



**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:

Name of the Course : Master of Dental Surgery

Speciality: Conservative Dentistry and Endodontics

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 :

Date of publication of Final Result:

Title of dissertation:

Name & Designation of Guide:

Library dissertation / Project:

PART - I Examination (Examination on Basic Sciences taken at the end of 1st Year, 3 hrs/paper):

| Sl No | Subject | University Theory | | |
|-------|--|-------------------|-----|----------------|
| | | Max | Min | Marks Obtained |
| 1 | Applied General Anatomy of the Head and neck, Oral & Dental Anatomy & Histology | 100 | 50 | |
| 2 | Applied General & Oral Physiology including Nutrition and Pharmacology | 100 | 50 | |
| 3 | Applied General & Oral Pathology and Microbiology | 100 | 50 | |
| 4 | Research Methodology, Biostatistics, Dental Radiology, Emergency Medical Management, Ethics in Dentistry | 100 | 50 | |
| | Total | 400 | 200 | |

PART - II: (Examination on the speciality taken at the end of 3rd Year, 3 hrs/paper):

| Sl. No | University Theory Papers | Max | Min | Marks Obtained |
|--------|--|------|-----|----------------|
| 1 | Paper I – Conservative Dentistry | 100 | 40 | |
| 2 | Paper II – Endodontics | 100 | 40 | |
| 3 | Paper III – Dental Materials and Public Health Dentistry | 100 | 40 | |
| 4 | Paper IV - Single Essay on Recent Advances in the speciality | 100 | 40 | |
| | Theory Group Total | 400 | 200 | |
| | Practical Examination consisting of Presentation of Clinical Records and Clinical procedures – Root Canal Therapy, Cast Post and Core and Inlay | 400 | 200 | |
| | Viva Voce | 200 | 100 | |
| | Grand Total | 1000 | 500 | |

Percentage of marks obtained:

Class :

Rank (if any) :

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
_____ (month and year). This is a regular course of 3 years conducted at
_____ (Name of college) as per the
requirements prescribed by the Kerala University of Health Sciences, Thrissur, Dental Council of India
and Kerala Dental Council. He/She has successfully completed the course and was awarded the degree at
the convocation held on _____

Place: Thrissur, Kerala

Date:

Authority of the University

Name & Signature

KUHS

Seal