SPECIAL FEATURE

Understanding the Longitudinal DFT/DCT Scheme

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Graduating from dental school and stepping into the working world can feel incredibly daunting. Whilst the possibility of new experiences and opportunities is exciting, finding the right training scheme is fundamental for shaping your future endeavours. We are writing this article with the hope of providing an insight into the longitudinal Dental Foundation Training/ Dental Core Training (DFT/DCT) scheme situated in the Northwest. We both graduated dental school in 2022 and are now nearing the end of this longitudinal scheme. Despite us both being on the same training scheme, our experiences could not have been more divergent.

Saroop's experience in community dentistry

Throughout my time in the training programme, I have encountered a fulfilling journey, divided between two distinct roles. My working week is split between Community Dentistry Services (CDS) and general dental practice. Within my role in CDS, I have treated a variety of special needs patients and managed referrals for anxious children, emphasising the importance of communication and behaviour management. Being able to provide inhalation sedation and handle specialised equipment, like wheelchair recliners and bariatric chairs, has reinforced my commitment to providing inclusive care to all patients. Conducting best interests' meetings highlighted the ethical dimensions of dental care and the need for accessibility and collaboration across disciplines. Shadowing a special care consultant with complex cases challenged me to expand my skill set and approach patient care from different angles. By accompanying my colleagues on domiciliary visits and in general anaesthetic theatres I have developed a distinctive perspective on patient care outside of the clinic setting.



Saroop Samra

Involvement in epidemiological studies like the National Dental Epidemiology Programme honed my diagnostic abilities and emphasised the importance of evidencebased approaches. Additionally, I have had the opportunity to enhance patient care standards by teaching Mouth Care Matters at a local care home and actively contributing to quality improvement initiatives. Among these initiatives are the triaging of urgent referrals from GDPs and the assessment of nitrous oxide sedation usage, enabling me to critically evaluate practices and implement beneficial changes.

Alongside this huge variety of experience within CDS, I have been able to undertake general dentistry as a foundation dentist within a high needs area of Manchester, allowing me to have a positive impact on an underserved community.

Sohum's experience in oral surgery

During my time in the training scheme, I have had a unique and enriching experience split between the two roles. Half of my week is dedicated to general dentistry as part of DFT, while the other half is spent



Sohum Pandya

working on a tier 2 oral surgery referral list, constituting the DCT component. I have had the remarkable opportunity to concurrently develop my skills in general dentistry whilst significantly enhancing my competence and confidence in minor oral surgery. I undertake both components within the same practice, while some participants in our scheme are divided between two separate locations. This arrangement has provided me with a comprehensive understanding of dental care, from routine procedures to complex surgical interventions, all under one roof.

Whilst working on the tier 2 oral surgery referral list, I have been tasked with performing a wide array of procedures, ranging from routine simple extractions to complex surgical treatments such as the removal of impacted third molars, apicectomies and biopsies. This hands-on experience has allowed me to refine my surgical techniques and expand my clinical capabilities within the realm of oral surgery while not deskilling in restorative dentistry. I have been fortunate to receive exceptional support and guidance throughout this ✓ journey, as I have had one-on-one teaching from a consultant who is always on-site, which has been invaluable. Their expertise and mentorship have provided me with the confidence and knowledge needed to navigate complex cases and deliver highquality care to patients.

Our collective experience

In addition to the clinical experiences, the training scheme has provided us with access to unique opportunities that have enriched our professional development. For instance, a fully funded qualification in intravenous conscious sedation, which has been fantastic to gain early in our careers. This skill not only enhances patient care by alleviating anxiety and ensuring comfort during procedures, but also expands the scope of services offered as a dental professional. Furthermore, the scheme has facilitated collaboration with the Local Dental Network (LDN), allowing us to participate in the development of local referral pathways and the enhancement of community dentistry provisions. These experiences have broadened our perspective on dentistry and reinforced the importance of collaboration and community engagement in improving oral health outcomes for all.

The scheme cultivates unparalleled experience and teaching in a singular dental specialty, ensuring participants excel in their chosen field. However, this focus may limit exposure to other specialties offered in posts with rotations. While participants miss out on broader exposure, they gain deep knowledge and skills critical for success within their specialty. Furthermore, the geographical dispersion of the programme across the Northwest region can present difficulties for some individuals in attending study days, given the distances involved. However, the scheme has been incredibly accommodating and understanding, offering remote learning options and organising study days in convenient locations to alleviate these concerns. Additionally, there were initial

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logistic problems that arose regarding salary and contracts given the unique nature of the scheme, but thanks to the collaboration with our dedicated Training Programme Director (TPD), we successfully navigated through these challenges, ensuring smooth operation and continuity of the scheme.

All the skills we have learned throughout this placement are highly transferrable to other dental career pathways. We are wellequipped to continue in general practice, having developed a comprehensive skill set that includes both routine and specialist procedures in our respective fields. This range of skills is a testament to the well-rounded training received from this scheme. Moreover, these two years have not only provided me with invaluable professional opportunities but have also allowed me to forge lasting friendships with colleagues. We are incredibly grateful for the opportunities and support we have received through this scheme, and we look forward to continuing to grow and evolve as dental professionals.

BOOK REVIEW

Neuromuscular Orthodontics A (Inical Guide Fabio Savestano

NEUROMUSCULAR ORTHODONTICS: A CLINICAL GUIDE

Fabio Savastano; 2023; Springer Cham; £129.99 (hardcover); pp. 342; ISBN: 978-3-031-41294-3

Neuromuscular orthodontics: a clinical guide written by Fabio Savastano serves as a beacon in the realm of orthodontics, capturing the attention of specialists and researchers alike. The book consists of 11 meticulously crafted chapters. The author opens with an insight into the basic concepts of freeway space from a neuromuscular perspective. He elucidates the fundamental principles of neuromuscular orthodontics, emphasising the significance of the resting position of mandible after relaxation and deconditioning, facilitated with the help of a transcutaneous electrical nerve stimulation (TENS) device.

Savastano attempts to bridge the terminology gap between conventional orthodontics and its neuromuscular counterpart, shedding light on the limitations inherent in a system which is fixated solely on skeletal and dental parameters, neglecting the functional dynamics, a cornerstone of neuromuscular orthodontics.

Subsequent chapters delve into the treatment objectives unique to neuromuscular orthodontics, underlining their paramount importance. Functional anatomy of the stomatognathic system is revisited along with an exploration into the practical application of TENS devices and surface electromyography (EMG).

Savastano's book is enriched with descriptive photographs and clinical case reports, offering the readers a comprehensive understanding of neuromuscular diagnostic techniques. A simplified protocol is meticulously outlined, facilitating seamless integration into clinical practice. The book thoroughly explains kinesiographic representations and their interpretations of the data acquired across various malocclusions, providing clinicians with invaluable insights.

Additionally, the text ventures into the symbiotic relationship between orthodontics, swallow, function, and posture, highlighting the holistic approach championed by neuromuscular orthodontics. Savastano also explains the intricacies of orthodontic tooth movements while harmonising with the functional dynamics of the stomatognathic system.

The book culminates with a collection of meticulously documented case reports, offering readers ample examples of neuromuscular orthodontics in practice. In a field where awareness of neuromuscular orthodontics remains relatively scarce among orthodontists, Savastano's work serves as a clinical guide indeed, offering clarity as well as simplified techniques for integration of neuromuscular parameters into clinical orthodontic practice.

In conclusion, the book is an indispensable resource for orthodontists seeking to expand their horizons and embrace the potential of neuromuscular orthodontics.

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