## Curriculum - DMD

The program is a full-time, continuous, 46-month cohort program consisting of 270.5/280.5 credit hours culminating in the receipt of the DMD degree. The curriculum includes eleven consecutive semesters of academic and clinical education. The projected life of the program is ongoing but will admit only one cohort per year.

The competency-based curriculum design is based on the American Dental Education Association's (ADEA) Competencies for the New General Dentist. When achieved, it predicts with confidence that students have attained the knowledge; clinical, research, critical thinking, practice management, behavioral, and interpersonal skills; clinical experience; sound clinical judgment; professional and ethical behavior; and patient care training to provide comprehensive oral health care to diverse patients of all ages and conditions of physical, mental, and emotional health. The 39 competency statements address the following domains of competence: Critical Thinking, Professionalism, Communication, and Interpersonal Skills, Health Promotion, Practice Management and Informatics, Patient Care; Assessment, Diagnosis, and Treatment Planning, and Establishment and Maintenance of Oral Health.

The 39 competency statements for the "New General Dentist" are developed as the overarching goals for achievement, the courses, learning activities, clinical cases, skill development exercises and labs, behavioral training, and clinical training, and become an integrated whole during patient care delivery, by the competent general dentist. "Competency" assumes that all taught behaviors and skills are performed with a degree of quality consistent with patient well-being and that the general dentist can self-evaluate treatment effectiveness. In competency-based dental education, what the students learn is based upon clearly articulated competencies and further assumes that all behaviors/abilities are supported by foundation knowledge and psychomotor skills in the biomedical, behavioral, ethical, clinical dental science, and informatics areas that are essential for independent and unsupervised performance as an entry-level general dentist.

The curriculum was designed to ensure that learning experiences will lead to the development of these competencies. The curriculum is firmly rooted in evidence and largely modeled after Bruner's spiral curriculum approach. Content is introduced, emphasized, and reinforced with increasing levels of complexity, eventually leading to competency prior to graduation. Each time the content is re-visited, the student gains deeper knowledge of the topic and allows for the reinforcement of information over time, requiring the use of prior knowledge to inform future learning. By implementing this curriculum design, students are reminded that courses are not singular, nor does learning occur in silos. Each subsequent course or unit of work covered will build upon previous content. Faculty involved in teaching similar content in various years of the curriculum collaborate to develop student learning outcomes that reflect a progression from foundational knowledge to application, synthesis, and evaluation.

The curriculum design is divided into four categories: Biomedical/Basic Medical Sciences, Oral Health/Clinical Sciences, Behavioral Sciences, and Interprofessional Healthcare. Based on the topics presented, most courses will be taught with an integrated approach. During the D-1 year, the biomedical/basic medical science courses focus on the "Normal," how the body works optimally and is presented in a disciplined approach. In the Spring, MFMII begins the introduction into the pathology of disease. The D-2 year is about the "Abnormal" presented through traditional medical systems, with the idea of what happens when the normal systems go awry and result in the clinical manifestation of disease.

During the D-1 and D-2 years of student study in the Biomedical/Basic Medical Sciences, Behavioral Sciences, Interprofessional Healthcare, and Oral Health Science courses include didactic coursework. The faculty will most often utilize traditional assessment modalities, instruments, literature reviews, case studies, papers, and presentations to measure student learning and incremental competency successes.

In the Oral Health Sciences Courses, the laboratory/preclinical component will be conducted in the technologically advanced simulation clinic. This allows students to begin to apply their knowledge and develop new clinical skills as they learn and demonstrate dental procedures for the faculty. To determine when new competencies have been achieved, the faculty will introduce simulated clinical examinations to assess student knowledge and skills and to demonstrate their growing competency as they progress to the clinical curriculum for their third and fourth years of study.

In the College of Dental Medicine's clinical curriculum, the Oral Health Science coursework in the D-1 and D-2 years evolves into Comprehensive Patient Care in the D-3 and D-4 years. The College of Dental Medicine is committed to providing students with sufficient and diverse patient population and clinical experiences to attain clinical competency. The university will provide fully equipped, state-of-the-art dental clinics to enrich and enhance their learning. The College of Dental Medicine faculty will design a series of comprehensive clinical examinations and Clinical Competency Evaluations to assess student knowledge, behavioral characteristics, and clinical skills as well as other qualities and performance abilities to validate determinations of competency.

During the D-1 and D-2 years, six semesters consist of didactic courses delivered mostly in a lecture and team-based learning format. The oral health science courses have both didactic and laboratory/preclinic components. During the D-3 and D-4 years, the five semesters consist of 90 weeks (3040 hours) of full-time clinical experience with Comprehensive General Dentistry Seminars during the D-3 year and Advanced Topics in General Dentistry Seminars D-4 year.