

# A.INTRODUCTION

The primary objective of the Advanced Education in General Dentistry program at the UNM School Of Medicine is to provide training opportunities in all the clinical dental disciplines, applied clinical sciences, patient care and community service. This one-year program is based primarily at the UNM Camino de Salud dental residency facility, along with limited and elective hospital assignments. The program aims to enhance clinical skills and knowledge in various phases of general dentistry, as well as the ability to obtain and evaluate primary source material related to dentistry and apply it in an evidence-based way. The program also includes lectures, seminars, presentations and other didactic coursework.

#### B. ONE-YEAR PROGRAM OBJECTIVES, GOALS, AND COMPETENCIES

Overall Goals:

1. Act as a primary care provider. This includes providing emergency and multidisciplinary comprehensive oral health care, providing patient-focused care that is coordinated by the general practitioner, directing health promotion and disease prevention activities and using advanced dental treatment modalities.

2. Plan and provide multidisciplinary oral health care for a wide variety of patients, including those with special needs.

3. Manage the delivery of oral health care by applying concepts of patient and practice management and quality improvement that are responsive to a dynamic health care environment.

4. Function effectively within interdisciplinary health care teams.

5. Apply scientific principles to learning and oral health care. This includes using critical thinking, evidence- or outcomes-based clinical decision-making and technology-based information retrieval systems.

6. Use the values of professional ethics, lifelong learning, patient-centered care, adaptability and acceptance of cultural diversity in professional practice.

7. Understand the oral health needs of communities and engage in community service.

The program's objective is for you to achieve competency or proficiency in each goal of the goals listed below. Proficiency is a higher level of achievement than competency. Consequently, a resident can move from competency to proficiency throughout the year.

This program expects each individual to become competent or even proficient in each of the following goals:

## I. Documentation, information management and quality improvement

1. Evaluate scientific literature and use information in the literature in making professional decisions.

2. Maintain a patient record system that facilitates the retrieval and analysis of the process and outcomes of patient treatment.

3. Modify the treatment plan, if indicated, based on therapeutic outcomes, unexpected circumstances or the patient's individual needs.

# II. Hard and Soft Tissue Surgery, and Hospital Protocol

4. Perform surgical and non-surgical extraction of erupted teeth.

5. Perform uncomplicated pre-prosthetic surgery.

6. Perform biopsies of oral tissues.

7. Recognize and manage surgical emergencies and complications of intraoral surgical treatment.

8. Extract uncomplicated impacted wisdom teeth.

9. Diagnose and manage common oral pathological abnormalities.

10. Provide dental treatment in the operating room.

#### III. Medical risk assessment

11. Select and use assessment techniques to arrive at a differential, provisional and definitive diagnosis for patients with complex needs.

12. Treat patients with a broad variety of acute and chronic systemic disorders and social difficulties, including patients with special needs.

# IV. Planning and providing multidisciplinary culturally appropriate comprehensive care

13. Integrate multiple disciplines into an individualized, comprehensive, sequenced treatment plan using diagnostic, risk management and prognostic information for patients with complex needs.

14. Develop and carry out dental treatment plans for special needs patients in a manner that considers and integrates those patients' medical, psychological and social needs.

15. Provide dental care as part of an inter-professional health care team.

16. Diagnosis and manage oral manifestations of systemic disease.

17. Integrate culturally appropriate modalities in the comprehensive treatment plan.

## V. Obtain informed consent

18. Explain and discuss with patients, parents or guardians, findings, diagnoses, treatment options, realistic treatment expectations, patient responsibilities, time requirements, sequence of treatment, estimated fees and payment responsibilities, in order to establish therapeutic alliance between the care provider and the patient and/or parent or guardian.

#### VI. Pediatric Dentistry

19. Perform pediatric pulpal therapy.

20. Restore intra- and extra-coronal defects in primary dentition.

21. Perform uncomplicated surgical procedures on pediatric patients.

22. Use pharmacologic and non-pharmacologic behavior management skills with pediatric patients.

## VII. Periodontal Therapy

23. Diagnose periodontal disease demonstrating periodontal examination and using radiographs.

24. Treat and manage mild and moderate periodontal disease, including non-surgical and surgical techniques.

25. Recognize and manage periodontal emergencies and complications of periodontal treatment.

26. Evaluate the results of periodontal treatment and establish and monitor a periodontal maintenance program.

## VIII. Practice management and professional development

27. Function as a patient's primary oral health care provider.

28. Treat patients efficiently in a dental practice setting

29. Use and implement accepted sterilization, disinfection, universal precautions and occupational hazard prevention procedures in the practice of dentistry.

30. Practice and promote the principles of jurisprudence and ethics in the practice of dentistry and in relationships with patients, personnel and colleagues.

31. Provide patient care by working effectively with allied dental personnel including performing sit down, fourhanded dentistry.

## IX. Promoting oral and systemic health and disease prevention

32. Use accepted prevention strategies, such as oral hygiene instruction, nutritional education and pharmacologic intervention to help patients maintain and improve their oral and systemic health.

## X. Patient assessment and diagnosis

33. Obtain and interpret a patient's chief complaint, history of present illness, medical, dental, family and cultural background, social histories and review of systems.
34. Obtain and interpret appropriate laboratory and radiographic data and obtain additional diagnostic information through consultation with other health care providers.
35. Perform a history and physical examination and collect other data to establish a risk

assessment for use in the development of a dental treatment plan.

36. Establish diagnosis and risk assessment incorporating historical, laboratory, radiographic and clinical findings.

# XI. Pulpal Therapy

37. Diagnose and treat pain of pulpal origin, to include performing uncomplicated non-surgical endodontic therapy.

38. Recognize and manage uncomplicated endodontic situations and emergencies.

# XII Replacement of teeth

39. Treat patients with missing teeth who require uncomplicated removable and/or fixed prostheses.

- 40. Communicate care design with laboratory technicians and evaluate the resultant prostheses.
- 41. Recognize and manage cases requiring complicated prostheses.
- 42. Treat patients with missing teeth using uncomplicated dental implant restorations.
- 43. Manage the surgical component of dental implant systems.
- 44. Assess and manage complications of dental implants.

#### XIII. Restoration of teeth

45. Restore single teeth using a functionally acceptable range of materials and methods.

- 46. Place restorations and perform techniques to enhance facial esthetics.
- 47. Restore intra- and extra-coronal defects.

48. Restore endodontically treated teeth.

#### XIV. Sedation, pain, and anxiety control

49. Evaluate the need for behavioral and/or pharmacologic modalities in managing pain and anxiety based upon psychosocial factors and anticipated clinical procedures.

50. Use pharmacological agents in treating dental patients.

51. Provide control of pain and anxiety in the conscious patient through the use of psychological interventions, behavior management techniques, local anesthesia and oral and nitrous oxide conscious sedation techniques.

52. Prevent, recognize and manage complications related to the use and interactions of drugs to sedate patients and control pain and anxiety.

53. Provide control of pain and anxiety in the conscious patient through the use of parenteral conscious sedation techniques.

## XV. Treatment of medical and dental emergencies

54. Anticipate, diagnose and provide initial treatment and follow-up management for medical emergencies that may occur during dental treatment.

55. Diagnose and manage dental emergencies, performing uncomplicated or reversible techniques where indicated.

56. Treat intraoral hard and soft tissue lesions of traumatic origin.

57. Manage intraoral soft tissue lesions of non-traumatic origin.