## THE CONSORTIUM

# Overseas Registration Examination Part 2

### This may be helpful to know...

Examination results suggest some common mistakes. It may be a good idea to read through the following, and try to avoid these pitfalls.

#### 1. Management of caries

- 1.1 It has been observed that candidates are often poor at identifying and then deciding upon the size of a carious lesion in a tooth. The management of this tooth is then given as a list of all the possible treatment options rather than the most suitable treatment for that case for that level of caries.
- 1.2 In the management of caries in the adult, primary and mixed dentitions the treatment options offered by candidates are seen to be limited and poorly considered

#### 2. Advanced Treatment on teeth with poor prognosis.

Candidates seem unwilling to accept that a tooth may have reached its end point and then prescribe advanced and expensive care which will not have a long term future. Although patients may not wish to hear it extraction is sometimes the sensible option.

#### 3. Charting.

It has been observed that in the OSCE, candidates often perform badly with charting stations particularly when this is done from models.

#### 4. Airway management

Candidates sitting the ME examination tend to perform less well on questions about airway management and distress secondary to respiratory issues.

#### 5. Oxygen Cylinders

Some candidates appear to struggle with the oxygen cylinders in the ME, wasting time trying to open an already-open valve.

#### 6. Overlooking artefacts

Candidates sitting the DTP sometimes overlook one or more of the artefacts in the pack. Candidates are advised to look carefully at the checklist provided to confirm that all the artefacts are present.

#### 7. Answering the wrong question

It has been noticed that some candidates seem to guess what a question is about, perhaps because they know of a similar question from a previous exam sitting. Some candidates appear to read or listen attentively at the start only, then to answer without listening carefully to the rest of the information given to them.

This has often led to candidates scoring poor marks, because the question *may not be the one that they think it is* as questions are continuously revised and developed. Answering the question you THINK you have been asked may mean you fail to answer the question you have ACTUALLY been asked.

Candidates also need to be aware that a different version of a question may be introduced for the second day of the exam. It has been observed that day 2 candidates appear to be answering the day 1 questions, rather their own day 2 questions.

#### 8. Root canal therapy

Candidates appear to have difficulty in interpreting radiographs recorded during this exercise, particularly how far the instrument or GP is from the apex of the tooth, and then how to proceed clinically when the 'ideal' distance has not been achieved.

The canal preparation is frequently carried out without adequate irrigation and recapitulation. Instruments are then not cleaned of debris before returning them to the canal transferring debris which then results in canal blockage.

#### 9. Diagnosis and Treatment Planning

It is reasonable to refer a patient to a specialist when a treatment option is outside the candidate's capability or experience. However it is expected that the candidate will give the patient some idea of what to expect and why the referral is needed.

#### 10. Treatment Options

The patients, in the OSCEs and DTP, have dental problems which are specific to them and for which you need to provide information or a treatment plan. Candidates are advised that they should provide relevant information to their patient ranked in order of importance for that patient, rather than a list or a short lecture.

#### 11. AED

During the ME the request for an AED should be made as the test simulates the real world where one may be present.

#### 12. Management of Staff

It is essential that candidates should know their responsibilities and the procedures to follow when managing inappropriate behaviour or poor performance of staff.

### 13. Management of Patients undergoing medical treatments which may affect their dental care

Candidates should be aware when a patient is to undergo radiotherapy or is receiving medications which may give rise to modifying their dental treatment.

#### 14. Partial Denture Design

When asked to comment upon a denture design, candidates should check every component carefully to ensure that it is appropriate and functional i.e. are claps placed into a suitable appropriate undercut; are the rest seats in a suitable position?

15. The Dental Team – scope of practice It is essential that candidates understand the importance of team working when providing dental care and are aware of the scope of practice of all dental health care professionals.

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