

Chairman's Report 2006



Professor Paul Coulthard
DSTG Chairman

I am delighted to take up the post of Chairman of the DSTG. This is a great opportunity and a great time to lead the group forward. The DSTG was set up in 1993 when Meg Skelly, Fiona Simpson, Nigel Robb, David Craig, Carole Boyle and I met together and determined that the standards of teaching of conscious sedation in dentistry should be improved. At the time only a few dental schools were teaching conscious sedation techniques to undergraduates to a level attempting to approach competence. The teaching of sedation is now much more widespread and comprehensive across the UK and Ireland. However the need for dentists to have sedation skills as part of their armamentarium when seeking to offer quality pain and

anxiety management for patients is not accepted by all of our profession. At a time when undergraduate numbers are increasing and with no real change in the number of teachers, the importance of promoting and advancing the teaching of conscious sedation techniques could not be greater.

I believe that DSTG must continue to operate as a support and pressure group but we should also gather the evidence to support our cause. We know that some patients will always need the availability of conscious sedation techniques to permit their dentistry to be undertaken but we need to provide the evidence for this. We also need to promote the best of sedation practice incorporating the best of clinical research evidence in our support of the teachers. We need too to promote excellent practice in teaching and learning.

There are around 400 members of the DSTG. Over one hundred of these, including 20 new members, attended our last annual Symposium. This was organised by Carole Boyle and

was an excellent meeting held in London. Carole completed her term of office as Chairman and will now hold the office of immediate past Chairman for one year. I would like to thank Carole for the tremendous job she has done.

Shelagh Thompson who has been our Treasurer and Membership Secretary also completed her term of office and took up one of the elected positions on the committee. Lesley Longman was elected to the office of Honorary Secretary and Chris Dickenson to the office of Honorary Treasurer and Membership Secretary. Chris Wright was re-elected and Mick Allen newly elected to the committee. Vicky Kewley and David Jordon completed their term of office. I would like to thank them both for their contribution over the last few years and also a special thanks to Shelagh Thompson who has done a fantastic job looking after our accounts and membership.

The next Symposium to be held in Birmingham on 15th May 2007. I look forward to meeting with you then.

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Diary Date

Annual DSTG Symposium

**Alex MacGregor Lecture Theatre
Birmingham Dental Hospital
Birmingham**

Tuesday 15 May 2007

Please send abstracts to:

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DSTG Annual Symposium

KCL Dental Institute, London

9 May 2005

The theme of this year's Annual Conference, held on the Kings College campus, London, was 'Undergraduate Sedation Teaching. Where are we?'

Carole Boyle, lady Chairman of DSTG, welcomed delegates; she described that just over a decade ago half a dozen sedationists met to discuss the establishment of a group with the aims of improving standards of teaching conscious sedation in dentistry. DSTG has now developed into the current thriving organisation.

In order to ascertain what was happening throughout dental schools with regard to undergraduate sedation teaching a questionnaire had been designed and circulated to fourteen dental school representatives within the umbrella of DSTG. The purpose of the symposium was to report on, and to interpret, the findings.

The questionnaire was comprised of five sections:

1. Who teaches sedation and where
2. Course description
3. Role of DCP's in teaching sedation
4. Protocols
5. Course materials

Chris Bell, University of Bristol Dental School representative opened the innings with a presentation that discussed results of Section 2, Course Description. This set out to determine the extent of

undergraduates (UG's) exposure and 'hands on' experience of Inhalational Sedation (IS) - to adult and paediatric patients, Intravenous Sedation (IVS), observation of - and number - adult and paediatric IS cases and observation of - and number - IVS cases.

Further questions looked at UG sedation experience at outreach centres, teaching in alternative methods of pain and anxiety control and teaching in the use of sedation for those who require Special Care Dentistry.

Analysis of the returned data showed that most UG's obtained experience in their 4th and 5th years for both IS and IVS although some schools did not offer access to UG's for IS in children and one school did not offer access to IS in adult patients.

However, whilst UG's obtained experience in IS only six schools confirmed that all students undertook cases with five schools stating that the number of cases treated was between five and ten. Seven schools, (50 per cent), confirmed that UG's obtained 'hands on' experience with IS in adult patients.

The extent of exposure for UG's to IVS was greater than for IS with 13 schools, (93 per cent), confirming this. The average number of IVS administrations was between one and four but the Dublin,

KCL, Manchester and Newcastle schools reported a range of 15 to 20 completed cases.

Ten schools, (71 per cent) reported that UG's observed approximately 3 to 5 cases of IVS with one school stating that a video was used in the tuition process.

Regarding cannulation 13 schools (93 per cent), reported their UG's gained 'hands on' experience and in ten of these establishments, (72 per cent) the UG's undertook cannulation training on fellow colleagues.

In only 3 schools (21 per cent) were UG's directly involved in the provision of restorative care to inpatients who were receiving either sedation or general anaesthesia.

Whilst 13 schools has arrangements for UG's to attend and undertake adult assessments in clinics only 7 schools (50 per cent) had similar arrangements for paediatric assessment.



Outreach training at Community Dental or Personal Dental Service sites was available to six schools (42 per cent). Three schools reported UG experience in alternative Pain and Anxiety control techniques such as hypnosis and psychotherapy. Of the seven schools that reported teaching in Special Care

Dentistry four said it was done at outreach sites.

In conclusion, all schools were providing access for experience in IVS; however the picture regarding access for IS was patchy. Unruffled from the experience of London Underground Transport signal failures, Lesley Longman, Consultant / Senior Lecturer in Restorative Dentistry, Liverpool University Dental Hospital delivered the findings to the questions posed in Section one, 'Who teaches sedation and where?'. The departments involved across the fourteen schools included Oral Surgery / Oral & Maxillo-Facial Surgery, Restorative Dentistry / Adult Dental Health, Paediatric Dentistry and Sedation Suites / Units. Of the paediatric sites some stated that a variable amount of training occurred at outreach centres. Five schools reported training was undertaken, but not necessarily exclusively, in sedation suites, i.e. Dublin, Glasgow, Liverpool, KCL and Newcastle.

The good news was that all schools had at least one lead to coordinate sedation teaching and four stated it was the leads' primary role rather than a secondary one. Nine leads were from Oral Surgery, seven from Restorative Dentistry, nine from Paediatric Dentistry and five from Sedation Suites.

Six schools (43 per cent) had a named consultant anaesthetist who collaborated with the lead dental sedationist. The number of chairs available for dental sedation ranged from 1 to 23 but Lesley emphasised that the important factor was occupancy.

In summary, there was great variation in whom teaches

sedation and where it was taught but of critical importance was that every school in the survey had a sedation lead.



Chris Mercer, Senior Lecturer / Hon. Consultant in Restorative Dentistry, Barts & The London Queen Mary's School of Medicine and Dentistry gave a thought provoking presentation on 'Role of DCP's in teaching sedation'. Although there were only four questions in the questionnaire all related to Dental Nurses (DN's) Chris raised some important 'teamwork' issues.

The pivotal and extensive role of DN's in the sedation setting was outlined; it was evident that dentists expect much of their sedation trained DN. Duties and responsibilities included setting up, chair side assistance, monitoring, patient comfort and support, recovery, removal of cannulae, acting as second appropriate person and teaching. Chris suggested that they were 'super humans'!

All schools reported that sedation trained DN's were involved in assisting UG's during the provision of IS and IVS, (except for one school that does not teach IS) and in twelve schools the DN's assisted with cannulation.

It was significant that in nine schools (64 per cent) DN's undertook cannulation on patients and in all schools DN's either held the NEBDN Dental Sedation Nursing award or were working towards it.

From the comments section it was obvious that DN's were an invaluable asset who enhanced the learning experience for UG's who did not always appreciate the skills of the sedation nurses. However, the salient point of note was that dentists did not give DN's training on how to teach.

Points arising from the ensuing panel discussion highlighted the variance in dental schools with respect to the numbers of UG's, how they were organised, and facilities available, for sedation training, emergence of outreach training and some of the constraints posed by discharging the GDC's "First Five Years" imperatives.

Nicole Dunning, Senior Dental Officer Sedation and Special Care Dentistry Sheffield PCT, Honorary Clinical Teacher, University of Sheffield reported on section four which was devoted to *Protocols*. Three main areas were investigated, fasting, escorts and recovery.

There was unanimous agreement from the fourteen schools that patients were not asked to fast for IS, two thirds of schools did not fast those undergoing oral sedation and an almost equal split for those undergoing IVS - 6 schools indicated 'yes' (43 per cent) with 8 responses (57 per cent) stating 'no'. There was variation in the length of fasting ranging from two

to four hours. For patients who had fasted 9 schools (64 per cent) gave a pre-operative glucose drink.

Regarding escorts, only one of 14 schools would commence sedation if the escort was "parking the car", justified because the local parking problems were particularly difficult. There were equal responses to the question, "Do you ever treat adult patients under IS if there is no escort?" Only 3 schools (21 per cent) would permit escorts to leave premises whilst treatment was being carried out whilst 10 schools (71 per cent) insisted that patients travelled by private transport.

The age of a responsible escort was deemed to be 18 years by 7 (50 per cent) of respondents and 11 (75 per cent) would permit escorts to sit in the surgery to witness treatment, (although this was stated to be a reluctant yes).

The results showed that UG's did not have a significant role in the discharge process and in only 2 schools (14 per cent) did UG's observe the use of Flumazenil although a teaching video was used in certain schools.

Whilst 9 schools (64 per cent) had a protocol for the administration of sedation these all varied in their content.

In conclusion, discrepancies between the schools were found in fasting regime with the consistencies related to escorts.

Paul Coulthard, Head of Department / Professor in Oral and Maxfac Surgery, University Dental Hospital of Manchester delivered

Section Five, the final part of the questionnaire, 'Course Materials' which enquired about how students monitored their sedation clinical activity, case load, teaching materials and assessment of students.

Most schools used logbooks in which details of skills achieved and number and types of cases were recorded. This was deemed useful not only for training and audit purposes as it offered the student a mechanism for self-appraisal of performance and reflection but also for the preparation of lifelong learning. Logbooks were a useful measure of performance and could be used for formative or summative assessment.

Most schools included questions on sedation in written and OSCE professional examinations and had a recommended textbook but a wide range was used.



Two Venn diagrams were used by Paul to demonstrate that there was still much to do if the targets of 5 assessments, 10 IS and 20 IVS cases as proposed in DSTG's 'The Competent Graduate', were to be achieved. However, it was emphasised that it was not possible to guarantee that any level of training and experience would produce competence but that these

figures represented a sound foundation.

This matter was discussed more fully in the ensuing panel discussion where it was stated that in the GDC's 'First Five Years' students should have knowledge of conscious sedation - not be competent. It was deemed essential that there be longitudinal clinical pathways so students take a patient from the assessment stage to the final outcome and that sedation be demystified so it was as common as giving local anaesthetic.

The AGM followed the conclusion of the morning's proceedings. Carole summarised her term of office, how daunting it initially appeared but with such a supportive committee it had been a pleasant experience enabling sedation matters to be moved forward at a national level.

The evidence of the questionnaire had disclosed that DSTG targets at UG level were not being achieved so Carole was able to conclude that there was an important role for the Group. She then gave her thanks for the opportunity to hold this office.

The secretary, Paul Coulthard, asked members to endorse the Resuscitation Council's document on Medical Emergencies in the Dental Environment. He reported that DSTG and SAAD would run mentor lists together which made much sense.

Shelagh Thompson, Hon. Treasurer, presented the accounts that showed a decreasing deficit from

previous years. Membership stood at 393; income from this source was down as non-payers had been chased up and some had resigned from the Group. Shelagh had been in post for six years and this was her final report as she was stepping down.

Elections and appointment to executive posts on the Committee were:
Chairman - Paul Coulthard
Hon. Secretary - Lesley Longman
Hon. Treasurer - Chris Dickinson

Paul, in his capacity of Chairman, asked that various 'tidying up' constitutional amendments be accepted and were duly approved by members. Next year's Annual Symposium would be held in Birmingham on the provisional date of Tuesday 8 May 2007.



*Imran Nathoo
Cardiff University*

The afternoon session was dedicated to a series of short papers. Imran Nathoo, an UG at Cardiff Dental School, supported by Shelagh Thompson, delivered the findings of his final year project, 'What our students think of us'. Staff and students from UK and Ireland were surveyed, the outcome from the student's perspective was that on the whole sedation teaching was adequate, students would like to do more sedation and they found sedation enjoyable. The applause at

the conclusion was testimony to Imran's confident delivery and the high standard of his project.

Francis Collier, Associate Clinical Director, Hertfordshire Community Dental Service, reviewed 'Undergraduate feedback from the KCL course'. Ninety per cent of students found staff and Dental Nurses very helpful, eighty-three per cent thought the number of patients booked for them was just right, almost all UG's thought the introductory course to be satisfactory and eighty per cent enjoyed their time on the department.

Colette Balmer, Associate Specialist in Oral Surgery Liverpool University Dental Hospital, described the aims of the Liverpool Medical Emergencies course. These were to ensure a sound theoretical knowledge and to increase competence in this area. The course was very intensive and required much hard work from both staff and students.

The integrated firepower of Claire Cole and Marguerite Reith who serve in the Royal Air Force and Royal Navy (Dental Defence Services) was used to deliver an absolutely scintillating presentation, 'Sedation in the Armed Forces'. They both had recently gained the Diploma in Conscious Sedation from GKT and described how they were developing this service within their respective military organisations. The illustrations of fighting personnel and machines that punctuated this display were spectacular and many of the audience could have taken the Queen's shilling there and then!

Sedation to Armed Forces personnel needed different management considerations than civilians who receive such care. It was comforting to hear that protocols were in place that prohibit pilots from flying duties until 48 hours has elapsed from receiving sedation and that restrictions related to weapons handling were also in place.

The final presentation was a treble act from Kathy Wilson, Senior Dental Officer (Special Care Dentistry) / Honorary Associate Specialist (Sedation) Newcastle, Derek Debus, Senior Clinical Teacher, KCL Dental Institute and Nigel Robb, Senior Lecturer in Sedation in Relation to Dentistry University of Glasgow Dental Hospital and School. They reviewed postgraduate qualifications in Sedation covering outcomes, course topics, delivery, assessments, clinical practice and skills and examinations. Nigel gave a taster of how Scotland was considering the development of conscious sedation education pathways.

This had been a full day with much to reflect on, another successful symposium.

**Mr. S G Jones.
June 2006.**

Symposium Abstracts

DSTG Annual Symposium

Kings College, London

9 May 2006

A Survey of the Teaching of Conscious Sedation in Dental Schools of the United Kingdom and Ireland.

Imran Nathoo

Final Year Student at Cardiff University

The aim of this project was to assess and compare the undergraduate teaching of conscious sedation in terms of theoretical teaching and clinical experience provided at dental schools in the UK and Ireland and to see if any improvements have been made in the 5 years since the last survey of this sort (Leitch & Girdler, 2000).

Information was obtained using a questionnaire based survey, distributed to staff at undergraduate dental schools that were responsible for conscious sedation teaching.

The results from this survey indicating that in the last 5 years there have been improvements in the teaching of conscious sedation. Improvements have included more didactic teaching in the form of lectures and seminars, more clinical hands on experience of both inhalation and intravenous sedation and the utilisation of specific sedation

departments, however there is marked variation from school to school. What this survey also demonstrates is that students enjoy providing treatment using conscious sedation techniques and given the opportunity would like more experience in inhalation and intravenous sedation. However recommended national guidelines are still not being met and a more consistent approach is required to improve conscious sedation teaching.

Undergraduate Sedation Teaching in the Department of Sedation and Special care Dentistry.

Francis Collier

King's College London Dental Institute at Guy's, St Thomas' and King's College Hospitals.

Clinical experience in sedation is gained by undergraduate students during years 3 (Oral Surgery), 4 (Children's Dentistry) and 5 (Sedation & Special Care Dentistry). Sedation training programmes have now been started in year 3, and will commence in year 4 next year, and have been part of the year 5 course for 20 years now.

The aim of the clinical sedation course in Year 5 is to provide experience of carrying out a wide range of oral health care treatments for anxious patients using standard (intravenous midazolam & inhalational nitrous oxide/oxygen) sedation techniques.

Sedation is included in the 'whole year' lecture course, followed by group teaching (8 – 10 students), each attending for 4 days (8 sessions) during year 5 (July – November). The course comprises one introductory day, then three full clinical days. There is a dedicated Year 5 departmental handbook and a formal feedback session.

The introductory day consists of lecture / powerpoint presentations on assessment, IV & IS techniques, record keeping and complications. Practical skills revision session in clinic includes cannulation, correct assembly and use of IS equipment, blood pressure and electromechanical monitoring, directed by the dental nurses. Treatment planning patients seen on the clinic are later used for presentation and discussion. BLS tests are undertaken with a following BLS update.

The clinical sessions are supervised by 3 members of staff, in an 'open' clinic, supported by dental nurses and therapist. The students work in pairs (operator sedationist and assistant). A wide range of routine dental treatments are carried out for adult patients. Suitable cases pre-selected by staff are booked for treatment planning (3 cases) and for treatment under IV or IS sedation (9 cases). The majority of cases are ASA I & II, with occasional ASA III and medically compromised/ learning disability patients.

During 2005 there were 1209 patient treatment episodes (639 as operator) of which 14.6% were treatment planning, 64.1% intravenous sedation, 16.9% inhalational sedation, 4.2% had procedures carried out with TLC alone, and 0.2% with oral/ intranasal sedation.

The student feedback questionnaires indicated that 95% of students felt that the introductory course lectures and practical sessions were useful or very useful. 89% found the staff supervision very helpful, and 90% thought the support from the dental nurses very helpful. Many students commented that they felt that sedation training was important, that they had enjoyed their rotation and would like more sessions.

Conscious Sedation in the Armed Forces

Marguerite Reith and Claire Cole

Dental care is provided as a condition of service to all serving members of the Armed Forces (and to their families whilst serving overseas). The Defence Dental Service (DDS) is the tri-Service organisation responsible for the provision of this care.

The DDS decided to sponsor the Diploma training (at GKT) of two dental officers (Wg Cdr Reith and Surg Lt Cole), a decision based on the recommendations of a few practitioners already carrying out sedation and the realisation that, although sedation was offered in the DDS, the service lacked coordination.

The training at Guy's provided an excellent foundation for the Diploma Holders' role as 'clinical advisers' in conscious sedation. This role includes the provision of conscious sedation on a referral basis, advice on conscious sedation and related anxiety management issues to DDS

Headquarters and clinicians, audit of sedation within the DDS and training of DDS clinical staff.

The training function encompasses teaching on the DDS VDP programme, mentoring other dental officers and training nurses.

Specific challenges exist in the delivery of conscious sedation services in a military environment. Patients frequently have trouble finding suitable escorts, there is a cultural stigma attached to phobia, the mobility of the Service population (both patients and dental staff)

makes delivery of an efficient service difficult and there is the overriding requirement that Armed Forces personnel be deployable and ideally able to accept conventional treatment in adverse operating conditions.

Postgraduate Courses in Pain and Anxiety Control

University of Bristol Dental School

Chris Bell

Postgraduate programme in Anxiety Control & Sedation

I run a one year Postgraduate programme in Anxiety Control & Sedation. This is part of the Bristol University Open Learning Diploma (BUOLD). This is a one year distance learning programme that has three study days and nine modules. Each module requires marked homework. There is a final exam at the end of the year.

Participants undertake three such Programmes over a five year period to qualify for the Diploma in Postgraduate Dentistry (University of Bristol) DPDS

As a fully recognised University Diploma this qualification was the first such diploma registrable with the GDC.

University of Glasgow

Dr Nigel D Robb

The Scottish modular sedation qualification

Introduction

The Scottish qualification in Dental Anxiety Management was developed as a result of an initiative funded by the Chief Dental Officer (Scotland). The philosophy is to produce a modular qualification that would allow candidates to tailor the studies to their own needs.

The exit options include attending a basic sedation training to allow independent practice and completing a Masters Degree. It also possible to exit at any point in between including Certificate and Diploma level qualifications.

The qualifications will be jointly awarded by the Universities of Glasgow, Edinburgh and Dundee.

Modules available

Conscious sedation 1
This module covers inhalation, intravenous and

oral sedation. It contains 15 clinical sessions and includes a competence-based assessment.

Conscious sedation 2
This module provides experience in using the techniques acquired in module 1 on a wider range of patients including some medically compromised and special needs patients

Conscious sedation 3
This module provides training in clinical teaching for those who will be involved in either postgraduate or undergraduate education.

Conscious sedation 4
This module will, when available, provide training in alternative sedation techniques.

Psychology 1
This module covers the psychological evaluation of dental patients and basic behavioural interventions.

Psychology 2
This module extends the range of behavioural interventions and patients managed as well as introducing cognitive interventions

Psychology 3
The modules covers the cognitive approach

Hypnosis
The hypnosis module covers the training that is equivalent to the BSMDH

basic and intermediate courses

Critical reading

This module covers the skills required to evaluate the literature and will help to prepare those who are planning to complete the dissertation for the masters level award.

Qualifications

In order to gain a Certificate in Dental Anxiety Management candidates must complete 3 modules including Conscious Sedation 1 and Psychology 1

In order to gain a Diploma in Dental Anxiety Management candidates must complete the Certificate and 3 other modules including the Critical Reading Module

In order to gain a Masters in Dental Anxiety Management candidates must complete the requirements of the Diploma and complete a 10 000 word dissertation

Funding

The board who administer this qualification are currently in negotiation regarding the funding of this venture. A previous agreement from NHS Education Scotland has run out, and until a new, satisfactory package has been negotiated. The programme has reluctantly had to be placed on hold.

University of KCL

Derek Debus

Diploma in Conscious Sedation for Dentistry

The Diploma in Conscious Sedation for Dentistry started about 10 years ago and grew out of the Clinical Attachment that was being offered to practitioners. This was to enable interested dentists to acquire clinical experience under supervision, something that always presents a problem after one has left dental school.

The Diploma offers underpinning knowledge with skills training and clinical experience. There is one day attendance in the sedation clinic, together with an academic programme of essays, study days and a 7,000 word project. Students gain clinical experience of the basic sedation techniques and limited exposure to alternative techniques. Patients are generally adult phobics, some of which are ASA III or even IV. No children are seen.

The project is substantial and often covers topics related to the candidates' work place. Many go on to be published in the journals.

This year's students had the benefit of the SAAD visiting professor, Peter Milgrom from Seattle, USA. He lectured at the Study day and was involved in tutorials and chairside teaching.

Assessment is by clinical examination, a written paper and an oral defence of the project, with an external examiner. There is continuous formative assessment during the course.

University of Liverpool

Lesley Longman

PG Certificate in Conscious Sedation

The University of Liverpool run a Postgraduate Certificate in Conscious Sedation, which is held at the Liverpool Dental Hospital. The certificate is credited with 60 CATS points and can (if desired) be used towards an M Dent Sci degree. The course consists of two double modules the first of which is a Foundation Module and the second is concerned with the use of sedation in patients with special needs. This certificate is especially valuable to dentists who work, or have an interest, in Special Care Dentistry. The certificate consists of 5 study days and 48 clinical sessions and is normally completed within one academic year.

Admission is restricted to 3 students per year, commencing September. Last years fees were £1500 academic fees plus £2800 bench fees. Applications should be made to Lesley Longman at lplong@liv.ac.uk. Part sponsorship for the bench fees is often available from Mersey Postgraduate Deanery.

University of Manchester

Paul Coulthard

MSc and PGDip Control of Pain and Anxiety

Degree awarded: MSc, PGDip

Duration: MSc - 24 months part time. Diploma - 18 months part time.

Entry requirements: All applicants will be required to provide evidence of their primary dental qualification from a recognised institution

Contact tel: +44 (0)161 306 0239

Contact email: pg-dentistry@manchester.ac.uk

Course description

The programme aims to provide dental practitioners with the experience they need to provide high-quality, effective control of pain and anxiety to their patients.

Programme director
Professor Paul Coulthard

Start date
September 2006

Full entry requirements

All applicants will be required to provide evidence of their primary dental qualification from a recognised institution. Evidence of citizenship of an EU country will be required for those claiming home student status. The School also requires applicants to have at least two years' experience in general professional practice.

English language requirements

Where the applicant's first language is not English, they must produce a copy of either an IETLS certificate (score must be no less than 6.5) or a TOEFL certificate (score must be no less than 575 or 230 on the computer-based test).

Fees

Programme fees are subject to approval from The University of Manchester.

UK and EU students
MSc: £4,085 plus £5,300 bench fee
PG Diploma: £3,057 plus £4,000 bench fee

International students
MSc: £19,450 plus £5,300 bench fee
PG Diploma: £16,000 plus £4,000 bench fee

Programme outline

The programme consists of assessed course units:

- Behavioural Management
- Inhalation Conscious Sedation
- Intravenous Conscious Sedation
- Alternate Route Conscious Sedation
- Systemic Analgesia and Local Anaesthesia
- General Anaesthesia and Medical Emergencies

The PG Diploma programme includes a Research Methods and Statistics course unit. The MSc programme includes a research project and dissertation.

Teaching and learning

The Control of Pain and Anxiety programme incorporates blended teaching and learning methods including seminars, clinical attachments, practical skills sessions, lectures and self-directed learning.

On average, attendance will be one day a fortnight at the School of Dentistry.

Assessment

Assessments include case reports/presentations, written assignments, viva and skills station assessments.

Website

www.dentistry.manchester.ac.uk/graduate/taught

University of Newcastle

Kathy Wilson

Diploma in Conscious Sedation in Dentistry

The Diploma in Conscious Sedation programme has been designed to provide dental practitioners with postgraduate education and training in theoretical principles and clinical practice of conscious sedation and anxiety management, leading to a university diploma.

The aim of the course is to provide:

- A comprehensive training in the theoretical principles of conscious sedation and anxiety management in dentistry.
- A sound foundation in and clinical skills required for the practice of intravenous and inhalational conscious sedation, as applicable to current UK practice.
- Appropriate training in conscious sedation to enable dentists to practice conscious sedation safely and independently.

There are two intakes of 10 students per year commencing in April and October, with entry being by interview. Each student is assigned a tutor to help guide them in their studies throughout the programme.

The course is run on a part time basis over a one year period and involves, 18 sessions of didactic teaching, 14 hands-on clinical sessions and completion of an audit or research project culminating in a 10,000 word dissertation. The topics

covered included relevant physiology, pharmacology, aetiology and pathophysiology of dental anxiety, patient assessment, intravenous and inhalation sedation techniques appropriate to the UK, principles of more advanced methods, sedation related emergencies, guidelines and legal requirements, principles of clinical research and evidence base practice.

Students are assessed by both continual assessment and a final examination. During the course there is a requirement to complete 5 written assignments (2000 words), 3 multiple choice question papers (250 per paper) and 1 oral presentation (20 minute to peer group). A portfolio of 14 supervised clinical attachments is completed to log and assess the student's clinical experience and a formal clinical skills assessment is undertaken towards the end of the course.

The final assessment involves a formal examination including a written paper (short answers and MCQ) and an oral exam covering all aspects of Conscious Sedation (incorporating case reports), Practical Resuscitation and defence of the Dissertation. Students are encouraged where appropriate to write up their research work for publication and several candidates have been successful to date.

It is essential for any course to be evaluated to ensure a high standard is maintained. This has been formally carried out by an Internal University Review and a visitation by the GDC. Both reports were favourable and highly commended the programme. On a more informal basis all students

are asked to evaluate the course, with comments received being considered as the course is further developed.

The following information is reprinted, with kind permission, from the Lecture notes from the SAAD National Course in Conscious Sedation.

University of Central Lancashire

Certificate & Diploma in Sedation for Dentistry

Certificate course

- 1 year
- 3 modules (£500 per module)
- Clinical component
- Logbook
- Final exam
- Certificate can lead directly to Diploma (2nd year)

Diploma course

- 2 years
- 6 modules (£500 per module)
- Clinical component

- Written assignments
- Discussion paper
- Project work
- Logbook
- Final exam

Eastman Dental Institute

CPD Course in Sedation for Dentistry

(In association with University of Western Cape, South Africa)

Entry

- Cost - £350 per day (approx. total £3,000)
- Not examined/assessed
- CPD certificate of attendance

Course information

- 15 sessions (7.5 days) of lectures & problem based learning
- 1 review session after 6 months
- Optional 3 day supervised clinical treatments (at extra cost)



Annual Conference and AGM

22nd September 2007

Royal Society of Medicine
1, Wimpole Street, London

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0207 631 8893

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DSTG Profiles

Paul Coulthard

Profile of your new DSTG Chairman

Paul Coulthard is Professor of Oral and Maxillofacial Surgery at The University of Manchester and Honorary Consultant in Oral Surgery at Central Manchester NHS Trust.

Prof Coulthard undertook General Clinical Training as a General Dental Practitioner in Manchester and Sheffield. He then undertook Basic Surgical Training in Manchester, Carlisle and London, and also a Resident SHO post in Anaesthesia to pursue his interest in the control of pain and anxiety. He completed his Higher Specialist Surgical Training in Academic Oral and Maxillofacial Surgery in Manchester in 2000. Paul was promoted to Senior Lecturer and Head of Department in 2000, Honorary Consultant in 2001, Personal Chair in 2004 and Director of Graduate Education and Research in the School of Dentistry later in 2004.

Alongside surgical training, Paul undertook research training leading to the award of an MDS in Oral and Maxillofacial

Surgery and a PhD in Neuroscience. The MDS research investigated the effect of intravenous midazolam on the pain experience and the PhD explored the modulation of hyperalgesia with antagonists and agonists to the NMDA and non-NMDA receptors. He is an Editor with the Cochrane Collaboration Oral Health Group and is on the Editorial Board of the International Journal of Surgery and the British Journal of Oral and Maxillofacial Surgery. He has a special interest in the Control of Pain and Anxiety and has published over 80 scientific papers. The aim of this research is to advance knowledge and improve the quality of patient care by drug development, critical evaluation of clinical practice, undertaking randomised controlled trials, and the preparation and dissemination of best evidence for clinicians.

Prof Coulthard is actively involved in undergraduate and postgraduate teaching and learning. He is an external examiner at KCLDI (Sedation Diploma), Liverpool University (Sedation Diploma), The London (Final BDS), and the Eastman Dental Institute (MSc).

Paul recently gave up his Advanced Life Support Instructor status with the Resuscitation Council (UK) after a six year period. He is a member of the Higher Education Academy and published a textbook of integrated Oral and Maxillofacial Sciences 'Master Dentistry' in 2003. He is a member of the Academic Oral and Maxillofacial Surgery Advisory Committee (AACOMS) of the Royal College of Surgeons of England. Paul has introduced new Postgraduate Diploma and MSc programmes in the Control of Pain and Anxiety in Dentistry at The University of Manchester.

Paul is married to Fiona and has three young children.

Training in various House jobs in general duties, oral medicine and oral and maxillofacial surgery and held a part-time post as a GDP in Liverpool. She subsequently held a lecturing post in Restorative Dentistry at The University of Liverpool and obtained a PhD in 1991 on infective endocarditis. Lesley completed a Senior Registrar training pathway in 1995 prior to becoming an NHS Consultant in 1997.



Paul Coulthard and Lesley Longman

Lesley Longman

Profile of your new DSTG Secretary

Lesley Longman is a Consultant/Honorary Senior Lecturer in Restorative Dentistry at Liverpool University Dental Hospital and School. She obtained a BSc honours degree in pharmacology in 1977 before qualifying in Dentistry in 1981. She undertook General Clinical

Lesley's consultant post includes responsibility for the care of adults with special needs and also the teaching of sedation to dental undergraduates. In 2002 she developed a university postgraduate certificate in conscious sedation (60 CATS points) which consists of 5 study days and 48 clinical sessions. The second half of this course is dedicated to the role of sedation in Special Care Dentistry. This qualification can

A Statement from The Resuscitation Council (UK)

“..... Maintaining the knowledge and competence to deal with medical emergencies is an important part of all dental professionals' continuing professional development. The Council welcomes these guidelines and congratulates the authors on the considerable work that has led to this publication.”

President of the General Dental Council

Medical Emergencies and Resuscitation Standards for Clinical Practice and Training for Dental Practitioners and Dental Care Professionals in General Dental Practice

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www.resus.org.uk

be awarded as a stand alone certificate or can contribute towards a Masters in Dental Science. She became Hospital Liaison tutor for Mersey Postgraduate Deanery in 2004.

Lesley works closely with her consultant colleague in Oral Medicine and holds regular joint clinics in Sjogren's syndrome and Facial pain/psychiatric liaison clinic. She co-authored "Tyldesley's Oral Medicine", and has written a chapter in "Advanced Dental Nursing" and a Blackwell text book for hygienists and therapists (in press). She also co-authored the FGDP RCSEng National guidelines on antibiotic prescribing (2000) and the guidance on the management of the latex allergic patient and dental healthcare workers (2004). She lectures nationally on the management of the medically compromised patient. She is an examiner for the RCSEd (membership Examination in Special Needs)

and a member of the BDA CCHDS and the Dental Advisory Committee to the BNF. She has previously represented The Liverpool Dental School on the DSTG since "the early days".

Lesley is married to Peter (a teacher) and has 2 children aged 19 and 16.

Chris Dickinson

Profile of your new DSTG Treasurer

I currently work in the Department of Sedation and Special Care Dentistry at KCL Dental Institute at The KCL Dental Institute at Guy's Hospital. After qualification in 1983 I initially worked in general practice but returned to the hospital service with posts in oral surgery, prosthetics, and periodontology and completed an MSc in Prosthetic Dentistry

at the Eastman in 1991. I am on the specialist list in Prosthodontics.



Chris Dickinson

I joined the Community Dental Service in Camden in 1987 working as a Dental Officer initially. Following my MSc I gained a Senior Dental Officer post in 'Dental Care for Elderly and Homebound People' in SW London and Surrey. In 1995 I became the Deputy Clinical Director in the same service continuing the same clinical remit and included the dental care of people with mental and learning disabilities in addition to those with physical disabilities.

In 14 years with the community dental service my work involved restorative treatment using oral, intravenous and inhalation sedation and general anaesthesia. Domiciliary care was a large part of the remit. During this time I also held part-time posts in the restorative unit at St George's Hospital, Tooting and in Sedation and Special Care Dentistry at Guy's to where I moved, full-time, in 2001.

My interests lie in all areas of Sedation and Special Care Dentistry with special interests in oral health care for patients with Epidermolysis Bullosa, patients with cardiac conditions and gagging problems. I am heavily involved in undergraduate and postgraduate teaching and examining in both sedation and special care dentistry at KCL where I organise the year 5 undergraduate sedation course. I am an examiner for the NEBDN dental sedation nursing post-certification exam and sit on the DSN committee.



Essay Prizes

Two essay prizes of £300 each are offered by SAAD.

Dental Students essay prize Dental Nurses essay prize

Students and nurses are invited to express their views on any subject related to Conscious Sedation, Analgesia or Dental Anaesthesia

- Essay written on one topic in ENGLISH on A4 size paper, double spaced and also formatted on disc as a Microsoft word document. Nurses not to exceed 2,500 words. Students not to exceed 3,000 words.
- Entries must be received by 1st March 2007
- The decision of the panel of assessors appointed by SAAD will be final.
- Entries, accompanied by name & address, should be sent to: SAAD, Essay prize, 21 Portland Place, London W1B 1PY.



Annual Symposium 2007

**Alex MacGregor Lecture Theatre
Birmingham Dental Hospital
Birmingham**

Tuesday 15th May 2007

Website

www.dstg.co.uk

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The opinions expressed in this and previous Newsletters are those of the authors and are not necessarily those of the Editor or of the Dental Sedation Teachers Group.

Any suggestions for future newsletters to the Editor

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