

# CURRICULUM FOR ORTHODONTICS (2023)

## National University of Medical Sciences Pakistan

### 1. VISION

Our vision is to provide highest quality comprehensive basic knowledge to our undergraduate students making them able to diagnose and treat patients and generate understanding that a beautiful smile is more than just straight teeth. Building on our legacy, we rely on the latest technology and solid educational foundation to provide the highest quality and most comprehensive Orthodontic care available

### 2. MISSION

To provide the highest quality of orthodontic treatment to all patients, teach innovative new techniques to undergraduate students and encourage the learning capabilities of students also cultivate innovative research to improve the quality of orthodontics.

### 3. LEARNING STRATEGIES

- a. Lectures
- b. Practical
- c. Case presentations
- d. Group discussions
- 4. **Competencies:** The following generic competencies apply to this course:
  - a. Critical Thinking
  - b. Problem Solving
  - c. Communication Skills
  - d. Professionalism
  - e. Procedural Skills
- 5. Learning Outcomes: Specific Learning outcome of each course is attached as Anx-A

### 6. Implementation of the curriculum:

Implementation of curriculum is at the discretion of institute. Clerkships/ clinical rotations for 08 weeks' may be followed

Clinical Training	
Clinical evaluation of patient total 5	5
Impression taking / Bite registration total 5	5
Cast analysis	Total 5 for each
Cast in Occlusion	
Cast Apart	
Boltan Analysis	
Mixed Dentition Analysis	
Arch Length Discrepancy	
Wire Bending Exercise	Total 5 for each
Adam's Clasp	
Labial Bow	
Springs (finger and Z)	
Canine Retractor	
Construction of Hawley's retainer	01
Cephalometric Analysis	Total 5
Case Presentation	01

During their clinical rotation, students in small groups learn through practical chair side
demonstrations of the techniques of history taking, impression and wax bite registration,
cast analysis, wire bending exercises, cephalometric tracing, and other radiographic analysis.
They then fabricate removable appliances on patients under supervision. They also observe
and assist seniors in fixed appliances treatment procedures.

### 7. Resources:

To be filled by each Institute

### **Facilities:**

To be filled by each Institute

### 8. Course Administration:

To be filled by each Institute

### A. Examination.

- 1) Minimum attendance of 75% is a requirement to appear in university professional examination
- 2) Continuous formative evaluation is conducted during the academic year comprising of 5 theory tests, and 2 clinical assessment tests (ward tests and Pre annual). The results are communicated to students through notice board. Feedback is provided after each evaluation
- 3) The weighting of internal assessment is 20% in 4<sup>th</sup> professional BDS Examination
- 4) There will be two mid-term & term examinations followed by a pre-Annual and annual examinations each year.

- 5) The structure of the paper of all the term examinations and pre-annual will be the same as that for annual examination though syllabus will be different.
- 6) The structure of Mid-term exam will be half of the term exam.
- 7) The syllabus for mid-term & term examinations will be announced by the department at least 02 weeks prior to examination.
- 8) Pre-annual examination will be from whole syllabus.
- 9) The date sheet for mid-term, term and pre-annual examinations will be published by Examination branch while the examinations will be conducted by respective department. The result will be submitted to examination branch for incorporation in internal assessment.
- 10) The University shall take the 4<sup>th</sup> professional Examination at the end of the academic year. Annual Theory will be of 100 marks & Practical Examination will be of 200 marks. The pass score shall be 50% in theory and practical separately. However, in clinical subjects, student should pass in clinical exams / OSCE (with 50% marks) and unobserved stations (with 50% marks) separately
- 11) **Log book.** Each student is expected to maintain record of practical work in log book. Safe keeping (make copies) of the log book is the responsibility of each student. The log book must be submitted to the Orthodontic department at the end of the academic year.

<u>Communication of Information to Students:</u> All information communicated to students through Notice boards.

### <u>Learning Resources</u> Recommended Textbooks

Contemporary orthodontics by Profit
Introduction to orthodontics by Laura Mitchel
Hand book of orthodontics by Robert Moyers
Introduction to Cephalometry by Jacobson

	LEARNI	NG OUTCOMES		Anne	х-А
TOPIC/THEME	COURSE CONTENT	LEARNING OU At the end of each modul		INSTRUCTIONAL STRATEGIES	%
		able to:			
		Knowledge	Skills		
	1.	INTRODUCTION TO ORTHO	ODONTICS		
Introduction	Definition, Branches of	Identify the branches of	Apply pertinent	Lecture/	
to	orthodontics and their	orthodontics and	knowledge on	CBL	
orthodontics	role, Aim and need of	evaluate need and	patients		
	orthodontic treatment	severity of orthodontic		( ) (	
	(IOTN), Terminologies,	problems			
	Background and Paradigm				
Epidemiology	Describe the epidemiology	Describe different		Lecture/	
	of malocclusion including	research design		CBL	
	incidence and prevalence	<ul> <li>Interpret various</li> </ul>			
		terms used to	00,		
		describe			
		orthodontic			
		problems			
		2. GROWTH &DEVELOPI	MENT		1
Growth &	Definition, Theories, Sites	<ul> <li>Understand the</li> </ul>		Lecture/	
Development	and Centers, Pre & post-	concept of normal		CBL	
	natal growth of maxilla,	and abnormal			
	mandible, Naso-maxillary	pattern of growth			
	complex, palate, TMJ	and development of			
	growth and development.	craniofacial complex			
	Growth assessment	<ul> <li>Understand the</li> </ul>			
	parameters, Cervical	malocclusion			
	maturation stages,	process as a			
	Describe changes in face	deviation from			
	form and profile,	normal growth			
	Developmental				
	Abnormalities,				
	Psychological and social				
	impact of abnormal				
	growth and malocclusion				
Development	Definition of primary,	Understand the concept		Lecture/	
of dentition	mixed and permanent	of normal and abnormal		CBL/pbl	
	dentition. Development of	pattern of growth and			
	teeth and eruption.	development of			
	Dimensional changes in	dentition			
	the dental arches during	Evaluate the deviation			
	different dentition periods,	from normal to			

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	prenatal development,	abnormal dental			
	variation in development	development/			
	including size, form,	malocclusion			
	number and position of				
	teeth and factors effecting				
	development.				
	Nolla's Stages.				
		DIAGNOSTIC AIDS IN ORTH			1
Diagnosis of	(Obtain comprehensive	Formulate a	Evaluate the	Lecture/	
Malocclusion	history, Extra-oral and	comprehensive	patient clinically	CBL/PBL	
	Intra-oral examination,	diagnosis			
	Examination of teeth,	Analyze the			
	Appraisal of soft tissue,	diagnostic records			
	Functional analysis, Plan		4		
	the necessary				
	investigation, maintain		00,		
	appropriate diagnostic				
	record, Analyze and				
	interpret the records,				
	Outline the management	100			
	protocol,				
	Communicate with the				
	patient informing the				
	probable prognosis and				
	financial involvement)				
Diagnostic	(Obtain impression and	(a)		Lectures/CBL/	
Techniques	plaster model, Technical			PBL	
•	procedure for impression				
	and plaster model,				
	Analysis of the study				
	model to assess tooth-jaw				
	discrepancy: Arch				
	perimeter, arch length,				
	arch width, Intra-oral				
	radiograph, Intra-oral and				
	facial photograph, Define				
	cephalometry,				
	Anthropological sources				
	and development of				
	cephalometrics, Objectives				
	of cephalometric tracings.				
	Cephalometric Landmarks-				
	Cranial, Maxillary and				

	Mandibular, Cephalometric Analysis- Dental, Skeletal and Skeletal-Dental Analysis, Orthopantomogram X-Ray and importance of it in Orthodontic Treatment)			
Dental radiology	Roentgen anatomy of teeth, jaws and tmj joints, Variations within normal limits, and abnormalities, Different types of X ray mechines, Variation of X ray films (extra oral, intra oral, bite wing and occlusal), indication and use of dental radiography, Interpretation of films and Radiation hazards.	Define and recognize radiographs	Able to interpret simple radiological finding of orthodontic problems	lectures
		4. OCCLUSION		
Occlusion	Define normal and abnormal occlusion, Ideal occlusion (introduction, definition) Andrew's six keys of occlusion, CO-CR and canine guided group function.	Recognize ideal occlusion and differentiate disharmony	<ul><li>Examine the occlusion</li><li>Identify and interpret malocclusion</li></ul>	CBL
		5. METABOLIC BASI	S	
Bone Metabolism	Describe different tissue changes, Difference between physiologic movement and orthodontic movement, Describe Pathophysiological change of tissue, Histopathological changes at the pressure and tension area, List the types of tooth movement, explain effect of normal and excessive force, Explain the tissue changes with different types of	Recognize the normal bone metabolism and relate with orthodontic tooth movement	Compare normal and abnormal force levels and identify deleterious orthodontic effects	Lecture/ CBL

	appliances including the myo-functional appliance, Explain the biological basis of Orthodontics Therapy, Effect of drugs, State favorable and unfavorable incidence of tooth movement, Role of bone in eruption and stabilization  Deleterious effects of orthodontic tooth movement on			
	periodontium	C MALOCCULCION		
Ftiology Of	D (* ***	6. MALOCCLUSION	00,	100.1
Etiology Of Malocclusion	Definition, Etiological Factors (local factors eg tooth size, number and shape) (general factors) (specific causes of malocclusion Adenoids, respiration and speech) and various terminologies.	Identify the cause of malocclusion		PBL
Malocclusion and Treatment planning	Class I (non skeletal) problem eg crowding, spacing, crossbites, openbite and deepbite), Class II (skeletal problem, div 1 and 2) and Class III (types), planning, diagnosis and management, Diagnosis, planning and treatment of simple and complex malocclusion using a range of: Removable, Functional and Fixed appliance. Describe method of treatment, Types of Orthodontic Appliances, Tooth-jaw discrepancy, Extraction and non-extraction planning, A criterion and	<ul> <li>Identify orthodontic problems and its features</li> <li>Organize a problem list</li> <li>Formulate a treatment plan</li> </ul>		Lectures/CBL/ PBL

	choice of teeth for extraction, Contraindication for extraction, Extraction with Orthodontic Treatment.  7. PR	ROTOCOLS DURING MIXED	DENTITION	
Protocols used in relieving dental and skeletal problems during mixed dentition	Protocols of relieving mixed dentition crowding, Diagnosis & management of Habits, serial extractions, crossbites, space regaining, space supervision and Growth modifications, various appliances used. Explain interceptive and preventive orthodontics and methods	<ul> <li>Identify non skeletal and mild skeletal orthodontic problems in mixed dentition stage</li> <li>Manage mixed dentition problems</li> </ul>	Design/ construct simple orthodontic appliances	Lectures/CBL/ PBL
	8. ORTHO	DONTIC APPLIANCES AND	BIOMECHANICS	
Orthodontic Appliances	Removable Appliance (Definition, Basic requirement of an Orthodontic appliance, General wire bending exercise, Design and construction of different springs and clasps, Components of removable appliance, Describe general principle of design and fabrication of removable appliance, State the type of appliance for different tooth movements, e.g. labiolingual, expansion and contraction of arches, Construction of Hawley,	Identify and differentiate different orthodontic appliances	Design and construct simple removable orthodontic appliances.	Lectures/CBL/ PBL

Begg retainer and Bite
lanes, Trimming and
Polishing, Insertion and
dvice for the patients,
ollow up and
djustments, Care during
reatment)
elective case
presentation.
unctional jaw
orthopedics
Describe Orthopedic force
nd its principles, Narrate
Ayo-functional appliance
nd describe its indication
nd contraindication,
echnique and training for
he construction of Myo-
unctional appliance,
Clinical and laboratory
teps in the construction
of Class II and Class III
activator (Anderson/Mono
llock type) and Twin Block,
adjustment of activator
fter insertion in the oral
avity, Care during
reatment)
elective case
presentation.
ixed Appliances
Describe Principles,
dentify parts and
ppliance system currently
ised, list the advantages
nd disadvantages,
echnique and training of
ixed appliance, general
vire bending exercise, use
of multiple loop used in
ixed appliance, upper and
ower ideal arch formation,
Offset and Inset bend, 1st,
and 3 <sup>rd</sup> order bend, Toe

Material	in and Tip back bend, Molar band formation and welding of molar tube in the band with ideal position, Cementing of the band, Weldable bracket positioning, Direct bonding technique of mesh bracket, Adjustment of arch wire and follow up, Stages of treatment progression by Fixed appliance, Anchorage (Types of anchorage, Preparation and assessment of anchorage planning, Anchorage planning according to the needs: Mild, Moderate and Maximum, Increase anchorage value- Use of head gear, Chin cup and other Extra-oral/Intra-oral anchorage) planning, Leveling, Canine retraction, Arch/Anterior contraction, both arch coordination and retention, Care during treatment) Selective case presentation.  Different materials		Identify and rolato	Practice different	lectures	
Material instruments and techniques used in orthodontics	Different materials, instruments and techniques used in Orthodontics, Properties of SS wire and NiTi alloy. Principle and method of wire bending exercise, Soldering- Introduction and definition, Composition and properties of Silver Solder and Fluxes, Soldering	•	Identify and relate different orthodontic materials Explain wire modification procedures	Practice different wire bending exercise	lectures	

Biomechanics	Flame, soldering method and procedure, Welding-Definition, principle and mechanism of spot welding, Heat treatment procedure. Concept, Advantages & disadvantages, limitations, Anchorage, types of movements, types of forces, wires and Alloys used in orthodontics, ideal properties, comparison of different alloys,	<ul> <li>List the biomechanical requirements of different orthodontic appliances and their anchorage requirements</li> <li>Recall the clinical implementation of biomechanical requirements of orthodontic appliances</li> </ul>	Aware of clinical implementation of biomechanical requirements of orthodontic appliances and CBLs	Lectures/CBL
	I	MULTIDISCIPLINARY ORTH	I	
Cleft lip & plate & orthognathic surgery	Etiological factors role of orthodontist, treatment procedures at different age groups, indication of OGS, stages of OGS, Various adjunctive and types of surgical procedures	Define and explain problems and pathophysiology	Be able to formulate problem list plan discrepancies according to age groups and PBLs.	Lectures/CBL/ PBL
Adjunctive and Multidisciplinary orthodontic Approaches	Adjunctive treatment goals and principles, Describe Adult Orthodontics, Appliance and technique for Adult Orthodontics, Multi-disciplinary treatment procedures. Pre-surgical Oral-Orthopedic and Orthodontic procedure and Post-surgical Orthodontic Procedure, Pre-restorative Orthodontic Procedure,	Be aware of multidisciplinary approaches pertinent to orthodontic problems	Be able to predict appropriate team for orthodontic referrals and PBLs and CBLs.	Lectures/CBL/ PBL

	Describe preventive Periodontics. TMJ Dysfunction. Selective case presentation.			
Retention And Relapse	Define retention and relapse, Causes, factors, various types of retainer's role of periodontal tissues and allied causes of relapse, concept of retention and relapse, occlusal stability and management, evaluate relapse after orthodontic treatment, retention after correction of different malocclusion, theorems.	Choose appropriate retention regime and post treatment review of treated cases	Design simple retention appliances	lecturs/CBLs /PBLs.

### List of Clinical Demonstrations Orthodontics Final Year Clinical Rotation Orthodontics

Sr.#	Demonstration / Tutorial
	Orientation to Orthodontic department and clinical area
1	
2	History taking and Clinical examination
3	Impression taking and bite registration
4	Radiology techniques and interpretations
5	Case preparation (radiographic tracing, cast analysis, photographic evaluation)
6	Basic wire bending exercises
7	Appliance fabrication and insertion
8	Group discussion
9	Orientation with instruments and appliances