



**POSTGRADUATE INSTITUTE OF MEDICINE  
UNIVERSITY OF COLOMBO**



**PROSPECTUS**

**THE POSTGRADUATE DIPLOMA IN HOSPITAL DENTAL PRACTICE**

*(To be effective from the year 2020)*

**BOARD OF STUDY IN DENTAL SURGERY**

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BOM approved – 15.02.2020  
Senate approved – 26.02.2020  
Council approved – 10.06.2020

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## 1. Nomenclature

- Title : Postgraduate Diploma in Hospital Dental Practice
- Abbreviated title : PGDHDP
- University : University of Colombo
- Faculty/Institute : Post Graduate Institute of Medicine
- Departments : Board of Study in Dental Surgery

## 2. Background and justification to the programme:

### Background

The Diploma in General Dental Practice (DGDP) was established as a one-year full time training programme by the PGIM in 1986 as a joint programme for the hospital dental surgeons and the general dental practitioners (GDPs / private dental practitioners). The aim at that time was to provide an opportunity to enable hospital dental surgeons employed by the Ministry of Health get promoted to grade 1 in their career ladder and for the General Dental Practitioners in Sri Lanka to obtain an approved postgraduate training to upgrade their practices and to acquire a postgraduate qualification.

The Board of Study in Dental Surgery decided to continue the existing Diploma as Postgraduate Diploma in Hospital Dental Practice (PGDHDP) for the dental surgeons attached to the Ministry of Health and the Armed Forces and to start a new programme for the General Dental Practitioners as Postgraduate Diploma in General Dental Practice (PGDGDP).

### Justification:

The University Grants Commission (UGC) has introduced new circulars and guidelines to improve the quality of training programmes in the University System in line with the developments and changes in the Postgraduate Education in the world and to maintain uniformity in all training programmes. The instructions in circulars and guidelines will assist the trainers and trainees to participate in activities in the training programmes fully, when they are informed in detail regarding different components in the programmes in the prospectus.

The Board of Study in Dental Surgery identified that the following areas need to be amended to improve the quality of the existing programme.

- Duration of the clinical training of different subject areas.
- Examination format

## 3. Eligibility for entry into the training program

To be eligible to apply for the PGDHDP the applicant should have

**3.1** A dental degree registered with the Sri Lanka Medical Council

**3.2** Satisfactory completion of a minimum of six years (06) in the Department of Health Services or defence services as at the date of closure of applications

- 3.3 Any other criteria specific to the relevant training programme, approved by the Board of Management
- 3.4 Comply with any other PGIM general regulations relevant to selection of trainees.

#### 4. Selection Examination

##### 4.1 Content covered in the selection examination (Annexure I)

##### 4.2 Selection Examination Format

###### Theory Paper

15 Short Answer Questions (SAQ), duration -90 minutes

Oral Medicine	02SAQ
Oral Surgery	03SAQ
Conservative dentistry	03SAQ
Prosthetic dentistry	01SAQ
Periodontology	02SAQ
Paedodontics	02SAQ
Orthodontics	02SAQ

The examiner panel will include two specialists each in Maxillo-Facial Surgery, Restorative Dentistry and Orthodontics

Each question will be marked by the two examiners independently and the average mark will be taken.

##### 4.3 Marking Scheme for the Selection Examination

Theory (15 SAQ)	150 marks
TOTAL	150 marks
Pass mark	75 marks (50%)

Candidates who obtain an overall mark of 50% or more in the above examination will be eligible for selection to follow the programme.

#### 5. Number to be selected

Available training opportunities will be indicated by the PGIM in the public circular for the PGDHDP. The number of training slots will be predetermined each year by the relevant Board and approved by the Board of Management in consultation with the Ministry of Health. This predetermined number will be selected from among those who have passed the

Selection Examination, in rank order of merit and in compliance with the General Regulations of the PGIM and relevant Examination Circulars.

## 6. Learning Outcomes

On completion of the PGDHDP the trainees should be able to

- demonstrate clear understanding of theoretical knowledge that is essential in the hospital dental practice
- display critical awareness of current issues in the field of dentistry
- apply appropriate clinical techniques efficiently and effectively relevant to hospital dental practice-
- deal with issues related to the patient care systematically and creatively, and make sound judgments and communicate decisions clearly to others. demonstrate self-direction and originality in tackling and solving problems in hospital dental practice.
- critically analyse clinical data

## 7. Course content and the duration of the training program.

### Course content

The following subject areas will be covered during the training.

Oral Surgery  
Oral Medicine  
Oral Pathology  
Conservative Dentistry  
Prosthetic Dentistry  
Periodontology  
Paedodontics  
Orthodontics  
Community Dentistry

(For learning objectives refer **Annexure II**)

## 8. Structure of the training programme

Oral and Maxillofacial Surgery	05 months
Orthodontics	02 months
Restorative Dentistry	05 months

## **9. Learning activities**

### **9.1 Lectures -5 credits**

Lectures will be held in PGIM Colombo and at the Faculty of Dental Sciences, Peradeniya.

### **9.2 Clinical training-16 credits**

#### **9.2.1 Log Diary-Maintaining a log diary of clinical procedures carried out, case records etc.**

Trainees are expected to maintain a log diary of clinical procedures carried out and authenticated by the supervisor. (refer **Annexure III**) for guidelines for the log diary)The log diary has to be submitted to the PGIM together with the application for the PGDHDP examination. Acceptance of the log diary by the Board of Study /DS is a pre-requisite to be eligible to sit for the DHDP examination.

The log diary should include evidence for conducting the following clinical procedures.

#### **Oral and Maxillofacial Surgery**

- Removal of impacted teeth (5)
- Biopsy procedures (5)
- Management of dento-alveolar trauma cases (10)
- Active participation in 11the management of patients with maxilla-facial injuries (5)
- Management of patients with oro-facial pain (10)

#### **Restorative Dentistry**

- History taking and treatment planning for 20 patients.
- Endodontic treatment on 10 teeth (5 anterior teeth, 3 premolars, 2 molars)
- Composite restoration on anterior teeth (5)
- Management of patients with periodontitis (3)
- Management of traumatised teeth (10)
- Full mouth comprehensive treatment (3)
- Management of early childhood caries (5)
- Management of missing teeth with removable appliances (3)

#### **Orthodontics**

- History taking, examination and obtaining relevant diagnostic records (15)
- Designing of removable appliances (10)
- Bite recording for functional appliances (5)
- Adjustment of removable appliances (30)

### 9.3 Case Records-4 credits

5 case records of patients treated by the trainee (two case records related to Oral Surgery and Oral Medicine, two case records related to Restorative Dentistry and one case record related to Orthodontics) should be submitted to examination branch, PGIM, 8 weeks before the commencement of the PGDHDP Examination. Two hard copies and one soft copy of each case record should be submitted for assessment. **Trainees are expected to follow the approved guidelines (refer Annexure IV)**

For reporting the orthodontic cases follow the guideline which is given separately. **(refer Annexure V)**

Component	Credits
Lectures	5
Clinical training	16
Case records	4
Total	25

### 10. Trainers and Training Centres

Trainers are specialists who fulfil the eligible criteria of PGIM to become trainers for the programme

Accredited training centres in the country identified for the purpose by the Board of Study in Dental Surgery. Training shall be either in the same centre or rotated among different centres depending on the availability of the training slots.

### 11. Monitoring progress

Progress reports should be sent to PGIM by the trainers at the end of each appointment. Follow the format given in **Annexure VI**

### 12 Assessment -PGDHDP Examination

#### Eligibility to sit the PGDHDP Examination

The candidate should have

- A minimum of 80 % attendance during the training programme
- Submitted the completed log diary
- Submitted records of five cases 8 weeks before the commencement of the examination

## **Examination format**

### **12.1 Theory Paper I-10 Short Answer Questions - duration one hour**

Oral surgery	05SAQ
Oral medicine	02SAQ
Orthodontics	02SAQ
Community Dentistry	01SAQ

Examiner panel will include two specialists each in OMF Surgery, Orthodontics and one specialist in Community Dentistry.

Each question will be marked by two examiners independently and the average mark will be taken.

### **12.2 Theory Paper II 10 Short Answer Questions -duration 01 hour**

Conservative Dentistry	04SAQ
Prosthetic Dentistry	02SAQ
Periodontology	02SAQ
Paedodontics	02SAQ

The examiner panel will include 5 specialists in Restorative Dentistry

Each question will be marked by two examiners independently and the average mark will be taken.

### **12.3 Clinical I**

Two cases in either Oral Surgery, Oral Medicine or in combination

This will entail history taking, clinical examination, decision on appropriate special investigation(s) and diagnosis with treatment planning for each case.

Duration- 40 minutes (20 minutes per case; 10 minutes for the examination and 10 minutes for the discussion).

The Panel of examiners will include two specialists in Oral and Maxillofacial Surgery Marking will be done independently, and the average mark will be taken.

### **12..4 Clinical II**

Two cases in either Conservative Dentistry, Prosthetic Dentistry, Periodontology or combined cases.

This will entail history taking, clinical examination, decision on appropriate special investigation(s) and diagnosis with treatment planning for each case Duration- 40 minutes (20 minutes per case; 10minutes for the examination and 10 minutes for the discussion per case).



The Panel of examiners will include two specialists in Restorative Dentistry.

Marking will be done independently, and the average mark will be taken.

### **12.5 Objective Structured Clinical Examination (OSCE)**

This component shall consist of fifteen (15) OSCE Stations of 5 minutes each.

- 1. Oral Surgery 02 Q
- 2. Oral Medicine. 02 Q
- 3. Conservative Dentistry 03 Q
- 4. Prosthetic Dentistry 02 Q
- 5. Paedodontics 02 Q
- 6. Periodontology 02 Q
- 7. Orthodontics 02 Q

The Panel of examiners shall consist of two specialists in OMF Surgery, four specialists in Restorative Dentistry and a specialist in Orthodontist Marking will be done independently and the average mark will be taken.

### **12.6 Case records assessment–30 minutes discussion on the cases**

50% marks for the case book and 50% marks for the discussion.

The Examiner panel shall consist of one specialist in OMF Surgery, one specialist in Restorative Dentistry and one specialist in Orthodontics Marking will be done independently and the average mark will be taken.

### **12.7 Marking Scheme of the PGDHDP Examination.**

<b>Components</b>	<b>Duration</b>	<b>Marks</b>
Theory Paper I	01 hour	100 marks
Theory Paper II	01 hour	100 marks
Clinical I (2 cases)	40 minutes	100 marks
Clinical II (2 cases)	40 minutes	100 mark
OSCE-15 stations	75 minutes	150 marks
Case records assessment	05 cases	200 marks
<b>Total marks</b>		<b>750 marks</b>

### **12..8 Requirement to pass the examination**

To pass the PGDHDP Examination a candidate should obtain an overall mark of 50% (375marks) or more and a minimum of 40% in each of the components of the examination.

## **ANNEXURE I**

### **Course Content** **PGDHDP Selection Examination**

#### **Oral Medicine**

- Recognize / diagnose / treat common diseases of the oral mucosa and other oral soft tissues of hereditary, traumatic, inflammatory, neoplastic and systemic origin.
- Diagnose common conditions that cause orofacial pain and treat them.
- Diagnose common disorders of the temporomandibular joint and treat them.
- Recognize oral manifestations of the common systemic diseases
- Recognize the common diseases of salivary glands
- Recognize common medical emergencies and be able to deal with them effectively

#### **Oral Pathology**

- Biopsy Techniques
- Abnormalities of teeth and supporting tissues
- Oral potentially malignant lesions (OPMD) and oral squamous cell carcinoma (OSCC)
- Swellings/growths and ulcers of oral mucosa

#### **Oral Surgery**

- Local anaesthesia techniques
- Exodontia techniques
- Principles of flap procedures
- Complications of minor oral surgical procedures
- Infections of the Oro-facial region
- Maxillofacial Trauma
- Neoplasia of the maxillofacial region & developmental anomalies

#### **Conservative Dentistry**

- Caries management
- Restorative materials
- Endodontics
- Dental trauma and management
- Management of discoloured teeth
- Tooth wear

#### **Periodontology**

- Formation, and composition of plaque
- Plaque induced periodontal diseases
- Diagnosis and management of plaque induced periodontal diseases

#### **Paedodontics**

- Morphology of deciduous teeth
- Caries management in children

- Pulp therapy in children
- Developmental abnormalities of teeth in children
- Delayed eruption of teeth

### **Prosthetic dentistry**

- Impression materials
- Removable partial dentures
- Complete dentures

### **Orthodontics**

- Normal development of the facial structures and the occlusion.
- Abnormalities in the development of the normal occlusion
- Assessment of an orthodontic patient and classification of malocclusions
- interceptive orthodontics
- Biology of tooth movements
- Principles and uses of Removable orthodontic appliances
- Principles of growth modifications in orthodontics.
- Adverse effects of orthodontics

**ANNEXURE II**

**Postgraduate Diploma in Hospital Dental Practice**

<b>DENTAL PUBLIC HEALTH</b>	
Objectives	<ul style="list-style-type: none"> <li>• be able to promote oral health, prevent and control oral disease</li> <li>• have knowledge of issues related to delivery of oral health care</li> </ul>
Knowledge	<ul style="list-style-type: none"> <li>• knowledge and understanding of the various methods of preventing and controlling oral diseases</li> <li>• describe the oral disease patterns in Sri Lanka</li> <li>• knowledge of the structure, organization, management, staffing, limitations of public sector dental services with special reference to Sri Lanka</li> </ul>
Skills	<ul style="list-style-type: none"> <li>• Carryout clinical procedures to prevent and control common oral disease</li> </ul>

<b>ORAL SURGERY</b>	
<b>Minor oral surgery</b>	
Objectives	Be able to <ul style="list-style-type: none"> <li>• Describe local anesthesia techniques</li> <li>• Describe exodontia techniques</li> <li>• Describe principles of flap procedures</li> <li>• Describe complications of minor oral surgical procedures</li> </ul>
Knowledge	<ul style="list-style-type: none"> <li>• Demonstrate sensitivity and concern for patient’s fear of pain</li> <li>• Be rational in treatment planning with regards to the effectiveness and cost of different treatment options with the informed consent of the patient.</li> </ul>
Skills	<ul style="list-style-type: none"> <li>• Carry out local anesthesia and exodontia procedures on patients</li> <li>• Carry out flap procedures</li> <li>• Detect and manage post-operative complications and management</li> </ul>
<b>Oro - facial infections</b>	
Objectives	<ul style="list-style-type: none"> <li>• Describe the aetiology and pathogenesis of odontogenic infections</li> <li>• List the viral infections of the orofacial region and describe their aetiology and pathogenesis</li> <li>• Outline the aetiology and pathogenesis of non-odontogenic infections in the oro-facial region</li> <li>• Describe the clinical features of the conditions mentioned above</li> <li>• Explain the mechanism of spread of infection and clinical features</li> <li>• Describe the treatment of odontogenic infections</li> <li>• Outline the principle of treatment of viral infections of the oro-facial region</li> </ul>

<p>Knowledge</p>	<ul style="list-style-type: none"> <li>• Describe the complications of spread of infections and their management</li> <li>• Decide and order necessary special investigations for the management of the oro-facial infection</li> <li>• Recognize the need for urgent intervention in a patient with spreading infection</li> <li>• Respect the need to Safeguard self and prevent cross infection when managing a patient with an infection</li> <li>• Show empathy towards the patients fear and pain when managing the infection</li> <li>• Anticipate complications and be ready to deal with emergencies</li> </ul>
<p>Skills</p>	<ul style="list-style-type: none"> <li>• Examine a patient with orofacial infection and record a relevant history of the condition and conduct relevant clinical examination in order to arrive at a diagnosis</li> <li>• Perform incision and drainage of a simple abscess and prescribe medications including antibiotics for the management of the infection</li> </ul>
<p><b>Maxillofacial trauma</b></p>	
<p>Objectives</p>	<ul style="list-style-type: none"> <li>• Describe the causation of maxillofacial injuries and discuss the epidemiology</li> <li>• Describe the clinical and radiological features of fractures of the facial skeleton</li> <li>• Discuss the management of facial fractures</li> <li>• List complications of facial fractures and describe their diagnosis and management</li> <li>• Describe the diagnosis and management of emergencies related to a patient with maxillofacial injuries</li> <li>• Describe the post-operative management of patients with maxillofacial injuries</li> </ul>
<p>Knowledge</p>	<ul style="list-style-type: none"> <li>• Recognize life threatening emergencies in a patient with maxillofacial injuries and initiate treatment or summon appropriate specialist</li> <li>• Record the relevant history of a patient with maxillofacial injuries, conduct a physical examination of a patient with maxillofacial injuries and record findings</li> <li>• Order specific investigations including appropriate radiographs for the definitive diagnosis and management</li> <li>• Diagnose complications of maxillofacial fractures and arrange for necessary management</li> <li>• Appreciate the need to detect early the life threatening emergencies in maxillofacial injuries</li> </ul>

Skills	<ul style="list-style-type: none"> <li>• Management of emergencies</li> </ul>
<b>Developmental anomalies of the maxillofacial region</b>	
Objectives	<p>Able to:</p> <ul style="list-style-type: none"> <li>• Describe the embryology and causation of common developmental anomalies of the head and neck region with a suitable classification</li> <li>• Describe the clinical features of common developmental anomalies of the head and neck region</li> <li>• Describe the management of conditions mentioned above</li> <li>• Interview a patient with a developmental anomaly and record appropriate history</li> <li>• Appreciate the need for team work</li> <li>• Recognize the need for long term follow up</li> <li>• Treat patients with facial deformities with sensitivity and kindness</li> </ul>
Knowledge	<ul style="list-style-type: none"> <li>• Conduct a clinical examination and record the findings to arrive at a diagnosis</li> <li>• Decide on special investigations necessary for diagnosis</li> <li>• Refer for appropriate specialist management</li> </ul>
Skills	<ul style="list-style-type: none"> <li>• Carry out surgical management of simple developmental anomalies such as lingual and labial frenectomy</li> </ul>

<b>ORAL MEDICINE</b>	
Knowledge	<p>Able to</p> <ul style="list-style-type: none"> <li>• Describe clinical features of lesions of traumatic origin in the mouth and the principles of their management.</li> <li>• Describe clinical features of the acute and chronic viral infections of the mouth and their management.</li> <li>• Describe the clinical features of the mainly chronic bacterial infections (tuberculosis, syphilis and leprosy) that affect the mouth and their management</li> <li>• Describe the clinical features of the different variants of candidosis in the mouth including the aetiological factors associated with them and the principles of their management</li> <li>• Describe the clinical features of the potentially malignant oral disorders encountered in Sri Lanka and the clinical features of an early malignant lesion in the mouth.</li> <li>• Describe the clinical features of ulcerative diseases of non-infective origin including mucocutaneous diseases and the principles of their management.</li> </ul>

	<ul style="list-style-type: none"> <li>• Discuss the different causes of orofacial pain and the clinical features of pain due to dental and oral mucosal causes that differentiate them from orofacial pain of extra-oral origin.</li> <li>• Discuss the clinical features of the common disorders affecting the temporomandibular joint and associated muscles and the principles of their management.</li> <li>• Describe the oral manifestations of the common systemic disorders especially gastrointestinal, nutritional deficiency, haematological and endocrine disorders.</li> <li>• Describe the clinical features of common salivary gland disorders.</li> <li>• Describe the complications that may arise in medically compromised individuals due to dental treatment if undertaken without due precautions, and discuss the precautions/preparations that need to be carried out.</li> <li>• Describe the medical emergencies that may be encountered in a dental clinic and describe the principles of their management</li> </ul>
Skill	<p>Able to Skills (Psychomotor)</p> <ul style="list-style-type: none"> <li>• Recognize the need for a mucosal biopsy in appropriate situations stated above and carry out the procedure within one’s ability.</li> <li>• Carry out an assessment of the malignant transformation risk of a particular oral potential malignant disorder in order to decide whether the patient requires referral to a specialist or can be reviewed by oneself.</li> <li>• Recognize one’s limitation(s) in managing the above diseases/ conditions and refer the patients to specialists as appropriate.</li> <li>• Carry out routine dental treatment in medically compromised patients with medical advice whenever necessary</li> <li>• Effectively manage a medical emergency by oneself or by referring to specialist units as appropriate.</li> </ul>
Attitude	<p>Able to</p> <ul style="list-style-type: none"> <li>• Display commitment to continually update oneself in knowledge and Skills concerning the disorders stated above.</li> <li>• Display commitment to provide the best care for patients, affected by the above disorders by choosing to treat the patient when feasible and refer the patient to appropriate specialist as and when one’s limitation is realized.</li> <li>• Display empathy towards patients with orofacial disorders.</li> </ul>

## ORTHODONTICS

Objectives	<p>Able to:</p> <ul style="list-style-type: none"> <li>• Understand normal occlusion and malocclusions</li> <li>• Understand the development of normal occlusion</li> <li>• Understand etiology of malocclusions</li> </ul>
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	<ul style="list-style-type: none"> <li>• Understand the importance of history taking, examination and appropriate special investigations of orthodontic patients in order to arrive at a diagnosis.</li> <li>• Understand the biology of tooth movements.</li> <li>• Understand the role of the hospital dental surgeon in the management of the patients who are waiting for orthodontic treatment</li> <li>• Understand the principles of treatment planning including case selection for different orthodontic appliances</li> <li>• Understand the principles of removable appliances including indications, designing and management.</li> <li>• Understand the principles of functional appliances.</li> <li>• Understand the principles of retention after orthodontic treatments</li> </ul>
Knowledge	<p>Able to</p> <ul style="list-style-type: none"> <li>• describe features of normal occlusion and different types of malocclusions</li> <li>• describe the influence of genetic and environmental factors in the etiology of different types of malocclusions.</li> <li>• describe the role played by the skeletal, soft tissues and dental factors in the etiology of malocclusions</li> <li>• detect problems of developing occlusion and take steps for appropriate interceptive managements</li> <li>• analyze orthodontic records and special investigation reports</li> </ul>
Skill	<p>Able to</p> <ul style="list-style-type: none"> <li>• carry out a history taking and clinical examination of orthodontic patients</li> <li>• take impressions of upper and lower dental arches</li> <li>• Design removable and functional appliances.</li> <li>• Deliver, adjust and supervise removable and functional appliances</li> <li>• Place appropriate retainers</li> </ul>

<b>PERIODONTOLOGY</b>	
Objective:	<p>Able to:</p> <p>Provide periodontal follow-up care for patients with varying periodontal treatment needs, by applying all non-surgical treatment methods, preventive and supportive care as well as simple surgical periodontal treatment methods.</p>
Knowledge:	<p>Able to:</p> <ul style="list-style-type: none"> <li>• Describe characteristics of periodontal health Vs ill-health.</li> <li>• Describe the role of aetiological &amp; contributory factors, initiation, progression and recurrence of chronic inflammatory periodontal diseases.</li> <li>• Explain the relationship between plaque-induced periodontal disease and systemic conditions including the role of oral health in general health.</li> </ul>



	<ul style="list-style-type: none"> <li>• Describe clinical and radiological features related to plaque-induced periodontal diseases.</li> <li>• List non-plaque induced periodontal diseases and to describe aetio-pathogenesis of such lesions.</li> <li>• Explain plaque formation, composition and pathogenic processes of plaque-induced disease including the immuno-inflammatory responses.</li> <li>• Explain the formation of dental calculus and its relationship to disease.</li> <li>• Explain the relationship between pulpal and periodontal disease.</li> <li>• List the requirements to arrive at a periodontal diagnosis, prognosis and treatment plan as part of the comprehensive dental care of the patient.</li> <li>• Discuss with advantages and disadvantages of the rationale for non-surgical and surgical techniques in periodontal treatment.</li> <li>• Explain the biological aspects of wound healing including resolution of inflammation.</li> <li>• List the therapeutic agents used in periodontal therapy, and be able to discuss their advantages and disadvantages.</li> <li>• Explain the inter-relationship between relevant medical conditions and periodontal disease /&amp; treatment.</li> <li>• Explain the principles of health education and patient behaviour in motivating patients for good oral hygiene.</li> <li>• Describe the effects of trauma from occlusion and its possible effects in progressive periodontal breakdown.</li> <li>• Describe the basic anatomy of osseointegrated implants and be able to explain the methods to maintain peri-implant health.</li> </ul>
<p>Skills:</p>	<p>Able to:</p> <ul style="list-style-type: none"> <li>• Carryout a comprehensive dental &amp; periodontal examination of a patient including the use of radiography in order to determine the aetiology, diagnosis, severity and prognosis of periodontal disease and formulate a treatment plan.</li> <li>• Motivate patients towards better dental and periodontal care and to carry out / take measures to improve oral hygiene at an individual-patient level, and also to evaluate effects of such periodontal care.</li> <li>• Remove all deposits from teeth and where possible to correct factors predisposing to their accumulation.</li> <li>• Carry out thorough root surface debridement under local anaesthesia.</li> <li>• Detect any occlusal factor contributing to the clinical manifestation of the periodontal disease and to determine the most appropriate method of treatment in each situation.</li> <li>• Carry out other treatment as appropriate including the use of simple surgical techniques, being aware of their limitations in the treatment of more complex cases.</li> </ul>

	<ul style="list-style-type: none"> <li>• Evaluate the results of periodontal treatment in the short-term as well as the long-term.</li> <li>• Carry out appropriate modifications to the standard periodontal care programme, for special-need patients whose medical conditions or handicap may pose particular problems to their periodontal health.</li> <li>• Communicate effectively with other members of the dental team in order to work together to deliver the best possible follow-up periodontal care for the patients.</li> <li>• Identify patients who would need treatment under a specialist, and refer such patients for specialist care appropriately.</li> </ul>
Attitude:	<p>Able to:</p> <ul style="list-style-type: none"> <li>• Be empathetic towards individual patients while extending best possible care to improve the periodontal status.</li> </ul>

<b>PROSTHETIC DENTISTRY</b>	
Objectives	<p>Able to:</p> <ul style="list-style-type: none"> <li>• Discuss the importance of the functional anatomy of the oro-facial structures which are relevant in the rehabilitation of patients.</li> <li>• Take adequate history and carryout detailed examination of a patient with prosthetic treatment needs.</li> <li>• Request relevant special investigations and interpret the reports.</li> <li>• Arrive at a diagnosis of the condition and to plan treatment.</li> </ul>
Knowledge	<p>Abe to</p> <ul style="list-style-type: none"> <li>• Select and prepare patients for the special types of dentures Immediate dentures,Over dentures ,Metal partial dentures</li> <li>• Describe partial denture classification and list the components of partial dentures and their functions</li> <li>• Describe the uses of different types of articulators for teeth setting.</li> <li>• Appreciate the importance of proper handling of the impression</li> </ul>
Skill	<p>Able to</p> <ul style="list-style-type: none"> <li>• Carry out necessary, simple pre-prosthetic mouth preparations relevant in the rehabilitation of patients.</li> <li>• Record the primary impressions and design appropriate special trays for master impression</li> <li>• Record the master impressions accurately with suitable impression materials</li> <li>• Carry out the jaw relation recording with record blocks, select the teeth and give instructions to the technician</li> <li>• Design the partial dentures</li> <li>• Check the trial prosthesis in the mouth, do necessary adjustments and instruct the technician.</li> <li>• Deliver the finished denture and give instructions to the patient</li> <li>• Recall the patient and carry out the necessary adjustment.</li> </ul>
Attitude:	<p>Able to</p>

	<ul style="list-style-type: none"> <li>• Review the patients wearing prostheses periodically and carry out necessary adjustments / interventions such as -             <ol style="list-style-type: none"> <li>1. Relining and rebasing</li> <li>2. Repair and additions</li> <li>3. Manage the patients with denture-induced stomatitis and hyperplasia</li> </ol> </li>   <li>• Assess the patients -             <ol style="list-style-type: none"> <li>1. Following facial trauma and construct simple prosthesis</li> <li>2. Following surgery to the mouth and construct appropriate prosthesis</li> <li>3. With congenital defects of the jaws and construct appropriate simple obturators</li> </ol> </li>   <li>• design the appropriate type of splints for different purposes, such as -             <ul style="list-style-type: none"> <li>Gunning splints</li> <li>Bite raising appliances</li> <li>Surgical obturators</li> </ul> </li>   <li>• Examine, assess and select patients who could be in need of the specialized treatment given below, and to refer them for appropriate specialized units.             <ul style="list-style-type: none"> <li>Implant dentures</li> <li>Orthognathic surgery ,Overdentures</li> </ul> </li> </ul>
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<b>PAEDODONTICS</b>	
Objective	<p>Able to</p> <ul style="list-style-type: none"> <li>• Provide dental care for child patients with varying treatment needs, by applying all preventive and supportive methods</li> </ul>
Knowledge	<p>Able to</p> <ul style="list-style-type: none"> <li>• Take a proper history, perform a thorough examination, and arrive at a diagnosis and carry out a long term treatment plan for child patients.</li> <li>• Explain the concepts of behaviour management of child dental patients.</li> <li>• Understand chronology and sequence of the eruption of primary and permanent dentition and the chronology and sequence of the exfoliation of primary dentition.</li> <li>• Explain the methods of pulp treatment for primary dentition, their indications, contra indications, including the techniques.</li> <li>• Explain the differences and modifications of cavity preparation for primary dentition.</li> </ul>

	<ul style="list-style-type: none"> <li>• List the major types of developmental anomalies of teeth, and be able to arrive and defend the diagnosis.</li> <li>• Recognize / diagnose common gingival diseases in children</li> <li>• Classify traumatic injuries of teeth in children.</li> </ul>
Skill	<p>Able to</p> <ul style="list-style-type: none"> <li>• Should be able to use/demonstrate a spectrum of behaviour management techniques in handling children.</li> <li>• Treat dental caries in a child patient.</li> <li>• Carry out preventive procedures in dentistry for child patients and to educate the patients as well as their parents on prevention of dental diseases.</li> <li>• And be able to perform pulp therapy on patients.</li> <li>• Manage traumatic of injuries teeth in children.</li> <li>• Manage / refer child patients with dental problems who are with special needs / medically compromised.</li> </ul>

<b>RESTORATIVE DENTISTRY</b>	
<b>Dental Materials</b>	
Objectives	<p>Able to:</p> <ul style="list-style-type: none"> <li>• Recognize the importance of selecting safe and cost effective materials giving acceptable short-term and long-term results.</li> <li>• Arrive at a definitive diagnosis regarding caries and pulp status and make treatment decisions</li> </ul>
Skill	<ul style="list-style-type: none"> <li>• Select appropriate restorative materials and liners.</li> <li>• Prepare cavities following current principles.</li> <li>• Apply linings and bases.</li> <li>• Restore teeth with amalgam and tooth colour materials.</li> <li>• Recognize the importance of preserving tooth substance and vitality while preparing cavities.</li> </ul>
<b>Indirect Restorations</b>	
Objectives	<ul style="list-style-type: none"> <li>• Recognize the importance of case selection in crown and bridge work &amp; to perform relevant special investigations.</li> <li>• Select the appropriate design, materials and tooth preparations for crowns and simple bridges.</li> <li>• Assess the quality and short comings of constructed crowns and bridges.</li> <li>• Cement and finish crowns and simple bridges.</li> <li>• Review, diagnose and treat complications arising from crowns and bridges.</li> </ul>
Skill	<ul style="list-style-type: none"> <li>• Appreciate the importance and the need for perfection of all stages for a restoration.</li> </ul>

	<ul style="list-style-type: none"> <li>• Appreciate the need to perform each step in endodontic treatment to its perfection in order to obtain good results.</li> <li>• Appreciate the need to follow up patients in order to ensure long term success.</li> <li>• Appreciate the importance and the need for perfection of all stages for a restoration.</li> <li>• Appreciate the cost of crown and bridge work</li> <li>• Appreciate the need to follow up patients with crowns and bridges to ensure long term success</li> </ul>
<b>Endodontics</b>	
Objectives	<p>Able to</p> <ul style="list-style-type: none"> <li>• Diagnose, plan and deliver endodontic treatment on patients presenting with pulpal pathology</li> </ul>
Knowledge	<p>Able to</p> <ul style="list-style-type: none"> <li>• Understand the importance of saving teeth (where possible) by endodontic therapy.</li> <li>• Arrive at a diagnosis of the pulp status when planning restorative treatment.</li> <li>• Assess the restorability of the tooth concerned and plan the appropriate restoration</li> <li>• Select appropriate patients and to perform apicectomy.</li> </ul>
Skill	<p><i>Able to</i></p> <ul style="list-style-type: none"> <li>• Assess the suitability of Endodontic treatment for a given patient considering the patients’s general, oral and tooth factors</li> <li>• Carry out relevant special investigations.</li> <li>• Select appropriate endodontic instruments and materials.</li> <li>• Prepare the access cavity.</li> <li>• Estimate the working length/s of root canals.</li> <li>• Prepare the root canal/canals.</li> <li>• Obturate root canal/canals at the appropriate time.</li> <li>• Assess the success of an endodontically treated tooth.</li> <li>• Diagnose and manage common endodontic complications and accidents.</li> </ul>
Attitude	<p><i>Able to</i></p> <ul style="list-style-type: none"> <li>• Appreciate the need to perform each step in endodontic treatment to its perfection in order to obtain good results.</li> <li>• Appreciate the need to follow up patients in order to ensure long term success.</li> </ul>

**DENTAL TRAUMA, NON CARIOUS TOOTH SUBSTANCE LOSS, DISCOLOURATION AND DEVELOPMENTAL ANOMALIES**

Objective	Able to
-----------	---------

	<ul style="list-style-type: none"> <li>• Diagnose, plan and deliver treatment on patients suffering from dental trauma, non-carious tooth substance loss, discolouration of teeth and developmental anomalies of teeth</li> </ul>
Knowledge	<p><i>Able to</i></p> <ul style="list-style-type: none"> <li>• Assess a patient presenting with dental trauma and identify any emergency condition requiring medical treatment</li> <li>• Identify the type of dental injury based on the clinical presentation and radiographic evidence</li> <li>• Plan the emergency dental management of traumatic dental injuries</li> <li>• Assess a patient presenting with NCTSL</li> <li>• Identify the causative factors of NCTSL</li> <li>• Appreciate the multifactorial nature of NCTSL</li> <li>• Identify the condition causing localized or generalized discolouration of teeth</li> <li>• Identify the management strategy for the discolouration based on the clinical presentation, structural considerations of the discoloured teeth, efficacy of the treatment modality, patient expectations, cost and prognosis</li> <li>• Identify common developmental anomalies of teeth.</li> </ul>
Skill	<p><i>Able to</i></p> <ul style="list-style-type: none"> <li>• Plan the emergency dental management of traumatic dental injuries</li> <li>• Carry out treatment of traumatized teeth based on standard guidelines</li> <li>• Provide simple rehabilitative treatment for managing NCTSL</li> <li>• Follow up treated and untreated NCTSL patients and identify the progression, complications and necessary intervention</li> <li>• Carry out selected treatment procedures on discoloured teeth</li> <li>• Identify other complications of patients suffering from discoloured teeth.</li> </ul>
Attitude	<p><i>Able to</i></p> <ul style="list-style-type: none"> <li>• Follow up patients with dental trauma and identify complications</li> <li>• Plan referrals patients suffering from dental trauma to specialized units if treatment is beyond the scope of the trainee</li> <li>• Plan referrals for patients requiring supportive medical management</li> <li>• Plan preventive strategies for NCTSL</li> <li>• Identify complications of these developmental dental anomalies on the teeth, oral cavity and the patient</li> </ul>

**ANNEXURE III**

**TRAINEE LOG DIARY**

*Passport  
size  
Photograph*

**Name of the Trainee:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of the Supervisors:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**INTRODUCTION**

The log book should include a record of trainee’s overall training and experience in the hospital dental clinic setting with relevant clinical and academic activities. The logbook should indicate the practical experience obtained by the candidate during the training.

1. You are required to list, in chronological order, the training appointments which you have followed during the training period.
2. You are required to record all procedures in which you have been involved during the tenure of your listed training. Each log entry must be countersigned by the supervisor. The record of the clinical procedure includes the date of the procedure, the patient’s hospital / clinic number and age, the nature of the procedure and an indication of whether it was performed without supervision (P), or under supervision (S) or if assisted (A) or observed the procedure.
3. Consolidated entry: At the end of each training appointment, you are required to record consolidated list of clinical procedures in separate pages provided.
4. Academic activities: You are required to record the various academic activities in which you have been involved during the training. This record should include contributions to clinical and scientific meetings, attendance at meetings and training courses, involvement in research projects and audit activities.
5. A copy of the logbook should be submitted to the Post Graduate Institute of Medicine (PGIM) at the end of the training programme.
6. Submission of the logbook is a **pre-requisite** to sit for the Diploma in Hospital Dental Practice (DHDP) examination.

**TRAINING POSTS**

Training Centre	Specialty	Start Date	Finish Date	Trainer	Signature




**ACADEMIC ACTIVITIES**

**A. Conferences, Seminars, Workshops, Courses and Study days**

<b>Dates</b>	<b>Title</b>	<b>Location</b>	<b>CPD points</b>


Name:.....

Signature of Trainer:.....

**B. Presentations**

Dates	Title (O) (P) (L) delete	Location


**O-Oral, P - Poster, L - Lecture**

**Name:.....**

**Signature of Trainer:.....**

**RECORD OF CLINICAL PROCEDURES**

<b>Date</b>	<b>Record number</b>	<b>Age</b>	<b>Procedure</b>	<b>PSAO</b>	<b>LA=1 LA/Sed=2 GA=3</b>


**P- Performed, S - Supervised, A - Assisted, O - Observed**  
**LA-Local Anesthesia ,Sed -Sedation, GA -General Anesthesia**

**Name:.....**

**Signature of Trainer:.....**



## **ANNEXURE IV**

### **POST GRADUATE DIPLOMA IN HOSPITAL DENTAL PRACTICE (PG DHDP) OF THE POSTGRADUATE INSTITUTE OF MEDICINE (PGIM)**

#### **Guidelines for Preparation of Case records**

- Records of 5 cases treated by the trainee (two cases in Oral Surgery and, Oral Medicine, two cases in Restorative dentistry and one case in Orthodontics)
- Case records should be submitted 8 weeks before the scheduled date of commencement of the PGDHDP examination.

#### **A. GENERAL FORMAT**

Give a brief introduction to the case. This should be followed by a detailed history inclusive of all. personal history, family history past medical history etc. A thorough clinical examination has to be performed and accurately documented. Any special investigations done should be listed and if possible copies of reports annexed. The special investigations would be radiographs-both intra-oral and extra- oral, study models, haematology reports, microbiology culture reports, histopathology reports, biochemical reports. In presenting the case the candidate is free to use line drawings, photographs, histograms, graphs and photomicrographs and any other accepted method of data presentation. A differential diagnosis and a treatment plan should be included. Details of treatment procedure should be described eg. enucleating a cyst. Case documentation should be completed with a good discussion of the case and its management, relating to the current relevant published literature.

\*For reporting the orthodontic cases follow the guideline which is given separately.  
(Annexure V)

#### **B. THE FOLLOWING POINTS SHOULD BE OBSERVED IN THE PREPARATION OF THE CASE RECORDS**

##### **1. Paper**

Clear white paper 210mm x 297 mm in A4 size and of good quality should be used, for the final two copies. One type of paper must be used throughout a given case book except for charts, figure and photographic plates for charts and diagrams.

## 2. **Typing**

Any standard type is acceptable, but one size and style must be used consistently throughout the case book. All typing should be double-spaced and on one side of the paper only. Photocopies should be legible and free of smudging or overexposure.

## 3. **Margins**

A minimum left margin of 4.0 cm is required. Other margin should be at least 1.5 cm.

## 4. **Numbering**

All pages to be serially numbered on the centre of the upper margin and a list of contents prepared where each case is matched against a page number (pages with illustration need not be numbered).

## 5. **Illustrations and Tables**

Photographs of patients, photomicrographs, photographs of models etc., could be labeled with arrows in Indian ink or with letter-set (available from H.G. Cave & Co.). All illustrations and tables must be numbered and accompanied by titles presented below the illustration.

## 6. **Graphs**

Colours could be used for comparison of data.

## 7. **Units of physical quantities**

Candidates should use standard international units.

## 8. **General Form and Style**

Consistency of presentation is required. The generally used subdivisions are: -

- Title page –

Case Records, a fulfilment as Part of the requirement for  
Post Graduate Diploma in Hospital Dental Practice (PG DHDP)  
of the  
Postgraduate Institute of Medicine, University of Colombo.

by

Candidate's Name

and

Date, Month, Year

- List of contents
- Summary sheet
- Acknowledgements
- Presentation of case
  - E.g. Orthodontic problem with Angle's Class II Division 1 malocclusion
  - An epulis in a three-month old baby
  - A patient presenting with facial pain
  - Removal of a wisdom tooth
- References
- Appendix if any

## 10. Summary Sheet

Next to the contents sheet there should be a summary sheet with the Consultant's/Supervisors signature.

Case No	Title	Place of Work	Supervising Consultant's Name	Supervisor's signature
1	Orthodontic problem with Class II Division1 malocclusion	Dental Institute	Dr S S	



## 11. References

Reference should be cited in the text by author and year and not numbered. (Harvard Style)

All references in the text must be listed with names of authors arranged alphabetically at the end of each Case. References should be composed in the following order.

Author's name and initials, year of publication, title of article, name of journal (in full or abbreviated as in worlds of scientific periodicals), volume number if available, pages (first and last page)

e.g. Kra I.R.H. and Mc Clean J. (1952) Response of the human pulp to self- polymerizing acrylic restorations, Brit. Dent. J. 92, pp 255 - 261.

## 12. Binding

- Two hard copies of each case record separately in Spiral Binding and one soft copy should be submitted at least 8 weeks before the scheduled date of commencement of the PG DHDP examination.
- Colour code for case records;
  - Maxillofacial surgery -Red
  - Restorative dentistry- blue
  - Orthodontics- Green
- Records will be returned to the candidates after they have been assessed by the examiners. The Candidate is expected to make the suggested corrections and return two copies of case records (all five) bound together in hard cover within one month after the results is released. One copy will be filed in the PGIM Library and the other copy will be returned to the candidate
- The colour of the outer cover should be maroon in colour and the title embossed in gold coated lettering. The spine of the Case Book should have the PG DHDP in the upper end, the name of the candidate in the middle and the year at the lower end, all embossed in gold coated lettering.

## ANNEXURE V

**Format for Case Record-Orthodontics**

The Orthodontic case record should be made according to the format given. Template can be obtained from the PGIM.

The font should be Arial and the font size either 12 or 14. Content should be as follows:

Page 1

**CASE INTRODUCTION**

A brief introduction and description of the case [Maximum of two A4 pages]

Section 1 Pre-treatment Assessment

**PATIENT DETAILS**

Initials:	
Sex:	
Date of birth:	
Age at start of treatment:	

PATIENTS COMPLAINTS

RELEVANT MEDICAL HISTORY

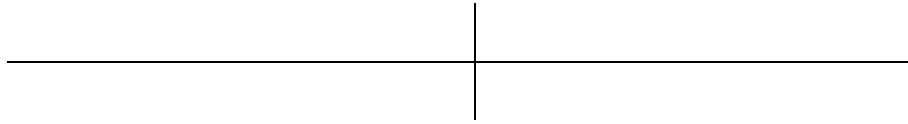
CLINICAL EXAMINATION: EXTRA-ORAL FEATURES

CLINICAL EXAMINATION: INTRA-ORAL FEATURES

Soft tissues:

Oral hygiene:

Erupted teeth present:



General dental condition:

Page 2

CROWDING / SPACING

Maxillary arch:

Mandibular arch:

OCCLUSAL FEATURES

Incisor relationship:	
Overjet (mm):	
Overbite:	
Centrelines:	
Left buccal segment relationship:	
Right buccal segment relationship:	
Crossbites:	
Displacements:	
Other occlusal features:	

Page 3

PRE-TREATMENT PHOTOGRAPHS: EXTRA-ORAL

[Attach frontal and profile photographs to this page]

Page 4

PRE-TREATMENT PHOTOGRAPHS: INTRA-ORAL

[Attach anterior, left and right occlusal intraoral photographs to this page]

Page 5

PRE-TREATMENT PHOTOGRAPHS: OTHER RELEVANT VIEWS

[Attach other relevant views (eg: Models) to this page]

Page 6

GENERAL RADIOGRAPHIC EXAMINATION

Pre-treatment radiographs taken:

Un erupted teeth:

--	--

Teeth absent:

--	--

Teeth of poor prognosis:

--	--

Other relevant radiographic findings:

Page 7

PRE-TREATMENT RADIOGRAPHS

Page 8

OTHER SPECIAL TESTS / ANALYSES

[This is optional. Present details and results of any other tests or measurements which are available, and which contribute to the assessment of the case]<sup>3</sup>

Page 9

DIAGNOSTIC SUMMARY

PROBLEM LIST

[Add as few or as many as are appropriate to the case]

- 1.
- 2.
- 3.

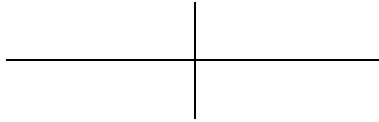
AIMS AND OBJECTIVES OF TREATMENT

[Add as few or as many as are appropriate to the case]

TREATMENT PLAN

Relevant Dental Treatment prior to Orthodontic treatment:

Extractions:



Appliances:

Special anchorage requirements:

Minor adjunctive surgery:

Major adjunctive surgery:

Additional dental treatment:

Proposed retention strategy:

Page 10

SECTION 2. TREATMENT

TREATMENT PROGRESS

Start of active treatment:

Age at start of active treatment:

End of active treatment:

Age at end of active treatment:

End of retention:

Page 11

KEY STAGES IN TREATMENT PROGRESS

[Provide a brief summary of approximately 8 - 10 key stages in the treatment sequence]

	DATE	STAGE
1.		
2.		
3.		
4.		

5.		
6.		
7.		
8.		

Page 13

MID-TREATMENT PHOTOGRAPHS:

[ Attach any relevant photographs which illustrate treatment mechanics / appliance to this page]

Page 14

SECTION 3. POST-TREATMENT ASSESSMENT

OCCLUSAL FEATURES

Incisor relationship:	
Overjet (mm):	
Overbite:	
Centrelines:	
Left buccalsegment relationship:	
Right buccal segment relationship:	
Crossbites:	

Displacements:	
Functional occlusal features	
Other occlusal features:	

COMPLICATIONS ENCOUNTERED DURING TREATMENT

Page 15

RADIOGRAPHS TAKEN TOWARDS / AT END OF TREATMENT(Optional)

Radiographs taken:

Relevant findings:

Page 16

POST-TREATMENT PHOTOGRAPHS: EXTRA-ORAL

[Attach frontal and profile photographs to this page]

Page 17

POST-TREATMENT PHOTOGRAPHS: INTRA-ORAL

[Attach anterior, left and right occlusal intraoral photographs to this page]

Page 18

POST-TREATMENT PHOTOGRAPHS: OTHER RELEVANT VIEWS[Attach any other relevant photographs ( eg: Models) to this page]

Page 19

SECTION 4. CRITICAL APPRAISAL

[Not more than A4 one page]

**ANNEXURE VI**



**Progress report**

Name of the candidate	Poor	Satisfactory	Good	Excellent
SS			X	

Comments if any

.....  
.....  
.....  
.....

Name of the Supervisor : \_\_\_\_\_

Signature : \_\_\_\_\_

Date: \_\_\_\_\_