

SCOPE OF PRACTICE PGY-1 – PGY-4

As regards to residents in Oral and Maxillofacial Surgery, there are some procedures or responsibilities which do vary according to the resident experiences or year of training. However, in our small department, it is worth noting that hospital procedures and operations are performed under the direct supervision of attendings and procedures are never accomplished without consultation and either direct or indirect supervision by an attending staff.

- Patients are not admitted to our service unless an attending is notified and is in agreement.
- Surgical procedures are never performed in the operating room without direct supervision by an attending.
- First or second year residents are on call to the Emergency Room for the evaluation and management of acute oral and maxillofacial injuries. These residents, however, are expected and required to be in direct communication with the senior resident (either a third year resident or fourth year resident) or chief resident in regarding the nature of the patient's injury. Chief residents make a decision regarding the nature of treatment of a particular injury that may require laceration repair and/or admission to the hospital. The chief resident directly communicates to attendings who may choose to directly supervise the procedure or indirectly supervise the procedure, depending upon the complexity and the nature of the injuries. If a decision is made to dismiss a patient with a maxillofacial injury from the Emergency Room, this decision is made by a chief resident and the patient is always given a follow-up appointment in the out-patient clinic to be seen within 72 hours at which time the on-call attending has the opportunity to re-evaluate the patient's injuries.
- For oral and maxillofacial surgery residents who are rotating with other services as part of their residency training experience, these residents are under the direct supervision of the particular departments' chief residents and attending. Their procedures are never done without supervision as deemed appropriate by staff.

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- When patients are taken to the operating room as a result of acute trauma, attendings in the department are notified and an attending directly supervises the activities in the operating room performed by the oral and maxillofacial residents.
- Following completion of a minimum five month rotation in anesthesia, oral and maxillofacial surgery residents perform moderate and deep sedation in an outpatient setting. Treatment is performed under the active supervision of an attending who is immediately available throughout the treatment and recovery period. All sedations are performed with a minimum of two ACLS trained personnel in the room at all times as well as one assistant and one circulator with BLS or higher level training.

This a standing departmental SOP.

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Resident Responsibility by PGY Level &

Criteria for Promotion Department of Oral and Maxillofacial Surgery MUSC College of Dental Medicine Charleston, SC

Introduction:

The CODA-approved residency-training program at the Medical University of South Carolina is under the direction of Dr. Martin B. Steed, Professor and Chief, and Mark A. Miller, DMD, MD, FACS, Associate Professor and Residency Program Director. The residency training program currently utilizes the Medical University of South Carolina Hospital and it associated surgical and patient care centers.

General principles for residents enrolled in the oral and maxillofacial surgery training program at the Medical University of South Carolina:

- 1. The resident oral and maxillofacial surgeon meets the qualifications for resident eligibility outlined in the Accreditation Standards for Advanced Specialty Education Programs in Oral and maxillofacial Surgery from the Commission on Dental Accreditation.
- 2. The position of resident oral and maxillofacial surgeon involves a combination of supervised, progressively more complex and independent patient evaluation and management functions as well as formal educational activities. The competence of the resident is evaluated on a regular basis. The program maintains a confidential record of the evaluation.
- 3. The position of resident oral and maxillofacial surgeon entails provision of care commensurate with the resident oral and maxillofacial surgery level of advancement and competence, under the general supervision of appropriately privileged attending teaching staff. This includes:

Participation in safe, effective, and compassionate patient care;

Developing an understanding of ethical, socioeconomic, and medical/legal issues that affect graduate medical education and how to apply cost containment measures in the provision of patient care;

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Participation in the educational activities of the training program and, as appropriate, assumption of responsibility for teaching and supervision of other residents and students, and participation in institutional orientation and education programs and other activities involving the clinical staff;

Participation in institutional commitments and councils to which the resident or al and maxillofacial surgeon is appointed or invited;

Performance of these duties in accordance with the established practices, procedures, and policies of the institution and other institutions to which the resident oral and maxillofacial surgeon is assigned.

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Criteria for Promotion in Oral and Maxillofacial Surgery

PGY-1

The PGY-1 Oral and maxillofacial Surgery resident rotates through 5 months of oral and maxillofacial Surgery and completes a course in History and Physical Diagnosis.

Fundamental duties include basic laboratory work, the performance and documentation of the history and physical examination and consultations, writing of routine admission, preoperative and postoperative orders on non-intensive care unit patients, performance of minimally invasive techniques such as insertion of intravenous lines, insertion of arterial lines, insertion of nasogastric tubes and hospital call duties. After the documentation of competence these duties can be performed under general supervision.

Direct supervision of the PGY-1 resident is necessary when orders are written for patients in the Surgical intensive care unit or when more invasive procedures such as the insertion of central venous lines and drainage of serious odontogenic infections.

Direct supervision of the PGY-1 resident is necessary in the operating room or surgery clinic. The following procedures performed by a PGY-1 may be supervised by the PGY-3 or PGY-4 Oral and Maxillofacial Surgery resident.

Incision and drainage of serious odontogenic abscess Dentoalveolar Surgery Delayed or primary closure of open wound Minor wound debridement

The anesthesia rotation may be during the PGY-1 year.

By the completion of the PGY-1 year the resident is expected to achieve the following stated level of skill or knowledge, as put forth in the Curriculum Guidelines in Oral and Maxillofacial Surgery at Emory University in the following categories:

- Anesthesia/pain management and anxiety control (upon completion of anesthesia rotation):
 - o Understanding of the anesthetic management of the healthy patient
 - o Familiarity with the anesthetic management of the medically compromised patient
 - o Familiarity with the pharmacology of the common analgesics and anxiolytics
 - o Competency in airway management

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- o Competency in pre-anesthetic assessment.
- o Competency in the administration of anesthesia to pediatric and adult patients.
- o Understanding the various anesthetic agents, techniques and medications.
- Competency in fluid management and blood product replacement.
- Medical management of patients
 - o Understanding of the pathophysiology of the major disease processes
 - o Understanding of the pharmacology of commonly used drugs
 - o Competency in performance of routine history and physical exam and admission procedures
 - o Competency in the interpretation of laboratory values, EKG and chest x-rays.
 - o Exposure to the perioperative management of the surgical patient
- Dentoalveolar surgery/basic surgical techniques
 - o Understanding of the pertinent anatomy
 - o Competency in the extraction of exposed teeth.
 - o Exposure to the surgical removal of impacted teeth
 - o Competency with sterile and aseptic techniques
 - o Competency in the use of Surgical armamentarium
 - o Understanding the principles of hemostasis
 - o Competency with basic hard and soft tissue management and suturing
 - o Competency in intraoperative Surgical photography
 - o Familiarity with the identification and management of complications
- Maxillofacial trauma
 - o Understanding of the pertinent anatomy
 - Familiarity with the assessment and management of facial fractures including the interpretation of imaging studies.
 - o Competency in the management of dentoalveolar injuries.
 - o Understanding of the treatment of the basic and a familiarity with the treatment of complex facial fracture.
 - o Exposure to the management of the severely injured patient
 - o Competency in management of soft tissue injuries.
 - o Familiarity with the identification and management of complications
- Skeletofacial deformities and cleft/craniofacial deformities
 - o Understanding of the pertinent anatomy

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- o Familiarity with the growth and development and the genetics of the craniofacial skeleton
- o Familiarity with identification of dentofacial and cleft/craniofacial deformities
- o Familiarity with the treatment planning of dentofacial and cleft/craniofacial deformities
- o Exposure to the multidisciplinary treatment of dentofacial and cleft/craniofacial deformities
- o Competency in cephalometric analysis
- o Exposure to model surgery
- o Competency in inttaoral photography
- o Familiarity with the identification and management of complications
- Facial aesthetic surgery
 - o Understanding of the pertinent anatomy
 - o Familiarity with changes of the aging face
 - o Familiarity with treatment planning for facial aesthetic surgery
 - o Competency inextraoral photography
 - o Familiarity with the identification and management of complications
- Maxillofacial pathology
 - o Understanding of the pertinent anatomy
 - o Understanding of the differential diagnosis of disease
 - o Competency in biopsy technique
 - o Understanding of normal histology
 - o Familiarity with abnormal histology associated with disease processes
 - o _ Familiarity with the common soft and hard tissue lesions and their pathophysiology and identification
 - o Exposure to definitive ablative surgery
 - o Familiarity with the identification and management of complications

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- Maxillofacial reconstruction (including implantology and preprosthetic surgery)
 - o Understanding of the pertinent anatomy
 - o Familiarity with the prosthdontist's needs for prosthetic construction
 - o Familiarity with principles and surgical techniques for soft and hard tissue recontouring and augmentation
 - o Understanding of the principles and surgical techniques for dental and maxillo facial implants
 - o Understanding of the basic biology of bone and soft tissue grafting
 - o Familiarity with allopastic materials used in reconstructive surgery
 - o Familiarity with flap reconstruction

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- o Competency in simple intraoral preprosthetic preparation and implant placement
- o Familiarity with the identification and management of complications
- Facial pain and temporomandibular disorders
 - o Understanding of the pertinent anatomy
 - o Familiarity with the common types of facial pain, TMDs and their physiology
 - o Familiarity with identification of TMD
 - Familiarity with the multidisciplinary treatment of facial pain and temporomandibular disorders
 - Competency in the performance and documentation of a sensory and motor examination of the HNF
 - o Competency in the performance and documentation of a detailed TMD examination.
 - o Familiarity with the identification and management of complications
- Maxillofacial infection.
 - o Understanding of the pertinent anatomy, microbiology and immunology
 - o Understanding of the use of antibiotic prophylaxis
 - o Competency in the identification of maxillofacial infection including interpretation of imaging
 - Competency in the recognition of a potentially compromised airway and life threatening infection
 - o Understanding of antibiotic therapy
 - o Familiarity with the pathophysiology of sepsis
 - o Competency in the management of patients with simple odontogenic infection
 - o Exposed to the management of patients with complex odontogenic infection
 - o Familiarity with sinus and salivary infection diagnosis and management
 - o Familiarity with the identification and management of complications
- Practice based Learning and improvement
 - o Familiarity with the use of information technology including Medline
 - Familiarity with the ability to analyze own practice for needed improvements, including QA and PI
 - o Familiarity with the AAOMS Parameters of Care
 - o Familiarity with the facilitation of learning of others
 - o Familiarity with critical evaluation of the literature

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SCOPE OF PRACTICE PGY-1-PGY-4

- Systems based practice
 - o Familiarity with the interaction of OMFS within the larger healthcare system, including documentation, medical record keeping, coding
 - o Familiarity with the delivery of cost effective healthcare
 - o Familiarity with the advocacy of patients within a healthcare system
- Acceptable performance on the OMSSAT and Mock Board examinations

PGY-2

The PGY-2 oral and maxillofacial surgery resident rotates through Neurosurgery, Medicine, General Surgery, Otolaryngology Head and Neck Surgery (Elective) and Critical care.

Fundamental duties are the same as the PGY-1 oral and maxillofacial surgery resident, except orders on patients in the intensive care unit may now be mitten under general supervision.

Direct supervision of the PGY-2 resident by is necessary during all operative procedures performed in the operating room or oral and maxillofacial surgery clinic. The following procedures may be supervised by the PGY-3 or 4 oral and maxillofacial surgery resident:

Incision and drainage of serious odontogenic abscess Dentoalveolar Surgery Delayed or primary closure of open wound Minor wound debridement

By the completion of the PGY-2 year, the resident is expected to achieve the following stated level of skill or knowledge, as put forth in the Curriculum Guidelines in Oral and Maxillofacial Surgery, in the following categories:

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- Anesthesia/pain management and anxiety control (upon completion of anesthesia rotation):
 - o Understanding of the anesthetic management of the healthy patient
 - o Understanding of the anesthetic management of the medically compromised patient
 - o Understanding of the pharmacology of the common analgesics and anxiolytics
 - o Competency in airway management.
 - o Proficiency in pre-anesthetic assessment.
 - o Competency in the administration of an esthesia to pediatric and adult patients.
 - o Understanding the various anesthetic agents, techniques and medications.
 - o Competency in fluid management and blood product replacement.
- Medical management of patients
 - o Understanding of the pathophysiology of the major disease processes
 - o Understanding of the pharmacology of commonly used drugs
 - o Proficiency in performance of routine history and physical exam and admission procedures
 - o Competency in performance of history and physical exam and admission procedures on Complicated cases
 - o Proficiency in the interpretation of laboratory values, EKG and chest x-rays.
 - o Competency in the perioperative management of the surgical patient
- Dentoalveolar surgery/basic surgical techniques
 - o Understanding of the pertinent anatomy
 - o Competency in the extraction of exposed teeth.
 - o Competency in the surgical removal of impacted teeth
 - o Proficiency with sterile and aseptic techniques
 - o Proficiency in the use of surgical armamentarium
 - o Understanding the principles of hemostasis
 - o Competency with basic hard and soft tissue management and suturing
 - o Competency in intraoperative surgical photography
 - o Understanding of the identification and management of complications
- Maxillofacial trauma
 - o Understanding of the pertinent anatomy
 - o Understanding of the assessment and management of facial fractures including the interpretation of imaging studies.
 - o Proficiency in the management of dentoalveolar injuries.
 - o Understanding of the treatment of the basic and complex facial fracture.
 - o Competency in the management of the severely injured patient.

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- o Competency in management of soft tissue injuries.
- Understanding the identification and management of complications
- Skeletofacial deformities and cleft/craniofacial deformities
 - o Understanding of the pertinent anatomy
 - o Familiarity with the growth and development and the genetics of the craniofacial skeleton
 - o Familiarity with identification of dentofacial and cleft/craniofacial deformities
 - o Familiarity with the treatment planning of dentofacial and cleft/craniofacial deformities
 - o Exposure to the multidisciplinary treatment of dentofacial and cleft/craniofacial deformities
 - Competency in cephalometric analysis
 - o Exposure to model surgery
 - o Competency in intraoral photography
 - o Familiarity with the identification and management of complications
- Facial aesthetic surgery
 - Understanding of the pertinent anatomy
 - o Familiarity with changes of the aging face
 - o Familiarity with treatment planning for facial aesthetic surgery
 - o Competency in extraoral photography
 - o Familiarity with the identification and management of complications
- Maxillofacial pathology
 - o Understanding of the pertinent anatomy
 - o Understanding of the differential diagnosis of disease
 - o Competency in biopsy technique
 - o Understanding of normal histology
 - o Understanding of abnormal histology associated with disease processes
 - Understanding of the common soft and hard tissue lesions and their pathophysiology and identification
 - o Familiarity with the uncommon soft and hard tissue lesions and their pathophysiology and identification
 - o Exposure to definitive ablative surgery
 - o Familiarity with the identification and management of complications
- Maxillofacial reconstruction (including implantology and preprosthetic surgery)
 - o Understanding of the pertinent anatomy
 - o Understanding of the prosthodontist's needs for prosthetic construction

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- Understanding of principles and surgical techniques for soft and hard tissue recontouring and augmentation
- o Understanding of the principles and surgical techniques for dental and maxillofacial implants
- o Understanding of the basic biology of bone and soft tissue grafting
- o Understanding of alloplastic materials used in reconstructive surgery o Familiarity with flap reconstruction
- o Competency in simple intraoral preprosthetic preparation and implant placement. Exposure to major preprostbetic and reconstructive surgery
- o Familiarity with the identification and management of complications
- Facial pain and temporomandibular disorders
 - o Understanding of the pertinent anatomy
 - o Understanding of the common types of facial pain, TMDs and their physiology
 - o Understanding of identification of TMD
 - Understanding of the multidisciplinary treatment of:racial pain and temporomandibular disorders
 - Exposure to temporomandibular joint surgery
 - o Competency in the performance and documentation of a sensory and motor examination of the HNF
 - o Competency in the performance and documentation of a detailed TMD examination.
 - o Familiarity with the identification and management of complications
- Maxillofacial infection.
 - o Understanding of the pertinent anatomy, microbiology and immunology
 - o Understanding of the use of antibiotic prophylaxis
 - Competency in the identification of maxillofacial infection including interpretation of imaging
 - Proficiency in the recognition of a potentially compromised airway and life threatening infection
 - Understanding of antibiotic therapy
 - o Understanding of the pathophysiology of sepsis
 - o Proficiency in the management of patients with simple odontogenic infection
 - o Competency in the management of patients with complex odontogenic infection
 - o Familiarity with sinus and salivary infection diagnosis and management
 - o Familiarity with the identification and management of complications

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SCOPE OF PRACTICE PGY-1 – PGY-4

- Practice based Learning and improvement
 - o Understanding of the use of information technology
 - o Competency in the use of databases, including Medline
 - o Understanding of the ability to analyze own practice for needed improvements, including QA and PI
 - o Understanding of the AAOMS Parameters of Care
 - o Understanding of the facilitation of learning of others
 - o Understanding of critical evaluation of the literature
- Systems based practice
 - o Understanding of the interaction of OMFS within the larger healthcare system, including documentation, medical record keeping, coding
 - o Understanding of the delivery of cost effective healthcare
 - o Understanding of the advocacy of patients within a healthcare system
- Acceptable performance on the OMSSAT and Mock Board examinations

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SCOPE OF PRACTICE PGY-1 – PGY-4

PGY-3

The PGY-3 oral and maxillofacial surgery resident rotates through plastic and reconstructive surgery and elective rotations. The PGY-3 resident becomes more independently involved in the surgical treatment of oral and maxillofacial surgery patients.

Fundamental duties are the same as those of PGY-1 and PGY-2 or al and maxillofacial surgery residents.

Direct supervision of the PGY-3 resident is necessary when a Swan-Ganz catheter is inserted into a patient in the surgical intensive care unit

More advanced operative procedures performed by PGY-3 oral and maxillofacial surgery residents under the direct supervision include the following:

Orthognathic surgery Reconstructive surgery Major trauma surgery Oral and maxillofacial pathology & fractures

By the completion of the PGY-3 year, the resident is expected to achieve the following stated level of skill or knowledge, as put forth in the Curriculum Guidelines in Oral and Maxillofacial Surgery, in the following categories:

- Anesthesia/pain management and anxiety control (upon completion of anesthesia rotation):
 - o In-depth knowledge of the anesthetic management of the healthy patient
 - o Understanding of the anesthetic management of the medically compromised patient
 - o In-depth knowledge of the pharmacology of the common analgesics and anxiolytics
 - o Proficiency in airway management
 - o Proficiency in pre-anesthetic assessment.
 - o Proficiency in the administration of anesthesia to pediatric and adult patients.
 - o In-depth knowledge of the various anesthetic agents, techniques and medications.
 - o Competency in fluid management and blood product replacement.
- Medical management of patients
 - o In-depth knowledge of the pathophysiology of the major disease processes
 - o In-depth knowledge of the pharmacology of commonly used drugs

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- o Proficiency in performance of history and physical exam and admission procedures
- o Proficiency in the interpretation of laboratory values, EKG and chest x-rays.
- o Competency in the perioperative management of the surgical patient
- Dentoalveolar surgery/basic surgical techniques
 - o In-depth knowledge of the pertinent anatomy
 - o Proficiency in the extraction of exposed teeth.
 - o Competency in the surgical removal of impacted teeth
 - o Proficiency with sterile and aseptic techniques
 - o Proficiency in the use of surgical

armamentarium

- o Understanding the principles of hemostasis
- o Proficiency with basic hard and soft tissue management and suturing
- o Proficiency in intraoperative surgical photography
- o Understanding of the identification and management of complications
- Maxillofacial trauma
 - o In-depth knowledge of the pertinent anatomy
 - o In-depth knowledge of the assessment and management of facial fractures including the interpretation of imaging studies.
 - o Proficiency in the management of dentoalveolar injuries.
 - o In-depth knowledge of the treatment of the basic facial fracture
 - o Understanding of the treatment of the complex facial fracture.
 - o Competency in the management of the severely injured patient
 - o Proficiency in management of soft tissue injuries.
 - o Understanding the identification and management of complications
- Skeletofacial deformities and cleft/craniofacial deformities
 - o In-depth knowledge of the pertinent anatomy
 - o Understanding of the growth and development and the genetics of the craniofacial skeleton
 - o Understanding of the identification of dentofacial and cleft/craniofacial deformities
 - o Understanding of the treatment planning of dentofacial and cleft/craniofacial deformities
 - o Competency in the multidisciplinary treatment of dentofacial and cleft/craniofacial deformities
 - o Competency in the basic surgical techniques for the correction of dentofacial and

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cleft/craniofacial deformities

- o Exposure to the surgical techniques for the correction of cleft/craniofacial deformities
- o Proficiency in cephalometric analysis

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SCOPE OF PRACTICE PGY-1 -PGY-4

- o Competency in model surgery
- o Proficiency in intraoral photography
- o Understanding of the identification and management of complications
- Facial aesthetic surgery
 - o In-depth knowledge of the pertinent anatomy
 - o Familiarity with changes of the aging face
 - o Familiarity with treatment planning for facial aesthetic surgery
 - o Competency in extraoral photography
 - o Familiarity with the identification and management of complications
- Maxillofacial pathology
 - o In-depth knowledge of the pertinent anatomy
 - o Understanding of the differential diagnosis of disease
 - o Proficiency in biopsy technique
 - o In-depth knowledge of normal histology
 - o Understanding of abnormal histology associated with disease processes
 - In-depth knowledge of the common soft and hard tissue lesions and their pathophysiology and identification
 - o Understanding of the uncommon soft and hard tissue lesions and their pathophysiology and identification
 - o Competency at basic definitive ablative surgery
 - o Exposure to involved definitive ablative surgery
 - o Understanding of the identification and management of complications
- Maxillofacial reconstruction (including implantology and preprosthetic surgery)
 - o In-depth knowledge of the pertinent anatomy
 - o Understanding of the prosthdontist's needs for prosthetic construction
 - o Understanding of principles and surgical techniques for soft and hard tissue recontouring and augmentation
 - o In-depth knowledge of the principles and surgical techniques for dental and maxillofacial implants
 - o Understanding of the basic biology of bone and soft tissue grafting
 - o Understanding of alloplastic materials used in reconstructive surgery o Understanding of flap reconstruction

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- o Proficiency in simple intraoral preprosthetic preparation and implantplacement
- o Competency at major preprosthetic and reconstructive Surgery
- o Understanding of the identification and management of complications
- Facial pain and temporomandibular disorders
 - o In-depth knowledge of the pertinent anatomy
 - o Understanding of the common types of facial pain, TMDs and their physiology
 - o Understanding of identification of TMD
 - Understanding of the multidisciplinary treatment of facial pain and temporomandibular disorders
 - o Competency at temporomandibular joint surgery
 - o Competency in the performance and documentation of a sensory and motor examination of the HNF
 - o Proficiency at the performance and documentation of a detailed TMD examination.
 - o Understanding of the identification and management of complications
- Maxillofacial infection.
 - o In-depth knowledge of the pertinent anatomy, microbiology and immunology
 - o In-depth knowledge of the use of antibiotic prophylaxis
 - o Proficiency in the identification of maxillofacial infection including interpretation of imaging
 - o Proficiency in the recognition of a potentially compromised airway and life threatening infection
 - o In-depth knowledge of antibiotic therapy
 - o In-depth knowledge of the pathophysiology of sepsis
 - o Proficiency in the management of patients with simple odontogenic infection
 - o Proficiency in the management of patients with complex odontogenic infection
 - o Understanding of sinus and salivary infection diagnosis and management
 - Understanding of the identification and management of complications
- Practice based Learning and improvement
 - o Understanding of the use of information technology
 - o Competent in the use of databases, including Medline
 - Understanding of the ability to analyze own practice for needed improvements, including QA and PI
 - o Understanding of the AAOMS Parameters of Care

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- o Understanding of the facilitation of learning of others
- o Understanding of critical evaluation of the literature
- Systems based practice
 - o Understanding of the interaction of OMFS within the larger healthcare system, including documentation. medical record keeping, coding
 - o Understanding of the delivery of cost effective healthcare Understanding of the advocacy of patients within a healthcare system
- Acceptable performance on the OMSSAT and Mock Board examinations

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SCOPE OF PRACTICE PGY-1 – PGY-4

PGY-4

The PGY-4 oral and maxillofacial surgery resident functions as the chief resident

Fundamental duties are the same as those of PGY-1, PGY-2, and PGY-3 or al and maxillo facial surgery residents.

More advanced operative procedures performed by PGY-4 or aland maxillofacial surgery residents under the direct supervision include the following:

Orthognathic surgery
Reconstructive surgery
Major traumasurgery
Tracheotomies
Cosmetic surgical procedures
Major oral and maxillofacial pathology surgery

By the completion of the PGY-4 year the resident is expected to achieve the following stated level of skill or knowledge, as put forth in the Curriculum Guidelines in Oral and Maxillofacial Surgery, in the following categories:

- Anesthesia/pain management and anxiety control (upon completion of anesthesia rotation):
 - o In-depth knowledge of the anesthetic management of the healthy patient
 - o In-depth knowledge of the anesthetic management of the medically compromised patient
 - o In-depth knowledge of the pharmacology of the common analgesics and anxiolytics
 - o Proficiency in airway management.
 - o Proficiency in pre-anesthetic assessment.
 - o Proficiency in the administration of anesthesia to pediatric and adult patients.
 - o In-depth knowledge of the various anesthetic agents, techniques and medications.
 - o Proficiency in fluid management and blood product replacement
- Medical management of patients
 - o In-depth knowledge of the pathophysiology of the major disease processes
 - o In-depth knowledge of the pharmacology of commonly used drugs
 - o Proficient in performance of history and physical exam and admission procedures
 - o Proficiency in the interpretation of laboratory values, EKG and chest x-rays.

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- o Competency in the perioperative management of the surgical patient
- Dentoalveolar Surgery/basic surgical techniques
 - o In-depth knowledge of the pertinent anatomy
 - o Proficiency in the extraction of exposed teeth.
 - o Proficiency in the surgical removal of impacted teeth
 - o Proficiency with sterile and aseptic techniques
 - o Proficiency in the use of surgical armamentarium
 - o In-depth knowledge of the principles of hemostasis
 - o Proficiency with basic hard and soft tissue management and suturing
 - o Proficiency in intraoperative surgical photography
 - o In-depth knowledge of the identification and management of complications
- Maxillofacial trauma
 - o In-depth knowledge of the pertinent anatomy
 - o In-depth knowledge of the assessment and management of facial fractures including the interpletation of imaging studies.
 - o Proficiency in the management of dentoalveolar juries.
 - o In-depth knowledge of the treatment of the basic facial fract1D'e
 - o In-depth knowledge of the treatment of the complex facial fracture.
 - o Proficiency in the management of the severely injured patient.
 - o Proficiency in management of soft tissue injuries.
 - o In-depth knowledge of the identification and management of complications
- Skeletofacial deformities and cleft/craniofacial deformities
 - o In-depth knowledge of the pertinent anatomy
 - In-depth knowledge of the growth and development and the genetics of the craniofacial skeleton
 - o In-depth knowledge of the identification of dentofacial deformities
 - o Understanding of the identification of cleft/craniofacial deformities
 - o In-depth knowledge of the treatment planning of dentofacial deformities
 - Understanding of the treatment planning of cleft/craniofacial deformities
 - o Proficiency in the multidisciplinary treatment of dentofacial deformities
 - o Competency in the multidisciplinary treatment of cleft/craniofacial deformities
 - o Proficiency in the basic surgical techniques for the correction of dentofacial deformities
 - Competency in the basic surgical techniques for the correction of cleft/craniofacial deformities

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- o Exposure to the surgical techniques for the correction of cleft/craniofacial deformities
- o Proficiency in cephalometric analysis
- o Proficiency in model surgery
- o Proficiency in intraoral photography
- o In-depth knowledge of the identification and management of complications
- Facial aesthetic surgery
 - o In-depth knowledge of the pertinent anatomy
 - o Understanding of the changes of the aging face
 - o Understanding of the treatment planning for facial aesthetic surgery
 - o Proficiency in extraoral photography
 - o Understanding of the identification and management of complications
- Maxillofacial pathology
 - o In-depth knowledge of the pertinent anatomy
 - o In-depth knowledge of the differential diagnosis of disease
 - o Proficiency in biopsy technique
 - In-depth knowledge of normal histology
 - o In-depth knowledge of abnormal histology associated with disease processes
 - o In-depth knowledge of the common soft and hard tissue lesions and their pathophysiology and identification
 - o Understanding of the uncommon soft and hard tissue lesions and their pathophysiology and identification
 - o Proficiency at basic definitive ablative surgery
 - o Competency at involved definitive ablative surgery
 - o Exposure to radical ablative surgery
 - o In-depth knowledge of the identification and management of complications
- Maxillofacial reconstruction (including implantology and preprosthetic surgery)
 - o In-depth knowledge of the pertinent anatomy
 - o In-depth knowledge of the prosthdontist's needs for prosthetic construction
 - o In-depth knowledge of principles and surgical techniques for soft and hard tissue recontouring and augmentation
 - In-depth knowledge of the principles and surgical techniques for dental and maxillofacial implants
 - o In-depth knowledge of the basic biology of bone and soft tissue grafting

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SCOPE OF PRACTICE PGY-1- PGY-4

- a In-depth knowledge of alloplastic materials used in reconstructive surgery
- o Understanding of flap reconstruction
- o Proficiency in simple intraoral preprosthetic preparation and implant placement
- a Proficiency at major preprosthetic and reconstructive surgery
- o In-depth knowledge of the identification and management of complications
- Facial pain and temporomandibular disorders
 - o In-depth knowledge of the pertinent anatomy
 - o Understanding of the common types of facial pain and its physiology
 - o In-depth knowledge of the common types of TMD and their physiology
 - o In-depth knowledge of identification of TMD
 - o Understanding of the multidisciplinary treatment of facial pain
 - o In-depth knowledge of the multidisciplinary treatment of temporomandibular disorders
 - o Proficiency at temporomandibular joint surgery
 - o Proficiency in the performance and documentation of a sensory and motor examination of the HNF
 - o Proficiency at the performance and documentation of a detailed TMD examination.
 - o In-depth knowledge of the identification and management of complications
- Maxillofacial infection.
 - o In-depth knowledge of the pertinent anatomy, microbiology and immunology
 - o In-depth knowledge of the use of antibiotic prophylaxis
 - o Proficiency in the identification of maxillofacial infection including interpretation of imaging
 - o Proficiency in the recognition of a potentially compromised airway and life threatening infection
 - o In-depth knowledge of antibiotic therapy
 - o In-depth knowledge of the pathophysiology of sepsis
 - a Proficiency in the management of patients with simple odontogenic infection
 - a Proficiency in the management of patients with complex odontogenic infection
 - o In-depth knowledge of sinus and salivary infection diagnosis and management
 - o In-depth knowledge of the identification and management of complications
- Practice based Learning and improvement
 - a In-depth knowledge of the use of information technology
 - o Competency in the use of databases, including Medline

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SCOPE OF PRACTICE PGY-1 – PGY-4

- In-depth knowledge of the ability to analyze own practice for needed improvements, including QA and PI
- o In-depth knowledge of the AAOMS Parameters of Care
- o In-depth knowledge of the facilitation of learning of others
- o In-depth knowledge of critical evaluation of the literature
- Systems based practice
 - o In-depth knowledge of the interaction of OMFS within the larger healthcare system, including documentation, medical record keeping, coding
 - o In-depth knowledge of the delivery of cost effective healthcare
 - o In-depth knowledge of the advocacy of patients within a healthcare system
- Acceptable performance on the OMSSAT and Mock Board examinations

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