Advanced Education in General Dentistry (AEGD) 1-Year Residency

United States Army Dental Activity

Fort Carson, Colorado

Program Director

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Introduction

History of the U.S. Army General Dentistry Training Program:

The Army Dental Intern Program was first approved by the Office of the Surgeon General in August 1946; training began in July 1947. Beginning in 1974, the programs were accredited by the American Dental Association under the title of Dental General Practice Residency. The Army programs were accredited either as General Dentistry Residency (DENTAC-based) or General Practice Residency (hospital or MEDCEN-based) programs. Today, there are six programs located at: Fort Benning, GA; Fort Carson, CO; Fort Campbell, KY; Fort Lewis, WA; Fort Jackson, SC; and Fort Sill, OK. The residency program is now titled Advanced Education in General Dentistry (AEGD) One-Year.

The AEGD One-Year program was officially established at Fort Carson in May 1981. The first class of eight residents arrived 19 July 1982. The program met full accreditation in 1983 and reaccreditations in 1994, 2000, 2007, and 2014.

Overall Supervision:

The Advanced Education in General Dentistry One-Year residency is under the supervision of the Surgeon General of the Army. The program conforms to the policies of the Army Medical Command (MEDCOM) and Office of the Surgeon General of U.S. Army, the Dental Directorate, the Army Graduation Dental Education Office, and the Commission for Dental Accreditation.

Goals and Objectives

The overall objectives of the program are in accordance with the standards described by the Commission on Dental Accreditation (CODA), which state that the AEGD-One Year residency will prepare the graduate to:

1. Act as a primary care provider for individuals and groups of patients. This includes: providing emergency and multidisciplinary comprehensive oral health care; providing patient focused care that is coordinated by the general practitioner; and directing health promotion and disease prevention activities.

2. Plan and provide multidisciplinary oral health care for a wide variety of patients including patients with special needs.

3. Manage the delivery of oral health care by applying concepts of patient and practice management and quality improvement that are responsive to a dynamic health care environment.

4. Function effectively and efficiently in multiple health care environments within interdisciplinary health care teams.

5. Apply scientific principles to learning and oral health care. This includes using critical thinking, evidence or outcomes-based clinical decision-making, and technology-based information retrieval systems.

6. Utilize the values of professional ethics, lifelong learning, patient centered care, adaptability, and acceptance of cultural diversity in professional practice.

7. Understand the oral health needs of communities and engage in community service.

As a dental officer in the United States Army, additional goals and objectives are required that surpass CODA standards:
1. Provide a positive learning environment with the resources and opportunity for each resident to learn and excel as a future Army Dental Corps Soldier, officer, and dentist.

2. Develop clinically efficient providers and military officers capable of independent function both in garrison and field dental environments.

3. Enhance the resident’s ability to make sound clinical judgments while understanding his/her limitations.

4. Promote the absolute ethical and compassionate treatment of patients at all times.

5. Ensure patient safety is of the utmost importance for all residents and their patients.

**Facilities**

The facilities in which this program is conducted at Fort Carson include the following:

1. Smith Dental Clinic: a 28 chair facility with full dental laboratory services, housing the Endodontic, Prosthodontic, Periodontic, and Comprehensive Dentistry Services. The residents’ office and most meetings and lectures are located at this clinic.

2. Larson Dental Clinic: a 28 chair facility troop clinic for Comprehensive Dentistry.

3. Dental Clinic #1: a 28 chair facility troop clinic for Comprehensive Dentistry.

4. Dental Clinic #2: a 24 chair facility troop clinic located in Evans Army Community Hospital for Comprehensive Dentistry. The Oral and Maxillofacial Surgery Department is also located in this clinic.

5. Peak Vista: a non-profit community health center with multiple locations in the local area where residents gain exposure to public dental health, pediatric dentistry, and dental patients with special needs.

6. Library: a hospital library offering a wide range of current dental books and periodicals. Literature searches and dental literature can be obtained via inter-library loans and Medline computer requests.

7. Peterson Area Dental Laboratory: a complete laboratory for the fabrication of prosthetic devices. Also serves as a source of ready information concerning laboratory procedures.

8. TASC: for the processing of pictures, DA Photos, and computer and audio visual support.

**Curriculum**

The Fort Carson AEGD-One Year residency course curriculum encompasses the following:

1. General Course Description: The AEGD One-Year is a 52 week, clinically based program, with an emphasis on comprehensive continuity of patient care with specialty rotations combined with comprehensive dentistry instruction throughout the year. The year runs from approximately 01 October to 30 September and includes:

   a. 43 ½ weeks of patient treatment
   b. 3 weeks of initial orientation, didactic instruction, and anxiolysis training
   c. 1 ½ weeks of the Combat Casualty Care Course (C-4)
   d. 4 weeks of in/out-processing
Fridays are reserved for administrative meetings, didactic lectures addressing all dental specialties, pathological conferences, literature reviews, patient care conferences, consultant visits, treatment planning boards, resident lectures, etc.

The Rocky Mountain Dental Conference, consultant visits, holidays, and other events are scheduled throughout the year.

2. Clinical Assignments: Patients are screened and assigned to ensure that each resident receives an appropriate clinical experience. Records of each resident’s clinical activities are evaluated monthly to assure desired quality, quantity, and assortment of patients.

3. Comprehensive care is one of the major objectives of the program, with all dental specialties feeding into the comprehensive treatment of patients. Residents spend about three to four days every other week in the comprehensive dentistry department. Comprehensive dental care requiring a multi-disciplinary approach is always emphasized. The residents will be responsible for the patient from initial evaluation through completion of treatment. Patients from all specialties are brought to the comprehensive dentistry department for continuity of care. Residents will also incorporate dental emergency visits (sick call) and exams into their clinic schedule.

4. The following is the breakdown of expected clinical rotation days in each specialty department:
   a. Comprehensive Dentistry: 6 to 8 days per month
   b. Endodontics: 4 days per month
   c. Periodontics: 4 days per month
   d. Fixed/Removable Prosthodontics: 6 days per month
   e. Oral Surgery: 1 week block, every 8 weeks (increases during the second half of the year)
   f. Community Dental Clinic: 1 day per 8 weeks; for pediatric, geriatric, and special needs patients

5. Didactic Assignments and Special Courses:
   a. Practice Management and Administrative Meetings: Held throughout the year.
   b. Treatment Planning Board: One complex, multidisciplinary case per resident, held during the second quarter of the academic year. It is envisioned that the residents will finish patient treatment prior to the completion of the residency.
   c. Table Clinic: Each resident will prepare a table clinic to be presented at the Annual Front Range DENTAC CE and to the local Colorado Springs Dental Society. Suitable mentors will be assigned to the residents for the preparation of the table clinics.
   d. Professional Lecture: Residents will be required to present a professional lecture to the DENTAC (approximately 30 minutes) during the last academic quarter of the program. Mentors will be assigned to assist the residents with their presentation.
   e. Specialty Seminars: Presented in block lectures to the group during the first two to three weeks of the program by each of the specialty mentors. Other lectures will be presented during the Friday didactic sessions and during rotations through the dental specialties.
   f. Literature Reviews: Held monthly throughout the year. Each specialty mentor assigns a current article to a different resident each month. Each resident must then present an article abstract and be prepared to discuss the article before the other residents and mentors.
g. Patient Care Conferences: Presented by residents monthly. This is a problem-based learning environment to discuss diagnosis, treatment planning, progress, and outcomes of treatment on treatment planning board patients as well as other comprehensive care patients.

h. Implant Dentistry: The DENTAC Implant Board meets monthly or bi-monthly as annotated in the academic calendar to evaluate potential implant candidates. Residents will be involved in and/or present to this diagnosis and treatment planning session.

i. Preventive Dentistry: Residents will have an opportunity to participate in Retiree Appreciation Day activities and other outreach programs.

j. Combat Casualty Care Course (C-4) and PHTLS: C-4/PHTLS is 9 days in duration. The temporary duty (TDY) training site and course activities are located at Camp Bullis, Texas.

k. The Peterson Area Dental Lab Workshop and Conference: A nationally-recognized dental meeting providing continuing education opportunity.

l. Common Task Training: Military specific training that prepares the Soldier to function in the combat environment. The military training consists of survival skills, CBRN, field medicine, etc.

m. Consultant Visits: Approximately one full day every other month will be reserved for visiting consultants. Consultants in various specialties will be invited throughout the year to lecture. Other sources will be designated by the Education Committee. A Continuing Education (CE) presentation by the consultant to all DENTAC officers may be arranged during the consultant visit.

n. Consultations: Residents must be able to request and respond to requests for consultations from physicians and other health care providers. Use of the consultations sheet (Army Standard Form 513) is routinely used.

o. Mandatory Training: Equal opportunity, race relations, and sexual harassment classes are conducted by DENTAC as mandatory yearly trainings held at quarterly DENTAC unit meetings.

p. Dental Officer of the Day (DOD):

1) This is an integral part of the residency and oral surgery rotation and serves to:

   a) Familiarize the dentist with the handling and treatment of patients who sustain maxillofacial trauma and head injuries.
   b) Familiarize the dentist with the hospital emergency room, medical techniques for treatment of minor emergencies, and experience in handling life-threatening situations.

2) Residents on their oral surgery rotation will pull DOD and Oral Surgery/First Call, serving on various weeks through the year. When on call, residents must carry a cell phone and DOD bag and be able to reach the ER within 60 minutes.

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For information about applying to the AEGD-1 Year Program, please contact the HPSP Manager, Ms. Roxanne O’Neal (Roxanne.m.oneal.civ@mail.mil).

For more information about the Ft Carson AEGD-1 Program please feel free to contact us or visit our Facebook page: @fortcarsonaegd1year