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DENTIST’S PLEDGE

As a student of dentistry and as a dentist, I will conduct myself with competence and integrity, with candor and compassion, and with personal commitment to the best interests of my patients.

I shall care for my patients, as I would be cared for. The health and well-being of my patients will be my first consideration. I shall obtain consultation when it is appropriate. I shall include my patients in all important decisions about their care.

I shall accept all patients in a non-judgmental manner, and use my skills to serve those in need. I shall respect the full human dignity of each individual regardless of their race, economic status or religion. I will provide absolute discretion and confidentiality for those who entrust me with their care.

The high regard of my profession is born of society’s trust in its practitioners. I will strive to merit that trust. I shall at all times and in all places conduct myself with honor and integrity.

I will strive to advance my profession by seeking new knowledge and by re-examining the ideas and practices of the past. I will attend to my own physical, mental, spiritual, intellectual and professional development in the best interest of serving others.

I pledge myself to the service of humanity, my patients, my community and my profession.

I promise to observe the code of ethics for the profession of dentistry from this day forward.

Note: Based on the Hippocratic Oath, the Prayer of Maimonides and the 1947 Declaration of Geneva.
I: VISION, MISSION AND GOALS

A. Vision statement for the University of Nevada, Las Vegas (UNLV) School of Dental Medicine (SDM)

UNLV SDM provides world class oral health education while providing for the dental needs of Nevada residents.

B. Mission statement for the UNLV SDM

UNLV SDM will be a driving educational force toward improving the health of the citizens of Nevada through innovative programs of oral healthcare services to the community, integrated biomedical and clinical curricula, and research.

C. Goals for the UNLV SDM

GOAL 1: PATIENT CARE AND SERVICE
Provide excellence in patient-centered clinical care, patient education, and statewide community outreach programs fostering an environment where individual differences are valued, clear communications provided in all interactions, and cross-cultural relations recognized to meet the unique needs of our patients.

GOAL 2: EDUCATION
Maintain a progressive, evidence based and innovative curriculum integrating biomedical, behavioral, and clinical sciences to support student academic success to ensure oral health literate, competent, contemporary oral health care providers.

GOAL 3: SCHOLARSHIP
Provide an environment that fosters clinical and community engagement for the scholarship of faculty and students in inter-professional education and research by developing mutual understanding of, and respect for the contributions of various disciplines.

GOAL 4: PROFESSIONAL DEVELOPMENT
Cultivate a diverse faculty and staff of excellence committed to life-long learning, ethics, patient-centered care and professional success.

GOAL 5: ALUMNI RELATIONS
Develop and enhance the University of Nevada, Las Vegas, School of Dental Medicine alumni in support of the school's mission and goals.

D. Student Responsibility

This manual is a reference for dental students and others seeking information concerning the formal administrative policies, rules and regulations of the UNLV SDM. In addition,
this manual contains procedural policies for areas such as academic and professional standards, progress and promotion, financial aid, student health insurance and academic and personal counseling. It is the responsibility of each student to know and observe all regulations and procedures relating to their dental school program, the Graduate College and UNLV. Each student is responsible for being familiar with the information contained in the UNLV SDM Student Manual (Manual). The term student, as used throughout this Manual, includes pre-doctoral, postdoctoral or any individual enrolled at the UNLV SDM for academic credit. Failure to read the information will not be considered an acceptable excuse for non-compliance. In no case will any regulations and procedures be waived or an exception granted, based on a plea of ignorance, or contention that the dental school program, Graduate College, or UNLV did not inform a student of the regulations or procedures.

It is the responsibility of each student to read, understand and comply with the Manual, UNLVSDM program, Graduate College and UNLV policies, course rules, regulations and requirements as well as the general rules and regulations of the University as set forth by the University of Nevada, Las Vegas. It is the responsibility of each student to initiate timely action to clarify any doubt he/she may have concerning such rules, regulations and requirements.

All students must read and sign the “Acknowledgement” section found at the end of the Manual (Appendix H). This form must be returned to the Office of Student Affairs prior to the end of the first week of fall classes.

Nothing in this manual constitutes a contract or creates a contractual obligation on the part of UNLV SDM. The school reserves the right interpret an apply its policies and procedures, and to deviate from these guidelines, as appropriate in the particular circumstance with the mission and goals of UNLV SDM.

Policy Disclaimer:
All policies referenced in the Manual are subject to change and the most recently approved policy will be followed. Updated policies can be found at: http://sdmsp/SitePages/Home.aspx.

**UNLV SDM RESERVES THE RIGHT TO CHANGE POLICIES OR REVISE CURRICULA AS NECESSARY.**

Questions regarding dental school program regulations or procedures and their interpretation should be addressed to the UNLV SDM Office of Student Affairs.

The most current version of this Manual is available electronically on several SDM Websites, including the Office of Academic Affairs.
II: ACADEMIC PERFORMANCE
STANDARDS

A. INTRODUCTION AND GENERAL INFORMATION

This Manual has been designed to provide all students with a readily available source of information about the pre-doctoral and postdoctoral education policies, available services, and other items of interest. Further details regarding policies and procedures are found in the UNLV SDM Manual on Share Point.

The primary objectives of the UNLV SDM are to allow each student to acquire knowledge and to certify that knowledge and competency have been achieved. Graduation from a program at a school of dental medicine implies that the student, as a dental health practitioner, has acquired the knowledge and skills needed to assume the responsibility for the protection of human life and health. Therefore, it is the responsibility of the UNLV SDM to specifically define the competencies required of its students. The faculty of UNLV SDM, as representatives of the dental profession and the dental school community, must define Academic Performance Standards for dental students and have therefore created guidelines for promotion from one academic year to the next year and graduation from the program with the granting of the Doctor of Dental Medicine degree or postdoctoral education degree/certificate, as applicable, based on satisfactorily meeting the performance standards established by the faculty.

1. Accreditation

The programs offered by the UNLV SDM are accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association (ADA).

CODA will review complaints that relate to a program’s compliance with the accreditation standards. CODA is interested in 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 treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

A copy of the appropriate accreditation standards and/or CODA’s policy and procedure for submission of complaints may be obtained by contacting CODA at 211 East Chicago Avenue, Chicago, IL 60611-2678 or by calling 1-800-621-8099 extension 4653.

Additional information regarding accreditation standards and the complaint process may be found at the following URL: http://www.ada.org/314.aspx.
2. General Information

UNLV SDM offers a pre-doctoral program designed for students who are seeking a Doctor of Dental Medicine degree.

UNLV SDM also offers postdoctoral degree/certificate programs, which are designed for the dentist who wishes to pursue advanced education. These programs are; graduate (degree), postdoctoral residency (degree and/or certificate), and fellowships. All graduate students must meet the following eligibility requirements of UNLV Graduate College to be considered for admission for advanced degrees accompanying residency programs:

a. Hold a baccalaureate or advanced degree from a regionally accredited four-year college or university.

b. Have a minimum overall grade point average of 2.75 (4.00=A) for the bachelor's degree or a minimum 3.00 for the last two (2) years.

c. A student who has an advanced degree from an accredited college or university with a minimum overall GPA of 3.00 may, at the option of the graduate dean and department, be admitted to an advanced degree program.

UNLV SDM does not, expressly or implicitly, guarantee a license to practice dentistry upon admission to or graduation from SDM. Licensure is the exclusive right and responsibility of the State Boards of Dentistry in each state. Students must satisfy the requirements of each state's regulatory body independently of any college or school requirements for graduation.

B. POLICIES AND RESPONSIBILITIES

NOTE: Postdoctoral students and fellows must review their specific program handbook/catalog for additional specific policies applicable to postdoctoral students in addition to those set forth in this Manual. Stricter policies within a specific program handbook/catalog will prevail over general policies set forth in this Manual.

1. Attendance

The class attendance policy will be written in the course syllabus.

**You are expected to attend all scheduled programs, seminars, meetings, classes and clinical sessions regardless of date or time unless excused throughout the academic year.** It is the personal responsibility of the student to consult with the professor regarding absence(s) from class.
You are expected to notify the Office of Student Affairs or Program Director (in the case of postdoctoral students) (or Dean’s designee) by phone or e-mail prior to an absence. In the case of unexpected emergencies, notify the Office of Student Affairs/Program Director (or Dean’s designee) as soon as possible afterwards.

You can be administratively dropped from the class after four (4) absences without instructor notification.

Absences will be approved only for reasons of illness or emergencies of the student or immediate family, religious observance, jury duty, and participation in approved activities, such as those involving national organizations and professional activities. Family reunions, days off for recreation, travel, social events, additional vacation, etc., are not reasons for approved absence. Absences for pre-doctoral students for employment interviews and for postdoctoral residency interviews will be limited to a total of ten (10) days an academic year and approval will be dependent on academic progress. Students, course directors, and team leaders should follow these guidelines.

In the event of a student medical problem or medical problem of a student’s family member, the student should contact the Assistant Dean for Admissions and Student Affairs (or Dean’s Designee), who will inform the appropriate faculty member(s). The course director, team leader or Program Director, as applicable, will approve/disapprove the absence. At the discretion of the course director/Program Director, absence due to illness extending beyond three (3) days may require a physician’s letter. In addition to this section, please see the University’s Health Withdrawal Policy, which applies to Voluntary Health Withdrawals (See Appendix B).

When in doubt about who to contact regarding an unexpected emergency, you must contact the Office of Student Affairs who will then notify the applicable faculty member.

Activities missed during absences approved by course directors/team leaders or Program Director must be made up and the make-up activities will be determined based upon the discretion of the course director, team leader or Program Director, as applicable.

2. Religious Observance

It is the policy of the Nevada System of Higher Education (NSHE) to be sensitive to the religious obligations of its students. Any student missing class, quizzes, examinations or any other class or lab work because of observance of religious holidays shall, whenever possible, be given an opportunity during that semester to make up the missed work. The make-up will apply to the religious holiday day absence only. It shall be the responsibility of the student to notify the instructor in advance in writing no later than the end of the first week of academic classes for each semester of his/her intention to participate in religious holidays, which do not fall on
state holidays or periods of class recess. This policy shall not apply in the event that administering the assignment at an alternate time would impose an undue hardship on the instructor or the SDM that could not reasonably have been avoided. “Any Student who is denied a make-up option after appropriately notifying the instructor shall have the right to appeal that decision through the normal appeal mechanism in place at that institution.” (B/R 6/14). The normal appeal mechanism at the SDM is to the Academic Appeals Committee (For information about the Academic Appeals Committee see D. Academic Appeals Process, 1. Academic Appeals Committee.

NOTE: For pre-doctoral students, written notification requesting absence from class due to religious observance, must be delivered to the Office of Student Affairs and to the course directors no later than the end of the first week of academic classes for each semester. For postdoctoral students, written notification requesting absence from class due to religious observance, must be delivered to Program Director no later than the end of the first week of academic classes for each semester. Postdoctoral students must see their individual program handbook for more specific information regarding absences and leave of absences.

3. International Educational Opportunity Policy (outside of the continental United States)

For those pre-doctoral students who wish to participate in dental international educational opportunities you must receive approval from the SDM Associate Dean for Academic Affairs, SDM Assistant Dean for Admissions and Student Affairs, and the Office of International Programs on the UNLV main campus. SDM approval must be received before solidifying plans. (See UNLV SDM Extramural Educational Experience/Underserved Patient Care Trip Request Procedure, Appendix C and Office of International Programs website: http://internationalprograms.unlv.edu/). Please be advised that this may take up to six months.

4. Educational Experiences (within the continental United States)

For those pre-doctoral students who wish to participate in extramural educational experiences (at other dental schools, hospitals, public health facilities, private dental offices, etc.) within the continental United States you must receive approval from the SDM before solidifying plans (See Appendix C) as affiliation agreements must be completed and that may take up to six months.

5. Syllabus

All courses are subject to the course policies as outlined in this Manual. The syllabus for each course will be required to individually list the course policy for each of the following, as they are UNLV SDM policies which apply to all courses:
a. Grading systems

b. Remediation and resolution of recorded failures

c. Information transmittal

c. Professional behavior

e. Religious holidays

6. Disability Resource Center-Request for Accommodation

The UNLV Disability Resource Center (DRC) coordinates all accommodations for students with documented disabilities. The DRC is the official office to review and house disability documentation for students, and to provide them with an official Academic Accommodation Plan to present to the faculty if an accommodation is warranted. The DRC strongly encourages faculty to provide accommodations only if and when they are in receipt of said plan. Faculty should not provide students accommodations without being in receipt of this plan. UNLV complies with the provisions set forth in Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, offering reasonable accommodations to qualified students with documented disabilities. If you have a documented disability that may require accommodations, you will need to contact the DRC for the coordination of services. If you are a new student to UNLV SDM, it will be beneficial to you and the SDM to have the opportunity to discuss your disability and the accommodations you need or may need before you begin your academic program. If you have been enrolled for some time but have not disclosed your disability, you are encouraged to do so. The DRC is located on the main campus in the Student Services Complex (SSC), Room 137, and the contact numbers are: VOICE (702) 895-0866, TTY (702) 895-0652, FAX (702) 895-0651. For additional information, please visit: http://drc.unlv.edu. In addition, you will need to promptly inform the UNLV SDM Office of Student Affairs of any determination made by the DRC.

7. Essential Functions-Minimum Technical Standards for Admissions and Matriculation

All accepted candidates must certify that they have read and understand their responsibility of meeting the essential functions as outlined in the UNLV SDM Minimum Technical Standards for Admission and Matriculation (referred to as “Essential Functions” or “Technical Standards”). (See Appendix A).
8. Evaluation and assessment mechanisms

a. Foundational self-assessment will allow a student to identify strengths and weaknesses within a specific area of study. This will provide direction to the student to correct deficiencies or to establish mentoring roles within student teams and seminar groups.

b. The ability to apply fundamental knowledge will be evaluated on the basis of group presentations, individual contributions through the use of case studies, and oral examinations in the clinical setting.

c. Assessment of team performance will accompany self-assessment and instructor evaluation.

d. Oral and written examinations will allow the instructor to assess fundamental knowledge within a given topic area.

Pre-doctoral Students. Examinations will be administered on the dates listed in each syllabus, and any rescheduling of an examination date will be announced in class by the course director. Possible changes in examination dates requested by students must be submitted to the Course Director by the Class President (or designee) within the first two weeks of the beginning of class. The course director may approve or disapprove the proposed change. If the change request is approved by the course director, the class will be required to vote on the change, with 100% student response, and a majority of the students must vote in favor of the proposed change or the original examination date will stand. The voting process will be administered by the Office of Academic Affairs. Possible changes in examination dates requested by students after the first two weeks of beginning of class must be submitted to the course director by the Class President (or designee). The course director may approve or disapprove the proposed change. If the change request is approved by the course director, the class will be required to vote on the change, with 100% student response and 100% in favor of the proposed change or the original date will stand. The voting process will be administered by the Office of Academic Affairs. In the event of an unexpected emergency that prevents you from taking an examination you must notify the Office of Admissions and Student Affairs and the course director by email or by telephone before the examination is given. There will be no make-up examinations given without a valid excuse (such as a doctor’s note, etc.). If you wish to request an alternate examination for other reasons, i.e., professional activities, jury duty, etc., you must submit your request in writing to the course director and to the Office of Admissions and Student Affairs as soon as possible before the examination is administered. Make-up examinations will cover materials similar to the original examination, but may be in another format, for example, an oral examination instead of a written examination.

Post-doctoral Students. Examinations will be administered on the dates
listed in each syllabus, and any rescheduling of an examination date will be announced in class by course director and/or Program Director, as applicable. Possible changes in examination dates requested by students must be submitted by the Chief Resident (or designee), within the first two weeks of the semester. The course director and/or Program Director may approve or disapprove the proposed changes. If the change is approved by the course director and/or Program Director, the class will then be required to vote on the change, with 100% student response, and a majority of the students must vote in favor of the proposed change or the original examination date will stand. The voting process will be administered by the Office of Academic Affairs. Possible changes in examination dates requested by students after the first two-weeks of the beginning of class must be submitted to the course director and/or Program Director by the Chief Resident (or designee). The course director may approve or disapprove the proposed change. If the change request is approved by the course director, the class will be required to vote on the change, with 100% student response, and 100% in favor of the proposed change or the original examination date will stand. The voting process will be administered by the Office of Academic Affairs.

In the event of an unexpected emergency that prevents you from taking an examination you must notify the Office of Admissions and Student Affairs and the course director and/or Program Director by email or by telephone before the examination is given. There will be no make-up examinations given without a valid excuse (such as a doctor’s note, etc.). If you wish to request an alternate examination for other reasons, i.e., professional activities, jury duty, etc., you must submit your request in writing to the course director and to the Office of Admissions and Student Affairs as soon as possible before the examination is administered. Make-up examinations will cover materials similar to the original examination, but may be in another format, for example, an oral examination instead of a written examination.

9. Examination conduct protocol at UNLV SDM

a. Written examinations

i. Student doctors may not bring anything into the testing area except bottled water (with the exception of the simulation classroom in which no food or water is permitted), a pencil or required examination materials. Everything else, including hats, and all electronic devices, such as cell phones, PDAs, iPods, etc., must be left by the wall of the classroom or in a locker.

ii. Absolutely NO verbal communication between students is allowed.

iii. The examination environment is proctored by faculty (or his/her
iv. Upon completion of the examination, students should turn in their test booklets and answer sheets and immediately leave the room. Proctoring faculty will collect these sheets.

v. No questions will be answered during the examination. Test questions will be addressed after the examination.

vi. Seating may be assigned, and as much as possible be random and spaced apart from adjacent students.

vii. Only one person at a time will be allowed to use the restroom during an examination.

viii. Beginning and ending times of the examination are defined and strictly enforced.

ix. Only students with approved absences will be allowed to make up missed exams.

b. **Pre-doctoral Clinical competency examinations**

i. Competency examinations must be clearly marked on the clinical faculty schedule by the scheduler.

ii. Per faculty and where possible, multiple competency exams are scheduled in adjacent cubicles.

iii. The approved Clinical Sciences protocol for administration and evaluation of student competencies are followed in all teams.

iv. No assistance or advice is provided during a competency examination, other than to alleviate an emergency situation or correct a significant patient treatment error.

v. Students will use approved competency forms.

vi. Assistants may be used during competencies, when available. However, unauthorized use of the assistant (i.e., coaching) will be grounds for immediate failure.

vii. Students must only work with the faculty assigned for the examination. Consultation with faculty not assigned to the competency examination will result in immediate failure.
c. Pre-clinical practical examinations
   
   i. The same level of academic integrity as with written and clinical competency exams is expected.
   
   ii. Examinations will be proctored by faculty (or his/her designee).
   
   iii. Faculty will remain silent during the examination, no advice or assistance will be provided.

10. Grading policy

   The course director is responsible for distributing to students and the Curriculum Committee a syllabus which includes the criteria and policies used for testing and determination of grades. The syllabus will be distributed on WebCampus at the beginning of each course.

   The course director is also responsible for making grades available to each student on any examination or graded work assignment within ten (10) working days of the examination or project. However, due to lengthy grading procedures, exceptions to this policy will be stated in the course syllabus. In addition, the course director is responsible for reporting the final course grade for each student listed on the class report form per University guidelines to MyUNLV. Any final course grade of I or F must be accompanied by a recommendation to the Student Progress Committee and Associate Dean for Academic Affairs (or Dean’s designee) or, (in relation to postgraduate students) Program Director (or Dean’s designee) of how the I grade may be resolved and if the F grade may be remediated.

   The following grading system complies with NSHE campus grading policy and will be used in all UNLV SDM courses that are not specifically designated as Satisfactory/Unsatisfactory (S/U) courses:

   a. Grading System

   
<table>
<thead>
<tr>
<th>Grade Range</th>
<th>Description</th>
<th>Grade Point Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100:</td>
<td>A (superior)</td>
<td>4.0 (grade point value)</td>
</tr>
<tr>
<td>80-89.9:</td>
<td>B (above average)</td>
<td>3.0 (grade point value)</td>
</tr>
<tr>
<td>70-79.9:</td>
<td>C (average)</td>
<td>2.0 (grade point value)</td>
</tr>
<tr>
<td>0-69.9:</td>
<td>F (failure)</td>
<td>0.0 (grade point value)</td>
</tr>
</tbody>
</table>

   The above grades are the final course grades. Other terminology may be used within the individual course grading system, such as, performance at grade level, exceeds expectations, average, no grade = pass, needs improvement, deficient performance, etc. For the final course grade, each student must pass all dental school courses with a C or better grade, or a Satisfactory grade in courses using
the S/U grading method. **NOTE:** In a Certificate program, each student must pass all dental school courses with a C or better grade and maintain at least a 3.0 overall GPA, or a satisfactory grade in courses using the S/U grading method. For a Master’s Program a “B” or better is required for all courses.

**b. Other Grading Symbols Required by the NSHE Grading System:**

<table>
<thead>
<tr>
<th>Symbol</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>S</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>U</td>
<td>Unsatisfactory</td>
</tr>
<tr>
<td>V</td>
<td>Incomplete</td>
</tr>
<tr>
<td>X</td>
<td>In Progress (research projects or courses extending beyond one semester)</td>
</tr>
<tr>
<td>AD</td>
<td>Audit</td>
</tr>
<tr>
<td>W</td>
<td>Withdrawal</td>
</tr>
<tr>
<td>NR</td>
<td>Not Reported - Assigned by registrar</td>
</tr>
</tbody>
</table>

Non-cognitive or “professional” factors such as performance under stress, integrity, initiative, interpersonal relations, ethical and professional characteristics will also be considered. A student’s professionalism performance may positively or negatively impact a course grade. A passing grade will NOT be awarded to a student whose performance in these non-cognitive areas is unacceptable.

Professional standards are discussed in Section II, 19, Professionalism and Section III, UNLV SDM Code of Professional Responsibility (Honor Code), B. Professional Conduct in Patient Care.

**It is the responsibility of the student to know at all times his or her academic standing with regard to grades and academic progress. If you feel you are in danger of failing a course, please contact the Office of Student Affairs (or Program Director for postgraduate students) for help. Early intervention will make it easier for you and the faculty to overcome a problem in a course.**

**11. Family Educational Rights and Privacy Act**

Academic and disciplinary records shall be maintained separately. Official transcripts and other records of student academic progress are maintained by the UNLV Registrar’s Office in accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974 and the U.S. Department of Education guidelines for implementation. Transcripts of academic records shall contain information about academic status, including disqualification for academic reasons, and expulsion, suspension and revocation of admission for disciplinary reasons. Information from student educational records will not be made available to persons on or off campus unless one of the exceptions under the FERPA applies. More information about UNLV’s institutional FERPA policy can be found at: [https://www.unlv.edu/registrar/ferpa](https://www.unlv.edu/registrar/ferpa). Semester grades are issued through the UNLV Office of the Registrar at the end of
each semester.

12. Review of academic performance

At the end of each academic term, or more frequently as needed, the academic performance of each student will be reviewed by the applicable SDM Review Committee. With regard to pre-doctoral students, the applicable committee is the SDM Student Progress Committee (SPC), along with the Associate Dean for Academic Affairs (or Dean’s designee) who review and make recommendations regarding student performance. With regard to postdoctoral students, the Advanced Education Committee (AEC) and Associate Dean for Advanced Education review and make recommendations regarding student performance. The SPC and/or AEC make recommendations to the Associate Dean for Academic Affairs and/or Dean regarding student status and progress.

**Satisfactory Progress:** Academic standing of all students will be determined by the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) each semester. All students must be in good academic standing to be eligible for promotion from each academic year. For pre-doctoral students good academic standing is defined as receiving passing grades (C or better) in all required courses, with no imposed sanctions. For postdoctoral students, good academic standing is defined as receiving passing grades (C or better average in Certificate program, no grade lower than B in Master’s program) in all required courses, with no imposed sanctions.

In order to hold class office, student body office or represent the UNLV SDM at regional and national meetings, students must be in good academic standing and/or be without current letters of academic warning.

**Unsatisfactory progress:** Unsatisfactory progress is defined as having failed to achieve a 2.00 grade point average for the semester, or having received grades of I or F in a semester, or having been placed on academic probation or other involuntary academic status modifications. The SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) will make recommendations to the Dean regarding resolution of I and F grades. In order to achieve good academic standing any courses with I grades must be completed with a passing or satisfactory grade.

Other specific criteria for promotion and graduation, as applicable, including National Board Dental Examination scores, will be discussed in the following sections. Consideration for graduation can occur only when a student has completed all required courses with passing grades and no imposed academic sanctions.

13. Promotion

All students should be in good academic standing and make satisfactory progress to be eligible for promotion from each academic year. Recommendations for promotion will be made by the SPC/AEC and Associate Dean for Academic Affairs/Associate
Dean for Advanced Education (or Dean’s designee), subject to approval by the Dean.

**Pre-doctoral Students**

**National Board Dental Examination (NBDE), Part I**

A student must be in good academic standing at the end of the fall semester of the second year (DS2), subject to review and recommendation by the SPC and Associate Dean for Academic Affairs (or Dean’s designee), in order to be approved by the Dean (or Dean’s Designee) as eligible to sit for the NBDE, Part I.

**DS2 students must take Part I of the NBDE by the end of summer session of their second year of dental school.** DS2 students who do not take the exam by this time will be subject to evaluation and action by the SPC and Associate Dean for Academic Affairs (or Dean’s designee). Action may include, but is not limited to, placement on academic probation, Clinical Retraining, Clinical Reassignment and/or change in academic status.

Students that fail Part I the first time are permitted to enroll in DS3 courses but will be subject to academic sanctions. These students will be required to pass Part I the second time or be subject to suspension. The second time (first retake) must be completed by the end of the fall semester of the third year (DS3). UNLV SDM must receive notification that the student has successfully passed Part I before the start of the DS3 spring semester or the student will be suspended. The suspension due to failure of the first retake will allow the student to study for a second retake examination. Fees, tuition assessment, and SDM access will be subject to university regulations. No suspended student will be readmitted until he/she has passed Part I. Terms of readmission will be set when the student is readmitted. However, suspended students will be required to repeat the DS3 year. Students who have been suspended for greater than 24 months will be dismissed.

**Postgraduate Students**

A student must be in good academic standing to continue in the program.

14. **Graduation requirements**

A student must complete all required courses, pass all competency assignments, complete all clinical responsibilities, and be in good academic standing in order to be eligible to graduate from the UNLV SDM.

For pre-doctoral students, in addition to these requirements, a student must also pass NBDE, Parts I and II in order to be eligible to graduate from UNLV SDM. The Dean (or Dean’s designee) will authorize students in good academic standing who have completed the prerequisite coursework and who are considered prepared and eligible to take the NBDE Part II.

**NBDE, Part II**

DS4 students must pass the NBDE Part II by before graduation.
The Dean’s Office receives official notification of the results of the NBDE. Upon receipt of the official notification, the Dean will inform the following individuals regarding students who fail to pass the NBDE: Chairman of the SPC; Associate Dean for Academic Affairs (or Dean’s designee) and the Assistant Dean for Admissions and Student Affairs. The SPC and Associate Dean for Academic Affairs (or Dean’s designee) will take appropriate action.

DS4 students who do not pass the NBDE, Part II by the end of the DS4 spring semester are subject to evaluation and action by the SPC and Associate Dean for Academic Affairs (or Dean’s designee). Such students may be subject to action which may include, but is not limited to being required to enroll in the subsequent semesters and completing remedial coursework. Students will not receive a diploma until they successfully pass Part II.

Recommendations for graduation will be made by the SPC and Associate Dean for Academic Affairs (or Dean’s designee), subject to approval by the Faculty and Dean. The AEC will review the academic standing of all postdoctoral students and make recommendations to the Dean concerning graduation.

Postgraduate Students
A student must be in good academic standing to successfully complete the program.

15. Awards and distinctions

A Dean’s List of students demonstrating high academic performance shall be published annually and include the top 10% of the class as calculated from the total grade point average (GPA) for each semester. Each Advanced Education program may make special awards for students as determined by the Program Director. Awards for research will be determined by the AEC or their designee.

16. Course remediation/competency re-evaluation

Three methods of course remediation/competency re-evaluation may be applied in didactic and clinical courses. These include:

a. In-course Remediation

In-course remediation is not automatically afforded but rather it may be permitted at the discretion of the course director. In-course remediation applies in any course in which two or more evaluation exercises or examinations are
provided for in the course syllabus. The following are the policies outlined for in-course remediation:

i. A student receiving a grade of F on any examination or evaluation exercise, excluding the final, may be permitted to remediate that evaluation exercise or examination prior to taking the next scheduled examination at the course director’s discretion. If a course director elects to change a grade as part of the successful completion of the in-course remediation process, that grade cannot be higher than a C grade. For postdoctoral students, if a course director elects to change a grade as part of the successful completion of the in-course remediation process, that grade must at least be satisfactory according to the requirements of the Advanced Education Program.

ii. If in-course remediation is permitted by the course director, it is the responsibility of the course director to contact the student to schedule the remediation activity.

iii. There shall be no limit to the number of courses in which a student may complete in-course remediation.

b. Post-course remediation:

Pre-Doctoral Students

Post-course remediation may only be permitted with approval from the SPC and Associate Dean for Academic Affairs (or Dean’s designee). If post-course remediation is approved by the SPC and Associate Dean for Academic Affairs (or Dean’s designee), the following are the policies outlined for post-course remediation:

i. When a student receives a final grade of F in any course, post-course remediation may be permitted in accordance with (ii) and (iii) below.

ii. Post-course remediation shall be limited to two (2) courses per academic year and a total of three (3) courses during a student’s dental school career. More than two (2) course failures per academic year will result in Academic Expulsion (dismissal). More than three (3) course failures during a student’s school career will result in Academic Expulsion (dismissal). The post-course remediation limits apply to all required SDM courses; elective courses are exempt from these limitations.

iii. Post-course remediation should not begin until the course director receives notification from the SPC and Associate Dean for Academic Affairs (or Dean’s designee). The course director will
schedule the post-course remediation activity that should correspond with any guidelines recommended by the SPC and Associate Dean for Academic Affairs (or Dean’s designee).

iv. Successful post-course remediation, as defined by the course director, will result in a maximum grade of C. A change of grade form will be sent to the Department Chair. The form will list the change of grade to a “C Remediated” and will be noted on the transcript as such.

v. If a student fails to successfully post-course remediate a given course, the original F grade will stand as the final grade for the course. The student may be suspended or required to repeat the entire academic year, if the student is permitted to continue in the program.

Postgraduate Students
Post-course remediation may only be permitted with approval from the AEC and Associate Dean for Academic Affairs (or Dean’s designee). If post-course remediation is approved by the AEC and Associate Dean for Advanced Education (or Dean’s designee), the following are the policies outlined for post-course remediation:

i. When a student receives an unsatisfactory grade in any course, post-course remediation may be permitted.

ii. Post-course remediation shall be limited to one (1) course per academic year and two (2) courses during a student’s dental school career. More than two (2) course failures during a student’s school career will result in Academic expulsion (dismissal).

iii. Post-course remediation should not begin until the course director receives notification from the AEC and Associate Dean for Advanced Education (or Dean’s designee). The course director will schedule the post-course remediation activity, which should correspond with any guidelines recommended by the AEC and Associate Dean for Advanced Education (or Dean’s designee).

iv. Successful post-course remediation, as defined by the course director, must result in a satisfactory grade. Academic Probation and remediation will also be noted in the transcript.

v. If a student fails to successfully post-course remediate a given course, the original unsatisfactory grade will stand as the final grade for the course. The student may be suspended or required to repeat the entire academic year, if the student is permitted to continue in the program.
c. Repeat Course/Academic Year

If the course director determines that the student failed the coursework to such an extent that post-course remediation activities would be inadequate to attain an acceptable level of academic achievement in the course material, the course director may recommend to the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) that the student repeat the course as the remedial activity. Repeating the course may result in suspension or repeating the entire academic year.

Students who fail post-course remediation, but whose academic performance does not warrant Academic Expulsion (as determined by the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education [or Dean's designee], subject to the Dean's approval) may be required to repeat the entire academic year or may be placed on Academic Suspension.

Students who repeat the year will be placed on Academic Probation until the failed course is successfully passed the second time, and the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean's designee), as applicable, remove the student from Academic Probation status. Additional conditions may be required at the time of placement on Academic Probation. The student repeating the year may be required to satisfactorily repeat all courses and competencies for a grade. When a course is repeated, both grades will be shown on the student transcript, and the two grades averaged for GPA calculation. However, the grade achieved in the repeated course will be the grade considered in decisions regarding student promotion.

17. Remediation and Resolution of Recorded Failures

Upon approval of the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee), a student must satisfactorily complete post-course remediation (see Section 16, “Course remediation/competency re-evaluation”) for any course in which they have received a grade of F in order to be promoted or graduate.

The SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) will consult with individual course directors regarding all final course grades of F in order to recommend an appropriate course of action. An appropriate course of action, may include, but is not limited to, the possibility of post-course remediation. Post-course remediation of courses in which a final grade of F has been received shall not begin without approval of the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee).

If approved, the student will meet with the course director to develop a post-course
remediation plan. The post-course remediation activities are at the discretion of the course director. Faculty are available to assist students preparing for post-course remediation, but the responsibility for learning the material resides solely with the student. The time and place of the post-course remediation will be arranged individually. Please note that if the course director determines that the student failed the coursework to such an extent that remedial activities would be inadequate to attain an acceptable level of academic achievement of the course material, the course director may recommend to the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) that the student repeat the course. Repeating the course may require repeating the entire academic year.

The course director will report the outcome of the post-course remediation of the F grade or unsatisfactory grade to the Chair of the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) and appropriate action will be taken.

18. Clinical Reassignment, Clinical Retraining, Clinical Interdiction

a. Clinical Reassignment

**Pre-doctoral Students.** Clinical reassignment includes a designation of the academic status modification of Academic Warning. Clinical reassignment is designed to assist students in the remediation of clinical performance deficiencies. Areas requiring remediation may include but are not limited to: unsatisfactory clinical technique, inability to describe procedures or inability to exhibit critical thinking about procedures being performed, poor patient pool management, non-compliance with school protocols, unprofessional demeanor or unethical behavior. Clinical reassignments are issued, but not limited to Clinical Sciences faculty, Team Leaders and the Office of Clinical Services.

Clinical reassignment may result in the removal of the student from all clinical patient care or specified disciplines until remediation is complete. Most clinical reassignments will be 1-2 weeks in duration, but longer periods may be required, based on the remediation needed. A clinical reassignment document will be generated by the Chair of Clinical Sciences or his/her designee for the affected student. A copy of the clinical reassignment document will be sent to the Associate Dean for Academic Affairs, Co-Associate Deans for Clinical Services, Assistant Dean for Admissions and Student Affairs, Chair of the SPC and Team Faculty. The Clinical Reassignment document will list the clinical performance deficiencies and detail the remedial activities that must be completed. Remedial activities may involve, but are not limited to clinical simulation, written papers and/or meetings with mentors or other faculty. Monitoring by designated faculty beyond the end of the clinical reassignment may be required on a case-by-case basis.
Clinical reassignment is formal notification of unsatisfactory academic performance, but is not retained in the student’s academic record. Failure to comply with the requirements of the clinical reassignment or continued unsatisfactory clinical performance may result in further sanctions or change in academic status, including but not limited to Academic Probation, Repeating the Year, or Academic Expulsion (dismissal).

**Postdoctoral Students.** Clinical reassignment is designed to assist students in the remediation of clinical performance deficiencies. Areas requiring remediation may include, but are not limited to, unsatisfactory clinical technique, inability to describe procedures or inability to exhibit critical thinking about procedures being performed, poor patient pool management, non-compliance with school protocols, unprofessional demeanor, and unethical behavior. Clinical reassignments are issued by the Program Director or his/her designee, with input from program faculty.

Clinical reassignment may result in the removal of the student from clinical patient care until remediation is complete. Most Clinical Reassignments will be 1-2 weeks in duration, but longer periods may be required, based on the remediation needed. The Program Director will construct a clinical reassignment document which will list the clinical performance deficiencies and detail the remedial activities that must be completed. Remedial activities may involve, but are not limited to, clinical simulation, written papers, or meetings with mentors or other faculty. Monitoring by designated faculty beyond the end of the clinical reassignment may be required on a case-by-case basis.

The Program Director or his/her designee will generate a Letter of Academic Warning for clinically reassigned students. This Letter of Academic Warning is formal notification of unsatisfactory academic performance, but is not retained in the student’s academic record. Failure to comply with the requirements of the clinical reassignment or continued unsatisfactory clinical performance may result in further sanctions or change in academic status, such as, Academic Probation, Repeating the Year, or Academic Expulsion (dismissal).

**b. Clinical Retraining**

Clinical retraining is designed to assist students in the remediation of clinical performance deficiencies. Areas requiring retraining may include, but are not limited to unsatisfactory clinical technique, inability to describe procedures or inability to exhibit critical thinking about procedures being performed, poor patient pool management, non-compliance with school protocols, unprofessional demeanor, and unethical behavior. The difference between clinical retraining and clinical reassignment has to do with the severity or frequency of the deficiency, as determined by full-time faculty. Clinical retraining is issued by the Team Leader (or his/her faculty designee) or Program Director, or SDM faculty.
Students assigned clinical retraining may be: 1) removed from clinic during their retraining, 2) removed from clinic only in specified disciplines during their retraining, or 3) not removed from clinic during their retraining. This will be determined by the Team Leader, clinical faculty or Program Director, as applicable, on a case-by-case basis.

Most clinical retraining will be 1-2 weeks in duration, but longer periods may be required, based on the retraining needed. A Clinical Retraining document will be generated for the student. In relation to pre-doctoral students, a copy of the Clinical Retraining document will be sent to the Associate Dean for Academic Affairs, Co-Associate Dean for Clinical Services, Chair of Clinical Sciences, Director of Comprehensive Care, Chair of SPC, and the Team faculty. In relation to postdoctoral students a copy of the Clinical Retraining document will be sent to the Associate Dean for Academic Affairs and Associate Dean for Advanced Education. The document will list the clinical performance deficiencies and detail the retraining activities that must be completed. For pre-doctoral students retraining activities may involve, but are not limited to, clinical simulation, written papers and/or meetings with mentors or other faculty. For postdoctoral students, retraining activities may include but are not limited to clinical simulation, written papers, or meetings with mentors or other faculty. Monitoring by designated faculty or a qualified professional beyond the end of the clinical retraining may be required on a case-by-case basis. Clinical retraining is not recorded on the student’s transcript or part of their academic record.

Failure to comply with the requirements of the clinical retraining or continued unsatisfactory clinical performance may result in further sanctions or change in academic status, including but not limited to Academic Warning, Academic Probation, Repeating the Year, or Academic Expulsion (Dismissal).

c. Clinical Interdiction

Students whose clinical performance is deemed to place patients at risk of immediate harm will be interdicted during the procedure and will receive immediate correction, including but not limited to, the instructor completing the procedure. The clinical instructor will report the incident to the course director and Team Leader or Program Director (as applicable), for determination of clinical reassignment or clinical retraining.

19. Professionalism

The professional development of dental students is an essential part of dental education. The UNLV SDM Student Code of Professional Responsibilities (Honor Code), contained in Section III of this Manual, outlines the required behavior expected of all students attending UNLV SDM. The following section underscores the aforementioned professionalism requirements and places certain aspects of professional behavior under the purview of Academic
Performance Standards. Students are expected to meet the UNLV SDM standards of professional behavior as part of their professional development.

Course grades, clinical course evaluations, and daily clinical grades may be affected by unprofessional behavior. Additionally, any student with a grade that is affected by unprofessional behavior may be subject to action by the SPC/AEC. The Associate Dean for Academic Affairs/Associate Dean for Advanced Education (as applicable), in consultation with the Assistant Dean for Admissions and Student Affairs will determine if student unprofessional behavior will be reviewed by the SPC/AEC or the Honor Council.

a. Unprofessional Behavior

Unprofessional behavior includes, but is not limited to, the following:

i. Approaches patient care in an unethical manner.

ii. Displays unprofessional behavior toward patients, students, staff, faculty, or other individuals.

iii. Is unprepared to provide clinical care and/or disregards instructions.

iv. Willfully or repeatedly violates infection control standards or other clinical protocols.

v. Renders or attempts to render dental treatment without proper authorization.

vi. Neglects or abandons the care of patients.

vii. Does not comply with the UNLV SDM Honor Code section regarding appearance and/or demeanor.

viii. Does not comply with UNLV SDM clinical protocols.

b. Reporting Student Unprofessional Behavior

Faculty, students, staff and patients may report witnessed unprofessional student behavior to the Associate Dean for Academic Affairs or the Assistant Dean for Admissions and Student Affairs. The Associate Dean for Academic Affairs and the Assistant Dean for Admissions and Student Affairs will meet and determine if the unprofessional behavior will be reviewed by the SPC or the Honor Council.
C. IN VOLUNTARY ACADEMIC STATUS MODIFICATIONS

1. Academic Warning

Academic Warning is a formal notice to the student whose progress shows a trend toward unsatisfactory performance. Academic warning does not appear on the student’s transcript or their permanent record. Notice and conditions of Academic Warning shall be recommended to the Dean by SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) and department heads (or their designees). The SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) and department heads (or their designees) with the Dean’s approval, shall provide the student with written notification of the Academic Warning, outlining all related conditions and specifying any mandatory remedial procedures.

If a student is found to be in violation of a course or administrative policy, the student may receive a written warning, such as, clinical reassignment. The warning notice may state that continued or repeated violation of the policy, continued unsatisfactory performance, or failure to comply with remedial requirements may result in further sanctions or change in academic status, including, but not limited to, Academic Probation, Mandated Repeat of Course or Academic Year or Academic Expulsion (Dismissal).

2. Unauthorized Withdrawal

If a student does not comply with the policy on withdrawal, either by failure to submit a letter to the Associate Dean for Academic Affairs (or Dean’s designee) or Program Director and Associate Dean for Advanced Education (or Dean’s designee) (for postdoctoral students) stating the reasons for the decision to withdraw from the UNLV SDM or by withdrawal after the tenth week of classes, the student may be ineligible for reinstatement. Furthermore, there will be no refunds of tuition or fees if withdrawal occurs after the sixth week of classes.

3. Academic Probation

Notice and conditions of Academic Probation shall be recommended by the SPC/AEC and Associate Dean for Academic Affairs (or Dean’s designee)/Associate Dean for Advanced Education (or Dean’s designee) and forwarded to the Dean of the UNLV SDM. Academic Probation is a formal notice to the student by the Dean (or Dean’s designee) that his/her academic progress is deemed unsatisfactory. Grounds for Academic Probation include, but are not limited to the following:

a. student has not satisfied the conditions of Academic Warning; or

b. student has received a final course grade of F; or
c. student has not satisfied stated program requirements.

The Dean (or Dean’s designee) shall provide the student, SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) with written notification of Academic Probation, indicating all related conditions and specifying any mandatory remedial procedures. The Academic Probation action shall appear on the student’s academic record. Any student placed on Academic Probation shall meet with the Dean or Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee), to discuss his/her status and accompanying conditions. Failure to meet the specific conditions of Academic Probation may result in action, which includes, but is not limited to a recommendation of repeating the year or academic expulsion.

4. Terms for Removal from Academic Probation

Removal from probationary status while attending the UNLV SDM will occur upon a student's successful completion of all prescribed conditions delineated in the formal, written notification of probation for unsatisfactory performance. The course director(s)/Program Director responsible for supervising the student during the probationary period will provide the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) with written notification of satisfactory completion of the conditions established for the specific academic probation. Upon receipt of this notification the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) will notify the Dean (or Dean’s designee) of a student’s successful completion of the conditions of Academic Probation. The Dean (or Dean’s designee) will inform the student of his/her removal from probationary status in writing. The student remains on Academic Probation until this notice is received.

5. Mandated Repeat of Course or Academic Year

A recommendation for repeat of course or academic year may be made to the Dean by the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) when a student fails to meet the conditions of Academic Warning or Academic Probation, but is not recommended for Academic Expulsion. The Dean (or Dean’s designee) shall provide the student, SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) with written notification indicating all conditions of the action. Any student recommended for Repeating the Year shall meet with the Dean (or Dean's designee) to discuss the action. Additional grounds for repeating the year include, but are not limited to:

a. failure to satisfactorily pass all required courses (for post-doctorate students failure to satisfactorily pass all required courses with an acceptable GPA); or

b. failure to meet the conditions of Academic Probation or Academic Warning; or
c. failure to pass National Board Dental Examination;

d. failure to satisfy stated program requirements.

e. failure to satisfactorily complete the requirements of Repeating the Year normally shall result in a recommendation for Academic Expulsion.

6. Suspension

a. Disciplinary Suspension

Violation of the UNLV Student Conduct Code or UNLV SDM policies and procedures may lead to the termination of student status for a specified academic term or terms with reinstatement thereafter. The student will be notified of the suspension in a written notice. Recommendations for academic suspension may be initiated by, but not limited to academic faculty of the UNLV SDM to the Dean for disciplinary reasons.

The official transcript of the student shall be marked “Disciplinary Suspension Effective, Date to Date.” After the suspension period has elapsed, the student will be placed on disciplinary probation for a period of time that is equal to the amount of time that the student was suspended. At the end of the successful probationary interval, the student will be classified as being in “good standing” provided that no further UNLV Student Conduct Code violations or violation of UNLV SDM policies and procedures have occurred.

b. Academic Suspension

Academic Suspension is the result of unsatisfactory performance as deemed by SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) and approved by the Dean. It entails involuntary removal from the UNLV SDM or from the regular curriculum for a specified period of time, and continues until stipulated conditions are met.

Any consideration for reinstatement requires that any imposed conditions be met and that the student request reinstatement in writing to the Dean not less than forty-five (45) calendar days preceding the start of the academic year or as previously specified in writing in the student’s terms and conditions of suspension. A recommendation for Academic Suspension and the conditions of Academic Suspension shall be submitted by the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) to the Dean for review and action. The Dean or Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) shall:

i. Meet with the student to discuss the recommendations for
Academic Suspension, conditions for reinstatement, including duration of Academic Suspension, status of student if duration period is exceeded, remedial procedures, if any, and re-entering level into the program.

ii. Provide the student with written notification of the Academic Suspension and set forth specific conditions.

Grounds for Academic Suspension include, but are not limited to:

i. failure to satisfactorily pass all required courses; or

ii. failure to meet the conditions of Academic Probation or Academic Warning; or

iii. failure to pass NBDE; or

iv. failure to meet the conditions related to an authorized leave of absence;

v. failure to satisfy stated program requirements.

7. Academic Expulsion (Dismissal)

Title 2, Chapter 11 of the NSHE Code provides that “system institutions, professional schools and individual programs may establish written policies, procedures and sanctions for program dismissals that may be used in lieu of the procedures of Title 2, Chapter 11 of the NSHE Code, subject to prior review by Office of General Counsel and approval by the President of UNLV.” In accordance with the authorization granted in the Code, UNLV SDM has adopted written policies, procedures and sanctions for program dismissal of students in their dental programs which are outlined below and in the Academic Appeals Process, section D. This policy does not replace or supplant any section of the BOR Handbook other than BOR Handbook Title 2, Chapter 11.

With regard to Academic Expulsion from UNLV SDM for an indefinite period of time, any consideration for reinstatement requires that any imposed conditions be successfully completed and that the student reapply for admission to UNLV SDM in accordance with the rules and regulations pertaining to the normal admissions process of the school.

A recommendation for Academic Expulsion shall be submitted by the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) to the Dean for review and action. The Dean or Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) shall:
a. meet with the student to discuss the recommendation for Academic Expulsion and conditions for reinstatement.

b. provide the student with written notification of the Academic Expulsion indicating related conditions.

Grounds for Academic Expulsion include, but are not limited to:

a. failure to satisfactorily pass all required courses;

b. failure to satisfactorily complete the requirements of a school year within two (2) consecutive academic years;

c. failure to complete the DMD Program Degree requirements within six (6) academic years of initial matriculation;

d. failure to meet the conditions of Academic Probation or Academic Warning;

e. failure to meet the conditions of Special Program Status;

f. failure to successfully Repeat the Year;

g. unauthorized withdrawal from a course or the program;

h. failure to satisfactorily complete the first two (2) years of the DMD Program within three (3) academic years;

i. failure to satisfactorily complete the last two (2) years of the DMD Program within three (3) academic years;

j. failure to meet conditions of Academic Suspension.

k. Exceeding the maximum number of courses that may be remediated.

8. UNLV Health Withdrawal Policy

a. Involuntary Health Withdrawal. See Appendix B

b. Voluntary Health Withdrawal: UNLV SDM follows the University Voluntary Health Withdrawal Policy (See Appendix B). Forms for submitting a Request for Voluntary Health Withdrawal are also included with Appendix B. Also See Section E. Voluntary Academic Status Modifications.
c. Emergency Removal Clause

As set forth in the UNLV Student Conduct Code, when there is cause to believe a student endangers the health, safety, or welfare of the University community or its property, the Vice-President for Student Affairs or his/her designee may order the immediate removal of a student, with accompanying prohibition from University property and activities, for an interim period pending a conduct “show cause” hearing. The Office of Student Conduct shall conduct a “show cause” hearing within seventy-two (72) hours of this emergency removal, or on the earliest college working day thereafter identified by the student. The sole purpose of the show cause hearing is to make a recommendation as to whether the student may return to the campus pending conclusion of the conduct process. Simultaneous with such removal, the Vice-President for Student Affairs or his/her designee shall refer the charges to the Office of Student Conduct, who shall process such charges in the manner and within the time limits required by the UNLV Student Conduct Code.

9. Administrative Drops

If a student does not comply with UNLV SDM policies and/or course requirements, or obstructs the functioning of the class, the instructor may initiate an administrative drop as outlined in the UNLV Catalog, Administrative Drop Procedures. Additional information about this policy can be found at: http://catalog.unlv.edu/content.php?catoid=4&navoid=164

D. ACADEMIC APPEALS PROCESS

All students have the right to appeal a grade or academic decision made by a faculty member, or the Associate Dean for Academic Affairs.

1. Academic Appeals Committee (AAC)

AAC is responsible for hearing appeals relating any academic decision made by the SPC, Associate Dean for Academic Affairs and/or AEC. The AAC shall consist of three (3) faculty members appointed by the Dean (or Dean’s designee). The Dean (or Dean’s designee) will appoint the chair of the AAC. The Associate Dean for Academic Affairs (or designee) and Assistant Dean for Admissions and Student Affairs (or designee) will be ex-officio members.

2. Appeal of Final Course Grade

Students who believe that a grade or academic decision rendered by a faculty member is not representative of their performance or academic policies were violated, may elect to appeal the grade or academic decision rendered by a faculty member. Please note calculations of timeframes are made in calendar days which exclude recess or holidays.
An appeal must be in writing. It must be made to the faculty member by the student no later than five (5) calendar days (excluding recess or holidays) after the grades are posted by the UNLV Registrar’s Office. The faculty member must respond to the student’s appeal in writing within five (5) calendar days (excluding recess or holidays) after receipt of appeal.

If the faculty member determines that the original grade (or academic decision) is correct, the student may then appeal to the faculty member’s department chair. The student must appeal in writing to the department chair or Program Director (as applicable) within five (5) calendar days (excluding recess or holidays) after receiving the faculty member’s decision. The department chair/Program Director (as applicable) must respond to the student’s appeal in writing within five (5) calendar days (excluding recess or holidays).

The student may appeal the department chair/Program Director’s decision in writing to the SDM AAC through the Dean’s Office. An appeal to the AAC must be initiated no later than five (5) calendar days (excluding recess or holidays) after receiving the department chair/Program Director’s decision. The AAC should prepare a recommendation, in writing, in relation to the student’s appeal, which must be forwarded to the Dean within ten (10) calendar days (excluding recess or holidays) after receiving the appeal. The Dean will review the recommendation and make a final decision regarding the student’s appeal. The Dean may approve, amend/modify or reject the recommendation of the AAC. The Dean will make a final decision and notify the student within five calendar days after receiving the AAC’s recommendation (excluding recess or holidays). The decision of the Dean in all review matters shall be final.

3. Appeal of Mandated Repeat of Course or Academic Year, Academic Suspension, Academic Expulsion (Dismissal)

In these situations where a student does not meet the criteria for satisfactory progress, the Dean (or Dean’s designee) will review all evidence and recommendations from the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee), meet with the student and then issue a written decision. A student may appeal the Dean’s (or Dean’s designee’s) decision to place a student on mandated repeat of course or academic year, disciplinary or academic suspension or academic expulsion (dismissal).

Pre-doctoral student appeals must be made in writing through the Dean’s Office to the AAC within five (5) calendar days (excluding recess or holidays) of receiving the written decision from the Dean (or Dean’s designee). During the appeal process the student will be removed from all classes and clinic participation. The AAC will review all evidence and make a recommendation to the Dean within ten (10) calendar days (excluding recess or holidays) from the date of receiving the student’s appeal. The Dean will review the recommendation from the AAC. The Dean may approve, amend/modify or reject the recommendation of the AAC. The Dean will make a final decision and notify the student within five calendar days (excluding recess or holidays). The decision of the
Dean in all review matters shall be final.

Postdoctoral students appeals must be made in writing through the Dean’s Office to the AAC within five (5) calendar days (excluding recess or holidays) of receiving the written decision from the Dean (or Dean’s designee). During the appeals process the student will be removed from all classes and clinic participation. The AAC will review all evidence and make a recommendation to the Dean within ten (10) calendar days (excluding recess or holidays) from the date of receiving the student’s appeal. The Dean may approve, amend/modify or adopt the recommendation of the AAC. The Dean will make a final decision and notify the student within five calendar days (excluding recess or holidays). The decision of the Dean in all review matters shall be final.

4. Academic Appeals Hearing

During any academic appeal hearing, the student may have one advisor present (e.g. an attorney, family member, fellow student, or faculty member). The student has the right to be assisted by any advisor they choose, at their own expense. The student is responsible for presenting his/her own information, and therefore, an advisor is NOT permitted to speak on behalf of the student (e.g., the advisor is not allowed to be both advisor and witness on their behalf). If a student requests an advisor, the student will be required to complete a FERPA Privacy Waiver and the advisor may be required to sign a confidentiality agreement.

5. Extension of Time Limits

It is intended that the all-academic appeals be addressed quickly, and where reasonably possible the time limits in this process should be met. However, there may be circumstances where more time is required to conduct a thorough review, accordingly, the AAC conducting the review or the appealing student may request an extension of the time limits. Any extensions must be in writing and signed by the student and the Associate Dean of Academic Affairs (or designee).

E. VOLUNTARY ACADEMIC STATUS MODIFICATIONS

1. Program withdrawal

Students who seek to voluntarily withdraw from UNLV SDM must submit a written letter to the Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee) stating the reasons for the decision to withdraw. This should be accomplished before the 10th week of classes has been completed to be eligible for reinstatement. Students who withdraw will receive a refund based on the tuition refund schedule in UNLV’s Bulletin and Registration materials. UNLV and Student Activity fees are not refundable.

2. Leave of absence, voluntary
Any leave of absence, granted for students who desire to voluntarily leave the program for a specified period of time, shall be made in writing to the Dean of SDM:

a. accompanied by supporting reasons;

b. specific as to the desired date of effect and duration;

c. accompanied by evidence that all obligations to SDM and UNLV have been satisfied.

After reviewing the above documentation, the Dean has the discretion to grant or deny the petition. A voluntary leave of absence approved by the Dean shall be accompanied by a letter stating the following:

a. duration of approved leave of absence;

b. specific conditions for reinstatement and re-entering level into the program (following consultation with the SPC/AEC [as applicable]);

c. status of the student if the approved voluntary leave of absence duration is exceeded.

d. for postdoctoral students, any and all missed time and required work must be reconciled with the Program Director.

3. Reinstatement after withdrawal or absence

UNLV SDM may reinstate any matriculated student with an authorized withdrawal after petition for reinstatement within the period of withdrawal. A written petition, stating the reason(s) for requested reinstatement, shall be submitted to the Dean. The Dean may request a recommendation from the SPC/AEC and Associate Dean for Academic Affairs/Associate Dean for Advanced Education (or Dean’s designee).

A condition of reinstatement may include the student repeating the entire academic year. If permission is granted to repeat all courses previous grades will not be removed from the transcript. New grades will be noted on the transcript as repeat work. Notification of reinstatement shall include conditions and class standing.

Any and all missed time and required course work must be made up in accordance with program requirements.
III: UNLV SCHOOL OF DENTAL MEDICINE STUDENT CODE OF PROFESSIONAL RESPONSIBILITY

A. STUDENT CODE OF HONOR AND PROFESSIONAL RESPONSIBILITY (the “Honor Code”)

1. Introduction and General Information

The professional development of dental students is an essential part of dental education. Students are expected to meet the UNLV SDM standards of professional behavior as part of their professional development. The UNLV SDM Honor Code outlines the expectations and consequences for lapses in judgment.

UNLV SDM complies with the UNLV Student Conduct Code and the UNLV Student Academic Misconduct Policy as published and revised by the University. Both are available on the UNLV WebCampus in the DEN-INFO folder and can also be viewed on the UNLV Student Life web page, Office of Student Conduct at http://studentconduct.unlv.conduct/student-conduct-code.html and http://studentconduct.unlv.misconduct/policy.html

These are also located in the Appendices of this Manual. UNLV SDM is dedicated to providing an environment for learning to every dental student. As with this Manual, the Honor Code and above listed UNLV policies apply to all students, pre-doctoral, postdoctoral or any individual enrolled at the UNLV SDM for academic credit. In responding to this dedication, the SDM demands a high level of scholarly behavior, academic honesty and professional integrity on the part of students, faculty, staff, and administrators. All students are expected to instill and promote the qualities and characteristics contained within the Dentist’s Pledge, which each student makes upon matriculation to dental school.

No form of academic dishonesty is acceptable. While maintenance of an atmosphere of academic integrity is the responsibility of all, the faculty is principally responsible for enforcement of these standards. Academic dishonesty includes any act that violates the academic processes of the university. These acts include, but are not limited to, cheating on an examination, stealing examination questions, substituting one person for another at an examination, falsifying data, destroying or tampering with or stealing a computer program or file, and plagiarizing (using as one’s own the ideas or writings of another).

As aspiring health professionals or as health professionals, students assume new obligations and responsibilities upon their enrollment into the programs at the SDM. Stringent professional constraints are required of students, faculty and staff in the dental school setting and in the community. Students at UNLV SDM must comply with the Honor Code reproduced in its entirety in this Manual. Additional requirements of students in their professional conduct follow (See Honor Code, III. B. Professional Conduct).
2. Philosophy

Acceptance into UNLV SDM represents much more than just admission to the study of an intellectual and scientific discipline. It represents the first step toward full participation in a profession entrusted with the health of the public. The privilege of admission comes with a unique set of responsibilities not only to fellow students, but to SDM, to the dental profession, and to the public. The dental profession demands the highest degree of trustworthiness, honesty, and integrity. As future members of the profession, students of SDM are bound to observe principles that reflect the same high standards that govern the practice of dentistry. Students who abide by long-established principles of honor and integrity will not have their conduct questioned. This Honor Code sets forth conduct that is unacceptable, and therefore, prohibited. This Honor Code establishes standards for student professional responsibility. The standards of conduct in this Honor Code are in addition to the standards set forth in the UNLV Student Conduct Code (SCC), UNLV Student Academic Misconduct Policy, and the UNLV SDM Student Manual. Violations of this Honor Code will be subject to the procedures and sanctions of this Honor Code, as set forth below.

SDM is dedicated to promoting an academic community where each student can obtain an outstanding education. To that end, this Honor Code is intended to foster an atmosphere of professionalism, trust, mutual respect, and accountability. Upon admission, all students become part of SDM community and share in its mission. Accordingly, by matriculating at SDM, students accept the responsibilities set forth by this Honor Code, including the responsibility to participate in its implementation. As described below, the failure to uphold these responsibilities violates the terms on which the community is based and may result in disciplinary action. Depending on the conduct, action or occurrence, a referral may be made to the SDM Honor Council for alleged Honor Code violation(s) and/or to the UNLV Student Conduct Code Office for alleged Conduct Code or Academic Misconduct policy violations.

3. Honor Council Authority

The Honor Council is a committee that is comprised of students and faculty representatives charged with the responsibility of ensuring a fair disciplinary process for students. There shall be one Honor Council, which is the established committee to receive, review, and process referrals relating to Honor Code violation allegations.

Composition of the Honor Council

An established Honor Council shall consist of four (4) faculty members, four (4) students serving as regular members, and four (4) additional students serving as alternates for a total of eight (8) students (or in the case of Advanced Education situations, a student representative from each advanced education program), and the Honor Council Chair. The four (4) faculty members, which includes one faculty member representing the Advanced Education programs, and the Honor Council Chair, are appointed by the Dean (or Dean’s designee). The Honor Council Chair shall preside over all honor council meetings. The faculty membership and Chair will remain the same
regardless of whether the allegations relate to a pre-doctoral or postdoctoral student, however the student membership will change accordingly.

The pre-doctoral student membership is made up of one (1) student member who is voted on by each class which would make up the four (4) regular members. There would also be one (1) alternate student member who is voted on by each class [second highest number of votes], which would make up the four (4) alternate members. All eight (8) will attend the first meeting of any particular incident but only the four (4) regular members would serve unless there was a conflict in which an alternate would be selected to sit in place of the regular member with the conflict. Should any of the four (4) regular members have a conflict of interest, they will be replaced by their alternate for the remainder of that incident. Students will be voted on at the beginning of the DS1 year and will remain on the Honor Council until such time as they graduate or resign their position. The postdoctoral student membership will be comprised of one (1) representative from each Advanced Education program [with no less than a total of four (4) postdoctoral students] and will be appointed by the Associate Dean of Advanced Education (or designee).

**Substitution of Pre-doctoral Honor Council Members**

Where circumstances warrant, the Dean (or Dean’s designee) may replace a UNLV faculty member by appointing a substitute member of SDM faculty or appointing a UNLV faculty member from outside the SDM. During the period from spring graduation until such time as the new DS1 class begins in the fall semester, should the situation arise, the Associate Dean for Academic Affairs (or Dean’s designee) will appoint two (2) student members (one (1) regular member and one (1) alternate member) to sit on the Honor Council. These students may be selected from either the previous graduating class or the upcoming DS4 class.

**Voting**

Each of the four (4) faculty members on the Honor Council has voting rights. Each of the four (4) regular student members has voting rights. In the event students from the Advanced Education program serve as members of the Honor Council, each postdoctoral student will have one (1) vote. The Honor Council Chair is a non-voting member.

**Advisor(s)**

The Associate Dean for Academic Affairs (or Dean’s designee) serves as an advisor to the Honor Council and is not a voting member. In the event an allegation involves a student from an Advanced Education program, the Associate Dean for Advanced Education (or Dean’s designee) serves as an advisor to the Honor Council and is not a voting member. Additionally, the Assistant Dean for Admissions and Student Affairs (or Dean’s designee) serves as an advisor to the student(s) and is not a voting member.

**Honor Council Chair:** The Honor Council Chair will send out notices in accordance with the Honor Council Procedure, will gather information relevant to any complaint indicating that a Honor Code violation may have occurred, and will coordinate and run the meetings.
4. **Conduct Prohibited**

The UNLV SCC and Academic Misconduct Policy set forth prohibited conduct, which may result in disciplinary action, including expulsion. Additionally, the following conduct is prohibited and may result in disciplinary action, including expulsion, from SDM:

- Academic misconduct;
- Misrepresentation;
- Wrongful use or procurement of University property, services, or information;
- Mistreatment of patients;
- Unlawful conduct; or
- Failure to report violations of this Honor Code;
- Unprofessional behavior;
- Unlawful practice of dentistry according to the Nevada State Board of Dental Examiners regulations;
- Failure to abide by UNLV SDM Clinical policies, procedures or safety protocols. This includes, but is not limited to failure to follow and abide by SDM Clinical policies, procedures or safety protocols that are intended to promote the health and safety of individuals within the clinics.

**a. Academic misconduct includes, but is not limited to:**

i. **Cheating.** Cheating is an act of fraud or deception by which a student gains or attempts to gain a benefit or an advantage, or attempts to provide a benefit or advantage to another student; or

ii. **Plagiarism.** Plagiarism is copying the words or ideas of another and representing them to be one’s own. Plagiarism can occur even though the student did not intend to plagiarize the words of another.

NOTE: Please refer to UNLV Student Conduct Code and UNLV Student Academic Misconduct Policy for additional violations of Academic Misconduct. These documents are included in the Manual (Appendix D and Appendix E). The UNLV Student Conduct Code and Academic Misconduct Policy can be accessed online: [http://studentconduct.unlv.misconduct/policy.html](http://studentconduct.unlv.misconduct/policy.html)
b. Misrepresentation includes, but is not limited to:

i. Furnishing material information in SDM application process that the student knows to be false;

ii. Falsely representing one’s qualifications on a resume, in an interview, or in an application for employment or subsequent academic studies;

iii. Altering patient records, transcripts, or other university documents;

iv. Falsely signing a faculty member’s name or another student’s name;

v. Falsely authorizing an entry in the patient’s record through use of a faculty’s name or authorization code;

vi. Knowingly making a false accusation that a student committed acts that may be in violation of the Honor Code, or

vii. Any misrepresentation by which the student gains or attempts to gain an unfair advantage from the university, faculty, students, or staff.

c. Wrongful use or procurement of goods, services, or information includes, but is not limited to:

i. Stealing, destroying, or damaging university property and/or the property of other students, including laboratory projects, clinical instruments, or supplies; or

ii. Unauthorized use of on-line resources.

d. Mistreatment of patients. This can include, but is not limited to: knowingly and deliberately missing an assigned clinic session, treating patients outside of regularly-scheduled clinic times, knowingly and deliberately delaying a patient’s treatment without reasonable cause, or patient abandonment.

e. Unlawful conduct. This includes, but is not limited to the commission of any felony, gross misdemeanor, or misdemeanor (except for misdemeanor traffic violations) whether defined by federal, state, or local law. Such conduct may result in disciplinary action. All students have an obligation to disclose to the
Office of the Assistant Dean for Admissions and Student Affairs any conviction resulting from the commission of a felony, gross misdemeanor, or misdemeanor, as defined by federal, state, or local law.

f. Reporting violations of this Honor Code. Students should report incidents they reasonably believe violate this Honor Code.

g. Unprofessional behavior. This includes, but is not limited to behavior that is not consistent with the high standards of the dental profession. Any behavior that reflects poorly on the SDM, University or the dental profession will be considered unprofessional.

h. Unlawful practice of dentistry according to the Nevada State Board of Dental Examiners regulations.

i. Failure to abide by UNLV SDM Clinical policies, procedures or safety protocols. This includes, but is not limited to failure to follow and abide by SDM Clinical policies, procedures, or safety that are intended to promote the health and safety of individuals within the clinics.

5. Honor Code Complaint Process

a. Reporting Honor Code Complaints

Any person (including students, faculty, staff, and/or patients of SDM) knowing of an incident that may constitute a violation of the Honor Code and/or the UNLV Student Conduct Code, must report the incident to a Honor Council Faculty Representative, the Associate Dean for Academic Affairs (or Dean’s designee), the Assistant Dean for Admissions and Student Affairs, Program Director, or any member of the SDM faculty. Any SDM faculty who receive reports of potential violations must report them to the Associate Dean for Academic Affairs (or Dean’s designee). Reports must be made as follows:

i. The complaint must be in writing and dated;

ii. It must be clear that the complaint was filed by the complainant. If necessary, follow-up documentation may be requested before a complaint is acted upon;

iii. To the extent possible, the date, time, place, name of person(s) involved and the circumstances of the alleged violation should be specified; and

iv. The name(s) of any person(s) who may have witnessed the alleged prohibited conduct should be listed.

v. Once the complaint is submitted in writing, the person filing the complaint should be cautioned from speaking about the incident to
students, faculty, staff, and/or patients until such time as a disposition is rendered regarding the complaint, other than to members of the Honor Council in the course of the investigation or when testifying at an Honor Council hearing.

b. Investigation of Honor Code Complaints

When the Associate Dean for Academic Affairs (or Dean’s designee) receives a complaint of an incident that may constitute a violation of the Honor Code, he/she will immediately refer the matter to the Honor Council Chair in order for him/her to schedule an initial meeting of the Honor Council in order to review the complaint.

c. Review of Honor Code Complaints

Upon receipt of a written complaint, the Honor Council Chair (or Dean’s designee) will convene a meeting of the Honor Council in order to review the complaint. This “initial meeting” will be convened within five (5) calendar days (excluding recess or holidays) of receipt of the complaint.

At the initial meeting, the Honor Council will review the complaint. If necessary, the Honor Council will select a Vice-Chair from among the student members as a student investigator who may assist the Honor Council Chair. If necessary, the Honor Council Chair will be responsible for scheduling subsequent meetings, notifications, formal hearings, and any written communication(s), if applicable.

During the initial meeting, copies of the complaint will be provided to members of the Honor Council. The Honor Council will review the complaint and determine if an investigation is necessary. If an investigation is deemed not necessary, the Honor Council, via the Honor Council Chair, shall prepare its recommendation to the Dean, in writing. If necessary, an election for the Vice-Chair position from among the student members will be conducted. This individual will serve in that capacity through the disposition of the complaint. The Honor Council Chair will notify the student that a complaint has been submitted and provide a copy of the complaint to the student.

6. Records/Documents

Complaints or paperwork distributed to the Honor Council members must be maintained as confidential records. The Chair of the Honor Council shall be charged with maintaining records/copies of any documentation related to the process.

7. Notice of the Honor Code Complaint

The Honor Council Chair shall state in writing the grounds upon which the complaint is
based and written notice of such complaint will be provided to the student within three (3) calendar days (excluding recess and holidays) of the Honor Council’s initial meeting. The Honor Council Chair will work with the Office for Student Affairs to ensure written notice is provided to the student in accordance with the above time frame. The student will be required to sign for the written notification. If the student is unavailable to sign, a copy will be sent via certified mail to the most current mailing address on file with the school. The student will be advised that an administrative hold may be placed on his/her academic records pending investigation and resolution of the complaint. The written notice will describe the alleged violation(s), and include any applicable reference to the SDM Honor Code and/or UNLV SCC and/or UNLV Academic Misconduct Policy.

8. **Investigation of Honor Code Complaint**

The Honor Council Chair (with participation from the student Vice-Chair) will review the case and make recommendations to the Honor Council regarding individuals that he/she may need to speak with and/or documentation that he/she may seek to review in order to gather information relevant to the allegations in the complaint. The Honor Council Chair has the authority to contact and meet with any persons believed to have information relevant to the complaint and encourage them to discuss the allegations in the complaint.

During the information gathering process, a “No Contact Order” may be requested or required if it is determined by the Honor Council, the Dean (or Dean’s designee), or Associate Dean for Academic Affairs (or Dean’s designee) that it is in the best interest of the investigation or protection of individuals involved. Failure to comply with a “No Contact Order” may result in further disciplinary proceedings and may result in a referral to law enforcement or external legal proceedings.

The Honor Council will have ten (10) calendar days (excluding recess and holidays) from the date of their initial meeting to conduct their investigation relating to allegations in the complaint. Prior to the conclusion of the ten (10) days (excluding recess and holidays), the Honor Council may convene to evaluate the information obtained during the investigation in order to determine whether a formal hearing is or is not required. If the Honor Council determines a formal hearing is required, the formal hearing process set forth below shall apply. If the Honor Council determines a formal hearing is not required, the Honor Council Chair shall prepare a recommendation to the Dean setting forth the reasons a formal hearing is not required. All documentation related to the investigation should be kept in a secure location until perpetuity.

9. **Notice of the Hearing**

If the Honor Council decides a formal hearing is warranted, the Honor Council Chair shall prepare and provide a written notice to the Associate Dean for Academic Affairs (or Dean’s designee) and the student, a minimum of ten (10) calendar days (excluding recess and holidays) prior to a hearing. The notice will contain the following:
i. The date, time, and place of the hearing

ii. Specific misconduct charged;

iii. Name of complainant;

iv. Specification to the extent possible, of the time, place, person(s) involved and circumstances of alleged prohibited conduct and names of witnesses to the alleged prohibited conduct;

v. The student’s right to bring witnesses and provide documentary evidence at the hearing;

vi. The student’s right to examine evidence obtained during the investigation.

vii. The student’s rights to have one advisor present (e.g. an attorney, family member, fellow student, or faculty member). The complainant and the charged student have the right to be assisted by any advisor they choose, at their own expense. The Honor Council Chair and the charged student are each responsible for presenting information including witnesses and evidence in relation to the alleged Honor Code violations. Advisors are NOT permitted to speak on behalf of either the Honor Council Chair or the charged student (e.g., they are not allowed to be both advisor and witness). If a student requests an advisor, the student will be required to complete a FERPA Privacy Waiver and the advisor may be required to sign a confidentiality agreement.

viii. The student’s right to question any witness called.

ix. The date by which the Honor Council Chair and the student shall furnish to each other a list of witnesses who will be called to testify and documents that may be introduced at the hearing. This exchange shall occur at least five (5) calendar days (excluding recess and holidays) prior to the hearing.

Note: Notices shall be either delivered directly to the person charged or sent by certified or registered mail. Notices sent by mail are considered delivered when sent, provided that three (3) additional calendar days (excluding recess and holidays) shall be added to the ten (10) day time (excluding recess and holidays) period set forth for minimum notice.

10. Ex Parte Contacts

The members of the Honor Council shall not have any ex parte communications with decision makers (oral or written, off-the record communications to any potential decision makers (e.g. Dean, UNLV Vice-President of Student Affairs, UNLV Appeal Panel members) that is directed to influence or attempts to influence the merits or outcome of the case). This does not include scheduling and status inquiries or requests for information that are procedural in nature regarding the matter before the Honor
11. Hearings

The Honor Council Chair will preside over the hearing. Unless the Honor Council Chair decides that a different procedure is required, the Honor Council Chair shall present a summary of the evidence supporting the allegations first, after which the charged student(s) will be provided the opportunity to present a summary of his/her side of the case. Thereafter, witnesses for both sides may be called after the student has had an opportunity to present his/her case. The Honor Council Chair may present individual witnesses and/or documentation to support the allegations. The students also have an opportunity to present individual witnesses and/or documentation in support of his/her case. The members of the Honor Council, the Associate Dean for Academic Affairs (or Dean’s designee), the Assistant Dean for Admissions and Student Affairs (or Dean’s designee), and the student shall have an opportunity to examine all witnesses and any evidence that is presented. In situations where the complainant is present as a witness, the student will submit his/her questions of the complainant in writing to the Honor Council for their consideration. The Honor Council will evaluate the proposed questions and make a determination as to whether they feel the question is relevant and/or if they need to ask the question or some form of the question.

The Honor Council will establish before the beginning of the hearing the time limit for the student and the witnesses. The Honor Council may consider all evidence that has probative value. All findings of fact, recommendations, and decisions must be based solely on the information made available for use at the hearing. This includes, but is not limited to, all information made available to the charged student as part of the Honor Code hearing file.

A single hearing may be held for more than one person charged in cases arising out of a single or multiple occurrences. The Associate Dean for Academic Affairs (or Dean’s designee) makes such a determination, subject to review by the Dean (or Dean’s designee). However, each accused student retains the right to have his/her case heard individually.

A recording will be made of the hearing for the purpose of review by any Appeals Panel. The recording shall be the property of UNLV and will be maintained as such for a period of two (2) calendar years or longer if the matter is before the courts. Upon the written request of the charged student, a copy of the tape shall be made available to the student, at the student’s expense, by the Associate Dean for Academic Affairs (or Dean’s designee), within ten (10) calendar days (excluding recess or holidays) of the request subject to and in accordance with FERPA. Confidentiality of recordings from closed hearings shall be maintained by all parties and their representatives. All hearings are closed unless the student charged requests an open hearing and such request is approved by the Dean (or Dean’s designee). Relaxed evidentiary standards apply in all hearings, as they are not legal proceedings.
12. **Standard of Proof**

At the conclusion of the hearing proceedings, the Honor Council shall deliberate and consider whether there is sufficient evidence to determine whether a student is or is not responsible for the alleged Honor Code violations. The vote will be conducted by secret ballot. The Honor Council may affirm by majority vote that the student is or is not responsible for Honor Code violations on the basis of whether it is more likely than not that the student violated provisions of the Honor Code.

13. **Written Recommendation**

The Honor Council, via the Honor Council Chair, shall prepare a written decision, which may include any dissenting views. All formal hearings conducted by the Honor Council require a majority vote to find a student responsible for violating the Honor Code. The Honor Council shall furnish its written recommendation to the Dean (or Dean’s designee) within five (5) calendar days (excluding recess or holidays) of the conclusion of the formal hearing. The Honor Council’s recommendation may include a recommendation regarding possible sanctions but it is not mandatory.

14. **Final Decision**

The Dean (or Dean’s designee) shall review and consider the Honor Council’s recommendation. The Dean may uphold or modify/amend the Honor Council’s decision. The Dean (or Dean’s designee) may request additional information in relation to the Honor Council’s decision. If a recommendation finding a student responsible of Honor Code violations is upheld the Dean (or Dean’s designee) will determine the applicable sanctions. If the Dean (or Dean’s designee) decides to amend/modify the decision, he/she shall inform the Honor Council of any modification. If the Dean requests additional information in relation to the Honor Council’s decision, the Dean will notify the Honor Council in writing within five (5) calendar days (excluding recess and holidays) and the Honor Council shall have five (5) calendar days (excluding recess and holidays) within which to provide the additional requested information to the Dean. The Dean (or Dean’s designee) will notify the student, in writing, of the final decision and sanction(s) within five (5) calendar days (excluding recess or holidays) of receiving the Honor Council’s recommended decision or from the date the additional requested information was received by the Dean, whichever is later. If there is no appeal, the decision of the Dean (or Dean’s designee) shall be final.

15. **Appeal Rights**

The Appeals rights and procedures afforded in the UNLV Student Conduct Code shall apply.

a. The charged student found responsible for a violation of the *SDM Honor Code* or *UNLV SCC* has the right to appeal that decision and any sanctions imposed to the Vice President for Student Affairs or his/her designee. A request for appeal must be filed within five (5) calendar days (excluding recess
and holidays) from the charged student’s receipt of findings;

b. The right of appeal is the right to seek review of a formal hearing decision or other action by a higher University authority; it is not a right to a new hearing;

c. To prepare the appeal request, the charged student and the advisor have the right to review the student’s Honor Code or judicial hearing file, including any recording of the hearing; and

d. Any sanction imposed as a result of a hearing shall not become effective during the five (5) calendar days (excluding recess and holidays) during which an appeal may be filed, or until any such appeal has been decided, except that the Vice President for Student Life or his/her designee has the authority, in his/her absolute discretion that extenuating circumstances exist, to immediately impose the sanction.

16. Extension of Time Limits

It is intended that all Honor Code complaints be investigated and addressed quickly, and where reasonably possible the time limits in this process should be met. However, there may be circumstances where more time is required to conduct a thorough investigation, including but not limited to the absence of or inability to contact a complainant, applicant, student, or a necessary witness. Accordingly, the Honor Council conducting the investigation or the charged student may request an extension of the time limits if this does not unfairly interfere with the ability of the student to respond to the allegations. Any extensions must be in writing and signed by the student and the Associate Dean of Academic Affairs (or designee).

17. Sanctions

Depending upon the severity of the violation, and whether a repeat or multiple violations are involved, sanctions for Honor Code violations may be imposed by the Dean (or Dean’s designee). In addition to the sanctions identified below, and in the University’s sole discretion, a student may be required to perform restitution service, to complete counseling or other specialized treatment or support services, and/or be required to participate in an activity or program whose purpose is to redirect behavior.

Any violation of the SDM Honor Code or UNLV Student Conduct Code that is motivated by race, ethnicity, religion, gender, sexual orientation, age, creed, national origin, disability, or veteran status may subject the student to the imposition of a sanction more severe than would be imposed in the absence of such motivation.

Failure to comply with any such sanction or requirements will constitute an additional violation of the SDM Honor Code or UNLV Student Conduct Code, and may result in additional and increased sanctions in accordance with the procedures set forth in SDM Honor Code or UNLV Student Conduct Code. The sanctions for an Honor Code violation
which may be imposed in any order or combination include but are not limited to:

a. **Warning.** Notice, oral or written, that continued or repeated violations of SDM or UNLV policies and/or regulations may be cause for further conduct action. These actions would normally be in the form of censure, loss of privileges, exclusion from activities, probation, suspension, or expulsion.

b. **Restrictions, Loss of Privileges, and Exclusion from SDM and UNLV Activities.** Exclusion/restriction from participation in privileges and extracurricular activities or holding office. Loss of use privileges for designated University facilities, denial of the use of a vehicle on campus, and/or other restrictions consistent with the violation committed.

c. **Restitution Payment or Service.** The requirement to provide restoration/restitution for a loss due to violations including, but not limited to: defacement, damage, fraud, theft, and/or misappropriation of property. Restitution may be imposed either exclusively or in combination with other sanctions. Restitution may take the form of monetary payment or appropriate services to repair or otherwise compensate for damages.

d. **Conduct Probation.** The terms of probation will be determined at the time the probation is imposed. Probation may include exclusion from participation in privileges or extracurricular activities. The student placed on probation shall be notified in writing that the commission of prohibited acts will lead to additional and/or increased conduct sanctions.

e. **Deferred Suspension.** If a student is found in any further violation(s) of the SDM Honor Code or UNLV Student Conduct Code for the duration of a deferred suspension period, the suspension takes effect immediately. Additional SDM Honor Code sanctions appropriate to the new violation also may be taken. A student that has been issued a sanction of Deferred Suspension is deemed “not in good standing” involving conduct with the University.

f. **Disciplinary Conduct Suspension.** This is the temporary separation of the student from SDM or UNLV for a specified period of time and/or until specific conditions, if imposed, have been met. A disciplinarily suspended student shall not participate in any University-sponsored activity and shall be barred from all University campuses and properties. The student will be notified in writing of the suspension. The official transcript of the student shall be marked “Conduct Suspension Effective (date) to (date).” The parent(s) or legal guardian(s) of minor students shall be notified of the action. After the suspension period has
elapsed, the student will be placed on disciplinary probation for a period of time that is equal to the amount of time that the student was suspended. At the end of the probationary period and written notification by the Dean, the student will be classified as being in “good standing” provided that no further Honor Code or Student Conduct Code violations have occurred.

g. *Expulsion or Termination.* Permanent separation of the student from University. The expelled student shall not participate in any University-sponsored activity and shall be barred from all NSHE campuses and properties. The official transcript of the student shall be marked “Conduct Expulsion Effective (date).” The parent(s) or legal guardian(s) of a minor student shall be notified of the action.

h. *Required Educational/Restitution Activities.* Mandatory participation in educational activities or programs of community restitution service on campus or in the community, as approved.

i. *Administrative Conduct Hold.* A status documented in the Registrar’s official file that precludes the student from registering for classes and/or accessing official transcripts until clearance from the Associate Dean for Academic Affairs (or Dean’s designee).

j. *Intake/Assessment/Treatment Referrals.* A student may be referred to UNLV Student Counseling and Psychological Services (CAPS) to complete an intake and assessment involving alcohol, controlled substance, or other identified issues arising from a violation. In the University’s discretion, proof of participation or completion of treatment may be required. When appropriate, CAPS may refer the student to an off-campus provider for such services at the student’s expense.

k. *Academic/Misconduct Sanctions.* Potential sanctions for academic misconduct include, but are not limited to, the following, either singularly or in any combination:

   i. Academic Sanctions

      a) Resubmitting an assignment

      b) Reduction of points / letter grade for the assignment

      c) Dropping a class

      d) Reduction of points / letter grade for class

      e) Failing grade for assignment
f) Failing grade for class

ii. Conduct Sanctions
   a) Transcript notation
   b) Academic Integrity Seminar
   c) Reflection letter of understanding
   d) Disciplinary warning or probation
   e) Removal from program, school or college
   f) Suspension
   g) Expulsion
   h) Withdrawal of credit for previously accepted course or requirement

These sanctions will apply to a student in his or her capacity as a student of the SDM. Any violation of the SDM Honor Code can be referred for further and/or additional action under the UNLV Student Conduct Code.

18. Adoption and Amendment

This Honor Code and any amendments thereto become effective upon the approval of the Dean (or Dean’s designee) subject to prior review by UNLV’s legal counsel and to the approval of the UNLV President. Any person may petition to amend the SDM Honor Code. The petition shall be submitted to the Honor Council for consideration and recommendation to the students and faculty.

B. PROFESSIONAL CONDUCT

This section specifies professional behavior expected of students at UNLV SDM. This list is given as examples of expected professional behavior, but is not limited to the following:

   i. Dental students shall interact with patients, their families, visitors, faculty, staff, and peers in a courteous, considerate manner that displays respect and appropriate professional courtesy. Adult patients shall be addressed by title and surname unless permission is granted by the patient to use a more informal form of address.

   ii. Dental students have an obligation to be respectful of the cultural, religious, ethnic, racial, and life-style diversity of individuals in the dental school
community and the community in which the school exists.

iii. The use of abusive, obscene, derogatory or profane language or gestures will not be tolerated.

iv. The privacy of the patient and the confidentiality of every patient record shall be maintained.

v. The privacy of the professional activities of any extramural site visited shall be maintained.

vi. Behavior reflecting the dignity, responsibility, and service orientation of dental professionals shall be practiced by all individuals.

vii. No dental student shall perform clinical treatment without direct supervision from appropriate faculty.

viii. No student shall perform clinical treatment that in any way compromises the safety of the patient.

ix. No patient shall deliberately neglect or intentionally subject a patient to unnecessary treatment, stress or anxiety.

x. Students shall maintain neat and clean personal grooming and shall dress appropriately, following the guidelines published in the Student Manual.

xi. Dental students observing or knowing of incompetent, unethical, or illegal conduct that endangers a patient’s health or general welfare shall report this abuse to the Co-Associate Dean from Clinical Services.

xii. Dental students should refrain from sharing personal problems, frustrations, or negative comments about colleagues, faculty, or the institution with patients or patients’ families.

xiii. Dental students shall not make any misstatement or act of intentional commission or omission in official records for purposes of misrepresentation.

xiv. Dental students shall not engage in any argument or altercation in the presence of or with patients, family, visitors, staff, or faculty.

C. HEALTH AND SAFETY

1. Dental students shall maintain compliance with all Health and Safety regulations, including all required immunizations and annual testing for tuberculosis.

2. Dental students shall be familiar with and in compliance with UNLV and SDM safety policies including:
a. Radiation Safety  

b. Infection Control  

c. Biohazard Exposure Control  

d. Latex Allergy  

3. Dental students shall attend all required training sessions, including annual updates when applicable, in the areas of the UNLV and SDM safety policies listed above.  

D. IMPLEMENTATION AND ENFORCEMENT  

1. Implementation of the Honor Code and reporting activities for violations are the responsibility of the Co-Associate Dean for Clinical Services.  

2. Enforcement actions shall be consistent with protocols established in the “UNLV Student Conduct Code and Policies” and the UNLV SDM Honor Code.  

3. The Co-Associate Dean for Clinical Services and/or the Chair of Clinical Science may remove any dental student from the patient care setting to protect patient safety.  

4. Reinstatement of a student from the patient care clinics shall be determined by the Co-Associate Dean for Clinical Services upon recommendation of the Chair of Clinical Sciences and/or the assigned clinical Team Leader.  

5. Non-compliance with Health and Safety requirements (as set forth above) will result in delay in registration for the semester and suspension of all preclinical and clinical activities until the student provides written documentation of compliance.  

E. PRIVACY POLICIES: HIPAA and FERPA  

The Health Insurance Portability and Accountability Act (HIPAA) require SDM to adopt standards for safeguards to protect the confidentiality, integrity, and availability of electronic health information and to have written privacy and security procedures for the SDM community to follow. SDM conducted a risk assessment to determine our vulnerabilities and prepared the required policies and procedures in the SDM HIPAA Manual. The SDM HIPAA Manual was published during the fall of 2013 on SharePoint>Clinic Info>SDM HIPAA Manual in its entirety. Students may read the full HIPAA Regulation and Standards located at http://www.hhs.gov/ocr/hipaa/. See also UNLV SDM Clinical Manual. All students are required to complete HIPPA training. The training, which addresses the School’s specific privacy policies and procedures, is held annually.  

The Federal Educational Rights and Privacy Act of 1974 (FERPA) protects the privacy of student education records and provides students:  

1. The right to inspect their own education records;
2. The right to challenge information in those education records as inaccurate, misleading, or in violation of their privacy rights;
3. The right to restrict certain directory information; and
4. The right to keep their education records private with certain exceptions.

In addition, students have a responsibility under FERPA to maintain the privacy of the education records of other students. Distribution of such records by any means is expressly forbidden.

The policy for releasing of education records provides exceptions to the above general points. Students should read the full UNLV policy (http://www.unlv.edu/registrar/ferpa) for details, exceptions, and compliance requirements. Detailed FERPA information can be obtained from the following website: http://www.ed.gov/policy/gen/gyid/FPCO/FERPA/index.html.

F. FALSIFICATION OF DOCUMENTS OR OTHER INFORMATION

The UNLV Student Conduct Code and UNLV SDM prohibit the forgery and falsification of any documents or records. This includes, but is not limited to the forging, altering, misusing, providing or causing any false information to be entered on ANY University or SDM PRINTED OR ELECTRONIC documents, records (including patient records), or identification cards. The falsification of data, improper assignment of authorship of school work or other scholarly activity, claiming another person’s work as one’s own, unprofessional manipulation of experiments or of research procedures, or misappropriation of research funds will not be tolerated. Commission of any act of forgery or falsification as described will result in disciplinary action and sanctions as stated in the SDM Honor Code and/or SCC.

G. UNLV SCHOOL OF DENTAL MEDICINE COMPUTER POLICY

Working within the guidelines of NevadaNet, NSHE, and UNLV, the policies and procedures for using networked resources under the aegis of the SDM are as follows:

i. Purpose

UNLV SDM information technology (IT) infrastructure supports mission-critical and business-critical services for patient care, education, public service, research, and administration. Staff, researchers, clinicians, students, and faculty depend on the UNLV SDM IT infrastructure for the electronic classroom, telemedicine, healthcare, clinical and administrative database applications, high-speed data and image exchange, and collaborative initiatives with both internal and external entities. The purpose of this document is to institute an enforceable policy to protect the performance, integrity, security, reliability, and continuity of vital services that rely on the UNLV SDM IT infrastructure through good citizenship and legal and ethical use.
ii. Applicability

This policy applies to any person or any device that connects to the IT infrastructure and is meant to augment, but not replace, any existing policy, laws, or regulations that currently refer to computing and networking services to which UNLV SDM connects.

All IT infrastructure strategic decisions shall be in concert with the appropriate leadership in the affected areas.

UNLV Office of Information Technology Services (OIT) provides management and operation of most of the IT infrastructure in partnership and cooperation with the major divisions UNLV, one of which is the SDM. All SDM IT infrastructure designs will be coordinated and approved by OIT.

The owner of a UNLV SDM user ID shall be held accountable for any violations associated with that ID, regardless of the ownership or the location of the equipment where the violation may have occurred.

iii. Definitions and Terms

- **Authorized Use**: Use of the IT infrastructure must be consistent with the instructional, research, public service, patient care, and administrative goals of UNLV SDM, and for the express purpose of conducting business related to one’s job duties.

- **Authorized User**: Staff, student, faculty, contractor, vendor, or entity that has an official affiliation with UNLV SDM and has been assigned a network user ID and/or has been specifically authorized to use an infrastructure resource by the group responsible for operating the resource.

- **Business Use/Need**: That which is consistent with one’s role in the organization.

- **Office of Information Technology (OIT)**: This group provides IT services that are used by the entire UNLV organization such as the network infrastructure, administrative applications, and web services.

- **Information Technology Infrastructure**: Information technology (IT) is a compilation of products and services that turn data into functional, meaningful, available information. The IT infrastructure is the network, the communication physical media, the protocols, the associated software/applications/firmware, the hardware devices that provide connectivity, and all the equipment attached thereto regardless of ownership.
or location.

- **Network**: A network is that system of products and services by which all computers and peripherals are connected. Due to the current need for high-speed networking, it is critical that cables and wiring adhere to industry wiring standards to provide reliable service.

- **Network User ID**: A network account provides authentication and access to many network resources and applications on the IT infrastructure. A user must fill out an account application and sign a statement attesting to having read and understood the proper use of his/her ID and password.

iv. **Policy Statement**

Use of the UNLV SDM IT infrastructure is a revocable privilege granted to those with an official affiliation with UNLV SDM. Access to specific services on the IT infrastructure is based on a business or academic need. Access to the IT infrastructure, and any components on the infrastructure, requires authorization. UNLV SDM IT infrastructure must be used in a manner consistent with protecting patient information and the critical business and academic functions of the organization. No one should perform any activity on the IT infrastructure that undermines the public’s confidence in UNLV SDM to fulfill its mission.

v. **Online Privacy Statement**

Interconnected computer networks can, and do, provide the means to effectively and efficiently enable collaboration and exchange all types of information among the users of the network. All UNLV SDM users will respect the privacy of other users and not inspect the contents of files or communication unless clearly necessary to protect system and/or network operations, or there is reasonable evidence of the violation of appropriate use of policies and procedures. While personal privacy is always respected, all users are advised that with regard to sending and receiving information via the internet that they should have no expectation whatsoever of privacy as to any transmission/communication or image generated, received by, sent by, or stored in a computer. UNLV SDM IT cannot guarantee the privacy or security of transmission over the network and encourages the use of legal and appropriate means (such as encryption) to protect the privacy of transmissions. On occasion it may be necessary for authorized UNLV SDM IT staff to access any device connected to the UNLV SDM network such as a computer, its hard drives and component parts, and to monitor traffic to resolve any functional/operational problems that may be reported or that arise.

vi. **Acceptable Use Statement**
All users of the IT infrastructure are expected to exhibit responsible behavior and shall:

a. Comply with all federal and state laws, UNLV and UNLV SDM rules and policies, terms of computing contracts, and software licensing rules.

b. Obtain authorization to use UNLV and UNLV SDM computing resources.

c. Be held responsible for the use of their assigned user ID. Sharing of user IDs and passwords is prohibited.

d. Obtain the proper authorization prior to accessing or sharing UNLV or UNLV SDM data.

e. Actively participating and cooperate with IT and NevadaNet in the protection of the IT infrastructure against threats. For example, not opening E-mail from an unknown source, safeguarding passwords, reporting any violations of the acceptable use statement, and cooperating with the local support staff to keep security patches up to date on applications and computers.

f. Take reasonable precaution to avoid introducing computer viruses into the network. For example, files downloaded from the Internet, received from E-mail or brought in from outside must be scanned with approved virus-scanning software. Anyone suspecting they may have a computer virus should contact IT support staff immediately.

All users of the IT infrastructure shall **NOT**:

a. Engage in any activity that jeopardizes the availability, performance, integrity, or security of the IT infrastructure. Examples would be not installing personal FTP servers or web servers without consultation with IT staff; not using peer-to-peer (P2P) applications that take up bandwidth for the downloading of music, games, and video; not releasing computer viruses or worms; installing software or devices that would allow external access into the SDM network such as wireless access points; and not deliberately or recklessly overloading access links or switching equipment through the use of streaming media such as web radio and other mechanisms.

b. Alter, change, reconfigure user account settings including, but not limited to security rights and user accounts.
c. Modify PC or laptop host names or domain/work group membership.

d. Uninstall, modify or install software which conflicts with the existing Symantec corporate anti-virus software.

e. Modify, alter or re-locate any SDM IT equipment including but not limited to staff and operatory PCs, printers, and computer peripherals such as mice, desktop switches, and network patch cables.

f. Use computing resources in a wasteful manner that creates a direct cost to UNLV and/or UNLV SDM. Some examples of waste are unnecessary backgrounds on E-mail taking up valuable storage space, spending time on the Internet for personal use, playing computer games, engaging in non-business related online chat groups, or printing multiple copies of documents.

g. Use of IT resources for personal monetary gain or commercial purposes not directly related to UNLV and/or UNLV SDM business or for functions that are not related to one’s job.

h. Install, copy, or use any software in violation of licensing agreements, copyrights, or contracts.

i. Send copies of documents or include the work of others that are in violation of copyright law in electronic communications.

j. Obtain or attempt to access the files or electronic mail of others unless authorized by the owner or as required for legitimate business need, security issues, or investigative purposes. Disclosure of any information obtained must abide of existing policy, laws, and regulations.

k. Harass, intimidate, or threaten others through electronic messages.

l. Construct a false communication that appears to be from someone else.

m. Send or forward unsolicited E-mail to lists of people you do not know. It places considerable strain on the E-mail system. Bulk mailing of information can be selectively used for business-related communication but must be approved at a level appropriate to scope and content of information.

n. Send, forward, or reply to E-mail chain letters.

o. “Reply to all” mass E-mail mailings.

p. Retransmit virus hoaxes.
q. Create or transmit (other than for properly supervised and lawful research purposes) any offensive, obscene or indecent images, data or other material, or any data capable of being resolved into obscene or indecent images.

H. SDMail USAGE

SDMail is the SDM’s communication tool between faculty, staff, and students. This email system is not to be used for personal solicitations of any type. Students must check their email at least once a day for important announcements or updates.

I. PASSWORD STANDARDS AND GUIDELINES

Passwords must be seven (7) characters or more. They must be changed every ninety (90) days. The new password cannot be one that was previously used. A user cannot recycle the previous ten (10) passwords in succession.

J. AMENDMENTS AND REVISIONS

This policy shall be amended or revised as the need arises.

K. ENFORCEMENT OF POLICY

Non-compliance with this policy may result in disciplinary action up to and including termination of employment, dismissal from an academic program, and civil or criminal liability.

L. NON-UNLV SDM EQUIPMENT

Non-UNLV equipment may be used by a visiting presenter or when UNLV SDM does not have equipment available to meet a specific business requirement. Any non-SDM computer cannot be connected to the network no matter what the antivirus or patch level installed on that computer.

M. COPYRIGHT AND FAIR USE STATEMENT

The University requires all members of the University Community to familiarize themselves with and to follow copyright and fair use requirements. You are individually and solely responsible for violations of copyright and fair use laws. The University will neither protect nor defend you nor assume any responsibility for employee or student violations of fair use laws. Violations of copyright laws could subject you to federal and state civil penalties and criminal liability as well as disciplinary action under University
policies. To familiarize yourself with copyright and fair use policies, the University encourages you to visit its copyright website at: http://provost.unlv.edu/copyright/.

The information provided to you throughout this curriculum at UNLV SDM in the form of handouts, outlines, synopses, PowerPoint presentations, tests, etc., are the intellectual property of the individual faculty. These materials are provided for student use only within the domain of UNLV SDM. Use of this material by students outside the University setting or distribution of this material to anyone not affiliated with the UNLV SDM constitutes a copyright violation.

The NBDE are administered and copyrighted by the Joint Commission on National Dental Examinations (JCNDE) of the American Dental Association. Individuals, who obtain, share, solicit, sell and/or purchase unreleased test questions violate the copyright of the JCNDE. “Unreleased” examination items represent confidential material obtained without authorization of the JCNDE through methods such as memorization, recording, copying, etc. Use of sharing of confidential examination materials violates examination regulations.

N. UNLV SDM LAPTOP REBUILD POLICY

The UNLV SDM Administration is instituting a laptop operating system rebuild policy. This policy pertains to laptops requiring an operating system rebuild due to infection from a virus/malware/spyware. Beginning Fall 2015, if a student’s laptop is found to be infected with a virus/malware/spyware that student will be provided with a free operating system rebuild. If the laptop again becomes infected with a virus/malware/spyware, a fee of $50 will be charged for each additional operating system rebuild.

- The SDM Admissions department will take all payments
- The SDM IT department will keep a log of each student/laptop rebuild.
- The SDM IT department will have the final decision whether the issue with the laptop is infected with a virus/malware/spyware and not just a “run of the mill” Windows operating system error.

Depending on the circumstances the rebuild process can take anywhere from two hours to the entire day. Students will need to pay the fee prior to the laptop being rebuilt. Once a receipt is presented to the SDM IT helpdesk the rebuild process will begin. The SDM IT helpdesk is located in building B room 247.

Helpful links:
- Recognizing and Avoiding Spyware:
  - https://www.us-cert.gov/ncas/tips/ST04-016
- What is spyware?
- Antivirus protection and how to avoid viruses:
• You can download a free malware/spyware removal tool from:
  o https://www.malwarebytes.org/

O. UNLV STUDENT CONDUCT CODE (SCC)

a. Introduction

UNLV SDM complies with the “UNLV Student Conduct Code and Policies” as published and revised by the University. This code details prohibited acts which might not fall under the purview of the UNLV/SDM Honor Code. The UNLV SDM Honor Code establishes the standards for student professional responsibility in addition to the standards set forth in the UNLV SCC and UNLV Academic Misconduct Policy.

b. UNLV SCC

   **Responsible Administrator:** Vice President for Student Life

   **Responsible Offices:** Offices of the Vice President for Student Life and Student Conduct

   **Revision Date:** July 25, 2014

   A copy of the University of Nevada Las Vegas Student Conduct Code can be found in Appendix D.

P. UNLV STUDENT ACADEMIC MISCONDUCT POLICY

The UNLV SDM complies with the “UNLV Student Academic Misconduct Policy” as published and revised by the University. The UNLV Student Conduct Code and UNLV Student Academic Misconduct Policy detail prohibited acts which might not fall under the purview of the UNLV/SDM Honor Code. A copy of the UNLV Student Academic Misconduct Policy can be found in Appendix E.

Q. UNLV SCHOOL OF DENTAL MEDICINE DRESS CODE

A professional, neat, and clean physical appearance is essential for all dental students. This facilitates the creation of a necessary level of confidence and trust between the patient and their student health care provider. Additionally, students must communicate through their appearance that they assume their professional responsibilities in a serious manner.

The following dress code guidelines have been designed for students enrolled in the UNLV SDM. The intent is to encourage an environment of professionalism as well as promote health safety for students, patients, and staff. It is essential that students be in
compliance with these guidelines at all times.

a. Personal Grooming

i. Good personal and oral hygiene is expected.

ii. Fingernails must be trimmed and of no more than moderate length and in must no way interfere in patient care. In addition, the Centers for Disease Control (“CDC”) recommends no opaque fingernail polish.

iii. Artificial nails may not be worn during pre-clinical or clinical activities so that glove integrity may be protected.

iv. Hair, including facial hair, must be clean, neat, and well groomed. All hair must be secured in a way that does not interfere with the dental operating field or touch a patient during clinical or laboratory procedures. This is necessary for enforcement of mandatory infection control guidelines.

v. All clothing must be clean and wrinkle-free.

vi. Jewelry in pre-clinical laboratories and patient care (clinic) environments: Only non-dangling earrings are acceptable. Rings and watches which may penetrate rubber gloves should not be worn. Facial, nasal, and tongue piercings, with accompanying jewelry, are not acceptable.

b. Attire for pre-clinical and clinical patient care settings

i. A standardized uniform policy has been established for scrubs. Each class will be assigned a scrub color by the Co-Associate Deans for Clinical Affairs:

1. Class of 2017 – Black
2. Class of 2018 – Maroon
3. Class of 2019 – Grey
4. Class of 2020 – Tan

ii. Clean, non-wrinkled, matching, well-fitting scrub tops and scrub pants will be worn in all pre-clinical laboratory and clinical patient care environments [Non-scrub professional business attire in clinic for DS3 and DS4 students will be allowed periodically at the discretion of the Chair of Clinical Sciences].

iii. T-shirts may be worn under scrub tops if they are white or a complimentary color and are logo free.
iv. Full length disposable gowns will be worn over scrub outfits during all patient care activities. These gowns must be removed and properly disposed of when departing patient treatment areas.

v. Gowns must be changed when they are visibly soiled and a new gown must be worn for each patient.

vi. Clean and conservative close-toe shoes must be worn in simulation clinics and clinical patient care settings. This includes athletic shoes but does not include hiking style boots. Socks must be adequate length to cover skin in the sitting position or hose must be worn with shoes.

c. Attire for Off-Campus Educational Experiences

   i. Official white coats must be worn to all extramural experiences unless otherwise instructed.

   ii. White coats must be worn over clean, matching scrub sets.

   iii. Clean and conservative shoes, including athletic shoes, are considered appropriate footwear for these experiences.

d. Attire for all other settings within the academic environment

   i. Clean, unwrinkled matching scrub tops and scrub pant

   ii. Clean and conservative shoes, including athletic shoes

   iii. Business casual attire includes suits, pants, jackets, shirts, skirts and dresses that, while not formal, are appropriate for a business environment. Examples of appropriate business attire include a polo shirt with pressed khaki pants; a sweater and shirt with corduroy pants; and a jacket, sweater, and skirt. Tank tops, bare midriff tops/shirts, and flip flops are not appropriate. The wearing of logo shirts unless authorized is not permitted. UNLV and UNLV SDM logo apparel will be permitted.

   iv. Students are expected to demonstrate good judgment and professional taste.

   v. Courtesy to fellow students, staff and faculty and your professional image to patients should be the factors that are used to assess that you are dressing in business attire that is appropriate.

e. Non-compliance

   The purpose of the dress code is to ensure the health and safety of students, patients and faculty in the clinical environment and instill a sense of professionalism in non-clinical settings. Failure to abide by the dress code may result in removal from clinic,
pre-clinic, off-campus educational experiences, and all other academic environment
settings and referral pursuant to the UNLV SCC or UNLV SDM Honor Code.

When student non-compliance of the dress code is observed within a course, faculty
and/or staff will notify the appropriate course director or Team Leader. The
student’s course grade may be affected by non-compliance.

Students should be aware that professional behavior, including appropriate dress, is
expected at all times and that continuing non-professional behavior may result in a
referral pursuant to the UNLV SCC or UNLV SDM Honor Code.

R. ACCESS TO CAMPUS BUILDINGS

Permitting access to and use of UNLV SDM facilities to visitors, former students,
friends, family, and minor children after normal working hours without prior permission
is prohibited. Students are issued an electronic access card (Proximity Card) for after-
hours access to only permit registered cardholders.

S. POLICY AGAINST DISCRIMINATION AND SEXUAL HARASSMENT;
COMPLAINT PROCEDURE

A copy of the UNLV Sexual Harassment Policy can be found at
http://hr.unlv.edu/policies/harassment.html and a copy is included in Appendix F.
IV: GENERAL INFORMATION (UNIVERSITY RESOURCES)

A. FINANCIAL AID

The UNLV SDM Office of Financial Aid supports higher education access and persistence by providing financial assistance to eligible students.

Eligible dental students are offered financial assistance up to the full cost of attendance (COA) regardless of a student’s estimated family contribution (EFC). However, outside resources, specifically for tuition and other school expenses through scholarships or grants, may reduce the amount of aid in which a student is eligible.

The Cost of Attendance budget for 2016-2017 is as follows:

<table>
<thead>
<tr>
<th>Off-Campus</th>
<th>Annual Nevada Resident</th>
<th>Per Semester</th>
<th>Per Month</th>
<th>Annual Out-of State</th>
<th>Per Semester</th>
<th>Per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$55,521.00</td>
<td>$18,507.00</td>
<td>$0.00</td>
<td>$93,969.00</td>
<td>$31,323.33</td>
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<td>Books</td>
<td>$8,218.00</td>
<td>$2,306.00</td>
<td>$576.50</td>
<td>$8,218.00</td>
<td>$2,306.00</td>
<td>$576.50</td>
</tr>
<tr>
<td>Room</td>
<td>$14,736.00</td>
<td>$4,912.00</td>
<td>$1228.00</td>
<td>$14,736.00</td>
<td>$4,912.00</td>
<td>$1228.00</td>
</tr>
<tr>
<td>Board</td>
<td>$6,138.00</td>
<td>$2,061.00</td>
<td>$511.50</td>
<td>$6,138.00</td>
<td>$2,061.00</td>
<td>$511.50</td>
</tr>
<tr>
<td>Personal</td>
<td>$5,160.00</td>
<td>$1,720.00</td>
<td>$432.75</td>
<td>$5,193.00</td>
<td>$1,731.00</td>
<td>$432.75</td>
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<tr>
<td>Transportation</td>
<td>$3,558.00</td>
<td>$1,186.00</td>
<td>$296.50</td>
<td>$3,585.00</td>
<td>$1,186.00</td>
<td>$296.50</td>
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<tr>
<td>Loan Fees</td>
<td>$252.00</td>
<td>$84.00</td>
<td>$0.00</td>
<td>$252.00</td>
<td>$84.00</td>
<td>$0.00</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$96,090.00</strong></td>
<td><strong>$32,030.00</strong></td>
<td><strong>$0.00</strong></td>
<td><strong>$134,538.00</strong></td>
<td><strong>$44,846.00</strong></td>
<td><strong>$0.00</strong></td>
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**Living Expenses Budget**

<table>
<thead>
<tr>
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<th>Per Semester</th>
<th>Per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>$40,569.00</td>
<td>$13,523.00</td>
<td>$3,380.75</td>
</tr>
<tr>
<td>$40,569.00</td>
<td>$13,523.00</td>
<td>$3,380.75</td>
</tr>
</tbody>
</table>

*Please note these costs are for an average dental student living off campus. Total includes mandatory health insurance and computer purchase allowance.*
How to Apply for Financial Aid at UNLV
Follow these steps to ensure you get the most out of your financial aid.

1. **Complete the FAFSA**: Complete the correct Free Application for Federal Student Aid (FAFSA) online. UNLV’s school code to complete your FAFSA is 002569. Complete and sign your FAFSA with your FSA ID. UNLV’s priority financial aid consideration deadline is November 1st of each year. You may still apply for financial aid after November 1st, however, there may be limited funding from other aid programs.

2. **Enroll in Direct Deposit**: If your financial aid funds exceed your semester tuition and fee costs, you will receive a financial aid refund for the difference to help pay your other educational costs. You are highly encouraged to enroll in the free direct deposit program so the UNLV Cashiering and Student Accounts Office can post funds directly to your bank account. You may sign up via MyUNLV. Click on Finances, then Enroll in Direct Deposit.

3. **Award Notification**: Fall 2016, Spring 2017 & Summer 2017 Applicants: Students who complete the 2016-2017 FAFSA will not be notified of their financial aid award using the UNLV issued Google E-mail account until April 1, 2016. There are software and programming changes each year within financial aid based upon mandatory U.S. Department of Education updates. These updates dictate the timing of UNLV’s awarding schedule.

4. **Other Important Information**: Although the Admissions Office does not require a social security number on your application for admission, you will need to provide your social security number (SSN) if you plan to complete a Free Application for Federal Student Aid (FAFSA).

If you have already applied for admission and have not reported your SSN on your admission application, you may update your information with the Office of the Registrar located in the Student Services Center, Building C.

You must be a U.S. citizen or eligible non-citizen to complete the FAFSA. If you are a continuing student, you must be making satisfactory academic progress. You must be enrolled in a degree seeking or qualified certificate program. If you are a male and 18 years of age or older, you must have registered with the Selective Service. Determine if you are considered a “dependent” or “independent applicant by the U.S. Department of Education. If you have previously attended another institution during the same academic year, and received financial aid at that institution, it is your responsibility to inform the Office of Financial Aid & Scholarships at UNLV. Receiving aid at another institution during the same academic year may impact you awards at UNLV, an may even result in you having to repay financial aid funds to UNLV.

Students are required to complete a FAFSA application every year.
If you have questions about completing the FAFSA or need further assistance, please contact the Director of Financial Aid, Dr. Christopher A. Kypuros at (702) 774-2526 or via email at christopher.kypuros@unlv.edu. You may also contact the main UNLV Office of Financial Aid & Scholarships for assistance at (702) 895-3424.

1. WILLIAM D. FORD FEDERAL DIRECT LOAN PROGRAM

This loan is not a needs-based loan. Please note that graduate and professional students can no longer apply for the subsidized (needs-based) portion of Federal Direct Loan amounts for a loan disbursed on or after 7/1/2012.

- Maximum Loan Amount: $47,167
- Maximum Loan Amount Prorated Based on Length of Student’s Academic Year:
  - DMD:
    - Year One: $47,167
    - Year Two: $47,167
    - Year Three: $47,167
    - Year Four: $40,500
  - Post-graduate: $20,500
- Interest Rate: 6.21% Fixed (2014-2015)

Reference: https://www.unlv.edu/finaid/loans/unsubsidized

2. FEDERAL DIRECT GRAD PLUS LOAN PROGRAM

Grad PLUS is non-needs based loan however the borrower must maximize their annual Federal Direct Loan eligibility before applying for Grad PLUS.

- Maximum Loan Amount: equal to the student’s annual cost of attendance less other financial aid
- Interest Rate: 7.21% Fixed (2014-2015)

Reference: https://www.unlv.edu/finaid/loans/graduate-plus

Grad PLUS loans accrue interest while student is enrolled in school and during any eligible deferment period. Students enter immediate repayment upon graduation, withdrawal, or dropping to less than half time status. Students can request an economic hardship deferment or forbearance should they be unable to make payments when payments are due.

Deferment available for students enrolled at least half-time or if borrower is participating in a graduate fellowship program, considered on active duty in the US Armed Forces. Borrower may qualify for other types of loan deferment. Federal
Direct Grad PLUS loans are credit-based loans borrowed directly from the federal government as opposed to private lenders.

3. **PERKINS LOAN**

The Federal Perkins Loan is a low-interest loan made through UNLV to help undergraduate and graduate students, meeting specific criteria, pay for their education. The Perkins Loan carries an interest rate of 5% but interest does not accrue while the borrower is enrolled in school at least half time. Students awarded and accepting a Perkins Loan must complete loan counseling and a promissory note requirement before the loan can be disbursed to the student’s account.

Reference: [https://www.unlv.edu/finaid/loans/perkins](https://www.unlv.edu/finaid/loans/perkins)

4. **NON-FEDERAL PRIVATE LOANS**

Private Loans, also known as alternative loans, help bridge the gap between financial aid and the cost of attendance. These loans are offered by private banks and lending institutions and differ from federal student loans. The applicant must meet the lender’s credit requirements, and the loan very often requires a co-signer. The interest rate, terms, and conditions vary among lenders.

If you do not have a Free Application for Federal Student Aid (FAFSA) on file, you do not need the FAFSA application to be considered for a nonfederal private alternative loan. However, you do need to complete the Alternative Form Worksheet to complete your paperwork.

Reference: [https://www.unlv.edu/finaid/loans/non-federal](https://www.unlv.edu/finaid/loans/non-federal)

5. **SCHOLARSHIPS**

The school is pleased to have the ability, based upon donor funding, to award annual scholarships to pre-doctoral students pursuing a degree at the School of Dental Medicine. Scholarships are awarded based upon factors as established by the private donor and UNLV. These factors for scholarship awarding can include:

- GPA
- Financial need
- Ethnicity
- Class rank
- Gender

Additional scholarship opportunities can be found by visiting the main page for
UNLV Financial Aid and Scholarships. In addition, other non-university scholarship opportunities are posted below throughout the year.

Dr. Christopher Kypuros, Director of Financial Aid & Scholarship, will send an email out annually to all students to invite them to apply for scholarships that are awarded by the institution.

Reference: https://www.unlv.edu/dental/scholarships

B. WORDS OF ADVICE

1. Develop a spending plan to accommodate daily, weekly, monthly, quarterly, and annual expenses. Evaluate spending plan for items that can be reduced or eliminated.
2. Keep expenses to the bare minimum while in school.
3. Eliminate or reduce consumer debt as much as possible. Don’t take on any new consumer debt that requires payment while in school.
4. Understand terms and conditions of your loans and expected repayment amounts.
5. Borrow as little as possible.
6. Review student loan borrowing history online through the National Student Loan Data System at least two times a year: http://www.nslds.ed.gov/. Obtain and review free credit reports from each of the three major credit bureaus each year through Annual Credit Report.com: http://www.annualcreditreport.com/.

C. HEALTH SERVICES

The UNLV Student Recreation and Wellness Center (“SRWC”) provides ambulatory health care, health education, immunizations, pharmacy, laboratory, testing, and fitness testing. For additional information, call (702) 895-3370

1. Treatment of minor illness and injury;
2. Early detecting and referral for care of chronic and illness for coordination of ongoing care;
3. Immediate first aid and blood pressure checks;
4. Fitness screening and exercise prescriptions;
5. Screening tests for hearing and vision;
6. Contraception evaluation and pregnancy testing;
7. Acute management and referral for sexual assault;
8. Evaluation, continuing treatment, or referral for initial allergy antigen testing;
9. Onsite licensed lab offers a variety of tests with licensed practitioner’s order;
10. Variety of lab tests with a practitioner’s order;
11. Standard prescription and nonprescription medications are available through our licensed pharmacy;
12. Free health information and health education programs available upon request.

D. HEALTH INSURANCE

The Student Health Insurance Plan was developed specifically for UNLV SDM students. Student participation in this plan is mandatory as approved by the Board of Regents, unless the student shows proof of equivalent insurance coverage. Students are automatically
enrolled in the program prior to the fall semester. The annual premiums are billed with your fall tuition. Students can elect to have their COA budget adjusted to help cover this cost. Eligible students may also enroll their dependents into the plan. Premiums can be paid monthly.

Students will be provided with full policy information, and may also visit http://unlvinsurance.com for further information. Inquires may also be directed to Associated Insurance Plans International, Inc. at 1-800-452-5772.

E. IMMUNIZATIONS & TB TEST REQUIREMENTS

Healthcare professionals, including, students-in-training, are at a higher risk than the general population for acquiring communicable diseases such as measles, mumps, rubella, varicella (chicken pox), Hepatitis B, and tuberculosis. In order to protect themselves, their colleagues and patients, prior to enrollment, students are required to provide evidence of immunization or immunity against these diseases. Additional information about UNLV SDM’s Immunization Requirements can be found at: Dr. Rick Thiriot Co-Associate Dean for Clinical Services 702-774-2655.

UNLV SDM complies with the Nevada Administrative Code (“NAC”) in relation to the State of Nevada vaccination requirements for university students. Accordingly, this policy is subject to change as the NAC may be updated/amended.

UNLV SDM cannot guarantee that affiliated hospitals and clinics will allow the student to participate in patient care at these affiliate sites.

F. STUDENT DISABILITY SERVICES

Please note additional information about student disability services contained on page 9 of this Manual. Not all accommodations are appropriate for each student, and a determination of appropriateness is based on review of the disability documentation presented at the time of intake. Answers to specific situations should be directed to a professional staff member at the UNLV DRC. The following is a list of general service accommodations offered by the UNLV DRC:

1. Advocacy
2. Adaptive Computer Lab
3. Confidentiality
4. Equipment Checkout
5. Testing Accommodations
6. ASL/RTC Interpreters
7. Note Taker
8. Research Assistant/Lab Assistant
9. Textbooks: Alternate Formats Intake Form
If you would like more information, please stop by the office or call 895-0866 to set up an appointment.

G. PSYCHOLOGICAL SERVICES

All currently enrolled students at UNLV are eligible for counseling services via UNLV Student Counseling and Psychological Services (“CAPS”). Services are provided free of charge, except for psychological testing. Confidential services offered to assist students manage the adjustment demands and personal challenge of college includes:

10. Individual and Group Counseling  15. Drug and alcohol Assessment
11. Couples and Family Counseling  16. Educational Workshops and
12. Crisis Intervention  Presentations
13. Medical Evaluation and Management  17. Referrals to Community
14. Psychological Assessment and Testing  Health Care Providers

Students can call to schedule an initial appointment or may come in without an appointment Monday through Friday from 8am–3pm. CAPS is located on the third floor of the UNLV SRWC. For more information call us at 702-895-3627.

H. LIBRARY

The UNLV Libraries provide special services and resources for the students, faculty, and staff at the Shadow Lane campus. These services include on-line access to more than 800 journals of dental, medical and biomedical sciences interest; assistance with literature searches; direct contact with a librarian dedicated to the Shadow Lane campus; electronic document delivery, and physical delivery of hard copy items. These services can be accessed through the Shadow Lane Library website at http://www.library.unlv.edu/shadowlane.

I. PARKING

Permits are required for parking on campus from 7 a.m. to 7 p.m. Monday – Thursday and from 7 a.m. to 5 p.m. Fridays. After 5 p.m., students may park in faculty/staff spaces. New parking permits must be purchased each year; annual fees are set by category of user:

- Faculty/Staff: $250.00
- Student: $125.00
- Community Member: $125.00
- Motorcycle: $82.00

*(valid 8-16-2015 through 8-15-2016) Parking permit rates are subject to increase.

Student Parking: Students are required to purchase parking permits before school beings (including orientation week). Students are encouraged to purchase their parking permit via the web at https://unlv.t2hosted.com.

Parking Services is located in building C on Shadow Lane
University Department of Public Safety Parking Enforcement
1001 Shadow Lane
Las Vegas, NV 89106
T: (702)-774-2331
F: (702)-895-3660
J. **SAFETY INFORMATION**

If you would like an escort to your vehicle after dark, call 895-3668 and a police officer will walk you to your vehicle.

K. **FITNESS CENTER**

SRWC is not your ordinary campus recreation center. Along with incredible equipment and facilities, not to mention a great new place to hang out, and recharge, the SRWC offers programs and services that address every aspect of your overall health and wellness. For additional information visit [http://srwc.unlv.edu](http://srwc.unlv.edu), Student Recreation and Wellness Center Facility Information Line: (702)-774-7100.

L. **ID BADGES**

The RebelCard is the official identification card for all members of the UNLV campus community. The RebelCard can be used to check books out in the Library and the first RebelCard is free with official government identification, such as a driver’s license or passport. Replacement cards cost $15.00. Cards can be obtained at Moyer Student Union, Room 160, (702)-895-2351, [http://rebelcard.unlv.edu](http://rebelcard.unlv.edu).

In addition, all students, faculty, and staff are issued a SDM Medicine ID badge. This badge MUST be worn at all times on campus and MUST be visible.

M. **ORGANIZATIONS**

1. **Graduate & Professional Student Association (GPSA)**

UNLV GPSA serves all graduate/professional students. The GPSA offers fall, spring, and summer research and travel grants, and maintains a working office equipped with a copier, fax, flatbed scanners, color laser printer, typewriter, office supplies, and computers with printers and internet access.

The GPSA Council is made up of a representative from each academic department offering a graduate/professional degree. Meetings are held at the beginning of each month during the fall, spring and summer semesters and are open to any interested graduate/professional student. The Executive Board of the GPSA Council consists of four elected positions: President, Vice President, Secretary, and Treasurer. The GPSA Council members are appointed to various committees on campus to provide a voice for all UNLV graduate students.

Full-time graduate/professional students are eligible to attend UNLV theatre, music, and athletic events for free. Call the GPSA for more information, call 702-895-2261 or stop by the GPSA, Lied Library room 3251.

The UNLV Graduate & Professional Student Association
4505 S. Maryland Parkway
LLB 3251
Box 451007
Las Vegas, NV 89154-1017
Telephone: 702-895-2261
Fax: 702-895-2158
2. Dental Student Government Association (DSGA)

The Dental Student Government Association of UNLV SDM promotes dentistry on the UNLV campus and serves as the voice of the dental student body. We focus on both the professional and the academic aspects of dentistry. Through networking and arranging of events, the DSGA helps dental students increase their marketability and promote themselves to the community. Education and communication between and within the school is at the forefront of all our endeavors. The DSGA strives to unite academics and fun to create the best possible learning experience for the dental student body.

Other organizations: American Dental Education Association (ADEA), American Student Dental Association (ASDA), American Association of Women Dentists (AAWD), Student National Dental Association (SNDA), Hispanic Student Dental Association (HSDA), Academy of LDS Dentists (ALDS) Psi Omega Dental Fraternity

N. INTERNATIONAL PROGRAMS

UNLV faculty and staff activities with an international component which include students or accompanying guests must contact the UNLV Office of International Programs during the initial planning stages for information regarding NSHE polices for foreign study, research, or travel. UNLV employees have a contractual obligation to comply with UNLV policies and the NSHE Code.

The Office of International Programs is centralized academic support unit which assists UNLV in the planning and development of cooperative agreements, programs abroad, faculty exchange, field study projects, and other initiatives which foster internationalization. Faculty or staff considering the development of new programs must contact International Programs located in CBC B 325. Phone: 702-895-3896.

O. DIVERSITY AND INCLUSION COMMITTEE

The Office of Diversity and Inclusion at the University of Nevada Las Vegas is dedicated to promoting a cultural diverse environment. It is imperative that our School reflects the community that we serve. Diversity makes our university vibrant and more responsive to the needs of our students and community. At UNLV, we are committed to providing an inclusive and humane environment where all individuals feel valued, respected, and affirmed.

To that end, we strive to engage and celebrate expressions of diversity. Representative of our cultural diverse environment as a School, the Class of 2019 consists of 44 males and 36 females; 47 Nevada residents and 35 nonresidents; and has 47 underrepresented minorities.

Because a culturally-competent dental professional is more sensitive to the needs of patients and better able to interact with individuals from different walks of life, our curriculum includes cultural competency coursework beginning with our first year students.

Dr. Christopher A. Kypuros, Director of Diversity at the UNLV School of Dental Medicine teaches DEN 7157, Patient Communication and Cultural Competency and DEN 7161, Research and Professionalism. Dr. Kypuros serves as the Title IX Deputy Coordinator. He receives, investigates, and renders resolution for complaints involving UNLV School of Dental Medicine faculty, staff, and students. He presents and coordinates training on cultural
sensitivity such as the Ryan White HIV/AIDS Program, Interpersonal Violence and Sexual Harassment.

P. STUDENTS ACCESS TO CAMPUS BUILDINGS (SUBJECT TO CHANGE)

A Building
B Building
D Building
M-F 6:30 am–9pm
M-Sat 6am-11:59pm
M-Sun 7am-6:30pm
Sat-Sun 8 am–5 pm
Sun 9am-10pm

Q. UNLV SDM COMPLAINT POLICY – STANDARDS FOR ACCREDITATION

a. Those complaints which are based in the Standards for Accreditation are addressed as per the CODA policy for reporting. Information regarding submitting a complaint of this type can be found on the CODA website, in this Student Manual, and posted throughout the school. These complaints may be brought forward by patients, students, staff, and faculty.

b. Those complaints that do not relate to the Standards for Accreditation. These fall into four (4) categories:

i. **Predoctoral Student Complaints.** Student complaints may be reported to directors, department chairs, assistant and associate deans, and/or dean. Records regarding these will be maintained in the Office of Academic Affairs as to date, time, person making complaint, description of the complaint, and resolution.

ii. **Staff Complaints.** Staff complaints should be reported to Mr. Lorenzo Bethea. His office will maintain a record of these as to date, time, person making complaint, description of the complaint, and resolution.

iii. **Patient Complaints.** Patient complaints (Q/A) should be made to the Office of Clinic Administration. It will be the responsibility of this office to maintain a record of these as to date, time, person making complaint, description of complaint, and resolution.

iv. **Harassment/Hostile Environment Complaints.** Complaints dealing with harassment and/or hostile environment should be reported to the UNLV School of Dental Medicine Harassment Officer. The log of these complaints will be maintained by the Harassment Officer as to date, time, person making complaint, description of complaint, and resolution.

v. **Postgraduate Student Complaints.** Complaints by residents may be reported to their specific directors, assistant and associate deans, and/or the dean. Records regarding these will be maintained in the specific program director’s office as to date, time, person making complaint, description of complaint, and resolution.

Complaints against students by faculty, staff, or patients that deal with issues of academic integrity are referred to the Honor Council and/or the Student Progress Committee and are protected under FERPA as confidential.

**Note:** It is the policy of the University and the School of Dental Medicine that in order for a complaint of any nature to be valid and warrant investigation, it must be presented in writing and must be signed by the individual making the complaint.
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Introduction

UNLV, School of Dental Medicine’s (SDM), Advanced Education Program in Pediatric Dentistry, is a continuous, 24 month postgraduate, certificate program. The program integrates biomedical sciences, clinical sciences, research and professional studies. The mission of the program’s administration, faculty, and staff is to educate pediatric dentists who possess the current knowledge, skills, values and diversity practice pediatric dentistry as practitioners committed to life-long learning. Our postgraduate students strive toward improving the oral health of the pediatric population of the State of Nevada by providing excellent pediatric oral health care utilizing the latest evidence based treatment methods. The Pediatric Dental Postgraduate Program received initial accreditation on July 31, 2008, from the American Dental Association (A.D.A.), Commission On Dental Accreditation (C.O.D.A), and full accreditation on August 5, 2010.

This handbook is designed to give you specifics as they relate to the Advanced Education Program in Pediatric Dentistry. As a Program within UNLV SDM, adherence will be given to the rules and regulations as outlined by the University.

Policies and procedures, standards of conduct, postgraduate student responsibilities, and rights related to students and academic affairs are found in the following document:

• UNLV SDM Student Handbook (To be referenced for all SDM and University policies not covered in the Pediatric Dentistry Handbook)

This document, plus the Clinic Operating Manual, SDM Honor Code, and Clinical Protocol Manuals are also available on UNLV School of Dental Medicine’s intranet located at http://sdmnet/
## Faculty

### Administration

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Karen P. West, DMD, MPH</td>
<td>Dean, School of Dental Medicine</td>
</tr>
<tr>
<td>Ronald R. Lemon, DMD</td>
<td>Associate Dean, Advanced Education Programs</td>
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<tr>
<td>Christine Ancajas, DDS</td>
<td>Assistant Dean for Admission and Student Affairs</td>
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### Pediatric Dentistry

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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Cody Hughes, DMD, MSD*</td>
<td>Program Director, Pediatric Residency Program</td>
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<tr>
<td>Todd Baggaley, DMD*</td>
<td>Faculty (PT)</td>
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<tr>
<td>William Buhler, DDS</td>
<td>Faculty (PT)</td>
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<tr>
<td>Chad Ellsworth, DMD*</td>
<td>Faculty (PT)</td>
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<td>Bibiana Ezeanoule, DMD</td>
<td>Faculty (PT)</td>
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<tr>
<td>Ashley Hoban, DMD</td>
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<tr>
<td>Arlene Joyner, DDS, MPH*</td>
<td>Faculty</td>
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<tr>
<td>Owen Sanders, DDS</td>
<td>Faculty (PT)</td>
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<tr>
<td>Michael Saxe, DDS, MS</td>
<td>Faculty (PT)</td>
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<tr>
<td>William Waggoner, DDS</td>
<td>Faculty (PT)</td>
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<tr>
<td>Stephen Wilson, DMD, MA, PhD*</td>
<td>Faculty (PT)</td>
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### Orthodontics

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<th>Name</th>
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<tr>
<td>James K. Mah, DDS, MS, DMSc*</td>
<td>Program Director Orthodontics</td>
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<tr>
<td>Bob M. Martin, DDS*</td>
<td>Clinical Director Orthodontics</td>
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<tr>
<td>Tanya A-TAlib, DDS</td>
<td>Assistant Professor in Residence</td>
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<tr>
<td>Clifford C. Seran, DMD*</td>
<td>Associate Professor-in-Residence</td>
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<tr>
<td>Kim T. Mai, DDS</td>
<td>Associate Professor-in-Residence</td>
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<tr>
<td>Calvin K. Heinrich, DDS</td>
<td>Associate Professor-in-Residence (PT)</td>
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<tr>
<td>Walter J. Babula, DDS, MScO</td>
<td>Associate Professor-in-Residence (PT)</td>
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### Endodontics

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<tr>
<td>Ronald R. Lemon, DMD*</td>
<td>Associate Dean, Advanced Education Programs</td>
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### Oral and Maxillofacial Surgery

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<tr>
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<tr>
<td>Daniel Orr II, DDS, PhD, JD, MD*</td>
<td>Professor-in-Residence</td>
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### Oral Pathology

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<tr>
<td>Ed Herschaft, DDS, MA*</td>
<td>Professor</td>
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<tr>
<td>Victoria Woo, DDS*</td>
<td>Associate Professor-in-Residence</td>
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### Radiology

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<th>Name</th>
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<tbody>
<tr>
<td>Robert Danforth, DDS*</td>
<td>Associate Professor-in-Residence</td>
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### Biomedical Science Faculty

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<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Gillian Galbraith, MD*</td>
<td>Professor and Chair Biomedical Sciences</td>
</tr>
<tr>
<td>Brian Chrzan</td>
<td>Visiting Associate Professor and Orthodontist</td>
</tr>
<tr>
<td>William Davenport, PhD</td>
<td>Professor, Associate Dean for Academic Affairs</td>
</tr>
<tr>
<td>Stan Hillyard, PhD</td>
<td>Professor</td>
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</tbody>
</table>
Katherine Howard, PhD  
Assistant Professor-in-Residence

Karl Kingsley, PhD, MPH  
Professor

Lawrence Zoller, PhD  
Professor

**Behavioral Sciences Course Instructors**

<table>
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<tr>
<th>Name</th>
<th>Position</th>
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<tbody>
<tr>
<td>Connie Mobley, PhD, RD</td>
<td>Professor, Associate Dean for Research</td>
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* = Board Certified  
PT = Part-time Faculty  
FT = Full-time Faculty

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**Pediatric Clinical Staff**

**Administrative Assistant** – Patricia Williams (774-2416)

**Clinical Manager** – Roxanne Barajas (774-2417)

**Front Desk Reception** – (774-2415)

**Dispensary** – (774-2443)
Program Goals & Objectives

A. Vision

Leading Pediatric Dentistry, by integrating innovation, tradition, and service.

B. Objectives

a. Train a diverse class of academically and clinically qualified postgraduate students.
b. Provide an evidence-based integrated curriculum comprised of biomedical, professional, and clinical sciences.
c. Develop outstanding clinical skills to allow quality patient care and service.
d. Prepare postgraduate students for American Board of Pediatric Dentistry (ABPD) certification, educational endeavors, leadership roles and scholarly activities.
e. Cultivate excellence among faculty in the areas of teaching, scholarly activities, and service.
f. Provide experiences to enhance cultural sensitivity to underserved populations.

C. Postgraduate Student Learning Outcomes

a. Demonstrate in-depth knowledge of biomedical, professional, and clinical sciences in relation to pediatric dentistry.
b. Develop outstanding clinical skills to allow quality patient care and service.
c. Achieve competencies required for ABPD certification.
d. Demonstrate competence in the provision of didactic and clinical instruction for educational purposes.
e. Develop and demonstrate the ability to complete a quality research project.
f. Demonstrate cultural sensitivity, when serving underserved populations in the State of Nevada.
# Planned Assessments:
## Methods, Instruments, & Analysis

<table>
<thead>
<tr>
<th>Assessment Instrument</th>
<th>Learning Outcome(s) Assessed</th>
<th>Expected Measures</th>
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<tbody>
<tr>
<td><em>Course Grades</em></td>
<td>1, 2, &amp; 5</td>
<td>* Satisfactory completion of all didactic courses Grade of P in Pass/Fail courses; no grade below “C” and maintain “B” average</td>
</tr>
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</table>
| *Clinical Evaluations*| 1, 2, & 6                    | *Average or above average clinical evaluation scores from faculty (Above 50%)
*All postgraduate students completing adequate numbers of special needs patients (minimum of 5/year/postgraduate student)
*Completion of adequate numbers of OR cases per C.O.D.A. (Minimum of 20 OR cases within the 24 month period)- 10 completed and 10 observed.
*All postgraduate students providing quality care in a timely manner (Individual postgraduate student production within 20% of average postgraduate student procedure production during each year of residency)
*Completion of Sedation cases per the A.D.A., C.O.D.A. (minimum of 50 sedation cases within the 24 month period)
1. Postgraduate students must complete 20 nitrous oxide/oxygen analgesia patient encounters as primary operator; and
2. Postgraduate students must complete a minimum of 50 patient encounters in which sedative agents other than nitrous oxide/oxygen (but may include nitrous oxide/oxygen in combination with other agents) are used. The agents may be administered by any route.
   a. Of the 50 patient encounters, each postgraduate student must act as operator in a minimum of 25 sedation cases.
   b. Of the remaining sedation cases (those not performed as the primary operator), each postgraduate student must gain clinical experience, which can be in a variety of activities or settings, including individual or functional group monitoring.
   c. Postgraduate students must observe 10 moderate sedation cases prior to acting as the moderator. To qualify as an observation, the postgraduate student must be present during the patient work up and delivery of medication. The student must also be present during the procedure and act as the monitor, completing the records portion of the sedation form for vitals during the procedure. |
<table>
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<th>Assessment Instrument</th>
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<tbody>
<tr>
<td>*Presentation</td>
<td>1</td>
<td>*Completion of quality assigned presentations in didactic courses by all of the postgraduate students</td>
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| *Participation         | 3, 4, & 6                   | *All of the postgraduate students participating in A.A.P.D. or local dental association meetings  
*All of the postgraduate students participating in teaching roles in clinical or didactic training sessions (At least 5% of total program time)  
*Postgraduate students participating in community service activities (Minimum of 5/year/postgraduate student)  
*Postgraduate student completion of assigned community clinical rotations encompassing provision of care to underserved populations (100% of the postgraduate students completing rotations) |
| *Hospital/Off-site/Rotation Evaluations | 2                           | *All of the postgraduate students functioning satisfactorily in the hospital/surgery center setting |
| *Project Completion    | 5                           | *Completion of at least one research project/postgraduate student/ 24-month period  
*All of the postgraduate students presenting projects in formal settings during the 24-month period, all Y2 residents are expected to present their research at SDM Research Day and the AAPD poster competition.  
*All of the postgraduate students must submit a research paper for publication during the 24-month period and receive confirmation of acceptance for peer review, from the chosen journal |
| *In-Service Exams      | 3                           | *Graduates passing the ABPD Qualifying Exam for board certification  
*Graduates scoring within 10% of the National Average on the AAPD In-Service Exams |

The 24-month program begins the first week of July. The length may be extended dependent upon the proficiency of each postgraduate student, time missed, or to allow completion of the research requirement. Each postgraduate student must complete an original research project relevant to the pediatric dental profession. Each postgraduate student must submit a research paper for publication, during the 24-month period and receive confirmation, from the chosen journal, confirming receipt for peer review.

Distribution of time during residency will be divided into the following four categories. Each of these categories will consume the APPROXIMATE percentage of time:

- Clinical Training = 65%
• Didactic Education = 25%
• Research = 5%
• Teaching = 5%

The time division is intended as a guide and is an average that applies to the total certificate program of 24 months. The program is designed to offer a broad spectrum of didactic, clinical, research and teaching experience in the field of pediatric dentistry. An emphasis of the program is to prepare the graduate for successful completion of the board examinations required for board certification by the American Board of Pediatric Dentistry.

The program trains the postgraduate student to have a broad knowledge and understanding of growth development, diagnosis and treatment planning, craniofacial anomalies, interdisciplinary dentistry, restorative treatment methodology, behavior management techniques and guidelines, hospital dentistry, age appropriate orthodontic therapy, research methodology, and classic and current literature relevant to pediatric dentistry. Patient care is conducted in the pediatric postgraduate dental clinic, community clinics, and at University Medical Center (UMC) Hospital/Children’s Trauma Center, and in affiliated surgical centers. Patient cases represent a cross-section of the cases encountered in private practice to ensure the postgraduate student’s preparedness to practice pediatric dentistry in a diverse population.

The curriculum includes: clinical seminars, clinical pediatric dentistry, clinical orthodontics, diagnosis and treatment planning, case presentations, biomedical sciences, clinical sciences, professional studies, research and literature reviews, and hospital rotations. Postgraduate student evaluations will be given every six months to ensure that each postgraduate student is progressing in the program and to provide constructive feedback.

Program Expense*
Tuition: $25,000/per year
Residency Program Fees: $5,000/per year due at the beginning of each year
*Subject to Change

License
The Nevada State Board of Dental Examiners (NSBDE) requires all dental postgraduate students obtain either a “Limited License” or an unrestricted license to practice dentistry in the State of Nevada. For detailed information, please contact the NSBDE at 800-DDS-EXAM or nsbde@nsbde.nv.gov. Upon matriculation, the issuance of a Limited License, will be provided, for ninety (90) days, until all of the licensing requirements are provided to the NSBDE. During the ninety (90) day period, you must provide all of the necessary documentation, for the completion of licensure, with the NSBDE. Should you not be credentialed by the NSBDE, within the ninety (90) days, your UNLV SDM, Advanced Education Program in Pediatric Dentistry, clinic privileges and other licensed related activities in the program, will be suspended, until you have the required license.

Accreditation
UNLV, School of Dental Medicine, Advanced Education in Pediatric Dentistry, was awarded “Initial Accreditation” from C.O.D.A., on July 31, 2008 and full accreditation, on August 5, 2010. C.O.D.A. is the specialized accrediting body of the A.D.A. and is recognized by the United States Department of Education. For more information regarding this process you may contact C.O.D.A. at (312)440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611.
Program Requirements

Completion of the pediatric postgraduate program involves acceptable performance in four areas of the curriculum. These include:

1. **CLINICAL TRAINING = 65%**
   Postgraduate students will receive clinical training and experience in the pediatric dental postgraduate clinic located in the UNLV SDM, in the Children’s Specialty Center at UMC, in operating rooms at affiliated facilities and at the “Children’s Specialty Center of Nevada”.

   Postgraduate students are required to maintain complete patient records, within accordance to School of Dental Medicine, clinic guidelines. Patient records are systematically reviewed for quality assurance. Postgraduate students are to make certain that the patient’s parents/legal care-givers, know the postgraduate student’s name, and provide the parent/legal care-givers, with necessary contact information.

   • **Clinical Requirements**
     - Postgraduate students must attend all scheduled seminars and/or courses.
     - Postgraduate students provide treatment under the supervision of the assigned pediatric dental faculty.
     - Patients remain the responsibility of the assigned pediatric clinic faculty, who work closely with the postgraduate students in the diagnosis, treatment planning and implementation of pediatric patient, oral health care.
     - Postgraduate students must comply with the directions of the attending pediatric dental faculty and adhere to the program policies, while providing oral health care to all pediatric patients in the out-patient clinic, operating room, and other clinical settings.
     - Postgraduate students are expected to prepare all patient records according to the established protocols of the American Academy of Pediatric Dentistry (A.A.P.D.), and discuss treatment plans with the parent/legal care-giver, prior to obtaining signatures for all consents. Consent Forms must be signed electronically and entered into the patient chart prior to initiating all treatment. Signed medical histories by the parent/legal care-giver must be entered into the AxiUm patient record. Medical histories shall be reviewed and updated at each patient encounter. Parents should sign confirmation of the medical history at least annually. The postgraduate student is responsible to obtain the parent/legal care-giver’s signature for the patient’s medical histories and all consents for treatment prior to the patient’s departure from the clinic treatment area.
     - Postgraduate students will be assigned to the Nevada Early Intervention Services Craniofacial Clinic during their second year on a rotation basis.
     - Postgraduate students should complete the majority of the cases they begin, to ensure continuity of care. In addition, postgraduate students must participate in twenty (20) general anesthesia pediatric dental, oral rehabilitation cases and must personally complete at least ten (10) general anesthesia cases, during their postgraduate program.
     - Postgraduate students must maintain detailed records for each case, in which they participate.
     - Postgraduate Students must complete fifty (50) sedation cases per the A.D.A., C.O.D.A. (Minimum of 50 sedation cases within the 24-month period):
• Postgraduate students must complete 20 nitrous oxide/oxygen analgesia patient encounters as primary operator; and
• Postgraduate students must complete a minimum of 50 patient encounters in which sedative agents other than nitrous oxide/oxygen (but may include nitrous oxide/oxygen in combination with other agents) are used. The agents may be administered by any route.
  • Of the 50 patient encounters, each postgraduate student must act as operator in a minimum of 25 sedation cases.
  • Of the remaining sedation cases (those not performed as the primary operator), each postgraduate student must gain clinical experience, which can be in a variety of activities or settings, including individual or functional group monitoring and human simulation.
  • Postgraduate students must observe 10 moderate sedation cases prior to acting as the moderator. To qualify as an observation, the postgraduate student must be present during the patient work up and delivery of medication. The student must also be present during the procedure and act as the monitor, completing the records portion of the sedation form for vitals during the procedure.
  o Postgraduate students must maintain detailed records for each case, in which they participate.
  o All postgraduate students must have necessary immunizations and periodic TB testing as determined by SDM in order to work in the clinic.
  o Postgraduate students are required to have current BLS and OSHA certification and maintain current PALS certification. Failure to comply will result in suspension of clinical privileges.
  o All funds, regardless of source, generated from a graduate student’s clinical activities in connection with his/her participation in the academic programs shall accrue solely to the benefit of SDM. Graduate students are not employees of SDM and, as such, are not eligible for wages, workers’ compensation or other benefits otherwise available to SDM employees in connection with their participation in the graduate program.

2. DIDACTIC EDUCATION = 25% Program
Courses, Lectures and Seminars
• Competence in Pediatric Dentistry requires knowledge of the biomedical sciences and other topics as related to the specialty. Materials in research, biostatistics as well as other areas are provided in the programs so that the postgraduate student will be able to apply important biomedical concepts and principles that govern acceptable clinical procedures.
• The curriculum is intended to broaden the postgraduate student’s overall background, to sharpen the intellect for critical analysis and to provide an opportunity to gain depth in all areas, pertinent to pediatric dentistry.
• The subject matter will be presented in a variety of fashions. Information will be conveyed through applied courses, seminars, reading assignments, clinical settings, hospital rotations, laboratory assignments, and selected local and distant conferences, generally sponsored by the American Academy of Pediatric Dentistry (AAPD). Specific presentation style will depend on the individual instructor. The 24 month curriculum is designed to provide the postgraduate student with a comprehensive understanding of contemporary and classic articles covering a broad range of material relevant to pediatric dentistry and pediatric medicine. Postgraduate students will report on these articles with purpose, methods, results, and conclusions.
depend on the individual instructor. The 24 month curriculum is designed to provide the postgraduate student with a comprehensive understanding of contemporary and classic articles covering a broad range of material relevant to pediatric dentistry and pediatric medicine. Postgraduate students will report on these articles with purpose, methods, results, and conclusions.

- Postgraduate students will be assigned numerous presentations to be presented in the didactic courses. In a formal and comprehensive manner, postgraduate students will also present selected cases of special interest for review in treatment planning seminars and are critiqued by members of the pediatric faculty. These presentations will follow a predetermined protocol and the faculty will direct the postgraduate students with the format.

3. **RESEARCH = 5%**

UNLV SDM Pediatric Dental Postgraduate program is designed to train academic clinicians. This requires the development of research skills necessary for independent research. The development of new knowledge is also a mission of the university and a priority of the specialty of pediatric dentistry. In fact, as noted above, the Accreditation Standards for Advanced Specialty Education Programs in Pediatric Dentistry specify that “students must initiate and complete a research project to include critical review of the literature, development of a hypothesis and the design, statistical analysis and interpretation of data.”

Consistent with the UNLV SDM pediatric dental residency program objectives and the A.D.A. C.O.D.A. standards, the following research requirements have been established:

- An original research project must be completed by each postgraduate student, including a publishable quality manuscript submitted and approved by the Program Director and Director of Research, before completion of the 24-month program.
- The manuscript must be submitted and approved prior to receiving the pediatric dental postgraduate certificate.
- Publishable quality refers to all aspects of the work, including the scientific quality of the research project itself, the clarity and grammatical correctness of the writing, the interpretation of findings, and the quality of illustrations and graphical data presentation. Manuscripts that fall short of the standard will be revised and resubmitted until the standard is met.
- Postgraduate students must submit the manuscript for publication and demonstrate its publishable quality by having it reviewed and accepted by a journal’s editorial board of peer reviewers. The journal’s acceptance for review must be acknowledged by a confirmation receipt. It is the responsibility of the postgraduate student to provide the Program Director with written documentation, to place on file, for the A.D.A. C.O.D.A., accreditation documentation.
- The Research Director will maintain records of the postgraduate student’s progress.
- The required independent research project is the minimal requirement for successful completion of the pediatric dental postgraduate program at the UNLV SDM, Advanced
Education Program in Pediatric Dentistry. Postgraduate students are expected to remain engaged in scholarly activities throughout their residency training.

• Expected Timeline for Research Activities:
  o End of September Y1-Determine research question and acquire mentor, start literature review.
  o End of November Y1- Complete literature review, finalize question and prepare IRB application.
  o End of January Y1-IRB application submitted.
  o End of September Y2-Data collection complete, manuscript development continues.
  o End of November Y2- Manuscript first draft submitted to mentor for review.
  o January Y2-Apply to participate in AAPD research poster competition.*
  o February/March Y2-Participate in the UNLV SDM research day.
  o April Y2-Manuscript complete and submitted; send confirmation of submission to Program Director.

*Note that the program will, as funds permit, cover travel and lodging expenses to the annual AAPD meeting to participate in the research poster competition IF all data has been collected and analyzed by January of Y2.

4. TEACHING = 5%

The ADA accreditation program requires postgraduate students to spend a certain amount of time teaching. Through teaching, postgraduate students will gain deeper insights into various disciplines and subjects, learn interpersonal skills, and develop organizational abilities and presentation skills. Postgraduate students will have responsibilities for teaching and producing material which may vary during the 24-month program. Regarding clinical supervision of pre-doctoral students in the pre-doctoral pediatric clinic, postgraduate students will act as and with the authority of faculty, having the capacity to authorize treatment and treatment plans. While serving in this capacity, pediatric dentistry faculty will be readily available on site for consultation and/or intervention as needed. Pre-doctoral responsibilities will be coordinated with the Pre-doctoral Course Director. These responsibilities may include, but are not limited to the following:

• Postgraduate students will prepare and present a minimum of one didactic lecture or one presentation for a preclinical laboratory session.
• Postgraduate students will provide clinical guidance and supervision, and evaluate the performance of pre-doctoral students in the pediatric clinic. This will include a rotation during Y2 to cover the pre-doctoral pediatric clinic.
• Second year postgraduate students (PGY2) will periodically prepare, present, and lead discussions for first year postgraduate students (PGY1), in the Clinical Seminars courses.

Rotation Information

Craniofacial Rotation – The Southern Nevada Cleft Palate and Craniofacial Clinic provides an
interdisciplinary team approach, including assessments and follow-up for children ages, birth to 18 years of age, with craniofacial conditions. The team includes specialists in the areas of audiology, dentistry, otolaryngology, plastic surgery, orthodontics, oral and maxillofacial surgery, pediatrics, social work, and speech pathology.

The fourth Tuesday of each month, starting in August, two PGY2 postgraduate students will attend the rotation. The pediatric dental postgraduate students will shadow the attending pediatric dentist assigned to the clinic. It is extremely effective for the pediatric postgraduate students to see numerous orofacial syndromes, as well as cleft lip and palate cases and be able to discuss with the interdisciplinary experts, their treatment recommendations. The rotation is from 8:00 a.m. – 12:00 p.m. You are required to return to the UNLV SDM pediatric dental clinic, for patient care upon completion.

Postgraduate students will receive an email from the Craniofacial Clinic Coordinator two (2) weeks prior to the assigned rotation. Postgraduate students can review the craniofacial syndromes, prior to their attendance and be prepared for any questions the interdisciplinary team or attending pediatric dentist might ask of you. Postgraduate students are required to report their experiences to the other postgraduate students, during the following Thursday afternoon treatment planning seminar.

Southern Nevada Cleft Palate and Craniofacial Center
1161 S. Valley View
Las Vegas, NV 89102
(702) 486-9228

Contact: Rachel Bonaparte, DS III, MSW
Email: rbonaparte@health.nv.gov
**Hematology/Oncology Rotation** – The hematology/oncology rotation is a method to learn about children with blood dyscrasias, neoplasias and other immunocompromised conditions. PGY2, postgraduate students, will attend this rotation for 2 weeks. A screening form has been made for postgraduate students to take to the rotation for screening of each child. Also, a referral form for the dental program should be given to the parents/legal care-givers, of each patient while they are being treated at the hematology/oncology facility.

**Hematology/Oncology Comp Clinic** – Usually on Tuesdays, two-three afternoons each month, from 12:30 pm – 5:00 pm and very few Fridays, from 8:00 am – 12:00 pm. This is an interdisciplinary experience for the pediatric hematology and oncology patients.

**Children’s Specialty Center of Nevada**
3121 South Maryland Parkway  
Las Vegas, NV 89109-2307  
(702) 732-1493 – Main

Contact: Laura Clauson  
(702) 732-0634  
Email: lclauson@cure4thekids.org  
John Bernstein, M.D. Medical Director  
Email: Dr.B@cure4thekids.org

**Lied Clinic Rotation** – An opportunity for a PGY1 or PGY2, from 1:00 – 5:00 pm, on Wednesdays and Thursdays, to perform pediatric oral evaluations. A screening form should be completed and given to the parents/legal care-givers of each patient seen. It is the responsibility of the dental postgraduate student to obtain parent/legal care-giver’s contact information and call the parent/legal care-giver to make an appointment for their child to be seen if the patient does not have a pediatric dentist or dental home. Referral forms from the UNLV SDM pediatric dental program should be given to the parent/legal care-giver at the screening visit.

**UMC Lied Pediatric Outpatient Center**
1524 Pinto Land, 3rd Floor  
Las Vegas, NV 89106 (702) 383-3642  
Contact: Scott Denton, M.D. Director

**Surgery Center/Hospital OR Rotations** – Hospital cases are treated at UMC. The postgraduate student must complete their hospital dentistry orientation and become credentialed at each facility, in order to treat patients at these locations. In anticipation of the PGY1 postgraduate students providing oral rehabilitation on their own patients, one or two PGY1 postgraduate students will observe one PGY2 postgraduate student treating their oral rehabilitation cases, according to the rotation schedule, during the fall semester. By the spring semester, the PGY1 postgraduate student will begin to treat their own hospital cases. They will initially split the day with a PGY2 postgraduate student. Cases should be reviewed with the attending faculty 2 weeks prior to the surgery date. The hospital cases start at 7:00 a.m., so arrive early enough to be dressed and ensure the room is prepared and ready for the patient by 6:45 a.m. At this time, you will review the
cases with the attending and talk with the patient’s family prior to surgery. The facilities have scrubs into which to change.

**University Medical Center**  
Out-Patient Surgery  
1800 W. Charleston Blvd.  
Las Vegas, NV 89102  
(702)383-2000

**Anesthesia Rotation** – The PGY1 postgraduate will complete an Anesthesia Rotation during their first year for four weeks.

**University Medical Center**  
1800 W. Charleston Blvd.  
Las Vegas, NV 89102  
(702) 383-2000

**Pediatric Medicine Rotation** – The PGY1 postgraduate students will complete the Pediatric Medical Rotation at UMC for two weeks.

Samrat V. Das, Director  
Chief Residents Office (702) 671-6444  
Email: chiefpedslv@gmail.com  
University Medical Center  
1800 W. Charleston Blvd.  
Las Vegas, NV 89102

**Emergency Medical Rotation** – The PGY1 postgraduate students will complete the Emergency Pediatric Medicine rotation at the University Medical Center (UMC) for two (2) weeks.

David D. Nelson, M.D., Director (702) 449-9903  
Email: ddnelson@cox.net

**University Medical Center**  
1800 W. Charleston Blvd, Las Vegas, NV 89102 (702) 671-6444

**Emergency Room (ER)/Emergency Department (ED) On-Call** – We have an affiliation with UMC, Pediatric Emergency Department. For all pediatric dental emergency cases, a PGY2 and PGY1 postgraduate student will be responsible for one week of On-Call at a time. The ER/Department will call the “first call” postgraduate student and it is the responsibility of this postgraduate student to contact the “second call” postgraduate student and the Attending on call, if necessary. **The postgraduate student(s) must call back within ten (10) minutes. Arrive at the UMC, Emergency Room (ER)/Emergency Department (ED) within 30 minutes of receiving the initial phone call when appropriate.**

A dental box is placed in the doctors’ lounge in the department. There is a handout in the dental box that can be used as a guide for the dental exam and diagnosis portion of the examination. Please make a copy
and place in the dental box, if you use the last handout.

The pediatric dental postgraduate student must identify and obtain the necessary contact information, if the patient has a local pediatric dentist, or general dentist, to be notified of the emergency details. The pediatric dental postgraduate student must offer patient follow-up care for all trauma cases and for all other cases, without a dental home. The pediatric dental postgraduate student must give the patient and parent/legal care-giver, a copy of our referral form, to be seen within the next day or two. A copy of the progress note from ED visit must be faxed to Roxanne and the pediatric clinic before leaving the ED. 702-774-2587. Also, please return any used dental instruments to the dental box within 48 – 72 hours.

If the On-Call, pediatric dental postgraduate student, cannot be available during their assigned On-Call days, it is the responsibility of the On-Call postgraduate student to coordinate a time in which they and another pediatric dental postgraduate student can exchange their assigned On-Call times. This exchange must be made four (4) weeks prior to their assigned call. The On-Call postgraduate student must immediately notify the Chief Postgraduate Student by email to ensure that the UMC ER/ED is informed as well as the other pediatric dental postgraduate students, of the change(s). There are not additional considerations provided for those postgraduate students who are On-Call for holidays and any other special days.

**Private Practice Observation Rotation** - There are opportunities to visit UNLV SDM pediatric dental faculty practices to learn about the management and operation of a pediatric dental practice.

**Pediatric Patient Flow**

**Emergency Visit**

- Parent/legal care-giver arrives at main reception on 1st floor UNLV SDM.
- If the patient is 0-16 years of age, the front administrative personnel contact the Pediatric Dental Clinic receptionist.
- The patient is placed into the schedule. If the clinic is not active, the postgraduate students On-Call are contacted to see the patient.

**OR**

- Parent/legal care-giver calls the Pediatric Clinic. The Receptionist schedules an emergency appointment
- The parent/legal care-giver and patient are escorted to the pediatric dental clinic.
- The parent/legal care-giver completes the patient information, medical and dental history forms, as well as provides written informed consent for treatment.
- The parent/legal care-giver pays the emergency fee
- The patient is evaluated for the specific problem. Necessary radiographs are obtained for limited, specific emergency treatment.
- The definitive treatment for the day is discussed with the parent/legal care-giver and treatment is approved by the parent/legal care-giver and attending pediatric dental faculty.
- The patient’s information is entered into the axiUm software system. All paper forms and consultations, non-digital/electronic radiographs and photographic images, will be scanned into the system.
- When patient treatment is complete, the postgraduate student must complete all electronic treatment notes and schedule a follow-up visit, as indicated. The next visit note must be detailed to ensure ease
of preparation by the dental assistant and postgraduate student, who sees the patient, for the subsequent appointment.

• A clinic evaluation form is given to the parent/guardian and collected by the receptionist.

### New Patient Visit

- Parent/legal care-giver contact the front desk UNLV SDM
- If the patient is 0-16 years of age, the front administrative staff person contacts the Pediatric Dental Clinic Receptionist and transfers the call or gives the parent/legal care-giver the telephone number of the Pediatric Dental Clinic

OR

- Parent/legal care-giver calls the pediatric Residency Clinic. The Receptionist schedules a New Patient Visit.
- The receptionist schedules a New Patient Visit.
- The appointment is confirmed the day before.
- When the patient arrives for their appointment to the front desk at UNLV SDM, the staff personnel checks the AxiUm software schedule to verify their appointment and changes their status to “arrived.”
- The parent/legal care-giver and patient are escorted to the Pediatric Dental Clinic.
- The parent/legal care-giver completes the patient information and medical and dental history forms as well as consent for treatment.
- The parent/legal care-giver pays the estimated fee for New Patient Visit.
- The patient is evaluated with the parent/guardian present. Necessary radiographs are obtained.
- A definitive treatment plan is presented to the parent/legal care-giver as well as treatment options.
- The Patient Treatment Plan is approved by the parent/legal care-giver and the attending pediatric dentist.
- Appropriate consent forms are obtained for treatment.
- If approved, a portion of the treatment is completed on the New Patient Visit.
- The patient’s information is entered into the patient record and forms are scanned in.
- When patient treatment is completed, the postgraduate student completes treatment notes and schedules a follow-up visit.
- When all treatment is complete, the patient is scheduled for a 6-month recall appointment.

### Hospital Visit

- If a patient requires treatment under General Anesthesia, the parent/legal care-giver signs the consent form, is given written instructions for preparation and an H&P form to be completed by their pediatrician.
- The postgraduate student reviews the instructions with the parent/guardian.
- The patient is scheduled at the surgical facility by the office staff and given specific information regarding the facility.
- The postgraduate student will call the patient the following post-op day to check on the patient’s condition.

### Conscious Sedation Protocol

**Pre-Sedation:**

- Patients requiring conscious sedation are identified.
• The patient’s weight and height is obtained to determine their BMI. Their physician’s name is verified with the parent/legal care-giver.
• The completed pre-sedation record includes:
  • Medical History:
    o Allergies and previous adverse drug reactions
    o Current medications (including all OTC)
    o Relevant diseases, physical/neurologic impairment
    o Previous sedation/general anesthetic experience(s)
    o Snoring, obstructive sleep apnea, mouth breathing symptoms and history
    o Other significant finding (e.g. family history)
  • Airway Assessment:
    o Mouth Breathing
    o Snoring nightly
    o Obesity
    o Limited neck mobility
    o Micro/retrognathia
    o Macroglossia
    o Tonsillar hypertrophy obstruction
    o Limited and difficult oral opening
  • Indications/Contradictions for sedation are noted.
  • ASA Classification is recorded.
  • Indications for medical consultation are recorded.

If the postgraduate student dentist or attending pediatric dentist, suspects a medical problem, a pre-sedation medical consultation from the patient’s physician must be obtained. The requested medical consultation must be obtained. The requested medical consultation must be received, prior to scheduling the procedure, unless an emergency situation exists that may cause permanent injury, if there is a delay in treatment.
  • The pre-sedation record is signed by the postgraduate student’s attending pediatric dentist and dated.
  • The signed informed consent is obtained from the parent/legal guardian and dated.
  • This form is also signed and dated by a pediatric dental staff witness.
  • The proposed treatment plan signed consent is obtained, if not already present in the patient’s record.
  • Oral sedation instructions are explained, in the appropriate language, and given to the parent/legal care-giver to take home, for their review, as well as an appointment card.

Day of Sedation:
• The patient comes to the clinic one hour prior to treatment time with the parent/legal care-giver and accompanying adult.
• The postgraduate student dentist completes the assessment including:
  o Medical History and Review of Systems
  o NPO status
  o Airway patency
  o Pre-treatment check list
  o Vital signs (heart rate, respiration rate, blood pressure, and temperature, if possible)
  o Weight in pounds and kilograms
• Cooperation level is indicated.
• The parent/legal care-giver is provided an opportunity to ask questions and reaffirm their consent for sedation and planned treatment.
Correct drug dosage calculations are approved by the attending pediatric dental faculty; the medications are then entered in the drug log, in the medicine cabinet and witnessed.

The patient is given the medication and time is noted. The patient’s behavior is noted, regarding cooperation.

The patient is left in the treatment room with the parent/legal care-giver. The treating postgraduate student and a dental assistant will check on the sedated patient throughout the waiting period.

**The Sedation Procedure:**

- The assistant sets up the room with all the necessary equipment, supplies, and monitors. All monitors and equipment are tested prior to seating the patient.
- The parent/legal care-giver is instructed to not leave the pediatric dental reception/waiting room, throughout the planned treatment. Name verification of the additional, accompanying adult is made and recorded.
- The patient is seated and the time is noted on the sedation record.
- Baseline vital are recorded.
- All sedation agents and administration time(s) are recorded on the sedation record.
- Consented immobilization devices are utilized, if necessary, in a way which does not restrict the airway or chest movement.
- N2O/O2 analgesia is initiated; start time is noted, as well as both of N2O and O2 percentages delivered, as well as length of time administered, during the treatment.
- The necessary dental procedures are completed, while being monitored, continuously, with an pulse oximeter and blood pressure cuff monitor, if possible, based on the patient’s behavior.
- Caution is taken to prevent excess fluids from collecting in the mouth. A rubber dam or isolate must be used during sedations.
- Vital signs are periodically documented on the sedation record in a time-based record.
- Continuous monitoring and maintenance of the patient’s airway, occurs throughout the patient’s treatment.
- Sedation level, effectiveness, and patient responsiveness, during the treatment are documented in the record.
- For the patient’s safety, the following must be immediately available:
  - A functioning back-up suction apparatus must be present.
  - A functioning back-up power source must be present
  - Auxiliary personnel must be certified in basic cardio-pulmonary resuscitation by the AHA and the facility must be properly equipped.

**Post Treatment:**

- The patient is observed in a recovery area until:
  - Cardiovascular function is satisfactory and stable.
  - Airway patency is satisfactory and stable.
  - Patient is easily arousable.
  - Responsiveness is near pre-sedation level.
  - Protective reflexes are intact.
  - Patient can talk (return to pre-sedation level).
  - State of hydration is adequate.
- Discharge vital signs are documented.
- Post-operative instructions are given regarding the post-sedated patient’s head posture and reviewed with the parent/legal care-giver, along with any emergency contact telephone number.
- The next appointment visit is scheduled.
- The post graduate student will contact the parent/legal care-giver, later in the day of treatment, to determine the post treatment status as well as record the findings in the patient’s Electronic Health Record.
**Postgraduate Student Curriculum**

- Year One: Fall Semester (July - December)

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Name</th>
<th>Semester</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORTHO 8001</td>
<td>Introduction to Orthodontics (Ortho Boot Camp)</td>
<td>July-August</td>
<td>3</td>
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<tr>
<td>ORTHO 8102</td>
<td>Orthodontics Seminars I</td>
<td>September-December</td>
<td>2</td>
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<tr>
<td>PEDO 8001</td>
<td>Introduction to Pediatric Dentistry (PALS) (pedo Boot Camp)</td>
<td>July-August</td>
<td>10</td>
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<tr>
<td>PEDO 8101</td>
<td>Clinical Seminars I</td>
<td>September-December</td>
<td>4</td>
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<tr>
<td>PEDO 8201</td>
<td>Postgraduate Clinic I (Includes community clinic rotations)</td>
<td>July-December</td>
<td>17</td>
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<tr>
<td>PEDO 8802</td>
<td>Literature Review I</td>
<td>September-December</td>
<td>2</td>
</tr>
<tr>
<td>PEDO 8910</td>
<td>Special Patient Care I and Board Review</td>
<td>September-December</td>
<td>2</td>
</tr>
<tr>
<td>PGDE 8402</td>
<td>Biomedical Sciences Core I</td>
<td>September-December</td>
<td>2</td>
</tr>
<tr>
<td>PGDE 8516</td>
<td>Advanced Radiology</td>
<td>July-August</td>
<td>2</td>
</tr>
<tr>
<td>PGDE 8701</td>
<td>Methods of Literature Review/Scientific Writing</td>
<td>September-December</td>
<td>2</td>
</tr>
</tbody>
</table>

**TOTAL Y1 FALL CREDITS = 46**

*All courses are subject to periodic revision, as necessary, for continued curriculum development*
Year One: Spring Semester (January - July)

<table>
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<tr>
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<th>Course Name</th>
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<tr>
<td>PEDO 8101</td>
<td>Clinical Seminars I</td>
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<td>PEDO 8201</td>
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<td></td>
<td>January – April</td>
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<tr>
<td>PEDO 8802</td>
<td>Literature Review</td>
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<td>January – May</td>
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<tr>
<td>PEDO 8910</td>
<td>Special Patient Care and Board Review</td>
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<td>January – April</td>
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<tr>
<td>PEDO 8930</td>
<td>Anesthesiology Rotation</td>
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<tr>
<td></td>
<td>One month (4 weeks) rotation</td>
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<tr>
<td>PEDO 8940</td>
<td>Emergency Medicine Rotation</td>
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<tr>
<td></td>
<td>One two-week rotation</td>
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<tr>
<td>PGDE 8950</td>
<td>Pediatric Medicine Rotation</td>
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<tr>
<td></td>
<td>One two-week rotation</td>
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<tr>
<td>PGDE 8312</td>
<td>Independent Research I</td>
<td>4</td>
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<td>January – April</td>
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<tr>
<td>PGDE 8403</td>
<td>Biomedical Sciences Core II</td>
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<td>January – April</td>
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<tr>
<td>PGDE 8703</td>
<td>Research Methodology, Biostatistics &amp; Epidemiology</td>
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<td></td>
<td>January – April</td>
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</table>

TOTAL Y1 SPRING CREDITS = 42

* All courses are subject to periodic revision, as necessary for continued curriculum development
Year Two: Fall Semester (July - December)

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<td>ORTHO 8314</td>
<td>Independent Research III&lt;br&gt;September – December&lt;br&gt;Credit hours: 2</td>
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<tr>
<td>PEDO 8102</td>
<td>Clinical Seminars II&lt;br&gt;September – December&lt;br&gt;Credit hours: 4</td>
</tr>
<tr>
<td>PEDO 8202</td>
<td>Postgraduate Clinic II&lt;br&gt;(Includes Hospital Dentistry &amp; community clinic rotations)&lt;br&gt;July – December&lt;br&gt;Credit hours: 18</td>
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<tr>
<td>PEDO 8803</td>
<td>Literature Review/Journal Club II&lt;br&gt;September – December&lt;br&gt;Credit hours: 2</td>
</tr>
<tr>
<td>PEDO 8911</td>
<td>Board Review&lt;br&gt;September – December&lt;br&gt;Credit hours: 2</td>
</tr>
<tr>
<td>PGDE 8313</td>
<td>Independent Research II&lt;br&gt;July – August&lt;br&gt;Credit hours: 2</td>
</tr>
<tr>
<td>PGDE 8715</td>
<td>Practice Management&lt;br&gt;September – December&lt;br&gt;Credit hours: 2</td>
</tr>
<tr>
<td>PGDE 8503</td>
<td>Interdisciplinary Growth and Development&lt;br&gt;September – December&lt;br&gt;Credit hours: 2</td>
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</table>

TOTAL Y2 FALL CREDITS = 32

*All courses are subject to periodic revision, as necessary, for continued curriculum development*
Year Two: Spring Semester (January - June)

<table>
<thead>
<tr>
<th>*Course</th>
<th>Course Name</th>
<th>January – April</th>
<th>Credit hours:</th>
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<tbody>
<tr>
<td>PEDO 8102</td>
<td>Clinical Seminars II</td>
<td></td>
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<tr>
<td>PEDO 8202</td>
<td>Postgraduate Clinic II</td>
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<tr>
<td>PEDO 8803</td>
<td>Literature Review</td>
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<tr>
<td>PEDO 8911</td>
<td>Board Review II</td>
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<td>PGDE 8315</td>
<td>Independent Research IV</td>
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<tr>
<td>PGDE 8716</td>
<td>Patient Management</td>
<td></td>
<td>2</td>
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</tbody>
</table>

TOTAL Y2 SPRING CREDITS = 31

TOTAL PROGRAM CREDITS = 151

*All courses are subject to periodic revision, as necessary, for continued curriculum development
Postgraduate Student Evaluation

Evaluation is a continuing process in the seminar and clinical setting. Informal feedback is provided to postgraduate students through their constant interaction with faculty. Reports of the postgraduate students’ clinical activities are reviewed on an end of semester, six-month basis, to ensure that the postgraduate student is making satisfactory progress during the program. At the beginning of each rotation, the postgraduate student is responsible to provide each rotation director or their designee, the specific evaluation form for each rotation. Each rotation evaluation form must be completed, by the rotation director or their designee and returned to the pediatric dental Program Director, upon completion of each rotation. A self-addressed, stamped envelope will be provided by the pediatric dental program’s Administrative Assistant. The envelope and evaluation form must be provided to the facility director or designee at the beginning of the rotation. Faculty evaluations and postgraduate student evaluations are completed, on a semi-annual basis. Postgraduate students have the opportunity to discuss these evaluations with the Program Director. These evaluations are meant to be a constructive and informative dialogue, between the Program Director and postgraduate student.

Overall postgraduate student performance in the program will be examined biannually. Attendance is mandatory for all class and clinical sessions. Postgraduate students must pass all courses. Postgraduate students may discuss the results of these reviews with the Program director. Unsatisfactory performance can result in remediation, informal or formal probation and/or dismissal from the program. Previous program(s) coursework cannot be applied as a supplement or replacement for the course requirements in the completion of the UNLV SDM, Advanced Education Program in Pediatric Dentistry. The UNLV SDM, Advanced Education Program in Pediatric Dentistry coursework, is specifically designed for the program.

Attendance Policy

The Program Director has established an attendance policy that is to be followed by all postgraduate students attending any Advanced Education Program at UNLV SDM. Attendance is required at all activities scheduled by the program. Please note that some required activities such as clinic, classes and rotation are scheduled on weekends. If a lecture is scheduled, it will be mandatory for all postgraduate students to attend, unless they have received permission to be absent from the Program Director. There are community out-reach programs, on some Saturdays, that postgraduate students will attend, on a rotating basis, except, “Give Kids A Smile” (GKAS), which is attended by all postgraduate students. Non-UNLV employment is prohibited from Monday through Friday, between 8:00 a.m. to 5:00 p.m., as well as any required additional times, as specified for lectures, continuing education courses and scheduled Saturday, community out-reach programs.

• Personal Days/Sick Leave
  Each postgraduate student is allowed up to eight (8) personal days per academic year, in addition to designated holidays, when not “On-Call”. Beginning July 1st of each year, personal days that are
not used in one academic year will not be carried over to the following academic year. "Personal Days" are primarily for vacation or interviews as well as for illness, medical and other family/personal emergencies. Completed and accurately-dated Leave Request Forms must be turned in to the Pediatric Dental Clinic Manager for planned leave requests at least 4 weeks prior to the leave request in order to verify the amount of personal days available and to obtain approval from the Program Director. Leave requests must be for either a half day or a full day; leave requests will not be considered for anything less than a half day. Submittal of a leave request does not guarantee that leave will be granted.

Postgraduate students will be notified by the Pediatric Dental Clinic Manager and/or Program Administrative Assistant, when the leave request is approved or denied by the Program Director. However, it is the postgraduate students’ responsibility to verify approval of requested leave on the General Calendar, before making travel arrangements, since the postgraduate student accepts all financial responsibility related to denial of their request, should that decision be made. If the postgraduate student does not see his or her name on the General Calendar, the postgraduate student must contact the Clinic Manager for verification. All personal days must be approved by the Program Director in addition to the faculty/course director for each particular class that will be missed. Postgraduate students will not be allowed to arbitrarily change their schedule. No more than two postgraduate students per postgraduate student class can take leave at the same time, unless it is a time when the clinic is closed. Approved leave will be on a first come, first serve basis, at the discretion of the Program Director. Continuing Education (CE) course selection must be approved before you will receive approval for attendance. CE will not count against your eight (8) personal days of leave.

If a postgraduate student needs to be absent from clinic or class due to personal illness or family/personal emergency, the Pediatric Dental Clinic Manager and Program Administrative Assistant, must be contacted immediately at (702) 774-2417 and (702) 774-2416, respectively. Upon their return or as required by the Program Director, the postgraduate student must provide a completed leave slip on a weekly basis and turn it into the Clinic Manager to obtain a signature of approval from the Program Director. If a postgraduate student appears to be abusing the sick policy, a physician’s excuse may be required. Medical appointments should not conflict with class or clinic attendance. Postgraduate students should always make every effort to schedule appointments at times when they are not scheduled for clinic or classes. Leave time due to medical appointments may count as either sick time or personal time. A leave slip must be submitted for approval prior to medical appointments. In case of a program-required event and/or an approved academic meeting or regional state board exams, postgraduate students must complete the Leave Request Form for the time they will not be on campus. Attendance at such meetings and/or events will not count against allotted personal time, but must be approved by the Program Director prior to the meeting.

• **Leaving campus when assigned to the clinic.**

Postgraduate students are not to leave the campus when assigned to the clinic, even if you don’t have a patient scheduled to arrive. All postgraduate students will remain in the clinic or in the home room until all patients have been seen for the day. If you will be on campus somewhere other than the clinic or home room, you should inform the clinic manager where you will be so they can be needed in clinic. If you are found to have left the campus before all patients are
dismissed, you will be assessed a half day of personal leave.

- **Unapproved Absences**
  Should an unfortunate situation arise when a postgraduate student is absent without proper documentation and/or following protocol as set forth by the Program Director and detailed above, he or she will be assessed leave time of an additional day for each unapproved absence day.

## Special Circumstance Leave Policy

The purpose of this policy is to provide guidelines regarding leave of absence for a period exceeding the approved eight (8) “Personal Days” per year in addition to holidays. If a postgraduate student in an Advanced Dental Education program exceeds the allowed-time, for personal days, and the Program Director, in consultation with the faculty, Advanced Education Committee (AEC), and Dean, will develop a plan to ensure that all clinical, educational and research needs of the affected postgraduate student’s program, as they relate to the UNLV SDM, graduation and C.O.D.A. requirements, are met. This includes, but not limited to: additional reading, lectures, reports, and examinations; giving back research time to attend clinic; giving up spring break time, taking additional calls; **extending the length of the program beyond the minimum twenty-four (24) months.**

The UNLV SDM, Advanced Education Programs, recognizes that in some special instances it will be necessary for a student to interrupt and/or discontinue their specialty education. Leave that is required for an extended period of time (such as medical leave, maternity leave or leave for family/personal related emergencies), will be dealt with on an individual basis and will directly lead to extended time in the program, to ensure completion of all requirements, as required by the A.D.A. and the C.O.D.A. Such decisions will be made by the Program Director, in consultation with the faculty, the Advanced Education Committee (AEC), Dean and the postgraduate student.

## Dress Code

Postgraduate students must maintain a professional appearance at all times particularly since postgraduate students may be required to go to clinic on short notice. Postgraduate students must wear scrubs during all clinical sessions. Scrubs for the pediatric postgraduate students are ceil blue. Scrubs must not have any names, logos, unacceptable wording, diagrams or images, determined by the Program Director. Clinical attire includes acceptable, clean, “closed-toe” shoes and mid-calf socks. Postgraduate students may not chew gum or bring food/drink into the clinic area. No food or drink is permitted in the reception room or treatment areas by faculty, postgraduate students, staff, patients, other children or parent/legal care-givers.*

Your radiology dosimeter must be visibly worn, when provided whenever you are in pediatric dental clinic and placed on your clinic information, wall file, when not being worn. **Do not throw your dosimeter away.**

All Personal Protective Equipment (PPE), including safety glasses/side shields with prescription eyewear, must always be worn, correctly, **covering your eyes**, whenever you are chairside. Face shields always require safety glasses/side shields with prescription eyewear, in addition to the face shield.*
Failure to follow all clinic polices, can result in suspension of your clinic privileges, until you comply, in the fullest.

Disability Resource Center (DRC)

Please refer to the UNLV, School of Dental Medicine, Student Manual, for the protocol to access, the Disability Resource Center. Should you require information regarding any disability concerns, please contact, Christine Ancajas, D.D.S., Assistant Dean for Admissions and Student Affairs, at the UNLV SDM. She will provide you with the necessary information, required for you to contact the DRC, which is on the main, UNLV, campus.

HOLIDAYS
(7/1/16 – 6/30/17)

There will always be two postgraduate students On-Call during holidays. The dates below will be divided equally between postgraduate students. PGS1 students will be On-Call for Thanksgiving and Winter Break. PGS2 postgraduate students will be On-Call for the SDM/Pediatric Dental Program, over Spring Break.

2016

<table>
<thead>
<tr>
<th>Holiday</th>
<th>Date</th>
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<td>Independence Day</td>
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<td>Labor Day</td>
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<td>Nevada Day</td>
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<td>Thanksgiving Day</td>
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<td>Winter Break</td>
<td>December 19 - January 3, 2016 (No Clinic)</td>
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2017

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<thead>
<tr>
<th>Holiday</th>
<th>Date</th>
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<tr>
<td>New Year’s Day</td>
<td>January 1 (Jan 2)</td>
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<td>Martin L. King, Jr. Day</td>
<td>January 16</td>
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<tr>
<td>Washington’s Birthday</td>
<td>February 20</td>
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<tr>
<td>Spring Break</td>
<td>as Scheduled</td>
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<tr>
<td>Memorial Day</td>
<td>May 29</td>
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Chief Postgraduate Student

Chief Postgraduate Student Job Description for the Advanced Education Program in Pediatric Dentistry

The Chief Postgraduate Student in Pediatric Dentistry will be appointed by the Program Director of the Advanced Education Program in Pediatric Dentistry. A Chief Postgraduate Student for pediatric dentistry should possess the following qualities: leadership potential, mediation skills, capacity for self-direction, tolerance for ambiguity, optimism, respect for established policies and the ability to appropriately use a sense of humor. Other general traits such as organizational skills, responsibility, commitment, and willingness to work cooperatively in an interdisciplinary environment are essential as well.

The Chief Postgraduate Student position will be split among selected postgraduate students, each with a six (6) month term. The incoming Chief Postgraduate Student will work together with the outgoing Chief Postgraduate Student throughout the last month to assure appropriate and coordinated transition of Chief Postgraduate Student responsibilities.

The Chief Postgraduate Student will act directly under the program director and will not create policy, but will support the policies of the Program Director. The Chief Postgraduate Student in pediatric dentistry has considerable potential to make significant contributions, both immediate and long-term, to the postgraduate program. Postgraduate student training will ultimately benefit from the efforts of a strong, innovative Chief Postgraduate Student who is actively involved in both the administrative and academic aspects of the training program. The Chief Postgraduate Student should be a source of new ideas and initiative. The Chief Postgraduate Student is the leader of the other postgraduate students and acts as their spokesperson. The Chief Postgraduate Student will represent them at pediatric dentistry advanced education program functions and will help the Program Director and clinic administrators coordinate program activities. Conflicts in the schedule will be addressed by the Chief Postgraduate Student and they will conduct monthly meetings and report the outcomes of such meetings at departmental meetings. Other activities include: incoming postgraduate student activities; recruitment; coordination of social activities surrounding residency applicant interviews; annual alumni/postgraduate student continuing education (CE) programs and coordination of activities that involve hospitals, surgical facilities, community out-reach clinics, and volunteer activities. During the course of the year, other responsibilities may be assigned by the Program Director. The Chief Postgraduate Student will also assume teaching responsibilities during this period and will be allotted preparation time out of clinic as designated by the Program Director.

Goals for the Chief Postgraduate Student

The goals for the Chief Postgraduate Student are to become an effective leader, role model, administrator and competent clinician. In addition, the Chief Postgraduate Student should strive to be a clinician educator, incorporating principles of adult-education. The Chief Postgraduate Student should be an integral component in the promotion and improvement of the pediatric dentistry postgraduate program.
Knowledge Objectives

By the end of the Chief Postgraduate Student term, the successful Chief Postgraduate Student should:

- Understand the process of teaching postgraduate students varying levels of ability.
- Learn the principles of effective supervision of postgraduate students in the care of patients.
- Understand the principles of quality care assessment, systems-based care, and process implementation.
- Acquire knowledge of different leadership and negotiation styles to achieve a desired outcome.
- Continue development of scientifically based pediatric dental knowledge and clinical skills in providing patient care.
- Understand the process of project development and presentation; including budget planning, team organization and management, time management, and critical assessment.
- Understand the use of information databases, literature reviews, and computer technology to achieve administrative and educational goals.
- Understand the professional peer-review process.

Responsibilities of the Chief Postgraduate Student in Pediatric Dentistry

- Contact Availability: The Chief Postgraduate Student shall carry a cell phone for contact availability on a twenty-four basis. The cell-phone number shall be made available to all postgraduate students and pediatric dental faculty and to the administrative staff at UMC or other On-Call facilities.
- Call Schedule: The Chief Postgraduate Student will be solely responsible for the creation of the On-Call schedule and shall ensure compliance. Any breaches in the schedule will be the Chief Postgraduate Student’s responsibility.
- Weekly Meetings with Program Director: The Chief Postgraduate Student will meet weekly, or as required, with the Program Director to review postgraduate student and program issues, as well as discuss opportunities for improvement.
- Departmental and Administrative Meetings: The Chief Postgraduate Student will attend all section faculty and administrative meetings, including scheduling and staffing and other meetings as assigned by the program director. The Chief Postgraduate Student is the representative of the postgraduate students at all such meetings and is responsible for communicating the results of such meetings to the other postgraduate students in a timely manner.
- Monthly Postgraduate Student Meetings: The Chief Postgraduate Student will conduct a monthly meeting of all pediatric dentistry postgraduate students outside of clinic hours. The purpose of these meetings shall be to communicate information from the Program Director and the attending faculty and to acquire feedback from the postgraduate students and to report such feedback to the program director. These meetings shall also serve as coordination meetings to assure appropriate postgraduate student conduct as related to schedules, rotations and patient care policies. Postgraduate student are encouraged to use the Postgraduate Student Comment Form to initiate discussion at postgraduate student meetings. This is not a time to criticize faculty or create turmoil,
but to support the program and the Program Director in an effort to provide the best training possible.

- Liaison between Faculty and Staff: The Chief Postgraduate Student will work with clinical and administrative staff to assure favorable working relationships with support staff and will act as the liaison with the clinic director to assure appropriate adherence to clinical policies and procedures.

- Coordinate Special Seminar Topics and Scheduling: The Chief Postgraduate Student will be responsible for the scheduling of special seminars and educational activities outside of the general program schedule, in consultation with the Program Director.

- Annual Alumni/Postgraduate student Program: The Chief Postgraduate Student will work with the Alumni Association and the Program Director in creating and planning an annual UNLV SDM, Pediatric Dentistry Alumni/Postgraduate student program to be held at the AAPD annual meeting.

- Postgraduate Student Admissions: The Chief Postgraduate Student will serve as the postgraduate student representative on the Pediatric Dentistry Postgraduate Admissions Committee. The Chief Postgraduate Student will be responsible for coordinating the participation and input of the other postgraduate students in the admissions process.

- Incoming Postgraduate Students Orientation: The Chief Postgraduate Student will work with the Program Director in coordinating incoming postgraduate student activities for the PGS1 pediatric dentistry postgraduate students during the first week(s) of the program. This includes, but is not limited to, orientation seminars, tours, program activities and social events.

- Calendar: The Chief Postgraduate Student will be responsible for updating and maintaining the Pediatric Dentistry online calendar under “Advanced Education Programs”. These calendars should include postgraduate student activities such as: seminars, clinical rotations, and general anesthesia assignments, off-site clinic rotations, teaching assignments, On-Call schedule, vacation exceptions, and other assigned activities.

- Other Duties: It is expected that the Chief Postgraduate Student will work with the Program Director in identifying other duties that may be helpful in administering the pediatric dentistry residency program. In addition, any of the above duties may be modified or eliminated, or, additional duties assigned, with the approval of the Program Director.
Grading Systems

The following grading system complies with Nevada System of Higher Education campus grading policies and will be used for UNLV SDM Advanced Education in Pediatric Dentistry courses.

S  Satisfactory
U  Unsatisfactory
V  Incomplete
X  In progress (research projects or courses extending beyond one semester
F  Fail
W  Withdrawal

In some instances, some courses will not be designated as Satisfactory/Unsatisfactory (S/U) courses and the following grades will apply:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Grade Point Value</th>
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<tbody>
<tr>
<td>90-100</td>
<td>A (Superior)</td>
<td>4.0</td>
</tr>
<tr>
<td>80-99</td>
<td>B (Above Average)</td>
<td>3.0</td>
</tr>
<tr>
<td>0-79.9</td>
<td>F (Failure)</td>
<td>0.0</td>
</tr>
</tbody>
</table>

In this grading system, each postgraduate student must pass all courses with a “B” or higher grade, or “Satisfactory” grade in courses using the “S/U” method.

Postgraduate students will receive a letter grade from A-F, or a satisfactory (S) or unsatisfactory (U) / failing (F) grade in each course. Grade assignments will be based on class/clinic attendance, participation in discussions/seminars, timely completion of assignments/patient care, professionalism and preparedness. A grade of F is given to any postgraduate student who performs less than satisfactory in one or more of the above categories. Remediation will be solely at the discretion of the course director. A passing score for written and oral exams is 80% to 100%.

Upon completion of six months in the residency program, the evaluation given, will determine the residency participant’s academic progress. If it is determined that the postgraduate student is not meeting the requirements of the program the postgraduate student will be placed on probationary status. The Postgraduate student then has approximately six months to meet the satisfactory academic progress requirement. Satisfactory academic progress will be determined by the final evaluation administered at the end of the second six month period. The final evaluation will determine the postgraduate student’s matriculation.

Should a postgraduate student not meet satisfactory academic progress by the end of the second six month period, the postgraduate student’s program will then either be extended or terminated. If extended, the postgraduate student will be re-enrolled for those courses in which satisfactory academic progress has not been met.
Academic Separation/Dismissal

Academic Separation is the result of unsatisfactory performance as deemed by the Program Director and Faculty and entails involuntary removal from the SDM, Advanced Education Program in Pediatric Dentistry.

Any recommendation for Academic Separation by the Evaluation Committee shall be submitted to the Dean. The Dean (or his/her representative) shall:

1. Meet with the postgraduate student to discuss the recommendations for Academic Separation, and condition for reinstatement, including remedial procedures, if any.
2. Provide the postgraduate student with written notification of the Academic Separation/Dismissal indicating related conditions.

Grounds for Academic Separation include without limitation to:

1. Failure to satisfactorily pass all required courses; must have a minimum cumulative grade point average of 3.0 or Satisfactory/Pass in required coursework.
2. Failure to meet the conditions set by Faculty as a result of unacceptable evaluations.
3. Failure to adhere to standards and guidelines set forth by the Program.
4. Failure to complete specified requirements within the allotted time.
5. Failure to perform duties in a professional manner in regards to patient care, including interactions with faculty and staff.
6. Failure to attend classes or clinic sessions without authorization.
7. Failure to meet the conditions of Voluntary Leave of Absence.
8. Failure to respond to on-call emergencies.
9. Failure to abide by the UNLV SDM Professional Conduct Code.
10. Failure to pay required tuition and fees.
Due Process Policy

The purposes of the following policies and procedures are to assure the effective and adequate training of postgraduate students, to provide for a fair method addressing those postgraduate students who have difficulty meeting training requirements, and to insure safe patient care by postgraduate students. The following are guidelines that are intended to be applied when there is a question about a student’s progression in training with respect to academic, clinical, or disciplinary issues. Postgraduate students are provided a copy of these guidelines at the beginning of their program and they are available on each program’s website.

1. All Advanced Education Programs at UNLV SDM utilize the Advanced Education Committee (AEC) to address issues of postgraduate students’ promotion and probation. This committee considers evaluations and promotions. Membership on this committee includes the Associate Dean of Advanced Education, Office of Student Affairs and the Program Directors. This committee is responsible for the fair application of these probation guidelines.

2. The AEC will gather and discuss written evaluation by faculty of each postgraduate student on a regular basis, not less frequently than every six months. These evaluations, which assess the knowledge, skills, and attitudes of each postgraduate student are first reviewed with the postgraduate student by the Program Director and then submitted to the AEC. The Program Director meets with each postgraduate student once every six months to review all the postgraduate student’s evaluations and provides a copy of this review to the postgraduate student. The possible outcomes of each of these regular evaluation periods are:
   a. Satisfactory or above satisfactory performance.
   b. Performance which reveals areas of unsatisfactory performance requiring remediation.
   c. Serious concern about the postgraduate student’s overall performance requiring probation or dismissal.
   d. Immediate and grave difficulties requiring suspension of the postgraduate student from clinical responsibilities.

3. For postgraduate students whose performance is satisfactory or better, and for those whose performance requires focal remediation, the procedures are self-explanatory.

4. For postgraduate students whose performance evaluations reveal a level of difficulty requiring probation, the following guidelines apply:
   a. The Program Director will meet with the postgraduate student to review the specific areas of deficiency. This review will include clear and detailed delineation of the problem areas that the postgraduate student has displayed.
   b. The remediation plans will be clearly outlined in writing. This will include specific additional provisions for help or remediation and will include the type of remediation and who will provide it. Examples of such remediation may include but are not limited to additional supervision, additional reading, and modification of the postgraduate student’s clinical
responsibilities or counseling. These are only suggested areas of remediation and others may be included.

c. The length of probation, which usually should last from one to three months, will be specified, as will the specific improvements that are expected.

d. These three possible outcomes following a probation period are as follows:
   i. Removal from probation
   ii. Continuation of probation
   iii. Dismissal from training program

e. A letter outlining the above provisions of probation will be given to the postgraduate student, and a written response by the postgraduate student is expected. This response should include the postgraduate student’s understanding of the problems prompting the probation and the terms of the probation and remediation. The Department will decide if the response by the postgraduate student to the proposed probation is acceptable.

f. The postgraduate student’s salary if any will be continued during the probationary period.

g. If dismissal results from the probation process, the postgraduate student will be informed of the fair hearing process.

5. The following are guidelines for suspension of a postgraduate student.

   a. Suspension is defined as the interruption of the postgraduate student’s clinical and/or academic responsibilities due to an immediate and grave problem that results in serious danger to patients’ care or involves unethical conduct by the postgraduate student.

   b. The duration of suspension will be limited to one week, during which time a special meeting of the AEC must be held to re-evaluate the reasons for the suspension. The postgraduate student’s salary (if any) will be continued until this special meeting has been held.

   c. The possible outcomes following a suspension are reinstatement of the postgraduate student, probation, or dismissal.
FERPA General Guidelines for Students

General Information
The Family Education Rights and Privacy Act (FERPA) is a federal law that applies to educational agencies and institutions that receive funding under a program administered by the U. S. Department of Education. The statute is found at 20 U.S.C. § 1232g and the Department's regulations are found at 34 CFR Part 99.

Under FERPA, schools must generally afford students who are 18 years or over, or attending a postsecondary institution:

• Access to their education records
• An opportunity to seek to have the records amended
• Some control over the disclosure of information from the records.

Access to Education Records
Schools are required by FERPA to:

• Provide a student with an opportunity to inspect and review his or her education records within 45 days of the receipt of a request.
• Provide a student with copies of education records or otherwise make the records available to the student if the student, for instance, lives outside of commuting distance of the school.
• Redact the names and other personally identifiable information about other students that may be included in the student's education records.

Schools are not required by FERPA to:

• Create or maintain education records;
• Provide students with calendars, notices, or other information which does not generally contain information directly related to the student;
• Respond to questions about the student.

Amendment of Education Records
Under FERPA, a school must:

• Consider a request from a student to amend inaccurate or misleading information in the student's education records;
• Offer the student a hearing on the matter if it decides not to amend the records in accordance with the request;
• Offer the student a right to place a statement to be kept and disclosed with the record if as a result of the hearing the school still decides not to amend the record.

A school is not required to consider requests for amendment under FERPA that:

• Seek to change a grade or disciplinary decision;
• Seek to change the opinions or reflections of a school official or other person reflected in an education record.

A school must:

• Have a student's consent prior to the disclosure of education records, unless a FERPA exception
permits disclosure;
• Ensure that the consent is signed and dated and states the purpose of the disclosure.

A school MAY disclose education records without consent when:
• The disclosure is to school officials who have been determined to have legitimate educational interests as set forth in the institution's annual notification of rights to students;
• The student is seeking or intending to enroll in another school;
• The disclosure is to state or local educational authorities auditing or enforcing Federal or State supported education programs or enforcing federal laws which relate to those programs;
• The disclosure is to the parents of a student who is a dependent for income tax purposes;
• The disclosure is in connection with determining eligibility, amounts, and terms for financial aid or enforcing the terms and conditions of financial aid;
• The disclosure is pursuant to a lawfully issued court order or subpoena; or
• The information disclosed has been appropriately designated as directory information by the school.

Annual Notification
A school must annually notify students in attendance that they may:
• Inspect and review their education records;
• Seek amendment of inaccurate or misleading information in their education records;
• Consent to most disclosures of personally identifiable information from education records.

The annual notice must also include:
• Information for a student to file a complaint of an alleged violation with the Family Policy Compliance Office;
• A description of who is considered to be a school official and what is considered to be a legitimate educational interest so that information may be shared with that individual; and
• Information about who to contact to seek access or amendment of education records.

Means of notification:
• Can include student newspaper; calendar; student programs guide; rules handbook, or other means reasonable likely to inform students;
• Notification does not have to be made individually to students.

Complaints of Alleged Violations

Complaints of alleged violations may be addressed to:
Family Policy Compliance Office
US Department of Education
400 Maryland Avenue
SW Washington DC 20202-5920
Phone: (202)260-3887
Complaints must:

- Be timely submitted, not later than 180 days from the date you learned of the circumstances of the alleged violation;
- Contain specific allegations of fact giving reasonable cause to believe that a violation has occurred, including:
- Relevant dates, such as the date of a request or a disclosure and the date the student learned of the alleged violation;
- Names and titles of those school officials and other third parties involved;
- A specific description of the education record around which the alleged violation occurred;
- A description of any contact with school officials regarding the matter, including dates and estimated times of telephone calls and/or copies of any correspondence exchanged between the student and the school regarding the matter;
- The name and address of the school, school district, and superintendent of the district;
- Any additional evidence that would be helpful in the consideration of the complaint.

Required Notice of Opportunity and Procedure to File Complaints with Commission on Dental Accreditation (CODA)

The intent of this message is to inform students, faculty, constituent dental societies, stat boards of dentistry and other interested parties that an appropriate, signed complaint (see definition below) may be submitted to the Commission on Dental Accreditation regarding any Commission accredited dental, allied dental or advanced education program.

Definition of Complaint

- A complaint is defined by CODA as one alleging that a Commission accredited educational program may not be in substantial compliance with Commission standards or required accreditation procedures.
- These issues and concerns may be discussed with the Associate Dean of Advanced Education, at any time.
- 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 treatment received by patients or individuals in 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 treatment received by patients or 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 extensions 4653.
- Policy on Complaints Directed at CODA-Accredited Educational Programs: Students, faculty, constituent dental societies, state boards of dentistry, and other interested parties may submit an appropriate, signed complaint to the Commission on Dental Accreditation (211 East Chicago Avenue, Chicago, IL 60611-2678) regarding any CODA-accredited dental, allied dental or advanced dental education program, or a program that has an application for initial accreditation pending. An “appropriate” complaint is one that directly addresses a program’s compliance with the Commission’s standards, policies and procedures. The Commission is interested in the continued improvement and sustained quality of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.
Advanced Education Program in Pediatric Dentistry
Postgraduate Student
Complaint Form
(Official Complaints, Comments, and Suggestions)

Name: ________________________________

Date: ________________________________

Date received: ________________________

Please write a formal statement about your concern, comment, or suggestion:

Result of meeting to be recorded by the Chief Postgraduate student:

All forms must be submitted to the Chief Postgraduate Student in person. All APPROPRIATE topics will form the agenda at monthly postgraduate student meetings and results recorded. The Chief Postgraduate Student will hold names confidential; however, names may be revealed to the Program Director during consultation as needed.

Date Discussed: ________________Chief Postgraduate Student Initials: ____________
ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING OF UNLV SDM STUDENT HANDBOOK WHICH INCLUDES THE ADVANCED EDUCATION PROGRAM IN PEDIATRIC DENTISTRY HANDBOOK

By initialing the items below, I indicate that I have read and understood the following:

__________ I have received the UNLV School of Dental Medicine’s Advanced Education Program in Pediatric Dentistry Postgraduate Student Handbook 2016-2017.

__________ I understand that by signing this document, I am acknowledging receipt of the most recent copy of the Advanced Education Program in Pediatric Dentistry Postgraduate Student Handbook.

__________ I am still responsible for all the contents held within the handbook, even if I choose not to initial and sign this document.

I HAVE READ, UNDERSTOOD, AND AGREE TO ABIDE BY THE ABOVE DOCUMENT.

Postgraduate Student Name (Print): ____________________________________________

Postgraduate Student Signature: ____________________________________________

Date: __________________________

I have presented this handbook in person, but the student refuses to initial and sign the above acknowledgement of receipt.

Faculty/Staff Signature: __________________________________ Date: ________________

Printed Name ____________________________ Date: ________________
Orthodontics and Dentofacial Orthopedics Residency Handbook

Master’s in Oral Biology

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Introduction

Welcome to the UNLV School of Dental Medicine Advanced Education in Orthodontics and Dentofacial Orthopedics Program. The program integrates biomedical and clinical sciences, and research to provide a unique opportunity for dentists to earn a Certificate in Orthodontics and Dentofacial Orthopedics and a Master's Degree in Oral Biology.

Vision, Purpose, Mission and Goals

- **Vision:** “Leading Orthodontics by integrating innovation and tradition”

- **Purpose:** The primary purpose of this program is to educate orthodontists who possess the knowledge, skills, values and diversity to begin the practice of orthodontics as ethical practitioners committed to lifelong learning, dedicated to fulfilling the public's trust, and providing access to care for a diverse population.

- **Mission:** To be a driving force toward improving the health of the citizens of Nevada through unique programs of oral healthcare services to the community, integrated biomedical, professional, and clinical curriculum, and biomedical discovery.

- **Goals:** Mentor each resident to be a “life-long learner,” progressive orthodontic clinician, and a thoughtful evaluator of evidence based research.

Orthodontic Residency Goals and Objectives

The residents will obtain proficiency in orthodontics through diverse clinical exposures and broadly based patient case selection. To achieve this, the program will:

- Ensure a diverse patient population through constant screening and recruitment
- Promote avenues for patient interaction with other specialties
- Promote diverse exposure to a variety of private practice scenarios
- Promote diverse exposure and interaction with surgical procedures

**Education:** Impart residents with in-depth knowledge of biologic and mechanical principles involved in orthodontics necessary for productive, competent and sociably responsible careers as health care educators and providers. Encourage continued learning throughout the professional life of the resident. To achieve this, the program will:

- Provide the residents with quality and structured information through clinic, small group seminars, lectures, continuing education, and interdisciplinary interaction
- Provide adequate exposure to a broad spectrum of information through conferences, seminars, and meetings
- Encourage independent learning, critical thinking, and analytical evaluations
- Build resources available to the residents throughout their education (computers, books, etc.)
**Research**: Contribute to the advancement of the orthodontic specialty and the dental profession through basic biomedical, behavioral, clinical, and educational research. To achieve this, the program will:

- Provide research facilities, limited financial support and technical expertise to allow completion of quality research projects by the residents

- Provide mentorship in obtaining a Master’s Degree in Oral Biology
Program Overview

UNLV School of Dental Medicine, Advanced Education in Orthodontics and Dentofacial Orthopedics offers a 34 month program that culminates in the awarding of a Master's Degree in Oral Biology as well as a certificate in Orthodontics and Dentofacial Orthopedics. The class size is up to a maximum of 6 residents per year. The program begins in July, and concludes at the end of the 34th month, as long as all requirements have been met. These requirements also include, but are not limited to successful completion of the Phase II ABO exam (all fees associated with the exam are at the residents expense), with a passing grade.

Distribution of time during the residency will be divided into the following four categories. Each of these categories will consume the APPROXIMATE percentage of time:

- Clinical Education = 50%
- Didactic = 20%
- Research = 25%
- Teaching/Electives/Externships = 5%

The division of the time is intended as a guide and is an average that applies to the total program of 34 months. A resident must complete a minimum of 3700 hours as mandated by CODA.

The program is designed to offer a broad spectrum of didactic, clinical, research, and teaching experiences in the field of orthodontics. The emphasis of the program is to prepare the graduate for successful completion of board certification to become a Diplomate of the American Board of Orthodontics.

The program trains the residents to have a broad knowledge and understanding of growth and development, diagnosis and treatment planning, biomechanics, craniofacial anomalies, interdisciplinary dentistry, surgical orthodontics, research methodology, classic and current review of the literature, and teaching experiences. Patient care is conducted in an orthodontic clinic and facilities are available for state of the art radiographic and diagnostic digital imaging. Patients are screened and accepted for treatment based on the level of treatment difficulty, educational benefit, and needs of the orthodontic residents. These treatment cases represent a cross-section of the cases encountered in private practice to ensure the residents preparedness to practice orthodontics in a diverse population.

The first year is composed primarily of small group seminars and lectures integrated with clinical experiences in preparing and initiating treatment of comprehensive orthodontic care. The program will begin each year on or close to July 1st with an introduction to orthodontic techniques and clinical procedures with patients assigned to each resident upon matriculation. The curriculum includes; clinical seminars, clinical orthodontics, diagnosis, treatment planning and case presentations, biomedical sciences, clinical sciences and professional studies core curriculum, research, and literature reviews. Patient assignments throughout the residency will be adjusted to meet the educational needs of each resident. Proficiency evaluations will be given semi-annually to ensure each resident is progressing in the program and to provide constructive feedback.
Research topics are chosen, literature reviews are completed, proposals are written, funding obtained if needed, and projects are started.

The second and third years include continued patient care and an advanced level of the curriculum listed in the first year. Case presentations by the residents, in the same format recommended by the American Board of Orthodontics, allow in-depth review of treatment and outcomes provided to the patient population. Practice management sessions present aspects of traditional private practice and other options available upon completion of their training. Externships to local, regional, and/or national orthodontic practices are allowed with the approval of the Program Director.

A Master of Science in Oral Biology is completed in conjunction with the Certificate. The Master’s thesis follows guidelines from the UNLV Graduate College. Research activities culminate with the completion of a master’s thesis and submission of the research for publication.

Program Expenses
Tuition: $185,000.00 for 34 month program. Additional tuition fees will apply if a resident is enrolled beyond 34 months. Residency Program Fee’s: $15,000

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<thead>
<tr>
<th>Yearly attendance cost for program:</th>
<th>Total cost for program:</th>
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<tr>
<td>First year total cost:</td>
<td>$79,000</td>
</tr>
<tr>
<td>Second year total cost:</td>
<td>$79,000</td>
</tr>
<tr>
<td>Final year total cost:</td>
<td>$42,000</td>
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<tr>
<td>Total cost of program:</td>
<td>$200,000</td>
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Dental Licensure
A License to practice Dentistry in the State of Nevada or a “Limited License” is required (residents are responsible for all associated fees). For detailed information, please contact Candice Stratton, License and Credentialing Specialist of the Nevada State Board of Dental Examiners NSBDE at 702-486-7044 Ext. 27 or emailcstratton@nsbde.nv.gov. The general phone number for NSBDE is 800-DDS-EXAM or email nsbde@nsbde.nv.gov.

Accreditation
UNLV School of Dental Medicine, Advanced Education in Orthodontics and Dentofacial Orthopedics Residency earned the status of “Initial Accreditation” from the Commission on Dental Accreditation, July 29, 2005. The Commission is a specialized accrediting body recognized by the United States Department of Education. For more information regarding this process you may contact the Commission on Dental Accreditation at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611.

The program in Orthodontics and Dentofacial Orthopedics is accredited by the Commission on Dental Accreditation [and has been granted the accreditation status of “approval without reporting requirements”]. The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611.
Attendance Policy

The Program Director has established an attendance policy that is to be followed by all residents attending any Advanced Education Program at UNLV School of Dental Medicine. Attendance is required Monday–Friday from 8:00 a.m. to 5:00 p.m. Some scheduled lectures, clinic, and miscellaneous events are before 8:00 a.m. and after 5:00 p.m. and/or on weekends. If these are scheduled, it will be mandatory for all residents to attend.

Personal Days: Each resident is allowed up to eight (8) personal days per academic year. Personal days that are not used in one academic year do not carry over to the following academic year.

Completed and accurately-dated Planned Leave Request Forms need to be submitted to the program’s administrative assistant at least two (2) weeks prior to planned leave date in order to verify the amount of days available prior to the Program Director’s approval. It is the resident’s responsibility to verify approval of requested leave on the program’s General Calendar. If the resident does not see his or her name on the General Calendar, the resident must contact the program’s administrative assistant for verification. Submittal of a leave request does not guarantee that leave will be granted. All personal days must be approved by the Program Director in addition to faculty/course director for each particular class or clinic session that will be missed. Also, once the leave is approved, it is the responsibility of the resident to make sure the orthodontic scheduler receives a copy.

In case of a program-required event and/or an approved academic meeting, residents must complete the Leave Request Form for the time they will not be on campus. Attendance at such meetings and/or events will not count against allotted personal time but must be approved by Program Director prior to the meeting.

Sick/Unplanned Leave: In case of an emergency or illness, it is the resident’s responsibility to contact the program’s administrative assistant as soon as possible, followed by an Unplanned Leave Request Form (also signed and approved by the Program Director) upon his or her return. Unplanned or emergency days will apply to your allotment of eight (8) personal days per year. If the eight (8) days are exceeded, refer to the leave policy.

Unapproved Absences: Should an unfortunate situation arise when a resident is absent without proper documentation and/or following protocol as set forth by the Program Director and detailed above, he or she will be assessed leave time of an additional day for each unapproved absence day.

Extended Leave/Leave of Absence: Leave that is required for an extended period of time (such as maternity leave or leave for health or family-related emergencies) will be dealt with on an individual basis and will directly lead to extended time in the program. Such decisions will be made by the Program Director, in consultation with the faculty and the resident.
Special Circumstance Leave Policy

The UNLV School of Dental Medicine, Advanced Education Programs recognizes that in some special instances it will be necessary for a student to interrupt or discontinue his/her specialty education. The purpose of this policy is to provide guidelines regarding leave of absence for a period exceeding the approved Eight (8) Days per School Year Attendance Policy.

If a resident in an Advanced Dental Education program exceeds the allowed time for personal days, the Program Director, in consult with the faculty and Dean, must construct a plan to insure that all clinical, educational, and research needs of the program are met. This could include additional reading, lectures, reports, and examinations. It may also be necessary to extend the length of the program in order to provide the minimum number of hours to successfully complete the course of study. In addition, it is recognized that developed skills may be lost or forgotten during an extended leave. UNLV SDM may at its discretion perform knowledge and dexterity examinations to ensure the resident is capable of continuing his/her education. Remediation may be necessary and may add curriculum hours above and beyond the actual number of hours lost due to the extended leave. Depending on the remediation program, the program may be extended beyond 34 months.

The above measures will guarantee that the resident in question will meet the minimal program standards established by CODA and UNLV graduation requirements.

Residents must be available by phone 24 hours per day.
Program Requirements

Completion of the orthodontic residency program involves acceptable performance in all four areas of the curriculum. These areas include:

I. **CLINICAL EDUCATION = 50%**

**Orthodontic Residency Clinic:** Each resident in the program will be assigned either individually or shared chairs in the clinic. The residents will keep their instruments in the clinic area and personal effects in the resident room; it will be their responsibility for the care and cleanliness of each area. If a resident does not follow procedures, appropriate actions for discipline following the UNLV SDM Student Manual will be implemented.

Residents must make certain that patient’s parents know their name, and receive a business card with information regarding the various ways they can contact the resident.

Residents are required to purchase an approved clinical camera. The Program will supply the majority of clinical instruments. These instruments are specialized and costly. Take care of them and remember to use an instrument for its intended purpose. If a resident or fellow disregards this, then they are responsible for replacing that instrument.

A. **Clinical Requirements**

- Treatment for resident cases will not be initiated until the appropriate records are taken, and the case has received approval by the assigned faculty. This policy should be explained to the parents beforehand to prevent any misunderstandings.

- Residents must provide treatment under the supervision and direction of the assigned faculty. Treatment must be approved and the progress notes signed by the faculty. The assigned faculty must sign every request for additional dental therapy. Patients remain the responsibility of the assigned faculty who work closely with the residents in the diagnosis, treatment planning, and implementation of patient care. Failure to comply with faculty direction is an ethical violation, which will result in suspension or dismissal from the program.

- Residents are expected to prepare all patient records according to the established protocols of the ABO at a minimum, including surgery and cleft palate cases. These records must be approved and the designated faculty, patient or parent/legal guardian must sign the treatment plan before treatment begins.

- Residents will be assigned rotations to the Faculty Practice, SDM Main Clinic and the Southern Nevada Cleft Palate and Craniofacial Clinic. Residents are responsible for their own transportation to these clinics, and are subject to the attendance policy.

- Residents should strive to complete the majority of the cases they start.

- All third year residents must transfer all active and retention patients prior to their graduation according to the transfer protocol. Patients in retention should be discharged after one year.

- All residents are required to have current CPR and OSHA certification. Failure to
comply will result in the resident having clinical privileges suspended.

- Orthodontic Consent Form must be completed before any orthodontic treatment will be started. It must be signed by the patient or parent (legal guardian).
- All residents must have all required immunizations in order to work in the clinic.
- All funds, regardless of source, generated from a graduate student’s clinical activities in connection with his/her participation in the academic programs shall accrue solely to the benefit of SDM. Graduate students are not employees of SDM and, as such, are not eligible for wages, workers’ compensation or other benefits otherwise available to SDM employees in connection with their participation in the graduate program.

B. **Patient Flow**

- Patients are evaluated during an Orthodontic Screening Examination
- Patients may be accepted, put on recall or declined
- Clinic Director or Program Director assigns patients to resident and faculty
- Resident contacts prospective patient and if the patient is interested, an appointment for diagnostic records is scheduled.
- Diagnostic records payment must be received at or before the records appointment with the exception of Medicaid recipients.
- Electronic health record information must be entered in AxiUm prior to start of treatment
- Resident obtains all records necessary for case presentation (models, photos, radiographs, CBCT and clinical exam)
- Case presentation to assigned faculty
- Treatment plan is approved and signed by assigned faculty
- Case presentation to patient at patient appointment.
- Resident explains treatment plan to parent and/or patient and obtains signed Informed Consent
- Financial Contract must be established with Business Office before any treatment starts
- Resident must explain the importance of keeping appointments, cooperation from patient, insurance, payment schedule, and clinic appointment schedule.

C. **On-Call Emergency Care/After Hours Care**

- A call schedule will be developed and maintained to provide emergency services support for clinics. All residents will be assigned to the rotation. The vast majority of orthodontic emergencies can be handled over the telephone with instruction. Patients may be offered appointments to come in on the next clinical day.

**II. DIDACTIC EDUCATION = 20%**

A. **Departmental Courses, Lectures and Seminars**

- Competence in Orthodontics requires knowledge of the biomedical sciences and other topics as related to the specialty. Materials in research, biostatistics as well as other areas are provided in the programs so that the resident will be able to apply important biomedical concepts and principles that govern acceptable clinical procedures.
• The curriculum is intended to broaden the resident’s overall background, to sharpen the intellect for critical analysis and to provide an opportunity to gain depth in an area of specific interest.

• The subject matter will be presented in a variety of ways. Information will be conveyed through applied courses, seminars, reading assignments, conferences, and laboratory assignments. Specific presentation style will depend on the individual instructor. The curriculum is designed to provide the resident with a comprehensive understanding of contemporary articles covering a broad range of material relevant to orthodontics as well as dentistry in general.

III. **RESEARCH = 25%**

   A. UNLV SDM Orthodontic residency program was designed to train orthodontists capable of conducting independent research. The development of new knowledge is also a mission of the university and a priority for the specialty of orthodontics. In fact, as noted above, the Accreditation Standards for Advanced Specialty Education Programs in Orthodontics and Dentofacial Orthopedics specify that: “students must initiate and complete a research project to include critical review of the literature, development of a hypothesis, and the design, statistical analysis and interpretation of data.”

   B. Consistent with the UNLV SDM orthodontic residency program objectives and the ADA Accreditation Standards, the following research requirements have been established.

      a. Residents must complete and defend a Master’s thesis as part of their advanced degree program. All requirements and deadlines of the UNLV Graduate College must be met in order to receive the Master’s Degree in Oral Biology. The Certificate in Orthodontics and Dentofacial Orthopedics will not be awarded until the Master’s thesis is defended successfully and the Master’s Degree awarded.

      b. In addition, a minimum of one research abstract presentation and one publishable quality manuscript submitted and approved by the Orthodontic Program Director and Director of Research will document the original research. The manuscript must be submitted and approved prior to receiving the Orthodontic Residency Certificate. The Resident will identify the mentor and the project no later than the end of their first semester. Following UNLV Graduate College guidelines, the resident must assemble a thesis committee to assist them in their research, advise in thesis development, review the manuscript and thesis, and to ensure an appropriate high standard of science. The advisory committee will consist of at least 4 faculty proposed by the resident and research mentor with approval by the program director. The committee will include the resident’s research mentor and at least one Orthodontic faculty member. Following the rules of the UNLV Graduate College, the committee will vote on the quality of the Master’s degree thesis and dissertation to fulfill the requirements of a Master of Science in Oral Biology.

      c. Published quality refers to all aspects of the work, including the scientific quality of the research project itself, the clarity and grammatical correctness of the writing, the interpretation of findings and the quality of illustrations and graphical data presentation. Residents are required to submit the manuscript for publication and have it reviewed by the journal’s editorial board of peer reviewers. Please refer to:
C. It is the responsibility of the resident to complete each of the above activities and provide the Director of Research and the UNLV Graduate College with written documentation to place on file. The mentor will maintain records of the resident’s progress.

D. The required independent research project and completion of a Masters Degree in Oral Biology is the minimal requirement for successful completion of the orthodontic residency program at UNLV SDM. Residents are expected to remain engaged in scholarly activities throughout their residency training. To successfully complete their residency residents must clearly demonstrate that they are prepared to engage in independent research, which would potentially advance knowledge of orthodontics. This is most easily demonstrated by residents who begin their research activities early and remain involved throughout their training.

E. The American Dental Association Standard for research in an orthodontic curriculum is:
      i. 6-1 Students must initiate and complete a research project to include critical review of the literature, development of a hypothesis and the design, statistical analysis and interpretation of data.

IV. TEACHING/ELECTIVES/EXTERNSHIPS = 5%

A. The ADA accreditation program requires residents to spend a certain amount of time teaching. Through teaching, residents will gain deeper insights into subjects, learn interpersonal skills, and develop organizational abilities. The educational division of UNLV SDM has developed a curriculum to enable residents to acquire these skills.

Residents will have responsibilities for teaching and producing material which may vary during the 34 month program. Pre-doctoral responsibilities will be coordinated with the Pre-doctoral course directors. These responsibilities may include, but are not limited to the following:

- Residents must assist the pre-doctoral faculty with all aspects of the didactic training program. This consists of lectures which emphasize growth and development, diagnosis, treatment planning, biomechanics, and interdisciplinary dentistry and laboratory exercises. Specifically, the residents will prepare and deliver lectures, moderate problem-based case analysis seminars, prepare the seminar materials, and develop student evaluation procedures. Course directors will make the specific assignments.
- All residents must participate in the Pre-Clinical Orthodontic Course. The residents will be encouraged to develop innovative teaching and student evaluation procedures and above all else pursue a pro-active teaching philosophy.

B. Resident Presentations
   a. Residents present, in a formal and comprehensive manner, selected cases of special interest for review and are critiqued by their peers and members of the department.
faculty. Any topic or patient discussed will require an adequate evaluation as well as complete records to make the subject interesting and educational. These presentations will follow a predetermined protocol and the faculty will direct the residents with the format.

b. Residents will devote much of their time to reviews of pre-selected articles of interest. They will report on these articles as well as supplemental literature, with purpose, methods, results, and conclusions.

c. Residents must review all of their cases with Orthodontic faculty and have the appropriate faculty sign off documents in AxiUm.

C. Electives/Externships

a. The intent of externships is to provide novel, unique, and diverse educational experiences to enrich the orthodontic resident’s knowledge base. Residents may do an externship at a hospital, another orthodontic program, or private practice. These externships must be approved by the Program Director.

V. RESIDENT EVALUATIONS

A. Evaluation is a continuing process in a seminar-clinical setting and informal feedback is provided to residents through their constant interaction with faculty. The purpose of the evaluation is intended: 1) to ensure that the resident is making satisfactory progress during the program; 2) to provide evaluation and feedback that is essential for the resident to gain the most from the educational process; 3) to provide feedback for improving the quality of the program and 4) to provide feedback for the effectiveness and quality of the faculty.

B. Formal evaluations will be conducted on a semi-annual basis throughout the 34 month program:

a. Every six months that a resident is in the residency program, the faculty will complete a resident evaluation form, which may include review of patient progress and/or patients in active treatment. These evaluations will be collected from the entire faculty who interact with the residents. The Resident Progress Committee consisting of the Orthodontic full-time faculty, will then meet with each resident to discuss these evaluations. These evaluations are meant to be a constructive and informational dialogue between the program director, faculty, and resident. If the resident is not making sufficient progress in the program, then appropriate remediation will be instituted.

b. Residents will be evaluated on all completed cases and patients in active treatment three months prior to their completion of the program.

C. Residents will be expected to maintain a 3.0 GPA in courses where grades are assigned and perform at a level acceptable for postgraduate work in courses that are pass/fail. Residents may discuss the results of these reviews with the program director. Unsatisfactory performance will result in remediation, probation and/or dismissal from the program.

D. Residents are required to complete in the ABO format, six cases that they have both started and completed. The resident will be graded on the quality of the result, and the presentation.

E. Residents must demonstrate competency in all areas to be approved for promotion or advancement.
Grading Systems

The following grading system complies with Nevada System of Higher Education campus grading policy and will be used for UNLV SDM Advanced Education in Orthodontics courses.

S  Satisfactory
U  Unsatisfactory
V  Incomplete
X  In progress (research projects or courses extending beyond one semester)
W  Withdrawal

In some instances some courses will not be designated as Satisfactory/Unsatisfactory (S/U) courses and the following grading system will apply:

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<td>90-100</td>
<td>A (Superior)</td>
<td>4.0 (grade point value)</td>
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<tr>
<td>80-89</td>
<td>B (above average)</td>
<td>3.0 (grade point value)</td>
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<tr>
<td>0-79.9</td>
<td>F (failure)</td>
<td>0.0 (grade point value)</td>
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In this grading system, each resident must pass all courses with a ‘B’ or better grade, or satisfactory grade in courses using that grading method.
General Information: UNLV SDM

Outside Employment
Residents will be allowed to enter part-time practice in general dentistry. This practice time can never conflict with program activities, and must be approved by the Program Director in advance. Also, a resident must have a full Nevada Dental license. A limited license is not enough. Residents are referred to the Nevada Dental Board for more information on the practice of dentistry in Nevada. VIOLATION OF THIS POLICY COULD LEAD TO DISMISAL FROM THE PROGRAM.

General Guidelines
A general schedule is found in the Google Gmail Orthodontic Calendar. Residents are expected to attend all courses, seminars, and clinics. Any absence, for whatever reason, must be approved by the instructor and program director.

This handbook is designed to give you specifics as they relate to the Orthodontic Department and specifically to the Orthodontic Residency Program. As a Program within the UNLV SDM, we will follow the rules and regulations as outlined by the SDM and University.

Policies, procedures, standards of conduct, and resident responsibilities and rights related to students and academic affairs are found in the following documents:

- UNLV SDM Student Handbook (To be referenced for all SDM and University policies not covered in The Orthodontic Handbook)

These documents plus Clinic Operating Manual, SDM Honor Code, Clinic Protocol Manuals are also available on UNLV School of Dental Medicine’s intranet located at http://sdmnet/.

Keys/Marlok
Each resident will be issued keys/Marlok to open the necessary doors within the SDM. The keys/Marlok will allow the resident access to the clinical areas, laboratory areas, and the resident room. Any additional access must be approved by the program director. Fees will be assessed for any lost keys/Marlok.

Immunizations
Prior to enrollment Nevada Administrative Law requires documentation of the following immunizations: Tetanus Diphtheria (within the past 10 years), Hepatitis B, Tuberculosis Skin Test, two doses of Measles, Mumps, Rubella MMR) or two doses of live Measles vaccine, one Mumps, one Rubella vaccine. There is also a required eye exam.

Email
Each resident will be given a SDM email account through the SDM IT Help Desk. Residents will be expected to check their email several times each day to receive any important announcements from the program director, faculty, or staff. Note: email needs to be used appropriately in compliance with SDM regulations. This email will be accessible both on and off campus for your convenience.
Calendar (Web Based)
Each resident will be given access to the digital Orthodontic General Calendar. Residents will be expected to check this calendar regularly, since all classes and clinic schedules will only be updated here. This calendar will be accessible both on and off campus for your convenience.

Printers, Copiers and Fax
A printer, copier and fax will be available for resident use; however this privilege may be removed, if abused.

SDM Virtual Library
Currently the SDM has a virtual Library and can be reached via the internet at http://library.nevada.edu/ref/ or contact the Health Sciences Librarian, Xan Goodman at (702) 895-2233.

Computers
UNLV SDM Advanced Education in Orthodontics and Dentofacial Orthopedics Program requires residents to purchase an approved notebook computer. The SDM IT Help Desk will image the computer with the appropriate software, provide each resident with a user ID and password in order to log onto the UNLV SDM domain.

Software
UNLV SDM Advanced Education in Orthodontics and Dentofacial Orthopedics Program will purchase and install all computer software required for the program. SDM IT Help Desk will support these efforts.

Cameras
UNLV SDM Advanced Education in Orthodontics and Dentofacial Orthopedics Program will require an approved Camera and Flash system suitable for intraoral and facial photographs.

Textbooks
UNLV SDM Advanced Education in Orthodontics and Dentofacial Orthopedics Program will require use of the ABO reading list plus suggested textbooks.

Equipment
If equipment is removed or relocated, the SDM staff must be notified. If any equipment is temporarily removed from the campus a “property removal form” must accompany it. The staff will help you obtain and complete this form.

Supplies
Orthodontic or dental supplies should never leave the clinic.

Financial Aid
Contact UNLV student enrollment and financial services for information and eligibility at 702-895-3424, or http://financialaid.unlv.edu/. Any questions may also be addressed to the UNLV SDM Financial Aid Liaison at 4-2526.
I have received the UNLV SDM Advanced Education in Orthodontics and Dentofacial Orthopedics Residency Handbook. I understand and agree that it is my responsibility to familiarize myself with its contents and to act according to the guidelines set forth therein.

__________________________________________  _________________
Resident Signature                          Date

__________________________________________
Resident Name (Printed)
# General Practice Residency
## Resident Handbook

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Mission Statement

- The UNLV School of Dental Medicine General Practice Residency is dedicated to applying the principles of evidence-based dentistry to attain the highest standards of clinical and academic excellence.
- Oral health is indispensable element of overall wellness.
- As a hospital affiliated Dental General Practice Residency, the UNLV GPR will maintain a strong, ongoing relationship with the University Medical Center of Southern Nevada to provide quality, integrative healthcare to our community.

Goals and Objectives

Upon completion of this program, residents will have a working knowledge of:

- Hospital dentistry – providing dental care in an operating room setting and functioning in a hospital environment
- Treating medically compromised and special needs patients in an inpatient and outpatient setting
- Comprehensive treatment planning involving multiple specialty areas
- Advanced surgical procedures including incision and drainage, biopsy, pre-prosthetic surgery, complex surgical extractions
- Fabrication and insertion of simple and complex fixed and removable prostheses
- Diagnosis, interpretation of CBCT images, utilization of implant treatment planning software to enhance surgical placement and restoration of dental implants
- Emergency dentistry including management of oral trauma
- Moderate conscious sedation (oral, inhalation, and IV)
- Advanced Cardiac Life Support (ACLS)
- Endodontic diagnosis and treatment including use of rotary instrumentation and clinical microscopy
- Periodontal diagnosis, including both surgical and non-surgical treatment
- Esthetic dentistry principles and treatment options (veneers, ceramic onlays, smile analysis, and esthetic gingival procedures)
- Practice management concepts to facilitate transition into private practice and other dental practice settings
Policies and Procedures

Standard Operating Procedures (SOPs)
- Clinic policies are described in Department of Dental Medicine SOPs located on the H: Drive
- Residents must review and comply with Departmental SOPs

Office Hours
- Residency Hours:
  - 7:30 a.m. – 5:00 p.m. Monday – Friday
  - Morning meeting: 7:45 a.m. – 8 a.m. Monday – Friday
- Clinical Hours:
  - 9:00 a.m. – 12:00 p.m. Monday – Friday
  - 1:00 p.m. – 4:30 p.m. Monday – Thursday
- Lecture and Seminar Time:
  - 8:00 a.m. – 9:00 a.m. Monday – Friday
  - 1:00 p.m. – 4:30 p.m. Friday (Residents to schedule this time at GPR during rotations)

Chief Resident
- Chief Resident participates on GPR/UNLV.UMC committees and working groups as assigned
  - UMC Resident Forum
- Pre-approves leave for residents to ensure call coverage and continuity of patient care
- Manages call and rotation rosters
- Assigns additional duties to residents and ensures completion

Leave Policy
- 15 days ordinary leave, 15 days sick leave
  - Leave should not be requested when guest lectures or seminars are scheduled
  - Sick leave over 3 days requires medical evaluation
- Request leave authorization using iLeave
  - Pre-approval from Chief Resident prior to iLeave request (check with front desk)
  - Do not wait until the last minute to request leave

Staff Communications
- Morning meeting announcements
- EagleSoft Calendar – Clinical Schedule
- SDM Mail – E-mail and Calendar
  - Non-clinical appointments, leave etc. on EagleSoft
  - Program Schedule on Master Calendar
  - Check Email at least daily

Scrubs and Lab Coats
- Lab Coats issued to be turned in at completion of residency
  - Laundered by GPR
- Scrubs are clinic attire and belong to you
  - Laundered by resident
Disposable PPE worn to prevent occupational exposures when indicated

- Lab coats and UMC badges are to be worn when in the hospital

Controlled Drugs

- Residents must apply for a DEA number
- If you do not have a DEA number, schedule drug prescriptions must be signed by a faculty member
- All prescriptions are written using EagleSoft
- Controlled drugs stored in drug lock box in supply
- Request drugs from Lead or Asst. Lead D.A.
- Fill out the drug log when withdrawing controlled substances
- Initiate re-order when minimum stock level for each drug is reached
- Wasting of unused drugs **MUST** be witnessed and documented

Commercial Dental Laboratories

- All prescriptions must be reviewed and signed by faculty before sending to lab
  - Removable prosthodontics and orthodontic appliances sent to Denture Masters or Impressions (SDM) lab
  - Fixed Prosthodontics sent to Tech Art Ceramics Studio
- Only dental laboratories approved by UNLV can be utilized

In-House Dental Laboratory

- Residents, faculty and assistants responsible for keeping work spaces clean and neat
- Users must clean counters and benches immediately after use
- Turn off all equipment (steam cleaner, BioStar, etc.) immediately after use
- Never leave Bunsen burners or torches unattended
- Report missing or defective equipment/supplies immediately to Lead/Asst. Lead DA or faculty member

Off-duty Employment

- Residents wishing to practice dentistry outside of the GPR must have a full and unrestricted Nevada license (unless practicing in a state run clinic)
- All off-duty clinical practice requires approval by the GPR Director and UNLV SDM Dean
- Approval may be revoked if off-duty activities interfere with residency

Ancillary Support

- Each resident will be assigned a primary assistant and operatory
- Staff and room assignments may vary based on daily clinic needs
- Residents must be able to take dental radiographs and complete room turn around and asepsis when support staff are not available
- Good time management is critical!
Documentation

Resident Portfolio (see next section)

- Record of Resident Program Activities
  - Kept on H: Drive, includes clinical experiences:
    - IV Sedation
    - Emergency patients
    - In-Patient and OR
    - Rotations
  - Resident Evaluations – Tri-annual
  - Pre and Post Tests
  - Presentations (Comp Care, SNDS, In-Service)
  - Continuing Education (Non GPR Courses)
  - Lit Reviews
  - Competency assessments

Portfolio remains with GPR for accreditation

Patient Care

Informed Consent
As a health care provider, dentists are required to inform patients about the nature of their proposed treatment, the risks, the benefits and the alternatives as well as the consequences of no treatment. This is the essence of informed consent. Asking the patient to repeat the stated treatment for the day to the doctor confirms the patient understands the proposed treatment and gives the patient the opportunity to ask any questions. Additionally, this allows the dentist to recheck for satisfaction with the agreed upon plan as well as for unreasonable patient expectations prior to treatment.

The patient’s record should reflect that consent was performed and the patient verbalized an understanding of the consent process. The record, also, needs to demonstrate that the discussion was personalized to the patient’s needs.

By encouraging questions and maintaining a dialogue with the patient, the dentist can show that the patient had an important part in controlling the treatment. An informed patient will be a more cooperative patient. In summary, the following key elements will help in discussing the information with patients to allow them to make an informed choice:

- Personally discuss the risks, benefits and alternatives of the proposed treatment with the patient and the possible consequences of non-treatment.
- Confirm the patient’s understanding of treatment.
- Give the patient an opportunity to ask questions.
- Get a commitment from the patient to proceed. Patient must sign appropriate informed consent documents to be placed in their hard copy record or scanned into their electronic dental record when warranted by the procedure.
- Use lay terms.
• Document in the electronic record entry e.g. “verbal & written (when the procedure warrants) consent obtained from patient”.

**Medical History/Vital Signs**
A review of the past medical history should be completed and documented at each appointment. Med hx can be reviewed in EagleSoft and saved which will fulfill this requirement. Pre-operative blood pressure should be taken at every patient visit prior to administering local anesthetic. For those patients undergoing any moderate sedation procedure, pre- and post-operative vital signs including BP, respiration, and patient alertness are, also, recorded. Entering the data on the sedation monitoring form will document the necessary information. Also, any patient suspected of systemic infection should have his/her temperature noted.

**Treatment Plan**
A copy of the treatment plan (printed out from EagleSoft) must be signed by the patient and a staff member. Eaglesoft will allow you to organize your treatment plan into numbered phases. For convention the numbers are as follows:
1. Emergency Phase
2. Systemic Phase
3. Preparatory/Hygienic Phase
4. Re-evaluation Phase
5. Corrective/Reconstructive Phase
6. Maintenance Phase
Go over your treatment plan with a staff member when the patient is present, if possible.

**Daily Routine Slips**
This form must be completed to ensure that the patient is accurately charged for all billable procedures completed. The form is #11, “UNLV Record of Dental Treatment”.

Section III, Treatment Narrative is a written account of procedures performed during that day’s appointment, e.g. “FMXR, comprehensive perio exam, full mouth debridement”. This would correspond to ADA Codes 0210, 0180, 4355, which are checked in Section IV. This allows the front desk to bill the patient accurately. This is a critical element of a business and will be an important focus once you start your practice.

You MUST include the following information on the form:
1. Mark codes for ALL procedures performed or initiated in Section IV
2. Procedures planned for next appointment, must be on treatment plan
3. Time requested for next appointment (i.e. a 1 or 2 hour appt.)
4. F/U, suture removal, minor adjustments, etc. should be scheduled in a 2nd chair
5. Specific faculty required for the next appt.

**Progress Notes**
When recording information into the patient's record, including the “why” not just the “what”, is extremely important. In order to receive insurance reimbursement, the progress notes must CLEARLY state the working diagnosis and WHY the treatment was performed. (e.g. gingival abscess interproximal to #2/3 or necrotic pulp #12 with acute apical periodontitis.)
Information such as broken or canceled appointments, referrals and whether or not the patient followed through on the referrals, expressed patient dissatisfaction with treatment, and resolutions to problems should be included in the record. Follow-up instructions and phone conversations should, also, be documented. The record needs to contain sufficient information to:

1. Support the initial diagnosis for the proposed treatment
2. Confirm or revise the diagnosis for the completed treatment
3. Accurately document the treatment rendered, materials used and any future concerns

When writing in the patient’s record, care should be taken to use only objective, factual and medically/dentally accepted terminology. Nothing should be written in the record that is unprofessional and might embarrass the dentist, the auxiliary staff or the patient.

For issues regarding a medical/dental misadventure, a separate QA/QI form will be filled out that is not part of the medical record. This form has a very specific application and should be used with the concurrence of the faculty member supervising the case.

**Patient’s Rights**

1. People seeking treatment, as well as patients of record, shall be treated with respect and courtesy.
2. All patient records and information shall be treated as confidential material according to current HIPAA guidelines.
3. When a patient is accepted for treatment, that patient shall be informed of the nature and scope of the treatment as well as the fees for the proposed treatment before that treatment is started.
4. The patient shall be informed of alternate treatment options and the possible consequences of no treatment.
5. The patient has the right to accept or reject treatment.
6. Treatment shall have proper continuity and should be completed as explained to the patient.
7. Treatment may be discontinued if patients miss two appointments without notifying the clinic in a timely manner or are uncooperative during treatment.
8. Patients shall receive patient education information that explains the cause of oral and dental problems and how to maintain oral and dental health after proper treatment has been rendered in the clinic.
9. Active patients of record will be informed of the after-hours emergency care options.
10. Patients must receive a receipt at the time of payment for treatment rendered.
11. The patient shall be directed to the attending dentist, a faculty member and/or the Director to discuss any perceived problems relating to his/her care in the clinic.
Portfolio

Portfolio - You are expected to add to your portfolio as you complete certain cases. There will be opportunities for the staff to check on your progress. The reasons we have this portfolio requirement include:

- After you graduate your efforts will be just a memory but our residency must continue! The ADA credentials this residency every seven years and will ask specific questions about what was done during your time here. We have included requirements that help document your accomplishments. This information is kept in a portfolio which will stay here after you graduate.

- You may need to sell yourself in order to get a position after the residency. It is very helpful to have documentation of the patients you have treated. In addition, any application for a moderate sedation permit will require documentation of class hours (60) and cases (20) completed. This information will be available in your portfolio and you can duplicate it for your own use.

- Guidelines for the portfolio are as follows:

  UNLV SCHOOL OF DENTAL MEDICINE
  GENERAL PRACTICE RESIDENCY
  PORTFOLIO

  Resident ____________________________  Graduation Year 20**

  Introduction: The portfolio is a collection of various types of treatment that demonstrate your clinical abilities. It is an organized binder in which you will assemble the evidence that you satisfied the general practice residency program’s objectives. This is congruent with an important philosophy of post-doctoral education i.e. a shift of responsibility for the educational process from teacher to student.

  Requirements: It is your responsibility to assemble one copy of the portfolio. The evidence may consist of checklists, case documentation, papers, certificates, images and other documentation. The portfolio will remain with the program Director at the completion of your residency to satisfy requirements set by the Commission on Dental Accreditation (CODA). The portfolio must be updated in a timely manner as it will be reviewed during evaluation sessions.

  Portfolio outline: The following outline lists the minimum required contents for your portfolio. Any additional items that demonstrate advanced clinical procedures, training, projects or other related competencies that you achieved during your residency should be included.

  TABLE OF CONTENTS

  Section I:
  1. Competency and Proficiency Statement Certification Sheet*
  2. GPR Yearly Rotation Schedule†
  3. Copy of “Goals and Objectives for General Practice Residency Programs” (Standard 1-5)*.

  Section II: EDUCATIONAL PROGRAM (Standard 2)
  1. (2-1) Copy of “Core Competencies and Proficiencies” for UNLV GPR Program”. *
2. (2-2) Copy of “Competency-Based Curriculum and Outcomes Assessment Plan for UNLV GPR Program”; “Didactic Topics List”; Lunch and Learn Training Schedule; and Monthly Training Schedule.*

Section III:
1. (2-3) Comprehensive Multidisciplinary Advanced Clinical Experiences
   a. Planning and providing comprehensive oral health care.
      i. Copy of all records pertaining to one comprehensive patient to include:
         1. Patient assessment and diagnosis
         2. Before and after photographs (extraoral and intraoral)
         3. Appropriate diagnostic documentation (TMD eval, perio charting, etc.)
         4. Charting of treatment, oral cancer screening, etc.
         5. Endo diagnostic tests including vitality tests, etc.
         6. Treatment plan write-up with alternate treatment plans
   ii. Copy of two other comprehensive patient treatment plans

Section IV:
1. (2-3) Advanced Clinical Experience: This section must have documented treatment, treatment entries and before and after clinical photographs or images (where appropriate, e.g. endodontic therapy, fixed) to document treatment that you are capable of performing in each of the following categories:
   a. Amalgam restorations (including cuspal coverage buildup)
   b. Esthetic restorations (various classes and different materials)
   c. Fixed Prosthetics (Core buildups, Post and Cores, Anterior PFM/Ceramic crowns, Posterior crowns (PFM, Gold, Ceramic), Fixed Partial Dentures)
   d. Removable Prosthetics (RPDs, Complete Dentures)
   e. Whitening (in-Office, Home)
   f. Endodontics (molar, anterior, retreatment, apical surgery, non-vital, internal bleaching)
   g. Periodontal therapy (Assessment, non-surgical, surgical, bone grafting, PRF, socket preservation, mucogingival grafts, CT grafts)
   h. Oral Surgery (Hard and soft tissue surgery, extractions, biopsies, pre-prosthetic, etc.)
   i. Oral and systemic health promotion and disease prevention (tobacco cessation, referral, diet counseling, caries risk assessment)
   j. Implants (surgical placement, restoration, implant supported prostheses)
2. (2-3) Additional requirements:
   a. Copy of informed consent (ED and dental clinic)
   b. Copy of medical risk assessment for medically compromised patients.
   c. Documentation of your review of a complex medical history and treatment rendered on at least five patients with complex medical histories or physical and/or behavioral problems.

Section V:
1. (2-3/2-8) Resident evaluations
   a. Copy of Mentor evaluations (Anesthesia, Family Medicine and ED)
   b. Copy of resident critiques of the training received
Section VI:
1. (2-5) Competency in requesting and responding to consultations from physicians and/or other health care providers:
   a. A well-diversified representation of requesting consultations and answering consultations.
      (Copies of consultation forms)
2. (2-6) Competency in the management of pain and anxiety in delivering outpatient care
   a. Using behavioral and pharmacological modalities beyond local anesthesia:
      i. Documentation of oral sedation.
      ii. Documentation of IV moderate sedation
3. (2-7) Competency in the evaluation and management of dental emergencies, including trauma to dentoalveolar structures and acute oral pathologic conditions:
   a. Copies of BLS and ACLS cards
   b. Copy of treatment for dental and medical emergency patients: (Multiple patients with different types of emergencies). Med Hx, SOAP notes, etc.

Section VII:
1. Pre/Post Tests*

Section VIII:
1. (2-9) Physical Evaluation and Medical Risk Assessment
   a. Copy of at least two Oral Surgery IV sedation patient work-ups
   b. Documentation of a patient’s complete medical history to include taking, recording, and interpreting patient data
   c. Copies of various laboratory requests and interpretation of results used in the diagnosis or oral and systemic diseases

Section IX:
1. (2-10) Hospital Organization, Functioning, and the Credentialing Process*
   a. Copy of UMC hospital bylaws
   b. Copy of State License
   c. Copy of General Practice Residency Certificate

Section X:
1. (2-11) Management of Same Day Surgery Patients or Inpatients
   a. Copy of all completed paperwork required from admission to discharge for at least two Outpatients: include medical history taken, appropriate physical examination, pre- and post-operative orders, progress notes, operation report and discharge summaries.

Section XI:
1. (2-13) Critical Review of Relevant Scientific Literature†
   a. Copy of current literature review schedule

Section XII:
1. Presentations
   a. Copy of mini presentations
   b. Copy of SNDS presentation including lecture slides and abstract
Section XIII:
   1. Continuing Education
      a. Copies of course certificates
      b. List of seminars & conferences attended

Section XIV:
   1. (2-19) Evaluations†
      a. Copies of tri-annual evaluations
      b. Competency and Proficiency Statement Certification Sheet

Section XV:
   1. (2-19) E*Value appraisals†

*- Will be added to your folder by Residency Program Officer
† - Will be added to your folder by Residency Director or Assistant
IV Moderate Sedation

- You must complete 20 cases to become certified to perform Moderate Sedation
  - Encourage your more apprehensive patients to have Moderate Sedation as part of their dental care
    - The fee for sedation is purposely set low to encourage its use
    - If you are short of your 20 cases and nearing the end of the residency it is acceptable to perform moderate sedation on your fellow resident’s patients while that resident is providing dental care
    - Each case will be documented on a Moderate Sedation Form and kept in your portfolio
  - Choose a staff member to work with and coordinate the treatment with your patient.
    - Have this staff member sign the Moderate Sedation Form after completion of case
  - You are responsible for recording the drugs used in each of your sedation cases
    - Record this information in the drug log
      - Record the amount used and the amount discarded
      - Verify the count of the remaining drugs
    - Have your assistant co-sign the discarded drugs on the Moderate Sedation Form (this prevents you being suspected of using these drugs for other nefarious purposes)
  - Moderate Sedation Forms must be filled out completely and correctly; this is a closely scrutinized area of documentation
    - This form is designed to have a pre-anesthetic recording of vital signs. **This normally should be several days prior to the intended surgery date, however, it is acceptable (in some cases) to perform the pre-anesthetic assessment on the day the procedure if deemed appropriate by a faculty member**
    - The sedation informed consent forms will be completed and signed by the patient, witness and doctor prior to initiating the procedure.
    - More guidelines for this form are described below
The IV Sedation setup should include the following:

- Angiocaths (20 or 22 gauge)
- Reversal Drugs
  - Romazicon (Flumazenil)
  - Narcan (Naloxone)
  - Benadryl (Diphenhydramine)
- Robinul (Glycopyrrolate) (control of salivation)
- Steroid (e.g. Decadron - Dexamethasone)
- Lidocaine (with 1 cc tuberculin syringe for venipuncture)
- Selected moderate sedation drugs
  - Midazolam
  - Diazepam
  - Demerol
  - Fentanyl
  - Morphine
  - Hydromorphone
Drug Log

- All controlled drugs will be maintained in the doubled-locked cabinet in the supply room.
- The drug log will be kept in the cabinet.
- Only authorized personnel may access this cabinet.
- Each time a drug is removed or replaced, the dentist or appointed assistant will complete an inventory of the total remaining number of doses for this drug.
- After treating the patient, the dentist will return to the log and note how much of the drug was used and how much was destroyed (if any).
- New drug purchases will be kept and verified when the drugs are received.

<table>
<thead>
<tr>
<th>Drug Log User's Name (witness necessary for audits)</th>
<th>Patient Name</th>
<th>Date</th>
<th>Time</th>
<th>Amt</th>
<th>Amt Used (mgs)</th>
<th>Amt Wasted (mgs)</th>
<th>Starting Inventory</th>
<th>Ending Inventory</th>
<th>Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neubauer</td>
<td></td>
<td>Jul 21, 2012</td>
<td>10:00</td>
<td></td>
<td></td>
<td></td>
<td>17</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Ressie Dent</td>
<td>John Smith</td>
<td>Jul 21, 2012</td>
<td>10:05</td>
<td>-2</td>
<td>50 mg</td>
<td>50 mg</td>
<td>17</td>
<td>15</td>
<td>xxx</td>
</tr>
<tr>
<td>Ressie Dent</td>
<td>John Smith</td>
<td>Jul 21, 2012</td>
<td>12:05</td>
<td>+1</td>
<td></td>
<td></td>
<td>15</td>
<td>16</td>
<td>xxx</td>
</tr>
</tbody>
</table>

This is the amount of this drug present before you removed any

This is the amount of this drug present after you removed some

Negative means you removed it; positive means you added it
Sedation Worksheet

Age, height, weight, date
Health History, allergies, meds
Family History, previous surg, habits
Airway

Resp

Cardiac

Airway Exam

Breathing

Circulation

ASA

Pre-op DX

Informed consent

NPO

Venipuncture

Device

Agents

Dose and time

Used and Discarded

Fluids

Oxygen

SaO2%

Responsiveness

EKG

Plot

Aldrete score

Discharge Data

Self Explanatory
Self Explanatory
Any complications from previous anesthesia
Breath in and out of nose, sinus congestion, large loose soft palate, hx of sleep obstruction, Neck injury can affect ability to open the airway.
Hx of asthma, bronchitis, pneumonia, emphysema. Important from a med and residual capacity/compliance question.
Hx of MI, HTN, Angina, CHF or Murmur. Conditional recommendations depending on actual Med Dx.
Tongue size, Uvula, Nasal Passage. These eval the ease of intubation in an emergency.
These are for ability to ventilate in an emergency.
These are indications of adequate or inadequate perfusion.
ASA I- No medical problems
ASA II- Mild Disease (to include anxiety)
ASA III- Severe systemic disease (we do not sedate these.
Medical and dental
Written statement of verbal consent
“The patient and I have discussed the proposed treatment of conscious sedation. Risks, benefits & alternatives discussed and patient concurs with the proposed treatment”
Pt needs to have been NPO at least 6 hours for conscious sedation. If patient normally takes meds in the AM ensure they take them with small amount of water.
Diabetics have different requirements, be aware.
Left AC (antecubital)
Dorsum of the right hand
20 or 22gau Angiocath
Versed, Fentanyl, Morphine etc.
Usually 15 min increments and doses as titrated
Amount used and amount wasted, signed by a witness
Total these at the end of the procedure
2L/min per NC (nasal cannula) at 100%
Oxygen Saturation
Verbal, Tactile or Pain
NSR, ST, Bradycardia, PSVT
Plot vitals on graph
Will explain verbally
Discharge criterion
Can check more than 1 box. Vital signs stable/spontaneous resp and sedated but arousable etc.
Code Blue Response

- Problems requiring attention:
  - Cardiac Arrest (No pulse or Heartbeat)
  - Respiratory Arrest (Ineffective Respiratory Rate or Volume)
  - Chest Pain NOT Relieved by 3 Nitroglycerin doses
  - Status Epilepticus (seizure that does not stop) Patient will begin to decompensate.
  - Stroke (Indicated by one sided weakness, loss of speech abilities, changes in mental status.)

- Response Procedure:
  - Start BLS as needed. (Including patient position)
  - Notify full time Faculty (Dr. McAlpine, Dr. Gallob, or Dr. Neubauer), OMFS or Pediatric dentist, as available.
  - Get help into the room. (More assistants)
  - Prepare for high flow oxygen, either by mask or ambu bag, (O2 tank or room oxygen supply)
  - Get the crash cart directly outside the room
  - Call 9-911 as directed by Faculty, OMFS or Pediatric dentist. Be the last person to hang up. The person that phones EMS is to meet them out front and guide them to the clinic.
    - Our Address: 1707 W. Charleston Blvd. Ste 290
    - Phone number: 671-5175
  - Due to close proximity of the Internal Medicine Dept, extension 5065 can be called and assistance requested if a physician is available.
  - The person managing the event will designate someone to document the event, to include times, interventions, drugs and patient responses to interventions.
  - Resuscitation efforts should continue until relieved by EMS.
  - Document the event, include timelines for symptoms, treatments and responses to treatments
Surgery Suite West Clinic

AED (Automated Electronic Defibrillator)

Passive with pressure O2 with Ambu Bag in Oral Surgery Suite (West Clinic)
Periodontics

All patients will be comprehensively probed and at least a PSR recorded

- The Periodontal Screening and Recording can be recorded on the patient’s EagleSoft record and varies from 0-4.
- Patients scoring 4 must receive a comprehensive periodontal exam. This can be done on EagleSoft or on a paper record.

Attachment levels must be recorded in order to tell whether changes in probing depths are due to periodontal disease or just recession. This is only way periodontal disease can be diagnosed. Anything less is inadequate and does not serve your patient well.

- This requires recording tissue levels (3 measurements each side of each tooth) on form #55 (Perio Charting Form)
- This can be accomplished on EagleSoft or a paper form for the chart. Remember that tissue levels above the CEJ are negative numbers.

The reverse side of the periodontal treatment form must be completed

- Significant History (perio tx, surgeries)
  - Diagnosis (type of disease, severity and extent)
  - Prognosis (hopeless, poor, fair, good):
    - Short term (0-5 yrs)
    - Long term (>5 yrs)
  - Space for the periodontal treatment plan including a graphic display of planned surgeries.
  - This is to be completed prior to having the periodontal treatment plan reviewed by periodontist

Sc/RP Kit (cassette)

- Each resident will be given a Sc/RP kit and expected to keep it sterilized
- If an instrument breaks the resident is responsible to have the supply administrator re-order the instrument
- There is a standardized side of this kit; the resident can customize the miscellaneous side.
- This kit will be used for all surgical treatments as well as Sc/RP procedures

Scissors

- Tissue scissors are expensive, precision instruments that should be treated carefully and not used for anything except tissue.
- Suture scissors are much less expensive and can be used for other purposes (e.g. cutting membranes, graft templates, etc.)
# Hospital Dentistry

## Common ABX for ER Patients
- Penicillin Oral (500 mg PO QID) and IV (600,000-1.2m Units Q4H)
- Clindamycin Oral and IV
- Cephalosporins Oral and IV, e.g. Cephazolin, Cephalexin (Keflex)
- Erythromycin
- Amoxicillin – Oral/Ampicillin-IV
- Augmentin

## Emergency Notes/Consults
- Chief Complaint
- History of Present Illness
- Past Medical History
- Past Surgical History
- Social History/Drug Abuse
- Allergies
- Meds (prescription and OTC)
- Focused Oral Exam
- Impression/Plan/Recommendations
- Tx Given (if applicable)

## Prescription Writing
- Doctor’s Name:
- Address:
- Phone Number:
- Patient’s Name:
- Date:
- Address:
- Age:
- Drug Name
- Amount
- Dispense (Disp) Number of Tabs, Caps or Tubes
  [For narcotics handwrite the number after the numerals, e.g., 10 (ten)]
- Sig: Directions on how drug is to be taken (e.g., take on tab PO TID)
- Helpful to write “generic OK”
- Sign, Use DEA # when appropriate

## Operating room

### Who goes to the OR?
- Children in need of large amounts of restorations
- Handicapped adults or children unable to sit still
- Oral surgery cases
- Medical adjunct cases (medically fragile), e.g., pre-heart valve replacement

### Flowchart
- Patients screened by faculty
- Meet the patient (exam & X-rays, if possible)
- Front Desk preauthorizes insurance
- Resident/Lead Asst. schedules OR and anesthesia
- Pt to schedule H&P with MD credentialed @ UMC
- Can be completed by OMFS
- Pt takes all paperwork to UMC for pre-admission
- Case is confirmed; meet patient at OR at least 30 minutes prior to OR time
### Operating Room

- Eval the Patient several days prior to OR appt
- Ensure UMC pre-registration form is
  - Order appropriate labs (usually CBC only)
  - Consent area, include all possible treatment  
    - (i.e., endo, extraction, fluoride, etc)
  - If special needs patient is adult, parent must have guardianship paperwork if pt. is unable to give informed consent
- Fill out the H&P report for the Physician to finish

### Operating Room

#### Pre-Admit Note:
- HPI
- PMH
- Exam
- Assessment (include “Acute Situational Anxiety”)

#### Pre-Op Note
- Plan
- Assessment must note:
  - Pre-op Diagnosis (include ASA#)
  - Planned Procedures
  - Labs and vital signs  
    - HGB
    - WBC
    - <PLT
    - HCT
  “Consent in chart and reviewed with pt./legal guardian”

### Operating Room

#### Post-Op Note
- Follow form

- Call patient that evening
- Document Chart
- Dictate procedure within 24 hours
- Call #1-877-282-8674
- Follow commands
- Document procedures in clinic dental record
- Code procedures on Record of Dental Treatment
Operating Room

Example Diagnosis.

...>

Operating Room

SOAP Format

USE SOAP format - makes it easier!

E

Outpatient

I

Patient

Emergency Treatment

"Pub C, P - cCI. cond11g, J1al no\, bie comp111c ...
...Ache11fracture Repo:11t1on frntctur when possible. (if noL refer to OMFS): rigid splint J-4

...APA

Le3ve one "side of wound slightly open for drain:

..."Gri9ul lacer. it10m. - reposition as c10,c to nor-

mal a\'i peN,lbic 4-0 plainchrome gut.
Dental Resident Orientation Information

Adult Emergency Department
University Medical Center of Southern Nevada

Welcome to the Emergency Department clinical rotation for off-service residents. Please carefully review the rotation resident responsibilities outlined below. The Goals and Objectives of the Emergency Department rotation, as well as the Policy for Resident Supervision and Clinical Responsibility are, also, attached for your review.

RESIDENT RESPONSIBILITIES

Clinical responsibilities include:

- 8 shifts in the Adult Emergency Department divided between days, swing shifts, and nights. The 12-hour shifts run from 7am-7pm, 11am-11pm, and 7pm-7am. There are no exceptions to the aforementioned shift times.
- All funds, regardless of source, generated from a graduate student’s clinical activities in connection with his/her participation in the academic programs shall accrue solely to the benefit of SDM. Graduate students are not employees of SDM and, as such, are not eligible for wages, workers’ compensation or other benefits otherwise available to SDM employees in connection with their participation in the graduate program.

While on duty, residents are expected to function as integral team members of the Emergency Department, appropriate to their level of training.

- Duties include independently evaluating patients as assigned by the attending emergency physician, which includes performing a history and physical examination, and formulating a diagnostic evaluation and management plan. Residents will then present their patient to the attending emergency physician, and discuss their assessment and plan, prior to initiating diagnostic testing or therapy.

- The Emergency Department functions at a dynamic pace, and efficient patient flow is critical to ensure that patients in the Waiting Room can be evaluated as rapidly as possible. Residents will be expected to manage multiple patients simultaneously, and must be aware of the status of pending diagnostic tests, and patient response to any medications administered.

- Residents are responsible for the ongoing management of their assigned patients while in the Emergency Department. This includes the performance of serial reassessments of patients, along with timely follow-up of laboratory and radiology results, and consistently updating the attending emergency physician. Any change in patient condition or critical laboratory/radiology result should be immediately communicated to the attending physician.
Residents are responsible for arranging the patient management and disposition as discussed with the attending emergency physician. This includes contacting on-call consultants, as necessary, or discussing the case with the admitting physician to arrange for hospital admission.

Sign-out rounds take place daily at 7am and 7pm in the Medical Pod nursing station. An overhead announcement will signal the beginning of rounds, and all residents are required to be present and participate. Residents about to complete their shift are responsible to sign-out to an oncoming resident, to ensure the ongoing management of any patients who have not yet been either admitted or discharged from the Emergency Department.

Residents are expected to actively participate in patient care throughout their scheduled shift; a 30-minute meal break is allotted during each shift. Leaving the Emergency Department early, before the completion of a 12-hour shift is not permitted.

Residents are expected to arrive on-time to their respective clinical shifts and be prepared for work, which includes having all necessary equipment to perform satisfactorily (e.g. stethoscope).

Any resident who is ill or unable to make it to an assigned shift must:
  1. Immediately contact the Emergency Department at 383-2211, and notify the Charge Physician, as well as
  2. E-mail Program Director, Dr. Berkeley (emergdoc@mac.com) the SAME DAY.

In order to pass the rotation, it is the resident’s responsibility to subsequently arrange a make-up shift with the EM Residency Program Director, Dr. Ross Berkeley.

A patient encounter log needs to be completed by the resident during each shift; a registration sticker of each patient who you primarily evaluate should be affixed to the log. The log needs to be signed by the attending physician with whom you worked after each Emergency Department shift, and submitted to Alisha Ortiz, the office assistant in the Department of Emergency Medicine, at the end of your rotation. The information included in the log will be utilized to verify attendance at each shift, as well evaluation of patient pathology and procedures completed. This information will also be utilized to help monitor the resident experience and improve the rotation. Failure to turn in a signed patient log for any scheduled shift will result in that shift being considered as an absence, and a make-up shift will have to be performed in order to successfully pass the rotation.

At the conclusion of each Emergency Department shift, you need to hand a resident evaluation card to your assigned attending emergency physician. Your final evaluation for this rotation is based upon these daily evaluation cards. Completion of at least 75% of the attending daily evaluations is required to pass the rotation.

Academic responsibilities include:

Completion of a case review of one patient you managed during the Emergency Department rotation. This should be a typed 2-4 page discussion of an interesting or unusual case in which you actively participated during your rotation. This is a required component of the rotation and must be submitted prior to the completion of the rotation. Please refer to the case review instruction sheet and sample in the orientation folder for further information.
Attendance at the weekly Emergency Medicine Academic Grand Rounds is strongly encouraged, but not required of those on a 2-week rotation in the Emergency Department. The conference topics are listed on the EM Academic Schedule. The schedule also lists the EM resident weekly reading assignments, which are chapters from Rosen’s Emergency Medicine: Concepts and Clinical Practice, available online at MDconsult.com; although not required reading for off-service rotators, these are pertinent to the weekly discussions. This educational conference takes place every Wednesday from 8am-1pm (unless otherwise noted on the EM Academic Schedule) across the street from UMC (across Tonopah) at the Department of Emergency Medicine conference room at Delta Point, 901 Rancho Lane, Suite 135.

SCHEDULING POLICY

In compliance with ACGME requirements, residents will never be required to work more than 60 clinical hours in the Emergency Department during any given week.

Any special scheduling requests need to be submitted to Alisha Ortiz, the office assistant in the Department of Emergency Medicine, no later than 60 days prior to the beginning of the rotation. Efforts will be made to accommodate schedule requests but, due to the complicated nature of the Emergency Department schedule and the large number of rotating students and residents, requests will only be granted if the schedule permits, and no guarantees can be offered. Trading of assigned shifts between residents is not permitted, and any shift changes must be approved by the EM residency Program Director.

EVALUATIONS

During clinical shifts, residents will work with several different attending emergency physicians who will then complete an evaluation after every shift, based on the ACGME core competencies. This includes a numerical assessment of resident competency of 1) Patient Care; 2) Medical Knowledge; 3) Practice-Based Learning; 4) Interpersonal & Communication Skills; 5) Professionalism; and 6) System-Based Practice. A sample of the daily off-service resident evaluation card is included in the orientation folder.

As described above, at least 75% of these daily evaluation cards must be completed in order to pass the rotation. It is each resident’s responsibility to submit a daily evaluation card to their assigned attending at the end of their shift; the attending physicians will then complete the evaluation card. The final grade for the rotation is based on the daily clinical evaluations and an overall assessment of your level of participation and clinical performance.

POLICY ON PASSING THE ROTATION

A passing grade on a rotation in the Adult Emergency Department is dependent upon successful completion of all components of the rotation, which include:

- Active participation during all 8 assigned clinical shifts in the Emergency Department.
- Satisfactory completion of an emergency medicine case review, submitted no later than the last day of the rotation.
- Submission of all 8 daily patient encounter logs, signed by an attending physician.
• Satisfactory clinical evaluations by attending emergency physicians, demonstrating fulfillment of the minimum requirements for competency in all areas of evaluation (≥2.5 grade-point average), as well as a satisfactory overall assessment.
• Completion of the Evaluation of Emergency Medicine Rotation form, to be turned in at the end of the rotation.

The EM residency Program Director/Associate Program Director will oversee the global evaluation of each resident’s performance in the core competencies, as well as overall performance on the rotation; a resident rotation evaluation form will then be submitted to their residency program.

Failure of satisfactory completion of any of the above requirements will result in either probation and/or failure of the Emergency Department rotation.

POLICY ON PROBATION OR FAILURE

All residents are expected to arrive on time for their shifts, behave in a professional manner, and treat their patients and co-workers with respect. If a resident persistently receives unsatisfactory daily performance evaluations during the rotation, fails to comply with the above-listed components of the rotation, or demonstrates any unsatisfactory behavior that could potentially jeopardize passage of the rotation, a letter of warning will be issued to the resident and sent to their residency director, and the resident will be placed on probation. The resident will be given this letter in a timely fashion, in order to allow an opportunity for satisfactory completion of the rotation via appropriate improvements in performance.

During the probationary period, the resident will be allowed to continue the clinical shifts to allow time to correct the aforementioned areas of unacceptable performance. If these deficiencies are not corrected in a timely fashion, the resident will not be permitted to continue the clinical shifts, and will fail the rotation. A subsequent meeting will be arranged between the leadership of the Department of Emergency Medicine and the residency Program Director of the off-service resident.

Contact Information: Alisha Ortiz, office assistant, Department of Emergency Medicine
Telephone: 702-383-7885 / Fax: 702-383-8235, alisha.ortiz@gmail.com

Policy for Resident Supervision and Clinical Responsibility
• Supervision shall be provided for all residents in a manner that is consistent with proper patient care, the educational needs of residents, and the applicable residency program requirements.
• Program-specific policies are in compliance with UMC institutional policy, as well as standards outlined by the Emergency Medicine Residency Review Committee (RRC).
• Residents will be appropriately supervised by teaching staff according to their level of education, ability, and experience. The level of responsibility shall be determined by the Program Director and teaching staff.
• All residents must function under the direction of an attending physician. The attending is to direct patient care and provide the appropriate level of supervision based upon the patient’s condition, the likelihood of major changes in the management plan, the complexity of the care, and the experience and judgment of the resident being supervised.
• Resident responsibility is graduated. Residents are given progressive responsibilities, in both the clinical as well as the didactic curriculum, based on level of training.
Off-Service Residents in the Adult Emergency Department

- The off-service resident will care for patients with a variety of illness and injuries under close supervision of the EM attending to whom the resident has been assigned.
- The off-service resident is expected to prioritize care based on the patient’s level of acuity and/or time within the Department.
- The off-service resident must present all patients to the assigned attending prior to initiating diagnostic testing or therapy.
- The EM attending assumes full responsibility for the care of all patients presented to them by the off-service resident.
- The off-service resident is required to demonstrate adequate skill in the following procedures (including, but not limited to, the list below) in order to perform them independently and without supervision, with the exception of the female GU exam (pelvic exam) which must be supervised during the PGY-1 year:
  - ABG
  - Bladder catheterization, male
  - Bladder catheterization, female
  - Digital rectal exam, male
  - GU exam, male
  - **GU/Pelvic exam, female (must be supervised during the PGY-1 year)**
  - Peripheral IV insertion
  - Correct use of slit lamp and Tono-pen for ocular examination
  - Anterior and posterior nasal packing
  - Nasogastric tube insertion
  - Reduction of large and small joint dislocations, including fracture/dislocations
  - Application of splints for extremity immobilization
  - Laceration repairs, including use of skin staples and Dermabond
  - Incision and drainage, simple abscess
  - Central venous access
  - Lumbar Puncture
  - Bedside ultrasound
  - Endotracheal intubation

- The EM attending will directly supervise all critical interventions.
- The EM attending must approve and consider supervision of all invasive procedures.
- In resuscitations, the primary role of the off-service rotator is vascular access and defibrillation/cardioversion.
- The off-service resident is expected to manage 0.8 patients per hour, on average.
- Any off-service resident who is ill and unable to make it to their assigned shift must immediately contact the Emergency Department Charge Physician (as noted above), as well as notify the Program Director/Associate Program Director as soon as possible, to allow for adequate time to arrange shift coverage.

Off-Service Resident Rotations:
University Medical Center Adult Emergency Department

Goals and Objectives
Patient Care:
1. Demonstrate competence in performing a focused history and physical examination including: identifying pertinent risk factors in the patient’s history, providing a focused evaluation, interpreting the patient’s vital signs and condition, recognizing pertinent physical findings, and performing techniques required for conducting the exam.
2. Demonstrate competence in performing an adequate and appropriate neurologic exam on trauma and medical patients with various levels of consciousness.
3. Demonstrate competence in performing an adequate and appropriate trauma exam
4. Demonstrate competence in performing an adequate airway assessment.
5. Demonstrate competence in performing an adequate and appropriate gynecologic exam.
6. Demonstrate competence in performing and appropriate evaluation on pediatric patients.
7. Demonstrate the ability to recognize and evaluate cardiac emergencies.
8. Demonstrate the ability to recognize and evaluate respiratory and airway emergencies.
9. Demonstrate the ability to recognize, evaluate, and manage GI emergencies.
10. Demonstrate the ability to recognize, evaluate, and manage gynecologic emergencies
11. Demonstrate the ability to recognize, evaluate, and assess surgical emergencies.
12. Identify and manage non-emergent abdominal, gynecologic, neurologic, infectious, pulmonary, and cardiac complaints.
13. Demonstrate appropriate treatment priorities, identifying patients by acuity.
14. Demonstrate familiarity in performing procedures including, but not limited to:
   - Correct use of slit lamp and Tono-pen for ocular examination
   - Anterior and posterior nasal packing
   - Nasogastric tube placement
   - Reduction of large and small joint dislocations, including fracture dislocations
   - Application of splints for extremity immobilization
   - Laceration repairs, simple and complex, including use of skin staples and Dermabond
   - Incision and drainage, simple abscess
   - Peripheral and central venous access
   - Lumbar puncture
   - Bedside ultrasound
   - Endotracheal intubation
15. Demonstrate timely and appropriate patient dispositions.
16. Demonstrate ability to evaluate an average of 0.8 patients per hour

Medical Knowledge:
1. Formulate a differential diagnosis based on clinical findings for altered mental status, including chemical, psychological, and organic causes.
2. Discuss the indications and techniques for control of hypertension in emergent and urgent conditions.
3. Demonstrate an understanding of the evaluation and management of vaginal bleeding in the pregnant and non-pregnant female patient.
4. Describe the indications and utility of various modalities to evaluate complaints of shortness of breath including the diagnoses of asthma, bronchitis, pneumonia and pneumonitis, emphysema, COPD, and pulmonary embolism.
5. Correctly request and interpret radiographic studies for complaints of extremity pain and trauma.
6. Understand the pathophysiology and principles of acute coronary syndrome, including pharmacologic and procedural interventions and their indications.
7. List the risk factors and management for gastrointestinal bleeding including both upper and lower sources.
8. Outline the differential diagnoses for a complaint of colicky abdominal pain including, but not limited to, cholecystitis, biliary colic, renal colic, ureteral or renal calculi, and abdominal aortic aneurysm.

Practice-Based Learning and Improvement:
2. Maintenance of a procedure log to document competence of procedures and skills.

Interpersonal Skills and Communication:
1. Succinctly and efficiently request consultation for patients requiring specialty management
2. Demonstrate appropriate and complete documentation of patients’ encounters.
3. Discuss with appropriate language and terminology significant risk factors and patient modifiable behaviors that increase the patient’s risk for developing cardiovascular disease
4. Demonstrate the appropriate use of and communications with consultants

Professionalism:
1. Develop and maintain interpersonal, and communication skills essential to interactions with patients, family, and staff.
2. Maintain personal wellness and assist colleagues in times of crisis and when necessary and appropriate.
3. Practice ethical decision making with cultural sensitivity
4. Practice medicine in a fashion that displays competence, consideration, and integrity
5. Demonstrate appropriate chart documentation.
6. Maintain all appropriate credentialing and licensure requirements

Systems-Based Learning:
1. Appropriately refer patients for follow-up care and continuity of care
2. Appropriately access healthcare for patients
3. Demonstrate appropriate time management skills and the ability to evaluate an average of 0.8 patients per hour.
4. Provide cost effective management patients including cost appropriate medications and treatment modalities.
Family Medicine
UNSONM Family Medicine – Las Vegas

Family Medicine Rotation

General Goals and Objectives:
   a. Gain an appreciation for the importance of oral health as an overall component of systemic health by working closely with physician colleagues in the clinical setting.
   b. Understand the basic principles of physical diagnosis including performance of history, review of systems and physical examination.
   c. Gain experience in hospital protocols including in-patient records, orders, and admission and discharge procedures.

Specific Goals and Objectives:
1) Patient Care:
   a. Assumes inpatient care of all patients on the service, and develop the skill to manage inpatients of various ages and sexes with various problems on several different wards throughout the hospital.
   b. Understand the role of the home visit in patient care.
   c. Provide continuity of care for patients in the outpatient and inpatient settings.
   d. Develop an understanding of who needs to be admitted and who can be treated on an outpatient basis, and understand the proper timing of hospitalization in the management of problems.
   e. Manage the rehabilitation from acute illness or injury.

2) Medical Knowledge:
   a. Learn the integration of the biopsychosocial model into the management of common ambulatory and inpatient problems.
   b. Demonstrate an investigatory and analytic thinking process for each patient.
   c. Understand the importance of comprehensive patient and family medical care and incorporate the knowledge into patient care treatment plans.

3) Practice Based Learning (This competency is addressed longitudinally throughout the rotation):
   a. Scientific evidence will be reviewed by the resident and attending physician in the context of their patients.
   b. The practical implementation of evidence-based medicine will be discussed as the medical decision making is reviewed.
   c. Information technology will be utilized by the resident as he or she is required to research topics as directed by the attending physician.
   d. Information technology will be utilized with the hospital’s implementation of their electronic health record.
   e. The resident will also be evaluated on the steps they took during the rotation to improve their shortcomings.
   f. Reinforce the identity and commitment to the principles and philosophical attitudes of Family Medicine.
   g. Understand the application of preventive medicine as it applies to the hospitalized patient.
   h. Analyze practice experience and perform practice-based improvement activities.
   i. Obtain and use information about our patient population.
j. Develop skills for proper presentation of patients to colleagues in morning report.

4) Interpersonal and Communication Skills (This competency is addressed longitudinally throughout the rotation):
   a. Create and sustain a therapeutic and ethically sound relationship with patients.
   b. Interact with staff family physicians that will serve as advisors and role models.
   c. Interact with fellow residents as a team of care providers.
   d. Develop, use and enhance communication skills (nonverbal, explanatory, questioning, and writing).
   e. Appreciate the importance of patient health education.

5) Professionalism (This competency is addressed longitudinally throughout the rotation):
   a. The attending physician will observe and assess the resident’s sense of personal responsibility including attendance, promptness, motivation, completion of duties, and appropriate dress.
   b. Ethical and legal practice skills will be taught, modeled, and observed
   c. Respect for cultural, age, and gender differences will be taught, observed and evaluated.
   d. The resident is expected to treat patients, families and colleagues with respect, understanding, sympathy and honesty
   e. Demonstrate a commitment to carrying out professional responsibilities (accountability to patients, society and profession and ongoing professional development).
   f. Demonstrate an adherence to ethical principles (withholding clinical care, confidentiality, informed consent, and business medicines).
   g. Demonstrate sensitivity to a diverse patient population (gender, culture, age).
   h. Develop increasing responsibility in the education and supervision of the younger house staff and medical students.

6) Systems Based Practice (This competency is addressed longitudinally throughout the rotation):
   a. The resident will learn to become aware of available resources and the cost effectiveness of testing and therapeutic options.
   b. The resident will gain a better understanding of the multidisciplinary approach to the care of patients in Family Medicine.
   c. The resident will gain an increasing understanding of the role of the patient, physician, support staff, insuror, and clinic in the health care environment.
   d. Understand individual as well as family health assessment and maintenance.
   e. Understand the proper use of referral and consultation.
   f. Understand the roles of the community, and the resources available to assist in the patient’s care.
   g. Understand the value of Discharge Planning.
   h. Understand the use of domiciliary care.
Anesthesiology
Mike O’Callaghan Federal Hospital
Anesthesia Rotation

Goals and Objectives:

1) Understand and follow proper operating room protocol and procedures to maintain a sterile surgical field.
2) Understand and appropriately utilize patient assessment tools such as the pre-anesthetic evaluation, H&P procedures and documentation, and the ASA classification system to evaluate relative procedural risk.
3) Gain proficiency in intravenous catheterization/venipuncture and learn the basics of fluid and electrolyte management.
4) Perform multiple endotracheal intubations and gain experience maintaining a patent airway on anesthetized patients.
5) Familiarization with basic airway management techniques.
6) Monitor patient vital signs during the anesthesia and recovery phases of treatment and accurately complete the anesthesia record. Familiarization with prevention and treatment of anesthetic emergencies.
7) Gain a basic knowledge regarding the behavioral and pharmacologic techniques and mechanism of action of commonly used general anesthetic agents and adjunctive drugs used in anesthesiology.
8) Learn the basic principles of patient safety including marking of operative sites and use of “time out” procedures to prevent wrong site surgery or other adverse outcomes.
APPENDIX A

Minimum Technical Standards for Admissions & Matriculation

The University of Nevada Las Vegas, School of Dental Medicine (UNLV SDM) is committed to the policy that all persons shall have equal access to its programs, facilities and employment without regard to race, color, creed, religion, national origin, gender, age, marital status, disability, public assistance status, veteran status or sexual orientation.

In adhering to this policy, UNLV SDM abides by the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, the other applicable statutes and regulations of the State of Nevada, the Nevada System of Higher Education and the University of Nevada, Las Vegas relating to equality of opportunity. In this venue, the School of Dental Medicine encourages all qualified individuals to apply for admission to its Doctor of Dental Medicine (DMD) program.

UNLV SDM recognizes that the award of a Doctor of Dental Medicine degree carries with it the full authority of the Nevada System of Higher Education Board of Regents and communicates to those who might seek the services of the bearer that he or she is competent to practice general dentistry. The DMD degree is a professional degree, unique in that the graduate is prepared upon licensure to practice all disciplines within the scope of a general dentist. This requires that the student in the curriculum acquire didactic knowledge as well as psychomotor skills and the attitudes essential to the profession and agreed upon by the faculty as requisite for the practice of general dentistry. To successfully negotiate the curriculum, students must have a sufficient motor function to execute movements essential to providing oral healthcare to patients, a level of cognitive aptitude, ethical competency, and hand-eye coordination.

UNLV SDM is mindful of the unique nature of the dental curriculum. Applicants must possess the skills and abilities that will allow them to successfully complete the course of study and receive the full benefit of the education. In the process, the student is required to direct or perform treatment on the patients of UNLV SDM Clinics and its affiliates. This includes the completion of treatment safely and within an acceptable amount of time. With this in mind, the student must be able to meet the following technical standards with or without reasonable accommodations.

UNLV SDM will consider any applicant who demonstrates the ability to perform or to learn to perform the skills listed in these standards. UNLV SDM has determined that these skills are essential to the program of instruction. Continued enrollment and graduation will depend on the successful demonstration of both the knowledge and skills listed in these technical standards. The Student Performance Committee will monitor each candidate’s/student's demonstration of such knowledge and skill. Although the UNLV SDM may not inquire into whether an applicant has a disability prior to making a decision on admission, an applicant may disclose a disability for which he or she wishes accommodation during the admissions process. Such applicant must contact UNLV DRC. 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 Associate Dean for Student Affairs or Director of Admissions before the interview. Upon the request of an applicant or a student, who provides appropriate documentation and certification, reasonable accommodations will be provided. [Requests for
accommodation must be initiated with the DRC. UNLV SDM will provide reasonable accommodations, but is not required to make modifications that would fundamentally alter the nature of the program or provide auxiliary aids that present an undue burden to the UNLV SDM. The student must be able to perform all of the technical standards with or without accommodation in order to matriculate into the curriculum.

1. MOTOR SKILLS

GENERAL: A candidate/student should have a sufficient level of manual dexterity such that he/she is able to execute the fine movements required to provide general dental care and treatment to patients within a specified amount of time.

SPECIFIC: It is required that a candidate/student possess the manual motor skills necessary to directly perform diagnostic and treatment maneuvers associated with the practice of general dentistry. Such maneuvers require coordination of both gross and fine muscular movements, equilibrium, and functional uses of the senses of touch, hearing, and vision.

SPECIFIC: A candidate/student must possess the motor skills necessary to directly perform basic life support (including CPR), transfer and position disabled patients, physically restrain adults who lack motor control, and position and reposition self around patients in various treatment settings. The candidate/student must be able to operate dental equipment controls utilizing fine hand movements, position and move dental instruments, and move in all directions within fractions of one millimeter of tolerance. Such actions require the ability to use both hands, coordination of gross and fine muscular movements, equilibrium, and functional uses of the senses of touch and vision. Candidates/students must be able to work in the proper ergonomic positions appropriate to the delivery of dental treatment for extended times.

2. SENSORY/OBSERVATION

BASIC SCIENCES

GENERAL: A candidate/student must be able to acquire a defined level of required information as presented through lectures, readings, demonstrations, and experiences in the basic and dental sciences.

SPECIFIC: A candidate’s/student’s ability to acquire information includes, but is not limited to, information conveyed through physiologic, pharmacological demonstrations in animals and microscopic images of microorganisms and human or animal tissues in normal and pathologic states. A candidate/student must be able to acquire information from written documents and to visualize information presented in images from paper, films, slides, video, and computer. A candidate/student must be able to interpret radiographs (x-rays) and other graphic images, with or without the use of assistive devices. A candidate/student must have functional use of visual, auditory, and somatic sensation while using appropriate enhancement of sensory modalities (such as microscopes, stethoscopes, etc.).

CLINICAL SCIENCES

GENERAL: A candidate/student must be able to observe a patient accurately, at a distance and close at hand, and observe and appreciate non-verbal communications when performing general dental treatment or administering medications.
SPECIFIC: A candidate/student must be able to perform visual and tactile dental examinations and treatment. This requires visual acuity, accommodation, and color vision necessary to discern slight differences and variation in color, shape, and general appearance between normal and abnormal, soft and hard tissues. Use of tactile senses may be either direct manual palpation or indirect through manual instrumentation. A candidate/student must also possess the visual acuity to read charts, records, small print and handwritten notation, and distinguish small variations in colors intra and extra orally.

3. COMMUNICATION

GENERAL: A candidate/student must be able to communicate clearly and effectively with a degree of sensitivity with patients, parents and/or guardians; establish good rapport, convey or exchange information at a level allowing development of a health history; identify problems presented; explain alternative solutions; and give directions during treatment and post-treatment. For effective patient treatment, the candidate/student must be able to communicate with patients, parents, guardians, and all members of the dental and medical health care team effectively and efficiently and communication must be culturally appropriate. Communication includes oral and written modes.

SPECIFIC: A candidate/student must have sufficient facility with English to retrieve information from literature, computerized databases and lectures and to communicate concepts on written exams and patient charts. Patients, faculty, students, and staff must be able to easily understand the candidate/student’s oral and written communication in order to effectively evaluate performance and to work collaboratively in the care of patients. Patients must be able to understand the candidate/student easily to help establish patient rapport, understand what information is requested and needed by the candidate/student and understand the explanation of treatment procedures, treatment options, informed consent, follow up, and/or home care.

4. COGNITIVE

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

SPECIFIC: A candidate/student must be able to comprehend and mentally visualize three-dimensional relationships and to understand the spatial relationships of structures. Problem solving and clinical decision making and critical thinking skills demanded of a general dentist require all of these intellectual abilities. A candidate/student must be able to perform these problem-solving and critical thinking skills in a timely fashion for effective patient treatment.

5. BEHAVIORAL

GENERAL: A candidate/student must possess the emotional health and maturity required for full utilization of his or her intellectual abilities, the exercise of good judgment, maintenance of patient confidentiality, 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, faculty, staff, and students.

SPECIFIC: A candidate/student must recognize that the curriculum is physically, mentally and emotionally taxing. He or she must be able to tolerate physically and emotionally demanding workloads, function effectively under stress, 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, interest, and motivation are all personal qualities that will be assessed during the admission and educational processes. Further, a candidate/student must be able to manage apprehensive patients with a range of moods and behaviors in a tactful, culturally sensitive, congenial, personal manner so as not to alienate or antagonize them. A candidate/student must reasonably be expected to accept criticism and respond by appropriate modification of behavior.

6. ETHICS AND PROFESSIONALISM

GENERAL: A candidate/student must maintain the standards of conduct for ethics and professionalism as set forth in the American Dental Association’s Principles of Ethics and Code of Professional Conduct and those further specified in the UNLV SDM Student Handbook.

SPECIFIC: A candidate/student must always act in the best interest of the patient and society even when there is a conflict with the candidate/student’s personal self-interest. The candidate/student must conduct oneself as a trustworthy and responsible citizen and act with impeccable integrity in their interactions with students, faculty, staff, and the public. A candidate/student must refrain from actions that detract from the professional atmosphere or other actions. This expectation would also apply when attending any school-sponsored or related activities.

UNLV SDM Technical Standards are required to successfully complete the School’s competencies needed for graduation. These competencies are available upon request through the Associate Dean of Academic Affairs, UNLV School of Dental Medicine, 1001 Shadow Lane, MS 7410, Las Vegas, NV 89106.
Applicant’s Certification of Understanding of the Technical Standards of UNLV SDM

I certify that I have read the above technical standards (UNLV SDM Minimum Technical Standards for Admission and Matriculation), and understand that as part of the dental school curriculum I will be required to meet all of the above stated technical standards with or without reasonable accommodations.

______________________________  ______________________________
NAME: printed  SIGNATURE

__________________________________________
DATE

Student’s Certification of Ability to Meet the Technical Standards of UNLV SDM

I have read and understand the above technical standards and I hereby certify that I am able to meet these standards with or without reasonable accommodations.

______________________________  ______________________________
NAME: printed  SIGNATURE

__________________________________________
DATE
APPENDIX B

HEALTH WITHDRAWAL POLICY

RESPONSIBLE ADMINISTRATOR: VICE PRESIDENT OF STUDENT LIFE
RESPONSIBLE OFFICES: OFFICES OF THE VICE PRESIDENT FOR STUDENT LIFE, STUDENT COUNSELING AND PSYCHOLOGICAL SERVICES, AND STUDENT CONDUCT
ORIGINALLY ISSUED: DECEMBER 13, 2005
APPROVALS:

APPROVED BY:

Rebecca Mills
Date

APPROVED BY THE PRESIDENT:

Carol C. Harter
Date

REVISION DATE: N/A

STATEMENT OF PURPOSE

In keeping with the UNLV Student Conduct Code, each member of the University shares responsibility for maintaining conditions conducive to achieving the UNLV’s goals. Further, the University holds students responsible for their own actions. (UNLV Student Conduct Code, Purpose Statement, 2004.) From time to time, however, the University faces situations requiring an immediate response involving students because their behavior poses a significant danger to others in the University and/or themselves. To address these situations and to fulfill the University’s role in providing a safe campus, UNLV established the Health Withdrawal Policy and Procedures.

ENTITIES AFFECTED BY THIS POLICY

All academic units, libraries, and/or units with teaching and research faculty.
WHO SHOULD READ THIS POLICY

Administrators, academic faculty, staff and students who would be affected by this policy.

I. Policy

Aside from the disciplinary action that may be taken under the UNLV Student Conduct Code, the University reserves the right to request or require a student to withdraw from the University if it is determined that such student suffers from a psychological or medical disorder and as an apparent result of that disorder the student:

A. Engages, or threatens to engage, in behavior which poses a danger of causing physical harm to self or others, and/or

B. Engages, or threatens to engage, in behavior which interferes with the educational process or unlawful activities or other members of the University, and/or

C. Engages, or threatens to engage, in behavior which interferes with the orderly operation of the University, and/or

D. Demonstrates an inability to provide for personal needs (e.g., nourishment, shelter) such that there is a reasonable possibility that serious physical harm or death may occur within a short period of time.

II. PROCEDURES

A. INTERIM SUSPENSION

The President or designee may order the immediate suspension of a student for an interim period of time when there is cause to believe the student endangers self or the health, safety, or welfare of the University community or endangers its property (See Emergency Clause, UNLV Student Conduct Code). The student will remain on such interim suspension pending resolution of the situation pursuant to these procedures.
B. VOLUNTARY WITHDRAWAL

A student may request a voluntary withdrawal for psychological or medical reasons from the Director of Student Conduct and Campus Housing on the following basis:

1. The documented presence of a classifiable disorder of sufficient severity to prevent the student from completing all of their academic courses.

2. The student must submit a recommendation for withdrawal from an appropriately licensed health care professional.

3. The Student must execute a release of information form (request and authorization to exchange information) so that all designated officials may exchange information in order to reach a decision under these procedures.

4. A student’s petition for voluntary withdrawal shall be reviewed by the Psychological and Medical Withdrawal Advisory Team.

5. A recommendation regarding a voluntary withdrawal request and a draft set of conditions for readmission, if applicable, shall be forwarded to the Director of Student Conduct and Campus Housing for a recommendation to the Vice President for Student Life who will make a decision whether to approve.

6. If the Director of Student Conduct and Campus Housing, on the recommendation of the Psychological and Medical Withdrawal Advisory Team, determines that there is reason to believe that the student meets one or more of the criteria for psychological or medical withdrawal, the Director may permit it upon approval of the Vice President for Student Life, the student to voluntarily withdraw from the University and waive the University's right to further proceedings under the SDM Conduct Code.

7. During the initial review or subsequently. The case may be reviewed by the Psychological and Medical Withdrawal Advisory Team to recommend conditions for readmission to be forwarded to the Director of Student Conduct and Campus Housing for a recommendation to the Vice President for Student Life for approval or disapproval.
8. It shall be the responsibility of the student to contact their academic advisor, Student Financial Services, the Office of International Students and Scholars (if applicable), and any other appropriate university or other advisor, including legal counsel, to obtain information concerning the effect of the requested voluntary withdrawal on their degree program, student loan(s), Immigration status, etc., since all consequences thereof shall be the sole responsibility of the requesting student.

C. VOLUNTARY WITHDRAWAL

1. The Director of Student Conduct and Campus Housing, in consultation with the Psychological and Medical Withdrawal Advisory Team, will determine whether the student's dangerous behavior appears to be primarily attributable to a psychological or medical disorder as described in the policy.

2. The student may be referred for a mandatory evaluation at Student Counseling and Psychological Services or a community mental health provider selected by the University.

3. The student will be asked to execute a release of information form (request and authorization to exchange information) so that all designated officials may exchange information in order to reach decisions regarding the evaluation and to delay, modify, or waive any disciplinary proceedings.

4. Such evaluation must be completed within five (5) calendar days from the issuance of a referral letter, unless an extension is issued in writing by the Director of Student Conduct and Campus Housing. Any evaluation shall be reviewed by the Psychological and Medical Withdrawal Advisory Team.

5. The student shall be informed of a mandatory referral for evaluation in writing, and shall also be provided with a copy of the policy and procedures.

6. Pending disciplinary action may be stayed pending completion of the evaluation and until a determination is made as to imposition of an involuntary withdrawal.
policy. An administrative hold will be placed on the student's academic record to prevent any unauthorized reenrollment by the student.

E. EFFECT ON HOUSING STATUS

If the student is living in the residence halls, his/her contract will be voided and a refund shall be issued based on the per diem rate for the unused portion of the semester. The amount of the refund shall be determined as of the date the student removes all belongings. Surrenders the room key, and officially checks out of the assigned residence hall.

F. REFUNDS

All refunds will be made in accordance with otherwise applicable departmental and University policies and procedures.

G. READMISSION

A student wishing to be considered for readmission should contact the Director of Student Conduct and Campus Housing according to the written conditions for re-admission. It is the student's responsibility to provide the required paperwork documentation regarding compliance with any conditions and/or sufficient improvement to allow readmission. The petition for readmission and supporting documentation will be reviewed by the Psychological and Medical Withdrawal Advisory Team. A recommendation will be forwarded to the Vice President for Student Life. The student must also meet any readmission requirements of their academic college or school.

III. PSYCHOLOGICAL AND MEDICAL WITHDRAWAL ADVISORY TEAM MEMBERSHIP

Standing members of the Psychological and Medical Withdrawal Advisory Team shall include the Assistant Vice President for Student Wellness and the Student Counseling and Psychological Sciences Staff Psychiatrist. Other members may be added, or these members may be deleted or replaced at the discretion of the Vice President for Student Life.
RELATED DOCUMENT

University, College / School, and Department / Unit Bylaws; Board of Regents’ Handbook; Nevada Administrative Code; and Nevada Revised statutes, UNLV Student Conduct Code.

CONTACTS

Orrcr OF STUDENT COND XT
Flora Dungan Humanities Building • FDH-325
(702) 895-2308 / F AX (702) 895-2514
http://www.unlv.edu/studentlife/judicial/index.html

STUDENT COUNSELING AND PSYCHOLOGICAL SERVICES
Student Services Complex • SSC-103
(702) 895-3627 / F AX (702) 895-0136
http://www.unlv.edu/studentlife/caps/index.html

OFFICE OF THE VICE PRESIDENT FOR STUDENT LIFE
Flora Dungan Humanities Building • FDH-330
(702) 895-3656/ F AX (702) 895-1545
http://studentlife.unlv.edu/
APPENDIX C
UNLV SDM
Extramural Educational Experience/Underserved Patient Care Trip Request Procedure

A graduate of the UNLV SDM is expected to be in attendance and complete the appropriate in-residence curricular time specified to obtain the degree of Doctor of Dental Medicine. This does not preclude the ability of a student to participate in related Underserved Patient Care Trips or Extramural Experiences. Compliance with SDM policies and University-wide policies is absolutely mandatory. Please be advised that a request may be denied if the student has been absent frequently for multiple activities.

Educational Experience outside the continental United States:

1. Educational activities outside the continental U.S. is considered international travel.
2. The applicant must complete the Extramural Experience/Underserved Area Activity Checklist (attached).
3. SDM must have documented memoranda of understanding, affiliation agreement or other appropriate arrangements with the trip sponsor as approved by UNLV Administration.
4. Request must be initiated at least 6 months prior to the intended activity.
5. The academic status of the applicant must be reviewed and approved by the Associate Dean for Academic Affairs. The student must be “on-track” with didactic course work, clinical productivity, and competency completion as well as professional conduct. (Students on Academic Warning, Academic Probation, Clinic Suspension, or Clinic Reassignment will not be considered).
6. The applicant must have completed and submitted all the necessary paperwork required by the Office of International Programs.
7. The applicant must have appropriate immunization and health status documentation.
8. The applicant must have appropriate approval from the Team Leader and course directors and submit a written plan for making up missed work.
9. If you plan on collecting any data to be used in a research project or publication you will need to get appropriate prior IRB and SDM Office of Research protocol approval.
10. Final approval to participate will be through the SDM Office of Academic Affairs.

Educational Experience within the continental United States:

1. The applicant must complete the Extramural Experience/Underserved Area Activity Checklist (attached).
2. SDM must have documented memoranda of understanding or an appropriate affiliation agreement with the trip sponsor. (Note: If no agreements currently exist this process may take several weeks to months.)
3. Request must be initiated with appropriate notice prior to the intended activity.
4. The academic status of the applicant must be reviewed and approved by the Associate Dean for Academic Affairs. The student must be “on-track” with didactic course work, clinical productivity, and competency completion as well as professional conduct. (Students on
Academic Warning, Academic Probation, Clinic Suspension, or Clinic Reassignment will not be considered.

5. The applicant must have appropriate approval from the Team Leader and course directors and submit a written plan for making up missed work.

6. If you plan on collecting any data to be used in a research project or publication you will need to get appropriate prior IRB and SDM Office of Research protocol approval.

7. Final approval to participate will be through the Office of Academic Affairs.

Clinical Points Policy

- All extramural (off-campus) clinical activities must have prior approval of the Associate Dean for Academic Affairs, and all appropriate documents must be completed by the due date.
- No clinical points will be awarded for underserved patient care/mission trips or extramural experiences that have limited access and added expense to students.
- Clinical points will be awarded for intramural (on-campus) educational activities using SDM clinical software such as, the Children’s Clinic and Sgt. Clint Ferrin Memorial Veterans Clinic.
- If participating in extramural clinical activities that are under the purview of the SDM, clinical points may be granted for procedures completed and approved by attending SDM faculty with appropriate documentation and approval of the Clinical Science Department Chair and Associate Dean for Academic Affairs.
DESCRIPTION

1. Activity Approved as an Elective Course or sanctioned extramural experience, special rotation, or excursion to underserved area.
2. Supervisor and affiliation
3. Paperwork completed with the UNLV Office of International Affairs (if international travel.)
4. Immunization and health status documentation submitted.
5. Affiliation Agreement(s) or memoranda of understanding with sponsoring entity of file.
6. Student Performance Committee Approval. Student must be “on track” with course work, clinic production, competency completion, and professional conduct.
7. Team Leader approval.
8. Course Director approval. (Attach appropriate leave paperwork with course directors signatures)
9. If participating during term session, attach written plan for making up missed work in course work and clinic.
10. If you plan on collecting data for a research project or publication, IRB and Office of Research approval required.
11. All documentation checked and cleared by the Office of Student Affairs and the Associate Dean for Student Affairs.
12. Paperwork filed and approved by the external Activities Committee

COMPLETED

Associated Dean for Academic Affairs

Faculty, Adjunct Faculty, Sponsoring organization responsible party.
UNLV Office of International Affairs

Assoc. Dean for Student Affairs

Assoc. Dean for Student Affairs

Associate Dean for Academic Affairs

Team Leader
Leave Form Completed and Copy Attached

Written plan attached.

[ ] Yes (attach protocol) [ ] N/A Assoc. Dean for Research

Assoc. Dean for Student Affairs

Assoc. Dean for Academic Affairs
APPENDIX D

Student Conduct Code

SECTION 1: GENERAL PROVISIONS

PHILOSOPHY
The aim of education is the intellectual, personal, social, and ethical development of the individual. The educational process is ideally conducted in an environment that encourages reasoned discourse, intellectual honesty, openness to constructive change and respect for the rights of all individuals. Self-discipline and respect for the rights of others within the University of Nevada, Las Vegas (“University” or “UNLV”) community are necessary for the fulfillment of such goals.

The UNLV Student Conduct Code (“Code”) is designed to promote this environment and sets forth standards of conduct expected of students/student organizations who choose to join the university community. When students choose to accept admission to the University, they accept the rights and responsibilities of membership in the University’s academic and social community. Students/student organizations that are found to violate these standards will be subject to conduct sanctions in order to promote their own personal development, to protect the University community, and to maintain order and stability on campus.

To maintain an effective campus environment, each member of the campus community is strongly encouraged to notify appropriate officials of any violation of the Code and to assist in its enforcement. As citizens of the larger community in which the “University” is located, students/student organizations have all the responsibilities and rights that are incumbent upon any citizen. The University is concerned with what happens to students/student organizations and holds students/student organizations responsible for their own actions. Students/student organizations are subject to the University’s internal disciplinary procedures, i.e., the “Code”, and also, when applicable, to local, state, and federal laws.

GOVERNANCE
The behavior of all students/student organizations, as members of the University community, is governed by the Code. Students/student organizations may also be members of other University-based communities that impose additional standards of conduct, including but not limited to honor codes, standards of professional/ethical conduct, housing standards, including but not limited to the Your Guide to Community Living and Campus Housing Contract, intercollegiate athletic teams’ expectations, and student organizations’ expectations.

All University students/student organizations have access to the provisions of the Code which include conduct regulations and procedures. Copies are available on the Office of Student Conduct website at http://studentconduct.unlv.edu/, or in the Office of the Vice President for Student Affairs, and the Office of Student Conduct.
I. AUTHORITY AND JURISDICTION

The Nevada System of Higher Education (NSHE) Board of Regents reserves to the President of the University the authority and responsibility for matters of student discipline. This authority is delegated by the President to the Vice President for Student Affairs or his/her designee for the processing of conduct matters, hearings and appeals. The Code is published and administered by the Office of Student Conduct and is the product of a representative process. The ultimate authority for determining procedures for hearings, however, rests with the institutional President or his/her designee. Pursuant to Title 2, Chapter 6 of the NSHE Code, Section 6.1.1, “NSHE institutions and professional schools may establish written policies, procedures and sanctions for the discipline of its students that may be used in lieu of the policies, procedures and sanctions of [Title 2, Chapter 6], including but not limited to the establishment of student judicial councils, subject to the prior review by the Chief Counsel and to the approval of the president of the institution.”

The NSHE Code and UNLV Code are designed to enable the University to protect against the conduct of those who, by their actions, impair or infringe on the rights of others or interfere with the orderly operations of the University. The Code shall apply to conduct that occurs on the premises of UNLV, at UNLV sponsored activities, and to off-campus conduct that adversely affects the UNLV community and/or the pursuit of its objectives. Each student shall be responsible for his/her conduct from the time of application for admission through the actual awarding of the degree, even though the conduct may occur before classes begin or after classes end, as well as during the academic year and during periods between terms of actual enrollment (and even if their conduct is not discovered until after a degree is awarded). The Code shall apply to a student’s conduct even if the student withdraws from school while a disciplinary matter is pending. The Vice President for Student Affairs or designee shall decide whether the Code shall be applied to conduct occurring off campus, on a case by case basis.

The term “student” means any person who is enrolled in courses, either full-time or part-time, including correspondence study, electronic means, Study Abroad, or auditing, or courses offered through any UNLV satellite campuses or auxiliary means. Students are subject to disciplinary action for conduct that occurs during any period under the Code’s authority and jurisdiction as defined above. Students who leave the University before a conduct matter is resolved may be prohibited from future enrollment until such time as the matter is resolved. Persons who are not officially enrolled for a particular term but who have a continuing relationship with the University are considered “students”. This includes individuals who have applied for admission to the University or have been notified of their acceptance for admission.

Guests must adhere to all UNLV rules, and the hosting student/student organization is responsible for all guests’ actions. It is the responsibility of the host to inform the guests of such rules.

Persons found in violation may be accountable to both civil and criminal authorities and to the University for actions that constitute violations of the Code. At the discretion of UNLV officials, conduct proceedings at the University may be delayed or continue to move forward while civil and/or criminal proceedings are pending or in progress.
II. STUDENTS WITH DISABILITIES

All students, regardless of disability, are responsible for adhering to the Code. When registering for classes at UNLV, the student must consider whether he/she will be able to adhere to the Code. The Americans with Disabilities Act (ADA) does not excuse or protect an individual from being held responsible under the Code for emotional or violent outbursts caused by impairment. For specific guidelines on disability accommodations at UNLV, students are encouraged to contact the Disability Resource Center at http://drc.unlv.edu.

III. EMERGENCY REMOVAL CLAUSE

When there is cause to believe a student endangers the health, safety, or welfare of the University community or its property, the Vice-President for Student Affairs or his/her designee may order the immediate removal of a student, with accompanying prohibition from University property and activities, for an interim period pending a conduct “show cause” hearing. The Office of Student Conduct shall conduct a “show cause” hearing within 72 hours of this emergency removal, or on the earliest college working day thereafter identified by the student. The sole purpose of the “show cause” hearing is to make a recommendation as to whether the student may return to the campus pending conclusion of the conduct process. Simultaneous with such removal, the Vice-President for Students Affairs or his/her designee shall refer the charges to the Office of Student Conduct, who shall process such charges in the manner and within the time limits required by this Code.

SECTION 2: STUDENT RIGHTS AND RESPONSIBILITIES

I. STUDENT RIGHTS

The University is an academic community in which all persons share responsibility for its quality and well-being. As members of the University community, students can reasonably expect all the guarantees and protections afforded students of public institutions, including:

A. The right to fair and equitable process in all matters concerning the Code.
B. The right to exercise their freedoms without fear of University interference.
C. The right to be free from discrimination on the basis of race, ethnicity, gender, age, religion, creed, national origin, disability, or sexual orientation/identity.
D. The right to engage in inquiry and discussion, to exchange thought and opinion, and to speak, write, and print freely on any subject in accordance with the guarantees of federal and state laws.
E. The right to engage in peaceful and orderly speech, protest, demonstration, and picketing within the public forum to the extent such activities do not disrupt the academic and/or administrative functions of the University. The University reserves the right, in accordance with federal and state law, to approve the time, place and manner of such activities.
F. The opportunity to participate in the formulation of policy directly affecting students through membership on appropriate committees as determined by the President of the University, the student government and other recognized groups within the University.
G. The right to ready access to established University policies and procedures.
H. The right to be free from unreasonable search and seizure.
II. STUDENT RIGHTS IN THE CONDUCT CODE PROCESS

When a student/student organization is charged with an alleged violation of the Code, that student/student organization has the right to:

A. Receive advance notice of the alleged violation(s), who to contact for a meeting, and the date by which that contact must occur.
B. Present his/her or its version of the events in question.
C. Be accompanied by an advisor. Advisors may not speak or participate directly in the conduct process; to include questioning witnesses or making arguments on the charged student’s/student organization’s behalf.
D. Have witnesses present information on his/her or its behalf.
E. Not participate or answer questions in a hearing.
F. Question any statements or witnesses presented.
G. Challenge the objectivity of the hearing body for cause if he/she or it believes that a hearing officer/board member may be biased or have a conflict of interest.
H. Appeal the outcome of the hearing on the following grounds:
   a. The procedures under which the student/student organization is charged are invalid; or if valid, were not followed.
   b. The charged student/student organization did not have an adequate opportunity to prepare and present a defense to the charges.
   c. The evidence presented at the hearing was not sufficiently substantial to justify the decision.
   d. The sanction imposed was not in keeping with the gravity of the violation.

III. STUDENT RESPONSIBILITIES

Members of the UNLV community are strongly encouraged to participate in any conduct proceedings and to appear as witnesses when reasonably notified. This is not intended to limit the right against self-incrimination.

Guests must adhere to all University rules, and the hosting student/student organization is responsible for all guests’ actions. It is the responsibility of the host to inform the guests of these rules. The host can be held financially responsible for the actions of a guest, as well as face Code charges for any guest’s behavior. In the University’s sole and absolute discretion, guests may be prohibited from entering University property.

Responsible Action Protocol – At UNLV, the health, safety and welfare of our students and community are paramount concerns. As such, all UNLV students are expected to alert appropriate officials in the event of any health or safety emergency – specifically including those involving the abuse of alcohol or drugs.

Because the University understands that fear of possible disciplinary actions may act as a barrier to students seeking requests for emergency assistance, the University has adopted the following Responsible Action Protocol to alleviate such concerns and promote responsible action on the part of students.
In a situation involving imminent threat or danger to the health or safety of any individual(s), students are generally expected (1) to contact emergency officials by calling 911 to report the incident, (2) to remain with the individual(s) needing emergency treatment and cooperate with emergency officials, so long as it is safe to do so, and (3) to meet with appropriate University officials after the incident and cooperate with any University investigation.

The University will consider the positive impact of taking responsible action in an emergency situation when determining the appropriate response for alleged conduct violations by the reporting student that may have occurred prior to or contemporaneously with the emergency situation. In some situations, this may mean that no University disciplinary action is taken or no disciplinary sanctions are imposed, but the incident will be documented, and educational, community, and health initiatives – as well as contact with a student’s parent(s) or guardian(s) – may be required.

The protocol does not preclude or prevent action by police or other local authorities. Nor does this protocol preclude disciplinary action regarding other violations of the Code, such as causing or threatening physical harm, sexual misconduct, property damage, harassment, hazing, etc.

Failure of students to take responsible actions in an emergency situation, however, may void all protections under this provision, may constitute an aggravating factor for purposes of sanctioning, and may lead to further disciplinary actions when such failure to act otherwise constitutes a violation of University rules, regulations, or policies.

**PROHIBITED CONDUCT**

The following acts are prohibited and may result in any conduct sanctions listed in Section Three: Student Conduct Code Administration, Article VIII below:

A. Any act or actions, committed by a student within the authority and jurisdiction of the Code that is contrary to federal, state, local law, or University policy/regulation.

B. Any act or conduct that obstructs or hinders the application and enforcement of the Code.

C. Trespassing, forcefully entering and/or occupying University-owned, leased, or controlled premises without authorization.

D. Destroying or vandalizing personal and/or public property; unauthorized, mischievous and/or inappropriate use of such property.

E. Unauthorized use or abuse of a computer system, access code[s], keys, or similar device to access controlled data, UNLV’s property, or a restricted area of any of the University’s campuses. See the Office of Information Technology’s policies at: http://oit.unlv.edu/about-oit/student-computer-use-policy or http://oit.unlv.edu/labs-classrooms/lab-rules. See the UNLV Libraries’ policy at: http://www.library.unlv.edu/services/policies/computeruse.html

F. Theft or unauthorized use of property or services of the University, its members, or its visitors.

G. Providing false information to a University official who is performing his/her official duties or engaging in other similar forms of dishonesty, including making a wrongful accusation against any member of the University community.
H. Failing to comply with reasonable directions of University officials (i.e. faculty, staff, graduate assistants, resident assistants, student employees) or law enforcement officers who have identified themselves as such and are performing their duties; and/or failing to identify one-self to such persons when requested to do so.

I. Falsifying or withholding required information in any form from a University official.

J. Committing academic misconduct; including cheating, plagiarism, and any other form of academic misconduct. See the Student Academic Misconduct Policy at: http://studentconduct.unlv.edu/misconduct/policy.html.

K. Disrupting classroom activity, University functions, and/or the operations of the University by an action or combination of actions that unreasonably interfere with, hinder, obstruct, or prevent the right of others to freely participate in an activity, program, or service of the University.

L. Violating any institutional safety regulation, including, but not limited to:
   a. Falsely reporting a fire, bomb, or any other emergency by any means, including activation of an alarm;
   b. Engaging in the unauthorized possession, use, or alteration or tampering of any University-owned emergency or safety equipment;
   c. Failing to evacuate a building or other structure during an emergency or an emergency drill; and
   d. Taking any action that creates a substantial risk that potentially compromises the safety of an individual or the community.

M. Operating a vehicle, including a motorized cart, in any manner that endangers any person or property.

N. Without prior written authorization from the President or his/her designee, possessing, storing, controlling, or using a functioning or nonfunctioning firearm, firefight, explosive, incendiary device, or other weapon or device classified as a weapon by the State of Nevada, or utilizing any instrument to simulate a weapon in a manner that endangers or tends to endanger, threaten, or intimidate any person. NOTES: “Firearm” is defined as any gun, rifle, pistol, or handgun designed to fire bullets, BBs, pellets, or shots – including paintballs – regardless of the propellant used. “Other weapon” is defined as any instrument of combat or any object not designed as an instrument of combat but carried for the purpose of inflicting or threatening bodily injury. Examples include, but are not limited to: knives with fixed blades or pocketknives with blades longer than four inches, metal knuckles, hatchets, nunchakus, or any explosive or incendiary device.

O. Using, selling, possessing, distributing, or being under the influence of an alcoholic beverage, except as permitted by law and University policy. Members of the University community are accountable for their decisions regarding their use of alcohol, as well as their behavior which occurs as a result of those decisions. See the Alcohol Response Policy and Guidelines for UNLV Students at: http://provost.unlv.edu/downloads/060518_Alcohol_Response_Policy_Student.pdf

P. Using, possessing, distributing, selling, or being under the influence of an illegal drug or narcotic; manufacturing, growing, or synthesizing an illegal drug or narcotic; possessing drug paraphernalia; or setting up or possessing laboratory equipment or materials for the purpose of making or distributing an illegal drug or narcotic. See the Controlled Substance Response Policy at: http://studentconduct.unlv.edu/forms/controlled-substance.html.
Q. Threatening, assaulting, or causing physical harm to oneself or to another. Uttering any words or performing any acts that cause physical injury, or threaten any individual, or interfere with any individual’s rightful actions, including but not limited to the following:
   a. Words or actions that would cause an individual to fear for his or her immediate safety.
   b. The use of physical force against an individual.
   c. Repeatedly contacting another person when the contact is unwanted.

R. Hazing, which is any method of initiation into or affiliation with the University community, a student organization, a sports team, an academic association, or other group engaged in by an individual, whether on or off campus, that intentionally or recklessly endangers another individual, that destroys or removes public or private property, that subjects any person to any mental or physical requirement, request, or obligation that could cause discomfort, pain, fright, disgrace, injury, that is personally degrading or that violates any federal, state, or local law(s), or University policy. Such hazing activities include, but are not limited to, paddling in any form, physical or psychological shocks, late work sessions which interfere with scholastic activities, advocating or promoting illegal alcohol or controlled substance use, tests of endurance, submission of members or prospective members to potentially dangerous or hazardous circumstances or activities which have a reasonably foreseeable potential for resulting in personal injury, or any activity which by its nature may have a potential to cause mental distress, panic, human degradation, or embarrassment. The willingness of an individual to participate in such activity does not make the conduct acceptable or legitimate.

S. Harassment, which is any verbal, visual, electronic, or physical conduct that is sufficiently severe, and/or ongoing that it adversely affects, or has the purpose or logical consequence of interfering with any student’s educational program; or creates an intimidating, hostile, or offensive environment within the University community. Harassment can include, but is not limited to, the above behaviors towards any person because of race, ethnicity, religion, gender, sexual orientation/identity, age, creed, national origin, disability, veteran status, or on any other basis.

T. Sexually harassing any person, male or female, by making one or more unwelcome sex-related comments or sexual overtures, engaging in other similar physical behaviors, or displaying offensive visual materials which interfere with, or are intended to interfere with another person’s work or study. Even one incident, if it is sufficiently serious, may constitute sexual harassment. See the UNLV Sexual Harassment Policy at http://hr.unlv.edu/

U. Engaging in sexual misconduct, including any physical act which is sexual in nature that is committed under pressure, force, threat, intimidation, or without the full and informed consent of all persons involved. For the purposes of this policy, consent must be freely and actively given through mutually understandable terms or actions. A person is deemed incapable of giving consent when that person is a minor, mentally disabled, mentally incapacitated, physically helpless, under the influence of drugs or alcohol to the point of being unable to make a rational decision, unconscious, or asleep. A person always has the right to revoke consent at any time during a sexual act. Failure to say “no” does not imply consent.

V. Abusing the Code system, including but not limited to:
   a. Knowingly filing a false, inaccurate, or misleading statement or accusation against another person;
b. Knowingly providing false, inaccurate, or misleading information to a conduct officer or body;
c. Disrupting or interfering with the orderly business of a conduct proceeding;
d. Failing to attend a meeting required by a conduct officer or body;
e. Discouraging, or attempting to discourage, an individual’s participation in, or access to the student conduct process;
f. Influencing, or attempting to influence, the impartiality of any conduct officer or member of a conduct body prior to, during, and/or after a conduct proceeding;
g. Intimidating or harassing, or attempting to intimidate or harass, any participant of a conduct process prior to, during, and/or after a conduct proceeding;
h. Failing to comply with sanctions imposed under the Code;
i. Violating the terms of a conduct sanction; and
j. Influencing, or attempting to influence, another person to commit an abuse of the conduct system.

W. Misusing, falsely representing, defacing, mutilating, or stealing a University document.
X. Assisting in or inciting others into violating any provision of the Code.
Y. Attempting to violate any provision of the Code.
Z. Possessing or manufacturing any false or altered form of identification, improperly using any identification card, knowingly altering or mutilating a UNLV student identification card, using the identification card of another, or allowing use of one’s own card by another.

AA. Littering and/or inappropriate disposal of refuse, including ejecting any objects from vehicles or from windows in residence halls, balconies, or other University buildings.
BB. Being present during any violation of the Code in such a way as to condone, support, or encourage such violation. Students who anticipate or observe a violation of University policy are expected to remove themselves from participation and are encouraged to report the violation.

IV. STUDENT RECORDS

1. Student records will be maintained in accordance with the Family Educational Rights and Privacy Act (“FERPA”) of 1974 and the U.S. Department of Education’s guidelines for implementation. Academic and conduct records shall be maintained separately.
2. Transcripts of academic records shall contain information concerning academic status, including disqualification for academic reasons, expulsion, suspension and revocation of admission for conduct reasons.
3. With the exception of records relating to expulsion, suspension and revocation of admission, all conduct records shall be destroyed seven (7) years after the date of the incident.
4. Records relating to expulsion, suspension and revocation of admission shall be held permanently.
5. In accordance with UNLV policy and FERPA, UNLV vigorously protects the privacy of student education records. UNLV’s FERPA policy is located in its entirety at fepa.unlv.edu.

V. STUDENT ORGANIZATIONS

Any recognized student group or organization may be charged with violations of this Code.
A. Any University-recognized student group or organization may be held accountable for the actions of any of its members if the violation of the Code is in any way related to the group or organization. Group misconduct need not be officially approved by the entire membership in order to be considered grounds for possible conduct action towards the organization. There is no minimum number of organization members who must be involved in an incident before conduct action may be taken towards the entire organization. In some instances, the conduct of a single member may provide sufficient grounds for action towards the entire organization. An appropriate but not exhaustive inquiry to determine whether an organization may be held accountable for the conduct of individuals is to ask whether it is likely that the individuals would have been involved in the incident if they were not members of the organization or if, by group action, the incident was encouraged, fostered, or might have been prevented.

B. UNLV officials may direct the officers, leaders, or specified individuals of a student organization to take action designed to prevent or end such violations by the organization or by any persons associated with the organization who can reasonably be deemed to be acting on its behalf. Failure to make reasonable efforts to comply with such a directive shall be considered a violation of this Code, by the officers, leaders, specified individuals of the organization, and/or by the organization itself.

C. Sanctions for organizational misconduct may include, but are not limited to: revocation of the use of University facilities or privileges for a definite period of time, denial of University recognition or registration, and suspension of participation in or sponsorship of social or intramural activities or events; as well as other appropriate sanctions permitted under this Code or other codes, standards, and/or governing documents of the University.

SECTION 3: STUDENT CONDUCT CODE ADMINISTRATION

I. AUTHORITY

The President of the University has the responsibility for student conduct and discipline and shall exercise this responsibility through established procedures as prescribed in the Code, which is authorized by Title 2, Chapter 6 of the NSHE Code. The President of UNLV delegates such authority to the Vice President for Student Affairs who, in turn, appoints the Office of Student Conduct to administer the Code.

A. The Office of Student Conduct may be designated by the Vice President for Student Affairs to administer selected conduct issues for specific campus populations who violate published rules for their specific populations (e.g. residence halls). In turn, the Office of Student Conduct may designate specific individuals and offices to administer selected conduct issues within a specific population.

B. The procedures established by any University-based community (i.e., Greek Life, Athletics, Residential Life/Campus Housing) may govern violations of the standards of conduct set forth by that specific community. In cases in which such violations also may have violated the Code, however, the Office of the Vice President for Student Affairs will have concurrent jurisdiction over the matter, which must be referred to the Office of Student Conduct.

C. The Vice President for Student Affairs or his/her designee shall appoint Hearing Officers and special Hearing Panels as required.
D. Consistent with the requirements of the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, both parties to an alleged sexual misconduct offense will be notified of the outcome of any conduct proceedings.

II. FILING A COMPLAINT

Complaints alleging a violation of the Code shall be filed with the Office of Student Conduct. Such complaints must meet the following criteria:

A. The complaint must be submitted in writing or electronically and dated;
B. The complaint must clearly indicate the name of the complainant. If necessary, follow-up documentation may be requested before a complaint is acted upon;
C. To the extent possible, the date, time, place, name of person(s) involved, and the circumstances of the alleged violation should be specified; and
D. The name(s) of any person(s) who may have witnessed the alleged prohibited conduct should be listed.
E. The complaint must be filed no later than thirty (30) college working days after discovery of the incident which is the topic of the complaint. The Office of Student Conduct may waive the thirty-day limitation upon demonstration of good cause.

III. NOTIFICATION AND INFORMATION GATHERING

A. Reports of alleged violations of the Code shall be reviewed by the Office of Student Conduct for possible administrative action. The Office of Student Conduct may appoint a designee to review the incident and assess the information provided.
B. The Office of Student Conduct will notify the student(s)/student organization(s) named in the complaint of the alleged violation(s), who to contact for a meeting, and the date by which that contact must occur. The primary notice shall be sent to the student’s official University issued RebelMail account, which shall serve as official notice. In the event primary notice is not successful, and at the Office of Student Conduct’s discretion, secondary notice may also be sent via US Mail to the student’s official University address, or, when necessary, by hand-delivery.
C. All communications sent by the Office of Student Conduct are considered received when sent, provided:
   a. One (1) additional college working day shall be added to notice sent by UNLV official electronic mail; or
   b. Three (3) additional college working days shall be added to notices sent off-campus by U.S. Mail;
   c. Immediately, when hand-delivered and signed for by the addressee by any person other than the addressee who is over 18 years of age.
D. Such notification will describe the alleged violation and advise the student that an administrative transcript and/or registration hold may be placed on the student’s academic records pending investigation and resolution of the complaint. The notice will include the Office of Student Conduct website address where the Code is posted, as well as electronic addresses where any other relevant University policies and/or procedures are posted.
E. The Office of Student Conduct will gather information relevant to any complaint indicating that a Code violation may have occurred. The Office of Student Conduct or its designee responsible for gathering that information has the authority to contact and meet with any persons believed to have information relevant to the complaint and encourage them to discuss the allegations in the
complaint. In the absence of compelling circumstances, the information gathering process shall be completed within sixty (60) college working days after the receipt of the complaint.

F. During the information gathering process, a “No Contact Order” may be issued if it is determined by the Office of Student Conduct to be in the best interest of the investigation or protection of individuals involved. A “No Contact Order” prohibits a student/student organization from initiating or contributing to any verbal, physical, written, or electronic contact with a specifically identified individual(s), and such individual’s/individuals’ immediate families or physical possessions. A “No Contact Order” may also prohibit a student from entering specific University-owned or controlled properties. Failure to comply with a “No Contact Order” may result in further conduct proceedings and may result in an emergency removal from the University.

G. Based on the information gathered, the Office of Student Conduct will decide whether to dismiss the charge, or make a recommendation to the Vice President for Student Affairs or his/her designee for conduct action.
   a. The Office of Student Conduct may dismiss the complaint at any stage if it finds that the complaint is baseless or otherwise unsupported by the available information, or that the underlying grievance or problem is better resolved in a different manner. If the complaint is dismissed, the Office of Student Conduct will notify the charged student/student organization either verbally at the informal administrative meeting, or in accordance with the conditions set forth in Sections III. B. and C. above.
   b. If the charges (either as presented or modified) are to be forwarded for conduct action, the Office of Student Conduct will notify the charged student/student organization, the complainant, and any witnesses in the manner and conditions set forth in Sections III. B. and C. above; and will clearly outline the appropriate procedures to be followed.

H. If the proposed action against the charged student may lead, in the opinion of the Office of Student Conduct, to suspension or expulsion and the charged student is under the age of eighteen (18) years, the parents or legal guardians of the charged student may be notified of the charges and of the pending hearing at least ten (10) college working days in advance. Notification shall be sent by certified or registered mail, return receipt requested, to the parent’s/parents’ or legal guardian’s/guardians’ last known address.

I. Alternative Conflict Resolution (ACR): If (1) all person(s) personally and directly affected by the conflict agree to resolve the complaint through an alternative conflict resolution process (i.e. mediation, restorative justice), and (2) the Office of Student Conduct believes that the alternative conflict resolution process is an appropriate form of resolution, then the Office of Student Conduct will make arrangements for the alternative conflict resolution to occur. The nature of some complaints, especially those involving violence, may make alternative resolution conflict an unrealistic option.
   a. Alternative conflict resolution is a voluntary process that may or may not result in an agreement. When an agreement is reached by the parties involved, the case is resolved and parties are encouraged to use the Office of Student Conduct as a resource for future questions. Alternative conflict resolution agreements may not be appealed.
   b. If an alternative conflict resolution agreement is not reached or upheld, the charged student has the choice of accepting responsibility or proceeding to a formal hearing.

IV. INFORMAL RESOLUTION

In all cases, charged students and student organizations have the right to a formal hearing. A charged student/student organization, however, may request in writing that the Office of Student Conduct resolve the complaint informally.
A. The Office of Student Conduct may informally resolve the complaint with the consent of the student/student organization charged by:
   a. Reaching consensus with the original complainant and the charged student/student organization;
   b. Permitting the complainant to voluntarily drop the complaint; or
   c. Permitting the student/student organization charged to voluntarily accept conduct sanctions.

B. In all informal resolutions, the Office of Student Conduct will conduct a resolution discussion at which the charged student/student organization may have an advisor present. The charged student/student organization has the right to be assisted by an advisor they choose, at their own expense. The charged student/student organization is responsible for presenting their own information, and therefore, advisors are not permitted to speak or to participate directly in any informal resolution.
   a. All information-gathering shall be completed before the conclusion of the informal resolution process.
   b. The charged student/student organization has the right to request a formal hearing at any time during the informal resolution process. This formal hearing may be based on responsibility or, when responsibility is already accepted, strictly on acceptance of sanctions.
   c. After the information gathering and resolution discussion, the Office of Student Conduct will provide the charged student/student organization with a letter containing a complete accounting of the proposed sanctions within five (5) college working days of the date of the resolution meeting at which the sanctions were outlined. If the sanctions contained in the written report differ from what was presented at the resolution discussion, the Office of Student Conduct must note and explain those differences.
   d. In addition, the letter will inform the charged student/student organization that he/she or it may accept or reject the sanctions. If the charged student/student organization rejects the sanctions in whole or in part, the informal resolution process ends and a formal hearing will be scheduled.
   e. The informal resolution process does not provide for an appeal other than to opt for a formal hearing.
   f. The charged student/student organization has the responsibility to notify the Office of Student Conduct in writing of the student’s/student organization’s choice to accept or reject the sanctions within five (5) college working days of the date the charged student/student organization received the notice of the proposed sanctions. If the charged student/student organization rejects the proposed sanctions, the Office of Student Conduct will notify the charged student/student organization that the informal resolution process has ended and the formal hearing process will begin.

V. FORMAL RESOLUTION

A. Within five (5) college working days of the completion of the initial information gathering process, or the informal resolution process set forth in Article IV above, the Office of Student Conduct shall make a determination on whether to proceed to a formal hearing.

B. Once the Office of Student Conduct determines that the matter should proceed to a formal hearing, any additional investigation by the Office of Student Conduct must be concluded within five (5) college working days, absent compelling circumstances.
C. The Vice President for Student Affairs or his/her designee may determine that the matter should not proceed to a formal hearing. Unless new evidence sufficient in the opinion of the Vice President for Student Affairs or his/her designee to reopen the case is discovered, the conduct procedures shall be closed.

D. Within five (5) college working days after the decision of the Office of Student Conduct, to conduct a formal hearing, the Office of Student Conduct shall notify the charged student/student organization of which of the following type of hearing will be held:
   a. Individual Hearing Officer: A formal hearing held individually with a Hearing Officer who is appointed by the Vice President for Student Affairs or his/her designee. The Hearing Officer’s role is to be an impartial and objective party, aware of and knowledgeable about the Code and hearing procedures.
   b. Hearing Panel: A hearing, administered by the Office of Student Conduct, with members drawn from a pool of faculty, staff, and students who have completed the approved conduct hearing training. The Hearing Panel shall be composed of a chair and at least three (3) additional members, one of whom is a student. The chair shall serve without a vote and preside over the hearing. In the event of an unplanned absence, a representative from the Office of Student Conduct may serve as the non-voting Chair of a Hearing Panel.
   c. Integrity Hearing Boards: A hearing held in accordance with the Alternative Conflict Resolution (ARC) procedures, with members drawn from a pool of students, faculty, and staff who have completed the approved ARC Integrity Hearing Board training.

E. A charged student may petition the Vice President for Student Affairs or his/her designee to request, or the Vice President for Student Affairs or his/her designee may choose, to hold a hearing before a Special Hearing Officer or a Special Hearing Committee. The decision rests with the Vice President for Student Affairs or his/her designee.
   a. Special Hearing Officer: A formal hearing held before a hearing officer, appointed by the Vice President for Student Affairs or his/her designee, who has the professional experience in presiding at conduct proceedings and who holds no contractual relationship with UNLV or any other NSHE institution during the term of the appointment as a Special Hearing Officer.
   b. Special Hearing Committee: A formal hearing committee, administered by a Hearing Officer, appointed by the Vice President for Student Affairs or his/her designee and an elected hearing committee. The composition of the panels and method of election shall be consistent with the NSHE Code, Title 2, Chapter 6.

F. The charged student/student organization may challenge any hearing officer, panel member(s), or committee member(s) for cause, and may challenge a decision by the Vice President for Student Affairs or his/her designee to appoint a Special Hearing officer or Special Hearing Committee in accordance with Article V, Item E above by following the appeal process outlined in Article VII below.

When giving notice for all formal hearing options, these procedures will be followed:

G. The Office of Student Conduct shall provide a notice of hearing to the charged student/student organization at least ten (10) college working days prior to any hearing. That notice of hearing shall include the following information:
   a. Date, time, place of hearing;
   b. Specific violations of the Code that the student/student organization is charged with;
   c. Name of complainant or University department submitting complaint;
d. Specification, to the extent possible, of the time, place, person(s) involved, circumstances of alleged prohibited conduct, and name(s) of possible witness(es);

e. Notification that an advisor selected by the charged student/student organization may accompany the charged student/student organization to the hearing but will not be permitted to present information on the student/student organization’s behalf;

f. A statement of the applicable type of conduct hearing; and

g. Such other information as the Office of Student Conduct may wish to include.

H. Notices shall be delivered to the student/student organization charged the manner and according to the timelines set forth in Section 3, Article III, B. and C. above.

I. If the charged student/student organization intends to have an advisor or other representative present, he/she or it must notify the Office of Student Conduct at least five (5) college working days in advance of the hearing and specify the name and address of the advisor, and whether the advisor is an attorney. If, at any time during the proceeding, the student desires to obtain a representative or change their representative, the student may invoke such right. Under such circumstances, the proceeding may be stayed for a period of no fewer than five (5) and no more than fifteen (15) college working days as determined by the Office of Student Conduct. The student may invoke the right to obtain or change his/her representative only once in any conduct proceeding, unless the Office of Student Conduct agrees to any additional requests for such changes.

J. The Office of Student Conduct is responsible for providing a written summary and verbal presentation of the charges, including all relevant information that resulted from the investigation process, to the hearing officer or panel or committee members and the charged student/student organization. This role is assumed by the Office of Student Conduct in all formal hearings, whether the original complainant is present or not. The summary of charges and supporting information will provide the basis of the formal hearing proceedings.

K. Upon request, the student/student organization charged, the advisor, if any, and the Office of Student Conduct have the right to examine any supporting documentation to be presented at the hearing, at least five (5) college working days prior to the hearing during regular business hours. Thus, all documentation for the hearing file must be submitted by the complainant(s), charged student/student organization, witnesses, and the Office of Student Conduct by this deadline.

L. All hearings are closed unless the charged student/student organization requests an open hearing. The Vice President for Student Affairs or his/her designee must approve the opening of said hearing.

M. All formal hearings conducted by a Hearing Panel, Special Hearing Committee, or Integrity Hearing Board require a majority to find a student/student organization responsible for violating the Code.

N. All determinations by a hearing officer, hearing panel or committee, or integrity hearing board shall be made on the basis of whether it is more likely than not that the charged student/student organization violated the Code.

O. The complainant and the charged student/student organization have the right to be assisted by any advisor they choose, at their own expense. However, the complainant and charged student/student organization are responsible for presenting their own information, and therefore, advisors are not permitted to speak or to participate directly in any formal hearing without the expressed permission of the Hearing Panel Chair or Individual Hearing Officer.

P. The complainant, the charged student/student organization, and hearing officer, panel, committee, or board are the only individuals in a hearing who have the right to present information and question witnesses.

Q. The charged student/student organization has the right to appear at a hearing to hear the evidence, offer explanatory and clarifying information and evidence, and question any witnesses. The charged student/student organization may choose not to attend the hearing. If a charged student/student organization
organization, with notice, does not appear for a formal hearing, the information in support of the charges shall still be presented and considered. In such cases, failure to respond or appear will not create a presumption of either responsibility or non-responsibility.

R. All findings of fact, recommendations, and decisions must be based solely on the information made available for use at the hearing. This includes, but is not limited to, all information made available to the charged student/student organization as part of the conduct hearing file.

S. Minor technical departures or errors in the procedures established by the Code or applicable rulings will not necessarily be grounds to withhold conduct action. The Vice President for Student Affairs or his/her designee shall determine whether such errors were substantial and egregious enough to prevent a fair hearing.

T. A single hearing may be held for more than one person/student organization charged in cases arising out of a single or multiple occurrences. The Office of Student Conduct makes such determinations, subject to review by the Vice President for Student Affairs or his/her designee. Each charged student/student organization, however, retains the right to request that his/her or its case be heard individually.

U. A recording will be made of the hearing for the purpose of review by an appeal panel. The recording shall be the property of UNLV and will be maintained as such for a period of two (2) calendar years after the hearing. However, it shall be maintained for a longer period if the matter is subject to a litigation hold and/or pending in a court of law. Upon the written request of the charged student/student organization, a copy of the recording shall be made available to the student/student organization at his/her or its expense, by the Office of Student Conduct, within fifteen (15) college working days of the request. Confidentiality of recordings from closed hearings shall be maintained by all parties and their representatives.

V. Findings of fact and recommended sanction(s), if any, shall be made in writing by the Hearing Officer or Hearing Panel/Committee/Board Chair to the Vice President for Student Affairs or his/her designee within five (5) college working days after the close of the hearing.

W. The Vice President for Student Affairs or his/her designee shall review the findings of fact and recommended sanctions reported by the Hearing Officer or Hearing Panel/Committee Chair, and may:
   a. Dismiss the charge or charges, in any combination;
   b. Affirm the recommended sanctions;
   c. Impose a greater or lesser sanction than recommended; or
   d. Order a new hearing.

X. The Vice President for Student Affairs or his/her designee shall submit a written decision within five (5) college working days after receipt of the findings and recommended sanctions. Also within five (5) college working days, the Vice President for Student Affairs or his/her designee shall provide notice and copies of the decision to the charged student/student organization and to the Office of Student Conduct. The notice shall also contain a notice of appeal rights and procedures and shall be in accordance with delivery methods and conditions as described in Sections 3, Article III., B. and C. above. An additional five (5) college working days will be added in cases of suspension or expulsion. When a student under the age of eighteen years is suspended or expelled, the student’s parent(s) or legal guardian(s) shall be notified by certified mail, return receipt requested, sent to the parent’s/parents’ or legal guardian’s/guardians’ last known address.

Y. If the charged student/student organization does not appeal the decision of the Vice President for Student Affairs or his/her designee within the time specified in Article VI below, such decision shall be final.
VI. APPEAL RIGHTS

A. A charged student/student organization found responsible for a violation of the Code has the right to appeal that decision and any sanctions imposed to the Vice President for Student Affairs or his/her designee. A request for appeal must be filed within five (5) college working days from the charged student’s/student organization’s receipt of findings.

B. The right of appeal is the right to seek review of a formal hearing decision or other action by an impartial panel granted higher University authority; it is not a right to a new hearing.

C. To prepare the appeal request, the charged student/student organization and the advisor have the right to review the student’s/student organization’s conduct file, including any recording of the hearing.

D. Any sanction imposed as a result of a hearing shall not become effective during the five (5) college working days during which an appeal may be filed, or until any such appeal has been decided, except that the Vice President for Student Affairs or his/her designee has the authority, in his/her absolute discretion that extenuating circumstances exist, to immediately impose the sanction.

VII. APPEAL PROCEDURE

A. The Vice-President for Student Affairs or his/her designee shall appoint an appeal panel which shall hear all appeals from formal hearings and from decisions pursuant to Section 3, Article V., E. and Article VI., D.

B. The appeal panel shall consist of three (3) members, and shall include at least one (1) faculty or professional staff person, and one (1) student.
   a. Members of the appeal panel shall be drawn from a pool of faculty, professional staff, and students who have completed the approved conduct hearing training.
   b. Members of the appeal panel shall not have served in the original formal hearing, and shall elect their own chair.

C. Time for Appeal:
   a. All appeals shall be filed by the student/student organization within five (5) college working days from receipt of the written decision.
   b. The Vice President for Student Affairs or his/her designee shall direct the appeal to the appeal panel within five (5) college working days of receipt of the appeal.

D. Procedures for appeals from formal hearing decisions:
   a. All appeals shall be submitted electronically or in writing and filed with the Office of Student Conduct.
   b. The student/student organization who is appealing must include the following in the letter of appeal:
      i. The specific grounds for the appeal (See Sections E.1. through 4. below);
      ii. Supporting arguments and documentation; and
      iii. All other relevant information the student/student organization wishes to include for consideration.
   c. The appeal panel may request a personal appearance of the student/student organization charged for the sole purpose of addressing issues raised by the appeal. The student/student organization is not required to appear, and the fact that a student/student organization does not appear upon request will not prejudice the appeal.

E. Grounds for appeals from formal hearing decisions:
a. An appeal from a decision following a formal hearing and/or the sanctions imposed must be based on at least one (1) of the following:
   i. That the procedures under which the student/student organization was charged are invalid, or if valid, were not followed;
   ii. That the student/student organization charged did not have an adequate opportunity to prepare and present a defense to the charge(s);
   iii. That the information presented at the hearing was not sufficiently substantial to justify the decision; or
   iv. That the sanction imposed was not in keeping with the gravity of the violation.

F. Student/Student Organization Appeal Record
   a. In considering the appeal, the Appeal Panel will conduct a review of the existing record of the case, which will include, but is not limited to:
      i. The original statement sent to the student/student organization as written notice of the charges;
      ii. The written decision of the formal hearing officer or body;
      iii. The recording of the formal hearing; and
      iv. The letter of appeal.

G. Appeal Result
   a. The Appeal Panel shall recommend whether to:
      i. Affirm the charge;
      ii. Impose greater or lesser sanctions; or
      iii. Order a new hearing.
   b. The Appeal Panel’s decision shall constitute a recommendation to the Vice President for Student Affairs or his/her designee and must be made within five (5) college working days following the Appeal Panel’s receipt of the appeal from the Vice President for Student Affairs or his/her designee.
   c. In all cases, except those that recommend suspension or expulsion, the Vice President for Student Affairs or his/her designee shall have the final authority. In cases resulting in suspension, the Vice President for Student Affairs shall have final authority. In cases resulting in expulsion, the Appeal Panel’s decision shall constitute a recommendation to the President, who shall have the final authority.

H. The Vice President for Student Affairs or his/her designee shall send copies of the Appeal Panel recommendation, as well as copies of his/her decision, within five (5) college working days of receipt of the decision, to:
   a. The student/student organization charged;
   b. The Hearing Officer or Chair of the Hearing Panel or Committee; and
   c. The Office of Student Conduct.

I. New Hearing
   a. When the appeal results in a new hearing for the student/student organization charged, a new hearing officer or body not involved in the initial hearing will conduct the new hearing. The charged student/student organization retains the right to appeal a new hearing decision as if it were an original hearing.

VIII. SANCTIONS

Depending upon the severity of the violation, and whether a repeat or multiple violations are involved, sanctions may be imposed by the Hearing Coordinator, Hearing Panel or Committee, Office of Student
Conduct, the Vice President for Student Affairs or his/her designee, or the President of the University in any order or combination.

In addition to the disciplinary, educational, community, and health initiative sanctions identified below, and in the University’s sole discretion, a student/student organization may be required to perform specific restitution service, to complete counseling or other specialized treatment or support services, and/or be required to participate in an activity or program whose purpose is to redirect behavior.

Any violation of the Code that is motivated by race, ethnicity, religion, gender, sexual orientation, age, creed, national origin, disability, or veteran status may subject the student/student organization to the imposition of a sanction more severe than would be imposed in the absence of such motivation.

A sanction may have an accompanying administrative fee, in which case the student will be notified at the time the sanction is assigned. Payment of an administrative fee will be considered part of the successful completion of the sanction.

Failure to comply with any such sanction or requirements will constitute an additional violation of the Code, and may result in additional and increased sanctions in accordance with the procedures set forth in this Code.

SANCTIONS:

A. WARNING. Notice, oral or written, that continued or repeated violations of UNLV policies and/or regulations may be cause for further conduct action. These actions would normally be in the form of censure, loss of privileges, exclusion from activities, probation, suspension, or expulsion.

B. RESTRICTIONS, LOSS OF PRIVILEGES, AND EXCLUSION FROM ACTIVITIES. Exclusion/restriction from participation in privileges, extracurricular activities, holding office, or represent the University. Removal from a University-living environment, loss of use privileges for designated University facilities, denial of the use of a vehicle on campus, and/or other restrictions consistent with the violation committed.

C. RESTITUTION PAYMENT OR SERVICE. The requirement to provide restoration/restitution for a loss due to violations including, but not limited to: defacement, damage, fraud, theft, and/or misappropriation of property. Restitution may be imposed either exclusively or in combination with other sanctions. Restitution may take the form of monetary payment or appropriate services to repair or otherwise compensate for damages.

D. CONDUCT PROBATION. The terms of probation will be determined at the time the probation is imposed. Probation may include exclusion from participation in privileges or extracurricular activities. The student/student organization placed on probation shall be notified in writing that the commission of prohibited acts will lead to additional and/or increased conduct sanctions.

E. DEFERRED SUSPENSION. If a student/student organization is found in any further violation(s) of the Code for the duration of a deferred suspension period, a recommendation for conduct suspension takes effect immediately. Additional Code sanctions appropriate to the new violation also may be taken. A student/student organization that has been issued a sanction of Deferred Suspension is deemed “not in good standing” involving conduct with the University.

F. DISCIPLINARY CONDUCT SUSPENSION. This is the temporary separation of the student from the University for a specified period of time and/or until specific conditions, if imposed, have been met. A disciplinary suspended student shall not participate in any University-sponsored activity and shall be barred from all University campuses and properties. The student will be notified in
writing of the suspension. The official transcript of the student shall be marked “Conduct Suspension Effective (date) to (date).” The parent(s) or legal guardian(s) of students under the age of eighteen (18) years shall be notified of the action. After the suspension period has elapsed, the student will be placed on conduct probation for a period of time that is equal to the amount of time that the student was suspended. At the end of the probationary period, the student will be classified as being in “good standing” provided that no further Code violations have occurred.

G. EXPULSION OR TERMINATION. Permanent separation of the student from the University. The expelled student shall not participate in any University-sponsored activity and shall be barred from all NSHE campuses and properties. The official transcript of the student shall be marked “Conduct Suspension Effective (date).” The parent(s) or legal guardian(s) of a student under the age of eighteen (18) years shall be notified of the action.

H. PARENT/GUARDIAN NOTIFICATION OF DRUG AND ALCOHOL-RELATED VIOLATIONS. UNLV may notify the parent(s) or legal guardian(s) of any student under 21 years of age who is found responsible for violating the Alcohol and/or Controlled Substance policy.

I. REQUIRED EDUCATIONAL/RESTITUTION ACTIVITIES. Mandatory participation in educational activities or programs of community restitution service on campus or in the community, as approved.

J. ADMINISTRATIVE CONDUCT HOLD. A status documented in the Registrar’s official file that precludes the student from registering for classes and/or accessing official transcripts until clearance from the Office of Student Conduct or the Vice President for Student Affairs or his/her designee.

K. PROOF OF PAYMENT/RESOLUTION OF UNLV CITATIONS. A student/student organization may need to provide proof that a citation for parking and/or other issues have been resolved.

L. INTAKE/ASSESSMENT/TREATMENT REFERRALS. A student may be referred to UNLV Student Counseling and Psychological Services (CAPS) or a community mental health provider to complete an intake and assessment involving alcohol, controlled substance, or other identified issues arising from a violation. In the University’s discretion, proof of participation or completion of treatment may be required. When appropriate, a student may be referred to an off-campus provider for such services at the student’s expense.

M. REFLECTION LETTER OF UNDERSTANDING. A student/student organization will reflect on what has been learned from the experience. The length and structure of such letter will be specifically assigned to the student/student organization by the Office of Student Conduct.

N. ALCOHOL/CONTROLLED SUBSTANCE EDUCATION RESPONSES. A student/student organization will complete an on-line alcohol and/or controlled substance tutorial, attend an Alcohol Awareness Intervention Workshop, or attend an identified off-campus education/intervention resource.

O. ACADEMIC MISCONDUCT. Potential sanctions for academic misconduct include, but are not limited to, the following, either singularly or in any combination:
   a. Academic Sanctions
      i. Resubmitting an assignment
      ii. Reduction of points/letter grade for the assignment
      iii. Dropping a class
      iv. Reduction of points/letter grade for class
      v. Failing grade for assignment
      vi. Failing grade for class
   b. Conduct Sanctions
      i. Reflection Letter of Understanding
ii. Skill Remediation
iii. Academic Integrity Seminar
iv. Conduct Warning or Probation
v. Loss of Privileges
vi. Transcript notation
vii. Suspension or removal from program, school, or college
viii. Suspension from the University
ix. Expulsion
x. Withdrawal of credit for previously accepted course or requirement
xi. Revocation of a degree or certificate
xii. Referral to the appropriate legal authorities
Student Academic Misconduct Policy

STATEMENT OF PURPOSE

UNLV is first and foremost an academic community, with its fundamental purpose the pursuit of learning and student development, and enabling all to reach their highest potential.

UNLV asserts that any instance of academic misconduct hurts the entire community, and that the values of honesty, trust, respect, fairness, responsibility and professionalism are paramount.

UNLV will uphold these standards through fair and objective procedures governing instances of alleged student academic misconduct.

ENTITITES AFFECTED BY THIS POLICY

All academic units, libraries, and/or units with teaching and research faculty

POLICY

I. EXPECTATIONS: Integrity is a concern for every member of the campus community; all share in upholding the fundamental values of honesty, trust, respect, fairness, responsibility and professionalism. By choosing to join the UNLV community, students accept the Student Academic Misconduct Policy and are expected to always engage in ethical decision-making. Students enrolling in UNLV assume the obligation to conduct themselves in a manner compatible with UNLV’s function as an educational institution.

a. Honesty: Honesty is the foundation of teaching, learning, research and service; and the prerequisite for full realization of trust, fairness, respect and responsibility. Students and faculty alike must be honest with themselves and others.

b. Trust: The UNLV community fosters a climate of mutual trust and encourages the free exchange of ideas. Only with trust can the public believe in the social value and meaning of an institution’s scholarship and degrees.

c. Fairness: We strive to establish clear standards, practices, and procedures and expect fairness in the interactions of students, faculty and administrators. Important components of fairness are predictability, clear expectations, a predictable and transparent process, as well as consistent and just responses.

d. Respect: As an academic community of integrity, we recognize the participatory nature of the learning process and honor and respect a wide range of opinions and ideas. Students and faculty must respect themselves and each other as individuals. All must show respect for the contribution of others by acknowledging their intellectual debts.
e. **Responsibility:** Every member of an academic community – each student, faculty member and administrator – is responsible for upholding the integrity of scholarship and research. Individuals must take responsibility for their own academic honesty and must not tolerate or ignore academic dishonesty on the part of others.

f. **Professionalism:** Because students are aspiring professionals, our community expects them to exercise professional conduct during their career as students and uphold the core value of integrity.

II. **ACADEMIC MISCONDUCT VIOLATIONS – DEFINITIONS:** Academic Misconduct is any intentional or unintentional occurrence of the following:

a. Using the words or ideas of another, from the Internet or any source, without proper citation of the source(s), commonly called plagiarism.

b. Receiving unauthorized external assistance during an examination or any academic exercise for credit. This includes, but is not limited to:
   i. Providing or receiving aid in connection with any academic assignment;
   ii. Use or possession of camera telephones, text messages, computer disks, audio recorders, calculators, solution materials, photocopies, materials from previous classes, commercial research services, notes or other means to copy or photograph materials used or intended for academic evaluation for use during the academic evaluation or assignment;
   iii. Communication in any manner with another student;
   iv. Working with others on graded coursework, including in-class, on-line and take-home examinations; or
   v. Possessing, reading, buying, selling or using any materials intended for an academic evaluation or assignment in advance of its administration.

c. Turning in the same work in more than one class (or when repeating a class), unless permission is received in advance from the instructor.

d. Falsifying information for inclusion in an assigned paper, project or exercise; including inventing or altering data from a laboratory or field project, or creating fictional citations for a paper.

e. Attempting to influence or change any academic evaluation, assignment or academic records for reasons having no relevance to academic achievement. This includes, but is not limited to, bribery, threats and making unauthorized changes to any academic record.

f. Falsifying or misrepresenting attendance, hours, or activities in relationship to any class, internship, externship, field experience, clinical activity or similar activity.

g. Acting or attempting to act as a substitute for another, or using or attempting to use a substitute, in any academic evaluation or assignment.

h. Facilitating, permitting or tolerating any of the above-listed items.

III. **PROCEDURES FOR HANDLING STUDENT ACADEMIC MISCONDUCT:** These procedures are designed to encourage a fair and appropriate response to allegations of student academic misconduct. They may be modified in individual cases, so long as the student agrees in writing to the proposed modifications, is provided an opportunity to respond to allegations of academic misconduct within a reasonable time after the allegations have been made, and the modifications do not violate fair process.

a. Anyone with a good faith basis for believing a student has violated this policy may report the alleged violation to the responsible instructor, chair/director, dean or appropriate designee within the academic unit. The person who pursues the allegation may be the responsible instructor or a designee appointed by the supervisor of the academic unit in which the
course is located. It is expected that appropriate review and consultation with a supervisor or chair or dean is part of this process.

b. A faculty member or primary course instructor who suspects that a student has committed an act of academic misconduct:
   i. Shall notify the student of the nature of the allegation and offer the student an opportunity for an initial meeting to discuss the allegation and to present any relevant information. When possible, this initial meeting shall occur within five (5) college working days of discovery of the alleged violation. or
   ii. Shall notify the student of the nature of the allegation and schedule an initial meeting with the student within five (5) college working days of discovery of the alleged violation. The message shall contain the following:
      1. “This message concerns the___________________________(paper, report, assignment, etc.) that you submitted in partial fulfillment of the course requirement in your___________________________(course number and section) class on___________________________(date). My initial examination of that (paper, report, assignment) reveals that you may have violated the UNLV Student Academic Misconduct Policy. I request that you meet with me on___________________________(date of initial meeting) at___________________________(time) in___________________________(location).” (parenthetical material deleted)

c. Proceedings in case discussions are informal and non-adversarial. The responsible instructor/designee may make a verbal agreement on, or provide the student with a written or electronic notice of, a scheduled meeting. The responsible instructor/designee may request a witness to be present for this meeting. In compelling circumstances, this initial meeting may also be referred to the appropriate Office of Student Conduct (OSC) officer or designee. This option shall occur only after consultation with OSC.

d. The purpose of this initial meeting will be to review and discuss the charges before a decision is reached. The responsible instructor/designee may use documentary evidence, provided the student is allowed to respond to it at the meeting. At the sole discretion of the responsible instructor/designee, a student may bring relevant witnesses and/or an advisor. Neither the responsible instructor/designee nor the student may have legal counsel as their advisor at an initial meeting. An advisor is not permitted to participate directly or speak for the student, but only may be present during initial meetings or any subsequent university hearings.

e. At this initial meeting, the following results may occur:
   i. The allegations are dismissed.
   ii. The student accepts responsibility for the violation and accepts the academic sanction(s).
   iii. The responsible instructor/designee believes a violation occurred with the student not admitting responsibility and requesting a hearing.
   iv. The student accepts responsibility for the violation but does not accept the academic sanction(s) and requests a hearing.

f. In any of the above circumstances, the “UNLV Alleged Academic Misconduct Report” form shall be completed with a signed copy being provided to the student. Authority and jurisdiction for actual determination of academic misconduct and appropriate academic sanctions are with the primary instructor of the class and/or assignment or the approved departmental process in accordance with the academic unit chair’s/director’s/supervisor’s/dean’s approval. If the responsible instructor/designee facilitating the initial meeting is not
the primary instructor, appropriate communication regarding such sanctions is necessary before signing the UNLV Alleged Academic Misconduct Report form.

g. Upon completion of this initial meeting/approved departmental process, if the responsible instructor/designee believes academic misconduct has occurred at any level, he or she shall notify the Office of Student Conduct (OSC) for resolution of a UNLV Student Conduct Code violation. Notification to OSC shall include a copy of the signed UNLV Alleged Academic Misconduct Report form and copies of any relevant documentation used in determining the violation. The responsible instructor/designee shall forward the Alleged Academic Misconduct Report and copies of relevant documentation within ten (10) college working days of discovery and/or the initial meeting with the student.

h. OSC will notify the charged student per notification procedures specified in the UNLV Student Conduct Code, which can be found at http://studentconduct.unlv.edu. The student will be informed of his or her applicable rights and the process(es) for accepting the academic and conduct sanctions and/or appealing the academic decision and sanctions.

i. If the student does not attend the initial meeting, the instructor shall forward the charge to the Office of Student Conduct.

IV. HEARING AND APPEAL PROCEDURES FOR ACADEMIC MISCONDUCT

a. In any case where a student requests a hearing beyond the initial meeting, it shall occur in the following order:

i. If the student wishes to appeal the findings of the responsible instructor or department chair/director/designee/committee, he/she must file the appeal of the decision and any sanctions to the UNLV Academic Integrity Appeal Board. This appeal must be filed within five (5) college working days of the student’s initial meeting with the Office of Student Conduct. The Academic Integrity Appeal Board will meet and all parties will be notified within fifteen (15) college working days of the outcome of the appeal; sending their decision to the student, instructor, department/unit and Office of Student Conduct. The decision of the Academic Integrity Appeal Board will serve as the final place of appeal.

ii. The UNLV Academic Integrity Appeal Board shall have the option of inviting the student and responsible instructor or department designee, and allow for witnesses of each party. If the Academic Integrity Appeal Board invites either party of the allegation to the hearing, both parties shall be invited.

iii. When a student is appealing the academic sanctions given as a result of an allegation of academic misconduct, and when such sanctions are provided in departmental publications and/or in the responsible instructor’s class syllabus, close consideration of materials will be given based on the clarity of the publication.

iv. In cases involving suspension, the Academic Integrity Appeal Board’s decision shall constitute a recommendation to the Vice President of Student Affairs (VPSA), who shall have final authority. In case involving expulsion, the Academic Integrity Appeal Board’s decision shall constitute a recommendation to the President, who shall have final authority.

b. A student alleged to have committed academic misconduct is not permitted to withdraw from the class in question unless the matter is resolved in the student’s favor, without the responsible instructor’s expressed permission, and may not be permitted to do so if withdrawing from the class would negate the academic sanction.

V. CONFIDENTIALITY OF RECORDS

a. All records in relation to a student misconduct case will be maintained in accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974 and the U.S. Department
of Education guidelines for implementation. Transcripts of academic records shall contain information about academic status, including disqualification for academic or conduct reasons, and expulsion, suspension and revocation of admission for disciplinary reasons. In accordance with UNLV policy and the U.S. Family Education Rights and Privacy Act of 1974 (FERPA), UNLV vigorously protects the privacy of student education records. UNLV’s FERPA policy is located in its entirety at ferpa.unlv.edu

VI. SANCTIONS FOR ACADEMIC MISCONDUCT  
a. Potential sanctions for academic misconduct may include, but are not limited to, any one of the sanctions listed below singularly or in combination with each other:
   i. Academic Sanctions
      1. Resubmitting an assignment
      2. Reduction of points/letter grade for the assignment
      3. Dropping a class
      4. Reduction of points/letter grade for class
      5. Failing grade for assignment
      6. Failing grade for class
      NOTE: Each of the above may be agreed upon at the initial meeting.
   ii. Conduct Sanctions
      1. Reflection Letter of Understanding
      2. Skill Remediation
      3. Academic Integrity Seminar
      4. Conduct Warning or Probation
      5. Loss of Privileges*
      6. Transcript notation (approved by Dean/Academic Unit Equivalent)
      7. Suspension or Removal from program, school or college (approved by Dean/Academic Unit Equivalent)
      8. Suspension
      9. Expulsion
      10. Withdrawal of credit for previously accepted course or requirement
      11. Revocation of a degree or certificate
      12. Referral to the appropriate legal authorities
      13. *In instances where it is determined that the academic misconduct is of both an intentional and egregious nature, and the resulting academic sanction is a failing grade in the course, the student may lose the privilege of evaluating a course instructor.

VII. GENERAL POINTS  
a. All time limits specified in this policy should be extended for good cause.
b. This policy is not intended to address differences of opinion over grades issued by an instructor exercising good faith and professional judgment regarding a student’s work.
c. Before any action is taken under this policy that may result in the withdrawal, suspension or expulsion of an international student; both the student and the academic program are advised to consult with the UNLV Office of International Students and Scholars.

VIII. ACADEMIC INTEGRITY APPEAL BOARD  
a. The Academic Integrity Appeal Board members will come from a variety of areas on campus and will serve a two-year term, with the exception of the members from the UNLV Faculty Senate Academic Standards Committee. To create the overall campus-wide pool of Academic Integrity Appeal Board members:
   i. The faculty of each College/School shall designate:
1. Two (2) faculty members
   ii. Each Dean’s Office/Academic Unit Equivalent shall designate:
       1. Two (2) administrative faculty
       2. Two (2) undergraduate students
       3. Two (2) graduate students
   iii. In addition, the following will be members of the pool:
       1. All members of the UNLV Faculty Senate Academic Standards Committee, during their term on the Committee (see VIII.B. below)

b. When an appeal of an academic misconduct case is forwarded to the Academic Integrity Appeal Board, the hearing panel for each case will consist of the following, drawn from the pool:
   i. One (1) academic faculty member
   ii. One (1) student
   iii. One (1) administrative faculty or Academic Standards Committee Member

c. Any member of the Academic Integrity Appeal Board pool may serve on a hearing panel unless there are compelling academic discipline issues to be addressed at such hearing. In such cases, specifically designated pool members may be assigned from the college/school in which the alleged academic misconduct occurred. All efforts to eliminate or avoid conflict of interest and bias will be given in each case.

d. Before serving on an Academic Integrity Appeal Board hearing, members shall receive an orientation and training on academic integrity and misconduct.

e. Recruitment, training and facilitation of the Academic Integrity Appeal Board will be the responsibility of the Office of Student Conduct, in collaboration with the UNLV Faculty Senate; and with appropriate authority and jurisdiction being afforded to university designees as dictated in the NSHE and UNLV Student Conduct Codes.

IX. TRANSCRIPT NOTATION FOR ACADEMIC MISCONDUCT

a. In instances where it is determined that the academic misconduct is of both an intentional and egregious nature, the conduct sanction shall be recorded on the student’s official and unofficial transcript with a transcript notation. The transcript of the student shall be marked “Disciplinary Notation due to Academic Dishonesty in (class) during (semester).” The transcript notation shall occur only upon completion of the student conduct proceedings. The conduct sanction notation shall not affect the grade point average, course repeatability or determination of academic standing. This conduct sanction notation is intended to denote a failure to accept and exhibit the fundamental value of academic honesty.

b. Once a conduct sanction notation is made, the student may file a written petition to the Academic Integrity Appeal Board to have the notation removed. The decision to remove the conduct sanction notation shall rest in the discretion and judgment of a majority of a quorum of the Board; provided that:
   i. At the time the petition is received, at least 180 calendar days shall have elapsed since the conduct sanction notation was recorded; and,
   ii. At the time the petition is received, the student shall have successfully completed the designated non-credit Academic Integrity Seminar, as administered by the Office of Student Conduct; or, for the person no longer enrolled at the University, an equivalent activity as determined by the Office of Student Conduct; and,
   iii. The Office of Student Conduct certifies that to the best of its knowledge the student has not been found responsible for any other act of academic misconduct or similar disciplinary offense at the University of Nevada, Las Vegas or another institution.
c. Prior to deciding a petition, the Academic Integrity Appeal Board will review the record of the case and consult with the Office of Student Conduct and responsible instructor or appropriate chair/director/supervisor. The decision of the Appeal Board shall not be subject to subsequent Appeal Board reconsideration for at least 180 calendar days, unless the Appeal Board specifies an earlier date on which the petition may be reconsidered. Subsequent Appeal Board determinations pertaining to the removal of the conduct sanction notation may be appealed to the Vice President for Student Life. If the Vice President removes the conduct sanction notation from the student’s transcript, the Vice President shall provide a written rationale to the Appeal Board.

d. No student with a student conduct notation on the student’s transcript shall be permitted to represent the University in any extracurricular activity, or run for or hold an executive office in any student organization which is allowed to use University facilities, or which receives University funds.

RELATED DOCUMENTS

University, College/School, and Department/Unit Bylaws; Board of Regents’ Handbook; Nevada Administrative Code; and Nevada Revised Statutes, UNLV Student Conduct Code.

CONTACTS

Office of the Vice Present for Student Affairs
Flora Dungan Humanities Building • FDH-514
http://studentaffairs.unlv.edu

Office of Student Conduct
Central Desert Complex, Bldg. #1
http://studentconduct.unlv.edu/
APPENDIX F
UNLV Sexual Harassment Policy

Introduction
This Policy is divided into three parts. Section A states the NSHE policy against discrimination. Section B states the NSHE policy against sexual harassment. Section C contains the complaint and investigation procedure for discrimination and sexual harassment complaints. These procedures are in addition to disciplinary complaints brought against professional employees or students under Title 2, Chapter 6 of the NSHE Code (or if applicable, institution student codes of conduct), or against classified employees under the Nevada Administrative Code. However, information gathered as part of the complaint process under this section may be used in connection with disciplinary proceedings.

Title IX Notice of Non-Discrimination
NSHE and its member institutions do not discriminate on the basis of sex in their education programs and activities; Title IX of the Education Amendments Act of 1972 is a federal law that states: "No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance."

The Chancellor and each President shall designate an administrator to serve as the Title IX Coordinator, whose duties shall include overseeing all Title IX complaints and identifying and addressing any patterns or systemic problems that arise during the review of such complaints.

Inquiries concerning the application of Title IX may be referred to each member institution's Title IX Coordinator or the Office of Civil Rights of the United States Department of Education. Each member institution shall include on its website and in its general catalog, its Title IX Coordinator's name, office address, telephone number, and email address.

Member institutions shall notify all students and employees of the name or title and contact information of its Title IX Coordinator.

1. NSHE Non-Discrimination Policy
   a. Policy Applicability and Sanctions
      The Nevada System of Higher Education (NSHE) is committed to providing a place of work and learning free of discrimination on the basis of a person's age, disability, whether actual or perceived by others (including service-connected disabilities), gender (including pregnancy related condition), military status or military obligations, sexual orientation, gender identity or expression, genetic information, national origin, race, or religion. Where discrimination is found to have occurred, the NSHE will act to stop the discrimination, to prevent its recurrence, to remedy its effects, and to discipline those responsible.

No employee or student, either in the workplace or in the academic environment, should be subject to discrimination.

It is expected that students, faculty and staff will treat one another and campus visitors with respect.
All students, faculty, staff, and other members of the campus community are subject to this policy. Students, faculty, or staff who violate this policy are subject to discipline up to and including termination and/or expulsion, in accordance with the NSHE Code (or in the case of students, any applicable student code of conduct) or, in the case of classified employees, the Nevada Administrative Code. Other lesser sanctions may be imposed, depending on the circumstances. Complaints may also be filed against visitors, consultants, independent contractors, service providers and outside vendors whose conduct violates this policy, with a possible sanction of limiting access to institution facilities and other measures to protect the campus community.

b. Training
All employees shall be given a copy of this policy and each institution's Human Resources Office shall maintain documentation that each employee received the policy. New employees shall be given a copy of this policy at the time of hire and each institution's Human Resources Office shall maintain documentation that each new employee received the policy.

- Each institution shall provide this policy to its students at least annually and may do so electronically.
- Each institution shall include this policy and complaint procedure on its website and in its general catalog.
- Each institution shall have an on-going non-discrimination training program and shall designate a person or office to be responsible for such training.

c. Discriminatory Practices
It is illegal to discriminate in any aspect of employment or education, such as:

- Hiring and firing;
- Compensation, assignment, or classification of employees;
- Transfer, promotion, layoff, or recall;
- Job advertisements;
- Recruitment;
- Testing;
- Grading;
- Acceptance or participation in an academic program or school activity;
- Use of employer’s facilities;
- Training programs;
- Fringe benefits;
- Pay, retirement plans, and disability leave; or
- Other terms and conditions of employment.

Determining what constitutes discrimination under this policy will be accomplished on a case by case basis and depends upon the specific facts and the context in which the conduct occurs. Some conduct may be inappropriate, unprofessional, and/or subject to disciplinary action, but would not fall under the definition of discrimination. The specific action taken, if any, in a particular instance depends on the nature and gravity of the conduct reported, and may include non-discrimination related disciplinary processes as stated above.
Discriminatory practices also include:

- discrimination on the basis of a person's age, disability (including service-connected disabilities), gender (including pregnancy related condition), military status or military obligations, sexual orientation, gender identity or expression, genetic information, national origin, race, or religion;
- retaliation against an individual for filing a charge of discrimination, participating in an investigation, or opposing discriminatory practices;
- employment or education decisions based on stereotypes or assumptions about the abilities, traits or performance of individuals of a certain age, disability (including service-connected disabilities), gender (including pregnancy related condition), military status or military obligations, sexual orientation, gender identity or expression, genetic information, national origin, race, or religion; and
- conduct that has the purpose or effect of substantially interfering with an individual's academic or work performance, or of creating an intimidating, hostile or offensive environment in which to work or learn.

This behavior is unacceptable in the work place and the academic environment. Even one incident, if it is sufficiently serious, may constitute discrimination. One incident, however, does not necessarily constitute discrimination.

2. Policy Against Sexual Harassment
   a. Sexual Harassment is Illegal Under Federal and State Law
      The Nevada System of Higher Education (NSHE) is committed to providing a place of work and learning free of sexual harassment, including sexual violence. Where sexual harassment is found to have occurred, the NSHE will act to stop the harassment, to prevent its recurrence, to remedy its effects, and to discipline those responsible in accordance with the NSHE Code or, in the case of classified employees, the Nevada Administrative Code. Sexual harassment, including sexual violence, is a form of discrimination; it is illegal.

      No employee or student, either in the workplace or in the academic environment, should be subject to unwelcome verbal or physical conduct that is sexual in nature. Sexual harassment does not refer to occasional compliments of a socially acceptable nature. It refers to behavior of a sexual nature that is not welcome, that is personally offensive, and that interferes with performance.

      It is expected that students, faculty and staff will treat one another with respect.

   b. Policy Applicability and Sanctions
      All students, faculty, staff, and other members of the campus community are subject to this policy. Individuals who violate this policy are subject to discipline up to and including termination and/or expulsion, in accordance with the NSHE Code (or applicable Student Code of Conduct) or, in the case of classified employees, the Nevada Administrative Code. Other, lesser sanctions may be imposed, depending on the circumstances.

   c. Training
      All employees shall be given a copy of this policy and each institution's Human Resources Office shall maintain documentation that each employee received the policy. New employees shall be given a copy of this policy at the time of hire and each institution's Human Resources Office shall maintain a record that each new employee received the policy.
Each institution shall provide this policy to its students at least annually and may do so electronically.

Each institution shall include this policy and complaint procedure on its website and in its general catalog.

Each institution shall have an on-going sexual harassment training program for employees.

d. Sexual Harassment Practices

Under this policy, unwelcome sexual advances, requests for sexual favors, and other visual, verbal or physical conduct of a sexual or gender bias nature constitute sexual harassment when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or academic status;
- Submission to or rejection of the conduct is used as a basis for academic or employment decisions or evaluations, or permission to participate in an activity; or
- The conduct has the purpose or effect of substantially interfering with an individual's academic or work performance, or of creating an intimidating, hostile or offensive environment in which to work or learn.

Sexual harassment may take many forms — subtle and indirect, or blatant and overt. For example,

- It may occur between individuals of the opposite sex or of the same sex.
- It may occur between students, between peers and/or co-workers, or between individuals in an unequal power relationship (such as by a supervisor with regard to a supervised employee or an instructor regarding a current student).
- It may be aimed at coercing an individual to participate in an unwanted sexual relationship or it may have the effect of causing an individual to change behavior or work performance.
- It may consist of repeated actions or may even arise from a single incident if sufficiently severe.
- It may also rise to the level of a criminal offense, such as battery or sexual violence.
- Sexual violence is a physical act perpetrated against a person's will or where a person is incapable of giving consent due to the victim's use of drugs or alcohol.

An individual also may be unable to give consent due to an intellectual or other disability. Sexual violence includes, but is not limited to, rape, sexual assault, sexual battery, and sexual coercion.

Determining what constitutes sexual harassment under this policy is dependent upon the specific facts and the context in which the conduct occurs. Some conduct may be inappropriate, unprofessional, and/or subject to disciplinary action, but would not fall under the definition of sexual harassment. The specific action taken, if any, in a particular instance depends on the nature and gravity of the conduct reported, and may include disciplinary processes as stated above.
Examples of unwelcome conduct of a sexual or gender related nature that may constitute sexual harassment may, but do not necessarily, include, and are not limited to:

- Rape, sexual assault, sexual battery, sexual coercion or other sexual violence;
- Sexually explicit or gender related statements, comments, questions, jokes, innuendoes, anecdotes, or gestures;
- Other than customary handshakes, uninvited touching, patting, hugging, or purposeful brushing against a person's body or other inappropriate touching of an individual's body;
- Remarks of a sexual nature about a person's clothing or body;
- Use of electronic mail or computer dissemination of sexually oriented, sex-based communications;
- Sexual advances, whether or not they involve physical touching;
- Requests for sexual favors in exchange for actual or promised job or educational benefits, such as favorable reviews, salary increases, promotions, increased benefits, continued employment, grades, favorable assignments, letters of recommendation;
- Displaying sexually suggestive objects, pictures, magazines, cartoons, or screen savers;
- Inquiries, remarks, or discussions about an individual's sexual experiences or activities and other written or oral references to sexual conduct.
- Even one incident, if it is sufficiently serious, may constitute sexual harassment. One incident, however, does not usually constitute sexual harassment.

3. Complaint and Investigation Procedure

This section provides the complaint and investigation procedure for complaints of discrimination or sexual harassment, including sexual violence (except that complaints against students may be referred to student disciplinary processes). The Chancellor (for the System Office) and each president shall designate no fewer than two administrators to receive complaints. The administrators designated to receive the complaints may include the following: (1) the Title IX Coordinator; (2) the Affirmative Action Program Officer; (3) the Human Resources Officer; or (4) any other officer designated by the president. The President shall also designate a primary investigating officer (Primary Officer) to process all complaints. The Primary Officer may be any of the individuals identified above. All complaints, whether received by the Affirmative Action Officer, Human Resources Officer or other designated officer, must immediately be forwarded to the Primary Officer. All Title IX complaints must be immediately forwarded to the Title IX Coordinator.

An individual filing a complaint of alleged discrimination or sexual harassment shall have the opportunity to select an independent advisor for assistance, support, and advice and shall be notified of this opportunity by the Primary Officer, or by her designee. It shall be the choice of the individual filing the complaint to utilize or not utilize the independent advisor. The independent advisor may be brought into the process at any time at the request of the alleged victim. The means and manner by which an independent advisor shall be made available shall be determined by each institution or unit.

An individual against whom a complaint of alleged discrimination or sexual harassment is filed shall have the opportunity to select an independent advisor for assistance, support, and advice and shall
be notified of this opportunity by the Primary Officer, or by her designee. It shall be the choice of
the individual against whom the complaint is filed to utilize or not utilize the independent advisor.

The independent advisor may be brought into the process at any time at the request of the alleged
perpetrator. The means and manner by which an independent advisor shall be made available shall
be determined by each institution or unit.

If anyone in a supervisory, managerial, administrative or executive role or position, such as a
supervisor, department chair, or director of a unit, receives a complaint of alleged discrimination or
sexual harassment, or observes or becomes aware of conduct that may constitute discrimination or
sexual harassment, the person must immediately contact one of the individuals identified above to
forward the complaint, to discuss it and/or to report the action taken. Title IX complaints must be
immediately provided to the Title IX Coordinator.

Complaints of discrimination or sexual harassment should be filed as soon as possible with the
supervisor, department chair, dean, or one of the administrators listed above and/or designated by
the president to receive complaints of alleged sexual harassment or discrimination.

a. Employees

i. An employee who believes that he or she has been subjected to discrimination or
sexual harassment by anyone is encouraged—but it is neither necessary nor required,
particularly if it may be confrontational—to promptly tell the person that the
conduct is unwelcome and ask the person to stop the conduct. An employee is not
required to do this before filing a complaint. A person who receives such a request
must immediately comply with it and must not retaliate against the employee.

ii. The employee may file a discrimination or sexual harassment complaint with his or
her immediate supervisor, who will in turn immediately contact one of the
officials listed above.

iii. If the employee feels uncomfortable about discussing the incident with the
immediate supervisor, the employee should feel free to bypass the supervisor and file
a complaint with one of the other listed officials or with any other
supervisor.

iv. After receiving any employee's complaint of an incident of alleged discrimination
or sexual harassment, the supervisor will immediately contact any of the individuals
listed above to forward the complaint, to discuss it and/or to report the action taken.
The supervisor has a responsibility to act even if the individuals involved do not
report to that supervisor.

b. Students

i. A student who believes that he or she has been subjected to discrimination or sexual
harassment by anyone is encouraged—but it is neither necessary nor required
particularly if it may be confrontational—to promptly tell the person that the
conduct is unwelcome and ask the person to stop the conduct. A student is not
required to do this before filing a complaint. A person who receives such a request
must immediately comply with it and must not retaliate against the student.

ii. The student may file a complaint with his or her major department chair or director
of an administrative unit, who will in turn immediately contact one of the officials
listed above.

iii. If the student feels uncomfortable about discussing the incident with the department
chair or director of an administrative unit, the student should feel free to bypass the
person and file a complaint with one of the above officials or to any chair, dean, or
director of an administrative unit who will in turn immediately contact one of the
officials listed above to forward the complaint, to discuss it and/or to report the
action taken. The chair, dean or director of an administrative unit has a responsibility
to act even if the individuals involved do not report to that person.

c. Non-Employees and Non-Students
   Individuals who are neither NSHE employees nor NSHE students and who believe they
   have been subjected to discrimination or sexual harassment by a NSHE employee during the
   employee's work hours or by a NSHE student on campus or at a NSHE-sponsored event
   may utilize any of the complaint processes set forth above in this section.

d. Investigation and Resolution
   i. After receiving a complaint of the incident or behavior, the Primary Officer, or
designee, will initiate an investigation to gather information about the incident. If the
Primary Officer is unable to initiate an investigation, due to a conflict or for any
other reason, the President shall designate another individual to act as Primary
Officer for the matter. Each institution may set guidelines for the manner in which
an investigation shall be conducted. The guidelines shall provide for the prompt,
 thorough, impartial, and equitable investigation and resolution of complaints, and
shall identify the appropriate management level with final decision-making authority.
The guidelines shall, at a minimum, provide the person subject to the complaint with
information as to the nature of the complaint, and shall further provide that the
person filing the complaint and the person who is the subject of the complaint have
equal rights to be interviewed, identify witnesses and provide documentation
pertaining to the complaint. In most cases, an investigation should be completed
within 45 calendar days of receipt of the complaint.

   ii. The standard for evaluating complaints shall be a preponderance of the evidence. At
the completion of the investigation, a recommendation will be made to the
appropriate management regarding the resolution of the matter. The
recommendation is advisory only.

   iii. After the recommendation has been made, a determination will be made by
appropriate management regarding the resolution of the matter. If warranted,
disciplinary action up to and including involuntary termination or expulsion will be
taken. Any such disciplinary action shall be taken, as applicable, in accordance with
NSHE Code Chapter 6 (or applicable Student Code of Conduct), or, in the case of
classified employees, NAC Chapter 284. Other appropriate actions will be taken to
correct problems and remedy effects, if any, caused by the conduct, if appropriate. If
proceedings are initiated under Chapter 6, the applicable Student Code of Conduct,
or the Nevada Administrative Code, the investigation conducted pursuant to this
policy may be used as part of such investigations. The administrative officer, in his or
her discretion, may also supplement the investigation with additional investigation.

   iv. In any disciplinary hearings conducted pursuant to a Student Code of Conduct or
under Title 2, Ch. 6, the burden of proof shall be by a preponderance of the
evidence. In connection with any such disciplinary hearings, the person filing the
complaint and the person who is the subject of the complaint have equal rights to be
interviewed, identify witnesses, and provide and receive documentation and witness
lists pertaining to the complaint, and if an appeal is provided, to appeal the decision.
v. After the appropriate management has made a determination regarding the resolution of the matter, and depending on the circumstances, both parties may be informed concurrently of the resolution.

vi. In the event actions are taken against an individual under NSHE Code Chapter 6 (or applicable Student Code of Conduct) or NAC Chapter 284, such matters generally remain confidential under those sections, except that final decisions following hearings or appeals of professional employees and State of Nevada personnel hearings involving classified employees are public records. Student matters generally remain confidential under FERPA.

vii. When discriminatory conduct or sexual harassment involves a crime of violence or a non-forcible sex offense, FERPA permits the institution to disclose to the alleged victim the final results (limited to the name of the alleged perpetrator, any violation found to have been committed, and any sanction imposed) of a disciplinary proceeding against the alleged perpetrator, regardless of whether the institution concluded that a violation was committed. With respect to an institutional disciplinary proceeding alleging a sex offense, the Clery Act requires that the accuser and the accused must be informed of the outcome.

viii. In the event a student is found to have engaged in sexual harassment of another student, the institution shall disclose to the student who was harassed, information about the sanction imposed on the student who was found to have engaged in harassment when the sanction directly relates to the harassed student.

c. Prompt Attention
Complaints of discrimination or sexual harassment are taken seriously and will be dealt with promptly, thoroughly, impartially, and equitably. Where discrimination is found to have occurred, the NSHE institution or unit where it occurred will act to stop the discrimination or sexual harassment, to prevent its recurrence, to remedy its effects, if any, and to discipline those responsible.

f. Confidentiality
The NSHE recognizes that confidentiality is important. However, confidentiality cannot be guaranteed. The administrators, faculty or staff responsible for implementing this policy will respect the privacy of individuals reporting or accused of discrimination or sexual harassment to the extent reasonably possible and will maintain confidentiality to the extent possible. Examples of situations where confidentiality cannot be maintained include, but are not limited to, necessary disclosures during an investigation, circumstances where the NSHE is required by law to disclose information (such as in response to legal process), or when an individual is in harm's way.

g. Retaliation
i. Retaliation against an individual who in good faith complains of alleged discrimination or sexual harassment or provides information in an investigation about behavior that may violate this policy is against the law, will not be tolerated, and may be grounds for discipline. Retaliation in violation of this policy may result in discipline up to and including termination and/or expulsion.

ii. Any employee or student bringing a discrimination or sexual harassment complaint or assisting in the investigation of such a complaint will not be adversely affected in terms and conditions of employment and/or academic standing, nor discriminated
against, terminated, or expelled because of the complaint. Intentionally providing false information is also grounds for discipline.

iii. "Retaliation" may include, but is not limited to, such conduct as:
   1. The denial of adequate personnel to perform duties;
   2. Frequent replacement of members of the staff;
   3. Frequent and undesirable changes in the location of an office;
   4. The refusal to assign meaningful work;
   5. Unwarranted disciplinary actions;
   6. Unfair work performance evaluations;
   7. A reduction in pay;
   8. The denial of a promotion;
   9. A dismissal;
   10. A transfer;
   11. Frequent changes in working hours or workdays;
   12. An unfavorable reference letter;
   13. An unfair grade

iv. Employees
   1. An employee who believes that he or she has been subjected to retaliation may file a retaliation complaint with his or her immediate supervisor, who will in turn immediately contact one of the officials listed above.
   2. If the employee feels uncomfortable about discussing the alleged retaliation with the immediate supervisor, the employee should feel free to bypass the supervisor and file a complaint with one of the other listed officials or with any other supervisor.
   3. After receiving any employee's complaint of an incident of alleged retaliation, the supervisor will immediately contact any of the individuals listed above to forward the complaint, to discuss it and/or to report the action taken. The supervisor has a responsibility to act even if the individuals involved do not report to that supervisor.

v. Students
   1. A student who believes that he or she has been subjected to retaliation may file a retaliation complaint with his or her major department chair or director of an administrative unit, who will in turn immediately contact one of the officials listed above.
   2. If the student feels uncomfortable about discussing the alleged retaliation with the department chair or director of an administrative unit, the student should feel free to bypass the person and file a complaint with one of the above officials or to any chair, dean, or director of an administrative unit who will in turn immediately contact one of the officials listed above to forward the complaint, to discuss it and/or to report the action taken. The chair, dean or director of an administrative unit has a responsibility to act even if the individuals involved do not report to that person.

vi. Complaints of retaliation under Title IX must be immediately provided to the Title IX Coordinator

h. False Reports
Because discrimination and sexual harassment frequently involve interactions between persons that are not witnessed by others, reports of discrimination or sexual harassment cannot always be substantiated by additional evidence. Lack of corroborating evidence or "proof" should not discourage individuals from reporting discrimination or sexual harassment under this policy. However, individuals who make reports that are later found to have been intentionally false or made maliciously without regard for truth, may be subject to disciplinary action under the applicable University and Board of Regents disciplinary procedures. This provision does not apply to reports made in good faith, even if the facts alleged in the report cannot be substantiated by subsequent investigation.

i. Supervisors’ Responsibility
Every supervisor has responsibility to take reasonable steps intended to prevent acts of discrimination or sexual harassment, which include, but are not limited to:

• Monitoring the work and school environment for signs that discrimination or harassment may be occurring;
• Refraining from participation in, or encouragement of actions that could be perceived as discrimination or harassment (verbal or otherwise);
• Stopping any observed acts that may be considered discrimination or harassment, and taking appropriate steps to intervene, whether or not the involved individuals are within his/her line of supervision; and
• Taking immediate action to minimize or eliminate the work and/or school contact between the two individuals where there has been a complaint of sexual harassment, pending investigation.

If a supervisor receives a complaint of alleged discrimination or sexual harassment, or observes or becomes aware of conduct that may constitute discrimination or sexual harassment, the supervisor must immediately contact one of the individuals identified above to forward the complaint, to discuss it and/or to report the action taken. Failure to take the above action to prevent the occurrence of or stop known discrimination or harassment may be grounds for disciplinary action.

j. Relationship to Freedom of Expression
The NSHE is committed to the principles of free inquiry and free expression. Vigorous discussion and debate are fundamental rights and this policy is not intended to stifle teaching methods or freedom of expression. Discrimination or sexual harassment, however, is neither legally protected expression nor the proper exercise of academic freedom; it compromises the integrity of institutions, the tradition of intellectual freedom and the trust placed in the institutions by their members.

Harriet E. Barlow, Ph.D, Title IX Coordinator

Title IX Coordinator Monitors and oversees the overall implementation of Title IX Compliance at the University, including coordination of training, education, communications, and administration of grievance procedures for faculty, staff, students and other members of the University community.
Mail Code: 1009
Phone: 702-895-5580
Fax: 702-895-5572 Email: harriet.barlow@unlv.edu

Dr. Christopher Kypuros is the Title IX Deputy at the SDM Campus
Email: Christopher.kypuros@unlv.edu
Phone: 702-774-2526
## APPENDIX G: Honor Code Complaint Process Timeline

<table>
<thead>
<tr>
<th>Day</th>
<th>Step</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Reporting Complaint: The complaints must be in writing and dated. It must state the nature of the complaint and the parties involved. A copy is sent to all parties involved and any witnesses who provide a written statement.</td>
</tr>
<tr>
<td>2</td>
<td>Filing of the complaint is completed by the complainer. If the complaint is against a student, the Dean of Student Affairs (or their designee) will investigate the complaint.</td>
</tr>
<tr>
<td>3</td>
<td>Review of the Complaint: Upon receipt of a complaint, the Dean of Academic Affairs (or their designee) will review the complaint to determine whether it is subject to the Honor Code. The Dean will inform the complainer of the decision.</td>
</tr>
<tr>
<td>4</td>
<td>Notice of the Complaint: The Honor Code Chair will make the complaint available to the complainer and the accused. The Dean of Academic Affairs (or their designee) will investigate the complaint.</td>
</tr>
<tr>
<td>5</td>
<td>Investigation of the Complaint: The Dean of Academic Affairs (or their designee) will investigate the complaint and prepare a written report. The complainer and the accused will receive a copy of the report.</td>
</tr>
<tr>
<td>6</td>
<td>Notice of the Hearing: The Dean of Academic Affairs (or their designee) will inform the complainer and the accused of the date, time, and place of the hearing. In the case of a student, the Dean of Academic Affairs (or their designee) will provide the student with a copy of the written report.</td>
</tr>
<tr>
<td>7</td>
<td>Hearing: The hearing will take place on the date and time specified in the Notice of Hearing. The hearing will be open to the members of the public.</td>
</tr>
<tr>
<td>8</td>
<td>Written Recommendation: The Dean of Academic Affairs (or their designee) will provide a written recommendation to the Dean or their designee. The recommendation may include additional factors, such as any corrective measures that need to be taken.</td>
</tr>
<tr>
<td>9</td>
<td>Final Decision: The Dean or their designee will make a final decision on the complaint. The Dean or their designee will inform the complainer and the accused of the final decision.</td>
</tr>
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</table>

**UNLV SCHOOL OF DENTAL MEDICINE COMPLAINT PROCESS, BY DAYS**

**Timeline:**
- Reporting Complaint: The complaints must be in writing and dated. It must state the nature of the complaint and the parties involved. A copy is sent to all parties involved and any witnesses who provide a written statement.
- Filing of the complaint is completed by the complainer. If the complaint is against a student, the Dean of Student Affairs (or their designee) will investigate the complaint.
- Review of the Complaint: Upon receipt of a complaint, the Dean of Academic Affairs (or their designee) will review the complaint to determine whether it is subject to the Honor Code. The Dean will inform the complainer of the decision.
- Notice of the Complaint: The Honor Code Chair will make the complaint available to the complainer and the accused. The Dean of Academic Affairs (or their designee) will investigate the complaint.
- Investigation of the Complaint: The Dean of Academic Affairs (or their designee) will investigate the complaint and prepare a written report. The complainer and the accused will receive a copy of the report.
- Notice of the Hearing: The Dean of Academic Affairs (or their designee) will inform the complainer and the accused of the date, time, and place of the hearing. In the case of a student, the Dean of Academic Affairs (or their designee) will provide the student with a copy of the written report.
- Hearing: The hearing will take place on the date and time specified in the Notice of Hearing. The hearing will be open to the members of the public.
- Written Recommendation: The Dean of Academic Affairs (or their designee) will provide a written recommendation to the Dean or their designee. The recommendation may include additional factors, such as any corrective measures that need to be taken.
- Final Decision: The Dean or their designee will make a final decision on the complaint. The Dean or their designee will inform the complainer and the accused of the final decision.
**APPENDIX H**

Verification of Receipt and Understanding of UNLV SDM Student Manual

By initialing the items below, I indicate that I have read and understood the following:

1. I have received the University of Nevada, Las Vegas SDM **STUDENT MANUAL**, amended July 2015.

2. I have received the **STUDENT CODE OF PROFESSIONAL RESPONSIBILITY (Honor Code)**, amended and approved by the Board of Regents December 2005, and revised July 2016, which is reprinted in the Student Manual.

3. I understand that by signing this document, I am acknowledging receipt of the most recent copy of the UNLV SDM Student Manual, the UNLV Student Code of Conduct, and the Clinic Manual. These documents can also be accessed electronically on UNLV WebCampus in the **DEN-INFO folder** ([https://webcampus.nevada.edu/webct/entryPage.dowebct](https://webcampus.nevada.edu/webct/entryPage.dowebct)).

4. I am still responsible for all the contents held within the SDM Student Manual, the UNLV Student Code of Conduct, and the Clinic Manual even if I choose not to initial or sign this document.

5. I have received a copy of the Dentist’s Pledge, which is reprinted in the SDM Student Manual.

**I HAVE READ, UNDERSTOOD, AND AGREE TO ABIDE BY ALL THE ABOVE DOCUMENTS.**

<table>
<thead>
<tr>
<th>Student Signature</th>
<th>Date</th>
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<table>
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<tr>
<th>Student Name (printed)</th>
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<tbody>
<tr>
<td>I have presented this handbook in person, but the student refuses to initial and sign the above acknowledgment of receipt.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Faculty or Staff Signature</th>
<th>Date</th>
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</table>

*The UNLV School of Dental Medicine reserves the right to amend any information within the student handbook that will be in the best interest of our students and their academic performance.*
# APPENDIX I

**Title 4 - Codification of Board Policy Statements**  
**Chapter 7**  
**RESIDENT PHYSICIANS, RESIDENT DENTISTS, AND POSTDOCTORAL FELLOWS**

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<th>Section</th>
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<td>Section 2. Appointment – Resident Physicians and Resident Dentists</td>
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<tr>
<td>Section 3. Salary Schedule – Resident Physicians and Resident Dentists</td>
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<td>Section 4. Benefits – Resident Physicians and Resident Dentists</td>
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<tr>
<td>Section 5. Definition – Postdoctoral Fellows</td>
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<tr>
<td>Section 6. Appointment – Postdoctoral Fellows</td>
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<tr>
<td>Section 7. Benefits – Postdoctoral Fellows</td>
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</table>
**Section 1. Definition - Resident Physicians and Resident Dentists (B/R 4/99)**

1. Resident physicians and resident dentists (hereinafter referred to as Residents) are doctors who are continuing their medical or dental education after receipt of the medical or dental Degree through continued instruction and the provision of patient care services by means of educational, clinical experience in University of Nevada-affiliated institutions and organizations, and who may also provide instructional services to medical or dental students as the Residents' experience and education allows. (B/R 4/99)

2. Faculty of the School of Medicine and School of Dental Medicine are responsible for the supervision and instruction of the Residents.

3. The majority of the Residents' time is in hospitals, clinics, physician's offices, and other health care facilities throughout the State of Nevada. Therefore, while on University of Nevada contract, Residents may rotate outside the School of Medicine and School of Dental Medicine with affiliated and non-affiliated institutions as long as these clinical rotations are approved by the department or program to which the Resident is assigned. (B/R 4/99)

**Section 2. Appointment - Resident Physicians and Resident Dentists**

1. Annual appointments shall be approved by the President or designee.

2. Responsibilities to be performed shall be defined by the involved department or program of the University of Nevada School of Medicine or School of Dental Medicine.

3. Salaries to be paid shall be approved by the President or designee.

4. Appointments shall be issued annually for the University fiscal year; however, appointments may be offered for a shorter period to fill vacancies created by terminations or by the establishment of a temporary position. Twelve month appointments may overlap the fiscal year when a program of remediation is necessary or when a resident starts the year after July 1.

5. Work hours will be determined by the needs of patients cared for by the Residents in addition to specific departmental assignments.

6. Procedures to be followed for the offering of contracts to Residents shall be established by the institutional President and published in the institutional administrative manual.

7. Contracts are subject to modification during the fiscal year for Residents as Residents rotate between hospitals and other institutions. In such cases, the Residents may be paid during the interim period by other institutions or continued on contract at the University of Nevada, depending on the inter-institutional arrangements and the needs of the residency program.

8. Contracts for Residents may be terminated by the University of Nevada during the contract year for reasons of improper conduct, moral or ethical reasons, for inability to perform to departmental or educational standards and objectives, or because of financial conditions within the School of Medicine or School of Dental Medicine. Procedures for notice, hearing and appeal of contract terminations or other actions shall be followed as established by the University of Nevada School of Medicine and School of Dental Medicine. (See due process statement of the School of Medicine.) (B/R 6/10)
Section 3. Salary Schedule - Resident Physicians and Resident Dentists

The salary schedule for Residents shall be recommended by the Dean of the School of Medicine or School of Dental Medicine and approved by the respective President. A copy of the salary schedule for Resident Physicians and Resident Dentists will be provided to the Chancellor’s Office on an annual basis. (B/R 12/03)

Section 4. Benefits - Resident Physicians and Resident Dentists (B/R 04/99)

1. Annual leave of up to 15 days at full salary per year will be available starting July 1 of each year. There is no carry-over of annual leave from one year to the next year and Residents shall not be paid for any unused annual leave upon termination of employment. Annual leave shall be taken at a time approved or directed by the supervisor.

2. Sick leave will be granted as required, up to 15 days at full salary, available at any time during the initial 12 months of service. Beginning 12 months after the starting date of his or her contract, the Resident will begin to accrue additional sick leave at a rate of 1-1/4 days per full month of service to add to any remaining balance of unused sick leave from the first 12 months of service. Sick leave may be accrued from year to year to not exceed 15 work days at the last day of each month. Residents shall not be paid for any unused sick leave upon termination of employment. Residents may use accumulated sick leave for temporary disabilities, which includes child bearing. Unpaid child rearing leave may be requested by either parent up to a maximum of one year. Request for child rearing leave must be accompanied by a statement from a qualified professional source if there is a medical or psychological need for the parent to be given leave. Residents are also entitled to the leave benefits provided in federal and state law including the Family and Medical Leave Act of 1993.

3. Funds to pay for group health and life insurance, unemployment compensation coverage, or other group insurance plans will be provided to the Residents by the agency that provides the salary funds for the Resident.

4. Effective January 1, 1993, Residents will participate in a 403(b)-retirement plan, with contributions of 6.2% of salary, made by both the employer and the Residents.

5. Residents will be covered under the state’s workers compensation program and Medicare.

6. Malpractice insurance will be provided by the University and/or Veterans Administration while Residents are on contract with the University of Nevada. After contract termination, the insurance policy will cover the Residents’ contracted activities during the contract.

7. Grants-in-aid for tuition and fees will not be provided by the University.

8. Resident Physicians and Dentists with appointments of half time or more, along with the spouse and dependent children, will be considered in-state Residents for tuition purposes. (B/R 12/03)
Section 5. Definition - Postdoctoral Fellows

A Postdoctoral Fellow appointment is a temporary advanced scholarly appointment of at least 50%. It is a specialized education and training position in research or scholarship under the direction of a faculty sponsor(s) established for the Postdoctoral Fellows' continuing education and professional growth. (The Postdoctoral Fellow is not precluded from applying for any grant, contract or postdoctoral training grants or nationally competitive postdoctoral fellowships permitted under guidelines of the research office of each institution.) (B/R 12/03)

Those persons excluded from the postdoctoral status are registered full-time students, candidates for a degree, visiting scholars who are not at the University for the purpose of receiving further training, or anyone who does not meet the above definition.

The Postdoctoral Fellow appointment serves to advance the competence of a person who has recently completed higher professional training marked by a doctoral degree.

Section 6. Appointment - Postdoctoral Fellows

1. Completion of a doctoral degree in the appropriate discipline is required.

2. Employing departments shall ascertain that prospective appointees meet all eligibility requirements prior to the commencement of appointment. It is the department's responsibility to obtain and forward to the Office of Human Resources an official transcript of the highest degree.

3. All decisions of the academic departments will be made without regard to race, color, creed, religion, sex, national origin, age, disability, veteran's status, sexual orientation or other factors, which cannot be a lawful basis for providing an opportunity for additional training.

4. If the appointee is not a U.S. Citizen, it is the department's responsibility to document the appointee's eligibility to work as a Postdoctoral Fellow in the United States in accordance with the Bureau of Citizenship and Immigration Services (BCIS) rules, prior to the desired start date of employment.

5. The duration of Postdoctoral Fellow appointment will, in most cases, be one year or two, and may not exceed five years.

6. Salaries will be negotiated between the Postdoctoral Fellow and the faculty sponsor from whom the individual receives advanced training, in accordance with the postdoctoral salary policy developed by the individual institutions of NSHE. Job requirements, annual evaluations, and any salary increases will be in accordance with postdoctoral policies developed by the individual institutions of NSHE.

7. Appointments shall be recommended through appropriate administrative channels. The Office of Human Resources will be responsible for monitoring all appointments in compliance with the policy established for Postdoctoral Fellows. Appointments usually shall be issued annually for the fiscal year; however, appointments may be offered for a shorter period. Contracts termination policies for Postdoctoral Fellows will be developed by the individual institutions and may allow for contract termination at any time with thirty days’ notice. (B/R 12/03)
Section 7. Benefits - Postdoctoral Fellows

1. Annual leave with pay will be accrued at 1-1/4 working days per full month of continuous service. Part-time Postdoctoral Fellows shall be granted a pro rata amount of annual leave. Annual leave may be accumulated up to a maximum of 15 work days at the last day of each month. Earned annual leave shall be taken at a time approved or directed by the supervisor. Postdoctoral Fellows shall not be paid for any unused annual leave upon termination of employment.

2. Sick leave with pay will be granted as required, up to 15 days at full salary, available at any time during the initial 12 months of service. Beginning 12 months after the starting date or his or her contract, the Postdoctoral Fellow will begin to accrue additional sick leave at a rate of 1-1/4 working days per full month of service to add to any remaining balance of unused sick leave from the first 12 months of service. Part-time Postdoctoral Fellows shall be granted a pro-rata amount of sick leave. Sick leave may be accrued from year to year, not to exceed 15 work days at the last day of each month. Postdoctoral Fellows shall not be paid for any unused sick leave upon termination of employment.

3. The NSHE group health insurance plan will be provided to postdoctoral fellows.

4. Effective January 1, 2004, Postdoctoral Fellows will participate in a 403(b) retirement plan with contributions of 6.2% of salary, made by both the employee and the employer. No contribution is made to Social Security by employee or employer.

5. All Postdoctoral Fellows will receive workers compensation coverage paid by the employer and Medicare coverage with contributions of 1.45% of salary made by both the employer and employee.

6. All Postdoctoral Fellows will be issued an identification card denoting their status as a Postdoctoral Fellow, which shall entitle them to privileges as specified by each institution. Fees are assessed in accordance with institutional policy.

7. Grants-in-aid for tuition and fees will not be provided by the NSHE institution.

8. Postdoctoral Fellows with appointments of half time or more, along with the spouse and dependent children, will be considered in-state residents for tuition purposes. (B/R 10/04)
APPENDIX J

Resident Due Process

I. Introduction
   a. Residents are entitled to due process, as described in this policy, whenever disciplinary action is contemplated to be taken against a resident which may result in probation, suspension, demotion, or dismissal from a program. Disciplinary action may be taken for:
      i. Academic or knowledge-based reasons (such as failure to meet educational and training standards or requirements); and
      ii. Misconduct (including any prohibited conduct as defined by Title 2, Chapter 6 of the Nevada System of Higher Education Code or violation of any policy or procedure contained in the UNLV SDM General Practice Residency Resident Handbook).
   b. Residents may seek review of a notice of non-reappointment through the due process (see specifically section II, number 10).
   c. The procedure described below, will be used after informal attempts to settle the complaint have failed. Informal resolution of complaints is done within a department and/or a program evaluation or performance review committee.
   d. Informal complaints should be made to the resident, the resident's supervising dentist, and/or program director.

II. Procedure
   a. Formal complaints must be made in writing to the Program Director with copies to the Associate Dean for Advanced Education. When the complaint involves the resident's activities at an affiliated hospital, a copy will also be sent to the hospital CEO or hospital COO. Anyone submitting a complaint will support the request by references to a specific activity, conduct, deficiency or other basis constituting the grounds for the request and will provide supporting documentation, if it exists.
   b. Upon receipt of a formal complaint, the Program Director may informally resolve the complaint including remediation, in a mutually satisfactory manner. Resolution will be made in writing with a copy to the resident's file (informal resolution of a complaint including remediation, is limited to the first complaint against a resident).
      i. If an informal resolution is not attained, the Program Director or resident may request the Associate Dean for Advanced Education (or his designee) to investigate the complaint and make a recommendation to the Program Director. Request for a hearing must be submitted in writing to the Associate Dean for Advanced Education.
   c. If the resident disagrees with the complaint, the resident has the right to request a due process hearing by the Associate Dean for Advanced Education. The request for a hearing must be submitted in writing to the Associate Dean for Advanced Education.
   d. The Associate Dean for Advanced Education will:
      i. Set a date that is acceptable to all involved in the hearing to the extent practical.
      ii. Arrange for recording of the hearing. Court reporters will be hired and charged to the residents department.
      iii. At least 10 days prior to the hearing, present the resident with a copy of the complaint which shall include a description of the charges possible action to be contemplated by the Associate Dean for Advanced Education, and the date, time, and location of the hearing. At this time, the resident will also be notified that he/she can have legal representation if desired. This documentation may be provided electronically.
iv. At least one week prior to the hearing, provide the resident with documentation that will be used in the hearing by the School of Dental Medicine, a list of the members of the panel and witnesses to be called by the school.

c. The Associate Dean for Advanced Education will:
   i. Allow the resident 10 days to prepare a response.
   ii. Invite the resident (and, if the resident wishes, a legal representative*) to be heard.
   iii. Conduct a thorough investigation of the complaint, reading all documentation provided by the resident and the dental school as well as interviewing those persons he/she feels may have relevant information.
   iv. Allow the resident or representative to confront and cross-examine witnesses.
   v. Limit resident hearings to four hours unless specifically requested by the resident and his/her representative or the representative of the School of Dental Medicine. Requests for additional time must be made 10 days prior to the hearing and must be approved by the Associate Dean for Advanced Education.
   vi. Provide recommendations to the Program Director. In the case of a notice of non-reappointment or a pre-termination hearing, the recommendations will be provided directly to the Dean. The recommendations will set forth the Associate Dean of Advanced Education’s findings and decision and the reason(s) for reaching such decision. Such deliberations will not be recorded.
   vii. Should the resident have an attorney, the cases will be presented by the resident's representative and a representative from the school of dental medicine.

f. The resident has a right to:
   i. Written notice of the complaint which shall include a description of the charges, possible action contemplated by the Associate Dean for Advanced Education, and date, time and location of the hearing at least 10 days prior to the hearing
   ii. A list of witnesses, members of the panel and a copy of the materials and documentation support of the charges provided no later than 1 week prior to the hearing.
   iii. Provide to the Associate Dean for Advanced Education information to be used in defense of the charges at least 1 week prior to the hearing.
   iv. Be heard in person and to present witnesses and written documentation in support of his/her position;
   v. Question adverse witnesses;
   vi. Have an unbiased, confidential hearing;
   vii. Be accompanied by an advisor or legal representative at such meetings;
   viii. Have the case determination made only on the evidence recorded at the hearing.
   ix. Receive a written response from either the Program Director or the Dean regarding his/her decision in a timely manner - within 10 days of the hearing.
   x. Appeal an adverse decision, under the procedures set forth below.

g. The Associate Dean for Advanced Education may recommend:
   i. No action against the resident.
   ii. A verbal or written reprimand.
   iii. That certain training or education be repeated.
   iv. Suspension from the residency program for a specified length of time
   v. Whether an emergency suspension should be continued by the Dean (if in place).
   vi. Demotion.
   vii. Dismissal from the residency program.
h. The Program Director will consider the Associate Dean for Advanced Education’s recommendation and will then take action on the complaint. The Program Director will provide the resident with a written statement of (1) the action to be taken, (2) the reason which the action is based, and (3) any conditions which have been placed upon the resident. In cases of suspension or dismissal, the Associate Dean for Advanced Education will make the recommendation to the Dean. A copy of this statement will be sent to the Associate Dean for Advanced Education, Program Director, and to the Administrator of the involved hospital, if applicable.

i. In the case of a notice of non-reappointment or dismissal, the resident may, in writing, appeal this decision directly to the Dean.

   i. The Dean will notify the Associate Dean for Advanced Education and request Associate Dean for Advanced Education to convene to hear the residents appeal.

   ii. The resident will work with the Associate Dean for Advanced Education to arrange a hearing, assemble witnesses, and provide documentation from the resident, the program director and other sources as deemed appropriate.

   iii. The resident will have notice of the hearing no less than 10 days prior. At least one week prior to the hearing the resident will receive all documentation that will be provided to the committee.

   iv. The resident will be allowed legal representation if he/she chooses. Notification of this representation must follow item number 13 of this policy.

   v. The Associate Dean for Advanced Education will have the opportunity to uphold the notice of non-reappointment/dismissal or rescind the decision and make recommendations as to remediation of the resident. The Associate Dean for Advanced Education will provide his/her recommendations to the Dean and the Dean's decision will be final.

   vi. The request for an appeal for notices of non-reappointment/dismissal must be made within 15 working days of receipt of the notice of non-reappointment or dismissal.

   vii. The length of a hearing will be restricted to four (4) hours unless otherwise specified as described in number six (6) of this policy.

j. If the resident wishes to appeal the Program Director's decision, the resident will request in writing a review by the Dean within 10 days of receipt of the Program Director's written statement. The reasons for the appeal must be stated.

   i. The Dean, or his/her representative, may chair an Appeals Committee which will include, when practicable, the Administrator of the involved hospital (or his/her representative), if applicable, and two Program Directors from other dental school residency programs.

   ii. The Appeals Committee may obtain additional facts, as deemed necessary, but will address no issues that were not raised in the original Notice of Action and response.

   iii. The Appeals Committee will make, within 3 weeks of the written request for review, a recommendation on the matter to the Dean. The Dean will inform the resident of his/her decision within 10 days of receipt of the Appeals Committee's recommendation. The Dean's decision will be final.

k. Deviation from these procedures will not invalidate a decision or proceeding unless it the course of the proceedings would have been substantially different had the deviation not occurred, in which event the resident must bring to the deviation to attention of the Program Director immediately upon belief that such prejudice occurred.
l. Within seven (7) days prior to the scheduled meeting date the resident will advise the Program Director whether he/she will be represented at the meeting by an attorney or other advisor. Failure to do so shall result in the resident not being permitted to be accompanied by counsel except for good cause shown or upon written agreement of the parties.

m. A resident's failure to request a meeting to review an adverse decision, to appear at a scheduled meeting, or to appeal from an adverse decision, will be treated as consent to the action.

n. The Associate Dean for Advanced Education will be required to notify the Nevada State Board of Dental Examiners when a resident has been disciplined under these Guidelines and the Dean has rendered a final decision.

i. Action under these procedures shall go forward regardless of other possible or pending administrative, civil or criminal proceedings arising out of the same or other events.

ii. Except upon dismissal from their program, and in that event, only upon a final decision regarding dismissal, residents will be entitled to receive their regular compensation during any period of disciplinary action up to the end of the appointment period.

iii. Technical departures from or errors in following the procedures established in the [NSHE] Code or in any applicable stated prohibition, policy, procedure, rule, regulation or bylaw of a System institution under which disciplinary procedures are being invoked shall not be grounds to withhold disciplinary action unless, in the opinion of the Dean, the technical departures or errors were such as to have prevented a fair and just determination of the charges.

1 This is borrowed from the University of Nevada, School of Medicine’s Resident Due Process Statement, 2011-2012 Graduate Medical Education Resident Handbook Advanced Education.