

Kuwait Board Program in Dentistry KB-R1/R2

Post Graduate Training Program in Dentistry - Kuwait

Prepared by

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1. INTRODUCTION:

The board of trustees of KIMS has decided to initiate full-fledged residency programs in all different specialties in medicine and dentistry as of November 2010. All programs are designed as five (5) years structured programs. Successful completion of the program will lead to the conferral of the "Kuwait Board" in the respective specialty.

The residents of the program will be promoted to R1 and R2 through a series of qualifying examinations/assessments conducted at each level in the presence of external examiner(s).

Successful completion of R2 will mark an entry point to a further three (3) years of postgraduate education in different fields of dentistry (R3, R4, and R5).

2. KUWAIT BOARD GOALS:

- The primary aim of the residency program in dentistry, both at the general and advanced levels, is to educate and train residents to enable them to practice in the discipline of general dentistry and its other specialties including operative dentistry, dental radiology, endodontics, oral surgery, periodontics, prosthodontics, pedodontics, orthodontics, etc., with particular emphasis on the specific dental diseases that are relevant in the community and the country.
- The residents shall acquire the requisite knowledge, skills, and attitude to practice with competency, compassion, and professionalism in the different fields of dentistry.
- The residents work in a learning environment optimally conducive to inculcating skills in problem-solving.
- The residents imbibe the habit of self-learning to facilitate continuing life-long professional development.

KB-R1 Rotation Specific Objectives:

KB-R1: 1st rotation

At the end of the <u>1st rotation of KB-R1</u> residency training, the resident should meet expectations in all of the following CanMEDS Roles:

• Medical expert

- Understand the *applied Physiology* including the basic physiological functions of general body systems essential for the interpretation of the systemic effects of common dental diseases.
- Demonstrate sound basic knowledge in managing *Medically compromised* patients and *Medical emergencies* in the dental clinic.
- Identify basic knowledge of *applied Anatomy of Head & Neck* including Anatomic landmarks, Nervous and blood supply, Venous and lymphatic drainage, Muscles, and Paranasal air sinuses.
- Recognize the *Orofacial Pathology and Oral Medicine* including Orofacial cysts, Vesiculobullous lesions of the oral mucosa, description, and documentation.
- Understand the Basic knowledge of *Clinical Applied Pharmacology* related to dentistry including local anaesthesia, antimicrobial, antifungal, and anti-viral agents.
- Know the different body systems and understand Systemic Pathology and Dental Related Medicine.
- Demonstrate sound basic knowledge in all specialties including *dental radiology, oral surgery, periodontics, endodontics, orthodontics, dental material, prosthodontic and operative dentistry.* (Refer to the didactic syllabus section 2)
- Know the basic principles of professional dental photography.
- Review and understand the assigned articles provided and complete with competency the written assessments (Refer to Google Classroom)

• Clinician

- Understand the *Principles of Professional and Ethical Practice* and the policies applied in the Ministry of Health (MOH) to Manipulate patient records.
- Understand the *Infection Control policies* and apply basic principles underlying all relevant procedures in the field of sterilization and infection control.
- Apply thorough clinical history and full examination of the oral cavity and other relevant systems using the standard clinical protocols.
- Practice the clinical procedures assigned under close supervision of the clinical tutor/Site Coordinator (Appendix 1) and make sure to complete each rotation requirement (Appendix 2)
- Fill the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been observed, evaluated, and signed by the clinical tutors.
- Practice the following Mock proficiencies together with the assigned site coordinators:
 - * Periodontal evaluation and treatment
- * First stage endodontic treatment

* Composite restoration

* Simple extraction

- * Wound suture techniques.
- Complete and Pass Part1 of KB-R1 clinical proficiency which includes the following: (Appendix 4)
 - * First stage endodontic treatment
- * Composite restoration

• Communicator and Collaborator

- Understand MOH referral system.
- Recognise the role of teamwork and function as an effective member of the team
 - Maintains professional relationships with other health care providers

• Health advocate

- Attentive to preventive measures and participate in community awareness events.

• Scholar

- Attend regularly to academic and training courses (Appendix 6)

• Professional

- Show dedication and punctuality to work and treat all patients in an ethical manner
- Maintain appropriate boundaries in the workplace and adhere to proper attire.

KB-R1: 2nd rotation

At the end of the <u>2nd rotation KB-R1</u> residency training, the resident should meet expectations in all of the following CanMEDS Roles:

• Medical expert

- Define and understand the science of *craniofacial biology* (Refer to the didactic syllabus section 1)
- Recognize the *Orofacial Pathology and Oral Medicine* including Oral infections, White and Red lesions, and malignant and potentially malignant diseases.
- Know *Dental Anatomy* including normal teeth morphology, disorders of teeth and dental hard tissues, and normal teeth development.
- Understand the *Scientific Basis of Dental Practice* including Audit in dental practice and Evidence-based dentistry.
- Demonstrate sound basic knowledge in all specialties including *oral surgery*, *periodontics*, *paediatric dentistry*, *dental radiology*, *and infection control*. (Refer to the didactic syllabus section 2)
- Review and understand the assigned articles provided and complete with competency the written assessments (Refer to Google Classroom)
- Complete KB-R1 case presentation with competency (see 7.3)
- Pass KB-R1 SOE (see 7.7.1)

Clinician

- Coordinate treatment with other health care providers and formulate an appropriate sequence of treatment.
- Illustrate well integrated treatment plan and perform the indicated basic procedures in general dentistry.
- Operate multidisciplinary oral health care for a wide variety of patients including those with special needs.
- Practice and perform the clinical procedures assigned under close supervision of the clinical tutor/Site Coordinator. (Appendix 1) and make sure to complete each rotation requirements (Appendix 2)
- Fill the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been <u>observed</u>, <u>evaluated</u>, and <u>signed by the clinical tutors</u>.
- Complete and Pass Part 2 of KB-R1 clinical proficiency which includes the following: (Appendix4)

 * Periodontal evaluation and treatment.

 * Simple Extraction.

• Communicator/Collaborator

- Establish therapeutic relationships with patients and be able to accept and respect the opinions of others
- Provides clear complete records and reports.

• Leader

- Work effectively in a health care organization and Manage time effectively.

• Health Advocate

- Attentive to preventive measures and issues of public health.
- Participate in community education and awareness.

• Scholar

- Attend regularly to the academic and training courses (Appendix 6)
- Construct scientific programs through critical thinking and presentations based on evidence.
- Apply dental photography skills and demonstrate professional presentation skills.

Professional

- Show dedication and punctuality to work and Treat all patients in an ethical manner
- Recognise limitation to seek advice when needed.

KB-R1: 3rd rotation

At the end of the 3^{rd} rotation KB-R1 residency training, the resident should meet expectations in all of the following CanMEDs Roles:

• Medical expert

- Demonstrate the ability to search a certain scientific topic, present and discuss it.
- Demonstrate good basic clinical presentation skills and case defense.
- Review and understand the assigned articles provided and complete with competency the written assessments (Refer to Google Classroom)

- Clinician

- Promote high-standard operational policies.
- Demonstrate skills in clinical problem-solving and decision-making based on the best available evidence.
- Compete promptly and effectively with complications and emergencies.
- Practice and perform the clinical procedures assigned under close supervision of the clinical tutor/Site Coordinator (Appendix 1) and make sure to complete each rotation requirement (Appendix 2)
- Fill the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been <u>observed</u>, evaluated, and signed by the clinical tutor.

• Communicator/Collaborator

- Deliver understandable information and effective counselling to patients/families.
- Consult effectively with other physicians and healthcare providers.
- Provide clear complete records and reports.

• Leader

- Work effectively in a health care organization and manage time effectively.
- Practice evidence based dentistry.

• Health Advocate

- Attentive to preventive measures.
- Advocate for the behaviour of patients and involve patients/ families in decision-making.

• Scholar

- Attend regularly to the academic and training courses (Appendix 6)
- Accept and act on constructive feedback.

Professional

- Show dedication and punctuality to work and treat all patients ethically.
- Maintain appropriate boundaries in the working place
- Recognize limitations to seek advice when needed

At the end of 1st year of residency, the R1 graduates are expected to meet all the KB-R1 Goals and Objectives.

KB-R2 Rotation Specific Objectives:

KB-R2: 1st rotation

At the end of the 1^{st} rotation KB-R2 residency training, the resident should meet expectations in all of the following CanMEDs Roles:

Medical expert

- Demonstrate sound basic knowledge in all specialties including *Surgery, Periodontics, Endodontics, prosthodontics, orthodontics, Oral medicine, and paediatric Dentistry.* (refer to the didactic syllabus section 3)
- Recognize the *Orofacial Pathology and Oral Medicine* including Pain of non-odontogenic origin and Salivary gland disorders. (Refer to the didactic syllabus section 3)
- Review and understand the assigned articles provided and complete with competency the written assessments (Refer to Google Classroom)

Clinician:

The resident will have either a one-month rotation in the Oral Surgery Department & 3 months in Health District clinics or a Two-month rotation in Oral Surgery and Endodontic Department and two months in Health District clinics.

During Health District Rotation, the resident Should:

- Compete in all the clinical procedures of KBR1 in addition to the following procedures:
 - * Surgical extractions including third molars (Oral Surgery rotation)
 - * Wound Suturing (Oral Surgery rotation)
 - * Non-surgical root canal treatment (Endodontic Department rotation)
- Practice and perform the clinical procedures assigned under close supervision of the clinical tutor/Site Coordinator (Appendix 1) and make sure to complete each rotation requirement (Appendix 2)
- Fill the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been <u>observed</u>, <u>evaluated</u>, and <u>signed by the clinical tutor</u>.
- Complete and Pass part 1 of KB-R2 clinical proficiency which includes the following:
 - * First-stage endodontic treatment.
- * Composite restoration.

During each Specialized Center rotation, the resident should:

- Accomplish the assigned requirement during the oral surgery and endodontic rotation (Appendix 2)
- Fill the "Logbook" provided (Appendix 3), with the clinical procedure that has been <u>observed</u>, <u>evaluated</u>, <u>and signed</u> by the clinical tutor.

• Communicator / Collaborator

- Demonstrate the ability to communicate and deal with patients and their families and delivers understandable information.

Leader

- Work effectively in a health care organization and manage time effectively.
- Practice evidence-based dentistry.

Health Advocate

- Attentive to preventive measures.
- Advocate on behave of patients and involve patients/ families in decision-making.
- Participate in community education and awareness events.

Scholar

- Attend regularly to the academic and training courses (Appendix 6)
- Define comprehensive knowledge of basic research and statistical methodology.

Professional

- Show dedication and punctuality to work and treat all patients ethically.
- Maintain appropriate boundaries and Recognise limitations to seek advice when needed

KB-R2: 2nd rotation

At the end of the 2^{nd} rotation KB-R2 residency training, the resident should meet expectation in all of the following CanMEDs Roles:

• Medical expert

- Demonstrate sound basic knowledge in all specialties including *Endodontics, Operative Dentistry, and prosthodontics.* (refer to the didactic syllabus section 3)
- Demonstrate good basic clinical presentation skills and case defense.
- Demonstrate the ability to search a certain scientific topic, present and discuss it.
- Review and understand the basic knowledge of research methodology and clinical appraisal.
- Review and understand the assigned articles provided and complete with competency the written assessments (Refer to Google Classroom)
- Pass KB-R2 OSCE/SOE (refer to 7.7.2)

Clinician

- The resident will have either one-month rotation in the Endodontic Department & 3 months in Health District clinics or 4 months in Health District clinics only.

During Health District Rotation, the resident Should:

- Show confidence and competence in formulating a successful treatment plan and provide multidisciplinary oral health care for a wide variety of patients.
- Justify a well-integrated treatment plan and treatment execution in the clinical case presentations.
- Support the maintenance of patient clinical records including diagnosis, treatment plan, consent form, and therapeutic or surgical interventions.
- Practice and perform the clinical procedures assigned under close supervision of the Clinical tutor/Site Coordinator (Appendix 1), and make sure to complete each rotation requirement (Appendix 2)
- Fill the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been <u>observed</u>, evaluated, and signed by the clinical tutor.
- Complete and Pass part 2 of KB-R2 clinical proficiency which includes the following:
 - * Periodontal evaluation and treatment.

* Wound suturing.

During each Specialized Center rotation, the resident Should:

- Accomplish the assigned requirement during the endodontic rotation (Appendix 2)
- Fill the "Logbook" provided (Appendix 3), with the clinical procedure that has been <u>observed</u>, <u>evaluated</u>, <u>and signed</u> by the clinical tutor.

• Communicator/ Collaborator

- Demonstrate the ability to communicate and deal with patients and their families and delivers understandable information.
- Demonstrate the ability to present different available treatment options to patients.

• Leader

- Work effectively in a health care organization and manage time effectively.
- Practice evidence base dentistry.

Health Advocate

- Attentive to preventive measures.
- Advocate on behave of patients and involve patients/ families in decision making.

Scholar

- Attend regularly to the academic and training courses (Appendix 6)
- Participate actively in the education of junior residents.

Professional

- Show dedication and punctuality to work and treat all patients ethically.
- Recognise limitations to seek advice when needed

KB-R2: 3rd rotation

At the end of the 3^{rd} rotation KB-R2 residency training, the resident should meet expectation in all of the following CanMEDs Roles:

• Medical expert

- Review and understand the assigned articles provided and complete with competency the written assessments (Refer to Google Classroom)
- Pass the General Dentistry Part 1 Exam.

Clinician

- The resident will have either one-month rotation in the Endodontic Department & 3 months in Health District clinics or 4 months in Health District clinics.

During Health District Rotation, the resident Should:

- Practice and perform the clinical procedures assigned under close supervision of the Clinical tutor/Site Coordinator. (Appendix 1) and make sure to complete each rotation requirement (Appendix 2)
- Fill the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been <u>observed</u>, evaluated, and signed by the clinical tutor.
- Evaluate the complexity of proposed care and recognize limitations of dental services that can be performed by the resident in MOH polyclinics.
- Justify the specialty referrals when indicated, and coordinate treatment when other health care providers are involved.
- Appraise clinical problem-solving and decision-making based on the best available evidence.

During each Specialized Center rotation, the resident Should:

- Accomplish the assigned requirement during the endodontic rotation (Appendix 2)
- Fill the "Logbook" provided (Appendix 3), with the clinical procedure that has been observed, evaluated, and signed by the clinical tutor.

• Communicator/ Collaborator

- Demonstrate the ability to communicate and deal with patients and their families with empathy and understanding, especially while dealing with newly diagnosed conditions with poor prognosis

• Leader

- Manage time effectively.
- Utilize information technology effectively.
- Practice evidence-based dentistry.

• Health Advocate

- Plan and conduct educational programs for the community on matters relating to the promotion of oral health and prevention of dental diseases.

Scholar

- Attend regularly to the academic and training courses (Appendix 6)
- Participate actively in the education of junior residents.

Professional

- Show dedication and punctuality to work and treat all patients ethically.
- Maintain appropriate boundaries in the working place
- Recognize limitations to seek advice when needed

At the end of 2nd year of residency, the R2 graduates are expected to meet all the KB-R1/R2 Goals and Objectives.

3. DIDACTIC SYLLABUS FOR KB-R1/R2:

3.1 Didactic Syllabus for KB-R1:

KB-R1 resident is responsible for both sections 1 and 2 of the didactic syllabus of KB-R1.

SECTION 1:

The Biological Basis of Clinical Dentistry Including:

Торіс	Objectives
Craniofacial Biology	
 Embryology of the head and neck Normal craniofacial growth and development Oral and dental histology 	Demonstrate knowledge and understanding in the developmental anatomy of the head and neck and terminology related. Define the science of craniofacial biology, applied histology and embryology which enables the residents to recognize the normal and abnormal function of tissues and organs.
- Developmental defect of oral and craniofacial region.	Understand congenital abnormality and developmental defect with awareness of its aetiology.
Applied Anatomy of Head & Neck	
 Anatomic landmarks of head & neck region Nervous and blood supply Venous and lymphatic drainage Muscles of head and neck region Salivary glands Temporomandibular joints Anatomical basis of regional anaesthesia 	Identify all basic anatomical landmarks and understand the basic knowledge of applied anatomy and histology - specially of the head and neck region. Understand head and neck innervation, blood supply, venous and lymphatic drainage, and muscle of the head and neck area. Understand the anatomy, function, and histology of salivary gland. Understand the anatomy and functional movement of Temporomandibular Joint and demonstrate good clinical examination to the joint. Understand the functional regional anesthesia anatomy relevant to dental practice and apply the different anaesthetic techniques available and know its indications and contraindications.
 Dental Anatomy: Normal teeth morphology Normal teeth development and eruption 	Appreciate the structure, function, and histology of the oro/dental tissue. Recognise the normal anatomical structure, morphology and dental chronology.

Clinical Applied Pharmacology:

- Pharmacological pain management in dentistry: Analgesics and anti-inflammatory agents.
- Antimicrobial, antiviral and antifungal agents
- Coagulants and anti-coagulants
- Drug interaction and complications
- Local anaesthesia in dentistry
- Drug prescription and legal implications

Understand the types of pain and how pain is initiated and transmitted.

Recognise the therapeutic use of analgesics and antiinflammatory drugs, and know their dose regiment, side effects, and drugs interactions.

Understand and apply the basic knowledge of the pharmacology related to dentistry, including therapeutic actions of the antimicrobials, antiviral, antifungal, antibiotics, coagulant and know their dose regiment, side effects, and drugs interactions.

Understand how local anaesthetics work and know the potency, speed of onset and duration of action of common agents.

Aware of reasons for failure of anaesthesia and complication that can occur and know the safe dosages of common local anaesthetics drugs.

Appreciate legal implication for drug prescription.

Orofacial Pathology and Oral Medicine:

- Description/documentation of oral lesions
- Oral infections
- Orofacial cyst
- White and red lesions of the oral mucosa
- Oral ulceration
- Vesiculobullous lesions of the oral mucosa
- Malignant and potentially malignant oral diseases

Know how to describe/ document the different oral lesion and distinguish the normal structure from the diseased oral mucosa.

Know the bacterial, viral and fungal infections that affect oral mucosa, and understand the feature of oral candidiasis.

Know the causes of Orofacial cysts and understand their management.

Know the causes of ulceration and understand the management.

Recognise systemic and orofacial pathology including white and red lesions of oral mucosa, vesicullo-bullous diseases, premalignant / malignant lesions and cysts of the jaws.

Understand the Key of each disease Prevention and management.

Systemic Pathology and Dental Related Medicine:

- Cardiac disorders
- Respiratory diseases
- Endocrine diseases
- Liver diseases
- Gastrointestinal disorders
- Immunity diseases
- Neurological disorders
- Musculoskeletal disorders
- Blood disorders
- Medically compromised patients
- Medical emergencies in dental clinic =

Know the different body systems and understand the principles of pathology that can affect each system to be able to identify the likely consequences of dentistry for the medically compromised person.

Compete promptly and effectively with complications and emergencies.

Operate multidisciplinary oral health care for a wide variety of patients including those with special needs.

Principles of Professional and Ethical Practice:		
 Dental practice management "ethics and professionalism" Informed consents and legal aspects Medical and dental records Medico-legal reports "Drug prescription and legal implication" 	Understand the dental and oral health policies applied in the Ministry of Health (MOH) polyclinics and specialty dental centres. Use the consent form in daily practice. Understand the referral system Practice safe and hazard free work environment for patients. Treat all patients in an ethical manner and Interpret ethics and while dealing with patients and staff.	
Scientific Basis of Dental Practice: - Audit in dental practice - Evidence-based dentistry	Manipulate the maintenance of patient clinical records including diagnosis, treatment plan, consent form, therapeutic or surgical interventions. Takes an evidence-based approach and practice evidence base dentistry.	

SECTION 2:

Торіс	Objectives
Infection Control	
- Infection control guidelines in dental practice - Cross infection in dental clinic	Apply basic principles underlying all relevant procedures in the field of sterilization, aseptic protocol and infection control.
- Disinfection and sterilization in dental clinic	Understand the cross infection in dental clinic and know the consequences and the way of prevention.
	Understand the process of disinfection and sterilization and recognize the infection control guideline in dental practice.
Dental Radiology	
Principles of oral radiology Radiation physics and projection geometry Conventional oral radiographic techniques	Apply basic principles of conventional intraoral radiographic technique and understand the advance imaging technique available.
Advance imaging techniquesRadiographic errors	Know the somatic and genetic effect and understand the doses and risk in dental radiography.
Radiological anatomy of the head and neckIdentification of pathological lesions	Know when the radiograph is justified and how to limit dose for the patient.
	Distinguishing between the anatomical landmark and any pathological lesion.
	Recognise the radiographic errors and understand it's different causes.
	Demonstrate skill in radiographic interpretation
- Principles of dental extractions and	Understand the indication for removal of impacted teeth, know the techniques available for extraction.
Complications - Third molar impactions - Wound healing and repair	Know how to complete pre-operative assessment and able demonstrate the ability to assess the case difficulty.
- Principal tissue spaces & spread of infection	Demonstrate skill in management of patient following extraction and appreciate the potential complications following extraction and understand their management.
	Understand the basic science of wound healing.
	Understand the anatomy of tissue spaces and different root of spread of infection & know how to manage such infection.
Periodontics	Recognise the normal anatomy and function of the periodontium
- Anatomy and function of the periodontium	and identify the Pathogenesis of diseased periodontium
 Pathogenesis of diseased periodontium Principals of periodontal Examination and Diagnosis 	Understand the diagnostic technique and interpret the finding sensibly.
 Classification of periodontal diseases Mucogingival deformities Diagnosis of periodontal diseases Risk factors for periodontal diseases 	Demonstrate and apply the diagnosis of the periodontal diseases accurately, to be able to formulate appropriate treatment plan.
 Non-surgical management of periodontal disease Follow up and maintenance 	Recognise the different management approaches available and identify the risk factors effect and understand the importance of maintenance.
- Introduction to implant surgery	Demonstrate the diagnosis and classification of periodontal diseases and understand the management approach. Know the basic principle of implant surgeries.

Endodontics

- Pain of odontogenic origin
- Endodontic pathology and diagnosis
- Endodontic-periodontics combined lesions
- Normal pulp anatomy and access cavity
- Preventive endodontics: vital pulp therapies
- Endodontic treatment procedure: non-surgical endodontic treatment
- Endodontic emergencies
- Endodontic materials
- Chronic tooth cracks and fractures

Understand the different causes of odontogenic pain and distinguish between the odontogenic and non- odontogenic pain.

Recognise the conditions that may affect the dental pulp and understand the relationship between Pulpal diagnosis and the appropriate treatment.

Understand the complexity of root canal morphology and appreciate the importance of adequate access in root canal therapy.

Recognise the need for following a structured approach in history taking and understand the relevance of special tests and interpret the finding sensibly.

Understand the technical procedures involved in combating root canal infection.

Recognise Chronic cracks and fractures and know how to give a Diagnosis and appropriate treatment options.

Operative Dentistry and Dental Materials

- Dental caries risk assessment, prevention and Management
- Non-carious tooth surface lesions
- Dietary advice in dentistry
- Principles of cavity preparation
- Dental restorative materials
- Tooth discoloration and bleaching
- Tooth hypersensitivity
- Dental liner and base materials
- Bonding system

Understand the aetiology of dental caries and preventive dentistry.

Demonstrate the ability to detect caries both clinically and radiographically.

Understand the aetiology of tooth wear and know the basic principle of management.

Understand the principles of cavity preparation.

Know the advantages and disadvantages of dental materials, to be able to choose the most appropriate material for each clinical situation.

Know the causes of extrinsic and intrinsic tooth discoloration, and know which treatment are appropriate for each type of discoloration.

Demonstrate the ability to manage tooth hypersensitivity.

Know the biological principles and stages of bonding and understand the limitations of adhesive dentistry.

Paediatric Dentistry

- Behavioural management of paediatric
- Treatment planning for paediatric patient
- Normal and abnormal Eruption sequence for primary and permanent dentition.
- Diagnosis and management of dental caries
- Fluoride and caries prevention
- Special needs patient management.

Know the strategies that a dentist could employ to help children to cope.

Appreciate the importance of an accurate comprehensive history to achieve Proper treatment plan.

Understand primary/permanent teeth development histology and eruption pattern including the age of mineralization, root formation and eruption.

Understand the principles of caries detection and prevention Know the different materials used for restoration of primary teeth and their respective advantage and disadvantages.

Appreciate the impact of active dental disease on specific medical disorder and understand the importance of dental prevention in specific medical disorders.

Prosthodontics

- Treatment planning in prosthodontics
- Principles of occlusion
- Tooth restorability assessment and restoring endodontically treated teeth
- Removable partial dental prosthesis

Demonstrate sound basic knowledge in prosthodontics treatment planning including Tooth restorability assessment, Implant treatment planning.

Illustrate well integrated treatment plan and Coordinate treatment with other health care providers

Able to carry out a detailed clinical examination of patient occlusion and understand the basic principles of occlusion.

Appreciate the importance correct patient assessment to allow correct restorability assessment.

Understand basic concept of partial denture construction.

Appreciate the importance of design for the prevention of future disease and show the ability to classify and describe a partial denture.

Orthodontics

- Development and growth of skull and dentition
- Orthodontics assessment of malocclusion and diagnosis.
- Orthodontic indices of treatment need
- Orthodontic cephalometric analysis

Understand the pattern of growth of the calvarium, cranial base, nasomaxillary complex and the mandible.

Know how occlusal development proceeds in 'average' child.

Able to classify the 1st molar and incisor relationship

Know how to categorise malocclusion according to the Index of Orthodontic Treatment Need (IOTN)

Confident in basic cephalometric analysis and interpretation.

3.2 Didactic Syllabus for KB-R2:

 $KB\mbox{-}R2$ resident is responsible for both sections 1 and 2 of the didactic syllabus of KB-R1, in addition to section 3.

SECTION 3

Торіс	Objectives
Orofacial Pathology and Oral Medicine	Understand the different causes odontogenic pain and Distinguish between the odontogenic and non- odontogenic pain.
Pain of non-odontogenic originSalivary glands disordersBone disorders of the head and neck	Know the features, investigations and management of salivary gland disorders and understand management approach.
 Oral manifestations of systemic diseases Disorders of teeth and dental hard tissues	Recognise various feature of Bone disorders and able to identify and refer.
	Recognise the oral manifestation of systemic disease and understand the management approach.
	Define the common developmental abnormalities frequently encountered in the dental practice and understand the causes and management of the clinical implications of each abnormality.
Oral Surgery	
- Orofacial fractures and head injuries	Know how to assess and document all head and neck injuries.
 Biopsy techniques for soft tissue lesions Minor soft tissue and salivary gland surgeries Temporomandibular joint disorders 	Know how to identify facial fractures clinically and radiographically, understand the principles of management of the different facial fractures
- Understand the anatomy and functional movement of Temporomandibular Joint and demonstrate good clinical	Appreciate the importance of biopsy and know the different biopsy technique for soft tissue lesion.
examination to the joint.	Know the features, investigations and management of salivary gland disorders, and understand the principles of surgery to remove salivary gland.
	Appreciate the different Temporomandibular joint disorders and understand the management approach
Periodontics	
- Periodontitis and systemic diseases	Recognise the link between periodontitis and systemic diseases.
 Dental extraction and socket preservation Surgical management of periodontal diseases 	Appreciate the importance of socket preservation during dental extraction procedure
 Regenerative periodontal surgery Preparation of the periodontium for restorative therapies 	Know the different periodontal surgical technique available and acknowledged its indications.
Implant surgery complicationsImplant placements follow up and	Know the basic principle of implant surgeries and Understand its Indication, contraindication and complications.
maintenance	Appreciate the importance role of Follow up and maintenance of dental implants

Endodontics

- Procedural errors
- Endodontic failure
- Evaluation of endodontic outcome
- Surgical endodontics
- Vital pulp therapy for immature teeth
- Dental trauma
- Root resorption

Appreciate some of the problems that may be encountered in root canal preparation and understand the different way of management.

Appreciate the reasons why root canal treatment might fail and understand how to tackle a range of retreatment problems.

Know how to predict the endodontic outcome and prognosis.

Understand the indications for surgical intervention and appreciate what involved in surgical endodontics.

Distinguish the appropriate treatment for vital and nonvital immature permanent tooth.

Recognise different endodontic emergencies and understand their management.

Know the most common dental injuries, able to classify the injuries and understand the appropriate treatment for each.

Operative Dentistry and Dental Materials

- Para-functional habits
- Dental cements
- Indirect restorations

Understand the different parafunctional habits, and their implications and relation to oral health, Able to evaluate the predisposing factors and know the management protocol.

Know the different types of cement available and understand the uses, advantages and disadvantages of each.

Understand the principles behind the construction of the direct & indirect restorations and know the clinical indication and materials used.

Prosthodontics

- Principles of tooth preparations
- Dental materials in prosthodontics
- Tissue management and impression making
- Restoring endodontically treated teeth
- Fixed dental prosthesis
- Implant supported prosthesis
- Complete denture prosthesis
- Aesthetic dentistry

Know the principles of tooth preparation and fixed dental prothesis

Understand the different properties of dental material used in prosthodontics

Know the different type of margin preparation and understand the principles of soft tissue management to maximise the opportunity for recording a satisfactory impression and working model.

Know the different treatment options for restoring endodontically treatment teeth including types of post and core available, their properties, uses, advantages and disadvantages.

Understand the principles of implant supporting prothesis including implant component, prothesis fabrication and fixation.

Know the basic principles of complete denture including examination, properties and fabrication steps.

Appreciate the principals of aesthetic dentistry including dental and gingival aesthetics.

Paediatric Dentistry

- Restorative materials for primary dentition
- Pulp therapies for primary teeth
- Oral trauma for primary dentition
- Management of premature loss of primary dentition
- Conscious Sedation for paediatric patient.
- General anaesthesia for paediatric patient.

Know the material used in restoring primary dentition including their advantages and disadvantages

Understand the indication and contraindication for primary pulp therapy, and know the medicaments used in primary pulp treatment.

Recognise the most common injuries in the primary dentition and demonstrate the ability to classify the dental injury and know the appropriate treatments for each classification.

Appreciate the importance of early recognition and management of premature loss of primary.

Able to assess patient for suitability for conscious sedation and know the dental and medical contraindication.

Understand what sedation means, Know the indication and types for sedation and when not to use it.

Understand the clinical effects of the major sedatives uses in dentistry and their side effects and appreciate the hazards of occupational exposure to nitrous oxide.

Know the indication for general anaesthesia and the instructions given to a patient who will undergo day case under GA

Orthodontics

- Psychology of orthodontics
- Principles and biology of tooth movements
- Fixed and removable orthodontic appliances
- Canine impaction.
- Interceptive orthodontics
- Potential risks of orthodontic treatment

Know the basic principles and biology of tooth movement.

Understand the indication for fixed and removable appliance therapy and know the composition, advantages and mode of action

Understand the aetiology of canine impaction, diagnosis and management

Understand the concept of interceptive orthodontic, recognise the indicated cases and know proper timing.

Understand the benefits, limitations and potential risk of orthodontic treatment.

The syllabus is provided to indicate the areas of knowledge which are expected of candidates. It is not intended to be exhaustive or to exclude other topics which are of similar relevance.

4. LEARNING SETTING:

The calendar year of the program starts on the first week of October and lasts until the last week of September. The residents will be able to achieve the program goals and objectives via the following modalities:

4.1 Didactic Courses:

- The didactic core will consist of courses that include lectures, workshops, seminars, and academic half-day sessions provided by the local Ministry of Health staff and the Faculty of Dentistry of Kuwait University.
- More than six local courses for R1 and R2 residents will be conducted yearly in October, November, December, January, February, March, and April.
- Case presentation assignment (refer to 7.3).

5. LEARNING RESOURCES:

5.1 Physical Facilities:

- The clinical training of the residents will be conducted at recognized dental clinics in the primary health care centers and specialty centers.
- The lectures will be provided at the various lecture halls at KIMS, Dental Centres, and other Dental Administration facilities.

5.2 Clinical Protocol:

- Clinical Training Guide for KB-R1/R2 Residents (*Appendix 1*).

5.3 References and Reading Materials:

- The Kuwait Board <u>Reading Guide</u> includes a suggested list of books, journals, articles, and websites representing references and reading material for the residents during the different stages of the program (*Appendix 5*).
- <u>The academic year timetable</u> includes the lectures which will be presented by a visiting lecturer from the faculty of dentistry of Kuwait University and the local staff member of the Ministry of Health (*Appendix 6*).
- Most of the Lectures' reading sources, in addition to supplementary reading recourses will be available in Google classroom.

In addition, it is recommended that the residents are up to date with the current literature in the various aspects of dentistry through available relevant journals e.g., Dental Update, Clinical Oral Implants Research, BDJ, JADA ...etc.

5.4 Computer Facilities and Internet Access:

All candidates are expected to have enough experience in the use of computers in terms of word processing, PowerPoint presentations, database handling, online accessibility of educational materials etc.

6. ELIGIBILITY OF RESIDENTS:

6.1 First-Year Residency (KB-R1):

• Successful achievement of KIMS admission requirements

6.2 Second-Year Residency (KB-R2):

- A certificate of successful completion of the KBR1 Residency
- Other KIMS requirements may be applied

7. EVALUATION OF RESIDENTS:

The process of evaluation of the residents includes:

7.1 In-Training Evaluation:

- The evaluation of the residents will be conducted using the "Resident Evaluation Form" (*Appendix 7*) which is done once per rotation by the Clinical Tutor together with the Site Coordinator.
- The evaluation aims to assess the resident knowledge, job performance, communication, collaboration, clinical skills, commitment, and professionalism, thus the evaluation form covers the Can-MED's Roles (Medical expert, clinician, communicator, collaborator, leader, health advocate, scholar, professional).

7.2 Clinical Proficiency:

- To test the ability of the resident to apply the stated learning objectives in a clinical setting.
- The resident will be examined by the Site Coordinators
- The pass mark is 65%.
- A Mock clinical proficiency will be performed in the 1st rotation for R1 residents

• The proficiency includes the following:

KB-R1:

- Part 1 KB/R1 Clinical proficiency
 - First-stage endodontic treatment on molar.
 - Composite restoration on a vital tooth with adjacent and opposing.
- Part 2 KB/R1 Clinical proficiency
 - Periodontal evaluation and treatment for periodontitis case.
 - Simple extraction of molar.

KB-R2:

- Part 1 KB/R2 Clinical proficiency
 - First stage endodontic treatment on molar.
 - Composite restoration on vital tooth with adjacent and opposing.
- Part 2 KB/R2 Clinical proficiency
 - Periodontal evaluation and treatment for periodontitis case.
 - Wound suturing extra oral.

7.3 Case Presentation Evaluation:

- To expose the resident to public speaking and to improve his/her presentation skills.
 The resident should demonstrate his/her diagnostic skills, treatment planning, and clinical skills.
- An examination panel will evaluate the resident twice a year maximally as deemed necessary.
- The pass mark is 65%.
- The marks will be based on the following:
 - Patient assessment

- Proper data gathering
- Special tests
- Clinical diagnosis
- Problems list & treatment options
- Treatment planning
- Execution and completion of phase 1 of the treatment plan (KBR2 only)
- Quality and technique of the presentation
- Presentation audio-visuals
- Case discussion and closing remarks

7.4 Monitoring Commitment and Professionalism:

• To monitor and document the adherence of the resident to the rules and regulations using the "Warning Letter" form (*Appendix 8*), which can be completed by either the Clinical Tutors and /or Site Coordinators.

7.5 Eligibility to sit KB-R1 Final Written Exam:

- In order to sit the KB-R1 Final Written Exam, the resident should successfully complete his/her In-Training Evaluation Report (ITER) which includes the followings:
 - Resident evaluations I and II.
 - Clinical proficiency examination
 - Case presentation examination
 - KB-R1 Structured Oral Exam (SOE)
 - Complete rotation requirements
- In the event of having an unsuccessful ITER or an unsuccessful KB-R1 Final Written Exam, the resident will repeat the year.

7.6 Eligibility to sit KB-R2 General Dentistry Part 1 Exam:

- In order to sit the General Dentistry Part 1 Exam, the resident should successfully pass the first year (KB-R1) and the resident should successfully complete his/her Final In-Training Evaluation Report (FITER) which includes the following:
 - Resident evaluations III, IV, V, VI. VII And VIII.
 - Clinical proficiency examination
 - Case presentation examination
 - KB-R2 OSCE/ SOE
 - Complete rotation requirements
 - In the event of having an unsuccessful FITER, the resident will not be able to sit the KB-R2 General Dentistry Part 1 Exam.

7.7 Examinations Format and Certification:

7.7.1 KB-R1 Structured Oral Exam (SOE):

- The examination is conducted twice a year as deemed necessary.
- Both sections 1 and 2 of the didactic syllabuses of KB-R1 will be examined (refer to 3.1)
- The resident will present in front of four separate examination committees (A, B, C, and D) consisting of one examiner and two observers each.
- Passing each committee is mandatory to pass the exam.
- The total examination time is 30 minutes (7 minutes for each committee).
- The candidate will be awarded a Pass or Fail.
- The SOE might be recorded.
- The exam will be held over two consecutive days.

7.7.2 KB-R1 Final Written Exam

- The examination is conducted at the end of the academic year in September.
- The examination details and format will be posted on the program website: http://sites.google.com/site/kuwaitdb/
- The overall pass mark is 65%
- The examination results will be announced within 1 week of commencing the exam.
- Successful candidates will move forward to KB-R2.

7.7.3 KB-R2 Objective structured clinical examination / Structured oral Examination (OSCE / SOE):

- The examination is conducted twice a year as deemed necessary.
- The full syllabus of the KB-R1/R2 program will be examined (refer to 3.1 & 3.2)
- The examination consists of two parts as follows:
 - The OSCE is composed of several active stations in addition to rest stations, each station is of a five-minute duration.
 - The Structured Oral Exam is the same as in KB-R1 SOE.
 - Candidate should pass each exam.
- The candidate will be awarded pass or fail.

7.7.4 KB-R2 General Dentistry Part 1 Exam:

- The examination is conducted at the end of the academic year in September.
- The examination details and format will be posted on the KIMS Examination office website: http://examsoffice-kims.com
- At the end of the second year and after the successful completion of all requirements, the resident will be awarded the KB-R2 Residency Certificate (The first part of the Kuwait Board).

7.7.5 Examination Rules and Regulations:

- The examination questions are protected by copyright and are the intellectual property of the Kuwait Board Examination Committee R1/R2. Any reproduction or other disclosure of these examination questions in whole or in part is strictly prohibited.
- To ensure examination confidentiality is maintained, candidates may be sequestered to stay for a few minutes to a few hours after the examination. Candidates cannot bring any type of electronic device into the sequestering room and are not permitted to leave before authorization is granted.
- All candidates must respect all rules of conduct and behave professionally and respectfully toward the Examination Committee Members.
- Candidates must not communicate with each other in any manner whatsoever while the examination is in progress.
- The Program will take all available disciplinary measures and legal actions against any candidate or others who violate this confidentiality provision.
- Before the start of the examination at the sign-in desk the Candidates are not permitted to have any electronic or communication devices (i.e., Cell phone, smartphone, smartwatch, iPad, pager, blackberry, USB or memory sticks, calculators; laptops; electronic tablet; recording devices; MP3 players; bleepers;

- timing devices that make audible beeps) and materials such as books, papers, and other materials.
- All items included bags, purses, papers, and all electronic devices will be stored in bins at the Signe in desk before the start of the examination. Any candidate caught in the possession of such devices during the examination may be immediately expelled.
- Failure to comply with these requirements may lead to disqualification from the examination.

8. APPEAL POLICY:

Residents who wish to appeal to any of their Evaluations/Examinations results must do so in writing as per KIMS rules and regulations.

9. LEAVES POLICY:

Policy and procedures on leaves during KB-R1/R2 Years follow KIMS leaves General rules as stated in the "Manual of Policies for Postgraduate Medical Education".

9.1 Annual Leaves:

- Thirty days (30) of annual leave shall be granted each academic year including the public holidays.
- Annual leave must not be transferred.
- Annual leaves are **not allowed** at the following times:
 - Beginning of the academic year
 - Beginning of each rotation.
 - During academic courses
 - During clinical & academic evaluation sessions
 - If the resident didn't complete the rotation requirements.
- Annual leave **cannot be divided** into more than two leaves until the Final Written Exam at the end of each academic year.
- Annual leaves should be submitted **one month** in advance.

9.2 Study Leaves:

- A total of **14 days** of study leave shall be granted during the residency program.
- A total of seven days of study leave are allowed once during each academic year.
- The leave should be submitted at least **three months** in advance.
- This leave is allowed for only the two written examinations:
 - KB-R1 Final Written Exam.
 - KB-R2 General Dentistry Part 1 Exam
 - The last day of the leave shall be the day of the exam.

9.3 Conference Leaves:

- A total of **five working days** of conference leave are allowed **once** per academic year and must be approved by the program director.
- Evidence of registration to the conference should be submitted to the program secretary at the Specialized Dental Center in Salmiya-1st floor.
- The resident is required to present a **certificate of attendance** of the conference to the program secretary at the time of signing the "**Return from leave form**".
- The leave should be submitted at least **one month** in advance.
- This shall not grant financial support.

9.4 Sick Leaves:

- Resident's Sick leaves should be announced before the start of the Duty.
- Each resident is allowed a maximum of **fifteen days (15)** of authorized sick leaves per academic year.
- Sick leave exceeding 15 days must not be counted towards the effective training period.
- Sick leave **exceeding 15 days** per year must be approved by the General Medical Council, Ministry of Health, Kuwait.
- KIMS "Confirmation of return from leave" form (*Appendix 11*) must be signed by the Clinical Tutor or the Site Coordinator in charge and submitted with the original sick leave form to the program secretary at the Specialized Dental Center in Salmiya-1st floor- within a maximum of 7 days.
- Failure to comply with rules and regulations may expose you to legal accountability.

9.5 Permissions:

- Resident's Permissions should be announced 24 hours <u>before the start time of the</u> Duty.
- The resident should follow the rules and regulations abided by the Health Districts and Specialized Dental Centres.

9.6 Other leaves:

• Will be handled on an individual basis according to KIMS rules and regulations.

9.7 Leave forms

- Leave procedures:
 - Send the request for leave by the WhatsApp group.
 - The request has to be accepted (Clear) by both Health Region and KIMS.
 - KIMS "Pre-Approval Leave" form *(Appendix 9)* should be filled out electronically to the Site Coordinators to be approved.
- The "Leave" form *(Appendix 10)* must be completed and submitted together with the approved "Pre-Approval Leave" form to the program secretary at the Specialized Dental Center in Salmiya-1st floor.
- Return from leave procedures
 - KIMS "Confirmation of return from leave" form *(Appendix 11)* must be signed by the Clinical Tutor or the Coordinator in charge.
- "Return from leave" form (*Appendix 10*) must be completed and submitted with the "Confirmation of return from leave" form to the program secretary at Specialized Dental Center in Salmiya-1st floor.
- "Leave" and "Return from leave" forms should be downloaded from the program website, filled electronically, printed, and submitted to the program secretary at Specialized Dental Center in the Salmiya-1st floor.
- Failure to adhere to Leaves rules and regulations may expose you to legal accountability.

10. RESOURCE PERSONNEL

Board of the Program:

- Program Director
- Assistant Program Director
- Clinical Coordinators
- Academic Coordinators
- Examinations Coordinators
- Administrative Coordinator
- Site Coordinators
- Clinical Tutors

Examination Committee:

The examination committee consists of staff members of the board program and may include dental faculty members of Kuwait University.

Clinical Staff:

- Site Coordinators
- Clinical Tutors

Support Staff:

- Secretaries and clerks at KIMS and dental administration
- Nurses, sterilization, and radiology staff
- Maintenance staff

11. PROGRAM MONITORING AND EVALUATION:

- The Program will be reviewed and evaluated by the board of the faculty of dentistry, KIMS every year.
- The didactic courses will be reviewed and adjusted annually to the latest updates.
- The clinical courses will be evaluated by implementing annual internal audits and questionnaires to ensure quality control.
- The clinical facilities will be reviewed on an annual basis.
- The Site Coordinators and Clinical Tutors will be evaluated using specific evaluation forms.
- All these evaluation techniques will be reviewed to reach a consensus on the ideal methods of improving the program.

12. PROFESSIONALISM AND ACADEMIC REGULATIONS:

Failure to follow KIMS regulations will lead to implementing legal action.

13. ADMINISTRATIVE CONTACTS:

- Salmiya Specialized Dental Center in -1st floor.
- Sabah Health area KIMS Building, 5th floor.

Administrativ	ve Coordinator	Secretary
Name	Mobile No.	Specialized Dental Center,
Dr. Bader Al Essa	99766972	Salmiya -1 st floor

WhatsApp Group

- WhatsApp group is established for better communication between the Resident, Clinical Tutor,
 Regional Coordinator & Site Coordinator.
- The resident should be informed about the following via the WhatsApp group:
 - Permissions
 - Leaves, i.e.: (sick leave, annual leave, study leave, conference leave, etc.....)
 - Weekly Schedule
 - Switching shifts

14. ACADEMIC CONTACTS:

Academic Coordinators		
Name	Mobile No.	
Dr. Nada Al Ansari	55666990	
Dr. Sara AL Meer	66068454	
Dr Maysaa' Almusallam	99639900	
Dr Abrar Al Ajeel	97822278	
Dr Majed Al Mohanadi	55519939	

Email	Academicr1r2@gmail.com
Website	http://sites.google.com/site/kuwaitdb/

15. REGIONAL AND SITE COORDINATORS CONTACTS:

Dagian	Regional Coordinator		Site Coordinator	
Region	Name	Mobile No.	Name	Mobile No.
	Dr Farah Al Sharhan	65999991	Dr. Eman Al Failekawy	92299909
	Di Paran Ai Shaman	03777771	Dr. Fatima Dashti	50514200
Capital			Dr. Nada AlAnsari	55666990
	Dr. Dalal Al Thenayan	99271712	Dr. Mohammad Ebrahim	55990113
	,		Dr Abrar Al Ajeel	97822278
			Dr. Nainawah Al Saileek	66050599
			Dr. Dhuha Albahouh	66462115
Mobarak	Dr Mohammad		Dr. Shaimaa Shamsaldeen	97913059
Al Kabeer	Esmael	96688951	Dr. Nada AlAnsari	55666990
			Dr Asmaa' Alabdulhadi	55875559
			Dr Majed Al Mohanadi	55519939
			Dr. Sara Almeer	66068454
Hawally	Dr. Ayat Abu Alhassan 99413688	Dr. Shaimaa Shamsaldeen	97913059	
			Mariya Al Khabaz	99662602
	Dr. Fadel Abbas	66181515	Dr Asmaa' Alabdulhadi	55875559
Ahmadi			Dr. Sara AlAzmi	99198187
			Dr Omar Shams Aldeen	
F	Dr. Mahaa Abu		Dr. Heba Hamadi	99072349
Farwaniya	Dawood 60773777	Dr Dalal Drosari	99811412	
Jahraa	Dr Fajer Helal	50027979	Dr Hessa Al Saeed	99766662
Jaber Al Ahmad Armed Forces	Dr Mohammad Al Qatan	66568787	Dr Maysaa' Almusallam	99639900

APPENDICES

Appendix 1: Clinical training guide:

1. KB-R1 Clinical training guide:

- The clinical training of the resident is continuous during the year and will include clinical/handson demonstrations and the resident will provide basic general dentistry treatment under close supervision of the Clinical Tutor.
- The training of R1 residents in the academic year will consist of three rotations in different Health Districts
- Switching shifts is allowed only in case of urgent circumstances and the permission must be approved by the Clinical Tutor and Site Coordinator via WhatsApp group.
- It is the resident responsibility to complete each rotation requirement (Appendix 2)
- The resident must fill out the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been observed, evaluated, and signed by the clinical tutor.
 - > During each rotation, the Site Coordinators will evaluate and grade the resident in a random visit.
 - The evaluation is based on their clinical performance, clinical skills, patient's management, quality of treatment outcome, basic science, and clinical knowledge.

Grading System keys:

- 5 = Outstanding Skills and/or Knowledge with independent performance (Outstanding)
- 4 = Very Good clinical skills and/or Knowledge with no assistance (Exceeds expectations).
- 3 = Good clinical skills and/or Knowledge with minimal assistance (Meet expectations).
- 2 = Good clinical skills and/or Knowledge with assistance (Needs Improvement).
- 1 = **B**elow average clinical skills and/or Knowledge with mentor's dependent performance (Unsatisfactory).
- Toward the end of the rotation, the residents will be evaluated using the "Resident Evaluation Form" *(appendix 7)* by the Clinical Tutor together with the Site Coordinator. The evaluation form will assess the CanMED's Roles (Medical expert, clinician, communicator, collaborator, leader, health advocate, scholar, and professional).
- The resident should meet the objectives by Practicing and performing the clinical procedures assigned under the close supervision of the clinical tutor/Site Coordinator.

The treatment procedures include:

- Infection control policy implementation
- Patient assessment and diagnosis
- Basic occlusal analysis
- Dental radiographs interpretation
- Proper treatment planning designing and executing
- Preventive measures application (OHI, fluoride, fissure sealant, dietary advice ...etc.)
- Restorative Dentistry:
 - Restorations (composite, core build-up)
 - Pulp protection procedures (direct/indirect pulp capping)
- Endodontics:
 - Full endodontic examination
 - Endodontic diagnosis
 - Pulp therapy for primary dentition
 - 1st stage endodontic treatment
- Periodontics:
 - Basic periodontal examination
 - Full periodontal examination
 - Accurate periodontal diagnosis
 - Non-surgical periodontal treatment
- Oral Surgery:
 - Simple Extractions
 - Minor surgical extractions
 - Basic haemostatic measures
- Management of dental emergency
- Management of medical emergencies in dental clinic
- Referrals system
- Post-operative care and prescriptions
- Patient recall and maintenance

2. KB-R2 Clinical training guide:

- The clinical training of the resident is continuous during the year and will include clinical/handson demonstrations and the resident will provide basic general dentistry treatment under close supervision of the Clinical Tutor.
- The training of R2 residents in the academic year will consist of five rotations.
- Each R2 resident will be rotated among different Health Districts in addition to the Endodontic department and Oral Surgery department in the Dental Speciality Centres.
- Switching shifts is allowed only in case of urgent circumstances and the permission must be approved by the Clinical Tutor and Site Coordinator via WhatsApp group.
- It is the resident responsibility to complete each rotation requirement (Appendix 2)
- The resident must fill out the "Logbook" provided (Appendix 3) daily, with the clinical procedure that has been observed, evaluated, and signed by the clinical tutor.
 - During each rotation, the Site Coordinators will evaluate and grade the resident in a random visit.
 - The evaluation is based on their clinical performance, clinical skills, patient management, quality of treatment outcome, basic science, and clinical knowledge.

Grading System keys:

- 5 = Outstanding Skills and/or Knowledge with independent performance (Outstanding)
- 4 = Very Good clinical skills and/or Knowledge with no assistance (Exceeds expectations).
- 3 = Good clinical skills and/or Knowledge with minimal assistance (Meet expectations).
- 2 = Good clinical skills and/or Knowledge with assistance (Needs Improvement).
- $1 = \mathbf{B}$ elow average clinical skills and/or Knowledge with mentor's dependent performance (Unsatisfactory)
- Toward the end of the rotation, the residents will be evaluated using the "Resident Evaluation Form" (*appendix 9*) by the Clinical Tutor together with the Site Coordinator. The evaluation form will assess the CanMED's Roles (Medical expert, clinician, communicator, collaborator, leader, health advocate, scholar, and professional).
- R2 Resident should meet the objectives by Practicing and performing the clinical procedures assigned under close supervision of the clinical tutor/Site Coordinator.

The clinical procedures include all the clinical procedures in KBR1 in addition to the following procedures:

- Surgical extractions including third molars
- Wound Suturing
- Non-Surgical root canal treatment.

Appendix 2: Rotations Requirements

<u>1. KB-R1</u>

4 Months Rotation Requirements	Number of Required cases
Composite restoration:	45 classified as follows:
• Class II composite	15
• Class III, IV composite	15
• Class I, V composite	15
Scaling	30
Extraction	25
Pulpectomy	20
periodontal evaluation and treatment	2
Treatment plan formulation	2

<u>1. KB-R2</u>

4 Months Polyclinic Rotation Requirements	Number of Required cases
Composite restoration	45 classified as follows:
• Class II composite	15
• Class III, IV composite	15
• Class I, V composite	15
Scaling	30
Extraction	25 20
Pulpectomy Periodontal evaluation and treatment	20 2
Treatment plan formulation	2 2
	-
3 Months Polyclinic Rotation Requirements	Number of Required cases
Composite restoration	35 classified as follows:
• Class II composite	15
• Class III, IV composite	10
• Class I, V composite	10
Scaling	20
Extraction	22
Pulpectomy	15
Periodontal evaluation and treatment	1
Treatment plan formulation	1
2 Months Polyclinic Rotation Requirements	Number of Required cases
Composite restoration	22 classified as follows:
• Class II composite	10
• Class III, IV composite	6
• Class I, V composite • Class I, V composite	6
Scaling	15
Extraction	13
Pulpectomy	10
Periodontal evaluation and treatment	1
Treatment plan formulation	1
Specialize Dental Center: Endodontic Requirements	Number of Required cases
Non-surgical RCT for anterior teeth	5
Non-surgical RCT for premolar teeth	10
Non-surgical RCT for molar teeth	5
Others	
Specialize Dental Center: Surgical Requirements	Number of Required cases
Surgical extraction with root separation	14
Extraction of remaining roots, or other surgical	<u> </u>
extraction without root separation.	30
Surgical extraction of impacted third molar teeth	5
Attendance to General anesthesia theatre	1
Incision and drainage procedures	1
Other surgical procedure	-
2 2 Brown br o a a a a a a	

Appendix 3- Resident's Logbook

Resident's Logbook can be downloaded by using the link below:

https://drive.google.com/file/d/1KKqbBQ6r_QwbixdyJQ5d1Rm0Fz5z_Hz K/view

Appendix 4: Clinical proficiencies

1. KB-R1 clinical proficiency

KB-R1 clinical proficiency includes the following:

- Part 1 KB/R1 Clinical proficiency
 - First-stage endodontic treatment
 - Composite either class III, IV, or II restoration
- Part 2 KB/R1 Clinical proficiency
 - Periodontal evaluation and treatment
 - Simple extraction.
- The Designated Site Coordinators and/or Clinical Tutors carry out proficiency examinations using "specific forms" to test the president's ability to apply the Rotation's stated objectives.
- The resident should PASS the clinical proficiency and the pass mark is 65%.

2. KB-R2 clinical proficiency

KB-R2 clinical proficiency includes the following:

- Part 1 KB/R2 Clinical proficiency
 - Composite either class III, IV, or II restoration
 - First-stage endodontic treatment
- Part 2 KB/R2 Clinical proficiency
 - Periodontal evaluation and treatment
 - Wound suturing
- The Designated Site Coordinator carries out proficiency examinations using "specific forms" to test the president's ability to apply the Rotation's stated objectives.
- The resident should PASS the clinical proficiency and the pass mark is 65%.

Appendix 5 - Reading Guide

It is important to stress that there is no agreed required reading list for this examination (KBR1/R2 Exam).

Remember that **the syllabus is provided to indicate the areas of knowledge, which are expected of candidates**. While it is not intended to be exhaustive or to exclude other topics, that may be of similar relevance to clinical dental practice, you should use the syllabus as your basic reading guide.

Looking at the list of topics covered in the three main sections of the syllabus the Sections cannot be weighted equally in the assessments.

This guide gives several textbooks, that are appropriate for the different sections of the syllabus, and there is a wide variety of choices. In studying such books to prepare for the examination, use the syllabus to guide you toward the most relevant chapters.

THE BIOLOGICAL BASIS OF CLINICAL DENTISTRY

• CRANIOFACIAL BIOLOGY:

- Harris, Edgar, and Meghji. Clinical Oral Science. 1st Edition, 347 pages. Wright, 1998 ISBN 0723610592

• APPLIED ANATOMY:

Moore, Dalley, and Agur. Clinically Oriented Anatomy. 8th Edition, 1168 pages. Lippincott Williams and Wilkins, 2017

ISBN: 1496347218

- Snell. Clinical Anatomy by Regions. 9th Edition, 768 pages. Lippincott Williams & Wilkins, 2011
 ISBN 1451110324
- **Fehrenbach, and Herring.** Illustrated Anatomy of the Head and Neck. 5th edition, 352 pages.

Saunders, 2016

ISBN 0323396348

• **DENTAL ANATOMY:**

- **Berkovitz, Holland, and Moxham.** Oral Anatomy, Histology and Embryology. 5th Edition, 472 pages. Elsevier, 2017

ISBN 0723438129

 Nelson. Wheeler's Dental Anatomy, Physiology, and Occlusion", 11th Edition, 336 pages. Elsevier, 2019

ISBN: 0323638783

• CLINICAL AND APPLIED PHARMACOLOGY:

- **Dowd, and Mariotti.** Essentials of Pharmacology and Therapeutics for Dentistry 1st Edition, 216 pages. Elsevier, 2023

ISBN 0323826598

• OROFACIAL PATHOLOGY AND ORAL MEDICINE:

 Odell. Cawson's Essentials of Oral Pathology and Oral Medicine. 10th Edition, 592 pages. Elsevier, 2024

ISBN 0323935494

- Scully. Scully's Medical Problems in Dentistry. 7th Edition, 832 pages. Churchill Livingstone, 2014
 ISBN 0702054011
- Neville, Damm, Allen and Chi. Oral and Maxillofacial Pathology. 5th Edition, 992 pages. Elsevier. 2023

ISBN 0323789811

• SYSTEMIC PATHOLOGY AND DENTAL RELATED MEDICINE:

- **McMahon, and Sloan.** Essentials of Pathology for Dentistry. 1st Edition, 256 pages. Churchill Livingstone, 2000

ISBN 0443057060

Samaranayake. Essential Microbiology for Dentistry. 6th Edition, 424 pages. Elsevier, 2024
 ISBN 0443117217

• MEDICAL EMERGENCIES IN THE DENTAL CLINIC:

- **Malamed.** Medical Emergencies in the Dental Office. 8th Edition, 576 pages. Elsevier, 2022 ISBN 0323776159
- **American Heart Association.** BLS (Basic Life Support) Provider Manual. 1st Edition. 85 pages. Channing L Bete CO Inc, 2016.

ISBN 1616694076

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• <u>DENTAL RADIOLOGY:</u>

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- Riter. Sturdevant's Art and Science of Operative Dentistry. 7th Edition, 544 pages. Mosby, 2018
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- Rosenstiel, Land, and Walter. Contemporary Fixed Prosthodontics. 6th Edition, 944 pages. Elsevier, 2022.

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- Fan, Jones, and Quinn. MCQs for Dentistry. 3rd Revised Edition, 328 pages. PasTest Ltd,2014
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- Odell. Clinical Problem Solving in Dentistry. 3rd Edition, 352 pages. Churchill Livingstone, 2010
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- **Christopher Sproat, Georgina Burke, Mark McGurk**. Essential Human Disease for Dentists. 2nd Edition. 328 pages. Churchill Livingstone, 2006

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Rushworth, and Kanatas. Oxford Handbook of Clinical Dentistry (Oxford Medical Handbooks) 7th
 Edition, 864 pages. Oxford University Press, 2020

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Appendix 6 - Timetable of The Academic Year (2024/2025)

1. KB Program Courses:

Level	Course	Date
	AC1	20 th – 24 th October 2024
	AC2	17 th – 20 th November 2024
	AC3	8 th –11 th December 2024
KBR1	AC4	5 th – 9 th January 2025
	AC5	9 th –13 th February 2025
	AC6	9 th -13 th March 2025
	AC7	6 th – 8 th April 2025
	AC1	13 th -14 th October 2024
	AC2	24 th –25 th November 2024
KBR2	AC3	15 th –16 th -18 th December 2024
NDK2	AC4	12 th –14 th January 2025
	AC5	16 th –20 th February 2025
	AC6	9 th – 13 th March 2025

2. Examinations:

Level	Examination	Date
	SOE	14 ^{th,} 15 th May 2025
	SOE(Re-sit)	23 rd August 2025
KBR1	In-training Final KBR1Written Exam	7 th September 2025
	OSCE/SOE	10 th -13 th May 2025
KBR2	OSCE /SOE (Re-sit)	23 rd August 2025
	General Dentistry Part 1 -KBR2	Announce by KIMS Examination office

Appendix 7 - Resident Evaluation forms



Kuwait Institute for Medical Specializations KUWAITI BOARD IN DENTISTRY Resident Evaluation

Resident's name			
Duration	From/	to/	
Rotation	□ 1 st	☐ 2 nd	□3 rd
Level of training	□ R1	□ R2	
Clinical Tutor's name			
Site Coordinator's name			
District/Polyclinic			

1. Unsatisfactory 2. Needs improvement 3. Meets expectations 4. Exceeds expectations 5. Outstanding

1. Offsatisfactory 2. Needs improvement 5. Meets expectations 4. Exceeds expecta						6
Medical Expert	1	2	3	4	5	NA
Basic science knowledge						
Clinical knowledge						
Emergency knowledge						
Soundness of judgment and clinical decisions						
Self-assessment ability (Insight)						
Clinician	1	2	3	4	5	NA
Patient management						
Clinic management						
Data gathering (History and physical examination)						
Choice and use of ancillary tests (e.g. Lab. Tests, Radiographs)						
Performs diagnostic and therapeutic procedures required in the rotation						
Has initiative to identify work and perform it without being directed by peers						
Works in accordance to worldwide infection control policies						
Restorative Clinical Skills (Class II, III, IV Composite)						
Periodontal Clinical Skills						
Endodontic Clinical Skills						
Oral surgery clinical skills						
The ability to fulfill the assigned requirement for the rotation						
Communicator	1	2	3	4	5	NA
Establishes therapeutic relationship with patients/families						
Delivers understandable information to patients/families						
Maintains professional relationships with other health care providers						
Provide effective counseling to patients/families						
Provides clear complete records and reports						
Collaborator	1	2	3	4	5	NA
Demonstrates the ability to accept and respect opinions of others						
Works effectively in a team environment						
Consults effectively with other physicians and healthcare providers						
leader	1	2	3	4	5	NA
Manages time effectively						
Allocates health care resources effectively						
Works effectively in a health care organization						
Utilizes information technology effectively						
Practices evidence-based dentistry						

Health Advocate	1	2	3	4	5	NA
Is attentive to preventive measures						
Is attentive to issues of public health						
Advocates on behalf of patients						
Involve patients/families in decision making						
Scholar	1	2	3	4	5	NA
Attend and contribute to rounds, seminars, and learning event						
Accepts and acts on constructive feedback						
Takes an evidence-based approach to the management of problems						
Contribute to the education of other trainees, and health care professionals						
Professional	1	2	3	4	5	NA
Attend duties and report to work regularly (Punctuality)						
Personal appearance (Proper attire and grooming)						
Recognizes limitations and seeks advice when needed						
Discharges duties and assignments responsibly and in timely manner						
Report facts accurately, including own errors	+			-		
Maintains appropriate boundaries in work and learning situations	+			Н	-	
OVERALL COMPETENCE	1	2	3	4	5	BI A
OVERALL CONFETENCE				4	<u> </u>	NA
Weakness						
Date Clinical Tutor Date Site Coordinator					iatu iatu	
I certify that I have read all parts of this evaluation report and have discussed it with m Clinical Tutor/Site Coordinator: Date Resident's name	y su	perv				e



Kuwait Institute for Medical Specializations KUWAIT BOARD IN DENTISTRY KB-R2 Resident Evaluation for Endo Rotation

Resident's name			
Duration	From/	to	/
Clinical tutor's name			
Site coordinator's name			
Center			

2. Needs improvement 1. Unsatisfactory 3. Meets expectations 4. Exceeds expectations 5. Outstanding **Medical Expert** 2 3 4 5 NA Basic science knowledge Clinical knowledge Emergency knowledge Soundness of judgment and clinical decisions Self-assessment ability (insight) Clinician 2 3 4 5 Patient management Clinic management Data gathering (History and physical examination) Has initiative to identify work and perform it without being directed by peers Works in accordance to worldwide infection control policies Proper anesthetic technique and efficiency Isolation Technique Clinical skills in access cavity preparation Clinical skills in cleaning and shaping Clinical skills in obturation Temporization and occlusal adjustment Pain management The ability to fulfill the assigned requirement for the rotation Communicator 1 2 3 4 5 NA Establishes therapeutic relationship with patients/families Delivers understandable information to patients/families Maintains professional relationships with other health care providers Provide effective counseling to patients/families Provides clear complete records and reports after completion of RCT Collaborator 1 2 3 4 5 NA Demonstrates the ability to accept and respect opinions of others Works effectively in a team environment Consults effectively with other physicians and healthcare providers 2 3 leader 4 5 NA Manages time effectively Allocates health care resources effectively Works effectively in a health care organization Utilizes information technology effectively Practices evidence-based dentistry **Health Advocate** 2 3 4 NA Is attentive to preventive measures Is attentive to issues of public health Advocates on behalf of patients

Attend and contribute	Scholar	1					
Attend and contribute			2	3	4	5	NA
	to rounds, seminars, and learning event				Т		
Accepts and acts on co					\vdash	\vdash	
•	ed approach to the management of problems				\vdash	\vdash	
	ation of other trainees, and health care professionals				\vdash	\vdash	
	Professional	1	2	3	4	5	NA
Attend duties and reno	ort to work regularly (Punctuality)		Η-		Ť	Ť	
	Proper attire and grooming)		\vdash		\vdash	\vdash	\vdash
	and seeks advice when needed	-	\vdash		\vdash	\vdash	
	assignments responsibly and in timely manner	-			\vdash	\vdash	\vdash
Report facts accurately			\vdash		\vdash	\vdash	
	boundaries in work and learning situations		\vdash		\vdash	\vdash	
iviairitairis appropriate	OVERALL COMPETENCE	1	2	3	4	5	NA
	OVERALE COMMETENCE		_		_		147
	the specific objective and give specific examples wherever						
trengtn					•••••	••••	
trengtn				•••••	•••••	•••••	•••••
trengtn						•••••	
trengtn							
Veakness Date	Clinical Tutor				Sign		



Kuwait Institute for Medical Specializations KUWAIT BOARD IN DENTISTRY KB-R2 Resident Evaluation for Oral Surgery Rotation

	т		
Resident's name			
Duration	From/	to	/
Clinical tutor's name			
Site coordinator's name			
Center			

1.Unsatisfactory 2. Needs improvement 3. Meets expectations 4. Exceeds expectations 5.Outstanding

Medical Expert	1	2	3	4	5	NA
Basic science knowledge						
Clinical knowledge						
Emergency knowledge						
Soundness of judgment and clinical decisions						
Self-assessment ability (insight)						
Clinician	1	2	3	4	5	NA
Patient management						
Clinic management						
Data gathering (History and physical examination)						
Has initiative to identify work and perform it without being directed by peers						
Works in accordance to worldwide infection control policies						
Proper anesthetic technique and efficiency						
Clinical skills in surgical extraction without root separation						
Clinical skills in surgical extraction with root separation						
Clinical skills in surgical extraction for impacted wisdom teeth						
Clinical skills in remaining root extraction						
Clinical skills of Incision and drainage						
Flap design						
Hemostasis						
Wound suturing technique						
Pain management						
General anesthesia theater attendance						
The ability to fulfill the assigned requirement for the rotation						
Communicator	1	2	3	4	5	NA
Establishes therapeutic relationship with patients/families						
Delivers understandable information to patients/families						
Maintains professional relationships with other health care providers						
Provide effective counseling to patients/families						
Provides clear complete consent form, records and reports						
Collaborator	1	2	3	4	5	NA
Demonstrates the ability to accept and respect opinions of others						
Works effectively in a team environment						
Consults effectively with other physicians and healthcare providers						
leader	1	2	3	4	5	NA
Manages time effectively						
Allocates health care resources effectively						
Works effectively in a health care organization						

Utilizes information technology effectively						
Practices evidence-based dentistry						
Health Advocate	1	2	3	4	5	NA
Is attentive to preventive measures						
Is attentive to issues of public health						
Advocates on behalf of patients						
Involve patients/families in decision making						
Scholar	1	2	3	4	5	NA
Attend and contribute to rounds, seminars, and learning event						
Accepts and acts on constructive feedback						
Takes an evidence-based approach to the management of problems						
Contribute to the education of other trainees, and health care professions	als					
Professional	1	2	3	4	5	NA
Attend duties and report to work regularly (Punctuality)						
Personal appearance (Proper attire and grooming)		T				
Recognizes limitations and seeks advice when needed		T	T			
Discharges duties and assignments responsibly and in timely manner			\vdash			
Report facts accurately, including own errors		T				
Maintains appropriate boundaries in work and learning situations		T	Т			
OVERALL COMPETENCE	1	2	3	4	5	NA
Make direct reference to the specific objective and give specific examples wher	ever possible		or y	our		ng.
Make direct reference to the specific objective and give specific examples wher Strength						
Strength						
Weakness				Sig		

Appendix 8- Warning Letter form







Ref.::	الإشارة
Date:	التاريخ:
كتاب تنبيه للمخالفات الإدارية لاطباء الأسنان في البورد الكويتي	
الدكتور :	
التّارُيخ:	
المخالفة:	
A. الغياب عن العمل. B. عدم الإلتزام بساعات العمل. C. عدم الإخطار عن تبديل الدوام.	
 D. عدم إرسال الجدول الأسبوعي. E. عدم الإلتزام بقوانين البرنامج المتعلقة بالإستئذانات، المرضيات، الإجازات والإحصائيات. 	
لذا نلفت نظركم بضرورة الإلتزام بسياسات التشغيل الخاصة بالبرنامج في هذا الشأن. وفي حالة تكرار مثل هذه المخالفة سوف نتخذ بحقكم الإجراءات القانونية المتبعة.	
الملاحظات:	
ته قبع مختد الدكتور المتدرب	

Sulibekhat - Jamal Abdulnaser Str. - P.O. Box: 1793 Safat 13018 Kuwait الصفاة 13018 الكويت 13018 الكويت المسليبيخات - شارع جمال عبدالناصر - ص.ب: ۱۷۹۳ الصفاة 13018 www.kims.org.kw

Appendix 9– Pre -Approval Leave form



KIMS Pre-Approval Leave From

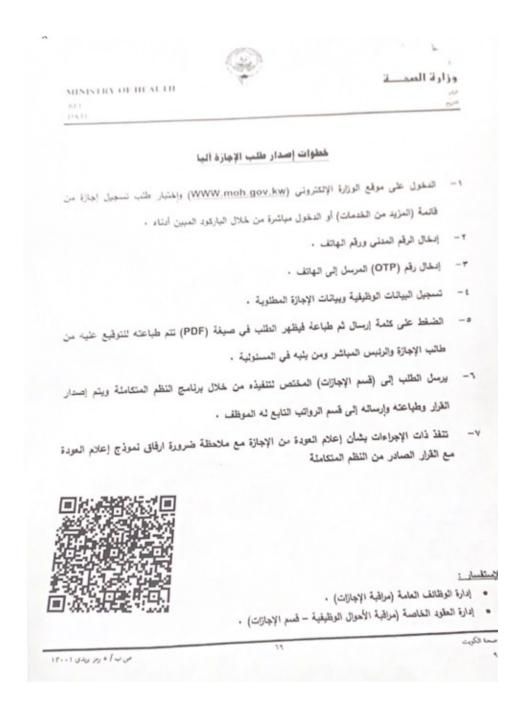
RESIDENT NAME	Click here to	enter text.			
RESIDENCY YEAR	ି R1	© R2			
CIVIL ID NO	Click here to enter text.				
MOH FILE NO	Click here to enter text.				
MOH DATE OF APPOINTMENT	Click here to enter a date.				
BANK	Click here to enter text.				
BRANCH	Click here to enter text.				
HEALTH REGION (Before KB)	Choose a	an item.			
LEAVES TYPE (Write ONE) • Annual Vacation (30 Days not accumulative) • Hajj Leave (30 days)	LEAVE Choose a				
 Conference Leave (5 days) Study Leave (7 days) Consolation Leave (4 days) 	NUMBER	OF DAYS			
Consolation Leave (4 days)	Choose a	an item.			
DATE OF LEAVE SUBMISSION	Click here to	enter a date.			
START OF LEAVE DATE	Click here to	enter a date.			
END OF LEAVE DATE	Click here to	enter a date.			
I consent to organize my leave date and clinical operation of my daily and on call d	•	•			

For Office Use Only:

MENTOR'S SIGNATURE	DATE SIGNED	REMAINING DAYS
Click here to enter text.	Click here to enter a date.	Choose an item.

Appendix 10 -Leave form and Return of Leave form

https://eservices.moh.gov.kw/SPCMS/MOHLeaveBackoffice/MOHLeavLogin.aspx



Appendix 11 - Confirmation of Return from Leave form







الإشارة:
برنامج ()
نموذج مباشرة بعد إجازة (دورية / مرضية /)
الإسـم:
الرقم المدني:
F3 F2 F1 R5 R4 R3 R2 R1 R1
المنطقة الصحية قبل الإنضمام إلى برنامج البورد:
تبدأ الإجازة بتاريخ: وتنتهي بتاريخ:
تاريخ المباشرة:
مدر الدرنام مشرف التدري

Sulibekhat - Jamal Abdulnaser Str. - P.O. Box: 1793 Safat 13018 Kuwait الصليبيخات ـ شارع جمال عبدالناصر ـ ص.ب:۱۷۹۳ الصفاة 13018 الكريت www.kims.org.kw