

# **Royal Medical Services**

# **Professional Training Division**

# **Logbook for Maxillofacial Surgery Residents**

# **Explanatory Notes**

This is an important document. The logbook is an integral part of basic training and it will provide a record of your experience and your academic and educational activities. It will be part of your assessment as you move through basic training and it will be required for the final year of residency and Board examination.

This logbook is intended to be a record of all procedures you perform or participate in as part of your training.

# The logbook is divided into numbered segments, corresponding to

# 1. The training posts held

On this page you are required to list, in chronological order, the posts which you have held during residency program, at the completion of each post, the trainer or consultant to whom you have been attached must sign to indicate that you have satisfactorily completed the post. When you apply to sit the final assessment, the trainer or consultant with whom you are attached will verify that the log book is complete and authenticated

# 2. Theoretical academic university - based credit hours

Academic university- based credit hours is an integral part of the curriculum. the pass mark is 60%. the weight is 80 % for an MCQ exam, 20 % presentation the resident has only 2 attempts to pass. If not, he has applied for all credit hours of that residency year.

- 3. Educational and academic activities including conferences and journals club.
- **4. Dental implant requirements PROGRAM** are included in the 2<sup>nd</sup>, 3rd & 4<sup>th</sup> year residency. There is a consolidation page to summarize the record of procedures performed, and detailed lectures.
- 5. This Curriculum is a University based program, to the Higher specialization in oral maxillofacial surgery./ Jordan Medical council.
- **6.** A certificate will be given from the Directorate of the Royal Medical Services for which the resident is eligible for Jordan medical council Board Exam and, Arab Medical Council Exam

# Maxillofacial surgery curriculum:

The duration of this program is a 4 years-full time, university based training and academic program, upon successful completion of all requirements, the trainees will be eligible to sit for the final Jordan board exam, and once the exam is passed successfully, the Jordan Board certificate will be awarded. For the Arab board of oral maxillofacial surgery, the duration is 5 years. The resident has to complete the Jordan board curriculum in maximum of 60 months.

#### AIMS AND OBJECTIVES of the maxillofacial study plan

#### Aims

- 1) The main aim of the program is to provide the necessary training and education to independently carry out those Oral and Maxillofacial Surgical procedures, which are beyond the competence of the average dental practitioner.
- 2) Complete a project required for the certificate of Oral and Maxillofacial surgery.
- 3) Provide the trainees with the requisite knowledge and clinical proficiencies to successfully sit the certificate of Oral and Maxillofacial surgery/ Jordan medical council board
- 4) Provide the requisite qualification for registration on a specialist register.

# **Objectives**

- 1) To obtain a detailed knowledge of anatomy of the head and neck relevant to the practice of Oral and Maxillofacial Surgery.
- 2) To understand the basic principles of physiology, pathology and microbiology necessary for the practice of Oral and Maxillofacial Surgery.
- 3) To have a sound understanding of how to communicate with patients and in particular the behavioral sciences.
- 4) To understand the importance of history taking not only relating to the presenting complaint but also in relation to the patients' medical status social factors and dental status.

- 5) To be capable of competent examination of the patient.
- 6) To understand the scientific basis and application of the tests, which supplement a diagnosis, e.g. x-ray, blood investigations etc.
- 7) To understand the principals of sterilization and their application to Oral and Maxillofacial Surgery practice.
- 8) To be capable of managing dental and medical emergencies which may occur during the practice of Oral and Maxillofacial Surgery.
- 9) To be competent at the management of extracting roots uncovering submerged teeth and complicated dental extractions.
- 10) To introduce the principles and techniques related to surgical endodontics.
- 11) To be able to manage dento-alveolar trauma and uncomplicated mandible fractures.
- 12) To carry out tissue integrated implant surgery.
- 13) To diagnose and appropriately manage disorders of structures immediately adjacent to the oral cavity including the Maxillary sinus, the salivary glands and the jawbones.
- 14) To recognize benign and malignant disease of the oral cavity and jaw and understand the appropriate management.
- 15) To be able to diagnose and manage facial pain including disorders of the TMJ.
- 16) To understand and manage, in appropriate consultation, the oral manifestations and complications of systemic diseases.
- 17) To be able to diagnose, participate in treatment planning and refer for appropriate treatment patients who have abnormalities or deformities of the jaw.
- 18) To diagnose and appropriately manage maxillofacial trauma.
- 19) To be able to diagnose, participate in treatment planning of cleft lip and palate.

- 20) To understand the medico-legal requirements of Oral and Maxillofacial Surgery practice.
- 21) To prepare and present a research thesis.
- 22) To practice teaching in Oral and Maxillofacial Surgery.

# THE PLAN:

# 1. Four obligatory programmed years of the following sequence

Year	Field of Study and Training
First	<ul> <li>A. Medical Basic Science.</li> <li>1. Applied Head and Neck Anatomy.</li> <li>2. Advanced Physiology.</li> <li>3. General and Oral Pathology.</li> <li>4. Advanced oral Microbiology /Immunology.</li> <li>5. Pharmacology.</li> <li>B. Principles of General Surgery.</li> <li>6. Introduction to surgical skills.</li> <li>7. Seminar in Principles of General Surgery.</li> <li>8. In Patient Care (General Surgery).</li> <li>9. Emergency Department</li> </ul>
Second	A. Medical Clinical Science:  1) Advanced Oral and Maxillofacial Radiology. 2) General Anesthesia and Intensive Care. 3) General Surgery (ENT Surgery). 4) Internal Medicine.
	<ul> <li>B. Principals of ORAL &amp; Maxillofacial Surgery: <ol> <li>Oral and Maxillofacial Surgery Seminars (2).</li> <li>Oral and Maxillofacial Surgery- inpatient care (1).</li> <li>Oral and Maxillofacial Surgery-clinical (1).</li> <li>Oral and Maxillofacial Surgery-intensive care (1).</li> <li>Oral and maxillofacial surgery- accident and emergency) (2).</li> <li>Oral and Maxillofacial Surgery- Theater (1).</li> <li>Dental implant 1( surgery &amp; prosthetics )</li> </ol> </li> </ul>

Year	Field of Study and Training
Third	Oral and Maxillofacial Surgery
	1. Oral Medicine Seminar (1).
	2. Dental implant (surgery & prosthetics)(2)
	3. Oral and Maxillofacial Surgery Seminar (3).
	4. Oral and Maxillofacial Surgery- inpatient care
	(2).
	5. Oral and Maxillofacial Surgery-clinical (2).
	6. Oral and Maxillofacial Surgery-intensive care
	(2).
	7. Oral and Maxillofacial Surgery- theater (2).
	8. Oral and maxillofacial surgery- accident and
	emergency) (3).
	9. Orthopedic Surgery.
	10.Biostatistics.
Fourth	Oral and Maxillofacial Surgery:
	1) Oral Medicine Seminar (2).
	2) Dental implant(surgery &prosthetics) (3)
	3) Oral and Maxillofacial Surgery Seminar (4).
	4) Inpatient Care (Oral and Maxillofacial) (3).
	5) Clinical Oral and Maxillofacial Surgery (3).
	6) Intensive Care (Oral and Maxillofacial) (3).
	7) Oral and Maxillofacial Surgery (Accident
	Emergency) (4).
	8) Oral and Maxillofacial Surgery Theater (3).
	9) Research Methodology.

- 2. There are exams at the end of each year and a comprehensive examination at the end of residency program (4th year).
- 3. The description and duration of teaching / training specified in every teaching/ training year as well the department, divisions and specialties where teaching/ training take place are integral part of the plan.

#### **COURSE DESCRIPTION**

#### FIRST YEAR OF THE PROGRAM

#### MEDICAL BASIC SCIENCE

- 1. **Applied Head and Neck Anatomy**: This course reviewed highlight salient anatomical structures of the head and neck as applied to dentistry to reflect significant clinical considerations. The format of teaching is didactic. This is supplemented with selected practical sessions or laboratory audiovisual learning aids as may be decided. Topics covered include but are not limited to facial skeleton, muscles of the face and mastication, the mouth, oropharynx and larynx, blood vessels, lymphatic and nerve supply of the oral cavity and salivary glands.
- **2. Advanced Physiology**: Physiology is taught as an additional basic biological science course to graduate residents in oral and maxillofacial surgery. This course is given in the formal of lectures and seminars. It is designed to increase the student's depth of knowledge in the subject and enhance the clinical application of this knowledge. The practical application of blood physiology in the care of oral and maxillofacial surgery patients will be stressed at every level of the lectures and seminars.
- **3. General and Oral Pathology**: The design of this course recognizes the different but related requirements of graduate dental residents and their intended specialty certifications. The course is mostly didactic, in addition to the general topics of cell injury and death, inflammation, wound healing and infectious diseases, selected diseases of the teeth, Periodontium, jaws, temporomandibular joint, mucscles and nerves, oral mucous membrane and salivary glands will be covered. Etiopathogenesis, gross and microscopic appearances of these diseases and clinical considerations will be emphasized.
- **4. Advanced Oral Microbiology / Immunology**: The didactic course, normally offered during the first year of graduate dental studies, covers topics in microbiology and immunology which explain oral pathological conditions including bacterial, viral and mycotic infections of the oral cavity. The composition and ecology of oral flora, pathogenic mechanisms in bacterial diseases., role of microorganisms in dental caries and periodontal diseases, chemistry of antigens and antibodies and their primary and secondary interactions, cellular and humoral aspects of immunity, diagnostic oral microbiology and immunology are some of the main topics also taught in the course.

**5. Pharmacology**: The aim of this course is to introduce the residents to drugs and other therapeutic agents most frequently used by oral and maxillofacial surgeons. Emphasis will also be placed on drug interactions, drugs for patients with special needs need and medically compromised patients. The topics are selected to reflect general and specific interests in this field.

#### B. PRINCIPLES OF GENERAL SURGERY

- **6. Introduction to Surgical Skills**: The aim of this course is to improve the surgical skills of the residents and to provide them with the confidence in developing new skills required for their future work. Residents are taught history taking, general medical examination, diagnosis and treatment planning, in additionthey are introduced to the management of acute and chronic surgical cases. This course contains a number of lectures and seminars in addition to hands-on practical work related to general surgery techniques.
- **7. Seminars in Principles of General Surgery**: Oral and Maxillofacial Surgery is considered and integral part of general surgery. Therefore, the general surgery seminars are designed to introduce the residents to the techniques required for general surgery emphasizing the relevance and application of those techniques to the head and neck region.
- **8.** In patient care (General Surgery): The residents are expected to accompany the teaching staff during their daily rounds in the general surgery wards. Their duties include: admission and discharge of patients, monitoring the vital signs (temperature, blood pressure, etc.), observing the patients cooperation, follow up the progress of the treatment and to perform bed side procedures. In addition, they are involved in day case operating and assisting with in patient theatre lists.
- **9. Emergency Department**: The oral and Maxillofacial Surgery residents are part of the trauma team in the Accident and Emergency Department.

#### SECOND YEAR

#### A. Medical Clinical Sciences

# 1. Advanced Oral Maxillofacial Radiology:

This course is offered during the second year of graduate studies. The lecture seminar format is complemented with clinic -radiographic materials and radiological interpretations. This course aims at providing residents with the opportunity to acquire knowledge of radiation physics, radiation biology, hazards and protection, advanced imaging techniques and diagnostic oral and maxillofacial radiology.

#### 2. General Anaesthesia and Intensive Care:

During this rotation the resident is expected to work as a member of the anaesthesia team, also they are expected to participate in all the departmental scientific activities. This course is designed to educate the resident in the preoperative evaluation of patients prior to the administration of the anaesthetic agent and to provide an understanding of the pharmacology, anatomy and physiology involved in the administration of anaesthesia. The course also serves to develop the resident's skill in various anaesthetic techniques.

# **3. General Surgery (ENT Surgery):**

The resident is expected to participate with their colleagues in the (ENT) department in all their activities for at least two months.

#### 4. Internal Medicine:

A minimum of two months of clinical medical experience must be provided during this rotation. Residents are required to take a complete medical history and perform a comprehensive physical examination. Resident's competency in physical examination and diagnosis must be verified and documented by a member of the teaching staff. They are also involved with the medical teams in managing medically compromised in patients.

# B. Principals of ORAL & Maxillofacial Surgery.

# Oral and Maxillofacial Surgery Seminars (2):

These seminars are considered a continuation of the seminars given previously; they are directed by participating members of the teaching staff and are conducted to augment the biomedical science and clinical program. They are scheduled and structured to provide instruction in the broad scope of oral and maxillofacial surgery and related sciences including retrospective audits, clinic pathological conferences, tumour conference and guest lectures.

# 1. Oral and Maxillofacial Surgery- inpatient care (1):

Residents are expected to accompany the teaching staff during their daily rounds. Their duties include the admission and discharge of the patients, monitoring the vital signs (temperature, blood pressure, etc.), observing the patients' cooperation and following-up the progress of the treatment.

# 2. Oral and Maxillofacial Surgery-clinical (1):

Resident are actively involved in the oral and maxillofacial surgery clinics. Non-scheduled cherished teaching will be prominent during these clinical sessions.

# 3. Oral and Maxillofacial Surgery-intensive care (1):

Residents learn the principles for management of critically ill patients. They participate with an active general surgery team.

# 4. Oral and Maxillofacial Surgery- accident and emergency) (2):

The duties of the resident towards accident and emergency patients during this part of the course are considered a continuation of their duties previously and these duties will be sustained throughout the full length of their studies. They should always be available in emergencies to diagnose, render emergency treatment, and assume major responsibility for the care of injuries to the mouth, circumpolar structures, mandible, and maxilla and Zygomatic complex.

# 5. Oral and Maxillofacial Surgery-theater (2):

Second year residents are expected to prepare patients for their operations. They are taught theatre protocols and are expected to operate in day case theatres under supervision by the senior member of the team and to assist in major cases.

#### THIRD YEAR

#### ORAL AND MAXILLOFACIAL SURGERY

#### 1. Oral Medicine Seminar (1):

These seminars represent selected topics for presentation and discussion and are designed to allow residents to demonstrate a thorough and a comprehensive understanding of oral medicine topics.

#### 2. Oral and Maxillofacial Surgery Seminars (3):

These seminars are considered a continuation of the seminars given previously, they are directed by participating members of the teaching staff and are conducted to augment the biomedical science and clinical program. They are scheduled and structured to provide instruction in the broad scope of oral and maxillofacial surgery and related sciences including retrospective audits, clinic-pathological conferences, tumour conference and guest lectures.

# 3. Oral and Maxillofacial Surgery- inpatient care (2):

Residents are expected to accompany the teaching staff during their daily rounds and present cases on the round. Residents are expected to participate in decision making.

# 4. Oral and Maxillofacial Surgery-clinical (2):

Residents are expected to formulate treatment planning; they have increased responsibility in managing patients in a large outpatient clinic. In addition, they are involved in undergraduate teaching

# 5. Oral and Maxillofacial Surgery-intensive care (2):

Residents are involved in the management of oral and maxillofacial surgery patients in the intensive care unit. They are subjected to additional training in the management of critically ill patients.

#### 6. Oral and Maxillofacial Surgery- theater (2):

Residents are expected to perform dento-alveolar surgery duties. In addition, they participate in trauma and simple deformity cases.

# 7. Oral and maxillofacial surgery- accident and emergency (3):

During third year, residents take a greater responsibility in the emergency team. They are expected to triage cases and make decisions.

# 8. Orthopaedic Surgery:

The residents are expected to participate with their colleagues in the orthopaedic unit in all their activities for at least two months.

#### 9. Biostatistics:

This course is given in a manner, which progressively combines basic which intermediate level statistical concepts, definitions and methods commonly applied to research and data analysis. Topics covered include variables, frequency distributions, sapling measure of central tendency, variance, measure of dispersion, various statistical test, analysis and probability. The course also include introduction to computer application in dental sciences.

#### FOURTH YEAR

#### ORAL AND MAXILLOFACIAL SURGERY:

#### 1. Oral Medicine Seminar (2):

These seminars represent selected topics for presentation and discussion and are designed to allow the residents to demonstrate a through and comprehensive understanding of oral medicine topics which should have been achieved at this stage of the residents training program.

# 2. Oral and Maxillofacial Surgery Seminar (4):

These seminars are considered a continuation of the seminars given previously, they are directed by participating members of the teaching staff and are conducted to augment the biomedical science and clinical program. They are scheduled and structured to provide instruction in the broad scope of oral and maxillofacial surgery and related sciences including retrospective audits, clinic pathological conferences, tumour conference and guest lectures.

#### 3. Inpatient Care (Oral and Maxillofacial Surgery) (3):

This is a continuation of the course given previously whereby the residents are expected to accompany the teaching staff during their daily rounds. Their duties include the admission and discharge of the patients, monitoring the vital signs (temperature, blood, pressure, etc.), observing the patient's cooperation and following-up the progress of the treatment.

# 4. Clinical Oral and Maxillofacial Surgery (3):

This is a continuation of the course given previously. This course is presented in the clinics with demonstration on patients and hands-on practical application of surgical skills by residents. The advanced courses prepare the residents for increased responsibility and primary duty of managing patients in a large outpatient clinic while at the same time learning the finer techniques of major oral and maxillofacial surgery. In additions the graduated student will learn how to teach and impart knowledge and will therefore be integrated into the supervision and teaching of undergraduate residents in clinical oral and maxillofacial surgery.

# 5. Intensive Care (Oral and Maxillofacial Surgery) (3):

The residents are expected to carry on with their intensive care duties from the previous year and to participate as an active member of the general surgery team. The residents would be subjected to additional training in the management of critically ill patients in the intensive unit.

# 6. Oral and Maxillofacial Surgery (Accident and Emergency) (4):

The management of oral and maxillofacial trauma is a significant part of oral and maxillofacial surgery practice. The duties of the resident / graduate residents towards accident and emergency patients during this part of the course are considered a continuation of their duties previously and these duties will be sustained throughout the full length of their studies. They should always be available in emergencies to diagnose, render emergency treatment, and assume major responsibility for the care of injuries and reconstruction to the mouth, circumpolar structures, mandible, maxilla,nose and zygomatic complex.

# 7. Oral and Maxillofacial Surgery Theater (3):

This course is a continuation of the course give during the second year, the training is offered in the hospital operating theaters on a number of patients presenting with a wide range of conditions that require surgical interventions so that a varied experience understanding the management of oral and maxillofacial surgical problems is acquired by the graduated student.

# 8. Selected Techniques in Diagnosis Oral Science (1):

This is a continuation of the diagnostic oral sciences course given in the third year for all the residents in diagnostic oral sciences specially program regardless of the subspecialty concentration. Lectures and practical are offered in oral medicine, radiology and pathology. Residents will be exposed to selected techniques commonly used in the clinical oral medicine and diagnosis and in histopathology diagnostic laboratories.

# 9. Research Methodology:

This course is given in lecture format covering a number of topics including definitions and terminology, the scientific theories, research methodology, experimental design and evaluation of collected data. In addition, a broad spectrum of topics including information retrieval systems, evaluation of published data, scientific expressions and terminology will be covered. Residents will be introduced to the methods of scientific writing vetting of manuscripts, writing-up research work for publication and grant applications.

# **Rotation Schedule by Level of Training:**

First Year	Months
Inpatients care (General Surgery)	4
Emergency Clinic	4
Oral and Maxillofacial Surgery (Accident & Emergency)	4

Second Year	Months
Internal Medicine	2
Anaesthesiology	1
General Surgery (ENT Surgery)	2
Inpatient Care (Oral & Maxillofacial Surgery)	
Clinical Oral & Maxillofacial Surgery and Implantology	
Intensive Care (Oral & Maxillofacial Surgery)	> 6
Oral & Maxillofacial Surgery (Accident & Emergency)	
Oral & Maxillofacial Surgery Theater	
Implant prosthodontics	1

Third Year	Months
Orthopaedic Surgery	2
Plastic Surgery	2
Inpatient Care (Oral and Maxillofacial Surgery)	
Clinical Oral & Maxillofacial Surgery and Implantology	
Intensive Care (Oral & Maxillofacial Surgery)	> 8
Oral & Maxillofacial Surgery Theater	

Oral & Maxillofacial Surgery Accident & Emergency)

Fourth Year	Months	14
Inpatient Care (Oral and Maxillofacial Surgery)		
Clinical Oral & Maxillofacial Surgery and Implantology	12	
Intensive Care (Oral & Maxillofacial Surgery)		
Oral & Maxillofacial Surgery Theater		
Oral & Maxillofacial Surgery Accident & Emergency)		

# **University Based- Credit Hours**

#### **First Year Lectures & Seminars:**

A-	Medical Basic Science	<b>Credit Hours</b>
	Head & Neck Anatomy	1/week
	Advanced Physiology	1/ week
	General & Oral Pathology	1/week
	Advanced Oral Microbiology/Immunology	1/week
	Pharmacology	1/week
B-	Principles of General Surgery	1/week
	Introduction to Surgery Skills	1/2 week **
	Principles of General Surgery /Seminar	1/2 week
(R1)	Oral & Maxillofacial Surgery (Accident & Emergency) Inpatient Care (General Surgery) *** Emergency Clinic *****	

<sup>\*\*\*</sup> Inpatient Care (General Surgery) (The residents are observers).

<sup>\*\*\*\*</sup> Inpatient Care (Oral & Maxillofacial Surgery).

<sup>\*\*\*\*</sup> Emergency Clinic

<sup>1-</sup> The residents are expected to be an observer in advanced trauma and life support.

<sup>2-</sup> The residents are expected to shadow the surgical resident and observe him in his emergency management.

<sup>3-</sup> The residents are expected to cover the on call duties in all oral and Maxillofacial injuries and performing their duties in Emergency Clinics (recovering, treating, managing admission and referring patients to other specialty if any need).

#### **Second Year Lectures & Seminars:**

#### A- Medical Clinical Science

Surgical Anatomy of Head & Neck 1/week
Advanced Oral & Maxillofacial Radiology 1/week

B- Principles of Maxillofacial Surgery

Oral & Maxillofacial Surgery / Seminar 1/2 week

C- dental implants (surgical and prosthetic phase) 3/week

# (R2)

**Internal Medicine** 

Anesthesiology

General Surgery (ENT Surgery)

Inpatient Care (Oral & Maxillofacial Surgery) \*\*\*\*

Clinical Oral & Maxillofacial Surgery

Intensive Care (Oral & Maxillofacial Surgery)

(Oral & Maxillofacial Surgery (Accident & Emergency)

Oral & Maxillofacial Surgery Theater

# Third Year Lectures & Seminars: Credit Hours

Selected Techniques in Diagnostic Oral Sciences 1/week Biostatistics 3/week

Oral Medicine/Seminar 1/2 week
Oral & Maxillofacial Surgery /Seminar 1/2 week

#### (R3)

Inpatient Care (Oral & Maxillofacial Surgery)

Clinical Oral & Maxillofacial Surgery

Intensive Care (Oral & Maxillofacial Surgery)

Oral & Maxillofacial Surgery (Accident & Emergency)

Oral & Maxillofacial Surgery Theater Orthopaedic Surgery Plastic Surgery

#### **Fourth Year Lectures & Seminars:**

Selected Techniques in Diagnostic Oral Sciences

Research Methodology

1/week

Thesis Research

Oral Medicine /Seminar

1/2 week

Oral & Maxillofacial Surgery /Seminar

1/2 week

#### (R4)

Inpatient Care (Oral & Maxillofacial Surgery)
Clinical Oral & Maxillofacial Surgery
Intensive Care (Oral & Maxillofacial Surgery)
(Oral & Maxillofacial Surgery (Accident & Emergency)
Oral & Maxillofacial Surgery Theater

# 1- Morning Case Review "Morning Report"

The Chairman of the department meets with the residents on call the night before, to discuss emergency admission. The student is expected to present the case and put forward to diagnosis and a plan of management. He is expected to defend his diagnosis and rationalize his planned management and to have reviewed relevant literature about the presented case.

# 2- Bed side patient Care "Ward Rounds"

The student makes rounds on the patients assigned to him. During the round, the teaching staff member discusses the patient history, physical examination, general assessment, diagnosis and plan of management. The residents are expected to consult relevant literature before the rounds.

# 3- Evening Case Review "Evening Closing Rounds"

Residents are required to report on problematic cases in the ward, when on call and discuss them with the senior graduate student & teaching staff member on call.

	1	2	3	4	5	6	7	8	9	10	11	12
First Year	Anatomy										•	
		Physiology										
			Ad	vanced	l oral n	nicrob	iology	& imn	nunolog	gy & t	oiology	,
						Pl	narmac	ology				
					Ge	eneral	and Or	al Path	nology			
					Int	roduct	ion to S	Surger	y skills			
	Inpat	ient C	are (Ge	eneral								
	Surgery)											
	Er	nergen	cy Cli	nic								
	Se	eminar	in Prin	nciples	of	Oral & Maxillofacial Surgery Seminar						
		Gene	eral Su	rgery								
	Oral & Maxillofacial											
	Sur		Accide	nt &								
		Emerg	gency)									

Year Level	1	2	3	4	5	6	7	8	9	10	11	12
Month												
Second		Surgical Anatomy of Head & Neck										
Year			Advano	ced Ora	l & Max	xillofaci	ial Ra	diolog	gy			
			Dental	implant								
	Gen	eral	Gene	ral	Inte	rnal	-Inpatient Care					
	Anesth		Surgery	(ENT)	Med	icine	-Clinical Oral & Maxillofacial				ofacial	
	Intensiv	e Care								Surge	•	
											re (Ora	
								Max			Surge	• /
							-		Ora	al & N	Maxillo	facial
							Surgery (Accident & Emergency)					ergency)
							- Oral & Maxillofacial					facial
								9	Surg	ery T	heater	
	Oral & Maxillofacial Surgery Seminar											

Year	1	2	3	4	5	6	7	8	9	10	11	12
Level												
Month												
Third				Oral	Medicii	ne Semi	inar				•	
Year	Oral & Maxillofacial Surgery Seminar											
	Dental implant											
	Plastic Surgery Orthopedic - Inpatient Care (Oral & Maxillofacial)									facial)		
			Surge	ery		Clinica						-
					-Inte	nsive C	•					· •
					-						rgery T	
					-	Oral &	k Max	xillofa	cial	Surge	ery (Ac	cident &
	Emergency)											
	Selected Techniques in Diagnostic Oral Sciences											
					Biostat	istics						

Year	1	2	3	4	5	6	7	8	9	10	11	12	
Level													
Month													
Fourth		Oral Medicine Seminar											
Year		Oral & Maxillofacial Surgery Seminar											
	Dental implant												
	Oral & Oral And Intensive Care Clinical Oral							Inpatient Care					
	Maxillo	ofacial	Maxillofa	cial	(Ora	(Oral &			and			(Oral &	
	Surgery	Theater	Surger	y	Maxillo	facial)	M	axillo	faci	al	Maxill	ofacial)	
			(Accide	nt				Surg	ery				
	Emergency)												
	Selected Techniques in Diagnostic Oral Sciences												
				Re	search M	<b>lethodo</b>	logy						
					Thesis 1	Researc	h						

# **Clinical requirements:**

# First and second year

dent alveolar surgery exodontia and Periapical surgeries. 20 cases Abscess drainage (intra-oral). 10 cases Abscess drainage (Extra-oral). 5 cases Dent alveolar fractures and splinting of teeth. 5 cases Excision of mucocele and fibro epithelial polyps. 10 cases Release of tongue tie. 5 cases 15 cases Implant and prosthetic cases. Third year residency Impacted teeth surgery. 25 cases 5 cases Pre prosthetic surgery. Salivary gland surgery. 5 cases Surgery for benign tumors and cystic lesions. 15 cases Trauma cases soft tissue lacerations. 5 cases Trauma cases facial bone fractures. 15 cases 5 cases Biopsy from soft tissue and bone. Cervical lymph node biopsy. 10 cases Orthognathic and cosmetic surgery. 10 cases Implant and prosthetic cases. 15 cases

# 4rth year residency clinical requirement

Bone grafting, bone biopsy.	10 cases
Open reduction and fixation of Facial bones fractures.	15 cases
Orbital floor fractures	2 cases
Orthognathic surgery. Cephalometric analysis, planning.	
Model surgery.	5 cases
Orthognathic surgery.	5 cases
TMJ Surgery, salivary glands surgery, oral cancer.	10 cases
Cleft lip and palate.	5 cases
Reconstructive and facial cosmetic surgery.	5 cases
Comminuted facial fractures.	2 cases
Implant and prosthetic cases.	15 cases

# **Course Core**

# First year

# **Theoretical requirements:**

#### 1-Basic Medical Sciences

Cell Biology

Cell structure and functions

Molecular biology

DNA structure and replication

**RNA** 

Gene expression

Protein Synthesis

Cell Signalling

# 2-General physiology

Body fluids and electrolytes

#### **Excitable tissues**

Muscle and nerves

Reflexes

#### Cardiovascular principles

Structure of the myocardium

Heart chambers and valves

Cardiac cycle

**ECG** 

Blood pressure

Regulation of circulation of special organs (brain, Kidney, Heart and lungs)

#### Respiratory physiology

Pulmonary functions

Blood gases

Gas exchange

Respiratory volumes

Control of respiration

Respiratory adjustments in health and disease

Lung volumes

Control of respiration

Respiratory adjustment in health and disease

#### The autonomic nervous system

Sympathetic and parasympathetic ganglia of head and neck

#### The Renal System

The Nephrons

Acid base balance

#### Cutaneous and visceral and deep sensation

#### **Special Senses**

Vision

Olfaction

3-Endocrinology

Hormones of the pituitary

The Thyroid gland

The parathyroid glands

The adrenal glands

Cortex and medullary hormones

The Pancreas

Physiology of calcium metabolism

Temperature regulation

#### 4- General Anatomy

**Neck Triangles** 

Neck Fasciae

Deep neck spaces

The salivary glands

Temporal and infra temporal fossae

Muscles of facial expression

The cranial nerves

The trigeminal nerve (detail)

The facial nerve (detail)

Overview of the central nervous and spinal cord

Pterygopalatine fossa

Pharynx and larynx

#### **5-Oral Anatomy**

The mouth

The teeth

Floor of the mouth

Soft and hard palate

The nose

Para nasal sinuses

The orbital cavity contents (eye ball, muscles and nerves)

**TMJ** 

Muscles of mastication

#### **6-General Pathology**

Inflammation and infection

Wound healing

Degenerative changes

Connective tissue disease

#### 7-Oral Physiology

Saliva

Mastication and swallowing

Jaw reflexes

Oral mucosa

Oral general sensation and receptors

Taste and smell

#### 8-Oral Histology and embryology

Brachial arches and pouches

Tooth germs

Eruption

Tooth structure

#### 9-Pharmacology

Pharmacodynamics

Routes of administration

Absorption

Mechanisms of action

Interactions

Excretion

Antibiotics

Analgesics

I.V fluids

Anti-coagulants

Antifungal medications

Antiviral medications

Anticonvulsants

Antacids

# **Rotations**

#### 1- General surgery

Patient admission and discharge

Patient medical records

Vital signs

I.V fluids and electrolytes

Patient preparation for major surgery

Inpatient postoperative care

#### 2-Accident and emergency

Patient reception

Triage of patients; medical and surgical

Peripheral and central lines

Clinical signs of medical and surgical emergencies

Fluid and blood replacement

Investigations in the ER

Patient stabilization

Oral and maxillofacial emergencies

# Clinical Work with seniors at the maxillofacial clinic and hospital

History taking

Treatment planning

Assistant work in minor oral surgical procedures

Assistant work in theatres

Care of the in patient

# **Second year:**

# **Theoretical requirements:**

In addition to the topics required in the past year the following topics are required:

#### 1-Clinical medical sciences

Head and neck surgical anatomy

Oral and maxillofacial radiology

Principles of oral and maxillofacial surgery

Seminar in oral and maxillofacial surgery

Inpatients care

Out patients maxillofacial clinic

ICU oral and maxillofacial surgery

Seminar in oral and maxillofacial emergency

Oral and maxillofacial surgery surgical operations

# 2-Oral medicine topics

Orofacial pain

Recurrent aphthous stomatitis

Lichen planus

White patches, red patches

Mucocutaneous diseases

Oral infections; bacteria, viral and fungal

Oral pigmentation

Lip lesions

Trigeminal neuropathy

# 3- Management of maxillofacial emergencies

Trauma; principle of management

Ludwig's angina

Retro bulbar haemorrhage

# 4- Management of orofacial infections

Odontogenic infections

Non-Odontogenic orofacial infections

Osteomyelitis

Bone healing

# 5-Oral and maxillofacial radiology

Radiation physics Radiation biology

Hazards and protection

Advanced imaging techniques

Clinico-radiographic correlation

# 6-In patients and ICU care of oral and maxillofacial patients

# 7-Management of the critically ill patient

# 8-Minor oral surgery

Facial wounds closure
Impacted teeth
Incision and drainage of orofacial abscesses
Cervicofacial biopsy taking
Surgical excision of oral cystic lesions
Preprosthetic surgery
Surgical endodontics

### 9. Dental Implant

# Requirements of dental implants include,

- 1. Theory based on recommended books and updated articles through  $2^{nd}$  residency year through organized university- based lectures, which presented through Consultants of oral surgery, implantology and dental prosthodontics.
- 2. At least 25 completed dental implants cases including the prosthetic part.
- 3. Duration: one year, divided equally through (2nd, 3<sup>rd</sup> & 4<sup>th</sup> residency year). Dental implant modules is compatible with 300 credit CME hours.

# **Dental implant**

#### A. Theoretical requirement:

9 Modules through 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> year.

**B.** Clinical requirements: 25 cases

#### **Section One:**

Biology, Anatomy and Wound Healing in Implant Therapy.

#### **Objectives:**

- 1. Comprehend the evolution of root form implants in dentistry and its effect on today's clinical practice
- 2. Grasp the concept of Osseo integration as it relates to biology, biomaterials and biocompatibility
- 3. Understand how the shape, surface geometry and connection interface effects treatment choices
- 4. Be able to apply the knowledge of key aspects of Pharmacology as it relates to Safety and Implant Dental Patient Management
- 5. Learn the critical foundation of biology, anatomy and wound healing that are the key determinants of predictable success in implant surgery

#### **Lectures:**

Introduction to Osseo integration and Modern Implant Dentistry

Osseo integration, Biomechanics, Macro geometry and Micro geometry in Modern Implant Therapy

#### **Section Two:**

# Diagnosis, Treatment Planning and Documentation.

# **Objectives:**

- Learn to accurately evaluate the potential implant patient
- Learn the techniques to utilize photography to document and diagnose your patient as well as present treatment proposals

- Gain the ability to utilize CBCT to diagnose and virtually treatment plan your implant patient
- Learn how to set-up a successful treatment plan to meet your patient's objectives
- Understand how to avoid or minimize medico-legal dilemmas in your practice

#### **Lectures:**

- Key concepts of general Treatment Planning in Implant Dentistry
- Medical evaluation and systemic factors related to Implant Surgery
- Photography and Documentation
- CBCT in Diagnosis and Virtual Treatment Planning

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#### **Section Three:**

# General Implant Surgical / Prosthetic Principals & Therapy.

# **Objectives:**

- Learn the surgical principles and instruments utilized in implant therapy
- Learn flap design and management for conventional implant placement
- Be able to utilize the different suturing techniques and materials necessary to manage implant surgery
- Learn the restorative techniques and components to deliver a conventional fixed implant supported restorations
- Learn the occlusal factors that have to be harmonized to achieve a successful and maintainable biomechanical restoration

#### **Lectures:**

Surgical implant instrument and protocol for placing implants

Flap design and management

Suturing, Basic techniques in implant surgery

Prosthetic components & protocol for restoring implants

General provisionalization & impression taking

Occlusal consideration in implant therapy

Implant surgical and restorative phase demonstration.

Key diagnostic therapeutic factors in aesthetic implant dentistry

#### **Section Four:**

# Managing Emergencies, Complications & Long-term Maintenance in Implant Therapy.

# **Objectives:**

- 1. Understand the Medical and Dental emergency protocols encountered in implant therapy
- 2. Learn to manage surgical and restorative complications in implant therapy
- 3. Learn to identify, treat and manage peri-implantitis
- 4. Develop an understanding for developing a long-term maintenance program in your practice for the implant patient

#### **Lectures:**

- 5. Medical and dental emergency management
- 6. Peri implantitis management
- 7. Management of soft tissue complication
- 8. Management of restorative complication
- 9. Implant maintenance and follow up

#### **Section Five:**

# The Extraction Site in Implant Therapy.

# **Objectives:**

- 1. Understand the biology and characteristics of the extraction site
- 2. Identify the key diagnostic criteria in treating the extraction site
- 3. Diagnostic tools: CT imaging, surgical guides
- 4. Minimally invasive techniques
- 5. Extraction site preservation and augmentation
- 6.Immediate vs. staged implant placement
- 7. Orthodontic therapy for site development
- 8.Influence of implant design and components on aesthetic outcomes
- 9. Provisionalization technique
- 10. Restorative material selection

#### **Lectures:**

- 11.To save or extract tooth.
- 12. Biology and science of extraction site.
- 13. Extraction site management, delayed approach and material selection.
- 14.Immediate extraction and implant placement.
- 15. Design of implant and abutment connection.
- 16.Immediate placement and provisionlization /restorative and esthetic technique.
- 17. Role of orthodontics in extraction site management.
- 18. Partial extraction therapy.

#### **Section Six:**

# Soft Tissue Management: Grafting, Mucogingival & Restorative Considerations.

# **Objectives:**

- Understand the biology of wound healing as it relates to surgical soft tissue manipulation
- Learn how to treat muco-gingival defects around teeth and implants to gain attached tissue
- Soft tissue augmentation around implants
- Papilla preservation and regeneration around implants
- Learn how to perform Stage 2 uncovering to optimize peri-implant tissue dimensions

#### **Lectures:**

Soft tissue augmentation for teeth, pontics and teeth.

Combined cases: graft, soft tissue grafting in implant dentistry.

Pontic site management

Restorative consideration in managing soft tissue emergence profile.

#### **Section Seven:**

# The Posterior Maxilla in Implant Therapy.

# **Objectives:**

- Antaomy of posterior maxilla.
- Sinus augmentation.
- Sinus floor elevation, clinical and histolology view.
- Prevention and treatment of postoperative infection of sinus augmentation.
- Short implants / alternative for sinus augmentation.

#### **Lectures:**

Implants and the Fully Edentulous Patient

Understand the surgical and restorative techniques necessary to manage the fully edentulous implant patient

Understand the Science and Clinical aspects of immediate functional loading

Learn about over dentures and hybrid prosthesis

Learn what is available in CAD/CAM technology and how to apply it to the fully edentulous patient

Understand the principles of All-on-Four and how to treatment plan appropriate cases

#### **Section Eight:**

# Implants and the Fully Edentulous Patient.

# **Objectives:**

- Understand the surgical and restorative techniques necessary to manage the fully edentulous implant patient
- Understand the Science and Clinical aspects of immediate functional loading
- Learn about overdentures and hybrid prosthesis
- Learn what is available in CAD/CAM technology and how to apply it to the fully edentulous patient
- Understand the principles of All-on-Four and how to treatment plan appropriate cases

#### **Lectures:**

The basic for implants in edentulous patients.

Immediate loading.

Overdentures.

Zirconia based implant supported prosthetics.

Arch implant reconstruction.

Zygoma implants.

All on 4 implants.

#### **Section Nine:**

Advanced Therapies, Bone Augmentation, Growth Factors & Bioengineering.

# **Objectives:**

- 1. Learn the techniques available to manage narrow ridges
- 2. Understand the biology of bone as it relates to enhancement protocols
- 3. Learn how to design and manage flaps to achieve tension free closure of your surgical site
- 4. Learn how to augment bone vertically as well as horizontally
- 5. Gain incite in utilizing Titanium mesh and new bioactive modifiers to the healing sequence
- 6. Learn the characteristics of the different bone graft materials available
- 7. Learn alternatives to Bone Augmentation

#### **Lectures:**

Blood born modifiers.

Bone reconstruction.

Ridge splitting

Vertical bone augmentation

Interface development and prosthetic artificial gingiva as alternative of ridge augmentation.

Khoury technique

Advanced bone augmentation.

## Third year:

Seminar in oral medicine

Seminar in oral and maxillofacial surgery

Inpatients care

Oral and maxillofacial surgery out patient's clinic

ICU oral and maxillofacial surgery patients care

Oral and maxillofacial surgical operations

Oral and maxillofacial surgery emergencies

Oral pathology

Principle of medical research

### **Theoretical requirements:**

### **Oral medicine topics**

Inflammatory and autoimmune disorders of the oral mucosa

Pathology of tumours and tumour-like lesions of the oral mucosa

Pathology of oral cancer, pre cancer

Oral malignancy, diagnosis and management

Oral malignancy, oral complications of malignancy therapy

Oral soft tissue enlargements

#### Maxillofacial trauma

Soft tissue injuries

Dento alveolar fractures

Management of mandibular fractures

Management of mid-face fractures

Orbital trauma management

Frontal sinus and naso-orbito-ethmoid complex fractures

Paediatric consideration in maxillofacial trauma

### **Oral pathology**

Oral mucosa disease

Odontogenic cysts

Benign non-Odontogenic lesions

Oral cancer diagnosis and management

Vascular lesions management

### Salivary gland disorders

Salivary gland infection

Benign lesions of the glands

Malignant tumors

### **Orthognathic surgery**

Fundamentals of orthognathic surgery

Pre surgical orthodontics

Pre surgical planning

Cephalometric analysis

Wafer and model surgery

Computer assisted planning

Introduction to facial cosmetic surgery

## Fourth year:

Seminars in oral medicine

Seminars in oral and maxillofacial surgery

Inpatients care

Oral and maxillofacial surgery out patient's clinic

ICU oral and maxillofacial surgery patients care

Oral and maxillofacial surgery emergencies

Oral and maxillofacial surgical operations

Oral pathology

Biological statistics

#### **Theoretical requirements:**

#### Cleft lip and palate surgery

Primary surgery

Alveolar ridge bone grafting

**Primary Rhinoplasty** 

#### Local and regional flaps

Random flaps

Axial flaps

Lip reconstruction

Tongue flaps

Free tissue transfer; soft and hard

Free vascular flaps

#### Temporomandibular joint disorders

Arthrocentesis versus arthroscopy

Surgical management of internal derangement

TMJ ankylosis (soft or bony ankylosis)

Distraction osteogenesis

Identification and maxillofacial management of various syndromes affecting the jaws

#### **Orthognathic surgery**

Clinical and radiological assessment of skeletal deformities

Principles of mandibular and maxillary osteotomy

**BSSO** 

Le forte I

Wassmunds

Subapical

Management of facial asymmetry

Soft tissue consideration in orthognathic surgery

Craniofacial surgery

Facial cosmetic surgery: (Rhinoplasty, Otoplasty, Facelift)

### Laser in maxillofacial surgery

#### Photodynamic therapy in the management of head and neck cancer

#### **Oral cancer**

Epidemiology and presentation

Diagnosis and management

Surgical excision

**Neck dissections** 

Supra omohyoid, modified radical and radical

Radiotherapy and chemotherapy in the management of head and neck cancer

Cancer of the maxillary sinuses

Principles and management of gunshot injuries

Soft tissue reconstruction

Bone grafts and reconstruction

### Maxillofacial prosthesis

**Obturators** 

Eye prosthesis

Nose and ear reconstruction

Implant supported maxillofacial prosthesis

#### **Autogenous bone grafting**

Iliac crest graft.

Costochondral grafts.

Calavarial grafts.

### **Lectures core**

Topic Outline and Schedule:  $1^{st}$  and  $2^{nd}$  year

Title of Lecture	Subtitles
Admission procedures A & E protocol at JUH:	<ul> <li>Medication charts</li> <li>Surgical rounds and medication chart</li> <li>Discharge and follow up</li> </ul>
Principles of oral surgery:	<ul> <li>Principles of wound healing</li> <li>Suture materials and suturing techniques</li> <li>Flap designs development and management</li> </ul>
Management of impacted teeth I:	Indications and contra-indications for M3 removal.  - Classifications of impacted mandibular  - 3rd molars  - Principles of surgical techniques  - Perioperative patient management  - Complications and their management
Management of impacted teeth II:	- Impacted canines, supernumerary and others
Implant dentistry I:	<ul><li>Osseo integration</li><li>Bone biology</li><li>Principle of dental implant surgery</li></ul>
Endodontic surgery and pre prosthetic surgery:	Indications - Surgical technique - Materials
Oro facial infections I:	<ul><li>Etiology and microbiology</li><li>Pathophysiology</li><li>Anatomy</li></ul>
Title of Lecture	Subtitles

Orofacial infections II:	- Management
Jaw pathology I:	- Odontogenic and non odntogenic cysts
Jaw pathology II:	- Odontogenic and non odntogenic tumours
Cardiovascular disease and OMFS:	<ul><li>Hypertension</li><li>Ischemic heart disease</li><li>Cardiac disease</li><li>Medications</li></ul>
Endocrine disease and OMFS:	<ul><li>DM</li><li>Thyroid disease</li><li>Others</li></ul>
GIT disease and OMFS	<ul><li>IBD</li><li>Hepatobiliary disease</li></ul>
CNS/orthopaedic diseases:	<ul><li>Osteoarthritic diseases</li><li>Alzheimer's disease</li></ul>
Hematological diseases:	<ul><li>Anaemias</li><li>Leukemias</li><li>Thrombocytopenia</li></ul>
Other medical issues:	<ul><li>Pregnancy</li><li>Geriatric patients</li></ul>

3<sup>rd</sup> year Topic Outline and Schedule:

Title of Lecture	Subtitles
	- Implants in the aesthetic zone
Implant dentistry II:	- Bone substitutes
	- Advances in bone regeneration
	- Plain radiography to the OMFS
Advances in OMF	- CBCT/CT
Radiology	- MRI
	- US
	- Etiology and epidemiology
Oral & Maxillofacial	- Assessment and immediate
trauma I:	management
	- Principles of osteosynthesis
	- Soft tissue injuries:
Oral & Maxillofacial	- Abrasions, contusions and lacerations
trauma II:	- Dento alveolar injuries:
	- History & examination -
	Classification & Treatment - classification and causes
Oral & Maxillofacial trauma	- Signs and symptoms
III (mandible):	- Examination and radiological evaluation
	- Principles of osteosynthesis
	- Condylar fractures
Oral & Maxillofacial trauma	- Classification and causes
IV (mandible):	- Signs and symptoms
	- Examination and radiological
	evaluation
	- Principles of treatment
Title of Lecture	Subtitles

Oral & Maxillofacial trauma V (facial fractures):	<ul> <li>Maxillary fractures</li> <li>Zygomatic complex fractures</li> <li>Nasoethmoidal fractures</li> <li>Classification</li> <li>Assessment</li> </ul>
	- Treatment
Oral & Maxillofacial trauma	- Orbital fractures
VI (facial fractures):	- Classification
	- Assessment
	- Treatment
	- Diagnostic modalities
	- Infections
Salivary Glands diseases I:	- Obstructive salivary gland diseases
	- Mucous retention and extravasation
	cysts
	- Other salivary gland diseases
Facial Reconstruction I	- Principles of cosmetic Rhinoplasty
Salivary Glands diseases II:	- Benign salivary gland tumors
Sanvary Gianus diseases II.	- Malignant salivary gland tumors
	- Management
Management of TMJ	- Evaluation
disorders I:	- Classification of TMJ disorders
	- Reversible treatment
Management of TMJ	- TMJ arthrocentesis and arthroscopy
disorders II:	- TMJ ankylosis

## 4<sup>th</sup> year core

## **Topic Outline and Schedule:**

Title of Lecture	Subtitles		
Implant dentistry III:	- Atrophic jaws		
	- Etiology		
Oro facial deformity I:	- Classification		
·	- Examination and radiological evaluation		
	- Treatment planning		
	- Surgical techniques:		
Oro facial deformity II:	- Mandibular surgery		
	- Maxillary surgery		
	- Segmental surgery		
	- Complications		
Oro facial deformity III:	- Management		
	- Cleft lip and palate:		
Oro facial deformity IV:	- Etiology		
	- Types		
One feed defermates V.	- Management		
Oro facial deformity V:	- Oro-facial syndromes		
Facial reconstruction II	- Nasal reconstruction		
Oro facial deformity VI:	<ul><li>Regional flaps</li><li>Distraction ontogenesis and contemporary</li></ul>		
Old facial deformity VI.	treatment modalities		
	- Etiology		
Oral oncology I:	- Classification		
orar oneology 1.	- Staging		
	- Examination and radiological evaluation		
Oral oncology II:	- Oral squamous cell carcinoma (Surgery):		
	- Managing the primary site		
	- Managing the neck		
	- Complications		
Oral oncology III:	- Other malignancies affecting the oral		
	cavity		
	- Non-surgical management		

Log book		
Personal details:		
Full Name in Arabic:		
Full name in English:		
National number:		
Start date of your residency program:		
Your signature:		
Head of the Department:		
Signature & Stamp:	Date:	

**Training Posts Held** 

Post Number	Hospital	Residency Year	Start Date	Finish Date	Consultant signature

This form should only be signed by the consultant or trainer at the end of the post, provided that the trainee has finished the period of the training satisfactorily.

#### **Educational and Academic Activities**

Course	Date	Location	Course Director

Other activities, including CME hours:

**Summative evaluation:** 

5: excellent	4: very good	3: good	2: poor	1	: unac	ceptab	le
Cl	inical and technical skil	ls	5	4	3	2	1
Problem identi	fication						
Patient manage	ement						
Emergency tre	atment						
Procedure skil	s						
Descriptive eva	luation:			L			
Perso	nal and professional ma	turity	5	4	3	2	1
Punctuality							
<b>Emotional and</b>	professional maturity						
Relationship w	ith other medical person	nnel					
Appling ethica	principles in patient ca	ire					
Communicatio	n skills						
Descriptive eva	lluation:						
			5	4	3	2	1
Overall perform	nance						
Descriptive evaluation :							
Recommende	ed to sit for exam:		Yes		No		
If No, why:							

The resident eligibility for exam should include:
Overall evaluation should not be less than 3
Lack of any documented misconduct or unethical behavior
Supervisor name and signature
Program director signature
Chief of department name and signature

### **Procedure Log**

### **Clinical Requirement**

### Year One

Date	Case diagnosis	Procedure

# Assistant

\*Operator

### Head of Consultants Signature Overall results

### Procedure Log Clinical Requirement

Year Two

Date	Case diagnosis	Procedure

# Assistant

### \*Operator

#### Head of Consultants Signature Overall results

Procedure Log Clinical Requirement Year Three

Date	Case diagnosis	Procedure

# Assistant

### \*Operator

**Head of Consultants Signature** 

**Overall results** 

### **Procedure Log Clinical Requirement**

Year four	four			
	Date	Case diagnosis	Procedure	

#	^	SSi	01	Ł٨	10	+
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**Head of Consultants Signature** 

**Overall results** 

<sup>\*</sup>Operator

### Procedure Log Implant Surgery & Dental prosthetic Requirement

Date	Case diagnosis	Procedure	Prosthetics
Assistant	ı	1	<u>ı</u>

11	·
#	<b>Assistant</b>
#	ASSISTANT

**Head of Consultants Signature** 

**Overall results** 

<sup>\*</sup>Operator



# **Certified Transcript**

The director general of the	e Royal Medical Servi	ces, testifies that
MR Ms No		
Born in, was	s awarded the higher	specialization in
Oral maxillofacial surg	gery, with average	, rating
The following is the mark	s during his study.	
Course title	credit hours	s average
Ist year maxillofacial	12	
Residency		
2 <sup>nd</sup> year maxillofacial		
Residency	12	
3 <sup>rd</sup> year maxillofacial	12	
Residency		
4 <sup>th</sup> year maxillofacial	12	
Residency		
Amman in		The general director
		Sign and stamp

#### **Royal Medical Services**

The Directorate of medical training and Exam Council



## **Certificate**

In accordance with the Royal Medical Services regulation, and the results

of the examination held, the higher Medical Committee decide to award	
MR. MS	
Born in	
The higher specialization in oral and maxillofacial surgery	
With average, rating	
Amman on	
The director of dental and maxillofacial department,( sign and stamp).	

#### **Recommended readings**

#### 14.2 <u>E-Books</u>

- Cysts of the Oral and Maxillofacial Regions (Fourth Edition), Mervyn Shear and Paul Speight, 2007
- Burket's Oral Medicine Diagnosis and Treatment, Tenth Edition
- Oral Pathology 4th Ed. (2005), 1 V. Soames and J. C. Southam
- Peterson 's Principles of Oral and Maxillofacial Surgery, Second Edition,
- 2004
- Approaches to facial skeleton, E Ellis III and Michael L Zide
- Atlas of Minor Oral\_Surgery principles and practice, II Edition, David A Mc Gowan
- Color Atlas of Dental Medicine Radiology, Freidrich A Pasler. Drug
- Dictionary for Dentistry, J.G. Meechan and RA. Seymour Essential
- Microbiology for Dentistry Samaranayake 2006
- Essentials of Orthognathic Surgery- Reyneke
- Essentials of Oral Medicine silverman
- Handbook of Oral disease /Diagnosis and Management C. Scully Key
- Topics in Human Diseases for Dental Students, C. Scully Introducing
- Dental implants Hobkirk, Watson, Searson
- Lasers in Maxillofacial Surgery and Dentistry Lewis Clayman, Paul Kuo
- Master dentistry: Oral and Maxillofacial Surgery, Radiology, Pathology and Oral

Medicine - Paul Coulthard, Keith Homer , Philip Sloan, Elizabeth D. Theaker

#### Oral medicine .Update for the dental practitioner, BDJ

- Oral Pathology, Clinical Pathologic Correlations -Regezi, Sciubba, Jordan
- Oral Surgery, Fragiskos D. Fragiskos
- Oxford Handbook of Dental Patient Care C. Scully, Athanasios Kalantzis
- Panoramic Radiology, Allan G. Farman
- Peadiatric Oral and Maxillofacial Surgery Kaban, Troullis
- Principles of Oral and Maxillofacial Surgery —Moore Slootweg
- Dental Pathology-A Practical Introduction
- Surgical anatomy of Infratemporal fossa, Langdon, Berkovitz, Moxham Atlas of the Oral and Maxillofacial

- Oral and Maxillofacial Surgery Clinics of North America Volume 20, Issue 2 (May 2008), Orofacial Pain and Dysfunction
- Color Atlas of Clinical Oral Pathology, 2nd Edition
- Color Atlas of Temporomandibular Joint Surgery, Peter D Quinn

#### 15.3 Journals

- O International journal of oral & maxillofacial surgery
- The British journal of oral & maxillofacial surgery
- Journal of cranio-maxillo-facial surgery o Journal of oral and maxillofacial surgery o Oral surgery, oral medicine, oral pathology, oral radiology and endodonticsJournal of oral and maxillofacial pathology
- Color atlas of oral of oral pathology, John W. Eveson
- Oral medicine, Philip-John Lamey
- Atlas of oral and maxillofacial pathology, Joseph A. Regezi
- Oral diseases, Crispian Scully
- Oral and maxillofacial secrets, A. Oman Abubaker
- Diseases of the oral mucosa and the lips, Konrad Bork
- Oral and maxillofacial surgery: an objective-based textbook, Jonathan Pedlar
- Oral and maxillofacial pathology, Brad W. Neville
- Oral and maxillofacial infections, Richard G. Topazian Manual of temporomandibular disorders, Edward F. Wright Antibiotic/ antimicrobial use in dental practice, Michael G. Newman Oral Cancer, Jatin P. Shah
- Minor surgery in orthodontics, Jean-Paul Schatz
- Pediatric oral and maxillofacial surgery, Leonard B. Kaban Complications in oral and maxillofacial surgery, Leonard B. Kaban Oral and maxillofacial surgery, Raymond J. F

- Peterson's principles of oral and maxillofacial surgery, Michael Miloro
- Oral and Maxillofacial Pathology Marx o Oral Development and Histology, 3rd Edition- Thieme, James K Avery.



# **Certified Transcript**

The director general of the Royal Medical Services, testifies that

MR, Ms No			
Born in, was	awarded the high	ner specialization in	
Oral maxillofacial surg	ery, with average	, rating	
The following is the marks	during his study.		
Course title	credit ho	<b>DUTS</b> averag	e
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Residency			
2 <sup>nd</sup> year maxillofacial			
Residency	12		
3 <sup>rd</sup> year maxillofacial	12		
Residency			
4 <sup>th</sup> year maxillofacial	12		
Residency			
Amman in		The general director	
		Sign and stamp	

#### **Royal Medical Services**

The Directorate of medical training and Exam Council



## **Certificate**

In accordance with the Royal Medical Services regulation, and the results
of the examination held , the higher $$ Medical Committee decide to award $$
MR MS
Born in
The higher specialization in oral and maxillofacial surgery
With average, rating
Amman on
The director of dental and maxillofacial department,( sign and stamp).