

CHETTINAD DENTAL COLLEGE AND RESEARCH INSTITUTE

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

Reports for Week 6 (04.05.2020 to 09.05.2020)

Theory class sessions

S.No	Date	Batch	Lecture topic	Faculty	No of students participated
1	04.05.2020	Regular	Revision on Biostatistics and Research Methodology	Dr.Jagannatha G.V Dr.Nagaland T	77/77
2	04.05.2020	Supplementary	Systemic Fluorides	Dr.Cyril Benedict H Dr.Nagappan.N	7/7
3	09.05.2020	Regular	Test on Epidemiological studies	Dr.Jagannatha.G.V	76/78
4	09.05.2020	Supplementary	Topical Fluorides	Dr.Nagappan Dr.Nagaland	7/7

Clinical discussions

S.No	Date	Batch	Lecture topic	Faculty	No of students participated
1	04.05.2020 Session 1	Regular	Revision of Indices-1	Dr.Nagaland.T Dr.Cyril Benedict.H	13
2	04.05.2020 Session 2	Regular	Revision of Indices-1	Dr.Nagaland.T Dr.Cyril Benedict.H	13
3	04.05.2020 Session 1	Supplementary	Case-history -1	Dr.Nagappan Dr.Jagannatha.G.V	1
4	04.05.2020 Session 2	Supplementary	Case-History -2	Dr.Nagappan Dr.Jagannatha.G.V	1
5	05.05.2020 Session 1	Regular	Epidemiology of Dental Fluorosis	Dr.Nagappan Dr.Cyril Benedict	13
6	05.05.2020 Session 2	Regular	Epidemiology of Dental Fluorosis	Dr.Nagappan Dr.Nagaland.T	13
7	05.05.2020 Session 3	Regular	Special event- World Asthma Day	Dr.Nagappan Dr.Nagaland T Dr.Jagannatha.G.V Dr.Cyril Benedict	13
8	05.05.2020 Session 1	Supplementary	Case History-I	Dr.Jagannatha.G.V	1
9	05.05.2020 Session 2	Supplementary	Case History- II	Dr.Jagannatha.G.V	1

10	06.05.2020 Session 1	Regular	Quantification of Dental Fluorosis	Dr.Jagannatha.G.V	13
11	06.05.2020 Session 2	Regular	Dean's Fluorosis Indices	Dr.Jagannatha.G.V	13
12	06.05.2020 Session 3	Regular	Combined session with interns' seminar on topic - Dental Radiology	Dr.Jagannatha.G.V Dr.Nagappan Dr.Nagaland T Dr.Cyril Benedict	13
13	06.05.2020 Session 1	Supplementary	Case History- Diet History	Dr.Cyril Benedict Dr.Nagappan	1
14	06.05.2020 Session 2	Supplementary	Case History- Clinical Examination	Dr.Cyril Benedict	1
15	07.05.2020 Session 1	Regular	TFI and TSI for fluorosis	Dr.Jagannatha.G.V	13
16	07.05.2020 Session 2	Regular	Other relevant Indices	Dr.H.Cyril Benedict	13
17	07.05.2020 Session 1	Supplementary	Case History	Dr.Jagannatha.G.V Dr.Nagaland.T	1
18	07.05.2020 Session 2	Supplementary	Case History	Dr.Nagaland.T Dr,Nagappan.N	1
19	08.05.2020 Session 1	Regular	WHO Oral health assessment form 2013	Dr.Nagaland.T Dr.H.Cyril Benedict	13
20	08.05.2020 Session 2	Regular	WHO Oral health assessment form 2013	Dr.Nagaland.T	13
21	08.05.2020 Session 3	Regular	WHO Oral health assessment form 2013	Dr.Nagaland.T	13
22	08.05.2020 Session 1	Supplementary	Case History- Test scenarios	Dr.Nagappan Dr.Jagannatha.G.V	1
23	08.05.2020 Session 2	Supplementary	Case History- Test scenarios	Dr.Nagappan Dr.Jagannatha.G.V	1
24	09.05.2020 Session 1	Regular	Introduction to Preventive Dentistry	Dr.Nagappan.N	13
25	09.05.2020 Session 2	Regular	Introduction to Preventive Dentistry-2	Dr,Nagappan.N Dr.Nagaland.T	13
26	09.05.2020 Session 3	Regular	Article Discussion about Fluorosis	Dr.Nagappan.N	13
27	09.05.2020 Session 1	Supplementary	Oral Hygiene Aids	Dr.Jagannatha.G.V	1
28	09.05.2020 Session 2	Supplementary	Assessment of tobacco use and Cessation	Dr.Jagannatha.G.V	1

Department of Public Health Dentistry

e-theory class Report

Date: 04.05.2020

Time: 2pm – 4pm

Faculty: Dr. Jagannatha GV

Students: IV Year BDS Regular Batch

Discussion topic: Class test: Revision on Biostatistics and Research Methodology

Students present: 77/77

Summary:

The class started with answering the doubts of students regarding the chapter on biostatistics. He explained us about test of significance, null hypothesis, alternate hypothesis, T test (independent and paired), ANOVA, parametric and non-parametric test (he very well explained the difference between them featuring with a tabular column), type 1 and 2 error. He also showed us some videos along with the explanation for our better understanding.

Sir gave us assignments on the following questions which has to be posted by everyone within 9/5/2020

1. Chi square test
2. t test (independent and paired)
3. ANOVA
4. Difference between parametric and non parametric test
5. Null hypothesis
6. Alternative hypothesis



2:15

Close Participants (78)

2:25

Close Participants (79)

Search

P

Prasanth (me)

DJ

Dr. Jagannatha GV (host)

Dr Nagaland

VJ

Vikraman J

AM

Aakifa M

AA

Aamina Afra

Achsah Evangelin

AK

Adithi Karthik

agalya Panneer selvam

Akshayaa Shankar

GP

Gowtham PD

Harish P

Hema Suresh

J

Janani

Jaya Kumar

Jayabalan C

Jineesh M

Johnvee S

KR

Kadambari Ramaswamy

KM

Kanchana Mala

Kauvya Karunanidhi

Invite

Invite

2:25
34

Close
Participants (79)

KM

Kanchana Mala

Kauvya Karunanidhi

Kishan Kumar

KR

Kudiarasi Rajendran

Lakshika Sree

LC

Lalitha Choudhary

Logesh Ram

M Abinandhan

Madhu Bala Sermarajan

Maha srinithi Selvaraj

M

Meghana

Invite

2:26
34

Close
Participants (79)

M

Meghana

MB

Munira Begam

NF

Naafia Fathima

Namarrthaa Sre

nawin Subhaganesh

NN

Neha Naomi

Nehrthika Kumaresan

PK

Padmajaa Krishnan















































Padmajee Selvaraj

Pavithra Harikrishnan

PL

Pavithra lakshmi N

Invite

2:26 4G LTE 34			2:26 4G LTE 34		
Close Participants (79)			Close Participants (79)		
PL	Pavithra lakshmi N	  >	S	sanjana	  >
PR	Pavithra Rajkumar	  >		Santra Joseph	  >
	Pavithra Rathinaswamy	  >	SG	Sathiya Ganesan	  >
P	Prabhavathi.s	  >	SN	Shindhuja N	  >
	Priya Darshini	  >	SS	Shivani Sivaramakrishnan	  >
R	Rakshanaa Jeevan	  >		shruthi priya	  >
	Ram Prasath	  >	SR	Shweta Ranjith	  >
R	Ramu	  >		Sneha D	  >
RS	Ranjani Srinivasan	  >	SS	Sophia srikanth	  >
S	sai	  >		Sowmya Natarajan	  >
S	sanjana	  >	SS	Sruthi S	  >
<div>Invite</div>			<div>Invite</div>		

2:26

VoLTE

34

Close

Participants (79)

SS

Sruthi S

SK

Suba Keerthi

Subashini Natarajan

SV

Sureka Varatharaj

Surya Nandakumar

TS

Tamil Selvan M D

VV

Varshini Venkat

VJ

Vikneshwari Jayabalan

VJ

Vikraman J

VM

Vishalini Mohan

Y

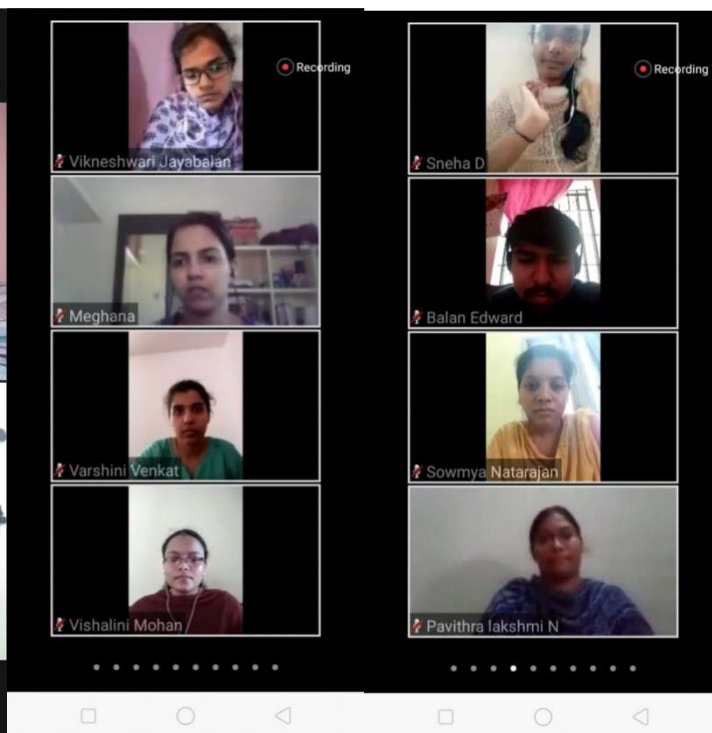
Yuvarani Muthu Kumar

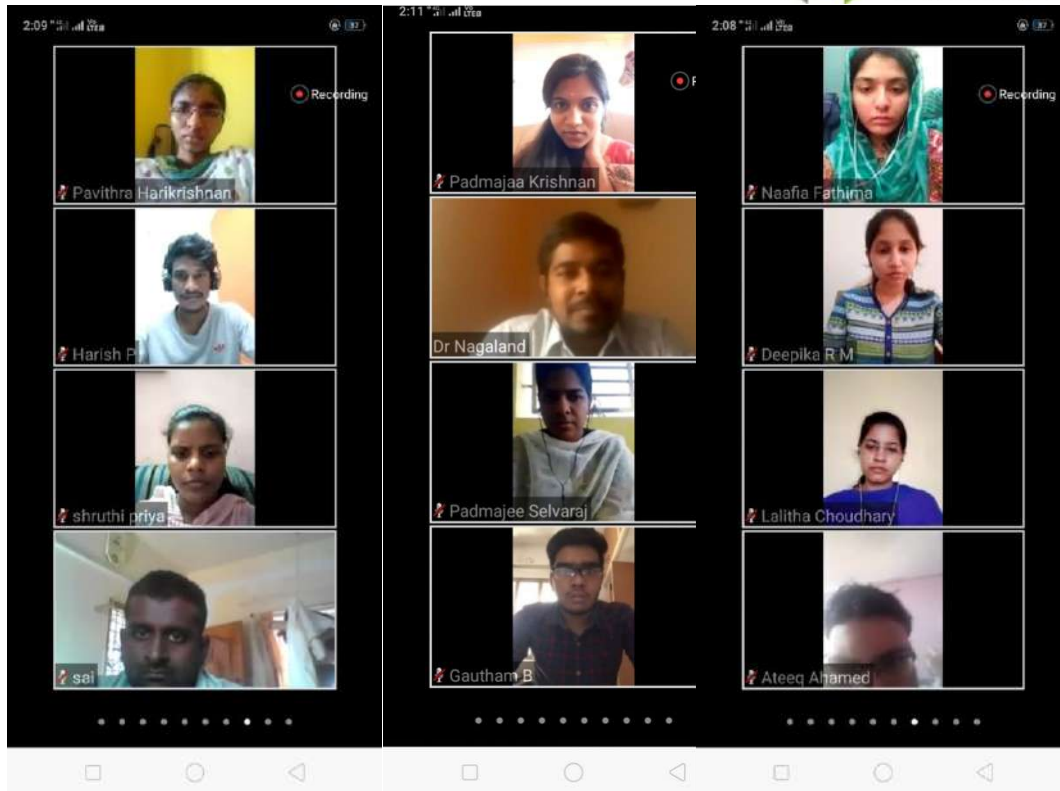
Invite

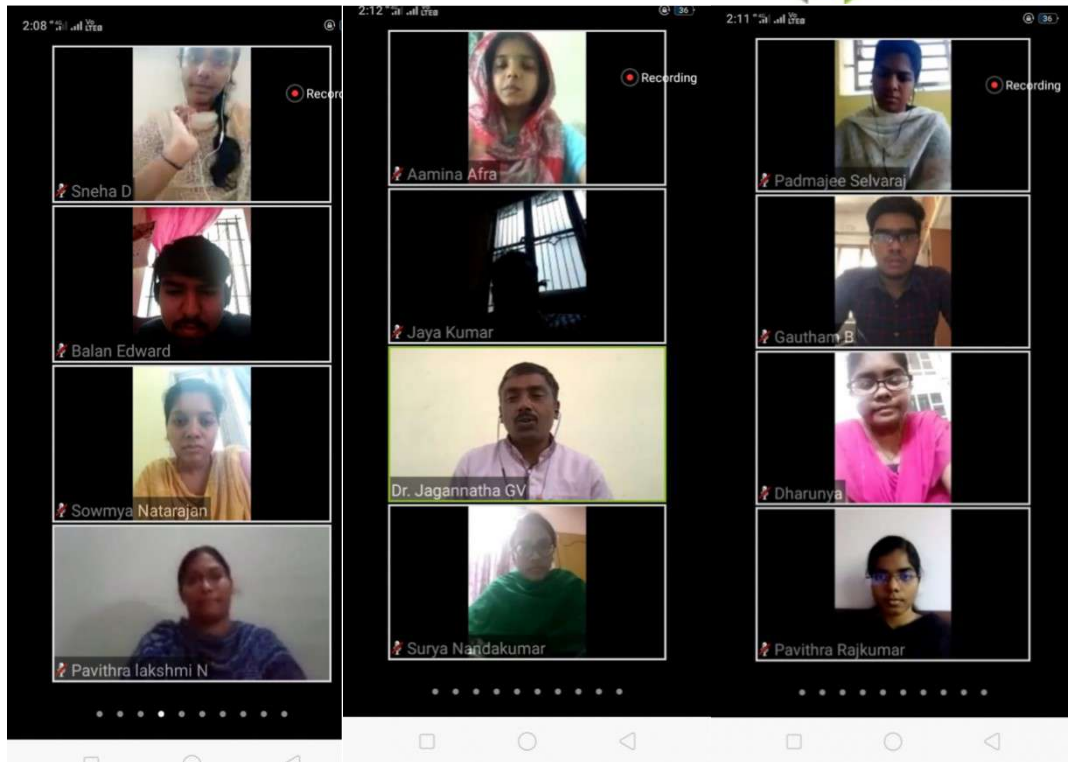
Videos

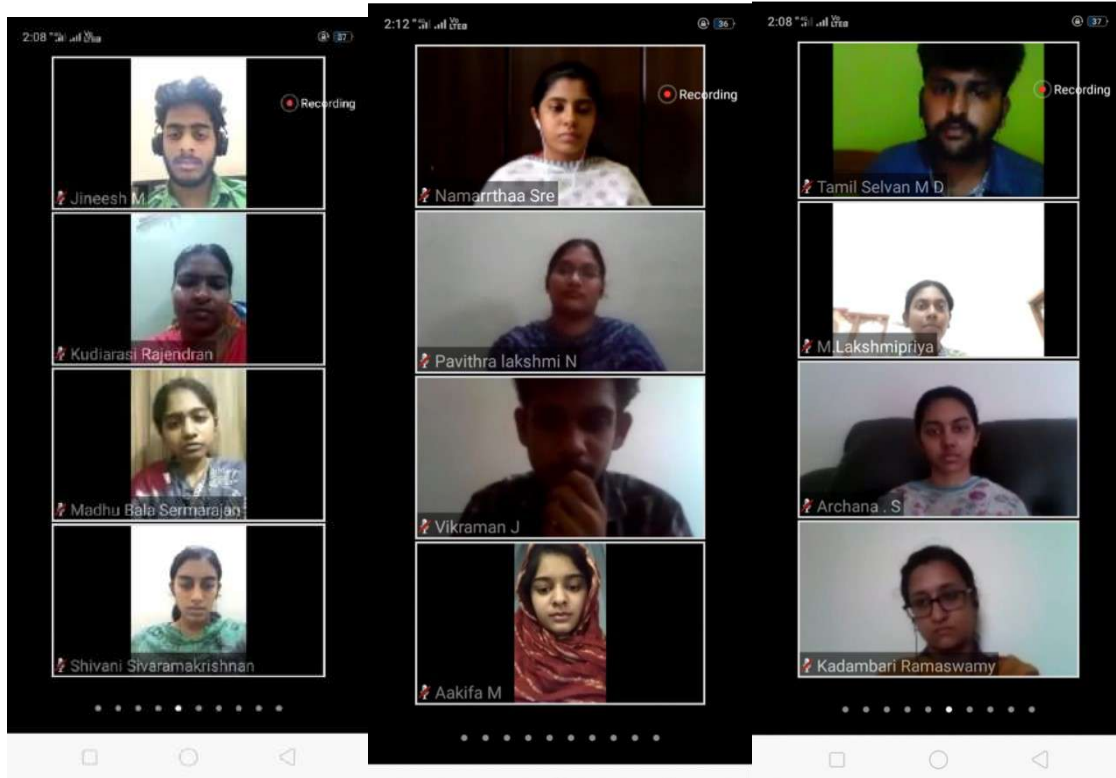


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Presentation by lecturer


Tests of significance

Used to obtain P value to either accept or reject NULL hypothesis

Key factors

- Type of data
- Sample

$t = \frac{\text{variance between groups}}{\text{variance within groups}}$



Parametric and Nonparametric Tests

Parametric Tests	Nonparametric Tests
Independent-Samples T Test	Mann-Whitney Test
Paired-Samples T Test	Wilcoxon Signed-Rank Test
One-way ANOVA	Kruskal-Wallis Test
One-way Repeated Measures ANOVA	Friedman's ANOVA

REPORT FOR THEORY CLASS- FEBRUARY BATCH – 04.05.2020

STAFF INCHARGE: Dr.CYRIL BENEDICT, DR.NAGAPPAN.N

STUDENT INCHARGE: A.HARINI PRABHA

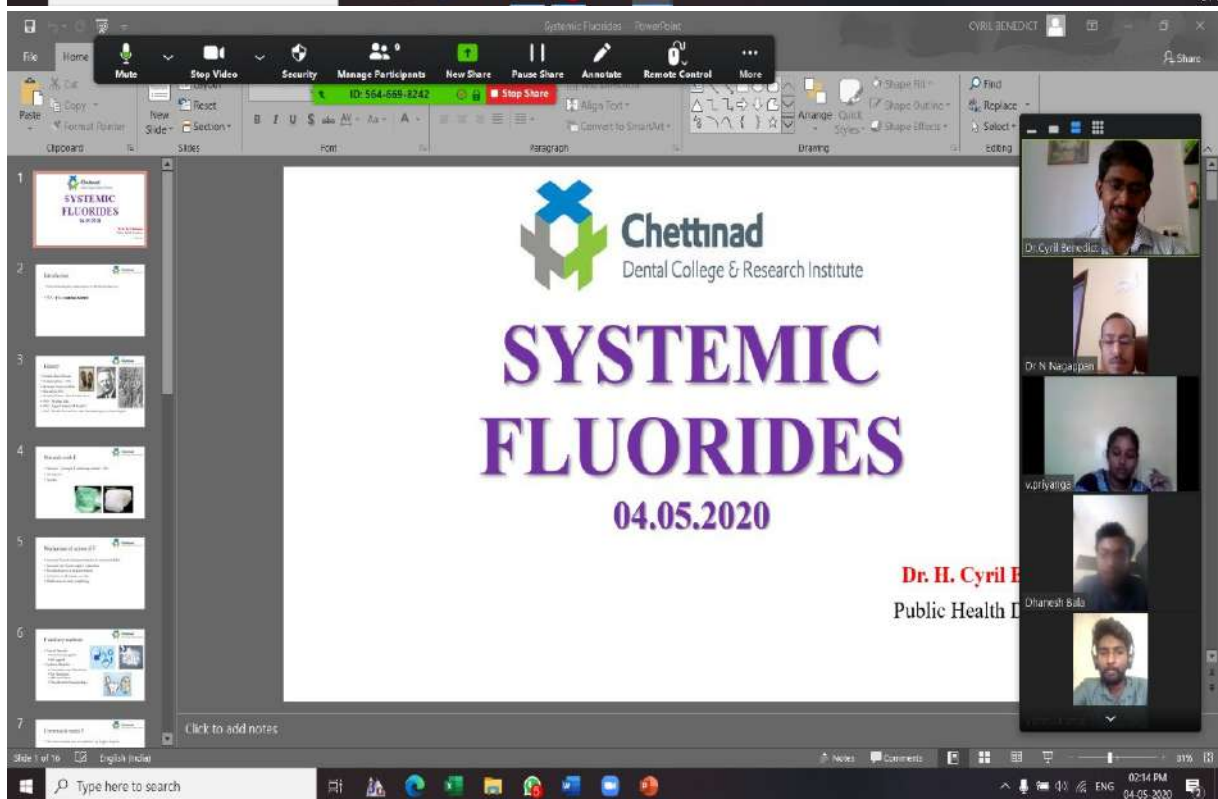
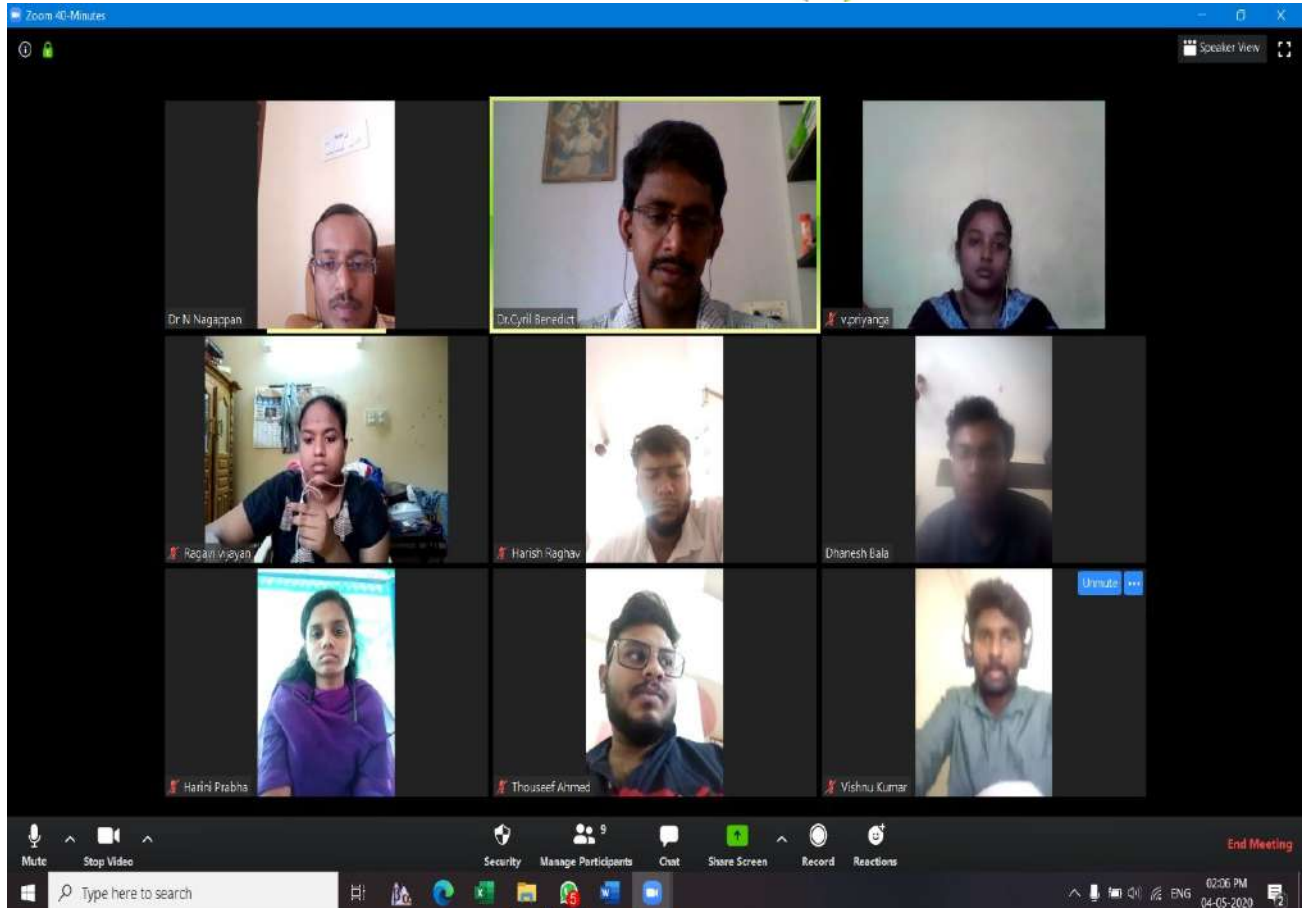
THEORY TOPIC: SYSTEMIC FLUORIDES

TIMING: 2.00 pm to 4.00pm

Total no of students	No. of students present	No of students absent
07	07	NIL

SUMMARY:

The final year BDS supplementary batch students had a Theory class with Dr. Cyril Benedict.H and Dr. Nagappan via E-class from 2 to 4pm on Systemic fluorides. We gave a detailed explanation about • Fluorides, Fluoride delivering methods, Systemic fluorides, Controlled water fluoridation studies, Community water fluoridation, Fluoride components ,Estimation of Fluoride concentration in drinking water, Types of equipment for water fluoridation- Venturi Fluoridation system, Saturator feeder, Dry feeder, School water fluoridation- Vermillion Galagan formulae, Salt fluoridation, Milk Fluoridation, ADA recommendations for fluoride ,Toxicity - Acute and Chronic



Systemic Fluorides - PowerPoint

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Clipboard Paste Cut Copy Format Painter New Slide Layout Reset Section Slides Font Paragraph Drawing Shape Fill Shape Outline Shape Effects Find Replace Select

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Chettinad Dental College & Research Institute

Mechanism of action of F

- Increased Enamel resistance/reduction in enamel solubility
- Increased rate of post eruptive maturation
- Remineralization of incipient lesions
- Interference with plaque microbes
- Modification in tooth morphology

Click to add notes

Slide 5 of 16 English (India)

Type here to search

02:15 PM 04-05-2020

Dr. Cyril Benedict

Dr. N. Nagappan

prityanga

Dhanesh Bala

Vishnu Kumar

Systemic Fluorides - PowerPoint

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Clipboard Paste Cut Copy Format Painter New Slide Layout Reset Section Slides Font Paragraph Drawing Shape Fill Shape Outline Shape Effects Find Replace Select

ID: 564-669-8242 Stop Share

Chettinad Dental College & Research Institute

Nalgonda technique for defluoridation

- NEERI at Nagpur

Addition of

- Filter alum
- Lime
- Bleaching powder

Click to add notes

Slide 10 of 16 English (India)

Type here to search

03:37 PM 04-05-2020

Dr. Cyril Benedict

Vishnu Kumar

Harish Raghav

Regani Vijayar

Dhanesh Bala

Systemic Fluorides - PowerPoint

CYRIL BENEDICT

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Clipboard Paste Copy Cut Format Painter New Slide Layout Reset Section Slides Font Paragraph

7 8 9 10 11 12 13 14

Remaining Meeting Time: 04:05 Stop Share

❖ Salt F

Wespi in Switzerland – 1948
200/250 and 350 mg F/of kg Salt
Several advantages

❖ Milk Fluoridation

Zeigler in Switzerland in 1953

Click to add notes

Slide 13 of 16 English (India)

Type here to search

Notes Comments

03:21 PM 04-05-2020

Thouseef Ahmed Dr.Cyril Benedict Dhareesh Bale vipriyanga Ragesh Vijayan Vishnu Kumar Harish Raghav Harini Prabha

14:20 4G LTE 58

Close

Participants (9)

Search



Harini Prabha (me)



Dr. Cyril Benedict (host)



Dhanesh Bala



Dr N Nagappan



Harish Raghav



v.priyanga



Vishnu Kumar



Ragavi vijayan



Thouseef Ahmed



raise hand



yes



no



go slower



go faster



more

Invite

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report
Session I : 9:45AM – 10:25 AM

Date: 04.05.2020

Faculty: Dr. NAGALAND T
Dr. CYRIL BENEDICT

Students: IV Year Regular Batch –E

Students Present: 13/13

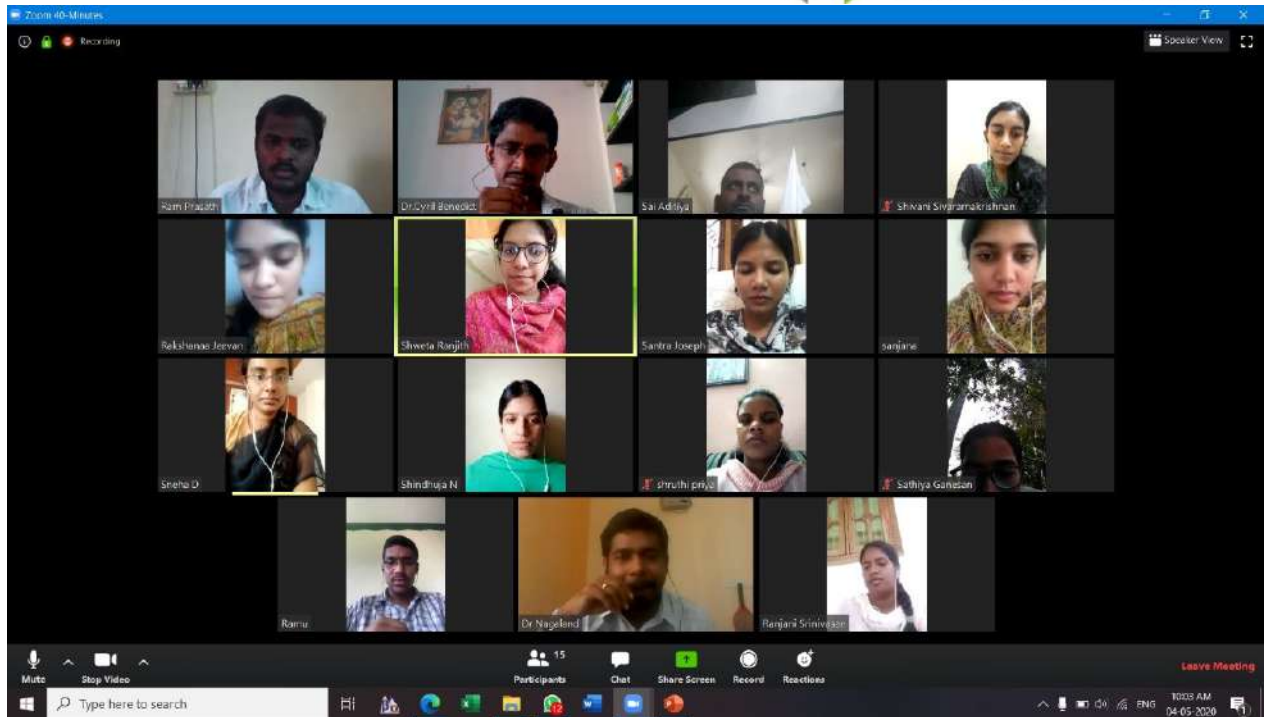
Total No of Students: 13/13(E-batch)


1. RAKSHANA.J 2. RAM PRASATH 3.RAMU.G 4. RANJINI TS
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA


Discussion topic: REVISION OF INDICES


Summary:


The E batch, Final year BDS students had discussion regarding the revision of indices between 9:45AM to 10:25AM via ZOOM app. The discussion for the first session was on Oral hygiene Index, Simplified Oral hygiene index and DMFT Index and about the definition of indices and explained about it's need, then the years of the indices when they were introduced. This was followed by a detailed discussion on OHI, OHI-S, DMFT about the authors, drawbacks, scoring criteria and interpretation. All the students were present for the session.





 Participants (15)


 Find a participant


 Dr.Cyril Benedict (Me)


 Ram Prasath (Host)


 Dr Nagaland


 Ranjani Srinivasan


 Shivani Sivaramakrishnan


 Shweta Ranjith


 Rakshanaa Jeevan


 Ramu


 Sai Aditiya


 sanjana

 Santra Joseph

 Sathiya Ganesan

 Shindhuja N

 shruthi priya

 Sneha D

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report
Session II: 10:30AM – 11:10AM

Date: 04.05.2020

Faculty: Dr. NAGALAND T
Dr. CYRIL BENEDICT

Students: IV Year Regular Batch –E

Students Present: 13/13

Total No of Students: 13/13(E-batch)

1. RAKSHANA.J 2. RAM PRASATH 3.RAMU.G 4. RANJINI TS
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

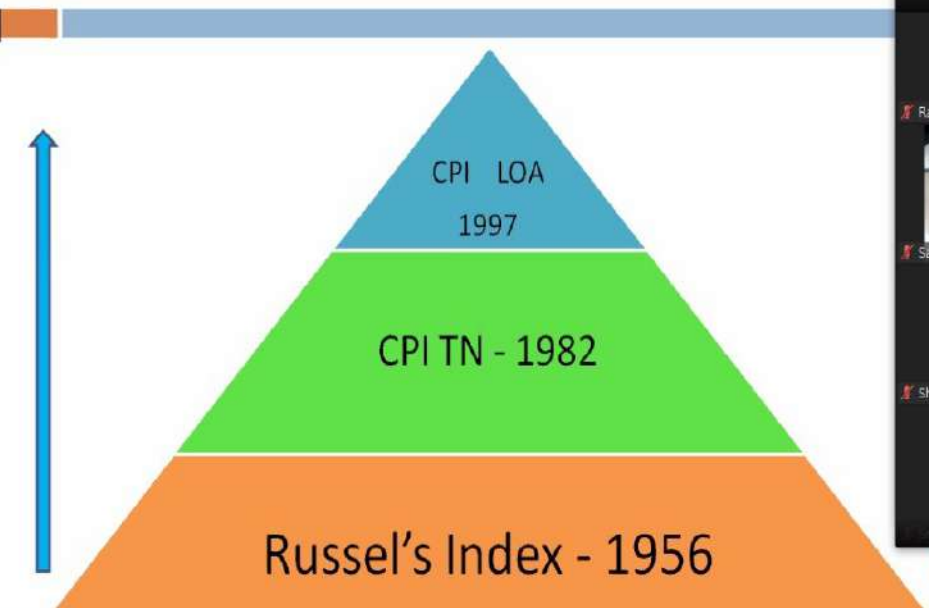
Discussion topic: REVISION OF INDICES CONTINUATION

Summary:

The E batch, Final year BDS students had a continuation of Indices revision from 10:30am-11:10 am through Zoom App. The discussion was about Russell's Periodontal Index, CPITN, and CPI, about the year it was introduced, the authors, instruments used and description about the instruments, regarding the scoring criteria and clarified the doubts about these indices. Discussion continued about the evolution of Russell's Index to CPITN and then to CPI, about the drawbacks of each which led to the new indices. The difference between periodontal pocket and gingival recession was explained.

Recording... You are viewing Dr Nagaland's screen View Options

Evolution of Periodontal Indices



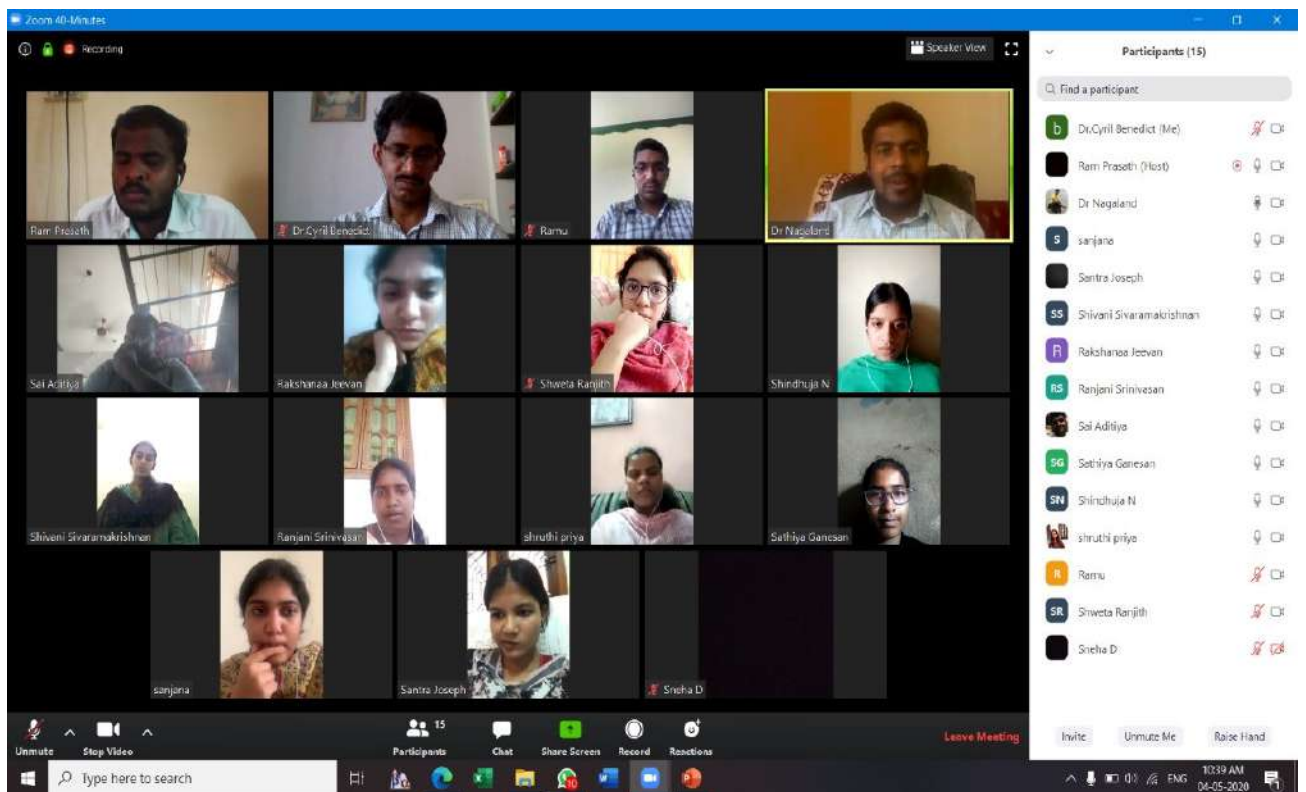
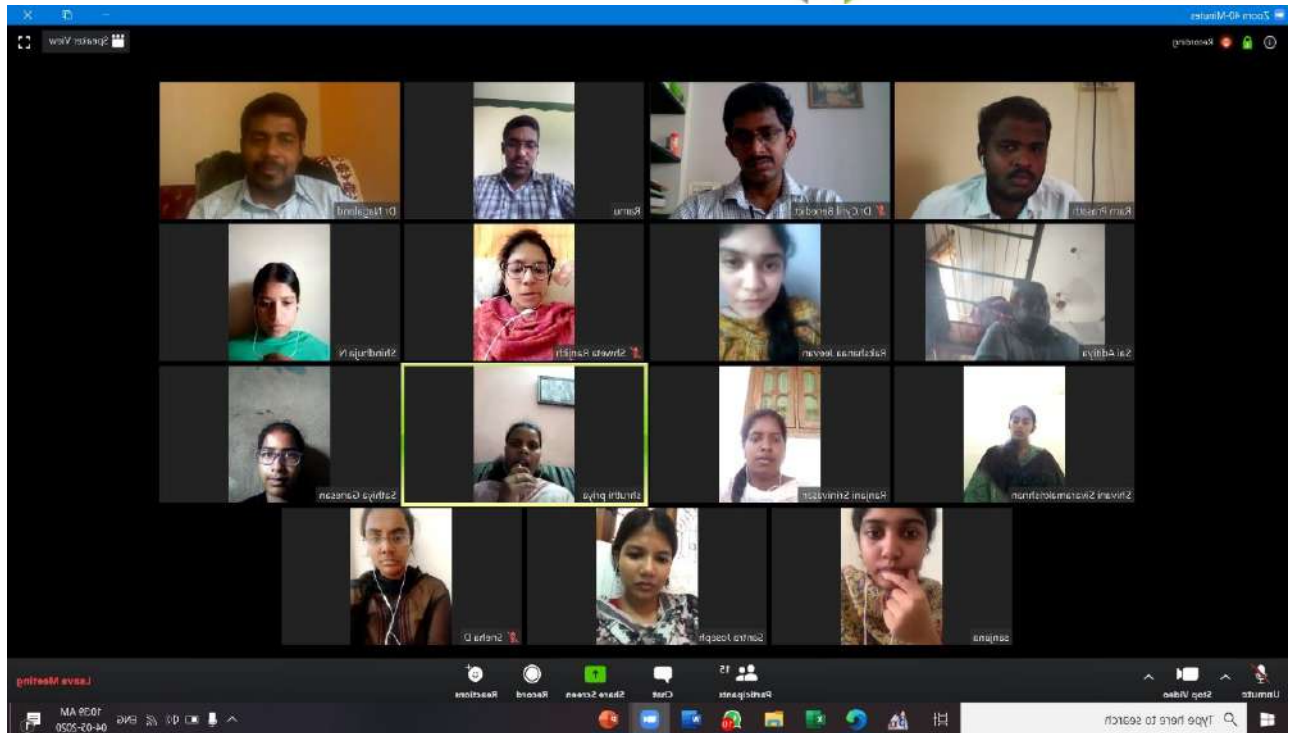
CPI LOA
1997

CPI TN - 1982

Russel's Index - 1956








































Ranjani Srinivasan
Sai Aditya
Shivani Sivaramakrishna...

Mute Stop Video Security Manage Participants Chat Share Screen Pause/Stop Recording Reactions End Meeting








Participants (15)

	Dr Nagaland	  >
	Rakshanaa Jeevan	  >
	Ranjani Srinivasan	  >
	Sai Aditiya	  >
	sanjana	  >
	Shindhuja N	  >
	Shivani Sivaramakrishnan	  >
	shruthi priya	  >
	Sneha D	  >
	Dr.Cyril Benedict	  >
	Ramu	  >
	Santra Joseph	  >
	Sathiya Ganesan	  >

Invite





10:29 AM    ...



Close **Participants (15)**


SR

Shweta Ranjith (me)



  >

Ram Prasath (host)

  >





Dr Nagaland

  >



R

Rakshanaa Jeevan

  >



R


Ramu

  >



RS

Ranjani Srinivasan

  >





Sai Aditiya

  >



S

sanjana

  >



SN


Shindhuja N

  >



SS

Shivani Sivaramakrishnan



  >



shruthi priya



  >

Sneha D

  >

b

Dr.Cyril Benedict

  >

Invite



CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical e-discussion Report
Session: 10.45 AM – 12.00 PM

Date:04.05.2020

Faculty: Dr. N Nagappan (Faculty In charge)
Dr. Jagannath G.V

Students: IV Year Supplementary Batch –B
Students Present: 1/1
Total No of Students: 1/1
1. Dhanesh bala.K.R


Discussion topic: CASE HISTORY

Summary:


The B batch , Final year supplementary BDS student had discussion with the chief complaint and history of presenting illness.

The discussion for the second session was on chief complaint and history of presenting illness of case history and discussed about various scenarios of history of presenting illness and gave an assignment on history of presenting illness of dental caries, periodontal disease, bad breath, sensitivity and food lodgement.

12:57 PM 34% 4G+ VoLTE

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 Recording






Presentation (1)

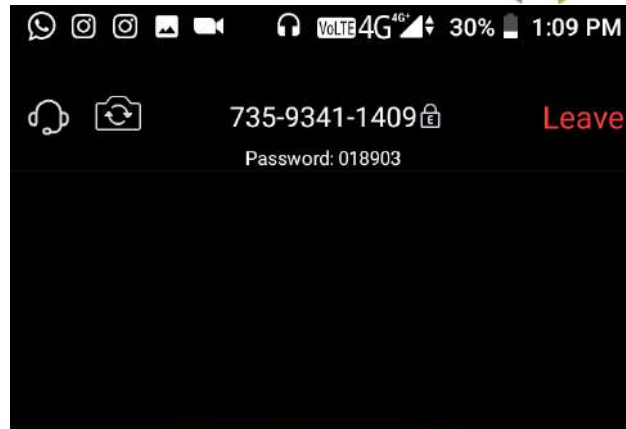
Chettinad Dental College & Research Institute

- **RELAPSE AND REMISSION** - Similar complaint in the PAST and then again it relapse.
- **TREATMENT**- If the Pt. Has taken any treatment for the same problem ,the mode of treatment and doctor who has treated the patinet should be recorded.
- **NEGATIVE HISTORY**- to rule out other differential diagnosis.






Notes















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TOTAL NUMBER OF PATIENTS INCLUDED			75	Chettinad Dental College & Research Institute	
CHIEF COMPLAINT	NUMBER OF PATIENTS	PERCENTAGE			
PAIN	16	21.3%			
DEPOSITS	13	17.3%			
DECAY	11	14.7%			
MISSING TEETH	10	13.3%			
SENSITIVITY	9	12.1%			
BROKEN TOOTH	7	9.3%			
MOBILITY	3	4%			
TOOTH DISCOLORATION	2	2.7%			
BURNING MOUTH	2	2.7%			
GUM SWELLING	1	1.3%			
BAD BREATH	1	1.3%			

31    4G  38%  12:37 PM

Close **Participants (4)**

	Dhanesh Bala (me)	  >
	v.priyanga (host)	  >
	Dr N Nagappan	  >
	Dr. Jagannatha GV	  >

 Invite



Department of Public Health Dentistry

Clinical E-discussion Report

Date: 02.05.2020

Session II: 12:20 pm – 1:00 pm

Faculty: Dr. Jagannatha GV

Dr. Nagappan N

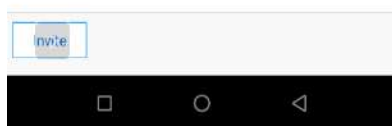
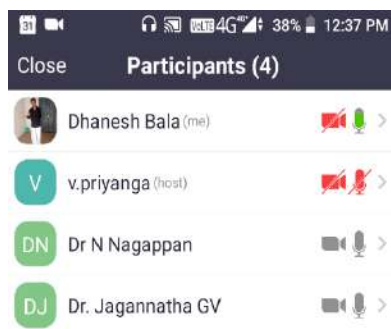
Students: IV Year February Batch: 1/1

1. Danesh Bala

Discussion topic: History of Presenting Illness

Summary:

The discussion for the second session was on chief complaint and history of presenting illness of case history and discussed about various scenarios of history of presenting illness and gave an assignment on history of presenting illness of dental caries, periodontal disease, bad breath, sensitivity and food lodgment with clinical scenarios.



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Password: 018903

Recording

Chettinad
Dental College & Research Institute

- **RELAPSE AND REMISSION** - Similar complaint in the **PAST** and then again it relapse.
- **TREATMENT** - If the Pt. Has taken any treatment for the same problem, the mode of treatment and doctor who has treated the patient should be recorded.
- **NEGATIVE HISTORY** - to rule out other differential diagnosis.

Mute Stop Video Share Participants More

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Chettinad
Dental College & Research Institute

CHIEF COMPLAINT	NUMBER OF PATIENTS	PERCENTAGE
PAIN	16	21.3%
DEPOSITS	13	17.3%
DECAY	11	14.7%
MISSING TEETH	10	13.3%
SENSITIVITY	9	12.1%
BROKEN TOOTH	7	9.3%
MOBILITY	3	4%
TOOTH DISCOLORATION	2	2.7%
BURNING MOUTH	2	2.7%
GUM SWELLING	1	1.3%
BAD BREATH	1	1.3%

Mute Stop Video Share Participants More

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical e-discussion Report
Session I: 10.45AM – 11.25AM

Date:05.05.2020

Faculty: Dr. NAGAPPAN N (Faculty Incharge)
Dr. CYRIL BENEDICT

Students: IV Year Regular Batch –E

Students Present: 13/13

Total No of Students: 13/13(E-batch)

1. RAKSHANA.J 2. RAM PRASATH 3.RAMU.G 4. RANJINI TS
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: EPIDEMIOLOGY OF DENTAL FLUOROSIS

Summary:

The discussion on for the first session was on epidemiology of dental fluorosis which started with brief introduction about fluorides which includes the term, sources ,dietary supplies which has rich fluoride content, classification and about epidemic, endemic and pandemic diseases with examples which is then followed by detailed explanation about fluorosis its definition, types, and fluorosis affected areas in India and tamilnadu . This session was an interactive session.

4G 11:18 ... You 4G 59



Ranjani Srinivasan



Shindhujia N



Shweta Ranjith



Sneha D

Recording

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🏠

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5G 11:22 ... 59



shruthi priya



Ramu Ganesan



Ram Prasath



Dr N Nagappan

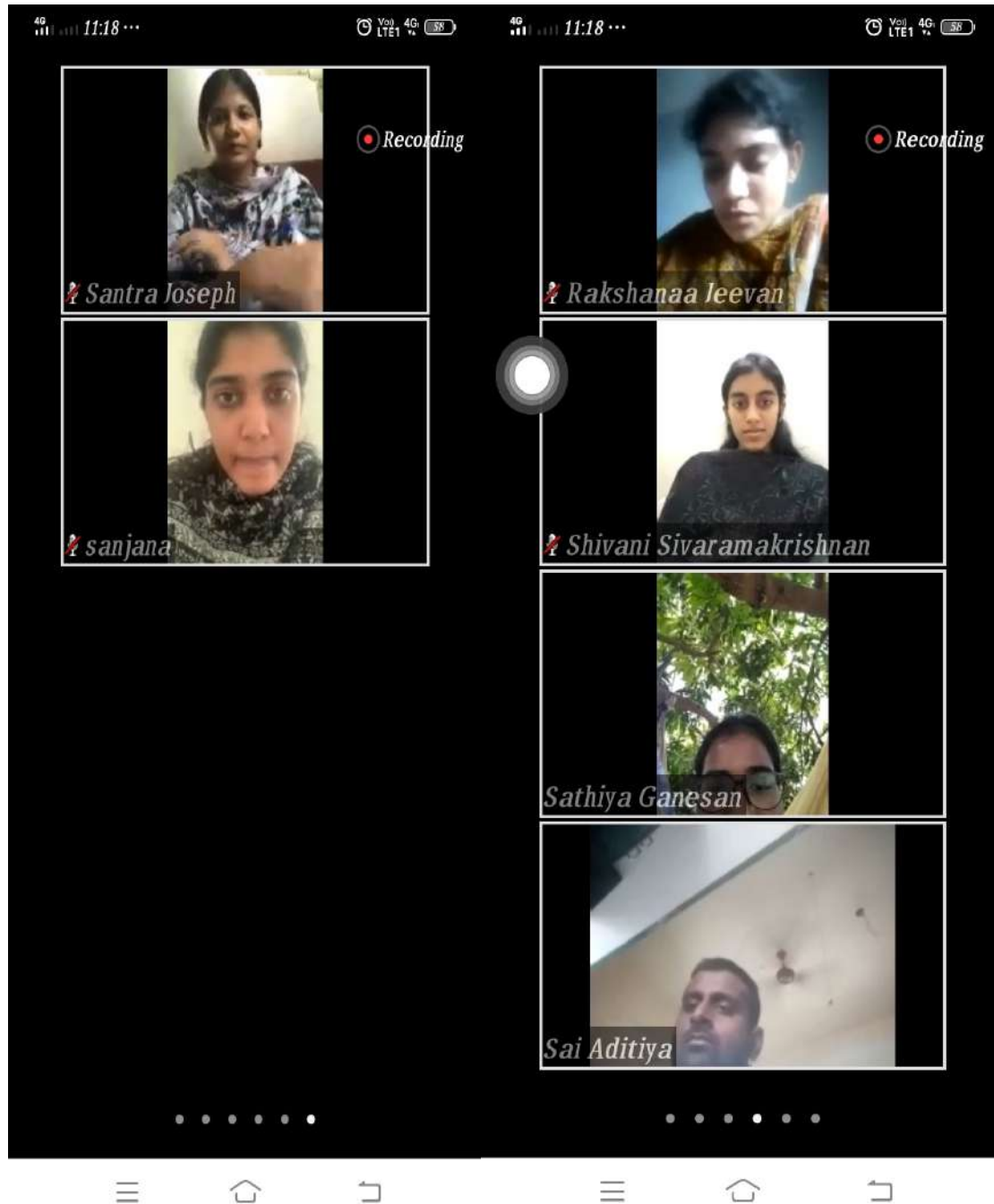
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Unmute Stop Video Share Participants More

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Zoom 45 Minutes | You are viewing Ram Prakash's screen | View Options

Recording

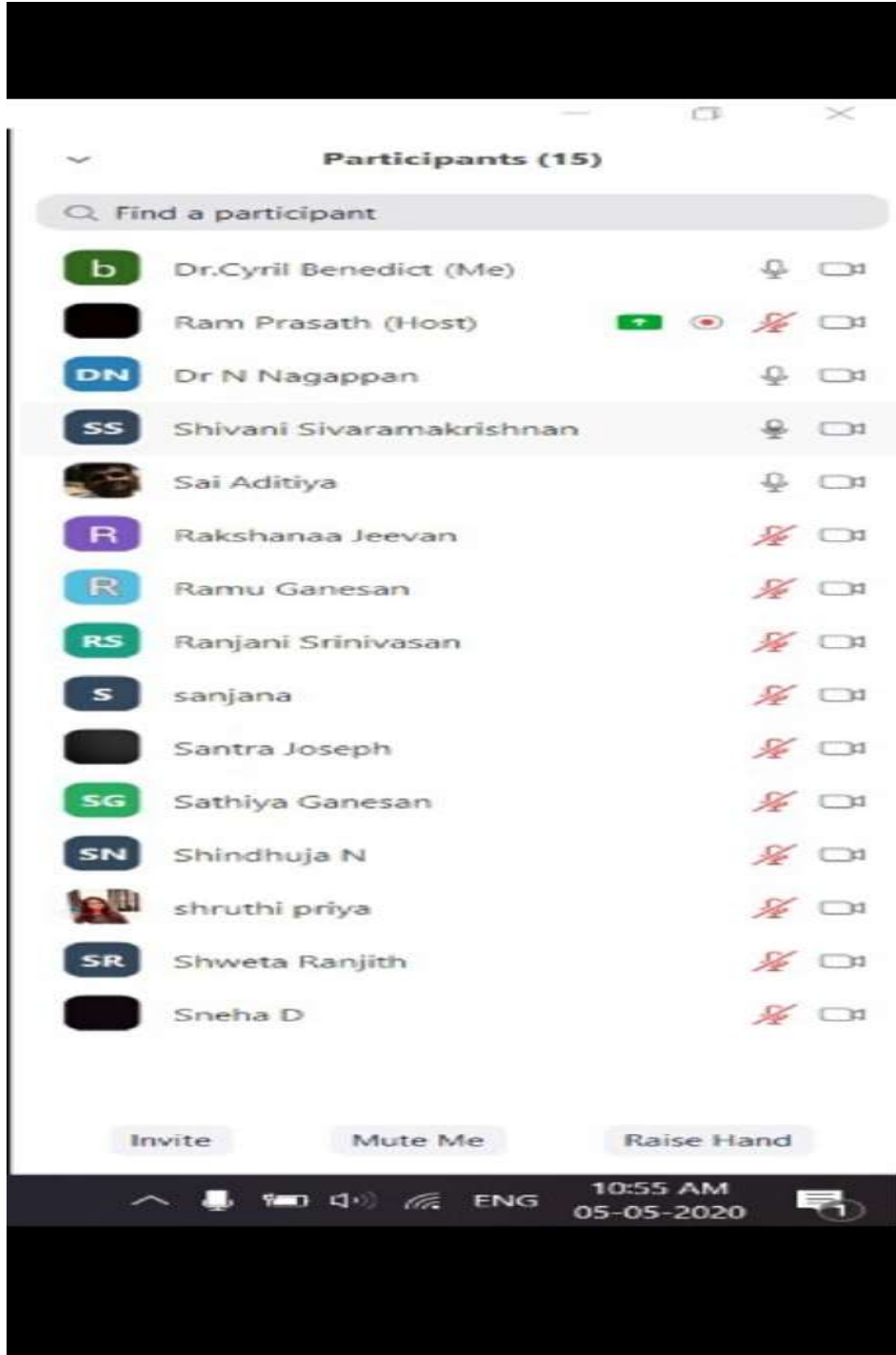
Epidemiology of FLUOROSIS

Participants:

- Aruna Ganesan
- Dr. Cybil Benetick
- Ram Prakash
- Sriyani Swaminathan
- Shreya Rangin
- Shruti Priya
- Dr. N. Nagapalan
- Rakshana Jayaraman
- Geetha Ganesan
- Shrindhuja N
- Sneha D
- Ranjani Ganesan
- Sargana
- Dr. Ashya
- Satma Rajan

Windows Taskbar: Type here to search | Taskbar icons: File Explorer, Edge, Word, PowerPoint, Teams, Zoom, etc. | System tray: Network, Volume, Date/Time (11:02 AM)

ATTENDANCE SHEET:



Participants (15)

Find a participant

Initials	Name	Microphone	Video
b	Dr.Cyril Benedict (Me)	On	On
	Ram Prasath (Host)	On	On
DN	Dr N Nagappan	On	On
SS	Shivani Sivaramakrishnan	On	On
	Sai Aditiya	On	On
R	Rakshanaa Jeevan	Off	On
R	Ramu Ganesan	Off	On
RS	Ranjani Srinivasan	Off	On
S	sanjana	Off	On
	Santra Joseph	Off	On
SG	Sathiya Ganesan	Off	On
SN	Shindhuja N	Off	On
	shruthi priya	Off	On
SR	Shweta Ranjith	Off	On
	Sneha D	Off	On

Invite Mute Me Raise Hand

10:55 AM
05-05-2020

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical e-discussion Report
Session II: 11:30AM – 12:30PM

Date:05.05.2020

Faculty: Dr. NAGAPPAN (Faculty Incharge)
 Dr.NAGALAND T

Students: IV Year Regular Batch –E

Students Present: 13/13

Total No of Students: 13/13(E-batch)

1. RAKSHANA.J 2. RAM PRASATH 3.RAMU.G 4. RANJINI TS
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: EPIDEMIOLOGY OF FLUROSIS [CONTINUATION]

Summary:

In this session detail about epidemiological triad and its environmental, host and agent factors, metabolism of fluoride in body, effects of consuming water containing fluoride and clinical presentation of fluorosis affected people. Spoke about the classification of flurosis which includes skeletal, non- skeletal and dental flurosis and its toxicity. Sir also explained about the systemic fluoridation which includes the milk, salt and water fluoridation and its advantages and disadvantages. And this session was an interactive session.


































ATTENDANCE SHEET:

Close Participants (15)



























Search

	shruthi priya(me)	  >
	Ram Prasath(host)	  >
DN	Dr N Nagappan	  >
	Dr Nagaland	  >
R	Rakshanaa Jeevan	  >
R	Ramu Ganesan	  >
RS	Ranjani Srinivasan	  >
	Sai Aditiya	  >
S	sanjana	  >
	Santra Joseph	  >
SG	Sathiya Ganesan	  >

Chats Invite

Close Participants (15)

Dr Nagaland

R	Rakshanaa Jeevan	  >
R	Ramu Ganesan	  >
	Ranjani Srinivasan	  >
	Sai Aditiya	  >
S	sanjana	  >
	Santra Joseph	  >
SG	Sathiya Ganesan	  >
SN	Shindhuja N	  >
SS	Shivani Sivaramakrishnan	  >
SR	Shweta Ranjith	  >
	Sneha D	  >

Chats Invite

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical e-discussion Report
Session II: 3.00PM – 4:15PM

Date:05.05.2020

Faculty: Dr.G.V.JAGANNATHA
Dr.NAGAPPAN N
Dr.NAGALAND T
Dr. CYRIL BENEDICT H

Students: IV Year Regular Batch –E

Students Present: 13/13

Total No of Students: 13/13(E-batch)

1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: COMBINED SESSION – SPECIAL EVENT ON WORLD ASTHMA DAY

Summary:

The third session was combined session with all the faculty members of department of public health dentistry, interns and the final year students. We had special event on WORLD ASTHMA DAY (05.05.2020) to create awareness among people. In which we presented the power point presentation on bronchial asthma in detail and also pamphlets, e-posters, logo designing, e badge, pencil sketching and few drawings on symptoms and signs of asthma its medical management and dental management along with its oral manifestations . we also had a image quiz with interns and staffs on the topic ‘who is who in dentistry’ which was not related to our event but was about the pioneers of various discoveries in dentistry which was very much interactive and interesting. This discussion enlightened everybody’s knowledge and awareness about asthma.....

Recording

Speaker View Exit Full Screen



2/2


Unmute Stop Video

Participants 40 Chat Share Screen Record Reactions

Leave Meeting

Recording

Speaker View Exit Full Screen



1/2

Unmute Stop Video

Participants 40 Chat Share Screen Record Reactions

Leave Meeting

Recording

You are viewing shindhuja's screen

EMERGENCY OF ASTHMA IN DENTAL PRACTICE

A common lung disorder in which inflammation causes the bronchi to swell and narrow the airways, creating breathing difficulties that may range from mild to life-threatening.

An acute episode of asthma in the dental office may be precipitated by extrinsic factors such as inhaled allergens, as well as intrinsic factors such as fear or anxiety.

proper history symptoms

An asthma episode should be considered a **medical emergency** and must be treated promptly by inhalation of a bronchodilating agent.

Relieved of irritants

2-3 Inhalations every 1-2 minutes

1:1000 solution s.c., i.m. 0.3mg (adults) 0.15mg (children)

Slow I.v.

Participants 40 Chat Share Screen Record Reactions

Leave Meeting

Participants: Ram Prasath, Dr. Jagannatha Gv., Dr. Nacaland, Shivani Sivaremakrishnan

Recording

Remaining Meeting Time: 07:07

DEFINITION

Bronchial asthma is a chronic inflammatory disease of airways produced by hypersensitive inflammatory response of tracheobronchial tree to a wide variety of stimuli resulting in reversible narrowing of air passages.

The attacks of asthma are typically short lived and are characterised by cough, Wheeze and dyspnoea.

NORMAL LUNG

Muscle relaxed

Normal lining

Normal amount of mucus

ASTHMATIC LUNG

Muscle tightens

Swollen lining

Excess mucus

AIRWAY

Participants: Ransanthy Suresh, Clement Solomon, Shahana Fathima S.

Recording You are viewing standin... View Options 00:22:10 Speaker View Exit Full Screen

PATHOPHYSIOLOGY

Participants: 39 Chat Share Screen Record Reactions Leave Meeting

Recording You are viewing standin... View Options

OF ASTHMA

CANDIDIASIS AND DRY MOUTH

DENTAL CARIES

GINGIVAL ENLARGEMENT

MALOCCLUSION

DEPT OF PUBLIC HEALTH DENTISTRY E BATCH





































Participants: 39 Chat Share Screen Record Reactions Leave Meeting

ATTENDANCE SHEET:

3:48 PM 4G 43%

Close **Participants (40)**





































Search

	Sneha D (me)	  >
	Ilavarasi Kamatchi nat... (host)	  >
	Dr Nagaland	  >
	Dr.Cyril Benedict	  >
	Shivani Sivaramakrishnan	  >
	shruthi priya	  >
	Akansha Stephen	  >
	Clement Solomon	  >
	Dhanesh Bala	  >
	DILSHAD BANU	  >
	Dr N Nagappan	  >
		  >

Invite

3:48 PM 4G 43%

Close **Participants (40)**

	Ramu Ganesan	  >
	RaniSanthiya Suresh	  >
	Ranjani Srinivasan	  >
	Raveena	  >
	Rebecca Joseph	  >
	Sai Aditiya	  >
	sanjana	  >
	Santra Joseph	  >
	Sathiya Ganesan	  >
	Shahana Fathima S	  >
	Shanmadhy Srinivasan	  >
	Shanmuga Priyan	  >

Invite

Department of Public Health Dentistry

Clinical E-discussion Report

Date: 05.05.2020

Session II: 10:55 am – 11:45 am

Faculty: Dr. Jagannatha GV

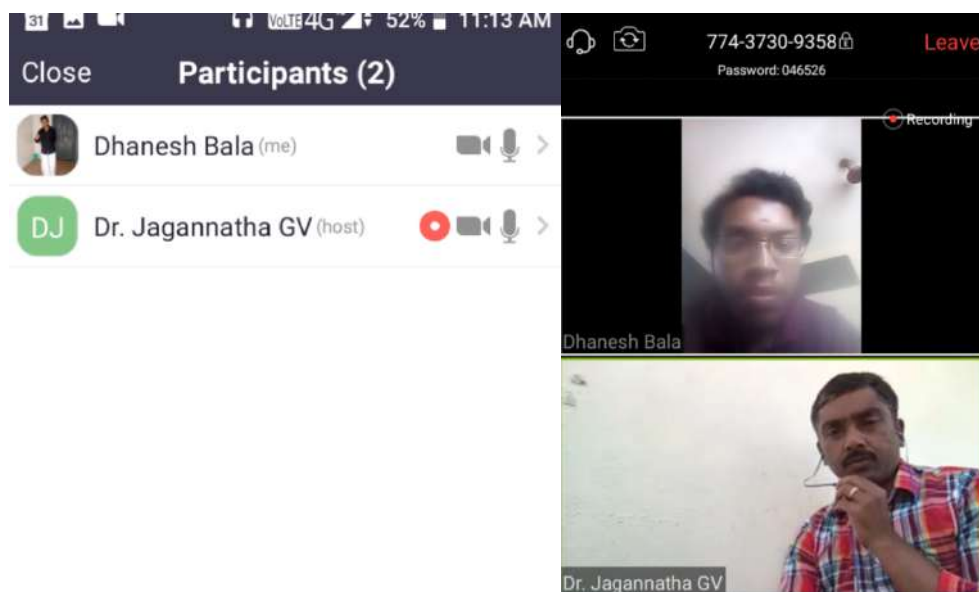
Students: IV Year February Batch: 1/1

1. Danesh Bala

Discussion topic: Medical History Part 1

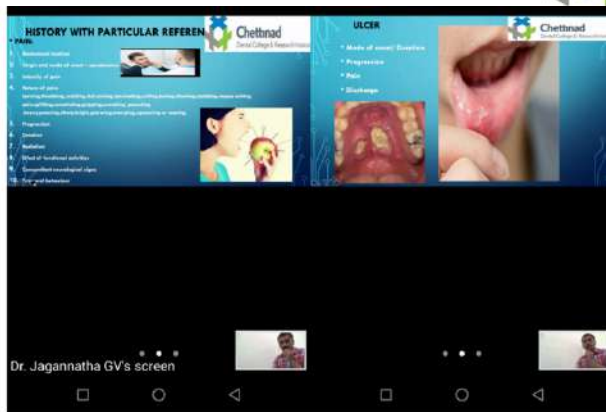
Summary:

The discussion for the first session was on past medical history and its significance. The importance of assessing the systemic condition of the patient is emphasised. The two-way interaction between systemic health and oral health especially periodontitis and focal infection was explained. The systematic yet simple and comprehensive method of eliciting patient's medical history using the alphabetical order was made aware.





Chettinad
Dental College & Research Institute



Department of Public Health Dentistry

Clinical E-discussion Report

Date: 05.05.2020

Session II: 12:55 am – 1:45 am

Faculty: Dr. Jagannatha GV

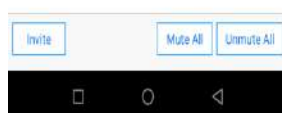
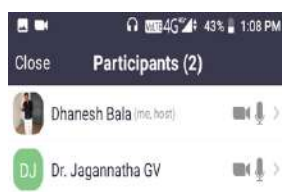
Students: IV Year February Batch: 1/1

1. Danesh Bala

Discussion topic: Medical History Part 2, Past Dental History and Family history

Summary:

Continuing with the discussion of medical history, clinical examples were given about the common medical conditions to be understood while handling a patient in dental set up. Further case history discussion was on past dental history. In this the importance of understanding the dental visit history of the patient to ascertain dental awareness of the patient was explained. The need to create an awareness to a patient who has not visited the dentist before and assess the reasons for it was emphasised. The need relevance of family history about familial transmission, shared dietary habits and exposure of children to the personal habits of the family members and their influence on them was also explained.

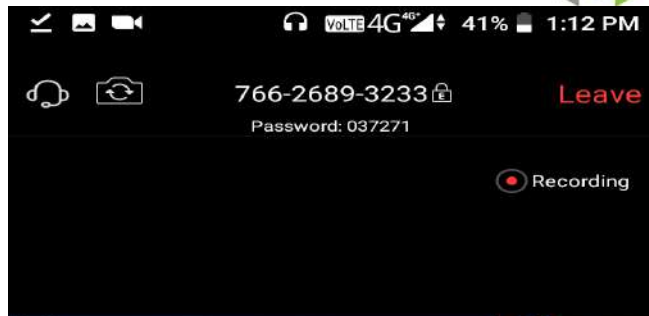




Chettinad

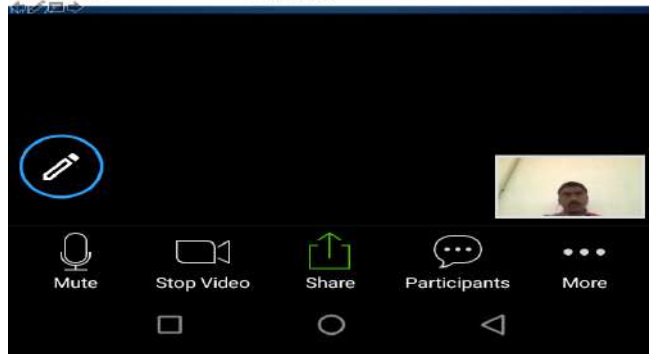
Dental College & Research Institute





Please indicate if **YOU** have a history of the following:

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|--|--|--|
| <input type="checkbox"/> Alcohol Abuse | <input type="checkbox"/> Growth/Development Disorder | <input type="checkbox"/> Migraines |
| <input type="checkbox"/> Anemia | <input type="checkbox"/> Hearing Impairment | <input type="checkbox"/> Osteoporosis |
| <input type="checkbox"/> Anesthetic Complication | <input type="checkbox"/> Heart Attack | <input type="checkbox"/> Prostate Cancer |
| <input type="checkbox"/> Anxiety Disorder | <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Rectal Cancer |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Heart Pain/Angina | <input type="checkbox"/> Reflux/GERD |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Hepatitis A | <input type="checkbox"/> Seizures/Convulsions |
| <input type="checkbox"/> Autoimmune Problems | <input type="checkbox"/> Hepatitis B | <input type="checkbox"/> Severe Allergy |
| <input type="checkbox"/> Birth Defects | <input type="checkbox"/> Hepatitis C | <input type="checkbox"/> Sexually Transmitted Disease |
| <input type="checkbox"/> Bladder Problems | <input type="checkbox"/> High Blood Pressure | <input type="checkbox"/> Skin Cancer |
| <input type="checkbox"/> Bleeding Disease | <input type="checkbox"/> High Cholesterol | <input type="checkbox"/> Stroke/CVA of the Brain |
| <input type="checkbox"/> Blood Clots | <input type="checkbox"/> HIV | <input type="checkbox"/> Suicide Attempt |
| <input type="checkbox"/> Blood Transfusion(s) | <input type="checkbox"/> Hives | <input type="checkbox"/> Thyroid Problems |
| <input type="checkbox"/> Bowel Disease | <input type="checkbox"/> Kidney Disease | <input type="checkbox"/> Ulcer |
| <input type="checkbox"/> Breast Cancer | <input type="checkbox"/> Liver Cancer | <input type="checkbox"/> Visual Impairment |
| <input type="checkbox"/> Cervical Cancer | <input type="checkbox"/> Liver Disease | <input type="checkbox"/> Other Disease, Cancer, or Significant |
| <input type="checkbox"/> Colon Cancer | <input type="checkbox"/> Lung Cancer | <input type="checkbox"/> NONE of the Above |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Lung/Respiratory Disease | |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Mental Illness | |



DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report
Session I: 10:45am-11:45am

Date: 06-05-2020

Faculty: Dr. Jagannatha GV

Students: IV Year Regular Batch –E

Students Present: 13/13

Total No of Students: 13/13(E-batch)



























































1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: Quantification of Dental Fluorosis

Summary:

The discussion was about the fluorosis index where we discussed about quantification, need for an index, phases of tooth formation, how fluoride affects the tooth during its formation, difference between intrinsic and extrinsic stains and about pseudo stains. We were asked to find out about classification of fluorosis, idiopathic enamel hypoplasia, mechanism by which fluoride affects the tooth.

ATTENDANCE SHEET:

Close Participants (14)			Close Participants (14)		
	Search			Ramu Ganesan	  >
	Shivani Sivaramakrishnan (me)	  >		Ranjani Srinivasan	  >
	Ram Prasath (host)	  >		Sai Aditiya	  >
	Dr. Jagannatha GV	  >		sanjana	  >
	Rakshanaa Jeevan	  >		Santra Joseph	  >
	Ramu Ganesan	  >		Sathiya Ganesan	  >
	Ranjani Srinivasan	  >		Shindhuja N	  >
	Sai Aditiya	  >		shruthi priya	  >
	sanjana	  >		Shweta Ranjith	  >
	Santra Joseph	  >		Sneha D	  >
Invite			Invite		

Recording You are viewing Dr. Jagannatha GV's screen View Options 00:16:49 Speaker View Exit Full Screen

INDICES FOR DENTAL FLUOROSIS

Chettinad Dental College & Research Institute

Participants: 14

Unmute Stop Video Chat Share Screen Record Reactions Leave Meeting

Participants:

- Ram Prasath
- Sai Aditya
- Ramu Ganesan
- Raishanaa Jeevan
- Shweta Ranjith
- sanjana
- Shindhiya N
- shruthi priya
- Dr. Jagannatha GV
- Shivani Sivarama...
- Ranjani Srinivasan
- Santra Joseph
- Sneha D
- Sathya Ganesan

Recording 00:17:57



INDICES FOR DENTAL FLUOROSIS

Ram Prasad

Sai Aditya

Ramu Ganesan

Rakshanaa Jeevan

Shweta Ranjith

sanjaria

Shindhu A

shruthi priya

Dr. Jagannatha GV

Shivani Sivaramakris...

Ranjani Srinivasan

Santra Joseph

Sneha D

Sathya Ganesan

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report

Date:06.05.2020

Session II: 1:00pm-2:00pm

Faculty: Dr. Jagannatha GV

students : IV year E batch

Students Present: 13/13

Total No of Students: 13/13

1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: DEAN'S FLUOROSIS INDEX original and modification

Summary:

The discussion was about dean's fluorosis index, classification of the index, original classification and modified classification of the index and explained in detail about, community fluorosis index also, we were taught how to calculate community fluorosis index and few articles on indices were shown and explained. We also discussed about Kappa statistic. They were also given assignment on the predisposing factors and risk factors associated with fluorosis.

Recording
You are viewing Dr. Jagannatha GV's screen
View Options
00:07:52
Speaker View
Exit Full Screen

DEAN'S FLUOROSIS INDEX

•1934; TRENDLY H.DEAN devised an index for assessing the presence and severity of mottled enamel

Although no numbers were used it was considered to be on ordinal scale.

Children who had not lived in the community continuously or had obtained domestic water from other than public supply are eliminated

SALIENT FEATURES

Under his classification all those showing hypoplasia other than motling of enamel were placed in normal category

The fluorosis index set criteria for categorisation of dental fluorosis on a 7point scale.

Ram Prasath

Sai Aditya

Ranjani Srniva...

Rakshanaa Jee...

Ramu Ganesan

Shweta Ranjith

Dr. Jagannatha GV

Shinchya N

Santra Joseph

Shivani Sivara...











































sanjana

Sneha D

Sathya Ganesan

shruthi priya

Unmute
Stop Video
Participants 14
Chat 1
Share Screen
Record
Reactions
Leave Meeting

Close Participants (14)				Close Participants (14)			
Search							
SS	Shivani Sivaramakrishnan (me)			R	Ramu Ganesan		
				RS	Ranjani Srinivasan		
	Ram Prasath (host)			SA	Sai Aditiya		
DJ	Dr. Jagannatha GV			S	sanjana		
R	Rakshanaa Jeevan				Santra Joseph		
R	Ramu Ganesan			SG	Sathiya Ganesan		
RS	Ranjani Srinivasan			SN	Shindhuja N		
SA	Sai Aditiya				shruthi priya		
S	sanjana			SR	Shweta Ranjith		
	Santra Joseph				Sneha D		
Invite				Invite			

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report
Session III: 3:00 pm - 3:30pm

Date:06.05.2020

Faculty: Dr.G.V.JAGANNATHA
Dr.NAGALAND
Dr.NAGAPPAN
Dr. CYRIL BENEDICT

Students: IV Year Regular Batch –E

Students Present: 13/13

Total No of Students: 13/13 and Interns 23/23

1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANIS 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: Combined session with interns' seminar on topic -Dental Radiology

Summary:

The combined session began with a detailed presentation by an intern on the precautions to be taken while taking radiographs in dental practice. The importance of lead barriers, TLD badges, the use of radiographic films of various speeds among others.

Participants (45)

Find a participant

Dr.Cybil Benedict (M)	
Monisha Deralraj (Host)	
Navaraj Kamathi nathan	
Ravenia	
Dr Nagelvel	
Akashia Stephen	
Christaff	
Clement Solomon	
DULSHAD BANU	
Dr N Nagappan	
Dr. Jagannatha GY	
Kaithia Mohan	
Kariya Boopalan	
Keerthana Sharaman	
Mahalakshmi	
Nandhini R	
Poonima srinivasan	

Invite Mute Mic

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09:15 PM 06-05-2020

Participants (45)

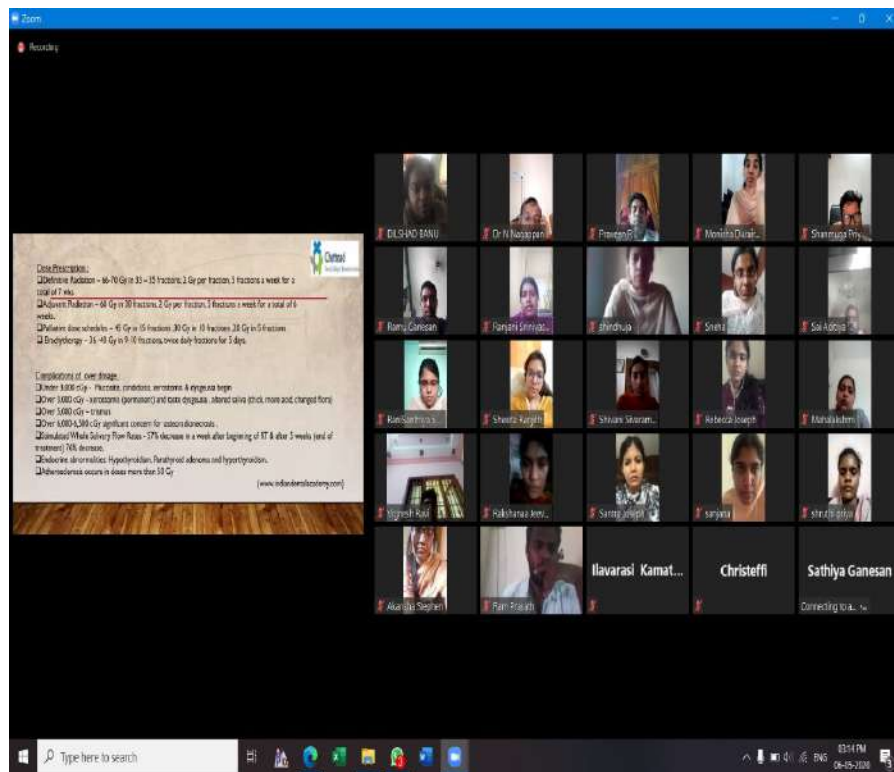
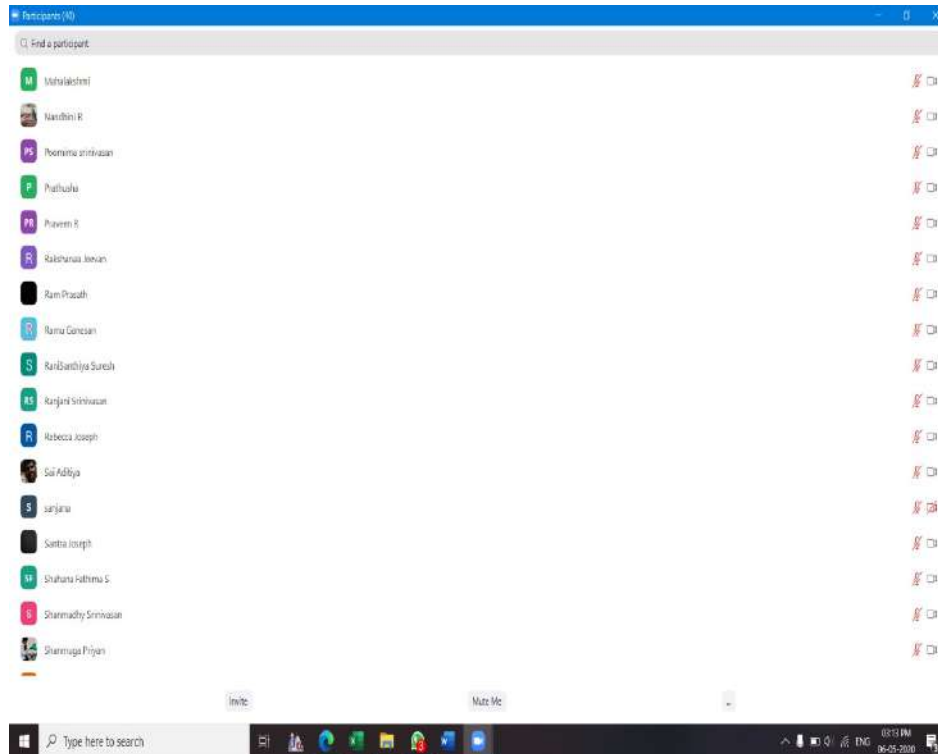
Find a participant

Ranjani Srinivasan	
Rebecca Joseph	
Sai Aditya	
Sanjana	
Santra Joseph	
Shahana Kachina S	
Sharmadhy Srinivasan	
Sharmuga Priyan	
shindhuja	
Shivani Sivasubalakrishnan	
shruthi priya	
Shweta Rajith	
Sidhant R	
Serha	
Sruithi Srinivasan	
Vijayesh Ravi	
Sathya Ganeshan	

Invite Mute Mic

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09:15 PM 06-05-2020



Zoom 10-Minutes You are viewing Raveena Kamathi's screen. View Options

Recording

Raveena

Slide 1: Radiotherapy Principles

- Definitive Radiation** - 64-70 Gy in 23-35 fractions, 2 Gy per fraction, 5 fractions a week for a total of 7 weeks.
- Adjuvant Radiation** - 40-60 Gy in 18-30 fractions, 2 Gy per fraction, 5 fractions a week for a total of 6 weeks.
- Postoperative dose schedule** - 45 Gy in 15 fractions, 30 Gy in 10 fractions, 30 Gy in 5 fractions.
- Brachytherapy** - 70-80 Gy in 10 fractions, twice daily fractions for 5 days.

Complications of oral stage:

- Below 3000 cGy** - Mucositis, xerostomia, dysphagia, odynophagia.
- Below 3000 cGy** - Sore throat, dysphagia, and taste changes, a hard palate (thick, more acid, changed flavor).
- Below 5000 cGy** - Xerostomia.
- Below 6000-6500 cGy** - Significant concern for osteoradionecrosis.
- Below 6000-6500 cGy** - Significant decrease in salivary flow (50-75% decrease in a week after beginning of RT & after 3 weeks (end of treatment) 75% decrease).
- Below 6000-6500 cGy** - Significant decrease in salivary flow (50-75% decrease in a week after beginning of RT & after 3 weeks (end of treatment) 75% decrease).
- Below 6000-6500 cGy** - Significant decrease in salivary flow (50-75% decrease in a week after beginning of RT & after 3 weeks (end of treatment) 75% decrease).

(www.chettinaddentalcollege.com)

Participants: 40

Chat, Share Screen, Record, Reactions

Leave Meeting

8:13 PM 04-05-2020

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report
Session I: 10:45am-11:30 am

Date: 06-05-2020

Faculty: Dr. H.Cyril Benedict
Dr.Nagappan

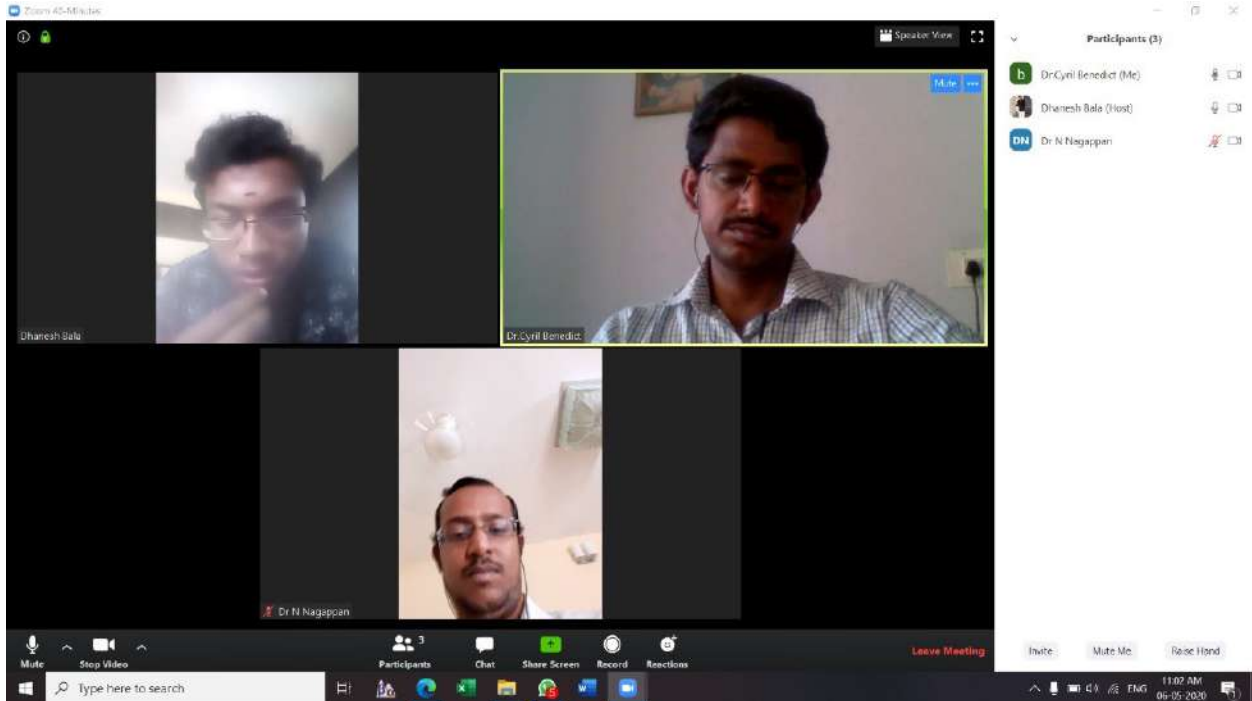
Students: IV Year February Batch
Students Present: 1/1
Total No of Students: 1/1

Discussion topic: Case History

Summary:

The session included revision of case history components and included demographic data, chief complaints, history of presenting illness, personal history, diet history, sugar score calculation.

ATTENDANCE SHEET:



Zoom 65M Video

Speaker View

Participants (3)

- Dr. Cyril Benedict (Me)
- Dhaneesh Bala (Host)
- Dr. N. Nagappan

Mute

Dr. N. Nagappan

Dr. Cyril Benedict

Dhaneesh Bala

Mute Stop Video

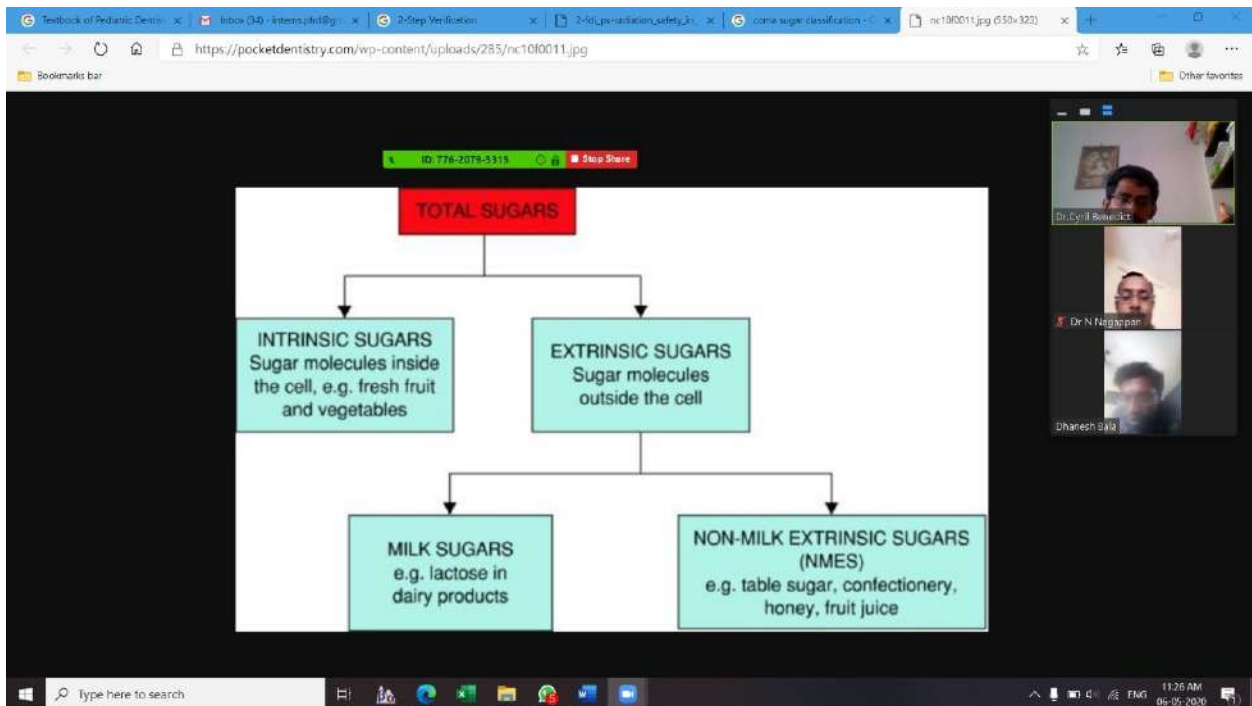
Participants Chat Share Screen Record Reactions

Leave Meeting

Invite Mute Me Raise Hand

Type here to search

11:07 AM 06-05-2020



Textbook of Pediatric Dentistry Inbox (34) - Internet Explorer 2-Step Verification 3-Step Verification come sugar classification - nc10f0011.jpg

https://pocketdentistry.com/wp-content/uploads/2015/nc10f0011.jpg

Bookmarks bar

Other favorites

ID: 776-2078-5315 Stop Share

TOTAL SUGARS

INTRINSIC SUGARS
Sugar molecules inside the cell, e.g. fresh fruit and vegetables

EXTRINSIC SUGARS
Sugar molecules outside the cell

MILK SUGARS
e.g. lactose in dairy products

NON-MILK EXTRINSIC SUGARS (NMES)
e.g. table sugar, confectionery, honey, fruit juice

Dr. Cyril Benedict

Dr. N. Nagappan

Dhaneesh Bala

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11:26 AM 06-05-2020

Textbook of Pediatric Dentistry | Inbox (34) - Intensis.phd@gmail.com | 2-Step Verification | 2-fid_pcradfaciet_safety_in | come sugar classification - C | nc100011.jpg (550x323) |

<https://books.google.co.in/books?id=ZK52DwAAQBAJ&pg=PA274&lpg=PA274&dq=tufts+school+of+dental+medicine+sugar+score&source=bl&rot...>

Bookmarks bar | Other favorites

Mark one score for each nutrient consumed

Protein and vitamin A	Iron	Folic acid	Riboflavin	Vitamin C
Cheese, dried, eggs, fish, meat, milk, apricot, butter, carrot, liver, milk, and spinach	green leafy vegetables	yeasts	Broccoli, chicken breasts, eggs, milk, mushrooms	Grapefruit, green strawberries, tomatoes, phosphorus—ch leafy vegetables,

Remaining Meeting Time: 01:25 | Stop Share

Sweet score table

Classify the sweet by its nature and multiply according to severity

Liquid: (x5)	Solid and sticky: (x10)	Slowly dissolving: (x15)
Soft drinks, fruit drinks, cocoa, sugar and honey in beverages, ice cream, flavored yogurt, pudding, custard	Cake, doughnuts, sweet rolls, pastry, canned fruit in syrup, bananas, cookies, chocolate candy, caramel, chewing gum, dried fruit, marshmallows, jelly, jam	Hard candies, breathe mints, antacid tablets, cough drops

Assessment of dental-health diet score

Score	Result	Interpretation
72-96	Excellent	Counseling not required
64-72	Adequate	Educate the patient
56-64	Barely adequate	Counseling required
56 or less		Counseling with diet modifications

WhatsApp

Dr. C. J. J. Renuka | Dhanesh Bala

Type here to search | 11:40 AM | 04-05-2020

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report
Session II: 11.45am to 12.30 pm

Date: 06-05-2020

Faculty: Dr. H.Cyril Benedict

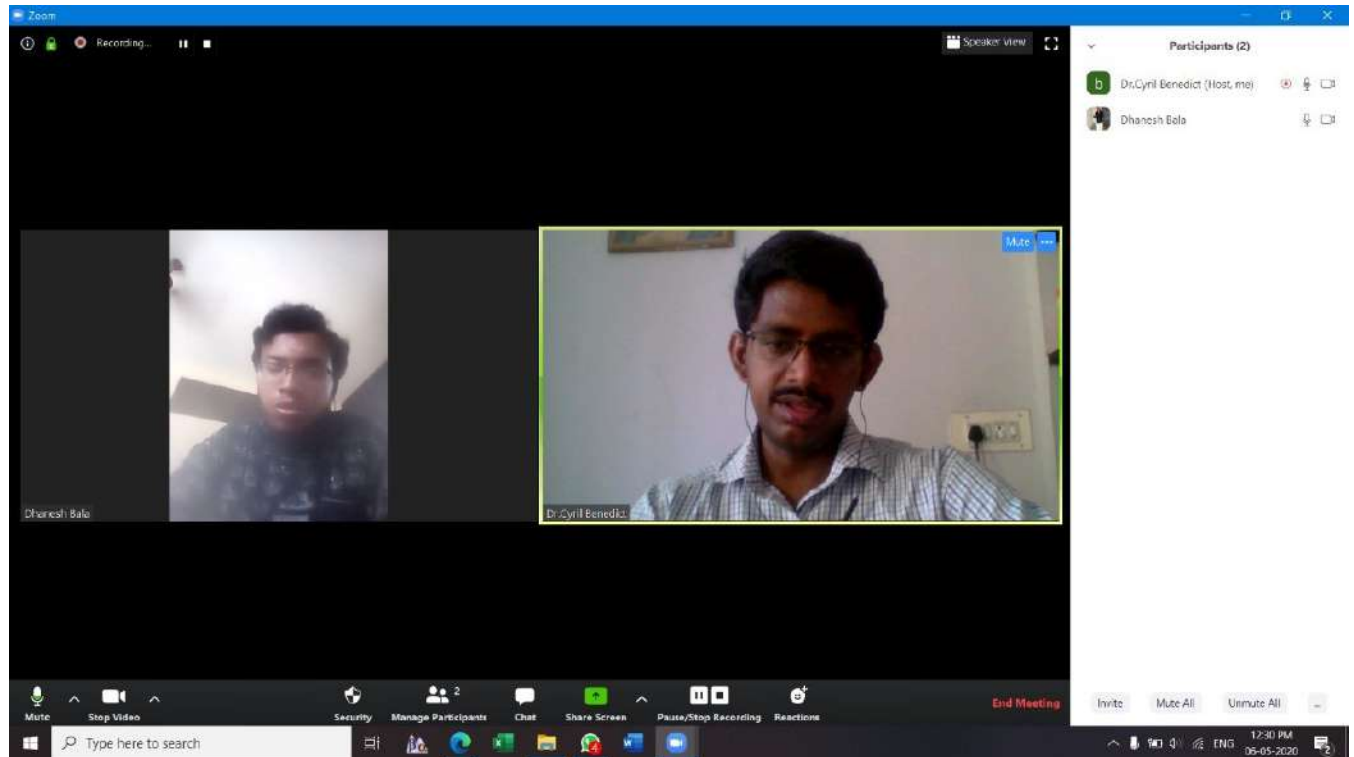
Students: IV Year February Batch
Students Present: 1/1
Total No of Students: 1/1

Discussion topic: Case History

Summary:

The session included revision of case history. The session included explanation on oral hygiene practices, General examination, Local examination which included extra oral and intra oral examination, soft tissue and hard tissue examination.

ATTENDANCE SHEET:



Department of Public Health Dentistry

Clinical Posting E-Discussion Via “Zoom App” On 07/05/2020

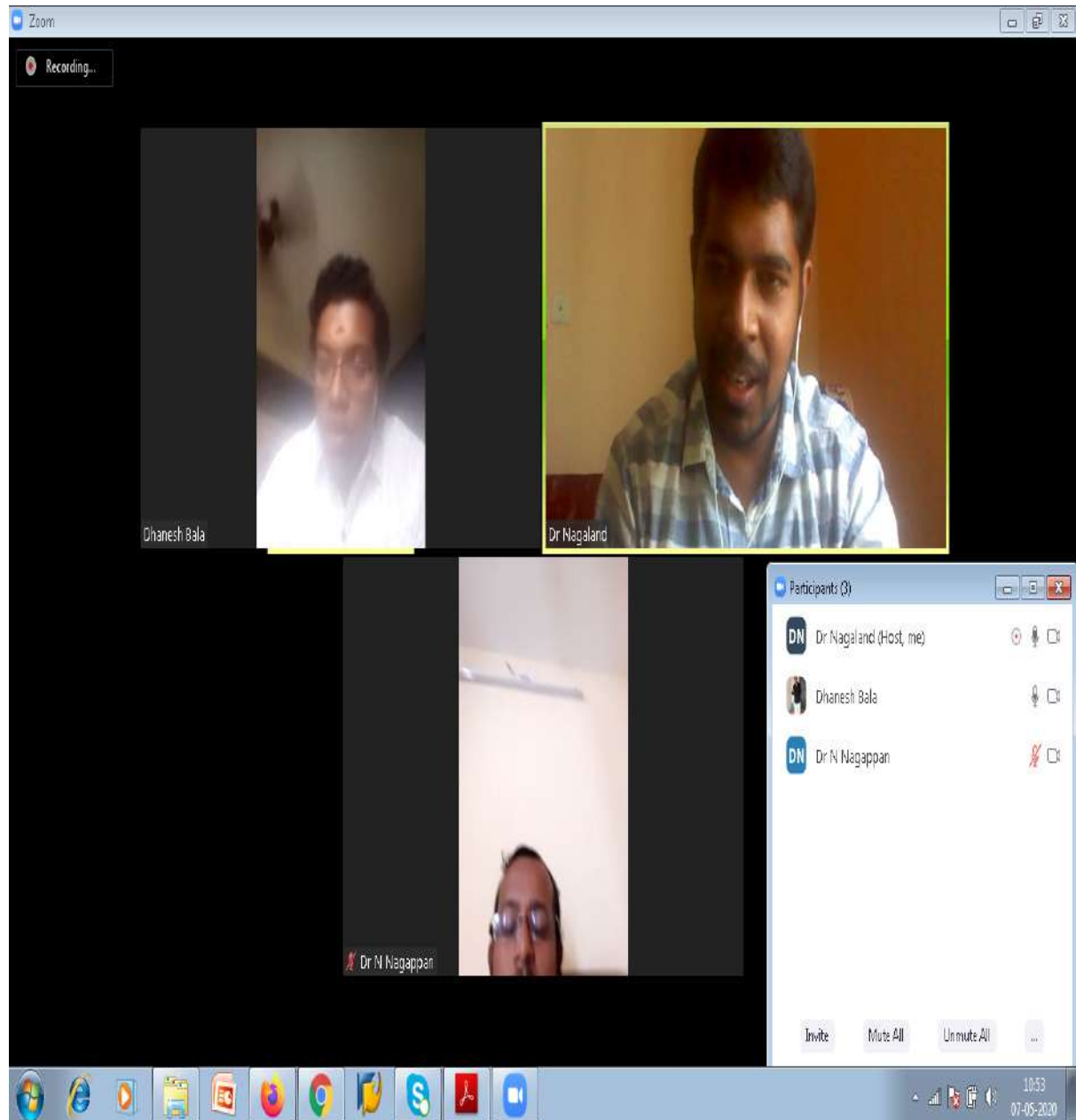
Faculty: Dr. Nagaland T and Dr. Nagappan N

Discussion Topic: Case History III

No of Students Posted in PHD: 1 Dhanesh Bala

SUMMARY:

The final year feb batch discussion was started at 10:45 am and lasted till 11:30 am. Revision of Case History part I & II was done by asking the question related to the subtopics, case based scenario's. the students answered well and also gave few assignment questions to find out and come as it will provoke the student knowledge in depth. Hard tissue examination, wasting diseases, difference between Enamel Hypoplasia, fluorosis, periodontal examination, types of stains and nature of calculus, sequelae of dental caries were discussed in the morning session.



DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report

Date:07.05.2020

Session II: 12:15pm-1:15pm

Faculty: Dr. H.Cyril Benedict

Students : IV year E batch

Students Present: 12/13

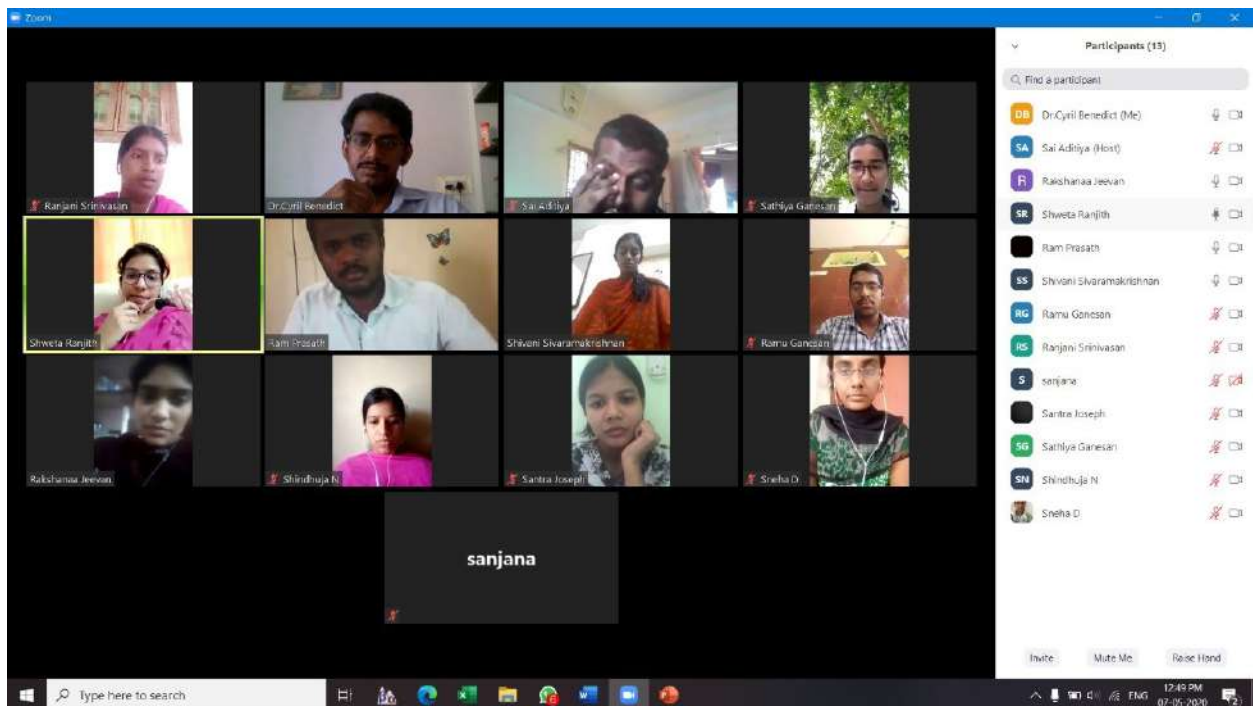
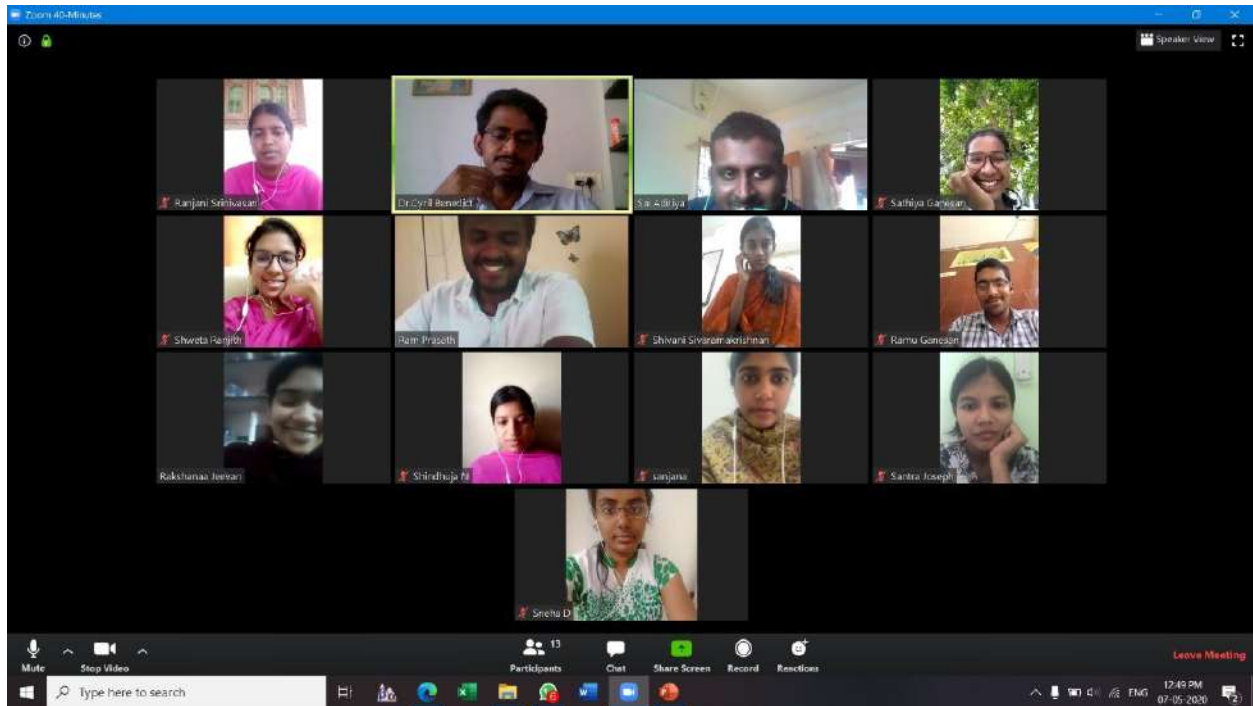
Total No of Students: 12/13

1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S
11. SHWETA RANJITH 12.D.SNEHA

Discussion topic: Other Relevant Indices

Summary:

The discussion was about other relevant indices like: PHP index, Glass Index, Stone's Index, Moller's Index, Sulcular and Gingival and Papillary Bleeding Index, PUFA index, SiC index, Cariogram, CAST index and ICDAS-II.



Other Indices - PowerPoint

File Home Insert Design Transitions Animations Slide Show Review View Help Tell me what you want to do

Recent: Cut Copy Paste Format Painter Undo Redo Layout Reset Section Slides Font Paragraph Drawing

Chettinad Dental College & Research

Periodontal Indices

- Papillary-Marginal-Attachment Index (PMA)- Massler & Shour
 - P-M-A units
- Periodontal Disease Index – Ramfjord -1959
 - A Clinician's modification of Russell's PI
 - It measures the level of periodontal attachment related to the CEJ of teeth
 - 16, 21, 24, 36, 41, 44 – Ramfjord teeth
 - Plaque component
 - Calculus component
 - Gingival and periodontal component

Click to add notes

Slide 3 of 16 English (India)

Notes Comments

12:59 PM 07-05-2020

Participants in video call:

- Srinivas D
- Sai Aranya
- Sathya Ganesh
- Shikhar Srivastava
- Shishu N

Furthermore, it expresses the extent to which different etiological factors of caries affect the caries risk for a particular individual.

saliva tests. The information is then given a score of a predetermined criteria. The score '0' is the most favorable risk value.



is left appears as a green sector and represents the chance of avoiding caries:

- The **dark blue sector 'Diet'** is based on a combination of diet contents and diet frequency.
- The **red sector 'Bacteria'** is based on a combination of amount of plaque and mutans streptococci.
- The **light blue sector 'susceptibility'** is based on a combination of fluoride programme, saliva secretion and saliva buffer capacity.
- The **yellow sector 'Circumstances'** is based on a combination of caries experience and related diseases.
- The **green sector shows an estimation of the 'Chance of avoiding caries'.**

The chance of avoiding caries, and conversely the risk of caries, are expressions for the same process but illustrated inversely. When the chance of avoiding caries is high, the caries risk is small and vice versa. Details of the factors that are included and the data needed to give scores for the Cariogram are presented in Table I and an example of a Cariogram in Fig. 1.

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical e-discussion Report

Date: 07.05.2020

Session I: 10:45am-12:00pm

Faculty: Dr. Jagannatha GV

Students : IV year - E batch

Total No of Students: 13 (E-batch)

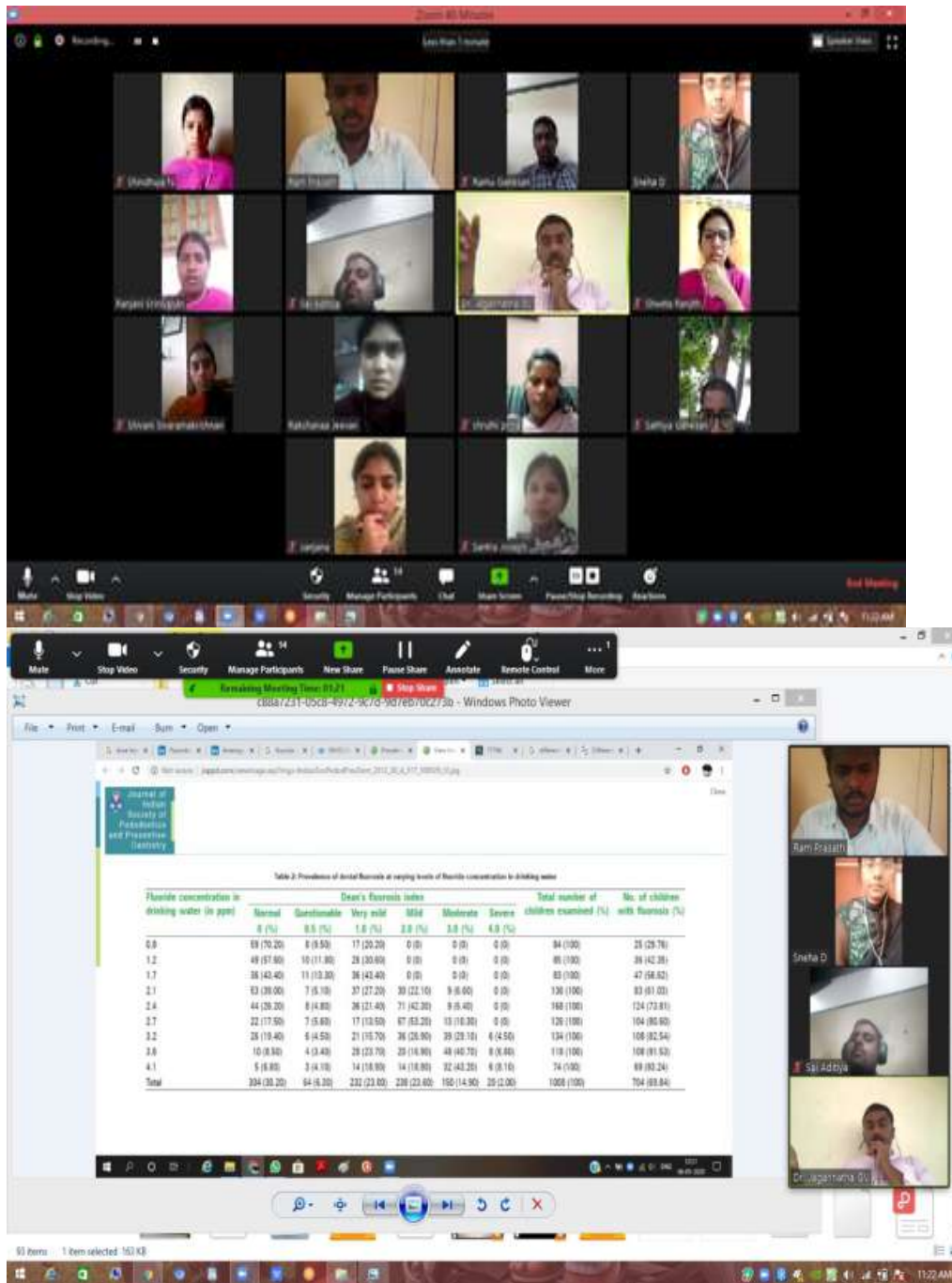
Students Present: 13/13

1. Rakshanaa.J 2. Ram Prasath 3. Ramu.G 4. Ranjani.T.S
5. Sai Aditiya Narayanan 6. Sanjana.D 7. Santra Joseph 8. Sathiya.G
9. Shindhuja.N 10. Shivani.S 11. Shruthipriya. 12. Shweta Ranjith. 13. Sneha.D

Discussion topic: Thylstryp Fejerskov Index and Tooth Surface Index of Fluorosis and other FIs

Summary:

The discussion for the first session was on revision of Dean's fluorosis index, discussion assignment questions which was given yesterday in detail, it was followed by discussion of other fluorosis index like Thylstrup and Fejerskov Index for fluorosis, Tooth Surface Index of Fluorosis in detail about the scores, criteria with clinical pictures, about fluorosis risk index and discussed using articles based on these. We were also given assignment on describing the specificity, sensitivity of fluorosis indices ,to find out at which age children or young adults are starting the habit of using arecanut products, to find how these tobacco products play a role in fluorosis with reference of articles, to find about dental fluorosis in deciduous dentition , to refer an article on comparison between fluorosis indices.



The screenshot shows a Zoom meeting in progress. The top half displays a grid of 12 participants. The bottom half shows a presentation slide from the 'Journal of Indian Society of Paedodontics and Preventive Dentistry'. The slide contains a table titled 'Table 3: Prevalence of Dental Fluorosis at varying levels of fluoride concentration in drinking water'.

Fluoride concentration in drinking water (in ppm)	Dean's Fluorosis index						Total number of children examined (%)	No. of children with fluorosis (%)
	Normal	Questionable	Very mild	Mild	Moderate	Severe		
0.0	59 (70.20)	0 (0.00)	17 (20.20)	0 (0)	0 (0)	0 (0)	84 (100)	25 (29.76)
1.2	49 (57.80)	10 (11.30)	28 (30.60)	0 (0)	0 (0)	0 (0)	86 (100)	39 (42.31)
1.7	38 (42.40)	11 (12.30)	36 (42.40)	0 (0)	0 (0)	0 (0)	85 (100)	47 (54.62)
2.1	53 (39.00)	7 (5.10)	37 (27.20)	30 (22.10)	0 (0.00)	0 (0)	130 (100)	83 (61.03)
2.4	44 (26.20)	0 (4.80)	36 (21.40)	71 (42.30)	0 (0.40)	0 (0)	168 (100)	124 (73.81)
2.7	22 (17.50)	7 (5.60)	17 (13.50)	67 (53.20)	13 (10.30)	0 (0)	126 (100)	104 (80.90)
3.2	28 (19.40)	0 (4.50)	21 (15.70)	36 (26.90)	39 (29.10)	6 (4.50)	134 (100)	108 (80.54)
3.6	10 (6.90)	4 (3.40)	29 (23.70)	29 (18.90)	48 (40.70)	0 (0.00)	118 (100)	108 (91.53)
4.1	5 (5.80)	3 (4.10)	14 (16.90)	14 (16.90)	32 (43.20)	0 (0.10)	74 (100)	69 (93.24)
Total	304 (30.20)	64 (6.30)	232 (23.00)	236 (23.60)	150 (14.90)	25 (2.50)	1008 (100)	704 (69.84)

Recording
You are viewing Dr. Jagannatha GV's screen
View Options

THYLSTRUP-FEJERSKOV CLASSIFICATION OF FLUOROSIS

1978; thylstrup and fejeskov suggested a 10 point classification system to categorise the degree of fluorosis affecting buccal/ lingual and occlusal

Examination is done on a portable chair out in daylight.

Plane mirror n probes are used

Prior to examination the teeth are dried with cotton wool rolls

SALIENT FEATURES





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Stop Video
Participants 14
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THYLSTRUP-FEJERSKOV CLASSIFICATION OF FLUOROSIS

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Examination is done on a portable chair out in daylight.

Plane mirror n probes are used

Prior to examination the teeth are dried with cotton wool rolls

SALIENT FEATURES

With regard to the prevalence per cent (table 5), a progressive increase in enamel fluorosis was noted in the fluoride content slightly higher non-significant prevalence than the DEAN and TSIF indexes for the cities of Cesário Lange and Piracicaba, while other researchers (Thylstrup and Fejerskov, 1978; Wenzel and Thylstrup, 1982; Granath et al., 1985; Burger et al., 1987) also observed of 4.2% below the estimate reported by Pendrys and Stamm (1990) of 10.0% and close to the estimate reported by the however, these estimates were considered to be very conservative by Clark (1994). With regard to fluoridated areas, prevalence percentages above 25.0% (Clark, 1994), while Pendrys and Stamm (1990) and the American Public Health Service (USPHS, respectively, above those observed in this study of 17.0% in Piracicaba, however, very close to that observed by Gaspar et al.

It was noted that prevalences found in this study are similar to those of DEAN (1934; 1943) in the decades of the 30's and (Segreto et al., 1984). These differences may be attributed to the wide use of fluorides from an early age, by topical methods and varnishes, and other dental products available in the USA and other developed countries, which have raised prevalence percentages.

In Brazil and especially in the cities in this study, only initiatives of unsupervised preventive programs were observed, mainly Systems of Health, including brushing and fluoridated mouth washes after the children enter school (above 6 years of age), dental

The small differences observed among the three indexes may be explained by: a) definition of case, b) measuring method.

The problem with the definition of case comes up against some methodological aspects used specifically in each study for fluorosis for defining case. However, Kingman (1994) defined DI 2, differing from the T-F and TSIF indexes which used measuring prevalence, being defined as T-F 1 e TSIF 1. However, owing to the bilateral character of dental fluorosis, normally eliminate possible differences between DI 1 and DI 2 and differentiate the criterion for definition of case between the different

The epidemiological determination of clinical conditions for estimating the prevalence of dental fluorosis may be subject to variations due to the use of index used natural light and the teeth were examined humid, while the T-F index carried out prior prophylaxis, the examination being conducted with daylight whereas the TSIF used artificial light to examine the teeth humid.

In this study, in order to standardize the methods, we have opted for brushing prior to examination, because the prophylaxis recommended by Thylstrup great deal of time. In addition, drying of the teeth and artificial light were used.

With regard to intra-examiner agreement, values of the KAPPA statistic of 0.76 for the DEAN index were similar to those reported by Riordan and Bann can be classified as substantial (P<0.01) according to the Landis and Koch (1977) classification.



The most appropriate indications for each index may be the following: 1) DEAN index - comparative studies between current prevalences and those for 2) T-F index - clinical studies or analytical epidemiological studies. 3) TSIF index - studies in which an aesthetic basis is desired for defining case and



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Participants 14
Chat
Share Screen
Record
Reactions
Leave Meeting



THYLSTRUP - FEJERSKOV CLASSIFICATION OF FLUOROSIS

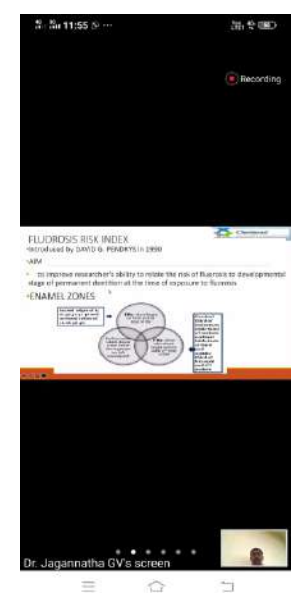
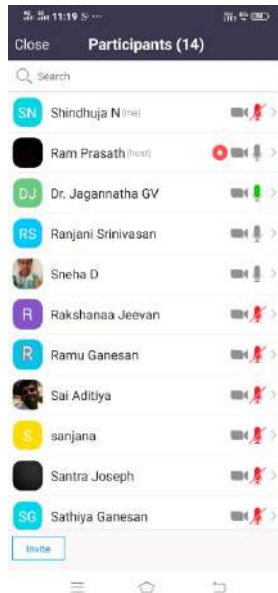
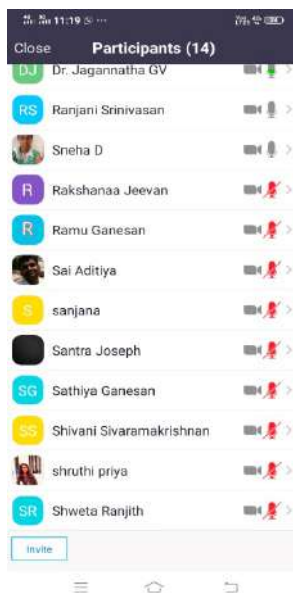
Score	Criteria
0	<ul style="list-style-type: none"> Normal translucency of enamel remains after prolonged air – drying
1	<ul style="list-style-type: none"> Narrow white lines located corresponding to the perikymata. Smooth surfaces: More pronounced lines of opacity which follow the perikymata. Occasionally, confluence of adjacent lines. Occlusal surfaces: Scattered areas of opacity of 2mm in diameter and pronounced opacity of cuspal ridges.

CONCLUSION

- Tooth surface index of fluorosis permits a specific assessment of fluorosis and because of this, it is especially useful for determining the public effect of fluorosis in a population
- Thylstrup and Fejerskov index for fluorosis is thought to be most sensitive. It calls for drying of teeth which accentuates the appearance of fluorosis, making the diagnosis easier in questionable cases
- Even though the fluorosis risk index is thought to be complex from a clinical perspective and in application, it is reliable and valid when identifying the risk for enamel fluorosis
- Dean's index has been used most frequently over the years, till today. But, modified Dean's index is one still recommended by WHO in its survey manual



Department of Public Health Dentistry

Clinical Posting E-Discussion Via “Zoom App” On 07/05/2020

Faculty: Dr. Nagaland T and Dr. Jagannatha GV

Discussion Topic: Case History III

No of Students Posted in PHD: 1 Dhanesh Bala

SUMMARY:

After the first session, the second session was started wherein different types of diagnosis, investigations, advantages/disadvantages, indications//contraindications, of the same were discussed. Later case based questions were raised and cleared the doubts regarding the investigations and diagnosis. Finally, the treatment phases, types, order of treatment plan, significance of each treatment plan were discussed. Assignment questions were given on the same topic and instructed to post in the evening.

Zoom

Recording...

Dhanesh Bala

Dr Nagaland

Dr. Jagannatha GV

Participants (3)

- DN Dr Nagaland (Host, me)
- Dhanesh Bala
- DJ Dr. Jagannatha GV

Invite Mute All Unmute All

12:27 07-05-2020

Department of Public Health Dentistry

Clinical Posting E-Discussion Via “Zoom App” On 08/05/2020

Session I (10:45am-11.30am)

Faculty: Dr. Nagaland T and Dr Cyril Benedict

Discussion Topic: WHO Oral Health Assessment Profoma (2013)

No of Students Posted in PHD: 13 (IV year- E batch)

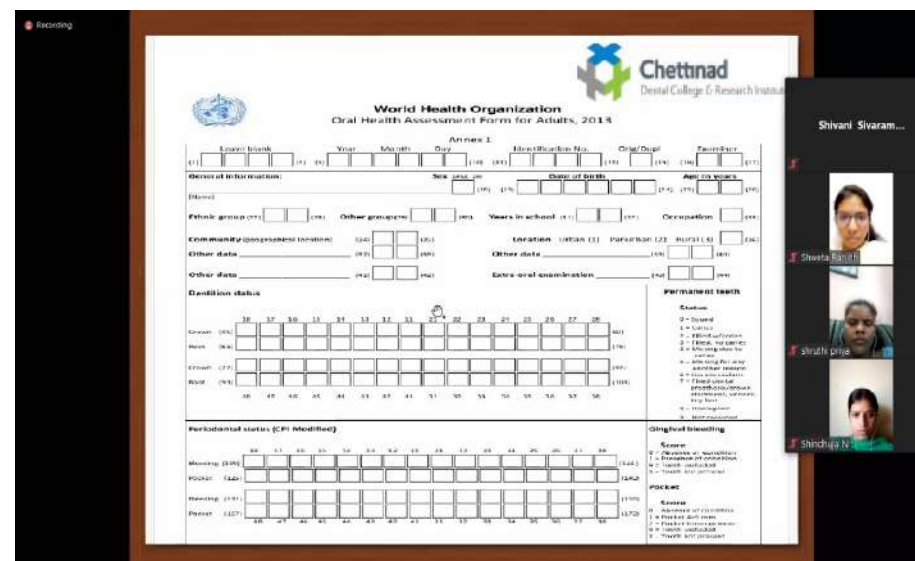
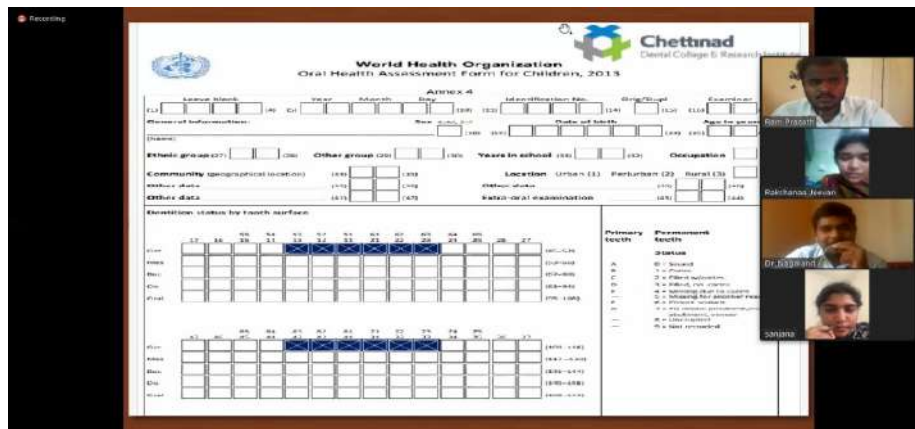
Students Present: 13/13

1. Rakshanaa.J 2. Ram Prasath 3. Ramu.G 4. Ranjani.T.S 5. Sai Aditiya Narayanan 6. Sanjana.D

7. Santra Joseph 8. Sathiya.G 9. Shindhuja.N 10. Shivani.S 11. Shweta Ranjith 12. Sneha.D 13. Shruthi priya. P

Summary:

The discussion for the first session started with the purpose of oral health assessment forms for adults (2013). The various columns which are provided in the form and how to fill them starting from the Demographic data, dentition status, difference between DMFT and Dentition status, modifications of WHO criteria, periodontal status and its modifications where in we also interacted about the differences of scores which existed between the regarding indices and the one's given in the form. The scores of “9 – Not recorded” were discussed and gave assignments to find out the instances where the case cannot be recorded. The assignments were given to find about the various ethnic group in our country.



10:50 AM 59.7KB/s

Participants (14)

Search

- SG Sathiya Ganesan (me)
- SA Sai Aditiya (host)
- ND naga deep
- Ram Prasath
- R Ramu Ganesan
- S sanjana
- Santra Joseph
- SN Shindhuja N
- SS Shivani Sivaramakrishnan
- shruthi priya

Invite

10:50 AM 48.2KB/s

Participants (14)

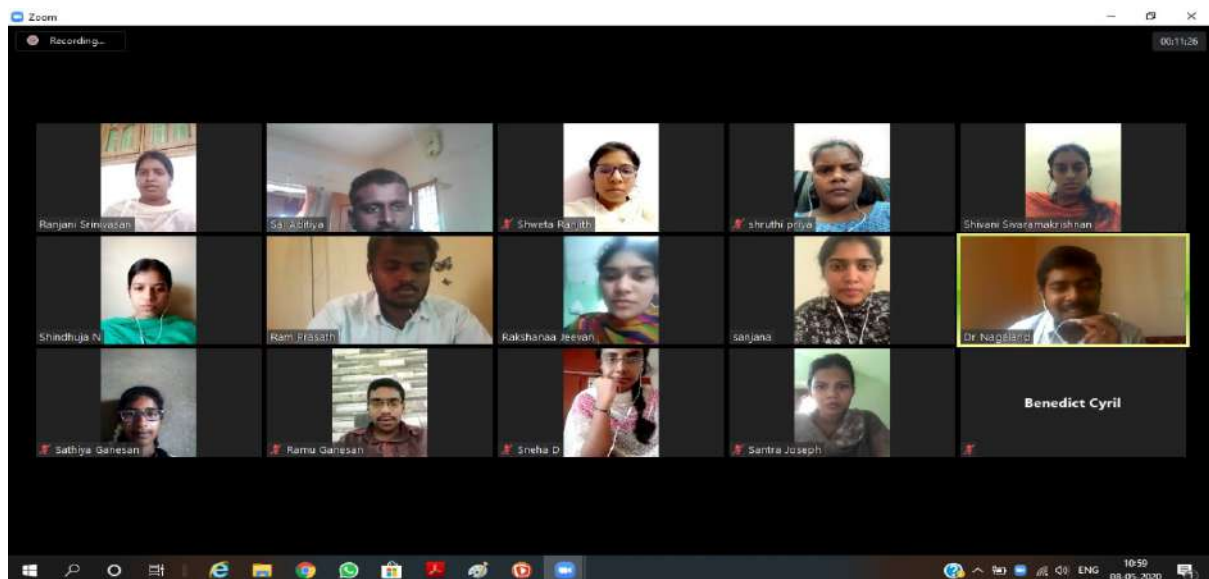
- R Rakshanaa Jeevan
- Ram Prasath
- RS Ranjani Srinivasan
- S sanjana
- Santra Joseph
- SN Shindhuja N
- SS Shivani Sivaramakrishnan
- shruthi priya
- SR Shweta Ranjith
- S Sneha
- R Ramu Ganesan

Invite

Zoom

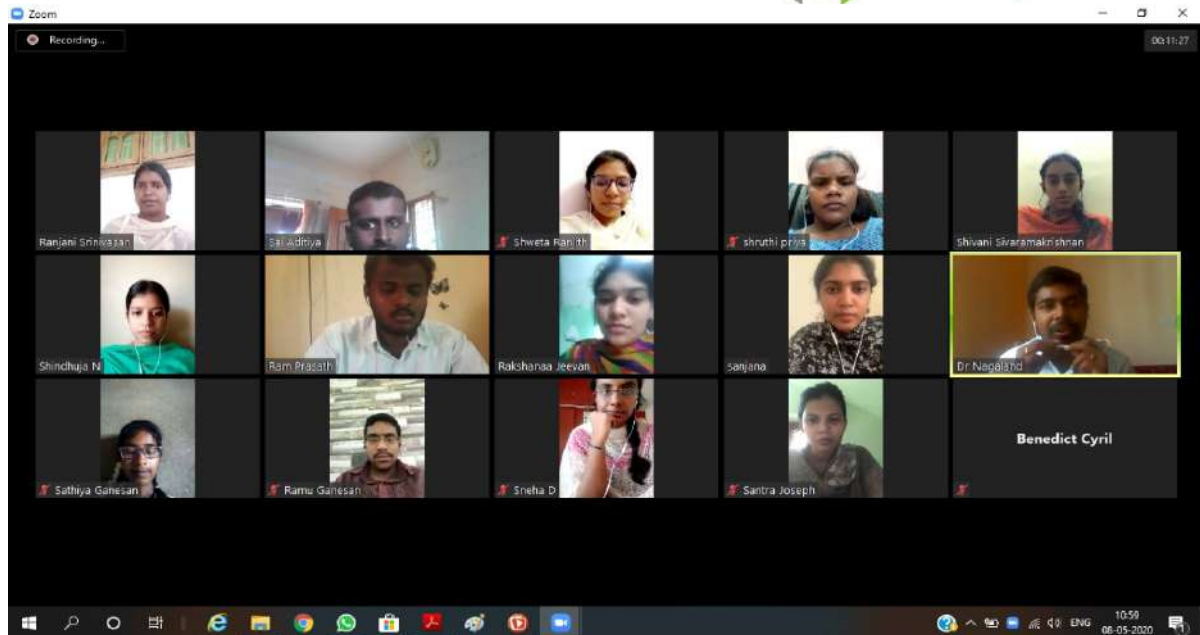
Recording...

00:11:26



Benedict Cyril

Windows taskbar: 10:59 08-05-2020



Department of Public Health Dentistry

Clinical Posting E-Discussion Via “Zoom App” On 08/05/2020

Session II (11.30 am – 12:10 pm)

Faculty: Dr. Nagaland T

Discussion Topic: WHO Oral Health Assessment Profoma (2013) Part II

No of Students Posted in PHD: 13 (IV year- E batch)

Students Present: 13/13

1. Rakshanaa.J 2. Ram Prasath 3. Ramu.G 4. Ranjani.T.S 5. Sai Aditiya Narayanan 6. Sanjana.D

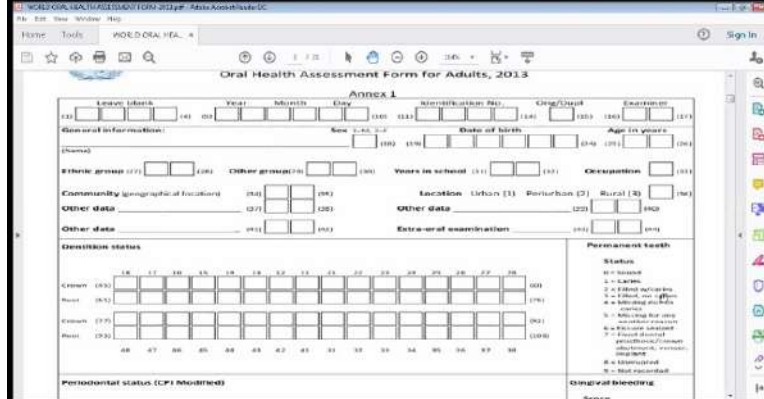
7. Santra Joseph 8. Sathiya.G 9. Shindhuja.N 10. Shivani.S 11. Shweta Ranjith 12. Sneha.D 13. Shruthi priya. P


Summary:

The E-batch final year BDS students had discussion on the continuation of the remaining part between 11.30am to 12.10pm via zoom application. In this session, the loss of attachment and dental erosion, enamel flurosis in detail and the increase in cases of dental erosion were discussed because of the excess consumption of aerated beverages in the past decade. Various assignment questions were given to the students based on different case scenario's wherein the application of the indices and the form can be used. All the students were present for the session and the importance of proforma in various field trials and for descriptive studies were explained.

Recording...
00:03:33

Recording...
00:05:33







11:26 AM 30.9KB/s



Close Participants (14)

R

Rakshanaa Jeevan





Ram Prasath





R

Ramu Ganesan





RS

Ranjani Srinivasan





SN

Shindhuja N





SS

Shivani Sivaramakrishnan






S

sanjana





Santra Joseph








shruthi priya





SR

Shweta Ranjith





Sneha D



Invite



11:26 AM 63.6KB/s

Close Participants (14)

Search



SG

Sathiya Ganesan (me)





SA

Sai Aditiya (host)





DN

Dr Nagaland





R

Rakshanaa Jeevan





Ram Prasath





RS

Ranjani Srinivasan





SN

Shindhuja N





SS

Shivani Sivaramakrishnan





R

Ramu Ganesan



S

sanjana



Invite

Department of Public Health Dentistry

Clinical Posting E-Discussion Via “Zoom App” On 08/05/2020

Session III

Faculty: Dr. Nagaland T

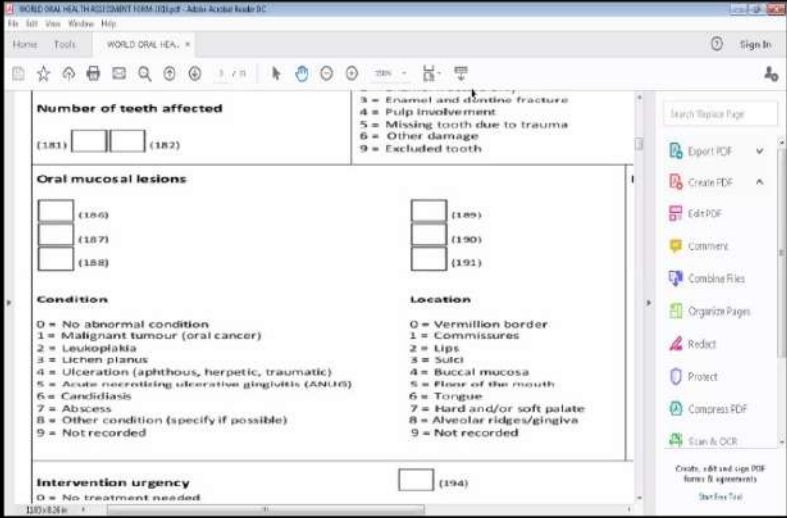
Discussion Topic: Continuation Of WHO Oral Health Assessment Profoma(2013)

No of Students Posted in PHD: 13


Summary:

The third session was continued about oral mucosal lesions and how to fill them appropriately in the columns, based on their condition and location, and the denture status and their respective scores, and then about intervention urgency and their respective scores were discussed. After completing the WHO assessment form 2013, the same is been compared with WHO 1997 and the difference between the two proforma's were described in detail. After which the proforma of children oral health status, proforma for HIV/AIDS patients were discussed. The color plates of all the conditions were also discussed.


Recording...



00:17:22



00:15:39



Recording... 00:01:32

WORLD ORAL HEALTH ASSESSMENT FORM-2013.pdf - Adobe Acrobat Reader DC

File Edit View Window Help

Home Tools WORLD ORAL HEA... Sign In

Oral Health Assessment Form for Adults, 2013

Annex 1

Leave blank (13) Year (14) Month (15) Day (16) Identification No. (17) (18) (19) (20) (21) (22) (23) (24) (25) (26) (27) Org/Dupl (28) Examiner (29)

General information:

Sex (30) Male (31) Female (32) Date of birth (33) (34) (35) (36) (37) (38) (39) (40) Age in years (41) (42) (43) (44) (45) (46) (47) (48)

Name (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

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Years in school (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Occupation (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Community (geographical location) (94) (95) (96) (97) (98) (99) (100)

Location Urban (1) Periurban (2) Rural (3) (94) (95) (96) (97) (98) (99) (100)

Other data (97) (98) (99) (100)

Other data (41) (42) (43) (44) (45) (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Extra-oral examination (43) (44) (45) (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Dentition status

Crown (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Root (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Crown (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Root (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

AB (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

Periodontal status (CPI Modified)

Permanent teeth

Status

0 = Sound

1 = Caries

2 = Filled surfaces

3 = Filled, no caries

4 = Missing due to caries

5 = Missing for any other reason

6 = Filler or sealant

7 = Fixed dental prosthesis/crown, abutment, veneer, implant

8 = Unrestored

9 = Not recorded

Gingival bleeding

Score

Dr. Nagaland



Chettinad

Dental College & Research Institute

3:25 PM 42.2KB/s

VoLTE 4G 39



Zoom

Leave

Recording



World Health Organization
Oral Health Assessment Form for Adults, 2013

Loss of attachment		Index teeth		Enamel fluorosis	
Severity 0 = 0-5 mm CBJ between upper Incisals within black band 1 = 6-8 mm CBJ between upper Incisals and 6.5 mm ring 2 = 9-13 mm CBJ between 8.5 mm and 11.5 mm ring 3 = 12 mm or more CBJ beyond 11.5 mm ring 4 = Excluded constant 5 = Not recorded		17/16 11 26/27 (175) (176) (177) (178) 47/46 51 85/87		Severity 0 = Normal 1 = Questionable 2 = Very mild 3 = Mild 4 = Moderate 5 = Severe 6 = Excluded (crown, restorations, "bracket") 9 = Not recorded (unrupted tooth)	
Dental erosion Severity (160) 0 = No sign of erosion 1 = Enamel defect 2 = Enamel erosion 3 = Pulp involvement Number of teeth affected (183) (182)		Dental trauma Status (180) 0 = No sign of injury 1 = Traumatized injury 2 = Enamel fracture only 3 = Enamel and dentine fracture 4 = High root fracture 5 = Extending root due to trauma 6 = Other damage 9 = Excluded tooth		Number of teeth affected (184) (185)	
Oral mucosal lesions (186) (187) (188)		Location (189) (190) (191)		Condition 0 = No abnormal condition 1 = Malignant tumour (oral cancer) 2 = Leukoplakia 3 = Lichen planus 4 = Lichenoid (Erythematous, Reticular, Atrophic) 5 = Acute necrotizing ulcerative gingivitis (ANUG) 6 = Candidiasis 7 = Abscess 8 = Other condition (specify if possible) 9 = Not recorded	
Intervention urgency 0 = No treatment needed 1 = Urgent treatment needed		Location 0 = Vermilion border 1 = Commissures 2 = Lips 3 = Teeth 4 = Buccal mucosa 5 = Floor of the mouth 6 = Tongue 7 = Hard and/or soft palate 8 = Alveolar ridge/gingiva 9 = Not recorded		Condition(s) Upper (192) Lower (193) Status 0 = No denture 1 = Partial denture 2 = Complete denture 9 = Not recorded	



Unmute

Stop Video

Share

Participants

More

3:05 PM 45.3KB/s

Close

Participants (14)

Search

SG

Sathiya Ganesan (me)

Sai Aditiya (host)

DN

Dr Nagaland

R

Rakshanaa Jeevan

Ram Prasath

S

sanjana

Santra Joseph

SR

Shweta Ranjith

R

Ramu Ganesan

RS

Ranjani Srinivasan

Invite

3:05 PM 34.2KB/s

Close

Participants (14)

Rakshanaa Jeevan

Ram Prasath

RS

Ranjani Srinivasan

S

sanjana

Santra Joseph

SS

Shivani Sivaramakrishnan

SR

Shweta Ranjith

R

Ramu Ganesan

S

shindhuja

shruthi priya

S

Sneha

Invite

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical Supplementary B- batch discussion Report

Date:08.05.2020

Session I: 10:55AM – 11:35 AM

Faculty: Dr. Nagappan N (Faculty In charge)
Dr. Jagannatha G.V

Students: IV Year supplementary Batch –B

Students Present: 1/1

Total No of Students: 1/1(B-batch)

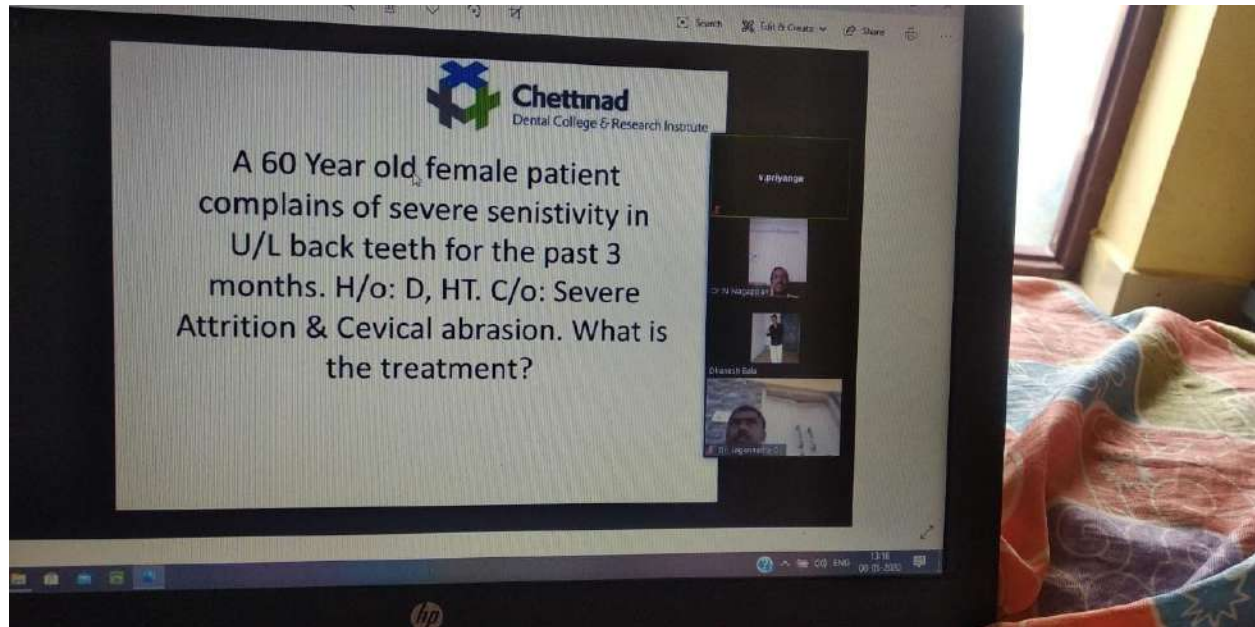
1. DHANESH BALA .K.R

Discussion topic: Case history test scenarios

Summary:

Discussed about clinical case scenarios and thier various treatment plan for that clinical case findings and gave the assignment questions of immediate remedy for sensitivity and cements used for treatment of severe form of sensitivity. This session is a very interactive session.








1. ATTENDANCE SHEET:





WhatsApp icons: 31, Instagram, Video call, Headset, VoLTE, 4G, 44%, 12:05 PM

Close **Participants (3)**

	Dhanesh Bala (me, host)	  >
	Dr N Nagappan	  >
	v.priyanga	  >

Invite	Report	Mute All	Unmute All
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Android navigation bar: square, circle, triangle

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION Via Zoom App

Clinical Supplementary B- batch discussion Report

Date:08.05.2020

Session I: 12:10 PM – 12:55 PM

Faculty: Dr. Nagappan N
Dr. Jagannatha G.V

Students: IV Year supplementary Batch –B

Students Present: 1/1

Total No of Students: 1/1(B-batch)

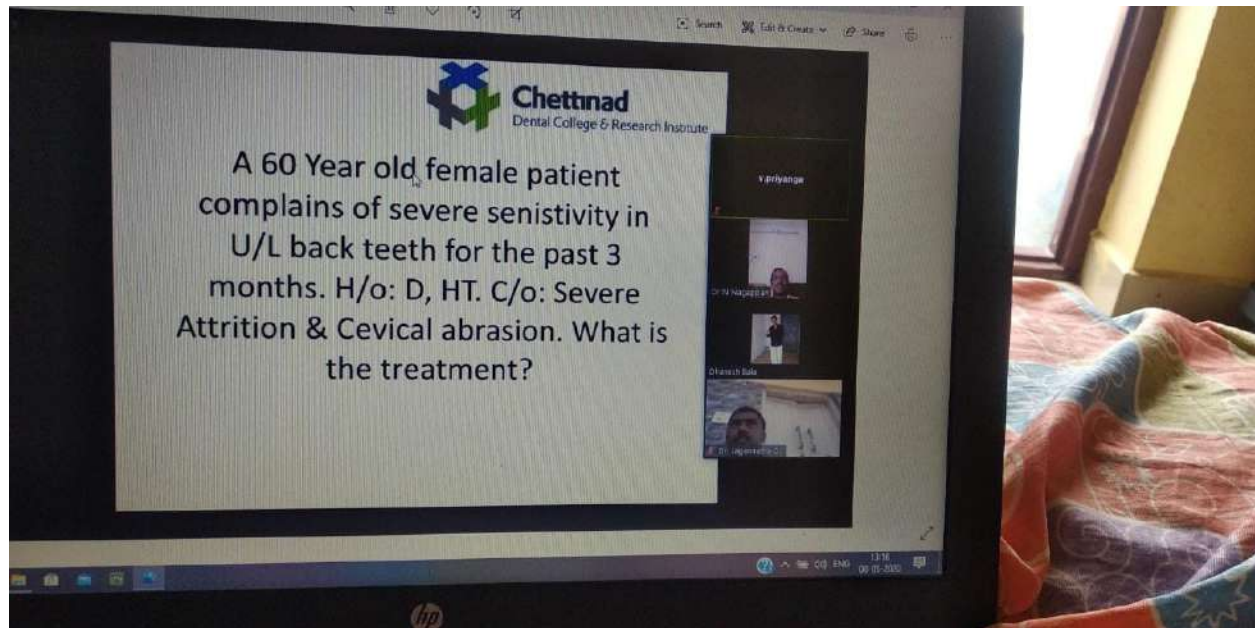
1. DHANESH BALA .K.R

Discussion topic: Case history test scenarios (Continuation)

Summary:

Discussed the remaining clinical case scenarios left in the first session and described the treatment plans and preventive measures for the categories of dental caries and gave a assignment questions. Write in detail about procedure of pit and fissure sealant classify the bleaching agents (solutions used for bleaching).this session is a very interactive session.

1. ATTENDANCE SHEET:





Chettinad
Dental College & Research Institute

A 40 Year old patients complains of stains in u/l
front teeth from childhood

M/H: Diab, HT

D/E: Stained teeth which is non scrubable

Treatment?

v.priyanga

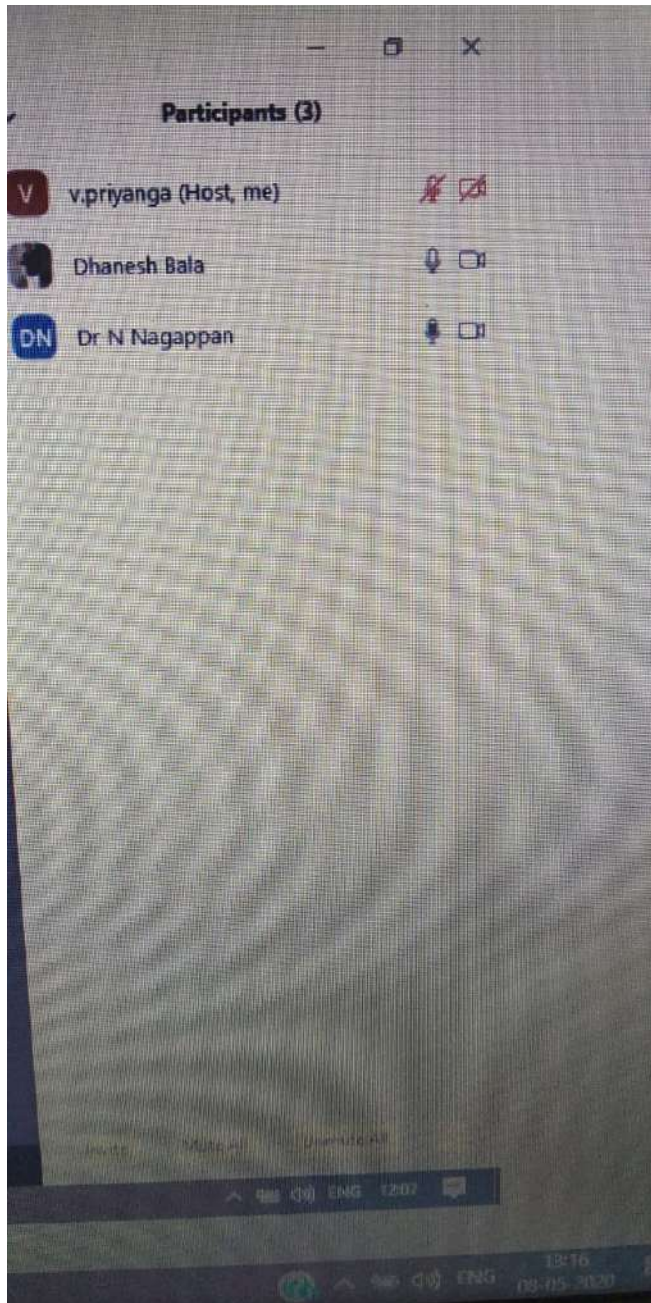


Dr. N. Nagesh


Dr. Jagannatha...



Dhanesh Bala



Search Edit & Create Share



Chettinad
Dental College & Research Institute

- A 21 year old male patient came for routine dental check up
- M/H: Nil
- D/E: Cal & Stains –Mild, Dental Caries in 46,47,48, 26,36,16,17
- Treatment Done
- Preventive Treatment?

v.priyanga

Dr N Nagappan

Dr. Jagannatha GV

Chandesh Bala

13

PUBLIC HEALTH DENTISTRY

THEORY E –DISCUSSION REPORT

TIMING: 8:30AM TO 9:30AM

Date:09/05/2020

FACULTY INCHARGE: Dr.JAGANNATHA G V

STUDENT INCHARGE: SANTRA JOSEPH

STUDENTS: 4TH YEAR REGULAR BATCH: 76/78

STUDENTS ABSENT:1.SOWMYA N

2.DHARUNYA

DISCUSSION TOPIC:Test on epidemiological studies

SUMMARY

The MCQs test was based on assessing the understanding the topic of epidemiology and its application. The topics covered were general epidemiology, descriptive, case-control, cohort and experimental studies. The answers were discussed in detail.

8:36 4G

Close Participants (75)

- SG Sathiya Ganesan
- SN Shindhuja N
- SS Shivani Sivaramakrishnan
- shruthi priya
- SR Shweta Ranjith
- S Sneha
- SS Sophia srikanth
- SS Sruthi S
- SK Suba Keerthi
- Subashini Natarajan
- SV Sureka Varatharaj
- Surva Nandakumar

Chat Invite

8:36 4G

Close Participants (75)

- PA Padmajaa Krishnan
- Padmajee Selvaraj
- PL Pavithra lakshmi N
- PR Pavithra Rajkumar
- Pavithra Rathinaswamy
- P Prabhavathi.s
- P prasanth
- Priya Darshini
- R Ramu Ganesan
- RS Ranjani Srinivasan
- Sai Aditiya
- Santra Joseph

Chat Invite

8:36 4G

Close Participants (75)

- M Abinandhan
- M.LakshmiPriya
- Madhu Bala Sermarajan
- Maha Srinithi Selvaraj
- M Meghana
- Munira Begam
- Naafia Fathima
- Namarrthaa Sre
- Nawin Subhaganesh
- Neha Naomi
- Nehrthika Kumaresan
- Padmajaa Krishnan

Chat Invite

8:36 4G

Close Participants (75)

- Jaya Kumar
- Jayabalan C
- Jineesh M
- Johnvee S
- KR Kadambari Ramaswamy
- KM Kanchana Mala
- Kauvya Karunanidhi
- Kishan Kumar
- Kudiarasi Rajendran
- Lakshika Sree
- LC Lalitha Choudhary
- Logesh Ram

Chat Invite

8:36 4G

Close Participants (75)

- A Ateeq Ahamed
- BI Balaji's iPhone
- Balan Edward
- Chandhni Shanker
- Deepika R M
- GB Gautham B
- GP Gowtham PD
- H. Pavithra
- Harish P
- Hema Suresh
- J Janani
- Jaya Kumar

Chat Invite

8:36 4G

Close Participants (75)

Q Search

- S sanjana (me)
- Ram Prasath (Host)
- Dr. Jagannatha GV
- AM Aakifa M
- Achsah Evangelin
- Adithi Karthik
- agalya Panneer selvam
- Akshayaa Shankar
- AR Anusha R
- ARCHANA S
- Arunachalesh Anbazhagan

Chat Invite


8:36 4G

[Close](#) **Participants (75)**

SS	Sophia srikanth		
SS	Sruthi S		
SK	Suba Keerthi		
	Subashini Natarajan		
SV	Sureka Varatharaj		
	Surya Nandakumar		
TS	Tamil Selvan M D		
VV	Varshini Venkat		
VJ	Vikneshwari Jayabalan		
VJ	Vikraman J		
VM	Vishalini Mohan		
Y	Yuvarani Muthu Kumar		

[Chat](#) [Invite](#)


Recording 00:25:15



Chettinad
Dental College & Research Institute

6. If the prevalence is low as compared to the incidence of the disease, it implies:

- A. Nothing can be said as they are independent
- B. Disease is very fatal and/or easily curable
- C. Disease is non fatal
- D. Assumption is wrongly framed



Recording 00:27:21




Chettinad
Dental College & Research Institute

7. Genetic factors, age, gender, socioeconomic status are also known as:

- A. Risk determinant
- B. Risk factors
- C. Risk indicators
- D. Risk markers

Sophia srika...	Padmaja Kri...	Jaya Kumar...	Nehrika Ku...
Vishalini Mo...	Pavithra Iaks...	Adithi Karthik	sanjana
Lakshmi Sree	Johnvee S	Kishan Kumar	Gautham B
Prabhavathi	Yuvarani Mu...	Padmaje Se...	Meghana
Neha Naomi	Nawin Subha...	Suba Keerthi	M Abinanchan
Jineesh M	Shivani Sivaram...	Jayabalan C	Akshayaa Sh...

Recording 00:25:08




Chettinad
Dental College & Research Institute

5. The common first approach to test casual hypothesis is:

- A. Case control study
- B. Cohort study
- C. Randomized control trial
- D. Descriptive study


Dr. Jagannatha...	Sai Aditya	Priya Darghini	Santra Joseph
Pavithra Rath...	Kudiarasu Raj...	Sruthi S	Ranjani Sriniv...
Hema Suresh	Tamil Selvan...	Ram Prasath	ARCHANA S
Vikraman J	Shweta Ranjith	Ramu Ganes...	Maha Srinithi...
Achiah Evan...	Lalitha Chou...	Surya Nanda...	Pavithra Iaks...
Anusha R	Jaya Kumar	Nasifa Fatthi...	Gowtham PD

Recording 00:25:06



5. The common first approach to test casual hypothesis is:


- A. Case control study
- B. Cohort study
- C. Randomized control trial
- D. Descriptive study



Participant list (from top-left to bottom-right):


- Dr. Jagannatha...
- Sai Aditya
- Priya Darshini
- Santra Joseph
- Pavithra Rath...
- Kudiaraj Raj...
- Sruthi S
- Ranjani Sriniva...
- Hema Suresh
- Tamil Selvan ...
- Ram Prabath
- ARCHANA S
- Vikraman J
- Shweta Radjith
- Romy Ganes...
- Maha Srinith...
- Achsan Evan...
- Lalitha Chou...
- Surya Nanda...
- Pavithra laka...
- Anusha R
- Jaya Kumar
- Naasha Fathi...
- Gowtham PO

Recording Remaining Meeting Time: 04:47 | Upgrade to Pro 00:35:20



13. Severity of a disease is measured by:


- A. Relative risk
- B. Proportional mortality rate
- C. Attributable risk
- D. Case fatality rate



Participant list (from top-left to bottom-right):

- Padmajaa Kri...
- Sathya Gane...
- H. Pavithra
- Sneha
- Arunachalesh...
- Neha Naomi
- Adithi Karthik
- Johmee S
- Aamina Alra
- Vuvarani Mit...
- Sophia shri...
- Jineesh M
- Meghana
- Balaji's iPhone
- Vikneshwari J...
- Gautham B
- Lakshika Sree
- Nawin Subha...
- Akshaya Sh...
- sanjana
- M Abinandhan
- Shivani Sivaram...
- Jaysbajan C
- Harish P

Recording You are viewing Dr. Jagannatha GV's screen View Options 00:10:53 Speaker View Exit Full Screen

 **Chettinad**
Dental College & Research Institute

3. The basic tools of measurement in epidemiology are:

- A. Epidemic, Pandemic and endemic
- B. Morbidity, mortality and disability
- C. Rates, ratios and proportions
- D. Incidence, prevalence and index

Ateeq Ahamed Anusha B Achshah Evan M. Lakshminipriya

Logesh Ram Akifa M Tamil Selvan Machu Balaji

Rakshansa J. Gowtham PO Jaya Kumar Deepika R. M.

Arundhalesh Kanchana M. Lakshika Sree Kadambani R.

Suba Keerthi H. Pavithra Padmasree Kiran Navin Subha...

Munira Begam Ranjani Sriniv. Adithi Karthik Akshayaa Sh...

Unmute Stop Video Participants 75 Chat Share Screen Record Reactions Leave Meeting

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

Theory Class via Zoom App

Theory Class Report
Session I: 08.30 AM – 09:30 PM

Date:09.05.2020

Faculty: Dr.NAGAPPAN N (Faculty Incharge)
Dr Nagaland T

Students: IV Year Supplementary Batch

Students Present: 07/07

Total No of Students: 07/07

1. Ragavi Vijayan. 2. Thouseef Ahmed. 3.Harini Prabha 4. Vishnu Kumar
5. Dhanesh Bala. 6. Harish Raghav 7. V Priyanga.

Discussion topic: Topical Fluorides

Summary:


First there was a revision about systemic fluorides.Sir gave a brief introduction to topical fluorides ,their indications was taught.Then sir spoke about professionally applied and self applied and categories underthem was taught in brief.About their advantages and disadvantages,their preparation, mechanism of action, procedure and how it should be used was taught in detail.Their was discussion about recent advances in topical fluoride.




AssignmentQuestions are



- 1.Difference between stannous fluoride, sodium fluoride and acidulated phosphate fluoride.
- 2.Difference between acidulated phosphate gel and solutions.
- 3.Dentifrices -about fluoride dentifrice and ppm.
- 4.classify mouthrinses and mention it's ppm and it's caries reduction activity. 5.Brudevold solution.



Close




Participants (10)




 Search




 *Thouseef Ahmed* (me)   >




 *v.priyanga* (host)   >




 *Dr N Nagappan*   >




 *naga deep*   >


 *Dhanesh Bala*   >

 *Harini Prabha*   >

 *Harish Raghav*   >

 *Ragavi vijayan*   >

 *Vishnu Kumar*   >

 *Thouseef Ahmed*   >





9:08 AM | 48.275.93 |   

 Recording

FLUORIDE MOUTH RINSES



- First introduced by bibby et al in 1946.
- ADA accepted neutral sodium fluoride and acidulate phosphate fluoride mouth rinses as effective caries preventive agents.
- Sodium fluoride mouth rinses;
 - They are usually formulated at concentration of 0.2% for weekly use or 0.05% for daily use.
 - These rinses are intended to be used forcefully swishing 10ml of the liquid around mouth for 60sec before expectoring it.



Houseef Ahmed's screen 

8:35 AM | 46.55.91.1

Recording

8:48 AM | 99.076.91.1

Recording

Procedure for application of Sodium Fluoride [Knutsons Technique]:

- oral prophylaxis done
- ↓
- teeth isolated either by quadrant or by half mouth
- ↓
- 2% NaF solution is painted on the air dried teeth so that all surfaces are visibly wet
- ↓
- allowed to dry for 3-4 minutes
- ↓
- repeated for each of the isolated segments until all teeth are treated
- ↓
- 2nd, 3rd and 4th NaF application, each not preceded by a prophylaxis, is scheduled at intervals of approximately one week.
- ↓
- The fourth visit procedure is recommended for ages 3,7,11 and 13 years, coinciding with the eruption of different age groups of primary and permanent teeth. Thus, most of the teeth will be treated once in the lifetime of the individual.



Thouseef Ahmed's screen


Thouseef Ahmed's screen

8:58 AM | 76.55%
📶 📶 📶 🔋 72%
9:14 AM | 68.15%
📶 📶 📶 🔋 65%



🔴 Recording
🔴 Recording

SELF APPLIED TOPICAL FLUORIDES;

- Self applied fluorides are usually bought and dispensed by the individual patient but at recommendation OF DENTAL PROFESSIONAL.
- These fluoride products as low concentration ranging from 0.2-1.0mgF/ml.




TOPICAL FLUORIDES





M.THOUSEEF AHMED
FINAL YEAR
BATCH : 2015-2016

Thouseef Ahmed's screen



Thouseef Ahmed's screen



DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical e-discussion Report
Session I: 10.30 AM – 11:20 AM

Date:09.05.2020

Faculty: Dr.NAGAPPAN N (Faculty Incharge)

Students: IV Year Regular Batch –E

Students Present: 13/13

Total No of Students: 13/13(E-batch)

1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: Introduction to Preventive Dentistry

Summary:

The discussion for the first session started with the definition of health, public health and preventive dentistry. we were explained about the “objectives of preventive Dentistry”. we were also explained in brief about the levels of prevention (primordial prevention , primary prevention , secondary prevention and tertiary prevention)

Zoom Meeting

Recording...

Participants (14)

Find a participant

Sai Adithya (Host, me)

Dr N Nagappan

Sathya Ganesan

Rakshanaa Jeyan

Ram Prasath

Ramu Ganesan

Ranjana Srinivasan

Ranjana

Santra Joseph

Shodhaja N

Shivani Sivaramakrishnan

Shruthi priya

Shweta Rangith

Sneha D

Join

Mute All

Unmute All

00:10:08

10:40 AM
09-01-2020

Zoom Meeting

Recording

Table 9-2 Dental services: individual, community, and dental professional preventive dentistry services

Level of prevention	Primary	Secondary	Tertiary
Preventive services	Health promotion	Specific prevention	Stability maintenance
Services provided by the individual	Life planning, dental care, personal hygiene, general health, dental care	Appropriate use of fluoride, dental X-rays, appropriate use of dental restorative services, use of a fluoride dentifrice	Use of dental services
Services provided by the community	Dental health education program, provision of oral health advice, dental advice	Community oral health programs, school dental advice program, dental advice program, school dental advice program	Provision of dental services
Services provided by the dental professional	Personal education program, dental advice, dental advice, dental advice	Targeted application of fluoride, fluoride varnish, dental advice, dental advice, dental advice	Complete restorative dentistry, periodontal treatment, dental care, dental care, dental care

Modified from Stenning GR. Principles of Preventive Health of A Chettinad. 1980. Revised Community Health and Dental Care in preventive dentistry. J Prev Dent 1:25, 1978.

Participants (14)

Find a participant

Sai Adithya (Host, me)

Dr N Nagappan

Sathya Ganesan

Rakshanaa Jeyan

Ram Prasath

Ramu Ganesan

Ranjana Srinivasan

Ranjana

Santra Joseph

Shodhaja N

Shivani Sivaramakrishnan

Shruthi priya

Shweta Rangith

Sneha D

Join

Mute All

Unmute All

11:02 AM

10:36 4G

[Close](#) Participants (13)

Q Search

S	sanjana (me)	
	Sai Aditiya (Host)	
DN	Dr N Nagappan	
	Ram Prasath	
R	Rakshanaa Jeevan	
R	Ramu Ganesan	
RS	Ranjani Srinivasan	
	Santra Joseph	
SG	Sathiya Ganesan	
SS	Shivani Sivaramakrishnan	
	shruthi priya	

10:36 4G

[Close](#) Participants (13)

	Sai Aditiya (Host)	
DN	Dr N Nagappan	
	Ram Prasath	
R	Ramu Ganesan	
R	Rakshanaa Jeevan	
RS	Ranjani Srinivasan	
	Santra Joseph	
SG	Sathiya Ganesan	
SS	Shivani Sivaramakrishnan	
	shruthi priya	
SR	Shweta Ranjith	
	Sneha D	

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical e-discussion Report
Session I: 11.20 AM – 12:30 PM

Date:09.05.2020

Faculty: Dr.NAGAPPAN N (Faculty Incharge)
Dr Nagaland T

Students: IV Year Regular Batch –E

Students Present: 13/13

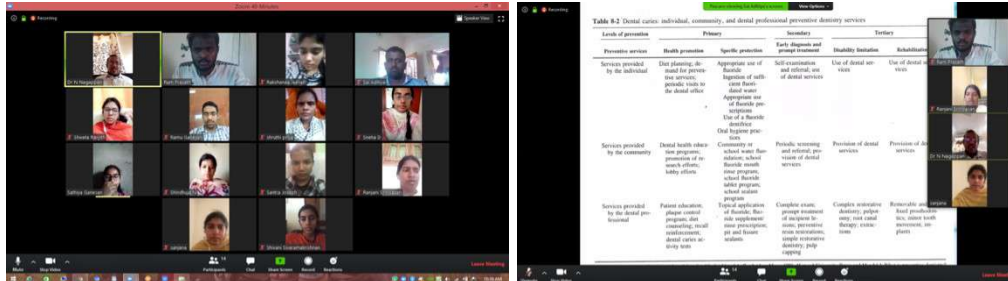
Total No of Students: 13/13(E-batch)

1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: Introduction to Preventive Dentistry (Continuation)

Summary:

The discussion for the second session started with detail about the levels of prevention of DENTAL CARIES,PERIODONTAL DISEASES,MALOCCLUSION AND ORAL CANCER



The screenshot shows a Zoom meeting interface. On the left, a grid of 15 participants is visible. On the right, a presentation slide titled "Table 6.2 Dental caries: individual, community, and dental professional preventive/diagnostic services" is displayed. The slide is divided into four columns: Primary, Secondary, Tertiary, and Quaternary. Each column lists specific services and interventions for dental caries prevention and management.

Level of prevention	Primary	Secondary	Tertiary	Quaternary
Preventive services	Health promotion	Specific prevention	Early diagnosis and prompt treatment	Disability limitation
Services provided by the individual	Oral planning, demand for preventive services, personal visits to the dental office	Aggressive use of fluoride, brushing of teeth, dental water, appropriate use of fluoride preparations	Self-examination and referral, use of dental services	Use of dental services
Services provided by the community	Dental health education programs, promotion of oral health, early referral, early referral	Community or school water fluoridation, school dental health programs, school dental health programs, school dental health programs	Periodic screening and referral, provision of dental services	Provision of dental services
Services provided by the dental professional	Patient education, plaque control programs, diet counseling, dental radiographs, dental caries activity tests	Topical application of fluoride, fissure sealant application, pit and fissure sealants	Complete exams, periodic examinations of occlusal wear, preventive care, restorative dentistry, pulp therapy	Removable prosthodontics, dental prosthetics, dental prosthetics, dental prosthetics



The screenshot shows a mobile app interface with a presentation slide titled "Prevention of malocclusion". The slide is divided into four columns: Primary prevention, Secondary prevention, Tertiary prevention, and Quaternary prevention. Each column lists specific services and interventions for malocclusion prevention and management.

Level of prevention	Primary prevention	Secondary prevention	Tertiary prevention	Quaternary prevention
Health promotion	Health promotion	Early diagnosis and prompt treatment	Disability limitation	Rehabilitation
Individual	Avoidance of known irritants	Self-examination and referral	Use of dental professional services	Use of dental professional services
Community	Dental health education programs, promotion of research, effects	Periodic screening and referral	Provision of dental services	Provision of dental services
Dental professional	Patient education & motivation	Removal of known irritants in the oral cavity	Complete examination: Surgery, Orthodontics, Complete orthodontics	Maxillo-facial & Prosthetic Plastic surgery



11:30 4G

Close Participants (14)

Q Search

S	sanjana (me)		
	Sai Aditiya (Host)		
DN	Dr N Nagappan		
DN	Dr Nagaland		
R	Rakshanaa Jeevan		
	Ram Prasath		
R	Ramu Ganesan		
RS	Ranjani Srinivasan		
	Santra Joseph		
SG	Sathiya Ganesan		
SN	Shindhuja N		

Chat Invite

3:19 4G

Close Participants (14)

DN	Dr N Nagappan		
R	Rakshanaa Jeevan		
R	Ramu Ganesan		
RS	Ranjani Srinivasan		
	Santra Joseph		
SG	Sathiya Ganesan		
SN	Shindhuja N		
SS	Shivani Sivaramakrishnan		
	shruthi priya		
SR	Shweta Ranjith		
S	Sneha		
	Sai Aditiya		

Chat ² Invite

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION via Zoom App

Clinical e-discussion Report

Date:09.05.2020

Session III: 03.00 PM – 04:00 PM

Faculty: Dr.NAGAPPAN N (Faculty Incharge)

Students: IV Year Regular Batch –E

Students Present: 13/13

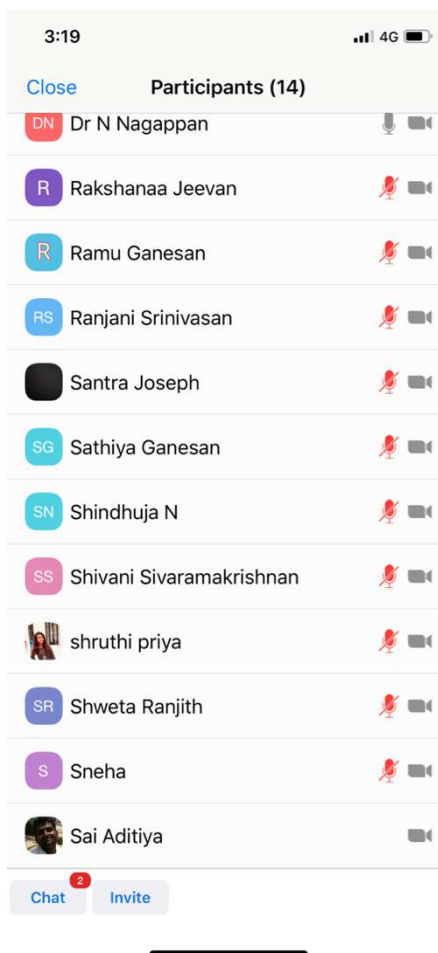
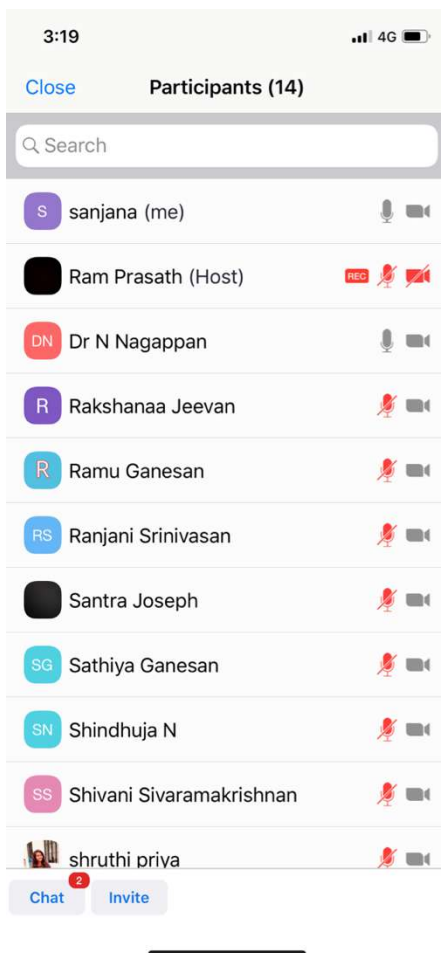
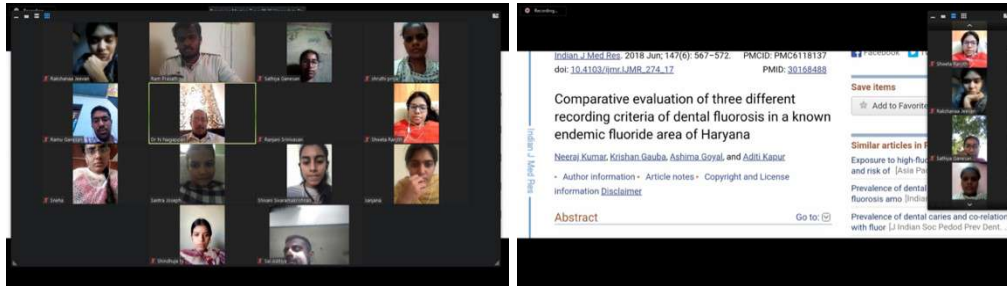
Total No of Students: 13/13(E-batch)

1. RAKSHANA.J 2. RAM PRASANTH 3.RAMU.G 4. RANJINI
5. SAI ADITIYA NARAYANAN. 6. SANJANA.D 7. SANTRA JOSEPH 8. SATHIYA.G
9. SHINDUJA.N 10. SHIVANI.S 11. SHRUTHI PRIYA
12. SHWETA RANJITH 13.D.SNEHA

Discussion topic: Article Discussion about Fluorosis

Summary:

The E batch,final year BDS students had article discussion with Dr.Nagapan sir from 3:00pm to 4:00pm via ZOOM application.He discussed with us three articles regarding fluorosis ..He also discussed with us the scoring of fluorosis index .It was an interactive session.



DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical supplementary B- batch discussion Report
Session I: 10:20pM – 11:15AM

Date:09.05.2020

Faculty: Dr. Jagannatha G.V.

Students: IV Year supplementary Batch –B

Students Present: 1/1

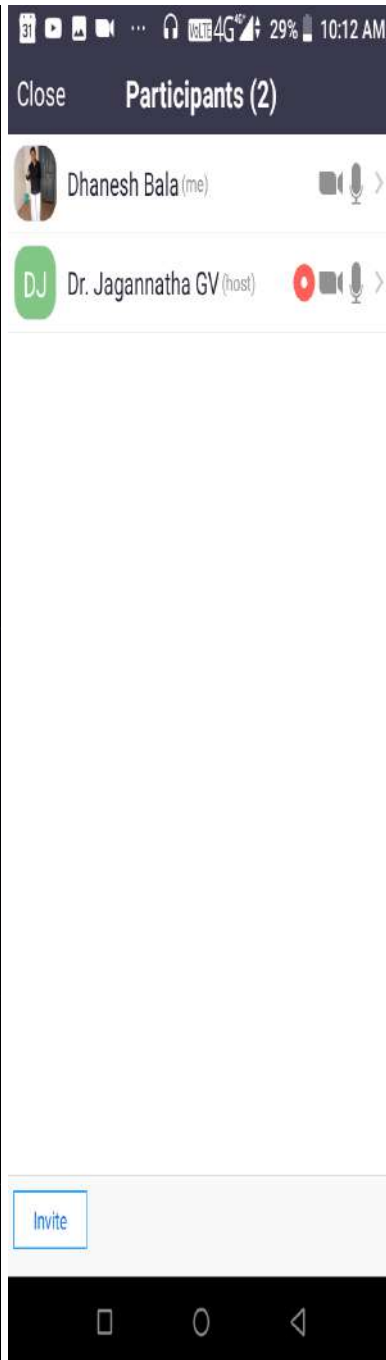
Total No. of Students: 1/1(B-batch)

1. Dhanesh Bala K. R.




Discussion topic: Oral hygiene aids


Summary:



The introduction started with understanding the importance of oral hygiene aids in relation to optimum oral health. The role of each aid and the accompanying materials used and their composition of dentifrices and dental floss and its significance and Toothbrushes and Toothbrushing techniques and played a video of modified Bass brushing technique and how to do dental floss and functioning of electronic tooth brush and gave the assignment about to know about brands of tooth brush and tooth paste used in India and composition of dentifrices and its specific role in oral hygiene.



31





 VoLTE 4G 46% 29% 10:12 AM



Zoom


Leave


 Recording


 Chettinad
Dental College & Research Institute


Oral hygiene aids


K.R.DHANESH BALA






 Mute

 Stop Video


 Share

 Participants

 More







DEPARTMENT OF PUBLIC HEALTH DENTISTRY

CLINICAL POSTING e-DISCUSSION

Clinical supplementary B- batch discussion Report
Session II: 12:35AM – 1:25 AM

Date:09.05.2020

Faculty: Dr. Jagannath G.V

Students: IV Year supplementary Batch –B

Students Present: 1/1

Name of student: Dhanesh Bala




Discussion topic: Assessment of tobacco use and tobacco cessation




Summary:

Had a quick recap of different brands of tooth paste used and tooth brush used in India and composition of dentifrices. The discussion on the role briefed about assessment of tobacco use and described the introduction of tobacco ,forms of tobacco, smoke form and smokeless tobacco form and nicotine side-affects and withdrawal symptoms of tobacco and effects of tobacco in oral cavity like oral cancer, periodontal disease, failure of dental implants, poor wound healing etc, and effects of tobacco in the body and implementation strategies of tobacco and discussed about our college department of Public Health Dentistry counselling to the patient about tobacco quitting and tobacco cessation control of 5 'As' and 5 'Rs' advise to the patient. This session is a very interactive session and shared the article of tobacco cessation and described the tobacco cessation controls present in the article and gave an assignment of preparing the presentation of tobacco by referring the article which was sent by the sir in the end of the second session.

31 12:56 PM 33% 4G

Close **Participants (2)**

 **Dhanesh Bala** (me)  

 **Dr. Jagannatha GV** (host)  

Invite

31 12:55 PM 33% 4G

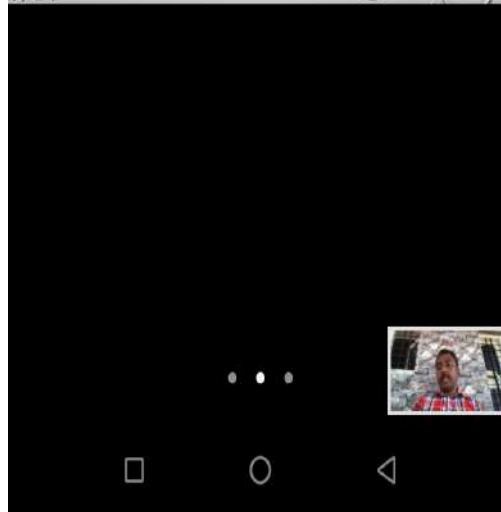
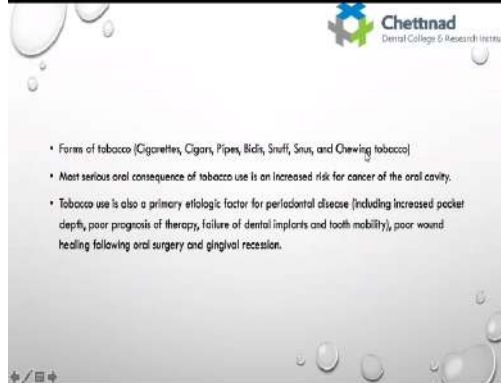
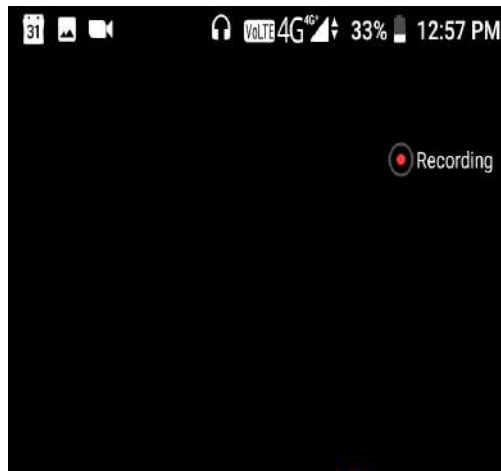
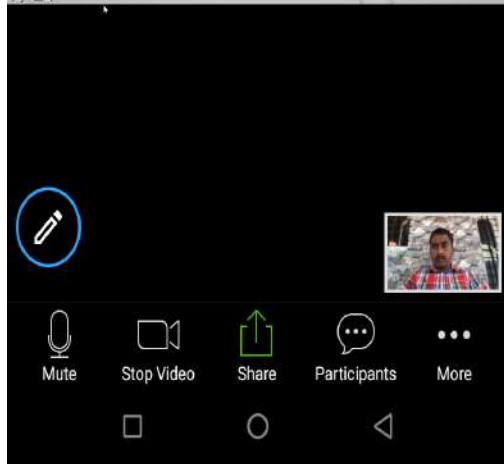
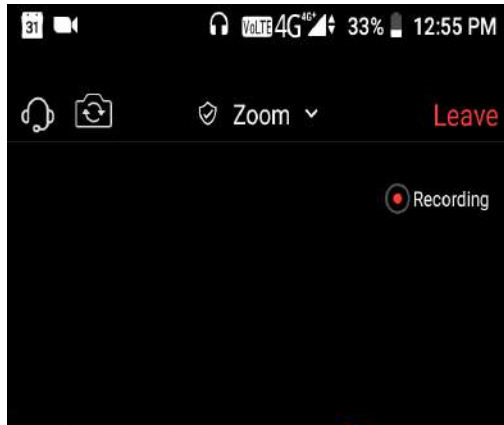
   Zoom  Leave

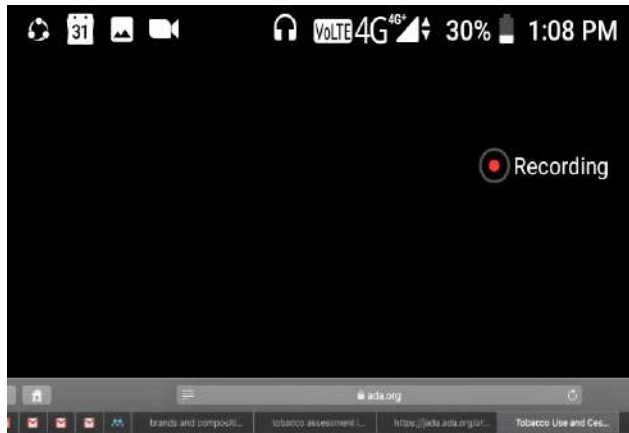
 Recording


Dhanesh Bala


Dr. Jagannatha GV

 Mute  Stop Video  Share  Participants  More





2019 Statement from ADA President on Vaping:

[Read the Statement](#)

Introduction

Nicotine: Use and Dependence

There are more than 7,000 chemicals found in the smoke of tobacco products, including nicotine, tar, carbon monoxide, acetaldehyde, and N-nitrosamines.^{1,2} Nicotine is the primary addicting component.³ Smokeless products also contain nicotine, in addition to many other toxic chemicals.⁴ By inhaling tobacco smoke, the average smoker takes in 1 to 2 mg of nicotine per cigarette.⁵ When tobacco is smoked, nicotine rapidly reaches peak levels in the bloodstream and enters the brain. If the smoke is not directly inhaled into the lungs, as with cigar and pipe smokers, or with consumption of smokeless products, nicotine is absorbed through the mucous membranes and reaches peak blood levels and the brain more slowly.⁶ Cigarette smoking produces a rapid distribution of nicotine to the brain, with drug levels peaking within 10 seconds of inhalation.⁶ However, the acute central effects of nicotine dissipate quickly, as do the associated pleasant feelings, compelling people to continue to smoke to maintain the nicotine's pleasurable effects and prevent withdrawal.⁷

In the central nervous system, nicotine activates neural "reward" pathways that regulate feelings of pleasure.⁸ This activation is mediated through the effects of the neurotransmitter dopamine. Nicotine increases levels of dopamine in the reward circuits, which is a reaction also seen with other drugs of abuse and is thought to be the basis for the pleasurable sensations experienced by many smokers. For many tobacco users, long-term brain changes induced by continued nicotine exposure result in addiction.⁹

