



# RAJAS DENTAL COLLEGE & HOSPITAL

Kavalkinaru, Tirunelveli, Tamil Nadu – 627105

Affiliated to The Tamil Nadu Dr. M.G.R. Medical University, Accredited by NAAC

## EXAMINATION REFORMS

### REMEDIAL MEASURES

4. REMEDIAL CLASS COMMITTEE A) LANGUAGE LAB		
Convener	Dr.K.Aruna,M.Sc.,Ph.D.,	Anatomy
Member	Dr.G.Rekha,M.Sc.,Ph.D	Anatomy
B) SLOW LEARNERS		
I Year	Dr.K.Aruna,M.Sc.,Ph.D.,	Anatomy
	Ms.I.Gayathri Fathima, M.Sc	Physiology
	Dr.G.Krishnamoorthy, M.Phil.,Ph.D	Biochemistry
	Dr.M.S.Jaish Lal,MDS	Oral Pathology
II Year	Dr.T.S.Jashree Thilak Bell, MBBS,MD	General Pathology
	Dr.R.Premchandran,MBBS,MD	Microbiology
	Dr.John D Milton,Ph.D	Pharmacology
III Year	Dr.Raghu Dhanapal, MDS	Oral pathology
	Dr.C. Ananthi,MD,DA	General Medicine
	Dr.U.Arunachalam,MS,MCh	General Surgery
IV Year	Dr.M.Kandasamy,MDS	Oral Medicine
	Dr.A.Esai Amutha Prabha,MDS	Pedodontics
	Dr.Mohan Raj J.P,MDS	Periodontics
	Dr.S.Jocphin Soundar,MDS	Prosthodontics
	Dr.Lal Krishna, A.R. MDS	Conservative Dentistry
	Dr.Vimal Joseph Devadoss, MDS	OMFS
	Dr.M.P.Angelin Megha,MDS	Orthodontics
Dr.Vinej Somaraj,MDS Public Health Dentistry		
XIII.COMMUNITY OUTREACH PROGRAMME COMMITTEE		
I. CAMP ACTIVITIES		
Convener	Dr.P.Ravi Shankar, MDS	Public Health Dentistry
Member	Dr.Vinej Somaraj, MDS	Public Health Dentistry
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2. N.S.S		
Convener	Dr.J.John Hearty Deepak ,MDS	Oral Medicine
3. RED RIBBON CLUB AND INDIAN REDCROSS		
Convener	Dr.J.John Hearty Deepak ,MDS	Oral Medicine
4. ROTARACT CLUB		
Convener	Dr.K.U.Goma Kumar,MDS	Oral Pathology
5. ZERO HOUR PROGRAMME		
Convener	Dr.K.U.Goma Kumar,MDS	Oral Pathology
6.SATELLITE CLINIC		
Convener	Dr.P.Ravi Shankar,MDS	Public Health Dentistry
Members	Dr.Divya Praseedaman, BDS	Public Health Dentistry
	Dr.Sivakami.R.V., BDS	Vettornimadam
XIV. STUDENT'S COUNCIL		
President	Mr.John Vesly Durairaj. C	IV Year BDS
Vice-President	Ms.Amar Jothi N.K.	IV Year BDS
Members	Ms.Arnika	III Year BDS
	Mr.Sivapathy. G	I Year BDS
	Ms.Sumithra.M	I Year BDS
	Ms.Queen Jochebed Daniel	II Year BDS
	Ms.Banupriya	III Year BDS
	Ms.Muthukaleeswari	III Year BDS
	Mr.Balaji. V	IV Year BDS
	Dr.J.Joselin Agnes Daniela	PG-Conservative Dentistry
	Dr.Siravanan	PG-OMFS
	Dr.Rebecca Jason	PG-Oral Pathology
	Dr.Abijah Rajkumar	Intern
HAND BOOK 2020 33		



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POST GRADUATES		
Designation	Name	Department
Convener	Dr.Raghu Dhanapal,MDS	Oral Pathology
	Dr.Nelson.A,MDS	Oral Medicine
	Dr.I.Leyona Pushpa Femina., MDS	Orthodontics
	Dr.Alex Mathews Muruppel, MDS	Implantology
Members	Dr.I.Packiaraj,MDS	OMFS
	Dr.A.Shyam Mohan,MDS	Prosthodontics
	Dr.D.Angeline Deepthi,MDS	Oral Medicine
	Dr.Milling Tania,MDS	Orthodontics
	Dr.V.Rajesh Gopal,MDS	Conservative Dentistry
	Dr.G.Seema,MDS	Periodontics

C. STUDENT COUNSELLING COMMITTEE		
Designation	Name	Department
Convener	Dr. Vinej Somaraj, MDS	Public Health Dentistry
Member	Mr.D.Titus, M.Sc.	Students Counsellor

D. REMEDIAL CLASS COMMITTEE		
A) LANGUAGE LAB		
Designation	Name	Department
Convener	Dr.K.Aruna,M.Sc.,Ph.D	Anatomy
Member	Dr.G.Rekha,M.Sc.,Ph.D	Anatomy
B) SLOW LEARNERS		
Year	Name	Department
I	Dr.K.Aruna,M.Sc.,Ph.D.	Anatomy
	Ms.I.Gayathri Fathima,M.Sc	Physiology
	Dr.G.Krishnamoorthy,M.Sc.,Ph.D	Biochemistry
	Dr.M.S.Jaish Lal,MDS	Oral Histology
II	Dr.T.S.Jashree Thilak Bell,MBBS,MD	General Pathology
	Dr.R.Premchandran,MBBS,MD	Microbiology
	Dr.John D Milton,Ph.D	Pharmacology
III	Dr.Raghu Dhanapal,MDS	Oral pathology
	Dr.C.Ananthi,MBBS,MD, DA	General Medicine
	Dr.S.Rathisha.,MBBS	General Surgery

Men are born to succeed, not fail – Henry David Thoreau

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IV	Dr.M.Kandasamy,MDS	Oral Medicine
	Dr.A.Esai Amutha Prabha,MDS	Pedodontics
	Dr.Mohan Raj,J.P,MDS	Periodontics
	Dr.S.I.Joephin Soundar,MDS	Prosthodontics
	Dr.Nagaraj,MDS	Conservative Dentistry
	Dr.Vimal Joseph Devadoss,MDS	Oral Surgery
	Dr.Priyanka.N.P,MDS	Orthodontics
	Dr.Vinej Somaraj,MDS	Public Health Dentistry

1. CAMP ACTIVITIES		
Designation	Name	Department
Convener	Dr.P.Ravi Shankar, MDS	Public Health Dentistry
Member	Dr.Vinej Somaraj, MDS	Public Health Dentistry

2. N.S.S		
Designation	Name	Department
Convener	Dr.J.John Hearty Deepak,MDS	Oral Medicine

3. RED RIBBON CLUB		
Designation	Name	Department
Convener	Dr.J.John Hearty Deepak,MDS	Oral Medicine

4. ROTARACT CLUB		
Designation	Name	Department
Convener	Dr.K.U.Goma Kumar,MDS	Oral Pathology

5. SATELLITE CLINIC		
Designation	Name	Department
Convener	Dr.P.Ravi Shankar,MDS	Public Health Dentistry
Member	Dr.K.A.Dhanu Shree.,BDS	Vettoornimadam
	Dr.R.S.Naveen Rajesh., BDS	Radhapuram

XIV. STUDENT COUNCIL		
Designation	Name	Department
President	Mr.Imran Khan.	Final Year BDS
Vice-President	Ms.Arnika	Final Year BDS
	Mr. Suheir Vasanth	3 <sup>rd</sup> Year BDS

May you live every day of your life – Jonathan Swift.



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## OSPE (OBJECTIVE STRUCTURE PRACTICAL EXAMINATIONS)







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Participants (9)

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Vinej Somaraj (Me)

Vijiraj (Host)

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Mohan Reghu

Nishanth M

Nivetha P

Ooviya Dushyanth

Invite

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Case Report  
**A Conservative Approach to Surgical Management of Root Canal Perforation**

Régis Augusto Alcino Alves, André Luiz Gomide Morais, Thábata Frederico Izelli, Cynthia R. A. Estrela, and Carlos Estrela

Department of Stomatology Sciences, Federal University of Goiás, Goiânia, Brazil

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This study describes a conservative approach to surgical management of root canal perforation in maxillary lateral incisors. Patient was referred for treatment of a maxillary lateral incisor. The chief complaint was discomfort in the buccal area. Periapical radiography showed radiopaque material consistent with sealing material inside the root canal. A CBCT scan was acquired and revealed a gap/pouch area outside the root canal, from the middle third to beyond the root apex. The intraoral examination showed that the pulp cavity had not been affected. Thus, we took the clinical alternative of surgically managing the perforation by sealing with MTA, thereby avoiding endodontic treatment, and followed up with only clinical and radiographic control. At the two-year follow-up after the surgical procedure to remove the extruded filling material, we observed bone resorption and positive response to pulp tests, without any clinical signs or symptoms. Root perforation is considered a significant error in an operative procedure. Once a perforation is properly diagnosed, located, and sealed with biomimetic favorable prognosis is often achieved. MTA offered good sealing of the perforation, with promising results. Decision-making using the CBCT scan enabled us to adopt a conservative approach and favored more reliable treatment predictability.

**1. Introduction**

Root perforation results in communication between the root canal system and the external tooth surface [1]. When completing the last steps of the endodontic therapeutic protocol, all care must be taken to avoid accidents that may risk losing teeth [2].

In clinical practice, pathological perforations are frequent. Iatrogenic root perforations may occur at any time in root canal treatment, during access cavity opening, root canal preparation, or post preparation. All these procedural operative errors may lead to treatment failure [3–6].

In this respect, previous planning for root canal treatment becomes essential, particularly clinical and radiographic examination. Operative procedures prior to access cavity preparation involve removal of all carious tissue, restoration of defects, and weakening of the dentin structure, actions which could change the coronal reference. Careful analysis of the coronal chamber based on 3-dimensional imaging exams, well-planned selection of a drill compatible with the coronal volume, and good lighting and magnification are essential procedures, because they favor visualization of the cavity during coronary opening, and prevent unpleasant accidents [2,6].

The advent of new technologies incorporated into imaging exams in endodontics, such as cone beam computed tomography (CBCT) [7–9], have impacted the outcome of root canal treatment. Better diagnostic accuracy across several clinical conditions [8–12] and better predictability in the decision-making process in clinical practice has allowed establishing more conservative therapeutic protocols. In this respect, the present study describes a conservative approach to surgical management of root canal perforation in a maxillary lateral incisor.

**2. Case Presentation**

An 11-year-old female patient in good general health sought treatment at the Public Dental Specialty Centre, Brazil, with



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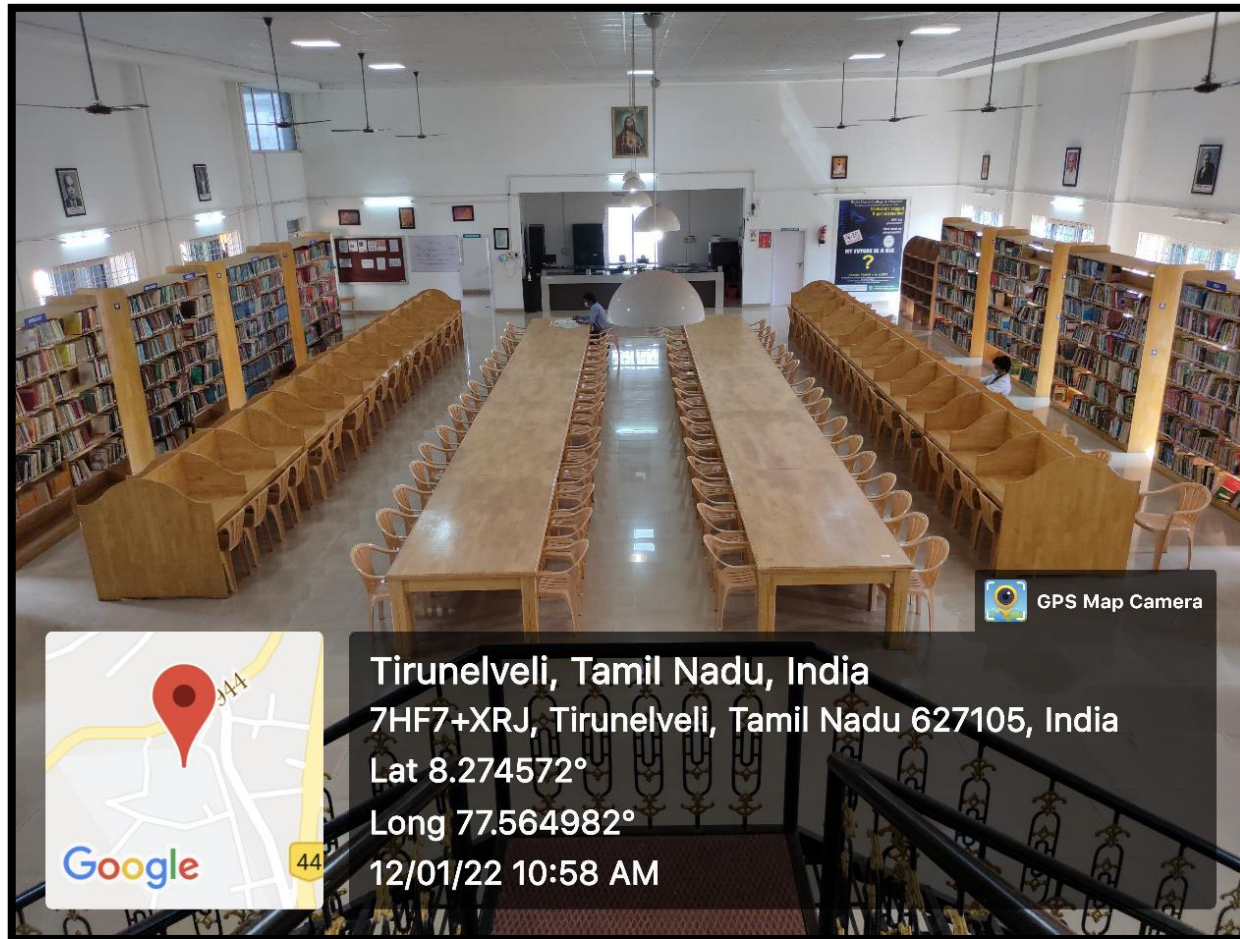


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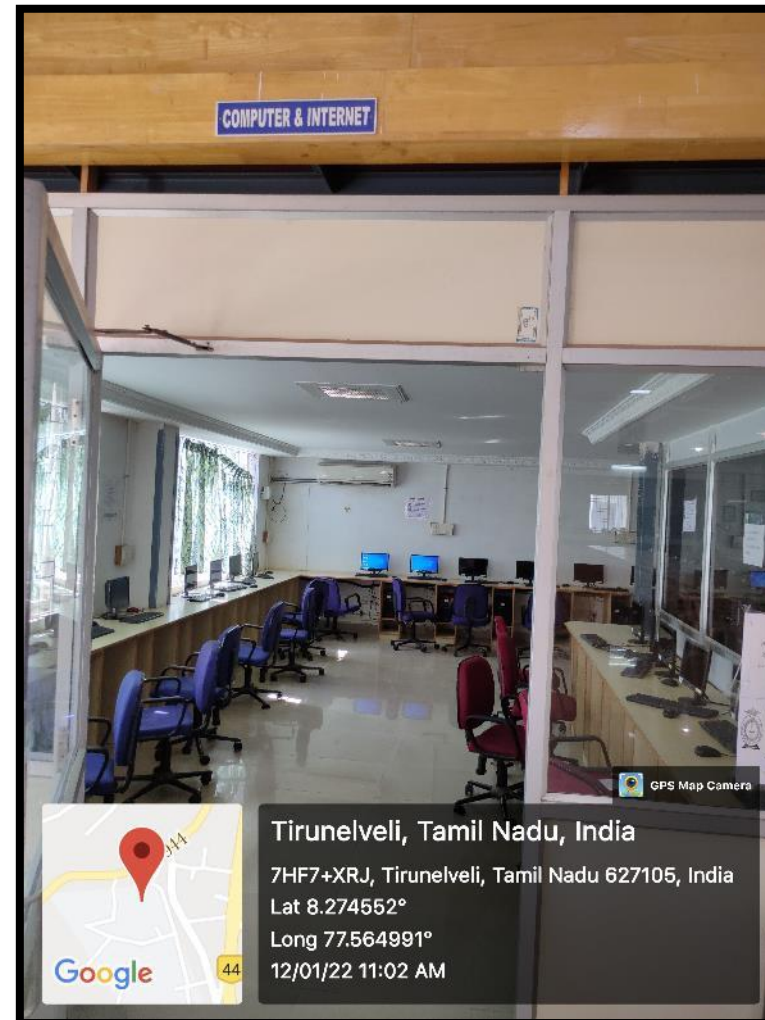




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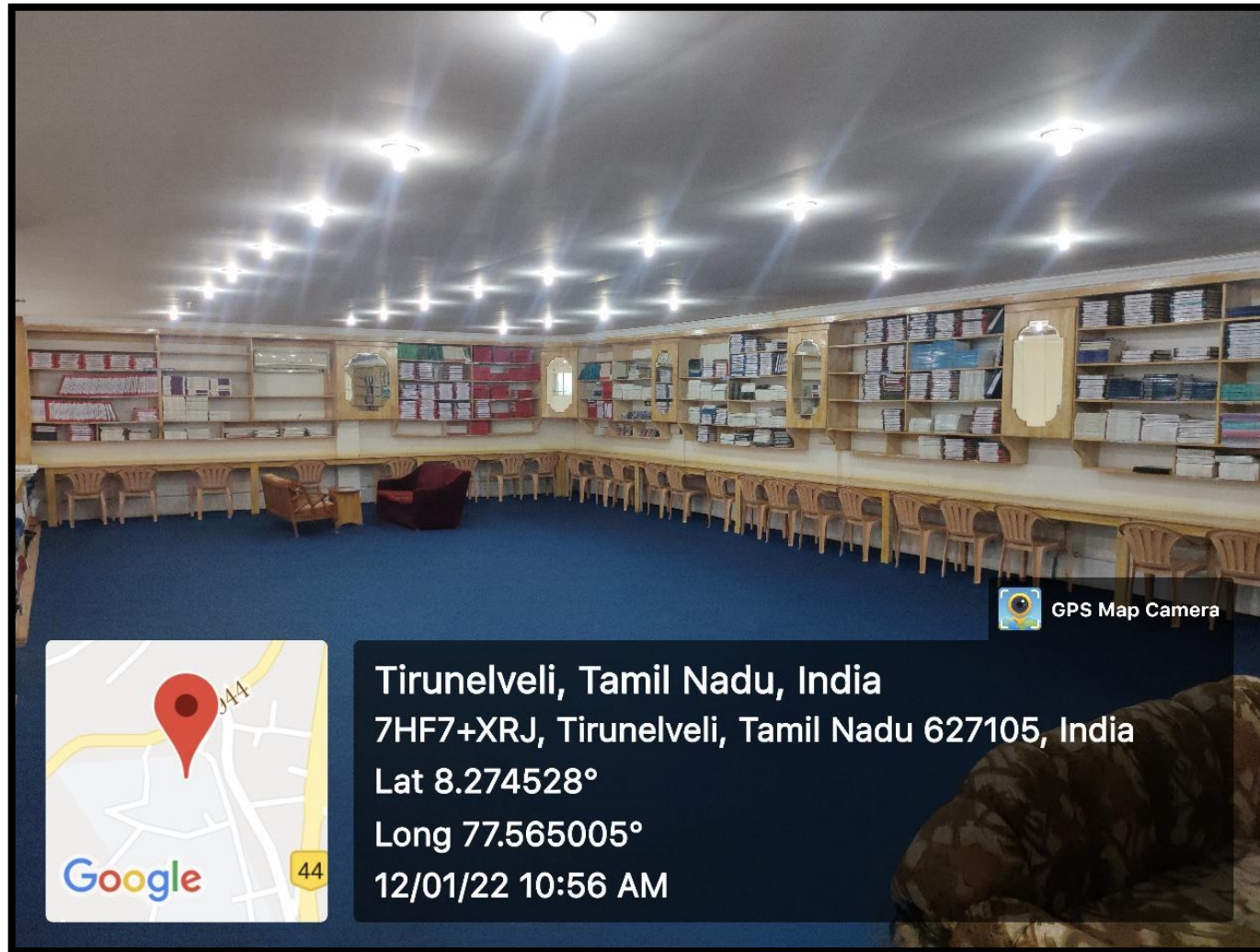




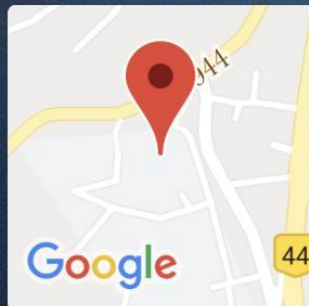
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