

FULL MEMBERS PRESENTATION PROTOCOL

The first step is to approach 2 Full Members to act as your guides and coaches. A good starting point is the members who supported your application for Associate Membership.

You will need to have your presentation approved by your mentors prior to submitting to the Preview Committee. The Committee will decide whether to allow you to proceed further or whether further changes are necessary. Refer to the Constitution, Chapter 1 Membership Section 2(2).

The presentation will be 30 to 45 minutes in duration.

The basis of the presentation is to provide three cases highlighting both clinical and laboratory work.

All three cases must show a diagnosis based on clinical examination and investigations. A detailed plan of treatment must be provided.

This plan must also include alternative treatment options that could have been utilised for that particular case and you must show why one option was chosen over other options.

The treatment of the cases needs to be detailed and include a step-by-step account of the sequence of treatment with clear and accurate photographs.

The final outcome must be shown clearly and include a retrospective analysis of the treatment; identifying any weaknesses and what could have been done differently.

All treatment decisions must be backed by literature references. The onus is on you to understand all the references quoted and be fully prepared for the question and answer session, which follows their presentation for 10-15 minutes.

The list below provides a **guideline** on the format as well as the inclusion of relevant data for all presentations. It is by no means comprehensive nor will all the data provided necessarily be required in any one case presentation.

Relevant patient details:

Age, Sex and relevant Medical History. Chief complaint, or dental problem requiring treatment.

Clinical examination and outcome.

Intraoral and extraoral examination

TMJ and occlusal analysis

Outcome of examination, current status and **diagnosis**.

Additional investigations:

Radiographic examination, CT as appropriate

Mounted study casts, conventional or digital.

Smile design.

Digital Smile Design.

Any other relevant investigations and outcomes of significance.

Initial treatment:

Removal of pathology.

Diagnostic treatment such as:

Stablishing Oral health.

Provisional restorations.

Any other procedures deemed necessary at this stage.

Details of treatment and sequence of treatment:

Non-surgical treatment:

Endodontics.

Orthodontics.

Bleaching.

Any other procedures deemed necessary.

Surgical treatment:

Extractions.

Surgical endodontic treatment.

Periodontal surgery.

Augmentation.

Implant placement.

Soft tissue surgery.

Any other procedures deemed necessary.

Definitive treatment Restorative phase:

Impressions, conventional or digital.

Bite registration.

Try-in.

Bisque porcelain try-in.

Fitting of definitive restoration.

Final occlusal analysis and adjustment.

Any other procedures provided.

Maintenance and monitoring protocol:

Radiographs.

Clinical review.

Hygienist appointment sequence.

Occlusal splint.

Any other procedures deemed necessary.