BEST PRACTICE 1 –

Using Digital Resources for Learning in Dental Education and Clinical practice

YOGITA DENTAL COLLEGE & HOSPITAL, KHED

Department of Oral Pathology & Microbiology

BEST PRACTICE

1. Title of the Practice:

QR Code Integration for Dental Anatomy and Histology Education for First-Year BDS Students
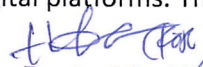
2. Objectives of the Practice:

The primary objective of this practice is to enhance the learning experience for first-year Bachelor of Dental Surgery (BDS) students by integrating QR codes into the teaching of dental anatomy and dental histology. The use of QR codes allows students to quickly access detailed histology diagrams and relevant learning materials through their smartphones or tablets. This practice aims to foster interactive, self-paced learning while improving accessibility to high-quality educational resources. The intended outcome is to strengthen students' understanding of complex histological structures by providing them with visual, easy-to-navigate resources that complement traditional textbook learning. By offering an innovative method of accessing diagrams, students can better grasp the intricacies of dental tissues, aiding in both theoretical and practical knowledge development.

3. The Context:

The challenge in teaching dental histology lies in the complexity of microscopic structures that are difficult to visualize and comprehend through static textbooks and traditional lectures. Histological diagrams are crucial for understanding the structure and function of dental tissues, but students often struggle with memorizing and interpreting them. Furthermore, the use of physical diagrams is limited by space and may not engage students in a way that modern technology can. In this context, the integration of QR codes addresses the issue of accessibility and engagement. By using QR codes, students can access detailed diagrams and explanations anytime and anywhere, facilitating a deeper understanding of histology. Additionally, this approach supports the move toward digital education and provides a bridge between traditional methods and modern, technology-driven learning environments.

4. The Practice:

The practice involves embedding QR codes on lecture slides, printed materials, and anatomical charts used during the first-year BDS dental anatomy and histology courses. When scanned, the QR codes direct students to a digital library containing high-quality histological diagrams, short video explanations, and supplementary reading materials. This method allows students to interact with the content in an engaging manner, offering visual context for better comprehension. The practice is unique because it combines traditional anatomical education with cutting-edge technology, offering a hybrid learning model that suits diverse learning styles. However, there were some constraints, such as the need for students to have smartphones with QR code scanning capabilities, and the challenge of ensuring that all materials were accessible on various digital platforms. There were also concerns about internet connectivity and the digital divide among students.

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5. Evidence of Success:

The success of the QR code integration is evidenced by positive feedback from both students and faculty. After the implementation, students reported improved understanding of histological structures, with many noting that they were able to learn at their own pace and revisit difficult topics as needed. Performance in histology-related assessments showed an increase in accuracy and retention of information, with students demonstrating a clearer understanding of dental tissue morphology. Benchmarks such as engagement with digital resources and the usage frequency of QR codes were also tracked, showing a high level of participation. The results indicate that students are benefiting from this interactive learning model, which enhances their academic performance and supports active, self-directed learning.

6. Problems Encountered and Resources Required:

One of the main problems encountered was the initial resistance from some students who were not accustomed to using smartphones for academic purposes. In some cases, technical difficulties arose due to compatibility issues between the QR code scanning apps and various phone models. There was also a concern about students' unequal access to smartphones or the internet, particularly in rural areas, which could limit the practice's effectiveness. Resources required for the implementation of the practice included the creation of a digital library, which required both time and expertise in creating high-quality educational content. Faculty and technical support were also needed to guide students on how to use QR codes effectively and to address any technical issues promptly.

7. Notes:

For other institutions looking to adopt this practice, it is essential to ensure that students have access to the necessary technology, such as smartphones and reliable internet connections. A pilot phase to test the QR codes with a small group of students could help identify any logistical issues before full implementation. It is also important to provide clear instructions and support for students who may be unfamiliar with QR code usage or digital learning tools. Collaboration with technical teams and educators will ensure the creation of high-quality digital content that complements the curriculum. Finally, integrating student feedback into the ongoing development of this practice is crucial for continuous improvement and engagement.

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<u>BEST PRACTICE</u>

Students making diagrams in their Record books using QR code during practical session at DADH Lab
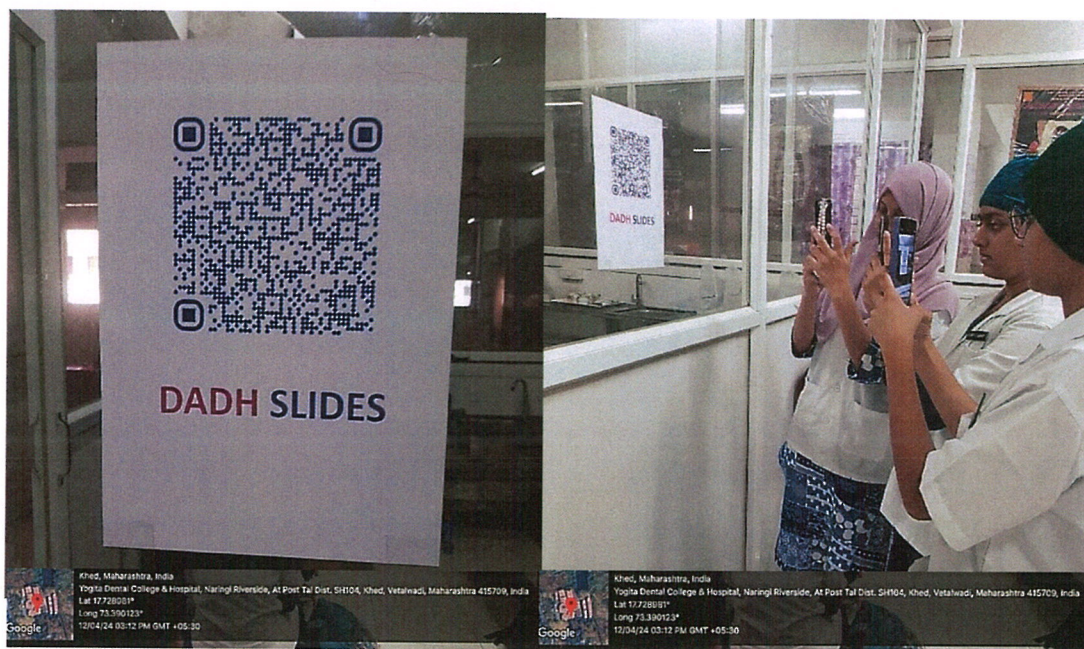
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BEST PRACTICE

Students using QR code during practical session at DADH Lab

DEPARTMENT OF ORTHODONTICS AND DENTOACIAL ORTHOPAEDICS
Best Practice

1. Title of the Practice- Leveraging digital resources for enhanced learning.

2. Objectives of the Practice

- Facilitate accessible learning: To provide students with sealess access to the high-quality digital resources that supplement classroom teaching.
- Enhance learning outcomes: To improve students understanding through multimedia resources like videos etc.

3. The Context

- In the digital age, integrating technology into education has become essential to enhance the teaching-learning process. With the vast availability of online resources, educators can complement traditional classroom methods with multimedia content to cater to diverse learning styles. However, the ethical use of digital resources is a key concern.
- This practice addresses the need for centralized, accessible, and ethically curated digital resources to support students' academic growth. It ensures compliance with copyright laws, encourages faculty to create original content, and provides a structured approach to using online educational materials. By leveraging platforms such as YouTube, NPTEL, and other open educational resources, the department seeks to create a robust repository that aligns with institutional goals and accreditation standards.

4. The Practice

- Centralized Repository of Digital Resources:
  A dedicated repository (e.g., Google Drive) is created to provide students with easy access to curated educational content such as videos, presentations, and reading materials.
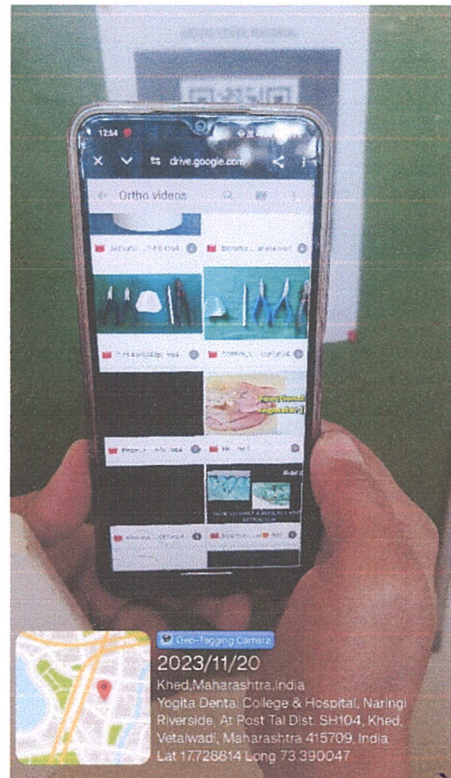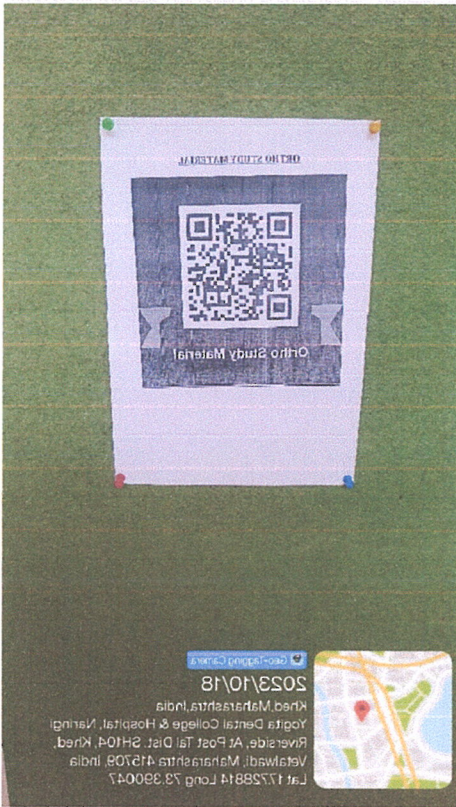
5. Evidence of Success

- Resource Repository Development: A structured repository of curated digital materials, including faculty-created content & publicly available resources, was successfully established.
- Increased utilization of digital platforms: It showed a substantial increase in the usage of shared resources, such as Youtube or departmental drives, indicating their value and relevance to students.

6. Problems Encountered and Resources Required

- Copyright and Licensing Issues
- Limited Technical Skills Among Faculty
- Student Accessibility Issues
- Time Constraints
- Resource Quality Assurance
- Data Privacy and Security

Resources Required:

1. High-speed internet connectivity and robust IT infrastructure.
2. Training programs for faculty and staff on digital content creation and copyright laws.

ORTHO STUDY MATERIAL

Ortho Study Material

2023/10/18
Khed,Maharashtra,India
Yogita Dental College & Hospital, Naringi
Riverside, At Post Tal Dist. SH104, Khed,
Vetalwadi, Maharashtra 415709, India
Lat 17.728814 Long 73.390047

2023/11/20
Khed,Maharashtra,India
Yogita Dental College & Hospital, Naringi
Riverside, At Post Tal Dist. SH104, Khed,
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DEPARTMENT OF PUBLIC HEALTH DENTISTRY

Title of the Practice:

"Mind-Map Connect: Enhancing Public Health Dentistry Education with QR Code Integration"

Objectives of the Practice:

- The primary objective of using mind maps in public health dentistry is to enhance student engagement, improve understanding of complex topics, and promote active learning. By integrating mind maps accessible through QR codes, this approach seeks to bridge the gap between theoretical knowledge and practical application.
- To help in visualizing key concepts and their interrelationships, which is particularly useful in public health dentistry where understanding systems, policies, and preventive protocols is crucial.
- To practice and to foster a learner-centered approach, encouraging students to explore, reflect, and connect ideas through dynamic, interactive resources, thereby facilitating deeper learning in digital age.

The Context:

Public health dentistry is a field that involves intricate knowledge of epidemiology, prevention strategies, dental care policies, and community health. Teaching these concepts to students requires engaging methods that not only deliver factual information but also encourage critical thinking and integration of interdisciplinary content.

Traditional methods, such as lectures and textbooks, often fail to address the complex nature of the subject. The challenge in designing this practice was to create a resource that could simplify complicated concepts, promote cognitive thinking, while ensuring accessibility and interactivity.

The integration of QR codes allows students to access the mindmaps via smartphones or other digital devices, enabling learning *anytime and anywhere*. This addresses the need for flexibility in modern education while improving retention and comprehension of public health dentistry.

The Practice:

The practice involves creating interactive mind maps that represent key concepts and systems in public health dentistry. These mind maps are designed by the students through POGIL – Process Oriented Guided Inquiry Learning Technique – a student-centered instructional approach where in the students' worked in small teams with the instructor acting as a facilitator rather than a source of information. They guide students through an exploration to construct understanding.

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QR codes that students can scan with their smartphones, granting them direct access to detailed, visually structured information. This method allows students to navigate through various topics by exploring connections between different elements of public health dentistry, such as dental policies, preventive measures, and epidemiological trends. The practice's uniqueness lies in its integration of digital tools with educational content, promoting self-directed learning and accessibility outside the classroom. The main constraint encountered was ensuring the mindmaps were sufficiently comprehensive without overwhelming students with excessive detail. The combination of POGIL with visual representation in form of mind maps allows faster revision at a glance while QR code allows the flexibility and easy accessibility.

Evidence of Success:

Initial feedback and assessment of the practice show positive outcomes in student engagement and knowledge retention. Students reported that the mind maps facilitated a clearer understanding of how different public health dentistry concepts are interconnected. The use of QR codes allowed for immediate, on-the-go access to learning materials, which was particularly appreciated by students. Performance in assessments (Viva-voce) related to public health topics improved, with a noticeable increase in scores related to systems thinking and integration of dental health principles.
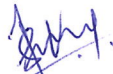
The evidence suggests that interactive and flexible learning resources such as these mind maps enhanced both the quality and the depth of student learning, supporting a more dynamic approach to improved retention of knowledge, better comprehension of interdependent dental health issues, and an increase in student participation.

Problems Encountered and Resources Required:

- Several challenges were encountered in the implementation of this practice. Technical difficulties in generating and maintaining the QR codes for easy access were initially a concern, as was ensuring compatibility with different devices and software.
- Additionally, the design of the mind maps required a balance between detail and simplicity, as too much information could overwhelm students, while too little could compromise the learning objectives.
- Resources required included access to devices for all students, and time for faculty to design and integrate the QR codes into the curriculum.

7.Notes (Optional):

The integration of QR code-based resources can be expanded to other areas of healthcare education, offering a scalable model for interactive, accessible learning. Finally, the practice can be adapted to suit various teaching environments, including blended or online learning settings, further enhancing its flexibility.

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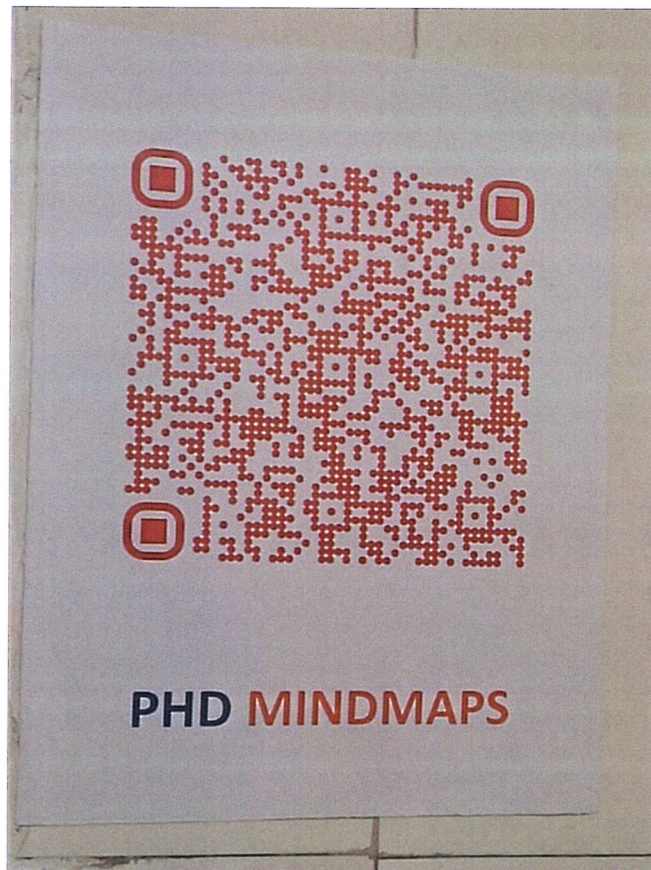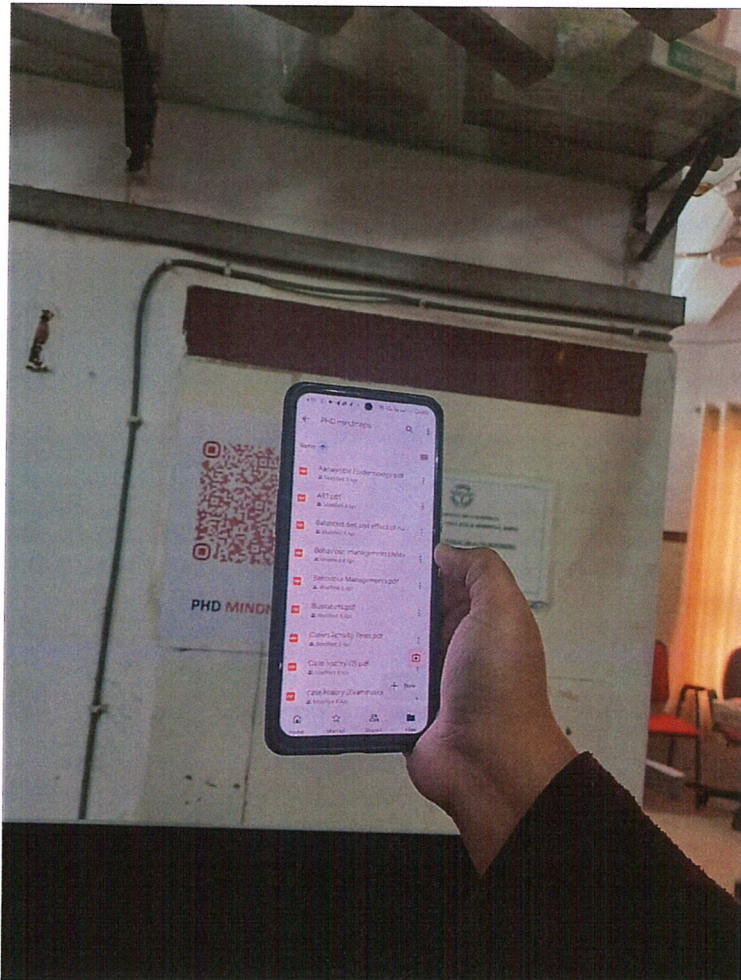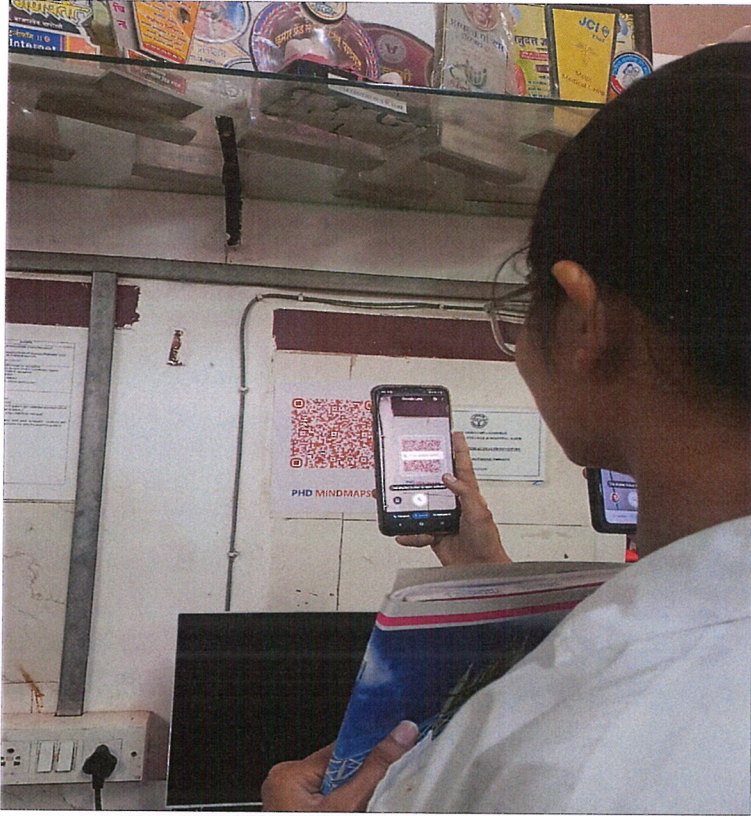
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BEST PRACTICE 2 –

Annual Dental Coverage Scheme

Ref. No. : YDCH / 2107 /2496(A) 20 2 3   Date : 09/10/2023

Annual Dental Coverage scheme: A comprehensive screening programme

(Institutional Policy)   VERSION: I

I) OBJECTIVE

- To conduct a comprehensive oral health screening for first-year entrants in order to identify and diagnose potential oral health issues at an early stage.

- To promote oral health awareness, encourage good oral hygiene practices, and facilitate timely intervention and treatment, thereby contributing to the overall health and well-being of the participants.

- To seeks to establish a baseline data for future reference and for monitoring the progress of oral health status among the participants.

II) CONTEXT

In many educational institutions, especially those related to health sciences, it is common practice to conduct health assessments for new entrants. These assessments often include a comprehensive oral health screening. The purpose of this is to ensure that students of the institute are in good health and to identify any potential health issues at an early stage.

The **"Annual Dental Coverage scheme: A Comprehensive Screening Programme"** is one such initiative. It is designed to assess the oral health status of first-year students of institute with the aim of promoting good oral hygiene practices and facilitating early intervention and treatment of any identified oral health issues.

This programme is particularly relevant in the context of increasing awareness about the importance of oral health and its impact on overall health and well-being. It also aligns with global efforts to improve oral health outcomes and reduce oral health disparities among different population groups admitted in the institute. By implementing this programme,

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educational institutions can contribute to these broader goals and ensure the well-being of their students.

III) PRACTICE

In the context of higher education, the practice of Oral Health Assessment for First Year Entrants in the institute can be seen as a comprehensive screening practice program. This practice is unique and important for several reasons:

1. Early Detection and Intervention: The program aims to identify oral health concerns at an early stage and prompt students to seek treatment where required. This early detection can prevent the progression of oral diseases and conditions, thereby promoting overall health and well-being.

2. Comprehensive Assessment: The assessments are comprehensive, meaning they cover a wide range of oral health aspects. It will be carried out in every academic year of newly joined students in the institute.

3. Integration with Existing Health Care Facilities: All the enrolled students will get all oral health care facilities which provide affordable, accessible, and equitable oral health care in our institute.

4. Education and Awareness: These programs also play a crucial role in educating students about the importance of oral health and hygiene. They help in raising awareness about common oral diseases and their prevention.

5. Research and Data Collection: These programs can also serve as a valuable source of data for research on oral health trends, effectiveness of interventions, and other related aspects.

IV) EVIDENCE OF SUCCESS

All the enrolled student's case history data and investigation and treatment records will be maintained and feedback will be also taken from the students.

V) PROBLEMS ENCOUNTERED

Implementing a comprehensive Oral Health Assessment programme for First Year Entrants in the institute in higher education can encounter several challenges.

Here are some potential problems are enlisted:

1. Awareness: Lack of awareness among the students

2. Prevalence of Oral Diseases: Dental caries, periodontal diseases, malocclusion, premalignant lesions and condition are common diseases affecting the students.

3. Geographical Disparities: Accessibility to dental care can be a challenge in rural areas.
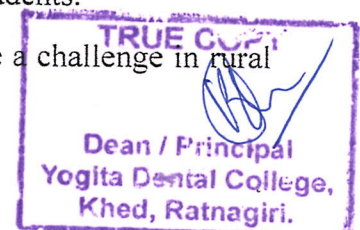
VI) RESOURCES

Following resources are required_

1. Qualified Personnel: A team of qualified dentists and other healthcare professionals are available to conduct the programme. A team comprising of 3 staff, 4 Postgraduates students, 5 Interns.

2. Infrastructure: Adequate infrastructure including dental units and equipment are also available.

3. Educational Materials: Resources for educating students about oral health and hygiene are also available.

4. Funding: Sufficient funding which is required will be going to provide by institutional management.

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YOGITA DENTAL COLLEGE & HOSPITAL
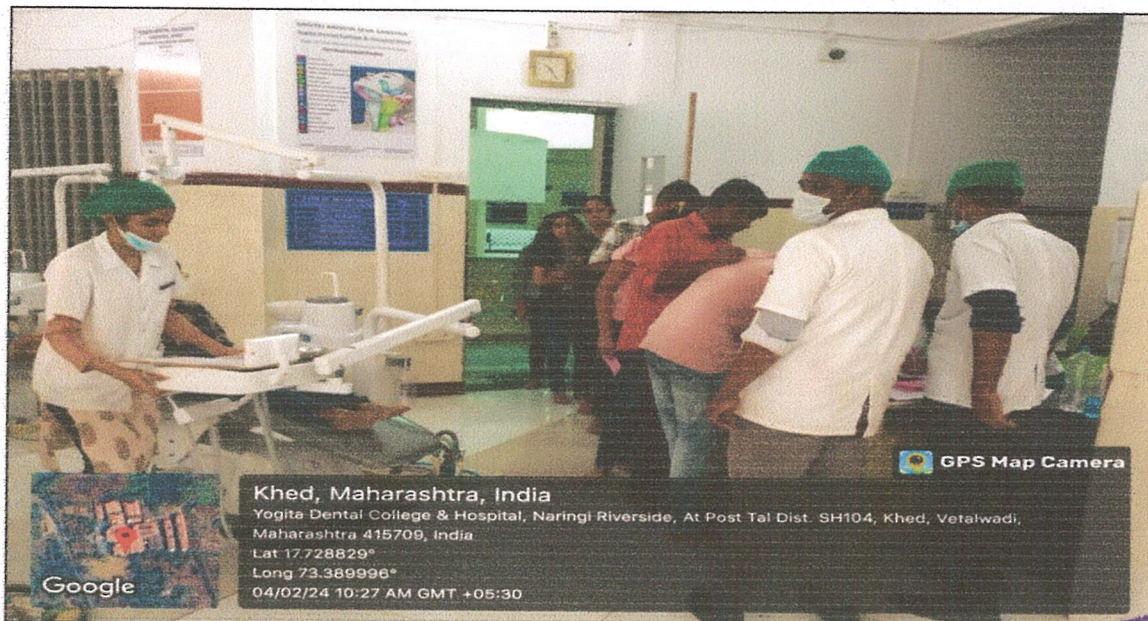**KHED, DISTRICT-RATNAGIRI**
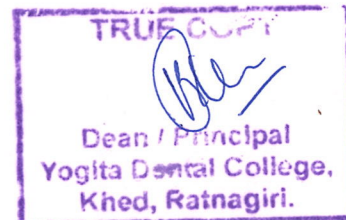
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BEST PRACTICE

Annual Dental Coverage scheme: A comprehensive screening programme

PHOTOGRAPHIC REPORT

Khed, Maharashtra, India
Yogita Dental College & Hospital, Naringi Riverside, At Post Tal Dist. SH104, Khed, Vetalwadi, Maharashtra 415709, India
Lat 17.728871°
Long 73.389868°
04/02/24 10:29 AM GMT +05:30

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Yogita Dental College & Hospital, Naringi Riverside, At Post Tal Dist. SH104, Khed, Vetalwadi, Maharashtra 415709, India
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BEST PRACTICE 3 –

Waste Wizards

Best Practice Plan: Recycling Discarded Waxes in Prosthodontics

1. Title of the Practice

Recycling Discarded Waxes for Sustainable Prosthodontic Processes

2. Objective of the Practice

The primary objective of this practice is to recycle and repurpose discarded waxes in the Department of Prosthodontics, ultimately promoting sustainability and reducing waste. By melting and reforming discarded waxes into usable sheets or preformed occlusal rims, we aim to minimize resource consumption and contribute to environmentally responsible practices.

3. The Context

In the field of prosthodontics, significant amounts of wax are used in various procedures, resulting in a considerable volume of discarded wax. Instead of allowing this wax to contribute to waste, the Department of Prosthodontics is implementing a sustainable practice to recycle and reuse these materials.
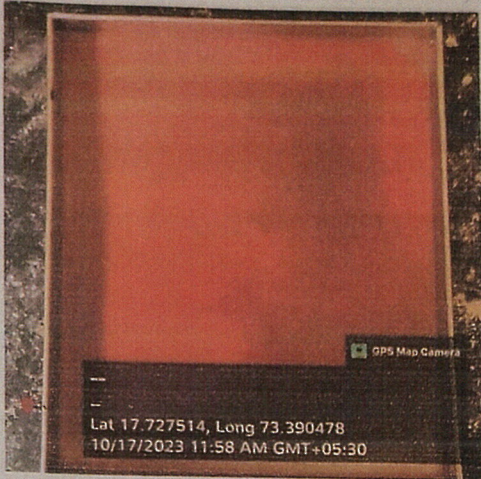
4. The Practice

4.1 Collection and Segregation:

Discarded waxes from prosthodontic procedures are collected and segregated based on their type and quality.
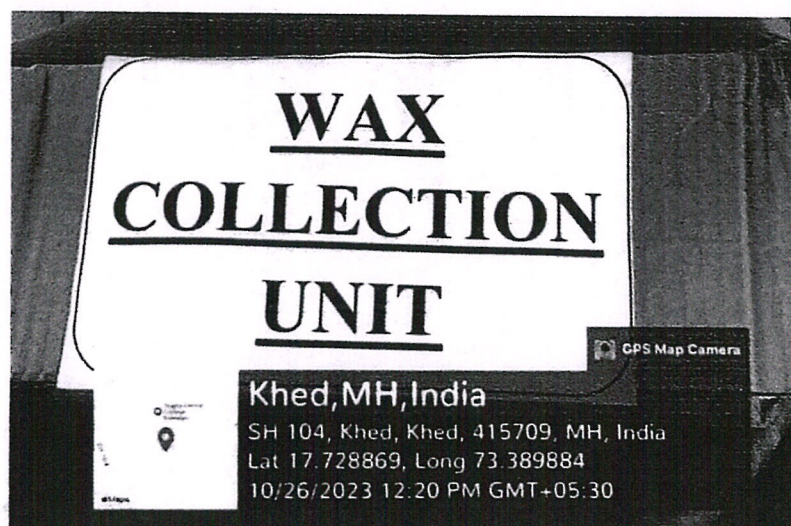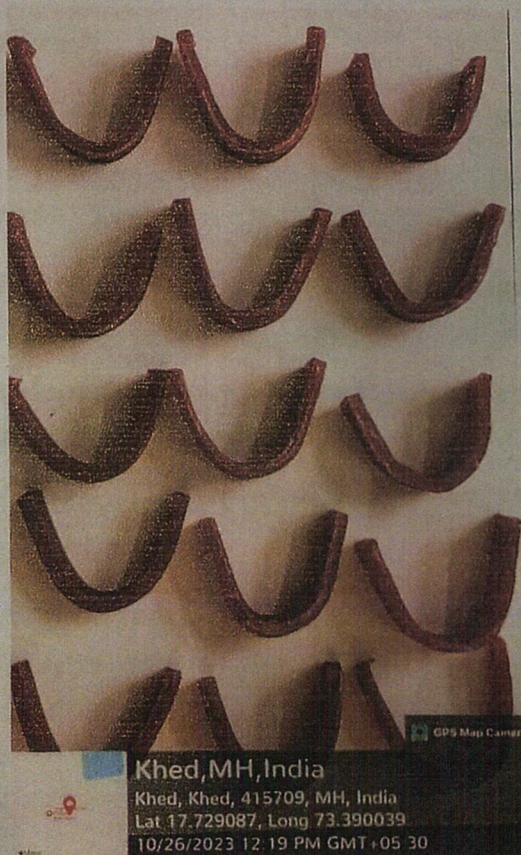
4.2 Melting and Purification:

The segregated waxes are melted and purified to remove any impurities, ensuring a clean and consistent material.

4.3 Reforming into Sheets or Preformed Occlusal Rims:

The purified wax is then shaped into sheets or preformed occlusal rims, making it suitable for reuse in various prosthodontic procedures.

4.4 Inventory Management:

An inventory system is established to track the recycled wax materials and their availability for use in future prosthodontic treatments.

5. Evidence of Success

5.1 Environmental Impact:

Reduced waste and lower demand for virgin wax, resulting in a positive environmental impact by conserving resources and reducing the department's ecological footprint.

5.2 Cost Savings:

Savings in material costs by reusing recycled wax, contributing to cost-efficiency within the department.

5.3 Enhanced Sustainability:

Promoting a culture of sustainability within the department and demonstrating a commitment to responsible resource management.

6. Problems Encountered and Resources Required

6.1 Problems Encountered:

- Challenges in achieving consistent quality and purity during the melting and purification process.

6.2 Resources Required:

- Dedicated recycling and processing equipment (e.g., wax melting apparatus, purification tools).

- Training programs for department staff to ensure proper understanding and implementation of the recycling process.

- Educational materials and awareness campaigns to highlight the benefits of recycling and encourage participation.

This best practice plan will be regularly reviewed and updated to optimize efficiency, address challenges, and further enhance sustainability in the Department of Prosthodontics.

DEPARTMENT OF PROSTHODONITCS, CROWN AND BRIDGE

INVENTORY MANAGEMENT RECORD

MONTH	WAX COLLECTED	WAX RIMS FABRICATED	WAX RIMS USED	OPENING BALANCE RIMS	CLOSING BALANCE RIMS
Oct. 2023	500ml	27	17	0	10
Nov. 2023	600ml	32	25	10	17
Dec. 2023	500ml	27	20	17	24
Jan. 2024	550ml	29	28	24	25
Feb. 2024	450ml	25	29	25	21
March 2024	450ml	25	18	21	28
April 2024	500ml	27	22	28	33
June 2024	600 ml	32	32	33	33
July 2024	550 ml	29	28	33	34
August 2024	600 ml	32	35	34	31
September 2024	500ml	27	28	31	30
October 2024	500 ml	27	27	30	30
Nov. 2024	500 ml	27	25	30	32

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Paediatric & Preventive Dentistry

Best Practice

Title of Practice:

Repurpose and Re-use

Objective:

To enhance the learning experience of students, by using reconditioned plaster models for preclinical training in Pediatric Dentistry, thereby improving their understanding of dental anatomy, techniques of cavity preparation and patient care.

Context:

Dental education requires extensive hands-on practice to master clinical skills. The traditional method involves digital / phantom simulation, which can be costly and less environment friendly. Reusing plaster models offers a sustainable and cost-effective alternative, while providing a tangible learning tool for students.

Practice:

1. Preparation and storage: Preclinical exercise models submitted by undergraduate students were collected after assigning the grades and were stored in the department.

2. Education integration:

3. Application in training: Undergraduate Students and interns were given demonstration of cavity preparation & crown preparation by reusing plaster models

4. Students were allotted these reused models for hands-on

5. Interns were given demonstration on Rubber dam Application and hands-on was conducted for the same

5. Monitoring and ensuring quality and relevance of reused models was done by the staff members of the department.

Evidence of success:

1. Student's performance - enhanced learning experience evaluated through feedback.

Positive faculty evaluation - Staff teachers reported that reusage of plaster models has been beneficial in providing diverse training scenarios without additional cost.

2. Cost saving: Reduces the financial burden on students.

3. Environmental impact reduced

This practice not only supports sustainable resource use, but also enriches the education experience for students, thereby contributing positively to the overall quality of the dental program at YDCH, Khed.

Problems encountered:

1. Model degradation

2. Storage space

3. Student adaptation – Initially, a few students find it difficult to work on reused models.
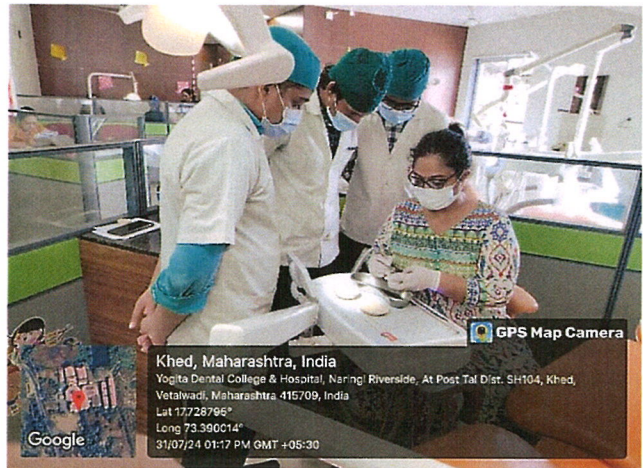
Resources required:

1.Storage facilities

2. New methods for model disposal

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Geotag Report

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Lat 17.72903°
Long 73.389797°
31/07/24 01:04 PM GMT +05:30

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Vetalwadi, Maharashtra 415709, India
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BEST PRACTICE 4 –

Celebration of international and national days related to Oral & maxillofacial surgery (OMFS) to increase awareness

DEPARTMENT OF ORAL AND MAXILLOFACIAL SURERY

Institutional Best practice

Title of the Practice:
Celebrating National and International Days to Promote Awareness about Oral and Maxillofacial Surgery

Objectives:

1. To raise public and professional awareness about the scope and significance of Oral and Maxillofacial Surgery (OMS) among general practitioners (GPs) and the general population.
2. To encourage referrals from general practitioners to OMFS specialists for better patient care.
3. To educate the public on the detrimental effects of tobacco and tobacco-related products on oral health.
4. To identify and diagnose tobacco-related premalignant lesions and conditions early.
5. To motivate the general population to quit the use of tobacco.

Context:
Awareness of Oral and Maxillofacial Surgery as a specialty was previously limited, both among the general public and general practitioners. As a result, many patients with oral and maxillofacial conditions were referred to other specialties, such as ENT, Orthopedic, or Plastic Surgery. Thus, efforts were required to highlight the scope and importance of OMFS, including its role in diagnosing and treating conditions related to tobacco use and oral cancers.
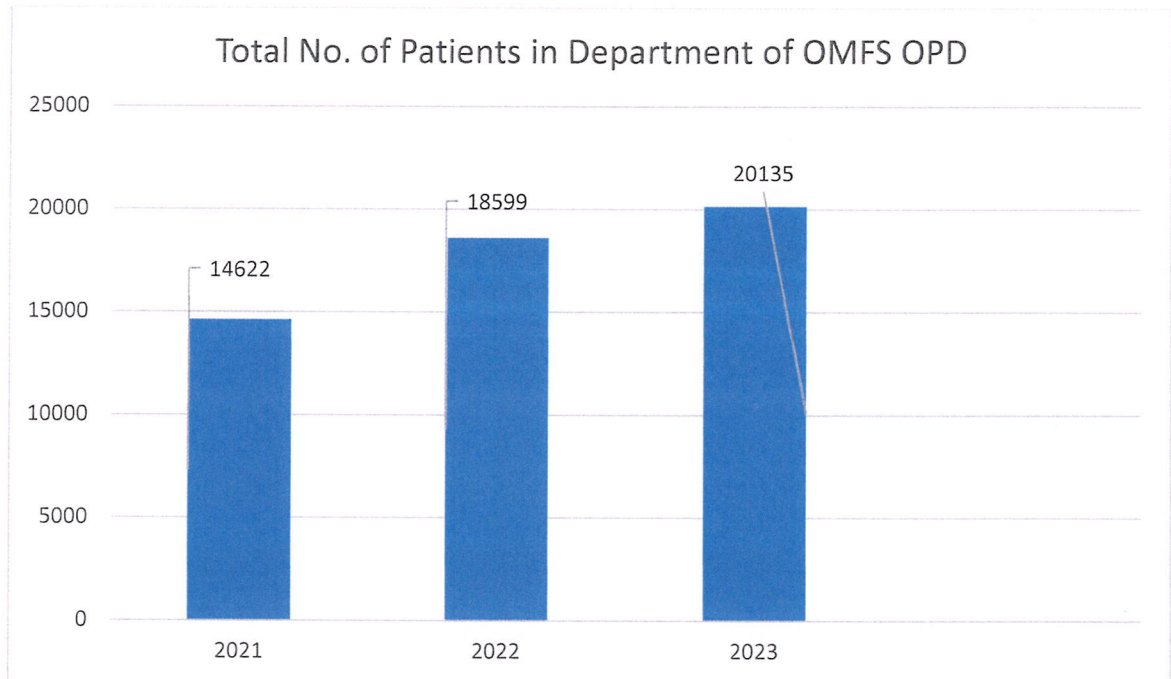
The Practice:
To address these challenges, various national and international days dedicated to oral health and tobacco awareness are celebrated to promote OMFS:

- **13th February**: Celebrated as *International Oral and Maxillofacial Surgeons' Day* in collaboration with associations like the Indian Medical Association (IMA), NIMA, and the Indian Dental Association (IDA). Activities like Continuing Medical Education (CME) and Continuing Dental Education (CDE) sessions are conducted to inform both the public and medical professionals about the scope of OMS.
- **31st May**: *Anti-Tobacco Day* is observed with rallies, street plays, and educational lectures aimed at raising awareness about the harmful effects of tobacco.
- **6th December**: *National Oral Cancer Day* is observed with various campaigns focused on the prevention and early detection of oral cancers, particularly those caused by tobacco use.

Evidence of Success:

- Over the past five years, there has been a noticeable increase in patients seeking oral and maxillofacial surgical care, indicating a growing recognition of the specialty.
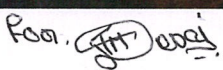
Total No. of Patients in Department of OMFS OPD

Bar chart showing: 2021 = 14622, 2022 = 18599, 2023 = 20135

Problems Encountered and Resources Required:

1. **High-End Equipment**: Certain conditions, such as oral cancers, require advanced diagnostic and treatment technologies that are currently limited.
2. **Skilled Anesthetists**: The unavailability of qualified anesthetists restricts the ability to treat complex cases in OMS.
3. **General Practitioner Time Constraints**: General practitioners often face time constraints, which limits their ability to participate in CMEs and CDEs.
4. **Easy Availability of Tobacco**: The widespread availability of tobacco products makes it challenging to reduce consumption within the general population.

To address these challenges, the college is working on establishing affiliations with government health schemes, which will provide additional resources and support for the successful implementation of these awareness initiatives.

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BEST PRACTICE 5 –

Color Coded Syringes

YOGITA DENTAL COLLEGE AND HOSPITAL KHED

DEPARTMENT OF CONSERVATIVE DENTISTRY AND ENDODONTICS

COLOUR CODED SYRINGES FOR DIFFERENT SOLUTIONS

1. Title of the Practice- Different colour coded Syringes used in DEPARTMENT OF CONSERVATIVE DENTISTRY AND ENDODONTICS.

2. Objectives of the Practice

The main objective of this practices is to avoid the confusion regarding differentiation of various solutions used in the department such as sodium hypochloride as a irrigating solution, injectible local anaesthetic such as lignocain hydrochloride, normal saline and chlorhexidine.

Other than that attention has been given to avoiding accidental injection of sodium hypochloride instead of local anaesthetics because of the same physical appearance of both the solutions.

Another objective is to avoid sodium hypochloride accidents in the clinical practice.

3. The Context

-Deciding the color codes for different syringes used for solutions were one challenge has to be addressed

- Students newly exposed to clinical practice and non-teaching staff took so much of time to understand the color code system for syringes-There are so many solutions and medicated pastes comes in syringe form which has been already used in department sometimes a person can get confuse amongst these syringes
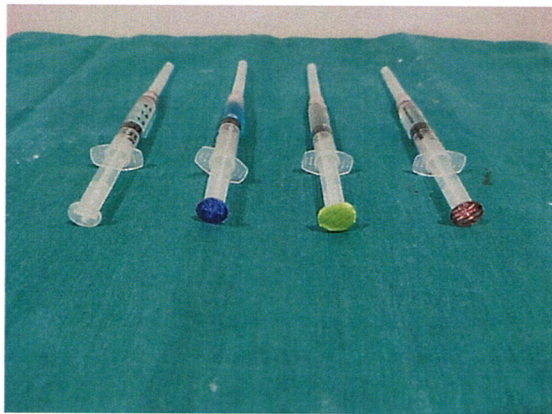
COLOUR CODING SYSTEM

🔴 Sodium Hypochloride

🟢 Local Anaesthetic

⚪ Normal Saline

🔵 Chlorhexidine

4. The Practice-

-We are able to differentiate between different solutions that are used in department

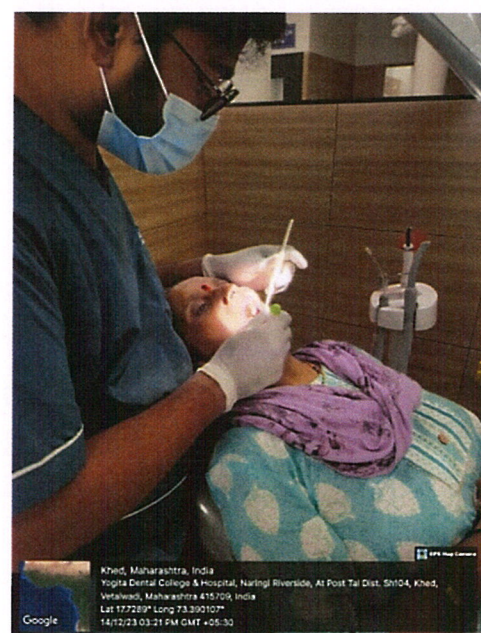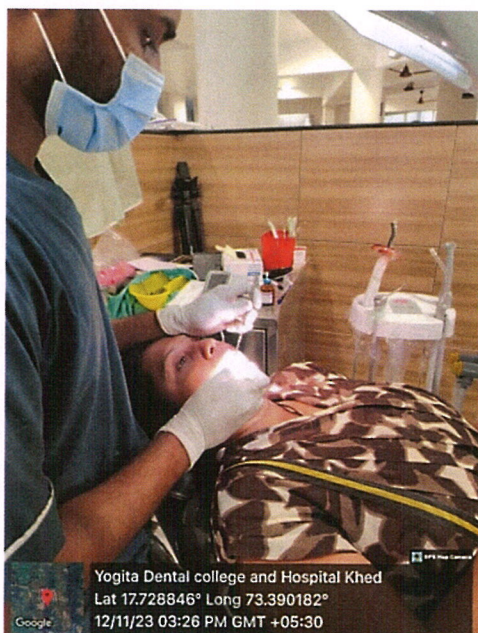while doing patients as it has various color codes such as-

Red-sodium hypochloride

Green-local anaesthetic

White normal saline

Blue- chlorhexidine

-It made the practice more convenient and reliable in all aspect

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Yogita Dental College & Hospital, Naringi Riverside, At Post Tal Dist, SH104, Khed,
Vetalwadi, Maharashtra 415709, India
Lat 17.7289° Long 73.390107°
14/12/23 03:21 PM GMT +05:30

5. Evidence of Success

-After using this color coded syringes we observed that no incidence of hypochlorite incident has happened as such

 -complications that happens because of confusion of solutions while working has been rarely seen due to color coding system.

- Everyone in department including non teaching staff and students who are newly exposed to practice positively implementing the color coded syringes

6. Problems Encountered and Resources Required

- Deciding the colour codes for the specific solution was bit challenging as it has to be more specific in concern with disposal and disintegration of syringes.

-Educating nonteaching staff and students from the third years who are newly exposed to clinical practice, was difficult.

- While implementing there were some issues faced by us like improper disposal of colour coded syringes to the various color coded disposable containers.

7. Number of Mishaps occurred in department –

Number of mishaps occurred

Year	Number of accidental injection cases
2021-2022	01
2022-2023	00
2023-2024	00

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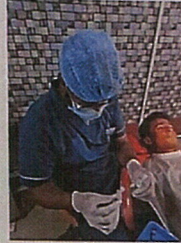Khed, Ratnagiri.

8. Notes (Optional)

-For implementation of color coded syringes in practices we made educating charts, seminars and

DEPARTMENT OF CONSERVATIVE DENTISTRY & ENDODONTICS

WHY???
WHY IS COLOR CODING SO IMPORTANT ??
HERE LET'S SEE WHY IT IS ...

Here in, during the procedure the dentist may get confused due to the same physical appearance of LA , NaOCl and normal saline. Accidental swapping is very easily possible, leading to mishaps

Now in this scenario , all the syringes are properly and accurately color coded . so now, during the ongoing procedure . The chances of accidents now have the least possibility.

INSTRUCTIONS:

1. Starting of with most important step is to know and have knowledge about the colour coded syringes.
2. How to use :
•Before starting of the procedure, make sure to know the colour coding of the respective solutions. [Sodium hypochlorite:- RED]
•While preparing the tray, make sure to pick the color coded stickers and stick them on the PLUNGER of the syringes.

[same as the picture above here.]
•Once you stick the sticker on the plunger. Don't forget to sterilize the plunger with spirit.
•Post sterilizing the plunger now , fill in the syringes accordingly. [colour coding]

3. Why are we doing this :-
•To avoid accidental injection of sodium hypochlorite instead of Local anaesthesia.
•To differentiate between all the liquids that have same physical appearance .

IMPORTANT NOTE :- Educate yourself well enough and know all the colour coding byheart.

Guided by :- Dr. Unmesh Khanvilkar (Head of Department & Prof.)
Dr. Siddhesh Bandekar (Reader) Dr. Shirin Kshirsagar (Reader)

Done by :- Trupti Shende , Anushka Waghmare , Ankit Verma, Amit Yadav, Manasi Sohani , Naif Mulla , Sandhyarani Khot

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