



**University of Nevada, Las Vegas**  
**School of Dental Medicine**  
**2019-2020 Student Handbook**

**PREDOCTORAL  
PROGRAMS**

DOCTOR OF DENTAL  
MEDICINE (DMD)

DOCTOR OF DENTAL  
SURGERY (DDS)

**ADVANCED  
EDUCATION  
PROGRAMS**

CERTIFICATE IN  
PEDIATRIC DENTISTRY

CERTIFICATE IN  
ORTHODONTICS AND  
DENTOFACIAL ORTHOPEDICS  
IN CONJUNCTION WITH A  
MS AND PhD IN ORAL  
BIOLOGY

CERTIFICATE IN GENERAL  
PRACTICE RESIDENCY



UNLV




Student Handbook, 2019-2020

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## Dentist's Pledge

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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.

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**Note:** Based on the Hippocratic Oath, the Prayer of Maimonides and the 1947 Declaration of Geneva.

## Handbook Acronyms

Acronym	Defined
AAPD	American Academy of Pediatric Dentistry
ABPD	American Board of Pediatric Dentistry
ACLS	Advanced Cardiac Life Support
ADA	American Dental Association
AEC	Advanced Education Committee
BLS	Basic Life Support
CAPS	Counseling and Psychological Services
CBCT	Cone Beam Computed Tomography
CE	Continuing Education
COA	Cost of Attendance
CODA	Commission on Dental Accreditation
COPD	Chronic Obstructive Pulmonary Disease
DDS	Doctor of Dental Surgery
DEA	Drug Enforcement Administration
DMD	Doctor of Dental Medicine
DRC	UNLV Disability Resource Center
DS#	Dental Student and year
EFC	Estimated Family Contribution
EM	Emergency Medicine
FERPA	Federal Educational Rights and Privacy Act of 1974
GKAS	Give Kids a Smile
GPR	General Practice Residency
H&P	Health and Physical
HER	Electronic Health Record
HIPAA	Health Insurance Portability and Accountability Act
IADR	International Association for Dental Research
INBDE	Integrated National Board Dental Examination
MPH	Master of Public Health
NBDE	National Board Dental Examination
NPO	Not By Mouth
NSBDE	Nevada State Board of Dental Examiners
NSHE	Nevada System of Higher Education
OR	Operating Room
Ortho	Orthodontics
OSHA	Occupational Safety and Health Administration
OTC	Over the Counter
PALS	Pediatric Advanced Life Support
Pedo	Pediatrics



## Handbook Acronyms (Cont.)

Acronym	Defined
PGS	Postgraduate Student
PGY#	Postgraduate and Year Number
PhD	Doctor of Philosophy
PPE	Personal Protective Equipment
SDM	School of Dental Medicine
SLOs	Student Learning Outcomes
SPC	Student Progress Committee
TB	Tuberculosis
UMC	University Medical Center

# I. School of Dental Medicine Vision, Mission, Values, Goals, and Objectives

**A. Vision Statement.** The UNLV School of Dental Medicine provides world class oral health education while providing for the dental needs of Nevada residents.

**B. Mission Statement.** The UNLV School of Dental Medicine 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, behavioral, clinical curricula, and research.

**C. Values.** Integrity, Leadership, Teamwork, Communication

## D. Goals

**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 communication provided in all interactions, and cross-cultural relations recognized to meet unique needs of our patients.

**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 professionals.

**3. Scholarship.** Provide an environment that fosters clinical and community engagement for the scholarship of faculty and students through inter-professional education experiences and research by developing mutual understanding of, and respect for, the contributions of various disciplines.

**4. Professional Development.** Provide opportunities, resources, and support to assist faculty and staff in achieving excellence in teaching and learning, ethics, patient-centered care, and professional success.

**5. Alumni Relations.** Engage and connect the University of Nevada, Las Vegas, School of Dental Medicine alumni in support of the school's vision, mission, values, and goals while creating sustainable lifelong relationships.

**E. Student Responsibility.** The School of Dental Medicine (SDM) Student Handbook (hereinafter referred to as the "Handbook") is a reference guide for predoctoral students, postgraduate students, and resident dentists. The term student, as used throughout this Handbook, includes pre-doctoral and postgraduate students, or any individual enrolled at the SDM for academic credit. The term resident dentists (hereinafter referred to as "residents") refers to

licensed dentists who are continuing their dental education after receipt of the dental degree through continued instruction and the provision of patient care services, however, are not enrolled as students during their time. Because residents are not classified students, there is no plan of study or curriculum plan. Information within this Handbook includes information and/or links to various administrative policies, rules, regulations, and procedures of the SDM. In addition, this Handbook contains information and/or links to procedural guidelines such as academic and professional standards, progress and promotion, financial aid, student health insurance and academic and personal counseling. It is the responsibility of all students and residents to read, understand, and comply with all policies, rules, regulations and/or procedures relating to their specific program, the SDM, the Graduate College, and University of Nevada, Las Vegas (hereinafter referred to as the “University.”) All students and residents are responsible for familiarizing themselves with the information contained in the Handbook. Failure to read the information will not be considered an acceptable justification for non-compliance with any academic or administrative policy, rule, regulation, and/or procedure. Policies, rules, regulations, and/or procedures will not be waived nor any exception granted based on a plea of ignorance or contention that the student was not informed by the program, the SDM, the Graduate College, or the University.

It is the responsibility of each student/resident to initiate timely action to clarify any doubt he/she may have concerning such policy, rule, regulation, and/or procedure. All students/residents must review the Handbook, and subsequently read and sign the “*Acknowledgement*” section found in Appendix A. This form must be returned to the SDM’s Office of Student Affairs and or the appropriate Program Director in the case of postgraduate and/or resident programs prior to the end of the first week of classes at the beginning of the student/Residents program of study. Nothing in this Handbook constitutes a contract or creates a contractual obligation on the part of the University and/or the SDM. The University and the SDM reserve the right to interpret and apply its policies, rules, regulations, and/or procedures, and to deviate from these guidelines, as appropriate, in the particular circumstance consistent with the mission and goals of the University and the SDM.

**The University and the SDM reserve the right to change policies, rules, regulations, and/or procedures, or revise the curricula (didactic and/or clinical) and competency assessment requirements as necessary.**

Questions regarding any policy, rule, regulation, and/or procedure and their interpretation should be addressed to the Office of Admissions and Student Affairs, or the respective Department Chair or Program Director.

## II. Academic Provisions

- A. Introduction.** The SDM offers two pre-doctoral programs, one 4-year degree program (DMD) and an advanced standing program for graduates of non-U.S. accredited dental schools (DDS). The SDM also offers postgraduate degree and certificate programs designed for licensed dentists who wish to pursue advanced education. These programs include an M.S. and Ph.D. in Oral Biology in conjunction with a certificate in Orthodontics and Dentofacial Orthopedics; a certificate in Pediatric Dentistry, and a certificate in General Practice Residency (GPR). The Orthodontics and Dentofacial Orthopedics (Ortho) program also offers fellowships each year. In addition, the SDM offers two dual degree options in collaboration with other schools at the University. These include a Master of Business Administration (MBA)/DMD degree and Master of Public Health (MPH)/DMD degree. All students must meet all eligibility requirements of the University Graduate College to be considered for admission for advanced degree programs except for Residents accepted into the GPR program and fellows accepted within the ORTHO program. These requirements can be found on the [UNLV Graduate College website](#).

The SDM does not, expressly or implicitly, guarantee a license to practice dentistry upon admission to or graduation from the 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. General Information.** The Handbook was designed to provide all students/residents with a readily available source of information about the SDM programs, available services, academic policies and procedures, and other items of interest. The educational goal of the SDM is to maintain a progressive, evidence-based, and innovative curriculum integrating biomedical, behavioral, and clinical sciences to support student academic success to ensure the graduation of oral health literate, competent, contemporary oral health care professionals. In this regard, the SDM provides an environment that fosters student learning of the knowledge and skills through mentoring, advising, small group interaction, patient care, and making meaningful contributions to the profession.

Graduation from a U.S. accredited dental program implies that the student/resident has acquired the knowledge and skills necessary to assume the responsibility for the protection of human life and health. Therefore, it is the responsibility of the SDM to specifically define the competencies required of its students/residents. To this end, the faculty of the SDM, as representatives of the dental profession and the dental school community, have defined Academic Performance Standards for dental students/residents and created guidelines for the promotion of students from one academic year to the next. In addition, Academic Performance Standards were defined for the culmination of graduation from the program with the granting of the Doctor of Dental Medicine (DMD) degree, Doctor of Dental Surgery

(DDS) degree, or postgraduate education degree/ certificate, as applicable, based on satisfactorily meeting the performance standards established.

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

**2. Complaint Policy.** Complaints against the SDM are divided as follows: 1) related to standards for accreditation, and 2) unrelated to the standards for accreditation.

**a. Complaints that Relate to Standards for Accreditation.** CODA reviews complaints relating 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 appeals for treatment received by patients or matters of admission, appointment, promotion, or dismissal of faculty, staff, or students/residents. Complaints, which are based in the Standards for Accreditation, are addressed as per the CODA policy for reporting. 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, or on the [CODA website](#).

**b. Complaints Unrelated to the Standards for Accreditation**

i. **Student Complaints.** Pre-doctoral (DMD/DDS) student complaints should be first reported to the course director and/or team leader where appropriate. If the complaint is not remedied at that level, then the student should report the complaint to the respective department chairs and/or program directors. If a student has concerns about reporting their complaint to their course director and/or respective department chair/program director, then they may report their complaint directly to the Office of Academic Affairs. In addition, the SDM Student Council may bring student complaints to the SDM administration for review and resolution as appropriate. Records regarding student complaints will be maintained in the Office of Academic Affairs, including the date of complaint, student name, description of student complaint, how the complaint was received, date of response to the complaint, status of the complaint, and resolution. Records regarding postgraduate students and/or residents' complaints will be maintained in the specific program director's office.

ii. **Staff Complaints.** Staff complaints should be reported to Director of Clinic Operations. This office will maintain a record of these complaints including the date of complaint, student name, description of student complaint, how the complaint was received, date of response to the complaint, status of the complaint, and resolution.

- iii. **Patient Complaints.** Patient complaints should be made to the SDM Patient Advocate. It will be the responsibility of the Patient Advocate to maintain a record of these including the date of complaint, student name, description of student complaint, how the complaint was received, date of response to the complaint, status of the complaint, and resolution.
  - iv. **Harassment/Hostile Environment Complaints.** Complaints dealing with harassment and/or hostile environment should be reported to the Office of Compliance and Integrity and/or the Senior Executive Director of Professionalism, Inclusion, and Student Finance within the Office of Admissions and Student Affairs. The log of these complaints will be maintained by the Harassment Officer including the date of complaint, student name, description of student complaint, how the complaint was received, date of response to the complaint, status of the complaint, and resolution.
3. **Office of Compliance and Integrity.** The SDM Office of Compliance and Integrity provides direction, education, and oversight to SDM to promote compliance with applicable legal and regulatory requirements. Successful compliance and integrity depends on the individual commitment of every SDM community member. Currently, if a member of the SDM community believes there is a compliance or integrity issue, they are required to:
- a. **Identify the Concern.** If you have observed potentially illegal or unethical behavior, you may first wish to review related policies for guidance.
  - b. **Discuss Concern with Supervisor/Department Chair/Program Director.** Contact your respective supervisor, department chair, or program director for guidance about your concern. If you are uncomfortable with this approach, see 'd' below.
  - c. **Discuss Concern with Respective Committee or Responsible Party.** Contact the respective committee chairpersons or responsible party identified during your discussion with your supervisor for guidance about your concern (e.g., Health and Safety Committee, Quality Assurance, Clinical Services Director, etc.). If you are uncomfortable with this approach, see 'd' below. The list of SDM standing committees is located on the [SDM SharePoint](#).
  - d. **Discuss Concern with a member of the Office of Compliance and Integrity Compliance Team or the UNLV Office of Compliance.** Report your concern directly any full member of the SDM Office of Compliance and Integrity or the UNLV Office University Compliance. If you are still uncomfortable, wish to remain anonymous, or have not received an adequate response, see 'e' below. The list of SDM standing committees is located on the [SDM SharePoint](#).
  - e. **Submit a Report to the Anonymous Hotline.** If you wish to report the concern and remain anonymous, UNLV has partnered with *EthicsPoint* to manage the reporting

system. If for any reason you do not wish to submit a formal complaint, please use the [NAVEX EthicsPoint](#) reporting system online or call the hotline toll-free at 1-844-665-2938.

**C. Policies, Rules, Regulations, Procedures, and/or Requirements.** All policies, procedures, rules, and regulations referenced in the Handbook are subject to change and the most recently approved policies, rules, regulations and/or procedures will be followed. SDM policies can be found in [SharePoint](#) under section called [SDM Policies/Procedures/Protocols](#). Clinical policies and procedures are also located in SharePoint. The University policies can be located on the Policies & Forms website within the [Office of the Executive Vice President and Provost](#). NOTE: Postgraduate student/residents must review their individual program supplement for specific policies applicable to their respective programs in addition to those outlined in this Handbook. Stricter policies, rules, regulations, procedures and/or requirements within the Handbook will prevail over general policies set forth by UNLV, and stricter policies, rules, regulations, procedures and/or requirements of specific advanced education programs will prevail over general policies set forth in this Handbook.

**1. Attendance.** In accordance with the NSHE Board of Regents Handbook, Title 4 Chapter 20, Section 3.1, there shall be no official absences from any University class. This SDM class attendance policy will be detailed in each course syllabus. All students/residents at the SDM are expected to attend all scheduled programs, seminars, meetings, classes, and clinical sessions regardless of date or time throughout the academic year, unless formally excused. It is the personal responsibility of the student/resident to consult with each individual faculty member regarding absence(s) from class or clinic.

Students/residents are expected to notify the Office of Admissions and Student Affairs or respective Program Director in accordance with the specific program policies prior to an absence. In the case of unexpected emergencies, students are expected to notify the Office of Admissions and Student Affairs or respective Program Director as soon as reasonable possible afterwards.

Absences will be approved only for reasons of illness or emergencies of the student/resident or immediate family, religious observance, jury duty, and participation in approved activities (e.g., involvement in national organizations and/or professional activities). Family reunions, days off for recreation, travel, social events (e.g., birthdays, weddings, and anniversaries), additional vacation, etc., are not considered approved absences. Pre-doctoral students with four (4) or more absences without prior notification can be dismissed. Course Directors shall document and report all absences without prior notification to the Office of Academic Affairs. Absences for pre-doctoral students (DMD and/or DDS) attending an employment interview and for postgraduate residency interviews will be limited to no more than ten (10) days within an academic year. Approval for absences relative to job interviews and residency program interviews will be dependent on academic progress. Postgraduate students/residents must refer to their individual program supplement for attendance policies within their program.

In the event of a medical problem of a student/resident or a family member, the student will contact the Associate Dean for Admissions and Student Affairs or respective Program Director who will inform the appropriate faculty member(s). The course director, team leader, or Program Director, as applicable, will approve/disapprove the absence. Activities missed during an approved absence may be completed by the student based upon the discretion of the course director, team leader, or respective Program Director. At the discretion of the course director, absence due to illness extending beyond three (3) days may require a physician's letter.

2. **Extended Leave/Leave of Absence.** Leave that is required for an extended period of time (e.g., maternity leave, leave for personal health, or family-related emergencies) will be dealt with on an individual basis and may lead to extended time in the program. Such decisions will be made by the Dean (or designee), the Department Chair and/or respective Program Director, in consultation with the faculty and the student. Postgraduate students/residents must refer to their individual program supplement for extended leave of absence policies within their program.

In addition to this section, please review the UNLV's [Voluntary Health Withdrawal Policy](#). When in doubt about who to contact regarding an unexpected emergency, contact the Office of Admissions and Student Affairs at 702-774-2520.

3. **Religious Observance.** It is the policy of the Nevada System of Higher Education (NSHE) to be sensitive to the religious obligations of its students. Pre-doctoral students (DMD and DDS) and post-graduate students/residents must submit their written notification requesting absence due to religious observance to the Office of Admission and Student Affairs or respective Program Director, where applicable. Any student missing class quizzes, examinations, or any other class/lab work because of observance of religious holidays shall be given an opportunity during that semester to make up missed work. The make-up will apply to the religious holiday absence only. It shall be the responsibility of the student to notify the instructor within the first 14 calendar days of the course (excepting modular courses) of his or 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 test or examination at an alternate time would impose an undue hardship on the instructor or the university that could not reasonably have been avoided by student compliance with this policy.
4. **Educational Opportunities Outside the Continental U.S.** Pre-doctoral students who wish to participate in dental educational opportunities and/or conferences/meetings outside the continental U.S. must be in good academic standing, which constitutes an overall GPA  $\geq 3.0$ , and with no imposed sanctions. Additionally, they must receive approval from course directors, the SDM Associate Dean of Academic Affairs, the SDM Associate Dean for Admissions and Student Affairs, and the UNLV Office of International Programs. An educational affiliation agreement must be current with the host facility prior to solidifying any plans and starting any external educational experience. The SDM approval must be



received before making any plans or travel arrangements. Review the SDM Extramural Educational Experience/ Underserved Patient Care Trip Request Procedure located in [SharePoint](#) and review requirements outlined in the [Education Abroad Handbook](#) located on the [Office of International Programs website](#).

**NOTE: Please be advised that this process could take up to six or more months to complete. Students are responsible for any additional tuition and fees that might be associated with any extra credits should this move a student from part-time (under 20 credits) to full-time (over 20 credits) during the semester the travel is completed.**

- 5. Educational Opportunities Within the Continental U.S.** Pre-doctoral students who wish to participate in extramural educational opportunities and/or conferences/meetings at other dental schools, hospitals, public health facilities, private dental offices, etc. within the continental U.S. must be in good academic standing, which constitutes an overall GPA  $\geq 3.0$ , and with no imposed sanctions. Additionally, they must receive approval from course directors, the SDM Associate Dean of Academic Affairs, the SDM Associate Dean for Admissions and Student Affairs. An educational affiliation agreement must be current with the host facility prior to solidifying any plans and starting any external educational experience. Before applying, you are encouraged to review the SDM Extramural Educational Experience/Underserved Patient Care Trip Request Procedure located in [SharePoint](#) NOTE: Please be advised that this process could take up to six or more months to complete.
- 6. Honors Selective Courses.** Pre-doctoral students who wish to participate in honors selective courses within the SDM must be in good academic standing and hold an overall GPA  $\geq 3.0$ , and with no imposed sanctions. Additionally, they must receive approval from the Associate Dean for Clinical Affairs, Assistant Dean for Clinical Affairs, and the team leader/course director for comprehensive care indicating that they are excelling in their clinical care and compliant with clinical policies and procedures such that they are eligible for participation in an honors selective course.
- 7. Elective Courses.** Pre-doctoral students who wish to participate in elective courses within the SDM must be in good academic standing and hold an overall GPA  $\geq 3.0$ , and with no imposed sanctions. These courses include all the elective courses with the exception of honor selective courses. Students must receive approval from the department chairs and course director for comprehensive care (where appropriate) indicating that they are excelling in their clinical care and compliant with clinical policies and procedures such that they are eligible for participation in an elective course.
- 8. Syllabus.** All courses are subject to the course policies as outlined in this Handbook. The syllabus for each course will be required to individually list the course policies which apply to all SDM courses as outlined in the [Minimum Criteria for Syllabi—Academic Year 2019-2020](#) memo dated July 3, 2018 from Office of the Executive Vice President and Provost. The course director is responsible for uploading the course syllabus at least 1 week prior

to the start of the course on the UNLV Learning Management System (LMS). In addition, the course director is responsible for submitting a final copy of the course syllabus to the SDM Registrar's Office within 1 week of the start of the course.

**9. Disability Resource Center (DRC) Request for Accommodation.** The [University Disability Resource Center \(DRC\)](#) provides resources for students with disabilities. The University 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. Students who feel that they have a documented disability must initiate the process by making an appointment with a Disabilities Specialist at the DRC to discuss what options may be available. The DRC will provide an eligible student with an official Academic Accommodation Plan (AAP) to the Office of Admissions and Student Affairs. The Office of Admissions and Student Affairs will provide the appropriate course directors and Department Chairs with the AAP. Please note that faculty cannot provide a student with academic accommodations unless they are in receipt of this plan received directly from the DRC. Students registered with the DRC must submit a request to the DRC for accommodations each semester. Disability information is not shared with faculty unless the student expressly indicates to disclose that information. What is provided to the faculty is an AAP that outlines the accommodations and services needed but does not identify the disability. Students with disabilities attending UNLV are required to disclose the nature of their condition to the DRC only if they are interested in receiving accommodations and services related to their disability. Disability information does not become part of their academic records and is not part of the regular student records process. The information is only known to the DRC and cannot be released to outside entities without the student's written consent. 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; [drc@unlv.edu](mailto:drc@unlv.edu).

**10. Essential Functions and Minimum Technical Standards for DMD/DDS 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 SDM Minimum Technical Standards for Admission and Matriculation" (referred to as "Essential Functions" or "Technical Standards"). All candidates must sign and return the form located in Appendix A of this Handbook to the Office for Admissions and Student Affairs prior to the end of orientation week. Postgraduate students/residents must refer to their supplement for information related to essential functions and minimum technical standards.

**11. Examination Administration.** Examinations for students 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 and/or respective Program Director.

- a. **Examination Date Change Requests Initiated by Students/Residents.** A class must request in writing any proposed changes to posted examination dates. Requests must be made in writing by the class president/chief resident to the course director/respective Program Director. The course director/Program Director may approve or disapprove the proposed change. If the request is submitted within the first two weeks of the beginning of the course, and the course director/Program Director agrees, a vote of the class is required with 100% of the class voting and a majority voting in favor. To make a change to an exam date after the first two weeks of the semester, the course director must agree, and a vote of the class is required with 100% of the class voting and 100% in favor. The Office of Academic Affairs will administer the voting process. If the request passes, changing future examinations for that academic year will require only 80% approval by the class (100% voting; minimum 80% in favor). This policy change will be in effect for one academic year. The policy is class dependent. A new vote will need to take place each year to change or amend this policy. Course directors have the discretion to make changes to examination dates. Course directors should provide as much notice as possible and take into consideration other examinations already scheduled for that day/week.
- b. **Emergency Situations.** In the event that an emergency prevents a student from taking an examination, the Office of Admissions and Student Affairs and the course director and/or respective Program Director must be notified by email or by telephone before the examination is given. There will be no make-up examinations given without a documented, valid reason (e.g., doctor's note, police report, etc.). If students wish to request an alternate examination for other reasons (e.g., professional activities, jury duty, etc.) a request must be submitted in writing to the course director at least two (2) weeks in advance with details of the documented, valid reason.

## 12. Written Examination Protocol

- a. **Testing Environment.** Students may not bring anything into the testing area except bottled water, a pencil or required examination materials (e.g., laptop if an exam is given with ExamSoft™), with the exception for the simulation classroom where no food or water is permitted. Please note that when using laptops in the classrooms during testing, a privacy screen must be used. Everything else, including hats, all other electronic devices (e.g., cell phones, PDAs, iPads, Smart Watches, etc.) must be left in their locker or a designated location within the classroom.
- b. **Once Examination Begins.** Once the examination begins and for the duration of the examination, there will be NO verbal communication allowed between students.
- c. **Examination Proctor.** The examination environment is proctored by faculty or a designee (e.g., other faculty and/or staff).

- d. **Completion of Examination.** Upon completion of the examination, students must turn in their test booklets and answer sheets (if applicable) and immediately leave the room. Proctoring faculty will collect all materials where applicable. In the case of electronic testing, the student must completely exit the program and show the green successful “exam answer upload screen” to the proctoring faculty prior to leaving the room.
- e. **No Questions during Examination.** No questions will be answered during the examination. Should students have questions about the exam, they should be directed to the course director after the examination has been completed.
- f. **Seating.** Seating may be assigned, and as much as possible, be random and spaced apart from adjacent students.
- g. **Restroom Breaks.** Only one person at a time will be allowed to use the restroom during an examination. If a student leaves the room during the exam, they are to close their laptop and give to the examination proctor. If the exam is completed paper/pencil, they will bring the exam to the examination proctor prior to leaving the room.
- h. **Time Limits.** Beginning and ending times of the examination are defined and strictly enforced. Students with a current AAP on file will be granted approved accommodations for written examinations. This may require the student to take the examination at a different time and location. This will be arranged by the Office of Admissions and Student Affairs.
- i. **Make-up Exams.** Only students with preapproved absences (or cases of extreme unforeseen emergencies that were approved by the course director after the fact) will be allowed to make up missed exams.

### 13. Predoctoral Clinical Competency Assessments

- a. **Competency Assessments.** Competency examinations must be clearly marked on the clinical faculty schedule by the scheduler. In most cases, this requires a minimum of a 24-hour notice to the scheduler by the student (exceptions include diagnosis/treatment planning first visit, and emergency care).
- b. **Scheduling Competency Assessments.** Per faculty, and where possible, multiple competency exams are scheduled in adjacent cubicles.
- c. **Clinical Protocol for Administration and Evaluation of Competency Assessments.** The approved Clinical Sciences protocol for administration and evaluation of student competencies is located SharePoint and made available to all faculty, students and

staff. This must be followed for all clinical competency assessments within the SDM curriculum.

- e. **No Assistance or Advice during Competency Assessment.** No assistance or advice is provided during a competency examination, other than to alleviate an emergency or correct a significant patient treatment error. Unauthorized assistance or advice will be grounds for immediate failure.
- f. **Competency Forms.** Students will use approved competency assessment forms loaded in AxiUm/SharePoint.
- g. **Use of Dental Assistants during Competency Assessment.** Dental assistants may be used during competency assessments, when available. However, unauthorized use of the assistant (e.g., coaching) will be grounds for immediate failure.
- h. **Faculty Assignment.** Students must only work with the faculty assigned for the specified competency assessment. Consultation with faculty not assigned to the competency assessment will result in immediate failure.
- i. **Time Limits.** The time limit for each assessment is on the assessment form.

#### 14. Pre-Clinical Practical Examinations

- a. **Academic Integrity.** The same level of academic integrity as with written and pre-clinical examinations is expected. It should be noted that pre-clinical practical examinations are exempt from any AAP because they are considered practical examinations (See Appendix A, “Minimal Technical Standards for Admissions and Matriculation” for more information).
- b. **Proctored.** Examinations will be proctored by faculty or a designee (e.g., another faculty or qualified staff member).
- c. **Faculty Will Not Provide Assistance during Examination.** No assistance or advice is provided during the pre-clinical examination.

**15. Grading Policy.** The course director is responsible for clearly stating within their course syllabus the criteria and policies used for testing and determination of grades. 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 clearly in the course syllabus. In addition, the course director is responsible for reporting the final course grade for each student in [MyUNLV](#) per UNLV guidelines. For predoctoral students, any final course grade of an “I” or “F” must be accompanied by a

recommendation from the course director to the SPC of how the “I” grade may be resolved and whether the F grade may be remediated. The SPC subsequently makes their final recommendations to the Associate Dean for Academic Affairs for final disposition and distribution of academic decisions to the students. For postgraduate students, Program Director will be notified by the course directors of any final course grade of an “I” or “F” and any recommendation(s) how the “I” grade may be resolved and whether the F grade may be remediated.

The following grading system used for **final course grades** complies with NSHE campus grading policy and will be used in all the SDM courses for **final course grades** not specifically designated with other approved NSHE grading symbols.

90-100:	A (superior)	4.0 (grade point value)
80-89.9:	B (above average)	3.0 (grade point value)
70-79.9:	C (average)	2.0 (grade point value)
0-69.9:	F (failure)	0.0 (grade point value)

Other approved NSHE Grading Symbols:

S	Satisfactory
U	Unsatisfactory
I	Incomplete
X	In-Progress (projects/courses extending beyond one semester)
AD	Audit
W	Withdrawal
NR	Not Reported - Assigned by registrar

Faculty may use various terms within a specific course to define academic progress (e.g., meets expectations, exceeds expectations, average, needs improvement, clinically acceptable, deficient performance, etc.). However, should these be used, faculty must clearly define the terms used in relation to the grade structure listed above. For example, meets expectations = C (average); exceeds expectations = B (above average).

Each student must pass all dental school courses with a “C” or better grade, or an “S” 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 an “S” grade in courses using the S/U grading method. For graduate programs (e.g., Master and/or Ph.D.), a “B” or better is required for all courses.

Course grades include academic performance and professional behavior, representing the knowledge, skills, and values in the dental profession. A student’s professionalism will impact the final grade. A passing grade cannot be earned by a student whose professionalism is unacceptable. Professional standards are discussed in Section II,

Subsection 19, Professionalism; Section VII, the SDM Code of Professional Responsibility (Honor Code), Subsection B, Professional Conduct in Patient Care.

It is the responsibility of the student to always remain cognizant of his/her academic standing with regard to grades and academic progress. Students concerned with their academic or professional progress in any given course are strongly encouraged to contact their course director(s), their mentor, the Office of Admissions and Student Affairs, or the Office of Academic Affairs (or Program Director for postgraduate students) for guidance. Early identification and targeted intervention will greatly enhance efforts for students to achieve a successful course outcome.

## 16. Privacy Policies

- a. ***The Federal Educational Rights and Privacy Act of 1974 (FERPA).*** FERPA is a federal law that protects the privacy of student educational records of both current and former students. Educational records are defined as those records that are: 1) directly related to a student; and 2) maintained by an educational agency or institution, or by a party acting for the agency or institution. FERPA applies much more broadly to all records directly related to a student that are maintained by the institution, including non-academic disciplinary records, financial aid records, documents related to NCAA investigations, general correspondence from students, and even a student's employment file at the university so long as the employment is the result of the individual's status as a student (e.g., student workers). Information from a student's educational record may not be released without their written permission unless one of the exceptions under FERPA applies. Exceptions include information being requested by a school official with a legitimate educational interest (e.g., SPC for purpose of evaluating academic performance, department chairs, team leaders and team faculty, etc. ); accrediting agencies for purposes of oversight (e.g., CODA, NWCCU); and to comply with judicial or lawfully issued subpoenas. All exceptions and more information about the UNLV's Institutional FERPA policy are located on the [UNLV Office of the Registrar Website](#).
- b. ***The Health Insurance Portability and Accountability Act (HIPAA).*** The SDM is deemed a hybrid covered entity under HIPAA. HIPAA requires the SDM to adopt standards to safeguard and protect the confidentiality, integrity, and availability of electronic health information and to have written privacy and security procedures for the SDM community to follow. The SDM has prepared the required policies and procedures as outlined in the [SDM HIPAA Privacy Rule Protocol](#) and the [SDM Clinical Operating Manual](#) located on the [SDM SharePoint](#). Privacy Compliance Protocol, as well as all the SDM clinical policies and procedures are reviewed annually and updated when applicable. Students may also read more information on the [U.S. Department of Health and Human Services \(HHS\) website](#). All students are required to complete HIPAA training. The training, which addresses the School's specific privacy policies and procedures, is held annually.

**17. 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 the SDM Review Committee. Academic performance should be closely monitored by all course directors throughout the semester to determine if early intervention is warranted. Regarding pre-doctoral students, the applicable committee is the SDM Student Progress Committee (SPC), along with the Associate Dean of Academic Affairs (or designee) who review and make recommendations regarding student performance. Regarding postgraduate 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 of Academic Affairs and/or Dean regarding student status and progress.

- a. **Satisfactory Progress.** The SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) determines the academic standing of all students 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 postgraduate students, “good academic standing” is defined as receiving passing grades (C or better average in Certificate program and in graduate programs (i.e., Master and/or Ph.D.), a “B” or better in all required courses, with no imposed sanctions. To hold class office, student body office, or represent the SDM at regional and national meetings, pre-doctoral and postgraduate students must be in good academic standing, with an overall GPA  $\geq 3.0$ , and with no imposed sanctions.
- b. **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 grade of “I” — incomplete — can be granted when a student has satisfactorily completed at least three-fourths of the semester but for reason(s) beyond the student’s control, and acceptable to the instructor, cannot complete the last part of the course, and the instructor believes that the student can finish the course without repeating it. A student who receives an “I” is responsible for making up whatever work was lacking at the end of the semester before the end of the following regular semester. If course requirements are not completed within the time indicated by the instructor, a grade of F will be recorded and the student’s GPA will be adjusted accordingly. Students who are fulfilling an incomplete do not register for the course but make individual arrangements with the instructor who assigned the “I” grade. To report the course grade, the instructor will submit a grade change to the SDM registrar. Note: grade changes shall not be accepted if delivered by the student. The SPC/AEC and Associate Dean of Academic Affairs/ Associate Dean for Advanced



Education (or designee) will make recommendations to the Dean regarding resolution of “I” and “F” grades. To achieve good academic standing, any courses with “I” grades must be completed with a passing or satisfactory grade.

- c. **Other Specific Criteria.** 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 of pre-doctoral program/postgraduate programs, or successful completion of certificate programs can occur only when a student has completed all required courses with passing grades, any additional requirements (i.e., research requirements for certificate and postgraduate programs), and no imposed academic sanctions.

**18. Promotion.** All students must 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 of Academic Affairs/Associate Dean for Advanced Education (or designee), subject to approval by the Dean.

- a. **Pre-doctoral Students.** A pre-doctoral 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 of Academic Affairs (or designee), to be approved by the Dean (or designee) as eligible to sit for the National Board Dental Examination (NBDE), Part I. DS2 students must take NBDE, Part I 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 of Academic Affairs (or designee). Action may include, but is not limited to, placement on academic probation, clinical retraining, clinical reassignment, and/or change in academic status. (Those taking the INBDE will be required to pass before the end of the Fall semester of the DS4 year or

The SDM must receive notification that the student has successfully passed NBDE, Part I before the start of the DS3 spring semester (or those taking the INBDE will be required to pass before the end of the fall semester of the DS4 year) or the student will be suspended. The suspension due to failure of the first retake will allow the student to focus their efforts on studying for any subsequent retake examinations. Fees, tuition assessment, and the 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.

The Joint Commission on National Dental Examination (JCNDE) issued formal notification that the Integrated National Board Dental Examination (INBDE) will be

available for administration beginning August 1, 2020. The last administration of the NBDE, Part 1 will occur July 31, 2020. The last administration on the NBDE, Part II will occur on July 31, 2022. After this date, licensure candidates are expected to take the INBDE. Students matriculating in the fall of 2020 and beyond will be required to take the INBDE. Information regarding eligibility is forthcoming.

In order to assist predoctoral students in preparing for the NBDE, Part I and Part II (and the INBDE in the future), the SDM has invested in the Kaplan preparatory program. Kaplan provides online, on-demand, and onsite synchronous training which allows a more personal experience for SDM students. Because of this investment, this program is **mandatory** for all predoctoral students who are preparing to take the NBDE Part I and NBDE Part II (and those in the future taking the INBDE). In an effort to assist those students who have not met requirements for promotion may be allowed with permission of the Dean (or designee) to receive all materials and attend the Kaplan review course.

- b. *Postgraduate Students.*** Postgraduate students must be in good academic standing to continue in their respective program.

**19. Graduation Requirements.** A student **must** pass all required courses, including successful passing of all competency assessments, all clinical responsibilities and be in good academic standing to be eligible to graduate from the SDM.

- a. *Pre-doctoral Students.*** In addition to the requirement listed above, a pre-doctoral student **must** also pass the NBDE, Parts I and II to be eligible to graduate from the SDM. The Dean (or designee) will authorize students in good academic standing who have completed the requisite requirements and who are considered prepared and eligible to take the NBDE Part II.

DS4 students must pass the NBDE Part II before receiving their diploma. 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: Chair of the SPC, Associate Dean of Academic Affairs (or designee), and the Associate Dean for Admissions and Student Affairs. The SPC and Associate Dean of Academic Affairs (or 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 of Academic Affairs (or 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 their diploma until they successfully pass the NBDE Part II.

Recommendations for graduation will be made by the SPC and Associate Dean of Academic Affairs (or designee), subject to approval by vote of the SDM Faculty Assembly, to the Dean.

- b. *Postgraduate Students.*** The AEC will review the academic standing of all postgraduate students and make recommendations to the Dean concerning graduation. A student must be in good academic standing to successfully complete the program.

**20. 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.

**21. Course Remediation.** Three methods of course remediation may be applied in didactic, pre-clinical, and simulation courses. These include a) in-course remediation, b) post-course remediation, and 3) repeat course/repeat academic year.

- a. In-course Remediation.** In-course remediation is not automatically afforded but rather it may be permitted at the discretion of the course director. Information about in-course remediation will be outlined in the course syllabus. In-course remediation applies in any course in which two or more evaluation exercises or examinations are provided for in the course syllabus. A student receiving a grade of F on any examination or practical evaluation exercise, excluding the final, may be permitted to remediate that specific examination or practical evaluation exercise prior to taking the next scheduled examination at the course director's discretion. If the course director permits in-course remediation, it is the responsibility of the course director to contact the student to schedule the remediation activity. There shall be no limit to the number of courses in which a student may complete in-course remediation.

For predoctoral students, 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 postgraduate 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 respective Advanced Education Program.

**b. Post-course Remediation**

- i. Pre-Doctoral Students.** Post-course remediation may only be permitted with approval from the SPC and Associate Dean of Academic Affairs (or designee). If post-course remediation is approved by the SPC and Associate Dean of Academic Affairs (or designee). When a Student Receives F Grade. When a student receives

a final grade of F in any course, post-course remediation may be permitted in accordance with (a) and (b) below.

**(a) Limit on Post-course Remediation.** 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.

**(b) Timing of Post-course Remediation.** Post-course remediation should not begin until the course director receives written notification from the SPC and Associate Dean of Academic Affairs (or designee). The course director will schedule the post-course remediation activity that should correspond with any guidelines recommended by the SPC and Associate Dean of Academic Affairs (or designee). Post-course remediation should be completed by the end of the following regular semester. Course directors may request an extension and approval from SPC and the Office of Academic Affairs.

**(c) Successful Post-Course Remediation.** Successful post-course remediation, as defined by the course director, will result in a maximum grade of C. To report the course grade, the instructor will submit a grade change to the SDM registrar. Note: grade changes will not be accepted if delivered by the student. The student's transcript will read "C Remediated."

**(d) Failure of Post-Course Remediation.** If a student fails to successfully complete their post-course remediation any given course, the original F grade will stand as the final grade for the course. The student will be suspended. If permitted to continue the program, the student maybe required to repeat the entire academic year.

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

**(a) Unsatisfactory Grade:** When a student receives an unsatisfactory grade in any course, post- course remediation may be permitted.

**(b) Limit on Post-Course Remediation:** 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).

**(c) Timing of Post-Course Remediation:** Post-course remediation should not begin until the course director receives notification from the AEC and Associate Dean for Advanced Education (or 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 designee). Post-course remediation should be completed by the end of the following regular semester. Course directors may request an extension from the Associate Dean for Advanced Education.

**(d) Successful Post-Course Remediation:** 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.

**(e) Failure of Post-Course Remediation:** 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 course or 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 predoctoral student/postgraduate 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 of Academic Affairs/Associate Dean for Advanced Education (or 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 of Academic Affairs/Associate Dean for Advanced Education [or 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 of Academic Affairs/Associate Dean for Advanced Education (or designee) 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, practical examinations, competency requirements, previously earned clinic points, and/or competency assessments 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.

- d. **Resolution of Recorded Failures.** A student must satisfactorily complete post-course remediation or successfully repeat a course in which they have received a grade of F in order to be promoted or graduate. 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. The course director will report the outcome of the post-course remediation to the SDM registrar who will take appropriate action.

**22. Clinical Remediation Predoctoral Students.** Students enrolled in clinical courses may also be in need of remediation for knowledge, technical skills, critical thinking skills, interpersonal skills, patient management, professional behavior, or adherence to policies and procedures. Such remediation may be needed based on actual clinical patient experiences including competency examinations, or meetings with mentors or other faculty/staff members as related to clinical care. The three levels of clinical remediation, from least serious to most serious, are: clinical retraining, clinical reassignment, and clinical interdiction. All three impact clinical course grades. Clinical retraining or reassignment may be in-course or post-course remediation. Clinical retraining is initiated by any faculty or staff member who identifies a need for improvement and must be approved by the Department Chair of Clinical Sciences prior to being sent to the student. Clinical reassignment and clinical interdiction may only be issued by the Team Leader or Director of Comprehensive Care, with the final authority resting with the Director of Comprehensive Care. In the event of a disagreement, the Clinical Sciences Department Chair will make the decision. A record of clinical retrainings, reassignments, and interdictions is maintained and may impact course grades or student promotion.

- a. **Clinical Retraining.** Clinical reassignment is designed to assist students in the remediation of mild clinical performance deficiencies with no immediate risk to patient safety. There is generally not a need to remove students from clinical care for retraining, however some situations may call for it. The staff or faculty member who identifies a deficiency must issue a "clinical retraining" document within 5 working days of the incident or event. Specific deficiencies, learning outcomes, assignments that match the intended learning outcomes, and the monitoring faculty must be included. The issuing faculty or staff member must send the document by encrypted email to the student, copying the following individuals: Associate Dean of Academic Affairs, Chair of Student Progress Committee, Department Chair of Clinical Sciences, Director of Comprehensive Care, Associate Dean of Clinical Services, Assistant Dean of Clinical Services, Associate Dean of Admissions and Student Affairs, and the

student's Team Leader. The student reviews the retraining document, then has the opportunity to add his/her perspective, sign the document, and return by email to the distribution list within 3 working days. Clinical retraining then begins. It is the student's responsibility to assure that the retraining is successfully completed by the stated deadline. The outcomes assessment is then completed by the monitoring faculty and sent by email again to the above distribution list. In the event of an unsuccessful outcome, further sanctions may be taken, and/or change in academic status, including but not limited to Clinical Suspension, Academic Probation, Repeating the Year, or Academic Expulsion (dismissal) may occur.

- b. *Clinical Reassignment.*** Clinical reassignment is designed to assist students in the remediation of moderate or repeated mild clinical performance deficiencies with no immediate risk to patient safety. There is generally not a need to remove students from clinical care for retraining, however some situations may call for it. The staff or faculty member who identifies a deficiency must prepare a "clinical reassignment" document within 3 working days of the incident or event. Specific deficiencies, learning outcomes, assignments that match the intended learning outcomes, and the monitoring faculty must be outlined. The issuing faculty or staff member must send the document by encrypted email to the Team Leader and Director of Comprehensive Care for review. The Team Leader and Director of Comprehensive Care have 3 working days to review and determine if the reassignment is to be issued to the student. If it is agreed that the reassignment will be issued, the Director of Comprehensive Care notifies the student by encrypted email, as well as: Associate Dean of Academic Affairs, Chair of Student Progress Committee, Department Chair of Clinical Sciences, Associate Dean of Clinical Services, Assistant Dean of Clinical Services, Associate Dean of Admissions and Student Affairs, and the student's Team Leader. The student reviews the reassignment document, then has the opportunity to add his/her perspective, sign the document, and return to the distribution list within 3 working days. Clinical reassignment then begins under the supervision of the monitoring faculty. It is the student's responsibility to assure that the reassignment is successfully completed by the stated deadline. The outcomes assessment is then completed by the monitoring faculty and sent again to the above distribution list. In the event of an unsuccessful outcome, further sanctions may be taken, and/or change in academic status, including but not limited to Clinical Suspension, Academic Probation, Repeating the Year, or Academic Expulsion (dismissal) may occur. Clinical reassignment includes a designation of the academic status modification of Academic Warning.
- c. *Clinical Interdiction.*** Clinical interdiction is designed to ensure patient safety and assist students in the remediation of egregious or repeated clinical deficiencies that could impact patient safety. The staff or faculty member who identifies a deficiency is encouraged to respectfully take over care of patients who are considered to be in the way of harm. The staff or faculty member must prepare a "clinical interdiction" document within 24 hours of the incident or event (excluding weekends and

holidays/recess) and send by encrypted email to the Associate Dean of Academic Affairs, Chair of SPC, Department Chair of Clinical Sciences, Director of Comprehensive Care, Associate Dean of Clinical Services, Assistant Dean of Clinical Services, Associate Dean of Admissions and Student Affairs, and the student's Team Leader. The Associate Dean of Clinical Services and Associate Dean of Academic Affairs will then review the proposed interdiction within 24 hours (excluding weekends and holidays/recess) and determine if a student should be removed from clinical care as well as the appropriate remediation. The Associate Dean for Clinical Services and the Associate Dean for Academic Affairs will meet with the student to discuss the recommendations for removal from clinic or appropriate remediation within 24 hours (excluding weekends and holidays/recess). The Office of Academic Affairs will also notify the Chair of the SPC and the Clinical Sciences Department Chair. A letter outlining the decision will be placed in the student's academic record.

The Associate Dean for Clinical Affairs will work with the Team Leader and administrative staff to review the students' clinical schedule and reschedule or re-assign patients to other providers, as appropriate, for the period during which the student is planned to be restricted from clinical care. The Associate Dean for Clinical Services (or designee), with input from the student's Team Leader, is the monitoring faculty for clinical interdiction and makes the final determination for readiness to re-enter clinical care. Clinical reassignment includes a designation of the academic status modification of Academic Probation.

As with remediation for didactic and simulation lab courses, successful completion of clinical retrainings, reassignments, and interdictions are required in order to pass the relevant clinical course.

## **23. Clinical Remediation Postdoctoral Students/Residents**

- a. ***Clinical Retraining.*** Clinical retraining is designed to assist postdoctoral students/residents 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, and 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. The Program Director issues clinical retraining. Postdoctoral students/residents 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. The Program Director will determine this, as applicable, on a case-by-case basis.



- b. *Clinical Reassignment.*** Clinical reassignment is designed to assist postgraduate students/residents 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 postdoctoral students/residents. 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).
- c. *Clinical Interdiction.*** Postgraduate students/ residents 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 Program Director for determination of clinical reassignment or clinical retraining.

**24. Professionalism.** The professional development of dental students is an essential part of dental education. The Honor Code, contained in Section VII of the Handbook, outlines the required and expected behavior of all students attending the SDM. The following section underscores the professionalism requirements and places certain aspects of professional behavior under the purview of Academic Performance Standards. Students are expected to meet the SDM standards of professional behavior as part of their professional development.

- a. *Grades.*** 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 of Academic Affairs/Associate Dean for Advanced Education (as applicable), in consultation with the Associate Dean for Admissions and Student

Affairs will determine if student unprofessional behavior will be reviewed by the SPC/AEC or the Honor Council.

- b. 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 policies, procedures, and/or protocols;
  - v. renders or attempts to render dental treatment without proper authorization or supervision;
  - vi. neglects or abandons the care of patients;
  - vii. does not comply with the SDM Honor Code section regarding appearance and/or demeanor; and
  - viii. does not comply with the SDM clinical protocols;
  - ix. is unprepared for clinical care and clinic sessions; and
  - x. unwilling to accept and incorporate feedback.
- c. Reporting Student Unprofessional Behavior.** Faculty, students, staff, and patients may report witnessed unprofessional student behavior to the Associate Dean of Academic Affairs or Associate Dean for Admissions and Student Affairs. The Associate Dean of Academic Affairs and the Associate Dean for Admissions and Student Affairs will meet and determine if the unprofessional behavior will be reviewed by the SPC or the Honor Council. Within clinical courses, unprofessional behavior may be addressed by clinical retraining or reassignment; repeated and/or egregious professional misconduct is also subject to review by the Honor Council.

#### **D. Involuntary 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 his/her permanent record. Notice and conditions of Academic Warning shall be recommended to the Dean by SPC/AEC and Associate Dean of

Academic Affairs/Associate Dean for Advanced Education (or designee) and department heads (or their designees). The SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) and department chairs (or 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 of Academic Affairs (or designee) or Program Director and Associate Dean for Advanced Education (or designee) (for postgraduate students) stating the reasons for the decision to withdraw from the 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. See UNLV's Cashiering & Student Accounts Refund and Withdrawal Policy at <https://www.unlv.edu/cashiering/refunds>.
3. **Academic Probation.** The SPC/AEC and Associate Dean of Academic Affairs/ Associate Dean for Advanced Education (or designee) shall recommend notice and conditions of academic probation and forward to the Dean of the SDM. Academic Probation is a formal notice to the student by the Dean (or designee) that his/her academic progress is deemed unsatisfactory. Grounds for Academic Probation include, but are not limited to, student has not satisfied the conditions of Academic Warning; or student has received a final course grade of F; or student has not satisfied stated program requirements. The Dean (or designee) shall provide the student, SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or 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 of Academic Affairs/Associate Dean for Advanced Education (or 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 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 of

Academic Affairs/Associate Dean for Advanced Education (or 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 of Academic Affairs/Associate Dean for Advanced Education (or designee) will notify the Dean (or designee) of a student's successful completion of the conditions of Academic Probation. The Dean (or 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 of Academic Affairs/Associate Dean for Advanced Education (or 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 designee) shall provide the student, SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) with written notification indicating all conditions of the action. Any student recommended for Repeating the Year shall meet with the Dean (or 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);
  - b. failure to meet the conditions of Academic Probation or Academic Warning;
  - c. failure to pass National Board Dental Examination; and
  - d. failure to satisfy stated program requirements.

Note: Failure to satisfactorily complete the requirements of *"Repeating the Year"* normally shall result in a recommendation for *"Academic Expulsion."*

- 6. Disciplinary Suspension.** A student found in violation of the [UNLV Student Conduct Code](#) or the SDM policies, rules, regulations, and/or procedures may lead to the termination of the student's status for a specified academic term or terms with possible reinstatement thereafter. The student will be notified, in writing, of any such suspension. Recommendations for suspension may be initiated by, but not limited to, academic faculty of the 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 Conduct Code violations or violation of the SDM policies, rules, regulations, and/or procedures have occurred.

- 7. Academic Suspension.** Academic Suspension is the result of unsatisfactory performance as deemed by SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) and approved by the Dean. It entails involuntary removal from the 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. The SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) shall determine the recommendation for Academic Suspension and the conditions of Academic Suspension and submit to the Dean for review and action.

The Dean or Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) shall 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; and 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, failure to satisfactorily pass all required courses; failure to meet the conditions of Academic Probation or Academic Warning; failure to pass NBDE; failure to meet the conditions related to an authorized leave of absence; and failure to satisfy stated program requirements.

- 8. 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, the 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. Regarding Academic Expulsion from the SDM for an indefinite period, any consideration for reinstatement requires that any imposed conditions be successfully completed and that the student reapply for admission to the SDM in accordance with the rules and regulations pertaining to the normal admissions process of the school.
- a. Recommendation.** A recommendation for Academic Expulsion shall be submitted by the SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) to the Dean for review and action. The Dean or Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) shall meet with the student to discuss the recommendation for Academic Expulsion and

conditions for reinstatement; and provide the student with written notification of the Academic Expulsion indicating related conditions.

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

- i. failure to satisfactorily pass all required courses;
- ii. failure to satisfactorily complete the requirements of a school year within two (2) consecutive academic years;
- iii. failure to complete the DMD Program Degree requirements within six (6) academic years of initial matriculation;
- iv. failure to meet the conditions of Academic Probation or Academic Warning;
- v. failure to meet the conditions of Special Program Status;
- vi. failure to successfully Repeat the Year;
- vii. unauthorized withdrawal from a course or the program;
- viii. failure to satisfactorily complete the first two (2) years of the DMD Program within three (3) academic years;
- ix. failure to satisfactorily complete the last two (2) years of the DMD Program within three (3) academic years;
- x. failure to meet conditions of Academic Suspension; and
- xi. exceeding the maximum number of courses that may be remediated.

**9. UNLV Health Withdrawal Policy (Voluntary).** A students may apply for a Voluntary Health Withdrawal (a separation of the student from the university) if they experience medical or psychological conditions that significantly impair their ability to function successfully and safely in their role as a student. Visit the [Voluntary Health Withdrawal](#) webpage for more information.

**10. Emergency Removal Clause.** In accordance with University policy, a student may be involuntarily withdrawn from the program if it is determined to be in the best interest of the student and/or the University community. For more information, please visit <https://www.unlv.edu/about/policies/current-policies> to review the Health Withdrawal Policy (Student).

**11. Administrative Drops.** If a student does not comply with the SDM policies, rules, regulations, 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 can be found on the [UNLV Academic Policies](#) webpage.

**E. Academic Appeals Process.** All students have the right to appeal a grade or academic decision made by a faculty member, or the Associate Dean of Academic Affairs.

**1. Academic Appeals Committee (AAC).** AAC is responsible for hearing appeals relating any academic decision made by the SPC, Associate Dean of Academic Affairs and/or AEC. The AAC shall consist of three (3) faculty members appointed by the Dean (or designee). The Dean (or designee) will appoint the chair of the AAC. The Associate Dean of Academic Affairs (or designee) and Associate 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 working days, which excludes weekends, recess, and/or holidays.** The student must submit an appeal in writing to the faculty member no later than five (5) working days after the UNLV Registrar posts grades. The faculty member must respond to the student's appeal in writing within five (5) working days after receipt of appeal. If the faculty member determines that the original grade (or academic decision) is correct, the student may then appeal in writing to the faculty member's Department Chair/Program Director (as applicable) within five (5) working days 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) working days. If the student wishes to appeal the Department Chair/Program Director's decision, they must submit the appeal in writing to the SDM AAC through the Dean's Office within five (5) working days after receiving the Department Chair/Program Director's decision. The AAC will meet and prepare a written recommendation regarding the student's appeal and forwarded to the Dean within ten (10) working days after receiving the student's 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 (5) working days after receiving the AAC's recommendation. **The decision of the Dean in all review matters shall be final.**

**3. Appeal of Mandated Repeat of Course or Academic Year, Academic Suspension, or Academic Expulsion (Dismissal).** In situations where a student does not meet the criteria for satisfactory progress, the Dean (or designee) will consider all evidence and recommendations from the SPC/AEC and Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or designee) prior to meeting with the student and issuing

a written decision. **Please note calculations of timeframes are made in working days, which excludes weekends, recess, and/or holidays.**

A student may appeal the Dean's (or designee's) decision. Pre-doctoral students/postgraduate students must submit their appeal in writing through the Dean's Office to the AAC within five (5) working days of receiving the written decision from the Dean (or 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) working days 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 (5) working days after receiving the AAC's recommendation.

**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. An advisor is NOT permitted to speak on behalf of the student and 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).

## **F. Voluntary Academic Status Modifications**

1. **Program Withdrawal.** Students who seek to voluntarily withdraw from the SDM must submit a written letter to the Associate Dean of Academic Affairs/Associate Dean for Advanced Education (or 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. Voluntary Leave of Absence

- a. ***Student Request.*** A student who seeks to voluntarily leave the program for a specified period shall make such request in writing to the Dean of the SDM and include reasons supporting the request; provide specific information as to the desired date of effect and duration; and accompanied by evidence that all obligations to the SDM and UNLV have been satisfied.
  - b. ***Conditions of Approval.*** 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 duration of approved leave of absence; specific conditions for reinstatement and re-entering level into the program (following consultation with the SPC/AEC [as applicable]); status of the student if the approved voluntary leave of absence duration is exceeded; and all missed time and required work of postgraduate students must be reconciled with the Program Director.
3. **Reinstatement after Withdrawal or Absence.** the 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 of Academic Affairs/Associate Dean for Advanced Education (or 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. All missed time and required course work must be made up in accordance with program requirements.

**III. SDM Computer Policy.** Working within the guidelines as outlined on the [UNLV Office of Information Technology \(OIT\)](#) policies and procedures, the [NSHE System Computing Services Policy](#), and the [SDM IT Policies](#) for using networked resources under the guidance of the SDM are as follows:

- A. Purpose.** The 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 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 SDM IT infrastructure through good citizenship and legal and ethical use.
- B. 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 the SDM connects. All IT infrastructure strategic decisions shall be in concert with the appropriate leadership in the affected areas. UNLV OIT provides management and operation of most of the IT network infrastructure in partnership and cooperation with the major divisions UNLV, one of which is the SDM. All the SDM IT infrastructure designs will be coordinated with UNLV OIT. The owner of a the 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.
- C. Policy Statement.** Use of the SDM IT infrastructure is a revocable privilege granted to those with an official affiliation with the 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. The 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 the SDM to fulfill its mission.
- D. 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 the 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. The 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 the SDM IT staff to access any device connected to the 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. The 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 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 SDM IT infrastructure through good citizenship and legal and ethical use.

#### **E. Acceptable Use Statement**

All users of the IT infrastructure are expected to exhibit responsible behavior and shall:

1. Comply with all federal and state laws, NSHE, UNLV and the SDM policies, rules, and/or regulations, terms of computing contracts, and software licensing terms.
2. Obtain authorization to use UNLV and the SDM computing resources.
3. Be held responsible for the use of their assigned user ID. Sharing of user IDs and passwords is prohibited. See [UNLV OIT Policies and Standards](#).
4. Obtain proper authorization prior to accessing or sharing UNLV or the SDM data.
5. Actively participating and cooperate with IT 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.
6. 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.

**F. All users of the IT infrastructure shall NOT.**

1. 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.
2. Alter, change, reconfigure user account settings including, but not limited to security rights and user accounts.
3. Modify PC or laptop host names or domain/work group membership.
4. Uninstall, modify or install software, which conflicts with the existing corporate anti-virus software.
5. Modify, alter or re-locate any the SDM IT equipment including but not limited to staff and operator PCs, printers, and computer peripherals such as mice, desktop switches, and network patch cables.
6. Use computing resources in a wasteful manner that creates a direct cost to UNLV and/or the 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.
7. Use of IT resources for personal monetary gain or commercial purposes not directly related to UNLV and/or the SDM business or for functions that are not related to one's job.
8. Install, copy, or use any software in violation of licensing agreements, copyrights, or contracts.
9. Send copies of documents or include the work of others that are in violation of copyright law in electronic communications.
10. 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.

11. Harass, intimidate, or threaten others through electronic messages.
12. Construct a false communication that appears to be from someone else.
13. 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.
14. Send, forward, or reply to E-mail chain letters.
15. "Reply to all" mass E-mail mailings.
16. Retransmit virus hoaxes.
17. 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.

**G. E-Mail USAGE.** Any information regarding your ACE Account or Rebelmail can be found at [UNLV Office of Information Technology](#).

**H. Enforcement of Policy.** Non-compliance with any UNLV IT policies may result in disciplinary action up to and including termination of employment, dismissal from an academic program, and civil or criminal liability.

**I. Non-SDM Equipment.** Non-UNLV equipment may be used by a visiting presenter or when the 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.

**J. Copyright and Fair Use Statement.** The University requires all members of the University Community to become familiar 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 the UNLV Copyright website. The NBDE are administered and copyrighted by the Joint Commission on National Dental Examinations (JCND) of the American Dental Association (ADA). Individuals, who obtain, share, solicit, sell and/or purchase unreleased test questions violate the copyright of the JCND. "Unreleased" examination items represent

confidential material obtained without authorization of the JCND E through methods such as memorization, recording, copying, etc. Use of sharing of confidential examination materials violates examination regulations.

- K. Laptop Rebuild Policy.** Starting Fall 2015, the SDM Administration instituted a laptop operating system rebuild policy. The policy pertains to laptops requiring an operating system rebuild due to infection from a virus/malware/spyware. 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. For more information, the [SDM Laptop Rebuild Policy](#) is located in SharePoint.

**IV. SDM Professional 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 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.** Good personal and oral hygiene is expected. Appropriate hand hygiene guidelines should be followed as outlined by the [Centers for Disease Control and Prevention \(CDC\) Hand Hygiene in Healthcare Settings](#). This includes not wearing artificial fingernails or extenders during pre-clinical or clinical activities so that glove integrity may be protected; keeping natural nails tips less than 1/4-inch long; and ensuring that nail polish is neat and not chipped. Hair, including facial hair, must be clean, neat, and well-groomed or covered. 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. **All clothing must be clean and wrinkle-free.** Only non-dangling earrings are acceptable in pre-clinical laboratories and patient care (clinic) environments. 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.** A standardized uniform policy has been established for scrubs. Each class will be assigned a scrub color as outlined below.

1. Class of 2020 – Tan
2. Class of 2021 – Black
3. Class of 2022 – Maroon
4. Class of 2023 – Grey

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]. T-shirts may be worn under scrub tops if they are white or a complimentary color and are logo free. Knee-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. Gowns must be changed when they are visibly soiled and a new gown must be worn for each patient. 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.** Official white coats must be worn to all clinical extramural experiences unless otherwise instructed. White coats must be worn over

clean, matching scrub sets. Clean and conservative shoes, including athletic shoes, are considered appropriate footwear for these experiences.

- D. Attire for all other Settings within the Academic Environment.** Clean, unwrinkled matching scrub tops and scrub pant. Clean and conservative shoes, including athletic shoes. 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 the SDM logo apparel will be permitted. Students are expected to demonstrate good judgment and professional taste. As a 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 of Professional Dress Code.** 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 Honor Code and/or UNLV Student Conduct 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 always expected and that continuing non-professional behavior may result in a referral pursuant to the Honor Code and/or UNLV Student Conduct Code.



**V. Access to Campus Buildings.** Permitting access to and use of the 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.

**A Building**

M-F 6:30 am–9pm  
Sat-Sun 8 am–5 pm

**B Building**

M-Sat 6am-11:59pm  
Sun 9am-10pm

**D Building**

M-Sun 7am-6:30pm

\*Times might change during exam weeks or recess/holidays and upon approval by the Dean.

**VI. University Policies and Resources.** The SDM complies with the policies outlined by the Office of Student Conduct relative to the [UNLV Student Conduct Code](#) and [UNLV Student Academic Misconduct](#), and other student policy enforcement as published and revised by the University. The [UNLV Sexual Harassment Policy](#) can be found on the UNLV website.

**A. Financial Aid.** [UNLV School of Dental Medicine Office of Student Financial Aid & Scholarships](#) 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. Table 1 outlines the expenses anticipated for those in the DMD program. Table 2 outlines the expenses anticipated for those in the DDS program.

**Table 1. UNLV School of Dental Medicine (DMD Pre-Doctoral Program)**

Off-Campus	Annual Nevada Resident	Per Semester for the Year	Per 12 month Period	Annual Out-of-State	Per Semester for the Year	Per 12 month Period
Tuition	\$59,650 .00	\$19, 883 .00	\$0.00	\$99,385 .00	\$33 ,128 .00	\$0.00
Books	\$6,918.00	\$2,306.0 0	\$576.50	\$6,918.00	\$2,306.00	\$576.50
Room	\$16,500.00	\$5, 500 .00	\$1,375.00	\$16,500.00	\$5, 500 .00	\$1,375.00
Board	\$6, 534 .00	\$2, 178 .00	\$544.50	\$6,534 .00	\$2, 178 .00	\$544. 50
Personal	\$ 6,150 .00	\$ 2 ,050 .00	\$ 512.50	\$ 6,150 .00	\$ 2 ,050.00	\$ 512 .50
Transportation	\$3,597 .00	\$1,199 .00	\$299.75	\$3,597.00	\$1,199 .00	\$299.75
Loan Fees	\$ 2,055 .00	\$685 .00	\$0.00	\$ 2,055.00	\$685 .00	\$0.00
Total	\$102,704.00	\$34,235.00	\$0.00	\$142, 439.00	\$47,480.00	\$0.00
Living Expenses	\$43,054 .00	\$14,351.00	\$ 3,587.75	\$43, 054 .00	\$14, 351.00	\$ 3, 587.75
* Please note these costs are for an average dental student living off campus. Total includes mandatory health insurance and computer purchase allowance.						

**Table 2. UNLV School of Dental Medicine (DDS Advanced Standing Program)**

Off-Campus	Annual Nevada Resident	Per Semester for the Year	Per 12 month Period	Annual Out-of-State	Per Semester for the Year	Per 12 month Period
Tuition	\$105,373.00	\$ 35,124.00	\$0.00	\$105,373.00	\$ 35,124.00	\$0.00
Books	\$6,918.00	\$2,306.00	\$576.50	\$6,918.00	\$2,306.00	\$576.50

**Table 2. UNLV School of Dental Medicine (DDS Advanced Standing Program) (Cont.)**

Off-Campus	Annual Nevada Resident	Per Semester for the Year	Per 12 month Period	Annual Out-of-State	Per Semester for the Year	Per 12 month Period
Room	\$16,500.00	\$5, 500.00	\$1,375.00	\$16,500.00	\$5,500.00	\$1,375.00
Board	\$6, 534.00	\$2, 178.00	\$544.50	\$6,534.00	\$2, 178.00	\$544.50
Personal	\$ 6,150 .00	\$ 2 ,050.00	\$ 512.50	\$ 6,150.00	\$ 2 ,050.00	\$ 512.50
Transportation	\$3,597.00	\$1,199.00	\$299.75	\$3,597.00	\$1,199.00	\$299.75
Loan Fees	\$ 5,001.00	\$1667.00	\$0.00	\$ 5,001.00	\$1667.00	\$0.00
Total	\$150,073.00	\$50,024.00	\$0.00	\$150,073.00	\$50,024.00	\$0.00
Living Expenses Budget	\$44,700.00	\$14,900.00	\$ 3,725.00	\$44,700.00	\$14, 900.00	\$ 3,725.00
* Please note these costs are for an average dental student living off campus. Total includes mandatory health insurance and computer purchase allowance.						

- 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](#). For more information about the FSA ID, please visit their [website](#). UNLV's priority financial aid consideration deadline is November 1<sup>st</sup> of each year. You may still apply for financial aid after November 1<sup>st</sup>, 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 and enroll in Direct Deposit.
- 3. Award Notification.** Fall 2019, Spring 2020, and Summer 2020 Applicants: Students who complete the 2019 -2020 FAFSA will not be notified of their financial aid award using the UNLV issued Google E-mail account until April 1, 2019. 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 the [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 UNLV’s Office of Financial Aid & Scholarships at UNLV. Receiving aid at another institution during the same academic year may impact you awards at UNLV, and 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 Senior Executive Director of Student Finance, Dr. Christopher A. Kypuros at (702) 774-2526 or via email at [christopher.kypuros@unlv.edu](mailto:christopher.kypuros@unlv.edu). You may also contact the main [UNLV Office of Financial Aid & Scholarships](#) for assistance at (702) 895-3424. Federal Direct Loan Programs can be found on the [UNLV Office of Financial Aid and Scholarships](#).

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 SDM. 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, and gender. Additional scholarship opportunities can be found by visiting UNLV SDM [Scholarship Overview](#). In addition, other non-university scholarship opportunities are posted below throughout the year. Dr. Christopher Kypuros, Senior Executive Director of Student Finance, will send an email out annually to all students to invite them to apply for scholarships that are awarded by the institution.
  6. **Financial Aid Advice.** Develop a spending plan to accommodate daily, weekly, monthly, quarterly, and annual expenses. Evaluate spending plan for items that can be reduced or eliminated. Keep expenses to the bare minimum while in school. Eliminate or reduce consumer debt as much as possible. Do not take on any new consumer debt that requires payment while in school. Understand terms and conditions of your loans and expected repayment amounts. Borrow as little as possible. Review student loan borrowing history online through the [National Student Loan Data System](#) at least two times a year. Obtain and review free credit reports from each of the three major credit bureaus each year through [Annual Credit Report.com](#).
- B. Health Services.** The [UNLV Student Recreation and Wellness Center \(SRWC\)](#) provides ambulatory health care, health education, immunizations, pharmacy, laboratory, testing, and fitness testing.
- C. Health Insurance.** The Student Health Insurance Plan was developed specifically for the 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. Please refer to the [Student Health Insurance FAQs page](#) for

current semester insurance rates for international students, graduate students, law students, and nursing graduate students, and current annual rates for dental students. Professional students will be automatically charged the semester insurance rates unless a health insurance fee waiver is requested and proof of alternate insurance coverage is provided. International, graduate, and professional students must submit the [UNLV online health insurance waiver](#) form and proof of alternate coverage by the semester deadline to qualify for a waiver.

- D. Immunizations and Tuberculosis (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 yourself, colleagues and patients, prior to enrollment, students are required to provide evidence of immunization or immunity against these diseases. The SDM complies with the [Nevada Administrative Code \(NAC\)](#) in relation to the State of Nevada vaccination requirements for university students.
- E. 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. For list of services and counseling appointment times/hours, please visit the Student Recreation and Wellness Center webpage or call 702-895-3627.
- F. UNLV 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 for Dental Medicine](#).
- G. Parking and Transportation Services.** 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. Students are required to purchase parking permits before school begins (including orientation week). Students are encouraged to purchase their parking permit at the [Parking Portal](#). Students are required to park in the appropriate designated student parking spaces. However, After 5 p.m., students may park in faculty/staff spaces. However, students are prohibited from parking in patient designated spaces. New parking permits must be purchased each year; annual fees are set by category of user and subject to increase. The following are the 2017-2018 parking permit fees. For parking permit fees, visit the [UNLV Parking & Transportation Services website](#).

- H. After Hours Safety Information.** If you would like an escort to your vehicle after dark, you may contact UNLV Police Dispatch at call (702) 895-3668 and a police officer will walk you to your vehicle for assistance. Please visit the [Police Services website](#) for more information about staying safe on campus after dark. It is recommended that all students update your contact information in [RebelSAFE Alert System](#) and download the application on your phone. This can be used at any time to contact UNLV Police Services.
- I. Campus Recreational Services.** The [UNLV Campus Recreational Service](#) provides services from personal training, group exercise, intramural sports, swim lessons, and open recreational opportunities. These services are available to UNLV students who are registered for at least 4 or more credit hours during the current semester.
- J. Identification 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. Each enrolled student's first RebelCard is free with photo identification, such as a driver's license or passport. Replacement cards cost \$20.00. Cards can be obtained at Moyer Student Union, Room 160, (702)-895-2351, or on the [Rebel Card Website](#). In addition, all students, faculty, and staff are issued the SDM ID badge. This badge **MUST** be worn at all times on campus and **MUST** be visible.
- K. Student Organizations.** There are many opportunities for students to become involved in student activities. A list of student organizations at the SDM are located on the [SDM website](#).
- L. International Programs.** The Office of International Programs (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. UNLV faculty, staff, and student activities with an international component, which include must contact the UNLV Office of International Programs during the initial planning stages for information regarding NSHE and UNLV policies, rules, regulations, and procedures for foreign study, research, or travel. International Programs is located in CBC B 325 or can be reached at (702)895-3896.
- M. UNLV Office of Diversity Initiatives.** The UNLV Office of Diversity Initiatives provides leadership and support for UNLV's diversity mission: to nurture equity, diversity, and inclusiveness that promotes respect, support, and empowerment. It is imperative that the SDM reflects the community that we serve. Diversity makes our university vibrant and more responsive to the needs of our students and community. UNLV and the SDM are committed to providing an inclusive and humane environment where all individuals feel valued, respected, and affirmed. For more information please review the information on the UNLV Office of Compliance webpage or contact Dr. Kypuros (702-774-2526), who serves as Senior Executive Director Professionalism, Inclusion and Student Finance of Financial including Deputy Coordinator of Title IX.

## VII. SDM STUDENT CODE OF HONOR AND PROFESSIONAL RESPONSIBILITY (referred to hereinafter as the “*Honor Code*”)

- A. Introduction and General Information:** The professional development of pre-doctoral (DMD/DDS) and postgraduate dental students is an essential part of dental education and the dental profession. Students are, at all times, expected to meet the *Honor Code* Standards of Professional Behavior as part of their professional development. The SDM complies with the policies outlined by the [Office of Student Conduct](#) relative to the [UNLV Student Conduct Code](#), [UNLV Student Academic Misconduct Policy](#), and other student policy enforcement as published and revised by the University. The *Honor Code* applies to all students, pre-doctoral (DMD/DDS) and postgraduate, or any individual enrolled at the SDM for academic credit (certificate programs). 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 impart and promote the qualities and characteristics contained within the Dentist’s Pledge (in the preface of this Handbook), which each makes upon matriculation to dental school, again at the White Coat Ceremony, and lastly upon graduation. No form of academic dishonesty is acceptable. While preservation 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. Examples include, but are not limited to, cheating on an examination; stealing examination questions; substituting one person for another at an examination; falsifying data; using another person’s password to access data, destroying; tampering with, or stealing a computer program or file; and plagiarizing (using as one’s own the ideas or writings of another). As future dental 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 the SDM must comply with the *Honor Code* reproduced in its entirety in this Handbook.
- B. Professional Conduct Philosophy:** Acceptance into the 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 and welfare of the public. The privilege of admission to the pre-doctoral programs (DMD/DDS) or postgraduate programs comes with a unique set of responsibilities not only to fellow students, but also to the SDM, to the dental profession, and to the public. The dental profession demands the highest degree of trustworthiness, honesty, and integrity. All students of SDM are bound to observe principles that reflect the same high standards that govern the practice of dentistry. Students must abide by long-established principles of honor and integrity of the profession. This *Honor Code* establishes standards for student professional responsibility and sets forth conduct that is unacceptable and prohibited. The standards of conduct in this *Honor Code* are in addition to standards set forth in the [UNLV Student Conduct Code](#), [UNLV Student Academic Misconduct Policy](#), and the SDM Handbook. Violations of the *Honor Code* will be subject to the procedures and sanctions outlined in the *Honor Code*. The SDM provides an environment that fosters respect, tolerance, understanding, and concern for others by



mentoring and developing interpersonal skills necessary for learning, for patient care, and for making meaningful contributions to the profession. 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 the SDM community and share in its mission, vision, values, and goals. Upon matriculating at the SDM, students accept the responsibilities set forth by this *Honor Code*, including the responsibility to participate in its implementation. 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 Office of Student Conduct for alleged violations of the [UNLV Student Conduct Code](#) or the [UNLV Student Academic Misconduct](#) policies.

- C. SDM Honor Council:** The Honor Council is a committee that is comprised of faculty and student representatives charged with ensuring a fair disciplinary process for all students. The Honor Council has the authority to assess, investigate, and processes referrals relating to reported incidents of *Honor Code* violations.
- I. Composition of the Honor Council:** The Honor Council shall consist of an Honor Council chair and four (4) faculty members (3 faculty members from the pre-doctoral programs and 1 faculty member representing the postgraduate/certificate programs) appointed by the Dean (or designee). The Honor Council chair shall preside over all Honor Council meetings. The Honor Council chair and faculty composition remain the same regardless of whether the allegations relate to a pre-doctoral or postgraduate student; however, the student membership will change as outlined below:
- a. Pre-doctoral Programs (DMD/DDS):** Eight (8) pre-doctoral students (2 voted in from each class) will serve as regular and alternate members. All student members will attend the first meeting of any incident; however, an alternate will only serve if there is an identified conflict of interest of a regular member. Student members will be voted in during their first year (DS1) and remain on the Honor Council until they graduate or voluntarily resign their position.
  - b. Postgraduate Education Programs:** The postgraduate student membership will be comprised of one (1) representative from each of the postgraduate/certificate programs [with no less than a total of four (4) postgraduate students] and will be appointed by the Associate Dean of Advanced Education (or designee).
  - c. Substitution of Honor Council Members:** Where circumstances warrant, the Dean (or designee) may replace an Honor Council faculty member by appointing a substitute member of the SDM faculty or a UNLV faculty member from outside the SDM. Should a situation arise during the period following graduation until the new pre-doctoral class begins or a new postgraduate class begins, the Associate Dean of Academic Affairs (or designee) will appoint two (2) pre-doctoral student members (one (1) regular member and one (1) alternate member) to serve on the Honor Council. These



students may be selected from either the previous graduating class or the upcoming DS4 class. Representation from the postgraduate programs will be appointed by the Associate Dean of Advanced Education (or designee).

**II. Honor Council Chair:** The Honor Council Chair is individual responsible for organizing, scheduling, presiding, and providing oversight over all Honor Council meetings and/or hearings. In this role, the Honor Council Chair is responsible for sending all notifications in accordance with the *Honor Code* Procedure, gathering and maintaining all information including case files and relevant documentation relative to any reported incident of the *Honor Code*.

**III. Advisor(s):** The Associate Dean of Academic Affairs (or designee) serves as 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 designee) serves as an advisor to the Honor Council and is not a voting member. The Associate Dean for Admissions and Student Affairs (or designee) serves as an advisor to the student(s) and is not a voting member.

**IV. Voting Rights:** Each of the four (4) faculty members and the four (4) pre-doctoral regular student members (or alternate if replacing a regular member) are voting members and each has one (1) vote. In the case of postgraduate programs, each postgraduate student is a voting member and has one (1) vote. The Honor Council Chair and all advisors are non-voting members.

**D. Conduct Prohibited:** The [UNLV Student Conduct Code](#) and [UNLV Student Academic Misconduct](#) policies set forth prohibited conduct, which may result in disciplinary action, including expulsion. Examples of conduct prohibited include, but not limited to the following, and may result in disciplinary action, including expulsion, from the SDM:

**1. Academic Misconduct.** Includes but not limited to:

- a. **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
- b. **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.

**2. Misrepresentation.** Includes, but is not limited to:

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

- b. Falsely representing one's qualifications on a resume, in an interview, or in an application for employment or subsequent academic studies;
  - c. Altering patient records, transcripts, or other university documents;
  - d. Falsely signing a faculty member's name or another student's name;
  - e. Falsely authorizing an entry in the patient's record through use of a faculty's name or authorization code;
  - f. Knowingly making a false accusation that a student committed acts that may be in violation of the *Honor Code*, or
  - g. Any misrepresentation by which the student gains or attempts to gain an unfair advantage from the university, faculty, students, or staff.
3. **Wrongful use or procurement of goods, services, or information.** Includes, but is not limited to stealing, destroying, or damaging university property and/or the property of other students, including laboratory projects, clinical instruments, or supplies; or unauthorized use of on-line resources.
  4. **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.
  3. **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 Associate 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.
  4. **Failure to Report Violations of the *Honor Code*:** Each member of the University and the SDM community, including students, have the responsibility to report incidents they reasonably believe violate this *Honor Code* including, but is not limited to, witnessing or hearing about some conduct of another student.
  5. **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.

6. **Unlawful Practice of Dentistry:** Unlawful practice of dentistry in accordance with the Nevada State Board of Dental Examiners regulations and failure to abide by the SDM Clinical policies, procedures, or safety/compliance protocols.
- E. **Reporting Incidents of Potential *Honor Code* Violations:** Any person (including students, faculty, staff, and/or patients of the SDM) knowing of an incident that may potentially constitute a violation of the *Honor Code*, the [UNLV Student Conduct Code](#) and/or [UNLV Student Academic Misconduct](#) policies, must report the incident to an Honor Council Faculty Representative, the Associate Dean of Academic Affairs (or designee), the Associate Dean for Admissions and Student Affairs, Program Director, or any member of the SDM faculty. Any SDM faculty who receives a reported incident of a potential violation must report them to the Associate Dean of Academic Affairs (or designee). **Reports must be made in writing, dated, and signed by the person observing the possible Honor Code violation.** The report should provide, to the extent possible, the date, time, place, name of person(s) involved, and the circumstances surrounding the potential violation. In addition, the report should include name(s) of any person(s) who may have witnessed the potential prohibited conduct. Once the report is submitted in writing, the person filing the report should be cautioned from speaking about the incident to students, faculty, staff, and/or patients until a disposition is rendered regarding the reported incident other than to members of the Honor Council during the investigation or when appearing at an Honor Council hearing.
- F. **Investigation and Notification of a Reported Incident:** The Associate Dean of Academic Affairs (or designee) upon receipt of an incident report that may constitute a potential violation of the *Honor Code* will immediately refer the matter to the Honor Council Chair, who will schedule an initial meeting in accordance with stated timelines within the *Honor Code*. All documentation provided by the Honor Council Chair to the Honor Council during all meetings is confidential. Members are required to maintain confidentiality of all documents and information regarding each reported incident. The Honor Council Chair is charged with maintaining the official file on the reported incident including all documentation about, concerning, and/or relating to the reported incident until the matter is resolved.
1. **Initial Meeting of Honor Council:** Upon receipt of a written report, the Chair (or designee) will convene a meeting of the Honor Council to review the report. **Please note calculations of timeframes are made in working days, which excludes weekends, recess, and/or holidays.** This initial meeting will be convened within five (5) working days of receipt of the report. The Honor Council will review the incident and determine if a formal investigation is warranted. If not, the Honor Council Chair will notify the Dean in writing as to why there was no formal investigation. The incident will be closed and filed. If a similar incident is reported in the future, a review of previous cases will be conducted to ascertain whether there is a pattern or trend developing.

If the Honor Council determines an investigation is warranted, a student member from within the Honor Council will be elected by the members to serve as Vice Chair throughout the disposition of this incident. The Honor Council Chair (and student

member) will conduct a formal investigation, schedule subsequent meetings, provide notifications of formal hearings, and complete all written communication(s), where applicable.

- 2. Notice of Alleged Honor Code Violation:** The Honor Council Chair will also notify the student(s) named in the incident that a report has been submitted to the Honor Council and provide a copy of the report to the student(s). Within three (3) working days of initial meeting of the Honor Council, the Chair shall provide to the student written notification of reported incident of potential Honor Code violation. The Chair will work with the Office of Admissions and Student Affairs to ensure written notice is provided to, and signed for, by the student in accordance with the above time period. 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 reported incident. The written notice will describe the potential violation(s), including any applicable reference to the SDM Honor Code, the UNLV Student Conduct Code, and/or UNLV Student Academic Misconduct policies.
- 3. Investigation of Honor Code Violation:** The Chair and Vice Chair will conduct an initial investigation. The Chair and Vice Chair have the authority to contact and meet with any persons believed to have information relevant to the reported incident. During this initial information gathering process, a “No Contact Order” may be requested or required if it is determined by the Honor Council, the Dean (or designee) , or Associate Dean of Academic Affairs (or 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. All documentation related to the investigation should be kept in a secure location in accordance with [NSHE Procedures and Guidelines Manual, Chapter 18](#). In cases resulting in expulsion, records will remain permanently; in all other disciplinary cases, records should be maintained for FY graduation + 7 years or FY last term of attendance + 7 years).

The Honor Council will have ten (10) working days from the date of their initial meeting to complete their investigation relating to the reported incident and make a recommendation to the Dean (or designee). The Honor Council will convene to evaluate all information obtained during the investigation. If a formal hearing is not deemed necessary, the Chair will notify the Dean in writing as to why there was no formal hearing. The Dean has the authority to ask for a continued investigation and/or a formal hearing. If the Dean agrees with the Honor Councils recommendation, the incident will be closed and filed. If a similar incident is reported in the future, a review of previous cases will be conducted to ascertain whether there is a pattern or trend developing. If a formal hearing is deemed necessary, the formal hearing process set forth below shall apply.

- 4. Notice of Formal Hearing:** If a formal hearing is warranted, the Chair shall prepare and provide a written notice to the student(s) named in the reported incident, providing a minimum of ten (10) working days prior to the hearing date. The notice shall include the date, time, and place of the hearing; the potential violation(s), including any applicable reference to the *SDM Honor Code*, [UNLV Student Conduct Code](#), and/or [UNLV Student Academic Misconduct](#) policies; name of the individual who reported the incident of a potential Honor Code violation; specific details, to the extent possible, of the time, place, person(s) involved and circumstances of alleged prohibited conduct; names of witnesses to the alleged prohibited conduct. The notice shall also outline the student's rights, which include the right to bring witnesses and provide documentary evidence at the hearing; to review and examine evidence obtained during the investigation, which will be part of the hearing file; to question any witness called, and to have a single advisor present (e.g. an attorney, family member, fellow student, or faculty member).

The notice should also contain the date by which the Honor Council Chair and the student(s) must exchange with each other a written list of witnesses each intends to call at the hearing and a list of documents that each intends to introduce at the hearing. This exchange shall occur at least five (5) working days prior to the hearing. The student(s) named in the reported incident must also provide the Honor Council Chair of copy of any documents that are not already included in the hearing file. Notices shall be either delivered directly to the student(s) named in the reported incident or sent by certified/registered mail to the mailing address on file with the SDM. Notices sent by mail are considered delivered when sent, provided three (3) additional working days are added to the ten (10) day time period set forth for minimum notice.

**5. No Communications outside Honor Council Meetings and/or Hearings**

Members of the Honor Council shall not have any communication, oral or written, with anyone outside the Honor Council meetings and/or hearings regarding any Honor Council matter including with any decision makers (e.g. Dean, UNLV Vice-President of Student Affairs, UNLV Appeal Panel members). This mandate is to ensure the confidentiality of all matters and to preclude any actual and/or perceived attempt to influence, directly or indirectly, the outcome of any Honor Council matter. However, this does not include scheduling and status inquiries or requests for information that are procedural in nature.

- G. Formal Hearings:** The Honor Council Chair will preside over all hearings unless there is a perceived conflict of interest. In the case of a conflict of interest, the Dean (or designee) will appoint another academic or administrative faculty member to preside over a hearing. The Honor Council Chair and the student(s) named in the reported incident are responsible for presenting their respective information including witnesses and evidence in relation to the reported incident of potential *Honor Code* violation. A single hearing may be held for more than one student charged in cases arising out of a single or multiple occurrences, however each charged student retains the right to have his/her case heard individually. Unless

otherwise agreed upon by the Chair and the charged student, there will be a 15-minute timeline placed on any witness.

The Honor Council Chair shall present an opening summary statement of the evidence in support of the reported incident first, after which the charged student will present an opening summary statement of his/her side of the case. This will be followed by presentation of witnesses and/or documentation by the Chair. The charged student will then have an opportunity to examine all witnesses and any evidence that is presented. After, the student will have the opportunity to present witnesses and/or documentation to the Honor Council in his/her support. The voting members of the Honor Council will have the opportunity to examine all witnesses (including the students named in the reported incident) and any evidence presented.

The student(s) named in the reported incident have the right to be assisted by a single advisor of their choosing, at their own expense. Individuals selected as an advisor by the student(s) named in the reported incident cannot also be called as a witness in the same case (e.g., faculty member or fellow student). If any student requests an advisor, they are required to complete and sign a FERPA Privacy Waiver. Advisors may also be required to sign a confidentiality agreement. Advisors (on either side) are NOT permitted to speak during the hearing. Should an advisor have a question, they may ask for a recess or submit the question in writing to an honor council member or charged student directly.

In situations where the reporting individual is present as a witness, they have the right to be assisted by a single advisor of their choosing, at their own expense. If any questions directed toward the witness from the charged student are not relevant to the allegations, the Chair may ask for clarification as to the question's relevance to their defense. If after hearing the student(s)' response, the Chair shall decide whether or not to allow the question to be presented to the witness.

An audio 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 part of the Honor Council file in accordance with [NSHE Procedures and Guidelines Manual, Chapter 18](#). Upon written request by the charged student, a copy of the audio tape shall be made available to the student, at the student's expense, by the Associate Dean of Academic Affairs (or designee), within ten (10) working days of the request, subject to and in accordance with FERPA policies. Confidentiality of recordings from closed hearings shall be maintained by all parties and their representatives. All hearings are closed unless the charged student requests an open hearing and such request is approved by the Dean (or designee). *Relaxed evidentiary standards apply in all hearings, as they are not legal proceedings.*

- 1. Determination by Honor Council:** The Honor Council may consider all evidence that is relevant to the reported incident. All findings of fact, recommendations, and decisions must be based solely on the information made available for use at the hearing, including all information made available to the charged student as part of the Honor Council

hearing file. 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 potential violation(s) of the *Honor Code*, the [UNLV Student Conduct Code](#), and/or [UNLV Student Academic Misconduct](#) policies. The Honor Council may affirm by simple majority vote that the student is or is not responsible for any violation(s) on the basis of whether it is more likely than not that the student violated provisions of the Honor Code, the [UNLV Student Conduct Code](#), and/or [UNLV Student Academic Misconduct](#) policies. The vote will be conducted by secret ballot. The Honor Council, via the Chair, shall prepare a written recommendation, which may include council member(s) dissenting views to the Dean (or designee) within five (5) working days of the conclusion of the formal hearing. The Honor Council's recommendation may also include, but not required, a recommendation regarding possible sanctions.

2. **Final Decision:** The Dean (or designee) shall review and consider the Honor Council's recommendation. The Dean may uphold or modify/amend the Honor Council's decision. If a recommendation by the Honor Council finding a student responsible of any violation is upheld, the Dean (or designee) will determine the applicable sanctions. The Dean (or designee) will notify the Honor Council if any amendments or modifications were made to their recommendation.

If the Dean (or designee) requests additional information in relation to the Honor Council's decision, the Honor Council will be notified in writing within five (5) working days and will have five (5) working days in which to provide the Dean (or designee) the additional requested information. The Dean (or designee) will notify the student, in writing, of the final decision and sanction(s) within five (5) working days of receiving the Honor Council's recommended decision or from the date the additional requested information was received by the Dean (or designee), whichever is later. If there is no appeal, the decision of the Dean (or designee) shall be final.

- H. **Appeal Rights:** The Appeals rights and procedures afforded in the [UNLV Student Conduct Code](#) shall apply. The charged student found responsible for a violation of the *Honor Code* or the [UNLV Student Conduct Code](#), and/or [UNLV Student Academic Misconduct](#) policies has the right to appeal that decision and any sanctions imposed to the UNLV Vice President for Student Affairs (or designee). A request for appeal must be filed within five (5) working days from the charged student's receipt of findings. 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. To prepare the appeal request, the charged student has the right to review the student's Honor Council or judicial hearing file, including any recording of the hearing; and any sanction imposed as a result of a hearing shall not become effective during the five (5) 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 designee) has the authority, in his/her absolute discretion that extenuating circumstances exist, to immediately impose the sanction.



- I. Extension of Time Limits:** All reports of *Honor Code* violations shall be investigated and resolved quickly, and within the time limits as set forth herein. However, there may be circumstances where additional time is necessary to conduct a thorough investigation, including but not limited to, the absence of or inability to contact a reporting individual, 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).
- J. 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 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 Honor Code or the [UNLV Student Conduct Code](#), and/or [UNLV Student Academic Misconduct](#) policies 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 *Honor Code* or [UNLV Student Conduct Code](#), and may result in additional and increased sanctions in accordance with the procedures set forth in the *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:
- 1. Warning:** Notice, oral or written, that continued or repeated violations of the 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
  - 2. 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.
  - 3. 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.



4. **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.
5. **Deferred Suspension:** If a student is found in any further violation(s) of the *Honor Code* or [UNLV Student Conduct Code](#) for the duration of a deferred suspension period, the suspension takes effect immediately. Additional *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.
6. **Disciplinary Conduct Suspension:** This is the temporary separation of the student from the 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 [UNLV Student Conduct Code](#) violations have occurred.
7. **Expulsion or Termination:** Expulsion or termination is a permanent separation of a 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.
8. **Required Educational/Restitution Activities:** Student(s) may be required to participate in educational activities or programs of community restitution service on campus or in the community, as approved.
9. **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 of Academic Affairs (or designee).
10. **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.

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

- a. **Academic Sanctions:** Resubmitting an assignment, reduction of points/letter grade for the assignment, dropping a class, reduction of points/letter grade for class, failing grade for assignment, and/or failing grade for class.
- b. **Conduct Sanctions:** Transcript notation; academic integrity seminar; reflection letter of understanding; disciplinary warning or probation; removal from program, school, or college; suspension; expulsion; withdrawal of credit for previously accepted course or requirement.

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

- K. **Adoption and Amendment of *Honor Code*:** The *Honor Code* and any amendments thereto become effective upon the approval of the Dean (or 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 *Honor Code*. The petition shall be submitted to the Honor Council for consideration and recommendation to the students and faculty.
- L. **Professional Conduct:** This section specifies professional behavior expected of students at the SDM. The list below provides examples of, but not limited to, expected professional behavior:
  - 1. 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.
  - 2. Students have an obligation to be respectful of the cultural, religious, ethnic, racial, and life-style diversity of individuals in the dental school.
  - 3. Students have an obligation to be respectful of community and the community in which the school exists.
  - 4. Abusive, obscene, derogatory, profane language, or profane gestures shall not be tolerated.
  - 5. Privacy of the patient and the confidentiality of every patient record shall be maintained.
  - 6. Privacy of the professional activities of any extramural site visited shall be maintained.

7. Behavior reflecting the dignity, responsibility, and service of dental professionals shall be practiced by all individuals.
8. Dental students shall NOT perform clinical treatment without direct supervision from appropriate faculty.
9. Dental students shall NOT perform clinical treatment that in any way compromises the safety of the patient.
10. Dental student shall NOT deliberately neglect or intentionally subject a patient to unnecessary treatment, stress or anxiety.
11. Dental students shall maintain neat and clean personal grooming and shall dress appropriately, following the guidelines published in the Student Handbook.
12. 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 Associate Dean for Clinical Services.
13. Dental students should refrain from sharing personal problems, frustrations, or negative comments about colleagues, faculty, or the institution with patients or patients' families.
14. Dental students shall NOT make any misstatement or act of intentional commission or omission in official records for purposes of misrepresentation.
15. Dental students shall NOT engage in any argument or altercation in the presence of or with patients, family, visitors, staff, or faculty.

**M. Health and Safety:** Dental students shall maintain compliance with all Health and Safety regulations, including all required immunizations and annual testing for tuberculosis. Dental students shall be familiar with and in compliance with UNLV and the SDM safety policies including radiation safety, infection control, biohazard exposure control, and latex allergies. Dental students shall attend all required training sessions, including annual updates when applicable, in the areas of the UNLV and the SDM safety policies listed above.

**N. Implementation and Enforcement of *Honor Code*:** Implementation of the *Honor Code* and reporting activities for violations are the responsibility of the Associate Dean for Clinical Services. Enforcement actions shall be consistent with protocols established in the *Honor Code* and [UNLV Student Conduct Code](#). The 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. Reinstatement of a student from the patient care clinics shall be determined by the Associate Dean for Clinical Services upon recommendation of the Chair of Clinical Sciences and/or the assigned clinical Team Leader. 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.

- O. Falsification of Documents or Other Information:** The *Honor Code* and [UNLV Student Conduct Code](#) 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 the 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 *Honor Code* and [UNLV Student Conduct Code](#).

**P. Timeline for *Honor Code* Report Process**

Step	Action	Description	Working Days*
1	Initial meeting	Receipt of written report of potential Honor Code violation	5 days
2	Notice of Violation	If an investigation is determined by honor council, the student will be notified.	3 days
3	Investigation	Conduct investigation relating to allegations in the report.	10 days
4	No Formal Hearing Required	If Honor Council determines no hearing is necessary, the Dean will be notified in writing.	
5	Formal Hearing Required	Student will be notified in writing, providing a 10 or more day notice.	10 days or more
6	Written Recommendation	furnish its written recommendation to the Dean from the date of the hearing	5 days
7	Additional Information	The Dean may request additional information in relation to the Honor Council's decision	5 days
8	Collection of Additional Info	The honor council has additional time to collect the information	5 days
9	Final Decision	Dean's will provide in writing to the student the final decision	5 days
10	Appeal by Student	If the student choses to appeal, they will submit to the UNLV Vice President for Student Affairs	5 days

\* **Please note calculations of timeframes are made in working days, which excludes weekends, recess, and/or holidays.**

**UNIVERSITY OF NEVADA, LAS VEGAS**

**Resident in the Advanced Education Program in Pediatric Dentistry  
(HANDBOOK SUPPLEMENT)**

## I. Introduction

The Pediatric Dentistry Postgraduate Certificate Program is a continuous, 24-month program, based upon the fiscal year, July 1st through June 30th. The program provides a full range of clinical experiences in pediatric oral health care, which is supported by an in-depth, critical and scholarly appraisal of the pediatric dental specialty knowledge base. The postgraduate students (PGS) are exposed to extensive clinical opportunities in all phases of behavior management, conscious sedation, hospital/surgery center pediatric oral rehabilitation dentistry, management of patients with special needs, management of dentoalveolar & circumoral trauma, orthodontic diagnosis, treatment planning, provision of age-appropriate, and orthodontic therapy. PGSS participate in scholarly research, pediatric emergency medicine rotations, community service, rotations to multi-disciplinary services, as well as off-site locations. The Certificate in Pediatric Dentistry received initial accreditation on July 31, 2008, from the American Dental Association (ADA) along with the Commission on Dental Accreditation (CODA) and full accreditation on August 5, 2010 & August 3, 2017. CODA is the sole specialized accrediting body of the ADA and is recognized by the United States Department of Education. For more information regarding this process, you may contact CODA at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611. This portion of the School of Dental Medicine (SDM) Handbook is designed to give more specific information as it pertains to the Certificate in Pediatric Dentistry. As a program within the SDM, adherence will be given to the rules and regulations as outlined by the SDM and the University.

## II. Dental License Requirements

The Nevada State Board of Dental Examiners (NSBDE) requires that all dental PGSS 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 1-800-DDS-EXAM (1-800-337-3926) or [nsbde@nsbde.nv.gov](mailto: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, PGSS must provide all necessary documentation for the completion of licensure with the NSBDE. Should a PGS not be credentialed within the required ninety (90) day period, all clinic privileges and other license-related activities in the program will be suspended until all requirements are completed. Please note this may cause a delay in the completion of program requirements.

## III. Advanced Education Certificate Program in Pediatric Dentistry; Vision, Mission, Goals, and Objectives

- A. Vision:** The vision of the Advanced Education Certificate Program in Pediatric Dentistry is to lead pediatric dentistry, by integrating innovation, tradition, and service.
- B. Mission:** The UNLV, School of Dental Medicine Advanced Education Certificate Program in Pediatric Dentistry will develop outstanding dental specialists through the use of advanced

technology, an integrated curriculum of biomedical and professional sciences; research, community service, and excellence in the delivery of patient care.

**C. Goals:** Recruit well-qualified applicants including those from underrepresented minorities and disadvantaged backgrounds.

1. Increase access to high-quality care for Nevada children including those with special health care needs and those from financially disadvantaged families.
2. Cultivate a faculty of excellence through a unique program of professional academic opportunities, internal development, recruitment, and retention.
3. Develop a pool of graduates from diverse backgrounds who are culturally competent to provide quality pediatric dental care that is inclusive of all sectors of society.

**D. Objectives:**

1. Train a diverse class of academically and clinically qualified PGs who are competent in providing primary and comprehensive preventive and therapeutic oral health care for infants and children through adolescence, including those with special health care needs.
2. Provide an evidence-based integrated curriculum comprised of biomedical, professional, and clinical sciences.
3. Develop PGs with outstanding diagnostic and clinical skills to allow quality pediatric oral health care and community service.
4. Prepare PGs for the American Board of Pediatric Dentistry (ABPD) certification, educational endeavors, leadership roles, and scholarly activities.
5. Cultivate excellence among faculty in the areas of teaching, scholarly activities, and service.
6. Promote the importance of medical and dental interdisciplinary cooperation, in order to provide the best pediatric oral health care, achievable.
7. Provide experiences to enhance cultural sensitivity to underserved populations.

## **IV. Program Student Learning Outcomes (SLOs)**

- A.** Demonstrate in-depth knowledge of biomedical, professional, and clinical sciences in relation to pediatric dentistry.
- B.** Develop outstanding clinical skills to allow quality comprehensive patient care and service.
- C.** Achieve competencies required for ABPD certification.

- D.** Demonstrate competence in didactic and clinical applications in pediatric dentistry.
- E.** Develop the acumen to complete a quality research project.
- F.** Demonstrate cultural sensitivity, when serving underserved populations in the State of Nevada.

Planned assessment, methods, instruction, and analysis of SLOs can be found in the annual outcomes assessment plan, which is maintained within the SDM Office of Academic Affairs, and located at the UNLV Office of Academic Assessment at <http://provost.unlv.edu/Assessment/>. An emphasis of the program is to prepare the graduate for successful completion of the ABPD examinations required for board certification.

## **V. Program Requirements**

The program trains the PGS to acquire a broad knowledge and understanding of growth & development, diagnosis, treatment planning, craniofacial anomalies, interdisciplinary dentistry, restorative treatment methodology, behavior management techniques, hospital dentistry, age-appropriate orthodontic therapy, research methodology, and classic & 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. Patients represent a cross-section of the cases encountered in private practice to ensure the PGS's preparedness to practice pediatric dentistry in a diverse population. The curricula includes clinical seminars, clinical pediatric dentistry, clinical orthodontics, diagnosis & treatment planning, case presentations, biomedical sciences, clinical sciences, professional studies, research, literature reviews, and hospital rotations. PGS evaluations will be given every six months to ensure that each PGS is progressing in the program and to provide constructive feedback. Completion of the program involves acceptable performance in four areas of the curriculum. These include:

### **A. Clinical Training (65%)**

PGSs will receive clinical training and experience in the pediatric dental postgraduate clinic located in the SDM, the Children's Specialty Center at UMC, the operating rooms (ORs) at affiliated facilities, and the Children's Specialty Center of Nevada.

PGSs must have necessary immunizations and periodic Tuberculosis (TB) testing as determined by the SDM in order to work in the clinic; have current basic life support (BLS) and Occupational Safety Health Administration (OSHA) certification, maintain current pediatric advanced life support (PALS) certification (failure to comply will result in suspension of clinical privileges); maintain complete patient records, in accordance with SDM clinic guidelines; make certain that the patient's parents/legal caregivers know the PGS's name, and provide the parent/legal caregiver, with necessary contact information; attend all scheduled seminars and/or courses; provide treatment under the supervision of the assigned



pediatric dental faculty; ensure patients remain the responsibility of the assigned pediatric clinic faculty, who work closely with the PGSs in the diagnosis, treatment planning and implementation of pediatric patient oral health care; 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, OR, and other clinical settings; prepare all patient records according to the established protocols of the American Academy of Pediatric Dentistry (AAPD) which include consent forms, treatment plans, etc.; complete a rotation at the Nevada Early Intervention Services Craniofacial Clinic (NEISCC) during their second year; complete at minimum more than 50% of the cases they begin to ensure continuity of care and maintain detailed records for each case, in which they participate; 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.

PGSs must also complete fifty (50) sedation cases per ADA and CODA requirements (Minimum of 50 sedation cases within the 24-month period). Within the 50, PGSs must observe 10 sedation cases (excluding nitrous oxide) prior to acting as the operator (to qualify as an observation, the PGS must be present during the patient workup, delivery of medication, present during the procedure, act as the monitor, completing the records portion of the sedation form for vital signs during the procedure); complete 20 nitrous oxide/oxygen analgesia patient encounters as primary operator; 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; act as operator in a minimum of 25 sedation cases; and of the remaining sedation cases (those not performed as the primary operator), must gain clinical experience, which can be in a variety of activities or settings, including individual or functional group monitoring and human simulation.

All funds regardless of source, generated from a PGS's clinical activities in connection with his/her participation in the academic programs shall accrue solely to the benefit of the SDM. PGSs are not employees of the SDM and, as such, are not eligible for wages, workers' compensation or other benefits otherwise available to the SDM employees in connection with their participation in the program.

## **B. Clinical Rotations (Percentage included in the 65% mentioned in Part A above)**

- 1. Craniofacial Rotation.** The Southern Nevada Cleft Palate and Craniofacial Clinic (SNCPC) offers 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 PGSs will attend the rotation. They will shadow the attending pediatric dentist assigned to the clinic. It is extremely effective for the PGSs 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.

PGSs will receive an email from the Craniofacial Clinic Coordinator two (2) weeks prior to the assigned rotation. PGSs should review the craniofacial syndromes prior to their attendance and be prepared for any questions the interdisciplinary team or attending pediatric dentist might ask. The rotation is from 8:00 am – 12:00 pm, PGSs are required to return to the SDM pediatric dental clinic for patient care upon completion.

Nevada Early Intervention Services  
Cleft Palate and Craniofacial Clinic  
1161 S. Valley View Ave.  
Las Vegas, NV 89102  
(702) 486-9819  
Contact: Julie Steadman, Clinic Coordinator  
Email: [jsteadman@adsd.nv.gov](mailto:jsteadman@adsd.nv.gov)

2. **Hematology/Oncology Rotation.** The hematology/oncology rotation is designed specifically to develop an understanding and knowledge of children with blood dyscrasias, neoplasias, and other immunocompromised conditions. PGS will attend this rotation for 2 weeks. PGSs will complete a screening for each child. Referral to the SDM dental program should be given to the parents/legal caregivers for each child while they are being treated at the hematology/oncology facility.
3. **Hematology/Oncology Comp Clinic.** PGSs will participate 2-3 afternoons each month (Tuesdays) from 12:30 pm – 5:00 pm and/or Fridays from 8:00 am – 12:00 pm. This provides an interdisciplinary experience of pediatric hematology and oncology patients.

Dr. Alan Ikeda, Chief Medical Officer  
Cure 4 The Kids Foundation  
1 Breakthrough Way  
Las Vegas, NV 89135  
(702) 732-1493 – Main  
Point of Contact: Tamara Saldana  
Email: [tsaldana@cure4thekids.org](mailto:tsaldana@cure4thekids.org)

4. **Lied Clinic Rotation.** PGSs will provide pediatric oral evaluations alongside pediatric medical residents on Thursdays from 1:00 pm – 5:00 pm at the Lied clinic. Parents/legal caregiver will be provided information pertaining to their child's oral health. It is the responsibility of the PGS to obtain parent/legal caregiver's contact information and call the parent/legal caregiver to make an appointment for their child to be seen if the patient does not have a pediatric dentist or dental home. Referral to the SDM dental program should be given to the parents/legal caregivers for each child at the time of the screening visit.

UMC Lied Pediatric Outpatient Center  
1524 Pinto Land, 3rd Floor

Las Vegas, NV 89106  
(702) 383-3642 – Phone  
(702) 944-2852 – Fax

Contact:

Dr. Jordana Boneh, M.D. Co-Director of Medical Student Pediatric Clerkship

Email: [jordana.boneh@unlv.edu](mailto:jordana.boneh@unlv.edu)

Dr. Fateh Peera, M.D. Co-Director of Medical Student Pediatric Clerkship

Email: [fatehali.peera@unlv.edu](mailto:fatehali.peera@unlv.edu)

Shelly L. Williams, Senior Clinic Manager

Email: [shellylynn.williams@unlv.edu](mailto:shellylynn.williams@unlv.edu), Phone: (702) 671-6402

- 5. Surgery Center/Hospital Operating Room (OR) Rotations.** All hospital cases are treated at University Medical Center (UMC) & Sunrise Children's Hospital. The PGS must complete their hospital dentistry orientation and become credentialed at all UMC surgical locations. At the start of the OR rotation, PGS-Year 1s (PGSY1) will be given the opportunity to provide care in the OR as the second surgeon to the PGS-Year 2s (PGSY2) (primary surgeon) treating oral rehabilitation cases. The PGSY1s will complete the post-operative dictation report, under the direction of the PGSY2s for the first month of the rotation, and all other dictation reports for the first year of training. This will allow all PGSs to meet CODA requirements for the OR. Cases should be reviewed with the attending faculty 2 weeks prior to the surgery date. PGSs should be dressed and prepare the room by 6:45 am so that, the case can begin promptly at 7:00 am. At this time, you will review the cases with the attending and talk with the patient's family prior to surgery, and complete all appropriate documentation. The facilities will provide scrubs for OR cases.

University Medical Center  
1800 W. Charleston Blvd.  
Las Vegas, NV 89102  
(702) 833-2252, Option 1

Sunrise Children's Hospital  
3186 S Maryland Pkwy  
Las Vegas, NV 89109  
(702) 961 5437

- 6. Anesthesia Rotation.** PGSY1s will complete a 4-week Anesthesia Rotation during their first year.

University Medical Center  
1800 W. Charleston Blvd.  
Las Vegas, NV 89102

Contact:

April Tischer or Lizbeth Cervantes, Anesthesia Schedulers

Phone: (702) 207 8262

- 7. Pediatric Medicine Rotation.** PGSY1s will complete the Pediatric Medical Rotation at UMC for two weeks.

University of Nevada Las Vegas School of Medicine

Department of Pediatrics

University Medical Center

1800 W. Charleston Blvd.

Las Vegas, NV 89102

(702) 383-2000

Primary Contact:

To be determined (TBD) – Chief Resident of the current year

Email: [chiefpedslv@gmail.com](mailto:chiefpedslv@gmail.com), Phone: (702) 780-7615, Pager: (702) 447-1962

- 8. Emergency Medical Rotation.** The PGSY1s will complete the Emergency Pediatric Medicine rotation at the University Medical Center (UMC) for two (2) weeks.

Dr. Jay Fisher, M.D. – Director of Pediatric ER

University Medical Center

1800 W. Charleston Blvd

Las Vegas, NV 89102

(702) 383-2000

Contact:

David Nelson, M.D., Coordinator of Pediatric ER Resident Rotations

Phone: (702) 383-3734, Email: [ddnelson1@cox.net](mailto:ddnelson1@cox.net)

- 9. Emergency Room (ER)/Emergency Department (ED) On-Call.** PGSs will complete one week of “on-call” at the UMC Emergency Department. The SDM has an affiliation with UMC, Pediatric Emergency Department. The ER/Department will call the “first call” PGS and it is the responsibility of this PGS to contact the “second call” PGS and the “Attending on call”, if necessary. The PGSs 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. There is a dental box in the doctors’ lounge that has information to help guide through the dental exam and diagnosis portion of the examination. It is the PGS’s responsibility to ensure information forms are in the dental box prior to leaving the ER/ED.

The PGS must identify and obtain the necessary contact information for the patient’s local pediatric/general dentist, if they have one, and notify them of the situation. The PGS must offer patient follow-up care for all trauma cases and other cases if the patient does not have a dental home. The PGS must give the patient and parent/legal caregiver a copy of our referral form instructing them to be seen within the 24 to 48 hours. A copy of the

progress notes from the 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 PGS cannot be available during their assigned days, it is their responsibility to coordinate someone to cover their time. Where possible, this exchange must be made four (4) weeks prior to their assigned call. The On-Call PGS must immediately notify the Chief PGS by email to ensure that the UMC ER/ED is informed as well as the other PGSs of the change(s). There are no additional considerations provided for those who are On-Call for holidays and any other special days.

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

### **C. Didactic Education (25%)**

Competence in Pediatric Dentistry requires knowledge of biomedical sciences and other topics as related to the specialty. Materials in research, biostatistics, as well as other disciplines, are provided in the program so that PGSs will be able to apply important biomedical concepts and principles that govern acceptable clinical procedures. The curriculum is intended to broaden PGS's overall background to broaden the acumen for critical analysis and to provide an opportunity to gain in-depth knowledge of pediatric dentistry. Differentiating curriculum content includes using various delivery formats designed to provide the PGS with a comprehensive understanding of contemporary information covering a broad range of material relevant to pediatric dentistry and pediatric medicine. Information will be conveyed through applied courses, seminars, reading assignments, literature review, clinical settings, hospital rotations, laboratory assignments, and selected local and distant conferences, generally sponsored by the AAPD. Specific presentation style will depend on the individual instructor. PGSs will be assigned numerous presentations in the didactic courses, to include selected cases of special interest for review in treatment planning seminars.

### **D. Research (5%)**

PGSs will develop the skills necessary for independent research. The attainment of new knowledge is a mission of the SDM and the university. Additionally, in accordance with CODA standard, students must initiate and complete a research project to include a critical review of the literature, development of a hypothesis and the design, statistical analysis and interpretation of data. PGSs must complete an original research project resulting in a publishable quality manuscript submitted and approved by the program director and director of clinical research. Manuscripts that fall short of the standard will be revised and resubmitted until the standard is met. The journal's acceptance for review must be acknowledged by a confirmation receipt prior to receiving a pediatric dental postgraduate certificate. Written confirmation from the publisher will be maintained on file. The director

of clinical research will maintain records of PGS's progress and develop a timeline for each PGS to ensure successful completion within the 24-month timeline. In order to attend the annual AAPD meeting, Y1 PGSs will be required to present a case report poster that will be displayed at the annual meeting. The Y2 PGSs will present a research poster for the annual AAPD research competition. IF all data has been collected and analyzed by January of Y2. Note that the program will, as funds permit, cover travel and lodging expenses to the AAPD annual meeting.

#### **E. Teaching (5%)**

The ADA accreditation program requires PGSs to spend time teaching. Through teaching, PGSs gain deeper insights into various disciplines and subjects, learn interpersonal skills, and develop organizational and presentation skills. PGSs will have teaching responsibilities including developing course material. As part of teaching responsibilities, PGSs will also provide clinical supervision of pre-doctoral students in the pediatric clinic as designated by the Pre-doctoral Course Director.

## **VI. Pediatric Patient Flow**

#### **A. Emergency Visit**

1. Parent/legal caregiver arrives at the main SDM reception area.
2. If the patient is 0-16 years of age, the front administrative personnel contact the pediatric dental clinic receptionist.
3. The patient is appointed. If the clinic is not seeing patients, the PGS On-Call is contacted to evaluate/treat the patient.

#### **OR**

1. Parent/legal caregiver calls the pediatric clinic. The receptionist schedules an emergency appointment
2. The parent/legal caregiver and patient are escorted to the pediatric dental clinic.
3. The parent/legal caregiver completes patient information (medical/dental history & written informed consent).
4. The parent/legal caregiver pays the emergency fee.
5. The patient is evaluated for the specific problem. Necessary radiographs are obtained for limited, specific emergency treatment.

6. The definitive treatment for the day is discussed and approved with the parent/legal caregiver and attending pediatric dental faculty.
7. 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.
8. When patient treatment is concluded, the PGS 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 PGS, who sees the patient, for the subsequent appointment.
9. A clinic evaluation form is given to the parent/legal caregiver and collected by the receptionist.

#### **B. New Patient Visit**

1. Parent/legal caregiver contacts the front desk.
2. If the patient 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 caregiver the telephone number of the pediatric dental clinic

#### **OR**

Parent/legal caregiver calls the pediatric dental clinic. The receptionist schedules a new patient visit.

1. The appointment is confirmed the day before.
2. When the patient arrives for their appointment to the front desk at the SDM, the staff personnel checks the *axiUm* software schedule to verify their appointment and changes their status to "arrived."
3. The parent/legal caregiver and patient are escorted to the pediatric dental clinic.
4. The parent/legal caregiver completes the patient information and medical/dental history forms as well as consent for treatment.
5. The parent/legal caregiver pays the estimated fee for their child's new patient visit.
6. The patient is evaluated with the parent/legal caregiver present. Necessary radiographs are obtained.
7. Treatment plan/options are presented to the parent/legal caregiver.

8. The patient treatment plan is approved by the parent/legal caregiver and the attending pediatric dentist.
9. Appropriate consent forms are obtained/signed for treatment.
10. If approved, a portion of the treatment is completed during the new patient visit.
11. The patient's information and appropriate forms are entered into the dental record.
12. When patient treatment is completed, the PGS finishes treatment notes and schedules a follow-up visit.
13. When all treatment is complete, the patient is scheduled for a 6-month recall appointment.

#### **C. Hospital Visit**

1. If a patient requires treatment under general anesthesia, the parent/legal caregiver signs the consent form, after all the risks, benefits and alternative treatment has been explained fully. Additionally, they will be given written pre-operative instructions for the OR appointment, and a Health History & Physical (H&P) form to be completed by their pediatrician.
2. The PGS reviews the pre-operative instructions with the parent/legal caregiver.
3. The patient is scheduled at the surgical facility by the office staff and given specific information regarding the facility.
4. The PGS will call the patient the following post-op day to check on the patient's condition.

## **VII. Conscious Sedation Protocol**

#### **A. Pre-Sedation**

1. Patients requiring conscious sedation are identified.
2. The patient's weight and height is obtained to determine their BMI. Their physician's name is verified with the parent/legal caregiver.
3. The completed pre-sedation record includes:
4. A thorough medical history (allergies and previous adverse drug reactions, current medications, including all over the counter medications, relevant diseases,



physical/neurologic impairment, previous sedation/general anesthetic experience(s), snoring, obstructive sleep apnea, mouth breathing symptoms and history, other significant finding (e.g. family history), airway assessment, mouth breathing, obesity, limited neck mobility, micro/retrognathia, macroglossia, tonsillar hypertrophy obstruction, and limited and difficult oral opening)

5. Indications/contradictions for sedation are discussed with parent/legal caregiver and recorded in the patient's dental record.

6. ASA Classification is recorded.

7. Indications for medical consultation are recorded.

**B. Pre-sedation Medical Consultation.** If the PGS or attending pediatric dentist, suspect a medical problem, a pre-sedation medical consultation from the patient's physician 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.

1. The pre-sedation record is signed by the PGSs attending pediatric dentist and dated.

2. The signed informed consent is obtained from the parent/legal guardian and dated.

3. This form is also signed and dated by a pediatric dental staff witness.

4. The proposed treatment plan signed consent is obtained, if not already present in the patient's record.

5. Oral sedation instructions are explained, in the appropriate language, and given to the parent/legal caregiver to take home, for their review, as well as an appointment card.

### **C. Day of Sedation**

1. The patient reports to the clinic one hour prior to treatment time with the parent/legal caregiver and an accompanying adult.

2. The PGS completes the assessment, medical history; review of systems; NPO status; airway patency; pre-treatment checklist; vital signs (heart rate, respiration rate, blood pressure, and temperature, if possible); and weight.

3. The parent/legal caregiver is provided an opportunity to ask questions and reaffirm their consent for sedation and planned treatment.

4. 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.

5. The patient is given the medication and time is noted. The patient's behavior is noted, regarding cooperation.
6. The patient is left in the treatment room with the parent/legal caregiver. The treating PGS and a dental assistant will monitor the sedated patient throughout the waiting period.

#### **D. The Sedation Procedure**

1. 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.
2. The parent/legal caregiver is instructed to not leave the pediatric dental reception/waiting room, during the sedation/procedure. Name verification of the additional, accompanying adult is made and recorded.
3. The patient is seated; the time and baseline vital signs are recorded.
4. All medications and administration time(s) are recorded on the sedation record.
5. Informed consent for immobilization devices, signed by a parent/legal caregiver should be accomplished prior to the start of the procedure, and if utilized does not restrict the airway or chest movement
6. Nitrous oxide  $N_2O/O_2$  analgesia is initiated; start time is noted, as well as both  $N_2O$  and  $O_2$  percentages delivered, as well as the length of time administered, during the treatment.
7. The necessary dental procedures are completed, while being monitored, continuously, with a pulse oximeter and blood pressure cuff monitor, if possible, based on the patient's behavior.
8. Caution is taken to prevent excess fluids from collecting in the mouth. Rubber dam isolation or Isolite must be used during sedation procedures.
9. Vital signs are periodically documented on the sedation record in a time-based record.
10. Continuous monitoring and maintenance of the patient's airway must occur throughout the patient's treatment.
11. Sedation level, effectiveness, and patient responsiveness during the treatment are documented in the record.

12. For the patient's safety, the following must be immediately available: functioning back-up suction apparatus must be present; functioning back-up power source must be present, and auxiliary personnel must be certified in basic cardiopulmonary resuscitation by the American Heart Association (AHA) and the facility must be properly equipped.

#### **E. Post Treatment**

1. The patient is observed in a recovery area until, cardiovascular function and airway patency is satisfactory and stable; the patient is easily arousable, responsiveness is near pre-sedation level, protective reflexes are intact, the patient can talk (return to pre-sedation level), and state of hydration is adequate.
2. Discharge vital signs are documented.
3. Post-operative instructions are given regarding the post-sedated patient's head posture and reviewed with the parent/legal caregiver, along with any emergency contact telephone number.
4. If indicated, the next appointment visit is scheduled.
5. The PGS will contact the parent/legal caregiver, later in the day of treatment, to determine the status of the patient as well as record the findings in the Electronic Health Record (EHR)

### **VIII. Postgraduate Student Evaluation**

Evaluation is a continuing process in the didactic and clinical setting. Formative assessment is provided by the faculty on a regular basis. Reports of the PGS clinical activities are reviewed at the end of each semester to ensure satisfactory progression is occurring. At the beginning of each off-site rotation, the PGS is responsible for providing the rotation director, or their designee, the appropriate evaluation form, which will be returned to the dental program director at the end of the rotation. PGS evaluations are completed, on a semi-annual basis. PGSs 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 PGS.

PGS performance in the program will be examined biannually. Attendance is mandatory for all class and clinical sessions, except when off service. If a class or seminar is missed when on rotation the off service PGS, must inform the course director of the class or seminar missed by email. PGSs must pass all courses. PGSs may discuss the results of their biannual reviews with the program director. Unsatisfactory performance can result in remediation, informal or formal probation, and/or dismissal from the program. The Advanced Education Certificate Program in Pediatric Dentistry coursework is specifically designed for the program and previous program coursework cannot be applied as a supplement or replacement for the course requirements in the completion of the program.

## IX. Attendance Policy

Attendance is required at all activities scheduled by the program. Please note that some required activities such as clinic, classes, and rotations are scheduled on weekends. All lectures are mandatory unless a PGS has received permission to be absent from the program director. There are community outreach programs on some Saturdays that PGSs will attend on a rotating basis. All PGSs are expected to attend the “Give Kids a Smile” (GKAS) event. Non-UNLV employment is prohibited from Monday through Friday, between 8:00 am to 5:00 pm, as well as any required additional times as specified for lectures, continuing education (CE) courses, and scheduled Saturday community outreach programs.

**A. Personal Days/Sick Leave.** Each PGS is allowed up to ten (10) personal days per academic year in addition to designated holidays when not “On-Call”. Personal days are not carried over into the next academic year, which begins July 1st of each year. Personal days are primarily for pre-approved vacation and interviews, as well as for illness, medical, and family & personal emergencies. Leave requests must be turned into the pediatric dental clinic manager for planned leave requests at least 4 weeks prior to the leave request. All leave requests will be for the entire day; no ½ day requests will be accepted. Submittal of a late leave request does not guarantee that leave will be granted. PGSs will be notified by the pediatric dental clinic manager and/or program administrative assistant whether the leave request is approved or denied by the program director. However, it is the PGS’s responsibility to verify approval/denial of requested leave on the general calendar prior to making travel arrangements. The PGS accepts all financial responsibility related to denial of their request should that decision be made. All personal days must also be approved by the faculty/course director for each particular class that will be missed. PGSs will not be allowed to arbitrarily change their schedule. No more than two PGSs per 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.

If a PGS 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 PGS must provide a completed leave slip and obtain a signature of approval from the program director. A physician’s excuse may be required at any time. PGSs should always make every effort to schedule appointments at times when they are not scheduled for clinic or classes. 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, PGSs must complete the Leave Request Form for the time they will not be on campus.

**B. Leaving campus when assigned to the clinic.** PGSs are not to leave campus when assigned to the clinic even if you do not have a patient scheduled. All PGSs will remain in the clinic or in the homeroom until all patients have been seen for the day. If you will be on campus somewhere other than the clinic or homeroom, you must inform the clinic manager where

you are located, should you be needed in the clinic. If you are found to have left campus before all patients are dismissed you will be assessed a half day of personal leave and may be subject to disciplinary action.

- C. Unapproved Absences.** Should an unfortunate situation arise when a PGS 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 and may be subject to disciplinary action.

## **X. Special Circumstance Leave Policy**

The purpose of this policy is to provide guidelines regarding leave of absence for a period exceeding the approved ten (10) “Personal Days” per year in addition to holidays. If a PGS exceeds the allowed-time for personal days, 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 PGS’s program, graduation and CODA requirements are met. This includes, but is not limited to: additional reading, lectures, reports, examinations; giving up spring break time; taking additional call; or extending the length of the program beyond the minimum twenty-four (24) months. The SDM 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 ADA and CODA. Such decisions will be made by the program director, in consultation with the faculty, AEC, Dean, and the PGS.

## **XI. Dress Code**

PGSs must maintain a professional appearance at all times. PGSs must wear scrubs during all clinical sessions. Scrubs for the pediatric program PGSs are to be “ceil blue.” Scrubs must not have any names, logos, unacceptable wording, diagrams or images, as determined by the program director. Clinical attire includes acceptable, clean, “closed-toe” shoes, and mid-calf socks. PGSs 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, PGSs, staff, patients, other children or parent/legal caregivers. Radiology dosimeter must be visibly worn when provided, whenever you are in the pediatric dental clinic and placed on your clinic information wall file when not being worn. 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 policies can result in suspension of your clinic privileges and may result in disciplinary action.

## **XII. Chief Postgraduate Student (Job Description)**

The chief PGS in this residency program will be appointed by the program director. A chief PGS should possess the following qualities: leadership potential, mediation skills, capacity for self-direction, tolerance for ambiguity, optimism, and respect for established policies. Other general traits such as organizational skills, responsibility, commitment, and willingness to work cooperatively in an interdisciplinary environment are essential as well. The chief PGS position will be divided among selected PGSs, each with a six (6) month term. The incoming chief PGS will work together with the outgoing chief PGS throughout the last month to assure appropriate and coordinated transition of chief PGS responsibilities.

The chief PGS will act directly under the program director and will not create policy. The chief PGS has the potential to make significant contributions, both immediate and long-term, to the postgraduate program. PGS training will ultimately benefit from the efforts of a strong, innovative chief PGS who is actively involved in both the administrative and academic aspects of the training program. The chief PGS should be a source of new ideas and initiative and act as the spokesperson for the PGSs. The chief PGS will help the program director and clinic administrators coordinate program activities. The chief PGS will facilitate monthly meetings and report the outcomes of such meetings at departmental meetings. Other activities include; incoming PGS activities; recruitment; coordination of social activities surrounding residency applicant interviews; annual alumni/PGS CE courses and coordination of activities that involve hospitals, surgical facilities, community outreach clinics, and volunteer activities. During the course of the year, other responsibilities may be assigned by the program director. The chief PGS will also assume teaching responsibilities during this period and will be allotted preparation time out of clinic as designated by the program director.

**A. Goals for the Chief PGS.** The chief PGS will be an effective leader, role model, administrator, and competent clinician. The chief PGS should strive to be a clinician educator, incorporating principles of adult-education, and become an integral component in the promotion and improvement of the pediatric dentistry postgraduate program.

**B. Knowledge Objectives.** By the end of the chief PGS term, the successful chief PGS should:

1. Understand the process of teaching PGSs with varying levels of ability.
2. Learn the principles of effective supervision of PGSs in the care of patients.
3. Understand the principles of quality care assessment, systems-based care, and process implementation.
4. Acquire knowledge of different leadership and negotiation styles to achieve desired outcome.

5. Continue development of scientifically based pediatric dental knowledge and clinical skills in providing patient care.
6. Understand the process of project development and presentation; including budget planning, team organization and management, time management, and critical assessment.
7. Understand the use of information databases, literature reviews, and computer technology to achieve administrative & educational goals.
8. Understand the professional peer-review process.

### C. Responsibilities of the Chief PGS in Pediatric Dentistry

1. **Contact Availability.** The chief PGS shall carry a cell phone for contact availability on a 24 hour basis. The cell-phone number shall be made available to all PGSs and pediatric dental faculty and to the administrative staff at UMC or other On-Call facilities.
2. **Call Schedule.** The chief PGS 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 PGS's responsibility.
3. **Periodic Meetings with program director.** The chief PGS will meet as needed, or as required, with the program director to review PGS and program issues as well as discuss opportunities for improvement.
4. **Departmental and Administrative Meetings.** The chief PGS will attend all section faculty and administrative meetings including scheduling and staffing and other meetings as assigned by the program director. The chief PGS is the representative of the PGSs at all such meetings and is responsible for communicating the results of such meetings to the other PGSs in a timely manner.
5. **Monthly PGS Meetings.** The chief PGS will facilitate a monthly meeting of all pediatric dentistry PGSs outside of clinic hours. The purpose of these meetings shall be to communicate information from the program director and the attending faculty and report feedback from the PGSs to the program director. These meetings shall also serve as coordination meetings to assure appropriate PGS conduct as related to schedules, rotations and patient care policies. PGSs are encouraged to use the PGS Comment Form to initiate discussion at PGS meetings.
6. **Liaison between Faculty and Staff.** The chief PGS 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.

- 7. Coordinate Special Seminar Topics and Scheduling.** The chief PGS will be responsible for the scheduling of special seminars and educational activities outside of the general program schedule, in consultation with the program director.
- 8. Annual Alumni/PGS Program.** The chief PGS will work with the Alumni Association and the program director in creating and planning an annual the SDM Pediatric Dentistry Alumni/PGS program to be held at the AAPD annual meeting.
- 9. PGS Admissions.** The chief PGS will serve as the PGS representative on the Pediatric Dentistry Postgraduate Admissions Committee. The chief PGS will be responsible for coordinating the participation and input of the other PGSs in the admissions process.
- 10. Incoming PGSs Orientation.** The chief PGS will work with the program director in coordinating incoming PGS orientation activities during the first week(s) of the program. This includes, but is not limited to, orientation seminars, tours, program activities, and social events.
- 11. Calendar.** The chief PGS will be responsible for updating and maintaining the pediatric dentistry online calendar under “Advanced Education Programs”. These calendars should include PGS 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.
- 12. Other Duties, as assigned.** It is expected that the chief PGS 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.

**XIII. Grading Systems:** The following grading system complies with Nevada System of Higher Education campus grading policies and will be used for the SDM Advanced Education in Pediatric Dentistry courses.

S	Satisfactory
U	Unsatisfactory
I	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 grading system will apply:

90-100	A (Superior)	4.0 (grade point value)
80-99	B (Above Average)	3.0 (grade point value)
0-79.9	F (Failure)	0.0 (grade point value)



In this grading system, each PGS must pass all courses with a grade of a “B” or “Satisfactory”. PGSs 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, and timely completion of assignments/patient care, professionalism & preparedness. A grade of F is given to any PGS 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 PGS is not meeting the requirements of the program the PGS will be placed in a probationary status. The PGS 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 PGS’s matriculation. If a PGS does not meet satisfactory academic progress by the end of the second six-month period, they may be given the opportunity to extend, withdraw or possibly be dismissed from the program. If extended, the PGS will be re-enrolled for those courses in which satisfactory academic progress has not been met.

#### **XIV. 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.

- A.** Any recommendation for Academic Separation by the Evaluation Committee shall be submitted to the Dean. The Dean (or his/her representative) shall meet with the PGS to discuss the recommendations for Academic Separation, and condition for reinstatement, including remedial procedures, if any; and provide the PGS with written notification of the Academic Separation/Dismissal indicating related conditions.
- B.** Grounds for Academic Separation include without limitation to failure to:
  - 1.** Satisfactorily pass all required courses; must have a minimum cumulative grade point average of 3.0 or Satisfactory/Pass in required coursework.
  - 2.** Meet the conditions set by the faculty as a result of unacceptable evaluations.
  - 3.** Adhere to standards and guidelines set forth by the program.
  - 4.** Complete specified requirements within the allotted time.
  - 5.** Perform duties in a professional manner in regards to patient care, including interactions with faculty and staff.
  - 6.** Attend classes or clinic sessions without authorization.

- 7.** Meet the conditions of Voluntary Leave of Absence.
- 8.** Respond to on-call emergencies.
- 9.** Abide by the Honor Code, the University Student Code of Conduct, and/or the UNLV Student Academic Misconduct Policy.
- 10.** Pay the required tuition and fees.

**UNIVERSITY OF NEVADA, LAS VEGAS**

**Orthodontics and Dentofacial Orthopedics Program  
Master's and PhD in Oral Biology**

**(HANDBOOK SUPPLEMENT)**

## I. Introduction

The Advanced Education in Orthodontics and Dentofacial Orthopedics offers a 34-month combined Master's Degree and Certificate residency program. The class size is six Residents per year and begins in July of each year. The program is designed to offer a broad spectrum of didactic, clinical, research, and teaching experience in the field of orthodontics and dentofacial orthopedics. The emphasis of the program is to prepare the graduate for successful completion of all examinations and case presentations required for board certification and to become a Diplomate of the American Board of Orthodontics. The program trains the resident 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 a state of the art orthodontic clinic and technology is available for complete electronic patient records, as well as the latest in 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.

This portion of the SDM Handbook is designed to give more specific information as it pertains to the Advanced Education in Orthodontics and Dentofacial Orthopedics and combined Master's Degree and Certificate residency program. As a Program within the SDM, adherence will be given to the rules and regulations as outlined by the SDM and the University.

## II. Dental Licensure and Accreditation

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 Debra Shaffer-Kugel, Executive Director for the NSBDE at 800-DDS-EXAM or [nsbde@nsbde.nv.gov](mailto:nsbde@nsbde.nv.gov). UNLV School of Dental Medicine, Advanced Education in Orthodontics and Dentofacial Orthopedics Residency earned the status of "Approval without Reporting Requirements" from the Commission on Dental Accreditation in 2013. 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.

## III. Vision, Purpose, Mission and Goals

**D. Vision.** To lead Orthodontics by integrating innovation and tradition.

**B. Purpose.** 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.

- C. 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.
- D. Goal.** Mentor each resident to be a “life-long learner,” progressive orthodontic clinician, and a thoughtful evaluator of evidence-based research.
- E. Objectives.** This program will:
  - 1. assure a diverse patient population through constant screening and recruitment;
  - 2. stimulate avenues for patient interaction with other specialties;
  - 3. support diverse exposure to a variety of private practice scenarios; and
  - 4. promote diverse exposure and interaction with surgical procedures.

#### **IV. Program Student Learning Outcomes (SLOs)**

The purpose of this program is to 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:

- A.** provide the Residents with quality and structured information through clinic, small group seminars, lectures, continuing education, and interdisciplinary interaction
- B.** secure adequate exposure to a broad spectrum of information through conferences, seminars, and meetings;
- C.** encourage independent learning, critical thinking, and analytical evaluations; and
- D.** build resources available to the Residents throughout their education (computers, books, etc.

**V. 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:

- A.** provide research facilities, limited financial support and technical expertise to allow completion of quality research projects by the Residents; and
- B.** offer mentorship in obtaining a Master’s Degree in Oral Biology.

## VI. Program Requirement

The program trains the postgraduate student to have a broad knowledge and understanding of orthodontics, research methodology, and classic and current literature relevant to orthodontic dentistry. Patient care is conducted in Bldg. D Clinic at the SDM. Distribution of time during the residency will be divided into the following four categories; clinical education, didactic, research, and teaching/electives/externships. The division of the time between the categories 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 all three phases required for board certification and 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. Completion of the orthodontic residency program involves acceptable performance in all four areas of the curriculum. These areas include:

### A. Clinical Education = 50% (Orthodontic Residency Clinic)

Each resident in the program will be assigned one or more 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 SDM Student Handbook 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 disregards this, then they are responsible for replacing that instrument.

#### 1. Clinical Requirements

- a. 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.

- b.** 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.
- c.** 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.
- d.** Residents will be assigned a rotation to the Southern Nevada Cleft Palate and Craniofacial Clinic. Residents are responsible for their own transportation to the clinic, and are subject to the attendance policy.
- e.** Residents should strive to complete the majority of the cases they start.
- f.** 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.
- g.** All Residents are required to have current CPR and OSHA certification. Failure to comply will result in the resident having clinical privileges suspended.
- h.** Orthodontic Consent Form must be completed before any orthodontic treatment will be started. It must be signed by the patient or parent (legal guardian).
- i.** All Residents must have all required immunizations in order to work in the clinic.
- j.** 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 the SDM. Graduate students are not employees of the SDM and, as such, are not eligible for wages, workers' compensation or other benefits otherwise available to the SDM employees in connection with their participation in the graduate program.

## **2. Patient Flow**

- a.** Patients are evaluated during an Orthodontic Screening Examination.
- b.** Patients may be accepted, put on recall or declined.

- c. Clinic Director or Program Director assigns patients to resident and faculty.
- d. Resident contacts prospective patient and if the patient is interested, an appointment for diagnostic records is scheduled.
- e. Diagnostic records payment must be received at or before the records appointment with the exception of Medicaid recipients.
- f. Electronic health record information must be entered in AxiUm prior to start of treatment.
- g. Resident obtains all records necessary for case presentation (models, photos, radiographs, CBCT and clinical exam).
- h. Case presentation to assigned faculty.
- i. Treatment plan is approved and signed by assigned faculty.
- j. Case presentation to patient at patient appointment.
- k. Resident explains treatment plan to parent and/or patient and obtains signed Informed Consent.
- l. Financial Contract must be established with Business Office before any treatment starts.
- m. Resident must explain the importance of keeping appointments, cooperation from patient, insurance, payment schedule, and clinic appointment schedule.

**3. 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.

#### **B. Didactic Education = 20% (Departmental Courses, Lectures, and Seminars)**

- 1. 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.
- 2. 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.



3. 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.

**C. Research = 25%**

1. The 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.”
2. Consistent with the 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 IADR 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, advice 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 [PLOS Biology Website](#) for guidelines for negotiating scientific collaboration.

3. 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 Director of Research will maintain records of the resident's progress.
4. The required independent research project and completion of a Master's Degree in Oral Biology is the minimal requirement for successful completion of the orthodontic residency program at the 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.
5. The American Dental Association Standard for research in an orthodontic curriculum is Standard 6 – Research: "Advanced Specialty education students must engage in scholarly activity." Standard 6-1 reads, "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."

#### **D. Teaching/Electives/Externships = 5%**

1. **ADA Accreditation:** 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 the 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:
  - a. 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.

- b. 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.

## **2. 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.

- 3. **Electives/Externships.** 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.

## **VII. Postgraduate Student Evaluation**

- 1. 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 to ensure that the resident is making satisfactory progress during the program; to provide evaluation and feedback that is essential for the resident to gain the most from the educational process; to provide feedback for improving the quality of the program, and to provide feedback for the effectiveness and quality of the faculty.
- 2. 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.
- 3.** 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.
- 4.** 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.
- 5.** Residents must demonstrate competency in all areas to be approved for promotion or advancement.

## **VIII. 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.

- A. 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. Personal days are non-transferrable to another resident. Completed and accurately-dated planned Leave of Absence 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 by the Program Director. 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. In addition, once the leave is approved, it is the responsibility of the resident to make sure the original is placed in the resident’s file and the orthodontic scheduler receives a copy. In case of a program-required event and/or an approved academic meeting, Residents must complete the Leave of Absence 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.

- B. 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 of Absence 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 Special Circumstances Leave Policy.
- C. 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.
- D. 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.

## IX. 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. The 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.

**X. Grading Systems:** The following grading system complies with Nevada System of Higher Education campus grading policy and will be used for the SDM Advanced Education in Orthodontics courses.

S	Satisfactory
U	Unsatisfactory
I	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:

90-100	A (Superior)	4.0 (grade point value)
80-89	B (above average)	3.0 (grade point value)
0-79.9	F (failure)	0.0 (grade point value)

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.

## XI. General Information

- A. 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. In addition, 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 DISMISSAL FROM THE PROGRAM.**
- B. General Guidelines.** A general schedule is found in the W: drive under Schedules. 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 Residency Program. As an Advanced Education Program within the 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 this Handbook, [UNLV Student Conduct Code](#) and [UNLV Student Misconduct Code Policy](#). These documents should be used in conjunction with the Clinic Operating Manual, *Honor Code*, and Clinic Protocol Manuals. These can be located on the Clinic Information Website on [SDM SharePoint](#).
- C. 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.
- D. Financial Aid.** Contact UNLV student enrollment and financial services for information and eligibility at 702-895-3424, or via [their website](#). Any questions may also be addressed to the SDM Financial Aid Liaison at 702-774-2526.

**NOTE:** All students must review the Handbook, and subsequently read and sign the “Acknowledgement” section found in Appendix A. This form must be returned to the SDM’s Office of Student Affairs (Office of Student Affairs) prior to the end of the first week of fall classes.

**UNIVERSITY OF NEVADA, LAS VEGAS  
General Practice Residency Program**

**(HANDBOOK SUPPLEMENT)**

## I. Introduction

The General Practice Dentistry Certificate Program is a one-year program, based upon the fiscal year, July 1<sup>st</sup> through June 30<sup>th</sup>. Class size is six Residents per year. The Clinic is open nine hours a day (7:30 a.m.–5 p.m.), five days a week. After hours, dental emergency coverage is performed by all Residents on a weekly, rotating basis. The program provides or facilitates: broad clinical experience and didactic training in all aspects of the practice of modern general dentistry; experience & didactics necessary to develop sound diagnostic, treatment planning and patient assessment skills; close interaction with specialty staff to coordinate comprehensive patient care; exposure and experience in patient treatment in a hospital and/or surgical center atmosphere; and insight into the world of dental literature; sets the stage for the development of lifelong learning habits; participation in local, state and /or national Continuing Dental Education to include public speaking and participation in organized dentistry. Rotations in Family Medicine, Anesthesiology and Emergency/Trauma are an essential component of the program. Advanced training in conscious sedation is, also, provided. The resident is expected to successfully complete ACLS and become certified in conscious sedation.

Note: The GPR is considered a post-doctoral residency program; however, the Residents are not enrolled as students during their time. Residents work in the GPR clinic and receive hands-on training in the all areas of General Practice Dentistry. Rotations are listed above. Because these Residents are not classified students, there is no ‘plan of study’ or curriculum plan.

## II. Mission Statement

- A. 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.
- B. Oral health is indispensable element of overall wellness.
- C. 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.

## III. General Practice Residency Certificate Goals and Objectives: Upon completion of this program, Residents will have a working knowledge of:

- A. hospital dentistry – providing dental care in an operating room setting and functioning in a hospital environment;
- B. treating medically compromised and special needs patients in an inpatient and outpatient setting;



- C. comprehensive treatment planning involving multiple specialty areas;
- D. advanced surgical procedures including incision and drainage, biopsy, pre-prosthetic surgery, complex surgical extractions;
- E. fabrication and insertion of simple and complex fixed and removable prostheses;
- F. diagnosis, interpretation of CBCT images, utilization of implant treatment planning software to enhance surgical placement and restoration of dental implants;
- G. emergency dentistry including management of oral trauma;
- H. moderate conscious sedation (oral, inhalation, and IV);
- I. Advanced Cardiac Life Support (ACLS);
- J. endodontic diagnosis and treatment including use of rotary instrumentation and clinical microscopy;
- K. periodontal diagnosis, including both surgical and non-surgical treatment;
- L. esthetic dentistry principles and treatment options (veneers, ceramic onlays, smile analysis, and esthetic gingival procedures); and
- M. practice management concepts to facilitate transition into private practice and other dental practice settings.

#### **IV. Chief Resident**

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

#### **V. Leave Policy**

- A. 15 days ordinary leave, 15 days sick leave.
- B. Leave should not be requested when guest lectures or seminars are scheduled.

- C. Sick leave over 3 days requires medical evaluation.
- D. Request leave authorization through Workday.
- E. Pre-approval from Chief Resident prior to Workday request (check with front desk)
- F. Do not wait until the last minute to request leave.

## **VI. Controlled Drugs (DEA Number)**

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

## **VII. Off-Duty Employment**

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

## **VIII. Portfolio**

You are expected to add to your portfolio as you complete certain cases. The ADA credentials this residency every seven years and requires documentation of resident progress. 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. Portfolio Suggested Table of Contents will be provided to the Residents.

## **IX. Moderate Sedation**

You must complete 20 cases to become certified to perform Moderate Sedation. Residents are encouraged to look to more of your apprehensive patients to have Moderate Sedation as part of their dental care. 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.

## **X. Drug Log**

- A.** All controlled drugs will be maintained in the doubled-locked cabinet in the supply room
- B.** The drug log will be kept in the cabinet.
- C.** Only authorized personnel may access this cabinet.
- D.** 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.
- E.** 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).
- F.** New drug purchases will be kept and verified when the drugs are received.

## **XI. Dental Resident Orientation Information for 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.

### **A. Resident Responsibilities**

#### **1. Clinical Responsibilities**

- a.** Eight (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.
- b.** 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 the SDM. Graduate students are not employees of the SDM and, as

such, are not eligible for wages, workers' compensation or other benefits otherwise available to the SDM employees in connection with their participation in the graduate program.

- 2.** While on duty, Residents are expected to function as integral team members of the Emergency Department, appropriate to their level of training.
  - a.** 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.
  - b.** 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.
  - c.** 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.
  - d.** 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
  - e.** 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.
  - f.** 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.

- g.** 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).
- h.** 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.
- i.** 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.
- j.** 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.
- k.** 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.

## **2. Academic Responsibilities**

- a.** 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.
- b.** 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.

- B. 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.
- C. 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
- D. 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:
  - 1. Active participation during all 8 assigned clinical shifts in the Emergency Department.
  - 2. Satisfactory completion of an emergency medicine case review, submitted no later than the last day of the rotation.
  - 3. Submission of all 8 daily patient encounter logs, signed by an attending physician.

4. Satisfactory clinical evaluations by attending emergency physicians, demonstrating fulfillment of the minimum requirements for competency in all areas of evaluation ( $\geq 2.5$  grade-point average), as well as a satisfactory overall assessment.
5. 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.

- E. 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

**F. Policy for Resident Supervision and Clinical Responsibility**

1. 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.
2. Program-specific policies are in compliance with UMC institutional policy, as well as standards outlined by the Emergency Medicine Residency Review Committee (RRC).

3. 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.
4. 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.
5. Resident responsibility is graduated. Residents are given progressive responsibilities, in both the clinical as well as the didactic curriculum, based on level of training.

#### **G. Off-Service Residents in the Adult Emergency Department**

1. 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.
2. The off-service resident is expected to prioritize care based on the patient's level of acuity and/or time within the Department.
3. The off-service resident must present all patients to the assigned attending prior to initiating diagnostic testing or therapy.
4. The EM attending assumes full responsibility for the care of all patients presented to them by the off-service resident.
5. 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:
  - a. ABG
  - b. Bladder catheterization, male
  - c. Bladder catheterization, female
  - d. Digital rectal exam, male
  - e. GU exam, male
  - f. \*\*GU/Pelvic exam, female (must be supervised during the PGY-1 year)\*\*
  - g. Peripheral IV insertion
  - h. Correct use of slit lamp and Tono-pen for ocular examination
  - i. Anterior and posterior nasal packing
  - j. Nasogastric tube insertion
  - k. Reduction of large and small joint dislocations, including fracture/dislocations
  - l. Application of splints for extremity immobilization
  - m. Laceration repairs, including use of skin staples and Dermabond



- n. Incision and drainage, simple abscess
  - o. Central venous access
  - p. Lumbar Puncture
  - q. Bedside ultrasound
  - r. Endotracheal intubation
6. The EM attending will directly supervise all critical interventions.
  7. The EM attending must approve and consider supervision of all invasive procedures.
  8. In resuscitations, the primary role of the off-service rotator is vascular access and defibrillation/cardioversion.
  9. The off-service resident is expected to manage 0.8 patients per hour, on average.
  10. 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 adequate time to arrange shift coverage.

#### **H. Off-Service Resident Rotations University Medical Center Adult Emergency Department**

##### **1. Goals and Objectives Patient Care**

- a. 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.
- b. Demonstrate competence in performing an adequate and appropriate neurologic exam on trauma and medical patients with various levels of consciousness.
- c. Demonstrate competence in performing an adequate and appropriate trauma exam.
- d. Demonstrate competence in performing an adequate airway assessment.
- e. Demonstrate competence in performing an adequate and appropriate gynecologic exam.
- f. Demonstrate competence in performing and appropriate evaluation on pediatric patients.

- g.** Demonstrate the ability to recognize and evaluate cardiac emergencies.
- h.** Demonstrate the ability to recognize and evaluate respiratory and airway emergencies.
- i.** Demonstrate the ability to recognize, evaluate, and manage GI emergencies.
- j.** Demonstrate the ability to recognize, evaluate, and manage gynecologic emergencies.
- k.** Demonstrate the ability to recognize, evaluate, and assess surgical emergencies.
- l.** Identify and manage non-emergent abdominal, gynecologic, neurologic, infectious, pulmonary, and cardiac complaints.
- m.** Demonstrate appropriate treatment priorities, identifying patients by acuity.
- n.** Demonstrate familiarity in performing procedures including, but not limited to
  - (1)** Correct use of slit lamp and Tono-pen for ocular examination.
  - (2)** Anterior and posterior nasal packing.
  - (3)** Nasogastric tube placement.
  - (4)** Reduction of large and small joint dislocations, including fracture dislocations.
  - (5)** Application of splints for extremity immobilization.
  - (6)** Laceration repairs, simple and complex, including use of skin staples and Dermabond.
  - (7)** Incision and drainage, simple abscess.
  - (8)** Peripheral and central venous access.
  - (9)** Lumbar puncture.
  - (10)** Bedside ultrasound.
  - (11)** Endotracheal intubation.
- o.** Demonstrate timely and appropriate patient dispositions.
- p.** Demonstrate ability to evaluate an average of 0.8 patients per hour.

## **2. Medical Knowledge**

- a.** Formulate a differential diagnosis based on clinical findings for altered mental status, including chemical, psychological, and organic causes.
- b.** Discuss the indications and techniques for control of hypertension in emergent and urgent conditions.

- c. Demonstrate an understanding of the evaluation and management of vaginal bleeding in the pregnant and non-pregnant female patient.
- d. 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.
- e. Correctly request and interpret radiographic studies for complaints of extremity pain and trauma.
- f. Understand the pathophysiology and principles of acute coronary syndrome, including pharmacologic and procedural interventions and their indications.
- g. List the risk factors and management for gastrointestinal bleeding including both upper and lower sources.
- h. 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.

### **3. Practice-Based Learning and Improvement**

- a. Maintain a patient log for self-assessment regarding patient care issues and expansion of medical knowledge.
- b. Maintenance of a procedure log to document competence of procedures and skills.

### **4. Interpersonal Skills and Communication**

- a. Succinctly and efficiently request consultation for patients requiring specialty management.
- b. Demonstrate appropriate and complete documentation of patients' encounters.
- c. Discuss with appropriate language and terminology significant risk factors and patient modifiable behaviors that increase the patient's risk for developing cardiovascular disease.
- d. Demonstrate the appropriate use of and communications with consultants.

## **XII. Dental Resident Orientation Information for UNSOM Family Medicine Las Vegas Rotation**

### **A. Family Medicine Rotation General Goals and Objectives**

1. 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.
2. Understand the basic principles of physical diagnosis including performance of history, review of systems and physical examination.
3. Gain experience in hospital protocols including in-patient records, orders, and admission and discharge procedures.

### **B. 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.

4. **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 hospitals 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.
- 5. 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.
- 6. 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.
- 7. 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, insurer, 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.

### **XIII. Dental Resident Orientation Information for Mike O’Callaghan Federal Hospital Anesthesia Rotation**

#### **A. 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 (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, the 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 and Doctor of Dental Surgery (DDS) program.

The 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.

The 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 the 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.

The SDM will consider any applicant who demonstrates the ability to perform or to learn to perform the skills listed in these standards. The 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/student's demonstration of such knowledge and skill. Although the 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 DRC. Applicants are not required to disclose the nature of their disability(s) 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]. The 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 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

### a. 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.).

#### **b. 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 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.

The 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.

## APPENDIX B. CLINICAL RETRAINING

**This form may be completed electronically or with ink. It must be issued to the student within 2 working days of incident or event.** Faculty and staff may not initiate a retraining on behalf of another faculty or member. Monitoring of the retraining must be done by a faculty member who agrees to the responsibility. **Faculty and staff may, in some circumstances, initiate a retraining based on egregious behavior reported by another student.**

**Student's Name:** \_\_\_\_\_ **Date of Event or Incident:** \_\_\_\_\_

**Name of Initiator (Staff or Faculty):** \_\_\_\_\_

**Today's Date (must be issued within 2 working days of event/incident):** \_\_\_\_\_

**Location of Event or Incident:** ☐ Team ☐ OS/ER ☐ Pedo ☐ Maryland ☐ Other \_\_\_\_\_

**Remove student from clinic due to patient safety?** ☐ Yes ☐ No ☐ Unsure

### Instructions and Routing for Form:

- Faculty or staff initiates retraining form. Faculty or staff completes relevant sections.
- Within 2 working days of the incident or event, faculty or staff must send by encrypted email with the subject line "[encrypt]: Clinical Retraining- Issue" to student and the individuals listed below:
  - Associate Dean of Academic Affairs, Chair of Student Progress Committee, Chair of Clinical Sciences, Associate Dean of Clinical Services, Assistant Dean of Clinical Services, **Director of Comprehensive Care**, Assistant Dean of Admissions and Student Affairs, **Administrative Assistant for Clinical Sciences, and the monitoring faculty**. Notice will be given **(by whom?)** to all full-time Team Faculty in the student's team. Failure to comply with the requirements of Clinical Retraining or continued unsatisfactory clinical performance may result in further sanctions or change in academic status to Academic Warning, Academic Probation, Repeating Year, or Academic Expulsion (Dismissal).
- Student completes section "Student Perspective of Event or Incident" within 2 working days of receiving the document, then signs and returns by email it to initiating faculty or staff with the subject line "[encrypt]: Clinical Retraining- Student Review"
- Upon completion of the retraining, the monitoring faculty completes the "Outcomes Assessment" section and sends final document to student **and list of individuals above** via secure email with the subject line "[encrypt]: Clinical Retraining- Outcome," within 2 working days of outcomes assessment. The hard copy of the completed form is returned to the student's Team Leader who has it filed in the Team files

## **Description of Event or Incident- Faculty or Staff Perspective**

Use facts that you personally witnessed or experienced. Do not include character judgements.

## **Learning Outcomes for Retraining**

By the end of this retraining the student should be able to...

**Dates for Retraining:** \_\_\_\_\_ to \_\_\_\_\_

**Monitoring Faculty:** \_\_\_\_\_

## **Retraining Learning Requirements**

These requirements should match the intended learning outcomes. Include specific deadlines if there are deadlines for specific assignments within the "Dates for Retraining."

- Readings (provide specific citations and hyperlinks where appropriate):
- Activities (be specific):
- Assignments:
- Other:

## Student Perspective on Event or Incident (completed by student)

- ☐ I agree with the above and have no additional information to add.
- ☐ I agree that I have an opportunity to re-learn in the area described above, however I have additional information to add to the Faculty Perspective, which I will describe below.
- ☐ I disagree with the above and offer my perspective below.

If adding additional information, use facts that you personally experienced or witnessed. Do not include character judgments.

I hereby acknowledge receipt of this Clinical Retraining.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## Outcomes Assessment

Clinical Retraining must be assessed by one of the listed monitoring faculty. That individual must complete the following section:

Print name: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_

**This Retraining was:** ☐ Satisfactory ☐ Unsatisfactory ☐ Incomplete

If “Unsatisfactory” or “Incomplete” are selected, please provide a few sentences below with an explanation.

## APPENDIX C. HANDBOOK VERIFICATION

This is a reminder that it is the responsibility of each student and resident to read, understand, and comply with all policies, rules, regulations and/or procedures relating to their specific program, the SDM, the Graduate College, and University of Nevada, Las Vegas (hereinafter referred to as the “University”).

*\*The SDM 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.*

Please ensure you complete the survey within the 2019-2020 SDM Student Handbook Module within the SDM Academic Policies and Procedures Institutional Course located on WebCampus/Powered by Canvas to document acknowledgment of receipt and review of the most current version of the Handbook (<https://www.it.unlv.edu/webcampus>).