

Longitudinal Dental Foundation Training: A Single Job with Unlimited Opportunities

by Manpreet Kaur, Zahra Rizvi and Morvin Patel

One of the most important decisions you'll make in final year is picking your foundation training post.

There's a lot of uncertainty about the 'longitudinal two-year scheme' and you don't hear many people talk about it. Longitudinal dental foundation training (LDFT) seems to be a rare breed; only threedeaneries across the UK offer these unique training posts. As longitudinal trainees based in three different hospitals across Yorkshire, we aim to share insights into our training with fellow students.

Manpreet Kaur

I work solely for the maxillofacial team in hospital, where I am treated like a DCT. My working day varies, from being on clinics performing surgicals and biopsies under local, assessing new patient referrals, assisting in theatre alongside seniors and being on call weekdays and weekends.

I'd describe my hospital placement as a having steep learning curve and an excellent opportunity if you want to progress into hospital dentistry. Working alone from the early months allowed me to gain confidence within the skills and knowledge gained as an undergraduate, while working in a supportive team environment allows me to develop areas I feel uncertain in. I've recently shadowed on orthodontic and restorative clinics in my admin block to broaden my experiences within secondary care dentistry.

My primary care setting is a nine-surgery practice in a beautiful York village. I work here as a GDP, seeing patients for check-ups, emergencies, simple fillings and even complex aesthetic treatments. Working in an affluent area has allowed me to develop my restorative skills and involve the laboratory for more challenging extracoronal restorations.

In September, I'll embark on a year of being an associate dentist to gain more solid ground to the bread-and-butter of dentistry. I believe that will allow me to decide which area of dentistry I enjoy the most, so I can pursue it to a specialist level. I would recommend York LDFT to anyone who wants to specialise.

Morvin Patel

I'm based in Sheffield, South Yorkshire, and work in paediatrics and maxillofacial surgery. My supportive consultants have given approved a flexible timetable, so I can gain more experience on different clinics.

My typical week consists of two generalanaesthetic lists, where I perform procedures such as exposing canines, extracting impacted teeth, tongue-tie release and frenectomies. I also get to assist in orthognathic, facial deformity and oncology operations.

I don't have to be on call when I'm on the maxillofacial ward, but I am expected to help the on-call DCT. Ward duties include clerking patients, suturing lacerations, and pre- and postsurgery care of patients. I also find joint paediatric/oral medicine and paediatric/restorative clinics very interesting. Besides the varied clinical exposure, there are opportunities to get involved in audits.

Along with our normal study days, I was fortunate enough to do paediatric teaching alongside master's students. This year, I plan to attend the maxillofacial teaching session.

In primary care, I work in a busy ninesurgery practice in a deprived area of Sheffield. I spend a lot of time doing fillings and extractions to stabilise patients. I'm here for two years, so the patients I've stabilised are now fit for more complex treatments. This has enabled me to create a good rapport with them. I have two approachable and helpful educational supervisors.

I'd recommend LDFT to everyone, even if you weren't planning to go into further training. I believe this job will make you a well-rounded clinician.

Zahra Rizvi

As part of my secondary care setting, I'm based at Pinderfields Hospital in Wakefield and the community dental service at Batley Health Centre. I love the variety of specialities that I've been exposed to: orthodontics, maxillofacial surgery and paediatric dentistry.

I've treated mild orthodontic cases from start to finish with fixed and removable appliances, under the supervision of our consultants. I'll admit I was a little anxious at the start, because of my minimal clinical experience on orthodontics at undergraduate level. My maxillofacial surgery component involves clinics, dentoalveolar surgery (under both local and general anaesthetic) and assisting in theatre for bimaxillary osteotomies and facial injuries.

I've improved my skills in managing anxious children. Batley is an area of high treatment needs, making it challenging to plan these cases. I also assist the paediatric specialist in comprehensive care cases under general anaesthetic. These patients often have complex medical histories and require communication with other healthcare professionals as part of their treatment plans.

The exposure to secondary care has hugely supplemented my treatments in general practice, which is based in Mirfield. It has influenced my treatment plans, improved my extraction technique and made me more confident in treating childrens. I count myself fortunate to have experienced this training.