

KERALA UNIVERSITY OF HEALTH SCIENCES THRISSUR - 680 596, KERALA, INDIA

OFFICIAL TRANSCRIPT Name of the Student: Gender: Date of Birth: **Nationality:** Parent / Guardian (as per University records): **Permanent Address: KUHS Registration Number:** Master of Dental Surgery (MDS) Name of the Course: Speciality: **Prosthodontics and Crown & Bridge Medium of Instruction: English** Degree awarded by: Kerala University of Health Sciences, Thrissur, Kerala, India Name of the college of study Address of the college of study: **Duration of the course:** Three years

Date of admission:	
Date of Completion of Course:	
Title of dissertation:	
Name & Designation of Guide:	
Library dissertation / Project:	
Date	Signature of the Principal
Office Seal	Name of the Principal

<u>MDS PART- I Examination:</u> (Theory Examination on Applied Basic Sciences taken at the end of 1st academic year, 3 hours/paper):

1. Paper I : Applied Basic Sciences: Applied	Universi	ity Theory m	arks
Anatomy, Nutrition & Biochemistry, Pathology & Microbiology, virology, Applied	Maximum	Maximum	Marks awarded
Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.	100	50	uwurucu

MDS PART – II Examination: (Examination on the speciality taken at the end of 3rd academic year, 3 hours/naner):

3rd ac	ademic year,3 hours/paper):			
Sl	University Theory m		arks	
No	Subject	Maximum	Minimum	Marks
	-			awarded
1.	Paper I: Complete denture & Removable	100		
	Prosthodontics and Implant supported prosthesis			
	(Implantology), Geriatric dentistry and Cranio			
	facial Prosthodontics			
2.	Paper II: Fixed Partial Prosthodontics,	100		
	Occlusion, TMJ and Aesthetics			
3.	Paper III: Essay(Descriptive and Analyzing			
	type questions)	100		
	Total	300	150	
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	Practical Examination consisting of			
	Presentation of Clinical Records and Clinical			
	procedures – Complete Denture, Fixed Partial	200	-	
	denture and Removable Partial Denture			
	Viva Voce	100	-	
	Total	300	150	
	Grand Total (Theory (Part I + Part II	700	350	
)+Practical + Viva)			

Percentage of marks obtained:	Class:
Rank (if any):	
Marks verified & found correct:	

CERTIFICATE

This is to certify and confirm that Dr	
KUHS registration No	, was a bonafide student of MDS course
(speciality) from
(month and year) to	o(month and year).
This is a regular course of 3 years conducted at	
	(Name of
college) as per the requirements prescribed by the	e Kerala University of Health Sciences,
Thrissur, Dental Council of India and the Kerala	Dental Council. He/she has successfully
completed the course and was awarded the degree at	the convocation held on
verified & found correct:	
Controller of Examinations	Registrar
Name & Signature	Name & Signature
	Thrissur
	Date:
KUHS Seal	