

Date: 23rd May, 2022

Index Institute of Dental Sciences

Report of the Rural Oral Health Screening Camp – Tinoniya

A free dental treatment camp was organized by the Department of Public Health Dentistry of Index Institute of Dental Sciences, Indore, Madhya Pradesh at village Tinoniya on 23rd May, 2022. A team from Department of Public Health Dentistry, Index Institute of Dental Sciences, Indore comprising of Dr. Ranjan Mani Tripathi, Dr. Poonam Tomar Rana, Interns/Students- Priya Jain, Priyanka Pal, Sangeet Jain, Poonam Malviya, Sapna Singh, Shikha Bhati, Raghvee Bhawsar, Sanskruti Acharya, Rabjot Kaur Chawla and MRD- Mr. Rajendra Thakur actively participated in the camp. College bus was used for transporting team to the dental camp location. The driver Mr. Anandi ensured team arrived safely and kept an eye out for photogenic rest stops. The team left dental college premises at 09:05 am and reached the above mentioned venue at 09:40 am.

At camp site patients were coordinated by local volunteers and support staff (MRD and Interns) to attend the registration/ screening area, which was managed by two intern dentists who recorded the relevant patient information and noted dental treatment they might need. Tables, chairs, appropriate armamentarium and other necessary arrangements were set by the MRD Mr. Rajendra Thakur for the smooth functioning of the dental treatment camp. Screening and treatment of the patients at the camp site started at 09:50 am.

If the patient agreed to the proposed dental treatment they moved to the dental treatment van for necessary dental care. Verbal consent was obtained from adults for their dental care. If a child under the age of 18 years required a tooth extraction then consent was obtained from their parent or guardian. Dental treatment van was well equipped with a dental chair and necessary armamentarium required for the primary dental health care treatment like extraction of mobile teeth, scaling, restotation of the decayed teeth.

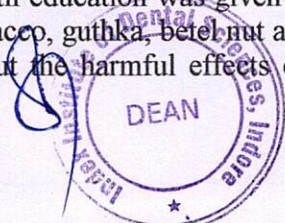
MRD Mr. Rajendra Thakur managed the flow of dental instruments and supplies. MRD Mr. Rajendra Thakur also worked diligently on cleaning and sterilising the used dental instruments and helped to ensure the dental teams had everything they required.

A total of 93 patients were screened and 56 patients were treated for various findings in the camp. Among the screened patients at the camp site, majorly were the patients with the habit of chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. On oral examination patients with poor oral hygiene, improper brushing habits, presence of dental plaque and dental calculus, bad breath, bleeding gums, teeth with mobility, tooth decay and improper cleaning of the tongue were observed.

A total of 56 patients out of 146 screened patients required dental treatment. Out of 53 treated patients, 13 patients were treated for removal of dental plaque and dental calculus for which oral prophylaxis treatment was done. Total 36 patients required extraction of their teeth. Where a sum of 11 patients underwent extraction due to loosening of their teeth, 16 patients underwent extraction due to grossly decayed teeth which can't be restored and 9 patient underwent extraction due to retained root stumps in the oral cavity. Total 7 patients required restoration of their decayed teeth. All the treatments were provided free of cost by Index Institute of Dental Sciences, Indore (M.P.).

Oral health education was given to the patients regarding inhibition of deleterious habits like chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. Patients were made aware about the harmful effects caused by this deleterious habits like attrition of teeth,

Dr Ranjan
mani Tripathi



Registrar
Malwanchal University
Indore (M.P.)

recession of gingiva, abrasion and abfraction along with erosion of teeth, halitosis, accumulation of plaque and calculus on the teeth surfaces, caries, reduced mouth opening and carcinoma of the oral cavity. Demonstration of proper brushing technique with the help of brush and brushing model and to maintain good oral hygiene practices was given to the patients.

Oral health talk was delivered by interns to the villagers stating “ A healthy mouth can be a great asset.” Our teeth have such an important role to play in our lives. They help us chew and digest food, they help us talk and speak clearly and they also give our face its shape. A smile also has other day-to-day benefits. It can give us greater confidence, as well as influence our social lives, careers and relationships. Because of this, it only makes sense to give our oral health the best care possible.

Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste twice daily and also to clean tongue with the help of the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively.


Whichever way we look at it, the poor and rural people are the ones who are not receiving dental care, which is generally delivered on a fee for service basis by private dental clinics. Many people suffer episodes of extreme dental pain and infection in their lives. They try to deal with this by using home remedies, and/or repeated doses of antibiotics and analgesics if available. However these do not solve the problem as the affected tooth or teeth must receive professional treatment. The reliance on dental "quacks", i.e. untrained people providing "dental care" is a serious problem, as the result of "treatment" by these people could actually worsen any dental problems due to a lack of dental knowledge.

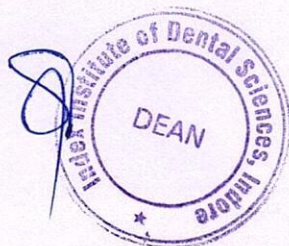
Those people not receiving treatment generally had good oral health, but most required and received oral hygiene advice which was not recorded in these camps but will be noted in future camps. There were some cases where the treatment required was beyond the capacity of the dental camp, for example, people requesting root canal treatments, people requiring gingival flap surgery, orthodontic cases, complete denture fabrication, partial denture fabrication, fixed partial denture fabrication, extraction of impacted 3rd molars, pulpectomy/pulpotomy for children, and pathology referrals were referred to the Index Institute of Dental Sciences, Indore for the needful treatment. There were also treatment refusals - crying children, and some adults who refused extraction of teeth which were beyond saving.


Out of 146 screened patients 37 patients were referred for the treatment which was not possible at the camp site to Index Institute of Dental Sciences, Indore. After a somewhat shaky start, the dental camp progressed to becoming well run event. Techniques such as cleaning and sterilising instruments were brought up to safe and acceptable standards. Team returned to the college premises at 2:15 pm.

Number of patients screened and treatment provided

Total screened	patients	Total treated	patients	Total restorations	Total extractions	Total scalings	Referred patients
146		56		9	36	13	37


Camp Coordinator




Registrar
Malwanchal University
Indore (M.P.)

Date: 27th May, 2022

Index Institute of Dental Sciences

Report of the Rural Oral Health Screening Camp - Piwday

A free dental treatment camp was organized by the Department of Public Health Dentistry of Index Institute of Dental Sciences, Indore, Madhya Pradesh at village Piwday on 27th May, 2022. A team from Department of Public Health Dentistry, Index Institute of Dental Sciences, Indore comprising of Dr. Ranjan Mani Tripathi, Dr. Poonam Tomar Rana, Interns/Students- Poonam Malviya, Prakhar Nikam, Praniti Nagar, Shivani Khatediya, Satyendra Shukla, Nikita Maheshwari, Shivani Adhikary, Shivani Muchhala, Nitin Manglani and MRD- Mr. Rajendra Thakur actively participated in the camp. College bus was used for transporting team to the dental camp location. The driver Mr. Anandi ensured team arrived safely and kept an eye out for photogenic rest stops. The team left dental college premises at 09:00 am and reached the above mentioned venue at 09:40 am.

At camp site patients were coordinated by local volunteers and support staff (MRD and Interns) to attend the registration/ screening area, which was managed by two intern dentists who recorded the relevant patient information and noted dental treatment they might need. Tables, chairs, appropriate armamentarium and other necessary arrangements were set by the MRD Mr. Rajendra Thakur for the smooth functioning of the dental treatment camp. Screening and treatment of the patients at the camp site started at 09:55 am.

A total of 183 patients were screened in the camp. On oral examination poor oral hygiene, improper brushing habits, bad breath, bleeding gums, inflamed gums, teeth with mobility, presence of dental plaque and dental calculus, dental caries, generalised attrition, gingival recession, furcation involvement, malaligned teeth, missing teeth, grossly decayed teeth, teeth with pit and fissure caries, children with rampant caries in their milk teeth and improper cleaning of the tongue were observed.

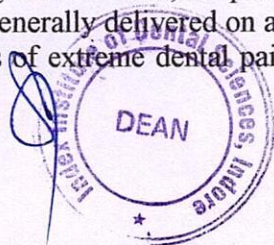
Oral health education was given to the patients regarding inhibition of deleterious habits like chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. Patients were made aware about the harmful effects caused by this deleterious habits like attrition of teeth, recession of gingiva, abrasion and abfraction along with erosion of teeth, halitosis, accumulation of plaque and calculus on the teeth surfaces, caries, reduced mouth opening and carcinoma of the oral cavity. Demonstration of proper brushing technique with the help of brush and brushing model and to maintain good oral hygiene practices was given to the patients.

Oral health talk delivered by interns to the villagers stating "A healthy mouth can be a great asset." Our teeth have such an important role to play in our lives. They help us chew and digest food, they help us talk and speak clearly and they also give our face its shape. A smile also has other day to day benefits. It can give us greater confidence, as well as influence our social lives, careers and relationships. Because of this, it only makes sense to give our oral health the best care possible.

Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste twice daily and also to clean tongue with the help of the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively.

Whichever way we look at it, the poor and rural people are the ones who are not receiving dental care, which is generally delivered on a fee for service basis by private dental clinics. Many people suffer episodes of extreme dental pain and infection in their lives. They try to deal with

Dr. Ranjan Mani Tripathi



Registrar
Malwanchal University
Indore (M.P.)

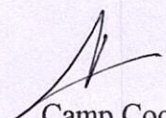
this by using natural (ayurvedic) medicines, and/or repeated doses of antibiotics and analgesics if available. However these do not solve the problem as the affected tooth or teeth must receive professional treatment. The reliance on dental "quacks", ie untrained people providing "dental care" is almost as serious a problem, as the result of "treatment" by these people could actually worsen any dental problems due to a lack of dental knowledge.

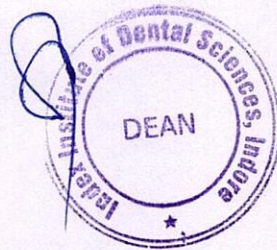
Dental decay is "rampant" in many children, especially in the primary ("milk") teeth. The introduction of the Silver Fluoride technique will help to manage the decay in kids, as it avoids the conventional approach of using a drill to prepare a tooth for a filling. This "atraumatic" approach has been used for decades in high risk communities with great success, and keeps the kids happy during dental treatment.


Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste two times daily and also to clean tongue by the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively. Patients who required extensive treatment like extraction of teeth, root canal treatment, gingival flap surgery, complete denture fabrication, partial denture fabrication, fixed partial denture fabrication, dental implant treatment and pulpectomy were referred to the Index Institute of Dental Sciences, Indore for the needful treatment. Out of 183 screened patients 135 patients were referred for the above mentioned extensive treatment at Index Institute of Dental Sciences, Indore. Team returned to the college premises at 1:45 pm.

Number of patients screened and required various treatment

Total patients screened	Total patient requiring treatment	Requiring filling	Requiring extraction	Requiring scaling	Requiring any other treatment
183	79	34	41	47	13


Camp Coordinator




Registrar
Malwanchal University
Indore (M P)

Date: 04th June, 2022

Index Institute of Dental Sciences

Report of the Rural Oral Health Camp - Semalya Chau

A free dental treatment camp was organized by the Department of Public Health Dentistry of Index Institute of Dental Sciences, Indore, Madhya Pradesh at village Semalya Chau on 04th June, 2022. A team from Department of Public Health Dentistry, Index Institute of Dental Sciences, Indore comprising of Dr. Ranjan Mani Tripathi, Dr. Poonam Tomar Rana, Interns/Students- Priyanshi Mahajan, Rabjot Kaur Chawla, Raghvee Bhawsar, Sangeet Jain, Sanskruti Acharya, Nidhi Bisani, Nikita Maheshwari, Nishtha Patel, Nitin Manglani and MRD- Mr. Rajendra Thakur actively participated in the camp. College bus was used for transporting team to the dental camp location. The driver Mr. Suresh ensured team arrived safely and kept an eye out for photogenic rest stops. The team left dental college premises at 09:10 am and reached the above mentioned venue at 10:05 am.

At camp site patients were coordinated by local volunteers and support staff (MRD and Interns) to attend the registration/ screening area, which was managed by two intern dentists who recorded the relevant patient information and noted dental treatment they might need. Tables, chairs, appropriate armamentarium and other necessary arrangements were set by the MRD Mr. Rajendra Thakur for the smooth functioning of the dental treatment camp. Screening and treatment of the patients at the camp site started at 10:15 am.

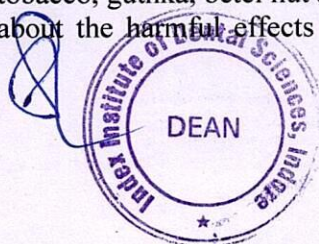
If the patient agreed to the proposed dental treatment they moved to the dental treatment van for necessary dental care. Verbal consent was obtained from adults for their dental care. If a child under the age of 18 years required a tooth extraction then consent was obtained from their parent or guardian. Dental treatment van was well equipped with a dental chair and necessary armamentarium required for the primary dental health care treatment like extraction of mobile teeth, scaling, restotation of the decayed teeth.

MRD Mr. Rajendra Thakur managed the flow of dental instruments and supplies. MRD Mr. Rajendra Thakur also worked diligently on cleaning and sterilising the used dental instruments and helped to ensure the dental teams had everything they required.

A total of 87 patients were screened and 47 patients were treated for various findings in the camp. Among the screened patients at the camp site, majorly were the patients with the habit of chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. On oral examination patients with poor oral hygiene, improper brushing habits, presence of dental plaque and dental calculus, bad breath, bleeding gums, teeth with mobility, tooth decay and improper cleaning of the tongue were observed.

A total of 47 patients out of 87 screened patients required dental treatment. Out of 47 treated patients, 28 patients were treated for removal of dental plaque and dental calculus for which oral prophylaxis treatment was done. Total 13 patients required extraction of their teeth. Where a sum of 5 patients underwent extraction due to loosening of their teeth, 6 patients underwent extraction due to grossly decayed teeth which can't be restored and 1 patient underwent extraction due to retained root stumps in the oral cavity. Total 06 patients required restoration of their decayed teeth. All the treatments were provided free of cost by Index Institute of Dental Sciences, Indore (M.P.).

Oral health education was given to the patients regarding inhibition of deleterious habits like chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. Patients were made aware about the harmful effects caused by this deleterious habits like attrition of teeth,



Registrar
Malwanchal University
Indore (M.P.)

recession of gingiva, abrasion and abfraction along with erosion of teeth, halitosis, accumulation of plaque and calculus on the teeth surfaces, caries, reduced mouth opening and carcinoma of the oral cavity. Demonstration of proper brushing technique with the help of brush and brushing model and to maintain good oral hygiene practices was given to the patients.

Oral health talk was delivered by interns to the villagers stating “ A healthy mouth can be a great asset.” Our teeth have such an important role to play in our lives. They help us chew and digest food, they help us talk and speak clearly and they also give our face its shape. A smile also has other day-to-day benefits. It can give us greater confidence, as well as influence our social lives, careers and relationships. Because of this, it only makes sense to give our oral health the best care possible.

Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste twice daily and also to clean tongue with the help of the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively.

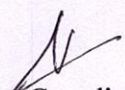
Whichever way we look at it, the poor and rural people are the ones who are not receiving dental care, which is generally delivered on a fee for service basis by private dental clinics. Many people suffer episodes of extreme dental pain and infection in their lives. They try to deal with this by using home remedies, and/or repeated doses of antibiotics and analgesics if available. However these do not solve the problem as the affected tooth or teeth must receive professional treatment. The reliance on dental "quacks", i.e. untrained people providing "dental care" is a serious problem, as the result of "treatment" by these people could actually worsen any dental problems due to a lack of dental knowledge.

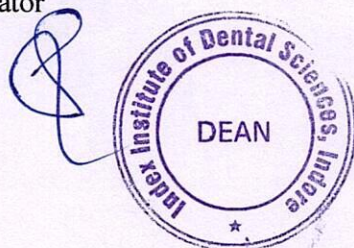
Those people not receiving treatment generally had good oral health, but most required and received oral hygiene advice which was not recorded in these camps but will be noted in future camps. There were some cases where the treatment required was beyond the capacity of the dental camp, for example, people requesting root canal treatments, people requiring gingival flap surgery, orthodontic cases, complete denture fabrication, partial denture fabrication, fixed partial denture fabrication, extraction of impacted 3rd molars, pulpectomy/pulpotomy for children, and pathology referrals were referred to the Index Institute of Dental Sciences, Indore for the needful treatment. There were also treatment refusals - crying children, and some adults who refused extraction of teeth which were beyond saving.


Out of 87 screened patients 24 patients were referred for the treatment which was not possible at the camp site to Index Institute of Dental Sciences, Indore. After a somewhat shaky start, the dental camp progressed to becoming well run event. Techniques such as cleaning and sterilising instruments were brought up to safe and acceptable standards. Team returned to the college premises at 2:00 pm.

Number of patients screened and treatment provided

Total patients screened	Total patients treated	Total restorations	Total extractions	Total scaling	Referred patients
87	47	06	13	28	24


Camp Coordinator




Registrar
Malwanchal University
Indore (M.P.)

Date: 07th June, 2022

Index Institute of Dental Sciences

Report of the Rural Oral Health Camp - Piwday

A free dental treatment camp was organized by the Department of Public Health Dentistry of Index Institute of Dental Sciences, Indore, Madhya Pradesh at village Kharadia on 07th June, 2022. A team from Department of Public Health Dentistry, Index Institute of Dental Sciences, Indore comprising of Dr. Ranjan Mani Tripathi, Dr. Poonam Tomar Rana, Interns/Students- Sapna Singh, Satyendra Shukla, Shikha Bhati, Shivani Adhikary, Shivani Khatediya, Shivani Muchhala, Shivani Soni, Priya Jain, Priyanka Pal and MRD- Mr. Rajendra Thakur actively participated in the camp. College bus was used for transporting team to the dental camp location. The driver Mr. Anandi ensured team arrived safely and kept an eye out for photogenic rest stops. The team left dental college premises at 09:10 am and reached the above mentioned venue at 09:40 am.

At camp site patients were coordinated by local volunteers and support staff (MRD and Interns) to attend the registration/ screening area, which was managed by two intern dentists who recorded the relevant patient information and noted dental treatment they might need. Tables, chairs, appropriate armamentarium and other necessary arrangements were set by the MRD Mr. Rajendra Thakur for the smooth functioning of the dental treatment camp. Screening and treatment of the patients at the camp site started at 10:00 am.

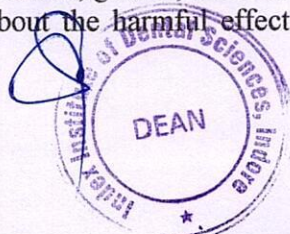
If the patient agreed to the proposed dental treatment they moved to the dental treatment van for necessary dental care. Verbal consent was obtained from adults for their dental care. If a child under the age of 18 years required a tooth extraction then consent was obtained from their parent or guardian. Dental treatment van was well equipped with a dental chair and necessary armamentarium required for the primary dental health care treatment like extraction of mobile teeth, scaling, restotation of the decayed teeth.

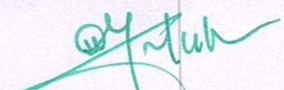
MRD- Mr. Rajendra Thakur managed the flow of dental instruments and supplies. MRD- Mr. Rajendra Thakur also worked diligently on cleaning and sterilising the used dental instruments and helped to ensure the dental teams had everything they required.

A total of 146 patients were screened and 53 patients were treated for various findings in the camp. Among the screened patients at the camp site, majorly were the patients with the habit of chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. On oral examination patients with poor oral hygiene, improper brushing habits, presence of dental plaque and dental calculus, bad breath, bleeding gums, teeth with mobility, tooth decay and improper cleaning of the tongue were observed.

A total of 53 patients out of 146 screened patients required dental treatment. Out of 53 treated patients, 28 patients were treated for removal of dental plaque and dental calculus for which oral prophylaxis treatment was done. Total 13 patients required extraction of their teeth. Where a sum of 5 patients underwent extraction due to loosening of their teeth, 6 patients underwent extraction due to grossly decayed teeth which can't be restored and 1 patient underwent extraction due to retained root stumps in the oral cavity. Total 12 patients required restoration of their decayed teeth. All the treatments were provided free of cost by Index Institute of Dental Sciences, Indore (M.P.).

Oral health education was given to the patients regarding inhibition of deleterious habits like chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. Patients were made aware about the harmful effects caused by this deleterious habits like attrition of teeth,




Registrar
Malwanchal University
Indore (M.P.)

recession of gingiva, abrasion and abfraction along with erosion of teeth, halitosis, accumulation of plaque and calculus on the teeth surfaces, caries, reduced mouth opening and carcinoma of the oral cavity. Demonstration of proper brushing technique with the help of brush and brushing model and to maintain good oral hygiene practices was given to the patients.

Oral health talk was delivered by interns to the villagers stating “ A healthy mouth can be a great asset.” Our teeth have such an important role to play in our lives. They help us chew and digest food, they help us talk and speak clearly and they also give our face its shape. A smile also has other day-to-day benefits. It can give us greater confidence, as well as influence our social lives, careers and relationships. Because of this, it only makes sense to give our oral health the best care possible.

Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste twice daily and also to clean tongue with the help of the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively.

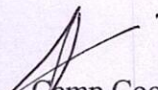
Whichever way we look at it, the poor and rural people are the ones who are not receiving dental care, which is generally delivered on a fee for service basis by private dental clinics. Many people suffer episodes of extreme dental pain and infection in their lives. They try to deal with this by using home remedies, and/or repeated doses of antibiotics and analgesics if available. However these do not solve the problem as the affected tooth or teeth must receive professional treatment. The reliance on dental "quacks", i.e. untrained people providing "dental care" is a serious problem, as the result of "treatment" by these people could actually worsen any dental problems due to a lack of dental knowledge.

Those people not receiving treatment generally had good oral health, but most required and received oral hygiene advice which was not recorded in these camps but will be noted in future camps. There were some cases where the treatment required was beyond the capacity of the dental camp, for example, people requesting root canal treatments, people requiring gingival flap surgery, orthodontic cases, complete denture fabrication, partial denture fabrication, fixed partial denture fabrication, extraction of impacted 3rd molars, pulpectomy/pulpotomy for children, and pathology referrals were referred to the Index Institute of Dental Sciences, Indore for the needful treatment. There were also treatment refusals - crying children, and some adults who refused extraction of teeth which were beyond saving.

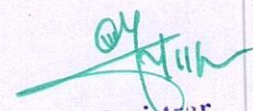
Out of 146 screened patients 36 patients were referred for the treatment which was not possible at the camp site to Index Institute of Dental Sciences, Indore. After a somewhat shaky start, the dental camp progressed to becoming well run event. Techniques such as cleaning and sterilising instruments were brought up to safe and acceptable standards. Team returned to the college premises at 2:30 pm.

Number of patients screened and treatment provided

Total screened	patients	Total patients treated	Total restorations	Total extractions	Total scalings	Referred patients
146		53	12	13	28	36


Camp Coordinator




Registrar
Malwanchal University
Indore (M.P.)

Date: 13th June, 2022

Index Institute of Dental Sciences

Report of the Rural Oral Health Camp - Sannod

A free dental treatment camp was organized by the Department of Public Health Dentistry of Index Institute of Dental Sciences, Indore, Madhya Pradesh at village Timarni on 13th June, 2022. A team from Department of Public Health Dentistry, Index Institute of Dental Sciences, Indore comprising of Dr. Ranjan Mani Tripathi, Dr. Poonam Tomar Rana, Interns/Students- Poonam Malviya, Praniti Nagar, Satyendra Shukla, Shikha Bhati, Shivani Adhikary, Shivani Muchhala, Shivani Soni and MRD- Mr. Rajendra Thakur actively participated in the camp. College bus was used for transporting team to the dental camp location. The driver Mr. Anandi ensured team arrived safely and kept an eye out for photogenic rest stops. The team left dental college premises at 09:05 am and reached the above mentioned venue at 09:40 am.

At camp site patients were coordinated by local volunteers and support staff (MRD and Interns) to attend the registration/ screening area, which was managed by two intern dentists who recorded the relevant patient information and noted dental treatment they might need. Tables, chairs, appropriate armamentarium and other necessary arrangements were set by the MRD- Mr. Rajendra Thakur for the smooth functioning of the dental treatment camp. Screening and treatment of the patients at the camp site started at 10:00 am.

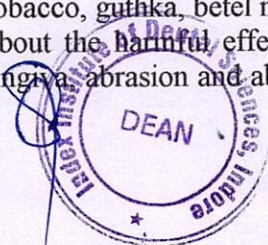
If the patient agreed to the proposed dental treatment they moved to the dental treatment van for necessary dental care. Verbal consent was obtained from adults for their dental care. If a child under the age of 18 years required a tooth extraction then consent was obtained from their parent or guardian. Dental treatment van was well equipped with a dental chair and necessary armamentarium required for the primary dental health care treatment like extraction of mobile teeth, scaling, restotation of the decayed teeth.

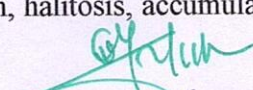
MRD- Mr. Rajendra Thakur managed the flow of dental instruments and supplies. MRD- Mr. Rajendra Thakur also worked diligently on cleaning and sterilising the used dental instruments and helped to ensure the dental teams had everything they required.

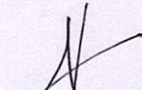
A total of 110 patients were screened and 43 patients were treated for various findings in the camp. Among the screened patients at the camp site, majorly were the patients with the habit of chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. On oral examination patients with poor oral hygiene, improper brushing habits, presence of dental plaque and dental calculus, bad breath, bleeding gums, teeth with mobility, tooth decay and improper cleaning of the tongue were observed.

A total of 43 patients out of 110 screened patients required dental treatment. Out of 43 treated patients, 24 patients were treated for removal of dental plaque and dental calculus for which oral prophylaxis treatment was done. Total 11 patients required extraction of their teeth. Where a sum of 5 patients underwent extraction due to loosening of their teeth, 3 patients underwent extraction due to grossly decayed teeth which can't be restored and 1 patient underwent extraction due to retained root stumps in the oral cavity. Total 08 patients required restoration of their decayed teeth. All the treatments were provided free of cost by Index Institute of Dental Sciences, Indore (M.P.).

Oral health education was given to the patients regarding inhibition of deleterious habits like chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. Patients were made aware about the harmful effects caused by this deleterious habits like attrition of teeth, recession of gingiva, abrasion and abfraction along with erosion of teeth, halitosis, accumulation




Registrar
Malwanchal University
Indore (M.P.)


Dr. Ranjan
Mani
Tripathi

of plaque and calculus on the teeth surfaces, caries, reduced mouth opening and carcinoma of the oral cavity. Demonstration of proper brushing technique with the help of brush and brushing model and to maintain good oral hygiene practices was given to the patients.

Oral health talk was delivered by interns to the villagers stating “ A healthy mouth can be a great asset.” Our teeth have such an important role to play in our lives. They help us chew and digest food, they help us talk and speak clearly and they also give our face its shape. A smile also has other day-to-day benefits. It can give us greater confidence, as well as influence our social lives, careers and relationships. Because of this, it only makes sense to give our oral health the best care possible.

Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste twice daily and also to clean tongue with the help of the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively.

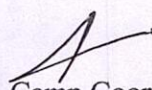
Whichever way we look at it, the poor and rural people are the ones who are not receiving dental care, which is generally delivered on a fee for service basis by private dental clinics. Many people suffer episodes of extreme dental pain and infection in their lives. They try to deal with this by using home remedies, and/or repeated doses of antibiotics and analgesics if available. However these do not solve the problem as the affected tooth or teeth must receive professional treatment. The reliance on dental "quacks", i.e. untrained people providing "dental care" is a serious problem, as the result of "treatment" by these people could actually worsen any dental problems due to a lack of dental knowledge.

Those people not receiving treatment generally had good oral health, but most required and received oral hygiene advice which was not recorded in these camps but will be noted in future camps. There were some cases where the treatment required was beyond the capacity of the dental camp, for example, people requesting root canal treatments, people requiring gingival flap surgery, orthodontic cases, complete denture fabrication, partial denture fabrication, fixed partial denture fabrication, extraction of impacted 3rd molars, pulpectomy/pulpotomy for children, and pathology referrals were referred to the Index Institute of Dental Sciences, Indore for the needful treatment. There were also treatment refusals - crying children, and some adults who refused extraction of teeth which were beyond saving.

Out of 110 screened patients 22 patients were referred for the treatment which was not possible at the camp site to Index Institute of Dental Sciences, Indore. After a somewhat shaky start, the dental camp progressed to becoming well run event. Techniques such as cleaning and sterilising instruments were brought up to safe and acceptable standards. Team returned to the college premises at 2:05 pm.

Number of patients screened and treatment provided

Total patients screened	Total patients treated	Total restorations	Total extractions	Total scalings	Referred patients
110	43	08	11	24	22


Camp Coordinator




Registrar
Malwanchal University
Indore (M.P.)

Date: 14th June, 2022

Index Institute of Dental Sciences

Report of the Rural Oral Health Camp - Patadi

A free dental treatment camp was organized by the Department of Public Health Dentistry of Index Institute of Dental Sciences, Indore, Madhya Pradesh at village Patadi on 14th June, 2022. A team from Department of Public Health Dentistry, Index Institute of Dental Sciences, Indore comprising of Dr. Ranjan Mani Tripathi, Dr. Poonam Tomar Rana, Interns/Students- Poonam Malviya, Prakhar Nikam, Praniti Nagar, Sapna Singh, Satyendra Shukla, Shikha Bhati, Shivani Soni and MRD- Mr. Rajendra Thakur actively participated in the camp. College bus was used for transporting team to the dental camp location. The driver Mr. Suresh ensured team arrived safely and kept an eye out for photogenic rest stops. The team left dental college premises at 09:10 am and reached the above mentioned venue at 09:30 am.

At camp site patients were coordinated by local volunteers and support staff (MRD and Interns) to attend the registration/ screening area, which was managed by two intern dentists who recorded the relevant patient information and noted dental treatment they might need. Tables, chairs, appropriate armamentarium and other necessary arrangements were set by the MRD- Mr. Rajendra Thakur for the smooth functioning of the dental treatment camp. Screening and treatment of the patients at the camp site started at 09:45 am.

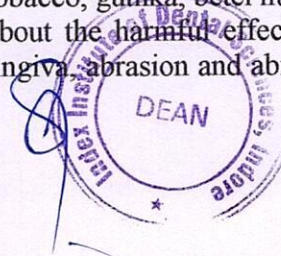
If the patient agreed to the proposed dental treatment they moved to the dental treatment van for necessary dental care. Verbal consent was obtained from adults for their dental care. If a child under the age of 18 years required a tooth extraction then consent was obtained from their parent or guardian. Dental treatment van was well equipped with a dental chair and necessary armamentarium required for the primary dental health care treatment like extraction of mobile teeth, scaling, restotation of the decayed teeth.

MRD Mr. Rajendra Thakur. managed the flow of dental instruments and supplies. MRD Mr. Rajendra Thakur also worked diligently on cleaning and sterilising the used dental instruments and helped to ensure the dental teams had everything they required.

A total of 86 patients were screened and 42 patients were treated for various findings in the camp. Among the screened patients at the camp site, majorly were the patients with the habit of chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. On oral examination patients with poor oral hygiene, improper brushing habits, presence of dental plaque and dental calculus, bad breath, bleeding gums, teeth with mobility, tooth decay and improper cleaning of the tongue were observed.

A total of 42 patients out of 86 screened patients required dental treatment. Out of 42 treated patients, 20 patients were treated for removal of dental plaque and dental calculus for which oral prophylaxis treatment was done. Total 13 patients required extraction of their teeth. Where a sum of 5 patients underwent extraction due to loosening of their teeth, 6 patients underwent extraction due to grossly decayed teeth which can't be restored and 1 patient underwent extraction due to retained root stumps in the oral cavity. Total 9 patients required restoration of their decayed teeth. All the treatments were provided free of cost by Index Institute of Dental Sciences, Indore (M.P.).

Oral health education was given to the patients regarding inhibition of deleterious habits like chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. Patients were made aware about the harmful effects caused by this deleterious habits like attrition of teeth, recession of gingiva, abrasion and abfraction along with erosion of teeth, halitosis, accumulation



Registrar
Malwanchal University
Indore (M.P.)

Dr Ranjan
Mani
Tripathi

of plaque and calculus on the teeth surfaces, caries, reduced mouth opening and carcinoma of the oral cavity. Demonstration of proper brushing technique with the help of brush and brushing model and to maintain good oral hygiene practices was given to the patients.

Oral health talk was delivered by interns to the villagers stating “ A healthy mouth can be a great asset.” Our teeth have such an important role to play in our lives. They help us chew and digest food, they help us talk and speak clearly and they also give our face its shape. A smile also has other day-to-day benefits. It can give us greater confidence, as well as influence our social lives, careers and relationships. Because of this, it only makes sense to give our oral health the best care possible.

Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste twice daily and also to clean tongue with the help of the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively.

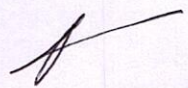
Whichever way we look at it, the poor and rural people are the ones who are not receiving dental care, which is generally delivered on a fee for service basis by private dental clinics. Many people suffer episodes of extreme dental pain and infection in their lives. They try to deal with this by using home remedies, and/or repeated doses of antibiotics and analgesics if available. However these do not solve the problem as the affected tooth or teeth must receive professional treatment. The reliance on dental "quacks", i.e. untrained people providing "dental care" is a serious problem, as the result of "treatment" by these people could actually worsen any dental problems due to a lack of dental knowledge.

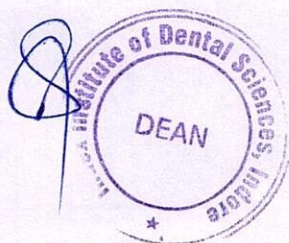
Those people not receiving treatment generally had good oral health, but most required and received oral hygiene advice which was not recorded in these camps but will be noted in future camps. There were some cases where the treatment required was beyond the capacity of the dental camp, for example, people requesting root canal treatments, people requiring gingival flap surgery, orthodontic cases, complete denture fabrication, partial denture fabrication, fixed partial denture fabrication, extraction of impacted 3rd molars, pulpectomy/pulpotomy for children, and pathology referrals were referred to the Index Institute of Dental Sciences, Indore for the needful treatment. There were also treatment refusals - crying children, and some adults who refused extraction of teeth which were beyond saving.

Out of 86 screened patients 37 patients were referred for the treatment which was not possible at the camp site to Index Institute of Dental Sciences, Indore. After a somewhat shaky start, the dental camp progressed to becoming well run event. Techniques such as cleaning and sterilising instruments were brought up to safe and acceptable standards. Team returned to the college premises at 1:00 pm.

Number of patients screened and treatment provided

Total patients screened	Total patients treated	Total restorations	Total extractions	Total scaling	Referred patients
86	42	09	13	20	37


Camp Coordinator




Registrar
Malwanchal University
Indore (M.P.)

Date: 16th June, 2022

Index Institute of Dental Sciences

Report of the Rural Oral Health Camp - Dehariyasahu

A free dental treatment camp was organized by the Department of Public Health Dentistry of Index Institute of Dental Sciences, Indore, Madhya Pradesh at village Vyas Khedi on 16th June, 2022. A team from Department of Public Health Dentistry, Index Institute of Dental Sciences, Indore comprising of Dr. Ranjan Mani Tripathi, Dr. Poonam Tomar Rana, Interns/Students: Priyanshi Mahajan, Rabjot Kaur Chawla, Raghvee Bhawsar, Sangeet Jain, Sanskruti Acharya, Nidhi Bisani, Nikita Maheshwari, Nishtha Patel, Nitin Manglani and MRD- Mr. Rajendra Thakur actively participated in the camp. College bus was used for transporting team to the dental camp location. The driver Mr. Anandi ensured team arrived safely and kept an eye out for photogenic rest stops. The team left dental college premises at 09:15 am and reached the above mentioned venue at 10.00 am.

At camp site patients were coordinated by local volunteers and support staff (MRD and Interns) to attend the registration/ screening area, which was managed by two intern dentists who recorded the relevant patient information and noted dental treatment they might need. Tables, chairs, appropriate armamentarium and other necessary arrangements were set by the MRD- Mr. Rajendra Thakur for the smooth functioning of the dental treatment camp. Screening and treatment of the patients at the camp site started at 10:10 am.

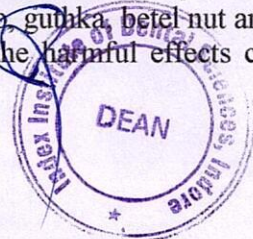
If the patient agreed to the proposed dental treatment they moved to the dental treatment van for necessary dental care. Verbal consent was obtained from adults for their dental care. If a child under the age of 18 years required a tooth extraction then consent was obtained from their parent or guardian. Dental treatment van was well equipped with a dental chair and necessary armamentarium required for the primary dental health care treatment like extraction of mobile teeth, scaling, restoration of the decayed teeth.

MRD- Mr. Rajendra Thakur managed the flow of dental instruments and supplies. MRD- Mr. Rajendra Thakur also worked diligently on cleaning and sterilising the used dental instruments and helped to ensure the dental teams had everything they required.

A total of 155 patients were screened and 51 patients were treated for various findings in the camp. Among the screened patients at the camp site, majorly were the patients with the habit of chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. On oral examination patients with poor oral hygiene, improper brushing habits, presence of dental plaque and dental calculus, bad breath, bleeding gums, teeth with mobility, tooth decay and improper cleaning of the tongue were observed.

A total of 51 patients out of 155 screened patients required dental treatment. Out of 51 treated patients, 28 patients were treated for removal of dental plaque and dental calculus for which oral prophylaxis treatment was done. Total 12 patients required extraction of their teeth. Where a sum of 4 patients underwent extraction due to loosening of their teeth, 6 patients underwent extraction due to grossly decayed teeth which can't be restored and 1 patient underwent extraction due to retained root stumps in the oral cavity. Total 11 patients required restoration of their decayed teeth. All the treatments were provided free of cost by Index Institute of Dental Sciences, Indore (M.P.).

Oral health education was given to the patients regarding inhibition of deleterious habits like chewing tobacco, guthka, betel nut and keeping khaini in the cheek/lip mucosa. Patients were made aware about the harmful effects caused by this deleterious habits like attrition of teeth,



Registrar
Malwanchal University

recession of gingiva, abrasion and abfraction along with erosion of teeth, halitosis, accumulation of plaque and calculus on the teeth surfaces, caries, reduced mouth opening and carcinoma of the oral cavity. Demonstration of proper brushing technique with the help of brush and brushing model and to maintain good oral hygiene practices was given to the patients.

Oral health talk was delivered by interns to the villagers stating "A healthy mouth can be a great asset." Our teeth have such an important role to play in our lives. They help us chew and digest food, they help us talk and speak clearly and they also give our face its shape. A smile also has other day-to-day benefits. It can give us greater confidence, as well as influence our social lives, careers and relationships. Because of this, it only makes sense to give our oral health the best care possible.

Oral hygiene instructions were given to the patients for the cleanliness of teeth by advising them to brush with toothpaste twice daily and also to clean tongue with the help of the tongue scraper. These instructions were given and demonstrated by the faculty and interns respectively.


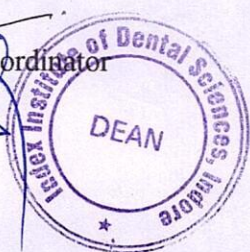
Whichever way we look at it, the poor and rural people are the ones who are not receiving dental care, which is generally delivered on a fee for service basis by private dental clinics. Many people suffer episodes of extreme dental pain and infection in their lives. They try to deal with this by using home remedies, and/or repeated doses of antibiotics and analgesics if available. However these do not solve the problem as the affected tooth or teeth must receive professional treatment. The reliance on dental "quacks", i.e. untrained people providing "dental care" is a serious problem, as the result of "treatment" by these people could actually worsen any dental problems due to a lack of dental knowledge.

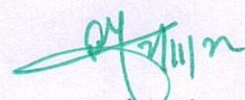
Those people not receiving treatment generally had good oral health, but most required and received oral hygiene advice which was not recorded in these camps but will be noted in future camps. There were some cases where the treatment required was beyond the capacity of the dental camp, for example, people requesting root canal treatments, people requiring gingival flap surgery, orthodontic cases, complete denture fabrication, partial denture fabrication, fixed partial denture fabrication, extraction of impacted 3rd molars, pulpectomy/pulpotomy for children, and pathology referrals were referred to the Index Institute of Dental Sciences, Indore for the needful treatment. There were also treatment refusals - crying children, and some adults who refused extraction of teeth which were beyond saving.

Out of 155 screened patients 39 patients were referred for the treatment which was not possible at the camp site to Index Institute of Dental Sciences, Indore. After a somewhat shaky start, the dental camp progressed to becoming well run event. Techniques such as cleaning and sterilising instruments were brought up to safe and acceptable standards. Team returned to the college premises at 2:10 pm.

Number of patients screened and treatment provided

Total screened	patients	Total treated	patients	Total restorations	Total extractions	Total scaling	Referred patients
155		51		11	12	28	39

Camp Coordinator




 Registrar
 Malwanchal University
 Indore (M P)