



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 1 OF 3

EDITION 1

**Date:** 16<sup>th</sup> March 2021

### **Introduction:**

The Master in Prosthodontics is a new program launched in June 2016 but started effectively in September 2016. Until today we had one graduate class 2018-2019. During the year 2019 we had economical (devaluation of the Lebanese Pound) and health problems (Covid-19 pandemic). This program is therefore quite similar in all the years starting in 2016 until today as it is still under evaluation and continuous improvement. The classes of 2019-2020 and 2020-2021 did not graduate yet due to the problems reported above and still have to complete clinical sessions and defend the thesis. For all these reasons the so called "annual report" will cover all years.

### **Program Information**

**Program Name:** Master in Prosthodontics

**Master Coordinator:** Professor José Johann Chidiac

**Program Level** (mark one):

Undergraduate                      X Master

## **Section 1: History, Development, and Expectations of the Program**

### **1.1 Program History, Development, Expectations**

Before 2016 the postgraduate program taught a "Diplome Universitaire" (DU) similar to the French DU from 1994-2016. This diploma had a positive appreciation locally and was recognized as a specialty by the Lebanese Dental Association and the Lebanese Faculties. Two important events made a difference: Internationally it was difficult to evaluate 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 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.

In 2016, It was decided to create a Master degree to improve scientific standards, start research projects, allow dentists to have a Master degree.



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 2 OF 3

EDITION 1

## 1.2 Program mission

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 prosthodontics 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.
- Develop, improve and encourage the higher education at the Faculty of Dental Medicine of the Lebanese University.
- Provide superior quality patient care with competence and professionalism while respecting the human being and his diversity.
- Foster thinking and critical analysis to achieve appropriate treatments for each clinical situation.
- Work for the good reputation of the faculty and the well being of the Lebanese community.

## 1.3. Program vision

“Train specialized dentists who can integrate into their work environment and become a community reference in the excellence of care promulgated to patients with integrity and professionalism”

## 1.4. Program objectives

- Biomedical / Basic Sciences: Exposing residents to biomedical and basic sciences, emphasizing basic science-prosthesis interrelationships and encouraging the synthesis and application of this knowledge in clinical practice.
- Diagnosis and Treatment Planning: Provide residents with sufficient clinical and laboratory experience to become proficient in diagnostic data collection, diagnosis, treatment planning, and treatment sequencing of complicated prosthetic patients.
- Critical analysis of relevant professional literature: expose residents to prosthetic literature and supporting literature to develop a historical perspective and provide theoretical foundations for diagnostics, techniques and procedures, management, successes and failures / complications in the clinical practice of fixed implants, removable prostheses, occlusion, orofacial pain and maxillofacial prosthesis.
- Mastering the skills in the dental laboratory: Ensuring the competence of residents in the laboratory procedures necessary to support the clinical diagnosis and treatment of prosthetic patients to ensure the quality of treatment results.
- Master clinical competence and gain patient confidence and satisfaction: Train residents to provide prosthetic treatments to patients in conditions of comfort, function and aesthetics. This Master's program is primarily clinical.



**DEPARTMENT: ACD / ACADEMIC**

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IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 3 OF 3

EDITION 1

- Faculty: To provide a faculty composed of high quality dentists and prosthetic specialists with broad clinical skills, knowledge and expertise in order to put more emphasis on the mission of competencies in the standards related to the curriculum.
- Scientific research and activities: Provide formal instructions on research design, development of research protocols, biostatistics and report / thesis writing.
- Continuing Education: Encouraging residents to join national and international prosthetic organizations and societies in the hope of contributing to dentistry, their specialty and their local communities through service, thereby preparing graduates to become dentists who are always looking for updates in information and techniques.
- Adopt a continuous improvement approach integrating skills development.
- Optimize digital solutions that are essential to teaching.

### 1.5. Connection of program mission, vision, objectives to LU mission and vision.

"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 as well as general dental practitioners to have a higher degree of education.

## Section 2: 2020-21 Program Learning Outcomes Reported

**2.1 Program Learning Outcome (PLO) -** as stated on the program specifications (please refer to program specification in the annexe. (Annexe Program specification))

DOMAINS	COMPETENCIES
<p><b>Domain 1: Professionalism</b> 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> <ol style="list-style-type: none"> <li>recognizing the personal limitations and scope of the specialty and knowing when to refer or seek advice appropriately.</li> <li>practicing with personal and professional integrity, honesty and trustworthiness.</li> <li>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.</li> <li>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.</li> <li>displaying appropriate professional behavior and communication towards all members of the dental team and referring health practitioners.</li> <li>understanding and applying legislation including that related to record-keeping.</li> </ol>



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 4 OF 3

EDITION 1

	<p>g. demonstrating specialist professional growth and development through research and learning.</p> <p>h. supporting the professional development and education.</p>
<p><b>Domain 2: Communication and social skills with professionals and in society</b></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, and interpreting and communicating knowledge, skills and ideas.</p>
<p><b>Domain 3: Patient-centered care</b></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 managing complications.</p> <p>Specific</p> <p>A graduate specialist is expected to be competent in the following, as relevant to the specialty:</p> <p>a. undertaking dental and maxillo-facial treatment and rehabilitation.</p> <p>b. diagnosing and managing disorders of the temporomandibular joint.</p> <p>c. diagnosing and managing orofacial pain, and evaluating, diagnosing and managing occlusions and occlusal dysfunction.</p>
<p><b>Domain 4: Scientific knowledge, safe and effective clinical practice</b></p> <p>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.</p>	<p>A graduate specialist is expected to be competent in the following areas of knowledge, as relevant to the specialty:</p> <p>a. historical and contemporary literature.</p> <p>b. the scientific basis of dentistry including the relevant biological, medical and psychosocial sciences</p> <p>c. development, physiology and pathology of hard and soft tissues of the head and neck</p> <p>d. the range of investigative, technical and clinical procedures, and</p> <p>e. management and treatment planning with multidisciplinary engagement for complex cases, including compromised patients.</p> <p>Specific</p> <p>A graduate specialist is expected to be competent in the following areas of knowledge, as relevant to the specialty:</p> <p>a. the principles of speech as related to teeth.</p> <p>b. the basics and management of orofacial pain.</p>



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 5 OF 3

EDITION 1

	<p>c. the principals involved in design of prostheses for the replacement of oral and maxillofacial structures.</p> <p>d. removable, fixed and implant, oral and maxillofacial prosthodontics.</p> <p>e. sleep disorders.</p> <p>f. dental materials.</p> <p>g. application of pharmacology.</p>
<p><b>Domain 5: Critical thinking</b> 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.</p>	<p>A graduate specialist is expected to be competent in the following, as relevant to the specialty:</p> <p>a. critically evaluating scientific research and literature, products and techniques to inform evidence-based specialist practice.</p> <p>b. synthesizing complex information, problems, concepts and theories.</p>

**2.2. Describe or attach what students do that is assessed for the PLO (i.e., the assessment measure(s))** – e.g., information provided on syllabi; instructions for students; sample questions etc.

Information should attest to the measure(s) being valid and not biasing any subgroups

a- Residents receive the syllabus of all the program. This syllabus includes all theoretical (lectures, seminars, workshops), practical sessions and clinical sessions. It is a good information tool as it gives the length of each course in hours, how many credits it counts for and who are the instructors involved in it. Finally there is a detailed description of how this course will be evaluated. Residents have also a detailed schedule of the six semesters and what courses are taken in each semester. They are also aware that they need to defend a Master thesis.

b- Residents also receive the guidelines of how to write a thesis and also the examination system rules and attendance to courses. They finally receive the Master thesis guidelines on how to write and present their thesis.

c- Theoretical knowledge is evaluated in general at the mid of every course with a continuous evaluation written exam supported sometimes by quizz. This continuous evaluation counts for 30% of the final grade. Regulations of all Master programs say that final written exams are due on week 18th at the end of every Semester. The final examination counts for 70% of the final grade.

d- Practical knowledge is noted every practical session. The mean grade of all sessions is the continuous evaluation grade that counts for 60% of the final grade. A final practical examination is set one week after the last session and counts for 40% of the final Grade. It is divided into an oral examination (20% of the final grade) and a practical exam (for the other 20%).



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 6 OF 3

EDITION 1

e- Clinical knowledge is noted every clinical session. The mean grade of all sessions is the continuous evaluation grade that counts for 40% of the final grade while the final clinical examination counts for 60% of the final grade and is done at the end of each clinical course.

f- Professionalism is evaluated all along the examination procedures. The ability of residents to analyze and criticize each prosthodontic and medical problem, to find several options for each treatment, to convince the patient and help him choose one option and to finalize the treatment in a satisfactory manner are evaluated with the marking system set up by the Departmental Council and described above. This system also is satisfactory to measure all program learning outcomes set: Communication and social skills with professionals and in society and patient centered care (clinical grades), scientific knowledge, safe and effective clinical practice (clinical, practical, theoretical grades) and critical thinking (theory grades). It is common to see residents improving their grades on every new semester as a good sign of improvement in their program learning outcomes.

**2.3 Describe how the measure is assessed and data are analyzed** - e.g., rubrics or rating scales, if applicable; who conducts the assessment; data analysis; etc. Descriptions should attest to reliability and not biasing any subgroups

a- The marking system is clear for courses that involve one type of learning outcome (lecture, seminar, workshop, practical or clinical). For every 10 hours of lectures you count one credit of learning and for every 15 hours of seminars, workshops, practical sessions or clinical sessions you count one credit of learning.

It becomes more complicated when it comes to courses with several types of learning like a combination of lectures, seminars, workshops and practical session (i.e. course PROSM3 202 on implants). In such situations grades depend on a formula that takes into account the proportional amount of credits of different learning outcomes (lecture, seminar, workshop, practical or clinical) and the final grade is the sum of all these. As an example, the course PROSM3 202 on Implantology has several types of learning. The grades for the course are calculated as follows: Lectures (20h = 2 credits), Seminars (30h = 2 credits), Workshop (15h = 1 credit) and Practical (15h = 1 credit). Total is 80 hours and 6 credits. Total grade is  $0.33L+0.33S+0.17W+0.17P$ .

b- The passing grade is 12/20 for all courses. However a resident cannot pass a class if he failed a clinical course (as this Master is mainly clinical). For all other courses a resident can fail up to a maximum of 3 courses/year with a grade of less than 12/20 and still pass a class. He will have to repeat the courses he failed during the next year.



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 7 OF 3

EDITION 1

Starting 2021, feedback from the residents and evaluation of the course is obtained via surveys prepared by the quality assurance committee. This feedback contributes to the recommendations for improvement suggested by the person in charge of the course.

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 resident grades either positively or negatively is to be discussed with the person in charge of course. The reasons for this divergence and recommendations for avoidance are discussed and approved at the Department level.

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

e- Before official grades are given to the administration and made public, Faculty staff meet in a closed session to deliberate the border line gradings of one or more residents. The final grade can be modified or not and are then given to the administration. In case one or more residents have border line failures the Faculty Council headed by the Dean meet and take the final decision.

## **2.4 Results**

These results are from 2016 when the program started until 2020 because there are no available data for 2021 yet. However the number of residents is not the same for each year and for each semester. In 2017 one resident quitted the program to immigrate to the UK. In 2019 two residents quitted the program due to the economic situation of the country and went to Germany to finish their studies and be established there. In 2020 the Faculty Council decided to stop admitting new residents to all Master programs until the economic situation and the covid-19 pandemic get better. In 2017, following the first year of launching the Master program and after an auto-evaluation by the Master Coordinators, the Faculty Council decided to modify the programs by removing some basic sciences courses and adding new basic sciences and other ones. For this reason the class of 2018 -2019 is different from other classes and they do not share the same basic sciences courses. All these changes have an impact on the number of residents that count on each course especially in semesters 1 and 2. In conclusion the evaluation will be made with the following number of residents:

- Semesters 1 and 2: 14 to 26 residents depending on the course.
- Semesters 3 and 4: 14 to 20 residents.
- Semesters 5 and 6: 9 to 14 residents.
- Clinical sessions courses have two separate conditions: A clinical grade after each semester and the clinical requirements counted over the 3 years period. Clinical grades are continuous



**DEPARTMENT: ACD / ACADEMIC**

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IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 8 OF 3

EDITION 1

evaluations grades taken during several clinical sessions and a final clinical examination at the end of each clinical course. To pass the resident has to succeed each clinical course with a grade of minimum 12/20 and has to fulfill, over a period of 3 years, at least 75% of all the target clinical requirements. Details are given below.

- **Total course numbers assessed: 36.** From the 41 courses of the program, the 5 courses remaining are 3 for the thesis and have 0 credits and 2 CAD/CAM new courses that are given in 2021.

### I: Grades of all 36 Residents Courses

1= Number who attended the course. 2= Grades of all residents. 3= Mean value of all residents grades

Satisfactory performance is a grade of 80/100 for theory and 75/100 for practical and clinics

CODE	COURSE TITLE	1	2	3
<b>FIRST SEMESTER</b>				
BASC M1 101	Histology & Embryology / stem cells	26	77.65/82.66/88.51/81.83/85.17/72.41/67.3/71.66/88.48/81.66/85.83/60/85/88/80/71.25/81.7/64.13/67.98/85.62/83.03/72.41/68.33/66.67/83.33/83.33/	<b>80.95</b>
BASC M1 102	Orofacial Physiology	25	74.14/74.73/73.06/83.08/77.73/70.99/66.15/81.85/80.49/70.99/72.98/73.85/79.21/78.6/75.57/76/72/72/80/80/70.5/92.73/67.15/77.27/89.1/	<b>80.31</b>
BASC M1 103	Topographic anatomy	15	88/96/84/95/96/91.5/97/87.5/83.5/87.5/86/90/90/82.5/85/	<b>89.30</b>
BASC M1 104	Microbiology	15	76/77/83/83/93/94/92.5/86/86/92/74/87.5/60/60/83/	<b>81.80</b>
BASC M1 105	Immunology	14	69/92/78/84/86.5/84/74/84/82/64/76/50/80/82/	<b>78.25</b>
MNGT M1 101	Strategy, organization and action plan	25	82/62/72/87/84/77.75/78.62/80.7/81.63/85.3/95.3/85.5/86.4/83/83.3/60.7/72.75/67.85/60/73.7/63.55/86/62/72.5/70.5/	<b>76.50</b>
MNGT M1 102	Quality systems, accounting and legal affairs	25	60/60/67/71/70/85.25/68/72.88/100/88.69/82.5/85.25/100/99/90/62.7/70.6/68.15/61.3/68.5/66.05/69/72/71/89/	<b>75.90</b>
PROS M1 101	Pros Clinic 1	25	61.5/73/63.25/65/67.5/67.5/65/70/67.5/67.5/60/60/60/70/60/65/63/62/65/67.5/68/64/60/65/65/	<b>64.89</b>
PROS M1 102	Pros Practical 1 (Fixed Prosthodontics)	25	64.4/70/65/65.25/72.6/65/65/65/67.5/70/65/65/65/70/65/68/68.5/70.5/78/68/64.4/65/66.25/70.6/	<b>67.36</b>
PROS M1 103	Implantology (Part 1)	24	61.75/72/73.5/69.75/68.5/71.25/67.5/69/74.5/62.5/62/70.75/66.5/70/70.23/73.56/73.38/69.62/76.19/73.13/65/63/73/62/	<b>69.10</b>
PROS M1 104	Managnt patient medically compromised..	24	87.5/91.25/85/81.25/90/79.01/78.17/81.91/77.54/82.47/77.37/82.15/74.76/78.12/90/90/92.5/90/93.75/83.75/78.75/60/75/80/	<b>82.51</b>
PROS M1 105	Anesthesia and sedation	15	93.3/86.6/86.6/96/90/100/85/80/100/80/80/90/92.5/92.5/90/	<b>89.5</b>
<b>SECOND SEMESTER</b>				
BASC M2 106	Molecular Biology	15	77.5/87.5/77.5/75/72.5/62.5/80/82.5/92.5/90/60/70/87.5/77.5/90/	<b>78.34</b>
BASC M2 107	Biophysics and Laser	24	73.34/80/80/80/73.34/83/70.46/67.6/77.72/63/84.36/78.26/65.86/64.32/76.67/76.67/83.33/93.33/66.67/60/71/60/70/69/	<b>73.78</b>
BASC M2 108	Dental Biocompatibility	25	77.5/81.5/79.5/89.5/79.5/80.32/75.27/85.2	<b>78.10</b>





Faculty of Dental Medicine  
Lebanese University

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CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 9 OF 3

EDITION 1

			8/85.42/62.72/65.71/72.12/68.04/69.34/73.43/87.5/65/82.5/80/82.5/70/88/84/82/86/	
BASC M2 109	Laboratory tests: Routine & special...	24	73/83/73/80/88/75/77.5/62.5/70/66.25/77.5/77.5/72.5/71.25/60/65/70/86.25/78.75/60/88/63/80.5/84/	<b>74.27</b>
BASC M2 110	Biostatistics	24	81/80/72/95/80/93.5/87/77/100/92.5/70/83.5/87/67.5/82.86/75.71/74.29/82.86/91.43/61.45/76.5/90/86.5/93.5/	<b>82.54</b>
BASC M2 111	Article analysis & bibliographic research	20	60/60/70/80/90/85/60/63.25/65.77/96.5/88.25/72.5/71.5/98.25/90/90/80/80/90/	<b>78.55</b>
PROS M2 104	Complete dentures	24	69.75/65.88/72.38/72.5/73.88/69.75/80/65/82.5/87.5/85/62.5/77.5/65/75/68.31/63.06/63.75/62.12/73.75/64.75/80/75/77.5/77.5/	<b>75.41</b>
PROS M2 105	Dental materials	24	60.15/73.25/67.5/71.88/72.38/87.5/72.5/73.7/80/86.25/81.25/80/60/73.7/78.5/60.13/63.25/61/68/63.25/60/85/82.5/83.5/	<b>72.71</b>
PROS M2 106	Pros Clinic 2	21	64/74.25/65.75/71.75/70.75/62.5/60/60/65/62.5/72/70/65/67.5/66.75/65/64/66.75/68.25/68.5/60/	<b>66.20</b>

CODE	COURSE TITLE	1	2	3
<b>THIRD SEMESTER</b>				
PROS M3 201	Fixed Prosthodontics (Part 1)	20	62.97/70/72.5/75/70/66/61/67.25/63.95/69.25/68.65/80.9/63.25/64/70.4/63.75/70.2/82.49/74.05/66.05/	<b>66.08</b>
PROS M3 202	Implantology (Part 2)	20	70/82.5/87.5/80/82.5/72/61.5/68.5/67/65/62/72.75/73.5/68/67.08/65/67.8/67.88/73.13/70.1/	<b>71.18</b>
PROS M3 203	Partial Dentures (Part 1)	20	71/74/72.75/73.13/73.63/65/62/74/66.5/66.5/62/68.75/65/66/65.3865.5/64.97/75.9/85.32/70.07/	<b>69.32</b>
PROSM3 204	Gerodontology	20	82.5/84.24/86/89.5/87.75/90/85/80/90/90/60/80/85/80/82.5/82/85/85/83.5/82/	<b>83.49</b>
PROSM3 205	Pros Clinic 3	20	70.75/71/68/73/66.75/68.5/66.5/73/65.5/70/67.5/68.25/63/73/68.25/68.75/64/63.75/80/73.25/	<b>69.13</b>
PROS M3 206	Biomedical ethics	19	85/63.5/71.9/68.7/60.4/75/60/60.8/60/70/68.4/67.5/79.7/65.65/75/74/85/87/64/	<b>70.6</b>
<b>FOURTH SEMESTER</b>				
PROS M4 206	Fixed Prosthodontics (Part 2)	19	62.97/72.62/69.5/70.4/78.35/64.94/63.33/63.93/65.31/60.07/67.25/64.61/62.57/60.91/62.5/72.5/76.25/70/72.5/	<b>64.10</b>
PROS M4 207	Maxillofacial Prosthodontics	19	81.25/75/77.5/85/82.5/62.77/77.5/70.33/69.33/68.33/62.47/67.94/71.1/61.67/69/60/75/81.7/80/70/	<b>72.32</b>
PROS M4 208	Partial Dentures (Part 2)	19	71.44/72.13/72.44/75.19/74.38/64.63/61.88/73.75/66.5/65.13/60/60.88/69.75/64.75/70/82.5/75/92.5/77/	<b>71.04</b>
PROS M4 209	Pros Clinic 4	14	71.44/72.13/68/73/66.75/72.5/68/73/71.5/72/62.5/66.5/65/61.5/	<b>68.84</b>
<b>FIFTH SEMESTER</b>				
PROS M5 301	Occlusion	14	69.1/65.75/67.8/65.45/65.45/71.9/67/75.2/71.3/67.8/71.5/71.8/78.1/68/	<b>69.72</b>
PROS M5 302	Pros Clinic 5	14	73.25/78.75/66.25/74/65/67/70.25/64/72.5/63.5/63/64.5/71/60.5/	<b>68.10</b>
<b>SIXTH SEMESTER</b>				
PROS M6 303	Orofacial Pain	14	80/80/80/80/80/84.5/72.85/88.67/87/86.33/78/86/89.5/84/	<b>82.63</b>
PROS M6 304	Pros Clinic 6	9	75/70/62/79/67.5/63.5/63.5/67.5/74/	<b>69.11</b>
PROS M6 305	Forensics in Prosthodontics	15	70/65/67.5/62.5/80/67.5/77.5/67.5/62.5/75/62.5/67.5/65/62.5/	<b>68.03</b>



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 10 OF 3

EDITION 1

Number of courses meeting satisfactory performance: The value taken for a course to be satisfactory has been set to have its mean grade 13.5/20 or 67.5/100. **Out of 36 courses 32 reached that value (88.88%).** The 4 courses left are: 2 clinical courses of the first year (64.89 and 66.2) which is comprehensible as residents are not well trained in the clinic therefore their grades are below the 67.5 value, one course is the practical course of the first year first semester and the grades (67.36) have an almost close value (-0.11 to reach the required 67.5) for the same reason. The final course with a low grade is the **fixed prosthodontics part 1 (66.08)** and it should be discussed with the instructor in charge as to why it should have needed 1.42 grades to reach the required value.

## **II: Clinical Requirements Class 2019 of the Master in Prosthodontics**

To complete his Master the residents need to validate the clinical requirements.

The resident has to fulfill at least 75% of the *target* requirements or they *equivalent* to validate his clinical courses.

Those requirements are set from the first year, first semester and the resident has to validate them during his 3 years stay in the program. He will be accounted for at the end of the third year during the sixth semester.

Details of those requirements are in the table below:

### 1- TARGET REQUIREMENTS:

50 CMR; 25 ISR; 25 VEN; 50 FCR; 6 RCD; 1 RID; 3 RPD; 1 IOV;

2- X = EXTRAS i.e. post and cores; acrylic partial dentures.

### 3- EVT: Equivalence as follows:

2 post & cores = 1 crown

1 veneer = 1 crown

1 implant supported denture crown = 1 crown

1 removable complete denture = 2 crowns

1 removable immediate complete = 2 crowns

1 implant overdenture = 2 crowns

1 removable partial denture metallic = 2 crowns

1 removable partial denture acrylic = 1 crown

### 4- TABLE NOMENCLATURE:

CMR: Ceramometallic restoration

ISR: Implant supported restoration

VEN: Veneer

FCR: Full ceramic restoration

RCD: Complete denture

RID: Removable immediate denture

RPD: Removable partial denture

IOD: Implant overdenture

X: Extras

#: Percentage of achievement compared to the target

5- TABLE OF GRADUATES, CLASS OF 2019 (the only class having graduated since 2016):

Requirements Target Number	50 CMR	25 ISR	25 VEN	50 FCR	6 RCD	1 RID	3 RPD	1 IOD	X	EVT	100% of requirement equivalent to 172 crowns
Resident Work Done											% done
Mario Chayaa	40 (-10)	45 (+20)	16 (-9)	66 (+16)	4 (-2)	0 (-1)	4 (+1)	0 (-1)	21 posts	more than needed	106%
Mira Hamed	48 (-2)	61 (+36)	18 (-7)	14 (-36)	2 (-4)	0 (-1)	2 (-1)	1	42 post 12 Acrylic partial dentures	more than needed	107%
Roudy Matar	20 (-30)	80 (+55)	38 (+13)	31 (-19)	2 (-4)	0 (-1)	0 (-2)	2 (+1)	20 posts	more than needed	106%
Rackelle Haddad	17 (-33)	76 (+51)	20 (-5)	11 (-12.5) (-14) (-12.5)	10 (+4)	0 (-1)	0 (-3)	0 (-1)	29 Posts 2 acrylic partial dentures	29 Posts 2 acrylic partial dentures	91.67%
Yasmine Rachidi	15 (-35)	66 (+41)	24 (-1)	18 (-32)	3 (-3)	2 (+1)	1 (-1) (-0.5) (-0.5)	0 (-1)	64 Posts 2 acrylic partial dentures	64 Posts 2 acrylic partial dentures	98.8%
Chirine Allaw	22 (-13) (-15)	38 (+13)	21 (-4)	26 (-24)	3 (-3)	0 (-1)	0 (-3)	0 (-1)	39 posts	39 posts	77.3%
Nour Atwi	34 (-7) (-6) (-3)	32 (+7)	4 (-8) (-13)	8 (-13) (-7) (-22)	4 (-2)	9 (+8)	0 (-3)	5 (+4)	25 posts 7 acrylic partial dentures	25 posts 7 acrylic partial dentures	77.9%
Mohammad Yassine	53 (+3)	23 (-2)	3 (-22)	32 (-3) (-4) (-11)	5 (-1)	0 (-1)	0 (-2) (-1)	0 (-1)	19 Posts 4 acrylic partial dentures	19 posts 4 acrylic partial dentures	79%
Sara Kahil	48 (-2)	66 (+41)	0 (-18) (-7)	8 (-41) (-1)	3 (-3)	0 (-1)	0 (-3)	0 (-1)	36 posts	36 posts	84%

**MEAN VALUE OF GRADUATE CLINICAL REQUIREMENTS ACHEIVEMENT: 91.96 %**

**2.5 Interpretations of results**

This program being new with only one graduate class so far, it is difficult to answer this part as most of the answers have already been said before. Having said that and due to the economical crisis in Lebanon the target clinical requirements will have to be modified accordingly therefore reducing their numbers. This decision however should not reach the limit of compromising the quality of the program.

**2.6 Recommendations for improvement as informed by the assessment data**

Having a score of 88.88% of courses with a mean grade of 13.5/20 is quite acceptable. There is one course PROSM3 201 Fixed prosthodontics Part I that needs to be reviewed as to how the residents are noted. For the clinical sessions of the first year (they constitute 33.33% of all clinical sessions),



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 12 OF 3

EDITION 1

residents have low grades as they are not experienced enough to handle complex cases. This new program has already been modified following the first year of running and new basic science courses and medical ones were added while other basic sciences courses were removed by decision of the Faculty Council during their evaluation of the new Master programs in general.

In summary, until today the Department Council of the Prosthodontics Department will work more on improving the techniques of teaching like the problem based learning rather than on modifying the content of the courses at least until there are several graduate classes and until the program has been evaluated for several years by the quality assessment committee, the Department council and the Faculty Council.

### **Section 3: 2020-21 Assessment Processes and Summary**

Provide responses to these items collectively for the program's assessment work specific to the PLO(s) described in Section 2 for the 2020-21 assessment year. Do not include information from previous years for these items.

#### **3.1 Description of the Faculty and/or Staff Assessment Review Process for 2020-21 Assessment:**

Over 100% their answers is of good value with 77% of satisfied and very satisfied answers (38% satisfied and 39% very satisfied), 13% neutral and 7% unsatisfied while 3% didn't answer. In fact, the real response rate is that 79.3% were satisfied or very satisfied, 13.4% were neutral and 7.2% were unsatisfied when you take out the 3% that did not answer.

The response rate was relatively high, which can help generalize the results to the faculty members population.

In general, the overall satisfaction and perception was very good for all topics that were addressed.

Nevertheless, some observations and recommendations might be considered:

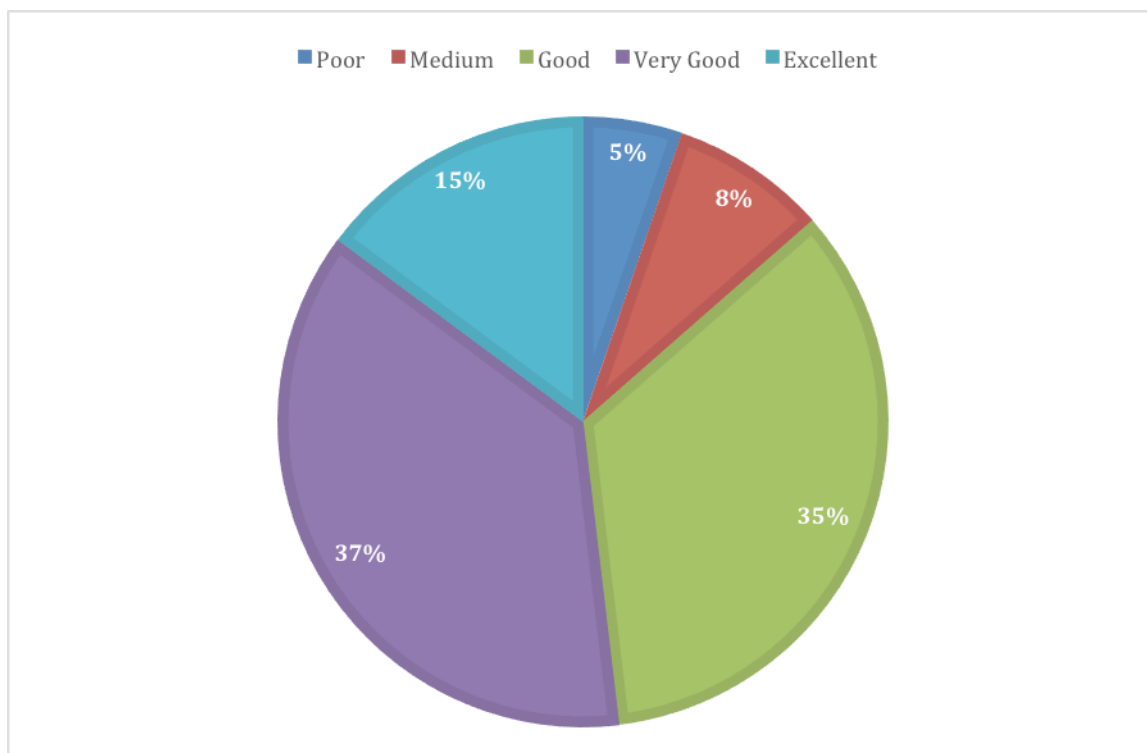
- Interdepartmental communication should be improved.
- Financial support and funding provided by the faculty should be improved.
- Focus on improving the library services
- Improve research facilities and research funding at the faculty.

Details can be found in the annexe. (Annexe Survey and report of instructors)

#### **3.2 Input/Involvement of Students, Other Stakeholders, and External Sources in Assessment Activities for 2020-21 Assessment**

All in all, the cumulative results of the survey of didactic courses given to residents is 87% satisfactory with a distribution as follows: 35% good, 37% very good and 15% excellent with 52% greater than the value good and only 13% under the value good.

These results are however of limited value when evaluating the individual courses due to the number of participants that was between 6 and 8 for each course taken separately but with a more significant value when all courses results are combined together as the number becomes more significant with a total number of answers arriving at 36 answers for the good and very good values for example. These statistics tests (not the results) apply to all Master programs as the number of residents are almost the same in all Masters.



**3.2 Overall Assessment Summary for 2020-21 PLOs Reported and Action Plan Moving Forward (including resources and timeline as applicable):**

For a new Master program, the satisfaction scores are quite acceptable. There are however improvements that are needed especially in the provision of a better library with more journals that can be accessed online, an administrative support of helpers like secretaries, clinical staff helpers, etc...

As for the courses in general there is a general tendency towards a good satisfaction but this is not a reason to stop improving the program like for instance introducing the problem based learning system and improving the online experience especially that nowadays these teaching methods are being heavily used.



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 14 OF 3

EDITION 1

#### **Section 4: Faculty/Staff/Student Accomplishments**

- **Scholarship and Creative Endeavor:**

Grant provided by the "Centre National de la Recherche Scientifique" in order to achieve a Doctorate thesis.

- **Teaching and Learning:**

2020: Training sessions to learn using Zoom and Microsoft software for teaching.

2018: Fradeani Institute session for training residents and dentists

- **Service:**

Voluntary work by residents at the mobile dental clinic in Getawi Hospital (Ashrafieh, Beirut) after the disaster of Beirut port explosion in August 4 2020 (in collaboration with the International College of Dentists, Lebanon chapter).

#### **Section 5: Alumni Information**

The training has data relating to the follow-up of students leaving the FMD. FMD graduates are members of the Association of Graduated Dentists of the Lebanese University (approved on 6/2/1988). The friendly currently has more than 1,100 graduates. Specific information for each graduate (names, email addresses, phone numbers) is maintained by the FMD administration.

The quality committee recently set up a satisfaction questionnaire for new graduates. This questionnaire was sent by email to graduates of the years 2018-2019 and 2019-2020.

(Appendix satisfaction questionnaire). 91 new graduates responded to the questionnaire: 30 graduates from the year 2018-2019 and 61 from the year 2019-2020. According to the survey results, 69% of graduates are satisfied with the level of education received at FMD and 55% are satisfied with the skills acquired in the clinic. As for their professional integration, 94.5% of graduates found it very difficult to integrate into the job market, the faculty not offering them any support. The questionnaire as well as the results of the satisfaction surveys are available in the appendix.

Another satisfaction questionnaire was conducted with former graduates (n = 462) from 2015 to 2020. The results show that 36.69% (167 graduates) answered the questionnaire, including 117 women versus 50 for men. Among these graduates, 44.4% (74/167) continued their studies in 3rd cycle of which 19.8% (33) as specialists and 41 in the course of specialization.

The specialties chosen show a variation in the choice, with higher frequencies for prosthesis, pedodontics, periodontics, orthodontics, oral surgery and endodontics.

Regarding professional integration, among these 167 graduates, 71.3% work as generalists, 20.4% as specialists and 8.4% do not practice. Of the 153 (84.4%) who work, 12 work abroad. Of the 141 working in Lebanon, 57% work in urban areas, 21% in rural areas and 22% in both regions.



**DEPARTMENT: ACD / ACADEMIC**

**TITLE: Annual Program Report**

CODE: ACD/AC – FO – 6.1-E

IMPLEMENTATION DATE:  
18/01/2021

REVIEW DATE: 18/01/2024

PAGE 15 OF 3

EDITION 1

There are 15 graduates working in other sectors, particularly in teaching and clinical research. 6 graduates joined the Armed Forces, 9 integrated dental faculties into teaching, 6 are involved in health prevention policies and 13 participate in epidemiological research on oral health (Alumni Annex).

Newly, 3 people of our former graduates were able to integrate and be registered as dentists after their course at FMD with the "General Dental Council" in the United Kingdom. Annex Scann Pdf Yasmina

The pursuit and coordination with graduates must be one of the objectives of the FMD in order to perform these academic programs according to the needs of their professional integration. (Proposal in the Quality Assessment Plan)

### **Section 6: Resource Allocation Request**

This program will need to have more staff recruited in the administrative work. Secretaries to help the Master Coordinator in his administrative work, to schedule appointments to patients and their corresponding residents, to keep up with the clinic maintenance and demands.

The residents and staff should have access to a greater number of scientific journals and the library should provide them with access to more dental and medical journals.

Grants should be more seriously looked at to further improve the research in the Department.

The residents should have a rest room where they can eat and have breaks.

The Faculty in general should have a proper cafeteria with coffee, snacks, etc...