

NATIONAL POSTGRADUATE MEDICAL COLLEGE OF
NIGERIA



RESIDENCY TRAINING CURRICULUM/HANDBOOK

FACULTY OF FAMILY DENTISTRY

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**NATIONAL POSTGRADUATE MEDICAL COLLEGE OF
NIGERIA**

**FACULTY OF FAMILY DENTISTRY
RESIDENCY TRAINING CURRICULUM AND HANDBOOK**



**FOR TRAINING IN FAMILY DENTISTRY
TOWARDS THE AWARD OF FELLOWSHIP OF THE
NATIONAL POSTGRADUATE MEDICAL COLLEGE
IN
FAMILY DENTISTRY (FMCFD)**

A HANDBOOK FOR RESIDENTS AND THEIR TEACHERS

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Vision

To produce world class Family Dentists with outstanding skills and in-depth knowledge of dentistry including patient care, education, research and administration, irrespective of where they are employed.

Mission

The mission of the college is to plan, implement, monitor and evaluate post graduate programmes required to produce medical and dental specialists of the highest quality, competence and dedication, who will provide teaching and optional health care for the people. Lifelong learning will be maintained by continuing professional development programmes of the college.

Vision Of The Faculty Of Family Dentistry

To produce outstanding family dentists, fully engaged in self inspired lifelong learning in dentistry including patient care, education, research and administration irrespective of being in private practice, university/other academic practice government, industry or any establishment.

Training Philosophy

The Faculty of Family Dentistry is committed to excellence in teaching and research, strives to develop professionals who are clinically sound, adhering to social and ethical principles as well as dedicated to continued professional advancement.

CHAPTER 1

INTRODUCTION

The National Postgraduate Medical College of Nigeria was established by Decree 67 of 24th September 1979. The College was established for the training and examination of specialist doctors and dentists as contained in Section 7 of the College decree.

Pursuant to these, senate has prescribed three examinations in each faculty. These are Primary, Part I and Part II Examinations.

A candidate entering the programme of the Faculty of Family Dentistry will at the end of the training receive the award of Fellowship of the National Postgraduate Medical College in Family Dentistry (FMCFD): He/she will:

- (1) Become clinically competent to provide the range of dental care defined in the curriculum, whether such care takes place in the clinics/hospital ward, operating theatre or in the community.
- (2) The candidate will be able to gather essential and accurate information about patients, develop a diagnostic therapeutic plan based on the knowledge of best practice, taking into account the cost and availability. In addition and he/she will be able to institute or give the appropriate treatment for common and important oral disease conditions.
- (3) Become an expert in early diagnosis of oral disease conditions.
- (4) The candidate will have the ability to recognize patients with life threatening conditions (including Ludwig angina, extensive abscess, etc.) and institute appropriate initial management before referral.
- (5) Ability to recognize medical life threatening conditions (e.g. cardiac, pulmonary, neurological conditions) and make appropriate decisions in relation to Dental treatment.
- (6) Be able to operate adequate referral system.
- (7) Be able to integrate clinical knowledge in such a way as to be able to have correct decisions in every case presented to him/her.
- (8) Be able to see each patient as an individual and yet be part of a family and community with social and cultural characteristics.

- (9) Demonstrate interpersonal and communication skills which will enable him to effectively exchange information with patient / patients' family.
- (10) Demonstrate skills in obtaining informed consent, including effective communication to patients / patients' family, of the procedure, alternatives and possible complications. Demonstrate knowledge on ethics of the profession and jurisprudence.
- (11) Develop skills for team work.
- (12) Acquire knowledge of important environmental, economic, social and cultural factors which contribute to the development, progress and chronicity of diseases.
- (13) Develop communication skills which will enable him/her to evaluate medical dental literature, expand his/her knowledge, understand and appreciate scientific discoveries and their applications.
- (14) Demonstrate knowledge of basic practice management, including budgeting, record keeping, medical records, recruitment, supervision and management of staff.
- (15) Exhibit knowledge of the sources of financing for health care, including, National Health Insurance Scheme (NHIS), employer based private health plans and patients own fund.
- (16) Be able to play his or her role in health education, counselling and all aspects of preventive and public health dentistry.
- (17) Residents will demonstrate knowledge about established and evolving biomedical and clinical sciences and apply this knowledge to patient care.

CHAPTER 2

RESIDENCY TRAINING PROGRAMME

The residency training programme of the family dentistry of the National Post Graduate Medical College of Nigeria takes place at designated accredited training institutions, approved by the senate of the college.

The names of the accredited training institutions are published periodically in the college gazette. Such centres are revisited at a regular interval of five years by the faculty board to ensure the maintenance of acceptable standard of the training institution, the quality of training received by the residents and make appropriate recommendations to the senate of the College.

It is the responsibility of the resident to ensure that he/she receives training at our accredited training institutions.

ENTRY REQUIREMENT AND GENERAL STRUCTURE

PRE-RESIDENCY TRAINING

This is the Primary Level Candidates will prepare for the primary examination in the basic medical sciences relevant to Family Dentistry.

This may be taken of any time after full registration with the Medical and Dental Council of Nigeria.

This level is prior to the beginning of the part 1 or junior residency programme.

Applicants are to sit for the primary examination as private candidates.

The curriculum for the primary examination is set out as seen in Table A.

It is intended that candidates should revise the basic medical sciences at a level similar to the Bachelor of Dental Surgery Degree (BDS).

The primary examination comprises of one paper of best option multiple choice questions (MCQ) type with negative marking system. Computer based test (CBT) shall be the mode of administering the examination. Candidate is expected to score fifty percent (50%) to pass the examination the candidate can then apply for admission to the residency programme in any of the accredited training centres/institutions

TABLE A: COURSE CURRICULUM FOR PRIMARY EXAMINATION

SECTION	SPECIFIC TOPICS	NUMBER OF HOURS	CREDIT UNITS
Structure of the human body (applied anatomy)	Development of the face Anatomy of the TMJ Trigeminal nerve Facial nerve The maxillary sinus Odontogenesis/oral biology	2 2 2 2 2 2	4
Applied Physiology	Endocrine control of Calcium Growth hormone and insulin-like growth factors Fluid and electrolyte balance Blood and body fluids	2 2 2 2	4
Pharmacology	Pharmacodynamics Pharmacokinetics NSAIDS Principles for appropriate antibiotics prescription in Oral Surgery Role of opioids in the head and neck Hemostatci agents Antimicrobial chemotherapy Antiretroviral drugs Cytotoxic drugs in the head and neck	2 2 2 2 2 2 2 2 2 2	4
Biochemistry	Genomics, transcriptomics and oral health Lipid metabolism Protein metabolism Carbohydrate metabolism Nucleic acids, Hormones and oral health	 2 2 2 2 2	-

			4
General Pathology	Wound Healing Inflammation Oral microbiomes Haematology Immunology Chemical Pathology Oncology	2 2 2 2 2 2 2	4

CHAPTER 3
JUNIOR RESIDENCY (PART 1) (FMCFD)
TRAINING PROGRAMME

After the provisional registration on the prescribed form as well as submitting evidence of acceptance into the FMCFD Programme in any accredited centre, the resident will be supplied with the resident's portfolio which contains treatment and surgical skills to be carried out before being eligible to sit for Part I examination.

LEARNING OBJECTIVE OF PART 1 FMCFD TRAINING:

At the end of this part of the training, each resident should be able to:

- 1) Handle and Manage full care patient.
- 2) Handle patient with oro- dental emergencies at the accident and emergency unit of the hospital.
- 3) Develop the art of paper/research publications at least publish minimum of two (2) articles in a peer review journals.

CORE COMPETENCIES:

The six core competencies are expected from the resident at the end of this level of training which includes:

Patient Care:

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of oral health.

Medical Knowledge:

Residents must be able to demonstrate knowledge about established and evolving biomedical, clinical and cognate (e.g epidemiological and social-behavioral sciences) and the application of this knowledge to patient care.

Practice-Based Learning and Improvement:

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence and improve their practices.

Interpersonal and Communication Skills:

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patient, patient's families and professional associate.

Professionalism:

Residents must be able to demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

Systems-Based Practice:

Residents must be able to demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

FORMAT OF TRAINING

During the first two years (24 Months), rotation should be done through different units of the hospital/dental centre.

The following are the clinical units through which residents will rotate:

- | | |
|-----------------------------------|----------|
| 1. Oral and Maxillofacial Surgery | 3 months |
| 2. Restorative Dentistry | 4 months |
| 3. Paediatric Dentistry | 2 months |
| 4. Periodontology | 2 months |
| 5. Oral Pathology/Oral Medicine | 3 months |
| 6. Community Dental Health | 2 months |
| 7. Orthodontics | 2 months |
| 8. Oral Diagnosis/Radiology | 2 months |
| 9. Internal Medicine | 2 months |
| 10 General Surgery | 2 months |

Each resident is expected to rotate through all the 10 specialties. These rotations shall include:

- (1) Seminars
- (2) Tutorials
- (3) Presentations
- (4) Clinicals/ Practicals
- (5) Laboratory sections in Oral Pathology, Restorative Dentistry and Orthodontics.

Seminars

The candidate shall participate in a weekly seminar of 2 contact hours per week for a minimum of 90 weeks which is equivalent to 180 contact hours.

Tutorials

The candidate shall be involved in regular weekly tutorials of at least 2 contact hours for a minimum period of 90 weeks which is the equivalent of 180 contact hours.

Clinics

The junior resident shall have a minimum of 30 contact clinical hours weekly except in Oral pathology.

Practical/Laboratory Sessions

The junior resident is expected to have a practical session in the following areas.

- (1) Oral Pathology/Oral Medicine
- (2) Oral Radiology
- (3) Conservative Dentistry
- (4) Orthodontics.
- (5) Prosthetic Dentistry
- (6) Paediatric Dentistry
- (7) Periodontology
- (8) Maxillofacial surgery
- (9) Community Dentistry
- (10) Internal Medicine
- (11) General Surgery

The clinical Practice record books (Log book) should be obtained by all residents and completed during the postings performed or procedures carried out and duly signed and dated by the supervising consultant. The completed log book must be submitted to the College with the examination entry forms.

CONTACT HOURS AND CREDIT POINTS FOR PART 1 FMCFD

SECTION	MONTHS	ACADEMIC CONTACT HRS. PER WEEK	CLINICAL CONTACT ROUND PER WEEK	LABORATORY CONTACT HOUR PER WEEK	TOTAL CONTACTS HOURS PER WEEK	CREDIT UNIT	RES EAR CHP ER WEEK
Restorative Dentistry	4	6	32	4	52	26	10
Oral /Maxillofacial Surgery	3	6	36	-	42	20	-
Paediatric Dentistry	2	6	32	-	38	18	-
Periodontics	2	6	36	-	42	20	-
Oral pathology/Oral Medicine	3	6	30	4	40	18	-
Community Dentistry	2	6	36	-	52	25	10
Orthodontics	2	6	32	6	44	15	-
Oral Diagnosis and Radiology	2	6	36	-	42	18	10
General Surgery	2	6	30	-	36	15	-
Internal Medicine	2	6	30	-	36	15	
Update course I	-	-	-	-	32	10	
Update course II					32	10	
Hands on workshop					16	5	
TOTAL	24	-	-	-		185	

DETAILED COURSE CONTENT

RESTORATIVE DENTISTRY

TRAINING OBJECTIVE

In line with the objective of the junior residency programme, the junior residents going through the restorative dentistry posting are tutored to give routine management of all common restorative dentistry cases with higher proficiency and more confidence than they did before joining the residency programme.

Such a resident is required to acquire skills under the following:

COURSE CONTENT

Module I

1. Management of dental caries including the prevention and management of deep caries and also root surface caries.
2. Coronal restoration with amalgam and tooth coloured restorative material (composite and glass ionomer cement) of simple/ complex cases including the use of pin for extra retention and acid etching
3. Conventional endodontic therapy
4. Endodontic emergencies
5. Endoperio interrelationship
6. Restoration of endodontically treated teeth including bleaching
7. Management of tooth loss not due to caries
8. Intercoronal cast restorations, inlays and on-lays
9. Principles for preparation for extra coronal restorations; (crown and bridge)
10. Cosmetic dentistry-vital bleaching etc.
11. Science of restorative dental materials.
12. Alternative to gold and porcelain restoration fabrication
13. Occlusion and restoration
14. TMJ dysfunction and restoration management

Module II

1. Jaw relationship and movement
2. Dental Articulators and their uses
3. Dental Surveyor and surveying
4. Partial denture designing
5. Prosthetic mouth preparation
6. Complete dentures (full dentures)
7. Immediate dentures
8. Obturators and other cleft palate prosthesis
9. Implantology
10. Pre-prosthetic dentistry
11. Computer Assisted Design (CAD)/Computer Assisted Manufacture (CAM)

Recommended clinical requirement in conservation-

S/ No	Procedure	Clas s II	Clas s I		Clas s 5	Oth ers
1	Amalgam fillings	10	5	-	2	-
2	Pin-retained Amalgam	-	-	-	-	5
3	Light cure composite	-	-	-	-	10
4	Crown and bridges					
	(a) Porcelain $\frac{3}{4}$ or full veneer	-	-	-	-	3
	(b) Porcelain fused to metal	-	-	-	-	5
		-	-	-	-	2
	(c) Ceramic inlay					3
	(d) Post retained crown					

ENDODONTICS

S/No	PROCEDURE	No of cases
1	Anterior root canal	10
2	Posterior root canal	5
3	Endodontic Emergencies	5
4	Tooth bleaching	5
5	Peri-radicular Surgery	2

PROSTHODONTICS

S/No	PROCEDURE	No of cases
1	Acrylic Partial dentures	10
2	Acrylic Full dentures	5
3	Obturator	2
4	Metallic dentures with surveying	2
5	Implant (observe and participate)	3

CONTACT HOURS

SECTION	MONTHS	ACADEMIC CONTACT HRS. PER WEEK	CLINICAL CONTACT HOUR PER WEEK	RESEARCH/SEMINAR PER WEEK	LABORATORY CONTACT HOUR PER WEEK	TOTAL CONTACT PER WEEK	CREDIT UNITS
Restorative Dentistry	4	6	32	10	4	52	26

ORAL/MAXILLOFACIAL SURGERY

LEARNING OBJECTIVE

The aim of this posting is to equip the junior residents with the knowledge and skills to enable them diagnose all diseases that require oral surgical intervention and to perform simple oral surgical procedures independently.

PRACTICE COMPETENCES EXPECTED

The residents at the end of the postings should be able to amongst other things:

- (1) Understand the basic scientific principles underlying every procedure in oral and maxillofacial surgery.
- (2) Be familiar with the practical steps for each surgical procedure.
- (3) Be acquainted with the general and specific indications for, as well as complications associated with each procedure.
- (4) Be familiar with surgical instruments, sutures and appliances used in the operative and post-operative care of each patient.
- (5) The trainee will be able to demonstrate the knowledge and surgical skills in handling facial infections and trauma cases.

COURSE OUTLINE

Module 1

Surgical Emergencies:

- (1) Trauma; emergency room management of trauma patients.
- (2) Severe Orofacial infection; bacterial, viral, fungal etc.

Module 2

- (a) Local anaesthetic agents
- (b) Local anaesthetic techniques.
- (c) Contraindications to local anaesthesia
- (d) Complications of local anaesthesia

Module 3

- (a) Management of post extraction complications
- (b) Pericoronitis and third molar surgery
- (c) Management of jaw fractures
- (d) Management of cleft lip and palate and other developmental anomalies.

- (e) Management of temporo- mandibular joint disorders.
- (f) Management of cysts.
- (g) Management of chronic jaw infection
- (h) Management of salivary gland diseases.

Module 4

- (a) Pre-prosthetic surgeries
- (b) Management of jaw tumours
- (c) Tooth transplantation and implantation.
- (d) Maxillofacial rehabilitation
- (e) Orthognatic surgery and distraction osteogenesis
- (f) Implantology and sinus lift.

The junior resident shall participate in seminars case presentations, tutorials, clinics and ward rounds including emergency room calls.

Minimum clinical Requirement

S/N O	PROCEDURE	NO OF CASE S
1.	Clerking and case presentation of oral/maxillofacial cases	20
2.	Surgical removal of epulis, polyps and small cystic lesions under LA	10
3.	Perform minor frenectomy under LA	2
4.	Apicectomy	3
5.	Incision and drainage	5
6.	Closure of small oro-facial fistulae	2
7.	Manual reduction of TMJ dislocation	5
8.	Suturing of laceration	10
9.	Extraction of teeth indicated for extraction under LA	10
10.	Close reduction of mandibular and maxillary fractures	5

11.	Manage surgical infection including localized alveolar osteitis	5
12.	Manage orofacial infection and wound	10
13.	Implants (Observe and assist)	1
14.	Postoperative and follow up care as well as rehabilitation	10
15.	Ridge /bone grafting or augmentation (Observe and participate)	1
16.	Sinus lift (Observe and participate)	1
17.	Marsupialisation (Observe and participate)	2
18.	Surgical extraction of impacted teeth under LA	10

CONTACT HOURS

SECTION	MONTHS	ACADEMIC CONTACT HRS. PER WEEK	CLINICAL CONTACT HOUR PER WEEK	LABORATORY CONTACT HOUR PER WEEK	CREDIT UNIT	RESEARCH PER WEEK	TOTAL CONTACT HOURS
Oral /Maxillofacial Surgery	3	6	36	-	20	-	42

PAEDIATRIC DENTISTRY

The aim of the programme in paediatric dentistry is to produce a specialist who can manage the child patient.

LEARNING OBJECTIVES:

- (1) Have knowledge of health problems of hard and soft tissues in children.
- (2) Have a holistic approach in the management of these oral health problems.
- (3) Acquire skills in the prevention and treatment of trauma, diseases of the soft tissues and management of dental patients with systemic diseases.
- (4) Acquire skills in behaviour management.
- (5) Acquire skills in the treatment of teeth in terms of restorative procedures in children.
- (6) Acquire skills in managing physically and mentally challenged children.

PRACTICE COMPETENCE:

The intended learning outcome

The trainee will be able to demonstrate the dental knowledge and skills in treatment paediatric dental conditions such as pulp therapy, trauma, oro-facial infections, caries prevention, paediatric prosthesis and oral mucosa lesions.

COURSE CONTENT

Module 1

- (a) Assessment and examination of the child patient.
- (b) Principles of child management
- (c) Ethics of child dental management.
- (d) Behaviour assessment.

Module 2

- (a) Non-pharmacological behaviour modification
- (b) Pharmacological behaviour modification.
- (c) Local anesthesia and analgesia in children.
- (d) Management of adolescents and children with disabilities.
- (e) Medically compromised patient.

- (f) Emergency care.
- (g) Child abuse.

Module 3

Oral disease in children

- (a) Epidemiology of dental caries
- (b) Risk assessment
- (c) Childhood caries.
- (d) Pulp therapy in deciduous and young permanent teeth

- (e) Caries prevention; fluoride therapy and fissure sealant.
- (f) Management of soft tissue lesions.
- (g) Management of developmental anomalies.
- (h) Management of oral mucosa lesions
- (i) Management of orofacial infections in children.

Module 4

Restorative procedure

- (a) Morphological differences between primary and permanent teeth and their impact on tooth restoration.
- (b) Restoration of primary teeth.
- (c) Trauma and Management.
- (d) Pediatric prosthesis.
- (e) Stainless steel crowns and anterior crowns (acrylic)
- (f) Extraction of teeth in children
- (g) Space maintainers

Minimum Clinical Requirement

1.	Management of caries and deep carious lesion	10
2.	Routine extraction for a child patient	10
3.	Comprehensive treatment for a child patient	2
4.	Topical fluoride application	10
5.	Fissure sealant application	10
6.	Pulpectomies	4
7.	Pulpotomy on primary molars	4
8.	Acid etch restoration	4
9.	Acrylic jacket crown in anterior teeth	2
10.	Stainless steel crown on primary teeth	2
11.	Management of a fractured tooth	2
12.	Extraction of teeth under sedation	4

CONTACT HOURS

SECTION	MO NT HS	ACAD EMIC CONT ACT HRS. PER WEEK	CLINI CAL CONT ACT HOUR PER WEEK	RESE ARC HPER WEE K	LABO RAT ORY CON TACT HOU R PER WEE K	TOT AL	CR ED IT UN ITS
Paediatric Dentistry	2	6	32	-	-	38	1 8

COMMUNITY ORAL HEALTH

LEARNING OBJECTIVE

The programme in Community Oral Health should intimate junior residents with the concepts and guidelines of prevention and epidemiology. It should also acquaint the residents with the skills of community dental practice in the prevention and treatment of oral and dental diseases at the community level. This includes planning, management and the provision of services to the community with the assistance of other dental, medical, clerical personnels. The programme will as well initiate a positive attitude and behaviour towards prevention of infection in dental clinic settings and even at the community level.

It will develop the knowledge and skills of the resident to formulate oral health policies and community schemes and position the resident as a leader of the dental team.

In line with the above objectives, the junior resident is required to participate and acquire competences to effectively design and manage community dental care at the Local Government level.

PRACTICE COMPETENCE

At the end of his rotation the resident will:

- (1) Be able to work in a team as a team leader.
- (2) Be able to plan and implement community oral health programmes.
- (3) Select and interpret information for the description of oral health status and care
- (4) Analyze demographic trends
- (5) Carry out surveillance of oral diseases.
- (6) Use information from research studies to plan oral health prevention programmes
- (7) Be able to implement the basic package of oral health care at the community level.
- (8) Be knowledgeable about the common risk factors and apply this knowledge in the prevention of oral diseases.
- (9) Have an understanding of epidemiology and research methodology.

COURSE CONTENT

Module 1

- (1) Trends in oral diseases/epidemiology of oral diseases.
- (2) Prevention and prevention strategies (Approaches)
- (3) Prevention of caries.
- (4) Prevention of periodontal disease
- (5) Prevention of oral cancer
- (6) Oral disease surveillance

Module 2

- (1) The concepts of need.
- (2) Law and ethics/jurisprudence.
- (3) Planning implementation and evaluation of dental service and dental man power.
- (4) Quality assurance in community dental health
- (5) Management of dental practice and office

Module 3

- (1) Health behaviour and health education
- (2) Health promotion
- (3) Primary health care approach
- (4) Basic package of oral health care
- (5) Dental surgery design

Module 4

- (1) Research methodology including ethical issues.
- (2) Biostatistics
- (3) Computer training/Data processing
- (4) Advance research methodology
- (5)

Module 5: Dental Ethics and Jurisprudence

1. Consent in medicine and dentistry.
2. Medical code of ethics
3. Malpractice in Dentistry

Minimum Requirement

The resident should have the chance to work at a dental community health clinic carrying out treatment and prevention at the community district level. To that effect the resident should fulfill the following at the junior residency level.

S/NO	PROCEDURE	NUMBER
1.	School visit, Oral Health education (treatment screening/ referral)	4
2.	Application of fluoride for prevention of dental caries	3
3.	Application of fissure sealant	2
4.	Atraumatic restorative treatment ART	5
5.	Amalgam filling	2
6.	Composite filling	2
7.	Root canal treatment	1
8.	Extractions	10
9.	Scaling and polishing	10
10.	Simple partial denture	2
11.	Community outreach programmes to targeted populations(eg hair dressers association etc.	4
12.	Assist in research projects	1
13.	Present a report/mini project at the end of the rotation/posting	1
14.	Participate in planning of community oral health programmes	1
15	Seminar presentation	1

CONTACT HOURS

SECTION	MO NTHS	RESER CH	ACAD EMIC CONT ACT HRS. PER WEEK	CLINIC AL CONTA CT HOUR PER WEEK	LABO RATO RY CONT ACT HOUR PER WEE K	TOT AL	CR EDI T UN ITS
Community Dentistry	2	10	6	36	-	52	25

PERIODONTOLOGY

LEARNING OBJECTIVE

The aim of the junior residency training in Periodontology is to enable the resident recognize periodontal diseases and their complications, taking note of their salient features.

This posting is to equip them with the skills of treatment of the common periodontal diseases and to acquaint them with some advanced periodontal skills.

PRACTICE COMPETENCE

At the end of his or her training in Periodontology each resident should be able to demonstrate knowledge and skill in the following:-

- (1) Describe the biology and physiology of the periodontium.
- (2) Explain the etiology and the different pathologies of periodontal tissues.
- (3) Diagnose the different pathologies of periodontal tissues.
- (4) Explain the different methods available for the prevention of periodontal pathologies.
- (5) Carry out a detailed treatment for periodontal diseases.
- (6) Participate effectively in seminars on Periodontology.
- (7) Understand, interpret and supply current indices for the assessment of periodontal diseases.

COURSE OUTLINE FOR THE POSTING

Module 1

Basic Periodontology

- (1) Development of periodontium
- (2) Normal periodontium
- (3) Age changes in the periodontium
- (4) Diseased periodontium
- (5) Inflammation and wound healing
- (6) Gingival crevicular fluid and saliva
- (7) Diagnostic markers
- (8) Periodontal regeneration

Module 2

1. Periodontal microbiology
2. Oral infection and immunity
3. Microflora of the oral cavity
4. Host and microbial interaction
5. Diagnostic immunological techniques
6. Diagnostic microbiology
7. Dental calculus and predisposing factors
8. Influence of systemic diseases on periodontal health.
9. Influence of periodontal health on systemic diseases.
10. HIV/AIDS and the periodontium
11. Gingival inflammation and enlargement.
12. Periodontal pocket
13. Mechanism of tissue destruction and bone loss.
14. Periodontal response to external forces and occlusal traumatism.
15. Current concepts in the pathogenesis of periodontal diseases
16. Perio-endo lesion

Module 3

1. Current diagnostic techniques
2. Clinical diagnosis
3. Radiological diagnosis
4. Advanced diagnostic techniques
5. Periodontal risk assessment
6. Determination of prognosis
7. Periodontal treatment of medically compromised patient
8. Treatment of different periodontal diseases
9. Periodontal instrumentation
10. Treatment of periodontal emergencies
11. Non-Surgical periodontal therapy
12. Chemotherapeutic agents
13. Role of orthodontics in periodontal therapy
14. Periodontal-restoration interplay

Module 4

- (1) Surgical periodontal therapy
- (2) Gingivectomy
- (3) Periodontal flap
- (4) Management of furcation involvement and perio-endo lesions
- (5) Periodontal plastic and aesthetic surgery
- (6) Recent advances in surgical techniques

Minimum Requirements

S.N	PROCEDURE	NUMBER
1.	Scaling and polishing	10
2.	Deep scaling and root planning	5
3.	Gingivectomy/Gingivoplasty (observation and participation)	2
4.	Periodontal flap surgery	5
5.	Guided tissue regeneration-periodontal surgery (Observation and participation)	2
6.	Seminar presentation	2
7.	Case Reports	5
6.	Management of periodontal abscess	3
9.	Management of periodontal disease in medically compromised patient	3

CONTACT HOURS

SECTION	MONTHS	ACADEMIC CONTACT HRS. PER WEEK	CLINICAL CONTACT HOUR PER WEEK	RESEARCH PER WEEK	LABORATORY CONTACT HOUR PER WEEK	TOTAL	CREDIT UNITS
Periodontics	2	6	36	-	-	42	20

ORTHODONTICS

INTENDED LEARNING OBJECTIVE

The aim of this programme is to educate the junior resident on prevention of malocclusion. Give simple orthodontic treatment with the use of removable appliances. Recognize dentofacial anomalies and refer to the orthodontic specialist on time.

PRACTICE COMPETENCE

The junior resident should be able to do the following at the end of this posting.

- (1) Carry out detailed examination of orthodontic cases
- (2) Diagnose and formulate appropriate treatment plan for simple orthodontic treatment.
- (3) Implement the treatment using removable appliances.
- (4) Take adequate care of orthodontic emergencies.
- (5) Trace and analyze cephalometric radiographs.
- (6) Early diagnosis of orthodontic anomalies and give interceptive orthodontic care.
- (7) Handling of short term orthodontic cases using braces.

COURSE OUTLINE FOR THE POSTING

Module 1

- (1) Course and clinical form overview
- (2) Development of occlusion
- (3) Aetiology of malocclusion
- (4) Understanding the development and eruption of teeth
- (5) Growth of facial skeleton and theories of facial growth
- (6) Health risk associated with malocclusion
- (7) Classification of malocclusion

Module 2

1. Examination of orthodontic patients
2. Assessment of malocclusion
3. Principles of Orthodontic treatment
4. Physiology of tooth movement

5. Serial extractions
6. Treatment planning
7. Interceptive orthodontics
8. Removable appliances
9. Functional appliances
10. Oral habits/habit breakers
10. Management of class I, II and III malocclusion using braces
11. Orthodontic treatment of cleft lip and palate
12. Invisalign and Aligners

Minimum Clinical Requirements

S/N		
1.	History taking / diagnosis /treatment planning	5
2.	Interceptive treatment in children	4
3.	Simple removable orthodontic appliance	4
4.	treatment with fixed appliance (observation and participation)	2
5.	Tracing / analysis of cephalometric raider	4
6.	Invisalign	2
7.	Management of orthodontic emergencies	2
8.	Short term orthodontics treatment using braces	3

CONTACT HOURS

SECTION	MO NTH S	ACADE MIC CONT ACT HRS. PER WEEK	CLINIC AL CONTA CT HOUR PER WEEK	LABO RATO RY CONT ACT HOUR PER WEEK	TOTA L	CR RE DI SE T UNI TS	RE SE AR CH PE R WE EK
Orthodontics	2	6	32	6	44	15	-

ORAL PATHOLOGY/ORAL MEDICINE/ORAL RADIOLOGY

LEARNING OBJECTIVE

The aim of the posting is to enable the junior resident recognize the diseases of the orofacial region, recall the important features of such diseases and treat them appropriately.

PRACTICE COMPETENCE

At the end of this posting the resident should be able to:

- (1) Diagnose and treat all common orofacial diseases of local or systemic origin.
- (2) Recognize congenital anomalies occurring within and around the oral cavity/orofacial region.
- (3) Take and interpret intra -oral radiographs.
- (4) Interpret extra -oral radiographs related to disorders of the oro-facial region.
- (5) Take specimens, carry out and interpret laboratory investigations of orofacial region
- (6) Treat all common oro-facial disorders which do not require major surgery.

COURSE OUTLINE FOR POSTING

Module 1

1. Viral infections relevant to dentistry HIV/AIDS, Hepatitis B, C, and D.
2. Pemphigus vulgaris
3. Herpes zoster infection.
4. Erythema multiforme (etiology, classifications and management)
5. Bleeding disorders
6. Medical disorders relevant to dentistry
7. Management of a medically complex patient
8. Ulcers of the oral mucosa
9. Oro-facial infections and their management
10. Oral manifestation of systemic diseases
11. The influence of systemic disease on dental treatment

Module II

1. Odontogenic tumors (Classification and features.)
2. Tumors of the salivary gland
3. Diseases of the salivary gland

4. Salivary gland disorders
5. Pigmented lesion of the oral mucosa
6. Red lesion of the oral mucosa
7. White lesion of the oral mucosa
8. Oral premalignant lesions.
9. Oral premalignant conditions
10. Biopsies

Module III

1. Radiology in dentistry
2. Orthopantomographs
3. Computer tomography in dentistry
4. Current diagnostic aids
5. Intra-oral radiographs.
6. Extra-oral radiographs

Module IV

1. Oro facial pain
2. Neuralgias
3. Management of pain
4. Chemotherapy in dentistry
5. Oral complications of radiotherapy in the head and neck regions
6. Forensic dentistry

Minimum Requirements

S. N	Procedure	No of Cases
1.	Periapical X-rays (take these x-rays/interpretation)	20
2.	Bite wing x-rays (take these x-rays)/interpretation	10
3.	Occlusal x-rays (take these x-rays)/interpretation	10
4.	Extra oral view (interpretation)	10
5.	Panoramic view (interpretation and	10

	observation)	
6.	Cephalometric interpretation (observation)	10
7.	Posterior anterior control view interpretation	15
8.	Endoscopy of TMJ. (observation)	1
9.	Fine needle aspiration biopsy	15
10.	MCS (Microscopy, culture and sensitivity)	5
11.	Skin snip and biopsy	10
12.	Diagnosis and management of oral manifestation of systemic diseases	15
13.	Grossing of tissues	10
14.	Viewing and interpretation of slides	15
15.	Cytology smear	14
16.	Management of oro-facial pain	20
17.	Management of oral pathology in a medically compromised patient	4

CONTACT HOURS

SECTION	MONTHS	ACADEMIC CONTACT HRS. PER WEEK	CLINICAL CONTACT HOUR PER WEEK	LABORATORY CONTACT HOUR PER WEEK	TOTAL	CREDITS	RESEARCH PER WEEK
Oral pathology/ Oral Medicine	3	6	30	4	40	18	-

INTERNAL MEDICINE AND GENERAL SURGERY

INTERNAL MEDICINE

LEARNING OBJECTIVE

- 1) The aim of this posting is to provide residents with a strong knowledge base on the fundamentals of diagnosis and treatment of medical conditions.
- 2) Provide resident with knowledge in areas such as in cardiology, endocrinology gastroenterology, infectious diseases, Nephrology and Neurology.

COURSE OUTLINE FOR POSTING

Diagnosis and Management of

- Cardiothoracic disorders; Hypertension, shock, coma and syncope
- Endocrine disorders/emergency
- Gastroenterology especially liver diseases
- Infections Disease tuberculosis, syphilis
- Renal diseases including dialysis and kidney transplantation.
- Neurological conditions including upper and lower motor neuron disease.
- Advanced cardiac life support
- Hematological diseases and transfusion
- Occupational health medicine
- Medical Emergencies.

GENERAL SURGERY

LEARNING OBJECTIVE

The aim of this posting is to enable the resident have knowledge in diagnosis and treatment of surgical diseases in various surgical disciplines.

- Develop surgical technical skills by being participatory in managing patients in operating rooms and theatre.

PRACTICE COMPETENCE

The intended learning outcome

The trainee will be able to demonstrate knowledge and skills in basic and advanced life support, endotracheal intubation and patient's care.

COURSE OUTLINE FOR THE POSTING

- Introduction to surgical instruments
- Suturing, knot tying and suture techniques

- Incisional biopsy
- Fluid dynamics and management

- Pre-operative, intra operative and post-operative care
- Tracheostomy
- Chest tubes and thoracentesis
- Critical care management
- Endoscopy
- Trauma mobilization and Management.

Minimum Requirement for Surgery

S/No	Procedures	No of cases
1	Preoperative patient care	5
2	Intraoperative patient care	5
3	Postoperative patient care	5
4	Major surgical operation (observation and participation)	5

Minimum requirement for Anaesthesia

S/No	Procedures	No of Cases
1	Basic Life Support	3
2	Advanced Life Support	3
3	Local Anaesthesia	4
4	General Anaesthesia (observation and participation)	3
5	Endotracheal Intubation	3
6	Management of Pain	5

Minimum Requirement for Medicine

S/No	Procedure	No of cases
1.	Management of endocrine emergencies observation and participation	5
2.	Management of cardio vascular emergencies observation and	5

	participation	
3.	Management of pulmonary emergencies, observation and participation	5

CONTACT HOURS

SECTION	MO NTH S	ACADE MIC CONT ACT HRS. PER WEEK	CLINIC AL CONTA CT HOUR PER WEEK	LABO RATO RY CONT ACT HOUR PER WEEK	TOTA L	CR RE DI SE T UNI TS	RE SE AR CH PE R WE EK
Surgery	2	6	30	-	36	15	-
Medicine	2	6	30	-	36	15	-

SENIOR RESIDENCY TRAINING (PART II)

ENTRY REQUIREMENT

The senior residency training commences at the successful completion of the junior residency training part 1 FMCFD

COURSE DURATION: 36 MONTHS

LEARNING OBJECTIVE

The part II FMCFD programme is designed to consolidate the resident's skills especially as to his or her adaptability to greater responsibilities and developing a holistic approach to patient care.

- The resident should be able at this stage to supervise the daily running of consultant clinic and coordinate the activities of on-going.
- Teach the junior colleagues and others in areas of organizing departmental seminars and research activities.

FORMAT OF TRAINING

A greater part of the three year period of part II training is expected to be in a family Dentistry Clinic in University Health services or teaching hospitals, generals, hospitals or in a private dental clinics recognized by the Faculty of family Dentistry.

The resident is expected do secondary postings in the following specialties

- | | |
|----------------------------------|---------|
| ➤ Periodontology | 1month |
| ➤ Paediatric Dentistry | 1month |
| ➤ Oral maxillo facial surgery | 2months |
| ➤ Prosthetic Dentistry | 1month |
| ➤ Advance conservative Dentistry | 2months |
| ➤ Oral pathology/oral medicine | 1month |
| ➤ Palliative Dentistry | 1month |
| ➤ Geriatric Dentistry | 2months |
| ➤ Family Medicine | 1month |

For the rest of the training, the resident should be based in a family Dentistry clinic/out patient clinic during the senior residency, each resident is expected to execute a research project on a topic of choice in any aspect of dentistry. This project is to be carried out under the suspension of two consultants one of whom should be a fellow of the National Postgraduate Medical College of Nigeria in Family Dentistry.

PART II RESIDENCY

POSTING REQUIREMENTS

Paediatric Dentistry minimum requirement

S.No.	Procedure	No of Cases
1.	Root canal treatment for young permanent teeth	2
2.	Root canal treatment in posterior permanent teeth in children	2
3.	Management of dental trauma in children	3
4.	Stainless steel crown in children	1
5.	Space maintainers	1
6.	Management of caries and deep lesions	2

Oral Pathology/Oral Medicine minimum requirement

S.No	Procedure	No of cases
1.	Management of vesiculobulous lesions	2
2.	Management of premalignant lesions and conditions	3
3.	Management of oral ulcers	5
4.	Management of Bell's Palsy	1
5.	Management of pain including neuralgias	5
6.	Management of Herpes Zoster	2
7.	Management of a Medically Compromised Patient	2

Oral and Maxillofacial Surgery minimum requirement

S.No	Procedure	No of cases
1.	Minor oral surgeries e.g surgical excisional biopsy, incisional biopsy, incision and drainage	5
2	Disimpaction	3
3.	Manual reduction of TMJ dislocation	1
4.	Close reduction of mandibular and maxillary fractures	2
5.	Management of oro-facial infection and wound	5

Advanced conservation minimum requirement

S.No	Procedure	No of cases
1.	Crown and bridges	3
2.	Root canal treatment of posterior teeth	2
3.	Peri-radicular surgery	1
4.	Tooth coloured restoration	5
5.	Management of cervical abrasion	5
6.	Bleaching	2
7.	Implants (Observation)	2

Prosthetics minimum requirement

S.No	Procedure	No of cases
1.	Chrome-cobalt partial dentures	1
2.	Management of a complete edentulous patient	2
3.	Management of complaints about dentures	5

4.	Partial acrylic dentures	5
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Periodontology minimum requirement

S.No	Procedure	No of cases
1.	Deep scaling and root planning (non-surgical periodontal therapy)	10
2.	Periodontal flap surgery	2
3.	Guided tissue regeneration	1

SEMINARS AND WORKSHOPS

The Faculty Board of Family Dentistry of the National Postgraduate Medical College of Nigeria runs seminars and workshops on different topics and subjects in line with the curriculum. These are to be conducted in different parts of the country and will be advertised from time to time in accordance with the annual calendar by events published at the beginning of every year. The courses and workshop supplement the training in accredited institutions. Residents are expected to attend.

GERIATRIC DENTISTRY

Geriatric Dentistry or Geriodontology delivers dental care to the elderly, including the diagnosis, prevention and treatment of problems associated with normal aging and age-related diseases, as part of an interdisciplinary team with other health care professionals. It is commonly considered to be a part of Special Care Dentistry.

LEARNING OBJECTIVE

The aim of the programme in geriatric dentistry is to produce a specialist who is equipped with special knowledge and technical skills required in the provision of oral health care for the elderly.

PRACTICE COMPETENCE

1. Have a holistic approach when managing oral health problems in the elderly.
2. Have knowledge of dental hard and soft tissue problems in the elderly.
3. Be acquainted with general and specific indications for each procedure as well as complications associated with them.
4. develops skill and manage common dental problems of the elderly e.g anodontia periodontal disease, oral ulcers

COURSE CONTENT

Module 1

- (a) Oral and dental tissue changes associated with aging
- (b) Medical problems of the elderly
- (c) Managing difficult patient behaviour
- (d) Management of common ethical and legal issues (informed consent etc.)

Module 2

- (a) Oral effects of drug therapy and avoiding drug-related complications.
- (b) Oral manifestations of systemic disease
- (c) Management of hard tissue problems in the elderly.
 - Caries and root caries root canal treatment in the elderly.
 - Tooth wear
 - TMJ problems
- (d) Management of soft tissue problems in the elderly.
 - Periodontal disease
 - Mucosal inflammation
 - Mucosal swellings
- (e) Management of toothloss in the elderly
 - Teeth replacement with partial denture, shortened dental arch
 - toothloss replacement with a complete denture.
 - Teeth replacement with a bridge.

Minimum Clinical Requirements

S\N o	Procedures	No of case s
1	Occlusal adjustment	2
2	Non-surgical periodontal therapy	10
3	Management of periodontal pocket	5
4	Management of dentinal hypersensitivity	5
5	Management of oral problems in the medically compromised patient	5
6	Management of orofacial pain, including neuralgias	2

7	Management of oral ulcers	2
8	Root canal treatment of anterior and posterior teeth	3
9	Management of tooth wear lesions	5
10	Immediate dentures	2
11	Removable complete denture /partial dentures	5
12	Denture repair, rebasing and relining	5
13	Fixed prosthodontics (crown and bridge)	2
15	Minor oral surgery e.g. incisional biopsy, excisional biopsy, incision and drainage	3
16	Management of orofacial infections	2
17	Intra-alveolar extractions	10

PALLIATIVE CARE DENTISTRY

LEARNING OBJECTIVE

This is otherwise known as Dental treatment for palliative care patients. It is an extended dental service with a central goal of providing preeminent, feasible oral care to terminally ill or patient whose disease is not responding to curative treatment.

PRACTICE COMPETENCE

At the end of this posting, the resident in family dentistry is expected to have acquired knowledge on:

- (1) Treatment modalities for palliative care patients.
- (2) Oral needs for palliative care patients.
- (3) Medical complexity of palliative care patients including treatment challenges in these patients.
- (4) Treatment modifications in palliative care patients.
- (5) Psychological support of palliative care patients.
- (6) Pre-radiotherapy treatment of palliative care patients.
- (7) Communication skills for palliative care patients.
- (8) Legal and ethical issues in management of these patients.

COURSE CONTENT

Module 1: Introduction to Palliative Dentistry

- (1) Treatment Modalities/Treatment Planning for Palliative Patients
- (2) Introduction to Palliative care patients
- (3) Palliative Care Dentistry: Legal and Ethical Issues
- (4) Learning treatment challenges of Palliative care patients
- (5) Oral needs of Unconscious palliative care patients
- (6) Oral needs of conscious Palliative care patient
- (7) Psychological needs of Palliative care patient

Module 2

- (1) Oral Examination of Palliative care patients
- (2) Medical complexity of Palliative care patients
- (3) Oral modification in treatment of Palliative care patients
- (4) Psychological support of Palliative care patient
- (5) Oral complications of Palliative care patients
- (6) Models of Palliative care
- (7) Pre-radiotherapy (Oral) treatment of palliative care patients
- (8) Communication Skills for Palliative Care Patients

Minimum Clinical Requirements

S/No	Procedure	No of cases
1.	History taking / diagnosis	5
2.	Preventive oral treatment of palliative care patients	4
3.	Oral toileting of palliative care patients	5
4.	Tooth brushing for intubated palliative care patients	5
5	Management of xerostomia in palliative care patient	5
6	Scaling and polishing in a palliative care patient	5
7	Oral modification of treatment of palliative care patients	5

RESEARCH METHODOLOGY COURSE

The National Postgraduate Medical College of Nigeria organizes a course in research methodology twice a year for Residents and residents preparing for Part two examination must attend at least one before applying for the examination. The purpose of this course is to guide the resident in selecting a research title and conducting a good research.

RESEARCH PROPOSAL

The candidate must select 1 topic of interest for his dissertation. Before writing the proposal it is particularly apt to attend the research methodology course organized by the National Postgraduate Medical College of Nigeria. These should be sent to the National Postgraduate Medical College, for assessors to be nominated by the faculty. A proposal for assessors to be nominated by the faculty. The approved title is written and submitted to the College with the letter of acknowledgement of receipt of submission to ethical committee of the establishment, where the resident is training/carrying out the research.

The proposal must clearly define the subject chosen for the study and the scope of the study and proposed methodology

All applications must be accompanied by the prescribed fees.

MANAGEMENT COURSE

The National Postgraduate Medical College of Nigeria organizes a course in management twice a year for residents.

A resident preparing for the part two examination must attend at least one before applying for the examination. The purpose of this course is to prepare the resident for the leadership role he will play as a consultant and leader of a health team.

THE DISSERTATION

The objective of the dissertation is to give the candidate an opportunity to show that he/she is able to choose a reasonable topic, define its objectives, design a study methodology as well as collect and analyze data which are capable of achieving the objectives. He/she should be capable of discussing his/her results objectively and scientifically.

FORMAT OF FAMILY DENTISTRY DISSERTATION

1. Title Page
2. Supervisor's page
3. Dedication, Declaration and Acknowledgement
4. Table of content
5. List of Tables
6. List of Figures
7. List of Appendices
8. Glossary
9. Summary/Abstract
10. Introduction
11. Statement of the Problem
12. Justification of the study
13. Research question
14. Hypothesis and counter or alternative hypothesis
15. Aim and Objectives
16. Literature Review

17. Materials and Method

- (a) Study Design
- (b) Description of the study area
- (c) Description of the study population
- (d) Sample size determination
- (e) Sampling Technique
- (f) Inclusion and Exclusion Criteria
- (g) Ethical Clearance
- (h) Description of instruments of measurement and criteria for diagnosis if applicable
- (i) Method of Standardization of Examiners (Calibration of Examiners and calculation of inter and intra Examiner variability) where necessary
- (j) Data Collection
- (k) Data Analysis – Statistical Methods used in analyzing data including how missing data was addressed, methods used to examine subgroup interactions, sensitivity analysis, (Test of Significance etc.) methods used to control confounding factors where applicable

18. Limitations of the study

THE CASE BOOK

The case book is also mandatory. This should contain interesting cases seen and managed by the resident through the residency programme, with discussion at the end where appropriate. These cases should be chosen to cover all aspects of dental care.

At present 20 cases from all the specialties are required for the case book.

All cases presented must contain signature and date of supervising consultants.

Clinical photographs should be sharp, well-focused and of good quality.

The dissertation and the case book as well as the Part II residency completion certificate must be submitted with their entry forms to the College.

FORMAT OF FAMILY DENTISTRY CASE BOOK

1. Title Page
2. Dedication
3. Declaration/signature of the resident
4. Head of Departments confirmation/attestation signature page
5. Table of content
6. Glossary/List of Abbreviation
7. Paedodontic Cases
8. Oral Medicine cases
9. Oral Surgery cases
10. Conservative Cases
11. Prosthetic cases
12. Periodontic cases

FORMAT OF CASE BOOK

Each cases should be written in the following format

- (a) A short description of the case
- (b) History of presenting complaint
- (c) Past medical history
- (d) Past Dental history
- (e) Family/Social history
- (f) Extra oral examination
- (g) Intra oral Examination
- (h) Impression
- (i) Differential diagnosis
- (j) Investigations
- (k) Definitive diagnosis
- (l) Treatment Plan
- (m) Treatment done (description of the procedure)
- (n) Follow up and outcome of treatment
- (o) Lesson learnt
- (p) Personal involvement
- (q) Signature and date of supervising Consultant

**CREDIT UNITS ALLOCATION FOR THE PART II POSTINGS IN
FAMILY DENTISTRY**

S/N O	PROCEDURE	UNITS
1.	Advanced conservative Dentistry	15
2	Prosthetics: (full- full, RPD, Obturator)	10
3.	Paedodontics	10
4.	Maxillofacial Surgery	15
5.	Oral Pathology/Medicine	10
6	Periodontology	10
7	Geriatric Dentistry	20
8	Palliative Care Dentistry	10
9	Update Courses	10
10	Workshops/Conferences	8
11	Dissertation	12
12	Case book	10
	TOTAL	140

CONTACT HOURS PER WEEK FOR PART II SENIOR RESIDENT

SECTION	MONT- HS	ACADE MIC CONTA CT HRS. PER WEEK	CLINICA L CONTA CT HOUR PER WEEK	LABOR ATORY CONTA CT HOUR PER WEEK	TOTAL CONT ACT HOUR S PER WEEK	CRE DIT UNIT S
Advanced Cons	2	3	16	2	21	15
Oral /Maxillofacial Surgery	2	4	24	-	28	15
Paediatric Dentistry	1	2	12	-	14	10
Periodontics	1	2	12	-	14	10
Oral Medicine	1	2	12	-	14	10
Prosthetic Dentistry	1	2	10	2	14	10
Geriatric Dentistry	3	6	36	-	42	20
Palliative care Dentistry	1	2	10	-	14	10
*Family Dentistry Clinic	24	360	3480		3840	40
Update course I	-	-	-	-	32	10
Update course II					32	10
Update course III						
Hands on workshop					16	10
TOTAL	-	-	-	-	4081	170

The credit units for part II fellowship examinations is as follows:

Credit Units per contact hour	= 170 credit units
Seminars, tutorials and clinical presentation of 6hrs per week	=39 credit units
Dissertation	=12 credit units
Research methodology	=6 credit units
Health management course	=6 credit units
Case book	=6 credit units
Total credit units	=202 credit units

EVALUATION

The Faculty of Family Dentistry of the National Postgraduate Medical College of Nigeria follows the protocol for evaluation in the College. Evaluation consists of two types: Formative evaluation which is an in-course assessment and Summative evaluation involving Part I and Part II examinations.

FORMATIVE EVALUATION

The objective of the formative evaluation consists of the following:

1. To diagnose the degree of convergence of education goals and residents' achievement.
2. To provide a basis for feedback to residents in order to help them improve their knowledge and competence.
3. To furnish the teachers and clinical supervisors with relevant information about the quality of their teaching, its strength and weakness.
4. To serve as an effective tool for ensuring the maintenance of high quality care for patients.

During the formative evaluation, this assessment certifies or disqualifies students for admission to the Part I and Part II FMCFD Fellowship Examinations.

It is expected that each training institution conducts regular evaluation of the performance of its residents. The procedures that constitute minimum requirements for each clerkship are assessed and graded as the resident carries them out and these are credited and signed by the consultant in charge, in the resident's logbook. In order

to be signed off for a particular specialty posting, a resident should have achieved completion of both academic programmes and performed all required procedures as well as acquired all mandatory competences. The College highly recommends end of posting assessment. The residents are better prepared for their summative examinations if they have frequent written tests under examination conditions. Finally, every training institution should forward an annual

report on the progress of each resident to the Registrar of National Postgraduate Medical College of Nigeria.

SUMMATIVE EVALUATION

This evaluation is organized by the National Postgraduate Medical College of Nigeria and this consists of National Examinations. The Candidates are invited through the National daily newspapers and the College website twice a year, in June for the November Examination and in December for the May Examinations.

ELIGIBILITY FOR EXAMINATIONS

PART I FELLOWSHIP EXAMINATION

To be eligible for the Part I FMCFD Examination candidates should satisfy the following conditions:

- (1) They should have completed a minimum of 24 months of clinical training rotating through relevant dental specialties as well as General Medicine and Surgery.
- (2) They ought to have completed all the clinical requirements for each clerkship as stipulated in the residents' portfolio and satisfactorily achieved the number of academic, clinical and laboratory contact hours.
- (3) The respective head of department of each specialty and the head of the postgraduate/specialist institution should have signed the resident up, indicating that the resident has fulfilled the above requirement. The above authorities are therefore expected to sign the certificate of training and relevant areas of the residents' log book.
- (4) The candidate should have satisfied all college conditions for eligibility for examination.
- (5) The candidate should attach the Certificates of attendance at 2 workshops and update courses in preceding the 18 months.

The resident after achieving the above should send the signed log book, duly signed certificate of training with the filled and signed application forms for Part I Examination to the Examination office.

PART II FELLOWSHIP EXAMINATION

It is expected that candidates preparing to sit for this examination have the following accompanying their examination application form.

1. Copies of up to date receipt for payment as Associate Fellow of the Faculty.
2. Faculty log book of procedures.
3. Duly signed application form certified by the head of department/unit of Family Dentistry Faculty.
4. Signed certificate of training from an accredited training institution.
5. Evidence of payment for the Part II Examination.
6. Candidate must have spent at **least three years** since the commencement of posting for the part II examination.
7. Copies of credentials-
 - First degree (BDS, BChD, DDS, DMD)
 - Full registration with the Medical and Dental Council of Nigeria (MDCN)
 - Current subscription or renewal of license from the Medical and Dental Council of Nigeria
 - National youth service corps discharge certificate (NYSC) or its exemption.
 - Part I fellowship of NPMCN or exemption from Part I Fellowship Exam of NPMCN.
8. The candidate should have attended not less than two workshops and two update courses and one must be just before the examination.
9. Certificate of attendance at research methodology course organized by NPMCN
10. Certificate of attendance at management course organized by the NPMCN
11. Signed three copies of duly completed dissertation and case book.
12. Signed three copies of completed case books with each case duly signed by consultant

EXAMINATION FORMAT

PART 1 EXAMINATION

The Part I Examination consists of three written papers; Multiple Choice Questions (MCQ) CBT (Paper I), Theory (Paper II) and Objective structured clinical examination OSCE as well as clinical and oral examination. To be successful in FMCFD Part I Examination a candidate should have satisfactorily passed all the above sections of the examination

PART II EXAMINATION

Part II examination starts with a 20 minute power point presentation of the candidate's dissertation, an oral examination of 3 sections then follows;

Section A: Dissertation assessment by two examiners and its oral defense by the candidate for 25 minutes. This carries 150 marks.

Section B: Case book assessment by two examiners and discussion with candidate for about 30 minutes. This carries 150 marks.

Section C: General oral examination lasting up to 30 minutes and carry 200 marks.

Any candidate referred: Any candidate referred in any of the sections will repeat the exam in that section only.

A candidate is deemed to have satisfied the examiners when he or she has passed all the sections and thereby eligible for the award of Fellowship of the National Postgraduate Medical College of Nigeria in Family Dentistry (FMCFD).

ACCREDITATION REQUIREMENT FOR TRAINING INSTITUTIONS

- 1) The institution must have been in existence for more than 2 years and show evidence of good administrative set up. It must also have a fellow in Family Dentistry on its staff.
- 2) The postgraduate institution for training residents in Family Dentistry must cover the following or part of the following:
 - a. Oral Pathology/Oral Medicine
 - b. Oral/Maxillofacial surgery
 - c. Prosthodontics
 - d. Conservation Dentistry
 - e. Preventive Dentistry
 - f. Radio diagnosis
 - g. Community and Primary Oral Health Care
 - h. Child Oral Health
 - i. Medicine
 - j. Surgery

There must be at least a consultant in charge of each section/unit (department) Any unavailable department in the institution can be augmented by resident tutelage in institutions where such facilities are available with the approval of the supervising consultant.

Library services: The institution must have a fully equipped library with relevant and current dental books and journals one of which must be the journal of the National Post Graduate Medical College of Nigeria. The library must be ITC complaint.

Laboratory service: The institution must have a fully equipped functional, restorative, oral pathology and biomedical laboratories.

Seminar room: The Institution must have facilities for seminars.

Resident's rest room: The Institution must have facilities to accommodate residents during their resting/ free period whilst in the institution.