

SYLLABUS

COURSE: DEPS 2963 Pediatric Dentistry II: Treatment Modalities
SEMESTER: Spring
CREDIT HOURS: 2.0

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GOAL

This course will introduce restorative techniques, both cavity preparation and restoration placement, in primary teeth as well as young permanent molars. In the laboratory section you will learn to prepare primary teeth for the most common types of restorations currently utilized in pediatric dentistry with emphasis placed on the differences necessary for primary vs. permanent teeth. The space maintenance portion of this course will provide you with indications and contraindications to various space maintainers. The laboratory sections will teach the proper construction of these appliances. Diagnosis, treatment planning and proper treatment of pulpal problems in the primary and early mixed dentition will be discussed. Recognition of gingival and periodontal problems as well as hard and soft tissue lesions in children will be presented. In the final presentations, diagnosis and treatment planning, which will involve a series of comprehensive case presentations, is emphasized. This will prepare you to become competent in the formulation of a comprehensive treatment plan for the children that you will be treating in the dental clinic.

OBJECTIVES

I. CARIES RESTORATIVE TECHNIQUES

A. Principles of Tooth Preparation and Anatomic Considerations

1. State the main considerations with regard to size and shape of the primary tooth crown when planning caries restorations.
2. State the main considerations with regard to size and shape of the pulp of primary teeth when planning caries restoration.
3. State the main considerations with regard to the size and shape of the contact area of primary teeth when planning caries restoration.

B. Blacks' Classification of Lesions

1. List and describe each of G.V. Black's classification of lesions.

C. Class I Cavity Preparation

1. Describe the location and incidence of Class I carious lesions.
2. Describe the principles of the Class I cavity preparation in primary teeth. The discussion should be based on:
 - 2.1 comparison to the Class I cavity preparation for permanent teeth
 - 2.2 the depth and shape of the pulpal wall, the isthmus width, extensions into grooves and fissures, and orientation of the walls
 - 2.3 pulpal consideration
3. Describe the cavity preparations for the mandibular left second primary molar and the maxillary right second primary molar. this description should include:
 - 3.1 pertinent morphologic features of each tooth

D. Preventive Resin Restoration

1. List the indications for a preventive resin restoration.
2. Describe the technique for the placement of a preventive resin restoration.

E. Class II Cavity Preparation

1. Describe the location and incidence of Class II carious lesions.
2. Describe the principle of the Class II cavity preparation in primary teeth. The description should include:
 - 2.1 comparison to the Class II cavity preparation for permanent teeth
 - 2.2 the size of the isthmus, the location and orientation of all walls, and the reverse curve
 - 2.3 pulpal considerations

F. Class III Cavity Preparation

1. Describe the location and incidence of Class III carious lesions.
2. Describe the principles of the Class III cavity preparations. This description should include:
 - 2.1 consideration given to the size of the teeth
 - 2.2 consideration given to the thickness of enamel
 - 2.3 consideration given to the size of the pulp
 - 2.4 access when there is open contact
 - 2.5 access when the teeth are in contact
 - 2.6 retention for incipient versus large carious lesions
 - 2.7 use of the dovetail

G. Stainless Steel Crown Preparation

1. Compare and contrast the stainless steel crown to a custom crown. Describe the types of stainless steel crown available.
2. Describe the anatomical considerations of stainless steel crown placement especially in reference to:
 - 2.1 the primary pulp
 - 2.2 the primary occlusion
 - 2.3 the primary contact points
 - 2.4 the anatomy of the primary molars in the gingival 1/3
 - 2.5 the gingiva in the primary dentition
3. List the indications for a stainless steel crown preparation and placement.
4. Describe in detail the features of a stainless steel crown preparation.
5. Describe the "window preparation" in an open faced anterior stainless steel crown.

H. Restoration Placement

1. Describe the indications and technique for adapting and removing the T-band matrix and wedge.
2. Describe the technique used for placement of an amalgam restoration.
3. Describe the indications and contraindications for use of the following restorative materials in restoration of carious lesions.
 - 3.1 posterior glass ionomer/silver restorations
 - 3.2 posterior composite resin restorations
 - 3.3 preventive resin restorations
4. Stainless steel crowns
 - 4.1 List the types of crown available.
 - 4.2 List the dimensions considered when selecting a crown.
 - 4.3 Describe the correct location of the margin of a crown and the margin adaptation sought.

- 4.4 Define contouring of a stainless steel crown and give the reasons for contouring. State which pliers are used for this purpose.
- 4.5 Define crimping and give the reasons for crimping a crown. State which pliers are used for this purpose.
- 4.6 State which plier is used to produce contact. Describe the reason for establishing contact.
- 4.7 State how a crown is seated and removed.
- 4.8 Describe the technique used for smoothing, finishing and polishing the surface of a crown. Describe the technique used for cementation of a stainless steel crown.

II. SPACE MAINTENANCE

A. Mixed Dentition

1. State the sequence of eruption of permanent teeth.
2. Compare the size of primary teeth to their succedaneous, individually and the total sum of each arch.

B. Effect of Premature Loss of Primary Teeth

1. Describe how and why the premature loss of primary teeth can result in malocclusion.

C. Nance's Leeway Space

1. State its average dimension.
2. Describe its significance.

D. Space Management vs. Space Maintenance

1. Describe how and why maintaining space for an individual tooth may not prevent a malocclusion.
2. Describe the effect of a premature loss of a primary tooth on the eruption of its successor.

E. Advantages and Disadvantages of the Different Space Maintainers

1. List advantages and disadvantages of:
 - 1.1 band and loop
 - 1.2 fixed space maintainers
 - 1.3 removable space maintainers

F. Causes of Space Maintainer Failure

1. List defects of fabrication that may cause failure.
2. Describe importance of compliance.

III. COMMON PEDIATRIC MALOCCLUSIONS

- A. Name the most common pediatric malocclusions.
- B. Posterior Crossbites
 - 1. Describe the different types of posterior crossbites.
- C. Treatment of Posterior Crossbites
 - 1. Discuss the difference in treatment according to dental age of child.
 - 2. Describe the appliances used and their indications.
 - 3. Discuss the differences between slow and rapid expansion and their indication.
- D. Anterior Crossbites
 - 1. Describe the different types of anterior crossbites.
 - 2. Discuss differential diagnoses and the prognosis of each.
- E. Treatment of Anterior Crossbites
 - 1. Discuss scope and limitations of treatment of certain anterior crossbites.
 - 2. Describe appliances that might be used.
 - 3. Describe the possibility of treatments in addition to orthodontics.

IV. DIAGNOSIS AND TREATMENT PLANNING

- A. Describe the value of a case history.
 - 1. Describe the commonly used outline in taking a medical history. The discussion should be based on:
 - 1.1 chief complaint
 - 1.2 present illness
 - 1.3 past medical and dental history
 - 1.4 family history
 - 1.5 personal and social history
 - 1.6 review of systems
 - 2. Describe the influence of the past dental history on your present treatment plan. Discussion should be based on:
 - 2.1 frequency of visits
 - 2.2 frequency of dental prophylaxis
 - 2.3 past experience during and after anesthesia
 - 2.4 past experience during and after extractions
 - 2.5 dental appliance history
 - 2.6 extent of dental treatment
 - 2.7 behavior
 - 2.8 expectations of the past dental treatment

B. Systematic Soft Tissue Examination

1. State the objective of lip inspection and palpation. Explain the significance of changes in lip color.
2. Describe the technique for examination of the vestibular and labial buccal mucosa. Describe the clinical manifestations and etiology of:
 - 2.1 candidiasis
 - 2.2 herpes gingivostomatitis
 - 2.3 aphthous ulcers
 - 2.4 trauma
3. Describe the normal texture, and color of the buccal mucosa. List some variations according to the different races.
4. Describe the objective of labial and lingual frenum examination. Compare the location of the labial frenum and its changes with the eruption of the permanent incisors. Describe the appearance and effect of an abnormal labial frenum.
5. List and describe the sequential steps in examining the palate. Discuss the structures to be included when proceeding to the palate examination. Describe their normal anatomical appearance.
6. Describe possible pathologic changes associated with hard and soft palate examination, such as:
 - 6.1 abscess
 - 6.2 salivary gland tumor
 - 6.3 trauma
 - 6.4 cleft palate
7. Describe the method of examination of the tonsillar area. Describe some abnormal findings that could be present during oropharynx examination.
8. Describe the method of examination of the floor of the mouth. List the structures that occupy the floor of the mouth. Describe the location, etiology and clinical manifestations of a ranula.
9. List the different structures to be considered during tongue examination. Describe the etiology and clinical manifestations of:
 - 9.1 macroglossia
 - 9.2 ankyloglossia
 - 9.3 fissured tongue
 - 9.4 black hairy tongue
 - 9.5 geographic tongue
 - 9.6 median rhomboid glossitis
 - 9.7 crenation
 - 9.8 white strawberry tongue
 - 9.9 coated tongue
10. List anatomical differences between child and adult gingiva.

C. Describe the method of hard tissue examination.

1. Describe the developmental anomalies of the dentition. Discussion should be based on the clinical manifestations of:
 - 1.1 anomalies of number
 - 1.2 anomalies of size
 - 1.3 abnormalities of structure
 - 1.4 abnormalities size and shape
 - 1.5 abnormality of color
2. State the normal eruption process.
3. Describe the normal and healthy gingiva. Discussion should be based on:
 - 3.1 color
 - 3.2 form
 - 3.3 density
 - 3.4 level of epithelial attachment
 - 3.5 depth of gingival crevice
 - 3.6 level of epithelial attachment
 - 3.7 mobility of teeth

D. Value of Occlusal Examination

1. State the criteria for an ideal pediatric frontal face pattern. Describe the proper patient's head position for evaluation of the frontal face.
2. State the criteria for an ideal pediatric facial profile pattern. Describe the proper patient's head position for evaluation of the facial profile.
3. Describe the three distinct types of normal molar relationship.
4. Describe the growth and pattern of occlusion. The discussion should be based on:
 - 4.1 ideal static occlusion pattern
 - 4.2 ideal dental arch pattern
 - 4.3 environmental factors affecting the dental arch status

E. Effect and Treatment of Oral Habits

1. Define the term bruxism.
 - 1.1 state the intraoral findings associated with bruxism
 - 1.2 describe the therapeutic approach to modify the behavior
2. Describe the effect of the sucking habit on the:
 - 2.1 maxillary and mandibular bones
 - 2.2 dental arches
3. State when is the appropriate time to correct this oral habit.
4. Describe the etiology of tongue thrust. State the role of myofunctional therapy in correction of tongue thrust and swallowing habit.
5. State the effect of the use of a pacifier after the age of two.

- F. Describe the relationship between diagnosis and treatment planning.
1. Describe in detail the significance of the medical diagnosis on the dental treatment plan.
 2. Describe the relationship between the diagnosis and the etiology of oral disease.
 3. Explain the problem of treatment without diagnosis.
 4. List the reasons for having an itemized sequential treatment plan.
 5. Describe the variables which must be taken into account when considering the proper treatment sequence.
- G. Describe the Importance of a Preventive Treatment Plan
1. State the significance of preventive dental care.
 2. State the present fluoride recommendations. Describe the proper fluoride supplementation requirements, based on the assessed fluoride content of drinking water.
 3. Describe the age-specific home oral hygiene instructions. The discussion should be based on age categories:
 - 3.1 prenatal counseling
 - 3.2 infants
 - 3.3 toddlers
 - 3.4 preschool
 - 3.5 school age
 - 3.6 adolescents

V. TUMORS AND ORAL SOFT TISSUE CYSTS

A. Benign Oral Soft Tissue Enlargements

1. Describe the clinical features of squamous papilloma/verruca vulgaris.
 - 1.1 etiology
 - 1.2 location
 - 1.3 appearance
 - 1.4 treatment and prognosis
2. Describe the clinical features of a fibroma and pyogenic granuloma.
 - 2.1 etiology
 - 2.2 location
 - 2.3 appearance
 - 2.4 treatment and prognosis
3. Compare the clinical features of hemangioma and lymphangioma.
 - 3.1 type of lesion
 - 3.2 location
 - 3.3 appearance
 - 3.4 treatment and prognosis

3.5 potential complications

4. Describe the clinical features of congenital epulis of the newborn (congenital granular cell tumor).

- 4.1 type of lesion
- 4.2 gender predilection
- 4.3 location
- 4.4 appearance
- 4.5 treatment and prognosis

5. Compare the clinical features of mucocele and ranula.

- 5.1 etiology
- 5.2 location
- 5.3 appearance
- 5.4 treatment and prognosis

B. Benign Cysts and Tumors of the Jaws

1. Describe the clinical features of neonatal cysts.

- 1.1 type of lesion
- 1.2 location
- 1.3 signs and symptoms
- 1.4 treatment and prognosis

2. Describe the clinical features of dentigerous cyst.

- 2.1 etiology
- 2.2 location
- 2.3 signs and symptoms
- 2.4 radiographic findings
- 2.5 treatment and prognosis
- 2.6 potential complications

3. Describe the clinical features of eruption cyst/hematoma.

- 3.1 etiology
- 3.2 location
- 3.3 signs and symptoms
- 3.4 radiographic findings
- 3.5 treatment and prognosis

4. Describe the clinical features of odontogenic keratocyst.

- 4.1 etiology
- 4.2 location
- 4.3 signs and symptoms
- 4.4 radiographic findings
- 4.5 treatment and prognosis
- 4.6 associated syndrome

5. Describe the clinical features of the odontoma.
 - 5.1 etiology
 - 5.2 location
 - 5.3 signs and symptoms
 - 5.4 radiographic findings
 - 5.5 treatment and prognosis

C. Oral Mucosal Diseases

1. Compare the clinical features of primary and secondary herpes simplex virus infections.
 - 1.1 cause
 - 1.2 location
 - 1.3 signs and symptoms
 - 1.4 treatment and prognosis
 - 1.5 potential complications
2. Describe the clinical features of recurrent aphthous ulcer.
 - 2.1 cause
 - 2.2 location
 - 2.3 signs and symptoms
 - 2.4 treatment and prognosis
3. Describe the clinical features of candidiasis.
 - 3.1 cause
 - 3.2 appearance
 - 3.3 treatment and prognosis
4. Describe self-mutilation lesions
 - 4.1 cause
 - 4.2 appearance
 - 4.3 treatment and prognosis

D. Gingival and Periodontal Disease

1. Describe the types of childhood gingivitis.
 - 1.1 cause
 - 1.2 appearance
 - 1.3 treatment and prognosis
2. Describe the clinical features of acute necrotizing ulcerative gingivitis.
 - 2.1 cause
 - 2.2 signs and symptoms
 - 2.3 treatment and prognosis
3. Compare gingival fibromatosis with drug-induced gingival hyperplasia.
 - 3.1 cause
 - 3.2 appearance

- 3.3 treatment and prognosis
- 4. Compare prepubertal periodontitis with juvenile periodontitis.
 - 4.1 cause
 - 4.2 age of onset
 - 4.3 signs and symptoms
 - 4.4 treatment and prognosis
- 5. Describe the clinical features of Papillon-Lefèvre syndrome.
 - 5.1 cause
 - 5.2 age of onset
 - 5.3 signs and symptoms
 - 5.4 treatment and prognosis
- 6. Describe the clinical features of Langerhans' cell histiocytosis.
 - 6.1 cause
 - 6.2 variants of disease
 - 6.3 signs and symptoms
 - 6.4 radiographic findings
 - 6.5 treatment and prognosis
- 7. Describe the clinical features of cyclic neutropenia.
 - 7.1 cause
 - 7.2 age of onset
 - 7.3 signs and symptoms
 - 7.4 treatment and prognosis
- 8. Describe the clinical features of hypophosphatasia.
 - 8.1 cause
 - 8.2 age of onset
 - 8.3 signs and symptoms
 - 8.4 treatment and prognosis
- 9. Describe the typical findings of abnormal frenum attachment.
 - 9.1 cause
 - 9.2 potential complications
 - 9.3 treatment approaches

VI. DEEP CARIOUS LESIONS, PULPAL THERAPY

A. Diagnostic Aids in the Selection of Teeth for Vital Pulp Therapy

- 1. State the value of each of the following diagnostic aids and their interpretation in the selection of teeth for vital pulp therapy.
 - 1.1 history of pain
 - 1.2 clinical signs and symptoms
 - 1.3 radiographic interpretation
 - 1.4 pulp testing
 - 1.5 physical condition of the patient

- B. Evaluation of Treatment Prognosis before Pulp Therapy
1. Discuss treatment considerations that are taken into consideration when deciding teeth that might be selected for pulp therapy.
- C. Treatment of the Deep Carious Lesion
1. Explain the indications, contraindications and procedure for performing indirect pulp treatment.
- D. Vital Pulp Exposure
1. Explain how the size of the exposure and pulpal hemorrhage are used in the diagnosis when deciding vital pulp exposure pulp treatment.
 2. Discuss Guthrie's study as to the value of the hemogram of the dental pulp as a diagnostic aid in determining pathologic or degenerative changes in the pulp.
- E. Vital Pulp Therapy Techniques
1. Be able to define and describe the procedure (technique) for the following vital pulp therapies:
 - 1.1 direct pulp capping
 - 1.2 pulpotomy
 - 1.3 calcium hydroxide pulpotomy
 - 1.4 formocresol pulpotomy
 - 1.5 partial pulpectomy
- F. Non-vital Pulp Therapy Technique
1. Define and describe the technique for performing a complete pulpectomy
- G. Summary of Pulp Therapy Philosophy
1. Describe the thought process that a dentist must go through in selecting the proper treatment of the pulp.
- H. Formulation of Pulp Status Diagnosis from Health and Dental Histories
1. Explain the dental procedure you would perform to correct the problem identified in the pulp status diagnosis and justify your choice of treatment.
 2. List each specific step required in the procedure and explain its purpose.
- I. Restoration of the Pulpally Involved Tooth
1. Describe several types of restorations used for teeth that have had pulp treatment and give the rationale for their use.
 2. Explain the importance of placing the proper restoration on these treated teeth.
- J. Reaction of the Pulp to Various Capping Materials
1. Describe the pulpal reaction to the following capping materials

- 1.1 zinc oxide-eugenol
- 1.2 calcium hydroxide
- 1.3 preparations containing formalin
- 1.4 glutaraldehyde
- 1.5 other experimental capping materials and methods

K. Failures after Vital Pulp Therapy

- 1. Describe reasons as to the failure in the formation of a calcified bridge after vital pulp therapy.
- 2. Describe the significance of internal resorption after the pulpotomy procedure. Explain histologically the process of internal resorption.
- 3. Describe the significance of alveolar abscess formation following pulp therapy.

L. Early Exfoliation or Over Retention of Primary Teeth with Pulp Treatments

- 1. Explain the reason for early exfoliation of primary teeth with pulp treatments.
- 2. Explain the reason for over retention of primary teeth with pulp treatments.

VII. LOCAL ANESTHETICS FOR CHILDREN

A. Medical History Reviews and ASA Classifications

- 1. List the questions and the significance of the questions asked during the medical history review.
- 2. Define the ASA classification.

B. Local Anesthetic Techniques for Children

- 1. Learn to calculate the proper dose of local anesthetic used in treating children.
- 2. Describe the following nerve blocks and when each is used in treating children:
 - 2.1 inferior alveolar nerve block
 - 2.2 lingual nerve block
 - 2.3 long buccal nerve block
 - 2.4 nasopalatine nerve block
 - 2.5 infraorbital and mental nerve blocks
- 3. Describe the following infiltration procedures and when each is used in treating children:
 - 3.1 infiltration for mandibular molars
 - 3.2 infiltration for mandibular incisors
 - 3.3 infiltration for maxillary incisors and cuspids – both primary and permanent
 - 3.4 infiltration for maxillary premolars and primary molars
 - 3.5 infiltration for maxillary molars

4. Describe the complications from the administration of a local anesthetic and the treatment of each of the following:
 - 4.1 anesthetic toxicity
 - 4.2 soft tissue trauma

VIII. SURGICAL PROCEDURES IN CHILDREN

A. Ectopic Eruptions and Treatment

1. Describe ectopic eruptions. The description should be based on the following various locations:
 - 1.1 first permanent molar
 - 1.2 permanent mandibular lateral incisor
 - 1.3 cleft lip and palate
2. List the possible causes of ectopic eruptions in the locations as described in 1.1, 1.2, and 1.3.
3. List and describe appliances used to treat these ectopic eruptions.

B. Anterior Diastema and Treatment

1. Describe an anterior diastema.
2. List the possible causes of the condition.
3. Describe the treatment with particular emphasis on the timing of the treatment.

C. Morphology of Primary Teeth - Extraction Procedures

1. Describe the differences in the morphology of primary teeth which would be a consideration in the extraction technique.
2. Discuss how the extraction of primary teeth is accomplished with regard to these anatomical differences.
3. Discuss the conditions when a fractured root of a primary molar is not removed.

D. Sectioning Technique in Removal of Primary Molars

1. Draw a diagram and discuss the technique of the sectioning of a primary mandibular molar.
2. Draw a diagram and discuss the technique of the sectioning of a primary maxillary molar.

E. Ankylosis of Primary Teeth

1. Define and describe ankylosis of primary teeth. The description should be based on:
 - 1.1 clinical appearance
 - 1.2 radiographic appearance
 - 1.3 clinical tests

2. List the possible etiology of ankylosed primary teeth.
3. Describe the treatment of ankylosed primary teeth with particular regard to the timing of the treatment.

F. Antibiotic Therapy for Children

1. Discuss antibiotic therapy for acute dental infections in children. Discussion should include:
 - 1.1 Recognition of acute dental infection
 - 1.2 Choosing antibiotic and child's dose
 - 1.3 Writing the prescription
2. Discuss antibiotic therapy for chronic dental infections in children. Discussion should include the differences between chronic and acute infection.
3. Be able to calculate a child's dose of a medication using
 - 3.1 Clark's rule
 - 3.2 Young's rule
 - 3.3 Manufacturers information
 - 3.4 Understand the difference between the above methods.
4. Discuss the use of antibiotic therapy for SBE coverage. The discussion should include:
 - 4.1 which medical conditions require antibiotic SBE coverage
 - 4.2 which dental treatment requires SBE coverage
 - 4.3 the choice of antibiotics, dose, and times
 - 4.4 prescription writing

G. Supernumerary Teeth

1. Identify and be able to recognize supernumerary teeth in the child patient including their location.
2. Describe the surgical procedure for removal of supernumerary teeth.
3. Discuss the timing in the removal of supernumerary teeth.

H. Dental Opercula

1. Describe dental opercula. The description should include:
 - 1.1 the various locations where they occur
 - 1.2 the physical appearance of the opercula
2. Discuss the treatment of dental opercula. The discussion should include:
 - 2.1 when to treat
 - 2.2 methods of treatment

RESOURCES

I. Media Resources

A. Printed Media

1. Required textbook

McDonald, R.E. and Avery, D.R.
Dentistry for the Child and Adolescent
Mosby, 8th Ed., 2004

2. Journals

Guidelines for Prescribing Dental Radiographs
Pediatric Dentistry-Special Issue,
Ref. Manual 1999-2000, Vol. 15, #5, page 60.

3. Monograph

Pediatric Dentistry II
UTHSC - Dental Branch, 2004

B. Non-Printed Media

1. Videotapes

Smith, W.W.
Indications for Stainless Steel Crown Placement, Preparation of Primary Molar for Stainless Steel Crown Placement
Catalog #1254

Jennings, G.S.
Class I and Class II Amalgam Preparations
Catalog #1216

Donly, K.J.; Statmann, R.G.; Simonsen, R.J.
Preventive Resin Restoration, Vivadent Synchronized Systems for Restorative Dentistry
Catalog #1252

Dr. Joel Berg
Examination of the Child Dental Patient
Catalog #1250 (22 min.)

Rick Geggenhimer, SDT
Trimming and Polishing Study Models
Catalog #1251 (12 min.)

2. Preparation Models - (available from faculty)

II. Human Resources

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STUDY PLAN AND REQUIREMENTS

The schedule below indicates all required assignments for this course.

DEPS 2963-PEDIATRIC DENTISTRY II 2007 Spring Semester Schedule

Friday: Lectures, 8:00-8:50 am; Labs, 9:00-11:50 am

Date	Lecture Topic / Reading Assignments	Presenter
Jan. 5 and Jan. 12	<p>Caries Restorative Techniques, Restoration Placement <u>Required Textbook</u> <i>Dentistry for the Child and Adolescent</i> (pp. 384-408) <u>Monograph – Pediatric Dentistry II</u> Caries Restorative Technique, Restoration Placement Posterior Glass Ionomer/Silver Restorations Posterior Composite Resin Restorations <u>Videotapes</u> Catalog #1254 (6 min.) <i>Indications for Stainless Steel Crown Placement, Preparation of Primary Molar for Stainless Steel Crown Placement</i> Catalog #1216 (8 min.) <i>Class I and Class II Amalgam Preparations</i> Catalog #1253 (6 min.) <i>Preventive Resin Restoration, Vivadent Synchronized Systems for Restorative Dentistry</i></p>	Yarkhan
Jan 19 and Jan 26	<p>Pulp Therapy in the Primary and Early Mixed Dentition <u>Required textbook</u> <i>Dentistry for the Child and Adolescent</i> (Ch.19;pp:413-440) <u>Videotape</u> Formocresol Pulpotomy (Catalog #1223 – 24 min) Monograph Pediatric Dentistry I (pp:28-37)</p>	Salama
Feb 02	ONE-HOUR EXAMINATION FOR SESSIONS 1 – 4 Room 207	Faculty
Feb 09 and Feb 16	<p>Normal Occlusion, Space Maintainers and Common Pediatric Malocclusions. <u>Required Textbook</u> <i>Dentistry for the Child and Adolescent</i> (Ch.27; pp:677-741) <u>Monograph – Pediatric Dentistry II - Space</u></p>	Wild
Feb 23 and Mar 2	<p>Common Hard and Soft Tissue Lesions in Children <u>Required Textbook</u> <i>Dentistry for the Child and Adolescent</i> (pp. 151-177^a, 148-165^b)</p>	Tate
Mar 9	Texas Independence Day (No class)	
Mar 16	<p>Local Anesthesia, Prescription Writing and Surgical Procedures in Children. <u>Required Textbook</u> <i>Dentistry for the Child and Adolescent</i> (pp. 283-296)</p>	Harpavat

Date	Lecture Topic / Reading Assignments	Presenter
Mar 19-23	<i>Spring Break</i>	
Mar 30	ONE HOUR EXAMINATION for Sessions 5-8 Rooms 132/340	Faculty
Apr 6	Case Presentation Seminars	Tate, Wild, Salama, Yarkhan, Harpavat
Apr 13	Case Presentation Seminars	Tate, Wild, Salama, Yarkhan, Harpavat
Apr 20	Case Presentation Quiz	Yarkhan Harpavat
Apr 27	Course Evaluation Review for Final Examination	Faculty
May 4 1-2:50 pm	Comprehensive Final Examination Room 207	Faculty

- a. *Dentistry for the Child and Adolescent*, 7th Edition
By Ralph E. McDonald, DDS, MS, LLD, David R. Avery, DDS, MSD
- b. *Dentistry for the Child and Adolescent*, 8th Edition
By Ralph E. McDonald, DDS, MS, LLD, David R. Avery, DDS, MSD and Jeffrey A Dean, DDS, MSD

**Laboratory Schedule for 2963
Spring 2007**

Date	Laboratory Exercise	Quiz
Jan 5	Class I Amalgam (# L) Class II (prep and rest) (#K) PRR (prep and rest) (#14)	No quiz
Jan 12	Class II Amalgam (MO & OL) (prep and rest) (#J) SSC pre/adaptation (#I)	Ch 2; p: 18-27 Ch 3; p: 28-34 Ch 6; p: 82-89
Jan 19	Class III Prep (#M) SSC prep/adaptation (#T)	Ch 3; p: 35-45 Ch 4; p: 46-50 Ch 5; p: 51-76
Jan 26	SSC Prep/adaptation/cutout (#F)	Ch 5; p: 77-81
Feb 2	Practical Exam & Space Maintainer Demos	No quiz
Feb 9	Pulpotomy Exercise Wire Bending Practice	Pulpotomy quiz (online)
Feb 16	Remake Restorative Practical Exam / Start TPA	TPA; p: 111-120
Feb 23,	TPA Due	No quiz
March 2	Start band and loop	B & L; p: 130-132
March 16	Band and Loop Due	No quiz
March 30	Start Lower lingual holding arch	LLA; p: 123-129
April 6	Lingual Arch Due	No quiz
April 13	Start Nance appliance	Nance; p:133-136
April 20	Nance appliance Due	No quiz
April 27	Remake Appliances	
May 4	All Remake Appliances Due	

EVALUATION METHODS

Lecture Portion

There will be two one-hour mass examinations during this semester; each will count for 30% of your final grade for the lecture portion. There will be a quiz on each lab procedure, which will count for 10% of your final grade for the lecture portion. A comprehensive final examination, which will constitute the remaining 30% of your lecture portion grade, will be administered at the end of the semester. These examinations combined will constitute 60% of your **final course grade**. The examination format may include any combination of the following: multiple choice, matching, fill in the blanks and short essay questions.

In order to pass the lecture portion of the course you must obtain a grade of 70% or higher on the final examination **AND** have a combined average of all three examinations of 70% or higher. There will be no remakes for either of the one-hour examinations. However, should you fail the final examination, one retake will be allowed. The maximum grade achievable on this remake final examination is a 70%.

If a final grade of 70% or greater is not achieved in the lecture portion of this course, the student will be required to repeat this course the next time it is normally schedule (Spring Semester 2008).

Restorative Laboratory

The restorative portion will consist of four laboratory sessions and a practical examination on the fifth session, **February 02, 2007**. The critique for each of the eleven restorative procedures (included in the Monograph) must be initialed by your assigned instructor. These procedures will be graded as pass/fail, and each must be successfully completed prior to the practical examination. The practical examination will consist of preparations on two teeth during a ninety-minute (90) session. The final practical examination will be graded numerically and a passing grade of 70 or higher must be achieved for each preparation. Any failed preparation will be graded by at least one additional faculty member. Failure of one or both preparations will result in remediation. Before a second practical exam can be taken, two additional preparations of each failed preparation(s) must be critiqued by your assigned instructor. After successful completion of these preparations, a second practical exam will be given on Friday, **February 16, 2007** during the regular lab session. The maximum grade achievable on this second practical examination is 70. A grade below 70 will result in requiring the student to repeat the restorative laboratory portion of the course at a later date.

Pulpotomy Laboratory

There will be one pulpotomy Lab session. The students will go online to review the supportive material and perform pulpotomy procedure under instructor's supervision. This is a practice for the pulpotmy procedure. Student will be graded as pass or fail. It will not affect student's grade.

Space Maintainer Laboratory

The appliances must be turned in for grading on the typodont on the following dates:

Maxillary Transpalatal Arch	February 23, 2007
Band and Loop	March 16, 2007
Lower Lingual Arch	April 6, 2007
Nance Appliance	April 20, 2007

Without a valid excuse confirmed by the Course Director, a ten-point penalty will be deducted if the appliance(s) are not turned in on the above dates. All completed space maintainers will be graded numerically using the criteria set forth in the evaluation forms for each appliance. A grade of 70 or higher must be achieved for each space maintainer. If a failure occurs, the student will be allowed to remake the appliance once, having each step during fabrication initialed by the assigned instructor. The maximum grade achievable on the remake will be 70. A grade below 70 will result in requiring the student to repeat the space maintainer portion of the course at a later date.

Final Grade

Your final course grade will be computed as follows:

Lecture portion	60%
Restorative laboratory	20%
Space maintainer laboratory	20%

As outlined above, each portion of this course must be passed in order to achieve a passing grade for the course. A failing grade in any of these portions will result in a grade of 60% to be entered as a course grade until the student successfully completes the course.