



Royal College of  
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*Ensuring Continued Trust*

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## ORAL EXAMINATION – FRIDAY, NOVEMBER 18, 2011

### Overview

Candidates must have successfully completed the written examination to be able to proceed to the oral examination. The dialogue format of the oral examination allows the candidate to further demonstrate his or her ability to assess and manage a wide range of patients presenting for anaesthesia treatment, as well as effectively communicate these issues with both patients and colleagues.

It's recognized that while there might be differences in the didactic training and clinical experience between residency programs and that there may be multiple approaches to anaesthetic management, the ability to analyze and act expediently in all situations is seen as fundamental in clinical practice.

The oral examination encompasses several aspects of anaesthetic management, including preoperative assessment, intraoperative management, and management of emergencies.

### Conduct of the Exam

The oral examination is organized into three separate sessions with each session covering a general topic outlined below. Each session lasts approximately 40 minutes, is conducted by two examiners, and will involve two or more cases. **Please note that these sessions will be videotaped.**

The order of the sessions varies from candidate to candidate and there may be a wait period between sessions. Candidates will be given case scenarios which they may briefly review, and will be asked to describe their rationale for management of each scenario. As each case scenario progresses, the candidate may request additional relevant information to aid in their assessment. The focus of each discussion may also change as new issues develop in a given case.

**Session Topics***Preoperative Evaluation*

This section assesses the thought processes by which the candidate determines the anaesthetic risk and possible modifications to anaesthetic management for patients with various medical and physical conditions. Several case scenarios will be presented. For each case scenario presented, information will be available to the candidate including expanded medical history information, physical examination findings, results of diagnostic tests, and other related information, only as it is requested by the candidate.

*Intraoperative Management*

This section assesses the decision-making process by which the candidate conducts safe and appropriate anaesthetic care for different types of dental, oral or maxillofacial surgical procedures, including adjunctive procedures such as iliac crest bone graft or costochondral graft harvest, for patients of varying medical complexity in both office-based as well as operating room settings. Discussion may include advantages and disadvantages of different anaesthetic plans and techniques as well as monitoring options and preparations for anticipated complications. Two or more cases will be presented.

*Emergency management*

This section focuses on the recognition and management of a variety of acute emergencies and complications that may occur at any time during the perioperative experience. These may include, for example, airway emergencies, unfavourable medication reactions, and/or unexpected physiologic responses. Two or more cases will be presented.

**Grading**

Grading is done separately by each examiner; then scores are averaged for a final score for each session. A minimum final score of 4 in each session is required for an overall passing grade. A score of less than 4 in any single session will result in failure of the oral examination.

The grading scale is as follows:

- 7 = outstanding performance
- 5 = acceptable performance with non-critical errors or omissions
- 3 = problematic performance with excessive non critical errors or omissions
- 1 = weak performance with critical error(s)

**Points to Consider by the Candidate**

While a solid base of factual knowledge is necessary, the ability to apply that knowledge clinically and adapt appropriately is seen as most important for the successful completion of this examination.

It is hoped that the candidate can comfortably anticipate and manage deviations from normal routine anaesthetic care. It is also important for the candidate to communicate his or her thoughts to the examiners clearly and effectively. Otherwise, it can be difficult for the examiners to evaluate the candidate. For example, extremely slow responses, or excessive questioning of examiners, may not allow enough time for the full examination, and may not give the examiners enough information to adequately assess the candidate and lead to failure.

Candidates should also be able to reasonably, concisely and clearly communicate and defend a course of action.

***All information contained within these pages is subject to change. Your application will be governed by the Regulations and By-laws/policies in place at the time of submission.***