diagnosis in moderately difficult conditions of the body leading to oral manifestations. This ensures students develop into knowledgeable, innovative, and forward-thinking members of the dental community.

The department is dedicated to fostering a supportive atmosphere for scholarly and creative endeavors, enabling the discovery and creation of new knowledge or solutions to contemporary challenges. By equipping students with the latest advancements and techniques in the dental field, the department prepares them to excel in their professional roles and contribute meaningfully to the advancement of dentistry. This also prepares future leaders for a better clinical approach to diagnosing and treating medically complex patients.



RASHID LATIF DENTAL COLLEGE

PROGRAM	BDS			
COURSE TITLE	Oral Medicine			
ACADEMIC CALENDER	3 rd Year BDS			
INTRODUCTION	Oral medicine is the discipline of dentistry concerned with the oral health. Diagnosis and management of medical conditions that affect the oral and maxillofacial region such as; orofacial pain, oral manifestations of systemic diseases, salivary gland disorders, and the management of medically compromised patients with oral health issues by non-surgical treatments			
RATIONALE	Accurate diagnosis is the first step of a successful treatment, so incorporating the skill of making an accurate diagnosis is very necessary for dental graduates before going into the final year and subsequently into their own clinical practices.			
OUTCOMES	By the end of year 3, BDS students will be able to diagnose and differentiate oral health conditions and problems associated with head and neck region, orofacial pain, oral manifestations of systemic conditions and diseases, salivary gland disorders and oral health issues and treat all such conditions by non-surgical treatments			
BLOCK 1	TOPICS	LEARNING OUTCOME	PRACTICALS	REFERENCE
	The oral mucosa, principles of Oral Medicine and therapy	1. Discuss normal oral mucosa • Structure • Function • Age changes 2. Discuss abnormal mucosa 3. Oral mucosa in generalized disease 3. Periodontium in generalized disease 4. Introduction to specialty of Oral Medicine 5. Patient assessment History taking Examination Cranial nerve examination of all 12 cranial nerves, with emphasis on CN V and VII 3. Investigation List the investigations related to: Basic Hematology Conventional Radiology Histopathology & Microbiology Endocrine function Urinalysis a. Basic and special imaging	2	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher



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		b. Special lab investigations including biopsy Define biopsy, its types and indications. 4. Diagnosis Outline the steps of diagnostic triage. Discuss how to form a diagnosis 5. Discuss principles of therapy a. Covering agents b. Topical antiseptics c. Topical analgesics e. Topical antibiotics f. Topical steroids Discuss creams and ointments 6. Treatment planning a. Outline the steps for making of appropriate management plan b. Discuss systemic therapy c. systemic corticosteroids d. Systemic immunosuppressants f. Azathioprine g. Other systemic drugs used in Oral Medicine h. Discuss limitations of therapy 7. Prescription Writing Referral letter & consent A. Discuss the components and formulation of Prescription writing. B. Discuss the formulation and importance of referral letters C. Discuss consent, its types and importance		
	Oral ulceration	1. Classification A. Classify Oral Ulcerative lesions based on etiology 2. Non-vesiculobullous conditions	4	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry,



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		1. Define oral ulcers 2. Classify oral ulcers on the basis of etiology. 3. Describe etiology, clinical features and management options for: a. Traumatic ulcer: b. Recurrent Aphthous Stomatitis: c. Minor Aphthous Ulcer d. Major Aphthous Ulcers e. Herpetiform ulcers 4. Distinguish between Minor, Major and Herpetiform ulcers on the basis of their clinical features, histopathology. 5. Describe and discuss systemic conditions and RAS like conditions 6. Define Behcet's Disease. 7. List clinical features and management options of Behcet's disease 8. Explain the diagnostic criteria for Behcet's Disease 9. Enumerate and differentiate between other conditions presenting with RAS-like ulcers including cyclic neutropenia, MAGIC syndrome, PFAPA etc.		Crispian Scully 5th Edition or higher
	Infections of the gingiva and oral mucosa	1. Bacterial Infections a. Describe the signs, symptoms and clinical features of bacterial infections of the oro-facial region, e.g. b. Odontogenic infections (Abscess, Cellulitis, Ludwig's Angina) c. Actinomycosis d. Syphilis e. Tuberculosis f. Acute Necrotizing Ulcerative Gingivitis g. Noma A. non-specific urethritis	6	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher



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		Gonorrhea B. Justify relevant investigations required for diagnosis of above-mentioned bacterial infection C. Discuss the management plan along with choice of antibiotic therapy of above-mentioned bacterial infection 2. Viral Infections A. Describe the signs, symptoms and clinical features of viral infections of the oro-facial region listed below: A. Herpes simplex virus B. Varicella zoster virus C. Coxsackie virus D. Epstein Barr virus E. Cytomegalovirus F. Paramyxovirus infections G. Human papilloma virus H. Human immune deficiency virus a. Justify relevant investigations required for diagnosis of above-mentioned infections b. Discuss the management with choice of antiviral therapy. 3. Fungal Infections a. Classify oral candidiasis b. Classify deep fungal mycoses c. Describe the signs, symptoms and clinical features of fungal infections of the orofacial region d. Justify relevant investigations required for diagnosis of Oral Candidiasis Discuss the management with choice of antifungal therapy		
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	Inflammatory overgrowths in the oral cavity	1. Inflammatory overgrowths a. Epulides b. Fibroepithelial polyp c. Denture granuloma d. Focal epithelial hyperplasia (Heck's disease) 2. Developmental lesions a. Hamartomas b. Developmental white lesions 1. Benign neoplasms 2. Squamous cell papilloma 3. Miscellaneous benign conditions a. Traumatic keratosis b. Nicotinic stomatitis c. Leukoedema 2. Pigmentation of the oral mucosa a. Amalgam tattoos b. Melanotic pigmentation c. Oral melanoma\	2	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher
	Disorders of teeth and bone	1. Disorders of teeth a. Hypodontia b. Variation in eruption c. Variation in size of teeth d. non-carious tooth surface loss e. Discoloration of teeth f. Disturbances of structure and enamel and dentine 2. Disorders of bone a. Inherited and developmental disturbances b. Metabolic and endocrine disturbances c. Disorders of unknown aetiology Paget's disease	1	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher
BLOCK 2	TOPICS	LEARNING OUTCOME	PRACTICALS	REFERENCE
	Oral manifestations of systemic disease (GIT)	1. Coeliac disease (Gluten sensitive enteropathy) a. Oral manifestations of coeliac disease b. Inflammatory bowel disease	2	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry,



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		a. Crohn's disease b. Oral Crohn's disease c. Orofacial granulomatosis d. Ulcerative colitis e. Stomatitis and inflammatory bowel disease 1. Gastro-oesophageal reflux disease (GERD)		Crispian Scully 5th Edition or higher
	Pigmentation +developmental and benign lesions of the oral mucosa	1. Inflammatory overgrowths a. Epulides b. Fibroepithelial polyp c. Denture granuloma d. Focal epithelial hyperplasia (Heck's disease) 2. Developmental lesions a. Hamartomas b. Developmental white lesions 1. Benign neoplasms 2. Squamous cell papilloma 3. Miscellaneous benign conditions a. Traumatic keratosis b. Nicotinic stomatitis c. Leukoedema 1. Pigmentation of the oral mucosa a. Amalgam tattoos b. Melanotic pigmentation b. Oral melanoma	2	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher
	Precancerous lesions and conditions. Oral carcinoma and carcinogenesis	1. Precancerous lesions a. Leukoplakia b. Erythroleukoplakia c. Speckled leukoplakia d. Candidal leukoplakia (Chronic hyperplastic candidiasis) a. Malignant transformation of precancerous lesions b. Management of precancerous lesions 2. Precancerous conditions a. Oral submucous fibrosis (OSF) b. Sideropenia dysphagia c. Lichen planus	5	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher



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		d. Other precancerous conditions of the oral cavity 3.Oral carcinoma and carcinogenesis a. A etiological factors for oral squamous cell carcinoma (OSCC) b. Clinical features and diagnosis of oral carcinoma c. Staging systems of OSCC d. Management of OSCC e. Prevention of OSCC d. Oral carcinoma as a genetic disease		
	Salivary glands and saliva, swellings of the face and neck	1. Discuss saliva and salivary glands 2. Classify diseases of salivary gland on the basis of: Functional disorders Obstructive disorders 1. Define Ptyalism and Xerostomia. 2. List causes and treatment options of Ptyalism and Xerostomia 2. Discuss etiology, clinical features, diagnostic criteria and treatment options for Sialolithiasis 3. Infections(sialadenitis) a. Discuss the risk factors for salivary gland infections. b. Discuss assessment tools used in salivary gland examination c. Measurement of salivary flow rate d. Salivary gland imaging e. Sialo chemistry f. Biopsy 4. Discuss clinical features, etiology, investigation and management options for: a. Acute Bacterial Sialadenitis. b. Suppurative parotitis.	5	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher



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		c. Chronic sialadenitis a. Viral sialadenitis b. Sialosis c. Necrotizing metaplasia d. Sarcoidosis e. HIV disease and salivary glands f. Salivary gland tumors		
	Oral manifestations of systemic disease (Renal)	1. Renal disease a. Chronic renal failure b. Renal patients undergoing dialysis c. Renal transplant patients d. Drug consideration in renal compromise	2	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher
BLOCK 3	TOPICS	LEARNING OUTCOME	PRACTICALS	REFERENCE
	Immunodeficiency, hypersensitivity and autoimmunity	1. Immunodeficiency 2. Hypersensitivity 3. Angioedema 4. C-1 esterase inhibitor deficiency 5. Autoimmunity 6. Oral reactions to drug therapy a. Spectrum of adverse reactions b. Oral reactions to antibiotics c. Oral reactions to steroids d. Drug therapy and periodontal tissues e. Fixed drug eruptions	2	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher
	Mucocutaneous disease and connective tissue disorders	1. Mucocutaneous disease 2. Lichen planus and lichenoid reactions 3. Immunobullous diseases a. Pemphigus b. Pemphigoid c. Dermatitis herpetiformis d. Linear IgA disease e. Epidermolysis bullosa f. Erythema multiforme	6	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher



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		g. Idiopathic oral blood-filled blisters (angina bullosa hemorrhagic) 4. Connective tissue disease a. Lupus erythematosus b. Morphea and systemic sclerosis c. Mixed connective tissue disease		
	Oral manifestations of systemic disease (Hematological disorder)	1. Disorders of the blood a. Anemias b. Oral signs and symptoms in anemia c. Management of patients with anemias and hematinic deficiencies d. Leukemia e. Leukopenia f. Myelodysplastic syndrome g. Platelet abnormalities h. The selection of patients for hematological examination 2. Disorders of nutrition a. Nutritional deficiencies 3. Scurvy	4	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher
	Medical emergencies in the dental practice and oral reactions to drug therapy	1. The prevalence of medical emergencies 2. Prevention of medical emergencies 3. Administration of drugs 4. Routes of administration of drugs 5. Emergency drugs and equipment 6. Management of emergencies	4	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher
	Facial pain and neurological disorders. Psychogenic orofacial problems	1. Classify Oro-facial pain on the basis of its etiology. 2. Explain the etiological factors, clinical features, Investigation and management options of following: a. Trigeminal neuralgia. b. Atypical facial pain. c. Post herpetic neuralgia.	4	Tyldesley's Oral Medicine 5th Edition Medical Problems in Dentistry, Crispian Scully 5th Edition or higher



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		D. Glossopharyngeal neuralgia E. Neuropathic pain secondary to other conditions f. Chronic orofacial pain. g. Migraine h. Cluster headache l. Giant cell Arthritis. j. Tension type headache 3. Burning Mouth syndrome 4. Distinguish trigeminal neuralgia and post herpetic neuralgia. 5. Discuss tension type headache 6. Distinguish between Migraine, cluster headache on the basis of their features, etiology and management options. 7. Facial Palsy Discuss the causes of Facial palsy Describe diagnosis and management of Bell's palsy Discuss the syndromes related to facial palsy 8. Refer patients presenting with Bell's palsy requiring complex treatment following the recommended guidelines 9. Neurological disturbances a. Facial nerve deficits b. Anesthesia and paranesthesia c. Multiple sclerosis d. Extrapyrarnidal symptoms and syndromes		
INTERNAL ASSESSMENT	10% (Pre-professional Examination, Midterm Examination, Assignments and Class Presentations, Clinical Logbooks)			
ANNUAL EXAMINATION	90% (MCQS, OSCE)			
COURSE EVALUATION	This course will be evaluated as per UHS&HEC policies			



RASHID LATIF DENTAL COLLEGE

ASSESSMENT GUIDELINES

- Assessment in dental education is a critical component designed to ensure dental students acquire the necessary knowledge, skills, and competencies for effective dental practice.
- Written examinations, including multiple-choice and essay questions, will test your grasp of theoretical concepts and subject matter.
- Practical assessments will require you to demonstrate your clinical skills and ability to apply knowledge in real-world scenarios.
- Oral exams will evaluate your communication and reasoning skills through case discussions and problem-solving exercises.

As per the UHS policy, students failing to fulfill the assessment criteria will result in withholding of their admissions for the professional exam.

ASSESSMENT METHODS

- MCQs (Multiple Choice Questions)
- SEQ
- Objective Structured Practical/Clinical Examination (OSPE or OSCE)
There is a policy of ongoing or formative assessment of all students and summative assessment during the academic year.
- Formative or ongoing assessment: Formative assessment will be done as class tests every week, assignments, projects, etc.
- Summative Assessment: • The end-of-block test comprises the OSCE or OSPE examination
- Viva voce exam.
- Written theory examination. The written examination has 2 parts: an MCQ and a short answer or short essay-type examination.
10% MARKS of internal assessment will be calculated from each end-of-block exam and overall yearly performance

ATTENDANCE POLICY FOR STUDENTS

- UHS rules for eligibility in annual examinations.
- The minimum attendance requirement is 75%: attendance is for lectures, clinics, CBLs, Tutorials, presentations, etc. This attendance is not simply for lectures.
- Every teaching session is essential. You are expected to have at least 75% attendance in all subjects individually to be allowed to appear in the professional examinations.
- Lecture Attendance is marked at the start of the class. Students who come more than 10 minutes late will be marked absent.
- The attendance is entered into the spreadsheet, and no corrections will be made later than 24 hours with the principal's permission as the system is locked.



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ASSESSMENT CRITERIA OF RASHID LATIF DENTAL COLLEGE

Minimum Attendance Requirement:

As per University of Health Science set criteria Students are required to maintain at least 75% of attendance in theory as well as practical /clinical sessions of each subject.

Eligibility Criteria:

Students fail to meet the minimum attendance will not be allowed to appear for UHS exam.

Attendance Tracking:

Daily Records: Attendance is marked daily for each subject.

Monthly Reviews: Attendance reports are generated and shared with students on

Digital Tracking:

Campus Management System (CMS) is real time attendance monitoring of Dental College.

Leave Policy:

Medical Leave: Permitted upon submission of valid medical certificate, subject to approval.

Attendance Policy for students appearing in supplementary exams

- Only students who have appeared in professional examinations can appear in supplementary examinations.
- Students who were not eligible for the annual exam will not be eligible for the supplementary exam, without completing their attendance requirements.
- Those students who do not attend classes will be marked absent, may face a shortage of attendance and will be asked to repeat the year.

SCOPE:

- These SOPs apply to all students whose admission has been withheld by the college or who are required to sit for supplementary exams.
- The academic office will officially notify students about their status, including the need to attend remedial classes.
- Attendance in remedial tests for the respective subject is mandatory to ensure readiness for the supplementary exam.



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ATTENDANCE REQUIREMENTS

- Students must maintain at least **75% attendance** in all classes for the new academic year of the following class.
- A 20-day leave will be granted following the issuance of the UHS supplementary exam date sheet to facilitate exam preparation.
- All students are required to resume regular classes immediately after completing their final practical exam, without waiting for the announcement of results.
- Attendance records will be meticulously maintained by course instructors and will undergo weekly reviews by the academic office

Support and guidance:

- The faculty will be available during scheduled consultation hours to provide support.

Time of Examination:

In one Academic year, a total of three exams are taken place at regular period of time. Block 1, Block 2 and Block 3 at regular intervals.

Pass criteria:

Students must gain at least 50% marks in theory and in Practical /Clinical assessment in each Block to mark as Pass.

Promotion criteria:

Promotion to the next class will only be considered if,

- PMDC criteria have been fulfilled
- Disciplinary rules are being followed
- Required attendance in the class has been documented.
- Students who attend less than 75% of class **will not** be allowed to appear in the examination.



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STUDENT CONDUCT RULES

These rules apply to all students who are admitted to RLDC and include undergraduate and postgraduate students:

1. No student or group shall form a society/ association/ organization.
2. The student will invite no outsider to address any meeting at the college without seeking prior permission from the Principal of RLDC.
3. Students cannot paste posters, pamphlets, or fixed banners on the wall. Graffiti on walls (wall chalking) on the premises
4. During teaching hours, students are prohibited from roaming the premises. Staging, inciting, or participating in or abetting any walk-out, strike, or other form of agitation against students, teachers, or authorities; inciting others to violence; disrupting the peaceful atmosphere in any way is prohibited.
5. No students or groups of students shall arrange any program, Picnic, musical concert, or sports. Etc., on their own, without prior written permission from the authorities.
6. Coming late for classes. The student may be considered absent and marked accordingly.
7. Loud and aggressive behavior within college premises.
8. No student or group of students is allowed to collect money for any purpose whatsoever.
9. The college Identity Card (ID) should be displayed at all times when the students are on the premises of the college. Faculty members and security staff are authorized to check the ID—cards at any time.
10. Students are forbidden to address higher authorities directly. Any communication intended for higher authorities must be routed through the proper channel (Vice Chancellor / Principal / Dean /Director).
11. Students are expected to arrive in class well on time. All cell phones, smartphones, and other electronic devices (e.g. iPods) must be turned off. Talking and other disruptive behaviors are not permitted while classes are in session.
12. Smoking, pan chewing, littering, spitting, vaping, and other activities prejudicial to the conduct are prohibited on the college premises during and even after college hours. Any student caught with the following will be taken under the D.C. action.
13. Unless specifically permitted, no students or groups of students are allowed to enter the administrative department.
14. **POLICY ON DISCIPLINARY ACTION AGAINST THE USE OF UNFAIR MEANS**
Zero tolerance for cheating/use of unfair means is to be maintained during Examinations. A committee will consider all the unfair means in exams, leading to a fine and D.C. action.
15. **Policy for using mobile phone during exam:** Any student caught using a mobile phone during a test or examination will have the device immediately confiscated, and the student will not be allowed to continue the exam or remain in the examination room and the device



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will be returned only after the parents/guardians submit a written undertaking ensuring that such misconduct will not be repeated.

16. **Policy regarding the use of Vape:**

Any student caught using, possessing, or sharing vape devices on campus will be subject to disciplinary penalties, and a monetary fine will be levied in accordance with institutional regulations.

Punctuality:

If the students miss a class, they are responsible for the missed part of the course. There will be no relaxation for absent students. Please inform your parents of this and make your travel arrangements accordingly. Avoid taking leave for personal reasons like weddings during the academic year.

Dress code:

All students must wear white coats on campus (With a tag with their name) and decent shoes/sandals but no slippers; in case of default, they will not be allowed to enter, and disciplinary action will be taken.