



**KERALA UNIVERSITY OF HEALTH SCIENCES
THRISSUR – 680 596, KERALA, INDIA**

OFFICAL 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: Oral and Maxillofacial Surgery

Medium of Instruction: English

Degree awarded by: Kerala University of Health Sciences, Thrissur, Kearala, 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:

(To be filled in by the Principal)

Title of dissertation :

Name & Designation of Guide :

Library dissertation / Project :

Applied Professional Experience (APEX) / Posting to other institutions or departments:*

Subject	Duration	From	To	Institution / Department of posting
General Surgery	30 days			
Anaesthesia	15 days			
ENT	15 days			
Plastic Surgery	15 days			
Surgical Oncology	60 days			
Neurology	15 days			
Cleft & Craniofacial Surgery	15 days			
General Medicine	15 days			

Date

Signature of the Principal

Office Seal

Name of the Principal

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	Paper I - Applied General Anatomy of the Head and neck, Oral & Dental Anatomy & Histology	100	50	
2	Paper II - Applied General & Oral Physiology including Nutrition and Pharmacology	100	50	
3	Paper III - Applied General & Oral Pathology and Microbiology	100	50	
4	Paper IV - Research Methodology, Biostatistics, Dental Radiology, Emergency Medical Management, Ethics in Dentistry	100	50	
	Total	400	200	

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

Sl. No	University Theory Papers	Max	Min	Marks Obtained
1	Paper I – Applied Basic Science, Diagnostics and Anaesthesia	100	50	
2	Paper II – Diseases and Defects of Oro-Facial Region, Surgical Pathology	100	50	
3	Paper III – Traumatology and Maxillofacial Surgical Procedures	100	50	
4	Paper IV – Essay on Recent Advances in the speciality.	100	50	
	Total	400	200	
	Practical	400	200	
	Viva Voce	200	100	
	Grand Total	1000	500	

Percentage of marks obtained:

Grade :

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 Science, 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

Name & Signature of Registrar

Date:

