

# RCDC



THE ROYAL COLLEGE OF DENTISTS  
OF CANADA

## FELLOWSHIP EXAMINATION CANDIDATE STUDY GUIDE ORAL AND MAXILLOFACIAL SURGERY

### Introduction

The intent of this guide is to provide the candidate with an understanding of the format used for the Fellowship Examination in Oral and Maxillofacial Surgery.

The example questions are intended for candidates in Oral and Maxillofacial Surgery and are meant to demonstrate the various styles of questions that may appear in the exam. The content is meant for illustrative purposes only and **should not be construed as an example of the difficulty level of the examination.**

### Fellowship Examination Format

The Fellowship Examination is a test of clinical decision making. Specifically, the ability to assess, treat, and understand probable outcomes. The cases used in the Fellowship Examination tend to be “typical” cases that a practicing Oral and Maxillofacial Surgeon (post-licensure) would treat in clinical practice. These questions are case based. A typical clinical case protocol contains a hypothetical patient situation (a clinical vignette) developed from actual cases and may include a patient history, radiographs and/or clinical photographs. The candidate is then questioned on how he/she will manage the patient, emphasis is placed on patient care decisions, as if the candidate was caring for the patient.

As part of their preparation, it is also highly recommended that candidates gain as much experience as possible working through case-based oral examination questions. While preparing for the oral examination it is also helpful to have other colleagues and/or mentors present the candidate with clinical cases using the aforementioned format. It is better still if the candidate is provided cases that they have never seen before or are unfamiliar with.

Here is a general description of an oral case protocol; this is followed by a number of sample questions. Once again it should be stressed that the content used in these sample questions are used for illustrative purposes only and should not be construed as an example of the level of difficulty or content of the examination questions.

## Clinical Case Protocol

A typical case would start with a clinical vignette that could include some or all of these elements:

- Age and gender of the patient
- Chief complaint
- History of the chief complaint
- Health history
- Dental history
- Other information as needed
- Initial radiographs and/or photographs

Once the clinical vignette has been presented, the candidate is then questioned on how he/she will manage this clinical case. Additional clinical information, radiographs, and/or photographs will be made available upon request or they may be provided automatically to the candidate. An example of the sequencing of questions follows.

### 1) Case Assessment, Data Gathering, Etiology and Diagnosis

In this section, some of the decision-making skills that may be assessed include:

- Offer a final diagnosis*
- Systematically identify the existing problems*
- Use appropriate additional diagnostic modalities to aid in the diagnosis*
- Demonstrate a questioning strategy to investigate the chief complaint*
- Identify the etiology of the clinical problem*
- Develop a differential diagnosis if appropriate, and be able to discuss each of these legitimate possibilities based on the information provided*

Possible questions that may be asked include:

- Describe what you see?*
- How would you investigate your patient's chief complaint?*
- How would you manage the chief complaint?*
- What other information/test/image would you want to obtain for this patient?*
- How would you proceed?*
- What is your differential diagnosis?*
- What is your probable diagnosis?*

*How would you manage the chief complaint?*

## **2) Treatment Plan, Therapy and Prognosis**

In this section, some of the decision-making skills that may be assessed include:

*Develop a treatment plan or management strategy for this clinical case*

*Discuss the advantages and disadvantages of the proposed treatment plan*

*Discuss the prognosis for the proposed treatment*

*Discuss the management of the case if key clinical information was modified such as a different chief complaint or medical history*

Possible questions that may be asked include:

*You now see these radiographs/photographs/clinical tests, how would you proceed?*

*What would be your treatment plan for this patient?*

*What would be the short and long-term prognosis?*

*How would you explain the treatment plan to the patient?*

*Describe the therapy most beneficial to the patient; indicate why you feel this is the best therapy?*

*The patient questions you about prognosis, how would you respond?*

*Once you have completed the first phase of treatment, what would you do next?*

*The patient presents with a different medical history, for example asthma, how would you modify the treatment plan?*

*If the patient becomes uncooperative with your treatment, what would you do next?*

## **3) Therapeutic Results, Complications and Maintenance**

In this section, some of the decision-making skills that may be assessed include:

*Management of the case following the completion of initial treatment*

*Development of a plan to assess the outcomes of treatment*

*Prevention of future complications and reoccurrence of disease*

*Identify and treat possible future complications*

*Discuss the long-term plan for this patient*

*Discuss alternative treatments when the patient demonstrates poor compliance*

Possible questions that may be asked include:

*What would be your criteria for successful treatment of this patient?*

*How would you follow this patient long-term?*

*Would you see this patient again? when? and how often?*

*Now that treatment is completed, would you have any concerns?*

*Is additional treatment indicated in the future?*

*What are the possible complications for this patient?*

*How would you treat this complication?*

*If the patient did not respond to treatment, what would be your next step?*

*What maintenance procedures would you provide for this patient?*

## Sample Questions

### CASE #1

You are to proceed with \_\_\_\_\_ (procedure) on one of your patients who is a 64-year-old male. During your review of his medical history you note that he is taking the following medications:

Drug A: \_\_\_\_\_ Drug B: \_\_\_\_\_

Drug C: \_\_\_\_\_ Drug D: \_\_\_\_\_

1. What medical disease or diseases does your patient suffer from?
2. Before proceeding with the treatment plan is there anything else you want to know about the patient's condition?

If the candidate does not ask, Examiner says: "Your patient provides you with the following information regarding signs and symptoms": (examples: cough, pain, etc.)

3. Are there any other findings you need? (Probe with this question if the candidate says no other findings needed). Are there any clinical tests, images, laboratory values or consultations you require in helping to characterize his disease further?

Tests, images and laboratory results are as follows: x-ray, blood test, ekg., etc.

4. How would you characterize the severity of your patient's disease?
5. What complications might this patient experience in the peri-operative period? How would you prepare for them?
6. What about any potential complications during treatment? How would you prepare for them?
7. On the basis of his disease and its severity, what arrangements would you make in order to avoid complications in the peri-operative period?

You have elected to proceed with the procedure (pick one) as:

inpatient      or      outpatient      or      in office (local)      or      in office (sedation)

You have given the following medications:

Five minutes into the procedure your patient develops the following signs and symptoms (examples): loss of consciousness, shortness of breath, chest pain, hypotension, etc.

8. What would you do now?

9. If the candidate does not ask for additional information, then ask – “What findings would you be looking for?”

Findings are as follows: monitor, ekg. etc.

10. What is your presumptive diagnosis (nature and severity) of this complication?

## CASE #2

A 33-year-old healthy female presents to your clinic with a chief complaint of not liking the appearance of her smile.

Clinical images presented

1. What is the patient’s problem? If the candidate asks for additional images provide these:

Additional clinical images

Radiographic images

2. What is your presumptive diagnosis?

3. What do you tell her regarding what you can do to address her chief complaint? Would you offer more than one treatment option, if so what and why?

4. Upon reflection of a full thickness flap you observe the following features of the underlying bone (clinical image provided).

5. Describe what you see and whether you would modify your treatment plan?

6. During the surgical procedure you experience difficulties with .....? How would you address this complication?

7. Three days post-surgery your patient phones your office complaining of ..... What do you tell this patient? What would you do about this problem?

8. You see your patient at one week for your first scheduled post-operative checkup. What instructions do you provide to the patient? What do you tell her about the time to achieve surgical healing, before she can be referred to her dentist for restorative treatment?