



# Pediatric Dentistry


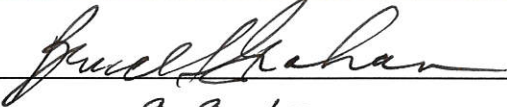

Self Study

Appendix A – W

**Accreditation**

**Site Visit: November 12-14, 2013**

## Evaluation of Advanced Specialty Education Pediatric Dentistry

<b>Sponsoring Organization:</b>	University of Illinois at Chicago
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<b>Date:</b>	9.9.13
<b>Program Director:</b>	Marcio da Fonseca
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<b>Signature:</b>	
<b>Date:</b>	09/04/13

I have seen and reviewed the completed Self-Study Guide (and required appendix information) that will be used in an upcoming site visit to this institution.

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### General Information

- A. What is the length of the program? 24 months
- B. How many full-time students/residents are enrolled in the program per year? Y2 (6)  
Y1 (9)
- C. How many part-time students/residents are enrolled in the program per year? 0
- D. What is the program's CODA-authorized base number enrollment? 18
- E. The program offers a:
- |  |             |             |      |
|--|-------------|-------------|------|
|  | Certificate | Degree      | Both |
|  | X           | MS optional |      |
- F. Is instruction in the biomedical sciences provided through the following?
- Courses Yes
  - Seminars Yes
  - Reading assignments Yes
  - Conferences Yes
  - Hospital rounds Yes
  - Laboratory assignments Yes
- G. What other programs does the organization sponsor? Indicate whether each program is accredited. Indicate which programs are accredited by the Commission on Dental Accreditation.
- |                                |                   |
|--------------------------------|-------------------|
| Endodontics                    | Accredited - CODA |
| Oral and Maxillofacial Surgery | Accredited - CODA |
| Orthodontics                   | Accredited - CODA |
| Periodontics                   | Accredited - CODA |
| Prosthodontics                 | Accredited - CODA |
| Dental Education               | Accredited - CODA |
- H. If the program is affiliated with other institutions, provide the full names, the purposes of the affiliation and the amount of time each student/resident is assigned to the affiliated institutions.  
Not applicable
- I. What outcomes measures are used to evaluate the program?
1. Program completion rates
  2. MS completion rates
  3. Quality Assurance data
  4. ABPD Board Certifications
  5. Patient satisfaction data
  6. Faculty and Administrative reviews
  7. Departmental and College exit reviews
  8. Alumni surveys
  9. Resident evaluations of faculty
  10. Research Presentations
  11. Publications

12. Pre-doctoral Dental Student teaching – evaluations by faculty, including Dr. Salzman
13. Community service/health fair participation

For the clinical phases of the program, document the amount of time (FTE/PTE) that faculty members are assigned to the advanced education program in each of the following categories:

	Total Number	Board Certified	Educationally Qualified*	Other**
Full-time	6	4	1	1
Half-time	0			
Less than half-time	12	8	4	

\* Individual is eligible but has not applied to the relevant Board for certification.

\*\*Individual is neither a Diplomate nor Candidate for board certification by the relevant certifying Board.

The cumulative full-time equivalent (F.T.E.) for all faculty specifically assigned to this advanced education program.

Cumulative F.T.E.: 6.7

### Previous Site Visit Recommendations

Using the program’s previous site visit report, please demonstrate that the recommendations included in the report have been remedied.

The suggested format for demonstrating compliance is to state the recommendation and then provide a narrative response and/or reference documentation within the remainder of this self-study document.

\* Please note if the last site visit was conducted prior to the implementation of the revised Accreditation Standards for Advanced Specialty Education Programs (January 1, 2000), some recommendations may no longer apply. Should further guidance be required, please contact Commission on Dental Accreditation staff.

There were no recommendations in the 2006 site visit report.

## Compliance with Commission Policies

**Identify all changes which have occurred within the program since the program's previous site visit, in accordance with the Commission's policy on Reporting Program Changes in Accredited Programs.**

At the February 1, 2013 CODA meeting, the Commission approved a permanent increase in enrollment from six residents per year to nine residents per year, for a total of eighteen (18) student/residents in the two-year Advanced Pediatric Dentistry program at the University of Illinois at Chicago's College of Dentistry.

Effective July 16, 2013, Dr. Indru Punwani was replaced by Dr. Marcio da Fonseca as the Department Head and Program Director (PD). Notification of these changes was sent to and acknowledged by the CODA.

Renovation of the post-doctoral clinic was recently completed. There are twenty (20) dental operatories, one (1) recovery room, and one (1) radiology room equipped with a pan-ceph machine. There are eight (8) private rooms, which can be used for sedation procedures, and twelve (12) open bay chairs. All the operatories have nitrous oxide delivery systems, digital intraoral x-ray units and video monitors for the patients to watch movies during treatment. One (1) operatory is designated as a general anesthesia (GA) room. A new Resident Room was built with twenty-two (22) working stations, each equipped with a computer and storage area. The room was also has two (2) phone lines, a printer, and a small kitchenette. A faculty center was also created for offices and conference facilitation.

The rotation to the McCormick Boys and Girls Club of Chicago was discontinued in 2007. Since the rotation was a minor one (<5% of time), this change was not and did not need to be reported to CODA.

**Provide documentation and/or indicate what evidence will be available during the site visit to demonstrate compliance with the Commission's policy on "Third Party Comments."**

Third party comments were solicited from students and patients through posting of notices in the College entrances and in all clinics on August 13, 2013 90 days prior to the site visit. Additionally all students were sent electronic notices. Notices clearly stated that comments were due 60 days prior to the site visit.

**Provide documentation and/or indicate what evidence will be available during the site visit to demonstrate compliance with the Commission's policy on "Complaints."**

Students were notified of the opportunity to file complaints with the Commission. The PD is responsible for keeping a record of complaints; however, none have been received. Copies of e-mail messages will be available on site.

**Provide documentation and/or indicate what evidence will be available during the site visit to demonstrate compliance with the Commission's policy on "Distance Education."**

Not Applicable

## PROGRAM EFFECTIVENESS

### **Program Performance with Respect to Student Achievement:**

Provide a detailed analysis explaining how the program uses student achievement measures, such as national assessment scores, results of licensure or certification examinations and/or employment rates to assess the program's overall performance. In your analysis, provide examples of program changes made based on student achievement data collected and analyzed.

The program instituted a policy requiring the residents to take the comprehensive qualifying examination (part I) of the American Board of Pediatric Dentistry (ABPD) during the second year of the program. Together with the mandatory American Academy of Pediatric Dentistry (AAPD) in-service examination, which is taken as residents enter and exit the program, analyses of the scores and passing rates have helped the PD and faculty to evaluate the program performance and make adjustments to didactic and clinical experiences as needed.

Other measures used by the PD, Associate PD and faculty to evaluate program performance to make necessary changes include resident exit interviews, resident evaluations by faculty, and alumni surveys.

For instance, when scores were low in the pharmacologic behavior management domain, a decision was made to send residents to the AAPD sedation course to enhance their education in the area. Evaluation of residents' performance while developing, conducting and completing their research project has also helped to determine the depth of exposure they needed to research methodology and statistical analysis in order to better equip them to complete their projects. Residents indicated that they had a small number of orthodontic cases and that their experience in this area was limited. The Department sent out requests to community clinics to increase number of cases, all current cases were assigned two faculty for supervision and all cases had to be presented in rounds before treatment was initiated. A much lower fee-schedule was also implemented so that cases that had financial need could be treated at discounted rates. This has allowed for an increased number of cases being evaluated and treated in the clinic. Other methods are currently investigated to further increase number of patients.

### **Documentary evidence:**

Appendix B  
Appendix D

On-site  
In-service exam scores  
Alumni Surveys  
Fee schedules  
Orthodontic protocol



## STANDARD 1 – Institutional Commitment/Program Effectiveness

**Has the program developed clearly stated goals and objectives appropriate to advanced specialty education, addressing education, patient care, research and service? (1)**

**YES**

The Department of Pediatric Dentistry first developed its goals and objectives appropriate to the advanced specialty education program in pediatric dentistry in 1997. They include education, patient care, cultural competence, service and research. The Department has been continuously updating those goals and objectives as the specialty and population needs evolve.

The program goals and objectives are included in the introductory information sent to all applicants. They are also publicized through UIC and AAPD web sites, and the program brochure.

### **Documentary Evidence:**

Appendix A-1: UIC College of Dentistry Vision and Mission Statements

Appendix A-2: Educational Mission and Program Goals and Objectives

**Is planning for, evaluation of and improvement of educational quality for the program broad-based, systematic, continuous and designed to promote achievement of program goals related to education, patient care, research and service? (1)**

**YES**

The Department Head/PD and Associate PD meet on a regular basis to address routine program issues related to education, patient care, research, and community service, and to review results of the outcomes assessment measures. Feedback from departmental faculty meetings is taken into consideration. Modifications and changes are discussed and made where necessary to the curriculum for enhancement of the program.

The PD and APD meet with the residents collectively on special issues. They meet with each resident every semester to discuss their progress and any issues/concerns they want to bring up for discussion. The Chief Resident also plays a central role in providing resident feedback on the program. He/she meets with the PD/ Associate PD as need arises and communicates changes and updates to the residents.

### **Documentary Evidence:**

On Site

Faculty meeting minutes.

<b>Does the program document its effectiveness using a formal and ongoing outcomes assessment process to include measures of advanced education student/resident achievement? (1)</b>	<b>YES</b>
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- (a) develop clear, measurable goals and objectives consistent with the program's purpose/mission;

Goal 1: To produce graduates with knowledge, skills, critical judgment and competence to practice and teach the specialty of Pediatric Dentistry. The objective was met. (Data available on site)

Objective 1.a: 100% of the graduates will engage in Specialty of Pediatric Dentistry. The objective was met. (Data Available on site)

Objective 1.b: 25% of the graduates will engage in teaching Pediatric Dentistry. The objective was met. (Data Available on site)

Objective 1.c: 50% of the Graduates will be board eligible or will complete the American Board of Pediatric Dentistry in 5 years following graduation. The objective was met. (Data available on site)

Objectives: 1.d: 100% of the graduates planning to practice in Illinois will complete Illinois Specialty Boards in Pediatric Dentistry. The objective was met. (Data available on site)

Objective 1e: 90% of the graduates will rate the overall program as good to excellent. The objective was met. (Data available on site)

Objective 1f: Students will demonstrate proficiency during the training program. Objective met. (Data available on site)

Goal 2. To select and admit highly qualified students with diverse back grounds including a certain percentage from the under representative minority groups:

Objective 2a.: The qualifications of the students will exceed the admission standards of the College of Dentistry Advanced Education Programs and the Graduate College.

Objective 2b: On the average, 20 or more matriculated candidates are from underrepresented minority groups. (The objectives have been met. Data available on site) Source: Application and Admission data.

Goal 3: To foster in the graduates an appreciation for continuous learning, scholarship, service to the profession and community and ability to conduct Research in areas related to Pediatric Dentistry.

Objective 3a: 100% of Students will make presentations at the AAPD meeting.  
Objective met. (Data available on site)

Objective 3b: 80% of the Graduate student research will b4e presented at one or core national meetings within 5 years of graduation. Objective met. (Data available on site)

Objective 3c: 90% of the graduates will become members of AAPD. Objective met. (Data available on site)

(b) develop procedures for evaluating the extent to which the goals and objectives are met;

Alumni data was collected from various sources including Membership Directory of the American Academy of \_Pediatric Dentistry, American Board of Pediatric Dentistry web site, Illinois Department of Financial and Professional Regulations, departmental data, personal communications and an anonymous Alumni Survey.

(c) collect and maintain data in an ongoing and systematic manner;

The data collected from the above sources was tabulated (data available on site)

(d) analyze the data collected and share the results with appropriate audiences;

The tabulated data was shared with the faculty at regular meetings (departmental meeting minutes)

(e) identify and implement corrective actions to strengthen the program; and

Corrective action was put into place related to 1. Increasing Orthodontic experiences. The revised plan was implemented

(f) review the assessment plan, revise as appropriate, and continue the cyclical process.

The plan will continue to be monitored and will be modified if and when necessary based upon outcome measures.

The effectiveness of the program to prepare competent pediatric dentists for practice, teaching and professional service is documented on a continuous manner using several formal outcomes measurements such as:

- Didactic course grades and faculty evaluations from seminars
- Research completion, presentation at meetings and publications
- Clinic and Course Evaluations
- AAPD In-service Examination scores and ABPD passing/completion rates
- Annual resident evaluation of faculty
- Bi-annual faculty evaluation of residents
- Exit interviews of graduating residents
- Alumni survey
- Quality assurance data
- Patient satisfaction surveys
- Participation in community health fairs and professional activities outside the College

The data obtained from these measures is analyzed regularly by the PD and Associate PD to evaluate if the goals and objective of the program are being met. The results are shared with faculty, residents and staff who are given the opportunity to contribute their opinions to implement changes to correct deficiencies. In such cases, these changes are re-visited a few weeks or months later to see if they are indeed correcting the situation.

**Documentary Evidence:**

On Site  
Department Meeting minutes.  
Alumni survey,  
Quality assurance data  
Patient satisfaction surveys  
Clinic and Course Evaluations

**Are the financial resources sufficient to support the program's stated goals and objectives? (1) YES**

Institutional support for the Post-doctoral Pediatric Dentistry Program including basic space, staffing, equipment, and supplies is excellent. The University of Illinois Hospital & Health Sciences System ("UIHHSS") provides financial support through Graduate Medical Education (GME) stipends for residents as well as some equipment. This support helps attract competitive applicants.

The College of Dentistry's support has provided the program with the ability to maintain its current level of faculty and staff support. The current faculty and staff include eighteen full- and part-time faculty 6.7 FTE and three full-time receptionists; 1.5 FTE clerical staff and ten (10) Dental Assistants. Purchase and maintenance of equipment, supplies, reference materials, and teaching aids are also adequate. Full or partial support for travel of students to local and national meetings and payment for the board preparation and sedation courses are provided by the Department. A new Department Head/PD and another full-time faculty were recruited in July 2013.

The Program Director oversees the finances of the program and ensures that the annual budget appropriation is adequate to place the program in a competitive position in regard to innovations and changes necessary to reflect the highest standards of patient care, education, and research to meet the program goals and objectives. Those decisions are made together with the Department Head.

**Documentary Evidence:**

On Site  
Departmental Budget  
Faculty list  
Staff List

**Does the sponsoring institution ensure that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program? (1) YES**

In accordance with the College Policy on Conflict of Interest, support from entities outside of the institution does not compromise the academic mission of the program and is subject to annual review.

**Documentary Evidence:**

On Site  
College Policy on Conflict of Interest

<b>Is the advanced specialty education program sponsored by an institution, which is properly chartered, and licensed to operate and offer instruction leading to degrees, diplomas or certificates with recognized education validity? (1)</b>	<b>YES</b>
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The UIC is a fully accredited institution, accredited by the Higher Learning Commission of the North Central Association.

The UIC College of Dentistry sponsors the Pediatric Dentistry Program. The State of Illinois charters the University and all its Colleges and Schools. All specialty programs within the College of Dentistry are accredited by the Commission on Dental Accreditation.

**Documentary Evidence:**

On Site  
University of Illinois at Chicago accreditation documentation

<b>If a hospital is the sponsor, is the hospital accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS)? (1)</b>	<b>NA</b>
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<b>If an educational institution is the sponsor, is the educational institution accredited by an agency recognized by the United States Department of Education? (1)</b>	<b>YES</b>
--	------------

The program is sponsored by the College of Dentistry which is a part of the University of Illinois at Chicago. The University received its original accreditation in 1970 and its status was last confirmed by the Higher Learning Commission on October 23, 2007. The status is confirmed upon the University until its next review, which is scheduled in 2017.

The University of Illinois at Chicago is accredited by:  
The Higher Learning Commission  
30 North LaSalle Street, Suite 2400  
Chicago, IL 60602

**Documentary Evidence:**

On-site  
University of Illinois at Chicago accreditation documentation

**If applicable, do the bylaws, rules and regulations of hospitals that sponsor or provide a substantial portion of advanced specialty education programs, ensure that dentists are eligible for medical staff membership and privileges including the right to vote, hold office, serve on medical staff committees and admit, manage and discharge patients? (1)**

NA

Dentistry is a recognized Service of the UIHHSS. The Chief of Dental Service serves on the Executive Committee of the Hospital, and the dental faculty have the same privileges as physicians to serve on all committees and to admit, manage, and discharge patients.

**Documentary Evidence:**

On Site  
Hospital Bylaws

**Does the authority and final responsibility for the curriculum development and approval, student/resident selection, faculty selection and administrative matters rest within the institution? (1)**

YES

Curriculum and course development are initiated by the Department and required courses for the MS degree need approval by the Graduate Dental Education Committee of the College.

Resident selection is conducted and approved by the Admissions Committee within the Department. All residents accepted by the Department are reviewed and approved for admission by the Executive Associate Dean for Academic Affairs.

Faculty selection is done by a search committee most frequently made up of faculty from both inside and out of the Department. The search process is clearly defined by and enforced by the University's Office of Access and Equity and the Office of University Human Resources. The decision on the chosen candidate is approved by the Department Head and the Dean.

The PD has administrative authority over program matters. Major changes to the program are done in consultation with the Department Head and the College administration and are in compliance with CODA notification requirements.

**Documentary Evidence:**

On Site  
Department Bylaws  
HR Policy on hiring  
Faculty Bylaws

**Does the institution/program have a formal system of quality assurance for programs that provide patient care? (1)**

**YES**

The Clinic Director, Dr. Sahar Alrayyes, carries out an ongoing and systematic chart audit of all patient care provided by the residents. This data is reviewed by the PD, and discussed at department faculty meetings. Appropriate interventions are put into place, if necessary.

The Associate Dean for Patient Care also provides quality assurance data related to Chart Audit Completions and other related issues. This information is communicated to the clinical staff, faculty, and residents on a regular basis. Specific issues are discussed with the individual residents and faculty, as appropriate.

Hospital-related patient care quality reviews are completed on a regular basis by the Associate PD, Dr. Rodney Vergotine. This data is presented to the Chief of Dental Service, Dr. Miloro, who presents it to the Credentials Committee of the Hospital and serves as the basis of hospital reappointment of faculty.

**Documentary Evidence:**

On Site  
Chart audits  
Hospital quality reviews

**Is the position of the program in the administrative structure consistent with that of other parallel programs within the institution and does the program director have the authority, responsibility and privileges necessary to manage the program? (1)**

**YES**

The PD has the authority, responsibility and privileges required to administer and manage the program. This position is consistent with those of other advanced specialty education PDs within the College of Dentistry.

**Documentary Evidence:**

Appendix C: Organization Chart for UIC College of Dentistry

**Affiliations**

Not Applicable



## STANDARD 2 - Program Director and Teaching Staff

<b>Is the program administered by one director who is board certified in the respective specialty of the program, or if appointed after January 1, 1997, has previously served as a program director? (2)</b>	<b>YES</b>
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The current and immediate past Program Directors are board certified.

**Documentary Evidence:**

Appendix G: Exhibit 2

On Site

Dr. Marcio da Fonseca's degree and board certification documentation

Dr. Indru Punwani's degree and board certification documentation

<b>Is the program director appointed to the sponsoring institution and have does the director have sufficient authority and time to achieve the educational goals of the program and assess the program's effectiveness in meeting its goals? (2)</b>	<b>YES</b>
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As noted in the University structure, the Program Director has sufficient authority and time (100%) to fulfill administrative program assessment and teaching responsibilities in order to achieve the educational goals of the program. Until July 15, 2013, Dr. Punwani, Professor of Pediatric Dentistry in the University of Illinois at Chicago College of Dentistry served as Department Head and PD.

Effective July 16, 2013, Dr. da Fonseca was appointed Department Head of Pediatric Dentistry, Director of Oral Health for Special Needs Children, and Associate Professor with indefinite tenure.

**Documentary Evidence:**

Appendix I: Program Directors' Curriculum Vitae (Dr. Punwani and Dr. da Fonseca);

<b>Is documentation of all program activities ensured by the program director and available for review? (2)</b>	<b>YES</b>
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All program activities such as lectures, continuing education courses, outreach efforts, resident evaluations, publications, college and university updates and also including Quality Assurance data, are presented and discussed at each departmental faculty meeting and minutes are recorded.

All annual CODA reports are completed and made available to faculty for review.

**Documentary Evidence:**

On Site

CODA reports

Faculty meeting minutes

QA data

**Is the program director evaluated annually? (2-1)**

**YES**

The PD is evaluated annually by residents for teaching and leadership effectiveness. He is also evaluated by the Associate Dean for Academic Affairs who conducts the exit interviews of the residents. Since the PD is also the Department Head he is also reviewed by the Dean.

**Documentary Evidence:**

On Site  
Program Director Evaluation

**Administrative Responsibilities: Does the program director have sufficient authority and time to fulfill administrative program assessment and teaching responsibilities in order to achieve the educational goals of the program including: (2-2)**

**YES**

The PD has sufficient authority and time to fulfill administrative program assessment and teaching responsibilities. Among other activities, he meets regularly with his leadership team to discuss didactic and clinical operational issues and updates, presents program reports in faculty meetings, reviews progress with each resident every 6 months, meets with residents extemporaneously when issues or concerns arise, and represents the Program at meetings such as Graduate Medical Education Committee, Graduate Dental Education Committee, and Clinical Affairs Committee. The PD also supervise general anesthetic cases once a month in the hospital operating room. Breakdown of PD activities is presented in Appendix E

**Documentary Evidence:**

Appendix G

**Student/resident selection, unless the program is sponsored by federal services utilizing a centralized student/resident selection process? (2-2.1)**

**YES**

The PD heads the Department's Resident Admissions Committee. In this capacity, he and the Admissions Committee screen residency applications, determine how personal interviews will be conducted, interview candidates, and make the final ranking list for the Match. (2-2.1)

**Documentary Evidence:**

On Site  
Candidate evaluation forms and interview notes

<b>Curriculum development and implementation? (2-2.2)</b>	<b>YES</b>
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The PD and Associate PD evaluate the curriculum regularly to insure compliance with CODA standards and alignment with the AAPD guidelines. They also meet regularly to discuss the need for program content updates and how to best implement them, based on consultation with faculty and resident. (2-2.2)

**Documentary Evidence:**

On Site  
Resident feedback during semester meetings  
Minutes of Departmental meetings  
Resident Exit Interviews and Alumni Surveys

<b>Ongoing evaluation of program goals, objectives and content and outcomes assessment? (2-2.3)</b>	<b>YES</b>
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The PD and Associate PD review course contents regularly insuring compliance with CODA standards and program goals and objectives. The Program Director and Associate Program Director are also responsible for an ongoing evaluation of program goals, objectives and contents, outcome assessment and improvement, evaluation of residents' progress, and graduate student research activities. (2-2.3)  
The Chief resident is included in discussions as the need arise.

**Documentary Evidence:**

Appendix V: Resident Evaluations  
On Site  
Resident Grades  
National In-service examination results  
Resident Exit Interviews  
Refer to: Standard 1

<b>Annual evaluations of faculty performance by the program director or department chair; including a discussion of the evaluation with each faculty member? (2-2.4)</b>	<b>YES</b>
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The Department Head meets with each faculty member annually to discuss their annual evaluations and their academic plans for the coming year. The faculty members provide an updated CV and a completed self-assessment form. The review includes a discussion of the resident clinic/seminar teaching evaluations and the faculty member's contributions in research and service and progress towards tenure, if they are on Tenure track. The College has a specific policy on annual review.

**Documentary Evidence:**

Appendix I: Faculty BioSketches  
Appendix K2: Resident and Faculty Evaluation Forms  
  
On-site:  
Department Head Evaluations  
College policy on annual review

<b>Evaluation of student/resident performance? (2-2.5)</b>	<b>YES</b>
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The PD and/or Associate PD are responsible for the evaluation of residents' performances. Written evaluation of residents' clinical and didactic performances are prepared with input from all faculty members on a semester basis. The PD and/or Associate PD meet with each resident to discuss the reviews. If there are any major concerns, a remediation plan is discussed with the faculty and related to the resident. The plan is reviewed after a few weeks or months to determine its effectiveness. The resident receives a hard copy of the evaluation in the end of the meeting for his/her own records. (2-2.5)

**Documentary Evidence:**

On-site  
Resident Evaluations and follow-up meeting if indicated.

<b>Participation with institutional leadership in planning for and operation of facilities used in the educational program? (2-2.6)</b>	<b>YES</b>
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The PD, Associate PD and Department Head participate in all the planning for facilities operations (clinic, laboratories, research, etc.) used in conjunction with the program. Plant/equipment failures are immediately tracked and communicated to the appropriate personnel in the Office of the Associate Dean for Clinical Affairs, which is responsible for this function. The PD/DH meet monthly with the dean, also attend the clinic Department Chair meetings and attend the faculty meetings. (2-2.6)

**Documentary Evidence:**

On Site  
Tracking documents in the Office of the Associate Dean for Patient Services  
Purchasing requisitions

<b>Evaluation of student's/resident's training and supervision in affiliated institutions? (2-2.7)</b>	<b>NA</b>
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Not Applicable

<b>Maintenance of records related to the educational program, including written instructional objectives, course outlines and student/resident clinical logs (RCLs) for specified procedures? (2-2.8)</b>	<b>YES</b>
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The Program Director and Associate Program Director are responsible for collecting and maintaining records of departmental course grades, resident evaluations, AAPD in-service examination results, exit interviews and surveys, and alumni surveys. (2-2.8) Residents are also monitored via GME in the hospital to assess progress and matriculation from the program.

**Documentary Evidence:**

Appendix V: Resident Evaluation Form  
Refer to: Standard 1  
Refer to: Standard 4

<b>Responsibility for overall continuity and quality of patient care? (2-2.9)</b>	<b>YES</b>
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The PD, Associate PD and Clinic Director are responsible for the overall continuity and quality of patient care. The Department has a continuous quality improvement (CQI) program, which includes an on-going review of all patient care records. All patient records of all residents are reviewed on a periodic basis and appropriate interventions are implemented. Comprehensive patient satisfaction surveys are carried out by the Office of Associate Dean for clinic Affairs. The PD and Clinic Director are involved in the record review process and the interventions. Hospital-related patient care outcomes CQI activity data is presented regularly to the hospital Medical Staff Review Committee. (2-2.9)

**Documentary Evidence:**

On Site  
Quality assurance data  
Patient satisfaction survey results

<b>Oversight responsibility for student/resident research? (2-2.10)</b>	<b>YES</b>
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The PD and other faculty members in and outside of the Department participate as either the major research advisor and/or as research committee members for all residents in the program. The residents are provided the option of completing the research requirements for the certificate program or being concurrently enrolled in the MS program in the Oral Sciences, or a Masters in Public Health program, which requires the completion and successful defense of a thesis. The Department research committee members (chaired by the PD, and including the Associate PD) routinely meet with residents to monitor their research progress. The Director of Resident Research meets with the residents to provide review and support on a regular basis. (2-2.10)

**Documentary Evidence:**

On Site  
Research protocols of residents  
Copies of residents' theses and certificate projects

<b>Responsibility for determining the roles and responsibilities of associate program director(s) and their regular evaluation? (2-2.11)</b>	<b>YES</b>
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The PD is responsible for determining the roles and responsibilities of the Associate PD, and for his annual evaluation. The Associate PD is responsible for coordinating the hospital rotations, following up on feedback from these rotations, and assisting the PD on an ongoing basis. (2-2.11)

**Documentary Evidence:**

On Site  
Rotation Schedules  
Associate PD Evaluations

**Activities of Teaching Staff (2-3):**

<b>Are pediatric dentistry members of the teaching staff, appointed after January 1, 2002, who have not previously served as teaching staff, certified by the American Board of Pediatric Dentistry, board eligible, or have completed the educational requirements to pursue board certification? (2-3.1)</b>	<b>YES</b>
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The clinical and most of the didactic curriculum are taught by board certified, board eligible, or educationally qualified pediatric dentists. All eligible pediatric teaching faculty are graduates of accredited pediatric dentistry programs. (2-3.1)

**Documentary Evidence:**

Appendix I: Faculty BioSketches

<b>Are foreign trained faculty members comparably qualified? (2-3.2)</b>	<b>YES</b>
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All faculty, including foreign-trained, are required to be licensed in Illinois, be boarded or board-eligible, or be licensed as Pediatric Dentistry Specialists in Illinois. (2-3.2)

<b>Do the program clinical faculty and attending staff have specific and regularly scheduled clinic assignments to ensure the continuity of the program? (2-3.3)</b>	<b>YES</b>
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The number and existing time commitment of the program faculty are more than adequate to meet the needs of the pediatric dentistry post-doctoral program. Clinical faculty are physically on site for clinical sessions with scheduled patients and physically present in the College of Dentistry Pediatric Dentistry clinics and the hospital (operating room and floor consultations). No patient care is permitted to occur in the absence of an attending faculty member. (2-3.3)

**Documentary Evidence:**

Appendix J: Attending Faculty Schedule

<b>Are clinical faculty immediately available to provide direct supervision to students/residents for all clinical sessions? (2-3.4)</b>	<b>YES</b>
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All care is directly supervised by faculty members. Diagnosis/treatment plans and daily care are reviewed and signed off by the faculty. Continuity of supervision is maintained with the same patients generally being followed by the same faculty. (2-3.4)

**STANDARD 3 – FACILITIES AND RESOURCES**

<b>Are institutional facilities and resources adequate to provide the educational experiences and opportunities required to fulfill the needs of the educational program as specified in the Accreditation Standards for Advanced Specialty Education Programs in Pediatric Dentistry? (3)</b>	<b>YES</b>
--	------------

Institutional support for the post-doctoral pediatric dentistry program, space, staffing, equipment and supplies is adequate to fulfill the needs of the educational program. The facilities, which were completely remodeled in the spring/summer of 2013, and resources are adequate to ensure health and safety for patients, residents, faculty and staff. (3) Currently there are 17 chairs each with their own nitrous oxide supply, 8 of these chairs are in enclosed rooms, 9 x-ray heads, 1 Pan-Ceph machine, 7 pulse oximeters. Upon completion of construction there will be a total of 20 chairs as well as a GA on-suite with a recovery room. Residents have a remodeled space with 22 workstations each with it's own computer. The faculty area is under construction and will be completed end of September 2013. One seminar room is specifically designated for the program with other seminar areas available upon request.

**Documentary Evidence:**

- Appendix L: Exhibit 4- Information Regarding Facilities
- Appendix M: Exhibit 5- Information Regarding Support Staff

On-site  
Clinic and Building floor plans.

<b>Are equipment and supplies for use in managing medical emergencies readily accessible and functional? (3)</b>	<b>YES</b>
--	------------

Equipment and supplies for use in managing medical emergencies is readily accessible in the post-doctoral residency program clinic. In addition, College of Dentistry has a protocol for managing medical emergencies that may occur in any of the clinics. In the case of any medical emergencies in the clinic, the residents, faculty, and staff are well trained in basic life support (BLS) procedures and the departmental/College policies are instituted. Residents and faculty supervising sedation procedures are also PALS certified. If it is the judgment of the resident/faculty that a code needs to be called, the College protocol is followed. The College code team response is available generally within a few minutes and the protocol is posted in all clinics.

The emergency crash cart, containing drugs, AE Defibrillator, O2 tank, and equipped with positive pressure monitors is available in the clinic. The crash cart log is updated monthly and posted. (3)

**Documentary Evidence:**

- On Site
- UIC College of Dentistry Clinic Manual
- UIC College of Dentistry Medical Emergency Procedures
- Department of Pediatric Dentistry crash cart log

**Does the program document its compliance with the institution's policy and applicable regulations of local, state and federal agencies, including but not limited to radiation hygiene and protection, ionizing radiation, hazardous materials, and bloodborne and infectious diseases? (3)**

YES

Does the program document its compliance with the institution's policy and applicable regulations of local, state and federal agencies, including but not limited to radiation hygiene and protection, ionizing radiation, hazardous materials, and blood borne and infectious diseases? (3)

*Radiation Safety* – The department adheres to institution-wide policies and protocols concerning radiation safety and follows all applicable regulations by local, state and federal agencies regarding radiation hygiene and protection, ionizing radiation, hazardous materials. All the twenty (20) operatories have digital intraoral x-ray units, and the rooms are lead lined and approved by the State and Campus Radiation Safety Office. Each of the rooms is equipped with lead shields; and residents and dental assistants are provided with radiation monitoring badges. A digital pan-oral/cephalometric unit is available in the radiology room. A Cone Beam CT unit is available in the Radiology Department of the College of Dentistry. MRI and CT scans are available at the University of Illinois Hospital & Health Sciences System, which is across the street.

Faculty approval for all radiographic orders is required. Patient exposure records are kept electronically in axiUm™, the College of Dentistry electronic patient record system. A specific protocol as outlined in the College radiation policy manual is followed.

New residents and faculty/staff hires receive training on the radiation safety policies by completing an on-line training session.

*Blood borne and Infectious Diseases* – The department adheres to institution-wide policies and protocols concerning blood borne and infectious diseases and follows all applicable regulations by local, state and federal agencies. The institution-wide policies are available on the College Intranet. The departmental policies include: (a) initial orientation and in-service training of residents and faculty/staff hires by the College Infection Control Director; (b) completion of an annual on-line training session by faculty, staff and residents; and (c) regular monitoring of infection control policies by Departmental faculty and dental assistants.

All instruments and equipment are appropriately autoclaved and dispensed by the College sterilizing unit. Sterilization records are maintained and monitored by the College Director of Clinics, who also conducts inspection of the clinic facilities.

*Hazardous Materials* – The department adheres to institution-wide policies and protocols concerning hazardous materials handling and follows all applicable regulations by local, state and federal agencies. Each unit has piped-in N2O-O2. All units are equipped with a scavenging system. The Departmental and College posting on the use and safety of N2O-O2 is clearly articulated and in-service training is provided to new residents and faculty/staff hires. The Campus Safety Office conducts regular safety readings and to date the PPM exposure has been very safe. Employees and Residents who are pregnant are especially sheltered. Faculty, staff and residents are required to complete an on-line OSHA training sessions and are expected to comply with all applicable safety guidelines. All controlled substances are kept in a safe and are dispensed and recorded by the resident and the Dental Assistant Supervisor or her designee after approval of the dosage by the



faculty member. All controlled substances are accountable through a regular inspection by the Program Director, the Clinic Director, and the College Associate Dean for Clinical Affairs. The drugs in the emergency cart (crash cart) are locked. Monthly inspections are performed by the Clinic Director and logs are kept in the Department. Mock drills for emergency drugs are conducted for faculty, staff and residents. Scrap amalgam is kept in air-tight bottles containing water. (3)

**Documentary Evidence:**

- On Site
- UIC College of Dentistry Infection Control Manual
- Pediatric Conscious/Moderate Sedation Documents
- Controlled Substance Management Policy and Procedure
- Resident/staff radiation exposure log
- Controlled substance log
- Radiation policy

<b>Are the above policies provided to all students/residents, faculty and appropriate support staff and continuously monitored for compliance? (3)</b>	<b>YES</b>
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The College of Dentistry Clinic Manual is provided to the residents, faculty and staff. Copies of this manual are available in the Department of Pediatric Dentistry and on the College intranet. Monitoring of institutional asepsis and infection control policies and procedure is the responsibility of the College of Dentistry Director of Clinics. In addition, the Director of Clinics provides annual clinic policy orientation and updates to residents, faculty and staff.

Monitoring of institutional hazard control in the clinics is the responsibility of the UIC Environmental Safety and Health Department. They respond immediately to any requests for assessment of potential hazards in the patient care areas. (3)

**Documentary Evidence:**

- On Site
- UIC College of Dentistry Infection Control Manual
- Documentation of annual on-line recertification of students, faculty and staff for infection control and radiation safety procedures

<b>Are policies on bloodborne and infectious diseases made available to applicants for admission and patients? (3)</b>	<b>YES</b>
--	------------

Residents, faculty and staff are required to have proper training in blood borne and infectious disease procedures before the start of their work in the clinics. Faculty and staff are both responsible for ensuring compliance with these procedures in the clinics. Universal precaution procedures are strictly enforced in the clinic. The Director of Clinics in the College of Dentistry provides instructions for all residents and staff regarding blood borne and infectious diseases. The College of Dentistry Infection Control Manual is available to applicants and patients upon request.

**Documentary Evidence:**

On Site  
UIC College of Dentistry Infection Control Manual

<b>Are students/residents, faculty and appropriate support staff encouraged to be immunized against and/or tested for infectious diseases, such as mumps, measles, rubella and hepatitis B, prior to contact with patients and/or infectious objects or materials, in an effort to minimize the risk to patients and dental personnel? (3)</b>	<b>YES</b>
--	------------

As of 2009, the College's Immunization policy has been updated to require that all incoming student, resident, faculty or staff provide proof of immunization via blood titres for the following diseases: Measles, Mumps, Rubella, Varicella Zoster and Hepatitis B(Antibody and Antigen). Providers are also required to provide proof of immunization against Polio and Tetanus/Diphtheria, and provide proof of a recent negative TB test, via two-step test, a quantiferon blood test, or a current chest radiograph. College policy also requires all clinical providers to undergo yearly TB testing, which is administered by "University Health Services onsite at the College. Compliance is monitored by the Director of Clinics. (3)

**Documentary Evidence:**

On Site  
UIC College of Dentistry Clinic Manual  
Data on immunizations available through the Director of Patient Services Office

**Are all students/residents, faculty and support staff involved in the direct provision of patient care continuously recognized/certified in basic life support procedures, including cardiopulmonary resuscitation? (3)**

**YES**

Residents, faculty, and support staff involved in direct provision of patient care are continuously certified in basic life support procedures (BLS). Residents and most faculty members are also certified with pediatric advanced life support (PALS).

**Documentary Evidence:**

On Site  
Pediatric Conscious/Moderate Sedation Documents  
BLS certification log for faculty, staff, and residents

**Are students/residents, faculty and staff engaged in provision of pharmacologic behavior guidance certified in PALS or ACLS in accordance with guidelines of the American Academy of Pediatric Dentistry, and institutional and state regulations? (3-1)**

**YES**

All first year residents are required to take a department sponsored PALS course in the first two months of their residency. Successful completion of this course is required before the resident is allowed any interaction with sedation patients.

**Documentary Evidence:**

On Site  
PALS Certification data

**Do private practitioners who provide training have faculty appointments? (3-2)**

**NA**

**Do the clinical facilities include the following (3-3):**

<b>Space designated specifically for the advanced specialty education program in pediatric dentistry? (3-3.1)</b>	<b>YES</b>
---	------------

The program is housed within the Department of Pediatric Dentistry. The space used for the program includes a twenty operatories, state-of-the-art clinic facility, one pan-oral/Cephalometric room, one recovery room, faculty offices, designated areas for residents, a seminar room, and a laboratory area. These spaces are specifically for the advanced specialty education program in pediatric dentistry. The post-doctoral students have their own room with separate desks and computer access. The program has a seminar room equipped with state-of-the-art audiovisual systems. (3-3.1)

**Documentary Evidence:**

On Site  
Floor plans of the Pediatric Dentistry facilities

<b>Flexibility to allow for changes in equipment location and for additions or deletions to improve operating efficiency, and promote efficient use of dental instrumentation and allied personnel? (3-3.2)</b>	<b>YES</b>
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The equipment is maintained regularly using the College's maintenance services. In case of equipment failure in a particular unit, the in-house repair personnel return the unit to function within 24 hours. There is flexibility for changes in equipment location and upgrade to improve operating efficiency, including to promote the efficient use of dental instrumentation and allied personnel. These functions are coordinated by the office of the Associate Dean for Patient Services. These services are adequate. (3-3.2)

**Documentary Evidence:**

On Site  
Clinic policy on maintenance of units.  
College operating manual

<b>Adequate radiographic and laboratory facilities in close proximity to the patient treatment area? (3-3.3)</b>	<b>YES</b>
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The pediatric dentistry clinic has adequate radiographic equipment. Each of the 20 operatories is equipped with digital intraoral radiographic units and the x-ray room is equipped with a pan-oral unit and a Cephalostat. The departmental facilities are used for radiographs taken on patients under sedation/general anesthesia, recall, emergency, and surveys on anxious and less compliant patients. Routine surveys, digital pan orals, Cephalometric films and extra-oral films are taken either in the Department or in the Radiology Department of the College. A Cone Beam CT unit is also available in the Radiology Department. CTs and MRIs are referred to the adjoining hospital Radiology Department. The facilities and the equipment are adequate, the rooms are shielded and routinely inspected, and the personnel are regularly monitored.

There is a dental X-ray unit and processor in the Emergency Room of the University of Illinois Hospital & Health Sciences System. A digital ready X-ray unit will soon be installed to replace the old

system. A portable digital dental X-ray unit is available in the operating room. There is a pan oral unit available in the hospital. All of these are maintained by the hospital Radiology Department.

There is a support laboratory next to the Pediatric Dentistry Clinic, which is equipped with appropriate laboratory supplies, model trimmers, etc. (3-3.3)

**Documentary Evidence:**

On Site  
Clinic floor plans

<b>Accessibility for patients with special health care needs? (3-3.4)</b>	<b>YES</b>
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The departmental clinic is well equipped and accessible to meet the needs of the patients with special health care needs. The patient care units have adequate space to accommodate patients in wheelchairs or gurneys. The College doors, elevators, curbs, and washrooms are designed to meet the needs of individuals with special health needs, in compliance with the Americans with Disability Act (ADA). (3-3.4) The clinic is also in compliance of all building codes as designated by the University, City of Chicago and State of Illinois.

**Documentary Evidence:**

On Site  
Building floor plans  
Building code requirements.

<b>Recovery area facilities? (3-3.5)</b>	<b>YES</b>
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The clinic has a recovery room where children can be monitored prior to and following sedation/general anesthesia procedures. The room is well equipped with monitoring equipment including pulse oximetry, a self-inflating blood pressure monitoring device, suction, and 100% oxygen. A well-equipped crash cart is available outside the room. (3-3.5)

**Documentary Evidence:**

On Site  
Clinic floor plans

<b>Reception and patient education areas? (3-3.6)</b>	<b>YES</b>
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The Pediatric Dentistry Clinics have a spacious, appropriately decorated reception area which has adequate seating to accommodate the patients/parents. The facility is shared with the pre-doctoral pediatric dentistry clinic.

**Documentary Evidence:**

On Site  
Clinic floor plans

<b>A suite equipped for carrying out comprehensive oral health procedures under general anesthesia and/or sedation? (3-3.7)</b>	<b>YES</b>
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There is a primary suite in the University of Illinois Hospital, which is assigned to the program. However, there is flexibility to use other hospital suites as needed. The OR has modern state-of-the-art equipment and the Program provides adequate equipment for all types of preventive, restorative, orthodontics, or surgical care. This includes three portable dental units, a large portable supply cabinet, which accommodates small equipment (curing light, electro surge unit, etc.) a portable digital dental X-ray unit. Several dental operatories are also equipped for carrying out sedation procedures in the Pediatric Dentistry clinic. Two operatories are equipped for the administration of general anesthesia. (3-3.7)

**Documentary Evidence:**

On Site  
Hospital floor plans  
OR tour during site visit  
Pediatric Dentistry Clinic tour during site visit

<b>Inpatient facilities to permit management of general and oral health problems for patients with special health care needs? (3-3.8)</b>	<b>YES</b>
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There is a dental treatment room in the emergency room of the University of Illinois Hospital, which has the necessary equipment to provide diagnostic and limited routine care. When patients can be transported, they are sent (depending on the weather) by ambulance or wheelchair across the street. Dental equipment can be transported from the operating room to the pediatrics unit for care of children, who need to be evaluated/treated on an inpatient basis when necessary. (3-3.8)

**Documentary Evidence:**

On Site  
Hospital floor plans

<b>A sufficient number of operatories to accommodate the number of students/residents enrolled? (3-3.9)</b>	<b>YES</b>
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There are twenty operatories available for eighteen post-doctoral residents in the pediatric dentistry clinic. Two of the operatories in separate rooms are designed to serve as sedation/general anesthesia rooms. Each of these operatories is equipped with fiberoptic handpieces and piped-in nitrous oxide/oxygen with scavenging capacity, and the flow meters delivery system. There is a recovery room access from the sedation/general anesthesia rooms. Sterile instrument tray setups are dispensed and returned to the sterilization unit. Eight operatories are also equipped with monitoring equipment with pulse oximetry heart rate, self-inflating blood pressure monitors, and EKG display and printout. The number of operatories available to the program is optimal.

**Documentary Evidence:**

On Site  
Clinic floor plans

**Do personnel resources include the following (3-4):**

<b>Adequate administrative and clerical personnel? (3-4.1)</b>	<b>YES</b>
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Three full-time receptionists and 1.5 FTE staff support the postdoctoral program. The services of these administrative and clerical personnel are adequate. (3-4.1)

**Documentary Evidence:**

Appendix M: Information Regarding Staff

<b>Adequate allied dental personnel assigned to the program to ensure clinical and laboratory technical support who are suitably trained and credentialed? (3-4.2)</b>	<b>YES</b>
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There are ten fulltime chairside dental assistants assigned to the fifteen postdoctoral residents. However, not all the residents are scheduled to be in the clinic at the same time. Therefore, the services of the dental assistant staff are adequate. The dental assistants are trained to assist in operating room cases, moderate sedation cases, surgical procedures and behavior management situations. They are all certified in CPR and sedation monitoring, and most of them are certified in N2O monitoring. Two dental assistants will be added when the additional three residents join the program starting July 1, 2014. (3-4.2)

**Documentary Evidence:**

Appendix M: Information Regarding Staff

<b>Research Facilities: Are facilities available for students/residents to conduct basic and/or applied (clinical) research? (3-5)</b>	<b>YES</b>
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The Department's research facilities are adequate. When residents select a topic that needs laboratory space, it is provided either in the Department or is made available in the primary advisor's unit. Recently renovated state-of-the-art research laboratories are also available in the College of Dentistry. Residents have access to these facilities for their research. (3.5)

**Documentary Evidence:**

On Site  
Residents' Theses and Certificate Research Projects  
Building floor plans

<b>Information Resources: Are there appropriate information resources available including access to biomedical textbooks, dental journals and other sources pertinent to the area of pediatric dentistry practice and research? (3-6)</b>	<b>YES</b>
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The Health Sciences Library is located within a block and has the biomedical textbooks, journals, and other resource materials pertinent to the field of pediatric dentistry practice and research. Much of the collection features online accessibility. Selected journals and books are available in the departmental seminar room library. The Department of Pediatrics library is also available to our residents. The Department, College, and the University are all well equipped with electronic-based information resources. Residents routinely use PubMed, the Cochrane Consortium and other electronic search engines and indexes for information used in patient care knowledge and research. In addition, the ADA library is also available to students and faculty who are ADA members. The ADA building is approximately four miles from the College of Dentistry. (3.6)



**Patient Availability: Is there a sufficient pool of patients requiring a sufficient scope, volume and variety of oral health care needs and a delivery system to provide ample opportunity for training, including healthy individuals as well as patients with special health care needs? (3-7)**

**YES**

The Department has a very large pool of patients who are walk-ins or referred by community dentists and physicians; these include a substantial number of children with special health needs. The patient pool is very diverse and a represent a significant amount of minority patients as well as patients from a wide variety of cultural groups and differing socio-economic status. Most patients are Medicaid eligible but a number of insurance payor patients are also seen in the clinic.

In addition, the University of Illinois Hospital is well recognized as a tertiary care center and has a large pool of patients seeking care who are referred to our clinic. We also receive many referrals from the various general and subspecialty clinics in pediatrics, the Childrens' Habilitation Center, the Chicago Health Clinics, and State and governmental agencies. These referrals provide more than necessary patients (healthy as well as those with special health care needs) to meet the educational needs of our residents. (3.7)

**Documentary Evidence:**

On Site  
Patient visit data  
Patient demographic data

**STANDARD 4 - CURRICULUM AND PROGRAM DURATION**

<b>Is the advanced specialty education program designed to provide special knowledge and skills beyond the D.D.S. or D.M.D. training and oriented to the accepted standards of specialty practice as set forth in the Accreditation Standards for Advanced Specialty Education Programs? (4)</b>	<b>YES</b>
--	------------

The advanced specialty education program in pediatric dentistry at UIC is designed to provide special knowledge and skills beyond the DDS or DMD training and is oriented to the accepted standards of CODA.

The program curriculum is designed to provide the opportunity to extend the resident’s diagnostic ability, basic and advanced clinical knowledge and skills, and critical judgment. This is done through course work, clinical experience, research, seminars and hospital experience for the treatment of patients with special needs. The program also offers experience in closely related areas to ensure that its graduates are proficient in comprehensive care.

**Documentary Evidence:**

- Appendix N: Allocation of Program Time
- Appendix O: Resident Schedule
- Appendix P: Biomedical Science Instruction
- Appendix Q: Course Outlines and Objectives
- Appendix R: Schedule of Off-Service Assignments
- Appendix S: Hospital Admissions Information
- Appendix T: Clinical and didactic training

<b>Does the advanced specialty education program include instruction or learning experiences in evidence-based practice?</b>	<b>YES</b>
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All Guidelines and Policies of the AAPD are also discussed and related to cases that are currently being treated in the clinic. Evidence-based dentistry is also covered during Pediatric Advanced seminars.

**Documentary Evidence:**

- Appendix Q: Course Outline – PEDD 595, Diagnosis and Treatment seminar, Journal Club

<b>Is the level of specialty area instruction in the certificate and degree granting (M.S.) programs comparable? (4)</b>	<b>NA</b>
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<b>If the institution/program enrolls part-time students/residents, does the institution have guidelines regarding enrollment of part-time students/residents? (4)</b>	<b>NA</b>
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<b>If the institution/program enrolls part-time students/residents, do they start and complete the program within a single institution, except when the program is discontinued? (4)</b>	<b>NA</b>
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<b>Does the director of an accredited program who enrolls students/residents on a part-time basis ensure that:</b>	
a) The educational experiences, including the clinical experiences and responsibilities, are the same as required by full-time students/residents?	<b>NA</b>
b) There is an equivalent number of months spent in the program? (4)	<b>NA</b>

### Goals of Advanced Education in Pediatric Dentistry

<b>Does the advanced education program in pediatric dentistry prepare a specialist who is competent in providing both primary and comprehensive preventive and therapeutic oral health care for infants and children through adolescence, including those with special health care needs? (4-1)</b>	<b>YES</b>
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Residents participate in seminar/didactic instruction during which the didactic basis of primary and comprehensive preventative techniques are discussed. Assignments are given to utilize current literature and present findings to fellow residents and faculty. Clinical training is based on a comprehensive care model when a resident is assigned a block of patients who are only seen by that specific resident. An attempt is made for the same faculty to follow the same case with the resident.

**Documentary Evidence:**

Appendix Q: Course Outline – PEDD 595, Seminar class, Diagnosis and Treatment planning – Journal Club / Infant oral health care

<b>Is all curricula formulated in accordance with current American Academy of Pediatric Dentistry Guidelines, if applicable? (4-1)</b>	<b>YES</b>
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Curriculum is reviewed annually by course directors and program leadership. Current AAPD guidelines are reviewed and adaptations are made to courses to reflect changes in guidelines.

**Documentary Evidence:**

Appendix Q: Course Outlines

## Program Duration

<b>Does the duration of the advanced specialty program in pediatric dentistry include a minimum of 24 months of full-time formal training? (4-2)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix O: Student/Resident Schedules

## Curriculum

<b>Does the program provide the opportunity to extend the student's/resident's diagnostic ability, basic and advanced clinical knowledge and skills, and critical judgment beyond that provided in predoctoral education? (4-3)</b>	<b>YES</b>
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Students see complex pediatric cases that involve complexities for age, medical condition, extent of oral disease, and behavior. Students independently evaluate patients and devise a tentative treatment plan that is reviewed by attending faculty and discussed. Complex cases that require consultations and further review are worked by residents and then presented to faculty independently or in a forum. Residents are challenged by peers and faculty in case presentations.

**Documentary Evidence:**

On Site  
Resident Clinical Log

<b>Does the program also provide experience in closely related areas to ensure that students/residents become competent in comprehensive care? (4-3)</b>	<b>YES</b>
--	------------

Students attend seminars and receive instruction from faculty from various other dental or medical specialties. These seminars interact with clinical care and provide residents with a broad base of experiences that involve all aspects of care for the patient.

**Documentary Evidence:**

Appendix Q: Course Outlines

## Biomedical Sciences

<b>Are the biomedical sciences included to support the clinical, didactic and research portions of the curriculum? (4-4)</b>	<b>YES</b>
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Residents receive seminar and didactic instruction for specific biomedical courses. Some of these courses are done online and other involve seminar presentations. Courses cover all aspects of biomedical sciences including all listed in 4-4.

**Documentary Evidence:**

Appendix T: Exhibit 11a - 1a- g

<b>Is instruction provided at the understanding level in the following biomedical sciences (4-4):</b>
---

<b>a) BIOSTATISTICS and CLINICAL EPIDEMIOLOGY: Including probability theory, descriptive statistics, hypothesis testing, inferential statistics, principles of clinical epidemiology and research design? (4-4 a)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 1a

<b>b) PHARMACOLOGY: Including pharmacokinetics, interaction and oral manifestations of chemotherapeutic regimens, pain and anxiety control, and drug dependency? (4-4 b)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 1b

<b>c) MICROBIOLOGY: Including virology, immunology, and cariology? (4-4 c)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 1c

<b>d) EMBRYOLOGY: Including principles of embryology with a focus on the developing head and neck, and craniofacial anomalies? (4-4 d)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 1d

<p><b>e) GENETICS: Including human chromosomes, Mendelian and polygenic patterns of inheritance, expressivity, basis for genetic disease, pedigree construction, physical examination and laboratory evaluation methods, genetic factors in craniofacial disease and formation and management of genetic diseases? (4-4 e)</b></p>	<p>YES</p>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 1e

<p><b>f) ANATOMY: Including a review of general anatomy and head and neck anatomy with an emphasis on the infant, child and adolescent? (4-4 f)</b></p>	<p>YES</p>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 1f

<p><b>g) ORAL PATHOLOGY: Including a review of the epidemiology, pathogenesis, clinical characteristics, diagnostic methods, formulation of differential diagnoses and management of oral and perioral lesions and anomalies with emphasis on the infant, child, and adolescent? (4-4 g)</b></p>	<p>YES</p>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 1g

## CLINICAL SCIENCES

### Behavior Guidance

**Didactic Instruction: Is didactic instruction in behavior guidance provided at the in-depth level and include (4-5):**

<p><b>a) Physical, psychological and social development. This includes the basic principles and theories of child development and the age-appropriate behavior responses in the dental setting? (4-5 a);</b></p>	<p>YES</p>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.1a

<p><b>b) Child behavior guidance in the dental setting and the objectives of various guidance methods (4-5 b)?;</b></p>	<p>YES</p>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.1b

<b>c) Principles of communication, including listening techniques, including the descriptions of and recommendations for the use of specific techniques, and communication with parents and caregivers? (4-5 c);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.1c

<b>d) Principles of informed consent relative to behavior guidance and treatment options? (4-5 d);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.1d

<b>e) Principles and objectives of sedation and general anesthesia as behavior guidance techniques, including indications and contraindications for their use in accordance with the AAPD guidelines and The Teaching of Pain Control and Sedation to Dentists and Dental Students of the American Dental Association (ADA)? (4-5 e);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.1e

<b>f) Recognition, treatment and management of pharmacologic-related emergencies (4-5 f)?</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.1f

<b>Clinical Experiences: Do clinical experiences in behavior guidance enable students/residents to achieve competency in patient management using behavior guidance? (4-6)</b>	<b>YES</b>
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<b>a1. Do experiences include infants, children and adolescents including patients with special health care needs, using: Non-pharmacological techniques? (4-6 a1)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix T: Exhibit 11b - 2.1a

On Site  
Resident Clinical Log

<b>a2. Do experiences include infants, children and adolescents including patients with special health care needs, using: Sedation? (4-6 a2)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix T: Exhibit 11b - 2.1b

On Site  
Resident Clinical Log

<p><b>a3. Do experiences include infants, children and adolescents including patients with special health care needs, using: Inhalation analgesia? (4-6 a3)</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

Appendix T: Exhibit 11b - 2.1c

On Site  
Resident Clinical Log

<p><b>b1. Do students/residents perform adequate patient encounters to achieve competency by completing 20 nitrous oxide analgesia patient encounters as primary operator? (4-6 b1)</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<p><b>b2. Do students/residents perform adequate patient encounters to achieve competency by completing a minimum of 50 patient encounters in which sedative agents other than nitrous oxide (but may include nitrous oxide in combination with other agents) are used? The agents <i>may</i> be administered by any route. (4-6 b2)</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

On Site  
Resident Clinical Log



<b>b2a. Of the 50 patient encounters, does each student/resident act as operator in a minimum of 25 sedation cases? (4-6 b2a)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<b>b2b. Of the remaining sedation cases (those not performed as the primary operator), does each student/resident gain clinical experience, which can be in a variety of activities or settings, including individual or functional group monitoring and human simulation? (4-6 b2b)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<b>b2c. Are all sedation cases completed in accordance with the recommendations and guidelines of AAPD/AAP, the ADA's Teaching of Pain Control and Sedation to Dentists and Dental Students, and relevant institutional policies? (4-6 b2c)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log  
Sedation Forms  
Sedation Monitoring Forms  
Consent Forms

### Growth & Development

<b>Didactic Instruction: Is didactic instruction in craniofacial growth and development provided at the in-depth level with content to enable the student/resident to understand and manage the diagnosis and appropriate treatment modalities for malocclusion problems affecting orofacial form, function, and esthetics in infants, children, and adolescents? (4-7)</b>	<b>YES</b>
<b>Does this include but is not limited to an understanding of:</b>	
<b>a. Theories of normative dentofacial growth mechanisms? (4-7 a);</b>	<b>YES</b>

**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.2a

<b>b. Principles of diagnosis and treatment planning to identify normal and abnormal dentofacial growth and development? (4-7 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.2b

<b>c. Differential classification of skeletal and dental malocclusion in children and adolescents? (4-7 c);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.2c

<b>d. The indications, contraindications, and fundamental treatment modalities in guidance of eruption and space supervision procedures during the developing dentition that can be utilized to obtain an optimally functional, esthetic, and stable occlusion? (4-7 d);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.2d

<b>e. Basic biomechanical principles and the biology of tooth movement? Growth modification and dental compensation for skeletal problems including limitations? (4-7 e)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.2e

<b>f. Appropriate consultation with and/or timely referral to other specialists when indicated to achieve optimal outcomes in the developing occlusion? (4-7 f)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.2f

**Clinical Experiences: Do clinical experiences enable students/residents to achieve competency in (4-8):**

<b>a. Diagnosis of dental, skeletal, and functional abnormalities in the primary, mixed, and young permanent dentition stages of the developing occlusion? (4-8 a)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<p><b>b. Treatment of those conditions that can be corrected or significantly improved by evidence-based early interventions which might require guidance of eruption, space supervision, and interceptive orthodontic treatments? (4-8 b)</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<p><b>Do these transitional malocclusion conditions include, the recognition, diagnosis, appropriate referral and/or focused management of (4-8 b):</b></p>		
<p><b>1. Space maintenance and arch perimeter control associated with the early loss of primary and young permanent teeth? (4-8 b1);</b></p>	<p><b>YES</b></p>	

**Documentary Evidence:**

On Site  
Resident Clinical Log

<p><b>2. Transverse arch dimensional problems involving simple posterior crossbites? (4-8 b2);</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<p><b>3. Anterior crossbite discrepancies associated with localized dentoalveolar crossbite displacement and functional anterior shifts? (e.g. pseudo-Class III) (4-8 b3);</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<p><b>4. Anterior spacing with or without dental protrusion? (4-8 b4);</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<p><b>5. Deleterious oral habits? (4-8 b5);</b></p>	<p><b>YES</b></p>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<b>6. Preservation of leeway space for the resolution of moderate levels of crowding? (4-8 b6);</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<b>7. Ectopic eruption, ankylosis and tooth impaction problems? (4-8 b7)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<b>8. The effects of supernumerary (e.g. mesiodens) and/or missing teeth? (4-8 b8)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

### Oral Facial Injury and Emergency Care

**Didactic Instruction: Is didactic instruction in oral facial injury and emergency care provided at the in-depth level and include (4-9):**

**Care of orofacial injuries in infants, children and adolescents as follows:**

- a. Evaluation and treatment of trauma to the primary, mixed and permanent dentitions, such as repositioning, replantation, treatment of fractured teeth, and stabilization of intruded, extruded, luxated, and avulsed teeth? (4-9 a);**

**YES****Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.3a

<b>b. Evaluation, diagnosis, and management of the pulpal, periodontal and associated soft and hard tissues following traumatic injury? (4-9 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.3b

<b>c. Recognition of injuries including fractures of the maxilla and mandible and referral for treatment by the appropriate specialist? (4-9 c)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.3c

<b>d. Recognition, management and reporting child abuse and neglect and non-accidental trauma? (4-9 d)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.3d

**Clinical Experiences: Do clinical experiences in oral facial injury and emergency care enable students/residents to achieve competency in (4-10):**

<b>a. Diagnosis and management of traumatic injuries of the oral and perioral structures including primary and permanent dentition and in infants, children and adolescents? (4-10 a)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

<b>b. Emergency services including assessment and management of dental pain and infections? (4-10 b)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinical Log

### Oral Diagnosis, Oral Pathology, and Oral Medicine

**Didactic Instruction: Is didactic instruction in oral diagnosis, oral pathology and oral medicine provided at the in-depth level and include (4-11):**

<b>a. The epidemiology of oral diseases encountered in infants, children and adolescents including those with special health care needs including prevalence and severity? (4-11 a);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix T: Exhibit 11a - 2.4a  
  
On Site  
Resident Clinical Log

<b>b. The oral diseases of hard and soft tissue encountered in infants, children and adolescents including those pediatric patients with special health care needs? (4-11 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix T: Exhibit 11a - 2.4b  
  
On Site  
Resident Clinical Log

<b>c. The diagnosis of oral and perioral lesions and anomalies in infants, children, and adolescents? (4-11 c);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.4c

<b>d. Gingival, periodontal and other mucosal disorders in infants, children and adolescents? (4-11 d); and</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.4d

<b>e. Treatment of common oral diseases in infants, children and adolescents? (4-11 e)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.4e

**Is didactic instruction provided at the understanding level in (4-11):**

<b>f. Ordering and performing uncomplicated biopsies and adjunctive diagnostic tests including exfoliative cytology, microbial cultures and other commercially available tests? (4-11 f)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11b - 2.4f

<b>g. Referring persistent lesions and/or extensive surgical management cases to appropriate specialists? (4-11 g)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11b - 2.4g

**Clinical Experiences: Do clinical experiences in oral diagnosis, oral pathology, and oral medicine enable students/residents to achieve competency in (4-12):**

<b>a. Pediatric oral and maxillofacial radiology and appropriate procedures of radiation hygiene (4-12 a)?</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11b - 2.4a

<b>b. Treatment of common oral diseases in infants, children and adolescents? (4-12 b)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11b - 2.4e

## Prevention and Health Promotion

**Didactic Instruction: Is didactic instruction in prevention provided at the in-depth level and include (4-13):**

<b>a. The scientific basis for the etiology, prevention, and treatment of dental caries and periodontal and pulpal diseases, traumatic injuries, and developmental anomalies? (4-13 a);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.5a

<b>b. The effects of proper diet nutrition, fluoride therapy and sealants in the prevention of oral disease? (4-13 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.5b

<b>c. Perinatal oral health and infant oral health supervision? (4-13 c);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a- 2.5c

<b>d. Scientific principles, techniques and treatment planning for the prevention of oral diseases, including diet management, chemotherapeutics, and other approaches? (4-13 d);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.5d

<b>e. Dental health education programs, materials and personnel to assist in the delivery of preventive care? (4-13 e)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.5e

<b>f. Diagnosis of periodontal diseases of childhood and adolescence, treatment and/or refer cases of periodontal diseases to the appropriate specialist? (4-13 f)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.5f

<b>Clinical Experiences: Are clinical experiences of sufficient scope, volume and variety to enable students/residents to achieve competency in application of prevention in clinical practice? (4-14)</b>	<b>YES</b>
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Clinical experiences are of sufficient scope, volume and variety to enable students/residents to achieve competency in application of prevention in clinical practice.

**Documentary Evidence:**

Appendix O: Exhibit 7  
Appendix T: Exhibit 11b - 2.5a

On Site  
Clinic Schedule of Residents

### Comprehensive Dental Care

<b>Didactic Instruction: Is didactic instruction provided at the in-depth level and include (4-15):</b>	
<b>a. Restorative and prosthetic techniques and dental materials for the primary, mixed and permanent dentitions? (4-15 a);</b>	<b>YES</b>

**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.6a

<b>b. Management of comprehensive restorative care for pediatric patients? (4-15 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.6b

<b>c. Treatment planning for infants, children, adolescents and those with special health care needs? (4-15 c)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.6c

<b>d. Characteristics of the dental home? (4-15 d)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a -2.6d



**Clinical Experiences: Do clinical experiences enable students/residents to achieve competency in (4-16):**

<b>a. Diagnosis and treatment planning for infants, children, adolescents and those with special health care needs? (4-16 a)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix T: Exhibit 11b – 2.6a

<b>b. Provision of comprehensive dental care to infants, children, adolescents and those with special health care needs in a manner consistent with the dental home? (4-16 b)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix T: Exhibit 11b – 2.6b

### Management of a Contemporary Dental Practice

**Didactic Instruction: Is didactic instruction provided at the understanding level and include (4-17):**

<b>a. The design, implementation and management of a contemporary practice of pediatric dentistry, emphasizing business skills for proper and efficient practice? (4-17 a);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.7a

<b>b. Jurisprudence and risk management specific to the practice of Pediatric Dentistry? (4-17 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.7b

<b>c. Use of computers in didactic, clinical and research endeavors, as well as in practice management? (4-17 c);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.7c

<b>d. Principles of ethical and biomedical ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care and practice management? (4-17 d);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.7d

<b>e. Working cooperatively with consultants and clinicians in other dental specialties and health fields? (4-17 e);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.7e

<b>Is didactic instruction provided at the in-depth level for the following:</b>	
<b>f. The prevention and management of medical emergencies in the dental setting? (4-17 f)</b>	<b>YES</b>

**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.7f

### Patients with Special Health Care Needs

**Didactic Instruction: Is didactic instruction provided at the in-depth level and include (4-18):**

<b>a. Formulation of treatment plans for patients with special health care needs? (4-18 a);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.8a

<b>b. Medical conditions and the alternatives in the delivery of dental care that those conditions might require? (4-18 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.8b

<b>c. Management of the oral health of patients with special health care needs, i.e.:</b>	
<b>1. Medically compromised? (4-18 c1);</b>	<b>YES</b>

**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.8c

<b>2. Physically compromised or disabled; and diagnosed to have developmental disabilities, psychiatric disorders or psychological disorders? (4-18 c2);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.8d

<b>3. Transition to adult practices? (4-18 c3)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.8e

<b>Clinical Experiences: Do clinical experiences enable advanced students/residents to achieve competency in: Examination, treatment and management of infants, children, adolescents and with special health care needs? (4-19 a)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11b – 2.8a

### Hospital Dentistry

<b>Didactic Instruction: Is didactic instruction provided at the understanding level and include (4-20):</b>	
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<b>a. hospital policies and procedures? (4-20 a);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.9a

<b>b. medical/dental staff organization? (4-20 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.9b

<b>c. medical/dental staff member responsibilities? (4-20 c)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.9c

<b>Clinical Experiences: Do clinical experiences enable students/residents to acquire knowledge and skills to function as health care providers within the hospital setting? (4-21)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11b – 2.9

On Site  
Resident Clinic Log

<b>Does the program provide the following clinical experiences: (4-21)</b>	
<b>a. Dental treatment in the Operating Room Setting (4-21 a):</b>	
<b>1. Each student/resident participates in the treatment of pediatric patients under general anesthesia in the operating room? (4-21 a1);</b>	<b>YES</b>
<b>a. Each student/resident participates in a minimum of twenty (20) operating room cases; and these are documented in the RCL (Resident Clinical Log)? In ten (10) of the operating room cases above, each student/resident provides the pre-operative workup and assessment, conducting medical risk assessment, admitting procedures, informed consent, and intra-operative management including completion of the dental procedures, post-operative care, discharge and follow up and completion of the medical records? (4-21 a1a)</b>	<b>YES</b>

**Documentary Evidence:**

On Site  
OR Records and Dictation Files

<b>b. Inpatient Care (4-21 b):</b>	
<b>1. Each student/resident participates in the evaluation and medical management of pediatric patients admitted to the hospital? (4-21 b1);</b>	<b>YES</b>

Inpatient care generally includes patients in the pediatric ward. The residents regularly respond to inpatient consults for assessment and/or care. These are either treated bedside or in the ward treatment room. Others are either treated in the emergency room or, if necessary, in the ward with the equipment being transported from the operating room. Inpatients who are being admitted for dental procedures are worked up by the pediatric dental service and the pediatric service for co-admission.

**Documentary Evidence:**

Appendix R: Exhibit 9.4

On Site  
Hospital Records

<b>2. Each student/resident demonstrates understanding of admitting procedures, completing of consultation requests, obtaining and evaluating patient/family history, orofacial examination and diagnosis, ordering radiological and laboratory tests, writing patient management orders, pediatric patient monitoring, discharging and chart completion? (4-21 b2)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix R: Exhibit 9.4

On Site  
Hospital Records  
Rotations to in-patient, ER

**c. Anesthesiology Rotation (4-21 c):**

<b>1. Students/Residents complete a rotation under the supervision of an anesthesiologist in a facility approved to provide general anesthesia? (4-21 c1);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix R: Exhibit 9.1

On Site  
Rotation Schedules

<b>2. This rotation is at least four weeks in length and is the principal activity of the student/resident during this scheduled time? (4-21 c2);</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Rotation Schedules

<b>3. The anesthesiology rotation in pediatric dentistry is structured to provide the advanced specialty education student/resident with knowledge and experience in the management of infants, children and adolescents and adolescents undergoing general anesthesia? (4-21 c3);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix R: Exhibit 9.1

On Site  
Rotation Schedules

<b>4. The rotation provides and documents experiences in : (1) pre-operative evaluation, (2) risk assessment, (3) assessing the effects of pharmacologic agents, (4) venipuncture techniques, (5) airway management, (6) general anesthetic induction and intubation, (7) administration of anesthetic agents, (8) patient monitoring, (9) prevention and management of anesthetic emergencies, (10)recovery room management, and (11) postoperative appraisal and follow up? (4-21 c4)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix R: Exhibit 9.1 and 9.3

On Site  
Rotation Schedules

<b>d. Hospital experiences intended to expose students/residents to hospital function which may include attendance at conferences, seminars, clinic participation, and, if applicable, clinical inpatient rounds? (4-21 d)</b>	<b>YES</b>
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Advanced education residents in pediatric dentistry at UIC participate in a pediatric medicine rotation of at least two weeks in duration. The rotation includes general in-patient and out-patient pediatrics and subspecialty clinics.

**Documentary Evidence:**

Appendix R: Exhibit 9.2

On Site

Rotation Schedules

Faculty Evaluations

### Pulp Therapy

**Didactic Instruction: Is didactic instruction provided at the in-depth level and include (4-22):**

<b>a. Pulp histology and pathology of primary and young permanent teeth, including indications and rationale for various types of indirect and direct pulp therapy? (4-22 a);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.10a

<b>b. Management of pulpal and periradicular tissues in the primary and developing permanent dentition? (4-22 b)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines

Appendix T: Exhibit 11a - 2.10b

**Clinical Experiences: Do clinical experiences enable students/residents to achieve competency in (4-23):**

<b>a. Diagnosis of pulpal disease in primary and permanent teeth? (4-23 a);</b>	<b>YES</b>
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**Documentary Evidence:**

On Site

Resident Clinic Log

<b>b. Treatment of pulpal disease in primary teeth? (4-23 b);</b>	<b>YES</b>
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**Documentary Evidence:**

On Site

Resident Clinic Log

<b>c. Treatment of pulpal disease in immature permanent teeth? (4-23 c);</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinic Log

<b>d. Management of pulpal disease in mature permanent teeth including emergency care, stabilization and referral to specialists? (4-23 d)</b>	<b>YES</b>
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**Documentary Evidence:**

On Site  
Resident Clinic Log

### Pediatric Medicine

**Didactic Instruction: Is didactic instruction provided at the understanding level and include (4-24):**

<b>a. Normal speech and language development and the recognition of speech and language language delays/disorders; the anatomy and physiology of articulation and normal articulation development; causes of defective articulation with emphasis on oral anomalies, craniofacial anomalies, dental or occlusal abnormalities, velopharyngeal insufficiency (VPI), history of cleft lip/palate and normal velopharyngeal function and the effect of VPI on resonance? (4-24 a) and</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix T: Exhibit 11a - 2.11a

<b>b. Fundamentals of pediatric medicine including those related to pediatric patients with special health care needs such as: 1. Developmental disabilities? (4-24 b1);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.11b

<b>2. Genetic/metabolic disorders? (4-24 b2);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.11b

<b>3. Infectious disease? (4-24 b3);</b>	<b>YES</b>
<b>Documentary Evidence:</b>	
Appendix Q:	Course Outlines
Appendix T:	Exhibit 11a - 2.11b
<b>4. Sensory impairments? (4-24 b4);</b>	<b>YES</b>
<b>Documentary Evidence:</b>	
Appendix Q:	Course Outlines
Appendix T:	Exhibit 11a - 2.11b
<b>5. Chronic disease? (4-24 b5)</b>	<b>YES</b>
<b>Documentary Evidence:</b>	
Appendix Q:	Course Outlines
Appendix T:	Exhibit 11a - 2.11b
<b>Clinical Experiences: Do clinical experiences expose students/residents to pediatric medicine (4-25):</b>	<b>YES</b>
<b>a. Do advanced education students/residents in pediatric dentistry participate in a pediatric medicine rotation of at least two (2) weeks duration which is the student's/resident's principal activity during this scheduled period? (4-25 a)</b>	<b>YES</b>
<b>1. This rotation <i>may</i> occur in a variety of settings i.e., Emergency Department, subspecialty clinics, multi-disciplinary team clinics and general pediatrics.</b>	
<b>Documentary Evidence:</b>	
Appendix R: Exhibit 9.2	
<b>2. Does the rotation include exposure to obtaining and evaluating complete medical histories, parental interviews, system-oriented physical examinations, clinical assessments of healthy and ill patients, selection of laboratory tests and evaluation of data, evaluation of physical, motor and sensory development, genetic implications of childhood diseases, the use of drug therapy in the management of diseases, and parental management through discussions and explanation? (4-25 a2).</b>	<b>YES</b>
<b>Documentary Evidence:</b>	
Appendix R: Exhibit 9.2	



## Advocacy

**Didactic Instruction: Is didactic instruction provided at the understanding level and include (4-26):**

<b>a. The fundamental domains of child advocacy including knowledge about the disparities in the delivery of dental care, issues around access to dental care and possible solutions? (4-26 a);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.12a

<b>b. Federally and state funded programs like Medicaid and SCHIP that provide dental care to poor populations? (4-26 b);</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.12b

<b>c. Principles of education? (4-26 c)</b>	<b>YES</b>
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**Documentary Evidence:**

Appendix Q: Course Outlines  
Appendix T: Exhibit 11a - 2.12c

**Clinical Experiences: Do clinical experiences provide exposure of the advance education student/resident to: (4-27)**

<b>a. Communicating, teaching, and collaborating with groups and individuals on children’s oral health issues? (4-27 a);</b>	<b>YES</b>
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Residents interact with various groups during activities and events, including:

- Give Kids a Smile Day
- Special Olympics
- El Día del Niño health fair

**Documentary Evidence:**

On Site  
Schedules

<b>b. Advocating and advising public health policy legislation and regulations to protect and promote the oral health of children? (4-27 b);</b>	<b>YES</b>
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Residents have opportunities to interact with the Illinois Society of Pediatric Dentists (ISPD) at the two annual meetings. Two of the residents also serve as Student Members of the Board of Directors of ISPD.

**Documentary Evidence:**

On Site  
Schedules

<p><b>c. Participating at the local, state and national level in organized dentistry to represent the oral health needs of children, particularly the underserved? (4-27 c).</b></p>	<p><b>YES</b></p>
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Residents belong to the Illinois Society of Pediatric Dentists (ISPD) and American Academy of Pediatric Dentistry (AAPD), and interact with these groups at local and national levels.

**Documentary Evidence:**

On Site  
Schedules

<p><b>Do advanced education students/residents engage in teaching activities which may include peers, predoctoral students, community based programs and activities, and other health professionals? (4-28)</b></p>	<p><b>YES</b></p>
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Second-Year Residents engage in teaching a half-day each week in the Pre-doctoral clinic where they are paired-up with experienced faculty members who serve as mentors. They also participate in pre-clinical laboratory sessions.

**Documentary Evidence:**

On Site  
Schedules

**STANDARD 5 - ADVANCED EDUCATION STUDENTS/RESIDENTS  
ELIGIBILITY AND SELECTION**

<b>Are dentists with the following qualifications eligible to enter the advanced specialty education program accredited by the Commission on Dental Accreditation:</b>	
<b>a) Graduates from accredited U.S. and Canadian predoctoral dental education programs?, or</b>	<b>YES</b>
<b>b) Graduates from predoctoral dental education programs in international dental schools that provide equivalent educational background and standing as determined by the program?</b>	<b>NO</b>

The program only accepts applicants from ADA accredited dental schools from the U.S.A. and Canada. Applicants from other international dental schools are not considered.

<b>Are specific written criteria, policies and procedures followed when admitting students/residents? (5)</b>	<b>YES</b>
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The admissions criteria and procedures are available from the College and the American Academy of Pediatric Dentistry web site and also in the College Postgraduate Policy Manual. The program policy is to select highly motivated residents with strong academic credentials. The applicants apply through the American Association of Dental Schools (AADS) Postgraduate Application Support Services (PASS) program. All program inquiries are given the information to apply through PASS. The admissions criteria include: post academic performance, class rank, interest and motivation in pediatric dentistry, communication skills, letters of recommendation and a minimal grade point average of 3.0/4.0. Candidates must be eligible for temporary licensure in Illinois. A personal interview for invited applicants is mandatory.

The Department Admissions Committee (elected four members), the Program Director, and the Department Head review all applications, invite and conduct candidate interviews, and make recommendations for admission. The rankings are then submitted to the National Matching Program.

The Program Director is involved in all aspects of resident recruitment, communications with residents and processing agencies (AADS, UIC Offices of Admissions and Records and Graduate Medical Education, PASS/Match, the Graduate College), selection for interview, the interview process and the final ranking of the candidates.

**Documentary Evidence:**

- On Site
- Faculty Bylaws
- Evaluation / Review forms for resident selection

<b>Is the admission of students/residents with advanced standing based on the same standards of achievement required by students/residents regularly enrolled in the program? (5)</b>	<b>NA</b>
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<b>Do transfer students/residents with advanced standing receive an appropriate curriculum that results in the same standards of competence required by students/residents regularly enrolled in the program? (5)</b>	<b>NA</b>
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### Evaluation

<b>Does a system of ongoing evaluation and advancement ensure that, through the director and faculty, each program:</b>	
<b>a) Periodically, but at least semiannually, assesses the progress toward (formative assessment) and achievement of (summative assessment) the competencies for the specialty using formal evaluation methods?</b>	<b>YES</b>

Evaluation Criteria and Frequency – Resident evaluation is an ongoing process. The evaluation criteria and procedures are written and communicated with residents during orientation and reinforced periodically thereafter. Clinical evaluations are provided daily and every semester. Counseling and interventions are provided when necessary by the Program Director or appropriate faculty. Didactic and research evaluation is provided on a regular basis with grades being assigned at the end of each semester. The clinical evaluations are descriptive. A letter grade is required at the end of the semester. Clinical grades are averaged from submissions from all clinical faculty. Other resident evaluations include classroom participation, assignments, presentations, written papers, laboratory exercises and written and oral examinations. Formal evaluations for special projects including case examinations and research presentation were initiated after the last site visit. Residents receive ongoing evaluation from the faculty, Program Director and appropriate course directors.

<b>b) Provides to students/residents an assessment of their performance, at least semiannually?</b>	<b>YES</b>
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Feedback to residents – The program periodically provides the residents with an assessment of their performance. The residents receive a written evaluation from clinical faculty members as well as a final summary from the Program Director. During each semester, appropriate feedback is provided to the residents at individual meetings and includes written evaluations for their clinical performances from the Program Director and all other participating faculty. Residents receive appropriate counseling by the Program Director, if needed.

<b>c) Advances students/residents to positions of higher responsibility only on the basis of an evaluation of their readiness for advancement?</b>	<b>YES</b>
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Advancement of Residents to Positions of Higher Responsibilities – Through its evaluation process, the program permits advancement of residents to higher positions of responsibility only when they have complied with the required educational trainings have been met and residents are evaluated accordingly.

<b>d) Maintains a personal record of evaluation for each student/resident which is accessible to the student/resident and available for review during site visits? (5)</b>	<b>YES</b>
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Record Keeping – Records of residents’ evaluation and performance are kept in the Department and are accessible for review by the individual residents.

**Documentary Evidence:**

Appendix V: Student/Resident Evaluation Form

On Site

Resident evaluations

**Due Process**

<b>Are there specific written due process policies and procedures for adjudication of academic and disciplinary complaints, which parallel those established by the sponsoring institution? (5)</b>	<b>YES</b>
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The University of Illinois and College of Dentistry have formal processes for dealing with allegations related to adjudication of academic, disciplinary complaints and other issues such as discrimination of any kind. The grievance process on discriminatory issues is handled by the University Office of Access and Equity. Grievances related to academic issues, adjudication of academic and disciplinary complaints follow the College of Dentistry and the Graduate Medical Education/ University of Illinois Hospital & Health Sciences System process. Copies of these College and institution-wide policies and due process procedures, which apply to all postdoctoral programs, are given to all residents in the program.

**Documentary Evidence:**

Appendix W: Due Process Policy

## Rights and Responsibilities

<b>At the time of enrollment are the advanced specialty education students/residents apprised in writing of the educational experience to be provided, including the nature of assignments to other departments or institutions and teaching commitments? (5)</b>	<b>YES</b>
---	------------

The advanced education specialty program at UIC provides a written appraisal of residents regarding their educational experiences, including the nature of assignments to other departments and teaching commitments. The obligations and responsibilities of the residents to the institution, department, program and faculty are also provided to the students in written form. These materials are published and provided to the residents during the interview process and during GME orientation. Residents are also provided with a copy of the Commission on Accreditation Standards, program requirements, and curriculum goals and objectives.

### Documentary Evidence:

Appendix X: Written Materials Given to Residents

On Site

Orientation Materials

<b>Are all advanced specialty education students/residents provided with written information which affirms their obligations and responsibilities to the institution, the program and program faculty? (5)</b>	<b>YES</b>
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### Documentary Evidence:

Appendix X: Written Materials Given to Residents

On Site

Orientation Materials

<b>Does the program define the scope of supervision and responsibility for students/residents in the various components of their program for various stages of their education? (5-1)</b>	<b>YES</b>
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Initially all clinical procedures of the residents are reviewed and approved by faculty members. Depending upon the level of progress of residents demonstrating their competencies, they are gradually allowed to complete routine restorative procedures without having them checked. This is especially true in the second year. However, all treatment plans and daily treatment completions have to be signed off by the faculty member. At no time can the residents provide procedures without a supervising faculty member in the clinic.

### Documentary Evidence:

Appendix X: Written Materials Given to Residents

On Site

Orientation Materials

**STANDARD 6 – RESEARCH**

<b>Do advanced specialty education students/residents engage in scholarly activity?(6)</b>	<b>YES</b>
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<b>Does each advanced specialty education student/resident:</b>	
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<b>a) Participate in and complete a research project?</b>	<b>YES</b>
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All residents are required to complete a research project that includes data collection and analysis on a topic related to pediatric dentistry. The result of the research project must be submitted in a format that is readily publishable. Residents can electively be concurrently enrolled in an MS program in oral sciences or occasionally in other degree programs on campus. Residents select their own topic and mentors. The role of the Program Director and the departmental research committee is to facilitate this process. Appropriate time during daytime and after hours is provided for this effort. The research projects range from laboratory biomaterial or in vitro research to behavioral science projects and health services research.

**Documentary Evidence:**

On Site  
Residents’ Theses and Certificate Project Reports

<b>b) Uses data collection and analysis?</b>	<b>YES</b>
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All projects conducted by the residents require data collections, depending on the subject of their research, a rigorous data analysis that includes data compression, statistical data analysis, graphical display and interpretation.

**Documentary Evidence:**

On Site  
Residents’ Theses and Certificate Project Reports

<b>c) Uses elements of scientific method?</b>	<b>YES</b>
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Each research topic follows the format of a scientific investigation and includes statements of materials and methods that contain certain elements of scientific methodologies commonly used in laboratory biomaterial, in vitro research and behavioral investigations.

**Documentary Evidence:**

On Site  
Residents’ Theses and Certificate Project Reports

<b>d) Reports results in a scientific forum? (6-1)</b>	<b>YES</b>
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All residents are required to present their research at the May departmental faculty meeting. They are also required to write and submit an abstract of their research suitable for presentation at a national meeting (AAPD, AADR, etc.) and/or publication in the proceedings of the meeting.

**Documentary Evidence:**

On Site

List of Residents' Publications and Presentations at Meetings



## SUMMARY OF SELF-STUDY REPORT

**Summarize in a qualitative appraisal and analysis the program's strengths and weakness.**

Note: This summary culminates the self-study report in a qualitative appraisal and analysis of the program's strengths and weakness.

### Institution-Related

**1. Assess the adequacy of institutional support for the program.**

Institutional support for the Postdoctoral Pediatric Dentistry Program at the University of Illinois at Chicago, including basic space, staffing, equipment and supplies is adequate to fulfill the needs of the educational program for carrying out its mission and for meeting its goals and objectives. The University of Illinois Hospital & Health Sciences System (UIHHSS) provides financial support in the form of stipends, health coverage, limited CE funds, and tuition waivers for residents, as well as some equipment. The College of Dentistry's support has provided the program with the ability to maintain its current level of faculty and staff support.

**2. Assess whether the program is achieving goals through training beyond pre-doctoral level.**

The program's comprehensive outcome assessment shows that graduates of the program have significantly demonstrated acquiring proper training beyond the pre-doctoral level.

**3. Assess whether the program is achieving goals through stated competencies.**

The program ensures meeting its goals by an on-going review of didactic course completion assessments and evaluations from seminars, clinical course grades, residents' progress in research, performances on the AAPD in-service examinations, and successful achievements in ABPD board examinations.

**4. Assess whether the program is achieving goals through stated proficiencies.**

The program meets the stated proficiencies in the accreditation standards for the advanced specialty program in pediatric dentistry. These proficiencies are appropriately measured and are evident through the program's comprehensive outcome assessment process. One of the strengths of the program is access to a large and diverse pool of patients, including a large number of medically compromised patients referred to us from different sub-specialties within the Department of Pediatrics of the UIMC and other rehabilitation centers from the Chicago area.

**5. Assess whether the program is achieving goals through outcomes.**

The program has a comprehensive outcome assessment process. The achievement of the program's goals is demonstrated through several measures including exit interviews with the graduates, alumni surveys, success of the graduates as clinicians and/or academicians, and involvement of the alumni in the professional societies. The excellent record of the graduates' achievements is considered to be as one of the strengths of the program.

**6. Assess calibration among program directors and faculty in the student/resident evaluation process to ensure consistency of the evaluation process.**

Every semester, faculty meet with the Program Director to present, discuss and document their evaluation of the students. The faculty are well calibrated and there are consistency in the grades reported. The Program Director compiles the residents' performance information; and in the case of any discrepancy, pursues any necessary action to resolve such issues.

**7. Assess the program director and faculty evaluation process to ensure consistency of the evaluation process.**

The evaluation of faculty performance is achieved through the distribution of evaluation forms to the residents in each course taught with specific criteria for student evaluation followed by interviews with the Department Head. This is done annually with input from the Associate Program Director. Residents evaluate and rate each faculty member's effectiveness in regard to teaching and course content on a semester basis. The Department Head discusses the evaluation with the faculty. This has been effective in ensuring consistency in the evaluation process of the faculty.

**8. Assess the institution's policies on advanced education students/residents.**

The College of Dentistry at UIC maintains and publicizes its policies on advanced education programs through different websites. Meetings of the graduate Program Directors are regularly held and various issues of interest to the programs are discussed and evaluated. These meetings and ongoing dialogues have been effective in providing an atmosphere of collaboration between various departments and specialty programs.

**9. Assess the institution's policies on eligibility and selection.**

The admissions criteria and procedures used by the advanced education specialty program in pediatric dentistry at UIC meet the College policies on the admission of postdoctoral residents. The program policy is to select highly motivated residents with strong academic credentials. The applicants apply through the American Association of Dental Schools (AADS) Postgraduate Application Support Services (PASS) program and are selected via the MATCH program. The admission process involves a rigorous evaluation of candidate's credentials, by the Department Admissions Committee, followed by interview sessions. This process has been working well in recruiting quality residents. One of the objectives of the program is to recruit students from underrepresented minority groups. The program has been successful to meet this objective.

**10. Assess the institution's policies on due process.**

The University of Illinois and the College of Dentistry have formal processes for dealing with allegations related to adjudication of academic, disciplinary complaints and other issues such as discrimination of any kind. The grievance process on discriminatory issues is handled by the University Office of Access and Equity. Grievances related to academic issues, adjudication of academic and disciplinary complaints follow the College of Dentistry and the Graduate Medical Education/University of Illinois Hospital process. Copies of these College and institution-wide policies and due process procedures, which apply to all postdoctoral programs, are given to all residents in the program.

**11. Assess the institution's policies on student/resident rights and responsibilities.**

The advanced education specialty program at UIC provides a written appraisal of residents regarding their educational experiences, including the nature of assignments to other departments and teaching commitments. The obligations and responsibilities of the residents to the institution, department, program and faculty are also provided to the residents in written forms. These materials are published and provided to the residents during the interview process and during GME orientation. Residents are also provided with a copy of the Commission on Accreditation Standards, program requirements, and curriculum goals and objectives.

**12. Assess the adequacy and accessibility, hours of operation and scope of holdings of the sponsoring institution's library resources.**

The Health Sciences Library is located across the street and has the biomedical textbooks, journals and other resource materials pertinent to the field of pediatric dentistry practice and research. Selected journals and books are available in the departmental seminar room library. The Department of Pediatrics library is also available to our residents. The Department, College and the University are all well equipped with electronic-based information resources. Residents routinely use PubMed and other electronic search engines and indexes for information used in patient care knowledge and research. The library is open seven days per week with convenient hours.

**13. Assess the institutional oversight of the quality of training at affiliated institutions.**

Not applicable.

## Patient Care

**1. Assess the institution's/program's preparedness to manage medical emergencies.**

The program's preparedness and response to medical emergencies are excellent. Equipment and supplies for use in managing medical emergencies are readily accessible in the postdoctoral residency program clinic. In addition, the College of Dentistry has a protocol for managing medical emergencies that may occur in any of the clinics. The College code team response is generally within a few minutes and the protocol is posted in all clinics. Mock drills are conducted to train and prepare residents, faculty and staff for handling medical emergencies. All the dental assistants are BLS-trained and certified in Sedation Monitoring. All the residents and the faculty involved with supervision of sedation cases are all PALS certified.

**2. Assess the adequacy of radiographic services and protection for patients, advanced education students/residents and staff.**

The radiographic services and protection provided for patients, residents and staff are adequate. The Department of Pediatric Dentistry at UIC adheres to institution-wide policies and protocols concerning radiation safety and follows all applicable regulations by local, state and federal agencies regarding radiation hygiene and protection, ionizing radiation, hazardous materials. The radiographic rooms are lead lined and approved by the State and Campus Radiation Safety Office. Each of the rooms is equipped with lead shields and routinely inspected. The residents and staff are provided with radiation monitoring badges which are monitored monthly.

**3. Assess the program's capacity for four-handed dentistry.**

There are ten fulltime chairside dental assistants assigned to the fifteen postdoctoral residents. However, not all the fifteen residents are scheduled to be in the clinic at the same time. When the pre-doctoral clinic is not in session the dental assistants from that area are moved to the graduate clinic. Therefore, the services of the dental assistant staff are adequate. The dental assistants are trained to assist in operating room cases, moderate sedation cases, surgical procedures and behavior management situations. They are all BLS trained; most of them are certified in N2O monitoring, and all of them are certified in sedation monitoring.

**4. Assess the institution's policies and procedures on hazardous materials, and bloodborne and infectious diseases for patients, advanced education students/residents and staff.**

The institution maintains an excellent policies and procedures on hazardous materials, and blood borne and infectious diseases for patients, residents and staff. The department complies fully with these policies. The Departmental and College procedures on handling hazardous materials are clearly articulated and in-service training is provided to new residents and faculty/staff hires. Pregnant employees are especially sheltered. Faculty, staff and residents are required to complete on-line OSHA training sessions and are expected to comply with all applicable safety guidelines.

The departmental policies on blood borne and infectious diseases include: (a) initial orientation in-service training of residents and faculty/staff hires by the College Infection Control Director; (b) completion of an annual on-line training session by faculty, staff and residents; and (c) regular monitoring of infection control policies by Departmental faculty and dental assistants.

**5. Assess how students/residents may be able to apply ethical, legal and regulatory concepts in the provision, prevention and/or support of oral health care.**

Ethical, legal and regulatory concepts are discussed in seminar settings and several courses and reinforced through clinical experiences routinely. In addition, residents are required to complete an on-line ethics and a separate HIPPA training course on an annual basis. These training sessions, course discussions and seminars are adequate to expose residents with ethical, legal and regulatory concepts and protocols related to pediatric oral health care.

## Program-Related

**1. Assess the student's/resident's time distribution among each program activity (e.g., didactic, clinical, teaching, research) and how well it is working**

Residents' time distribution among didactic, clinical, teaching and research activities is well balanced in the program. The scheduling of formal courses and residents' rotational assignments is made in such way as to not interfere with their clinical activities. Although residents' schedule for their didactic, clinical, teaching and research is fully loaded, they are able to finish all program requirements (including certificate research project reports) within the 24-month of the program duration.

**2. Assess the volume and variety of the program's patient pool.**

The patient pool for all aspects of the program is excellent. The University of Illinois Hospital & Health Sciences System is well recognized as a tertiary care center and has a large pool of patients seeking care. In addition to a large number of walk-ins, we receive many referrals from the various general and subspecialty clinics in pediatrics, craniofacial center, Children Habilitation Center and Chicago Health Clinics, State and governmental agencies. These referrals provide a more than

adequate patient pool (healthy as well as those with special health care needs) to meet the educational needs of our residents.

**3. Assess the program's student/resident/faculty ratio.**

The program has 15 residents and 6.7 FTE faculty. The resident faculty ratio is considered to be more than adequate. Each half day, up to three faculty members are assigned to the clinic. In addition to their teaching and scholarly activities, all faculty are skilled pediatric dentists and are active in patient care.

**4. Assess the program's student/resident pool.**

The program receives a large pool of domestic applicants. For the most recent Match, there were 219 applicants and 43 interviewed for six (and then expanded to nine) slots. This is an excellent pool of quality applicants for the program.

**5. Assess rotations, electives and extramural experiences of the program.**

Our rotations and extramural experiences are excellent. The program maintains an excellent relationship with all sub-specialties of the Children's Hospital University of Illinois. Our residents have opportunities to work with medical residents in all different aspects of their rotational experiences. Elective courses are available and are taken by residents based on their research interests. These courses are usually offered in the evening after the clinic hours or online.

**6. Assess the program's record keeping and retention practices.**

Clinical and academic records are kept according to University of Illinois policies and State's regulations. All records are now in digital format. The record keeping process is considered to be excellent.

**7. Assess the research activities of the program.**

All residents complete a research project that are topics related to pediatric dentistry. The results of the research project are submitted in a format that is readily publishable. Residents can electively be concurrently enrolled in an MS program in oral sciences or occasionally in other degree programs on campus. The research projects range from laboratory biomaterial or in vitro research to behavioral science projects and health services research. The research activities of our residents are considered adequate. They publish and/or present their research in national conferences.

## *Vision Statement*

The University of Illinois at Chicago, College of Dentistry will be recognized as a leader in:

- patient-centered, evidence-based, technically enhanced clinical care founded on the preventive and public health sciences,
- integrated educational programs based upon contemporary pedagogy and technology, and
- centers of research excellence that are interdisciplinary, use innovative methodology and focus on relevant health and healthcare issues.

## *Mission Statement*

The mission of the University of Illinois at Chicago, College of Dentistry is to promote optimum oral and general health to the people of the State of Illinois through excellence in education, patient care, research, and service.

*The College identifies the following Institutional Goals to meet this mission:*

- To provide patient-centered care that is evidence-based, comprehensive and compassionate for a culturally diverse population;
- To provide student-oriented educational programs that prepare learners to engage in the evidence supported, thoughtful, ethical practice of dentistry;
- To prepare highly qualified oral healthcare professionals, educators, and scientists in the oral health and basic sciences;
- To address health care needs through community-based initiatives, educational programs, and consultative services;
- To value and seek diversity in students, staff, faculty, and patients;
- To provide an environment for individual growth founded on mutual respect and professionalism;
- To foster collaborative research and develop specialized centers for innovative research in areas of health and disease;
- To maintain a leadership role in forming health care policy at the university, state, and national levels;
- To be a resource for continued professional development;

## **Appendix A**

Educational mission and program's goals and objectives

**MISSION:** The mission of the Postdoctoral Program in Pediatric Dentistry at UIC, College of Dentistry is the preparation of specialists, who are committed to the prevention of oral disease and the improvement and maintenance of the oral health of infants, children, adolescents and persons with special health care needs.

### **PROGRAM GOALS AND OBJECTIVES**

The goals of the advanced specialty program in pediatric dentistry at University of Illinois at Chicago are:

1. To produce graduates with knowledge, skills, and critical judgment required to practice and teach the specialty of pediatric dentistry.
2. To select and admit highly qualified students with diverse backgrounds including a certain percentage from the underrepresented minority groups.
3. To foster in the graduates an appreciation for continuous learning, scholarship, service to the profession and community and ability to conduct quality research in areas related to pediatric dentistry.

## Appendix B

### Program’s outcome assessment plan, outcomes measurements and outcomes assessment results

The program’s outcome assessment plan includes compiling data from several sources using the following instruments:

- Alumni survey
- Graduates’ exit questionnaire and interview
- Patients’ records
- Applications and admissions records
- Students’ publications and meeting presentations record

The objectives within each of the program’s goal, the outcome/assessment measures and the outcome/assessment data are provided in the following tables.

#### Goals, Objectives and Outcome/Assessment Data Advanced Education Program in Pediatric Dentistry UIC/College of Dentistry 2008-2012

**Goal 1:** To produce graduates with knowledge, and skills required to practice and teach the specialty of pediatric dentistry.

**Objective 1.a:** 100% of the graduates will engage in specialty practice of pediatric dentistry.

**1.b:** 25% of the graduates will engage in teaching pediatric dentistry

Outcome/Assessment Measures: Number and percentage of graduates

Source: Alumni outcome data

Academic Year	No. of Students in Program	No. & % of Students in Practice		No. & % of Students in Teaching	
	N	N	%	N	%
2008	6	6	100	1	16%
2009	6	6	100	1	16%
2010	6	6	100	1	16%
2011	6	6	100	3	50%
2012	6	6	100	2	33%
5 Years	30	29	100	8	28%

Assessment: The objectives have been met  
 Recommendation: None  
 Suggestions: None



Goals, Objectives and Outcome/Assessment Data  
 Advanced Education Program in Pediatric Dentistry  
 UIC/College of Dentistry  
 2008-2012

**Objective 1.c:** 50% of the graduates will be board eligible or will complete the American Board of Pediatric Dentistry in 5 years following graduation.

**1.d:** 100% of the graduates planning to practice in Illinois will complete the Illinois Specialty Boards in Pediatric Dentistry.

Outcome/Assessment Measures: Number and percentage of graduates

Source: Alumni outcome data

Academic Year	No. of Students in Program	Illinois Specialty Board Completed		ABPD Completed		Board Eligible and Expected to Complete
	N	N	%	Part I	Part II	
2008	6	1/1	100	3	3	2013
2009	6	1/1	100	5	4	2014
2010	6	2/2	100	5	5	2015
2011	6	1/1	100	5	4	2016
2012	6	2/2	100	6	0	2017
5 Years						

Assessment: The objectives have been met  
 Recommendation: None  
 Suggestions: None

Goals, Objectives and Outcome/Assessment Data  
 Advanced Education Program in Pediatric Dentistry  
 UIC/College of Dentistry  
 2008-2012

**Objective 1.e:** 90% of the graduates will rate the overall program as good to excellent.

Outcome/Assessment Measures: Number of graduates

Source: Graduates exit interview data and Alumni outcome data

Academic Year	Overall Evaluation of Program	
	Exit Interview Good to Excellent	Five Year Evaluation Good to Excellent
2008	100	100
2009	100	100
2010	100	100
2011	100	100
2012	100	100
5 Years	100	100

Assessment: The objective has been met  
 Recommendation: None  
 Suggestions: None

Goals, Objectives and Outcome/Assessment Data  
 Advanced Education Program in Pediatric Dentistry  
 UIC/College of Dentistry  
 2008-2012

**Objective 1.f:** Students will demonstrate proficiency during the training program.

Outcome/Assessment Measures: Completed cases and assignments

Source: Review of students' clinical accomplishments

Academic Year	Satisfactory Completion of Cases based on Chart Review and QA Data*	Assignments Completed**
	%	%
2008	100	100
2009	100	100
2010	100	100
2011	100	100
2012	100	100
5 Years	100	100

Assessment: The objective has been met

Recommendation: None

Suggestions: None

\* Examples include quality assurance data based on treatment of comprehensive pediatric cases in the areas of early childhood caries, interceptive or preventive orthodontics, patients with special needs and medically compromised conditions (files are available in the Department).

\*\* Assignments include preparation and presentation of at least two cases based on ABPD criteria, preparation and presentation of cases for combined pedo-ortho seminars, hospital dentistry course seminar and diagnosis and treatment planning seminars (files are available in the Department).

Goals, Objectives and Outcome/Assessment Data  
Advanced Education Program in Pediatric Dentistry  
UIC/College of Dentistry  
2006-2014

**Goal 2:** To select and admit highly qualified students with diverse backgrounds including a certain percentage from the underrepresented minority groups.

**Objective 2.a:** The qualifications of the students will exceed the admission standards of the College of Dentistry Advanced Education Program and the Graduate College

Outcome/Assessment Measures: Number of applicants and admitted students

Source: Application and admission data

Year	Applications N=	Candidates Matriculated	Institutions	Class Rank	Average GPA	Average Board Scores
2006-08		Delaughter, Latoya Hylton, Joseph Jackson, Brandi Koh, Joyce Kimathi, Travis Yun, Sabina	Meharry Medical College Baltimore College Univ of North Carolina Univ of Michigan Univ of Nebraska Northwestern Univ	23/47 25/103 NR 23/106 38/43 28/54	3.26	85
2007-09		Goldman, Scott Hacek, Toni Howard, Jaha McCarthy, Jamie Patenio, Melissa Testa, Rebecca	U of Illinois at Chicago U of Connecticut Howard University U of Illinois at Chicago U of Illinois at Chicago U of Illinois at Chicago	29/62 NR 14/69 16/60 22/60 7/60	3.36	84
2008-10		Ariaban, Nanna Bo Davidson Dhaliwal Manjote McMahon, Allison Pandya, Mitra Vakil, Shamik	U of Pennsylvania U of Washington New York Univ. U of Illinois at Chicago U of Pittsburg U of North Carolina	NR 23/53 NR 7/69 32/85 NR	3.48	87
2009-11		Briney, Lynse Caballero, Jane Francois, Ryan Gupta, Sabina Ortega, Rosa Pham, Mary	U of Illinois at Chicago U of South Carolina U of the Pacific Medical College of Georgia U of Illinois at Chicago USC	4/68 NR 27-137 NR 39/66 NR	3.52	85
2010-12		Claman, Daniel Donohue, Eryn Facko, Richard Patel, Nira Reyes deLobos, Maribel Rudgers Croft, Julie	The Ohio State U of Illinois at Chicago U of Illinois at Chicago The Ohio State U of Illinois at Chicago U of Illinois at Chicago	15/99 NR 38/66 6/102 35/64 NR	3.70	85

2011-13		Bhole, Neena Day, Amanda Lefere, Agata Maniakouras, Denise Pham, Elizabeth Welke, Justin	Medical College of Georgia U. of Tennessee U. of Pennsylvania U of Illinois at Chicago U. of Alabama U of Illinois at Chicago	27/63 NR NR 17/65 30/54 14/65	3.69	85
2012-14	219	Davis, Dustin Gray, Jillian Khan, Zameer Popejoy, Ashley Singh, Amarjot Whittington, Patrick	Virginia Commonwealth The Ohio State U of Illinois at Chicago U of Missouri-KC Howard University Baylor	59/101 12/104 NR 23/98 15/80 2/98	3.69	87

NR = Not Reported

Assessment: The objective has been met

Recommendation: None

Suggestions: None

Goals, Objectives and Outcome/Assessment Data  
 Advanced Education Program in Pediatric Dentistry  
 UIC/College of Dentistry  
 2008-2012

**Objective 2.b:** On the average, 20% or more of matriculated candidates are from underrepresented minority groups

Outcome/Assessment Measures: Number of admitted students

Source: Admission data

Year	No. of Matriculated Candidates	No. of Underrepresent	% of Underrepresented Minorities
2006-08	6	3	50%
2007-09	6	1	16%
2008-10	6	0	0%
2009-11	6	2	33%
2010-12	6	1	16%
2011-13	6	0	0%
2012-14	6	0	0%
Average		7	16%

Assessment: The objective has not been met  
 Recommendation: None  
 Suggestions: None

Goals, Objectives and Outcome/Assessment Data Advanced Education  
Program in Pediatric Dentistry UIC/College of Dentistry  
2008-2012

**Goal 3:** To foster in the graduates an appreciation for continuous learning, scholarship, service to the profession and community and ability to conduct quality research in areas related to pediatric dentistry.

**Objective 3.a:** 100% of students will make a scholarly presentation at the AAPD meeting

**Objective 3.b:** 80% of the graduate student research will be presented at one or more national meetings within 5 years of graduation.

**Objective 3.c:** 90% of the graduates will become members of the AAPD

Outcome/Assessment Measures: Number of students and number of publications

Source: Alumni outcome data and publication data

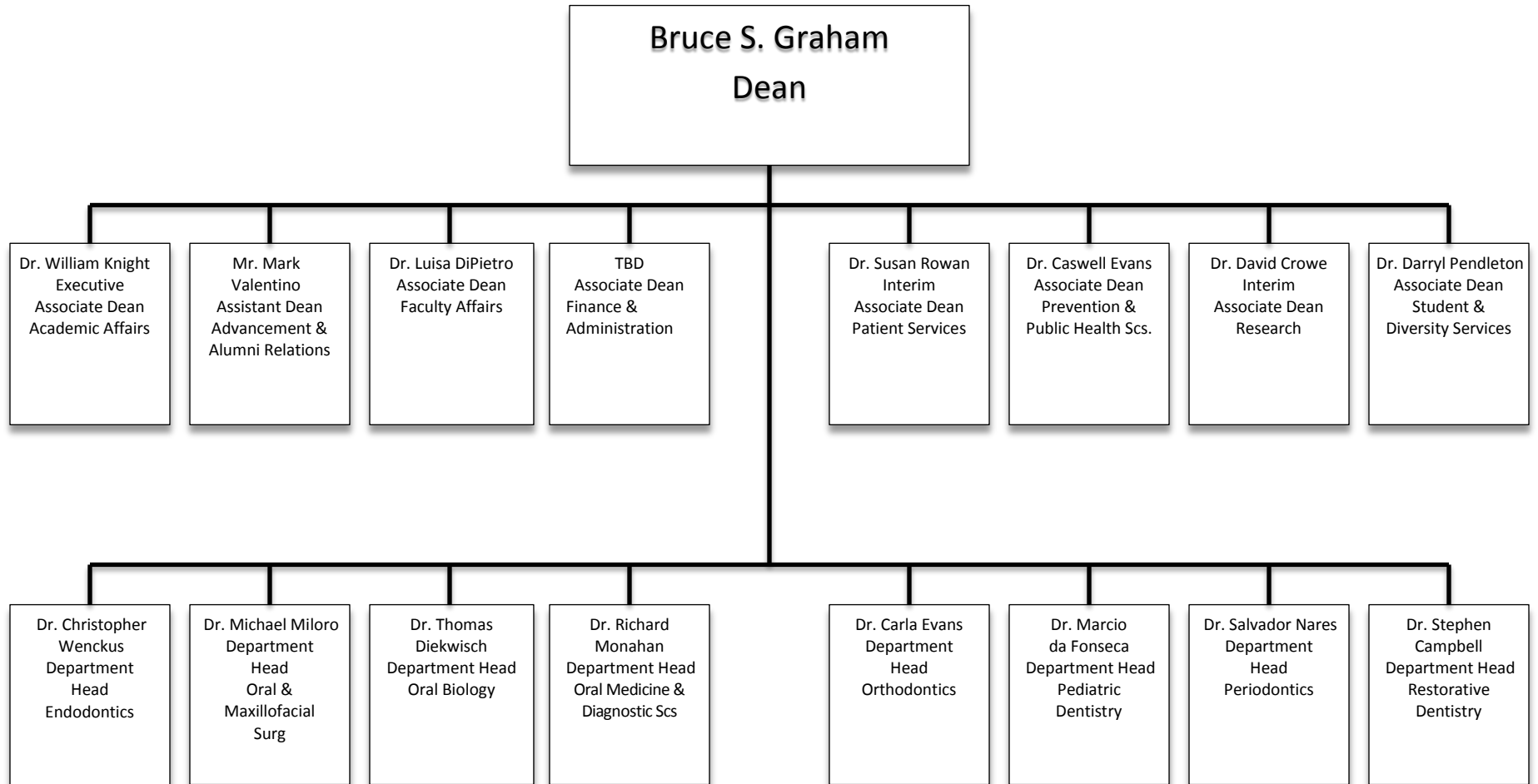
Year	No. of Students	Scholarly Presentation within COD and at Professional/Scientific Meetings						Acceptance of Certificate/MS Thesis	Publication of Abstract/Papers in Scientific & Professional Journals	Membership in AAPD
		COD Pres.		Schol. Pres.		Res. Pres.				
		N	%	N	%	N	%			
2008	6	6		6		6		6		6
2009	6	6		6		6		6		6
2010	6	6		6		6		6		6
2011	6	6		6		6		6		6
2012	6	6		6		6		6		6
		100%		100%		100%		100%		100%

Assessment: The objectives have been met

Recommendation: None

Suggestions: None

## Organizational Chart



1

Appendix C



## Appendix D

Success rate of Graduates on Board examinations for the last 5 years

Academic Year	No. of Students in Program	Illinois Specialty Board Completed		ABPD Completed		Board Eligible and Expected to Complete
	N	N	%	Part I	Part II	
2008	6	1/1	100	3	3	2013
2009	6	1/1	100	5	4	2014
2010	6	2/2	100	5	5	2015
2011	6	1/1	100	5	4	2016
2012	6	2/2	100	6	0	2017
5 Years	30	7/7	100	18	16	

## Appendix G

### Exhibit 2

#### PROGRAM DIRECTOR

Please complete the following chart for all programs being reviewed at this time.

Name of Program	Director's First Initial and Last Name	Board Certified or previously served as Program Director and Year Appointed	Year Appointed to Position	Number of Hrs/wk at Sponsoring Institution – Breakdown time into following categories: <ul style="list-style-type: none"> <li>• administration</li> <li>• teaching</li> <li>• research</li> <li>• other</li> </ul>	Number of Hrs/wk Devoted to Program
Post-doctoral Residency Program in Pediatric Dentistry	I.Punwani	Board Certified	2007-2013	<ul style="list-style-type: none"> <li>• <b>administration: 30%</b></li> <li>• <b>teaching: 40%</b></li> <li>• <b>research: 20%</b></li> <li>• <b>other: 10%</b></li> </ul>	32 Hours per week
	M da Fonseca	Board Certified	2013	<ul style="list-style-type: none"> <li>• <b>administration: 30%</b></li> <li>• <b>teaching: 40%</b></li> <li>• <b>research: 20%</b></li> <li>• <b>other: 10%</b></li> </ul>	32 Hours per week

## Appendix H

### Exhibit 3.1

#### TEACHING STAFF

Name	Discipline/ Specialty	Board Status	<u>Hours</u> per week	<u>Weeks</u> per year	Assignments*
Dr. Indru Punwani	Pediatric Dentistry	Board Certified	40	52	SC, T, PA
Dr. Marcio Da Fonseca	Pediatric Dentistry	Board Certified	40	52	SC, T, PA
Dr. Rodney Vergotine	Pediatric Dentistry	Board Certified	32	52	SC, T, PA
Dr. Sahar Alrayyes	Pediatric Dentistry	Board Certified	32	52	SC, T, PA
Dr. Sharbanoo Fadavi	Pediatric Dentistry	Board Certified	32	52	SC, T
Dr. Lance Lambert	Pediatric Dentistry	Board Certified	12	52	SC, T
Dr. Irwin Seidman	Pediatric Dentistry	Board Certified	8	52	SC, T
Dr. Kapil Vij	Pediatric Dentistry/ Orthodontics	Board Certified	4	52	SC, T
Dr. Marilia Montero	Pediatric Dentistry	Board Certified	8	52	SC, (T.ended 8/15/2012)
Dr. Claire Garcia	Pediatric Dentistry	Board Certified	4	52	SC
Dr. Flavia Lamberghini	Pediatric Dentistry	Board Certified	4	52	SC
Dr. Nicola Hill-Cordell	Pediatric Dentistry	Board Certified	4	52	SC
Dr. Adriene Barnes	Pediatric Dentistry	Board Eligible	4	52	SC
Dr. Generand Algenio	Pediatric Dentistry	Board Certified	4	52	SC
Dr. Jin Moon Soh	Pediatric Dentistry	None	8	52	SC
Dr. Ricardo Mendoza	Pediatric Dentistry	Board Eligible	8	52	SC (on leave of absence)

## Appendix H

### Exhibit 3.2

#### TEACHING STAFF

Name	Discipline/ Specialty	Board Status (If Specialist)	<u>Days</u> per month	<u>Weeks</u> per year	Assignments*
Dr. Fred Margolis	Pediatric Dentistry	None	2	5	SC, T
Dr. Peter Noronha	Physician	N/A	4	8	T
Dr. Anne Koerber	General Dentist/psy chologist	N/A	4	52	PA, T
Dr. Chuck Lehew	Research Scientist	N/A	4	52	T

\*Use the following codes to indicate assignments:

SC—Supervision of students/residents in clinic

T—Teaching Didactic Sessions (lectures, seminars, courses)

PA—Program Administration

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Marcio A. da Fonseca

**Current**

**Institution:** University of Illinois at Chicago College of Dentistry

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Universidade Federal de Juiz de Fora, Minas Gerais, Brazil	1987	DDS	Dentistry

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Illinois Board of Dentistry	2013	2016
Washington Board of Dentistry	2010	2013
Ohio Board of Dentistry	2010	2005
Michigan Board of Dentistry	1997	2005
California Board of Dentistry	1995	1997

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Pediatric Dentistry	10/2004

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois at Chicago College of Dentistry	Associate Professor	Chair, Dept. of Pediatric Dentistry	2013	currently
University of Washington	Professor	Graduate Program Director, Dept of Pediatric Dentistry	2010	2013
The Ohio State University	Professor	Director, Inpatient Dental Care	2005	2010
University of Michigan	Assoc. Prof.	Head, Hospital Pediatric Dentistry	1997	2005
University of California, San Francisco	Assist. Prof.	Director, Pre-Doctoral Pediatric Dentistry	1995	1997

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**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
University of Illinois at Chicago	None at this point	none	Didactic	Clinic/Laboratory

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
Seattle Children's	Seattle	WA	2010	2013
Nationwide Children's Hospital	Columbus	OH	2005	2010
University of Michigan Hospitals	Ann Arbor	MI	1997	2005

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Academy of Pediatric Dentistry	Associate Editor, Journal of Dentistry for Children	2012	2015
American Board of Pediatric Dentistry	Examiner	2008	current

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
da Fonseca MA, Nelson TM	General Anesthesia in Pediatric Dentistry	Behavior Management in Dentistry for Children. GZ Wright, A Kupietzky, Eds. 2 <sup>nd</sup> ed. Hoboken: John Wiley and Sons, Inc.	2013
da Fonseca MA	Oral and Dental Care of Local and Systemic Diseases	Pediatric Dentistry – Infancy through Adolescence. PS Casamassimo, DJ McTigue, HW Fields, AJ Nowak, Eds. 5 <sup>th</sup> ed. Philadelphia: Elsevier Saunders Co.	2013
Moursi AM, da Fonseca MA, Truesdale A, Eds.	Clinical Cases in Pediatric Dentistry (book)	West Sussex, UK: Wiley-Blackwell	2012
da Fonseca MA	The effects of poverty on children's development and oral health	Pediatr Dent 34:32-8	2012
da Fonseca MA	Osteoporosis – an increasing	Pediatr Dent 33:241-5	2011

	concern in pediatric dentistry		
da Fonseca MA, Casamassimo P	Old drugs, new uses	Pediatr Dent 33:67-74	2011

## Commission on Dental Accreditation BioSketch

**Name:** Indru C. Punwani

**Current**

**Institution:** University of Illinois at Chicago

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
University of Bombay, Bombay, India	1957	Certificate	Pre-Dentistry
University of Bombay, Bombay, India	1961	DDS	Dentistry
Guggenheim Fellow, New York, NY	1963	Certificate	Pedodontics
Children's Hospital of Pittsburgh, Pittsburgh, PA	1964	Certificate	Pedodontics
University of Pittsburgh, Pittsburgh, PA	1966	Certificate	Pedodontics
University of Pittsburgh, Pittsburgh, PA	1968	MSD	Pedodontics
University of Bergen, Bergen, Norway	1970	DDS	Dentistry

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
State of Illinois – Licensed Dentist	1975	9/30/2015
State of Illinois –Specialist in Pedodontics	1990	9/30/2015
State of Illinois – Dental Sedation	1990	9/30/2015
State of Illinois –Controlled Substance	1990	9/30/2015
Federal DEA	1990	3/31/2016

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
Illinois Dept. of Financial & Professional Regulation	Specialist in Pediatric Dentistry	1990
American Board of Pediatric Dentistry	Pediatric Dentistry	03/1990

### TEACHING APPOINTMENTS (Begin with current) (ACADEMIC & ADMINISTRATIVE APPOINTMENTS)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
Univ. of Illinois, Chicago, IL	Professor	Honors College	2006	Present
College of Dentistry, UIC, Chicago, IL	Professor and Dept. Head	College of Dentistry, Dept. of Pediatric Dentistry - Acting Head 1981-82	Dept Head 1982-2012;	Interim Head 6/30/12-7/15/13



College of Dentistry, UIC, Chicago, IL	Professor	College of Dentistry, Dept. of Pediatric Dentistry	1977	1981
College of Dentistry, UIC, Chicago, IL	Associate Professor	College of Dentistry, Dept. of Pediatric Dentistry	1974	1977
College of Dentistry, UIC, Chicago, IL	Assistant Professor	College of Dentistry, Dept. of Pedodontics	1972	1974
College of Dentistry, UIC, Chicago, IL	Program Director	Post-Graduate Residency Program, College of Dentistry, Dept. of Pediatric Dentistry (Terms: 1972-83; 1986-99; 2007-Present)	1972	Present
UIC Hospital & Health Sciences System, Chicago, IL	Head	UI Hospital Department of Dentistry	1999	Present
UIC Hospital & Health Sciences System, Chicago, IL	Chief	UI Hospital Dental Service	1999	Present
UIC Hospital & Health Sciences System, Chicago, IL	Head	UI Hospital Dept. of Pediatric Dentistry	1982	2013
UIC Hospital & Health Sciences System, Chicago, IL	Chief	UI Hospital, Pediatric Dentistry Division	1972	Present
UIC Hospital & Health Sciences System, Chicago, IL	Alternate Graduate Program Director	Oral Sciences	1995	2002
Michael Reese Medical Center, Chicago, IL	Chief	Department of Pediatric Dentistry	1989	1995
University of Bergen, Norway	Assistant Professor	Department of Pedodontics	1969	1972
University of Bergen, Norway	Instructor	Department of Pedodontics	1968	1969
University of Pittsburgh (50%), Children's Hospital of Pittsburgh (50%), Pennsylvania	Instructor	Department of Pedodontics	1966	1968
University of Pittsburgh, Pennsylvania	Clinical Instructor	Department of Pedodontics	1964	1966

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
College of Dentistry, UIC, Chicago, IL	Seminar Lectures	Post-Graduate Residents		varied

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
Univ of IL Hospital & Health Sciences System	Chicago	IL	1972	Present
Michael Reese Medical Center	Chicago	IL	1989	1995

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**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Academy of Pediatrics			
American Academy of Pediatric Dentistry	Fellow; Committee on Hospital Affairs (1979-84); Co-Chair (1984); Committee on Hospital Guidelines (1979); Committee on Scientific Affairs (1998 - 2003) – Consultant (2004); Subcommittee, Graduate Student Research Awards – Chair (1997- 2002); Research Committee Consultant (1996 - 1998); North Central Society of Pediatric Dentistry, District IV – President (2004), Vice President (2003), Secretary/Treasurer (2002), Spokesperson; AAPD Annual Meeting, Local Arrangements Committee for Chicago – Co-Chair (2010); Scientific Program Committee (2008 - Present)	1979	Present
American Board of Pediatric Dentistry	Advisory Committee (1998 - 2002); Consultant (1993 - 1996)	1993	2002
American College of Dentists	Fellow		
American Association of Dental Research			
American Association of Dental Research (Chicago section)			
American Association of Dental Schools	Pedodontic Section, Committee on Predoctoral; Pedodontic Education – Co-Chair (1979)	1979	
American Dental Association Commission on Dental Accreditation	Pediatric Dentistry – Consultant (1999 – 2006; 2011 - Present); Review Committee (2002 - 2006); Council on Hospital and Institutional Dental Services – AAPD Representative (1978 - 1982)	1978	Present
American Dental Education Association	Council on Hospital and Postdoctoral Affairs – Delegate (2005 - Present)	2005	Present
American Society of Dentistry for Children	Education Policy Committee	1981	1981
Center for Disease Control and Prevention	Oral Health Center Network, Strategic Planning Committee (1998 -2000)	1998	2000
Chicago Dental Society	Fellow Member; Midwinter Meeting Program – Consultant (1977); Selected Programs – Chair (1980 - 86, 1989, 1991, 1993, 1995, 1997, 1998, 1999)	1977	Present
Chicago Dept. of Public Health	Oral Health Task Force	2000	2004
Chicago Dept. of Health & Human Services	Head Start Program – Dental Consultant	2002	Present
Children and Youth 2000	Executive Committee	1997	1997
College of Diplomates, American Board of Pediatric Dentistry	Board of Directors (1998 - 2000), Vice President, President Elect, President, Immediate Past President (2001 - 2005)	1998	Present
Computerized Test Bank		1980	1980

Committee on Institutional Cooperation (CIC) Big Ten Universities	Fellow		
European Academy of Pediatric Dentistry			
Fédération Dentaire Internationale		1997	
Federation of Special Patient Care Organization			
Golden Key National Honor Society	Honorary Member	1995	Present
University of Illinois at Chicago Honors College	Fellow	1990	Present
Illinois Chapter, American Academy of Pediatrics			
Illinois Children's Healthcare Foundation	Advisory Committee	2007	
Illinois Department of Financial & Professional Regulation (State of Illinois)	Ad Hoc Consultant		
Illinois Department of Public Aid	Pediatric Oral Health Care, Chicago – Chair (1996); Ad Hoc Committee	1996	
Illinois Department of Public Health	Dental Care for Children (1977 - 1978); Taskforce for Baby Bottle Tooth Decay (1995 - 1997)	1977	1997
Illinois Society of Dentistry for Children	Executive Council, all offices (1978 – 1981); President (1981)	1978	1981
Illinois Society of Pediatric Dentists (ISPD)	Executive Director (2001 - Present), Board of Directors (1994 - 1996); Editor (1995 - 98), President-Elect (1996 -1997), President (1997 - 1998), Immediate Past President (1998 - 1999); Liaison with AAPD (1998 - 2000)	1994	Present
Illinois State Dental Society	PANDA Committee; Liaison with ISPD; Illinois State Dental Society – Sedation Committee (1996 – 1998; 2006 - present)	1996	Present
Indian Dental Association of Illinois			
International Academy of Pediatric Dentistry			
International Association of Dental Research (IADR)	President, Pediatric Oral Health Research Group (2013-2014)		
International College of Dentists	Fellow		
Odontographic Society of Chicago, Associate Institute of Medicine	Fellow		
Omicron Kappa Upsilon (Sigma Chapter)	President (2000), President Elect (1999); Vice President (1998), Secretary-Treasurer (1997)	1997	Present
Omicron Kappa Upsilon (Supreme Chapter)	President (2003), President-Elect (2002), Vice President (2001)	2001	Present
Sigma Xi			
Society of Medical History of Chicago			

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
Punwani, I.	Pharmacologic Management of the Anxious Child in a Dental Setting	Odontologia Pediatrica. Bordoni, Escobar Rojas, Castillo Mercado, eds. Editorial Medica. Panamericana Publishing, Buenos Aires, Argentina (Spanish language)	Feb. 10, 2010
(other articles not within 5 years)			

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Generand C. Algenio

**Current**

**Institution:** University of Illinois-Chicago

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
University of Michigan	1994	BS	Psychology
Northwestern University	1998	DDS	Dentistry
University of Iowa	2001	MS	Pediatric Dentistry/Dental Public Health

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Dentist	1998	Present

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Pediatric Dentistry	9/24/09

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois-Chicago, IL	Assistant Clinical Professor	Pediatric Dentistry	2013	present

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
University of Illinois-Chicago, IL	Pediatric Pre-clinical Laboratory	Undergraduate Dental-2 <sup>nd</sup> year		30

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**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
Chicago Dental Society	Member, Various Committee Memberships	2001	Present
Illinois Society of Pediatric Dentistry	Board Member	2013	2016
International College of Dentists	Fellow	2013	Present

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Sahar Alrayyes

**Current**

**Institution:** University of Illinois at Chicago, College of Dentistry

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Northeastern University, Boston, Massachusetts	1994	Bachelor of Science in Biology	Biology
Northwestern University Dental School, Chicago, Illinois	1998	DDS	Doctor of Dental Surgery
University of Illinois at Chicago, Chicago, Illinois	2002	MS	Masters Degree in Oral Science
University of Illinois at Chicago, Chicago, Illinois	2002	Certificate	Pediatric Dentistry Residency

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Drug Enforcement Agency registration	1998	2013
Illinois Dental License	1998	2013
Illinois Pediatric Dentistry Specialty License	2002	2013
Illinois Controlled Substance Registration	2002	2013
Pediatric Advanced Life Support	2000	2015
Basic Life Support	2000	2014
Jordan Dental License	2005	2013

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
Northeast Regional Board in Dentistry	General Dentistry	1998
American Board of Pediatric Dentistry, Diplomate	Pediatric Dentistry	2006

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
College of Dentistry, UIC, Chicago, IL	Clinical Assistant Professor	Clinic Director, Department of Pediatric Dentistry	2012	2013
College of Dentistry, UIC, Chicago, IL	Clinical Assistant Professor	Diagnosis and treatment planning, Post-doctoral, Pediatric Dentistry	2012	2013
College of Dentistry, UIC, Chicago, IL	Assistant Professor	Clinic Director, Pre-doctoral pediatric clinic, Department of Pediatric Dentistry.	2007	2012

College of Dentistry, UIC, Chicago, IL	Assistant Professor	Special Patient Care, Pre-doctoral, Pediatric Dentistry	2007	2013
College of Dentistry, UIC, Chicago, IL	Assistant Professor	Patient Care Quality Assurance, Pediatric Dentistry	2006	2013
College of Dentistry, UIC, Chicago, IL	Assistant Professor	Caries risk assessment, anticipatory guidance and Infant Oral Health, Pre-doctoral, pediatric dentistry	2008	2013

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
College of Dentistry, UIC, Chicago, IL	Diagnosis and treatment planning	Pediatric dentistry post graduate residents (PGY1)	52	
College of Dentistry, UIC, Chicago, IL	Pediatric dentistry clinic	Pediatric dentistry post graduate residents (PGY1 and 2)		1000
College of Dentistry, UIC, Chicago, IL	Pediatric dentistry clinic	Pediatric Dentistry, Predoctoral dental students (D3)		200
College of Dentistry, UIC, Chicago, IL	Pediatric dentistry clinic	Honors Pediatric Dentistry, Predoctoral dental students (D4)	52	200
College of Dentistry, UIC, Chicago, IL	Infant Clinic	Infant rotation, Pediatric Dentistry, Predoctoral dental students (D2)	52	

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
University of Illinois at Chicago Medical Center	Chicago	IL	2007	2013

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Dental Education Association (ADEA), Pediatric Dentistry Section	Chair	2013	2014
Illinois Society of Pediatric Dentists	President	2012	2013
American Dental Education Association (ADEA), Pediatric Dentistry Section	Chair-Elect	2012	2013
Illinois Society of Pediatric Dentists	President-Elect	2011	2012
National Dental Home Initiative for Head Start	Illinois State Leader	2012	2012
American Dental Education Association (ADEA), Pediatric Dentistry Section	Secretary	2011	2012
Pre-doctoral Program Director Council, American Academy of Pediatric Dentistry (AAPD)	Co-Chair	2010	2011



Palestinian Cleft Society	Treasurer	2009	2010
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**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
Alrayyes, S., Hart, T	Periodontal Disease in Children.	<i>Disease a Month</i> , 57(4):184-91,	April 2011
Qawar, N., Alrayyes, S.	Periodontitis in Pregnancy: The risk of preterm labor and low birth weight.	<i>Disease a Month</i> , 57(4):192-202	April 2011
McMahon, A., Vergotine, R., Punwani, I, Kumamoto, S. Alrayyes, S., Koerber, A.	Improving Parent's Knowledge of Tooth Avulsions.	<i>J Dental Research</i> , 90:2092	2011
Alrayyes, S., Koerber, A.	Infants' Intra-Oral Health and Their Dietary and Oral Hygiene Practices.	<i>J Dental Research</i> 89 (Spec Iss B):1555	2010
Alrayyes, S.,* Koerber, A.	Parent's Compliance for their Infants' Dental Needs	<i>J Dental Research</i> 88 (Spec Iss A):2485	2009
Alrayyes, S., Vergotine, R.J., Koerber, A.	General Dentists' Practices and Attitude towards the Infant Oral Exam.	<i>J Dental Research</i> 87 (Spec Iss B):3339	2008
Holcombe, R., Koerber, A., Punwani, I., Fadavi, S., Alrayyes, S., Klasser, G.,	Pediatric and General Dentists' Knowledge and Use of Fluoride Varnish.	<i>J Dental Research</i> , 87 (Spec issue A):0972	2008

## Commission on Dental Accreditation BioSketch

**Name:** Adrienne C.A. Barnes

**Current**

**Institution:** University of Illinois at Chicago College of Dentistry

### EDUCATIONAL BACKGROUND

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Bradley University, Peoria, IL	1975	BS	Biology
Georgetown Univ. School of Dentistry	1982	DDS	Dentistry
Univ. of Illinois at Chicago College of Dentistry, IL	1991	Specialty Certificate	Pediatric Dentistry

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Illinois Licensed Dentistry; Specialist in Pediatric Dentistry	General – 1982; Specialty – 1991	2013

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
None		

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
UIC College of Dentistry, Chicago, IL	Clinical Assistant Professor	Post-Graduate Clinic	1991; 2009	1995; 2013

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
UIC College of Dentistry, Chicago, IL		Post-Graduate Residents		200

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Dental Association; American Academy of Pediatric Dentistry; Illinois Society of Pediatric Dentists; Illinois State Dental Society; Chicago Dental Society	Member	1989	present

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.  
Print or Type Only**

**Name: Shahrbanoo Fadavi**

**Current Institution: University of Illinois at Chicago**

**EDUCATIONAL BACKGROUND (Begin with college level)**

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
University of Illinois, Chicago, Illinois	1981	Master of Science	Pediatric Dentistry
University of Illinois, Chicago, Illinois	1981	Specialty Certificate	Pediatric Dentistry
University of Tehran, Tehran, Iran	1977	DDS	Dentistry

**LICENSURE**

License (Do not include license number)	From (Year)	To (Year)
Licensed dentist, State of Illinois	1983	Date
Specialty licensure in Pediatric Dentistry, Illinois	1984	Date
Licensed in Conscious Sedation, State of Illinois	1999	Date

**BOARD CERTIFICATION**

Certifying Organization	Specialty	Date certified
Diplomate, American Board of Pediatric Dentistry	1997	Date

**TEACHING APPOINTMENTS (Begin with current)**

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois, Chicago, Illinois	Professor	Pediatric Dentistry	1998	Date
University of Illinois, Chicago, Illinois	Director, Residency Program	Pediatric Dentistry	1999	2007
University of Illinois, Chicago, Illinois	Associate Professor	Pediatric Dentistry	1991	1998
University of Illinois, Chicago, Illinois	Assistant Professor	Pediatric Dentistry	1981	1991

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
University of Illinois, Chicago, Illinois	PEDD 620, Pediatric Dentistry Clinic/Course	Pediatric Dentistry Residency Specialty		X

	Conference	Clinic		
University of Illinois, Chicago, Illinois	Seminars on diagnosis, treatment planning, and pulp therapy, journal club, research seminars	Pediatric Dentistry, post-doctoral resident	X	
University of Illinois, Chicago, Illinois	Practice management	Pediatric Dentistry, post-doctoral residents	X	
University of Illinois, Chicago, Illinois	HON 201, Honors Seminar on Early Childhood Caries – an Infectious disease	Pediatric Dentistry, Seminar for Honors College Students	X	

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
University of Illinois	Chicago	IL	1986	Date

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Board of pediatric Dentistry	Oral Examination Committee Member	2007	Date
American Board of Pediatric Dentistry	Committee Member on Recertification and Quality Assurance	2007	Date
ADA, CODA	Consultant, Site Visitor for Pediatric Dentistry	2006	Date

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
Testa, R., <b>Fadavi</b> , S., Koerber, A., Punwani, I. and Bhat, R	Oral Intubation in Premature Infants with and without Stabilizing Devices	Pediatr. Dent., Vol. 34, No. 2, p 138-141	2012
Lamberghini, F, Kaste, L., <b>Fadavi</b> , S., Koerber, A., Punwani, I.C., Smith, B. E	An association of Premature Loss of Primary Maxillary Incisors with Speech Production of Bilingual Children	Pediatr Dent., Vol. 34, No. 4, p. 307-311	2012
Kim, J., Kaste, L., <b>Fadavi</b> , S., and Benjamin Neelon, S. E	Are State Child Care Regulations Meeting the National Oral Health and Nutrition Standards?	Pediatr. Dent., V 34, No. 4, p. 317-324.	2012
<b>Fadavi</b> , S., Sevandal, M., Koerber, A., and Punwani, I.	Survey of Oral Health Knowledge and Behavior of Pregnant Minority Adolescents	Pediatr Dent., Vol. 31, p. 405-408	2009
Kaste LM, Sreenivasan D, Koerber A, Punwani I, <b>Fadavi</b> S	Pediatric oral health knowledge of African American and Hispanic of Mexican origin expectant mothers	Pediatr Dent. 2, Jul-Aug, 29(4):287-92	2007
Okunami, T. , Kusnoto, B., , BeGole, E., Evans, C., Sadowsky, C. and <b>Fadavi</b> , S	Assessing the American Board of Orthodontics objective grading system: Digital vs plaster dental casts,	American Journal of Orthodontics and Dentofacial Orthopedics , Volume 131, Issue 1, Pages 51 – 56	2007

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Mary Claire S. Garcia

**Current**

**Institution:** University of Illinois at Chicago

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Loyola Univ of Chicago	1980	BS	Biology
Loyola Univ of Chicago	1985	DDS	
Univ of Illinois at Chicago	1990	Certificate	Pediatric Dentistry
Univ of Illinois at Chicago	1992	MS	

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Pediatric Dentistry	1990	Present

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
Amer Board of Pediatric Dentistry	Pediatric Dentistry	Oct 2012

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
Univ of Illinois at Chicago	Clin Asst Prof	Teaching in the clinic for predoctoral students and residents	1992	present
University of the Pacific School of Dentistry	Asst Prof	Full-time faculty in Pediatric Dentistry: taught predoctoral students in clinic, gave lectures	2002	2005

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
Central DuPage Hospital	Winfield	IL	2013	present

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Nicola Hill-Cordell

**Current**

**Institution:** University of Illinois at Chicago College of Dentistry

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Knox College, Galesburg, Illinois	1985	BA	Biology
UIC College of Dentistry, Chicago, Illinois	1989	DDS	Dentistry
University of Illinois at Chicago, Chicago, Illinois	1991	Certificate Pediatric Dent	Pediatrics

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Illinois	1991	2014

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Pediatric Dentistry	2011

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
UIC College of Dentistry, Chicago Illinois	Clinical inst.	Pediatric Dentistry	1992	2013

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
UIC College of Dentistry, Chicago, IL	clinic	residents	0	200



**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
Alexian Brothers Medical Center	Elk Grove Village	IL	1992	2013

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
ADA, ISDS, CDS	member	1991	2013
AAPD	member	1992	2013
ABPD	diplomate	2010	2013

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
n/a			

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Anne Koerber

**Current**

**Institution:** University of Illinois College of Dentistry

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Iowa State University, Ames, Iowa	1975	BS	Zoology
University of Iowa, Iowa City, Iowa	1979	DDS	Dentistry
Northwestern University	1989	PhD	Psychology

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Clinical Psychology, Illinois	1990	current
Dentistry, Colorado	1980	2000

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
N.A.		

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois College of Dentistry, Chicago, IL	Professor	Director of Behavioral Science Division, Director of Assessment, Coordinator of Pediatric Dentistry Resident Research, Professionalism Coordinator, Dental Ethics, Communication Skills	1999	current
Northwestern University School of Dentistry, Chicago, IL	Assistant Professor	Statistics, Behavioral Sciences	1996	1999
Family Practice Residency, Rush-Copley Hospital, Aurora, IL.	Adjunct faculty	Patient management, psychology, communication	1997	1998
Department of Psychiatry, Northwestern University Medical School, Chicago, IL.	Adjunct Assistant Professor	Health psychology	1991	1992
Chicago College of Dentistry, Loyola University, Chicago, IL.	Instructor	Behavioral Sciences	1985	1987

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year

			Didactic	Clinic/Laboratory
University of Illinois at Chicago College of Dentistry	Dental Ethics	D1 dental students	3	12 hours
UIC COD	Dental Ethics	D2 dental students	2	9 hours
UIC COD	Dental Ethics	D3 dental students	0	6
UIC COD	Dental Ethics	D4 dental students	0	6
UIC COD	Dental Ethics	International students year 1	3	6
UIC COD	Dental Ethics	International students year 2	3	6
UIC COD	Professionalism Coordination	Ethics, epidemiology, evidence based dentistry, practice management and communication skills	Case writing to incorporate into small group learning	

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
none				

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Association for Dental Education	member	1996	present
ADEA Behavioral Sciences section	Treasurer, Secretary, Vice President, President	2002	2005
International Association for Dental Research	Member	1996	2011
IADR BEHSR group	President-Elect, President, Past President and Secretary-Treasurer, Secretary-Treasurer	2007	2010
American Dental Education Association Council of Sections Task Force for Developing Competencies and Foundation Knowledge for the New General Dentist	member	2005	2009

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
A Koerber, JM Davis, and NA Newton.	A qualitative study of tobacco dependence treatment in 19 US dental hygiene programs.	Prevention of Chronic Diseases	2012
B Peltier, A Rosenblum, MJ Bebeau, A Koerber.	A case of collegial communication and a patient who does not pay.	Journal of the American College of Dentists.	2011
DJ Fischer, A Koerber.	Assessment of willingness to provide diabetes education and counseling in a dental school clinic.	Journal of Dental Education.	2011
JM Davis and A Koerber	.Assessment of tobacco dependence curricula in U.S. dental hygiene programs.	Journal of Dental Education	2010

R Vergotine and A Koerber	The relationship of dental visits to parental knowledge of management of dental trauma	Pediatric Dentistry	2010
C Croffoot, K Krust Bray, MA Black, A Koerber.	Evaluating the effects of coaching to improve motivational interviewing skills of dental hygiene students.	Journal of Dental Hygiene	2010
IG Needleman, VI Binnie, A Ainamo, AB Carr, A Fundak, A Koerber, K Öhrn and J Rosseel.	Improving the effectiveness of tobacco use cessation (TUC)	International Dental Journal	2010

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.  
Print or Type Only**

**Name:**  
**Flavia**  
**Lamberghini**

**Current**  
**Institution:**  
**COD**  
**Pediatric**  
**Dentistry**

**EDUCATIONAL BACKGROUND (Begin with college level)**

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
College of Dentistry, U Cordoba, Argentina	1993	DDS	Dentistry
UIC COD Oral Sciences	1996-1998	GPR Certificate/Resident/Chief Resident	General Dentistry
UIC COD Pediatric Dentistry	2004-2006	Certificate, Resident in Pediatric Dentistry	Pediatric Dentistry
UIC School of Public Health and COD	1997 and 2006	Master in Public Health (Epidemiology) and MS	Public Health/Oral Sciences

**LICENSURE**

License (Do not include license number)	From (Year)	To (Year)
IL Dental License	1998	2015

**BOARD CERTIFICATION**

Certifying Organization	Specialty	Date certified
IDPR	Pediatric Dentistry	2007

**TEACHING APPOINTMENTS (Begin with current)**

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
COD Pediatric Dentistry	Clinical Assistant Professor	Pediatric Dentistry	2007	present

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory

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**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
none				

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Dental Association	Member	1996	present
American Academy of Pediatric Dentistry	Member	1996	present
Illinois Pediatric Dental Society/Hispanic Dental Association	Member	1996	present

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
<b>Lamberghini F</b> , Kaste LM, Fadavi S, Koerber A, Punwani IC, Smith EB.	An association of premature loss of primary maxillary incisors with speech production of bilingual children.	Pediatr Dent 2012 Jul-Aug;34(4):307-11	Jul/Aug 2012

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Lance Lambert

**Current**

**Institution:** University of Illinois at Chicago, College of Dentistry

**EDUCATIONAL BACKGROUND (Begin with college level)**

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Dartmouth College	1979	B.A.	Biology
University of Illinois at Chicago, College of Dentistry	1983	D.D.S.	Dentistry
Michael Reese Hospital and Medical Center	1984	General Practice Residency	
Children's Hospital of Pittsburgh	1986	Pediatric Dentistry Residency	

**LICENSURE**

License (Do not include license number)	From (Year)	To (Year)
Illinois General Dental, Dental Specialist, and Sedation Permit	1983	current

**BOARD CERTIFICATION**

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Pediatric Dentistry	1993

**TEACHING APPOINTMENTS (Begin with current)**

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois at Chicago, College of Dentistry	Clinical assistant professor	Pediatric dentistry: Clinical, Sedation, special patient care.	1986	current

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
University of Illinois at Chicago, College of Dentistry	Clinic	First and second year Post Graduate		450
University of Illinois at Chicago, College of Dentistry	Hospital dentistry and special patient care	First and second year Post Graduates	75	

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
University of Illinois Hospital	Chicago	IL	1986	current
Central Du Page	Winfield	IL	1990	current
Illinois Masonic Hospital	Chicago	IL	1988	1995

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
Illinois Society of Pediatric Dentist	Past board member, past president,	1986	current
Illinois State Dental Society	Member	1986	current
American Academy of Pediatric Dentistry	Member, former council member for several councils	1986	current

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date



## Commission on Dental Accreditation BioSketch

**Name:** Charles W. LeHew

**Current**

**Institution:** College of Dentistry, University of Illinois at Chicago

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Millikin University, Decatur, Illinois	1981	B.A.	Political Science
Northwestern University, Evanston, Illinois	1984	M.A.	Political Science
University of Illinois at Chicago, Chicago, Illinois	1994	M.P.A	Public Administration
University of Illinois at Chicago, Chicago, Illinois	2002	Ph.D.	Public Administration

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
N/A		

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
N/A		

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois at Chicago, Chicago, Illinois	Assistant Professor	Pediatric Dentistry Research Seminar	2012	2013
University of Illinois at Chicago, Chicago, Illinois	Adjunct Lecturer	Political Science and Criminal Justice	1985	1987

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
University of Illinois at Chicago, Chicago, Illinois	Principles and Methods of Dental Research I	Pediatric Dentistry Residents Year 1	Didactic 32	Clinic/Laboratory
University of Illinois at Chicago, Chicago, Illinois	Principles and Methods of Dental Research II	Pediatric Dentistry Residents Year 2	Didactic 32	University of Illinois at Chicago, Chicago, Illinois
University of Illinois at Chicago, Chicago, Illinois	Statistics for Dental Residents	Pediatric Dentistry and Periodontic Residents Year 1	16	

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
N/A				

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Association of Public Health Dentistry	Member	2009	2013

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
LeHew CW.	Challenges in community-based head and neck cancer prevention programs, Chapter 5	Head and Neck Cancer: Current Perspectives, Advances, and Challenges. J Radosevich (Ed.) Dordrecht, the Netherlands: Springer Science.	Forthcoming
LeHew CW, Epstein JB, Kaste LM, Choi YK.	Assessing Oral Cancer Early Detection: Clarifying Dentists' Practices.	Journal of Public Health Dentistry	2010
LeHew CW, Epstein JB, Koerber A, Kaste LM.	Pilot Study of the Impact of Oral Cancer Prevention and Early Detection Training on Medical Clinicians' Perceptions and Intentions	Ear, Nose, & Throat	2009

## Commission on Dental Accreditation BioSketch

**Name:** Ricardo Y. Mendoza

**Current**

**Institution:** University of Illinois at Chicago College of Dentistry

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
University of Illinois at Chicago	1997	Fellow	Peds. Dent.
Boston University	1995	Residency	Peds. Dent.
Universidad Central Venezuela	1991	DMD	Dentistry

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Dental Licensure	2012	2015

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Peds. Dent.	Candidate

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
College of Dentistry, UIC, Chicago, IL		Clinical Assistant	1997	Present

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
College of Dentistry, UIC, Chicago, IL				
College of Dentistry, UIC, Chicago, IL		Post-Graduate		X
Advocate IL Masonic Hosp., Chicago, IL		G.P.R.		X

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
Illinois Masonic Medical Center	Chicago	IL	2002	Present

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
Hispanic Dental Association	Trustee	2012	Present
G.C.H.D.A.	President	2009	Present

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.**

**Print or Type Only**

**Name:** Marilia Montero -Fayad

**Current**

**Institution:** University of Illinois at Chicago; Department of Pediatric Dentistry

**EDUCATIONAL BACKGROUND (Begin with college level)**

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Federal University of Ceara, Brazil	1992	DDS	
Eastman Dental Center, Rochester NY	1997	CERT	General Dentistry
University of Rochester, Strong Memorial Hospital, Rochester, NY	1998	CERT	General Dentistry
University of Connecticut, Farmington CT	2000	CERT	Pediatric Dentistry
University of Illinois at Chicago, Chicago IL	2001	CERT	Pediatric Dentistry

**LICENSURE**

License (Do not include license number)	From (Year)	To (Year)
Illinois	2000	present

**BOARD CERTIFICATION**

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Pediatric Dentistry	2006

**TEACHING APPOINTMENTS (Begin with current)**

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
College of Dentistry, UIC, Chicago IL	Clinical Associate Professor		2012	present
College of Dentistry, UIC, Chicago IL	Clinical Assistant Professor		2001	2012
College of Dentistry, UIC, Chicago IL	Clinical Assistant Professor	Mile Square Interim Dental Director	2001	2003
College of Dentistry, UIC, Chicago IL	Clinical Assistant Professor	Crest Smile Shoppe Dental Director	2003	2006
College of Dentistry, UIC, Chicago IL	Clinical Assistant Professor	Postgraduate Clinic Director	2007	2012

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
College of Dentistry, UIC, Chicago IL		Postgraduate Pediatric Dentistry		

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
University of Illinois Medical Center	Chicago	IL	2000	present

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Dental Association	member	2000	present
Illinois State Dental Association	member	2000	present
Chicago Dental Society	member	2000	present
American Academy of Pediatric Dentistry	member	2000	present
Illinois Society of Pediatric Dentistry	Treasure/Secretary	2013	2014
Hispanic Dental Association	member	2008	present
Greater Chicago Hispanic Dental Association	Treasure, Past President	2012	2014

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date

# Commission on Dental Accreditation

## BioSketch

**Do not attach Curriculum Vitae.  
Print or Type Only**

**Name:** Irwin Seidman

**Current**

**Institution:** University of Illinois Chicago

**EDUCATIONAL BACKGROUND (Begin with college level)**

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
University of Illinois: Chicago, IL	1967	BS	Biology
University of Illinois: Chicago, IL	1969	BS	Dentistry
University of Illinois: Chicago, IL	1971	DDS	Dentistry
University of Illinois: Chicago, IL	1976	Certificate	Pediatric Dentistry

**LICENSURE**

License (Do not include license number)	From (Year)	To (Year)
Illinois	1971	Present

**BOARD CERTIFICATION**

Certifying Organization	Specialty	Date certified
The American Board of Pediatric Dentistry	Pediatric Dentistry	September, 2010

**TEACHING APPOINTMENTS (Begin with current)**

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois	Asst. Prof.	Pediatric Dentistry	1976	Present

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
University of Illinois Chicago	PEDD 595	PEDD Residents Yr. 1	52	
University of Illinois Chicago	PEDD Clinic	PEDD Residents Yrs 1 and 2		182

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
University of Illinois	Chicago	IL	1986	Present
Michael Reese Hospital	Chicago	IL	1990	1991
Alexian Brothers Medical Center	Elk Grove Village	IL	1975	1982

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
Illinois Society of Pediatric Dentists	Member	1984	Present
	President	1987	1988
Chicago Dental Society, ADA and Illinois Dental Society		1974	Present
American Academy of Pediatric Dentistry		1974	Present

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date



## Commission on Dental Accreditation

### BioSketch

Do not attach Curriculum Vitae.

Print or Type Only

Name: Jin-Moon Soh

Current Institution: University of Illinois at Chicago, College of Dentistry

#### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
University of IL, Chicago, IL	May 31, 1974	MS	Pediatric Dentistry
UNiversity of IL, Chicago, IL	Sept 27, 1971 - June 1, 1973	Specialty Certificate	Pediatric Dentistry
Seoul Nat'l University, Seoul, Korea	Aug 30, 1968	Ph.D	Medical science
Seoul Nat'l university, Seoul Korea.	Feb 26, 1965	MSD	Pediatric Dentistry
Seoul Nat'l University, Seoul, Korea	Feb 26, 1962	DDS	Dentistry
License (Do not include license number)		From (Year)	To (Year)
Dental License in The State of IL.		July 10, 1975	2015
Dental License in The State of CA		May 26, 2006	2015

#### LICENSURE

Certifying Organization	Specialty	Date certified
State of Illinois, Department of Registration and Education	Pediatric Dentistry	1991

**BOARD CERTIFICATION**

**TEACHING APPOINTMENTS (Begin with current)**

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
UIC. Chicago IL	Asso Prof	Ped Dent clinical Dentistry	2001	2013
UIC. Chicago. IL.	Asso Prof	Director UG Program in Dept of Ped Dent	1978	2001

**CURRENT TEACHING RESPONSIBILITIES**

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
UIC. Chicago IL	Clinical Dentistry	PG I and II	Didactic	Clinic/384Laborator y

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
UIC Hospital	Chicago	IL	1976	2013
Michael Reese/Humana Hospital	Chicago	IL	1989	1992

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
ADA, ISDS, CDS	Member	1971	2013
Am Academy of Pediatric Dentistry	Member	1978	2013
IL Society of Pediatric Dentists	Member	1980	2013

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
None			

## Commission on Dental Accreditation BioSketch

**Name:** Rodney J Vergotine

**Current**

**Institution:** The University of Illinois at Chicago

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
The University of the Western Cape, South Africa	1986	BChD	Dentistry
The University of the Western Cape, South Africa	1993	MSc(dent)	Community Dentistry
The University of Missouri Kansas City, KC, Missouri	1993	Certificate	Pediatric Dentistry
The University of Illinois at Chicago	1994/5	Fellowship	Pediatric Dentistry

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Illinois	1996	Current

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Pediatric Dentistry	1999

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
College of Dentistry, UIC, Chicago, IL	Assoc. Prof.	Hospital Dentistry	2006	current
College of Dentistry, UIC, Chicago, IL	Assoc. Prof.	Assoc. Program Director Residency Pediatric Dentistry program	2007	current

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year	
			Didactic	Clinic/Laboratory
College of Dentistry, UIC, Chicago, IL	Introduction to Hospital Dentistry	D3, Pediatric Dentistry	10	0
College of Dentistry, UIC, Chicago, IL	Pediatric Dental Seminars	PG1,2, Pediatric Dentistry	40	9hrs/week
College of Dentistry, UIC, Chicago, IL	Hospital Dentistry	PG 1, Pediatric Dentistry	45	0
College of Dentistry, UIC, Chicago, IL	Diagnosis Treatment Planning	PG1, Pediatric Dentistry	10	0

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
The University of Illinois Hospitals	Chicago	IL	2006	current
Childrens Hospital of Wisconsin	Milwaukee	WI	2001	2006

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
Illinois society of Pediatric Dentists	President	2013	2013
Illinois Society of Pediatric Dentists	President-elect	2012	2012
Illinois Society of Pediatric Dentists	Secretary/Treasurer	2011	2011

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
Vergotine, RJ	A Giant cell fibroma and focal fibrous hyperplasia in a young child	Case reports in Dentistry	2012
Vergotine RJ, Koerber A	The relationship of dental visits to parental knowledge of management of dental trauma.	Pediatric Dentistry	2010
Vergotine RJ, Govoni B	Public school educator's knowledge of initial management of dental trauma	Dental Traumatology	2010
Vergotine RJ, Hodgson B, Lambert L	Pulp polyp associated with a Natal tooth: Case report	J. Clinical Pediatric Dentistry	2009

## Commission on Dental Accreditation BioSketch

**Name:** Kapil Vij

**Current**

**Institution:** UIC College of Dentistry, Pediatric Dentistry

### EDUCATIONAL BACKGROUND (Begin with college level)

Name of School, City and State	Yr of Grad.	Certificate or Degree	Area of Study
Jacksonville University	2007	Certificate	Orthodontics
University of Illinois, Chicago, Illinois	2004	Master of Science	Structural Biology
University of Illinois, Chicago, Illinois	2001	Certificate	Pediatric Dentistry
University of Illinois, Chicago, Illinois	1999	Doctor of Dentistry	Dentistry
University of Illinois, Chicago, Illinois	1997	Bachelor of Dentistry	Dentistry
University of Illinois, Champaign-Urbana, Illinois	1995	Bachelor of Science	Biology

### LICENSURE

License (Do not include license number)	From (Year)	To (Year)
Illinois General Dental License	1999	Present
Illinois Specialty License- Pediatric Dentistry	2002	Present
Illinois Specialty License= Orthodontics	2008	Present
Illinois Controlled Substance License	1999	Present
Illinois Dental Sedation Permit	2001	Present

### BOARD CERTIFICATION

Certifying Organization	Specialty	Date certified
American Board of Pediatric Dentistry	Pediatric Dentistry	09/2006

### TEACHING APPOINTMENTS (Begin with current)

Name of Institution, City and State	Rank	Subjects/Content Areas Taught/ Administrative Responsibilities	From (Year)	To (Year)
University of Illinois	Clin Ass Prof	Growth & Dev.	2001	2013

### CURRENT TEACHING RESPONSIBILITIES

Name of Institution, City, State	Course Title	Discipline and Level of Students (Year)	Total Contact Hours Per Year

			Didactic	Clinic/Laboratory
University of Illinois, Chicago, Illinois		Post Graduate Residents	88	88

**HOSPITAL APPOINTMENTS (Begin with current)**

Name of Hospital	City	State	From (Year)	To (Year)
Saint Bernard Hospital	Chicago	Illinois	2010	2011

**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

Name of Organization	Title	From (Year)	To (Year)
American Dental Association	Member	1999	Present
Chicago Dental Society	Member	1999	Present
Illinois State Dental Society	Member	1999	Present

**PUBLISHED WORKS** (For the most recent five years, list articles in which you were the principal author that appeared in refereed journals or text books, by author(s), title, publication, and date)

Author(s)	Title	Publication	Date
None in last 5 years			

## Appendix J

### Faculty Clinic Staffing Schedule (Fall: Aug-Dec., 2012)

Clinic Assignment	Monday	Tuesday	Wednesday	Thursday	Friday
AM	S. Fadavi M. Montero	S. Alrayyes J. M. Soh ***	L. Lambert R. Vergotine ***	S. Fadavi F. Lamberghini	R. Vergotine N. Hill L. Lambert OR* Rotation
PM	S. Fadavi M. Montero	I. Seidman J. M. Soh  S. Alrayyes on Call**	S. Alrayyes ****  R. Vergotine on Call**	C. Garcia A. Barnes  S. Alrayyes on Call**	R. Vergotine L. Lambert  S. Fadavi on Call**

AM Clinic Hours: 9:00 a.m. to 12:30 p.m.

PM Clinic Hours: 1:30 p.m. to 4:30 p.m.

\* Wednesday and Friday OR sessions are shared based on rotation among Drs. Vergotine, Fadavi, Lambert, Punwani, Alrayyes, and Montero

\*\*On Call are shared by the full time faculty Drs. Fadavi, Vergotine and Alrayyes

\*\*\* First Year Post graduate residents in Didactic Seminar. Second Year Post Graduate residents in clinic.

\*\*\*\*Second Year Post Graduate residents have research time. Only First Year Post Graduate residents in clinic



Faculty Clinic Staffing Schedule (Spring: Jan-May 2013)

<b>Clinic Assignment</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
AM	S. Fadavi M. Montero  S. Alrayyes on Call**	I. Seidman S. Alrayyes J. M. Soh	L. Lambert S. Fadavi  OR* Rotation	S. Fadavi F. Lamberghini	R. Vergotine N. Hill L. Lambert OR* Rotation
PM	A. Vorachek M. Montero	I. Seidman J. M. Soh  S. Alrayyes on Call**	R. Vergotine S. Alrayyes	C. Garcia A. Barnes  R. Vergotine on Call**	R. Vergotine L. Lambert  S. Fadavi on Call**

AM Clinic Hours: 9:00 a.m. to 12:30 p.m.

PM Clinic Hours: 1:30 p.m. to 4:30 p.m.

\* Wednesday and Friday OR sessions are shared based on rotation among Drs. Vergotine, Fadavi, Lambert, Punwani, Alrayyes, and Montero

\*\*On Call are shared by the full time faculty Drs. Fadavi, Vergotine and Alrayyes

Faculty Clinic Staffing Schedule (Summer I: May June 2013)

<b>Clinic Assignment</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
AM	S. Fadavi M. Montero  S. Alrayyes on Call**	I. Seidman S. Alrayyes J. M. Soh	L. Lambert S. Fadavi  OR* Rotation	S. Fadavi F. Lamberghini	R. Vergotine N. Hill L. Lambert OR* Rotation
PM	A. Vorachek M. Montero	I. Seidman J. M. Soh  S. Alrayyes on Call**	R. Vergotine S. Alrayyes	C. Garcia A. Barnes  R. Vergotine on Call**	R. Vergotine L. Lambert  S. Fadavi on Call**

AM Clinic Hours: 9:00 a.m. to 12:30 p.m.

PM Clinic Hours: 1:30 p.m. to 4:30 p.m.

\* Wednesday and Friday OR sessions are shared based on rotation among Drs. Vergotine, Fadavi, Lambert, Punwani, Alrayyes, and Montero

\*\*On Call are shared by the full time faculty Drs. Fadavi, Vergotine and Alrayyes

Faculty Clinic Staffing Schedule (Summer II: July-Aug, 2013) Tentative w/ three faculty/session

Clinic Assignment	Monday	Tuesday	Wednesday	Thursday	Friday
AM	S. Fadavi M. Montero S. Alrayyes	I. Seidman S. Alrayyes J. M. Soh	L. Lambert S. Fadavi ** OR* Rotation	S. Fadavi F. Lamberghini G. Algenio	R. Vergotine N. Hill L. Lambert OR* Rotation
PM	A. Vorachek M. Montero S. Fadavi	S. Alrayyes J. M. Soh **	R. Vergotine S. Alrayyes ***	C. Garcia A. Barnes R. Vergotine	R. Vergotine L. Lambert S. Fadavi

AM Clinic Hours: 9:00 a.m. to 12:30 p.m.

PM Clinic Hours: 1:30 p.m. to 4:30 p.m.

\* Wednesday and Friday OR sessions are shared based on rotation among Drs. Vergotine, Fadavi, Lambert, Punwani, Alrayyes, and Montero

\*\*First Year Post-Graduate residents have didactic seminar. Only Second Year Post Graduate resident in clinic

\*\*\*Second Year Post-Graduate residents have research time. Only First Year Post Graduate residents in clinic

**Department of Pediatric Dentistry  
Faculty Evaluation**

Faculty: \_\_\_\_\_ Year: \_\_\_\_\_

**Teaching:** PG/Grad: \_\_\_\_\_ Predoc.: \_\_\_\_\_ Both: \_\_\_\_\_ N/A: \_\_\_\_\_

Clinical:  
Appropriate \_\_\_\_\_ Needs Enhancement \_\_\_\_\_ N/A \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Seminar: \_\_\_\_\_ Lectures: \_\_\_\_\_ Lab: \_\_\_\_\_ CE: \_\_\_\_\_ Affiliated Programs \_\_\_\_\_

Appropriate \_\_\_\_\_ Needs Enhancement \_\_\_\_\_ N/A \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Research/Scholarship:**

Clinical: \_\_\_\_\_ Health Services/Public Health: \_\_\_\_\_ Behavioral/Biomedical: \_\_\_\_\_  
Other: \_\_\_\_\_ Funding: \_\_\_\_\_

Appropriate \_\_\_\_\_ Needs Enhancement \_\_\_\_\_ N/A \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Service:** Appropriate \_\_\_\_\_ Needs Enhancement \_\_\_\_\_ N/A \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Administration:** Appropriate \_\_\_\_\_ Needs Enhancement \_\_\_\_\_ N/A \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Dept. Head comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Evaluation discussed on: \_\_\_\_\_

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Faculty Member

**UNIVERSITY OF ILLINOIS AT CHICAGO**  
 Department of Pediatric Dentistry Clinical  
 Evaluations

Name of Faculty \_\_\_\_\_

Date \_\_\_\_\_

**Directions:** Circle the rating on the scale that best reflects your judgment of the teaching abilities of the faculty identified above. Please use the rating scale as follows:

5 = Excellent    4 = Commendable    3 = Satisfactory    2 = Fair    1 = Poor

**Knowledge and Analytical Skills** 5    4    3    2    1  
 Faculty emphasizes and encourages conceptual understanding and problem-solving rather than factual recall.

*Comments:* \_\_\_\_\_

**Clinical Skills** 5    4    3    2    1  
 Willingly demonstrates skills in support of teaching goals.

*Comments:* \_\_\_\_\_

**Patient-Care Team Involvement** 5    4    3    2    1  
 Engages all team members in patient care, helps with difficult clinical situations

*Comments:* \_\_\_\_\_

**Organizational Skills** 5    4    3    2    1  
 Demonstrates the need for and cultivates organizational skills in residents

*Comments:* \_\_\_\_\_

**Provides Direction/Feedback** 5    4    3    2    1  
 Provides timely feedback, clearly communicates progress made or needed.

*Comments:* \_\_\_\_\_

**Communicates Learning Objectives** 5    4    3    2    1  
 Communicates in clearly understandable language the learning objectives

*Comments:* \_\_\_\_\_

**Interpersonal Skills** 5    4    3    2    1  
 Communication skills, cooperation, empathy, teamwork, sense of humor, care of others

*Comments:* \_\_\_\_\_

**Overall Effectiveness** 5    4    3    2    1  
 Teaching Skills / Commitment

*Comments:* \_\_\_\_\_

---

**Attendance and reliability**

**5      4      3      2      1**

Comes on time, is available to students when needed, acts professional and is a role model

*Comments:* \_\_\_\_\_

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## 2013 Annual Faculty Self- Assessment and Review

**This form and the most recent version of your CV should be submitted to your Department Head by May 15, 2013.**  
Please include all teaching assignments (by semester and course) in your CV submission.

1. Department Choose an item.
2. Name Click here to enter text.
3. Academic Rank Choose an item.
4. Percent Appointment Click here to enter text.%
5. Are you eligible to practice dentistry in the State of Illinois? Yes  No
6. If "Yes" to #5, do you provide direct patient care services? Yes  No
7. If "Yes" to #6, please indicate: a) Percent time internal to COD Click here%  
b) Percent time external to COD Click here %
8. Please review your stated goals for the last academic year (Aug 2012- May 2013) as they relate to your teaching, research, scholarship, and service, and summarize your progress toward their achievement.  
Click here to enter text.
9. Please itemize your goals for the upcoming academic year (June 2013- May 2014) as they relate to your planned teaching, research, scholarship, and service activities. (e.g. curriculum development, research grant submissions, publications, etc.)  
Click here to enter text.

10. Describe how your activities relate to the Vision and Mission statement of the Department and the College of Dentistry (<http://dentistry.uic.edu/about/mission.cfm?m=2&o=2#> ).

[Click here to enter text.](#)

11. If specialty trained, do you currently have specialty board certification?

Yes  No  Not Applicable

If yes, what is the specialty board: [Click here to enter text.](#)

If no, are you currently working toward your specialty board certification? Yes  No

Please describe your progress toward board certification to date, including an estimated examination date.

[Click here to enter text.](#)

12. Please list all continuing education courses taken during the period of June 2012 – May 2013 in the table below. If none, please state.

Course Title	Course content and provider	Month and Year
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

Please use the space below if you need to add additional courses.

[Click here to enter text.](#)



**Faculty Professional Development Needs Assessment** – Please assess your needs regarding your professional development.

1. Please list any professional development goals and activities planned for 2013-2014, and include interest/progress toward promotion as outlined in the COD Promotion and Tenure Guidelines (<http://dentistry.uic.edu/depts/facultyAffairs/tenure.cfm?m=2&o=2#>).

Click here to enter text.

2. I have read the COD guidelines and norms for Promotion, and I believe I should be considered for promotion during the 2013-14 cycle.    Yes     No

3. I feel that I need additional mentors.    Yes     No

If yes, please indicate type/area of expertise needed.

Click here to enter text.

4. I would like to discuss taking on new roles or committee assignments during the upcoming academic year.    Yes     No

If yes, please describe.

Click here to enter text.

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date



Faculty CV, report and developmental program reviewed:

\_\_\_\_\_  
Department Head or Designee Signature

\_\_\_\_\_  
Date

All documents should be maintained in a confidential department file. Supervisor should sign once the review and development process is completed.



COMMENTS					
NAME					
COMMENTS					

## Appendix L

### Exhibit 4

#### FACILITIES AND RESOURCES

For each item listed below, indicate whether the item is located within the dental clinic, outside the dental clinic but readily accessible to it, or not available (check appropriate response).

<u>Facilities, Capabilities/Equipment</u>	<u>Within Clinic</u>	<u>Readily Accessible</u>	<u>Not Available</u>
Intraoral radiographic facilities	X		
Extraoral radiographic facilities	X		
Dental laboratory facilities		X	
Operatories	X		
Staff offices	X		
Study areas	X		
Conference rooms	X		
Dental recovery area	X		
<u>Sterilization capabilities:</u>	X		
Autoclave			
Ethylene oxide			X
Dry heat			X
Emergency drugs	X		
<u>Emergency equipment:</u>	X		
Oxygen under pressure			
Suction	X		
Resuscitative equipment	X		
Distance Education Resources (videoconferencing equipment, etc.)			X

**Appendix M  
Exhibit 5 -- Staff support**

<b>Advanced Specialty Education Program in Pediatric Dentistry</b>				
<b>Type of Support Staff</b>	<b>Dental Assistants Total # Hours/week</b>	<b>Dental Hygienists Total # Hours/week</b>	<b>Secretarial/ Clerical Total # Hours/week</b>	<b>Technical/ Other (please describe) Total # Hours/week</b>
<b>Positions</b>	<b>Total # 8</b>	<b>N/A</b>	<b>Total #: 2 Full-time Receptionists; 1 Staff Support</b>	<b>Total #: 1 Sterilization / Dispensing Technician</b>
<b>1</b>	<b>40 hrs/wk</b>		<b>Receptionist: 40 hrs/wk</b>	<b>40 hrs/wk</b>
<b>2</b>	<b>40 hrs/wk</b>		<b>Receptionist: 40 hrs/wk</b>	
<b>3</b>	<b>40 hrs/wk</b>		<b>Staff Support: 40 hrs/wk</b>	
<b>4</b>	<b>40 hrs/wk</b>			
<b>5</b>	<b>40 hrs/wk</b>			
<b>6</b>	<b>40 hrs/wk</b>			
<b>7</b>	<b>40 hrs/wk</b>			
<b>8</b>	<b>40 hrs/wk</b>			

## Appendix N

### Exhibit 6

#### Students'/Residents' Total Program Time

Indicate the percentage of the students'/residents' total program time devoted to:

Didactics	20%
Clinical activities	65%
Research activities	10%
Teaching	5%
Other (specify)	0%
<b>TOTAL</b>	<b>100%</b>

Residents' Schedule for January 1, 2012 to January 31, 2013

Month / Year	Resident #1			Resident #2		
	Seminars	Rotation	Clinic	Seminar	Rotation	Clinic
January '12	<ul style="list-style-type: none"> <li>• Principles &amp; Methods in Dent Res. II</li> <li>• Dental Pediatrics</li> <li>• Ped Dent Clinic Case Conference</li> <li>• Seminar on Anes &amp; Pain Control</li> <li>• Masters' Thesis Research</li> <li>• Pediatric Dentistry Research</li> <li>• Oral Sciences II</li> <li>• Practice Administration</li> </ul>	<ul style="list-style-type: none"> <li>• ER (Emergency Room) On Call</li> <li>• Pediatric Medicine Rotation</li> <li>• Anesthesiology Rotation</li> <li>• Hospital Emergency Room Rotation</li> </ul>	UIC /COD	<ul style="list-style-type: none"> <li>• Ped. Dentistry Case Conference</li> <li>• Practice Administration</li> <li>• Craniofacial Anomalies II</li> <li>• Pediatric Dentistry Research</li> <li>• Masters' Thesis Research</li> <li>• Dental Pediatrics</li> </ul>	<ul style="list-style-type: none"> <li>• ER (Emergency Room) On Call</li> </ul>	UIC /COD
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## Appendix P

### Exhibit 8

#### Biomedical sciences

Are students/residents required to take formal courses?

  X   Yes                               No

If YES, list the title of each course, year offered, number of credit hours and, if applicable, name of affiliated institution providing the instruction.

Course Title	Year Offered	Credit Hours	Where Given
PEDD595, Pediatric Dental Seminar	1	2	Pediatric Dentistry
PEDD501, Dental Pediatrics	1 or 2	2	Pediatric Dentistry
PEDD410, Prin & Methods in Dental Research I	1	2	Pediatric Dentistry
PEDD411, Prin & Methods in Dental Res II	1	2	Pediatric Dentistry
OSCI 594, Biostatistics	1	3	Public Health
OSCI451, Research Methodology	1	1	Oral Sciences
OSCI580, Advanced Oral Sciences I	1	2	Oral Sciences
OSCI581, Advanced Oral Sciences II	1	2	Oral Sciences
OSCI598, Master's Thesis Research	1 & 2	1-16	Oral Sciences
PEDD620, Pediatric Dent Clinic/Case Conf	1 & 2	2-16	Pediatric Dentistry
PEDD673, Pediatric Physical Diagnosis	1	1	Pediatric Dentistry
PEDD698, Research in Pediatric Dentistry	1 & 2	1-16	Pediatric Dentistry
PEDD600, Advanced Pediatric Dent Tech / Growth and Development	1 & 2	3	Pediatric Dentistry
PEDD615, Practice Admin in Pediatric Dent	1 or 2	2	Pediatric Dentistry
OMDS503, Graduate Oral Pathology	2	2	Pediatric Dentistry
PEDD621, Hospital Dentistry	1	2	Pediatric Dentistry
ORTD524, Craniofacial Anomalies I	2	2	Orthodontics
ORTD525, Craniofacial Anomalies II	2	2	Orthodontics

<a href="#">ORTD615</a> , Diagnostic Procedures I	1	1-10	Orthodontics
<a href="#">OMDS615</a> , Anesthesia and Pain Control	1	1	Oral Med & Diag Sc
<a href="#">OMDS617</a> , Radiology for the Dent Specialist	1 & 2	1	Oral Med & Diag Sc



## Appendix Q

### Schedule of department seminars, conferences and/or lectures

Course Title	Residents	Semester	Days / Hours	Mode of Instruction (Seminar, Conf. and/or Lectures, etc.)
<a href="#">PEDD 595</a> , Pediatric Dental Seminar	1	Sum & Fall	Tue / 9:00 am – 12 pm	Seminar
<a href="#">PEDD 501</a> , Dental Pediatrics	1 or 2	Spring (every other year)	Tue / Wed. 12:30 – 1:30 pm	Seminar & Lecture
<a href="#">PEDD 410</a> , Principle & Methods in Dental Research I	1 & 2	Fall	Thur / 8:00am – 9:00am	Seminar
<a href="#">PEDD 411</a> , Principle & Methods in Dental Res II	1 & 2	Spring	Thur / 8:00am – 9:00am	Seminar
<a href="#">OSCI 594</a> , Statistics for Dental Residents	1	Fall	Online Course	Lecture
<a href="#">OSCI 451</a> , Research Methodology	1	Fall	Tue / 4:30 – 6:00 pm	Seminar, Conf. & Lecture
<a href="#">OSCI 580</a> , Advanced Oral Sciences I	1 & 2	Fall (every other year)	Thur / 4:30 – 6:00 pm	Seminar, Conf. & Lecture
<a href="#">OSCI 581</a> , Advanced Oral Sciences II	1 & 2	Spr (every other year)	Thur / 4:30 – 6:00 pm	Seminar, Conf. & Lecture
<a href="#">OSCI 598</a> , Master's Thesis Research	1 & 2	Fall, Spr, Sum	Flexible	One-to-one mentoring
<a href="#">PEDD 620</a> , Pediatric Dent Clinic/Case Conf	1 & 2	Fall, Spr, Sum	Wed / 8:00 – 9:30 Am	Journal club, rounds and seminars
<a href="#">PEDD 673</a> , Pediatric Physical Diagnosis	1	Summer	Flexible	Seminar, lectures and rounds
<a href="#">PEDD 698</a> , Research in Pediatric Dentistry	1 & 2	Fall, Spr, Sum	Flexible	One-to-one mentoring
<a href="#">PEDD600</a> , Advanced Pediatric Dent Tech / Growth and Development	1 & 2	Fall, Spr, Sum	2 x/mon. & Wed / 10:30 – 4:30 pm	Seminar, conf., lecture and pre-clinical techniques
<a href="#">PEDD 615</a> , Practice Admin in Pediatric Dent	1 & 2	Spr (every other year)	Variable	Seminar, lectures and private practice observation visits
<a href="#">OMDS 503</a> , Graduate Oral Pathology	2	Fall	Online	Seminar, conf., and lecture

<a href="#">PEDD 621</a> , Hospital Dentistry	1	Summer and Fall	Wed / 9:30 am – 12:00 pm	Seminar, conf., and lecture
<a href="#">ORTD 524</a> , Craniofacial Anomalies I	2	Fall	Tue / 7:30 – 9:00 am	Seminar, conf., and lecture
<a href="#">ORTD 525</a> , Craniofacial Anomalies II	2	Spring	Tue / 7:30 – 9:00 am	Seminar, conf., and lecture
<a href="#">ORTD 615</a> , Diagnostic Procedures I	1	Fall	Variable	Seminar, conf., and lecture
<a href="#">OMDS 615</a> , Anesthesia and Pain Control	1	Spring	Variable	Seminar, conf., and lecture
<a href="#">OMDS 617</a> , Radiology for Dental Specialists	1 & 2	Spring/Summer	Variable	Lecture, independent study

The description of these courses and related schedules are provided in the next pages.

# CRANIOFACIAL DEVELOPMENT AND REGENERATION

## FALL 2012 ADVANCED ORAL SCIENCES

*Advanced Oral Sciences: Clinical Implications of Oral Structures and Function. Graduate Course & Lecture Series [Advanced Oral Sciences 581 & CE Credit]. Thursdays 4.30-6pm, Room 330D. Course Director: Dr. Xianghong Luan*

### ***Craniofacial Development: Of Molecules and Proteins***

1	Introduction: Craniofacial Growth and Development	Tom Diekwisch, UIC Brodie	Sep 6
2	Amelogenin - Biography of an Enamel Matrix Protein	Tom Diekwisch, UIC Brodie	Sep 13
3	Signaling Pathways Regulating Craniofacial Development	David Clouthier, University of Colorado Denver	Sep 20
4	Student Presentations I	Ortho Residents	Sep 27
5	Student Presentations II	Ortho Residents and Ph.D. students	Oct 4

### ***Bone Development and Regeneration***

6	Biological Minerals as Templates for New Biomaterials	David Kohn, University of Michigan	Oct 18
7	Type I Collagen - An Old Protein with New Faces	Mitsuo Yamauchi, UNC Chapel Hill	Oct 25
8	Student Presentations III	Pedo Residents	Nov 1
9	Platelet-rich Fibrin (PRF) in Periodontal Regeneration: Tissue-Specific Mechanisms and Clinical Outcomes	Qi Li, UIC Brodie Lab & Jilin University	Nov 8

### ***Enamel and Periodontal Tissue Engineering***

10	Ameloblastin - A Matrix Protein	Xianghong Luan, UIC Brodie	Nov 15
11	Student Presentations IV/ Review	Endo and Prostho Residents	Nov 29
12	Enamel Tissue Engineering	Masaki Honda, Nihon University	Dec 6
13	Student Presentations V Examination	Perio and Prostho Residents Xianghong Luan, UIC Brodie	Dec 13

# DIAGNOSIS AND TREATMENT PLANNING

Tuesdays @ 12:30-1:30 in the Gerlach Seminar Room

Course Directors: Dr. Rodney Vergotine and Dr. Sahar Alrayyes

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## Course Objectives:

1. To provide the residents with background information, policies, and knowledge needed to diagnose and treatment plan infants, children and adolescent using non-pharmacological and pharmacological behavior management approaches that follow the guidelines of the American Academy of Pediatric Dentistry.
2. To provide the residents with the didactic information related to patient assessment and diagnosis, preventive and restorative care as well as electronic presentations of clinical cases.

## References

1. Pediatric Dentistry V 33/NO 6 Reference Manual 2012/13
2. Pinkham, JR. Pediatric Dentistry Infancy Through Adolescence, 3<sup>rd</sup> Edition
3. McDonald, R. Dentistry for the Child and Adolescent, 9<sup>th</sup> Edition

## Course Schedule

Date	Topic
07/09/2013	<ul style="list-style-type: none"><li>• Overview</li></ul>
07/16/2013	<ul style="list-style-type: none"><li>• No Class</li></ul>
07/23/2013	<ul style="list-style-type: none"><li>• Dental Home</li><li>• Patient's Bill of Rights and Responsibilities</li><li>• Work Force issues and Delivery of Oral Health Care Services in a dental Home</li><li>• Role of Pediatric Dentists as Both Primary and Specialty Care Providers</li></ul>
07/30/2013	<ul style="list-style-type: none"><li>• Special Health Care Needs</li><li>• Management of Dental patients With special Health Care Needs</li><li>• Model Dental Benefits for Infants, Adolescents, and individuals with special health Care needs</li><li>• Transitioning from a Pediatric-Centered Dental Home to an Adult-Centered Dental Home for Individuals with special Health Care Needs</li></ul>
08/6/2013	<ul style="list-style-type: none"><li>• Dental Neglect</li><li>• Oral and Dental Aspects of Child Abuse and neglect</li></ul>
08/13/2013	<ul style="list-style-type: none"><li>• Early Childhood Caries (ECC): Classification, consequence, and preventive Strategies</li><li>• Early Childhood Caries (ECC): Unique Challenges and treatment options</li></ul>
08/20/2013	<ul style="list-style-type: none"><li>• Caries Risk assessment and management for infants, children, and adolescents.</li><li>• Dietary Recommendations for infants, Children, and adolescents.</li><li>• Recommended food intake Patterns</li></ul>

08/27/2013	<ul style="list-style-type: none"> <li>• Periodicity of examination, preventive dental services, anticipatory Guidance and oral Tx for infants Children, and adolescents</li> <li>• Prescribing Dental Radiographs for infants, adolescents, and persons with Special Health care needs</li> </ul>
09/03/2013	<ul style="list-style-type: none"> <li>• Role of Dental prophylaxis in Pediatric Dentistry</li> <li>• Fluoride Therapy</li> <li>• Xylitol Use in caries prevention</li> <li>• Infant Oral Health Care</li> </ul>
09/10/2013	<ul style="list-style-type: none"> <li>• Record Keeping</li> <li>• Informed Consent</li> </ul>
09/17/2013	<ul style="list-style-type: none"> <li>• Behavior Guidance for the Pediatric Dental Patient</li> <li>• Use of local anesthesia for Pediatric Dental Patient</li> <li>• Use of Nitrous Oxide for Pediatric Dental patients</li> <li>• Minimizing Occupational Health Hazards associated with Nitrous Oxide</li> </ul>
09/24/2013	<ul style="list-style-type: none"> <li>• Preparing for your Child's Sedation visit</li> <li>• Sedation Record</li> <li>• Monitoring and management of Pediatric Patients during and after sedation for diagnostic and therapeutic procedures</li> <li>• Use of Anesthesia Personnel in the administration of office-based deep sedation /General Anesthesia</li> </ul>
10/01/2013	<ul style="list-style-type: none"> <li>• Assessment of acute traumatic injury</li> <li>• Emergency oral care for infants, children and adolescents</li> <li>• Management of acute dental trauma</li> <li>• Decision tree for management of an avulsed permanent tooth</li> </ul>
10/08/2013	<ul style="list-style-type: none"> <li>• Prevention of Sports-related Orofacial injuries</li> <li>• Use of Bleaching for Child and Adolescent Patients</li> <li>• Pain Management</li> </ul>
10/15/2013	<ul style="list-style-type: none"> <li>• Pediatric Restorative Dentistry</li> <li>• Pulp Therapy for primary and immature Permanent teeth</li> <li>• Interim Therapeutic Restoration (ITR)</li> </ul>
10/22/2013	<ul style="list-style-type: none"> <li>• Pediatric Oral surgery</li> <li>• Post-operative Instructions for extractions/oral surgery</li> </ul>
10/29/2013	<ul style="list-style-type: none"> <li>• Use of Antibiotics Therapy for Pediatric Dental Patients</li> <li>• Antibiotic Prophylaxis for patients at risk of infection</li> </ul>
11/05/2013	<ul style="list-style-type: none"> <li>• Dental Management of Pediatric Patients Receiving Chemotherapy, hematopoietic Cell Transplantation, and/or Radiation</li> </ul>
11/12/2013	<ul style="list-style-type: none"> <li>• Management of Patients with Cleft Lip/Palate and Other Craniofacial Anomalies</li> </ul>
11/19/2013	<ul style="list-style-type: none"> <li>• Management of the developing Dentition and occlusion in Pediatric Dentistry</li> </ul>
11/26/2013	<ul style="list-style-type: none"> <li>• Adolescent Oral Health Care</li> <li>• Tobacco Use</li> <li>• Intraoral/Perioral piercing and oral Jewelry/Accessories</li> </ul>
12/03/2013	<ul style="list-style-type: none"> <li>• Perinatal Oral Health care</li> <li>• Oral Health care for pregnant Adolescent</li> </ul>
12/10/2013	<ul style="list-style-type: none"> <li>• Periodontal Diseases of Children and Adolescent</li> </ul>

	<ul style="list-style-type: none"> <li>• Periodontal Therapy</li> <li>• Treatment of Plaque induced gingivitis, chronic Periodontitis, and other clinical conditions</li> </ul>
12/17/2013	<ul style="list-style-type: none"> <li>• Oral Health Care/Dental management of Heritable Dental developmental Anomalies</li> <li>• Acquired Temporomandibular Disorders in Infants, Children, and Adolescents</li> </ul>
12/24/2013	<ul style="list-style-type: none"> <li>• No Class</li> </ul>
12/31/2014	<ul style="list-style-type: none"> <li>• No Class</li> </ul>
01/07/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
01/14/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
01/21/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
01/28/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
02/04/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
02/11/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
02/18/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
02/25/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>
03/04/2014	<ul style="list-style-type: none"> <li>• Case Presentation</li> </ul>

## Journal Club Schedule

Date	Topic	Articles
09/20/2012	Dental caries/ Sealants	
09/27/2012	No journal	
10/04/2012	No Journal Club	
10/11/2012	Fluoride/ Xylitol/ Chlorhexidine	
10/18/2012	Growth and Development/Ceph	
10/25/2012	Malocclusion/ X-bite	
11/01/2012	Space loss/ Ectopic Eruption	
11/08/2012	Pulp Therapy	
11/15/2012	Trauma	
11/22/2012	Trauma-Avulsion	
11/29/2012	Bleeding Disorders	
12/06/2012	Diabetes/ Hypothyroidism/Endocrine disorder	
12/13/2012	Congenital Heart Diseases	
12/20/2012	No Journal Club	
12/27/2012	No Journal Club	
01/07/2013	Respiratory Diseases/ Asthma	
01/14/2013	Syndromes	
01/21/2013	Dental Development/Morphology	
01/28/2013	Dental Materials	
02/07/2013	Oral Medicine Formulary	
02/14/2013	Oral Pathology	

# Graduate Oral Pathology OMDS 503

## Faculty Contact Information

<b>Name</b>	<b>Email</b>	<b>Phone</b>	<b>Office</b>
Dr Sara Gordon	<a href="mailto:gordonsa@uic.edu">gordonsa@uic.edu</a>	312-996-1104	525B
Dr Joel Schwartz	<a href="mailto:joschwar@uic.edu">joschwar@uic.edu</a>	312-355-4311	556

Office Hours: by appointment (email).

**Course Description** Graduate Oral Pathology is a self-study course for residents at UIC College of Dentistry. It is designed to build upon the resident's undergraduate oral pathology education in order to develop the oral pathology skills required for success in a dental specialty. Course resources will be available on the course Blackboard site, and will include lecture notes, study questions, self-assessment quizzes, puzzles, Podcasts from the undergraduate curriculum, and selected projects on special topics completed by previous residents. The textbook will serve as a mandatory course resource.

When the resident is ready, progress will be evaluated by written examination.

## **Objectives**

Through knowledge developed in this course, the dentist will:

1. Diagnose lesions and conditions of the head and neck based on the clinical signs and symptoms, clinical history, and pertinent laboratory data.
2. Briefly describe the behavior, clinical appearance, prognosis, and treatment of oral diseases.
3. Select, order and interpret appropriate radiographs, laboratory procedures and other diagnostic tests in order to establish a diagnosis.
4. Use the principles of evidence-based dentistry to plan the management of a patient with oral or systemic pathology.
5. Serve as a community and practice resource for information about diseases relevant to her/his specialty.

## **Grading**

Written Exam (open book, only Neville text permitted, minimum 80% grade) - 92%



Completion of all quizzes within the set deadlines for each quiz - 8%  
(please see Google Calendar for due dates)

You must obtain a passing grade (above 80%) on EACH of the above components to pass the course.

A = 90-100%

~~80%~~80

F = B e l w 80%

### **Details about the Written Exam**

**Scope of the Exam:** The exam will cover all of oral pathology, within the scope of the topics in the assigned textbook. We will not cover chapters on facial pain and forensic dentistry. The exam will have the same breadth of content, and be at the same level, for all residents regardless of specialty.

Each exam will

from our extensive exam bank. It will include MCQ as well as extended choice matching and short-answer questions, many or most based on cases. It requires educated clinical judgment more than simple regurgitation of facts. The factual knowledge baseline is that of the D2 student but there must be an additional layer of judgment based on additional clinical experience.

Passing grade on the exam is 80%.

The exam will be written in a room to be determined and announced via BlackBoard announcement/email/added to the course Google Calendar.

The exam starts promptly (no exceptions). You may want to arrive 5 minutes early.

If you fail the exam, you may re-take it on the re-take date, scheduled in the week following the original test date (check the Google calendar for the current semester's dates). We would strongly encourage meeting with Dr Gordon and/or Dr Schwartz to discuss your performance.

If you fail the exam a second time, you may re-take it a third time. We would require remedial meetings with Dr Gordon and/or Dr Schwartz in advance.

A third exam failure would result in an F grade. Also, no re-takes are permitted after the end of the term; thus if you wish a second or third attempt at the exam is **MUST BE COMPLETED WITHIN THE TERM YOU TAKE THE COURSE.**

### **Exam dates:**

Please check the course Google calendar for the current semester's exam dates.

**Required Course Textbook - Which you are permitted to bring into the final exam**

**Neville, Damm, Allen, and Bouquot: Oral and Maxillofacial Pathology, 2nd or 3rd edition. ISBN 0-7216-6695-7**

Highly recommended resources (but not permitted at the final exam):

American Academy of Oral Medicine: Clinician's Guide to Treatment of Common Oral Conditions. This is NOT available in local bookstores: order it online, for example it is carried by Amazon and is available from the American Academy of Oral Medicine ( [www.aaom.com](http://www.aaom.com) ) and from the publisher BC Decker

( [www.bcdecker.com](http://www.bcdecker.com) ). Cost: \$24.95. It's a great handbook for clinical practice.

Other recommended but optional titles in the low-cost Clinician's Guide series include:

· Treatment of Medically Complex Patients, Tobacco Cessation ·  
Facial Pain

Emedicine.com, the world's largest medical textbook

Oral Pathology Image Database of the University of Iowa -  
[www.uiowa.edu/~oprml/AtlasHome.html](http://www.uiowa.edu/~oprml/AtlasHome.html)

Oral Pathology Web Cases - [www.uiowa.edu/~oprml/webcase/](http://www.uiowa.edu/~oprml/webcase/)

University of Southern California School of Dentistry Oral Pathology -  
[www.usc.edu/hsc/dental/opfs/index.html](http://www.usc.edu/hsc/dental/opfs/index.html)

Dermatology Internet Service (DermIS) - [www.dermis.net/index\\_e.htm](http://www.dermis.net/index_e.htm)

WebPath : The Internet Pathology Laboratory from the University of Utah -  
[medstat.med.utah.edu/WebPath/webpath.html#MENU](http://medstat.med.utah.edu/WebPath/webpath.html#MENU)

NIDCR: Dental, Oral and Craniofacial Genetic Diseases/Disorders -  
[www.nidr.nih.gov/cranio/index.html](http://www.nidr.nih.gov/cranio/index.html)

The Merck Manual of Diagnosis and Therapy, 17th edition -  
[www.merck.com/pubs/mmanual/](http://www.merck.com/pubs/mmanual/)

# Radiology for the Dental Specialist: 2012

**Course Status:** APPROVED

**Course:** OMDS 621/617 **Version:** 1 **Title:** Radiology for the Specialist

**Date Entered:** 7/26/11 11:40:15 AM

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**General reason for this request:**

To focus, consolidate and update previous radiology courses (OMDS 621 Advanced Radiology I, 2 hrs and OMDS 622 Advanced Radiology II, 2 hrs) taught at the post-doctoral level. These courses will be combined into a single course and offered for 1 hour of credit.

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**Course Rubric:** OMDS/ Oral Medicine and Diagnostic Sciences

**Primary Unit:** 1965/ Oral Medicine and Diagnostic Science

**Course Number:** 621/617

**Course Version:** 1

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**COURSE TITLE:** Radiology for the Specialist

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**COURSE DESCRIPTION: (Limited to 250 characters or 25 words)**

This course serves to supplement and expand the knowledge student's gain in their pre-doctoral curriculum. General principles of radiation physics, radiation biology, patient selection criteria, and normal anatomy are presented in an overview format in order to reiterate the fundamentals of diagnostic radiology. The radiographic characteristics of infection, cysts formation, neoplasms, reactive lesions, systemic disease, trauma and developmental anomalies are presented in terms of selecting the proper imaging modality and establishing a differential diagnosis. The advantages and disadvantages of advanced diagnostic imaging systems, including digital radiology, CT/CBCT and MRI, will be presented in light of their potential contribution to assisting the clinician in his/her ability to provide optimal patient care at the level of a reasonably competent dental specialist.

**NOTES TO STUDENTS:**

PowerPoint handouts where appropriate. Specific references to slides and class notes will be available at <http://intranet/depts/radio/index.htm>

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**ALIAS COURSE(S):**

None

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**EXPECTED REGISTRATION:**

Professional programs. (100%)

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**Type of course:**

Requirement for the following programs: certificate

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**Relationship to other courses offered by primary unit:**

Compliments Advanced Oral Pathology I, II and diagnostic courses.

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**Relationship of this course to similar courses offered by other academic units:**

Compliments pathology and diagnostic courses.

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**COURSE OBJECTIVES:**

The purpose of the course is to provide a clear understanding of diagnostic radiology as it relates to clinical specialties within dentistry.

1. This course expands the graduate student's appreciation of the integral part radiology plays in the diagnosis and ultimate treatment of diseases that establish themselves in the oral and maxillofacial region.
  2. This course provides an excellent background for utilizing ionizing radiation as an adjunct to establishing a differential diagnosis relative to the various clinical disciplines.
  3. Successful completion of this course prepares the student for satisfactory performance as a specialist.
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**MAJOR TOPICS:**

1. Radiographic signs: Recognize the radiographic signs of infection, cysts, tumors, fibro-osseous lesions and traumatic injury.
  2. Metastatic lesions: Recognize the radiographic hallmarks of metastatic lesions and radiographic manifestations of systemic diseases.
  3. Computed tomography/cone-beam tomography: Understand the concept, application, benefits and limitations of CT and CBCT
  4. Magnetic resonance imaging: Understand the concept, application, benefits
  5. Digital imaging: Understand the concept, application, benefits and limitations of digital imaging.
  6. Advanced imaging study: Appreciate the radiobiologic consequences associated with an advanced imaging study.
  7. Imaging modality: Understand the clinical indications for selecting an advanced imaging modality in order to solve a complex diagnostic problems.
  8. Literature review
- 

**SAMPLE SOURCES AND RESOURCE MATERIALS:**

PowerPoint handouts where appropriate. Specific references to slides and class notes will be available at <http://intranet/depts/radio/index.htm>

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**EVALUATION CRITERIA FOR STUDENT PERFORMANCE:**

Literature review/written paper – 100%

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**PREREQUISITE(S):**

Enrollment in a certificate program in the College of Dentistry/Medicine

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**RECOMMENDED BACKGROUND:** DDS/DMD/Medical degree

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**CREDIT HOURS:**

1 hour.

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**TYPE OF INSTRUCTION:**

Type of Instruction  
Discussion

Contact Hours/Week  
1

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**FACULTY PROPOSER(S):** Richard Monahan

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RADIOLOGY FOR THE SPECIALIST  
(OMDS 617)  
Meets Monday, 7:30 am-8:30 am  
CRN 16221

June 4	Introduction & Pathology Review
June 11	Radiographic Interpretation: part 1. Radiobiology, ALARA/ALRAP, recognize the radiographic signs of infection, cysts
June 18	Radiographic Interpretation: part 2. Recognize the radiographic signs of tumors, fibro-osseous lesions and traumatic injury.
June 25	Computed tomography/Conebeam CT concept, application, benefits and limitations. Software navigation and interpretation.
July 2	no class
July 9	Digital Imaging and Magnetic Resonance Imaging: concepts, application, benefits and limitations
July 16	CBCT software presentation: iCAT

Sequencing of topics may be modified pending class progress. A literature review paper is required. Details follow separately. This paper will require approximately 8 hours of independent study.

## **Imaging for the Specialist 2012**

Class requirement: you have to write a paper.

Your grade in this course will be the grade you get on this paper.

Please follow these instructions

1. select a radiology topic covered in class (please select something interesting)
2. research the topic
3. write a 3 to 5 page paper with four or more references
4. print the paper
5. attach a cover sheet that has your name, the title of your paper and your grad program
6. The paper is due on or before August 15. Hand the paper to me or leave at the reception desk in central radiology, Room 125. Do not submit electronically.
7. You must keep a copy of the paper for yourself since things can get lost

Thank you for following the above instructions.

Any questions please contact me at [Rmonahan@uic.edu](mailto:Rmonahan@uic.edu)

R. Monahan  
Course Director

*Revised May 2012*

## **OMDS 615 (2012)**

Seminars in Anesthesia, Pain & Anxiety Control in Dentistry

Course Director: Z. Messieha, DDS

### **Goals:**

Course Participants should have an understanding of the following.

- 1) Pre-anesthesia medical risk assessment.
- 2) Monitoring under anesthesia.
- 3) Different anesthetic regimens available including enteric, inhalation and parenteral routes.
- 4) Non-pharmacological management of anxiety.
- 5) Post-operative analgesia.

### **Format:**

Seminars with possible literature reviews.

### **Evaluation:**

Satisfactory/unsatisfactory based on participation in the seminars.

### **Absence policy:**

Each participant is allowed to miss one seminar with previous arrangement with the course director. Unexcused absence or exceeding the allowed time will constitute an unsatisfactory grade in the course.

### **Location and time:**

Pediatric Dentistry conference room on second floor.

Dates and time will vary. Schedule will be given to the participants via e-mail ahead of time.

### **References:**

Sedation; S. Malamed 4<sup>th</sup> Edition.

Sedation in the Dental Office; Dionne, Phero & Beck

Basics of Anesthesia; Stoelting

Seminar handouts

**Credit hours:** 1 hour

## **OMDS 615 (2012)**

Introduction to hypnosis	-	Dr. Anne Koerber (TBA)
Pre-anesthesia evaluation	-	Dr. Z. Messieha
Introduction to Nitrous Oxide sedation	-	Dr. Z. Messieha
Sedative hypnotics	-	Dr. Z. Messieha
Narcotics	-	Dr. Z. Messieha
Oral Sedation	-	Dr. Z. Messieha
Monitoring in anesthesia	-	Dr. Z. Messieha
Dynamics of office-based anesthesia guidelines for patient selection and regulatory issues Dr. Z. Messieha		
Anesthesia emergencies	-	Dr. Z. Messieha
Overview of analgesics	-	Dr. Z. Messieha
Inhalation anesthetics	-	Dr. Z. Messieha
Principles of Dental local anesthesia	-	Dr. Z. Messieha
Anesthesia and sedation for the special needs patient	-	Dr. Z. Messieha



**SCHEDULE – Fall 2012**

Department of Orthodontics, COD Room 138 (Ricketts Room)  
Tuesdays from 7:30am to 8:30am

Tuesday 09/04/2012 <b>7:30-8:30am</b>	Lec. 1 7:30-8am 8-8:30am	Course Overview, Organization and Expectations Introduction to the Craniofacial Team	<b>Dr. Doa Dada</b>
Tuesday 09/11/2012 <b>7:30-8:30am</b>	Lec. 2	Genetics and Genetic Counseling	<b>Richard T. Dineen</b>
Tuesday 09/18/2012 <b>7:30-8:30am</b>	Lec. 3	Embryology, Etiology, Pathogenesis, Anatomy and Classification of Cleft Lip and Palate.	<b>Dr. Phimon Atsawasuwon</b>
Tuesday 09/25/2012 <b>7:30-8:30am</b>	Lec. 4 7:30-8am 8-8:30am	Craniofacial Growth Psychological Considerations	<b>Dr. Doa Dada</b> <b>Dr. Shella Raja</b>
Tuesday 10/02/2012 <b>7:30-8:30am</b>	Lec. 5	Cleft infant Procedures	<b>Dr. Sheldon Rosenstein</b>
Tuesday 10/09/2012 <b>7:30-8:30am</b>	Lec. 6	Surgical Management of Cleft Lip and Palate	<b>Dr. Jason Jamali</b>
Tuesday 10/16/2012 <b>7:30-8:30am</b>	Lec. 7	Alveolar Bone Grafting	<b>Dr. Michael Miloro</b>
Tuesday 10/23/2012 <b>7:30-8:30am</b>	Lec.8	Cleft Orthognathic Surgery	<b>Dr. Jason Jamali</b>
Tuesday 10/30/2012 <b>7:30-8:30am</b>	Lec. 9	Orthodontic Considerations	<b>Dr. Carla Evans</b>
Tuesday 11/06/2012 <b>7:30-8:30am</b>	Lec. 10	Residents' Presentations	<b>Residents</b>
Tuesday 11/13/2012 <b>7:30-8:30am</b>	Lec. 11	The Child with Birth Defect	<b>Dr. Indru Punwani</b>
Tuesday 11/20/2012 <b>7:30-8:30am</b>	Lec. 12	Nasoalveolar Molding	<b>Dr. Emily Williams</b>
Tuesday 11/27/2012 <b>7:30-8:30am</b>	Lec. 13	Facial Prosthetics	<b>Dr. George Syros</b>
Tuesday 12/04/2012 <b>7:30-8:30am</b>	Lect 14	Long-term Orthodontic Outcomes for Cleft Patients	<b>Dr. Sheldon Rosenstein</b>
Tuesday 12/11/2012 <b>7:30-8:30 am</b>	Lect 15	Final Exam	

UNIVERSITY OF ILLINOIS AT CHICAGO  
Department of Orthodontics

ORTD 615 - Fall semester, 2013  
DIAGNOSTIC PROCEDURES

<u>Day</u>	<u>Date</u>	<u>Time</u>	<u>Seminar #</u>	<u>Topic</u>	<u>Instructor</u>
Tuesday	Aug 13	8:30-12:30	1	Clinic Charts, Photography, Social/Medical/Dental History, Clinical Exam	Kusnoto
Thursday	Aug 15	1.30-4:30	2, 4	Introduction to Digital Cephalometric Landmarks	Kusnoto
Monday	Aug 19	1:30-4:30	2	Introduction to Cephalometrics and Landmarks Downs Analysis	Manasse
Thursday	Aug 22	9:30-12.30	11/17	Special Diagnostic Considerations/Treatment Objectives/Problem List Development	Evans
Monday	Aug 26	9:30-12:30	3/15	Proportional Analyses Anthropometrics, Natural Head Position, Reference Planes	Evans
Tuesday	Aug 27	2:30-4:30	5	Dental Cast Analysis, Occlusogram	Kusnoto/Galang
Wednesday	Aug 28	9:30-12:30	6, 9	Cephalometric Analysis (Tweed, Steiner, Holdaway) Cephalometric Analysis (ABO, Wits)	Taha Taha
Friday	Aug 30	9:30-4:30	18a, b	Computerized Cephalometrics (+ lab session)	Kusnoto
Tuesday	Sep 3	9:30-12:30	14b	Advanced Cephalometric Anatomy	Yue
Tuesday	Sep 10	9:30-12:30	7	Soft Tissue Analysis	Tsay
Tuesday	Sep 10	2:30-4:30	22	ABO Scoring	Doa/Masoud Manasse
Wednesday	Sep 11	9:30-12:30	10	Introduction to Bioprogressive and Ricketts Cephalometric Analysis	Sanchez / Opperman
Thursday	Sep 12	9:30-12:30	19/20	Ricketts Analysis + Introduction to VTO	Sanchez / Opperman
Thursday	Sep 19	9:30-12:30	12a, b	Dental Age/Hand-Wrist Films/Cervical Vertebrae	Handelman/Eltink
Thursday	Sep 26	9:30-12.30	16	Ceph Superimpositions	Lippincott
Friday	Oct 4	1:30-4:30	21	Digital Cephalometric Superimpositions/ Pitchfork Analysis	Kusnoto
Friday	Oct 11	1:30-4:30	14a	Frontal/Basilar Radiographs	Kusnoto
Wednesday	Oct 23	9:30-12:30	23	3D Diagnosis and Treatment Planning	Kusnoto

**Department of Orthodontics and Pediatric Dentistry**

**University of Illinois at Chicago**

**Orthodontic-Pediatric Early Intervention treatment seminar series**

**Course coordinators:** Dr Ralph Robbins and Dr Rodney J Vergotine

**Course Abstract:**

This course provides Orthodontic and Pediatric dental residents the opportunity to jointly assess and present a case that will require multi-phase orthodontic treatment. Cases are then treated by the resident team either in the Orthodontic or Pediatric dental clinic.

**Course Description:**

Clinical cases for treatment are identified in either the Orthodontic or Pediatric dental clinic.

Orthodontic and Pediatric dental residents are paired and a specific case assigned to each pairing.

Cases are usually in the mixed dentition and require comprehensive orthodontic care that is slated to be completed in multiple phases.

The resident pairing work together to acquire diagnostic records (casts, pictures, radiographs). Records are evaluated and a comprehensive treatment plan with multiple options are developed. This is then presented to a joint gathering of all current Orthodontic and Pediatric dental residents and faculty.

Clinical care for accepted cases are initiated in either clinic and respective faculty supervise treatment of the case.

Cases in progress or those completed are presented at a later seminar series.

**Course Objectives:**

1. Orthodontic and Pediatric residents are exposed to cases that can be completed jointly.
2. Identify a normal developing dentition.
3. Identify problems in the developing dentition such as – crowding, excessive overjet, excessive overbite, congenitally missing teeth, supernumerary teeth, skeletal discrepancies, air way concerns, deleterious habits, anterior and posterior crossbites.

4. Importance of space maintenance due to loss of specific primary teeth.
5. Assessment and treatment of delayed eruption of teeth.
6. Evaluating which developing problems may lead to an interceptive phase of treatment.
7. Utilization of appropriate appliances to correct problems in the developing dentition.

**Evaluation criteria:**

1. Satisfactory presentation of a joint case.

**Course Materials:**

1. Dentistry for the Child and Adolescent by McDonald and Avery, Mosby Elsevier publishing company, 9<sup>th</sup> edition, 2011.
2. Contemporary Orthodontics, Proffit et al, Mosby Elsevier publishing company, 5<sup>th</sup> edition, 2013.
4. Selected articles from the following Journals – Pediatric Dentistry, Journal of Dentistry for Children, American Journal of Orthodontics and Dentofacial Orthopedics, The Angle Orthodontist.
5. American Association of Orthodontists clinical guidelines and reading materials.
6. American Academy of Pediatric Dentistry clinical guidelines and reading materials.

Research Methodology (OSci 451)

Fall Semester, 2012  
Tuesday 4:30 – 5:30 P.M., Room 230D  
(Course Director, G. Adami, Dept of Oral Medicine  
& Diagnostic Sciences, Rm 569F, 6-6251)

Sept. 4	Course Overview/Writing an Abstract	Dr. G. Adami
Sept. 11	On-line literature Search Meets in Library Library of the Health Sciences, Room 303	Abigail Goben
Sept. 18	Electronic Patient Records	Dr. R. Rada
Sept 25	Overview of Statistics	G. Adami
Oct. 2	Dental Materials Now and the Future	Dr. A. Bedran-Russo
Oct. 9	Human Research/IRB protocol approval	Dr. I. Punwani
Oct. 16	Usage of animals in research	G. Adami
Oct. 23	Critical Reading of the Literature Part 1	Dr. J. Crawford
Oct. 30	Critical Reading of the Literature Part 2, <b>Abstract Due</b>	G. Adami
Nov. 6	Human Research/IRB protocol approval	Dr. I. Punwani
Nov. 13	Dental Surgery Now and the Future	Dr. E. Collins
Nov 20	Behavioral Science and Dentistry	Dr. A. Koerber
Nov. 27	Review, Diagnostics, Clinical Trials	G. Adami
Dec. 11	<b>Final Exam, Submit 3 page proposal</b>	G. Adami

Research Methodology (OSci 451)  
Fall Semester, 2012  
Tuesday 4:30 – 5:30 P.M. , Room 230D

Course Objectives:

- A. To help students become clinicians who can use advances in dental and oral research in a timely manner.
- B. To present students with recent advances and developments in the field of oral and dental research.
- C. To help students obtain from the library and its resources relevant research findings.
- D. To familiarize students with research methods in oral and dental research and to help them apply this to private practice.
- E. Help students to prepare and choose a research project

The course meets one hour per week. Students are responsible in the selection of a research topic and the writing of a statement of the problem and hypothesis in abstract form. The research topic may be obtained from the department, assigned by the mentor/instructor or suggested by the student. The student must also demonstrate the ability to use the literature sources. Class participation is essential.

Your research topic must be directly related to your ongoing or future work at the College of Dentistry.

Course Assignments:

Abstract: The topic, hypothesis and specific aims written in abstract form (10% of final grade) are due October 30 and will be returned the next week.

The final exam, an essay test on the course material, accounts for 60% of the final grade.

A description of the Research Proposal on the research topic - format shown below - accounts for 28% of the final grade. Due the last day of class. it will be graded on how well it answers the questions in the Research Protocol Section of this handout. References are required and should be in a form acceptable for UIC Graduate College Masters Thesis.

2% class participation.

## **Components of a Research Protocol**

### **Hypothesis:**

**A statement that explains a group of observations that may or may not be true.**

**Good hypotheses are ones that can be tested experimentally. They are also based on observations.**

#### **Example 1.**

**You observe that patients that lose a tooth tend to lose adjacent teeth within 3-5 years. You can derive many different hypotheses from this observation.**

**1. Patient lose adjacent teeth due to specific defects of oral hygiene in that region.**

**Test by identifying oral hygiene defects and correcting them. Will this reduce rate of tooth loss versus teeth at other positions?**

**2. Changes due to tooth movement.**

**Test by filling up space by replacing the tooth - will this reduce loss of adjacent teeth versus teeth at other positions?**

#### **Example 2.**

**Observation: TGF- $\beta$  and other growth factors are required for proliferation of gingival epithelial cells in cell culture.**

**1. TGF- $\beta$  is required for efficient healing after periodontal surgery.**

**3. Growth factors are required for efficient healing after periodontal surgery.**

**3. Elevated levels of TGF- $\beta$  accelerate enamel abrasion in the adult.**

## **Specific Aim:**

A brief description of what you plan on doing.

Most grant proposals have 3 - 5 specific aims.

**Example:** To test if TGF- $\beta$  affects healing rates after periodontal surgery using a rabbit model, we will follow up surgery with the application of TGF- $\beta$  at 3 different concentrations. Then we will compare healing rates based on histological evaluation at 3, 5 and 10 days after surgery.

## **Literature Review:**

Designed to give the reader an understanding of one area of science based on the major research in that area including the latest findings.

Can be a stand alone review.

Can be the introduction of a research paper.

Can be the background for a grant proposal.

## **INTELLECTUAL PROPERTY**

Nonphysical property that results from the process of intellectual creativity.

Can be an **INVENTION** - a device contrivance or process originated after study and experiment (Webster's Dictionary)

Other types of Intellectual Property include:

**TRADE MARK** - Coca Cola

**EXPRESSIONS**- the way something is expressed - Like in a book, movie or computer software.

**SERVICE MARK** - Golden Arches for McDonalds

When you copy something from a journal or text or other book and do not have it in quotes you are violating the copyright



**When you take an idea and use it in a paper you are also violating copyright if you do not credit the source.  
This happens with movies all the time.**

**Example Abstract of protocol. One half to one page.**

### **Use of a Recombinant Adenovirus to Induce a Transient Cell Cycle Arrest.**

The efficacy of cancer chemotherapeutic treatment is limited due to toxic effects on normal tissues. For example, in approximately 40 percent of patients treated with chemotherapeutic agents marked destruction of normal oral tissue occurs. This can lead to life threatening infection, a major complication of cancer chemotherapy.

Many cancer chemotherapy drugs, such as methotrexate, etoposide, bleomycin, ara-c and 5-fluorouracil are directly toxic to the rapidly dividing oral epithelial cells. These drugs, also like many chemotherapeutic drugs, are cell cycle phase specific. They are preferentially toxic to cells in the DNA synthesis (S) or the mitotic phases of the cell cycle. We will take advantage of this specificity to design a strategy that will spare normal replicating epithelial cells, but not tumor cells during exposure to these drugs. We will demonstrate this methodology with widely used chemotherapy drugs, methotrexate, bleomycin and etoposide which are effective for a variety of tumor types.

Normal cells respond to overexpression of the p16<sup>INK4a</sup> cell cycle inhibitor by reversibly arresting in the G1 phase of the cell cycle, while many tumor cells do not. For example, it is estimated that about 30% of acute leukemias, have defects in pRB expression and are not expected to respond to p16 expression. Lung tumors, bladder carcinoma cervical cancers show even higher levels of Rb inactivation. **We will investigate the hypothesis that a recombinant adenovirus expressing the p16 gene can be used to transiently inhibit proliferation in normal replicating epithelial cells and protect them from cancer chemotherapy toxicity but not protect tumor cells such as cervical carcinoma cell lines.**

We will compare normal epithelial and cervical cancer cells for their response to the combinatorial effects of p16 expression and methotrexate treatment. A replication defective adenovirus for gene therapy that inducibly expresses the cell cycle inhibitor p16<sup>INK4a</sup> will be constructed and used to express p16<sup>INK4a</sup> in normal and tumor cells. The cells will then be subjected to cancer chemotherapeutic agent that kill cells in S phase and we will determine if the strategy protects the normal cells from death. Successful completion of these studies will set the stage for experiments determining whether this protocol will protect against methotrexate toxicity in vivo using the hamster methotrexate induced oral toxicity model. Our ultimate aim is to create a gene therapy strategy of transient cell cycle arrest in patients that can be used to offer protection from tissue toxicity induced by a large group of cancer drugs, without increasing survival of tumor cells. This approach will potentially allow higher doses of chemotherapy drugs to be used and should lead to increased cure rates.

# **UIC**

## **OSCI 594**

### **Statistics for Dental Residents**

### **Course Syllabus**

**Instructors:**

**Christopher Engeland, PhD**

**Charles W. LeHew, PhD**

**Brad Johnson, DDS, MHPE**

**Grace Viana, MSc**

**Ellen BeGole, PhD**

**Judy Yuan, DDS, MS**

College of Dentistry, University of Illinois at Chicago

**Fall 2012**

## Fall 2012 3 credits

### Course Director:

**Christopher Engeland**, PhD, Assistant Professor, Department of Periodontics, College of Dentistry, UIC, 801 S. Paulina (MC 859), Chicago, IL 60612, room 502A, Tel: 312 413-4175; [engeland@uic.edu](mailto:engeland@uic.edu)

The primary goal of this course is to introduce residents to a variety of techniques for analyzing quantitative data and to provide hands-on experience in performing these analyses with statistical software. Residents will gain a sense of the breadth of techniques available for understanding and exploring relationships in data. This course will provide a statistical basing for future research questions and projects. Ultimately, we hope this course will free residents from the tyranny of fear which seemingly surrounds quantitative data analysis in research. ☺

### Course Instructors (Contact Information):

**Christopher Engeland (Perio)**, Room 502A, Tel: 312 413-4175; [engeland@uic.edu](mailto:engeland@uic.edu)

**Charles W. LeHew (Pedo)**, Room 563B, Tel: 312 355-4479; [lehew@uic.edu](mailto:lehew@uic.edu)

**Brad Johnson (Endo)**, Room 302A, Tel: 312 996-8519; [bjohnson@uic.edu](mailto:bjohnson@uic.edu)

**Grace Viana (Ortho)**, Room 109B, Tel: 312 996-1810; [gviana@uic.edu](mailto:gviana@uic.edu)

**Ellen BeGole (Ortho)**, Room 237A, Tel: 312 996-1812; [ebegole@uic.edu](mailto:ebegole@uic.edu)

**Judy Yuan (Pros)**, Room 304, Tel: 312-355-4856; [yuanjudy@uic.edu](mailto:yuanjudy@uic.edu)

**Course objectives:** Upon completion of this course residents will be able to:

- 1 Organize a data set and examine data for discrepancies and errors in entry.
- 2 Explore the relationships between variables in a data set and identify interesting patterns.
- 3 Select appropriate statistical methods for testing hypotheses in a set of data and perform the analyses.
- 4 Interpret and report the results of statistical analyses.
- 5 Recognize the limitations of quantitative data analysis.

While residents will cover a number of issues during the course, it is not expected that they will gain an in depth view of all aspects of every issue that is raised. However, the residents will have a chance to begin to structure their thinking around issues in data analysis, gain a set of skills that will allow them to ask new research questions, and become more informed consumers of the research literature in their field.

## **Suggested Resources:**

We recommend the following textbook:

MJ Norusis, SPSS Statistics 17.0 Statistical Procedures Companion, Prentice Hall Inc., 2009.

This textbook can be purchased online (new) from amazon.com for \$82 (free shipping included) and second hand for ~ \$19 plus shipping. It is not mandatory for the course but is a highly useful resource. Your individual departments have also been encouraged to purchase a copy – speak to your individual course instructor(s). This book is a useful and practical guide to statistics and is specifically aimed at using SPSS.

In addition, Dr. Ellen BeGole has written an SPSS Manual which will serve as a valuable study aid for this course. See your course instructor(s) about accessing/obtaining a copy of this study material. A copy will also be made available on Blackboard. Both the textbook and manual are optional for this course and material will not appear on the final exam that has not been covered in online lectures and assignments. Optional readings from these books will be suggested throughout the course.

## **Software:**

**Computers in the 4<sup>th</sup> floor Commons Area (COD) have been equipped with Statistical Package for the Social Sciences (SPSS) 19.0 for the purpose of this course.** If you prefer to own a copy of SPSS, this software can be purchased from the UIC Micro/Station (<http://www.microstation.uic.edu>) or ordered online or from many computer stores. It might also be available through UIC's E-Sales website (we can only see the software available to faculty/staff): <http://www.uic.edu/depts/acc/home/SOFTWARE.html>

Versions of SPSS older than SPSS 19.0 may not be compatible and are not acceptable for this course.

SPSS has become the standard windows-based statistical software package for most psychological and educational applications. It is available in versions for MS Windows, Mac, and other operating systems. It includes a large array of statistical procedures and provides a convenient windows-based interface. As residents, you are eligible to purchase the "Graduate Pack" version, which comes with very little documentation but is only \$115 for the PC and Mac, and includes all the procedures you're likely to want for a long time. Be sure that your version of SPSS includes a full version of SPSS Base (with no case or variable limits), SPSS Advanced Models™, and SPSS Regression Models™, as you will need them for this course.

## **Course Sites:**

We will be using Blackboard for this course. This is available through the UIC home page quick links, and there is also a link from the College of Dentistry home page.

The URL is <http://blackboard.uic.edu>. You login using your University NetID and login.

All course lectures will take place in Blackboard. The course datasets and documentation will also be posted there, as will class-wide discussions and questions for instructors.

## **Schedule:**

The course includes posted lectures (in PowerPoint), assigned readings, and hands-on analysis of data sets. The lectures and assignments for each topic (along with the data sets) can be found by pressing the "Assignments" tab in Blackboard.

The optional readings will provide additional information on topics covered in the lectures as well as help in conducting analyses using SPSS.

## **Assignments:**

Residents will be grouped into pairs. For assignments, each pair will post their results on Blackboard. In addition, residents will individually comment on the postings of 2 pairs each week who have been selected as Presenters. Thus, online discussion is required about posted assignments and will comprise 20% of the grade for each assignment. As with many things, the more you put into this course the more you will get out of it. This discussion should take place between Tuesday (5 pm) and Fri (5 pm), after which we will provide feedback on the assignments posted by that week's Presenters, the other submitted assignments, and the ensuing online discussion.

Although each assignment will be graded, we will not be able to formally review each individual assignment. Rather, a general review of all the assignments will be posted. Each assignment is worth 8/10 marks.

The remaining 2/10 marks will be determined by the discussion, and this will be scored on an individual basis. We strongly recommend commenting on the posting pair's assignment before reading other people's points of discussion. You may also wish to comment on your experience in completing the assignment (e.g., things you had trouble with, things you liked/disliked, points of confusion).

Please take note of past residents' experiences. Those who participated fully gained self-confidence in quantitative analysis, while the few who remained silent got little out of the course. If you do not ask any questions, we will presume that means you understand the topic fully. However, if it means that you feel so confused that you don't even know what to ask, we urge you to tell us, even if you can't articulate the specifics. The units build on one another, so it is vital that you stay up-to-date. To facilitate this, you will generally be given two weeks for each topic. Importantly, we want you to get the most out of this experience!

The final assignment is an exam that allows you to put into practice many of the techniques you learned in the course. The exam will be "open book" at a computer and will be completed individually.

### **A note about expectations concerning on-line interactions and feedback:**

The faculty will prepare assignments for the residents and will monitor the on-line discussions about the presentation. The faculty will not participate directly in the on-line “Questions for Each Other.” If we did, it would inhibit the resident learning process. Residents are expected to learn from each other and their colleagues’ expertise. However, faculty will read and respond to any questions posted in the “**Queries to Instructor**” forum once every weekday. The faculty will also provide comprehensive end-of-topic comments about presented assignments. The comments should be sufficient to provide adequate feedback to residents. There will be no weekly individual feedback. This is an unrealistic expectation because of the amount of time it would require from faculty. The on-line learning in this course is different from classroom teaching. In the current asynchronous on-line mode, learning relies more on individual effort and group work compared to the spontaneous interactions among/between faculty and residents in the classroom. One advantage of the on-line format is that written interactions can be more thoughtful than in the off-the-cuff classroom interactions because the residents have more time to think through their ideas before presenting them. The time requirements of this course are very flexible in this format as well. And don’t forget, faculty will always be there to clarify.

### **Office Hours:**

Instructors for each department will hold one office hour per week, during which they will be available for one-on-one instruction and advice if needed. Specific times will be listed (by department) on the Blackboard site. Alternate times to meet will be at the discretion of the instructor.

### **Grading:**

The course grade depends on two factors:

- 1) **Completion of assignments 70%** (breakdown: 80% group assignment; 20% individual on-line discussion)
- 2) **Final exam 30%**. Grading: A: 85-100 B: 75-84 C: 66-74

Note. To obtain a grade of A, a resident must score high in both components AND get a total score of 85 or more. **To pass the course, the resident must pass both the assignments and the final exam.**

**Course Overview by Week:**

<b>Week 1</b>	<b>Design of Research and Experiments</b>
<b>Week 2</b>	<b>Hypothesis Testing and Error</b>
<b>Weeks 3-4</b>	<b>Data Entry and Exploratory Data Analysis</b>
<b>Weeks 5-6</b>	<b>Categorical Data and Chi-Square</b>
<b>Weeks 7-8</b>	<b>Hypothesis Testing Applied to Means</b>
<b>Weeks 9-10</b>	<b>Non-Parametric Tests</b>
<b>Weeks 11-12</b>	<b>Repeated Measures</b>
<b>Weeks 13-14</b>	<b>Correlation and Regression</b>
<b>Week 15</b>	<b>Review (Assignment)</b>

**2012 Assignment Schedule:**

<b>Week(s)</b>	<b>Receive assignment (Friday) - 7am</b>	<b>Assignment due (generally Tuesday) - 5pm</b>	<b>Comment due (Friday 5pm)</b>	<b>Points</b>	<b>Assignment Done By...</b>
<b>1</b>	<b>8/24</b>	<b>8/31 (Fri)</b>	<b>NA</b>	<b>NA</b>	<b>Individual</b>
<b>2</b>	<b>8/31</b>	<b>9/7 (Fri)</b>	<b>NA</b>	<b>/5</b>	<b>Individual</b>
<b>3-4</b>	<b>9/7</b>	<b>9/18</b>	<b>9/21</b>	<b>/10</b>	<b>Pair</b>
<b>5-6</b>	<b>9/21</b>	<b>10/2</b>	<b>10/5</b>	<b>/10</b>	<b>Pair</b>
<b>7-8</b>	<b>10/5</b>	<b>10/16</b>	<b>10/19</b>	<b>/10</b>	<b>Pair</b>
<b>9-10</b>	<b>10/19</b>	<b>10/30</b>	<b>11/2</b>	<b>/10</b>	<b>Pair</b>
<b>11-12</b>	<b>11/2</b>	<b>11/13</b>	<b>11/16</b>	<b>/10</b>	<b>Pair</b>
<b>13-14</b>	<b>11/16</b>	<b>11/27</b>	<b>11/30</b>	<b>/10</b>	<b>Pair</b>
<b>15</b>	<b>11/30</b>	<b>12/7 (Fri)</b>	<b>NA</b>	<b>/5</b>	<b>Individual</b>
<b>16</b>	<b>Final Exam Wed Dec 12 5-7pm</b>				

# **UIC**

## **PEDD 410**

### **Principles and Methods in Dental Research I**

**Instructor:  
Charles W. LeHew, PhD**

College of Dentistry

University of Illinois at Chicago

**Fall 2013**



**Course Description:** Introduces students to several of the more commonly used statistical procedures for testing hypotheses; provides students with a beginners set of tools for using statistics. *Prerequisite(s):* Enrollment in post-graduate or graduate program in pediatric dentistry.

## **Learning Objectives**

1. The student will master basic concepts of scientific investigation including formulation of a research question, specification of hypotheses and variables, operational variables, measurement, statistical testing, and reporting of results.
2. The student will conduct a literature review to frame a research project.
3. The student will develop a research project and methods section with the assistance of a primary advisor.
4. The student will prepare a literature review and present it at Clinic and Research Day. (which may be the same review as in #1)
5. The student will complete training in IRB human subjects research standards and research as it impacts HIPAA.
6. Be able to use the university reference manager or other reference program.
7. The student will compare and contrast survey, observational, and RCTs as research methods, on quality of data obtained, and on the relative difficulties in doing each kind of research.

While residents will cover a number of issues during the course, it is not expected that they will gain an in depth view of all aspects of every issue that is raised. However, the residents will have a chance to begin to structure their thinking around issues in data analysis, gain a set of skills that will allow them to ask new research questions, and become more informed consumers of the research literature in their field.

### **Suggested Resources:**

Residents will read extensively in the literature of their choice. No other readings are required. We recommend the following textbook, which is also used in the Statistics Course OSCI 594:

MJ Norusis, SPSS Statistics 17.0 Statistical Procedures Companion, Prentice Hall Inc., 2009.

### **Software:**

Statistical analyses are not required for this course. However, Residents are encouraged to consider this course as a companion to OSCI 594 where more detailed statistical instruction is provided. Computers in the 4<sup>th</sup> floor Commons Area (COD) have been equipped with Statistical Package for the Social Sciences (SPSS) 19.0 for the purpose of this course. If you prefer to own a copy of SPSS, this software can be purchased from the UIC Micro/Station (<http://www.microstation.uic.edu>) or ordered online or from many computer stores. It might also be available through UIC's E-Sales website (we can only see the software available to faculty/staff): <http://www.uic.edu/depts/accc/home/SOFTWARE.html>

Versions of SPSS older than SPSS 19.0 may not be compatible and are not acceptable for this course.

SPSS has become the standard windows-based statistical software package for most psychological and educational applications. It is available in versions for MS Windows, Mac, and other operating systems. It includes a large array of statistical procedures and provides a convenient windows-based interface. As residents, you are eligible to purchase the "Graduate Pack" version, which comes with very little documentation but is only \$115 for the PC and Mac, and includes all the procedures you're likely to want for a long time. Be sure that your version of SPSS includes a full version of SPSS Base (with no case or variable limits), SPSS Advanced Models™, and SPSS Regression Models™, as you will need them for this course.

### **Course Sites:**

We will be using Blackboard for this course. This is available through the UIC home page quick links, and there is also a link from the College of Dentistry home page.

The URL is <http://blackboard.uic.edu>. You login using your University NetID and login.

All course documents, including this syllabus, and the course schedule will be posted on Blackboard. Updates to the schedule will also be posted and all Residents are expected to monitor Blackboard for new postings and announcements.

### **Schedule:**

The course will meet every other week on Thursday mornings at 8:00 a.m. in the Gerlach

Conference Room adjacent to the Graduate Pediatric Clinic. A detailed schedule is provided below and will be posted on Blackboard.

**Assignments:**

Residents are expected to come prepared for class each week. Suggested reading materials will be posted on Blackboard.

The main outcome of the course will be a completed literature review which ideally will carry forward into your certificate or Masters paper. Residents will identify a research topic at the beginning of the semester and begin reviewing the literature. As you go, you will formulate a research question that you can answer based on the literature reviewed. A summary of the literature culminating in a researchable question will be the goal of each Resident and will result in a draft poster by the end of the semester.

**Office Hours:**

Office hours will be posted on Blackboard. The instructor will also make himself available by appointment. Appointments can be arranged in person or via email: [lehew@uic.edu](mailto:lehew@uic.edu).

**Grading:**

Satisfactory completion of a literature and a draft poster are required. Failure to accomplish these goals will result in course failure. Satisfactory completion will result in an “A” grade.

### **Course Overview by Week:**

- Week 1**      Lecture/discussion: Developing a research proposal: research questions/hypotheses/designs.
- Week 2**      Present a research topic and plan for searching the literature in class.
- Week 3**      Lecture/discussion: Creating a research plan from your literature review.
- Week 4**      Lecture/discussion: Assessing sample size and statistical power.
- Week 5**      Lecture/discussion: Writing an abstract for clinic and research day (due December)
- Week 6**      Presentation of literature review and potential methods—3 presenters tbd
- Week 7**      Presentation of literature review and potential methods—3 presenters tbd
- Week 8**      Presentation of literature review and potential methods—3 presenters tbd

# **UIC**

## **PEDD 411**

### **Principles and Methods in Dental Research II**

**Instructor:  
Charles W. LeHew, PhD**

College of Dentistry

University of Illinois at Chicago

**Academic Year 2012-2013**

**Course Description:** Designed to provide the student with an understanding of the scientific method. *Prerequisite(s):* PEDD 410.

## **Learning Objectives**

1. The student will describe the elements of data entry and data cleaning, and will enter data for his/her research project.
2. The student will present data from his/her research in a meaningful way through tables and graphs.
3. The student will write a results and discussion sections that meaningfully present data and interpret them.
4. Given a study, the student will be able to discuss the strengths and limitations.

While residents will cover a number of issues during the course, it is not expected that they will gain an in depth view of all aspects of every issue that is raised. However, the residents will have a chance to begin to structure their thinking around issues in data analysis, gain a set of skills that will allow them to ask new research questions, and become more informed consumers of the research literature in their field.

### **Suggested Resources:**

There are no assigned texts for this course. Each resident is expected to keep abreast of the current literature pertaining to the subject of the resident's certificate paper or master's thesis. Faculty advisors may suggest additional texts as appropriate.

### **Software:**

Statistical analyses are not required for this course. However, it is expected that most certificate papers and master's theses will be hypothesis testing studies for which statistical analysis will be required. Computers in the 4<sup>th</sup> floor Commons Area (COD) have been equipped with Statistical Package for the Social Sciences (SPSS) 19.0 for the purpose of this course. If you prefer to own a copy of SPSS, this software can be purchased from the UIC Micro/Station (<http://www.microstation.uic.edu>) or ordered online or from many computer stores. It might also be available through UIC's E-Sales website (we can only see the software available to faculty/staff): <http://www.uic.edu/depts/acc/home/SOFTWARE.html>

SPSS has become the standard windows-based statistical software package for most psychological and educational applications. It is available in versions for MS Windows, Mac, and other operating systems. It includes a large array of statistical procedures and provides a convenient windows-based interface. As residents, you are eligible to purchase the "Graduate Pack" version, which comes with very little documentation but is only \$115 for the PC and Mac, and includes all the procedures you're likely to want for a long time. Be sure that your version of SPSS includes a full version of SPSS Base (with no case or variable limits), SPSS Advanced Models™, and SPSS Regression Models™, as you will need them for this course.

### **Course Sites:**

We will be using Blackboard for this course. This is available through the UIC home page quick links, and there is also a link from the College of Dentistry home page.

The URL is <http://blackboard.uic.edu>. You login using your University NetID and login.

All course documents, including this syllabus, and the course schedule will be posted on Blackboard. Updates to the schedule will also be posted and all Residents are expected to monitor Blackboard for new postings and announcements.

### **Schedule:**

The course will meet every other week on Thursday mornings at 8:00 a.m. in the Gerlach Conference Room adjacent to the Graduate Pediatric Clinic. A detailed schedule is provided below and will be posted on Blackboard.

**Assignments:**

Residents are expected to come prepared for class each week. Suggested reading materials will be posted on Blackboard.

The main outcome of the course will be a completed certificate paper or master's thesis which each Resident will present in class during Spring semester. In addition, all residents will present their studies to the full faculty at the May faculty meeting.

**Office Hours:**

Office hours will be posted on Blackboard. The instructor will also make himself available by appointment. Appointments can be arranged in person or via email: [lehew@uic.edu](mailto:lehew@uic.edu).

**Grading:**

Satisfactory completion of a research paper is required. Failure to accomplish this goal will result in course failure. Satisfactory completion will result in an "A" grade.



## **Course Overview by Week:**

### **Fall Semester**

- Week 1** Lecture: Sample size and statistical power
- Week 2** Lecture: Creating a Data Analysis Plan
- Week 3** Review and critique literature review (presenters tbd)
- Week 4** Review and critique literature review (presenters tbd)
- Week 5** Review and critique literature review (presenters tbd)
- Week 6** Lecture: Data Entry, Data Cleaning, and creating variables in SPSS
- Week 7** Writing Abstract for Clinic and Research Day; bring drafts to rewrite in class
- Week 8** Lecture: Creating Tables and Figures& writing a Results section

### **Spring Semester**

- Week 1** Data Analysis: All Residents present data analysis plans in class
- Week 2** Preparation for Clinic and Research Day: Present Posters in Class
- Week 3** Presentation of Research Studies and Findings (presenter tbd)
- Week 4** Presentation of Research Studies and Findings (presenter tbd)
- Week 5** Presentation of Research Studies and Findings (presenter tbd)
- Week 6** Presentation of Research Studies and Findings (presenter tbd)
- Week 7** Presentation of Research Studies and Findings (presenter tbd)
- Week 8** Presentation of Research Studies and Findings (presenter tbd)

**Department of Pediatric Dentistry  
University of Illinois at Chicago  
PEDD 501 – Dental Pediatrics**

**Course Directors**

Indru Punwani, DDS, MS, Professor of Pediatric Dentistry  
Rodney J Vergotine BChD, MSc(Dent)

**Course Abstract**

These courses supplement the basic physical diagnosis course which covers the fundamentals of pediatric medicine for all the systems. These courses prepare the resident with the ability to be able to interact with health professionals, in regard to knowledge of pediatrics at the general and subspecialty level, and dental management of child and adolescent patients.

**Course Objectives**

To train the residents in the fundamentals of pediatric medicine including:

- (a) developmental disabilities
- (b) genetic/metabolic disorders
- (c) infectious diseases
- (d) sensory impairments
- (e) chronic diseases.

**Course Description**

This courses and seminar series provide the resident with necessary knowledge to interact comfortably with other health professionals and manage the dental care for patients with systemic diseases/disorders and special health care needs. Seminars/lectures are given by all section heads of sub-specialties of pediatrics. The dental implications of all developmental disabilities and medical compromise conditions are discussed in detail and modalities of treatment are reviewed. Special considerations are given to the dental implications and management of these conditions.

**Major Topics**

Developmental disabilities including:

- a. Cerebral palsy,
- b. Mental retardation; and
- c. Down's syndrome

Neurological disabilities including:

- a. Convulsive and seizure disorders,
- b. Neuromuscular disorders; and
- c. Developmental defects of the nervous system.

The medically compromised patient including:

- a. Congenital and acquired heart disease,
- b. Hematological disorders,

- c. Respiratory diseases,
- d. Infectious diseases,
- e. Coagulations disorders,
- f. Endocrine disorders; and
- g. Immunocompromised patients.

### **Evaluation Criteria**

Class attendance and participations in discussions.

**Credit Hours: 2**

### **Course Schedule Spring 2012**

#### **January**

- 18 Dr Kalichman – The developmentally disabled child
- 25 Dr Kalichman – The Autistic child

#### **February**

- 1 Dr Schmidt – Pediatric Oncology
- 14 Dr Stahl – Obesity (Tuesday)
- 15 Dr John – Pediatric Nephrology
- 17 Dr Park – Pediatric Asthma (Friday)
- 21 Dr Bicknese – Pediatric Neurology (Tuesday)
- 29 Dr Furtado – Pediatric Emergencies

#### **March**

- 7 Dr Norohna – Pediatric Dermatology
- 14 Dr Sharon – Sickle Cell Anemia
- 28 Dr Norohna – Pediatric Dermatology

**April**

- 3 Dr Bhat – The Neonate (Tuesday)
- 4 Dr Ohler – Pediatric Pharmacology
- 10 Dr Frank – Pediatric Infectious Diseases (Tuesday)

**May**

- 30 Dr Rubinfeld – Sleep apnea

Department of Pediatric Dentistry  
University of Illinois at Chicago

## **PEDD 595**

Summer 2012

### **Course Director**

Irwin Seidman, DDS, Clinical Assistant Professor, Pediatric Dentistry

### **Course Abstract**

This course first reviews and subsequently introduces pediatric dentistry residents to some of the skills necessary to begin their training program.

### **Course Description**

During the sessions we review what the residents have already learned regarding the emergency management of dental trauma and pediatric operative dentistry. The residents are also introduced to dental digital photography and how to incorporate it into their clinical experiences.

### **Course Objectives**

1. To orient the residents so that they will have a body of knowledge that will allow them to function in both the Pediatric Dental Clinic and the UIC Hospital Emergency Room.
2. To introduce them to digital intra and extra-oral photography. We will orient them on how to obtain accurate images and to manipulate those images so that they can be used effectively in their practice.

### **Major Topics**

1. The emergency management of dental trauma
2. Pediatric operative dentistry including the criteria for selection, tooth preparation, and manipulation of various restorative materials.
3. The selection and use of digital clinical photographic equipment.
4. The manipulation of digital images in Photoshop and how to use those images in preparing presentations.

### **Evaluation Criteria**

1. Seminar attendance and participation.

2. Completion of a clinical photographic assignment

### **Course Materials**

1. Selected articles from various publications.
2. Reading materials from the course director
3. A digital clinical intraoral set-up (DSLR)

### **Credit Hours**

2

### **Weekly Topics**

1. Emergency Management of Dental Trauma: Fractures and Luxations
2. Emergency Management of Dental Trauma: Intrusions, Avulsions, and Soft Tissue Lacerations
3. Digital Clinical Photography: Equipment Selection and Principles
4. Digital Clinical Photography: Techniques and Image Management
5. Pediatric Operative Dentistry: Crowns
6. Pediatric Operative Dentistry: Amalgam and Bonded Restorations
7. Clinical Exercise: Obtain Clinical Images and Manipulate Those Images With Photo Management Software

Department of Pediatric Dentistry

University of Illinois at Chicago

**PEDD 595- Pulp Therapy and Trauma/Behavior Management**

Fall 2012

**Course Director**

Irwin Seidman, DDS, Clinical Assistant Professor, Pediatric Dentistry

**Course Abstract**

This course will provide the pediatric dentistry resident with the knowledge necessary to select from various kinds of pulp therapy and use that therapy in the treatment of both carious and traumatized teeth. The residents will also be introduced to the principles of behavior management as it applies to children within the dental environment.

**Course Objectives**

1. To acquaint the resident with the various types of pulp therapy available for use in Pediatric Dentistry and how to select and apply those techniques in the treatment of carious and traumatized teeth.
2. To acquaint the resident with various principles and philosophies pertaining to the management of children within the dental environment and how to apply them in the clinically.

**Major Topics**

1. The histopathology of the carious process
2. Indirect and direct pulp capping
3. Pulpotomy and Pulpectomy
4. The histopathology of dental trauma on the tooth and supporting structures
5. Treatment of dental fractures
6. Treatment of the exposed pulp after trauma
7. Repositioning and reimplantation
8. The prevention of dental trauma
9. The principles of communicating with the child patient
10. The affect of pre appointment procedures and tell, show and do on a child's behavior
11. Pain control, nitrous oxide and oral sedation in controlling a child's behavior

## **Evaluation Criteria**

1. Seminar attendance and participation
2. Presentation of a case involving pulp therapy due to either caries or trauma

## **Course Materials**

Selected articles from various publications

## **Credit Hours**

2

## **Weekly Topics**

1. Can the Pulp Heal?: Histopathology of the Carious Process
2. Indirect and Direct Pulp Capping
3. Pulpotomy and Pulpectomy
4. Histopathology of Dental Trauma on the Tooth and Supporting Structures
5. Treatment of Injuries Involving Dental Fractures
6. Treatment of Injuries Involving Luxation and Avulsion
7. Prevention of Dental Trauma
8. Communicating With The Child Patient
9. The Affect of Pre Appointment Procedures and Tell, Show and Do Upon a Child's Behavior
10. Pain Control, Analgesia and Sedation in Managing a Child's Behavior I
11. Pain Control, Analgesia and Sedation in Managing a Child's Behavior II
12. Medical-Legal, Ethical and Moral Factors of Behavior Management
13. Presentation of Pulp Therapy/Trauma Cases



**Department of Pediatric Dentistry  
University of Illinois at Chicago  
PEDD 600 – Advanced Pediatric Dentistry technique / Growth and Development.**

**Course Directors: Dr Kapil Vij and Dr Rodney J Vergotine**

**Goals and Objectives**

To develop a differential diagnosis using accepted clinical and radiographic procedures.

To think critically and to problem solve in relation to orthodontic care of the patient.

To recognize the normal and abnormal in the development of the dentofacial complex including conditions which interfere with the patients' ability to function.

To recognize esthetic deficiencies and understand their relationship to the overall management of the orthodontic patient.

To recognize those complex problems which are beyond his or her ability to treat and must know when to refer to a competent and qualified orthodontic specialist.

To monitor therapeutic outcomes of treatment rendered by himself/ herself or by a specialist.

To have sufficient knowledge to be able communicate with the orthodontic specialist and understand the nature of the treatment being rendered.

To develop a limited and properly sequenced interceptive treatment plan in the primary and/or mixed dentition patient.

To understand the relationship between the various dental specialties and be able to assume the role of primary treatment coordinator in integrating a multi-disciplinary approach to the care of the adult patient.

To analyze and treat minor orthodontic problems.

To be able to fabricate and use removable appliances, space maintainers, and lingual arches when indicated.

To recognize predisposing conditions and must recognize which require intervention and/or active treatment to prevent disease.

<b><u>SEMINAR OVERVIEW</u></b>		
<b>Session Number</b>	<b>Session Date</b>	<b>Topic /Activity</b>
1	June 26	Band loop, lower lingual holding arch fabrication lab and soldering exercises
2	July 10	Records: Which photos to take? What to include? How to position pt?  Proffit Ch. 1  How to crop photos Composite page fabrication X-cell Sheet of Pts
3	July 24	Identifying normal from abnormal growth. Identifying the various classifications of dental occlusion. Skeletal and dental malocclusion
4	Aug.7	Discuss eruption guidance and space supervision during developing dentition Appliances
5	Aug.21	Growth modification and dental compensation for skeletal problems.
6	Sept. 4	Basic biomechanical principles and the biology of tooth movement.
7	Sept. 18	Diagnosis of dental, skeletal, and functional abnormalities in the primary, mixed, and young permanent
8	Oct. 2	Treatment of abnormalities that can be corrected or significantly improved by evidence-based early interventions: eruption guidance, space supervision, and interceptive orthodontic treatments.
9	Oct. 16	Transverse and dimensional problems involving simple posterior crossbites.
10	Nov. 13	Anterior crossbite discrepancies associated with localized dentoalveolar crossbite displacement and functional anterior shifts – Pseudo- Class III
11	Nov. 27	Anterior spacing with or without dental protrusion

12	Dec. 11	Ectopic Eruption, ankylosis, and tooth impaction problems
13	Dec. 18	Effects of supernumerary (e.g. mesiodens) and /or missing teeth
14	Jan. 8	Types of Expansion Types of Expanders? Advantages
15	Jan. 22	Crash Course Review: Expanders: Hyrax, Bonded Expander, Quad Helix, W-Arch, Frankel, Herbst,
16	Feb. 5	Elastomerics Review: Ties, Rubber Bands
17	Feb. 19	Expansion Overview: Appliances Part I
18	Mar. 5	Class II Correctors Moyer's Analysis Tanaka Johnson Analysis
19	Mar. 19	Problem List  Expansion- Diagnosis Expansion- Appliances  Anterior X-Bite
20	Apr. 2	Class II Malocclusion and Tx
21	Apr. 23	Class III Malocclusion and Tx Class II Correctors: Overview
22	May 7	Proffit Ch. 2
23	May 28	Proffit Ch. 3
24	Jun 4	Downs Analysis
25	Jun 18	Steiner Analysis, Wits Analysis Dolphin Imaging: How to trace Ceph

## REFERENCES

1. Proffit, W.R. 2013. *Contemporary Orthodontics*. 5<sup>th</sup> Edition. Mosby, St. Louis, MO.

Practice Administration Course

Shar Fadavi, DDS, MS

Spring 2012

Speakers' Schedule

Speaker	Date	Time
Dr. Lance Lambert	Wednesday January 11 <sup>th</sup> , 2012	12:00 – 1:00 pm
Ms. Elain Pesavento	Thursday January 19 <sup>th</sup> , 2012	12:00 – 1:30 pm
Dr. Ricardo Mendoza	Monday January 23 <sup>rd</sup> , 2012	4:30 – 5:30 pm
Ms. Elain Pesavento	Thursday January 26 <sup>th</sup> , 2012	12:00 – 1:30 pm
Dr. Flavia Lamberghini	Thursday February 2 <sup>nd</sup> , 2012	12:00 – 1:00 pm
Dr. Nicky Hill-Cordell	Wednesday February 8 <sup>th</sup> , 2012	12:00 – 1:30 pm
Dr. Mary Hayes	Wednesday February 15 <sup>th</sup> , 2012	4:30 – 5:30 pm
Dr. Denise Fisher	Monday February 27 <sup>th</sup> , 2012	4:30 – 5:30 pm
Dr. Angela Kalb	Thursday March 15 <sup>th</sup> , 2012	12:00 – 1:00 pm
Dr. Steven Kuhn	Friday March 16 <sup>th</sup> , 2012	8:00 – 9:00 am
Dr. Cissy Furusho	Wednesday April 18 <sup>th</sup> , 2012	1:00 – 2:00 pm

**Department of Pediatric Dentistry  
University of Illinois at Chicago**

**PEDD 615 – Practice Administration in Pediatric Dentistry  
Spring 2012\***

**Course Director**

Shahrbanoo Fadavi, DDS, MS, Professor, Pediatric Dentistry

**Course Abstract**

This course provides pediatric dentistry residents with knowledge needed for practice administration and prepares them to understand the different types of practice systems and to design and develop a private or public patient care delivery system.

**Course Description**

This course has two different parts: (1) seminars and lectures given by guest speakers, who are involved in private practice in different settings ranging from solo to group practice, associate or ownership, different age groups with different range of years of experience; and (2) rotations of residents to at least two of these practices.

**Course Objectives**

1. To provide the residents with understanding in establishment and administration of a contemporary pediatric dental practice.
2. To provide the residents with understanding of regulatory aspects and business skills related to practice of pediatric dentistry.
3. To provide the residents with understanding of decision making process in choosing associateship versus partnership/ownership of a private practice in the beginning of their career upon graduation.

**Major Topics**

1. Solo vs. group practice
2. Clinical Location selection
3. Buying a practice
4. Design of facilities
5. Hiring and management of employees

6. Regulatory aspects
7. Business skills

**Evaluation Criteria**

1. Seminar attendance and discussion participation.
2. Completion of selected office rotations.

**Course Materials**

1. Selected articles from various publications.
2. Reading materials from guest lecturers.

**Credit Hours**

2 credit hours

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\* Course offered in even number years

## **Suggested Topics**

1. Associate vs. partnership, buying a practice.
2. Planning and decision making for establishing a practice.
3. Business vs. profession, basic management and financial planning, design of practice facilities.
4. Establishing a private dental practice/staffing and communication.
5. Types of pediatric dentistry practices/motivation and supervision/marketing
6. Planning and decision making for establishing a practice immediately following graduation.
7. Combining practice with academic work (a new graduate's perspective).
8. Dentist as a CEO.
9. Business and accounting aspects of a dental practice.
10. Solo vs. group practice, clinical location selection, hiring and managing of employees.
11. Equipment and office design.
12. Rotations to two different offices.

## Practice Administration

PEDD 615  
Spring 2012

### Private Practice Rotations

Resident	Practice #1	Practice #2



**Department of Pediatric Dentistry**  
**The University of Illinois at Chicago**  
**PEDD 620 – Pediatric Dentistry Clinic / Case Conference**  
**2013**

**Course Directors:** Dr Alrayyes and Dr Vergotine

**Course Abstract:**

This course provides Pediatric Dentistry residents with in-depth knowledge and experience needed to achieve proficiency in all aspects of preventive, restorative, prosthetic care, interceptive and preventive orthodontics, management of traumatic injuries, pulpal and periodontal treatment and management of associated soft tissue problems in infants, children and adolescents.

**Course Description:**

(1) Clinical component

This component runs continuously throughout the entire two years of the residency program and covers all clinical experiences of residents on management of comprehensive restorative and prosthetic care for pediatric patients, management of orofacial injuries to primary, mixed and permanent dentition, evaluation, diagnosis and management of pulpal, periodontal and associated soft tissue problems. The clinical experience is performed on normal healthy infants, children and adolescents as well as those with neurological, mental and medically compromised conditions. Clinical experience encompasses non-pharmacological and pharmacological behavior management. Pharmacological interventions include inhalational analgesia (nitrous oxide), conscious sedation and operating room experiences under general anesthesia. Also included is interceptive orthodontics that includes management in the primary and mixed dentition of malocclusion such as anterior and posterior crossbites.

(2) Didactic component – consists of three components.

[a] Diagnosis and Treatment planning

This is conducted during the first year of residency. Topics include preventive care, fluoride, cariology and AAPD clinical guidelines. Clinical cases are presented by each resident to highlight different aspects of comprehensive care following current guidelines.

[b] Orthodontic / Hospital rounds

This seminar series is presented once a week throughout the two years of residency. Multiple faculty participate during these presentations. Residents present operating room cases for that week and each case is critically discussed. Any medical conditions are presented in-depth to the entire group. In addition residents also present Orthodontic cases for consideration for treatment in the clinic. Faculty are assigned to approved cases. Cases in-progress are presented for updates and completed cases are presented to evaluate outcome. In collaboration with the Department a Early orthodontic seminar series is presented where pediatric residents are paired with a orthodontic resident to present a joint case that is in need of multi-phase orthodontic intervention. Once approved and presented these case are jointly treated by both residents in either the Orthodontic or Pediatric clinic.

[c] Journal Club

All resident participates in a once a week review/presentation and discussion of pertinent pediatric dentistry articles. Topics include a broad list of topics recommended by the ABPD for preparation for completing Part 1 of the ABPD board certification examination. Topics are also added based on the latest publications in the Pediatric Dentistry Journal. A small group discussion format is utilized with multiple faculty participating as well.

**Course Objectives**

1. To provide the residents with adequate knowledge in treating infants, children and adolescents with wide ranging levels of dental anxiety using non-pharmacological and pharmacological approaches consistent with approved guidelines.
2. To provide residents with the proficiency in application of preventive practices including scientific principles, techniques and treatment planning for prevention of oral diseases and dental health education programs in delivery of dental care.

**Major topics**

1. Clinical experiences in treating infants, children and adolescents.
2. Clinical experiences in comprehensive restorative, prosthetic care and interceptive orthodontics for pediatric patients.
3. Non-pharmacological approaches to behavior management.
4. Pharmacological approaches to behavior management.

### **Evaluation criteria**

1. Satisfactory completion of clinical cases.
2. Satisfactory completion of chart review and quality assurance.
3. Preparation and presentation of cases for combined Pedo/Ortho seminars, diagnosis and treatment planning seminars and journal club.

### **Course materials**

1. Dentistry for the Child and Adolescent by McDonald and Avery, Mosby Elsevier publishing company, 9<sup>th</sup> edition, 2011.
2. Dental management of the medically compromised patient, Little et al, Mosby Elsevier publishing company, 8<sup>h</sup> edition, 2012.
3. Contemporary Orthodontics, Proffit et al, Mosby Elsevier publishing company, 5<sup>th</sup> edition, 2013.
4. Selected articles from the following Journals – Pediatric Dentistry, Journal of Dentistry for Children, American Journal of Orthodontics, JADA, Clinical Orthodontics, Pediatrics.
5. American Academy of Pediatric Dentistry guidelines and reading materials.
6. <http://www.iadt-dentaltrauma.org/for-professionals.html>

### **Schedules**

1. Diagnosis and Treatment planning
2. Journal Club
3. Pedo/Ortho early intervention orthodontic seminar series.

**Hospital Dentistry course      PEDD 621      2012**

Course Coordinators: Dr Lambert & Dr Vergotine

**Abstract:** The course will combine presentations by both faculty and residents. Introduction will cover the protocol for functioning in an hospital environment and thus include hospital protocols, selection of general anesthetic cases, obtaining and providing consultations and functioning within the hospital emergency department. Admission of pediatric cases and working with other services in the hospital is also reviewed. Common pediatric medical conditions are discussed and management and implications for dental care is emphasized.

**Objectives:** Residents should be able to:

1. Provide inpatient and outpatient consultations
2. Provide dental treatment in a hospital setting both in the emergency department and under general anesthesia.
3. Order appropriate laboratory tests and interpret results.
4. Co-admit patients to the hospital
5. Be familiar with the most common chronic medical conditions found in children, including the management and dental considerations for care.

**Evaluation Criteria:**

Students are evaluated on class participation, presentations and assignments.

<b>Date</b>	<b>Time</b>	<b>Topic</b>	<b>Presenter</b>	<b>Faculty</b>
7/11	9:00 – 12:00pm	Orientation to course.		Vergotine
		Laboratory tests, values and interpretation		Vergotine
7/18	9:00 – 12:00pm	Seizure Disorders	Singh	Vergotine
		Bleeding Disorders	Whittington	Vergotine
7/25	12:00 – 01:00pm	Attention Deficit Disorders	Khan	Vergotine
<b>8/01</b>	<b>9:00 – 12:00pm</b>	<b>Hospital Dentistry protocol and procedures</b>		<b>Lambert</b>
8/08	9:00 – 10:30	Heavy metal poisoning	Davis	Lambert

8/15	09:00 – 12:00pm	Congenital Heart disease	Popejoy	Lambert
		Asthma	Gray	Lambert
8/22	Departmental meeting			
8/29	Orthodontic class			
9/05	9:00 – 12:00pm	Emergency room protocol	#####	Vergotine
		Cystic Fibrosis	DAVIS	Vergotine
		Fragile X syndrome	GRAY	Vergotine
9/12	09:00 – 10:30	Cleft lip and Palate	KHAN	Lambert
9/19	09:00 – 12:00pm	Pediatric transplant patient	POPEJOY	Vergotine
		Spina Bifida	WHITTINGTON	Vergotine
9/26	09:00 – 10:30	Diabetes	SINGH	Lambert
10/03	09:00 – 12:00pm	Child Abuse and neglect	KHAN	Vergotine
		Hearing and Visually impaired children	GRAY	Vergotine
10/10	09:00 – 10:30	PKU and other metabolic diseases	DAVIS	Lambert
10/17	09:00 – 12:00pm	Down syndrome	POPEJOY	Vergotine
		Pediatric Oncology patient	WHITTINGTON	Vergotine
10/24	09:00 – 10:30	Mucopolysaccharid disorders	SINGH	Lambert
10/31	09:00 – 12:00	Scoliosis	KHAN	Vergotine
		Hydrocephalus	GRAY	Vergotine
11/7	09:00 – 10:30	Cerebral Palsy	DAVIS	Lambert
11/14	09:00 - 12:00pm	Autism spectrum disorders	POPEJOY	Vergotine
		Prader Willi syndrome	WHITTINGTON	Vergotine
11/28	09:00 – 10:30	Angelman's syndrome	SINGH	Lambert
12/5	09:00 - 12:00pm	Childhood depression	KHAN	Vergotine
		Goldenhar syndrome	GRAY	Vergotine

12/12	09:00 – 12:00pm	Turner syndrome	DAVIS	Lambert
		DiGeorge syndrome	POPEJOY	Lambert
12/19	09:00 – 10:30	CHARGE syndrome	SINGH	Lambert

**Guidelines for presentation of topics:**

1. Powerpoint to be used for presentations.
2. References to include Textbooks, Pubmed, Scientific journals
3. Outline: Introduction, Epidemiology, Pathogenesis, Clinical presentation, Treatment options, Dental management.
4. An article in Pediatric Dentistry journal should complement the write-up.
5. A synopsis of the presentation is to be distributed to faculty and fellow residents in advance.
6. 3-5 questions should be created and distributed to residents 2-3 days before presentation.

**Department of Pediatric Dentistry**  
**University of Illinois at Chicago**  
**PEDD 673 – Pediatric Physical Diagnosis**  
**Summer 2013**

**Course Director:**

Dr Peter Noronha MD, Department of Pediatrics, College of Medicine, UIC

**Course Abstract:**

This course intends to provide Pediatric Dentistry residents with knowledge related to History taking and Physical assessment in infants, children and adolescents.

**Course Description:**

The course has two components:

1. Didactic portion including seminars on the assessment of physical status of healthy and medically compromised children,
2. Clinical/practical experience including bedside rotations to different wards in the Pediatrics department of the University of Illinois Hospital and Health Sciences system.

**Major topics:**

1. Introduction to Pediatrics with history taking and physical assessment.
2. Review of respiratory system.
3. Review of cardiovascular system.
4. Review of neurological system.
5. Review of gastrointestinal system.
6. Clinical evaluation of healthy and medically compromised patients in pediatric wards.

**Evaluation criteria:**

1. Seminar attendance.
2. Clinical evaluation of pediatric patients.

**Course Schedule:**

July 17	Introduction to Pediatrics with history taking and physical examination.
July 24	Review of respiratory system
August 29	Review of cardiovascular system
September 12	Review of neurological system
September 19	Review of gastrointestinal system
September 26	Clinical evaluations
October 3	Clinical evaluations
October 10	Clinical evaluations

**Course Materials:**

1. The Harriet Lane Handbook, 19<sup>th</sup> Edition.
2. Blueprints Pediatrics 6<sup>th</sup> Edition.

**Credit hours:**

1 credit hour



**Department of Pediatric Dentistry**

**University of Illinois at Chicago**

**PEDD 698 Pediatric Dentistry Research for Certificate**

**OSCI 598 Pediatric Dentistry Research for Master's Thesis**

**Course Director/Coordinator**

Dr Anne Koerber DDS, PhD

**Course Abstract**

These courses provide the credit hours for the residents to apply to his or her research project, either for the Master's or the Certificate. This course consists of individual mentoring of each resident.

**Course Description**

Residents meet individually with their primary advisor throughout the research process. Initially, the resident produces a research protocol which is approved by the primary advisor and approved by the Research committee (for Certificate students) or by the Thesis Committee (for Master's students). Next, the resident conducts research under the provision of the primary advisor, and writes the Thesis or Certificate paper. For Master's students the thesis is defended. For the certificate students, the paper is approved by the primary advisor and the Research committee. The Research committee examines progress of each resident and advisor on how well the resident is progressing. Usually a resident takes several hours of credit under this rubric, and may take up to 16 hours if the resident is late in finishing.

**Course Objectives**

The final objective is for the student to conduct a research project and write-up. The intermediate objectives are for the student to show progress towards that end.

**Major topics (n/a)**

**Evaluation criteria**

Does the student show adequate progress towards achieving a written Certificate paper or Master's thesis. Satisfactory or Unsatisfactory grade.

**Appendix R**  
**Exhibit 9**  
**Off-Service Assignments**

<b>NAME OF SERVICE</b>	<b>YEAR ASSIGNED</b>	<b>LENGTH OF ASSIGNMENT</b>
Anesthesiology	1 <sup>st</sup> year	4 continuous weeks
Pediatric Medicine	1 <sup>st</sup> year	2 weeks
Operating Room	1 <sup>st</sup> and 2 <sup>nd</sup> years	2 days a week for the entire two years of residency
Inpatient Care	1 <sup>st</sup> and 2 <sup>nd</sup> years	Variable (as needed)
Emergency Room (On Call)	1 <sup>st</sup> and 2 <sup>nd</sup> years	On-call rotations shared between 1 <sup>st</sup> and 2 <sup>nd</sup> year residents
Hospital Emergency Room Rotation	1 <sup>st</sup> years	2 weeks
Pediatric Patients with Special Health Care Needs	1 <sup>st</sup> and 2 <sup>nd</sup> years	Rotation to Habilitation Center is included during Residents' Pediatric Medicine Rotation
<b>Other (specify)</b>		

For each assignment listed above, attach a sheet providing the following information:  
(label Exhibit 9.1, 9.2, etc.)

- a. objectives of assignment;
- b. duties of students/residents when on assignment, **including all on-call responsibilities**;
- c. training received on assignment;
- d. indicate whether students/residents are required to participate in the seminars, lectures and conferences conducted by these services;
- e. faculty member responsible for off-service rotation;
- f. how training and supervision of students/residents is evaluated.

## Appendix R

Name of Service	Anesthesiology
Objectives	Gain proficiency in airway management, especially in the management of airway of the unconscious pediatric patient, and in the use of positive pressure ventilation.
Duties of Residents	Participate and perform general anesthesia activities
Training Received	Clinical experiences in preparation, evaluation, risk assessment, airway management, ventilation, induction, intubations, pt. monitoring device (EKG, BP, Pulse oximetry, capnography, fluid replacement, recovery room care and appraisal discharge.
Required Lectures/Seminars and Conferences	Yes, residents attend daily anesthesia rounds and seminars.
Required Participation	Yes.
Faculty Supervision	Attending anesthesiologists on service.
Evaluation of Residents	Residents are assessed by the supervising attending anesthesiologist and by formal faculty evaluation of residents submitted to the program director upon completion of each rotation.

## Appendix R

### Exhibit 9.2 Pediatric Medicine

Name of Service	Pediatric Medicine Rotation
Objectives	To have residents gain knowledge and experience in pediatric medicine.
Duties of Residents	Rotation of residents is achieved for a total of two weeks to different sites of pediatric medicine including general pediatrics, pediatric wards, pediatric HIV/AIDS clinic, pediatric hematology/oncology, pediatric neurology, pediatric cardiology, pediatric habilitation center and neonatology.
Training Received	The rotation provides residents with knowledge and experience in obtaining and evaluating complete medical histories, parental interviews, system-oriented physical examinations, clinical assessments of healthy and ill patients, selection of laboratory tests and evaluation of data, evaluation of physical motor and sensory development, genetic implications of childhood diseases, the use of drug therapy in the management of diseases, and parental management through discussions and explanations.
Required Lectures/Seminars and Conferences	This is achieved through the residents' round with medical students and residents throughout their rotation and participation in on-going medical seminars.
Required Participation	Residents participate in on-going seminars and grand rounds.
Faculty Supervision	Department of Pediatrics subspecialty directors
Evaluation of Residents	Residents are assessed by the supervising attending physician and by formal faculty evaluation of residents submitted to the program director upon completion of each rotation.

Appendix R

Name of Service	Operating Room Rotation
Objectives	To provide residents with clinical experiences and knowledge to function as healthcare providers in hospital-based operating room setting.
Duties of Residents	Residents perform full mouth dental rehabilitation care for children in the operating room setting.
Training Received	Residents provide the pre-operative workup and assessment, conduct medical risk assessment, gain experience in admitting procedures, inform consents and intra-operative management including completion of dental procedures, post-operative care, discharge and follow-up and completion of medical records. Residents exceed the minimum requirement for participating in 20 operative room cases.
Required Lectures/Seminars and Conferences	Yes
Required Participation	Yes
Faculty Supervision	Sahar Alrayyes, DDS; Shar Fadavi, DDS, MS; Lance Lambert, DDS, MS; Marilia Montero-Fayad, DDS; Indru Punwani, DDS, MS; Rodney Vergotine, DDS, MS
Evaluation of Residents	Residents are assessed by the supervising attending faculty and through the end-of-the-semester formal evaluation by the attending faculty.

Appendix R

Exhibit 9.4 Inpatient Care

Name of Service	Inpatient Care Rotation
Objectives	To provide the residents with experiences in inpatient care including the evaluation and medical management of pediatric patients admitted to the hospital.
Duties of Residents	Inpatient care generally includes patients in the pediatric wards, pediatric intensive care unit and in the neonatology unit. The residents respond to inpatient consults for assessment and/or care. These are either treated bedside or in the ward treatment room. Others are either treated in the emergency room or, if necessary, in the ward with the equipment being transported from the operating room. Inpatients who are being admitted for dental procedures are worked up by the pediatric dental service and the pediatric service for co-admission.
Training Received	Clinical experiences in management and evaluation of pediatric patients.
Required Lectures/Seminars and Conferences	No.
Required Participation	Yes.
Faculty Supervision	Attending physician
Evaluation of Residents	Residents are assessed by the supervising attending physician and by formal faculty evaluation of residents submitted to the program director upon completion of the rotation.

Appendix R

Name of Service	Emergency Care Rotation
Objectives	To provide the residents with competency in the assessment and management of orofacial trauma, dental pain and infections.
Duties of Residents	Treat trauma and other dental emergencies.
Training Received	Clinical experiences in diagnosis and treatment of dental emergencies, experiences in interacting with other emergency health care professionals and work closely with oro-maxillofacial surgery residents and pediatric residents leading to significant amount of peer interdisciplinary learning.
Required Lectures/Seminars and Conferences	No.
Required Participation	Yes.
Faculty Supervision	Yes.
Evaluation of Residents	Residents are assessed by the supervising attending physician and by formal faculty evaluation or residents submitted to the program director upon completion of the rotation.

## Appendix R

### Exhibit 9.6 Hospital Emergency Room Rotation

Name of Service	Hospital Emergency Room Rotation
Objectives	To provide the residents with experience in the emergency room beyond regular dental emergency duties.
Duties of Residents	Participate in the management of medical emergencies along with pediatric residents in the emergency room setting.
Training Received	This rotation is during the same hours as those of pediatrics residents. Training received includes evaluation and management of all emergency cases seen in pediatric emergency room setting. Pediatric dentistry residents participate in co-admission, obtaining medical histories, system oriented physical examination, clinical assessment, selection of laboratory tests and evaluation of data.
Required Lectures/Seminars and Conferences	No.
Required Participation	Yes.
Faculty Supervision	Pediatric emergency room physician.
Evaluation of Residents	Residents are assessed by the supervising attending physician and by formal faculty evaluation or residents submitted to the program director upon completion of the rotation.



## Appendix R

### Exhibit 9.7 Pediatric Patients with Special Health Care Needs

Name of Service	Pediatric Patients with Special Health Care Needs
Objectives	To provide the residents with experiences to broaden the knowledge and skills in the evaluation and management of pediatric patients with special health care needs.
Duties of Residents	Participate in the oral assessment and discussion of the management and delivery of necessary dental procedures for pediatric patients with special health care needs.
Training Received	These rotations are through two services: (a) Habilitation Center during rotation to pediatric medicine; (b) Craniofacial rotation. These rotations provide residents with knowledge and skills in the evaluation and management of pediatric patients with special health care needs through multidisciplinary team services.
Required Lectures/Seminars and Conferences	No.
Required Participation	Yes.
Faculty Supervision	Attending physician/dentist
Evaluation of Residents	Residents are assessed by the supervising attending physician and by formal faculty evaluation or residents submitted to the program director upon completion of the rotation.

**Appendix S**

**Exhibit 10**

**Admissions**

Provide the following information about the primary and affiliated hospitals:

	Primary Hospital	Affiliated Hospital
A. Number of hospital beds	<b>507</b>	<b>N/A</b>
B. Number of beds assigned to pediatric section	<b>General Med Ped Beds: 38; Ped ICU:12 Ped Stepdown: 6</b>	<b>N/A</b>
C. Number of elective operating half-days per week assigned to pediatric section	<b>4*</b>	<b>N/A</b>

**\* Guaranteed standing time for Pediatric Dentistry OR – Additional time is provided to Pediatric Dentistry as needed.**

Provide the most recent 12-month statistics for the following at the primary hospital (**and at affiliated hospitals, if applicable**):

A. Number of pediatric patients admitted: **140 – 150**

Indicate the 12-month time period (by month and year) these statistics reflect:  
**July 1, 2012 to June 30, 2013**

## Appendix T

### Exhibit 11 – Clinical science

#### Exhibit 11a – 1a

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Subject Area: **BIostatistics and CLINICAL EPIDEMIOLOGY** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 410 – Prin & Meth in Dent Res I**

**PEDD 411 – Prin & Meth in Dent Res II**

**OSCI 594 – Statistics for Dental Resident**

**OSCI 451 - Research Methodology**

Off-service rotation \_\_\_\_\_ to:

  X   Other (specify): **Certificate Research and MS Thesis**

**OSCI 598 – Master’s Thesis Research**

**PEDD 698 – Research in Ped Dentistry**

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **20**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No   X  

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

The objectives of training are to provide the resident with a working knowledge of biostatistics including the use of a statistical computer package and to understand and apply the process of scientific inquiry in their research.

Topics covered include a review of descriptive statistics, probability theory, hypothesis testing, principles of clinical epidemiology. All residents are required to develop a preliminary research project for presentation to the class.

**Effectiveness:**

These courses provide residents with an understanding level of biostatistics used in the pediatric dentistry literature and a foundation for the initiation of the required research project and writing a research protocol. The formal courses and one-to-one mentorship provided in this area are effective instruction and learning methods.

## Exhibit 11a – 1b

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Subject Area: **PHARMACOLOGY**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**OMDS 615 – Anesthesia and Pain Control**

**PEDD 620 – Ped Dent Clinic/Case Conference**

**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Anesthesia and Pediatrics**

       Other (specify):

       No formal instruction is provided.

- Total hours of instruction: **25**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

The objectives of training are to provide the resident with the applications of basic principles and current chemotherapeutic protocols to the practice of dentistry so that the residents are knowledgeable about the systemic and oral manifestation of drugs.

Topics covered include review of the principles of therapeutics, pharmacokinetics, drug interactions, and oral manifestations of chemotherapeutic regimens, pain and anxiety control, antibiotic, antiviral and antifungal therapy as well drugs regimes related to sedation and general anesthesia.

**Effectiveness:**

These courses and off-service rotations provide residents with knowledge at the understanding level for the use of chemotherapeutic agents in pediatric therapy integrating biomedical content with clinical applications. The formal courses and rotations in this area are effective instruction and learning methods.

**Exhibit 11a – 1c**

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Subject Area: **MICROBIOLOGY**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**OMDS 503– Graduate Oral Pathology**

**PEDD 620 – Ped Dent Clinic/Case Conference**

\_\_\_\_\_ Off-service rotation to:

\_\_\_\_\_ Other (specify):

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **16**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No   X  

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with the knowledge and understanding related to the principles of microbiology, virology, immunology, cariology and periodontal diseases.**

**Topics covered include Pathophysiology and immunology of common pediatric infectious diseases, including URI's, tuberculosis, HIV/AIDS, oral and perioral infections, bacterial endocarditis, caries and periodontal diseases.**

**Effectiveness:**

**These courses provide adequate foundation knowledge at the understanding level in microbiology. The formal courses offered in this area are effective instruction and learning methods.**



**Exhibit 11a – 1d**

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Subject Area: **EMBRYOLOGY**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/Case Conference**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

       Off-service rotation to:

       Other (specify):

       No formal instruction is provided.

- Total hours of instruction:   25
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide instruction in the principles of embryology with an emphasis on the development of the head and neck and associated craniofacial anomalies.**

**Topics covered include review of normal embryologic development of the head and neck; and development of craniofacial anomalies.**

**Effectiveness:**

**These courses provide the resident with adequate knowledge at the understanding level in normal and abnormal morphologic development of the craniofacial complex. The formal courses in this area and providing patient care for children with craniofacial abnormalities/syndromes are effective instruction and learning methods.**

Exhibit 11a – 1e

Subject Area: **GENETICS**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

\_\_\_\_\_ Dental department seminar, conference, lecture program

  X   Formal course—Title:

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/Case Conference**

**OSCI 580 – Advanced Oral Sciences I**

  X   Off-service rotation to: **Pediatrics**

\_\_\_\_\_ Other (specify):

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **14**

- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No   X  

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with a good foundation of the principles of genetics and genetic basis of normal and abnormal development of the cranio-oro-facial structures.**

**Topics covered include principles of genetic determination of inherited characteristics and genetic basis for common dental and craniofacial syndromes.**

**Effectiveness:**

**These courses provide the resident with adequate knowledge at the understanding level to diagnose and manage patients with common genetic defects in the craniofacial complex. The formal courses in this area and rotation through the pediatric clinic are effective instruction and learning methods.**

**Exhibit 11a – 1f**

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Subject Area: **ANATOMY**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

\_\_\_\_\_ Dental department seminar, conference, lecture program

  X   Formal course—Title:

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/Case Conference**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

  X   Off-service rotation to: **Anesthesia**

\_\_\_\_\_ Other (specify):

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No   X  

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with a review of head and neck anatomy.**

**Topics covered include:**

- **Temporo mandibular joint and the infra temporal fossa**
- **Osteology of the developing craniofacial complex**
- **Developmental anatomy of the craniofacial complex**
- **Oral/nasal laryngeal anatomy**
- **Adeno-tonsillar region**

**Effectiveness:**

**These courses prepare the resident with adequate foundation and knowledge at the understanding level in anatomy with an emphasis on the growing child. The formal courses in this area and rotation through the anesthesia are effective instruction and learning methods.**

**Exhibit 11a – 1g**

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Subject Area: **ORAL PATHOLOGY**

Year Offered: **2**

- Indicate how instruction is provided in this subject area:

\_\_\_\_\_ Dental department seminar, conference, lecture program

  X   Formal course—Title:

**OMDS503– Graduate Oral Pathology**

**PEDD 621 – Hospital Dentistry**

**PEDD 620 – Ped Dent Clinic/Case conference**

\_\_\_\_\_ Off-service rotation to:

\_\_\_\_\_ Other (specify):

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No   X  

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with the necessary knowledge and training in the pathophysiology, diagnosis and management of oral and perioral lesions in the developing child.**

**Topics covered include review of the epidemiology, pathogenesis, clinical characteristics, diagnostic methods, differential diagnosis and management of oral and perioral lesions and anomalies with an emphasis on the developing individual.**

**Effectiveness:**

**This course provides the resident with adequate knowledge at the understanding level in pediatric oral pathology. It integrates biomedical and clinical science contents and complements the content provided in dental pediatrics and pediatric dentistry seminars. The formal course in this area offers an effective instruction and learning method.**



**Exhibit 11a – 2.1a**

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Subject Area: **Physical, psychological and social development** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

           Formal course—Title:

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 600 – Adv Ped Dent Tech/Growth and Development**

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/Case Conference**

  X   Off-service rotation to: **Pediatrics**

           Other (specify):

           No formal instruction is provided.

- Total hours of instruction: **50**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes            No   X  

b. predoctoral medical students/residents? Yes            No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide the student with basic principles and theories of child development and the age-appropriate behavior responses in the dental setting.**

**Topics covered include:**

- Principles of physical development from infancy through adolescence**
- Normal and abnormal psychosocial development**
- Normal and abnormal language development**

**Effectiveness:**

**These courses prepare the resident with knowledge at the in-depth level to provide dental care to children with a spectrum of physical, psychological and social development problems. The formal courses in this area and rotation through the pediatrics is effective instruction and learning methods.**

Exhibit 11a – 2.1b

Subject Area: **Behavior guidance** Year Offered: **1 & 2**

**b. Child behavior guidance in the dental setting  
and the objectives of various guidance  
methods.**

- Indicate how instruction is provided in this subject area:

X Dental department seminar, conference, lecture program

X Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/case conference**

**OMDS 615 – Anesthesia and Pain Control**

\_\_\_\_\_ Off-service rotation to\_\_\_\_\_

\_\_\_\_\_ Other (specify):

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: 35

- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes\_\_\_\_\_ No X

b. predoctoral medical students/residents? Yes\_\_\_\_\_ No X

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the knowledge and train the resident in the non-pharmacologic and pharmacologic techniques in pediatric behavior management in the dental setting.**

**Topics covered include:**

- Pediatric physical, psychological and social development**
- Non-pharmacologic techniques including communication and aversive techniques  
Including voice control and use of restraints.**

**Effectiveness:**

**These courses and seminar series provide adequate knowledge at the in-depth level to the student to comfortably manage pediatric dental patients with a wide range of behavioral problems. The formal courses in this area are effective instruction and learning methods.**

Exhibit 11a – 2.1c

Subject Area: **Behavior guidance**

Year Offered: **1 & 2**

**c. Principles of communication, including listening techniques, including the descriptions of and recommendations for the use of specific techniques, and communication with parents and caregivers.**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/case conference**

**OMDS 615 – Anesthesia and Pain Control**

\_\_\_\_\_ Off-service rotation to \_\_\_\_\_

\_\_\_\_\_ Other (specify):

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **25**

- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No **X**

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No **X**

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the knowledge and train the resident in the non-pharmacologic and pharmacologic techniques in pediatric behavior management in the dental setting.**

**Topics covered include:**

- Pediatric physical, psychological and social development**
- Non-pharmacologic techniques including communication and aversive techniques Including voice control and use of stabilizing devices.**

**Effectiveness:**

**These courses and seminar series provide adequate knowledge at the in-depth level to the student to comfortably manage pediatric dental patients with a wide range of behavioral problems. The formal courses in this area are effective instruction and learning methods.**

**Exhibit 11a – 2.1d**

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Subject Area: **The Principles of informed consent relative to behavior guidance and treatment options.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 615 – Practical Admin in Ped Dent**

**PEDD 620 – Ped Dent Clinic/Case Conference**

Off-service rotation to:

Other (specify): **Student Orientation**

No formal instruction is provided.

- Total hours of instruction: **10**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes  No

b. predoctoral medical students/residents? Yes  No

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with an in-depth knowledge with process of obtaining informed consent.**

**Topics covered include informed consent, type, methods of obtaining consent, legal and ethical issues.**

**Effectiveness:**

**These course and seminar series provide the student with knowledge at the in-depth level to present and obtain informed consent prior to treatment in various settings. The formal courses and orientation are effective instruction and learning methods.**



**Exhibit 11a – 2.1e**

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Subject Area: **Principles and objectives of sedation and general Anesthesia as behavior guidance techniques, including indications and contraindications for their use in accordance with the AAPD guidance and The Teaching of Pain Control and Sedation to Dentists and Dental Students of the American Dental Association (ADA).** Year Offered: **1**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**  
**PEDD 621 – Hospital Dentistry**  
**PEDD 620 – Ped Dent Clinic/case conference**  
**OMDS 615 – Anesthesia and Pain Control**

  X   Off-service rotation to: **Anesthesia**

  X   Other (specify): **PALS**

       No formal instruction is provided.

- Total hours of instruction: **40**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide instruction in patient assessment, drug selection and the treatment of the child using pharmacologic agents**

**Topics covered include:**

- **Guidelines and regulatory issues for the use of sedation**
- **Routes of administration**
- **Use of drugs for conscious/moderate sedation**
- **Nitrous oxide**
- **Chloral hydrate**
- **Hydroxyzine**
- **Diazepam**
- **Midazolam**
- **Reversal agents**
- **Deep sedation**
- **General anesthesia**
- **Common induction techniques**
- **Maintenance and recovery complications of pediatric general anesthesia, as well as prevention, recognition and management of sedation complications.**

**Effectiveness:**

**The instruction from these courses and seminar series provide the resident the necessary knowledge at the in-depth level to provide children with treatment under sedation or general anesthesia. The formal courses in this area and rotation through anesthesia are effective instruction and learning methods.**

**Exhibit 11a – 2.1f**

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Subject Area: **Recognition, treatment and management  
of pharmacologic-related emergencies**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**PEDD 621 – Hospital Dentistry**

**PEDD 620 – Ped Dent Clinic/Case Conference**

  X   Off-service rotation to **Anesthesia**

  X   Other (specify): **Crash cart orientation**

       No formal instruction is provided.

- Total hours of instruction: **40**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   **X**  

b. predoctoral medical students/residents? Yes        No   **X**  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with an in-depth knowledge of the scope, causative factors and treatment of pharmacological-related emergencies.**

**Effectiveness:**

**These courses, seminar series and crash cart orientation provide the resident with knowledge at the in-depth level and are effective teaching and learning methods.**

**Exhibit 11b – 2.1a**

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Clinical Areas: Non-Pharmacological techniques      Years offered: 1 & 2

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/Case Conference**

  X   Off-service rotation to: **Pediatrics**

  X   Other (specify): **Clinical Experience**

       No formal instruction is provided.

- Total hours of instruction: **500**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes             No   X  

b. predoctoral medical students/residents? Yes             No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**All aspects of behavior guidance are conveyed/reinforced.**

**Topics covered include:**

- Voice control
- TSD
- Papoose

**Effectiveness:**

**Extensive experience is acquired in clinic due to a wide spectrum of patients.**

**Effective teaching and learning methods utilized.**

Exhibit 11b – 2.1b

Clinical Areas: Sedation

Years offered: 1 & 2

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 621 – Hospital Dentistry**

**OMDS 615 – Anesthesia and Pain Control**

  X   Off-service rotation to: **Pediatrics**

  X   Other (specify): **Clinical Experiences**

       No formal instruction is provided.

- Total hours of instruction: **500**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Residents are exposed to all avenues of sedation including oral and intra-nasal administration. Various drug regimes are available and multiple faculty with different training supervise this experience.**

**Effectiveness:**

**Residents see a wide variety of patients for sedation. The number of cases are sufficient and in most cases exceeds the minimum number to satisfy this requirement.**

**Exhibit 11b – 2.1c**

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Clinical Areas: **Inhalational Analgesia**

Years offered: 1 & 2

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 621 – Hospital Dentistry**

**OMDS 615 – Anesthesia and Pain Control**

  X   Off-service rotation to: **Anesthesiology**

  X   Other (specify): **Clinical experiences**

       No formal instruction is provided.

- Total hours of instruction: **500**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**This experience includes all types of patients of various age ranges and medical status. Inhalational analgesia is utilized in a number of different procedures including restorative and surgical procedures.**

**Effectiveness**

**Residents see a large number of patients on a daily basis.**

**Exhibit 11a - 2.2 a**

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Subject Area: **Growth and Development**

Year Offered: **1 & 2**

**a. Theories of normative dentofacial growth mechanisms.**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

           Off-service rotation to:

  X   Other (specify): Early Orthodontics Treatment Seminar-Pedo-Ortho

           No formal instruction is provided.

- Total hours of instruction: **40**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes            No   X  

b. predoctoral medical students/residents? Yes            No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with knowledge at the in-depth level to recognize, diagnose, treat or refer for treatment patients with craniofacial growth problems.**



**Topics covered include:**

- Principles of growth and development
- Embryology of the developing craniofacial complex
- Development of the dentition and occlusion
- Normal and abnormal dentofacial growth and development
- Craniofacial anomalies
- Principles of diagnosis and treatment planning
- Growth prediction, modification and treatment modalities

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to diagnose, treat when appropriate, consult with or refer to other specialists. The seminar and formal courses in this area are effective instruction and learning methods.**

**All cases are discussed in rounds before treatment initiated.**

**All cases are presented to faculty and residents upon completion.**

**Exhibit 11a - 2.2 b**

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Subject Area: **Growth and Development**

Year Offered: **1 & 2**

**b. Principles of diagnosis and treatment planning to identify normal and abnormal dentofacial growth and development.**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

       Off-service rotation to:

  X   Other (specify): Early Orthodontics Treatment Seminar-Pedo-Ortho

       No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with knowledge at the in-depth level to recognize, diagnose, treat or refer for treatment patients with craniofacial growth problems.**

**Topics covered include:**

- Principles of growth and development**
- Embryology of the developing craniofacial complex**
- Development of the dentition and occlusion**
- Normal and abnormal dentofacial growth and development**
- Craniofacial anomalies**
- Principles of diagnosis and treatment planning**
- Growth prediction, modification and treatment modalities**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to diagnose, treat when appropriate, consult with or refer to other specialists. The seminar and formal courses in this area are effective instruction and learning methods.**

**All cases are discussed in rounds before treatment initiated.**

**All cases are presented to faculty and residents upon completion.**

**Exhibit 11a - 2.2 c**

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Subject Area: **Growth and Development**

Year Offered: **1 & 2**

**c. Differential classification of skeletal and dental malocclusion in children and adolescents.**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

           Off-service rotation to:

  X   Other (specify): Early Orthodontics Treatment Seminar-Pedo-Ortho

           No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes            No   X  

b. predoctoral medical students/residents? Yes            No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with knowledge at the in-depth level to recognize, diagnose, treat or refer for treatment patients with craniofacial growth problems.**

**Topics covered include:**

- Principles of growth and development**
- Embryology of the developing craniofacial complex**
- Development of the dentition and occlusion**
- Normal and abnormal dentofacial growth and development**
- Craniofacial anomalies**
- Principles of diagnosis and treatment planning**
- Growth prediction, modification and treatment modalities**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to diagnose, treat when appropriate, consult with or refer to other specialists. The seminar and formal courses in this area are effective instruction and learning methods.**

**All cases are discussed in rounds before treatment initiated.**

**All cases are presented to faculty and residents upon completion.**

Exhibit 11a - 2.2 d

Subject Area: **Growth and Development**

Year Offered: **1 & 2**

**d. The indications, contraindications, and fundamental treatment modalities in guidance of eruption and space supervision procedures during the developing dentition that can be utilized to obtain an optimally functional, esthetic, and stable occlusion.**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

\_\_\_\_\_ Off-service rotation to:

Other (specify): Early Orthodontics Treatment Seminar-Pedo-Ortho

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **25**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with knowledge at the in-depth level to recognize, diagnose, treat or refer for treatment patients with craniofacial growth problems.**

**Topics covered include:**

- Principles of growth and development**
- Embryology of the developing craniofacial complex**
- Development of the dentition and occlusion**
- Normal and abnormal dentofacial growth and development**
- Craniofacial anomalies**
- Principles of diagnosis and treatment planning**
- Growth prediction, modification and treatment modalities**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to diagnose, treat when appropriate, consult with or refer to other specialists. The seminar and formal courses in this area are effective instruction and learning methods.**

**All cases are discussed in rounds before treatment initiated.**

**All cases are presented to faculty and residents upon completion.**

Exhibit 11a - 2.2 e

Subject Area: **Growth and Development**

Year Offered: **1 & 2**

e. **Basic biomechanical principles and the biology of tooth movement. Growth modification and dental compensation for skeletal problems including limitations.**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

\_\_\_\_\_ Off-service rotation to:

Other (specify): Early Orthodontics Treatment Seminar-Pedo-Ortho

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.



**Scope:**

**Objectives of training are to provide the resident with knowledge at the in-depth level to recognize, diagnose, treat or refer for treatment patients with craniofacial growth problems.**

**Topics covered include:**

- Principles of growth and development
- Embryology of the developing craniofacial complex
- Development of the dentition and occlusion
- Normal and abnormal dentofacial growth and development
- craniofacial anomalies
- Principles of diagnosis and treatment planning
- Growth prediction, modification and treatment modalities

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to diagnose, treat when appropriate, consult with or refer to other specialists. The seminar and formal courses in this area are effective instruction and learning methods.**

**All cases are discussed in rounds before treatment initiated.**

**All cases are presented to faculty and residents upon completion.**

Exhibit 11a - 2.2 f

Subject Area: Growth and Development

Year Offered: 1 & 2

f. **Appropriate consultation with and/or timely referral to other specialists when indicated to achieve optimal outcomes in the developing occlusion.**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524 & 525 – Craniofacial Anomalies I and II**

**PEDD 600 – Advanced Ped Dent Tech/Growth and Development**

       Off-service rotation to:

  X   Other (specify): Early Orthodontics Treatment Seminar-Pedo-Ortho

       No formal instruction is provided.

- Total hours of instruction: 25
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with knowledge at the in-depth level to recognize, diagnose, treat or refer for treatment patients with craniofacial growth problems.**

**Topics covered include:**

- Principles of growth and development**
- Embryology of the developing craniofacial complex**
- Development of the dentition and occlusion**
- Normal and abnormal dentofacial growth and development**
- Craniofacial anomalies**
- Principles of diagnosis and treatment planning**
- Growth prediction, modification and treatment modalities**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to diagnose, treat when appropriate, consult with or refer to other specialists. The seminar and formal courses in this area are effective instruction and learning methods.**

**All cases are discussed in rounds before treatment initiated.**

**All cases are presented to faculty and residents upon completion.**

Exhibit 11a - 2.3a

Subject Area: Oral Facial Injury and Emergency Care

Year Offered: 1 & 2

- a. Evaluation and treatment of trauma to the primary, mixed and permanent dentitions, such as repositioning, replantation, treatment of fractured teeth, and stabilization of intruded, extruded, luxated, and avulsed teeth.

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: Emergency Department

  X   Other (specify): Clinical experiences

       No formal instruction is provided.

- Total hours of instruction: 50
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training is to provide an in-depth instruction in traumatic events and their impact on the oro-facial complex this experience allows residents to be on-call to evaluate, assess, treat patients of all ages that has suffered traumatic events to the oro-facial area. This includes consultation with other specialties and ED Personnel. Clinical care is also provided within the Dental school to patients that present trauma to the Oro-facial complex.**

**Effectiveness:**

**Broad range of experiences both clinically and didactically. Effective in teaching this aspect of the training.**

Exhibit 11a - 2.3b

Subject Area: Oral Facial Injury and Emergency Care Year Offered: 1 & 2

b. **Evaluation, diagnosis, and management of the pulpal, periodontal and associated soft and hard tissues following traumatic injury.**

- Indicate how instruction is provided in this subject area:

X  Dental department seminar, conference, lecture program

X  Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

X  Off-service rotation to: Emergency Department

X  Other (specify): Clinical Experiences.

No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes   No  X

b. predoctoral medical students/residents? Yes   No  X

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training is to provide an in-depth instruction in traumatic events and their impact on the oro-facial complex this experience allows residents to be on-call to evaluate, assess, treat patients of all ages that has suffered traumatic events to the oro-facial area. This includes consultation with other specialties and ED Personnel. Also included is clinical care provided to emergency patients at the Dental school that present with trauma to the oro-facial complex.**

**Effectiveness:**

**Broad range of experiences both clinically and didactically. Effective in teaching this aspect of the training.**

Exhibit 11a - 2.3c

Subject Area: Oral Facial Injury and Emergency Care Year Offered: 1 & 2

c. **Recognition of injuries including fractures of the maxilla and mandible and referral for treatment by the appropriate specialist.**

- Indicate how instruction is provided in this subject area:

X  Dental department seminar, conference, lecture program

X  Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

X  Off-service rotation to: Emergency Department

X  Other (specify): Clinical Experiences

No formal instruction is provided.

- Total hours of instruction: 25
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes   No  X

b. predoctoral medical students/residents? Yes   No  X

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.



**Scope:**

**Objectives of training is to provide an in-depth instruction in traumatic events and their impact on the oro-facial complex this experience allows residents to be on-call to evaluate, assess, treat patients of all ages that has suffered traumatic events to the oro-facial area. This includes consultation with other specialties and ED Personnel. Also included are clinical experiences in the Dental school with patients that present to the urgent care clinic with trauma to the oro-facial complex.**

**Effectiveness:**

**Broad range of experiences both clinically and didactically. Effective in teaching this aspect of the training.**

Exhibit 11a – 2.3 d

Subject Area: Oral Facial Injury and Emergency Care Year Offered: 1 & 2

**d. Recognition, management and reporting child abuse and neglect and non-accidental trauma.**

- Indicate how instruction is provided in this subject area:

X  Dental department seminar, conference, lecture program

X  Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

**PEDD 501 – Dental Pediatrics**

X  Off-service rotation to: Emergency Department

X  Other (specify): **Clinical Experiences**

No formal instruction is provided.

- Total hours of instruction: **15**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes   No  X

b. predoctoral medical students/residents? Yes   No  X

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to enable the resident to recognize, manage and refer/report child abuse and neglect to appropriate health professionals.**

**Topics covered include:**

- Recognition of child abuse and neglect**
- Referral to appropriate health professionals**
- Management of cases**

**Effectiveness**

**These courses and seminar series provide the student with knowledge at the in-depth level in the recognition, case management and referral or reporting to appropriate health care professionals and/or regulatory agencies. The seminar and formal courses in this area and rotation through pediatric clinic are effective instruction and learning methods.**

Exhibit 11b – 2.3 a

Subject Area: Oral Facial Injury and Emergency Care Year Offered: 1 & 2

a. Diagnosis and management of traumatic injuries of the oral ad perioral structures including primary and permanent dentition and in infants, children and adolescents.

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

         Off-service rotation to: Emergency Department

         Other (specify): Clinical Experience

         No formal instruction is provided.

- Total hours of instruction: 150
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes          No   X  

b. predoctoral medical students/residents? Yes          No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students/residents' clinical experience in this area.

**Scope:**

**Objectives of training are to provide the resident with proficiency in diagnosis and treatment of traumatic injuries of the oral and perioral structures.**

**Topics/Experiences include:**

- a) Evaluation and treatment of trauma to the primary, mixed and permanent dentitions such as repositioning, replantation and stabilization of intruded, extruded, luxated and avulsed teeth.**
- b) Evaluation, diagnosis, and management of the pulpal, periodontal and associated soft tissues following traumatic injuries**
- c) Recognition of injuries including fracture of the maxilla and mandible and referral for treatment by the appropriate specialists.**
- d) Recognition and reporting child abuse and neglect**

**Effectiveness:**

**The residents treat patients with orofacial injuries as they present on an emergency basis to the clinic as well as on their rotations to the emergency room. All pediatric emergencies in the hospital are first evaluated by the pediatric dental resident and when necessary other specialty consultations are obtained. Residents will achieve proficiency in the management of orofacial traumatic injuries. The seminar in this area as well as clinical experiences and rotations are effective instruction and learning methods.**

Exhibit 11b – 2.3 b

Clinical Area: Oral Facial Injury and Emergency Care Year Offered: 1 & 2

**b. Emergency services including assessment and management of dental pain and infections.**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

           Off-service rotation to: Emergency Department

           Other (specify): Clinical Experience

           No formal instruction is provided.

- Total hours of instruction: **150**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes            No   X  

b. predoctoral medical students/residents? Yes            No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students/residents' clinical experience in this area.

**Scope:**

**Objectives of training are to provide the resident with proficiency in diagnosis and treatment of traumatic injuries of the oral and perioral structures.**

**Topics/Experiences include:**

- e) Evaluation and treatment of trauma to the primary, mixed and permanent dentitions such as repositioning, replantation and stabilization of intruded, extruded, luxated and avulsed teeth.**
- f) Evaluation, diagnosis, and management of the pulpal, periodontal and associated soft tissues following traumatic injuries**
- g) Recognition of injuries including fracture of the maxilla and mandible and referral for treatment by the appropriate specialists.**
- h) Recognition and reporting child abuse and neglect**

**Effectiveness:**

**The residents treat patients with orofacial injuries as they present on an emergency basis to the clinic as well as on their rotations to the emergency room. All pediatric emergencies in the hospital are first evaluated by the pediatric dental resident and when necessary other specialty consultations are obtained. Residents will achieve proficiency in the management of orofacial traumatic injuries. The seminar in this area as well as clinical experiences and rotations are effective instruction and learning methods.**

**Exhibit 11a – 2.4 a**

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Subject Area: **The Epidemiology of oral diseases encountered in Infants, children and adolescents, including those with special health needs including prevalence and severity.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**OMDS 503– Graduate Oral Pathology**

**PEDD 620 – Ped Dent Clinic/Case Conference**

  X   Off-service rotation to: **Children Habilitation Center**

       Other (specify):

       No formal instruction is provided.

- Total hours of instruction:   25
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.



**Scope:**

**Objectives of training are to provide the resident with an in-depth knowledge of the epidemiology of oral diseases.**

**Topics covered included:**

- **Epidemiology of dental caries in children**
- **Epidemiology of periodontal diseases in children**
- **Epidemiology of oral and perioral lesions.**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level in the prevalence of common pediatric oral diseases in healthy as well as patients with special health care needs. The formal courses in this area and rotation through the Children Habilitation Center are effective instruction and learning methods.**

**Exhibit 11a – 2.4 b**

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Subject Area: **Oral diseases of hard and soft tissue encountered in infants, children and adolescents including those pediatric patients with special health care needs.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/case conference**

**OMDS 503 – Graduate Oral Pathology**

  X   Off-service rotation to: **Pediatrics, Children Habilitation Center**

       Other (specify):

       No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to discuss cariology, periodontal diseases and prevention and to review oral diseases encountered in children and those patients with special health care needs.**

**Topics covered  
include:**

- Dental caries**
- Periodontal diseases**
- Oral manifestations of systemic diseases**
- Prevention and management of oral diseases**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level in the assessment and management of oral diseases in children and those with special health care needs. The formal courses in this area and rotation through the pediatric clinic are effective instruction and learning methods.**

**Exhibit 11a – 2.4c**

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Subject Area: **Diagnosis of oral and perioral lesions and anomalies in infants, children, and adolescents.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/case conference**

**OMDS 503 – Graduate Oral Pathology**

         Off-service rotation to:

         Other (specify):

         No formal instruction is provided.

- Total hours of instruction: **15**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes          No   **X**  

b. predoctoral medical students/residents? Yes          No   **X**  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to discuss the pathophysiology, assessment and management of the common pediatric, oral and perioral lesions and anomalies in infants, children and adolescents and proper management of conditions presented.**

**Topics covered include:**

- **Oral and perioral lesions in infants, children and adolescents**
- **Biopsies and diagnostic tests**
- **Interpretation of laboratory data**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to manage and refer, when necessary, common and atypical oral and perioral lesions in infants, children and adolescents. The formal courses in this area are effective instruction and learning methods.**

Exhibit 11a – 2.4 d

---

Subject Area: **Gingival, Periodontal and other mucosal disorders in infants children and adolescents:** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**OMDS 503 – Graduate Oral Pathology**

       Off-service rotation to:

  X   Other (specify): Clinical experiences, consultations with Periodontics

       No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with the scientific basis of the prevalence and treatment of gingival, periodontal and other mucosal disorders in infants, children, adolescents.**

**Effectiveness:**

**The courses and seminar series provide the resident with knowledge at the in-depth level. Clinical experience occur in the clinic and in consultation with faculty from other departments such as Periodontics.**

**Topics/include:**

- **Diagnosis of Periodontal disease of infant/children/adolescents**
- **Treatment of Periodontal disease in infants/children**
- **Recognition and referral cases of aggressive periodontal disease**

**Exhibit 11a – 2.4 e**

---

Subject Area: **Treatment of common oral diseases in infants, children, and adolescent**      Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**OMDS 503 – Graduate Oral Pathology**

       Off-service rotation to:

  X   Other (specify): Clinical experiences

       No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.



**Scope:**

**Objective of training is to provide clinical proficiency in the treatment of common oral diseases in infants, clinical and adolescents.**

**Effectiveness:**

**All patients are treated comprehensively and referral of cases are made to relevant disciplines should the need arise.**

**Exhibit 11a – 2.4 f**

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Subject Area: **Ordering and performing uncomplicated biopsies and adjunctive diagnostic tests including exfoliative cytology, microbial cultures and other commercially available tests.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 595 – Ped Dent Seminar**  
**PEDD 501 – Dental Pediatrics**  
**PEDD 620 – Ped Dent Clinic/case conference**  
**OMDS 503 – Graduate Oral Pathology**

       Off-service rotation to:

  X   Other (specify): Clinical experiences

       No formal instruction is provided.

- Total hours of instruction: **12**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objective of training are to discuss the pathophysiology, assessment and management of the common pediatric, oral and perioral lesions and anomalies in infants, children and adolescents and proper management of conditions presented.**

**Topics covered include:**

- Oral and perioral lesions in infants, children and adolescents**
- Biopsies and diagnostic Tests**
- Interpretation of laboratory data**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to manage and refer, when necessary, common and atypical oral and perioral lesions in infants, children and adolescents. The formal courses in this area are effective instructions and learning methods.**

**Exhibit 11a – 2.4 g**

Subject Area: **Referring persistent lesions and/or extensive surgical management cases to appropriate specialists.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**OMDS 503 – Graduate Oral Pathology**

       Off-service rotation to:

  X   Other (specify): Clinical experience

       No formal instruction is provided.

- Total hours of instruction: **12**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objective of training are to discuss the pathophysiology, assessment and management of common lesions and to recognize lesions that persist and require referral.**

**Effectiveness:**

**Knowledge is provided at the in-depth level and reinforced with clinical experiences.**

**Exhibit 11b – 2.4 a**

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Clinical Area: **Pediatric oral and maxillofacial radiology** Year Offered: **1 & 2**  
**and appropriate procedures of radiation hygiene.**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**OMDS 617 – Radiology for the specialist**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524&525 – Craniofacial I & II**

**ORTD 615 – Diagnostic Procedures I**

       Off-service rotation to:

  X   Other (specify): Clinical experience

       No formal instruction is provided.

- Total hours of instruction: **15**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objective of training are to provide the resident with topics in advanced imaging and radiation biology.**

**Topics covered include:**

- **Panoral radiology**
- **Tomography**
- **Imaging systems – CT, MRI**
- **Intra-oral radiology**
- **Extra-oral radiology**
- **Cephalometrics**
- **Radiation biology**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level necessary for standard and contemporary imaging systems as well as radiation biology and hygiene. The formal courses in this area are effective instruction and learning methods.**

**Exhibit 11a – 2.5 a**

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Subject Area: **Scientific basis for the prevention of dental caries, periodontal and pulpal diseases, traumatic injuries, and developmental anomalies**      Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 615 – Diagnostic Procedures I**

**OMDS 503– Graduate Oral Pathology**

\_\_\_\_\_ Off-service rotation to:

Other (specify): **Clinical Experiences**

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **50**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.



**Scope:**

**Objectives of training are to provide the resident with the scientific basis for prevention and treatment of oral diseases, traumatic injuries and developmental anomalies in infant oral health care and effects of proper nutrition, fluoride therapy, restorative and prosthetic techniques, prevalence of gingival, periodontal and other mucosal disorders and pulp histology and pathology of primary and young dentitions.**

**Topics covered include:**

- Infant oral health care;**
- Effects of proper nutrition, fluoride therapy and sealants in prevention of oral diseases; prevention and treatment of dental caries**
- Prevention and treatment of gingival and periodontal diseases**
- Prevention and treatment of traumatic injuries**
- Pulp therapy**
- Identification and treatment of dental anomalies**
- Restorative and prosthetic techniques and materials for primary, mixed and permanent dentitions**
- Pulp histology and pathology of primary and young permanent teeth, including indications and rationale for various types of indirect and direct pulp therapy**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level necessary to diagnose and manage routine and prevention and treatment of complex dental disease problems in children. The seminar and formal courses in this area are effective instruction and learning methods.**

**Exhibit 11a – 2.5 b**

---

Subject Area: **The effects of proper diet nutrition fluoride therapy and sealants In the prevention of oral disease.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

         Off-service rotation to:

         Other (specify):

         No formal instruction is provided.

- Total hours of instruction: **20**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes          No   X  

b. predoctoral medical students/residents? Yes          No   X  

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objectives of training are to provide the resident with the scientific basis for the effect of proper diet and nutrition, fluoride therapy and sealants on the prevention of oral disease.**

**Effectiveness:**

**Courses and seminar series provide the resident with an in-depth knowledge. They are effective learning methods and methods of instruction.**

**Exhibit 11a – 2.5 c**

Subject Area: **Perinatal oral health and infant oral health  
Supervision.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

         Off-service rotation to:

  X   Other (specify): Clinical experience

         No formal instruction is provided.

- Total hours of instruction: **20**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes          No   X  

b. predoctoral medical students/residents? Yes          No   X  

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objectives of training are to provide the resident with the scientific basis for prevention and treatment of oral diseases, in infants including infant oral health care and effects of proper nutrition, fluoride therapy.**

**Topics covered include:**

- **Infant oral health care;**
- **Effects of proper nutrition. Fluoride therapy and sealants in prevention of oral diseases; prevention and treatment of dental caries**
- **Identification and treatment of dental anomalies**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level necessary to diagnosis and manage routine and prevention and treatment of complex dental disease problems in children. The seminar and formal courses in this area are effective instruction and learning methods.**

**Exhibit 11a – 2.5 d**

---

Subject Area: **Scientific principles, techniques, and treatment planning for the prevention of oral diseases including diet management, chemotherapeutics and other approaches.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

\_\_\_\_\_ Off-service rotation to:

Other (specify): Clinical experience

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objectives of training are to provide the resident with the scientific basis for prevention and treatment of oral diseases effects of proper nutrition, fluoride therapy, restorative and prosthetic techniques.**

**Topics covered include:**

- **Infant oral health care;**
- **Effects of proper nutrition. Fluoride therapy and sealants in prevention of oral diseases; prevention and treatment of dental caries**
- **Prevention and treatment of gingival and periodontal diseases**
- **Prevention and treatment of traumatic injuries**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level necessary to diagnosis and manage routine and prevention and treatment of complex dental disease problems in children. The seminar and formal courses in this area are effective instruction and learning methods.**

**Exhibit 11a – 2.5 e**

---

Subject Area: **Dental health education programs, materials and personnel to assist in the delivery of preventive care.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

\_\_\_\_\_ Off-service rotation to:

Other (specify): Clinical experience

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.



**Scope:**

**Objectives of training are to provide the resident with the scientific basis for prevention and treatment of oral diseases and to understand the role of the other personnel in the delivery of preventive care.**

**Topics covered include:**

- **Infant oral health care;**
- **Effects of proper nutrition. Fluoride therapy and sealants in prevention of oral diseases; prevention and treatment of dental caries**
- **Prevention and treatment of gingival and periodontal diseases**
- **Prevention and treatment of traumatic injuries**
- **Use of other personnel in preventive care delivery.**
- 

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level necessary to diagnosis and manage routine and prevention and treatment of complex dental disease problems in children. The seminar and formal courses in this area are effective instruction and learning methods.**

**Exhibit 11a – 2.5 f**

---

Subject Area: **Diagnosis of periodontal diseases of childhood and adolescence, treatment and/or refer cases of periodontal disease to the appropriate specialist.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

Off-service rotation to:

Other (specify): Clinical experience

No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes  No

b. predoctoral medical students/residents? Yes  No

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objectives of training are to provide the resident with the scientific basis for prevention and treatment of oral diseases prevalence of gingival, periodontal and other mucosal disorders and appropriate referral of complex cases.**

**Topics covered include:**

- **Infant oral health care;**
- **Prevention and treatment of gingival and periodontal diseases**
- **Identification and treatment of dental**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level necessary to diagnosis and manage routine and prevention and treatment of complex dental disease problems in children. The seminar and formal courses in this area are effective instruction and learning methods.**

**Exhibit 11b – 2.5 a**

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Clinical Area: **Are clinical experiences of sufficient scope, volume and variety to enable residents to achieve competency in applications of preventive clinical practices.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 620 - Ped Dent Clinic/Case conference**

  X   Off-service rotation to: **Pediatrics**

  X   Other (specify): **Clinical experience**

       No formal instruction is provided.

- Total hours of instruction: **500**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objectives of training are to provide proficiency in application of preventive practices including scientific principles, techniques and treatment planning for the prevention of oral diseases. Also including dental health education programs, materials and personnel to assist in the delivery of care.**

**Effectiveness:**

**Comprehensive care is delivered to all patients. Procedures and preventive practices are an integral part of all care that is delivered in the clinics. Each resident has their own block of patients and provides all care to these patients. Effective learning method.**

**Exhibit 11a – 2.6 a**

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Subject Area: **Restorative and prosthetic techniques  
and dental materials for the primary, mixed  
and permanent dentition.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:  
**PEDD 595 – Ped Dent Seminar**  
**PEDD 620 – Ped Dent Clinic/case conference**

Off-service rotation to:

Other (specify): Clinical experience

No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes  No

b. predoctoral medical students/residents? Yes  No

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objective is to provide in-depth instruction into complex restorative and prosthetic techniques that is required with pediatric patients. In addition clinical experiences, supplement and reinforce didactic instruction.**

**Effectiveness:**

**Teaching methods are effective in accomplishing an in-depth understanding of the required material.**

**Exhibit 11a – 2.6 b**

---

Subject Area: **Management of comprehensive restorative  
Care for pediatric patients.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/case conference**

       Off-service rotation to:

  X   Other (specify): Clinical experience

       No formal instruction is provided.

- Total hours of instruction: **50**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.



**Scope:**

**Objective is to provide proficiency in the management of all comprehensive restorative care for pediatric patients.**

**Effectiveness:**

**Didactic training is reinforced with a wide spectrum of clinical experiences. Seminars are effective instruction that is reinforced in the clinics.**

**Exhibit 11a – 2.6 c**

---

Subject Area: **Formulation of Treatment Plans for infants/children/adolescents and those with Special Health Care Needs.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

Off-service rotation to:

Other (specify): Operating Room

No formal instruction is provided.

- Total hours of instruction: **35**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes  No

b. predoctoral medical students/residents? Yes  No

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objective of training are to provide the resident with adequate knowledge in the diagnosis and treatment plan formulation for children with special health care needs.**

**Topics covered included:**

- **Assessment of the oral health problems, for example, patients with neuromuscular deficits, development disabilities, significant medical problems as well as psycho-social problems which are routinely referred by pediatrics department to our clinic are treatment planned and cared by residents.**
- **Case presentations and treatment planning seminars prepare residents for an in-depth knowledge in formulation of treatment plans for patients with special health care needs.**

**Effectiveness:**

**These courses and seminar series and the OR experiences provide the resident with knowledge at the in-depth level to interact with appropriate health care professionals and treatment plan for patients with special health care needs. The seminar and formal courses in this area and the OR experience are effective instruction and learning methods.**

**Exhibit 11a – 2.6 d**

Subject Area: **Characteristics of the Dental Home**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 620 – Ped Dent Clinic/case conference**

       Off-service rotation to:

  X   Other (specify): Clinical experience

       No formal instruction is provided.

- Total hours of instruction: **10**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Training is provided on the characteristics of the dental home and how this impacts delivery of clinical care. Clinical experiences in the infant clinic reinforce these concepts.**

**Effectiveness:**

**Didactic instruction complimented with clinical experience are effective learning and teaching methods.**

Exhibit 11b – 2.6 a

---

Clinical Area: **Diagnosis and treatment planning for infants, children, adolescents and those with special health care needs.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics I**

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

\_\_\_\_\_ Off-service rotation to:

Other (specify): Clinical experience

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: **1000**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objective of training is to provide proficiency in clinical experience in diagnosis and treatment planning for all pediatric patients.**

**Effectiveness:**

**Comprehensive care that includes diagnosis and treatment planning is done in the clinic and in the hospital operating room on all patients. This may also require inter-disciplinary consultation. These clinical experiences are effective learning methods.**

**Exhibit 11b – 2.6b**

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Clinical Area: **Provision of comprehensive dental care to infants, children, adolescents and those with special health care needs in a manner consistent with the dental home.** Year Offered: **1 & 2**

Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 595 – Ped Dent Seminar**  
**PEDD 620 – Ped Dent Clinic/case conference**

       Off-service rotation to:

  X   Other (specify): Clinical experience

       No formal instruction is provided.

- Total hours of instruction: **1000**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

**Scope:**

**Objective of training are to provide proficiency in the clinical experience in management of comprehensive restorative and prosthetic care for pediatric patients.**

**Topic/Experience includes:**

- **Clinical experience in comprehensive restorative and prosthetic care for pediatric patients.**

**Effectiveness:**

**The residents provide comprehensive treatment in the clinic and hospital Operating room throughout the two-year period. Patients are carefully screened for the residents to receive a wide spectrum of healthy patients and those with special health needs. Many of these patients require interdisciplinary consultations/collaboration. The clinical experience of residents is comprehensive to achieve proficiency in comprehensive restorative and prosthetic treatment for the pediatric patients. The seminar in this area and clinical experiences are effective instruction and learning methods.**



Exhibit 11a – 2.7a

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Subject Area: **The design, implementation and management of a contemporary practice of pediatric dentistry, emphasizing business skills for proper and efficient practice.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:
  - Dental department seminar, conference, lecture program
  - Formal course—Title:  
**PEDD 615 – Practice Admin in Ped Dent**
  - Off-service rotation to: **Selected dental offices**
  - \_\_\_\_\_ Other (specify):
  - \_\_\_\_\_ No formal instruction is provided.
- Total hours of instruction: **18**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**  
Is instruction in this subject the same as that provided to:
  - a. undergraduate dental students/residents? Yes \_\_\_\_\_ No
  - b. predoctoral medical students/residents? Yes \_\_\_\_\_ NoIf YES, describe how this instruction is modified for the advanced education program.
- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

Objectives of training are to provide the resident with understanding in establishment and administration of a contemporary pediatric dental practice.

Topics covered include:

- Solo vs. group practice
- location selection
- Buying a practice
- Design of dental facilities
- Hiring and management of employee
- Regulatory aspects
- Business skills

**Effectiveness:**

This course and rotations provide the resident with knowledge at the understanding level to establish and manage a practice. The seminar and formal courses in this area and rotations are effective instruction and learning methods.

**Exhibit 11a – 2.7b**

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Subject Area: **Jurisprudence and Risk Management**

Year Offered: **1**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 615 – Practice Admin in Ped Dent**

**PEDD 595 – Ped Dent Seminar**

**PEDD 620 – Ped Dent Clinic/Case Conference**

       Off-service rotation to:

  X   Other (specify): **Risk management in-service given by Hospital Risk Management Director and GME Orientation**

       No formal instruction is provided.

- Total hours of instruction: **6**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to familiarize and sensitize the resident with the issues related to risk management.**

**Topics covered include:**

- Documentation**
- Quality assurance**
- Risk management**
- Legal aspects of patient care**

**Effectiveness:**

**This course, seminar and orientation provide the resident with knowledge at the understanding level in issues related to risk management and the preventive and appropriate management of situations involving unexpected incidences. The seminar and formal courses in this area as well as the orientation are effective instruction and learning methods.**

**Exhibit 11a – 2.7c.**

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Subject Area: **Use of computers in didactic,  
clinical and research endeavors,  
as well as in practice management.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 615 – Prac Admin in Ped Dent**  
**OSCI 594 – Statistics for Dental Residents**

       Off-service rotation to:

  X   Other (specify): **(1) Orientation to College and Hospital computer systems (CERNER and AXIUM training); and (2) daily computer use in the clinic**

       No formal instruction is provided.

- Total hours of instruction: **10**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject t

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to orient residents to the use of computers in didactic, clinical and research, as well as in record keeping and practice management.**

**Topics covered include:**

- Data analysis**
- Hospital CERNER system**
- College of Dentistry AXIUM Computer System**
- Literature search**
- Practice management software system**

**Effectiveness:**

**This course and orientation training provide the resident with knowledge at the understanding level in the use of computers in health care facilities for data analysis and patient care. The orientation and formal courses in this area are effective instruction and learning methods.**

**Exhibit 11a – 2.7d**

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Subject Area: **Principles of ethical and biomedical ethical reasoning** Year Offered: **1 & 2**  
**ethical decision making and professional responsibility**  
**as they pertain to academic environment, research, patient care and**  
**practice management.**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 595 – Ped Dent seminar**

**PEDD 410 – Prin & Meth in Dent Res I**

**OSCI 451 – Research Methodology IRB training 101**

       Off-service rotation to:

  X   Other (specify): **State mandatory on-line ethics course and IRB ethics**  
**and human subjects on-line HIPPA training and GME Core**  
**Curriculum Course**

       No formal instruction is provided.

- Total hours of instruction:   10
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are: (a) to sensitize residents to ethical issues related to patient care and human research; (b) to understand and apply the principles of ethics in patient care and research including human research and laws governing the protection of personal information.**

**Topics covered include:**

- Patient rights**
- Responsibility to treat**
- Institutional Review Board (IRB)**
- Ethics of human research**

**Effectiveness:**

**This course, training and seminar provide the resident with knowledge at the understanding level in biomedical ethics. The seminar and formal courses in this area and training are effective instruction and learning methods.**



Exhibit 11a – 2.7e

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Subject Area: **Working cooperatively with consultants and clinicians in other dental specialties and health fields.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**ORTD 524 & 525 – Craniofacial anomalies I and II**  
**ORTD 615 – Diagnostic procedure I**  
**OMDS 615 – Anesthesia and Pain Control**

       Off-service rotation to:

  X   Other (specify): **Consulting with other specialties (Oral pathology, Orthodontics, Oral and Maxillo-facial surgery, Periodontics, Endodontic and Prosthodontics, ENT)**

       No formal instruction is provided.

- Total hours of instruction:   60
- What is the level of instruction (i.e., competency, proficiency, other) **Proficiency**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident the opportunity to work cooperatively with consultants and clinicians in other dental specialties and health fields.**

**Topics/Experiences include:**

- Case consultation with other dental specialists**
- Working cooperatively with other dental specialists**
- Hands on experience and working with medical residents and attendings at University Hospital**
- PALS certification process**

**Effectiveness:**

**In these courses, clinical experience and rotations , the resident will achieve proficiency to work cooperatively with consultants, clinicians and other dental specialties and health fields. The seminar and formal courses in this area and clinical experience as well as rotations are effective instruction and learning methods.**

**Exhibit 11a – 2.8 a**

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Subject Area: **Formulation of Treatment Plans for Patients with Special Health Care Needs**      Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**  
**PEDD 501 – Dental Pediatrics**  
**PEDD 620 – Ped Dent Clinic/case conference**  
**PEDD 621 – Hospital Dentistry**

       Off-service rotation to:

  X   Other (specify): **Operating Room**

       No formal instruction is provided.

- Total hours of instruction: **25**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes             No   X  

b. predoctoral medical students/residents? Yes             No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with adequate knowledge in the diagnosis and treatment plan formulation for children with special health care needs.**

**Topics covered include:**

- Assessment of the oral health problems, for example, patients with neuromuscular deficits, developmental disabilities, significant medical problems as well as psycho-social problems which are routinely referred by pediatrics department to our clinic are treatment planned and cared by residents.**
- Case presentations and treatment planning seminars prepare residents for an in-depth knowledge in formulation of treatment plans for patients with special health care needs.**

**Effectiveness:**

**These courses and seminar series and the OR experiences provide the resident with knowledge at the in-depth level to interact with appropriate health care professionals and treatment plan for patients with special health care needs. The seminar and formal courses in this area and the Operating Room and other hospital experiences are effective instruction and learning methods.**

**Exhibit 11a – 2.8b**

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Subject Area: **Medical conditions and required alternatives  
in delivery of dental care**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 595 – Ped Dent Seminar**

**PEDD 501 – Dental Pediatrics**

**PEDD 620 – Ped Dent Clinic/case conference**

**ORTD 524 & 525 – Craniofacial I & II**

**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Children Habilitation Center**

       Other (specify):

       No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide the resident with an in-depth knowledge on the medical conditions of and treatment alternatives for patients.**

**Topics covered include:**

- **Developmental disabilities (such as cerebral palsy, spinal bifida, cranio-facial syndromeas**
- **Congenital heart defects**
- **HIV / AIDS**
- **Neurological disorders**
- **Renal transplants**
- **Hematologic disorders**
- **Endocrine disorders**

**Effectiveness:**

**These courses and seminar series provide the resident with knowledge at the in-depth level to modify treatment plans based on possible limitations imposed by medical conditions and to appropriately interact with other health care providers. The seminar and formal courses in this area and rotations are effective instruction and learning methods.**

Exhibit 11a – 2.8c

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Subject Area: **Management of the oral health of patients with special health care needs, i.e.: edically compromised**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 620 – Ped Dent Clinic/case conference**

**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Children Habilitation Center**

       Other (specify): **Clinical experience**

       No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **Proficiency**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objectives of training are to provide residents with proficiency in management of oral health patients with special health care needs.**

**Topics/Experiences include:**

- **Management of oral health issues of medically compromised patients**
- **Management of oral health issues of physically compromised or disabled patients**

**Effectiveness:**

**These residents treat a wide range of patients, who are medically, physically and neurologically compromised suffering from mental health/behavior disorders and have special anesthesia in the hospital operating room. Residents will achieve proficiency in management of patients with special health care needs. The formal courses in this area as well as the clinical experiences and rotations are effective instruction and learning methods.**



**Exhibit 11a – 2.8d**

---

Subject Area: **Management of the oral health of patients with special health care needs, i.e.: Physically compromised or disabled; and diagnosed to have developmental disabilities, psychiatric disorders or psychological disorders.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:  
**PEDD 620 – Ped Dent Clinic/case conference**  
**PEDD 621 – Hospital Dentistry**

Off-service rotation to: **Children Habilitation Center**

Other (specify): **Clinical experience**

No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **Proficiency**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide residents with proficiency in management of oral health patients with special health care needs.**

**Topics/Experiences include:**

- **Management of oral health issues of medically compromised patients**
- **Management of oral health issues of physically compromised or disabled patients**

**Effectiveness:**

**These residents treat a wide range of patients, who are medically, physically and neurologically compromised suffering from mental health/behavior disorders and have special anesthesia in the hospital operating room. Residents will achieve proficiency in management of patients with special health care needs. The formal courses in this area as well as the clinical experiences and rotations are effective instruction and learning methods.**

**Exhibit 11a – 2.8e**

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Subject Area: **Management of the oral health of patients  
with special health care needs, i.e.:  
Transition to adult practice**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 620 – Ped Dent Clinic/case conference**  
**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Children Habilitation Center**

  X   Other (specify): **Clinical experience**

           No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **Proficiency**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes            No   X  

b. predoctoral medical students/residents? Yes            No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Objectives of training are to provide residents with proficiency in management of oral health patients with special health care needs.**

**Topics/Experiences include:**

- **Management of oral health issues of medically compromised patients**
- **Management of oral health issues of physically compromised or disabled patients**

**Effectiveness:**

**These residents treat a wide range of patients, who are medically, physically and neurologically compromised suffering from mental health/behavior disorders and have special anesthesia in the hospital operating room. Residents will achieve proficiency in management of patients with special health care needs. The formal courses in this area as well as the clinical experiences and rotations are effective instruction and learning methods.**

**Exhibit 11b – 2.8a**

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Clinical Area: **Clinical experiences in examination, treatment and management of infants/children/adolescents and those with special health care needs.**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 620 – Ped Dent Clinic/case conference**  
**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Children Habilitation Center**

  X   Other (specify): **Clinical experience**

       No formal instruction is provided.

- Total hours of instruction: **200**
- What is the level of instruction (i.e., competency, proficiency, other) **Proficiency**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Objective of training are to provide residents with proficiency in management of oral health patients with special health care needs.**

**Topics/Experiences include:**

- **Management of oral health issues of medically compromised patients**
- **Management of oral health issues of physically compromised or disabled patients**
- **Management of oral health issues of patients with developmental disabilities, psychiatric disorders or psychological disorders**

**Effectiveness:**

**The residents treat a wide range of patients, who are medically, physically and neurologically compromised suffering from mental health/behavior disorders and have special health care needs. Patients may be treated in our clinic or under general anesthesia in the hospital operating room. Residents will achieve proficiency in management of patients with special health care needs. The formal courses in this area as well as the clinical experiences and rotations are effective instruction and learning methods.**

**Exhibit 11a – 2.9a**

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Subject Area: **Hospital Policies and Procedures**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Pediatrics**

  X   Other (specify): **Online Course with hospital CERNER system**

         No formal instruction is provided.

- Total hours of instruction: **15**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes          No   X  

b. predoctoral medical students/residents? Yes          No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**This area is covered during seminars and with interaction in the hospital operating room.**

**Effectiveness:**

**Didactic instruction occurs in class and online. Effective teaching method.**



**Exhibit 11a – 2.9b**

---

Subject Area: **Medical and Dental Staff organization**

Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Pediatrics**

  X   Other (specify): **LMS of hospital**

         No formal instruction is provided.

- Total hours of instruction: **15**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes          No   X  

b. predoctoral medical students/residents? Yes          No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**All residents interact within the hospital environment both for operating room cases and emergency department. Hospital online courses to be done to keep privileges.**

**Effectiveness:**

**Seminar and on-line contact effective teaching method.**

**Exhibit 11a – 2.9c**

---

Subject Area: **Medical and Dental Staff member responsibilities.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:

**PEDD 621 – Hospital Dentistry**

  X   Off-service rotation to: **Pediatrics**

  X   Other (specify): **Online Course with hospital**

       No formal instruction is provided.

- Total hours of instruction: **10**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students’/residents’ instruction in these areas.

**Scope:**

**Seminar and on-line course provide instruction regarding responsibilities in the hospital system.**

**Effectiveness:**

**Effect teaching methods employment via seminar and online course work.  
Seminar and on-line contact effective teaching method.**

**Exhibit 11b – 2.9a**

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Clinical Area: **Do clinical experiences enable students/residents to acquire knowledge and skills to function as health providers within the hospital setting** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 621 – Hospital Dentistry**  
**PEDD 673 – Physical Diagnosis**

  X   Off-service rotation to: **Pediatrics**

  X   Other (specify): **Operating room and Emergency Department**

           No formal instruction is provided.

- Total hours of instruction: **200**
- What is the level of instruction (i.e., competency, proficiency, other) **Competency**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes            No   X  

b. predoctoral medical students/residents? Yes            No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope: Residents take call in the hospital and work in operating room on a rotation basis.**

**Effectiveness: Clinical skills are reinforced with hospital interactions.**

Exhibit 11a – 2.10a

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Subject Area: **Pulp histology and pathology of primary and young permanent teeth, including indication and rationale for various types of indirect and direct pulp therapy** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

Dental department seminar, conference, lecture program

Formal course—Title:  
**PEDD 595 – Ped Dent Seminar**  
**PEDD 620 – Ped Dent Clinic/case conference**

Off-service rotation to: **Emergency Department**

Other (specify): **Clinical experience**

No formal instruction is provided.

- Total hours of instruction: **40**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope: Objective is to provide resident with proficiency in management of pulpal and periradicular tissues in primary and young permanent teeth.**

**Effectiveness: Seminar and teaching instruction is completed by clinical experiences. Effective learning methods.**

**Exhibit 11a – 2.10b**

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Subject Area: **Management of pulpal and periradicular tissues in the primary and developing permanent teeth.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 595 – Ped Dent Seminar**  
**PEDD 620 – Ped Dent Clinic/case conference**

  X   Off-service rotation to: **Emergency Department**

  X   Other (specify): **Clinical experience**

       No formal instruction is provided.

- Total hours of instruction: **30**
- What is the level of instruction (i.e., competency, proficiency, other) **In-depth**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope: In-depth training is provided in all aspects of management of pulpal and perioradicular tissue in primary and development permanent dentition**

**Effectiveness: Didactic instruction is confirmed by clinical experience. Effective learning and teaching methods employed.**

Exhibit 11a – 2.11a

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Subject Area: **Normal language development and the recognition of language delays/disorders; the anatomy and physiology of articulation and normal articulation development, causes of defective articulation with emphasis on oral anomalies, craniofacial anomalies, dental or occlusal abnormalities, velopharyngeal insufficiency (VPI), history of cleft lip/palate and normal velopharyngeal function and the effect of VPI on resonance.** Year Offered: **1 & 2**

- Indicate how instruction is provided in this subject area:

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 620 – Ped Dent Clinic/case conference**  
**ORTD 524&525 – Craniofacial I & II**

  X   Off-service rotation to: **Pediatrics and Children Habilitation center**

  X   Other (specify): **Clinical experiences**

       No formal instruction is provided.

- Total hours of instruction: **15**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes        No   X  

b. predoctoral medical students/residents? Yes        No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:** Objectives of training are to introduce to the resident the normal and abnormal speech and language development.

**Topics covered include:**

- Normal and abnormal speech development
- Recognition of speech and language delays/disorders related to craniofacial anomalies and providing care in collaboration with speech and communication therapists
- Fundamentals of speech therapy
- History of cleft lip/palate and normal velopharyngeal function

**Effectiveness:**

These courses and seminar series and rotations provide the resident with knowledge at the understanding level to recognize and refer language and speech disorders and be familiar with standard treatment approaches. The seminar and formal courses in this area and rotations are effective instruction and learning methods.

Exhibit 11a – 2.11b

Subject Area: **Fundamentals of pediatric medicine including Those related to pediatric patients with special health care needs such as**  
1) **Development disabilities;**  
2) **Genetic/metabolic disorders;**  
3) **Infectious disease;**  
4) **Sensory impairments; and**  
5) **Chronic Disease.**

Year Offered: 1 & 2

Dental department seminar, conference, lecture program

Formal course—Title:  
**PEDD 501 – Dental Pediatrics**  
**PEDD 620 – Ped Dent Clinic/Case Conference**  
**PEDD 673 – Pediatric Physical diagnosis**  
**PEDD 621 – Hospital Dentistry**

Off-service rotation to: **Pediatrics, Anesthesia, Emergency department**

Other (specify) **Pediatric Grand Round**  
 No formal instruction is provided.

- Total hours of instruction: **120**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.



**Scope:**

**Objectives of training are to train the resident in the fundamental of pediatric medicine including (a) developmental dis abilities; (b) genetic/metabolic disorders; (c) infectious disease; (d) sensory impairments; and (e) chronic diseases.**

**Topics covered include fundamentals of pediatric medicine for all the systems. The contents integrate the biomedical aspects of pathophysiology with clinical manifestations, laboratory analysis, medical management and implications for dental care.**

**Effectiveness:**

**These courses and seminar, grand rounds and rotations provide the resident with necessary knowledge at the understanding level to interact comfortably with other health professionals and manage the dental care for patients with systemic diseases/disorders and special health care needs. The seminar and formal courses in this area as well as grand rounds and rotations are effective instruction and learning methods.**

**Exhibit 11a – 2.12a**

---

Subject Area: **The fundamental domains of child advocacy including knowledge about the disparities in the delivery of dental care, issues around access to dental care and possible solutions.** Year Offered: **1 & 2**

  X   Dental department seminar, conference, lecture program

  X   Formal course—Title:  
**PEDD 620 – Ped Dent Clinic/Case Conference**

       Off-service rotation to: \_\_\_\_\_

       Other (specify) \_\_\_\_\_

       No formal instruction is provided.

- Total hours of instruction:   5
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No   X  

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No   X  

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope: Didactic seminars covers the basic domains of advocacy that specifically includes knowledge about.**

**-Disparities in delivery of care**

**-Access to care**

**-Solutions to access issues**

**Effectiveness:**

**This is a new element in the teaching domain. Evaluation of effectiveness in process.**

**Exhibit 11a – 2.12b**

---

Subject Area: **Federally and state funded programs like Medicaid and SCHIP that provide dental care to poor populations.** Year Offered: **1 & 2**

Dental department seminar, conference, lecture program

Formal course—Title:  
**PEDD 620 – Ped Dent Clinic/Case Conference**

\_\_\_\_\_ Off-service rotation to: \_\_\_\_\_

\_\_\_\_\_ Other (specify) \_\_\_\_\_

\_\_\_\_\_ No formal instruction is provided.

- Total hours of instruction: 5
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No X

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No X

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Includes a review of how federal and state funded programs function in terms of funding care.**

**Effectiveness:**

**A new part of the curriculum in the process of evaluation.**

**Exhibit 11a – 2.12c**

---

Subject Area: **Principles of Education**

Year Offered: **1 & 2**

Dental department seminar, conference, lecture program

Formal course—Title  
**PEDD 620: Ped Dent Clinic/Case conference**

Off-service rotation to: \_\_\_\_\_

Other (specify) \_\_\_\_\_

No formal instruction is provided.

- Total hours of instruction: **3**
- What is the level of instruction (i.e., competency, proficiency, other) **Understanding**

Is instruction in this subject the same as that provided to:

a. undergraduate dental students/residents? Yes \_\_\_\_\_ No

b. predoctoral medical students/residents? Yes \_\_\_\_\_ No

If YES, describe how this instruction is modified for the advanced education program.

- Assess the scope and effectiveness of the students'/residents' instruction in these areas.

**Scope:**

**Address ways to interact with organized dentistry and policy makers.**

**Effectiveness:**

**New part of the curriculum - In the process of evaluation of effectiveness.**



**UNIVERSITY OF ILLINOIS  
AT CHICAGO**

**COLLEGE OF DENTISTRY**

**Advanced Education Program in  
Pediatric Dentistry**

## **Department Head/Program Director**

Marcio da Fonseca, DDS, MS

### **The Faculty**

#### **Professors**

Indru C. Punwani, DDS, MSD

Shahrbanoo Fadavi, DDS, MS

Anne Koerber, DDS, PhD

Indru C. Punwani, DDS, MSD

Larry B. Salzman, DDS

#### **Associate Professors**

Sahar Alrayyes, DDS, MS

Marilia Montero, DDS

Jin Moon Soh, DDS, MS

Rodney Vergotine, BChD, MSc

#### **Assistant Professors**

Adrienne Barnes, DDS

Nicola Hill-Cordell, DDS

Mary Claire Garcia, DDS

Lance Lambert, DDS

Ricardo Mendoza, DDS

Irwin Seidman, DDS

Ronald Testa, DDS

Ashlee Vorachek, DDS

### **Contact Information**

**Advanced Education Program in Pediatric Dentistry**

**University of Illinois at Chicago**

**College of Dentistry**

**Department of Pediatric Dentistry M/C 850**

**801 S. Paulina Street Chicago, Illinois 60612**

**(312) 996-7531**

## **Scope of the program**

Advanced study in Pediatric Dentistry at the University of Illinois at Chicago is a 24-month program commencing July 1 of each year. Nine positions are available per year.

The goals of the advanced specialty program in pediatric dentistry at University of Illinois at Chicago are: (1) To produce graduates with knowledge, skills, and critical judgment required to practice and teach the specialty of pediatric dentistry; (2) To select and admit highly qualified students with diverse backgrounds including a certain percentage from the underrepresented minority groups; and (3) To foster in the graduates an appreciation for continuous learning, scholarship, service to the profession and community and ability to conduct quality research in areas related to pediatric dentistry.

The program is flexible, permitting candidates to explore areas of special interest. Instruction is tailored to the individual, and faculty attention facilitates development of pediatric dentistry skills. The program is fully accredited by the ADA Council on Dental Education and has been planned in accordance with Commission on Dental Accreditation Standards for Pediatric Dentistry. It meets the eligibility requirements for American Board of Pediatric Dentistry Examination.

Sixty five percent of candidates time is spent focused on patient care, while forty percent is devoted to seminars, research, and teaching. Required clinical courses include advanced clinical pediatric dentistry, case analysis, interceptive orthodontics and minor tooth movement, sedation and hospital dentistry. Each student participates in formal rotations through the Department of Anesthesiology, Emergency room, Pediatric Ward, Pediatric Clinic and subspecialty clinics in Cardiology, Neurology, Hematology/Oncology, and Immunology. Other rotations include Children's Habilitation Clinic and the Craniofacial Center.

Required didactic courses include Advanced Pediatric Dentistry Seminar, Pediatric Dentistry Research, Diagnostic Procedures, Craniofacial Growth and Development, Dental Pediatrics, Pediatric Oral Pathology, Pediatric Physical Diagnosis, Research Methodology, Biostatistics, Practice Management, and Journal Club. Additional elective courses are available based on the personal interest and research needs. Physical facilities include a modern, well equipped clinic with 24 operatories. The clinic is designed for the use of inhalation sedation and moderate/conscious sedation. Candidates gain general anesthesia experience in the operating suites of the University of Illinois Medical Center Hospital, which is across the street from the College of Dentistry building.

## **Admission Requirements**

To be considered for admission in the certificate program, an applicant must (1) be a graduate of an accredited institution awarding a DDS, DMD or a degree comparable

to that awarded by the University of Illinois; (2) have a grade point average of at least 3.00 (A=4.00) for all post-baccalaureate course work; (3) be eligible for a temporary license or possess an Illinois State Dental License; (4) submit the Postdoctoral Application Support Service (PASS) form; (5) be available for a personal interview; and (6) complete the MATCH application. Graduates of foreign dental schools will not be considered for the PASS and MATCH process. Only candidates from US and Canada will be considered.

Upon the Department request, an applicant must complete and forward a University of Illinois application and the required fee to the Office of Admission and Records.

Admission to the Graduate program, which is offered as an MS program in oral sciences through the Graduate College, is predicted upon prior admission to the specialty certificate program, or successful completion of a certificate program at another acceptable institution. The student/resident can be concurrently enrolled in the certificate and MS program.

## **Program Requirements**

Candidates pursuing the Certificate of Proficiency in Pediatric Dentistry must complete:

- **Required Curriculum.** A candidate must successfully complete the full-time, twenty-four months Pediatric Dentistry Program.
- **Research.** Candidates must complete and present an acceptable research project.
- **Clinical Proficiency.** Demonstrate through patient care, written and oral examination, proficiency in the diagnosis and treatment of pediatric patients with a wide spectrum of diseases and disorders. Emphasis is placed on having students demonstrate their knowledge in the pathophysiology of the disease process and the biological basis of patient care.

## **Stipend**

The residents receive the following levels of stipends during their training period. Year 1-- \$49,440, Year 2 -- \$51,180. In addition, the student is entitled to other fringe benefits and complete tuition waiver for the duration of the program.

## **Sequence of Program Courses**

### **Postgraduate Year 1**

#### **Summer Session**

PEDD 595	Seminars in Pediatric Dentistry
PEDD 698	Research in Pediatric Dentistry
PEDD 600	Advanced Pediatric Dentistry Techniques/Growth and Development
PEDD 620	Pediatric Dentistry Case Clinic Conference
PEDD 621	Hospital Dentistry
PEDD 673	Physical Diagnosis



**Fall Semester**

PEDD 410	Principles and Methods in Dental Research I
PEDD 595	Seminars in Pediatric Dentistry
PEDD 698	Research in Pediatric Dentistry
PEDD 600	Advanced Pediatric Dentistry Techniques/Growth and Development
PEDD 620	Pediatric Dentistry Case Clinic Conference
PEDD 621	Hospital Dentistry
ORTD 615	Diagnostic Procedures
BSST 400	Biostatistics
OSCI 451	Research Methodology
OSCI 580	Advanced Oral Sciences I

**Spring Semester**

PEDD 411	Principles and Methods in Dental Research II
PEDD 501	Dental Pediatrics
PEDD 615	Practice Administration in Pediatric Dentistry
PEDD 698	Research in Pediatric Dentistry
PEDD 620	Pediatric Dentistry Case Clinic Conference
PEDD 621	Hospital Dentistry
OSCI 581	Advanced Oral Sciences II
OMDS 615	Anesthesia and Pain Control
OMDS 503	Graduate Oral Pathology

**Postgraduate Year 2****Summer Session**

PEDD 620	Pediatric Dentistry Case Clinic Conference
PEDD 698	Research in Pediatric Dentistry
OSCI 598	Master's Thesis Research
PEDD 600	Advanced Pediatric Dentistry Technique/Growth and Development

**Fall Semester**

PEDD 698	Research in Pediatric Dentistry
PEDD 620	Pediatric Dentistry Case Clinic Conference
PEDD 621	Hospital Dentistry
OSCI 598	Master's Thesis Research
ORTD 524	Craniofacial Anomalies I

**Spring Semester**

PEDD 598	Research in Pediatric Dentistry
PEDD 620	Pediatric Dentistry Case Clinic Conference
PEDD 615	Practice Administration in Pediatric Dentistry

ORTD 525      Craniofacial Anomalies II  
 OSCI 598      Master's Thesis Research

**Program Curriculum**

Course Title	Year Offered	Credit Hours	Where Given
PEDD 595, Pediatric Dental Seminar	1	2	Pediatric Dentistry
PEDD 501, Dental Pediatrics	1 or 2	2	Pediatric Dentistry
PEDD 410, Prin & Methods in Dental Research I	1	2	Pediatric Dentistry
PEDD 411, Prin & Methods in Dental Res II	1	2	Pediatric Dentistry
BSST 400, Biostatistics	1	4	Public Health
OSCI 451, Research Methodology	1	1	Oral Sciences
OSCI 580, Advanced Oral Sciences I	1	2	Oral Sciences
OSCI 581, Advanced Oral Sciences II	1	2	Oral Sciences
OSCI 598, Master's Thesis Research	1 & 2	1-16	Oral Sciences
PEDD 620, Pediatric Dent Clinic/Case Conf	1 & 2	2-16	Pediatric Dentistry
PEDD 673, Pediatric Physical Diagnosis	1	1	Pediatric Dentistry
PEDD 698, Research in Pediatric Dentistry	1 & 2	1-16	Pediatric Dentistry
PEDD 600, Advanced Pediatric Dent Tech / Growth and Development	1 & 2	3	Pediatric Dentistry
PEDD 615, Practice Admin in Pediatric Dent	1 or 2	2	Pediatric Dentistry
OMDS 503, Graduate Oral Pathology	2	2	Pediatric Dentistry
PEDD 621, Hospital Dentistry	1	2	Pediatric Dentistry
ORTD 524, Craniofacial Anomalies I	2	2	Orthodontics
ORTD 525, Craniofacial Anomalies II	2	2	Orthodontics
ORTD 615, Diagnostic Procedures I	1	1-10	Orthodontics
OMDS 615, Anesthesia and Pain Control	1	1	Oral Med & Diag Sc
OMDS 617, Radiology for the Dent Specialist	1 & 2	1	Oral Med & Diag Sc

## Survey

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# Resident evaluations

### PAGE 1

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## 1. Resident evaluation

### Q1

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### 1. Faculty

- Alrayyes
- Barnes
- Fadavi
- Hill-Cordell
- Koerber

- Lamberghini
- Lambert
- Mendoza
- Montero-Fayad
- Punwani
- Seidman
- Soh
- Vergotine
- Vij

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May 2012

Q2

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## 2. Clinic Performance

	A+	A	A-	
<b>Overall grade</b>	● *Clinic	● Overall grade A	● Overall grade A-	● Ov

Performance Overall grade A+				
<b>Diagnosis and treatment planning</b>	● Diagnosis and treatment planning A+	● Diagnosis and treatment planning A	● Diagnosis and treatment planning A-	● Dia treatment
<b>Non-Pharmacological management</b>	● Non-Pharmacological management A+	● Non-Pharmacological management A	● Non-Pharmacological management A-	● Pharm
<b>Pharmacological management</b>	● Pharmacological management A+	● Pharmacological management A	● Pharmacological management A-	● Phar
<b>Special health care needs</b>	● Special health care needs A+	● Special health care needs A	● Special health care needs A-	● Spe care n
<b>Documentation and QA</b>	● Documentation and QA A+	● Documentation and QA A	● Documentation and QA A-	● Doc and

Q3

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### 3. Didactic Performance


A+

A

A


**Seminar participation**


 \*Didactic  
Performance  
Seminar  
participation A+

 Seminar  
participation A

 S  
particip


**Research progress**


 Research  
progress A+

 Research  
progress A

 Re  
progr

**Rotation participation**

 Rotation  
participation A+

 Rotation  
participation A

 R  
particip

Q4


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#### 4. Professionalism

**Excellent**


**Cooperation**

 \*Professionalism Cooperation E


**Reliability**

 Reliability Excellent

**Communication skills**

 Communication skills Exce

**Initiative**

 Initiative Excellent

**Q5**

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**5. This resident can be promoted to the second year.**

- Yes
- No

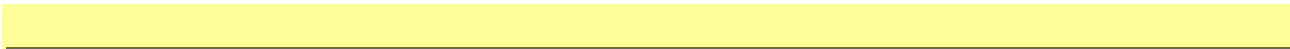
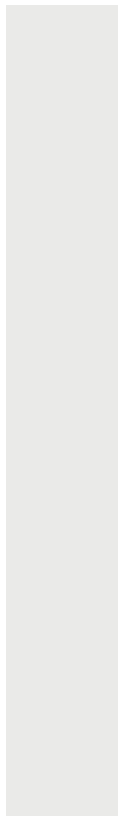
Please provide details if you answered "NO"

**Q6**

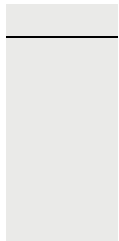
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**6. Please provide comments that can be shared with the resident to improve their performance.**



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**Indru C. Punwani, DDS, MSD**  
*Professor and Head*

Department of Pediatric Dentistry (MC 850)  
Suite 254, College of Dentistry  
801 South Paulina Street  
Chicago, Illinois 60612-7211

TO: New Residents Class of 2013/2015  
FROM: Dr. Indru Punwani – Post-Graduate Program Director  
DATE: July 1, 2013  
RE: Welcome

On behalf of the faculty, residents, and staff of the Department of Pediatric Dentistry, I want to personally welcome you to two of the most exciting years of your life. You are going to really enjoy this Department and you will find the faculty, staff, and residents ready and willing to help you whenever and wherever they can.

My door is always open to you and I look forward to getting to know you on a more personal level. Welcome to UIC!



## Description

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### **Advanced Education Programs in Pediatric Dentistry**

Clinical Specialty and MS Degree Programs  
Department of Pediatric Dentistry (M/C 850)  
College of Dentistry  
University of Illinois at Chicago  
801 S. Paulina St.  
Chicago, IL 60612-7211  
Phone: (312) 996-7531  
Fax: (312) 996-1981

**Program Length and Number of Positions:** This is a 24-month program beginning July 1 of each year. Program takes nine new residents each year.

**Program Type:** University-based, hospital-affiliated program.

**Application:** The application deadline is October 1st of the year preceding matriculation. Correspondence regarding application and admission procedures should be addressed to Jean O'Finn, [jwantrob@uic.edu](mailto:jwantrob@uic.edu), at the following address:

#### **Jean O'Finn**

University of Illinois at Chicago  
College of Dentistry  
Department of Pediatric Dentistry, M/C 850  
801 South Paulina Street, Room 256  
Chicago, IL 60612

Specific questions should be addressed to:

**Dr. Indru Punwani**, [ipunwani@uic.edu](mailto:ipunwani@uic.edu), Postgraduate Program Director, Department of Pediatric Dentistry, University of Illinois at Chicago, 801 S. Paulina St., Chicago, IL 60612-7211; (312) 996-7531; or to **Dr. Rodney Vergotine**, [rodney@uic.edu](mailto:rodney@uic.edu), Associate Program Director.

#### **Description:**

Advanced study in pediatric dentistry is offered through two separate, yet complementary, programs - certificate and graduate M.S. in oral sciences. The clinical specialty program has as its goal the training of the specialist for the comprehensive treatment of the healthy child, as well as the medically compromised and neurologically challenged patient. The graduate program may be pursued by candidates with an interest in an academic position involving teaching and research. Either program includes sufficient flexibility to allow the candidate to explore areas of his/her special interest. Individualized instruction and attention are provided to facilitate early development of the broad range of skills needed in pediatric dentistry. The program is fully accredited by the ADA Council on Dental Education and has been planned in accordance with the guidelines for postdoctoral education of the American Academy of Pediatric Dentistry. It meets eligibility requirements for the American Board of Pediatric Dentistry.

**Curriculum:**

The program is arranged to provide 60 percent patient care activities and 40 percent in seminars, research and teaching activities.

Required clinical courses include: advanced clinical pediatric dentistry, case analysis, interceptive orthodontics, minor tooth movement, sedation and hospital dentistry. Each student participates in formal rotations through the Department of Anesthesiology, Emergency Room, Pediatric Ward, Pediatric Clinic and sub-specialty clinics in Cardiology, Neurology, Hematology/Oncology and the affiliated institution, Children's Habilitation Clinic.

Coursework includes: advanced pediatric dentistry, biostatistics, craniofacial anomalies, dental pediatrics, diagnostic procedures, hospital dentistry, pediatric dentistry research, pediatric dentistry seminar, pediatric oral pathology, pediatric physical diagnosis, practice management, research methodology, seminar on anesthesia and pain control and temporomandibular disorders. A research requirement must be fulfilled for certification (nondegree candidates). Additional elective clinical and graduate courses are also available.

**Program Stipend and Tuition:**

First-year stipend is \$49,440 plus health coverage and fringe benefits. Second-year stipend is \$51,180 plus health coverage and fringe benefits. Tuition is waived. Each July, it is expected there will be a small increase to the stipend.

**Facilities:**

- University of Illinois, College of Dentistry
- University of Illinois Hospital and Health Science System
- Children's Habilitation Clinic

**Admission Requirements:**

Applicants must complete the PASS/MATCH application. In addition, applicants must fulfill and send the following to Jean O'Finn at the address below to be considered for admission:

- DDS, DMD or equivalent if not included in PASS/MATCH application
- Original Dental and preprofessional education transcripts
- Three letters of recommendation (if not included with PASS application)
- 2" x 2" photograph
- Curriculum Vita
- Personal interview (if contacted)

**Program Strengths:**

- Strong didactic (40%) and clinic (60%) experience
- Extensive and diverse patient pool
- Extensive clinical exposure to utilization of sedation and general anesthesia for management of behavior and special needs patients
- Excellent facilities, significant hospital activity, and supporting medical/dental staff
- Diversified and experienced faculty with clinical and research expertise
- Extensive opportunities to gain teaching skills and experience
- 

**Program Faculty:****Full Time**

- Indru C. Punwani, DDS, MSD, Professor/Interim Department Head, Postgraduate Program Director\*\*\*
- Rodney Vergotine, DDS, MS, Assistant Professor, Associate Postgraduate Program Director\*
- Marilia Montero, DDS, Assistant Professor
- Sahar Alrayyes, DDS, MS, Assistant Professor, Predoctoral & Postgraduate Clinic Director\*
- Algernon Bolden, DDS, Associate Professor\*\*
- Shahrbanoo Fadavi, DDS, MS, Professor\*
- Linda Kaste, DDS, MS, PhD, Associate Professor\*\*

- Anne Koerber, DDS, PhD, Professor, Director Behavior Sciences\*\*\*
- Sheela Raja, PhD, Assistant Professor
- Larry B. Salzman, DDS, Clinical Associate Professor, Predoctoral Program Director\*\*\*\*
- Christine Wu, PhD, Professor, Director Caries Research

### Part Time

- Adrienne Barnes, DDS, Clinical Assistant Professor\*\*\*\*
- Mary Claire Garcia, DDS, MS, Clinical Assistant Professor\*\*\*\*
- Lance Lambert, DDS, Clinical Assistant Professor
- Flavia Lamberghini, DDS, Clinical Assistant Professor\*
- Ricardo Mendoza, DDS, Clinical Assistant Professor
- Irwin M. Seidman, DDS, Clinical Assistant Professor\*
- Jin-Moon Soh, DDS, MS, Clinical Associate Professor\*\*\*\*
- Kapil Vij, DDS, MS, Clinical Assistant Professor\*\*\*\*
- Nicola Hill-Cordell, DDS, Clinical Assistant Professor\*
- Ron Testa, D.D.S., M.S., Clinical Assistant Professor\*\*\*\*

\* Diplomate, American Board of Pediatric Dentistry

\*\* Diplomate, Dental Public Health

\*\*\* Diplomate, Clinical Psychology

\*\*\*\* Illinois Specialty Board

**Effective July 16, 2013**

**Marcio da Fonseca, D.D.S, M.S., Associate Professor and Department Head/ Interim Program Director \*\*\***

## • School Profile

<b>Program Type</b>	University-based Certificate Degree Elective / available
<b>Program Director</b>	Full-Time Board Certified
<b>Program Faculty</b>	<b>11</b> Full-Time <b>9</b> Part-Time <b>14</b> Board Certified
<b>Program Length</b>	<b>24</b> Total Months <b>July 1</b> Start Date
<b>Program Accreditation</b>	Approved
<b>Start Licensure</b>	Restricted License Available
<b>Number of entering positions</b>	<b>9</b>
<b>Salary/Stipend</b>	\$49,440 First Year \$51,180 Second Year
<b>Application Deadline</b>	<b>October 1</b>
<b>Participant in National Matching Service</b>	Yes
<b>Participant in PASS</b>	Yes
<b>Only US citizens from ADA accredited dental schools considered</b>	Yes
<b>US citizens from foreign dental schools</b>	No

**considered**

**Non-US citizens from ADA accredited dental schools considered**

Yes

**Non-US citizens from foreign dental schools considered**

No

**Acceptance/Applicant Ratio**

**1:8**

**Clinic Experience**

Orthodontics  
Moderate Sedation  
Hospital Rotations  
General Anesthesia  
Emergency Call  
Operating Room  
Oral Surgery  
Infant Oral Health  
Medically Compromised  
Mentally Disabled  
Craniofacial Disorders  
Physically Disabled

**Didactic Experience**

Seminars  
Literature Review  
Courses  
Case Conferences

**Research Requirement**

Data Collection Project

**Teaching Experience**

1 Clinic Half-Days  
Yes Lecture/Presentations

**Facilities**

24 Chair/Operatories  
4 Clinic Receptionist  
10 Dental Assistants

## College of Dentistry: Dentistry Academic Calendar

### Academic Calendar

- **Academic Year 2012-2013**

---

- **Spring Term 2013**
- Spring Term 2013 January 7: Classes & Clinics Begin  
January 21: MLK Day - Closed  
March: 11 - 15 Spring Break: D1, D2, D3, I1  
March: 18 - 22 Spring Break: D4, I2  
April 26: Classes & Clinics End

- **Academic Year 2013-2014**

---

- **Summer Term 2013**
- May 6: Classes & Clinics Begin  
May 27: Memorial Day - Closed  
July 1-5: Summer Break - no classes or clinics  
August 23: Classes & Clinics End
- **Fall Term 2013**
- August 19: D1 Classes Begin  
September 2: Labor Day - Closed  
September 3: Classes Begin (D2, D3, D4, I1, I2)  
November 25-29: Fall Break - no classes or clinics  
December 20: Classes & Clinics End
- **Spring Term 2014**
- January 6: Classes & Clinics Begin  
January 20: MLK Day - Closed  
March: 17 - 21 Spring Break: D1, D2, D3, I1  
March: 24 - 28 Spring Break: D4, I2  
April 25: Classes & Clinics End

- **Academic Year 2014-2015**

---

- **Summer Term 2014**
- May 5: Classes & Clinics Begin  
May 26: Memorial Day - Closed  
June 30 - July 5: Summer Break  
August 22: Classes & Clinics End
- **Fall Term 2014**
- August 18: D1 Classes Begin  
September 1: Labor Day - Closed  
September 2: All Other Classes Begin  
November 24-28: Fall break  
December 19: Classes & Clinics End
- **Spring Term 2015**
- January 5: Classes & Clinics Begin  
January 19: MLK Day - Closed  
March: Spring Break - 1 Week TBA  
April 24: Classes & Clinics End

- **Academic Year 2015-2016**
- **Summer Term 2015**
  - May 4: Classes & Clinics Begin
  - May 25: Memorial Day - Closed
  - June 29-July 3: Summer Break
  - August 21: Classes & Clinics End
- **Fall Term 2015**
  - August 17: D1 Classes Begin
  - August 31: All Other Classes Begin
  - September 7: Labor Day - Closed
  - November 23-27: Fall Break
  - December 18: Classes & Clinics End
- **Spring Term 2016**
  - January 4: Classes and Clinics Begin
  - January 18: MLK Day - Closed
  - March: Spring Break - 1 Week TBA
  - April 22: Classes & Clinics End



**Department of Pediatric Dentistry  
Resident Orientation Schedule 2013**

**Complete LMS Fit – Testing Module before beginning any Orientations**

<b>Monday June 17<sup>th</sup></b>	<b>Tuesday June 18<sup>th</sup></b>	<b>Wednesday June 19<sup>th</sup></b>	<b>Thursday June 20<sup>th</sup></b>	<b>Friday June 21<sup>st</sup></b>	<b>Saturday June 22<sup>nd</sup></b>
<p>Must have a I-Card before attending orientation Wednesday, June 19<sup>th</sup></p> <p>Present a state ID, driver's license or passport at the I-Card office. The state ID or license must have your photo, but does not need to be from Illinois.</p>	<p align="center"><b>8:30<sup>am</sup></b></p> <p>Coffee &amp; Bagels with PG's Department of Pediatric Dentistry 801 S. Paulina Room 230B Gerlach Room</p> <p align="center"><b>9:00am – 12:00 Noon</b></p> <p align="center"><b>I-Card Photo</b></p> <p>Student Residence Hall, Student Center West (SCW) 828 S. Wolcott Ave, Room 241 312-413-5944</p> <hr/> <p align="center"><b>2<sup>00</sup> Health Service</b></p> <p>835 S. Wolcott Ave. (main entrance) *Health screen *Respirator Fit</p> <hr/> <p align="center"><b>Eye Examinations</b></p> <p>1855 W. Taylor (EEI) B46</p> <hr/> <p align="center"><b>1:00 – 4:00<sup>PM</sup></b></p> <p><b>Procedural Skills Assessment</b> Graham Clinical Performance Center (GCPC) in the Medical Sciences Building at 835 S. Wolcott, Rm. E116</p>	<p align="center"><b>7:00<sup>am</sup> – 5:00<sup>PM</sup></b></p> <p align="center"><b>UI Hospital Orientation</b> MM Thompson Rooms ABC Student Center West 828 S. Wolcott Ave.</p> <p>Lab Coat Distributed at end of day</p>	<p align="center"><b>7:00<sup>am</sup> – 5:30<sup>PM</sup></b></p> <p align="center"><b>GME Orientation</b> MM Thompson Rooms ABC Second Floor Student Center West 828 S. Wolcott Ave.</p> <p>Bring I-Card, Driver's License, Checkbook if you need</p> <p>Lab Coats distributed at end of day</p>	<p align="center"><b>8:30am – 12:00 Noon</b></p> <p align="center"><b>AAPD Inservice Exam</b></p> <p align="center"><b>1:30pm</b> <b>Complete I-9'S with GME</b></p>	

**PALS Course August 17<sup>th</sup> & August 18<sup>th</sup>, 2013**



Monday June 24 <sup>th</sup>	Tuesday June 25 <sup>th</sup>	Wednesday June 26 <sup>th</sup>	Thursday June 27 <sup>th</sup>	Friday June 28 <sup>th</sup>	Saturday June 29 <sup>th</sup>
	<p data-bbox="432 188 674 224"><b>8:30<sup>am</sup> – 9:00<sup>am</sup></b></p> <p data-bbox="327 269 781 347"><b>Welcome to the Department of Pediatric Dentistry</b></p> <p data-bbox="470 354 638 602">Dr. Punwani Dr. Seidman Dr. Soh Dr. Vergotine Dr. Koerber Dr. Alrayyes Gerlach Room 230B</p> <p data-bbox="426 651 684 686"><b>9:00<sup>am</sup> – 11:00<sup>am</sup></b></p> <p data-bbox="323 699 785 735"><b>Introduction to the Program</b></p> <p data-bbox="470 742 638 833">Dr. Punwani Dr. Alrayyes Dr. Vergotine</p> <p data-bbox="417 873 690 909"><b>11:00<sup>am</sup> – 12:00<sup>pm</sup></b></p> <p data-bbox="428 922 680 958"><b>ER Orientation</b></p> <p data-bbox="449 964 659 1029">Dr. Whittington Dr. Alrayyes</p> <p data-bbox="432 1070 676 1105"><b>1:00<sup>am</sup> – 1:45<sup>pm</sup></b></p> <p data-bbox="407 1118 701 1154"><b>Clinic Orientation</b></p> <p data-bbox="474 1161 634 1190">Dr. Alrayyes</p> <p data-bbox="432 1276 676 1312"><b>1:45<sup>am</sup> – 2:30<sup>pm</sup></b></p> <p data-bbox="365 1325 743 1360"><b>Front Desk Orientation</b></p> <p data-bbox="436 1367 672 1432">Ms. Sachen-Brown Dr. Alrayyes</p>	<p data-bbox="863 188 1079 266"><b>Orthodontics Rounds</b></p> <p data-bbox="842 321 1100 532">Dr. Lambert Dr. Alrayyes Dr. Fadavi Dr. Vergotine Gerlach Conference Rm. 230B</p> <p data-bbox="842 573 1100 609"><b>9:00<sup>am</sup> – 10:00<sup>am</sup></b></p> <p data-bbox="852 615 1089 761">Introduction to Hospital Dentistry Dr. Vergotine Dr. Lambert</p> <p data-bbox="831 802 1110 837"><b>10:00<sup>am</sup> – 12:00<sup>pm</sup></b></p> <p data-bbox="831 844 1110 1013">Introduction to Orthodontics Dr. Vij/Dr. Vergotine Gerlach Conference Rm 230B</p> <p data-bbox="852 1053 1089 1089"><b>1:30<sup>pm</sup> – 4:30<sup>pm</sup></b></p> <p data-bbox="863 1096 1079 1203">Orthodontics Orientation/Lab Dr. Vij</p>	<p data-bbox="1199 233 1331 311"><b>9:00<sup>am</sup> – 5:00<sup>pm</sup></b></p> <p data-bbox="1157 367 1373 737"><b>EMR Training</b> (Powerchart) UICH Room 1300 (room next to cafeteria) University of Illinois Medical Center at Chicago</p>	<p data-bbox="1440 188 1682 224"><b>8:00<sup>am</sup> – 5:00<sup>pm</sup></b></p> <p data-bbox="1461 279 1661 399"><b>College of Dentistry Orientation</b></p> <p data-bbox="1440 451 1675 529"><b>801 S. Paulina Room 501</b></p>	<p data-bbox="1766 233 2032 334"><b>Graduation Dinner</b> 6:30pm reception 7:30pm Dinner</p>

**PALS Course August 17<sup>th</sup> & August 18<sup>th</sup>, 2013**

Monday July 1 <sup>st</sup>	Tuesday July 2 <sup>nd</sup>	Wednesday July 3 <sup>rd</sup>	Thursday July 4 <sup>th</sup>	Friday July 5 <sup>th</sup>	Saturday July 6 <sup>th</sup>
<p>9:00 a.m.– 10:30 a.m. <b>Clinic Orientation</b> Dr. Alrayyes - Review Clinic Manual</p> <p>10:30 a.m. – 12:00 p.m. <b>Clinic Observation</b></p> <p>*12:00 – 1:00 p.m. <b>Luncheon</b> All PG's invited</p> <p>1:00- 4:00 <b>Clinic Observation</b></p>	<p>8: 00 a.m. -10:30 a.m. <b>OR – Orientation</b> Ms. Rovina Lerio UI Medical Center Surgery, Third Fl.</p> <p>10:30a.m. –12:00p.m. <b>GA Orientation</b> Dr. Gray/Dr. Popejoy/Dr. Singh</p> <hr/> <p>1:00 p.m. - 3:00 p.m <b>AxiUm Orientation and Q and A</b> Dr. Gray Dr. Alrayyes</p> <p>3:00 p.m. – 4:30 p.m. <b>Q and A Orientation</b> Dr. Whittington Dr. Alrayyes</p>		<p>HOLIDAY</p>		

**PALS Course August 17<sup>th</sup> & August 18<sup>th</sup>, 2013**

**JULY**

<b>Monday 08</b>	<b>Tuesday 9</b>	<b>Wednesday 10</b>	<b>Thursday 11</b>	<b>Friday 12</b>	<b>Saturday 13</b>
<p><b>9:00 a.m. – 9:30 a.m.</b> <b>Research Orientation</b> Dr. Koerber</p> <p><b>9:30 a.m. – 12:00 p.m.</b> <b>Clinic</b></p> <hr/> <p><b>1:00-4:30p.m.</b> <b>Clinic</b></p>	<p><b>9:00 a.m. – 12:00 p.m.</b> <b>Introduction to Pediatric Dentistry Seminar</b> Dr. Seidman</p> <hr/> <p><b>1:00-4:30p.m.</b> <b>Clinic</b></p>	<p><b>8:00 – 9:00a.m.</b> <b>Orthodontics Rounds</b> Dr. Alrayyes Dr. Lambert Dr. Fadavi Dr. Vergotine Gerlach Conference Room (230B)</p> <p><b>9:00 - 10:00a.m.</b> <b>Introduction to Hospital Dentistry</b> Dr. Vergotine/Dr. Lambert</p> <p><b>10:00a.m. – 12:00p.m.**</b> <b>Introduction to Orthodontics</b> Dr. Vij Gerlach Conference Room (230B)</p> <hr/> <p><b>1:30 – 4:30p.m.</b> <b>Orthodontics Orientation / Lab</b> Dr. Vij</p>	<p><b>9:00 – 4:30 p.m.</b> <b>Clinic</b></p>	<p><b>GA Rotation</b></p> <p><b>9:00 a.m. – 4:30 p.m.</b> <b>Clinic</b></p>	

**PALS Course August 17<sup>th</sup> & August 18<sup>th</sup>, 2013**

# **The PALS Course**

**will be held on**

***Saturday, August 17, 2013***

**8:00<sup>am</sup> to 4:30<sup>pm</sup>**

**and**

***Sunday, August 18, 2013***

**8:00<sup>am</sup> to 1:30<sup>pm</sup>**

**Pediatric Dentistry**

**Gerlach Conference Room**

**(230B)**

**Dr. Zakaria Messieha**

UNIVERSITY OF ILLINOIS  
AT CHICAGO

Department of Pediatric Dentistry (MC 850)  
College of Dentistry  
801 South Paulina Street  
Chicago, Illinois 60612-7211

TO: Residents

FROM: Dr. Indru Punwani  
Postdoctoral Program Director

DATE: July 1, 2013

RE: Vacation/Sick Policy

There are twenty vacation days given by the Department during each year. These days should be taken within the current calendar year; i.e., July 1, 2013 to June 30, 2014, and we encourage the use of vacation time within the calendar year.

In order to be able to cover ER and OR duties, based on a mutual agreement, residents will rotate their vacation times. All vacation requests should be given to either Dr. Alrayyes or Dr. Vergotine in writing as much as six weeks in advance of the requested time away as possible. All vacation days will be counted as whole days of vacation; no half-day requests will be considered, except under special circumstances approved by Dr. Alrayyes or Dr. Vergotine. Requests for vacation time in the last two weeks of the residency are strongly discouraged and will only be granted in special circumstances.

The new residents may start their vacations after being enrolled in the program for three months. If a resident must be away from the clinic before the three months have passed, approval must be obtained enough in advance by Dr. Alrayyes or Dr. Vergotine to allow for clinic coverage.

It is expected that during each year, residents will be able to attend one professional dental meeting. If residents need to attend additional dental meetings, they must use their vacation days after approval of one of the Program Directors. Information on meeting attendance follows this memo.

If residents are sick and absolutely cannot be in attendance, they must page Dr. Punwani (7531) or Dr. Vergotine (6239) early in the morning so that their schedules can be rearranged to cancel and reschedule patients. If no one answers, please leave a message. No sick day(s) will be approved the day before or after vacation day(s) unless accompanied by authorization or certification from a doctor as to the illness on those days. Those days requested as sick days will be counted as vacation days.

For urgent issues related to ER or OR, you should page Dr. Vergotine or Dr. Punwani. Special circumstances and emergencies will be taken into consideration for deviations from the standard policy, if absolutely necessary.

**UIC**



## **POLICY ON ATTENDANCE TO MEETINGS**

### **Vacation, Sick Leave, Meetings**

*We strongly encourage residents to attend local and national meetings and other scholarly events, and will do our best to facilitate attendance and provide financial support as listed below as best as we can. However, clinic and other scheduling conflicts and the availability of funds will play a role in the approval and/or the financial support for the event.*

**AAPD:** All first year residents will attend the Annual AAPD meeting and make a poster presentation. The cost to the meeting will be covered based on the cheapest air fair and shared room occupancy, as appropriate.

**Board Preparation:** All second year residents will be encouraged to attend a Board preparation course and we will provide \$500 towards the cost.

**AADR/IADR:** 2<sup>nd</sup> year residents who complete their research projects in time to be able to present the paper/poster at this meeting will be supported to the level of \$500 towards the cost.

**CDS:** Residents will be able to attend as long as emergency clinic coverage and hospital rotations are not in conflict. Registration fee will be covered.

**ISPD:** We will encourage the attendance to the Spring and Fall meeting as long as we are able to work out emergency coverage. Registration will be covered.

Attendance to one additional national meeting may be allowable, if there are no scheduling challenges. The Department, however, will not provide any financial support.

Any other events will be reviewed on a case by case basis. Other source of funds may be available through the Graduate College and under-Represented minority student program.

## Meetings & Holidays

### Meetings

Date	Reason	Clinic status
November 15-16, 2013	AAPD CE course (Chicago)	Clinic Closed
December 4, 2013	Illinois Society of Pediatric Dentists (Chicago)	Clinic closed
February 20-22, 2014	CDS Midwinter meeting (Chicago)	Clinic open
TBA	Clinic and Research Day (UIC)	Clinic Closed
March 15-18, 2014	ADEA annual session (San Antonio)	Clinic open*
March 19-22, 2014	AADR annual session (Charlotte)	Clinic open*
May 22 <sup>nd</sup> – 25 <sup>th</sup> , 2014	AAPD Annual Session (Boston)	Clinic open for PG2

\*Reduced faculty

### Holidays

Date	Reason	Clinic status
July 4, 2013	Independence Day	Clinic Closed
September 2, 2013	Labor Day	Clinic closed
November 28-29, 2013	Thanksgiving Day	Clinic Closed
December 24, 2013	Christmas Day	Clinic Closed
January 1, 2014	New Year's Day	Clinic Closed
January 20, 2014	Martin Luther King Day	Clinic Closed
May 26, 2014	Memorial Day	Clinic Closed

## Department of Pediatric Dentistry

### Residents' Responsibilities

2013

Dr. Khan	Assist in monitoring ER and OR supply, facilitate the reporting process for any supply or equipment needs of residents to Program Director (maintain records and reports).
Dr. Davis	Lunch & Learn, follow-up with consults from other referring dentists and physicians, liaison with front desk for recalls appointments, etc. Orientation booklet.
Dr. Popejoy Dr. Singh Dr. Gray	GA patients scheduling and follow-up with co-residents.
Dr. Patrick Whittington Chief Resident  The Chief Resident is a senior resident appointment by the Program Director to supervise junior residents, and perform other administrative duties as assigned by the Program Director.	Liaison with faculty.  Call Schedules, other schedules, Ortho Cases (Ortho-Pedo seminars), NIU, Hospital rotation schedule, Emergency residents' schedule



## **DEPARTMENT OF PEDIATRIC DENTISTRY**

### **Who Handles What Responsibilities**

If you have questions regarding any of the following issues, please see the designated appropriate person listed below. If you have an issue not addressed here, please Dr. Punwani.

#### **CLINIC**

##### **Dr. Alrayyes, Clinic Director**

PG Clinic Schedule  
Front Desk Issues  
Dental Assistants  
Instruments/Materials  
Quality Assurance  
Sedation Medication Log  
Crash Cart Log  
Journal Club  
Maintenance of Patient  
Vacation Approvals

#### **HOSPITAL/GME**

##### **Dr. Vergotine, Associate Program Director**

Hospital GA/Rotations  
GME/Courses/Grades  
Ortho Patients  
On-Call Schedule/Issues  
Journal Club

## **Department of Pediatric Dentistry Recommended Textbooks**

1. McDonald, R. E., Avery, D. R. Dentistry for the Child and Adolescent, Elsevier Health Sciences, Ed. 9, 2011.
2. Pinkham, J. R., Casamassimo, P. S., Fields, H. W. Nowak, A. J., McTigue, D. J. Pediatric Dentistry: Infancy through Adolescence. Elsevier Health Sciences, Ed. 4, 2005.
3. Proffit, W. R. Contemporary Orthodontics, Elsevier Health Sciences, Ed. 4, 2006. Also available e-dition – text with online references, 2007.
4. Little, J. W., Miller, C., Falace, D. A. Dental Management of the Medically Compromised Patient, Elsevier Health Sciences, Ed. 7, 2007.
5. Kliegman, R. M., Behrman, R. E., Jenson, H. B. Nelson Textbook of Pediatrics, Elsevier Health Sciences, Ed. 18, 2007.
6. Johns Hopkins Hospital, Custer, J. W., Rau, R. E. The Harriet Lane Handbook, Mosby, Inc., Ed. 18, 2008.
7. Physicians Desk Reference 2012, PDR Books.
8. Regezi, J. A., Sciubba, J. J., Jordan, R. C. K. Oral Pathology: Clinical Pathologic Correlations with CD-Rom, Saunders Book Co., Ed. 5, 2007.
9. Lexi-Comp, Inc. Drug Information Handbook for Dentistry. Ed. 17., Lexi-Comp, Inc., 2011-2012.
10. Lockhart, P. B., Meechan, J., Nunn, J. H. Dental Care of the Medically Complex Patient. Elsevier Health Sciences, Ed. 5, 2003.

## POLICY ON CALL SCHEDULE

1. Starting July 1, 2013, first-year residents can take call from home with the understanding that they will be available upon any "page" within **one-half hour**. During this period, the pediatric dentistry resident will respond to all "Pediatric Dentistry" calls. The resident on call will have an opportunity to work closely with the Oral Surgery residents.
2. The first-year residents are scheduled for "First call" from July 1, 2013. However, both first- and second-year residents (First and Second call) should be present for each call till Monday, August 16<sup>TH</sup>. This is the orientation period for the incoming residents to ER and it is very important that the "assigned second-year resident" accompany the first-year resident for each call. During this period, when the first-year resident receives the call, he/she should immediately page the second-year resident and both should report to the ER.
3. After the initial introductory period the second-year residents when second –on-call **MUST** be able to come in (within one hour) after being contacted by first-year residents.
4. On a rotational basis, each second-year residents will be on "first call" once every six weeks.
5. When the first-year resident is sick, the second-year resident will take First call. If the second-year resident is sick, a volunteer from the second-year residents will cover.
6. All vacation requests should be submitted early enough to allow us to accommodate the call schedule.

Call Schedule

See Google calendar

# EMERGENCY CLINIC CALL SCHEDULE

TBD

Department of Pediatric Dentistry

Resident Pagers Class of 2015

Name	Pager
Jazmine Day	3703
Reena Patel	3743
Jonathan Patrick	3762
Anya Preece	3751
Mital Spatz	3742
Megan Van Lieshout	3706

New pagers

Name	Page #
Dhara Patel	5295
Ellen Huang	5154
Lindsey North	5251

### NEW RESIDENTS DEMOGRAPHICS

LAST NAME	FIRST NAME	EMAIL ADDRESS	CELL PHONE	CHICAGO ADDRESS
Daye	Jazmine	<a href="mailto:jday2@uic.edu">jday2@uic.edu</a>	847-924-2769	9226 Golf Rd., #313 Des Plaines, IL 60016
Huang	Ellen	<a href="mailto:ellenhuang3@gmail.com">ellenhuang3@gmail.com</a> ; <a href="mailto:huange2@unlv.nevada.edu">huange2@unlv.nevada.edu</a>	626-703-7655	1255 S. State St.. Unit#1306 Chicago, IL 60605
North	Lindsey	<a href="mailto:Lindsey.erin.north@gmail.com">Lindsey.erin.north@gmail.com</a> ; <a href="mailto:NorthLE@vcu.edu">NorthLE@vcu.edu</a>	703-507-4509	1255 S. Michigan Ave., Apt 1710 Chicago, IL 60605
Patel	Dhara	<a href="mailto:dbpatel2@uic.edu">dbpatel2@uic.edu</a>	630-728-2415	611 S. Wells St. Unit 2603 Chicago, IL 60607
Patel	Reena	<a href="mailto:rpate207@uic.edu">rpate207@uic.edu</a>	847-867-0413	251 Butler Drive Bartlett, IL 60103
Patrick	Jonathan	<a href="mailto:JonP84@gmail.com">JonP84@gmail.com</a> ; <a href="mailto:Jpatrick@bcd.tamhsc.edu">Jpatrick@bcd.tamhsc.edu</a>	832-439-9596	555 W. Kinzie St. Apt 3606 Chicago, IL 60654
Preece	Anya	<a href="mailto:anyanpreece@gmail.com">anyanpreece@gmail.com</a> ; <a href="mailto:Apreece@bcd.tamhsc.edu">Apreece@bcd.tamhsc.edu</a>	804-822-6161	1600 S. Prairie, Unit 704
Spatz	Mital	<a href="mailto:mitalspatz@yahoo.com">mitalspatz@yahoo.com</a>	773-908-0482	1474 W. Foster Ave. Unit #1E Chicago, IL 60640
Van Lieshout	Megan	<a href="mailto:megan.vanlieshout@mu.edu">megan.vanlieshout@mu.edu</a>	262-510-1043	936 N. Wolcott Ave, #2F Chicago, IL 60622

Date	PGY2	PGY1	Back-Up	Attending	Comment
Wed June 5, 2013	Whittington	Singh	-	Punwani	
Fri June 7, 2013	Whittington	Popejoy	Davis	Lambert	
Wed June 12, 2013	Gray	Whittington	-	Vergotine	
Fri June 14, 2013	Davis	Khan	Popejoy	Lambert	
Wed June 19, 2013	Gray	Davis	-	Fadavi	
Fri June 21, 2013	Khan	Popejoy	Gray	Vergotine	
Wed June 26, 2013	Khan	Davis	-	Lambert	
Fri June 28, 2013	Popejoy	Singh	Davis	Fadavi	
Wed July 10, 2013	Singh	Whittington	-	Alrayyes	
Fri July 12, 2013	Whittington	Preece	Gray	Fadavi	
Wed July 17, 2013	Khan	Singh	-	Vergotine	
Fri July 19, 2013	Khan	North	Whittington	Alrayyes	
Wed July 24, 2013	Davis	Popejoy	-	Fadavi	
Fri July 26, 2013	Gray	Patrick	Singh	Vergotine	
Wed July 31, 2013	Singh	Davis	-	Alrayyes	
Fri August 2, 2013	Whittington	Huang	Khan	Alrayyes	
Wed August 7, 2013	Khan	Davis	-	Lambert	
Fri August 9, 2013	Popejoy	Spatz	Singh	Fadavi	
Wed August 14, 2013	Gray	Whittington	-	Fadavi	
Fri August 16, 2013	Singh	Van Lieshout	Whittington	Alrayyes	
Wed August 21, 2013	Popejoy	Gray	-	Alrayyes	
Fri August 23, 2013	Huang	Patel, R	Van Lieshout	Vergotine	2nd years - review course
Wed August 28, 2013	Singh	Davis	-	Vergotine	
Fri August 30, 2013	Gray	Patel, D	Popejoy	Punwani	
Wed September 4, 2013	Whittington	Khan	-		
Fri September 6, 2013	Popejoy	Daye	Davis		
Wed September 11, 2013	Gray	Singh	-		
Fri September 13, 2013	Whittington	North	Gray		
Wed September 18, 2013	Popejoy	Khan	-		
Fri September 20, 2013	Davis	Patrick	Singh		
Wed September 25, 2013	Khan	Davis	-		
Fri September 27, 2013	Khan	Preece	Whittington		
Wed October 2, 2013	Singh	Popejoy	-		
Fri October 4, 2013	Whittington	Spatz	Khan		
Wed October 9, 2013	Davis	Gray	-		
Fri October 11, 2013	Popejoy	Patel, R	Singh		
Wed October 16, 2013	Whittington	Singh	-		
Fri October 18, 2013	Singh	Patel, D	Davis		



Date	PGY2	PGY1	Back-Up	Attending	Comment
Wed October 23, 2013	Khan	Popejoy	-		
Fri October 25, 2013	Whittington	Daye	Popejoy		
Wed October 30, 2013	Khan	Davis	-		
Fri November 1, 2013	Popejoy	Huang	Whittington		
Wed November 6, 2013	Whittington	Popejoy	-		
Fri November 8, 2013	Singh	North	Khan		
Wed November 13, 2013	Popejoy	Davis	-		
Fri November 15, 2013	Whittington	Patrick	Singh		
Wed November 20, 2013	Khan	Popejoy	-		
Fri November 22, 2013	Singh	Preece	Davis		
Wed November 27, 2013	No GA	No GA	No GA	No GA	Thanksgiving
Fri November 29, 2013	No GA	No GA	No GA	No GA	Thanksgiving
Wed December 4, 2013	Whittington	Popejoy	-		
Fri December 6, 2013	Khan	Spatz	Singh		
Wed December 11, 2013	Davis	Whittington	-		
Fri December 13, 2013	Khan	Van Lieshout	Gray		
Wed December 18, 2013	Singh	Gray	-		
Fri December 20, 2013	Gray	Patel, R	Whittington		
Wed December 25, 2013	No GA	No GA	No GA	No GA	Christmas
Fri December 27, 2013	No GA	No GA	No GA	No GA	Christmas
Wed January 1, 2014	No GA	No GA	No GA	No GA	New Year's
Friday January 3, 2014	Khan	Patel, D	Davis		

**Department of Pediatric Dentistry**  
**Residents Clinic Schedule**  
**Summer Semester Part II (July 1, 2013 –August 18, 2013)**

<b>AM ASSIGNMENTS</b>	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>
<b>PGI &amp; II</b>	8:00-9:00 Research Seminar Koerber ****	8:00-9:00 Hospital Grand Rounds **	8:00 – 9:00 Clinic & Ortho Rounds ****		
PG I Seminar			9:00-10:30 Hosp Dentistry Vergotine 10:30-12:00 Orthodontic seminar Dr. Vij (selected Wednesdays)		
GA/ Rotation			***Punwani/Fadavi/Lambert/ Vergotine/Alrayyes/Montero		*** Punwani/Fadavi Lambert/Vergotine/Alrayyes
Clinic	Fadavi/Montero <i>Alrayyes on call</i>	Seidman/Soh <i>Alrayyes on call</i>	Lambert/Fadavi <i>Vergotine on call</i>	Fadavi/Lamberghini	Hill/Vergotine/Lambert
*Emergency Resident	Resident on Rotation	Resident on Rotation	Resident on Rotation	Resident on Rotation	Resident on Rotation
<b>NOON</b>					
PG I Seminar		12:00-1:00 Dx and Tx planning Vergotine/Alrayyes			
<b>PM ASSIGNMENTS</b>					
PG I Seminar		1:30-4:30 Ped Dent Seminar Seidman			
Clinic	Montero/Voracheck	Alrayyes/Soh	Alrayyes/Vergotine <b>Infant Clinic</b>	Barnes/Garcia <i>Vergotine on call</i>	Vergotine/Lambert <i>Fadavi on call</i>

\*Emergency Resident Schedule

\*\* selected rounds

\*\*\* OR (On-rotation)

\*\*\*\* Depart faculty

## Sedation monitoring Schedule

<b>Resident</b>	<b>First sedation monitoring</b>	<b>Second sedation monitoring</b>
Jazmine Daye	July 17, 2013	August 5, 2013
Ellen Huang	July 12, 2013	August 5, 2013
Lindsey North	July 12, 2013	August 6, 2013
Dhara Patel	July 17, 2013	August 6, 2013
Reena Patel	July 11, 2013	August 9, 2013
Jonathan Patrick	July 11, 2013	August 9, 2013
Anya Preece	July 8, 2013	August 16, 2013
Mital Spatz	July 8, 2013	August 15, 2013
Megan Van Lieshout	July 5, 2013	August 13, 2013

\*Your schedule in axiUm has been blocked for these dates

\*\*Enter code D9249 (sedation monitoring) in the patient chart in axiUm

# Post Graduate Clinic Unit Assignment

July 1<sup>st</sup> - September 1<sup>st</sup>, 2013

GA/ Sedation  
Room  
Chair #4

GA/ Sedation  
Room  
Chair #5

Dr. Spatz  
Chair #6

Dr. R. Patel  
Chair #7

Dr. Davis  
Chair #8

Dr. Singh  
Chair #9

Sedation  
Room  
Chair #3

Recovery  
Room  
Chair #2

Dr. D. Patel  
Chair #18

Dr. Patrick  
Chair #17

Dr. Whittington  
Chair #10

Radiology  
Room

Dr. North  
Chair #18

Dr. Van  
Lieshout  
Chair #16

Dr. Gray  
Chair #11

Dr. Daye  
Chair #19

Dr. Preece  
Chair #15

Dr. Khan  
Chair #12

Emergency  
Chair #1

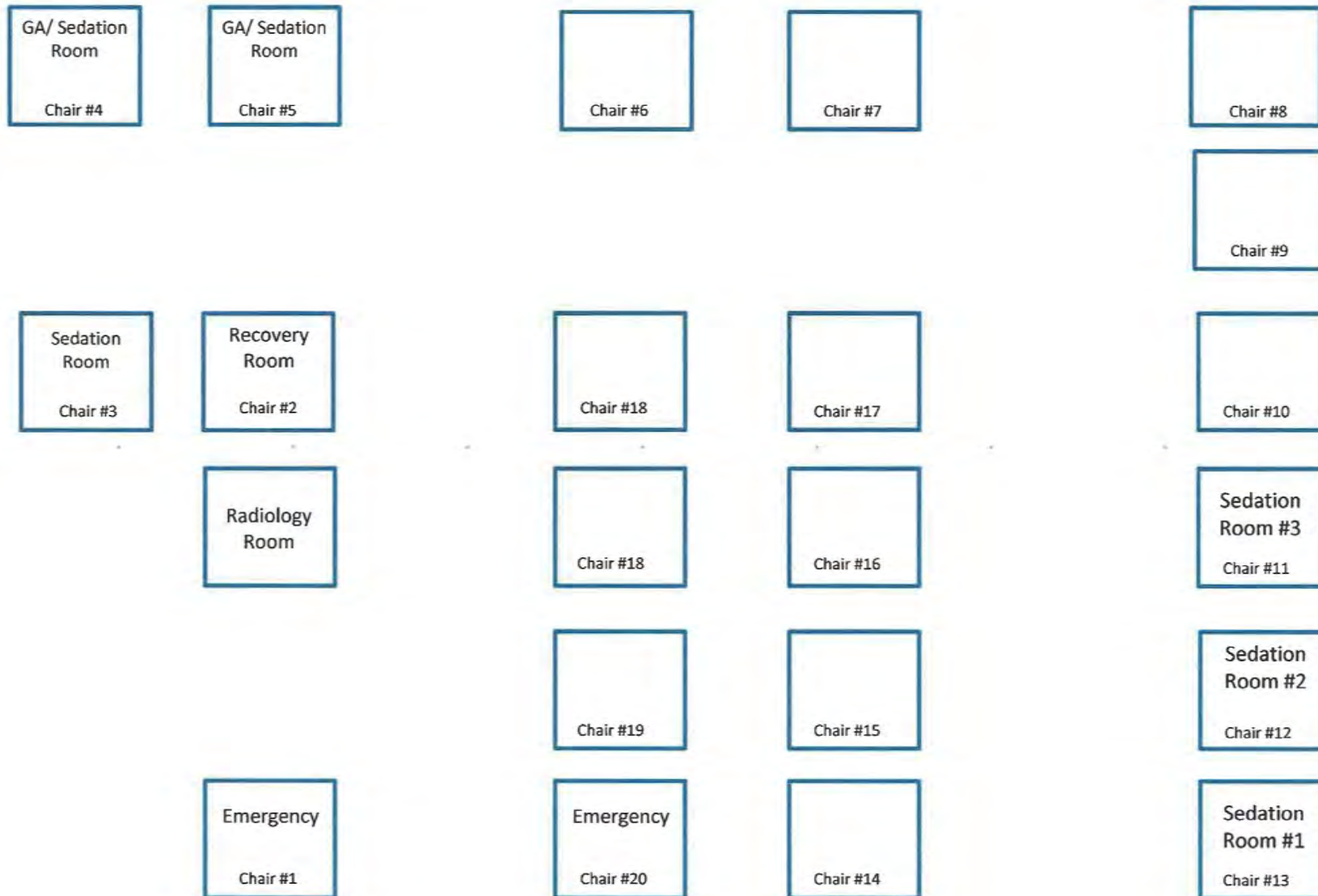
Emergency  
Chair #20

Dr. Huang  
Chair #14

Dr. Popejoy  
Chair #13



# Post Graduate Clinic Layout



## **Protocol and Policy**

Will be on your desk.

## **Block Schedule**

Will be on your desk.

## Appendix X – Materials describing student’s rights and responsibilities

### College of Dentistry

Source: UIC Resident Physician Manual, <http://www.uic.edu/com/gme/rpmtoc.htm>

This Agreement is entered into on by and between the Board of Trustees of the University of Illinois ("University") a body corporate politic under the laws of the State of Illinois on behalf of its College of Dentistry at Chicago, Illinois.

In consideration of the mutual obligations set forth below, this Agreement is entered into for the purpose of defining the relationship between the University, its College of Dentistry, and the Resident during the Resident’s participation in the College of Dentistry graduate medical education and clinical training program (“program”). As used in this Agreement, the term “Resident” shall also include any “intern” or “fellow.”

1. *Term:* The term of this Agreement shall be for a [specific contract] period... If signed agreement has not been received in the Graduate Medical Education Office of the College of Medicine 30 days from the effective date...the offer will be withdrawn.
2. *Program:* Resident is hereby appointed to [Program], [PG Level], pay level... (if different from PG Level) and shall perform those duties as set forth in Section 5 of this Agreement.
3. *Compensation:* During the term of this Agreement the Resident shall receive compensation at an annualized rate... (or current stipend for the Resident PG level, if different) payable in twelve (12) monthly installments... for a full year appointment. This compensation includes attendance at New Resident Orientation.
4. *Duties:* The Residents shall perform the following duties

to use his/her best efforts, judgment, and diligence in a professional manner in performing all duties, tasks, and responsibilities of whatever nature assigned to the Resident for the duration of the program.

to fulfill the educational clinical requirements of the dental residency training programs including mandatory attendance at New Resident Orientation.

to provide safe, effective and compassionate patient care whenever assigned or assumed.

to comply with the published principles of ethics of the American Dental Association.

to comply with the College of Dentistry and departmental rules and regulations as well as all policies and procedures of the hospital(s) in which the resident rotates.



to provide proof of possessing a valid State of Illinois dental license, permanent or temporary, obtained at the Resident's own expense. Failure to provide proof of such license within 90 days of the commencement date of this Agreement shall prohibit the Resident from providing any patient care serviced subject to any additional rights the University may have pursuant to Section 9 of this Agreement.

to notify the Associate Dean for Academic Affairs of the College of Dentistry and Program Director Office in writing immediately if a medical license is revoked or otherwise restricted or if an application of a temporary license is denied. Any such revocation or denial shall serve automatically to terminate this Agreement.

to obtain if requested by the College of Dentistry during the term of this Agreement, any medical examination, including physical, psychiatric, and/or laboratory testing at no cost to the resident.

to complete an operative report for each patient assigned to the resident no later than 24 hours following the operation; to complete a discharge summary for each patient assigned to the Resident as soon as possible but in no event later than fifteen (15) days after discharge, and return such summary to the Department of Medical Records or to whomever may be designated by the hospital in which the Resident is assigned. Failure to complete any medical record including such discharge summaries as required may result in the College assessing penalties against the Resident that may include, but are not necessarily limited to monetary penalties, reduction of privileges, suspension, termination, or the failure to receive a certificate of completion of the program.

5. *Duties of the University:* The University shall

provide an educational program in graduate medical education that meets the standards of the "Essentials of Approved Residencies" as adopted by the Accrediting Council for Graduate Medical Education, and

fulfill the educational and clinical requirements and graduate clinical training programs as specified by the Accreditation body of the American Dental Association and the College of Dentistry, including mandatory attendance at the New Resident Orientation.

6. *Benefits:* In addition to the compensation set forth above, the Resident shall be entitled to those benefits more fully described in Exhibit A attached to this Agreement.

7. *Other Activities:* The Resident shall not engage in any activity that could interfere with the Resident's obligation to the University or the effectiveness of the educational program that is being pursued. Outside employment is not permitted unless prior written approval from the respective Program Director is obtained. Permission to engage in outside employment or similar off-duty activities may be withdrawn if in the opinion of the Program Director such employment or similar activity is interfering with the Resident's assigned duties or obligations.

8. *University Property:* The University shall have the right, during reasonable hours and with appropriate notice to the Resident, to enter upon and inspect any property owned by the University and provided to the Resident for his or her use.
9. *Termination:* This Agreement may be terminated as follows:
  - a. by the University in the event the Resident fails to obtain the appropriate license from the State of Illinois within thirty (30) days of the commencement date of this Agreement or in the event the Resident fails to comply with any of the terms of this Agreement. In lieu of termination, the University may take such disciplinary action against the Resident it deems appropriate including suspension without pay from the program.
  - b. by the Resident upon the University's failure to comply with the terms of this Agreement provided the Resident furnishes thirty (30) day advance written notice to the University.
  - c. by mutual agreement of the parties as evidenced in writing.
10. *Procedural Rights:* In the event this Agreement is terminated by the University or the Resident is disciplined, the Resident shall have such procedural rights as set forth in Exhibit B attached hereto. Such rights shall not be applicable if said termination is due to Resident's failure to obtain or retain an appropriate license from the State of Illinois or if covered by paragraphs J, K, or L of exhibit B attached hereto.
11. *Nonrenewal:* The Resident acknowledges that nothing contained within this Agreement shall require the University to extend the term of this Agreement or offer the Resident a new Agreement upon the termination or expiration of this Agreement. In the event this Agreement is an extension or renewal of a prior Agreement, this Agreement is contingent upon the satisfactory completion of all prior requirements and the University receiving the necessary funding from the State legislature as may be required.

## Exhibit A – Benefits

*Effective Date:* July 1, 2001

Note: All benefits and perquisites are provided by the State of Illinois and University of Illinois consistent with University policy and applicable State and Federal law. Complete Plan Descriptions are available through the University Benefit Center.

- a. Vacation leave of 20 working days per year, accruable only within current residency program, plus University-designated holidays. Program Director retains the right to schedule vacation. There is no terminal payment for unused vacation.
- b. Sick leave of 24 calendar days per year, accruable only within the current residency program. Sick leave may be used for illness, injury, or to obtain medical or dental treatment for the resident, spouse, or child. Paid maternity or paternity leave is available as a combination of sick and vacation leave. Residents with at least twelve months of University employment can take up to a total of twelve consecutive weeks of unpaid leave for personal or family illness, or for the birth or adoption of a child. Vacation time and/or sick time (as appropriate) can be used for a portion of this leave.
- c. Leave from the program for personal reasons will be first credited as vacation time. Additional unpaid time off must be approved by the Program Director, who may request relevant documentation to substantiate the reason for the leave. Regardless of the reason for taking leave, the resident's completion date may be delayed in order to fulfill time requirements for the specific Board certification. Military leave will be granted consistent with applicable law and University policy.
- d. Reasonable time for paid leave for attendance at conferences, workshops, or other professional educational activities, scheduled with the approval of the Program Director. Reimbursement of costs for attending functions or for other educational activities is negotiable with the Program Director.
- e. Health insurance is provided to the individual resident at nominal cost. Family health insurance coverage is payable by the resident, and the charge above that paid for single coverage is reimbursed up to the amount set by the GME Operating Committee through an additional stipend paid by the University to the resident. Dental plans are also available at nominal cost for individuals and families.
- f. Eligibility for participation in the State Universities Retirement System of Illinois (SURS) is based on State and Federal law. All eligible residents must participate. Employee contributions, plus interest earned, can be withdrawn when the resident leaves the University. All SURS residents must also pay a 1.45% Medicare tax.
- g. Residents are provided with long-term disability income protection, which covers a portion of the resident's stipend for any period during which the resident cannot work because of illness or accident, following a 90 day waiting period. Participation in the

disability income plans is mandatory; optional features are available from the carrier at reasonable cost. The plan allows conversion to an individual policy upon termination from the residency training program.

- h. Life insurance benefit of one year's stipend is provided without cost to the resident.
- i. Other benefits not mentioned here, including, but not limited to, dependent care, tax deferred annuities, and tuition waiver, are provided consistent with University plans.
- j. All residents are covered for professional liability insurance through the University Risk Management and Self-Insurance program or through individual affiliated institution plans while performing duties directly related to their educational programs.
- k. All affiliated institutions provide meals and sleeping facilities for residents rotating on night and weekend call.
- l. Coats and scrub suits are issued and laundered free of charge to all residents, and remain the property of the University.
- m. Policies regarding Physician Impairment, including substance abuse, are contained in Policy #19 of the UIC COM GME Policy and Procedure Manual.
- n. As UIC employees, residents may use the Employee Assistance Services for counseling and referral services through the Human Resources Office. Residents may receive assistance for psychological, legal, financial, substance abuse or family related problems.

**College of Dentistry**  
**Exhibit B**  
**Procedural Rights to Suspension/Termination**

*Effective date:* July 1, 1991

- a. Within fourteen (14) days of written notification of his/her suspension and/or termination, a Resident may request an informal hearing before a Committee, as more fully described below. The Resident's request shall be in writing and submitted to the Department Head or such individual acting in a similar capacity depending on the particular program in which the Resident is enrolled.
- b. The written notification of suspension and/or termination shall include an explanation from the Department Head (or such individual acting in a similar capacity depending on the particular program in which the Resident is enrolled) of the reason(s) for such suspension and/or termination. The written notification shall also advise the Resident of his/her right to request an informal hearing pursuant to this Exhibit.
- c. The Committee shall consist of at least three (3) faculty members from the Resident's department. The Department Head shall not be a member of the Committee. The Committee shall elect a member from the group to preside at the hearing. Each department may have a standing committee to conduct hearings requested under this Exhibit. If there is not a standing committee, an ad hoc committee shall be appointed by the Associate Dean for Academic Affairs for each hearing requested.
- d. The Committee shall convene the hearing within ten (10) days of the Resident's written request and shall notify the Resident in writing of the date, time, and place for the hearing as soon as reasonably possible, but no fewer than 72 hours in advance of the hearing.
- e. The Resident and the Department Head and his/her designee, or Program Director shall be present at the hearing and shall each present such information or materials (oral or written) as they wish to support their case. No other representatives shall be present during the hearing. Each party shall be permitted to review all materials submitted to the Committee during the hearing.
- f. A majority vote of the Committee shall decide the issue(s) before it and the Department Head or his/her designee shall be bound by the decision.
- g. Regardless of the outcome of the hearing, the Committee will provide the Resident and Department Head with a written statement of its decision and the reason(s) for such decision within ten (10) days from the date of the conclusion of the hearing. If written materials are submitted to the Committee, such materials shall be appended to the Committee's report.

## Appendix Y

Class	Resident	Advisor	Title
2014	Jillian Gray	Alranyes	Pediatric oncologists' comfort with recognition of oral health effects of cancer therapy.
2014	Patrick Whittington	Fadavi	Media Usage and Sugar Intake in Children.
2014	Ashley Popejoy	Kaste	A Comparison of Rural and Urban School-based Sealant Programs in Illinois.
2014	Amar Singh	Fadavi	An Investigation of Caries Rates of Children with Down Syndrome.
2014	Zameer Khan	Alranyes	Dissemination of HPV Vaccine Among Pediatric Dentists.
2014	Dustin Davis	Fadavi	The use of stabilization devices by Pediatric and General Dentists.
2013	Amanda Day	Fadavi	Pediatric and General Dentists' Behaviors and Attitudes Towards Adolescent Oral Health Care Issues
2013	Agata LeFere	Alranyes	Pediatric Dentists in Providing Dental Care to Pregnant Adolescents
2013	Neena Bhole	Vergotine	Child Abuse and Neglect: Pediatric Dentists, General Dentists and Oral Surgeons Attitudes
2013	Justin Welke	Koerber	Spanish Labels on Cereal and Spanish-Speaking Parents' Cereal Choices
2013	Denise Maniakouras	Alranyes	Perceived Barriers and Facilitators to Dental Treatment among Caregivers of Children with Cancer
2013	Elizabeth Pham	Vergotine	Pediatric Dentists' Recommendations for Mouth guards for Patients with Cerebral Palsy
2012	Daniel Claman	Koerber	The Use of a Menu as a Brief Intervention to Improve Children's Oral Health
2011	Lynse Briney	Wu	Impact of Childhood Obesity on Oral Health
2012	Richard Facko	Fadavi	Television watching and dental caries experience in children.
2012	Erin Donohue	Koerber	Parental knowledge, norms and self-efficacy related to Quantity And Frequency of sugared beverages children consume
2012	Julie Rudgers	Briggs	Readability of Pediatric Dentistry patient education materials
2012	Nira Patel	Fadavi	Patient: A Comparison between General Dentists and Pediatric Dentists
2012	Mirabel Reyes de Loba	Kaste	Drinking Water Sources Among Latino vs. Non-Latino Children and Their Parents
2011	Jane Caballero	Koerber	Attitudes of Pediatric Dentists toward Parental Presence in the Operatory
2011	Rosa Ortega	Fadavi	Parent Experiences with Adolescent Oral Health and Dentists by Community
2011	Mary Pham	Punwani	Differences in Usage of Behavior Guidance Techniques for Pediatric Dental Patients
2011	Sabina Gupta	Koerber	The Well Child Visit: Oral Health Assessment and Guidance
2011	Ryan Francois	Bedran-Russo	A New Approach to the Treatment of Childhood Caries: Matrix Metalloproteinase' s Inhibition by Natural Protease Inhibitors











