



CDM 4525 - Clinical Pediatric Rotation

I. Course Information

Course: CDM 4525 - Clinical Pediatric Rotation
Semester Credit Hours: 1.00
Course CRN and Section: 24128 - P01
Semester and Year: Fall 2021
Course Start and End Dates: 07/26/2021 - 12/12/2021

II. Instructor Information

Professor: Oscar Alejandro Padilla
Email: poscar@nova.edu
Office Hours:
 By Appointment.

III. Class Schedule and Location

Day	Date	Time	Location	Building/Room
	07/26/2021 - 12/12/2021		Ft Lauderdale/Davie Campus	-

IV. Course Description

This course includes the clinical application of preclinical pediatric dentistry skills in children and adolescents, age range 0 to 21 years old. All patients are treated in a comprehensive care format with emphasis in: nonpharmacological behavioral management, record keeping, comprehensive diagnosis, and treatment planning, prevention including caries risk assessment, pain management, restorative dentistry including composite and amalgam restorations, anterior composites, pulp therapy, stainless steel crowns in primary and mixed dentition. All clinical treatment is accomplished under the direct supervision of faculty members from the Section of Pediatric Dentistry.

V. Course Objectives / Learning Outcomes

Course Learning Outcomes

At the completion of this course, the student will be able to:

1. Apply the principles of child management in the dental office and evaluate the parent-child relationship.
2. Apply appropriate ways to effectively and efficiently provide dental treatment to the child patient.
3. Identify and apply the tooth eruption schedules during the process of diagnosis and treatment planning.
4. Apply different caries prevention strategies including fluoride application, tooth brushing, flossing, nutrition and early caries detection.
5. Assess the pediatric patient for any further treatment needs or when referral is indicated.

COLLEGE OF DENTAL MEDICINE COMPETENCY STATEMENTS Faculty Note: Use the most updated version of the CDM Predoctoral Competency document to select the corresponding competencies for this course. Be sure to select the number of the competency statement and the verbatim competency as it appears on the competency document. For each competency indicate the type of assessment (formative or summative) that will be employed to measure the attainment of the competency.

Core Competencies:

Related Competencies (as defined by educational outcomes):

1. Graduates must be competent in patient assessment, diagnosis, comprehensive treatment planning, prognosis, and informed consent. [CODA Predoctoral Standard 2-24(a)]

Formative Assessment- Daily Clinical grade, Student self-assessment of daily clinical performance (axiUm)

Summative Assessment: Case based multiple choice exam, IPPAs

4. Graduates must be competent in health promotion and disease prevention, including caries management.

Formative Assessment- Daily Clinical grade, Student self-assessment of daily clinical performance (axiUm)

Summative Assessment: Case based multiple choice exam, IPPAs

6. Graduates must be competent in the restoration of teeth.

Formative Assessment- Daily Clinical grade, Student self-assessment of daily clinical performance (axiUm)

Summative Assessment: Case based multiple choice exam, IPPAs

20. Graduates must be competent in the application of the fundamental principles of behavioral sciences as they pertain to patient-centered approaches for promoting, improving and maintaining oral health.

[CODA Predoctoral Standard 2-16]

Formative Assessment- Daily Clinical grade, Student self-assessment of daily clinical performance (axiUm)

Summative Assessment: Case based multiple choice exam, IPPAs

22. Graduates must be competent in applying legal and regulatory concepts related to the provision and /or support of oral health care services.

[CODA Predoctoral Standard 2-18]

Formative Assessment- Daily Clinical grade, Student self-assessment of daily clinical performance (axiUm)

Summative Assessment: Case based multiple choice exam, IPPAs

25. Graduates must be competent in the application of the principles of ethical

decision making and professional responsibility. [CODA Predoctoral Standard 2-21]

Formative Assessment- Daily Clinical grade, Student self-assessment of daily clinical performance (axiUm)

Summative Assessment: Case based multiple choice exam, IPPAs

27. Graduates must demonstrate competence in the ability to self-assess, including the

development of professional competencies and the demonstration of professional values

and capacities associated with self-directed, lifelong learning.

[CODA Predoctoral Standard 2-11]

Formative Assessment- Daily Clinical grade, Student self-assessment of daily clinical performance (axiUm)

Summative Assessment: Case based multiple choice exam, IPPAs

- This refers to the same as the items in the CDM Competency Document

FOUNDATION KNOWLEDGE STATEMENTS FOR THE GENERAL DENTIST

FK1. Apply knowledge of molecular, biochemical, cellular, and systems-level development, structure and function to the prevention, diagnosis, and management of oral disease and the promotion and maintenance of oral health. Dental Anatomy :Select examples include : development and structure of the deciduous and permanent teeth.

FK1-1: Apply knowledge of the structure and function of the normal cell and basic types of tissues comprising the human body. (Encompasses Gross and Head and Neck Anatomy, General and Oral Histology, Dental Anatomy, Occlusion, TMJ, etc.)

FK1-8: Apply knowledge of the principles of feedback control to explain how specific homeostatic systems maintain the internal environment and how perturbations in these systems may impact oral health. (Encompasses in Physiology, Systems Pathology, Oral Medicine, Pharmacology, etc.).

FK2. Apply knowledge of physics and chemistry to explain normal biology and pathobiology in the prevention, diagnosis, and management of oral disease and the promotion and maintenance of oral health: Select examples include : normal blood chemistry and how blood chemistry assists diagnosis of common conditions such as anemia, diabetes, bleeding disorders, cyanosis, and acidosis.

FK2-1: Apply knowledge of the principles of blood gas exchange in the lung and peripheral tissue to understand how hemoglobin, oxygen, carbon dioxide and iron work together for normal cellular function. (Encompasses Physiology, Systems Pathology, Oral Medicine, Pharmacology, etc.)

FK3. Apply knowledge of the principles of genetic, congenital and developmental diseases and conditions and their clinical features to understand patient risk in the prevention, diagnosis, and management of oral disease and the promotion and maintenance of oral health : Ectodermal dysplasia, Amelogenesis imperfecta, Hereditary hemorrhagic telangiectasia, neurofibromatosis, dentinogenesis imperfecta, osteogenesis imperfecta, basal cell nevus syndrome, various bleeding disorders, osteoporosis, and other hereditary conditions. Select examples include
Apply knowledge of the cellular and molecular bases of immune and nonimmune host defense mechanisms in the prevention, diagnosis, and management of oral disease and the promotion and maintenance of oral health.

FK3-2: Apply knowledge of the principles of chemistry to understand the properties and performance of dental materials and their interaction with oral structures in health and disease. (Encompasses Dental Material Sciences, Biomaterials, etc.).

FK4: Apply knowledge of the principles of genetic, congenital and developmental diseases and conditions and their clinical features to understand patient risk in the prevention, diagnosis, and management of oral disease and the promotion and maintenance of oral health.

FK5. Apply knowledge of the cellular and molecular bases of immune and non-immune host defense mechanisms in the prevention, diagnosis, and management of oral disease and the promotion and maintenance of oral health : Select examples include: the role of the immune system in the pathogenesis of periodontal disease, the effect of immunization in the prevention of infectious diseases.

VI. Materials and Resources

Course Required Texts and Materials:

[Recommended readings:](#)

1. AAPD Pediatric Dentistry Reference Manual 2019/2020 Definitions, Oral Health Policies and Clinical Guidelines <http://www.aapd.org/policies>

2. McDonald and Avery Dentistry for the Child and Adolescent, 10th Edition by Jeffrey A. Dean DDS MSD (Author), David R. Avery DDS MSD (Author), Ralph E. McDonald DDS MS LLD (Author)

3. Information available in Canvas (ie. OSCE, announcements, etc)

Faculty Note: Please indicate the textbooks that are **required** for the class and if available, hyperlinks to the textbook. Also, indicate if there are articles or links to required readings that are required for the class *and* the site where the articles are available for the student (such as Canvas, library, database).

Course Supplemental Materials:

Pediatric Dentistry Typodont and Manikins:

ICPAS assignments are completed in the clinic on typodonts inside maniquin heads (see assignments below)

Supplemental, Recommended, Optional, NOT required

The access to all instructional resources included in this course, such as, lectures, handouts, manuals, PowerPoint presentations, videos, photographs, pictures, articles and web links is limited to students who are enrolled in the course and is not for public distribution. The use of these instructional resources is exclusively for non-commercial and non-profit educational use. Students are recommended to download the instructional resources provided in the course, UNLESS, the course director instructs NOT to download specific files. We recommend that all students download, save, and keep the instructional materials from all the courses. These instructional resources will be very helpful references as you progress from year to year in the program.

VII. Course Schedule and Topic Outline

Course Schedule:

Predoctoral [D4] Students will attend the Pediatric Dentistry Rotations during the **Summer** and **Fall** semesters of 2020 and **Winter** semester of 2021 at the following sites:

1. KID Dental Clinic

Group of eight (8) Students attend their Pediatric Dentistry rotation the following days

Monday, Tuesday, Thursday and Friday: From **8:30 am – 5:00 pm.**

819 NE 26th St.

Fort Lauderdale, FL 33305

[\(954\)390-7654](tel:9543907654)

2. Caridad Clinic, Boyton Beach:

Group of eight (2) Students attend their Pediatric Dentistry rotation the following days

Monday and Tuesday From **8:30 am – 5:00 pm.**

8645 W Boynton Beach Blvd, Boynton Beach, FL 33472

[\(561\) 737-6336](tel:5617376336)

“Important note – Please note that due to the current Coronavirus pandemic, course schedules and course activities may be modified now and in future.

Faculty and students are responsible for keeping apprised of these changes and adjusting their schedules accordingly.”

VIII. Instructional Methods

In this section of the syllabus you will find information about any course (instructional, assessment, assignments, benchmarks and/or clinical) modifications that were added to the course as a result of COVID-19

As a result of air flow studies in clinics, a decreased number of treatment room had to be used per session in order for allow ideal air flow (ventilation) on days students shared the clinic with postgraduate students. Otherwise, the routine number of patients were scheduled. Also,

instructional laboratory sessions were added to rotations in order to prepare the students for laboratory tooth preparation/restoration competencies.

IX. Assignments

Description of Assignments, Point Value and Rubrics

Clinical Benchmarks

Students must complete a minimum of _____ clinical procedures:

1. Comprehensive/Periodic Oral Evaluations - how many?
2. Sealants - how many?
3. Radiographs -
4. OHI -
5. Simple Restorative Procedures - how many?

Student daily clinical assessment

Student Name: _____

Date _____

Patient Management	Organization	Record keeping	Professional Conduct	Clinical Judgment	Clinical
Performs to a level well above in patient's behavior , patient's comfort & patient's Education	Prompt attendance/Appropriate set-up	Appropriate consents in place. Procedure, POI & pat. discussions documented. Billing codes entered and approved.	Student interacts ethically and respectfully with faculty, staff, and other students.	Student has a solid grasp of patient data and can correlate findings with appropriate treatment planning.	Student prepares the diagnosis, performs dentistry, and communicates with faculty
Patient understanding of pre- and post-op instructions.	Tx Planning/Sequencing/Execution	Findings documented in EHR. Student is able to navigate all necessary areas related to patient treatment	Student understands and utilizes appropriate referral processes	Asks insightful questions and seeks more knowledge.	

Infection Control / OSHA	Time Management / Organization	X-rays (MiPAcs) properly templated, labelled & approved			
Score (1-4) see table below					
Student Assessment					
1: Needs remediation Below standard Faculty Intervention	2: Needs improvement Acceptable Faculty Assistance			3: Competent Meets expectations Works independently	
				4: Exceptional exceeds expectation Independent	

Faculty Signature _____

For Faculty use only: Evaluation of student self-assessment

5: High level of agreement (H)	0: Minimal lack of agreement (N)	-5: Large lack of agreement (L)
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Pediatric Dentistry IPPA

Restorative and Pulp Treatment for Primary Teeth (anterior and posterior):

1. Class II amalgam/ composite preparation
2. Pulpotomy preparation
3. Stainless Steel Crown preparation and restoration
4. Strip crown preparation and restoration

Review rubrics provided below to challenge IPPA - a minimum of two (2) practice sessions must be completed prior to attempting the IPPA competency practical examinations.

Minimum number prior IPPA

Type of Competency Exam

Competency

Statements Assessed

- 2 (typodont) - IPPA
- 2 (typodont) - IPPA
- 2 (typodont) - IPPA
- 2 (typodont) - IPPA

Class II Preparation/Restoration

CODA Standard 2-24(a)

Pulpotomy Preparation/Restoration

Stainless Steel Crown Preparation/Restoration

Strip Crown Preparation/Restoration

CRITERION	CLINICALLY ACCEPTABLE	NEEDS IMPROVEMENT	CLIN UNACCEPTABLE	
External outline Occlusal	1. Occlusal outline: - extended to include contiguous fissures with retention and resistance form - isthmus \geq 1/3 intercuspal width	1. Occlusal outline moderately: -over extended -under extended -isthmus moderately: wide/narrow	1. Occlusal outline extremely: -over extended \geq 2/3 intercuspal width -under extended - isthmus extremely: wide/narrow	V I r d i c u p
External outline Proximal	2. Buccal, lingual, and gingival walls just break contact with adjacent tooth	2. Proximal box moderately: - over extended - under extended	2. Proximal box extremely -over extended (past line angle) -under extended (proximal contact not broken)	T f
Internal outline Occlusal	3. Pulpal floor depth is 1.5 mm (0.5 mm into dentin or consistent with extent of caries)	3. Pulpal floor moderately: -shallow -deep -not parallel to DEJ	3. Pulpal floor extremely: -shallow -deep -not parallel to DEJ	N # l
Internal outline Proximal	4. Gingival floor parallel to the occlusal plane - gingival floor width is 1 mm 5. Axial wall-same contour as outer proximal surface and to the DEJ	4. Gingival floor not parallel to occlusal plane -gingival floor width is moderately: -deep -shallow 5. Axial wall not parallel to the DEJ	4. Gingival floor extremely sloping -affects resistance/retention form -width is extremely: -deep (>1.5 mm) -shallow (\leq 0.5mm) 5. Axial wall extremely not parallel to the DEJ	V V P E
Taper	6. Slight convergence on Buccal/lingual 7. Slight divergence on Mesial & Distal walls of the occlusal preparation (6°-12° each wall)	6. Convergence moderately: -Excessive -Inadequate 7. Divergence moderately: -Excessive \geq 18° -Inadequate <6°	6. Convergence severely: -Excessive -Inadequate 7. Divergence severely: -Excessive -Inadequate	V # o
Flare	8. CSM 90° (restoration will form 90° angle to CSM)	8. Flare moderately excessive	8. Flare is extremely: - excessive - divergent	V I
Definition	9. Internal line angles and wall consistent with resistance form and slightly rounded	9. Line angles or wall moderately: -rounded/sharp	9. Line angles or wall extremely: -rounded/sharp	V U r
Finish	10. Walls, floors and cavo-surface margins are regular, smooth, and follow arcs and curves	10. Walls, floors or cavo-surface margins have catches, do not follow arcs and curves	10. Walls, Floors or cavo-surface margins have steps	L o
Tissue management	11. No unnecessary damage to hard or soft tissue	11. Hard or soft tissue abraded	11. Hard tissue damaged or soft tissue lacerated	V
Infection Control	12. Appropriate PPE used		12. Not compliant w standard precautions (-30%)	

Total points: Clinically Acceptable: _____ Needs Improvement: _____ Clin Unacceptable: _____

Student should self-evaluate with underline of criteria; faculty will evaluate with circle.

PEDIATRIC DENTISTRY/ PULPOTOMY PROCEDURE

Name _____ Tooth #: _____ Date: _____ Instructor: _____

CRITERION	Clinically Acceptable	Needs Improvement	Clinically Unacceptable
External outline	1. Occlusal/outline extended to include retentive fissures	1. Occlusal/outline moderately: -over/under extended	1. Occlusal/outline extremely: -over/under extended
Access opening/Internal outline Position	2. Resembles the shape of the pulp chamber 3. No undercut 4. Walls are smooth 5. Walls follow arcs and curves of the external anatomy	2. Moderately over/under extended: B/L/M/D 3. 1 undercut 4. Walls are slightly rough 5. Walls generally follow arcs and curves of the external anatomy	2. Extremely over/under extended: B/L/M/D 3. >1 undercut 4. Walls are not smooth 5. Walls do not following arcs and curves of the external anatomy
Pulpal Floor Involvement	6. Pulp floor chamber is intact	6. Pulpal floor chamber is intact but bur marks at the floor of the chamber	6. Bifurcation/Trifurcation involvement (actual perforation typodont tooth or what would translate to an estimated perforation in a clinical tooth)
Definition	7. Internal wall is: -smooth -free of gouges	7. Wall is moderately: -rounded/sharp	7. Wall is extremely: -rounded/sharp
Tissue management	8. No unnecessary damage to hard or soft tissue	8. Hard or soft tissue abraded	8. Hard tissue damaged or soft tissue lacerated
Infection Control	9. Protective eyewear, mask, and gloves worn		9. Personal protective gear not utilized

Total points: Clinically Acceptable: _____ Needs Improvement: _____ Clinically Unacceptable: _____

Student should self-evaluate by underlining; faculty will grade with circles.

PEDIATRIC DENTISTRY / STAINLESS STEEL CROW

Name: _____ TOOTH# _____ DATE: _____ INSTRUCTOR _____

CRITERION	CLINICALLY ACCEPTABLE	NEEDS IMPROVEMENT	CLINICALLY UNACCEPTABLE
Occlusal Reduction	1. Reduction: -follows contour -is uniform 1.5 mm	1. Reduction is slightly: -irregular 1-1.5 mm -inadequate <1.0 mm -excessive >1.5- 2.0 mm	1. Reduction is grossly: -inadequate ≤ 0.4 -excessive >2.0mm
Proximal reduction	2. Reduction: -opens contacts -follows contour -is ≤ 1.0 mm/width of the bur	2. Reduction: -slightly irregular -slightly excessive >1.0-<2.0mm	2. Reduction: -fails to open contacts -grossly irregular -grossly excessive
Taper	3. M/D walls: -taper of bur 6° - 10° -slight convergence	3. M/D walls: - are parallel - moderate convergence	3. M/D walls: -diverge -excessive convergence
Margin	4. No detectable margin	4. Margin is slightly detectable	4. Ledge present: -M/D/B/L.
B/L Reduction	5. Bevel is: -present on occlusal 1/3 of the buccal /lingual surface	5. Bevel is slightly: -inadequate (<occlusal 1/3) -excessive (into middle 1/3)	5. Bevel is: -missing -into the cervical
Finish	6. Preparation: -is smooth -has slightly rounded line angles	6. Preparation: -has scratches -line angles are sharp	6. Preparation: -has catches -excessively rounded angles
Tissue Management	7. Supporting soft slightly abraded		7. Soft tissue laceration treatment
Proximal Tooth Damage	8. No unnecessary damage to the proximal teeth	8. Slight scratches present	8. Deep gouges present need treatment
Infection Control	9. Appropriate personal protective barriers used		9. Not compliant with standard precautions

Total points Clinically Acceptable: _____ Needs Improvement: _____ Clinically Unacceptable: _____

Student should self-evaluate with underline; faculty will grade with circle.

PEDIATRIC DENTISTRY/ COMPOSITE STRIP CROWN PREPARATION

Name: _____ Tooth #: _____

Date: _____

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CRITERION	ADVANCED	PROFICIENT	STANDARD NOT MET
Preparation of tooth Incisal reduction	1. Incisal reduction is 1-1.5 mm	1. Incisal reduction is slightly: -irregular -inadequate (0.5 – 1 mm) -excessive (1.5-2 mm)	1. Incisal reduction is grossly: -inadequate < 0.5 mm -excessive > 2 mm
Interproximal reduction	2. Interproximal reduction is 0.5-1.0 mm -opens contacts 3. Feather edge finish 4. Walls are slightly convergent -taper is 6-15 °	2. Interproximal reduction is 1-1.5 mm 3. Slight ledge or irregularity of interproximal wall -margin is slightly detectable 4. Walls are: -parallel -have moderate convergence -one wall has excessive taper	2. Interproximal reduction is grossly: -fails to open contact -is grossly excessive (> 1.5 mm) 3. Deep gouge/Ledge or notch 4. Walls grossly divergent or convergent.
Facial and Lingual reduction	5. Facial reduction begins as feather edge and increases to approximately 1 mm -reduction follows contour of tooth -knife edge margin at the free gingival margin 6. Bevel is present on occlusal 1/3 of facial 7. Lingual reduction begins as feather edge and increases to assure 0.5 mm clearance	5. Facial reduction is slightly: -inadequate -excessive -margin is slightly above/below the free gingival margin 6. Bevel is: -inadequate (< occlusal 1/3) -excessive (into the middle 1/3)	5. Facial reduction is grossly: -inadequate (< .5 mm) -excessive (>2 mm) -margin excessively above/below the free gingival margin 6. Bevel is: -missing -into the cervical 1/3 7. A lingual contact exists
Finish	8. Preparation -Facial and lingual are smooth -has slightly rounded line angles	8. Preparation: -Facial and lingual have scratches -has line angles moderately rounded or sharp	8. Preparation: -Facial and lingual have excessively rounded or sharp
Preparation of Mylar Strip Crown (MSC)	9. MSC margin extends below finish line/FGM -incisal edge may be slightly longer than adjacent teeth 10. MSC fit allows space around the tooth for composite 11. Vent present on MI from the inside-out	9. MSC margin: -slightly irregular -slightly rough	9. MSC margin: - supragingival -above the finish line 10. Inadequate space around tooth for composite 11. No vent present
Restoration	12. Crown form removed - excess resin removed from margins and smoothed -no damage to the facial composite 13. Crown is aligned with long axis of tooth	12. Composite crown has: -some composite flash at margin -minor abrasion to the facial	12. Crown form not removed -crown form cracked or chipped prior to or during light curing 13. Crown is angled to the cervical or lingual
Tissue management	14. Supporting soft tissue slightly abraded		14. Soft tissue lacerated or severely irritated Treatment -on interproximal/facial
Proximal tooth damage	15. No unnecessary damage to the proximal teeth	15. Slight scratches present	15. Deep gouges present or treatment

Total points: Advanced: _____ Proficient: _____ Standard not met: _____

Department of Pediatric Dentistry

Pediatric Dentistry Restoration ICPA Form

Pediatric Dentistry CDM 4525

KID Dental Clinic

Student _____

Student No. _____

Evaluation Criteria

Tooth Preparation

Adequate Isolation

Adequacy of preparation

Appropriate depth/extent of preparation

Matrix adaptation

Access cavity preparation related to dental and pulpal morphology

SSC adaptation

Final restoration

Restoration Procedures	1	2	3	4
Class II Preparation & Restoration-Composite/Amalgam				
Pulpotomy				
Stainless Steel Crown preparation & Adaptation				
Strip Crown Preparation & Restoration				

1	2	3	4
Clinically unacceptable	Clinically Acceptable	Meets expectations	Competent, Independent

The above named student has passed this ICPAS Yes _____ No _____

Comments _____

Faculty Name _____

Faculty Signature _____

Pediatric Dentistry - Case Based Written Exam -

36 question Quiz, involving case scenarios with pictures, multiple choice and True/False questions.

(Review materials to challenge Case Based Written Exam listed above: AAPD.org, McDonald and Avery textbook - under Materials and Resources)

The examination will be administered using ExamSoft in the Winter Term 2022 - Date/Time: **Thursday, Feb. 10** (7:00PM – 10:30PM)

X. Grading Criteria

Provide a List of all the graded work in the course (Assessments, Class Activities, Classwork and Assignments) with Point or Percentage Values, or required Completion item.

Grading Scale:

40% Faculty assessment of daily clinical student performance (*SCA*)

5% Student self-assessment of daily clinical student activities

25% OSCE (Objective structured clinical examination) The OSCE is an on-line comprehensive examination that consists of multiple patient cases based on clinical scenarios.

Students are provided with the patients' oral and radiographic examinations, medical history and social history. Based on the information provided, the students are tested on their ability to identify a clinical approach to pediatric patients at various stages of life from infants, children and adolescents, including children with special health care needs. Using a multiple choice format, students are required to answer questions related to all aspects of providing oral health care to these patients. For example, the cases included on the OSCE cover topics including informed consent, patient behavioral guidance, pain and anxiety control, oral health promotion and disease prevention, and clinical treatment options. will be completed in Blackboard. Instructions will follow.

30% Individual _____ Performance Assessment (*IPPA*) - Rubric will be provided

Course Final Grade Mode for the course (Pass/Fail, PR/NPR or Letter Grade). For a continuum course, please specify the grade mode for each semester.

Final Course Grade:

Summer, Fall Semesters: PR/NPR

Winter: Final Grade, Letter Grade Mode

Course Grading Scale

Letter Grade	GPA	Equivalence
A	4	93 to 100
A-	3.75	90 to < 93
B+	3.5	86 to < 90
B	3	83 to < 86
B-	2.75	80 to < 83
C+	2.5	76 to < 80
C	2	70 to < 76
F	0	<70

XI. Course Policies

COURSE ATTENDANCE REQUIREMENTS, REMEDIATION POLICY, ALL CDM POLICIES

Attendance Policy : Please refer to appropriate pages of the NSU-CDM 2020-2021 Student Handbook.

Link to the handbook:

<https://liverootnova.sharepoint.com/dentmed/Active%20Docs/Policies%20and%20Procedures/Pre%20a2020%20CDM%20PreDoctoral%20Student%20Handbook.pdf?wa=wsignin1.0>

Remediation Policy: Please refer to appropriate pages of the NSU-CDM 2020-2021 Student Handbook.

“Successful completion of each CDM course requires compliance with the CDM Code of Behavioral Conduct.”

CDM College Attendance Policy Please note that, the Office of Admissions, Student Affairs and Services manages excused absences including sick days, mission trips, dental meetings, externships, interviews, family events, and other personal leave time, etc. and all student absences will continue to be tracked in axiUm. (Please refer to NSU Wide Religious Holidays Policy in the Student Handbook.) • Planned excused absences: please fill out the appropriate paperwork, with backup documentation (e.g. physician’s note), and submit on the online portal for the Office of Student Services prior to the scheduled absence, so that we can approve the leave time, and help you map out a plan to make up the work. It is the student’s responsibility to inform the course director for any courses you will be missing, your team leader for any clinic sessions that will be missed and/or the Coordinator of Extramural Programs (Dr. Mairelina Godoy), etc. of your planned absence(s). • Unplanned excused absences: please email Dr. Galka at agalka@nova.edu with a cc to cdmservices@nova.edu to report that you will be out, the reason for your absence and to also let us know if you plan to return to school the following day. You should also email the course director for any courses you will be missing, Dr. Mairelina Godoy mg1189@nova.edu for any rotations you will be missing and/or your team leader for any clinic sessions scheduled for that day. You must continue to email us daily to keep us updated if you will be out additional days and you can submit your SREA form together with backup documentation when you know the date you will return to school. • The student will be responsible for making up all missed rotations, all material presented in lectures, all laboratory projects, all written and practical examinations (including OSCEs) and must fulfill all didactic and clinical responsibilities as outlined in the individual course syllabi. Also, please review the attendance policy in the individual course syllabi. • Please do not schedule externships or interviews when you are scheduled for an examination or rotation. • Remember, it is your responsibility to reach out to our office for any unexcused absences to see if these fall under excused absences and/or to see how the unexcused absence will be managed. Also, please contact Dr. Mairelina Godoy directly to arrange makeup of any and all missed rotations, which will take place during optional clinicweeks. • Every student will be able to take 1 Personal Day/per Semester (3 Personal Days/Academic Year) with NO BACKUP DOCUMENTATION REQUIRED, provided the day(s) are not taken when you are scheduled for a rotation, written examination, practical/competency examination, OSCE or taken directly before/after a school holiday, etc. These absences will be managed through our office and designated as excused absences, provided our office is notified by email in advance or on the day of the absence. (Please indicate in the email if you will be using a personal day and designate D-1, D-2, D-3 or D-4 student.) For any additional absences to the 1 Personal Day/per semester, or in the event that you will be missing a written examination, a preclinical or clinical practical/competency examination, including an OSCE, or rotation, backup documentation WILL be required. Again, it is the student’s responsibility to notify all course directors, team leaders, and/or the Coordinator of Extramural Programs, etc. affected by your absence(s). Please check your individual schedule before requesting a personal day, to be sure that you will not be missing a rotation or an exam. A personal day will be recorded as a full day. (Half days cannot be requested.) A personal day must be requested on or before the day in question and cannot be used

retroactively. **COVID-19 Protocol (subject to change)**1. NO STUDENT IS TO COME TO SCHOOL SICK- if you do not feel right- please do NOT come to school. Email Dr. Galka- Assistant Dean for Admissions, Student Affairs and Services (agalka@nova.edu) 2. If a student has had direct/close contact with someone who has been infected with COVID-19 or is experiencing COVID-like symptoms- immediately self- isolate/quarantine. Email Dr. Galka and Dr. Schweizer- Director Infection Prevention Programs (schweize@nova.edu). a. Direct Exposure/ Asymptomatic: test on day 7- if negative test result- can come back after 10 days : if NO test- quarantine 14 days b. Symptomatic (with or without Direct Exposure): test immediately and then again on day 7- if negative test result on day 7- can come back after 10 days : NO test- quarantine 14 days and must be symptom-free for 72 hours 3. If a student tests positive for COVID-19: remain self-isolated. To return to school: student needs to have 2 consecutive negative test results in a row (at least 24 hours apart). 4. Students who are in quarantine, need to contact both Dr. Galka and Dr. Hernandez (marher@nova.edu) to determine if they can participate in online courses during this time

XII. University Policies

Section XII. University Policies:

Class content throughout this course may be recorded in accordance with the NSU Class Recording Policy. If class content is recorded, these recordings will be made available to students registered for this course as a supplement to the classroom experience. Recordings will be made available to all students who were registered to attend the live offering of the class, regardless of a student's section or discipline, or whether the student is participating in the course online. If recordings are intended to be accessible to students or third parties who were not registered for the live offering of the class, students' personally identifiable information will be removed or redacted from the recording, unless (1) their written consent to such disclosure was previously provided, or (2) the disclosure is permissible in accordance with the Family Educational Rights and Privacy Act ("FERPA").

Students are prohibited from recording audio or video, or taking photographs in classrooms (including online classes) without prior permission from the instructor or pursuant to an approved disability accommodation, and from reproducing, sharing, or disseminating classroom recordings to individuals outside of this course.

Students found engaging in such conduct will be in breach of the Student Code of Conduct and subject to disciplinary action.

Academic Integrity: Cheating or inappropriate behavior during any written examination, quiz, any assignment, any project; plagiarism of any work(s), or other unethical behavior will not be tolerated; the student risks receiving a grade of zero (0) for said examination, quiz, assignment, project and may be referred to the Associate Dean for Academic Affairs and the Student Progress Committee. Please refer to appropriate pages of the NSU-CDM 2020-2021 Student Handbook. and the NSU Student Handbook located at

<https://liverootnova.sharepoint.com/dentmed/Active%20Docs/Policies%20and%20Procedures/Pre%20and%202020%20CDM%20PreDoctoral%20Student%20Handbook.pdf?wa=wsignin1.0> .

Plagiarism Policy: All assignments, exams, works, patient care - written, laboratory, oral, clinical must be done as the independent work of each individual student. Plagiarism, copying or sharing the work of another or altering documentation to reflect something is your own work that is not; reflect false attendance, are considered serious offences that will not be tolerated. THESE ACTIONS WILL BE CONSIDERED IN VIOLATION OF THE UNIVERSITY AND THE CDM CODE OF BEHAVIORAL CONDUCT AND WILL BE REFERRED FOR APPROPRIATE ACTION. Students who need assistance in their learning goals should communicate with the appropriate NSU-CDM course director and/or faculty. Please refer to appropriate pages of the NSU and the CDM 2020-2021 Student Handbook. Following a link to the NSU Student Handbook

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