



DEPARTMENT: ACD/ ACADEMIC

TITLE: Program Specifications

CODE :ACD/AC - FO- 1.1-E

DATE D'IMPLEMENTATION: 18/ 01/2021

DATE DE REVISION: 18/01/2024

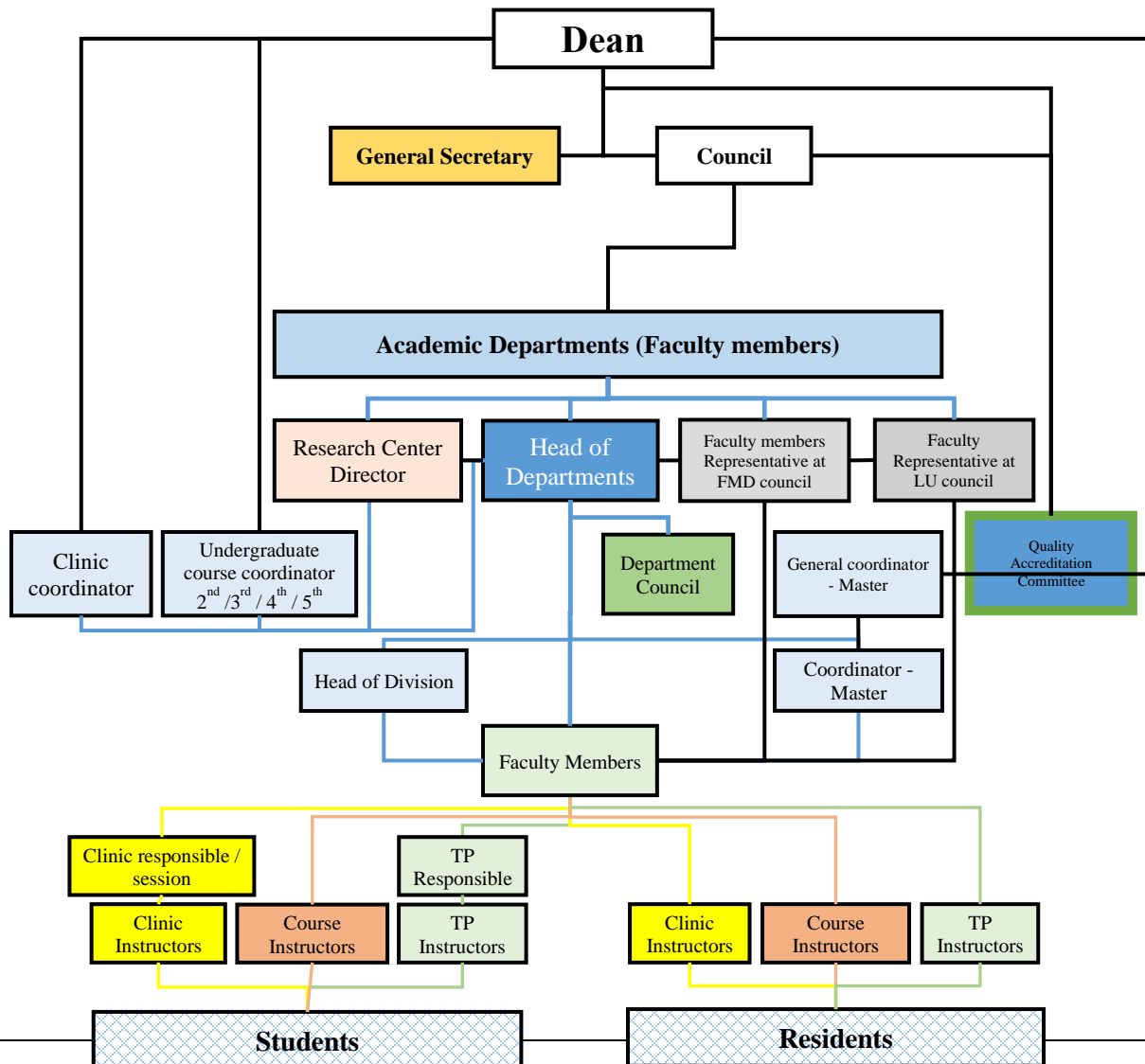
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Department	Oral Surgery	Date	April 9,2021
		Department Head	Doctor Georges Abi Khalil

Insert program administrative flowchart

Simplified Organizational / Governance chart of the program





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Master in Oral Surgery Department Staff Chart:

Head of Department: Doctor Georges Abi Khalil. (PT)

Department Council: Professor Toni Zeinoun (FT), Professor Antoine Berberi (FT), Doctor Georges Abi Khalil (PT), Assistant Clinical Professor Nabih Nader (PT), Doctor Rita Bou Assaf (PT).

Master Coordinator: Assistant Clinical Professor Nabih Nader (PT)

Staff: Professor Toni Zeinoun, Professor Antoine Berberi, Assistant Clinical Professor Nabih Nader, Doctor Georges Abi Khalil, Doctor Ziad Noujeim, Doctor Carlos Khoury, Doctor Roger Bassit, Doctor Ghassan Attieh, Doctor Elie Sidnaoui, Doctor Rima Abou Tayeh, Doctor Charbel Choubaya, Doctor Rita Bou Assaf, Doctor Wasfi Kanj, Doctor Said Halabi, Doctor Wahid Terro, Doctor Sami Jad, Doctor Marc Bou Haidar.

(FT): Full Time; (PT): Part Time.

Program Identification and General Information

1. Program titles	Master in Oral Surgery	Program Code	OSRGM"0" "000"
2. Total credit hours needed for completion of the program	150 credits. Thesis has no credits.		
3. Award granted on completion of the program	Master in Oral Surgery		
4. Professional occupations (licensed occupations, if any) for which graduates are prepared. (If there is an early exit point from the program (e.g. diploma or associate degree) include professions or occupations at each exit point)	<ul style="list-style-type: none"> Specialist in Oral Surgery There is no exit point for this program 		
5. (a) New Program	Master of Science in Oral Surgery	Planned starting date	Not fixed yet
(b) Continuing Program	Master in Oral Surgery	Year of most recent major program review	2016- It is a new program, still in testing
6. Name of program chair or coordinator.	Nabih Nader		
7. Date of approval by the authorized body	2016		

B. Program Context

1. Explain why the program was established.

Since its foundation, the Faculty of Dental Medicine has always been involved in postgraduate education. Continuous education programs for general dental practitioners and a "Diplôme Universitaire" (started later in 1994) were taught at the Faculty. Learning from these experiences, to start a Master degree is a natural promotion and improvement of the postgraduate programs along with the second important program that the Faculty proposes: A Doctorate in Odontological Sciences.

a. Summarize economic reasons, social or cultural reasons, technological developments, national policy developments or other reasons.

- Before 2016 the postgraduate program taught a "Diplôme Universitaire" (DU) similar to the French DU from 1994-2016. This diploma had a positive appreciation locally. Internationally, it was difficult to evaluate this diploma in the Arab countries as they usually teach, follow and favor an anglo-saxon program.
- The Lebanese University as a whole adopted the Licence/Master/Doctorat(LMD) format in learning and created the courses with credits. It was a good opportunity to switch from a DU to a Master degree with courses and credits despite the fact that undergraduate programs decided to remain in the previous system and didn't switch to the LMD.
- In 2016, It was decided to create a Master degree to improve scientific standards, start research projects, allow dentists to align with other major countries who deliver Master degrees like France and the Arab countries because a great number of our students end up working in Arab countries or studying in France.



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b. Explain the relevance of the program to the mission and goals of the institution.

In line with the Mission of the Lebanese University in general and the Mission of the Faculty of Dental Medicine in particular, the Master in Oral Surgery program aims to:

- Prepare and develop evidence based academic and clinical programs thus developing their critical thinking and train them to become skilled clinicians.
- Promote scientific research and continuing education programs
- Work towards a better health system in the country and promote the preventive education and health of the Lebanese society.
- Deliver and ensure an administrative and academic culture in accordance of high quality standards.
- As for the goals, "Providing continuing training and quality public education" and "allowing competent training of the scientific community" are two main goals of the mission and goals of the Lebanese University. This program is in line with these goals and allows all future staff, students from our University or from other Universities locally and internationally to have a higher degree of education.

2. Relationship (if any) to other programs offered by the institution/college/department.

a. Does this program offer courses that students in other programs are required to take?

Yes **No**

If yes, what has been done to make sure those courses meet the needs of students in the other programs?

Residents from the Departments of "Periodontics", "Orthodontics", "Prosthodontics" and "Restorative Dentistry and Esthetics" take some lectures related to their relation and collaborative work with the Oral surgery Department but they don't have a proper course with a code number.

b. Does the program require students to take courses taught by other departments?

Yes **No**

If yes, what has been done to make sure those courses in other departments meet the needs of students in this program?

Not applicable

3. Do students who are likely to be enrolled in the program have any special needs or characteristics? (e.g. Part time evening students, physical and academic disabilities, limited IT or language skills).

Yes **No**

Not applicable

4. What modifications or services are you providing for special needs applicants?

Pregnant residents can take a leave if needed, by asking the Dean in writing, and resume the program when they can get back.

C. Mission, Goals and Objectives

1. Program Mission Statement (insert)

Based upon the Mission of the Faculty that is to:

- Prepare and develop evidence based academic and clinical programs thus developing their critical thinking and train them to become skilled clinicians.
- Promote scientific research and continuing education programs
- Work towards a better health system in the country and promote the preventive education and health of the Lebanese society.
- Deliver and ensure an administrative and academic culture in accordance of high quality standards.

The Master program seeks to enhance the educational, research, clinical, and community service missions by providing an environment where Oral Surgery residents are educated to treat patients with proper multidisciplinary approach of oral surgical care providing high quality oral health care based on sound scientific principles. Moreover, the program is lead by faculty members coming from different educational background thus having different approaches and techniques to motivate residents and staff towards excellence. Faculty, program staff members and residents display high standards of ethics and



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value diversity, respect patients, share responsibility by working together toward academic, professional, and personal growth. Finally, the community benefits from program service and devotion to quality health care.

2. List Program Goals (e.g. long term, broad based initiatives for the program, if any)

- **Educational goal:** Provide an inviting and encouraging resident experience centered on excellence in education that produces a successful motivated resident
- **Patient care goal:** Be a leader in the country for advanced surgical care to satisfy and ensure patient's needs and expectations
- **Engagement goal:** Establish the Master in Oral Surgery as one of the best specialty program in Lebanon in concordance to the best international standards program. Residents will be in the best place to work, learn, and treat satisfied patients
- **Research goal:** Introduce research principles to the residents' and encourage the critical thinking. This Master being more clinical rather than research oriented.
- Develop residents' skills in research principles mainly clinical and encourage the critical thinking. The resident will be able to be an expert for scientific evidence based learning in surgery. This Master being more clinical rather than research oriented.

- **Medium term goals**

-To develop strategies of the educational program where objectives of the conventions should be used: activate mobility of student, and staff, develop a logbook for this exchange (for credits, etc...) Exchange of scientific information, activate and develop research project with other universities

- To develop and perform the use of new technology in the master program (laser, CAD/CAM, guided surgery)

- **Long term goals:**

Launch the Master of Science in Oral Surgery as a full time program.

3. List major objectives of the program within to help achieve the mission. For each measurable objective describe the measurable performance indicators to be followed and list the major strategies taken to achieve the objectives.

Measurable Objectives	Measurable performance indicators	Strategies
Resident recruitment choices: Creating a dual program: Master in Oral Surgery, and Master of Sciences in Oral Surgery to encourage residents choosing between a clinical oriented program or a research oriented one.	Every year since the Master in Oral Surgery program started the recruitment is full. Students applying to this program are usually more than the maximum number the program can handle, a clear sign that there is high demand to be accepted.	1-Maintain high standards of education and learned clinical skills that encourage residents to apply for this Master in Oral Surgery program. This clinical program has 71% of clinical sessions credits and 29% of theory. 2-Study the need of developing varied competencies, new technologies 3- The need to start in the new future the Master of Science in Oral Surgery will add 30 credits devoted to the research thesis and will need 1day and half a day up to 2 days added to the program to prepare it. This Master will be a full time program 4-Develop a maxillo- facial program
Biomedical / basic sciences: Expose residents to the biomedical and basic sciences, emphasize basic science-oral	Percentage of: medically compromised patients treated per residents	Residents apply basic sciences courses when treating medically compromised patients. They also apply the Cad/Cam,



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<p>surgery interrelationships, and encourage synthesis and application of this knowledge in clinical practice.</p>	<p>patient satisfied from the new technology used</p> <p>residents satisfied from the new technology used (no data available)</p>	<p>biophysics and laser technologies in the clinics.</p> <p>From the 29% of theory courses, 30% of the program credits, 210 hours of lectures, is dedicated to biomedical and basic sciences to ensure that residents have a broad knowledge in medical related problems for a better service to patients.</p>
<p>Diagnostic and treatment planning: Provide residents with sufficient clinical experience to become proficient in diagnostic data collection, diagnosis, treatment planning of advanced cases that need surgical treatment.</p>	<p>Every resident has fulfilled an average of 30 treatment plans in 3 years. A treatment plan includes full X-rays, clinical photos, discussing the treatment plan options with an instructor.</p> <p>100% of cases are achieved by the residents.</p> <p>Residents achieve clinical cases requirements (Annexe 1)</p>	<p>1-All clinical cases are advanced. The simple ones are referred to the undergraduate clinic.</p> <p>2- Ensure that the resident has a wide and broad view of the clinical possibilities according to the clinical case situation.</p> <p>3- Each patient's case is carefully studied: medical questionnaire, clinical extra-oral and intra-oral examinations, adequate radiological assessment (Periapical, panoramic, CBCT). Several clinical options discussed with the instructor or more than one instructor if needed and explained to the patient before starting a procedure.</p> <p>4- A consent form is signed by the patient before surgical procedure</p> <p>5- The final treatment plan is presented by the resident and discussed with the staff members of the department, in the presence of all years residents. Once approved, the treatment plan is signed by the instructor in charge and the master coordinator</p>
<p>Review of Relevant Professional Literature: Expose residents to oral surgery and related literature to develop historical perspective and provide theoretical basics for diagnostics, techniques and procedures, management, successes, and failures/complications.</p>	<p>From the 29% of theory credits, 70% of credits is dedicated to oral surgery lectures.</p> <p>Rate of oral surgery lectures attended by resident is 370 hours in the program. This proportion is 18% of the program.</p> <p>While 5% of all the program credits is dedicated to oral surgery seminars and workshops.</p> <p>Rate of seminars, workshops given is</p>	<p>Lectures, seminars and workshops give all information needed to develop all the necessary skills to master all procedures and techniques used in oral surgery and wide range of references. The notion of evidence based treatments is also learned to further give the resident the best up to date knowledge. It is the major role of the seminars and workshop sessions in all courses taken</p>



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	97.5hours in the program.	in oral surgery. The Basic Science course on Article and Research and the Thesis preparation are also another form to put into practice this issue.
<p>Clinical Proficiency and Patient Satisfaction: Train residents to provide surgical treatments for patients in the areas of comfort, function, and esthetics in an ethical manner. This Master program is mainly clinical.</p>	<p>64% of all the program credits are clinical sessions. Rate of clinical sessions is 1439 hours in the program.</p> <p>% of patients attending the clinic of master surgery</p> <p>% of patients recommending the clinic of master surgery</p> <p>% of patients on the waiting list OR Estimating period time to take an appointment in the clinic (waiting list)</p>	<p>Clinics are well managed and heavily equipped to provide the best environment to work efficiently.</p> <p>During a clinical session, 1 instructor takes in charge between 1 to 3 residents maximum. An excellent ratio to learn and progress.</p> <p>Residents provide quality, complete patient care in a timely and efficient manner using state-of-the-art technology and patient management skills so that patients are satisfied and become ambassadors for the program.</p> <p>Each clinical work is divided into smaller carefully controlled steps. The resident cannot start a new step before getting the approval from his clinical instructor.</p> <p>Advanced clinical cases are discussed between all staff members and opinions come from different backgrounds. This diversity of knowledge gives a very efficient melting pot of clinical skills.</p> <p>Each patient is carefully studied, full X-rays technologies applied (peri-apical, panoramic, CBCT). Several clinical options discussed with the instructor or more than one instructor if needed and with the patient before starting a procedure.</p> <p>In general, during clinical sessions:</p> <ol style="list-style-type: none"> 1- Few patients show up after their clinical work is done, even though they have been informed about the necessity of follow-up. 2- The master program is always full with patients. We even have a waiting list for patients that we cannot treat because all residents have filled all their clinical appointment time.



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<p>Faculty: Provide a faculty composed of high quality dentists and oral surgeons with broad clinical skills, knowledge, and expertise in order to increase the focus on competency statement in curriculum related standards Activate the use of conventions output</p>	<p>Number of publications during the last 4 years by the Master staff is 28 PubMed indexed papers that is 7 papers /year for 17 Faculty staff.</p>	<p>All Faculty members have Doctorates and Master degrees and have studied in Lebanon, France, United Kingdom, Unites States, Italy and other countries. This diversity of knowledge gives a very efficient melting pot of skills.</p>
<p>Research & Scholarly Activity: Provide formal instruction on research design, research protocol development, biostatistics, and report/thesis writing.</p>	<p>39 scientific research papers discussed during the program</p>	<p>1-Although this program is mainly clinically oriented because it is a "Master Professional" still the resident has a wide knowledge of the research protocols and studies via the seminars and workshops sessions. 2- Some residents choose an epidemiological or research thesis and learn how to do research effectively. Thesis work has 0 credits. This work is considered outside the hours of work. 3-The thesis concludes the master program and it follows three categories: a- case reports treated by the residents b- pilot study (at least 3 samples) c- epidemiology study Thesis defend is in public, in front of a jury. Part of the thesis exam includes a 20 minutes' oral presentation. 4-Once the Master of Science in Oral Surgery program will be launched, residents will have a real experience on how to conduct a research. Thesis credits will be validated and counted for 17% of the program.</p>
<p>Continuous education: Encourage residents to join national and international oral surgery organizations with the expectation that they will contribute to dentistry, to their specialty, and to their local communities through service thus preparing graduates to be life-long learners</p>	<p>39 lectures given during conventions by instructors 7 posters presented during conventions/Resident</p>	<p>1- Staff and residents participate actively in the Dental Conventions locally and abroad (Dubai meetings mainly) 2- Staff and residents organize continuous education programs for general dental practitioners.</p>



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2 continuous educations program /year, it was interrupted during Covid pandemic

Faculty and Residents have the opportunity to become members of the Lebanese Oral Surgery Society. Many staff and residents participate in implant study clubs. Some of them are also members in scientific societies abroad. Faculty and Residents have to attend the scientific meetings organized by all Dental Associations and other Faculties in the country. Some Faculty and residents attend events abroad.

D. Program Structure and Organization

1. Program Description: List the core and elective program courses offered each semester from First Year to graduation using the below Curriculum Study Plan Table

According to the laws and regulations of all Master programs at the Faculty of Dental medicine, the Master in Oral Surgery consists of 150 credits and 3024 hours of learning. The hours are divided into 2000 hours of theory, practical and clinical sessions which count for 150 credits. The other 1024 hours are for the thesis and are distributed as follows: 124 hours during the 3rd semester and 300 hours for each of the 4th, 5th and 6th semesters. These hours are for the subject preparation, the library work and the thesis supervision. The thesis having 0 credits and this Master program being credit oriented, it has been decided by the Faculty Council to exclude these 1024 hours of learning from the official program despite the fact that the residents effectively use them. These 1024 hours are counted as para curricular activities.

A 3 years' program divided into 6 semesters. Each semester is 16 weeks. The program consists of 35 courses: 20 "oral surgery" and 15 "common" (with all master programs). Common courses are: 13 basic sciences and 2 courses in management. Oral Surgery courses are series of lectures, seminars, workshops, practical and clinical sessions. A Master thesis is required at the end of the program.

Program sections: The program is divided into 3 main sections: Theory, practical and clinical.

1-Theory (residents learn: "Know") is divided into 3 categories: Lectures given by the instructor, seminars given by the residents over a recent topic and workshops where the instructor discusses and analyzes a scientific paper with the residents over a recent topic.

2-Practical (residents apply: "Know how") is a session where residents put into practice the theory they assimilated.

3-Clinical (residents apply: "Know how" and react with patients, technicians, colleagues: "Attitude") is a session where residents actually treat patients.

Credit calculations: 1 credit equals:

- 10 h lectures
- 15 h for each of the following: Seminars, workshop, practical session and clinical session.

Nomenclature:

1. Theory:

a: Lecture is named "L" followed by the order of the lecture. For example "L1" is the first lecture.

b: Seminar is named "S" followed by the order of the seminar. For example: "S1" is the first seminar

c: Workshop is named "W" followed by the order of the workshop. For example: "W1" is the first workshop

2. Practical is named with the letter "P" followed by the order of the session. For example "P1" is the first practical session

Clinical is named with the letter "C" followed by the order of the session. For example "C1" is the first clinical session Each course's name has two denominations. The first denomination indicates the timing of the course. It starts by the letters "OSRG" (Oral Surgery) followed by the letter "M" (Master) and a number (from 1 to 6): This number indicates the semester. Example:



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OSRGM1 is the first semester. The second denomination has 3 numbers: The first number is the year the course is given, the second number is "0" and the third number is the order in which the course is given. Example 101 is the first year, first course. This denomination is the same whether the course is a series of lectures, seminars, workshops, practical or clinical sessions. The Common courses first denominations are "BASC" for the basic sciences, "MNGT" for management.

In this chart, the denomination "OSRG" is replaced by the letters "OS" while the denomination of the basic sciences course "BASC" is replaced by the letters "BS". Finally, the management course is replaced by the letters "MN"

A **theoretical lecture, seminar or workshop** is written in red.

A **practical session** is written in green

A **clinical session** is written in blue.

1st year

- 1st semester: BS M101- **Theory** Hist Embry; BS M102- **Theory** Oro Fac Phy; BS M103- **Theory** Anat; BS M104 **Theory** Microbio; BS M105 **Theory** Immnu; OSM1-101**Theory/Workshop**; OSM1-102 **Theory** Anesthesia; OSM1-103 **Theory** Computer Science; OSM1-104 **Theory** Med Emerg; OSM1-105 **Clinic**; MN M101- **Theory** Strat & Organ; MN M102- **Theory** Quality & Legal
- 2nd semester: BS M106 **Theory Mol Biol**; BS M107- **Theory Biophys & Laser**;BS M108- **Theory Dent Biocom**; BS M109- **Theory Lab Techn**; BS M110- **Theory** Biostat; BS M111-**Theory** Art Analys & Biblio Research; BSM112, CAD-CAM **Theory**OSM2-106**Theory** Case History &clinical investigations; OSM2-107**Theory** Basic Principles; OSM2-108 Radiology **Theory** ,OSM2-109 Applied Pharmacology **Theory** , OS M2-110 **Clinic**

2nd year

- 1st semester: OSM3-201 **Theory/Workshop** Oral Mucosal Pathology; OSM3-202 **Theory /Workshop** Introduction to dental implants; OSM3-203 **Theory /Workshop** Laser; OSM3-204 **Theory/Workshop** Dental Eruption Disorders; OSM3-205 Biomedical Ethics**Theory**,OSM3-206 **Theory** Forensic, BS M201 CAD-CAM **Theory**
- 2nd semester:OSM4-208**Theory /Workshop/Seminar** Cysts and Tumors; OSM4-209: **Theory /Workshop/Seminar** Implant Rehabilitation Basics, OSM4-210 **Theory** Salivary Glands Diseases; OSM4-211: **Clinic**

3rd year

- 1st semester: OSM5-301 **Theory/Workshop** Oral Cancer; OSM5 302 Implant Rehabilitation: Advanced;OSM5-303 **Clinic**;
- 2nd semester: OSM6-304**Theory** Plastic Reconstructive Orthognatic Surgery; OSM6-305: **Clinic**; OSM6-306: **Thesis**

A **thesis** is written in brown.

Curriculum Study Plan Table

Semester #	Course Code	Course Title	Required or Elective	Prerequisite Course	Credit Hours
S1	BASCM1 101	Histology and Embryology/Stem cells (15h)	R	No	1.5
	BASCM1 102	Orofacial Physiology (15h)	R	No	1.5
	BASCM1 103	Topographic Anatomy (15h)	R	No	1.5
	BASCM1 104	Microbiology (15h)	R	No	1.5
	BASCM1 105	Immunology (15h)	R	No	1.5
	MNGT M1 101	Strategy and Organization (15h)	R	No	1.5
	MNGT M1 102	Quality and Legal Affairs (15h)	R	No	1.5
	OSRGM1 101	Applied Oral & Maxillofacial anatomy (Theory 15H-1.5C /Workshop 7.5H-0.5C)	R	No	2
	OSRGM1 102	Anesthesia and pain control	R	No	0.5



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	OSRGM1 103	Computer Science	R	No	1
	OSRGM1 104	Common Course: Management of medically compromised patients and medical emergencies (20h)	R	No	2
	OSRGM1 105	Surgery Clinic 1(2 sessions of 5 hours by week over 21 weeks)	R	No	14
S2	BASCM2 106	Molecular Biology (15h)	R	No	1.5
	BASCM2 107	Biophysics and Laser (15h)	R	No	1.5
	BASCM2 108	Dental Biocompatibility (10h)	R	No	1
	BASCM2 109	Laboratory Techniques (20h)	R	No	2
	BASCM2 110	Biostatistics (15h)	R	No	1.5
	BASCM2 111	Article Analysis and Bibliographic Research (10h)	R	No	1
	BASCM2 112	Cad/Cam technology (10h)	R	No	1
		OSRGM2 106	Case history & clinical investigations	R	No
	OSRGM2 107	Basic principles of oral surgery	R	No	1
	OSRGM2 108	Radiology in oral Surgery	R	No	1
	OSRGM2 109	Applied Pharmacology	R	No	1
	OSRGM2 110	Surgery Clinic 2 (2 sessions of 5 hours by week + 2 hours per week hospital over 21 weeks)	R	No	17
S3	BASCM3201	CAD/CAM in prosthodontics (10h)	R	No	1
	OSRGM3 201	Oral mucosal pathology (Theory 15H-1.5C /Workshop 7.5H-0.5C)	R	No	2
	OSRGM3 202	Introduction to dental implant (Theory15H-1.5C / Workshop7.5H-0.5C)	R	No	2
	OSRGM3 203	Laser therapy in oral surgery (Theory 15H-1.5C /Workshop 15H-1C)	R	No	2.5
	OSRGM3 204	Dental Eruption Disorders (Theory 20H-2C / Workshop7.5H-0.5C)	R	No	2.5
	OSRGM3 205	Biomedical Ethics	R	No	1
	OSRGM3 206	Forensic and oral surgery	R	No	1
		OSRGM3 207	Surgery Clinic 3 (2 sessions of 5 hours by week + 2.5 hours per week hospital over 21 weeks)	R	No
S4	OSRGM4 208	Cysts and tumors of the jaws (Theory 20H-2C /Workshop 7.5H-0.5C / Seminar7.5H-0.5C)	R	No	3
	OSRGM4 209	Implant Rehabilitation; basic principles (Theory 20H-2C / Workshop 7.5H-0.5C / Seminar 7.5H-0.5C)	R	No	3
	OSRGM4 210	Salivary glands diseases	R	No	1
	OSRGM4 211	Surgery Clinic 4 (2 sessions of 5 hours by week + 2.5 hours per week hospital over 21 weeks)	R	No	18
S5	OSRGM5 301	Oral cancer	R	No	1.5



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		(10H-1C / 7.5H-0.5C)			
	OSRGM5 302	Implant rehabilitation: Advanced Surgery (20H-2C / 7.5 H-0.5C /7.5H-0.5C)	R	No	3
	OSRGM5 303	Surgery Clinic 5(2 sessions of 5 hours by week over 21 weeks)	R	No	14.5
S6	OSRGM6 304	Plastic, reconstructive, orthognathic surgery	R	No	2
	OSRGM6 305	Surgery Clinic 6(2 sessions of 5 hours by week over 21 weeks)	R	No	14
	OSRGM6 306	Dissertation of final report	R	No	0

2. Required Field Experience Component (if any) (e.g. internship, cooperative program, work experience)

Summary of practical, clinical or internship component required in the program. Note: see Field Experience Specification

a. Brief description of field experience activity

Residents have to attend clinical sessions around 10 to 12 hours/week depending on the semester, to complete 1439 hours of clinical work in 3 years(including Baabda Governmental Hospital attendance)

b. At what stage or stages in the program does the field experience occur? (e.g. year, semester)

Clinical work starts since the first year, semester one

c. Time allocation and scheduling arrangement.

Semester 1: 210 clinical hours divided into 2 sessions of 5 hours by week over 21 weeks

Semester 2: 255 clinical hours divided into 2 sessions of 5 hours by week + 2 hours per week hospital over 21 weeks

Semester 3:273 clinical hours divided into 2 sessions of 5 hours by week + 2.5 hours per week hospital over 21 weeks

Semester 4: 273clinical hours divided into 2 sessions of 5 hours by week + 2.5 hours per week hospital over 21 weeks

Semester 5: 218clinical hours divided into 2 sessions of 5 hours by week over 21 weeks

Semester 6: 210 clinical hours divided into 2 sessions of 5 hours by week over 21 weeks

d. Number of credit hours (if any)

Total clinical hours: 1439; Total clinical credits: 95.5 (71% of all credits)

3. Project or Research Requirements (if any)

Summary of any thesis requirement in the program. (Other than projects or assignments within individual courses)

a. Brief description

Thesis options are of 3 types:

1. A literature review on a specific subject followed by a case series done by the resident not less than 3 clinical ones.
2. An epidemiological study
3. A research thesis following the IMRAD structure. To be able to apply for this option the resident must have general grades of at least 16/20 in all courses.

b. List the major intended learning outcomes of the project or research task.

Thesis options 1 and 2 are for a "master professional" while option 3 is for a "Master of research".

Learning outcomes of options 1 and 2;

- Learn to select a paper (indexed in PubMed, Famous author or not, use search engines like PubMed, Google scholar, etc...)
- Learn to read, analyze and summarize a paper
- Get to know how to write a literature review
- Get to have a critical thinking process
- Learn to be rational
- Learn epidemiological steps and procedures (in case epidemiology is chosen)
- Learn to build and present a PowerPoint presentation and respect the allocated time.

Learning outcomes of option 3:



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- All the above plus learn to plan a research, execute and write a proposal.
- Learn to execute an experiment, analyze the results and discuss them
- Learn to write the thesis following the IMRAD format

c. At what stage or stages in the program is the project or research undertaken? (e.g. level)

2rd year, second semester

d. Number of credit hours (if any)

No credits for options 1 and 2

30 credits for option3

e. Description of academic advising and support mechanisms provided for students to complete the project.

Residents have a thesis director.

f. Description of assessment procedures (including mechanism for verification of standards)

Once the thesis is ready the thesis director signs a release paper. The Dean appoints a reviewer to evaluate it. The reviewer signs a release paper. The Dean appoints 3 jury members for the oral examination and defense of the thesis. The thesis defense is public. The resident presents his thesis during a PowerPoint presentation and answers all questions.

Learning Outcomes in Domains of Learning, Assessment Methods and Teaching Strategy

Program Learning Outcomes, Assessment Methods, and Teaching Strategy work together and are aligned. They are joined together as one, coherent, unity that collectively articulate a consistent agreement between student learning and teaching. The **National Qualification Framework** (NQF) provides three learning domains. Learning outcomes are required in these three domains.

On the table below are the five NQF Learning Domains, numbered in the left column.

First, insert the suitable and measurable learning outcomes required in each of the learning domains. **Second**, insert supporting teaching strategies that fit and align with the assessment methods and intended learning outcomes. **Third**, insert appropriate assessment methods that accurately measure and evaluate the learning outcome. Each program learning outcomes, assessment method, and teaching strategy ought to reasonably fit and flow together as an integrated learning and teaching process.

	NQF Intended Learning Outcomes	Teaching Strategies	Assessment Methods
01	Knowledge		
1.1	Interpret conditions that affect surgical treatment, their etiology, pathogenesis and prevention, as well as their assessment, effect on the treatment outcome and prognosis	Lectures	Continuous evaluation, written examination
1.2	Identify, appraise and apply available evidence-based health care principles in different aspects of oral surgery	Lectures,	Continuous evaluation, written examination
1.3	Illustrate intra-oral and craniofacial anatomy and physiology related to surgery therapy and dental implant placement	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.4	Understand emerging sciences and technologies with respect to conventional and advanced oral surgery	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.5	Relate surgical principles and procedures	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.6	Describe medical emergencies and their management	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.7	Review pain control, sedation and orofacial pain conditions	Lectures	Continuous evaluation, written examination



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1.8	Recognize all oral and jaw anatomical landmarks relevant to the practice of surgical dentistry and oral surgery	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.9	Investigate patient's health and oral status	Lectures	Continuous evaluation, written examination
1.10	Investigate instruments and materials used in oral surgery	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.11	Associate radiographic approach to oral surgery	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.12	Understand normal oral mucosa and anatomy of the oral cavity, and its pathology	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.13	Combine bone biology, physiology and anatomy to osseointegration.	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.14	Identify the indication of laser use	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.15	Assess all oral and jaw anatomical landmarks relevant to surgical extraction of teeth with eruption disorders	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.16	Elaborate a differential diagnosis of a jaw pathology before implementing its surgical treatment	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.17	Recognize the basic principles of implant rehabilitation	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.18	Acquire guided tissue and bone regeneration principles	Lectures, seminars, workshops,	Continuous evaluation, written examination
1.19	Identify salivary gland diseases, oral cancer and plastic reconstructive orthognathic surgery	Lectures, seminars, workshops,	Continuous evaluation, written examination
02	Know - How		
2.1	Analyze radiological and laboratory tests of patients	Clinical sessions	Continuous evaluation / Clinical examination
2.2	Master surgical removal of impacted teeth	Clinical sessions	Continuous evaluation / Clinical examination
2.3	Choose the adequate prophylactic and curative medical prescription	Clinical sessions	Continuous evaluation / Clinical examination
2.4	Implement an aspiration, an enucleation, a decompression, and a chemoablation of a jaw cyst or benign tumor	Clinical sessions	Continuous evaluation / Clinical examination
2.5	Arrange a treatment based on dental implants for single tooth	Clinical sessions	Continuous evaluation / Clinical examination
2.6	Establish a treatment for partial edentulous to total edentulous arches	Clinical sessions	Continuous evaluation / Clinical examination



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2.7	Perform teeth impaction and germectomy surgery	Clinical sessions	Continuous evaluation / Clinical examination
2.8	Excel orthodontic surgery	Clinical sessions	Continuous evaluation / Clinical examination
2.9	Master orthodontic mini-screws placement	Clinical sessions	Continuous evaluation / Clinical examination
2.10	Excel internal and external sinus floor elevation	Clinical sessions	Continuous evaluation / Clinical examination
2.11	Perform endodontic surgery	Clinical sessions	Continuous evaluation / Clinical examination
2.12	Perform preprosthetic surgery		Continuous evaluation / Clinical examination Oral examination
2.13	Manipulate muco-gingival surgery	Clinical sessions	Continuous evaluation / Clinical examination
2.14	Apply advanced implant surgery	Clinical sessions	Continuous evaluation / Clinical examination Oral Examination
2.15	Manipulate oro-antral fistula	Clinical sessions	Continuous evaluation / Clinical examination Oral examination
2.16	Implement a guided surgical implant placement	Clinical sessions	Continuous evaluation / Clinical examination
2.17	Implement different bone grafting techniques	Clinical sessions	Continuous evaluation / Clinical examination
2.18	Analyze different types of published papers	Lectures and workshop sessions	Continuous evaluation, written examination
2.19	Acquire the evidence- based concept and how to read such papers	Lectures and workshop sessions	Continuous evaluation, written examination
2.20	Interpret statistical tests and logical thinking	Lectures and workshop sessions	Continuous evaluation, written examination
03	Social Skills		
3.1	Reveal high standards of ethics and professionalism while practicing clinical service according to the highest ethical standards in line with up to date knowledge.	Clinical sessions	Continuous evaluation / Clinical examination
3.2	Master Infection Control and clinical Asepsis	Clinical sessions	Continuous evaluation / Clinical examination
3.3	Present interpersonal skills when working alone or as a team member.	Clinical sessions	Continuous evaluation / Clinical examination
3.4	Appreciate professional facilities of allied dental human resources as dental assistants and laboratory technicians.	Clinical sessions	Continuous evaluation / Clinical examination
3.5	Communicate effectively with patients, their families, relatives and careers, and with other health professionals involved in their care.	Clinical sessions	Continuous evaluation / Clinical examination



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3.6	Utilize the values of patient centered care, adaptability, and acceptance of cultural diversity in professional practice	Clinical sessions	Continuous evaluation / Clinical examination
3.7	Use of critical thinking and outcome-based clinical decision making.	Lectures, seminars, workshops,	Continuous evaluation, written examination
3.8	Display proper use of web and data base information.	Lectures, seminars, workshops,	Continuous evaluation, written examination
3.9	Commit to continuing professional development and life-long learning.	Register in scientific meetings	Scientific meetings attendance

Program Learning Outcomes Mapping Matrix

COURSE CODE NUMBERS: 1= BASCM1 101; 2= BASCM1 102; 3=BASCM1 103; 4=BASCM1 104; 5=BASCM1 105; 6=MNGTM1 101; 7=MNGTM1 102; 8=OSRGM1 101; 9=OSRGM1 102; 10=OSRGM1 103; 11=OSRGM1 104; 12=OSRGM1 105; 13= BASCM2 106; 13=BASCM2 107; 14=BASCM2 108; 15=BASCM2 109; 16=BASCM2 110; 17= BASCM2 111; 18=BASCM2 112; 19=OSRGM2 106; 20=OSRGM2 107; 21= OSRGM2 108; 22= OSRGM2 109; 23=OSRGM2 110; 24=BASCM3 201; 25=OSRGM3 201; 26=OSRGM3 202; 27=OSRGM3 203; 28=OSRGM3 204; 29=OSRGM3 205; 30=OSRGM3 206;31=OSRGM3 207
32=OSRGM4 208; 33=OSRGM4 209; 34=OSRGM4 210; 35=OSRGM4 211; 36= OSRGM5 301; 37=OSRGM5 302; 38=OSRGM5 303; 39= OSRGM6 304; 40=OSRGM6 305; 41=OSRGM6 306;

DOMAINS	COMPETENCIES	COURSE NUMBERS
<p>Domain 1: Professionalism On graduation a dental specialist will have the knowledge and skills to demonstrate autonomy, expert judgment, adaptability and responsibility as a practitioner and show leadership always taking into consideration the ethical principles and regulations.</p>	<p>A graduate specialist is expected to be competent in the following, as relevant to the specialty:</p> <ul style="list-style-type: none"> a. practicing with personal and professional integrity, honesty and trustworthiness b. providing patient-centered care, including selecting and prioritizing treatment options that are compassionate and respectful of patients' best interests, dignity and choices and which seek to improve community oral health c. recognizing the personal limitations and scope of the specialty and knowing when to refer or seek advice appropriately (only change the priority) d. understanding and applying the moral, cultural, ethical principles and legal responsibilities involved in the provision of specialist dental care to individual patients, to communities and populations e. displaying appropriate professional behavior and communication towards all members of the dental team and referring 	6,7,29,30



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	<p>health practitioners</p> <p>f. understanding and applying legislation including that related to record-keeping</p> <p>g. demonstrating specialist professional growth and development through research and learning</p> <p>h. supporting the professional development and education</p>	
<p>Domain 2: Communication and social skills with professionals and in society</p> <p>On graduation a dental specialist will be able to interpret and transmit knowledge, skills and ideas to dental and non-dental audiences.</p>	<p>A graduate specialist is expected to be competent in the following, as relevant to the specialty:</p> <p>a. identifying and understanding a patient's, or their parent's, guardian's or career's expectations, desires and attitudes when planning and delivering specialist treatment</p> <p>b. communicating effectively with patients, their families, relatives and careers in a manner that takes into account factors such as their age, intellectual development, social and cultural background</p> <p>c. use of technological and telecommunication aids in planning and delivering specialist treatment</p> <p>d. communicating effectively in all forms of health and legal reporting</p> <p>e. interpreting and communicating knowledge, skills and ideas.</p>	<p>9,15,19,25,26,32,33,36,37,39</p>
<p>Domain 3: Patient-centered care</p> <p>On graduation a dental specialist will, with a high level of personal autonomy and accountability, be able to apply highly specialized knowledge and skills in a discipline or professional practice. This includes clinical information gathering, diagnosis and management planning, clinical treatment and evaluation.</p>	<p>A graduate specialist is expected to be competent in the following, as relevant to the specialty:</p> <p>a. applying decision-making, clinical reasoning and judgment to develop a comprehensive diagnosis and treatment plan by interpreting and correlating findings from the history, clinical examinations, imaging and other diagnostic tests</p> <p>b. managing complex cases, including compromised patients with multidisciplinary management, and</p> <p>c. managing complications.</p>	<p>9,15,19,25,26,32,33,36,37,39</p>



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-Specific

A graduate specialist is expected to be competent in the following, as relevant to the specialty:

- a. Analyze clinical treatment plan
- b. Analyze radiological and laboratory tests of patients
- c. diagnosing and managing oro-facial pain
- d. Evaluate physical status of patient and history of present illness
- e. Distinguish different surgical situations
- f. Plan partial edentulous arch treatment with dental implants
- g. Elaborate a treatment plan for complete edentulous arches and different modalities of restoration with dental implants
- h. Determine different methods of oral hygiene around implants and how to manage failures and complications
- i. Identify the indication of laser use

Domain 4: Scientific knowledge, safe and effective clinical practice

On graduation a dental specialist will have a body of knowledge that includes the extended understanding of recent developments in a discipline and its professional practice, as well as knowledge of research principles and methods applicable to the specialty and its professional practice.

A graduate specialist is expected to be competent in the following areas of knowledge, as relevant to the specialty:

- undertaking dental and maxillo-facial treatment and rehabilitation
- a. historical and contemporary literature
 - b. the scientific basis of dentistry including the relevant biological, medical and psychosocial sciences
 - c. development, physiology and pathology of hard and soft tissues of the head and neck

1, 2, 3, 4, 5, 6,7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 39, 40, 41.



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- d. the range of investigative, technical and clinical procedures, and
- e. management and treatment planning with multidisciplinary engagement for complex cases, including compromised patients.

Specific

A graduate specialist is expected to be competent in the following areas of knowledge, as relevant to the specialty:

Choose the adequate prophylactic and curative medical prescription

- a. the principles of speech as related to interdisciplinary rehabilitation approach
- b. the basis and management of orofacial pain
- c. the principles and application of pharmacology.
- d. Consider treating medically compromised patients
- e. Associate radiographic approach to oral surgery
- f. Master surgical removal of impacted teeth
- g. Perform teeth impaction and germectomy surgery
- h. Perform endodontic surgery
- i. Perform preprosthetic surgery
- j. Excel orthodontic surgery
- k. Master orthodontic miniscrews placement
- l. Manipulate muco-gingival surgery
- m. Implement cyst surgery: enucleation, decompression, marsupialization
- n. Manipulate oro-antral fistula
- o. Apply implant surgery
- p. Implement different bone grafting techniques
- q. Excel internal and external sinus floor elevation
- r. Implement a guided surgical implant placement



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s. Identify head and neck injuries for hard and soft tissues (fractures, lacerations, contusion...)
t. Distinguish benign and malignant lesions of the oral cavities and jaws

Domain 5: Critical thinking

On graduation a dental specialist will have the expert, specialized cognitive and technical skills in a body of knowledge or practice to independently analyze critically, reflect on and synthesize complex information, problems, concepts and theories and research and apply established theories to a body of knowledge or practice.

A graduate specialist is expected to be competent in the following, as relevant to the specialty:
a. critically evaluating scientific research and literature, products and techniques to inform evidence-based specialist practice
b. Identify the different types of papers published
e. Evaluate and find trusted scientific papers
d. Recognize the IMRAD structure and how to analyze a research paper
e. Acquire the basic knowledge to interpret statistical tests and logical thinking
f. Review the evidence based concept and how to read such papers
g. Apply the PICO model and the problem based learning
h. Write an abstract and estimate the importance of the abstract in a paper
i. Analyze a paper from A to Z.
j. synthesizing complex information, problems, concepts and theories.
h. Innovate and apply new theories in a pilot investigation study that will be used for the final graduation

16, 17, 41.



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thesis of residents
i. Draw a dental office management strategy according to internal and external factors
j. Reproduce an Action Plan in dental clinics
k. Draw the map of stakeholders' influence in dental workplace

5. Admission Requirements for the program

- Diploma of Dental Surgeon, a Doctor of Dental Surgery or any other equivalent degree recognized by the Ministry of Higher Education.
- A competitive admission exam

6. Attendance and Completion Requirements

- Part time program: 3 full days
- 2019 hours of learning divided into: -Theory: 210 hours of basic sciences and 370 hours of oral surgery.
- Clinical surgical work 1439hours.

Requirements of completion: Pass all exams, all clinical requirements and the thesis defense.

E. Regulations for Student Assessment and Verification of Standards

What processes will be used for verifying standards of achievement (e.g., verify grading samples of tests or assignments? Independent assessment by faculty from another institution). Processes may vary for different courses or domains of learning.

- 1- Theory: Lectures, seminars, workshop have written continuing evaluation, written quizzes and a written final examination.
- 2- Clinical sessions: Continuous evaluation, final examination
- 3- Thesis defense: Grid of evaluation of the manuscript, oral presentation, jury questioning.

A. Student Administration and Support

1. Student Academic Counseling

Describe arrangements for academic counseling and advising for students, including both scheduling of faculty office hours and advising on program planning, subject selection and career planning (which might be available at college level).

The full time teachers and the Master Coordinator are present all the time during the program and are ready to help residents. Program planning should be done before they choose this Master program. There is no definite career planning organized by the Department but the Master Coordinator helps the residents, if they ask, and follows their integration into the world of business after their graduation.

2. Student Appeals

Attach regulations for student appeals on academic matters, including processes for consideration of those appeals.

- 1- Refer to decree number 2626/ 26-7-2016 and Faculty Council decision found in appendixes
- 2- An unsatisfied resident who got a grade different from the one he thinks; he has the right to ask for a second correction of his copy. He has to write an official letter to the Dean asking for a second correction and should present the letter within 72 hours from the day results were made public.

Feedback from the residents and evaluation of the course is obtained via surveys. This feedback contributes to the recommendations for improvement suggested by the course director.

The final marks of the residents in all courses are obtained and sent to the respective Department for review and analysis. Any course that is showing an odd distribution of the residents grades either positively or negatively is to be discussed with the course director. The reasons for this divergence and recommendations for avoidance are discussed and approved at the Department level.



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The resident's evaluations of the course directors are supplied to the Master Coordinator. The course directors who scored below average are considered by the Head of Department and potential reasons are privately discussed with the course director. Those courses are kept under close monitoring.

G. Learning Resources, Facilities and Equipment

1a. What processes are followed by faculty and teaching staff for planning and acquisition of textbooks, reference and other resource material including electronic and web based resources?

1. Every year a list of new textbooks is provided by the Dean to the Head of Department. The Department Council meets to decide which new books need to be added to the Library and see whether some old books can be discarded.

1b. What processes are followed by faculty and teaching staff for planning and acquisition resources for library, laboratories, and classrooms.

The Department has its own classroom, laboratories and clinics. They are independent from all other Master programs or undergraduate programs. New materials are ordered from the Faculty administration by the Head of Department.

1. What processes are followed by faculty and teaching staff for evaluating the adequacy of textbooks, reference and other resource provisions?

Looking at catalogues and google searches to find new editions and new textbooks.

2. What processes are followed by students for evaluating the adequacy of textbooks, reference and other resource provisions?

Residents receive a list of all textbooks available at the Oral Surgery library and they can check also the Faculty of Medicine Library nearby.

3. What processes are followed for textbook acquisition and approval?

Once the Department council approves new textbooks, the list is sent back to the Dean and upon approval an order is set.

H. Faculty and other Teaching Staff

1.Appointments

Summarize the process of employment of new faculty and teaching staff to ensure that they are appropriately qualified and experienced for their teaching responsibilities.

In this Master, staff is recruited from the graduate program of the Faculty. Candidates must have at least 5 years of teaching experience, have a title of "Chargé de Cours" or higher. Preference is given to staff of our Department.

If a teacher from outside the Department or the Faculty wants to join, he must have at least the same qualifications.

Recruitment is done when one staff member retires or if for some reason the number of residents surpasses the ratio of 1 teacher for 3 residents (This situation happened in 2018). In some situations, the recruitment can be temporary and is usually provided by the graduate staff of the Department.

2. Participation in Program Planning, Monitoring and Review

a. Explain the process for consultation with and involvement of teaching staff in monitoring program quality, annual review and planning for improvement.

An accreditation body will examine the program every 4 years starting by the first accreditation this year.

b. Explain the process of the Advisory Committee (if applicable)

The Department Council meets twice a year to evaluate the progress of the program and the need for a change or not.

3. Professional Development

What arrangements are made for professional development of faculty and teaching staff for:

a. Improvement of skills in teaching and student assessment?

1- Staff attend regular local and international scientific meetings, seminars, webinars, training programs given by other Universities, Dental and Medical Societies, Dental Associations.

2- Staff invite famous or well-known dentists around the world to come and give lectures, training sessions either practical or clinical

b. Other professional development including knowledge of research and developments in their field of teaching specialty?

Professors have the duty to direct Doctorate projects. Other staff direct master thesis projects. All staff are encouraged to publish research papers to get a promotion.

4. Preparation of New Faculty and Teaching Staff



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Describe the process used for orientation and induction of new, visiting or part time teaching staff to ensure full understanding of the program and the role of the course(s) they teach as components within it.

New staff are appointed according to their subspecialty in Oral Surgery. As a first step, they will be given clinical responsibilities and attend lectures and seminars for a certain period. As a second step, they will be allowed to give lectures and seminars under a supervision for another period of time. Later on, they can integrate fully the jobs in the Master program. As for the practical sessions, they help the main instructor until they can be on their own.

5. Part Time and Visiting Faculty and Teaching Staff

Provide a summary of Program/Department/ College/institution policy on appointment of part time and visiting teaching staff. (i.e. Approvals required, selection process, proportion of total teaching staff etc.)

The Department Council decides to invite a teacher for a punctual specific job during a lapse of time. If the person accepts he or she will give his conditions. The Head of Department transmits the proposal to the Dean who will discuss the matter with the Faculty Council. Once the approval is taken the Head of Department invites the foreign teacher to come.

I. Program Evaluation and Improvement Processes

1. Effectiveness of Teaching

a. What QA processes are used to evaluate and improve the strategies for developing learning outcomes in the different domains of learning?

1. Surveys from residents about staff, programs
2. Surveys from staff about residents
3. Surveys from residents about examination procedures
4. Surveys from Alumni

b. What processes are used for evaluating the skills of faculty and teaching staff in using the planned strategies?

1. Master coordinator and /or Head of Department **may** attend any theoretical or practical session.
2. Staff is invited by a peer lecturer to attend his session.

Master coordinator and /or Head of Department **attends** theoretical or practical session of new staff members if a senior staff does not accompany them.

2. Overall Program Evaluation

a. What strategies are used in the program for obtaining assessments of the overall quality of the program and achievement of its intended learning outcomes:

(i) From current students and graduates of the program?

1. Survey at the end of each theoretical and practical course
2. Follow up by the Master Coordinator to contact post-graduate residents after they completed the program and started working in private practices.

(ii) From independent advisors and/or evaluator(s)?.

1. It is the first Overall program evaluation done by external experts

(iii) From employers, Advisory Committee, and/or other stakeholders

1. This master has no employees other than the staff affected to the program

Authorized Signatures

Name	Title	Signature	Date
Doctor Georges Abi Khalil	Head of Department		
Professor Toni Zeinoun	Dean		



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List of annexes:

Annex 1: List of clinical requirements

Specific requirements	Number of requirements to be realized
Implant and Pre-Implant Surgery	
Implant Number	35
2nd Stage and with Muco-Ginival Procedures	20
Muco-Gingival Graft	3
Bone Regeneration with Bone Substitute / Splitting	3
Bone Graft, Autogenous	2
Internal Sinus Lift	2
External Sinus Lift	3
Mini-Screw / Temporary	-----
Implant Retrieval	-----
Surgery	
Third Molar Impaction and Germectomy	35
Retained Premolar Surgery	1
Retained Canine Surgery	1



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Supernumerary Tooth / Odontoma	1
Orthodontic Surgery (Frenoplasty or Displacement)	2
Pre-Prosthetic Surgery	3
Oro-antral fistula	-----
Endodontic surgery	-----
Pathology	
Biopsy	-----
Enucleation, Marsupialization, Decompression	3
Bone Resection (Torus, Regularization)	1