

SPECIALIST ACCREDITATION IN ORTHODONTICS

The candidate applying for accreditation in the specialty of Orthodontics shall fulfill the following criteria:

- Successfully completed a formal basic specialist training (BST) program of at least 36 months¹ and attained a basic specialist qualification, e.g. MDS (Orthodontics)(NUS) or its equivalent, that is recognised by the Dental Specialists Accreditation Board.
- Be in orthodontic practice for a minimum period of five (5) years; this period includes the duration of basic specialist training (BST) mentioned above.
- Fulfill the requisite core component in Continuing Professional Education (CPE) for specialists.
- Completion of a log of cases as specified in Annex B.
- Signed a declaration that all cases used for this accreditation are managed and treated by the candidate.
- Upon successful completion of the above, present for an assessment by the Orthodontic Dental Specialist Accreditation Committee (DSAC). The assessment, lasting one and a half hours, shall consist of three (3) components:
 - (i) Case presentation (Annex A)
 - (ii) Discussion on log book (Annex B)
 - (iii) Exit Interview (Annex C)

Candidates re-supplicating for specialist accreditation in Orthodontics shall use new cases for case presentation (Annex A) and fifty percent (50%- minimum 15 new completed cases and any number of new uncompleted cases to make a total of 30) of cases in the log book (Annex B) shall be new cases completed after the last unsuccessful assessment for specialist accreditation in Orthodontics.

¹ Candidates whose formal basic specialist training program is less than 36 months may be assessed on a case-by-case basis on the discretion of the DSAC.

Case Presentation

The candidate shall present documentation for eight (8) completed cases. Cases must be started after the date of conferment of a DSAB recognised basic specialist qualification in Orthodontics.

The spectrum of completed cases shall include **5 essential cases**, comprising of:

- (a) *Class I malocclusion: A malocclusion with either a dento-alveolar protrusion, open bite, deep overbite or a significant arch length deficiency, or eruption problem requiring orthodontic treatment*
- (b) *Class II malocclusion with Angle's Class II molar relationship (at least half unit)*
- (c) *Class III malocclusion with Angle's Class III molar relationship (at least half unit)*
- (d) *# Surgical-orthodontic management of skeletal discrepancies*
- (e) *# Multidisciplinary case (can be "orthodontics-prosthodontics" or "orthodontics-periodontics" or "orthodontic –minor oral surgery")*

and any 3 best treated cases.

Case presentations shall be in prescribed format in Appendix 1. One (1) hard copy and five (5) softcopies of case presentations shall be submitted to the DSAC.

The hard copy shall be in either high quality duplicated radiographs or digital printouts of radiographs and any supporting clinical pictures. **Please do not send in the originals.**

The Radiographs in the hard copy should be of good clarity and resolution and they should at least be:

- i. 21cm x 11cm for OPG / Dental Panoramic Tomogram
- ii. 14cm x 19cm for Lateral Cephalogram

The Clinical photographs should be standardized to same magnification for both the Extra-Oral and Intra-Oral respectively. The dimensions of each should measure 5cm x 7cm.

The soft copies shall contain digitized images or digital radiographs and clinical pictures in high resolution JPEGs of not less than 600KB.

Study models are required for all the above 8 cases in the pre-treatment and post-treatment stages. They should be properly labelled according to the stage of treatment.

The models are to be submitted to the Examination Secretariat 48 hours before the actual exam takes place.

CASE PRESENTATION

Case Number: _____

Candidate Number: _____

Patient's Date of Birth: _____

Date Started: _____

Patient's Gender: Male/Female *

Date Finished: _____

Case Category: a/b/c/d/e

Date of Recall: _____

*Circle or delete where appropriate

PRE-TREATMENT ASSESSMENT

Age at assessment: _____ years _____ months

PATIENT'S COMPLAINTS

RELEVANT MEDICAL & DENTAL HISTORY

CLINICAL EXAMINATION: EXTRA-ORAL FEATURES

CLINICAL EXAMINATION: INTRA-ORAL FEATURES

Soft-tissues:

Oral hygiene:

Erupted teeth present:

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General dental condition:

Case Number: _____

Candidate Number: _____

CROWDING / SPACING

Maxillary arch:

Mandibular arch:

OCCLUSAL FEATURES

Incisal relationship:

Overjet (mm):

Overbite:

Centrelines:

Left buccal segment relationship:

Right buccal segment relationship:

Crossbites:

Displacements:

Other occlusal features:

DIAGNOSTIC SUMMARY

Case Number: _____

Candidate Number: _____

PROBLEM LIST

[Add as few or as many as are appropriate to the case]

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

AIMS AND OBJECTIVES OF TREATMENT

[Add as few or as many as are appropriate to the case]

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Case Number: _____

Candidate Number: _____

TREATMENT PLAN

Extractions (FDI notation):

Appliances:

Special anchorage requirements:

Minor adjunctive surgery:

Major adjunctive surgery:

Additional dental treatment:

Proposed retention strategy:

Prognosis for stability:

Case Number: _____

Candidate Number: _____

COMPUTER PREDICTIONS

(Orthognathic surgery cases – surgical planning and predictions shall be included)

Case Number: _____

Candidate Number: _____

TREATMENT PROGRESS

Date at start of active treatment:

Age at start of active treatment:

Date at end of active treatment:

Age at end of active treatment:

Date at retention:

Age at retention:

KEY STAGES IN TREATMENT PROGRESS

(Provide a brief summary of approximately 8-10 key stages in the treatment sequence;
mid-treatment photographs may be inserted to demonstrate treatment mechanics and progress.)

DATE	STAGE
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- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Case Number: _____

Candidate Number: _____

POST-TREATMENT ASSESSMENT

OCCLUSAL FEATURES

Incisal relationship:

Overjet (mm):

Overbite:

Centrelines:

Left buccal segment relationship:

Right buccal segment relationship:

Crossbites:

Displacements:

Functional occlusal features

Other occlusal features:

Case Number: _____

Candidate Number: _____

OCCLUSAL INDICES

INDEX	PARAMETER	VALUE
Index of Treatment Need (IOTN)		
Dental Health Component	Start	
	Finish	
Aesthetic Component	Start	
	Finish	
Peer Assessment Rating (PAR)		
	Start	
	Finish	
	Change	
	% Change	
Other		

RADIOGRAPHS TAKEN TOWARDS /AT END OF TREATMENT

Date(s) and type of radiographs taken:

Relevant findings:

Case Number: _____

Candidate Number: _____

CEPHALOMETRIC ASSESSMENT (where appropriate)

VARIABLE	PRE-TREATMENT	POST-TREATMENT	RECALL
SNA			
SNB			
ANB			
SN to maxillary plane			
Wits appraisal			
Upper incisor to maxillary plane angle			
Lower incisor to mandibular plane angle			
Interincisal angle			
MM angle			
Upper anterior face height			
Lower anterior face height			
Face height ratio			
Lower incisor to Apo line			
Lower lip to Ricketts E Plane			

Case Number: _____

Candidate Number: _____

ADDITIONAL ANALYSIS (OPTIONAL)

Case Number: _____

Candidate Number: _____

CEPHALOMETRIC SUPERIMPOSITIONS (where appropriate)

Overall superimposition, registered on Sella-Nasion line at Sella

INTERPRETATION OF CEPHANLOMETRIC CHANGES

Case Number: _____

Candidate Number: _____

CEPHALOMETRIC SUPERIMPOSITIONS (where appropriate)

Maxillary and mandibular superimpositions (Please state registration landmarks)

INTERPRETATION OF CEPHALOMETRIC CHANGES

Case Number: _____

Candidate Number: _____

a) RATIONALE FOR TREATMENT

b) COMPLICATIONS DURING TREATMENT

c) CRITICAL APPRAISAL

Case Number: _____

Candidate Number: _____

Examination of Log Book

The candidate shall compile a log book of cases showing the broad spectrum as stated in Annex A. These cases must be carried out by the candidate after the date of conferment of DSAB-recognised basic specialist qualification in Orthodontics.

A minimum of sixty (60) cases, out of which a minimum of 30 must be completed, with recalls where appropriate and any number of uncompleted cases to make a total of 60. Uncompleted cases should be at least into the second stage of comprehensive treatment i.e. correction of molar relationship and space closure. These 60 cases shall be submitted in the prescribed template in Appendix 2.

One (1) hard copy and five (5) soft copies (in spreadsheet format eg Microsoft Excel) on CD-ROM of the log book shall be submitted to the DSAC. The log book shall illustrate the candidate's broad clinical experience relevant to the specialty of Orthodontics and represent a true and accurate record of all the patients seen and treated by the candidate.

Candidate must submit the log book to DSAC earlier and examiners will select 2 cases (out of 60 submitted) for discussion. Study models are not required for these two cases. Candidate will be informed of the two cases selected by the DSAC and is required to produce the patient treatment notes, radiographs and photographs for audit purposes 48 hours prior to the exit interview.

Template for Orthodontic Log Book

Name Reg No. Date of Birth Gender	Dental I II Subdiv. III	Skeletal I II III	Vertical eg: High Low AOB	Others eg: Cleft CFA Syndrome	Extracted permanent teeth (FDI notation)	Type of appliance	Type of retention	Date and age in yrs/mths at the start of treatment	Date and age in yrs/mths at the end of treatment	Date and age in yrs/mths at recall

Exit Interview

The candidate shall present for an interview at a date and time determined by the DSAC on any aspect of Orthodontics. Test cases with study casts, radiographs and photographs will be presented to the candidates for examination and assessment in spot diagnosis and treatment planning. The candidate's cases from the log book may be discussed during the interview.