

Knowledge, Skills, and Abilities (KSAs) for a Beginning Dental Practitioner in Canada

This document was developed by a Canadian Dental Regulatory Authorities Federation (CDRAF) working group that included representatives of the National Dental Examining Board of Canada (NDEB), the Commission on Dental Accreditation of Canada (CDAC), the Association of Faculties of Dentistry (ACFD) and CDRAF. The development process involved extensive consultations and two requests for review and feedback.

The Knowledge, Skills and Abilities (KSAs) below refer to general dental practice and include the management of patients of all ages including those with special needs. It is assumed that all oral health care is provided in an ethical manner, in accordance with legal requirements at the national and provincial level.

This document lists 47 KSAs that are required for the safe and effective practice of a beginning dental practitioner in Canada. The KSAs in this document are organized into 3 groups and 16 sub-groups:

GROUP A: Multi-discipline (23 KSAs)

These KSAs apply to more than one discipline or area of practice. The KSAs in this group are organized into two categories: *Patient Assessment and Treatment Plan* and *Management*.

GROUP B: Discipline-specific (14 KSAs)

These KSAs are specific to the following areas of general dental practice: *Oral Medicine and Pathology, Radiology, Periodontics, Endodontics, Prosthodontics, Orthodontics, Operative, Oral Surgery, Pediatric, Geriatric and Special Needs Dentistry* and *Pain Management*.

GROUP C: General (10 KSAs)

The KSAs are organized into four categories: *Scientific Literature, Communication, Professionalism and Practice, and Health Promotion*.

The sub-tables in Groups B and C identify indicators of KSAs and specify the minimum level that all graduates must obtain. The levels are: Taught and Tested, Exposure, Experience or Competence. These levels are grouped as Didactic, Preclinical (including clinical simulations) and Clinical.



This document uses the following definitions:

Indicators: Aspects of KSAs that can be measured.

It is assumed that all indicators of KSAs designated Exposure, Experience or Competence are Taught and Tested.

Taught and Tested: An indicator taught through lectures or small group sessions and tested using assignments, didactic quizzes, tests or exams for all graduates. All new graduates may not have had clinical exposure, experience or the opportunity to attain competency, but some graduates may have.

Exposure: An indicator that a new graduate has observed in the preclinic or in the clinic. All graduates have been exposed to the indicator. A new graduate may need further training and mentoring to become competent. All new graduates may not have had clinical experience or the opportunity to attain competency.

Experience: An indicator that a new graduate has performed or demonstrated in the preclinic or clinic. All new graduates have experience in the indicator. All new graduates may not be able to complete the procedure or demonstrate the behaviour independently but some graduates may have attained competency.

Competence: An indicator that a new graduate can perform or demonstrate in the preclinic or clinic independently and consistently. All new graduates have attained competency. A competent new graduate has the awareness of what constitutes an acceptable performance and is therefore safe for independent practice in the area. A new graduate may have demonstrated clinical competence through assessment or by a combination of preclinical competency testing and clinical experience.

Manage: A behaviour that includes all actions performed by a dentist that are designed to alter the course of a patient's condition. Such actions may include providing education, advice, treatment by the dentist, treatment by the dentist after consultation with another health care professional, referral of a patient to another health care professional, monitoring treatment provided, but also may include providing no treatment or observation. "Manage" assumes the use of the least invasive therapy necessary to gain a successful outcome in accordance with patient wishes.



GROUP A: Multi-Discipline KSAs

PATIENT ASSESSMENT AND TREATMENT PLANNING

Information Collection and Examination

1. Obtain the patient's chief complaint, medical, psychosocial, and dental histories.
2. Perform a clinical examination.
3. Assess specific risk factors (conduct a risk assessment) for oral disease or injury.

Diagnosis

4. Differentiate between normal and abnormal hard and soft tissues of the oral and maxillofacial complex.
5. Interpret the findings from the patient's chief complaint, medical, psychosocial, and dental histories, along with the clinical and radiographic examinations, and diagnostic tests.
6. Develop a problem list and establish differential/definitive diagnoses.

Treatment Planning

7. Determine when consultation, referral, and/or further diagnostic testing are indicated.
8. Communicate relevant patient information for consultation/referral with health care professionals.
9. Develop treatment options based on the evaluation of risk assessments, diagnoses, and other factors, including, but not limited to, medical, psychosocial, and dental histories.
10. Engage the patient, parent or guardian in the discussion of the findings, diagnoses, etiology, risks, benefits, time requirements, costs, responsibilities, and prognoses of the treatment options.
11. Develop a comprehensive, prioritized and sequenced treatment plan.
12. Obtain and record informed consent.



MANAGEMENT

Prevention

13. Promote measures to prevent systemic and oral disease/injury in response to identified risks.
14. Provide therapies for the prevention of systemic and oral disease/injury.
15. Implement measures to prevent medical emergencies from occurring in dental practice.
16. Implement measures to prevent the transmission of infectious diseases.

Treatment

17. Manage the anxious or fearful patient.
18. Manage dental emergencies.
19. Manage medical emergencies that occur in dental practice.
20. Manage trauma to the orofacial complex.
21. Manage occlusal function.
22. Prescribe and administer pharmacotherapeutic agents used in dentistry.
23. Manage complications, outcomes and continuity of care.



GROUP B: Discipline-Specific KSAs

ORAL MEDICINE AND PATHOLOGY

24. Manage oral mucosal and osseous diseases.

Indicators of KSA	Didactic	Preclinical	Clinical
Formulate a differential diagnosis for a detected abnormality.			Exposure
Prescribe and interpret diagnostic tests for the detection of oral mucosal and osseous abnormalities based on clinical assessment.	Taught and tested		
Perform a soft tissue biopsy.	Taught and Tested		
Recognize and communicate to other health care professionals' features that suggest greater urgency for immediate consultation/referrals.	Taught and Tested		
Communicate to patients the reason for the referral/consultation.	Taught and Tested		
Interpret a biopsy/consultation report and correlate the findings with the clinical presentation and communicate the interpretation to the patient.	Taught and Tested		



RADIOLOGY

25. Prescribe, make and interpret radiographs.

Indicators of KSA	Didactic	Preclinical	Clinical
Prescribe bitewing, periapical and panoramic radiographs.			Competence
Prescribe CBCT imaging.	Taught and Tested		
Acquire bitewing and periapical radiographs.			Competence
Acquire panoramic radiographs.			Exposure
Interpret intraoral and panoramic radiographs for common diseases and abnormalities and complete a radiographic report.			Competence
Recognize radiographic features that suggest significant abnormalities.	Taught and Tested		

PERIODONTICS

26. Manage conditions and diseases of the periodontium.

Indicators of KSA	Didactic	Preclinical	Clinical
Perform mechanical plaque removal; Perform scaling/root planing.			Competence
Re-evaluate the response to periodontal treatment.			Competence
Perform periodontal and implant placement surgery.	Taught and Tested		
Perform periodontal maintenance therapy.			Competence
Manage peri-implant diseases.	Taught and Tested		



ENDODONTICS

27. Manage diseases and injury of the pulp and periapical tissues.

Indicators of KSA	Didactic	Preclinical	Clinical
Perform a pulpotomy or a pulpectomy.			Competence
Perform uncomplicated non-surgical root canal therapy.			Competence
Perform complicated non-surgical root canal therapy.		Experience	
Perform surgical root canal therapy.	Taught and Tested		

PROSTHODONTICS

28. Manage partially and completely edentulous patients.

Indicators of KSA	Didactic	Preclinical	Clinical
Provide a fully edentulous patient with complete dentures.			Competence
Provide a partially edentulous patient with a removable partial denture.			Competence
Provide a partially edentulous patient with a fixed partial denture.		Competence	
Manage a partially edentulous patient with an implant supported restoration.			Exposure



ORTHODONTICS

29. Manage abnormalities of orofacial growth and development.

Indicators of KSA	Didactic	Preclinical	Clinical
Perform preventive and interceptive orthodontics.		Experience	
Perform comprehensive orthodontics (brackets/aligners).		Exposure	
Perform orthodontic treatment involving surgery or multidisciplinary approaches.	Taught and Tested		

OPERATIVE

30. Restore carious lesions and manage other defects in teeth.

Indicators of KSA	Didactic	Preclinical	Clinical
Provide a direct restoration.			Competence
Provide a crown.			Competence
Perform a CAD-CAM procedure.		Experience	
Provide a post and core.			Competence
Provide inlay, onlay and veneer restorations.		Exposure	



ORAL SURGERY

31. Manage surgical procedures related to oral soft and hard tissues.

Indicators of KSA	Didactic	Preclinical	Clinical
Perform an uncomplicated extraction.			Competence
Perform a complicated extraction of an erupted tooth.			Competence
Perform adjunctive hard and soft tissue procedures (tooth exposure, alveoplasty).	Taught and Tested		
Perform an incision and drainage.	Taught and Tested		
Perform orthognathic surgery.	Taught and Tested		

PEDIATRIC, GERIATRIC AND SPECIAL NEEDS DENTISTRY

32. Manage pediatric patients.

33. Manage geriatric patients.

34. Manage and accommodate patients of all ages with special needs.

PAIN

35. Achieve local anesthesia for dental procedures.

36. Manage odontogenic pain.

37. Manage non-odontogenic pain.



GROUP C: General KSAs

SCIENTIFIC LITERATURE

38. Justify management recommendations based on a critical evaluation of the scientific literature.

COMMUNICATION

39. Communicate effectively, using a patient-centred approach, with patients, parents, guardians, staff, peers, other health professionals, social-service professions and the public.

40. Ensure that all communications with patients, including advertising and social media use are honest, accurate and comply with legal and professional obligations.

PROFESSIONALISM AND PRACTICE

41. Adhere to ethical and legal obligations (confidentiality requirements, task delegation, commitment to continued professional development, patient-centred care).

- Maintain personal health care information confidentially and securely in accordance with privacy legislation.
- Collaborate with other dentists and other healthcare providers.
- Determine the level of expertise required for treatment and demonstrate self-awareness on ability, including the need for referral.
- Foster a respectful and inclusive/anti-oppressive environment.
- Maintain appropriate boundaries.
- Accommodate for disability.
- Demonstrate a mindful and reflective approach to practice.
- Demonstrate a commitment to continuous learning, continuous quality improvement and continuing education.
- Maintain one's own health and well-being in order to serve others.
- Work with patients and colleagues to advocate for the health care needs of individual patients.
- Demonstrate critical thinking and problem-solving skills.



42. Maintain accurate and complete patient records.
43. Manage occupational hazards related to the practice of dentistry.
44. Take appropriate action when signs of abuse (physical, psychological, and substance abuse) and/or neglect are identified.
45. Apply principles of practice administration, financial and personnel management.

HEALTH PROMOTION

46. Recognize the social determinants of oral health.
47. Promote oral health within communities.

Approved by CDRAF Board: _____

Approved by ACFD Board: _____

Approved by NDEB Board: _____

The following references were used in the preparation of this document. Some wording has been reproduced directly from the references:

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