



THE UNIVERSITY OF  
**WESTERN  
AUSTRALIA**



Oral Health Centre  
of Western Australia

## **UWA DENTAL SCHOOL**

# **Doctor of Clinical Dentistry (Oral Medicine)**

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Discipline Lead Oral Medicine**

## **Course Outline and Guidebook**

*Revised January 2023*

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## Table of Contents

Mission Statement.....	3
Introduction.....	3
University Rules Governing the Course .....	5
Pre-Requisites for Admission into the Course .....	5
Selection Process.....	5
General Information for Students .....	6
Outcomes of the Course.....	8
Program Outcomes .....	8
Resources Available.....	9
The Oral Medicine Clinic .....	10
Teaching and Learning Methods .....	10
Participation in DMD Teaching.....	10
Overall Course Outline .....	11
Essential Reading .....	12
Clinical Activity .....	14
Logbook.....	15
Case Presentations .....	15
Critical Review of Article and Journal Club.....	16
Research Project.....	16
Unit Outlines and Assessment .....	16
Doctor of Clinical Dentistry Core Units .....	16
<i>Dental Research Methodology</i> .....	17
<i>Biostatistics I</i> .....	17
<i>Oral and Maxillofacial Radiography and Radiology</i> .....	17
Oral Medicine Specialty Units.....	18
1 <sup>st</sup> Year Units.....	18
2 <sup>nd</sup> Year Units .....	20
3 <sup>rd</sup> Year Units.....	23
Oral Medicine Research Dissertation .....	24

## **MISSION STATEMENT**

The Oral Medicine discipline of the University of Western Australia (UWA), Dental School aims to teach and develop the necessary skills to provide ethical, high quality, patient-centred and evidence-based treatment to their patients. Furthermore, the aim is to develop graduates who have a broad scientific foundation of knowledge to become critical thinkers and to embrace the developing and ever-changing science of the discipline with enthusiasm and caution whilst also developing their technical skills to a high level.

## **INTRODUCTION**

Oral Medicine is that specialist branch of dentistry concerned with the diagnosis, prevention and predominantly non-surgical management of medically-related disorders and conditions affecting the oral and maxillofacial region, in particular oral mucosal disease and orofacial pain, as well as the oral health care of medically complex patients. The discipline of Oral Medicine at UWA subscribes to the definition as outlined by both the Dental Board of Australia (DBA) and the Oral Medicine Academy of Australasia (OMAA).

This three-year course is designed to provide didactic, theoretical, and clinical instruction in Oral Medicine leading to the award of the degree of Doctor of Clinical Dentistry (Oral Medicine). The course initially covers the basic sciences pertinent to the practice of Oral Medicine, and it then expands to give comprehensive exposure and experience in a tertiary referral Oral Medicine clinic. The course emphasis is placed on the development of understanding of Oral Medicine.

Didactic training diversely involves attendance at lectures and tutorials, and the preparation and presentation of seminars and assignments. A research project must be undertaken and successfully completed. The preferred mode of teaching is by involvement in small group discussions.

The DBA has specific requirements for registration as a Specialist Dentist in each of the specialty disciplines. Applicants must meet the Board's requirements for English language, they must be registered as a general dentist, must have at least two years full-time equivalent experience as a general dental practitioner, and they must have successfully completed a single three -year full time accredited and approved postgraduate specialty training program in the relevant discipline. The Oral Medicine program at UWA is fully accredited by the Australian Dental Council. Graduates registered as a dentist with the DBA are able to register as an Oral Medicine specialist with the DBA on completion of the course. The Doctor of Clinical Dentistry degree does not qualify an overseas trained dentist for registration in Australia-it can only be used to gain registration as a specialist once the person is registered as a general dentist.

Dentists who are not eligible to register as a general dentist in Australia (e.g. overseas-trained dentist except those from New Zealand, UK, Ireland,) must successfully complete the Australian Dental Council's examination process for overseas-trained dentist in order to register as a dentist in Australia before they can apply for Specialist registration as an Oral Medicine Specialist. This applies even if they have completed the Doctor of Clinical Dentistry degree at an Australian University such as UWA. In other words, the Doctor of Clinical Dentistry degree does not qualify an overseas trained dentist for registration in Australia – it can only be used to gain registration as a specialist once the person is registered as a general dentist.

The information in this Course Outline and Guidebook should be read in conjunction with the University's Postgraduate Handbook, which is published each year. This Handbook contains all the various Rules that govern the conduct of the course. Information about the Units in the course can be found in the Units Handbook, which is also updated each year. The Postgraduate Handbook and the Units Handbook can be accessed via the University's website at: <http://handbooks.uwa.edu.au/postgraduate> and <http://units.handbooks.uwa.edu.au/>.

This version of the guidebook supersedes all previous versions and is to be used as the most current and up to date version.

## UNIVERSITY RULES GOVERNING THE COURSE

The Rules governing the degree of Doctor of Clinical Dentistry (by coursework) are available at the following website: <http://rules.handbooks.uwa.edu.au/rules/mdhs/part7/division5>

Applicants and students must be familiar with the Rules and the following policies which are also outlined in the School Handbook:

- UWA Regulations for student conduct and discipline
- UWA Policy on Assessment – UP15/5
- UWA Statute No. 17
- UWA Policy on Professional Behaviour for Students
- UWA Policy on Originality and Academic Integrity
- UWA Policy on Academic Conduct
- Australian Code for the Responsible Conduct of Research
- OHCWA Policies and Procedures

In case of suspect academic or professional misconduct this will be addressed under the abovementioned University's Policies and followed-up confidentially by the Program Convenor and discussed with other staff members who have a direct line of procedural responsibility in such matters.

## PRE-REQUISITES FOR ADMISSION INTO THE COURSE

Admission requirements for the Doctor of Clinical Dentistry degree are outlined in the University's Rule 8.7.5.2 and are as follows:

- a degree of Bachelor of Dental Science from the University of Western Australia, or equivalent as recognised by the School; *and*
- at least two years' full-time equivalent professional experience in the practice of general dentistry; *and*
- successful completion of the Primary examinations for Fellowship or the MRACDS (GDP) for Membership of the Royal Australasian College of Dental Surgeons or equivalent; *and*
- registration with the Dental Board of Australia for the duration of the enrolment.
- English language competency - both the University of Western Australia and the Dental Board of Australia requirements must be met. IELTS (academic) is the only examination for overseas-trained dentists that is accepted by both UWA and the DBA. The University requires a minimum overall score 7.0, with no band less than 7.0 in this examination.

## SELECTION PROCESS

- The UWA Dental School advertises the availability of Doctor of Clinical Dentistry courses in the local press and appropriate professional publications (e.g., Australian Dental Association WA Branch: Articulator, Federal News Bulletin) and on the School website early in the year prior to commencement of studies (usually late January each year). Applications will be called for with a specified closing date (usually 30 April).
- Following the closing date, all applications will be forwarded to the Program Convenor who will review the applications to ensure that all relevant information has been supplied, and two

Referees' Reports have been received. The Program Convenor will then convene a Selection Committee. Typically, this Committee will consist of the staff involved in the teaching program.

- Selection will be based primarily on the academic record, research experience and background of all candidates. Consideration will also be given to the candidates' involvement within the dental profession during their career as a general dentist. A broad range of clinical experience will be advantageous, as well as a demonstrated commitment to continuing dental education whilst working as a general dentist. Ideally, candidates should also be able to demonstrate an ongoing interest in the science and practice of Oral Medicine prior to applying for the course.
- The Program Convenor will shortlist the applications and interviews will be arranged. Following the interviews, the Selection Committee will decide which applicant(s) will be accepted into the program. The Head of the UWA Dental School gives final approval of applications.
- Approved applicants will then receive a formal letter of offer from Central UWA Admissions to enrol in the course in the specified year.
- Offers are only valid for one month before they lapse, and a new application is required. In exceptional circumstances, an extension may be granted by the Head of School.

## **GENERAL INFORMATION FOR STUDENTS**

- Students will be enrolled as a Doctor of Clinical Dentistry candidate for the three years of the course. As part of this role, it may be necessary for the student to undertake emergency clinical work after normal hours, at weekends and/or on public holidays.
- In order to remain in the course, Doctor of Clinical Dentistry students must make satisfactory progress in the course, as determined by the Program Convenors and the School's Board of Examiners.
- Students must also be registered to practice dentistry throughout the duration of the Doctor of Clinical Dentistry course. It is the student's responsibility to ensure they have current registration and written proof of registration must be shown to the Program Convenor after renewal each year. Students who have done their general dental training at an overseas university must apply for Temporary Registration as a Postgraduate Student with the Dental Board to allow them to treat patients whilst a student at UWA. Temporary Registration will usually restrict the dentist to only working within the UWA clinics (that is, at OHCWA).
- Once registered with the Dental Board, all Doctor of Clinical Dentistry students must apply to the Health Insurance Commission for a Provider Number. This number is required for two reasons: firstly, to enable students to order radiographs, blood tests, histo-pathological examinations, etc under the Medicare system so patients only need to pay the "gap" amount charged by the relevant provider; and secondly for patient billing purposes so patients who have private health insurance can claim rebates from their insurance company. The Provider Number given by the Health Insurance Commission is "location specific" so it only applies when treating patients at OHCWA. Hence, all students must apply for a new Provider Number that is specific for use at OHCWA. This number must be provided to the School and OHCWA so it can be included in the computerised patient management system known as the Titanium Oral Health Management program (TOHM).
- Students will also need to apply for a Dental Prescriber number (DP No.) from the Pharmaceutical Branch of the Health Insurance Commission if they do not already have one. The DP No. is used for prescribing purposes and should be included on all prescriptions written by the student. This number enables patients to be provided with drugs listed on the

Pharmaceutical Benefits Scheme list for dentists at a reduced fee. The DP No. is “practitioner specific” (i.e. the practitioner can use this number at any location) so if a student already has a DP No. then there is no need to apply for another one. However, overseas-trained dentists or dentists without a DP No. must apply for one as soon as they have registered with the Dental Board.

- Students will work in the OHCWA Oral Medicine Clinic where they will treat patients referred from within OHCWA or from other clinics and hospitals by doctors or dentists for specialist-level Oral Medicine assessment and management. Hence, students are expected to comply with all OHCWA and School policies at all times. All such policies are available to all staff and students on the OHCWA Sharepoint at <https://uniwa.sharepoint.com/sites/ohcwa/SitePages/Home.aspx>
- Students will also work at the Perth Children’s Hospital where they will assess and manage paediatric Oral Medicine cases. Students must be credentialed and comply with the rules of the hospital.
- Students will be required to keep good, clear, legible, and thorough clinical records in the OHCWA patient records. Patients referred from other OHCWA clinics should be referred back to that clinic/operator on completion of the treatment they were referred for with clear information about what treatment has been provided and details of what further treatment is required. When patients have been referred from clinics/dentists outside OHCWA, then postgraduate students must write reports to the referring dentists/clinics as per standard OHCWA procedures – this includes a report following the consultation, a report following completion of treatment and reports following any review examinations for all patients treated by the postgraduate student. Template letters are provided in the patient clinical management system (TOHM), and these should be customised for each patient.
- Students are required to participate in the DMD Oral Medicine teaching program as tutors in the clinics. They may also be required to present lectures to the DMD students from time to time. Appropriate remuneration will be provided to students participating in these activities. Experience in teaching is an essential part of the program and it is consistent with the Guidelines for specialist training as published by the Australian Dental Council (ADC).
- Students may be paid up to two casual tutoring sessions per week to be involved in DMD clinical supervision and teaching. Sessions are typically within the specific discipline of study. Students are not paid for any clinical work they undertake at OHCWA.
- Applicants must recognise that the various components of the program may dictate the necessity to work outside the normal hours stipulated by the University Calendar and/or the normal working hours of the OHCWA. Applicants must be willing and able to undertake such work.
- Some students endeavour to work on a part-time basis as a dentist in private practice whilst also doing the Doctor of Clinical Dentistry course. Students should recognise that the course is a full-time course and it does involve a heavy work load. Before agreeing to do other work, students should very carefully assess their availability and the impact such other work may have on their spare time. If financial difficulties are being encountered, then students should discuss the situation with the Course Co-ordinator in the first instance.
- The course operates on a “calendar year” basis and does not follow the University’s standard “academic year” timetable. Formal activities (clinics, tutorials, etc) will commence in late January each year (the commencement date may vary across disciplines and will be in consultation with the relevant Program Convenor) and will continue until the end of December – the exact dates will be supplied to students each year.

- Tuition fees will be levied by the University each year. The amounts to be paid will be advised each year. Fees are compulsory but students may be able to get assistance from the Federal Government via the FEE HELP (Higher Education Loan Program) - this is a deferred payment loan scheme. Further information can be found at: [http://www.studentadmin.uwa.edu.au/welcome/fees/postgraduate\\_fees](http://www.studentadmin.uwa.edu.au/welcome/fees/postgraduate_fees)
- Students are encouraged to become involved in the relevant professional societies such as the Australian Dental Association and the Oral Medicine Academy of Australasia. The organisations provide opportunities for students to participate in continuing professional development courses in Dentistry in general, as well as in the specialty of Oral Medicine. Membership of these organisations as well as attendance and participation at their meetings also enable students to meet their future specialist colleagues from all parts of Australia and New Zealand and to interact with them. Such experiences are invaluable for future careers prospects.
- The School, in association with the Australian Dental Association (WA Branch), conducts a number of Continuing Professional Development courses each year. Doctor of Clinical Dentistry students may be allowed to attend courses that do not involve “hands-on” activities (e.g. typically lecture courses) free of charge or at a reduced cost. Students must enrol for the course in order to allow the organisers to arrange appropriate seating and catering. See ADA (WA Branch) website for details: <http://www.adawa.com.au>

## **OUTCOMES OF THE COURSE**

Formal instruction will be provided for the student to achieve levels of knowledge (year 1), competency (year 2) and proficiency (year 3) regarding the following learning outcomes. At the conclusion of this course, graduates will be able to:

### **PROGRAM OUTCOMES**

- Evaluate, synthesise, and apply the literature relevant to Oral Medicine
- Demonstrate a respect for wisdom, intellectual integrity, and ethics of scholarship
- Demonstrate advanced problem-solving and diagnostic skills
- Demonstrate advanced clinical management skills in Oral Medicine
- Demonstrate an in-depth knowledge of the specialty of Oral Medicine through discussion, interpretation, and evaluation in written and oral presentations
- Demonstrate knowledge of the international context and sensitivities related to Oral Medicine
- Articulate the value of specialist oral medicine practice within the profession and community
- Design, conduct, interpret and report original research
- Define and demonstrate the responsibility inherent in being a dental specialist
- Provide leadership within the dental and allied professions
- Participate effectively in projects that require teamwork
- Use effective communication skills with colleagues, patients, and the broader community

### **SPECIFIC LEARNING OUTCOMES**

1. Comprehensive knowledge of the anatomy, histology and physiology of the tissues of the oral cavity and related structures.
2. Comprehensive knowledge and ability to elicit, record and interpret an accurate history from patients of any age within the scope of Oral Medicine practice.
3. Proficiency in performing an appropriate clinical examination on patients of any age within the scope of Oral Medicine practice.
4. Comprehensive knowledge of appropriate and relevant laboratory and imaging investigations within the scope of Oral Medicine practice.
5. Comprehensive knowledge of safe and effective drug prescribing.



6. Comprehensive knowledge of adverse drug reactions to commonly used drugs and recall drugs requiring therapeutic drug monitoring.
7. Comprehensive knowledge and ability to undertake safely and effectively, operative techniques either as definitive management of localised benign disease or to establish a tissue diagnosis, including where oral soft tissue malignancy is suspected.
8. Comprehensive knowledge of the structure and function in health of lips and oral soft tissues, correlate with disease states and effectively investigate and manage soft tissue disease.
9. Comprehensive knowledge and ability to investigate, diagnose and manage patients with oral soft tissue disease with a hypersensitivity basis.
10. Comprehensive knowledge of viral, bacterial, fungal, and other infections of the oral soft tissues.
11. Comprehensive knowledge of the structure and function in health of salivary glands and saliva and ability to correlate health of salivary gland tissues to disease states.
12. Comprehensive knowledge to diagnose and appropriately manage patients presenting with disorders of major and minor salivary glands.
13. Comprehensive knowledge of the structure and function in health of the nervous system and ability to correlate with nervous system disease.
14. Comprehensive knowledge and ability to diagnose and appropriately manage patients presenting with orofacial pain of odontogenic and non-odontogenic origin.
15. Comprehensive knowledge and ability to diagnose and appropriately manage patients presenting with altered cranial nerve function related or unrelated to other neurological abnormalities.
16. Comprehensive knowledge and ability to provide advice on medical disease to dental practitioners and patients and on specific oral implications of disease to medical practitioners.
17. Comprehensive knowledge and ability to develop a management plan for chronic disease, including self-care and the use of a supportive multi-disciplinary team.
18. Comprehensive knowledge and ability to recognise, manage and where required provide basic and immediate life support for adult and paediatric medical emergencies.
19. Comprehensive knowledge and ability to minimise risk of, recognise, assess, and treat simple faint, postoperative bleeding, hyperventilation, angina, myocardial infarction, acute asthma, anaphylaxis, diabetic emergencies, choking, seizures and adrenal insufficiency.
20. Comprehensive knowledge and ability to identify serious or incidental psychiatric morbidity in patients presenting with oral disease.

## **RESOURCES AVAILABLE**

The UWA Dental School is located within the OHCWA, which is a purpose-built facility incorporating all providers of dental education within Western Australia. The Centre opened on 1<sup>st</sup> January 2002 as a joint venture between UWA and the WA State Government and cost \$38million to build and equip. The Centre is operated by the University, and it supplies dental treatment to “eligible public” patients under a contract arrangement with the State Government’s Department of Health. All administrative, clinical, and other functions are carried out by UWA who employs all staff within the Centre. The Head of the UWA Dental School is also the Director of OHCWA which ensures that the Centre maintains its primary function of providing a health care facility for the delivery of dental education and dental treatment.

Staff and students at OHCWA treat approximately 15,000 public patients per year and this provides a large pool of patients for postgraduate training. In addition, OHCWA is the specialist referral centre for the State’s Dental Health Services and Community Dental Service Clinics. Private patients may also be referred to OHCWA and therefore there is an abundance of patients available for the training of specialist dentists at OHCWA.

The OHCWA building also has extensive research laboratories and it is located adjacent to buildings occupied by relevant disciplines (such as Microbiology, Pharmacology, etc) and a major teaching hospital (Sir Charles Gairdner Hospital) on the Queen Elizabeth II Medical Centre site. The State Government also has plans for extensive expansion of facilities on this site which involve hospitals and research facilities. The UWA Medical and Dental Library is located approximately 20 metres from OHCWA which provides extremely easy access for students to textbooks, journals, and other information services. Clinical and practical training is by involvement in the Oral Medicine clinics run at the E-Block OHCWA annexe situated in the main Sir Charles Gairdner Hospital as well as the Perth Children's Hospital. Pathology cases for review are facilitated with Clinipath Pathology and Pathwest.

## THE ORAL MEDICINE CLINIC

### Academic staff members:

- Associate Professor Ramesh Balasubramaniam OAM, BSc, BDS (UWA), MS, Cert Orofacial Pain (UKy), Cert Oral Medicine (UPenn), MRACDS (OralMed), ABOP, FDS RCPS(Glasg), FOMAA, FADI, FPFA, FICD
- Associate Professor Agnieszka Frydrych BDS (Hons)(WA), MDS (Oral Med, Oral Path)(WA), FRACDS (Oral Med), FOMAA, FPFA
- Associate Professor Omar Kujan DDS DipOPath MSc MFDS RCPS FHEA PhD
- Associate Professor Bobby Joseph MSc, BDS, MDS, PhD, FFOP (RCPA), FRACDS (OralMed)

### Part time staff: Adjunct staff members and clinical tutors–

- Dr Lalima Tiwari BDS (UWA), DClinDent (OralMed) (UWA), MRACDS (OralMed), FOMAA
- A diverse number of adjunct staff from various disciplines will be involved in the training program

**Dental Clinic Assistants:** Two full time DCAs with others rostered as required.

**Dental Chairs:** Up to five dedicated chairs, two of which are suitable for surgical procedures.

**Clinical Sessions:** Five to six scheduled sessions per week

### Research Staff Members:

- Associate Professor Omar Kujan DDS DipOPath MSc MFDS RCPS FHEA PhD
- Associate Professor Ramesh Balasubramaniam OAM, BSc, BDS (UWA), MS, Cert Orofacial Pain (UKy), Cert Oral Medicine (UPenn), MRACDS (OralMed), ABOP, FDS RCPS(Glasg), FOMAA, FADI, FPFA, FICD
- Associate Professor Agnieszka Frydrych BDS (Hons), MDS (Oral Med and Oral Path), FRACDS (OralMed), FOMAA, FPFA
- Associate Professor Bobby Joseph MSc, BDS, MDS, PhD, FFOP (RCPA), FRACDS (OralMed)

Other supervisor(s) will be appointed as required, depending on the particular research project being undertaken by each student.

## PARTICIPATION IN DMD TEACHING

*Each Doctor of Clinical Dentistry student is required to participate in the Oral Medicine teaching program for DMD students as part of the Oral Medicine units/modules each Semester. Typically, Doctor of Clinical Dentistry students will teach as a Tutor for one session (3 hours) per week during*

*the School's teaching semesters and they will be paid a stipend for this teaching service – details will be advised each year. Up to two sessions per week will be paid.*

## OVERALL COURSE OUTLINE

The Doctor of Clinical Dentistry (Oral Medicine) program is a three-year full-time course that emphasizes the basic sciences pertinent to the practice of Oral Medicine, and it then expands to give comprehensive exposure and experience in a tertiary referral Oral Medicine clinic. At all stages of the course, emphasis is placed on the development of understanding of the patho-biology of disorders of the head and neck.

The Doctor of Clinical Dentistry (Oral Medicine) course consists of three Core Units that will be undertaken by all Doctor of Clinical Dentistry students at UWA Dental School. These core units cover Dental Research Methodology, Oral and Maxillofacial Radiography and Radiology, and Biostatistics. The other units of study to be undertaken are discipline specific and cover Oral Medicine Theory, Oral Medicine Clinical Practice and Oral Medicine Research. At UWA, each unit of study is allocated a “point value” and students are required to accumulate 144 points over the three-year course duration – that is, 48 points per year or 24 points per semester.

Students should note that in some years the timing of delivery of some core units may vary between Semester One and Semester Two, or even between Years of the course – this will be dependent on staff and resource availability, the need to co-ordinate with other Doctor of Clinical Dentistry programs conducted by the School. Students will be advised in due course about the exact timetable details.

The overall course structure is detailed in the Table on the next page.

- Notes regarding the Table on the following page:

\* Core Units for all Doctor of Clinical Dentistry courses.

\*\* The Oral Medicine Research Dissertation unit extends over five semesters. Students are expected to design their project in Semester Two of the 1<sup>st</sup> Year, conduct pilot studies and the main experimental work in the 2<sup>nd</sup> Year and then analyse results and write their dissertation in the 3<sup>rd</sup> Year of the course. Exact timing for this will vary according to the needs of the research project being conducted and in discussion with the Supervisor(s).

YEAR	SEMESTER	UNIT CODE	UNIT NAME	POINTS
1	1	DENT5603 *	Dental Research Methodology *	6
		PUBH4401 *	Biostatistics I *	6
		DENT6813	Oral Medicine Theory I Part 1	6
		DENT6819	Oral Medicine Clinical Practice I Part 1	6
	2	DENT6849 *	Oral and Maxillofacial Radiography and Radiology *	6
		DENT6814	Oral Medicine Theory I Part 2	6

		DENT6820	Oral Medicine Clinical Practice I Part 2	6
2	1	DENT6815	Oral Medicine Theory II Part 1	6
		DENT6821	Oral Medicine Clinical Practice II Part 1	12
	2	DENT6816	Oral Medicine Theory II Part 2	6
		DENT6822	Oral Medicine Clinical Practice II Part 2	12
3	1	DENT6817	Oral Medicine Theory III Part 1	6
		DENT6823	Oral Medicine Clinical Practice III Part 1	12
	2	DENT6818	Oral Medicine Theory III Part 2	6
		DENT6824	Oral Medicine Clinical Practice III Part 2	12
1, 2, 3	Sem. 2 of 1st Year Sem. 2 of 3rd Year (inclusive)	DENT6852	Oral Medicine Research Dissertation **	30
<b>Total Points:</b>				<b>144</b>

## ESSENTIAL READING

Students enrolled in the Doctor of Clinical Dentistry (Oral Medicine) course are expected to read widely regarding the specialty discipline. This includes textbooks and journals. Seminars will be based on articles from both past and current Dental/Medical/Oral Medicine journals and hence students will need to either subscribe to the relevant journals or obtain articles via the UWA Library. The latter can be done electronically as the library has subscriptions to the electronic versions of many other journals that are relevant to Dentistry. Familiarity with the major textbooks listed below is expected and assumed. These books are available in the UWA Library for students to borrow. As they are books used by DMD students also, these books are generally only available for short-term loans from the library. Hence students are encouraged to purchase these books if at all possible so they can develop their own library of reference material for use in their future practice and teaching careers.

Additional books on specialist and dental general topics that are part of the Convenor's personal collection can be borrowed on request for a short time and used as part of seminar or clinical cases preparation.

The textbooks listed below should be considered as the initial and minimal reading material. Further reading material will be advised throughout the course. Students are also expected to keep abreast of the general developments in all areas of dentistry and dental practice, particularly those with more direct relevance to Oral Medicine.

## Textbooks

<b>Title</b>	<b>Author(s) / Editor(s)</b>	<b>Year</b>	<b>Publisher</b>
Management of Temporomandibular Disorders and Occlusion, 8 <sup>th</sup> Edition	Jeffrey Okeson	2019	Mosby Inc. (imprint of Elsevier)
Bell's Oral and Facial Pain, 7 <sup>th</sup> Edition	Jeffrey Okeson	2020	Quintessence Publishing Co.
Contemporary Oral Medicine: A Comprehensive Approach to Clinical Practice	Camile Farah Ramesh Balasubramaniam Michael McCullough	2019	Springer International Publishing
Atlas of Oral and Maxillofacial Radiology	Bernard Koong	2017	John Wiley & Sons Inc.
WHO Classification of Head and Neck Tumours, 4 <sup>th</sup> Edition, Volume 9, "Blue Book"	Adel El-Naggar John Chan Jennifer Grandis Takashi Takata Pieter Slootweg	2017	International Agency for Research on Cancer (IARC)-WHO
Orofacial Pain and Headache 2 <sup>nd</sup> Edition	Yair Sharav Rafael Benoliel	2015	CBS Publishers
Contemporary Oral Oncology	Moni Abraham Kuriakose	2017	Springer International Publishing
White and Pharoah's Oral Radiology: Principles and Interpretation 8 <sup>th</sup> Edition	Sanjay Mallya Ernest Lam	2018	Mosby Inc. (imprint of Elsevier)
Kumar and Clark's Clinical Medicine, 10 <sup>th</sup> Edition	Mona Waterhouse David Randall Adam Feather	2020	Elsevier UK
Pocket Medicine, 8 <sup>th</sup> Edition: The Massachusetts General Hospital Handbook of Internal Medicine	Marc Sabatine	2022	Wolters Kluwer
Dental Management of Sleep Disorders 2 <sup>nd</sup> Edition	Dennis Bailey Ronald Attanasio	2022	Wiley-Blackwell
Sleep Medicine for Dentists: An Evidenced-Based Overview	Gilles Lavigne Peter Cistulli Michael Smith	2020	Quintessence Pub Co
Sleep Medicine	Darren Mansfield	2017	IP Communications
Burket's Oral Medicine, 13 <sup>th</sup> Edition	Michael Glick Martin Greenberg Peter Lockhart Stephen Challacombe	2021	Wiley-Blackwell
Oral and Maxillofacial Pathology, 4 <sup>th</sup> Edition	Brad Neville Douglas Damm Carl Allen Angela Chi	2015	Saunders
Scully's Oral and Maxillofacial Medicine: The Basis of	Stephen Challacombe Barbara Carey Jane Setterfield	2023	Elsevier

Diagnosis and Treatment, 4 <sup>th</sup> Edition			
Little and Falace's Dental Management of the Medically Compromised Patient, 9 <sup>th</sup> Edition	James Little Craig Miller Nelson Rhodus	2017	Mosby
The ADA Practical Guide to Patients with Medical Conditions, 2 <sup>nd</sup> Edition	Lauren Patton Michael Glick	2015	Wiley-Blackwell
Therapeutic Guidelines	<a href="http://www.tg.org.au">www.tg.org.au</a>	-	-
Robbins Basic Pathology, 10 <sup>th</sup> Edition	Vinay Kumar Abul Abbas Jon Aster	2017	Elsevier

## Journals

- Head and Neck Journal
- Journal of Oral Pathology and Medicine
- Oral Oncology
- Oral Disease
- Oral Surgery, Oral Medicine, Oral Pathology, Endodontics
- Pain
- Journal of Pain
- Journal of Oral & Facial pain and Headache
- Journal of Oral Rehabilitation
- Headache
- Journal of Dental Sleep Medicine
- Sleep
- Other journals as advised during the course and as relevant to clinical and laboratory cases.  
Note: students will often need to read medical and general pathology journals also.

## CLINICAL ACTIVITY

The first year of the course will introduce students to Oral Medicine and related disciplines and prepare students for future independent Oral Medicine practice. Throughout the three years, the students will spend at least half of the time in clinical practice as first operator under the supervision of a consultant (5-6 weekly clinical sessions). Students will attend clinics at Perth Children's Hospital as an external Oral Medicine rotation. Oral Medicine students will also attend the Multi-Disciplinary Head and Neck Meeting at Sir Charles Gairdner Hospital on a regular basis and assess head and neck cancer patients pre- and post-treatment (surgery, radiotherapy chemotherapy). In addition, students will be expected to attend the Multi-Disciplinary Sleep Medicine Meetings at Sir Charles Gairdner Hospital, Multi-Disciplinary Paediatric Dental Medicine Meeting at Perth Children's Hospital and any other Multi-Disciplinary Meetings at UWA Dental School on a regular basis.

	Year 1	Year 2	Year 3
<b>Specialist Routine Oral Medicine Clinic</b>	5	5 (part year)	6 (part year)
<b>External Oral Medicine Rotation</b>	1	6 (part year)	6 (part year)
<b>DMD Supervision</b>	0	0	0

<b>Total number of clinical sessions</b>	5 to 6	5 to 6	5 to 6
<b>Percentage Clinical time of the didactic year</b>	50 to 60%	50 to 60%	50 to 60%

## LOGBOOK

The logbook serves a summary of all cases the students are involved with during the Doctor of Clinical Dentistry (Oral Medicine) program. In addition, as a requirement of the course it may be submitted as part of the examination requirements of the OMAA and the RACDS.

The logbook should be prepared as a summary of procedures carried for each patient visit in each semester and include cases encountered during external rotations. This is submitted to the program convenor and other academic staff members at the end of each year.

It will be regularly checked for consistency and signed by the Program convenor.

## CASE PRESENTATIONS

Case presentations are a fundamental part of the program and students are expected to present a number of their patients to the members of the Discipline of Oral Medicine throughout the course. The Oral Medicine Academy of Australasia has invited the Discipline of Oral Medicine at UWA Dental School to the Oral Medicine Grandrounds that will held throughout the academic year involving all the other Oral Medicine training programs in Australasia. All students are expected to present at least one case for the Grandrounds.

Case presentations must be prepared following these guidelines:

**HISTORY:** Medical and dental history. An assessment of the patient's expectations/desires for treatment including patient motivation and chief complaint.

**CLINICAL EXAMINATION:** Comprehensive extra-oral and intra-oral examination including vital and other signs, skin, nail, ocular signs, neurological/cranial nerve assessment and comprehensive head and neck examination.

**DIAGNOSTIC TESTS:** Appropriate radiographic/imaging assessment and other diagnostic tests such as blood tests.

**PHOTOGRAPHIC STATUS:** Appropriate and high-quality photographs must be included.

**DIAGNOSIS:** This must relate to the overall case as well as specific oral medicine related diagnoses and based on a detailed problem list.

**AETIOLOGY:** The major causes and the predisposing factors should be identified.

**PROGNOSIS:** This must relate to the overall patient evaluation.

**TREATMENT PLAN:** The treatment plan must be described in detail together with consideration, possible alternatives, and contingencies.

**TREATMENT PROGRESS:** The treatment carried out must be described in detail together with an ongoing assessment, including all aspects of documentation.

## **CRITICAL REVIEW OF ARTICLE AND JOURNAL CLUB**

Critical review of scientific articles is a necessary skill for year 1 students to acquire. This training will empower Students to comprehend the scientific basis of an article which may influence clinical decision making and patient outcomes. These seminars will involve a prepared summary of the chosen paper and a detailed description following a template in use in the Doctor of Clinical Dentistry in Oral Medicine Program. Then, the discussion begins. Attendees ask clarifying questions, inquire about different aspects of the experimental design, critique the methods, and bring a healthy amount of scepticism (or praise) to the results.

In addition, the program will have regular journal club gathering of the Students and Academic Staff Members to present and discuss current issues of scientific journals that is relevant to Oral Medicine. Each Student will be assigned journals to review with the aim to select relevant articles and present a concise summary of the findings and the potential applications to Oral Medicine.

The journal club template and pdf must be sent by the Student to other Students and Academic Staff Members at least five days before the presentation.

## **RESEARCH PROJECT**

- One third of the course is allocated to conduct clinical or basic research. The Research project is the basis for a thesis that should result in the production of a full text manuscript submitted to a peer reviewed scientific journal. It is the student's responsibility to carry out and complete the Research project. All students will have regular meetings with their supervisor(s) to update their progress.

- Students are encouraged to present their research at the School's research days, OMAA and/or local IADR meetings. They are also expected to apply for funding to the Australian Dental Research Dental Foundation and other grant opportunities.

- All the Research projects will be carried out within the Oral Medicine & Pathology Research Group that aims to promote research in the field of oral disease covering their clinical and pathological research aspects in addition to the study of orofacial pain. The ultimate goal is to enhance patient's standard of care in the field of Oral Medicine.

- The Research Dissertation unit extends over five semesters. This is an essential component of the Doctor of Clinical Dentistry Program. It is a requirement to complete 1<sup>st</sup> Year that a satisfactory literature review and ethics application are submitted by the end of the calendar year. Students will possibly conduct feasibility and/or pilot studies and the main experimental work in 2<sup>nd</sup> Year and then analyse results and write their dissertation in the 3<sup>rd</sup> Year of the course. Exact timing for this will vary according to the needs of the research project being conducted in discussion with the Supervisor(s). Further details about the Research Project are given in the Outline of the Research Dissertation Academic Unit.

## **UNIT OUTLINES**

### **Doctor of Clinical Dentistry Core Units**

Detailed Unit Guides for the Core Units will be provided by the respective Unit Co-ordinator on commencement of each Unit. These Guides will contain details of assessment, teaching methods, timetables, etc. The following information is a brief guide which may change from time to time. Any queries regarding these units should be directed to the Unit Co-ordinator as listed below and in the UWA Units Handbook at <http://units.handbooks.uwa.edu.au/>



The Doctor of Clinical Dentistry units run on University Non-Standard Teaching Periods with the exception of the core units DENT5603 Dental Research Methodology that run in the University's standard semester 1 and PUBH4401 Biostatistics Semester 1 – face-to-face mode or online.

- ***Dental Research Methodology (DENT5603)***

**Outcomes:** Students acquire skills in critiquing and planning research, critiquing research papers, writing a literature review and planning a research project.

**Content:** Students identify requirements and write a research plan, and determine resources and funding sources for research. The requirements and guiding documents for research ethics are considered. The unit covers critical analysis of research papers and examines the strengths and weaknesses of research designs. Students gain expertise in using online information resources and managing references, preparing research funding applications, research reporting, data management and journal article writing in refereed journals.

The unit uses a variety of modes of learning and is structured to encourage students to be active and independent learners in a supportive learning environment. Some work is performed as group activities and other work is completed as individuals, reflecting how work on many research projects is undertaken.

**Staff:** This unit will be co-ordinated by A/Prof Omar Kujan

- ***Biostatistics I (PUBH4401)***

**Outcomes:** Students appreciate the role of statistics in health and medical practice and research; understand the statistical content of articles in general health and medical literature; know how to summarise and present data; know how to interpret confidence intervals and hypothesis tests; calculate confidence intervals and carry out hypothesis tests for comparison of means, proportions, incidence rates and survival curves, and know when to apply specific methods; understand and are able to calculate correlation coefficients and apply linear regression; use microcomputers for entering and editing data; and use SPSS for calculating data summaries and for statistical analysis.

**Content:** This unit is a prerequisite for more advanced biostatistics units. The unit describes and discusses applications of biostatistics in public health, clinical practice, and research. There is an emphasis on developing a deeper understanding of the role, use and interpretation of basic biostatistical methods relating to means, proportions, rates, and survival curves. Satisfactory completion of the unit enables students to perform basic statistical analyses, read literature more effectively, and communicate and work effectively with a statistician.

Topics covered include summarising and presenting data; standard error and confidence intervals; significance tests and p-values; estimation and comparison of means, proportions (prevalence, risk), incidence rates and survival curves; correlation and simple linear regression; 2 x 2 tables; odds ratio; rate ratio; sample size determination, and critical appraisal of statistical aspects of public health and medical publications. Computing, using the statistical package SPSS, is an integral part of the unit.

**Staff:** The unit will be co-ordinated by Dr Kevin Murray from the School of Population Health.

- ***Oral and Maxillofacial Radiography and Radiology (DENT6849)***

**Outcomes:** Students are able to demonstrate an understanding of the processes in interpretative radiology; demonstrate an understanding of the responsibilities and the limitations of dental specialists in oral and maxillofacial radiology; and demonstrate sound understanding in the

prescription of diagnostic imaging as it pertains to the various dental specialists and clinical scenarios.

**Content:** This unit provides clinical experience in oral and maxillofacial radiography and radiology to introduce the student to the discipline as it applies to the various dental specialties.

**Staff:** This unit will be co-ordinated by Dr Dayea Oh.

## **Oral Medicine Specialty Units**

### **1<sup>st</sup> Year Units**

- ***Oral Medicine Theory I (Parts 1 and 2) (DENT6813 / 6814)***
- ***Oral Medicine Clinical Practice I (Parts 1 and 2) (DENT6819 / 6820)***

#### **ORAL MEDICINE - THEORY**

A detailed and thorough working knowledge of anatomy is a prerequisite for competent practice in the field of Oral Medicine. Diagnostic histopathology may be thought of as applied histology and a thorough mastering of this field is necessary for the student to progress to further studies in Oral Medicine.

A detailed and thorough working knowledge of the anatomy of the orofacial region is a prerequisite for competent practice in a field that involves surgical procedures, such as Oral Medicine. The clinical and surgical anatomy of the head and neck is revisited, and emphasis is placed on the developmental, structural and functional anatomy of the region. The surgical anatomy is emphasised especially from the point of view of minor oral surgery and morbid anatomy. The importance of anatomical representation, both normal and morbid, using conventional radiographic and contemporary imaging techniques is stressed.

#### **CLINICAL ORAL MEDICINE**

It is important that students become familiar with the scope of Oral Medicine as early as possible in their studies. An introduction to the clinical aspects of Oral Medicine is presented by attendance on routine teaching clinics where the student acts initially as an observer and assistant in clinical sessions. Formal tutorial and seminar sessions are used to complement these activities. Students will participate in the Head and Neck Multidisciplinary Team meeting, Multi-Disciplinary Pain Meetings at Sir Charles Gairdner Hospital, Multi-Disciplinary Paediatric Dental Medicine Meeting at Perth Children's Hospital and Multi-Disciplinary Sleep Meetings at Sir Charles Gairdner Hospital on a regular basis and will be on rotation through other clinics with an Oral Medicine clinical component (Perth Children's Hospital). As postgraduate students will contribute to formal DMD teaching later in their course, they may also attend the lecture courses in Oral Medicine that are presented to the 3<sup>rd</sup> and 4<sup>th</sup> Year DMD students. Postgraduate students will prepare assignments in relevant subjects.

#### **Formative assessment:**

Participation in seminars and presentations from other students and staff and presentations of assignments (medical and Oral Medicine; case presentations and journal clubs). Additional formative methods to monitor the progression of the students during the semester are DOPS, CbD and Mini-CEX forms. These are used in a clinical setting and can contribute to assess the student and provide documented and immediate feedback on both clinical and theoretical aspects.

**Summative assessment:****DENT6813 Oral Medicine Theory I Part 1**

#	Assessment	Indicative weighting	Failed component
1	Written assessment	50%	Formative
2	Ongoing seminar presentations and critical appraisal of a journal article	30%	Formative
3	Case based discussion (unseen case)	20%	Formative
4	Professional behaviour assessment (failed component)	0%	Failed component

**DENT6814 Oral Medicine Theory I Part 2**

#	Assessment	Indicative weighting	Failed component
1	Written assessment	60%	Failed component
2	Critical appraisal of a journal article	20%	Failed component
3	Case based discussion (unseen case)	20%	Failed component
4	Professional behaviour assessment (failed component)	0%	Failed component

**DENT6819 Oral Medicine Clinical Practice I Part 1**

#	Assessment	Indicative weighting	Failed component
1	Objective structured clinical examination	50%	Formative
2	Ongoing assessment - direct observation of procedural skills (DOPS, Mini-CEX) and viva voce	40%	Formative
3	Log book	10%	Formative
4	Professional behaviour assessment (failed component)	0%	Failed component

**DENT6820 Oral Medicine Clinical Practice I Part 2**

#	Assessment	Indicative weighting	Failed component
1	Objective structured clinical examination	50%	Failed component
2	Viva voce	40%	Failed component
3	Log book	10%	Failed component
4	Professional behaviour assessment (failed component)	0%	Failed component

## 2<sup>nd</sup> Year Units

- ***Oral Medicine Theory II (Parts 1 and 2) (DENT6815/6816)***
- ***Oral Medicine Clinical Practice II (Parts 1 and 2) (DENT6821/6822)***

After the 1<sup>st</sup> Year of the Doctor of Clinical Dentistry program, students will have a proven capability in the pre-clinical subjects and the remainder of the program is directed towards the application of clinical subjects to the specialised areas of Oral Medicine.

Students will study aspects of Medicine, Pharmacology and Microbiology during the second year of the course, and clinical secondments may occur during the 2<sup>nd</sup> and 3<sup>rd</sup> Years of the program, depending on timetabling and the availability of personnel and space in other hospital departments.

### **PHYSIOLOGY and BIOCHEMISTRY**

This module revisits these subjects with particular emphasis placed on the subject areas associated with the aetiology and management of diseases relevant to Oral Medicine. A detailed sub-module is dedicated to the physiology of oral and para-oral function.

### **MEDICINE**

The practice of Oral Medicine requires an appreciation of how general diseases, and their treatments may affect the mouth. In addition, the management of oral diseases often involves therapy that may itself interfere with other body systems or other treatment being provided for the patient. Hence, co-operation with medical practitioners is a daily requirement and occurrence in routine Oral Medicine practice. The study of General Medicine is central to further studies in Oral Medicine. This module comprises tutorials, seminars and ward rounds, and it is undertaken in the teaching hospitals, Sir Charles Gairdner Hospital and Perth Children's Hospital. Where appropriate, clinical experience is gained under the direction and guidance of University or Hospital staff.

### **ORAL MICROBIOLOGY**

As much oral disease is attributable to a microbial cause, an understanding of the micro-organisms of the mouth is of great importance in Oral Medicine. In this module, students study the clinical aspects of applied microbiology as it pertains to the microflora of the oral cavity. Current knowledge of the behaviour and interactions of bacteria, fungi and viruses in health and disease is presented together with comprehensive analysis of investigative, diagnostic, and therapeutic regimes.

If a student is found to be lacking in basic microbiology knowledge, then that student may be required to undertake a course in Microbiology where they attend selected lectures and practical classes.

### **PHARMACOLOGY and THERAPEUTICS**

Pharmacology and Therapeutics play an increasingly important role in the fields of Oral Medicine. Students must have a complete knowledge and understanding of the medications and drugs which they will use on patients. In addition, they must be aware of interactions and side effects of medications being used by patients. This module is studied from the perspectives of both a comprehensive knowledge and understanding of medications and therapeutic agents used in Oral Medicine as well as a knowledge of medications utilised in other fields of medicine and their impact on the practice of Oral Medicine.

If a student is found to be lacking in basic Pharmacology knowledge, then that student may be required to undertake a course in Pharmacology where they attend selected lectures and practical classes.

**Assessment:** Assignments will be set and assessed on topics of relevance to Oral Medicine for each of the above modules.

## **CLINICAL ORAL MEDICINE**

During the 2<sup>nd</sup> Year of the course, attendance at routine teaching clinics continues subject to the timetabling demands of attendance at other hospitals. Having now had at least one calendar year of clinical experience in Oral Medicine Clinics, the student is expected to participate fully in the diagnostic decision-making process and to undertake management of a group of patients. Emphasis is placed on co-operation with practitioners in other disciplines - both medical and dental. Such co-operation will include attendance at other departments and hospitals for case presentation and case management discussions with other specialists. In particular this will involve attendance at specialist clinics.

Didactic teaching is in small groups with students preparing literature reviews and assignments/essays on selected topics. Discussion of problems common to other dental disciplines will involve study with postgraduate students in those fields.

## **ORAL PATHOLOGY**

The student will be given detailed instruction in diagnostic Oral Pathology and the interpretation of biopsy reports. Much of this is centred on the routine material received for Oral Pathology reporting including biopsies performed in the Oral Medicine Clinic and presented at weekly seminars. A virtual collection of cases will further supplement the range of diagnostic cases presented.

**Assessment:** Attendance at and performance in theory tutorials, written assignments, and theory and practical examination.

## **PATHOLOGY AND IMMUNOPATHOLOGY**

These subjects involve more advanced study into the concepts and principles underlying the current understanding of disease processes and their investigation.

In the 1<sup>st</sup> Semester, pathology and histopathology are covered together with practical experience in the preparation of specimens and samples for diagnostic reporting. The routine aspects of specimen preparation as used in Oral Pathology are covered as well as details of those modalities that are not utilised regularly in Oral Pathology but where knowledge is required for a practitioner in the field. Pathology is studied at the level of the whole organism as well as at the cellular, subcellular and molecular levels.

In the 2<sup>nd</sup> Semester, immunopathology is the focus and a comprehensive and detailed grounding in the current concepts in immunology, immunopathology, immunogenetics and the investigation of immunological disease will be provided. This field of study has direct implications not only in the application of such principles to oral disease processes, but also in the understanding of new treatment modalities aimed at specific cellular, molecular or genetic anomalies.

### **Formative assessment:**

Participation in seminars and presentations from other students and staff and presentations of assignments (medical and Oral Medicine; case presentations and journal clubs).

Additional formative methods to monitor the progression of the students during the semester are DOPS, CbD and Mini-CEX forms. These are used in a clinical setting and can contribute to assess the student and provide documented and immediate feedback on both clinical and theoretical aspects.

**Summative assessment:**

**DENT6815 Oral Medicine Theory II Part 1**

#	Assessment	Indicative weighting	Failed component
1	Written assessment	60%	Formative
2	Critical appraisal of a journal article	15%	Formative
3	Oral presentation	25%	Formative
4	Professional behaviour assessment (failed component)	0%	Failed component

**DENT6816 Oral Medicine Theory II Part 2**

#	Assessment	Indicative weighting	Failed component
1	Written assessment	60%	Failed component
2	Critical appraisal of a journal article	15%	Failed component
3	Reflective report of externships	25%	Failed component
4	Professional behaviour assessment (failed component)	0%	Failed component

**DENT6821 Oral Medicine Clinical Practice II Part 1**

	Assessment	Indicative weighting	Failed component
1	Objective structured clinical examination	50%	Formative
2	Log book	10%	Formative
3	Case based discussion (unseen case) and viva voce	40%	Formative
4	Professional behaviour assessment (failed component)	0%	Failed component

**DENT6822 Oral Medicine Clinical Practice II Part 2**

	Assessment	Indicative weighting	Failed component
1	Objective structured clinical examination	50%	Failed component
2	Log book	10%	Failed component
3	Case based discussion (unseen case) and viva voce	40%	Failed component
4	Professional behaviour assessment (failed component)	0%	Failed component

### 3<sup>rd</sup> Year Units

- **Oral Medicine Theory III (Parts 1 and 2) (DENT6817/6818)**
- **Oral Medicine Clinical Practice III (Parts 1 and 2) (DENT6823/6824)**

#### CLINICAL ORAL MEDICINE

This continues from second year studies and clinical teaching follows a similar pattern with the student expected to assume more clinical responsibility for the diagnosis, treatment planning and management of patients. Small group teaching will continue and will be supplemented by topics from other disciplines including radiology and clinical immunology.

#### ORAL PATHOLOGY

In the final year, students will continue their instruction in Oral Pathology and the interpretation of reports and, where relevant the use of immunohistochemistry and other contemporary techniques will be emphasised.

#### **Formative assessment:**

Participation in seminars and presentations from other students and staff and presentations of assignments (medical and Oral Medicine; case presentations and journal clubs). Additional formative methods to monitor the progression of the students during the semester are DOPS, CbD and Mini-CEX forms. These are used in a clinical setting and can contribute to assess the student and provide documented and immediate feedback on both clinical and theoretical aspects.

#### **Summative assessment:**

#### **DENT6817 Oral Medicine Theory III Part 1**

#	Assessment	Indicative weighting	Failed component
1	Written assessment	70%	Formative
2	Case presentations and reports	30%	Formative
3	Professional behaviour assessment (failed component)	0%	Failed component

#### **DENT6818 Oral Medicine Theory III Part 2**

#	Assessment	Indicative weighting	Failed component
1	Written assessment	70%	Failed component
2	Case presentations and reports	30%	Failed component
3	Professional behaviour assessment (failed component)	0%	Failed component

#### **DENT6823 Oral Medicine Clinical Practice III Part 1**

	Assessment	Indicative weighting	Failed component
1	Objective structured clinical examination	50%	Formative
2	Log book	10%	Formative
3	Viva voce	40%	Formative

4	Professional behaviour assessment (failed component)	0%	Failed component
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### DENT6824 Oral Medicine Clinical Practice III Part 2

	Assessment	Indicative weighting	Failed component
1	Objective structured clinical examination	50%	Failed component
2	Log book	10%	Failed component
3	Viva voce	40%	Failed component
4	Professional behaviour assessment (failed component)	0%	Failed component

### ORAL MEDICINE RESEARCH DISSERTATION (DENT6852)

**Content:** This Dissertation unit extends over the three-year duration of the Doctor of Clinical Dentistry course. The Research and Dissertation foster the development of research skills in the area of Oral Medicine while under supervision. It provides students with experience and practice in defining a clear research question, preparing a formal research proposal, conducting a review of a body of scientific literature and formal writing at a professional level.

**Assessment:** Each student undertakes a research project and writes a Dissertation in a research area of their choice that is relevant to Oral Medicine and that has been approved by their supervisor(s) and the Program Convenor.

- The Dissertation should identify the area of research, identify the aim(s) of the research project, broadly sketch the context within which the research is located, review the relevant literature, identify how the research was performed and how the data were collected and analysed, and discuss the results in the context of clinical practice, further research, and the literature in general.
- The Dissertation will be assessed by two external examiners. One of the Examiners will be one of the Program Convenor of the Doctor of Clinical Dentistry program, while the other Examiner will be a person with more specific experience in the field of research in which the project was done.
- This unit is a graded unit, - that is, a specific mark will be awarded due to the variable nature of each student's research project. Supplementary assessment is not available in this unit.
- **Staff:** The research project will be coordinated and supervised by academic, clinical, and/or laboratory research staff appropriate for the specific area of interest. The project will be under the overall supervision of A/Prof Omar Kujan.
- **Notes:** Candidates will be members of the UWA Dental School Oral Medicine & Pathology Research Group. A subject directly or indirectly related to Oral Medicine will be undertaken and a degree of originality will be expected. The student should expect to begin planning the project in the 1<sup>st</sup> Year of the Doctor of Clinical Dentistry course – some of this should be done during the Dental Research Methodology unit (see above) and the remainder during Semester Two of 1<sup>st</sup> Year. The literature review should be done during the 2<sup>nd</sup> Year of the course (preferably submitted as a “first draft” by the end of Semester One). The experimental work should be completed by the end of the 2<sup>nd</sup> Year of the course. The results can be analysed, and statistical advice should be sought, early in the 3<sup>rd</sup> Year of the course so the Dissertation can be written



by the middle of that year. Students should allow sufficient time for the supervisor(s) to read up to several drafts of each part of the Dissertation and to make the corrections/changes recommended by the supervisor(s). This process can take several months overall. Ideally, students should aim to have the Dissertation submitted for final examination sometime during Semester Two of the 3<sup>rd</sup> Year of the course, and by the end of that year at the very latest.

- Research work requires a great deal of planning, organisation, and dedication. At times, it can be frustrating to do research as experiments do not always proceed as planned or there may be difficulties recruiting subjects, etc. Students must give sufficient priority to their research work throughout the entire Doctor of Clinical Dentistry course in order to ensure they complete all course requirements on time. Any student who is having difficulty with any aspects of the research should seek advice from the supervisor(s) as soon as any problem arises.
- The research project will be written up as a Dissertation for assessment by two External Examiners. The general format for the Dissertation will be:
  - A detailed Literature Review and an outline of the Aims of the project.
  - One or more manuscript(s) describing the experimental processes, the results, and a discussion of the results. These manuscripts are to be written in a format suitable for submission to appropriate dental or medical journals for consideration for publication in order to report the research work to the profession.
- Some students may prefer to write their Dissertation in the more traditional “thesis style” but the above format is preferred as it leads to a more efficient process with submission of manuscripts to journals for consideration for publication. This format is preferred as the School expects all postgraduate students to publish their research work. Students should discuss the format of their Dissertation with their Supervisor(s) at an early stage of the writing process, so they are aware of what is expected of them. Students should consider that research work of any kind is not complete until it has been published for the entire profession to read and benefit from it.
- Once the Dissertation has been accepted by the Examiners, it will be printed, bound, and submitted in the form described in the University’s General Regulations. The University Postgraduate Studies Handbook contains more information about the submission of Dissertation.
- It is expected that students will submit the manuscript(s) to one or more appropriate dental journal(s) for publication. Typically, two or three manuscripts would be expected although this will depend on the nature of the project being undertaken. Students should discuss this with the Course Co-ordinators and other research supervisors, as applicable.

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