***Faculty of Dentistry***

***Division of Graduate Dental Studies***



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**PAEDIATRIC DENTISTRY**

**Residency Training Programme**

**leading to the degree of**

**Master of Dental Surgery (MDS)**

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# 1. TEACHING STAFF

Programme Director: A/Professor Catherine Hong

Associate Directors: Dr Bien Lai (National Dental Centre)

Dr Chay Pui Ling (KK Women’s and Children’s Hospital)

Dr Tang Kok Siew (School Dental Service, Health Promotion Board)

**Paediatric Dentistry**

Full Time Faculty (NUS):

Dr Betty Mok Yuen Yue

A/Professor Hu Shijia

Adjunct/Part Time Faculty:

Dr Bien Lai (National Dental Centre)

Dr Judith Quek (National Dental Centre)

Dr Sim Chien Joo (NUCOHS)

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Dr Badrun Nafis

Dr Lim Wanyi

Dr Melissa Tan

Dr Ng Jing Jing

Dr Toh Siew Luan

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**Orthodontics**

A/Professor Kelvin Foong (NUCOHS)

Dr Kaan Sheung Kin

**Oral Surgery**

A/Professor Asher Lim (NUCOHS)

A/Professor Raymond Wong (NUS)

A/Professor Intekhab Islam (NUS)

**Basic Medical Science Course Instructors**

**Biostatistics and GRMM Course Instructors**

**Paediatric Medicine Rotation Clinical Supervisors**

# 2. COMMITTEE FOR PAEDIATRIC DENTISTRY

A/Professor Catherine Hong (Chair)

Adjunct A/Professor Rashid Tahir

Dr Betty Mok

Dr Bien Lai

Dr Chay Pui Ling

Dr Tang Kok Siew

# 3. INTRODUCTION

Paediatric Dentistry is an age dependent specialty. The discipline is very broad based, and the aim of this program is for graduates to develop an understanding of all aspects of paediatric dentistry. On satisfactory completion of this 3-year course, students are awarded the Master of Dental Surgery (MDS) in Paediatric Dentistry.

The program is administered by the Division of Graduate Dental Studies, Faculty of Dentistry. The clinical component of the programme will be conducted at the Faculty of Dentistry National University of Singapore, School Dental Centre (Health Promotion Board) and National Dental Centre. The didactic component will be conducted at the Faculty of Dentistry.

A major part of the clinical course comprises of the routine and advanced clinical dental care of children and adolescents including those with special healthcare needs (i.e. medically, mentally, physically, socially or behaviourally disadvantaged). The trainee/resident will also participate in the after-hours emergency service.

Aspects of the didactic course will be covered in formal lectures, seminars and tutorials conducted by full time teaching staff of the Discipline of Orthodontics and Paediatric Dentistry in the Faculty of Dentistry, National University of Singapore as well as part time teaching staff from other institutions and private practice.

Additionally, the resident is expected to develop a further understanding and knowledge in the discipline of Paediatric Dentistry from his or her own reading and enquiry. Trainees/ residents are expected to spend additional time for research, assignments, and reports out of office hours.

All residents must undertake a research project under the direction of an assigned supervisor, which is to be presented as a written dissertation and defended in an oral examination as part of the requirement for the degree of Master of Dental Surgery (Paediatric Dentistry).

Trainees/ residents may also choose to read elective courses in areas outside of Paediatric Dentistry.

# 4. PROGRAMME AIMS

The programme aims to graduate specialists:

* Who are proficient in all areas of dentistry for children and adolescents; from birth to 18 years of age.
* With an in-depth knowledge and understanding of the basic and clinical science foundations for paediatric dental treatment and to use this to perform evidence-based clinical care.
* Who are proficient to pursue scholarly activity and/or research in paediatric dentistry.
* Who will develop and maintain a desire for self-evaluation, life-long learning, and professional growth and development.
* Who will participate in and understand the value of community-based activities?

The graduates from this Paediatric Dentistry programme should be experienced in:

* Diagnosis of abnormalities in general, craniofacial and dento-alveolar development.
* Diagnosis of oral disease in children and adolescent.
* Effective communication with family members including parents and legal representatives of the child patient.
* Formulating appropriate dental treatment plans based on the physical, behavioural and cognitive development of children and adolescents of varying age groups (i.e. infant/ toddler, 3-6 years, 7-12 years and 13-18 years).
* Formulating appropriate dental treatment plans for children and adolescents with special healthcare needs.
* Selection and delivery of appropriate preventive, restorative and surgical interventions for dental decay in primary and immature permanent teeth.
* Selection and delivery of appropriate preventive and interceptive periodontal programmes for children and adolescents.
* Non-pharmacological and pharmacological behavioural management techniques in children and adolescent by applying the principles of child cognitive development and behavioural psychology in the dental setting.
* Hospital and operating room practice which includes dental treatment under general anaesthesia.
* Diagnosis and management of paediatric orofacial trauma.
* Diagnosis of mucosal, soft and hard tissue pathology occurring in and around the mouth from birth through adolescence.
* Recognition and diagnosis of orthodontics problems in the developing occlusion; should be proficient to plan and deliver interceptive orthodontic intervention in the primary and mixed dentition using removable or simple fixed appliances including space maintainers.
* Effective communication and collaboration in multi-disciplinary teams concerned with the welfare of children. (e.g., Cleft Lip Palate teams)
* The design and conduct of research studies.

# 5. PROGRAMME OUTLINE

This training programme is a full-time course that extends over three calendar years (36 months) of 42 - 45 weeks per year beginning July. The total course requirement over the three years is allocated to:

* Supervised clinical training: 50 - 60%
* Didactics: 15 - 20%
* Research: 15 - 20%
* Teaching, self-directed learning and administrative time: 5%

ENTRANCE REQUIREMENTS

A candidate will be eligible for consideration for entry into specialty training in Paediatric Dentistry if he or she is a holder of a degree in Dental Surgery with two years’ experience in full-time clinical practice or a period of internship after graduation from basic dental foundation training. Holders of degrees registrable by dental boards in India, Indonesia and Philippines and other qualifications approved by the Division of Graduate Dental Studies are acceptable and can be admitted to the programme. A TOEFL score of 550- 600 or IELTS score of 7 and above is needed.

CLINICAL REQUIREMENTS

This requirement is fulfilled by attendance in the clinics at the Discipline of Orthodontics and Paediatric Dentistry, Faculty of Dentistry, National University of Singapore and in rotations at affiliated institutions. The teaching staff will decide if the student has shown clinical work of satisfactory variation and quality. There are credits for clinical work which is awarded for satisfactory completion of the presentation cases and satisfactory performance on clinics throughout the course.

DIDACTIC REQUIREMENTS

Trainees/ residents must participate in all required lectures, seminars and presentations for satisfactory completion of the course and attain the appropriate number of academic credits.

RESEARCH REQUIREMENTS

Trainees/ residents are required to complete a research project under the supervision of a member of the teaching staff. When a project has been decided upon, a research protocol will be submitted to the programme director. There are credits awarded for the research project. The completed project must be submitted as a well-written scientific dissertation no later than six weeks before the date of the oral examination. It is expected that each student will present a seminar on his or her research to the staff of the discipline at various times during the course and on assigned topics as required.

# 6. COURSE CURRICULUM

This curriculum has been developed by the local planning committee based on the i. Specialty training curriculum developed by the Specialty Advisory Committee for Paediatric Dentistry, The Faculty of Dental Surgery, The Royal College of Surgeons of England and the ii. Accreditation Standards for Advanced Specialty Education Programs in Pediatric Dentistry, Commission on Dental Accreditation, American Dental Association.

## DIDACTICS

i. Basic Cardiac Life Support training

ii. Basic Medical Science (BMS) Course: September (Y1 – Vacation Time)

1. Regional Anatomy
2. Dental Anatomy and Histology
3. Pathology
4. Physiology

With effect from AY2011/2012, matriculated graduate students with Part I MDS or its equivalent will be exempted from attending the BMS course.

iii. MDS Biostatistics & GRMM course

The aim is to provide comprehensive working knowledge of various areas of the biological sciences that interrelate to Paediatric Dentistry. The topics will include:

1. Biostatistics & Epidemiology
2. Research Methodology
3. Evidence Based Dentistry
4. Biomedical Ethics

iv. Clinical Dental Photography

v. Paediatric Dentistry Scope

1. Growth and Development: To understand the basic processes of normal growth and development and how perturbations result in abnormalities.
   * + Principles of Mendelian Genetics in relation to patterns of inheritance, gene expression, penetrance.
     + The mechanisms by which congenital abnormalities arise.
     + Concepts of dysmorphology including malformations, deformations and deformities
     + The embryological development of the head and neck, including teeth.
     + Effects of prematurity on metabolism and growth and development
     + Postnatal growth and development of the head and neck.
     + Covered during GRMM course and 2-3 tutorial sessions within Paediatric Dentistry programme and conjoint with Orthodontic residents
2. Diagnosis and Treatment Planning

* Child assessment (History taking, patient examination, assessment, diagnosis, treatment planning and prognosis for acute and chronic conditions).
  + - Diagnosis and treatment planning for different age groups (infant/toddler, 3-6 years of age, 7-12 years of age, 13-16 years of age) and children with special health care needs.
    - Recognise how physical, behavioural and cognitive development may affect the ability of children/adolescents to accept dental care.
    - Covered during treatment planning seminars on a bimonthly basis and 1 tutorial session

1. Pathogenesis, Prevention and Treatment of Oral Disease in Children and Adolescents
   * + To identify and assess caries risk factors.
     + Have knowledge and background in research and clinical studies in the usage of sealants, preventive restorations and minimal intervention dentistry.
     + Be able to prevent and control dental caries chemically by fluoride and antimicrobial agents.
     + To gain a better understanding about home care, prenatal counselling, motivating parents to take care of their children and involvement of other family members.
     + To have an in depth understanding of the pathogenesis, diagnosis and management of periodontal diseases, the factors associated with periodontal diseases in children, the differences between the manifestations and development of periodontal diseases in children and adults.
     + To understand the role of diet and nutrition in oral/dental health and diseases in children.
     + To identify factors associated with Non-carious Tooth Surface Loss.
     + To have knowledge of the effects of smoking, drug, alcohol and substance abuse.
     + Covered during treatment planning seminars on a bimonthly basis, 2-3 tutorial sessions specific to periodontal disease and dental caries
2. Restorative Techniques in Paediatric Dentistry

* Covered during 2-3 tutorial sessions on traditional restorative materials and biological caries techniques in paediatric dentistry

1. Community Paediatric Dentistry
2. Management of Dento-alveolar and Maxillofacial Trauma in Children and Adolescents
   * + Maxillofacial, soft tissue and dental/ dento-alveolar injuries
     + Covered during 6-8 tutorial sessions on primary and permanent teeth trauma
3. Behavioural Science and Behaviour Management of the Child and Adolescent
   * + General behavioural concepts
     + Child psychology
     + Non-pharmacologic behavioural techniques
     + Pharmacologic behavioural techniques
       - Inhalation sedation
       - Other sedation techniques
       - General anaesthesia

* Covered over 6-8 tutorial sessions on pharmacological, non-pharmacological behavioural management strategies as well as hospital dentistry

1. The Development of the Occlusion and its Management
   * + Concepts of normal occlusion
     + Aetiology, classifications, diagnosis of malocclusion
     + Interceptive orthodontics in the areas of space maintenance, management of oral habits, correction of anterior and posterior cross bites
     + Covered over 4 tutorial preparatory sessions in Year 1, 14-16 mixed dentition seminars throughout course and 2-3 tutorial sessions within Paediatric Dentistry programme and conjoint with Orthodontic residents.
2. Paediatric Oral Pathology, Oral Medicine and Oral Surgery
   * + Oral pathology including dental anomalies
     + Oral medicine
     + Oral radiology
     + Management of impacted and supernumerary teeth
     + Paediatric forensic dentistry
     + Covered over 5-6 tutorials
3. General Paediatric Medicine
   * + General paediatric medicine, specifically key conditions that will make children more prone to oral/dental disease or which may complicate the delivery of oral/ dental care, and a detailed knowledge of their oral/ dental management
     + Medically complex children and adolescents
     + Prevention and management of medical emergencies
     + Speech and language
     + Covered over 7-8 tutorials
4. Multi-disciplinary and Multi-agency Collaboration in Paediatric Dentistry

* Covered over 4 treatment planning seminars per year

1. Specialist Paediatric Practice
   * + Practice management
     + Jurisprudence and risk management

vi. Didactic Format

1. Paediatric Dentistry Preparatory Course for Year 1 Residents (July)
2. Orthodontics Clinical Procedures Preparatory Couse for Year 1 Orthodontics/Paediatric Dentistry Residents (July/August)
3. Mixed Dentition Preparatory Course for Year 1 Residents (August)
4. Paediatric Dentistry Tutorials/ Seminars (Weekly)

Tutorials/ Seminars are the major foundation for the didactic course in this residency. This is weekly session where Year 1 and 2 residents are expected to review the assigned readings and present the abstracts for the assigned articles and other relevant readings This will be reviewed by the facilitating faculty member. The papers assigned for each session will be categorized by subject and this will be added to and amended as appropriate.

1. Mixed Dentition Tutorials and Case Presentations (twice/term≈ 8 times/year)
2. Journal Club (twice/term≈ 8 times/year, hosted by Paediatric Dentistry Society of Singapore)

This is an educational forum where faculty and all residents bring attention to articles which they feel are significant in any aspect of care for children. These articles may be medical or dental, technique-oriented or focused on behavioural or social sciences. In addition, Journal club may also be a forum where discussion occurs on older, classic articles which are the foundation of Paediatric Dentistry or the dental/ medical sciences. Residents will be responsible for reading and critically reviewing assigned article. Residents will be challenged to think critically and to analyse the articles presented.

1. Paediatric Dentistry Treatment Planning Seminars/ Multi-Disciplinary Seminars (twice/term≈ 8 -10 times/year)

These educational experiences will allow all residents to share significant points which they have learned during the care of or planning of treatment for their patients. Important considerations of medical issues and treatment modifications will be discussed. In addition, there may be expanded discussion on pathological findings or conditions which are found in patients who are being treated in the clinic.

## CLINICAL PROGRAM

i. Outpatient Clinical Care

1. Paediatric Dentistry clinical sessions
2. Mixed Dentition clinic
3. Inhalational Sedation clinic
4. Community Dentistry at Health Promotion Board

ii. Hospital Paediatric Dentistry (e.g., GA clinic)

iii. After Hours Emergency Department Service (KKCH)

iv. Mandatory Rotations

## MANDATORY ROTATIONS/ELECTIVES

There will be mandatory electives (e.g., Oral Maxillofacial Surgery, Child Development Unit, KKCH rotations) that residents must attend. If schedule permits, residents may choose to take elective rotations in areas outside of Paediatric Dentistry that they may be interested in (e.g., molecular biology, microbiology, psychology, paediatric medicine, clinical disciplines in Prosthodontics, Orthodontics, Oral Medicine and Endodontics).

## RESEARCH PROGRAM

Each resident is required to initiate and complete an independent research project and/or scholarly activities which will require data collection and analysis, as well as the use of the elements of the scientific method. Residents will be required to report their results in a scientific forum. This forum may consist of a local, regional, national or international meeting, or an article submitted for publication to a refereed journal. Depending on the nature of the research project, the resident may be required to attend special courses/ attachment in relation to the project to develop adequate methodology. Residents’ research should involve literature review and critical analysis of scientific literature, experimental design, statistical analysis, and accurate reporting of findings.

Research efforts are expected to be self-motivated. However, in order to provide some structure, scheduled reviews of the resident’s research progress will be performed. These reviews are intended to assist the trainees/ residents in staying on track with their research. The recommended milestone for research progression is as follows:

|  |  |
| --- | --- |
| **Milestone** | **Timeline** |
| Research idea generation | Year 1 Term 1 |
| Protocol formulation | Year 1 Term 2 -3 |
| Ethics approval | Year 1 Term 3 - 4 |
| Project Initiation and data collection | Year 1 Term 4 – Year 2 Term 4 |
| Completion of data collection | Year 3 Term 1 |
| Data Analysis | Year 3 Term 1 or 2 |
| Write up of thesis | Year 3 Term 2 or 3 |
| Defence | Year 3 Term 3 |

## UNDERGRADUATE TEACHING

The supervision of undergraduate dental students is an important component of specialist training. Senior residents (3rd year) will be involved in the supervision of third- and fourth-year undergraduate students. In addition to these formal teaching sessions, a senior resident in training may also be involved in the supervision and mentoring of all junior staff within the department (dental officers).

# 7. OVERVIEW OF COURSE

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Year 1** | **Year 2** | **Year 3** |
| **DIDACTICS** | 1. Basic medical science course  2. Clinical dental photography  3. Advanced Paediatric Dentistry Preparatory course (Didactics)  4. Orthodontics Preparatory Course  5. Seminars/ Tutorials  6. Journal club  7. Treatment planning sessions/ Clinical case presentations | 1. Seminars/ Tutorials  2. Journal club  3. Treatment planning sessions/ Clinical case presentations | 1. Treatment planning sessions/ Clinical case presentations  2. Journal club |
| **CLINICAL** | 1. Advanced Paediatric Dentistry preparatory course (Technique)  2. Paediatric Dentistry clinics  3. Specialty Clinics:  - GA clinics  - Mixed Dentition clinic  - Assist in Sedation Clinic | 1. Paediatric Dentistry clinics  2. Specialty Clinics:  - Mixed dentition clinic  - Sedation clinic  3. Rotations  - NDC  - OMS | 1. Paediatric Dentistry clinics  2. Specialty Clinics:  - Mixed dentition clinic  - Sedation clinic  3. Rotations  - Paediatric Medicine Electives  - KKCH |
| **ASSESSMENT** | 1. Clinical competencies  2. Performance during didactics  3. End of year formal written assessment | 1. Oral presentation  2. Performance during didactics  3. End of year formal written assessment | 1. Oral presentation  2. Final year formal assessment |
| **RESEARCH** | 1. Biostats & GRMM  2. Preparation and presentation of research protocol  3. Initiation of research project | 1. Research project  2. Oral presentation of research progress | 1. Oral presentation of research progress  2. Completion of research and thesis write-up |
| **TEACH** |  |  | Undergraduate Teaching |
| **ADMIN** |  |  | Chief Resident |
| **EMERGENCY DEPARTMENT CALL** |  |  | After hours emergency department call for 3 months |

# 8. WEEKLY TIMETABLE (Sample)

A close-up of a calendar

Description automatically generated

# 9. ASSESSMENT

The students’ performance and progress will be reviewed periodically by the Program Director and teaching committee at the end of every semester (twice/year) throughout the MDS course. This will be based on their performance during didactics, in the clinics and their research project and will make up their continual assessment grade. Continual assessment will account for up to 40% of the grades for the year end assessments as well as the Final MDS Examination

## CONTINUAL ASSESSMENT

Satisfactory performance in the following areas is required for progression to senior years.

i. Didactics

* 1. Oral case presentations
  2. Participation during didactics

ii. Clinics

1. Competency tests: Technique competency tests must be completed prior to entering patient clinics; expected to be completed within the first month of residency commencement. All 1st year residents are expected to **complete their clinical competencies by the end of the 2nd term (December)**. Residents who have passed the clinical competencies will be allowed more autonomy during clinical sessions. Prior to that, all steps need to be shown up to the supervisor. The competencies include the below.
   * Technique competency (For Year 1):
   * Class II and Class III cavities
   * Pulpotomy
   * Stainless steel crown
   * Space maintainer fabrication
   * Clinical competency (For Year 1):

* Examination, diagnosis and treatment planning of a complex case
* Topical and local anaesthetic techniques
* Rubber dam placement
* Class II cavity
* Indirect Pulp Cap
* Stainless steel crown
* Pulpotomy/ pulpectomy
* GA consultation

b. Documentation

Residents are required to keep a logbook (de-identify) of all the patients that they have treated and submit the logbook for review every semester (every 2 terms). There is a minimum breadth of clinical paediatric dentistry that should be completed for graduation; however, residents are expected to complete well above the minimum requirements. In addition to the quantity of work completed, residents will be also evaluated on their quality of work.

* + Scope of work
    - Treatment of infected pulps of primary teeth with pulpotomy or pulpectomy techniques with a minimum follow up period of 6 months.
    - Comprehensive care showing complex restorative and preventive treatment without sedation or general anaesthesia with minimum follow up period of 6 months.
    - Comprehensive care showing complex restorative and preventive treatment using sedation or general anaesthesia
    - Dental management of patients with dental alveolar trauma, or simple oro-facial trauma, followed for a period of at least one year.
    - Dental management of patients with special healthcare needs
    - Dental management of patients within Paediatric Dentistry in conjunction with another specialty e.g., Orthodontics, Oral Surgery, Prosthodontics etc.

c. Assistantship: Year 1 residents must have **≥2 GA assistantships** and **≥2 Nitrous Oxide sedation assistantships** prior to managing a GA/ Nitrous Oxide sedation case as operator.

d. Organisation and record management

e. Professionalism (e.g., patient management, teamwork, responsibility)

iii. Research (e.g., reaching milestones)

## YEAR END ASSESSMENT

All trainees/ residents will be assessed annually at the end of their first, second and third year. A satisfactory performance (pass mark: 50%) in these examinations is required.

i. First year: **3-hour** written paper of short answer questions and essays

ii. Second year: **3-hour** written paper of short answer questions and essays

iii. Final year: Students will only be allowed to write the final year examination after having met the eligibility requirements set by the program committee.

a. Eligibility requirements

|  |  |
| --- | --- |
| Total # of completed cases (does not include consult or review only cases) | 100 |
| Total # of completed cases with at least 6 months recall | 50 |
| Total # of GA cases | 30 |
| Total # of Multi-disciplinary cases (consult and treatment) | 5 |
| Total # of Mixed Dentition cases (consult, treatment and completed) | 10 |

b. Written examination: **Two 3-hour** written papers of multiple-choice questions, short answer questions and essays.

c. Oral viva voce (3 parts): The oral examinations with two members of the teaching staff and an external examiner in Paediatric Dentistry from another institution.

* A **45-minute** structured oral examination related to diagnosis and treatment planning for a paediatric patient for 2-3 simulated Paediatric Dentistry case studies.
* A **45-minute** structured oral examination based on *THREE* fully documented case types (Resident presentation duration: **10min each case**) each describing a paediatric patient personally treated by the candidate. Residents are to obtain written consent (Appendix 5: Consent form) from the patient/legal guardian that the patients’ care will be documented to be used for the purpose of examination. Residents also need to prepare a short 2-page (1 page for write up, 1 page for illustrations) case history (Appendix 6: Case documentation template) for each case. The date of submission will be default on the Monday of the 1st week of May.
  + 1. The case type should describe comprehensive care for a child in the primary or mixed dentition stage of development

AND two of the below categories

* + 1. The case type should describe comprehensive care for a child with a medical mental or physical impairment in the primary or mixed dentition stage of development. The history should show the special approaches which have been used to render and keep the child in good oral health in relation to the impairment. This history should show evidence of follow up care.
    2. The case type should describe the management of a child or adolescent who has suffered complicated trauma to the permanent anterior teeth
    3. The case type should describe the management of a complex problem within Paediatric Dentistry possibly in conjunction with another specialty such as Orthodontics, Restorative Dentistry, Oral Medicine or Oral Surgery.
* A **45-minute** oral examination on any aspect of Paediatric Dentistry as outlined in the course curriculum.

## AWARD OF MASTER OF DENTAL SURGERY (PAEDIATRIC DENTISTRY)

Trainees/ residents who display a satisfactory performance (pass mark: 50%) in the final year examination and are successful in their thesis defence will be awarded the degree of Master of Dental Surgery in Paediatric Dentistry.