DEPARTMENT OF OPERATIVE DENTISTRY

FINAL YEAR BDS LOG BOOK

RASHID LATIF DENTAL COLLEGE
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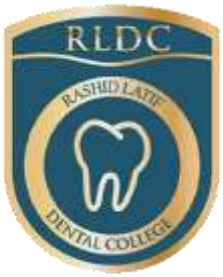

Dr. HANNA ABDUL MAJEED
BDS, FCPS
Professor Operative Dentistry
Course Director of Operative Dentistry and ENDODONTIC
Rashid Latif Dental College

"Empowering Your Quest for Dental Excellence"

Dear Students,

Welcome to this pivotal chapter in your BDS academic journey! I'm delighted to be your Course Director and guide you through the fundamentals of Pre-Clinical Operative Dentistry. This foundational phase is crucial for your future success, and I encourage you to embrace its challenges, ask questions, and let your curiosity fuel your learning. The preclinical skills you develop here will lay the groundwork for your transformation into exceptional dental professionals. Stay engaged, take an active role in your learning, and enjoy the process. I'm committed to supporting you every step of the way, so don't hesitate to reach out whenever you need guidance or assistance."

Best regards.

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Introduction
Operative and Pediatric Dentistry

Operative dentistry is the art and science of diagnosing, treating, and preventing tooth disease. It involves restoring teeth to their normal function, form, and appearance.

Description:
This program of instruction is meant to provide a detailed outlook of tooth anatomy while using phantom teeth and employing the previously learnt techniques on patients, upon supervision. Special emphasis is placed on GV black classification, Class I, Class II, III, IV and V cavity preparation on patients followed by rubber dam placement and amalgam fillings.

Pediatric Dentistry is a branch of dentistry focused on oral health of children from infancy to adolescence; it emphasizes prevention, early diagnosis and treatment of dental issues while promoting good oral hygiene habits.

Description:
Pediatric Dentistry is a theoretical and practical subject which involves clinically performing amalgam and composite restorations on deciduous teeth. Demonstrations of pulpectomies and pulpotomies are given followed by performing these procedures on patients, under supervision. Preventive resin restorations are performed and students are given demonstrations regarding stainless steel crown placement. Space maintenance protocol and extraction protocols are reinforced.

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Faculty Members

Serial No.	Faculty	Designation
1	Dr. Hanna Abdul Majeed	Professor
2	Dr. Mahrukh Anwar	Assistant Professor
3	Dr. Qurat-ul-ain Manzoor	Assistant Professor
4	Dr. Zahra Malik	Demonstrator
5	Dr. Huzaifa Munawar	Demonstrator
6	Dr. Zunnaira Saqi	Demonstrator

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CERTIFICATE 4th YEAR BDS

It is certified that Mr. / Miss:

_____

Son/ Daughter of:

_____

Has completed following tasks related to Operative Dentistry in 4th year BDS from _____ to _____

1. **Instrument identification** ☐
2. **Rubber Dam Application** ☐
3. **Pits and Fissure Sealant** ☐
4. **Class I Amalgam Restoration** ☐
5. **Class II Amalgam Restoration** ☐
6. **Class III Tooth Colored Restoration** ☐

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7. **Class IV Tooth Colored Restoration** ☐
8. **Class V Tooth Colored Restoration** ☐
9. **Class VI Tooth Colored Restoration** ☐
10. **Restoration of endodontically treated teeth** ☐
11. **Direct and Indirect Pulp Cap** ☐
12. **Inlay/Onlay Preparation** ☐
13. **Primary Tooth Filling** ☐
14. **Pulpotomy/ Pulpectomy** ☐
15. **Anterior/Posterior Root Canal Treatment** ☐
16. **PFM Crown Preparation** ☐
17. **Stainless Steel Crown** ☐

Head of Department
Operative Dentistry and Endodontics

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Instructions for Students

- Complete clinical assessment for 4th year BDS session will be done on this document.
- During the whole session of 4th year BDS, each student has to perform all the tasks demonstrated by the teachers during demonstrations.
- Students must have all the required instruments during the whole session.
- Students will be allotted supervisors for their clinical training.
- There will be regular practical tests during the whole session. These marks will be given appropriate weightage in the internal assessment.
- Logbook should be signed by their respective supervisors (faculty members) on daily basis.
- Attendance is mandatory (85%, as per UHS regulations). Student will be held responsible for the consequences, if failed to meet the above criteria.

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Armamentarium

1. **Hand Piece**
   - High speed hand piece
2. **Rubber Dam Kit**
3. **Examination Set**
   - Mouth Mirror
   - Dental Explorer
   - Tweezer
   - Periodontal probe
4. **Filling Set**
   - Caries Excavator
   - Gingival marginal trimmer
   - Enamel hatchet
   - Dycal applicator
   - Glass slab
   - Cement mixing spatula
   - Plastic Instrument
   - Mortar and pestle
   - Amalgam gun
   - Condenser (small and Medium)
   - Burnisher (ball shaped, egg shaped and anatomical)
   - Carver (Diamond shaped, Discoid-Cleoid and Hollen-Back carver)
5. **Retainers**
   - Tofflemire with matrix band

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6. **Burs**
    - No. 245, No. 330, No. 169L (Tungsten Carbide)
    - Round Diamond bur
    - Straight Fissure bur (small and medium)
    - Tapered fissure bur
    - Composite Finishing burs and polishing kit (Bullet, Dumbbell, Tapered)
    - Inverted cone bur
    - Crown Preparation Burs
7. **Bur Holder**
8. **Endo Box**
    - K-Files (15-40, 45-80)
    - Endo Z Bur
    - Endo Ring

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UHS Examination Policy

ASSESSMENT (Effective 2026-27 onwards)

PROCEDURE:

The candidate will take history, perform clinical examination, diagnose the lesion/ defect, devise a treatment procedure, along with the appropriate treatment.

The principles of caries removal, will be based on the current concepts of conservation of tooth structure, and arrested caries will be preserved.

HISTORY:

The candidate will clearly write the history composed of the following:

Chief Complaint

History of Chief Complaint

Brief Medical History

Past Dental Experience

Caries Risk of the patient

Assessment Evaluation:

S No.	Assessment Details	Total Marks	Marks with Internal Examiner	Marks with External Examiner
1	OSCE (5 stations)	10	5	5
2	OSPE/ Practical Examination	50	25	25
3	Oral Examination	30	15	15
4	Internal Assessment	10		
4	Total	100		

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1/I. Objective structured clinical examination (OSCE); 10 marks

The candidates will visit a series of stations which test their clinical skills. These stations include:

1. **Judgment and decision making = 2 stations**. The candidate will be provided with appropriate radiographs with a brief history. The candidate may be required to:
   - **a.** Diagnose
   - **b.** Devise a treatment Plan
   - **c.** Suggest Differential Diagnosis

2. **Instrument Identification = 1 stations:**

The candidate will be provided with three stations to identify different instruments and their used in Operative Dentistry. Such stations also include identification of hand instruments, based on GV Black Formulae**.**

3. **Clinical Examination and Procedures = 2 stations**

The candidate needs to perform different diagnostic tests used in Operative Dentistry. Such tests may include:

Use of Electric Pulp test
Use of Thermal tests
Taking Bitewing Radiographs
Taking Periapical Radiographs
Placement of Rubber Dam
Application of Fluoride Gel
Application of Resin Fissure Sealants

1/II. Oral Examination = 30 marks

The candidate will be asked on the following sub-specialties:

1. Restorative/ Operative Dentistry
2. Endodontics
3. Crown and Bridge

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4. Pedodontics

1/III/ PRACTICAL EXAM:

The practical Examination can be held on any one of the following procedures, within a period of three hours, on a patient.

1. A restoration for a carious/ Defect
2. A Root Canal Treatment on a single canal
3. A crown preparation
4. An appropriate Pedodontics procedure

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Final Year BDS- Rotation Credits Policy

Class I and Class I Compound (Amalgam Restoration)	2
Class I and Class I Compound (Composite Restoration)	1
Class II (Amalgam and Composite Restorations)	2
Class III, IV and V Restorations	1.5
GIC Filling (I, II, III, IV, V, VI)	1
Rubber Dam Placement	1
Pulpotomy	2
Pulpectomy	3
RCT (Anterior tooth)	2
RCT (Posterior tooth)	3
Crown Preparation	3
Inlay/onlay	3

Note:

- All Final Year Students are expected to have a total *credit score of 150* by the end of their rotation for quota completion.
- Any missing credit scores should be compensated via phantom teeth restorations, at the end of the rotation.
- All Supervising Demonstrators are expected to give credits, as per the above mentioned chart.

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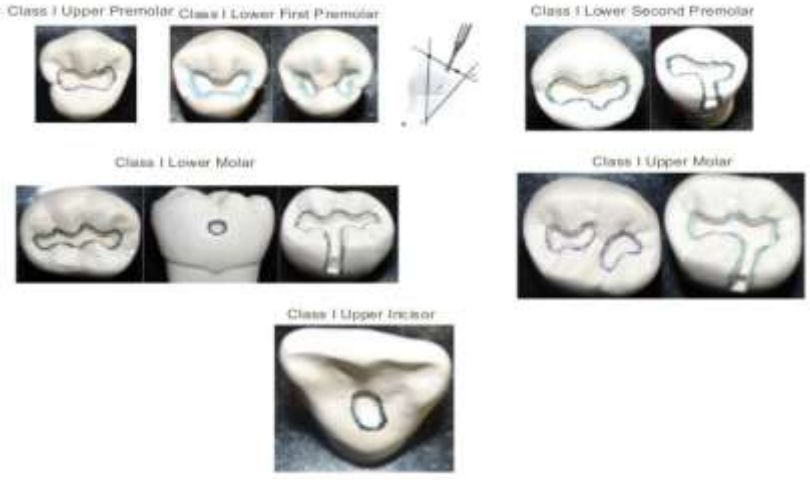
No	Procedures	Total
1	Amalgam restoration class I	
2	Amalgam restoration class II	
3	Composite restoration anterior	
4	Composite restoration posterior	
5	Glass ionomer restoration	
6	Root canal treatment posterior	
7	Root canal treatment anterior	
8	Restoration of Endodontically Treated Teeth	
9	Crown Preparation	
10	Inlay/Onlay	
11	Restoration of Primary Teeth	
12	ART/Pit and Fissure Sealants	
13	Pulpotomy/Pulpectomy	
14	Stainless Steel Crown Preparation	

Total Quota Completed _____
Supervisor Signature _____
Date

Class I Cavity Preparation

Sr. no	Steps of cavity preparation	Grading criteria
1.	Outline form	Width of cavity should not extend more than one forth the distance between the cusp tips
		All defective pits and fissures included
2.	Resistance form	Depth of cavity = 1.5mm
		Rounded internal line angles
		Flat floor
		90^{O} Cavosurface margins
		Adequate bulk of mesial and distal marginal ridges preserved
		Box form of the cavity
3.	Retention form	Buccal and lingual walls slightly convergent to the occlusal
		Mesial and distal walls slightly divergent
		Dove tail preparation
4.	Finishing of the walls & Cavosurface margins	Smooth walls
		90^{o} or less cavosurface margins



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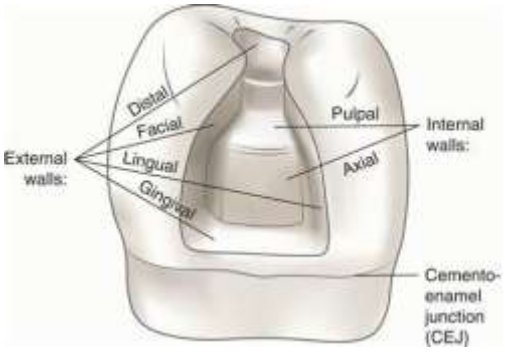
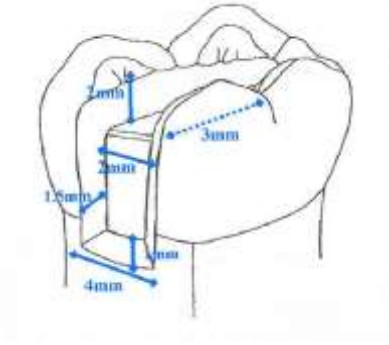
Class II Cavity Preparation

Sr. no	Steps of cavity preparation	Grading criteria
1.	Outline form	Width of cavity should not extend more than one forth the distance between the cusp tips
		All defective pits and fissures included
2.	Resistance form	• Depth of cavity = 1.5mm in the occlusal box • Beyond the contact point in the proximal box
		Rounded internal line angles
		Flat floor for proximal and occlusal boxes
		90^{O} Cavosurface margins
		Adequate bulk of unaffected mesial /distal marginal ridges preserved
		Rounding the axiopulpal line angle/ beveling the cavosurface margin at gingival floor
3.	Retention form	Buccal and lingual walls slightly convergent to the occlusal
		Mesial and distal walls slightly divergent
		Place retentive grooves proximally in bucco axial and linguo axial line angles
		Dove tail preparation
4.	Finishing of the walls & Cavosurface margins	Smooth walls
		90^{o} or less cavosurface margins





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Class III Cavity Preparation

Sr. no	Steps of cavity preparation/ restoration	
1.	Cavity preparation	Approach from lingual side/ extension in incisal and gingival direction/ rectangular form with well rounded corners/ 0.5mm clearance form adjacent teeth/ retention grooves in inciso pulpal and gingiva pulpal line angles/ retention grooves too deep/ beveling in areas not under occlusal forces/ margins smooth .Remove any remaining carious lesion
2.	Matrix placement	Mylar strip extending above and below prepared cavity by 1mm
3.	Wedge placement	Wedge fitting gingival embrasure and holding matrix in place
4.	Etching	Etchant restricted to prepared cavity/ proper etching time observed/ separate etching time for enamel and dentine observed/ washing leaves no residual etchant/glistening surface in area of dentine depicting a moist dentine surface achieved.
5.	Bonding	A thin and even layer of bonding agent applied and cured.
6.	Composite placement	First layer of flowable composite placed on pulpal wall/ incremental placement observed/ no voids between increments/ contact point restored
7.	Curing finishing and polishing	Smooth transition from tooth surface to restoration/ no voids/ no overhangs/ tooth surface not damaged by finishing process/ polished restoration surface

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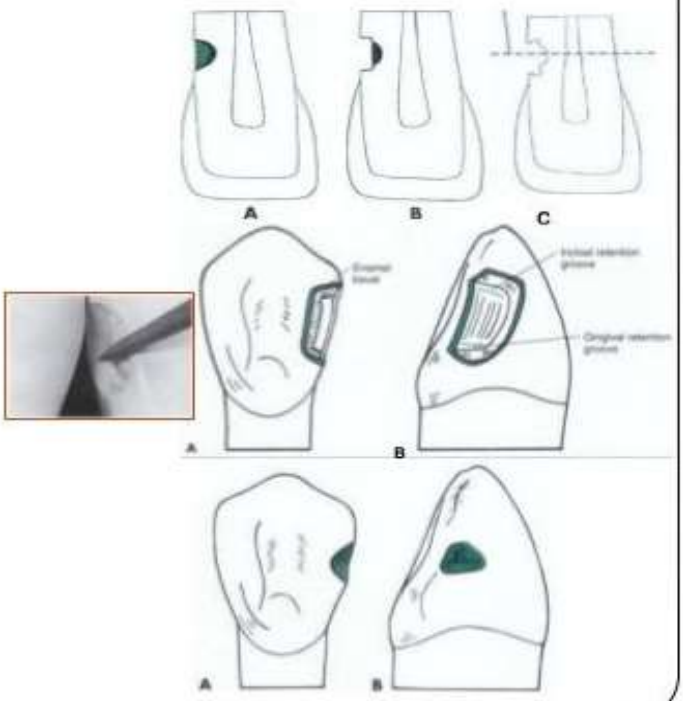
Class III Cavity Preparation

- Cavity Designs:

A. **Conventional**- when caries is entirely on root surface

B. **Beveled Conventional-** When the cavity is large & have enamel margins. Bevel is given at an angle of 45° to the cavosurface

C. **Modified-** When the carious lesion is small & easily accessible



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Class IV Cavity Preparation

Sr. no	Steps of cavity preparation/ restoration	
1.	Cavity preparation	Minimal action of cavity from simulated fracture line/ beveling in ares not under occlusal forces/ beveling should be at 45° angle and not more than 1mm wide/ margin smooth
2.	Etching	Etchant restricted to prepared cavity/ proper etching time observed/ separate etching time for enamel and dentine observed/ washing leaves no residual etchant/glistening surface in area of dentine depicting a moist dentine surface achieved.
3.	Bonding	A thin and even layer of bonding agent applied and cured.
4.	Putty matrix	Custom made matrix in putty incorporates details of lingual surface/ putty matrix cut appropriately
5.		
6.	Building lingual contours in composite	A thin layer of composite blends with unprepared tooth structure and incorporates lingual details
7.	Matrix placement / Wedge placement	Mylar strip extending above and below prepared cavity by 1mm/ Wedge fitting gingival embrasure and holding matrix in place
8.	Composite placement	First layer of flowable composite/GIC placed on pulpal wall/ incremental placement observed/ no voids between increments/ contact point restored

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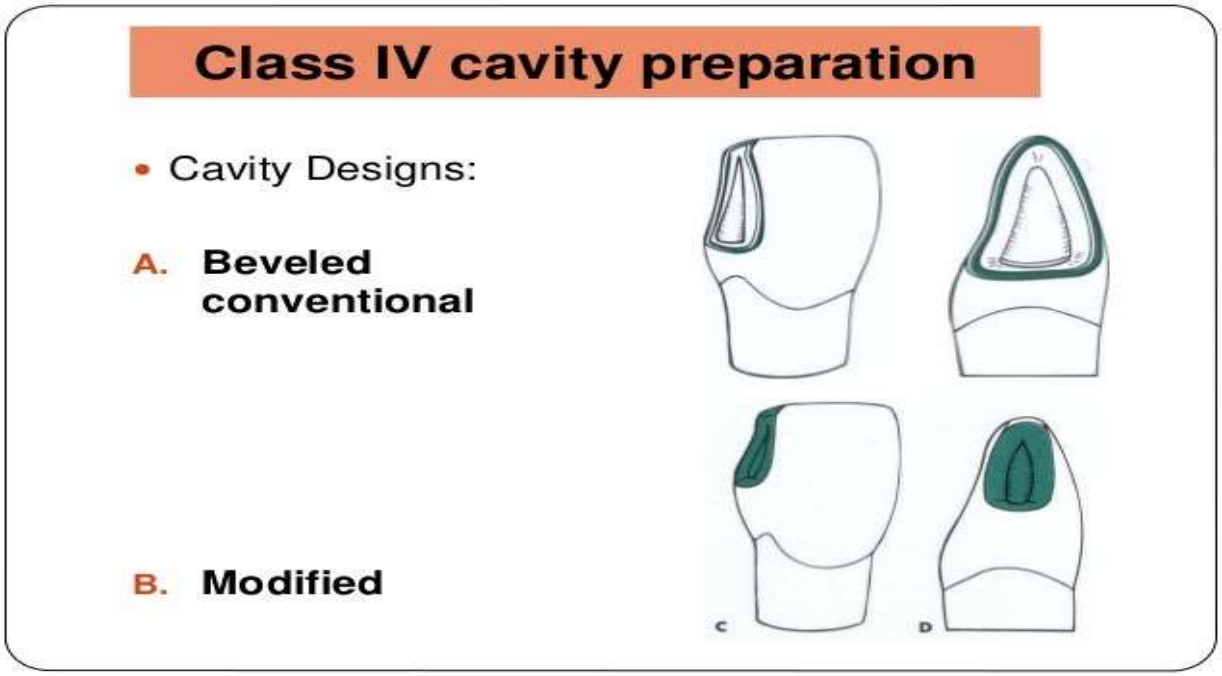
9.	Curing finishing and polishing	Smooth transition from tooth surface to restoration/ no voids/ no overhangs/ tooth surface not damaged by finishing process/ polished restoration surface



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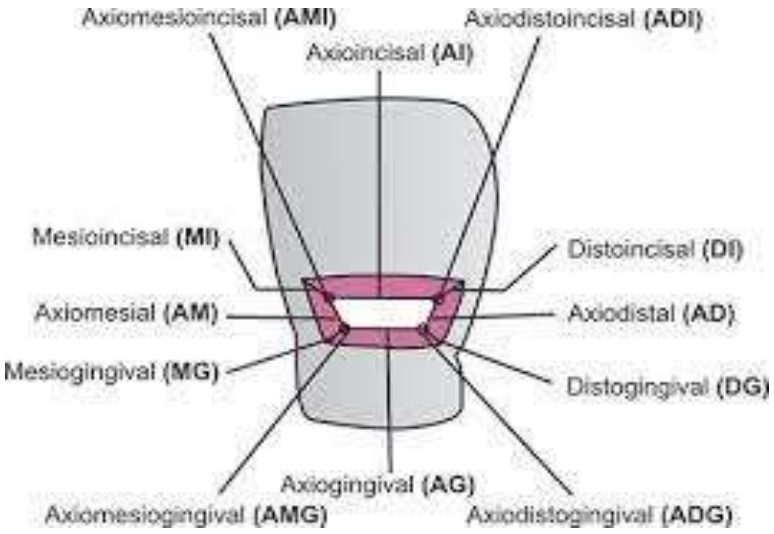
Class V Cavity Preparation

Sr. no	Steps of cavity preparation	Grading criteria (Phantom teeth)	Grading criteria (Natural teeth)
1.	Outline form	Rectangular cavity with rounded corners	Remove all carious lesion with minimal extension/ beveling of all margins except those ending on root surface
		All margins kept above the gingiva	
2.	Resistance form	Depth of cavity = 1.5mm	
		Rounded internal line angles/ walls divergent towards buccal	
		Floor following external tooth contour	
		90^{O} Cavosurface margins	
3.	Retention form	Retention grooves in occluso pulpal and gingiva pulpal line angles	
4.	Finishing of the walls & Cavosurface margins	Smooth walls	
		90^{o} or less cavosurface margins	



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HISTORY SHEET

M.R.#	**Name**	**Father/Husband**	**Age/Sex**
Token #	**Marital Status**	**CNIC**	**Contact**
Address			
Chief Complaint			
History of Chief Complaint			

Previous Dental Experience Yes □ No □	**Risk of Caries** High Risk □ Low Risk □
Medical history	**Specify significant findings**
Allergy Yes □ No □	
Bleeding tendency Yes □ No □	
Cardiac history Yes □ No □	
Drug history Yes □ No □	
Endocrine problems Yes □ No □	

Dental Examination Chart

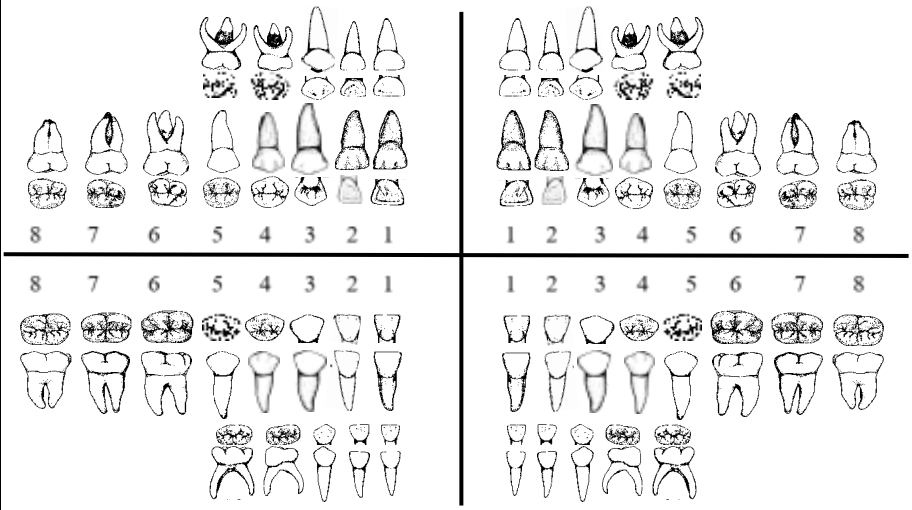

Figure Legend

Red : Decayed
Blue : Filled
X : Missing
⌒ : Calculus
◉ : Fix Prosthesis
M.G index : Mobility
BDR : Broken down

Investigations P.A. X ray □ OPG □ Lateral Ceph □

Diagnosis	**Comprehensive Treatment Plan**
a.	**a.**
b.	**b.**
Quota Given:	**Supervisor's signature:**

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RESTORATIVE PROCEDURE FOR AMALGAM RESTORATION

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender__ Occupation_____ Contact no. _____

Address_____

Presenting complaint _____

_____

Diagnosis and tooth no _____

Caries Risk of Patient ----------

No.	Clinical Steps	Criteria	Total Marks	Marks Obtained
1	Patient assessment	History, examination, diagnosis and treatment plan	1	
2	Scrubbing/gloves wearing	Jewelry removal, hand hygiene, gloves technique	1	
3	Patient seating and instrument set-up	Chair positioning	1	
4	Cavity preparation	Based on extent of the lesion and selection of material	7	
6	Rubber dam	No voids/leaks	3	
8	Lining/cement	Proper technique	2	

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9	**Material mixing, matrix, wedge**	**Proper ratio**	**3**	
10	**restoration**	**Restore anatomy/contact**	**3**	
11	**Carving and polish**	**Contours restored**	**2**	
	Table viva	**Procedure discussion**	**2**	
	Total		**25**	

Remarks _____

Date _____

Signature of Supervisor_____

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RESTORATIVE PROCEDURE FOR AMALGAM RESTORATION

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender__ Occupation_____ Contact no. _____

Address_____

Presenting complaint _____

_____

Diagnosis and tooth no _____

Caries Risk of Patient ----------

No.	Clinical Steps	Criteria	Total Marks	Marks Obtained
1	Patient assessment	History, examination, diagnosis and treatment plan	1	
2	Scrubbing/gloves wearing	Jewelry removal, hand hygiene, gloves technique	1	
3	Patient seating and instrument set-up	Chair positioning	1	
4	Cavity preparation	Based on extent of the lesion and selection of material	7	
6	Rubber dam	No voids/leaks	3	
8	Lining/cement	Proper technique	2	

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9	**Material mixing, matrix, wedge**	**Proper ratio**	**3**	
10	**restoration**	**Restore anatomy/contact**	**3**	
11	**Carving and polish**	**Contours restored**	**2**	
	Table viva	**Procedure discussion**	**2**	
	Total		**25**	

Remarks _____

Date _____

Signature of Supervisor_____

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RESTORATIVE PROCEDURE FOR TOOTH COLOUR RESTORATION

PATIENT DETAILS

Name _____ OPD No_____ Age_____
Gender____ Occupation_____ Contact no. _____
Address_____
Presenting complaint _____
_____
Diagnosis and tooth no _____

No.	Clinical Steps	Criteria	Total Marks	Marks Obtained
1	Patient assessment	History, exam, diagnosis. Treatment Plan	1	
2	Scrubbing/gloves	Infection control	1	
3	Patient seating and instrument set-up	Positioning	1	
7	Cavity prep	Margins, walls	7	
6	Rubber dam	Proper placement	3	
9	Matrix & wedge	Proper adaptation	3	
10	Shade selection	Chroma, hue	1	
11	Filling	Restore contact	3	
12	Polishing	Smooth finish	3	
	Table viva	Procedure discussion	2	
	Total		25	

Remarks _____ Signature of
Date _____ Supervisor_____

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ENDODONTIC PROCEDURE

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender_____ Occupation_____ Contact no. _____

Address_____

Chief complaint_____

History of presenting complaint_____

Diagnosis and tooth no_____

Treatment_____

No.	Clinical Steps	Criteria	Total Marks	Marks Obtained
1	Patient seating and tray set-up	Positioning	1	
2	Rubber dam	Seal	3	
3	Access cavity	Tooth anatomy	3	
4	Canal exploration	Locate canals	3	
5	Working length	Radiographs	3	
6	Instrumentation	Cleaning shaping	2	
7	Obturation	Seal	3	
8	Evaluation	No voids	3	
	Total		23	

Remarks _____ Signature of Supervisor_____

Date _____

CROWN PREPARATION

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender_____ _Occupation_____ Contact no. _____

Address_____

Chief complaint_____

History of presenting complaint_____

Diagnosis and tooth no_____

Treatment_____

No.	Clinical Steps	Criteria	Total Marks	Marks Obtained
1	**Patient assessment**	**History, exam, Treatment Plan**	**1**	
2	**Scrubbing**	**Infection control**	**1**	
3	**Patient seating and Tray Set up**	**Positioning**	**1**	
6	**Occlusal reduction**	**Crown type**	**3**	
7	**Proximal reduction**	**Crown type**	**3**	
8	**Facial reduction**	**Crown type**	**3**	
9	**Lingual reduction**	**Crown type**	**3**	
10	**Shade selection**	**Chroma**	**2**	
11	**Margin finishing**	**Taper, margins**	**3**	
12	**Occlusal finishing**	**Smooth**	**3**	
	Table viva	**Discussion**	**2**	
	Total		**25**	

Remarks _____

Date _____

Signature of Supervisor_____

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Pediatric Dentistry

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RESTORATIVE PROCEDURE FOR PRIMARY TEETH

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender____ Occupation_____ Contact no. _____

Address_____

Presenting complaint _____

_____

Diagnosis and tooth no _____

Steps of restorative procedure.	Remarks
1. Cavity preparation	_____
2. Isolation/Mylar strip/wedge /matrix band	_____
3. Etching	_____
4. Priming/bonding	_____
5. Composite placement	_____
6. Finishing/polishing	_____

Remarks _____

Date _____

Signature of Supervisor_____

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ART/ PIT AND FISSURE SEALANT

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender____ Occupation_____ Contact no. _____

Address_____

Presenting complaint _____

_____

Diagnosis and tooth no _____

Steps of restorative procedure.	Remarks
1. Isolation	_____
2. Preparation	_____
3. Filling	_____

Remarks _____

Date _____

Signature of Supervisor_____

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PULPECTOMY/PULPOTOMY

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender_____ Occupation_____ Contact no._____

Address_____

Chief complaint_____

History of presenting complaint_____

Diagnosis and tooth no_____

Treatment_____

Steps of pulpectomy treatment

No.	Clinical Steps	Criteria	Total Marks	Marks Obtained
1	Patient assessment	History, exam. Treatment Plan	1	
2	Scrubbing	Infection control	1	
3	Patient seating and tray set-up	Positioning	1	
6	Rubber dam	Seal	3	
7	Access cavity	Tooth anatomy	3	
8	Canal exploration	Locate canals	3	
9	Working length	Radiographs	3	
10	Instrumentation	Cleaning shaping	2	
11	Canal Filling	Material Used:	3	
12	Evaluation	No voids	3	
	Table viva	Discussion	2	
	Total		25	

Remarks _____
Date _____
Signature of Supervisor_____

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STAINLESS STEEL CROWN PREPARATION

PATIENT DETAILS

Name _____ OPD No_____ Age_____

Gender_____ _Occupation_____ Contact no. _____

Address_____

Chief complaint_____

History of presenting complaint_____

Diagnosis and tooth no_____

Treatment_____

No.	Clinical Steps	Criteria	Total Marks	Marks Obtained
1	Patient assessment	History, exam, Treatment Plan	1	
2	Scrubbing	Infection control	1	
3	Patient seating and Tray Set up	Positioning	1	
4	Crown selection	Size Consideration	3	
5	Shade selection	Chroma	2	
6	Margin finishing	Taper, margins	3	
7	Occlusal finishing	Smooth	3	
8	Table viva	Discussion	2	
	Total		16	

Remarks _____

Date _____