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**TBILISI HUMANITARIAN TEACHING UNIVERSITY**

***Syllabus***

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| ***Name of the Educational Course*** | Surgical Dentistry -Children and adults surgical dentistry (integrated course) |
| ***Code of the Educational Course*** | STOM0416DM |
| ***Status of the Educational Course*** | **C**ompulsory coursefor the one-cycle higher educational Programme-Dentistry |
| ***ECTS*** | **4 credits. Total: 100 hours**Contact Hours–60 hours (Class Meeting Time Period: 1L/55 Pr) + 4 hours (Midterm:2h and Final Examinations 2h):Individual Work-40 hours |
| ***Lecturer***  | Lika Elisbarashvili, THTU invited lecturer, 593510005 |
| ***Goal of educational course*** | **The Goal of course is** to enable students to integrate the knowledge acquired in the subjects of Oral Surgery in Adults and Oral Surgery in Children and Adolescents and based on data of subjective and objective examination of a patient at clinic to make diagnosis independently, precisely apply methods of examination and develop correct method of treatment accordingly. The course will enable students to select appropriate anesthetic agents, select forceps and extract relevant secondary as well as primary tooth, debride a wound (under supervision of a Professor).  |
| ***Preconditions for Admission*** | All courses from Surgical module |
| ***System of students’ assessment*** | **Evaluation system of TBILISI HUMANITARIAN TEACHING UNIVERSITY is divided on following components:**Out of total evaluation score (100 points) mid-term evaluation amounts 60 points in total, divided in a following way: **Student activity during the educational term -**30 points;**Mid-term exam-** 30 points;And **final exam -** 40 points.Minimum competence limit in regard of a mid-term evaluations amounts at least **18 points**  in total. Minimum competence limit of the final evaluation is **50%** of the total amount of final evaluation, in other words **20 out of 40 points**. **Evaluation system includes:**a) **Five types of positive evaluation:**a.a) **(A) excellent** –91-100 points of evaluation;a.b) (**B) very good** –81-90 points of highest evaluation; a.c) (**C) good –**71-80 points of highest evaluationa.d) **(D) satisfactory** –61-70 points of highest evaluation;a.e) **(E) sufficient** –51-60 points of highest evaluation**b) Two types of negative evaluation:****b.a) (FX) unable to pass** – 41-50 points of highest evaluation, this means that a student should work more in order to pass the exam and he/she is granted a right to take the exam once more based on independent study;**b.b) (F) fail** – 40 or less points of highest evaluation. This means that the work performed by the student is insufficient and he/she has to study the subject again. 1. In case of receipt one of the negative evaluations: (FX) unable to pass, teaching university holds an additional exam no later than 5 days after declaring the results of the final exam and it is reflected in the exam schedule.
2. Evaluation obtained by the student at the additional exam is the final evaluation of the student and negative score obtained during the basic final exam is not considered in it.
3. If the student obtains from 0-50 taking into account the additional exam.
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| ***Content of the Educational Course*** | See Annex 1 |
| ***Assessment forms/methods/criteria/activities*** | **Activity - 30 points** It is to be assessed by the current **oral interview** 8 times during semester, the maximum score is 2 points, (**16 points in total**).Assessment criteria:2 points: The Student demonstrates comprehensive, convincing and detailed knowledge of the material, freely uses the specific terminology, actively fulfills the assigned tasks; uses the information from the learned material, and is interactive.1.5 points: The Student demonstrates significant knowledge of the material, knows the specific terminology, fulfills the assigned tasks; uses the information from the learned material, and is interactive.1 point: The Student’s knowledge of the material is not sufficient, demonstrates only schematic knowledge, does not know the specific terminology sufficiently, has difficulties in fulfillment of tasks.0 points: The student is passive, has not reviewed the material.**The case study is conducted 5 times in the semester - Maximum assessment - 1 points (Total 5 points)**1 points - The student analyzes the principles of treatment and has ability to fulfill practical skills well.0.5 points – The student analyzes the principles of treatment and has not ability to fulfill practical skills well.0 points - The student can't analyze the principles of treatment and has not ability to fulfill practical skills. **The practical training is conducted 5 times in the semester - Maximum assessment - 1 points (Total 5 points)**1 points - The student analyzes the principles of treatment and has ability to fulfill practical skills well.0.5 points – The student analyzes the principles of treatment and has not ability to fulfill practical skills well.0 points - The student can't analyze the principles of treatment and has not ability to fulfill practical skills.D) Writing quiz- will be held on fifth week and will be assessed by four point (2 open question-will be assessed by 2 points)2 point- A answer is complete. The student hasprofoundly acquired the past material and has deep and profound knowledge of basic as well assupplementary literature. No mistakes are made.1.5 point- the answeris complete. No essential mistakes are made. Thestudent has good knowledge of past material envisaged under the program. He/she has acquiredbasic literature. Reasoning is made well.1point- The answer is incomplete. Material relevant to the issue is provided partially. Studenthas insufficiently acquired basic literature. Several essential mistakes are made.0 point- The answer is irrelevant to the issue or is not presented at all.**Intermediate Exam assessment- in combined form, maximum 30 points**A) Writing (Test) - **20** points. The tests consists of 20 multiple choice questions reflecting the previous material and each correct answer in the test is assessed by 1 point, the incorrect answer - 0 point.B) Open questions -2. With 5 points will evaluate each open question. Totally 10 points.Criteria of evaluation of theoretical issue at midterm exam are the following:5 points – Answer is complete. It is presented in precise and exhaustive manner. The student hasprofoundly acquired the past material and has deep and profound knowledge of basic as well assupplementary literature. No mistakes are made. Student provides top-level reasoning.4 points – the answer is complete, however compressed. No essential mistakes are made. Thestudent has good knowledge of past material envisaged under the program. He/she has acquiredbasic literature. Reasoning is made well.3 points- Answer is incomplete. The student has acquired material envisaged under the programhowever shortcomings are evident. Reasoning is fragmented.2 points – The answer is incomplete. Material relevant to the issue is provided partially. Studenthas insufficiently acquired basic literature. Several essential mistakes are made.1 point- The answer is deficient. The answer is essentially wrong. Only certain fragments ofmaterial relevant to the issue are presented.0 point – The answer is irrelevant to the issue or is not presented at all.**Final exam:** 40 points A) Writing (Test) - **30** points. The tests consists of 20 multiple choice questions reflecting the previous material and each correct answer in the test is assessed by 1 point, the incorrect answer - 0 point.B) Open questions -2. With 5 points will evaluate each open question. Totally 10 points.Criteria of evaluation of theoretical issue at midterm exam are the following:5 points – Answer is complete. It is presented in precise and exhaustive manner. The student has profoundly acquired the past material and has deep and profound knowledge of basic as well as supplementary literature. No mistakes are made. Student provides top-level reasoning.4 points – the answer is complete, however compressed. No essential mistakes are made. The student has good knowledge of past material envisaged under the program. He/she has acquired basic literature. Reasoning is made well.3 points- Answer is incomplete. The student has acquired material envisaged under the program however shortcomings are evident. Reasoning is fragmented.2 points – The answer is incomplete. Material relevant to the issue is provided partially. Studenthas insufficiently acquired basic literature. Several essential mistakes are made.1 point- The answer is deficient. The answer is essentially wrong. Only certain fragments of material relevant to the issue are presented.0 point – The answer is irrelevant to the issue or is not presented at all. |
| ***Mandatory Literature*** | 1.    J.A. Baart H.S. Brand Local Anaesthesia in Dentistry. 2009 2.    Soxman Handbook of Clinical Techniques in Pediatric Dentistry. 20153.    U J Moore-Principles of oral and maxillofacial surgery 20114.    M h KalantarMotamedi-A textbook of advanced oral and maxillofacial surgery  2013 |
| ***Additional Literature*** | 1.    Peterson’s-Principles of oral and  maxillofagial surgery second edition 2004y2.     Fragiskos D. Fragiskos.Oral Surgery. 2007.  |
| ***Learning Outcomes.******Field Competences*** | **Knowledge**1. Students describes the anticipated complications in the course of extraction itself as well as the reafter and avoid anticipated complications.
2. Student defines the mechanisms of effect of anesthetic agents applied in children and adults.
3. Student groups and divides the indications and counter indications for teeth extraction in case of odontogenic inflammatory diseases; Indications for teeth extraction in case of traumas of teeth and jaws; Indications for teeth extraction in case of pathological occlusion, orthodontic targeted extraction.a student will have developed the skill of clinical judgment.
4. Student describes the mechanism of injection borders on upper and lower jaws; Teeth extraction, extraction of primary and secondary teeth, indication for extraction, mechanisms of effect of anesthetic agents used in children and adolescents.
5. Student identifies ways to prevent complications of local anesthetization and prevents complications relate to teeth extraction;

**Skills**1. Student makes diagnosis, differential diagnosis of the disease independently based on clinical data by apply professional, ethical and legal norms of medical field
2. Student arranges and organizes comfortably place a patient in a dental chair and find most optimal position to approach oral cavity.
3. Student demonstrates methods of anesthetization;
4. Students provides regional anesthetization of upper and lower jaw with selecting appropriate anesthetic agent,
5. Student selects forceps for extraction of teeth of upper and lower jaws;
6. Student examines oral cavity, teeth and oral mucosa, tongue and cheeks.
7. Student manipulates to block nerve branches of upper jaw; block nerve branches of lower jaw; Extract teeth and roots; Select forceps and use them correctly.
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| ***Learning methods and forms*** | Practical workWorking in groupCase study Demonstration methods |

***Annex 1***

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| ***day*** | ***Learning Method*** | ***Amount of Hours*** | ***Topic of lecture/acting in a working group/practical or laboratory work***  | ***Literature*** |
| ***I day*** | ***Seminar***  | *1 hr.* | *Syllabus presentation*  |  |
| ***Practical Work*** |  *3 hr* | **Anesthetic techniques in adult oral surgery,** Infiltration anesthesia , indications, techniques of conduct: demonstrating extraction according to indication (demonstration of anesthetization and extraction with the help of Professor)1. J.A. Baart H.S. BrandLocalAnaesthesia in Dentistry. 2009**pp.43-55, 57-67, 71-73**Fragiskos D. Fragiskos.Oral Surgery.2007.**pp. 73-76, 77-80**
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| ***II***  | ***Practical Work*** | *4hr* | **Anesthetic techniques  in adult oral surgery; maxillary nerve block techniques  high tuberosity anesthesia,**Infraorbital nerve block anesthesia1. J.A. Baart H.S. BrandLocalAnaesthesia in Dentistry.**2009 pp. 89**Fragiskos D. Fragiskos.Oral Surgery.2007.**pp. 73-76, 77-80** |  |
| ***III*** | ***Practical Work*** | *4hr* | **Anesthetic techniques  in adult oral surgery; mandibular  nerve block techniques , gow gates anesthesia,** Mental nerve block,1. J.A. Baart H.S. BrandLocal Anaesthesia in Dentistry. 2009**pp.76-86**Fragiskos D. Fragiskos.Oral Surgery.2007.**pp. 80-83*,* pp.92**
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| ***IV*** | ***Practical Work*** | *4hr* | Extraction of roots with forceps, extraction of teeth and roots with elevator, extraction of deep root, tooth fracture, fracture or avulsion  of adjacent  tooth, alveolar ridge fracture, mandibular dislocation, damage to soft tissues of oral cavity, aspiration of tooth or its root, opening the  maxillary sinus, bleeding, paresthesia, alveolitis.1. Fragiskos D. Fragiskos.Oral Surgery.2007.**pp. 84-92, 181-199**
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| ***V*** | ***Practical Work*** | *3 hr**1* | **Principles of techniques of conduction anesthesia  in children**1. Fragiskos D. Fragiskos.Oral Surgery.2007.**pp.106-108**Jane A. Soxman Handbook of Clinical Techniques in Pediatric Dentistry. 2015.**pp. 5-7*Quiz***
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| ***VI***  | ***Practical Work*** | *4 hr* | *Complication of anesthesia* 1.Soxman Handbook of Clinical Techniques in Pediatric Dentistry. 2015.**pp. 94-106** |  |
| ***VII***  | ***Practical Work*** | *4hr* | *Complication of extraction* Soxman Handbook of Clinical Techniques in Pediatric Dentistry. 2015.**pp. 107-114** |  |
| ***­*** |  |  | ***Mid-term exam*** |  |
| ***IX*** | ***Practical Work*** | *4hr* | *Postoperative care of surgical patients* Soxman Handbook of Clinical Techniques in Pediatric Dentistry. 2015.**pp. 243-247** |  |
| ***X*** | ***Practical Work*** | *4hr* | **Odontogenic inflamatory dissease , Odontogenic osteomyelitis** 1.Peterson’s -Principles of oral and maxillofagial surgery second edition 2004y **pp. 313-326** |  |
| ***XI*** | ***Practical Work*** | *4hr* | **Periodontitis, periostitis, osteomeylitis** *1.* Peterson’s -Principles of oral and maxillofagial surgery second edition 2004y**pp. 315-335** |  |
| ***XII*** | ***Practical Work*** | *4hr* | **Odontogenic abscesses and phlegmons of mandibulofacial area**U J Moore-Principles of oral and maxillofacial surgery 2011 **pp. 201-224** |  |
| ***XIII*** | ***Practical Work*** | *4hr* | **Odontogenic lymphadenitis, Odontogenic inflammation of maxillarysinus.**1. Peterson’s -Principles of oral and maxillofagial surgery second edition 2004y**pp.295-312**
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| ***XIV*** | ***Practical Work*** | *4hr* | **Non-odontogenic inflammatory processes of face,Specific inflamtory diseases** 1.M h KalantarMotamedi-A textbook of advanced oral and maxillofacial surgery 2013y. **pp. 67-126**2. M h KalantarMotamedi-A textbook of advanced oral and maxillofacial surgery 2013y. **pp. 135-147** |  |
| ***XV*** | ***Practical Work*** | *4hr* | *Summery*  |  |
| ***XVI-XVII*** | ***2*** |  | *Final Exam* |  |
|  |  |  | *Additional exam* |  |