

Mapping of Pediatric Dentistry Curricular Competencies with Assessment Tools

This outline maps curricular competencies\objectives with the assessment tools and potential test type. Tests will emphasize certain parts of the outline, and no single test will include questions on all aspects. Questions may include content that is not included in this outline.

							Learning Domain		Assessmer	nt Method		
Construct	Domain	Rotation	Year	Code	Performance indicator (Curriculum)	Page #	(1:Cognitive , 2:Skills, 3:Attitude)	MCQ - Part I Written	MCQ - Final Written	OSCE - Final Clinical	SOE - Final Clinical	
ı. Medical Expert	A1. Basic science	Practice pediatric dentistry within their defined scope of practice and expertise	All	A1.1	1.1 Advanced Oral Biology 1.1.1 Describe selected topics in oral biology relevant to oral structures, functions, and developmental abnormalities. 1.1.2 List the saliwary glands and describe the properties of secretion, and functions of saliva. 1.1.3 Explain the structure of connective and mineralized tissues (collagen and bone). 1.1.4 Explain the relationship between the above topics and the host response to systemic and environmental influences.	20	1					
				A1.2	1.2 Oral Medicine/Diagnosis 1.2.1 Describe the epidemiology (e.g., prevalence and severity) of oral diseases that are encountered in infants and children through adolescence, including those with special health care needs.	21	1	*	*		*	
				A1.3	1.3 Oral Pathology 1.3.1 Describe the etiology and pathogenesis of oral and paraoral diseases in infants, children, and adults.	21	1		*		*	
				A1.4	1.4 Craniofacial Development and Growth 1.4.1 List the theories of normal dentofacial growth mechanisms.	21	1	*	*		*	
				A1.5	1.5 Applied Head and Neck Anatomy 1.5.1 Describe the anatomy and structure of the neck. 1.5.2 Describe the anatomy of the structures involved in the special senses, such as the nasal cavities (smell), and tongue (taste). 1.5.3 Describe the soft fissue structures of the oral cavity (e.g., tongue, palate, pharynx, larynx, submandibular and pterygopalatine regions) as observed in the bisected head. 1.5.4 List the structure and function of the cranial nerves. Explain their direct and indirect associations with the brainstem, and how these are relevant when performing a neurological examination.	22	1	*				
				A1.6	1.6 Oral Microbiology and Immunology 1.6.1 Explain immunity to viruses, bacteria, fungi, protozoa, worms, and tumors, as well as the host cells involved in the immune response. 1.6.2 Describe the role of oral bacteria in the development of human dental plaque. 1.6.3 List the current theories of caries formation. 1.6.4 Describe the role of oral bacteria in periodontal disease, and the host immune response. 1.6.5 List the microbiological causes of blood-borne dental infections (e.g., hepatitis B, C or human immunodeficiency viruses) and their major clinical manifestations.	22	1	*				
				A1.7	1.7 Infection Control Guidelines 1.7.1 Describe the pathological and immunological basis of infectious disease. 1.7.2 Explain the methods of transmission	22	1	*				
					A1.8	1.8 Pharmacology 1.8.1 Describe agents commonly used to treat oral and systemic diseases. 1.8.2 List the indications, contraindications, and potential adverse reactions of medications used.	23	1		*		*
						A1.9	1.10. Child Psychological Development and Behavior Guidance 1.10. Recognize the most accepted theories, including psychodynamic theory (e.g., Erikson, Freud), learning theories, biological-genetic theory, and Piaget's theory, 1.10.2 Describe the multidimensional nature of child development, including physical development, social development, intellectual development (e.g., Alfred Binet, Jean Piaget), and personality development. 1.10.3 Describe the behavioral characteristics of a normal child during the various stages of growth and development. 1.10.4 Describe the different behavior guidance techniques used to modify a child's behavior.	23-24	1	*	*	
				A1.10	1.12 Oral Epidemiology in Saudi Arabia (Junior: practicing skill under supervision) 1.12.1 Explain the principles and methods of oral epidemiology, as well as the distribution and determinants of oral diseases in SA. 1.12.2 List the etiological agents, host factors, and environmental factors that have been investigated for their association with oral diseases in published epidemiological studies conducted among children in SA, and describe the statistical measures.	24	1		*		*	
				A1.11	1.13 Nitrous Oxide-Oxygenanalgesia/anxiolysis (Junior: practicing skill under supervision) 1.13.3 Identify the indications and contraindications, as well as advantages and disadvantages of inhalation. Describe basic of N2O pharmacology, mode of action, effect, equipment, special infection control. 1.13.5 Describe the administration technique, and its limitations.	24	1	*	*		*	
				A1.12	1.13 Nitrous Oxide-Oxygenanalgesia/anxiolysis (Junior: practicing skill under supervision) 1.13,5 Describe the administration technique of inhalational anestesia, and its limitations. For Skill Part II +OSCE+SOE	24	1		*			
				A1.13	1.14 Moderate Sedation - (Oral and Parenteral Sedation) (Junior and Senior: practicing skill under supervision) 1.14.1 Recognize indications and contraindications of moderate sedation. 1.14.2 Discuss the different types of drugs used in oral and parenteral sedation. Describe mode of action, route of administration, doses, drug metabolism, drug interaction.	25	1		*		*	
				A1.14	1.16 Dental Biomaterials 1.16.1 Describe different types of dental materials used in pediatric patients, such as cements, glass isonomer, composite, stainless steel crowns, and esthetic crowns. 1.16.2 Describe physical and chemical properties of different toothcolored restorative materials and their manipulation.	26	1	*	*		*	

A1.15	1.19 Clinical Photography					
ALIS	1.19 Limical Priotography 1.19.2 Describe a systematic and new approach for clinical photography. 1.19.2 Describe the types of cameras and the complete range of materials that are available and required for obtaining additional intra-oral pictures.	27	1	*		
A1.16	1.21 Advanced Oral and Maxillofacial Radiology 1.21.1 Describe the key principles of radiation physics, radiation biology, advanced imaging techniques, and diagnostic oral radiology.	27	1	*	*	*
A1.17	1.24 Genetics (Junior: practicing skill under supervision) 1.24.1 Describe the basics of genetics, including gene and chromosome structure and function, protein synthesis, hereditary traits in families, different types of inheritance, variation in gene expression, and genetic aspects of the most common dental diseases/syndromes.	27	1		*	*
A1.18	2.3 Anomalies of the Developing Dentition 2.3.1 Describe the various stages of tooth development. 2.3.2 Identify anomalies that result in disturbances at each stage of tooth development. 2.3.3 Define and describe the various terminologies related to anomalies of the developing dentition. 2.3.11 Discuss the various theories of tooth eruption.	30-31	1	*	*	*
A1.19	2.4 Dental Caries in the Child and Adolescent 2.4.2 Etiology of dental caries. 2.4.3 Caries prevalence in preschool children. 2.4.4 Caries prevalence in schoolchildren. 2.4.5 Define rampant dental caries. 2.4.5 Define ECC, severe ECC. 2.4.7 Describe additional factors known to influence dental caries.	31	1	*	*	*
A1.20	2.5 Restorative Dentistry 2.5.1 Define the concept of minimal intervention. 2.5.6 List limitations of amalgam, composite resin materials, and glass ionomer cements. 2.5.7 Describe the composition of resin-modified glass ionomer cements and polyacid-modified composite resin materials, and differences in their properties. 2.5.11 List the advantages and disadvantages of calcium hydroxide as a base material.	31-32	1	*		*
A1.21	2.5 Restorative Dentistry 2.5.2 List the recent approaches for the proper maintenance (e.g., application of bonding agents) of pits and fissures. 2.5.3 Discuss the significance of microleakage and the importance of proper cavity sealing. 2.5.4 List difficulties in bonding to primary enamel and dentin. 2.5.5 Mention common errors in class I and class I amalgam restorations in primary molars. 2.5.8 Discuss the use of caries detecting dyes. 2.5.9 List the advantages and disadvantages of micro air abrasion. 2.5.10 Describe the atraumatic/laternative restorative treatment (ART) approach, and differentiate it from the use of interim therapeutic restorations (ITR).	31-32	1	*	*	*
A1.22	2.6 Plt and Fissure Sealants and Preventive Resin Restorations 2.6.1 Define fissure sealant and preventive resin restoration. 2.6.2 Explain the principles of fissure sealant application and preventive resin restoration. 2.6.3 Identify common errors with fissure sealant application and preventive resin restoration. 2.6.5 Identify the rationale and indications for fissure sealants and preventive resin restorations.	32	1	*	*	y.
A1.23	2.7 Dental Materials 2.7.1 Describe the different types of bases and liners and cavity Vamish 2.7.2 Describe impression materials (physical properties and types of impression material 2.7.2 Glassify dentin-bonding agents. 2.7.4 Discuss the physical, chemical, and mechanical properties of 2.7 Dental Materials 2.7.1 Describe the different types of bases and liners. 2.7.2 Describe cavity vamishes. 2.7.3 Classify dentin-bonding agents. 2.7.4 Discuss the physical, chemical, and mechanical properties of restorative materials, and differentiate between different restorative materials and their handling techniques. 2.7.5 Classify dental cements and list the uses of each type of cement.	32-33	1	*	*	*
A1.24	2.10 Local Anesthesia and Pain Control for the Child and Adolescent 2.10.1 Explain the principles of pain theory. 2.10.4 Describe the advantages of vasoconstrictors.	34-35	1	*	*	,
A1.25	2.11 Nonpharmacologic Management of Children's Behaviors 2.11.1 Describe the stages of child psychological development. 2.11.2 List developmental milestones and the characteristics of each milestone. 2.11.3 Describe the general classification of intellectual development. 2.11.4 Identify theories of development. 2.11.5 Classify children's behavior.	35	1	*	*	я
A1.26	2.14 Eruption of the Teeth: Local, Systemic, and Congenital Factors that Influence the Process 2.14.1 Explain the chronologic development and eruption of the teeth. 2.14.1.2 List variations in the sequence of eruption. 2.14.1.2 Describe teething 2.14.4 Define natal and neonatal teeth. 2.14.6 List the local and systemic factors that influence eruption.	37	1	*	*	d
A1.27	2.15, Managing the Developing Occlusion 2.15, 10 Bescribe the occlusion in the developing child. 2.15, 2 Classify different occlusal components in the primary and mixed dentition stages. (Space Management) (Junior: practicing skill under supervision) 2.15, 4 List the different types of space maintainers. 2.15, 14 List the different types of space maintainers. 2.15, 7 Recognize indications, contraindications, advantages, and disadvantages of space maintainers. 2.15, 9 List factors which influence the development of malocclusion. (Oral habits) (Junior: practicing skill under supervision) 2.15, 12 Recognize the different types of oral habits. 2.15, 13 Describe the effects of each habit on occlusion.	37-38	1	*	*	*

			A1.28	2.16 Dental Problems of CSHCN (Junior: practicing skill under supervision) 2.16.1 Define CSHCN and describe the barriers they have to dental care.	38	1	*	*		*
			A1.29	2.18 Management of Trauma to the Teeth and Supporting Tissues (Junior: practicing skill under supervision) 2.18.1 Describe the basic epidemiology of traumatic injuries, and their etiology, predisposing factors, and prevention.	39	1	*	*		*
			A1.30	3-51 Describe some of the new modalities that have become available to the dental profession, and explain how they may be advantageous compared to conventional modalities for orthodontic treatment. 3-52 Recognize the causes of maxillary permanent canine impaction (including hard tissue obstructions, soft tissue lesions, and anomalies of neighboring teeth), and discuss its controversial relationship with environmental and genetic factors. 3-53 Discuss the extent and rate of physiological tooth migration and the mechanism which determines the development of occlusion. 3-54 Describe three different biologic mechanisms for the development of occlusion. 3-56 Describe the changes in the molar relationship from the primary dentition to the permanent dentition.	46	1		*		*
			A1.31	3.62 Describe the available evidence regarding orthodontics as an adjunct to post-oral trauma treatment for permanent teeth. 3.65 Examine the theories of cranifocatal growth and development in the context of diagnosis and treatment planning of an orthodontic patient.	47	1	*	*		*
			A1.32	Restorative Dentistry (Junior: practicing skill under supervision) 3.67 Recognize materials used in restorative dentistry. 3.68 Describe the selection of materials and appropriate techniques for infant, children, adolescents, and patients with special health care needs. 3.69 Identify the indications, efficacy, and safety of internal and external bleaching of primary and young permanent teeth. 3.70 Recognize the importance of incorporating restorative care into a comprehensive treatment plan. 3.71 Explain how phentolamine mesylate may be used to reverse soft tissue local anesthesia. 3.72 Recognize the judicious use of lasers as a beneficial instrument in the provision of dental restorative and soft tissue procedures for infants, children, and adolescents, including those with CSHCN.		1		*		*
			A1.33	4.1 Morphology of Primary Teeth: Timing, Sequence, Morphological Differences, and Clinical Significance 4.1.1 Describe the importance of primary teeth. 4.1.2 Identify the general morphological features of primary teeth. 4.1.2 Identify the general morphological differences between primary and permanent teeth. 4.1.2 Describe the morphological differences between primary and permanent teeth. 4.1.4 Describe the different tooth numbering systems. 4.1.5 Differentiate the anatomical features of primary and permanent teeth, and describe how these relate to differences in cavity preparation. 4.1.6 Differentiate the anatomical features of primary and permanent teeth, and explain their clinical significance. 4.1.7 Apply tooth numbering systems on primary and permanent teeth. (Skill)	49	1	*			
			A1.34	4.2 Rubber Dam Application 4.2.1 List the advantages of rubber dam application. 4.2.1 Explain the indications/contraindications for rubber dam application. 4.2.3 Identify the rubber dam armamentarium. 4.2.4 Describe the clinical steps of rubber dam application.	49	1	*	*	*	ŵ
			A1.35	4.3 Glossary of Restorative Terminology 4.3.1 Define: axial wall, cavosurface angle, dovetail, isthmus, line angle, point angle, proximal box, pulpal wall, pulpotomy, resistance form, restoration.	49	1	*			
	Pediatric Medicine	Junior	A1.38 A1.39 A1.40 A1.41 A1.42	Describe childhood infections, infectious diseases, and immunization. List metabolic disorders associated with bone lesions and defects in skull ossification. Describe immunodeficiency diseases and allergic disorders. Describe diseases of the blood in children. Outline Gl diseases Describe hepatic diseases. Describe renal diseases (pediatric nephrology). Recognize disorders of the endocrine system.	62 62 62 63 63 63 63	1 1 1 1 1 1 1	*	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *
	Children with Craniofacial	Senior		Describe neurological diseases, including perinatally acquired cerebral lesions and neuromuscular disease. Understand the embryology, anatomy, physiology and pathophysiology of craniofacial	63	1	*	*	*	*
A2. Assessment & Diagnosis	anomalies and/or Cleft Lip and Palate	All	A2.1	abnormalities including cleft lip and palate and the terminology used in their description 1.2 Oral Medicine/Diagnosis 1.2.2 Describe oral diseases of the hard and soft tissues, which are encountered in infants and children through adolescence, including those with special health care needs.	66					
	within their defined scope of practice and expertise			Lia2, Describe oral and perioral lesions, as well as soft and hard tissue disorders and anomalies in infants, children, adolescents and pediatric patients with special health care needs.	21	1+2		*		*
			A2.2	1.4 Craniofacial Development and Growth 1.4.2 Describe the principles of diagnosis of normal and abnormal dentofacial growth and development. 1.4.3 Describe the differential classification of skeletal and dental malocclusion in children and adolescents.	21	1	*	*		*
			A2.3	1.13 Hirrous Oxide-Oxygenanalgesia/anxiolysis (Junior: practicing skill under supervision) 1.13.2 Identify the complications that could occur 1.14 Moderate Sedation - (Oral and Parenteral Sedation) (Junior and Senior: practicing skill under supervision) 1.14.3 State appropriate monitoring techniques and requirements for patients undergoing moderate sedation. 1.14.4 Explain the necessity for a baseline assessment, as well as frequent monitoring of patients during moderate sedation.	24	1+2	*	*	*	*
			A2.5	1.77 Orthodontic Appliances (Junior: practicing skill under supervision) 1.73.14 (lentify anterior and posterior inter-arch discrepancies. 1.73.2 Recognize the implications of arch length and occlusal discrepancies. 1.73.3 Describe the use of space analysis to diagnose space discrepancies, and methods for managing them. 1.74.7 Diagnose minor irregularities in the developing dentition. 1.75.5 Explain interceptive orthodontics.	26	1+2		*	*	*

A2.6	1.19 Clinical Photography 1.19.3 Explain visual data.	27	1+2	*			
A2.7	Module 2: Specialty Topics (Book Review) 3. Identify the common dental defects found in children.		1	*	*		*
A2.8	2.3 Anomalies of the Developing Dentition 2.3.4 Describe chronologic enamel hypoplasia and its etiology. 2.3.5 Describe briefly various types of amelogenesis imperfecta. 2.3.6 Describe briefly various genetic and inherited conditions which manifest as generalized enamel dysplasia. 2.3.7 Describe various types of dentine defects. 2.3.8 List various systemic and inherited conditions that may also manifest as generalized dentine defects. 2.3.9 Describe various types of cemental defects. 2.3.9 Describe various systemic and inherited conditions that may also manifest as generalized dentine defects. 2.3.10 Recognize various systemic and inherited conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions that may also manifest as descentilizations and the conditions and the conditions are conditions and the conditions and the conditions are conditions and the conditions and the conditions are conditions and conditions are conditions are conditions	30-31	1+2		*	*	*
	2.4.8 Early detection of disease activity. 2.4.9 Prediction of patients' risk for future disease (risk assessment). 2.4.10 Describe the control of dental caries. 2.4.11 Describe diagnostic tools.	31	1+2	*	*		*
A2.10	2.9 Gingivitis and Periodontal Disease (Junior: practicing skill under supervision) 2.9.1 Describe the characteristics of healthy periodontium in children, and contrast these with features observed in adults. 2.9.2 Classify the different periodontal conditions in children. 2.9.3 Distinguish abnormal from physiologically normal features of the gingival and periodontal tissues. 2.9.4 Identify different etiological causes and underlying risk factors of common oral and gingival diseases. 2.9.5 Recognize clinical characteristics of the common oral and gingival diseases in children. 2.9.6 Objectively diagnose druginduced gingival enlargement in children. 2.9.7 Recognize systemic disorders associated with periodontal diseases in children.	34	1+2		*		*
A2.11	2.10 Local Anesthesia and Pain Control for the Child and Adolescent 2.10.2 Describe pain assessment and the use of accepted pain scales.2.10.3 List the types of topical anesthetics, and their composition, concentration, and maximum recommended dose. 2.10.6 Recognize the complications of local anesthesia in a child patient and how to manage them.	34-35	1+2	*	*	*	*
A2.12	2.14 Eruption of the Teeth: Local, Systemic, and Congenital Factors that Influence the Process 2.14.1.1 Describe the effect of the premature loss of primary molars on the eruption time of their successors. 2.14.2 Describe the lingual eruption of the mandibular permanent incisors. 2.14.3 Describe difficult eruption. 2.14.5 Describe Epstein pearls, Bohn's nodules, and dental lamina cysts.	37	1+2		*		*
A2.13	2.15 Managing the Developing Occlusion (Space Management) (Junior: practicing skill under supervision) 2.15,3 Assess the need for placing a space maintainer. 2.15,5 Identify the indications for each type of Space maintainer. 2.15,6 Identify causes and effects of space loss in the primary and mixed dentition. 2.15,6 Identify causes and effects of space loss in the primary and mixed dentition. 2.15,6 Identify be the design and placement of different space maintainers. 2.15,10 Excito the design and placement of different space maintainers. 2.15,11 List the consequences of the improper placement or fabrication of space maintainers. (Oral habits) (Junior: practicing skill under supervision) 2.15,15 Diagnose each habit.	37-38	1+2		*		*
A2.14	2.16 Dental Problems of CSHCN (Junior: practicing skill under supervision) 2.16.2 Describe common oral problems in these children. 2.16.5 Describe and interpret the dental findings in these children.	38	1+2		*		*
A2.15	2.18 Management of Trauma to the Teeth and Supporting Tissues (Junior: practicing skill under supervision) 2.18.2 Explain methods for the examination and diagnosis of the traumatized patient. 2.18.3 List the various classifications of traumatic dental injuries.	39	1+2	*	*	*	*
A2.16	2.19 Tumors of the Oral Soft Tissues and Cysts and Tumors of Bone (Junior: practicing skill under supervision) 2.19.1 Identify various dental and oral anomalies in pediatric patients. 2.19.2 Differentiate common oral lesions and infections in children. 2.19.3 List common oral lesions and infections in children.	40	1+2	*	*		*
A2.17	2.22 Medical Emergencies (Junior: practicing skill under supervision) 2.22.1.1 History and physical examination. 2.22.1.3 Patient monitoring. 2.22.2 Describe how to prepare for emergencies. 2.22.2.1 Personal preparation. 2.22.2.3 Backup medical assistance. 2.22.2.4 Office preparation.	41	1+2+3		*	*	*
A2.18	Module 3: Scientific, Evidence-Based Dentistry (Journal Club) A reading list will be provided before the module 1. Describe the prediction and evaluation of the changes that occur during the dynamic development of the pediatric dental arch. 2. Describe the location of permanent canine impaction. 3. Describe the diagnosis of the ectopic eruption of permanent teeth.	42	1+2		*		*

A2.19	Diagnosis and Treatment Planning (Junior: practicing skill under supervision)						
	3.3 Identify different methods of caries lesion detection, including the evaluation of caries lesion severity. 3.4 Describe the use of indices, such as the International Caries Detection and Assessment System (ICDAS) and its role in caries diagnosis. 3.5 Assess the diagnostic ability of visual inspection, film, charge coupled device sensors, phosphor storage plate sensors, and cone-beam CT in the detection of proximal caries in posterior teeth, in comparison with the histological gold standard. 3.6 Describe the diagnostic accuracy of different imaging modalities in the detection of proximal caries. 3.7 Evaluate the practices and attitudes of pediatric dentists regarding weight-and caries-related counseling. 3.8 Identify the primary barriers to weightrelated counseling cited by pediatric dentists. 3.9 Assess the relationship between the consumption of 100% fruit juice and caries among U.S. preschool children, adjusting for sociodemographic characteristics. 3.10 Identify updated evidence demonstrating the association between caries prevalence and sociodemographic factors (poverty level, race/ethnicity) among U.S. children. 3.11 Recognize that caries-risk assessment and management protocols can assist clinicians with decisions regarding treatment. 3.12 Explain the Caries Assessment Tool and its application. 3.15 Define speech and language. 3.14 Describe speech and language problems in children. 3.15 Define gastroesophageal reflux disease (CERD) and know its manifestations. 3.16 Analyze the association of GERD, as well as other potential factors, with dental erosion experience in children.	42-43	1+2	·	·		
A2.20	3.17 Recognize that ging/wal inflammation is a clinical manifestation of the most ommon infectious disease in children. 3.18 Describe key characteristics of chronic inflammation in ging/wal tissues of children and adolescents. 3.19 Summarize the sources of mutans streptococci (MS) colonization in children, and the effect of MS levels in primary caregivers. 3.20 Evaluate studies which have investigated the effectiveness of interventions in reducing the transmission of MS from caregivers to their children. 3.21 Describe salivary Streptococcus mutans as a predictive variable for caries progression. 3.22 Differentiate the sensitivity, specificity, and likelihood ratios of a very high (too numerous to count) MS test result.	43-44	1+2		*	*	*
A2.21	Growth and Development and Orthodontics (Junior: practicing skill under supervision) 3-49 Elucidate patterns of association among seven types of dental anomalies (aplasia of second premolars, microdontia of maxillary lateral incisors, infraocclusion of primary molars, enamel hypoplasia, ectopic eruption of first molars, supernumerary teeth, and palatal displacement of maxillary canines) in an untreated orthodontic population. 3-50 Describe how to use a version of the Cervical Vertebral Maturation (CVM) method for the detection of the peak in mandibular growth, based on the analysis of the second through fourth cervical vertebrae in a single cephalogram.	45	1+2		*	*	*
A2.22	3.55 Review the clinical and radiographic diagnoses of impacted maxillary canines, as well as the interceptive treatment used to prevent or properly treat this condition. 3.57 Explain how changes in intercanine and intermolar widths, as well as changes in maxillary and mandibular arch lengths, may be evaluated on a longitudinal basis over a 45-year span. 3.58 Describe the implant method as applied to the maxilla; examine the general pattern of maxillary growth in the lateral view; report the results of an analysis of the sutural growth of the upper face in the sagittal plane, and illustrate the graphical method employed. 3.59 Examine the health effects and effectiveness of very long-term retention after orthodonic treatment. 3.60 Analyze the effect of extracting the primary maxillary canine on the palatal eruption of the permanent maxillary canine in young individuals. 3.61 Describe the effect of extracting the primary molars on the formation and eruption of their successors.	46	1+2				*
A2.23	3.63 Examine the theories of craniofacial growth and development in the context of diagnosis and treatment planning of an orthodontic patient.	47	2		*	*	*
A2.24	Module 4: Pre-Clinical 1. Describe the principles of cavity preparation design in primary teeth. 2. Apply the principles of rubber dam application by properly placing a rubber dam for restorative procedures. 3. Apply the general principles of cavity design for various classes of caries in primary teeth by preparing and restoring teeth on a typodont. This includes knowledge of the matrix system, as well as amalgam and composite resin manipulation. 4. Utilize the sealant system as a preventive measure against caries. 5. Apply the principles of crown preparation by preparing teeth and fitting stainless steel crowns on a typodont. 6. Apply the principles involved in performing a pulpotom 7. Compute an arch length analysis for a simulation case and correlate the information obtained with various other diagnostic data to conclude the need for space maintenance and orthodontic treatment. 8. Predict possible crowding problems and utilize a space maintainer as a preventive measure against Class I malocclusion.	48-49	1+2				*
A2.25	4-5 Class I Cavity Preparation 4-5.1 Define Class I cavity preparation. 4-5.2 Explain the principles of Class I cavity preparation for amalgam restorations in primary teeth. 4-5.2 Describe the clinical steps of Class I cavity preparation for amalgam restorations in primary teeth. 4-5.4 Identify the modifications in Class I cavity preparation that are required in cases of anatomical variation in primary teeth. 4-5.5 Perform Class I cavity preparations and restorations in primary teeth. (Skill)	50	1+2	*	*	*	*

			A2.26	4.6 Class II Cavity Preparation						
				4.6.1 Describe the prevalence of proximal caries.						
				4.6.2 Define Class II cavity preparation.						
				4.6.3 Explain the principles of Class II cavity preparation for amalgam restorations in primary						
				teeth.						
				4.6.4 Identify common errors with Class II cavity preparation for amalgam restorations in primary teeth.						
				4.6.5 Describe the clinical steps of Class II cavity preparation for amalgam restorations in	50	1	*	*	*	*
				primary teeth.						
				4.6.6 Identify the modifications in Class II cavity preparation that are required in cases of						
				anatomical variation in primary teeth.						
				4.6.7 Perform Class II cavity preparations and restorations in primary teeth. (Skill)						
			A2.27	4.7 Class III Cavity Preparation				-		
			A2.2/	4.7.1 Describe the structural anatomy of anterior teeth.						
				4.7.2 Identify the different types of Class III cavity preparation.						
				4.7.3 Explain the contraindications for Class III cavity preparation in primary teeth.						
				4.7.4 Define Class III cavity preparation.						
				4.7.5 Explain the principles of Class III cavity preparation in primary teeth.						
				4.7.6 Identify common errors with Class III cavity preparation in primary teeth.	51	1+2	*	*	*	*
				4.7.7 Describe the clinical steps of Class III cavity preparation in primary teeth.						
				4.7.8 Identify the modifications in Class III cavity preparation that are required due to the anatomic variation of primary teeth.						
				4.7.9 Perform Class III cavity preparations in primary teeth. (Skill)						
				4.7.91 enorm class in cavity preparations in primary teetin (Skiii)						
			A2.28	4.9 Celluloid Crown Preparation						
				4.9.1 Define celluloid crown restoration.						
				4.9.2 Explain the principles of celluloid crown preparation in primary teeth.						
				4.9.3 Identify common errors with celluloid crown preparation in primary teeth. 4.9.4 Describe the clinical steps of celluloid crown preparation in primary teeth.	51	1+2	*	*	*	*
				4.9.5 Perform celluloid crown preparations in primary teeth. (Skill)						
				1.7.5. E. E. E. Comono et orrir preparations in printary teethic (Skiii)						
			_	Lucia No. 10 a. d.				-		
			A2.29	4.10 Class V Cavity Preparation 4.10.1 Describe ECC (bottle caries).						
				4.10.2 Differentiate between minimum and maximum Class V cavity preparations. 4.10.3 Define Class V cavity preparation.						
				4.10.3 Define Class V cavity preparation. 4.10.4 Explain the principles of Class V cavity preparation in primary teeth.						
				4.10.5 Identify common errors with Class V cavity preparation in primary teeth.						
				4.10.6 Describe the clinical steps of Class V cavity preparation in primary teeth.	51-52	1+2	*	*	*	*
				4.10.7 Identify the modifications in Class V cavity preparation that are required due to the						
				anatomic variation of primary teeth.						
				4.10.8 Perform Class V cavity preparations in primary teeth. (Skill)						
	Pediatric Medicine	Junior	A2.30	Describe immunodeficiency diseases and allergic disorders.	62	1		*		*
			A2.31	List cardiovascular system abnormalities and diseases.	62	1		*		*
			A2.32	Describe diseases of the blood in children.	62	1		*		*
			A2.33	Outline GI diseases	63	1				
			A2.34	Describe hepatic diseases.	63	1		*		*
			A2.35 A2.36	Describe renal diseases (pediatric nephrology). Recognize disorders of the endocrine system.	63 63	1 1		*		*
			A2.36 A2.37	Describe neurological diseases, including perinatally acquired cerebral lesions and		1		*		*
			712.5/	neuromuscular diseases, including permatany acquired cerebral lesions and	63	' '				
			A2.38	Describe the diagnosis of children with neoplasms.	63	1		*		*
			A2.39	Gather medical information.	63	2			*	
										*
			A2.40	Diagnose growth and nutritional disorders, including congenital anomalies.	63	- 1		*		
			A2.40 A2.41	Diagnose children with neoplasms.	63 63	1		*		*
	Apparathasia		A2.40 A2.41 A2.42	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions.	63 63 63	1 1 1		*		
	Anaesthesia Rotation		A2.40 A2.41 A2.42 A2.43	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient.	63 63 63 64	1 1 1		* *	*	*
			A2.40 A2.41 A2.42	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions.	63 63 63	1 1 1		*	*	*
			A2.40 A2.41 A2.42 A2.43	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient.	63 63 63 64 64	1 1 1		* *	*	*
	Rotation		A2.40 A2.41 A2.42 A2.43 A2.44 A2.45	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks	63 63 63 64	1 1 1 1 1+2		* * * *	*	* * * * *
	Rotation Hospital Operating	Senior	A2.40 A2.41 A2.42 A2.43 A2.44	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria	63 63 63 64 64	1 1 1 1 1+2		* * * *		* * *
	Rotation	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history.	63 63 63 64 64 64	1 1 1 1 1+2 1		* * * *	*	* * * * *
	Rotation Hospital Operating	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible an anesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Sessess the physical status, based on anesthesia risk classification of the American Society of	63 63 63 64 64 64	1 1 1 1 1+2		* * * *	*	* * * * *
	Rotation Hospital Operating	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment.	63 63 63 64 64 64 64	1 1 1 1 1+2 1		* * * *	*	* * * * *
	Rotation Hospital Operating	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible an anesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Sessess the physical status, based on anesthesia risk classification of the American Society of	63 63 63 64 64 64 64 65	1 1 1 1 1+2 1 1		* * * * * *	*	* * * * * *
	Rotation Hospital Operating Room Children with Craniofacial		A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate	63 63 63 64 64 64 64	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * *	*	* * * * * *
,	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or		A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47	Diagnose children with neoplasms. Examine pediatrix medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests.	63 63 63 64 64 64 64 65 65	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * * * *	*	* * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion.	63 63 63 64 64 64 65 65 66	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * *	*	* * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50	Diagnose children with neoplasms. Examine pediatrix medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion.	63 63 63 64 64 64 65 65 66 66	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * * * * * * * * * * * * * *	*	* * * * * * * * * * * * * * * * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient.	63 63 63 64 64 64 65 65 66 66	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * *	*	* * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of behalf caries for the individual patient.	63 63 63 64 64 64 65 65 66 66 67 67 67	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * * * * * * * * * * * * * *	* * * * * * * *	* * * * * * * * * * * * * * * * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient.	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51	Diagnose children with neoplasms. Examine pediatrix medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize caries risk factors for each patient. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Ferform a comprehensive clinical dental examination.	63 63 63 64 64 64 64 65 65 66 67 67 67 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	* * * * * * * * * * * * * * * * * * * *	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.51 A2.52 A2.53 A2.54 A2.55 A2.55 A2.55 A2.55	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries.	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************		* * * * * * * * * * * * * * * * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.51 A2.52 A2.53 A2.53 A2.55 A2.55	Diagnose children with neoplasms. Examine pediatrix medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize caries risk factors for each patient. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Ferform a comprehensive clinical dental examination.	63 63 63 64 64 64 64 65 65 66 66 67 67 67 68 68 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	* * * * * * * * * * * * * * * * * * * *	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.51 A2.52 A2.53 A2.54 A2.55 A2.55 A2.55 A2.55	Diagnose children with neoplasms. Examine pediatrix medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize caries risk factors for each patient. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy.	63 63 63 64 64 64 64 65 65 66 67 67 67 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	***************************************	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.51 A2.52 A2.53 A2.54 A2.55 A2.55 A2.55 A2.55	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations,	63 63 63 64 64 64 65 65 66 67 67 67 67 68 68 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************		* * * * * * * * * * * * * * * * * * * *
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.51 A2.52 A2.53 A2.53 A2.54 A2.55 A2.56 A2.56 A2.56	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on an esthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Recognize and sisk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in	63 63 63 64 64 64 64 65 65 66 66 67 67 67 68 68 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	***************************************	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.46 A2.47 A2.46 A2.47 A2.50 A2.51 A2.52 A2.53 A2.54 A2.53 A2.54 A2.56 A2.57 A2.56 A2.57 A2.58	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children. Adolescents, and oatlents with social health care needs.	63 63 63 64 64 64 65 65 66 67 67 67 67 68 68 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * * * * * * * * * * * * *	***************************************	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50 A2.51 A2.52 A2.53 A2.53 A2.54 A2.55 A2.56 A2.56 A2.56	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients who seed in health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources,	63 63 63 64 64 64 65 65 66 67 67 67 67 68 68 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	***************************************	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.46 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.50 A2.53 A2.54 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and obtaints with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency adavailable resources, for children, adolescents, and patients with social health care needs.	63 63 63 64 64 64 65 65 66 66 67 67 67 68 68 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * * * * * * * * * * * * *	***************************************	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.46 A2.47 A2.46 A2.47 A2.50 A2.51 A2.52 A2.53 A2.54 A2.53 A2.54 A2.56 A2.57 A2.56 A2.57 A2.58	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients who seed in health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources,	63 63 63 64 64 64 65 65 66 66 67 67 67 68 68 68 68	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	***************************************	**************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50	Diagnose children with neoplasms. Examine pediatrix medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with special health care needs. Know the dental and oral care during immunosuppression periods (Knowledge)	63 63 63 64 64 64 64 65 65 66 66 67 67 67 68 68 68 68 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	***************************************	**************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.46 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.50 A2.53 A2.54 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Know the dental and oral care during immunosuppression periods (Knowledge)	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68 68 68 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50	Diagnose children with neoplasms. Examine pediatrix medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with special health care needs. Know the dental and oral care during immunosuppression periods (Knowledge)	63 63 63 64 64 64 64 65 65 66 66 67 67 67 68 68 68 68 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.48 A2.49 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Know the dental and oral care during immunosuppression periods (Knowledge)	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68 68 68 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency advantable resources, for children, adolescents, and patients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with special health care needs. Know the dental and oral care during immunosuppression periods (Knowledge)	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68 68 68 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special	Senior	A2.40 A2.41 A2.42 A2.43 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolesc	63 63 63 64 64 64 64 65 65 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
A3. Management	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Up and Palate Children with Special Healthcare Needs	Senior	A2.40 A2.41 A2.42 A2.43 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolesc	63 63 63 64 64 64 64 65 65 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
A3. Management	Rotation Hospital Operating Room Children with Cariofacial anomalies and/or Cleft Lip and Palate Children with Salation Healthcare Needs Practice pediatric	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.53 A2.54 A2.50 A2.60 A2.61 A2.62 A2.63	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Know the dental and oral care during immunosuppression periods (Knowledge) Understand the indications and specific co	63 63 63 64 64 64 64 65 65 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
A3. Management	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special Healthcare Needs Practice pediatric dentistry	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.53 A2.54 A2.50 A2.60 A2.61 A2.62 A2.63	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and natients with special health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolesc	63 63 63 64 64 64 64 65 65 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
A3. Management	Rotation Hospital Operating Room Children with Crainiofacial anomalies and/or Cleft Lip and Palate Children with Saladia Healthcare Needs Practice pediatric dentistry within their	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.53 A2.54 A2.50 A2.60 A2.61 A2.62 A2.63	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre- and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with special health care needs. Now the dental and oral care during immunosuppressive therapy. Understand the indications and specific considerations of hematopoietic cell transplantation. (Knowledge) Recognize and respond to harm from health care delivery, including patient safety incidents, substance abuse, and child neglect and abuse.	63 63 63 64 64 64 64 65 65 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
A3. Management	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special Healthcare Needs Practice pediatric dentistry within their defined scope	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.53 A2.54 A2.50 A2.60 A2.61 A2.62 A2.63	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Now the dental and oral care during immunosuppression periods (Knowledge) Understand the indications and specific co	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
A3. Management	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special Healthcare Needs Practice pediatric dentistry within their defined scope of practice and	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.53 A2.54 A2.50 A2.60 A2.61 A2.62 A2.63	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess he effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre- and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize caries risk factors for each patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with special health care needs. Know the dental and oral care during immunosuppressive therapy. Understand the indications and specific considerations of hematopoietic cell transplantation. (knowledge) Understand the indications and specific considerations of hematopoietic cell transplantation. (knowledge)	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
A3. Management	Rotation Hospital Operating Room Children with Craniofacial anomalies and/or Cleft Lip and Palate Children with Special Healthcare Needs Practice pediatric dentistry within their defined scope	Senior	A2.40 A2.41 A2.42 A2.43 A2.44 A2.45 A2.46 A2.47 A2.46 A2.47 A2.48 A2.49 A2.50 A2.50 A2.51 A2.52 A2.53 A2.54 A2.50 A2.60 A2.61 A2.62 A2.63	Diagnose children with neoplasms. Examine pediatric medical patients with chronic and emergency conditions. Assess laboratory tests and the pre-and post-surgery condition of the patient. Assess the effects of pharmacological agents. Understand possible anaesthesia risks Identify patients who need to be hospitalized before treatment based upon specific criteria such as psychology of the child, nature of treatment and medical history. Assess the physical status, based on anesthesia risk classification of the American Society of Anesthesia (ASA) of dental patients who need to be hospitalized before treatment. Conduct pre-and post-surgery assessments, as well as laboratory tests. Assess the psychological and social impact of cleft lip and palate Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion. Recognize the cause of dental caries for the individual patient. Recognize the cause of dental caries for the individual patient. Diagnose orofacial health problems in CSHCN. Identify the need for using dental radiographs as a diagnostic tool. Interpret a patient's radiographs. Perform a comprehensive clinical dental examination. Analyze the dietary history of patients who are at a high risk of caries. Assess pediatric patients receiving immunosuppressive therapy. Obtain a patient history, perform a physical examination, select appropriate investigations, and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Prioritize a procedure or therapy, while considering clinical urgency and available resources, for children, adolescents, and patients with social health care needs. Now the dental and oral care during immunosuppression periods (Knowledge) Understand the indications and specific co	63 63 63 64 64 64 64 65 65 66 66 67 67 67 67 68 68 68 68 69 69 69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***************************************	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	***************************************
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Practice pediatric dentistry within their defined scope of practice and expertise

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A3.5	1.16 Dental Biomaterials 1.16.3 Select suitable restorative dental materials according to the requirements of each case, and describe suitable methods for testing the properties of the materials.	26	2		*	*	,
A3.6	1.18 Practice Management (Junior: practicing skill under supervision) 1.18.1 Describe the practice and business of dentistry. 1.18.2 Describe dental office design and ergonomics. 1.18.3 Recognize the role of accounting and marketing in dental practice. 1.18.4 Outline determinants of success in the private practice of dentistry. 1.18.5 (Jentify consumer needs and demands. 1.18.6 Recognize governmental regulations related to dental practice.	26	1		*		,
A3.7	Module 2: Specialty Topics (Book Review) 1. Develop a comprehensive oral health care program based on a complete examination and relevant patient and family medical, dental and social histories. 2. The use of conscious sedation, deep sedation, GA, and various behavioral management techniques for modifying patient behavior. (practicing skill under supervision) 4. Properly prescribe drugs used in pediatric dentistry. 5. Develop and present preventive treatment plans, as an integral part of the ongoing comprehensive oral health care program. 6. Provide standard restorative dental procedures in the primary, mixed, and permanent dentitions, while using materials and techniques that will provide maximum benefit for the pediatric patient. 7. Describe space management and the utilization of an interceptive orthodontic	28	1	*	*	*	
A3.8	2.4 Dental Caries in the Child and Adolescent 2.4.10 Describe the control of dental caries.	31	1	*	*		
43.9	2.6 Pit and Fissure Sealants and Preventive Resin Restorations 2.6.4 Describe the clinical steps of fissure sealant application and preventive resin restoration. 2.6.6 Identify the fissure sealant as one of the main cariespreventive measures for child patients. 2.6.7 Differentiate between fissure sealants and preventive resin restorations, in terms of the need for a cavity design and filling. 2.6.8 Apply a fissure sealant after proper prophylaxis. 2.6.9 Prepare a cavity and place a preventive resin restoration.	32	1	*	*		
À3,10	2.8 Treatment of Deep Caries, Vital Pulp Exposure, and Pulpless Teeth Pulp Therapy for Primary Teeth (Part 1) 2.8.1 Define pulpotomy in primary teeth. 2.8.2 List the goals of pulp therapy. 2.8.3 List the advantages of pulp therapy. 2.8.3 List the advantages of pulp therapy. 2.8.4 Describe how to differentially diagnose a vital pulp from a nonvital pulp (history of pain, clinical and radiographic findings). 2.8.5 Describe the different types of vital and non-vital pulp therapies, and their indications and goals. 2.8.6 List the contraindications to performing a pulpotomy on a tooth. 2.8.7 List the medicaments (e.g., mineral trioxide aggregate, ferric sulphate, formecresol) used in primary tooth pulpotomy and describe the quality of evidence supporting their use. 2.8.8 Describe the clinical steps (including the instruments and materials used) for performing a primary tooth pulpotomy. 2.8.9 List the indications and contraindications for performing a pulpectomy on a primary tooth. 2.8.10 List the intracanal medicaments used for performing a pulpectomy.	33:34	1+2		*	*	
A3.11	Pulp Therapy for Young Permanent Teeth (Part 2) (Junior: practicing skill under supervision) 2.8.11 befine partial pulpotomy in young permanent teeth and list its indications and advantages. 2.8.12 Describe the clinical steps for performing a partial pulpotomy in young permanent teeth. 2.8.13 Define apexogenesis in young permanent teeth and list its indications and advantages. 2.8.14 Describe the clinical steps for performing an apexogenesis in young permanent teeth. 2.8.15 Define apexification in young permanent teeth and describe its goals. 2.8.16 List the possible complications that can occur after performing vital pulp therapy. 2.8.17 Describe the different pulp therapy techniques which are performed on young permanent teeth. 2.8.18 Define regeneration (revascularization) of non-vital immature permanent teeth, and describe its pros and cons.	34	1+2		*		
A3.12	2.10 Local Anesthesia and Pain Control for the Child and Adolescent 2.10.5 Describe the recommended techniques for the administration of local anesthesia to anesthetize different nerves in children. 2.10.6 Manage the complications of local anesthesia in a child patient 2.10.6 Ust the post-operative instructions that should be provided after local anesthesia administration in children. 2.10.8 Describe how to calculate the maximum recommended dose. 2.10.9 Explain how profound local anesthesia can be administered to a child patient.	34-35	1+2		*	*	

A3.13	2.12 Pharmacologic Management of Patient Behavior (Nitrous oxide-oxygen inhalation technique) (Junior: practicing skill under supervision) 2.12.10 Secribe how to use N2-O2 inhalation for anxiolysis and analgesia. 2.12.2 Identify potential complications, and how to prevent and manage them. 2.12.3 List the indications and contraindications of this technique, and its advantages and disadvantages. 2.12.4 Describe the armamentarium used in the N2O-O2 inhalation technique, including the continuous flow unit and the types of systems used. 2.12.5 Describe the administration technique, and its limitations. 2.12.6 Outline potential complications and possible adverse effects of N2O-O2 inhalation and long-term effects on the dentist and auxiliary staff. (Moderate Sedation in Pediatric Dentistry) (Junior: practicing skill under supervision) 2.12.12 List the objectives of moderate sedation. 2.12.9 Describe methods of drug administration. 2.12.10 Have an awareness of the monitoring devices and personnel needed to monitor patients. 2.12.10 Discuss the adverse side effects of the drugs used in this procedure. 2.12.10 Utiline the procedures used to manage complications or emergencies.	35-36	1+2+3	*	•	•
A3.14	2.13 Hospital Dental Services for Children and the Use of GA (Junior: practicing skill under supervision) 2.13.1 List indications and contraindications for treatment under GA. 2.13.2 Describe the psychological effects of hospitalization and how to minimize them. 2.13.3 Explain how parental anxiety can be reduced. 2.13.4 Compare outpatient versus inpatient care. 2.13.4.1 Indications and advantages of outpatient care. 2.13.4.2 American Society of Ansethesiologists (ASA) classification. 2.13.4.3 Indications for preoperative hospitalization. 2.13.4.4 Indications for preoperative hospitalization. 2.13.5 Describe procedures for dental care.	36-37	1+2+3	*	*	*
A3.15	2.15 Managing the Developing Occlusion (Space Management) (Unifor: practicing skill under supervision) 2.15.10 Describe the design and placement of different space maintainers. (Oral habits) (Junior: practicing skill under supervision) 2.15.16 Describe the techniques used to manage the different habits.	37-38	1+2+3	*	*	*
A3.16	2.16 Dental Problems of CSHCN (Junior: practicing skill under supervision) 2.16.3 Discuss the different adjustments the dentist needs to make to accommodate these children. 2.16.4 Classify and describe some common special health care needs. 2.16.5 List the various management options available for each special health care need. 2.16.7 Identify some emergency/crisis situations and explain how they are best managed.	38	1+2+3	*	*	*
A3.17	2.17 Management of the Medically Compromised Patient: Hematologic Disorders (Genetic and Acquired), Cancer, Hepatitis, and AIDS (Junior: practicing skill under supervision) 2.17.1 Describe the different hematologic disorders. 2.17.1.1 Disorders of hemostais. 2.17.1.1 Disorders of hemostais. 2.17.1.1 Procagulant classification.2.17.1.3 Treatment. 2.17.1.4 Patients with Dieeding disorders. 2.17.1.5 Complications of bleeding disorders. 2.17.1.5 Development of a treatment plan. 2.17.1.7 Use of antifibrinolytic agents. 2.17.1.8 Pain control. 2.17.1.9 Describe antifibrinolytic agents. 2.17.1.9 Describe viral hepatitis. 2.17.3 Describe AIDS. 2.17.3 Describe AIDS. 2.17.3 Oral anairestations of HIV Infection. 2.17.4.1 Oral anairestations of leukemia. 2.17.4.2 Dental management of patients with leukemia who are undergoing chemotherapy and radiation therapy. 2.17.5 Explain hematopoietic stem cell transplantation. 2.17.5.2 Carder hematopsicitic stem cell transplantation. 2.17.5.3 Oral complications of bone marrow transplantation. 2.17.5.3 Pretransplantation preparation. 2.17.5.3 Pretransplantation preparation. 2.17.5.5 Pretransplantation preparation. 2.17.5.5 List the most common solid tumors and their complications. 2.17.7 Oral cancer.	38-39	1+2+3			
A3.18	2.18 Management of Trauma to the Teeth and Supporting Tissues (Junior: practicing skill under supervision) 2.18.4 Outline the treatment of traumatic dental injuries to the permanent teeth. 2.18.5 List the complications of injuries to the permanent teeth. 2.18.6 Describe injuries to the primary teeth. 2.18.6 Describe the treatment of various dental injuries to the primary teeth. 2.18.8 List the sequelae of traumatic injuries to the primary teeth and developing permanent dentition. 2.18.9 list different types of oral radiographs that can be used in oral trauma	39-40	1+2+3	*	*	*
A3.19	2.20 Oral Surgery for the Pediatric Patient (Junior: practicing skill under supervision) 2.20.1 Describe simple exodontia, as well as indications and contraindications for extraction. 2.20.2 Describe the management of impacted teeth. 2.20.3 Describe the surgical management of common hard tissue lesions. 2.20.4 Describe the surgical management of common hard tissue lesions. 2.20.4 Describe the most common surgical soft tissue procedures such as gingivectomy and the surgical management of mucocele. 2.20.5 Describe the infections of the head and neck region and surgical management. 2.20.6 Describe the theory and management of anklyloglossia. 2.20.7 Describe the use of lasers in pediatric dentistry.	40	1+2+3	*	*	*

A3.20	2.21 Antimicrobials in Pediatric Dentistry (Junior: practicing skill under supervision) 2.21.1 (Jassify antimicrobials. 2.21.1.1 Microbial target. 2.21.1.2 Mode of action. 2.21.1 Sactericidal versus bacteriostatic antibiotics. 2.21.1 Describe antibiotic resistance. 2.21.2 Describe antibiotic resistance. 2.21.4 Discuss antibiotic prophylaxis. 2.21.4 Discuss antibiotic prophylaxis. 2.21.4.1 Prophylaxis for other high-risk patients. 2.21.5 List antifungal agents. 2.21.6 List antifungal agents.	40-41	1+2+3	*		
A3.21	2.22 Medical Emergencies (Junior: practicing skill under supervision) 2.22.1.2 Medical consultation. 2.2.3 Discuss emergency equipment. 2.22.4 List emergency drugs. 2.22.4.1 Epinephrine. 2.22.4.3 Discuss emergency function, others). 2.22.4.3 Discuss (Green Controll, Ventolin, others). 2.22.4.3 Discuss (Green Controll, Ventolin, others). 2.22.4.4 Spirin (multiple brands). 2.22.4.5 Discuss (Benadryl). 2.22.4.5 Midazolam (Versed). 2.22.4.7 Sugar. 2.22.4.9 Describe the management of medical emergencies. 2.22.5 Poscribe the management of medical emergencies. 2.22.5.1 Position.	41	1+2+3	*	•	
A3.22	Module 3: Scientific, Evidence-Based Dentistry (Journal Club) A reading list will be provided before the module 2. Describe the treatment of permanent canine impaction. 3. Describe the management of the ectopic eruption of permanent teeth.	42	1+2+3	*	*	*
A3.23	Diagnosis and Treatment Planning (Junior: practicing skill under supervision) 3.1 Determine if the number of visits and costs of dental treatment in high-cariesrisk children differ between those receiving early dental intervention and those receiving later intervention. 3.2 Compare treatments and treatment costs among children with an early initial dental intervention, to a group of children with a similar caries risk and later dental intervention. 3.8 Identify the primary barriers to weightrelated counseling cited by pediatric dentists. 3.11 Recognize that caries-risk management protocols can assist clinicians with decisions regarding treatment.	42-43	1+2+3	*	*	*
A3.24	3.33 Describe evidence-based guidelines related to dental caries management in children and adolescents, including those with special health care needs. 3.43 Describe methods of flouride administration. 3.55 Explain the rationale for water fluoridation and diletary fluoride supplementation. 3.36 Describe fluoride mouth rinse and its uses. 3.37 Explain the mechanism of action and site of fluoride absorption. 3.38 Describe fluoride metabolism and bioavailability. 3.39 Describe the safety and toxicity of fluoride. 3.49 Present evidence-based clinical recommendations for the use of pitand- fissure sealants on the occlusal surfaces of primary and permanent molars in children and adolescents. 3.41 Explain whether the risk of developing caries in a formerly sealed tooth, with fully or partially lost sealant, exceeds the risk in a never-sealed tooth. 3.42 Recognize the potential impact of sugar substitutes (e.g., xylitol) on the oral health of infants, children, adolescents, and persons with special health care needs. 3.43 Describe the use of xylitol-based products in preventing caries in children. 3.44 Explain how chlorhexidine can prevent caries. 3.45 Describe the effectiveness of different modes of chlorhexidine delivery for caries prevention. 3.46 Describe guidelines for chlorhexidine use in caries management.	44-45	1+2+3	*	*	*
A3.25	Growth and Development and Orthodontics (Junior: practicing skill under supervision) 3.48 Describe the role of the pediatric dentist in performing nasoalveolar molding.	45	1+2+3	*		*
A3.26	3-58 Describe the implant method as applied to the maxillar; examine the general pattern of maxillary growth in the lateral view; report the results of an analysis of the sutural growth of the upper face in the sagittal plane, and illustrate the graphical method employed. 3-59 Examine the health effects and effectiveness of very long-term retention after orthodontic treatment. 3-60 Analyze the effect of extracting the primary maxillary canine on the palatal eruption of the permanent maxillary canine in young individuals. 3-61 Describe the effect of extracting the primary molars on the formation and eruption of their successors.	46	1+2+3	*	*	*
A3.27	3.62 Describe the available evidence regarding orthodontics as an adjunct to post-oral trauma treatment for permanent teeth. 3.63 Examine the theories of craniofacial growth and development in the context of diagnosis and treatment planning of an orthodontic patient. 3.64 Describe the clinical management of ectopically erupting first permanent molars. 3.65 Describe the current knowledge of space management in the primary and mixed dentitions. 3.66 Determine the optimum time for surgical removal of unerupted maxillary anterior supernumerary teeth.	47	1+2+3	*		*

		A3.28	Pulp Therapy (Junior: practicing skill under supervision) 3.73 Define indirect pulp treatment and know its indications. 3.74 Genpare the clinical and radiographic outcomes of an adhesive resin system versus a calcium hydroxide liner for protection of the dentin-pulp complex of primary molars which have undergone indirect pulp treatment. 3.75 leafentify the different excavation methods for asymptomatic deep carious lesions. 3.76 Describe the stepwise excavation technique. 3.77 Describe the stepwise excavation technique. 3.78 Describe vidence-based literature and current techniques for indirect pulp therapy, pulp capping, and pulpotomy for primary teeth and permanent teeth with an open apex. 3.78 Describe the formation of an apical barrier with mineral trioxide aggregate, followed by root strengthening with bonded composite. 3.79 Define partial pulpotomy in young permanent teeth. 3.80 Describe the clinical steps for performing a partial pulpotomy in young permanent teeth. 3.81 Recognize the indications and contraindications for pulp therapy in primary and immature permanent teeth. 3.82 Identify various materials used in indirect pulp therapy, pulpotomy, and pulpectomy in primary and immature permanent teeth.	47-48	1+2				*
		A3.29	4.4 Principles of Cavity Preparation and Restoration 4.4 1 Apply the general principles of cavity design for various classes of caries in primary teeth, by preparing and restoring teeth on a typodont. This includes knowledge of the matrix system, as well as amalgam and composite resin manipulation. (Skill) 4.4.2 List the principal reasons for restoring carious primary teeth.	50	1+2	*	*		*
		A3.30	4.8 Fissure Sealant 4.8.1 Describe the clinical steps offissure sealant application.	51	1+2		*	*	*
		A3.31	4.11 Stainless Steel Crown Restoration 4.11.1 Identify types of SSC. 4.11.2 Identify indications for SSCs in primary and permanent teeth. 4.11.2 Identify indications for SSCs in primary and permanent teeth. 4.11.3 Define class SSC preparation. 4.11.4 Explain the principles of SSC preparation, selection, and cementation in primary teeth. 4.11.5 Identify common errors with SSC preparation, selection, and cementation in primary teeth. 4.11.6 Describe the clinical steps of SSC preparation, selection, and cementation in primary teeth. 4.11.7 Perform SSC preparation, selection, and cementation in primary teeth. (Skill)	52	1,2		*	*	*
		A3.32	4.12 Pulp Therapy for the Primary Dentition 4.12.1 Define pulpotomy in primaryteeth. 4.12.2 List the goals of pulp therapy. 4.12.3 List the advantages of pulp therapy. 4.12.4 Describe how to differentiate between vital and non-vital pulp diagnoses (e.g., via pain history, and clinical and radiographic findings). 4.12.5 Describe different types of vital and non-vital pulp therapy, and their indications and goals. 4.12.6 List the contraindications to performing a pulpotomy on a primary tooth. 4.12.7 List the pulp medicaments used in the pulpotomy of primary teeth. 4.12.6 Describe the clinical steps for performing a pulpotomy in primary teeth, and the instruments and materials used. 4.12.19 Perform pulpotomy technique on primary teeth using different medicaments (Skill)	52-53	1,2		*	*	*
		A3.33	4.13 Space maintenance (band and loop) 4.13.1 Describe the clinical steps of Band and loop indications, fabrication and cementation	53	1+2		*	*	*
		A3.34	4.14 Arch length and model analysis 4.14.1 Formulate Moyers Space analysis in mixed dentation using orthodontic cast.(Skill)	53	2		*	*	*
Pediatric Medicine	Junior	A3.35	Describe immunodeficiency diseases and allergic disorders.	62	1		*		*
		A3.36	Describe childhood infections, infectious diseases, and immunization.	62	1		*		*
		A3.37 A3.38	List metabolic disorders associated with bone lesions and defects in skull ossification. Describe diseases of the blood in children.	62 62	1		*		*
		A3.39	Outline GI diseases	63	1		*		*
		A3.40	Describe hepatic diseases.	63	1		*		*
		A3.41	Describe renal diseases (pediatric nephrology).	63	1		*		*
		A3.42 A3.43	Recognize disorders of the endocrine system. Describe neurological diseases, including perinatally acquired cerebral lesions and	63	1 1				-
			neuromuscular disease.	63			*		_ *
Oral and		A3.44 A3.45	Describe the management of children with neoplasms. Perform under supervision minor surgical procedures such as extraction, biopsy, frenectomy,	63	1 2		*		*
Maxillofacial Surgery			releasing ankyloglossia	64					
Anaesthesia Rotation		A3.46	Understand and calculate preoperative, perioperative and postoperative fluid management.	64	1+2		*	*	*
		A3.47	Understand the concepts of airway management and perform the skills related to airway management	64	1+2		*	*	*
		A3.48	Describe the management of anaesthetic emergencies, and patient recovery.	64	1+2		*	*	*
Hospital Operating	Senior	A3.49	Perform comprehensive dental care under GA	65	1,2		*	*	*
Room		A3.50	Admit a patient into the hospital ward as per hospital policy in regard to pediatric patients requiring complete oral rehabilitation under general anaesthesia.	65	3		*	*	*
Children with Craniofacial		A3.51	Manage patients with craniofacial anomalies in conjunction with an interdisciplinary team of specialists.	66	1+2+3		*		*
anomalies and/or Cleft Lip and Palate		A3.52	Provide optimal care for patients with craniofacial anomalies.	66	1,2		*	*	*
and I diate		A3.53	Assessment of children and families including feeding, nutrition and anticipatory guidance on prevention and malocclusion.	66	2+3		*	*	*
Children with Special		A3.54	Recall the phases of a treatment plan.	67	1+2		*		*
Healthcare Needs		A3.55	Identify indications and contra indications for vital pulp therapy.	67	1+2		*		*
		A3.56	Select a suitable restorative material on an individual basis.	67	1+2		*		*
		A3.57	Identify the contraindications for using antibiotics and analgesics.	67	1+2		*		*
		A3.58	Give dietary instructions and recommendations to patients and parents.	68	1+2		*		*
		A3.59	Formulate a comprehensive treatment plan for a pediatric dental patient.	68	1+2				
		A3.60	Estimate the most appropriate sequential treatment plan.	68	1+2		*		*
		A3.61	Manage the behavior of a pediatric dental patient using nonpharmacological behavior guidance techniques.	68	1+2		*		*
		A3.62	penavior guidance techniques. Manage the behavior of a pediatric dental patient using nitrous oxide inhalation.		1+2		*		*
				68	1+2		*		*
		A3.63	Calculate the maximum safe dose of drugs for local anesthesia and sedation in the child patient.	68	1+2				"

				A3.64	Understand the oral management before initiation of immunosuppressive therapy	69	1+2	*		*
				A3.65	Know the dental and oral care after the immunosuppressive therapy	69	1+2	*	*	*
				A3.66	Manage children, adolescents, and patients with special health care needs.	69	1+2	*		*
				A3.67	Establish a patient-centered management plan for children, adolescents, and patients with		1+2	*		*
					special health care needs.	69				
				A3.68	Determine the most appropriate procedures and therapies for children, adolescents, and	60	1+2	*		*
					patients with special health care needs.	69				
				A3.69	Know the dental and oral care during immunosuppression periods (Knowledge)	69	1+2	*		*
				A3.70	Understand the indications and specific considerations of hematopoietic cell transplantation.		1+2	*		*
					(Knowledge)	69				
				A3.71	Manage children, adolescents, and patients with special health care needs.	69	1+2	*		*
				A3.72	Perform a procedure in a skilled and safe manner, and adapt methods to unanticipated		1,2	*	*	*
					findings or changing clinical circumstances in children, adolescents, and patients with special health care needs.	70				
				A3.73	Implement a patient-centered care plan that supports ongoing care, follow-up on		1,2	*	*	*
				15/75	investigations, response to treatment, and further consultation.	70				
				A3.74	Recognize and respond to harm from health care delivery, including patient safety incidents,		1,3	*	*	*
					substance abuse, and child neglect and abuse.	70				
	A4. Health Promotion &	Practice pediatric	All	A4.1	1.7 Infection Control Guidelines 1.7.2 Explain the methods of prevention.					
	Illness Prevention	dentistry within their			1.7.3 Infection control principles and practices.	22	1+2+3	*	*	*
		defined scope of practice and								
		expertise								
				A4.2	1.13 Nitrous Oxide-Oxygenanalgesia/anxiolysis (Junior: practicing skill under supervision)			*		
					1.13.2 Identify how to prevent the complications that could occur	24	1+2+3	*		*
				A4.3	1.21 Advanced Oral and Maxillofacial Radiology					
					1.21.1 Describe the key principles of radiation hazards and protection	27	1+2+3	*		*
				A4.4	2.4 Dental Caries in the Child and Adolescent					
					2.4.1 Dentist's role in the caries control program.			*		
					2.4.12 Describe other preventive therapies.	31	1+2+3	*		
				A4.5	2.22 Medical Emergencies (Junior: practicing skill under supervision)					
					2.22.1 Explain how to prevent medical emergencies.	41	1+2+3	*		
						41	17275			
				A4.6	Module 3: Scientific, Evidence-Based Dentistry (Journal Club) A reading list will be provided					
					before the module 2. Describe the prevention of permanent canine impaction.	42	1+2+3	*		*
					2. Describe the prevention of permanent cannie impaction.	42	17275			
				A4.7	Prevention: (Junior: practicing skill under supervision)					
					3.23 Describe the treatment of the disease process instead of treating the outcome of the					
					disease. 3.24 Describe the predisposing factors for oral disease in a specific patient, and how they					
					facilitate the formulation of an individualized preventive treatment plan. 3.25 Define ECC and severe ECC.					
					3.26 Describe the causes of dental caries.					
					3.27 Explain the mechanism of ECC. 3.28 Describe caries risk assessment.					
					3.29 Recognize health care providers that are involved in assessing perinatal and infant oral					
					health care (e.g., caries risk assessment, anticipatory guidance, preventive strategies, and therapeutic interventions), as well as stakeholders in pediatric oral health.		1	*	*	*
					3.30 Describe and recognize health care providers involved in educating parents, and ancillary organizations involved in the management of oral health care needs specific to CSHCN					
					(rather than the provision of specific treatment recommendations for oral conditions).					
					3.31 Plan a preventive oral health intervention, including anticipatory guidance and preventive counseling, for infants, children, and adolescents.					
					3.32 Describe the use of silver diamine in caries management.					
		Pediatric Medicine Anaesthesia	Junior	A4.8 A4.9	Apply effective infection control measures that comply with regulatory standards. Describe the prevention and management of anaesthetic emergencies, and patient recovery.	63	1,2	*	*	*
		Rotation				64				
		Children with Special Healthcare Needs	Senior	A4.10	Formulate a comprehensive preventive individualized program and treatment plan for a pediatric dental patient.	68	1+2+3	*	*	*
				A4.11	Formulate a comprehensive preventive individualized program for a pediatric dental patient.		1+2+3	*	*	*
						68				
				A4.12	Adopt strategies that promote patient safety and address human and system factors.	70	3		*	
		N/A	All	A4.13	Contribute to a culture that promotes patient safety.	76	3		*	
				A4.14	Incorporate prevention, promotion, and surveillance of oral health into interactions with		3		*	
					individual patients.	77				
B. Communicator			Junior	B.1	Demonstrate appropriate communication skills with pediatric patients with chronic and		3		*	
					emergency conditions, and their parents.	63				
				B.2	Communicate effectively with individuals from diverse populations.	63	3		*	
				B.3 B.4	Communicate with a consultant from a different specialty. Understand possible anaesthesia risks, explain to parents/guardians and obtain parental	63	3		*	
					consent.	64				
				B.5	Write progress notes and referral/consultation letters.	63	2		*	
			Senior	B.6	Communicate with parents/guardian regarding proposed plan of management alternatives benefits and possible risks of treatment or no treatment.	65	3		*	
				B.7	Perform and document postoperative instructions to parents	65	2		*	
				B.8	Inform parents/caregivers about the recommended treatment procedures, options, risk	66	2,3		*	
				B.9	factors, benefits, and costs, to assist their decision making. Explain the causes of dental caries, as well as their prevention, to pediatric patients and their	67	2,3		*	
				B.10	parents. Record medical and dental history.	67	2		*	
						-/	-			
				B.11 B.12	Communicate with patients, parents, dental assistants, technicians, and consultants. Present a patient's diagnosis and treatment options to the parents.	68 68	3 2,3		*	

	ı		P.42	Observe and the second				-	
			B.13	Obtain parental consents for treatment, and use protective stabilization and pharmacological behavior guidance techniques.	68	2,3			
			B.14	Establish goals of care in collaboration with patients and their families; this may include slowing disease progression, treating symptoms, achieving a cure, improving function, and		3		*	
				palliation in children, adolescents, and patients with special health care needs.	69				
			B.15	Obtain a patient history, perform a physical examination, select appropriate investigations,		2,3		*	
				and interpret their results for diagnosis and; disease prevention; and health promotion in children, adolescents, and patients with special health care needs.	69				
			B.16	Document properly per hospital policy preoperative orders, operative note,	65	2		*	
			B.17	postoperative/discharge orders and dictate operating room reports. Obtain parental informed and written consent for proposed treatment under general		2		*	
			B.18	anesthesia. Write referral letters for medical and other dental specialists.	65 68	2		*	-
			B.10 B.19	Develop an electronic record for each patient.	68	2		*	
			B.20 B.21	Prioritize issues to be addressed in a patient encounter. Obtain and document informed consent; this includes the explanation of risks and benefits	69	1 2		*	
				of, and the rationale for, a proposed procedure or therapy in children, adolescents, and	69	· ·			
		All	B.22	patients with special health care needs. 1.1. Communicate using a patient-centered approach that encourages patients' trust and		3		*	
				autonomy, and is characterized by empathy, respect, and compassion.					
				1.1.1. Apply psychological and behavioral principles in patient-centered communication. 1.1.2. Take time to talk and listen to dental patients to understand them better and improve					
				the clinical relationship. (Junior: practicing skill under supervision)	71				
				1.1.3. Provide direct and close contact with patients; this should be characterized by honesty and empathy to create a therapeutic alliance based on trust and respect.					
			B.23	Manage disagreements and emotionally charged conversations. 1.5.1. Respect each patient's perspectives, situation, concerns, and values, and give		3		*	
				alternative treatment plans.					
				1.5.2. Break bad news to child/parent in an empathic manner. (Junior: practicing skill under supervision)	72				
				supervision)					
			B.24	Use patient-centered interviewing skills to gather relevant biomedical, dental, and		3		*	
				psychological information. 2.1.1 Encourage and facilitate the dental patient to take the conversational lead, initiating	72				
				topics of their complaints, symptoms, experience, worries, values, and preferences.					
			B.25	Provide a clear structure for and manage the flow of an entire patient encounter. (Junior:		3		*	
				practicing skill under supervision)	72				
					Ĺ				
			B.26	Share information and explanations that are clear, accurate, and timely, while checking for		3		*	
				patient and family understanding. - Use language that is easily comprehended and matches the patient's requirements and					
				expectations.	72				
				 - Utilize new technology to facilitate understanding of information and explain dental treatment plans. 					
			B.27	Disclose harmful patient safety incidents to patients and their families accurately and appropriately.	73	3		*	
					/5				
			B.28	Facilitate discussion with patients and their families in a way that is respectful, non- judgmental, and culturally safe.	73	3		*	
					/5				
			B.29	Use communication skills and strategies that help patients and their families to make informed decisions regarding their dental health.	73	3		*	
					,,				
			B.30	Respond to a patient's non-verbal behaviors to enhance communication. 1.4.1. Recognize and appropriately manage anxious or fearful child dental patients. (Junior:		3		. *	
				practicing skill under supervision)	71				
				1.4.2. Recognize and respect the dental patient's need for privacy.					
			B.31	Adapt to the unique needs and preferences of each patient and to his/her clinical condition and circumstances.	72	3		*	
			B.32	Seek and synthesize relevant information from other sources, including the patient's family,	-	3		*	
			0.52	with the patient's consent.		,			
				2.3.1 Collect the relevant necessary information from the patient's family, previous general dentist (or dental specialist), physician (if related to a medical issue), and other professionals,					
				with the patient's permission.	72				
				2.3.2 Act professionally when screening for sensitive information.					
			P 35	Decument clinical encounters in an answert assessment of the state of					
			B.33	Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements.	73	2		-	
			B.34	Communicate effectively using a written dental and medical health record,		2		*	
			,	electronic dental and medical record, or other digital technology.	73				
			B.35	Share information with patients and others in a manner that respects patient privacy and	-	3		*	
				confidentiality, and enhances understanding.	73				
			B.36	Demonstrate handover of care, using both verbal and written communication, during a patient's transition to a different dental health care professional, setting, or stage of care.		3		*	
				parameter a distriction contained on the professional secting, or stage of tale.	75				
			B.37	Write appropriate referral and consultation request forms.		2		*	
					75				
C. Collaborator		Senior	C.1 C.2	Understand multidisciplinary team working, roles and responsibilities Work in a team	66 63, 64,	3	*	*	\vdash
					65				
			C.3	Establish and maintain a positive relationship with dentists, physicians, and other colleagues in the dental health care professions to support relationship-centered collaborative care.	74	3		*	
			C 4	Participate in intraprofessional (among dental colleagues) and interprofessional (among		-		*	-
			C.4	other dental and medical health care professionals) relationships and teamwork.	74	3			
			C.5	Work with other health care professionals and dental specialists to integrate care at the individual and community levels.	74	3		*	
			C.6	Apply the principles of team dynamics.	74	3			
			C.7	Engage in continuous intraprofessional and interprofessional development to enhance team	74	3		*	
			C.8	performance. Negotiate overlapping and shared responsibilities with dentists and other health care	74	3		*	
				Laurence de descriptor de la contra de la contra de la contra con					
			C.9	professionals during episodic and ongoing care. Recognize one's own professional role and responsibilities and those of others, including		3		*	
			C.9	Recognize one's own professional role and responsibilities and those of others, including dental assistants, laboratory technicians, radiologists, hygienists, and staff in other dental	74	3		*	
			C.9	Recognize one's own professional role and responsibilities and those of others, including		3		*	
			C.10	Recognize one's own professional role and responsibilities and those of others, including dental assistants, laboratory technicians, radiologists, hygienists, and staff in other dental and medical specialities. Engage in respectful shared decisionmaking with dentists and other colleagues in the dental health care professions.	74	3		*	
				Recognize one's own professional role and responsibilities and those of others, including dental assistants, laboratory technicians, radiologists, hygienists, and staff in other dental and medical specialities. Engage in respectful shared decisionmaking with dentists and other colleagues in the dental				*	

			la contra de la contra del la contra					
		C.13 C.14	Respect the roles and limitations of other professionals. Implement strategies to promote understanding, manage differences, and resolve conflicts	75	3		*	
			in a manner that supports a collaborative culture. (Junior: practicing skill under supervision)	75				
		C.15	Value diversity among dental professionals. (Junior: practicing skill under supervision)		3		*	
		Cij	value diversity among dental professionals. (Junior, practicing skill dider supervision)	75	,			
		C.16	Use constructive negotiation. (Junior: practicing skill under supervision)	75	3		*	
		C.17	Describe strategies for conflict resolution in the team. (Junior: practicing skill under		3		*	
			supervision)	75				
		C.18	Determine when care should be transferred to another dentist or dental health care	75	3		*	
D. Leader	Junior	D.1	professional. Understand the use of anesthesia risk assessment classification, American Society of		1	*	*	*
			Anesthesia (ASA), to assess the physical status classification of dental					
			patients who need to be hospitalized before treatment.	64				
	Senior	D.2	Lead the dental team.	68	3		*	
			Ecot the definit comm	00	,			
	All	D.s.	Demonstrate a commitment to high quality care for their nations. (Junior practicing skill				*	
	All	D.3	Demonstrate a commitment to high-quality care for their patients. (Junior: practicing skill under supervision)	20	3		_	
			' '					
		D.4	Integrate the intrinsic roles of CanMEDS into their pediatric dentistry practice. (Junior:	20	3		*	
		D.5	practicing skill under supervision) Apply knowledge of the clinical and biomedical sciences relevant to their discipline. (Junior:	20	1		*	
			practicing skill under supervision)	20				
		D.6	Carry out professional duties in the face of multiple competing demands. (Junior: practicing skill under supervision)	20	3		*	
		D.7	Recognize and respond to the complexity, uncertainty, and ambiguity inherent in dental	20	3		*	
		D.0	practice. (Junior: practicing skill under supervision)	20				
		D.8	Recognize when the values, biases, or perspectives of patients, dentists, or other dental health care professionals may have an impact on the quality of care, and modify the		3			
			treatment approach accordingly. (Junior: practicing skill under supervision)	71				
		D.9	Give timely, sensitive, and instructive feedback to others, and respond respectfully and		3		*	
		0.9	professionally to feedback from others.	75	, ,			
			<u> </u>					
		D.10	Recognize one's own limitations and know when to seek help from others.	75	3		*	
				/3				
		D.11	Analyze patient safety incidents to enhance systems of care.	76	3		*	
		D.12	Use health informatics to improve the quality of patient care and optimize patient safety.	76	3		*	
		D.13	Allocate dental care resources for optimal patient care	76	3		*	
		D.14	Apply evidence and management processes to achieve cost-appropriate care. (Junior:	76	3		*	
		D.15	practicing skill under supervision) Demonstrate leadership skills to enhance dental care.	76	3		*	
		D.16	Facilitate change in dental health care to enhance services and outcomes.	76	3		*	
		D.17 D.18	Set priorities and manage time to integrate practice and personal life. Manage a career and a practice.	76 76	3			
		D.19	Implement processes to ensure improvement in personal practice.	76	3			
		D.20	Improve clinical practice by applying a process of continuous quality improvement in		3			
			preventive care, and the promotion and surveillance of oral health. (Junior: practicing skill under supervision)	77				
E. Health	All	E.1	1.11 Public Health (Junior: practicing skill under supervision)					
Advocate			1.11.1 Describe the dental care delivery system.					
			1.11.2 Describe public health methodology, scientific evaluation, and health care financing; list	24	1	*		
			1.11.2 Describe public health methodology, scientific evaluation, and health care financing; list the patient groups that are served.	24	1	*		
		E.2	the patient groups that are served.			*	*	
		E.2	the patient groups that are served. Assist patients and their families to identify, access, and make use of information and communication technologies to support and manage their treatment plan and dental care.	24 73	3	*	*	
		E.2	the patient groups that are served. Assist patients and their families to identify, access, and make use of information and communication technologies to support and manage their treatment plan and dental care. Work with patients to address determinants of dental health that affect them and their			*	*	
			the patient groups that are served. Assist patients and their families to identify, access, and make use of information and communication technologies to support and manage their treatment plan and dental care.	73 77	3	*	*	
		E.3 E.4	the patient groups that are served. Assist patients and their families to identify, access, and make use of information and communication technologies to support and manage their treatment plan and dental care. Work with patients to address determinants of dental health that affect them and their access to necessary dental health services or resources. Work with patients and their families to increase opportunities to adopt healthy dental behaviors.	73	3 3 3	*	*	
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			F.10	Learn from and make use of the expertise of other dentists or dental health care	78	3				
			F.11	professionals Recognize the influence of role modeling and the impact of the formal, informal, and hidden	78	3				
			F.12	curriculum on learners. Participate in teaching with dental students, interns, residents, or colleagues.	78	3				
			F.13	Promote a safe learning environment.	78	3				
			F.14 F.15	Ensure patient safety is maintained when learners are involved. Plan and deliver a learning activity. (Junior: practicing skill under supervision)	78	1,2				
			F.16	Provide feedback to enhance learning and performance (Junior: practicing skill under	78	2,3				
				supervision)	78					
			F.17	Assess and evaluate learners, teachers, and programs in an educationally appropriate manner. (Junior: practicing skill under supervision)	78	1		*		
			F.18	Recognize uncertainty in clinical practice and knowledge gaps in clinical and other professional encounters, and generate focused questions that address them. (Junior: practicing skill under supervision)	79	3		*		
			F.19 F.20	Identify, select, and navigate preappraised resources. Critically evaluate the integrity, reliability, and applicability of healthrelated research and	79	1 1		*		
				literature.	79			*		
			F.21 F.22	Integrate evidence into decision-making in clinical practice. Demonstrate an understanding of the scientific principles of research and scholarly inquiry,	79 79	1		*		
			F.23	and the role of research evidence in health care. Identify ethical principles relevant to research, and how they relate to the		1				
				informed consent process, as well as the consideration of vulnerable populations, and the potential harms and benefits of study participation	79			*		
			F.24	Contribute to the work of various research programs	79	3				
			F.25	Pose questions amenable to scholarly inquiry and select appropriate methods to address them.	79	1		*		
			F.26	Summarize and communicate to professional and lay audiences, including patients and their families, the findings of relevant research and scholarly inquiry.	79	1+2		*	*	*
G. Professional		All	G.1	1.20 Dental Ethics						
				1.20.1 List ethical issues relevant to situations ranging from ordinary chair side decision making to the treatment of patients with HIV/AIDS. 1.20.2 Describe the essential principles in the practice of ethics. 1.20.3 Describe the legal process, civil law, and forensic dentistry.	27	1	*	*		
			G.2	Optimize the clinical environment for the patient's comfort, dignity, privacy, engagement,		3				
				and safety. 1.2.1. Show concern about patient privacy and comfort.	71					
				1.2.2. Apply all required safety standards.	/1					
			G.3	Exhibit appropriate professional behavior and relationships in all aspects of practice by		3				
			-	demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality.	80				*	
				Put patients' interests before their own or those of any colleague, organization, or business.						
			G.4	rut patients interests before their own or those or any coneague, organization, or business.	80	3				
			G.5	Maintain the confidentiality of patient information and use it for the purposes for which it is given.	80	3			*	
			G.6	Keep patient information secured at all times.	80	3			*	
			G.7	In special cases, it may be justified to make confidential patient information known without consent if it is in the public interest or the patient's interest	80	3			*	
			G.8	Maintain appropriate boundaries in relationships with patients, without		3				
				abusing those relationships.	80					
			G.9 G.10	Demonstrate a commitment to excellence in all aspects of practice. Recognize and respond to ethical issues encountered in practice.	80	3				
			G.10	Reject politely any payment, gift, hospitality, or request to make or accept any referral that	80	3			*	
				may affect professional judgment.	80					
			G.12	Treat patients politely and with respect, by recognizing their dignity and rights as individuals.	80	3			*	
			G.13	Recognize and make patients aware of their responsibility and right to make decisions about their own oral and dental treatment	80	3			*	
			G.14	Treat patients fairly and in line with the law.	81	3			*	
			G.15	Recognize and manage conflicts of interest.	81	3			*	
			G.16	Display professional behavior in the use of technology-enabled communication.	81	3			*	
			G.17	Demonstrate accountability to patients, society, and the profession by meeting their	81	3				
			G.18	expectations Demonstrate a commitment to patient safety and quality improvement.		3				
			G.19	Fulfill and adhere to the professional and ethical codes, standards of practice, and laws	81	3			*	
			G.20	governing dental practice. Recognize and follow laws and regulations that affect a dentist's work, premises, equipment,	81	3			*	
			G.21	and business. Recognize and respond to unprofessional and unethical behaviors in dentists and other	81	3				
			G.22	Colleagues in the health care professions. Treat all team members and other colleagues fairly and in line with the law, without	81	3			*	
				discrimination.	81				*	
			G.23	Participate in peer assessment and the setting of standards.	81	3				
			G.24	Share knowledge and skills effectively with other team members and colleagues in the interests of patients.	81	3			*	
			G.25	Display self-awareness and manage influences on personal well-being and professional performance.	81	3			*	
			G.26	Manage personal and professional demands for a sustainable practice throughout life.	81	3				
			G.27	Promote a culture that recognizes, supports, and responds effectively to colleagues in need.	81	3				
				<u> </u>						