
# BALTIMORE COLLEGE of DENTAL SURGERY

DENTAL SCHOOL | UNIVERSITY OF MARYLAND

## CATALOG 2010-2011

Baltimore College of Dental Surgery • Dental School • University of Maryland, Baltimore
{650 West Baltimore Street Baltimore, MD 21201}


The University of Maryland is accredited by the Middle States Association of Colleges and Schools. Programs in dental education; dental hygiene education; the advanced dental education programs in endodontics, oral and maxillofacial pathology, and oral maxillofacial surgery, orthodontics, dentofacial orthopedics, pediatric dentistry, periodontics, and prosthodontics; the general practice residency program (12 months) and the advanced education program in general dentistry program (12 and 24 months) are accredited by the Commission on Dental Accreditation and have been granted the accredited status of approval. The Commission is a specialized accrediting body recognized by the U.S. Department of Education. The Commission on Dental Accreditation can be contacted at 312-440-4653 or at 211 E. Chicago Ave., Chicago, IL 60611.

The purpose of this publication is to provide information about the Dental School. No provision of this publication shall be construed as a contract between any applicant or student and the University of Maryland or the Dental School. While every effort is made to ensure the accuracy of information in this catalog, the Dental School reserves the right to make changes at any time in admission and curriculum requirements, services, programs or other subjects addressed in this publication.

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## MISSION

The Baltimore College of Dental Surgery, Dental School, University of Maryland, Baltimore, seeks to graduate exceptional oral health care professionals, contribute to the scientific basis of treatments for diseases or the orofacial complex, and deliver comprehensive dental care. These accomplishments will promote, maintain, and improve the overall health of the people within Maryland and have a national and international impact.

## FUTURE VISION

As we strive to achieve our goals, we envision the future: Reflecting on its heritage, the Baltimore College of Dental Surgery, Dental School, University of Maryland, Baltimore, will join in full partnership with other campus entities. The resulting multidisciplinary ventures will contribute to our prominence in scientific discovery, scholarly activity, and service to the community. Global outreach efforts of faculty, students, and staff will be mutually rewarding. An atmosphere of collegiality and intellectual stimulation will prevail, nurturing students, faculty, and alumni.

Administrative support will help foster creativity and responsiveness to a range of opportunities. The School will create and maintain an organizational structure that enhances our ability to achieve our goals. Students, faculty, and staff will provide the highest quality oral health care. The world's first dental college, established in the 19th century, will take its place as the premier dental school of the 21st century.

## HISTORY

The Baltimore College of Dental Surgery, Dental School, University of Maryland has the distinction of being the first dental college in the world. Formal education to prepare students for the practice of dentistry originated in 1840 with its establishment. The chartering of the school by the General Assembly of Maryland on February 1, 1840 represented the culmination of the efforts of Dr. Horace H. Hayden and Dr. Chapin A. Harris, two physicians who recognized the need for systematic formal education as the foundation for a scientific and serviceable dental profession. Together, they played a major role in establishing and promoting formal dental education, and in the development of dentistry as a profession.

Convinced that support for a formal course in dental education would not come from a medical school faculty that had rejected the establishment of a department of dentistry, Dr. Hayden undertook the establishment of an independent dental college. Dr. Harris, an energetic and ambitious young man who had come to Baltimore in 1830 to study under Dr. Hayden, joined his mentor in the effort to found the college.

The Baltimore College of Dental Surgery soon became a model for other schools throughout America. This was due in no small part to BCDS's emphasis on sound knowledge of general medicine and the development of the skills needed in dentistry. The present Dental School evolved through a series of consolidations involving the Baltimore College of Dental Surgery, founded in 1840; Maryland Dental College, founded in 1873; the Dental Department of the University of Maryland, founded in 1882; and the Dental Department of the Baltimore Medical College, founded in 1895. The final consolidation took place in 1923, when the Baltimore College of Dental Surgery and the Dental Department of the University of Maryland were combined to create a distinct college of the University under state supervision and control.

As part of the University of Maryland, the Dental School was incorporated into the University System of Maryland (USM), formed by Maryland's General Assembly in 1988. Hayden-Harris Hall, the school building erected in 1970 and renovated in 1990, was replaced by an entirely new facility that opened 2006.

## PROGRAMS OF STUDY

The Dental School today strives to offer the finest programs of dental education in the world. Continuing efforts are

made to provide educational and training experiences consistent with evolving concepts and advances in the delivery of dental, oral and maxillofacial health care.

In addition to the Doctor of Dental Surgery (DDS) program, the school offers a baccalaureate program in dental hygiene designed to prepare students for careers in dental hygiene practice, education, management and research in private and public settings. Combined programs are offered for DDS/PhD and DDS/MS degrees. Graduate programs are designed to prepare students for careers in academic dentistry or to supplement clinical training with knowledge of research methods. Research opportunities also may be made available to dental students.

Advanced dental education programs are offered in the specialty areas of endodontics, oral and maxillofacial surgery, oral and maxillofacial pathology, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics and prosthodontics. Also offered is a school-based residency program in advanced general dentistry, providing advanced level training in the practice of comprehensive general dentistry.

Programs in dental education; dental hygiene education; the advanced dental education programs in endodontics, oral and maxillofacial pathology, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics and prosthodontics; and advanced general dentistry (12- and 24-months) are accredited by the Commission on Dental Accreditation and have been granted the accreditation status of approval. The Commission is a specialized accrediting body recognized by the U.S. Department of Education. The Commission on Dental Accreditation can be contacted at (312) 440-4653 or at 211 East Chicago Ave., Chicago, IL 60611.

Continuing Education programming is developed by academic departments to meet the needs of health care professionals for refining diagnostic skills and updating knowledge in technical and scientific areas or practice.

The Baltimore College of Dental Surgery, Dental School, University of Maryland continues to fulfill, through its graduates, the aspirations of its founders to provide scientifically trained professionals to serve the oral health care needs of society.

## STUDENT BODY

Five hundred thirteen students are enrolled in the predoctoral dental education program in the 2009-2010 academic year. The total enrollment of 694 also includes 20 graduate, 84 dental hygiene, and 77 advanced dental education students.

The entering fall 2009 predoctoral class has a mean grade point average of 3.5. Of these, 50 percent are female; 28 percent are minorities. Dental School students represent a variety of undergraduate institutions across the country.

## ADMINISTRATIVE OFFICES

### Admissions and Career Advancement

Dr. Patricia Meehan, Assistant Dean of Admissions and Recruitment

The Office of Admissions, under the direction of the Assistant Dean of Admissions and Recruitment, coordinates recruitment activities and manages the application and admissions processes for the following programs: Doctor of Dental Surgery, Dental Hygiene, and Advanced Dental Education.

The Doctor of Dental Surgery admissions process is administered by the Assistant Dean of Admissions and Recruitment, who chairs the Committee on Dental Recruitment and Admissions. The Dental Recruitment Coordinator, under the direction of the Assistant Dean of Admissions and Recruitment, coordinates recruitment activities, including visits to local universities and colleges. The Office of Admissions responds to inquiries, processes applications, arranges interviews, verifies credentials, and processes admissions decisions for Dental School programs. An orientation program coordinated by the office provides new dental students with a smooth transition to their academic program. Additionally, the Office of Admissions coordinates a seminar for third year dental students to prepare them for the postgraduate application process.

## Clinical Operations Board

### Dr. Louis DePaola, Chairman

### Dr. Ron Chenette, Director of Clinical Operations

The Clinical Operations Board has overall responsibility for clinical patient care operations within the Dental School. It consists of dental professionals who are responsible for:

- Fostering a patient-centered approach to care within an educational setting
- Coordinating imaging services
- Supplying instruments and equipment through Central Sterilization and Central Materials Services
- Developing and implementing quality assurance
- Safeguarding patient information
- Questions regarding the Dental School clinics may be directed to clinicinfo@dental.umaryland.edu.

## Continuing Education

### Dr. Keith Groves, Director

The Dental School is committed to the lifelong learning of oral health professionals in Maryland and neighboring states of the Mid-Atlantic Region. Continuing Dental Education for dentists and dental hygienists is among the missions of the Dental School, for today's many and frequent advances in science and technology impose a greater and sustaining need for timely accession of new information.

In order to fulfill its commitment to lifelong learning, the Dental School provides courses designed to meet the needs of dental and dental hygiene practitioners. Based upon research in the basic and clinical sciences, the Continuing Dental Education Program offers participants educational courses which reflect contemporary professional knowledge of direct benefit to the practice community. These courses are conducted in clinics, laboratories, and simulation facilities of the Dental School as well as other regional settings of convenience to course participants. In addition, future courses may be offered through such distance learning media as the Internet.

## Curriculum and Academic Management

### Dr. Carroll-Ann Trotman, Associate Dean of Academic and Student Affairs

Academic Affairs manages curricular matters, registration, grades, student academic records and academic counseling. The office disseminates textbook lists, course offerings, clerkship offerings and guidelines, class schedules, examination schedules, and the academic calendar through the current students web page. Records concerning counseling, progress reports, referrals, and disposition are maintained and serve as a resource of academic evaluation by the faculty and administration.

The Office of Student Affairs works with students throughout their years at the Dental School. Students who experience career, health, legal, employment, housing and other personal problems are counseled or referred, as appropriate, to campus agencies or offices. The associate dean serves as advisor to all student organizations and publications and also assists in the coordination of joint student-faculty programs.

## Dean's Faculty Enrichment Program

### Dr. Warren M. Morganstein, Director

The mission of the Dean's Faculty Program is to enrich the University of Maryland Dental School through a large cadre of dedicated volunteers who contribute significantly to the school by playing an active and important part in the school's programs of education, research, service and development.

The Office of the Dean's Faculty Enrichment Program administers the Dean's Faculty Program. This office provides the expertise and services that develop, sustain and ensure the success of the program.

Specific functions of this office include:

- Marketing the program
- Recruiting, screening and referring candidates
- Developing and administering benefits
- Orienting new volunteer faculty to the policies

and practices of the school

- Ensuring volunteer faculty have the knowledge to perform their functions within the school through oversight and facilitation of department sponsored calibration programs and orientation to policies and practices of the school
- Hosting continuing education programs, study clubs and other development activities
- Developing and administering reward and recognition programs
- Serving as an ombudsman for issues and Removing barriers for the integration of volunteer faculty in the life of the School
- Ensuring volunteer faculty are involved in decision making, as appropriate, and are in the communication loop

The Office of the Dean's Faculty Enrichment Program functions in a collaborative manner with the department chairs who are responsible for selection, assignment, calibration, performance assessment and integration of the volunteer faculty within their departments.

### Finance, Institutional Operations and Planning

### Dr. David George, Associate Dean of Finance, Clinical Operations and Institutional Planning

This office has overall responsibility for management and oversight of the financial resources of the Dental School. Additionally, this office coordinates and processes payroll and benefits for School employees; maintains employee time and leave systems; assists administrative supervisors and faculty in the implementation of School, University, and USM personnel policies; and provides administrative support for faculty appointments, promotions and tenure processing, and faculty credentialing.

### Information Technology

The Office of Information Technology (OIT) in partnership with UMB campus Center for Information Technology Services (CITS) provide and support all general administrative, research, academic and clinical computer systems for the Dental School. The mission of the office is to deliver cost effective information services and solutions to students, patients, faculty and staff.

## SPECIAL LECTURES

### The Stephen E. and Jeffrey A. Kleiman Lectures in Dentistry and Medicine

As a tribute to the selection of careers in the health professions by his sons, Dr. Bernard S. Kleiman established this annual lecture program to alternate between the University of Maryland Dental School and the School of Medicine. Distinguished individuals are invited to lecture on topics pertinent and applicable to practicing dentists or physicians. The Kleiman Lecture alternates with the Jane Boswell Toomey and Lewis Cole Toomey Lecture as part of Student-Faculty Day activities.

### The Jane Boswell Toomey and Lewis Cole Toomey, DDS Memorial Lecture

Endowed in 1982 by a major gift from the Toomey family, together with contributions by friends and associates of Dr. and Mrs. Toomey, this biennial lecture was initiated during the 1985-1986 academic year. The Toomey Lecture provides a forum for distinguished individuals to speak on timely dental research and clinical topics useful to dental professionals in practice and teaching. The lectures are open to all members of the dental community.

In addition to these annual lectures, there are three special lectures that are presented on a rotating basis. These include the John E. Fogarty Memorial Lecture, initially endowed by the Rhode Island Section of the Alumni Association of the Baltimore College of Dental Surgery, Dental School, University of Maryland, Inc.; The J. Ben Robinson Memorial Lecture, sponsored by the Maryland Section of the American College of Dentists; and the Gardner Patrick Henry Foley Memorial Lecture.

## ORGANIZED RESEARCH CENTER ON PERSISTENT PAIN

The basic science and clinical research led by the University of Maryland Dental School is providing national leadership in the understanding of deep tissue persistent pain and its impact on diagnosis and treatment. A dedicated research team was created from the best researchers and clinicians from the University of Maryland Dental School and School of Medicine, VA Medical Center, and University of Maryland Medical Center.

Basic science research, translational approaches, clinical trials, and the management of pain are at the center of this research. Research training programs with over 50 mentors are available to high school, college, graduate, dental, and medical students; postdoctoral fellows; and junior faculty desiring to enhance their research skills and portfolio.

## STUDENT ORGANIZATIONS

The Student Dental Association (SDA) is the organizational structure of the student body. The association is presided over and governed by elected representatives from all classes and is represented in selected committees within the School. The organization participates in certain student/faculty activities and sponsors and directs all student social activities. It is responsible for the publication of the school's yearbook, The MIRROR, and is unique among dental student organizations in having formulated its own constitution and professional code of conduct.

The American Student Dental Association (ASDA) was established in February 1971, with the aid of the American Dental Association (ADA). Its primary purpose is to serve as a liaison between students and the ADA and its components. ASDA membership includes student membership in the ADA and a subscription to the Journal of the ADA and the ADA News.

Student American Dental Hygienists' Association (SADHA) members are involved in activities such as hosting guest speakers, conducting fund-raising projects, presenting table clinics, and maintaining liaison with the state and local organizations. They also participate in meetings and discussion groups on a regional and national level. Student representatives attend the annual meeting of the American Dental Hygienists' Association.

The Student National Dental Association (SNDA), Maryland chapter, was founded in 1973. The primary objective of this organization is to foster the recruitment, admission, development, and graduation of African-American dental and dental hygiene students. Among the activities in which the Maryland chapter is engaged are minority recruitment, tutoring,social and professional programs, and community and university relations.

The Academy of General Dentistry (AGD) is the second largest dental association in the world, with over 35,000 members throughout the U.S., Canada, and Puerto Rico. The AGD is exclusively dedicated to serving the needs and interests of the general dentist, and in advancing the value and excellence of general dentistry. The student AGD strives to do this by fostering learning opportunities with local dentists, providing material not normally included in the school curriculum, and by providing a social outlet for networking and discussion. Learn more by visiting www.agd.org or by calling 888-243-3368.

The American Association of Dental Research/Student Research Group was founded in 1987. The objectives of the local chapter are to promote student research in dentistry and its related disciplines, to promote the advancement of dental research and related aspects, and to further the aims and objectives of the American Association of Dental Research (AADR) and International Association of Dental Research (IADR) as they relate to student research. Membership is open to all dental and dental hygiene students expressing an interest in dental research. Past research experience is not a requirement for membership.

The American Dental Education Association (ADEA) promotes the advancement of dental education, research and service in all appropriately accredited institutions that offer programs for den-

tal personnel. The association has three membership categories: institutional, individual, and student. Student members receive the Journal of Dental Education and the Dental Student News, published by the association. During the year, the local chapter conducts programs to promote the goals of this organization.

The Gamma Pi Delta Prosthodontic Honor Society, chartered in 1965, is an honorary student dental organization with scholarship and interest in the field of prosthetic dentistry as a basis for admission. The objective of the organization is the advancement of prosthetic dentistry through lectures, table clinics, and other academic activities that stimulate the creative interest of students and the profession in general.

The Gorgas Odontological Honorary Society was organized in 1916 as an honorary student dental society with scholarship as a basis for admission. The society was named after Dr. Ferdinand J. S. Gorgas, a pioneer in dental education, a teacher of many years' experience, and a major contributor to dental literature. It was with the idea of perpetuating his name that the society chose its title.

To be eligible for membership, a student must rank in the top one-third of the class, must have achieved and maintained a minimum grade point average of 3.00 in all combined courses, and must not have repeated for scholastic reasons any subject. Speakers prominent in the dental and medical fields are invited to address members at monthly meetings.

The Phi Chapter of Omicron Kappa Upsilon , a national honorary dental society, was chartered at the Baltimore College of Dental Surgery during the 1928-1929 academic year. Students whose rank for the entire course of study is among the highest 20 percent of the class are eligible. This high honor is conferred upon those graduating seniors who, in addition to scholarship, have demonstrated exemplary character traits and potential for future professional growth and attainment.

The Academy of General Dentistry membership is open to all students in the Dental School. General dentists share extraordinary experiences in lecture/discussion programs of interest to all. Meetings are held several times a year after school hours.

The American Association of Women Dentists was founded nationally in 1921. The Maryland student chapter, founded in 1982, provides support and information locally to all dental students attending the Dental School. Lectures, group discussions, projects, and gatherings with practitioners and AAWD chapters from other dental schools form the basis of the group's activities.

The American Society of Dentistry for Children meets once a month and uses a lecture/discussion format to discuss subjects as varied as nutrition for children and nitrous oxide analgesia in private practice. The Big Brother/Sister Program is a voluntary effort on the part of each member of the second-year dental student class to help and advise a member of the incoming first-year class. It is hoped that this assistance will continue through graduation of each class. The program is an official standing committee of the SDA.

The Dental Hygiene Big Brother/Big Sister Program is a voluntary effort on the part of each member of the senior class to help and advise a member of the junior class. It is hoped that this assistance will continue through graduation of each class.

The Christian Dental Association, a chapter of the Christian Medical Society, provides students with opportunities in the areas of community and world outreach programs. In addition to holding Bible study sessions and lectures, the group is forming a network between practicing Christian dentists and dental students.

The Hispanic Student Dental Association (HSDA) was organized to improve and promote the oral health of Hispanics living in the United States. Other goals include the recruitment and retention of Hispanic dental students, matching students in the Big Brother/Sister program for academic advancement and support, translating for patients who do not speak English, and organizing intra- and extramural activities. Students and faculty from all ethnic backgrounds are welcome to join.

The Korean American Student Dental Association was established in 1993 to provide dental education to the non-English speaking Korean community and to help Korean dental students assimilate into the Dental School.

The University Student Government Association (USGA) is a growing team of professional and graduate students dedicated to making the University of Maryland "a more perfect union." USGA was created to advocate on behalf of all University students.

Professional dental fraternities are Greek letter organizations of men and women bonded together by ritual. They are specialized fraternities that limit membership to selected graduates and students enrolled and satisfactorily pursuing courses in an accredited college of dentistry. They are not honorary fraternities or recognition societies that confer membership to recognize outstanding scholarship. Their aims are to promote the high ideals and standards of the profession, advance professional knowledge and welfare of members, and provide a medium through which members, with a common interest, can develop everlasting friendships. Representative chapters in the Dental School are Alpha Omega, founded in 1907, and Psi Omega, founded in 1892.

Latter Day Saints Dental Association was organized to provide a network of support for dental students.

Maryland Association of Pediatric Dentists is the student chapter of the state pedodontists association. MAPD strives to improve and promote oral health in children and families of the surrounding communities through public service.

Oral Surgery Interest Group members meet monthly for lectures by speakers prominent in the dental and medical surgical fields.

## ALUMNI ASSOCIATION

The Alumni Association of the Baltimore College of Dental Surgery, Dental School, University of Maryland, Inc. represents more than 6,000 graduates of the Dental School. Alumni representatives from the DDS, Dental Hygiene, Advanced Dental Education, and Graduate programs are recruited to serve on the Alumni Association Board of Directors and committees.

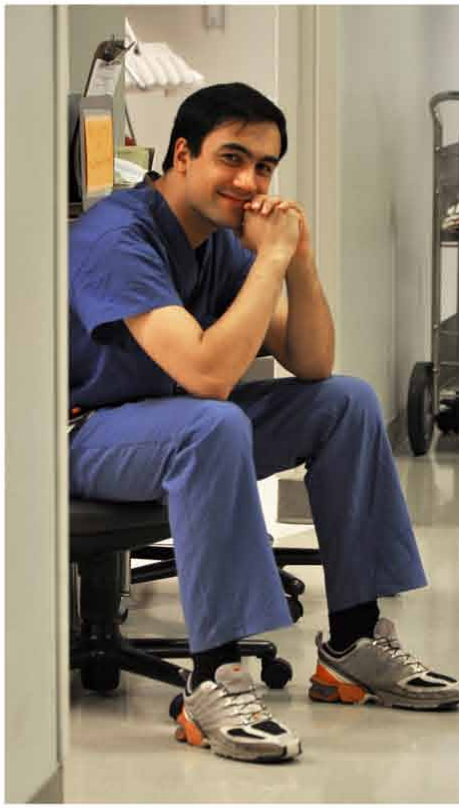
The Association fosters and promotes the Dental School and its programs. To accomplish this goal, the Association seeks to:

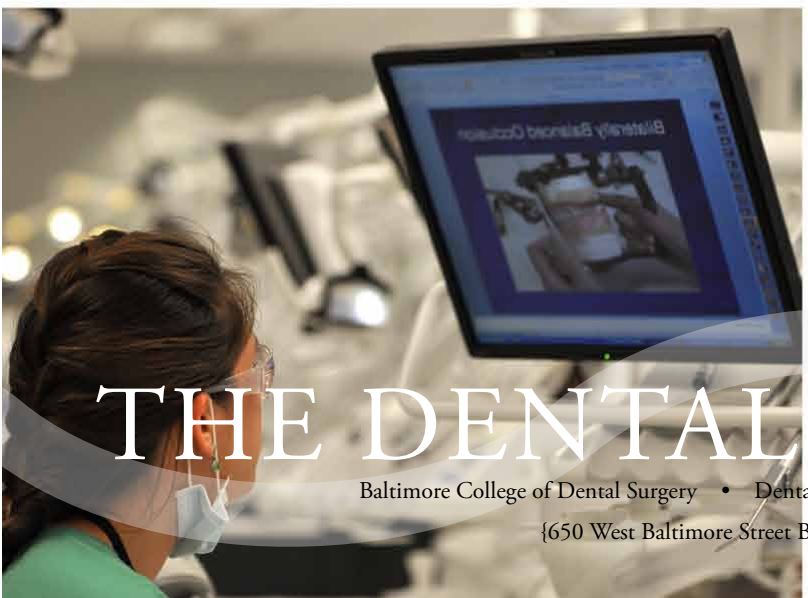
- Maintain the interest of the alumni in their Alma Mater
- Organize alumni gatherings where friendships may be renewed and perpetuated
- Inspire alumni to give of their time and financial support towards the needs of the Dental School
- Encourage alumni participation in School and Alumni Association sponsored continuing education offerings
- Maintain the traditions of the World's First Dental College

The annual meeting of the Alumni Association is held during Alumni Weekend. At this meeting, officers and members are elected to the Board of Directors.

The Alumni Association works closely with the School's Office of Development and Alumni Relations to plan activities across the country for alumni and friends. Local events allow alumni and friends the opportunity to interact with students and faculty.

If you are interested in becoming involved with the Association and their activities, please contact the Office of Development and Alumni Relations at 410-706-7146 or alumni@dental.umaryland.edu.





# THE DENTAL PROGRAM

# APPLICATION/ADMISSION

## REQUIREMENTS FOR ADMISSION TO THE DENTAL PROGRAM

The Dental School seeks to enroll the highest caliber of students who will become exemplary health care professionals. To achieve this strategic objective, the Dental School has established admissions criteria that permit flexibility in choosing an undergraduate program while remaining discriminative with regard to scholastic achievement. Students who are majoring in either science or non-science disciplines, as well as individuals interested in career changes, are encouraged to apply. In addition, those individuals who are interested in changing their careers will receive careful consideration for admission. The admissions process strives to identify applicants who possess the ability to think critically and who have demonstrated independence and self-direction. In all respects, applicants must give every promise of becoming successful students and practitioners of the highest ethical standards.

Applicants should be able to demonstrate not only that they have participated in a challenging program in their respective disciplines, but also that it was supplemented by a broad selection of courses in the social sciences, humanities, and arts. Applicants should also be able to demonstrate the activities undertaken to investigate the dental profession. Additionally, experiences that develop manual dexterity are strongly recommended.

Although the completion of a bachelor's degree before dental school matriculation is strongly encouraged by the Committee on Dental Recruitment and Admissions, applicants who have successfully completed at least three academic years (90 credit hours) in an accredited university will be considered for admission.

No more than 60 of the minimum required credits will be accepted from a community college or junior college; these credits must have been validated by an accredited college of arts and sciences. All admission requirements must be completed by June 30th of the desired year of admission. Applicants must also present favorable recommendations from their respective pre-professional committee or, if no such committee is available, from one faculty member each in the departments of biology and chemistry. Applicants will not be admitted with unabsolved conditions or unabsolved failures.

Requirements for admission are subject to change without prior notice, as the Committee on Dental Recruitment and Admissions reserves the right to modify the prerequisites when additional courses are necessary to improve an applicant's preparation for dental school. At the minimum, the undergraduate curriculum must include the following:

- 8 Semester Hours of General Biology (including laboratories)
- 8 Semester Hours of Inorganic Chemistry (including laboratories)
- 8 Semester Hours of Organic Chemistry (including laboratories)
- 8 Semester Hours of Physics (including laboratories)
- 3 Semester Hours of Biochemistry
- 6 Semester Hours of English Composition

Moreover, applicants are expected to achieve superior grades in these prerequisite courses, because these are predictors of dental student performance in the first two years of the dental curriculum.

A strong record of academic achievement is essential, and all applicants should present science and cumulative grade point averages (GPA) and Dental Admission Test (DAT) scores that exceed the national averages. All applicants are encouraged to take the Dental Admission Test (DAT) no later than December of the year before admission. The final admission decision will be based on DAT scores, performance in previous academic programs, the quality of those programs, and personal factors as evidenced by letters of recommendation, extracurricular activities, and a personal interview.

Before applying to the Dental School, potential applicants should note the University of Maryland Policy Concerning Prevention and Management of Student and Employee Infection with Bloodborne Pathogens, and the Dental School's Technical Standards for Admission and Matriculation. In addition, individuals who may have a prior or subsequent conviction or nolo contendre plea for a felony may encounter denial or removal of licensure.

## APPLICATION AND ACCEPTANCE PROCEDURES

Students are admitted only at the beginning of the fall semester in August. All applications, with the exception of transfer and advanced standing applications, are processed through the American Dental Education Association (ADEA). The application service, Associated American Dental Schools Application Service (AADSAS), will verify transcripts, calculate the grade point average for each applicant, and furnish pertinent information to the Dental School. Although the AADSAS application must be filed by all applicants prior to January 1st of the desired year of admission, early filing of the application is strongly recommended. The Dental School also charges a separate application review fee of $85, which should be submitted directly to the Office of Admissions at the same time the AADSAS application is submitted.

Candidates whose applications meet preliminary screening criteria will be invited to continue with the admissions process and will receive an invitation to complete the University of Maryland supplemental application. Upon receipt of the completed supplemental application, applicants advancing in the admissions process will be invited for an interview with members of the Committee on Dental Recruitment and Admissions. A personal interview does not guarantee admission.

The Committee on Dental Recruitment and Admissions, composed of members of the faculty, students, and alumni, selects qualified applicants for admission based on the applicant's academic performance, DAT scores, faculty recommendations, and the personal interview. A deposit of $750, to be credited toward tuition, must accompany an applicant's acceptance of an offer of admission. An additional $1,000 deposit is due by April 1st to confirm intent to enroll. Admission is contingent on completion of all prerequisite coursework and continued satisfactory academic performance and behavior during the period between acceptance and enrollment.

## ADMISSION WITH ADVANCED STANDING

Students *currently* enrolled in dental schools within the United States, as well as graduates of non-U.S./non-Canadian dental schools, may apply for admission with advanced standing. It should be noted, however, that such admissions occur infrequently because of limited space availability or incompatibility of curricula at different schools. Students admitted with advanced standing may be exempted from certain courses, based on skills assessment by the faculty.

## POLICY FOR ADMISSION WITH ADVANCED STANDING

The University of Maryland Dental School does not have a specific program designed for candidates seeking admission to the DDS program with advanced standing. However, it may be possible for exceptionally talented graduates of a non-U.S./non-Canadian dental schools or dental students currently enrolled in U.S./Canadian dental schools, to gain admission to the University of Maryland's Doctor of Dental Surgery program, with advanced standing.

Candidates should be aware that the application process is complex, given the nature of assessing candidate's performance in different curricula at other institutions. Furthermore, all admissions considerations are contingent on space availability within the program.

This policy specifically addresses admissions requirements for two categories of candidates for admission with advanced standing:

- Transfer students
- Internationally trained dentists

## TRANSFER STUDENTS

### Eligibility

In order to be eligible for consideration for transfer, applicants must be currently enrolled in a U.S. or Canadian dental school, and in good academic and professional standing. First consideration will be given to applicants whose personal circumstances compel them to transfer.

### Application Process

Application for admission with advanced standing should be requested from the Office of Admissions. Completed applications should be returned no later than March 1st, along with the following:

- A detailed letter describing the reason for the transfer request
- The $350 application fee (payable to the University of Maryland Dental School)
- A letter from the Dean of the dental school, verifying that the student is *currently* enrolled and is in good academic and professional standing
- Official undergraduate transcript
- DAT score report
- Official dental school transcript
- National Board score report (where applicable)
- Current dental school catalog

### Preliminary Review

After required materials have been submitted and preliminarily reviewed, the Committee on Dental Recruitment and Admissions makes a determination regarding a personal interview. Candidates being seriously considered for admission are interviewed.

### Review by Departments

Based on the outcome of the preliminary interview, candidates who are recommended for possible admission by the Committee on Dental Recruitment and Admissions are requested to provide copies of all course syllabi for courses completed and in progress at the current dental school. Dental School department chairs (or their designees) review the course syllabi and, if necessary, communicate directly with candidates when further clarification is needed. Department chairs/designees then provide the Office of Academic Affairs with the recommendations regarding placement within the curriculum.

### Admissions and Placement Decisions

The Committee on Dental Recruitment and Admissions makes the final decision regarding admission. The Progression Committee develops specific recommendations regarding placement or modification to the student's curriculum or course requirements to accommodate individual needs. The Associate Dean for Academic Affairs notifies applicants regarding admission decisions and, if indicated, placement decisions. Space must be available within the projected class in order for an offer of admission to be extended.

## INTERNATIONALLY TRAINED DENTISTS

### Eligibility

In order to be eligible for admission with advanced standing as an internationally trained dentist, applicants must have successfully completed the DDS degree (or its equivalent). Additionally, candidates must have passed Parts I and II of the National Dental Board Examination.

### Application Process

Applications for admission with advanced standing should be requested from the Office of Admissions. Requests for an application must be submitted no later than January 1st of the year of desired matriculation. The completed application should be returned to the Office of Admissions along with the following:

- A detailed letter describing the reason for seeking admission with advanced standing
- The $350 application fee (payable to the University of Maryland Dental School)
- Official reports of National Board Part I and Part II scores
- Results of a TOEFL, if English is not the native language

- Clear, legible photocopies of the dental degree (DDS equivalent), course transcripts, and grades or examination scores, with certified English translations
- A course-by-course evaluation of academic credentials, performed by a recognized evaluation service
- Three letters of recommendation from former faculty members or recent professional contacts

### Preliminary Review

After required materials have been submitted and preliminarily reviewed, the Committee on Dental Recruitment and Admissions makes a determination regarding a personal interview. Candidates being seriously considered for admission are interviewed by members of the Committee on Dental Recruitment and Admissions. After the preliminary interview, the Committee makes a determination whether the candidate should be invited to complete the comprehensive skills analysis, conducted by the departments. For candidates invited to continue with the application process, the fee for the skills assessment is $2,000, payable on or before the date of the first departmental assessment.

### Review by Departments

Candidates receive a list of Dental School department chairs (or designees) who meet with the candidates and conduct academic and preclinical skills assessments. The Dental School reserves the right to modify or waive all or part of the skills assessment, based on the backgrounds of individual candidates. Candidates contact the faculty directly to make arrangements for their evaluations. Department chairs/designees then provide to the Office of Academic Affairs recommendations regarding admission and, where appropriate, placement within the curriculum.

### Admissions and Placement Decisions

The Committee on Dental Recruitment and Admissions makes the final decision regarding admission. The Progression Committees develop specific recommendations regarding placement or modification to the student's curriculum or course requirements to accommodate individual needs. The Assistant Dean of Admissions and Recruitment notifies applicants regarding admissions decisions and, if indicated, placement decisions. Space must be available within the projected class in order for an offer of admission to be extended.

## READMISSION TO DENTAL SCHOOL PROGRAMS

Consequent to dismissal or withdrawal, readmission may be sought by reapplication to the Dental School. To initiate the readmission procedure, the former student shall submit a detailed letter, with supporting documents, to the Office of Admissions, requesting readmission to the Dental School. Students dismissed for violations of the Professional Code of Conduct are ineligible for readmission, unless substantial evidence of rehabilitation is provided. Determination of substantial evidence is within the School's sole discretion.

Once the letter of application has been processed by the Office of Admissions, the Committee on Dental Recruitment and Admissions, in consultation with the appropriate departments, the progression committee, and administrative and non-administrative faculty members within the Dental School, may consider the student for readmission. The process of consideration may include a careful review of the student's academic record, a study of the reasons for readmission, and assessment of the student's potential for academic progress in the future. Recommendations relative to the readmission will be referred to the Committee on Dental Recruitment and Admissions in conjunction with the Office of Admissions and Office of Academic Affairs for final decision and notification, including conditions for readmission, where appropriate. Decisions resulting from this policy are not subject to appeal.

## COMBINED ARTS AND SCIENCES/DENTAL PROGRAM

Although the Dental School supports a coherent four year program of undergraduate education for most students, it recognizes that some individuals may be prepared to enter after

three years. For eligible candidates, undergraduate programs within the University System of Maryland may offer a combined curriculum leading to the degrees of Bachelor of Science and Doctor of Dental Surgery. The preprofessional part of this curriculum is taken in an undergraduate college of arts and sciences within the University System of Maryland, and the preprofessional part at the Dental School in Baltimore.

Students who have been approved for the combined program and who have completed the arts and sciences phase may, at the recommendation of the dean of the Dental School, be granted the degree of Bachelor of Science by the undergraduate college after completion of the student's first year in the Dental School. Further information and applications should be obtained from the office of admissions at the undergraduate institution.

## ACADEMIC POLICIES AND PROGRAMS

### GRADING SYSTEM

The following numerical range for standardized grades is used in the evaluation of student performance.

- A 90-100
- B 80-89
- C 70-79
- F below 70

A - Excellent: This grade signifies performance of the highest quality or exceptional achievement. It is recommended that this grade be awarded to those students with the highest degree of talent, skills, and knowledge, compared with the expected performance of students at that particular stage of development and training.

B - Good: This grade should be recorded for students who have demonstrated knowledge, talent, or skills significantly above the acceptable level, compared with the expected performance of students at that particular stage of development and training.

C - Satisfactory: This grade should be recorded for students who have demonstrated knowledge, talent, or skills at an acceptable level, compared with the expected performance of students at that particular stage of development and training.

E - Conditional Failure: This grade is used as a progress grade or as a temporary final grade to indicate that a student, who otherwise is progressing satisfactorily in a course, has failed to master limited segments of a course or some clinical procedures, but may achieve a satisfactory level of proficiency within a short time if allowed to do so based on overall academic performance. When the E grade is used as a temporary final grade, it counts in the grade point average calculation.

If successful remediation occurs, the student will receive the final grade earned in the course, shown on the permanent record along with the original E. An unresolved grade of E will result in a permanent grade of F.

F - Failure: Students who receive this grade exhibited unsatisfactory performance. This grade indicates that they have not achieved an acceptable level in skills and knowledge. As a result, they are not considered ready to advance to more complex work or to perform independently. When the failure has been absolved, the F grade will remain on the student's permanent record, but only the new grade will be used in computing the grade point average.

H - Honors: Elective clerkship courses are graded as honors when the student demonstrates excellence and advanced knowledge, skills and attitudes that exceed dental curriculum requirements in the dental specialty or practice area.

I - Incomplete: A student whose work in completed assignments is of acceptable quality but who, because of circumstances beyond the student's control (such as illness or disability), has been unable to complete course requirements, will receive a grade of Incomplete. When all requirements have been satisfied, the student will receive the final grade earned in the course. Except under extraordinary

circumstances, an Incomplete may not be carried into the next academic year.

P - Pass: This grade signifies acceptable performance and satisfactory completion of course requirements.
WD - Withdraw: This grade indicates withdrawal during the first half of the course.
WP - Withdraw Pass or WF - Withdraw Fail: This grade denotes student performance to date when withdrawal occurs after the first half of the course.

Scholastic averages are computed on the basis of credits assigned to each course and the following numerical values for grades: A-4, B-3, C-2, E-0, F-0. The grade point average is the sum of the products of course credits and grade values, divided by the total number of course credits in that year of the curriculum.

## ADVANCEMENT PROCESS

The Student Progression Committees review the performance of each student at the end of each semester. On the basis of progress and/or final grades, the committees determine one of the following actions for each student: unconditional advancement; summer remediation; conditional advancement; probationary advancement (repeat of a course, repeat or remediation of the year); or recommend academic dismissal to the Faculty Assembly, which approves all decisions pertaining to academic dismissal or graduation. Remediation or re-examination is not offered until the committees meet after the end of the academic year in May.

A. Students who do not meet published departmental/course standards for attendance may lose the opportunity for remediation. Students with a pattern of unexcused absences who receive one or more failing or deficient grades may be dismissed. Extenuating circumstances should be identified at the time the absence occurs, following procedures in the attendance policy, in order to be considered as a basis for appeal.

B. Students must take the Part I National Board Dental Examination no later than October 1 of the second year of the dental curriculum. Re-examination, if necessary, must be completed no later than April 1. Students who do not pass Part I by the end of the second year of the dental curriculum will be permitted to begin didactic courses in the fall semester of the third year, but will not be advanced to the clinic. These students must pass Part I within 15 months of eligibility or they will be dismissed. (See Policy for Limiting Enrollment Time and National Board Examination Eligibility.)

C. Missed clinical time resulting from late entry into clinic or excused absences must be rescheduled if the student is not progressing satisfactorily in clinic. In the case of an excused absence, the final grade will be determined at the end of the extended time. If an excused absence occurs during year four, the student may be required to register and pay tuition for the summer session with an opportunity for graduation in July or later. All other absences will be handled on a case-by-case basis.

D. A student may appeal any action of the progression committees or the Faculty Assembly by submission of a written request to the associate dean.

Unconditional Advancement - Students must achieve a 2.00 grade point average and passing grades in all courses to advance unconditionally to the next year. Second-year students must also successfully pass the Part I National Board Dental Examination for unconditional advancement to the third year.

Summer Remediation

1. A student may be permitted to resolve deficiencies during the summer session, as recommended by the progression committees. The student may be given one retake of a failed exam before a repeat of the course is required.

2. Depending on the type of deficiencies involved, students may be required to register and pay a fee for the summer

session. The progression committee may also permit students in Years I and II to repeat a failed basic science course at another institution during the summer session. Students who repeat a failed course during the summer are placed on academic probation.

Conditional Advancement - This status is assigned to
1. First- and second-year students with minor deficiencies who have not successfully completed remediation of deficient grades during the summer session.

2. Second-year students who have not passed the Part I National Board Dental Examination. These students must meet the requirements of a remedial program approved by the Student Progression Committee before taking a re-examination.

3. Third-year students with minor clinical deficiencies who have not successfully completed all courses but who, in the judgment of the committee, should be afforded the opportunity to complete requirements from the third year while proceeding with fourth-year courses.

Probationary Advancement

Students with a final grade of F in one or more courses at the end of the academic year may be advanced on probation and must remediate or repeat all courses in which there was a deficiency to a passing grade of C, achieve a minimum grade point average of 2.00, and must pass all courses taken during the probationary academic year. Failure to do so will result in dismissal from the dental program subject to discretionary review by the Faculty Assembly. In accordance with the Dental School Policy for Limiting Enrollment Time and National Board Examination Eligibility for Predoctoral Dental Students, the maximum number of years to complete Year I and II courses is three years and the maximum number of years to complete Year III and IV courses is three years.

1. Students who fail a year one course may be placed on probation and assigned to a special academic program where they complete first and second year courses in a maximum of three years.

2. Students who fail one Year III course may be advanced conditionally on probation to Year IV where the schedule and curriculum permit repeat of the failed course while taking Year IV courses. In these circumstances, the following guidelines will be applied: attendance at the repeated course must take precedence where there is a scheduling conflict; coursework that could not be completed due to scheduling conflicts in the fall semester must be completed during the following fall semester; courses not affected by a scheduling conflict must be successfully completed in accordance with the probation policy.

3. Students with deficiencies too severe to be absolved during the summer session may be afforded the opportunity to repeat or remediate a specific year of the dental program. Repeat of the year entails repeating the year's work in its entirety. Remediation of the year provides students with the opportunity for exemption from courses or portions of courses at the discretion of the department chairs. During the remedial year students repeat failed courses and may also be required to repeat courses previously passed to maintain or enhance skills and/or knowledge. The grade on the repeated course, whether higher or lower than the original grade, replaces the original grade in the grade point average calculation. Students who are repeating or remediating any year of the dental program are placed on probation and are subject to the probationary guidelines noted above.

Academic Dismissal

If it is determined that a student is progressing so poorly that remediation will not bring him/her to a passing level, dismissal will be recommended to the Faculty Assembly.
Advancement Process August 2009

## POLICY FOR APPEAL OF ADVANCEMENT DECISIONS

### Appeals Process

The following guidelines have been established to review appeals of decisions made by the Progression Committees, or in cases of dismissal, decisions made by the Faculty Council. This mechanism will not be used to dispute the published advancement guidelines which have been approved by the Faculty Council.

1. A student wishing to appeal an advancement or dismissal decision must initiate the appeal process within 5 working days of receiving written notification from the Office of Academic Affairs regarding Advancement Committee decisions, or from the Dean regarding dismissal decisions made by the Faculty Council. In this written appeal, the student must present evidence of compelling additional information or extenuating circumstances not previously considered and the reason why the information was not previously presented. The written appeal must include: the decision the student is appealing; the specific basis for the appeal, including appropriate supporting documentation; and the academic status that the student is requesting. The student may present and prioritize more than one alternative.

2. The appeal, which must be submitted in writing to the Associate Dean for Academic Affairs, will be reviewed by a panel composed of the Associate Dean for Academic Affairs and the Chair of the Progression Committee.

3. The review panel will determine whether the student's written appeal meets the criteria outlined above. Should the panel determine that an appeal lacks the required evidence, the appeal will be denied. In these circumstances, there is no further appeal.

4. Should the panel determine that an appeal meets the required criteria outlined above, the panel will forward the appeal to the Progression Committee for its consideration.

5. The Progression Committee will meet within ten working days, when possible, of receiving the initial appeal request from the review panel.

6. The Committee will issue a written decision within five days of its meeting, when possible. The Committee's decision is final and there is no further appeal. The Committee's decision shall be forwarded to the Faculty Council for information.

## POLICY FOR LIMITING ENROLLMENT TIME AND NATIONAL BOARD EXAMINATION ELIGIBILITY FOR PREDOCTORAL DENTAL STUDENTS

The maximum number of years to complete all dental courses and pass Part I and Part II of the National Board Dental Examinations will be six years.*

1. The maximum number of years to complete Year I and Year II courses will be three years. After completing the Year I curriculum, a student will have up to a maximum of three attempts within 15 months of eligibility to pass Part I of the National Boards. A student who does not pass Part I within 15 months of eligibility, regardless of the number of attempts, will be dismissed.

2. The maximum number of years to complete all Year III and Year IV clinical and didactic requirements will be three years. A student who fails Part II of the National Boards a total of three times during the first senior year and any remedial senior year will be dismissed.

3. Following completion of Year IV requirements, a student may be granted an additional seven months to pass Part II of the National Board Dental Examinations on a third and final attempt provided all the following criteria are met: (a) total time enrolled including the additional seven months will not exceed the six-year limit and (b) the student has had only two opportunities to take Part II.

4. Requests for exceptions to the above timetable because of

interruptions caused by illness or leave of absence may be appealed to the Faculty Council.

5. A student may appeal any decision reached pursuant to this policy under the School's established academic appeal process.

6. This policy does not apply to students in combined degree programs.

* This policy is based on the current format and schedule of the National Board Dental Examinations. In the event there is a change in the format or schedule of the examinations, this policy will be revised.

Approved by the Faculty Council: November 15, 2007

## POLICY FOR TAKING PART II NATIONAL BOARD DENTAL EXAMINATION

Year four students must take National Boards Part II before January 15 in their senior year and submit a score report or document certifying that they took the examination. Failure to comply with this requirement will result in the loss of clinical privileges until validation is received. Re-examination, if necessary, must occur before May 1. (See Policy Limiting Enrollment Time and National Board Examination Eligibility and Program for Dental Students Who Have Not Successfully Completed Part II of the National Board Examination by the End of the Senior Year.)

## PROGRAM FOR DENTAL STUDENTS WHO HAVE NOT SUCCESSFULLY COMPLETED PART II OF THE NATIONAL BOARD DENTAL EXAMINATION BY THE END OF THE SENIOR YEAR

In accordance with Dental School policy, successful completion of Part II of the National Board Dental Examination is a requirement for graduation. Following completion of Year IV requirements, a student may be granted an additional seven months to pass Part II of the National Board Dental Examinations on a third and final attempt provided all the following criteria are met: (a) total time enrolled, including the additional seven months, will not exceed the six-year limit, and (b) the student has had only two opportunities to take Part II. A continuing student will register in, and pay tuition for, a program specifically designed to meet the student's needs as determined by the Clinical Progression Committee. The Committee will develop this program based on the department chairs' recommendations for student assignment to clinical programs in need of student services. Additionally, continuing students will be assigned patients who need comprehensive care and/or will participate in specific clinical and nonclinical activities to maintain their clinical knowledge and skills. Students will also be assigned an independent course of study to assist them in preparation for the board examination.

## ATTENDANCE POLICY

The faculty and administration of the Dental School expect every student to attend all scheduled lectures, seminars, laboratory sessions, and clinic assignments, except in the event of illness or emergency. Course syllabi for each department and the Clinic Manual address specific departmental and clinical attendance policies and requirements, and delineate a policy for managing missed examinations, quizzes and other assignments. Students may lose the opportunity for remediation and/or re-examination if they do not meet published departmental/course standards for attendance.

Students who anticipate that they will be absent for planned events (e.g., religious holidays) should contact course directors to make arrangements in advance of the anticipated absence. Year III and Year IV dental students should also contact their general practice managers and directors of block assignments, if indicated.

In the event of an emergency or serious illness, students should contact course directors, general practice managers, and directors of block assignments, preferably before scheduled educational activities. If prior notice is not possible, contact should be made at the earliest opportunity. Course

directors will determine the effect of the absence and the subsequent course of action.

Students who miss specific educational activities including, but not limited to, examinations, quizzes and block assignments, must complete an absence form, including an explanation for the absence. The student's signature on the form verifies that the explanation provided is accurate. The course director will review the absence form, make a determination regarding the appropriate course of action, and sign the absence form. Copies of the form will be provided for the student, the course director/department, and the Office of Academic Affairs. Student appeals of the final disposition must be made within five working days, and should be referred to the department chair. If a satisfactory resolution is not reached, the appeal should be forwarded to the office of the Associate Dean for Academic Affairs for a final disposition.

Students who anticipate a long-term absence (longer than five days) should directly contact the Associate Dean for Academic Affairs to discuss strategies for managing the impact of the absence on the educational program.

## UNIVERSITY OF MARYLAND DENTAL SCHOOL COMPETENCIES AND COMPETENCY EXAMINATIONS

As stated in its mission, the Dental School seeks to graduate exceptional oral health care professionals. Competency, the ability to demonstrate skill, knowledge, and attitude derived from specialized training and experience, is at the core of exceptional professionals. It relates to the treatment of the child, adolescent, adult, geriatric, and medically-compromised patient. At this Dental School, pre-doctoral dental students must demonstrate competency prior to graduation and entry into dental practice.

The following competency statements have been developed by the faculty of the University of Maryland Dental School. Together, they reflect the desired synthesis of educational outcomes of the biomedical, behavioral, and clinical curriculum of this Dental School. Prior to graduation, each student will have acquired knowledge, skills and values necessary to:

- Evaluate and assess emerging trends, technologies, and products in health care; and integrate best research outcomes with clinical expertise and patient values for evidence-based practice.
- Utilize critical thinking and scientific knowledge in decision making processes involved in patient care.
- Utilize and apply ethical and legal reasoning in the provision of dental care.
- Practice within the scope of competency and know how to refer to professional colleagues indicated.
- Communicate effectively with other professionals regarding the care of patients.
- Utilize principles of behavioral sciences for maintaining patient's oral health.
- Communicate with a diverse population of patients.
- Evaluate effectiveness of prevention, maintenance, and reparative therapies through assessment of treatment outcomes.
- Provide appropriate prevention, intervention, and educational strategies.
- Understand the values and challenges of contributing to the improvement of oral health beyond those served in traditional practice settings.
- Evaluate and apply contemporary and emerging information including clinical and practice management technology resources.
- Utilize basic principles of practice management and have the skills to function as the leader of an oral health team.
- Evaluate different models of oral health care management and delivery.
- Apply principles of risk management, including informed consent and appropriate record keeping in patient care.
- Comply with state and federal regulations related

to OSHA and HIPAA, catastrophe preparedness, patient confidentiality, infection control, hazard communications, radiation safety, and medical waste disposal.

- Apply quality assurance, assessment, and improvement concepts. Measured = chart audits
- Assess a patient's medical, psychological, and social history as it relates to dental treatment.
- Secure a dental history that includes chief complaint, patient expectations, and past dental history.
- Order, obtain, and interpret appropriate radiographic/digital images.
- Formulate and present to a patient a primary treatment plan, and alternative plans or referral, based on relevant findings and individual patient considerations.
- Use knowledge of the basic and clinical sciences to evaluate the form and function of the oral and craniofacial complex and it's interaction with other systems of the body in health and disease.
- Manage acute pain and dental anxiety.
- In non-surgical patients, prevent, diagnose, and treat periodontal diseases ranging from gingivitis to moderate periodontitis.
- Develop and implement interceptive strategies to prevent and diagnose dental caries in individual patients and restore oral health.
- Restore missing or defective tooth structure to proper form, function, and esthetics, and promote soft and hard tissue health.
- Replace missing teeth and surrounding oral tissues to proper form, function, and esthetics, and promote soft and hard tissue health.
- Prevent, diagnose, manage and treat pulpal disease, and related periradicular pathology and restore oral health.
- Manage odontogenic infections.
- Prevent, recognize, and manage medical emergencies that occur in the dental practice.
- Differentiate normal from altered oral soft tissues and determine the need for additional diagnostic information.
- Perform minor alveolar and mucogingival surgery.
- Perform an exam of the hard and soft tissues of the head and neck.
- Diagnose and manage temporomandibular disorders.
- Prevent, diagnose and manage developmental or acquired occlusal abnormalities and restore oral health.
- Recognize and refer patient abuse and/or neglect.
- Recognize and refer substance abuse.
- Evaluate outcomes of comprehensive dental care.
- Provide care for a diverse population of patients including infants, children, adolescents, adults, and geriatric and special needs patients.

The educational opportunities and guided experiences of the pre-doctoral dental education program at the University of Maryland are designed to prepare the new graduate for entry into the profession of dentistry. Prior to graduation, pre-doctoral dental students are expected to demonstrate that they have attained competence. The Dental School employs specific exams to assure students meet the expectations articulated in the Maryland Competency Statements described above.

Competency exams are a formal didactic and/or practical examination, the requirements of which are standardized across the population of students being assessed. A competency exam assesses the knowledge, and/or skills, and/or values required to achieve a goal (or a set of goals) relative to the profession of dentistry and/or delivering oral health care. Each is graded according to written protocols. All competency exams must be successfully challenged prior to graduation.

A competency exam may be any of the following:

- Case based report - standardized
- Demonstration - clinical performance
- Demonstration - simulated patient/typodont/ laboratory

- Exam - oral case-based
- Exam - written (responding to e-files)
- Exam - written (case-based)
- Exam - written (testing didactic material)
- Presentation - oral
- Review of literature
- Review of patient clinical records

Students are apprised of competency exams and their requirements in one or more ways:

- Course syllabi contain descriptions of competency exams included in the course
- Faculty discuss with students competency exams on the first day of class
- Clinic Manual contains descriptions of the competencies
- GP managers distribute information about clinical competency examinations and grading to their students
- Each GP maintains clinical competency evaluation forms

The Competency Exam Manual is a compilation of the reference documents developed for each competency exam. It lists prerequisites, grading protocols, remediation, and other pertinent information. The Competency Exam Manual is located on Blackboard, the campus e-learning software platform.

## REQUIREMENTS FOR GRADUATION

The Doctor of Dental Surgery degree is conferred on a candidate who has met the conditions specified below:

- A candidate must have satisfied all requirements of the various departments.
- A candidate must have acquired and demonstrate the knowledge, skills and values contained in the Dental School Competencies.
- A candidate must pass all fourth-year courses and achieve a minimum 2.0 average in the fourth year.
- The candidate must pass the Part II National Board Dental Examination.
- The candidate must have satisfied all University obligations before graduation.
- The candidate must be clear of all disciplinary matters.

## GRADUATION DATES

Students who enter the DDS program at the University of Maryland Dental School are required to complete a minimum of four academic years at the School. The length of the program has been established to provide the students a comprehensive professional education. Graduation for students who complete the program within this prescribed period is in May. Students who fail to complete all requirements in May will be considered for graduation the following July, December, or May, as they are judged ready to do so.

| Year | Course # | Title | Fall | Spring | Total |
|---|---|---|---|---|---|
| D1 | BMAT 512 | Dental Biomaterials I | | F/1 | 1 |
| | CSLX 518 | Community Service Learning I | P/.5 | F/.5 | 1 |
| | EBDM 512 | Principles of Scientific Evidence | F/2 | | 2 |
| | FOUN 511 | Dental Anatomy and Occlusion | F/3.5 | | 3.5 |
| | FOUN 518A | Operative Dentistry | P/2 | F/5 | 7 |
| | GPAT 512 | General Pathology | | F/4 | 4 |
| | MICP 511M | Microbiology and Immunology | F/4 | | 4 |
| | NPSC 512N | Neuroscience | | F/3 | 3 |
| | NPSC 512P | Physiology | | F/5 | 5 |
| | NPSC 518A | Gross Anatomy | P/4 | F/3 | 7 |
| | NPSC 518C | Clinical Research Conferences | P/.5 | F/.5 | 1 |
| | ODSC 511C | Cell and Molecular Biology | F/3 | | 3 |
| | ODSC 511V | Nutrition | F/1 | | 1 |
| | OHCS 511 | Perspectives in Oral Health Care Services | F/1 | | 1 |
| | OMIC 512 | Oral Microbiology | | F/1 | 1 |
| | PERI 518 | Introduction to Periodontology | P/1 | F/1 | 2 |
| | PROF 518 | Professionalism I | P/2 | F/1 | 3 |
| | RADI 518 | Radiology | P/1 | F/.5 | 1.5 |
| | | | 25.5 | 23.5 | 49 |
| D2 | BHAV 528 | Behavioral Dentistry | P/1 | F/2 | 3 |
| | BMAT 521 | Dental Biomaterials II | F/1 | | 1 |
| | CARI 521 | Cariology | | F/1.5 | 1.5 |
| | DANS 521 | Dental Anesthesiology | F/2 | | 2 |
| | DRUG 522 | Drug Abuse and Chemical Dependency | | F/1 | 1 |
| | DSUR 522 | Essentials of Oral-Maxillofacial Surgery | | F/1 | 1 |
| | ENDO 522 | Endodontics | | F/3 | 3 |
| | GERI 522 | Geriatric Dentistry I | | F/1 | 1 |
| | GROW 521 | Growth and Development | F/1 | | 1 |
| | MICP 521I | Infectious Diseases | F/2 | | 2 |
| | NPSC 521A | Neuroscience of Pain | F/2 | | 2 |
| | NPSC 521P | Pharmacology | F/5 | | 5 |
| | OMED 521 | Oral Medicine | F/2.5 | | 2.5 |
| | OPAT 528 | Oral Pathology | P/1 | F/2 | 3 |
| | ORTH 522 | Orthodontics | | F/1 | 1 |
| | PEDS 522 | Pediatric Dentistry II | | F/1 | 1 |
| | PERI 528 | Periodontics | P/1 | F/1 | 2 |
| | RADI 528 | Radiology II | P/1 | F/.5 | 1.5 |
| | REST 528 | Fixed Prosthodontics | P/3 | F/3 | 6 |
| | REST 528A | Operative Dentistry I | P/.5 | F/.5 | 1 |
| | REST 528C | Partial Denture Prosthodontics | P/1 | F/2 | 3 |
| | REST 529A | Treatment and Management of the Edentulous Patient | F/3 | | 3 |
| | TXPL 528 | Treatment Planning I | P/1 | F/1 | 2 |
| | | | 28 | 21.5 | 49.5 |

| Year | Course # | Title | Fall | Spring | Total |
|---|---|---|---|---|---|
| D3 | DHPP 538P | Pediatric Dentistry III | P/3 | F/3 | 6 |
| | DSCP 538 | Oral Medicine & Diagnostic Sciences | P/3 | F/2 | 5 |
| | DSUR 538 | Advanced Topics in Oral-Maxillofacial Surgery | P/2 | F/2 | 4 |
| | DSUR 541 | Selected Topics/Oral-Maxillofacial Surgery | | F/1 | 1 |
| | ENDO 538 | Endodontics | P/2 | F/1 | 3 |
| | GERI 532 | Geriatric Dentistry | F/1 | | 1 |
| | IMPL 538 | Implant Prosthodontics | P/.5 | F/.5 | 1 |
| | NPSC 532P | Pharmacotherapeutics | | F/1 | 1 |
| | ORTH 538 | Orthodontics | P/1 | F/1 | 2 |
| # | PERI 538 | Periodontics | P/5 | F/5 | 10 |
| | PRAC 532 | Practice Management I | | F/.5 | .5 |
| | PROF 538 | Profession/Professionalism III | P/1 | F/1 | 2 |
| | RADI 538 | Radiology III | P/1 | F/1 | 2 |
| # | REST 538A | Operative Dentistry | P/3 | F/3 | 6 |
| # | REST 538B | Fixed Prosthodontics | P/3 | F/3 | 6 |
| # | REST 538C | Removable Prosthodontics | P/3 | F/4 | 7 |
| | SPTC 532 | Special Patient Care | | F/1 | 1 |
| | TXPL 538 | Treatment Planning II | P/1 | F/1 | 2 |
| | | | 29.5 | 31 | 60.5 |
| * | CCPM 538 | Comprehensive Care/Practice Management III | F/4 | F/4 | 8 |
| D4 | CSLX 548 | Community Service Learning Experience | P/2 | F/3 | 5 |
| | DNTS 548 | Special Topics | P/.5 | F/1 | 1.5 |
| | DHPP 548P | Pediatric Dentistry IV | P/3 | F/3 | 6 |
| | DNTS 548 | Special Topics | P/.5 | F/1 | 1.5 |
| | DSCP 548 | Oral Medicine & Diagnostic Sciences | P/2 | F/1 | 3 |
| | DSUR 548 | Current Developments in Oral-Maxillofacial Surgery | P/2 | F/2 | 4 |
| | ENDO 541 | Advanced Endodontics | F/1 | | 1 |
| | ENDO 548 | Clinical Endodontics | P/1 | F/1 | 2 |
| | ORTH 548 | Orthodontics | P/1 | F/1 | 2 |
| # | PERI 548 | Periodontics | P/5 | F/5 | 10 |
| | PRAC 542 | Practice Management | | F/.5 | 0.5 |
| | RADI 548 | Radiology IV | P/.5 | F/.5 | 1 |
| # | REST 548A | Operative Dentistry | P/2 | F/3 | 5 |
| # | REST 548B | Fixed Prosthodontics | P/5 | F/5 | 10 |
| # | REST 548C | Removable Prosthodontics | P/4 | F/4 | 8 |
| | TXPL 548 | Treatment Planning IV | P/1 | F/1 | 2 |
| | | | 30 | 31 | 61 |
| * | CCPM 548 | Comprehensive Care/Practice Management IV | F/6 | F/6 | 12 |

*General Practice Simulation - Credits in Selected Courses (#) are reduced for GPS Students.
F-Final Grade; P-Progress Grade. Year-long courses have progress grades in the fall semester.
The spring final grade is applied to the credits for the fall and spring.
Curriculum requirements are subject to change without prior notice.

### Year III Elective Course

PEDS 539, Pediatric Dentistry Elective, 6 Credits (3 Fall/3 Spring). This course allows selected Year III students to pursue further studies in pediatric dentistry specially designed to meet their needs and interests. Students devote a portion of their clinic time to this specialized program; the remaining clinic time is spent in the comprehensive treatment of patients in the regular program. The course includes clinical activities in the undergraduate and postgraduate clinics and didactic seminars. Enrichment activities include humanities seminars, public health experiences, and career planning.

### Year IV Elective Courses

The elective clerkship allows selected students to pursue further studies in departmental activities specially designed to meet their needs and interests. Students devote a portion of their clinic time to these specialized programs; the remaining clinic time is spent in the comprehensive treatment of patients in the regular program. Clerkships are available in basic science and clinical disciplines, and several incorporate off-campus clinical experiences in various practice settings.

| Course # | Title | Fall | Spring |
|---|---|---|---|
| CCPM 551 | General Practice Clerkship I | 10 | |
| CCPM 552 | General Practice Clerkship II | | 10 |
| DAGD 552 | Advanced General Dentistry Clerkship I | | 10 |
| DSUR 551 | Oral Surgery Clerkship I | 10 | |
| DSUR 552 | Oral Surgery Clerkship II | | 10 |
| GERI 551 | Extramural Geriatric Clerkship I | 10 | |
| GERI 552 | Extramural Geriatric Clerkship II | | 10 |
| IMPL 551 | Implant Prosthodontics Clerkship I | 10 | |
| IMPL 552 | Implant Prosthodontics Clerkship II | | 10 |
| NPSC 551 | Research Clerkship I | 10 | |
| NPSC 552 | Research Clerkship II | | 10 |
| OMED 551 | Oral Medicine Clerkship I | 8 | |
| OMED 552 | Oral Medicine Clerkship II | | 8 |
| ORTH 551 | Orthodontics Clerkship I | 2 | |
| ORTH 552 | Orthodontics Clerkship II | | 3 |
| PEDS 551 | Pediatric Dentistry Clerkship I | 7 | |
| PEDS 552 | Pediatric Dentistry Clerkship II | | 7 |
| PERI 551 | Periodontics Clerkship I | 10 | |
| PERI 552 | Periodontics Clerkship II | | 10 |
| PROS 551 | Removable Prosthodontics Clerkship I | 10 | |
| PROS 552 | Removable Prosthodontics Clerkship II | | 10 |
| SPTC 551 | Special Patient Clerkship I | 10 | |
| SPTC 552 | Special Patient Clerkship II | | 10 |
| TMDC 551 | TMD Clerkship I | 4 | |
| TMDC 552 | TMD Clerkship II | | 4 |
| TXPL 551 | Treatment Planning Clerkship I | 6 | |
| TXPL 552 | Treatment Planning Clerkship II | | 6 |

BHAV 528H. Behavioral Dentistry (3) Fall/Spring. This year-long course offers students an introduction to the application of behavioral principles to dental diagnosis and treatment. In the first semester the psychological management of human behavior, identifying and reducing stress, and the principles of effective communications are emphasized. The clinical relevance of each topic is stressed. In the second semester the behavioral, psychological and biological aspects of human nature are discussed and applied to patient care. The course addresses specific patient types (non-compliant, abused, psychologically impaired) and problems (chronic pain, infectious disease, high fear/phobia, noxious habits). Approaches to diagnosis and treatment of patients of all ages and diversity are emphasized.

BMAT 512. Dental Biomaterials I (1) Spring. This course, designed for first year dental students, lays a dental biomaterials foundation for subsequent studies. It focuses on the basics of biomaterials sciences, physical, chemical, mechani-

cal and biological properties, and the structure-property-performance relationships. It covers the basics and applications of dental waxes, polymers and polymerization, direct-filling resin composites, indirect resin composites, bonding, impression materials, dental ceramics, dental amalgams, cavity liners, and the safe handling of dental biomaterials.

BMAT 521. Biomaterials II (1) Fall. The course for students in the second year focuses on more specific topics, including investing and casting, casting alloys, dental porcelain, CAD/CAM, grinding and polishing, dental cements, and biocompatibility. It also covers more advanced topics on preventive dental materials, endodontic materials, implant materials, periodontal materials, and tissue engineering.

CARI 521. Cariology (1.5) Spring. The course presents current evidence-based information about biological aspects of dental caries. A large part of the content involves basic microbial ecology of the oral cavity and microbial mechanisms of caries. Other topics are Histopathology of enamel, dentin and root surface caries; chemistry and functions of saliva as they related to dental caries, and associations between saliva and oral structures, particularly teeth and dental plaque; history of fluorides in dentistry and their mechanisms against dental decay; dietary and nutritional aspects of caries and current research on caries susceptibility differences in human populations.

CCPM 538. Comprehensive Care and Practice Management III (4 Fall, 4 Spring). Year three students in the General Practice Simulation pilot program manage patient care and provide treatment that concentrates on patient needs while meeting or exceeding minimum required experiences for clinical progression. Attendance, clinical participation and productivity, case management, self-evaluation log, mentor interaction, and clinical educational experiences are tracked.

CCPM 548. Comprehensive Care and Practice Management IV (6 Fall, 6 Spring). Year four students in the General Practice Simulation pilot program manage patient care and provide treatment that concentrates on patient needs while meeting or exceeding minimum required experiences for graduation. Attendance, clinical participation and productivity, case management, self-evaluation log, mentor interaction, and clinical educational experiences are tracked.

CCPM 551 and CCPM 552. General Practice Clerkship I and II (10 Fall/10 Spring) Students assist new juniors in acclimating to the clinic setting and provide guidance about logistics and patient management. Clerks assist with impressions and other activities that reinforce vertical integration without impinging on faculty supervision and responsibility. The course also includes participation in departmentally sponsored calibration sessions and an opportunity to provide treatment for patients with more complex treatment needs.

CSLX 518. Community Service Learning I (.5, .5) Fall/Spring. Year one students participate in a one-week rotation at the University of Maryland Dental School at Perryville gaining experience in a community setting that focuses on treating an under-served population of primarily pediatric patients.

CSLX 548. Community Service Learning (2, 3) Fall/Spring. Service Learning is a two-week experience in the Dental School's Cecil County facility and three-week experience at another extramural site for senior dental students. The purpose is to gain outside clinical experience while gaining an appreciation for cultural diversity and the oral health needs of under-served populations. The service learning experience can be fulfilled in several ways, such as working at community sites in Maryland treating under-served populations; working at specialty sites that prepare the student for postgraduate training; or working with health missions to foreign countries. Because of logistics, service learning experiences in foreign countries is two rather than three weeks. Service Learning includes both the clinical experience at the site, as well as completion of a report that

evaluates the student's experience in clinical procedures and service learning models.

DAGD 552. Advanced General Dentistry Clerkship (10) Spring. Selected students are assigned full-time to the Advanced General Dentistry clinic in the spring semester. The clerkship is an innovative program that allows motivated students to develop beyond what the current four-year dental curriculum allows. Students are trained in advanced techniques - recent technologies in materials, patient and practice management; introduced to clinical research; prepare complex treatment plans; and perform a wide range of clinical procedures. The selected students will participate in the Advanced Education in General Dentistry curriculum.

DANS 521. Dental Anesthesiology (2) Fall. Students learn dental local anesthetic administration techniques and pain and anxiety control techniques.

DNTS 548. Special Topics (1.5) Fall/Spring. Students select from a menu of elective courses on varying dental, medical, health, research, and practice management topics to complete a minimum of 1.5 credit hours of electives.

DHPP 538P. Pediatric Dentistry III (6) Fall/Spring. Students learn to provide comprehensive dental care for young patients while encouraging the development of a positive attitude toward dental care. The course includes diagnosis and treatment planning, preventive procedures including fluoride therapy and sealants, non-punitive patient management techniques, treatment of traumatic injuries to the primary and young permanent dentition, restorative procedures in primary teeth, pulpal therapy, and interceptive orthodontics.

DHPP 548P. Pediatric Dentistry IV (6*) Fall/Spring. Students focus on providing dental treatment to pediatric and adolescent patients. Clinical experience includes radiology, diagnosis and treatment planning, prevention, local anesthesia, restorative dentistry and basic behavior management techniques. Students assist or observe pediatric dental emergencies and advanced behavior management during a rotation in the postdoctoral pediatric dentistry clinic. Involvement in community outreach projects is encouraged.

DRUG 522. Drug Abuse and Chemical Dependency (1) Spring. Presented by basic and clinical science faculty, the course provides information on different types of street drugs, their complications, methods of intervention and treatment of the substance abusing patient. It introduces students to Twelve-Step programs, Al-anon, and the State Well-Being Committee.

DSCP 538. Oral Medicine and Diagnostic Sciences (5) Fall/Spring. This two-semester course has a didactic component and several clinical rotations. The didactic portion of the first semester deals with systemic diseases and their impact on dental treatment. This is reinforced with clinical rotations in patient admissions and urgent care clinics, where review of the medical history is a crucial step in the evaluation of the patient. The didactic portion of the second semester includes a section on temporomandibular disorders and a clinical review of oral lesions/disorders with emphasis on diagnosis and management.

DSCP 548. Oral Medicine and Diagnostic Sciences (3) Fall/Spring. This course is the clinical continuation of DSCP 538. It includes rotations in patient admissions, urgent care and clinic activities. Students complete biopsy/pathology on-line case reviews and receive laboratory experience.

DSUR 522. Essentials of Oral and Maxillofacial Surgery (1) Spring. The course provides readings and lecture material relating to the principles of exodontia and routine oral surgery. A review of inflammation and wound healing precedes instruction in the application of force with dental elevators and forceps to safely remove teeth. Concepts of conservation of attached gingiva and alveolar bone are emphasized. Surgical procedures for the preparation of the mouth for prosthodontic rehabilitation are presented. Presurgical evaluation of the

patient, selection of surgical procedure, instrumentation and technique, and development of properly designed mucoperisteal flaps with concomitant suturing technique are reviewed and illustrated with clinical examples.

DSUR 538. Advanced Topics in Oral-Maxillofacial Surgery (4) Fall/Spring. Lectures cover all phases of oral and maxillofacial surgery beyond topics presented in the Year I course. Material presented includes complications of oro-facial disease, odontogenic infection, maxillofacial trauma, maxillofacial growth and developmental deformities, and odontogenic and maxillofacial neoplasms. Emphasis is placed on the treatment and management of these conditions. New techniques for the management of dental and maxillofacial problems are included as they develop.

DSUR 541. Selected Topics in Oral-Maxillofacial Surgery (1) Fall. The didactic course consists of two components: Management of Medical Emergencies and Special Topics in Oral Maxillofacial Surgery. The Management of Medical Emergencies - Lectures include the recognition and management of seizures and drug related emergencies including overdose and allergy, altered levels of consciousness, unconsciousness, respiratory distress and obstruction, chest pain and cardiovascular collapse.

Special Topics in Oral Maxillofacial Surgery - Lectures and clinical case reports introduce the student to the extent and breadth of services provided by the Oral Maxillofacial Surgeon. Topics include: 1) Management and reconstruction of patients with craniofacial anomalies including cleft lip and palate, and craniofacial anomalies; 2) Reconstruction of both hard and soft tissues of the face that have been destroyed or injured as a result of trauma or ablative tumor surgery; 3) Surgical management of temporomandibular joint disorders; 4) Facial esthetic surgery.

DSUR 548. Current Developments in Oral-Maxillofacial Surgery (4) Fall/Spring. Students apply their knowledge of Oral-Maxillofacial Surgery in the treatment of patients.

DSUR 551 and DSUR 552. Oral Surgery Clerkship I and II (10 Fall/10 Spring). General Requirements: Satisfactory progress in all areas toward completion of graduation requirements; cumulative grade point average of 3.0 or higher and minimum of B grades in all Oral-Maxillofacial Surgery courses. Selected students are expected to participate in the clerkship in the fall and spring semesters of the senior year.

Experiences include advanced exodontias and dentoalveolar surgery; one month hospital OMS; participate in seminars on office oral surgery; perform oral surgery of increasing difficulty; attend rounds with the oral maxillofacial surgery residents at University of Maryland hospital; attend surgical orthodontic and implant conferences with the postgraduate students; and attend selected operating room cases at the University of Maryland Hospital.

EBDM 512. Principles of Scientific Evidence (2) Fall. The course provides the essential elements of the scientific method needed by dentists to critically evaluate the oral health literature and engage in evidence-based practice. Specifically, students will be taught how to access the dental literature via the HS/HSL and other internet sites. They will also learn to conduct a simple review of the literature. Research methods, study design categories, and basic statistical analysis will also be introduced.

ENDO 522. Endodontics (3) Spring. The course consists of lectures, assigned readings, and laboratory sessions. The primary objectives are to 1) introduce the Year II student to endodontics; 2) teach the basic principles of performing endodontic therapy; and 3) introduce clinical aspects of diagnosis and management of the endodontic patient.

ENDO 538. Endodontics (3) Fall/Spring. Lectures expand on the basic material previously presented in Endo 522. Students are educated in the diagnosis, treatment and/or management of the endodontic patient through critical thinking

and a logical approach. Cases are treated clinically, with the student demonstrating an acceptable level of competency in the non-surgical treatment of uncomplicated single rooted teeth by the completion of the third year.

ENDO 541. Endodontics (1) Fall. Advanced endodontic instruction is provided in the areas of management of traumatic injuries to the dentition, pulp and supporting structures. The students learn how to recognize the indications for surgical and complicated non-surgical root canal therapy and take appropriate action.

ENDO 548. Endodontics (2) Fall/Spring. Students gain competency in clinical endodontics with treatment of more complex multirooted cases.

FOUN 511. Dental Anatomy and Occlusion (3.5) Fall. The course provides students with instruction to develop fundamental knowledge and principles used to develop and recognize healthy dentition and occlusal function. A closely supervised clinical experience will be used to reinforce and augment occlusal concepts. Instruction includes lectures, seminars, laboratory exercises, and clinical simulation.

FOUN 518A, Operative Dentistry, (5) Fall/Spring. Students develop fundamental knowledge and principles used to restore damaged teeth and replace missing teeth. The preventive dimension of restorative care and treatment planning are emphasized. Limited but increasing clinical experience, with close faculty supervision, augments and reinforces the didactic foundation. Instruction includes lectures seminars, self-instructional programs, laboratory exercises, and clinical simulation.

GERI 522. Geriatric Dentistry II (1) Spring. The course provides an understanding of the multidisciplinary needs of older adults and the role dental professionals play in providing care to this population. With the ever-increasing population of older adults in the community, this course will address physical and psychological changes associated with aging as well as the identification and management of common oral conditions of the elderly.

GERI 532. Geriatric Dentistry III (1) Fall. This course will address clinical concerns when working with medically compromised older adults. Common oral conditions and their management will be discussed. Other topics include, but are not limited the role of caregivers in providing daily oral care; identifying early signs of cognitive impairment; optimal oral health techniques; and the roles and responsibilities of oral health professionals.

GERI 551 and GERI 552. Extramural Geriatric Clerkship I and II (10 Fall/10 Spring). General Requirements: Interest in order adults and the medically compromised; satisfactory academic performance.

This clinically-based program provides selected students with opportunities to provide care to medically compromised and older adult institutionalized and non-institutionalized dental patients. Sites include the Baltimore VA, Levindale Hebrew Geriatric Center and other long-term care facilities. A seminar series on related topics is also presented at the Dental School.

GPAT 512. General Pathology (4) Spring. General Pathology covers the morphologic, chemical and physiologic changes of basic disease processes and important specific diseases.

GROW 521. Growth and Development (1) Fall. The course includes general facial characteristics and the underlying developmental mechanisms that determine these characteristics. Students learn to describe the developmental changes that occur in the teeth and the mandible and maxilla during development of the occlusion; developmental changes that occur in the relationships between the teeth, and those that occur in the maxilla and mandible as an individual passes through the stage of development of occlusion; and factors involved in the etiology of malocclusion. Lectures provide

instruction on identifying those factors that influence the development of occlusion, a system of classification of malocclusion, and the etiology of malocclusions in relation to a variety of factors.

IMPL 538. Implant Prosthodontics (1) Fall/Spring. Course topics include treatment planning, imaging, bone grafting in developing an implant site, esthetic considerations, partially and completely edentulous implant restorations and occlusal considerations, and hands-on training sessions.

IMPL 551 and 552. Implant Prosthodontics Clerkship I and II (10 Fall/10 Spring). The course consists of lectures, seminars, journal club, case presentations and clinic. The student is introduced to multiple fixed implant prosthodontics procedures and techniques. Restoration of esthetically involved cases in the anterior zone and complex implant restorations are treatment planned, surgery observed and restorations completed. CT scan evaluation/implant software analysis are introduced.

MICP 511M. Microbiology and Immunology (4) Spring. This course provides students with the fundamental principles of microbiology and immunology to understand the mechanisms of the production of disease by microorganisms and the means by which the host protects itself against them. The clinical immunology portion of the course as well as the case-based conferences are intended to prepare students to synthesize information as it related to clinical care.

MICP 521I. Infectious Diseases (2) Fall. This course provides students with the fundamental principles of microbiology and immunology to understand the mechanisms of the production of disease by microorganisms and the means by which the host protects itself against them. The clinical immunology portion of the course as well as the case-based conferences are intended to prepare students to synthesize information as it relates to clinical care.

NPSC 512N. Neuroscience (3) Spring. The neuroscience course includes a study of neuronal activity and functions ranging from molecular events to neuronal circuitry and neurophysiology. The activities of the nervous system presented include: nociception, discriminative touch and proprioception, special senses, somatic motor control and higher cortical functions. Clinical correlations and therapies are discussed to illustrate the importance of understanding the basis of these functions of the nervous system.

NPSC 512P. Physiology (5) Spring. This course is designed specifically for dental students who have completed courses in biochemistry, histology, gross anatomy and neuroscience at the level appropriate for the DDS degree. Building upon this foundation, the physiology course prepares the developing clinician for courses in pharmacology, pathology, diagnosis, treatment planning and management of the medically compromised patient. An in-depth knowledge of normal function of major organ systems including cardiovascular, renal, respiratory, gastrointestinal and endocrine systems is our goal.

NPSC 518A. Gross Anatomy (7) Fall/Spring. The course in human anatomy is devoted to the study of the structure and function of the body using a regional approach with an emphasis on functional and clinical relevance. It includes the study of the organs and muscles with their relationships, arterial supply, venous and lymphatic drainage, and innervation. Principles of body structure and function are studied with particular emphasis on the head and neck and major organ systems. A strong effort is made to correlate anatomy with other courses in the basic and clinical sciences of the dental curriculum.

NPSC 518C. Clinical Research Conferences (1) Fall/Spring. This biomedical science course encourages the development of life-long learning skills and habits including use of the medical dictionary, the professional literature, health sciences library, and quality internet sites when

researching biomedical and clinical questions. This course provides small group, student-centered learning that is supportive of Year I dental student presentations and discussions as an alternative method of learning (compared to the traditional faculty-centered lecture format).

NPSC 521A. Neuroscience of Pain (2) Fall. This course instructs students on the anatomy, physiology and pharmacology underlying pain and analgesia. The first half of the course provides a fundamental understanding of the Neurobiology of pain processing and analgesic mechanisms. The second half of the course addresses subject matter specific to pain and analgesia in the dental clinic. Students participate in Translational Research Conferences that relate basic science principles to clinical practice.

NPSC 521P. Pharmacology (5) Spring. The first phase of instruction in pharmacology includes a thorough study of the basic concepts and principles of pharmacology. Emphasis is placed on the mechanisms of action, absorption, distribution, metabolism, and excretion of drugs; therapeutic indications; common adverse reactions; and drug interactions. All important classes of drugs used in dentistry and medicine are covered in sufficient detail to provide the student with an excellent preparation for entry into the clinic and for a second phase of training that teaches oral therapeutics, drug interactions, and pain and anxiety control through the participation in the Conjoint Sciences program and in various selective courses.

NPSC 532P. Dental Pharmacotherapeutics (1) Fall. This clinically-oriented dental pharmacology course provides updated information for Year IV students.

NPSC 551 and 552. Research Clerkship I and II (1-10 Fall/1-10 Spring). This elective clerkship is intended to provide students an opportunity to conduct research in biomedical sciences under the guidance of a faculty mentor. Selection of this clerkship requires mutual agreement between the interested student and BMS faculty and is subject to approval by the department.

ODSC 511C. Cell and Molecular Biology (3) Fall. Fundamental and advanced concepts in modern cellular biology, molecular biology and genetics are presented. This is a cross-departmental course that prepares students for the other biomedical science courses in the curriculum and places an emphasis on molecular and human genetics. Topics covered include cellular structure and the roles of cell membranes in transport and signaling, replication and expression of genetic information, molecular biological technologies including genomics and proteomics, and principals of human genetics including the genetics of cancer, genetic tests and gene therapy.

ODSC 511V. Nutrition (1) Fall. This course provides students with basic understanding of the principles of biochemistry and molecular biology. Nutritional guidelines for optimum human health at all stages of life, including dietary reference intakes (DRI), energy requirements and metabolism, and acceptable macronutrient distribution ranges are discussed. Other topics include the essential chemical structure, biochemistry, and metabolic functions of the macro- and micro-nutrients as well as some important non-nutrient components of foods, regulation of gene expression by specific nutrients, drug-nutrient interactions, nutritional immunology, brief review of impact of nutrition of oral health, and assessment of methods of nutritional status.

OHCS 511. Perspectives of Oral Health Care Services (1) Fall. This lecture course introduces Year I undergraduate dental students to the dental profession. Students are exposed to 1) concepts of health, illness, and prevention; 2) the oral health care team of professionals and paraprofessionals; 3) established and emerging modes of oral health care delivery; 4) oral health care needs, demands, and utilization; 5) dental public health; 6) the role of government in dentistry; 7) dentistry from an international and global

perspective; 8) oral health promotion; and 9) health policy.

OMED 521. Oral Medicine (2.5) Fall. This course is designed to aid the student in evaluating the medical, psychological, physical and social status of new and returning patients. As such the student learns to interview and examine patients, analyze these data and determine the need for medical consultation as well as determine the need for additional diagnostic testing. The student has the opportunity to learn physical examination techniques appropriate for the diagnosis of soft and hard tissue pathology other than caries and the periodontal diseases. The course includes discussions of patient confidentiality, infectious hazard control and professional communication.

OMED 551 and OMED 552. Oral Medicine Clerkship I and II (8 Fall/8 Spring). General Requirements: Students must have satisfactory progress in all areas toward completion of graduation requirements, and interest in management of patients with oral diseases.
These elective courses provide selected senior students with clinical and laboratory/research opportunities. Clinical: Gain advanced clinical experience in the oral care of cancer patients (Greenebaum Cancer Center), diagnosis and management of oral lesions in the Oral Medicine clinic, and experiences at the Veterans Affairs Medical Center. Laboratory: Participate in research related to the management of medically compromised patients.

OMIC 512. Oral Microbiology (1) Spring. This course is designed for pre-doctoral dental students. Course content is directed toward conceptual and practical aspects of oral microbiology, especially those encountered in clinical situations, i.e., pathogenesis of microbial diseases affecting the mouth. Topics include: 1) nature of oral biofilms; 2) dental caries; 3) pulpal and periapical infections; 4) periodontal infections; 5) oral antimicrobial agents and microbial resistance; 6) viral infections affecting the mouth; 7) oral yeast infections; and 8) oral malodor.

OPAT 528. Oral Pathology (3) Fall/Spring. Oral Pathology builds upon the basic sciences and general pathology. It includes a study of oral disorders and systemic disorders that cause changes in the head and neck. This is the clinical extension of general pathology.

ORTH 522. Orthodontics (1) Spring. This course provides the knowledge and skills necessary to recognize, analyze and document an established or developing malocclusion. Didactic and laboratory exercises provide a strong foundation for space maintenance and the delivery of limited orthodontic treatment. Specific laboratory projects include performing cephalometric and space analyses, fitting orthodontic bands and positioning and cementing brackets, fabricating a lingual arch and Hawley appliance. This course, in conjunction with the growth and development component of Conjoint Sciences, prepares the student for the clinical years.

ORTH 538. Orthodontics (2) Fall/Spring. This course includes comprehensive lecture, laboratory and clinical components. Lectures include clinical applications of growth and development, diagnosis and treatment planning, bi-mechanics of tooth movement, orthodontics materials as a fundamental underpinning for assessing and treating as part of comprehensive care. Students learn a variety of techniques for space and habit management, and limited corrective orthodontic procedures adjunctive to general practice. These are reinforced in a hands-on laboratory in which students correct tipped molars, minor crowding and spacing. Students are introduced to the basic concepts of management of complex malocclusions and craniofacial deformities and learn to assess case difficulty. In the clinic students provide orthodontic consultations on all pediatric patients and have an opportunity to treat patients requiring limited orthodontic correction through rotations in a clinic dedicated to that purpose. Students also rotate in the postgraduate clinic to gain familiarity with comprehensive orthodontic treatment. A clinical evaluation competency is required.

ORTH 548. Orthodontics (2) Fall/Spring. Students continue to provide orthodontic treatment as part of an adult and child patient's comprehensive dental care through required orthodontic consultations and clinical rotations. A clerkship experience is offered in orthodontics as well as a selective.

ORTH 551 and ORTH 552. Orthodontics Clerkship I and II (2 Fall/3 Spring). General Requirements: Grade point average > 3.2 and a sincere desire to know more about orthodontics and/or pursuing a career in clinical and/or academic orthodontics. Selected Year IV students are expected to participate in both fall and spring semesters.

Experiences include didactic seminars; clinical patient treatment; extramural and intramural rotations; postgraduate rotation; research. Students are exposed to the biomechanics of tooth movement, laboratory procedures including appliance construction and organizational dentistry. They participate in diagnosis and treatment planning via case presentations, and end the year with an orthodontic visit and celebratory dinner.

PEDS 522. Pediatric Dentistry II (1) Spring. This course introduces the dental student to the field of pediatric and adolescent dentistry. The course includes lectures on caries prevention, patient examination, data collection in clinic, rubber dam placement, and restorations. A laboratory component includes preparations in primary teeth for amalgam and composite restoration and for stainless steel crowns. Students apply sealants fluoride varnish and rubber dams in a preclinic session.

PEDS 539. Pediatric Dentistry Elective (3 Fall/3 Spring). Selected Year III students attend lunch time seminars, see patients in the Pediatric Dentistry clinic, attend selected department meetings, and participate in community activities.

PEDS 551 and PEDS 552. Pediatric Dentistry Clerkship I and II (7 Fall/7 Spring). General Requirements: Completion of Year III requirements, above average clinical activity, and strong interest in pediatric dentistry. Selected students are expected to participate in both fall and spring semesters. The clerkship includes advanced clinical experiences (challenging healthy and handicapped patients); operating room experience; graduate seminars; preclinical teaching; case presentation; independent project.

PERI 518. Introduction to Periodontology (2) Fall/Spring. This year one course presents an introduction to the anatomy and histology of the healthy periodontium, its impact on systemic health, and an overview of the clinical discipline of periodontics. Students learn to document a patient's periodontal status for diagnosis while stressing the importance of prevention and maintenance. The course utilizes laboratory simulation and clinical exercises to develop basic skills. Instruction includes instrument design and utilization, patient observation, data collection, scaling and root planing, OHI and polishing teeth. The didactic, clinical, and simulation exercises prepare students to begin supervised periodontal recall and maintenance visits on patients and form a critical foundation for PERI 528, PERI 538 and PERI 548.

PERI 528. Periodontics (2) Fall/Spring. This course reinforces material presented in PERI 518 and forms the foundation for patient treatment in periodontics. The course includes reinforcement of clinical skills introduced in PERI 518. Students treat classmates initially and later treat two periodontal maintenance patients. The following topics are taught in the clinical setting: periodontal data collection; plaque control instructions; periodontal instrumentation; infection control; polishing; and topical fluoride application. Oral cancer screening examinations are performed. Emphasis is placed on microbiology, immunology, diagnosis and treatment planning of periodontal diseases.

PERI 538. Periodontics (10) Fall/Spring. Students have didactic exposure to advanced periodontal procedures, including evidence-based therapy, impact of periodontal disease in the medically compromised patient, occlusal therapy, osseous

grafts and guided tissue regeneration, periodontal plastic surgery, periodontal esthetic management and assessment of disease activity. Clinical activity involves the diagnosis and non-surgical periodontal management of mild/moderate adult periodontitis. Observation of periodontal surgeries is also anticipated.

PERI 548. Periodontics (10) Fall/Spring. Students continue to monitor and manage the periodontal status of their comprehensive patient care population. Experiences include assessment of initial therapy performed and determination of parameters for periodontal surgery. Surgical observations of their patients and complex post-graduate cases are anticipated prior to performing a periodontal surgery. Each student performs a simple periodontal flap surgery. Another focus for this course is the co-therapy program with the senior dental hygiene students. This program mimics the private practice setting allowing interaction with dental hygiene students as co-therapists for the management of the initial therapy of two periodontitis cases.

PERI 551 and 552. Periodontics Clerkship I and II (10 Fall/10 Spring). General Requirements: Cumulative grade point average > 3.0 and minimum of B grade in periodontics 518, 528 and 538. Satisfactory progress toward graduation; three or more ATC's completed. Selected students are expected to participate in both fall and spring semesters.

The clerkship includes diagnosis and treatment of moderate to advanced periodontitis; surgical and non-surgical experience, including antimocrobial therapy, management of maintenance patients, clinical teaching, seminars and case presentations.

PRAC 532. Practice Management I (.5) Spring. The behavioral component of this course includes topics on choosing and staffing a dental practice, informed consent, and patient and staff behavioral practice management. The practice management component includes discussions of the following topics: capital cost, leasehold improvements, operating expenses, working capital, risk, space requirements, marketing, and location preference.

PRAC 542. Practice Management (.5) Spring. This seminar series provides dental students with many of the necessary skills needed to effectively respond to a fast-changing professional environment. The course is a three-session seminar designed to enhance practice administration learning by focusing on the transition from dental school to dental practice. The sessions have been crafted and integrated to provide students with substantive knowledge and material in the topics of business law, accounting, financial record-keeping, business planning, and practice transitions.

PROF 518. Profession/Professionalism I (3) Fall/Spring. Students learn foundational skills needed for entry into the dental profession, including the history and future of dentistry, health communication, and professional and ethical behavior. Topics also include an introduction to dentistry whereby students are exposed to the breadth and scope of careers in dentistry and obtain technical training in skills needed to function in the clinic, including: basic life support, patient confidentiality, and infection control. Didactic and interactive sessions will be reinforced with experiences as part of a clinic team.

PROF 538. Profession/Professionalism III (2) Fall/Spring. Students are recertified for BLS/CPR and receive instruction in dentistry and the law. In small group seminars, students discuss ethical dilemmas. They are required to achieve minimum attendance requirements, attend assigned clinical sessions and/or arrange for coverage of clinical assignments, if necessary. In academic and clinical settings students are expected to behave in a respectful, professional manner in their interactions with peers, patients, faculty and staff.

PROS 551 and PROS 552. Prosthodontics Clerkship I and II (10 Fall/10 Spring). General Requirements: Academic performance; demonstrated interest and ability in prosthodontics;

interest and motivation in esthetic dentistry; recommendation of discipline supervisor. Selected students are expected to participate in both fall and spring semesters.

The clerkship includes demonstrations, seminars and clinic. The student is introduced to multiple fixed and removable prosthodontic procedures and techniques. Esthetic techniques including bonding all ceramic crowns, porcelain laminates, microabrasian and vital bleaching. There is an emphasis on esthetic evaluation. Implant restorations are treatment planned, surgery observed, and restorations completed.

RADI 518. Radiology (1.5) Fall/Spring. This preclinical course presents an overview of methods and technology used to image the oral and maxillofacial region. The lectures cover the following topics: an introduction to intraoral radiographic techniques; methods of capturing the image; radiation physics principles of radiation safety; biologic effects of ionizing radiation; and quality assurance.

RADI 528. Radiology II (1.5) Fall/Spring. The second year course in radiology presents an overview of methods and technology used to image and diagnose the oral and maxillofacial region. Lecture topics include principles of radiographic interpretation; evaluating the quality of images; imaging errors, appropriate viewing conditions, and the value of various radiographic examinations. Interpretive topics encompass developmental and environmental influences on the teeth and supporting structures, dental caries, periodontal disease, pulpal/periapical inflammation. The radiographic appearances of benign, malignant and traumatic disease of the oral and maxillofacial structures are presented.

RADI 538. Radiology III (2) Fall/Spring. Developing clinicians apply principles of imaging and radiation safety toward selecting and taking the most appropriate radiographic examination to make accurate diagnoses and formulate a patient-centered treatment plan. The principles of radiographic interpretation, image quality, appropriate viewing conditions, and the value of alternative radiographic views are emphasized. Students become proficient in intraoral and panoramic radiographic technique and in interpretive topics including developmental and environmental influences on the teeth and supporting structures, dental caries, periodontal disease and pulpal/periapical inflammation. Students make clinical judgments and effectively apply problem-solving skills in a clinical environment with patient contact. They explain to dental patients the principles of radiation safety, imaging technique and radiographic findings at the level appropriate for a knowledgeable health care professional.

RADI 548. Radiology IV (1) Fall/Spring. This course is the application of radiographic technique and interpretation in a clinical environment. Developing clinicians refine their skills while functioning as leaders in a clinical team applying principles of imaging and radiation safety toward selecting and taking the most appropriate radiographic examination to make accurate diagnoses and formulate a patient-centered treatment plan. Year IV students model the principles of radiographic interpretation, image quality, appropriate viewing conditions and the value of alternative radiographic views while directing Year II students in intraoral and panoramic radiographic technique and in interpretive topics.

REST 528. Fixed Prosthodontics (7) Fall/Spring. The course establishes a basic understanding of fixed partial prosthodontics and develops the skills necessary to complete the treatment and laboratory procedures with predictable, consistent success. Principles involved in making both individual restorations and fixed partial dentures are taught. The course includes different types of preparations for teeth, the fabrication of temporary restorations, impression techniques, the construction of working casts of these preparations, and the fabrication of single restorations and fixed partial dentures.

REST 528A. Operative Dentistry I (1) Fall/Spring. Students receive didactic and clinical instruction in single tooth restorations. This course includes diagnosis, decision-

making and treatment planning on single tooth restorations and the clinical placement of these restorative materials. Esthetics and esthetic bonding is also part of this course.

REST 528C. Partial Denture Prosthodontics (3) Spring. The course provides didactic and laboratory instruction in the fabrication of removable partial denture prostheses. Course material includes classification and biomechanics, RPD components, surveying, design, mouth preparation, occlusion, master casts and laboratory work authorizations.

REST 529A. Treatment and Management of the Edentulous Patient (3) Fall. The course is an introduction to the management of the edentulous patient. Topics include impression making, jaw relations, denture occlusion, immediate dentures and an introduction to dental implants. The format includes lectures, briefings, and laboratory simulations.

REST 538A. Operative Dentistry (6) Fall/Spring. The course in operative dentistry instructs students in the concepts of prevention, diagnosis, treatment planning and treatment for pathologies in teeth. Lecture format and online instruction include case studies of these conditions and the dental materials and techniques used to treat these conditions. One section of the course provides the current concepts in esthetic treatment with bleaching and bonded restorations for anterior and posterior teeth. Didactic instruction is then applied in clinical treatment of patients. Competencies in aspects of operative dentistry, diagnosis, and treatment are assessed with patient based examinations.

REST 538B. Fixed Prosthodontics (6) Fall/Spring. This course has both didactic and clinical components. The didactic portion is a continuation of REST 528 with emphasis on clinical application. In the clinical portion, students fabricate crowns, fixed partial dentures and other fixed prosthesis.

REST 538C. Removable Prosthodontics (7) Fall/Spring. The didactic portion of this course is a continuation of REST 529A and REST 529B with emphasis on clinical application. In the clinical portion, students fabricate complete dentures and partial dentures and other removable prosthesis.

REST 548A. Operative Dentistry (5*) Fall/Spring. This year IV course provides instruction in developing the skills and concepts previously learned. On a selected basis, students work in more advanced clinical techniques in esthetic and operative dentistry. Online materials are available to prepare students for these more advanced clinical techniques. Didactic instruction from the third year course and online course materials are applied in clinical treatment of patients. Competencies in aspects of operative dentistry, diagnosis, and treatment are assessed with patient based examinations.

REST 548B. Fixed Prosthodontics (10*) Fall/Spring. This Year IV course is a continuation of Year III Fixed Prosthodontics where students provide comprehensive care in the general practice clinics. Students not only complete single tooth crowns, but restore edentulous spans with either fixed partial dentures or single tooth implants. Competency is assessed with both simulation and patient based examinations.

REST 548C. Removable Prosthodontics (8*) Fall/Spring. This year IV course is a continuation of Year III Removable Prosthodontics where students provide comprehensive care in the general practice clinics. Students fabricate complete dentures, removable partial dentures and interim dentures. Competency is assessed with a patient based examination.

SPTC 532. Special Patient Care (1) Spring. Lectures provide instruction on dental management of the patient with special needs.

SPTC 551 and 552. Special Patient Clerkship I and II (10 Fall/10 Spring). General Requirements: Demonstrated interest in treating handicapped patients; superior clinical skills; above average academic performance. Selected students are expected to participate in both fall and spring semesters.
The clerkship course includes an individually tailored clinical program providing care for special patients; significant surgery,

prosthetics, and conscious sedation experiences available. A seminar series on related topics is also included.

TMDC 551 and 552. TMD Clerkship I and II (4 Fall/4 Spring). General Requirements: No clinical deficiencies; must be in the top one-half of the class academically; special interest in TMD (temporomandibular dysfunction) with some limited experience.

These elective courses provide selected students with an opportunity to work in the TMD clinic. TMD clerks treat and diagnose TMD patients and assist other students with their TMD patients.

TXPL 528. Treatment Planning II (1) Spring. Course topics include charting and documentation as related to periodontal disease, caries risk, esthetics, radiographic evaluation, decision making, and sequence of treatment.

TXPL 538. Treatment Planning III (6) Fall/Spring. This course includes a didactic portion and a clinical portion. Course topics include more complex dental and medical cases, treatment of urgent patient needs, and sequencing of complex treatment plans. The course covers work-ups, preparation, and presentation of oral diagnostic findings, prosthodontic aspects, and periodontal aspects of treatment plans.

TXPL 548. Treatment Planning IV (2) Fall/Spring. This course is a continuation of clinical treatment planning described in TXPL 538.
TXPL 551. Treatment Planning Clerkship I and II (6 Fall/6 Spring). Students in this program participate in scheduled seminars and provide access to care by screening and treatment planning pregnant patients in a funded program.

*Credits are reduced for students in General Practice Simulation Clinics
*Curriculum requirements are subject to change without prior notice.*

# DEPARTMENTS AND PROGRAMS

## CLERKSHIP PROGRAM

Elective clerkships allow selected fourth-year students to pursue further studies in departmental activities specially designed to meet their needs and interests. Students devote a portion of their clinic time to these specialized programs; the remaining clinic time is spent in the comprehensive treatment of patients in the regular program. Clerkships are available in basic science and clinical disciplines, and several incorporate off-campus clinical experiences in various practice settings.

## CLINICAL DENTISTRY

The clinical education program is designed to fulfill competency-based criteria by providing each student with a broad background of clinical experience based on the philosophy of prevention and comprehensive patient care. Although the need for the treatment of existing disease is of paramount importance, the clinical program stresses long-term complete dental care founded on preventing the occurrence or recurrence of disease. Each student provides patient care in a general practice in a manner similar to practitioners in the community.

Clinical areas for predoctoral instruction are designated primarily for general practice teams. Clinical instruction is accomplished using dentist-managers, general dentists and specialists providing interdepartmental instruction for the student, and the highest level of dental care for the patient. The clinical program functions year round to provide continuity of patient care.

## CLINICAL SIMULATION

Director of Simulation Facilities, Applications, and Research: Gary Hack, DDS
Clinical simulation realistically prepares students for the performance of patient care procedures and is employed in both the undergraduate dental and dental hygiene curricula. As a basis for their performance of finite psychomotor skills, students are introduced to the principles of human-centered ergonomics early in their first year. They learn to derive a posture, position, and process for practice in ways that enable the attainment of occupational health and peak performance

without compromise of task, patient, or self. Students learn to perform dental procedures to high standards of precision, quality, and accountability on lifelike manikins in simulated and real practice settings, before treating patients. This is accomplished in the Dental School's state-of-the-art clinical simulation unit that replicates the features of a dental practice operatory, and the general practice clinics in which patients receive care. Professional skills and habits acquired in realistic clinical simulation ensure student ease, confidence, and competence in their later application to patient care.

## ENDODONTICS, PROSTHODONTICS AND OPERATIVE DENTISTRY

Courses: BMAT 518, FOUN 511, FOUN 518A, BMAT 528, ENDO 522, REST 528, REST 528A, REST 529A, REST 529B, ENDO 538, IMPL 538, REST 538A, REST 538B, REST 538C , ENDO 541, ENDO 548, IMPL 551, IMPL 552 , REST 548A, REST 548B, REST 548C, PROS 551, PROS 552

Associate Professor and Chair, Ashraf Fouad, DDS, MS

The department is responsible for major segments of the predoctoral dental curriculum encompassing endodontics, dental anatomy, occlusion, dental biomaterials, operative dentistry, and fixed and removable prosthodontics. The department also conducts a three-year certificate program in postgraduate endodontics and a three-year certificate program in postgraduate prosthodontics in which students are trained to manage and treat complex prosthodontic patients.

The department has an active research program including the areas of endodontic infections and their relationship to systemic disease, dental materials, nanocomposites, calcium phosphates, regenerative biology, novel methods of controlling tooth sensitivity, evaluation of physical properties of numerous dental materials, and bioactive ceramics.

## HEALTH PROMOTION AND POLICY

Courses: CSLX 518, EBDM 512, OHCS 511, PROF 518, BHAV 528, CARI 521, GERI 522, PEDS 522, PEDS 539, TXPL 528, CCPM 538, DHPP 538P, GERI 532, PROF 538, TXPL 538, CCPM 548, CSLX 548, DHPP 548P, DNTS 548, PRAC 542, TXPL 548, GERI 551, GERI 552, PEDS 551, PEDS 552

Professor and Chair: Norman Tinanoff, DDS, MS

In its teaching, research, and service activities, the Department of Health Promotion and Policy continually develops, evaluates, and disseminates information and methods to meet the needs of the providers and recipients of oral health care. The major areas of teaching responsibility are pediatric dentistry and behavioral sciences for the predoctoral dental program, dental hygiene at the bachelor's and master's levels, and postgraduate pediatric dentistry.

The department conducts research in clinical trials, oral epidemiology, practice administration, quality assurance, behavioral sciences, orofacial pain, geriatric dentistry, oral health services, oral health policy, the study of dental caries in minority populations, effects of preventive interventions on caries in infants and young children, nutrition and oral health, and the evaluation of therapeutic agents through clinical trials.

## MICROBIAL PATHOGENESIS

Courses: MICP 511M, MICP 521I, OMIC 512

Professor and Chair: Patrik M. Bavoil, PhD, Associate Professor

The department conducts multidisciplinary research in microbial pathogenesis, educates students in the biology of oral and other microbial pathogens, and provides service to the Dental School, the University, and the community. Continued development of the department emphasizes integration of its research activities into the graduate and post-graduate programs of the Dental School through a faculty-driven curriculum in interactive classroom settings as well as department-supported research projects.

## NEURAL AND PAIN SCIENCES

Courses: BHAV528, NPSC 512N, NPSC 512P, NPSC 518A, NPSC 518C, NPSC 521A, NPSC 521P, NPSC 532P

Professor and Chair: Joel D. Greenspan, PhD, Professor

This is a research-intensive department focused in the area of neuroscience, with a strong emphasis on the neurobiology of pain. Research initiatives encompass basic, translational, and clinical science programs. Educational missions involve instruction in the Dental School an Graduate School curricula and mentored research training for both pre-doctoral students and post-doctoral fellows.

## ONCOLOGY AND DIAGNOSTIC SCIENCES

Courses: GPAT 512, ODSC 511C, ODSC 511V, RADI 518, OMED 521, OPAT 528, RADI 528, DSCP 538, RADI 538, SPTC 532, DSCP 548, RADI 548, OMED 551, OMED 552, SPTC 551, SPTC 552

Professor and Chair: Li Mao, MD

In addition to providing instruction in radiology, oral medicine, and diagnostic sciences for the predoctoral program, the department presents courses for graduate and postgraduate students and offers programs leading to a certificate in Oral and Maxillofacial Pathology and/or a doctoral degree. Also, graduate training programs are offered in surgical, clinical, and experimental pathology. Research and graduate training are conducted in the pathobiology of cancer, connective tissues, stress proteins, developmental biology, dental management of medically compromised patients, prevention of infection in immunocompromised patients, evaluation of drugs to treat bacterial and fungal infections of the oral cavity and the role of viruses in cancer and its treatment.

## ORAL AND MAXILLOFACIAL SURGERY

Courses: DANS 521, DSUR 522, DSUR 538, DSUR 541, DSUR 548, DSUR 551, DSUR 552

Professor and Chair: Robert A. Ord, DDS, MD, MS

The department provides instruction in the second, third and fourth years of the predoctoral program. A Year IV clerkship elective in Oral-Maxillofacial Surgery provides students an opportunity to perform more advanced dentoalveolar surgery and participate more fully in surgical care at the University of Maryland Medical Center. The postgraduate program in oral-maxillofacial surgery includes training at the University of Maryland Medical System and University of Maryland Dental School.

Research is conducted in chemoprevention of oral carcinoma and pain management techniques. The department is also involved in evaluation of analgesics for postsurgical pain control and tumor immunology.

## ORTHODONTICS

Courses: GROW 521, ORTH 522, ORTH 538, ORTH 548, ORTH 551, ORTH 552

Chair: Stuart D. Josell, DMD, M Dent Sc

Predoctoral instruction in orthodontics provides a strong foundation for delivery of limited orthodontic treatment as part of an adult and child patient's comprehensive dental care. Clerkship and other elective opportunities are available for those who wish to pursue additional course work and clinical experience. The postgraduate program prepares students for specialty certification by the American Board of Orthodontics. The department conducts research in growth and development, experimental and diagnostic imaging, the biology of tooth movement, properties and biocompatibility of orthodontic materials, and the physiology of facial musculature.

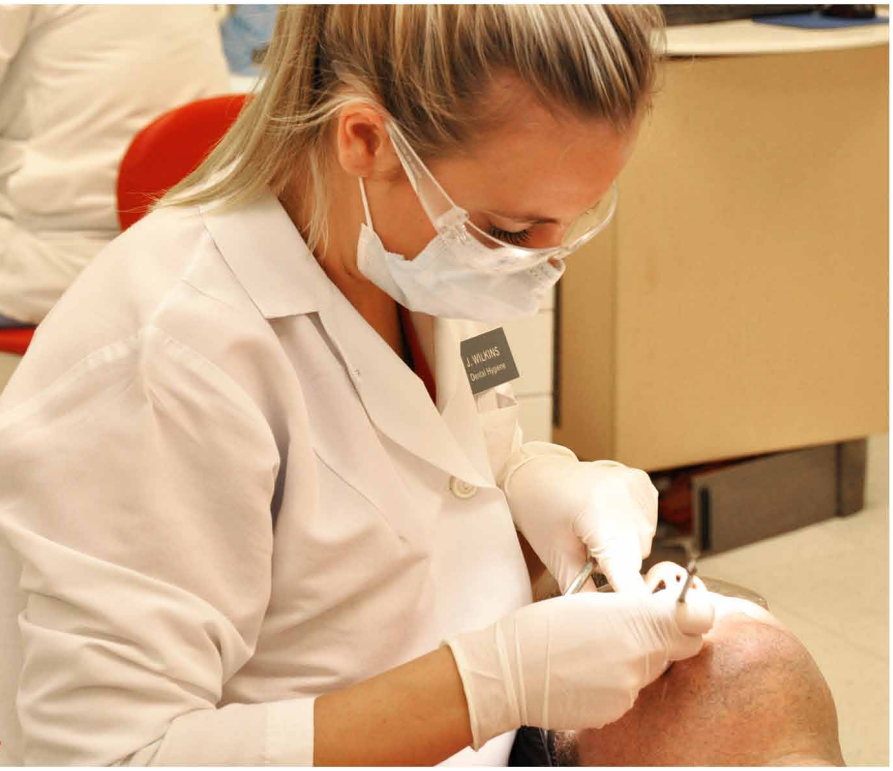
## PERIODONTICS

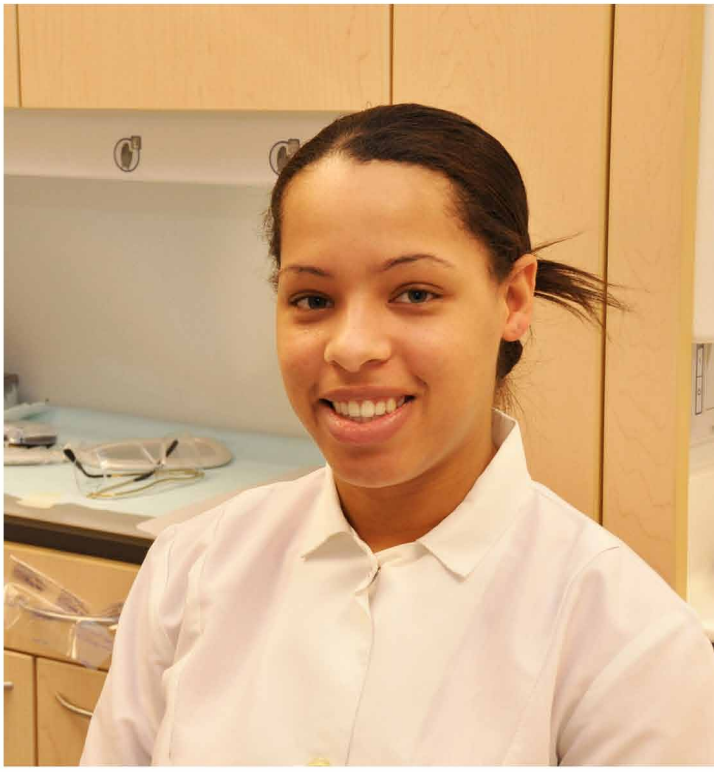
Courses: PERI 511, PERI 518A, PERI 528, PERI 538, PERI 548

Professor and Chair: Mark A. Reynolds, DDS, PhD

The department provides instruction in periodontics for predoctoral and postgraduate students. Interested students have the opportunity to choose from a broad range of additional experiences and research opportunities.

The department conducts research in regenerative therapy, microbial genetics, chemotherapeutic agents, periodontal pathogens, implantology, and biostatistics.





# DENTAL HYGIENE PROGRAMS



Baltimore College of Dental Surgery • Dental School • University of Maryland, Baltimore

{650 West Baltimore Street Baltimore, MD 21201}

## GENERAL INFORMATION

The Dental School offers both a Bachelor of Science and a Master of Science in Dental Hygiene. The baccalaureate degree can be earned in one of two educational programs: the Preprofessional/Professional Program (entry-level program) and the Degree Completion Program (for students who already are RDH's). The objective of both baccalaureate programs is to imbue the students with the knowledge, skills, attitudes, and values needed to assume positions of responsibility in a variety of health care, educational, research, and community settings. In addition, these programs are designed to provide a foundation for graduate study in dental hygiene or related disciplines.

The dental hygienist, as a member of the oral health care team, strives to improve oral health by providing preventive, therapeutic, and educational services to the public. Clinical dental hygiene services include assessing patients' general and oral health status and correlating oral and systemic findings, conducting periodontal and caries evaluations, removing deposits and stains from teeth, making radiographic images, evaluating patient outcomes, conducting oral cancer screenings, and applying fluorides and sealants. Educational and management services for individuals and/or groups may include tobacco use, prevention, and cessation; providing nutritional and oral hygiene counseling; conducting educational programs; and planning, implementing, and evaluating community oral health programs.

## MISSION

The mission of the Baltimore College of Dental Surgery, Dental School, University of Maryland, Baltimore is to improve the quality of life in Maryland through education, research and service related to health, with special emphasis on improving dental, oral and craniofacial health.

In support of this mission, the Dental Hygiene Program educates future leaders in the profession by offering undergraduate and graduate programs in dental hygiene. The Program provides continuing education for dental and dental hygiene professionals, conducts research relevant to dental hygiene education and practice, and disseminates this knowledge. The Program also provides high quality oral health care services to residents of Maryland and the region, and provides consultative and other services to governmental and private agencies, professional organizations and the community through the leadership and expertise of its faculty and contributions of its students. The Program endeavors to recruit, retain and develop high quality, productive faculty who accept responsibility for advancing knowledge in the field of dental hygiene. Faculty foster intellectualism and offer a professional education for dental hygiene students that embodies excellence and relevance. The faculty strives to prepare graduates who can provide dental hygiene services with competence in any setting in accordance with ethical codes of the profession and statutory provisions for dental hygiene practice.

## EMPLOYMENT OPPORTUNITIES IN DENTAL HYGIENE

The majority of dental hygienists are employed in private dental offices. However, there are increasing opportunities for those with baccalaureate and graduate degrees; other opportunities are available in community, school, and public health programs; private and public institutions; armed forces; research; private industry; and other special areas of practice.

Current dental hygiene graduates working full-time can anticipate initial annual income of approximately $60,000, depending on the geographic area, responsibilities, type of practice, and general economic conditions.

## ACADEMIC POLICIES

### GRADING POLICIES

#### Clinical Grading Criteria

The computer grading program is designed to reflect the following grade definitions:

Evaluation Criteria:

Clinical grading is based on the following scale:

H (Honors) - Represents a high level of performance with difficult cases – no improvements necessary
P (Pass) - Represents acceptable to high level performance with minimally to moderately complex cases – minimal to no improvements necessary.
F (Fail) - Represents unacceptable level of performance, significant improvements are necessary

## Classroom Grading Criteria

The criteria that will be utilized to determine a grade will be specified in each course syllabus. Most courses use the following scale; numerical grades are entered for clinical competencies; the scale is as follows:

## Grading Scale

| | |
|---|---|
| A | 93-100 |
| B | 84-92 |
| C | 75-83 |
| D | 66-74 |
| F | below 66 |

## Grades at the Time of Withdrawal

The following grades are used when students withdraw after the beginning of the course:

WD - Withdraw: This grade indicates withdrawal during the first half of the course.

WP - Withdraw Pass or WF - Withdraw Fail: This grade denotes student performance to date when withdrawal occurs ***after the first half*** of the course.

1. Information related to the grading criteria for each course is stated in the course syllabus that is distributed at the onset of the course. Clinically-related dental hygiene courses must be passed with a C grade or better. A grade of D is considered passing for DHYG 410, 420, 414, 416, 425, and 427.

2. A failed course may be repeated once. If the course is not passed the second time, the student will not be able to continue in the entry level program.

3. Students must register and pay tuition for repeated courses. The original course and grade remain on the transcript but the grade is excluded from the grade point average when the course is repeated.

4. I grade: An "I" (incomplete) is entered when students have not completed all course requirements (e.g. course extends beyond due date for grade submission, missing exam or assignment). In the event course work is not completed by the end of the following semester, the "I" will be changed to an F (failing) grade. This policy does not apply when a student fails a course and needs to retake it in a subsequent semester.

## Academic Retention and Advancement

At mid-semester and at the end of each semester, the Dental Hygiene Progression Committee meets to review the progress of each student. The committee is composed of members of the Dental School administration, dental and dental hygiene faculty. The Progression Committee utilizes the following policy guidelines in making their decisions.

## General Guidelines

1. The Progression Committee may conditionally advance to the next semester students who are required to remediate or repeat a course or component.

2. When a student demonstrates continued unsatisfactory progress toward meeting course or degree requirements, the Progression Committee may recommend to Faculty Council that the student repeat courses or be dismissed. (See Academic Probation, pg 43)

3. Students may appeal actions of the Progression Committee and the Faculty Council by writing to the Dean of the Dental School stating their justification for the appeal. The

Dean may request the Progression Committee to reconsider its decisions and recommendation.

4. All preprofessional courses must be completed by the end of the spring semester prior to enrolling in the program. Sixteen (16) to twenty (20) of the science credits MUST be complete at the end of the fall semester prior to enrollment. It is the student's responsibility to ensure that all preprofessional course credits have been properly transferred and recorded on their UMB transcript.

5. Degree Completion students must ensure that off-campus course transcripts are sent to UMB and properly recorded on their UMB transcript. They must also ensure that all transfer credits are recorded on their UMB transcript.

### Remediation

1. Remediation may be provided to enable students to master course content in a course. The course faculty will identify specific areas for remediation.

2. Students may be permitted to remediate without alteration to their schedule, providing the remediation can be accomplished concurrently with the student's course load.

3. A specific schedule for completion of remediation will be developed by the respective course director. A copy of the remediation plan will be given to the division director, course coordinator, faculty and student. A copy of the plan will be placed in the student's division file.

4. Original exam and/or assignment grades will be used to calculate the course grade.

### Special Scheduling

1. Students in the three-year curriculum have individualized schedules that incorporate the Professional Curriculum courses in three academic years.

2. Students who are required to repeat one or more courses may be placed on a modified curriculum plan. This plan will be based on appropriate course sequencing for clinical and didactic courses.

3. Students on modified curriculum plans may require additional semesters to complete the program.

### Academic Probation

A student earning a semester GPA below a 2.0 or receiving a course grade of a D or an F will be placed on academic probation for the following semester. The Progression Committee and Faculty Council may recommend that a student who is on academic probation for two semesters be dismissed from the Dental Hygiene Program.

Students who are not making satisfactory academic progress may be subject to reduction of financial aid. Policies and procedures are available from the Director of Financial Aid.

### Policy for Appeal of Advancement Decisions

### Appeals Process

The following guidelines have been established to review appeals of decisions made by the Dental Hygiene Progression Committee, or in cases of dismissal, decisions made by the Faculty Assembly. This mechanism will not be used to dispute the published advancement guidelines which have been approved by the Faculty Council.

1. A student wishing to appeal an advancement or dismissal decision must initiate the appeal process within 5 working days of receiving written notification from the Office of Academic Affairs regarding Progression Committee decisions, or from the Dean regarding dismissal decisions made by the Faculty Assembly. In this written appeal, the student must present evidence of compelling additional information or extenuating circumstances not previously considered and the reason why the information was not previously presented. The written appeal must include: the decision the student is appealing; the specific basis for the appeal, including appro-

priate supporting documentation; and the academic status that the student is requesting. The student may present and prioritize more than one alternative.

2. The appeal, which must be submitted in writing to the Associate Dean for Academic Affairs and Student Affairs will be reviewed by a panel composed of the Associate Dean for Academic Affairs and Student Affairs and the Chair of the Dental Hygiene Progression Committee.

3. The review panel will determine whether the student's written appeal meets the criteria outlined above. Should the panel determine that an appeal lacks the required evidence, the appeal will be denied. In these circumstances, there is no further appeal.

4. Should the panel determine that an appeal meets the required criteria outlined above, the panel will forward the appeal to the Progression Committee for its consideration.

5. The Dental Hygiene Progression Committee will meet within ten working days, when possible, of receiving the initial appeal request from the review panel.

6. The Committee will issue a written decision within five days of its meeting, when possible. The Committee's decision is final and there is no further appeal. The Committee's decision shall be forwarded to the Faculty Council for information.

## Attendance

Students are expected to be in all assigned clinics whether or not a patient is scheduled. If a student does not have a patient, options for volunteer blocks are described in the clinical course outlines.

It is the student's responsibility to notify the Division of Dental Hygiene office, 410-706-7773, when he/she will not be able to attend a mandatory class or clinic. The student must contact patients and cancel appointments as soon as he/she knows he/she will be unable to attend a clinic session.

Students are required to complete an absence form (available from the DHYG Administrative Assistant, Room 2102) for all absences and schedule make up of work missed. Course specific attendance policies are described in each course syllabus.

## Registration

Students must register for coursework each semester in order to maintain degree candidacy. The Dental School Office of Academic Affairs distributes specific information about registration prior to registration dates.

Those students who advance register and subsequently decide not to attend must notify both the Dental Hygiene Program and the Office of Academic Affairs prior to the first day of classes.

If the Office of Academic Affairs has not been notified by 4:30 p.m. of the last day before classes begin, it is assumed that the student plans to attend and the student assumes financial obligations for that semester.

Students may advance-register on-line through the Student UseR Friendly System (SURFS). After classes begin, students who wish to add/drop or withdraw must follow the university procedures and should contact the Dental Hygiene Office to initiate the process. Students who are registered for classes at other USM campuses must also follow the add/drop and withdrawal procedures at those campuses.

Students will be exempt from campus-sponsored health insurance if they present proof of comparable coverage to the Office of Student and Employee Health once each year. If such proof is not received by the Office of Student and Employee Health, the student will be required to pay for the student policy.

Students who take courses at other USM campuses while enrolled in the Dental Hygiene Program must register at both UMB

and the other campus. Inter-campus registration forms may be obtained from the Office of Academic Affairs.

All courses taken at other institutions that are to be used toward graduation requirements must be documented via official transcripts submitted to the Office of the Registrar. Each student must assume responsibility for submitting all necessary transcripts.

### Tuition and Fee Payment Policy

UMB's tuition and fees policy stipulates that all tuition and fees are due and payable on or before the due date stipulated on the bill issued by the Office of Student Accounting. Any student who does not make payment to the Cashier's Office by the due date may be denied class attendance.

Students will not be permitted to register (advance or arena registration) if they have outstanding bills. Students who are not officially registered may not be permitted to attend any classes or clinics.

### Degree Requirements

1. A minimum of 120 credits* is required for graduation from both the entry-level and Degree Completion BS programs.
2. A cumulative grade point average of 2.0 is required for graduation.
3. All courses must be passed according to course/program guidelines.
4. A diploma application must be filed with the Director of Records and Registration, University of Maryland Baltimore before the stated deadline in order to receive the diploma at Commencement.

### Withdrawal

Should a student desire or be compelled to withdraw from the School at any time, she/he must:

1. Arrange an appointment to meet with the Department Chair and Program Director.
2. Write a brief letter to the Department Chair and Program Director explaining the reason for withdrawal.
3. Secure a withdrawal form from the Department Chair and obtain the appropriate signature from the Associate Dean for Academic Affairs and Student Affairs, Dean's Office, Dental School.
4. Submit the signed withdrawal form to the Office of Academic Affairs, Dental School.

### Readmission to the Dental Hygiene Program

Subsequent to dismissal or withdrawal for academic deficiencies, with extenuating circumstances, readmission may be sought by reapplication to the Dental Hygiene Program. In order to initiate the readmission procedure, the former student shall submit a letter, with supporting documents, (current application, etc.) indicating the reasons for reconsideration, to the Office of Admissions and Career Advancement, requesting readmission to the Dental Hygiene Program. Students dismissed for violations of the Professional Code of Conduct are ineligible for readmission.

Once the letter of application has been processed by the Office of Admission and Career Advancement, the Committee on Dental Hygiene Recruitment and Admissions will consider the student for readmission. The process of reconsideration will or may include a careful review of the student's academic record, a study of the reasons for readmission, an assessment of the student's potential for academic progress in the future, and consultation with the appropriate departments, the advancement committee, and administrative and non-administrative faculty members within the Dental School. Recommendations relative to the readmission will be referred to the Committee on Dental Hygiene Recruitment and Admissions in conjunction with the Office of Admissions and Career Advancement for final decision and notification, including conditions for readmission, where appropriate. Decisions resulting from due process of this policy are not subject to appeal.

## DENTAL HYGIENE PROGRAMS

### PREPROFESSIONAL/PROFESSIONAL BACCALAUREATE PROGRAM

This program consists of two main parts: a two-year preprofessional curriculum at one of the University of Maryland campuses or at another accredited college, community college or

university, and a two- or three-year professional curriculum at the Dental School, University of Maryland.

## TWO-YEAR PREPROFESSIONAL CURRICULUM

A listing of the courses and credit hour requirements for the preprofessional curriculum follows. These courses provide a foundation in basic sciences, social sciences, and general education. Students are encouraged to contact with the dental hygiene advisor each semester to ensure appropriate course scheduling.

| Notes | Courses | Credit |
|---|---|---|
| | English Literature | 3 |
| | English Composition | 3 |
| * | Inorganic or General Chemistry | 4 |
| * | Organic Chemistry | 4 |
| | General Biology | 4 |
| | General Psychology | 3 |
| | General Sociology | 3 |
| | Public Speaking | 3 |
| * | Human Anatomy and Physiology I, II | 8 |
| * | Microbiology | 4 |
| | Principles of Nutrition | 3 |
| ** | Humanities | 3 |
| *** | Social Sciences | 6 |
| | Statistics | 3 |
| | Technical Writing | 3 |
| | Total Curriculum Credits | 57 |

* These courses must include a laboratory and meet the requirements for science majors. Survey or terminal courses for non-science majors are not acceptable for transfer.

** Humanities: Courses must be selected from the following areas: literature, philosophy, history, fine arts, speech, math, or language.

*** Social Sciences: General psychology and sociology are required; the remaining six credits should be selected from courses in psychology, sociology, computer science, government and politics, or anthropology.

## APPLICATION AND ADMISSION PROCEDURE

High school students who wish to enroll in the preprofessional curriculum should request applications directly from the admissions office of any of the University of Maryland campuses or any accredited college, community college, or university. It is recommended that those preparing for a baccalaureate degree in dental hygiene pursue an academic program in high school that includes courses in biology, chemistry, algebra, and social sciences. Applicants should note the University of Maryland policy concerning prevention and management of student and employee infection with bloodborne pathogens, page 81, and the Dental School's technical standards for admission and matriculation, page 82. In addition, individuals who have a prior or subsequent conviction or nolo contendre plea for a felony may encounter denial or removal of licensure to practice dental hygiene after graduation.

## TWO-YEAR PROFESSIONAL CURRICULUM

The professional curriculum includes clinical and didactic courses in the Dental School. Throughout these two years, dental hygiene students work concurrently with dental students to provide patient care.

During the first year, students expand on their preprofessional basic science knowledge as it pertains to dental hygiene practice. In both laboratory and clinical settings, the students begin to develop the skills, knowledge and judgment necessary to collect data for patient treatment; assess each patient's oral health status; and select and provide preventive, therapeutic, and educational services based on the individual needs of the patient.

During the second year, students demonstrate increasing proficiency and self-direction in assessing patients' oral health status, planning and providing clinical services and identifying the need for consultation and referral. To enrich their educational experiences, students provide educational and/or clinical services in Dental School specialty clinics and a variety of community settings, such as hospitals; schools; and facilities for the handicapped, chronically ill, and aged. Dental hygiene students also have an opportunity to work with dental students as primary providers for the physically disabled, mentally handicapped, and individuals with serious medical conditions or infectious diseases. Senior students also

take courses in education, research, and management that enable them to develop fundamental skills that are necessary for various career options within the profession.

## DENTAL HYGIENE CURRICULUM

| Junior Year | | Semester 1 Credit |
|---|---|---|
| DHYG 311 | Prevention and Control of Oral Disease I | 6 |
| DHYG 312A | Head and Neck Anatomy | 3 |
| DHYG 312H | Oral Histology and Embryology | 1.5 |
| DHYG 312M | Microbiology | 1.5 |
| DHYG 314 | Periodontics for the Dental Hygienist I | 3 |
| DHYG 316 | *Oral Radiology I | 2 |
| | | 17 |

* This course extends into the January winter season

| Junior Year | | Semester 2 Credit |
|---|---|---|
| DHYG 321 | Prevention and Control of Oral Disease II | 5 |
| DHYG 323 | Care and Management of the Special Patient | 2 |
| DHYG 324 | Methods and Materials in Dentistry | 2 |
| DHYG 326 | Oral Radiology II | 2 |
| DHYG 327 | Periodontics for the Dental Hygienist II | 2 |
| DHYG 328A | General and Oral Pathology | 3 |
| DPHR 325 | General Pharmacology and Therapeutics | 3 |
| | | 19 |

| Senior Year | | Semester 1 Credit |
|---|---|---|
| DHYG 322 | Community Oral Health | 3 |
| DHYG 411 | Advanced Clinical Practice I | 5 |
| DHYG 412 | Perspectives of Dental Hygiene Practice | 3 |
| DHYG 413 | Community Service Learning I | 2 |
| DHYG 416 | Introduction to Oral Health Research | 3 |
| | | 16 |

| Senior Year | | Semester 2 Credit |
|---|---|---|
| DHYG 414 | Educational Program Development | 2 |
| DHYG 425 | Issues in Health Care Delivery | 2 |
| DHYG 421 | Advanced Clinical Practice II | 5 |
| DHYG 427 | Health Care Management | 2 |
| | | 11 |
| | Total DH Curriculum Credits | 63 |

## THREE-YEAR PROFESSIONAL CURRICULUM OPTION

Although most students complete the professional curriculum in two years as outlined, a three-year professional curriculum option is offered. This three-year plan is a modification in the sequence and number of professional courses taken each semester. This curriculum can be an attractive option for students who may wish to lighten their academic load due to family or work commitments. Students admitted to this curriculum must have the recommendation of the program advisor and approval of the admissions committee. Students enrolled in this curriculum may not have full-time status for one or more semesters of the program. This may influence their eligibility for financial aid and student insurance discounts.

## APPLICATION AND ADMISSION PROCEDURES

College students enrolled in the preprofessional curriculum should communicate regularly with the dental hygiene Admissions Director at the Dental School to ensure that the courses selected satisfy the degree requirements. Applications can be obtained online on the Dental School Admissions website. Applications for enrollment in the fall semester at the Baltimore campus are accepted from November 1 to February 11. Courses must be completed at the end of the semester prior to enrollment.

A minimum grade point average of 2.9 in the preprofessional curriculum is required, and preference will be given to those students who have high scholastic averages, especially in science courses. A science grade point average of 3.0 is generally encouraged for acceptance.

Enrollment at another University of Maryland campus or completion of the preprofessional curriculum does not guarantee admission to the professional curriculum at the Dental School. Enrollment in the dental hygiene program is limited.

Students who are offered admission will be required to send a deposit of $200 with a letter of intent to enroll. This deposit will be credited toward tuition at registration, but will not be refunded in the event of failure to enroll.

## PROJECTED AVERAGE EXPENDITURES

In addition to the expenses of tuition and fees listed on the Student Accounts website, junior dental hygiene students (depending on site and specific program) should estimate spending $1,800 on instrument service, uniforms, and supplies and $600 on textbooks. Senior dental hygiene students should estimate spending $1,500 on instrument service and supplies, $300 on textbooks and $600 on regional and national board examination fees. Field experiences in both the junior and senior years may entail additional costs for travel and/or parking at sites outside the Dental School.

## GRADUATION REQUIREMENTS

Candidates for the Bachelor of Science degree in dental hygiene must complete the preprofessional and the professional curricula as outlined. Students must achieve a cumulative grade point average of 2.0, complete a total of 120 credits, and satisfy all financial obligations to the University to be eligible for graduation.

## NATIONAL AND REGIONAL BOARD EXAMINATIONS

Clinical and comprehensive written examinations are given in the spring of the senior year. Successful completion of these exams is necessary to obtain a license to practice dental hygiene.

## COURSES

DHYG 311. Prevention and Control of Oral Disease I (6). The basic foundation for clinical dental hygiene practice as it relates to the Dental Hygiene Process of Care. Emphasis is placed on dental hygiene care including: treatment planning, oral health education for the patient and provision of dental hygiene services. Simulation and clinical experiences provide the opportunity for practical application of the principles and procedures for the identification, prevention and control of oral diseases. Small group, audiovisual and on-line activities enhance the didactic portion of this class.

DHYG 312A. Head, Neck, and Dental Anatomy (3). This on-line course presents the basic concepts and structures of head and neck anatomy. A detailed module on dental anatomy is also included. Emphasis is placed on those subjects relevant to clinical practice. Specifically, the student utilizes the knowledge and understanding of this subject matter within the clinical environment.

DHYG 312H Oral Histology & Embryology (1.5). This on-line course presents material through the technological medium, Blackboard, that allows students to progress at their own pace through a series of modules. It includes a detailed presentation of head and neck histology in addition to a review of basic histology. The subject matter includes a review of basic tissues; the embryologic development of the face and oral cavity; odontogenesis; tooth enamel, dentin, cementum and pulp; periodontal ligament and alveolus, and tooth eruption and shedding of primary teeth.

DHYG 312M. Microbiology (1.5). As most oral diseases have microbiological etiologicies, it is important that the dental hygienist understand how they develop, how the oral microorganisms cause tissue disruption, and how to best manage the diseases. This module begins with general ecological principles involving oral microorganisms, dental plaque and other oral biofilms and continues with prevalent oral diseases, dental caries and periodontal diseases.

DHYG 314. Periodontics for the Dental Hygienist I (3). This online course provides a foundation in the normal, healthy components of the Periodontium and a study of the etiology, microbiology, pathogenesis, and clinical changes that occur in the periodontal diseases. This course presents an introduc-

tion to the roles of local contributing factors, host-immune response, systemic diseases, and patient assessment in the classification, disease progression, prognosis, and treatment of periodontal diseases. The role of the dental hygienist in the clinical assessment, data collection, and oral health care education of the patient is stressed throughout this course.

DHYG 316. Oral Radiology I (2 ). A hybrid online course including lecture and laboratory activities. Students are introduced to the history and science of ionizing radiation (including types of radiation; characteristics, sources, production, interaction with matter; and biologic response); X-ray film, equipment, and processing; film mounting and introduction to interpretation; digital image receptors, scanners, and templates; X-ray techniques; shadow casting principles; processing and handling errors; radiation protection and regulations; guidelines for prescribing dental radiographs; and, quality assurance. Students gain experience exposing, mounting, assessing the diagnostic quality of and interpreting radiographs. The rationale for and practices to ensure radiation safety are stressed throughout the course.

DHYG 321. Prevention and Control of Oral Diseases II (5). The study of principles and procedures for the prevention of oral diseases, including dental health education, oral hygiene measures, dietary control of dental disease, use of fluorides, sealants, and the oral prophylaxis are presented in lecture, discussion, and clinical sessions.

DHYG 322. Community Oral Health (3). Methods of determining community oral health status, identifying barriers to optimum health, and selecting appropriate interventions are presented concurrently with community program planning activities. The course emphasizes the role of the dental hygienist in community oral health.

DHYG 323. Care and Management of the Special Patient (2). Through classroom discussion, reading assignments, and independent study, students develop an understanding of the care and management of special patients for whom routine care may be complicated by age or complex health factors.

DHYG 324. Methods and Materials in Dentistry (2). An introduction to the science of dental materials, including the composition and utilization of dental materials as they apply to clinical dental hygiene procedures, dental assisting, and patient education, is presented in lecture, class discussion, and laboratory format.

DHYG 326 Oral Radiology II (2) Lecture, laboratory, and clinical activities aid students to use descriptive terminology and radiographic concepts to identify normal and abnormal anatomic structures seen on periapical, panoramic and extraoral radiographs (images); and identification of restorations; dental materials and foreign objects; dental caries; periodontal disease; trauma, pulpal and periapical lesions. Students gain competency in exposing, assessing and interpreting diagnostic quality radiographs (images). Students manage patients with diverse radiographic needs to help provide comprehensive patient care.

DHYG 327. Periodontics for the Dental Hygienist II (2). The study of the diseases of the periodontium focusing on the management, therapeutics, and prevention of periodontal diseases is presented through lecture and classroom discussion.

DHYG 328A. General and Oral Pathology (3). This is a lecture, clinical pathologic conference format course. The course includes an overview of general pathology, emphasizing the main features of various forms of disease. The diagnostic process and the recognition of numerous head and neck disorders follow the overview.

DPHR 325. General Pharmacology and Oral Therapeutics (3). The study of drugs and their use in the treatment, diagnosis, and prevention of disease; the absorption, distribution, metabolism, excretion, and mechanism of action of drugs; and drug interactions, rationale for use, indications, and contradictions are presented through Internet and class discussion. Emphasis is placed on the relevance of this information to providing patient care.

DHYG 411-421. Advanced Clinical Practice I and II (5-5). Clinical experiences in principles and procedures of dental hygiene practice are provided in general practice clinics through both recall and co-therapy treatment programs with dental students. Students may participate in alternative practice settings through block assignments to dental specialty clinics within the School. Students also participate in translational cases with dental students and prepare and present their own patient case. Honors sections of DHYG 411 and 421 are offered for selected students.

The honors section of DHYG 411 begins the summer before the senior year and is designed to prepare students for patient treatment in the postgraduate periodontal clinic. During the summer, honors students treat patients under the supervision of a dental hygiene graduate student and attend weekly seminars on clinical dental hygiene issues. Students utilize concepts discussed in seminar while in summer clinic and have the potential to fulfill fall requirements. At the conclusion of the summer session, students are scheduled in the postgraduate periodontal clinical on a bi-weekly basis where they are exposed to clinical experiences beyond what is available in the generic course.

Students in the honors section of DHYG 421 continue in the postgraduate periodontal clinic on a biweekly basis. They work closely with a dental hygiene faculty member and periodontal residents on complex cases from initial therapy through the maintenance phase of treatment. In addition to gaining experience and fulfilling DHYG 421 requirements, students enrolled in the honors section experience the role of dental hygiene educator by mentoring junior dental hygiene students in clinic. The honors program incorporates multiple levels of education from the junior dental hygiene student to the postgraduate resident while exposing honors students to various dental hygiene career options prior to graduation.

DHYG 412. Perspectives of Dental Hygiene Practice (3). This course is designed to provide senior and degree completion students with the opportunity to explore, develop, and apply advanced concepts and skills within the process of dental hygiene care. The course has three units: Periodontics, with an emphasis on the perio/systemic link; Pain and Anxiety Control, including local anesthesia and discussion of other advanced technologies used in dental hygiene service delivery; and new technologies in Dental Hygiene Care.

The course includes an introduction to case presentations and case conferencing. It broadens the student's perspective of dental hygiene practice as it exists across the country and incorporates concepts taught in class into clinical practice.

DHYG 413-423. Community Service Learning I and II (2-2). The externship program provides opportunities for senior students to select experiences beyond those given within the Dental School setting. The selection of a community site is based on the student's interests and career goals. Sites include well-baby clinics, prenatal clinics, community health centers, nursing homes, senior citizen centers, facilities for the handicapped, hospitals, military clinics and schools, day care centers, public health departments, and research centers. (DHYG 423 is optional.)

DHYG 414. Educational Program Development (2). Students explore various ways in which effective instructional skills may contribute to a career in dental hygiene. Learning experiences are designed to enable the student to develop these skills and to project their application in such areas as public school systems, community health programs, higher education, and consumer education.

DHYG 416. Introduction to Oral Health Research (3). This course is designed to acquaint students with research methodology and its application to the dental hygiene profession. Emphasis is placed on heightening student awareness of the need for dental hygiene research, developing student capabilities to identify research designs, and enabling students to accurately appraise the quality of research reports.

DHYG 418 or 428 Practicum (1-4)

Section 01. Designed to provide the degree completion student with opportunities to explore diverse roles of dental hygienists in the health care system, seek advanced knowledge and skills necessary to participate in these roles, and focus their interest in their chosen professional role through teaching, service-learning, observation, hands-on experience and most critically, self-directed learning. A Capstone project is the culmination of the activities conducted for each practicum course and is commensurate with the credit hours selected by the student.

Section 02. This course is optional for entry-level and degree completion students. Students pursue in-depth topics of special interest. The program of study is designed by each student and approved by DH faculty before the beginning of the course. The study program may relate to an area of interest in clinical dental hygiene, education, management, research, or other approved healthcare-related topic and may consist of special reading assignments, reports, conferences, and possibly clinic, laboratory, or extramural experience.

DHYG 418 Practicum I and DHYG 428 Practicum II (1-4).

Sections 01. Designed to provide the degree completion student with opportunities to explore diverse roles of dental hygienists in the health care system, seek advanced knowledge and skills necessary to participate in these roles, and focus their interest in their chosen professional role through teaching, service-learning, observation, hands-on experience and most critically, self-directed learning. A Capstone project is the culmination of the activities conducted for each practicum course and is commensurate with the credit hours selected by the student.

DHYG 424. Special Topics (1-4) This course is optional for entry-level and degree completion students. Students pursue in-depth topics of special interest. The program of study is designed by each student and approved by DH faculty before the beginning of the course. The study program may relate to an area of interest in clinical dental hygiene, education, management, research, or other approved healthcare-related topic and may consist of special reading assignments, reports, conferences, and possibly clinic, laboratory, or extramural experience.

DHYG 425. Issues in Health Care Delivery (2). Students examine and analyze the issues that affect the broad spectrum of health care delivery. Topics include ethics and professional responsibility, inequities in health care delivery, and health care legislation. Students have the option to present research posters on timely oral health topics.

DHYG 427. Health Care Management (2). Students are introduced to skills essential for effective management in their personal and professional roles. Areas of emphasis include the dental team environment, managerial planning and decision-making, fiscal issues, career planning, resumes, and interviewing. Management principles are applied to a variety of oral health care delivery settings.

## DEGREE COMPLETION BACCALAUREATE PROGRAM

The degree completion program provides the opportunity for registered dental hygienists who hold a certificate or associate degree to pursue studies leading to a Bachelor of Science degree in dental hygiene. The curriculum is designed in two phases of full-time (one-year) or part-time (two years) study to meet each individual's academic, clinical, and career interests.

## PROGRAM REQUIREMENTS

Phase I: General Requirements. Phase I consists of the student's previous dental hygiene courses and general course requirements, totaling 90 semester credits. General course requirements for the baccalaureate degree may be taken at any one of the three University of Maryland campuses (College Park, Baltimore County, or Eastern Shore) or at another accredited college or university. The courses required are the same as those listed in the Preprofessional Program freshman

and sophomore years, except only one chemistry and one anatomy/physiology course is required. Transfer credits are granted for general requirements and dental hygiene courses from an accredited program. To obtain transfer credit, students must attain a grade of C or better in all courses taken at an institution outside the University System of Maryland. Consultation with the degree completion program director regarding transfer courses is recommended.

Phase II: Degree Completion Requirements. The degree completion program at the Dental School consists of two core seminars totaling six credit hours (DHYG 410, 420); senior level didactic courses, totaling 8-12 credit hours (DHYG 412, 414, 416, 424 [optional], 425, and 427); 2-8 hours of practicum courses (DHYG 418-428); 2 credits (DHYG 426 or DHYG 603) electives; and 6-12 credit hours of approved academic electives, generally taken at another campus of the University of Maryland. Additional variable credit practicum courses may be taken for elective credit.

## CURRICULUM PLANNING

Registered dental hygienists should submit to the degree completion program director transcripts from their dental hygiene program and all other institutions attended, so that transfer credits may be evaluated and a program developed to satisfy remaining requirements. Students should meet regularly with the advisor to ensure appropriate course scheduling.

## APPLICATION AND ADMISSION PROCEDURES

In addition to meeting the general course requirements, the student applying for admission to the degree completion program at the Dental School must:

- Be a graduate of an accredited dental hygiene program.
- Be licensed in at least one state.
- Have a minimum grade point average of 2.5.

Applications for admission may be obtained from:

The Office of Admissions and Career Development
Dental School, University of Maryland
650 West Baltimore St., Room 6402
Baltimore, MD 21201

Applications should be received no later than May 1 before the fall semester for which the student wishes to enroll. Enrollment at another University of Maryland campus does not guarantee admission to the degree completion program at the Dental School. Enrollment in the degree completion program is limited. Students who are offered admission will be required to send a deposit of $200 with a letter of intent to enroll. This deposit will be credited toward tuition at registration, but will not be refunded in the event of failure to enroll.

## STUDENT EXPENSES

Tuition and fees are listed on the Student Accounts website. The charges for instrument service, supplies, and uniforms are not applicable for degree completion students. Textbook costs would be considerably lower than listed.

## GRADUATION REQUIREMENTS

One hundred twenty (120) semester credit hours are required for the Bachelor of Science degree in the degree completion dental hygiene program. The last 30 credit hours toward the baccalaureate degree must be taken at the University of Maryland. Courses not offered at the Dental School may be taken at another University of Maryland campus.

## COURSES

DHYG 412, DHYG 414, DHYG 416, DHYG 424

DHYG 410. Seminar in Dental Hygiene I (3) (degree completion only). Reinforcement, updating and expansion of dental hygiene professional skills, knowledge, and attitudes. Topic areas that are explored through seminar, formats include dental public health, preventive dentistry, process of dental hygiene care and options for dental hygiene practice. Emphasis is placed on developing oral and written communi-

cation skills necessary for the dental hygienist in a variety of health care, educational, research or community settings.

DHYG 420A Seminar in Dental Hygiene II (3) (degree completion only). This course is a hybrid online course that is designed to stimulate degree completion students' interest in a wide range of dental hygiene career settings. Through interaction with guest speakers, and class participation, the students will have opportunities to explore important issues affecting dental hygiene practice and gain an understanding and appreciation of dental hygiene roles in nontraditional settings. Course content focuses on the understanding and utilization of business management skills to enhance personal and career development, professional ethics and its application to business environment, career planning, team building, and leadership development.

DHYG 418-428. Dental Hygiene Practicum (1-4/1-4)*. Individually designed didactic and/or clinical experiences in a special area of dental hygiene clinical practice, teaching, community dental health, or research.

DHYG 426. Scientific & Professional Communication (2) (elective - degree completion only; course rotates availability in spring semester). This course is designed to develop students' writing skills to prepare them for scientific publication. Emphases are on report writing, lucid and concise communication, rules of grammar and syntax and preparation for meeting presentations.

DHYG 603. Issues in Health Promotion and Disease Prevention (2)*. (elective for degree completion ; required for graduate M.S. in Dental Hygiene; rotates availability in spring semester). This course explores issues in oral health care delivery related to health promotion and disease prevention. Topics will include how patient and provider ethnicity, socioeconomic status, education, and cultural competence affect health, illness and the delivery of care. Social, psychological and economic impacts of oral conditions and treatments will be discussed. The current state of general health and oral health in the United States, including oral health disparities, will be addressed.

*Elective variable credit course that requires approval of degree completion program director.

## APPLICATION/ADMISSION

All applicants for specialty and residency programs must hold the DDS, DMD, or equivalent degree, and must give evidence of high scholastic achievement. All programs require a supplemental application, official transcripts of undergraduate and dental school coursework and three letters of recommendation. Requirements regarding National Board examinations vary by program. Applicants who are not citizens or permanent residents of the United States must present evidence of mastering English as a foreign language (a minimum score of 550 on the TOEFL examination is required), and must provide evidence of financial support for their studies. Further, graduates of non-U.S./non-Canadian dental schools may be required to furnish a translation and evaluation, in English, of their academic record by a certified agency. Individual specialty training programs may impose additional requirements as indicated within their program descriptions.

Applications to the programs in advanced education in general dentistry, oral and maxillofacial surgery, orthodontics and pediatric dentistry must be made through the Postdoctoral Application Support Service (PASS). Applications to programs in endodontics, orthodontics, periodontics and prosthodontics should be made directly to the Dental School. Applications for the program in oral and maxillofacial pathology are submitted to the graduate school.

To be interviewed and considered for admission to an advanced education program in general dentistry, oral and maxillofacial surgery, orthodontics and pediatric dentistry, applicants must participate in the National Matching Service.

The endodontics, periodontics, and prosthodontics programs do not participate in the National Matching Service and make offers directly to applicants.

Students intending to pursue a Master of Science or Doctor of Philosophy degree must submit a separate application to the Graduate School.

*The application deadlines vary by program.*

Before applying to the Dental School, potential applicants should note the University of Maryland policy concerning prevention and management of student and employee infection with bloodborne pathogens and the Dental School's technical standards for admission and matriculation. In addition, although the admissions process does not include questions concerning any prior criminal activity, individuals who may have had a prior or subsequent conviction or nolo contendre plea for a felony may encounter denial or removal of licensure.

All requests for applications and additional information pertaining to specialty and residency programs should be directed to:

Advanced Dental Education Programs
Office of Admissions and Career Advancement,
Rm. 6407
Baltimore College of Dental Surgery
Dental School, University of Maryland
650 West Baltimore Street
Baltimore, MD 21201

The Dental School's Web home page provides current information about all programs and admissions requirements. All requests for applications or information pertaining to the graduate programs should be directed to:

University of Maryland Graduate School Baltimore
621 West Lombard Street, Room 336
Baltimore, MD 21201

# SPECIALTY PROGRAMS

## GENERAL INFORMATION

Advanced Specialty Education certificate programs are designed to provide successful candidates eligibility for examination by the appropriate specialty boards. Programs of 24 months each are offered in endodontics and pediatric dentistry. The programs in orthodontics, periodontics, prosthodontics, and oral and maxillofacial pathology are 36 months' duration; and the oral and maxillofacial surgery residency/MD program extends over a period of six years. Qualified applicants for advanced specialty education programs may seek dual enrollment as candidates in combined certificate/degree programs. Successful candidates receive a certificate in a clinical specialty from the Dental School and a Master of Science in Biomedical Sciences or the PhD in Biomedical Sciences or Oral and Maxillofacial Pathology from the University of Maryland Graduate School. All programs are accredited by the Commission on Dental Accreditation, the Commission on Recognition of Postsecondary Accreditation and the U.S. Department of Education.

## FACILITIES

All specialty programs except oral and maxillofacial surgery use individual operatories on the third floor of the Dental School in an area designated Advanced Specialty Clinics. Programs provide conference rooms for students and maintain appropriate laboratory and research facilities. Students have access to the Health Sciences and Human Services Library on the campus as well as the National Library of Medicine in Bethesda, Md. Also available within the Dental School is an Independent Learning Center where students may use materials in a variety of media. The program in oral and maxillofacial surgery is based in the University of Maryland Medical Center, a large metropolitan teaching hospital adjacent to the Dental School.

## FINANCIAL SUPPORT

Stipends for postgraduate candidates may be available on a limited basis. Information regarding the extent of these stipends can be obtained by writing to individual program directors.

## REQUIREMENTS FOR CERTIFICATION

A certificate of training is awarded to candidates who have satisfied all requirements of the program and have paid all debts to the University. Selected students in joint certificate and graduate programs who enter into a training agreement are required to complete the requirements of both programs before a certificate is awarded.

## ACADEMIC STANDARDS FOR CERTIFICATION

In the evaluation of postgraduate student performance, the following letter grades are used:

| | |
|---|---|
| A, B, C | passing |
| F | failing |
| I | incomplete |

Students must maintain an overall B average. A course in which a grade of less than B is received may be repeated at the discretion of the department. The grade in the repeated course, whether it is higher or lower than the original grade, replaces the original grade. All failing and incomplete grades must be removed before a certificate is conferred. A course with an incomplete grade does not have to be repeated, but the requirements of the course must be satisfied before a certificate is conferred.

Further, students must demonstrate clinical competency in all areas of patient management and treatment. Any student who fails to meet these academic standards in a given semester may not be permitted to continue in the program.

# ENDODONTICS

## Objectives

- To train dentists to become specialists in the field of endodontics with the objective of pursuing careers in endodontics in private practice, academics, or health related fields.
- To provide the resident with an in-depth background in the basic sciences as related to endodontics and to have the graduate integrate this background into the practice of endodontics.

- To provide advanced education and training in the field of endodontics that is consistent with the standards provided by the American Dental Association's Commission on Dental Accreditation.
- To provide an environment that will prepare residents to design, conduct, analyze, and discuss scientific research investigation.
- To provide the resident an atmosphere that fosters the appreciation of the importance and advantages of membership and participation in organized dentistry.
- To prepare residents to become Diplomates of the American Board of Endodontics.
- To provide an environment conducive to evidence-based practice and life-long learning.

## Scope of Training

The program integrates both biological and clinical sciences. Lectures, seminars, and literature reviews cover diagnosis, treatment planning, treatment objectives, and a variety of topics related to endodontics and to dentistry in general. Students attend professional meetings and continuing education courses held within the University and in the Baltimore-Washington area. The heaviest concentration of basic science material is in the first year of study. During that year, the student is expected to choose a research topic and to write a protocol for presentation to the faculty and other graduate students. The results of this research are presented at a special seminar in the last semester of study and, if possible, at a national meeting. Interspersed with the basic science courses are a variety of clinical courses supervised by trained specialists from a variety of backgrounds. The second year and third years emphasize clinical endodontics including conventional treatment, retreatment, management of emergencies, endodontics and surgery. Residents devote a significant amount of time and effort to complete their research projects. Also, appropriate time is devoted to clinical teaching during this year.

## Site of Training

The major training site is at the Dental School, including the Special Patient Clinic. However, rotations at the Veterans Affairs Medical Center are also included in the Endodontic program.

## Number of Positions

Three

## Full-Time Faculty:

Ashraf F. Fouad, BDS, DDS, MS, Head, Department of Endodontics, Prosthodontics and Operative Dentistry; Diplomate, American Board of Endodontics; Director, Postgraduate Endodontics

Priya Chand, BDS, MS, Dental School Assistant Professor

## Part-Time Faculty:

Ali Behnia, DDS

Derek Ego-Osuala, DDS, MS

Steven Delgado, DDS

Tawana Feimster, DDS

M. Lamar Hicks, DDS, MS

Lina Jarboe, DDS

Stanley Klein, DDS

Martin Levin, DDS

Mao Lin, DMD, MS

Stephen Littman, DDS

Fernando Meza, DMD

Anastasia Mischenko, DDS, MS

Julian Moiseiwitsch, BDS, PhD

Alan Nevins, DDS

Glenn Schermer, DMD

S. Craig Schneider, DDS

Howard Schunick, DDS

Ronald Taylor, DDS

## Special Admission Guidelines

- High scholastic achievement.
- Clinical experience weighted heavily.
- A personal interview is desirable.

## Length of Program

36 months, Certificate with Master's degree

# ENDODONTICS CURRICULUM

## Year I

| | | |
|---|---|---|
| ENDO 558A | Graduate Conjoint Seminar | 2 |
| ENDO 567A | Emergencies in Endodontics | 9 |
| ENDO 567B | Advanced Case Analysis | 2 |
| ENDO 568A | Fundamentals of Endodontics | 2 |
| ENDO 568B | Treatment Planning Seminar | 4 |
| ENDO 569A | Clinical Endodontics | 42 |
| ENDO 569B | Endodontic Techniques | 3 |
| ENDO 578B | Research in Endodontics | 6 |
| ENDO 588A | Biological Basis of Endodontic Therapy | 6 |
| ENDO 589L | Topical Literature Review | 6 |
| ENDO 598A | Current Endodontic Literature | 6 |
| ENDO 599A | Special Topics | 2 |
| DBMS 605 | Scientific Writing | 1 |
| DBMS 608 | Intro to Biomedical Science Research | 1 |
| DBMS 618 | Special Topics in Immunology, Sec 08 | 1 |
| DBMS 618 | Special Topics in Micro, Sec 04 | 1 |
| DBMS 628 | Advanced Head and Neck Anatomy | 4 |
| DBMS 633 | Anatomy Temporomandibular Joint, Sec 02 (fall 2010) | 1 |
| DBMS 638 | Biostatistics | 3 |
| DBMS 642 | Nociception, Pain, and Analgesia | 2 |
| DPAT 612 | Oral Pathology Problems | 2 |
| DPAT 613 | Oral Pathology Problems | 2 |
| DSUR 569B | Physical Diagnosis | 4 |

## Year II

| | | |
|---|---|---|
| ENDO 558C | Graduate Conjoint Seminar | 2 |
| ENDO 567D | Advanced Case Analysis | 2 |
| ENDO 568C | Clinical Emergencies in Endodontics | 12 |
| ENDO 568D | Treatment Planning Seminar | 4 |
| ENDO 569C | Advanced Clinical Endodontics | 36 |
| ENDO 569D | Pedagogical Techniques in Endodontics | 2 |
| ENDO 578D | Research in Endodontics | 6 |
| ENDO 588C | Biological Basis of Endodontic Therapy | 6 |
| ENDO 589M | Topical Literature Review | 6 |
| ENDO 598C | Current Endodontic Literature | 6 |
| ENDO 599C | Special Topics | 2 |
| DBMS 618 | Special Topics in DBMS/Microbiology, Sec 04 | 2 |
| DBMS 628 | Adv Head & Neck Anatomy (Lab 09-10) | 2 |
| DBMS 799 | MS Research | 2 |
| PERI 587A | Contemporary Implant Dentistry | 3 |

## Year III

| | | |
|---|---|---|
| ENDO 558E | Graduate Conjoint Seminar | 2 |
| ENDO 567E | Advanced Case Analysis | 2 |
| ENDO 568E | Treatment Planning Seminar | 4 |
| ENDO 569E | Advanced Clinical Endodontics | 36 |
| ENDO 577E | Pedagogical Techniques in Endodontics | 2 |
| ENDO 578E | Research in Endodontics | 6 |
| ENDO 588E | Biological Basis of Endodontic Therapy | 6 |
| ENDO 589E | Topical Literature Review | 6 |
| ENDO 598E | Current Endodontic Literature | 6 |
| DBMS 636 | Pharmacology of Anesthetic Drugs | 3 |
| DBMS 799 | MS Research | 4 |
| DPAT 616 | Advanced Histopathology | 3 |
| DPAT 617 | Advanced Histopathology | 3 |

# ORAL AND MAXILLOFACIAL SURGERY

## Objectives

- To prepare individuals for a career in the specialty of oral and maxillofacial surgery.
- To fulfill educational requirements for specialty certification by the American Board of Oral and Maxillofacial Surgery.
- To fulfill the requirements for specialty training of the Commission on Dental Accreditation.
- To fulfill fellowship requirements set forth by the American Association of Oral and Maxillofacial Surgeons.
- To fulfill the educational requirements for the MD degree and licensure.
- To fulfill the educational requirements for general surgery internship program completion.

## Scope of Training

### Six Year Track

During the first year, students enter residency training in oral and maxillofacial surgery at the University of Maryland Medical System and University of Maryland Dental School. Students participate in clinical exodontia procedures and other dentoalveolar surgery. They attend patient rounds, oral pathology seminars, a course in physical diagnosis with the second-year medical students, combined surgical-orthodontic conferences, implant conferences, and they are assigned a two-month, off-service rotation with the Department of Anesthesiology at the University of Maryland Medical System.

During the second and third years of the residency, the oral and maxillofacial surgery residents will enter the University of Maryland School of Medicine at the level of the third year of medical school. The residents are required to pass the U.S. Medical Licensing Examination (USMLE) Step I before entering medical school. The residents are undergraduate medical students for the next two years. At the end of the third year of the program the trainees will graduate with an MD degree after they have successfully achieved all medical school requirements.

In the fourth year of residency, the resident will enter a one-year internship in general surgery at the University of Maryland School of Medicine. This one-year period of training will qualify the resident to obtain medical licensure in most states. During this period, the trainee will gain experience in both general medical management of the surgical patient and in principles of general surgery with rotations in trauma surgery, plastic surgery, neurosurgery, and surgical intensive care.

The fifth year of the residency program is at University of Maryland Medical System and the Dental School. Fifth-year residents perform complex ambulatory surgery in the surgery clinics of the Dental School and University of Maryland Medical Center. In addition, fifth-year residents are introduced to major maxillofacial surgery procedures in the operating room. Trainees attend all departmental conferences and receive advanced instruction in oral and maxillofacial surgery. Research is considered an important factor, and all trainees are required to participate in a research project during the fifth year, suitable for presentation at the American Association of Oral & Maxillofacial Surgeons annual meeting and eventual publication. Fifth-year residents generally attend at least one regional conference of interest to oral and maxillofacial surgery.

The sixth year of residency is at the University of Maryland Medical System and the Shock Trauma Center. The chief residents are responsible for the direction of the surgical team on their service and for the care of hospitalized patients. The chief resident functions as first assistant for all of the operating room surgical procedures performed during the year. During this year, residents participate in all conferences held by the department and continue their research projects. Generation of at least one publication or presentation of an abstract at the AAOMS annual meeting is expected.

### Four Year Track

During the first year, students enter residency training in oral and maxillofacial surgery at the University of Maryland Medical System and University of Maryland Dental School.

Students participate in clinical exodontia procedures and other dentoalveolar surgery. They attend patient rounds, oral pathology seminars, a course in physical diagnosis with other dental residents, combined surgical-orthodontic conferences, implant conferences, and they are assigned a four-month, off-service rotation with the Department of Anesthesiology and a two-month rotation with the Department of Internal Medicine at the University of Maryland Medical System and Baltimore Veterans Affairs Hospital respectively.

During the second year, residents are assigned to a two-month rotation at the Shock Trauma Center and a four-month rotation with the Department of General Surgery (one-month each of intensive care, plastic surgery, emergency surgery and surgical oncology). The remaining six months is spent with the oral and maxillofacial surgery service at a more senior level. The second year resident serves as the primary resident at the Sinai Hospital of Baltimore taking call and operating the trauma and elective cases done there.

The third year of the residency program is at University of Maryland Medical System and the Dental School. Third-year residents perform complex ambulatory surgery in the surgery clinics of the Dental School and University of Maryland Medical Center. In addition, third-year residents participate in major maxillofacial surgery procedures in the operating room. Trainees attend all departmental conferences and receive advanced instruction in oral and maxillofacial surgery. Research is considered an important factor, and all trainees are required to participate in a research project during the third year, suitable for presentation at the American Association of Oral & Maxillofacial Surgeons annual meeting and eventual publication. Third-year residents generally attend at least one regional conference of interest to oral and maxillofacial surgery.

The fourth year of residency is at the University of Maryland Medical System and the Shock Trauma Center. The chief residents are responsible for the direction of the surgical team on their service and for the care of hospitalized patients. The chief resident functions as first assistant for all of the operating room surgical procedures performed during the year. During this year, residents participate in all conferences held by the department and continue their research projects. Generation of at least one publication or presentation of an abstract at the AAOMS annual meeting is expected.

### Site of Training

During the course of the program, students will rotate through training sites at the Dental School, University of Maryland Medical System, Shock Trauma Center, Sinai Hospital, and the intramural faculty practice. Optional off-service rotation to other institutions in the United States will be considered on an individual basis.

### Facilities

Training sites are all fully equipped for the performance of both routine and complex oral and maxillofacial surgical assessment and management.

### Number of Positions

- Three residency positions per year (2 six year positions; 1 four year position)

### Full-Time Faculty

Robert A. Ord, DDS, MD, FRCS, FACS, Chair, *Diplomate, American Board of Oral-Maxillofacial Surgeons*

John F. Caccamese, DMD, MD, FACS, Program Director, *Diplomate, American Board of Oral-Maxillofacial Surgeons*

Jaime Brahim, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*

Andrew Salama, DDS, MD, *Diplomate, American Board of Oral-Maxillofacial Surgeons*

Gary Warburton, DDS, MD, *Diplomate, American Board of Oral-Maxillofacial Surgeons*

### Part-Time Faculty

Stewart A. Bergman, DDS, MS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*

Larry Bryant, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Vincent DiFabio, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
John Emmett, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Dwayne Everett, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Paul German, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Katherine Hashimoto, DDS
Borek Hlousek, DMD, MD, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Julius Hyatt, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Richard Nessif, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Irving Raksin, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Saul Schweber, DDS, *Diplomate, American Board of Oral-Maxillofacial Surgeons*
Bethany Serrafin, DDS, Eligible, *American Board of Oral-Maxillofacial Surgeons*
Cornelius Sullivan, DMD, *Diplomate, American Board of Oral-Maxillofacial Surgeons*

### Special Admission Guidelines

- Applicants should rank in the upper 15 percent of their dental class.
- Letter of recommendation from dental school chairperson or program director of oral and maxillofacial surgery.
- A formal interview is required before acceptance of candidates.
- In accordance with University of Maryland School of Medicine policy, applicants to the combined OMS-MD program must be U.S. or Canadian citizens.

### Length of Program

Six years (72 months), including two years at the University of Maryland School of Medicine, and one year in general surgery internship at the University of Maryland Medical System.
Four years (48 months), including one year of rotations on various medical services.

## *ORAL AND MAXILLOFACIAL PATHOLOGY

Refer to graduate programs.

## ORTHODONTICS

### Objectives

- To prepare students for a career as an orthodontist in clinical practice and/or academics.
- To allow individuals to obtain substantial experience in clinical care, teaching and research.
- To fulfill the educational requirements for specialty certification by the American Board of Orthodontics.

### Scope of Training

Students gain experience in the treatment of patients with all types of dentofacial deformities. A broad mastery of alternative techniques with different variations of the Edgewise appliance is emphasized, along with modern forms of removable appliances. Treatment is provided for adults, adolescents, and children. Students also provide orthodontic treatment in complex rehabilitation cases in coordination with graduate students in prosthodontics, periodontics, endodontics, and pediatric dentistry. Surgical orthognathic cases are treated in conjunction with oral and maxillofacial surgery residents at the University of Maryland Medical System.

Through an extensive series of lectures, seminars, and case conferences, a comprehensive didactic background in relevant basic sciences and clinical orthodontics is provided. Each student, working with faculty supervisors chosen from the Dental School and University, must complete an original research project.

While pursuing a certificate in orthodontics, students are enrolled in a Master of Science degree program in biomedical

sciences. Courses taken for the master's degree also satisfy some certificate requirements. Students also serve as instructors in the predoctoral didactic, pre-clinical and clinical programs.

## Site of Training

Most of the clinical and didactic program takes place within the Dental School. The clinical program is conducted in a modern, eighteen chair clinic. Off-campus experiences include attendance at the craniofacial anomalies clinic at James Lawrence Kernan Hospital and The Johns Hopkins Hospital. The program brings in guest lecturers, and students attend continuing education courses sponsored by the Maryland State Society of Orthodontics, The Middle Atlantic Society of Orthodontists, and the American Association of Orthodontists.

## Number of Positions

Four

## Faculty

Stuart D. Josell, DMD, M Dent Sc, Chair, Postgraduate Program Director
William M. Davidson, DMD, PhD, *Diplomate, American Board of Orthodontics*
Thomas Barron, DMD
Byron Bonebreak, DDS
Ronald S. Branoff, DDS, MSD
Derek Brown, DDS
Stephan Godwin, DMD, DMSc
David Harmon, DDS, MSD
T. Scott Jenkins, DDS
Marston Jones, DDS
Morton Katz, DDS, *Diplomate, American Board of Orthodontics*
Neal Kravitz, DMD
Martin Lang, DDS
Chris Liang, DDS
Phillip S. Markin, DDS, MS, *Diplomate, American Board of Orthodontics*
Richard Marshall, DMD
Richard Mattson, DMD
Nancy O'Neill, DDS
Frederick G. Preis, DDS, *Diplomate, American Board of Orthodontics*
Constance G. Rubler, DDS, MS, *Diplomate, American Board of Orthodontics*
Viney Saini, DDS, *Diplomate, American Board of Orthodontics*
Monica P. Schneider, DDS
Robert T. Scott, DDS, *Diplomate, American Board of Orthodontics*
Stuart Sheer, DDS
John Shefferman, DDS
Steven M. Siegel, DMD
Elizabeth Spannhake, DDS. *Diplomate, American Board of Orthodontics*
Maureen Stone, PhD
Edgar Sweren, DDS, *Diplomate, American Board of Orthodontics*
Carroll Ann Trotman, BDS, MA, MS
Robert E. Williams, DMD, MS, *Diplomate, American Board of Orthodontics*

## Length of Program

Three years

## ORTHODONTICS CURRICULUM

| Year I | | Credit |
|---|---|---|
| ORTH 567A | Treatment Planning Seminar | 1 |
| ORTH 568A | Diagnosis | 4 |
| ORTH 569A | Clinic | 29 |
| ORTH 576A | Typodont | 1 |
| ORTH 577A | Laboratory Technique | 1 |
| ORTH 578A | Case Presentation Seminar | 3 |
| ORTH 579A | Research | 7 |
| ORTH 586A | Literature Review | 1 |
| ORTH 587A | Mixed Dentition Seminar | 2 |
| ORTH 588A | Biomechanics | 2 |
| ORTH 589A | Technique Seminars | 11 |
| ORTH 597A | Ortho-Surgery Seminar | 2 |
| ORTH 598A | Applied Teaching | 3 |
| PEDS 598A | Development of Dentition | 2 |
| PERI 579B | Peri-Orth Seminars | 1 |
| DBMS 605 | Scientific Method/Writing/Ethics | 1 |
| DBMS 608 | Intro to Biomedical Sciences Research | 1 |
| DBMS 618 | Special Topics in Microbiology, Sec. 04 | 1 |
| DBMS 628 | Advanced Head & Neck Anatomy | 4 |
| DBMS 633 | Anatomy Temporomandibular Joint , Sec 02 | 1 |
| DBMS 638 | Biostatistics, Sec 02 | 3 |
| DPAT 612 | Special Problems in Oral Pathology | 2 |
| DPAT 613 | Special Problems in Oral Pathology | 1 |
| Year II | | |
| ORTH 569C | Clinic | 32 |
| ORTH 578C | Case Presentation Seminars | 3 |
| ORTH 579C | Research | 9 |
| ORTH 586C | Literature Review | 1 |
| ORTH 587A | Mixed Dentition Seminar | 2 |
| ORTH 587C | Practice Management | 2 |
| ORTH 589C | Technique Seminars | 5 |
| ORTH 597C | Ortho-Surgery Seminar | 2 |
| ORTH 598C | Applied Teaching | 5 |
| PERI 579B | Peri-Orth Seminars | 1 |
| DBMS 618 | Special Topics/Anatomy/Growth & Devlpmt, Sec 02 | 1 |
| DBMS 618 | Special Topics/Physiology, Sec 06 (Fall-odd yrs) | 1 |
| DBMS 628 | Advanced Head & Neck Anatomy (Lab - 09-10 only) | 2 |
| DBMS 631 | Oral Motor Function, (Spring-odd years) | |
| DBMS 642 | Nociception/Pain Analgesia | 2 |
| DBMS 799 | MS Research | 2 |
| Year III | | |
| ORTH 569E | Clinic | 20 |
| ORTH 578E | Case Presentation Seminar | 3 |
| ORTH 579E | Research | 15 |
| ORTH 586E | Literature Review | 1 |
| ORTH 597E | Ortho-Surgery Seminar | 2 |
| ORTH 598E | Applied Teaching | 15 |
| PERI 579B | Peri-Orth Seminar | 1 |
| DBMS 618 | Special Topics in Physiology/Biomechanics, Sec 06 (Fall-odd yrs) | 1 |
| DBMS 631 | Oral Motor Function, Spring-odd years | |
| DBMS 799 | MS Research | 4 |

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## PEDIATRIC DENTISTRY

### Objectives

- To prepare individuals for careers in patient care, public health, or academics.
- To develop clinical skills in treating normal children with advanced dental needs, as well as growth and development or handicapping conditions.
- To prepare individuals to practice effectively in the hospital environment.
- To fulfill the educational requirements for specialty certification by the American Board of Pediatric Dentistry.

### Scope of Training

Academic course work occupies approximately 20 percent of the postdoctoral students' time and includes case conferences, research methods, orthodontic diagnosis, laboratory technique, literature review, oral pathology, general anesthesia rotation, pediatrics rotation, applied teaching, etc. The residency is based at the Dental School and the University Hospital, with additional experience at Kernan Hospital. Residents provide comprehensive dental care to their assigned

patients as well as have emergency rotations. Residents also participate in conferences with the interdisciplinary medical staffs. Each student is required to complete a research project and prepare two documented cases similar to that required for Board certification. The resident receives a certificate and meets the eligibility requirements for the American Board of Pediatric Dentistry. This program combined with a Master's degree, requiring an additional year, is intended for the clinician who wishes to pursue a career as a teacher/researcher.

## Site of Training

The primary site of training is the Dental School. Other sites include the University of Maryland, Johns Hopkins and Kernan Hospital.

## Facilities

In addition to using the individual private operatories in the Dental School, each postdoctoral student is assigned approximately 20 percent of their time to Kernan's Hospital. The University Hospital and Kernan Hospital are used for rehabilitative dental care to patients receiving general anesthetics.

## Number of Positions

Five

## Faculty

Norman Tinanoff, DDS, MS, Chair

Jillian A. Easton, BDS, MS, Program Director, *Diplomate, American Board of Pediatric Dentistry*

Ronald Ackerman, DDS

Sophia Balis, DDS

James Coll, DMD, MS, *Diplomate, American Board of Pediatric Dentistry*

B. Casey Crafton, DDS, MS, JD, *Diplomate, American Board of Pediatric Dentistry*

Edward Ginsberg, DDS, *Diplomate, American Board of Pediatric Dentistry*

Stuart Josell, DMD, M Dent Sc

Suzan Miller, DDS

Glenn Minah, DDS, MS, PhD

Preston Shelton, DDS, MS, *Diplomate, American Board of Pediatric Dentistry*

Clemencia Vargas, DDS, PhD

Patricia Wunsch, DDS, MS, Dental Director, Kernan Hospital

## Special Admission Guidelines

- Documentation of scholastic achievement and motivation
- Recommendations from individuals well acquainted with the candidate
- Professional experience
- Personal interview

**Length of Program** - Two years (3 years for Master's degree)

## PEDIATRIC DENTISTRY CURRICULUM

| Year I | | Credit |
|---|---|---|
| PEDS 567A | Pediatric Dentistry Orientation | 4 |
| PEDS 569A | Research | 2 |
| PEDS 578A | Case Conference Seminar | 4 |
| PEDS 579A | Special Topics Seminar | 6 |
| PEDS 589A | Clinical Pedodontics | 36 |
| PEDS 598A | Development of the Dentition | 2 |
| ORTH 567A | Treatment Planning Seminar | 1 |
| ORTH 568A | Diagnosis | 4 |
| ORTH 586A | Literature Review | 1 |
| DBMS 605 | Scientific Method/Writing Ethics | 1 |
| DBMS 618 | Special Topics in OCBS/Microbiology, Sec 04 | 1 |
| DBMS 633 | Anatomy TMJ, Sec 02 | 1 |
| DBMS 638 | Biostatistics, Sec 02 | 3 |
| DPAT 612 | Special Problems/Oral Pathology | 2 |
| DPAT 613 | Special Problems/Oral Pathology | 2 |
| DSUR 569B | Physical Diagnosis | 4 |
| **Year II** | | |
| PEDS 568D | General Anesthesia | 4 |
| PEDS 569C | Research | 8 |
| PEDS 578C | Case Conference Seminar | 4 |

| | | |
|---|---|---|
| PEDS 579C | Special Topics Seminar | 3 |
| PEDS 588C | Literature Review Seminar | 3 |
| PEDS 589C | Clinical Pedodontics | 40 |
| PEDS 598C | Applied Teaching | 2 |

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# PERIODONTICS

## Objectives

- Graduate clinicians who demonstrate proficiency with the diagnosis, treatment planning, and comprehensive treatment of periodontal diseases and dental implants.
- Graduate clinicians who demonstrate proficiency with the management and the long-term supportive therapy of periodontal and implant patients.
- Provide graduates with a strong foundation in the scientific basis for specialty practice in periodontics, with particular emphasis on the critical use of current literature and knowledge.
- Prepare clinicians to become Diplomates of the American Board of Periodontology.
- Provide graduates with a foundation in the basic sciences sufficient to understand current literature and evaluate future advances relevant to the clinical practice of periodontics.
- Prepare clinicians to work in cooperation with general practitioners and other health care specialists in the delivery of optimal comprehensive dental care.
- Graduate clinicians who discover, preserve, and disseminate knowledge as well as contribute to the profession, education, and society.

## Scope of Training

The Advanced Dental Education Program in Periodontics is designed to train residents in all facets of periodontology and to prepare them to become Diplomates of the American Board of Periodontology. The program is based in a core curriculum of traditional periodontics that includes training in all aspects of diagnosis, prognosis, and treatment planning. Residents become proficient in all currently accepted modalities of surgical and non-surgical therapy. The program provides a strong foundation in the scientific basis for specialty practice in periodontics, with particular emphasis on the critical use of current literature and knowledge. Diversity in the training of faculty exposes each resident to various concepts of conventional surgical and non-surgical therapy. Residents gain experience in managing a periodontal maintenance program. Extensive training is provided in implantology, which includes surgical preparation of the implant site and placement of implants. Clinical experiences also include contemporary bone regeneration techniques for alveolar ridge and maxillary sinus augmentation. Postgraduate students receive in-depth instruction in all areas of conscious sedation and gain experience in the administration of conscious sedation, including clinical exposure to intravenous sedation.

Residents receive experience in treating patients with all categories of periodontal diseases, particularly those patients with advanced stages of the diseases. Clinical training in oral medicine includes periodontal treatment of older adults and medically compromised patients as well as the management of non-plaque related periodontal diseases and disorders. Lectures, seminars, and conferences are held in diagnosis, prognosis, and treatment planning, surgical techniques, periodontal maintenance, implantology, and practice management. Seminars are conducted with other specialties to interrelate all fields of dentistry and medicine; with guest consultants who are experts in their field; and with postdoctoral students in periodontics from other teaching institutions. During assignments at the Baltimore Veterans Affairs Medical Center, residents learn diagnostic methods in laboratory medicine. Residents lecture and provide clinical supervision to pre-doctoral dental students. The preparation and documentation of cases is a requirement for graduation from the program.

Residents also must apply for admission to the Master of Science (M.S.) program in Biomedical Sciences through the Graduate School, University of Maryland, Baltimore. Graduate coursework successfully completed as part of the specialty program also fulfills course requirements for the M.S. program. Residents are required to conduct a research project and to complete a paper acceptable for submission to a peer-reviewed journal or thesis in partial fulfillment of the requirements for Certificate in Periodontics. Graduates of the Advanced Dental Education Program in Periodontics receive a Certificate in Periodontics upon successful completion of program requirements. Upon submission and successful defense of the master's thesis, residents are awarded the M.S. degree in Biomedical Sciences by the Graduate School. Completion of the requirements for the M.S. program normally occurs during the Spring Semester of the third-year of the specialty program.

The Baltimore-Washington area is rich in institutions for clinical and basic science expertise, and residents are given opportunities to interact with these valuable resources.

## Site of Training

The major site of training is the Dental School. Coursework also is taken at the Veterans Affairs Medical Center.

## Number of Positions - Three

## Faculty

Mark A. Reynolds, DDS, PhD, Chair, Program Director, *Diplomate, American Board of Periodontology*
Mary Beth Aichelmann-Reidy, DDS, *Diplomate, American Board of Periodontology*
Grishondra Branch-Mays, DDS, MS, *Diplomate, American Board of Periodontology*
Sylvan Feldman, DDS, *Diplomate, American Board of Periodontology*
Bryan Fitzgerald, DDS, *Diplomate, American Board of Periodontology*
Lawrence Halpert, DDS
Daniel Karlin, DDS, *Diplomate, American Board of Periodontology*
James Kassolis, DDS, *Diplomate, American Board of Periodontology*
Barbara Lesco, DDS
Marvin Leventer, DDS, *Diplomate, American Dental Board of Anesthesiology*
Sarah Park, DDS, MS, *Diplomate, American Board of Periodontology*
Peter Passero, DDS
Bradley Phillips, DMD, *Diplomate, American Board of Periodontology*
Paul Rosen, DMD, MS, *Diplomate, American Board of Periodontology*
Robert Sachs, DDS, MS, *Diplomate, American Board of Periodontology*
Arnold Sindler, DDS
Dennis Winson, DDS, *Diplomate, American Board of Periodontology*
Karl Zeren, DDS, *Diplomate, American Board of Periodontology*
Robert Zupnik, DDS, MSD, *Diplomate, American Board of Periodontology*

## Special Admission Guidelines

- Applicants must have passed Parts I and II National Board Dental Examinations, with an average score of 85 or higher considered competitive.
- Applicants should rank in the upper 20 percent of their dental class.
- An interview is required before acceptance of candidates.

## Length of Program - Three years (36 months)

## PERIODONTICS CURRICULUM

### Year I

| | | Credit |
|---|---|---|
| PERI 567A | Intra-oral Photography | 1 |
| PERI 568A | Diagnosis, Prognosis and Treatment Planning | 3 |
| PERI 568B | Conjoint Seminars (Implantology) | 2 |
| PERI 569A | Case Management | 2 |
| PERI 569B | Principles of Occlusion | 2 |
| PERI 578A | Literature Review | 12 |
| PERI 579A | Surgical Techniques | 6 |
| PERI 579B | Periodontics/Orthodontics Seminars | 1 |
| PERI 587A | Contemporary Implant Dentistry | 3 |
| PERI 587B | Implant Literature Seminar | 1 |
| PERI 588A | Clinic | 33 |
| PERI 588B | Introduction to Periodontal Therapy and Molecular Biology | 3 |
| PERI 589A | Research Methodology | 2 |
| PERI 598A | Applied Teaching | 2 |
| DBMS 605 | Scientific Method/Writing/Ethics | 1 |
| DBMS 608 | Intro to Biomedical Sciences Research | 1 |
| DBMS 618 | Special Topics/Microbiology, Sec 04 | 1 |
| DBMS 618 | Special Topics/Immunology, Sec 08 | 1 |
| DBMS 628 | Advanced Head & Neck Anatomy | 4 |
| DBMS 631 | Oral Motor Function (Spring, odd years) | 2 |
| DBMS 633 | Anatomy Temporomandibular Joint | 1 |
| DBMS 636 | Pharmacology/Anesthetic Drugs | 3 |
| DBMS 638 | Biostatistics | 3 |
| DPAT 612 | Oral Pathology Problems | 2 |
| DPAT 613 | Oral Pathology Problems | 2 |
| DSUR 569B | Physical Diagnosis | 4 |

### Year II

| | | |
|---|---|---|
| PERI 568C | Diagnosis, Prognosis and Treatment Planning | 4 |
| PERI 568D | Conjoint Seminars (Implantology) | 2 |
| PERI 569D | Practice Management | 2 |
| PERI 578C | Literature Review | 12 |
| PERI 579B | Perio-Orth Seminar | 1 |
| PERI 579C | Advanced Surgical Techniques | 6 |
| PERI 587B | Implant Literature Seminar | 2 |
| PERI 588C | Clinic | 31 |
| PERI 589D | Conscious Sedation | 4 |
| PERI 598C | Applied Teaching | 6 |
| DBMS 608 | Intro to Biomedical Science Research | 1 |
| DPAT 616 | Advanced Histopathology | 3 |
| DPAT 617 | Advanced Histopathology | 3 |
| DBMS 631 | Oral Motor Function (Spring, odd years) | 2 |
| DBMS 799 | MS Research | 2 |

### Year III

| | | |
|---|---|---|
| PERI 568C | Diagnosis, Prognosis and Treatment Planning | 6 |
| PERI 568D | Conjoint Seminars (Implantology) | 2 |
| PERI 578E | Literature Review | 8 |
| PERI 579B | Peri-Orth Seminars | 1 |
| PERI 579C | Advanced Surgical Techniques (6) | 1 |
| PERI 587B | Implant Literature Seminar | 2 |
| PERI 588E | Clinic | 35 |
| PERI 589D | Conscious Sedation | 4 |
| PERI 598E | Applied Teaching | 6 |
| DBMS 620 | Biological Sciences | 2 |
| DBMS 799 | MS Research | 4 |

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# PROSTHODONTICS

## Objectives

- To provide a historical perspective of prosthodontics in a manner that will permit and encourage the student to make objective evaluations.
- To provide a comprehensive background of those biologic and allied sciences relevant to diagnosis, planning, and treatment of routine and complex prosthodontic problems.
- To provide clinical treatment experiences in the various aspects of prosthodontics with emphasis upon attainment of skills and judgment in treating complex patients.
- To prepare the candidate for examination by the American Board of Prosthodontics.
- To prepare the candidate for teaching at predoctoral or postgraduate levels.

## Scope of Training

Students are trained to manage and treat complex prosth-

odontic patients, to include implants-surgical and restorative, maxillofacial, fixed, and removable cases. Lectures, seminars and conferences are held in basic biologic sciences and allied dental sciences related to prosthodontics. Postgraduate students gain experience in teaching as they provide clinical instruction to predoctoral dental students. Training in research methodology is an integral part of the program and culminates as each candidate conducts and presents a research project. A Master of Science degree is available and encouraged.

## Site of Training

Major site of training is the Dental School.

## Number of Positions - Three

## Faculty

Carl F. Driscoll, DMD, Program Director, *Diplomate, American Board of Prosthodontics*

Ngoc Chu, DDS

John Davliakos, DDS

Guadalupe Garcia, DMD

Sarit Kaplan, DMD, MS, *Diplomate, American Board of Prosthodontics*

Penwadee Limkangwalmongkol, DDS, *Diplomate, American Board of Prosthodontics*

Radi Masri, BDS, MS, *Diplomate, American Board of Prosthodontics*

Youssef Obeid, DDS, *Diplomate, American Board of Prosthodontics*

Seung Paik, DDS, MS, *Diplomate, American Board of Prosthodontics*

Flavio H. Rasetto, BDS, MS, *Diplomate, American Board of Prosthodontics*

Michael T. Singer, DDS, MS, *Diplomate, American Board of Prosthodontics*

Michael J. Tabacco, DDS, MS, *Diplomate, American Board of Prosthodontics*

## Special Admission Guidelines

- Students must have acceptable scholastic achievement at the predoctoral level.
- Clinical experience is preferred.
- A personal interview is required.
- References are required.

## PROSTHODONTICS CURRICULUM

Length of Program - Three years

| Year I | | Credit |
|---|---|---|
| PROS 568A | Clinical Prosthodontics | 32 |
| PROS 569A | Literature Review Seminar | 6 |
| PROS 578A | Treatment Planning Seminar | 4 |
| PROS 587A | Research | 1 |
| PROS 598A | Advanced Dental Materials (Spr-odd years) | |
| DBMS 605 | Scientific Method/Writing/Ethics | 1 |
| DBMS 608 | Intro to Biomedical Sciences Research | 1 |
| DBMS 614 | Physiology of Aging (Spr-even years) | 2 |
| DBMS 618 | Special Topics/Microbiology, Sec 04 | 1 |
| DBMS 628 | Advanced Head and Neck Anatomy | 4 |
| DBMS 631 | Oral Motor Function (Spr-odd years) | |
| DBMS 633 | Anatomy Temporomandibular Joint | 1 |
| DBMS 636 | Pharmacology of Anesthetic Drugs | 3 |
| DBMS 638 | Biostatistics | 3 |
| DBMS 642 | Nociception, Pain & Analgesia | 2 |
| DPAT 612 | Oral Pathology Problems | 2 |
| DPAT 613 | Oral Pathology Problems | 2 |

| Year II | | |
|---|---|---|
| PROS 568C | Clinical Prosthodontics | 56 |
| PROS 569C | Literature Review Seminar | 6 |
| PROS 578C | Treatment Planning Seminar | 4 |
| PROS 579C | Applied Teaching in Removable Prosthodontics | 2 |
| PROS 588C | Research | 2 |
| PROS 589C | Applied Teaching in Fixed Restorative | 2 |
| PROS 598A | Adv Dental Materials (Spr-Odd Years) | |
| DBMS 614 | Physiology of Aging (Spr-Even Years) | 2 |

| | | |
|---|---|---|
| DBMS 628 | Advanced Head & Neck Anatomy (Lab-09-10) | 2 |
| DBMS 631 | Oral Motor Function (Spr-odd years) | |
| DBMS 799 | MS Research | 3 |
| Year III | | |
| PROS 568D | Advanced Clinical Prosthodontics | 48 |
| PROS 569D | Literature Review Seminar | 4 |
| PROS 570D | Applied Sciences Related to Implant Prosthodontics | 4 |
| PROS 578D | Treatment Planning Seminar | 4 |
| DBMS 799 | MS Research | 3 |

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# ADVANCED EDUCATION IN GENERAL DENTISTRY RESIDENCY

## General Information

Advanced Education in General Dentistry is a one-year residency program with an optional second year of Dental School-based advanced study and practice; a two-year comprehensive program of advanced study with joint matriculation in the Master of Science in Oral Biology program. A PhD program in conjunction with the department of oral and craniofacial biological sciences may also be combined with the Advanced Education in General Dentistry program.

## Facilities

The Advanced Education in General Dentistry program operates within the Dental School in its own clinic facility specially designed to include treatment areas as well as associated support areas.

## Financial Support

Advanced Education in General Dentistry (AEGD) residents receive graduate medical education (GME) support through a contract with York Hospital, York, PA. In the event GME support is discontinued, the students will receive a stipend from the Dental School. The Dental School waives tuition and fees for courses taken toward the AEGD certificate program; however, students who are simultaneously enrolled in a Masters or PhD program pay for graduate-level courses.

## Requirements for Certification

A certificate is awarded to candidates who have satisfied all requirements of the program and have paid all debts to the University. Selected students in joint certificate and graduate programs who enter into a training agreement are required to complete the requirements of both programs before a certificate is awarded.

## Academic Standards for Certification

In the evaluation of student performance, the following grades are used:

| | |
|---|---|
| H | honors - superior |
| P | pass - satisfactory |
| F | fail - unsatisfactory |
| I | incomplete |

Students must demonstrate competency in all clinical and nonclinical areas of the program. Any student who fails to do so may not be permitted to continue in the program.

## Objectives

- To provide a clinical environment that will improve and reinforce clinical skills and knowledge in the practice of comprehensive general dentistry.
- To provide an opportunity to participate in the management of a simulated private group practice.
- To train the student, under the direction of an attending staff of general dentists and specialists, to prepare complex treatment plans and perform a wide range of clinical procedures.
- To provide experience in patient, personnel, and practice management.

## Scope of Training: One-Year Program

The clinical experiences for each student incorporate a broad range of clinical cases and are designed to match specific needs and interests. Faculty assign patients on the basis of type and complexity of treatment required. Students assume the responsibility for total patient treatment and learn to serve as principal coordinator when specialist care is required.

The Advanced Education in General Dentistry environment simulates a private group practice and is one in which students are exposed to new techniques and concepts in patient care. This atmosphere is enhanced by ongoing clinical research in materials and devices, and the clinical treatment of Advanced Education in General Dentistry patients by attending faculty. Chairside dental auxiliaries, full-time hygienists, receptionist/clerks, and financial personnel facilitate the efficient delivery of services.

While students spend 80 percent of their time in the Advanced General Dentistry clinic practice facility, the remaining 20 percent is devoted to seminars that cover all dental specialties. These seminars are presented by senior faculty of the Dental School and private practitioners, as well as by the Advanced Education in General Dentistry faculty. Each student prepares and presents case reports and conducts literature review seminars.

First-year students can apply for an optional second year of training that continues and expands the postgraduate program's clinical and didactic components. Second-year students manage increasingly complex comprehensive care cases, including the placement and restoration of dental implants, and participate in the regular seminar series. In conjunction with the program director, these students also develop an in-depth seminar and literature review program to meet their individual interests and objectives. Second-year students may also be provided an opportunity to pursue areas of individual clinical and/or didactic concentration one-half day per week; e.g., conscious sedation, special patient care, oral surgery. These additional experiences must be approved by the program director.

Number of Positions: One-Year Program - 16

Scope of Training: Two-Year Program

This program pursues the one-year objectives while the curriculum is centered around matriculation in the Master of Science in Oral Biology program offered within the Dental School. The intent is to direct potential careers into education/research, advanced general or specialty practice. At the same time, students treat increasingly more difficult comprehensive care patients, increase their level of independent clinical activity, and improve practice management skills. Research required for thesis development is usually conducted in a clinical or laboratory setting and offers a wide selection of interest areas such as ongoing materials studies based in restorative and esthetic dentistry, special patients, geriatrics, TMD, and implantology. Additional opportunities may be specifically tailored to provide experiences at extramural training sites, and experience in preclinical and clinical teaching areas may be provided. An additional six months to one year may be necessary beyond the 24-month program to ensure completion of all requirements for the Master of Science in Oral Biology. For those interested, a PhD program is available contingent on acceptance by the program and the Graduate School. Contact the program director if you desire to be considered for this program.

Number of Positions: Two-Year Program - One or two

Site of Training

The Advanced General Dentistry clinic is located on the ground floor of the Dental School. This clinical facility consists of 38 units and all associated support areas such as reception, X-ray, and laboratory and contains state-of-the-art equipment such as a CO2 laser, digital radiography, and air abrasion unit.

Faculty

Douglas Barnes, DDS, MS, Director
James C. Gingell, DDS, MS, Associate Director
Gary Kaplowitz, DDS, MA, M Ed, ABGD, Assistant Director
Carol Anderson, DDS
Norman Bartner, DDS
Jeffrey Behar, DDS
Lawrence Blank, DDS, MS

Ira Bloom, DDS
Jane Brodsky, DMD
Dennis Bryne, DDS
Mark Choe, DDS
Karen Faraone, DDS, MA
Bryan Fitzgerald, DDS
Charles Foer, DDS
Sidney Fogelman, DDS
Adam Frieder, DDS
David George, DDS, MBA, FAGD
Edward Grace, DDS, MA
Richard Grubb, DDS
Steven Kurdziolek, DMD
Albert Lee, DDS
Marvin Leventer, DDS
Mitchell Lomke, DDS
Michael Mann, DDS
Richard Miller, DDS
Dmitry Nova, DDS
Wayne O'Roarke, DDS
Se Lim Oh, DDM
Mary Passaniti, DDS
Jeffrey Rajaski, DDS
Ronald Rosenberg, DDS
Robert Sachs, MS, DDS
John Savukinas, DDS
Keith Schmidt, DDS
Nahid Shahry, DDS
Paul Shires, DDS
Dennis Stiles, DDS
Mostafa Tolba, BDS, MS
Nancy Ward, DDS
Luis Yaqui, DDS

## ADVANCED EDUCATION IN GENERAL DENTISTRY CURRICULUM

| Year I | | Credit |
|---|---|---|
| DAGD 568A | General Practice Seminar | 12 |
| DAGD 569A | Clinical Dental Practice | 60 |
| DAGD 577A | Case Conference Seminar | 6 |
| DAGD 567A | Literature Review | 2 |
| Year II | | |
| DAGD 568B | General Practice Seminar | 4 |
| DAGD 569B | Clinical Dental Practice | 70 |
| DAGD 578B | Case Conference Seminar | 4 |
| DAGD 579B | Literature Review | 2 |

## GENERAL INFORMATION

Graduate programs leading to the Doctor of Philosophy (PhD) and Master of Science (MS) degrees are offered as follows:

PhD
DDS/PhD
DDS/MPH or DDS/MSCR
Dental Postgraduate Certificate/MS-PhD
Dental Hygiene (MS)
Oral and Experimental Pathology (MS; PhD)

Special admissions requirements are noted for each graduate program. Persons who meet these requirements may apply for admission to the Graduate School through an online application form at the University of Maryland, Baltimore, Graduate School website.

## DOCTOR OF PHILOSOPHY

Dental School faculty are affiliated with the Graduate Program in Life Sciences at the University of Maryland, Baltimore.

Applicants seeking admission to the PhD program should consult the Dental School website for more information and to apply online. The following courses are offered by Dental School faculty and may be taken for credit toward any of the above-listed graduate degrees pending approval of the student's advisory committee.

### Courses

DBMS 604. Current Trends in Cellular and Molecular Biology of Oral Tissues (1). Presentations by students, faculty members, and guest speakers consist of original research work and related issues and trends in molecular biology research of oral tissues. The course emphasizes new methods in molecular and cell biology.

DBMS 605. Scientific Method, Writing, and Ethics (1). Lectures cover the scientific method, including the relationship of empirical vs. rational approaches. The course emphasizes the formulation of hypothesis and experimental design and critical review of literature. The course also includes ethical issues and writing styles for scientific papers and research grant proposals. Fall semester.

DBMS 608. Introduction to Biomedical Sciences Research (1). This course serves to introduce new BMS graduate students to the program degree requirements and expectations and is recommended to be taken in the first year of the program, concurrent with the scientific writing course. Assignments pertain to assisting the student in selecting a research topic and mentor. Assignments include literature searches and description of 3-5 research questions of interest to the student, refining to 1-3 potential projects and meeting with potential mentors, and mentor selection and submission of final proposal.

DBMS 614. Physiology of Aging (2). This course for graduate students in health professions and others with an interest in gerontology focuses on cell biology, metabolic processes, cardiovascular, and neurobiological aspects of aging. Lectures include the pathophysiological basis for health problems of older adults. Students study alterations at the cell, organ, and system levels to provide the basis for clinical management of common health problems. Spring semester. Prerequisite: MPHY 600 or equivalent.

DBMS 618 Special Topics in BMS (1-3). This multi-section course offers students research and educational opportunities in both the traditional biomedical disciplines and in several emerging areas of the "new biology." Small groups of students and graduate faculty arrange the offerings. Areas of specialization include:

Section 02, Anatomy
Section 03, Biochemistry
Section 04. Microbiology
Section 05, Pharmacology
Section 06, Physiology
Section 07, Neuroscience
Section 08, Immunology
Section 09, Molecular and Cell Biology
Section 10, Molecular Endocrinology
Section 11, Mineralized tissues

DBMS 620. Biological Aspects of Dental Caries (2). This course provides current evidence-based information about biological aspects of dental caries. Basic microbial ecology of the oral cavity and microbial mechanisms of caries are presented. Other topics include histopathology of enamel, dentin, and root surface caries; chemistry and functions of saliva as they relate to dental caries; and associations between saliva and oral structures.

DBMS 621 Advanced Dental Microbiology (4). This course, intended for graduate students of oral microbiology, is supplemented with library readings and advanced laboratory experimentation. Four lecture hours each week with some laboratory experience. Fall semester.

DBMS 628. Advanced Head and Neck Anatomy (2-4). Students are given a working knowledge of the functional anatomy of the head and neck through detailed dissection and lectures.

DBMS 631. Oral Motor Function (2). Biomedical sciences students receive an updated, in-depth presentation of mandibular function and neuromuscular control mechanisms involved in mastication, swallowing, and speech. Lectures and student presentations cover the morphology, physiology, pharmacology, and pathology of structures required for oral motility. Emphasis is on the clinical relevance of basic science information. Spring semester, alternate years.
Prerequisite: MPHY 600.

DBMS 633. The Anatomy of the Temporomandibular Joint (1). Graduate and postgraduate students learn about developmental, microscopic, and gross anatomic features of the temporomandibular joint through lectures and seminars by the Department of Anatomy and Neurobiology and clinical disciplines.

*DBMS 635. Bacterial Genetics (4). This course covers induction, expression, and selection of mutants; molecular basis of mutations; transfer of genetic information by transformation, transduction, and conjugation; complementation and recombination in phage and bacteria; plasmids; and recombinant DNA. Offered first semester, alternate years. Two lectures and two laboratory periods per week deal with the genetics of bacteria and bacterial viruses.
Cross-listed: GPLS 635.

DBMS 636. Pharmacology of Anesthetic Drugs (3). Students learn basic pharmacologic aspects of general and local anesthetic drugs and drugs used for pain control. Topics include theories on the mechanism of action, structure-activity relationships, physiological effects of these agents, and drug interactions and clinical aspects. Spring semester.

DBMS 638. Biostatistics (1-3). Students are introduced to research design and statistics as they apply to dentistry to allow students to evaluate literature in their fields and work cooperatively with a statistician on research projects. Summer.

DBMS 642. Nociception, Pain, and Analgesia (2). The course emphasizes the nervous system mechanisms responsible for nociception, pain, and the alleviation of pain. Classical and current research in the neuroanatomy, neurochemistry, and neurophysiology of pain relate to clinical observations, pain syndromes, and mechanisms of analgesic drugs. Material is most relevant for dental, medical, and nursing graduate students. Fall semester.

DBMS 643. The Neurobiology of Nociception, Pain (2). Designed for neuroscience graduate students in all health disciplines, this course focuses on the basic science and research aspects of nociception and pain. Topics include the neuroanatomy, neurophysiology, neuropharmacology, and the psychophysics of nociception and pain. Weekly, two-hour class meetings consist of student presentations and group discussions, based on a reading list provided by the faculty. Spring, every other year.
Prerequisite: GPLS 641. Cross-listed: GPLS 643.

DBMS 708 Laboratory Rotations (1-3). This course provides students with practical laboratory experience in a variety

of techniques and allows them to become familiar with the faculty members and their research. Doctoral students are required to complete at least two rotations in different laboratories in the program. Rotations may run either one full semester or one half semester (eight weeks). All rotations should be completed by the end of the 4th semester in the program. Offered throughout the year.

DBMS 799 Master's Thesis Research (1-12)

DBMS 899 Doctoral Dissertation Research (1-12)

Courses Available Upon Request

DBMS 611 Principles of Mammalian Physiology (6). Focuses on ideas of human physiology. Topics include cardiovascular, respiratory, gastrointestinal, nervous, renal, and endocrine systems; didactic method and seminar methods of instruction; and research aspects of physiology. Spring semester.

DBMS 619 Biomedical Science Seminar (1). Presenting seminars and participating in discussions is an important part of graduate education. Attendance at departmental seminars is a program requirement. The multidisciplinary program provides students and faculty the opportunity to learn about research across the curriculum. Students must present one seminar each year. Students register for and earn one credit hour in the semester that they present. Students must earn at least four credits with a minimum grade of B for graduation.

DBMS 622 Immunology and Oral Disease (3). Covers basic immunologic principles, clinical immunology, and immunologic studies of oral diseases. Spring semester.

DBMS 625 Mammalian Oral Histology and Embryology (2). Developing and definitive oral and paraoral structures are presented, with special emphasis on recent advances in this field of study.

DBMS 641 Introduction to Neuroscience (4). This required course is for students interested in doing doctoral dissertation research in neurosciences. While the course provides an overview of the field, its emphasis is on mastery of core ideas, assessed through quizzes, problem sets, and examinations. Lectures, taught by a small group of faculty members from several departments, cover a comprehensive textbook of neurosciences. Prerequisites: basic biology, chemistry, and physics. Cross-listed: GPLS 641.

DBMS 653 Techniques in Microscopy (4).* Students learn techniques used to prepare biological material for examination with light and electron microscopes. The course covers theory of light and electron optics. Students use some techniques to help solve problems that may require a microscope in individual research projects. Fall semester, alternate years.

*A permission slip from the program director or instructor is necessary to enroll in this course

## COMBINED DOCTOR OF DENTAL SURGERY AND DOCTOR OF PHILOSOPHY

Developed in response to the strong demand by universities, hospitals and laboratories for biomedical researchers in the oral health arena, the DDS/PhD program prepares outstanding clinical and basic biomedical scientists who are thoroughly versed in the science underlying clinical practice and capable of identifying and addressing significant problems in oral health. Students complete the dental program's predoctoral requirements with the addition of graduate level basic science training, progressing through doctoral degree candidacy and doctoral dissertation. Upon completion of all predoctoral and graduate requirements, students receive the DDS and PhD degrees simultaneously.

Interested candidates should complete the preapplication form that will enable them to meet with program faculty during the interview process. See the program description for more information.

### Length of Program

Seven years

### Curriculum

In years one and two, DDS/PhD students complete the dental program's preclinical requirements with the addition of graduate level basic science courses, weekly research seminars, biostatistics and laboratory rotations. In years three to five, students complete elective coursework tailored to a selected research area, progressing through doctoral degree candidacy and doctoral dissertation. The student's dental preclinical skills are reassessed in the spring semester of year five, followed by appropriate training before the return to the dental program in years six and seven.

### Academic Advisers

Upon admission, a student is assigned to a program oversight committee co-directed by a clinical mentor and a basic science mentor. The student meets regularly with the committee for guidance and evaluation throughout the program.

### Admissions Requirements

- Applicants must be first admitted to the DDS program at the Baltimore College of Dental Surgery, Dental School, University of Maryland.
- After admission to the dental program, the student should send a letter of interest in the combined DDS/PhD program to Dr. Norman Capra, Director of Training in Oral & Craniofacial Biology, Graduate Studies, University of Maryland Dental School, 650 W. Baltimore St., NDS, 8257, Baltimore, MD 21201.
- Students may enter the combined program during the first year, second year, or before beginning the third year of the dental program.

### Financial Assistance

Students enrolled in the program receive financial support from the training program in biomedical sciences for at least five years of the seven-year program. Other funding opportunities exist for supporting students for the full program. Students are also encouraged to apply for individual DDS/PhD fellowships from the National Institutes of Health. In addition, short-term NIH dental student training grants are available for research conducted the summer before entering dental school.

## COMBINED DOCTOR OF DENTAL SURGERY AND MASTER'S DEGREE

The objective of the combined DDS-COHRT program is to graduate outstanding individuals with a combination of excellence in clinical skills and training in clinical research or public health to prepare them for an academic career in dentistry. Graduates of this program will understand the scientific principles that form the basis of clinical practice, will be able to identify significant problems in oral health and will have the requisite tools to develop testable hypotheses that address these problems.

### Length of Program

Five years

### Curriculum

UMB Master's program courses (either MPH or MSCR) are substituted for DDS program courses as appropriate to fulfill didactic requirements (~6-15 credits) of both programs (DDS and Master's) during the third program year. Development of a research project and formulation of the mentoring team occurs during the summer prior to that year (program year three and the DDS junior year). Additional coursework and the research project or practicum or capstone experience comprise the fourth program year to complete the Master's degree requirements. Elective credits (3) from the DDS curriculum during the fifth program year (DDS senior year) are available for students completing their research and are used towards time to prepare and submit research results.

Research topics follow the Dental School's research themes: pain and neuroscience; microbiology and infectious diseases; cell and molecular biology; epidemiology and community health, and selected discipline-specific clinical topics.

### Academic Advisors

Advisement of trainees is an integral part of the combined DDS-Master's programs, with two advisors assigned: one from the student's primary school (the Dental School) and one from the Master's program faculty. Advisement begins with the application process. Once a track and concentration are selected by the student, the trainee develops an appropriate mentoring team. The Master's program directors meet with the mentors to set educational goals for the trainee, individualized according to the specific project.

### Expenses and Financial Assistance

The program is supported by the DDS-COHRT T32 program funded through National Institutes of Dental and Craniofacial Research (NIDCR), NIH. Students are supported by a stipend and tuition during their full time year of Master's degree study.

### Admission and Application Procedures

Applicants who wish to enter the dual MS degree programs must first be admitted to the DDS program through the Dental School's usual admission process. Once they are accepted to the DDS program, they may apply to the graduate program through application at the pre-application website and through discussion with the program director, Dr. Sharon Gordon, Director of Graduate Research Education.

## MASTER OF SCIENCE

### (For Students Pursuing a Postgraduate Certificate)

The Master of Science program is designed for dentists who wish to pursue a master's degree combining graduate education with a postgraduate certificate program (endodontics, orthodontics, pediatric dentistry, periodontics, prosthodontics, or advanced education in general dentistry). The program provides an interdisciplinary graduate foundation in the biological and clinical sciences to prepare for careers in dental research, dental education, the practice of dentistry or a dental specialty.

### Length of Program

Students should be able to complete the requirements of the Master of Science and certificate programs within three years. An option to study for the PhD degree in combination with specialty training may be arranged for highly motivated individuals.

### Curriculum

Although lecture courses comprise most of the curriculum, many of the basic science courses include a laboratory component. A significant portion of the program is devoted to the design and completion of a thesis research project, which is a requirement of the program. Students have the opportunity to select research advisors from several disciplines and research topics from many basic and clinical sciences.

Students are required to have a minimum of 30 semester hours in courses acceptable for credit toward a graduate degree, as follows:

| Courses | Credits |
|---|---|
| DBMS 605 Scientific Writing and Ethics | 1 |
| DBMS 638 Biostatistics (or equivalent) | 3 |
| Credits in courses approved by postgraduate program director (of this number 13 credits must be in courses numbered 600 or higher) | 20 |
| DBMS 799 Thesis research | 6 |
| Total | 30 |

All students must maintain a 3.0 (B) or better academic average. Each student will be required to write a thesis based on the master's research and to defend it orally.

### Academic Advisors

Students enrolled in the Master of Science program will have their respective specialty program director as their academic advisor.

### Site and Facilities

The primary training site is the Dental School, University of Maryland. Courses and research opportunities are available in oral pathology and the disciplines of anatomy, biochemistry, microbiology, pharmacology, physiology, molecular biology, and neurophysiology, which are included in the department of oral and craniofacial biological sciences. Laboratory space and equipment are readily available for student training. Facilities are also available at other schools of the University of Maryland as well as the University of Maryland Baltimore County and College Park campuses.

### Admission Requirements

- Dental postgraduate trainees must apply and be formally accepted into the Masters program by the Advanced Dental Education and the DBMS Graduate Studies Committee.
- Applicants must be concurrently enrolled in a dental specialty program at the Dental School and the University of Maryland Graduate School.

Applications for the specialty certificate programs may be obtained by contacting the Office of Admissions and Career Advancement, Baltimore College of Dental Surgery, 650 W. Baltimore St., Baltimore, MD 21201. Application information for the Master of Science in Biomedical Sciences program may be obtained from the University of Maryland Graduate School, 515 W. Lombard St., Baltimore, MD 21201.

Additional information about graduate studies at the University of Maryland, Baltimore is available by visiting the Graduate School website.

## MASTER OF SCIENCE IN DENTAL HYGIENE

The Master of Science program in dental hygiene at the University of Maryland, Baltimore prepares the dental hygienist to assume advanced leadership roles in a diversity of health care settings, in academia, and in private industry. Through a variety of individualized educational and field experiences combined with a substantive core curriculum, adult learning skills are fostered. The program promotes the development of critical thinking professionals who are competent to pursue careers in dental hygiene education, research, public health, administration and management, in both the private and public sectors. Program specialization tracks include (1) education, (2) public health, and (3) administration/management.

Applicants are accepted for fall and spring matriculation and may complete the program on a full-time or part-time basis. The program is individualized and flexible with the many courses offered online.

### Length of Program

All requirements for the Master of Science degree must be completed within a five-year period. Courses completed more than five years before the expected date of receiving the Master's degree will not count toward the degree. Full-time students can complete the program in about 24-36 months. Part-time students usually devote 36-48 months to the program. Candidates require at least 37 credits to graduate.

### Curriculum

Students must complete a total of 37 semester credits to graduate. Under the guidance of a committee, students design and conduct original research for a total of six credits.

| Courses | Credits |
|---|---|
| DHYG 601 Literature Review and Evaluation for Dental Hygienists | 3 |
| DHYG 602 Research and Professional Writing | 2 |
| DHYG 603 Issues in Health Promotion and Disease Prevention | 2 |
| DHYG 619 Area of Specialization Practicum | 3 |

| | |
|---|---|
| *Master's Level Research Design, Methodology and Statistics | 6 |
| DHYG 799 Master's Thesis Research | 6 |
| *Electives | 15 |
| Total | 37 |

*Students may choose from courses offered by the schools and departments at any of the University of Maryland campuses in Baltimore, Baltimore County, and College Park, or other campuses in the University System of Maryland. The Graduate Program Director must approve all electives prior to student registration.

The following courses are offered by Dental School faculty. Courses not included in core requirements must be approved by the student's advisory committee.

## Courses

DHYG 601 Literature Review/Evaluation (3). Through an analysis and critique of literature pertinent to the dental hygienist, student examine biological, clinical, research, political, sociological, and educational trends that influence dental hygiene. Students identify potential research questions.

DHYG 602 Research and Professional Writing (2). This course is designed to develop students' writing skills in preparation for thesis development and execution. Emphasis will be placed on the tenets of scientific writing and written research communication. Rules of grammar and syntax will be reviewed and applied in student created documents. Students will evaluate the quality of writing in published reports and create their own abstracts for peer and faculty review.

DHYG 603 ISS Health Promotion Disease Prevention (2). This course explores issues in oral health care delivery related to health promotion and disease prevention. Topics will include how patient and provider ethnicity, socioeconomic status, education, and cultural competence affect health, illness and the delivery of care. Social, psychological and economic impacts of oral conditions and treatments will be discussed. The current state of general health and oral health in the United States, including oral health disparities, will be addressed.

DHYG 619 Area of Specialization Pract (3). Working with faculty advisers, students gain experience teaching in didactic and clinical or laboratory settings. Faculty advisers emphasize an analytical approach to teaching effectiveness.

DHYG 799. Master's Thesis Research (6)
Master's Level Research Design, Methodology, and Statistics (6)

## Elective Offerings

Electives may be chosen from courses offered by schools and departments of the University of Maryland or University System campuses. Electives must be approved by the Graduate Program Director prior to registration. Some courses may not be offered every semester or year.

## Expenses and Financial Assistance

See the Student Accounts webpage for tuition and fees. Financial aid, in the form of loans, grants, and work study, is awarded on the basis of demonstrated need. The only financial support that the Master of Science program offers is a Teacher Development Program Award to full-time students (at least 9 credits) in the education track. The ADHA Institute for Oral Health also lists various scholarship opportunities. Find more information at The University of Maryland, Baltimore's financial aid website.

## Admission and Application Procedures

Admission to graduate study is the exclusive responsibility of the University of Maryland Graduate School. The minimum standard for admission is a B average, or 3.0 on a 4.0 scale The applicant must be a graduate of an accredited dental hygiene program and possess a baccalaureate degree in dental hygiene or a related field. A personal interview with the program director is strongly recommended.

See Graduate School admissions instructions to apply. Letters of recommendation and the required forms should be faxed directly to the Division of Dental Hygiene at 410-706-0349 by June 30 for admission in the fall semester and by November 30 for admission in the spring semester.

See the admissions pages for more information about the Master of Science degree program in dental hygiene.

## DOCTOR OF PHILOSOPHY IN ORAL AND EXPERIMENTAL PATHOLOGY

### Objectives

- To prepare individuals for an academic career in the discipline of clinical and experimental oral pathology.
- To fulfill educational requirements for specialty certification by the American Board of Oral Pathology.

### Scope of Training

In this unique program, which is one of only 14 nationally accredited programs, students receive experience and training in surgical oral pathology, clinical oral pathology, and the basic sciences. An extensive series of lectures, seminars, and case conferences are conducted to provide a comprehensive curriculum that meets the requirements both for American Board certification and the confirmation of a graduate degree from the University of Maryland Graduate School.
A faculty advisor is assigned to guide each candidate through the didactic curriculum and research thesis. Research interests of the faculty include connective tissue, bone, stress proteins, retroviruses, and epidemiology of oral disease.

### Site of Training

Most clinical training is conducted within the Department of Oncology and Diagnostic Sciences of the University of Maryland Dental School. Didactic courses are taken in various schools on the University of Maryland campus and at the Baltimore County campus. Electives and special courses may also be taken at the University of Maryland College Park campus or at The Johns Hopkins University. All of the above sites, as well as the National Institutes of Health, the National Library of Medicine and the Armed Forces Institute of Pathology in the Washington area, may serve as resources for the development and completion of the research thesis.

### Number of Positions - No limit

### Faculty

Bernard A. Levy, DDS, MS, Program Director, *Diplomate, American Board of Oral and Maxillofacial Pathology*
John Basile, DDS
John Brooks, DDS
Russell L. Corio, DDS, MS, *Diplomate, American Board of Oral and Maxillofacial Pathology*
Ross Couwenhoven, DDS, PhD
Joseph Davidson, DDS
Louis DePaola, DDS
Karen Garber, DMD
Raymond Lee, DDS
William Leboe, DDS
Valli Meeks, DDS
Timothy F. Meiller, DDS
Silvia Montaner, PhD
Linda Otis, DDS
James Palmer, DDS
Mary Passaniti, DDS
Stephen Pohlhaus, DDS
Robert S. Redman, DDS, MSD, PhD, *Diplomate, American Board of Oral and Maxillofacial Pathology*
Mary Ann Rizk, PhD
Mark Scheper, DDS, PhD
Abraham Schneider, DDS, PhD
Dianna Weikel, RDH, MS
Robin Williman, DDS

### Length of Program

PhD, four years

### Special Requirements

DDS, DMD, or equivalent degree

Curriculum

DPAT 612, 613. Special Problems in Oral Pathology (Fall 2, Spring 2) Two hours lecture per week. A comprehensive review of oral and maxillofacial pathology.

DPAT 614, 615. Methods in Histopathology (Fall 4, Spring 4) Two four-hour laboratory periods each week. The laboratory methods used in preparing pathologic tissues for microscopic examination.

DPAT 616, 617. Advanced Histopathology of Oral Lesions (Fall 3, Spring 3) One hour of lecture and four hours of laboratory each week. The study of common, uncommon and rare lesions of the head and neck.

DPAT 618. Seminar (1) One period each week. Recent advances in oral pathology.

*The prerequisite for all courses cited above is a basic course in pathology. Approved electives will supplement these courses until the credit requirements of the program are met.

DPAT 899 Doctoral Dissertation Research (1-12)

## CONTINUING EDUCATION

The Dental School is committed to the lifelong learning of oral health professionals in Maryland and neighboring states of the Mid-Atlantic Region. Continuing Dental Education for dentists and dental hygienists is among the missions of the Dental School, for today's many and frequent advances in science and technology impose a greater and sustaining need for timely accession of new information.

In order to fulfill its commitment to lifelong learning, the Dental School provides courses designed to meet the needs of dental and dental hygiene practitioners. Based upon research in the basic and clinical sciences, the Continuing Dental Education Program offers participants educational courses which reflect contemporary professional knowledge of direct benefit to the practice community. These courses are conducted in clinics, laboratories, and simulation facilities of the Dental School as well as other regional settings of convenience to course participants. In addition, future courses may be offered through such distance learning media as the Internet.

# FINANCIAL INFORMATION

## Tuition and Fees

NOTE: Notwithstanding any other provision of this or any other University (College) publication, the University (College) reserves the right to make changes in tuition, fees, and other charges at any time such changes are deemed necessary by the University (College) and the University System of Maryland Board of Regents.

Current tuition and fees are listed on the University of Maryland Student Accounts Web page at www.fincsvc.umaryland.edu/sa/tuition.cfm.

Enrollment deposits are credited toward tuition at registration, but will not be refunded in the event of failure to enroll.

## Explanation of Fees

Campus fees are used to fund activities sponsored by the University Student Government Association, support the cost of the shuttle system (the Caravan), which transports students to local neighborhoods, meet the costs for various student activities, student publications, and cultural programs within the Dental School, and for expansion of various campus facilities that are not funded or are funded only in part from other sources.

The application and/or matriculation fee partially defrays the cost of processing applications for admission and enrollment data in the professional schools. These are not refundable. The application fee is applied against the matriculation fee for accepted students.

Association membership fees cover yearly membership in student professional organizations - American Student Dental Association (ASDA- dental) or Student American Dental Hygienists' Association (SADHA -dental hygiene).

The Central Materials Service fee covers the rental of instrument cassettes, enhancement items, and other instruments used to practice dentistry. The hand piece lease covers the rental of electric hand pieces and piezo scalers.

The board fee covers the cost of materials used for required competency examinations to prepare students for regional board examinations.
The dental equipment purchase fee covers preclinical laboratory charges for expendable supplies, materials and equipment.

The laundry service charge covers the rental and laundering fee for laboratory coats.

The laptop, notebook and technology fees cover costs for a required computer, software, and technology services and support.

Student liability (malpractice) insurance is charged to all dental, dental hygiene, and advanced dental education students as a condition for enrollment. Information regarding professional coverage for students is available through the Dental School's Office of Clinical Affairs.

Hospitalization insurance is required of all full-time students. A brief outline of the student hospitalization insurance program is furnished each student. Students with equivalent insurance coverage must provide proof of such coverage at the time of registration and obtain a hospitalization insurance waiver each fall semester.

Disability insurance is required of all dental and dental hygiene students.

The graduation fee is charged to help defray costs involved with graduation and commencement.

Fees for auditors are the same as those charged for courses taken for credit at both the predoctoral and graduate level. Audited credit hours will be added to a student's total credit

enrollment to determine whether a student is full- or part-time for tuition and fee assessment purposes.

Special students are assessed tuition and fees in accordance with the schedule for the comparable predoctoral, graduate, or first professional classification.

A service charge of $25 is assessed for dishonored checks and is payable for each check that is returned unpaid by the drawee bank on initial presentation because of insufficient funds, payment stopped, postdating or drawn against uncollected items.

A late registration fee is charged to defray the cost of the special handling involved for those who do not complete their registration on the prescribed days.

The University reserves the right to make such changes in fees and other charges as may be necessary.

## Student Expenses

The 2009-2010 academic year budget for entering dental students who have Maryland residency and on campus housing is $55,598. First year Maryland residents who have off-campus housing have a budget of $61,898. First year dental students who are classified as out-of-state and have on-campus housing have a budget of $81,586. Out-of-state first year students who live off-campus have a budget of $87,886. Expenses for dental hygiene students in-state are $28,234; non-resident, $38,060. These figures include tuition, fees, food, lodging and personal expenses, including travel and the costs of instruments, supplies and books. Regional and national board examination fees are approximately $2,480 for dental students and $1,140 for dental hygiene students.

## Textbooks

A list of textbooks recommended for first-year courses is mailed to incoming students during the summer before to enrollment. All textbook lists are also on the Dental School's online Textbook List. The campus bookstore stocks these books; students may purchase books there or at other local bookstores. Approximate costs of textbooks and other instructional materials are as follows:

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| First year | $1,725 |
| Second year | $1,600 |
| Third year | $600 |
| Fourth year | $400 |

## Financial Aid

Aid programs are centrally administered by Student Financial Aid, located in the Health Sciences/Human Sciences Library, 2nd floor. These programs are designed to help students who otherwise would be financially unable to attend the University. To qualify for aid, the student must apply annually and meet certain eligibility requirements. Students should apply in January for the following academic year using the FAFSA (Free Application for Federal Student Aid).

Aid packages often include a combination of loans, grants, scholarships and work-study designed to meet 100 percent of a student's needs. The student should call Student Financial Aid at 410-706-7347, visit the Financial Aid website, or stop by for fact sheets that contain detailed information on the application process and types of aid available. The office is open from 8 a.m. until 6 p.m., Monday through Friday.

## University Grants

In an attempt to meet the ever-increasing needs of students, the Maryland General Assembly each year allocates to the University funds earmarked for student assistance. As a result, University grants are available to Maryland residents who demonstrate a financial need. After careful review of the student's current financial situation, awards are made on an individual basis.

## Loan Funds

### American Dental Hygienists' Association Loan Program.

Dental Hygiene students may be considered for loans that range from $500 to $1,000 annually. For information, contact the SADHA advisor on the Department of Health Promotion and Policy faculty.

John Carr Emergency Loan Fund. This endowed emergency student loan fund was established in memory of Dr. John Carr, a dedicated member of the faculty, and is available to enrolled dental and dental hygiene students who have an emergency need. All final candidates are required to submit an essay describing their personal and professional reasons for applying for this scholarship. Students selected as entering freshmen shall be eligible for the scholarship each year while enrolled and in good academic standing.

The Edward S. Gaylord Educational Endowment Scholarship. This fund was established to aid worthy students in securing a dental education.

The Russell Gigliotti Memorial Scholarship. Established in memory of Dr. Russell Gigliotti, an alumnus and dedicated faculty member, this fund provides financial assistance primarily but not exclusively to students in the preclinical years. Any predoctoral dental student who qualifies for financial aid, and who is unable to secure other University financial assistance, is eligible to apply.

The Albert A. Harrington Fund. The New Jersey Alumni Association established this fund in 1954 in memory of Dr. Harrington, a member of the class of 1910. The fund is a source of valuable help in aiding students to solve temporary financial problems.

Lawrence A. Haskins Memorial Student Loan Fund. This fund, honoring the memory of Dr. Haskins, class of 1970, provides loans to deserving students in the Dental School.

The W. K. Kellogg Foundation. During World War II, the foundation granted to this school a fund to provide rotating loans to deserving dental students.

The Wilson B. Lau Memorial Student Loan Fund. Established by his wife to honor the memory of Wilson B. Lau, this revolving student loan fund provides loans to deserving students in the Dental School.

The Sol B. Love Memorial Student Loan Fund. This revolving student loan fund was established by his family to honor the memory of Dr. Sol B. Love, a member of the class of 1961.

Maryland Dental Hygienists' Association. The Maryland Dental Hygienists' Association administers a loan program for qualified senior dental hygiene students. Information is distributed to junior students by the Department of Health Promotion and Policy during the spring semester.

Clyde Virginius Matthews Memorial Loan Fund. This fund provides tuition assistance for deserving dental hygiene students.

The Ronald M. Starr Family Scholarship. This endowed scholarship was established to honor the family of Dr. Ronald M. Starr, class of 1958, by providing loans to pay tuition and fees to deserving junior and senior dental and dental hygiene students.

The following government, bank and private lender loans also are available to students on the basis of need:

- Health Professions Student Loan
- Perkins Loan
- Guaranteed Student Loan
- Health Education Assistance Loan
- Supplemental Loans

All requirements, interest rates and terms for these loans can be found in the Office of Student Financial Aid brochure.

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# ADMINISTRATION AND FACULTY

## ADMINISTRATIVE OFFICERS

### Dean

Christian S. Stohler, DMD, University of Bern, Switzerland, 1972; DrMedDent, University of Bern, 1975.

### Associate Dean for Academic and Student Affairs

Carroll Ann Trotman, BDS, University of Dundee Dental School, Dundee Scotland,1982; Certificate in Orthodontics and MA, Columbia University, 1989;
MS, University of Michigan, 1995.

### Associate Dean of Finance, Clinical Operations and Institutional Planning

David L. George, DDS, The Medical College of Virginia, 1988; MBA, R. H. Smith / University of Maryland, 2002.

### Assistant Dean for Admissions and Recruitment

Patricia E. Meehan, Dual BS (Kinesiology & Nursing University of Maryland, College Park, 1981, 1983; DDS, University of Maryland Dental School, 1993; Certificate in Periodontics, University of Maryland Dental School, 1995.

### Assistant Dean of Development and Alumni Relations

Marcelena S. Holmes, MA, St. Mary's Seminary, 2003; MPA, University of Baltimore, 1989

## DENTAL SCHOOL FACULTY

Ackerman, Ronald I., Clinical Assistant Professor, Health Promotion and Policy; DDS, Howard University, 1976.

Ahmed, Shabrez, Dental School Assistant Professor, Health Promotion and Policy; BDS, Bangalore University (India), 2000.

Aichelmann-Reidy, Mary Beth, Dental School Associate Professor, Periodontics; BS, Georgetown University, 1983; DDS, State University of New York at Stony Brook, 1987.

Anderson, Carol F., Dental School Assistant Professor, Health Promotion and Policy; AA, Prince George's Community College, 1980; DDS, University of Maryland, 1988; MS, Towson University, 1997.

Anseloni, Vanessa, Research Assistant Professor, Neural and Pain Sciences; BS (1994), PsyD (1994), PhD(1997), University of Sao Paulo (Brazil).

Bai, Guang, Research Assistant Professor, Neural and Pain Sciences; MD (1979), MS (1983), 4th Military Medical College (China); PhD, University of Ulm (Germany), 1988.

Barnes, Douglas M., Professor, Health Promotion and Policy; BA, Western Maryland College, 1979; DDS, University of Maryland, 1983.

Bartner, Norman G., Clinical Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BS, Union College, 1956; DDS, Fairleigh Dickenson University, 1961.

Bashirelahi, Nasir, Professor, Oncology and Diagnostic Sciences; BS (1960), PharmD (1962), Tehran University (Iran), 1962; PhD, University of Louisville, 1968.

Basile, John R., Assistant Professor, Oncology and Diagnostic Sciences; BA, Cornell University, 1989; DDS, State University of New York, 1993; DMSc, Harvard University, 2002.

Battani, Kathryn E., Assistant Professor, Health Promotion and Policy; BS, University of Maryland, 2002; MS, University of Maryland, 2008.

Bauman, Gary H., Clinical Associate Professor, Oncology and Diagnostic Sciences; BS, Brooklyn College, 1981; DDS, University of Maryland, 1985; MS, Towson State University, 1994.

Bavoil, Patrik, Professor, Microbial Pathogenesis; BS, University of Grenoble (France), 1972; MS, University of Claude Bernard (France), 1976; PhD, University of California-Berkeley, 1982.

Bergman, Stewart A., Professor, Oral and Maxillofacial Surgery; BA, Brooklyn College, 1964; DDS, State University of New York, 1968; MS, University of Maryland, 1986.

Bonebreak, Byron, Clinical Assistant Professor, Orthodontics; BS (1969), DMD (1972) University of Pittsburgh; MS, West Virginia University, 1977.

Bowman, John M., Clinical Associate Professor, Health Promotion and Policy; BS, University of Maryland, 1972; DMD, University of Pittsburgh, 1976.

Bowman, Sharon R, Clinical Instructor, Health Promotion and Policy; AAS, Delaware Technical and Community College, 1981; BS, West Chester State College, 1982; MA,

University of Delaware, 2003.

Bradbury, John R., Dental School Associate Professor, Endodontics, Prosthodontics and Operative Dentistry; BA (1969), DDS (1972), Ohio State University.

Brahim, Jamie, Dental School Professor, Oral and Maxillofacial Surgery; DDS, Catholic University (Peru), 1976; MS, University of Maryland, 1984.

Branch-Mays, Grishondra, Dental School Assistant Professor, Periodontics; BS, University of Houston, 1986; DDS, University of Michigan, 1991; MS, University of Iowa, 1994.

Brennan, Mark E., Dental School Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BS, Springfield College, 1986; DDS, State University of New York at Buffalo, 1969; MS, University of Texas, 1977.

Bress, Lisa, Clinical Assistant Professor, Health Promotion and Policy; BS (1983), MS (1994), University of Maryland.

Brill, Warren A., Clinical Associate Professor, Health Promotion and Policy; BS, Moravian College, 1964; MS, University of Pittsburgh, 1967; DMD, University of Pennsylvania, 1972.

Brooks, John, Clinical Professor, Oncology and Diagnostic Sciences; BS (1974), DDS (1979), University of Maryland.

Bryant, Larry, Clinical Assistant Professor, Oral and Maxillofacial Surgery; BS (1977), DDS (1981), Howard University.

Caccamese, John F., Dental School Associate Professor, Oral and Maxillofacial Surgery; BA, Washington and Jefferson College, 1993; DMD, University of Pittsburgh, 1997; MD, University of Maryland, 2000.

Capra, Norman, Professor, Neural and Pain Sciences; BS, Birmingham Southern College, 1969; MS (1975) PhD (1976) University of Alabama.

Cartee, Deborah, Clinical Instructor, Health Promotion and Policy; AS, Community College of Baltimore, 1992; BS (2002), MS (2008), University of Maryland.

Chand, Priya, Dental School Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BDS, KLE University (India), 1998; MSD, Case Western, 2002.

Chellaiah, Arasu, Adjunct Associate Professor, Microbial Pathogenesis; BSc, Sri Pushpam College (India), 1974; MSc, Jamal Mohammed College, (India), 1976; MA, Post Graduate Institute for Basic Medical Sciences (India), 1977; PhD, Madurai Kamaraj University (India), 1985.

Chellaiah, Meenakshi A., Associate Professor, Oncology and Diagnostic Sciences; BSc (1975), MSc (1977), PhD (1982), Madurai University (India).

Chen, Haiyan, Research Assistant Professor, Health Promotion and Policy; MD, First Military Medical University in China, 1990; MS (2000), PhD (2004), State University of New York.

Chen, Yi-Ju, Clinical Instructor, Health Promotion and Policy; DDS, National Yang-Ming University (Taiwan), 1994.

Chenette, Ronald, Dental School Assistant Professor, Health Promotion and Policy; BS, Georgetown University, 1980; DMD, Tufts University, 1983.

Chung, Man Kyo, Assistant Professor, Neural and Pain Sciences; DMD (1995), MS (1997), PhD (1999), Kyung Hee University (Korea).

Cohen, Leonard A., Professor, Health Promotion and Policy; BA, George Washington University, 1967; DDS, Howard University, 1971; MPH (1974), MS (1976), Harvard School of Public Health.

Coll, James A., Clinical Professor, Health Promotion and Policy; BS (1969), DMD (1969), University of Pittsburgh; MS, University of Oregon, 1974.

Conley, Albert, Clinical Instructor, Health Promotion and Policy; BS (1972), DDS (1982), Howard University.

Costello, Leslie C., Professor, Oncology and Diagnostic Sciences; BS (1952) MS (1954) PhD (1957) University of Maryland.

Couwenhoven, Ross, Dental School Assistant Professor, Oncology and Diagnostic Sciences; BA, Calvin College, 1976; DDS, University of Illinois, 1981; PhD, University of Chicago, 1988.

Crafton, B. Casey, Clinical Assistant Professor, Health Promotion and Policy; BA (1983), DDS (1987) West Virginia University; MS, University of Maryland, 1991; JD, University of Baltimore, 1995.

Craig, James F., Professor, Health Promotion and Policy; BS, Western Illinois University, 1968; MS (1970), EdD (1972) Indiana University.

Dailey, Jacqueline, Dental School Assistant Professor, Oncology and Diagnostic Sciences; AA (1981, 1988) Community

College of Baltimore; BS (1994), MS(2000) University of Maryland.

Davidson, Joseph, Clinical Associate Professor, Oncology and Diagnostic Sciences; BA, Dartmouth College, 1960; DDS, University of Maryland, 1970.

Davidson, William M., Clinical Professor, Orthodontics; AB, Dartmouth College, 1960; DMD, Harvard University, 1965; PhD., University of Minnesota, 1969.

DePaola, Louis G., Professor, Oncology and Diagnostic Sciences; BA (1971) DDS (1975), University of Maryland.

Desbordes, Byron C., Clinical Instructor, Oncology and Diagnostic Sciences; BS, Tulane University, 1988; DDS, University of Maryland, 1997.

Dessem, Dean, Associate Professor, Neural and Pain Sciences; BS, Tulane University, 1976; PhD, University of Illinois, 1985.

Dhar, Vineet, Instructor, Health Promotion and Policy, BDS, Bharati Vidyapeeth Dental College (India), 1994; MDS, Manipal College of Dental Surgery (India), 1999; PhD, MLS University, (India), 2009.

Difabio, Vincent, Clinical Associate Professor, Oral and Maxillofacial Surgery; BS, Xavier University, 1967; DDS, University of Maryland, 1971; MS, University of Rochester, 1979.

Driscoll, Carl F., Associate Professor, Endodontics, Prosthodontics and Operative Dentistry; BA, Merrimack College, 1974; DMD, Tufts University, 1977.

Dubner, Ronald, Professor, Neural and Pain Sciences; BA (1955) DDS (1958), Columbia University; PhD, University of Michigan, 1964.

Dufresne, Kesnel, Instructor, Health Promotion and Policy; DDS, University of Nuevo Leon, 1988.

Easton, Jillian, Assistant Professor, Health Promotion and Policy; BDS, University of Glasgow (Scotland), 2000; MA, Ohio State University, 2002.

Emmett, John M., Clinical Instructor, Oral and Maxillofacial Surgery; BS, Randolph-Macon College, 1983; DDS, University of Maryland, 1989.

Enwonwu, Cyril O., Professor, Microbial Pathogenesis and Oncology and Diagnostic Sciences; BS, University of Ibadan (Nigeria), 1956 ; BDS (1961), MDS (1966), PhD (1976), University of Bristol; ScD, Massachusetts Institute of Technology, 1968.

Ernst, Robert, Associate Professor, Microbial Pathogenesis; BS (1986), MA (1988), State University of New York; PhD, University of Virginia, 1996.

Everett, Dwayne, Clinical Assistant Professor, Oral and Maxillofacial Surgery; BS, University of Pennsylvania, 1984; DDS, Howard University, 1988.

Faraone, Karen L., Dental School Associate Professor, Endodontics, Prosthodontics and Operative Dentistry; RN (1974), BS (1974), DDS (1978), MA (1983), University of Maryland.

Feng, Pei, Professor, Oncology and Diagnostic Sciences; MD (1970), MS (1981) Beijing Medical University; PhD, University of Umea (Sweden), 1990.

Fitzgerald, Bryan P., Clinical Instructor, Health Promotion and Policy; BS, Towson State University, 1986; DDS, University of Maryland, 1990.

Foreman, Robert R., Dental School Assistant Professor, Health Promotion and Policy; BS (1974), DDS (1983), University of Maryland.

Fouad, Ashraf, Professor, Endodontics, Prosthodontics and Operative Dentistry; BDS, University of Cairo, 1982; MS (1990), DDS (1992), University of Iowa.

Franklin, Renty B., Professor, Oncology and Diagnostic Sciences; BS, Morehouse College, 1966; MS, Atlanta University; PhD, Howard University, 1972.

Fried, Ivan S. (Scott), Clinical Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BS, University of Tennessee, 1971; DDS, University of Maryland, 1977.

Fried, Jacquelyn L., Associate Professor, Health Promotion and Policy; BA, Ohio State University, 1968; MS, Old Dominion University, 1976.

Ganesh, Nisha, Instructor, Oncology and Diagnostic Sciences; BS, Catholic University of America, 2002; DDS, University of Maryland, 2007.

Garber, Karen, Clinical Associate Professor, Oncology and Diagnostic Sciences; BS, Columbia University, 1978; DMD, University of Pennsylvania, 1982.

Garcia, Guadalupe, Dental School Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BS, SUNY Stony Brook, 1997; DMD, University of Pennsylvania, 2002.

Garrett-Hayes, Pauline, Dental School Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BA (1972), DDS (1978), University of Maryland.

George, David L., Dental School Assistant Professor, Health Promotion and Policy; BS, West Virginia University, 1984; DDS, The Medical College of Virginia, 1988; MBA, University of Maryland, 2002.

German, Paul A., Clinical Instructor, Oral and Maxillofacial Surgery; BS (1988), DDS (1993), University of Maryland.

Ginsberg, Edward L., Clinical Assistant Professor, Health Promotion and Policy; BA, Western Maryland, 1978; DDS, University of Maryland, 1982.

Gordon, Sharon M., Associate Professor, Oral and Maxillofacial Surgery; BA, University of North Texas, 1986; DDS, University of Texas, 1991; MPH (1997), PhD (2003), Johns Hopkins University.

Grace, Edward G. Jr., Associate Professor, Neural and Pain Sciences; BS, Mount St. Mary's College, 1960; DDS, University of Maryland, 1964; MA, Loyola College, 1981.

Greenspan, Joel, D., Professor, Neural and Pain Sciences; BA, Rollins College, 1974; MS (1976) PhD (1980) Florida State University.

Guo, Wei, Research Associate, Neural and Pain Sciences; MD, Tianjin Medical University ,1989; PhD, Osaka University Medical School ,1998.

Hack, Gary D., Dental School Associate Professor, Endodontics, Prosthodontics and Operative Dentistry; BA (1975), DDS (1979) University of Maryland.

Harden, Stephen, Visiting Clinical Instructor, Oncology and Diagnostic Sciences; BS, Kent State University, 1977; DDS, Howard University, 1982.

Harris, Bianca S., Clinical Instructor, Health Promotion and Policy; BS, University of Maryland.

Hashimoto, Katherine M., Clinical Instructor, Oral and Maxillofacial Surgery; BS, University of Illinois, 1994; DDS, University of Maryland, 2001.

Holtgrewe, Theresa A., Clinical Instructor, Health Promotion and Policy; BS, University of Maryland, 2004.

Hooper, Kenny A., Clinical Assistant Professor, Periodontics; BA, Morgan State, 1969; DDS (1978), MS (1997), University of Maryland.

Hsia, Ru-Ching, Dental School Associate Professor, Neural and Pain Sciences; BA, National Taiwan University, 1981; PhD, Stanford University, 1992.

Hsu, Kuei-Ling, Clinical Instructor, Health Promotion and Policy; DDS, Chung Shan Medical University (Taiwan), 2001; MS, University of Alabama, 2008.

Huey, Joyce, Dental School Assistant Professor, Health Promotion and Policy; BS, Bennett College for Women, 1964; DDS, University of Maryland, 1981; MEd, Virginia State College, 1976.

Iddings, John R., Clinical Associate Professor, Endodontics, Prosthodontics and Operative Dentistry; BS, Roanoke College, 1962; DDS, University of Maryland, 1966.

Idzik-Starr, Cynthia L., Dental School Assistant Professor, Oral and Maxillofacial Surgery; BS, Pennsylvania State University, 1980; DDS, University of Maryland, 1984.

Inge, Walter H. Jr., Clinical Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BS, James Madison University, 1977; DDS, Virginia Commonwealth University, 1982.

Jenkins, Thomas Scott, Clinical Assistant Professor, Orthodontics; BS, Northwestern, 1988; DDS, University of Maryland, 1992.

Ji, Yaping, Research Associate, Neural and Pain Sciences; MD (1989), MS (1992), PhD (1997), Xi'an Medical University.

Jones, E. Marston, Clinical Assistant Professor, Orthodontics; BA, Hamilton College, 1960; DDS, Pennsylvania State University, 1964.

Josell, Stuart D., Professor, Orthodontics; DMD, Fairleigh Dickinson University, 1974; M Dent Sc, University of Connecticut, 1980.

Kaplan, Sarit, Clinical Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BSc Hebrew University (Israel), 1991; DMD, Hadassah Dental School (Israel); MS, University of Maryland, 2000.

Kaplowitz, Gary J., Dental School Associate Professor, Endodontics, Prosthodontics and Operative Dentistry; BA, NewYork University, 1971; DDS, New York University, 1979; MA, MEd (1976), Binghamton University.

Katz, Morton I., Clinical Professor, Orthodontics; BS (1962), DDS (1965), University of Maryland.

Kohn, Shari C., Clinical Instructor, Health Promotion and Policy; BA, Brandeis University, 1985; DDS, University of Maryland, 1990.

LaGraize, Stacey, Research Associate, Neural and Pain Sciences; BA, Loyola University, 1996; MA, Southeastern Louisiana University, 1999; PhD, University of Texas, 2004.

Leboe, William E, Clinical Associate Professor, Oncology and Diagnostic Sciences; BS, University of Maryland, 1968; DDS, University of Maryland, 1974.

Lee, Jong-Seok, Research Associate, Neural and Pain Sciences; BS (1995), MS (1997), PhD (2003), Kyung Hee University (Korea).

Lee, Raymond J., Clinical Associate Professor, Oncology and Diagnostic Sciences; BS (1970), DDS (1974), MS (1982), University of Maryland.

Leventer, Marvin H., Clinical Instructor, Periodontics; BA, Yeshiva University, 1985; DDS, University of Maryland, 1990.

Levine, Eric D., Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BA, University of Miami, 1986; DDS, University of Maryland, 1991.

Levy, Bernard A., Associate Professor, Oncology and Diagnostic Sciences; BA, Ohio University, 1962; DDS, Western Reserve University, 1966; MSD, Indiana University, 1969.

Limkangwalmongkol, Penwadee, Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; DDS, Prince of Songkla University, 1995; MS, Ohio State University, 2002.

Ma, Mark (Zhi-Qing), Research Assistant Professor, Oncology and Diagnostic Sciences; MS, China Pharmaceutical University (China), 1987; PhD, University of Milan (Italy), 1995.

Macek, Mark, Associate Professor, Health Promotion and Policy; DDS, University of Nebraska, 1989; MPH, University of Illilnois, 1994; DrPH, University of Michigan, 1998.

Manski, Marion, Dental School Assistant Professor, Health Promotion and Policy; AS, Forsyth School for Dental Hygienists, 1983; BS (1988), MS (2004), University of Maryland.

Manski, Richard J., Professor, Health Promotion and Policy; BS, Boston College, 1976; DDS, Howard University, 1980; MBA, University of Massachusetts, 1985; PhD, University of Maryland, 1993.

Mao, Li, Professor, Oncology and Diagnostic Sciences; MD, Nanjing Medical University, 1982.

Masri, Radi M., Research Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BDS, University of Jordan, 1997; MS (2001), PhD (2005), University of Maryland.

Mays, Keith A., Dental School Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BS, Morgan State University, 1983; DDS, University of Michigan, 1989; MS, University of Iowa, 1994; PhD, University of Maryland, 2010.

McNair, Traci, Clinical Instructor, Health Promotion and Policy; AS, Midwestern States University, 1984; BS, University of Maryland, 2002.

Meehan, Patricia E., Assistant Professor, Periodontics; BS (1981) , BS (1983), DDS (1993), University of Maryland.

Meeks, Valli, Dental School Associate Professor, Oncology and Diagnostic Sciences; BS, Thomas Jefferson University, 1977; BS, Springfield College, 1981; DDS, University of Maryland, 1988.

Meiller, Timothy F., Professor, Oncology and Diagnostic Sciences; BA (1970), MS (1978), The Johns Hopkins University; DDS (1975), PhD (1992), University of Maryland.

Merida Calcina, Susana, Clinical Instructor (Visiting), Health Promotion and Policy; DDS, Carabobo University (Venezuela), 1995.

Miller, Suzan E., Clinical Assistant Professor, Health Promotion and Policy; BA, Beloit College, 1974; DDS, University of Maryland, 1983.

Minah, Glenn E., Professor, Microbial Pathogenesis/Health Promotion and Policy; AB, Duke University, 1961; DDS, University of North Carolina, 1966; MS, University of Michigan, 1970; PhD, University of Michigan, 1975.

Misono, Hiroaki, Assistant Professor, Neural and Pain Sciences; BA (1993), MSc (1995), PhD (1998), Sophia University (Japan).

Moeller, John, Research Professor, Health Promotion and Policy; MA (1967), PhD (1970), University of Wisconsin.

Montaner, Silvia V., Associate Professor, Oncology and Diagnostic Sciences; BS (1992), MS (1993), University of Murcia (Spain); PhD, Universidad Autonoma (Spain), 1997; MPH, Universidad Pontificia Comillas (Spain), 1998.

Morgan, Andrea M., Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BA, University of Michigan, 1985; DDS, University of Maryland, 1990; MS, University of Detroit/Mercy School of Dentistry, 1992.

Mulford, Patricia R., Clinical Assistant Professor, Health Promotion and Policy; BS, University of Maryland, 1974; MS, Johns Hopkins University, 1980.

Murano, Emi, Research Associate, Neural and Pain Sciences; MD, University of Sao Paulo (Brazil), 1991; PhD, University of Tokyo, 2004.

Myslinski, Norbert R., Associate Professor, Neural and Pain Sciences; BS, Canisius College, 1969; PhD, University of Illinois, 1973.

Oates, Stephen M., Clinical Instructor, Endodontics, Prosthodontics and Operative Dentistry; BA, University of California, 1980; DDS, University of Maryland, 1984.

Oh, Se-Lim, Clinical Instructor, Health Promotion and Policy; DMD, Kyung-Hee University, 1995; MS, University of Maryland, 2006.

O'May, Graeme, Research Associate, Microbial Pathogenesis; BSc, University of Edinburgh, 1997; PhD, University of Manchester, 2002.

Oram, Diana M., Assistant Professor, Microbial Pathogenesis; BS, Georgia Institute of Technology, 1992; PhD, Emory University, 1999.

Ord, Robert, Professor, Oral and Maxillofacial Surgery; BDS, Kings College Dental School, 1970; MB, BCh, Welsh National School of Medicine, 1977; MS, University of Maryland, 1996.

Ordovensky, Maura, Clinical Instructor, Health Promotion and Policy; BS, University of Maryland, 1999.

Osso, Diane R., Dental School Assistant Professor, Periodontics; BS, University of Minnesota, 1983; BS (2003), MS (2005), University of Maryland.

Otis, Linda, Professor, Oncology and Diagnostic Sciences; BS (1976), MS (1979), DDS (1984), University of Nebraska.

Owen, David, Health Promotion and Policy; BA, Syracuse University, 1960; DDS, McGill University, 1964; AM, University of Chicago, 1969.

Phillips, Bradley L., Clinical Associate Professor, Endodontics and Periodontics; BS, SUNY Stony Brook, 1974; DMD, Harvard University, 1976.

Phillips, Jane, Clinical Instructor; Health Promotion and Policy; BS, University of Maryland, 1983.

Pohlaus, Steven R., Clinical Instructor, Oncology and Diagnostic Sciences; BS, Bucknell University, 1984; DDS, University of Maryland, 1989.

Porter, Judith, Assistant Professor, Endodontics, Prosthodontics and Operative Dentistry; BA (1977), DDS (1976) West Virginia University; MA, Marshall University, 1999; EdD, Marshall University, 2003.

Preis, Frederick, Clinical Professor, Orthodontics; BS, Loyola College, 1959; DDS, Georgetown University, 1966.

Prymas, Stuart D., Clinical Associate Professor, Endodontics, Prosthodontics and Operative Dentistry; DDS, University of Maryland, 1978.

Rajaski, Jeffrey, Clinical Assistant Professor, Health Promotion and Policy; DDS, University of Maryland, 1999.

Raksin, Irving J., Clinical Assistant Professor, Oral and Maxillofacial Surgery; BS (1960) DDS (1964), University of Maryland.

Rambob, Isabelita, Assistant Professor, Oncology and Diagnostic Sciences; DDS, State University of Feira de Santana (Brazil), 1997.

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Ritter, Thomas, DDS, Volunteer Instructor, Endodontics, Prosthodontics and Operative Dentistry.

Rogers, Clark, Clinical Instructor Volunteer, Oncology and Diagnostic Sciences; DDS, University of Maryland, 1973.

Rosen, Paul S., Clinical Associate Professor Volunteer, Periodontics; DMD, University of Pennsylvania, 1986.

Sachs, Robert I., Clinical Associate Professor Volunteer,

Health Promotion and Policy; DDS, University of Maryland, 1978.

Saini, Viney, DDS, Clinical Assistant Professor Volunteer, Orthodontics.

Samuels, Peter, DDS, Clinical Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Sanker, Robert, Clinical Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Savukinas, John, Clinical Instructor Volunteer, Health Promotion and Policy; DDS, University of Maryland, 1991.

Schermer, Glenn, Clinical Assistant Professor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Schiff, Allan M., Lecturer Volunteer, Health Promotion and Policy; BS, University of Baltimore, 1975.

Schneider, William, Lecturer Volunteer, Health Promotion and Policy.

Schulz, Earle M., Clinical Associate Professor Volunteer, Health Promotion and Policy; DDS, University of Maryland, 1962; MS, University of Iowa, 1972.

Schwartz, Anthony H., Clinical Assistant Professor Volunteer, Neural Pain and Sciences; DDS, University of Maryland, 1977.

Schwartz, Elliot, Clinical Instructor Volunteer, Neural and Pain Sciences.

Schwartzberg, Martin, Clinical Assistant Professor Volunteer, Periodontics; DDS, University of Maryland, 1995.

Shahry, Nahid Z., Clinical Instructor Volunteer, Health Promotion and Policy; DDS, New York Universitym, 1992.

Serafin, Bethany, DMD, Clinical Instructor Volunteer, Oral-Maxillofacial Surgery.

Shapiro, Howard, DDS, Clinical Instructor Volunteer, Health Promotion and Policy.

Sheer, Stuart, DDS, Clinical Assistant Professor Volunteer, Orthodontics.

Shefferman, John, DDS, Clinical Assistant Professor Volunteer, Orthodontics.

Shepley, George, DDS, Volunteer Lecturer, Health Promotion and Policy.

Shires, Paul J., Clinical Instructor Volunteer, Health Promotion and Policy; DDS, Virginia Commonwealth University, 1986.

Shulman, David, BS, Lecturer Volunteer, Health Promotion and Policy.

Shroff, Deven, DMD, Clinical Instructor Volunteer, Health Promotion and Policy.

Silverman, Wayne, Clinical Assistant Professor Volunteer, Endodontics, Prosthodontics and Operative Dentistry; DDS, University of Maryland, 1977.

Sindler, Arnold, Clinical Assistant Professor Volunteer, Periodontics; DDS, University of Maryland, 1976.

Sivakumar, T. P., DDS, Clinical Assistant Professor, Health Promotion and Policy.

Smith, Michael T., PhD, Adjunct Assistant Professor Volunteer, Neural and Pain Sciences.

Smith, Michelle, PhD, Adjunct Assistant Professor Volunteer, Health Promotion and Policy.

Smith, King, DDS, Lecturer Volunteer, Health Promotion and Policy.

Spannhake, Elizabeth, DDS, Clinical Assistant Professor Volunteer, Orthodontics.

Spolarich, Ann, RDH, PhD, Clinical Instructor Volunteer, Health Promotion and Policy.

Stark, Mitchell, Lecturer Volunteer, Oral and Maxillofacial Surgery; DDS, University of Maryland, 1988.

Steckel, Stephanie, DDS, Clinical Assistant Professor, Orthodontics.

Stiles, Dennis, Clinical Instructor Volunteer, Health Promotion and Policy.

Stiles, Marie, Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Strahl, Robert, Clinical Instructor Volunteer, Neural and Pain Sciences; DDS, University of Maryland, 1978.

Suzuki, Jon B., Clinical Professor Volunteer, Periodontics; PhD, Illinois Institute of Technology, 1971; DDS, Loyola University of Chicago, 1978.

Sydney, Sheldon, DDS, Clinical Assistant Professor Volunteer, Periodontics.

Tan, Peter, DDS, Assistant Professor Volunteer, Oral-Maxillofacial Surgery.

Taub, Daniel, Health Promotion and Policy.

Taubenfeld, Martin, DDS, Clinical Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Taylor, Karen, RDH, Clinical Instructor Volunteer, Health Promotion and Policy.

Taneyhill, James, Volunteer Lecturer, Health Promotion and Policy; DDS, University of Maryland, 1980.

Tennassee, Luz, Clinical Instructor Volunteer, Health Promotion and Policy.

Tewes, Warren, Clinical Assistant Professor Volunteer, Endodontics, Prosthodontics and Operative Dentistry; DDS (1975), MS (1982), University of Maryland.

Tigani, James, DMD, Clinical Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Tong, James Yi, DDS, MS, Clinical Instructor Volunteer, Orthodontics.

Toomey, Christopher, Lecturer Volunteer, Endodontics, Prosthodontics and Operative Dentistry; DDS, University of Maryland, 1999.

Valdivieso, Monica, Health Promotion and Policy.

Vallandingham, James, Clinical Instructor Volunteer, Health Promotion and Policy.

Wagner, Mark, Professor Emeritus, Health Promotion and Policy.

Wahl, Sharon, PhD, Adjunct Research Professor Volunteer, Periodontics.

Wallace, Stephen, DDS, Clinical Associate Professor Volunteer, Periodontics.

Ward, Nancy, Clinical Instructor Volunteer, Health Promotion and Policy; DDS, University of Maryland, 1981.

Welsh, Debra, DDS, Clinical Instructor Volunteer, Health Promotion and Policy.

Whitney, Larry, DDS, Clinical Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Williams, David, DDS, Clinical Assosciate Professor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Winson, Dennis, DDS, Clinical Associate Professor, Periodontics.

Yaqui, Luis, DDS, Clinical Instructor Volunteer, Health Promotion and Policy.

Yen, C. Alec, DMD, Clinical Assistant Professor Volunteer, Periodontics.

Zamani, Mehdi, DDS, Clinical Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Zeffert, Patricia, DDS, Clinical Instructor Volunteer, Endodontics, Prosthodontics and Operative Dentistry.

Zupnik, Edward A., Clinical Professor Volunteer, Periodontics; DDS, University of Maryland, 1992.

## UNIVERSITY OF MARYLAND, BALTIMORE

### Administrative Officers

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# POLICY STATEMENTS

## UNIVERSITY OF MARYLAND POLICY EXCERPTS

No provision shall be construed as a contract between any applicant or student and the University of Maryland. The University reserves the right to change any admission or advancement requirement at any time. The University further reserves the right to ask a student to withdraw at any time when it is considered to be in the best interest of the University. Admission and curriculum requirements are subject to change without prior notice.

The University publishes policies and procedures in the Student Answer Book, distributed to enrolled students each fall. Call the Office of Student Services at 410-706-7117/7714 (Voice/TTD) to request a copy.

The Rules and Regulations section of the Student Answer Book contains the following policies and others:

- Eligibility to Register
- Immunization Policy
- Position on Acts of Violence and Extremism that are Racially, Ethnically, Religiously, or Politically Motivated
- Faculty, Student, and Institutional Rights and Responsibilities for Academic Integrity
- Scheduling of Academic Assignments on Dates of Religious Observance
- Service to those with Infectious Diseases
- Student Residency Classification for Admission, Tuition, and Charge Differential Purposes
- Policy on Smoking
- Student Right to Know and Campus Security Act

## UNIVERSITY OF MARYLAND POLICY CONCERNING PREVENTION AND MANAGEMENT OF STUDENT AND EMPLOYEE INFECTION WITH BLOODBORNE PATHOGENS

The Dental School fully subscribes to the University of Maryland Policy Concerning Prevention and Management of Student and Employee Infection with Bloodborne Pathogens, which became effective July 1, 1994. All enrolled students receive a copy of this policy statement as part of their matriculation documents. Individuals seriously considering applying to any of the Dental School's programs should request a copy of the policy from the Office of Admissions and Student Affairs or should view the policy on the web by clicking the policy name above.

Section 6, Admissions and Hiring Practices, of the policy statement states: "Inquiries about infection with HBV, HCV or HIV will not be made of prospective University of Maryland Personnel. Neither admission nor employment will be denied any otherwise qualified individual on the basis of infection with Bloodborne Pathogens. However, limitations on the training and professional activities which may result from infection with Bloodborne Pathogens will be communicated to prospective students and employees." (See Next section.)

Section 7, Advice on Risks and Limitations, states: "...Applicants who are infected with Bloodborne Pathogens are not required to identify themselves to the University. Advice to applicants will be provided in a general form available to all applicants. If infection with a specific Bloodborne Pathogen (e.g., HBV) could prevent a person from completing the curriculum or subsequently practicing the intended profession as a result of scientifically established contagion risk, this information will be included in the general information which the school distributes to applicants." Although information concerning applicants' status regarding bloodborne pathogens is not a part of the admissions process, status of infection could adversely affect individuals' ability to complete their educa-

tion or their ability to obtain future professional licensure. All candidates for enrollment are strongly encouraged to know their sero-status and to seek professional advice if they have questions. The dean of the Dental School has appointed an ombudsman or advocate to whom any applicant, student, or employee can go in confidence for advice on policies and procedures related to infection with bloodborne pathogens and on the implications of testing and disclosure for enrollment or employment status. Individuals with specific questions or concerns are urged to seek advice from the Dental School's ombudsman.

Section 9, Immunizations Against HBV, states: "Students enrolling in academic programs that will involve participating in invasive or exposure-prone procedures must be vaccinated against HBV at their own expense. Students may be vaccinated at Student and Employee Health. Those who were immunized prior to enrollment must provide evidence of immunization to the enrolling school."

### Doctor of Dental Surgery and Bachelor of Science in Dental Hygiene Applicants

Although students are strongly encouraged to complete the three-shot Hepatitis B immunization series before matriculation, entering students who have not been appropriately immunized against HBV will receive their first vaccination during Dental School orientation through Student and Employee Health. The second and third vaccinations will occur at one- and six-month intervals, respectively. Students may not participate in clinical or other activities in which they may be placed at occupational risk until at least one month after the second in the series of HBV immunizations. Failure to complete the series in a timely manner could result in delayed progress through the curriculum or dismissal from enrollment.

## MATRICULATION POLICIES

### Equal Opportunity

In educational programs, the University and the Dental School do not discriminate on the basis of race, color, religion, age, ancestry or national origin, gender, sexual orientation, physical or mental disability, marital status or veteran status. Exceptions are as allowed by law, for example, due to bona fide occupational qualifications or lack of reasonable accommodations for disabilities.

### Advanced Dental Education Applicants

It is anticipated that most applicants for Advanced Dental Education programs will have received the full three-shot series of HBV immunizations as predoctoral students. For those individuals who have not completed the HBV immunization series, Dental School policy requires that all Advanced Dental Education applicants considering enrollment should begin the three-shot HBV immunization series no later than May 1 of the year of matriculation. As a condition of enrollment, students must provide documentation that they received the first in the series no later than May 1 and the second no later than June 1. Those individuals may receive their third immunization through Student and Employee Health at the appropriate time after enrollment at the Dental School.

### TREATMENT PARTICIPATION POLICY

As a part of the educational process, dental and dental hygiene students will be required from time to time to satisfactorily participate in diagnostic, therapeutic, and nontherapeutic oral health care services. Each student will be required to participate as a caregiver and as the patient. This requirement is disclosed before admission. By enrolling, each student consents to this requirement. Student patients may be provided care by any assigned student or faculty member. All personal health care information provided to the School by a student patient is confidential in nature, will be treated with the confidentiality accorded a patient record under Maryland health care laws and School policy, and will be used only in connection with delivery of oral health care services. Exceptions to this required participation in educational activities may be warranted in extraordinary circumstances, such as a high risk to the student-patient or to the provider associated

with the delivery of treatment. Applicants or students with concerns about such situations should contact the chair of the Clinical Operations Board, who has the authority to determine when exceptions will be granted.

## TECHNICAL STANDARDS FOR ADMISSION AND MATRICULATION

Admission to the Dental School is open to all qualified individuals and in accordance with the 1973 Vocational Rehabilitation Act (29 U.S.C. §701 et seq.) and the Americans with Disabilities Act (42 U.S.C. §12101 et seq.).

Dental education requires that the accumulation of scientific knowledge be accompanied by the simultaneous acquisition of skills and professional attitudes and behaviors essential to the profession. Students require cognitive, behavioral, technical, and social skills to negotiate the curricula. The Dental School is mindful of the unique nature of dental curricula. It is the responsibility of the Dental School's admissions committees to select candidates who are qualified to complete the classmates in performing such diagnostic and reversible procedures as local anesthesia administration, sealant placement, required training. As part of the education process, students in all of the School's clinical programs are required to provide treatment for patients and practice techniques with student-partners. Students are required to serve as patients for their and oral prophylaxis. The Dental School has the responsibility of ensuring timely and safe treatment of all patients during these processes.

With these principles in mind, students must be able to meet the following technical standards, without accommodation, or with reasonable accommodation. The use of a trained intermediary is not acceptable in clinical situations. A student's judgment and skill may not be mediated by reliance on someone else's power of selection and observation, or clinical ability.

### Observation

A student must be able to acquire defined levels of required information and skills as presented through demonstrations and experiences in the basic, behavioral, and dental sciences. A student must be able to observe patients accurately, at a distance and close at hand, and observe and appreciate verbal as well as nonverbal communications when assessing a patient's oral and craniofacial conditions and providing treatment. Observation necessitates functional use of the sense of vision and other sensory modalities.

A student must be able to:

- Observe a patient accurately, with or without standard instrumentation.
- Acquire information for written documents.
- Visualize information presented in images from paper, film, slides, computer displays, and video.
- Interpret X-rays or other graphic images.

### Communication

A student must be able to communicate effectively and sensitively with patients; convey or exchange information at a level allowing the development of a health history; identify problems presented; explain alternative solutions; and give directions during treatment and after treatment. Communication includes at a minimum, speaking, reading, and writing. Students must be able to communicate effectively and efficiently in spoken and written English with all members of the health care team and the patient.

A student must be able to:

- Speak, understand spoken words, and observe patients by sight to elicit information, describe changes in appearance, and perceive changes in nonverbal communications
- Obtain a health history and other pertinent information from patients
- Read and apply appropriate information and instructions contained in requisitions, notes, and patient charts
- Understand and apply clinical instructions given by others

- Communicate efficiently and effectively in oral and/or written form with patients, families of patients, and all members of the health care team, during both emergencies and non-emergency situations

### Sensory and Motor Coordination and Function

A student must have sufficient motor function to execute movements reasonably required to provide general care and emergency treatment for patients. Such actions require coordination of both gross and fine muscular movements and equilibrium. A student must have functional use of the senses of touch and vision.

A student must be able to:

- Perform palpation and other diagnostic and therapeutic maneuvers.• Perform basic laboratory procedures and work with standard laboratory materials.
- Reach and manipulate equipment to all positions in order to control the operating environment.
- Execute motor movements required to provide general and emergency care, including activating the emergency medical system.

### Intellectual, Conceptual, Integrative, and Quantitative Abilities

A student must be able to measure, calculate, reason, analyze, integrate and synthesize. Problem solving, a critical skill demanded of oral health practitioners, requires all of these intellectual abilities. A student must be able to perform these problem solving skills in a timely fashion and comprehend three-dimensional relationships and understand the spatial relationships of structures.

### Behavioral and Social

A student must possess the physiological and psychological stamina required for full utilization of intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and treatment of patients, and the development of mature, sensitive, and effective relationships with patients. A student must be able to interact with faculty and colleagues, use good judgment, and engage in the exchanging of ideas. A student must be able to accept and give constructive criticism.

A student must be able to:

- Adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of patients.
- Display compassion, integrity, and concern for others.

### Other Requirements

A student must provide evidence of immunization or immunity for each of the following diseases:

- Hepatitis B
- Measles
- Mumps
- Rubella
- Varicella (chickenpox)
- Tetanus/diphtheria, within the past 10 years

Acceptable evidence is a written document signed by a licensed health care professional that specifies the dates of immunization, medical test results that demonstrate the student's immunity, or a document that specifies the date the student had the disease. In addition, each student must provide the results of tuberculosis screening that has been performed within 12 months of the date of the student's enrollment. Screening must show a negative PPD test or, if the PPD is positive, a negative chest X-ray report. More information in the online University Student Answer Book. The admission of a student who is chronically infected with hepatitis B virus will be considered on a case-by-case basis after consultation with a panel of experts in infectious diseases. This panel will consider the hepatitis B antigen status, the health of the student, and decide what, if any, restrictions and monitoring are necessary for the student during their training in dentistry or dental hygiene.

## Applicants with Disabilities

The Dental School will provide reasonable accommodation in the admissions process for applicants with disabilities. An applicant is not disqualified from consideration due to a disability. Although the Dental School may not inquire whether an applicant has a disability before making an admissions decision, an applicant may disclose during the admission process a disability for which he or she wishes accommodation during the admissions process or upon admission. If this disclosure occurs, the Dental School may request that the applicant provide documentation of the disability. The admissions committee will consider the applicant based on the published criteria for admission of all applicants.
An applicant who discloses a disability and requests accommodation in the admission process will be required to submit, in writing, the request for accommodation and pertinent supporting documentation. This pertinent information will include a history of accommodations granted previously in other educational programs and references who can discuss the experience of the student in other educational settings. Requests for accommodation should be initiated with the Director of Student Support Services.

The Dental School may require additional medical or other verification of disabilities and proof of information presented concerning accommodations. Such proof may include demonstration of assisted physical abilities. The School may require independent medical examinations or testing to verify claimed disabilities, determine the extent and effects of disabilities, and assess the utility of accommodations. Technical and medical consultations from resources within the University and external to the University may be obtained. Costs of independent medical examinations, testing, technical and medical consultations required by the Dental School will be borne by the Dental School.

The Dental School's Administrative Advisory Committee will make a determination as to the reasonableness of the accommodations that the applicant has requested or will determine alternative reasonable accommodations that the Dental School may offer.

## Enrolled Students with Disabilities

A student who discloses a disability and requests accommodation will be required to submit, in writing, the request for accommodation and pertinent supporting documentation. The pertinent information will include documentation of the disability, by an appropriately credentialed professional. If available, documentation should also include history of accommodations granted previously in other educational programs and references who can discuss the experience of the student in other educational settings. Requests for accommodation should be initiated with the Director of Student Support Services.

The Dental School may require additional medical or other verification of disabilities and proof of information presented concerning accommodations. Such proof may include demonstration of assisted physical abilities. The School may require independent medical examinations or testing to verify claimed disabilities, determine the extent and effects of disabilities, and assess the utility of accommodations. Technical and medical consultations from resources within the University and external to the University may be obtained. Costs of independent medical examinations, testing, technical and medical consultations required by the Dental School will be borne by the Dental School.

The Dental School's Administrative Advisory Committee will make a determination as to whether the student can perform the essential functions of the educational program, taking into account the accommodations that the student has requested or alternative reasonable accommodation that the Dental School would offer. Costs of reasonable accommodation will be borne by the Dental School from its resources or other funds available to it.

The Dental School will provide reasonable accommodations, but is not required to make, nor will it make, modifications that would fundamentally alter the nature of the educational program or provide auxiliary aids that present an undue

burden to the Dental School. The student must be able to perform all of the technical standards with or without reasonable accommodations to matriculate or continue in the program.

Approved by Faculty Council: November 20, 2001.

## REGISTRATION PROCEDURES

To attend classes, students in all programs except Oral and Maxillofacial Surgery are required to register each term in accordance with current registration procedures. Fees are due and payable on the dates specified for registration. Registration is not completed until all financial obligations are satisfied. Students who do not complete their registration and pay tuition and all fees will not be permitted to attend classes. A fee will be charged for late registration.

Although the University regularly mails bills to advance-registered students, it cannot assume responsibility for their receipt. If any student does not receive a bill before the beginning of a semester in which he/she has advance registered, it is the student's responsibility to contact the registrar's office or cashier's office during normal business hours.

All checks and money orders should be made payable to the University of Maryland for the exact amount of the actual bill.

No diploma, certificate or transcript of record will be issued to a student who has not made satisfactory settlement of his or her University account.

## DETERMINATION OF IN-STATE STATUS

An initial determination of in-state status for admission, tuition and charge-differential purposes will be made by the University at the time a student's application for admission is under consideration. The determination made at that time, and any determination made thereafter, shall prevail in each semester until the determination is successfully challenged. Students classified as in-state for admission, tuition and charge-differential purposes are responsible for notifying the Office of the Registrar, in writing, within 15 days of any change in their circumstances that might in any way affect their classification at the University.

The determination of in-state status for admission, tuition and charge-differential purposes is the responsibility of the campus Office of the Registrar. A student may request a reevaluation of this status by filing a petition. The University's policy is available through the Office of the Registrar.

## WITHDRAWAL AND REFUND OF FEES

Students who want to withdraw from the School at any time during the academic year are required to file a letter of resignation with the dean. After completing Dental School check-out procedures as verified on the withdrawal form, the student must obtain an application for withdrawal form bearing the proper signatures, which must be filed with the registrar's office. The student must have no outstanding obligations to the School or the University and must return the student identification card. The date used in computing refunds is the date on which the application for withdrawal is approved by the dean's office.

Students officially withdrawing from the school will be refunded appropriate academic fees based on a percent of attendance. Refund schedules are available from the Office of Student Accounts.

If the above procedures are not completed, the student will not be entitled to honorable withdrawal and will forfeit the right to any refunds that would otherwise be given. The Dental School may also place a hold on the student's record to withhold transcripts and certifications.

## TRANSCRIPT OF RECORD

Students and alumni may secure transcripts of their University of Maryland record from the registrar's office. There is no charge for this service. A request for transcripts must be made

in writing and should be made at least five days in advance of the date when the records are actually needed. Transcripts are issued in turn as requests are received. No transcript will be furnished to any student or alumnus whose financial obligations to the University have not been satisfied.

## DIPLOMA APPLICATION

Degree requirements vary according to the University of Maryland school or program in which a student is registered. However, each degree candidate must file a formal application for diploma with the registrar's office at the beginning of the term in which the student expects to graduate. This must be done by the end of the third week of the semester or the second week of the summer session. A student who does not graduate on the originally expected date must reapply for graduation by the appropriate deadline.

## STUDENT HEALTH REQUIREMENTS

All students are required to have the campus-sponsored student health and hospitalization insurance or its equivalent. Detailed information regarding the provisions of the student policy the University offers may be obtained from Student and Employee Health. At the time of registration each year, students must either purchase the student coverage or produce certified proof of equivalent coverage. If proof of comparable insurance is not received at Student and Employee Health by September 15, the student will be required to pay for the student policy for that semester.

Students are required to document their immunity to childhood diseases, including measles, mumps, rubella and chicken pox. Information regarding specific requirements will be distributed to each student.

Since hepatitis B is an occupational risk for health care providers, all enrolling dental students are also required to undergo immunization against hepatitis B. Vaccine cost is included in the student fees.

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## STUDENT JUDICIAL POLICY

### I. OVERVIEW

This Policy applies to students in the Dental School DDS program, Bachelor of Dental Hygiene program,and students in Advanced Dental Education certificate programs: Advanced Education in General Dentistry (AEGD), Endodontics, Orthodontics, Pediatric Dentistry, Periodontics, and Prosthodontics.

Students enrolled only in M.S. or Ph.D. programs are subject to the policies of the Graduate School. Students enrolled simultaneously in a graduate program and one of the programs listed above are subject to this Policy in addition to policies of the Graduate School. Oral & Maxillofacial Surgery residents are not included but rather are subject to policies of the University of Maryland Medical System.

### II. STUDENT VIOLATIONS OF THE PROFESSIONAL CODE OF CONDUCT

A. The following behaviors, while not all inclusive, are student violations of the Professional Code of Conduct. Furthermore, a student's deliberate attempt to violate the Code of Conduct, even if unsuccessful, may be deemed a violation, as may be a student's allegation of misconduct if reported in bad faith.

B. Unprofessional Conduct.
Including, but not limited to, all forms of conduct that fail to meet the standards of the dental profession as found in the ADA Code of Ethics, use of abusive language or behavior, sexual harassment, disruption of class or any other school activity, violations of patient confidentiality provisions of HIPAA, unethical treatment of patients, failure to report observed violations of the Code of Conduct, and/or violation of other University or Dental School policies.

C. Academic Misconduct.
All forms of student academic misconduct including, but not limited to, plagiarism, cheating on examinations, violation of examination procedures, and submitting work for evaluation that is not one's own effort.

D. Dishonesty.
Including knowingly furnishing false information through forgery, alteration, or misuse of documents or records with intent to deceive; presenting written or oral statements known to be false; loaning, transferring, altering or otherwise misusing University identification materials; signing the Judicial Policy Statement when violations were either committed or observed and unreported, as specified.

E. Theft or Destruction of Property.
Including unauthorized appropriation, possession or receiving of property that does not belong to the individual, such as instruments and books, or destruction of property not belonging to the individual.

F. Forcible entry into University facilities.

G. Being present in the Dental School building without permission when the building is closed.

H. Intentional infliction or threat of bodily harm.

I. Possession of illegal drugs; being under the influence of alcohol or illegal drugs.

J. Carrying of firearms or ammunition on campus.

K. Aiding or Abetting.
Including conspiring with, or knowingly aiding or abetting, another person to engage in any unacceptable activity.

L. Providing patient treatment without faculty supervision

M. Violation of any codes, rules, and regulations of the University or the Dental School, including clinical policies and protocols in the Student Clinic Manual.

N. Event-related misconduct on campus or off-campus, which is misconduct related to any University sponsored event that results in harm to persons or property or otherwise poses a threat to the stability of the campus or campus community.

O. Actions taken in a deliberate attempt to engage in an unacceptable activity.

## III. SERIOUS OFFENSES AND INFRACTIONS

A. Serious Offenses

1. Serious offenses must always proceed directly to a Pre-Hearing conference and a formal Hearing.

2. Serious offenses include: theft, destruction of property, forcible entry into University facilities, intentional infliction or threat of bodily harm, possession of illegal drugs or weapons, event-related misconduct, aiding and abetting a serious offense.

B. Infractions

1. Infractions may proceed directly to a Pre-Hearing conference and a formal Hearing. However, the Faculty Co-Chair may recommend that a student accused of an infraction be offered the option of resolution through a Conference for Resolution or through Mediation when it appears the complainant and the accused can reach a satisfactory resolution of the dispute.

2. Infractions include: unprofessional conduct, academic misconduct, dishonesty, being present in a University building off-hours, patient treatment without supervision, violation of codes, rules or regulations, aiding or abetting an infraction.

## IV. STUDENT JUDICIAL BOARD

A. Function.

The Judicial Board ("the Board") is a function of the Professional Conduct Committee, a standing committee of the Faculty Council. The Board is responsible for conducting investigations and hearings to resolve allegations of violations by students of the Professional Code of Conduct. The Judicial Board shall consist of seven (7) students and six (6) faculty members. Members shall be appointed by the Dean with the approval of the Faculty Assembly but should not include the faculty advisor to the Student Dental Association nor faculty members on the Student Affairs Committee. Three faculty members should represent the clinical sciences and three faculty members should represent the basic sciences. The student members shall consist of one (1) second year Advanced Dental Education student, the four (4) Dental Class Vice Presidents, the Senior Class Dental Hygiene Secretary, and the Vice President of the Student Dental Association. The student Co-Chairs will be elected by the members of the board. The Faculty Co-Chair will be appointed by the Dean.

B. Judicial Panel.

A Judicial Panel is an ad hoc Panel of the Judicial Board. The Judicial Panel is the official body to conduct a Hearing, reach findings, and make recommendations to the Dean with respect to sanctions for proven student violations of the Professional Code of Conduct. A Judicial Panel (also referred to herein as a "Full Panel") for a Hearing shall consist of three (3) students (one of whom will be the Student Co-Chair, if feasible) and two (2) faculty members. The Faculty Co-Chair of the Judicial Board (or designee) will be an additional, non-voting member of each Panel. Members of a Panel will be appointed by the Judicial Board Co-Chairs. One faculty member should represent the clinical sciences and one faculty member should represent the basic sciences. At least one student member should represent the program of the complainant, when feasible. A Panel may have additional non-voting members for complex cases, as deemed appropriate by the Judicial Board Co-Chairs.

C. Faculty Co-Chair.

The Faculty Co-Chair of the Judicial Board is responsible for maintaining the integrity of the Judicial Board process and ensuring the proper application of Judicial Board

policies and procedures. The Faculty Co-Chair does not sit as a voting member on any Panel. The office of the Faculty Co-Chair maintains Judicial Board records and obtains administrative support for the Judicial Board as needed. When necessary, a Faculty Co-Chair designee can be selected to perform responsibilities of the Faculty Co-Chair. The designee will be selected by the Dean from the faculty members of the Judicial Board.

D. Quorum.
A Full Panel quorum to deliberate shall consist of least two (2) voting students and one (1) voting faculty member. A Panel member may not vote in deliberations if that person was not present for the entire Hearing.

E. Conflict of Interest.
A faculty or student member who is directly involved in a particular case being heard or whose relationship with a party presents a conflict of interest which is likely to interfere with fair and impartial consideration of the matter will be excused at the discretion of the Faculty Co-Chair and replaced by an alternate selected by the Co-Chair.

## V. PROCEDURES FOR MAKING A COMPLAINT

A. These procedures are intended to give reasonable assurance of fairness and due process and keep intact the responsibilities and prerogatives of the Dean of the Dental School (hereafter known as "the Dean") and the faculty. It is expected that Judicial Board matters will be conducted with a high degree of discretion and confidentiality and that every effort will be made to limit knowledge of pending proceedings to those who are directly involved in them.

B. Students and faculty must report a reasonable suspicion of a violation of the Code of Conduct in writing to the Judicial Board Faculty Co-Chair. Confidentiality will be observed to the extent possible, however, due process usually requires that the original complainant be identified to the accused.

C. This procedure for making a complaint does not prohibit an observer from confronting a student at the time alleged misconduct is observed and before a written complaint is prepared, to further ascertain if the complainant's suspicion of misconduct is reasonable. In some cases, it is possible the accused student will provide a convincing reason why his or her behavior has been misconstrued by the observer, or a convincing reason why the behavior is not a violation of the Code of Conduct. In such a case, a formal complaint may not be justified. However, if the accused student's response is not sufficient to resolve the complainant's reasonable suspicion of misconduct, a formal written complaint should be submitted. Because of the importance of impartial review of allegations and the need for consistent application of the Code of Conduct, when in doubt, an observer should err in favor of reporting the allegation.

D. When the commission of an alleged infraction is first observed, the student's activity need not be interfered with in a manner that presumes that the student is responsible for misconduct. However, common sense action should be taken if the safety of the student or others is in jeopardy, there is risk of upset to the good order or proper operations of academic, administrative, clinical or other school activity, if there is a risk to University property, or a further or continuing violation is reasonably likely.

E. If a student or faculty member is unclear about whether or how to proceed with a complaint, he or she should contact the Judicial Board Faculty Co-Chair.

F. Complaints must be reported in written form to the Faculty Co-Chair of the Judicial Board within five (5) school days of their discovery, if feasible. However, reasonable delays in reporting complaints do not invalidate the process and should not be the sole rationale for failing to report a complaint. A written complaint should include a plain language, first-hand description of what the complainant knows, including date, time, and place and

a description of any exchange with the accused student, including any confrontation with the student before the formal complaint was submitted. Persons other than the complainant who may have additional relevant information should be named and their roles in the matter explained. Any supporting evidence should be identified and explained in the complaint and copies of the evidence attached to the complaint. The complaint should be signed and dated. It may be marked "Confidential."

G. The Faculty Co-Chair of the Judicial Board will inform the Dean in general terms, without identifying the accused, if feasible, that a case has been referred to the Board.

H. A pending action of the Board shall not prevent the student continuing in the academic program unless extraordinary circumstances exist. A student may be temporarily suspended from the School or from engaging in various school activities to protect his physical or emotional safety and well-being, or to protect the safety of others, if there is risk of upset to the good order or proper operations of academic, administrative, clinical or other school activity, if there is a risk to University property, or a further or continuing violation is reasonably likely. The authority to enforce these provisions shall be vested in the Dean.

I. The Dean shall be advised immediately if an alleged violation could be a violation of federal, state, or local laws. The Dean shall determine if the proper authorities need to be notified of the allegation.

## VI. PRE-HEARING PROCEDURE

A. Preliminary Review

1. Upon the receipt of a written complaint, the Faculty Co-chair will conduct a preliminary review of the complaint, within five (5) school days, if feasible, of receiving the complaint.

2. The purpose of the preliminary review is to determine if the matter comes under the jurisdiction of the Judicial Board and to assess if there is sufficient evidence or need to proceed.

3. The Faculty Co-Chair shall not attempt to reach conclusions about responsibility for alleged violations, make findings of fact, encourage a confession, or negotiate early resolution of the matter.

4. Appropriate actions of the Faculty Co-Chair during the preliminary review may include a conversation with the complainant to address essential information that is missing from the complaint, identifying persons who should be called to provide testimony, identifying records that should be obtained for evidence, and identifying issues that may need to be explored to better understand the nature of the complaint.

B. Dismissal

1. The Faculty Co-Chair may recommend that the matter be dismissed only for insufficient evidence or lack of jurisdiction. Evidence is insufficient when all of the evidence considered together is clearly inadequate to support a conclusion of wrongdoing, even when interpreted in a manner most likely to support the accuser's allegation.

2. When recommending dismissal, The Faculty Co-Chair will present the matter to a Small Panel selected by the Co-Chair from the Judicial Board of 1 faculty and 2 students (one of whom will be the student Co-Chair, if feasible) who will review the complaint and the evidence, hear the Faculty Co-Chair's reasons for recommending dismissal and then the Small Panel will vote to approve or disapprove the decision to dismiss. A 2/3 vote is required to dismiss, otherwise the matter will proceed.

3. If dismissed, the Small Panel must also vote to determine if the complaint was brought in bad-faith and if so, the rationale for that conclusion.

4. If the complaint is dismissed, the Faculty Co-Chair must

summarize the reasons for dismissal and provide the explanation in writing to the complainant. Because of the importance of the right to have a complaint heard, the summary should provide an appropriate level of detail to demonstrate that the matter was given due consideration.

C. Further Action

If the matter is not dismissed for lack of jurisdiction or lack of evidence in accordance with Section V.B. the Faculty Co-Chair will take further action.

1 . Serious offenses. Serious Offenses must always proceed directly to a Pre-Hearing conference and a formal Hearing.

2 . Infractions.

Infractions may proceed directly to a Pre-Hearing conference and a formal Hearing. However, the Faculty Co-Chair may recommend that a student accused of an infraction be offered the option of resolution through a Conference for Resolution or Mediation when it appears the complainant and the accused can reach a resolution satisfactory to the complainant, accused and the Faculty Co-Chair.

3. Conference for Resolution or Mediation.

If the Faculty Co-Chair believes that the matter should be handled through a Conference for Resolution or Mediation, the Faculty Co-Chair will present the recommendation to a Small Panel selected by the Co-Chair from the Judicial Board of 1 faculty and 2 students (one of whom will be the student Co-Chair, if feasible) who will review the complaint, hear the Faculty Co-Chair's reasons for the recommendation, and then the Small Panel will vote to approve or disapprove the recommendation. A 2/3 vote is required to approve the recommendation, otherwise the matter will proceed to a Pre-Hearing conference and a formal Hearing.

D. Student Notification

Once a decision is made on the best option for proceeding, the Faculty Co-Chair will notify the accused student in writing, within five (5) school days if feasible, of the complaint. The notice will briefly summarize the allegation(s), will include a copy of the complaint , the relevant evidence submitted with the complaint, other relevant evidence obtained during the Preliminary Review, a copy of this Policy, and a list of the members of the Panel that will further consider the matter. If a Conference for Resolution or Mediation is proposed, the student shall be given three (3) school days to accept. If the student does not accept or does not respond by the deadline, the matter will proceed to a Pre-hearing Conference and a full Hearing.

## VII. CONFERENCE FOR RESOLUTION

A Conference for Resolution may provide a concise means of reaching consensus and resolving simple complaints in one session. A Conference for Resolution is recommended only for simple complaints such as minor discourtesies and misunderstandings. A simple complaint involves a matter where the complainant and the accused can reach a consensus that is satisfactory to the complainant, accused and the Co-Chairs, in one session. If there are matters that cannot be satisfactorily resolved in one session, the matter then proceeds to a formal Hearing.

A. The Faculty and Student Co-Chairs will meet with the complainant and the accused, together or separately, at the discretion of the Co-Chairs. The Co-Chairs should not attempt to encourage an admission of wrongdoing or confession.

B. A complete review of the evidence will generally not be conducted but allusions to evidence are permitted if they are needed to facilitate discussion.

C. If the accused student accepts full responsibility for misconduct, the Faculty Co-Chair shall advise the accused student of the sanction, if any, that will be recommended to the Dean and of the fact that the Dean may choose not to accept the recommendation, which may result in a sanction when none has been recommended, or a different sanction

which may be more serious. The accused student may request a full Hearing either before or after being notified of the recommended sanction and the Faculty Co-Chair shall terminate the Conference for Resolution and grant the request for a Hearing. If the accused student accepts full responsibility and the proposed sanction, the Faculty Co-Chair will prepare a summary of findings and recommendation in consultation with the student Co-Chair. If the accused student does not fully agree with the conclusions of the Co-Chairs or does not accept the recommended sanctions, the Co-Chairs should conclude the Conference for Resolution and the matter proceeds to a Hearing.

D. If the Co-Chairs, the complainant and the accused agree with the conclusions and proposed sanctions, the complainant and accused will sign the summary prepared by the Faculty Co-Chair. The summary will describe the resolution, include a recommendation for sanction, if appropriate when the student has accepted responsibility for misconduct, or include a statement that the student is not responsible for misconduct. A copy of this document will be provided to the complainant and the accused and to the Dean who will take action, if required, in accordance with Section XII. However, if the student is not responsible for misconduct, no notice will be provided to the Dean.

E. If both Co-Chairs are convinced on the basis of the Conference for Resolution that the evidence is insufficient to support a conclusion of wrongdoing, even when interpreted in a manner most likely to support the accuser's allegation, the Co-Chairs may recommend dismissal of the matter following the procedures under Section V.B.

F. If, at any time during the Conference for Resolution, the Faculty Co-Chair determines that a formal Hearing will enhance fact-finding or due process or that a consensus cannot timely be reached, the Faculty Co-Chair may terminate the Conference for Resolution and the matter will proceed to a full Hearing.

## VIII. MEDIATION

The Faculty Co-Chair may recommend that a complainant and the student accused of an infraction be offered the option of resolution through Mediation. Mediation may be appropriate when it appears the complainant and the accused can reach agreement about the facts of the situation and about responsibility for the alleged violations in one session.

When Mediation is approved by all parties, the matter will be referred to The Center for Dispute Resolution at the University of Maryland's School of Law ("C-DRUM"). C-DRUM policies and procedures will govern the Mediation. Any participant, including the mediator, may choose to end the mediation at any time.

The role of the mediator is to encourage discussion and help the parties explore possible resolutions. The mediator will not provide legal advice, take sides, or resolve the dispute. The mediator is not responsible for protecting the legal rights of the participants. Mediation does not relieve the participants of their responsibility to comply with University and School policies and codes.

In the event the Mediation does not successfully resolve the situation within a time frame deemed appropriate by the Faculty Co-Chair of the Judicial Board, the mediation may be terminated and the matter will proceed to a Pre-Hearing conference and a formal Hearing.

## IX. HEARING

A. Conference.

A conference will be held in advance of the Hearing to address procedural and other issues. The Pre-Hearing Conference is a brief meeting between the complainant, accused student, the Student Co-Chair and the Faculty Co-Chair of the Judicial Board. The Co-Chairs may decide to meet with the complainant and accused together or may have a separate meeting with the complainant and the accused. Discussion will generally be limited to:

1. Confirmation that the accused has a full and current copy of the complaint, the attachments, all relevant evidence, and this policy

2. Review of key points about the next step in the process (e.g., timeline for accused to identify witnesses and submit evidence, conduct of the Hearing, etc.)

3. Discussion to enable the Co-Chairs to identifying persons who the Judicial Board may wish to call to a Hearing to provide testimony

4. Discussion to enable the Co-Chairs to identify records and other evidence that should be obtained

5. Discussion to enable the Co-Chairs to identify issues that may need to be explored by the Judicial Board to better understand the nature of the complaint

6. Discussion to identify any questions or new issues raised by the complainant or the accused. The accused student may not be compelled to attend or participate in the Pre-Hearing Conference.

B. Schedule.
Depending upon the academic calendar, as well as the particular class year in which the student is enrolled, the Judicial Panel shall meet within fifteen (15) school days following the receipt of the complaint to hold a Hearing, when feasible.

C. Notice.
The accused student shall receive a minimum of four (4) school days notice of the Hearing date. The written notice will reiterate the allegations to be considered, give the time, place, and date of the Hearing and the names of the Panel members. At the same time, the student will be given a copy of all documentary evidence in the possession of the Panel that may be considered by it, if such evidence has not previously been provided to the student.

D. Objections.
If the accused student objects to any member of the Panel because the member has a conflict of interest which is likely to interfere with fair and impartial consideration of the matter , the student will make such objections in writing to the Faculty Co-Chair within two (2) days of receiving the hearing notice. Objections will be considered by the Faculty Co-Chair, whose decision in the matter of the objection will be communicated in writing to the accused student. The decision of the Faculty Co-Chair in the matter of the objection will be final.

E. Written Response.
The student will be advised he or she may submit a written response to the allegation in addition to, or instead of appearing at the Hearing. This written response must be received by the Faculty Co-Chair at least two (2) full school days prior to the Hearing.

F. Witnesses.
Any witnesses to be called by the student must be made known to the Faculty Co-Chair no less than two (2) full school days in advance of the Hearing. Similarly, the Faculty Co-Chair will notify the student in writing of any witnesses the Panel intends to call at the Hearing no less than three (3) full days in advance of the Hearing. The Faculty Co-Chair and the Panel Chair may limit or refuse to consider irrelevant and repetitive evidence, including irrelevant or repetitive witness testimony.

G. Right to Be Present.
While the student has the right to be present at the Hearing, he or she may elect not to appear and the Hearing will be held in his/her absence. Also the student has the right to remain silent.

H. Closed to the Public.
The Hearing will be closed to the public. All proceedings and decisions will be considered confidential.

I. Student Advisor.
The student may be advised by a non-legal advisor of his or her choice. In instances where criminal charges may be pending or under investigation, the student may have an attorney present. The student's non-legal or attorney advisor may only act in an advisory capacity to the student and may not address the Board or examine or cross-examine witnesses. The Judicial Panel may, at its option, have University Counsel or an Assistant Attorney General present or available to provide procedural guidance.

J. Student Participation.
The student shall be permitted to be present during the presentation of all testimony and evidence. The student will be permitted to speak and to question any witnesses during the Hearing.

K. Evidence.
Evidence may be in any form, including oral or written, but must be limited to issues raised in the written allegation. The Faculty Co-Chair will exclude any irrelevant or unduly repetitive evidence.

L. Discrimination or Sexual Harassment.
If the alleged infraction involves allegations of discrimination or sexual harassment, the panel may hear testimony or receive documents from the University of Maryland, Baltimore, Office of Human Resource Services.

M. Procedural Sequence.
The Faculty Co-Chair, in consultation with the Student Co-Chair shall determine a procedural sequence appropriate to each case. The Faculty Co-Chair, in consultation with the Student Co-Chair, conducts the Hearing.

N. Summons.
The Panel may summon any witnesses it deems necessary or relevant to the case but the Panel is not empowered to compel the attendance of any person who is not a current, student, faculty or staff member of the School.

O. Opening and Closing Statements.
The student will be permitted to provide the Panel with supporting oral and/or written information, and to make opening and closing statements.

P. Recording.
The Panel Hearing, exclusive of deliberations, shall be recorded and made available to the student upon request, within a reasonable period of time, at the student's expense. Accidental erasures or poor quality of the recording or failure of recording equipment will not invalidate Panel determinations.

X. DELIBERATIONS
A. Deliberations are confidential, attended only by the Panel, and are not recorded. Neither the complainant nor the accused student has the right to be present during deliberations of the Panel.

B. All Panel decisions will be based on the evidence presented before the Panel.

C. A 4/5 majority of the Judicial Panel present at the Hearing must find that the accused student is responsible for the alleged violation. If the deliberating Panel is less than 5 members, the finding of responsibility must be unanimous. The standard of proof is based upon a preponderance of the evidence, i.e., whether it is more probable than not that the accused student committed the alleged infraction.

D. Within one school day after the conclusion of deliberations, the Faculty Co-Chair will be advised of the outcome by the Panel and the accused student and the complainant will be informed by the Co-Chair of the Panel's general conclusion. This information may be conveyed orally but it must be followed by written notice as described below.

E. Within five (5) school days after deliberations are concluded, when feasible, the Judicial Panel, with support from the Faculty Co-Chair, shall send a detailed report to the Dean. The Dean may not substitute his or her judgment as to the findings and may not change the findings of the Panel, but the Dean is not bound by the recommendations as to sanction(s). The report will summarize the allegations, list the members of the Panel, describe the date of the Pre-Hearing Conference and the Hearing, list the witnesses, list the documentary evidence considered, mention if the accused student spoke and if the student had an advisor, report the disputed facts, report the findings of fact including a discussion of evidence that was persuasive and that was not persuasive, report the decision(s) as to misconduct or absence of misconduct for each allegation, and provide an explanation of the reasoning behind the decisions. If the Panel has found that the student committed one or more acts of misconduct, the report must recommend a sanction or state why no sanction is appropriate. If there are mitigating circumstances, these should be discussed.

If no misconduct is found for one or more of the allegations, based on the standard of a preponderance of the evidence, the report will include this information.

A dissenting opinion may be submitted by any Panel member, in which case the dissent will be attached as an exhibit to the report.

F. Within five (5) school days after deliberations are concluded, when feasible, the Judicial Panel, with support from the Faculty Co-Chair, shall send notice to the accused student. The notice shall include a summary of the evidence considered (documentary and witnesses), the majority opinion as to findings of fact including a discussion of evidence that was persuasive and that was not persuasive, a decision as to misconduct or no misconduct for each allegation, and an explanation of the reasoning behind the decisions, and, if having found that the student committed one or more acts of misconduct, the sanction recommended by the Panel to the Dean if a sanction is deemed appropriate. If no misconduct is found based on the standard of a preponderance of the evidence, the notice will include this information.

G. The Judicial Panel's finding is final, subject to the student's right of appeal. However, the Judicial Panel's recommendation for sanction, if any, is subject to the Dean's Review (Section XII below.)

## XI. GUIDELINES FOR SANCTIONS

A. The Panel may choose one or more of the penalties described in this section. In exceptional cases it may elect to modify or individualize a sanction, if such modification seems clearly indicated by the particulars of a case. The Panel may formulate and propose other penalties or rehabilitative or remedial measures at its discretion.

B. Sanctions should reflect the nature of the misconduct, and may include recommendations for one or more of the following: Counseling (e.g., stress management, sensitivity training, decision-making training), repeat of examination, temporary letter of reprimand, permanent letter of reprimand, repetition of course, repetition of year, extension of year, suspension, disciplinary probation, dismissal with possibility of re-admission, final dismissal (expulsion), additional assignments or coursework (e.g., ethics training), restriction of privileges, monitoring, formal apology, financial restitution, community service.

C. A student found to have committed any second violation of this policy or to have failed to conform to sanctions imposed by prior Judicial Panel proceedings may be immediately expelled from the Dental School. Each case should be considered individually, and sanctions for specific infractions should be based upon the circumstances involved. Students dismissed for violations of the Professional Code of Conduct are ineligible for readmission unless substantial evidence of rehabilitation is provided. Substantial evidence is within the School's sole discretion.

D. A student found guilty of Event-related Misconduct shall be subject to presumptive dismissal. Presumptive dismissal may be either suspension for a fixed period of time or expulsion. A finding of "event related misconduct" shall be noted on the student's transcript. To avoid dismissal, a student must demonstrate specific mitigating or extenuating circumstances that persuade the final decision-maker that a lesser penalty is appropriate. If dismissal is not the recommended penalty, the mitigating or extenuating circumstances must be enumerated in the written recommendation to the Dean and in the Dean's sanction decision.

## XII. DEAN'S REVIEW AND DECISION

A. In the Dean's review phase, the Dean will review the Judicial Panel's report and may also review the student's complete academic and disciplinary record.

B. The Dean may not substitute his or her judgment for that of the Panel as to the findings or change the findings, but the Dean is not bound by the recommendations as to sanction(s).

C. After the time has passed for the student to provide notice of intent to submit appeal, and after any timely appeal of the Judicial Panel's report is considered, the Dean will notify the accused student, the Judicial Board Co-Chairs and the Judicial Panel members in writing and without undue delay of the final sanction(s), if any.

D. If the Dean alters the Panel's recommended sanction(s), he/she shall include a brief explanation of the rationale for the change.

## XIII. APPEALS

A. Students found responsible for misconduct shall have the right to appeal to the Dean for modification of the sanction, or, for a new Hearing. An appeal for a new hearing may only be made on the basis of: (1) failure of the accused to receive due process and/or (2) newly available evidence.

B. The student must provide a brief notice of intent to submit appeal, in writing, and the notice must be received by the Dean's office no later than three (3) school days after the student has received written notification of the Judicial Panel's findings, decision and recommendations for sanctions. A full written appeal shall be submitted ten (10) calendar days after the student has received notification of the Judicial Panel's findings, decision and recommendation for sanctions. The basis for appeal should be stated and all facts, new evidence and other information to be considered should be included.

C. The Dean will not enforce a decision on final sanction while a student's appeal is pending. However, the Dean may take temporary action, such as temporary dismissal or temporary suspension from school activities pending the results of the appeal.

D. In making the determination as to whether to modify the Panel's recommendation for sanction or order a new Hearing, the Dean may seek advice from any individuals of his/her choosing and shall provide a copy of the student's appeal to the Judicial Panel whose members shall be given an opportunity to comment.

E. New Hearing Based on Failure of Due Process

1. If the Dean determines that there was, in fact, significant failure of due process, the Dean shall order a new Hearing and stipulate whether the same Panel members or a different group shall preside.

2. If a different group is stipulated, the Dean shall direct the Faculty Co-Chair of the Judicial Board to appoint an ad hoc panel which will then conduct a Hearing according to the rules set out in this Policy.

3. The Faculty Co-Chair or designee will preside.

**F.** New Hearing Based on New Evidence

1. If the Dean determines that newly available evidence could,

in principle, lead to a different finding or different sanctions, the Dean shall order a new Hearing.

2. Unless the Dean decides otherwise, the same Panel that reached the earlier conclusion shall preside at the new Hearing. The composition of the group can be varied if unavailability of particular members would compromise an early resolution of the case.

3. The Faculty Co-Chair or designee will preside.

G. The Dean may grant reasonable extensions of the time limits specified at the Dean's discretion.

## XIV. FINAL ACTION

After all appeals have been reviewed and acted upon by the Dean (or, if an Appeal is not requested, not received within the time period specified or is denied), the Dean will issue and implement the Dean's final decision as to sanction. The Dean may direct the Registrar to enter appropriate notations in the student's educational record.

## XV. ADDITIONAL PROCEDURE

A. The Faculty Co-Chair of the Board may grant reasonable extensions of the time limits specified for this procedure. Time limits are established in order to ensure orderly operations of the student judicial process. Good faith departures will not invalidate Judicial Board determinations.

B. The Faculty Co-Chair of the Judicial Board will make regular reports of the Judicial Panel's activities to the full Judicial Board, the Faculty Council, Faculty Assembly and the student body, but no student names or classes will be disclosed. This summary is for the sole purpose of reporting Judicial Panel activity.

## XVI. IMPLEMENTATION OF THE STUDENT JUDICIAL POLICY

A. For the purpose of implementing the Professional Code of Conduct and the Student Judicial Policy, a copy of this policy will be sent to each student along with the letter of admission to the Dental School. Students will be advised that enrollment in Dental School is contingent upon the understanding and acceptance of the tenets contained in this Student Judicial Policy and Professional Code of Conduct.
All incoming dental and dental hygiene students and students in Advanced Dental Education programs included in this policy will be examined on this policy as part of their orientation activities and will sign the Judicial Policy statement (Appendix 1). It will be the responsibility of the Judicial Board Co-Chairs to design, proctor, and evaluate the results of this examination as well as to remediate any deficiencies. Until the examination is successfully completed, a student will not be allowed to attend class or clinic. At the beginning of each academic year, each dental and dental hygiene class and Advanced Dental Education students covered by this policy will be addressed by the Co-Chairs of the Judicial Board in order to reinforce adherence to the Professional Code of Conduct and Student Judicial Policy.

B. Department chairs or directors of instructional divisions will review the Judicial Policy with the members of their department at the beginning of each academic year. Upon request the Faculty Co-Chair will be available to assist in this regard.

C. All examinations should include examination instructions (Appendix 2) and the Code of Conduct Statement (Appendix 3).

Approved for further review by Dental School Faculty Assembly: March 10, 2008
Approved by University Counsel: June 27, 2008
Approved by Office of the Attorney General: June 27, 2008
Approved by Dental School Faculty Assembly: July 25, 2008

## APPENDIX 1.

Code of Conduct to be signed by all incoming students.

### Professional Code of Conduct

The Dental School's Professional Code of Conduct is based on the highest standards of integrity and selfdiscipline, rather than on imposed regulations. I have read the code and understand it. I will not violate any policies of this Code. I accept my duty to report any violations of the Code to the Judicial Board of the Dental School.

_____ _____

Signed Date

_____

Print Name

APPENDIX 2.

Examination instructions that can be attached to examinations.

In keeping with the dental profession's responsibility for self-regulation and self-discipline, the following guidelines should be followed during examinations.

A. Upon distribution of the examination, all conversation among students should cease until the end of the examination period.

B. Notes, textbooks, cell phones, and electronic devices are prohibited unless explicitly allowed in the examination area.

C. Examinations must represent the student's own efforts.

E. If a student must leave the room, examination papers MUST remain turned down and in the examination room.

F. Examinations must be completed and turned in by the end of the specified examination period.

Appendix 3. Code of Conduct to be put on examination forms and students will sign after each examination.

Professional Code of Conduct

The Dental School's Professional Code of Conduct is based on the highest standards of integrity and selfdiscipline, rather than on imposed regulations. I have read the code and understand it. I have not violated any policies of this Code and I have not observed violations by others. I accept my duty to report any violations of the Code to the Judicial Board of the Dental School.

_____ _____

Signed Date

_____

Print Name

## DRESS REGULATIONS

It is the responsibility of all students, faculty, and staff in the clinics, clinic simulators and clinical laboratories to maintain personal dress and cleanliness that is consistent with professional patient care and MOSH regulations. It is also the responsibility of the aforementioned persons to promote this policy with others. Research lab staff will not be impacted by the dress regulations other than for MOSH requirements. Attire in clinical simulation area should be identical to the attire considered appropriate for the patient treatment areas. Attire should be neat, clean and professional, conveying the respect inherent in the practitioner-patient relationship.

1. Informal attire such as denim jeans, shorts, and Bermuda shorts are not permitted. Clean athletic shoes (with socks) may only be worn with scrub attire.

2. All students will wear white or blue clinic coats or disposable gowns, provided by the school, during patient treatment. Selection of the coat or gown is based on the procedure being performed. Clinic coats/gowns will be worn in all patient care areas, and must be fully buttoned (including the top snap or button) during patient treatment. A clean coat or gown will be worn each day; it will be changed should it become visibly stained or contaminated during the clinic

session. CLINIC COATS SHOULD NOT BE WORN OUTSIDE THE BUILDING OR INTO NON-CLINICAL AREAS OF THE BUILDING.

3. Surgical scrub attire may be worn while delivering patient care provided that a clean white or blue clinic coat and/or disposable gown are worn over the scrubs. Clean, pressed scrubs in solid colors (with the exception of navy blue which is reserved for faculty) will be purchased and maintained by the individual. Individuals choosing to wear scrubs for patient treatment may either change at school prior to patient treatment or arrive and leave the building in scrub attire.

4. If scrub attire is not worn in the clinic setting, men and women will wear attire appropriate for a professional environment. Men should wear clean, neat slacks and a collared dress shirt. T-shirts are not permitted. Women may wear slacks, Capri pants, skirts or dresses. Skirts and/or dresses may be no shorter than two inches above the knee. Open toed shoes or other shoes with openings on the tops of the shoes (e.g., Crocs or flip flops) cannot be worn.

5. "Combination scrubs" are permitted as defined: Students may wear a dark solid-colored scrub top tucked into neat slacks with a belt and dress shoes. Female students may wear dark solid-colored scrub bottoms with a solid colored fitted top (t-shirts with logos are not permitted) and athletic shoes.

6. With the exception of a smooth band, rings should not be worn. Earrings should not interfere with personal protective equipment or patient treatment.

7. An individual's hair style should prevent hair from contacting patients, instruments, or equipment. Hair should be clean and neatly groomed. Hair longer than chin/shoulder length should be worn away from the clinician's face.

8. Fingernails should be clean, short (no longer than the fingertip) and well-manicured. Light-colored fingernail polish is permissible. Acrylic fingernails are not permitted.

Addendum for student only:

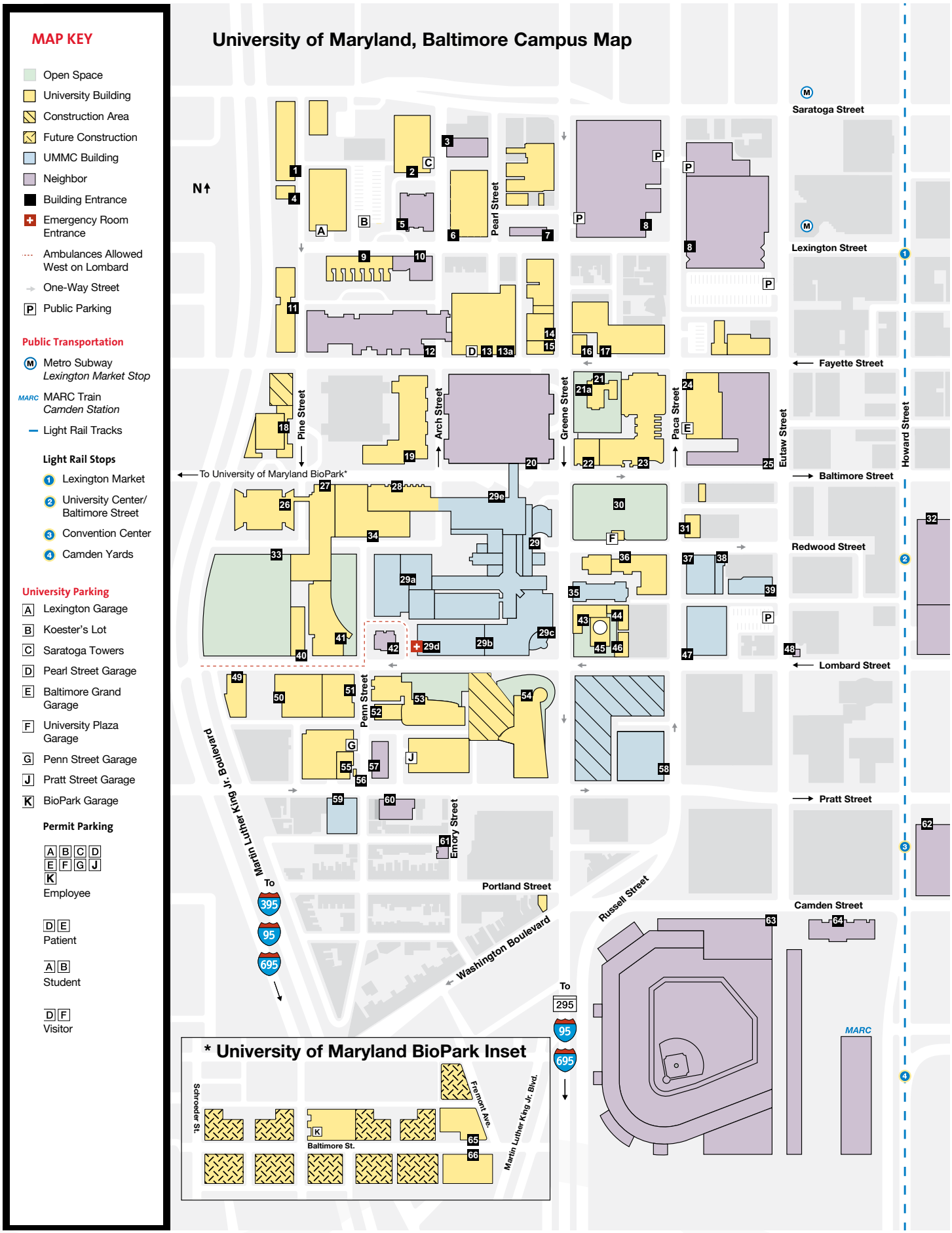
Greater flexibility in attire is permitted in the classroom and seminar areas (i.e. clean nondistressed denim jeans, sandals for women, casual but modest attire), provided that the standards of professionalism are maintained and that the student does not enter the clinic or simulation areas.

## COMPLAINTS TO THE COMMISSION ON DENTAL ACCREDITATION

The Commission on Dental Accreditation will review complaints that relate to a program's compliance with the accreditation standards. The Commission is interested in the sustained quality and continued improvement of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

A copy of the appropriate accreditation standards and/or the Commission's policy and procedure for submission of complaints may be obtained by contacting the Commission at 211 East Chicago Avenue, Chicago, IL 60611 or by calling 1-800-621-8099 extension 4653.

# University of Maryland, Baltimore Campus Map



## DOCTOR OF DENTAL SURGERY AND DENTAL HYGIENE ACADEMIC CALENDAR 2010-11

| | |
|---|---|
| Mon, May 24-Fri, May 28, 2010 | Yr. III – No Class or Clinic |
| Wed, May 24, 2010 | Yr. IV Fall semester begins |
| Mon, May 31, 2010 | MEMORIAL DAY* (1 day) |
| Tues, June 1, 2010 | Yr. III Fall Semester Begins |
| Tues, June 1, -Fri, July 2, 2010 | Clinic Orientation, Clinic |
| Mon, July 5, 2010 | INDEPENDENCE DAY* OBSERVED (1 day) |
| Tues, July 6-Fri, July 9, 2010 | Yr. III, IV - No Class or Clinic |
| Mon, July 12-Fri, July 30, 2010 | Yr. III, IV clinic – GP 1 and 4 |
| Mon, Aug 2-Fri, Aug 20, 2010 | Yr. III, IV clinic – GP 2 and 3 |
| Wed, Aug 4-Fri, Aug 6, 2010 | Yr. I orientation/instrument distribution |
| Mon, Aug 9, 2010 | Yr. I fall classes begin |
| Mon, Aug 16,-Wed, Aug 18, 2010 | Registration/Orientation – Dental Hygiene, Yrs. III; Classes begin Aug 19 |
| Mon, Aug 16, 2010 | Yr. II fall semester begins |
| Mon, Aug 23, 2010 | Yr. III Classes begin; first Semester begins –Graduate School; Dental Hygiene Yr. IV and RDH |
| Fri, Aug 27, 2010 | Risk Management Program- Dental Yr. III, Dental Hygiene; Yr. I ASE and AEGD; New Clinic Faculty – 1:00-4:00 p.m., Room G205 |
| Mon, Sept 6, 2010 | LABOR DAY* (1 day) |
| Thurs, Oct 7, 2010 | Predoctoral clinics closed – C2 and C3 |
| Fri, Oct 8, 2010 | Integrated NERB Clinical Exam (Manikin) – Predoctoral Clinics Closed- no exams |
| Tues, Nov 16, 2010 | International College of Dentists Program, Dental Yr. III, 4:30-6:30 p.m., Westminster Hall |
| Wed, Nov 24, 2010 | All clinics closed for C3 session |
| Thurs, Nov 25-Fri, Nov 26, 2010 | THANKSGIVING VACATION* (2 days) |
| TBA | Integrated NERB Clinical exam, (manikin re-exam only); clinics open |
| Mon-Tues, December 6-7, 2010 | Faculty Retreat (no class or clinic) |
| Thurs, Dec 16-Wed, Dec 22, 2010 | Exam Week – Dental Hygiene |
| Wed, Dec. 22, 2010 | Semester ends at 12:00 p.m.; Faculty-Staff Holiday Party 12:00 p.m. |
| Thurs, Dec 23, 2010-Fri, Jan 1, 2011 | WINTER VACATION* (7 days) |
| Mon, Jan 3, 2011 | Dental Yrs. I-IV second semester begins; arena reg'n for students not registered |
| Mon, Jan 3, 2011 | Dental Hygiene entry level second semester begins; arena reg'n for students not advance registered |
| Mon, Jan 3-Fri, Jan 21, 2011 | Minimester – Graduate School and Dental Hygiene Degree Completion |
| Mon, Jan 17, 2011 | MARTIN LUTHER KING, JR. DAY* (1 day) |
| Tues, Jan 18, 2011 | Dental Hygiene Degree Completion second semester begins; Dental Hygiene senior lectures begin |
| Mon, Jan 24, 2011 | Graduate School – second semester begins |
| Thurs-Fri, March 10-11, 2011 | Integrated NERB Clinical exam, Clinical patient exam (restorative and perio) – Clinics Closed; no predoctoral exams |
| Mon-Fri, March 14-18, 2011 | SPRING BREAK* (5 days); March 16-18 –- optional clinic for students |
| TBA | NERB Clinical Examination (Dental Hygiene and tentative dental re-exam; predoctoral clinics open) |
| Fri, April 29, 2011 | Second semester ends for Dental Yr. IV, Dental Hygiene Yr. IV |

## DOCTOR OF DENTAL SURGERY AND DENTAL HYGIENE ACADEMIC CALENDAR 2010-11

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| Mon, May 2-Thurs, May 19, 2011 | Yr. IV dental clinic optional |
| Fri, May 13-Thurs, May 19, 2011 | Exam Week (Dental Hygiene Yr. III) |
| Thurs., May 19, 2011 | Second semester ends for Yrs. I, II-III Dental |
| Fri, May 20, 2011 | Honors Convocation, 8:00 a.m.; UMB Commencement Ceremony, 3:00 p.m. – all clinics closed |
| Mon, May 23-Fri May 27, 2011 | Rising Yr. III – No class or clinic; Rising Yr. IV – Classes and Clinic |
| Mon, May 30, 2011 | MEMORIAL DAY* (1 day) |
| Tues-Fri, May 31-July 1, 2011 | Yr. III Clinic Orientation, Clinic; Yr. IV Clinic |
| Mon, July 4, 2011 | INDEPENDENCE DAY (1 day) |
| Tues-Fri, July 5-8, 2011 | No Class or Clinic |
| Mon, July 11-Fri, July 29, 2011 | Yr. III, IV clinic – GP 2 and GP 3 |
| Mon, Aug 1-Fri, Aug 19, 2011 | Yr. III, IV clinic – GP 1 and GP 4 |

## ADVANCED DENTAL EDUCATION ACADEMIC CALENDAR 2010-11

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|---|---|
| Thurs-Fri, July 1-2, 2010 | Registration and orientation |
| Mon, July 5, 2010 | Independence Day (observed 1 day) |
| Tues, July 6, 2010 | First semester classes begin |
| Mon, August 23, 2010 | Graduate School fall semester begins |
| Fri, August 27, 2010 | Risk Management Program (First Year Residents) – 1:00-4:00 p.m., G205 |
| Mon, September 6, 2010 | Labor Day (School closed) |
| Thurs and Fri, Nov 25-26, 2010 | Thanksgiving recess (clinics closed) - (school closed Thanksgiving Day) |
| Mon-Tues, December 6-7, 2010 | Faculty Retreat (no class or clinic) |
| Wed, December 22, 2010 | Semester ends at 12:00 p.m. |
| Thurs, Dec 23, 2010 – Fri, Dec 31, 2011 | Winter Break (clinics closed) |
| Mon, January 3, 2011 | Second semester begins (students not registered are charged a late fee) |
| Mon, January 17, 2011 | Martin Luther King Jr. Day (school closed) |
| Mon, January 24, 2011 | Graduate School spring semester begins |
| Mon, March 14-15, 2011 | Spring Break (school closed) |
| Fri, May 20, 2011 | Honors Convocation; UMB Commencement Ceremony, 3:00 p.m. (all clinics closed) |
| Monday, May 30, 2011 | Memorial Day (school closed) |
| Thurs, June 30, 2011 | Last day of classes |