

**College of Dentistry
CURRICULUM COMMITTEE**

January 30, 2015

Present: Cunningham-Ford, (Chair), Burke, Caplan, Case, Clancy, Eckert, Garcia, Hindman, Hoffmann, Holmes, Justman, Lindquist, Marshall, Nelson, Orgill, Straub-Morarend, Timmons, Weistroffer

Absent Cowen, Hernandez, Kwon, , Schneider, Solow, Vargas

Guest: Johnsen

The Chair welcomed Mr. Nelson (D1) to his first Committee meeting.

1.0 Approval of December 15, 2014 Minutes

The motion was made and seconded to approve the minutes from the December 15, 2014 meeting as written. Hoffmann/Weistroffer

2.0 Prosthodontics Curriculum Review Follow-Up

The Committee was asked to review the attachment from Dr. Holloway, responding to the questions forwarded by the Working Group. Input was requested from Curriculum committee members. The review process is ongoing and additional questions and concerns will be addressed at a later date.

3.0 National Board Exams

The Curriculum Management Plan includes National Board Exam scores as a collegiate outcome measure. The tables present failure rates from 2009 through 2013 for University of Iowa students compared to national average.

Part I: Iowa scored a low failure rate—average = 6.3% vs 6.0 for U.S., across the last 5 years.

A breakdown of scores by topic is no longer provided. . The aggregate scores for 2014 will not be available until later this year.

Part II: Iowa students' failure rate is only 1.4% over last 5 years (98.6% pass rate). The national average failure rate is 10 %.

Comments:

Applicants often ask about students' performance on the National Board Exams. Ms. Eckert will include this information in the Visit Day curriculum presentation. The tables will be reconfigured to indicate pass rates rather than failure rates. (Attached)

4.0 Clerkship Directors Committee Update from Dr Justman

1. The Committee is working on point of care chair side evaluations and assessments to achieve uniformity between clerkships. All but one clerkship is using the new form. The next challenge will be to apply it as an assessment/teaching tool to direct learning and experiences among all clerkships.
2. Radiology education for D3 students has been an ongoing topic of discussion. Dr. Guzman-Armstrong is chairing a working group to address the issue.
3. Clerkship Directors would like all D3s ready to make radiographs at the beginning of D3 year.
4. Several years ago, Curriculum committee added 6 radiology sessions to D2 clinical rotation to help prepare students to make radiographs.
5. D3 toD4 transition meeting will be held on June 26. The meeting is not be an evaluation, but a guide so that teaching may be directed at the beginning of t D4 rather than later in the D4 year.
6. The question of a uniform schedule (all years start on a similar calendar) was discussed. There was little interest among the directors to pursue the issue.
7. The week of February 2-6 marks the half-way point in the D3 year. No significant problems have arisen with patient availability for D3 requirements.

6.0: Roundtable Comments and Discussion

Family Dentistry: Dr. Holmes noted that he was inspired and encouraged by Dr. Garcia's vision for curriculum management and direction for the future. Family Dentistry needs periodontic cases. Students are seeking Board-worthy cases.

Prosthodontics: the superbloc is in need of crowns. The majority of students will complete their requirements on time. Clerkship exchanges are going well for students and patients.

Dr. Clancy noted that students are required to have a check by faculty before touching the patient. It would be good to have consistency across clerkships. He will bring the issue to the Clerkship Directors Committee.

Endodontics: Only 2 or 3 students will need to return for one visit each. Scheduling flexibility in the Superblock is a great advantage. Endo patients fill the clinic on Tuesdays when Perio and Pros do not have clinic.

Periodontics: the clerkship is going fairly well. IPE is going well according to Dr Weistroffer.

Gross Anatomy: the students are engaged with in course and ask more questions than Dr. Hoffmann has noted in previous years. The new Medical School curriculum seems to be going well. It focuses on the mechanisms of health and disease rather than on one topic. However, the 8-week course schedule creates a more rapid pace which appears to be affecting student performance. Compressing the time scale indicates that instructors must reduce course content. Sickness or other absences create a big problem in such a short schedule.

D1 Class: Mr. Nelson commented that Fixed Pros seems to be going well. There is a good balance with Operative and Prosthodontics

D2 Class: all is going well.

D3 Class: Mr. Orgill: seconded Dr. Justman's comments—the clerkship is “really good.”

7.0 Next Meeting: March 27, 2015

Next meeting is scheduled during the Chicago Midwinter meetings and may need to be cancelled. The next meeting will be held on March 27, 2015.

Minutes respectfully submitted by M.L. Eckert.