

Dental Specialty Fellowship Examinations

Restorative Dentistry Exam Syllabus

The exam syllabus is drafted based upon the curriculum [published by the GDC](#) as well as the [training syllabi](#) drafted by the Specialty Advisory Committee (SAC) which includes elements for the exam as well as elements being covered in the workplace-based assessments.

The curriculum is drafted by the Specialty Advisory Committee (SAC) and the GDC for use from September 2024.

On application to sit the examination, candidates will be asked to self-certify that have sufficient knowledge of the learning outcomes noted in this syllabus to attempt the examination.

1. History Taking and Examination		Curriculum REF 5.1	
ES code	Trainees should be able to:	SBA	SO
1.1	Describe, evaluate and analyse the biology, anatomy, histopathology, immunology and physiology of intra- and extra-oral structures and tissues in both health and diseased states.	X	X
1.2	Evaluate, analyse and assimilate the influence and impact of general and oral health and diseases on patient expectations, aesthetics and their effect on function and stability of the natural dentition and the provision of conventional fixed, removable and implant related prosthodontics.	X	X
1.3	Evaluate, analyse and assimilate the presentation and sequelae of congenital, developmental and acquired conditions on the dentition and supporting tissues.	X	X
1.4	Evaluate, analyse and assimilate the relevance and application of different investigations e.g. radiological and histopathological to the patients' presenting complaints.	X	X
1.5	Evaluate, analyse and assimilate pain management theories in managing pain of odontogenic and non-odontogenic causes.	X	X
1.6	Evaluate, analyse and assimilate the reliability, limitations, sensitivity and specificity of diagnostic tests and the relevance and value of other investigations.	X	X

1.7	Demonstrate an understanding of basic science relevant to the findings of extra and intraoral structures and tissues of health vs disease states.	X	X
1.8	Discuss the principles underpinning a comprehensive patient history.		X
1.9	Discuss the principles and processes underpinning a thorough examination of all extraoral and intraoral structures and tissues.		X
1.10	Analyse, systematically, extra oral and intraoral findings, interpret and evaluate these to judge the most appropriate way of managing the patient.	X	X
1.11	Recognise the relevance and make informed judgements on the need for a detailed occlusal analysis using analogue and digital technologies.	X	X
1.12	Assess and analyse existing fixed/removable conventional and/or implant retained prostheses appraising their biological, functional and aesthetic quality.	X	X
1.13	Judge the influence of the peri-oral structures on the stability, aesthetics and function of the dentition and/or prostheses.	X	X
1.14	Make a diagnosis, using the information gathered from the history and investigations including special tests to establish a prognosis for the overall restorative care plan.	X	X
1.15	Evaluate and analyse the prognosis of the teeth, restorations and prostheses using sound judgement in the context of the patients overall oral health status and its impact.	X	X
1.16	Assimilate, analyse and formulate a patient centred treatment plan using the information gathered and differentiating between urgent and non-urgent care.	X	X

2. Clinical Investigation and Imaging		Curriculum REF 5.1	
<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
2.1	Apply knowledge from the information gathered e.g. history, anatomy to evaluate the need for additional investigations such as radiology, blood tests.	X	X
2.2	Select and justify the choice of radiological and non-radiological investigations comparing their advantages and disadvantages.	X	X
2.3	Analyse and critically appraise the role, relevance, and limitations of a range of tests and techniques used in restorative dentistry.	X	X

2.4	Synthesise information gathered from investigations including radiological imaging and critically evaluate their sensitivity and specificity taking into consideration the factors that may influence interpretation of these investigations.	X	X
2.5	Analyse and critically appraise the clinical, radiological, and histological presentation of odontogenic and non-odontogenic pathosis of the maxilla and mandible, including the histopathosis of lesions of endodontic origin and periodontic origin.	X	X
2.6	Synthesise information and make informed judgements by critically evaluating and applying appropriate concepts/arguments supported by valid evidence from the findings of the clinical and special investigations.	X	X
2.7	Discuss and apply detailed knowledge of the guidelines regarding the use of cone beam computed tomography.	X	X
2.8	Discuss established techniques of analysis and enquiry for the purposes of diagnosis and patient centred care.		X

3. Diagnosis and Development of Treatment Strategies		Curriculum REF 5.1	
<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
3.1	Explain, evaluate and demonstrate a critical awareness of the disease processes and presenting features for prosthodontic, periodontic and endodontic conditions.	X	X
3.2	Appraise and apply the classification systems for periodontal diseases, endodontic lesions, occlusal disorders, dental developmental disorders, tooth wear and dental trauma rating their relevance and limitations.	X	X
3.3	Interpret and analyse the histopathology and microbiology of dental diseases.	X	
3.4	Evaluate the relevance of risk factors to prognostic outcomes for various treatment options, management strategies and possible complications.	X	X
3.5	Make and justify decisions on the likely outcomes for different treatment options in relation to healthcare systems and financial constraints.	X	X
3.6	Assimilate and synthesise information gained from the history, examination, clinical and special tests including radiological imaging	X	X

	to arrive at diagnoses, based on knowledge of disease processes involved and presenting features.		
3.7	Synthesise information when diagnosing and managing a case using a risk assessed approach that accounts for different patient and tooth related factors including medical history, patient compliance, and treatment complexity.	X	X
3.8	Critically evaluate and discuss alternative treatment options appraising their outcomes and applying the relevant evidence justifying the most appropriate in line with the patient expectations.	X	X
3.9	Critically evaluate and justify the choice of dental materials, equipment and techniques utilising the available clinical evidence.	X	X
3.10	Demonstrate appropriate consideration for the roles of the multi-disciplinary team.	X	X
3.11	Demonstrate and recognise the importance of contemporaneous and comprehensive record keeping and its relevance to delivering treatment strategies.		X

4. Health Promotion		Curriculum REF 5.8	
ES code	Trainees should be able to:	SBA	SO
4.1	Critically appraise preventive methods available to manage primary dental diseases making informed judgements supported by valid evidence about the most appropriate regime.	X	X
4.2	Devise risk mitigating strategies to manage potential complications of oral diseases.	X	X
4.3	Make and justify decisions about published local, national, and international guidelines on prevention of primary dental disease and management of medically compromised patients.	X	X
4.4	Synthesise information and critically appraise the associations between oral and systemic diseases, and their effect on of specialist periodontal, prosthodontic and endodontic care with stable and maintainable long-term outcomes.	X	X
4.5	Identify, explore and interpret the impact of general health on the future prognosis of oral structures and survival of restorations, including knowledge of how future growth might impact on the restorative care for child patients.	X	X

4.6	Discuss how to engage patients to understand and make informed judgements about the impact of oral health on the quality of life following effective prevention through supportive care and maintenance.		X
4.7	Analyse and apply the relevant guidelines in the management of medically compromised and special care patients	X	X
4.8	Evaluate and analyse the effect of ethnicity, diversity and inclusivity when making patient centred decisions about oral health promotion and care plans to manage oral disease.	X	X

5. Dental Implants		Curriculum REF 5.12	
ES code	Trainees should be able to:	SBA	SO
5.1	Describe and demonstrate an understanding of the importance of prosthodontically driven planning for the replacement of missing teeth with dental implants.	X	X
5.2	Analyse and discuss the evolution of dental implants including endo-osseous implants and compare and contrast the range of systems and their differences including materials, topography, design, configuration and components.	X	X
5.3	Explain, describe and discriminate between the anatomy, biology and histopathology at the cellular level of bone and peri-implant tissues and periodontal tissues.	X	X
5.4	Describe and demonstrate an understanding of the concept of osseointegration, differentiating between the factors that influence osseointegration and evaluate their impact on outcome.	X	X
5.5	Demonstrate an understanding of and analyse the soft tissue healing around dental implants and their transmucosal components.	X	X
5.6	Recognise and classify different surgical approaches and prosthetic implant components and justify their rationale and application.	X	X
5.7	Describe comprehensively and discriminate between aspects of medicine and systemic disease relevant to peri-implant diseases and vice versa.	X	X
5.8	Demonstrate, explain and evaluate the interactions at macroscopic, microscopic and cellular level between periodontal and peri-implant health and systemic disease.	X	X
5.9	Formulate appropriate treatment plans for implant retained or supported fixed and removable prostheses.	X	X

5.10	Demonstrate and apply knowledge of the relevant theoretical and clinical techniques and principles and their limitations in relation to dental implants in common with conventional prosthodontics including materials science.	X	X
5.11	Demonstrate and apply knowledge of and evaluate the maintenance and cost implications of treatments involving implants.	X	X
5.12	Apply an understanding of current guidelines to the provision of treatment assessing the limitations and risks.	X	X
5.13	Discuss the practical use of conventional and digital surgical planning and use of guides to assist in optimal surgical implant placement.		X
5.14	Consider the limitations of different radiographic and surgical guides relevant to the clinical situation.	X	X
5.15	Describe different outcome measures following surgical and prosthetic treatment with implants and establish a maintenance programme and recall schedule to monitor outcomes	X	X
5.16	Demonstrate and apply knowledge of the provision of fixed and removable implant procedures recognising potential risks.	X	X
5.17	Perform a detailed implant assessment taking into consideration the patient-related, tooth-specific and implant site factors to formulate a risk assured management plan to obtain predictability.	X	X
5.18	Collate, analyse and assimilate the information collected to establish the overall prognosis and treatment plan aimed at achieving the intended outcome.	X	X
5.19	Discuss how to present patients with the options, indications, techniques involved along with the risks and challenges of the implant treatment and all the alternative options for tooth replacement.		X
5.20	Prescribe, justify, and interpret plain radiographic and CBCT imaging, including the design and construction of radiographic guides to aid planning of number, position of fixtures and the reporting and interpretation of the images acquired	X	X
5.21	Design and evaluate provisional and definitive implant-retained or -supported prostheses for optimal aesthetic and functional restoration of implants.	X	X
5.22	Discuss the need for additional procedures such as managing the soft tissues around implants with the use of provisional restorations and abutments and evaluate the need for soft tissue augmentation procedures.		X

5.23	Identify appropriate implant components, instruments, techniques, and dental materials (based on clinical and radiological findings) for laboratory and clinical stages to minimise the risk of procedural errors and optimise the outcome of implant prosthodontics.	X	X
5.24	Discuss and analyse the different surgical implant placement techniques alongside the need for simple hard and soft tissue grafting techniques.		X
5.25	Discriminate between and demonstrate understanding of the different surgical protocols used for the placement of dental implants considering the various patient-related and clinical factors influencing choice.	X	X
5.26	Recognise the main types of implant systems, their indications and the surgical protocols used.	X	X
5.27	Systematically evaluate and justify the approach considered for the surgical placement of implants considering the bone and soft tissue as well as restorative factors.	X	X
5.28	Differentiate between the types of augmentation, devising a plan that reflects knowledge and understanding of the predicted outcome.	X	X
5.29	Demonstrate an understanding of post-surgical complications and their appropriate management.	X	X
5.30	Recognise the need for and explain the anatomical limitations and risks of sinus augmentation to facilitate implant placement.	X	X
5.31	Recognise and discuss the various non-surgical and surgical interventions to manage peri-implant disease, including the use of adjuncts and regeneration.	X	X
5.32	Demonstrate and apply knowledge of extra-alveolar implants e.g. zygomatic implants in the oral rehabilitation of patients.	X	X
5.33	Evaluate the effectiveness of implant rehabilitations, including appropriate maintenance regimes and management of peri-implantitis and complications associated with restorations.	X	X

6. Multi-disciplinary Management		Curriculum REF 5.2	
<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
6.1	Recognise and explain their role and responsibilities as a multidisciplinary team member.		X

6.2	Apply coherent and detailed knowledge while considering the role of other medical and dental specialists involved in the management of patients with multidisciplinary treatment needs.	X	X
6.3	Recognise and evaluate the role of the General Dental Practitioner in the integral management of the patient in ensuring patient centred care.		X

7. Multidisciplinary management of Hypodontia		Curriculum REF 5.3	
<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
7.1	Apply an understanding of the published evidence base to the management of patients with hypodontia.	X	X
7.2	Describe and explain the relevance of clinical findings in patients with hypodontia when considering restorative management options.	X	X
7.3	Evaluate the appropriateness and timing of restorative intervention within the context of other medical and non-medical care needed and the importance of engaging with dental care professionals.	X	X
7.4	Synthesize information and formulate treatment plans demonstrating subject specific knowledge when planning the stages of treatment and the anticipated timelines from start to finish.	X	X
7.5	Make informed decisions about the implications of planned care on the long term and life-long preventive and supportive care needed taking into consideration access.	X	X
7.6	Suggest appropriate management and care taking into consideration the broad range of treatment options for patients with hypodontia by collecting, analysing and assimilating information to ensure a patient centred treatment strategy using a shared care model.	X	X
7.7	Analyse and critically appraise the association and presentation of hypodontia with other commonly associated developmental disorders.	X	X
7.8	Demonstrate and apply knowledge of the full range of treatments for hypodontia taking into consideration the long-term implications of the chosen option and associated maintenance care needed.	X	X

8. Multidisciplinary management of Head and Neck Cancer	Curriculum REF 5.4
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<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
8.1	Apply an understanding of the published evidence base to the management of patients with head and neck cancer.	X	X
8.2	Evaluate the relevance of clinical findings in patients with head and neck cancer when considering their restorative management options.	X	X
8.3	Evaluate the appropriateness and timing of restorative intervention within the context of other medical and non-medical care needed and understand the importance of engaging with dental care professionals.	X	X
8.4	Analyse and evaluate the implementation of presurgical intervention considering future post cancer dental treatment needs and access to dental care.	X	X
8.5	Synthesise information and formulate appropriate treatment plans demonstrating subject specific knowledge when planning the stages of treatment and the anticipated timelines from start to finish.	X	X
8.6	Rationalise the staging of treatment for head and neck cancer patients integrating this with other forms of treatment such as chemotherapy, radiotherapy and surgery.		X
8.7	Make informed decisions about the implications of planned care on the long term and life-long preventive and supportive care needed taking into consideration access.	X	X
8.8	Critically evaluate appropriate non-surgical and surgical interventions aimed at optimising patient wellbeing.	X	X

9. Multidisciplinary management of Dentofacial Trauma		Curriculum REF 5.6	
<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
9.1	Apply an understanding of the published evidence base to the management of patients with dentofacial trauma.	X	
9.2	Evaluate the relevance of clinical findings, both extraoral and intraoral, in particular, the biology, biomechanics and anatomy of the orofacial region and dentition.	X	X
9.3	Evaluate the appropriateness and timing of restorative intervention within the context of other medical and non-medical care needed and understand the importance of engaging with dental care professionals.	X	X

9.4	Evaluate the short term and long-term consequences of dental trauma taking into consideration the emotional impact of these on the patient.	X	X
9.5	Demonstrate and apply knowledge of the appropriate classification for facial fractures, soft tissue, dentoalveolar and tooth injuries and dental resorption.	X	X
9.6	Analyse and evaluate the implications of effective short-term management and the consequences of poor first line management on the long-term outcome.	X	X
9.7	Synthesise information and formulate treatment plans for dentofacial trauma demonstrating subject specific knowledge when planning the stages of treatment and the anticipated timelines from start to finish.	X	X
9.8	Rationalise the staging of treatment for dentofacial trauma patients with other forms of interdisciplinary intervention e.g. orthodontic treatment.		X
9.9	Demonstrate and apply knowledge of the pathogenesis of internal and external resorption including surface, inflammatory and replacement types.	X	X
9.10	Advise on immediate emergency treatment for traumatised teeth whilst taking into consideration the post immediate management needs.	X	X
9.11	Appraise the options for providing optimal care taking into consideration the broad range of alternatives for patients with dentofacial trauma.	X	X
9.12	Suggest appropriate management for the acute phase of trauma, recognising and taking into consideration the possible sequelae.	X	X
9.13	Demonstrate understanding of the importance of pre and post trauma assessments and integrate the planned care with appropriate timing considering the possible long-term	X	X
9.14	Discuss how to communicate information to patients on the treatment options, the associated risks and long-term side effects.		
9.15	Evaluate non-surgical and surgical interventions aimed at optimising patient wellbeing.		X

10. Multidisciplinary management of Developmental Disorders		Curriculum REF 5.7	
<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO

10.1	Apply an understanding of the published evidence base to the management of patients with developmental disorders affecting the dentition.	X	X
10.2	Recognise and discuss the relevance of clinical findings in patients with developmental disorders when considering their restorative management options.	X	X
10.3	Evaluate the appropriateness and timing of restorative intervention within the context of other medical and non-medical care needed and the importance of engaging with dental care professionals.	X	X
10.4	Synthesise information and formulate treatment plans for patients with developmental disorders demonstrating subject specific knowledge when planning the stages of treatment and the anticipated timelines from start to finish.	X	X
10.5	Rationalise the staging of treatment for patients with developmental disorders ensuring the best long-term outcomes.		X
10.6	Make informed decisions about the implications of planned care on the long term and life-long preventive and supportive care needed taking into consideration access.	X	X
10.7	Identify and analyse the presentation of developmentally missing teeth with other disorders e.g. cleft and their differentiation from hypodontia.	X	X
10.8	Consider the full range of treatment for patients with development disorders taking into consideration the long-term implication of the chosen option and associated maintenance care needed.	X	X
10.9	Critically evaluate minimally invasive treatment modalities (bleaching, micro-abrasion and resin infiltration systems) taking into consideration the patients age, expectations and long-term outcomes.	X	X

11. Multidisciplinary management of Cleft Lip and Palate, Craniofacial Conditions and Congenital Defects		Curriculum REF 5.5	
<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
11.1	Apply an understanding of the published evidence base to the management of patients with cleft lip and palate, craniofacial conditions and congenital defects.	X	X
11.2	Recognise and discuss the relevance of clinical findings in patients with cleft lip and palate, craniofacial conditions and congenital defects when considering restorative management options.	X	X

11.3	Evaluate the appropriateness and timing of restorative intervention within the context of other medical and non-medical care needed and the importance of engaging with dental care professionals.	X	X
11.4	Synthesise information and formulate treatment plans for patients with cleft lip and palate, craniofacial conditions and congenital defects demonstrating subject specific knowledge when planning the stages of treatment and the anticipated timelines from start to finish.	X	X
11.5	Make informed decisions about the implications of planned care on the long term and life-long preventive and supportive care needed taking into consideration access.	X	X
11.6	Consider the full range of treatment options for patients with cleft lip and palate, craniofacial conditions and congenital defects taking into consideration the long-term implication of the chosen option and associated maintenance care needed.	X	X

12. Management of Endodontic Conditions		Curriculum REF 5.9	
ES code	Trainees should be able to:	SBA	SO
12.1	Demonstrate deep understanding of the structure and function of the pulp, and the causes and effects of pulp disease.	X	X
12.2	Demonstrate and apply knowledge of non-surgical endodontic treatment modalities and their limitations, appropriate diagnostic aids and operative equipment.	X	X
12.3	Diagnose and suggest appropriate management for post-treatment endodontic disease and assess relevant treatment complexity and prognostic factors.	X	X
12.4	Demonstrate understanding of the need for investigative and corrective surgery in the management of peri-radicular disease and discuss provision of appropriate surgical and soft tissue management.	X	X
12.5	Demonstrate understanding of the knowledge and skills necessary to assess teeth for root canal treatment and their subsequent restoration.	X	X
12.6	Discuss the long-term complications of failed endodontic treatment, their management and implications on future treatment outcomes.	X	X

13. Management of Prosthodontic Conditions	Curriculum REF 5.10
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<i>ES code</i>	<i>Trainees should be able to:</i>	SBA	SO
13.1	Discuss the principles underpinning the history and examination of patients requiring management with simple and complex prosthodontics and use this information to arrive at an accurate prosthodontic diagnosis.	X	X
13.2	Plan treatment strategies for patients requiring management that involve simple and/or complex prosthodontics rehabilitation.	X	X
13.3	Integrate oral health promotion and disease prevention when planning the prosthodontic management of patients with simple and/or complex treatment needs.		X
13.4	Demonstrate and integrate specialist prosthodontic care as part of overall interdisciplinary care, promoting the concept of whole patient oral healthcare.	X	X
13.5	Demonstrate understanding of the role of the multidisciplinary team in providing comprehensive prosthodontic care.	X	X
13.6	Discuss the provision of simple and complex removable prosthodontics for the comprehensive management of patients.		X
13.7	Discuss the provision of simple and complex removable and fixed implant supported prosthodontics in the comprehensive management of patients.	X	X
13.8	Suggest appropriate management for patients diagnosed with temporomandibular disorders.	X	X
13.9	Suggest appropriate prosthetic and conservative dental management of patients diagnosed with tooth wear.	X	X
13.10	Suggest appropriate aesthetic dental management of patients with fixed or removable prosthodontics and conservative dentistry.	X	X
13.11	Demonstrate and apply knowledge of materials science as related to the management of patients with prosthodontics.	X	X
13.12	Suggest appropriate prosthodontic management of patients who have experienced dental trauma with fixed or removable prosthodontics and conservative dentistry.	X	X
13.13	Demonstrate and apply an understanding of digital technology to the dental management of patients with fixed or removable prosthodontics and conservative dentistry recognising the limitations.	X	X
13.14	Demonstrate and apply knowledge of clinical imaging as it relates to the dental management of patients with fixed or removable prosthodontics and conservative dentistry.	X	X

13.15	Demonstrate and apply knowledge of the research that underpins the management of patients with fixed and removable prosthodontics and conservative dentistry.	X	X
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14. Management of Periodontic Conditions		Curriculum REF 5.11	
ES code	Trainees should be able to:	SBA	SO
14.1	Devise outcome-based treatment strategies incorporating published guidelines for patients presenting with routine and complex periodontal treatment needs.	X	X
14.2	Suggest appropriate evidence based non-surgical management for patients presenting with routine and complex periodontal disease.	X	X
14.3	Suggest appropriate surgical management for patients presenting with routine and complex periodontal treatment needs.	X	X
14.4	Identify the indications for of periodontal plastic surgery and its execution taking into consideration the expected treatment outcomes and its limitations.	X	X
14.5	Recognise peri-implant diseases and associated conditions and analyse the causative and associated risk factors deriving management plans that take into consideration treatment outcomes.	X	X
14.6	Identify appropriate management for periodontitis as a manifestation of systemic diseases and conditions affecting periodontal tissues.	X	X
14.7	Take into consideration the implications of the interrelationship with other clinical disciplines when planning treatment in a patient with simple and complex periodontal disease.	X	X

Version control

Version	Date	Changes made
1.0	9 November 2025	Document approved for publication
1.1	16 March 2026	Preface text added including noting source material for the syllabus.
1.2	8 April 2026	Minor formatting and branding updates, no content changes.

