Pediatric Dentistry

Self Study
Appendix A – W

Accreditation
Site Visit: November 12-14, 2013
Evaluation of Advanced Specialty Education  
Pediatric Dentistry

<table>
<thead>
<tr>
<th>Sponsoring Organization:</th>
<th>University of Illinois at Chicago</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address:</td>
<td>801 S Paulina Street</td>
</tr>
<tr>
<td>City, State &amp; Zip Code:</td>
<td>Chicago, IL 60612</td>
</tr>
<tr>
<td>Chief Executive Officer:</td>
<td>Paula Allen-Meares</td>
</tr>
<tr>
<td>Telephone Number:</td>
<td>(312) 413-3350</td>
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<td>(312) 413-3393</td>
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<td>E-Mail Address:</td>
<td><a href="mailto:pameares@uic.edu">pameares@uic.edu</a></td>
</tr>
</tbody>
</table>

Signature: [Signature]
Date: 9/5/13

Dental School Dean: Bruce S. Graham
Telephone Number: (312) 996-1040
Fax Number: (312) 996-1022
E-Mail Address: bgraham@uic.edu

Signature: [Signature]
Date: 9/9/13

Program Director: Marcio da Fonseca
Telephone Number: (312) 996-1993
Fax Number: (312) 996-1981
E-Mail Address: marcio@uic.edu

Signature: [Signature]
Date: 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.

A Brilliant Future
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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

A Brilliant Future - v -
12. Pre-doctoral Dental Student teaching – evaluations by faculty, including Dr. Salzmann
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:

<table>
<thead>
<tr>
<th></th>
<th>Total Number</th>
<th>Board Certified</th>
<th>Educationally Qualified*</th>
<th>Other**</th>
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<tbody>
<tr>
<td>Full-time</td>
<td>6</td>
<td>4</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Half-time</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than half-time</td>
<td>12</td>
<td>8</td>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>

* 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 where 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)  

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)

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.
Does the program document its effectiveness using a formal and ongoing outcomes assessment process to include measures of advanced education student/resident achievement? (1)  

YES

(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 be 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 website, 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
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)

YES

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

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)

NA

If an educational institution is the sponsor, is the educational institution accredited by an agency recognized by the United States Department of Education? (1)

YES

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)  

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

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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)

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

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)  

YES

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

Is the program director appointed to the sponsoring institution and have 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)  

YES

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);

Is documentation of all program activities ensured by the program director and available for review? (2)  

YES

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
Curriculum development and implementation? (2-2.2) | YES
---|---
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

Ongoing evaluation of program goals, objectives and content and outcomes assessment? (2-2.3) | YES
---|---
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

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) | YES
---|---
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
### Evaluation of student/resident performance? (2-2.5)

<table>
<thead>
<tr>
<th>YES</th>
</tr>
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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.

### Participation with institutional leadership in planning for and operation of facilities used in the educational program? (2-2.6)

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<th>YES</th>
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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
Purchase requisitions

### Evaluation of student's/resident's training and supervision in affiliated institutions? (2-2.7)

<table>
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<tr>
<th>NA</th>
</tr>
</thead>
</table>

Not Applicable

### 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)

<table>
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<tr>
<th>YES</th>
</tr>
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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
Responsibility for overall continuity and quality of patient care? (2-2.9)  YES
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

Oversight responsibility for student/resident research? (2-2.10)  YES
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

Responsibility for determining the roles and responsibilities of associate program director(s) and their regular evaluation? (2-2.11)  YES
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):

**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)**

YES

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

**Are foreign trained faculty members comparably qualified? (2-3.2)**

YES

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)

**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)**

YES

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

**Are clinical faculty immediately available to provide direct supervision to students/residents for all clinical sessions? (2-3.4)**

YES

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

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)

YES

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 its 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.

Are equipment and supplies for use in managing medical emergencies readily accessible and functional? (3)

YES

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**

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 institutional 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

**Are the above policies provided to all students/residents, faculty and appropriate support staff and continuously monitored for compliance? (3)**

YES

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
Are policies on bloodborne and infectious diseases made available to applicants for admission and patients? (3)  

YES

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

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)  

YES

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/Diptheria, 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):

<table>
<thead>
<tr>
<th>Space designated specifically for the advanced specialty education program in pediatric dentistry? (3-3.1)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)</td>
<td></td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

**On Site**
Floor plans of the Pediatric Dentistry facilities

<table>
<thead>
<tr>
<th>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)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)</td>
<td></td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

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

<table>
<thead>
<tr>
<th>Adequate radiographic and laboratory facilities in close proximity to the patient treatment area? (3-3.3)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>

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
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

### Accessibility for patients with special health care needs? (3-3.4) | YES
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.

### Recovery area facilities? (3-3.5) | YES
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
Reception and patient education areas? (3-3.6)  YES
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

A suite equipped for carrying out comprehensive oral health procedures under general anesthesia and/or sedation? (3-3.7)  YES
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

Inpatient facilities to permit management of general and oral health problems for patients with special health care needs? (3-3.8)  YES
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
A sufficient number of operatories to accommodate the number of students/residents enrolled? (3-3.9)  

| YES |

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):  

| Adequate administrative and clerical personnel? (3-4.1) | YES |

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

| Adequate allied dental personnel assigned to the program to ensure clinical and laboratory technical support who are suitably trained and credentialed? (3-4.2) | YES |

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
Research Facilities: Are facilities available for students/residents to conduct basic and/or applied (clinical) research? (3-5)

YES

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

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)

YES

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 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 payer 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

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)  

YES

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

Does the advanced specialty education program include instruction or learning experiences in evidence-based practice?  

YES

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

Is the level of specialty area instruction in the certificate and degree granting (M.S.) programs comparable? (4)  

NA

If the institution/program enrolls part-time students/residents, does the institution have guidelines regarding enrollment of part-time students/residents? (4)  

NA
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)  

| NA |

Does the director of an accredited program who enrolls students/residents on a part-time basis ensure that:

<p>| |</p>
<table>
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</thead>
<tbody>
<tr>
<td>a) The educational experiences, including the clinical experiences and responsibilities, are the same as required by full-time students/residents?</td>
</tr>
<tr>
<td>b) There is an equivalent number of months spent in the program? (4)</td>
</tr>
</tbody>
</table>

Goals of Advanced Education in Pediatric Dentistry

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)  

| YES |

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

Is all curricula formulated in accordance with current American Academy of Pediatric Dentistry Guidelines, if applicable? (4-1)  

| YES |

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

Does the duration of the advanced specialty program in pediatric dentistry include a minimum of 24 months of full-time formal training? (4-2)  YES

Documentary Evidence:
Appendix O: Student/Resident Schedules

Curriculum

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)  YES

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

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

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

Are the biomedical sciences included to support the clinical, didactic and research portions of the curriculum? (4-4)  YES

Residents receive seminar and didactic instruction for specific biomedical courses. Some of these courses are done online and others involve seminar presentations. Courses cover all aspects of biomedical sciences including all listed in 4-4.

Documentary Evidence:
Appendix T: Exhibit 11a – 1a– g

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

<table>
<thead>
<tr>
<th>a) BIOSTATISTICS and CLINICAL EPIDEMIOLOGY: Including probability theory, descriptive statistics, hypothesis testing, inferential statistics, principles of clinical epidemiology and research design? (4-4 a)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentary Evidence:</td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 1a</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b) PHARMACOLOGY: Including pharmacokinetics, interaction and oral manifestations of chemotherapeutic regimens, pain and anxiety control, and drug dependency? (4-4 b)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentary Evidence:</td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 1b</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>c) MICROBIOLOGY: Including virology, immunology, and cariology? (4-4 c)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentary Evidence:</td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 1c</td>
</tr>
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</table>

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<thead>
<tr>
<th>d) EMBRYOLOGY: Including principles of embryology with a focus on the developing head and neck, and craniofacial anomalies? (4-4 d)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentary Evidence:</td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 1d</td>
</tr>
</tbody>
</table>
### 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)

**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 1e

### 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)

**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 1f

### 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)

**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):**

**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):**

**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.1a

**b) Child behavior guidance in the dental setting and the objectives of various guidance methods (4-5 b):**

**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.1b
<table>
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<tr>
<th></th>
<th>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);</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>c)</td>
<td>YES</td>
</tr>
<tr>
<td></td>
<td>d)</td>
<td>Principles of informed consent relative to behavior guidance and treatment options? (4-5 d);</td>
</tr>
<tr>
<td></td>
<td>e)</td>
<td>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);</td>
</tr>
<tr>
<td></td>
<td>f)</td>
<td>Recognition, treatment and management of pharmacologic-related emergencies (4-5 f)?</td>
</tr>
<tr>
<td></td>
<td>a1.</td>
<td>Do experiences include infants, children and adolescents including patients with special health care needs, using: Non-pharmacological techniques? (4-6 a1)</td>
</tr>
<tr>
<td></td>
<td>a2.</td>
<td>Do experiences include infants, children and adolescents including patients with special health care needs, using: Sedation? (4-6 a2)</td>
</tr>
</tbody>
</table>

**Clinical Experiences:** Do clinical experiences in behavior guidance enable students/residents to achieve competency in patient management using behavior guidance? (4-6)
a3. Do experiences include infants, children and adolescents including patients with special health care needs, using: Inhalation analgesia? (4-6 a3)  

YES

Documentary Evidence:
Appendix T: Exhibit 11b – 2.1c

On Site
Resident Clinical Log

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)  

YES

Documentary Evidence:
On Site
Resident Clinical Log

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 may be administered by any route. (4-6 b2)  

YES

Documentary Evidence:
On Site
Resident Clinical Log
b2a. Of the 50 patient encounters, does each student/resident act as operator in a minimum of 25 sedation cases? (4-6 b2a)

YES

Documentary Evidence:
On Site
Resident Clinical Log

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)

YES

Documentary Evidence:
On Site
Resident Clinical Log

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)

YES

Documentary Evidence:
On Site
Resident Clinical Log
Sedation Forms
Sedation Monitoring Forms
Consent Forms

Growth & Development

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)

YES

Does this include but is not limited to an understanding of:

a. Theories of normative dentofacial growth mechanisms? (4-7 a);

YES

Documentary Evidence:
Appendix Q: Course Outlines
Appendix T: Exhibit 11a – 2.2a
b. Principles of diagnosis and treatment planning to identify normal and abnormal dentofacial growth and development? (4-7 b);

**YES**

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

| c. Differential classification of skeletal and dental malocclusion in children and adolescents? (4-7 c); |
| **YES** |

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

| 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); |
| **YES** |

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

| e. Basic biomechanical principles and the biology of tooth movement? Growth modification and dental compensation for skeletal problems including limitations? (4-7 e) |
| **YES** |

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

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

**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):

| a. Diagnosis of dental, skeletal, and functional abnormalities in the primary, mixed, and young permanent dentition stages of the developing occlusion? (4-8 a) |
| **YES** |

**Documentary Evidence:**

On Site
Resident Clinical Log
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)

YES

Do these transitional malocclusion conditions include, the recognition, diagnosis, appropriate referral and/or focused management of (4-8 b):

1. Space maintenance and arch perimeter control associated with the early loss of primary and young permanent teeth? (4-8 b1);

YES

2. Transverse arch dimensional problems involving simple posterior crossbites? (4-8 b2);

YES

3. Anterior crossbite discrepancies associated with localized dentoalveolar crossbite displacement and functional anterior shifts? (e.g. pseudo-Class III) (4-8 b3);

YES

4. Anterior spacing with or without dental protrusion? (4-8 b4);

YES

5. Deleterious oral habits? (4-8 b5);

YES

STANDARD 4

A Proud Past
6. Preservation of leeway space for the resolution of moderate levels of crowding? (4-8 b6);  
**YES**

**Documentary Evidence:**

On Site  
Resident Clinical Log

7. Ectopic eruption, ankylosis and tooth impaction problems? (4-8 b7)  
**YES**

**Documentary Evidence:**

On Site  
Resident Clinical Log

8. The effects of supernumerary (e.g. mesiodens) and/or missing teeth? (4-8 b8)  
**YES**

**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):  

<table>
<thead>
<tr>
<th>Care of orofacial injuries in infants, children and adolescents as follows:</th>
</tr>
</thead>
<tbody>
<tr>
<td>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);</td>
</tr>
<tr>
<td><strong>YES</strong></td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

<table>
<thead>
<tr>
<th>Appendix Q:</th>
<th>Course Outlines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 2.3a</td>
</tr>
</tbody>
</table>

| b. Evaluation, diagnosis, and management of the pulpal, periodontal and associated soft and hard tissues following traumatic injury? (4-9 b); |
| **YES** |

**Documentary Evidence:**

<table>
<thead>
<tr>
<th>Appendix Q:</th>
<th>Course Outlines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 2.3b</td>
</tr>
</tbody>
</table>

| c. Recognition of injuries including fractures of the maxilla and mandible and referral for treatment by the appropriate specialist? (4-9 c) |
| **YES** |

**Documentary Evidence:**

<table>
<thead>
<tr>
<th>Appendix Q:</th>
<th>Course Outlines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 2.3c</td>
</tr>
</tbody>
</table>
d. Recognition, management and reporting child abuse and neglect and non-accidental trauma? (4-9 d)

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

<table>
<thead>
<tr>
<th>Clinical Experiences: Do clinical experiences in oral facial injury and emergency care enable students/residents to achieve competency in (4-10):</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)</td>
</tr>
</tbody>
</table>

Documentary Evidence:
- On Site
  - Resident Clinical Log

<table>
<thead>
<tr>
<th>Oral Diagnosis, Oral Pathology, and Oral Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Didactic Instruction: Is didactic instruction in oral diagnosis, oral pathology and oral medicine provided at the in-depth level and include (4-11):</td>
</tr>
<tr>
<td>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);</td>
</tr>
</tbody>
</table>

Documentary Evidence:
- Appendix T: Exhibit 11a – 2.4a

<table>
<thead>
<tr>
<th>Oral Diagnosis, Oral Pathology, and Oral Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Didactic Instruction: Is didactic instruction in oral diagnosis, oral pathology and oral medicine provided at the in-depth level and include (4-11):</td>
</tr>
<tr>
<td>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);</td>
</tr>
</tbody>
</table>

Documentary Evidence:
- Appendix T: Exhibit 11a – 2.4b

<table>
<thead>
<tr>
<th>Oral Diagnosis, Oral Pathology, and Oral Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Didactic Instruction: Is didactic instruction in oral diagnosis, oral pathology and oral medicine provided at the in-depth level and include (4-11):</td>
</tr>
<tr>
<td>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);</td>
</tr>
</tbody>
</table>

Documentary Evidence:
- Appendix T: Exhibit 11a – 2.4b
<table>
<thead>
<tr>
<th>c. The diagnosis of oral and perioral lesions and anomalies in infants, children, and adolescents? (4-11 c)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 2.4c</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>d. Gingival, periodontal and other mucosal disorders in infants, children and adolescents? (4-11 d); and</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 2.4d</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>e. Treatment of common oral diseases in infants, children and adolescents? (4-11 e)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11a – 2.4e</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>f. Ordering and performing uncomplicated biopsies and adjunctive diagnostic tests including exfoliative cytology, microbial cultures and other commercially available tests? (4-11 f)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11b – 2.4f</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>g. Referring persistent lesions and/or extensive surgical management cases to appropriate specialists? (4-11 g)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11b – 2.4g</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>a. Pediatric oral and maxillofacial radiology and appropriate procedures of radiation hygiene (4-12 a)?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11b – 2.4a</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b. Treatment of common oral diseases in infants, children and adolescents? (4-12 b)</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q:</td>
<td>Course Outlines</td>
</tr>
<tr>
<td>Appendix T:</td>
<td>Exhibit 11b – 2.4e</td>
</tr>
</tbody>
</table>
### Prevention and Health Promotion

<table>
<thead>
<tr>
<th>Didactic Instruction: Is didactic instruction in prevention provided at the in-depth level and include (4-13):</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>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);</td>
<td>YES</td>
</tr>
<tr>
<td><strong>Documentary Evidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Appendix Q: Course Outlines</td>
<td></td>
</tr>
<tr>
<td>Appendix T: Exhibit 11a – 2.5a</td>
<td></td>
</tr>
</tbody>
</table>

| b. The effects of proper diet nutrition, fluoride therapy and sealants in the prevention of oral disease? (4-13 b); | YES |
| **Documentary Evidence:** |  |
| Appendix Q: Course Outlines |  |
| Appendix T: Exhibit 11a – 2.5b |  |

| c. Perinatal oral health and infant oral health supervision? (4-13 c); | YES |
| **Documentary Evidence:** |  |
| Appendix Q: Course Outlines |  |
| Appendix T: Exhibit 11a – 2.5c |  |

| d. Scientific principles, techniques and treatment planning for the prevention of oral diseases, including diet management, chemotherapeutics, and other approaches? (4-13 d); | YES |
| **Documentary Evidence:** |  |
| Appendix Q: Course Outlines |  |
| Appendix T: Exhibit 11a – 2.5d |  |

| e. Dental health education programs, materials and personnel to assist in the delivery of preventive care? (4-13 e) | YES |
| **Documentary Evidence:** |  |
| Appendix Q: Course Outlines |  |
| Appendix T: Exhibit 11a – 2.5e |  |

| f. Diagnosis of periodontal diseases of childhood and adolescence, treatment and/or refer cases of periodontal diseases to the appropriate specialist? (4-13 f) | YES |
| **Documentary Evidence:** |  |
| Appendix Q: Course Outlines |  |
| Appendix T: Exhibit 11a – 2.5f |  |
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)  

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

**Comprehensive Dental Care**

**Didactic Instruction:** Is didactic instruction provided at the in-depth level and include (4-15):

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>
| a. | Restorative and prosthetic techniques and dental materials for the primary, mixed and permanent dentitions? (4-15 a);  
**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.6a |
| b. | Management of comprehensive restorative care for pediatric patients? (4-15 b);  
**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.6b |
| c. | Treatment planning for infants, children, adolescents and those with special health care needs? (4-15 c)  
**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.6c |
| d. | Characteristics of the dental home? (4-15 d)  
**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):

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>Diagnosis and treatment planning for infants, children, adolescents and those with special health care needs? (4-16 a)</td>
</tr>
<tr>
<td>Documentary Evidence:</td>
<td>Appendix T: Exhibit 11b – 2.6a</td>
</tr>
<tr>
<td>b.</td>
<td>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)</td>
</tr>
<tr>
<td>Documentary Evidence:</td>
<td>Appendix T: Exhibit 11b – 2.6b</td>
</tr>
</tbody>
</table>

Management of a Contemporary Dental Practice

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>The design, implementation and management of a contemporary practice of pediatric dentistry, emphasizing business skills for proper and efficient practice? (4-17 a);</td>
</tr>
<tr>
<td>Documentary Evidence:</td>
<td>Appendix Q: Course Outlines</td>
</tr>
<tr>
<td></td>
<td>Appendix T: Exhibit 11a – 2.7a</td>
</tr>
<tr>
<td>b.</td>
<td>Jurisprudence and risk management specific to the practice of Pediatric Dentistry? (4-17 b);</td>
</tr>
<tr>
<td>Documentary Evidence:</td>
<td>Appendix Q: Course Outlines</td>
</tr>
<tr>
<td></td>
<td>Appendix T: Exhibit 11a – 2.7b</td>
</tr>
<tr>
<td>c.</td>
<td>Use of computers in didactic, clinical and research endeavors, as well as in practice management? (4-17 c);</td>
</tr>
<tr>
<td>Documentary Evidence:</td>
<td>Appendix Q: Course Outlines</td>
</tr>
<tr>
<td></td>
<td>Appendix T: Exhibit 11a – 2.7c</td>
</tr>
<tr>
<td>d.</td>
<td>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);</td>
</tr>
<tr>
<td>Documentary Evidence:</td>
<td>Appendix Q: Course Outlines</td>
</tr>
<tr>
<td></td>
<td>Appendix T: Exhibit 11a – 2.7d</td>
</tr>
</tbody>
</table>
e. Working cooperatively with consultants and clinicians in other dental specialties and health fields? (4-17 e);  

**Documentary Evidence:**  
Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.7e

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

| a. Formulation of treatment plans for patients with special health care needs? (4-18 a); | YES |
| **Documentary Evidence:**  
Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.8a |

| b. Medical conditions and the alternatives in the delivery of dental care that those conditions might require? (4-18 b); | YES |
| **Documentary Evidence:**  
Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.8b |

| c. Management of the oral health of patients with special health care needs, i.e.:  
1. Medically compromised? (4-18 c1); | YES |
| **Documentary Evidence:**  
Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.8c |

| 2. Physically compromised or disabled; and diagnosed to have developmental disabilities, psychiatric disorders or psychological disorders? (4-18 c2); | YES |
| **Documentary Evidence:**  
Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.8d |

| 3. Transition to adult practices? (4-18 c3) | YES |
| **Documentary Evidence:**  
Appendix Q: Course Outlines  
Appendix T: Exhibit 11a – 2.8e |
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)  

YES

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

Hospital Dentistry

Didactic Instruction: Is didactic instruction provided at the understanding level and include (4-20):

a. hospital policies and procedures? (4-20 a);  

YES

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

b. medical/dental staff organization? (4-20 b);

YES

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

c. medical/dental staff member responsibilities? (4-20 c)

YES

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

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)  

YES

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

On Site
Resident Clinic Log
Does the program provide the following clinical experiences: (4-21)

<table>
<thead>
<tr>
<th>a. Dental treatment in the Operating Room Setting (4-21 a):</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Each student/resident participates in the treatment of pediatric patients under general anesthesia in the operating room? (4-21 a1);</td>
</tr>
<tr>
<td>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)</td>
</tr>
</tbody>
</table>

Documentary Evidence:

On Site
OR Records and Dictation Files

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

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

| 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) | YES |

Documentary Evidence:

Appendix R: Exhibit 9.4
On Site
Hospital Records
Rotations to in-patient, ER
### Anesthesiology Rotation (4-21 c):

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Students/Residents</strong></td>
<td><strong>Completion under the supervision of an anesthesiologist</strong></td>
</tr>
<tr>
<td>YES</td>
<td></td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

Appendix R: Exhibit 9.1

**On Site Rotation Schedules**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2. This rotation is at least four weeks in length and is the principal activity of the student/resident during this scheduled time?</strong></td>
<td><strong>YES</strong></td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

On Site Rotation Schedules

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>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?</strong></td>
<td><strong>YES</strong></td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

Appendix R: Exhibit 9.1

**On Site Rotation Schedules**

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td><strong>4. The rotation provides and documents experiences in:</strong></td>
<td><strong>YES</strong></td>
</tr>
</tbody>
</table>

(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? **YES**

**Documentary Evidence:**

Appendix R: Exhibit 9.1 and 9.3

**On Site Rotation Schedules**
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)  YES

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):

<table>
<thead>
<tr>
<th>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); YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
</tr>
<tr>
<td>Appendix Q: Course Outlines</td>
</tr>
<tr>
<td>Appendix T: Exhibit 11a – 2.10a</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b. Management of pulpal and periradicular tissues in the primary and developing permanent dentition? (4-22 b) YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
</tr>
<tr>
<td>Appendix Q: Course Outlines</td>
</tr>
<tr>
<td>Appendix T: Exhibit 11a – 2.10b</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>a. Diagnosis of pulpal disease in primary and permanent teeth? (4-23 a); YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
</tr>
<tr>
<td>On Site Resident Clinic Log</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b. Treatment of pulpal disease in primary teeth? (4-23 b); YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentary Evidence:</strong></td>
</tr>
<tr>
<td>On Site Resident Clinic Log</td>
</tr>
</tbody>
</table>
### Pediatric Dentistry

#### Treatment of pulpal disease in immature permanent teeth (4-23 c)

**YES**

**Documentary Evidence:**

On Site
Resident Clinic Log

#### Management of pulpal disease in mature permanent teeth including emergency care, stabilization and referral to specialists (4-23 d)

**YES**

**Documentary Evidence:**

On Site
Resident Clinic Log

---

### Pediatric Medicine

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>a.</td>
<td>Normal speech and language development and the recognition of speech and 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)</td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

Appendix T: Exhibit 11a – 2.11a

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>b.</td>
<td>Fundamentals of pediatric medicine including those related to pediatric patients with special health care needs such as: 1. Developmental disabilities? (4-24 b1)</td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>2. Genetic/metabolic disorders? (4-24 b2)</td>
</tr>
</tbody>
</table>

**Documentary Evidence:**

Appendix Q: Course Outlines
Appendix T: Exhibit 11a – 2.11b
### 3. Infectious disease? (4-24 b3);

**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.11b

### 4. Sensory impairments? (4-24 b4);

**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.11b

### 5. Chronic disease? (4-24 b5)

**Documentary Evidence:**
- Appendix Q: Course Outlines
- Appendix T: Exhibit 11a – 2.11b

**Clinical Experiences:** Do clinical experiences expose students/residents to pediatric medicine (4-25):

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)</td>
<td>YES</td>
</tr>
<tr>
<td>1. This rotation <em>may</em> occur in a variety of settings i.e., Emergency Department, subspecialty clinics, multi-disciplinary team clinics and general pediatrics.</td>
<td>YES</td>
</tr>
<tr>
<td>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).</td>
<td>YES</td>
</tr>
</tbody>
</table>

**Documentary Evidence:**
- Appendix R: Exhibit 9.2
Advocacy

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

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);

   YES

   Documentary Evidence:
   Appendix Q: Course Outlines
   Appendix T: Exhibit 11a – 2.12a

b. Federally and state funded programs like Medicaid and SCHIP that provide dental care to poor populations? (4-26 b);

   YES

   Documentary Evidence:
   Appendix Q: Course Outlines
   Appendix T: Exhibit 11a – 2.12b

c. Principles of education? (4-26 c)

   YES

   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)

a. Communicating, teaching, and collaborating with groups and individuals on children’s oral health issues? (4-27 a);

   Residents interact with various groups during activities and events, including:
   - Give Kids a Smile Day
   - Special Olympics
   - El Día del Niño health fair

   YES

   Documentary Evidence:
   On Site Schedules

b. Advocating and advising public health policy legislation and regulations to protect and promote the oral health of children? (4-27 b);

   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.

   YES

   Documentary Evidence:
   On Site Schedules

STANDARD 4

A Proud Past

- 52 -
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).

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

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)

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

<table>
<thead>
<tr>
<th>Are dentists with the following qualifications eligible to enter the advanced specialty education program accredited by the Commission on Dental Accreditation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Graduates from accredited U.S. and Canadian predoctoral dental education programs?, or</td>
</tr>
<tr>
<td>b) Graduates from predoctoral dental education programs in international dental schools that provide equivalent educational background and standing as determined by the program?</td>
</tr>
</tbody>
</table>

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.

Are specific written criteria, policies and procedures followed when admitting students/residents? (5)  YES

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
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)  NA

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)  NA

**Evaluation**

Does a system of ongoing evaluation and advancement ensure that, through the director and faculty, each program:

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?  YES

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) Provides to students/residents an assessment of their performance, at least semiannually?  YES

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.

c) Advances students/residents to positions of higher responsibility only on the basis of an evaluation of their readiness for advancement?  YES

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.
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)

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**

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)

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

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) YES

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

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) YES

Documentary Evidence:
Appendix X: Written Materials Given to Residents
On Site
Orientation Materials

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) YES

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

Do advanced specialty education students/residents engage in scholarly activity?(6) YES

Does each advanced specialty education student/resident:

<table>
<thead>
<tr>
<th>a) Participate in and complete a research project?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>

Documentary Evidence:

On Site
Residents’ Theses and Certificate Project Reports

<table>
<thead>
<tr>
<th>b) Uses data collection and analysis?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>

Documentary Evidence:

On Site
Residents’ Theses and Certificate Project Reports

<table>
<thead>
<tr>
<th>c) Uses elements of scientific method?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>

Documentary Evidence:

On Site
Residents’ Theses and Certificate Project Reports
d) Reports results in a scientific forum? (6-1)

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 (UIHSS) 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.

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**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 full-time 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.

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>No. of Students in Program</th>
<th>No. &amp; % of Students in Practice</th>
<th>No. &amp; % of Students in Teaching</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>2008</td>
<td>6</td>
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</tr>
<tr>
<td>2009</td>
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</tr>
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<td>100</td>
</tr>
<tr>
<td>2011</td>
<td>6</td>
<td>6</td>
<td>100</td>
</tr>
<tr>
<td>2012</td>
<td>6</td>
<td>6</td>
<td>100</td>
</tr>
<tr>
<td>5 Years</td>
<td>30</td>
<td>29</td>
<td>100</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>No. of Students in Program</th>
<th>Illinois Specialty Board Completed</th>
<th>ABPD Completed</th>
<th>Board Eligible and Expected to Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>N</td>
<td>%</td>
<td>Part I</td>
</tr>
<tr>
<td>2008</td>
<td>6</td>
<td>1/1</td>
<td>100</td>
<td>3</td>
</tr>
<tr>
<td>2009</td>
<td>6</td>
<td>1/1</td>
<td>100</td>
<td>5</td>
</tr>
<tr>
<td>2010</td>
<td>6</td>
<td>2/2</td>
<td>100</td>
<td>5</td>
</tr>
<tr>
<td>2011</td>
<td>6</td>
<td>1/1</td>
<td>100</td>
<td>5</td>
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<td>2012</td>
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<td>2/2</td>
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<tr>
<td>5 Years</td>
<td>6</td>
<td>2/2</td>
<td>100</td>
<td>6</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Overall Evaluation of Program</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Exit Interview</td>
<td>Five Year Evaluation</td>
<td></td>
</tr>
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<td></td>
<td>Good to Excellent</td>
<td>Good to Excellent</td>
<td></td>
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<tr>
<td>2008</td>
<td>100</td>
<td>100</td>
<td></td>
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<td>100</td>
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<td>100</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>5 Years</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

Assessment: The objective has been met  
Recommendation: None  
Suggestions: None
**Objective 1.f:** Students will demonstrate proficiency during the training program.

Outcome/Assessment Measures: Completed cases and assignments

Source: Review of students’ clinical accomplishments

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Satisfactory Completion of Cases based on Chart Review and QA Data*</th>
<th>Assignments Completed**</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>2009</td>
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<td>2011</td>
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<td>100</td>
</tr>
<tr>
<td>2012</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>5 Years</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Year</th>
<th>Applications N=</th>
<th>Candidates Matriculated</th>
<th>Institutions</th>
<th>Class Rank</th>
<th>Average GPA</th>
<th>Average Board Scores</th>
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<tbody>
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<td>2006-08</td>
<td></td>
<td>Delaughter, Latoya</td>
<td>Meharry Medical College</td>
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<td></td>
<td></td>
<td>Hylton, Joseph</td>
<td>Baltimore College</td>
<td>25/103</td>
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<td></td>
<td></td>
<td>Jackson, Brandi</td>
<td>Univ of North Carolina</td>
<td>NR</td>
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<tr>
<td></td>
<td></td>
<td>Koh, Joyce</td>
<td>Univ of Michigan</td>
<td>23/106</td>
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<td></td>
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<td>Kimathi, Travis</td>
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<td>Yun, Sabina</td>
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<td>28/54</td>
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<td>2007-09</td>
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<td>McCarthy, Jamie</td>
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<td>Testa, Rebecca</td>
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<td>U of Pennsylvania</td>
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<td>3.48</td>
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<td>23/53</td>
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<td>Dhaliwal Manjote</td>
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<td></td>
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<td>Vakil, Shamik</td>
<td>U of North Carolina</td>
<td>NR</td>
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<td>2009-11</td>
<td></td>
<td>Briney, Lyne</td>
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<td>4/68</td>
<td>3.52</td>
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<td>Caballero, Jane</td>
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<td></td>
<td></td>
<td>Francois, Ryan</td>
<td>U of the Pacific</td>
<td>27-137</td>
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<tr>
<td></td>
<td></td>
<td>Gupta, Sabina</td>
<td>Medical College of Georgia</td>
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<td></td>
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<td>Ortega, Rosa</td>
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<tr>
<td></td>
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<td>Pham, Mary</td>
<td>USC</td>
<td>NR</td>
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<tr>
<td>2010-12</td>
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<td>Claman, Daniel</td>
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<td>Facko, Richard</td>
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<td>Patel, Nira</td>
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<td>Rudgers Croft, Julie</td>
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<tr>
<td>Year</td>
<td>Name 1</td>
<td>Name 2</td>
<td>Name 3</td>
<td>Name 4</td>
<td>Name 5</td>
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<tr>
<td>2012-14</td>
<td>Davis, Dustin</td>
<td>Gray, Jillian</td>
<td>Khan, Zameer</td>
<td>Popejoy, Ashley</td>
<td>Singh, Amarjot</td>
<td>Whittington, Patrick</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of Matriculated Candidates</th>
<th>No. of Underrepresented</th>
<th>% of Underrepresented Minorities</th>
</tr>
</thead>
<tbody>
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<td>2006-08</td>
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<td>2008-10</td>
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<td>2009-11</td>
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<td>2</td>
<td>33%</td>
</tr>
<tr>
<td>2010-12</td>
<td>6</td>
<td>1</td>
<td>16%</td>
</tr>
<tr>
<td>2011-13</td>
<td>6</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>2012-14</td>
<td>6</td>
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<tr>
<td>Average</td>
<td>7</td>
<td></td>
<td>16%</td>
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</table>

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

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of Students</th>
<th>Scholarly Presentation within COD and at Professional/Scientific Meetings</th>
<th>Acceptance of Certificate/MS Thesis</th>
<th>Publication of Abstract/Papers in Scientific &amp; Professional Journals</th>
<th>Membership in AAPD</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
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<td>2009</td>
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<td>2010</td>
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<tr>
<td>2012</td>
<td>6</td>
<td>100%</td>
<td>6</td>
<td>100%</td>
<td>6</td>
</tr>
</tbody>
</table>

Assessment: The objectives have been met
Recommendation: None
Suggestions: None
### Appendix D

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

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>No. of Students in Program</th>
<th>Illinois Specialty Board Completed</th>
<th>ABPD Completed</th>
<th>Board Eligible and Expected to Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>N</td>
<td>%</td>
<td>Part I</td>
</tr>
<tr>
<td>2008</td>
<td>6</td>
<td>1/1</td>
<td>100</td>
<td>3</td>
</tr>
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<td>2009</td>
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<td>2010</td>
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<td>2011</td>
<td>6</td>
<td>1/1</td>
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<td>2012</td>
<td>6</td>
<td>2/2</td>
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<tr>
<td>5 Years</td>
<td>30</td>
<td>7/7</td>
<td>100</td>
<td>18</td>
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</table>
Appendix G

**Exhibit 2**

**PROGRAM DIRECTOR**

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

<table>
<thead>
<tr>
<th>Name of Program</th>
<th>Director’s First Initial and Last Name</th>
<th>Board Certified or previously served as Program Director and Year Appointed</th>
<th>Year Appointed to Position</th>
<th>Number of Hrs/wk at Sponsoring Institution – Breakdown time into following categories:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post-doctoral Residency Program in Pediatric Dentistry</td>
<td>I. Punwani M da Fonseca</td>
<td>Board Certified</td>
<td>2007-2013</td>
<td>• administration: 30%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• teaching: 40%</td>
</tr>
<tr>
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<td></td>
<td></td>
<td>• research: 20%</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>• other: 10%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>32 Hours per week</td>
<td>32 Hours per week</td>
</tr>
</tbody>
</table>

**APPENDIX: G, Exhibit 2**
## Appendix H

### Exhibit 3.1

### TEACHING STAFF

<table>
<thead>
<tr>
<th>Name</th>
<th>Discipline/ Specialty</th>
<th>Board Status</th>
<th>Hours per week</th>
<th>Weeks per year</th>
<th>Assignments*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Indru Punwani</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>40</td>
<td>52</td>
<td>SC, T, PA</td>
</tr>
<tr>
<td>Dr. Marcio Da Fonseca</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>40</td>
<td>52</td>
<td>SC, T, PA</td>
</tr>
<tr>
<td>Dr. Rodney Vergotine</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>32</td>
<td>52</td>
<td>SC, T, PA</td>
</tr>
<tr>
<td>Dr. Sahar Alrayyes</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>32</td>
<td>52</td>
<td>SC, T, PA</td>
</tr>
<tr>
<td>Dr. Sharbanoo Fadavi</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>32</td>
<td>52</td>
<td>SC, T</td>
</tr>
<tr>
<td>Dr. Lance Lambert</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>12</td>
<td>52</td>
<td>SC, T</td>
</tr>
<tr>
<td>Dr. Irwin Seidman</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>8</td>
<td>52</td>
<td>SC, T</td>
</tr>
<tr>
<td>Dr. Kapil Vij</td>
<td>Pediatric Dentistry/ Orthodontics</td>
<td>Board Certified</td>
<td>4</td>
<td>52</td>
<td>SC, T</td>
</tr>
<tr>
<td>Dr. Marilia Montero</td>
<td>Pediatric Dentistry</td>
<td>Board Certified</td>
<td>8</td>
<td>52</td>
<td>SC, (T.ended 8/15/2012)</td>
</tr>
<tr>
<td>Dr. Claire Garcia</td>
<td>Pediatric Dentistry</td>
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<td>4</td>
<td>52</td>
<td>SC</td>
</tr>
<tr>
<td>Dr. Flavia Lamberghini</td>
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<td>Board Certified</td>
<td>4</td>
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<td>SC</td>
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<tr>
<td>Dr. Nicola Hill-Cordell</td>
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<td>Board Certified</td>
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<td>52</td>
<td>SC</td>
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<tr>
<td>Dr. Adriene Barnes</td>
<td>Pediatric Dentistry</td>
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<td>4</td>
<td>52</td>
<td>SC</td>
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<tr>
<td>Dr. Generand Algenio</td>
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<td>Board Certified</td>
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<td>SC</td>
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<tr>
<td>Dr. Jin Moon Soh</td>
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<td>Dr. Ricardo Mendoza</td>
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<td>52</td>
<td>SC (on leave of absence)</td>
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## Appendix H

### Exhibit 3.2

**TEACHING STAFF**

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

*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)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>Universidade Federal de Juiz de Fora, Minas Gerais, Brazil</td>
<td>1987</td>
<td>DDS</td>
<td>Dentistry</td>
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LICENSURE

<table>
<thead>
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<th>License (Do not include license number)</th>
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<th>To (Year)</th>
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<tr>
<td>Illinois Board of Dentistry</td>
<td>2013</td>
<td>2016</td>
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<tr>
<td>Washington Board of Dentistry</td>
<td>2010</td>
<td>2013</td>
</tr>
<tr>
<td>Ohio Board of Dentistry</td>
<td>2010</td>
<td>2005</td>
</tr>
<tr>
<td>Michigan Board of Dentistry</td>
<td>1997</td>
<td>2005</td>
</tr>
<tr>
<td>California Board of Dentistry</td>
<td>1995</td>
<td>1997</td>
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BOARD CERTIFICATION

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<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
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<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>10/2004</td>
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TEACHING APPOINTMENTS (Begin with current)

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<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois at Chicago College of Dentistry</td>
<td>Associate Professor</td>
<td>Chair, Dept. of Pediatric Dentistry</td>
<td>2013</td>
<td>currently</td>
</tr>
<tr>
<td>University of Washington</td>
<td>Professor</td>
<td>Graduate Program Director, Dept of Pediatric Dentistry</td>
<td>2010</td>
<td>2013</td>
</tr>
<tr>
<td>The Ohio State University</td>
<td>Professor</td>
<td>Director, Inpatient Dental Care</td>
<td>2005</td>
<td>2010</td>
</tr>
<tr>
<td>University of Michigan</td>
<td>Assoc. Prof.</td>
<td>Head, Hospital Pediatric Dentistry</td>
<td>1997</td>
<td>2005</td>
</tr>
<tr>
<td>University of California, San Francisco</td>
<td>Assist. Prof.</td>
<td>Director, Pre-Doctoral Pediatric Dentistry</td>
<td>1995</td>
<td>1997</td>
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## CURRENT TEACHING RESPONSIBILITIES

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<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
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<tbody>
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<td>University of Illinois at Chicago</td>
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<td>Didactic Clinic/Laboratory</td>
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## HOSPITAL APPOINTMENTS (Begin with current)

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<th>City</th>
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<th>To (Year)</th>
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<tr>
<td>Seattle Children’s</td>
<td>Seattle</td>
<td>WA</td>
<td>2010</td>
<td>2013</td>
</tr>
<tr>
<td>Nationwide Children’s Hospital</td>
<td>Columbus</td>
<td>OH</td>
<td>2005</td>
<td>2010</td>
</tr>
<tr>
<td>University of Michigan Hospitals</td>
<td>Ann Arbor</td>
<td>MI</td>
<td>1997</td>
<td>2005</td>
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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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Academy of Pediatric Dentistry</td>
<td>Associate Editor, Journal of Dentistry for Children</td>
<td>2012</td>
<td>2015</td>
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<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Examiner</td>
<td>2008</td>
<td>current</td>
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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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
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</table>
**Commission on Dental Accreditation**  
**BioSketch**

Name: Indru C. Punwani  

Current Institution: University of Illinois at Chicago

### EDUCATIONAL BACKGROUND (Begin with college level)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>University of Bombay, Bombay, India</td>
<td>1957</td>
<td>Certificate</td>
<td>Pre-Dentistry</td>
</tr>
<tr>
<td>University of Bombay, Bombay, India</td>
<td>1961</td>
<td>DDS</td>
<td>Dentistry</td>
</tr>
<tr>
<td>Guggenheim Fellow, New York, NY</td>
<td>1963</td>
<td>Certificate</td>
<td>Pedodontics</td>
</tr>
<tr>
<td>Children’s Hospital of Pittsburgh, Pittsburgh, PA</td>
<td>1964</td>
<td>Certificate</td>
<td>Pedodontics</td>
</tr>
<tr>
<td>University of Pittsburgh, Pittsburgh, PA</td>
<td>1966</td>
<td>Certificate</td>
<td>Pedodontics</td>
</tr>
<tr>
<td>University of Pittsburgh, Pittsburgh, PA</td>
<td>1968</td>
<td>MSD</td>
<td>Pedodontics</td>
</tr>
<tr>
<td>University of Bergen, Bergen, Norway</td>
<td>1970</td>
<td>DDS</td>
<td>Dentistry</td>
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### LICENSURE

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>State of Illinois – Licensed Dentist</td>
<td>1975</td>
<td>9/30/2015</td>
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<tr>
<td>State of Illinois – Specialist in Pedodontics</td>
<td>1990</td>
<td>9/30/2015</td>
</tr>
<tr>
<td>State of Illinois – Dental Sedation</td>
<td>1990</td>
<td>9/30/2015</td>
</tr>
<tr>
<td>State of Illinois – Controlled Substance</td>
<td>1990</td>
<td>9/30/2015</td>
</tr>
<tr>
<td>Federal DEA</td>
<td>1990</td>
<td>3/31/2016</td>
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### BOARD CERTIFICATION

<table>
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<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois Dept. of Financial &amp; Professional Regulation</td>
<td>Specialist in Pediatric Dentistry</td>
<td>1990</td>
</tr>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>03/1990</td>
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### TEACHING APPOINTMENTS (Begin with current) (ACADEMIC & ADMINISTRATIVE APPOINTMENTS)

<table>
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<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Univ. of Illinois, Chicago, IL</td>
<td>Professor</td>
<td>Honors College</td>
<td>2006</td>
<td>Present</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Professor and Dept. Head</td>
<td>College of Dentistry, Dept. of Pediatric Dentistry - Acting Head 1981-82</td>
<td>1982-2012; Dept Head 6/30/12-7/15/13</td>
<td></td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Professor</td>
<td>College of Dentistry, Dept. of Pediatric Dentistry</td>
<td>1977</td>
<td>1981</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Associate Professor</td>
<td>College of Dentistry, Dept. of Pediatric Dentistry</td>
<td>1974</td>
<td>1977</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Assistant Professor</td>
<td>College of Dentistry, Dept. of Pedodontics</td>
<td>1972</td>
<td>1974</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Program Director</td>
<td>Post-Graduate Residency Program, College of Dentistry, Dept. of Pediatric Dentistry (Terms: 1972-83; 1986-99; 2007-Present)</td>
<td>1972</td>
<td>Present</td>
</tr>
<tr>
<td>UIC Hospital &amp; Health Sciences System, Chicago, IL</td>
<td>Head</td>
<td>UI Hospital Department of Dentistry</td>
<td>1999</td>
<td>Present</td>
</tr>
<tr>
<td>UIC Hospital &amp; Health Sciences System, Chicago, IL</td>
<td>Chief</td>
<td>UI Hospital Dental Service</td>
<td>1999</td>
<td>Present</td>
</tr>
<tr>
<td>UIC Hospital &amp; Health Sciences System, Chicago, IL</td>
<td>Head</td>
<td>UI Hospital Dept. of Pediatric Dentistry</td>
<td>1982</td>
<td>2013</td>
</tr>
<tr>
<td>UIC Hospital &amp; Health Sciences System, Chicago, IL</td>
<td>Chief</td>
<td>UI Hospital, Pediatric Dentistry Division</td>
<td>1972</td>
<td>Present</td>
</tr>
<tr>
<td>UIC Hospital &amp; Health Sciences System, Chicago, IL</td>
<td>Alternate Graduate Program Director</td>
<td>Oral Sciences</td>
<td>1995</td>
<td>2002</td>
</tr>
<tr>
<td>Michael Reese Medical Center, Chicago, IL</td>
<td>Chief</td>
<td>Department of Pediatric Dentistry</td>
<td>1989</td>
<td>1995</td>
</tr>
<tr>
<td>University of Bergen, Norway</td>
<td>Assistant Professor</td>
<td>Department of Pedodontics</td>
<td>1969</td>
<td>1972</td>
</tr>
<tr>
<td>University of Bergen, Norway</td>
<td>Instructor</td>
<td>Department of Pedodontics</td>
<td>1968</td>
<td>1969</td>
</tr>
<tr>
<td>University of Pittsburgh (50%), Children’s Hospital of Pittsburgh (50%), Pennsylvania</td>
<td>Instructor</td>
<td>Department of Pedodontics</td>
<td>1966</td>
<td>1968</td>
</tr>
<tr>
<td>University of Pittsburgh, Pennsylvania</td>
<td>Clinical Instructor</td>
<td>Department of Pedodontics</td>
<td>1964</td>
<td>1966</td>
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</tbody>
</table>

**CURRENT TEACHING RESPONSIBILITIES**

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Seminar Lectures</td>
<td>Post-Graduate Residents</td>
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**HOSPITAL APPOINTMENTS (Begin with current)**

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<th>Name of Hospital</th>
<th>City</th>
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<th>From (Year)</th>
<th>To (Year)</th>
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<tbody>
<tr>
<td>Univ of IL Hospital &amp; Health Sciences System</td>
<td>Chicago</td>
<td>IL</td>
<td>1972</td>
<td>Present</td>
</tr>
<tr>
<td>Michael Reese Medical Center</td>
<td>Chicago</td>
<td>IL</td>
<td>1989</td>
<td>1995</td>
</tr>
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</table>
**MEMBERSHIP, OFFICES OR APPOINTMENTS HELD IN LOCAL, STATE OR NATIONAL DENTAL OR ALLIED DENTAL ORGANIZATIONS, INCLUDING APPOINTMENTS TO STATE BOARDS OF DENTISTRY AND CODA**

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
<tbody>
<tr>
<td>American Academy of Pediatrics</td>
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<tr>
<td>American Academy of Pediatric Dentistry</td>
<td>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)</td>
<td>1979</td>
<td>Present</td>
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<tr>
<td>American College of Dentists</td>
<td>Fellow</td>
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<tr>
<td>American Association of Dental Research</td>
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<td>American Association of Dental Research (Chicago section)</td>
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<td>American Association of Dental Schools</td>
<td>Pedodontic Section, Committee on Predoctoral; Pedodontic Education – Co-Chair (1979)</td>
<td>1979</td>
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<tr>
<td>American Dental Association Commission on Dental Accreditation</td>
<td>Pediatric Dentistry – Consultant (1999 – 2006; 2011 - Present); Review Committee (2002 - 2006); Council on Hospital and Institutional Dental Services – AAPD Representative (1978 - 1982)</td>
<td>1978</td>
<td>Present</td>
</tr>
<tr>
<td>American Dental Education Association</td>
<td>Council on Hospital and Postdoctoral Affairs – Delegate (2005 - Present)</td>
<td>2005</td>
<td>Present</td>
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<td>American Society of Dentistry for Children</td>
<td>Education Policy Committee</td>
<td>1981</td>
<td>1981</td>
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<tr>
<td>Chicago Dept. of Public Health</td>
<td>Oral Health Task Force</td>
<td>2000</td>
<td>2004</td>
</tr>
<tr>
<td>Chicago Dept. of Health &amp; Human Services</td>
<td>Head Start Program – Dental Consultant</td>
<td>2002</td>
<td>Present</td>
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<tr>
<td>Children and Youth 2000</td>
<td>Executive Committee</td>
<td>1997</td>
<td>1997</td>
</tr>
<tr>
<td>College of Diplomates, American Board of Pediatric Dentistry</td>
<td>Board of Directors (1998 - 2000), Vice President, President Elect, President, Immediate Past President (2001 - 2005)</td>
<td>1998</td>
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<td>Computerized Test Bank</td>
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<td>Organization</td>
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<td>Years</td>
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<td>------------------------------------------------------------------------------</td>
<td>-------------</td>
<td></td>
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<tr>
<td>Committee on Institutional Cooperation (CIC) Big Ten Universities</td>
<td>Fellow</td>
<td></td>
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<td>European Academy of Pediatric Dentistry</td>
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<td>Fédération Dentaire Internationale</td>
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<td>Federation of Special Patient Care Organization</td>
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<td>Fellow</td>
<td>1990 - Present</td>
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<td>Illinois Chapter, American Academy of Pediatrics</td>
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<td>Illinois Children’s Healthcare Foundation</td>
<td>Advisory Committee</td>
<td>2007</td>
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<td>Illinois Department of Financial &amp; Professional Regulation (State of Illinois)</td>
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<td>Illinois Department of Public Aid</td>
<td>Pediatric Oral Health Care, Chicago – Chair (1996); Ad Hoc Committee</td>
<td>1996</td>
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<tr>
<td>Illinois State Dental Society</td>
<td>PANDA Committee; Liaison with ISPD; Illinois State Dental Society – Sedation Committee (1996 – 1998; 2006 - present)</td>
<td>1996 - Present</td>
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<tr>
<td>Indian Dental Association of Illinois</td>
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<tr>
<td>International Academy of Pediatric Dentistry</td>
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<tr>
<td>International Association of Dental Research (IADR)</td>
<td>President, Pediatric Oral Health Research Group (2013-2014)</td>
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<tr>
<td>International College of Dentists</td>
<td>Fellow</td>
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<tr>
<td>Odontographic Society of Chicago, Associate Institute of Medicine</td>
<td>Fellow</td>
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<tr>
<td>Omicron Kappa Upsilon (Sigma Chapter)</td>
<td>President (2000), President Elect (1999); Vice President (1998), Secretary-Treasurer (1997)</td>
<td>1997 - Present</td>
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</tr>
<tr>
<td>Omicron Kappa Upsilon (Supreme Chapter)</td>
<td>President (2003), President-Elect (2002), Vice President (2001)</td>
<td>2001 - Present</td>
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<tr>
<td>Sigma Xi</td>
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<tr>
<td>Society of Medical History of Chicago</td>
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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)

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<thead>
<tr>
<th>Author(s)</th>
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<tr>
<td></td>
<td></td>
<td>(Spanish language)</td>
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<tr>
<td>(other articles not within 5 years)</td>
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</table>
**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)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td>University of Michigan</td>
<td>1994</td>
<td>BS</td>
<td>Psychology</td>
</tr>
<tr>
<td>Northwestern University</td>
<td>1998</td>
<td>DDS</td>
<td>Dentistry</td>
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<tr>
<td>University of Iowa</td>
<td>2001</td>
<td>MS</td>
<td>Pediatric Dentistry/Dental Public Health</td>
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### LICENSURE

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dentist</td>
<td>1998</td>
<td>Present</td>
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### BOARD CERTIFICATION

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
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<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>9/24/09</td>
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### TEACHING APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
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<tbody>
<tr>
<td>University of Illinois-Chicago, IL</td>
<td>Assistant Clinical Professor</td>
<td>Pediatric Dentistry</td>
<td>2013</td>
<td>present</td>
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### CURRENT TEACHING RESPONSIBILITIES

<table>
<thead>
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<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
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<tbody>
<tr>
<td>University of Illinois-Chicago, IL</td>
<td>Pediatric Pre-clinical Laboratory</td>
<td>Undergraduate Dental-2nd year</td>
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</tbody>
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**Appendix I**
### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
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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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
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<tbody>
<tr>
<td>Chicago Dental Society</td>
<td>Member, Various Committee Memberships</td>
<td>2001</td>
<td>Present</td>
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<tr>
<td>Illinois Society of Pediatric Dentistry</td>
<td>Board Member</td>
<td>2013</td>
<td>2016</td>
</tr>
<tr>
<td>International College of Dentists</td>
<td>Fellow</td>
<td>2013</td>
<td>Present</td>
</tr>
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</table>

### 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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
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</tbody>
</table>
Name: Sahar Alrayyes

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

EDUCATIONAL BACKGROUND (Begin with college level)

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<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td>Northeastern University, Boston, Massachusetts</td>
<td>1994</td>
<td>Bachelor of Science in Biology</td>
<td>Biology</td>
</tr>
<tr>
<td>Northwestern University Dental School, Chicago, Illinois</td>
<td>1998</td>
<td>DDS</td>
<td>Doctor of Dental Surgery</td>
</tr>
<tr>
<td>University of Illinois at Chicago, Chicago, Illinois</td>
<td>2002</td>
<td>MS</td>
<td>Masters Degree in Oral Science</td>
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LICENSURE

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<th>To (Year)</th>
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<tbody>
<tr>
<td>Drug Enforcement Agency registration</td>
<td>1998</td>
<td>2013</td>
</tr>
<tr>
<td>Illinois Dental License</td>
<td>1998</td>
<td>2013</td>
</tr>
<tr>
<td>Illinois Pediatric Dentistry Specialty License</td>
<td>2002</td>
<td>2013</td>
</tr>
<tr>
<td>Illinois Controlled Substance Registration</td>
<td>2002</td>
<td>2013</td>
</tr>
<tr>
<td>Pediatric Advanced Life Support</td>
<td>2000</td>
<td>2015</td>
</tr>
<tr>
<td>Basic Life Support</td>
<td>2000</td>
<td>2014</td>
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<tr>
<td>Jordan Dental License</td>
<td>2005</td>
<td>2013</td>
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BOARD CERTIFICATION

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<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
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<tbody>
<tr>
<td>Northeast Regional Board in Dentistry</td>
<td>General Dentistry</td>
<td>1998</td>
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<tr>
<td>American Board of Pediatric Dentistry, Diplomat</td>
<td>Pediatric Dentistry</td>
<td>2006</td>
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TEACHING APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Clinical Assistant Professor</td>
<td>Clinic Director, Department of Pediatric Dentistry</td>
<td>2012</td>
<td>2013</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Clinical Assistant Professor</td>
<td>Diagnosis and treatment planning, Post-doctoral, Pediatric Dentistry</td>
<td>2012</td>
<td>2013</td>
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<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Assistant Professor</td>
<td>Clinic Director, Pre-doctoral pediatric clinic, Department of Pediatric Dentistry</td>
<td>2007</td>
<td>2012</td>
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<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Assistant Professor</td>
<td>Special Patient Care, Pre-doctoral, Pediatric Dentistry</td>
<td>2007</td>
<td>2013</td>
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<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Assistant Professor</td>
<td>Patient Care Quality Assurance, Pediatric Dentistry</td>
<td>2006</td>
<td>2013</td>
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<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Assistant Professor</td>
<td>Caries risk assessment, anticipatory guidance and Infant Oral Health, Pre-doctoral, pediatric dentistry</td>
<td>2008</td>
<td>2013</td>
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**CURRENT TEACHING RESPONSIBILITIES**

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Diagnosis and treatment planning</td>
<td>Pediatric dentistry post graduate residents (PGY1)</td>
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<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Pediatric dentistry clinic</td>
<td>Pediatric dentistry post graduate residents (PGY1 and 2)</td>
<td>1000</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Pediatric dentistry clinic</td>
<td>Pediatric Dentistry, Predoctoral dental students (D3)</td>
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<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Pediatric dentistry clinic</td>
<td>Honors Pediatric Dentistry, Predoctoral dental students (D4)</td>
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<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Infant Clinic</td>
<td>Infant rotation, Pediatric Dentistry, Predoctoral dental students (D2)</td>
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**HOSPITAL APPOINTMENTS (Begin with current)**

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
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<tbody>
<tr>
<td>University of Illinois at Chicago Medical Center</td>
<td>Chicago</td>
<td>IL</td>
<td>2007</td>
<td>2013</td>
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</table>

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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
<tbody>
<tr>
<td>American Dental Education Association (ADEA), Pediatric Dentistry Section</td>
<td>Chair</td>
<td>2013</td>
<td>2014</td>
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<tr>
<td>Illinois Society of Pediatric Dentists</td>
<td>President</td>
<td>2012</td>
<td>2013</td>
</tr>
<tr>
<td>American Dental Education Association (ADEA), Pediatric Dentistry Section</td>
<td>Chair-Elect</td>
<td>2012</td>
<td>2013</td>
</tr>
<tr>
<td>Illinois Society of Pediatric Dentists</td>
<td>President-Elect</td>
<td>2011</td>
<td>2012</td>
</tr>
<tr>
<td>American Dental Education Association (ADEA), Pediatric Dentistry Section</td>
<td>Secretary</td>
<td>2011</td>
<td>2012</td>
</tr>
<tr>
<td>Pre-doctoral Program Director Council, American Academy of Pediatric Dentistry (AAPD)</td>
<td>Co-Chair</td>
<td>2010</td>
<td>2011</td>
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</tbody>
</table>
### 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)

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<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
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<tbody>
<tr>
<td>Alrayyes, S.,* Koerber, A.</td>
<td>Parent's Compliance for their Infants’ Dental Needs</td>
<td><em>J Dental Research</em> 88 (Spec Iss A):2485</td>
<td>2009</td>
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<tr>
<td>Alrayyes, S., Vergotine, R.J., Koerber, A.</td>
<td>General Dentists’ Practices and Attitude towards the Infant Oral Exam.</td>
<td><em>J Dental Research</em> 87 (Spec Iss B):3339</td>
<td>2008</td>
</tr>
</tbody>
</table>
Name: Adrienne C.A. Barnes
Current Institution: University of Illinois at Chicago College of Dentistry

EDUCATIONAL BACKGROUND

<table>
<thead>
<tr>
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<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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<td>Bradley University, Peoria, IL</td>
<td>1975</td>
<td>BS</td>
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<tr>
<td>Georgetown Univ. School of Dentistry</td>
<td>1982</td>
<td>DDS</td>
<td>Dentistry</td>
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<tr>
<td>Univ. of Illinois at Chicago College of Dentistry, IL</td>
<td>1991</td>
<td>Specialty Certificate</td>
<td>Pediatric Dentistry</td>
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LICENSURE

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<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
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<tr>
<td>Illinois Licensed Dentistry; Specialist in Pediatric Dentistry</td>
<td>General – 1982; Specialty – 1991</td>
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BOARD CERTIFICATION

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<tr>
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TEACHING APPOINTMENTS (Begin with current)

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<th>Rank</th>
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<th>To (Year)</th>
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<tr>
<td>UIC College of Dentistry, Chicago, IL</td>
<td>Clinical Assistant Professor</td>
<td>Post-Graduate Clinic</td>
<td>1991; 2009</td>
<td>1995; 2013</td>
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CURRENT TEACHING RESPONSIBILITIES

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<th>Course Title</th>
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<th>Total Contact Hours Per Year</th>
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<tbody>
<tr>
<td>UIC College of Dentistry, Chicago, IL</td>
<td>Post-Graduate Residents</td>
<td>Didactic Clinic/Laboratory</td>
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Appendix I
### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
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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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Dental Association; American Academy of Pediatric Dentistry; Illinois Society of Pediatric Dentists; Illinois State Dental Society; Chicago Dental Society</td>
<td>Member</td>
<td>1989</td>
<td>present</td>
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</tbody>
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<table>
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<tr>
<th>Author(s)</th>
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</table>
Name: Shahrbanoo Fadavi

Current Institution: University of Illinois at Chicago

### EDUCATIONAL BACKGROUND (Begin with college level)

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<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>1981</td>
<td>Master of Science</td>
<td>Pediatric Dentistry</td>
</tr>
<tr>
<td>University of Tehran, Tehran, Iran</td>
<td>1977</td>
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<td>Dentistry</td>
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### LICENSURE

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<tr>
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<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
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<tr>
<td>Licensed dentist, State of Illinois</td>
<td>1983</td>
<td>Date</td>
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<tr>
<td>Specialty licensure in Pediatric Dentistry, Illinois</td>
<td>1984</td>
<td>Date</td>
</tr>
<tr>
<td>Licensed in Conscious Sedation, State of Illinois</td>
<td>1999</td>
<td>Date</td>
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### BOARD CERTIFICATION

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
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<tbody>
<tr>
<td>Diplomate, American Board of Pediatric Dentistry</td>
<td>1997</td>
<td>Date</td>
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### TEACHING APPOINTMENTS (Begin with current)

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<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>Professor</td>
<td>Pediatric Dentistry</td>
<td>1998</td>
<td>Date</td>
</tr>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>Director, Residency Program</td>
<td>Pediatric Dentistry</td>
<td>1999</td>
<td>2007</td>
</tr>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>Associate Professor</td>
<td>Pediatric Dentistry</td>
<td>1991</td>
<td>1998</td>
</tr>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>Assistant Professor</td>
<td>Pediatric Dentistry</td>
<td>1981</td>
<td>1991</td>
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</table>

### CURRENT TEACHING RESPONSIBILITIES

<table>
<thead>
<tr>
<th>Name of Institution, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>PEDD 620, Pediatric Dentistry Clinic/Course</td>
<td>Pediatric Dentistry Residency Specialty</td>
<td>X</td>
</tr>
<tr>
<td>Name of Organization</td>
<td>Title</td>
<td>From (Year)</td>
<td>To (Year)</td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>---------------------------------------------------------</td>
<td>-------------</td>
<td>-----------</td>
</tr>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Oral Examination Committee Member</td>
<td>2007</td>
<td>Date</td>
</tr>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Committee Member on Recertification and Quality Assurance</td>
<td>2007</td>
<td>Date</td>
</tr>
<tr>
<td>ADA, CODA</td>
<td>Consultant, Site Visitor for Pediatric Dentistry</td>
<td>2006</td>
<td>Date</td>
</tr>
</tbody>
</table>

**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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
</thead>
</table>
Name: Mary Claire S. Garcia

Current Institution: University of Illinois at Chicago

EDUCATIONAL BACKGROUND (Begin with college level)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loyola Univ of Chicago</td>
<td>1980</td>
<td>BS</td>
<td>Biology</td>
</tr>
<tr>
<td>Loyola Univ of Chicago</td>
<td>1985</td>
<td>DDS</td>
<td></td>
</tr>
<tr>
<td>Univ of Illinois at Chicago</td>
<td>1990</td>
<td>Certificate</td>
<td>Pediatric Dentistry</td>
</tr>
<tr>
<td>Univ of Illinois at Chicago</td>
<td>1992</td>
<td>MS</td>
<td></td>
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LICENSURE

<table>
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<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
<tbody>
<tr>
<td>Pediatric Dentistry</td>
<td>1990</td>
<td>Present</td>
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BOARD CERTIFICATION

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<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amer Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>Oct 2012</td>
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TEACHING APPOINTMENTS (Begin with current)

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

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Didactic</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Clinic/Laboratory</td>
</tr>
</tbody>
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### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central DuPage Hospital</td>
<td>Winfield</td>
<td>IL</td>
<td>2013</td>
<td>present</td>
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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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
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</thead>
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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)

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<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
</thead>
</table>
**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)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td>Knox College, Galesburg, Illinois</td>
<td>1985</td>
<td>BA</td>
<td>Biology</td>
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<tr>
<td>UIC College of Dentistry, Chicago, Illinois</td>
<td>1989</td>
<td>DDS</td>
<td>Dentistry</td>
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### LICENSURE

<table>
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<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
<tbody>
<tr>
<td>Illinois</td>
<td>1991</td>
<td>2014</td>
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### BOARD CERTIFICATION

<table>
<thead>
<tr>
<th>Certifying Organization</th>
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<th>Date certified</th>
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<tbody>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>2011</td>
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### TEACHING APPOINTMENTS (Begin with current)

<table>
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<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
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### CURRENT TEACHING RESPONSIBILITIES

<table>
<thead>
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<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>UIC College of Dentistry, Chicago, IL</td>
<td>clinic</td>
<td>residents</td>
<td>Didactic 0 Clinic/Laboratory 200</td>
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### HOSPITAL APPOINTMENTS (Begin with current)

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<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alexian Brothers Medical Center</td>
<td>Elk Grove Village</td>
<td>IL</td>
<td>1992</td>
<td>2013</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADA, ISDS, CDS</td>
<td>member</td>
<td>1991</td>
<td>2013</td>
</tr>
<tr>
<td>AAPD</td>
<td>member</td>
<td>1992</td>
<td>2013</td>
</tr>
<tr>
<td>ABPD</td>
<td>diplomat</td>
<td>2010</td>
<td>2013</td>
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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)

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<thead>
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<th>Author(s)</th>
<th>Title</th>
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<th>Date</th>
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<tbody>
<tr>
<td>n/a</td>
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</tbody>
</table>
Name: Anne Koerber
Current Institution: University of Illinois College of Dentistry

EDUCATIONAL BACKGROUND (Begin with college level)

<table>
<thead>
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<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>Iowa State University, Ames, Iowa</td>
<td>1975</td>
<td>BS</td>
<td>Zoology</td>
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<tr>
<td>University of Iowa, Iowa City, Iowa</td>
<td>1979</td>
<td>DDS</td>
<td>Dentistry</td>
</tr>
<tr>
<td>Northwestern University</td>
<td>1989</td>
<td>PhD</td>
<td>Psychology</td>
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LICENSURE

<table>
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<tr>
<th>License (Do not include license number)</th>
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<th>To (Year)</th>
</tr>
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<tbody>
<tr>
<td>Clinical Psychology, Illinois</td>
<td>1990</td>
<td>current</td>
</tr>
<tr>
<td>Dentistry, Colorado</td>
<td>1980</td>
<td>2000</td>
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BOARD CERTIFICATION

<table>
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<th>Specialty</th>
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TEACHING APPOINTMENTS (Begin with current)

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

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
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<tbody>
<tr>
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<tr>
<td>Appendix I</td>
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</table>
### Didactic Clinic/Laboratory

<table>
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<th>Didactic</th>
<th>Clinic/Laboratory</th>
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<tbody>
<tr>
<td>UIC COD</td>
<td>Dental Ethics</td>
<td>UIC COD Dental Ethics</td>
<td>UIC COD Dental Ethics</td>
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<tr>
<td></td>
<td>D1 dental students</td>
<td>3</td>
<td>12 hours</td>
</tr>
<tr>
<td></td>
<td>D2 dental students</td>
<td>2</td>
<td>9 hours</td>
</tr>
<tr>
<td></td>
<td>D3 dental students</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>D4 dental students</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>International students year 1</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>International students year 2</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Professionalism Coordination</td>
<td>Ethics, epidemiology, evidence based dentistry, practice management and communication skills</td>
<td>Case writing to incorporate into small group learning</td>
</tr>
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### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
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<th>Name of Hospital</th>
<th>City</th>
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<th>To (Year)</th>
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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

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

### 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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>DJ Fischer, A Koerber</td>
<td>Assessment of willingness to provide diabetes education and counseling in a dental school clinic.</td>
<td>Journal of Dental Education</td>
<td>2011</td>
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<tr>
<td>JM Davis and A Koerber</td>
<td>Assessment of tobacco dependence curricula in U.S. dental hygiene programs.</td>
<td>Journal of Dental Education</td>
<td>2010</td>
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<tr>
<td>Author(s)</td>
<td>Title</td>
<td>Journal</td>
<td>Year</td>
</tr>
<tr>
<td>----------</td>
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<tr>
<td>R Vergotine and A Koerber</td>
<td>The relationship of dental visits to parental knowledge of management of dental trauma</td>
<td>Pediatric Dentistry</td>
<td>2010</td>
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<tr>
<td>C Croffoot, K Krust Bray, MA Black, A Koerber</td>
<td>Evaluating the effects of coaching to improve motivational interviewing skills of dental hygiene students.</td>
<td>Journal of Dental Hygiene</td>
<td>2010</td>
</tr>
<tr>
<td>IG Needleman, VI Binnie, A Ainamo, AB Carr, A Fundak, A Koerber, K Öhrn and J Rosseel</td>
<td>Improving the effectiveness of tobacco use cessation (TUC)</td>
<td>International Dental Journal</td>
<td>2010</td>
</tr>
</tbody>
</table>
Name: Flavia Lamberghini

Current Institution: COD Pediatric Dentistry

EDUCATIONAL BACKGROUND (Begin with college level)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td>College of Dentistry, U Cordoba, Argentina</td>
<td>1993</td>
<td>DDS</td>
<td>Dentistry</td>
</tr>
<tr>
<td>UIC COD Pediatric Dentistry</td>
<td>2004-2006</td>
<td>Certificate, Resident in Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
</tr>
<tr>
<td>UIC School of Public Health and COD</td>
<td>1997 and 2006</td>
<td>Master in Public Health (Epidemiology) and MS</td>
<td>Public Health/Oral Sciences</td>
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LICENSURE

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
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<tbody>
<tr>
<td>IL Dental License</td>
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BOARD CERTIFICATION

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<th>Specialty</th>
<th>Date certified</th>
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<tr>
<td>IDPR</td>
<td>Pediatric Dentistry</td>
<td>2007</td>
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TEACHING APPOINTMENTS (Begin with current)

<table>
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<tr>
<th>Name of Institution, City and State</th>
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<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>COD Pediatric Dentistry</td>
<td>Clinical Assistant Professor</td>
<td>Pediatric Dentistry</td>
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<td>present</td>
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CURRENT TEACHING RESPONSIBILITIES

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<tr>
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<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
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<tbody>
<tr>
<td></td>
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<td>Didactic Clinic/Laboratory</td>
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HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
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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

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<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Dental Association</td>
<td>Member</td>
<td>1996</td>
<td>present</td>
</tr>
<tr>
<td>American Academy of Pediatric Dentistry</td>
<td>Member</td>
<td>1996</td>
<td>present</td>
</tr>
<tr>
<td>Illinois Pediatric Dental Society/Hispanic Dental Association</td>
<td>Member</td>
<td>1996</td>
<td>present</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
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</table>
Name: Lance Lambert

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

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

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>Dartmouth College</td>
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<td>B.A.</td>
<td>Biology</td>
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<tr>
<td>University of Illinois at Chicago, College of Dentistry</td>
<td>1983</td>
<td>D.D.S.</td>
<td>Dentistry</td>
</tr>
<tr>
<td>Michael Reese Hospital and Medical Center</td>
<td>1984</td>
<td>General Practice Residency</td>
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<tr>
<td>Children’s Hospital of Pittsburgh</td>
<td>1986</td>
<td>Pediatric Dentistry Residency</td>
<td></td>
</tr>
</tbody>
</table>

**LICENSURE**

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois General Dental, Dental Specialist, and Sedation Permit</td>
<td>1983</td>
<td>current</td>
</tr>
</tbody>
</table>

**BOARD CERTIFICATION**

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>1993</td>
</tr>
</tbody>
</table>

**TEACHING APPOINTMENTS (Begin with current)**

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

**CURRENT TEACHING RESPONSIBILITIES**

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
<th>Didactic</th>
<th>Clinic/Laboratory</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois at Chicago, College of Dentistry</td>
<td>Clinic</td>
<td>First and second year Post Graduate</td>
<td>450</td>
<td></td>
<td></td>
</tr>
<tr>
<td>University of Illinois at Chicago, College of Dentistry</td>
<td>Hospital dentistry and special patient care</td>
<td>First and second year Post Graduates</td>
<td>75</td>
<td></td>
<td></td>
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</tbody>
</table>
### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois Hospital</td>
<td>Chicago</td>
<td>IL</td>
<td>1986</td>
<td>current</td>
</tr>
<tr>
<td>Central Du Page</td>
<td>Winfield</td>
<td>IL</td>
<td>1990</td>
<td>current</td>
</tr>
<tr>
<td>Illinois Masonic Hospital</td>
<td>Chicago</td>
<td>IL</td>
<td>1988</td>
<td>1995</td>
</tr>
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</table>

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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois Society of Pediatric Dentist</td>
<td>Past board member, past president,</td>
<td>1986</td>
<td>current</td>
</tr>
<tr>
<td>Illinois State Dental Society</td>
<td>Member</td>
<td>1986</td>
<td>current</td>
</tr>
<tr>
<td>American Academy of Pediatric Dentistry</td>
<td>Member, former council member for several councils</td>
<td>1986</td>
<td>current</td>
</tr>
</tbody>
</table>

### 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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
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</table>

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
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</tbody>
</table>
Name: Charles W. LeHew

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

## EDUCATIONAL BACKGROUND (Begin with college level)

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

## LICENSURE

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
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<td></td>
</tr>
</tbody>
</table>

## BOARD CERTIFICATION

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
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<tbody>
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</table>

## TEACHING APPOINTMENTS (Begin with current)

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

## CURRENT TEACHING RESPONSIBILITIES

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois at Chicago, Chicago, Illinois</td>
<td>Principles and Methods of Dental Research I</td>
<td>Pediatric Dentistry Residents Year 1</td>
<td>Didactic 32</td>
</tr>
<tr>
<td>University of Illinois at Chicago, Chicago, Illinois</td>
<td>Principles and Methods of Dental Research II</td>
<td>Pediatric Dentistry Residents Year 2</td>
<td>Didactic 32</td>
</tr>
<tr>
<td>University of Illinois at Chicago, Chicago, Illinois</td>
<td>Statistics for Dental Residents</td>
<td>Pediatric Dentistry and Periodontic Residents Year 1</td>
<td>16</td>
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<tr>
<td>University of Illinois at Chicago, Chicago, Illinois</td>
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<td>University of Illinois at Chicago, Chicago, Illinois</td>
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</tbody>
</table>
### Hospital Appointments (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
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<tbody>
<tr>
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</table>

### Membership, Offices or Appointments Held in Local, State or National Dental or Allied Dental Organizations, Including Appointments to State Boards of Dentistry and CODA

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Association of Public Health Dentistry</td>
<td>Member</td>
<td>2009</td>
<td>2013</td>
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</tbody>
</table>

### 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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
</thead>
</table>
## 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)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois at Chicago</td>
<td>1997</td>
<td>Fellow</td>
<td>Peds. Dent.</td>
</tr>
<tr>
<td>Boston University</td>
<td>1995</td>
<td>Residency</td>
<td>Peds. Dent.</td>
</tr>
<tr>
<td>Universidad Central Venezuela</td>
<td>1991</td>
<td>DMD</td>
<td>Dentistry</td>
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</table>

### LICENSURE

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Licensure</td>
<td>2012</td>
<td>2015</td>
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</tbody>
</table>

### BOARD CERTIFICATION

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Peds. Dent.</td>
<td>Candidate</td>
</tr>
</tbody>
</table>

### TEACHING APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Clinical Assistant</td>
<td></td>
<td>1997</td>
<td>Present</td>
</tr>
</tbody>
</table>

### CURRENT TEACHING RESPONSIBILITIES

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Didactic</th>
<th>Clinic/Laboratory</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
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</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td></td>
<td>Post-Graduate</td>
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<td>X</td>
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<tr>
<td>Advocate IL Masonic Hosp., Chicago, IL</td>
<td></td>
<td>G.P.R.</td>
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</table>
### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois Masonic Medical Center</td>
<td>Chicago</td>
<td>IL</td>
<td>2002</td>
<td>Present</td>
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</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic Dental Association</td>
<td>Trustee</td>
<td>2012</td>
<td>Present</td>
</tr>
<tr>
<td>G.C.H.D.A.</td>
<td>President</td>
<td>2009</td>
<td>Present</td>
</tr>
</tbody>
</table>

### 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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
Name: Marilia Montero-Fayad

Current Institution: University of Illinois at Chicago, Department of Pediatric Dentistry

EDUCATIONAL BACKGROUND (Begin with college level)

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

LICENSURE

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois</td>
<td>2000</td>
<td>present</td>
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</tbody>
</table>

BOARD CERTIFICATION

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>2006</td>
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</table>

TEACHING APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago IL</td>
<td>Clinical Associate Professor</td>
<td></td>
<td>2012</td>
<td>present</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago IL</td>
<td>Clinical Assistant Professor</td>
<td></td>
<td>2001</td>
<td>2012</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago IL</td>
<td>Clinical Assistant Professor</td>
<td>Mile Square Interim Dental Director</td>
<td>2001</td>
<td>2003</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago IL</td>
<td>Clinical Assistant Professor</td>
<td>Crest Smile Shoppe Dental Director</td>
<td>2003</td>
<td>2006</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago IL</td>
<td>Clinical Assistant Professor</td>
<td>Postgraduate Clinic Director</td>
<td>2007</td>
<td>2012</td>
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CURRENT TEACHING RESPONSIBILITIES
<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago IL</td>
<td>Postgraduate Pediatric Dentistry</td>
<td>Didactic</td>
<td>Clinic/Laboratory</td>
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**HOSPITAL APPOINTMENTS (Begin with current)**

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois Medical Center</td>
<td>Chicago</td>
<td>IL</td>
<td>2000</td>
<td>present</td>
</tr>
</tbody>
</table>

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

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

**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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
</thead>
</table>


**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)**

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>University of Illinois: Chicago, IL</td>
<td>1967</td>
<td>BS</td>
<td>Biology</td>
</tr>
<tr>
<td>University of Illinois: Chicago, IL</td>
<td>1969</td>
<td>BS</td>
<td>Dentistry</td>
</tr>
<tr>
<td>University of Illinois: Chicago, IL</td>
<td>1971</td>
<td>DDS</td>
<td>Dentistry</td>
</tr>
<tr>
<td>University of Illinois: Chicago, IL</td>
<td>1976</td>
<td>Certificate</td>
<td>Pediatric Dentistry</td>
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</table>

**LICENSURE**

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois</td>
<td>1971</td>
<td>Present</td>
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</tbody>
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**BOARD CERTIFICATION**

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>The American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>September, 2010</td>
</tr>
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**TEACHING APPOINTMENTS (Begin with current)**

<table>
<thead>
<tr>
<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois</td>
<td>Asst. Prof.</td>
<td>Pediatric Dentistry</td>
<td>1976</td>
<td>Present</td>
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**CURRENT TEACHING RESPONSIBILITIES**

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
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</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois Chicago</td>
<td>PEDD 595</td>
<td>PEDD Residents Yr. 1</td>
<td>52</td>
<td></td>
<td></td>
</tr>
<tr>
<td>University of Illinois Chicago</td>
<td>PEDD Clinic</td>
<td>PEDD Residents Yrs 1 and 2</td>
<td>182</td>
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<td></td>
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</tbody>
</table>
**HOSPITAL APPOINTMENTS (Begin with current)**

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Illinois</td>
<td>Chicago</td>
<td>IL</td>
<td>1986</td>
<td>Present</td>
</tr>
<tr>
<td>Michael Reese Hospital</td>
<td>Chicago</td>
<td>IL</td>
<td>1990</td>
<td>1991</td>
</tr>
<tr>
<td>Alexian Brothers Medical Center</td>
<td>Elk Grove Village</td>
<td>IL</td>
<td>1975</td>
<td>1982</td>
</tr>
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</table>

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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois Society of Pediatric Dentists</td>
<td>Member</td>
<td>1984</td>
<td>Present</td>
</tr>
<tr>
<td></td>
<td>President</td>
<td>1987</td>
<td>1988</td>
</tr>
<tr>
<td>Chicago Dental Society, ADA and Illinois Dental Society</td>
<td></td>
<td>1974</td>
<td>Present</td>
</tr>
<tr>
<td>American Academy of Pediatric Dentistry</td>
<td></td>
<td>1974</td>
<td>Present</td>
</tr>
</tbody>
</table>

**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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
Name: Jin-Moon Soh

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

EDUCATIONAL BACKGROUND (Begin with college level)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td>University of IL, Chicago, IL</td>
<td>May 31, 1974</td>
<td>MS</td>
<td>Pediatric Dentistry</td>
</tr>
<tr>
<td>UNiversity of IL, Chicago, IL</td>
<td>Sept 27, 1971-1973</td>
<td>Specialty Certificate</td>
<td>Pediatric Dentistry</td>
</tr>
<tr>
<td>Seoul Nat'l University, Seoul, Korea</td>
<td>Aug 30, 1968</td>
<td>Ph.D</td>
<td>Medical science</td>
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<tr>
<td>Seoul Nat'l university, Seoul Korea</td>
<td>Feb 26' 1965</td>
<td>MSD</td>
<td>Pediatric Dentistry</td>
</tr>
<tr>
<td>Seoul Nat'l University, Seoul, Korea</td>
<td>Feb 26, 1962</td>
<td>DDS</td>
<td>Dentistry</td>
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License (Do not include license number)

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<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental License in The State of IL.</td>
<td>July 10, 1975</td>
<td>2015</td>
</tr>
<tr>
<td>Dental License in The State of CA</td>
<td>May 26, 2006</td>
<td>2015</td>
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LICENSURE

<table>
<thead>
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<th>Date certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>State of Illinois, Department of Registration and Education</td>
<td>Pediatric Dentistry</td>
<td>1991</td>
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</table>
### BOARD CERTIFICATION

### TEACHING APPOINTMENTS (Begin with current)

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

### CURRENT TEACHING RESPONSIBILITIES

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>UIC. Chicago IL</td>
<td>Clinical Dentistry</td>
<td>PG I and II</td>
<td>Didactic</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Clinic/384 Laboratory</td>
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</table>

### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
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<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>UIC Hospital</td>
<td>Chicago</td>
<td>IL</td>
<td>1976</td>
<td>2013</td>
</tr>
<tr>
<td>Michael Reese/Humana Hospital</td>
<td>Chicago</td>
<td>IL</td>
<td>1989</td>
<td>1992</td>
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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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADA, ISDS, CDS</td>
<td>Member</td>
<td>1971</td>
<td>2013</td>
</tr>
<tr>
<td>Am Academy of Pediatric Dentistry</td>
<td>Member</td>
<td>1978</td>
<td>2013</td>
</tr>
<tr>
<td>IL Society of Pediatric Dentists</td>
<td>Member</td>
<td>1980</td>
<td>2013</td>
</tr>
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</table>
**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)

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<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
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<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
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</tbody>
</table>
Name: Rodney J Vergotine
Current Institution: The University of Illinois at Chicago

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

<table>
<thead>
<tr>
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<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>The University of the Western Cape, South Africa</td>
<td>1986</td>
<td>BChD</td>
<td>Dentistry</td>
</tr>
<tr>
<td>The University of the Western Cape, South Africa</td>
<td>1993</td>
<td>MSc(dent)</td>
<td>Community Dentistry</td>
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<tr>
<td>The University of Missouri Kansas City, KC, Missouri</td>
<td>1993</td>
<td>Certificate</td>
<td>Pediatric Dentistry</td>
</tr>
<tr>
<td>The University of Illinois at Chicago</td>
<td>1994/5</td>
<td>Fellowship</td>
<td>Pediatric Dentistry</td>
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**LICENSURE**

<table>
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<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois</td>
<td>1996</td>
<td>Current</td>
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**BOARD CERTIFICATION**

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
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</thead>
<tbody>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>1999</td>
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**TEACHING APPOINTMENTS (Begin with current)**

<table>
<thead>
<tr>
<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Assoc. Prof.</td>
<td>Hospital Dentistry</td>
<td>2006</td>
<td>current</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Assoc. Prof.</td>
<td>Assoc. Program Director Residency Pediatric Dentistry program</td>
<td>2007</td>
<td>current</td>
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**CURRENT TEACHING RESPONSIBILITIES**

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Introduction to Hospital Dentistry</td>
<td>D3, Pediatric Dentistry</td>
<td>Didactic 10</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Clinic/Laboratory 0</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Pediatric Dental Seminars</td>
<td>PG1,2, Pediatric Dentistry</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9hrs/week</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Hospital Dentistry</td>
<td>PG 1, Pediatric Dentistry</td>
<td>45</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>College of Dentistry, UIC, Chicago, IL</td>
<td>Diagnosis Treatment Planning</td>
<td>PG1, Pediatric Dentistry</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>
### HOSPITAL APPOINTMENTS (Begin with current)

<table>
<thead>
<tr>
<th>Name of Hospital</th>
<th>City</th>
<th>State</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The University of Illinois Hospitals</td>
<td>Chicago</td>
<td>IL</td>
<td>2006</td>
<td>current</td>
</tr>
<tr>
<td>Childrens Hospital of Wisconsin</td>
<td>Milwaukee</td>
<td>WI</td>
<td>2001</td>
<td>2006</td>
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</tbody>
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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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois society of Pediatric Dentists</td>
<td>President</td>
<td>2013</td>
<td>2013</td>
</tr>
<tr>
<td>Illinois Society of Pediatric Dentists</td>
<td>President-elect</td>
<td>2012</td>
<td>2012</td>
</tr>
<tr>
<td>Illinois Society of Pediatric Dentists</td>
<td>Secretary/Treasurer</td>
<td>2011</td>
<td>2011</td>
</tr>
</tbody>
</table>

### 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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vergotine, RJ</td>
<td>A Giant cell fibroma and focal fibrous hyperplasia in a young child</td>
<td>Case reports in Dentistry</td>
<td>2012</td>
</tr>
<tr>
<td>Vergotine RJ, Koerber A</td>
<td>The relationship of dental visits to parental knowledge of management of dental trauma.</td>
<td>Pediatric Dentistry</td>
<td>2010</td>
</tr>
<tr>
<td>Vergotine RJ, Govoni B</td>
<td>Public school educator's knowledge of initial management of dental trauma</td>
<td>Dental Traumatology</td>
<td>2010</td>
</tr>
</tbody>
</table>
Name: Kapil Vij

Current Institution: UIC College of Dentistry, Pediatric Dentistry

EDUCATIONAL BACKGROUND (Begin with college level)

<table>
<thead>
<tr>
<th>Name of School, City and State</th>
<th>Yr of Grad.</th>
<th>Certificate or Degree</th>
<th>Area of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jacksonville University</td>
<td>2007</td>
<td>Certificate</td>
<td>Orthodontics</td>
</tr>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>2004</td>
<td>Master of Science</td>
<td>Sutural Biology</td>
</tr>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>1999</td>
<td>Doctor of Dentistry</td>
<td>Dentistry</td>
</tr>
<tr>
<td>University of Illinois, Chicago, Illinois</td>
<td>1997</td>
<td>Bachelor of Dentistry</td>
<td>Dentistry</td>
</tr>
<tr>
<td>University of Illinois, Champaign-Urbana, Illinois</td>
<td>1995</td>
<td>Bachelor of Science</td>
<td>Biology</td>
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LICENSURE

<table>
<thead>
<tr>
<th>License (Do not include license number)</th>
<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
<tbody>
<tr>
<td>Illinois General Dental License</td>
<td>1999</td>
<td>Present</td>
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<tr>
<td>Illinois Specialty License- Pediatric Dentistry</td>
<td>2002</td>
<td>Present</td>
</tr>
<tr>
<td>Illinois Specialty License= Orthodontics</td>
<td>2008</td>
<td>Present</td>
</tr>
<tr>
<td>Illinois Controlled Substance License</td>
<td>1999</td>
<td>Present</td>
</tr>
<tr>
<td>Illinois Dental Sedation Permit</td>
<td>2001</td>
<td>Present</td>
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BOARD CERTIFICATION

<table>
<thead>
<tr>
<th>Certifying Organization</th>
<th>Specialty</th>
<th>Date certified</th>
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<tbody>
<tr>
<td>American Board of Pediatric Dentistry</td>
<td>Pediatric Dentistry</td>
<td>09/2006</td>
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TEACHING APPOINTMENTS (Begin with current)

<table>
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<th>Name of Institution, City and State</th>
<th>Rank</th>
<th>Subjects/Content Areas Taught/ Administrative Responsibilities</th>
<th>From (Year)</th>
<th>To (Year)</th>
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</thead>
<tbody>
<tr>
<td>University of Illinois</td>
<td>Cln Ass Prof</td>
<td>Growth &amp; Dev.</td>
<td>2001</td>
<td>2013</td>
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CURRENT TEACHING RESPONSIBILITIES

<table>
<thead>
<tr>
<th>Name of Institution, City, State</th>
<th>Course Title</th>
<th>Discipline and Level of Students (Year)</th>
<th>Total Contact Hours Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Hospital</td>
<td>City</td>
<td>State</td>
<td>From (Year)</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>------------</td>
<td>-----------</td>
<td>-------------</td>
</tr>
<tr>
<td>Saint Bernard Hospital</td>
<td>Chicago</td>
<td>Illinois</td>
<td>2010</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Title</th>
<th>From (Year)</th>
<th>To (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Dental Association</td>
<td>Member</td>
<td>1999</td>
<td>Present</td>
</tr>
<tr>
<td>Chicago Dental Society</td>
<td>Member</td>
<td>1999</td>
<td>Present</td>
</tr>
<tr>
<td>Illinois State Dental Society</td>
<td>Member</td>
<td>1999</td>
<td>Present</td>
</tr>
</tbody>
</table>

**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)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Title</th>
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<th>Date</th>
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</thead>
<tbody>
<tr>
<td>None in last 5 years</td>
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Appendix J

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

<table>
<thead>
<tr>
<th>Clinic Assignment</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>S. Fadavi</td>
<td>S. Alrayyes</td>
<td>L. Lambert</td>
<td>S. Fadavi</td>
<td>R. Vergotine</td>
</tr>
<tr>
<td></td>
<td>M. Montero</td>
<td>J. M. Soh</td>
<td>R. Vergotine</td>
<td>F. Lamberghini</td>
<td>N. Hill</td>
</tr>
<tr>
<td></td>
<td></td>
<td>***</td>
<td>***</td>
<td></td>
<td>L. Lambert</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>OR* Rotation</td>
</tr>
<tr>
<td>AM</td>
<td>S. Fadavi</td>
<td>I. Seidman</td>
<td>S. Alrayyes</td>
<td>C. Garcia</td>
<td>R. Vergotine</td>
</tr>
<tr>
<td></td>
<td>M. Montero</td>
<td>J. M. Soh</td>
<td>****</td>
<td>A. Barnes</td>
<td>L. Lambert</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>S. Fadavi on Call**</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>S. Fadavi on Call**</td>
</tr>
<tr>
<td>PM</td>
<td>S. Alrayyes on Call**</td>
<td>R. Vergotine on Call**</td>
<td>S. Alrayyes on Call**</td>
<td></td>
<td>R. Vergotine</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>L. Lambert</td>
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<tr>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AM Clinic Hours:</td>
<td>9:00 a.m. to 12:30 p.m.</td>
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<tr>
<td>PM Clinic Hours:</td>
<td>1:30 p.m. to 4:30 p.m.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* 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)

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

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)

<table>
<thead>
<tr>
<th>Clinic Assignment</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
<td>S. Fadavi</td>
<td>I. Seidman</td>
<td>L. Lambert</td>
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<td>R. Vergotine on Call**</td>
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<td>S. Fadavi on Call**</td>
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<td>S. Alrayyes on Call**</td>
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<tr>
<td>AM Clinic Hours: 9:00 a.m. to 12:30 p.m.</td>
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<tr>
<td>PM Clinic Hours: 1:30 p.m. to 4:30 p.m.</td>
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</table>

* 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
<table>
<thead>
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<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
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<td>I. Seidman</td>
<td>L. Lambert</td>
<td>S. Fadavi</td>
<td>R. Vergotine</td>
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<td>M. Montero</td>
<td>S. Alrayyes</td>
<td>S. Fadavi</td>
<td>F. Lamberghini</td>
<td>N. Hill</td>
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<td></td>
<td>S. Alrayyes</td>
<td>J. M. Soh</td>
<td>**</td>
<td>G. Algenio</td>
<td>L. Lambert</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>OR* Rotation</td>
<td></td>
<td>OR* Rotation</td>
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<tr>
<td>PM</td>
<td>A. Vorachek</td>
<td>S. Alrayyes</td>
<td>R. Vergotine</td>
<td>C. Garcia</td>
<td>R. Vergotine</td>
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<tr>
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<td>J. M. Soh</td>
<td>S. Alrayyes</td>
<td>A. Barnes</td>
<td>L. Lambert</td>
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<tr>
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<td>S. Fadavi</td>
<td>**</td>
<td>***</td>
<td>R. Vergotine</td>
<td>S. Fadavi</td>
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</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Faculty:</th>
<th>Year:</th>
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### Teaching

<table>
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<tr>
<th>PG/Grad:</th>
<th>Predoc.:</th>
<th>Both:</th>
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<table>
<thead>
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<th>Lab:</th>
<th>CE:</th>
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</table>

<table>
<thead>
<tr>
<th>Appropriate</th>
<th>Needs Enhancement</th>
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<td></td>
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### Research/Scholarship

<table>
<thead>
<tr>
<th>Clinical:</th>
<th>Health Services/Public Health:</th>
<th>Behavioral/Biomedical:</th>
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<tr>
<td></td>
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<table>
<thead>
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<th>Other:</th>
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<table>
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<th>Appropriate</th>
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### Service

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### Administration

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<tbody>
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### Dept. Head comments:

<p>| |</p>
<table>
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<th></th>
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</tbody>
</table>

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:** ____________________________________________________________
<table>
<thead>
<tr>
<th>Attendance and reliability</th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comes on time, is available to students when needed, acts professional and is a role model</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
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</tbody>
</table>
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.

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Course content and provider</th>
<th>Month and Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Click here to enter text.</td>
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<td>Click here to enter text.</td>
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</tbody>
</table>

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.
Seminars and Research

DEPARTMENT    Pediatric Dentistry

LOCATION

LEVEL    Student    Resident

DATE

DIRECTIONS: Write the name of each instructor responsible for teaching you during this class or lab.*

Using the teacher behaviors listed. Rate each instructor with this scale:

5 = Excellent    4 = Very Good    3 = Good    2 = Fair    1 = Poor

N = Not applicable

Avoid letting your responses to some items influence your responses to others. Avoid under ‘COMMENT’ the specific strengths and recommendations for improvements for this teacher.

If you need more space for comments, use the reverse side of this page.

<table>
<thead>
<tr>
<th>INSTRUCTOR</th>
<th>Clear and Organized: Explains Effectively</th>
<th>Enthusiastic/ Stimulating</th>
<th>Knowledgeable/ Analytical</th>
<th>Accessible: Responds Constructively To Questions</th>
<th>Overall Teaching Effectiveness</th>
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<tr>
<td>NAME</td>
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<td>COMMENTS</td>
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APPENDIX: K-4
<table>
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<th>COMMENTS</th>
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<tbody>
<tr>
<td>NAME</td>
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<tr>
<td>COMMENTS</td>
</tr>
</tbody>
</table>
### 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).

<table>
<thead>
<tr>
<th>Facilities, Capabilities/Equipment</th>
<th>Within Clinic</th>
<th>Readily Accessible</th>
<th>Not Available</th>
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<tbody>
<tr>
<td>Intraoral radiographic facilities</td>
<td>X</td>
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<tr>
<td>Extraoral radiographic facilities</td>
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<td>Dental laboratory facilities</td>
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<td>X</td>
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<td>Operatories</td>
<td>X</td>
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<td>Staff offices</td>
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<td>Conference rooms</td>
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<td>Resuscitative equipment</td>
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<td>Distance Education Resources</td>
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<tr>
<td>(videoconferencing equipment, etc.)</td>
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# Advanced Specialty Education Program in Pediatric Dentistry

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<th>Type of Support Staff</th>
<th>Dental Assistants</th>
<th>Dental Hygienists</th>
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<th>Technical/Other (please describe)</th>
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<td></td>
<td>Total #</td>
<td>Hours/week</td>
<td>Total #</td>
<td>Hours/week</td>
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<td>Positions</td>
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<td>8</td>
<td>40 hrs/wk</td>
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Appendix N

Exhibit 6

**Students’/Residents’ Total Program Time**

Indicate the percentage of the students’/residents’ total program time devoted to:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Didactics</td>
<td>20%</td>
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<tr>
<td>Clinical activities</td>
<td>65%</td>
</tr>
<tr>
<td>Research activities</td>
<td>10%</td>
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<tr>
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APPENDIX: 0, Exhibit 7
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<th>Location</th>
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• Dental Pediatrics  
• Hospital Dentistry  
• Ped Dent Clinic Case Conference  
• Seminar on Anesthesia & Pain Control  
• Masters’ Thesis Research  
• Pediatric Dentistry Research  
• Oral Sciences II  
• Practice Administration  
• ER (Emergency Room) On Call  
• Pediatric Medicine Rotation  
• Hospital Emergency Room Rotation | UIC/COD           | • Ped. Dent Clinic Case Conference  
• Craniofacial Anomalies II  
• Pediatric Dentistry Research  
• Masters’ Thesis Research  
• Practice Administration  
• Dental Pediatrics  | UIC/COD           |
| May '12   | • Principles & Methods in Dent Res.  
• Dental Pediatrics  
• Ped Dent Clinic Case Conference  
• Seminar on Anesthesia & Pain Control  
• Masters’ Thesis Research  
• Pediatric Dentistry Research  
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• ER (Emergency Rotation) On Call  
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• Practice Administration  
• Craniofacial Anomalies II  
• Pediatric Dentistry Research  
• Masters’ Thesis Research  
• Dental Pediatrics  | UIC/COD           |
| June '12  | • Ped Dent Clinic Case Conference  
• Masters’ Thesis Research  
• Pediatric Dentistry Research  
• Radiology for the specialist  
• ER (Emergency Rotation) On Call  
• Hospital Emergency Room Rotation | UIC/COD           | • Ped. Dent Clinic Case Conference  
• Pediatric Dentistry Research  
• Masters’ Thesis Research  | UIC/COD           |
| July '12  | • Ped. Dent. Clinic Case Conference  
• Ped. Dent. Seminar  
• Advanced Ped Dentistry Tech.  
• Hospital Dentistry  
• Physical Diagnosis  
• Pediatric Dentistry Research  
• Masters’ Thesis Research  
• ER (Emergency Room) On Call  | UIC/COD           | • Ped. Dent. Clinic Case Conference  
• Advanced Ped Dentistry Tech/Growth & Dev  
• Pediatric Dentistry Research  
• Masters’ Thesis Research  | UIC/COD           |
| August ’12 | • Ped. Dent. Clinic Case Conference  
  • Ped. Dent. Seminar  
  • Advanced Ped Dentistry Tech.  
  • Hospital Dentistry  
  • Physical Diagnosis  
  • Pediatric Dentistry Research  
  • Masters’ Thesis Res. | • ER (Emergency Room) On Call | UIC/COD | • Ped. Dent. Clinic Case Conference  
  • Advanced Ped Dentistry Tech/Growth & Dev  
  • Pediatric Dentistry Research  
  • Masters’ Thesis Research | UIC/COD |
| September ’12 | • Princ. & Methods in Dental Res. 1  
  • Ped. Dent. Clinic Case Conference  
  • Ped. Dent. Seminar  
  • Advanced Ped Dent Tech  
  • Hospital Dentistry  
  • Diagnostic Procedures  
  • Biostatistics  
  • Pediatric Dentistry Research  
  • Masters’ Thesis Res  
  • Research Methodology  
  • Oral Sciences I | • ER (Emergency Room) On Call  
  • Pediatric Medicine Rotation | UIC/COD | • Ped. Dent. Clinic Case Conference  
  • Dental Pediatrics  
  • Hospital Dentistry  
  • Craniofacial Anomalies I  
  • Masters’ Thesis Research  
  • Pediatric Dentistry Research  
  • Temporomandibular Disorders  
  • Oral Pathology | UIC/COD |
| October ’12 | • Princ. & Methods in Dental Res. 1  
  • Ped. Dent. Clinic Case Conference  
  • Ped. Dent. Seminar  
  • Advanced Ped Dent Tech  
  • Hospital Dentistry  
  • Diagnostic Procedures  
  • Biostatistics  
  • Pediatric Dentistry Research  
  • Masters’ Thesis Res  
  • Research Methodology  
  • Oral Sciences I | • ER (Emergency Room) On Call  
  • Pediatric Medicine Rotation  
  • Anesthesiology Rotation | UIC/COD | • Ped. Dent. Clinic Case Conference  
  • Craniofacial Anomalies I  
  • Masters’ Thesis Research  
  • Pediatric Dentistry Research  
  • Temporomandibular Disorders  
  • Oral Pathology | UIC/COD |
Residents’ Schedule for January 1, 2012 to January 31, 2013

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<td><strong>Princ. &amp; Methods in Dental Res. I</strong>&lt;br&gt;<strong>Ped. Dent. Clinic Case Conference</strong>&lt;br&gt;<strong>Ped. Dent. Seminar</strong>&lt;br&gt;<strong>Advanced Ped Dent Tech</strong>&lt;br&gt;<strong>Hospital Dentistry</strong>&lt;br&gt;<strong>Diagnostic Procedures</strong>&lt;br&gt;<strong>Biostatistics</strong>&lt;br&gt;<strong>Pediatric Dentistry Research</strong>&lt;br&gt;<strong>Masters’ Thesis Res</strong>&lt;br&gt;<strong>Research Methodology</strong>&lt;br&gt;<strong>Oral Sciences I</strong></td>
<td><strong>ER (Emergency Room) On Call</strong>&lt;br&gt;<strong>Pediatric Medicine Rotation</strong>&lt;br&gt;<strong>Anesthesiology Rotation</strong></td>
<td><strong>Ped. Dent. Clinic Case Conference</strong>&lt;br&gt;<strong>Craniofacial Anomalies I</strong>&lt;br&gt;<strong>Masters’ Thesis Research</strong>&lt;br&gt;<strong>Pediatric Dentistry Research</strong>&lt;br&gt;<strong>Temporo- mandibular Disorders</strong>&lt;br&gt;<strong>Oral Pathology</strong></td>
<td><strong>ER (Emergency Room) On Call</strong>&lt;br&gt;<strong>Ped. Dent. Clinic Case Conference</strong>&lt;br&gt;<strong>Craniofacial Anomalies I</strong>&lt;br&gt;<strong>Masters’ Thesis Research</strong>&lt;br&gt;<strong>Pediatric Dentistry Research</strong>&lt;br&gt;<strong>Temporo- mandibular Disorders</strong>&lt;br&gt;<strong>Oral Pathology</strong></td>
<td><strong>Principles &amp; Methods in Dent Res. II</strong>&lt;br&gt;<strong>Ped Dent Clinic Case Conference</strong>&lt;br&gt;<strong>Seminar on Anes &amp; Pain Control</strong>&lt;br&gt;<strong>Masters’ Thesis Research</strong>&lt;br&gt;<strong>Pediatric Dentistry Research</strong>&lt;br&gt;<strong>Oral Sciences II</strong></td>
<td><strong>ER (Emergency Room) On Call</strong>&lt;br&gt;<strong>Ped. Dentistry Case Conference</strong>&lt;br&gt;<strong>Craniofacial Anomalies II</strong>&lt;br&gt;<strong>Pediatric Dentistry Research</strong>&lt;br&gt;<strong>Masters’ Thesis Research</strong>&lt;br&gt;<strong>Pediatric Dentistry</strong></td>
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## Residents’ Schedule for January 1, 2012 to January 31, 2013

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<td>Anesthesiology Rotation</td>
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</table>
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• Dental Pediatrics  
• Ped Dent Clinic Case Conference  
• Seminar on Anesthesia & Pain Control  
• Masters’ Thesis Research  
• Pediatric Dentistry Research  
• Oral Sciences II  
• Practice Administration | UIC/COD                  | • ER (Emergency Rotation) On Call  
• Hospital Emergency Room Rotation | UIC/COD                  | • ER (Emergency Room) On Call  
• Craniofacial Rotation | UIC/COD                  |
| June ‘13 | • Ped Dent Clinic Case Conference  
• Masters’ Thesis Research  
• Pediatric Dentistry Research  
• Radiology for the specialist | UIC/COD                  | • ER (Emergency Rotation) On Call  
• Hospital Emergency Room Rotation | UIC/COD                  | • ER (Emergency Room) On Call | UIC/COD                  |
| July ‘13 | • Ped. Dent. Clinic Case Conference  
• Ped. Dent. Seminar  
• Advanced Ped Dentistry Tech.  
• Hospital Dentistry  
• Physical Diagnosis  
• Pediatric Dentistry Research  
• Masters’ Thesis Research | UIC/COD                  | • ER (Emergency Room) On Call | UIC/COD                  | • ER (Emergency Room) On Call | UIC/COD                  |
| August ‘13 | • Ped. Dent. Clinic Case Conference  
• Ped. Dent. Seminar  
• Advanced Ped Dentistry Tech.  
• Hospital Dentistry  
• Physical Diagnosis  
• Pediatric Dentistry Research  
• Masters’ Thesis Research | UIC/COD                  | • ER (Emergency Room) On Call | UIC/COD                  | • ER (Emergency Room) On Call | UIC/COD                  |
 Residents’ Schedule for January 1, 2012 to January 31, 2013

| August '12          | • Ped. Dent. Clinic Case Conference  
|                     | • Ped. Dent. Seminar  
|                     | • Advanced Ped Dentistry Tech.  
|                     | • Hospital Dentistry  
|                     | • Physical Diagnosis  
|                     | • Pediatric Dentistry Research  
|                     | • Masters’ Thesis Res.  
|                     | • ER (Emergency Room) On Call  
|                     | UIC /COD  
|                     | • Ped. Dent. Clinic Case Conference  
|                     | • Advanced Ped Dentistry Tech/Growth & Dev  
|                     | • Pediatric Dentistry Research  
|                     | • Masters’ Thesis Research  
|                     | UIC /COD  
|                     | • ER (Emergency Room) On Call  
| Sept. '12           | • Princ. & Methods in Dental Res. 1  
|                     | • Ped. Dent. Clinic Case Conference  
|                     | • Ped. Dent. Seminar  
|                     | • Advanced Ped Dentistry Tech  
|                     | • Hospital Dentistry  
|                     | • Diagnostic Procedures  
|                     | • Biostatistics  
|                     | • Pediatric Dentistry Research  
|                     | • Masters’ Thesis Res  
|                     | • Research Methodology  
|                     | • Oral Sciences I  
|                     | • ER (Emergency Room) On Call  
|                     | • Pediatric Medicine Rotation  
|                     | UIC /COD  
|                     | • Ped. Dent. Clinic Case Conference  
|                     | • Dental Pediatrics  
|                     | • Hospital Dentistry  
|                     | • Craniofacial Anomalies I  
|                     | • Masters’ Thesis Research  
|                     | • Pediatric Dentistry Research  
|                     | • Temporomandibular Disorders  
|                     | • Oral Pathology  
|                     | UIC /COD  
|                     | • ER (Emergency Room) On Call  
| October '13         | • Princ. & Methods in Dental Res. 1  
|                     | • Ped. Dent. Clinic Case Conference  
|                     | • Ped. Dent. Seminar  
|                     | • Advanced Ped Dentistry Tech  
|                     | • Hospital Dentistry  
|                     | • Diagnostic Procedures  
|                     | • Biostatistics  
|                     | • Pediatric Dentistry Research  
|                     | • Masters’ Thesis Res  
|                     | • Research Methodology  
|                     | • Oral Sciences I  
|                     | • ER (Emergency Room) On Call  
|                     | • Pediatric Medicine Rotation  
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|                     | • Ped. Dent. Clinic Case Conference  
|                     | • Craniofacial Anomalies I  
|                     | • Masters’ Thesis Research  
|                     | • Pediatric Dentistry Research  
|                     | • Temporomandibular Disorders  
|                     | • Oral Pathology  
|                     | UIC /COD  
|                     | • ER (Emergency Room) On Call  
|                     | APPENDIX: 0, Exhibit 7 |
## Residents’ Schedule for January 1, 2012 to January 31, 2013

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<th>Dec. '13</th>
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| • Princ. & Methods in Dental Res. 1  
  • Ped. Dent. Clinic Case Conference  
  • Ped. Dent. Seminar  
  • Advanced Ped Dent Tech  
  • Hospital Dentistry  
  • Diagnostic Procedures  
  • Biostatistics  
  • Pediatric Dentistry Research  
  • Masters’ Thesis Res  
  • Research Methodology  
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  • Ped. Dent. Clinic Case Conference  
  • Ped. Dent. Seminar  
  • Advanced Ped Dent Tech  
  • Hospital Dentistry  
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  • Biostatistics  
  • Pediatric Dentistry Research  
  • Masters’ Thesis Res  
  • Research Methodology  
  • Oral Sciences I  | • Princ. & Methods in Dental Res. 1  
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  • Pediatric Medicine Rotation  
  • Anesthesiology Rotation  | • ER (Emergency Room) On Call  
  • Pediatric Medicine Rotation  
  • Anesthesiology Rotation  |
| UIC /COD | UIC /COD | UIC /COD |
| • Ped. Dent. Clinic Case Conference  
  • Dental Pediatrics  
  • Hospital Dentistry  
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  • Oral Pathology  | • Ped. Dent. Clinic Case Conference  
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  • Masters’ Thesis Research  
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  • Oral Pathology  | • Ped. Dent. Clinic Case Conference  
  • Craniofacial Anomalies I  
  • Masters’ Thesis Research  
  • Pediatric Dentistry Research  
  • Temporo- mandibular Disorders  
  • Oral Pathology  |
Appendix P
Exhibit 8

Biomedical sciences

Are students/residents required to take formal courses?

- 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.

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Year Offered</th>
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<td>Pediatric Dentistry</td>
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<td>OSCI580, Advanced Oral Sciences I</td>
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<tr>
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<td>1 &amp; 2</td>
<td>1-16</td>
<td>Pediatric Dentistry</td>
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<tr>
<td>PEDD600, Advanced Pediatric Dent Tech /</td>
<td>1 &amp; 2</td>
<td>3</td>
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<td>Growth and Development</td>
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<td>PEDD621, Hospital Dentistry</td>
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<td>ORTD524, Craniofacial Anomalies I</td>
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<td>1 &amp; 2</td>
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APPENDIX: P, Exhibit 8
## Appendix Q

### Schedule of department seminars, conferences and/or lectures

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Residents</th>
<th>Semester</th>
<th>Days / Hours</th>
<th>Mode of Instruction (Seminar, Conf. and/or Lectures, etc.)</th>
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<tr>
<td>PEDD 595, Pediatric Dental Seminar</td>
<td>1</td>
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<td>PEDD 501, Dental Pediatrics</td>
<td>1 or 2</td>
<td>Spring (every other year)</td>
<td>Tue / Wed. 12:30 – 1:30 pm</td>
<td>Seminar &amp; Lecture</td>
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<tr>
<td>PEDD 410, Principle &amp; Methods in Dental Research I</td>
<td>1 &amp; 2</td>
<td>Fall</td>
<td>Thur / 8:00am – 9:00am</td>
<td>Seminar</td>
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<td>PEDD 411, Principle &amp; Methods in Dental Res II</td>
<td>1 &amp; 2</td>
<td>Spring</td>
<td>Thur / 8:00am – 9:00am</td>
<td>Seminar</td>
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<tr>
<td>OSCI 594, Statistics for Dental Residents</td>
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<td>Lecture</td>
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<tr>
<td>OSCI 451, Research Methodology</td>
<td>1</td>
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<td>Tue / 4:30 – 6:00 pm</td>
<td>Seminar, Conf. &amp; Lecture</td>
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<tr>
<td>OSCI 580, Advanced Oral Sciences I</td>
<td>1 &amp; 2</td>
<td>Fall (every other year)</td>
<td>Thur / 4:30 – 6:00 pm</td>
<td>Seminar, Conf. &amp; Lecture</td>
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<tr>
<td>OSCI 581, Advanced Oral Sciences II</td>
<td>1 &amp; 2</td>
<td>Spr (every other year)</td>
<td>Thur / 4:30 – 6:00 pm</td>
<td>Seminar, Conf. &amp; Lecture</td>
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<tr>
<td>OSCI 598, Master’s Thesis Research</td>
<td>1 &amp; 2</td>
<td>Fall, Spr, Sum</td>
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<tr>
<td>PEDD 620, Pediatric Dent Clinic/Case Conf</td>
<td>1 &amp; 2</td>
<td>Fall, Spr, Sum</td>
<td>Wed / 8:00 – 9:30 Am</td>
<td>Journal club, rounds and seminars</td>
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<tr>
<td>PEDD 673, Pediatric Physical Diagnosis</td>
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</tr>
<tr>
<td>PEDD 698, Research in Pediatric Dentistry</td>
<td>1 &amp; 2</td>
<td>Fall, Spr, Sum</td>
<td>Flexible</td>
<td>One-to-one mentoring</td>
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<td>PEDD600, Advanced Pediatric Dent Tech / Growth and Development</td>
<td>1 &amp; 2</td>
<td>Fall, Spr, Sum</td>
<td>2 x/mon. &amp; Wed / 10:30 – 4:30 pm</td>
<td>Seminar, conf., lecture and pre-clinical techniques</td>
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<td>PEDD 615, Practice Admin in Pediatric Dent</td>
<td>1 &amp; 2</td>
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<td>Variable</td>
<td>Seminar, lectures and private practice observation visits</td>
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<tr>
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<td>Summer</td>
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<td>and Fall</td>
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<td>OMDS 617</td>
<td>Radiology for Dental Specialists 1 &amp; 2</td>
<td>1 &amp; 2</td>
<td>Spring/Summer</td>
<td>Variable</td>
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The description of these courses and related schedules are provided in the next pages.

APPENDIX: Q 2
### Craniofacial Development: Of Molecules and Proteins

<table>
<thead>
<tr>
<th>#</th>
<th>Topic</th>
<th>Speaker</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Introduction: Craniofacial Growth and Development</td>
<td>Tom Diekwisch, UIC Brodie</td>
<td>Sep 6</td>
</tr>
<tr>
<td>2</td>
<td>Amelogenin - Biography of an Enamel Matrix Protein</td>
<td>Tom Diekwisch, UIC Brodie</td>
<td>Sep 13</td>
</tr>
<tr>
<td>3</td>
<td>Signaling Pathways Regulating Craniofacial Development</td>
<td>David Clouthier, University of Colorado Denver</td>
<td>Sep 20</td>
</tr>
<tr>
<td>4</td>
<td>Student Presentations I</td>
<td>Ortho Residents</td>
<td>Sep 27</td>
</tr>
<tr>
<td>5</td>
<td>Student Presentations II</td>
<td>Ortho Residents and Ph.D. students</td>
<td>Oct 4</td>
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### Bone Development and Regeneration

<table>
<thead>
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<th>#</th>
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<tbody>
<tr>
<td>6</td>
<td>Biological Minerals as Templates for New Biomaterials</td>
<td>David Kohn, University of Michigan</td>
<td>Oct 18</td>
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<tr>
<td>7</td>
<td>Type I Collagen - An Old Protein with New Faces</td>
<td>Mitsuo Yamauchi, UNC Chapel Hill</td>
<td>Oct 25</td>
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<td>8</td>
<td>Student Presentations III</td>
<td>Pedo Residents</td>
<td>Nov 1</td>
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<tr>
<td>9</td>
<td>Platelet-rich Fibrin (PRF) in Periodontal Regeneration:</td>
<td>Qi Li, UIC Brodie Lab &amp; Jilin University</td>
<td>Nov 8</td>
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<tr>
<td></td>
<td>Tissue-Specific Mechanisms and Clinical Outcomes</td>
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### Enamel and Periodontal Tissue Engineering

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<tbody>
<tr>
<td>10</td>
<td>Ameloblastin - A Matrix Protein</td>
<td>Xianghong Luan, UIC Brodie</td>
<td>Nov 15</td>
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<td>11</td>
<td>Student Presentations IV/ Review</td>
<td>Endo and Prosthodontal Residents</td>
<td>Nov 29</td>
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<td>12</td>
<td>Enamel Tissue Engineering</td>
<td>Masaki Honda, Nihon University</td>
<td>Dec 6</td>
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<td>13</td>
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<td>Perio and Prosthodontal Residents</td>
<td>Dec 13</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Xianghong Luan, UIC Brodie</td>
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DIAGNOSIS AND TREATMENT PLANNING
Tuesdays @ 12:30-1:30 in the Gerlach Seminar Room
Course Directors: Dr. Rodney Vergotine and Dr. Sahar Alrayyes

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
2. Pinkham, JR. Pediatric Dentistry Infancy Through Adolescence, 3rd Edition

Course Schedule

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>07/09/2013</td>
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<td>07/23/2013</td>
<td>Dental Home</td>
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<td>Patient’s Bill of Rights and Responsibilities</td>
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<td>Work Force issues and Delivery of Oral Health Care Services in a dental Home</td>
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<td>Role of Pediatric Dentists as Both Primary and Specialty Care Providers</td>
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<tr>
<td>07/30/2013</td>
<td>Special Health Care Needs</td>
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<tr>
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<td>Management of Dental patients With special Health Care Needs</td>
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<td>Model Dental Benefits for Infants, Adolescents, and individuals with special health Care needs</td>
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<td>Transitioning from a Pediatric-Centered Dental Home to an Adult-Centered Dental Home for Individuals with special Health Care Needs</td>
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<td>Oral and Dental Aspects of Child Abuse and neglect</td>
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<td>08/13/2013</td>
<td>Early Childhood Caries (ECC): Classification, consequence, and preventive Strategies</td>
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<td>Early Childhood Caries (ECC): Unique Challenges and treatment options</td>
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<td>08/20/2013</td>
<td>Caries Risk assessment and management for infants, children, and adolescents.</td>
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<td>Dietary Recommendations for infants, Children, and adolescents.</td>
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<td>Recommended food intake Patterns</td>
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<td>Topics</td>
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| 08/27/2013   | • Periodicity of examination, preventive dental services, anticipatory Guidance and oral Tx for infants Children, and adolescents  
                • Prescribing Dental Radiographs for infants, adolescents, and persons with Special Health care needs |
| 09/03/2013   | • Role of Dental prophylaxis in Pediatric Dentistry  
                • Fluoride Therapy  
                • Xylitol Use in caries prevention  
                • Infant Oral Health Care |
| 09/10/2013   | • Record Keeping  
                • Informed Consent |
| 09/17/2013   | • Behavior Guidance for the Pediatric Dental Patient  
                • Use of local anesthesia for Pediatric Dental Patient  
                • Use of Nitrous Oxide for Pediatric Dental patients  
                • Minimizing Occupational Health Hazards associated with Nitrous Oxide |
| 09/24/2013   | • Preparing for your Child’s Sedation visit  
                • Sedation Record  
                • Monitoring and management of Pediatric Patients during and after sedation for diagnostic and therapeutic procedures  
                • Use of Anesthesia Personnel in the administration of office-based deep sedation/General Anesthesia |
| 10/01/2013   | • Assessment of acute traumatic injury  
                • Emergency oral care for infants, children and adolescents  
                • Management of acute dental trauma  
                • Decision tree for management of an avulsed permanent tooth |
| 10/08/2013   | • Prevention of Sports-related Orofacial injuries  
                • Use of Bleaching for Child and Adolescent Patients  
                • Pain Management |
| 10/15/2013   | • Pediatric Restorative Dentistry  
                • Pulp Therapy for primary and immature Permanent teeth  
                • Interim Therapeutic Restoration (ITR) |
| 10/22/2013   | • Pediatric Oral surgery  
                • Post-operative Instructions for extractions/oral surgery |
| 10/29/2013   | • Use of Antibiotics Therapy for Pediatric Dental Patients  
                • Antibiotic Prophylaxis for patients at risk of infection |
| 11/05/2013   | • Dental Management of Pediatric Patients Receiving Chemotherapy, hematopoietic Cell Transplantation, and/or Radiation |
| 11/12/2013   | • Management of Patients with Cleft Lip/Palate and Other Craniofacial Anomalies |
| 11/19/2013   | • Management of the developing Dentition and occlusion in Pediatric Dentistry |
| 11/26/2013   | • Adolescent Oral Health Care  
                • Tobacco Use  
                • Intraoral/Perioral piercing and oral Jewelry/Accessories |
| 12/03/2013   | • Perinatal Oral Health care  
                • Oral Health care for pregnant Adolescent |
<p>| 12/10/2013   | • Periodontal Diseases of Children and Adolescent |</p>
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<th>Topic</th>
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| 12/17/2013   | • Periodontal Therapy  
               • Treatment of Plaque induced gingivitis, chronic Periodontitis, and other clinical conditions |
| 12/17/2013   | • Oral Health Care/Dental management of Heritable Dental developmental Anomalies  
               • Acquired Temporomandibular Disorders in Infants, Children, and Adolescents |
<p>| 12/24/2013   | • No Class                                                           |
| 12/31/2014   | • No Class                                                           |
| 01/07/2014   | • Case Presentation                                                 |
| 01/14/2014   | • Case Presentation                                                 |
| 01/21/2014   | • Case Presentation                                                 |
| 01/28/2014   | • Case Presentation                                                 |
| 02/04/2014   | • Case Presentation                                                 |
| 02/11/2014   | • Case Presentation                                                 |
| 02/18/2014   | • Case Presentation                                                 |
| 02/25/2014   | • Case Presentation                                                 |
| 03/04/2014   | • Case Presentation                                                 |</p>
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<td>Malocclusion/ X-bite</td>
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<td>Space loss/ Ectopic Eruption</td>
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<td>02/07/2013</td>
<td>Oral Medicine Formulary</td>
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<td>02/14/2013</td>
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Graduate Oral Pathology OMDS 503

Faculty Contact Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
<th>Phone</th>
<th>Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Sara Gordon</td>
<td><a href="mailto:gordonsa@uic.edu">gordonsa@uic.edu</a></td>
<td>312-996-1104</td>
<td>525B</td>
</tr>
<tr>
<td>Dr Joel Schwartz</td>
<td><a href="mailto:joschwar@uic.edu">joschwar@uic.edu</a></td>
<td>312-355-4311</td>
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</table>

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%       B = 80-89%       F = Below 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 be 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


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) and from the publisher BC Decker (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/~oprm/AtlasHome.html

Oral Pathology Web Cases - www.uiowa.edu/~oprm/webcase/

University of Southern California School of Dentistry Oral Pathology - www.usc.edu/hsc/dental/opfs/index.html

Dermatology Internet Service (DermIS) - www.dermis.net/index_e.htm

WebPath: The Internet Pathology Laboratory from the University of Utah - medstat.med.utah.edu/WebPath/webpath.html#MENU


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

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.

Course Rubric: OMDS/ Oral Medicine and Diagnostic Sciences
Primary Unit: 1965/ Oral Medicine and Diagnostic Science
Course Number: 621/617
Course Version: 1

COURSE TITLE: Radiology for the Specialist

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

ALIAS COURSE(S):
None

EXPECTED REGISTRATION:
Professional programs. (100%)

Type of course:
Requirement for the following programs: certificate

Relationship to other courses offered by primary unit:
Compliments Advanced Oral Pathology I, II and diagnostic courses.
Relationship of this course to similar courses offered by other academic units:
Compliments pathology and diagnostic courses.

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.

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

EVALUATION CRITERIA FOR STUDENT PERFORMANCE:
Literature review/written paper – 100%

PREREQUISITE(S):
Enrollment in a certificate program in the College of Dentistry/Medicine

RECOMMENDED BACKGROUND: DDS/DMD/Medical degree
CREDIT HOURS:
1 hour.

TYPE OF INSTRUCTION:
<table>
<thead>
<tr>
<th>Type of Instruction</th>
<th>Contact Hours/Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discussion</td>
<td>1</td>
</tr>
</tbody>
</table>

FACULTY PROPOSER(S): Richard Monahan

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

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 in the Dental Office; Dionne, Phero & Beck
Basics of Anesthesia; Stoelting
Seminar handouts

Credit hours: 1 hour
### OMDS 615 (2012)

<table>
<thead>
<tr>
<th>Topic</th>
<th>Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction to hypnosis</td>
<td>Dr. Anne Koerber (TBA)</td>
</tr>
<tr>
<td>Pre-anesthesia evaluation</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Introduction to Nitrous Oxide sedation</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Sedative hypnotics</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Narcotics</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Oral Sedation</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Monitoring in anesthesia</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Dynamics of office-based anesthesia guidelines for patient selection and regulatory issues</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Anesthesia emergencies</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Overview of analgesics</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Inhalation anesthetics</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Principles of Dental local anesthesia</td>
<td>Dr. Z. Messieha</td>
</tr>
<tr>
<td>Anesthesia and sedation for the special needs patient</td>
<td>Dr. Z. Messieha</td>
</tr>
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</table>
# SCHEDULE – Fall 2012

Department of Orthodontics, COD Room 138 (Ricketts Room)
Tuesdays from 7:30am to 8:30am

<table>
<thead>
<tr>
<th>Tuesday</th>
<th>09/04/2012</th>
<th>7:30-8:30am</th>
<th>Lec. 1</th>
<th>7:30-8am Course Overview, Organization and Expectations Introduction to the Craniofacial Team</th>
<th>Dr. Doa Dada</th>
</tr>
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<tbody>
<tr>
<td>Tuesday</td>
<td>09/11/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 2</td>
<td>Genetics and Genetic Counseling</td>
<td>Richard T. Dineen</td>
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<tr>
<td>Tuesday</td>
<td>09/18/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 3</td>
<td>Embryology, Etiology, Pathogenesis, Anatomy and Classification of Cleft Lip and Palate.</td>
<td>Dr. Phimon Atsawasuwan</td>
</tr>
<tr>
<td>Tuesday</td>
<td>09/25/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 4</td>
<td>Craniofacial Growth Psychological Considerations</td>
<td>Dr. Doa Dada Dr. Shella Raja</td>
</tr>
<tr>
<td>Tuesday</td>
<td>10/02/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 5</td>
<td>Cleft Infant Procedures</td>
<td>Dr. Sheldon Rosenstein</td>
</tr>
<tr>
<td>Tuesday</td>
<td>10/09/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 6</td>
<td>Surgical Management of Cleft Lip and Palate</td>
<td>Dr. Jason Jamali</td>
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<tr>
<td>Tuesday</td>
<td>10/16/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 7</td>
<td>Alveolar Bone Grafting</td>
<td>Dr. Michael Miloro</td>
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<tr>
<td>Tuesday</td>
<td>10/23/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 8</td>
<td>Cleft Orthognathic Surgery</td>
<td>Dr. Jason Jamali</td>
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<tr>
<td>Tuesday</td>
<td>10/30/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 9</td>
<td>Orthodontic Considerations</td>
<td>Dr. Carla Evans</td>
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<tr>
<td>Tuesday</td>
<td>11/06/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 10</td>
<td>Residents’ Presentations</td>
<td>Residents</td>
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<tr>
<td>Tuesday</td>
<td>11/13/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 11</td>
<td>The Child with Birth Defect</td>
<td>Dr. Indru Punwani</td>
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<tr>
<td>Tuesday</td>
<td>11/20/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 12</td>
<td>Nasoalveolar Molding</td>
<td>Dr. Emily Williams</td>
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<tr>
<td>Tuesday</td>
<td>11/27/2012</td>
<td>7:30-8:30am</td>
<td>Lec. 13</td>
<td>Facial Prosthetics</td>
<td>Dr. George Syros</td>
</tr>
<tr>
<td>Tuesday</td>
<td>12/04/2012</td>
<td>7:30-8:30am</td>
<td>Lect 14</td>
<td>Long-term Orthodontic Outcomes for Cleft Patients</td>
<td>Dr. Sheldon Rosenstein</td>
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<tr>
<td>Tuesday</td>
<td>12/11/2012</td>
<td>7:30-8:30am</td>
<td>Lect 15</td>
<td>Final Exam</td>
<td></td>
</tr>
</tbody>
</table>

Appendix Q
## ORTD 615 - Fall semester, 2013
### DIAGNOSTIC PROCEDURES

<table>
<thead>
<tr>
<th>Day</th>
<th>Date</th>
<th>Time</th>
<th>Seminar #</th>
<th>Topic</th>
<th>Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesday</td>
<td>Aug 13</td>
<td>8:30-12:30</td>
<td>1</td>
<td>Clinic Charts, Photography, Social/Medical/Dental History, Clinical Exam</td>
<td>Kusnoto</td>
</tr>
<tr>
<td>Thursday</td>
<td>Aug 15</td>
<td>1:30-4:30</td>
<td>2, 4</td>
<td>Introduction to Digital Cephalometric Landmarks</td>
<td>Kusnoto</td>
</tr>
<tr>
<td>Monday</td>
<td>Aug 19</td>
<td>1:30-4:30</td>
<td>2</td>
<td>Introduction to Cephalometrics and Landmarks Downs Analysis</td>
<td>Manasse</td>
</tr>
<tr>
<td>Thursday</td>
<td>Aug 22</td>
<td>9:30-12:30</td>
<td>11/17</td>
<td>Special Diagnostic Considerations/Treatment Objectives/Problem List Development</td>
<td>Evans</td>
</tr>
<tr>
<td>Monday</td>
<td>Aug 26</td>
<td>9:30-12:30</td>
<td>3/15</td>
<td>Proportional Analyses Anthropometrics, Natural Head Position, Reference Planes</td>
<td>Evans</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Aug 27</td>
<td>2:30-4:30</td>
<td>5</td>
<td>Dental Cast Analysis, Occlusogram</td>
<td>Kusnoto/Galang</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Aug 28</td>
<td>9:30-12:30</td>
<td>6, 9</td>
<td>Cephalometric Analysis (Tweed, Steiner, Holdaway) Cephalometric Analysis (ABO, Wits)</td>
<td>Taha</td>
</tr>
<tr>
<td>Friday</td>
<td>Aug 30</td>
<td>9:30-4:30</td>
<td>18a, b</td>
<td>Computerized Cephalometrics (+ lab session)</td>
<td>Kusnoto</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Sep 3</td>
<td>9:30-12:30</td>
<td>14b</td>
<td>Advanced Cephalometric Anatomy</td>
<td>Yue</td>
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<tr>
<td>Tuesday</td>
<td>Sep 10</td>
<td>9:30-12:30</td>
<td>7</td>
<td>Soft Tissue Analysis</td>
<td>Tsay</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Sep 10</td>
<td>2:30-4:30</td>
<td>22</td>
<td>ABO Scoring</td>
<td>Doa/Masoud Manasse</td>
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<tr>
<td>Wednesday</td>
<td>Sep 11</td>
<td>9:30-12:30</td>
<td>10</td>
<td>Introduction to Bioprogressive and Ricketts Cephalometric Analysis</td>
<td>Sanchez / Opperman</td>
</tr>
<tr>
<td>Thursday</td>
<td>Sep 12</td>
<td>9:30-12:30</td>
<td>19/20</td>
<td>Ricketts Analysis + Introduction to VTO</td>
<td>Sanchez / Opperman</td>
</tr>
<tr>
<td>Thursday</td>
<td>Sep 19</td>
<td>9:30-12:30</td>
<td>12a, b</td>
<td>Dental Age/Hand-Wrist Films/Cervical Vertebrae</td>
<td>Handelman/Eltink</td>
</tr>
<tr>
<td>Thursday</td>
<td>Sep 26</td>
<td>9:30-12:30</td>
<td>16</td>
<td>Ceph Superimpositions</td>
<td>Lippincott</td>
</tr>
<tr>
<td>Friday</td>
<td>Oct 4</td>
<td>1:30-4:30</td>
<td>21</td>
<td>Digital Cephalometric Superimpositions/ Pitchfork Analysis</td>
<td>Kusnoto</td>
</tr>
<tr>
<td>Friday</td>
<td>Oct 11</td>
<td>1:30-4:30</td>
<td>14a</td>
<td>Frontal/Basilar Radiographs</td>
<td>Kusnoto</td>
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<tr>
<td>Wednesday</td>
<td>Oct 23</td>
<td>9:30-12:30</td>
<td>23</td>
<td>3D Diagnosis and Treatment Planning</td>
<td>Kusnoto</td>
</tr>
</tbody>
</table>
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:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sept. 4</td>
<td>Course Overview/Writing an Abstract</td>
<td>Dr. G. Adami</td>
</tr>
<tr>
<td>Sept. 11</td>
<td>On-line literature Search Meets in Library Library of the Health Sciences, Room 303</td>
<td>Abigail Goben</td>
</tr>
<tr>
<td>Sept. 18</td>
<td>Electronic Patient Records</td>
<td>Dr. R. Rada</td>
</tr>
<tr>
<td>Sept. 25</td>
<td>Overview of Statistics</td>
<td>G. Adami</td>
</tr>
<tr>
<td>Oct. 2</td>
<td>Dental Materials Now and the Future</td>
<td>Dr. A. Bedran-Russo</td>
</tr>
<tr>
<td>Oct. 9</td>
<td>Human Research/IRB protocol approval</td>
<td>Dr. I. Punwani</td>
</tr>
<tr>
<td>Oct. 16</td>
<td>Usage of animals in research</td>
<td>G. Adami</td>
</tr>
<tr>
<td>Oct. 23</td>
<td>Critical Reading of the Literature Part 1</td>
<td>Dr. J. Crawford</td>
</tr>
<tr>
<td>Oct. 30</td>
<td>Critical Reading of the Literature Part 2, Abstract Due</td>
<td>G. Adami</td>
</tr>
<tr>
<td>Nov. 6</td>
<td>Human Research/IRB protocol approval</td>
<td>Dr. I. Punwani</td>
</tr>
<tr>
<td>Nov. 13</td>
<td>Dental Surgery Now and the Future</td>
<td>Dr. E. Collins</td>
</tr>
<tr>
<td>Nov. 20</td>
<td>Behavioral Science and Dentistry</td>
<td>Dr. A. Koerber</td>
</tr>
<tr>
<td>Nov. 27</td>
<td>Review, Diagnostics, Clinical Trials</td>
<td>G. Adami</td>
</tr>
<tr>
<td>Dec. 11</td>
<td>Final Exam, Submit 3 page proposal</td>
<td>G. Adami</td>
</tr>
</tbody>
</table>
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 specifics 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 filing up space by replacing the tooth - will this reduce loss of adjacent teeth versus teeth at other positions?

Example 2.

Observation: TGF-β and other growth factors are required for proliferation of gingival epithelial cells in cell culture.

1. TGF-β is required for efficient healing after periodontal surgery.

3. Growth factors are required for efficient healing after periodontal surgery.

3. Elevated levels of TGF-β 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-ß affects healing rates after periodontal surgery using a rabbit model, we will follow up surgery with the application of TGF-ß 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-fluouracil 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\(^{\text{INK4a}}\) 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\(^{\text{INK4a}}\) will be constructed and used to express p16\(^{\text{INK4a}}\) 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

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

Charles W. LeHew (Pedo), Room 563B, Tel: 312 355-4479; lehew@uic.edu

Brad Johnson (Endo), Room 302A, Tel: 312 996-8519; bjohnson@uic.edu

Grace Viana (Ortho), Room 109B, Tel: 312 996-1810; gviana@uic.edu

Ellen BeGole (Ortho), Room 237A, Tel: 312 996-1812; ebegole@uic.edu

Judy Yuan (Pros), Room 304, Tel: 312-355-4856; 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:


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 4th 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](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](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:**

<table>
<thead>
<tr>
<th>Week(s)</th>
<th>Design of Research and Experiments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Hypothesis Testing and Error</td>
</tr>
<tr>
<td>2</td>
<td>Data Entry and Exploratory Data Analysis</td>
</tr>
<tr>
<td>3-4</td>
<td>Categorical Data and Chi-Square</td>
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<tr>
<td>5-6</td>
<td>Hypothesis Testing Applied to Means</td>
</tr>
<tr>
<td>7-8</td>
<td>Non-Parametric Tests</td>
</tr>
<tr>
<td>11-12</td>
<td>Repeated Measures</td>
</tr>
<tr>
<td>13-14</td>
<td>Correlation and Regression</td>
</tr>
<tr>
<td>15</td>
<td>Review (Assignment)</td>
</tr>
</tbody>
</table>

**2012 Assignment Schedule:**

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<tr>
<th>Week(s)</th>
<th>Receive assignment (Friday) - 7am</th>
<th>Assignment due (generally Tuesday) - 5pm</th>
<th>Comment due (Friday 5pm)</th>
<th>Points</th>
<th>Assignment Done By…</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>8/24</td>
<td>8/31 (Fri)</td>
<td>NA</td>
<td>NA</td>
<td>Individual</td>
</tr>
<tr>
<td>2</td>
<td>8/31</td>
<td>9/7 (Fri)</td>
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<td>/5</td>
<td>Individual</td>
</tr>
<tr>
<td>3-4</td>
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<td>10/5</td>
<td>/10</td>
<td>Pair</td>
</tr>
<tr>
<td>7-8</td>
<td>10/5</td>
<td>10/16</td>
<td>10/19</td>
<td>/10</td>
<td>Pair</td>
</tr>
<tr>
<td>9-10</td>
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<td>/10</td>
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<td>11/30</td>
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<td>Pair</td>
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<tr>
<td>15</td>
<td>11/30</td>
<td>12/7 (Fri)</td>
<td>NA</td>
<td>/5</td>
<td>Individual</td>
</tr>
<tr>
<td>16</td>
<td>Final Exam</td>
<td></td>
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*Appendix Q*
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:


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 4th 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.

**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
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 4th 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

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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.

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)
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 Rubenfeld – Sleep apnea
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
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
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
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.
<table>
<thead>
<tr>
<th>Session Number</th>
<th>Session Date</th>
<th>Topic /Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>June 26</td>
<td>Band loop, lower lingual holding arch fabrication lab and soldering exercises</td>
</tr>
<tr>
<td>2</td>
<td>July 10</td>
<td>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</td>
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<tr>
<td>3</td>
<td>July 24</td>
<td>Identifying normal from abnormal growth. Identifying the various classifications of dental occlusion. Skeletal and dental malocclusion</td>
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<tr>
<td>4</td>
<td>Aug. 7</td>
<td>Discuss eruption guidance and space supervision during developing dentition Appliances</td>
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<tr>
<td>5</td>
<td>Aug. 21</td>
<td>Growth modification and dental compensation for skeletal problems.</td>
</tr>
<tr>
<td>6</td>
<td>Sept. 4</td>
<td>Basic biomechanical principles and the biology of tooth movement.</td>
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<tr>
<td>7</td>
<td>Sept. 18</td>
<td>Diagnosis of dental, skeletal, and functional abnormalities in the primary, mixed, and young permanent</td>
</tr>
<tr>
<td>8</td>
<td>Oct. 2</td>
<td>Treatment of abnormalities that can be corrected or significantly improved by evidence-based early interventions: eruption guidance, space supervision, and interceptive orthodontic treatments.</td>
</tr>
<tr>
<td>9</td>
<td>Oct. 16</td>
<td>Transverse and dimensional problems involving simple posterior crossbites.</td>
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<tr>
<td>10</td>
<td>Nov. 13</td>
<td>Anterior crossbite discrepancies associated with localized dentoalveolar crossbite displacement and functional anterior shifts – Pseudo-Class III</td>
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<tr>
<td>11</td>
<td>Nov. 27</td>
<td>Anterior spacing with or without dental protrusion</td>
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<tr>
<td>Dec. 11</td>
<td>Ectopic Eruption, ankylosis, and tooth impaction problems</td>
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<td>Dec. 18</td>
<td>Effects of supernumerary (e.g. mesiodens) and /or missing teeth</td>
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<td>Jan. 8</td>
<td>Types of Expansion</td>
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<td>Types of Expanders?</td>
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<td>Jan. 22</td>
<td>Crash Course Review: Expanders: Hyrax, Bonded Expander, Quad Helix,</td>
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<td>W-Arch, Frankel, Herbst,</td>
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<td>Feb. 5</td>
<td>Elastomerics Review: Ties, Rubber Bands</td>
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<tr>
<td>Feb. 19</td>
<td>Expansion Overview: Appliances Part I</td>
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<td>Mar. 5</td>
<td>Class II Correctors</td>
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<td>Tanaka Johnson Analysis</td>
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<td>Mar. 19</td>
<td>Problem List</td>
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<td>Expansion- Appliances</td>
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<td>Anterior X-Bite</td>
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<td>Apr. 2</td>
<td>Class II Malocclusion and Tx</td>
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<td>Apr. 23</td>
<td>Class III Malocclusion and Tx</td>
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<tr>
<td></td>
<td>Class II Correctors: Overview</td>
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<tr>
<td>May 7</td>
<td>Proffit Ch. 2</td>
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<tr>
<td>May 28</td>
<td>Proffit Ch. 3</td>
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<tr>
<td>Jun 4</td>
<td>Downs Analysis</td>
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<td>Jun 18</td>
<td>Steiner Analysis, Wits Analysis</td>
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<tr>
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<td>Dolphin Imaging: How to trace Ceph</td>
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</table>

**REFERENCES**

# Speakers’ Schedule

<table>
<thead>
<tr>
<th>Speaker</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Lance Lambert</td>
<td>Wednesday January 11(^{th}), 2012</td>
<td>12:00 – 1:00 pm</td>
</tr>
<tr>
<td>Ms. Elain Pesavento</td>
<td>Thursday January 19(^{th}), 2012</td>
<td>12:00 – 1:30 pm</td>
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<tr>
<td>Dr. Ricardo Mendoza</td>
<td>Monday January 23(^{rd}), 2012</td>
<td>4:30 – 5:30 pm</td>
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<tr>
<td>Ms. Elain Pesavento</td>
<td>Thursday January 26(^{th}), 2012</td>
<td>12:00 – 1:30 pm</td>
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<tr>
<td>Dr. Flavia Lamberghini</td>
<td>Thursday February 2(^{nd}), 2012</td>
<td>12:00 – 1:00 pm</td>
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<tr>
<td>Dr. Nicky Hill-Cordell</td>
<td>Wednesday February 8(^{th}), 2012</td>
<td>12:00 – 1:30 pm</td>
</tr>
<tr>
<td>Dr. Mary Hayes</td>
<td>Wednesday February 15(^{th}), 2012</td>
<td>4:30 – 5:30 pm</td>
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<tr>
<td>Dr. Denise Fisher</td>
<td>Monday February 27(^{th}), 2012</td>
<td>4:30 – 5:30 pm</td>
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<tr>
<td>Dr. Angela Kalb</td>
<td>Thursday March 15(^{th}), 2012</td>
<td>12:00 – 1:00 pm</td>
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<tr>
<td>Dr. Steven Kuhn</td>
<td>Friday March 16(^{th}), 2012</td>
<td>8:00 – 9:00 am</td>
</tr>
<tr>
<td>Dr. Cissy Furusho</td>
<td>Wednesday April 18(^{th}), 2012</td>
<td>1:00 – 2:00 pm</td>
</tr>
</tbody>
</table>
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

* 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.
10. Solo vs. group practice, clinical location selection, hiring and managing of employees.
11. Equipment and office design.
12. Rotations to two different offices.
## Private Practice Rotations

<table>
<thead>
<tr>
<th>Resident</th>
<th>Practice #1</th>
<th>Practice #2</th>
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</table>
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.
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.

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


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


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.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
<th>Presenter</th>
<th>Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/11</td>
<td>9:00 – 12:00pm</td>
<td>Orientation to course.</td>
<td>Vergotine</td>
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<tr>
<td></td>
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<td>Laboratory tests, values and interpretation</td>
<td>Vergotine</td>
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<tr>
<td>7/18</td>
<td>9:00 – 12:00pm</td>
<td>Seizure Disorders</td>
<td>Singh</td>
<td>Vergotine</td>
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<td>Bleeding Disorders</td>
<td>Whittington</td>
<td>Vergotine</td>
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<td>7/25</td>
<td>12:00 – 01:00pm</td>
<td>Attention Deficit Disorders</td>
<td>Khan</td>
<td>Vergotine</td>
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<td>8/01</td>
<td>9:00 – 12:00pm</td>
<td>Hospital Dentistry protocol and procedures</td>
<td>Lambert</td>
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<tr>
<td>8/08</td>
<td>9:00 – 10:30</td>
<td>Heavy metal poisoning</td>
<td>Davis</td>
<td>Lambert</td>
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<tr>
<td>Date</td>
<td>Time</td>
<td>Topic</td>
<td>Speaker</td>
<td>Location</td>
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<tr>
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<td>Congenital Heart disease</td>
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<td>Asthma</td>
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<td>Departmental meeting</td>
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<td>Orthodontic class</td>
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<td>9/05</td>
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<td>Emergency room protocol</td>
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<td>Cystic Fibrosis</td>
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<tr>
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<td>Fragile X syndrome</td>
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<td>Vergotine</td>
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<tr>
<td>9/12</td>
<td>09:00 – 10:30</td>
<td>Cleft lip and Palate</td>
<td>KHAN</td>
<td>Lambert</td>
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<tr>
<td>9/19</td>
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<td>Pediatric transplant patient</td>
<td>POPEJOY</td>
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<td>Spina Bifida</td>
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<td>9/26</td>
<td>09:00 – 10:30</td>
<td>Diabetes</td>
<td>SINGH</td>
<td>Lambert</td>
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<td>10/03</td>
<td>09:00 – 12:00 pm</td>
<td>Child Abuse and neglect</td>
<td>KHAN</td>
<td>Vergotine</td>
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<td>Hearing and Visually impaired children</td>
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<td>Vergotine</td>
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<td>10/10</td>
<td>09:00 – 10:30</td>
<td>PKU and other metabolic diseases</td>
<td>DAVIS</td>
<td>Lambert</td>
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<td>09:00 – 12:00 pm</td>
<td>Down syndrome</td>
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<td>Pediatric Oncology patient</td>
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<td>09:00 – 10:30</td>
<td>Mucopolysaccharioid disorders</td>
<td>SINGH</td>
<td>Lambert</td>
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<td>10/31</td>
<td>09:00 – 12:00</td>
<td>Scoliosis</td>
<td>KHAN</td>
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<td>Hydrocephalus</td>
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<td>11/7</td>
<td>09:00 – 10:30</td>
<td>Cerebral Palsy</td>
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<td>Autism spectrum disorders</td>
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<td>Prader Willi syndrome</td>
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<td>11/28</td>
<td>09:00 – 10:30</td>
<td>Angelman’s syndrome</td>
<td>SINGH</td>
<td>Lambert</td>
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<tr>
<td>12/5</td>
<td>09:00 - 12:00 pm</td>
<td>Childhood depression</td>
<td>KHAN</td>
<td>Vergotine</td>
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<td>Goldenhar syndrome</td>
<td>GRAY</td>
<td>Vergotine</td>
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</table>
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.
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.
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:


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.
## Off-Service Assignments

<table>
<thead>
<tr>
<th>NAME OF SERVICE</th>
<th>YEAR ASSIGNED</th>
<th>LENGTH OF ASSIGNMENT</th>
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<tbody>
<tr>
<td>Anesthesiology</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; year</td>
<td>4 continuous weeks</td>
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<tr>
<td>Pediatric Medicine</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; year</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Operating Room</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; and 2&lt;sup&gt;nd&lt;/sup&gt; years</td>
<td>2 days a week for the entire two years of residency</td>
</tr>
<tr>
<td>Inpatient Care</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; and 2&lt;sup&gt;nd&lt;/sup&gt; years</td>
<td>Variable (as needed)</td>
</tr>
<tr>
<td>Emergency Room (On Call)</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; and 2&lt;sup&gt;nd&lt;/sup&gt; years</td>
<td>On-call rotations shared between 1&lt;sup&gt;st&lt;/sup&gt; and 2&lt;sup&gt;nd&lt;/sup&gt; year residents</td>
</tr>
<tr>
<td>Hospital Emergency Room Rotation</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; years</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Pediatric Patients with Special Health Care Needs</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; and 2&lt;sup&gt;nd&lt;/sup&gt; years</td>
<td>Rotation to Habilitation Center is included during Residents’ Pediatric Medicine Rotation</td>
</tr>
</tbody>
</table>

### Other (specify)

For each assignment listed above, attach a sheet providing the following information:

(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

<table>
<thead>
<tr>
<th>Name of Service</th>
<th>Anesthesiology</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objectives</strong></td>
<td>Gain proficiency in airway management, especially in the management of airway of the unconscious pediatric patient, and in the use of positive pressure ventilation.</td>
</tr>
<tr>
<td><strong>Duties of Residents</strong></td>
<td>Participate and perform general anesthesia activities</td>
</tr>
<tr>
<td><strong>Training Received</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Required Lectures/Seminars and Conferences</strong></td>
<td>Yes, residents attend daily anesthesia rounds and seminars.</td>
</tr>
<tr>
<td><strong>Required Participation</strong></td>
<td>Yes.</td>
</tr>
<tr>
<td><strong>Faculty Supervision</strong></td>
<td>Attending anesthesiologists on service.</td>
</tr>
<tr>
<td><strong>Evaluation of Residents</strong></td>
<td>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.</td>
</tr>
</tbody>
</table>
Appendix R

Exhibit 9.2 Pediatric Medicine

<table>
<thead>
<tr>
<th>Name of Service</th>
<th>Pediatric Medicine Rotation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives</td>
<td>To have residents gain knowledge and experience in pediatric medicine.</td>
</tr>
<tr>
<td>Duties of Residents</td>
<td>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.</td>
</tr>
<tr>
<td>Training Received</td>
<td>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.</td>
</tr>
<tr>
<td>Required Lectures/Seminars and Conferences</td>
<td>This is achieved through the residents’ round with medical students and residents throughout their rotation and participation in on-going medical seminars.</td>
</tr>
<tr>
<td>Required Participation</td>
<td>Residents participate in on-going seminars and grand rounds.</td>
</tr>
<tr>
<td>Faculty Supervision</td>
<td>Department of Pediatrics subspecialty directors</td>
</tr>
<tr>
<td>Evaluation of Residents</td>
<td>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.</td>
</tr>
</tbody>
</table>
Appendix R

<table>
<thead>
<tr>
<th>Name of Service</th>
<th>Operating Room Rotation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives</td>
<td>To provide residents with clinical experiences and knowledge to function as healthcare providers in hospital-based operating room setting.</td>
</tr>
<tr>
<td>Duties of Residents</td>
<td>Residents perform full mouth dental rehabilitation care for children in the operating room setting.</td>
</tr>
<tr>
<td>Training Received</td>
<td>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.</td>
</tr>
<tr>
<td>Required Lectures/Seminars and Conferences</td>
<td>Yes</td>
</tr>
<tr>
<td>Required Participation</td>
<td>Yes</td>
</tr>
<tr>
<td>Faculty Supervision</td>
<td>Sahar Alrayyes, DDS; Shar Fadavi, DDS, MS; Lance Lambert, DDS, MS; Marilia Montero-Fayad, DDS; Indru Punwani, DDS, MS; Rodney Vergotine, DDS, MS</td>
</tr>
<tr>
<td>Evaluation of Residents</td>
<td>Residents are assessed by the supervising attending faculty and through the end-of-the-semester formal evaluation by the attending faculty.</td>
</tr>
</tbody>
</table>
Appendix R

Exhibit 9.4 Inpatient Care

<table>
<thead>
<tr>
<th>Name of Service</th>
<th>Inpatient Care Rotation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives</td>
<td>To provide the residents with experiences in inpatient care including the evaluation and medical management of pediatric patients admitted to the hospital.</td>
</tr>
<tr>
<td>Duties of Residents</td>
<td>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.</td>
</tr>
<tr>
<td>Training Received</td>
<td>Clinical experiences in management and evaluation of pediatric patients.</td>
</tr>
<tr>
<td>Required Lectures/Seminars and Conferences</td>
<td>No.</td>
</tr>
<tr>
<td>Required Participation</td>
<td>Yes.</td>
</tr>
<tr>
<td>Faculty Supervision</td>
<td>Attending physician</td>
</tr>
<tr>
<td>Evaluation of Residents</td>
<td>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.</td>
</tr>
</tbody>
</table>
Appendix R

<table>
<thead>
<tr>
<th>Name of Service</th>
<th>Emergency Care Rotation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives</td>
<td>To provide the residents with competency in the assessment and management of orofacial trauma, dental pain and infections.</td>
</tr>
<tr>
<td>Duties of Residents</td>
<td>Treat trauma and other dental emergencies.</td>
</tr>
<tr>
<td>Training Received</td>
<td>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.</td>
</tr>
<tr>
<td>Required Lectures/Seminars and Conferences</td>
<td>No.</td>
</tr>
<tr>
<td>Required Participation</td>
<td>Yes.</td>
</tr>
<tr>
<td>Faculty Supervision</td>
<td>Yes.</td>
</tr>
<tr>
<td>Evaluation of Residents</td>
<td>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.</td>
</tr>
</tbody>
</table>
Exhibit 9.6 Hospital Emergency Room Rotation

<table>
<thead>
<tr>
<th>Name of Service</th>
<th>Hospital Emergency Room Rotation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives</td>
<td>To provide the residents with experience in the emergency room beyond regular dental emergency duties.</td>
</tr>
<tr>
<td>Duties of Residents</td>
<td>Participate in the management of medical emergencies along with pediatric residents in the emergency room setting.</td>
</tr>
<tr>
<td>Training Received</td>
<td>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.</td>
</tr>
<tr>
<td>Required Lectures/Seminars and Conferences</td>
<td>No.</td>
</tr>
<tr>
<td>Required Participation</td>
<td>Yes.</td>
</tr>
<tr>
<td>Faculty Supervision</td>
<td>Pediatric emergency room physician.</td>
</tr>
<tr>
<td>Evaluation of Residents</td>
<td>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.</td>
</tr>
</tbody>
</table>
Appendix R

Exhibit 9.7 Pediatric Patients with Special Health Care Needs

<table>
<thead>
<tr>
<th>Name of Service</th>
<th>Pediatric Patients with Special Health Care Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives</td>
<td>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.</td>
</tr>
<tr>
<td>Duties of Residents</td>
<td>Participate in the oral assessment and discussion of the management and delivery of necessary dental procedures for pediatric patients with special health care needs.</td>
</tr>
<tr>
<td>Training Received</td>
<td>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.</td>
</tr>
<tr>
<td>Required Lectures/Seminars and Conferences</td>
<td>No.</td>
</tr>
<tr>
<td>Required Participation</td>
<td>Yes.</td>
</tr>
<tr>
<td>Faculty Supervision</td>
<td>Attending physician/dentist</td>
</tr>
<tr>
<td>Evaluation of Residents</td>
<td>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.</td>
</tr>
</tbody>
</table>
Appendix S

Exhibit 10

Admissions

Provide the following information about the primary and affiliated hospitals:

<table>
<thead>
<tr>
<th>A. Number of hospital beds</th>
<th>Primary Hospital</th>
<th>Affiliated Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>507</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Number of beds assigned to pediatric section</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Med Ped Beds: 38; Ped ICU:12 Ped Stepdown: 6</td>
</tr>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Number of elective operating half-days per week assigned to pediatric section</th>
</tr>
</thead>
<tbody>
<tr>
<td>4*</td>
</tr>
</tbody>
</table>

* 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):

<table>
<thead>
<tr>
<th>A. Number of pediatric patients admitted:</th>
</tr>
</thead>
<tbody>
<tr>
<td>140 – 150</td>
</tr>
</tbody>
</table>

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

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

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

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

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-orofacial 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.
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 _____

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 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-tonsilar 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

Subject Area: **ORAL PATHOLOGY**  
Year Offered: **2**

- Indicate how instruction is provided in this subject area:
  
  ________ Dental department seminar, conference, lecture program
  
  ________ 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 ______
  
  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 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, pathogeneses, 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.
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:

  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: 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.
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:
  
  X Dental department seminar, conference, lecture program
  X Formal course—Title:
      PEDD 595 – Ped Dent Seminar
      PEDD 615 – Practical Admin in Ped Dent
      PEDD 620 – Ped Dent Clinic/Case Conference

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- 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.

  - 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.
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).

- 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 X**
  
  b. predoctoral medical students/residents? **Yes 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

Subject Area: Recognition, treatment and management of pharmacologic-related emergencies

Year Offered: 1 & 2

- Indicate how instruction is provided in this subject area:

  X️ Dental department seminar, conference, lecture program
  X️ Formal course—Title:

  PEDD 595 – Ped Dent Seminar
  PEDD 501 – Dental Pediatrics
  PEDD 621 – Hospital Dentistry
  PEDD 620 – Ped Dent Clinic/Case Conference

  ❌ X️ Off-service rotation to Anesthesia

  ❌ X️ 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.
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**

- 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 _____
  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:**
  
  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.
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.
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.
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.
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

Subject Area: **Growth and Development**  
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**
  **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.
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:

   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.
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:
  
  ___ 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.
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.
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.
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.
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.
Subject Area: The Epidemiology of oral diseases encountered in Infants, children and adolescents, including those with special health needs including prevalence and severity.

- 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 or 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.
Subject Area: **Oral diseases of hard and soft tissue encountered in infants, children and adolescents including those pediatric patients with special health care needs.**

- 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**

- 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

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.
Subject Area: **Gingival, Periodontal and other mucosal disorders 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
    - 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
Subject Area: Treatment of common oral diseases in infants, children, and adolescent

- 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.
Subject Area: Ordering and performing uncomplicated biopsies and adjunctive diagnostic tests including exfoliative cytology, microbial cultures and other commercially available tests.

- 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.
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.
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

  X Off-service rotation to:

  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

Subject Area: **Scientific basis for the prevention of dental caries, periodontal and pulpal diseases, traumatic injuries, and developmental anomalies**

- 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 615 – Diagnostic Procedures I
  OMDS 503 – Graduate Oral Pathology
  
  _________ Off-service rotation to:
  
  ___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.
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.
Subject Area: The effects of proper diet nutrition
fluoride therapy and sealants In the prevention of oral disease.

- 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______
  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 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.
Subject Area: **Perinatal oral health and infant oral health**

Year Offered: 1 & 2

**Supervision.**

- 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.
Subject Area: **Scientific principles, techniques, and treatment planning for the prevention of oral diseases including diet management, chemotherapeutics and other approaches.**

- 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: **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.
**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.
Subject Area: Dental health education programs, Year Offered: 1 & 2
materials and personnel to assist in the delivery of preventive care.

- 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: 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.
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.
Subject Area: **Diagnosis of periodontal diseases of childhood and adolescence, treatment and/or refer cases of periodontal disease to 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

- Off-service rotation to:
  - 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.
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.
Clinical Area: **Are clinical experiences of sufficient scope, volume and variety to enable residents to achieve competency in applications of preventive clinical practices.**

- 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.
Subject Area: **Restorative and prosthetic techniques** and dental materials for the primary, mixed and permanent detention.

- Indicate how instruction is provided in this subject area:
  - X 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:
  - 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.
**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.**

- 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:
  
  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: 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.
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.
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.
Clinical Area: **Diagnosis and treatment planning** for infants, children, adolescents and those with special health care needs.

- 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 I
    - PEDD 620 – Ped Dent Clinic/case conference
    - PEDD 621 – Hospital Dentistry
  - 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 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

Clinical Area: **Provision of comprehensive dental care**

Year Offered: **1 & 2**

to infants, children, adolescents and those with special health care needs in a manner consistent with the dental home.

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.
Subject Area: **The design, implementation and management**

of a contemporary practice of pediatric dentistry,

emphasizing business skills for proper and efficient practice.

- 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
  - **X** 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 **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 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

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.

Subject Area: **Use of computers in didactic, clinical and research endeavors, as well as in practice management.**

- 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:
  - 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:
  - 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.
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

- 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.
Subject Area: Working cooperatively with consultants and clinicians in other dental specialties and health fields.

• 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**

  ___ X____ Off-service rotation to:

  ___ X____ Other (specify): Consulting with other specialties (Oral pathology, Orthodontics, Oral and Maxillo-facial surgery, Periodontics, Endodontic and Prosthodontics, ENT)

  ___ X____ 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

Subject Area: **Formulation of Treatment Plans for Patients with Special Health Care Needs**

- Indicate how instruction is provided in this subject area:
  - X Dental department seminar, conference, lecture program
  - X Formal course—Title:
    - PEDE 595 – Ped Dent Seminar
    - PEDE 501 – Dental Pediatrics
    - PEDE 620 – Ped Dent Clinic/case conference
    - PEDE 621 – Hospital Dentistry

- Off-service rotation to:
  - X 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.
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 syndrome
- 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

Subject Area: Management of the oral health of patients with special health care needs, i.e.: medically 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.
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.

- 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 11a – 2.8e

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
  - X 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

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

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

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.
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**

- 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
  - X 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:** 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.
Subject Area: Management of pulpal and periradicular tissues in the primary and developing permanent 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

  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 periradicular 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

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.

- 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
  ORTD 524&525 – Craniofacial I & II
  
  _____ Off-service rotation to: Pediatrics and Children Habilitation center
  
  _____ 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 craniodentofacial anomalies and providing care in collaboration with speech and communication therapists
- Fundaments 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.
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.

- **X** Dental department seminar, conference, lecture program
- **X** Formal course—Title:
  - PEDD 501 – Dental Pediatrics
  - PEDD 620 – Ped Dent Clinic/Case Conference
  - PEDD 673 – Pediatric Physical diagnosis
  - PEDD 621 – Hospital Dentistry
- **X** Off-service rotation to: **Pediatrics, Anesthesia, Emergency department**
- **X** 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 [**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 train the resident in the fundamental of pediatric medicine including (a) developmental disabilities; (b) genetic/metabolic disorders; (c) infectious disease; (d) sensory impairments; and (c) 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.
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.

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.
Subject Area:  **Federally and state funded programs like Medicaid and SCHIP that provide dental care to poor populations.**

- **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:**  
  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.
Subject Area: **Principles of Education**  
**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:** 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 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:**
Address ways to interact with organized dentistry and policy makers.

**Effectiveness:**
New part of the curriculum - In the process of evaluation of effectiveness.
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. Salzmann, 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**

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<th>Course Code</th>
<th>Course Title</th>
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<td>PEDD 595</td>
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<td>PEDD 698</td>
<td>Research in Pediatric Dentistry</td>
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<tr>
<td>PEDD 600</td>
<td>Advanced Pediatric Dentistry Techniques/Growth and Development</td>
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<td>PEDD 620</td>
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<td>Hospital Dentistry</td>
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<tr>
<td>PEDD 673</td>
<td>Physical Diagnosis</td>
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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
## Program Curriculum

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<td>OSCI 580, Advanced Oral Sciences I</td>
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<td>Oral Sciences</td>
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<td>PEDD 620, Pediatric Dent Clinic/Case Conf</td>
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<td>PEDD 673, Pediatric Physical Diagnosis</td>
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<tr>
<td>PEDD 698, Research in Pediatric Dentistry</td>
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<td>ORTD 524, Craniofacial Anomalies I</td>
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<td>Orthodontics</td>
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<td>Oral Med &amp; Diag Sc</td>
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<tr>
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<td>Oral Med &amp; Diag Sc</td>
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To change the look of your survey, select a theme below.

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TITLE & LOGO

Edit Title

Resident evaluations

1. Resident evaluation

Q1

1. Faculty

- Alrayyes
- Barnes
- Fadavi
- Hill-Cordell
- Koerber
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**Overall grade**

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<tr>
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### Performance

Overall grade: A+

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<th>Overall grade</th>
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<tbody>
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<th>Documentation and QA</th>
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### Q3

[EditQuestion]

[Move][Copy][Delete]

3. Didactic Performance

A+   A   A-
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<td>Rotation participation</td>
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<td>4. Professionalism</td>
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<td>Cooperation</td>
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<td>*Professionalism Cooperation E</td>
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<tr>
<td>Reliability</td>
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<tr>
<td>Communication skills</td>
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<td>Communication skills Excellent</td>
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</table>
5. This resident can be promoted to the second year.

- Yes
- No

Please provide details if you answered "NO".

6. Please provide comments that can be shared with the resident to improve their performance.
Back to My Surveys
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

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, 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, 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, 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. Salzmann, 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. Seldman, DDS, Clinical Assistant Professor*
• Jin-Moon Soh, DDS, MS, Clinical Assistant 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

Program Type

University-based Certificate
Degree Elective / available

Program Director

Full-Time
Board Certified

Program Faculty

11 Full-Time
9 Part-Time
14 Board Certified

Program Length

24 Total Months
July 1 Start Date

Program Accreditation

Approved

Start Licensure

Restricted License
Available

Number of entering positions

9

Salary/Stipend

$49,440 First Year
$51,180 Second Year

Application Deadline

October 1

Participant in National Matching Service

Yes

Participant in PASS

Yes

Only US citizens from ADA accredited dental schools considered

Yes

US citizens from foreign dental schools

No
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<thead>
<tr>
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<tr>
<td>Non-US citizens from ADA accredited dental schools considered</td>
<td>No</td>
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<td>Non-US citizens from foreign dental schools considered</td>
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<td>Acceptance/Applicant Ratio</td>
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<td>Research Requirement</td>
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<td>Orthodontics</td>
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<tr>
<td>Literature Review</td>
<td></td>
</tr>
<tr>
<td>Courses</td>
<td></td>
</tr>
<tr>
<td>Case Conferences</td>
<td></td>
</tr>
<tr>
<td>Data Collection Project</td>
<td></td>
</tr>
<tr>
<td>1 Clinic Half-Days</td>
<td></td>
</tr>
<tr>
<td>Yes Lecture/Presentations</td>
<td></td>
</tr>
<tr>
<td>24 Chair/Operatories</td>
<td></td>
</tr>
<tr>
<td>4 Clinic Receptionist</td>
<td></td>
</tr>
<tr>
<td>10 Dental Assistants</td>
<td></td>
</tr>
</tbody>
</table>
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 â€“ 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 â€“ 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**

| Monday  
June 17th  | Tuesday  
June 18th  | Wednesday  
June 19th  | Thursday  
June 20th  | Friday  
June 21st  | Saturday  
June 22nd |
|-------------|-------------|-------------|-------------|-------------|-------------|
| **Must have a I-Card before attending orientation**  
Wednesday, June 19th  
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.  
**8:30am**  
Coffee & Bagels with PG’s  
Department of Pediatric Dentistry  
801 S. Paulina  
Room 230B Gerlach Room  
**9:00am – 12:00 Noon**  
1st I-Card Photo  
Student Residence Hall, Student Center West (SCW)  
828 S. Wolcott Ave, Room 241 312-413-5944  
2nd Health Service  
835 S. Wolcott Ave.  
(main entrance)  
*Health screen  
*Respirator Fit  
**1:00 – 4:00 PM**  
Procedural Skills Assessment  
Graham Clinical Performance Center (GCPC) in the Medical Sciences Building at  
835 S. Wolcott, Rm. E116  
**7:00am – 5:00 PM**  
UI Hospital Orientation  
MM Thompson Rooms ABC  
Student Center West  
828 S. Wolcott Ave.  
Lab Coat Distributed at end of day  
**7:00am – 5:30 PM**  
GME Orientation  
MM Thompson Rooms ABC Second Floor  
Student Center West  
828 S. Wolcott Ave.  
Bring I-Card, Driver’s License, Checkbook if you need  
Lab Coats distributed at end of day  
**8:30am – 12:00 Noon**  
AAPD Inservice Exam  
**1:30pm**  
Complete I-9’S with GME |

**PALS Course August 17th & August 18th, 2013**
<table>
<thead>
<tr>
<th>Monday June 24th</th>
<th>Tuesday June 25th</th>
<th>Wednesday June 26th</th>
<th>Thursday June 27th</th>
<th>Friday June 28th</th>
<th>Saturday June 29th</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>8:30am - 9:00am</strong></td>
<td>Welcome to the Department of Pediatric Dentistry Dr. Punwani Dr. Seidman Dr. Soh Dr. Vergotine Dr. Koerber Dr. Alrayyes Gerlach Room 230B</td>
<td><strong>9:00am - 11:00am</strong></td>
<td>Introduction to the Program Dr. Punwani Dr. Alrayyes Dr. Vergotine</td>
<td><strong>9:00am - 5:00pm</strong></td>
<td>College of Dentistry Orientation</td>
</tr>
<tr>
<td><strong>9:00am - 11:00am</strong></td>
<td>Introduction to the Program Dr. Punwani Dr. Alrayyes Dr. Vergotine</td>
<td><strong>10:00am - 12:00pm</strong></td>
<td>Introduction to Orthodontics Dr. Vij/Dr. Vergotine Gerlach Conference Rm 230B</td>
<td></td>
<td>EMR Training (Powerchart) UIC Room 1300 (room next to cafeteria) University of Illinois Medical Center at Chicago</td>
</tr>
<tr>
<td><strong>11:00am - 12:00pm</strong></td>
<td>ER Orientation Dr. Whittington Dr. Alrayyes</td>
<td></td>
<td></td>
<td></td>
<td>801 S. Paulina Room 501</td>
</tr>
<tr>
<td><strong>1:00pm - 1:45pm</strong></td>
<td>Clinic Orientation Dr. Alrayyes</td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>1:45pm - 2:30pm</strong></td>
<td>Front Desk Orientation Ms. Sachen-Brown Dr. Alrayyes</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**PALS Course** August 17th & August 18th, 2013
<table>
<thead>
<tr>
<th>Monday July 1st</th>
<th>Tuesday July 2nd</th>
<th>Wednesday July 3rd</th>
<th>Thursday July 4th</th>
<th>Friday July 5th</th>
<th>Saturday July 6th</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 a.m.-10:30 a.m.</td>
<td>8:00 a.m. -10:30 a.m. OR - Orientation</td>
<td>Ms. Rovina Lerio</td>
<td>UI Medical Center Surgery, Third Fl.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinic Orientation</td>
<td></td>
<td>10:30 a.m. -12:00 p.m. GA Orientation</td>
<td>Dr. Gray/Dr. Popejoy/Dr. Singh</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dr. Alrayyes</td>
<td>Review Clinic Manual</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10:30 a.m. - 12:00 p.m. Clinic Observation</td>
<td></td>
<td>1:00 p.m. - 3:00 p.m. AxiUm Orientation and Q and A</td>
<td>Dr. Gray Dr. Alrayyes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*12:00 - 1:00 p.m. Luncheon All PG’s invited</td>
<td></td>
<td>3:00 p.m. - 4:30 p.m. Q and A Orientation</td>
<td>Dr. Whittington Dr. Alrayyes</td>
<td></td>
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</tr>
<tr>
<td>1:00- 4:00 Clinic Observation</td>
<td></td>
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</table>

PALS Course August 17th & August 18th, 2013
<table>
<thead>
<tr>
<th>Day</th>
<th>Monday 08</th>
<th>Tuesday 09</th>
<th>Wednesday 10</th>
<th>Thursday 11</th>
<th>Friday 12</th>
<th>Saturday 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 a.m. - 9:30 a.m.</td>
<td>Research Orientation</td>
<td>9:00 a.m. - 12:00 p.m.</td>
<td>8:00 - 9:00 a.m.</td>
<td>9:00 - 4:30 p.m.</td>
<td>GA Rotation</td>
<td></td>
</tr>
<tr>
<td>Dr. Koerber</td>
<td>Dr. Koerber</td>
<td>Dr. Koerber</td>
<td>Dr. Alrayyes</td>
<td>Clinic</td>
<td>Clinic</td>
<td></td>
</tr>
<tr>
<td>9:30 a.m. - 12:00 p.m. Clinic</td>
<td>1:00-4:30 p.m. Clinic</td>
<td>Orthodontics Rounds</td>
<td>Clinic</td>
<td>Clinic</td>
<td>Clinic</td>
<td></td>
</tr>
<tr>
<td>Dr. Seidman</td>
<td>Dr. Seidman</td>
<td>Dr. Alrayyes</td>
<td>Dr. Lambert</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td></td>
</tr>
<tr>
<td>1:00-4:30 p.m. Clinic</td>
<td>1:00-4:30 p.m. Clinic</td>
<td>Dr. Fadavi</td>
<td>Dr. Vergotine</td>
<td>Dr. Vergotine</td>
<td>Dr. Vergotine</td>
<td></td>
</tr>
<tr>
<td><strong>1:00-4:30 p.m. Clinic</strong></td>
<td><strong>1:00-4:30 p.m. Clinic</strong></td>
<td>Gerlach Conference Room</td>
<td>Gerlach Conference Room</td>
<td>Gerlach Conference Room</td>
<td>Gerlach Conference Room</td>
<td></td>
</tr>
<tr>
<td><strong>1:00-4:30 p.m. Clinic</strong></td>
<td><strong>1:00-4:30 p.m. Clinic</strong></td>
<td>(230B)</td>
<td>(230B)</td>
<td>(230B)</td>
<td>(230B)</td>
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</tr>
<tr>
<td><strong>9:00 - 10:00 a.m.</strong></td>
<td><strong>9:00 - 10:00 a.m.</strong></td>
<td><strong>9:00 - 10:00 a.m.</strong></td>
<td><strong>9:00 - 10:00 a.m.</strong></td>
<td><strong>9:00 - 10:00 a.m.</strong></td>
<td><strong>9:00 - 10:00 a.m.</strong></td>
<td></td>
</tr>
<tr>
<td>Introduction to Hospital Dentistry</td>
<td>Introduction to Hospital Dentistry</td>
<td>Introduction to Orthodontics</td>
<td>Introduction to Orthodontics</td>
<td>Introduction to Orthodontics</td>
<td>Introduction to Orthodontics</td>
<td></td>
</tr>
<tr>
<td>Dr. Vergotine/Dr. Lambert</td>
<td>Dr. Vergotine/Dr. Lambert</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td></td>
</tr>
<tr>
<td>10:00 a.m. - 12:00 p.m.**</td>
<td>1:00 - 10:00 a.m. **</td>
<td>1:30 - 4:30 p.m. **</td>
<td>1:00 - 10:00 a.m. **</td>
<td>1:30 - 4:30 p.m. **</td>
<td>1:00 - 10:00 a.m. **</td>
<td></td>
</tr>
<tr>
<td>Introduction to Orthodontics</td>
<td>Introduction to Orthodontics</td>
<td>Orthodontics Orientation / Lab</td>
<td>Orthodontics Orientation / Lab</td>
<td>Orthodontics Orientation / Lab</td>
<td>Orthodontics Orientation / Lab</td>
<td></td>
</tr>
<tr>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td>Dr. Vij</td>
<td></td>
</tr>
<tr>
<td><strong>PALS Course August 17th &amp; August 18th, 2013</strong></td>
<td><strong>PALS Course August 17th &amp; August 18th, 2013</strong></td>
<td><strong>PALS Course August 17th &amp; August 18th, 2013</strong></td>
<td><strong>PALS Course August 17th &amp; August 18th, 2013</strong></td>
<td><strong>PALS Course August 17th &amp; August 18th, 2013</strong></td>
<td><strong>PALS Course August 17th &amp; August 18th, 2013</strong></td>
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</tr>
</tbody>
</table>
The PALS Course
will be held on

*Saturday, August 17, 2013*
8:00 am to 4:30 pm

*and*

*Sunday, August 18, 2013*
8:00 am to 1:30 pm

Pediatric Dentistry
Gerlach Conference Room
(230B)

Dr. Zakaria Messieha
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 accompanies 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.
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 prove $500 towards the cost.

AADR/IADR: 2nd 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

<table>
<thead>
<tr>
<th>Date</th>
<th>Reason</th>
<th>Clinic status</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 15-16, 2013</td>
<td>AAPD CE course (Chicago)</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>December 4, 2013</td>
<td>Illinois Society of Pediatric Dentists (Chicago)</td>
<td>Clinic closed</td>
</tr>
<tr>
<td>February 20-22, 2014</td>
<td>CDS Midwinter meeting (Chicago)</td>
<td>Clinic open</td>
</tr>
<tr>
<td>TBA</td>
<td>Clinic and Research Day (UIC)</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>March 15-18, 2014</td>
<td>ADEA annual session (San Antonio)</td>
<td>Clinic open*</td>
</tr>
<tr>
<td>March 19-22, 2014</td>
<td>AADR annual session (Charlotte)</td>
<td>Clinic open*</td>
</tr>
<tr>
<td>May 22nd – 25th, 2014</td>
<td>AAPD Annual Session (Boston)</td>
<td>Clinic open for PG2</td>
</tr>
</tbody>
</table>

*Reduced faculty

## Holidays

<table>
<thead>
<tr>
<th>Date</th>
<th>Reason</th>
<th>Clinic status</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 4, 2013</td>
<td>Independence Day</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>September 2, 2013</td>
<td>Labor Day</td>
<td>Clinic closed</td>
</tr>
<tr>
<td>November 28-29, 2013</td>
<td>Thanksgiving Day</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>December 24, 2013</td>
<td>Christmas Day</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>January 1, 2014</td>
<td>New Year’s Day</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>January 20, 2014</td>
<td>Martin Luther King Day</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>May 26, 2014</td>
<td>Memorial Day</td>
<td>Clinic Closed</td>
</tr>
<tr>
<td>Dr. Khan</td>
<td>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).</td>
<td></td>
</tr>
<tr>
<td>-----------------</td>
<td>----------------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Dr. Davis</td>
<td>Lunch &amp; Learn, follow-up with consults from other referring dentists and physicians, liaison with front desk for recalls appointments, etc. Orientation booklet.</td>
<td></td>
</tr>
<tr>
<td>Dr. Popejoy</td>
<td>GA patients scheduling and follow-up with co-residents.</td>
<td></td>
</tr>
<tr>
<td>Dr. Singh</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dr. Gray</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dr. Patrick Whittington</td>
<td>Liaison with faculty.</td>
<td></td>
</tr>
<tr>
<td>Chief Resident</td>
<td>Call Schedules, other schedules, Ortho Cases (Ortho-Pedo seminars), NIU, Hospital rotation schedule, Emergency residents' schedule</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
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</tr>
</tbody>
</table>
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


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 16th. 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

<table>
<thead>
<tr>
<th>Name</th>
<th>Pager</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jazmine Day</td>
<td>3703</td>
</tr>
<tr>
<td>Reena Patel</td>
<td>3743</td>
</tr>
<tr>
<td>Jonathan Patrick</td>
<td>3762</td>
</tr>
<tr>
<td>Anya Preece</td>
<td>3751</td>
</tr>
<tr>
<td>Mital Spatz</td>
<td>3742</td>
</tr>
<tr>
<td>Megan Van Lieshout</td>
<td>3706</td>
</tr>
</tbody>
</table>

New pagers

<table>
<thead>
<tr>
<th>Name</th>
<th>Page #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dhara Patel</td>
<td>5295</td>
</tr>
<tr>
<td>Ellen Huang</td>
<td>5154</td>
</tr>
<tr>
<td>Lindsey North</td>
<td>5251</td>
</tr>
</tbody>
</table>
# New Residents Demographics

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Email Address</th>
<th>Cell Phone</th>
<th>Chicago Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daye</td>
<td>Jazmine</td>
<td><a href="mailto:jday2@uic.edu">jday2@uic.edu</a></td>
<td>847-924-2769</td>
<td>9226 Golf Rd., #313 Des Plaines, IL 60016</td>
</tr>
<tr>
<td>Huang</td>
<td>Ellen</td>
<td><a href="mailto:ellenhuang3@gmail.com">ellenhuang3@gmail.com</a>; <a href="mailto:huange2@unlv.nevada.edu">huange2@unlv.nevada.edu</a></td>
<td>626-703-7655</td>
<td>1255 S. State St., Unit#1306 Chicago, IL 60605</td>
</tr>
<tr>
<td>North</td>
<td>Lindsey</td>
<td><a href="mailto:Lindsey.atlantic@gmail.com">Lindsey.atlantic@gmail.com</a>; <a href="mailto:NorthLE@vcu.edu">NorthLE@vcu.edu</a></td>
<td>703-507-4509</td>
<td>1255 S. Michigan Ave., Apt 1710 Chicago, IL 60605</td>
</tr>
<tr>
<td>Patel</td>
<td>Dhara</td>
<td><a href="mailto:dbpatel2@uic.edu">dbpatel2@uic.edu</a></td>
<td>630-728-2415</td>
<td>611 S. Wells St. Unit 2603 Chicago, IL 60607</td>
</tr>
<tr>
<td>Patel</td>
<td>Reena</td>
<td><a href="mailto:rpatel2@uic.edu">rpatel2@uic.edu</a></td>
<td>847-867-0413</td>
<td>251 Butler Drive Bartlett, IL 60103</td>
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<tr>
<td>Patrick</td>
<td>Jonathan</td>
<td>JonP@<a href="mailto:uic@gmail.com">uic@gmail.com</a>; <a href="mailto:Jpatrick@bcd.tamhsc.edu">Jpatrick@bcd.tamhsc.edu</a></td>
<td>832-439-9596</td>
<td>555 W. Kinzie St. Apt 3606 Chicago, IL 60654</td>
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<tr>
<td>Preece</td>
<td>Anya</td>
<td>anyan@<a href="mailto:uic@gmail.com">uic@gmail.com</a>; <a href="mailto:A@bcd.tamhsc.edu">A@bcd.tamhsc.edu</a></td>
<td>804-822-6161</td>
<td>1600 S. Prairie, Unit 704</td>
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<tr>
<td>Spatz</td>
<td>Mital</td>
<td><a href="mailto:mitalspatz@yahoo.com">mitalspatz@yahoo.com</a></td>
<td>773-908-0482</td>
<td>1474 W. Foster Ave. Unit #1E Chicago, IL 60640</td>
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<tr>
<td>Van</td>
<td>Megan</td>
<td><a href="mailto:megan.vanlieshout@mu.edu">megan.vanlieshout@mu.edu</a></td>
<td>262-510-1043</td>
<td>936 N. Wolcott Ave, #2F Chicago, IL 60622</td>
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<td>8:00-9:00 Hospital Grand Rounds **</td>
<td>8:00 - 9:00 Clinic &amp; Ortho Rounds ****</td>
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<td>*Vergotine on call</td>
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<td>**** Depart faculty</td>
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*Emergency Resident Schedule

** selected rounds

*** OR (On-rotation)

**** Depart faculty
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<tr>
<td>Ellen Huang</td>
<td>July 12, 2013</td>
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<td>Lindsey North</td>
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<td>July 11, 2013</td>
<td>August 9, 2013</td>
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<td>Jonathan Patrick</td>
<td>July 11, 2013</td>
<td>August 9, 2013</td>
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<tr>
<td>Anya Preece</td>
<td>July 8, 2013</td>
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<td>Mital Spatz</td>
<td>July 8, 2013</td>
<td>August 15, 2013</td>
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<tr>
<td>Megan Van Lieshout</td>
<td>July 5, 2013</td>
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*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
  - Chair #1
- Dr. North
  - Chair #18
- Dr. Van Lieshout
  - Chair #16
- Dr. Gray
  - Chair #11
- Emergency Room
  - Chair #1
- Dr. Daye
  - Chair #19
- Dr. Preece
  - Chair #15
- Dr. Khan
  - Chair #12
- Emergency Room
  - Chair #20
- Dr. Huang
  - Chair #14
- Dr. Popejoy
  - Chair #13
Post Graduate Clinic Layout

GA/ Sedation Room
Chair #4

GA/ Sedation Room
Chair #5

Chair #6

Chair #7

Chair #8

Chair #9

Chair #10

Chair #11

Chair #12

Chair #13

Sedation Room
Chair #3

Recovery Room
Chair #2

Radiology Room

Chair #18

Chair #17

Chair #16

Chair #15

Chair #14

Emergency
Chair #1

Emergency
Chair #20
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


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.
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