APPENDIX B.1 – Competency and Proficiency Statements

Competency and Proficiency Statements
Advanced Education in General Dentistry Program
UNC School of Dentistry

The following statements are intended to describe the desirable training outcomes for residents enrolled in the Advanced Education in General Dentistry program at the UNC School of Dentistry. As such, they communicate the expectations of the faculty to the resident and therefore serve as the basis for evaluation of the resident’s progress toward satisfactory completion of the training program. Each statement describes a training objective with the training outcome designated as either an area of competency (C) or as an area of proficiency (P). With respect to the assessment of the resident’s progress toward achievement of training objectives, the following definitions apply:

**Competency:** Behavior expected of the beginning practitioner. This behavior incorporates understanding, skill and values in an integrated response to the full range of requirements presenting in practice. The level of performance requires some degree of speed and accuracy consistent with patient well-being but not performance at the highest level possible. Further, it requires an awareness of what constitutes acceptable performance under the circumstances, an awareness of when the circumstance is outside the practitioner’s current range of knowledge and experience and a desire for self-improvement.

**Proficiency:** A level of practice that exceeds competency. Proficiency entails slightly greater speed and accuracy of performance, the ability to handle more complicated and unusual problems, the ability to handle problems presenting under less than ideal circumstances, and greater internalization and integration of professional standards.

It is important to reiterate that these statements delineate the desirable and expected training outcomes upon completion of the training program. Should the final evaluation of the resident’s performance fall short of these expectations, the program director, in consultation with the faculty, will make a determination regarding satisfactory completion of the training program. The resident will not be awarded a certificate of residency training when the final performance evaluation is below the level of competency (C) on any training objective when the resident has had ample opportunity to develop such competency.

**Desirable Training Outcomes**

1. **Planning and providing comprehensive, multidisciplinary oral health care:**
   1. Function as the patient’s primary and comprehensive oral health care provider. (P)
   2. Obtain and interpret the patient’s chief complaint; medical, dental and social history; and review of systems. (P)
   3. Select and use assessment techniques to arrive at a differential, provisional and definitive diagnosis for patients with complex needs. (C)
   4. Explain and discuss with patients, or parents or guardians of patients, findings, diagnoses, treatment options, realistic treatment expectations, patient responsibilities, time requirements, treatment sequence, estimated fees and payment responsibilities in order to establish a rapport with patients that will serve as an avenue for effective communication in which the patient will become an informed participant in the planning of care. (C)
   5. Use available diagnostic and prognostic information to integrate multiple disciplines into an individualized, comprehensive and sequenced treatment plan for patients with complex needs. (C)
   6. Modify the treatment plan, as indicated, to effectively manage unexpected circumstances or individual patient needs. (C)
   7. Perform dental consultations for patients. (P)
8. Request medical consultations for patients. (P)

II. Health care delivery:
1. Treat patients efficiently in a dental practice setting. (C)
2. Understand the importance of scheduling systems and insurance and financial arrangements to maximize production in a dental practice (C)
3. Implement and use accepted sterilization, disinfection, universal precautions and occupational hazard prevention procedures in the practice of dentistry. (P)
4. Provide patient care by working effectively with allied dental personnel, which includes performing sit-down four-handed dentistry. (C)
5. Employ and promote ethical principles in the practice of dentistry and in relationships with patients, personnel and colleagues. (P)

III. Information management and analysis:
1. Develop a rational approach to evaluating the scientific literature and other sources of information to determine the utility of new concepts, materials and procedures. (C)
2. Utilize electronic media systems to access and retrieve information related to dentistry and patient care. (C)
3. Maintain a patient record system that accurately and concisely documents the patient’s diagnostic database, the plan of care and the course of treatments in a format that facilitates the retrieval and analysis of the process and outcomes of patient treatment. (P)
4. Analyze the outcomes of patient care to assess the degree of success, patient satisfaction and/or the need for further treatments. (C)
5. Understand, and participate in, a system for continuous self-evaluation and quality improvement in a dental practice. (C)

IV. Oral disease detection and diagnosis:
1. Expose periapical and bitewing radiographs of diagnostic quality. (C)
2. Obtain and interpret clinical and radiographic data and additional diagnostic information from other health care providers or other diagnostic resources. (C)
3. Refer to other health care professionals to utilize the services of clinical, medical or pathology laboratories. (C)
4. Perform limited history and physical evaluation and collect other data in order to establish a risk assessment for dental treatment and use that risk assessment in the development of a dental treatment plan. (P)
5. Recognize and manage oral manifestations of systemic disease. (C)
6. Recognize and manage soft tissue lesions and/or common oral pathological abnormalities. (C)
7. Diagnose and manage a patient’s occlusion. (C)
V. Promoting oral and systemic health and disease prevention:
   1. Participate in community programs to assist in the prevention and reduction of oral disease. (C)
   2. Use accepted prevention strategies such as oral hygiene instruction, nutritional education and pharmacologic intervention to assist patients in the improvement and maintenance of their oral and systemic health. (P)

VI. Assessment of medical risk:
   1. Develop and carry out dental treatment plans for patients with special needs in a manner that considers and integrates the patient’s medical, psychological and social needs. (C)

VII. Pain and anxiety control and sedation:
   1. Provide control of pain and anxiety in the conscious patient through the use of psychological interventions, behavior management techniques, local anesthesia, oral and/or nitrous oxide conscious sedation techniques. (C)
   2. Prevent, recognize and manage complications related to the use and interactions of drugs, local anesthesia and conscious sedation. (C)

VIII. Restoration of teeth:
   1. Restore single teeth in the permanent dentition with a wide range of materials and methods. (P)
   2. Place restorations and perform procedures to enhance the patient’s facial esthetics. (C)
   3. Restore endodontically treated teeth. (C)

IX. Replacement of teeth using fixed and removable appliances:
   1. Replace missing teeth for patients utilizing removable prostheses. (C)
   2. Replace missing teeth for patients utilizing uncomplicated (6 units or less) fixed prostheses. (C)
   3. Communicate prosthesis design to laboratory technicians in a professional and effective manner and evaluate the resultant prosthesis. (C)
   4. Serving the role of restorative dentist, participate with a surgeon in a team approach to the treatment planning process prior to endosseous implant insertion. (C)
   5. Restore uncomplicated endosseous implants. (C)

X. Periodontal therapy:
   1. Diagnose and treat early and moderate periodontal disease using non-surgical procedures. (P)
   2. Diagnose and treat early and moderate periodontal disease using surgical procedures. (C)
   3. Manage advanced periodontal disease. (C)
   4. Evaluate the results of periodontal treatment then establish and monitor a periodontal maintenance program. (P)

XI. Pulpal therapy:
   1. Diagnose and treat pain of pulpal origin. (P)
   2. Perform uncomplicated non-surgical anterior and premolar endodontic therapy. (C)
   3. Manage uncomplicated non-surgical molar endodontic therapy. (C)
4. Treat or manage endodontic complications. (C)

XII. **Hard and soft tissue surgery:**
   1. Perform surgical and nonsurgical extraction of teeth. (C)
   2. Perform uncomplicated pre-prosthetic surgery. (C)
   3. Manage extraction of impacted third molars. (C)
   4. Manage surgical treatment of oral lesions, including biopsy. (C)
   5. Treat or manage patients with complications related to intra-oral surgical procedures. (C)

XIII. **Treatment of dental and medical emergencies:**
   1. Treat patients with intra-oral dental emergencies and infections. (C)
   2. Anticipate, diagnose and provide initial treatment and follow-up management for medical emergencies that may occur during dental treatment. (C)
   3. Manage hard and soft tissue lesions of traumatic origin. (C)