

**INFORMATIONAL REPORT ON PEDIATRIC DENTISTRY
PROGRAMS ANNUAL SURVEY CURRICULUM DATA**

Background: At its Winter 2015 meeting, the Commission directed that each Review Committee review a draft of its discipline-specific Annual Survey Curriculum Section during the Winter meeting in the year the Survey will be distributed. The Commission further suggested that each Review Committee review aggregate data of its discipline-specific Annual Survey Curriculum Section, as an informational report, when the materials are available following data collection and analysis. The Commission noted that all survey data is considered confidential at the programmatic level.

The Curriculum Section of the Commission's Annual Survey is conducted for pediatric dentistry education programs in alternate years. The most recent Curriculum Section was conducted in August/September 2022. Aggregate data of the most recent Curriculum Section for review by the Pediatric Dentistry RC is provided as an informational report in **Appendix 1**.

Summary: The Review Committee on Pediatric Dentistry Education is requested to review the informational report on aggregate data of its discipline-specific Annual Survey Curriculum Section (**Appendix 1**).

Recommendation: This report is informational in nature and no action is requested.

2022-23 Pediatric Dentistry Curriculum Survey Results

This report includes data collected in the 2022-23 *Survey of Advanced Dental Education* from 84 pediatric dentistry programs accredited at the time of the survey.

21. What percentage of time do students/residents devote to each of the following areas during the entire program?

Field	Minimum	Maximum	Mean	Count
a. Clinical (include related laboratory activity)	50.0	85.0	67.9	84
b. Didactic (include assigned laboratory activity)	5.0	35.0	18.4	84
c. Research	1.0	20.0	7.2	84
d. Teaching	0.0	13.0	4.8	84
e. Other, please specify	0.0	22.5	1.7	84

e. Other, please specify - Text

Advocacy & Offsite Rotations

Advocacy/Outreach (2)

Community Outreach

Community Service/Outreach

Community outreach, elective time, AAPD courses, PTO

First year rotations

Grading dental student OSCE exams

Head Start Special Project

Hospital Rotations

Leadership, enrichment, professional Development

Off-Service Rotations

Outreach (2)

Quality Improvement

Rotations (3)

Rotations, IPE, continuing education, etc.

Service to community

advocacy, public policy, professional meetings

22. Please estimate the total number of clock hours (didactic and clinical) of instruction students/residents receive in each of the following subject areas during the entire program.

Field	Minimum	Maximum	Mean	Count
a. Biomedical Sciences (Biostatistics and Clinical Epidemiology, Pharmacology, Microbiology, Embryology, Genetics, Anatomy and Oral Pathology)	0.0	1700.0	174.9	81
b. Behavior Guidance (Non-pharmacological techniques, Sedation, and Inhalation analgesia)	0.0	3000.0	570.5	81
c. Growth and Development (Craniofacial growth and development/Normal and abnormal physical, psychological and social development)	0.0	2000.0	255.7	81
d. Oral Facial Injury and Emergency Care	0.0	3000.0	294.2	81
e. Oral Diagnosis, Oral Pathology and Oral Medicine and Radiology	0.0	3500.0	299.4	81
f. Prevention and Health Promotion	0.0	4000.0	403.3	81
g. Comprehensive Dental Care	0.0	4000.0	903.8	81
h. Management of a contemporary dental practice (e.g., Ethics)	0.0	1700.0	83.6	81
i. Patients with Special Care needs	0.0	2000.0	387.2	81
j. Hospital dentistry	0.0	4000.0	436.1	81
k. Pulp therapy	0.0	2000.0	220.7	81
l. Pediatric medicine (i.e., Speech and language development)	0.0	2580.0	150.1	81
m. Advocacy	0.0	1000.0	59.6	81
n. Other, please specify	0.0	1728.0	31.0	81

n. Other, please specify - Text

Daily clinical training.

Global Health, Social Determinants of Health, Cultural Diversity, Telehealth-Teledentistry

Multi-specialty clinics

Ortho

Practice Management

Quality Improvement, Research

Restorative, Child Development, Dental Materials, Leadership

23. In which of the following conscious sedation techniques did students/residents receive *instruction* during the 2021-22 academic year?

Question	Yes	No	Total
a. Oral	98.8%	1.2%	81
b. Inhalation	95.1%	4.9%	81
c. Intramuscular	69.1%	30.9%	81
d. Intravenous	80.2%	19.8%	81
e. Other, please specify	37.0%	63.0%	81

23. In which of the following conscious sedation techniques did students/residents receive *clinical experience* during the 2021-22 academic year?

Question	Yes	No	Total
a. Oral	98.8%	1.2%	81
b. Inhalation	92.6%	7.4%	81
c. Intramuscular	32.1%	67.9%	81
d. Intravenous	55.6%	44.4%	81
e. Other, please specify	33.3%	66.7%	81

e. Other, please specify - Text

General Anesthesia

Intranasal (24)

Intranasal (considered different than inhalation at our institution)

Submucosal / Intranasal (3)

Transmucosal, intranasal

submucosal

24. What is the average number of general anesthetic patients managed by each student/resident during the 2021-22 academic year?

Patients per student/resident	Minimum	Maximum	Mean	Count
a. Hospital-based general anesthetics	0.0	250.0	48.9	81
b. Clinic/Office-based general anesthetics	0.0	112.0	6.0	81
c. Other, please specify	0.0	50.0	1.2	81

c. Other, please specify - Text

IV sedation

Oral Sedation (2)

oral sedation with midazolam and N2O

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24) This is the number for each resident during that academic year.

24. This average is calculated using 2nd year resident data, as they are the ones who rotate through the O.R. The number represents how many cases each resident managed through all phases of care as primary operator. A total of 186 patients were treated divided by 9 residents which equals an average of 20.67 patients.

Average includes first and second year residents.

Due to COVID, the operating room was closed for seven months.

IV and IM instruction is provided both via didactic learning as well as simulated during the medical emergencies and sedation simulation training they complete in our medical simulation center. The increase in the number of Hospital-based GA cases per resident comes from the residents having a required minimum of 10 primary operator GA cases and an additional 10 cases where they serve as observers/assistants with the purpose of gaining more GA experiences.

Instructional hours reported in question 22 are not mutually exclusive; an hour of program clock time is likely to include discussion of multiple topics, and is therefore reported in multiple categories.

It is difficult to quantify the clock hours for didactic and clinical instruction in the various categories. As a hospital-based program, instruction is provided both in the classroom and clinic setting and is very dynamic throughout residency training. The clock hours listed are a best approximation for the number of classroom hours combined with the number of clinical experiences in each area with consideration that a faculty member may be directly assisting the resident and/or answering clinical questions. Instruction hours and clinical experiences during rotations were also factored into the totals.

Note for #22: Residents receive instruction for each subject in both clinical and didactic settings. It is difficult to respond accurately and specifically to Item #22 in that there is extensive overlap between didactic and clinical learning in essentially all subject areas. Thus, the numbers in the "clock hour" boxes for item #22 reflects didactic hours only. Additionally, total hours include not only formal seminar hours but also exposure to the topic throughout the curriculum.

QUESTION 22- The numbers of hours presented are related to the didactic portion of the curriculum only. It would be almost impossible to calculate the number of hours the residents spent in clinic for all the above areas.

Residency Program to commence July 1, 2023. Comprehensive care delivery will be primary patient care goal of the program for each patient.

Sedation permits in the state are geared toward deep (parenteral) sedation and as such, most cases done are IV

The 115 patient average only pertains to the 2nd year residents as the 1st and 3rd year residents only rotate to the OR service.

The Department of Pediatric Dentistry has two in-house general anesthesia suites. There are also three in-house general anesthesia suites in the Center for Patients with Special Needs. Our residents spend two semesters treating adult special needs patients one-half day/week to receive additional general anesthesia training.

25. How many patient visits were managed by all students/residents during the 2021-22 academic year?

Field	Minimum	Maximum	Mean	Count
	0.0	90000.0	11584.5	81

26. Of all the patient visits identified in Question 25, what percentage were patients with diagnosed emotional, physical, or mental problems managed by the advanced pediatric dentistry students/residents?

Field	Minimum	Maximum	Mean	Count
	5.0	85.0	35.4	76

27. Please indicate whether each hospital service rotation is required or an elective.

Question	Required	Elective	Not applicable	Total
a. Anesthesiology	100.0%	0.0%	0.0%	84
b. Emergency Room	78.6%	3.6%	17.9%	84
c. Pediatric Medicine	98.8%	1.2%	0.0%	84
d-f. Other	87.1%	12.9%	N/A	139

27. Please indicate the total length of each hospital service rotation in weeks.

Length in weeks	Minimum	Maximum	Mean	Count
a. Anesthesiology	2.0	8.0	4.3	84
b. Emergency Room	0.0	48.0	4.3	72
c. Pediatric Medicine	1.0	48.0	3.5	84
d-f. Other	0.1	52.0	6.4	139

27. Please indicate whether the number of hours per week spent by students/residents on each rotation.

Hours per week	Minimum	Maximum	Mean	Count
a. Anesthesiology	8.0	50.0	37.8	84

b. Emergency Room	0.0	80.0	32.5	72
c. Pediatric Medicine	8.0	80.0	37.9	84
d-f. Other	1.0	50.0	21.2	139

27d-f. Please identify other hospital rotations not listed in lines a-c above.

Adult Special Health Care Needs
Ambulatory/medical sub-specialties rotation
Anesthesiology
REDACTED Children's Hospital
Autism Center
Cardiology
Child Life
REDACTED OR
Cleft and Craniofacial Team
Cleft Palate
Cleft palate/crainofacial anomalies team
Cleft/Craniofacial Clinic
Community Clinics
Conscious Sedation
CPTI- Community Partnership Training Initiative
Craniofacial (10)
Craniofacial and Cleft Lip/Palate
Craniofacial Anomalies (2)
Craniofacial Anomalies Clinic
Craniofacial Clinic (6)
Craniofacial Team (2)
Craniofacial/cleft palate (2)
Developmental Medicine
Developmental Pediatrics
Domestic Abuse Response Team
Emergency
Emergency Call
Emergency room-general
ENT (2)
ER-OMFS
Foster Care
Genetics
REDACTED Oncology Clinic
Hematology Clinic
Hematology Oncology (9)

hematology/oncology pediatric medicine
Hemophilia Team
Hospital rotator/consults
In-patient
IV sedation
Laser
REDACTED Clinic
M&M infectious disease Pediatric Medicine Morning Reports
Medicine
Neurobehavior
NICU
NICU / PICU
OB-GYN
Office visits
OMFS (3)
OMS
On-Call (home call)
Oncology
Operating Room (4)
Oral Maxillo-Facial Surgery
oral pathology
Oral Surgery (7)
Orofacial Anomalies Clinic
Orthodontics (2)
Outpatient peds medicine
Pediatric Genetics
Pediatric Infectious Disease
Pediatric Inpatient
Pediatric Medicine
Pediatric Otolaryngology
Pediatric Outpatient medicine
Pediatric Physical Assessment
Pediatric Plastic Surgery
Pediatric Subspecialty
Pediatrics (REDACTED)
Plastics
Plastics/Corneal Delange/Spina Bifida
Primary Care
private office
Private Office Externship
Research

Sedation (2)
Sedation Clinic
Sickle Cell
Special Care Dentistry
Special Needs (3)
Special Needs Patients
Speech Pathology
REDACTED (dental clinic)
REDACTED (Hematology/Oncology)
Subspecialty Pediatrics
Subspecialty rotations
Teaching (2)
Teaching
REDACTED OR
TMJ
REDACTED
Van-based Clinic

28. How many formal documented student/resident evaluations are conducted per year?

Field	Minimum	Maximum	Mean	Count
	2.0	200.0	5.8	84

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D rotation is for second year residents only

3 formal evaluations in first year, 2 in second year (5 total per residency)

Additional rotations include: Trauma call (24 weeks/after hours emergency trauma call), Teaching at REDACTED Dental School (6 weeks/8 hours per week)

Each resident receives a formal clinical evaluation which is compiled from individual evaluations from all clinical faculty. Each resident receives a transcript report each semester from the REDACTED for all coursework completed during the semester.

First year residents receive an additional evaluation at the 90 day mark of their first year.

Informal or additional evaluations are conducted as needed.

Initial accreditation received Aug 2022. The first class will start on Nov 1, 2022

Minimum of 2 formal evaluations. First year residents may have more evaluations

On the rotations above, the number of weeks is by resident, and not for the entire year of the program.

Pediatric Dentistry Residency Program will commence July 1, 2023.

Pediatric Medicine Rotations include Hematology/Oncology, General Pediatrics, Cardiology, in addition to Emergency Medicine, Craniofacial, and Anesthesia.

quarterly clinical progress evaluations by all faculty; bi-annual formative evaluations with program director

Residents are now evaluated daily for their clinical performance.

Residents receive semi-annual evals. However, they receive evaluations via quizzes, peer review presentations, clinical competency, oral discussions in clinic as well as on rotation

Specialty medicine rotation postponed in 2021-2022 due to COVID. Rotation is being re-considered for 2022-2023.

The emergency department rotation is not required per the CODA guidelines, so we do not require a rotation. However, our dental residents are on call one out of every 5 nights for the emergency department and are called in frequently to treat emergency patients.

The Sedation Clinic and Hematology Clinic were "Required" prior to the COVID-19 pandemic, and have been "Elective" post-pandemic, however we are in the process of reinstating these as required rotations.

We assume question #28 is asking about "big-picture" evaluations, such as program director's evaluations, not rotation preceptor evaluations or evaluations of assignments, presentations, or specific clinical efforts. Each resident receives this type of formally documented feedback biannually.

We conduct formal resident evaluations quarterly.

We have a monthly rotation in the Developmental Pediatric Clinic, 4 hours per week. We also participate in Craniofacial Clinic 8 hours per month. Residents are assigned on a rotational basis.