

Student Bulletin & Handbook

2016-2017

UK Dentistry

Please Note: The University of Kentucky College of Dentistry Bulletin and Student Handbook is available on-line at: <http://Dentistry.uky.edu/current-students>

University of Kentucky College of Dentistry
Chandler Medical Center, Lexington, KY 40536-0297

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A Message from Dean Stephanos Kyrkanides

Dear Student Dentist:

I'm pleased you are starting your journey toward a career in dentistry. I'm even more pleased you are joining our oral health family at the UK College of Dentistry.

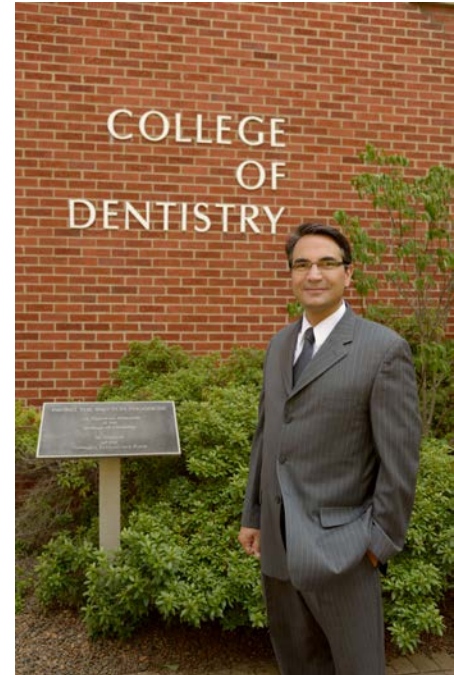
A career in dentistry can be very fulfilling. Routinely dentistry ranks high among the list of best jobs in the U.S. for many factors, among them the possibility for work-life balance and a comfortable salary. In addition, a career in dentistry allows you the potential to have a profound mark upon the lives of many. The versatility of the profession is wonderful, and no matter what aspect of dentistry you decide upon, through your efforts you can be impactful.

The UK College of Dentistry is focused on building on our history of excellence through the introduction and support of a variety of efforts in the areas of education, research, and service to our community. We strive to offer students 22nd century dentistry concepts today, unique research opportunities with cross-disciplinary collaboration when possible, and a variety of channels affording students the ability to serve our local community and gain experience with offering patient-centered care.

Just as important as our focus on teaching, research, and providing care, is our commitment and desire to provide a supportive and encouraging environment for our students. Part of my role as dean, with help from the school's dedicated faculty and staff, is to help each student reach their greatest potential. The success and satisfaction of each and every person studying at the college means a lot to us. We're here to provide the personal attention and support students need in order to graduate and be well prepared to provide thoughtful and competent care.

Please take some time to review this document to learn more about our college and connect with us should you have any questions or want to know more.

Sincerely,
Stephanos Kyrkanides, DDS, PhD



Introduction

Welcome to the University of Kentucky College of Dentistry! This Handbook is designed to answer questions you may have about student life, academic policies and the daily operations of the College and University. The policies and procedures outlined in this Handbook are designed to enhance your progress and help create balance in your student life.

The Offices of Academic Affairs and Admissions and Student Affairs are dedicated to supporting the success of all student dentists throughout the dental curriculum. If you have any questions that are not answered by this Handbook, please feel free to come by our office and speak with us or visit our website: <http://Dentistry.uky.edu/academic-affairs> and <http://Dentistry.uky.edu/student-affairs>

Student Support and Advocacy

The Associate Dean for Academic Affairs oversees the curriculum, accreditation, and academic performance of the students. This office provides guidance and support to students on all academic and student life related issues. The Academic Dean and personnel are available from 8:00 am - 5:00 pm M-F or on an as needed basis. This office is located on the first floor of the dental science building, room M-134 and D-155 or reach by phone at 323-5656.

The Assistant Dean of Admissions and Student Affairs is responsible for advocacy for student rights and maintains an open door policy. Advisement, support with personal/professional challenges and additional resources (cv/personal statement writing, learning assessment/learning style difference, school/life balance resources) are available in the office. In addition, the office provides support to student activities and organizations. The Assistant Dean and personnel are available from 8:00 am – 5:00 pm M-F or on as needed basis if a student requests support or advocacy. This office is located on the first floor of the dental science building, rooms M-134 or reach by phone at 323-6071.

Students who have needs that go beyond the resources the Office of Academic and Student Affairs can provide are referred to more specific resources on the University of Kentucky's campus.

For Additional Questions:

Office of Academic Affairs 323-5656
Office of Admissions and Student Affairs 323-6071

Accreditation Policy

The predoctoral educational program at the University of Kentucky College of Dentistry is fully accredited by the American Dental Association Commission on Dental Accreditation.

It is the policy of this institution and the Commission on Dental Accreditation that all students should know how to contact the Commission to obtain a copy of the Accreditation Guidelines and/or to file a complaint.

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 60611-2678 or by calling 1-800-621-8099 extension 4653, or at the following website: <http://www.ada.org/314.aspx>

**The University of Kentucky College of Dentistry
Philosophy of Education
Approved by the Faculty Council, March 3, 2006**

A philosophy of education reflects the core values that determine how and what we teach.

Since its inception, the University of Kentucky College of Dentistry has been innovative in promoting the following values and educational principles:

- A student-centered approach: novice learners are guided through the dentistry curriculum in a transparent, collegial manner.
- A curriculum that is not lock-stepped and thus allows for individual differences in learning;
- An education focused on teaching comprehensive patient care in a total patient care model as opposed to a requirements based model;
- Integrated basic and clinical science instruction with early patient exposure (the diagonal curriculum required inclusion of an Oral Biology curriculum);
- Movement toward an outcomes based curriculum supported by gradients of core competencies which were assessed by measurable criteria rather than strictly norm referenced criteria;
- Emphasis on teaching community service to develop social sensitivity;
- Emphasis on formative assessment and feedback during skill or knowledge development rather than summative grading.
- A curriculum that embraces computer information technology and includes an increase in experiential, active and web-based instruction in addition to traditional lecture format.
- Implementation of a Professional Conduct Code to help students further develop and internalize moral behaviors that are critical for an autonomously practicing professional.

Under the canopy of these values and principles, students at the University of Kentucky College of Dentistry are encouraged and facilitated to develop the ability and desire:

- to master the subject matter, concepts and techniques of dentistry at the highest national standards;
- to acquire the skill required to access new knowledge and to continue learning throughout life;
- to adapt acquired knowledge to new situations;
- to communicate in English clearly, concisely and logically;
- to acquire the skills needed to embrace rapidly-changing technologies in a rapidly changing environment;
- to develop skills to undertake problem identification, analysis and solution;
- to develop a sense of personal accountability for their own learning and achievement

of outcomes;

- to develop critical thinking skills and to be open to new ideas and possibilities;
- to acquire mature judgment and to accept responsibility in supporting and advancing ethical, moral, social, and professional standards of care;
- to work effectively and efficiently, both independently and in a team;
- to acquire cross-cultural and other competencies to take leadership roles at the local, national, and even international communities.

In summary, an outcome based curriculum at the University of Kentucky College of Dentistry is an approach to education that shifts the emphasis from teaching to learning, from what the teacher will do to what the student will do. It emphasizes the student perspective by:

- clear and explicit identification of what a learner is expected to know, understand or be able to do as a result of a learning process (outcomes);
- assessment that transparently and defensibly aligns with the outcomes;
- teaching and learning activities that elicit the specified outcomes;
- assessment tasks that are detailed and evaluated consistently using explicit criteria.

University of Kentucky College of Dentistry	Policy: 02-01
Policy Name: Competencies for the new DMD program graduate	
Created: 10/26/98; reaffirmed Revised: 1/11/11; 06/10/11 Effective Date: 06/10/11 with editorial changes 1/11/11	
Purpose: To define the competencies required of the College's DMD graduates.	

Competencies are defined as a set of knowledge, skills and values that a dental graduate is expected to demonstrate consistently and independently. Successful completion of each competency evaluation is one of the requirements for graduation from the College of Dentistry. These competencies are subject to continuous review and improvement:

1. The new dentist must be able to practice ethically.
2. The new dentist must be able to acquire, analyze, and synthesize information in a scientific, critical and effective manner.
3. The new dentist must be able to communicate effectively, both orally and in writing, with colleagues, other health care providers, staff, patients, and the public.
4. The new dentist must be able to collect, record, and evaluate the biological, psychological, and social information needed to assess the patient's oral and general health. This includes the ability to recognize and manage behavioral factors that affect oral health and utilize the information to implement strategies that facilitate the delivery of oral health care.
5. The new dentist must be able to establish a differential, provisional or definitive diagnosis by interpreting and correlating findings from the history, consultations, and examination.
6. The new dentist must be able to develop, present, and discuss treatment goals and plans that address the needs, desires, and abilities of patients in diverse age groups.
7. The new dentist must be able to promote and improve the oral health of individuals, families, and groups in the community.
8. The new dentist must be able to provide care for patients of diverse ages that emphasizes prevention of oral disease and supports the maintenance of existing systemic and oral health.

9. The new dentist must be able to assess, diagnose, and manage anxiety, apprehension, and dental and orofacial pain.
10. The new dentist must be able to assess, diagnose, and manage diseases of pulpal and periradicular origin.
11. The new dentist must be able to assess, diagnose, and manage periodontal diseases and monitor the effectiveness of therapy.
12. The new dentist must be able to assess, diagnose, and manage conditions requiring oral and maxillofacial surgical therapy.
13. The new dentist must be able to assess, diagnose, and manage dental and medical emergency situations encountered in the practice of general dentistry.
14. The new dentist must be able to assess, diagnose and manage oral facial pain, temporomandibular disorders (TMD), bruxism, and dysfunctional dental occlusion.
15. The new dentist must be able to assess, diagnose, and manage developmental and/or acquired craniofacial/dental abnormalities of the primary, mixed, and permanent dentitions.
16. The new dentist must be able to assess, diagnose, and manage oral mucosal and osseous diseases or disorders and be able to provide general dental care to most medically, physically or emotionally compromised patients in an outpatient setting.
17. The new dentist must be able to assess, diagnose, and manage dental needs of children & physically and mentally disabled patients.
18. The new dentist must be able to assess, diagnose, and treat the oral conditions of patients requiring restoration and replacement of teeth in order to achieve a dentition that is comfortable, functional, and natural in appearance.

<p>Approved: _____ <i>Signature on File</i> _____ Date: _____</p> <p style="text-align: center;">Sharon P. Turner, DDS, JD Dean</p>
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Characteristics of Successful Dental Students

Students who answer “yes” to the following:

1. Approaches dental school as if it's a regular, full-time job
2. Actively participates in academic activities (e.g., coming to class and advising sessions prepared with expected documents and assignments completed).
3. Attends all classes and exam reviews, and sets a daily schedule that includes study time.
4. Finishes assignments and projects before deadlines rather than procrastinates.
5. Takes class notes using Cornell Method (or comparative styles) and reviews notes within 24 hours of a class. (Does not rely on PowerPoint slides from class).
6. Participates in study groups or group discussions
7. Studies during daylight hours rather than late at night
8. Prepares in advance to study for all exams, including mid-terms and finals.
9. Makes an appointment early in the semester to meet with course faculty during office hours, as needed, and consistently communicates with faculty throughout the semester when they don't understand content.
10. Is willing to make mistakes, and learn from those mistakes.
11. Comes to each class with 5 questions having already read the material of the day's subject matter.
12. Asks for assistance from tutors, advisors and instructors.
13. Reviews questions in Dental Decks on topics from class and reads dental journals.
14. Consistently does more than is required (e.g., reads the textbook even when tests are based on notes or reads professional dental journals).
15. Comes to clinic prepared, having reviewed the patient record and procedures to be performed.
16. Knows her/his dominant learning style and how to creatively engage with a faculty member who instructs in a different style.
17. Makes appropriate personal choices (e.g., not using drugs, drinking alcohol underage or on the weekend before an exam or before seeing patients).
18. Is self-aware of personal issues, prejudices, and biases that interfere with connections to people.
19. Has financially prepared for the costs of education, and lives like a student while in school (to avoid living like a student after graduation, when student loans come due).
20. Schedules time each day for personal renewal and fulfillment.
21. Practices self-care (e.g., on a daily basis: exercises, eats a healthy diet, and sleeps at least 7-8 hours/night).



1954 - UK Albert B. Chandler Medical Center is authorized to include colleges of dentistry, medicine, allied health professions, nursing, and pharmacy.

1960 - 473-bed University of Kentucky Hospital opens.

1962 - College of Dentistry enrolls its first class

The University

Founded on Feb. 22, 1865, the University of Kentucky began as the Agricultural Mechanical College of Kentucky University. In 1878, the Agricultural and Mechanical College was separated from Kentucky University and reestablished on land given by Lexington and Fayette County. Kentucky University is now Transylvania University. To provide a separate campus for the new institution, the city of Lexington donated its 50-acre fairground and park which had been used as bivouac area for Union troops during the Civil War. President James K. Patterson, whose service to the institution began in 1869, used his personal savings to supplement the building fund. Thirty years later, the legislature changed the name of the institution to State University, Lexington, Kentucky, and gave it additional financial support. In 1916, the name was changed to the University of Kentucky. UK is now among the 93 state universities and land-grant institutions in America. In 2012, the College of Dentistry celebrated its 50th anniversary. Other dates have proved pivotal in the history of the University:

Pivotal dates in the history of the University:

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1960 - 473-bed University of Kentucky Hospital opens.

1962 - College of Dentistry enrolls its first class.

2012 – 50th Anniversary

Today, UK has about 30,000 students on the Lexington campus and Medical Center. More than 1,700 full-time faculty are employed at the University. UK is a member of the Southern Association of Colleges and Schools.

The College of Dentistry is one of six colleges in the University of Kentucky, Chandler Medical Center. Other colleges include Health Sciences, Medicine, Nursing, Pharmacy and Public Health. The UK Hospital, UK Children's Hospital, Kentucky Clinic, Sanders-Brown Center on

Aging and Lucille Parker Markey Cancer Center also are integral components of UK's health science complex.

The College of Dentistry was established in 1961. In its brief existence, the accomplishments of the College are unparalleled in dental education. From its beginning, it has been acknowledged nationally and internationally as a leader in academic dentistry. Since its founding, more than 2,000 aspiring practitioners have selected the University of Kentucky to prepare them for their chosen profession.

Currently, the College admits 40 Kentucky residents and 25 non-residents into its four-year curriculum leading to the Doctor of Dental Medicine (D.M.D.) degree. The goal of the curriculum is to prepare dentists to meet the oral health needs of the society they are called to serve. The curriculum, developed at Kentucky, and now used extensively throughout the nation, focuses on integrating learning in the biomedical and clinical sciences. This is accomplished by an introduction to clinical dentistry in the first year, and by extension of study in the biomedical sciences throughout the four years.

The curriculum is increasingly problem-oriented, focusing on developing the student dentists' critical-thinking skills imperative for the contemporary practice of dental medicine. The faculty is committed to inculcating in students an attitude of life-long learning, believing that only such an orientation enables a practitioner to provide competent and state-of-the-art services in a rapidly changing clinical environment. The expanding knowledge base of the profession requires that the curriculum focus on principles of dentistry and on teaching future dentists how to learn and instill in them the desire to continue to learn about the profession.

The College offers advanced educational programs leading to advanced certification in general practice, pediatric dentistry, periodontics, oral and maxillofacial surgery, orofacial pain, and orthodontics. In periodontics and orthodontics, students also earn a Master of Science degree from the University of Kentucky Graduate School. The option of a Master of Science is available in orofacial pain. Continuing education courses for practicing dental professionals also are an important dimension of the College's educational activities.

The College of Dentistry and all of its programs are accredited by the Commission on Dental Accreditation of the American Dental Association.



The University of Kentucky is a public, land grant university dedicated to improving people's lives through excellence in education, research and creative work, service, and health care. As Kentucky's flagship institution, the University plays a critical leadership role by promoting diversity, inclusion, economic development, and human well-being.

VISION

The University of Kentucky will be one of the nation's 20 best public research universities.

VALUES

The University of Kentucky is guided by its core values:

Integrity

Excellence

Mutual Respect and Human Dignity

Diversity and Inclusion

Academic Freedom

Shared Governance

Work-life Sensitivity

Civic Engagement

Social Responsibility



Statement of Mission Goals

The College of Dentistry

- ➔ Currently, the College admits 40 Kentucky residents and 25 non residents into its four-year curriculum leading to the Doctor of Dental Medicine (D.M.D.) degree.

College Mission

The mission of the College of Dentistry is to improve oral health and general health through teaching, research, and service. The mission is supported by collaborative engagement and by networking with community and academic partners to promote oral health literacy and reduce health disparities within Kentucky and beyond.

The College educates health professionals to become active citizen leaders who are conscious of their personal and professional responsibilities in a global society. The College values diversity within its community, which includes diversity of thought and experience, in order to promote a humanistic approach to education, patient care, and community service.

2016-2020 STRATEGIC PLAN - DRAFT

Community Engagement

Improve oral health across the lifespan, beginning with children.

Initiatives >>>

- Create health and wellness partners at community, patient, and governmental levels.
- Partner with Kentucky community health providers to:
 - Educate expectant and new mothers on oral health behaviors and nutrition.
 - Coordinate well child visits and preventive services.
- Collaborate with school districts and develop community partnerships to:
 - Implement oral health education into school curriculum.
 - Make preventive services available to all students.
- Offer affordable comprehensive dental treatment to our citizens in need.
- Influence oral health care policy.

Leadership

Lead through inclusion, equality, and innovation.

Initiatives >>>

- Strengthen our humanistic culture and work to eliminate unconscious biases.
- Promote organic growth of new leaders: Foster, support, and reward innovation, initiative, and execution.
- Create a functional matrix organization: Break down silos and function as a team of task-oriented teams.
- Lead through consensus, based on broad representation and inclusion.
- Pursue new financial resources and operational models to support sustainability and growth.
- Develop joint governance structure.



2016-2020
STRATEGIC PLAN



dentistry.uky.edu/plan

Stephanos Kyrkanides, DDS, PhD
Dean
UK College of Dentistry
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Lexington, KY 40536-0297
859-323-1884

Be No. 1

2016-2020 STRATEGIC PLAN – DRAFT CONTINUED



Clinical

Provide leading edge patient-centered care.

Initiatives >>>

- Emphasize prevention and wellness through awareness, participation, and personalized care.
- Deliver complex care in a comfortable environment.
- Utilize technologies, facilities, and therapies of the future, today.
- Operate efficiently and effectively to improve outcomes.
- Establish mutually beneficial partnerships.

Education

Educate the dentist of the future, now.

Initiatives >>>

- Create innovative and state-of-the-art curricula for dental and specialty programs.
- Educate and recruit faculty strategically.
- Invest in advanced technology and teaching methods.
- Incorporate digital dentistry best practices in curricula.
- Establish an open, welcoming, and inclusive learning environment.
- Increase the overall quality of incoming and outgoing students.

Research

Through research and discovery, alleviate oral diseases in Kentucky.

Initiatives >>>

- Offer competitive seed funding promoting collaboration.
- Support steady state research activity.
- Reward faculty for grant submissions/funding and peer-review publications.
- Recruit research intense faculty.
- Offer a research-intensive DMD tract supported by scholarships to students.

Mission

Through leadership in education, patient care, discovery, and community engagement, we aim to advance oral and general health in Kentucky and beyond.

Vision

Be the No. 1 College of Dentistry.

Values

Compassion
Unity
Respect
Equality

Facilities

The College of Dentistry is located in a six-story wing of the University of Kentucky, Chandler Medical Center. The College's physical facilities include patient care operatories, technique laboratories, classrooms, conference rooms, and faculty and administrative offices. There are 200 patient care operatories providing support for all dimensions of the College's programming.

In keeping with the College's commitment to progress and innovation, new equipment and facilities are continually being introduced to enhance the education of student dentists and to enhance the patient experience. In 2008, the vacuum system that supports all dental operatories was replaced. Also completed in 2008 was a refurbishment of the Dental Science Building's two elevators. In 2009, the College refurbished all of its waiting rooms and reception areas and renovated oral surgery operatories. In 2010, significant resources were invested to implement digital radiography and to enhance all radiology facilities. During the summer of 2013, our preclinical simulation laboratory was expanded and completely renovated in a project exceeding \$4.7 million dollars.

- **DMD Student Clinics:** Each operatory is designed to meet high infection control standards. Operatories feature chairs that allow for computerized patient positioning, articulating lights, fiber optic units, and photopolymerization units for curing biomaterials. Electronic patient records are in use and accessed chair side through mounted laptops in each operatory.
- **Technique Lab:** The preclinical technique lab and adjacent support labs include the most modern laboratory equipment. All workbenches have a dust collector and electric and air-driven hand piece controllers. The instructor podium has access to centralized audio/visual services, the internet, and custom in-room audio/visual equipment. The preclinical simulation laboratory was expanded and completely renovated this summer in a project exceeding \$4.7 million dollars with 70 work stations and several wet/dry labs.

PROFILE

Robert Kovarik, D.M.D.



Dr. Kovarik is an associate professor in the Department of Oral Health Science, Division of Dental Public Health. He received a bachelor's degree in material science engineering from Vanderbilt University and a doctor of dental medicine degree from the University of Kentucky, College of Dentistry in 1982. After practicing dentistry for five years in the greater Cincinnati area, he joined the faculty at the Medical College of Georgia School of Dentistry. While on the faculty there, he earned a master's degree in oral biology.

"I returned to teach full-time at the University of Kentucky, College of Dentistry because I enjoy the collegiate atmosphere here. This school has a long tradition of treating students with respect and providing a very positive learning environment for both students and faculty. I have never visited or been associated with a dental school that provides a better learning environment for its students.

Enhancements in technology, such as mannequin based simulators, and computer monitors are available at each student workstation.

- **Classrooms:** The primary classrooms for didactic instruction, MN 363 and MN 563, were updated in 2011 to include new HD LCD projections, smart podiums to utilize in displaying bench work and distance learning opportunities, and wireless internet enhancement.
- **Student Lounge:** Student dentists have a dedicated area containing 210 lockers, seating for 20 students and a kitchen equipped with a microwave and a refrigerator. Computers with Ethernet access are also available for student use. In 2011, the Student Lounge was renovated with new ceiling tiles, furniture, refrigerators, microwaves, and a fresh coat of paint, thanks to donations from alumni. During the summer of 2013, an additional locker room was added (D-84) with 70 new lockers for the students.

Faculty and Resident Clinics: The building also houses clinics for Faculty and Residents in the areas of General Dentistry, Orthodontics, Oral and Maxillofacial Surgery, Orofacial Pain, Periodontics, and our Oral Pathology Laboratory. Many of these clinics have been renovated or expanded in the last several years, including upgrades to life safety systems, additions of cutting edge equipment, and replacement of dental operatory equipment. These clinics provide training locations for our various residencies, as well as a location for our faculty to provide comprehensive dental care to private patients, University employees, and their families.

- **Kentucky Clinic:** The Kentucky Clinic, a comprehensive ambulatory care center, contains a dental facility with 21 patient care operatories. This location houses Faculty Practices and our General Practice and Pediatric Dentistry Residencies. Currently, a new Orofacial Pain Clinic is being constructed in a second space acquired in the Kentucky Clinic last year. It is

Engrained in our College of Dentistry is an environment whereby teachers and students work together as colleagues for the common goal of providing a modern education in dentistry and quality dental care for our patients at the college. Not only is this environment more enjoyable to students, but it is also more enjoyable and rewarding to faculty and that is why I am a faculty member here at UKCD.”

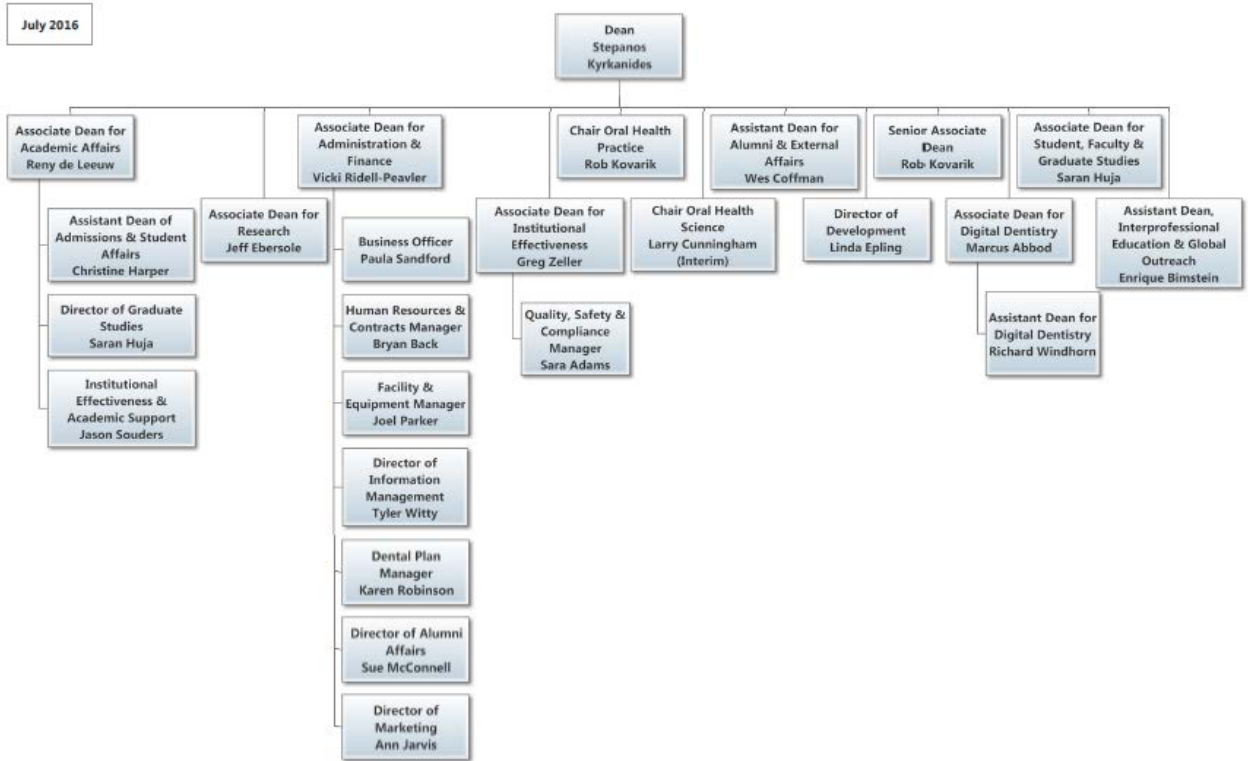
Dr. Kovarik maintains a private practice in the faculty practice clinic, teaches operative dentistry, and participates in research on the links between oral health and general systemic health in rural settings. His research interests are in the effects of oral infections on preterm and low birth weight birthing outcomes, early childhood caries and oral infections in patients with type 2 diabetes. “I think of the University of Kentucky, College of Dentistry as being a clinically oriented school where you can get a very good education in the actual practice of dentistry (clinical dentistry). However, during the past several years we have become even broader in our educational focus. We provide an outstanding education in the basic sciences and more and more of our students are participating in research which is the foundation of everything we teach. In research, we are constantly discovering better materials and techniques. This translates into better teaching and better patient care.”

anticipated that the new clinic will be utilized in providing patient care in March, 2013. Kentucky Clinic is connected to the UK hospital by a covered skywalk, as is the College of Nursing and Health Sciences Learning Center. The top floor of the six-story building contains an audio-visual library and multimedia retrieval study area. The self-instructional programs in the curriculum, which are in the form of computer digitized slides, audio tapes, slide tapes, slide text and videocassettes, are available as well is the equipment necessary for their use. The library also has a microcomputer laboratory and a computer classroom with 55 personal computers.

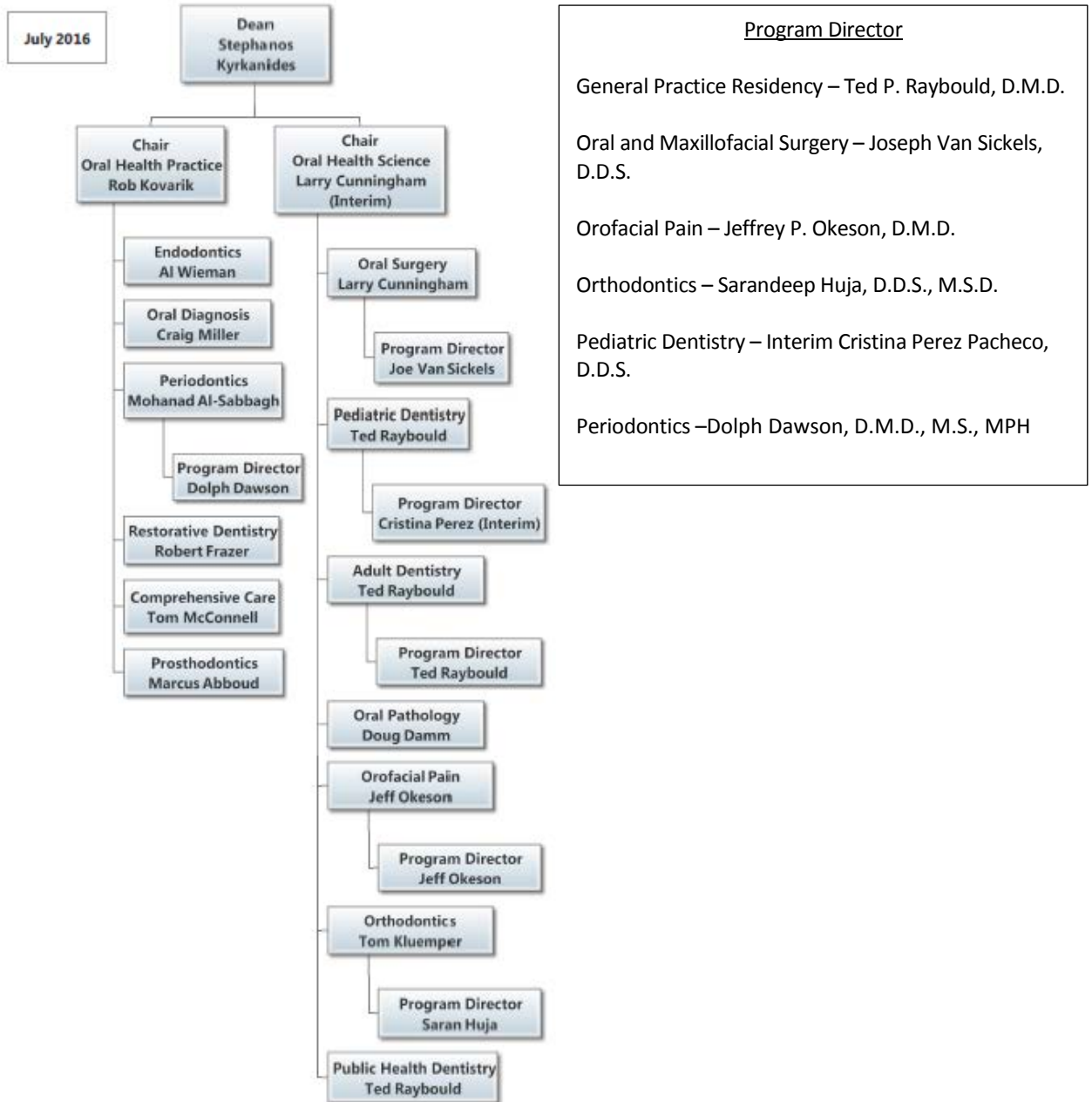
- **Center for Oral Health (COHR):** The Center for Oral Health was officially approved by the UK Faculty Senate on March 6, 2000. This action brought into reality an initiative started by the administration and faculty of the UKCD in 1997. It created a focus and research infrastructure for the College, which linked it with the Medical Center and the larger UK academic environment. Moreover, the COHR will help to position the UKCD as a leader in accomplishing the goal of UK to become a top 20 institution by 2020. Since 2000, with the creation of the COHR, UKCD research funds have increased to ~\$4-5 million annually. The COHR has propelled the UKCD from near last in NIH funding of dental schools in the country to near the top 20. These accomplishments reflect a multi-fold increase in grant submissions and publications by UKCD faculty. Another measure of research expertise is the emphasis of the research activities in the UKCD to link with other aspects of the UK academic environment, as well as with national collaborators.
- **The UK Chandler Medical Center Library:** contains more than 160,000 volumes and receives about 2,000 serial titles. Individual carrels and group study rooms are available for Medical Center students and staff.

Several facilities outside the Medical Center also are used for teaching by the College of Dentistry. These include various state and federal institutions such as the Veterans Affairs Medical Center, which has two locations and many practitioner offices throughout Kentucky, and the Family Care Center in Lexington. The College also has four self-contained mobile dental units which provide dental services to children from low-income families. With these units, the College has expanded its pediatric services and affords student dentists broader clinical experiences.

Organizational Chart



Academic Structure



D.M.D. Program

Admissions

The College of Dentistry seeks to enroll individuals whose academic preparation, personal qualities, and other qualifications suggest that they will experience success in the curriculum and afterwards in the dental profession. Currently, the College admits 40 Kentucky residents and 25 nonresidents into its four-year curriculum leading to the Doctor of Dental Medicine (D.M.D.) degree.

Prospective applicants are encouraged to contact the Office of Admissions and Student Affairs early in their undergraduate careers for guidance on admission requirements. The College desires applicants who have the requisite academic preparation to meet the challenges of a rigorous curriculum. In addition to earning a bachelor's degree, these individuals should complete courses in both science and non-science subject areas to increase their likelihood of success in the dental program. Although many applicants each year major in the biological and natural sciences, students who pursue studies in other majors also are invited to apply for admission.

The criteria considered by the Admissions Committee includes the quality of the applicant's pre-professional preparation, Dental Admission Test (DAT) scores, knowledge of and exposure to the dental profession, letters of recommendation and other relevant factors. Timing is always an important element in the application process. The College will work with students to advise them on ways to become competitive applicants. The College also works closely with the UK Pre-Dental Society. For more information, call (859) 323-6071.

PROFILE:

Cristina Perez, D.D.S.



I was born in Concepcion Chile into a family of University Professors. My mother went to Ohio State University to receive a PhD when I was 6. After finishing the program, we returned to Chile where I finished High School, College and Dental School. During my years in dental school, I found Occlusion, TMD, and Pediatrics very interesting. I entered a Residency Program in Pediatric Dentistry at the University of Concepcion soon after graduating from Dental School. During my pediatric program, I found myself very interested in bruxism in children, an area that I started studying. This led me to get in touch with Dr. Okeson. I had heard of him while using his text book during Dental School. Following my father and mother's footsteps, I entered Academics at the University of Concepcion while thinking about advancing my education further. I continued to keep in touch with Dr. Okeson in search for more answers to give to my students. I finally came to the University of Kentucky in 2008 to do a Masters Degree in Orofacial Pain. This program taught me so much and I am very grateful for the quality of education that I received here at UK. Along with studying Orofacial Pain, I never forgot about my degree in Pediatric Dentistry. I asked the Division of Pediatric Dentistry to "sit in" on some of their educational activities for their graduate students. This kept me up to date and confirmed that the Residency Program in Pediatric Dentistry in Chile is at a great level. During my last year in the Orofacial Pain Program, I applied for a position in Pediatric Dentistry at the University of Kentucky College of Dentistry. I was awarded this position and now hold an Assistant Professorship. I am very happy with my decision to stay in Kentucky and in Pediatric Dentistry. I hope to be able to unite both of my passions in a research line involving children and temporomandibular disorders.

Undergraduate Prerequisite Coursework



➡ The College uses a "rolling admissions system" whereby applicants are interviewed beginning in late August, the first offers of admission are made on Dec. 1, and the Admissions Committee continues to interview applicants until the class is filled.

The College is convinced that certain course work on the undergraduate level is necessary for quality performance in dental school. Therefore, the following courses are required for matriculating students:

- two semesters or three quarters of biology with laboratories;
- two semesters or three quarters of general chemistry with laboratories;
- two semesters or three quarters of organic chemistry with laboratories;
- one semester or two quarters of general physics with laboratory;
- two semesters or three quarters of English with emphasis on communications

- one semester of microbiology
- one semester of biochemistry

Prerequisite course work must be taken for a grade option, not pass-fail. Applicants are encouraged to pursue a well-rounded curriculum including courses both in the sciences and the humanities. Applicants are encouraged to take additional basic science courses. Examples of courses that will be helpful include anatomy (human), biochemistry, cell biology, embryology, genetics, histology, immunology, molecular biology, and physiology (animal and/or human) but only after degree requirements have been completed. An applicant's curriculum will be enriched if it also includes courses in the social sciences, history, literature, economics, philosophy, and psychology.

Technical Standards for Dental Students

Policy Objective

To define the non-academic criteria for admission into, continued enrollment in, and graduation from the Doctor of Dental Medicine program.

Policy Statement:

The University of Kentucky, College of Dentistry is committed to ensuring that the opportunity to pursue oral health education is available to all qualified persons. In this spirit, all qualified individuals will be considered for admission. Moreover, the College will work to ensure that all qualified students, consistent with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act, will have the opportunity to succeed in the College's programs of study.

The College recognizes that the Doctor of Dental Medicine (D.M.D.) degree carries with it the full authority of the institution and communicates to those who might seek the services of the bearer that he or she is competent to practice dentistry. The D.M.D. degree is unique in that the graduate is prepared and, when licensed, is allowed to practice all disciplines of the dental profession. Therefore, the student must demonstrate the knowledge, skills, and attitudes that the faculty has determined are essential for the practice of dentistry. The student must acquire both cognitive and technical skills to negotiate the curriculum.

The following technical standards describe the essential functions that students must demonstrate in order to fulfill the requirements of a general dental education, and thus, are prerequisites for *entrance, continuation, and graduation* from the College. Students must possess the skills and abilities that will allow them to successfully complete the course of study and receive the full benefit of dental education. While enrolled in dental school, students must direct and perform treatment of the College's patients. The College has the responsibility for ensuring the safety of the patients. Treatment must be completed safely and within an acceptable time.

PROFILE

Tyresia White, D.M.D.
UKCD – Class of 2013



Dr. Tyresia White was born in Carolina. She maintained her native state until venturing to Lexington, Kentucky for dental school in 2009. Prior to that time, she earned a biology degree from Furman University followed a dental hygiene degree from Greenville Technical College. Dr. White worked as a hygienist for nearly two years. The time spent in private practice fueled the fire towards pursuing a career as a dentist. She desired more variety in practice and more input with patient treatment.

Dr. White is currently a second year resident in the Department of Periodontology. She enjoys teaching the students in preclinical labs as well as covering and consulting in the student clinic. Coordinating cases with colleagues in other specialties as well as faculty has been a great experience as well.

After residency, Dr. White plans to return to the South to pursue an associate position. She plans to pursue opportunities to lecture at continuing education courses and study clubs. In addition, Dr. White plans to be active in organized dentistry, especially at the local level.

The University of Kentucky, College of Dentistry will consider for admission any applicant who demonstrates the ability to perform or to learn to perform the skills listed in the College's Technical Standards policy. The College's Academic Performance Committee will monitor each student's demonstration of such knowledge and skills; specific standards are included in the *College Bulletin* and *Student Handbook*. Applicants are not required to disclose the nature of their disability(ies) to the Admissions Committee; however, any applicant with questions about these technical standards is strongly encouraged to discuss the issue with the Admissions Committee Chair before the interview. Upon the request of an applicant or a student, reasonable accommodations will be provided. The ability to meet the following standards is a requirement for admission to the University of Kentucky College of Dentistry.

Technical Standards for Admissions For The University of Kentucky College of Dentistry

Standards

1. Motor Skills

GENERAL: A student should have sufficient motor function to execute movements reasonably required to provide general care to patients.

SPECIFIC: A student must possess the motor skills to directly perform palpation, percussion, auscultation and other diagnostic maneuvers, basic laboratory tests, and diagnostic procedures. Such actions require coordination of gross and fine muscular movements, equilibrium, and functional uses of the senses of touch and vision.

SPECIFIC: A student must be able to perform basic life support including CPR, transfer and position disabled patients, physically restrain adults and children who lack motor control, and position and reposition himself or herself around patient and chair in a sitting or standing position. A student must not hinder the ability of co-workers to perform prompt care. A student must be able to operate controls, move high-speed or low-speed dental drills with precision of less than one millimeter, and use hand instrumentation including scalpels for surgical procedures.

2. Sensory/Observation

GENERAL: A student must be able to acquire a predetermined level of required information through demonstrations and experiences in basic and dental science courses.

SPECIFIC: Such information includes, but is not limited to, information conveyed through: 1) physiologic and pharmacological demonstrations in animals; 2) microbiological cultures; 3) microscopic images of microorganisms and tissues in normal and pathologic states; and 4) demonstration of techniques using dental models. A student must be able to acquire

information from written documents, and to evaluate information presented as images from paper, films, slides, or video. A student must be able to interpret x-ray and other graphic images. A student must be able to benefit from electronic and other instrumentation that enhances visual, auditory, and somatic sensations needed for examination or treatment.

GENERAL: A student must be able to accurately observe a patient, at a distance and close at hand, and observe and accurately interpret non-verbal communications when performing dental operations or administering medications.

SPECIFIC: A student must be able to perform dental examinations and treatment that requires the use of sight and touch. He or she must be able to see fine detail, focus at a variety of distances, and discern differences and variations in color, shape, and texture that are necessary to differentiate normal and abnormal soft and hard tissues. He or she must be able to use tactile senses to diagnose directly by palpation and indirectly by sensations transmitted through instruments. A student must also possess the visual acuity to read charts, records, radiographs, small print and handwritten notation, and distinguish colors intra- and extra-orally.

3. Communication

GENERAL: A student must be able to: communicate effectively and sensitively with patients; convey or exchange information at a level allowing development of a health history; identify problems; explain alternative solutions; and give directions during treatment and post-treatment. Communication includes speech and writing. A student must be able to communicate effectively and efficiently in oral and written English with all members of the health care team.

SPECIFIC: A student must have sufficient facility with English to: retrieve information from texts and lectures and communicate concepts on written exams and patient charts; elicit patient backgrounds; describe patient changes in moods, activity, and posture; and coordinate patient care with all members of the health care team. A student must be able to communicate in lay language so that patients and their families can understand the patient's conditions and, thereby, be more likely to comply with treatment and preventive regimes.

SPECIFIC: In any case where a student's ability to communicate through these sensory modalities is compromised, he or she must demonstrate alternative means of communicating with instructors, patients, and other members of the health care team.

4. Cognitive

GENERAL: A student must be able to measure, calculate, reason, analyze, integrate, and synthesize.

SPECIFIC: A student must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Problem solving, a critical skill demanded of

dentists, requires all of these intellectual abilities. A student must be able to perform these problem-solving skills in a timely fashion.

5. Behavioral

GENERAL: A student must possess the emotional health required for full use of his/her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients.

SPECIFIC: A student must be able to tolerate physically taxing workloads and to function effectively under stress. He or she 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. Compassion, integrity, concern for others, interpersonal skills, interests, and motivation, are all personal qualities that will be assessed during the admissions and educational processes. A student must be able to manage apprehensive patients with a range of moods and behaviors in a tactful, congenial, personal manner so as not to alienate or antagonize them. A student must be able to accept criticism and respond by appropriate modification of behavior.

Application Process

An application for admission may be obtained from the American Association of Dental Schools Application Service (AADSAS). Candidates for admission are encouraged to apply early to receive the strongest consideration. The AADSAS electronic application becomes available on June 3rd. You may contact AADSAS at:

<http://www.adea.org>
(202) 789-7201
AADSAS
1400 K Street NW, Suite 1100
Washington, D.C. 20005

The College uses a “rolling admissions system” whereby applicants are interviewed beginning in late August, the first offers of admission are made on Dec. 1, and the Admissions Committee continues to interview applicants until the class is filled. The membership of the entering first-year class is usually confirmed by early February. Candidates who apply early in the admissions cycle are at a distinct advantage over those who wait much later to submit their AADSAS application and other credentials. The Office of Admissions and Student Affairs can provide applicants information and sound advice to ensure that they complete the process in a timely way.

Transcripts

An official transcript from each college or university attended must be enclosed when candidates send in their AADSAS application. A final transcript is required prior to matriculation for all applicants who have been offered admission and who will enroll.

Letters of Evaluation

Three letters of evaluation must be included in each candidate's admission credentials from individuals who are able to provide information regarding the applicant's potential for success in the dental curriculum. Two letters should come from faculty members and a third letter should come from a dentist. A pre-professional committee evaluation of a candidate may be substituted for the three letters. Applicants must supply the letters to AADSAS; hardcopy letters of evaluations sent to the Office of Admissions and Student Affairs will not be connected to the application.

Dental Admission Test

Every applicant must take the Dental Admission Test (DAT). The DAT scores are considered, along with a candidate's academic record and other criteria, in the admissions decision. The exam is offered nationwide by computer through Prometric Testing Centers. The DAT results should not be more than three years old and the highest set of scores will be used. Information on the DAT is available by contacting the American Dental Association at:



Interviews

Applicants are invited to participate in an interview at the College of Dentistry after a holistic review of their materials and interviews are scheduled on specific dates throughout the admissions cycle. All application materials must be received by the Admissions Coordinator before an interview can be scheduled. Since Dec. 1 is the AADSAS national notification date, well-qualified applicants who interview prior to this date have a greater likelihood of being offered admission than those who interview afterwards.

Residency Status

The Council on Postsecondary Education oversees the residency requirements for all public colleges and universities within the Commonwealth of Kentucky. These requirements are listed in the University of Kentucky Bulletin. Questions regarding residency status should be referred to the University's Registrar Office at <http://www.uky.edu/Registrar/>.

Personal Health

In accordance with American Dental Association standards, all students must be able to demonstrate prior to and throughout their enrollment that they are physically and mentally qualified to undertake dental studies; please refer to the Technical Standards policy above or contact the Office of Admissions and Student Affairs for questions. Each student must submit a medical history form and an immunization record at the time of matriculation. All applicants meeting the appropriate academic requirements and technical standards shall be considered equally for admission to any academic program regardless of race, color, religion, sex, marital status, beliefs, age, national origin, sexual orientation, or disability.

University of Kentucky Codes of Conduct and Policies

Student Rights and Responsibilities

The *Student Rights and Responsibilities* document is published online by the University of Kentucky and is available on the web at <http://www.uky.edu/StudentAffairs/Code/>. Part I, "Code of Student Conduct", includes rules, procedures, rights and responsibilities governing non-academic relationships. Part II is entitled "Selected Rules of the University Senate" and includes all policies and procedures on student academic affairs, including those excerpts cited in the College of Dentistry *Code of Professional and Academic Responsibility*. Part III gives regulations governing time, place, and manner of meetings, demonstrations, and other assemblies. Part IV contains the "University of Kentucky Alcohol Policy." Part V deals with student records.

Health Care Colleges Student Professional Behavior Code (HCCSPBC)

This Code provides the standards of professional conduct and procedures to be followed when questions arise about the professional, moral or ethical character of a student enrolled in courses or programs, including clinical programs, in the health care colleges. The purpose of the HCC Code is to provide a professional behavior code that applies uniformly to all students enrolled in a degree program offered by any of the health care colleges (Dentistry, Health Sciences, Medicine, Nursing, Pharmacy and Public Health). The full version is available online at http://www.uky.edu/Provost/AcademicCouncil/Past_Meetings/2007/February/HCC_Behavior_Codes/HCCSPBC.pdf under the heading of "Health Care Colleges Documents".

Code of Professional and Academic Responsibility (Honor Code of UKCD)

This document describes the College's *Code of Professional and Academic Responsibility* policies and procedures. All predoctoral students, postdoctoral students and faculty members must abide by the Code. Abiding by the Code is a condition of each student's enrollment. See Appendix A.

Sexual Harassment Awareness and Other Forms of Discrimination Awareness

Sexual harassment and other forms of Discrimination involving students, faculty, staff or patients destroy the learning environment and relationships and will not be tolerated. Furthermore, sexual harassment is prohibited by federal and state laws. Students are encouraged to review the sexual harassment website for the University of Kentucky for additional information: http://www.uky.edu/EVPFA/EEO/discrimination_faq.html. If you have questions related to possible sexual harassment issues, you are encouraged to consult with the Associate Dean for Academic Affairs (M-134); the Assistant Dean for Admissions and Student Affairs (M-134); or the Sexual Harassment Hotline (257-3100).

Substance Abuse

The University is committed to providing a healthy and safe environment for its students, faculty and staff. The University has defined conduct in relation to the unlawful possession, use, dispensation, distribution or manufacture of alcohol or illicit drugs. Conduct that violates this definition poses unacceptable risks. Disregard for the health, safety and welfare of University community members shall result in disciplinary action up to and including Suspension, Dismissal, and Expulsion. Please note that public intoxication either on or off campus at a university sponsored event constitutes a violation of the policy and will result in appropriate disciplinary action, following appropriate due process. The policy is described in detail in the pamphlet. The Policy Statement as a Drug-free Institution can be found on the web: <http://www.uky.edu/Registrar/bulletinCurrent/dfi.pdf>

The University alcohol policy can be found at:

<http://www.uky.edu/StudentAffairs/Code/index.html>

Corporate Compliance and Responsibility

UK HealthCare employees are required to deal fairly and honestly with patients and their families, suppliers, third-party payers, as well as with their professional associates. UK HealthCare has, and continues to maintain, a reputation for ethical and lawful behavior. Each employee has an obligation to help UK HealthCare maintain this positive reputation that former and current employees have worked hard to establish. Simply put, the institution's reputation is too valuable and its mission too critical for anyone to jeopardize it. As part of its commitment to excellence in health care, UK HealthCare has implemented a Corporate Compliance Program to further the institution's efforts to prevent and detect illegal, unethical, and abusive conduct.

Potential issues or areas of concern include, but are not limited to:

- Patient care
- Patient referrals and referral sources
- Vendor and supplier relationships
- Operational, business and financial integrity
- Soliciting, receiving, providing or offering illegal compensation
- Conflicts of interest, duty of loyalty, and duty of care
- False statements, claims and representations
- Research and scientific integrity
- Coding and billing practices
- Confidentiality of medical information
- Responding to governmental officials and regulatory agencies
- Abuse of controlled substances
- Drug and device misuse
- Fraud, theft, abuse
- Embezzlement

As a student at the University Of Kentucky College Of Dentistry in the Chandler Medical Center, you must be aware of the Corporate Compliance program and report any conduct that you believe is illegal, unethical, or abusive. To report an issue or behavior that you believe may compromise our efforts to comply with all local, state, and federal guidelines and regulations, contact the Office of Corporate Compliance at 859-323-8002, though the Comply-Line 877-898-6072, or visit the website and select “How to Make a Report”: <http://www.ukhealthcare.uky.edu/compliance/>

Gifts and Benefits

Gifts and Benefits include, but are not limited to anything of value provided at no charge or at discount such as; loans, cash, gift certificates, services, prizes, art objects, transportation, meals, use of a vehicle or vacation facility, stocks or other securities, participation in stock offerings, home improvements, and tickets to sporting and cultural events. The potential list is endless – these are only intended as examples. Gifts do not include reimbursement for reasonable business expenses paid by faculty practice plans or other University of Kentucky related organizations. In accepting any gift or benefit, the following guidelines must be observed:

1. Clinical Enterprise faculty, staff and students may not accept gifts or other benefits that take into account the volume or value of referrals, purchases, or other business generated.
2. Clinical Enterprise faculty, staff and students may not accept gifts or other benefits in exchange for prescribing certain products or services, or to induce referrals.
3. Clinical Enterprise faculty, staff and students may not accept gifts or other benefits that could be perceived as an attempt by a vendor to interfere with their independent judgment.
4. Discounted goods and services, or those that eliminate or reduce an expense that would have otherwise been incurred, are also considered gifts under this code of conduct.
5. Appropriate gifts must primarily benefit patients or have genuine educational value. (e.g., textbooks and anatomical models.)
6. When otherwise appropriate, gifts to individuals (or to members of their immediate family) from any one source should have a fair market value of less than \$100.00 per gift. Even appropriate gifts should only be accepted occasionally and the annual aggregate should not exceed \$300.00. Single gifts or benefits to individuals valued above \$100.00 or aggregate annual gifts valued at above \$300.00 must be directed to the Vice President for Development, where they can be acknowledged and accepted on behalf of the University in accordance with University policy.
7. Items of nominal value are appropriate if they are primarily related to business. (E.g. pens, notepads, or similar promotional or advertising items with or without company logo).
8. Items intended for the personal benefit of the recipient are not appropriate. (e.g., golf bags, tickets to sporting or entertainment events, sponsorship of departmental parties or social events).

9. Perishable or consumable gifts given occasionally, such as a holiday gift basket or floral arrangement, may be accepted as long as the value is nominal and the items are shared among the clinical area employees or donated to charity. Cash or cash equivalents are not appropriate. (e.g., checks, gift certificates, and stocks)
10. Gifts intended to be passed on to patients for their use must be limited to \$10 per item (maximum \$50 per year). Federal law prohibits offering or transferring to a Medicare or Medicaid beneficiary anything of value that is likely to influence the patient's selection of a particular provider or supplier.

Please note: Collections of money for gifts of appreciation of faculty, while well intended, are *forbidden* by items 8 and 9 above. Students who would like to honor faculty may wish to establish scholarship funds or endowed professorships in the names of university faculty.

HIPAA at UK

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandates health care providers adopt unprecedented standards related to the protection and security of individually identifiable patient information. All dental students are required to successfully complete HIPAA training prior to treating patients or accessing patient information.

Because of the scope of the legislation and its impact on the University, we have adopted a centralized approach to HIPAA compliance efforts to ensure coordination, prevent duplication, and leverage resources. The Patient Privacy Compliance Committee has been created to oversee assessment, planning and implementation of HIPAA-related activities for UK HealthCare such as adopting policies and procedures, and training faculty and staff.

HITECH at UK

The Health Information Technology for Economic and Clinical Health Act enacted as part of the American Recovery and Reinvestment Act of 2009 widened the scope of privacy and security protections available under HIPAA by increasing the potential legal liability for non-compliance and providing for more enforcement. The HITECH Act imposes breach notification requirements for unauthorized uses and disclosures of "unsecured PHI." Under the new law patients must be notified of unsecured breaches. If a breach impacts 500 patients or more then HHS must also be notified as well as the local media. The covered entity must establish a toll-free number for patients to call and post information about the breach on the company's website. These breach notification requirements are also applicable to the covered entities business associates and vendors. For more information, please see UK HealthCare policy A06-100 Privacy Investigations and Breach Notification at <http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyID=3740>

Questions or issues regarding the University's response to HIPAA or HITECH should be addressed to Lynn Crothers, Privacy Officer, Office of Corporate Compliance, 2333 Alumni Park Plaza, or sent via e-mail to lynn.crothers@uky.edu. You may reach the Compliance Office by phone at 323-8002 and find them on the web:

http://www.ukhealthcare.uky.edu/forstaff/compliance/comply_about.htm

Academic Services

On occasion, student dentists sometimes encounter academic difficulty. It is important to familiarize yourself with the College's Academic Disciplinary Policies (Appendix B), and strive for academic excellence and success. If you are experiencing any problems in class or clinic, please seek guidance from the Office of Academic Affairs immediately. Failure to maintain satisfactory academic performance may lead to probation, and possibly suspension or dismissal from the College.

Academic Advisors

Advisor assignments are made when the student enrolls and students will usually meet with their advisor during Orientation. You are encouraged to get together with your advisor periodically to discuss your progress in the curriculum and your plans following graduation. Advisor changes may be made on request with the consent of the new advisor; contact the College Registrar in M-134 to make a change.

Academic Success Seminars

UKCD provides entering students with Academic Success Seminars on the learning and study strategies inventory (LASSI) and learning styles, active note taking, forming effective study groups, selecting main ideas and information processing, time management, and test taking strategies. A brief description of each seminar is provided below.

LASSI and Learning Styles

The LASSI and Learning Styles Seminar is a two-part seminar. The first part is focused on an overview of the LASSI, as well as how to interpret and use LASSI results to improve academic skill sets. The second part is aimed at providing students with an overview of different learning styles and how to connect one's learning style to the instruction they will be receiving at UKCD. Students are also given a learning styles assessment.

“Many graduate programs require more time management skills and different learning and study strategies than students have used before. Students often find themselves somewhat unprepared to balance everything. UKCD provides academic success seminars on the LASSI/Learning Styles, Forming Effective Study Groups, Effective Note Taking, Time Management, Selecting Main Ideas/Information Processing, and Test Taking Strategies/Testing Anxiety, as well as other topics upon request, to assist students in being full prepared for academic success in our program. All of these seminars, except time management, can be accessed here: <https://drive.google.com/folderview?id=0B6l-5qUZZPIOSDBfVUxhRmV0d28&usp=sharing>. The time management seminar is offered face-to-face at the beginning of school year and additionally, upon request.” If you need descriptions they are on the website here: <https://dentistry.uky.edu/resources>

UKCD also provides students with access to the learning and study strategies inventory (LASSI). The LASSI “. . . is on both covert and overt thoughts, behaviors, attitudes and beliefs that relate to successful learning and that can be altered through educational interventions. Research has repeatedly demonstrated that these factors contribute significantly to success in college and that they can be learned or enhanced through educational interventions such as learning and study skills courses,” (HH Publishing, 2014).

The LASSI is a 10-scale, 80-item assessment that measures a student’s learning and study skill sets, such as time management, concentration, information processing, and selecting main ideas. For a full list and description of each scale please visit HH Publishing’s LASSI Website at: <http://www.hhpublishing.com/assessments/LASSI/scales.html>

[After completing the assessment, students will receive a score report.](#) Students can learn more about how to interpret these results and improve their learning and study strategies through HH Publishing’s Webpage at <http://www.hhpublishing.com/assessments/LASSI/index.html> , as well as through UKCD’s LASSI and Learning Styles Academic Success Seminar

The LASSI is offered online through the UKCD Academic and Student Affairs Office. If you are a current dental student interested in taking this assessment, then please contact UKCD’s Student Affairs Officer, at 859-323-6071.

Mindful Meditation Courses and Offerings

“I found the course very beneficial. It provided me with the opportunity to take a step back and see the bigger picture, which really helps to put things into perspective in dental school...I’m very glad that I participated in the mindfulness course and have already recommended it to my classmates...,” shared UKCD student Austin Delpont.

Studies show that mindfulness, the skill of learning to pay attention without judgment to one’s present-moment experience, offers a way to improve a person’s well-being. Mindfulness-based techniques and tools have been proven to provide significant improvement with anxiety, stress, and mood issues. Students in the UK College of Dentistry (UKCD) are increasingly engaging in mindfulness training to feel better balanced and address these and other potential problem areas. [Read full UK Dental Students Becoming More Mindful article here.](#)

Resources

- Guided Meditations for Koru Mindfulness Courses; Koru Basic and Koru 2.0 - MP3 format
First Class: [Opening Meditation](#) / [Body Scan](#)
Second Class: [Opening Meditation with bell](#) / [Gatha](#)
Third Class: [Guided Imagery \(Adapted with permission form the Center for Mind Body](#)

[Medicine\) / Labeling Thoughts](#)

Fourth Class: [Labeling Feelings](#) / [Loving Kindness](#)

- [Koru website](#)
- Student sessions offered by KORU Mindfulness Teacher [Christine Harper](#), Assistant Dean for Admissions Student Affairs

Active Note Taking

During the Active Note Taking Seminar, students are provided with effective means for taking reading and lecture notes, as well as how to combine these notes for studying. Students are also provided with information on how to turn notes into study aids for exams.

Forming Effective Study Groups

The Forming Effective Study Groups Seminar is geared towards informing students about how to choose good study group members. Students are also provided with information on effective ways to prepare and run study group sessions.

Selecting Main Ideas& Information Processing

This seminar covers how to select main ideas from test and presentations, as well as how to efficiently and effectively process this information. Students will watch a short video, complete a selecting main ideas activity and participate in group discussions.

Time Management

Students will learn how to efficiently and effectively structure their daily lives, including personal, social, and school related activities. Student will participate in group discussions.

Test Taking Strategies/Coping with Test Anxiety

The Test Taking Strategies/Coping with Testing Anxiety Seminar is a two-part seminar. The first part is focused on providing students with different test taking strategies. The second part is focused on describing testing anxiety and its causes/symptoms, as well as on healthy and effective coping mechanisms.

Tutorial Assistance

The Offices of Academic and Student Affairs offer programs to help facilitate student success in the dental curriculum. Student dentists are employed by the offices as tutors for individuals seeking additional help in specific courses to improve their overall performance. In coursework that historically has been challenging for a number of students, study tables have been established for drop-in tutoring during those times. Study table schedules will appear on the google calendars and will be held during evening and weekend hours. Students should attend the tutoring group sessions first, if they feel they need additional, more individualized assistance, or believe you would benefit from more intensive tutoring; contact the Assistant Dean of Student Affairs in M-134. There is no charge to the student requesting tutorial services due to academic difficulties. Students are encouraged to utilize these services in a proactive manner.

In addition, being a tutor is a great job to consider while in the DMD program. Our student tutors are paid for their time and it is a great way to keep your mind fresh on previous coursework in preparation for boards. The Office will reach out to students based on previous performance in coursework, but if you are not contacted and would like to discuss the possibility of serving in the role, please contact the Assistant Dean of Students in M-134.

Career Planning and Counseling

Student dentists receive formal instruction in the investigation and development of career options and practice planning during all four years of the curriculum. Faculty and staff participate in counseling student dentists. The College maintains career resource information on the distribution of dental manpower and demographic data on all Kentucky counties; limited information regarding other states is also available. The College also provides counseling and placement referral services to student dentists and practitioners. Most individuals incur some indebtedness to help finance their dental education. Since the amount of educational loans received affects the career options available at graduation, debt management counseling is offered throughout the period of enrollment.

University Counseling Center: Consultation and Psychological Services

The UK Counseling Center provides counseling/therapy: for personal concerns [including alcohol and other drug use], in support of academic success [e.g., motivation and difficulty concentrating], and to address issues around life and career decision-making processes. Center services include individual, couples, and general group therapy, and there are several support groups and topic-specific groups on issues such as stress management, social confidence, and eating/body image concerns. The Counseling Center also offers psycho-educational outreach programs, consultation, training, suicide prevention, and community service to help students to succeed academically; develop and make progress toward life goals; and be productive members of the university and society. The Counseling Center is staffed by licensed psychologists and trainees from Clinical or Counseling Psychology doctoral programs. The Counseling Center often refers to the University Health Service [psychiatrists and other medical professionals], to the Academic Enhancement Program [for study skills and strategies], to the Career Center [to continue their career development], to the Disability Resource Center, to academic advisors, and to other campus/community resources as appropriate. To schedule an appointment, call (859) 257-8701 or go to 201 Frazee Hall to request an appointment in person. The UK Counseling Center is located on the second and third floors of Frazee Hall, on Administration Drive next to the Student Center.

Disability Resource Center

The goal of the Disability Resource Center is to provide equal access to students who are eligible. They advocate for reasonable accommodations, removal of barriers, and acceptance of different learning methods. In partnership with students, faculty, and staff, their purpose is to achieve an accessible educational environment where students with disabilities have an

equal opportunity to fully participate in all aspects of the university community.

Students with documentation of the following diagnoses should contact the Disability Resource Center:

- Attention Deficit/Hyperactivity Disorder
- Learning Disability
- Communication Disorder
- Neurological Disorder
- Psychological Disorder
- Visual Impairment
- Hearing Impairment
- Permanent Disability
- Temporary Disability
- Chronic Health Conditions

It is recommended that students contact the Disability Resource Center early to request specific assistance so that the required medical or psychological documentation can be reviewed and reasonable accommodations can be provided from the beginning of class work in order to achieve the greatest benefit to the student. For more information about documentation guidelines and specific requirements to providing accommodations to students, stop by or visit the website. The Disability Resource Center is located in the Alumni Gym, in room 2. For more information call 257-2754 or visit the website:

<http://www.uky.edu/StudentAffairs/DisabilityResourceCenter/documentation.html>

Additionally, please reference the College's information on disability resources (Appendix G)

Cheating, Plagiarism and Other Academic Infractions

Refer to the College of Dentistry Code of Professional and Academic Responsibility (see Appendix A) and the University's Student Rights and Responsibilities publication ([http://www.uky.edu/StudentAffairs/Code/.](http://www.uky.edu/StudentAffairs/Code/)) Students are provide the links to these policies at Orientation each year must sign a document at orientation to indicate they have reviewed these policies and are responsible to follow the procedures outlined therein to preserve their rights.

Attendance

Enrollment in a professional curriculum is often compared to full-time employment, and is very different from undergraduate education. Student dentists often attribute their success in the curriculum to the mindset that dental school is a full-time job. They also understand that work-life balance is essential to their overall success and well-being. Ensure your success by attending all classes and clinics. Attendance in classes and clinics is **mandatory**, unless excused by course directors, Associate Dean for Clinical Affairs and the Associate Dean for Academic Affairs. Additionally, even if there appears to be an open time on your schedule, last minute changes can and will occur. All clinical experiences are associated with courses and are part of the overall curriculum. When patient cancellations occur, students

will be expected to participate in an alternative clinical experience during that scheduled clinic time. It is the student's responsibility to understand that they are available from 8-5pm Monday through Friday unless the College is closed. The College has a detailed - *Absences Policy* (Appendix C: Miscellaneous Academic Policies- Policy One) which describes the procedures for requesting an excused absence.

See the University's *Student Rights and Responsibilities* publication, Part II, Section 5.2.4.2 if you have questions regarding excused absences. The website: <http://www.uky.edu/StudentAffairs/Code/> then select Part II.

Tardiness

Tardiness is disruptive to the students and lecturer. Repeated tardiness will not be tolerated. Course directors have the option of incorporating a "tardiness" policy with appropriate ramifications in their course syllabus. It is the course director's prerogative to determine what constitutes a tardiness and when "being late for class" constitutes an absence. The lecturer or course director has the authority and responsibility to deal with discipline issues.

University Closing

The College's clinical operations remain open during emergency delays or closings. Academic classes and seminars are suspended along with other UK classes when a cancellation or delay of classes is announced. See Appendix D: Inclement Weather Emergency Closing Operation.

UK Alert System

The University of Kentucky has an emergency notification system, UK Alert, to communicate official information during an emergency or crisis situation that disrupts normal operation of the campus or threatens the health or safety of members of the campus community. Interested students may self-subscribe through the website. Users may enter as many devices (i.e., e-mail, phone, and fax) as they would like to receive notifications. Visit the website to sign up: <http://www.uky.edu/EM/UKAlert/>

Classroom Decorum

Scholarly behavior is a necessary outcome in all professional coursework. The classroom demands certain behavior that creates the **decorum** in the classroom, with one important ingredient being **civility**. Scholars (faculty and students alike) expect a certain degree of respect from other scholars regardless of the similarity or divergence of viewpoint and irrespective of age or experience. If students demonstrate any disrespectful or disruptive behavior, such as talking in class, sleeping, text-messaging, reading non-class-related material, tardy arrivals, or failing to turn off a cell phone, it is the prerogative of the instructor to ask the student to leave the classroom, laboratory or clinic. The definition of disruptive behavior will be at the course director or faculty's discretion. They may also elect not to give credit for classroom participation for that day. Penalties for disruptive behavior, absences or tardiness may also be found in course syllabi. In addition, if the behavior is severe, the Code of Student Conduct (Appendix A) may be invoked.

Restricted Exam Policy

Each course director will determine if an exam is restricted (copies not to be circulated). Students must consult the course director if they come into possession of an old exam which they know or believe to have been restricted. Possession and use of restricted examinations is a violation of College policy and is considered cheating and will be prosecuted under the College's Code of Professional and Academic Responsibility. See Appendix A: College of Dentistry Code of Professional and Academic Responsibility.

Part-time Employment

Attending dental school is your **primary** responsibility. Consequently, outside employment is strongly discouraged, especially during the first year. Students who need additional income should first consult the College's Financial Aid Coordinator (D-155), for information regarding further financial aid including work-study.

Professional Appearance

The Clinical Dress and Professional Appearance Policy are designed to provide a standard of dress and appearance appropriate for College of Dentistry personnel in clinic and reception areas. Information regarding this policy will be provided to student dentists, faculty and staff during the clinic orientation. The policy will apply whenever care is being provided in the clinics. Student dentists are expected to adhere to the "dress code" whenever they are "in clinic" whether treating patients, in preclinical courses, seeking assistance from faculty or removing items from lockers. Student dentists are expected to wear surgical gowns when treating patients and are **strongly** encouraged to wear scrubs under the gown. Hair must be clean and well-maintained to insure that it is not in the patient's face during care. Accordingly, long hair must be tied back and pinned back. Men are expected to be either clean-shaven or have facial hair that is well maintained to convey a professional appearance. Student dentists will be counseled if personal attire or appearance in classes/clinics is considered "unprofessional" as adherence to this policy is expected. More details regarding this policy may be found in the UKCD Clinical Manual.

UK Tobacco-Free Initiative In November, 2007, Michael Karpf, MD, Executive Vice President for Health Affairs, announced that UK HealthCare had joined the Kentucky Hospital Association's Tobacco-free Healthcare Collaborative. This group of health care providers in Lexington and surrounding communities worked together to implement tobacco-free policies and committed to going completely tobacco-free in conjunction with the Great American Smoke out. UK HealthCare went tobacco-free on November 20, 2008. The entire UK campus became tobacco free on November 19, 2009.

Technical Standards

The College has approved a policy that defines the non-academic criteria for admission into, continued enrollment in, and graduation from the Doctor of Dental Medicine program. See Appendix E: Policy on Technical Standards for Dental Students.

UK/UK HealthCare Fitness for Duty Evaluations

Impaired workers pose unnecessary and unacceptable safety and health risks to themselves and others with whom they work. Impairment also poses a threat to the well-being of UK College of Dentistry patients and visitors. The Fitness for Duty Evaluation Policy (Appendix F) has been developed to promote a safe working environment for all UK College of Dentistry members, to provide patients with quality patient care and related services and to assist UK College of Dentistry members in receiving appropriate assessment, counseling, referral and treatment for alcohol and drug abuse and other problems that may adversely affect satisfactory job performance.

The University of Kentucky College of Dentistry has adopted the UK HealthCare Policy #A09-005 (Fitness for Duty Evaluations) as its Fitness for Duty Evaluations Policy which may be accessed via the link below:

<http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyID=928>

UK College of Dentistry Results and Personnel Action addendum to UK HealthCare's Policy #A09-005:

UK College of Dentistry dentists and dental hygienists will be referred to the Kentucky Board of Dentistry's Well Being Committee when fitness for duty issues arise. Students will be referred to the College of Dentistry's Office of Admissions and Student Affairs for "prophylactic monitoring" with positive background check indicating past DUI or other alcohol/drug related offenses or when fitness for duty issues arise. Non-clinicians and staff members will be referred to the University of Kentucky Employee Assistance Program as indicated in the UK HealthCare's Policy #A09-005.

Clinic Standards

Please see the current Clinic Manual located on the College of Dentistry website:

<https://dentistry.uky.edu/sites/default/files/ClinicManual2015-16.pdf>

Textbooks/Bookstores

The textbook list is distributed at Orientation. If requested by your class president, a spring booklist update can be sent out before the winter holiday break. The UK Student Center Bookstore and Kennedy Bookstore will also have the student booklists. The textbook list is generated by the Curriculum Office (D-155).

Frequently Called Telephone Numbers and Helpful Websites:

Office of the Dean	323-1884	
Office of Student Affairs	323-6071	http://Dentistry.uky.edu/current-students
Office of Academic Affairs	323-5656	http://Dentistry.uky.edu/academic-programs
College Registrar	323-6691	
Curriculum and Scheduling	323-3230	
Clinical Affairs	323-5876	http://Dentistry.uky.edu/patients
Student Health Center	323-2778	http://www.ukhealthcare.uky.edu/uhs/
Campus Computer Helpdesk	218-4357	http://www.uky.edu/UKIT/
Medical Center Information Systems (MCIS)	323-8586	http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyManual=10&PolicyID=835
Medical Center Security	323-2356	http://www.uky.edu/Police/healthcare-security.html
Medical Center Library	323-5300	http://www.uky.edu/Libraries/lib.php?lib_id=12
Parking	257-5757	http://www.uky.edu/pts/
UKCD Absence Notification		http://Dentistry.uky.edu/absence-notification
UKCD homepage		http://Dentistry.uky.edu
UK homepage		http://www.uky.edu/

Academic Affairs Curriculum, Evaluation and Promotion

Curriculum

The University of Kentucky, College of Dentistry, in meeting its responsibility to the Commonwealth, the University, the dental profession and the student, is dedicated to the education of a dentist who meets defined levels of skills and knowledge and has demonstrated ethical behavior and judgment that will benefit the public. The content and sequencing of the curriculum is maintained so that students should be able to complete the curriculum satisfactorily in four years and be awarded the degree of Doctor of Dental Medicine (D.M.D.).

The College of Dentistry offers a curriculum that prepares the student for the general practice of dentistry. Since the health needs of Kentucky and the nation are constantly changing, an effective curriculum in dentistry requires relatively frequent revision of courses and

requirements. For this reason, the curriculum described in this bulletin is subject to change from year to year, not only in content and sequencing but also in the educational methodology utilized.

The dental curriculum is composed of four categories of study: biological sciences, behavioral science, preclinical dentistry, and clinical dentistry. Courses in these areas may be taught by lecture, seminar, self-instruction or any combination of the above formats. Laboratory and clinical settings provide supplemental learning experiences for the didactic information which the students receive.

In the clinical setting, students treat patients under the supervision of the clinical faculty. Comprehensive dental care for the patient is emphasized and so, because of the varying needs of individual patients, the objectives of each clinical treatment experience by each student will vary. The concept of comprehensive dental care permits learning experiences in all the clinical disciplines of dentistry.

Students, faculty and staff of the College of dentistry are expected to adhere to the Code of Professional and Academic Responsibility, and the Medical Center's Behavioral Standards in Patient Care, and Health Care Colleges Code of Student Professional Conduct. These documents call for high standards of professional and human behavior in caring for patients.

Extramural experience in dental practice is a required component of the curriculum. Students are placed in the offices of dental practitioners, public institutions or other health delivery systems in AHEC approved urban and rural areas throughout the state of Kentucky. One of the goals of the extramural experience is to provide the student with a view of dentistry as it is actually practiced.

In addition to the core, or required curriculum, the College offers a number of elective courses in a variety of biological and clinical dentistry subjects. Electives provide an effective way to satisfy the individual needs and interests of the students. Fourth-year students are required to take two elective courses. Enrollment in additional elective courses requires the approval of the course director and the appropriate Academic Performance Committee.

During the course of study, any student may be denied permission to continue in the formal educational program if, in the opinion of the faculty and administration, that student's character, attitudes, mental or physical fitness cast grave doubt upon the student's capabilities as a dentist. The Doctor of Dental Medicine degree is awarded to those students who have satisfactorily completed every required component of the dental curriculum and have applied for graduation.

Below is the current listing of courses by year; for a more detailed description, please see

Appendix I

First Year

Course Design.Title

ANA 530	Combined Histology and Special Oral Microanatomy (5)
ANA 534	Dental Gross Anatomy and Embryology (6)
ANA 538	Dental Neuroanatomy (2)
CDE 814	Patients, Dentists and Society I (1)
CDE 815	Fundamentals of Dental Public Health (2)
CDS 812	Normal Human Growth and Development (1)
CDS 815	Introduction to Clinical and Community Practice (3)
CDS 813	Management I: Introduction to Management for the Dentist (2)
CDS 818	Profession of Dentistry I (1)
CDS 819	Special Topics in Dentistry (1)
OBI 812	Dental Biochemistry (6)
OBI 814	Dental Physiology (5)
ODM 810	Basic Principles in Oral and Maxillofacial Radiology (2)
ODM 814	Oral Diagnosis/Oral Medicine and Treatment Planning (2)
PER 810	Periodontics I (1)
PER 820	Periodontics II (3)
RSD 810	Fundamentals of Integrated Operative Dentistry I (3)
RSD 811	Principles of Dental Anatomy, Morphology and Occlusion Lecture (3)
RSD 812	Principles of Dental Anatomy, Morphology and Occlusion Laboratory (3)
RSD 813	Dental Cariology (1)
RSD 814	Preclinical Operative Dentistry I (2)
RSD 822	Principles of Dental Occlusion and Articulation (3)
RSD 827	Dental Biomaterials (2)

Second Year

Course Design.Title

CDE 824	Communication in the Dental Health Care Setting (1)
CDS 821	Local Anesthesia (1)
CDS 822	Gerontology/Geriatric Dentistry (1)
CDS 823	Management II: Introduction to Clinical Patient Management (1)
CDS 824	Introduction to Oral Diagnosis and Treatment Planning (2)
CDS 828	Profession of Dentistry II (1)
END 820	Anterior Endodontics (2)
END 822	Posterior Endodontics (2)
OBI 828	Immunity, Infection and Disease for the Student Dentist (6)
ODM 820	Oral and Maxillofacial Radiology and Diagnostic Imaging (2)
ODM 821	Clinical Oral Diagnosis I (1)
OPT 820	General Pathology for Student Dentists (3)
ORT 822	Orthodontics (3)
OSG 820	Oral Surgery I (1)
PDO 822	Pediatric Dentistry I (2)
PER 821	Clinical Periodontics II (2)
PRO 820	Preclinical Complete Denture Prosthodontics Lecture (2)
PRO 821	Clinical Complete Denture Prosthodontics (1)
PRO 822	Preclinical Complete Denture Prosthodontics Laboratory (2)
PRO 824	Removable Partial Dentures (2)
RSD 821	Clinical Restorative Dentistry I (3)
RSD 823	Preclinical Restorative Dentistry II (1)
RSD 824	Preclinical Restorative Dentistry II (2)
RSD 825	Preclinical Restorative Dentistry II (1)
RSD 826	Preclinical Dentistry II Laboratory (2)
RSD 827	Dental Biomaterials (2)

Third Year

Course Design.Title

CDE 830	Advanced Concepts in Dental Public Health (1)
CDS 831	Conscious Sedation (1)
CDS 833	Management III: Clinical Patient Management (1)
CDS 835	Dental Implantology (2)
CDS 846	Diagnosis and Management of Facial Pain (3)
END 830	Endodontics II (1)
END 831	Clinical Endodontics II (1)
OBI 836	Dental Pharmacology (3)
ODM 830	Management of the Medically Compromised Patient (3)
ODM 831	Clinical Oral Diagnosis II (1)
OPT 830	Oral Pathology I (3)
OPT 832	Oral Pathology II (1)
OPT 840	Oral Pathology III (1)
OSG 830	Oral Surgery II (1)
OSG 831	Oral Surgery Rotation I (1)
PDO 831	Clinical Pediatric Dentistry I (2)
PDO 834	Pediatric Dentistry II (2)
PER 830	Periodontics III (2)
PER 831	Clinical Periodontics III (2)
PRO 830	Advanced Removable Prosthodontics (1)
PRO 831	Clinical Removable Prosthodontics (2)
PRO 834	Preclinical Restorative Dentistry III (4)
PRO 836	Advanced Fixed Prosthodontics and Treatment Planning (2)
RSD 827	Dental Biomaterials (2)
RSD 831	Clinical Restorative Dentistry II (4)
RSD 835	Advanced Esthetics in Restorative Dentistry (2)

Fourth Year

Course Design.Title

CDE 841	Dental Practice and Field Experience (6-10 variable)
CDE 844	Dental Practice Management II (4)
CDS 843	Management IV: Clinical Patient Management (1)
CDS 844	Drug Misuse, Abuse and Dependency: What Dentists Need to Know (1)
END 841	Clinical Endodontics III (1)
ODM 841	Clinical Oral Diagnosis III (1)
ORT 841	Clinical Orthodontics (1)
OSG 841	Oral Surgery Rotation II (1)
PDO 841	Clinical Pediatric Dentistry II (4)
PER 841	Clinical Periodontics IV (4)
PRO 841	Advanced Clinical Removable Prosthodontics (2)
RSD 840	Restorative Dentistry Update (1)
RSD 841	Clinical Restorative Dentistry III (3)

Evaluation and Grading

Students have the right to receive grades based only upon a fair and just evaluation of their performance in a course as measured by the standards announced by their instructor(s) at the first or second class meeting of each course. This information should also appear in the course syllabus (i.e. nature of the course, the content, the activities to be evaluated, the grading practice to be followed, and the attendance policy). Evaluations by anything other than a good faith judgment based on explicit statements of the above standards are improper.

Approved by the University Senate on November 8, 1999, the grading system (A, B+, B, C, and E plus I, W, and P/F) applies to all students. Questions regarding policies may be directed to the Associate Dean for Academic Affairs, 323-5656.

Course Directors will evaluate the performance of each student on course objectives and assign a grade as follows (Appendix C, Policy Five):

1. Passing Grades:

- A = Exceptionally high level of performance;
four (4) quality points are awarded for each credit hour.
- B+ = A high level of performance; three and one-half
(3.5) quality points are awarded for each credit hour.
- B = The minimum expected level of performance;
three (3) quality points are awarded for each credit hour.
- C = A marginal level of performance; two (2.0) quality
points are awarded for each credit hour.
- P = A passing grade in courses taken on a pass-fail basis.
It is not used in G.P.A. calculations.

2. Failing Grades:

- E = An unacceptable level of performance; zero (0) quality
points are awarded for each credit hour.
- F = Represents an unacceptable level of performance in
courses taught on a pass/fail basis. It is not used in G.P.A. calculations.

3. Incomplete Grade:

- I = Course objectives have not been completed during the allotted course time due to
circumstances usually beyond the student's control. An I grade shall be given only
when there is a reasonable possibility that a passing grade will result when work is
completed. An I must be replaced by another grade within 12 months or before
graduation, whichever occurs sooner. After this period, an I grade will
automatically convert to an E or an F grade as appropriate.

Please Note: A written report must accompany the I grade. The report shall include the reasons for issuing the "I" and the work that the student must complete to receive a

passing grade.

4. Withdrawal:

W = This grade will be awarded to a student who withdraws from a course or from the College. It shall be awarded only after recommendation by the Academic Performance Committee and approval by the Dean.

Please Note: The college does not permit withdrawal from specific required courses, but rather permits “leaves of absence”, allowing withdrawal from all courses during the involved instructional period.

Appeal of Course Grade

1. A student, before requesting a grade review, will attempt to resolve the issues with the course director and the Division Chief (or next administrative level, should the course director also be the division chief).
2. Should this meeting fail to resolve the issue, the student may submit a written request to the Dean of Academic Affairs for the formation of a Grade Review Committee. This request shall include an explanation of reason for the request. The student is not bound to exercise this in-house process.
3. Within five (5) working days of the request, the Dean of Academic Affairs shall appoint a Grade Review Committee that will consist of three (3) voting members (two neutral members of the College faculty and one neutral student). The Dean will designate one of the committee members Chairperson of the Committee.
4. The committee shall meet within ten (10) working days of its formation of the Committee. The student, the student’s advisor, the department chair, the course director and any other persons having information relevant to the case in question will be requested to attend the meeting, at which time, the situation will be fully discussed by all parties concerned. Following this open discussion, the Committee will make a recommendation to the department chair and the course director involved. This appeal recommendation is non-binding and the Committee will not have the prerogative of changing the grade.
5. If the student grade review continues to be unresolved, the student may file a grievance with the Academic Ombudsman regarding academic evaluation as described in 6.0 Section VI Student Academic Affairs of the Universities Student Rights and Responsibilities Handbook. <http://www.uky.edu/StudentAffairs/Code/>

Unsatisfactory Examination Grades

Students, who receive an unsatisfactory grade on any exam, including practical exams, are expected to make an appointment with the course director to discuss a plan of action. Students are expected to be very proactive in dealing with academic difficulties.

Academic Ombud

When students are unable to resolve grievances or complaints at the College level, the Ombud will be able to counsel and advise him/her on the University procedures to follow. All inquiries are treated with discretion. Students are encouraged to begin resolving an academic grievance or complaint by contacting the faculty member, advisor, Division Chief, Chair of the Department, Associate Dean for Academic Affairs, Assistant Dean of Admissions and Student Affairs, or the Dean. Examples of grievances could include a dispute over a final grade, or inconsistent application of policy standards as stated in the syllabus. The Academic Ombud may be contacted at 109 Bradley Hall • (859) 257-3737 • Confidential FAX 859-257-5346 • Email: ombud@uky.edu ; Hours are 8:00 a.m. to 5:00 p.m., Monday through Friday. Walk-in visits are welcomed at any time. Call-in and e-mail inquiries are encouraged too. Often speaking with the well-qualified and helpful Ombud Office staff can resolve a problem, and an appointment with the Ombud isn't even necessary.

Academic Performance Committee (APC)

The University of Kentucky College of Dentistry Academic Performance Committee is comprised of four subcommittees. Each subcommittee includes an APC Chair, course directors for the specific year of the curriculum and team leaders (years 2-4). In addition, the Associate Dean for Academic Affairs and the Assistant Dean of Admissions and Student Affairs are members of all four groups. This is a proactive committee that meets periodically to keep abreast of student progress. The members attempt to identify, as early as possible, problems or potential problems in student performance in order to provide assistance to help the student succeed in the curriculum.

Academic Promotion

Students will be promoted to the next year in the curriculum when they have successfully completed all required courses and competency evaluations scheduled for that year. A course retake is necessary for any course in which a final unsatisfactory grade was received (a course may be substituted for the retake at the Associate Dean for Academic Affairs' discretion). The student will be expected to repeat the course during the next academic year unless other arrangements have been made, providing he/she is not subject to Academic Suspension or Dismissal. This may result in the student not advancing to the next level of courses in the curriculum and either repeating the entire academic year or being placed on a special curriculum, depending on the individual's circumstances. The student's graduation may also be delayed. In accordance with the College's educational philosophy of comprehensive care, successful completion of all preclinical courses is required for students to proceed into more advanced clinical course work.

Graduation Policy

In the absence of extraordinary circumstances, a student will be eligible to participate in commencement when all of the following conditions are met are met:

1. the student has at least a 2.75 cumulative GPA;

2. course directors believe that it is likely that the student will have successfully completed all on-going courses within 30 days of commencement;
3. the student has passed Part 1 of the National Board Dental Examination (NBDE);
4. the student has taken Part 2 of the NBDE;
5. the APC believe that all terms of probation will be satisfied within 30 days of commencement

See Appendix C: Miscellaneous Academic Disciplinary Policies.

Post-graduation Clinic Usage Fee

Graduation is annually held on the second weekend in May. Students are permitted to complete work in the clinic up to the end of the month, May 31st. After that point, students who have not completed their work and need to be in the clinic will be charged a \$100 per day clinic usage fee. In addition, since these requirements would be tied to a course, a delay after May 31st, could also impact the timing of your diploma, in turn, impacting licensure. As a reminder, please be proactive in working with the Academic Dean, Team Leaders and your Course Directors to assure you are on track to complete all requirements in a timely fashion, before graduation. (Students that may be graduating in December or August, please consult the Registrar and/or Academic Dean for the date by which all work needs to be completed in order to not incur a fee or impact your diploma).

National Boards and Licensure Examinations

National Board Dental Examinations

The purpose of the National Board Dental Examinations is to assist state boards in determining qualifications of dentists who seek licensure to practice dentistry. These examinations assess both the candidate's knowledge of basic biomedical and dental sciences and the cognitive skills to apply such information in a problem-solving context.

National Board Dental Examinations are electronic exams, composed of multiple-choice test-item and are administered in two parts.

Part I:

Part I is taken in summer after two years of dental school, before third year classes begin. It consists of a "comprehensive computer-based examination" that is administered in one day. The comprehensive Part 1 is comprised 400 multiple choice items which are evenly distributed across the following topical areas:

Anatomic Sciences, Biochemistry-Physiology, Microbiology-Pathology, Dental Anatomy and Occlusion

Approximately 20% of the items are grouped in testlets with interdisciplinary focus and

clinical application. Approval to take the examination is given by the Associate Dean for Academic Affairs once all prerequisite coursework has been satisfactorily completed.

Part II:

Part II may be taken after successful completion of the third-year curriculum. Taking the exam is a requirement for graduation, and the first attempt at taking the exam should be achieved by mid-January of the 4th year, in order for the student to be approved for graduation by the APC. Component A is a Discipline-Based Component (400 items) derived disproportionately from Endodontics, Operative Dentistry, Oral and Maxillofacial Surgery / Pain Control, Oral Diagnosis, Orthodontics / Pediatric Dentistry, Patient Management, Periodontics, Pharmacology, and Prosthodontics. Component B features a Case-Based Component (100 items, approximate distribution of 70% adults and 30% children), based on an individual patient's history, dental chart, radiographs and clinical photographs. A minimum of 15 percent of Component B will address compromised patient management.

Approval to take the examination is given by the Associate Dean for Academic Affairs once all prerequisite coursework has been satisfactorily completed.

Licensure

The Kentucky Board of Dentistry issues dental licenses under laws adopted by the state legislature. Specific licensure requirements vary among states/jurisdictions, but all have three types of requirements: 1) an educational requirement, 2) a written examination requirement, and 3) a clinical examination requirement. All jurisdictions recognize graduates of dental schools accredited directly by the Commission on Dental Accreditation (CODA) as having fulfilled the educational requirement. The written requirement may be satisfied by passage of Parts I and II of the National Board Examination in dentistry administered by the Joint Commission on National Dental Examinations. Documentation of credentials needed for licensure **will not** be provided to the Board of Dentistry until a graduating student has checked out of the College (i.e. has fulfilled all obligations to the institution and his/her patients). Our College Registrar assists with the documents needed for dental licensing in the State of Kentucky and other Dental Boards around the country. The Registrar is a Notary and can assist with notarizing documents. If you have questions, please contact the Registrar at (859) 323-6691.

Please Note: It is the responsibility of the student dentist to understand the licensing requirements in the state(s) he/she intends to practice dentistry. Contact the respective board of dentistry to learn more about licensing requirements.

Mock Board Exam

During the fourth year, all students must successfully pass a Mock Board competency exam. This is an examination given in similar format to the Regional Board exam needed for state licensure and provides opportunity for students to prepare for their board licensure examinations.

Regional Board Examinations

Clinical examinations are conducted by individual state boards of dentistry or by regional dental testing agencies. The University of Kentucky College of Dentistry offers examinations under the auspices of the Southern Regional Testing Agency (SRTA) and the Western Regional Examining Board (WREB) licensing exams, usually in the spring of the fourth year. The WREB exam is hosted alternately by UK or University of Louisville every other year, this year, WREB will be held at UK (2015). Students wishing to take these examinations must be approved to do so, based on completion of an adequate portion of the clinical curriculum. Successful candidates for the exams must complete all other licensure requirements; including passing both parts of National Boards and graduation within a designated time of clinical board examination passage, or the results are invalidated.

Students wishing to take these examinations must be approved to do so, based on completion of an adequate portion of the clinical curriculum. Successful candidates for the exams must complete all other licensure requirements; including passing both parts of National Boards and graduation within a designated time of clinical board examination passage, or the results are invalidated.

Please Note: It is the responsibility of the student dentist to understand the licensing requirements in the state(s) he/she intends to practice dentistry. Contact the respective board of dentistry to learn more about licensing requirements.

Curriculum

Curriculum Evaluation

In compliance with policies of the Commission on Dental Accreditation, the curriculum is regularly evaluated by dental students and the Curriculum Committee. A written report of the results is then submitted to the Associate Dean for Academic Affairs, the Curriculum Committee, the appropriate department chair, division chief, and the course director. In addition, focus groups consisting of a sampling of members of each class will be conducted on a regular basis. All students **must** complete all course evaluations online prior to the deadline established by Academic Affairs. The evaluations must be completed at the end of the fall semester and before checking out for the summer. Not only are these evaluations mandatory, to retain accreditation they form the basis for changes made to assure continuing quality enhancement of the curriculum. Students who fail to comply with the current course evaluation policy may not be registered for subsequent coursework until the required course evaluations are completed.

Elective Courses

Elective courses are designed to enrich and customize the dental curriculum. All students must complete two elective courses prior to graduation. A list of courses will be distributed near the beginning of the academic year. Although only two elective courses are required,

some students may be allowed to take additional elective courses with the approval of the APC and the course director. Electives cannot conflict with the regular curriculum schedule. Students will be instructed when and how to register for these courses. All elective courses use the Pass/Fail grading system.

Offsite Volunteer Electives

Students must be registered in a course to participate in offsite activities in order for the college's professional liability coverage to be in place. Students may not participate in clinical activity not endorsed by the College of Dentistry. Operating without professional liability insurance places a student in the position of potential *substantial* personal financial liability.

Student Class Schedules

Class Schedules are prepared by the Office of Academic Affairs. Class schedules are available on UK's Google apps for education, and can be accessed using your g.uky account. In addition, schedules will be accessible via published web links and on the UKCD website. These digital calendars are subject to change and are never 'final'. Always check the daily calendar as well as the course syllabi for information regarding class dates, times and locations. Any discrepancies should be reported immediately to the Office of Academic Affairs. The College academic calendar lists official holidays and events. See Appendix H: College of Dentistry Academic Calendar.

Please Note: It is the responsibility of each student to check for changes as students are expected to be available for classes between the hours of 8 a.m.-5 p.m. and any other specifically instructed hours. Going to dental school is your occupation for the four years that you are enrolled in UKCD. Last minute additions to the schedule should be expected, and failure to check the schedule and attend all classes, even late additions, will be considered an unexcused absence (unless the reason for missing class falls into the definition of an excused absence as defined in the University's *Student Rights and Responsibilities* publication, Part II, Section 5.2.4.2).

Exam and Class Date Change Policy

Changes in exam and class times are strongly discouraged because class space and faculty responsibilities are considered when original schedules are developed. Requests for change must be related to true academic hardship caused by the schedule. The Associate Dean for Academic Affairs will determine if changing exams or classes is an option. When a course director needs to change a scheduled exam or class, that is the course director's prerogative, and such requests are also directed to the Associate Dean for Academic Affairs.

If the Associate Dean for Academic Affairs considers a change valid, the class of students desires to change the date or time of a class or examination, the class must:

1. Discuss the change with the entire class and course director and identify tentative dates for rescheduling. The Class President or Vice President then discusses the tentative

dates/times/room availability with the Academic Dean and support staff in the Office of Academic and Student Affairs.

2. Obtain, by ANONYMOUS BALLOT, votes to change the exam or class. If 5 or less negative votes are returned, the class can discuss the change options again, and a re-vote may occur. However, it is improper and unprofessional for class members to pressure classmates and faculty who do not agree to proposed changes in scheduled examinations or classes.
3. Once **unanimous** agreement has been reached, obtain signatures from all students on class roster and complete the Exam or Class Date Change Form, including the course director's signature.
4. Submit completed form and roster to the Associate Dean for Academic Affairs at least 24 hours prior to the requested change and requests room reservation.

Please Note: The Course Director and Academic Dean are responsible for final approval.

Criteria for Changing Exams/Classes

1. Multiple exams in one week (usually more than three major exams, does not include quizzes and other assignments)
2. Course director requests the change and submits change request in the same course
3. Any subsequent exam/class date changes must have **prior** approval by the Associate Dean for Academic Affairs (see above)
4. Only individual class or exam times and dates will be changed, not multiple class meetings
5. A minimum of 24 hours' notice is required for a class or exam already scheduled to be changed.

Other Required Activities

Periodically throughout the academic year, students are **required** to attend and participate in various professional seminars, lectures, meetings, conferences, or other activities that contribute to their professional education. These may be locally or at locations within a reasonable driving distance (they will appear on the student's schedule and the students will be notified by e-mail or in writing if attendance is required). The same absence/tardiness policy applies to these instances as in any scheduled course in the curriculum. Excused absences from these types of activities must be approved by the Associate Dean of Academic Affairs prior to the absence. The Office of Admissions and Student Affairs must be contacted as well. See the University's *Student Rights and Responsibilities* publication, Part II, Section 5.2.4.2. Visit the website: <http://www.uky.edu/StudentAffairs/Code/>

Extramural Experience

• Required Extramural Experience

The required extramural experience occurs either during the summer, following the third-year or during the fall of the fourth-year under the course CDE 841: Dental Practice and Field Experience. The four (4) week extramural program is designed to help the student dentist

develop awareness and better understanding of dental health problems in underserved areas as well as a positive attitude and willingness to contribute to the solution of such problems. Students spend an average of forty (40) hours each week participating in patient treatment under the supervision of a dentist who is an adjunct faculty of UKCD. At the end of the course the student dentist will understand different primary dental health care service modalities available to underserved populations. Potential sites include community health centers, hospital-based dental clinics, Indian Health Services (IHS) facilities, private practices, and others. Placements in Kentucky's AHEC regions at primary care centers or practices are a priority. Most of the extramural sites will be located in rural Kentucky. Under special circumstances student dentists are placed in urban areas or other states. The course director meets with the students during the third year to initiate the placement process.

- **Elective Extramural Experience**

Students may enroll in CDE 850, "Individualized Externship" with the approval of the course director and the APC. This experience is completed on evenings, weekends and holidays during the summer or the academic year. This course may be taken for a maximum of 10 credit hours depending on the length of time spent in the experience. This course does not replace the required extramural experience CDE 841.

Research Opportunities

Student Research

One of the College of Dentistry's major goals is to conduct biological, clinical, behavioral, and health services research that will lead to the discovery and application of new knowledge, provide an opportunity for research training for doctoral and postdoctoral students, and enhance the climate of scholarship within the College and Medical Center. We actively encourage students to participate in research projects during their stay in the College and give academic credit for this participation through a series of elective courses. Most of the research currently under way in the College falls into several broad categories:

- infection and inflammation as related to oral diseases
- biomaterials and dental devices
- oral disease prevention in children and the elderly
- oral health related to general health, particularly in pregnancy, cardiovascular disease, and diabetes
- health services research for oral health disparities, targeting oral health care delivery and oral health care education
- salivary biodiagnostics

Students are actively involved in all of these research areas. Students also are active in a formal Student Research Group, and compete for College-sponsored Student Research Fellowships.

The College's research program is productive, as evidenced by the number of scientific papers presented by students and faculty at various local and national dental research meetings, and the number of papers published in scientific journals. The College and the local chapter of the American Association of Dental Research annually sponsor a series of lectures and seminars that bring world-renowned researchers to the College to discuss their work.

We strongly believe that an active and dynamic research program benefits both students and faculty by improving the educational climate of the College, and ultimately benefits the citizens of Kentucky and the nation by contributing to the overall improvement of society. We strive hard to make this belief a reality.

UKCD Research Track

Incoming UK College of Dentistry students interested in taking part in an intensive research experience in conjunction with their dental curriculum have the option of applying for the UK College of Dentistry Research Track program of study. Students do not need to apply to the Research Track in order to perform research while in dental school. In many cases, students participating in the Research Track will look to pursue an academic career. In addition to completing required courses for the DMD degree, selected students will also focus their efforts on one or more UK College of Dentistry research focus areas. Students enrolled in the Research Track option will gain valuable experience in research, have the opportunity to take part in meaningful studies, and receive scholarship funds to help offset UK College of Dentistry tuition fees each year they participate in, and fully meet Research Track requirements. To apply to the Research Track, incoming dental students must include a completed Research Track application with their acceptance materials. Website: <http://Dentistry.uky.edu/research>. For more information, contact Dr. Saran Huja (859) 323-4197.

Registration for Research Electives OHP 850/OHS 850

To receive credit for research in either OHP850 or OHS850, students must receive prior approval from the course director and the APC committee. Students must write a brief explanation of the research to be conducted. This should be signed by the student's research mentor and the course director. The signed document must be submitted to the College Registrar, (M-134) two weeks in advance of the academic term and after the course director and the APC approve the student to receive credit. Appropriate credit hours will be given depending on the amount of time spent by the student in the activity (1-3). Exceptions must have approval from the course director. Students are allowed a maximum of 12 credit hours for these courses or selective course work.

Assurances

All student dentists must demonstrate that they are qualified to participate in patient care by providing the following assurances:

Student Criminal Background Check Policy University of Kentucky Chandler Medical Center

All conditionally admitted applicants must consent, submit to, and satisfactorily complete a criminal background investigation as a condition of matriculation into UK health professions programs in the *Colleges of Medicine, Dentistry, Pharmacy, and participating programs in Health Sciences and Nursing*. Enrollment will not be final until the completion of the criminal background check with results deemed acceptable to the applicable college/program. All expenses associated with the CBC are the responsibility of the applicant/student, either directly or through arrangements with an appropriate centralized application service. Students, who do not consent to the required background check, refuse to provide information necessary to conduct the background check, or provide false or misleading information in regard to the background check will be subject to disciplinary action up to, and including, refusal of admission or dismissal from the program. The full version is available online under *Health Care Colleges Documents*:

http://www.uky.edu/Provost/APFA/Policy_Protocol/

Basic Life Support (BLS) Requirement

All students must maintain current **Healthcare Provider Basic Life Support** certification from the beginning to the end of the academic year. BLS has been scheduled as part of clinical courses in the first and third years. If a student can provide proof of Healthcare Provider BLS certification (may include instructor or higher status) by the American Heart Association for **the entire academic year and subsequent years**, he/she may be excused from taking the dentistry course. Proof of the Health Provider BLS certification must be verified by the Quality and Safety Manager, Office of Clinical Affairs M-127, and 323-9667.

Immunizations

All students involved in clinical activities in academic programs at the University of Kentucky are required to be immunized for Hepatitis B, Varicella (Chicken Pox), Measles, Mumps, and Rubella (MMR) and Tetanus, Diphtheria, and Acellular Pertussis. An annual Tuberculosis (TB) skin test is also required. UK HealthCare has made the influenza vaccine a requirement beginning Fall 2014 for everyone working, doing clinical rotations, or volunteering. There is a declination clause for medical or religious reasons.

Please note: INCOMING STUDENTS – must be in compliance with University of Kentucky Prematriculation Requirements. Additional requirements include Meningitis vaccination for students living in UK residence halls and documented Polio immunity:

<http://ukhealthcare.uky.edu/uhs/>

Students are encouraged to have all immunizations prior to initial enrollment. However, immunizations are available for students through the University Health Service (UHS) once you are enrolled. Appointments are necessary and may be made by calling 323-2778. Failure to comply will result in the loss of your privilege to treat patients or to engage in other clinical activities.

Financial Considerations

Cost of Attendance

Tuition and fees for the 2016-2017 academic year are \$32,030 for Kentucky residents and \$65,386 for non-residents. Expenditures for instruments and their sterilization, books, clinic attire, and CPR comprise the remainder of the required curriculum expense. The tuition and fees are subject to change.

Student Financial Aid

Primary responsibility for meeting the cost of dental education rests with the student dentist and his or her family. However, the College's Financial Aid Coordinator, located in the College of Dentistry, assists students in making application for various types of financial assistance. The major sources of funding are loan programs administered by the federal government. Eligibility for financial aid is determined by the following formula:

Cost of Attendance (curriculum & living expenses) **minus**
Expected Family Contribution (as measured by federal formula)
equals Financial Need

The Financial Aid Coordinator, who is a member of the Office of Admissions and Student Affairs, endeavors to meet the demonstrated financial need of all student dentists to the extent of available funds. Since school managed funds are limited, awards from these sources will be determined on the basis of in-state tuition and parent information on the federal application.

About 95 percent of enrolled student dentists qualify for and receive some type of financial assistance. Applicants wishing to investigate financial aid options are encouraged to consult the financial aid coordinator. Financial need is not a criterion for admission to the College of Dentistry.

Additional information on loans, scholarships and work-study programs can be obtained by accessing the UK webpage on financial aid under "Student/Postgraduate Programs; DMD Program."

PROFILE



Josh Stamper,
UKCD - Class of 2018

Josh Stamper is a Kentucky native born right here in Lexington and growing up in Richmond. He is a first generation college student who attended the University of Kentucky where he obtained his Bachelors of Science in Biology in route to pursuing his dream of attending dental school. During this route, Josh's love for public health dentistry became apparent as he took a position to work as the dental coordinator for The Refuge Clinic, a free medical and dental clinic for those in need in Lexington, KY. Josh considers working with the Refuge one of his happiest and greatest life achievements; second only to being accepted into the DMD program here at UKCD. In "True blue" fashion, Josh considers UKCD to be the best and only dental school in Kentucky, and is proud to call it his dream school. In his free time, Josh enjoys cheering on the Wildcats every basketball season, riding his motorcycle on sunny afternoons, or working with his hands to build/fix anything he doesn't know much about, learning as he goes. Upon graduation, Josh hopes to go into private practice while maintaining his love for public health dentistry by continually working in free dental clinics for those in need. to lifelong involvement in organized dentistry and provide services, information, education, representation, and advocacy. The UK College of Dentistry's ASDA chapter participates in a number of community service and networking activities throughout the year.

Any question related to financial aid should be directed to:

Office of Admissions and Student Affairs
University of Kentucky
College of Dentistry
D-155 Dental Science Building
Lexington, KY 40536-0297
Telephone: (859) 323-5280
Fax: (859) 257-5550
Email: dbrow@email.ukv.edu

Tuition Payment, Instruments, PTS Policy

Tuition and fee payments are due each fall on August 22 and each spring on January 22 as designated by the University calendar. Temporary payment deferments can be authorized by the College of Dentistry Financial Aid Coordinator if warranted by a delay in financial aid beyond the student's control.

Tuition and fees can be paid in the University of Kentucky College of Dentistry Business Office (D131), online or in the Student Account Services on main campus. Late fees of 1.25% of remaining balance will be added to the students account after the 22nd of each month until the balance has been paid in full.

The University of Kentucky accepts Visa, MasterCard, American Express and Discover, effective July 2014, a 2.25% service fee will be assessed on all credit card payments.

In addition to being assessed late fees, students with financial delinquencies (tuition and fees not paid in full by August 22 or January 22) may be prohibited from attending classes, clinics and/or commencement at the discretion of the Associate Dean for Academic Affairs.

Withdrawal/Refund

In accordance with University policy, a student who withdraws from the College of Dentistry may be eligible to receive a partial refund of the current semester tuition depending on the withdrawal date. Refer to the Academic Calendar for specific withdrawal deadlines and the University Registrar's Refund and Fee Liability Policy for specific refund amounts. Since students purchase their dental instrument kits, there is no instrument fee refund. Also, in the event of withdrawal, students are responsible for any balance owed for instruments.

Tuition refunds for students who officially withdraw through the College’s Registrar will be made according to the following schedule:

	Students who withdraw by:	Class Year	Will Receive Refund/ Reduction	Will Continue to Owe:
Fall 2016	August 23, 2016	1st, 2nd, 3 rd , 4th	100%	0%
	August 30 2016	1st, 2nd, 3 rd , 4th	80%	20%
	September 21, 2016	1st, 2nd, 3 rd , 4th	50%	50%
Spring 2017	January 10, 2017	1st, 2nd, 3rd, 4th	100%	0%
	January 18, 2017	1st, 2nd, 3rd, 4th	80%	20%
	February 8, 2017	1st, 2nd, 3rd, 4th	50%	50%

Satisfactory Academic Progress Policy

For the purpose of awarding financial aid, any student shall be considered making satisfactory academic progress unless suspended from the College. Suspension shall result in immediate loss of eligibility. To re-establish eligibility, a student, at his/her expense, must satisfactorily complete a semester of either the standard curriculum or a specialized curriculum approved by the Academic Performance Committee. Notification by this Committee, in writing, to the Financial Aid Coordinator, or satisfactory achievement will restore eligibility for aid. Financial Aid can be received for a total of twelve semesters.

A student may appeal a denial of Financial Aid for failure to maintain satisfactory progress by submitting the justification ***in writing*** to the Dean of the College. The decision of the Dean is final.

Procedures for RAP Appeal

To initiate an appeal, the student must (1) complete the Reasonable Academic Progress (RAP) Appeal Form and (2) submit the above form with a letter and appropriate documentation, if required, containing the following:

1. The reason(s) the student feels he or she should be considered to have made satisfactory progress.
2. Mitigating or extraordinary circumstances beyond the student’s control, which may have adversely affected academic performance, preventing the student from earning the required grade point average and/or number of credit hours. **Documentation** of such circumstances should be included with the written appeal. Note that inability to attend class due to lack of funds is **not** an extenuating circumstance.
3. Specify what measure(s) are being taken or have been taken to ensure that academic performance will improve if the appeal is approved, as well as any plans the student has developed with his/her academic advisor to address academic performance.

4. A statement from the student's faculty advisor, Dean, or Department Chairman, if the student believes it appropriate.
5. The reason(s) for withdrawal (in cases where the student withdrew during the semester) along with *documentation*, if appropriate (medical advice, illness, personal, or family problems, et cetera).
6. Other information that the student may believe is pertinent or helpful.

Examples of circumstances which might be considered in evaluating appeals include, but are not limited to, (a) medical (physical or mental) problems, (b) employment-related problems, (c) financial problems, (d) academic-related situations (e.g., change in major, academic bankruptcy, attendance at own expense with positive performance, attendance at another school with positive performance), and/or (e) family problems (e.g., divorce or separation, spousal abuse, death and/or illness, unexpected daycare problems).

Debt Management Counseling

Students are encouraged to limit expenditures to maintain loan debt at a manageable level. The amount of loan debt at graduation significantly affects career choices. The ability to obtain finances to open a dental practice or to buy an existing practice can be affected by prior financial obligations.

All borrowers are required by federal regulation to participate in pre-loan entrance and exit interviews. Student dentists are invited to discuss their individual financial situations with the College's Financial Aid Coordinator (D 155). Computer software and Internet calculators estimate repayment as new loans are considered. This information is useful in planning career options and developing debt management strategies; please utilize the following websites.

Education Investment Planner

<http://www.adea.org/GoDental/>

<https://students-residents.aamc.org/financial-aid/>

<http://www.ada.org/en/education-careers/dental-student-resources/financial-resources-for-students-and-recent-gradua>

Repayment Plans and Calculators

<https://www.aamc.org/services/fao-first/godental/>

<https://studentaid.ed.gov/sa/repay-loans/understand/plans>

<http://www.finaid.org/calculators/>

Your Federal Student Loans – Learn the Basics and Manage Your Debt

<http://www.adea.org/Secondary.aspx?id=17875>

<http://www.mappingyourfuture.org/Money/>

<https://studentaid.ed.gov/sites/default/files/your-federal-student-loans.pdf>

Department of Education's Approved Loan Servicers

<http://www.myfedloan.org/>

<https://www.mygreatlakes.org/>
<https://www.nelnet.com/marketing/index>
<http://www.navient.com/>

Financial Aid / Loan Repayment

A dental education is an expensive investment. External agencies, such as the federal government, assist students largely through loan programs. Detailed information on the application process, the different types and amounts of financial assistance available, and eligibility requirements can be determined by contacting the College's Financial Aid Coordinator.

Postdoctoral Education

Postdoctoral Education

The College of Dentistry offers advanced education programs in several areas. The D.M.D. or equivalent degree is necessary for acceptance into any of these programs. Residents of Kentucky and non-residents, who have strong academic and professional records are given consideration and are encouraged to apply.

Stipends are paid to general practice, oral and maxillofacial surgery, orofacial pain and pediatric dentistry residents. Graduate students in periodontics, orofacial pain, and orthodontics register for academic credit. Students should not plan to practice while enrolled in any of these programs.

Applying for Postdoctoral Programs

The University of Kentucky participates in **PASS**, the **Postdoctoral Application Support Service** provided by the American Dental Education Association. To complete a PASS application or to learn more about the service, visit the ADEA website at www.adea.org/PASS. PASS begins processing applications on June 1.

The General Practice Residency, Periodontology and Orofacial Pain programs at the University of Kentucky, College of Dentistry have their own application process. To receive an application, contact the office of the Division Chief or Program Director.

Program Directors

General Practice Residency – Ted P. Raybould, D.M.D.

Oral and Maxillofacial Surgery – Joseph Van Sickels, D.D.S.

Orofacial Pain – Jeffrey P. Okeson, D.M.D.

Orthodontics – Sarandeep Huja, D.D.S., M.S.D.

Pediatric Dentistry – Interim Cristina Perez Pacheco, D.D.S.

Periodontics – Dolph Dawson, D.M.D., M.S., MPH

General Practice Residency In Dentistry

The General Practice Residency Program is designed to extend the graduate's capability in performing all phases of general dentistry in either private practice or hospital-based settings. Patients of all ages are treated with special emphasis placed on the medically compromised. Residents participate in rotations in general dentistry, oral surgery, anesthesia, and medicine. Didactic and clinical experiences are available in the various dental specialties as well as in intravenous sedation and comprehensive pain control. The clinical aspect of the program includes the treatment of about 10,000 patients per year. There are opportunities for both clinical and non-clinical research. The residency program is accredited by the Commission on Dental Accreditation of the American Dental Association.

➡ Stipends are paid to residents in the General Practice Residency, Oral and Maxillofacial Surgery, Orofacial Pain, and Pediatric Dentistry programs.

Applicants must be graduates of an ADA-accredited dental school. Selection criteria include academic performance in dental school education, National Board scores, motivations and goals, letters of reference and required interviews. Applications from dentists trained outside of the United States and Canada will be considered on an individual basis.

Four full time and seven part-time general dentists and specialist from the University of Kentucky College of Dentistry and the Veterans Administration Medical Center serve as program faculty. Numerous other dentists and physicians participate in seminars and fulfill special program roles. The 12-chair general dentistry clinic in the Kentucky Clinic and 12 chair clinic in the Veteran's Administration Hospital serve as the primary dental clinics for the general practice residents.

Oral And Maxillofacial Surgery

The College of Dentistry offers an accredited six-year program in Oral and Maxillofacial Surgery designed to meet the requirements of the Commission on Dental Accreditation and the American Board of Oral and Maxillofacial Surgery. A one-year internship in Oral and Maxillofacial Surgery is also available for those applicants who desire to strengthen their clinical experience and didactic foundation in Oral and Maxillofacial Surgery.

Educational activities in the biomedical sciences as prescribed by the Commission and the Board are integrated throughout the six years. The program is clinically oriented, and balanced in providing experiences in dentoalveolar, implants, orthognathic surgery, temporomandibular joint surgery, maxillofacial trauma, reconstructive surgery, pathology, and ambulatory pain and anxiety control. The program includes 36 months of oral and maxillofacial surgery training, 2 years of medical school, and a year of general surgery internship. A 3 month research block is mandatory in the fifth year of training. Presentation of results at a national meeting and submission of a manuscript for publication are strongly encouraged.

The primary teaching hospitals are the 473-bed University of Kentucky Hospital, the 370-bed Veterans Affairs Medical Center, and the 302-bed Good Samaritan Hospital. Six full-time and one part-time attending's assume primary responsibility for the teaching program. Faculty takes an active role in the teaching by providing weekly lecture topics, participation is weekly conferences, participation on hospital rounds and directing the overall patient care that is provided.

Orofacial Pain

The College of Dentistry offers a two-year CODA approved residency program in orofacial pain. This program was one of the first to be accredited in the United States. The program can be combined in cooperation with the University of Kentucky Graduate School, for a Master of Science degree in orofacial pain. This combined program has a length of three years. This program provides advanced training in the understanding, diagnosis, and management of temporomandibular disorders and complex orofacial pain.

The Orofacial Pain Center was founded in 1977 and emphasizes a multi-disciplinary approach to managing complex orofacial pain. Patients are routinely evaluated by dentists, clinical psychologists and physical therapists. Medical and dental specialists are called upon regularly to assist in the diagnosis and management of complex pain problems. The Master's degree program is composed of didactic, clinical, and research components which can be completed in 24 months. Most candidates participate in the one Year Fellowship Program prior to entering the Master of Science Degree Program.

The didactic portion of this program consists of the completion of 30 hours of designated graduate courses in the College of Dentistry. Course content includes anatomy, neuroanatomy, growth and development, pain physiology, craniomandibular biomechanics, masticatory function and dysfunction, pharmacology, imaging techniques, and statistics.

Lectures also are presented by specialists in psychology, rheumatology, neurology, anesthesiology, oral surgery, rehabilitative medicine, physical therapy, and pain management. Each graduate student will evaluate and manage orofacial pain patients. This program emphasizes the diagnosis and management of orofacial pain rather than the dental skills used to alter dental structures. Certain orthopedic appliances routinely will be used to manage orofacial pain, together with various diagnostic and therapeutic injection techniques. Emphasis will be placed on establishing proper diagnosis and developing appropriate relationships with medical specialists who can assist in managing the patient's specific pain complaint.

The graduate student receives clinical training in the Orofacial Pain Center under the supervision of two full-time and five part-time faculty member specializing in pain problems. The graduate student also will have the opportunity to work with clinical psychologists, a physical therapist, and other health professionals trained in pain problems.

The Orofacial Pain Center is located in the Kentucky Clinic and has a private patient reception and waiting area with an adjacent secretarial office. The treatment area consists of eight private dental cubicles and a conference room with residents' desks. There is also an office for the clinic director.

Orthodontics

A 34-month graduate program is offered in conjunction with the Graduate School at the University of Kentucky, upon the successful completion of which the student receives a Master of Science degree and a Certificate to practice orthodontics. Between two and three applicants are accepted into the program annually. The educational objectives of the program are to develop clinical and teaching skills, to obtain the relevant scientific background in the specialty area, and to design, execute, and publish master's level research.

The Master of Science Degree Program requires the successful completion of 30 credit hours of graduate courses in the College of Dentistry. In addition, the research component requires each Master of Science Degree candidate to complete a manuscript developed from original research. The Degree is awarded after successful completion of all course work, a public defense of the research, and submission of the manuscript to a peer-reviewed journal. Arrangements can be made with the Graduate School for those interested in obtaining a Doctor of Philosophy degree combined with orthodontics clinical training. The Division of Orthodontics also offers a year-long Craniofacial Biology Externship Program providing in-depth exposure to basic and clinical research, primarily in the areas of bone biology, genetics and/or orthodontics.

In addition to the program director, three full-time clinical, and six part-time orthodontists make up the specialty faculty. Other College, Health Care College and University Faculty conduct classes, seminars and special clinics as part of the didactic and clinical curriculum. The Orthodontic Graduate Program provides a robust clinical experience in comprehensive orthodontics, with emphasis on goal-oriented diagnosis and treatment of different malocclusions. Faculty members teach multiple treatment modalities, including functional therapy, comprehensive and interceptive care, straight-wire systems, lingual therapy, and thermoplastic, removable treatment. A series of seminars on business administration and practice management also are part of the curriculum.

Interdisciplinary care is also emphasized in the Graduate Clinic. These team approaches to comprehensive care include surgical orthodontics, treatment in the mixed dentition, accelerated orthodontics in conjunction with periodontics and esthetic dentistry involving collaboration with periodontics, prosthodontics, oral and maxillofacial surgery, and restorative dentistry. Diagnosis and treatment of patients with cleft lip/palate and other craniofacial anomalies is included.

All clinical treatment is conducted under an attending model, which fosters best-evidence based approaches and creative/critical thinking. Faculty model American Board of Orthodontics (ABO) standards and certification, and cultivate a culture of clinical excellence among residents.

Research projects will be conducted under the guidance of Faculty of the Division of Orthodontics or under the guidance of faculty outside the division of orthodontics with the approval of the Program Director of Orthodontics and the College's Director of Graduate Studies. Research opportunities include clinical orthodontic studies, as well as basic research in bone biology, medical genetics, developmental biology, microbiology, immunology, pharmacology, physiology, and engineering. Graduate students are required to teach in clinical and didactic courses in the doctoral dental curriculum. They also must take and pass the written exam of the American Board of Orthodontics, and there is also an emphasis on residents preparing for and completing the ABO Initial Certification Exam.

Pediatric Dentistry

The College of Dentistry offers a residency program for postdoctoral student dentists seeking specialty training in pediatric dentistry. The development of a wide based knowledge and advanced skills in clinical pediatric dentistry are the primary objectives of the program.

This Commission on Dental Accreditation approved specialty program involves clinical exposure, didactic courses, as well as teaching, and research opportunities which enables the



candidate to experience the educational activities recommended by the American Board of Pediatric Dentistry and the American Academy of Pediatric Dentistry. The didactic portion consists of a series of interrelated seminars about basic and advanced pediatric dental care, the care of the handicapped and chronically ill child, as well as the diagnosis and treatment of occlusion problems in the primary, mixed and early permanent dentitions. The basic 24-month program includes a core curriculum, specialty course work, a wide range of clinical experiences, and a research project. The program has a strong focus on treatment of medically, mentally, and physically compromised children and adolescents. It also focuses strongly on hospital and pharmacological management of patients to include oral sedation; and management of the developing dentition for children and adolescents under the direct supervision of a Board Certified Orthodontist. Following completion of our program, the graduates are credentialed to take the American Board of Pediatric Dentistry's written and oral examinations and become board certified Diplomates of our specialty.

In addition to the program director, there are two full-time faculty, all of whom are Board Certified, and five part-time and volunteer Pediatric Dentists who comprise the residents' faculty. Other dental school and Medical Center faculty also conduct course seminars and presentations as part of the curriculum.

The facilities used by pediatric dentistry residents include clinical, seminar, and research facilities located in the Kentucky Clinic and the dental science wing of the Medical Center. Additional facilities include 2 self-contained, 40-foot mobile dental units which utilize the residents to provide populations of children with much needed dental care, as well as provide clinical instruction for the undergraduate dental students. Both 1st and 2nd year residents rotate annually through the private practice offices of two local Board Certified Pediatric Dentists in order to gain private practice experience. The faculty and residents have scheduled blocks in the operating rooms at the Center for Ambulatory Care and the A.B. Chandler Medical Center for both treatment under general anesthesia and IV sedation.

Periodontology

The advanced education program in periodontology is a 36-month program that culminates in the awarding of the Masters of Science degree and a certificate in periodontology. The goal of the program is to prepare Individuals for careers in either academic periodontology Or private specialty practice. Two graduate students are Accepted each year. The program begins on or about July 1 and the deadline for application is July 15 of the Preceding year.

➡ The graduate program in periodontics is designed to provide an educational opportunity for individuals interested in limiting their practice to this field. The program extends over a minimum of 36 months. The primary objective of the program is to develop a skilled sophisticated clinician, well-grounded in research and the biological basis of clinical practice and capable of satisfying the requirements of the American Board of Periodontology.

The program is a full-time course of study consisting of clinical, research, and didactic components. The didactic component consists of seminars that involve extensive reading in the literature. Courses include Biology and Pathogenesis (PER 772), Periodontal Therapy Literature Review (PER 776), Oral Biology (OBI 650), Oral Pathology (OPT 651), plus a number of other topical seminars. There is a rotation on anesthesiology, and all graduate students are expected to become ACLS-certified during their first year. Students document and present their cases in a formal case presentation/treatment planning seminar (PER 770) as well as a surgical seminar (PER 774). The case analysis and defense exercises are patterned after the oral examination of the American Board of Periodontology.

The program is especially strong in the areas of implant surgery, conscious sedation, and cosmetic procedures. Residents typically place between 90-130 implants, as well as they perform sinus augmentations, ridge augmentation, and a wide range of periodontal surgical procedures. There are off-service rotations in anesthesiology.

In keeping with the philosophy of the College of Dentistry, the collegial atmosphere of the program encourages close contact with the faculty. The program has a rich heritage, and graduates have gone on to positions of importance in the specialty. During the 1960's, the program was one of the most progressive and innovative in the country, and in the mid-1980's was one of the first to offer formal coursework in implantology. This heritage of innovation continues as current graduate students are exposed to a wide range of therapeutic modalities, including regenerative therapy, implantology and sinus augmentation. Close cooperation with colleagues in other disciplines (orthodontics, oral and maxillofacial surgery, prosthodontics, otolaryngology, biomedical engineering) is encouraged, as are interdisciplinary seminars and educational opportunities. The Division of Periodontology includes four full time faculty, 6 part time faculty, two dental hygienists, three dental therapists, one financial counselor, one front desk personnel, and one staff support. Faculty from other disciplines also participates in educational seminars.

Online Application form may be accessed at the University of Kentucky College of Dentistry's website: <https://dentistry.uky.edu/periodontology-applications-and-admissions> If you have any questions, please call: 859-323-5391. One or two week externships are also available to qualified applicants.

Additional Programs

Patient Care

The Patient Care program at the University of Kentucky, College of Dentistry Student Dental Clinic seeks to provide comprehensive care in an atmosphere that simulates the private group practice environment to optimize the clinical experience of the dental students and their patients.

From their first appointment, patients are made aware of their particular disease state and risk of further dental disease. An emphasis is placed on educating patients concerning their own dental health and prevention of dental disease. From their first interaction in the student dental clinic patients are encouraged to participate in the decision making, treatment planning and delivery of their care. Patients are assigned to a Team and a Team Leader who delegates responsibility for patient care to student members of his or her team. Patient assignments are based on a thorough examination and review of a tentative treatment plan. Since the Team Leader is a faculty member aware of individual student capabilities and skill levels, more appropriate matches of patient needs and desires with student needs and abilities are possible.

Patient preadmission examinations, assignment, treatment planning, continuity of care and management are coordinated and facilitated by the Team Leaders with participation of Oral Diagnosis faculty. During this initial examination, the Team Leader and student dentist elaborate on College policies and respond to individual patient concerns. In addition, a new risk assessment tool is available to help patients understand their risk of future dental disease. Depending on the severity of the dental disease, some patients with less disease will be able to have a final plan of treatment recommended at this initial appointment. Other patients with more dental disease will likely be reappointed for additional diagnostic data collection and consultations before a definitive treatment plan and alternatives are discussed with Oral Diagnosis faculty or Team Leader. From these appointments, patients are informed about their personal dental needs, dental diagnoses, risk factors influencing their disease and strategies for prevention of future disease. Patients also have an opportunity to discuss treatment plan options and may select an appropriate plan for their dental needs. Future dental appointments emphasize disease control and prevention followed by tooth replacement as necessary.

Team Leaders monitor the progress of patient care delivery of their team of students and are responsible for development and evaluation of clinical patient management skills throughout the student's clinical years. Team Coordinators assist the Team Leaders with these responsibilities and they assist dental students with their patient and clinical management. Teams are considered large group practices and all treatment is supervised by either discipline-specific faculty or team leaders who are responsible for evaluation of the student performance in their respective clinical disciplines.

Public Service

The University of Kentucky, College of Dentistry has an extensive public service program. The Kentucky Oral Health Network (KOHN) was formed by the UK College of Dentistry in 2008 and is a network of UK clinical sites across the Commonwealth, state health departments, regional community health centers, and private practitioners. This network is providing oral health surveillance, oral health care and oral health education for thousands of children and adults throughout the Commonwealth. Our faculty, staff, student dentists, and residents are committed to reaching out to the public to improve oral health. In addition to educating dentists, the faculty and staff strive to provide access to patient care services, promote dental health education, conduct research, and provide clinical and educational support services to the profession.

Service learning opportunities are part of the curriculum for our student dentists and residents. They are expected to participate in extramural service programs and encouraged to volunteer their time to treat the oral health needs of underserved people in our Commonwealth. Student dentists begin their clinical education with patients in a school-based sealant project, Seal Kentucky, in rural Kentucky. During their fourth-year student dentists participate in a community-based learning experience providing services to underserved patients throughout the Commonwealth. In addition, student dentists participate in numerous oral health education and promotion activities that seek to increase awareness about the importance of oral health. Throughout all of the students' clinical experience, students are able to participate in elective extramural externships which can be in private offices, federally qualified health centers, other university clinics, and in specialty clinics.

As part of the dental-safety net, the College of Dentistry provide comprehensive dental services to large number of underserved and underinsured individuals through its intramural and extramural clinics and its mobile van program. Faculty members provide high-quality comprehensive, general and specialized dental care at the faculty practice. Student dentists and dental residents render dental services under the supervision of faculty members at the College of Dentistry's clinics. Evening and Saturday morning clinics serving needy children are available. As part of its outreach program, the College of Dentistry runs three mobile dental units and provides logistical support for a fourth unit operated by the College of Medicine. Through the mobile dental program, faculty and staff members provide dental services to school-children in Eastern, Central, and Western Kentucky.

The Kentucky Oral Health Network partners with Kentucky's public health agencies, regional medical centers, practitioners, and dental organizations to provide clinical care and oral health education and promotion activities seeking to improve the oral health status of Kentuckians. The College also serves the profession of dentistry. Our Continuing Education program is offered in Lexington and throughout the Commonwealth. The tissue examination service (biopsy service) provided by Oral Pathology faculty is one of the Nation's largest and receives specimens from all parts of the country. Our faculty provides leadership to the profession nationally and internationally by serving as speakers, officers, consultants, and board members in all the dental specialties.

Continuing Education

The University of Kentucky, College of Dentistry, recognizes that dental education does not end when the D.M.D. degree has been conferred. Learning must extend for a lifetime. Consistent with this philosophy, the college offers a variety of lecture, participation, and home-study courses for practicing dentists and dental auxiliaries. Highly knowledgeable speakers are sought out for the courses which are presented in many venues and range from two hour updates to continuums presented over several weekends. Hands-on courses are also available.

Courses are given in Lexington and at various locations throughout the state and nation. Distance learning technology is commonly employed and has proven to be effective. Through the College program, practitioners are able to expand their skill and knowledge base while informing themselves about new developments in oral health care.

For information on continuing dental education visit our website:
<http://www.mc.uky.edu/Dentistry/ce/default.htm>

Alumni Affairs

The College of Dentistry and the University of Kentucky College of Dentistry Alumni Association offer a variety of regularly scheduled educational and social programs to College alumni. Among these are the Fall Symposium and Alumni Weekend, the summer Golf Scramble, and the annual Tasting and Silent Auction which support alumni special events and student scholarships and programs, as well as special continuing education offerings directed specifically at College alumni.

The University of Kentucky College of Dentistry Alumni Association conducts its activities with several purposes in mind. First and foremost, it is responsible for promoting the best interest and welfare of the University of Kentucky with specific attention given to the College of Dentistry. The Alumni Association strives to acquaint the membership with the achievements of their alma mater and focuses on the University's many contributions to the citizens of Kentucky and the nation. It also provides information on institutional goals and needs and encourages alumni to maintain close ties with the College of Dentistry.

➡ The Alumni Association strives to acquaint the membership with the achievements of their alma mater and focuses on the University's many contributions to the citizens of Kentucky and the nation.

The University of Kentucky Alumni Association is located in the King Alumni House while the College of Dentistry Alumni Association is an activity of the Dean's Office.

Perspectives, the College of Dentistry alumni publication, is mailed to alumni and friends once during the academic year. It provides information and features of interest designed to foster closer ties with the University of Kentucky College of Dentistry.

Development

The College of Dentistry's budget allocation from the University of Kentucky provides funding for only part of the College's programs and services. Private contributions from alumni and friends enable the College to carry out many activities in the area of education, patient care, research, and service not covered in the budget. Recent fundraising projects have included endowed faculty chairs, scholarship and award funds, outreach enhancement funds, and a campaign to fund the renovation of our pre-clinical simulation laboratory. The College of Dentistry's Development office works closely with the College and University community as well as with its alumni to raise some of these funds. Gift programs are in place to be donor friendly and to provide opportunities for our alumni and friends to invest in the future of dental education at UKCD. As a result, the College of Dentistry is better able to fulfill its assigned mission thanks to the generosity of its alumni and friends.



Faculty

COLLEGE OF DENTISTRY

Stephanos Kyrkanides, Dean

DEPARTMENT OF ORAL HEALTH PRACTICE

Robert Kovarik, Chair

Comprehensive Care

Thomas McConnell, Division Chief

Ershal Harrison, Assistant Professor, D.M.D., Kentucky, 1981

Kristy A. Lawson, Assistant Professor, D.M.D., Kentucky, 2005

Thomas A. McConnell, Associate Professor, D.D.S., University of the Pacific, 1977

Deborah S. Ray, Assistant Professor, D.M.D., Kentucky, 1987; G.P.R. Cert., Kentucky, 1988

Robert C. Taylor, Assistant Professor, D.M.D., Kentucky, 2003

David Thornton, Assistant Professor, D.M.D., Kentucky, 2000

Endodontics

Alfred Wiemann, Division Chief

Barry Burkett, Assistant Professor (part-time), D.M.D., Kentucky, 1977; Cert. Endo, Naval School of Health Services, 1984

Anna Dressman, Assistant Professor (part-time), D.M.D., Kentucky, 2007, Cert. Endo., Ohio State Univ., 2011

Harmeet Walia, Associate Professor (part-time), D.D.S., Marquette, 1984, M.S.D., Marquette, 1986

Alfred Wiemann, Assistant Professor, D.M.D., Kentucky, 1981

Paul T. Wehrman, Assistant Professor (part-time), D.M.D., Kentucky, 1973; Cert. Endo., Pittsburgh, 1978

Oral Diagnosis, Oral Medicine and Oral Radiology

Craig S. Miller, Interim Division Chief

Robert Danaher, Assistant Professor, Ph.D., Maryland, 1994

John E. Lindroth, Associate Professor, D.D.S., West Virginia, 1977; Fellowship, Orofacial Pain, Kentucky, 1992

Teresa A. Dawahare Lyon, Assistant Professor (part-time), D.M.D., Kentucky, 1989; Cert., G.P.R., Kentucky, 1991

Craig S. Miller, Professor, D.M.D., Kentucky, 1982; Cert., G.P.R., USAF, 1983; M.S., Texas-San Antonio, 1987

Kenneth B. Nusbacher, Assistant Professor, D.M.D., Kentucky, 2008

Galal Omami, Assistant Professor, B.D.S., Benghazi Univ., Libya, 2003; M.Sc., Benghazi Univ., Libya, 2008; Cert. G.P.R., Univ. of Connecticut, 2012; M.S.D., Univ. of Connecticut, 2013

B. Lynn Theiss, Assistant Professor, D.M.D., Kentucky, 1986; G.P.R., Kentucky 1988; M.S.D., Geriatric Dental Fellowship, Kentucky, 1991

Periodontics

Mohanad Al-Sabbagh, Division Chief

Mohanad Al-Sabbagh, Professor, D.D.S., Damascus, Syria, 1993; M.S., Buffalo, 2002
Dolph Dawson, Assistant Professor, D.M.D., Univ. of Louisville, 1993; M.S., Kentucky, 1998
Jeffrey Ebersole, Professor, Ph.D., Pittsburgh, 1975
Pinar Emecen Huja, Assistant Professor, D.D.S., Hacettepe University, Turkey, 1998; Ph.D., Hacettepe University, Turkey, 2005; M.S. Ohio State, 2011
Douglas Neuman, Assistant Professor (volunteer) D.M.D., Kentucky, 1972; M.S., Kentucky, 1974
Elliot Neuman, Assistant Professor (part-time) D.M.D., Kentucky, 2011; M.S., Kentucky, 2014
Samuel J. Jasper, Associate Professor, D.D.S., Ohio State, 1976; M.S., Ohio State, 1980
Allison Wright, Assistant Professor (part-time) D.D.S., Univ. of Louisville, 2003; M.S., and Cert. Perio, Kentucky, 2013

Prosthodontics

Marcus F. Abboud, Division Chief

Marcus F. Abboud, Professor, D.D.S., Bonn, Germany, 1996; Ph.D., Bonn Germany, 2000; Cert. Oral Surgery, Bonn Germany; Cert. CBCT Technology and Diagnostics, Dental Medical Assoc., Nordheim, Germany
Robert Q. Frazer, Associate Professor, D.D.S., Colorado-Denver, 1981; Cert. G.P.R., Chanute AFB Hospital, Illinois, 1982; Cert. Prosth., Missouri-Kansas City, 1983
Rodrigo Fuentealba Hidalgo, Assistant Professor, D.D.S., Univ. of Concepcion, Chile, 1996
Vaughn Hoefler, Assistant Professor, D.D.S., Univ. of the Pacific, 1984
Ahmad Kutkut, Assistant Professor, D.D.S., Univ of Jordan, 2001; M.S.D., New York, 2010
Richard J. Windhorn, Assistant Professor, D.M.D., Kentucky, 1983; Cert. Prosthodontics, Fort Gordon, Georgia, 1996

Restorative Dentistry

Robert Q. Frazer, Division Chief

Elizangela Bertoli, Assistant Professor, D.D.S., Universidade Federal Do Espirito, 1995; Cert. Endodontics, Universidade Federal Do Espirito, 1998; Cert. Orofacial Pain, Kentucky, 2000; M.S., Kentucky, 2005
Susan Bishop, Assistant Professor, D.M.D., Kentucky, 2001
Raymond J. Byron, Jr., Associate Professor (part-time), D.M.D., Kentucky, 1979
James E. Haubenreich, Associate Professor (part-time), D.D.S., Memphis, 1977
H. F. Howard, Assistant Professor (part-time), D.M.D., Kentucky, 1982
Jane Jordan, Assistant Professor (part-time), D.M.D., Kentucky, 1987
Robert E. Kovarik, Associate Professor, D.M.D., Kentucky, 1982; M.S., Georgia, 1991
Stacie Maggard, Assistant Professor (part-time), D.M.D., Kentucky, 1998
Richard J. Mitchell, Associate Professor, M.S., Georgia, 1971; Ph.D., Virginia, 1975
Hiroko Nagaoka, Assistant Professor, D.D.S., Nihon Uni, Japan, 2001; M.S., Univ of North Carolina, 2013
Patricia Nihill, Associate Professor, (volunteer) D.M.D., S. Illinois, 1982; M.S., Northwestern, 1991
Gitanjali L. Pinto-Sinai, Assistant Professor, D.D.S., SUNY of Buffalo, 2001

Martha Rice, Assistant Professor (part-time) D.M.D., Kentucky, 1981
Carla Rodriguez, Assistant Professor, D.M.D., Kentucky, 1981
Lindsay Rule, Assistant Professor (part-time) D.M.D., Midwestern, 2012
William Sadler, Assistant Professor (part-time) D.M.D., Univ of Alabama, 1975
Lina Sharab, Assistant Professor, D.M.D., Al-Ba'ath Univ, Syria, 2003; M.S., Kentucky, 2014
Richard Stoss, Assistant Professor (part-time) D.M.D., Kentucky, 2006
Gregory G. Zeller, Professor, D.D.S., Univ of Maryland-Baltimore, 1975; M.S., Univ of Maryland-Baltimore, 1983
Gregory A. Zoll, Assistant Professor (part-time) M.S.Ed., Kentucky, 1995

DEPARTMENT OF ORAL HEALTH SCIENCE

Larry L. Cunningham, Jr., Interim Chair

Octavio A. Gonzalez, Associate Professor, D.D.S., Pontifical Javeriana Univ., Columbia, 1993; M.Sc., Pontifical Javeriana Univ., Columbia, 2002; Ph.D., Kentucky, 2010
Christine T. Harper, Assistant Professor (Adjunct), M.S., Univ. of Dayton, 2002
Chifu B. Huang, Assistant Professor (part-time), M.S., Kentucky, 1990; Ph.D., 1995, Kentucky; MBA Washington, 2002
Lorri Morford, Assistant Professor, Ph.D., Kentucky, 1995

Oral and Maxillofacial Surgery

Larry L. Cunningham, Jr., Division Chief

Kenneth Bondra, Assistant Professor (part-time), D.M.D., Univ of Pittsburgh, 1972
Larry L. Cunningham, Jr., Professor, D.D.S., Texas, 1995; M.D., Texas, 1998
Enif A. Dominguez Fernandez, Assistant Professor, D.D.S., Central Univ of Venezuela, 2001;
Ehab Shehata, Assistant Professor, M.M.Ch.B., 1988; M.Sc., 1993; B.D.S., 1997; M.D., 2004; Univ of Alexandria, Egypt
Steven Tucker, Assistant Professor (part-time), D.M.D., Kentucky, 1974; Cert. Oral and Maxillofacial Surgery, Kentucky, 1978
Joseph D. Van Sickels, Professor, D.D.S., Virginia, 1972

Pediatric Dentistry

Ted Raybould, Interim Division Chief

Shellie A. Branson, Assistant Professor (part-time), D.M.D., Univ. of Louisville, 1984; Cert. Pediatric Dentistry, Univ. of Louisville, 1986
Enrique Bimstein, Professor, C.D., Univ Nacional Autonoma De Mexico, 1970; Cert., Pediatric Dentistry Fellowship, Jerusalem, 1971; Cert., Master Educator Fellowship, Florida, 2007
Charlotte Haney, Assistant Professor (part-time) D.M.D., Kentucky, 1976; Cert., Pediatric Dentistry, Kentucky, 1983
Wendy K. Humphrey Van Meter, Assistant Professor (part-time), D.M.D., Kentucky, 2003; G.P.R. Cert., Kentucky, 2004; Cert. Pediatric Dentistry, Kentucky, 2008
Rodney Jackson, Assistant Professor (part-time), D.M.D., Kentucky, 2001
Julie Keller, Assistant Professor (part-time), D.M.D., Univ of Louisville, 1986; Cert. Pediatric Dentistry, Kentucky, 1988

Lisa A. Kochis, Assistant Professor (part-time), D.D.S., Univ of Oklahoma, 1999, Cert., G.P.R., Univ of Oklahoma, 2000; Cert., Orthodontics, Univ of Louisville, 2003
David A. Nash, Professor, D.M.D., Kentucky, 1968; M.S., Iowa, 1970; Ed.D., West Virginia, 1984
Cristina V. Perez Pacheco, Assistant Professor, D.D.S., Concepcion, Chile, 1998; Cert., Clinical Pediatric Dentistry, Concepcion, Chile, 2000, Cert., Specialization in Pediatric Dentistry, Concepcion, Chile, 2002; Cert. and M.S., orofacial pain, Kentucky, 2011
Erwin G. Turner, Associate Professor, D.M.D., Kentucky, 1974; Cert., Pediatric Dentistry, Kentucky, 1976

Adult Dentistry

Ted P. Raybould, Division Chief

John B. Burt, Assistant Professor, D.M.D., Kentucky, 1996
Eric T. Demann, Associate Professor, D.M.D., Kentucky, 2000
Christian S. Fraley, Assistant Professor, D.M.D., Kentucky, 1996; G.P.R. Cert., Kentucky, 1997
Ted P. Raybould, Professor, D.M.D., Kentucky, 1981; G.P.R. Cert., Kentucky, 1985
Daria Stone, Assistant Professor, D.M.D., Kentucky, 1995
James R. Thompson, Assistant Professor (part-time), D.M.D., Kentucky, 1978

Oral Pathology

Douglas D. Damm, Division Chief

Douglas D. Damm, Professor, D.D.S., Louisiana State, 1977; Cert. Oral Pathology, Emory, 1979
Craig B. Fowler, Associate Professor, D.D.S., Baylor, 1976; Cert. Oral Pathology, Emory University, 1985
Dean K. White, Professor (part-time), D.D.S., Missouri, 1970; M.S.D., Indiana, 1972

Orofacial Pain

Jeffrey P. Okeson, Division Chief

Charles R. Carlson, Associate Professor (joint), Ph.D., Vanderbilt, 1983
Reny de Leeuw, Professor, D.M.D., State Univ Groningen, 1988; Ph.D., State Univ Groningen, 1994
Isabel Moreno-Hay, Assistant Professor, D.D.S., Madrid, 2003; Cert., Implanted Prosthodontics, Madrid, 2006; Ph.D., Facial Treatment Specialist, Madrid, 2011; Cert., Orofacial Pain, Kentucky, 2013
Jeffrey P. Okeson, Professor, D.M.D., Kentucky, 1972
Alan Wilkinson, Assistant Professor (part-time), D.M.D., Louisville, 1973; Cert., Orofacial pain, Kentucky, 1988

Orthodontics

G. Thomas Kluemper, Division Chief

Cynthia S. Beeman, Associate Professor, D.D.S., Case Western, 1981; Ph.D., Connecticut, 1989; Cert. Orthodontics, Connecticut, 1989
Melvin W. Dean, Assistant Professor (part-time), D.M.D., Kentucky, 1977, Cert. Orthodontics, Kentucky, 1979

James K. Hartsfield, Jr., Professor, D.M.D., South Carolina, 1981; M.S., Indiana, 1983; M.Sc., Harvard, 1987; Ph.D., South Florida, 1993

Bruce S. Haskell, Professor (part-time), D.M.D., Univ. of Pittsburgh, 1973; Cert. Orthodontics, Univ. of Rochester, 1975; Ph.D. Physical Anthropology, Univ. of Pittsburgh, 1978

Sarandeep Huja, Professor, M.S.D., Bombay, India, 1992; Cert. Orthodontics, Indiana, 1999; M.Sc., Marquette, 1999; D.D.S., Nebraska, 2001

G. Thomas Kluemper, Professor, D.M.D., Kentucky, 1983; M.S., Orthodontics, Michigan, 1991

Judson M. Knight, Associate Professor (part-time), D.M.D., Kentucky, 1967; Cert. Orthodontics, Kentucky, 1972

Kyrkanides, Stephanos, Professor, D.D.S., Univ. of Athens, 1991; Cert. Orthodontics, Eastman Dental Center, 1994; Cert. Orofacial Pain, Eastman Dental Center, 1995; M.S., Neurobiology, Univ. of Rochester, 1997; Cert. General Dentistry, Eastman Dental Center, 1997; Ph.D., Neuroscience, Univ. of Rochester, 1999

Robert Rust, Assistant Professor (part-time), D.M.D., Louisville, 1981; Cert. and M.S. Orthodontics, Kentucky, 1985

James Thacker, Assistant Professor (part-time), D.D.S., Case Western, 1982; Cert. Orthodontics, Boston, 1984

J. Philip Wahle, Assistant Professor (part-time), D.M.D., Kentucky, 1990; M.S., Kentucky, 1993

Public Health Dentistry

Ted Raybould, Interim Division Chief

Joanna A. Aalboe, Assistant Professor, M.S., Eastern Kentucky, 2009

Sharlee Burch, Assistant Professor (part-time), M.P.H., Western Kentucky, 2000; Ed.S., Liberty Baptist College, Lynchburg, VA, 2011; Ed.D., Liberty Baptist College, Lynchburg, VA, 2013

Wesley Coffman, Assistant Professor (part-time), D.M.D., Kentucky, 1978

Kelly J. Dingrando, Assistant Professor, D.M.D., Kentucky, 2005

David L. Graham, Assistant Professor, D.M.D., Louisville, 1971

Dustin Hall, Assistant Professor (part-time), D.M.D., Kentucky, 2006

Laura D. Hancock Jones, Assistant Professor, D.M.D., Louisville, 2003

Robert G. Henry, Associate Professor (part-time), D.M.D., Kentucky, 1981

Daniel C. Marsh, Assistant Professor (part-time), D.D.S., West Virginia, 1984

M. Raynor Mullins, Associate Professor (part-time), D.M.D., Kentucky, 1968; M.P.H., North Carolina, 1970

Jenny L. Stigers, Associate Professor (part-time), D.M.D., Kentucky, 1984; G.P.R. Cert., Kentucky, 1986

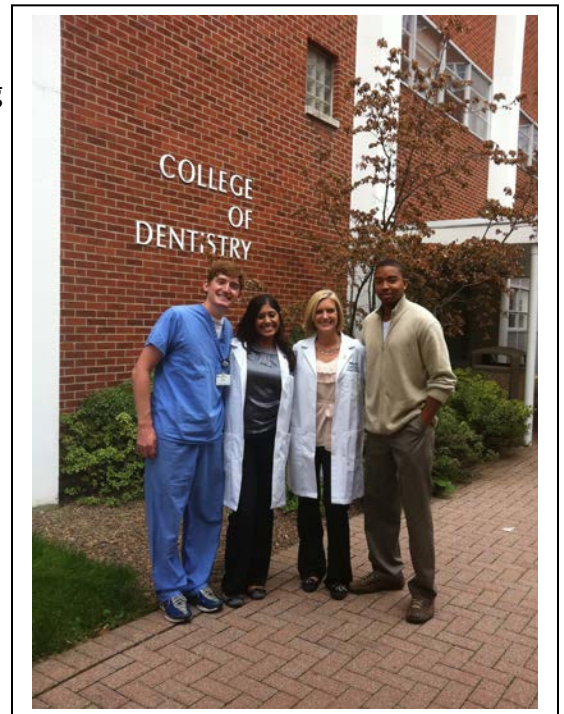
Keith White, Assistant Professor, D.M.D., Kentucky, 1986

Office of Admissions and Student Affairs

The College of Dentistry's Office of Admissions and Student Affairs is organized to support the educational objectives and programs of the College by aiding and enriching student learning and contributing to the welfare and individual growth of students.

The office provides a wide range of services, activities, and programs which include:

- pre-dental advising and admissions counseling
- admission services/application processing
- student financial aid and debt management counseling
- career planning
- registration and academic records keeping
- curriculum support
- tutorial assistance
- academic success seminars
- Lassi: learning and study strategies inventory
- testing services (National Board exams)
- academic and personal counseling
- assistance to classes and student organizations
- transcript services and letters of recommendation
- liaison and referral to other UK offices (Housing, Health Service, Counseling Center, Student Billing Services, Students Affairs Division, Registrar, etc.)



Student Affairs Services

Class Rankings

An official class ranking is compiled at the end of the academic year once all grades have been posted. Class rank will be determined from letter grades (and quality points) received in all required courses. Questions regarding class rank can be answered by the College Registrar (M-134).

Graduation Honors

The graduation honors are "With High Distinction" and "With Distinction". Students are chosen according to their class rank when they apply for a May degree. The top 12% of the class receive "*With High Distinction*;" the next 8% receive "*With Distinction*."

Lockers

Students are assigned a locker in the student lounge by the College Registrar prior to the Pre-Enrollment Workshop. You are strongly encouraged to use a **combination lock** rather than a key/pad lock.

Please Note: Locks will be cut, contents removed from those lockers not properly assigned.

Clinics and D-611 Storage Space

Your lockers in the Student Lounge and outside D-611 are the most secure places to store instruments and other valuables. Assignments to these storage spaces are managed by Dental Maintenance.

Letters of Evaluation

You may request letters of evaluation for admission to graduate programs, advanced training, or employment signed by the Dean through the Academic Affairs Office M-134. There is an information form (Dean's Packet Request) to complete; FERPA consent form and a \$25 fee for processing, this packet includes official transcripts.

Lost and Found

There is no official Medical Center lost and found department. However, the main Hospital information desk does collect lost items. If any instruments are lost or found, you should go to the Central Sterilization window on the ground floor of the College of Dentistry. Occasionally, items are brought to the Office of Admissions and Student Affairs, M-134. Put a notice in the student lounge, on the blackboard in D-611 and contact Medical Center Security at 323-2356.

Messages

- **Urgent:** If someone needs to contact you in an emergency, they should call you on your pager/cell phone, or contact the Office of Admissions and Student Affairs (323-6071) and a staff member will contact you immediately.

- **Non-urgent:** Messages that are not urgent will be sent to you via your university account e-mail.
- **Cell Phone/Pager Protocol:** Students will have the option to be issued a University pager or use their personal mobile phone in order to be accessible during school hours as well as after hours (Monday-Friday, 7am – 7pm) by UKCD administration. If students choose to use a University pager, there should be no misuse of the pagers. Also, students will be responsible for lost pagers. Additional details regarding “Cellular Phone/Pager Protocol” can be found in the UKCD Clinic Manual.

Transcripts/Enrollment Verifications

Official Transcripts and Enrollment Verification letters may be obtained from the College Registrar, Office of Admissions and Student Affairs (M-134). Requests may be made in person or via University Email Address. Unofficial transcripts can be accessed from the myUK portal <https://myuk.uky.edu>

Notary Services

The College Registrar is also a licensed Notary, if you are in need of Notary services go to the Office of Admissions and Student Affairs (M-134).

Records & Registration

All information concerning your student record and registration is handled through the Office of Admissions and Student Affairs. You can review your student record by making arrangements with the College Registrar (M-134). The file may not be removed from the Office of Admissions and Student Affairs.

The University of Kentucky and the College of Dentistry abide by the provisions of the Family Educational Rights and Privacy Act of 1974 (FERPA), which allows students to review, inspect, and challenge the accuracy of information contained in their records. This act also provides guidance governing the release of information from that record. A copy of the FERPA policy can be obtained from the Office of Admissions and Student Affairs.

Registration for classes is done by the College Registrar. Students, who want to register for additional classes, i.e., research, extramural, individualized externship, etc., should check with the Office of Academic Affairs for the proper procedures.

Check-out Procedure

All student dentists must complete a College of Dentistry "Check-Out Sheet" and all course evaluations before leaving for the summer break. The sheet must be completed with the appropriate signatures before a student can re-enroll the following academic year. Students granted a leave of absence or who are withdrawing from the College must also complete the forms. Check-Out Sheets may be obtained from the Office of Admissions and Student Affairs (M-134).

Please Note: Graduating student dentists should allow at least one week after graduation to complete the checkout process.

Shadowing Procedure

Students wanting to shadow faculty in the DMD clinic must be approved by volunteer services. The requirements and process to become a volunteer can be found at <http://ukhealthcare.uky.edu/volunteer/>. Questions regarding the shadowing process can be directed towards the Office of Admissions and Student Affairs (M134).

Student Organizations

Student Organization Registration

The Center for Student Involvement (CSI) at the University of Kentucky is committed to student involvement on the UK campus and in the Lexington community. Located in the UK Student Center, the office is responsible for advising and assisting with student programming, event management, and leadership development initiatives as well as overseeing the Student Center Ticket Office and Wildcard Student ID office. In all, more than 350 student organizations are coordinated and advised through this office.

In order to register your organization with UK, a group must complete three steps:

- Have one student officer or representation attend and complete a 90 minute orientation in the Center for Student Involvement (RM 106). Dates for orientation can be found at the following webpage: <http://getinvolved.uky.edu/so/registerorg>
- Complete the online registration by logging into OrgSync with your LinkBlue credentials. You can find the link to register your organization here: <http://www.orgsync.com/>. You will need the following to register your organization:
 - Name, Student ID #, Phone Number, and UK E-mail Address for three students/officers that are currently enrolled and in good standing (2.0 cumulative GPA)
 - Name, UK Position Title/Department, Phone Number, and E-mail Address for one full-time faculty or staff member to serve as the organization's primary advisor
 - All organizational constitutions and/or bylaws

Once the online application has been completed, the Center for Student Involvement (CSI) verifies information and approves the organization's registration application. If you experience any problems, please stop by the CSI, email Shauna Prentice at shauna.prentice@uky.edu, or call (859) –218-1771.

Organization Registration Windows are open during the following dates:

- Fall Registration Open: April 11-Sep 30
- Spring Registration Open: Jan 19-Feb 15

Please Note: New groups will always have to input all the information, but re-registering groups from year to year will primarily be verifying information from the previous year.

American Dental Education Association – Council of Students

The College has two delegates to the American Dental Education Association (ADEA) Council of Students. Their responsibilities include dealing with a wide variety of issues of concern to all students attending the nation's dental schools. Students are encouraged to contact the first or second delegate (see Student Directory) regarding issues of importance (e.g. tax deferments on student loans, regional licensing, etc.) to most student dentists.

American Association of Women Dentists

The American Association of Women Dentists (AAWD) is a national organization that represents, serves, and supports the specific needs and interests of women dentists. Information on membership is provided annually by the local chapter.

American Association of Public Health Dentistry: the University of Kentucky chapter of the American Association of Public Health Dentistry (AAPHD) is a student-run organization which aims to create an environment that enhances public health dentistry.

<http://www.aaphd.org/>

American Student Dental Association

The American Student Dental Association (ASDA) was established in 1971 to represent, serve, and support the needs and interests of all student dentists as they prepare to enter the dental profession. ASDA is the affiliate student organization of the American Dental Association (ADA). Structured as a network of local chapters, ASDA is uniquely geared to respond to the concerns of its members at the local, regional, and national levels. ASDA members from each chapter elect two individuals as delegates to serve in ASDA's House of Delegates, to represent their schools at association meetings and to serve as representatives in KDA's House of Delegates.

The University of Kentucky chapter has a history of being active at all levels. The local chapter sponsors an annual student convention with exhibitors, table clinic/research competition, and continuing education courses. The chapter also serves the community through its Saturday Morning Clinics, a program that provides dental care to children from low-income families. Additionally, the chapter sponsors a number of professional and social activities for its members. ASDA members are also encouraged to join the Kentucky Student Dental Society (KSDS), the affiliate organization to the Kentucky Dental Association. Information on KSDS is available from any ASDA officer.

Asian Dental Society: promotes dental health among the underprivileged Asian population in the greater Lexington area as well as the state of Kentucky. It also serves as a resource to the dental community in promoting cultural sensitivity and understanding. Members value diversity awareness as well as community outreach. Organization activities include: culture awareness events, such as lunar New Year, Asian potluck and "taste of the world", and community outreach programs, such as Asian night at Mission Lexington.

Christian Medical and Dental Association (CMDA): was founded in 1931 to provide Christian healthcare professionals and students with resources, networking, and educational opportunities. UK's CMDA chapter is open to any student or faculty in the medical or dental schools. They conduct Bible studies, hold social gatherings, and invite speakers to their monthly meetings.

Delta Sigma Delta: DSD is a group of dental students associated with the national dental fraternity Delta Sigma Delta. They participate and raise money for dental charities, run exceptional educational programs for dental students, and organize social events like Trivia Night, which benefits Mission Lexington (free clinic).

Hispanic Dental Association

Founded in 1990, the Hispanic Dental Association (HDA) is the national organization dedicated to provide leadership and represent professionals who share a common commitment to improve the oral health of the Hispanic community.

Omicron Kappa Upsilon

Omicron Kappa Upsilon is a national dental honor society founded in 1914. Every dental school in the United States has an active chapter. The Delta Epsilon Chapter of OKU is the chapter at the University of Kentucky College of Dentistry. Each year, the chapters elect alumni members from the graduating class. Only students in the top 20% of their class are eligible. From the top 20%, a number equal to no more than 12% of the entire class, who, in addition to scholarship, have demonstrated exemplary traits of character and potential qualities of future professional growth and attainment, may be elected by the active members of the chapter. Our chapter also recognizes the scholastic achievement of students through the Basic Science Award (awarded to a second year student) and the Kramer Award (awarded to a third year student).

Class Officers and Representatives

Each College of Dentistry class has a President, Vice-President, Secretary, Treasurer, Social Chair, ASDA Representative, Alumni Representative, two representatives to the College Code Committee, two representatives to the College Curriculum Committee and the 3rd and 4th year classes will also have two representatives to the College Admission Committee.

SPEA-Student Professional and Ethics Association: The purpose of this organization is to increase the overall level of ethics and professionalism at the University of Kentucky College of Dentistry.

Student Advisory Council

The Student Advisory Council (SAC) serves in an advisory capacity to the Dean by providing information and making recommendations to improve the quality of students' educational experience. SAC also serves as a forum through which students may exchange information, develop ideas, express concerns, and identify problems related to College educational or administrative policies.

SAC membership consists of the president and vice-president of each class of each student organization (e.g. ASDA, ADEA, SNDA, AAWD, HDA, and SRG), the UK Student Government senator, the first delegate of the ADEA Council of Students Association and a postdoctoral student dentist. The College's Dean, Assistant Dean of Admissions and Student Affairs and Director of Student Affairs also attend SAC meetings.

Student Government Association Senator

The purpose of the University of Kentucky Student Government Association (SGA) is to increase student influence over academic policy; to provide necessary student services; to protect and expand student substantive and procedural rights; and to better represent the student body in relations with the faculty, administration, Board of Trustees, and the Commonwealth of Kentucky. Annually, students of each College in the University elect an SGA senator who serves as a member of the Student Senate.

Student National Dental Association

The Student National Dental Association (SNDA) is the national organization that addresses the specific needs and interests of minority students. SNDA is the affiliate student organization to the National Dental Association (NDA). Information is provided annually by the Chapter's officers on membership and its many activities. The SNDA Chapter engages in several community service programs throughout the year.

Student Research Group

The Student Research Group (SRG) is affiliated with the American Association of Dental Research (AADR). Its primary purpose is to foster student involvement in research at the College. Student research is promoted by:

- Informing students about College research opportunities and support (i.e. elective courses, work-study, fellowships)
- Acquainting students with on-going research projects
- Providing students with information on how to do research, write abstracts and present the results of research studies through table clinics, posters and oral presentations
- Providing a forum for students to present and discuss research results
- Informing students about post-graduate dental research opportunities

Tau Sigma Military Dental Club: is a new student dental organization that seeks to promote oral health in the Lexington Community, to welcome new military-sponsored students into UKCD, provide information to current and potential dental officer candidates about serving in the military, and to participate in fund raising initiatives for Lexington area homeless vets.

Services

AudioVisual Library (AV)

The AV Library that was previously located at the College of Nursing Building (CON) Computer Classroom/Testing Center Room 625 has had all of its AV content relocated to the Medical Center Library. The primary mission of the AV Library is to provide study and lecture support for students, faculty and staff of the six Medical Center Colleges. The entire University, along with the residents of Kentucky involved in health care delivery, can access the audiovisual collection in its new location. For all AV library-related questions, contact the Medical Center Library User Services Desk (323-5300) or Bev Hilton (323-8008). http://www.uky.edu/Libraries/libhours.php?lib_id=15

College of Nursing Main Computer Lab

The computer lab is available to all UK students, faculty and staff. The following hardware is available: 42 Dell computers 8 Macintosh computers, 2 black and white multifunctional printer/copiers and 1 scanner. There is a variety of software available including word processing, spreadsheet, graphics and faculty developed applications. The lab is also fully networked and its computers may be used to communicate with any of the mainframes on campus. In addition, wireless networking is available. A Link-Blue student login account is required to access all computer applications from this lab. All computers are available on a first come/first serve basis. The computer lab closes 15 minutes before the closing of the AV Library. DART machines are available to add monies to PLUS accounts, also computer lab printers and self-serve copiers accept PLUS cards campus wide as well as. For more information call the lab at 323-4233.

College of Dentistry Web Site

Enrolled dental students should periodically browse the College website for student related information <http://Dentistry.uky.edu/current-students> and to gain access to web enhanced courses <http://Dentistry.uky.edu/academicaffairs>. The College website is also updated periodically: <http://Dentistry.uky.edu/>

College of Dentistry Clinical Information System (AxiUm)

The University of Kentucky College of Dentistry uses a clinic information system called AxiUm which is designed with state-of-the-art capabilities. The system is easy to learn and use, yet its great flexibility allows us to meet our clinical and financial information needs. The system has also allowed us to pursue a true electronic patient record with online charting, forms, progress notes, and digital radiographs.

Center for Graduate and Professional Diversity Initiatives

GPSDS is dedicated to innovatively promoting the recruitment, support, and development of persons who represent the diversity of our global community, in an effort to broaden the availability of exceptional students who will become tomorrow's successful health professionals: <http://www.uky.edu/Diversity/HCSDS/letter.html>

Student Listservs

Through the University listserv system, group accounts have been established as an easy means to send emails to a given class. Faculty, staff and students may send to these accounts. Any questions or concerns about the student listservs, please contact Leslie LeRoy in M-134.

First year Students: Dent20@lsv.uky.edu

Second Year Students: Dent19@lsv.uky.edu

Third Year Students: Dent18@lsv.uky.edu

Fourth Year Students: Dent17@lsv.uky.edu

Email (Electronic Mail)

All students receive a UK exchange email account (uky.edu) to send and receive electronic mail, as well as a google account through google apps for education (g.uky.edu). These are linked to UK Google Apps for Education. Students should not use their g.uky accounts for transmitted patient information (this should be done through the axiUm messaging system). Email from g.uky can be forwarded to any other account, but never should exchange email be forwarded to g.uky or google accounts. Students must use their UK exchange account while enrolled in the College as this is the address that the College will use for communication. The student is responsible for all information sent to their UK exchange email address. The email system provided by the University of Kentucky is for communications related to the business of the College or University, only. Reasonable exception can be made for important personal communications among two or a few persons. Personal communications such as these should not be distributed to distribution lists or other large groups via the campus email system. Students are responsible for reviewing the following campus policies related to responsible computing and rules of use for our campus: <http://www.uky.edu/ukit/help/uk-email-and-cloud-app-information> Violations of these policies will result in disciplinary action.

Students must maintain their official University exchange email accounts to be certain to receive emails from the class listservs. The University listserv system does not recognize forwarded accounts from systems such as yahoo, aol, etc. If you have questions about use of the email or email privilege, please contact the Office of Student Affairs.

Cloud Computing

Cloud Computing provides many benefits to our students, faculty and staff. The ability to save, edit and share information using cloud computing services, while helpful, raises many data security questions. We encourage the adoption of these resources including Google Apps and the Virtual Den (apps.uky.edu) but would like to remind our users that **information covered by HIPAA and FERPA may not be uploaded to these services.**

In online documentation for Google Apps:

Information protected by HIPAA and FERPA regulations may not be uploaded to Google Apps.

Social Media Guidelines

UK HealthCare recognizes the impact of social media websites like Facebook, Twitter and MySpace on our workforce. Our expectation is that faculty, trainees, students and employees know what is expected in our environment of health care and observe our policies on behavioral standards, patient privacy, use of personal electronic devices and hospital resources. Patient privacy is vitally important to us. We train regularly on our obligations related to privacy and security matters (HIPAA). Recent changes to the HIPAA rules require us to notify the federal government when patient privacy has been violated.

Below are some expectations when using social media sites:

- Do not "friend" patients
- Do not accept "friend requests" from patients or their family members
- Never share any patient information via Facebook or other social media
- Never post pictures of patients or pose with patients for pictures
- Never give medical advice via social media

Please view our [Social Media Guidance 2011 FAQ](#) for further information on UK HealthCare's social media guidelines.

Summary:

Incidental and occasional use of Internet and Web resources are permissible, but personal use should not adversely affect the responsibilities/productivity of any employee; nor should it detract from the professional perception of the work environment. Use discretion when posting on social media sites; remember this is public information that can be viewed by the public and our patients. Your supervisor has the responsibility to determine excessive usage or negative impact of assigned responsibilities. The supervisor will determine if access should be revoked and any disciplinary action if warranted.

Reference:

HP08-01 Behavioral Standards

<http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyID=897>

HP01-12 Confidentiality

<http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyID=779>

A09-040 Use of Portable Personal Electronic Devices

<http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyID=3368>

HP01-14 Management of Hospital Personal Computer Resources

<http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyID=781>

Medical Center Library

Located on the first floor of the Medical Sciences wing of the Chandler Medical Center across from the elevators; phone: 323-5300. The mission of the Medical Center Library (MCL) is to provide access to information essential for education, research, and patient care and to promote health information literacy. The MCL is a valuable resource for the six

medical center colleges, the UK Hospitals, and Kentucky health professionals. It contains a variety of journals, texts, and non-print media and has rapid access to resources it does not own. It provides automated systems for accessing its own collection and for conducting broad information searches over electronic networks.

The MCL web pages at http://www.uky.edu/Libraries/lib.php?lib_id=12 present new services and products, including the following: *InfoKat*, the online library catalog for UK libraries, *MEDLINE*, *CINAHL*, *TOXLINE*, *SPORT*, *Bioethics line* and other *OvidSP* databases via the web, *PubMed* and other free resources from the National Library of Medicine accessed through the web, *Stat!Ref*, *MD Consult*, *Up-to-Date*, *Micromedex*, *Web of Science*, *SciFinder Scholar*, over 26,000 full text electronic journals, evidenced based resources and community of science and discipline-oriented websites. Proxy server access is also available for literature searching and other off-campus use.

BoardVitals NBDE I and II Prep

A new resource for the University of Kentucky College of Dentistry, [BoardVitals](#) from STAT!Ref is a high-quality, effective and powerful exam review tool. Click the registration button below and follow the simple directions to access the resource now.

- Make sure to use your @[uky.edu](#) email address for registration
- Click the signup button and the system will send a validation e-mail
- Check your e-mail and click on the validation link in the e-mail

This new BoardVitals tool offers:

- The highest quality questions with detailed explanations to help prepare for the NBDE I and II Dentistry Exams
- High-yield, vetted questions listed up front in an effort to maximize study time
- Constantly evolving cloud-based system that updates every 24 to 48 hours based on changes and feedback
- Ability for users to create customized practice tests based on number of questions, subjects and more, to simulate exams and help increase board pass rates
- Advanced statistics so users can know where their strengths and weaknesses are, with suggested questions based on their performance
- Detailed, up-to-date explanations with each answer, with references and links to applicable sources
- Administrators can monitor student usage and performance to serve as a proactive remediation tool
- Faculty can send customized exams to students or utilize questions in classroom discussions and weekly didactic review sessions

The registration link embedded is: https://www.boardvitals.com/users/sign_up

BoardVitals Video

link: <https://www.youtube.com/watch?v=SVwvvtT5s4o&feature=youtu.be>

http://marketing.statref.com/lp/uky_boardvitals.html

A user services desk is staffed to assist in using MCL's resources. An educational program is offered in more than 13 areas to improve research and searching skills. Scheduled group classes and individual or curriculum-oriented instruction are available. Classes are held in the MCL 16-seat training room or can be taught in other locations as necessary. Electronic forms for requesting document delivery and interlibrary loan, asking a reference question, performing a literature search, scheduling a class, ordering materials to improve our collection, etc., are available on the home page.

For reading email, printing and other computer based activities, student dentists may use the public access computers (including wireless transmission) available throughout the Chandler Medical Center library including those located on the first floor in the back of the library. The Medical Center library and the enclosed computer lab are open Monday-Thursday, 6:00 a.m. – Midnight; Friday, 6:00 a.m. - 8:00 p.m.; Saturday, 8:00 a.m. – 8:00 p.m.; Sunday, Noon – Midnight. Please check with the library for holiday exceptions.

W.T. Young Library

In April 1998 the University of Kentucky opened the doors of the W.T. Young Library. Physical access to the UK Libraries' social sciences, humanities and life sciences collections has become much easier, with widely scattered material brought together in one site. The building contains 361,000 square feet (including a basement and five floors), seats over 4,000 patrons and will house 1.2 million volumes (in 198,828 linear feet or 37 miles of shelving). The library includes 21 group study/seminar rooms and seating for 350 in faculty/dissertation study areas. The building has six elevators and is fully accessible to people with physical disabilities. Visit the website:

http://www.uky.edu/Libraries/lib.php?lib_id=14

The William T. Young Library combines the humanities, social sciences and life sciences collections to assist patrons in research and to support multidisciplinary programs. It provides a state-of-the-art electronic infrastructure to take full advantage of current and emerging technology. It provides open, flexible space so that its services and facilities can adapt to future changes in patrons' needs.

The Library supports the University Libraries' role in meeting the information needs of off-campus users, including agriculture extension agents, 4-H agents, dentists and physicians in rural areas, public libraries, businesses, and public and private educational institutions throughout the state.

All books and journals from 1987 to the present and selected reference and textbook reserves regardless of age are housed in the Medical Center Library. Books and journals prior to 1987 are maintained in the W.T. Young Library. Contact the Library for hours of operation.

Parking and Security

Parking and Security Offices

University Parking Office 721 Press Avenue

Phone: 257-5757

University Safety Division, 305 Euclid Ave

Phone: 257-5770

The federally mandated annual Campus Security Report is published and distributed by the U.K. Campus Police Dept. and is available for review <http://www.uky.edu/EM/campus-security-and-crime-statistics-reporting.html>

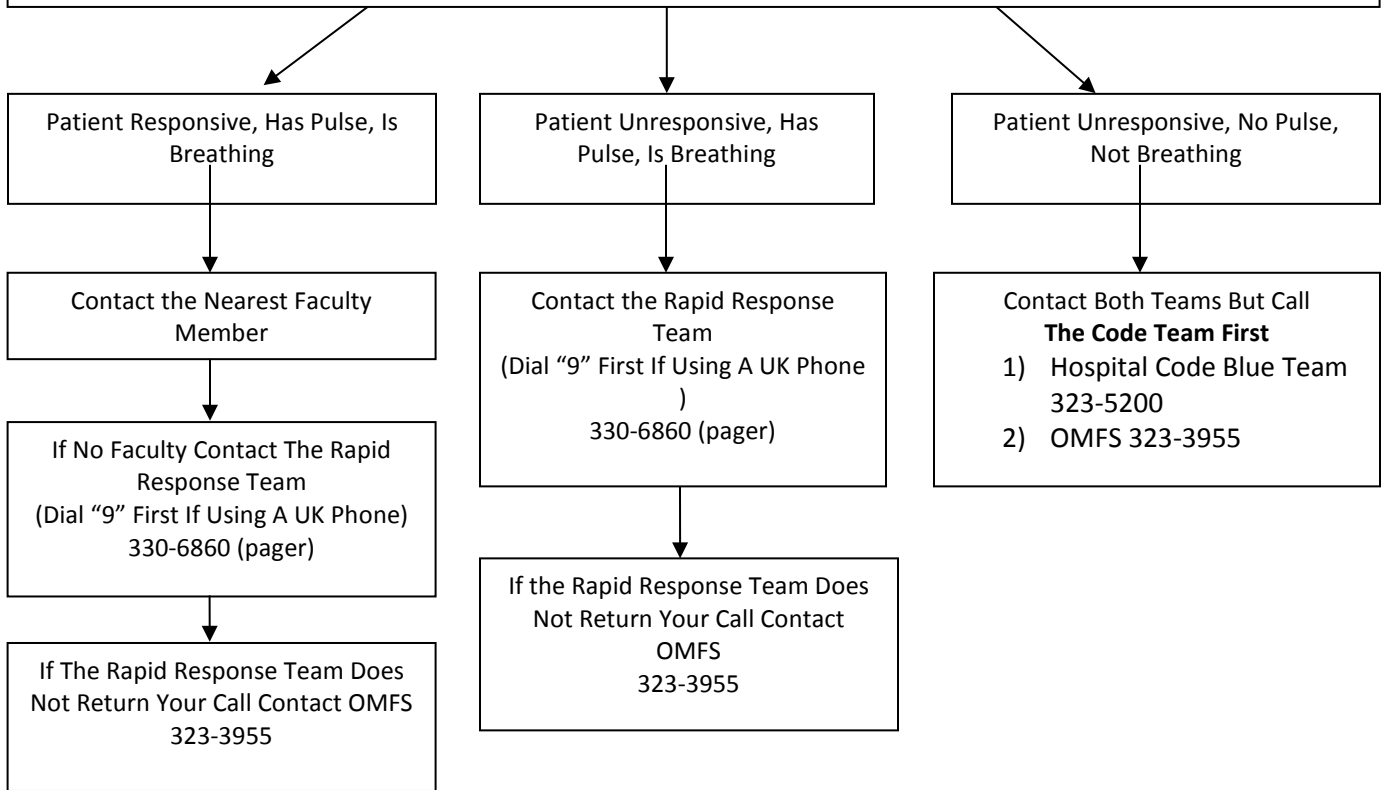
Medical Center Security Office

Chandler Medical Center (UKMC), Room Pavilion A00.806 Phone: 3-2356

Please Note: If you are within the Chandler Medical Center do not call 911. The College of Dentistry has an emergency response: 12.0 EMERGENCY ACTION PLAN - MEDICAL EMERGENCY

- 12.1 Implement the **BEAP** for Medical Emergencies for any injury or illness that requires more than simple first aid. Occupants of this building should implement the following Rapid Response Protocol for *ADULT* and *PEDIATRIC* medical emergencies established for all UK Medical Complex buildings.

**DENTAL SCIENCES BUILDING MEDICAL EMERGENCY RESPONSE PROTOCOL
ADULT AND PEDIATRIC PATIENT**



When you page the Rapid Response Team (if UK phone dial "9" first 330-6860) key in the phone number where you can be reached, then hang up the phone and WAIT for their return call. When they call provide any information they require, follow any instructions they give, remember to remain on the phone until the other party hangs up and make sure someone is present in the College of Dentistry first floor lobby and in the lobby of the floor where the emergency occurred to meet the Rapid Response Team and direct them to the proper location.

When you call the Hospital Code Blue Team (323-5200) and OMFS Team (323-3955) be prepared to give the following information:

- 1.) Your name and the phone number where you can be reached.
- 2.) Location of the emergency.
- 3.) Nature of the emergency if known (ex. allergic reaction, heart attack, etc.).
- 4.) Patient condition: are they breathing, are they responsive, do they have a pulse.
- 5.) Remember to remain on the phone until the other party hangs up and make sure someone is present in the College of Dentistry first floor lobby and in the lobby of the floor where the emergency occurred to meet the Team or Teams responding to the emergency and direct them to the proper location.
- 6.) Obtain Crash Cart from Oral Surgery on 5th Floor when calling Hospital Code Blue Team. (323-3955)

Parking Permits

All students parking on University property must have a valid hangtag parking permit. First and second-year student dentists are eligible for "K" lot (Commonwealth Stadium) permits only. Third and fourth-year student dentists are eligible for "K" or "E" permits. There is a fee for all parking permits; summer permits are prorated. Contact the Office of Admissions and

Student Affairs for more information.

Liability Coverage (Malpractice Insurance)

All students are covered by the UK HealthCare occurrence coverage through the UK HealthCare self-insurance program, while participating in approved patient care activities. This coverage does not always apply to off campus voluntary activities, especially those outside the region, state or country, unless the student is formally enrolled in a selective course offered by UKCD. For questions or additional information contact the Associate Dean for Administration or Associate Dean for Clinical Affairs.

University Health Service

If you are a full-time University of Kentucky student, you have access to University Health Service through your tuition and mandatory fees. University Health Service is open Monday through Friday from 8 a.m. to 6 p.m. during the fall & spring semesters. **Please note:** Appointment registration and check-in begins at 8:45 a.m. on Thursdays. Saturday Hours are 9 a.m. to 11 a.m. (fall and spring semesters only, when school is in session. There are no Saturday hours during the summer). Saturday hours are for urgent medical issues and follow-up visits from previous appointments. All Saturday visits are on a walk-in basis. Appointment phone lines are **not open** on Saturday. University Health Service will be **closed** for the Thanksgiving Holiday (Thursday through Sunday) and will also be **closed** Christmas, New Year's Day, Martin Luther King Day, Memorial Day, July 4th and Labor Day.

Phone Numbers:

- University Health Service Information: (859) 323-5823
- Appointments - Medical or Gynecology: (859) 323-APPT (2778)
- Appointments - Behavioral Health: (859) 323-5511
- Phone Information Nurse: (859) 323-INFO (4636)
- Health Education Information or Presentations: (859) 323-5823, ext. 8-3258
- Student Health Advisory Council (SHAC): (859) 323-5823 ext. 8-3258.
- Student Pharmacy: (859) 257-6451

Student Health Insurance Information

Students have access to a two-part health care system by utilizing the services provided by the mandatory *health fee* at University Health Service (UHS) and the benefits offered by Academic Health Plans in the school-sponsored *student insurance* program. Students are **expected** to have their own major medical health insurance to pay for hospitalization, surgical procedures, specialist consultation and other services not covered by the health fee. We strongly advise students to purchase a comprehensive plan.

The University Health Service can assist students in obtaining affordable, comprehensive student health insurance plans for themselves, their spouses and/or children. For more information visit <https://uky.myahpcare.com/> or contact Chavae Mock, Student Health Plan Administrator, at 859-218-3208 or chavae.mock@uky.edu Academic Health Plans Inc., in

corporation with Humana Health Care Inc., is your University-endorsed health insurance plan for 2016-2017.

Hospitalization Insurance

Services related to hospitalization, surgical procedures and specialist consultation (typically "insured services") are NOT covered by the health fee. Students are **expected** to have their own health insurance to pay these expenses (Note: International Students are required to have health insurance). Many students are covered by their parents' insurance. Students who are no longer considered dependents on a family policy or who otherwise need their own policy should consider purchasing the University-endorsed health insurance plan.

UK Student Group Insurance Plan

The University of Kentucky student health insurance plan is underwritten by United Healthcare. This annual plan provides year-round coverage. University of Kentucky undergraduate students taking six credit hours or more and enrolled graduate students are eligible for enrollment. Students may also purchase coverage for their spouse and/or children. The premium may be paid by e-check or any major credit card.

Although students are encouraged to enroll at the beginning of the school year, enrollment is available throughout the policy year. For further information and enrollment dates visit Academic HealthPlans/Humana or call University Health Service (859) 323-5823. For detailed information on the UK Student Insurance Plan, you may browse through the Insurance FAQs page on the Academic Health Plans/Humana website:

<https://www.academichealthplans.com/uky/index.php>

International Students

All International students are required by the University to have health insurance which meets the University of Kentucky minimum criteria. If you are on an F-1, J-1, or J-2 Visa, you are automatically enrolled in the Student Health Insurance Plan when you register for classes. The charge for insurance is applied directly to your student bill. If you have any questions, please call, Health Insurance Coordinator 859-218-3208.

Funded Graduate Students

All enrolled, degree-seeking graduate students with full-time assistantships or institutional fellowships (or a combination of the two) are automatically enrolled in the University's student insurance plan through the Graduate School Funding Office. For more information about funded student insurance, see <http://www.gradschool.uky.edu/> or contact the Graduate School Funding Office at (859) 257-6608.

Wildcard Badge

Students must have a Wildcard I.D. badge. You are expected to wear your Wildcard I.D. badge in UKMC facilities, and wearing the badge is required when not gowned. Badges are also required for admittance to the facilities on evenings and weekends.

Campus Information

Campus Recreation

- **Boone Indoor Tennis Center (257-2777)**
Four indoor courts located near the Seaton Center are open to students with I.D. from mid-October to mid-April. You must reserve a court in advance by calling after 11:30 a.m.
- **Intramural / Club Sports (257-6584)**
Go to room 172A, Johnson Center or call 257-6584
Website: <http://www.uky.edu/StudentAffairs/CampusRec/intramurals/index.html>
- **Lancaster Aquatic Center (257-7940 or 257 7943)**
Located at the Seaton Center. You must show your student I.D. to use the 50-meter pool facility. Hours are Monday - Friday: 10:00 a.m. – 2:00 p.m. and 5:15 p.m. -9:00 p.m.
Summer hours from June 1, August 1: Monday – Friday 11:00 a.m. – 7:00 p.m., closed weekends. Visit the website:
<http://uky.edu/studentaffairs/campusrec/aquatics>
- **Nutter Field House (257-7122)**
The Field House has an indoor jogging track open to students, faculty and staff during the fall and spring semesters. The facility is open Monday – Friday 11:30 a.m. – 1:00 p.m.
- **Outdoor Track**
There is an outdoor jogging track near the Cooperstown apartment complex. The track is available whenever the gate is unlocked.
- **Johnson Center (257-9383)**
Room 177 for Campus Recreation information. You must show your student I.D. to use the facility which has a 12,000 square feet fitness center with free weights and plate loaded stations, 75 Cardiovascular and selectorized stations, racquetball courts, multi-purpose gymnasium, elevated 200 yard Run-Walk Track, climbing wall, aerobic studios, locker and shower facilities. The fall and spring hours are different than summer hours, so be sure to call. The racquet ball courts should be reserved two days in advance (257-3928). Guest passes are available by calling 257-3298 or go to room 177 Johnson Center.
Fall and spring hours:

Monday – Friday	6:00 a.m. - Midnight
Saturday	9:00 a.m. - 9:00 p.m.
Sunday	11:00 a.m. - Midnight
- **The Arboretum (227-6955)** The Arboretum, located behind the football stadium, 500

Alumni Drive began in 1991 and is continuing to boast 100 acres of year-round color and plants. The gardens are open from dawn until dusk each day. Admission is free. Open 365 days a year. Walk through them at your leisure or Docent-led free tours through the gardens are available for groups, year round. Call us at 859-257-6955 between 8:30am to 2:30pm on weekdays to schedule a tour. For more information visit the website:

<http://www.ca.uky.edu/arboretum/>

- **Campus Bus Information (257-5757)**

The University provides a free bus from the Commonwealth Stadium (K lot) to the campus and Medical Center. The buses resemble the large city buses but are marked "Medical Center Route" or "Stadium Route". Buses are scheduled every 5-10 minutes. Call Parking and Transportation for additional schedules or details or visit their website:

www.uky.edu/pts

- **Shuttle Information/On Demand Night Service**

Parking and Transportation Services will be operating the on-demand night bus service during the Fall and Spring semesters when class is in official session.

Cats Cab is a late night transportation service designed to enhance the safety efforts of the University and surrounding community in partnership between Student Government and Bluegrass Cab. UK students can ride for free within New Circle Road with a valid student ID. For destinations outside of New Circle, students will pay a discounted fare. The Cats Cab service operates Thursday through Saturday nights from 10 p.m. - 3 a.m. Call 221-RIDE (7433) to make a pick-up request.

http://www.uky.edu/pts/buses-and-shuttles_campus-shuttles

CAT Tracker – Tracks CATS Buses in Real-time with Transloc

<http://uky.transloc.com/>

- **Bicycle Information**

As the campus and its activities change and grow, the University desires to enhance the use of bicycles on campus as a means of alternative transportation. Please call (257-5757) or visit the website to learn about routes, parking locations and related campus policies. Website: www.uky.edu/pts

For information on the free bike checkout open to students visit the website:

<http://www.uky.edu/hr/wellness/exclusive-offerings/wildcat-wheels>

Cultural Opportunities on Campus

- **Martin Luther King, Jr. Cultural Center (257-4130)**

The Martin Luther King, Jr. Cultural Center provides year round cultural and educational activities including lectures, workshops, seminars, art exhibits, theatre, music and dance. The Center maintains a collection of books, periodicals, audio and videotapes related to many diverse aspects of African-American culture. The Center is located in 133 Student Center and is open Monday through Friday from 10:00 am to 6:00 p.m.

Website: <http://www.uky.edu/MLKCC/index.html>

- **Otis A. Singletary Center for the Arts (257-1706)**
The Singletary Center for the Arts is the performance facility for University, community, and regional events. The Center includes a 1500-seat Concert Hall and a 400-seat Recital Hall both designed for acoustical excellence. Programs include the Lexington Philharmonic Orchestra, the University Artist Series featuring classical concerts by world-renowned musicians, and the Central Kentucky Chamber Music Society. Many programs at the Center are free or offer discounts for students. For more information call 257-1706 or visit the website: <http://www.uky.edu/SCFA/index.php>
For the ticket office call 257-4929 or online: <http://www.uky.edu/SCFA/tickets.php>
- **Guignol Theatre (257-3297)**
The Department of Theatre, College of Fine Arts, produces several staged works each year that offer a range of dramatic performances for the University and the community. Call for more information.
- **University Art Galleries (257-2808)**
The University has five main art galleries. The Tuska Gallery in the Fine Arts Building presents a series of exhibitions each year, including group shows, student exhibitions in various media, and works by major artists. These exhibitions feature painting, drawing, graphic arts, photography and sculpture, as well as experimental forms and media. The Student Center Gallery is run by a student board and offers a similar fare. The Raymond Barnhart Gallery in the Reynolds Building serves students and faculty in the art studio program. The Pence Hall Gallery, under the direction of the College of Architecture, combines exhibits of architectural interest featuring painting, drawing and sculpture.
- **University Art Museum (257-5716)**
The University Art Museum, one of the major art museums in the state, serves a regional audience of over 400,000 people in fifty Kentucky counties. Located in the Singletary Center for the Arts, it offers a variety of changing exhibitions and education programs. The museum is open noon to 5:00 p.m., Tuesday through Sunday (except University holidays). Admission is free. Visit the website: <http://www.uky.edu/ArtMuseum/>
- **University Concerts (257-4900)**
The School of Music, College of Fine Arts, sponsors a variety of faculty and student recitals and concerts throughout the year. Most faculty recitals, faculty ensemble concerts, and concerts by student organizations are free to students, faculty, staff and the community.
- **College of Medicine Humanities Festival (323-5261)**
The festival was inspired by Sue Fosson, former assistant dean of Student Affairs for the UK College of Medicine. It is held twice a year and sponsored by the College of Medicine

Student Affairs Office. Students, staff and faculty from the Colleges of Medicine and Dentistry will showcase their talents in the performing arts in a festival of music, movement and poetry. For more information please contact **Carlene Hodges** at (859) 323-5261.

Medical Center Eating Facilities

- *Hospital Cafeteria* located on the first floor of the Chandler Medical Center.
- *Whitney-Hendrickson Café* is located on the first floor of the Whitney-Hendrickson building and serves breakfast and lunch Monday - Friday.
- *The Wildcat Deli* is located across the street on the third floor of the Kentucky Clinic.
- *Starbucks coffee* is located on the first floor of the Kentucky Clinic
- *The V.A. Café* located in the Veterans Hospital on the ground floor.
- *Terrace Café* is located on the ground floor of the New Hospital-Pavilion A
- *Outtakes* is located on the ground floor of the New Hospital-Pavilion A
- *The 90* is located across the street from the W.T. Young Library
- *K-Lair Grill* is located in Haggin Hall

Sporting Events

- **Ticket Information**

Block seating is available for ASDA members. For more information, see your ASDA class representative or call the Joe Craft Center ticker office (257-1818)

- **UK vs. U of L Games**

The College of Dentistry competes in an annual flag football game with the University of Louisville School of Dentistry, fielding both a men's and women's team each year. The game is played in conjunction with the UK/U of L men's football game in the fall.

- **Football and Basketball Schedules**

For any fan information call UK Sports Information (257-3838) or view the UK website for schedules and other information: <http://www.ukathletics.com/>

Student Center (257-6627 or 257-5781)

The Student Center is a community center offering cultural, recreational, and organizational outlets for the University population. Students can take in a movie at the Worsham Theatre, browse through the University Bookstore, stop at the food court or Starbucks, or relax with friends in one of several lounges or the game room. For more information call the Director's Office at 257-5781 or visit the Website: <http://www.uky.edu/StudentCenter/>

Lexington



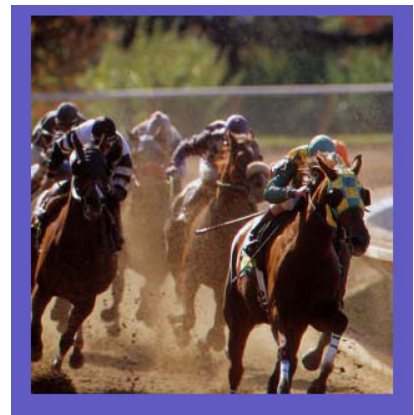
An academic institution is more than its campus and classrooms; it is also the surrounding environment which supports social, emotional, and intellectual development.

Located in the internationally famous Bluegrass Region of Kentucky, Lexington is 84 miles south of Cincinnati and 80 miles east of Louisville. With a population of 260,512, Lexington offers a multitude of job opportunities, entertainment, dining, recreation, and cultural events that add a special dimension to education.

Encompassing two centuries of history, Lexington was one of the first settlements beyond the Allegheny Mountains. Today, historical homes and monuments throughout the city remind citizens and visitors of Lexington's gracious heritage. This, along with its increasing business community with large corporations such as Lexmark, Ashland Oil, Procter and Gamble, General Electric, and nearby Toyota help create the unusual atmosphere of a thriving, growing city which still retains the appeal of a small community.

Cultural life is alive and well in Lexington. The Council of the Arts, Inc., composed of many non-profit corporate organizations, enhances the area's cultural resources with an active program in all the fine arts. Lexington is one of the few cities of its size to offer a philharmonic orchestra and a ballet company. Community theater groups perform regularly and national touring groups present Broadway attractions at the historic Opera House. The area also enjoys the unique exhibits at the nationally-accredited Art Museum located in the University's Otis A. Singletary Center for the Arts.

Lexington is known as the horse capital of the world, and for good reason. Within a 35-mile radius of downtown, several hundred horse farms can be found ranging in size from a few acres to 6,000 acres. Area farms breed and train some of the world's best thoroughbred, standardbred, and saddlebred horses. Famous horse sites in the region include the Kentucky Horse Park, Calumet Farm, and Keeneland Race Course. Tourists also are attracted to the greater Lexington region by the historic and beautiful scenery of the Bluegrass, which includes the Red River Gorge, Shakertown at Pleasant Hill, Fort Boonesborough, and an excellent state park system.

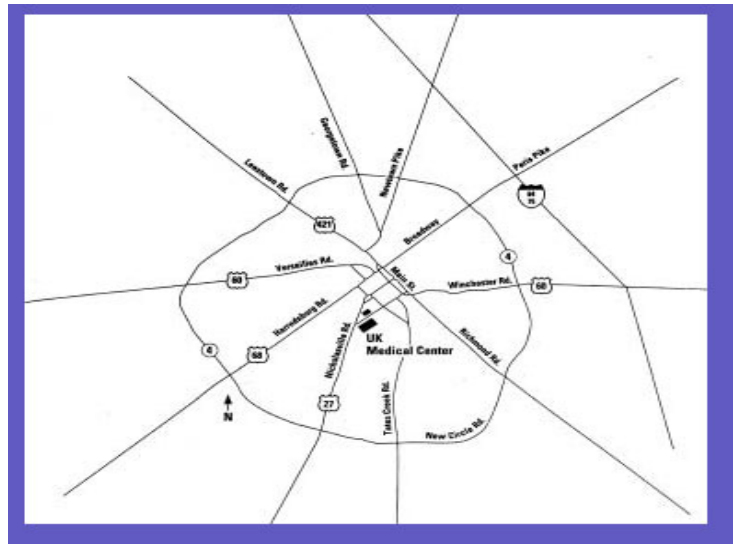


Directions to the University Kentucky College of Dentistry

Directions from I-75 South

/I-64 East:

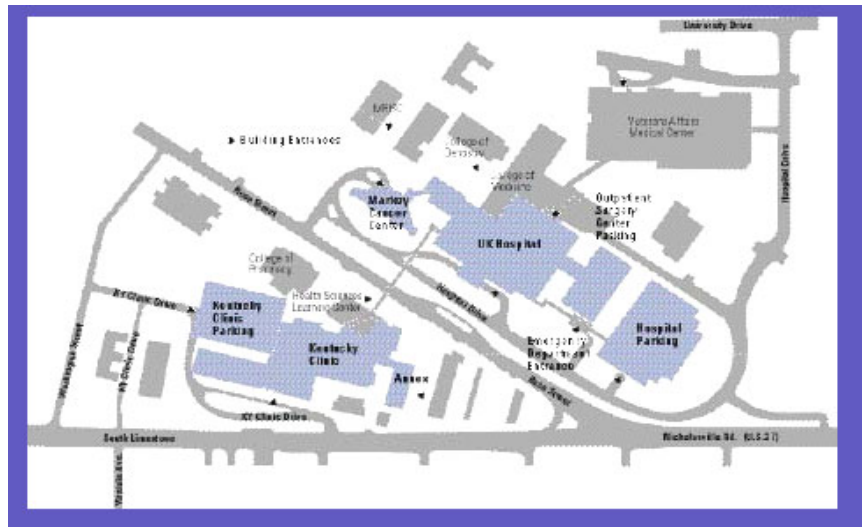
After the merger of I-75 South and I-64 East, take the first exit marked Newtown Pike (Exit 115). Veer right off the exit and follow Newtown Pike toward downtown Lexington. After traveling approximately 3.3 miles, turn left onto West Main Street (Route 25). Continue on West Main Street through 7 traffic lights and turn right onto Rose Street. Follow Rose Street until you see the pedway that connects the Chandler Medical Center with the Kentucky Clinic. Turn left just before the pedway and follow the signs for Hospital parking. Enter the hospital through the main entrance revolving door and receive further directions from the staff at the information desk.



Directions from I-75 North/I-64 West:

I-64 West: Exit on I-75 South and take the first exit, which is Winchester Road (Route 60). Follow directions below.

I-75 North/I-64 West: Exit on Winchester Road (Route 60). Follow Winchester Road West toward downtown Lexington. After 10 traffic lights the road will split; stay to the left, following the sign for Route 60 West. At the next stop light (approximately 4 miles from the interstate exit), turn right onto Main Street. Immediately make your way into the left lane and turn left at the first traffic light onto Rose Street. Follow Rose Street until you see the pedway that connects the Chandler Medical Center with the Kentucky Clinic. Turn left just before the pedway and follow the signs for Hospital parking. Enter the hospital through the main revolving door and receive further directions from the staff at the information desk.



APPENDICES

- A. College of Dentistry Code of Professional and Academic Responsibility
- B. Academic Disciplinary Policies
- C. Miscellaneous Academic Policies
- D. Inclement Weather Emergency Closing Operation
- E. Policy on Technical Standards for Dental Students
- F. Fitness for Duty Evaluations
- G. Disability Resources for Students
- H. College of Dentistry Academic Calendar
- I. College of Dentistry Course Descriptions
- J. College of Dentistry - Consent to Treatment
- K. University of Kentucky / UK Healthcare – Consent to Treatment
- L. University of Kentucky / UK Healthcare – Universal Protocol
- M. University of Kentucky / UK Healthcare – Incident

APPENDIX A

College of Dentistry

Code of Professional and Academic Responsibility

The faculty of the University of Kentucky College of Dentistry believes that health professionals have unique responsibilities to society. The dental profession requires men and women of integrity who live private and professional lives that exemplify high moral conduct. The service relationship of clinicians with patients is based on trust. Health professional students must understand the moral implications of such a relationship and the responsibilities they incur in becoming a health professional. Dentists may be scientifically knowledgeable and clinically capable, but lacking honesty, they betray both their patients and the profession.

I. Introduction and Overview

While individuals must assume responsibility for their own behavior, educational institutions have a responsibility to instruct students in ethics and to encourage moral behavior. The College of Dentistry stands for, and seeks to instill in its graduates, high moral standards. Faculty and students share the responsibility to insure that a College community is maintained that supports these values. The goals of the College Code are to:

- engage predoctoral, postdoctoral students, fellows and faculty in professional self-regulation, so that the College becomes a laboratory to reinforce principles of ethics and professional responsibility.
- establish and clearly communicate standards for professional and academic behavior that are expected from members of the College community.
- help students and faculty consider in the context of everyday College life, moral obligations they have as members of society, and what additional responsibilities they incur as dentists.
- link College expectations for integrity and professional behavior to University policies.

This document describes the policies and procedures for the College of Dentistry Code of Professional and Academic Responsibility. All predoctoral, postdoctoral students, fellows and faculty members are expected to abide by the Code. A College Code Committee determines guilt concerning reported student academic infractions of the Code. Penalties will be recommended and administered upon rendering of a guilty verdict after a hearing with appropriate subcommittee of the honor code committee, where appropriate, by the Dean of the College, following University policies and procedures. Faculty infractions will be resolved by the department chairperson and the Dean using existing University policies and procedures.

II. Student Participation

All students enrolled in courses for the DMD curriculum, graduate programs or postdoctoral residencies and fellowships offered by the College of Dentistry are bound by the Code. Enrollment in the College of Dentistry's programs is conditioned upon execution of an agreement to follow the Code.

III. Intent and Scope of the Code

The Code is intended to engage predoctoral, postdoctoral students, fellows and faculty in professional self-regulation, so that the College becomes a laboratory for reinforcing principles of ethics and professional responsibility. An important objective is preparation for professional practice. **The Code is based on the concepts that integrity is an essential professional trait; and self-governance is an important professional responsibility. Thus responsibility, in the case of student compliance will be primarily vested with students to help them govern their own conduct.** The Code includes all examinations, patient care and preclinical projects, independent assignments and extramural education activities carried out in the College, the Medical Center or at extramural education sites. Professional responsibilities described in documents approved by the University Senate and/or the Board of Trustees is as follows;

Implementation Effective July 1, 1992

Approved by University Senate, April 13, 1992

A. Medical Center Health Sciences Student Professional Behavior Code

(Effective June 19, 1984. Revision effective January 29, 1988) This Code covers standards of professional practice drawn from the legislated practice acts of the professions with education programs in the Medical Center. These standards form the basis of expected professional conduct. Examples of unprofessional conduct are: any behavior or action that deceives defrauds or harms the public and/or the profession; abuse of a controlled substance or drug; and chronic or persistent abuse of alcohol. Appendix I includes a listing of expected professional standards from the *Health Sciences Student Professional Behavior Code*.

B. Student Rights and Responsibilities, University of Kentucky

(Revised and published usually annually)

These policies and procedures outline the University expectations regarding academic offenses (plagiarism, cheating, and falsification or misuse of academic records) and non-academic disciplinary offenses. Examples include theft and lying. Appendix J lists expectations from the *Student Rights and Responsibilities* document. Note: Section VI of the University Senate Rules includes all policies and procedures on student academic affairs, including those excerpts on academic offenses cited in *Student Rights and Responsibilities*.

C. Other Policy Statements

Appendix L describes the University's expectations regarding drugs and alcohol. Faculty responsibilities are described in the Faculty Code (Section VII, *University Senate Rules*) and the *University Policy on Ethical Standards and Misconduct in Research*. Appendices M and N list responsibilities and definitions.

IV. Responsibilities of the College Code Committee

A. General Responsibilities

1. To inform students and faculty about the College Code during a bi-annual hospital auditorium meeting,
2. To secure acknowledgment statements from new statements from new pre-doctoral students, new postdoctoral students, fellows and new faculty
3. To review annually how the Code is working and recommend improvements.
4. To submit an annual report of committee activities recommendations to the Dean.

B. Student Hearings

1. To conduct hearings to determine guilt or innocence for students accused of infractions as defined in Sections III and VIII of this document.
2. To insure that due process as provided by this code is followed in all student hearings.
3. To report hearing actions, with supporting information, to the Dean.

The College Code Committee will conduct hearings to determine the guilt or innocence of students charged with:

- a. the academic offenses of plagiarism, cheating, or falsification or misuse of academic records;
- b. infractions involving professional behavior that occur in conjunction with the curriculum, including extramural education sites;
- c. infractions for non-academic offenses that occur within the College or associated with the curriculum, including extramural sites.

For non-academic offenses and professional behavior infractions that occur **external** to the curriculum and the College, the College Code Committee shall communicate the reported infraction within three days from the time it is made aware of the infraction to the Dean. These infractions will be addressed using College, Medical Center and University policies and procedures. Nothing contained herein will be construed to mandate waiver of any student rights granted by the Board of Trustees and the University Senate.

V. Penalties for Student Infractions

Penalties for students found guilty of an infraction by the appropriate subcommittee of the honor code committee will be recommended and administered, where appropriate, by the Dean, using policies and procedures in the *Health Sciences Student Professional Behavior Code*, *Student Rights and Responsibilities*, the *University Senate Rules*, and *Drug Free Institution*. Penalties and procedures are described in these documents. Copies of penalties (sanctions) excerpted from the various University policies are available for review in the Office of Student Affairs and the Office of the Education Program Head.* It is the responsibility of the Dean to inform the Registrar of the proceedings and the outcome according to Senate Rules VI - 6.4.9.

VI. Code Rules for Student Infractions

Rules of conduct and responsibility are essential for a profession and for the College to function harmoniously. Failure to deal with infractions or suspected infractions is also an infraction. To establish a successful Code system, individuals must assume personal

responsibility and practice self-governance. The student and faculty responsibilities are listed below.

A. Student Infractions: Student Identified

1. If a student **suspects a Code infraction**, he or she **must** choose one of three options:

Option One

The student speaks to the entire class, stating the nature of the **suspected infraction** without identifying individuals, and requests that the activity stop. This option warns anyone who may have placed her/himself in a compromising position.

In the College of Dentistry, academic and professional and other offenses raise serious questions about the student's suitability for professional practice. Accordingly it is customary in the College to use strong sanctions. For example, recent precedent for academic infractions is suspension from the College for an extended period, usually involving one full academic year or an equivalent sanction.

Option Two

The student delivers a direct oral warning to the individual or individuals, pointing out the **suspected Code infraction**.

Option Three

The student reports a **suspected infraction** to a Code Committee member.

2. If a student **has strong reason to conclude either by personal observation or by other convincing evidence that an infraction has occurred**, then he/she must inform a Code Committee member who will then, at the student's request, advise the accuser of his/her options, which include:
 - a. Code member has discussion with the student who allegedly committed the infraction
 - b. Code member has discussion with appropriate faculty member
 - c. Code member informs the hearing officer to initiate a preliminary inquiry

B. Student Infractions: Faculty Identified

1. If a faculty member **suspects a Code infraction**, he or she must choose one of three options:

Option One

The faculty member speaks to the entire class, stating the nature of the **suspected infraction** without identifying individuals, and requests that the activity stop. This option warns anyone who may have placed her/himself in a compromising position.

Option Two

The faculty member directly warns the individual or individuals, pointing out the **suspected infraction**.

Option Three

The faculty member reports a **suspected infraction** to a Code Committee member.

1. If a faculty member **has strong reason to conclude either by personal observation or by other convincing evidence that an infraction has occurred**, then he/she **must** inform a Code Committee member who will then at the faculty member's request, advise the accuser of his/her options, which include:
 - a. Code member has discussion with the student who allegedly committed the infraction
 - b. Code member informs the hearing officer to initiate a preliminary inquiry

VII. College Code Committee

This Committee administers the Code for all students enrolled in courses for the DMD curriculum, in graduate programs and/or all College postdoctoral residencies and fellowships.

A. Composition

The College Code Committee will have 20 members:

Two representatives from each class of predoctoral students (8 representatives),

Eight postdoctoral student representatives,

Four faculty appointed by the Dean and College Council

A quorum of the Committee will be 10 members, including at least two faculty.

Predoctoral Student Representatives

The class president and vice-president will represent the first-year class. Thereafter, each class will annually elect its Committee representatives. Elections will be held in late spring for the following academic year. If a student committee member is charged with a Code infraction, a replacement representative will be randomly assigned from that individual's class by the Office of Student Affairs.

Postdoctoral Student Representatives

Each year, two representatives of each program will be randomly selected by the Office of Student Affairs from the graduate students, residents and fellows enrolled in four of these programs:

Pediatric Dentistry

Periodontics

Orthodontics

Oral and Maxillofacial Surgery

Orofacial Pain

General Practice Residency

A rotation schedule will be established to distribute this responsibility among

four of the six programs each year. If a postdoctoral representative is charged with a Code infraction, a replacement will be randomly assigned by the Office of Student Affairs from the postdoctoral student roster.

Faculty Representatives

Four members will be appointed by the Dean after recommendation of the College Council. Terms will be staggered, with two new members each year. Each member serves for two years.

B. Hearing Subcommittees

Predoctoral Student Hearing Subcommittee

Subcommittees will be used to conduct hearings for predoctoral student infractions. The subcommittee will consist of the **eight** student dentist representatives and the **four** faculty representatives.

Postdoctoral Student Hearing Subcommittee

The subcommittee for reported postdoctoral student infractions will consist of the **eight** postdoctoral student representatives and the **four** faculty representatives.

C. Committee Officers

The Committee will elect a predoctoral student Hearing Officer for the predoctoral student subcommittee from the student dentist representatives. A student Hearing Officer will be elected from the postdoctoral student representatives for the Postdoctoral Subcommittee. A secretary will be elected from the faculty representatives to work with both subcommittees. If a majority decision is not reached concerning selection as hearing officer or secretary, a random draw will be used by the members to determine the holders of these positions

D. Quorum for Hearings

The quorum will be **eight**, including at least **two** faculty.

VIII. Subcommittee Procedures

Staff support, record maintenance and procedures for hearings will be provided by the Office of Student Affairs. All information will be confidential.

A. Reported Infractions and Due Process

A. Reported Infractions and Due process (changes approved by the College Code Committee on April 24, 1996)

When a preliminary inquiry is requested by a student or faculty member, the College Code Committee member will immediately inform the Hearing Officer, who will initiate a preliminary inquiry. The inquiry is intended to ascertain if there is sufficient evidence supporting the allegation to warrant calling a subcommittee planning meeting. This decision will be made following the preliminary inquiry meeting by the Hearing Officer, a second predoctoral student, and a faculty member. In addition,

the inquiry will include:

1. a meeting with the person(s) named in the allegation, the student(s) and/or faculty presenting the allegation, others chosen by the Hearing Officer who have direct knowledge of the incident, and the three members representing the appropriate peer subcommittee involved in the inquiry (four persons are elected: a Hearing Officer, a faculty member, a second student not in the Hearing Officer's class, and an alternate student who will only serve in the place of the Officer or second student, as needed; the student members who participate in the preliminary inquiry cannot be members of the same class as the accused)
2. careful consideration of the evidence;
3. a review of University policies, standards and rules that apply; and
4. a simple majority decision by the three members conducting the preliminary inquiry to call a subcommittee meeting or to dismiss the allegation based on the evidence presented.

If a planning meeting is called, the College Code Subcommittee will:

1. clarify the infraction and the nature of the evidence;
2. review University policies, standards and rules that apply;
3. set a date and time for the student hearing; and
4. review student hearing procedures.

Following this meeting, the accused individual(s) will be informed of the charge with a written statement setting forth:

- a. the reported infraction;
- b. the identity of the party reporting the infraction;
- c. the grounds or information provided by that party as the basis for reporting the infraction;
- d. the University, Medical Center or College policies, standards or rules which are claimed to have been violated by the reported infraction;
- e. a listing of witnesses who may be needed to provide further information about the reported infraction
- f. the party's rights to be heard before an impartial committee:

- g. the party's right to decline to give testimony, the exercise of which right shall not be considered evidence of guilt;
- h. notification that the written statement is not a conclusion on the merits of the reported infraction;
- i. the date and time for the student hearing;
- j. the procedures to be used for the student hearing.

Except in extenuating circumstances (e.g. illness, University holidays, student and faculty breaks, acts of God, and faculty or student absences), the preliminary inquiry, which includes informing the accused students(s), and, if appropriate, the planning meeting should occur within ten days of the reported allegation.

B. Student Hearings

1. The Subcommittee will start hearings for the accused as soon as possible following the planning meeting. The hearing must be completed within 20 school days after the student is informed via the written statement, except in extenuating circumstances (e.g., illness, University holidays, student and faculty breaks, and acts of God).
2. The Hearing Officer will preside at the hearing. A quorum of at least eight must be present, including a minimum of two faculty and six students.
3. A member of the Code Committee accused of an infraction will be disqualified as a member of that Subcommittee.
4. The Subcommittee may request information from any source and will interview all parties involved.
5. A **guilty** verdict requires a majority vote of members who have been present for all the proceedings. A verdict of **not guilty** may be made either by an equal vote or a majority vote of members who have been present for all the proceedings. A tie vote will be considered a not guilty verdict.
6. If the predoctoral or postdoctoral student is found **guilty**, the case is forwarded to the Dean, who will recommend and administer penalties, where appropriate, according to College, Graduate School, Medical Center and University policies and procedures. Penalties for graduate students will be assigned after consultation with the Dean of the Graduate School. If the student dentist or postdoctoral student is found **not guilty** in a hearing, the case is dismissed and all reference to the incident will be deleted from the academic record and file of the student.

IX. Provisions for Student Appeal

A student found guilty by the Code Committee will have all rights of appeal granted by University policies.

X. Faculty Responsibilities

Faculty are full participants in the College Code. They are expected to be models of professional behavior. They have the following responsibilities in addition to those in the state dental practice act.

A. Course Responsibilities

Faculty must:

1. explain, at the beginning of every course, the type and amount of work a student should do on his/her own, without advice or assistance from anyone. These instructions must be included in the course syllabus.
2. state, orally or in writing, all general rules and directions for an examination or exercise. Special conditions about examinations should be attached in writing to the examination, e.g., where the test may be taken and how long the student has to take the examination. These conditions must define how questions will be addressed during the examination. The faculty member will have the option not to answer questions.
3. help students avoid situations where Code violations may occur easily. At the discretion of the faculty, this includes the proctoring of exams using qualified individuals, using random pre-assigned seating and designated storage areas for notebooks and texts. Other provisions may be used based on class recommendations through their officers.
4. administer examinations in a manner consistent with the intent and spirit of the Code. Some examinations may require the presence of faculty during the entire examination or at predetermined intervals (for example, practical examinations). However, the intent is for a faculty not to play a policing role during examinations by proctoring exams.

B. University Code of Faculty Responsibility

Faculty are responsible for standards and procedures described in the Faculty Code (Senate Rules, Section VII.). (Appendix E)

C. Policy on Ethical Standards and Misconduct in Research

Faculty are responsible for appropriate conduct in scientific investigations. University administrative regulations contain procedures for handling allegations of scientific misconduct (Section AR 11-4.0-2). (Appendix F)

D. Policy on Drug Free Institution

Faculty are responsible for standards described in the *University Policy on Drug Free Institution* (August 1990). (Appendix D)

XI. Code Rules: Student Reports of Faculty Infractions

Student reports of faculty infractions will be made according to University policies and procedures, including the opportunity for consultation and assistance, including mediation from the University Ombud. (*Senate Rules*, Sections VI. and VI I.)

- A.** If a student **suspects a faculty member has committed an infraction**, he or she must choose one of four options.

Option One

He or she discusses the **suspected infraction** directly with the faculty member.

Option Two

He or she reports the **suspected infraction** to a College Code Committee member and requests that the committee discuss it, without identifying individuals, with the appropriate faculty.

Option Three

He or she reports the **suspected infraction** to a College Code Committee member with a request that the report of alleged infraction be forwarded to the Chairperson of the academic department where the faculty member has his/her primary appointment.

Option Four

He or she reports the **suspected infraction** directly to the Chairperson of the academic department where the faculty member has his/her primary appointment.

- B.** If a student **has strong reason to conclude either by personal observation or by other convincing evidence that a faculty infraction has occurred**, then he/she **must** report this

infraction. The report can be made directly to the chairperson of the academic department

where the faculty member has his/ her primary appointment. A student may also seek the advice and support of a faculty member with whom he/she is familiar prior to reporting to the chairperson or to one of the following individuals:

Member, College Code Committee Course Director

Associate Dean of Academic Affairs

Associate Dean of Clinical Affairs

Associate Dean of Research and Graduate Studies

Program Director of appropriate Postdoctoral Program

Dean, College of Dentistry

These individuals or the Secretary of the College Code Committee will immediately forward notice of the alleged infraction to the Department Chair.

XII. Code Rules: Faculty Reports of Faculty Infractions

- A.** If a faculty member of the College **suspects that a faculty member has committed an infraction**, he or she must choose from one of three options.

Option One

He or she discusses the **suspected infraction** directly with the faculty member.

Option Two

He or she reports the **suspected infraction** to a College Code Committee member and requests that the Committee discuss this, without identifying individuals, with the appropriate faculty.

Option Three

He or she reports the **suspected infraction** to the chairperson of the academic department where the faculty member has his/her primary appointment.

- B.** If a faculty member **has strong reason to conclude either by personal observation or by other convincing evidence that a faculty infraction has occurred**, then he/she must report person of the academic department where the faculty member has his/her primary appointment. Individuals may also report an infraction to the following:

Member, College Code Committee

Associate Dean of Academic Affairs

Associate Dean of Clinical Affairs

Associate Dean of Research and Graduate Studies

Program Director of appropriate postdoctoral program

Dean, College of Dentistry

These individuals or the Secretary of the College Code Committee will immediately forward notice of the alleged infraction to the Department Chair.

APPENDIX B

Academic Disciplinary Policies

Academic Disciplinary Policy Number One: BASIS FOR ACADEMIC DISCIPLINE

Objective of the Policy: To define the basis for academic discipline in the D.M.D. Program.

Policy Statement: Disciplinary action for students in the D.M.D. Program will be initiated upon unsatisfactory academic performance.

Methods and Procedures: Requests to alter academic disciplinary policy will be made in writing to the Faculty Council. (Refer to the Bylaws of the Faculty, Section II, 4.3)

Responsible Agents: The Dean and the Academic Performance Committee.

Approvals:

College Faculty: 9/6/78 New Policy

College Faculty: 9/15/03 Revised

College Faculty: 5/26/09 Revised

University Senate: Does not need Senate Review – Senate Rules Committee 9/14

Academic Disciplinary Policy Number Two: PROBATION

Objective of the Policy: To describe the conditions that will result in a student being placed on probation, the terms of probation, and the conditions for removal from probation.

Policy Statement: A student shall be placed on probation immediately after any of the following has occurred:

1. The student has completed any academic year with a grade point average (GPA) for the year of less than 2.75 or
2. The student has received a failing (E or F) final course grade or
3. The student has failed Part 1 of the National Board Dental Examination (NBDE) or
4. The student has been placed in a modified curriculum or
5. The student has been reinstated after suspension.

Methods and Procedures:

Limitation on the Use of Probation. The Academic Performance Committee (APC) shall place a student on probation only if, based on the student's performance in the College of Dentistry's course work (including but not limited to grades, attendance, motivation, work ethic, and professionalism), it has determined that the student has the potential of meeting graduation requirements after addressing academic shortcomings and receiving counseling to address issues that may be contributing to the academic problems.

Duration of Probation. The duration of probation shall be established by the APC. The following rules for establishing the minimum duration of probation shall apply:

1. In the case of probation for a low GPA, the minimum duration of probation shall be one academic term following the academic year in which the low GPA occurred.
2. In the case of a failing grade, the minimum duration of probation shall begin the day a failing grade is reported to the registrar and continue at least one academic term after the term in which a passing grade in the course has been achieved.
3. In the case of a failed Part 1 NBDE, probation shall begin the day the failure is reported to the Office of Academic Affairs. Retaking and passing the failed NBDE before a deadline to be set by the APC shall be among the terms of probation. The minimum duration of probation shall be at least until the end of the term in which the retake of the NBDE is passed.
4. In the case of a student who has been placed in a modified curriculum, the minimum duration of probation shall be the entire period in which a student is enrolled in a

modified curriculum and at least one academic year after the student has been allowed to resume in the College's regular curriculum.

5. In the case of a student who has been suspended, the minimum duration of probation shall be at least one academic year after the student has been re-admitted after suspension.

Terms of Probation. The terms of probation will be established by the APC.

The terms of probation may also include required activities to help the student prepare to pass Part 1 of the NBDE. The APC may decide to include in the terms that during probation the student is ineligible for certain curricular or extracurricular College activities (see Curriculum Policy Number eight).

Notification of Probation. Probation is triggered automatically by the situations listed in the Policy Statement, not by decision of the APC. The student shall be notified by letter of the date when the probation began. This letter shall explain the student's status and inform him or her that the terms of probation and minimum duration of probation will be established by the APC the next time it meets.

When an APC places a student on probation or affirms an automatic probation, its Chair shall notify the student by a letter with verified receipt of the terms of probation, including the minimum conditions that must normally be fulfilled before the APC will consider removal from probation.

Appeals. The decision to place a student on probation is automatic according to these policies. The terms of probation are decisions of the APC. Neither the terms of probation nor probation itself is subject to appeal.

Removal from Probation. The student shall be notified by letter with verified receipt from the Chair of the APC that she or he has been removed from probation. Notwithstanding anything in the preceding, the APC may at any time elect to remove a student from probation.

Responsible Agent: The Academic Performance Committee.

Approvals:

College Faculty: 9/6/1978 New Policy – ADP #2

College Faculty: 3/24/1998 Revised – ADP #2

Senate Council: 11/8/99 Revised – ADP #2

College Faculty: 9/16/2003 Revised – ADP #2

College Faculty: 5/26/2009 Revised – ADP #2

University Senate – 2/8/16 Revised – ADP #2

Academic Disciplinary Policy Number Three: CLINICAL SANCTIONS INCLUDING SUSPENSION OF CLINICAL PRIVILEGES

Objective of Policy: To describe procedures for determining: 1) whether a student is subject to clinical sanctions including suspension of clinical privileges, 2) whether sanctions other than suspension of clinical privileges are appropriate, and if so, to determine which sanctions shall be applied, 3) durations of suspensions of clinical privileges for violations of professional conduct of varying seriousness, 4) whether a student's problems delivering patient care are due to academic deficiencies, and 5) deciding, in the cases where academic deficiencies are the problem, whether to address the situation within individual courses or within a modified curriculum.

Policy Statement: A student shall be subject to clinical sanctions, including suspension of clinical privileges, if the Clinical Performance Committee (CPC) determines that a student has 1) committed violations of professional conduct or 2) endangered or is deemed likely to endanger the safety or well being of a patient.

Methods and Procedures:

Initial Determination that a Student may be Subject to Clinical Sanctions. The CPC shall consider applying sanctions that may include suspension of a student's clinical privileges if 1) one or more member(s) of the clinical faculty are concerned that a student may meet one of the conditions in the Policy Statement or 2) a student has been removed from clinic during a clinic session. In both cases the CPC shall determine as soon as possible whether the student meets one of the conditions of the Policy Statement. In cases where the student will miss more than one clinic before the CPC can meet, the Dean of Clinical Affairs or a person designated by this Dean shall determine whether the student may return to clinic before the CPC meets.

Sanction Options. The CPC may decide that: 1) no further action is warranted (if the student has been suspended from clinic she or he shall return to clinic without penalty), or 2) suspension of clinical privileges and/or other sanctions are indicated. Sanctions shall include, but are not limited to: a report to relevant course directors, an incident report, a letter of record to be placed in the student's file, and/or suspension of clinical privileges for a period of time.

Removal from Clinic During a Clinic Session. A supervising clinical instructor, any Team Leader, the Division Chief for Comprehensive Care, or the Dean of Clinical Affairs each have the authority to temporarily remove a student from clinic if she or he believes a student fulfills either of the conditions in the Policy Statement.

Determination that Professional Conduct has been Violated. Professional conduct includes behaviors that range in severity from those that are found only in course syllabi or the College's Clinic Manuals (particularly, the College of Dentistry's **Behavioral Standards in Patient Care**) to those that are found in the College Code (UKCD **Code of Professional and Academic**

Responsibility) and the HCCC (**Health Care Colleges Code of Student Professional Conduct**). The CPC shall determine whether professional conduct has been violated, and if so, identify the particular violation.

College and HCCC Code Violations. The College Code and the HCCC are honor and professional codes that include hearing and appeal procedures that are separate from those in these Academic Disciplinary Policies. If the violation is covered in the College Code, the CPC shall report the infraction to a member of a Code Committee member (College Code, VI.B.2). If the violation is not covered by the College Code, but is covered by the HCCC, the CPC shall report the violation to the Dean (HCCC Article 6). The CPC shall continue the suspension of clinical privileges while the appropriate Code Committee or Hearing Committee considers the allegation if it determines that the student is likely to endanger the safety or well being of patients.

A Decision that No Violation Has Occurred. In the event either College Code Subcommittee or the HCCC Hearing Committee decides that a violation has not occurred (a “not guilty” verdict in the case of the College Code), the student’s clinical privileges shall be immediately restored if they had remained suspended during deliberations. All records of the allegation shall be removed from student, course, and CPC records. The same procedure shall apply in the case where an alleged violation has been successfully appealed.

A Decision that a Violation Has Occurred. In the event a student is found to have committed a violation of professional conduct by the College Code Subcommittee or the HCCC Hearing Committee, but remains enrolled in the College (i.e., sanctions imposed do not include suspension or dismissal), the CPC shall not impose sanctions in addition to those imposed by the Dean in response to the Subcommittee’s or Hearing Committee’s determination that a violation has occurred.

Sanctions for Other Violations of Professional Conduct . If a violation of professional conduct is not included in the College Code or the HCCC (e.g., it is not in these codes, but is included in, for example, the College’s **Behavioral Standards in Patient Care**), the CPC shall determine appropriate sanctions based on the particular situation and the seriousness of the violation. (See the Appendix for a list of suggested sanctions for particular violations.) Repeated violations of professional conduct, and especially, repeated violations of the same standard shall be viewed as aggravating factors and may result in more severe sanctions. Suspension of clinical privileges may be a sanction, especially when the nature of the violation is such that the safety or well being of patients is a concern. The CPC may impose tasks designed to help the student understand a particular standard of professional conduct (e.g., review of the standards, an essay etc.) as a condition that must be fulfilled before clinical privileges are restored.

Serious Violations of Professional Conduct. In cases of serious violations of professional conduct that are not included in the College Code or HCCC, the CPC may recommend to the Dean that a student be suspended or dismissed.

Notification of the Student. The Chair of the CPC shall notify the student of sanctions via a letter with verified receipt. The letter should list all sanctions, the duration of any suspension of clinical privileges, a list of any tasks that must be completed before clinical privileges are restored, and notification of the student's right to appeal.

Appeals. Appeals of clinical sanctions, including suspension of clinical privileges, shall be conducted as described in Policy No. Seven.

Determination that Academic Deficiencies are Affecting Clinical Performance. In cases where the CPC concludes that professional conduct has not been violated, it shall determine whether a student lacks skill, knowledge, and judgment to successfully treat patients due to failure to master aspects of the college's academic program. If the weaknesses are not such that they endanger patient safety, the CPC shall refer the weakness to clinical courses directors who will remediate the student as they determine is appropriate.

If the CPC concludes the lack of skill, knowledge, and judgment are to the extent patient safety or well being are endangered, it shall suspend clinical privileges and recommend to the Academic Performance Committee (APC) that it consider placing the student in a modified curriculum (see Policy No. Four) or, as described in Policies Five, and Six, to Suspend or Dismiss the student.

Notification of the Student – Modified Curricula. In cases where the CPC recommends the APC consider placing a student in a modified curriculum, student notification shall be by the APC as described in Policies Numbers Four, Five, and Six.

Appeals – Modified Curricula. In cases where the CPC recommends that the APC consider placing a student in a modified curriculum, students should be notified of the right to appeal as described in Policies Four, Five, and Six. Appeals shall be conducted as described in Policy Number Seven.

Responsible Agents: The Clinical Performance Committee and Academic Performance Committee.

Approvals:

College Faculty: 5/26/09 New Policy – APC #3

University Senate: 2/8/16 New Policy – APC #3

Academic Disciplinary Policy Number Four: MODIFIED CURRICULA

Objective of the Policy: To describe: 1) the conditions that will result in a student being placed in a curriculum designed to remediate poor or failing performance while the student remains enrolled in the College (a “modified curriculum”) 2) the process for requesting an appeal of placement in a modified curriculum, and 3) the method for setting the conditions for allowing the student to resume the College’s regular curriculum after the completion of a modified curriculum.

Policy Statement: The Academic Performance Committee (APC) shall in the absence of extraordinary circumstances place a student in a modified curriculum, which may include repeating a year of the curriculum, if any of the following is true AND, in judgment of the APC, she or he can best be helped by experiences within the College. The student has:

1. Received, within the last four academic terms (or, for first-year students, within two academic terms), two or more failing (E or F) final course grades or
2. Received a failing (E or F) final course grade and an annual grade point average for all other courses of less than 2.75 or
3. Received a failing (E or F) final course grade while on probation or
4. Failed to meet the terms of probation or
5. When on probation after the first year of the curriculum, achieved a cumulative GPA of less than 2.75 at the end of any term or
6. Had her or his clinical privileges suspended by the Clinical Performance Committee and been recommended by the CPC for a modified curriculum.
7. Failed Part 1 of the National Board Dental Examination (NBDE) a third time.

If in the judgment of the APC the student can best be helped by experiences exclusively outside the College, the APC shall suspend the student (see Policy No. Five).

Methods and Procedures:

Limitation on the Use of Modified Curricula. The APC shall place a student in a modified curriculum only if, based on the student’s performance in the College of Dentistry’s course work (including, but not limited to grades, attendance, motivation, work ethic, and professionalism), it has determined the student has the potential of meeting graduation requirements after addressing academic shortcomings and receiving counseling to address issues that may be contributing to the academic problems.

Deadline to Notify Student of a Modified Curriculum. Except under extraordinary circumstances, the APC shall notify the student that she or he will be placed in a modified

curriculum within 15 working days of the date when a triggering condition occurs (a failing grade is turned into the registrar, the Office of Academic Affairs is notified of a failed NBDE, etc.).

Terms of the Modified Curriculum. The APC shall determine: 1) the elements of the modified curriculum, 2) the standards for successful completion of each element of the modified curriculum, and 3) any other conditions to be met before the APC can consider allowing the student to resume the College's regular curriculum. Customized curricula may include, but not be limited to, retaking portions of a course, entire courses, portions of an academic year, or the entire academic year. The terms of the modified curriculum must include the maximum time within which the student must complete the modified curriculum.

A modified curriculum must include courses and other experiences within the college, but may include courses and other experiences offered outside the College. The student shall be on probation while in the modified curriculum. Terms for resuming the regular curriculum shall include achieving a grade of 'B' or better on all failed courses that are retaken and passing any courses that have been previously taken but the student has been asked to audit as part of the modified curriculum. During the auditing of previously passed courses, the student shall take all examinations and complete all assigned projects and must receive a passing grade on all examinations and projects. The calculation of the student's GPA, will include both the original failing grade and the new grade in the course. Audited courses will not be included in the calculation of the student's GPA.

A student who has been placed in a modified curriculum because of a third failure of Part 1 of the NBDE shall not be allowed to resume the College's regular curriculum until she or he takes and passes the failed NBDE.

Notification of Placement in a Modified Curriculum. The student shall be notified by a letter with verified receipt from the Chair of the APC of the terms of the modified curriculum, including the minimum conditions that must normally be fulfilled before the APC will consider allowing the student to resume the College's regular curriculum. The letter must include notification of the student's right to appeal and a summary of the procedures for appealing the decision.

Appeal. A student who has been placed in a modified curriculum may request an appeal of this decision. The request must be made in writing to the Dean within five working days of receipt of notification of being placed in a modified curriculum (see Academic Disciplinary Policy Seven, "Appeal Procedures").

Reinstatement into the College's Regular Curriculum Following Completion of a Modified Curriculum. When the student has completed the elements of the modified curriculum, has demonstrated that he or she can perform at the level required to graduate from the College, and has met other terms for resumption recommended by the APC, the APC may allow him or her to resume the College's regular curriculum. Following resumption, the student shall be

placed on probation for the entire academic year into which she or he has been placed, and will be subject to terms recommended by the APC. The student shall be notified by letter from the Chair of the APC that she or he has been reinstated into the regular curriculum. Notwithstanding anything in the preceding, the APC may at any time reinstate a student into the regular curriculum.

Consequences of Failure to Complete a Modified Curriculum. If a student who has been placed in a modified curriculum for a third failure of Part 1 of the NBDE does not retake and pass the Boards within two months of the date when he or she is first eligible to retake the exam, that student shall be dismissed. A student who has not completed the modified curriculum within the maximum time allowed by the APC shall be dismissed and will no longer be eligible for reinstatement.

Responsible Agent: The Academic Performance Committee.

Approvals:

College Faculty: 5/26/09 New Policy – ADP #4

University Senate: 2/8/16 New Policy – APC #4

Academic Disciplinary Policy Number Five: SUSPENSION

Objective of the Policy: To describe the conditions that will result in a student being suspended from the College and the process for requesting an appeal of the suspension.

Policy Statement: The Academic Performance Committee (APC) shall in the absence of extraordinary circumstances suspend a student if any of the following is true AND, in judgment of the APC, she or he is likely to be helped by experiences exclusively outside of the College. The student has:

1. Received, within the last four academic terms (or, for first-year students, within two academic terms), two or more failing (E or F) final course grades or
2. Received a failing (E or F) final course grade and an annual grade point average for all other courses of less than 2.75 or
3. Received a failing (E or F) final course grade while on probation or
4. Failed to meet the terms of probation or
5. While on probation after the first year of the curriculum, achieved a cumulative GPA of less than 2.75 at the end of any term or
6. Failed Part 1 of the National Board Dental Examination (NBDE) a third time.

Methods and Procedures:

Limitation on the Use of Suspension. The Academic Performance Committee shall suspend a student only if, based on the student's performance in the College of Dentistry's course work (including, but not limited to grades, attendance, motivation, work ethic, and professionalism), it has determined the student has the potential of meeting graduation requirements after addressing academic shortcomings and receiving counseling to address issues that may be contributing to the academic problems.

Deadline to Notify Student of Suspension. Except under extraordinary circumstances, the APC shall notify the student that he or she is being suspended within 15 working days of the date when a triggering condition occurs (a failing grade is turned into the registrar, the Office of Academic Affairs is notified of a failed NBDE, etc.).

Terms of Suspension. The APC shall recommend to the Dean the terms for consideration of reinstatement following suspension. If the APC determines the student might benefit from additional course work or other remediation experiences available outside the College, it shall specify the particular course work and/or the particular customized experiences the student must complete prior to consideration of reinstatement. Terms for reinstatement shall include grades of B or better in courses and evidence of completion of any specially designed

curriculum offered outside the College. A student who has been suspended because of a third failure of Part 1 of the NBDE must pass this exam to be eligible for reinstatement. The terms of suspension must include the maximum time within which the student must gain readmission.

Notification of Suspension. The student shall be notified by a letter with verified receipt from the Chair of the APC of the terms of suspension, including the minimum conditions that must normally be fulfilled before the Dean will consider reinstatement of the student in the regular College curriculum. The letter must include notification of the student's right to appeal and a summary of the procedures for appealing the decision.

Appeal. A suspended student may appeal this decision. The appeal request must be made in writing to the Dean within five working days of receipt of notification of suspension (see Academic Disciplinary Policy Seven, "Appeal Procedures").

Reinstatement Following Suspension. When the student has demonstrated he or she can perform at the level required to graduate from the College, and has met the terms of readmission recommended by the APC, the Dean may readmit him or her. However, granting a request for reinstatement is not automatic. Procedures for considering and granting reinstatement can be found in Policy No. Nine. Notwithstanding anything in the preceding, the Dean may at any time elect to readmit a suspended student into the regular curriculum.

Consequences of Failure to Gain Reinstatement. If a student who has been suspended for a third failure of Part 1 of the NBDE does not pass the Boards within two months of the date when he or she is first eligible to retake the exam after the third failure, that student shall be dismissed. A student who has not been reinstated within the maximum time allowed by the APC shall be dismissed and will no longer be eligible for reinstatement.

Responsible Agents: Academic Performance Committee.

Approvals

College Faculty: 9/6/1978 New Policy – ADP #3

College Faculty: 11/23/1998 Revised – ADP #3

Senate Council: 11/8/1999 Revised Policy – ADP #3

College Faculty: 3/21/2005 Revised Policy – ADP #3

College Faculty: 5/26/2009 Revised Policy – ADP #5

University Senate: 2/8/16 Revised Policy – APC #5

Academic Disciplinary Policy Number Six: DISMISSAL

Objective of the Policy: To describe the conditions that will result in a student being dismissed from the College and the process for requesting an appeal of the dismissal.

Policy Statement: The Academic Performance Committee (APC) shall in the absence of extraordinary circumstances dismiss a student if the student has:

1. Failed Part 1 of the National Board Dental Examination (NBDE) a fourth time or
2. Failed to meet the terms of a modified curriculum or suspension or
3. Become eligible for either a modified curriculum or suspension and has been previously placed in a modified curriculum or suspended or
4. Failed to be reinstated in the regular College curriculum after being placed on a modified curriculum within the maximum time allowed by the APC or
5. Failed to be reinstated to the College after being suspended within the maximum time allowed by the APC or
6. Failed to retake Part 1 the NBDE within two months of being eligible to retake it when on a modified curriculum or when under suspension for a third failure of the exam or
7. Failed to convince the APC, based on the student's performance in the College of Dentistry's course work (including, but not limited to grades, attendance, motivation, work ethic, and professionalism), that she or he has the potential of meeting graduation requirements.

Reinstatement Following Dismissal: A dismissed student shall not be reinstated.

Methods and Procedures:

Deadline to Notify Student of Dismissal. Except under extraordinary circumstances, the APC shall notify the student that he or she is being dismissed within 15 working days of the date when a triggering condition occurs (e.g., a failing grade is turned into the registrar, the Office of Academic Affairs is notified of a failure of Part 1 of the NBDE, etc.).

Notification. The student shall be notified of the decision to dismiss by a letter with verified receipt from the Dean. The letter must include notification of the student's right to appeal and a summary of the procedures for appealing the decision.

Appeal. A dismissed student may appeal this decision. The appeal request must be made in writing to the Dean within 5 working days of receipt of notification of dismissal (see Academic Disciplinary Policy Seven, "Appeal Procedures").

Responsible Agent: The Academic Performance Committee.

Approvals:

College Faculty: 9/6/78 New Policy – APC #4

Senate Rules: 11/8/99 Revised Policy – APC #4

College Faculty: 3/21/05 Revised Policy – APC #4

College Faculty: 5/26/09 Revised Policy – APC #6

University Senate: 2/8/16 Revised Policy – APC #6

Academic Disciplinary Policy Number Seven: APPEAL PROCEDURES

Objective of the Policy: To define the procedures by which decisions to impose clinical sanctions, including suspension of clinical privileges, and decisions to suspend, dismiss, or place a student in a modified curriculum can be appealed.

Policy Statement: A student who has been subjected to clinical sanctions, including suspension of clinical privileges or has been suspended, dismissed, or placed in a modified curriculum may request an appeal of such a decision according to the procedures listed in this policy.

Methods and Procedures:

1. *Appeal Deadlines.* A meeting to consider the appeal shall be allowed if the Dean receives the appeal within five (5) working days after the date the student receives notice of the clinical sanctions or disciplinary action. This meeting shall occur no later than ten (10) working days following receipt of the written request appealing the decision
2. *Grounds for Appeal.* The student shall state in his or her written request the grounds for requesting a meeting to consider the appeal. Acceptable grounds for appeal include but are not limited to the following:
 - a) The academic disciplinary action or clinical sanctions were the result of circumstances beyond the student's control.
 - b) The grounds for clinical sanctions or academic disciplinary action involve circumstances not known by the CPC, APC, or the Dean.
3. *Participation in College Activities after Notice of Clinical Sanctions or Placement in a Modified Curriculum, Suspension, or Dismissal.* After receiving notice of such an academic disciplinary action, the student will be ineligible to participate in the College's regular curriculum, including didactic classes, preclinical laboratories, extracurricular activities, and clinics. In the case where the action is to place the student in a modified curriculum the student shall be eligible to participate in activities only to the extent allowed by that curriculum.
4. *Participation in College Activities During Appeal.* Upon receipt of the written appeal by the Dean and until a decision has been made by the Dean following the meeting, the student will be allowed to continue in College's regular curriculum. The latter includes didactic classes, pre-clinical laboratories, and extracurricular activities. The student shall be allowed to participate in clinics provided, in the judgment of the CPC, the student is able to safely treat patients.
5. *The Appeals Committee.* Upon receipt of a student's appeal, the Dean shall select three members of the faculty to serve on an Appeals Committee. The following members of

the faculty are ineligible to serve: the student's advisor and team leader, any course director who issued the student a failing grade or was involved in suspending the student's clinical privileges, the members of the CPC that issued the latest clinical sanction, and members of the APC that issued the latest academic disciplinary action. The Dean shall designate one of the Appeals Committee members to serve as Chair.

6. *Preliminary Meeting of the Appeals Committee.* Prior to the meeting to consider the appeal, the Committee will convene to review the student's records, documents submitted by the APC or CPC (if appropriate), and the appeal materials submitted by the student.
7. *Appealing Student's Pre-meeting Rights.* Prior to the meeting to consider the appeal, the appealing student shall be
 - a) allowed to inspect his/her academic record and all documents submitted by the APC or the CPC to the Appeals Committee
 - b) entitled to choose a member of the faculty or a fellow student to present supporting statements.
8. *Persons Allowed to Present Statements at the Meeting.* The following persons shall be allowed to make statements at the meeting:
 - a) The appealing student.
 - b) A member of the faculty or a student selected by the appealing student.
 - c) A member or members of the faculty or others selected by the Appeals Committee who it believes may be able to clarify issues related to the appeal.
9. *Attendance during the Appeal Meeting.* During the meeting, the following conditions shall apply:
 - a) All Appeal Committee members shall be in attendance for the entire duration of the meeting and deliberations. (If a break is needed, the meeting and deliberations will be suspended during that time period.)
 - b) A staff employee shall be present to take minutes of the meeting and deliberations.
 - c) Persons presenting statements shall only be in attendance at the meeting while they are making their statement.
 - d) No other persons shall be allowed to be present during the meeting.
10. *Statements Allowed During the Meeting.* During the meeting, statements that shall be allowed will include but not be limited to:

- a) Statements clarifying the procedures to be followed during the appeal meeting.
 - b) The appealing student's statement of the grounds for her or his appeal.
 - c) The statement of the member of the faculty or the student who is supporting the appealing student.
 - d) Statements from any faculty member or course director whose statement could clarify issues related to the appeal.
11. *Transmittal of Appeals Committee's Recommendations to the Dean.* Following completion of deliberations and within 3 working days after the meeting, the committee will render to the Dean:
- a) A recommendation and rationale for that recommendation. This recommendation is advisory to the Dean.
 - b) The minutes of the appeal proceedings.
12. *Dean's Decision.* After considering the student's reasons for appealing the APC's disciplinary action (or the CPC's Clinical Sanctions) and the recommendation from the Appeals Committee, the Dean shall decide whether to grant or reject the appeal. The decision shall be communicated to the student by a letter with verified receipt. The decision of the Dean is final for the College.
13. *Appeals to the Ombud and the University Appeals Board.* If the student wishes to appeal the Dean's decision, further appeal may be directed through the Academic Ombud and the University Appeals Board as described in University Senate Rules 6.2 and 6.5.
14. *Participation in Student Activities During Appeals to the Ombud and University Appeals Board.* Should the Ombud recommend that the University Appeals Board hear the student's appeal, the student will be allowed to continue in College's regular curriculum until a final decision is made. These activities shall include didactic classes, pre-clinical laboratories, and extracurricular activities. The student shall be allowed to participate in clinics provided, in the judgment of the CPC, the student is able to safely treat patients.

Responsible Agent: The Dean.

Approvals:

College Faculty: 1/31/05 New Policy – APC #5

College Faculty: 5/26/09 Revised Policy – APC #7

University Senate: 2/8/16 Revised Policy – APC #7

Academic Disciplinary Policy Number Eight: PARTICIPATION IN CURRICULAR PRIVILEGES OR EXTRACURRICULAR ACTIVITIES WHILE ON ACADEMIC PROBATION

Objective of the Policy: To define curricular and extracurricular restrictions for students on academic probation.

Policy Statement: A student who is on academic probation will be excluded from participation in curricular privileges or extracurricular activities of the College of Dentistry, including:

1. Taking non-required selective courses
2. Beginning a totally self-instructional course before the official starting date unless this course is part of a modified curriculum developed by the APC.
3. Serving as an officer or committee member of any College of Dentistry organization or committee.
4. Participating in any extracurricular research activities or other College of Dentistry extracurricular activities, such as in College of Dentistry organizations, if the participation involves the expenditure of an appreciable amount of time.

Participation in these activities will be considered a violation of the terms of probation.

Methods and Procedures: The APC will include these restrictions in the terms of probation.

Responsible Agents: The Academic Performance Committee and the Deans for Academic Affairs and Admissions and Student Affairs.

Approvals:

College Faculty: 9/6/78 New Policy – APC #6

College Faculty: 9/15/03 Revised Policy – APC #6

College Faculty: 5/26/09 Revised Policy – APC #8

University Senate: 2/8/16 Revised Policy – APC #8

Academic Disciplinary Policy Number Nine: REINSTATEMENT FOLLOWING ACADEMIC SUSPENSION

Objective of the Policy: To define the process for reinstatement following academic suspension.

Policy Statement: A student on academic suspension may apply for reinstatement under probation.

Methods and Procedures:

1. A student may be considered for reinstatement upon submission of a written request to the Dean.
2. The Dean will appoint an Ad Hoc Committee of three (3) members of the full-time faculty to review the case.
3. The student will be given the opportunity to present the basis for requesting a review.
4. The Committee will be given the opportunity to ask relevant questions of the student.
5. The recommendations of the Ad Hoc Committee will be forwarded to the Dean.
6. After reviewing the recommendations of the Committee, the Dean will make a decision and communicate that decision to the student.
7. The decision of the Dean is final for the College.
8. If reinstated by the Dean, the student will be placed on academic probation for a minimum of one academic year. Other terms of probation may be recommended by the Academic Performance Committee.

Responsible Agent: The Dean.

Approvals:

College Faculty: 9/6/78 New Policy – ADP #7

College Faculty: 4/24/06 Revised Policy – ADP #7

College Faculty: 5/26/09 Revised Policy – ADP #9

University Senate: 2/8/16 Revised Policy – APC #9

Glossary of Terms Used in the College of Dentistry's Academic Disciplinary Policies

Academic term

Academic terms will be defined using the College of Dentistry's Academic Calendar that has been approved by the University Senate for the particular year of the curriculum in which the student is enrolled. The fall term begins on the first day of the academic year and ends on the last day before winter break begins. The spring term begins on the day on which classes and clinics begin after winter break and ends of the last day of the academic year. (Note that these dates will vary depending on the student's year in the curriculum.)

Academic Performance Committee (APC)

The APC meets to review the academic performance of students in a particular year in the College's curriculum. There are four such committees: First-year APC, Second-year APC, Third-year APC, and Fourth-year APC. This committee is charged with administering and enforcing most of the College's Academic Disciplinary Policies. The membership of each APC consists of the course directors of all courses running in the year of the curriculum in the committee's title. The chair of each APC is appointed by the Dean. The Dean of Academic Affairs is an ex officio member of all APC committees.

Academic Standing

All students start in good academic standing. Subsequently, students may be placed in other standings automatically by policy or by decision of the Academic Performance Committee. Changes in standing may be in responses to failure of courses, a low grade point average, failure of Part 1 of the NBDEs, or placement in a modified curriculum. In addition to being in good standing, the student may be under probation, in a modified curriculum, suspended, or dismissed.

Academic year

The academic year will be defined using the College of Dentistry's Academic Calendar that has been approved by the University Senate. The academic year normally begins on the first day of classes after Summer Break and ends on the last day of classes prior to Summer Break. The exact dates for the beginning and end of each academic year will depend on the year of the curriculum in which the student is enrolled. The next academic year for events that occur in fall term is defined as beginning on the first day of classes following Winter Break and to run through the last day of classes before Winter Break.

Clinical Performance Committee

The Clinical Performance Committee (CPC) considers cases in which a student may be subject to clinical sanctions, including suspension of clinical privileges. The CPC's membership shall include the Dean of Clinical Affairs, Chair of Oral Health Practice, Chair of

Oral Health Science, Division Chief of Comprehensive Care, Team Leaders, and the supervising clinical faculty member. The Dean of Clinical Affairs is the chair of this committee.

Clinical Sanctions

These are sanctions, including suspension of clinical privileges, that the CPC may impose on students who violate elements of professional conduct that are not included in the College Code or HCCC. Examples of other clinical sanctions include but are not limited to: a report to relevant course directors, an incident report, a letter of record to be placed in the student's record, and suspension of clinical privileges for a period of time.

Letter with verified receipt

A letter of notification of academic status that may be sent by certified mail return receipt requested or hand delivered with an accompanying affidavit of receipt that the recipient has signed.

Modified Curricula

Any change or modification from the normal sequencing of courses, including but not be limited to repeating a course or courses, auditing courses, enrolling in courses out of the normal sequence, spreading coursework out over multiple terms, decompressing courses, tutoring, or repeating an entire year. Multiple curricula are possible. A particular curriculum is customized by the APC to meet a particular student's needs.

Professional Conduct

Professional behaviors defined by the rules for conduct during patient care included in the College's course manuals and clinic manuals (particularly, the College's **Behavioral Standards in Patient Care**). It also includes College and University honor and professional codes, including in particular the College of Dentistry's **Code of Professional and Academic Responsibility** (College Code) and the **Health Care Colleges Code of Student Professional Conduct** (HCCC). The latter codes include hearing and appeal procedures that are independent of those defined in the Academic Disciplinary Policies.

Approvals:

College Faculty: 5/26/09 Approved New Glossary

APPENDIX C

Miscellaneous Academic Policies

Miscellaneous Academic Policy One: ABSENCE POLICY

Objective of the Policy: To describe the circumstances under which absences of short duration from individual courses and all courses simultaneously may be excused. To describe conditions under which leaves of absence may be granted.

Policy Statement:

Absences of short duration* from individual courses must be approved by each course director.

When foreseeable absences are of short duration and from all courses, the absence must be approved as excusable in advance by the Dean of Academic Affairs acting after consultation with course directors.

When unforeseeable absences are of short duration and from all courses, the absence must be approved as excusable immediately or as soon as possible by the Dean of Academic Affairs acting after consultation with course directors.

Leave of absence may be requested by the student and granted by the Dean of the College when a student will be absent for nonacademic reasons for more than one-fifth of the contact hours in one or more courses (see University Senate Rules 5.1.8.3 and 5.2.4.2).

Methods and Procedures:

* In the policy statement above and in the following, absences of short duration are defined to be those that do not exceed one fifth of the contact hours in any course.

Excusable Absences. In all cases, circumstances under which absences are excused shall be as defined in section 5.2.4.2 of the University Senate Rules and by absence policies within each individual course syllabus. Makeup for excused absences will follow the university policies outlined in 5.2.4.2 and by policies within each individual course syllabus. Consequences of unexcused absences shall be as specified within each individual course syllabi.

Absences of Short Duration from Individual Courses. The student must submit an explanation of the absence to her or his course director(s) immediately or as soon as possible after the absence.

Foreseeable Absences of Short Duration from All Courses. The student must submit in advance an explanation of the absence to the Dean of Academic Affairs.

Unforeseen Absences of Short Duration from All Courses. The student must submit an explanation of the absence to the Dean of Academic Affairs immediately or as soon as possible after the first day of absence. The student shall provide the expected duration of the absence.

Leaves of Absence. A student may request a leave of absence from the College by a written request of the Dean of Academic Affairs. In some cases, the Dean of Academic Affairs may counsel a student to request a leave of absence. The Dean of Academic Affairs shall decide whether the leave is in the best interest of the student and the College. If the Dean of Academic Affairs supports the request for a leave of absence, she or he shall forward the recommendation to the Dean of the College along with recommended terms for re-entry after the leave. The Dean shall decide whether to grant the leave of absence.

Terms of Leaves of Absence. The terms of the leave of absence will include the duration of the leave and conditions for re-entry into the College.

Re-entry to the College. A student on leave of absence must submit a request for re-entry to the DMD program to the Dean.

Curriculum After Re-entry. If the Dean grants re-entry, the student's curriculum shall be developed by the Dean of Academic Affairs working in consultation with the Academic Performance Committee. The Dean of Academic Affairs will notify all involved College personnel concerning the student's curriculum.

Responsible Agents: Course Directors, Dean of Academic Affairs, Academic Performance Committee, and Dean of the College

Approvals:

College Faculty: 9/7/78 New Policy - MAP #1

College Faculty: 11/17/03 Revised Policy - MAP #1

College Faculty: 10/19/09 Revised Policy - MAP #1

University Senate: Senate Rules Committee determined this is a "local" College policy 2/8/16

Miscellaneous Academic Policy Two: ACADEMIC ADVISING POLICY

Objective of the Policy: To establish an academic advising system.

Policy Statement: All students will have an Academic Advisor assigned to them. The responsibility of the Advisor will include the following:

1. Be available to students for advising by posting office hours and/or by allowing advisees to arrange for appointments at other mutually convenient times consistent with Senate Rule 7.2.3.D.
2. Know the current academic policies of the College of Dentistry affecting students whom they advise.
3. Counsel students in an effort to encourage academic excellence.

Methods and Procedures: At the beginning of each academic year, students will be assigned an Academic Advisor.

Responsible Agent: The Dean of Admissions and Student Affairs.

Approvals:

College Faculty: 4/15/77 New Policy - MAP #2

College Faculty: 9/15/03 Revised Policy - MAP #2

College Faculty: 10/19/09 Affirmed Policy - MAP #2

University Senate: Senate Rules Committee determined this is a "local" College policy 2/8/16

Miscellaneous Academic Policy Three: COLLEGE CALENDAR GUIDELINES POLICY

Objective of the Policy: To set forth guidelines for the preparation of the academic calendar of the College of Dentistry.

Policy Statement: The College of Dentistry shall comply with University Senate Rule II, 1.1 (i), which states that the Colleges of Medicine, Dentistry and Law may adopt special calendars and “shall prepare calendars at least three years in advance, forwarding them to the Registrar to be presented to the University Senate Council, along with the University Calendar, for approval. Such calendars shall conform with the University Calendar as nearly as possible.” In addition, “Any variation from the printed schedule of classes must be authorized by the dean of the college in which the change is to be made upon recommendation of the chairman of the department concerned. The dean shall report the change to the Registrar” (consistent with Senate Rule 8.1.0.)

Methods and Procedures:

The Chairperson of the Curriculum Committee shall prepare the academic calendar for the College according to the above University Senate rule and the following guidelines:

1. The College of Dentistry calendar will be consistent with Curriculum Policy Number Three on Length of the DMD Curriculum.
2. Provisions will be made for faculty conferences and student-related events

When the College Calendar is prepared or revised, it shall be forwarded to the Dean of the College who will forward it to the University Registrar. The Registrar will forward it to the Senate Council for approval.

Responsible Agents: The Chair of the Curriculum Committee and the Dean

Approvals:

College Faculty: 4/15/77 New Policy - MAP #3

College Faculty: 9/15/03 Revised Policy - MAP #3

College Faculty: 10/19/09 Affirmed Policy - MAP #3

University Senate: Senate Rules Committee determined this is a “local” College policy 2/8/16

Miscellaneous Academic Policy Four: EVALUATION POLICY

Objective of the Policy: To define the evaluation system for the D.M.D. Program.

Policy Statement: The College recommends that the evaluation system be criterion-referenced.* Written evaluation will be provided to all students during each course with respect to progress in fulfillment of course objectives; also, written comments will be provided on strengths, areas for improvement and suggested modes for higher attainment wherever appropriate.

Methods and Procedures: The Course Director will be responsible for providing written evaluation to each student. The Course Director will inform students of the method and frequency of evaluation at the first or second meeting of the course (refer to Curriculum Policy Number Twelve).

* In the criterion-referenced evaluation system, an absolute norm is established and students are evaluated on the basis of whether this level has been achieved. The student is in competition only with a standard criterion of performance in the criterion-referenced system.

Responsible Agent: The Course Director.

Approvals:

College Faculty: 6/2/76 New Policy - MAP #4

College Faculty: 9/15/03 Revised Policy - MAP #4

College Faculty: 10/19/09 Revised Policy - MAP #4

University Senate: Senate Rules Committee determined this is a "local" College policy 2/8/16

Miscellaneous Academic Policy Five: GRADING POLICY

Objective of the Policy: To describe the Doctor of Dental Medicine program grading system.

Policy Statement:

An **A**, **B+** or **B** is within the expected range of performance. A **C** is a marginal level of performance. To remain in good academic standing and to graduate, a student must maintain a grade point average (GPA) of 2.75 or more. Student performance will be reported to the Registrar's Office as follows:

Grade Performance Level

- A** Represents exceptionally high level of performance; four (4) quality points are awarded for each credit hour.
- B+** Represents a high level of performance; three and one-half (3.5) quality points are awarded for each credit hour.
- B** Represents the minimum expected level of performance; three (3) quality points are awarded for each credit hour.
- C** Represents a marginal level of performance; two (2) quality points are awarded for each credit hour.
- E** Represents an unacceptable level of performance; zero (0) quality points are awarded for each credit hour.
- P** Represents a passing grade in courses taken on a pass/fail basis. It is not used in GPA calculations.
- F** Represents an unacceptable level of performance in courses taught on a pass/fail basis. It is not used in GPA calculations.
- I** Incomplete; course objectives have not been completed during the allotted course time due to circumstances usually beyond the student's control. An **I** grade shall be given only when there is a reasonable possibility that a passing grade will result when work is completed. An **I** must be replaced by another grade within 12 months or before graduation, whichever occurs sooner. After this period, an **I** grade will automatically convert to an **E** or an **F** grade as appropriate.
- W** Withdrawn; this grade will be awarded to a student who withdraws from a course or from the College. It shall be awarded only after recommendation by the Academic Performance Committee and approval by the Dean.

The expectation is for all course directors to outline criteria for achieving each grade. If there are exceptions, they must be petitioned to the Curriculum Committee (Miscellaneous Academic Policy Six: Policy on Changing a Grading System in Individual DMD Courses).

Responsible Agent: The Course Director.

Methods and Procedures: The Course Director will evaluate the performance of each student with respect to the course objectives and assign the appropriate grade. (See Miscellaneous Academic Policy Four: Evaluation Policy.)

Approvals:

University Senate: 11/8/99 New Policy – MAP # 5

College Faculty: 9/15/03 Re-affirmed Policy – MAP # 5

College Faculty: 10/19/09 Re-affirmed Policy – MAP # 5

University Senate: Needs Senate Review

Miscellaneous Academic Policy Six: POLICY ON CHANGING A GRADING SYSTEM IN INDIVIDUAL DMD COURSES

Objective: To outline the procedure for requesting changing a grading system for a DMD course.

Policy Statement: A course director may petition the Curriculum Committee to use the pass/fail grading option or the letter grading option in a specific DMD course.

Methods and Procedures:

1. A course director may submit a written petition to the Curriculum Committee requesting that he/she be allowed to change the grading option for a specific DMD course that he/she directs. The petition must outline the goals of the course and the rationale for changing the grading policy. The course director must show evidence of support for the change in use of the grading policy from both the course director's division as a whole and the division chief. The course director must also present an evaluation plan for assessing outcomes of the use of the changed grading policy.
2. The Curriculum Committee will review the petition and discuss the rationale presented by the course director.
3. The course director and the division chief will be invited to attend the Curriculum Committee meeting. During the meeting, the course director will verbally summarize the rationale for his/her request and answer any questions posed by members of the Curriculum Committee. The division chief will confirm his/her agreement of the change in use of policy.
4. The Curriculum Committee will vote on the petition. A majority decision will constitute approval.
5. The Chair of the Curriculum Committee will notify the course director and division chief of the outcome of the vote. The course director will abide by the final decision of the Curriculum Committee. If denied, petitions may be resubmitted on an annual basis.
6. Approval of a course for a change in use of a grading option will be in effect until a new petition requesting a change has been submitted.

Responsible Agent: The Curriculum Committee

Approvals:

College Faculty: 9/15/03 New Policy – MAP #6

College Faculty: 10/19/09 Re-affirmed Policy – MAP #6

University Senate – 2/8/16 New Policy – MAP #6

Miscellaneous Academic Policy Seven: NATIONAL BOARD DENTAL EXAMINATION POLICY

Objectives of the Policy: To ensure that students are aware of the dates by which: 1) Parts 1 and 2 of the National Board Dental Examinations (NBDE) must be taken and 2) Part 1 of the NBDE : must be passed. To specify the consequences of failing to pass Part 1 of the NBDE prior to the beginning of the fourth year of the curriculum.

Policy Statement: Students must have passed Part 1 of the NBDE prior to entering the fourth year of the curriculum. Students must have taken Part 2 of the NBDE in order to be eligible participate in commencement and to be eligible for graduation.

If a student fails Part 1 of the NBDE, she or he shall be placed on probation.

In the event of a third failure of Part 1 of the NBDE, the student shall be placed in a modified curriculum or suspended as deemed appropriate by the APC (see Academic Disciplinary Policies Nos. Four and Five). In the case of a fourth failure of Part 1 or in the event of failure to retake Part 1 within two months of being eligible to retake it after a third failure, a student shall, in the absence of extraordinary circumstances, be dismissed.

Methods and Procedures:

1. The Dean of Academic Affairs will monitor student eligibility to take the Parts 1 and 2 of the NBDE and, as needed, remind students of the schedule for taking Part 2 and passing Part 1 that would allow them to graduate on time. He or she will also notify students that they must pass Part 1 of the NBDE prior to the beginning of the fourth year of the curriculum.
2. The Dean of Academic Affairs will monitor the progress of students who have failed Part 1 of the NBDE and remind students of the deadlines established by the APC or these policies.
3. Three or more failures of Part 1 of the NBDEs make a student eligible for a modified curriculum, suspension, or dismissal. The procedures specified in Academic Disciplinary Policies Nos. Four, Five, and Six will apply.
4. Students who have not passed Part 1 of the NBDE prior to the beginning of the four year of the curriculum shall be considered for a modified curriculum as specified in Academic Disciplinary Policy Number Four.

Responsible Agents: The Dean of Academic Affairs and the Academic Performance Committee.

Approvals:

College Faculty: 11/17/03 New Policy – MAP #8

College Faculty: 10/19/09 Revised Policy – MAP #7

University Senate – 2/8/16 New Policy – MAP #7

Miscellaneous Academic Policy Eight: COMMENCEMENT POLICY

Objective of the Policy: To define the conditions under which students will be allowed to participate in commencement.

Policy Statement: In the absence of extraordinary circumstances, a student will be eligible to participate in commencement when all of the following conditions are met are met:

6. the student has at least a 2.75 cumulative GPA;
7. course directors believe that it is likely that the student will have successfully completed all on-going courses within 30 days of commencement;
8. the student has passed Part 1 of the National Board Dental Examination (NBDE);
9. the student has taken Part 2 of the NBDE;
10. the APC believe that all terms of probation will be satisfied within 30 days of commencement

Responsible Agents: The Dean of Academic Affairs and the Academic Performance Committee.

Approvals:

College Faculty: 10/19/09 New Policy – MAP #8

University Senate – Senate Rules Committee determined this is a “local” College policy 2/8/16

Miscellaneous Academic Policy Nine: GRADUATION POLICY

Objective of the Policy: To define the Doctor of Dental Medicine program graduation requirements.

Policy Statement: A student will be eligible for graduation when all courses have been satisfactorily completed and all of the applicable requirements that follow are met:

1. the student has at least a 2.75 cumulative GPA;
2. the student has passed Part 1 of the National Board Dental Examination (NBDE);
3. the student has taken Part 2 of the NBDE;
4. all terms of probation have been satisfied; and
5. all patient responsibilities and other obligations to the College or University have been satisfied.

Responsible Agent: The Dean.

Approvals:

College Faculty: 4/15/77 New Policy – MAP #10

College Faculty: 11/23/98 Extensively Revised Policy – essentially new – MAP #10

University Senate: 5/10/04 New Policy – MAP # 10

College Faculty: 11/17/03 Revised Policy – MAP #10

College Faculty: 10/19/09 Revised Policy – MAP #9

University Senate – 2/8/16 New Policy – MAP #9

Miscellaneous Academic Policy Ten: GRADE REVIEW POLICY

Objective of the Policy: To define the process for a review of a student's grade.

Policy Statement: A Student has the right to request and receive a grade review.

Methods and Procedures:

6. A student, before requesting a grade review, will attempt to resolve the issues with the course director and the Division Chief (or next administrative level, should the course director also be the division chief).
7. Should this meeting fail to resolve the issue, the student may submit a written request to the Dean of Academic Affairs for the formation of a Grade Review Committee. This request shall include an explanation of reason for the request. The student is not bound to exercise this in-house process.
8. Within five (5) working days of the request, the Dean of Academic Affairs shall appoint a Grade Review Committee that will consist of three (3) voting members (two neutral members of the College faculty and one neutral student). The Dean will designate one of the committee members Chairperson of the Committee.
9. The committee shall meet within ten (10) working days of its formation of the Committee. The student, the student's advisor, the department chair, the course director and any other persons having information relevant to the case in question will be requested to attend the meeting, at which time, the situation will be fully discussed by all parties concerned. Following this open discussion, the Committee will make a recommendation to the department chair and the course director involved. This appeal recommendation is non-binding and the Committee will not have the prerogative of changing the grade.
10. If the student grade review continues to be unresolved, the student may file a grievance with the Academic Ombudsman regarding academic evaluation as described in 6.0 Section VI Student Academic Affairs of the Universities Student Rights and Responsibilities Handbook.

Responsible Agent: Dean of Academic Affairs

Approvals:

College Faculty: 9/6/77 New Policy - MAP #11

College Faculty: 4/24/06 Revised Policy - MAP #11

College Faculty: 10/19/09 Revised Policy - MAP #10

University Senate – 2/8/16 New Policy – MAP #10

APPENDIX D:

Inclement Weather Emergency Closing Operation

University of Kentucky College of Dentistry Policy and Procedure	Policy # CD09-010
Title/Description: Plan B for Inclement Weather and Emergency Closing Operations	
Purpose: To establish a University of Kentucky College of Dentistry staffing plan for uninterrupted quality patient care during inclement weather and when emergency closing has been ordered by the University or other governing entity .	

[Policy](#)

[Definitions](#)

[Procedure](#)

[Essential and Non-Essential Employees](#)

[Essential and Non-Essential Dental Students and Residents](#)

[Operations at Off-Site Locations](#)

[Notification Process](#)

[Plan B Operations Schedule and Plan](#)

[Employee Payment](#)

[Maintaining Essential Services](#)

[Failure to Report](#)

[Effective Date](#)

[Review/Revision Dates](#)

[Table 1: Responsible Positions](#)

[Attachment A: Employee Designation for Plan B Staffing During Emergency University Closings, Delays, Severe Weather or other Adverse External Conditions](#)

Policy

To ensure continuity of patient care, the UK College of Dentistry clinical operations shall remain open during University emergencies, notwithstanding any temporary suspension or alteration of normal operations of the University of Kentucky by the President pursuant to [Human Resources Policy and Procedure Number 71.0: University Emergencies](#) (HR Policy #71.0). During such suspensions or alterations, College of Dentistry clinical operations shall continue under Plan B staffing.

Academic activities, such as classes and seminars, that are not related to clinical operations shall be canceled or delayed when the University of Kentucky orders cancellation or delay of classes.

Under no circumstances shall an employee be allowed to take temporary disability leave for time missed due to inclement weather or other external factors. If an employee reports illness as the factor for not reporting to work, a doctor's statement verifying illness may be required. If

an employee is already on Family Medical Leave or off work while under Worker's Care, the employee shall continue to be compensated per the terms of his or her current approved leave arrangement.

Definitions

University emergency means any University-declared suspension or alteration of normal operations under HR Policy 71.0.

Essential employee means one who has been designated as critical to the operation of a UK HealthCare unit, whose presence is required regardless of the existence of an emergency condition, and whose absence from duty could endanger the safety and well-being of the patients and/or physical plant. All UK College of Dentistry employees who deliver patient care, provide vital services or facilitate access to care are designated as essential employees; other UK College of Dentistry employees may be designated as essential employees on a situational basis, e.g., in the event of a weather emergency only, or in the event of a public health crisis. Designations may be changed at any time depending on need.

Non-essential employee means an employee who has not been designated as an essential employee.

Plan B means the UK College of Dentistry employee staffing plan in effect during a University emergency.

Procedure

Essential and Non-Essential Employees

Certain College of Dentistry employee positions are essential for delivery of care, vital services and access. Employees in these positions shall be designated as *essential employees* unless specifically exempted. Other College of Dentistry employees may be designated as essential employees by their supervisors. Employees shall be notified of their employee status as essential or non-essential for Plan B staffing in writing at the time of hire (Attachment A), during annual performance evaluations, and when they change positions or work areas within the College of Dentistry. However, designations may be changed at any time depending on need.

Faculty who are scheduled to provide direct or indirect clinical services, or to supervise student dentists or Residents who are providing those services, shall be considered *essential*. Unless otherwise notified, they shall be considered *non-essential* during times for which they are not providing those clinical or supervisory services.

Employees, dental students, and Residents who are in a non-essential status shall be available on an on-call basis, unless otherwise advised or specifically exempted.

Essential and Non-Essential Dental Students and Residents

Certain College of Dentistry student and Resident positions are essential for delivery of care, vital services and access. Dental students and Residents shall be considered *essential* when they are scheduled to provide direct or indirect patient care. During such situations, they shall report to the College of Dentistry or appropriate clinic unless otherwise advised.

Dental students and Residents shall be considered *non-essential* during times for which they are not providing clinical services, unless otherwise advised.

Operations at Off-Site Locations

In addition to its campus location, the College of Dentistry also provides care and services to off-site locations such as K-12 schools. School-based activities shall be canceled when the local school system has announced a closing or cancellation. If these employees, dental students, or Residents are deemed to be essential, they shall report to their campus home location at their normally scheduled start time and request instructions from their immediate supervisor, or instructor, regarding work assignments.

Off-site services provided at facilities not managed by the College of Dentistry shall follow the emergency closing instructions provided by the management of those facilities. If a University emergency has not been issued, staff at the off-site service location shall contact their next-level supervisor at the campus location for instructions. They may, at the discretion of their supervisor, report to the COD for an alternate work assignment.

Notification Process

The University of Kentucky has an emergency notification system, [UK Alert](#), to communicate official information during an emergency or crisis situation that disrupts normal operation of the campus or threatens the health or safety of members of the campus community.

All University of Kentucky students, staff, and faculty are automatically registered in UK Alert with their official university e-mail address. Students, staff, and faculty are encouraged to add other contact information such as mobile numbers and personal e-mails to their UK Alert accounts. UK Alert delivers messages to subscribers on a "best effort" basis to the devices registered by each user.

UK Alert is designed for use only when an incident disrupts normal campus operations or threatens the immediate health and safety of the campus community. As such, it is a personalized service designed to complement the other communication tools already used by the university to advise the campus community during other events, crises or emergencies. Examples include: broadcast emails to all official university e-mail addresses; [University of Kentucky website](#); Local news outlets; Insight Cable channels 16, 49, and 219; and fliers posted and distributed throughout campus.

Plan B Operations Schedule and Plan

During a Plan B event, the College of Dentistry will, to the extent of its ability, maintain essential services in the areas listed in Table 1: Responsible Positions, on page 5 of this policy. The Responsible Position holder, or designee, shall ensure that adequate personnel are available to provide continued essential services, to the extent possible.

Employee Compensation

UK College of Dentistry employees designated as essential employees shall report to work on their regular work schedule unless specifically directed by their department not to report, or if directed by civil, emergency or medical authorities not to report for health and safety reasons.

Essential employees are responsible for monitoring weather conditions and for planning and securing transportation to and from work. Per [HR Policy 71: University Emergencies](#), essential employees required to work during a period when normal operations are suspended or altered shall:

Receive time off with pay on another scheduled work day within a specified period of six weeks, or Receive pay for the period when normal operations are suspended.

Essential employees who do not report to work or report late shall not be paid for work missed and may be subject to corrective action, up to and including termination. Essential employees who are directed not to report to work by their department or by civil, emergency or medical authorities shall be paid or not paid in accordance with flexible staffing models or department staffing plans, if applicable, or else as if they are non-essential employees under this policy.

During University emergencies:

Essential employees paid on an hourly basis who work on University owned or operated property shall be paid in accordance with section 2.b of HR Policy #71.0.

Non-essential employees should not report to work and shall be paid in accordance with section 1 of HR Policy #71.0 and as wage type “emergency closing.”

Essential employees who are able to perform their critical function(s) while working remotely away from University owned or operated property may fulfill their work requirements remotely when designated to do so by their supervisor and shall be paid in accordance with section 2.b of HR Policy #71.0.

College of Dentistry employees whose work assignment is outside Fayette County on the day of the University emergency shall contact their supervisor for instructions or rely upon their department or unit plans for operations during University emergencies and shall be paid in accordance with paragraphs 1, 2, and 3, above, as applicable.

In the event of a low census or low business volumes, managers shall use flexible staffing models or otherwise reduce essential employees working in accordance with departmentally developed staffing plans. Reduced working hours shall be paid or not paid in accordance with such flexible staffing models or department staffing plans.

Maintaining Essential Services

Following the procedures contained in this policy, each department or clinic shall prepare and keep on file in the department or clinic any special instructions for maintaining essential services.

To meet the needs for patient service and care, managers may:

Require essential employees to perform different duties outside their job description, but within their skills, abilities and scope of practice; and

May request non-essential employees to report to work and perform duties outside their job description but within their skills, abilities and scope of practice. Non-essential

employees who report to work at the specific request of their managers shall be paid as if they are essential employees.

If a University emergency extends beyond 24 hours, College of Dentistry administration, in conjunction with University officials, will announce extended plans and instructions.

Failure to Report

Employees who fail to comply with this policy may be subject to corrective action as described by [Human Resources Policy and Procedure Number 62.0: Corrective Action](#).

Dental students and Residents who fail to comply with this policy may be subject to academic consequences as indicated by specific course requirements.

Effective Date: 7/2002	Review/Revision Dates: 7/2009; 12/2011
Approval by and date: Signature on File _____ Date _____ Name Sharon P. Turner, DDS, JD, Dean	
Area/Unit	Responsible Position
Academic and Student Affairs	Associate Dean for Academic Affairs
Administrative Affairs Clinical Support Services: Ceramic & Prosthodontics Laboratories Sterilization Stores	Associate Dean for Administration & Finance
Dean's Office	Dean
Center for Oral Health Research Mobile Outreach Programs	Associate Dean for Research
Clinical Affairs Faculty Patient Care Clinic Patient Intake & Records Predoctoral/Student Clinics Twilight Dental Clinics Urgent Care Clinic	Associate Dean for Clinical Affairs
Kentucky Clinic Kentucky Clinic South	Adult Dentistry Division Chief
Oral & Maxillofacial Surgery (OMFS) Program/Clinics	OMFS Division Chief
Oral & Maxillofacial Pathology Service	Oral Pathology Division Chief
Oral Radiology Service	Oral Diagnosis, Oral Medicine & Oral Radiology Division Chief
Orofacial Pain Program/Clinics	Orofacial Pain Division Chief

Orthodontic Program/Clinics	Orthodontics Division Chief
Pediatric Dentistry Program	Pediatric Dentistry Division Chief
Periodontology	Periodontology Division Chief

Attachment A: Employee Designation for Plan B Staffing During Emergency University Closings, Delays, Severe Weather or other Adverse External Conditions

I understand that as a UK College of Dentistry employee, to ensure continuity of patient care, the College of Dentistry remains open during University emergencies. I have received and reviewed the College of Dentistry policy CD09-010 regarding my obligations to report to work during a University emergency.

When the University of Kentucky declares an emergency thereby suspending or altering normal University operations, including closing, delaying opening or closing early, I understand I am designated for Plan B staffing as marked below with these obligations and responsibilities:

- Essential Employee – My regular attendance at work is required when Plan B staffing is in effect. When the University announces an emergency with a suspension or alteration of normal operations, I am required to come to work at my normal scheduled start time. If I do not report to work or I am tardy, I may be subject to corrective action, up to and including termination.
- Essential Employee via Remote Access – When Plan B staffing is in effect or delay is declared, I may work remotely when authorized by my supervisor and shall be available for work via computer and phone throughout my normal working hours. If remote access is not available, I am required to come to work at my normal scheduled time. If I do not report to work either in person or via remote access or I am tardy, I may be subject to corrective action, up to and including termination.
- Non-Essential Employee –When Plan B staffing is in effect, I should not report to work unless I am specifically contacted and told to do so. When the University announces an emergency with a suspension or alteration of normal operations, I am required to report to work at the time the University establishes as the start time for normal operations. I am expected to leave work when the University closes early. I may be asked to maintain an on-call status unless specifically exempted.

I understand that this designation is subject to change and I may verify my designation at any time by submitting a request in writing to my supervisor.

Employee Signature

Date

Printed Name

Job Title

cc: HR File
Employee

APPENDIX E

Policy on Technical Standards for Dental Students (Approved by UK Senate on 12/14/98)

Miscellaneous Academic Policies: **Policy on Technical Standards for Dental Students**

Policy Objective: To define the non-academic criteria for admission into, continued enrollment in, and graduation from the Doctor of Dental Medicine program.

Policy Statement:

The University of Kentucky College of Dentistry is committed to ensuring that the opportunity to pursue oral health education is available to all qualified persons. In this spirit, all qualified individuals will be considered for admission. Moreover, the College will work to ensure that all qualified students, consistent with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act, will have the opportunity to succeed in the College's programs of study.

The College recognizes that the Doctor of Dental Medicine (D.M.D.) degree carries with it the full authority of the institution and communicates to those who might seek the services of the bearer that he or she is competent to practice dentistry. The D.M.D. degree is unique in that the graduate is prepared and, when licensed, is allowed to practice all disciplines of the dental profession. Therefore, the student must demonstrate the knowledge, skills, and attitudes that the faculty has determined are essential for the practice of dentistry. The student must acquire both cognitive and technical skills to negotiate the curriculum.

The following technical standards describe the essential functions that students must demonstrate in order to fulfill the requirements of a general dental education, and thus, are prerequisites for *entrance, continuation, and graduation* from the College. Students must possess the skills and abilities that will allow them to successfully complete the course of study and receive the full benefit of dental education. While enrolled in dental school, students must direct and perform treatment of the College's patients. The College has the responsibility for ensuring the safety of the patients. Treatment must be completed safely and within an acceptable time.

The University of Kentucky College of Dentistry will consider for admission any applicant who demonstrates the ability to perform or to learn to perform the skills listed in this document. Continued enrollment and graduation will depend on the successful demonstration of both the knowledge and the skills listed in this document. The College's Academic Performance Committee will monitor each student's demonstration of such knowledge and skills. Applicants are not required to disclose the nature of their disability (ies) to the Admissions Committee; however, any applicant with questions about these technical standards is strongly encouraged to discuss the issue with the Admissions Committee Chair before the interview. Upon the request of an applicant or a student, reasonable accommodations will be provided.

Standards

1. Motor Skills

GENERAL: A student should have sufficient motor function to execute movements reasonably required to provide general care to patients.

SPECIFIC: A student must possess the motor skills to directly perform palpation, percussion, auscultation and other diagnostic maneuvers, basic laboratory tests, and diagnostic procedures. Such actions require coordination of gross and fine muscular movements, equilibrium, and functional uses of the senses of touch and vision.

SPECIFIC: A student must be able to perform basic life support including CPR, transfer and position disabled patients, physically restrain adults and children who lack motor control, and position and reposition himself or herself around patient and chair in a sitting or standing position. A student must not hinder the ability of co-workers to perform prompt care. A student must be able to operate controls, move high-speed or low-speed dental drills with precision of less than one millimeter, and use hand instrumentation including scalpels for surgical procedures.

2. Sensory/Observation

GENERAL: A student must be able to acquire a predetermined level of required information through demonstrations and experiences in basic and dental science courses.

SPECIFIC: Such information includes, but is not limited to, information conveyed through: 1) physiologic and pharmacological demonstrations in animals; 2) microbiological cultures; 3) microscopic images of microorganisms and tissues in normal and pathologic states; and 4) demonstration of techniques using dental models. A student must be able to acquire information from written documents, and to evaluate information presented as images from paper, films, slides, or video. A student must be able to interpret x-ray and other graphic images. A student must be able to benefit from electronic and other instrumentation that enhances visual, auditory, and somatic sensations needed for examination or treatment.

GENERAL: A student must be able to accurately observe a patient, at a distance and close at hand, and observe and accurately interpret non-verbal communications when performing dental operations or administering medications.

SPECIFIC: A student must be able to perform dental examinations and treatment that requires the use of sight and touch. He or she must be able to see fine detail, focus at a variety of distances, and discern differences and variations in color, shape, and texture that are necessary to differentiate normal and abnormal soft and hard tissues. He or she must be able to use tactile senses to diagnose directly by palpation and indirectly by sensations transmitted through instruments. A student must also possess the visual acuity to read charts, records, radiographs, small print and handwritten notation, and distinguish colors intra- and extra-orally.

3. Communication

GENERAL: A student must be able to: communicate effectively and sensitively with patients; convey or exchange information at a level allowing development of a health history; identify problems; explain alternative solutions; and give directions during treatment and post-treatment. Communication includes speech and writing. A student must be able to communicate effectively and efficiently in oral and written English with all members of the health care team.

SPECIFIC: A student must have sufficient facility with English to: retrieve information from texts and lectures and communicate concepts on written exams and patient charts; elicit patient backgrounds; describe patient changes in moods, activity, and posture; and coordinate patient care with all members of the health care team. A student must be able to communicate in lay language so that patients and their families can understand the patient's conditions and, thereby, be more likely to comply with treatment and preventive regimes.

SPECIFIC: In any case where a student's ability to communicate through these sensory modalities is compromised, he or she must demonstrate alternative means of communicating with instructors, patients, and other members of the health care team.

4. Cognitive

GENERAL: A student must be able to measure, calculate reason, analyze, integrate, and synthesize.

SPECIFIC: A student must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Problem solving, a critical skill demanded of dentists, requires all of these intellectual abilities. A student must be able to perform these problem-solving skills in a timely fashion.

5. Behavioral

GENERAL: A student must possess the emotional health required for full use of his/her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients.

SPECIFIC: A student must be able to tolerate physically taxing workloads and to function effectively under stress. He or she 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. Compassion, integrity, concern for others, interpersonal skills, interests, and motivation, are all personal qualities that will be assessed during the admissions and educational processes. A student must be able to manage apprehensive patients with a range of moods and behaviors in a tactful, congenial, personal manner so as not to alienate or antagonize them. A student must be able to accept criticism and respond by appropriate modification of behavior.

Responsible Agent: The Dean

Methods and Procedures: To be developed.

APPENDIX F

University of Kentucky College of Dentistry		Policy: 01-24
Policy Name: Fitness for Duty Evaluations		
Created: 07/20/2011	Revised:	Last Review Date: 07/20/2011
Purpose: To establish procedures for assessing a UK College of Dentistry member's fitness for duty.		

Impaired workers pose unnecessary and unacceptable safety and health risks to themselves and others with whom they work. Impairment also poses a threat to the well-being of UK College of Dentistry patients and visitors. The Fitness for Duty Evaluation Policy has been developed to promote a safe working environment for all UK College of Dentistry members, to provide patients with quality patient care and related services and to assist UK College of Dentistry members in receiving appropriate assessment, counseling, referral and treatment for alcohol and drug abuse and other problems that may adversely affect satisfactory job performance.

The University of Kentucky College of Dentistry has adopted the UK HealthCare Policy #A09-005 (Fitness for Duty Evaluations) as its Fitness for Duty Evaluations Policy which may be accessed via the link below:

<http://www.hosp.uky.edu/policies/viewpolicy.asp?PolicyID=928>

UK College of Dentistry Results and Personnel Action addendum to UK HealthCare's Policy #A09-005:

UK College of Dentistry dentists and dental hygienists will be referred to the Kentucky Board of Dentistry's Well Being Committee when fitness for duty issues arise as detailed by the UK HealthCare Fitness for Duty Evaluations Policy. Students will be referred to the College administrator responsible for student affairs for "prophylactic monitoring" with positive background check indicating past DUI or other alcohol/drug related offenses or when fitness for duty issues arise as detailed by the UK HealthCare Fitness for Duty Evaluations Policy. Non-clinicians and staff members will be referred to the University of Kentucky Employee Assistance Program as indicated in the UK HealthCare's Policy #A09-005.

Approved: <u>Signature on File</u> Sharon P. Turner, DDS, JD Dean	Date: <u>7/20/2011</u>
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APPENDIX G

Disability Resources for Students

What is a Disability?

A disability is defined by the ADA Amendments Act (2008) as *“a physical or mental impairment that substantially limits one or more major life activities,”* including *“caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.”*

The Disability Resource Center provides assistance and support to students who have a documented physical, medical, learning, or psychological disorder.

Who should use Disability Resources?

Students with documentation of the following diagnoses should contact the Disability Resource Center:

Attention Deficit/Hyperactivity Disorder

Hearing Impairment

Learning Disability

Permanent Disability

Communication Disorder

Temporary Disability

Neurological Disorder

Chronic Health Conditions

Psychological Disorder

Visual Impairment

Process to document disability

It is recommended that students contact the Disability Resource Center early to request specific assistance so that the required medical or psychological documentation can be reviewed and reasonable accommodations can be provided from the beginning of class work in order to achieve the greatest benefit to the student. For more information about documentation guidelines and specific requirements to providing accommodations to students, stop by or visit the website. The Disability Resource Center is located in the Alumni Gym Building, Room 2; or you can call 257-2754 or visit the website: <http://www.uky.edu/DRC>.

Students Requiring Accommodations

If you require accommodations for your disability while attending University of Kentucky College of Dentistry, you should provide documentation and discuss your academic needs with a consultant in the Disability Resource Center as soon as possible. The Disability Resource Center will then develop an accommodation letter which will be forwarded to the Associate Dean of Academic Affairs, who will notify the appropriate course directors. You will receive an electronic copy of the letter and it is recommended that you meet with the Associate Dean of Academic Affairs and your individual faculty to discuss your accommodations. Please provide a reasonable amount of notice to your instructors in order to receive testing accommodations; the Disability Resource Center recommends at least 7 days' notice prior to a quiz or test.

Please note:

Accommodations will not have a retroactive effect. For example: if you qualify for accommodations and do not identify the need or follow the procedure outlined above, and subsequently fail or perform worse than expected on an exam, you cannot retake the exam with accommodations.

National Boards

At the discretion of the Joint Commission on National Dental Examinations (JCNDE), testing accommodations may be provided to candidates with qualified disabilities. Specific information related to this process can be found at:

http://www.ada.org/sections/educationAndCareers/pdfs/nb_accommodation_request.pdf. *A

consultant at the Disability Resource Center can assist you in completing the testing accommodation request form and attaching the necessary documentation.

APPENDIX H

COLLEGE OF DENTISTRY ACADEMIC CALENDAR 2016-2017 FOR DMD, OROFACIAL PAIN, ORTHODONTICS, PEDIATRIC DENTISTRY, AND PERIODONTICS PROGRAMS

Fall 2016 Semester

June

- June 6 – Monday - Academic Year Begins for 4th Year DMD Students (Externships)

June

- July 5 – Tuesday - Academic Year Begins for 1st Year Periodontics Students
- July 4 – Monday - Independence Day - Academic Holiday
- July 11 – Monday - Academic Year Begins for Orofacial Pain Students
- July 18 – Monday - Academic Year Begins for 2nd and 3rd Year Periodontics Students

August

- August 1 – Monday - Academic Year Begins for 1st, 2nd, and 3rd Year DMD Students
- August 1 – Monday - Clinical Year Begins for 4th Year DMD Students
- August 1 – Monday - Academic Year Begins for 1st Year Orthodontics Students, 1st Years Promoted to 2nd Year, 2nd Years Promoted to 3rd Year
- August 1 – Monday - Last day a 1st, 2nd, 3rd, and 4th Year DMD student can officially withdraw from the College of Dentistry for a full refund for the current term
- August 8 – Monday - Last day a 1st, 2nd, 3rd, and 4th Year DMD student can officially withdraw from the College of Dentistry and receive an 80 percent refund for the current term

September

- September 5 – Monday - Labor Day - Academic Holiday
- September 6 – Tuesday - Last day a 1st, 2nd, 3rd, and 4th Year DMD student can officially withdraw from the College of Dentistry and receive a 50 percent refund for the current term

November

- November 24, 25 – Thursday and Friday - Thanksgiving Holidays - Academic Holidays

December

- December 16 – Friday - Winter Break Begins After Last Class or Clinic for DMD and Periodontics Students
- December 23 – Friday - Winter Break Begins After Last Class or Clinic for Orofacial Pain and Orthodontics

Spring 2017

January

- January 3 – Tuesday - Classes/Clinics Resume for All Students/Residents: DMD, Orofacial Pain, Orthodontics, Pediatric Dentistry, and Periodontics
- January 16 – Monday - Martin Luther King, Jr. Birthday Observed - Academic Holiday

April

- April 3-7 – Spring Break for DMD, Orthodontics and Periodontics Students
- April 13-15 – Spring Break for Orofacial Pain Students (National Conference)

May

- May 5 – Friday - Academic Year Ends for Graduating DMD Students
- May 7 – Sunday - University Commencement
- College of Dentistry Hooding Ceremony
- May 29 – Monday - Memorial Day - Academic Holiday
- May 26 – Friday - Academic Year Ends for 3rd Year Graduating Orthodontics Students

June

- June 2 – Friday - Academic Year Ends for 3rd Year DMD Students
- June 16 – Friday - Academic Year Ends for 2nd Year DMD Students
- June 23 – July 10 - Break for 1st and 2nd Year Orthodontics Students
- June 23 – Friday - Academic Year Ends for 1st Year DMD and Periodontics Students
- June 26-July 7 – Break for 2nd and 3rd Year Periodontics Students
- June 30 – Friday - Last Day of class/clinic for Orofacial Pain

APPENDIX I

College of Dentistry Course Descriptions

ANA Anatomy and Neurobiology

ANA 530 COMBINED HISTOLOGY AND ORAL MICROANATOMY (5)

An analysis of the histological structure and organization of the human body, including an especially detailed treatment of the tissues and organs related to the oral cavity. Prereq: Admission to the College of Dentistry or some background in biology and consent of the instructor.

ANA 534 DENTAL GROSS ANATOMY AND EMBRYOLOGY. (6)

Study of gross and developmental anatomy with particular emphasis on functional anatomy of the head and neck. Lecture/laboratory course, with dissection being an essential component of the laboratory portion. Prereq: Admission to the College of Dentistry or some background in biology and consent of instructor.

ANA 538. DENTAL NEUROANATOMY. (2)

Study of human dental neuroanatomy with emphasis on functional neuroanatomy of central nervous system, especially related to cranial nerves 5, 7, 9 and 10, pain, and long tracts. Lecture 1 hr/week. Prereq: Admission to the College of Dentistry

CDE Community Dentistry

CDE 814 PATIENTS, DENTISTS AND SOCIETY I. (1)

This course aims to orient the student to the place health and health professions play in modern cultures. Recognition of their own social assumptions and values and those of persons of different backgrounds is encouraged. Understanding, predicting, and changing dental patient behavior from a social standpoint is emphasized.

CDE 815 FUNDAMENTALS OF DENTAL PUBLIC HEALTH. (2)

Fundamentals of Dental Public Health is a first-year course designed to introduce student dentists to the dental specialty of Dental Public Health, to dental epidemiological concepts, terminology, and methods used in population-based health care. Community oral health problems in Kentucky and the United States will be reviewed. Emphasis will be placed on public health research, programming, and outcome evaluation strategies related to oral disease in populations. Lecture, 28 hours; laboratory, 3 hours.

CDE 824 COMMUNICATION IN THE DENTAL HEALTH CARE SETTING. (1)

This course aims to improve the student's ability to communicate with patients and the public in an empathetic and professional manner. Methods of obtaining necessary health information from all types of patients are taught. Prereq: Second year standing in the College of Dentistry.

CDE 830 ADVANCED CONCEPTS IN DENTAL PUBLIC HEALTH. (1)

Advanced Concepts in Dental Public Health is a third year course designed to help students develop the perspective and sensitivities of dentists practicing in the community. It examines the

external environment and various factors that influence the oral health of the community including barriers to care. Financing mechanisms and workforce issues will be discussed. To provide a framework for the dental student's professional development, the instructional content builds on the concepts acquired in the first year introductory course in dental public health and presents concepts that will help the student dentist prepare for the Community-Based Dental Education Program. (CDE 841). Course material is organized around current societal and dental health issues and health care delivery system trends in Kentucky and the United States. These issues and trends will be examined in the context of current national debates concerning access to oral health prevention and care for high risk populations and the associated health disparities to these populations. Prereq: Admission to the College of Dentistry or consent of course director.

CDE 840 ADVANCED COURSE ON THE TREATMENT OF SPECIAL PATIENTS. (Elective) (1)

In this course, dental students participate in preclinical seminars and dental treatment of mentally, medically and physically handicapped patients. Several phases of dental treatment of the special patient, such as sedation and general anesthesia, pharmacological evaluation and preventive dentistry, are covered. The course is individually designed based on the student's interest in treated compromised patients. Note: Scheduling for this course will take place outside of regularly scheduled clinical/class time. Enrollment minimum is one and maximum enrollment is four. Prereq: Fourth-year standing, consent of Course Director, Academic Performance Committee (APC), and Team Leader.

CDE 841 DENTAL PRACTICE FIELD EXPERIENCE. (6-10)

Students are provided a full-time, off-campus assignment to a dental practice environment for a period of 6-10 weeks. Students spend an average of 32 hours each week participating in practice management and patient treatment activities under the supervision of a dentist. Approximately eight hours a week are spent in career plan development and in study of the community or region, particularly its health care delivery system and the role of dentistry in that system. Prereq: CDE 830.

CDE 844 DENTAL PRACTICE MANAGEMENT II. (4)

This course is primarily designed to give the student dentists, prior to graduation, practical, useful knowledge on establishing and maintaining a private dental practice. The course will be presented in an active learning format. Course sessions and activities will also include special sessions designed to introduce students to the current environment of dental practice, to organized dentistry in Kentucky, to the College's Alumni Association and to new developments and continuing education in the dental profession. Lecture 69 hours. Prereq: CDE 830 or consent of course director.

CDE 850 EXTRAMURAL EXPERIENCES FOR STUDENT DENTISTS. (Elective) (1-6)

This course is designed to provide second and/or third year student dentists an experiential learning experience in a research program, clinical program, public health program and/or institutional dental program. Career planning and service-learning are emphasized and coordinated with placement in a community-based site. Fourth year students may also participate in elective experiences with the approval of the Academic Performance Committee (APC). Students learn by active participation in patient care and/or research, by observation and by discussion with mentors. Discussions and interviews with patients and dental residents and staff are also encouraged. This course provides an opportunity for selected students, based on their own career goals, to participate in short-term elective dental educational experience external to

the student dentist clinics. While the sites vary greatly, most experiences include some patient care experiences (observation, assisting, direct participation in patient care under the direct supervision of an approved mentor). Extramural experiences are customized for each student dentist. If completed as an elective in Year 3 of the curriculum, this does not satisfy the Year 4 selective requirement. Variable credit from 1-6 credit hours; repeatable up to 6 credit hours, allows multiple bookings per semester. Prereq: Getting a passing score on the National Boards.

CDE 855 PUBLIC HEALTH DENTISTRY FIELD EXPERIENCE. (1)

This course allows implementation of oral health promotion programs designed in CDE 830 in community settings. Prereq: Must be fourth year dental student.

CDE 883 COMMUNITY-BASED SERVICE ELECTIVE. (1-5)

This Community-Based Service elective is designed to give students greater opportunities to provide dental services to diverse, underserved populations. The goals of this course are to expand development of a service ethic and to meet some of the needs of populations who do not have access to dental care. The majority of the time requirements for this course will be rotations to community clinics where students will work under the supervision of a College of Dentistry faculty providing dental services. Individual contracts will be developed with participating students to determine credit hours. In addition, there will be 2 one-hour seminars to discuss and debrief on the experiences of participating students. Prereq: Completion of year 2 dental school curriculum and/or approval of College of Dentistry APC Requirement:

CDE 884 INTERNATIONAL INTERPROFESSIONAL SERVICE LEARNING ELECTIVE. (1-3)

This community-based service learning elective is designed to afford students greater opportunities to provide a broad spectrum of dental educational, clinical and public health services to diverse, underserved populations in an international setting. The majority of time requirements for this course will be in a foreign country at designated community sites potentially working with other health care professionals. Activities will include but are not limited to assessing both community and patient needs and providing services based on the needs assessment and community goals. Students will work with UK approved organizations and under the direct supervision of a College of Dentistry faculty while in-country. 1-3 credit hours; repeatable for up to 3 credit hours; allows multiple bookings per semester. Prereq: Admission to College of Dentistry.

CDS Conjoint Dental Science

CDS 611 CHILD GROWTH AND DEVELOPMENT PART I. (2)

A seminar course on nature and physiologic control of physical growth, for graduate students in dentistry. Prereq: Admission to a graduate program of the College of Dentistry; D.D.S. or D.M.D. degree.

CDS 612 CHILD GROWTH AND DEVELOPMENT PART II. (2)

A seminar course for graduate students in dentistry covering emotional and intellectual growth of children, and diseases and congenital anomalies of children. Prereq: Admission to graduate program of the College of Dentistry; D.D.S. or D.M.D. degree.

CDS 613 CONTEMPORARY LEADERSHIP IN DENTISTRY. (1)

The course will explore the current leadership dilemma in the health professions (specifically). The purpose is to prompt the extension of the role of oral health professionals to serve as leaders who

engage a richer "public good" agenda as part of their role as doctor/teacher. The course will concentrate on important issues such as leadership development and theories of leadership; team building; personality preferences and leadership; peer assessment; transformational and transactional leadership; stress management; leading change; negotiation; and giving and receiving feedback. Prereq: Enrollment in one of the College of Dentistry's post-doctoral programs.

CDS 631 DIAGNOSIS AND MANAGEMENT OF TEMPOROMANDIBULAR DISORDERS AND OROFACIAL PAIN. (1)

This course provides information regarding the normal anatomy and function of the masticatory system and then highlights some of the common disorders related to dysfunction of this system. Emphasis is placed on temporomandibular disorders and how they are identified and management in the clinical practice. Other disorders associated with orofacial pain complaints will be discussed so that students are able to identify these conditions and successfully manage them or refer the patient to the appropriate health care provider. Prereq: Admission to dental graduate program.

CDS 660 RESEARCH DESIGN, METHODS AND DISSEMINATION. (2)

This lecture/seminar course is designed to provide students with an overview of the basic principles of study design and protocol development, with a focus on clinical and translational research. It also is designed to expose students to the interplay between patient care and clinical/translational research and to provide the students with tools that will assist them in dissemination of their research findings. Prereq: Admission to dental graduate program.

CDS 670 ADVANCES IN ORAL AND MAXILLOFACIAL PATHOLOGY. (1)

This course consists of 16 hours of lecture on the major disease topics in Oral and Maxillofacial Pathology including oral mucosal, salivary gland and bone pathology. Current classifications of these major categories will be presented and selected topics of current importance will be discussed. Prereq: Admission to dental graduate program

CDS 680 CLINICAL MEDICINE FOR POSTGRADUATE DENTAL STUDENTS. (2)

This course is designed to provide graduate students and dental residents with an advanced understanding of how various medical disorders and medical therapies can affect oral health and the delivery of dental care. Prereq: Admission to dental graduate program.

CDS 748 MASTER'S THESIS RESEARCH. (0)

Half-time to full-time work on thesis. May be repeated to a maximum of six semesters. Prereq: All course work toward the degree must be completed. Note: Registration for this course is not available via telephone (UK-VIP) or webUK. For enrollment information contact the Graduate School at 257-4905.

CDS 768 RESIDENCE CREDIT FOR THE MASTER'S DEGREE. (1-6)

May be repeated to a maximum of 12 hours.

CDS 812 NORMAL HUMAN GROWTH AND DEVELOPMENT. (1)

This is a lecture course which introduces basic concepts of normal human growth and development from birth through adolescence. Lectures emphasize the time-dependent changes that normally occur during physical and psychological maturation. A special emphasis is directed toward basic knowledge and understanding of craniofacial growth and development of the teeth

and occlusion. Lecture, 22 hours. Prereq: Admission to the College of Dentistry or consent of course director.

CDS 813 MANAGEMENT I: INTRO TO MANAGEMENT FOR THE DENTIST. (2)

In this introductory course in management for the dentist, basic concepts will be presented which can be applied in the management of time, people, facilities and money. Instruction leading to certification in cardiopulmonary resuscitation is included. Lecture, 45 hours. Prereq: Admission to the College of Dentistry.

CDS 815 INTRODUCTION TO CLINICAL DENTISTRY. (3)

This survey course presents an introduction to the dental field of operation (operatory), basic assisting procedures, preventive dentistry, infection control, application of sealants and oral isolation techniques. It is designed to prepare students to function in dental environments, safely and efficiently and to prepare them for the school-based sealant experience offered in CDE 815, Fundamentals of Dental Public Health. Lecture, 21 hours; lab, 20 hours; clinic, 16 hours. Prereq: Admission to the College of Dentistry or consent of the course director.

CDS 818 THE PROFESSION OF DENTISTRY I. (1)

This course is an introduction to life in the profession of dentistry. The course will explore normal everyday morality, and consider whether a case can be made for an extraordinary morality or ethic for practitioners. The course will conclude with a brief review of the history of dentistry to enable the student to place the profession of dentistry in cultural and historical perspective. Prereq: Approval of dean and/or his designee for academic affairs and the course director.

CDS 819 SPECIAL TOPICS IN DENTISTRY. (1)

The purpose of this first-year course is to present current information on a wide variety of topics ranging from interprofessional collaborative care, culture and society, computer resources, sexual harassment awareness, minority health issues, gender and age as factors in health care, alcohol and substance abuse, along with other subjects of relevance to students enrolled in the dental curriculum. In some cases, the course content applies directly to didactic and clinical courses in the curriculum. At other times, the material is intended to help students increase their success in the curriculum and become better caregivers. For the 2015-2016, the content of this course will be comprised of information included the Core Interprofessional Collaborative Care Curriculum, and introduction to electronic healthcare systems, Axium. Prereq: First year standing.

CDS 821 LOCAL ANESTHESIA. (1)

The action and dosage of local anesthetic agents used in dentistry are taught as are the proper injection techniques. The technique of venipuncture and administration of intravenous drugs are also included. Patient evaluation and emergency techniques for cardiac and respiratory resuscitation are reviewed. Lecture, six hours; self-instruction, 10 hours; clinic, five hours. Prereq: ANA 534 Coreq: OBI 828.

CDS 822 GERONTOLOGY/GERIATRIC DENTISTRY. (1)

This course is designed to help students gain an appreciation for the significant opportunities as well as challenges the aging population will bring to their oral health practice. This course will provide students basic knowledge and information in gerontology/geriatric dentistry. Lecture, 17 hours. May be repeated to a maximum of two credits. Prereq: Permission of course director.

CDS 823 MANAGEMENT II: PATIENT COMMUNICATION (1)

The primary purpose of this course is to improve students' ability to interact with patients in an empathetic and professional manner. Proper management of all assigned patients is required. Instruction leading to recertification in cardiopulmonary resuscitation is provided. Lecture, 26 hours. Prereq: CDS 821 or consent of course director.

CDS 824 ORAL DIAGNOSIS AND TREATMENT PLANNING. (1)

The purpose of this course is to prepare the student for clinical dentistry by presenting techniques of examination and diagnostic procedures that ultimately lead to diagnosis and treatment planning. CDS 824 consists of lectures, interactive case presentations, clinic exercises, out-of-class assignments, handouts, self-study time, and website utilization. Contact hours 10. Prereq: ODM 814 or consent of course director.

CDS 828 PROFESSION OF DENTISTRY II. (1)

This course focuses on ethical practice in clinical dentistry. In the life of a health-care clinician circumstances arise daily which are ethical in nature. The dentist, and the patient, must respond to these circumstances in ways that result in the best for all parties concerned. This course will explore the duties assumed by dentists in becoming a provider of oral health care for patients. In doing so, the major question to be addressed is, "How do dentists interact with their patients for the good of both?" Prereq: Approval of dean and/or his designee for academic affairs and the course director.

CDS 831 CONSCIOUS SEDATION. (1)

This course is designed to teach the principles of nitrous oxide-oxygen inhalation sedation and intravenous sedation in dentistry. The management of emergencies associated with these techniques and an introduction to the principles of general anesthesia are also included. Lecture, 21 hours; clinic, four hours. Prereq: CDS 821

CDS 833 CLINICAL PATIENT MANAGEMENT. (1)

This course introduces the dental student to various special needs conditions and teaches the proper methods of physical management of special needs patients needed to provide dental care. Proper management of all assigned dental patients is required. Instruction leading to recertification in cardiopulmonary resuscitation is also included. Lecture, 26 hours; laboratory, 3 hours; clinic, 3 hours per term. Prereq: CDS 823.

CDS 835 DENTAL IMPLANTOLOGY. (2)

Dental implantology has become an integral part of dental services. This course contains information on patient centered criteria for implant services, surgical considerations, and prosthetically driven treatment results. The student will have the opportunity to familiarize him/herself with the components used in providing such treatment through a hands-on laboratory session. Lecture; 24 hours; laboratory, 12 hours. Prereq: Admission to College of Dentistry or discretion of course director.

CDS 843 MANAGEMENT IV: GERIATRIC DENTISTRY (1)

Emphasis in this course is placed on developing abilities to make individual treatment decisions for elderly dental patients and acquiring positive attitudes towards the provision of oral health care to the aged. Students will make site visits to residential centers for the elderly. Proper management of all assigned dental patients and instruction leading to recertification in cardiopulmonary

resuscitation are also included. Lecture, 23 hours; laboratory, 12 hours. Prereq: CDS 833 or consent of course director.

CDS 844 DRUG MISUSE, ABUSE AND DEPENDENCY: WHAT DENTISTS NEED TO KNOW. (1)

This course is designed to provide new insights and understanding into prevention, recognition and treatment of patients with, and at risk for, drug misuse and abuse. The course enables dental students to understand addiction as primary, chronic and progressive disease and to demonstrate an understanding of the pharmacology, abuse potential, as well as the behavioral and physiological effects of the commonly abused drugs. Emphasis will be on increasing dental students' skills and abilities to recognize the signs and symptoms of drug abuse; identify and manage patients at risk for drug problems; and become effective in providing successful care for drug dependent patients while minimizing their potential for relapse. Prereq: Fourth-year standing in College of Dentistry or consent of course director.

CDS 846 DIAGNOSIS AND MANAGEMENT OF OROFACIAL PAIN. (3)

This course will present information regarding the diagnosis and management of orofacial pain and temporomandibular disorders. The course will consist of lectures and one laboratory session. The information provided in this course will allow the student to understand the dentist's role in managing complex orofacial pain problems. The area of temporomandibular disorders will be emphasized since the dentist plays a major role in managing these pain disorders. Lecture, 45 hours; laboratory, 3 hours. Prereq: ANA 534, OSG 820, and RSD 822.

CDS 860 SPECIAL TOPICS IN ORAL HEALTH. (Elective) (1-3)

This course will engage students in a variety of activities including lectures, independent literature review and reading community-based projects, and individual or small group discussions to address current topics of special interest or concern in oral health. Projects and discussion areas for students participating in an interdisciplinary colloquium will be developed in conjunction with other health care providers. Prereq: Enrollment in the College of Dentistry; approval of the course director.

CDS 865 FORENSIC ODONTOLOGY ELECTIVE. (1)

Elective introductory course in forensic dentistry for fourth year dental students. Prereq: Must be a fourth year dental student.

END Endodontics

END 820 ANTERIOR ENDODONTICS. (2)

This is a lecture-laboratory course which is designed to introduce the student to the diagnostic terminology of pulpal and periapical disease and the techniques of endodontics in anterior teeth. Lecture, 10 hours; laboratory, 30 hours. Prereq: RSD 812 and RSD 814, or consent of course director.

END 822 POSTERIOR ENDODONTICS. (2)

This is a lecture-laboratory course which is designed to introduce the students to the diagnostic terminology of pulpal and periapical disease and the techniques of endodontic in posterior teeth. Lecture, 10 hours; laboratory, 30 hours; OSCE 1 hour (competency/evaluation of preclinical concepts). Prereq: END 820 and RSD 824, or consent of course director.

END 830 ENDODONTICS II. (1)

This course concerns the diagnosis and treatment of endodontically related problems. Traumatic injuries, controversies in instrumentation and filling procedures, periodontic-endodontic consideration, surgical endodontics and other selected topics are discussed in depth. Lecture, 20 hours. Prereq: END 821.

END 831 CLINICAL ENDODONTICS II. (1)

In this course students will treat routine endodontic cases. Clinic, 54 hours. Prereq: END 821.

END 841 CLINICAL ENDODONTICS III. (1)

This course offers dental students further experience in providing endodontic treatment. Clinic, 40 hours. Prereq: END 831 or consent of a course director.

END 880 CLINICAL ENDODONTICS SEMINAR. (Elective) (1)

This course is designed to give a more in-depth hands-on view of some of the newest concepts in endodontics. Seminars will be presented including new concepts of instrumentation and root canal obturation. Demonstrations and hands on class participation will supplement the seminars. Note: scheduling for this course will take place outside of regularly scheduled class/clinic time. Prereq: END 830, END 831, ranked in the upper half of the class, and consent of instructor.

OBI Oral Biology

OBI 650 ORAL BIOLOGY FOR POSTGRADUATE DENTAL STUDENTS I. (2)

This seminar course provides a review of selected biological science topics. Emphasis is placed on the use of current literature for an in-depth study of those aspects of the subject particularly relevant to dental practice. Lecture: 32 hours. Prereq: Admission to an advanced education program of the College of Dentistry or consent of the course director.

OBI 651 ORAL BIOLOGY FOR POSTGRADUATE DENTAL STUDENTS II. (2)

This course is a continuation of OBI 650. It is a seminar that uses the scientific literature to review selected biological science topics with emphasis on those especially relevant to dental practice. Lecture: 32 hours. Prereq: OBI 650 or consent of instructor.

OBI 812 DENTAL BIOCHEMISTRY. (6)

This is a comprehensive course in biochemistry designed to fulfill the specific needs of student dentists. Course content is generally as outlined in the American Association of Dental Schools suggested curriculum guidelines for biochemistry. Part I acquaints students with the chemical constituents of prokaryotic and eukaryotic cells; topics include the chemistry of lipids, carbohydrates, proteins, vitamins and coenzymes, and the nature of enzyme action. Part II integrates the chemical principles learned from Part I with concepts of cell dynamics, structure, function, subcellular organization, and metabolism. Topics include intermediary metabolism, bioenergetics, DNA replication, protein synthesis, and cellular regulatory and control mechanisms. Course content, where possible, is related to current concepts concerning the etiology of oral diseases, their treatment, and prevention to assist student dentists in attaining institutional goals and objectives for clinical competency. Prereq: Admission into the College of Dentistry and/or consent of course director.

OBI 814 DENTAL HUMAN FUNCTION. (5)

This course provides in-depth instruction on the physiological mechanisms of body function from the single cell to the organism level. The course is team taught primarily by basic scientists.

Teaching methodologies include didactic and Socratic lectures with some dental correlations.

Prereq: Admission to the College of Dentistry.

OBI 828 IMMUNITY, INFECTION AND DISEASE FOR THE STUDENT DENTIST. (6)

The course provides basic concepts of immunology and bacterial, viral, fungal and protozoal biology. It focuses on mechanisms of human immunity, immunologically mediated disease, and pathogenesis in infectious disease. The material covered includes relevant pathology associated with both immunologic and infectious diseases, and a summary of infectious diseases from a clinical perspective. Lecture: 4 hours per week. Prereq: Enrolled in the DMD curriculum.

OBI 836 DENTAL PHARMACOLOGY. (3)

This course will provide students of dentistry with a fundamental understanding of the pharmacology and the therapeutic uses of drugs commonly used in their practice or by their patients. This course will reinforce topics discussed in CDS 821 (Local Anesthesia); in addition, the course will integrate with ODM 830 (Mngmnt of Med Compromised Patient) and provide focused preparation for CDS 831 (Conscious Sedation). Prereq: OBI 812, OBI 814, CDS 821

ODM Oral Diagnosis and Oral Medicine

ODM 810 BASIC PRINCIPLES IN ORAL AND MAXILLOFACIAL RADIOLOGY. (2)

This course presents the basic principles of oral and maxillofacial radiology, including radiation biology, radiation physics and Imaging Principles, radiation protection and safety, and radiology techniques. Lecture, 20 hours; seminar, 4.5 hours. Prereq: Admission to the College of Dentistry.

ODM 814 ORAL DIAGNOSIS/ORAL MEDICINE & TREATMENT PLANNING (2)

This course is designed to prepare the student dentists to do overall patient evaluation which would include medical history, dental history, social history, family history and to understand the significance of proper head and neck examination which would ultimately help them in diagnosis and treatment planning. It will also help them in understanding the different needs and extra precautions needed for certain medically complex patients and special needs patients and hands on clinical training in patient examination. It will consist of lectures, stimulated case presentations, hands on clinical examination training in groups, self-practice time and handouts. Prereq: 1st Year University of Kentucky, College of Dentistry student.

ODM 820 ORAL AND MAXILLOFACIAL RADIOLOGY AND DIAGNOSTIC IMAGING. (2)

This course presents the principles of radiographic anatomy, extra-oral projections (including panoramic film and lateral skull film), radiology of caries and periodontal disease, digital radiology, advanced imaging techniques (including CBCT), and the process of radiographic interpretation.

Lecture, 24 hours; seminar, 4.5 hours; practicum, 24 hours (three days). Prereq: ODM 810.

ODM 821 CLINICAL ORAL DIAGNOSIS I. (1)

This course consists of two components: 1) examination, diagnosis, and treatment planning for patients assigned to dental students in general clinics; and 2) an emergency clinic assignment in which the students will diagnose and treat patients with acute oral problems. Clinic, 30 hours.

Prereq: CDS 815; Coreq: CDS 824.

ODM 830 MANAGEMENT OF THE MEDICALLY COMPROMISED DENTAL PATIENT. (3)

This course will provide students with the knowledge required to manage medically compromised patients in the outpatient dental office. Basic clinicopathological information about commonly occurring medical disorders, the impact medications that these patients take have, the special problems they have, and their effects on dental health care will be presented. Critical thinking is encouraged so that the students can use their diagnostic skills in the appropriate manner to identify and manage patients with systemic disorders. Lecture, 43 hours; laboratory, 4 hours. Prereq: Approval of dean and/or his designee for academic affairs and the course director.

ODM 831 CLINICAL ORAL DIAGNOSIS II. (2)

This course is a continuation of ODM 821 and also consists of two components: 1) examination, diagnosis and treatment planning for patients assigned to dental students in general clinics; and 2) emergency clinic assignments in which the students will diagnose and treat patients with acute oral problems. Clinic, 77 hours. Prereq: ODM 821; Coreq: ODM 830

ODM 841 CLINICAL ORAL DIAGNOSIS III. (1)

This course is a continuation of ODM 831 and also consists of two components: (1) examination, diagnosis and treatment planning for patients assigned to dental students in general clinics; and (2) emergency clinic assignments in which the students will diagnose and treat patients with acute oral problems. Clinic, 40 hours. Prereq: ODM 830 and ODM 831.

OFP Oral Health Practice/Orofacial Pain Center

OFP 634 CURRENT CONCEPTS IN TEMPOROMANDIBULAR DISORDERS. (3)

This course provides the student with information on the anatomy, physiology and function of the masticatory system. The etiology, diagnosis and treatment of temporomandibular disorders will be emphasized. Lecture, 41 hours; laboratory, 15 hours per semester. Prereq: Acceptance into the College of Dentistry M.S. Program and/or consent of the College of Dentistry's Director of Graduate Studies and the course director.

OFP 636 CLINICAL MANAGEMENT OF TEMPOROMANDIBULAR DISORDERS. (3)

This course provides the student with clinical experience in the diagnosis and management of temporomandibular disorders. The student will provide treatment for patients referred to the Orofacial Pain Center under the supervision of the course director. Clinic, 144 hours. Prereq: Acceptance into the College of Dentistry M.S. Program and/or consent of the College's Director of Graduate Studies and the course director.

OFP 700 OROFACIAL PAIN TREATMENT PLANNING SEMINAR. (2)

This course will provide the student with experience in diagnosing and treatment planning various orofacial pain patients. Lecture: 32 hours per year or sixteen hours per semester. Prereq: Acceptance into the College of Dentistry M.S. Program and/or consent of the College's Director of Graduate Studies and the course director.

OFP 734 CURRENT CONCEPTS IN OROFACIAL PAIN. (3)

This course provides the students with information on non-masticatory orofacial pain problems. The etiology and differential diagnosis of head and neck pain will be emphasized. The student will

learn the dentist's role in the management and/or referral of complex facial pain problems.
Prereq: OFP 634 and OFP 636.

OFP 736 CLINICAL MANAGEMENT OF OROFACIAL PAIN. (3)

This course provides the student with clinical experience in the diagnosis and management of complex orofacial pain problems. The student will provide treatment for patients referred to the Orofacial Pain Center under the supervision of the course director. Clinic, 144 hours. Prereq: OFP 634 and OFP 636.

OFP 790 RESEARCH IN OROFACIAL PAIN. (1-6)

This course provides credit hours for the graduate students' independent research efforts. Prereq: Admission to the Orofacial Pain graduate program and consent of the Director of Graduate Studies in the College of Dentistry.

OHP Oral Health Practice

OHP 850 INDEPENDENT WORK IN ORAL HEALTH PRACTICE. (Elective) (1-3)

An elective course offered by the department of Oral Health Practice. Students may work on individual projects in one or more of the disciplines encompassed by this department under the direction of a faculty member. The work should involve independent laboratory or clinical research and include supporting literature searches. The end result should be either a table clinic presentation or a paper suitable for publication. The minimum number of hours to be spent on the project and the means of evaluation will be decided before beginning the project. May be repeated to a maximum of 12 credits. Prereq: Specific course prerequisites and year in dental school will depend on the nature of the proposed project; consent of instructor.

OHS Oral Health Science

OHS 850 INDEPENDENT WORK IN ORAL HEALTH SCIENCE. (Elective) (1-3)

An elective course offered by the department of Oral Health Science. Students may work on individual projects in one or more of the disciplines encompassed by this department under the direction of a faculty member. The work should involve independent laboratory or clinical research and include supporting literature searches. The end result should be either a table clinic presentation or a paper suitable for publication. The minimum number of hours to be spent on the project and the means of evaluation will be decided before beginning the project. May be repeated to a maximum of 12 credits. Prereq: Specific course prerequisites and year in dental school will depend on the nature of the proposed project; consent of instructor.

OPT Oral Pathology

OPT 650 GRADUATE ORAL PATHOLOGY I. (2)

This is a seminar course in advanced oral pathology in which students study the microscopic, radiographic, and clinical features and the management of diseases that affect oral and perioral tissues. A case study format is used to discuss both common and rare conditions that illustrate all major disease categories and to provide a framework for developing a systematic approach to disease diagnosis. Lecture: 36 hours. Prereq: Dental degree and enrollment in a College of Dentistry postgraduate program, or consent of instructor.

OPT 651 GRADUATE ORAL PATHOLOGY II. (2)

This course is a continuation of OPT 650. It is a seminar in advanced oral pathology in which students study the microscopic, radiographic, and clinical features and the management of diseases that affect oral and perioral tissues. A case study format is used to discuss both common and rare conditions that illustrate all major disease categories and to provide a framework for developing a systematic approach to disease diagnosis. Lecture: 36 hours. Prereq: OPT 650 or consent of instructor.

OPT 820 GENERAL PATHOLOGY FOR STUDENT DENTISTS. (3)

This basic course covers general pathology, which will prepare the student dentist to concentrate on the specialized area of oral pathology. Emphasis is placed on cell damage, inflammation and repair, neoplasia and hemostasis, as well as the in-depth study of selected systemic diseases that may affect dental patient management. Prereq: Enrollment in the College of Dentistry and second year class standing, ANA 530, ANA 534, or consent of course director.

OPT 830 ORAL PATHOLOGY I. (3)

This is a comprehensive lecture course on oral and paraoral diseases. The course deals mainly with the clinical aspects of oral disease, with emphasis on clinical and/or radiographic appearance, etiology, management and prognosis. Lecture, 41 hours, and 5 one-hour examinations. Prereq: OPT 820.

OPT 832 ORAL PATHOLOGY II. (1)

This course teaches the dental student an effective approach to patients with oral lesions. It will stress the following: development of a reasonable differential diagnosis list, procedures to be used in obtaining a definitive diagnosis, management of the patient after a diagnosis has been made, and treatment if indicated. Lecture/seminar, 26 hours and 1 two-hour final exam. Prereq: OPT 830.

OPT 840 ORAL PATHOLOGY III. (1)

This is an advanced course in oral pathology in which various diseases and abnormal conditions of the head, neck, and oral cavity are presented. The pertinent information on several selected cases will be available online and posted in display case for a week. Subsequently, an associated seminar will concentrate on the development of a differential diagnosis, establishment of a definitive diagnosis, and discussion of treatment and prognosis. Seminar, 19 hours and 1-2 hour exam. Seminar, 19 hours and 1-2 hour exam. Prereq: OPT 832.

OPT 850 ORAL PATHOLOGY ELECTIVE. (1-10)

Elective courses offered by the Department of Oral Pathology provide opportunities for further study of or experience in various aspects of oral pathology. Topics may include principles of clinical and histologic diagnosis, the management of patients with oral disease, and discussions of specific oral diseases. Hours variable, ranging from a minimum of 16 hours lecture/discussion to a maximum of 10 weeks clinical experience. May be repeated to a maximum of 10 credits. Prereq: The minimum year in dental school and any course prerequisites will be announced for each topic.

ORT Orthodontics

ORT 610 CRANIO-FACIAL FORM. (2)

This is a two credit-hour seminar course that introduces students to the basic concepts and principles of cephalometrics in orthodontic diagnosis and treatment. The course reviews historical literature as well as contemporary articles. Prereq: Admission to graduate dental programs; D.D.S. or D.M.D. degree.

ORT 620 ORAL-PHARYNGEAL FUNCTION, PART I. (2)

Basic and applied physiology for graduate students in dentistry. Class, two and one-half hours. Prereq: Admission to a graduate program of the College of Dentistry; D.D.S. or D.M.D. degree.

ORT 621 ORAL-PHARYNGEAL FUNCTION, PART II. (2)

A continuation of ORT 620, emphasizing speech physiology and language development. Lecture, two and one-half hours. Prereq: Admission to a graduate program of the College of Dentistry; D.D.S. or D.M.D. degree.

ORT 660 ORTHODONTIC DIAGNOSIS. (2)

This is a two credit-hour seminar course offered at the graduate level within the specialty program in orthodontics. The course provides in-depth information concerning methods and rationale for gathering a comprehensive database for orthodontic patients. Analysis and interpretation of the database is approached by using the orthogonal analysis technique. The process of developing a treatment plan from the database will be thoroughly explored. Prereq: Admission to a postdoctoral program of the College of Dentistry.

ORT 661 ORTHODONTIC SEMINAR-CLINIC. (3)

Seminar, laboratory and clinical instruction in orthodontic theory and practice. Lecture, three hours; laboratory, 15 hours. May be repeated to a maximum of 12 credits. Prereq: ORT 660.

ORT 662 ORTHODONTIC TECHNIQUE. (2)

This is a two credit-hour graduate level course designed to introduce or reacquaint the student with some of the most commonly used techniques in orthodontic practice. It is closely related to the diagnosis and treatment planning course and to the course on mechanics. Prereq: Admission to a postdoctoral program of the College of Dentistry.

ORT 664 BIOMECHANICS. (2)

This is a two credit hour seminar course. The purpose of the course is to introduce the foundational concepts for understanding both the laws of mechanics and the typical tissue responses to force systems used in orthodontic appliances. Students will learn theory-guided approaches to planning safe, predictable and efficient orthodontic treatment. Students will be expected to read and critique background material in assigned textbooks and journal articles for seminar discussions. This course will supplement subject matter covered in the tyodont course, ORT 662. Prereq: Admission to a postdoctoral program in the College of Dentistry.

ORT 710 MANAGEMENT OF COMPLEX OROFACIAL DEFORMITIES. (1)

Seminar discussions of techniques in orthodontic problem solving and planning treatment for patients with orofacial deformities refractory to either orthodontic therapy or oral surgery but which are resolvable by utilizing combinations of orthodontic and oral surgical therapies. Lecture, one hour per week; laboratory, one hour per week. Prereq: ORT 660 or permission of instructor.

ORT 770 ORTHODONTIC SEMINAR. (1)

Seminar in orthodontic theory and practice for advanced graduate and postdoctoral students in orthodontics. May be repeated to a maximum of six credits. Lecture, three hours. Prereq: Admission to the Orthodontics Graduate Program and consent of course director.

ORT 790 RESEARCH IN ORTHODONTICS. (1-5)

Research in orthodontics. May be repeated to a maximum of five credits. Prereq: Admission to the orthodontic graduate program of the College of Dentistry; special permission.

ORT 822 ORTHODONTICS. (3)

This is a lecture and laboratory course in which the knowledge and skills needed to conduct a thorough orthodontic diagnosis and to plan orthodontic therapy are developed. In addition, the principles of orthodontic mechanotherapy are introduced and the role the general dentist plays in maintaining healthy occlusion is defined. Early lectures are oriented to data base collection, analysis and interpretation. The course provides opportunity to develop skills in analysis of facial proportions, analysis of diagnostic dental casts, cephalometric tracings, formulating a prioritized problem list, and development of long term and short term treatment goals. As the semester progresses, focus shifts to give the student a basic understanding of the skills required to fabricate fixed and removable appliances that are typically indicated for limited tooth movement and retention in interceptive orthodontics and adjunctive orthodontic treatment in a general practice setting. The role of the general dentist in the management of their patients' orthodontic needs will be delineated. Special emphasis will be placed on coordination of treatment between the specialist and general practitioner and maintenance of occlusion over the life span of the patient. The role of orthodontic treatment in a multidisciplinary approach will be discussed. Finally, new technology emerging on the horizon in clinical orthodontics will be explored. Lecture, 32 hours; laboratory, 3 hours; seminar, 4 hours. Prereq: Students must have second year standing in the College of Dentistry and have passed CDS 812. Otherwise, special permission of the course director is required.

ORT 841 CLINICAL ORTHODONTICS. (1)

This clinical course requires the students to analyze and diagnose the present and developing occlusal disharmonies in their assigned patients and to provide therapy for those patients who need tooth movements judged to be within the scope of the general practice of dentistry. Clinic, 50 hours. Prereq: ORT 822 and consent of course director.

ORT 850 ADVANCED ORTHODONTIC DIAGNOSIS AND TREATMENT PLANNING. (Elective) (1-10)

Elective courses offered by the Department of Orthodontics provide opportunities for further study of or experience in various aspects of orthodontics. Topics may include principles of comprehensive orthodontic treatment, types of orthodontic appliances, and methods of correcting facial skeletal problems. Hours variable, ranging from a minimum of 16 hours lecture/discussion to a maximum of 10 weeks clinical experience. May be repeated to a maximum of 10 credits. Prereq: Minimum year in dental school and any course prerequisites will be announced for each topic.

OSG Oral and Maxillofacial Surgery

OSG 651 ANATOMICAL RELATIONSHIPS IN SURGERY. (1)

A seminar course for dental graduate students in areas other than surgery, emphasizing anatomical and surgical principles applicable to all dental specialties. Prereq: Admission to graduate or post-doctoral programs of College of Dentistry; D.D.S. or D.M.D. degree.

OSG 820 ORAL SURGERY I. (1)

This course is designed to introduce the student to principles of surgery and to prepare them for their clinical rotations, OSG 831 and 841. Emphasis is placed not only on the technical aspects of surgery, but also on the integration of basic sciences to form a scientific basis for the clinical practice of surgery.

OSG 830 ORAL SURGERY II. (1)

This course is an overview of the specialty of oral surgery. The student is introduced to the surgical management of congenital and acquired abnormalities of the oral structures and associated parts. Management of odontogenic infection, cysts and tumors is presented, as well as the role of the dentist in the care of head and neck cancer patients. The diagnosis and management of facial fractures also are presented, particularly as they relate to the general practitioner. Lecture, 25 hours. Prereq: OSG 820 or consent of course director.

OSG 831 ORAL SURGERY ROTATION I. (1)

This course teaches the management of the ambulatory oral surgical patient. It includes patient evaluation, control of pain and anxiety, performance of minor oral surgical procedures, treatment of acute and chronic oral infections and of complications associated with oral surgery, and the use of the problem-oriented record. Slide-text programs and reading assignments supplement the outpatient clinical experience. Clinic, 48 hours. Prereq; CDS 821 and OSG 820, or consent of course director.

OSG 841 ORAL SURGERY ROTATION II. (1)

In this course students learn the management of oral surgical patients in a hospital. It consists of a full-time rotation on the oral surgery hospital service, including standing in-hospital night call with the oral surgery house staff. Students assist in patient care and perform procedures such as exodontia and biopsy. Oral surgical management of comprehensive care patients in the outpatient clinic is also included. Clinic, two weeks. Prereq: OSG 830 and OSG 831.

OSG 850 ORAL SURGERY ELECTIVE (1-10)

Oral Surgery provide opportunities for further study of or experience in various aspects of oral surgery. Topics may include hospitalized and ambulatory patient management, emergency care, operating room experience, pain and anxiety control, and surgical technique. Hours variable, ranging from a minimum of 16 hours lecture/discussion to a maximum of 10 weeks clinical experience. May be repeated to a maximum of 10 credits. Prereq: Minimum year in dental school and any course prerequisites will be announced for each topic.

PDO Pediatric Dentistry

PDO 610 PEDIATRIC DENTISTRY SEMINAR I. (2)

This seminar course is the first in a series of four such seminars that discuss essential aspects of clinical pediatric dentistry, with emphasis on the scientific evidence supporting contemporary practice. These four consecutive seminar courses over four semesters (two academic years) provide the pediatric dentistry graduate student with a conceptual basis for caring for the oral

health of children. This initial seminar of sixteen two-hour sessions (32 hours) addresses: effective communication with children, strategies for management of children's behavior in the clinical setting, development of the dentition, clinical management of traumatic injuries to the oral cavity, and restoration of carious teeth. Prereq: Enrollment in the College of Dentistry's Master of Science degree program in the Pediatric Dentistry track.

PDO 620 PEDIATRIC DENTISTRY SEMINAR II. (2)

This seminar course is the second in a series of four such seminars that discuss essential aspects of clinical pediatric dentistry, with emphasis on the scientific evidence supporting contemporary practice. These four consecutive seminar courses over four semesters (two academic years) provide the pediatric dentistry graduate student with a conceptual basis for caring for the oral health of children. This second seminar in the series consists of sixteen two-hour sessions (32 hours) and addresses: pulpal therapy, management of the arch circumference of the developing child, clinical management of the child with cleft lip/cleft palate, speech pathology, burns affecting the oral cavity, the use of antimicrobials, and medical compromising conditions affecting oral health care. Prerequisite: Enrollment in the College of Dentistry's Master of Science degree program in the Pediatric Dentistry track, and completion of PDO 610.

PDO 630 PEDIATRIC DENTISTRY SEMINAR III. (2)

This seminar course is the third in a series of four such seminars that discuss essential aspects of clinical pediatric dentistry, with emphasis on the scientific evidence supporting contemporary practice. These four consecutive seminar courses over four semesters (two academic years) provide the pediatric dentistry graduate student with a conceptual basis for caring for the oral health of children. This third seminar in the series consists of sixteen two-hour sessions (32 hours) and address: deleterious oral habits, orthodontic correction of malocclusions, esthetic dentistry of the child, abnormal development of the dentition, and elements of managing a successful pediatric dental practice. Prereq: Enrollment in the College of Dentistry's Master of Science degree program in the Pediatric Dentistry track, and completion of PDO 610 and 620.

PDO 640 PEDIATRIC SEMINAR IV. (2)

This seminar course is the fourth and last of a series of four such seminars that discuss essential aspects of clinical pediatric dentistry, with emphasis on the scientific evidence supporting contemporary practice. These four consecutive seminar courses over four semesters (two academic years) provide the pediatric dentistry graduate student with a conceptual basis for caring for the oral health of children. This fourth seminar in the series consists of sixteen two-hour sessions (32 hours) and addresses the required reading list of the American Board of Pediatric Dentistry. Subsequent to completing the graduate program the pediatric dentistry graduate student will take a written and clinical examination administered by the American Board of Pediatric Dentistry in order to be board-certified in the clinical specialty. The seminar is designed to ensure the graduate student is prepared to successfully complete the examination. Prerequisites: Enrollment in the College of Dentistry's Master of Science degree program in the Pediatric Dentistry track, and completion of PDO 610, 620, and 630.

PDO 790 RESEARCH IN PEDIATRIC DENTISTRY. (1-6)

Participation in clinical, biomedical or biobehavioral research in pediatric dentistry. Research must be conducted independently, but with the supervision of a faculty mentor. Completed research is submitted as either a Master's degree thesis or a manuscript for submission to an appropriate peer review journal, and must be defended before a faculty committee. Prereq:

Enrollment in Pediatric Dentistry/College of Dentistry M.S. degree program.

PDO 822 PEDIATRIC DENTISTRY I. (2)

In this course in dentistry for children, emphasis will be placed on principles of oral surgical procedures, advanced restorative techniques, diagnosis and treatment of traumatic injuries, preventive dentistry and diagnosis and treatment of oral habits and cosmetic dentistry. Lecture, 26 hours; laboratory, 6 hours. Prereq: Second year standing in the College of Dentistry.

PDO 831 CLINICAL PEDIATRIC DENTISTRY I. (2)

An introductory clinical course instructing student dentists in oral health care for children. Clinic 75 hours. Prereq: PDO 822: Coreq; PDO 834.

PDO 834 PEDIATRIC DENTISTRY II. (2)

This course is designed to introduce basic modern concepts in dentistry for children. Emphasis is placed on principles of child behavior management and basic restorative dentistry techniques. Lecture: 32 hours. Prereq: PDO 822.

PDO 841 CLINICAL PEDIATRIC DENTISTRY II. (4)

An advanced clinical course instructing student dentists in oral health care for children. Clinic 75 hours Prereq: PDO 822, PDO 834, and PDO 831.

PDO 850 PEDIATRIC DENTISTRY ELECTIVE. (Elective) (1-10)

Pediatric Dentistry provide opportunities for further study of or experience in various aspects of pediatric dentistry. Topics may include management of children with developmental/medical conditions in a hospital, dental treatment of handicapped children and of normal children and adolescents, and further discussion of treatment techniques. Hours variable, ranging from a minimum of 16 hours lecture/discussion to a maximum of 10 weeks clinical experience. May be repeated to a maximum of 10 credits. Prereq: Minimum year in dental school and any course prerequisites will be announced for each topic.

PER Periodontics

PER 626 ADVANCED CONCEPTS IN GENERAL DENTISTRY. (1)

This course presents, by seminar, lecture or continuing education courses, advanced concepts in general dentistry that are essential to the clinical practice of periodontics. It includes advanced instruction in orthodontics, periodontal prosthesis, prosthodontics and oral surgery. May be repeated to a maximum of four credits. Prereq: Admission to a postdoctoral program of the College of Dentistry or consent of course director.

PER 661 MODERN CONCEPTS IN PERIODONTICS. (2)

A seminar course designed to present the present understanding of the etiology of periodontal disease and current techniques for treatment of periodontal problems. Prereq: Admission to graduate program of College of Dentistry; D.D.S. or D.M.D. degree.

PER 770 TREATMENT PLANNING SEMINAR. (2)

In this seminar course, graduate students present and discuss diagnosis, prognosis, ideal treatment plans and alternative treatment plans for patients with periodontal disease. Each student gives at least eight case presentations. May be repeated to a maximum of eight credits.

Lecture, 40 hours. Prereq: Admission to the Periodontics postdoctoral program or consent of course director.

PER 772 PERIODONTAL BIOLOGY AND PATHOLOGY. (2)

Seminar discussions, review and evaluation of the literature covering periodontal anatomy, periodontal biology, the pathology of periodontal diseases and etiological factors in periodontal disease. The subject area will be covered in four semesters. May be repeated four times for a maximum of eight credits. Lecture, 40 hours. Prereq: Admission to the Periodontics postdoctoral program or consent of course director.

PER 774 PERIODONTICS SURGICAL SEMINAR. (1)

In this seminar course participants present, discuss and critique surgical procedures that have been accomplished in the clinic. Reading assignments from the literature augment the clinical discussions and students are encouraged to use the literature to justify their procedures. Cases are presented on a rotating basis. May be repeated to a maximum of four credits. Prereq: Admission to Periodontics postdoctoral program or consent of course director.

PER 776 PERIODONTAL THERAPY SEMINAR. (1)

This is an advanced series of seminars on the clinical aspects of periodontal therapy. During the course, the students will learn about various modalities of periodontal therapy as presented in the periodontal literature, e.g., mucogingival treatment, implants and curettage. May be repeated to a maximum of two credits. Prereq: Admission to the Periodontics postdoctoral program or consent of course director.

PER 790 RESEARCH IN PERIODONTICS. (1-3)

This course involves direct student participation in a research project. Projects and thesis are approved by the course director and may be clinical, laboratory experimental or related to dental education. Projects may include original or ongoing research within the Department of Periodontics or other departments of the Medical Center. May be repeated to a maximum of six credits. Prereq: Admission to the Periodontics postdoctoral program and consent of the department involved.

PER 810 PERIODONTICS I. (1)

This course is an introduction to periodontology. Emphasis is on recognition of healthy gingival characteristics and early disease progression. The student is also introduced to etiology, epidemiology and immunology related to periodontal assessments, and plaque control measures. Lecture, two hours; laboratory, nine hours; CANVAS, 8 hours total. Prereq: CDS 815 or consent of instructor.

PER 820 PERIODONTICS II. (3)

This course presents the components of the first stages of periodontal therapy. Emphasis is on diagnosis, prognosis, treatment planning and non-surgical treatment of the periodontally involved patient. Lecture, 36 hours; laboratory, 24 hours. Prereq: PER 810 or consent of instructor.

PER 821 CLINICAL PERIODONTICS II. (2)

This is a course designed to provide the student with clinical experience so that he can obtain a minimal competence in the applications of periodontal procedures. Therapeutic procedures

involving initial periodontal therapy will be performed by each student. Clinic, 50 hours. Prereq: PER 811 or consent of course director.

PER 830 PERIODONTICS III. (2)

This is a surgically oriented course which presents information necessary for the diagnosis, treatment planning and treatment of surgical cases. The information gained is applied to planning treatment for actual surgical cases. Lecture, 27 hours; laboratory, 3 hours. Prereq: PER 820 or consent of course director.

PER 831 CLINICAL PERIODONTICS III. (2)

This is a clinical course which offers the student the opportunity to treat patients with more advanced periodontal disease. Therapeutic procedures will be performed by each student as his patients' needs dictate. Clinic, 50 hours. Prereq: PER 821; Coreq: PER 830 or consent of instructor.

PER 841 CLINICAL PERIODONTICS IV. (4)

This clinical course is a continuation of PER 831. The student receives further instruction and experience in diagnosing, planning treatment and treating patients with periodontitis and mucogingival problems. Prereq: PER 830 and PER 831, or consent of instructor.

PRO Prosthodontics

PRO 820 PRECLINICAL COMPLETE DENTURE PROSTHODONTICS (Lecture). (2)

This preclinical lecture course provides an introduction to basic concepts of diagnosis and treatment planning, placement and maintenance of complete dentures, as well as the related biological and mechanical factors that must be incorporated for living tissue to be compatible with complete dentures. Prereq: Advancement to second year standing or consent of course director. Coreq: PRO 822

PRO 821 CLINICAL COMPLETE DENTURE PROSTHODONTICS. (1)

The treatment of a patient with complete maxillary and mandibular denture needs is performed in the clinic by the student. The student will assist an upper level student in the examination of a complete denture and a removable partial denture recall patient. Clinic, 52 hours. Prereq: PRO 820.

PRO 822 PRECLINICAL COMPLETE DENTURE PROSTHODONTICS (Lab). (2)

This preclinical laboratory course provides an introduction to basic concepts of fabrication of complete dentures as well as the related biological and mechanical factors that must be incorporated for living tissue to be compatible with complete dentures. Prereq: Advancement to second year standing or consent of course director. Coreq: PRO 820

PRO 824 REMOVABLE PARTIAL DENTURES. (2)

This course is designed to teach the student the basic principles and the practical procedures in providing a therapeutic and functional removable restoration. The course also presents the laws and effects of leverages as related to removable partial dentures as well as the considerations for support, occlusion, and health of all oral structures. Lecture, 19 hours; laboratory, 45 hours. Prereq: PRO 820.

PRO 830 ADVANCED REMOVABLE PROSTHODONTICS. (1)

This course is a continuation of PRO 820. It presents more advanced technique and treatment planning for complex prosthodontic needs. Subjects included are immediate dentures, overdentures and dental implants. Lecture, 21 hours. Prereq: PRO 820 and PRO 824.

PRO 831 CLINICAL REMOVABLE PROSTHODONTICS. (2)

A patient with complete denture needs is treated by the student clinically in the course. The student may opt to treat a patient with immediate, intermediate or overdenture needs. He may initiate and/or complete the treatment of two patients with removable partial denture needs. The student may also treat an optional, additional patient in need of a complete or removable partial denture. The student will recall a minimum of two removable prosthodontic patients and perform any treatment necessary for these patients. Clinic, 110 hours. Prereq: PRO 821; coreq: PRO 830.

PRO 834 PRECLINICAL RESTORATIVE DENTISTRY III. (4)

This is a preclinical course with emphasis on dental hard tissue surgery and restorative procedures for anterior and posterior fixed prosthodontics. Contemporary principles of fixed prosthodontics, including the long term maintenance of dental health, are presented in lectures and applied in practice using manikins. Knowledge gained in previous restorative dentistry courses are applied to more extensive restorations. Lecture, 24 hours; laboratory, 84 hours. Prereq: RSD 822, 823, 824, 825 and 826.

PRO 836 ADVANCED FIXED PROSTHODONTICS AND TREATMENT PLANNING. (2)

This course is a lecture series concerning diagnosis and treatment planning for fixed prosthodontics care and the principles of providing that care. The relationship of tooth restoration and replacements to occlusion, periodontics, orthodontics and removable prosthodontics in both treatment planning and treatment is emphasized. Lecture, 30 hours. Prereq: PRO 824, PRO 834, CDS 835; and/or consent of course director.

PRO 841 ADVANCED CLINICAL REMOVABLE PROSTHODONTICS. (2)

This course covers basically the same area as PRO 831 with the exception that the student is to treat the patient with complete denture needs with less supervision from the instructors. If not done previously, the student must initiate and complete the treatment of two patients with removable partial denture needs. The student will recall three removable prosthodontic patients and will perform any treatment necessary for these patients. Clinic, 114 hours. Prereq: PRO 831.

RSD Restorative Dentistry

RSD 810 FUNDAMENTALS OF OPERATIVE DENTISTRY I. (3)

This lecture course in operative dentistry is designed to provide a beginning student with basic knowledge about cavity preparation and restorative techniques for composite, amalgam, and other direct restorative materials. This course, together with a complementary laboratory course, RSD 814, is directed at preparing the student with knowledge and skills in the diagnosis and treatment of carious lesions necessary for patient care in operative dentistry. Coreq: RSD 814.

RSD 811 PRINCIPLES OF DENTAL ANATOMY, MORPHOLOGY & OCCLUSION. (3)

This introductory lecture course is designed to provide the dental student with necessary knowledge of dental anatomy, dental morphology and basic dental occlusion for all succeeding courses in preclinical and clinical dentistry. This includes a detailed description and study of individual teeth, relationship of dentoform and function, mandibular movement and introduction

to muscles of mastication. Lectures related to biomaterials are added as needed. Prereq: Admission to the college or consent of the course director. Coreq: RSD 812.

RSD 812 PRINCIPLES OF DENTAL ANATOMY, MORPHOLOGY & OCCLUSION LABORATORY. (3)
This introductory laboratory course is designed to provide the beginning dental student with skills manipulating wax to successfully replicate the dental anatomy of individual teeth as well as learning the relationships of form and function within the context of mandibular movement. These skills are learned by use of the dentoform as well as dental articulator. Laboratory experiences relating to dental biomaterials are introduced as needed. Prereq: Admission to the college or consent of the course director. Coreq: RSD 811.

RSD 813 DENTAL CARIOLOGY (1)

This course is designed to review the biological basis for the concepts and treatment procedures of dental caries as an infectious disease and will provide didactic foundational knowledge for the clinical management of dental caries.

RSD 814 PRECLINICAL OPERATIVE DENTISTRY I. (3)

This first-year preclinical laboratory course in operative dentistry is designed to provide a beginning student with basic skills for cavity preparation and restorative techniques for amalgam and resin composite. This course, together with the complementary lecture series course, RSD 810, is directed at preparing the student with the knowledge and skill necessary for patient care in operative dentistry. Laboratory 69 hours. Coreq: RSD 810 (Lecture component).

RSD 821 CLINICAL RESTORATIVE DENTISTRY I. (3)

This course emphasizes clinical application of the principles taught in preclinical courses. Concepts of diagnostic and therapeutic procedures as well as preventive measures are applied in the clinic with emphasis on the demonstration of competency in rendering primary care type treatment procedures. Prereq: RSD 814; coreq: RSD 824.

RSD 822 PRINCIPLES OF DENTAL OCCLUSION AND ARTICULATION. (3)

This course is directed toward the examination, diagnosis, treatment planning, and treatment of various occlusal problems. The student will learn the skills needed to analyze the dental occlusion of patients and to plan successful occlusal therapy including restorative procedures and fixed prosthodontic treatment. The course will concentrate on developing technical skills and learning assessment criteria related to mounted study casts, occlusal examination and analysis, selective occlusal adjustment, diagnostic pre-waxing and planning, and the fabrication of a muscle relaxation occlusal splint. Lecture, 23 hours; laboratory, 27 hours; clinic, 27 hours. Prereq: CDS 815, RSD 812, or with approval of the course director.

RSD 823 PRECLINICAL RESTORATIVE DENTISTRY II. (1)

This is a didactic course with emphasis on the basic knowledge required for tooth preparation and indirect single tooth dental restoration. The materials science and correct manipulation of dental stones, alloys and luting agents are emphasized. Prereq: RSD 810, RSD 812, RSD 814, or consent of instructor.

RSD 824 PRECLINICAL RESTORATIVE DENTISTRY II. (2)

This preclinical course places emphasis on dental hard tissue surgery and on their restoration to meet the biological needs of the patient. Tooth preparation and extracoronal restorations are

performed on manikins and extracted teeth. The materials science and correct manipulation of investments, alloys and cements used to make case restorations are emphasized. Knowledge gained in dental morphology and occlusion is applied in the course. Laboratory: 54 hours. Prereq: RSD 812, RSD 814, or consent of instructor.

RSD 825 PRECLINICAL RESTORATIVE DENTISTRY II. (1)

This course is a continuation of RSD 823 with emphasis on single tooth indirect intracoronar restorations and restorations of the endodontically treated tooth. Prereq: RSD 823.

RSD 826 PRECLINICAL DENTISTRY II LABORATORY. (2)

This is a preclinical course with emphasis on dental hard tissue surgery and restorative procedures for single tooth indirect restorations. Clinical simulation procedures are performed on manikins and extracted teeth. Prereq: RSD 823, RSD 824, or consent of course instructor. Coreq: RSD 825.

RSD 827 DENTAL BIOMATERIALS. (2)

In this course, the materials science, proper manipulation and biocompatibility of a wide variety of dental biomaterials are examined. The durability and biocompatibility of similarly utilized materials are compared. Diagnosis of the causes of clinical materials-related failures is emphasized. Lecture, 40 hours. Prereq: PRO 820 and RSD 824 or consent of course director.

RSD 831 CLINICAL RESTORATIVE DENTISTRY II. (4)

A continuation of RSD 821 as well as some clinical application of principles taught in RSD 824. The emphasis continues to be on the delivery of primary care type treatment with increasing competency and proficiency. Some emphasis is directed toward elementary experiences in rehabilitative type treatment procedures and occlusal dysfunctions. Clinic, 120 hours. Prereq: RSD 821 and RSD 824; coreq: PRO 836 and PRO 834.

RSD 835 ADVANCED ESTHETICS IN RESTORATIVE DENTISTRY. (2)

This course is designed to introduce current concepts in esthetic restorative dentistry to undergraduate dental students in their third year. The techniques presented will build upon previously developed restorative didactic and clinical knowledge, but incorporate additional dental techniques and materials developed specifically for esthetic dentistry. Current dental materials being used by this discipline will be discussed as they apply to specific topics. Lecture 16 hours; laboratory, 27 hours. Prereq: RSD 810, 812, 814, 821, 822, 823/825, 824, 826, and 827.

RSD 840 RESTORATIVE DENTISTRY UPDATE. (1)

Students are provided current information on advanced restorative dentistry clinical procedures and materials. Emphasis will be given to diagnosis, treatment planning and treatment of the complex restorative dentistry patient. The format of the course will be "clinical case presentation." Lecture, 20 hours. Prereq: PRO 836 and PRO 834.

RSD 841 CLINICAL RESTORATIVE DENTISTRY III. (3)

As the final phase in the undergraduate clinical continuum, this course continues to emphasize primary care concepts and proficiency. In addition, more complicated rehabilitative type care and occlusal dysfunction problems are encountered by the student under faculty supervision. Clinic, 145 hours. Prereq: PRO 836, RSD 831 and PRO 834.

RSD 883 INTRODUCTION TO SPORTS DENTISTRY. (Elective) (1)

Introduction to Sports Dentistry is an elective course designed to educate about the opportunities available to become involved with sports teams in your community. The course topics will include: Types of dental injuries related to athletics, prevention of injuries, role of team dentist, types of sports guards and methods of fabrication of sports guards. Lecture: 10 hours; laboratory 6 hours, per course. Prereq: 4th year dental student in good standing; consent of course director. Note: Scheduling of this course will be outside the regularly scheduled clinic/class time.

Appendix J

University of Kentucky College of Dentistry Policy and Procedures Consent to Treatment

University of Kentucky College of Dentistry Policy and Procedure	Policy # CD06-025
Title/Description: Consent to Treatment	
Purpose: To provide guidelines for obtaining informed consent for health care services.	

[Policy](#)

[Procedure](#)

[Effective Date](#)

[Review/Revision Dates](#)

Policy

The goal of the informed consent process is to establish a mutual understanding between the patient and the licensed independent practitioner (i.e., dentist, medical doctor, nurse practitioner, dental hygienist, etc.) or the dental student who provides the care, treatment, and services about the care, treatment, and services that the patient receives. This process allows each patient to participate fully in decisions about his/her care, treatment, and services.

Before providing any dental or surgical procedures, the University of Kentucky College of Dentistry requires that the patient or, in certain circumstances, the patient's surrogate or responsible party, consents on an informed basis to such services, treatments or procedures.

Procedure

The College of Dentistry has adopted the UK HealthCare policy "[A06-000, Consent to Treatment](#)" as its Consent to Treatment policy.

In addition to the licensed health care providers and dental students listed in the UK HealthCare policy who may obtain consent, the College of Dentistry also permits licensed dental hygienists to obtain consent for procedures which fall within the scope of their practice. The hygienists must have current licenses to practice in the Commonwealth of Kentucky and meet all other requirements set by the [Kentucky Board of Dentistry](#) for licensed dental hygienists.

Effective Date: 7/2002

Review/Revision Dates: 9/2010; 11/2010;
4/2012

Approval by and date:

Signature: *Signature on File* Date: 4/52012

Name Sharon P. Turner, DDS, JD, Dean

Appendix K

University of Kentucky / UK HealthCare Policy and Procedures Consent to Treatment



University of Kentucky / UK HealthCare Policy and Procedure	Policy # A06-000
Title/Description: Consent to Treatment	
Purpose: To outline the procedure for obtaining informed consent for health care services.	

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[Appendix 1: Links to Consent Forms](#)

Policy

Before providing any health care services, dental services, medical treatments, or surgical procedures, UK HealthCare requires that the patient or, in certain circumstances, the patient's surrogate or responsible party¹ consents on an informed basis to such services, treatments or procedures. The patient shall sign a consent form before the authorized services, treatments or procedures are provided. In emergency situations all appropriate medical care is provided regardless of whether written or oral consent has been obtained.

UK HealthCare uses two types of consent forms to document consent to treatment: a general consent form and a special or operative consent form. Each form is designed to be used in conjunction with one another; not as substitutes for one another. Patients who participate in human subject research through the University of Kentucky are required to consent to such participation through a separate consent form approved by the [University of Kentucky Institutional Review Board](#). The following forms have been approved for use in accordance with this policy. Copies of such forms, including Spanish versions, may be found at [Medical Record Forms](#).

1. AM-0004, Authorizations and Agreements
2. CN-0002, Consent for Procedure and Transfusion
3. CN-0003, Consent for Transfusion
4. CN-0010, Consent for Treatment of Cancer with Chemotherapy
5. CN-0014, Consent for Care in Adult Intensive Care Unit
6. CN-0044, Consent for Care in Neonatal Intensive Care Unit
7. CN-0045, Consent for Care in Pediatric Intensive Care Unit
8. AM-0009, Authorization for Special Procedures: Cardiac Stress Testing

Dental consent forms, Authorizations and Agreements for Dental Services, and Consent to Dental Procedures are governed by this policy. Other forms may be developed for use with respect to specific procedures. Such forms shall be approved for use by the Office of Legal Counsel, the UK HealthCare Risk Management Office, the UK HealthCare Compliance Office and the UK HealthCare Forms Committee before use.

Physicians, dentists, oral surgeons, and employees responsible for obtaining consents shall review the consent form with the patient, provide sufficient information to the patient about the health care services, treatments and/or procedures he or she receives, and answer any questions or concerns raised by the patient so that he or she may make a decision about those services, treatments, and/or procedures on an informed basis. The patient shall be aware and understand that he or she is consenting to the provision of health care services, treatments, and/or procedures.

Consent is obtained as required by applicable federal and state laws, rules, and regulations.

Definitions

Decisional Capacity

Decisional capacity means the ability to make and communicate a health care decision.

¹ References to the patient in this policy shall mean the patient, the patient's surrogate or the responsible party, depending on the circumstances.

Health Care Decision

Health care decision means consenting to, or withdrawing consent for, any medical procedure, treatment, or intervention.

Responsible party

Responsible party means an adult who has authority under [KRS 311.631](#) to make a health care decision for a patient who has not executed a living will directive.

Surrogate

Surrogate means an adult who has been designated to make health care decisions in accordance with the Kentucky Living Will Directive Act ([KRS 311.621 to 311.643](#)).

Procedure

Right to Refuse Treatment

An adult patient who has decisional capacity has the right to refuse any medical and/or surgical treatments or procedures, whether that refusal is based on fear, religious belief, lack of confidence in the proposed procedure, or any other stated or unstated reason.

If a patient refuses treatment, UK HealthCare physicians and staff shall provide the patient with the best care possible under the circumstances.

Elective procedures may not be performed if the patient refuses to consent to such procedure.

The patient's refusal of treatment shall be recorded in the medical record and, when possible, a release shall be signed by the patient.

General Consent, Authorizations, and Agreements

For general medical or dental services, a *General Consent, Authorizations and Agreements, Form AM-0004* is obtained by UK HealthCare staff, typically through the patient registration process. The general consent documents consent for all procedures that do not require a special or operative consent. This includes, but is not limited to routine hospital care, clinic visits, routine dental visits, laboratory procedures, testing for HIV (see [KRS 214.181](#) and [KRS 214.625](#)), hepatitis and other blood borne diseases, appropriate immunizations, treatment with controlled substances, administration of fluids and drugs, most diagnostic radiology procedures, and most ambulatory treatments.

A separate general consent form is obtained for each inpatient admission, observation stay, and each Emergency Department visit; however, only one (1) consent form is needed for an admission or observation stay made in connection with an Emergency Department visit. A general consent form is obtained at least annually for clinic visits.

The Authorizations and Agreements for Dental Services form is used for dental services provided to patients of UK HealthCare dental clinics. A separate consent form is obtained for each dental visit; only one (1) consent form is needed for treatment that may require a series of visits.

Each ancillary or diagnostic area shall confirm that a general consent has been obtained before rendering service.

Only emergency patient care procedures are performed before obtaining general consent.

Under Kentucky law, “In an emergency situation where consent of the patient cannot reasonably be obtained before providing health care services, there is no requirement that a health care provider obtain a previous consent.” See [KRS 304.40-320](#). In this case, the consent of the patient is implied.

Under the Emergency Medical Treatment and Labor Act, 42 CFR 489.24, a pregnant woman who is having contractions is generally considered to have an emergency medical condition.

1. If providing care with implied consent, the physician shall, whenever possible, obtain a consultation from another physician, and the physician shall document the medical necessity of proceeding with the treatment without express consent and that consent of the patient could not reasonably be obtained.
2. If consent cannot be obtained for further procedures within 48 hours following admission, the attending physician shall notify the Chief Medical Officer and Social Services.
3. Social Services is responsible for assisting in obtaining consent and if necessary, pursues the appointment of a guardian for the patient.

Obtaining General Consent through Admitting

When a patient is admitted to the Hospital or registered for an outpatient procedure through Admitting, the patient registration counselor shall obtain consent from the patient. The registration counselor shall witness the signature and file the signed consent form with the patient’s medical record.

Obtaining General Consent through the Emergency Department

When a patient is either treated in the Emergency Department or admitted to a UK HealthCare Hospital through the Emergency Department, the ED Patient Relations Assistant shall obtain consent from the patient.

1. The patient relations assistant shall witness the signature and place the signed consent form in the patient’s medical record folder.
2. If the patient is admitted, the medical record folder containing the consent form is taken to the patient care unit.

General Consent for a Scheduled Admission from UK Ambulatory Services

When a patient is scheduled for admission through any UK Ambulatory Services area, the Ambulatory Services staff shall obtain consent from the patient.

1. The Ambulatory Services staff shall witness the signature and forward it together with all other admissions documentation to Admitting.
2. The Ambulatory Services staff shall instruct the patient to present to the Admitting Office for admission.

The general consent to treatment remains valid for 30 days after the consent form is signed for admissions scheduled within such time. If the consent is obtained more than 30 days in advance

of the admission, the patient shall sign a general consent in the Admitting Office when the patient presents for admission.

Obtaining General Consent for Clinic Visits

When a patient registers for an ambulatory clinic visit, including a visit to the dental clinic, the Ambulatory Services staff or dental clinic staff shall obtain consent from the patient. Such staff shall witness the signature and file the signed consent form in the patient's medical or dental record. General consent forms shall be obtained at least annually.

General Consent on an Inpatient Unit

If,

1. A patient's condition is emergent,
2. The patient is admitted directly to an inpatient unit from an external facility, or
3. General consent has not been obtained before admission for any other reason,

The registered nurse on the inpatient unit or the registration clerk shall, if possible, obtain consent within 24 hours after the patient arrives on the inpatient unit. Social Services may be contacted for assistance.

When a patient's admission forms arrives on the patient care unit, the Patient Clerical Assistant shall check the patient's file for a signed general consent form.

1. If a general consent form has not been signed, the patient clerical assistant shall flag the chart and notify the registered nurse or the registration clerk.
2. When the registered nurse or registration clerk secures general consent, he or she shall deliver the signed general consent form to the patient clerical assistant.
3. The patient clerical assistant shall file the signed consent form in the medical record.

Special Consent or Operative Permit

A special consent, sometimes called an operative permit, is specific in nature and is obtained in addition to the general consent before a procedure that involves substantial risk is performed upon the patient. Any doubts about the necessity of obtaining a special consent from the patient are resolved in favor of procuring the consent. A special consent is required for the following:

1. All major and minor surgery that involves entry into the body through an incision or one of the natural body openings;
2. Any procedure in which anesthesia or sedation² is used;
3. Any non-operative procedure that involves risk of substantial harm or change in the patient's body structure;
4. Any procedure that uses radioisotopes or electromagnetic radiation in treatment;

² For purposes of this policy, "sedation" refers to sedation administered under Policy A08-115, Sedation for Procedures. It does not include the occasional use of anxiolytics that are not meant to produce a significant change in the patient's level of consciousness.

5. Electroshock therapy;
6. Any procedure that, in the judgment of the physician, dentist or oral surgeon, requires special consent;
7. Any transfusion of blood or blood products;
8. Any procedure that involves an investigational drug or device;
9. Any procedure that involves donation of tissue for research;
10. Insertion of a peripherally inserted central catheter (PICC); and.
11. Performance of a Cardiac Stress Test.

Except as otherwise permitted in this paragraph, a physician, dentist, advance practice registered nurse (APRN), or oral surgeon who is knowledgeable, based on education, training or experience, concerning the procedure and the risk of the procedure, operation, or transfusion for the patient shall secure the special consent. An independent licensed practitioner³ who is knowledgeable, based on education, training or experience, concerning the procedure and the risk of the procedure to the patient and who is scheduled to be involved in performing the procedure may secure the special consent provided the procedure falls within the scope of practice of the practitioner.

1. A nurse who meets the requirements set forth in A03-080, Staff Requirements for Placing Peripherally Inserted Central (PICC) and Midline Vascular Access Devices may secure the Special Consent for insertion of a PICC by such nurse.
2. Qualified and competent non-physician staff who meet the requirements set forth in A09-140, Training and Competency Standards for Non-Physician Staff who Supervise Stress Tests may secure Special Consent for cardiac stress testing.
3. A registered nurse who administers a blood transfusion may secure the consent for the transfusion.
4. If the procedure requires a special consent only because anesthesia or sedation is used, the anesthesiologist or other independent licensed practitioner who provides anesthesia or sedation shall obtain Special Consent.

Before requesting consent, the physician, dentist, oral surgeon, APRN, nurse, independent licensed practitioner, or anesthesiologist shall explain all treatments and procedures to the patient and shall document this in the medical record which may be made by filing the completed consent form in the medical record. This explanation includes the following information:

1. The name or names of the practitioner(s) who shall (or who may) perform the procedure or administer the medical treatment;
2. The nature of the proposed care, treatment, services, medications, interventions, or procedures;

³ For purposes of this policy, “independent licensed practitioner” refers to Health Professional Staff who are licensed, credentialed, and privileged under the UK HealthCare Medical Staff Bylaws.

3. Potential benefits, risks, or side effects, including potential problems that may occur during recuperation;
4. The likelihood of achieving benefit or treatment goals;
5. Reasonable alternatives;
6. The relevant risks, benefits, and side effects related to alternatives, including the possible results of not receiving care, treatment, and services; and
7. When indicated, any limitations on the confidentiality of information learned from or about the patient.

Interpretative aids are available to aid the patient in understanding the information he or she is given. These include, but are not limited to translation services, audiovisual aids, and interpreters skilled in sign language.

The procedure is explained and the special consent form signed in the presence of a witness. The witness' signature is not required; however, it is recommended that the signing of a special consent form be witnessed by a family member of the patient. If a family member cannot witness the consent form, it is recommended that the signing be witnessed by a UK HealthCare staff member other than the physician, dentist, APRN, oral surgeon, nurse, independent licensed practitioner, or anesthesiologist who secured the consent. The individual who obtains the consent shall record the exact time and date when the consent was signed.

Note: The use of abbreviations for left and right is not permitted on operative permits.

Timing

Except in the case of an emergency, the special consent is obtained and filed in the patient's medical record before the procedure.

Under applicable Kentucky law, the special consent for a non-therapeutic sterilization and for a therapeutic abortion shall be secured at least 24 hours prior to the procedure. See policies [A06-065, Sterilization](#) and [A06-150, Abortions](#).

Special Consent secured from a patient before admission remains valid for 30 days after the form is signed for a surgical procedure scheduled and performed within such time. Special Consent secured from a patient at any time during an admission remains valid for up to 30 days or until the date of discharge if earlier than 30 days. However, if the patient's condition has changed since the consent was obtained so as to alter the procedure or risks, the physician shall explain the changes to the patient and secure a new Special Consent.

Consent for Dental Procedures is obtained by the dentist or oral surgeon who is involved in the dental procedure. A dental student who is acting within the scope of his or her assigned clinical duties and who performs the dental procedure may secure the consent for the dental procedure. This form is used for dental procedures performed in an ambulatory setting.

The special consent form authorizes only the procedure(s) discussed with the patient and outlined on the form when the consent was signed. If additional procedures become necessary, a second consent form must be signed.

If a series of procedures is prescribed when the special consent is given, that series should be described on the form and explained to the patient.

Consent to Participate in a Research Study

A special consent specific in nature is obtained in addition to the general consent when a patient is asked to participate in a research project, including donating tissue for research. The consent provides adequate information to the potential research participant so as to decide whether to participate or refuse to participate, including a description of any benefits to be expected, potential discomforts and risks, alternative services, a full explanation of procedures to be followed, duration of participation, and an assurance that refusing to participate or discontinuing participation at any time does not compromise access to services unrelated to research.

This consent indicates the name of the person who supplied the prospective participant with information, as well as the date the form was signed, and addresses the participant's right to privacy, confidentiality, and safety. The consent states the extent to which the participant's personally identifiable private information is held in confidence. An explanation of whom to contact if questions arise about the research or the patient's rights or if a research related injury occurs is also included. The form shall be approved by the University of Kentucky Institutional Review Board. In addition to copies of the signed consent for the primary investigator and participant, a signed copy is filed in the section of the patient's medical record with other special consent forms.

Consent for Treatment of Cancer with Chemotherapy

A separate consent form, *CN-0010*, is completed before all first cycles of a cytotoxic chemotherapy regimen for all adult patients receiving treatment for cancer.

The *Consent for Treatment of Cancer with Chemotherapy, CN-0010* form is not required for the following:

1. Patients receiving conditioning chemotherapy for a stem cell or bone marrow transplant who have signed a special consent for transplantation that describes the chemotherapy and stem cell or bone marrow transplant procedure;
2. Patients receiving chemotherapy agents for the treatment of non-malignant conditions such as methotrexate for rheumatoid arthritis;
3. Patients receiving hormonal therapies such as tamoxifen, anastrozole, flutamide, leuprolide, etc.;
4. Patients receiving naked monoclonal antibodies such as rituximab, alemtuzumab, etc.; and
5. Patients receiving biologic agents such as interferon, etc.

Other Specific Special Consent Forms

Certain treatments and therapies such as implantation of a ventricular assist device or transplantation may require a special consent form designed to provide education and information about such treatment or therapy. Other therapy specific consent forms are used in conjunction with the special consent on form *CN-0002*.

1. Form CN-0014, Consent for Care in Adult Intensive Care Unit, Form CN-0044, Consent for Care in Neonatal Intensive Care Unit, and Form CN-0045, Consent for Care in Pediatric Intensive Care Unit are used for the various procedures described these consent forms that may be performed during patient's stay in the hospital intensive care unit.

These forms include blood transfusions provided in the intensive care unit; a separate consent for transfusion is not required. The forms are designed to provide education and information about the range of procedures. When a patient is admitted to an intensive care unit, the physician involved in the care of the patient shall obtain the intensive care unit consent from the patient, the patient's responsible party or surrogate, as may be appropriate.

2. *Form CN-0002*, Consent for Procedures and Transfusion is obtained by a physician who will be involved in the surgical procedure, the invasive procedure and/or blood transfusion. This form is also used for inpatient oral surgery and has been adapted for long term treatment with intravenous antibiotics.

The consent includes a contract with behavioral expectations for the patient. The expectations include, among other things, that the patient shall not smoke in his or her room, shall not use his or her IV line for any drugs or medications other than those provided by the physician, shall submit to random drug screens and room searches and shall have limited visitors. A patient who does not abide by these expectations may be considered to have revoked consent for the treatment. The attending physician shall obtain consent as early in the treatment process as possible. A copy of the consent and contract should be posted in the patient's room. Any violation of the behavioral expectations shall be reported to the attending physician. If the patient continues to violate the behavioral expectations after counseling by the attending physician, the Chief Medical Officer and Legal Counsel shall be notified before any decision is made to discontinue treatment or discharge the patient.

3. Form CN-0003, Consent for Transfusion, may be used instead of form CN-0002 when no procedure or treatment that would require a special consent other than transfusion is involved.

When obtaining consent for transfusion, only one transfusion consent form is required for a patient receiving multiple units of blood or blood product transfusions throughout the hospitalization or series of outpatient or clinic treatments for the same condition. A new transfusion consent is required each time the reason for blood transfusion changes. A registered nurse who administers the transfusion may secure the consent for the transfusion on Form CN-0003, provided that the physician ordering the transfusion shall have identified the potential benefits of the transfusion.

4. Form AM-0009, Authorization for Special Procedures: Cardiac Stress Testing is required before administering a Cardiac Stress Test.

A competent non-physician staff as described in A09-140 (Training and Competency Standards for Non-Physician Staff who Supervise Cardiac Stress Tests) who administers the test may secure consent for the test on Form AM-0009 provided that the physician ordering the test shall have identified the potential benefits and risks of the test.

Responsible Party; Surrogate(s)

Health care decisions, including giving either general consent or special consent, may only be made by the patient, unless the patient lacks decisional capacity or the patient is an unemancipated minor (under age 18).

Determining Capacity

The attending physician is responsible for determining whether the patient has decisional capacity for any proposed medical treatment using the following criteria:

- a. "Patient with Decisional Capacity" means a person who
 - i. is able to understand the information that is relevant to making a decision about the treatment or admission,
 - ii. is able to appreciate reasonably foreseeable consequences of a decision or lack of a decision, and
 - iii. is able to communicate a decision.

A person is presumed to have decisional capacity with respect to treatment or admission, unless there are reasonable grounds to believe that the person lacks decisional capacity with respect to the treatment or admission.

- b. "Patient without Decisional Capacity" is a person who
 - i. is unable to understand the information that is relevant to making a decision about the treatment or admission, or
 - ii. is unable to appreciate the reasonably foreseeable consequences of a decision or lack of decision, or
 - iii. is unable to communicate a decision.

A person may be incapable with respect to some treatments and capable with respect to others. A person may be incapable with respect to a treatment at one time and capable at another. A person who has been declared legally incompetent by a court of law is generally considered to lack decisional capacity but may be able to participate to some extent in his or her health care decisions.

The attending physician shall document in the medical record any determination that a patient lacks decisional capacity, including the basis for such determination.

Note: A patient who is able to communicate consent orally but not in writing does not lack decisional capacity based solely on his or her inability to write. If the patient is able to give oral consent only, the oral consent suffices if it is witnessed and documented on the consent form. The witness to the oral consent shall sign and date the consent form.

Determining the Appropriate Surrogate or Responsible Party

If a patient is determined not to have decisional capacity, then healthcare decisions on behalf of the patient are made by the surrogate designated by the patient. A copy of the advance directive designating the health care surrogate shall be filed in the medical record before any elective operative procedure is performed based on the consent of the surrogate.

In the absence of a patient designated surrogate, healthcare decisions on behalf of the patient are to be made in accordance with KRS 311.631, by any one of the following responsible parties, in the following order of priority if no individual in a previous class is reasonably available, willing, and competent to act:

- (a) The judicially-appointed guardian of the patient, if the guardian has been appointed and if medical decisions are within the scope of the guardianship;
- (b) The attorney-in-fact named in a durable power of attorney, if the durable power of attorney specifically includes authority for health care decisions;
- (c) The spouse of the patient;
- (d) An adult child of the patient, or if the patient has more than one (1) child, the majority of the adult children who are reasonably available for consultation;
- (e) The parents of the patient;
- (f) The nearest living relative of the patient, or if more than one (1) relative of the same relation is reasonably available for consultation, a majority of the nearest living relatives.

In circumstances where a health care decision is made by a surrogate or a responsible party, the decision shall be noted in writing in the patient's medical record.

Note: An individual authorized to consent for another either as a surrogate or a responsible party shall act in good faith, in accordance with any advance directive executed by the individual who lacks decisional capacity, and in the best interest of the individual who does not have decisional capacity.

If a married patient has decisional capacity, the consent of the patient's spouse is not necessary to authorize treatment.

Telephonic Consent

If the surrogate or responsible party authorized to consent for the patient is not present and the proposed treatment requires a supporting consent, oral consent via telephone may be obtained. Consent shall be obtained directly from the person authorized to consent. The person obtaining the consent shall verify the identity of the surrogate or responsible party. The telephone conversation shall be monitored and, whenever possible recorded. The consenting person shall be told that the conversation is being monitored and, if applicable, taped. Pertinent facts from the telephone conversation shall be entered on the consent form and the form shall be signed by the person who obtained the consent and the witness who monitored the call. The signed and witnessed form is placed in his or her medical record.

Treatment of Prisoners

A patient who is in custody of law enforcement shall give consent for medical examination, treatment, or operation before such procedures can be performed except for blood alcohol or drug screening. Issues arising from any disagreement between the patient in custody and the law enforcement official shall be referred to the Office of Legal Counsel or UK HealthCare Risk Management for assistance in resolution.

Treatment of Minors

In most cases, UK HealthCare requires the consent of the parent or guardian before treating a minor. If the patient is a minor and lives with his or her parents or legal guardian, the parent or guardian shall provide consent. If the patient is a minor and a ward of the state, then the legal guardian shall consent to treatment and a representative from the Cabinet for Children and Families shall guarantee payment. Please consult Social Services for detailed information.

Under [KRS 214.185](#), a minor patient may consent to treatment without the consent of his or her parent or guardian if the patient is capable of understanding the consequences of the treatment and if:

1. The minor is being examined and treated regarding venereal disease, alcohol and other drug abuse or addiction, contraception, pregnancy, or childbirth. These excepted categories of treatment do not include inducing of an abortion or performance of a sterilization operation.
2. The minor is age 16 or older and is being provided with outpatient mental health counseling.
3. The minor is emancipated or has contracted a lawful marriage or borne a child. In these circumstances, a minor may give consent to the furnishing of hospital, medical, dental, or surgical care to his or her child or himself or herself. A subsequent judgment of annulment of marriage or judgment of divorce does not deprive the minor of his adult status once obtained. The provider of care may look only to the minor or spouse for payment for services unless other persons specifically agree to assume the cost.
4. The risk to the minor's life or health is of such a nature that treatment, including medical, dental or other health services, shall be given without delay and the requirement of consent would result in delay or denial of treatment.

Under [KRS 620.050](#)(14), as part of the medical evaluation or investigation of a report of suspected child abuse or neglect, photographs and X-rays or other appropriate medical diagnostic procedures may be taken or caused to be taken without the consent of the parent or other person exercising custodial control or supervision of the child. Consistent with the statement of the Committee on Bioethics of the American Academy of Pediatrics on *Informed Consent, Parental Permission, and Assent in Pediatric Practice* (Pediatrics Vol. 95 No. 2 February 1995), decision making involving the health care of children and adolescents shall include, to the greatest extent feasible, the assent of the patient as well as the consent of the parent or guardian. Serious consideration shall be given to each patient's developing capacity for participating in decision-making, including rationality and autonomy. Assent shall include the following elements:

- (a) Helping the patient achieve a developmentally appropriate awareness of the nature of his or her condition.
- (b) Telling the patient what he or she can expect with tests and treatments.
- (c) Making a clinical assessment of the patient's understanding of the situation and the factors influencing how he or she is responding (including whether there is inappropriate pressure to accept testing or therapy).

- (d) Soliciting an expression of the patient's willingness to accept the proposed care. One shall not solicit a patient's views without intending to weigh them seriously. In situations where the patient receives medical care despite his or her objection, the patient shall be told that fact and shall not be deceived.

A minor patient's refusal to assent is binding with respect to participation in research, especially research that has no potential to benefit the patient directly. A minor patient's refusal to assent shall also carry considerable weight when the proposed intervention is not essential to his or her welfare and/or can be deferred without substantial risk.

When the parents of a minor refuse to consent to a medical or surgical procedure prescribed for the child, the attending physician and the hospital shall then determine whether to treat the child over the parents' objections, to do nothing, or to take legal action to obtain consent. The preferable course of action, where time permits, is to use statutory remedies. No elective procedures are undertaken without a court order where the parents refuse to consent. However, in emergency cases, the responsible physician may proceed after consultation with the Chief Medical Officer or designee, or with Hospital Administration.

Persons and Sites Affected	
X Enterprise Chandler Good Samaritan Kentucky Children's Ambulatory Department	
Policies Replaced	
X Chandler HP06-09 X Good Samaritan APP086, Col024, Col036 Kentucky Children's CH X Ambulatory HP06-09 Other	
Effective Date: 7/22/2015	Review/Revision Dates: 9/30/2010; 7/22/2015
Approval by and date:	
Signature_____	Date_____
Name Bernard Boulanger, MD, Chief Medical Officer, Review Team Leader	
Signature_____	Date_____
Name Louis I. Bezold, Medical Director, Kentucky Children's Hospital	
Signature_____	Date_____
Name Colleen Swartz, Chief Nurse Executive	
Signature_____	Date_____
Name Marcus Randall, MD, Chief, Ambulatory Services	
Signature_____	Date_____
Name Anna L. Smith, Chief Administrative Officer	

Appendix 1: Links to Consent Forms

1. [AM-0004, Authorizations and Agreements](#)
2. [CN-0002, Consent for Procedure and Transfusion](#)
3. [CN-0003, Consent for Transfusion](#)
4. [CN-0010, Consent for Treatment of Cancer with Chemotherapy](#)
5. [CN-0014, Consent for Care in Adult Intensive Care Unit](#)
6. [CN-0044, Consent for Care in Neonatal Intensive Care Unit](#)
7. [CN-0045, Consent for Care in Pediatric Intensive Care Unit](#)
8. [AM-0009, Consent for Cardiac Stress Testing by Non-Physician Staff](#)

Appendix L

University of Kentucky / UK HealthCare Policy and Procedure Universal Protocol



University of Kentucky / UK HealthCare Policy and Procedure	Policy A08-015
Title/Description: Universal Protocol	
Purpose: The purpose of the Universal Protocol is to prevent wrong-person, wrong-procedure, and wrong-site operative and invasive procedures.	

[Policy](#)

[Procedure](#)

[Pre-Procedure Verification](#)

[Pre-Procedure Verification Occurrence](#)

[Pre-Procedure Checklist](#)

[Marking the Procedure Site](#)

[Procedures that Require Site Marking](#)

[Exemptions from Site Marking](#)

[Patients Who Refuse Site Marking](#)

[Performing Time Out](#)

[Resources](#)

[Persons and Sites](#)

[Affected Policies](#)

[Replaced](#)

[Effective Date](#)

[Review/Revision Dates](#)

Policy

UK HealthCare provides care consistent with The Joint Commission (TJC) consensus-based Universal Protocol. The protocol consists of three components:

- Pre-procedure verification;
- Marking the procedure site; and
- Conducting time out immediately prior to starting a procedure.

This policy applies to all operative and invasive procedures that expose patients to more than minimal risk. Procedures that involve puncture or incision of the skin; insertion and removal

of an instrument or foreign material into the body through a natural orifice or other insertion site are included within the scope of this policy. Procedures that require sedation or anesthesia for pain management during the procedure are included within the scope of this policy, although the policy is not limited to procedures involving sedation or anesthesia. This policy applies to procedures performed in any location, including operating room suites, procedure areas, at the bedside, and in clinic areas.

Certain routine minor procedures such as venipuncture, peripheral intravenous line placement, insertion of a naso-gastric tube or urinary bladder catheter are not within the scope of this protocol. Patient identification in accordance with [A08-160, Patient Identification](#) is required prior to performing any of these procedures.

The attending physician bears ultimate responsibility for confirming that the patient receives treatment consistent with patient consent. All care providers assisting with the procedure are responsible for assuring that the Universal Protocol is applied.

If Universal Protocol discrepancies are identified, the procedure is delayed until the attending physician resolves the discrepancies. If discrepancies cannot be resolved to the satisfaction of care providers assisting with the procedure, the procedure is cancelled.

All patients shall have an armband in place before a procedure is performed except in life-threatening emergencies where patient identification has not been determined and a surrogate identity has not been assigned.

The words left and right may not be abbreviated on procedure-related documents including schedules, consent forms, checklists, operative records and peri-operative progress notes, and other procedure-related documentation.

Procedure

Pre-Procedure Verification

Pre-procedure verification is an ongoing process of information gathering and verification. It begins with the decision to perform a procedure and continues through all settings and interventions involved in pre-procedure preparation of the patient, up to and including time out immediately before incision or invasion. Missing information or discrepancies shall be addressed before the procedure begins.

Pre-procedure verification includes verification of the correct person (name, birth date, and medical record number as necessary to confirm patient identity), correct site, and correct procedure.

The purpose of pre-procedure verification is to verify that all relevant documents and related information and equipment are:

- Available prior to the start of the procedure;
- Correctly identified, labeled, and matched to patient identifiers; and
- Reviewed and determined to be consistent with patient expectations and with the team's understanding of the intended procedure and site.

Pre-Procedure Verification Occurrence

Pre-procedure verification of the correct patient (name, birth date and medical record number), procedure, and site shall occur at each of the following times:

- At the time the procedure is scheduled;
- At the time of arrival for pre-procedure testing and assessment;
- At the time of presentation for admission or entry into the facility for a procedure, whether elective or emergent;
- Before the patient leaves the pre-procedure area or enters the procedure room; and
- At any time when the responsibility for care of the patient is transferred to another member of the procedure team (including anesthesia providers), including at the beginning of and during the procedure.

Pre-procedure verification shall occur with the patient involved, awake, and aware, if possible.

Pre-Procedure Checklist

A pre-procedure checklist shall be used to review and verify that necessary items are available and accurately matched to the patient. The checklist is completed in the pre-procedure area, immediately before moving the patient to the procedure location. The checklist is maintained as a component of the medical record. The checklist includes verification that the following relevant documents are at least present and consistent:

- A history and physical examination, which shall have been performed within 30 days of the procedure, and updated on the day of surgery if it is performed prior to the day of the procedure;
- An accurate, complete, and signed procedure consent form that does not include abbreviations of the words right and left
- Diagnostic and radiology test results that are properly labeled with the patient's name, birth date, medical record number, and laterality as appropriate; and
- Any required blood products, implants, devices, and/or special equipment for the procedure.

Marking the Procedure Site

Marking the procedure site allows clinical care providers to identify, without ambiguity, the intended site for the procedure.

Marking the site is required for procedures involving right or left distinction, multiple structures (such as fingers and toes), or levels (as in spinal procedures).

Marking the site is required for procedures when the patient has both anterior and posterior procedures. Site marking should be done on both surfaces prior to beginning the procedure. If there is an unplanned procedure that necessitates changing the patient's position from anterior to posterior, or vice versa, site marking is required when the patient is turned to avoid optical bias that contributes to wrong-side errors.

The procedure site is marked by the attending surgeon or by the resident house staff

physician who will perform the initial incision or invasion and continue to perform the procedure under the direction of the attending physician.

Exception: Nurses permitted by [A03-080, Staff Requirements for placing Peripherally Inserted Central and Midline Vascular Access Devices](#) to insert percutaneous intravenous infusion catheters (PICC) may mark PICC sites.

The procedure site is initially marked before the patient is moved to the location where the procedure will be performed. It takes place with the patient involved, awake, and aware, if possible.

The site marking shall have the following characteristics:

- The mark must be at or near the incision or invasion site.
- No markings are to be placed on non-operative sites or extremities (see exceptions under “alternate methods”).
- The mark shall be the word, “yes.” It may also include a line representing the proposed incision.
- The mark is made with a marker sufficiently permanent to remain visible after completion of skin surface preparation and sterile draping.
- Adhesive site markers are not acceptable as a means to mark the site.
- The mark must be positioned to be visible after skin or other surface preparation, after the patient is in final position for the procedure, and after sterile draping is complete.

Procedures that Require Site Marking

For all procedures involving incision, percutaneous puncture, or insertion, the intended procedure is marked.

For spinal procedures, in addition to pre-operative skin marking of the general spinal region, intra-operative radiographic techniques are used to mark the exact vertebral level. First, the general level of the procedure (cervical, thoracic, or lumbar) must be marked preoperatively. If the approach involves anterior versus posterior, or right versus left, then the mark shall indicate this. Then, intraoperatively, the exact interspace(s) to be operated on should be precisely marked using the standard intraoperative radiographic marking technique.

Marking takes into consideration laterality, the surface (flexor or extensor), the level (spine), or specific digit or lesion to be treated.

For procedures that involve laterality of organs, where the incision(s) or approach(es) is *from the midline or from a natural orifice*, the site is still marked and the laterality noted (see exceptions below).

For obvious wounds or lesions, if only some of them are to be treated, the decision on which sites will require marking is made before the procedure itself, and all sites shall be marked accordingly. For procedures performed using imaging guidance, the initial site will be marked before the procedure, and subsequent sites and/or approaches may be marked during the procedure. For minimal access procedures that intend to treat a lateralized internal organ, *whether percutaneous or through a natural orifice*, the intended side is

indicated by a mark at or near the insertion site. The mark shall be visible after completion of the skin preparation and sterile draping.

For procedures performed at the bedside, if the procedure would otherwise require site marking for laterality, multiple structures, or level, the site shall be marked if the person performing the procedure leaves the presence of the patient for any amount of time.

Exception: If the person performing the procedure remains with the patient continuously from the time the decision is made to do the procedure (and consent is obtained from the patient) up to the time of the procedure itself, the site does not have to be marked.

If radiographic images of the intended site have been made, the images indicating the intended site shall be displayed.

An alternative process takes place under the following conditions for sites that cannot easily be marked:

- For teeth, the operative tooth name(s) and number are indicated on documentation, or the operative tooth (or teeth) are marked on the dental radiographs or dental diagram. The documentation, images, and/or diagrams are available in the procedure room before the start of the procedure.
- For procedures on the face or eyes, marking to indicate laterality may occur on the corresponding hand if the hand is accessible to view during time out once the patient is draped.

Exemptions from Site Marking

The following procedures are exempt from site marking:

- Procedures performed on premature infants;
- Midline sternotomy for cardiovascular procedures;
- Procedures for which the insertion site is not predetermined, such as cardiac catheterization and pacemaker insertion;
- Procedures on genitalia;
- Cesarean section;
- Laparotomy and laparoscopy, unless the intra-abdominal procedures are performed on organs that are paired, such as ovaries;
 - o In this case, site marking must occur near the incision on the side for which the procedure is intended. The mark must be visible when the patient is draped.
- Procedures performed during resuscitative efforts in a life-threatening emergency.

Patients Who Refuse Site Marking

If the patient refuses site marking, the care provider shall document the patient's refusal on the patient's operative consent form and shall refer to the site description on the operative consent form during the time out process.

If the patient refuses site marking, the care provider shall explain to the patient the purpose of the Universal Protocol to prevent wrong-person, wrong-procedure, and wrong-site operative and invasive procedures. The refusal and explanation shall be documented on the consent form.

If the patient's refusal to allow site marking compromises the ability of the team to identify the procedure site accurately, the procedure may be cancelled at the discretion of the physician performing the procedure.

Performing Time Out

The purpose of time out is to conduct a final assessment to verify that the correct patient, site, position, and procedure are identified; and that all relevant documents, information, and necessary equipment are available.

Nurses with privileges to perform PICC line insertion may initiate time out on PICC line procedures. Time out is required for all procedures regardless of the location where the procedure is performed. This includes procedures in operating room suites, procedure areas, at the bedside, and in clinic locations. Time out is required for emergency procedures with the exception of life-threatening emergencies. A time out is performed immediately before starting the procedure.

A time out is performed before removing a central venous catheter from a patient, as per [A03- 065, Placement and Maintenance of Vascular Devices in Arteries and Central Lines](#). In progressive and critical care areas, where nurses remove central lines, time outs are performed between at least two (2) nurses or a nurse and a physician and are documented appropriately. In acute care areas, where physicians remove central lines, time outs are performed between a physician and a nurse and are documented appropriately.

Time out includes active communication among all relevant members of the procedure team. It is conducted in a standardized, fail-safe mode, meaning the procedure is not started until all questions or concerns are resolved. If questions or concerns cannot be resolved to the satisfaction of all team members, the case shall be delayed until such time as they are resolved or the procedure is cancelled.

A time out is initiated by the physician who will perform the incision or invasion. If the time out is not initiated by the physician, it shall be initiated by other members of the procedure team.

A time out is conducted immediately prior to incision or invasion. All other activities are suspended to the extent possible without compromising patient safety, so that all members of the team are focused on the active confirmation of time out components. Members of the team include the physician initiating the procedure, the nurse, technologist or technician and other clinicians assisting with the procedure, and anesthesiology staff when anesthesia is being provided. Active verbal communication and verification are required. If the attending physician is not present when the time out is performed immediately before incision, an abbreviated time out shall be conducted when the attending physician arrives. The components of the abbreviated time out shall, at a minimum, include correct patient, position and procedure.

Nurses with privileges to insert PICC lines, who are unassisted by other care providers, shall perform and document time outs. It is not necessary to engage others in this verification process if they would not otherwise be involved in the procedure.

When two or more procedures are being performed on the same patient, a time out is performed to confirm each subsequent procedure before it is initiated.

The components of time out shall be clearly documented as follows:

The individual performing the procedure is responsible for the complete documentation of the time out. If a nurse or technologist is involved with the procedure, he/she may document the appropriate variables on the time out note, otherwise, the person performing the procedure must document the pertinent data.

The team collaboratively and verbally affirms the following are correct:

- Correct patient identity confirmed by patient name and birth date on the armband and procedure consent;
- Correct procedure, position, side, and site according to the procedure consent and relevant images;
- The presence of relevant images and results that are properly labeled and appropriately displayed;
- Administration of prophylactic antibiotics per protocol prior to induction;
- The need to administer fluids for irrigation purposes;
- Correct implants, equipment, or other requirements;
- Safety precautions based on patient history of medication use; and
- ABO compatibility for patients undergoing transplantation.

All members of the procedure team are expected to work collaboratively in an atmosphere of mutual respect to ensure patient safety.

Resources

TJC 2009 Universal Protocol and associated references

<http://www.jointcommission.org/PatientSafety/UniversalProtocol/>

Persons and Sites Affected	
X Enterprise Chandler Good Samaritan Kentucky Children's Ambulatory Department	
Policies Replaced	
X Chandler HP08-37 X Good Samaritan Col111 Kentucky Children's CH Ambulatory KC Other	
Effective Date: 08/06/2014	Review/Revision Dates: 6/2003; 12/8/2008, 12/2011, 11/11/2012; 08/06/2014
Approval by and date:	
Signature__ Tukea Talbert, Interim Enterprise Director, Office of Enterprise Quality and Safety, Review Team Leader	Date____ Name
Signature__ Colleen Swartz, Chief Nurse Executive	Date____ Name
Signature__ Bernard Boulanger, MD, Chief Medical Officer	Date____ Name
Signature__ Marcus Randall, MD, Chief, Ambulatory Services	Date____ Name
Signature__ Anna L. Smith, Chief Administrative Officer	Date____ Name

Appendix M

University of Kentucky / UK HealthCare Policy and Procedure Incident Reporting

Incident reporting is not only for when “bad” things happen. We can often learn from what is called a “near miss”, an event that could have occurred but didn’t. An example of this would be properly identifying your patient and the procedure before getting started and realizing the wrong tooth is written on the consent form. This would be a near miss, since it was caught before the procedure was performed on the wrong tooth.

Incident reports are NOT about blaming people or patients. They are reports that should only state the facts of what occurred, who was involved (preferably no names in the report, only titles) and how the incident was resolved.

To report an incident, you can go to the link listed below:

<http://careweb.mc.uky.edu/psn/>



For assistance please contact [Becky Fister](#)

The information contained herein has been compiled and/or is intended to be used as part of the UK Healthcare's Patient Safety Evaluation System, is deemed to be Patient Safety Work Product, and is privileged and confidential.

- The UHC Safety Intelligence® SI Platform is an easy-to-use Web-Based event reporting and management tool.
- Effective use of the tool improves communication and collaboration that are critical to patient safety.
- The SI captures information about adverse events, near misses, and unsafe conditions that involve patients, staff, and visitors.
- The UK HealthCare's policy on Promoting a Culture of Patient Safety (A09-000) is available [here](#).

The web page will look like this. You can then click on the blue “Click here to Begin Report” button to complete the incident report. Please make sure you complete ALL fields.

If you have any questions, please feel free to call me.

Sara Adams, Quality, Safety and Compliance Manager (859) 323-9667