



# CAOMS: On a Mission to Advocate, Educate and Congregate



CANADIAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS

# Brief History of Oral and Maxillofacial Surgery in Canada

The development of oral surgery in Canada has been guided, stimulated and assisted by our colleagues in the United States.

Dr. Simon Hullihen (1810-1857) has been credited as the first specialist in oral surgery and is widely regarded as the father of Oral Surgery on this continent. Although Dr. Hullihen's DDS degree was Honorary, during 22 years of practice, he operated on cases of hare lip, cleft palate and carcinoma; he reconstructed jaws and performed 1,100 major head and neck operations. He was also considered the first to report correction of mandibular prognathism.

Dr. James Garretson, born 18 years after Hullihen, must have been greatly influenced by him. He was Professor of Anatomy at the Philadelphia School of Anatomy and was appointed Oral Surgeon to the Hospital of the University of Pennsylvania. A gifted and dynamic teacher, he published the first book on oral surgery, *A System of Oral Surgery*, which ran through six editions between 1869 and 1890.

Garretson's teachings reached far afield, influencing such notables as Drs. Truman William Brophy, Thomas Lewis Gilmer and Matthew Cryer. He devised improved methods for operating on the jaws, including a method of sectioning the jaw for the correction of prognathism. An anatomist of worldwide reputation, he produced the chapter on the anatomy of the face and jaws in *Gray's Anatomy*; his own book on facial anatomy is a classic. He also had some 100 papers published in *The Dental Cosmos*, a superlative journal that

recognized the significance of oral surgery and was widely read by dentists in Canada.

Dr. George Beers of Montreal is recognized as the first Canadian dentist to specialize in oral surgery. Prior to his death in 1900, he was widely regarded as the most outstanding dentist that Canada had yet produced. He founded and edited *The Canada Journal of Dental Science*, a publication of high scientific and literary standards for the period. It provides the only reliable history of the profession in Canada during the period of its publication.

## Why a Specialty?

Oral surgery was the first specialty of dentistry because it is the only area of dental practice where cases could turn fatal from rampant infections or severe traumatic injury. Dental practitioners were grateful to be able to refer such patients to a colleague who exclusively practised oral surgery, and who could offer the experience and facilities that would best serve the patient.

Early in the 20th century, the number of dentists restricting their practice to oral surgery had greatly increased. They were located in the larger population centres across Canada, with the exception of Newfoundland and the central Prairies.

Canada did not have many dental schools at that time. Consequently, these pioneer specialists often had to "wing it" alone, with the limited knowledge and training that was available to them at that time.

Some of the pioneers in Canadian oral surgery include: Drs. Johnson and Cox in Vancouver; Dr. Henniger in Halifax; Dr. Roger McMahon in Montreal; Dr. E.W. Paul in Toronto; Dr. George Everett in Hamilton; Dr. Roy Beer in Winnipeg and Dr. Doug Coupland in Ottawa. Coupland played a most effective role in organized dentistry and contributed many fine papers on oral surgery to the literature.

Those best remembered for their contributions to teaching include Dr. Henniger (Dalhousie University), Drs. Beers and McMahon (McGill University) and Drs. Henderson and Paul (University of Toronto).

One of the few benefits from World War I was the knowledge and experience gained by both medicine and surgery through treating battlefield casualties. Canada was fortunate in having Drs. Fulton Risdon and Carl Waldron assigned to the Maxillofacial Centre for the Canadian Forces at Sidcup, UK where they rendered outstanding service despite an overwhelming casualty load.

Following the war, Risdon returned to Toronto as a pioneer specialist in plastic and oral surgery and was appointed as Professor of Oral Surgery at the Royal College of Dental Surgeons. He was a resourceful innovator who introduced, among other things, the Risdon twisted wire arch and intermaxillary wiring to replace the cumbersome and time-consuming cast cap splints for the treatment of jaw fractures. He contributed many excellent works to the early literature of plastic surgery and oral surgery.

Waldron moved to the United States after the war, where he was later actively involved in establishing the Board of Oral Surgery. He also served as the first editor of the *Journal of Oral Surgery* (now the *Journal of Oral and Maxillofacial Surgery*), first published in 1943.

The Ontario Society of Oral Surgeons was organized about 1930. At that time, its membership was not large, and its activities were quite limited.

World War II also left its impact upon dentistry, as hundreds of Canadian dentists, uprooted from their practices, witnessed dentistry applied under war-time conditions in unusual places and under varying circumstances.

When they returned from overseas, many investigated the feasibility of returning to their practices through the avenue of a specialty. Specialization in medicine expanded rapidly in the immediate post-war years; the same trend was apparent in dentistry.

About this time, Alberta amended its Dental Act so that no person could declare him or herself to the public as a specialist without acquiring the stated academic standard. Unfortunately, as no effort was made to provide the training necessary to meet these standards, the specialty of oral surgery did not progress as it might have.

In 1944, the Ontario Licensing Board adopted a bylaw requiring a strict limitation of practice to the specialty and a one-year graduate course, embracing the necessary biological sciences, anesthesia and evaluation of clinical competence. It was a time of flux and uncertainty, but in 1945, the Faculty of Dentistry at the University of Toronto established such a graduate program.

In the United States, the Board of Oral Surgery was formed, analogous to the American Board of Surgery, offering certification and the designation of Diplomate to the successful candidates. This training program involved one year of biological sciences followed by two more years as an intern and resident in an approved institution. Accompanying this event was provision for a so-called "grandfather clause" which enabled established practitioners to achieve the Diplomate status, over a three-year period, by upgrading themselves to Board standards, all by correspondence.

In 1954, the Board of Directors of the Ontario Licensing Board stipulated that the graduate training program in Oral Surgery was to be three years, with statutory requirements virtually identical to those of the American Board of Oral Surgery. The following year, the Faculty of Dentistry at the University of Toronto instituted such a program, which still continues.

A major breakthrough for the development of oral surgery occurred when Dr. Chalmers Lyons was appointed Professor of Oral Surgery in both the medical and dental schools at the University of Michigan. He served in this dual capacity for over 20 years. Lyons had the energy and drive to establish a preeminent training program in Oral Surgery. Under the guidance of Dr. Don Bellinger, the Ford Hospital in Detroit also instituted an outstanding training program. In the early 1950s, two Canadians were admitted, in succession, to this program – a major concession to the University of Toronto and Dr. Joe Johnson, then Professor of Oral Surgery, at a time when the Ford Hospital was receiving one hundred qualified applications a year from US citizens.

Radiology, oral pathology and anesthesia are three of the foundations of oral surgery. Until relatively recently, oral pathology was a much-neglected subject. When Dr. Kurt Thoma published his mammoth book on oral pathology, the profession's understanding of this subject took an enormous leap forward.

Another advance occurred with the release in 1963 of Dr. H.M. Worth's *Principles and Practice of Oral Radiological Interpretation*. This text, combined with the clinics he presented across the country, have been potent influences aiding the progress of oral surgery in Canada.

In the field of anesthesia, worthy of note are the contributions of Dr. William Ewing and staff (Akron); Dr. Fred Clement (Toledo); Dr. Morgan Allison (Columbus); Dr. Leonard Monheim (Pittsburgh) and Dr. Mendel Nevin (New York).

The idea of forming a Canadian Society of Oral Surgeons (later renamed the Canadian Association of Oral and Maxillofacial Surgeons) started with discussion among members of the Ontario Society of Oral Surgeons. It was deemed desirable to establish a national forum to discuss surgical problems, to oversee the rapidly-changing format of graduate education and to speed progress in oral surgery after the pattern demonstrated by its counterpart in the United States.

An organizational meeting was convened in conjunction with the meeting of the Canadian Dental Association (CDA) in the fall of 1953. Although notice of this meeting was publicized widely across Canada, the attendance was disappointingly small. Nonetheless, pro tem officers were elected, and a committee was formed to draft a constitution.

It was later decided that the annual business and scientific meeting be held at the same time and place as the CDA annual meeting. This would help connect the oral surgeons with their fellow specialists across Canada. It also gave exposure of the new society's aims and objectives to the rank and file of Canadian dentists.

The first scientific session was rather meager due to lack of funds, but the second showed much improvement and gave promise for the future. Not long after its inception, the Society was formally recognized as a section of the CDA.

The growth and success of CAOMS are due largely to the initiative, self-sacrifice and dedication of successive Executive Councils. The load has always been heavy but has progressively increased with the growth of the Association.

In 1964, an act to incorporate the Royal College of Dentists of Canada (RCDC) was enacted by the federal government. Its objective was to provide proof of academic and clinical excellence, and of adequate training through a rigid, two-part examination. It also aimed to encourage adequate training programs in Canadian dental schools. Canada currently has six fully accredited oral and maxillofacial surgery training programs in Winnipeg, Manitoba, London, Ontario, Toronto, Ontario, Montreal, Quebec, Quebec City, Quebec and Halifax, Nova Scotia.

Continued progress in oral surgery depends on constant renewal by newly-trained oral surgeons emanating from first-class teaching programs. It also relies on the vigilance of the Canadian Association of Oral and Maxillofacial Surgeons in continually pressing for higher standards in the profession. Thus far, the success of the organization has more than fulfilled the dreams of its founders.

However, there is no shortage of challenges remaining to further establish OMS as a fully-recognized advanced dental, medical and surgical specialty. We are on the leading edge of both the medical and dental worlds, and are in a key position to play a role in having oral health recognized as an integral part of global health.

We have come a long way from insulating ourselves within Canada to tying close links with our esteemed neighbours to the south! Joint meetings in Orlando (2003), Toronto (2009), Washington D.C. (2015) and now Nashville this fall are the most prominent demonstrations of the strong ties forged by the executive officers and members of AAOMS and CAOMS. Professional and personal friendships are stronger than ever across our geographical border and within our consolidated objectives.

As if these joint meetings were not enough, recently becoming an official ally in JOMS truly represents

our achievement of proximity in mind and scope with AAOMS.

In the near future, we can expect to share many agenda items with AAOMS via our joint executive meetings and now-traditional participation as guests at the annual Day on the Hill event. These shared areas of interest include:

- Citizens' access to care within the provincial/state and private health care systems;
- Recognition by provincial/state authorities of the unique status of OMS within dental specialties;
- Acceptance by the dental and medico-surgical community of our specific education, knowledge base and scope of practice.

We are proud and grateful that AAOMS considers us as peers through our combined aims and achievements. Let's continue our mutually-beneficial partnership in the same spirit for many years to come.

**CAOMS:  
Committed to Advocate,  
Educate and Congregate.**

*The Canadian Association of Oral and Maxillofacial Surgeons would like to thank the following individuals who contributed to the production of this insert by providing content and guidance: Joe Armstrong, Carl Bouchard, Marco Caminiti, Mary-Lynn Campbell, Geneviève Chiasson, Reginald Goodday, Curtis Gregoire, Ellyn Holzman, Pierre-Eric Landry, Adnan Shah and Annie-Claude Valcourt.*

# University of Manitoba

## Introduction

The Dr. Gerald Niznick College of Dentistry at the University of Manitoba admitted its first students in 1957 under the leadership of its founding Dean, Dr. Jack Neilson. Dr. Neilson had the vision of providing excellence in undergraduate dental education, but he also understood that Canada needed to recruit and train its own dental specialists and, most importantly, dental scientists. During his lengthy tenure he achieved several of these goals. Within a decade, graduate programs were established in Oral Biology, Orthodontics and Oral Pathology. Periodontology and Oral Surgery were next in line and eventually he was able to recruit sufficient qualified faculty in the 1970's to proceed with the creation of a program in Oral and Maxillofacial Surgery.

## Accreditation Eligibility

Program Directors who have participated in the launching of a new program will know just how laborious a task it is, as the program goes from *eligibility* to *provisional* and eventually to *full approval* by the Commission on Dental Accreditation (CODA). This process, which was initially led by Dr. Stan Kennett and completed by Dr. Dennis Wedgwood, allowed Manitoba to accept its first Resident in 1977. Advice and assistance from Dr. Dan Waite and Dr. Robert Walker, both highly respected Program Directors in the United States, were invaluable.

They gave encouragement and, in particular, both commented favourably on the excellent relationships that existed with the University's Faculty of Medicine and especially with its Department of Surgery. This may seem obvious in today's environment, but at that time in most parts of Canada, Dentists, including Dental Specialists, had to admit patients to hospital under the joint care of a physician. Before the program started these archaic practices had been eliminated, principally by the efforts of the above-mentioned individuals.

## Scope of Practice

This subject is still an area of contention in many parts of Canada, so the important achievement of obtaining parity with medical specialists in the management of maxillofacial trauma, even before we accepted our first resident, was an important advance for the specialty. That parity continues today, and the

volume of trauma has tripled since those early years, partly as a result of hospital consolidation in Manitoba but also, sadly, due to the overall increase in inter-personal violence in the community. The resident training program is based at the Health Sciences Centre in Winnipeg, which is a Level 1 Trauma Centre. It undertakes a full range of Maxillofacial Trauma and enjoys benefits from a strong academic support system of appropriate courses and a broad range of surgical experience covering odontogenic deep facial and neck space infections, Orthognathic and Cleft surgery, Temporomandibular Joint surgery, Benign Maxillofacial Pathology and its Reconstruction, and Dento-alveolar and Implantology, including bone grafting.

## Services

The OMFS Program at the University of Manitoba is the only program in Western Canada, so it has a large catchment area



## Residents and Faculty



DRS. ALMUZAYYEN, ABDO, BASSEY, DELGLISH, COHEN, CURRAN, SHAH, ELGAZZAR AND ALROWALY

covering the province of Manitoba and extends services from the Northwest Territories to Nunavut and parts of Western Ontario to parts of Saskatchewan.

This program provides Maxillofacial Surgery services to the largest First Nations population in North America.

### Program Directors

It has been almost 50 years since the first steps were taken to bring Oral and Maxillofacial Surgery in Manitoba to where it is today, and that was accomplished by the efforts of many. There have only been four full-time program directors since the commencement, and all have made significant contributions.

**Dr. Dennis Wedgwood** (1975-1980) deserves special mention as the one who got the program “over the line”. His particular talent, apart from being an excellent clinician and surgeon, was his ability to build bridges with our medical colleagues, which served our residents well as they interacted with their medical co-residents in patient care and rotations.

**Dr. Richard Greenwood** (1980-1985) brought a different set of skills and also had a significant background in ENT.

**Dr. John Curran** (1986-2009) was supported by Dr. Andrew Stoykewych and also Dr. Mark

Cohen and Dr. Leland McFadden, both of whom added considerable depth to the scope of training. This team helped to build a program that was stronger than it had ever been. The addition of an extra year of training in 1989 by the Council on Accreditation occurred during this period. This was necessary to allow programs to cope with the ever-expanding demands of clinical practice and even with that, many graduates proceed on to fellowships for additional specialized surgical training.

**Dr. Adnan Shah** has been the Director since 2009. He and his colleagues Drs. Reda Elgazzar, Catherine Dale, Leland McFadden and Blair Dalgleish further expanded the scope of the program on the solid foundations laid by the predecessors. The program enjoys an excellent relationship and collaborative work with other dental and medical/surgical services in the hospital.

### The Residents

One should not forget that the program exists to provide young women and men, who have already shown their mettle, with the education and training that will enable them to be leaders in the profession and major contributors to the health and welfare of the community in their specialty. More than 40 Oral and Maxillofacial Surgeons, trained at the University of Manitoba, are today practising

throughout Canada; in addition, a small number of international graduates have returned to their own countries of Kuwait and Saudi Arabia.

The University of Manitoba offers a four-year Hospital Residency program, earning an MDent degree. The residents are expected to have completed one year of Hospital Internship prior to being admitted to the Graduate Program. The resident intake is one per year and the program inducts an international resident every three to four years.

It is said that in order to bring the standards of a profession at large to the same level as other advanced countries, we must train them ourselves. Oral and Maxillofacial Surgery in Canada has done this to a significant extent, yet more can be done.

### PROGRAM DIRECTOR (2009 TO THE PRESENT):



#### Dr. Adnan Shah

*BSc, BDS, MDS (UK); FRACDS (Australia); FDSRCS (Edinburgh); FFDRCS (Ireland); FCPS (Pakistan); FDSRCPs (Glasgow); FRCDC (Canada); Diplomate American Board of Oral and Maxillofacial Surgery*

*Division Head and Postgraduate Director, Oral and Maxillofacial Surgery Graduate Program*

*Division of Oral and Maxillofacial Surgery*

*Dr. Gerald Niznick College of Dentistry*

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# Western University

## Introduction

The Oral and Maxillofacial Surgery Residency Program at Western University (formerly the University of Western Ontario) is the youngest in Canada. Prior to its inception, the Division consisted of Dr. Joe Armstrong and Dr. Henry Lapointe. At that time, the post-graduate focus at UWO was a General Practice Residency. Under Drs. Armstrong and Lapointe, the GPR became increasingly OMFS-driven, where our GPR's were in essence functioning as PGY1 (Post Graduate Year) OMFS residents. In 2000, Dr. Michael Shimizu joined the division of Oral and Maxillofacial Surgery at UWO. Concomitant in 2000, Dr. Armstrong pursued a sabbatical year in the form of the Tumor and Reconstructive Oral and Maxillofacial Surgery Fellowship under Dr. Robert E. Marx at the University of Miami School of Medicine. Experience in this extraordinarily productive year became the operational template to proceed with an OMFS Residency program in London and Southwestern Ontario. Mentorship by Dr. Marx provided value-added scope of practice in craniomaxillofacial tumor, reconstructive and trauma surgery, as well as priceless insight into the administrative and governance structure of a residency program. Upon his return to UWO, fruitful discussions with Dr. Murray Girrotti, Vice President Medical Affairs, London Health Sciences Centre, officially modified the "Delineation

of Privileges Document" for Oral and Maxillofacial Surgery within the teaching hospitals of London. The result was an accurate delineation of OMFS privileges that reflect a full scope OMFS program at that time.

We then began the careful and incremental administrative steps within the hierarchy of the university and the teaching hospitals to officially create a new post-graduate program in Oral and Maxillofacial Surgery in Dentistry and Medicine.

## Key Milestones

- In 2002, the Commission on Dental Accreditation in Canada (CDAC) accredited the Schulich School of Medicine and Dentistry and recommended that the School of Dentistry develop graduate programs. Due to its maturity in programmatic evolution, OMFS was selected to be the first new program.
- The 2003 CDAC Accreditation of the teaching hospital's Departments of Dentistry proceeded with OMFS residency from an excellence in patient care perspective.
- The UWO Schulich School of Dentistry 2004 Strategic Plan (published in the spring of 2005) identified the strategic priority of initiating an OMFS program, supported by Dr. Carol Herbert, Dean of Medicine and Dentistry and Dr. Harinder Sandhu, Director of the School of Dentistry.
- Dr. Carol Herbert and Dr. Margarete Rebel (Associate Dean Undergraduate Medical Education) next ensured that the OMFS program would be allotted a seat in each medical school class, in perpetuity.
- In 2006, Dr. Salvatore Spadafora, Associate Dean Post-Graduate Medical Education, approved OMFS inclusion under Schulich Postgraduate Medical Education and confirmed provincially-funded resident pay for six years of OMFS residency training.
- Dr. Tom Daley and Dr. Mark Darling (Oral and Maxillofacial Pathology) ensured that the Master of Science in Pathology would be created, with the studies spread over the entire six years of the program without the burden of six years of tuition.
- Dr. R. Stapleford, Chief of Oral and Maxillofacial Surgery and Hospital Dentistry, Windsor Campus and at the Hotel Dieu Hospital in Windsor, operationalized the teaching role of local faculty in OMFS and resident off-service training within the Department of Anesthesia.
- In 2006, the first accreditation documentation for the Oral and Maxillofacial Surgery Residency Training Program at UWO was submitted to CDAC. Provisional accreditation was granted and the program was born.
- The first resident, Dr. Tommy Fok, was selected, and began training in 2007.

## Current Residents

DR. JI HYUN  
HANDR. NATASHA  
HOLDERDR. DAMIR  
ROSICDR. JEFF  
LOVELLDR. JEFF  
SOPARLODR. BEN  
ROGALA

- In 2008, the program was granted full CDAC accreditation, with no reservations.

As of this writing, the program has eight graduates and six current residents. Notable academic alumni are:

- Dr. Karl Cuddy, Assistant Professor of Oral and Maxillofacial Surgery, University of Toronto and Mount Sinai Hospital, Toronto
- Dr. Jacqueline Cox, Consultant in Oral and Maxillofacial Surgery, University Hospitals Bristol, NHS Foundation Trust, Bristol, UK

The OMFS Residency program at Western involves the collaboration of multiple institutions, including:

- The Schulich School of Medicine and Dentistry (London Campus and Windsor Campus)
- The Division of Oral Pathology, Department of Pathology, Schulich School of Medicine and Dentistry
- London Health Sciences Centre (University Campus and Victoria Campus)
- St Joseph's Health Centre
- Windsor Regional Hospital (Metropolitan Campus and Ouellette Campus)

Key OMFS Faculty are Drs. Joe Armstrong, Henry Lapointe and Michael Shimizu in London, Ontario and Drs. Richard Stapleford and Mark Shuren in Windsor, Ontario. The program has three interconnected components: OMFS clinical teaching and surgical

training, a Master of Science in Pathology and Medical School. The OMFS clinical teaching and surgical training component occurs over six years, with experience through the teaching hospitals in the London and Windsor Campuses. This acquisition of skills brings together didactic and clinical competence to allow sitting the Royal College of Dentists of Canada fellowship examinations (FRCDC) in Oral and Maxillofacial Surgery. There is a concomitant Master of Science in Pathology where the residents have historically participated in basic science research experiments. Lastly, the Medical School component provides a didactic base in medical knowledge, with clinical elective emphasis on general surgery, trauma, critical care, neurosurgery and anaesthesia.

The program's academic structure borrows heavily from the CanMeds framework for medical education. This framework was developed by the Royal College of Physicians and Surgeons of Canada, with the purpose of defining the necessary competencies for all areas of medicine and provides a comprehensive foundation for medical education and practice in Canada. The OMFS competencies were developed to align with our medical/surgical colleagues and to provide the academic framework of our program.

Senior residents have also been placed in Oral and Maxillofacial Surgery Units in Glasgow, UK, Portland, Oregon, and Jacksonville,

Florida, as well as in academic institutions, including the University of Michigan, Johns Hopkins University and the University of Toronto. This has led to invaluable surgical exposure and experience, further academic and professional refinement and has proven a great complement to the program in London.

Casting our collective eye forward, our goal is continued program development and excellence in:

- Tumor and reconstructive surgery, with support from the Province of Ontario's Ministry of Health and Long-Term Care—Oral and Maxillofacial Rehabilitation Program.
- OMFS Trauma Service, through collaboration with General Surgery and our regional Critical Care and Trauma Program at London Health Sciences Centre.
- Interdisciplinary Research, Teaching and Clinical Service through collaboration with the Schulich School of Medicine and Dentistry's Graduate Orthodontics and Dentofacial Orthopaedic Program.
- Clinical Research Projects through academic exploration of OMFS topics including, but not limited to, craniomaxillofacial tumor and reconstruction surgical advancements, the management of medication-related osteonecrosis of the jaw, local and regional antibiotic resistance and the treatment of osteomyelitis.

- Fundraising through our alumni, industry partners, and patient philanthropists.
- Faculty recruitment leading to the next generation of academic, institution-dedicated OMF Surgeons, firmly rooted in Dentistry, trained in medicine, masters at science, and subspecialty trained to advance the footprint of Canadian OMFS and deliver excellence in patient care.

Southwestern Ontario is the most southern part of Canada. Situated between the three inland oceans that are The Great Lakes, it is Canada's Midwest. It is a perfect place for future OMFS academics to call home and grow our OMFS program from infancy into a mature, vibrant service for all the people we serve. To summarize our intent, it is to create a program in Oral and Maxillofacial Surgery where Vision and Mission statements can be distilled down to "The Relentless Pursuit of Excellence".

## FOUNDING AND CURRENT PROGRAM DIRECTOR (2006 TO THE PRESENT):



### Dr. J. E. Armstrong

*BSc, DDS, MSc, FRCDC*

*Oral and Maxillofacial Surgeon*

*Site Chief, Department of Dentistry,  
London Health Sciences Centre*

*Associate Professor, Oral and  
Maxillofacial Surgery, Schulich  
School of Medicine and Dentistry*

*Program Director, Oral and  
Maxillofacial Surgery Residency  
Program, Schulich School of  
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## PRESIDENTS OF CAOMS 1953-2021

1953	Dr. D. Tanner	1976	Dr. S. Claman	1999	Dr. W. Abbott
1954	Dr. J. Johnson	1977	Dr. F. Lovely	2000	Dr. T. Head
1955	Dr. S. Hamilton	1978	Dr. F. Lovely	2001	Dr. R. Goodday
1956	Dr. E. Bier	1979	Dr. G. Maranda	2002	Dr. R. Sorochan
1957	Dr. G. de Montigny	1980	Dr. G. Maranda	2003	Dr. W. Dobrovolsky
1958	Dr. D. Tanner	1981	Dr. J. Gryfe	2004	Dr. J. Friedlich
1959	Dr. G. Chesnay	1982	Dr. M. Mickleborough	2005	Dr. L. McFadden
1960	Dr. H. Simmons	1983	Dr. P. Surprenant	2006	Dr. A. Morrison
1961	Dr. F. Smith	1984	Dr. P. Surprenant	2007	Dr. P-E. Landry
1962	Dr. A. Antoni	1985	Dr. R. Warren	2008	Dr. D. Omura
1963	Dr. P. Luxford	1986	Dr. R. Warren	2009	Dr. B. Forster
1964	Dr. A. Charest	1987	Dr. D. Precious	2010	Dr. K. Lung
1965	Dr. A. Hoffman	1988	Dr. D. Precious	2011	Dr. B. Davis
1966	Dr. D. MacDonald	1989	Dr. B. Lyons	2012	Dr. J. Pompura
1967	Dr. K. Lindsay	1990	Dr. J. Zosky	2013	Dr. F. Hohn
1968	Dr. A. Raymond	1991	Dr. A. Gonshor	2014	Dr. E. Dore
1969	Dr. P. Smylski	1992	Dr. T. Stevenson	2015	Dr. M. Melo
1970	Dr. E. Millar	1993	Dr. P. Cyr	2016	Dr. I. Ross
1971	Dr. A. Swanson	1994	Dr. V. Moncarz	2017	Dr. A. Chehade
1972	Dr. P. Mercier	1995	Dr. S. Kucey	2018	Dr. C. Dale
1973	Dr. S. Weinberg	1996	Dr. D. Vincelli	2019	Dr. K. McCann
1974	Dr. S. Weinberg	1997	Dr. D. Murphy	2020	Dr. M. Smith
1975	Dr. S. Claman	1998	Dr. C. Robinson		



# University of Toronto

St. George Campus

## Introduction

Established in 1953 by Dr. Albert Antoni at The Toronto General Hospital and The Faculty of Dentistry, the history of Canada's first three-year, post-graduate oral and maxillofacial surgery program was challenging. Following service in WWII as a dental officer, Dr. Antoni completed oral surgery studies at Henry Ford and then came to Toronto. In the early days, the specialty was feebly accepted in the hospital. However, with persistence, hard and excellent work, and assisted by a strong and supportive referral base in the city (as well as support from the largest faculty of dentistry in Canada), oral surgery quickly blossomed.

Until 1990, the Toronto General Hospital and Doctors Hospital were the major sites for clinical training. The Toronto Western and The Hospital for Sick Children then opened their doors, followed by Mount Sinai Hospital in 1997 under the guidance of Dr. Gerry Baker. Over the years, under the leadership of some of the pioneers of Canadian oral and maxillofacial surgery such as Dr. Albert Antoni (who was also a founder of the CAOMS), and Drs. Peter Smylski, Jack Symington, Cameron Clokie, Howard Holmes, George Sandor and David Lam, the oral and maxillofacial surgery program in Toronto continued to develop and flourish, placing its emphasis on service, teaching, education, and research and enabling it to reach its current status where it enjoys a world-class reputation. Over 125

surgeons practising in Canada, the United States and many other parts of the world received their specialty training in this program.

The current format of the OMFS program consists of a four-year Master of Science degree in OMFS. We currently except two Ministry of Health-funded positions per year. The program also engages in a non-categorical salaried one-year OMFS internship program that focuses entirely on assisting and supporting the residency operating room services. We currently have a yearly Fellowship Program (funded by Synthes and Zimmer Biomet) focusing entirely on temporomandibular joint replacement and orthognathic surgery. This unique TJO Fellowship participates in the AACMF match.

The program benefits from the close association with many of the University of Toronto and Metropolitan Toronto hospitals, including:

- Mount Sinai Hospital (MSH) (the dental department, and the Centre for Temporomandibular joint surgery)
- Sunnybrook Hospital (SBH) (the dental department and pathology and reconstructive services)
- Humber River Hospital (HRH) (the maxillofacial surgery department and trauma, reconstructive and centre for facial deformity correction)
- Princess Margaret Hospital (PMH) (the dental oncology department, and the oral and maxillofacial rehabilitation program)



- The Hospital for Sick Children (SCH) (dental department)
- Holland Bloorview Kids Rehabilitation Hospital (HBKR) (the cleft lip palate program and the centre for corrective jaw surgery)

Our strength is our broad focus and complete educational coverage in the full scope of OMFS. We continue to improve on our ability to treat patients across Canada's largest metropolitan area of close to six million people. Combined with educational achievements is our incredibly-dedicated support from the Attending surgeons who operate within these facilities.

Attending staff include Dr. Karl Cuddy, the education director and reconstruction program for the residency at HRH, PMH and MSH; Dr. David Psutka, director of the TM joint reconstruction program at MSH; Drs. Eddie Reinish and Brian Rittenberg at MSH and HRH, Dr. Justin Garbedian at SCH, Dr. Nick Blanas at SBH, Dr. Nick Katsikeris at the faculty dentistry and finally Dr. Marco Caminiti, the current Head, who manages the orthognathic surgery program in the department of orthodontics and the jaw surgery programs at HRH and HBKR.

Current projects within the department are intricately linked to the research of the graduate students, as well as individual research directed by the Attendings. They include:

- The OMFS Objective Assessment of Technical Skills Examination, funded by the OMS Foundation
- Squamous cell carcinoma and oral epithelial dysplasia research
- Orthognathic surgery with clear aligner clinical outcomes assessment
- The creation of the OMFS Digital Planning laboratory
- Post orthognathic surgical predisposing future OSA (Obstructive Sleep Apnea) incidence

## Current Residents



- Temporomandibular joint surgery evaluation of disc plication, arthroscopy and PDGF (Platelet Derived Growth Factor), and extended Total Joint replacement prostheses
- Reconstructive planning of zygomatic orbital fractures
- The management of odontogenic keratocysts with 5 fluorouracil
- The effect of stem cell therapy on temporomandibular joint Inflammation
- Management strategies for MRONJ (medication-related osteonecrosis of jaw)
- Antibiotics stewardship research

Some of the more significant future endeavors that we have include increasing our resident positions to three per year. We are in the planning stages enabling a six-year MD program that we hope will begin in 2022. We have now established a new Alumni Association with research support and renewed camaraderie within the greater OMFS community. Finally, we are proudly committed to the University of Toronto and University of Addis Ababa Academic Cooperative (TAAAC), while providing much-needed services supported by the Face the Future Foundation. This yearly collaboration in Ethiopia produces educational opportunities

for the new OMFS program at AAU (Addis Ababa University) and helps them manage some overly-complex maxillofacial problems.

We would like to thank AAOMS and CAOMS for this opportunity and most of all for the support that they have placed on our programs and our learners. It is your mentorship that motivates us to do our best.

## Previous Program Directors

**Dr. Albert Antoni**  
(1952–1964)

**Dr. Peter Smylski**  
(1964–1976)

**Dr. John Symington**  
(1977–1998)

**Dr. Cameron Clokie**  
(1998–2005)

**Dr. George Sandor**  
(2005–2009)

**Dr. Cameron Clokie**  
(2009–2014)

**Dr. Howard Holmes**  
(2014–2015)

**Dr. David Lam**  
(2015–2017)

## Faculty



DRS. REINISH, BLANAS, GARBEDIAN, RITTENBERG, CAMINITI, PSUTKA, KATSIKERIS, LEE, KIENLE AND CUDDY

### PROGRAM DIRECTOR (2017 TO THE PRESENT):



**Dr. Marco Caminiti**

*DDS, MEd, Dip OMFS, FRCDC, FACD*

*Assistant Professor, Head and Program Director, Oral and Maxillofacial Surgery*

*University of Toronto  
Toronto, Ontario*

[marco.caminiti@utoronto.ca](mailto:marco.caminiti@utoronto.ca)

# CRAOMS

CANADIAN RESIDENTS ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS, A BRANCH OF THE CAOMS

The CRAOMS will introduce all trainees to the value of organized OMFS in Canada, including maintaining continual dialogue between residents and surgeons. We also have established a relationship with the Resident Organization of AAOMS (ROAAOMS) in an effort to expose Canadian trainees to opportunities in the United States, and trainees in the United States to opportunities in Canada.

FOR INFORMATION ON ACTIVITIES AND MEMBERSHIP CONTACT:

President (2021–2022)  
Dr. Emilie Archambault  
Laval University  
[craoms.executive@gmail.com](mailto:craoms.executive@gmail.com)



# McGill University

## Introduction

The residency training program in Oral and Maxillofacial Surgery at McGill University was made possible because of the long-standing relationship between the Faculty of Dentistry and the McGill University Health Centre (MUHC). The history of OMFS at the Montreal General Hospital (MGH) is rich, and dates back to the nineteenth century as one of the pioneering departments offering this kind of care.

Dr. Hugh Berwick, the first Canadian dentist appointed to a hospital staff, practised at the Montreal General Hospital in 1892. After getting his license in dental surgery, he continued his studies in medicine at McGill and graduated in 1891. In addition to being dually trained in dentistry and medicine, he is thought to be one of the first oral surgery specialists in Canada.

In 1908, the association of the MGH and the McGill Dental School led the way to the creation of clinical teaching facilities in dentistry and oral surgery. During the twentieth century, multiple great directors and dental surgeons-in-chief left their mark on the Department of Dentistry, Dr. Gordon Leahy and Dr. James McCutcheon to name only two. As the department grew, so did the facilities, moving from what was the morgue at the MGH to its own wing at one of the largest hospitals in Montreal.

The creation and initial advancement of the oral surgery program took place under the

tremendous administrative and academic leadership of Dr. Kenneth C. Bentley and Dr. Timothy W. Head.

Dr. Bentley obtained his DDS in 1958, followed by his MDCM in 1962 from McGill University. He then moved to New York to do his oral surgery residency at Bellevue Hospital. Returning to Montreal, he was named Director of the Department of Oral Surgery in 1967, where he remained until his retirement. Dr. Bentley served in many administrative roles, providing the groundwork for a successful oral surgery program at the hospital and university. In 1970, he was appointed as the Dental Surgeon-in-Chief at the Montreal General Hospital. In 1977, Dr. Bentley was appointed Dean of the Faculty of Dentistry followed by an appointment as Chair of the Council of Physicians, Dentists and Pharmacists of the Montreal General Hospital in 1988.

In 1971, Dr. Bentley officially created the Oral and Maxillofacial Surgery residency training program at the MGH. The program was under his directorship from 1971 to 1998 and he remained Dental Surgeon-in-Chief of the MGH until 2000, giving a tremendous 30 years of service.

The early academic advancement of the OMFS training can be largely attributed to the directorship of Dr. Timothy W. Head. Dr. Head graduated from McGill dentistry in 1976 and from OMFS at McGill in 1980, under the guidance of Dr. Bentley. Given Dr. Head's leadership and love for teaching, he was named program coordinator of the graduate program in OMFS in 1981. In 1998, he took over as the director of oral and maxillofacial surgery. Under his tenure, the oral surgery community gained several leading academic and clinical surgeons throughout Canada and around the world.



Strathcona Medical Building

## Current Residents



In 2008, Dr. Head stepped down as director of oral and maxillofacial surgery, allowing one of his former students, Dr. Michel El-Hakim, to take over this position until 2013. Dr. El-Hakim had continued to promote and evolve the program and under his management it was transformed from a four-year (single degree) OMFS program to a six-year (dual degree) MCDM-OMFS program. In addition to changing the academic program, Dr. El-Hakim was a pioneer in promoting the incorporation of oral oncology and complex reconstruction into the scope of practice in Canada. In 2013, Dr. El-Hakim recruited Dr. Nicholas Makhoul to take over as OMFS program director. Dr. Makhoul continued to advance the scope of practice at McGill and develop a robust clinical research program. In 2016, after being appointed as Department Chief, Dr. Makhoul recruited Dr. Geneviève Chiasson as OMFS program director. Dr. Chiasson continues to lead and expand the clinical and academic program, particularly in the scope of pediatric maxillofacial surgery, and is the first woman OMFS in Canada to hold this title.

The success of the McGill OMFS program has largely been due to the tremendous leadership of the MGH department chiefs. Following in Dr. Bentley's footsteps, Dr. Antoine Chehade served as Chief from 2000 to 2015, and laid the foundation for the advancement of the department and recruitment of world-renowned faculties.

In 2015, Dr. Nicholas Makhoul was appointed as Chief and has focused on modernization of the department and the clinical practice of dentistry and oral surgery.

The McGill OMFS program started as a three-year program with one resident per year. The strengths were dento-alveolar surgery, orthognathic surgery, trauma, pathology, and TMJ surgery. At the end of the 1980s, one year of training was added to make it a four-year program. In the late 1990s, an additional resident per year was accepted, due to the increased clinical activities and demands of the service. In 2013, the first resident for the MDCM-OMFS six-year program was accepted.

Throughout its history, the OMFS service at the MUHC has been held in high regard. The program is continually evolving and providing the highest level of training for its residents, from craniomaxillofacial trauma, pathology, oncology and reconstruction, orthognathic surgery, cleft and craniofacial surgery, pediatric maxillofacial surgery, dento-alveolar surgery, implant surgery and TMJ. We are committed to training the future leaders of our profession and are proud of the quality of clinical and scientific education provided.

In addition to education, our mission is to provide the highest quality of care to the community. Since our beginning, we have continued to progress and innovate. In 2020 we began a major

renovation of our department facilities, which will include new surgical treatment rooms as well as a dedicated space for clinical research. This new facility will continue to increase the collaboration amongst other medical and dental colleagues and afford new opportunities for our patients and trainees.

The McGill Oral and Maxillofacial Surgery program is now well-established in North America and has existed officially for nearly half a century. Although the program continues to evolve, it follows the same commitment to excellence in patient care, training and research, as well as advancement of the field of oral surgery that has made the McGill OMFS program a pioneering force in our discipline.

## Previous Program Directors

**Dr. Kenneth C. Bentley**

(1971–1998)

**Dr. Timothy W. Head**

(1998–2008)

**Dr. Michel El-Hakim**

(2008–2013)

**Dr. Nicholas Makhoul**

(2013–2016)

## PROGRAM DIRECTOR (2016 TO THE PRESENT):



**Dr. Geneviève Chiasson**

*DMD, FRCDC*

*Program Director and  
Assistant Professor, Oral and  
Maxillofacial Surgery,  
Faculty of Dentistry*

*McGill University  
Montreal, Quebec*

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[omfsprogram.dentistry@mcgill.ca](http://omfsprogram.dentistry@mcgill.ca)

# Université Laval

## An Oral and Maxillofacial Surgery Residency Program with an Accent

One cannot introduce the OMFS teaching program in Quebec City without mentioning Dr. André Charest, ice hockey and Britain. André, a very prolific and famed local junior hockey player in Quebec City, reportedly forfeited a Montreal Canadiens contract offer to pursue a career in dentistry and move on to oral surgery. Our luck and likely a wise decision!

He trained under Sir Terence G. Ward at Queen Victoria Hospital in East Grinstead and Norman L. Rowe at Westminster Hospital in Roehampton London in the early 60s. At that time, a dual degree in OMS education was a distant project on this side of the Atlantic and our specialty did not have a bold name for itself in our vicinity, nor in the medico-surgical community at large. He succeeded in making OMS a worthy specialty in spite of these apparently insurmountable handicaps, through the added value of his European surgical education, with his availability and competency to assist trauma colleagues and because of the improved results of his operative knowledge and skills. From a narrower dento-alveolar reach, he eventually gained a much wider access to major and invasive procedures, particularly in maxillofacial trauma and corrective jaw surgery of all etiologies.

Our residency program, located at l'Hôpital de l'Enfant-Jésus, a Level 1 Trauma Centre, originated out of Dr. Charest's firm belief in the necessity of combining dental, medical and surgical training. His project came to fruition in 1971 when he structured a curriculum tailored to his convictions with the help of a close colleague, Dr. Guy Maranda, and with the support of his partners in neurosciences, general surgery and internal medicine.

Affiliated with the Dental Faculty at l'Université Laval, our unique French-speaking North American fully-accredited training program is currently the alma mater of approximately 70% of all practising OMS surgeons in the Province of Quebec. Over the past 50 years, more than 80 OMS surgeons have been trained. Currently, 13 residents are hurdling their way to graduation

in the recently-inaugurated outpatient facility.

The program evolved from a standard four-year curriculum with a strong medical-surgical content to a six-year fully-integrated dual degree training with MSc that started in 2015, entirely tied to both the Medical and Dental Faculties at Laval. A one-year OMS internship was installed in 2020. Off-service rotations are also regularly provided to ENT and plastic surgery residents.

The original co-founders have long since handed over the reins to the current team of six university-appointed professors (Drs. Pierre-Éric Landry, Michel Fortin, Carl Bouchard, Annie-Claude Valcourt, Mélinda Paris and André Rousseau), assisted by four attendings (Drs. Patrick Giroux, Christine Sauvé, Mathilde Sarlabous



and Michel Giguère). All professors and staff have honed their skills and tools of the trade from various post-graduate fellowships in Canadian, European and American programs before being appointed. The variety and wide panorama of surgical expertise acquired and the exposure to alternate and innovative techniques and technologies enriched the common and local ways and means.

The staff and allied surgeons are all involved in various national and international professional organizations and other societies or governing bodies, such as the Royal College. They also participate in the activities of the Quebec Association of Oral and Maxillofacial Surgeons, namesake of our corporate identity, and are active members of the Canadian Association of Oral and Maxillofacial Surgeons.

Although the clinical focus and main operatory menu are centred on orthognathic surgery (about 400 cases per year, but not in 2020...) and trauma, residents are also exposed to oncology-reconstruction, labio-maxillo-palatine clefts and TMJ surgery, together with dento-alveolar, preprosthetic and implant procedures.

Our current domains of research and clinical investigation linked with the MSc component of the program are:

- Quality of life after total prosthetic joint replacement
- Platelets concentrate as an adjuvant for alveolar graft in cleft patient: a meta-analysis
- 3D printing in the reconstruction of orbital floor fractures

- Temporomandibular disorders in the context of orthognathic surgery
- Botox™ for the treatment of myofascial pain (a five-year review)
- Temporomandibular disorders (conservative treatment vs. arthroscopy)
- Palatal expansion in patients with cleft lip and palate
- Patient satisfaction after orthognathic surgery

Many challenges lie ahead and have been dramatically revealed or simply spotlighted by COVID out of the shadows of our negligence to see the obvious lacunes in surgical care access under duress. The shortcomings of improved and technically-enhanced teaching technologies, as well as the many loopholes of commitment to care for the socio-economically frail, also impact our pre-COVID clinical and academic habits. No doubt we will follow the advice of Winston Churchill, who fostered the right attitude and disposition: "Never let a good crisis go to waste."

Projects for a Trauma and Orthognathic fellowship will suffer delays due to the current logistic and budgetary constraints, but high hopes and expectations are soon to become reality with the upcoming completion of a new \$2 billion integrated Health Centre where OMS will have two fully-dedicated OR suites.

We are deeply indebted to l'Université Laval for supporting the hospital department and the academic aspects of our clinical activities. We also salute the outstanding devotion and passion of all the residents, professors and attendings who provide life, vigor and perpetual refinement to our program and to the specialty here and across the world.

Most of all, we are forever grateful to Dr. André Charest for promoting and realizing his vision with such foresight and tenacity. Had it not been for his outstanding talent and craftsmanship, as well as his unique charisma and dedication to patients, the face and fate of our OMS world and future in Quebec would never have been so bright, bold and booming.

## Previous Program Directors



**Dr. André Charest**  
(1971–1995)



**Dr. Pierre-Éric Landry**  
(1995–2015)



**Dr. Michel Fortin**  
(2015–2021)

**CO-PROGRAM DIRECTORS (2021 TO THE PRESENT):**



*Co-Program Directors, Oral and Maxillofacial Surgery Training Program*

**Dr. Carl Bouchard**  
DMD, MSc, FRCDC  
[carlbchrd@gmail.com](mailto:carlbchrd@gmail.com)

**Dr. Annie-Claude Valcourt,**  
DMD, MSc, FRCDC  
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*University Hospital Centre (CHU) Québec, Laval University  
Quebec City, Quebec*

# CONNECT WITH US ON SOCIAL MEDIA



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**Podcast:**  
Teeth & Titanium



# Dalhousie University

## Introduction

Dalhousie University is home to the first dual degree program leading to an MD/MSc in Oral and Maxillofacial Surgery in Canada. It was founded in 1969 by Dr. Frank W. Lovely as a three-year program and was the second school in Canada to offer this specialized training.

In 1966, Dr. Lovely received his MSc degree in oral surgery following his training in oncology, cleft surgery, trauma and orthognathic surgery at the University of Michigan under the mentorship of Dr. Jim Hayward. With the support of internationally-renowned surgeons such as Drs. R.V. Walker, Norman Rowe, H.C. Killey, Phil Boyne and Dan Waite, Dr. Lovely returned to Halifax and established the 5th Medical/Surgical Department of the Victoria General Hospital which was the first self-governing hospital Department of Oral and Maxillofacial Surgery in Canada. He immediately used his exceptional training and was a pioneer performing the first orthognathic surgery procedure in Eastern Canada. In the latter part of his professional career, he served on The Medical Research Council of Canada, the Board of Governors of Dalhousie University and as President of the University's General Alumni Association.

Dr. Lovely chose his first resident very carefully and as a result Dalhousie was fortunate to have Dr. David S. Precious excel and

develop his passion for oral surgery such that Dr. Bryan Bell acknowledged in 2015 that "David Precious arguably did more than any single individual in history to shape the modern-day version of oral and maxillofacial surgery in Canada." This statement was based on David's illustrious career in teaching, research, clinical care, administration, and volunteerism. Following fellowships with surgeons such as Norman Rowe in England and Jean Delaire in France, David quickly became regarded as an international expert in orthognathic and cleft surgery. His special skills were recognized and resulted in his being the first oral and maxillofacial surgeon in Canada to be granted hospital privileges for primary cleft surgery. David shared his surgical abilities with children in need as the leader and primary surgeon in over 30 Charity Cleft missions to Vietnam, Tunisia, India and Brazil. The Dalhousie program benefitted from his service of many years as OMF Surgery Graduate Program Director, Chair of the university department, Head of the hospital department and Dean of the Faculty of Dentistry.

Since its inception this program has graduated more than 46 oral and maxillofacial surgeons, and has grown to a faculty of five active teaching staff surgeons. To ensure a large breadth of training, all faculty surgeons have benefitted by participation in surgical fellowships around the world that have brought back

techniques and experiences from places such as Nantes, France, Melbourne, Australia, San Francisco and Portland, USA, Montpellier, France, and Glasgow, Scotland. The mentors and close friends created from these experiences include Drs. Norman Rowe, Tony Markus Jean Delaire, Bruce Epker, Tony Pogrel, Bruce Levant, Andrew Heggie, Brian Schmidt, Bryan Bell, Bryce Potter, Eric Dierks, Jean-Christian Talmant, Michèle Bigorre, Guillaume Captier, Ian Holland and Mark Devlin. These names are all mentioned to indicate their international contribution to the diversity of training received by the residents in the Dalhousie University program.

The graduate training program has regular access to OR and clinical facilities at the Queen Elizabeth II Health Sciences Centre, IWK-Grace Health Care Centre, and Dalhousie University. Extensive training is provided in surgical correction of dentofacial deformities, obstructive sleep apnea, cleft lip and palate, maxillofacial pathology and reconstruction, maxillofacial trauma, dental implants and other surgery as it pertains to our specialty. Over the past three years the program has averaged 300 orthognathic, 30 cleft lip/palate, 100 trauma and 90 temporomandibular joint surgeries. This volume of work provides a broad range of experiences for the surgery intern, resident in training and surgical fellow who are accepted into the program each year. The fellowship program has enrolled more than 24

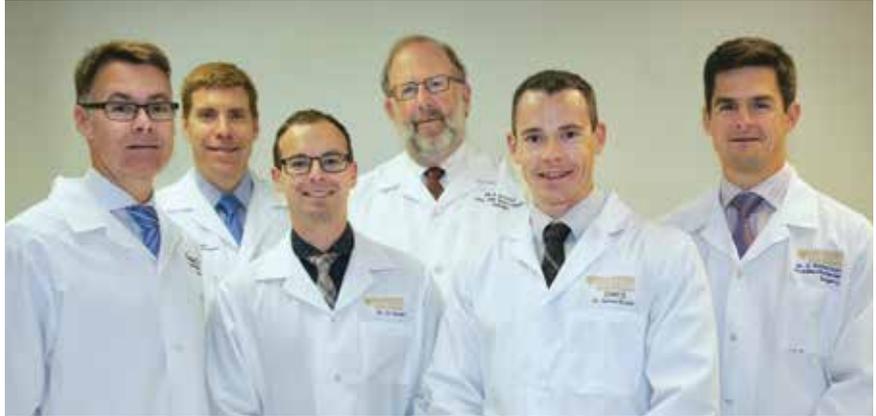
surgeons with diverse backgrounds from around the world since its inception. These fellows have come from India, Morocco, Kuwait, Brazil, France, Britain, Australia, Turkey, and the United States. This very broad background of visiting surgeons creates a special learning environment that benefits the residents in training and staff surgeons alike.

The Dalhousie Faculty has a strong history of supporting the Royal College of Dentists of Canada, with all surgeons holding positions as RCDC examiners. In addition, two faculty members have been the Examiner in Chief of the RCDC, and four staff have been the Chief Examiner of the Specialty of Oral & Maxillofacial Surgery.

The Department also provides leadership to the Canadian Association of Oral and Maxillofacial Surgeons, with six of the faculty having been line officers and Presidents of this organization. Members continue to provide scientific presentations on a regular basis to the attendees of the annual meetings of the CAOMS and AAOMS.

Research has been a strength of this department. In the past three years Dr. Reg Goodday has twice been awarded the Daniel M. Laskin Award for the most outstanding paper published in the *Journal of Oral and Maxillofacial Surgery*. Dr. Jean-Charles Doucet was awarded the 2020 Samuel Berkowitz Long-Term Outcomes Study Award for his article on "Facial Growth of Patients with Complete Unilateral Cleft Lip and Palate Treated with Bone Grafting at 6 Years" published in the May 2019 issue of the *Cleft Palate-Craniofacial Journal*.

## Faculty



DRS. DAVIS, GREGOIRE, DOUCET, GOODDAY, BRADY AND ROBERTSON

Faculty are reviewers for multiple journals, including the *Journal of Oral and Maxillofacial Surgery*, the *Cleft Palate-Craniofacial Journal*, and *Oral Surgery Oral Medicine Oral Pathology Oral Radiology (OJID)*. One faculty member is the section editor of the oral and maxillofacial surgery section of the *Cleft Palate-Craniofacial Journal*. Staff surgeons are also on the AO Faculty and present lectures on a regular basis.

The training program will be moving to a new state-of-the-art facility in the near future. This will be an exciting transition and will provide the infrastructure necessary to continue to provide the highest level of resident training, research and patient care.

## Previous Program Directors

**Dr. Frank Lovely**  
(1969–1981)

**Dr. David Precious**  
(1981–2001)

**Dr. Archie Morrison**  
(2001–2008)

**Dr. Chad Robertson**  
(2008–2014)

### PROGRAM DIRECTOR (2014 TO THE PRESENT):



**Dr. Curtis Gregoire**

DDS, MD, MSc, FRCDC

Program Director, Department of  
Oral & Maxillofacial Sciences,  
Faculty of Graduate Studies

Dalhousie University  
Halifax, Nova Scotia

[cgregoir@dal.ca](mailto:cgregoir@dal.ca)

# MARK YOUR CALENDAR



## 17<sup>TH</sup> CAOMS SKI & LEARN MEETING

Saturday, January 29 - Thursday, February 3, 2022  
Fairmont Chateau Whistler, Whistler, British Columbia



## 67<sup>TH</sup> CAOMS ANNUAL CONFERENCE

Sunday, July 17 - Thursday, July 21, 2022  
Parliament Hotel & Harpa Conference Centre  
Reykjavik, Iceland



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