



**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:**

<b>Name of the Course:</b>	<b>Master of Dental Surgery (MDS)</b>
<b>Speciality:</b>	<b>Prosthodontics and Crown &amp; Bridge</b>

**Medium of Instruction: English**

<b>Degree awarded by:</b>	<b>Kerala University of Health Sciences, Thrissur, Kerala, India</b>
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**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:**

Date

Signature of the Principal

Office Seal

Name of the Principal

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

1.	<b>Paper I : Applied Basic Sciences:</b> Applied Anatomy, Nutrition & Biochemistry, Pathology & Microbiology, virology, Applied Dental anatomy & histology, Oral pathology & oral Microbiology, Adult and geriatric psychology. Applied dental materials.	University Theory marks		
		Maximum	Maximum	Marks awarded
		<b>100</b>	<b>50</b>	

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

Sl No	Subject	University Theory marks		
		Maximum	Minimum	Marks awarded
1.	<b>Paper I:</b> Complete denture & Removable Prosthodontics and Implant supported prosthesis (Implantology), Geriatric dentistry and Cranio facial Prosthodontics	100	40	
2.	<b>Paper II :</b> Fixed Partial Prosthodontics, Occlusion, TMJ and Aesthetics	100	40	
3.	<b>Paper III :</b> Essay(Descriptive and Analyzing type questions)	100	40	
	<b>Theory Group Total</b>	<b>300</b>	<b>150</b>	
	<b>Practical Examination</b> consisting of Presentation of Clinical Records and Clinical procedures – Complete Denture, Fixed Partial denture and Removable Partial Denture	200	100	
	<b>Viva Voce</b>	100	-	
	<b>Total</b>	<b>300</b>	<b>150</b>	
	<b>Grand Total (Theory (Part I + Part II )+Practical + Viva)</b>	<b>700</b>	<b>350</b>	

Percentage of marks obtained:

Class:

Rank (if any):

*Marks verified & found correct:*

**Controller of Examinations**

**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 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**

**Name & Signature**

**Authority of the University**

**Name & Signature**

Thrissur

Date:

