

I.T.S DENTAL COLLEGE, HOSPITAL & RESEARCH CENTRE

47, Knowledge Park-III, Greater Noida

BDS 4th year (Odd Batch)

First Internal Assessment Examination

Subject: Pedodontics

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- Attempt all questions
- Use separate sheet for Part A & Part B
- Draw neat and well labelled diagram wherever required

04.01.2013

Time: 3 hrs

M.M. – [70]

PART - A

- Q. 1 Define preventive interceptive and corrective dentistry enlisting examples for each. [10]
- Q. 2 Define and classify Oral habits and describe in detail the management of a child with mouth breathing habit. [10]
- Q. 3 Write short notes on: 5X3=[15]
- a) Properties and manipulation of GIC
 - b) Setting reaction of Amalgam
 - c) Management of child with epilepsy

PART - B

- Q. 4 Describe in detail the setting up of a Pedodontic clinic and discuss the scope of Pedodontics. [10]
- Q. 5 Define handicapped child and describe in detail the management of a child with Down's Syndrome. [10]
- Q. 6 Write short notes on: 5X3=[15]
- a) Importance of primary dentition
 - b) Serial extraction
 - c) Autism

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I.T.S DENTAL COLLEGE HOSPITAL AND RESEARCH CENTRE, GREATER NOIDA

DEPARTMENT OF PEDODONTICS AND PREVENTIVE DENTISTRY

FIRST INTERNAL ASSESSMENT EXAMINATION (FINAL YEAR)

Time: 3hrs

Max Marks: 70

PART A

Long Notes

- 1) Define Early Childhood Caries. Write in detail the clinical stages of ECC and its management in detail. (10)
- 2) Enlist the various topical fluoride agents. Write in detail the method of application and the mechanism of action of NaF, SnF and APF. (10)

Short Notes

(3x5=15)

- 1) Diagnodent
- 2) Diet counseling
- 3) Primary and secondary factors responsible for development of dental caries

PART B

Long Notes

- 1) Define and classify pit and fissure sealants. Write in detail the indications, contraindications and method of application of pit and fissure sealants. (10)
- 2) Discuss the differences between primary and permanent teeth with special emphasis on the clinical applications of the same. (10)

Short Notes

(3x5=15)

- 1) Pedodontic triangle
- 2) Defluoridation
- 3) Scope of Pedodontics

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Ext

ITS DENTAL COLLEGE, HOSPITAL AND RESEARCH CENTER
DEPARTMENT OF PEDODONTICS AND PREVENTIVE DENTISTRY

FINAL YEAR ODD BATCH

FINAL INTERNAL ASSESSMENT EXAMINATION (SENTUP)

DATE-10/7/13

Draw labelled diagrams wherever required.

MAXIMUM MARKS-90

PART A

MARK-35

- Q. NO.1- Discuss in detail topical fluorides used in paediatric dentistry. (10)
- Q. NO.2- Discuss effects of thumb sucking habit on orofacial structure and its management. (10)
- Q.NO.3-
- SHORT NOTES: - (15)

- a) Factors affecting planning for space maintainers.
- b) Obturating materials in primary teeth.
- c) Risk factors in dental caries in children.

PART B

MARK-35

- Q. NO.1- Enumerate and describe non-pharmacological methods of behaviour management techniques. (10)
- Q.NO.2- What are the medically compromised conditions that require dental treatment modifications? Describe in detail how will you treat a child with congenital heart disease? (10)
- Q.NO.3-
- SHORT NOTES: - (15)

- a) Pit and fissure sealants.
- b) Use of Ca (OH)_2 in pedodontics.
- c) Conscious sedation.

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I.T.S. Dental College, Hospital and Research Centre, Greater Noida, U.P.

Department of Pedodontics and Preventive Dentistry

2nd Internal Assessment Examination BDS IV year (Odd Batch), March 2013

Answer all the following questions and draw diagrams wherever necessary.

Time; 3 hours

Max mark; 70 marks

PART (A)

1. Write the importance of child psychology in dentistry. Discuss Erick Erikson's theory in detail. (10)
2. Define E.C.C. and enlist the factors responsible for it. Discuss in detail the management of a case of Nursing Bottle Caries: (10)

Short notes:- (5x3)

1. Operant conditioning
2. Thumb sucking habit
3. Manipulation of GIC.

PART (B)

1. Define and classify handicapping conditions. How will you manage a patient with Downs Syndrome. (10)
2. Discuss the development of occlusion from birth to mixed dentition period. (10)

Short notes:- (5x3)

1. Serial extraction
2. Synder's caries activity test
3. Desensitization of an apprehensive child patient.

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