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(Revised June 8, 2017)

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Foreword

The Graduate Orthodontic Program at the Indiana University School of Dentistry (IUSD) welcomes you! The following manual will help orient you to the program as well as the policies and guidelines that direct your educational experience. The manual also aims at achieving the mission and goals of the program.

FACULTY

Faculty Credentials and Administrative Positions

<table>
<thead>
<tr>
<th>Name</th>
<th>Credentials</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Katherine S. Kula</td>
<td>MS, DMD, MS*</td>
<td>Full-time, Chair</td>
</tr>
<tr>
<td>Thomas R. Katona</td>
<td>DMD, PhD</td>
<td>Full-time, jointly appointed with Mech. Engineering</td>
</tr>
<tr>
<td>Kelton T. Stewart</td>
<td>DDS, MS*</td>
<td>Full-time, MSD Program &amp; Orthodontic Clinic Director</td>
</tr>
<tr>
<td>Achint Utreja</td>
<td>BDS, MS*</td>
<td>Full-time, Pre-doctoral Program Director</td>
</tr>
<tr>
<td>Peter Buschang</td>
<td>MA, PhD</td>
<td>Adjunct</td>
</tr>
<tr>
<td>Michael C. Frazier</td>
<td>DDS, MS*</td>
<td>Adjunct, Craniofacial Orthodontics Co-Director</td>
</tr>
<tr>
<td>Ahmed Ghoneima</td>
<td>BDS, MSc, PhD</td>
<td>Adjunct</td>
</tr>
<tr>
<td>Tasha Hall</td>
<td>DDS, MS*</td>
<td>Adjunct, Craniofacial Director</td>
</tr>
<tr>
<td>Lana Helms</td>
<td>DDS, MSD*</td>
<td>Adjunct</td>
</tr>
<tr>
<td>Jay Hughes</td>
<td>BS, DDS*</td>
<td>Adjunct</td>
</tr>
<tr>
<td>Charles E. Pritchett</td>
<td>DDS, MS*</td>
<td>Adjunct</td>
</tr>
<tr>
<td>O.H (Chip) Rigsbee III</td>
<td>DDS, MS*</td>
<td>Adjunct</td>
</tr>
<tr>
<td>Jennifer A. Russell</td>
<td>DDS, MSD</td>
<td>Adjunct</td>
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<tr>
<td>Timothy J. Alford</td>
<td>DDS, MSD*</td>
<td>Volunteer</td>
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<tr>
<td>Nelson R. Diers</td>
<td>DMD, MS*</td>
<td>Volunteer</td>
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<tr>
<td>Michael Koufos</td>
<td>DDS, MSD*</td>
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<tr>
<td>James V. Macri</td>
<td>DDS, MS, MSD</td>
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<tr>
<td>Mark Rosenthal</td>
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<tr>
<td>Tony Puntillo</td>
<td>DDS, MSD*</td>
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</tr>
<tr>
<td>James K. Hartsfield Jr</td>
<td>DMD, PhD*^</td>
<td>Professor Emeritus</td>
</tr>
<tr>
<td>James J. Baldwin</td>
<td>DDS, MSD*</td>
<td>Professor Emeritus</td>
</tr>
<tr>
<td>William F. Hohlt</td>
<td>DDS*</td>
<td>Professor Emeritus</td>
</tr>
<tr>
<td>W. Eugene Roberts</td>
<td>DDS, PhD, DCH*</td>
<td>Professor Emeritus</td>
</tr>
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* Diplomate, American Board of Orthodontics
^ Diplomate, American Board of Medical Genetics

Clinical Coverage (as of 01 July 2017, Subject to change)

Full-Time

<table>
<thead>
<tr>
<th>Name</th>
<th>Schedule</th>
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<tbody>
<tr>
<td>Katherine Kula</td>
<td>Tuesday AM (weekly)</td>
</tr>
<tr>
<td>Kelton Stewart</td>
<td>Wednesday PM/ Thursday PM (weekly)</td>
</tr>
<tr>
<td>Achint Utreja</td>
<td>Tuesday PM [fall], Tuesday PM [spring] (weekly)</td>
</tr>
</tbody>
</table>
Adjunct
Michael Frazier  Thursday AM/ Friday PM (weekly)
Jay Hughes  Wednesday (once per month)
Lana Helms  Friday (twice a month)
Charles Pritchett  Wednesday (weekly)/ Thursday (once a month)
O.H. Rigsbee  Friday (twice a month)
Mark Rosenthal  Wednesday (once per month)
Jennifer Russell  Monday AM (weekly)

Volunteers
Timothy Alford  Thursday (once a month)
Nelson Diers  Friday (twice a month)
Michael Koufos  Wednesday (once a month)
Mark Rosenthal  Wednesday (once a month)
Tony Puntillo  Thursday (every 6-8 month)

STAFF

Clinical Support Staff
Gayle Massa  Clinic Support Specialist/Clinic Administrator
Darlene Arnold  Dental Assistant
Kari Arthur  CFA Patient Care Coordinator
Sharese Hale  Dental Assistant
Brittney Martin  Dental Assistant (CFA clinic)
Brenda McClarnon  Clinic Coordinator
Shellie Pennington  Dental Assistant

Graduate Orthodontics Laboratory
Tom St. Clair  Lab technician

Business Office
Monica Eller  Patient Services Supervisor
Jasmine Pence  Patient Services Assistant
Charlana Young  Patient Services Assistant
Karen Vibbert  Patient Services Coordinator

Administrative and Academic Support Staff
Shannon Wilkerson  Assistant to the Chair

Mineralized Tissue & Histology Research Laboratory
Junmei Wang  Postdoctoral Fellow
I. MISSION STATEMENT AND GOALS

Mission Statement
The mission of the Graduate Orthodontic Program at the Indiana University School of Dentistry is to train ethical and competent orthodontists who will:

- treat malocclusion effectively;
- contribute significantly to the health of their community;
- meet their social and professional responsibilities; and
- incorporate sound scientific and business principles in their practice.

To that end, the Program strives to maintain a diverse and internationally renowned faculty who teach multiple clinical techniques including straight-wire mechanics, segmented arch mechanics, functional appliances, and implant anchorage mechanics. The multidisciplinary faculty are educationally qualified in orthodontics, anatomy, physiology, biomechanics, mechanical engineering, radiology, physics and management of temporomandibular disorders.

Goals
The goals of the Graduate Orthodontic Program at Indiana University School of Dentistry are to:

- provide an outstanding clinical and didactic education, so that the orthodontic graduate students provide the best possible orthodontic treatment for their patients and, thereby, pass state board exams and the American Board of Orthodontics examinations;
- prepare orthodontic graduate students with the scientific background to make competent treatment decisions and to assess the quality of orthodontic treatment they provide;
- reinforce professional and social responsibilities that will prepare graduate students to become orthodontic leaders and address the public need;
- provide graduate students and practitioners with continuing education opportunities about recent advances in orthodontics and related fields;
- contribute to the advancement of orthodontics through basic, applied and educational research and the dissemination of those findings; and,
- be a resource in orthodontics for public and community leaders.

II. PROGRAM INFORMATION

This manual will be revised to meet changing needs or situations. This manual cannot be inclusive of every situation. As you proceed with the program, you may have suggestions for modifying this information. You are welcome to develop written recommendations (see Resident Feedback section) that will enhance the program and fulfill the mission of the Graduate Program. Each graduate student and faculty member must use common sense in approaching a topic or situation that is not covered in this manual. These policies are considered standard operating procedure until changes to the manual are made and approved by the Department Chair and/or Program Director.

Revised
6/20/2017
This manual is a supplement to any IUSD and IUPUI Policies and Procedures, the IUSD Orientation Manual, and the IUSD Student Handbook on Academic and Other Policies. By reference, these documents are hereby incorporated with full effect. Where there is a conflict of policies, the more stringent of the two prevail unless specifically denoted.

**Description**

The Orthodontic Graduate Program at Indiana University School of Dentistry is accredited by the Commission on Dental Accreditation (CODA) with authority granted by the American Dental Association. As of our most recent accreditation site visit in 2013, our program is approved without reporting requirements. The program is 24 months long and is composed of clinical training, didactic coursework, teaching experiences, and a research project and paper. The School of Dentistry awards a master’s degree in orthodontics (MSD) and the Department of Orthodontics a certificate in orthodontics to those completing the program. Both the master’s degree and certificate are required components of the program. Therefore, all graduate students must meet the criteria for acceptance into the IUSD master’s program.

Graduates of the program are educationally qualified and required to take the Phase II (written) examination of the American Board of Orthodontics. The CODA Advanced Specialty Education Program Standards for Dental Specialty and the AAO Recommendations for Orthodontic and Dentofacial Orthopedics Specialty are the basis from which our program was developed.

The Orthodontic Program emphasizes patient care, practice management, and critical thinking. A hypothesis-testing research project is mandatory and required by CODA Standard 6. The project must meet IUSD criteria for a master’s degree and must be approved by a departmental committee, as well as the school’s Graduate Student Research Committee prior to starting the project. Researchers are expected and required to abide by all institutional (IRB, IACUC, IUSD, and IUPUI, etc.) policies. Graduate students are trained and responsible to teach in the pre-doctoral laboratory, lecture, and clinic.

**Graduate students are expected to attend any and all classes, clinics, and/or scheduled research time scheduled from 7:30 AM to 5:00 PM Monday through Friday.** Working hours of the outpatient clinic vary, but generally are 9:00 AM to 5:00 PM Monday through Friday depending on faculty coverage. **Graduate students are expected to stay in clinic to help other graduate students if they themselves have no patients scheduled.** Additionally, **attendance is mandatory for special programs that may be held during regular school hours, in the evenings, and/or on weekends.** Preparation for patient care and didactic courses, as well as research, is expected to require additional time outside of the regular program. Graduate students are not allowed to hold or attend to other commitments (i.e. job or private practice) during program hours; additionally, due to the rigor and demand of the program, it is recommended that graduate students not maintain commitments (e.g., work in private practice or hold a job) outside of program hours especially those which might prohibit attending required extracurricular activities or interfere with studying or completing patient related activities or research. The program **begins on July 1 each year and ends on the second Friday in July two years following** entry into the program. The date of graduation will be decided one year in advance by the program director and the department chair.
Important Dates

Meetings and Program Events

Below is a list of important meeting dates that graduate students are expected to attend. Additionally, important events in the program are listed for convenience. Dates/times of external meetings may change as those meetings are arranged by other organizations. Program events can be modified at the Program Director’s discretion with several weeks’ notice (please note that there may be other events that require graduate student attendance, which are not included below).

<table>
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<tr>
<th>Event</th>
<th>Month</th>
<th>Year(s)</th>
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<td>Incoming, 1, &amp; 2</td>
</tr>
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<td>August</td>
<td>Program Discretion</td>
</tr>
<tr>
<td>IUSD Orthodontic Program Interviews</td>
<td>Oct/Nov</td>
<td>1 &amp; 2</td>
</tr>
<tr>
<td>IUSD Orthodontics Comprehensive Exam</td>
<td>March/April</td>
<td>2</td>
</tr>
<tr>
<td>ABO Phase II Exam</td>
<td>April</td>
<td>2</td>
</tr>
<tr>
<td>IUSD Research Day</td>
<td>April</td>
<td>1 &amp; 2</td>
</tr>
<tr>
<td>American Association of Orthodontists (AAO) Meeting</td>
<td>April</td>
<td>2</td>
</tr>
<tr>
<td>Qualifying Exam (Written &amp; Oral)</td>
<td>May/June</td>
<td>1</td>
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<tr>
<td>IUSD Orthodontics Mock Board Exam</td>
<td>June</td>
<td>2</td>
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Tuition and Other Costs

IUSD requires that tuition be paid on a timely basis; otherwise, a graduate student who has not paid the required tuition may not participate in clinic or didactic courses. If such a situation occurs, the status of the graduate student in the program must be reconsidered. Alternatively, remediation may be required to make up lost time. The Board of Trustees establishes the tuition and fees on a yearly basis. Therefore, tuition usually can be expected to increase, but the percentage increase is unknown until decided by the trustees.

Each graduate student is expected to purchase a laptop computer at his/her own cost that meets the specifications of the IUSD Informational Technology (IT) Department. Since HIPAA-sensitive information might be stored on that computer, each graduate student must be careful about allowing another person access to the computer. Additionally, each computer must be encrypted. The graduate student must allow IT to remove this information prior to graduation. The department requires that all data related to patient care and all presentations be downloaded to departmental files as teaching materials prior to graduation. To minimize the potential loss of patient sensitive information, graduate students are asked to utilize university provided IU box accounts to store and transfer any patient related information rather than a flash drive (USB). Any potential flash drive used during residency program must be encrypted; there are no exceptions to this policy.

Graduate students will be required to purchase several books for their courses. Specific instruments that will be listed must also be purchased. In addition, graduate students must pay all mandatory rental and sterilization fees. Digital cameras are provided for use in the clinic; however, we suggest graduate students buy their own.

Graduate students requesting permission to attend continuing education (C.E.) courses are responsible for their own expenses (if approved). Permission depends on such factors as patient
care, exams, instructor permission, etc. The graduate student departmental time-off request form must be submitted at least 2 weeks prior to the C.E. course of interest. **Approval by the Program Director must be obtained prior to making any clinical schedule changes or other travel arrangements.** If plans are made prior to attaining proper approval, the graduate student risks acquiring travel adjustment fees or possibly a complete forfeit of all travel related expenses. The approved form must be given to Mrs. Massa for tracking. Absences will only be approved for reasonable situations (family death, personal sickness etc.). Individuals who miss didactic or clinical activities due to illness must provide a doctors slip upon their return. Failure to submit the required healthcare documentation will result in a commensurate reduction of the graduate students’ allocated personal days. If a continuing education course or special event has been approved by the Program Director and the clinic is closed for the event, all graduate students are required to attend the event.

The ABO Phase II Examination is required during the second year of residency. Although Alumni support is sometimes available to help offset the costs, these funds are not guaranteed. The graduate student will need to include these costs as part of the cost of attendance.

Each graduate student is responsible for their personal living expenses and educational costs. Graduate students are expected to assess their financial needs and personal goals and to make decisions that do not diminish the educational experiences and expectations of the orthodontic residency at IUSD. Each graduate student is expected to prepare their own financial portfolio. The Office of Student Financial Aid can be reached at (317) 278-1549; they provide assistance with loans and scholarships.

**Credentialing**

In order to see patients in the graduate orthodontic clinic, graduate students must attain and maintain all the credentialing required by the school/university. The dental school asks that each graduate student maintain confirmation of such credentialing within the school’s designated credentialing repository (GIS). Periodic audits are conducted to ensure that students are in compliance with these regulations. Individuals found to have any expired credentialing will be notified via the GIS system and given a strict timeline to complete the necessary task. The same report will be forwarded to the Program Director and Clinical Administrator. Students who fail to resolve the identified credentialing deficiency by the specified date will have their clinical privileges suspended. Such a clinical suspension could also result in the extension of a student’s residency program and/or dismissal from the orthodontic residency program. Some of the required credentialing items that students must maintain are listed below (note: this provided list may not include all of the required credentialing):

- Indiana Limited Dental Residency License/Indiana Dental License
- Up-to-date Immunizations
- HIPAA training
- Blood Bourne Pathogens Training
- Sexual Harassment Training
- CPR
- TB
The Indiana State Board of Dentistry requires that each graduate student apply for and obtain either an Indiana Dental license or a limited dental residency permit. Applications for the limited dental residency permit can be found using the following link: . The application requires that each graduate student complete an application form and have their enrollment in the orthodontic residency verified by the dental school/orthodontic department. International students will require a social security number in order to apply for the dental residency permit. Graduate students must successfully obtain the limited dental residency permit within 4 weeks of starting the orthodontic residency. They are also expected to maintain this permit throughout the entire duration of their orthodontic training. The current fees for obtaining or renewing a limited dental residency permit can be found by using the previous link (2017 fee schedule: $0 new permit, $0 permit renewal). Each graduate student is responsible for identifying funding to cover required fees associated with the limited dental residency permit. **Failure to obtain a limited dental residency permit will result in the loss of clinical privileges.** Graduate students who can provide documentation of a valid Indiana Dental license are not required to obtain a limited dental residency permit.

### Fellowship/Stipend

Non-military graduate students currently receive a stipend from IUSD. Students whose tuition is paid by their country are not eligible for the fellowship/stipend. The stipend varies depending on the year of residency and its availability is subject to review by Administration. The stipend is paid each fall and spring semester directly to the Bursar to cover tuition costs. If tuition and fees are already paid, the Bursar will deposit the excess into your bank account. The graduate student is responsible by early July for establishing a bank account that will receive direct deposit to receive these payments, otherwise, the payments may be late. Information for disbursement must be set up through https://one.iu.edu (One.IU) and the Office of the Bursar.

### Extra-Curricular Educational Requirements

In addition to the courses taught at the dental school, graduate students are frequent guests at continuing education programs held by numerous local and regional orthodontic societies. All graduate students are expected to attend these programs when they are approved or scheduled by the Orthodontic Department. Additional courses may be attended if approved by the Program Director. If any, non-mandated, extra-curricular courses carries an additional fee, graduate students are expected to cover these associated costs.

### Representation and Elections

At the beginning of the program, the class will select a number of class officers to represent them in various capacities. Each class will elect a class president to represent their interests and serve as a liaison between faculty, staff, and the graduate students within the department. To facilitate early communication between the department and the class, the **Class President** must be selected by the second week of the residency. The second-year Class President will serve as the “Chief Graduate Student” for a 12-month period. The First-Year Class President and the Chief Graduate Student are expected to contribute to the departmental mission by attending indicated faculty meetings, reporting graduate student concerns or satisfactions with the program, communicating the outcomes of the meetings to the graduate students, organizing meetings or responsibilities with the other graduate students, disseminating information to the other graduate students, coordinating special events/activities for the graduate students, providing student updates to the alumni.
association, and fabricate/disseminate messages to guest speakers who may lecture to the graduate students. Both the Chief Graduate Student & First Year Class President will also assist the Program Director/Clinical Administrator with coordinating/scheduling graduate students for presentations, pre-doctoral clinic, craniofacial clinic, orthodontic dental emergency service rotation, setting lunch & learns, cleaning assignments, and other classes or events. Other duties include meeting with the Program Director as needed to enhance or maintain the program. The Chief Graduate Student will be asked periodically to contribute by reviewing information for accuracy and developing various projects necessary for the motivation and organization of the program. The Chief Graduate Student is also expected to help maintain excellent working relations amongst the graduate students, the staff, and the faculty.

All graduate orthodontic students will also vote on two (2) representatives to serve on the Advanced Graduate Organization (AGO) and represent the Orthodontic Program as a whole in this interdepartmental student organization. Finally, the class must select one (1) representative for the Graduate Student Professional Conduct Committee (GSPCC) and will work with other GSPCC members to assess potential ethical/behavioral breeches and determine possible sanctions if necessary.

**Performance Evaluation**

IUSD orthodontic graduate students are evaluated throughout their program. Graduate students take a series of courses specifically related to orthodontics in addition to core master’s courses given by other departments. The orthodontic courses, which are designed to train graduate students for orthodontic practice and meet the criteria for accreditation of the orthodontic program, contain several components: patient care (clinical), didactic, laboratory, research, and teaching. Evaluation of graduate students provides feedback to the graduate students and faculty concerning progress in the program and content of the program, and is a necessary part of accreditation. Evaluation will incorporate components of a course (didactic, clinical, or laboratory) although the weight of each can vary depending on the course. Graduate students will also take several competencies at various points throughout the program to ensure we maintain the highest levels of patient care and academic standards.

The components, procedures, or exercises that will be evaluated for each semester’s course will be stated at the beginning of the course. All components of each course must be passed in order to pass the course. Grades for orthodontic courses, in particular clinical courses, may be based on the following components: patient care and progress; orthodontic, dental, and general knowledge; scheduling; clinic attendance; time management; adherence to clinical procedures and policies; and multiple interactions/participation (patient/peer/staff/faculty) within the program.

At least twice a year, graduate students will meet with the Program Director, faculty, and Clinical Support Specialist to review their progress through the program. Graduate students will be evaluated by the orthodontic faculty at the end of the first year through an oral and written examination. The Program Director will discuss the evaluation with each graduate student in order to acknowledge strengths and to encourage improvement where deficiencies are noted. If it is determined that there is a significant deficiency in the delivery of patient treatment or understanding of orthodontic concepts, remediation will be instituted. Remediation might require additional didactic or clinical experiences, some of which may lengthen the program for a particular graduate student. The grade given for the course will reflect the remediation required and the resulting competency of the
graduate student. The graduate student might be placed on probation during this time depending on the extent of the deficiency. In case a graduate student cannot compensate for their deficiencies, the graduate student will be dismissed from the program.

Patient Progress Reviews of some cases will be conducted during the fall semester of the second year (in conjunction with Practice Evaluations). This review will be based on the graduate student’s patient diagnosis, knowledge of the treatment (status), and future treatment.

During the two (2) year residency program, graduate students are strongly encouraged to complete as many of the cases that they initiate as possible. Due to the complex nature of orthodontic treatment, an absolute number of completed cases is not placed upon the graduate students. However, in order to graduate, second year graduate students are required to critically assess the final records and complete case evaluations for thirty (30) patients. These cases may be cases that the graduate student has personally managed and completed, but they may also be a case completed by a previous graduate student. **All cases** must be written in the most current electronic ABO format (available at [https://www.americanboardortho.com/orthodontic-professionals/about-board-certification/downloads-and-references/](https://www.americanboardortho.com/orthodontic-professionals/about-board-certification/downloads-and-references/)). The deadlines outlining when the case write-ups are due can be found below, these deadlines may be subject to change at the discretion of the Program and/or Clinical Director. Ten cases are due approximately every two months until the requirement has been met; **submitted cases should be in the form of a merged PDF document and follow the requested format.** Graduate students may turn their 30 cases in ahead of schedule and are encouraged not to wait until the last minute to work on this requirement. The cases are typically due by the first or last Friday of the month listed. If the school or department is closed on that day, they are due the following day the department is open for business. If a graduate student is unable, for any reason, to submit 10 completed case write-ups by a scheduled due date, they should contact Gayle Massa or the Clinical Director immediately and provide the reason for their inability to complete the requirement. **While writing up the cases, patient documentation such as models (physical or electronic), radiographs, or other components of the patient record should NOT be taken from the school premises nor be left where outside individuals can access them.** To do so could compromise patient confidentiality and violate the school’s HIPAA policies. Anyone found removing patient documentation from the building or violating patient confidentiality will face school and/or Federal disciplinary sanctions.

**Case Write-Up Schedule**

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Month</th>
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<tbody>
<tr>
<td>First 10 cases due</td>
<td>August</td>
</tr>
<tr>
<td>Second 10 cases due</td>
<td>October</td>
</tr>
<tr>
<td>Third 10 cases due</td>
<td>December</td>
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In addition, at the end of the second year, a comprehensive examination and presentation of two final cases (Mock Board Examination) will be used as intermittent points of evaluation. These cases must be presented in approved ABO format and an example of the appropriate format will be provided to the graduate students. Both the Comprehensive Examination and the Mock Board examination must be passed in order to be eligible for graduation, these requirements are explained below.
**Qualifying Examination**

A Qualifying examination over all areas covered in the curriculum and patient care will be given at the end of the first year of the residency program. The Qualifying Exam consists of an oral and written component, which is given separately. These exam dates are scheduled for all graduate students a semester in advance and cannot/ will not be modified except under extreme circumstances.

The written component of the exam will cover all didactic courses given to date. First year course instructors will be asked to submit questions pertaining to the material they taught during the year. To receive a passing grade on the exam, students must attain an overall score of at least 70% and a score of at least 40% on each individual section (i.e. a score of at least 40% for each faculty section must be earned). Failure to earn at least 40% on a faculty section will require re-examination in that particular subject area.

Failure to earn at least 70% on the entire exam will require the student to repeat the written exam. No more than one re-examination will occur for either the entire exam or a single exam section. Any graduate student who fails to obtain a passing grade after one re-examination will be required to meet with the Program Director. The Program Director, with the council of the Orthodontic Department and Academic Affairs Office, will then decide the future status of the graduate student in the orthodontic residency program. Poor performance on this exam could result in an additional year of the orthodontic residency training or immediate dismissal from the program.

The oral component will focus on case diagnostics and treatment planning. Graduate students will be given thirty (30) minutes to discuss the case with the faculty. The case will be determined by the Program Director/ Clinic Director and varies each year. Graduate students will not be familiar with the case and will therefore be given thirty (30) minutes to prepare immediately prior to discussing the case. The testing order for the examination will be determined and disseminated to the graduate students prior to the exam. This oral examination will include the development of a problem list, classification/diagnosis, and treatment plan of an orthodontic case as well as other questions that could be in any format, i.e. essay, multiple choice, true/false, computer-assisted. In order to meet these standards, in addition to course work, the graduate students must read on their own time and incorporate any knowledge attained during patient treatment.

Successful completion of both components of the Qualifying Exam is required in order to move to the second year of residency program. A graduate student who fails to successfully complete the exam may be required to remediate the exam. As previously noted, remediation of the examination can result in passing, repeating the first year of the residency, or dismissal from the program.

**Comprehensive Examination**

During the spring (March) of the second year, a Comprehensive Examination will be given to help graduate students prepare for the American Board of Orthodontics Phase II Written Examination. The didactic courses conducted in the residency program present the pertinent information tested on the exam, but no other formal course is currently held within the residency program to prepare students for the exam.

Although the comprehensive examination is designed to increase the graduate student’s understanding of orthodontics, if a severe deficiency on the part of the graduate student is identified, remediation might be necessary. If remediation is recommended, the graduate student will be informed of the need and the specific requirements for remediation by the Program Director. The
graduate student is responsible for completing the remediation within the specified time period; otherwise, action will be necessary by the Program Director. Given that the intent of the exam is to assist in the preparation of the Phase II ABO Written exam and that graduate students MUST take the exam to be eligible to graduate from the orthodontic residency program, there is no set score to denote “passing”. Students who score below a 60% on the exam will review areas of concern with the Program Director and be encouraged to address these areas prior to sitting for the ABO exam.

The ultimate purpose of these examinations/presentations is to:

- evaluate the graduate student’s understanding of orthodontics and modify as needed;
- assess the Graduate Program, and modify as needed; and
- meet Accreditation Standards of CODA and any other accrediting organization.

**ABO Phase II Examination**

All second year graduate students MUST take the written ABO Phase II Examination. Registration for the exam occurs during the fall and/or early spring of the graduate students’ second year. The actual exam is typically held during the month of April. Students must pass the Phase II examination to be eligible to sit for the Phase III Clinical examination and achieve Board Certification. Student success on the Phase II exam will require independent preparation. Students are encouraged to review the exam material provided on the ABO website and begin preparing for the exam early on during the second year of the program.

**Standards of Scholarship**

The Department of Orthodontics and Oral Facial Genetics adheres to IUSD Academic Standards and Procedures for Advanced Education and Graduate Students.

Graduate students, regardless of classification, must maintain a 3.0 (B) grade point average for all coursework taken for graduate credit at IUSD. Graduate students must maintain a 3.0 (B) grade point average in their graduate level specialty in Orthodontics coursework. **Grades in specialty area coursework must be B or better.** Any specialty area course that is graded below B must be repeated.

**Probation**

Whenever the overall grade point average for IUSD courses taken for graduate credit, by a graduate student of any classification, falls below 3.0 (B) or the student earns a failing grade in a course, the student’s status for the next term becomes “On probation”. The Program Director will review the student’s progress and provide counsel, and the following conditions apply:

- A graduate student on probation, who is not restored to good academic standing by the end of the next academic semester, will be declared ineligible to re-enroll.
- A graduate student on probation will not be restored to good standing until an overall GPA for graduate coursework of at least 3.0 is achieved.
- While on probation, a graduate student must achieve a 3.0 graduate dental certificate specialty area GPA in order to enroll for the ensuing term.
- A graduate student on probation will not be restored to good standing until a specialty area GPA of at least 3.0 is achieved.
**Dismissal**

The following are grounds for dismissal from the program:

- A graduate student who is on probation and fails to attain an overall grade point average of at least 3.0 by the next academic semester will be dismissed from the program.
- A graduate student who is on probation and fails to attain a 3.0 term GPA for the succeeding term will be dismissed.
- A graduate student who is on probation and fails to attain a specialty area GPA of at least 3.0 by the end of two successive semesters will be dismissed from the program.
- A graduate student who is on probation and fails to attain a 3.0 specialty area GPA for the succeeding term will be dismissed.
- A graduate student who receives more than two (2) hours of 2.0 (C) grades or below for courses included in the student's graduate program of studies will be dismissed.
- Ethical issue (i.e. cheating, lying, etc.)
- Unprofessional behavior within or outside the program (i.e. being arrested, inappropriate social media, physical altercations with IUSD students/staff/faculty etc.)
- Violation of the policies outlined in the IUSD/Orthodontic student manuals.

In lieu of dismissal, the faculty and Program Director may require graduate students to complete additional time in the residency program, if deemed appropriate. Any graduate student who is required to complete a remedial year is ineligible for scholarships and stipends from the department. Graduate students will be responsible for arranging their own health insurance, as the department will not cover it. Depending on the courses to be repeated, the graduate student may be able to pay fees on a per-credit-hour basis instead of the flat fee. Upon successful progression to the final year of residency, the graduate student is once again charged the flat fee and eligible for departmental financial aid.

**Appeals and Due Process**

Any decision that adversely impacts a student may be appealed through the appropriate and predefined channels per CODA Standard 5 on Due Process. For procedures regarding appeals, refer to the appropriate section of the IUSD School of Dentistry Student Handbook on Academic and Other Policies (Page 6). This handbook is available online through the Office of Graduate Education.

**Evaluation Appointments**

All graduate students are expected to make and keep requests by the Chair, Program Director, or other faculty to meet for feedback on clinical, didactic, or research performance or progress. Lack of response to such a request will not be accepted as an excuse. A written evaluation and required actions by the graduate student will be provided to the involved individual when needed. Any remediation or action is expected to be completed by the date indicated on the evaluation. If the graduate student does not complete the remediation or expected action by the given date, the graduate student will fail his or her semester evaluation. Failure will result in appropriate action as determined by the Program Director and respective faculty, which may include dismissal from the program.
### Patient Care

Graduate students must complete all patient care on a timely basis. All clinic forms must be completed on a timely basis and patient notes **entered and approved daily**. All patient care must be delivered in a professional manner. To that end, dialogue in the clinic should be held to a high standard, with special regard to Protected Health Information (PHI) as defined by HIPAA.

**Patients must ONLY be seen during clinic times, with appropriate faculty coverage (this includes graduate students treating fellow graduate students).** All graduate students are also expected to provide patient care for their own patients and with the assigned faculty member unless there are special arrangements. If during an approved absence, an emergency or other treatment is necessary, the graduate student is responsible for working with the Clinical Support Specialist to enlist the cooperation of other graduate students in treating their patients. If an emergency situation faces one particular graduate student, other students may be asked to help support the clinical activities of the involved student’s patients to ensure continued and timely care.

### Patient Records

Before treatment can be initiated on an orthodontic patient, the following must be completed:

- **A.** Review of medical history
- **B.** Patient records
  - a. Clinical examination completed and recorded, including:
    - i. Periodontal Screening Record (PSR)
    - ii. Initial and updated patient vitals (blood pressure, pulse, height, weight)
  - b. All required radiographs taken and reviewed for optimal quality:
    - i. Panoramic radiograph
    - ii. Lateral cephalogram
    - iii. Frontal cephalogram (when indicated, i.e. asymmetry)
    - iv. Two maxillary incisor and one mandibular incisor periapicals (required for 18 & older)
    - v. Bitewing radiographs (two to four, based on need-required for 18 & older), or
    - vi. 3D cone beam radiograph (as needed, i.e. impactions, craniofacial anomaly, TMD, growth modification, research purpose)
  - c. Electronic models with bite registration (diagnostic casts if requested by the faculty member)
  - d. Cephalometric analysis
  - e. Photographs (3 extra-oral profile, smiling frontal, non-smiling frontal, 5 intra-oral: right buccal occlusion, frontal occlusion, left buccal occlusion, maxillary occlusal, mandibular occlusal), which meet ABO standards.
f. Orthognathic surgery patients might require two 45° extra-oral photographs, two profile photographs, and a sub-mental vertex photograph (consider a CBCT).

g. All photographic and radiographic images must be entered into Dolphin

C. List of problems and goals

D. Completion of an required consultations with other healthcare providers

E. Treatment plan signed by faculty

F. Consent form signed by legally responsible patient or legal guardian

G. Contract signed by legally responsible patient or legal guardian and returned to the financial office

H. Financial agreement approved by IUSD and adhered to by legally responsible patient or guardian

I. Patient Privacy and HIPAA form signed by legally responsible patient or legal guardian.

No graduate student is to commence treatment or make referrals to other health care providers until steps D-H are completed. Any graduate student found violating these protocols will have their clinical privileges revoked and could face other disciplinary actions.

No patient who requires approval from Medicaid or other insurance can be started until the business office receives the approval. If patients who are covered by Medicaid wish to pay for orthodontic treatment personally, the business office must approve this first. No impressions for an appliance can be made prior to this approval.

**Practice Evaluations and Patient Chart Audit**

Each Practice in the clinic will be evaluated no less than once per semester. This evaluation will require each graduate student to generate and submit a list of all patients in their care, a list of completed clinical experiences, and a calculation of faculty case assignments. Graduate students should review each patient on this list with specific regard to abnormal circumstances that have extended treatment, problems with patient compliance, oral hygiene, caries, or other issues that have affected treatment time and outcome. In addition, patients who have been in treatment for less than two years, but who possess problems affecting treatment, i.e. poor oral hygiene, broken appointments should also be identified. Appropriate action to remediate the situation will be discussed; a plan of action will be devised (i.e. warning letter, dismissal, etc.), and acted upon to correct the situation.

A patient chart audits will be conducted periodically during the program to determine the status of patient care and completeness of records. Each graduate student will be provided with feedback concerning the adequacy of each record audit. Any identified record deficiencies should be modified by the denoted date and shown to the Clinic Administrator/Clinical Director. Significant and consistent deficiencies will be addressed by the Program Director and could negatively impact a students’ clinical grade. Deficiencies that result in patient neglect, mistreatment, and/or are in direct conflict with departmental or school policy may be cause for disciplinary action or dismissal.

**Patient Screening and Assignment**

Graduate students will assist in screening patients for treatment in the orthodontic clinic. Written information concerning the program will be given to the patient at this appointment. They will be asked to sign that they have read and understand the information. The graduate student should
complete a screening form for each patient and then **must** have a faculty member check the patient appropriateness for the graduate, undergraduate, or faculty practice clinic (the attending faculty member should initial the bottom of the screening form). If the case is appropriate for one of the specified clinics, the patient/guardian should be taken to the financial/business office so that the patient service supervisor or patient service coordinator can review potential treatment costs. The graduate student is to return all screening forms to the Clinical Support Specialist following screening of patient and after a treatment note is entered into the patient’s electronic record. Periodically, graduate students are asked to complete orthodontic screening appointments in clinics throughout the dental school. In these situations, the student should complete the screening in the non-departmental clinic and then return to the orthodontic clinic to review the screening form with an attending faculty member. If the patient is deemed acceptable, the patient and/or their guardian should be escorted to the orthodontic financial/business office to review the financial documentations.

The Orthodontic Department favors potential patients who will work well with the faculty, students, and staff in our department and provide a sufficient learning experience for our students. Individuals who appear disruptive, overly demanding and/or uninterested in orthodontic treatment should not be accepted into the department for treatment. Furthermore, individuals who present with active decay, periodontal concerns, or unaddressed medical problems should be referred to an appropriate dental or medical specialist for treatment and encouraged to seek entry into the department after these concerns are addressed.

If a patient requires information about the clinic prior to a screening appointment, the receptionist can either mail or fax the application. Once the screening appointment is complete, the Clinical Support Specialist will assign the patient to a graduate student and return the screening form to the Business Office.

If contact cannot be made by phone after one call, a note indicating that the Orthodontic Clinic tried to contact the patient by phone will be sent to the patient. The note will indicate that if the patient is still interested in treatment, they should call the Department by ________________(date) to schedule an appointment; otherwise, they will be inactivated. That date should be no longer than two weeks after the mailings. The Clinical Support Specialist will inactivate the patient from axiUm if they do not respond by the time indicated. The screening forms of inactivated patients will be returned to the Clinical Support Specialist who will remove the patient from the graduate student list.

Following the scheduling of a records appointment, the Patient Services Coordinator/ Clinical Support Specialist will make a chart for the patient and give it to the assigned graduate student at the time of the records appointment. These are temporary documents that will be scanned and destroyed once the records appointment is completed.

Graduate students are always expected to follow the instructions of attending faculty. If graduate students disagree with faculty instructions, they should discuss their differences away from the patient. **Unless unique situations necessitate otherwise or special arrangements have been made, all patients should be scheduled with the assigned faculty to ensure favorable treatment outcome.** Patient reassignment to another graduate student or attending faculty member is typically not done unless very extreme situations arise (unavoidable schedule change by patient, complete deterioration of the graduate student-patient/parent relationship). Should this be
required, the students, patient, and parents will need to meet with the Clinical Director prior to this change being finalized.

**Treatment Documentation**

At the conclusion of each patient visit, graduate students are expected to document the events of that visit in the patient’s electronic patient record. A treatment entry should be included and approved by the attending faculty member in axiUm prior to the graduate student’s departure for the day. Each entry should completely and succinctly document all the events of the patient’s appointment (including any adverse or unexpected events). This entry will be the only documentation of the event, so if it is not included in the progress note, legally “it didn’t happen”. Graduate students should avoid the use of abbreviations in their treatment notes, since the notes in the patient’s chart may be used by individuals outside of the department, who are unaware of “common orthodontic abbreviations”. While certain selected abbreviations may be common to the student or a small group of persons, all individuals who review the chart should be able to understand what occurred during the treatment, and the use of excessive abbreviations makes this extremely difficult, especially during periodic audits by the school.

Progress notes should contain some basic information. Please ensure that the following information is always included.

- Purpose of the patient visit
- Individuals present with the patient
- Review of Medical History
- Evaluation of Oral hygiene (OH)
- Evaluation of Appliances (APP)
- Time in treatment/Estimated treatment time
- Treatment rendered at the appointment
- **Interpretation of all obtained radiographic images**
- Areas to assess at the next visit as well as anticipated treatment at the next visit

An example of a patient progress note is depicted on the next page:
Patients should be given oral hygiene instructions at the time of treatment initiation. Additionally, patients should be informed of their oral hygiene status at each appointment. To help minimize the occurrence of demineralization and caries formation during treatment, fluoride varnish should be applied around a patient’s brackets at each appointment if oral hygiene is found to be insufficient. Consent from the patient’s parents/guardian (if the patient is a minor) should be obtained prior to applying the varnish.

In order to assess and monitor the patient’s periodontal status, a PSR must be completed during the initial records appointment and entered into axiUm. Any patients found to have a compromised periodontal state should be referred to the Periodontal Department or to their referring dentist for periodontal treatment. A PSR should be re-completed at least once each year while the patient is in treatment at the orthodontic clinic.

**Timeliness of Treatment**

The following are guidelines for timeliness of treatment in the postgraduate orthodontic clinic:

- Patients should be appointed for records within one month of assignment (exception: patients assigned to incoming graduate students).
- Patients should be treatment planned within one month of records acquisition.
- Banding/bonding should start within one month of treatment planning.
- Timeliness of treatment following banding and bonding is based on the attending faculty’s desire for frequency of treatment.

These guidelines can be modified depending on the attending faculty and Clinical Support Specialist’s decisions.

If patients are not compliant with requests for appointments, the following procedures should be followed:

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Revised
6/20/2017

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• If the **patient breaks or cancels two screening appointments**, the Clinical Support Specialist will forward a letter to the patient indicating that they are being inactivated from our clinic and are being referred to private practice. The Clinical Support Specialist will inactivate the patient from the business management system.

• If the **patient breaks or cancels two records and/or screening appointments**, the Clinical Support Specialist will forward a letter to the patient indicating that they are being inactivated from our clinic and are being referred to private practice. The graduate student will document the broken or cancelled appointments in the patient chart and indicate the inactivation. The Clinical Support Specialist will inactivate the patient from the business management system.

• If the **patient breaks or cancels two treatment appointments without good reason**, the Clinical Support Specialist will forward a letter to the patient documenting the broken or cancelled appointments. The letter should indicate that the patient must keep their orthodontic appointments because of the potential negative effects on treatment outcome; otherwise, they will be inactivated from our clinic and referred to private practice or that they should be deboned. The graduate student will document the broken or cancelled appointments in the patient record and indicate that such a letter was sent.

• If the **patient breaks or cancels another treatment appointment without good reason after a warning letter is sent**, the Clinical Support Specialist will forward a letter via certified mail to the patient indicating that they are being inactivated from our clinic and are being referred to private practice or can make an appointment for deboning by a certain date. The graduate student will document the broken or cancelled appointments in the patient record and indicate the inactivation. The Clinical Support Specialist will inactivate the patient from the business management system.

• If the **patient does not call for an appointment for two or more months**, the Clinical Support Specialist will forward a letter to the patient documenting the broken or cancelled appointments or lack of making appointments. The letter should indicate that the patient must make and keep regular orthodontic appointments; otherwise, they will be inactivated from our clinic and referred to private practice or that they should be deboned. They are to be asked to call for an appointment within three weeks (give an exact date in the letter). The graduate student will document the broken or cancelled appointments in the patient record and indicate that a letter was sent. The Clinical Support Specialist will inactivate the patient from the business management system.

• If a **patient does not respond to a written request to make an appointment by the indicated date**, the Clinical Support Specialist will forward a letter via certified mail to the patient indicating that they are being inactivated from our clinic and are being referred to private practice or can call by a certain date to be deboned. The Clinical Support Specialist will inactivate the patient from the business management system.
• If a **patient postpones treatment longer than one month past the treatment plan**, the Clinical Support Specialist will notify the Program Director. A decision will be made whether the patient should be inactivated and told to be rescreened if their records are older than one year when they are ready for treatment or whether another patient should be assigned. This decision is made because of the effect on the graduate student-learning situation.

**Absolutely no case transfers are to occur without the prior notification of the Clinical Director, who will then notify the Clinical Support Specialist to make the necessary changes.** If a case transfer is approved, the transferring graduate student will take progress records before the transfer is completed. Upon receipt of the transfer, the receiving graduate student will review the case and re-treatment plan with the attending faculty.

Once a case has been re-treatment planned the graduate student should make a progress note in axiUm outlining the following information:
- Initial diagnosis
- Expected duration of treatment (months in treatment/estimated treatment)
- Complications during treatment (if applicable)
- Current status of treatment/current diagnosis
- Remaining goals of treatment
- Anticipated time until treatment completion

**Orthodontic After Hours Services**
The Department of Orthodontics maintains an "after hours" service line for active graduate and pre-doctoral orthodontic patients of record weekdays from 9am to 5pm, except on holidays. Patients have access to graduate students and the assigned attending after-hours by dialing **(317) 260-3869** and asking for the graduate student on call. All patients of record are given the department’s services and phone numbers by their assigned orthodontic graduate student. Orthodontic walk-in patients with emergencies from another orthodontist are typically not seen in the Graduate Orthodontic Clinic and are referred back to their treating private practice orthodontist for the maintenance of any dental/orthodontically related emergencies.

**The following policy is in effect for Patients with an Orthodontic After Hours Situation:**

**Emergencies during regular clinic hours**
IUSD Graduate orthodontic patients of record who are experiencing a dental emergency during regular clinic hours will usually be seen in the orthodontic clinic with the graduate student to which they are currently assigned. The graduate student to whom they are assigned will be expected to see the patient. In the event that a patient’s regular graduate student is unavailable, or, if the patient has been inactivated 1 year or less, or is currently on recall; the patient will be scheduled at the discretion of the Clinical Support Specialist with another available graduate student to manage the dental emergency. A patient that was inactivated previously by our clinic will need to seek treatment elsewhere. Regular clinic hours are Monday through Friday 9am to 12 noon and 1pm to 5pm.

Patients may exhibit one or more of the following conditions:
1. Severe and/or prolonged pain  
2. Swelling  
3. Facial and/or oral trauma  
4. Broken tooth  
5. Broken brackets, band, or wires  
6. Poking wires  
7. Broken or lost retainers  
8. Broken or unseated orthodontic appliance

Emergency patients will be triaged by the graduate student and the attending faculty. The patient’s well-being will be ascertained, and then any diagnostic tests deemed necessary will be performed with the patient’s permission. The patient will then be informed of the diagnosis and advised of the treatment options and their respective prognoses. Actual costs and related costs will be discussed with the patient. When the patient has made an informed decision on the treatment of choice, the graduate student and faculty will render either primary or provisional treatment depending on the emergent circumstances, nature of the problem, and the treatment decisions of the patient. A referral will be made to a dental specialist if deemed appropriate.

If emergent care of an oral surgical nature is necessary, the patient may be referred to their general dentist, the University Hospital Oral Surgery Clinic, or the first floor Oral Surgery Clinic that day for treatment by the students assigned to that clinical rotation. If emergent care of an orthodontic nature is required, the graduate student will complete the necessary treatment. If no further care is needed or desired, the patient will be re-appointed with their current graduate student, or if no graduate student is currently assigned, re-assigned to a new graduate student in the Graduate Orthodontic Clinic by the Clinical Support Specialist for further treatment per standard operating procedure. The graduate student and faculty will then document the appointment appropriately in the electronic health record, including notation of any return appointments scheduled.

Patients of record who have a dental/orthodontic emergency after-hours have access to after-hours services at IUSD via the Graduate Orthodontic Graduate students. Patients may access this service by dialing (317) 260-3869. This includes weekends and holidays. Records of emergency diagnosis and treatment rendered for IUSD orthodontic patients of record are entered into a network-wide computer system (axiUm) in common with IUSD, thereby preserving continuity and appropriateness of care. Patients who have inactive school records of over one (1) year may also utilize this after-hours service. If patients have misplaced the emergency services number, they can call the Orthodontic Clinic’s main telephone number, 274-8573, and obtain the information from our pre-recorded patient message.

**After hours orthodontic care:**
If a graduate student receives a call from a patient after-hours they should assess the severity of the emergency and when possible recommend that the patient be seen in the Graduate Orthodontic Clinic during normal business hours during the next available business day. If the situation requires
immediate treatment, the graduate student is to contact the Clinic Director who will meet the graduate student and the patient at the Graduate Orthodontic Clinic to manage the situation. If the Clinical Director is unable to meet the graduate student at the school, the graduate student should contact a fellow graduate student or identify another witness to accompany them to the dental school. Graduate students are NEVER to meet alone with a patient and/or a patient’s guardian(s) after-hours at the dental school; a witness must ALWAYS be present. Any patient contact (phone call, treatment rendered, etc.) that occurs after hours MUST be noted in axiUm and approved by the Clinical Director no later than the next business day. Failure to properly document patient-doctor clinical contact will result in disciplinary action, including but not limited to, suspension of clinical privileges. Periodically, individuals with non-orthodontic emergency needs call the orthodontic after-hours emergency phone; in these situations the graduate student should have the patient call the dental after-hours emergency number (317-944-5000), if the patient is an IUSD patient of record or (317-274-7433) if the patient is not an IUSD patient of record.

**Graduate Student “After Hours” Coverage Schedule:**
After hours coverage in the Graduate Orthodontic Clinic is done by special clinic assignment within the department. Each summer, the graduate students, Clinical Support Specialist, and Clinical Director will work to create the emergency coverage schedule for the entire year. It is expected that during a rotation as the “emergency coverage graduate student” (graduate student on call) will be available during regular clinic times for the entire week that they are assigned. However, it is expected that all graduate students currently in the clinic will see any emergency patients to whom they are currently assigned in the Graduate Orthodontic system. In the rare event that graduate students have a class scheduled during clinic time, every effort should be made to schedule emergency patients at an alternate time so that a graduate student does not miss class AND the emergency patient is managed in a timely fashion. The on-call graduate student will be called if his/her services are required. If for some reason the student is not able to attend to their on-call duties, they MUST identify another student who has agreed to take their place. This information MUST be relayed to the Clinical Support Specialist so that the official rotation schedule can be updated appropriately. Failure to do so may result in disciplinary action, including, but not limited to, suspension of clinic privileges and the student being sent before the Professional Conduct committee.

**Broken Appliances**
Broken appliances should be documented in the patient chart at each occurrence. Although it is difficult to make generalized statements concerning broken appliances, when the faculty and/or graduate student observe frequent incidents of broken appliances or deliberate acts of destruction or flagrant neglect of appliances, a letter should be sent to the patient/parent documenting the breakage, explaining the effect on treatment, and advising that the patient will be inactivated, debonded, or referred to another orthodontist if these incidents continue. The Program Director/ Clinical Director and the graduate student must sign the letter.

Continued breakage after the first letter is reason for patient inactivation. In this situation, a letter of inactivation should be sent to the patient/parent documenting the breakage and the decision to
stop treatment at the dental school. The Clinical Support Specialist will inactivate the patient in axiUm.

Additional charges can also be placed for consistently broken appliances. However, the patient/parent should be warned of this possibility before the actual charge is placed. A note indicating that the patient/parent was informed of this possibility should be placed in the record prior to actual charges.

**Debonding**

Prior to debonding, the graduate student should determine an appropriate mode of retention and obtain approval from the attending faculty for debonding and the final retainer design. If the patient still owes money for treatment, but wants a retainer, the cost of the retainer(s) must be paid with cash, cashier’s check, or money order prior to taking impressions. If the patient owes more money than the cost of the retainer(s), they will be sent to collections at the time of debonding. A patient who is deboned prior to the end of scheduled payments will be allowed to continue scheduled payments. However, if a patient is deboned because of moving, financial reasons, hygiene, compliance, etc., they will be responsible only for charges up to that point. If they want a retainer, they will need to pay for it prior to impression acquisition. The payment will be deducted from their balance.

In some instances, the graduate student and attending faculty member may determine that it is in the best interest of the patient to temporarily discontinue active orthodontic treatment and remove some or all of the appliances. This may occur if a patient frequently demonstrates poor oral hygiene, poor compliance with fixed or removable appliances, or encounters extreme financial hardships that prevent them from staying current with their treatment balance. If the graduate student/attending team determines that a temporary treatment cessation is indicated, the patient will have up to 12 months to resolve the issue and re-enter active orthodontic treatment without penalty. After 12 months, the patient may be required to pay for new records before re-initiating active treatment in the department. Payment for remaining fees will be expected and the Business Office must be informed prior to reactivating treatment.

**Complete final records must ALWAYS be completed on the day of debonding. Please see the Clinical Director if circumstances arise that prevent final records from being placed.**

**Laboratory Work**

**Study models**

All graduate students are expected to pour and rough trim 1 set of study models, following the guidance of the Orthodontic Laboratory Technician. The rough trimmed models must occlude on the heels in centric occlusion and be free of bubbles or voids that prohibit proper occlusion. Each graduate student is expected to obtain the written approval of Graduate Orthodontics Lab Technician that the models have been prepared appropriately.

Electronic models are typically used to obtain an occlusal representation of the patient’s occlusion within the Graduate clinic. Each resident is responsible for accurately scanning and “finalizing” the occlusion on each of their patients. In the event the intraoral scanners are nonfunctional, students are expected to obtain maxillary/mandibular alginate impressions and a bite registration and submit these diagnostic records to the Graduate Orthodontics Lab for pouring. Once the stone models have been produced, the graduate student should use the intraoral scanners to scan the stone models. It
is the responsibility of the graduate student to ensure that satisfactory digital records of the patient’s teeth are obtained. Failure to scan the physical patient models will negatively impact the student’s clinical grade and may also result in the loss of their clinical privileges. Two-year retention records are also required of patients (please consult with the Clinical Director about what information is required during such appointments.

Each graduate student should maintain a list documenting the lab work they have completed during the program. This information may be requested to verify work or address other potential concerns. **Graduate students are NEVER to send labwork to an outside lab without the permission of the Clinical Support Specialist or Clinical Director.** Individuals found conducting such activities will face disciplinary action, including but not limited to: the loss of all previous lab work credit, clinical suspension, and/or program dismissal. Regardless of the lab or clinical work in question, the graduate student is ultimately responsible for the quality and the existence of the necessary material.

Additionally, physical patient information (models, photographs, etc.) should NEVER be removed from the dental school premises; this includes de-identified information. It is permissible to access electronic patient records via the school’s VPN, but the transportation of all other materials could lead to a breach of patient confidentiality and a violation of the school’s HIPAA policy.

**Appliances**

All graduate students are expected to make thirty (30) individual (note: a full set of retainers counts as two) acrylic and wire retainers themselves. Each graduate student is expected to maintain a list documenting the patients whose retainers they made and obtain the written approval of the quality of the retainers from the Graduate Orthodontics Lab Technician or Clinical Director prior to patient delivery.

Poor quality retainers or retainers that do not fit or meet the specifications of the instructor will not be approved and will need to be remade by the graduate student.

Graduate students are required to fabricate 5 palatal expanders during the residency program. After the completion of these 5 appliances, subsequent expanders can be sent to the Graduate Orthodontic Lab for fabrication. Graduate students are expected to fabricate all other appliances to be used for patient care during the residency program (i.e. transpalatal arch (TPA), lingual holding arch, quadhelix, Essix retainers, etc.). In the event an appliance needs to be fabricated by a local or regional laboratory, please see the Clinical Director/Clinical Administrator for approval and processing.

**Clinic Staff**

The Clinical Support Specialist is responsible for clinical operations of the orthodontic clinic. She has multiple responsibilities concerning the clinic and the program. Graduate students should abide by the requests and advice given by the Clinical Support Specialist. Graduate students are to comply with her requests in a respectful, timely, and efficient manner. If graduate students have questions concerning any of the clinical operations, they should talk with her first. If there is confusion or potential conflict with the request given by the Clinical Support Specialist, the students should consult with the Clinical Director.

The Dental Assistants help graduate students in the clinical area. They are instrumental in providing graduate students with insight in the practice of orthodontics and may offer guidance from time to
time. They may also ask you to reconsider your work if it is of poor quality (i.e. x-rays, impressions). Graduate students are to **ALWAYS** be respectful and compliant. Should professional or personal issues arise between a graduate student and staff member they should discuss the problem with the Clinical Support Specialist/Clinical Administrator or Program Director.

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**Dental Auxiliaries**

All dental auxiliaries and staff are a part of the IUSD team treating patients with orthodontic needs. They contribute significantly to patient care and to the learning environment. As such, they deserve respect and, in some cases, are empowered with certain authority within the clinic. Their duties are assigned by their immediate supervisor and, indirectly or directly, by the Program Director and/or Chair. Tasks assigned to auxiliaries by the Chair, Program Director, or faculty are considered top priorities. Auxiliaries can only be expected to do one thing at a time.

Requests for assistant support have to be prioritized because of the discrepancy between the number of assistants and graduate students. Graduate students are encouraged to review the appointments made by other graduate students at that time to minimize conflict with assistant support. This is not always possible so the following guidelines should be followed:

- Assistant support cannot be expected during non-scheduled clinic times. They may have other assignments.
- Chair and instrument preparation and cleanup takes first priority on any given day.
- Banding and/or bonding are given next priority. First year graduate students should be given priority over second year graduate students because of the learning and skill situation. Graduate students should consider that they do not need an assistant for banding until it is time to mix cement and seat an appliance.
- Assistance with archwire removal or replacement for second year graduate students is the next priority.
- Assisting with record taking for second year graduate students is the next priority.
- First year graduate students may receive help from an assistant to mix alginate and to retract cheeks and hold mirrors when photos are taken. However, each first year graduate student is expected to take his/her own photos, radiographs, and impressions.
- An assistant can instruct the first year graduate student how to use the cephalostat and the panoramic machine, but the graduate student is expected to take his/her own radiographs.

The graduate student and the attending faculty are ultimately legally and medically responsible for the care of the patient. All graduate students are responsible for any care delivered by an auxiliary to their patient, which means the graduate student is expected to at least check the patient at the beginning and end of each appointment. Graduate students should check all patients to determine that a requested task was completed properly. The graduate students are responsible for learning the Dental Laws of the State of Indiana and assign clinical tasks accordingly to dental assistants and hygienists.

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**Ordering Instruments, Supplies, and Equipment**

The Clinical Support Specialist/Clinic Administrator is responsible for ordering clinical supplies or instruments. **Graduate students should NEVER “negotiate” with any external vendor for products or services on behalf of the program or school.** Any potential donations (services
or materials) from external companies should be directed through the Clinical Support Specialist, who assists with monitoring the clinic’s budget and all company donations. Additionally, no graduate student is allowed to order instruments or supplies for the Department or charge any personal items to IUSD. Communicate all supply requests to the Clinical Support Specialist. The department has a modest clinical budget with which to secure products and services for the graduate students during the residency program.

Graduate students should use great care when utilizing services and products to ensure that the budget is not wasted and the clinic becomes unable to order the necessary items to conduct patient care. Examples of prudent material utilization includes cleaning and re-applying brackets rather than removing and discarding old brackets, providing patients with an acceptable number of elastics (1-2 bags), ensuring the wire appropriate wire is handled carefully when preparing it for clinical use, etc.

IV. RESEARCH

Objectives
The objectives of a research project in the graduate orthodontic program are:

- To familiarize the graduate students with systematic methodology of solving problems and making valid conclusions so that they can:
  - evaluate scientific literature relative to diagnostic, treatment and practice methodologies, and
  - select appropriate diagnostic, treatment, and practice methodologies to use in their practice.
- To meet CODA accreditation guidelines concerning hypothesis-testing research as described in Standard 6.
- To meet institutional requirements.

Requirements and Deadlines
The IUSD Graduate Manual outlines some important events and deadlines of the MSD program for Orthodontics. This information can also be found in the current edition of the Graduate Student Handbook published by the Office of Graduate Education (https://dentistry.iu.edu/index.php/prospective-students/student-handbooks/).

Research required for a master’s degree must meet the specifications of the MSD program and the IUSD Graduate School. Graduate students are referred to the Program Director and to the IUSD website for additional information. Prior to sending the proposal to the IUSD Graduate Student Research Committee for approval, the committee should meet at least once to discuss the proposal. All committee member remarks and suggestions should be sent to the primary mentor, as well as the graduate student. The graduate student must allow each committee member adequate time (a minimum of one week) to review the proposal and forward comments/recommendations to improve the research. The primary mentor MUST be a faculty member of the IUSD and it is highly preferred that they be a faculty member in the orthodontic department but this is not absolutely mandatory. The primary mentor must give approval before the proposal is sent to other departmental committee members or to the IUSD Graduate Student Research Committee at any stage of development. All graduate students must have at least one member of the department
faculty on their research committee for a degree to be awarded from the department. A **minimum** of 3 individuals **MUST** be selected to serve on the graduate student's research committee. Graduate students must defend either a manuscript or a thesis based on their research in front of their committee, other faculty, and peers. **No graduation clearance will be signed for insufficient defense of research.** If pursuing the manuscript option, verification of submission must be received before clearance for graduation will be given. Prior to graduation, the Office of Graduate Education (IUPUI campus) must formally approve any conducted theses.

Meetings should be scheduled on a semi-frequent basis to discuss research progress, problems, and solutions. All graduate students are expected to attend and contribute at these meetings. **Graduate students who fail to progress with their master’s research project or meet the research milestones established by their mentor, research committee, and the Orthodontic Department will be dismissed from the program.** To ensure the timely progression of research, a number of research milestones have been incorporated into the program. The list below indicates the current milestones in place for the orthodontic program (please, note that additional milestones may be required to further support the research efforts of the graduate students):

- Research progress presentation at the departmental research milestones meetings
- Submission and presentation of the student’s research proposal to the IUSD GSRC by the end of the summer session of their 1st year
- Presentation of their research at the IUSD Research Day during the 2nd year (or an external research meeting during the spring of the 2nd year)
- Completion of their formal research defense by the last week of June of the 2nd year
- Formal submission of a manuscript (to peer-reviewed journal) or thesis (to IUSD) by the first Monday of July of the 2nd year

Any graduate student who fails to adequately create, modify, and/or finalize their thesis or manuscript will forfeit their right to be first author on the manuscript within a year after graduation. Should a lack of graduate student involvement be identified by the graduate student's research mentor or committee that would constitute a loss of right to be the first author on a manuscript, the incident will be presented to the Program Director for discussion and final verdict. Another option is that the graduate student can give permission to another co-author to become first author by converting a thesis into a publishable manuscript.

**Release of Copyright**

In accordance with Indiana University’s Intellectual Property Policy (IPP) and the policies of the Department of Orthodontics and Oral Facial Genetics, all inventions, creations, innovations, discoveries, and improvements while at Indiana University are the property of the Indiana University Board of Trustees. In the event where the IPP or Department policy changes or conflict, the more stringent requirement prevails. Graduate students of the program irrevocably transfer any claim to the aforementioned property to Indiana University for public use. While mostly applicable to research, this release is not limited to that context alone. This applies to the development of patient related information/material, case reports, and class presentations.
V. DEPARTMENT POLICIES

Graduate students are expected to treat all faculty, staff, other graduate students, and patients with respect in all areas of the school. Personal and professional problems must be addressed in a professional manner. Any disagreements with clinical treatment MUST be handled discretely and not in front of a patient. This is considered an ethical issue and failure to comply can result in referral to the school's professional conduct committee and possible dismissal from the residency program.

Ethical Guidelines, Violation of Rights and Property, and Infection Control

The Department of Orthodontics and Oral Facial Genetics follows the guidelines published in the IUSD Graduate Student Manual and other IUSD Administration Directives. All graduate students are expected to follow those guidelines or face disciplinary action and/or dismissal.

Graduate students are expected to uphold the highest levels of professionalism at all times. As representatives of the department, their actions reflect on the department’s reputation and, therefore, will be held accountable accordingly whether in the clinic, class, or at extracurricular events/meetings.

Within the clinic and each laboratory are appropriate personal protective equipment, safety equipment, and other requisite items to operate safely. Each year graduate students will be required to update their Blood Borne Pathogens/OSHA certification either electronically or through an annual school-wide update.

Attendance

All graduate students are expected to attend all seminars, lectures (including all scheduled lunch time lectures), and clinics on a timely basis. These events will typically take place between 8AM and 5PM but there may be instances in which students may be required to be in attendance outside of these hours.

All graduate students must submit a written time off request to the Clinical Support Specialist/Clinical Administrator after clearing the absences with their appropriate instructors, who will evaluate the timing of the request relative to clinical and didactic assignments. Excluding extreme circumstances, time off requests should be submitted no less than 2 weeks prior to the time in question; requests submitted with less than a 2-week notice may NOT be approved. The Clinical Support Specialist will forward the request to the Program Director with her recommendation relative to the impact on the program for final approval. Students should not assume that a submitted time off request is approved and should wait until they receive confirmation from the Program Director/ Clinical Support Specialist before making any travel arrangements. When approval is given for a request, the graduate student will receive a signed copy of the form. A copy of the signed form will be filed by the Clinical Support Specialist and necessary actions initiated (i.e., patient cancellation). Each graduate student is responsible for requesting time off in writing from any course director or clinical attending faculty of their absence. The Clinical Support Specialist will be responsible for giving
the dental assistant a copy of the approved absence sheet so that the necessary clinical changes can be made. **No graduate student is allowed to contact the receptionist and/or their assigned dental assistant directly concerning rescheduling or canceling appointments, this should always be filtered through the Clinical Support Specialist.** Continued absence or abuse of the attendance policy will require evaluation of the graduate student’s status within the program.

**No graduate student, dental assistant, or receptionist has approval to change their clinic schedules (block or unblock clinical time) without approval by the Program Director or Clinical Support Specialist.** Additionally, no scheduled clinic may be cancelled for any graduate student without the preapproval of the Program Director or Clinical Support Specialist.

Second-Year Graduate students are expected to contribute to the pre-doctoral orthodontic module. Failure to support the Orthodontic Pre-doctoral Director with these activities will result in a negative impact on the student’s semester assessment and could also compromise the fellowship/stipend that they receive during the second year of the program. To ensure adequate coverage, no more than one graduate student may request time off at during any one pre-doctoral class session. The Pre-doctoral Program Director must approve the request also.

**No graduate student should assume that when classes are not scheduled Monday through Friday that they have time off for personal use unless they have filled out the Request for Time Off form.** If an instructor cancels class for any reason, students should use the provided time to complete lab work, make advances with their research, or conduct some other form or educational enhancement. This especially applies to Mondays; courses and other events can and will be scheduled at various times and graduate students will be expected to attend.

Time not scheduled for clinic or didactic courses should be used for independent study, research, review of patient records, and laboratory projects. **Patients must only be seen during clinic times, with appropriate faculty coverage (this includes graduate students treating fellow graduate students).** Time not scheduled for clinic should not be used for patient care, except in the case of patient emergencies or approved, supervised research. Instructors are not assigned during that time to cover clinic. Graduate students are not allowed to appoint patients for treatment on those days so that they can be absent during regularly scheduled clinics. The Department of Orthodontics and Oral Facial Genetics cannot take responsibility for any emergency or other patient situation that occurs as a result of treatment during that time. Patients who cannot be seen on days on which the assigned clinical faculty covers must have the approval of the assigned clinical faculty to be appointed during clinics covered by other faculty. **Graduate students are required to be in attendance during clinic hours whether or not patients are scheduled; a graduate student is not permitted to leave early just because there are no more patients scheduled.** They should stay to help their partner and gain additional patient exposure or work on other projects.

**Students that violate any component of the attendance policy will face disciplinary action that could include but is not limited to course grade reductions, loss of personal days, submission to the Graduate Student Professional Conduct committee, and/or dismissal from the program.**
**Vacation, Sick Leave, & Professional Development**

Each graduate student is expected to take their vacations during the school breaks and holidays each year. Those breaks and holidays vary with the dental school schedule, but are usually taken as follows:

- Independence Day: 1 day
- Labor Day: 1 day
- Thanksgiving Break (Thursday and Friday): 2 days
- Winter Holiday: about 10 days
- Martin Luther King Jr. Day: 1 day
- Spring Break – March or April: 5 days
- Memorial Day: 1 day

Rising second year graduate students also receive a **summer break of 5 days** the week following graduation. Incoming first-years have no summer break their first year as they are required to attend orientation and core courses.

Additional time must be requested in writing to and approved by the Program Director/Clinical Director at least two weeks ahead of time. Patient care, course work, and other responsibilities will be considered in the decision to provide additional time. If a graduate student is assigned after hours call duty during the time they are requesting to be absent, they are responsible for finding someone to substitute and must inform the Clinic Support Specialist/Clinical Administrator and Clinical Director who is serving as the substitute. The substitute must also agree to the switch. Switching duties without informing the Clinic Support Specialist or Clinical Director is unacceptable.

The Graduate Program is not required to approve additional leave from the program. Graduate students are expected to take maximum advantage of their educational program, since their future livelihood and patient care is dependent on it. Graduate students who take unapproved or excessive amounts of additional leave from the program will be required to make up the time at the end of the program. In other words, the normal graduation date for that student will be extended to compensate for the missing time, if unapproved time is taken for any reason or if the faculty decides that requested time off for any reason is excessive. Alternatively, students may be asked to complete tasks during scheduled vacation times to counterbalance the time away from the department and minimize the need to extend the time in the program past the designated graduation date. This policy also includes maternity leave in excess of the graduate student’s available balance (as specified by the IUSD Graduate Student Handbook).

Graduate students who miss school due to sickness are encouraged to contact the department as soon as possible so that patients can be contacted and/or rescheduled if necessary. Students should bring documentation from a physician confirming that they received medical treatment to address their illness upon their return to the department. The intentional abuse of the department’s sick leave policy could result in the loss of all professional development days and submission to the Graduate Professional Conduct Committee for disciplinary action.

Extended absences from the program can severely affect graduate student learning, patient treatment, and peer cooperation. Therefore, the Chair, Program Director, and Clinical Director will work with the graduate students to determine coordination of patient treatment, didactic work, and research (i.e. maternity leave, severe chronic illness, etc.).
During the residency program, each graduate student is allotted **10 days** to be used for **personal events and professional development**. The primary function of these days are to allow the students to participate in activities that will further their education and/or prepare them for entering the workforce (job interviews, office observations/shadowing, attending CE courses, etc.). As such, **only four (4) of these allocated days can be used for personal events (weddings, social events, etc.)**. Along with these professional development days, the program will provide support to some meetings, but the level of support varies from year to year based on the amount of donations received and the amount of funding present in the department’s foundation accounts.

**Copiers/Duplication**

Currently, the department maintains several photocopiers/printers in the department to allow graduate students to print and duplicate assigned readings and other materials at no charge. This benefit may be reconsidered in the future depending upon the status of the machines, the cost of upkeep and paper, the use by the graduate students, and the policies of the school. Graduate students are responsible for copying their own reading material or assignments. Pursuant to the University’s interpretation of 17 U.S.C., having one graduate student make copies of a copyrighted work for others (including other graduate students) is an infringement of the author’s copyright. A graduate students’ use of copyrighted material is covered by the fair use provisions, which excludes this activity. To help keep costs to a minimum and promote green initiatives on campus, it is strongly recommended to ready/study from electronic documents as much as possible. All white office paper is to be recycled; there are multiple recycling containers in the hallways and patient lobby.

Please note that any printed documentation containing patient sensitive information (patient full facial shots, patient telephone number, patient birthdate, etc.) should only be disposed of in the designated shred bins and not in the regular trash or recycling bins. **Students must never print patient related information and leave it on a printer, copier, or other areas in the department, such activities are seen as a breach of school HIPAA policy and will result in immediate disciplinary action.**

**Telephones & External Communications**

Personal calls and text messages should be kept to a minimum, so that business can be conducted and that other individuals are not inconvenienced. Telephones in faculty offices or at staff desks are assigned to those individuals only and are not for general use. **CELL PHONE USE DURING CLASS OR OTHER SPECIAL EVENTS IS STRICTLY PROHIBITED.** This includes verbal conversations as well as text messaging. Engagement in such activities will result in immediate disciplinary action. If an emergency situation necessitates the use of a cell phone during class, students should quietly excuse themselves to address the issue and return to class as soon as possible. No exceptions will be made to this policy and no further warnings will be issued on the subject.

Long distance telephone calls related to patient care should be placed or approved by the Clinic Support Specialist. No other calls are to be charged to that number or to any other phone line in the Department. The Department and University Information Technology Services monitor these calls for any abuse and notify the School of Dentistry of suspicious activities. The graduate student is expected to pay for any long distance charge incurred that is not patient related. The department highly discourages students from providing patients with their personal cell phone numbers. This policy is in place to reduce/eliminate the possibility of students being harassed by the patients. All
patients should be given the clinic’s main number and also the number to the after-hours phone line if they need assistance outside of the typical workday.

Due to the demanding nature of this program, business/work hours are also not a time to communicate with individuals via social media (Facebook, Snapchat, Instagram, etc.). Such activity should be limited to a student’s lunch break and after formal program hours.

**Hygiene and Dress**

To maintain the highest level of professionalism, the Graduate Orthodontics Program requires a more stringent dress code than that of other programs. All IUSD dress policies that pertain to Infection Control Standards remain in effect (please see the IUSD dress code for appropriate personal protective equipment (PPE) in the clinical setting. Graduate students must achieve and consistently demonstrate professional standards of personal hygiene and dress. Short or long sleeve dress shirt with tie is considered standard uniform for all men within the clinic. Men may wear a dress shirt without a tie or polo shirt on days that only involve didactic activities (or during clinical days during which the Program Director has allowed). In either case, shirts should be neatly tucked into the students’ slacks. Women are not allowed to wear dresses, blouses, or sweaters that show cleavage or abdomens. All students must also wear footwear that adequately product their feet (closed toe shoes with socks or protective stockings). Although slacks are preferred, below or near knee length skirts may be worn. In addition, graduate students are expected to maintain cleanliness and neatness in all clinical areas, conference rooms, laboratories, and office areas in which they work. Blue jeans and/or shorts are NEVER to be worn to the department during regular Monday-Friday workdays. The Graduate Program Director will consider any other exceptions to these standards on a case-by-case.

**Communication Media**

Graduate students are expected to keep up with their e-mail daily. Important information such as policy changes, meeting requests, and polls will only be disseminated to graduate students via their official Indiana University e-mail account. Students MUST also wisely utilize their Outlook and axiUm calendars to remain up-to-date on all activities within the program.

Each graduate student will be provided with a mailbox in the clinic area to receive hard copy items. Items will not be hand delivered, so it is imperative graduate students check their mail daily. It is the responsibility of each graduate student to update any vendors or other contacts with their forwarding address upon graduation. Graduate student contact information will only be given as the school address, unless the graduate student personally relays that information to someone requesting it. The chief graduate student will be responsible for obtaining each graduate student’s consent for giving personal information to vendors.

**A student’s IU e-mail account is only to be used for academic purposes.** As described in University Information Technology Services’ policies, e-mail is not to be considered private and is a matter of public record. Patient information is not to be conveyed via e-mail; rather, axiUm should be used. The preferred method of transmitting patient sensitive information to other healthcare providers is through axiUm and not your IU Microsoft email accounts. If you must send any patient related information through your IU email account, the email subject should always begin with the word Confidential. This will ensure that the email will be properly encrypted and safeguard the integrity of the information.
being disseminated. Unprofessional use of the school-based e-mail will result in sanctions as
determined by the Program Director. Additionally, students are encouraged to utilize university
provided box accounts to store all forms of pertinent patient information. Flash drives (USBs) are not to
be utilized unless they have been properly encrypted. Random audits will be conducted to ensure that
students are being compliant with this policy. Individuals found using non-encrypted flash drives will be
asked to immediately delete all information from the drive and may be reported to the graduate
professional conduct committee.

As students of the IU Orthodontics Residency Program, students represent the school and
department at all times, while inside and outside the actual school building. This representation also
applies to interactions in social media. A high degree of professionalism is expected from all
students at all times; thus a student’s actions should never portray themselves or the institution in a
negative light. Students should use extreme caution when posting statements, images, and/or other
information in a public venue (this includes venues that are cyber-based). Inappropriate or
questionable conduct/behavior that portrays the student in a negative manner or that compromises
the reputation of the IU institution is unacceptable and will result in sanctions against the student.

**Electronic Resources**

Currently, three digital cameras are available for student use in the clinical area. These cameras
should never leave this area and care should be utilized when handling the cameras during patient
care. The network printers are accessible from each graduate student’s personal computer and
desktop computers throughout the department. Faculty, graduate students, and staff with patient
imaging tasks have priority for using the imaging system. Surfing the Internet for nonacademic
purposes should be limited to times other than 8-5 work hours and has no priority.

To prevent damage to computer equipment and other electronic departmental devices, **food and
drinks are not to be consumed around electronic equipment in either clinical or laboratory
areas.** If equipment or network problems occur, the IT help desk should be notified at caiits@iu.edu.
No graduate student is allowed to install any software on any of the departmental computers, nor are
they permitted to copy software for personal use.

Unless specifically requested or needed as a part of class, **computers or other electronic devices** are
**NOT** to be used during lectures or seminars.

**Resident Feedback**

To foster a high degree of clarity between the IU orthodontic graduate students and the faculty/staff that
they will work with, students are encouraged to contact the Program Director with any questions
pertaining to the material presented in this manual. The department is also committed to the perpetual
enhancement of the residency program; as such students are welcome to submit suggested changes for
review by the Program Director and the department’s administration. Suggested changes can be
submitted to the Program Director in writing or via email.