Mission / Purpose

The mission of the School of Dentistry's DMD program is to continually improve the well being and oral health of people. In order of impact, this pertains to the people of Alabama, the region, the nation, and the international community. This will be achieved through a commitment to excellence in programs of education, research, and service.

Student Learning Outcomes/Objectives, with Any Associations and Related Measures, Targets, Findings, and Action Plans

SLO 1: Recall and apply basic dental science knowledge.

Students graduating with a degree in dentistry will be able to apply basic science knowledge to the clinical practice of dentistry as measured by competency-based examinations administered at the School of Dentistry and by the results of the National Board Dental Examination.

Connected Document

NBDE Part I Profile Report 2012

Related Measures

M 1: National Board Dental Examinations

The American Dental Association provides testing and ultimately the results of student performance on a nationally certified credentialing examination. The National Board Dental Examinations (NBDE) are developed and administered by the American Dental Association's Joint Commission on National Dental Examinations to all dental students typically during the second year and during the fourth year of their dental curriculum. Part I of the NBDE includes the biomedical sciences (anatomy, biochemistry, physiology, microbiology, pathology) as well as dental anatomy and occlusion. Part II of the NBDE includes the clinical disciplines (endodontics, operative dentistry, oral & maxillofacial surgery, pain control, oral diagnosis, orthodontics, pediatric dentistry, patient management, periodontics, and prosthodontics) as well as behavioral sciences (including behavioral science, dental public health, & occupational safety) and pharmacology. All students must pass both parts in order to receive their DMD degree from the UAB School of Dentistry. Additionally, all state and regional credentialing examinations require passing grades on the NBDE in order for candidates to be issued a license to practice dentistry.

Source of Evidence: Standardized test of subject matter knowledge

Connected Documents

National Board Summary 08152013
NBDE Part I Profile Report 2012
The School of Dentistry achievement target is to score above the national average and have fewer failures as a percentage of students taking the examination than the national average on Part I of the National Dental Board Examination.

**Finding (2012-13) - Target: Met**
The Joint Commission on National Dental Examinations, the agency that oversees the NBDE, has changed the reporting format of our student’s performance. First, the annual report now encompasses a calendar year from January 1-December 31. Our D2 students take the NBDE anywhere between December and March, so annual reports will potentially encompass students from two different dental classes. The annual report is now using what is called a “d-value” to report performance by discipline. The d-value is a standardized value representing the distance between our School average and the national average. This value is presented in standard deviation units. A positive d-value of 1.0 would indicate that our School’s average is one standard deviation above the national average; a negative d-value would indicate that our School’s average is one standard deviation above the national average; and a d-value of 0 would indicate that our School’s average is at the national average. For the 2012 calendar year, we had 43 students take the Part I exam. There were zero failures, compared to a national rate of 6.8%. UAB SOD’s d-value for the entire exam was 0.32 (above the national average which would be 0). The d-values by discipline were: anatomic sciences, 0.60; biochemistry/physiology, 0.56; microbiology/pathology, -0.11; and dental anatomy/occlusion, 0.33.

**Finding (2011-12) - Target: Met**
As reported by the Joint Commission on National Dental Examinations, the national average standard score for Part I of the National Board Dental Examination (NDBE) taken between February 1, 2011 and December 31, 2011 was 82.1. The UAB School of Dentistry student standard score for this time frame (School of Dentistry students graduating in 2013 take Part I of the NDBE between December 18, 2010 and March 18, 2011 and students graduating in 2014 take it between December 17, 2011 and March 24, 2012. Unfortunately, the reported compiled results from the Joint Commission potentially encompasses, and does encompass, two separate but incomplete School of Dentistry classes.) was 84.5. For each reported discipline the results between the national and School of Dentistry averages is as follows: Anatomic Science, 67.1/72.4; Biochemistry-Physiology, 65.5/70.2; Microbiology-Pathology, 67.8/70.3; Dental Anatomy-Occlusion, 77.6/81.6. The national failure rate was 5.4% (47/4767 candidates failed) and the UAB School of Dentistry failure rate was 2.1% (1/47 failed). The Joint Commission has recently changed the manner and date in which the scores are reported. The expected dates of the next summary will encompass January 1, 2012-December 31, 2012. These will be the dates reflected in the next WEAVE assessment cycle.
Finding (2010-11) - Target: Met
As reported by the Joint Commission on National Dental Examinations, the national average standard score for Part I of the National Board Dental Examination (NDBE) taken between February 1, 2010 and January 31, 2011 was 82.1. The UAB School of Dentistry student standard score for this time frame (School of Dentistry students graduating in 2012 take Part I of the NDBE between December 19, 2009 and March 6, 2010 and students graduating in 2013 take it between December 18, 2010 and March 18, 2011--unfortunately, the reported compiled results from the Joint Commission potentially encompasses two separate but incomplete School of Dentistry classes.) was 85.3. For each reported discipline the results between the national and School of Dentistry averages is as follows: Anatomic Science, 67.3/71.7; Biochemistry-Physiology, 65.5/71.0; Microbiology-Pathology, 69.0/74.0; Dental Anatomy-Occlusion, 77.9/82.2. The national failure rate was 5.9% (60/5098 candidates failed) and the UAB School of Dentistry failure rate was 0.0% (0/60 failed).

Finding (2009-10) - Target: Met
As reported by the Joint Commission on National Dental Examinations, the national average standard score for Part I of the National Board Dental Examination (NDBE) taken between February 1, 2009 and January 31, 2010 was 82.4. The UAB SOD student standard score for this time frame (SOD students take Part I of the NDBE between December 18, 2009 and March 7, 2010. Unfortunately, the reported compiled results from the Joint Commission potentially encompasses two separate SOD classes, and this was indeed the case this year.) was 85.1. For each reported discipline the results between the national and SOD averages is as follows: Anatomic Science, 69.0/72.9; Biochemistry-Physiology, 65.7/73.1; Dental Anatomy-Occlusion, 78.1/82.6. The national failure rate was 6.0% and the UAB SOD failure rate was 0.9%. All students that failed the examination, subsequently passed on a retake.

Finding (2008-09) - Target: Partially Met
The national average on Part I of the NBDE this past year was an 82 while our school average was an 81.3. 49 out of 51 sophomore students (the Class of 2010) passed Part I of the NBDE in July 2008. One unsuccessful candidate passed on the first re-examination. The second unsuccessful candidate is repeating the 2nd year because of academic difficulties. For Part II of the examiation this past year (the Class of 2009), the national average was an 80.4 while our school average was an 82.7, and we achieved a 100% pass rate.

Finding (2007-08) - Target: Met
All sophomore students (the Class of 2009) passed Part I of the NBDE in July 2007.

Related Action Plans (by Established cycle, then alpha):
For full information, see the Details of Action Plans section of this report.

Board Review didactic course, NBDE Part I.
Established in Cycle: 2008-09
As part of the ongoing curriculum revision, a graded board review didactic course was designed and implemented in December 2009....

Peer tutoring.
Established in Cycle: 2011-12
Peer tutoring was offered in the 2011-2012 academic year to the one student that did not successfully pass Part I of the NBDE on...
**M 2: Competency Assessments.**

“Competence” is the summation of an individual student's ability to successfully complete a complex and diverse array of assessments throughout his or her matriculation through UAB. From the first year through the fourth year, our students' knowledge is assessed multiple times and this assessment takes multiple forms. Basic knowledge is assessed through didactic exams administered throughout the curriculum; students demonstrate they know how to apply this knowledge through essay and short answer exams and/or case based projects administered in multiple courses. Graduates demonstrate they are competent to perform many clinical skills in preclinical exercises, objective standardized clinical examinations, and in various high stakes assessments. Finally, students perform specific clinical skills in graded clinical examinations. Individual faculty in the disciplines can measure a student’s competence for a specific skill, and this assessment is reflected in the grade the student receives from that discipline. Each student's transcript then provides a synopsis of their overall progress toward competence. This is evaluated by the Academic Performance Committee at least at the conclusion of each semester. When a student successfully completes the diverse array of assessments within our curriculum, they have demonstrated they are competent in providing oral health care within the scope of general dentistry defined by the faculty. In an effort to track student competence within various disciplines, we have defined assessment methods for each course/clinical area in our curriculum (Curriculum Assessment Methods). The methods of assessment were defined and linked to Miller’s hierarchical model for the assessment of clinical competence. This model defines a hierarchy of assessments that ascend from cognitive skills (know, knows how) to behavioral skills (shows how, does). The SOD’s methods of assessment are: case based examination/exercise (shows how); clinical experience (shows how); clinical simulation (shows how); didactic exam (know, knows how); graded clinical exam (does); high stakes assessment (does); laboratory exams/exercises (know, knows how); objective standardized clinical exam (shows how). The dental school faculty spent significant time, effort, and resources evaluating specific competencies for our students. The American Dental Education Association published a document, "Competencies for the New General Dentist", in the July 2008 Journal of Dental Education. The faculty met in content-based committees to discuss the impact on the School of Dentistry’s competency manual, and ultimately we had a faculty advance on October 30, 2009. This culminated in a major revision of the School of Dentistry competency manual that was adopted on January 26, 2010. Our accrediting agency, the Commission on Dental Accreditation, released on August 6, 2010 a revision of the accreditation standards, which closely parallels our revised competency document. In addition, dental students must complete a certain number of clinical procedures in the clinical disciplines in concert with comprehensively treating their patients. These procedures and related management of patients are closely supervised by clinical faculty. It is the philosophy of the School of Dentistry that, prior to entering private practice following graduation, students should be able to independently perform basic clinical procedures at a level of competency. Competency in a clinical discipline infers that the student is performing at a high level of skill and does not require supervision. Any student receiving a failing grade must repeat a specific competency examination until a satisfactory grade is achieved. Most areas have linked the competency examinations to a course grade. Additional preparation is required if a failing grade is obtained. This year, we introduced a new competency type examination at the end of the D2 year—the Objective Structured Clinical Examination or OSCE. The OSCE is composed of a number of stations through which all candidates rotate demonstrating that not only know or know how to do a skill but actually demonstrating that they can perform the defined task. These practical stations examine discrete clinical skills that must be mastered prior to the assignment of patients and represent a
benchmark that necessary skills have been learned to allow the student to be promoted to the D3 year.

Source of Evidence: Academic direct measure of learning - other

Connected Documents
ADEA New Dentist Competencies
CODA_Predoctoral_Accreditation_Standards_2010
Competency Manual 2010
Curriculum_assessment_methods_05202013

Target:
All students must pass the required assessments as a prerequisite to promotion and/or graduation with a DMD degree.

Connected Document
Curriculum_assessment_methods_05202013

Finding (2012-13) - Target: Met
All students that progressed to the next academic year or graduated passed all necessary assessments.

Finding (2011-12) - Target: Met
All students that progressed to the next academic year or graduated passed all competency examinations.

Finding (2010-11) - Target: Met
All students that progressed to the next academic year or graduated passed all competency examinations.

Finding (2009-10) - Target: Met
Approximately 75% of students pass their specific competency exam on the first attempt, and ultimately a 100% pass rate is achieved.

Finding (2008-09) - Target: Met
Approximately 75% of students pass their specific competency exam on the first attempt, and ultimately a 100% pass rate is achieved.

Finding (2007-08) - Target: Met
Approximately 75% of students pass their specific competency exam on the first attempt, and ultimately a 100% pass rate is achieved.

Related Action Plans (by Established cycle, then alpha):
For full information, see the Details of Action Plans section of this report.

Curriculum revision.
Established in Cycle: 2007-08
The SOD has undergone a major curriculum change beginning in the 2008-2009 academic year. These changes were, in part, a result ...

Curriculum revision update.
Established in Cycle: 2008-09
We are in the 4th year of a 4-year implementation of a revised curriculum. Continued assessment of progress is ongoing. As t...

Review of assessments.
Established in Cycle: 2011-12
We know that all students have passed all the required assessments and competency examinations, as this is a requirement for pas...
Peer_mentoring.
Established in Cycle: 2012-13
In the 2012-2013 academic year, we instituted a school-wide peer-mentoring program. Students in each dental school class iden...

SLO 2: Recall and apply clinical dental knowledge.
A student graduating with a degree in dentistry will be able to apply clinical dental skills and techniques in the treatment of dental patients as measured by competency-based examinations administered at the School of Dentistry and by the results of the National Board Dental Examination.

Connected Document
NBDE_PartII_Profile_Report_2012

Related Measures

M 1: National Board Dental Examinations
The American Dental Association provides testing and ultimately the results of student performance on a nationally certified credentialing examination. The National Board Dental Examinations (NBDE) are developed and administered by the American Dental Association's Joint Commission on National Dental Examinations to all dental students typically during the second year and during the fourth year of their dental curriculum. Part I of the NBDE includes the biomedical sciences (anatomy, biochemistry, physiology, microbiology, pathology) as well as dental anatomy and occlusion. Part II of the NBDE includes the clinical disciplines (endodontics, operative dentistry, oral & maxillofacial surgery, pain control, oral diagnosis, orthodontics, pediatric dentistry, patient management, periodontics, and prosthodontics) as well as behavioral sciences (including behavioral science, dental public health, & occupational safety) and pharmacology. All students must pass both parts in order to receive their DMD degree from the UAB School of Dentistry. Additionally, all state and regional credentialing examinations require passing grades on the NBDE in order for candidates to be issued a license to practice dentistry.

Source of Evidence: Standardized test of subject matter knowledge

Connected Documents
National_Board_Summary_08152013
NBDE_PartII_Profile_Report_2012

Target:
The School of Dentistry achievement target is to score above the national average and have fewer failures as a percentage of students taking the examination than the national average on Part II of the National Dental Board Examination.

Connected Documents
National_Board_Summary_08152013
NBDE_PartII_Profile_Report_2012

Finding (2012-13) - Target: Met
The Joint Commission on National Dental Examinations, the agency that oversees the NBDE, has changed the reporting format of our student’s performance. First, the annual report now encompasses a calendar year from January 1-December 31. Our D4 students take the NBDE anywhere between October and December, so annual reports should represent a single dental school class. The annual report is now using what is called a “d-value” to report performance by discipline. The d-value is a standardized value representing the distance between our School average and the national average. This value is presented in standard
deviation units. A positive d-value of 1.0 would indicate that our School's average is one standard deviation above the national average; a negative d-value would indicate that our School's average is one standard deviation above the national average; and a d-value of 0 would indicate that our School's average is at the national average. For the 2012 calendar year, we had 50 students take the Part II exam. There were zero failures, compared to a national rate of 5.7%. UAB SOD's d-value for the entire exam was 1.64 (above the national average which would be 0). The d-values by discipline were: operative dentistry, 1.55; pharmacology, 1.67; prosthodontics, 2.04; oral surgery/pain control, 0.71; orthodontics/pediatric dentistry, 1.18; endodontics, 1.51; periodontics, 0.98; oral pathology/radiology, 0.03; patient management, 0.38; case-based, 1.28.

Connected Documents
National Board Summary 08152013
NBDE PartII Profile Report 2012

Finding (2011-12) - Target: Met
As reported by the Joint Commission on National Dental Examinations, the national average standard score for Part II of the National Board Dental Examination (NDBE) taken between May 1, 2011 and December 31, 2011 was 81.0. The UAB School of Dentistry student standard score for this time frame (School of Dentistry students graduating in 2012 take Part II of the NDBE between June 4, 2011 and November 5, 2011) was 81.4. For each reported discipline the results between the national and School of Dentistry averages is as follows: Operative Dentistry, 42.9/45.1; Pharmacology, 29.2/30.0; Prosthodontics, 41.9/43.7; Oral Surgery, 37.3/37.0; Orthodontics-Pediatric Dentistry, 48.2/47.9; Endodontics, 28.9/30.5; Periodontics, 45.5/43.7; Oral Pathology, 43.1/42.2; Practice Management, 43.0/43.1; Case-based items, 70.6/71.6. The national failure rate was 5.2% (61/3386) and the UAB School of Dentistry failure rate was 1.6% (2/61). The Joint Commission has recently changed the manner and date in which the scores are reported. The expected dates of the next summary will encompass January 1, 2012-December 31, 2012. These will be the dates reflected in the next WEAVE assessment cycle.

Connected Document
National Board Summary

Finding (2010-11) - Target: Met
As reported by the Joint Commission on National Dental Examinations, the national average standard score for Part II of the National Board Dental Examination (NDBE) taken between May 1, 2010 and April 30, 2011 was 80.6. The UAB School of Dentistry student standard score for this time frame (School of Dentistry students graduating in 2011 take Part II of the NDBE between November 27, 2010 and January 1, 2011.) was 82.0. For each reported discipline the results between the national and School of Dentistry averages is as follows: Operative Dentistry, 43.1/43.7; Pharmacology, 28.8/29.7; Prosthodontics, 42.3/45.0; Oral Surgery, 37.3/37.9; Orthodontics-Pediatric Dentistry, 49.0/49.5; Endodontics, 29.5/30.8; Periodontics, 44.2/45.5; Oral Pathology, 42.7/42.7; Practice Management, 42.9/42.5; Case-based items, 69.4/71.8. The national failure rate was 5.9% (56/4975) and the UAB School of Dentistry failure rate was 0.0% (0/56).

Finding (2009-10) - Target: Partially Met
As reported by the Joint Commission on National Dental Examinations, the national average standard score for Part II of the National Board Dental
Examination (NDBE) taken between May 1, 2009 and April 30, 2010 was 77.8. The UAB SOD student standard score for this time frame (SOD students take Part II of the NDBE between November 21, 2009 and January 2, 2010.) was 77.2. For each reported discipline the results between the national and SOD averages is as follows: Operative Dentistry, 40.7/38.9; Pharmacology, 43.4/45.8; Prosthodontics, 43.4/45.8; Oral Surgery, 36.7/38.2; Orthodontics-Pediatric Dentistry, 50.2/48.8; Endodontics, 28.9/28.4; Periodontics, 43.3/4206; Oral Pathology, 41.6/40.4; Practice Management, 43.4/43.9; Totals discipline based portion; 70.0/69.4; Case-based items, 70.0/69.4. The national failure rate was 19.6% and the UAB SOD failure rate was 15.7%. All students that failed the examination, subsequently passed on a retake.

**Finding (2008-09) - Target: Met**
All senior students (the Class of 2009) passed Part II of the NBDE in December 2008.

**Finding (2007-08) - Target: Met**
All senior students (the Class of 2008) passed Part II of the NBDE in December 2007.

**Related Action Plans (by Established cycle, then alpha):**
For full information, see the Details of Action Plans section of this report.

**Board Review didactic course, NBDE Part II.**
*Established in Cycle: 2011-12*
A NBDE Part II board review course titled "Review of Dentistry" was implemented in the the fall 2012 term. The course time fram...

**Peer tutoring.**
*Established in Cycle: 2011-12*
Peer tutoring was offered in the 2011-2012 academic year to the one student that did not successfully pass Part I of the NBDE on...

**M 2: Competency Assessments.**
“Competence” is the summation of an individual student’s ability to successfully complete a complex and diverse array of assessments throughout his or her matriculation through UAB. From the first year through the fourth year, our students’ knowledge is assessed multiple times and this assessment takes multiple forms. Basic knowledge is assessed through didactic exams administered throughout the curriculum; students demonstrate they know how to apply this knowledge through essay and short answer exams and/or case based projects administered in multiple courses. Graduates demonstrate they are competent to perform many clinical skills in preclinical exercises, objective standardized clinical examinations, and in various high stakes assessments. Finally, students perform specific clinical skills in graded clinical examinations. Individual faculty in the disciplines can measure a student’s competence for a specific skill, and this assessment is reflected in the grade the student receives from that discipline. Each student’s transcript then provides a synopsis of their overall progress toward competence. This is evaluated by the Academic Performance Committee at least at the conclusion of each semester. When a student successfully completes the diverse array of assessments within our curriculum, they have demonstrated they are competent in providing oral health care within the scope of general dentistry defined by the faculty. In an effort to track student competence within various disciplines, we have defined assessment methods for each course/clinical area in our curriculum (Curriculum Assessment Methods). The methods of assessment were defined and linked to Miller’s hierarchical model for the assessment of clinical competence. This model defines a hierarchy of assessments that ascend from cognitive skills (know,
knows how) to behavioral skills (shows how, does). The SOD’s methods of assessment are: case based examination/exercise (shows how); clinical experience (shows how); clinical simulation (shows how); didactic exam (know, knows how); graded clinical exam (does); high stakes assessment (does); laboratory exams/exercises (know, knows how); objective standardized clinical exam (shows how). The dental school faculty spent significant time, effort, and resources evaluating specific competencies for our students. The American Dental Education Association published a document, "Competencies for the New General Dentist", in the July 2008 Journal of Dental Education. The faculty met in content-based committees to discuss the impact on the School of Dentistry’s competency manual, and ultimately we had a faculty advance on October 30, 2009. This culminated in a major revision of the School of Dentistry competency manual that was adopted on January 26, 2010. Our accrediting agency, the Commission on Dental Accreditation, released on August 6, 2010 a revision of the accreditation standards, which closely parallels our revised competency document. In addition, dental students must complete a certain number of clinical procedures in the clinical disciplines in concert with comprehensively treating their patients. These procedures and related management of patients are closely supervised by clinical faculty. It is the philosophy of the School of Dentistry that, prior to entering private practice following graduation, students should be able to independently perform basic clinical procedures at a level of competency. Competency in a clinical discipline infers that the student is performing at a high level of skill and does not require supervision. Any student receiving a failing grade must repeat a specific competency examination until a satisfactory grade is achieved. Most areas have linked the competency examinations to a course grade. Additional preparation is required if a failing grade is obtained. This year, we introduced a new competency type examination at the end of the D2 year—the Objective Structured Clinical Examination or OSCE. The OSCE is composed of a number of stations through which all candidates rotate demonstrating that not only know or know how to do a skill but actually demonstrating that they can perform the defined task. These practical stations examine discrete clinical skills that must be mastered prior to the assignment of patients and represent a benchmark that necessary skills have been learned to allow the student to be promoted to the D3 year.

Source of Evidence: Academic direct measure of learning - other

Connected Documents
- ADEA New Dentist Competencies
- CODA Predoctoral Accreditation Standards 2010
- Competency Manual 2010
- Curriculum assessment methods 05202013

Target:
All students must pass the competency examinations as a prerequisite to receiving the DMD degree.

Connected Document
- Curriculum_assessment_methods_05202013

Finding (2012-13) - Target: Met
All students that progressed to the next academic year or graduated passed all necessary assessments.

Connected Document
- Curriculum_assessment_methods_05202013

Finding (2011-12) - Target: Met
All students that progressed to the next academic year or graduated
passed all competency examinations.

**Finding (2010-11) - Target: Met**
All students that progressed to the next academic year or graduated passed all competency examinations.

**Finding (2009-10) - Target: Met**
Approximately 75% of students pass their specific competency exam on the first attempt, and ultimately a 100% pass rate is achieved.

**Finding (2008-09) - Target: Met**
Approximately 75% of students pass their specific competency exam on the first attempt, and ultimately a 100% pass rate is achieved.

**Finding (2007-08) - Target: Met**
Approximately 75% of students pass their specific competency exam on the first attempt, and ultimately a 100% pass rate is achieved.

**Related Action Plans (by Established cycle, then alpha):**
For full information, see the Details of Action Plans section of this report.

**Curriculum revision.**
*Established in Cycle: 2007-08*
The SOD has undergone a major curriculum change beginning in the 2008-2009 academic year. These changes were, in part, a result ...

**Curriculum revision update.**
*Established in Cycle: 2008-09*
We are in the 4th year of a 4-year implementation of a revised curriculum. Continued assessment of progress is ongoing. As t...

**Review of assessments.**
*Established in Cycle: 2011-12*
We know that all students have passed all the required assessments and competency examinations, as this is a requirement for pas...

**Peer mentoring.**
*Established in Cycle: 2012-13*
In the 2012-2013 academic year, we instituted a school-wide peer-mentoring program. Students in each dental school class i...

---

**Other Outcomes/Objectives, with Any Associations and Related Measures, Targets, Findings, and Action Plans**

**O/O 3: Student Achievement - FR 4.1**
The institution evaluates success with respect to student achievement consistent with its mission. Criteria may include: enrollment data; retention, graduation, course completion, and job placement rates; state licensing examinations; student portfolios; or other means of demonstrating achievement of goals. (Student achievement)

**Relevant Associations:**

Standard Associations

*SACSCOC 2011* Principles of Accreditation
4.1 The institution evaluates success with respect to student achievement including, as appropriate, consideration of course completion, state licensing examinations, and job placement rates. (Student achievement)
Board preparation.  
Meet with the BDEA to discuss the procedures presently required on the licensing examination and how this relates to our teaching program. Restorative Dentistry will gear their final clinical competencies to the format of the licensing examination, and the SOD faculty will help senior students to prepare for the licensing examination in the weeks prior to the examination.

Established in Cycle: 2007-08  
Implementation Status: Finished  
Priority: Medium  
Implementation Description: Immediate feedback following board results.  
Projected Completion Date: 06/2008  
Responsible Person/Group: Select Dental School Faculty.  
Additional Resources: None  
Connected Document  
National Board Summary

Curriculum revision.
The SOD has undergone a major curriculum change beginning in the 2008-2009 academic year. These changes were, in part, a result of addressing the findings of the Alumni Survey. As part of this curriculum change we have: defined goals of the curriculum; restructured basic science to meet these goals; provided integration of clinical science with basic science; held multiple faculty development seminars (10+); completely overhauled the dental school curriculum; defined testing protocols; refined the ethics code; instituted case-based education; engaged in departmental discussions to improve teaching; implemented High Stakes Assessments; and defined remediation requirements. These changes were phased in over four academic years starting with the class of 2012. We have now graduated two complete classes under the "new" curriculum.

Established in Cycle: 2007-08  
Implementation Status: In-Progress  
Priority: High  
Relationships (Measure | Outcome/Objective):  
Measure: Competency Assessments. | Outcome/Objective: Recall and apply basic dental science knowledge.  
| Recall and apply clinical dental knowledge.  
Implementation Description: Graduation of the first class that has gone through the revised curriculum structure.  
Projected Completion Date: 06/2012  
Responsible Person/Group: Dental School Faculty.  
Additional Resources: None

Maintain an effective competency-based curriculum.
Review and revise, if necessary, competencies and Competency Manual as well as to develop new competencies as a result of the review.

Established in Cycle: 2007-08  
Implementation Status: Finished  
Priority: High  
Implementation Description: Beginning of academic year.  
Projected Completion Date: 06/2008  
Responsible Person/Group: Office of Academic Affairs  
Additional Resources: None  
Connected Documents  
ADEA New Dentist Competencies
Board Review didactic course, NBDE Part I.

As part of the ongoing curriculum revision, a graded board review didactic course was designed and implemented in December 2009. With changing of joint health science personnel, a new course director was appointed for the 2011 year. The course director uses a NBDE preparatory book for the course which assures students use an appropriate resource for their studies. The course has received very positive reviews from students and serves its role as a review course for this important benchmark examination.

Established in Cycle: 2008-09
Implementation Status: In-Progress
Priority: High

Relationships (Measure | Outcome/Objective):
Measure: National Board Dental Examinations | Outcome/Objective:
Recall and apply basic dental science knowledge.

Projected Completion Date: 12/2011
Responsible Person/Group: Basic science advisory committee composed of individuals from the Joint Health Sciences and the School of Dentistry.

Change timing of CITA examination.

Currently, the state licensing examination is administered through the Council of Interstate Testing Agency (CITA). The exam has historically been administered in June of the senior year and any necessary re-examination has been given after graduation in August. We are in talks with representatives from CITA to administer a portion of the board exam in February of the senior year which would allow for re-examination prior to graduation.

Established in Cycle: 2008-09
Implementation Status: Finished
Priority: High

Implementation Description: Tentative date of next year’s CITA examination.
Projected Completion Date: 05/2010
Responsible Person/Group: School of dentistry administrators and the Faculty Board Liaison.

Curriculum revision update.

We are in the 4th year of a 4-year implementation of a revised curriculum. Continued assessment of progress is ongoing. As the courses, clinical model, and defined competencies are refined, the competency examinations will be updated to keep pace. In the spring of 2011, we took a comprehensive look at the changes that have been made to the School of Dentistry DMD curriculum. There were three curriculum committee meetings and two faculty advances that included all dental school faculty. To summarize, the curriculum was divided into eleven subcommittee content areas with all phases of the DMD curriculum addressed in these content areas. The content areas are as follows: Case based education/research; Cultural competence/practice management/communication; Endodontics; External rotations; Fixed prosthodontics/occlusion/biomaterials; Operative/caries/preventive dentistry/microbiology/dental anatomy; Pathology/oral medicine/radiology/therapeutics; Pediatrics/orthodontics/behavior/special patient care/genetics/growth & development; Periodontology; Removable prosthodontics; Surgery/anesthesia/emergency dentistry Each member of the curriculum...
committee was charged as being a curriculum subcommittee chair. Short- and long-term goals were identified and are as follows: Short-term goals: What are we doing well? What are the areas of weakness? Is the amount of content sufficient? If not, what needs added/subtracted, and how much time is needed/excess? Is the timing of the content reasonable? If not, where should it be in the curriculum? Does the course content/timing adequately prepare students for patient care? How can the topics be improved? If there is an associated rotation, is it adequate in timing, duration, student numbers, content? Do course names adequately reflect the content (30 character max, including spaces) & review proposed name changes? Long-term goals: The subcommittees will form the backbone of ongoing curriculum review. This will include: Continued review of the short-term goals; Evaluation of course syllabi & Blackboard content; Review of student evaluations of course; Review of student evaluation including tests; Recommendations for course enhancement including faculty development/mentorship. Subcommittees were charged with meeting on their own to address the goals, and faculty advances March and April 2011 were held to allow dedicated working time and also as a means to have subcommittee cross-over and a chance for dialogue between members of the various subcommittees. We are continuing with this process as a means to continually evaluate the DMD curriculum.

**Established in Cycle:** 2008-09  
**Implementation Status:** In-Progress  
**Priority:** High

**Relationships (Measure | Outcome/Objective):**  
**Measure:** Competency Assessments.  | **Outcome/Objective:** Recall and apply basic dental science knowledge.  | Recall and apply clinical dental knowledge.

**Projected Completion Date:** 12/2013  
**Responsible Person/Group:** Dental school faculty

**Connected Document**  
CODA_Predoctoral_Accreditation_Standards_2010

**Revise dental alumni survey.**

The dental alumni survey will be revised.

**Established in Cycle:** 2008-09  
**Implementation Status:** Planned  
**Priority:** High

**Implementation Description:** Approximately one year following graduation.

**Projected Completion Date:** 05/2012  
**Responsible Person/Group:** Office of Academic Affairs.

**Board Review didactic course, NBDE Part II.**

A NBDE Part II board review course titled "Review of Dentistry" was implemented in the fall 2012 term. The course time frame is from July 24, 2012-October 23, 2012, which was just prior to the NBDE Part II exam window for our students (October 27, 2012-January 5, 2013). This didactic course consists of lectures on board format, oral pathology, oral radiology, periodontology, endodontics, and pharmacology. Sample questions written in a format similar to that used on the NBDE are being utilized extensively. Student course reviews were very good and the course is serving its intended purpose as a preparatory course for this important benchmark examination. The course has started this fall (2013) for the next cycle.

**Established in Cycle:** 2011-12  
**Implementation Status:** In-Progress  
**Priority:** High
Relationships (Measure | Outcome/Objective):
  Measure: National Board Dental Examinations | Outcome/Objective: Recall and apply clinical dental knowledge.

Projected Completion Date: 10/2012
Responsible Person/Group: Curriculum Committee
Additional Resources: Lecturer from outside the SOD in pharmacology.

Peer tutoring.
Peer tutoring was offered in the 2011-2012 academic year to the one student that did not successfully pass Part I of the NBDE on the first try. The peer tutoring was viewed as a positive experience both by the tutor and the student receiving the mentoring, and the student passed this benchmark examination on their next attempt. We decided to mandate tutoring sessions for any student that is not successful in passing Part I or Part II, but this was not needed in the 2012-2013 academic year as we had 100% pass rate on both parts of the NBDE.

Established in Cycle: 2011-12
Implementation Status: Planned
Priority: High

Relationships (Measure | Outcome/Objective):
  Measure: National Board Dental Examinations | Outcome/Objective: Recall and apply basic dental science knowledge.
  | Recall and apply clinical dental knowledge.

Projected Completion Date: 01/2013
Responsible Person/Group: Student Mentoring Council
Additional Resources: Financial resources from the Office of the Dean for funds to compensate tutors.
Budget Amount Requested: $400.00 (recurring)

Review of assessments.
We know that all students have passed all the required assessments and competency examinations, as this is a requirement for passing individual didactic and clinical course and for progression to the next academic year or graduation. We are undergoing a comprehensive review of these important benchmarks. We have defined the assessment methods of each individual course and/or clinic. A comprehensive plan to evaluate competency examinations in the D3/D4 years is underway.

Established in Cycle: 2011-12
Implementation Status: In-Progress
Priority: High

Relationships (Measure | Outcome/Objective):
  Measure: Competency Assessments. | Outcome/Objective: Recall and apply basic dental science knowledge.
  | Recall and apply clinical dental knowledge.

Projected Completion Date: 10/2013
Connected Document
Curriculum_assessment_methods_05202013

Peer mentoring.
In the 2012-2013 academic year, we instituted a school-wide peer-mentoring program. Students in each dental school class identified as high performers were asked if they would be willing to serve as peer-mentors. This entailed being available for one-on-one tutoring of a classmate as needed. Benefits for the tutor include: an hourly stipend, an additional item to add to their curriculum vitae, reinforcement of the material they are studying, and the feelings that accompany
Peer mentoring.

In the 2012-2013 academic year, we instituted a school-wide peer-mentoring program. Students in each dental school class identified as high performers were asked if they would be willing to serve as peer-mentors. This entailed being available for one-on-one tutoring of a classmate as needed. Benefits for the tutor include: an hourly stipend, an additional item to add to their curriculum vitae, reinforcement of the material they are studying, and the feelings that accompany this altruistic endeavor. The tutoree obviously benefits from the one-on-one experience, and also learn appropriate study habits and the amount of time needed outside the classroom to be successful in our challenging curriculum. This program was made available to all students.

Established in Cycle: 2012-13
Implementation Status: In-Progress
Priority: High

Relationships (Measure | Outcome/Objective):
  Measure: Competency Assessments.  |  Outcome/Objective: Recall and apply basic dental science knowledge.

Projected Completion Date: 08/2014

Mission / Purpose

Contribution to School/Unit Mission: By offering the degree of Master of Science in Dentistry two areas of need are met: the preparation of qualified teachers and investigators in the various branches of academic dentistry and the preparation of fully trained dental specialists. Therefore, the mission of the SOD to "continually improve the well being and oral health of people" is supported through the Masters degree program.

The masters programs offered by the SOD has three emphasis areas: Clinical Dentistry, Oral Biology, and Biomaterials. The SOD faculty works together in close collaboration with the Joint Basic Health Sciences departments to offer these programs which relate basic biological sciences to health and disease in the oral cavity and orofacial related structures.
Related Measures, Targets, Findings, and Action Plans

SLO 1: Demonstrate research knowledge and skills.
A student graduating with a Masters of Science in Dentistry will be able to
demonstrate a basic knowledge of research and the associated skills to conduct a
research project as measured by successfully completing a project and both the
public and private defense of a thesis with an achievement target of 100% successful
fulfillment of these undertakings.

Related Measures

M 1: Conduct research and defend a thesis
A student graduating with a Masters of Science in Dentistry will be able to
demonstrate a fundamental understanding of research methodology as
measured by the successful completion of a research project and the defense of
a thesis. Students must identify a research project and successfully complete
that project, take the required courses, and successfully write and defend a
thesis. Each Masters degree candidate must name a research committee who will
oversee the progress of their project and approve the thesis. This committee and
the mentor will periodically evaluate the candidate through oral and written
exams and through progress reports on the research project. This process will
culminate in a final paper/ journal article and public and private defense of the
thesis.

Source of Evidence: Senior thesis or culminating major project

Target:
All candidates must identify a scientifically sound project, name a mentor and
committee, and take and pass the required courses and seminars.

Finding (2012-13) - Target: Met
100% of students enrolled in the MS Dentistry program satisfactorily
completed a professional poster presentation, literature review in chosen
specialty, and interpretation of research findings for scientific and lay
audience. Most of these presentations were made at National and
International meeting of each specialty, as well as American Association of
Dental Research and International Association of Dental Research.

Finding (2011-12) - Target: Met
100% of students enrolled in the MS Dentistry program satisfactorily
completed a professional poster presentation, literature review in chosen
specialty, and interpretation of research findings for scientific and lay
audience. Most of these presentations were made at National and
International meeting of each specialty, as well as American Association of
Dental Research and International Association of Dental Research.

Finding (2010-11) - Target: Met
100% of students completing the Masters of Science in Dentistry program
satisfactorily completed required coursework, as well as planned for a
research project in conjunction with a graduate research committee.

Finding (2009-10) - Target: Met
100% of students enrolled in the MS Dentistry program satisfactorily
completed a professional poster presentation, literature review in chosen
specialty, and interpretation of research findings for scientific and lay
audience.

Related Action Plans (by Established cycle, then alpha):
For full information, see the Details of Action Plans section of this report.

Curriculum Review
Established in Cycle: 2009-10
An annual curriculum review is performed to ensure appropriate instruction methods and content. This is largely based on feedback...

M 2: Complete dental specialty program
A student graduating with a Masters of Science in Dentistry and are enrolled in a clinical discipline will be able to demonstrate clinical competence measured by completion of their associated dental specialty program and further exemplified by success on specialty board examinations with an achievement target of 90% pass rate on the first challenge of these examinations.

Source of Evidence: Curriculum/syllabus analysis of course to program

Target:
The post-doctoral residency program must be accredited by the Commission on Dental Accreditation of the American Dental Association. Six standards have been established by the Commission for dental specialty programs. For each standard requirements have been developed which are specific for each of the nine recognized dental specialties. Every seven years each specialty program must undertake a self-study which is followed by a site visit by a specialty consultant appointed by the Commission. Reports are submitted to the Commission which will identify any standards not being met by a specialty program. If any standards are not met the program must correct the deficiency and submit a progress report. Assignment of full accreditation is contingent upon satisfying the requirements of all standards. The candidate must complete published requirements for the clinical specialty program. This includes required coursework as well as satisfying department expectations for patient care. For post-doctoral dental specialists this is at a level of competency or proficiency.

Finding (2012-13) - Target: Met
Twenty six post-doctoral residents completed their Dental Specialty Program. They successfully completed required coursework, clinical training and discipline specific patient care. These included six residents from Hospital Dentistry, four each from Orthodontics, Periodontology, Pediatric Dentistry, Endodontics, and Prosthodontics and three from Oral and Maxillofacial Surgery specialty.

Finding (2009-10) - Target: Met
Nineteen post-graduate students have successfully defended their theses this year. Four were in the Orthodontic specialty, seven in Biomaterials, four in Prosthodontics, two in Periodontology and one each in Endodontics and Oral and Maxillofacial Surgery. This information is for students who completed their defense by the June 30, 2010 deadline.

Finding (2008-09) - Target: Met
Eight post-graduate students have successfully defended their theses this year. Three were in the Orthodontic program, four in Biomaterials, and one in Periodontology. This information is for students who completed their defense by the March 27, 2009 deadline. Five additional students are expected to complete their thesis defense shortly.

Finding (2007-08) - Target: Met
Thirteen post-doctoral students received an MS degree in seven areas dental specialty certification. These specialty areas include: biomaterials, maxillofacial prosthodontics, oral and maxillofacial surgery, orthodontics,
pediatric dentistry, periodontics, and prosthodontics.

SLO 2: Conduct clinical or basic research.
A student graduating with a Masters of Science in Dentistry will be able to demonstrate the ability to conduct a clinical or basic research project in an academic or private dental practice setting as measured by successfully completing a project and the defense of a thesis with an achievement target of 100% successful fulfillment of these undertakings.

Related Measures

M 1: Conduct research and defend a thesis
A student graduating with a Masters of Science in Dentistry will be able to demonstrate a fundamental understanding of research methodology as measured by the successful completion of a research project and the defense of a thesis. Students must identify a research project and successfully complete that project, take the required courses, and successfully write and defend a thesis. Each Masters degree candidate must name a research committee who will oversee the progress of their project and approve the thesis. This committee and the mentor will periodically evaluate the candidate through oral and written exams and through progress reports on the research project. This process will culminate in a final paper/journal article and public and private defense of the thesis.

Source of Evidence: Senior thesis or culminating major project

Target:
All students graduating with a Masters of Science in Dentistry will complete the requirements for the degree and then successfully defend his/her thesis research to the thesis committee and the public. The candidate is also encouraged to present the results of his/her research at a national or international scientific meeting and to publish a peer-reviewed paper based on the research.

Finding (2012-13) - Target: Met
Thirteen post-graduate students have successfully defended their MS thesis this year. Four were in Orthodontic program, four in the Biomaterials, two in Periodontology, one each in the Oral Biology, Prosthodontics, and Restorative Sciences.

Finding (2011-12) - Target: Met
Twelve post-graduate students have successfully defended their thesis this year. Four were in Orthodontic program, two in the Oral Biology, three in Periodontology, three in the Biomaterials, and one in Prosthodontics.

Finding (2010-11) - Target: Met
Thirteen post-graduate students have successfully defended their thesis this year. Four were in Oral Biology, four in the Orthodontic program, three in Biomaterials, and one each in Prosthodontics and Periodontology.

Finding (2009-10) - Target: Met
100% of students enrolled in the MS Dentistry program has successfully completed their public and private thesis defense.

Finding (2008-09) - Target: Met
Eight post-graduate students have successfully defended their theses this year. Three were in the Orthodontic program, four in Biomaterials, and one in Periodontology. This information is for students who completed their defense by the March 27, 2009 deadline. Five additional students are expected to complete their thesis defense shortly.

Finding (2007-08) - Target: Met
Thirteen post-graduate students successfully completed the requirements for the MS degree at the SOD.

**SLO 3: Competent patient care.**
A student graduating with a Masters of Science in Dentistry with an emphasis on clinical dentistry will be able to provide high quality patient care in their respective specialty as measured by completion of a dental specialty program with an achievement target of 90% pass rate on their first attempt at a specialty board examination.

**Related Measures**

**M 2: Complete dental specialty program**
A student graduating with a Masters of Science in Dentistry and are enrolled in a clinical discipline will be able to demonstrate clinical competence measured by completion of their associated dental specialty program and further exemplified by success on specialty board examinations with an achievement target of 90% pass rate on the first challenge of these examinations.

Source of Evidence: Curriculum/syllabus analysis of course to program

**Target:**
90% pass rate on their first attempt at a specialty board examination. 85% graduates of MS Dentistry program with emphasis on Clinical Dentistry currently pass their specialty board exam on the first attempt.

**Finding (2012-13) - Target: Met**
95% graduates of MS Dentistry program with emphasis on Clinical Dentistry passed their specialty board exam on the first attempt.

**Finding (2011-12) - Target: Met**
95% graduates of MS Dentistry program with emphasis on Clinical Dentistry passed their specialty board exam on the first attempt.

**Finding (2010-11) - Target: Met**
95% graduates of MS Dentistry program with emphasis on Clinical Dentistry passed their specialty board exam on the first attempt.

**Finding (2009-10) - Target: Not Met**
Currently 85% graduates of MS Dentistry program with emphasis on Clinical Dentistry pass their specialty board exam on the first attempt.

**Related Action Plans (by Established cycle, then alpha):**
For full information, see the *Details of Action Plans* section of this report.

**Ensure excellence in patient care.**
*Established in Cycle: 2009-10*
The American Dental Association provides testing and ultimately the results of student performance on a nationally certified c...

**Details of Action Plans for This Cycle (by Established cycle, then alpha)**

**Continue to monitor.**
To continue to monitor the progress of students in the MS program.

*Established in Cycle: 2007-08*

*Implementation Status:* Planned
*Priority:* High
*Implementation Description:* Beginning of academic year.
*Projected Completion Date: 07/2015*
Responsible Person/Group: Select Dental School Faculty including the post-graduate program director.
Additional Resources: None

Enhanced monitoring of students.
With programs in various disciplines and departments, we are working on a better system of tracking of the progress of students in the MS program.
Established in Cycle: 2008-09
Implementation Status: Finished
Priority: High
Implementation Description: Matriculation date for next year's MS students.
Projected Completion Date: 06/2010
Responsible Person/Group: Select Dental School Faculty including the post-graduate program director.
Additional Resources: None

Curriculum Review
An annual curriculum review is performed to ensure appropriate instruction methods and content. This is largely based on feedback from the students and clinical disciplines that oversee the course assignments and evaluations.
Established in Cycle: 2009-10
Implementation Status: In-Progress
Priority: High

Relationships (Measure | Outcome/Objective):
  Measure: Conduct research and defend a thesis |
  Outcome/Objective: Demonstrate research knowledge and skills.

Implementation Description: Program directors of various clinical specialties, Oral Biology and Biomaterial will evaluate the current curriculum to develop "core curriculum". The core curriculum will define at least 2-3 courses that encompass a multidisciplinary approach for all MS students. Program directors will meet twice a year to perform curriculum review.
Projected Completion Date: 07/2015
Responsible Person/Group: Graduate Program Directors and Faculty of various clinical specialties
Additional Resources: None
Budget Amount Requested: $0.00 (no request)

Ensure excellence in patient care.
The American Dental Association provides testing and ultimately the results of student performance on a nationally certified credentialing examination. To ensure 100% of MS in Dentistry graduates with emphasis in clinical dentistry will pass their specialty boards, the SOD is continually reviewing its curriculum. A set of multidisciplinary "Core course" will be developed to educate and prepare residents to become competent dentist in their chosen specialty and serve the public and the profession at a high level of excellence.
Established in Cycle: 2009-10
Implementation Status: Planned
Priority: High

Relationships (Measure | Outcome/Objective):
  Measure: Complete dental specialty program | Outcome/Objective: Competent patient care.

Implementation Description: The first phase of this action plan was completed this year with establishment of Multidisciplinary Seminar Course. This course is
administered in the Fall semester of each academic year and involves faculty from different disciplines. MS students and residents from various clinical specialties participate in this course. Course master, Program Director will continue to develop this course by incorporating contemporary concepts, topics, and clinical issue and by feedback from student evaluation.

**Projected Completion Date:** 07/2015

**Responsible Person/Group:** Faculty and individual Program Directors

**Additional Resources:** none

**Budget Amount Requested:** $0.00 (no request)