

## SPECIALITY TRAINING PROGRAM FOR PEDIATRIC DENTISTRY

Title of the residency study program	State code
Pediatric dentistry	733A40013

Academic awarding institution	Language
Lithuanian University of Health Sciences, Medical Academy, Clinic for preventive and pediatric dentistry Luksos- Daumanto str.6, LT-50106 Kaunas, Lithuania	Lithuanian

Kind of studies	Cycle of studies	Level of qualification according to Lithuanian Qualification Structure (LQS)
University studies	Non-degree studies	7 <sup>th</sup> level

Mode of the studies and length in years	Volume of the program in ECTS credits	Total amount of student work	Formal teaching and practice hours	Independent self-direct learning hours
Full-time studies, 3 years	198	5280		

Area of studies	Main field of the study program	Parallel study program (if available)
Biomedical sciences	Odontology	-

Professional qualification awarded
Pediatric dentist

Study program director	Director's contact information
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Institution of accreditation	Accreditation until
Centre for Quality Assessment in Higher Education	Year 2014

Aim of the residency study program
To prepare a doctor specialist, universally educated, honest, initiative, self-sufficient, interested in science innovations, able to solve problems and work in a team, having pediatric dentist professional qualification and able to apply acquired knowledge, skills and abilities in practical job.

Program profile		
Disciplines/subject areas	Orientation of the program	Distinctive features of the residency study program
Program consists of obligatory and optional cycles including theory, practice and self-sustaining work. Obligatory cycles are oriented to extend knowledge and abilities of doctor- dentist in fields of aetiology, pathogenesis, treatment, and prevention of teeth caries, periodontium, non- carious, oral mucosa diseases and other diseases. Special cycles are trained to knowledge of child development, psychological aspects of work with	Applied orientation program, orientated to practical activity and developing abilities for scientific research work, providing pediatric dentist professional qualification.	Pediatric dentistry residency program is based on theoretical studies and practical and scientific job integration from the first year of studies. Practical skills are obtained and theory course is realised with the help of University professors – residency base specialists. The main base of pediatric dentistry residency – LUHS Hospital Public Institution “Kaunas Clinics” is accredited, distinguishes in diagnostic and treatment of all oral, maxillofacial diseases related structures concentration. The base of residency is selected according established order by

<p>children, prevention of malocclusion, prosthodontic problems in children age, inflammatory process in maxillofacial region, dental traumas and other. Considerable attention is allowed for problems of dental treatment for children with disabilities and severe systemic diseases.</p> <p>During optional cycles resident can deepen knowledges in work with Ni-Ti rotary instruments, under microscope help, solve prosthodontic problems in primary and mixed dentitions period, and perceive choice peculiarities of filling materials for treatment of dental caries in children age and adolescence.</p>		<p>Regulation of University Medicine residency. The scientific work ability is trained by accomplishment of scientific work in clinic for preventive and pediatric dentistry. There is an opportunity provided to accomplish part of the residency in selected foreign clinic.</p> <p>Program is prepared taking into account LR legal acts: Directive 2005/36/EB of European Parliament and the Council; Directive 2001/19/EC and 93/16/EEC European Parliament and the Council of 14 May 2001.</p> <ul style="list-style-type: none"> <li>• LUHS Postgraduating study regulation; Order by Rector of KMU 2003 05 23 N.2848-R “Principles of residency program formation”, Order by Rector of KMU 2004 12 06 N.PS-8-105-R “Organization of residency study”, Order by Rector of KMU 2004 12 06 N.V-419 “Selection and assessment of residency and intership bases”.</li> <li>• Order by LR Minister of Health of April 15, 2009 No V-269 „About Lithuania Medicine Standard MN 45:2009 „Pediatric dentist. Functions, duties, rights, competency and responsibility”.</li> <li>• Order by LR Minister of education and sciences of August 24, 2004 No ISAK-1310 “Registration and assessment of medicine, odontology, veterinary medicine residencies”;</li> <li>• Order by LR Minister of Health and Minister of education and sciences of June 17, 2004 No ISAK-969/V-445 “Confirmation of requirements, selection of residency bases and assessment regulation of medicine, odontology, veterinary medicine residencies”;</li> <li>• Directive Council 93/16/EEB of April 5, 1993: „Relief of freedom for doctor’s movement and mutual recognition of their diplomas, certificates and other official confirmative qualification documents“.</li> <li>• Cumming AD, Ross MT. The Tuning Project (medicine) – learning outcomes / competences for udergraduate medical education in Europe. Edinburgh: The University of Edinburgh, 2008. Access internet: <a href="http://www.tuning-medicine.com">http://www.tuning-medicine.com</a>.</li> <li>• Bulajeva T., Lepaite D., Sileikaite-Kaishauri D. Study program manual. Vilnius, 40 p., 2012 (prepared for project “National Concept Preparation for European Credit Transfer and Accumulation System (ECTS): Harmonisation of Credits as well as Creation and Implementation of the Learning Outcomes Based Study Programs Methodology“(Nr. VP1-2.2-</li> </ul>
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<b>Admission requirements</b>	<b>Recognition of previous learning</b>
<p>Master degree of odontology and odontologist doctor professional qualification is obligatory. Admission by the way of general competition. Competitive score structure of is given in the conditions for entrance to the LUHS residency programs. The main components of competitive score is the average assessment of all subjects, studied during integral studies, final exam assessment, clinical odontology practice assessment, student's scientific activities assessment (appointed by Student Science Association (SSA)), motivational interview assessment. Motivational interview takes place according to the schedule set in advance. Motivation Committee is composed of academic pediatric dentistry staff and residents representatives. Letter of motivation is directed for committee and is given at motivational interview. Scientific activities in the field of pediatric dentistry as well as qualities of human being are evaluated. Competition is public and takes place separately to every residential study program in two stages (main and additional). Second or additional stage can be organised if after the main admission free places are still available.</p>	<p>Results of previous studies are accepted individually, taking into account the developed competencies and goals of program that correspond to „Pediatric dentistry“ residency study program, with the guidance of procedures set by LUHS Senate.</p>

<b>Access to further education</b>
<p>Degree providing third cycle doctoral studies.  <b>Third cycle degree studies may be an option ( PhD).</b></p>

<b>Access to professional activities (employability)</b>
<p>Doctor with pediatric dentistry speciality can do practical job in state as well as in private health care institutions, which have a licence to run pediatric dentistry profile services, can seek a scientific degree in doctoral studies, do pedagogical job. Pediatric dentistry licence is given by the Lithuanian Dental Chamber, after submitting diploma of completed odontology studies program, internship certificate and certificate of completed residency. Certificate of completed residency and conferred professional qualification are acknowledged in member countries of EU. All pediatric dentists, completed studies of residency, find the work. Perspective of employability is good after completed residency of pediatric dentistry.</p>

<b>Learning and teaching approaches</b>	<b>Methods of assessment (of learning achievements)</b>
<p>Various teaching and studying methods are applied: lectures, seminars, consultations, group discussions together with doctors-residents, every-day activity logbook writing .preparation and presentation of clinical cases, formation and realisation of self-improvement plan.</p> <p><b>Skills and competences are acquired via their job as residents in Clinic for preventive and pediatric dentistry, Clinic of maxillofacial surgery and in the</b></p>	<p>Assessments are occurring in the end of each cycle, forms of assessment are written and verbal. The mark is given in 10-score system.</p> <p>Regular assessment of proper performance and/or interpretation of clinical work, diagnostic procedures is done weekly according every-day activity logbook and performed assignment by stamp of head of residency.</p> <p>During cycle acquired practical abilities and skills are assessed by mark in 10-score system and are signed in logbook and credit book of</p>

<p>other departments; this includes day-to-day review of clinical patient conditions, treatment of patients under supervision of head of residency.</p>		<p>residency.</p> <p>During seminars scientific literature review and clinical cases are presented and analysed.</p> <p>Subject of scientific- research work is suggested by resident or head of residency. Initial subject, object of survey and methods of scientific-research work are discussed and confirmed through session of clinic for preventive and paediatric dentistry. The results of scientific- research work are presented not later than one month by final residency exam.</p> <p>Studies of residency are completed by practical and theoretical exams. Practical exam is taking one- three days before theoretical exam. Theoretical exam is taking by answering to five questions. Members of committee assess every question separately in 10-score system. The mean of scores is calculated.</p>	
<p><b>General competencies (knowledge, abilities, values and attitudes)</b></p>		<p><b>Outcomes (results) of residency study program</b></p>	
1.	Professional attributes	1.1	Be honest and honourable with patients, follow medicine ethics norms and requirements for good medicine practice, be critical toward others and himself/herself, be able to feel compassion for the patient, be creative and initiative.
2.	Professional activity	2.1	Have ability to evaluate the boundaries of his/her competencies in paediatric dentistry, to act independently, if there is a need, seek for a help, solve problems and take decisions, communicate and work in a team with specialists from other fields( maxillofacial surgeon, orthodontists, endodontists, dental and jaw prosthodontists, paediatric dentists, paediatric psychologists).
3.	<p>Doctor as an expert</p> <p>Jeį kas, turi (gydytojas pasauliniame kontekste) Global doctor</p>	3.1	Be able to analyse typical symptoms of children oral cavity diseases, diagnose oral diseases, constantly seek perfection in odontology while continuing lifelong learning, be able to apply theoretical knowledge in practice, to pass own knowledge and abilities to colleges that have less practice, abilities to plan and to do scientific research.

Subject-specific competences (knowledge, abilities, values and attitudes)		Aims (results) of residency study program	
4.	Patient and/or relatives dental consultation <b>Consultation with a patient</b>	4.1	To be able to evaluate general patient condition, to ascertain and assess dental symptoms, to collect anamnesis of dental disorders, to perform oral examination.
		4.2	Be able to explain to the patient and/or his relatives a goal and a meaning for the actions taken to the patient, explain about dental findings, to discuss further actions, to reassure and to motivate patient and/or his relatives, to understand legal aspects regarding informing patient and/or his relatives.
5.	Patient's dental diagnostics and formation of treatment plan <b>Making a management plan</b>	5.1	To recognise dental disorder, to evaluate the degree of severity, to make a plan for necessary diagnostic tests, be able to interpret test results, to perform primary (complaints, anamnesis, total examination) and secondary (interpreting tests' results and planning, performing and interpreting complementary tests' results) differential diagnostics on patients symptoms reasons; to make a relevant treatment plan for an individual patient, to discuss it with a patient and/or his relatives as well as evaluate affectivity of prescribed treatment.
		5.2	Ability to communicate with patient and his/her relatives in case of critical condition; to gain confidence and written agreement from informed person, communicates in writing (filling up medical documents), communicate with aggressive patient.
		5.3	To recognize orthodontic malocclusion, to assess the degree of severity, , to make a plan for necessary diagnostic tests, , be able to interpret test results, to perform differential diagnostics on patients symptoms reasons; to make a relevant treatment plan for an individual patient, to discuss it with a patient and/or his relatives, to choose the required space retainer in dental arch .
6.	<b>Medical emergencies and resuscitation</b>	6.1	Be able to provide first aid in cases of dental trauma, provide intensive care according to the valid dental recommendations, provide aid in case of trauma, and have abilities to treat conditions that require

			emergency assistance.
7.	<p>Executing procedures, evaluation and interpretation of results</p> <p>Performing or requesting of appropriate investigations and interpretation of the results</p>	7.1	Be able to perform intraoral and extraoral examination, to examine soft and hard oral tissues, to palpate, to perform percussion, to evaluate risk factors of oral diseases, to perform tests of oral microflora, saliva, to evaluate vitality of tooth, to do dental and bitewing x-ray.
		7.2	To be able to assess caries prevalence and caries experience indices, to evaluate caries risk category, oral hygiene and periodontal indices, to assess x-ray.
		7.3	To evaluate the risk factors of orthodontic malocclusion, to assess effectiveness of orthodontic treatment, if patients has orthodontic appliance.
8.	<p>Participation in health preservation, promoting and encouraging a healthy lifestyle</p> <p>Health promotion, engagement in population health issues and effective work in health care system</p>	8.1	Be able to assess risk for patient's health and apply proper and rational remedies to lower the risk, apply infection control precautions, asses professional activities risk for his/her own health and take precautions to avoid this risk.
		8.2	To participate in health programs on the level of population and of an individual.