

Oral and Maxillofacial Surgeon interview questions

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What to expect

Oral and maxillofacial surgeon interviews in Australia assess a combination of clinical expertise, technical judgement, and communication skills. You will likely meet a panel that includes surgeons, a senior nurse, and sometimes a hospital administrator.

- **Technical:** Questions on surgical planning, trauma management, and complex extractions to test your clinical reasoning.
- **Behavioural:** Questions about past teamwork, handling pressure, and patient interactions, using the STAR method.
- **Scenario:** Hypothetical clinical situations, such as a patient with a fractured mandible or post-operative bleeding, to assess your judgement under pressure.
- **Safety and governance:** Your knowledge of anaesthesia safety, infection control, and AHPRA standards.
- **Patient-facing and ethical:** How you obtain consent, discuss risks, and handle complaints or difficult conversations.

The process usually starts with a phone screen by HR or a practice manager. A panel interview with the surgical team follows, often including a case discussion or presentation. Some employers ask for a simulation or practical assessment. Final stages may involve meeting the head of department and discussing credentialing and hospital privileges.

1. Walk me through your approach to planning a complex orthognathic surgery case.

Why they ask

This tests your technical process and ability to integrate imaging, patient goals, and team input.

How to structure your answer

Use a step-by-step walk-through: assessment, imaging, planning, collaboration, execution, and follow-up.

Example answer

"I start with a comprehensive clinical assessment, including facial analysis and dental models. I then order CT imaging and use 3D surgical planning software to simulate the jaw movements. I discuss the plan with the orthodontist and the patient, ensuring we align on functional and aesthetic goals. Before surgery, I review the plan with the surgical team and prepare for any contingencies. Post-operatively, I monitor healing and coordinate with the orthodontist for ongoing care."

2. Tell me about a time you had to manage a difficult facial trauma case under pressure.

Why they ask

They want to see how you prioritise, communicate, and stay calm in an emergency.

How to structure your answer

Use STAR: Situation, Task, Action, Result.

Example answer

"During a night shift, a young patient was brought in with a severe mandibular fracture and airway compromise after a motor vehicle accident. I was the on-call registrar. My task was to secure the

airway and stabilise the fracture. I quickly assessed the airway, called for anaesthetic support, and performed an emergency tracheostomy. I then coordinated with the trauma team to plan definitive fixation. The patient recovered well and was discharged after five days. I learned the importance of clear communication and rapid decision-making under pressure."

3. A patient presents with a mandibular fracture and airway compromise. How would you manage this?

Why they ask

This scenario tests your clinical judgement and ability to act under pressure.

How to structure your answer

Use a judgement-under-pressure structure: immediate assessment, prioritisation, action, and reassessment.

Example answer

"First, I would assess the airway using a structured approach. If the airway is compromised, I would call for anaesthetic and surgical backup immediately. I would consider awake fiberoptic intubation or emergency cricothyroidotomy if needed. Once the airway is secure, I would assess the fracture and plan for fixation. I would also check for other injuries and involve the trauma team. Throughout, I would keep the patient and family informed and document everything clearly."

4. How do you ensure safe administration of anaesthesia in your practice?

Why they ask

Safety is paramount; they want to know you follow protocols and monitor patients closely.

How to structure your answer

Use a process/checklist structure: pre-operative assessment, equipment checks, monitoring, and post-operative care.

Example answer

"Before any procedure, I review the patient's medical history and allergies, and I confirm fasting status. I check the anaesthetic machine and monitoring equipment. During surgery, I work with the anaesthetist to monitor vital signs and adjust sedation as needed. I follow the ANZCA guidelines for sedation and always have reversal agents available. Post-operatively, I ensure the patient is stable before transfer to recovery, and I document the anaesthetic details in the electronic medical record."

5. How do you discuss the risks of corrective jaw surgery with a patient and their family?

Why they ask

This assesses your empathy, communication skills, and ability to obtain informed consent.

How to structure your answer

Use an empathy-led structure: understand concerns, explain clearly, check understanding, and agree on a plan.

Example answer

"I start by asking the patient what they already know and what worries them most. I explain the procedure in plain language, covering the benefits and the risks, such as bleeding, infection, nerve damage, and the possibility of further surgery. I use diagrams and models to help them visualise. I encourage questions and check that they understand. I then discuss alternatives and give them time to decide. I document the consent discussion thoroughly."

6. Give an example of how you have collaborated with an orthodontist or plastic surgeon to achieve a successful outcome.

Why they ask

They want evidence of teamwork and multidisciplinary care.

How to structure your answer

Use STAR.

Example answer

"I worked with an orthodontist on a combined orthognathic case for a patient with a severe class III malocclusion. We held joint clinics to plan the treatment, sharing 3D imaging and models. I performed the jaw surgery, and the orthodontist managed the pre- and post-surgical orthodontics. The patient achieved a stable bite and improved facial aesthetics. The collaboration meant we could align our goals and deliver a seamless experience. I now routinely use joint planning sessions for complex cases."