

Federal State Budgetary Educational Institution of Higher Education
"Privolzhsky Research Medical University"
Ministry of Health of the Russian Federation

BANK OF ASSESSMENT TOOLS FOR DISCIPLINE
MODERN METHODS OF ORAL SURGERY PREPARATION FOR PROSTHETICS

Training program (specialty): 31.05.03 DENTISTRY
Department: ORAL AND MAXILLOFACIAL SURGERY
Mode of study FULL-TIME

Nizhniy Novgorod
2021

1. Bank of assessment tools for the current monitoring of academic performance, mid-term assessment of students in the discipline

This Bank of Assessment Tools (BAT) for the discipline "Modern methods of oral surgery preparation for prosthetics" is an integral appendix to the working program of the discipline "Modern methods of oral surgery preparation for prosthetics". All the details of the approval submitted in the WPD for this discipline apply to this BAT.

(Banks of assessment tools allow us to evaluate the achievement of the planned results stated in the educational program.

Assessment tools are a bank of control tasks, as well as a description of forms and procedures designed to determine the quality of mastering study material by students.)

2. List of assessment tools

The following assessment tools are used to determine the quality of mastering the academic material by students in the discipline/ practice:

No.	Assessment tool	Brief description of the assessment tool	Presentation of the assessment tool in the BAT
1	Test №1 Test №2	A system of standardized tasks that allows you to automate the procedure of measuring the level of knowledge and skills of a student	Bank of test tasks
2	Situational tasks	A method of control that allows you to assess the criticality of thinking and the degree of the material comprehension, the ability to apply theoretical knowledge in practice.	List of tasks

3. A list of competencies indicating the stages of their formation in the process of mastering the educational program and the types of evaluation tools

Code and formulation of competence*	Stage of competence formation	Controlled sections of the discipline	Assessment tools
UC 1 Ability to abstract thinking, analysis, synthesis	Current Mid-term	<p>Section 1 <i>Application of implants in maxillofacial surgery.</i></p> <p>Section 2 <i>Classification of periodontal diseases. Examination of a patient with periodontal pathology. Additional diagnostic methods Emergency conditions in periodontology.</i></p> <p>Section 3 <i>The main methods of surgical treatment of periodontal diseases. Additional operations on the periodontal. Dental surgery techniques.</i></p> <p>Section 4 <i>Method of directed regeneration of periodontal tissues, osteoplastic preparations in periodontology.</i></p> <p>Section 5 <i>History of formation, modern state and prospects of development of dental (dental) implantology.</i></p> <p>Section 6 <i>Indications and</i></p>	<p><i>Test</i></p> <p><i>Situational tasks</i></p> <p><i>Credit</i></p>

		<p><i>contraindications (restrictions) of dental rehabilitation with dental implants.</i></p> <p><i>Diagnosis and planning of implantation, tools, medical perioperative support.</i></p> <p>Section 7 <i>Surgical methods of dental implantation. Prevention and treatment of complications of dental implantation.</i></p>	
<p>PC-6 The identification of a patient's of pathological conditions, symptoms, syndromes of dental diseases, nosological forms according to the ICD-10 and the related health problems</p>	<p>Current Mid-term</p>	<p>Section 1 <i>Classification of periodontal diseases. Examination of a patient with periodontal pathology. Additional diagnostic methods Emergency conditions in periodontology.</i></p> <p>Section 2 <i>The main methods of surgical treatment of periodontal diseases. Additional operations on the periodontal. Dental surgery techniques.</i></p> <p>Section 3 <i>Surgical methods of dental implantation. Prevention and treatment of complications of dental implantation.</i></p>	<p>Test Situational tasks Credit</p>
<p>PC-7 Ability to determine the tactics of management of patients with various dental diseases in accordance with clinical recommendations of other regulatory documents of the Ministry of Health of the Russian Federation in outpatient and day hospital conditions, taking into account age patient.</p>	<p>Current Mid-term</p>	<p>Section 1 <i>Classification of periodontal diseases. Examination of a patient with periodontal pathology. Additional diagnostic methods Emergency conditions in periodontology.</i></p> <p>Section 2 <i>The main methods of surgical treatment of periodontal diseases. Additional operations on the periodontal. Dental surgery techniques.</i></p> <p>Section 3 <i>Surgical methods of dental implantation. Prevention and treatment of complications of dental implantation.</i></p>	<p>Test Situational tasks Credit</p>

* - not provided for postgraduate programs

4. The content of the assessment tools of entry, current control

Current control is carried out by the discipline teacher when conducting classes in the form of: *Test, situational tasks.*

Test

1. OSTEOINTEGRATION IS:

- a) **direct structural and functional relationship between highly differentiated living bone and the surface of the supporting implant, revealed at the level of light microscopy**
- b) the body's reaction to the introduction of a foreign body consists in the formation of a fibrous capsule around it
- c) the process of formation of connective tissue on the implant surface
- d) the reaction of the bone to a foreign body that is encapsulated by a bone scar
- e) reduction of the total volume of bone tissue

2. BIOINERT MATERIALS ARE:

- a) stainless steel
- b) chromium-cobalt alloys
- c) **titanium, zirconium**
- d) hydroxyapatite
- e) silver-palladium alloys

3. THE CAUSE OF PARESTHESIA OF THE LOWER LIP AFTER IMPLANTATION ON THE LOWER JAW MAY BE:

- a) injury of the inferior lunular nerve during the formation of the implant bed.
- b) compression of the nerve trunk with an installed implant.
- c) injection injury of the nerve trunk.
- d) injury of the chin nerve with a hook while working as an assistant.
- e) **all the listed factors**

4. WITH THE MAXIMUM OPENING OF THE MOUTH, THE HEAD OF THE LOWER JAW IS NORMAL:

- a) **on the posterior slope of the articular tubercle**
- b) on the anterior slope of the articular tubercle
- c) in the articular cavity
- d) outside the articular cavity
- e) all the answers are wrong

5. A PREREQUISITE FOR THE ALLOCATION OF OSTEOINDUCTIVE FACTORS IS:

- a) bone demineralization and inhibitor activation
- b) bone mineralization and inhibitor removal
- c) bone mineralization and inhibitor activation
- d) **bone demineralization and inhibitor removal**
- e) bone regeneration and activator intensification

4.1. Tasks for the assessment of competence "UC-1":

Task 1. A 27-year-old patient turned to the dentist with complaints of tooth mobility, lack of teeth 11 21 31, bleeding gums, pus discharge, pain, unpleasant odor from the oral cavity, frequent cases of gum swelling, which are accompanied by pain and an increase in body temperature to 37.9 degrees. A history of diabetes, the level of glucose in the peripheral blood on an empty stomach is 7.5 mmol/l. External examination: skin without visible changes, regional lymph nodes are not palpated. Examination of the oral cavity: the mucous membrane of the lips, cheeks without pathological changes. The gum in the area of existing teeth is stagnant-hyperemic, purulent discharge

from periodontal pockets is noted. Periodontal pockets 6-9 mm, pathological mobility of teeth of I-III degree.

1. Name the groups of periodontal diseases to which this pathology may relate.
2. Name the anamnesis data that you need to find out to clarify the diagnosis.
3. Name the examination methods necessary to clarify the diagnosis. Make a preliminary diagnosis.
4. Outline a plan of therapeutic measures.
5. Justify the long-term prognosis of the disease.

4.2 Tasks for the assessment of competence "PC-6"

Task 1. Patient K., 56 years old, was sent to the surgical department for consultation on planning and conducting treatment with dental implants. He complained about the absence of teeth in the upper jaw, difficulty chewing food.

In the anamnesis – acute respiratory viral infections, acute respiratory infections, childhood diseases, Botkin's disease at the age of 15. Increased gag reflex. Teeth on the upper jaw were removed during life due to chronic inflammatory processes. A complete removable prosthesis was made for the patient, but satisfactory fixation of the prosthesis was not achieved, and also due to an increased gag reflex, the patient cannot use the prosthesis.

Objectively: an external examination reveals a sinking of the upper lip, a violation of diction during conversation.

When examining the oral cavity, the mucous membrane is pale pink in color, moderately moistened. There is a defect and deformation of the lateral sections of the alveolar ridge of the upper jaw.

Missing: 1.8-1.1, 2.1-2.8, 3.5, 4.4, 4.6.

The bite is not fixed.

On the X-ray, defects of the alveolar ridge of the upper jaw are noted in the area of missing 1.7-1.5, 2.4-2.8. In the area of missing 1.4-2.3, no bone tissue deficiency was detected. In the area of teeth 3.1, 4.1, in the projection of the root tips, there is a focus of destruction of bone tissue with a size of 1.5 / 1.0 cm, with clear boundaries.

1. Make a diagnosis.
2. Specify which orthopedic structure needs to be made in this clinical situation and explain why?

4.3 Tasks for the assessment of competence "PC-7"

Task 1. The patient, 55 years old, went to the clinic with complaints of paroxysmal pains in the left half of the face, arising when touching the left cheek with a hand, towel, clothes, etc. and lasting for 3-4 seconds, burning pains, spread to the temple, the back of the head. From the anamnesis, it was found out that two months ago he suffered an acute respiratory viral infection with a high fever, two weeks after the onset of acute respiratory viral infection, the first attack of pain in the left half of the face lasting 1-2 seconds, then the attacks began to last up to 1 minute. I went to the doctor for the first time. Of the transferred diseases, it indicates childhood infections, colds. The general condition is satisfactory. On examination, the face is somewhat asymmetrical due to the swelling of the left half. Palpation of the exit points of the II-th (infraorbital foramen) and III-th (mental foramen) branches of the trigeminal nerve on the face is more painful on the left. Palpation of the buccal region on the left caused a pain attack lasting 3 seconds. The oral cavity has been sanitized, no pathological changes have been detected..

1. Conduct a justification of the diagnosis?
2. Make a diagnosis?
3. Outline a treatment plan?
4. Did the transferred ARVI matter for the occurrence of this disease?
5. Is the swelling of half of the face a pathognomonic sign for neuralgia of the II-III branches of the trigeminal nerve?

5. The content of the assessment tools of mid-term assessment

Mid-term assessment is carried out in the form of a credit

5.1 The list of control tasks and other materials necessary for the assessment of knowledge, skills and work experience

5.1.1. Questions for the credit in the discipline «Modern methods of oral surgery preparation for prosthetics»

Question	Competence code (according to the WPD)
1. Application of implants in maxillofacial surgery.	UC-1
2. Classification of periodontal diseases. Examination of a patient with periodontal pathology. Additional diagnostic methods Emergency conditions in periodontology.	UC-1
3. The main methods of surgical treatment of periodontal diseases. Additional operations on the periodontal. Dental surgery techniques.	UC-1
4. Method of directed regeneration of periodontal tissues, osteoplastic preparations in periodontology.	UC-1
5. History of formation, modern state and prospects of development of dental (dental) implantology.	UC-1
6. Indications and contraindications (restrictions) of dental rehabilitation with dental implants. Diagnosis and planning of implantation, tools, medical perioperative support.	UC-1
7. Surgical methods of dental implantation. Prevention and	UC-1

treatment of complications of dental implantation.	
8. Classification of periodontal diseases. Examination of a patient with periodontal pathology. Additional diagnostic methods Emergency conditions in periodontology.	PC-6; PC-7
9. The main methods of surgical treatment of periodontal diseases. Additional operations on the periodontal. Dental surgery techniques.	PC-6; PC-7
10. Surgical methods of dental implantation. Prevention and treatment of complications of dental implantation.	PC-6; PC-7

6. Criteria for evaluating learning outcomes

Learning outcomes	Evaluation criteria	
	Not passed	Passed
Completeness of knowledge	The level of knowledge is below the minimum requirements. There were bad mistakes.	The level of knowledge in the volume corresponding to the training program. Minor mistakes may be made
Availability of skills	Basic skills are not demonstrated when solving standard tasks. There were bad mistakes.	Basic skills are demonstrated. Typical tasks have been solved, all tasks have been completed. Minor mistakes may be made.
Availability of skills (possession of experience)	Basic skills are not demonstrated when solving standard tasks. There were bad mistakes.	Basic skills in solving standard tasks are demonstrated. Minor mistakes may be made.
Motivation (personal attitude)	Educational activity and motivation are poorly expressed, there is no willingness to solve the tasks qualitatively	Educational activity and motivation are manifested, readiness to perform assigned tasks is demonstrated.

Characteristics of competence formation*	The competence is not fully formed. The available knowledge and skills are not enough to solve practical (professional) tasks. Repeated training is required	The competence developed meets the requirements. The available knowledge, skills and motivation are generally sufficient to solve practical (professional) tasks.
The level of competence formation*	Low	Medium/High

** - not provided for postgraduate programs*

For testing:

Mark "5" (Excellent) - points (100-90%)

Mark "4" (Good) - points (89-80%)

Mark "3" (Satisfactory) - points (79-70%)

Less than 70% – Unsatisfactory – Mark "2"

Developer(s):

Durnovo Evgeniia Aleksandrovna, M.D., Ph.D., Professor, Head of the Department of Oral and Maxillofacial Surgery, Director of the Institute of Dentistry of FSBEI HE «PRMU» MOH Russia

Runova Natalia Borisovna, M.D., Ph.D., Associate Professor of the Department of Oral and Maxillofacial Surgery, FSBEI HE «PRMU» MOH Russia

Korsakova Alena Igorevna, M.D., Teaching Assistant of the Department of Oral and Maxillofacial Surgery, FSBEI HE «PRMU» MOH Russia