

DEPARTMENT OF PEDODONTICS AND PREVENTIVE DENTISTRY

SCHEDULE FOR INTERNS (25.5.2020-30.5.2020)

Absentees: Siddharth .A, Sriram P

S.	DATE	TO	FACULTY	NO.OF STUDENTS
NO		PIC		PARTICIPATED
1	25.5.2020	Pulpectomy	Dr Divya Natarajan	Sai Shruthi H N
				Rinshi Mol
2	26.5.2020	Apexogenesis &	Dr Devi Chandrika	Sai Shruthi H N
		Apexification		Rinshi Mol
3.	27.5.2020	Stainless steel crown	Dr Daya Srinivasan	Sai Shruthi H N
				Rinshi Mol
4.	28.5.2020	Topical Flourides	Dr Senthil Eagappan AR	Sai Shruthi H N
			AK	Rinshi Mol
5.	29.5.2020	Sealants	Dr Divya Natarajan	Sai Shruthi H N
				Rinshi Mol
6.	30.5.2020	Space Maintainer	Dr Devi Chandrika	Sai Shruthi H N
				Rinshi Mol



Divya N is inviting you to a scheduled Zoom meeting.

Topic: Pulpectomy E-Clinic

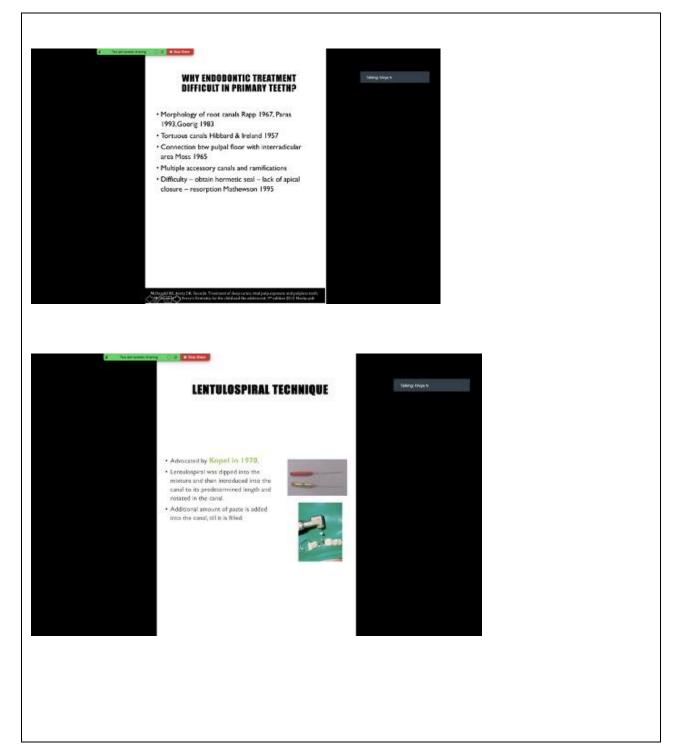
Time: May 25, 2020 11:30 AM Mumbai, Kolkata, New Delhi

Join Zoom Meeting

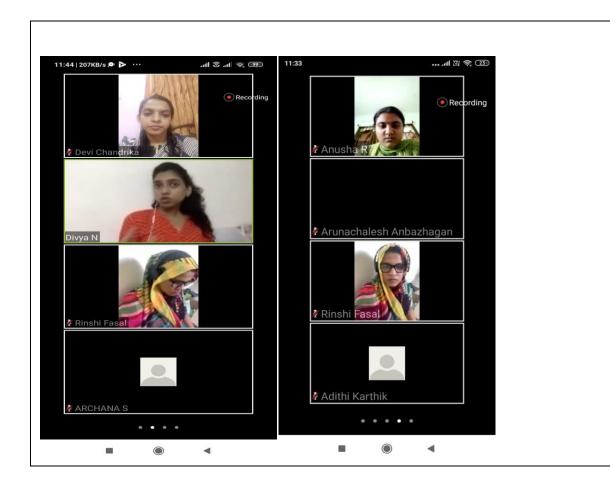
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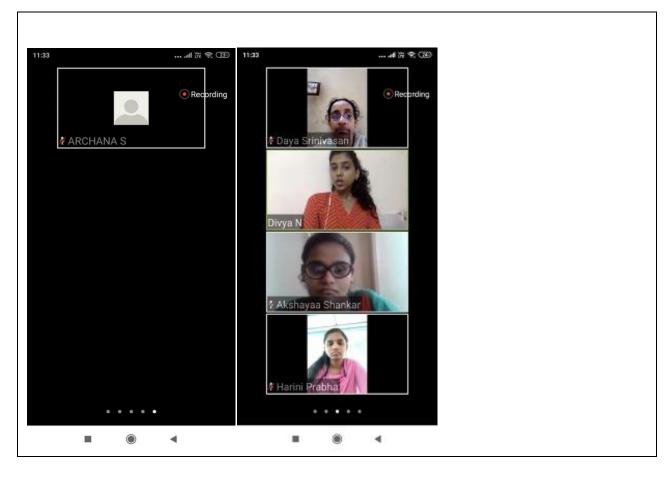




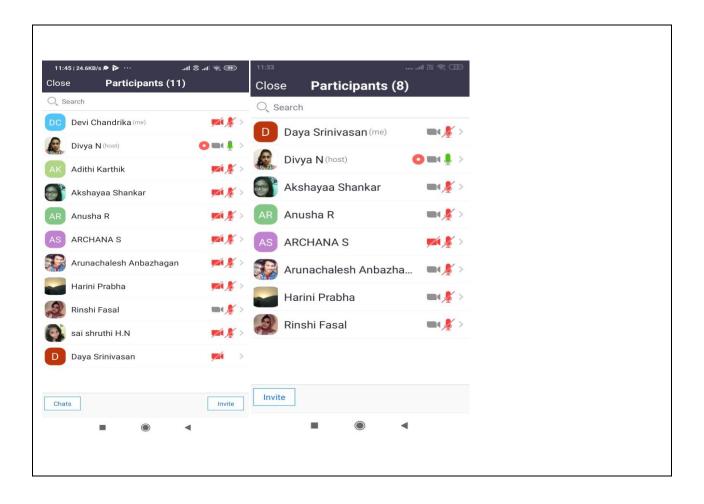














Devi Chandrika is inviting you to a scheduled Zoom meeting.

Topic: Final year E- clinics

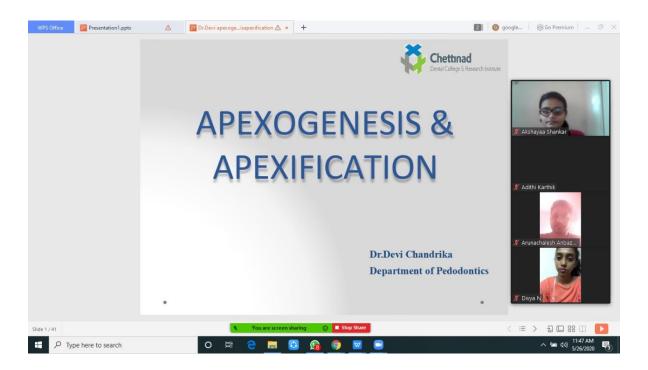
Time: May 26, 2020 11:45 AM Mumbai, Kolkata, New Delhi

Join Zoom Meeting

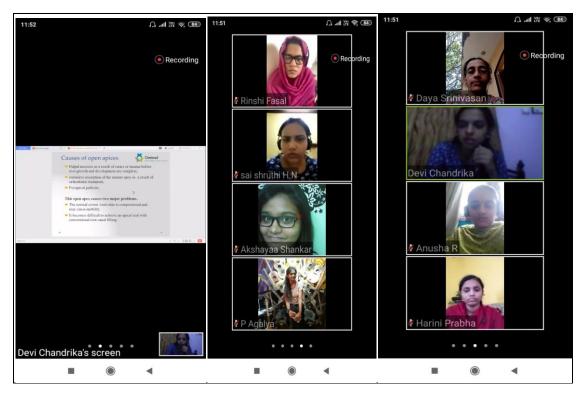
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Meeting ID: 792 6751 9157





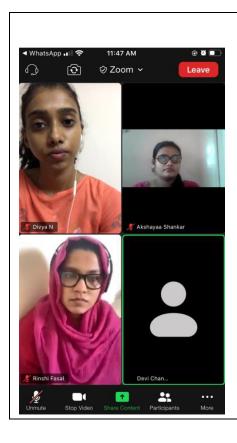




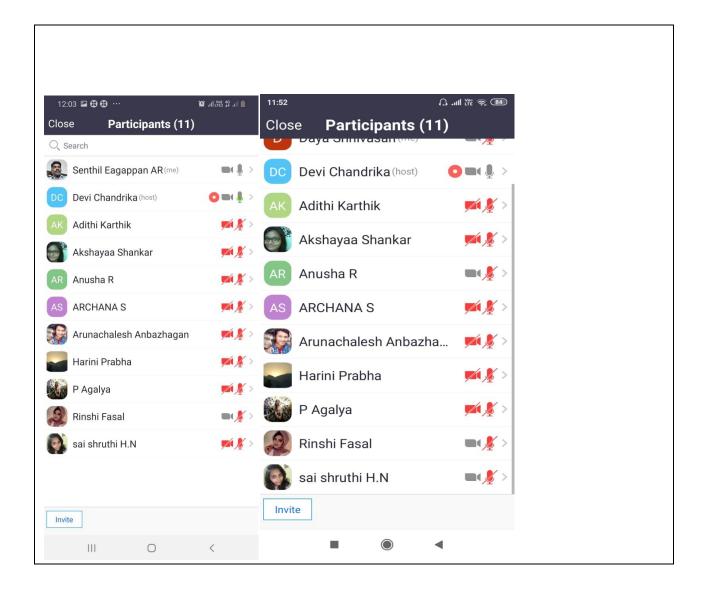














Daya Srinivasan is inviting you to a scheduled Zoom meeting.

Topic: Daya Srinivasan's Zoom Meeting

Time: May 27, 2020 11:30 AM India

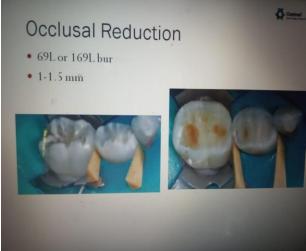
Join Zoom Meeting

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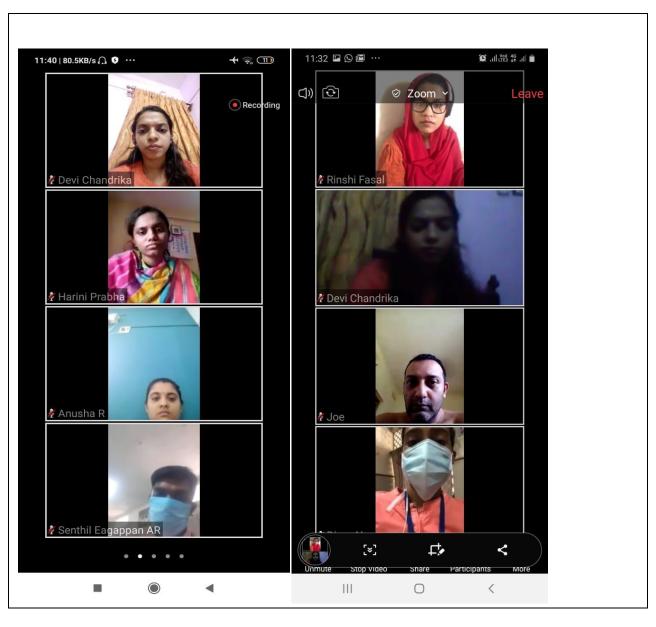
Meeting ID: 666 459 8002



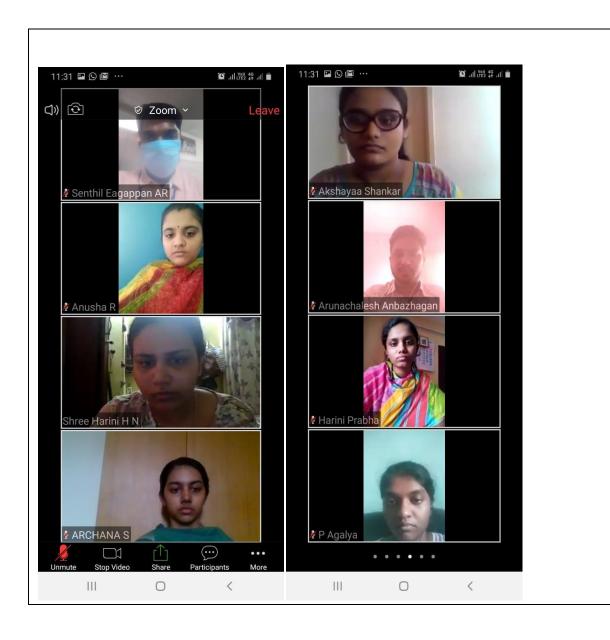




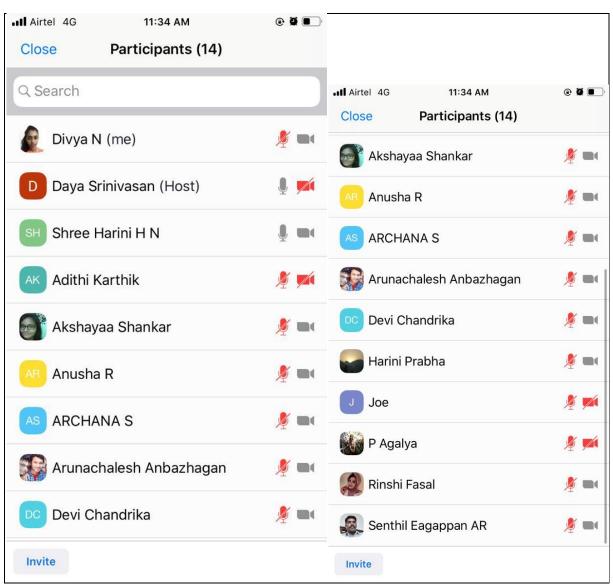














Senthil Eagappan AR is inviting you to a scheduled Zoom meeting.

Topic: Topical Fluoride E-Clinics Discussion

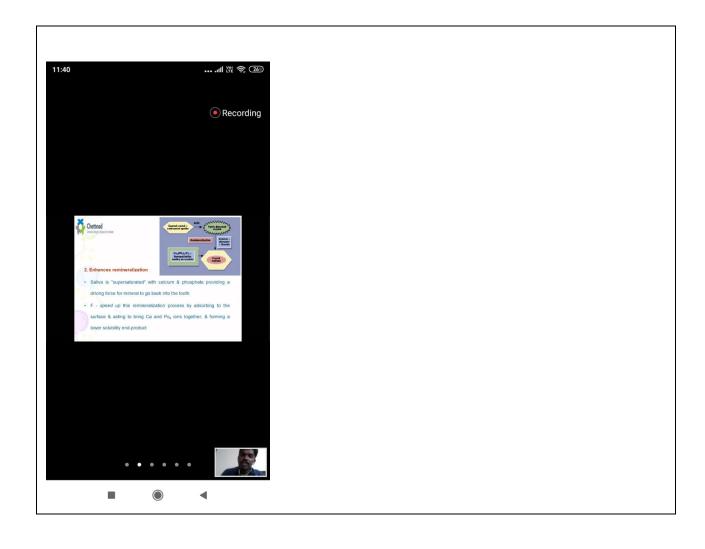
Time: May 28, 2020 11:30 AM Mumbai, Kolkata, New Delhi

Join Zoom Meeting

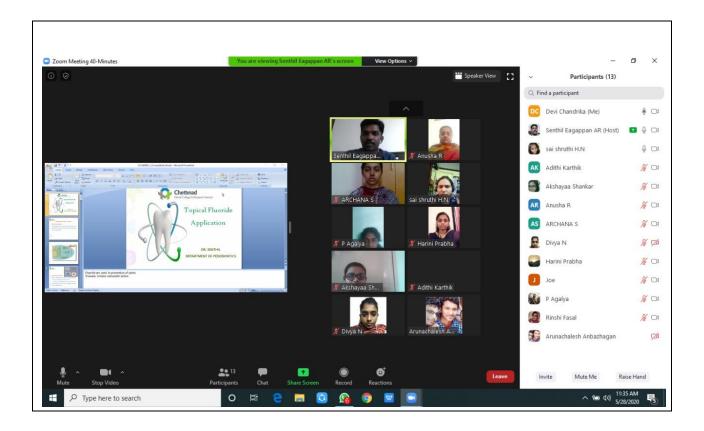
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Meeting ID: 842 856 3609

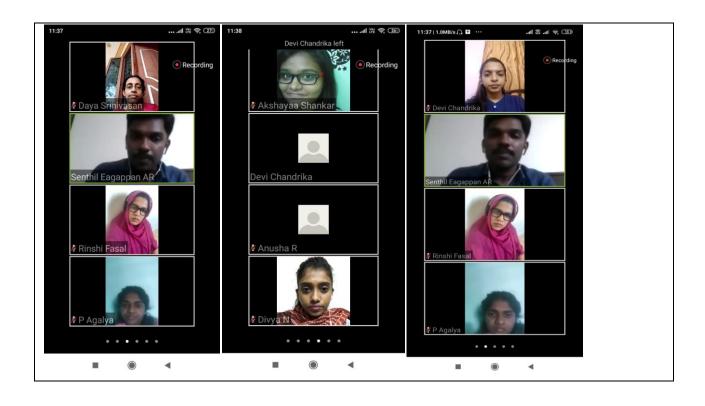




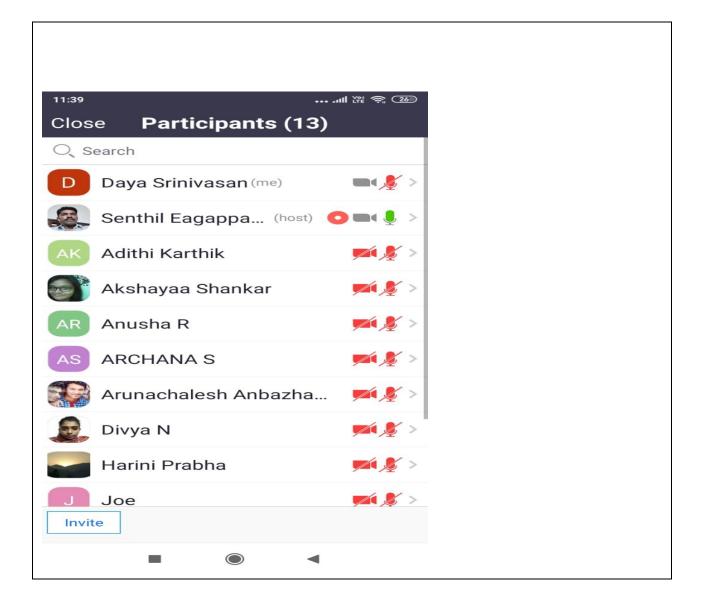














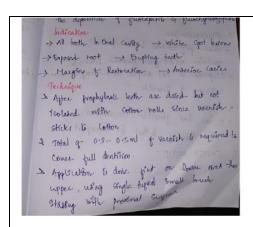
Write assignments and submit it

1. Flluoride varnish - Indications, recommendations,

Commercially available fluoride varnishes

Application technique

- 2. Same for APF gel
- 3. Silver diamine fluoride





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Divya N is inviting you to a scheduled Zoom meeting.

Topic: Sealants E-Clinic

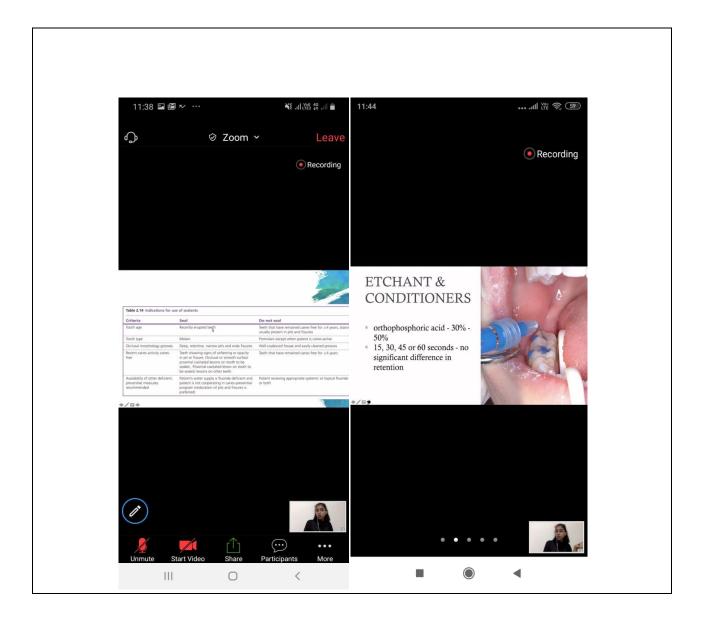
Time: May 29, 2020 11:30 AM Mumbai, Kolkata, New Delhi

Join Zoom Meeting

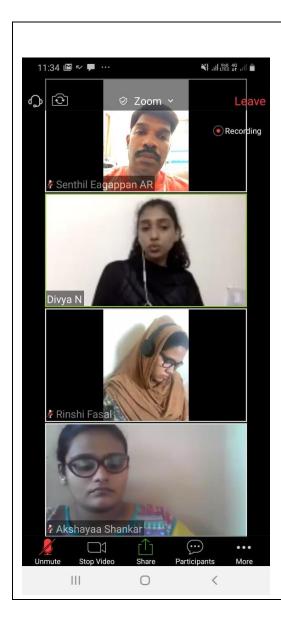
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Meeting ID: 741 9532 8573

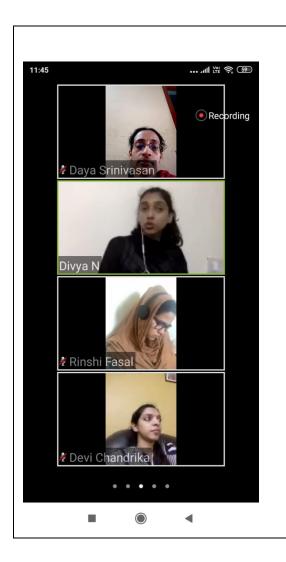




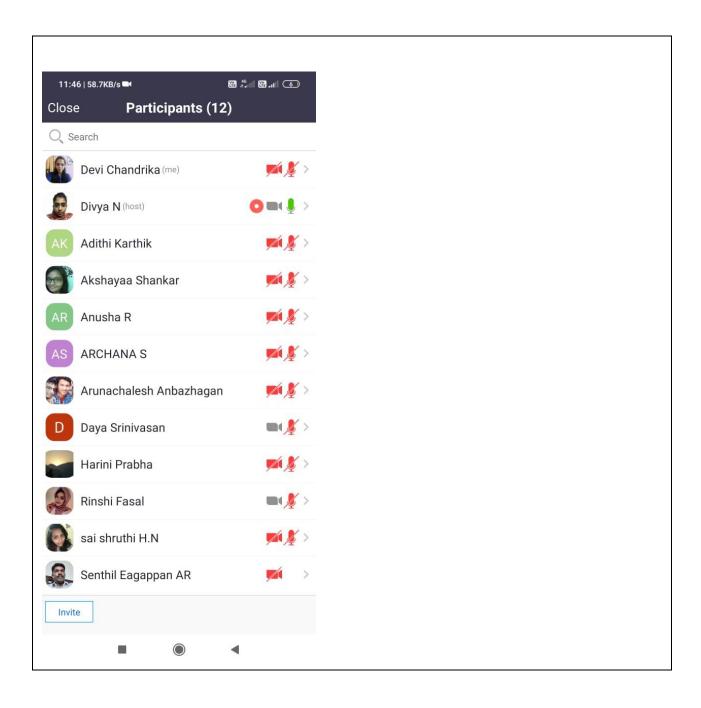




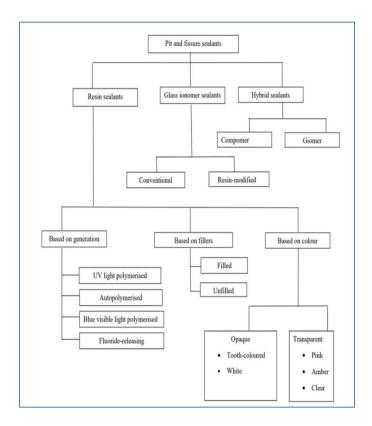












Sealant Materials and Placement Techniques

For the purposes of this report, there are 4 sealant materials under a classification proposed by Anusavice and colleagues¹¹: resin-based sealants, glass ionomer (GI) cements, GI sealants, polyacid-modified resin sealants, and resin-modified GI sealants. They defined the materials as follows.¹¹

- Resin-based sealants are urethane dimethacrylate, "UDMA,"
 or bisphenol A-glycidyl methacrylate (also known as "bisGMA") monomers polymerized by either a chemical activator and initiator or light of a specific wavelength and
 intensity. Resin-based sealants come as unfilled, colorless,
 or tinted transparent materials or as filled, opaque, toothcolored, or white materials.
- GI sealants are cements that were developed and are used for their fluoride-release properties, stemming from the acidbase reaction between a fluoroaluminosilicate glass powder and an aqueous-based polyacrylic acid solution.
- Polyacid-modified resin sealants, also referred to as compomers, combine resin-based material found in traditional resin-based sealants with the fluoride-releasing and adhesive properties of GI sealants.
- Resin-modified GI sealants are essentially GI sealants with resin components. This type of sealant has similar fluoriderelease properties as GI, but it has a longer working time and less water sensitivity than do traditional GI sealants.



Although sealants are used for the most part on permanent molars and bicuspids, they may be used in primary teeth as well. The indications for sealing a primary molar are essentially the same as those for sealing a permanent tooth. They include (1) deep, retentive pits and fissures that may cause wedging of the explorer; (2) stained pits and fissures with minimal decalcified or opacified appearances; (3) pit and fissure caries or restorations in other primary teeth; (4) no radiographic or clinical evidence of interproximal decay; (5) a patient who is receiving other preventive treatment, such as systemic and/or topical fluoride to inhibit interproximal caries formation; and (6) a situation in which adequate isolation from salivary contamination is possible.⁴⁹

Sealants are not widely used on primary teeth for a few reasons. One of the main reasons is moisture control. Teeth must be kept absolutely dry during etching and sealant application. Because sealants alone are usually done without anesthesia and preschool children have a low tolerance for the discomfort of a rubber dam clamp on nonanesthetized gingiva, rubber dam placement on primary teeth solely for sealant placement is often avoided. Cotton roll isolation can provide adequate dryness of the tooth in cooperative patients, but poor cooperation makes this isolation extremely difficult. A second reason that sealants are not widely used on primary teeth is that the life span of the tooth is limited. If a second primary molar reaches age 6 years without caries, it need only last another 4 to 6 years before it is lost to exfoliation. The cost-effectiveness of sealant placement here should be considered. However, if a child has caries on the occlusal surface of one second primary molar, sealing the contralateral molar to prevent caries is probably prudent.

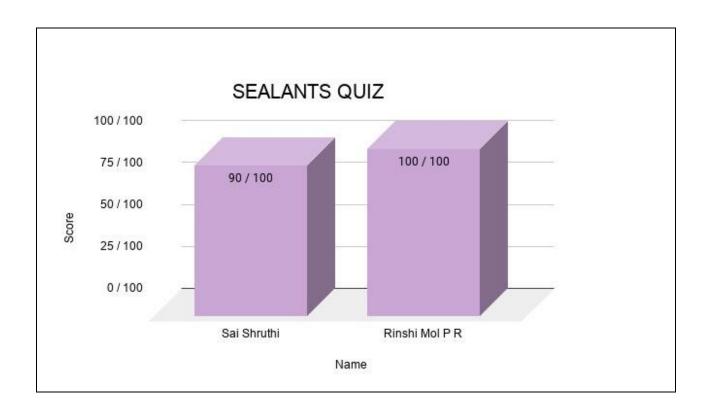
It must be noted that sealant retention on primary molars is similar to that of retention on permanent first molars, that is, 95% after 1 year and 93% after 3 years.⁵⁰ Caries development in the pits and fissures is virtually eliminated when the sealant is retained.

Briefly, the technique involves the following steps: (1) Isolate the tooth from salivary contamination. (2) Clean the tooth surface. *Note*: Cleaning the tooth can be done in? several ways, most often with pumice or prophylaxis paste on a low-speed bristle brush. However, some clinicians use a ½ round or ½ round bur, or Fissurotomy bur (SS White Burs, Inc., Lakewood, N.J.) to "clean out" and widen the fissures in enamel before sealant placement. (3) Acid etch for 15 to 20 seconds. (4) Rinse and dry the surface. (5) (Optional) Apply a bonding agent and gently thin with compressed air. (6) Apply the sealant to the etched surface. (6) Polymerize the sealant. (7) Evaluate the sealant with an explorer. (8) Evaluate and adjust the occlusion.

Google link questionnaire:

https://docs.google.com/forms/d/e/1FAIpQLSexLuH1saCRgcisH_h6O-ADX9J18FLv_2uAyJA4vUBHye8rdQ/viewform?usp=sf_link







Devi Chandrika is inviting you to a scheduled Zoom meeting.

Topic: Space maintainers Final year e- clinics

Time: May 30, 2020 11:45 AM Mumbai, Kolkata, New Delhi

Join Zoom Meeting

https://us04web.zoom.us/j/74312349179?pwd=UHJMb1NnR2ZyTlFvdnMvcmVPVUVHdz09

Meeting ID: 743 1234 9179

Password: 9Vfbbp



