Present: R. Lombardo, R. Rowell, C. Vu, K. Harper, E. Timofeev, J. Scott, N. Isaacs, S. Obeng, M. Onate, Dr. D. Dilbone, Dr. T. W. Willis, Dr. S. Geraldeli, Dr. V. Sposetti, G. Childs

Course evaluation: respondents –31, Mean range 1.8-3.0, overall score = 1.8
Debriefing Purpose: low evaluation overall score
Debriefing methodology: Ten students, which spanned the grading range of the course were selected.

Course Content
- Student commented the discriminative learning was beneficial.
- Some students felt there wasn’t enough lecture time.
- The students felt lecture to lab time wasn’t balanced. The lecture content was more aimed at functionality of the labs rather than reviewing the reading material.

Course Materials
- Summit textbook is a better book, helpful chapters of the book were made available to the students / Sturdivant – students had mixed feelings of which book they liked best
- The students said 70% of the exams came from the reading materials and only 30% from the lectures and labs, and since the readings lacked focus it made it very difficult to study for an exam. It was suggested to add objectives aligned with focused reading questions to aid in learning process.
- Many students felt it was difficult keeping up with the reading assignments.

Laboratory Sessions
- Students felt faculty availability wasn’t evenly distributed, and would have liked a more even distribution of faculty time during lab sessions.
- Students felt there was very little feedback at the end of labs, and it was stressful being graded not knowing if the technique being learned was correctly executed.
- Students felt the labs assignments weren’t structured.
- Students in general like the amount of sim lab time, but felt it wasn’t enough to master the skills and to do them quickly.
- Students felt they were more prepared in how to hold a handpiece and composites.

Evaluation
- Knowing exam format would be helpful in directing studying techniques.
Students didn’t feel they received enough timely feedback (midterm grades were not posted for six weeks) to know if they were progressing in the course.

Midterm Exam has 20 questions (16 short answer and 4 T/F, MCQ)

Final Exam had 40 MCQ questions

General:
It was recognized that students were currently completing DEN 6408, Operative Dentistry III. They were asked if DEN 6407, Operative Dentistry effectively prepared them for this course. Students did not feel, at this point, that that it significantly impacted their ability to progress in DEN 6408.

Midterm Exam failures: 18

Final Exam Failures: 6

Final Psychomotor/Professionalism after one re-take examination<72= 1

Final Written <72%= 4 (they were provided a re-take examination)

SPEC reported failures=1

Summary of Recommendations
- Keep discriminative learning.
- Provide excellent and poor examples of restoration preparations.
- To have more focused reading and lab assignments emphasizing important points.
- To be more explicit about exam format types.
- To have composite type forceps available for student use.
- Add an amalgam sequence video to the curriculum.
- Have more faculty in sim lab providing feedback for improvement.

Administrative Recommendations:
- The Department should re-assess their curricular content and psychomotor discrimination alignment, if performance in this single course is likely to lead to student dismissal after semester 3.
- The Department should explore use of technologies that could assist in providing student feedback.
- Assign a new course director and/or an additional faculty member to assist with organizational course needs.
- In the event the current course director is retained, the Department provides support for him to take the online, Teaching Today’s Learner’s Faculty Development courses, peer evaluation throughout the course and mentorship in writing assessment items.
- The Department should evaluate if the grade range of this course should be consistent with other Operative Dentistry courses and update accordingly and provide parity in written and psychomotor grade weights and re-take examinations.
- Develop a formal process for providing timely communication of student progress with faculty and students.
Curriculum Management Review Assignment  
Semester 3  
January 2014  
DUE date: February 18, 2014

<table>
<thead>
<tr>
<th>Curriculum Committee</th>
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<td>Dr. Cooper</td>
<td>DEN 6001, Introduction to Evidence-based Dental Practice</td>
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<td>DEN6011: Interdisciplinary Service Learning II</td>
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<tr>
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<td>Dr. Culp</td>
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E. Bushhousen  
To review all texts and literature in courses for suggestions of emerging information received

UF Faculty Handbook  http://handbook.aa.ufl.edu/
The syllabus for a course is a written record of the instructor's plan for the organization and management of the course, and his or her expectations of the students. The UF Policy on Course Syllabi outlines the information that must appear in all course syllabi, independent of course level or discipline. Instructional faculty are expected to post their course syllabi to a student accessible website and submit copies of course syllabi to the departmental office to document compliance with this policy.  
http://handbook.aa.ufl.edu/policies.aspx
The following evaluation scores and statistics were reported at 09:31 on 01/16/14. This evaluation contains 21 total submissions.

### Response Percentages

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evaluated fairly and consistently through written examinations
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

Dr. Gold effectively facilitated the course presentations and was attentive to student concerns.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent

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Response Details

The course met the stated goals and objectives listed in the syllabus (e.g., introduce you to the principles of evidence-based dentistry and critical appraisal of scientific literature.)

The course syllabus was complete, clear, and helpful in my understanding of the course

The course was well organized and integrated into the overall curriculum

The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills.

https://dentistry.medinfo.ufl.edu/cgi/evaltoolkit.cgi
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**My knowledge and abilities were evaluated fairly and consistently through written examinations.**

**Dr. Gold effectively facilitated the course presentations and was attentive to student concerns.**

**I would rate this course as:**

- Scale: 1=Poor, 2=Fair, 3=Good, 4=Very Good, 5=Excellent

**Login:** Christina Haskins

**Menus:** Tasks, Files, Archives, Directories, Login

**Time Remaining:** 119:44
Evaluation Comments

debug3: /volumes/derdata/webroot/evals/dentistry/cgi-data/evaldata/6001/6001_Sum13.evl debug4: 0
Evalsuite_eval=HASH(0x1a1d870) Evaluation: DEN 6001 Introduction to Evidence-based Dental Practice - Summer 2013 Course Evaluation
Directory: DEN 6001 Introduction to Evidence-based Dental Practice - Evaluations
Subject: all subjects included.
Selection criteria is: All records

The following evaluation comments were reported at 09:32 on 01/16/14. This evaluation contains 21 total submissions.

Grouped by Question
Question 8: The most significant thing(s) I learned in this course is (are)
Evaluation: DEN 6001 Introduction to Evidence-based Dental Practice - Summer 2013 Course Evaluation
Directory: DEN 6001 Introduction to Evidence-based Dental Practice - Evaluations
Selection criteria is: All records
The following responses were found at 09:32 on 01/16/14.

About: NA,
By: anonymous
Response: The difference between a case controlled study and a randomized controlled study

About: NA,
By: anonymous
Response: How to analyze research.

About: NA,
By: anonymous
Response: Never having to locate and interpret research articles before the class; I learned how to do these things in the class and how to go about doing so if need be in the future.

About: NA,
By: anonymous
Response: How to use research databases.
**Question 9:** In my opinion the course or teaching methods could be improved to facilitate student learning by:

**Evaluation:** DEN 6001 Introduction to Evidence-based Dental Practice - Summer 2013 Course Evaluation  
**Directory:** DEN 6001 Introduction to Evidence-based Dental Practice - Evaluations  
**Selection criteria is:** All records  

The following responses were found at 09:32 on 01/16/14.

About: NA,  
By: anonymous  
Response: I don't think a group project should be done to test our knowledge of the EBD process. It might be better to have small group discussions with faculty as moderators who can guide us through the steps of EBD.

About: NA,  
By: anonymous  
Response: Being more condensed. The whole course could be finished in much fewer lectures. The lectures were repetitive; and on topics that many of us have already learned since we have written reports and most have done some level of research prior to even getting into dental school.

About: NA,  
By: anonymous  
Response: Eliminate the library session. We know how to use search engines. Do not put this course near finals. Why could it not have been done in May or June?

About: NA,  
By: anonymous  
Response: This class was very well run by Dr. Gold and I learned a lot. I really enjoyed the guest speaker; but next year I think attendance should be mandatory so that students come to class. Another suggestion; which I know Dr. Gold worked on for this year by compressing the class until the last month or so of the summer semester; but I would enjoy this class more in a boot camp form. Where class would be all day long for two days and then she could give us a week or so to finish our projects with our groups and then we would present them. Overall; I enjoyed this course.

About: NA,  
By: anonymous  
Response: The course was laid out fine in my opinion. My comment would be in regards to the timing of the course intergration into the curriculum. Attendance suffered greatly as a result of final exams and priorities placed on other very heavy loaded courses. I think this class would be best suited down the road a couple semesters when there is more time to process and apply the material.

About: NA,  
By: anonymous  
Response: Completing this course either earlier in the Summer or completely finishing it on one long workshop day on a Saturday would be better and less stressful considering an already busy schedule. I would prefer to learn and implement these skills on one whole day which ends with a test. Much of what was taught was not difficult to understand and the project was a bit tedious and felt more like busy work. I did not learn about the research process significantly more after completing the project. I think doing
more interactive case studies or investigation exercises in class would be more beneficial and appropriate for the level of difficulty of the content.

About: NA,
By: anonymous
Response: This course should be condensed into a day long course or two day long course. It would be more beneficial to have back to back lectures with less overlap between the content of the lectures (as a more efficient use of class time). I think the placement of this course should be moved within the semester or term. Putting this intensive course at the end of summer makes it difficult to devote the time needed to studying and understanding the topics. It is unrealistic to expect students to complete all the reading materials each night between lectures while also maintaining the quick pace/lecture intensive course material for summer courses (pathology; host defense; operative 2; etc). The information presented is very important and there is a great disconnect between individual knowledge of the subjects (students who did research or have masters' degrees or those that have no experience in research) it just should be reorganized and presented at a different time in the semester.

About: NA,
By: anonymous
Response: This course is too long.
The following evaluation scores and statistics were reported at 09:33 on 01/16/14. This evaluation contains 60 total submissions.

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<td>The course met the stated goals and objectives listed in the syllabus (e.g. develop foundation knowledge in occlusal relationships). Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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My knowledge and abilities were fairly evaluated by the course faculty via quizzes and practical examinations.

The periodontal contribution to the course was helpful in my understanding of occlusal function.

The orthodontic contribution to the course was helpful in my understanding of occlusal function.

Lectures
Scale: 1=Not at all helpful 2=Of little help 3=Not sure 4=Helpful 5=Very helpful

Demonstrations
Scale: 1=Not at all helpful 2=Of little help 3=Not sure 4=Helpful 5=Very helpful

Guided Exercises in Lab
Scale: 1=Not at all helpful 2=Of little help 3=Not sure 4=Helpful 5=Very helpful

Laboratory/Clinical Practice
Scale: 1=Not at all helpful 2=Of little help 3=Not sure 4=Helpful 5=Very helpful

Table Clinics
Scale: 1=Not at all helpful 2=Of little help 3=Not sure 4=Helpful 5=Very helpful

Supplemental Readings
Scale: 1=Not at all helpful 2=Of little help 3=Not sure 4=Helpful 5=Very helpful

Occlusion Course Pack
Scale: 1=Not at all helpful 2=Of little help 3=Not sure 4=Helpful 5=Very helpful

Dr. Clark effectively facilitated the course presentations and was attentive to student concerns.

I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent
### Response Details

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<td>4.1 The course syllabus was complete, clear, and helpful in my understanding of the course. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>3.5 The course was well organized and integrated into the overall curriculum. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>3.9 The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>4.2 The clinical correlations and other examples of patient care helped to prepare me for clinical practice. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>3.9 My knowledge and abilities were fairly evaluated by the course faculty via quizzes and practical examinations. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>3.7 The periodontal contribution to the course was helpful in my</td>
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The orthodontic contribution to the course was helpful in my understanding of occlusal function.

Lectures

Demonstrations

Guided Exercises in Lab

Laboratory/Clinical Practice

Table Clinics

Supplemental Readings

Occlusion Course Pack

Dr. Clark effectively facilitated the course presentations and was attentive to student concerns.

I would rate this course as:
Login: Christina Haskins

Menus:  Tasks  Files  Archives  Directories  Login

Time Remaining: 117:58

Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent

This page was generated by the EvalSuite Evaltoolkit (version 5.12) at the University of Florida College of Dentistry on January 16, 2014 at 09:33.
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Evaluation Comments

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0 Evalsuite eva1=HASH(0x1a3ed3c) Evaluation: DEN 6213C Fundamentals in Occlusion - Summer 2013 Course Evaluation
Directory: DEN 6213C Fundamentals of Occlusion - Evaluations
Subject: all subjects included.
Selection criteria is: All records

The following evaluation comments were reported at 09:33 on 01/16/14. This evaluation contains 60 total submissions.

Grouped by Question
**Question 18:** The most significant thing(s) I learned in the course is

**Evaluation:** DEN 6213C Fundamentals in Occlusion - Summer 2013 Course Evaluation

**Directory:** DEN 6213C Fundamentals of Occlusion - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:33 on 01/16/14.

About: NA,
By: anonymous
Response: how to create impressions on real patients.

About: NA,
By: anonymous
Response: Understanding of basic occlusal principles.

About: NA,
By: anonymous
Response: Hands on working in the lab we should have more labs.

About: NA,
By: anonymous
Response: I liked doing the hands on stuff of making impressions and models. The stress of the class on how occlusion can have many affects especially on TMJ and even migraine headaches was very interesting and important. Overall; this course was run very well and the instructor cared very much about our learning. I really enjoyed the topic and thought the course was very important.

About: NA,
By: anonymous
Response: How to take impressions and mount a cast.

About: NA,
By: anonymous
Response: impressions and clinical technique

About: NA,
By: anonymous
Response: The main ideas behind occlusion and also how to mount models and use the facebow.

About: NA,
By: anonymous
Response: How to take impressions; use the face bow; and mount models.

About: NA,
By: anonymous
Response: How to make impressions.

About: NA,
By: anonymous
Response: How to take impressions and use the articulator.
About: NA,
By: anonymous
Response: How to take impressions

About: NA,
By: anonymous
Response: the fundamental of teeth occlusion

About: NA,
By: anonymous
Response: How to take impressions; set up a facebow; mount models in occlusion and learn basic occlusion knowledge of guidance and jaw movements.

About: NA,
By: anonymous
Response: Occlusion

About: NA,
By: anonymous
Response: The importance of occlusion in the various fields of dentistry. Also the pathology caused by mal-occlusion

About: NA,
By: anonymous
Response: How to mount models

About: NA,
By: anonymous
Response: Consequences of occlusal trauma; Mounting models in occlusion

About: NA,
By: anonymous
Response: how to take impressions and mount models

About: NA,
By: anonymous
Response: the jaw movements

About: NA,
By: anonymous
Response: To always check for a patient's occlusion after a procedure such as a restoration in; so that we never let them go home with high points of occlusion because this lead to a lot of pain and TMJ problems.

About: NA,
By: anonymous
Response: I really enjoyed this class. It was probably my favorite course this summer. Dr. Clark and Dr. DaSilva are both fantastic and very invested in our education. Functional occlusion is exceedingly more important than just esthetic occlusion.
Question 19: In my opinion the course or teaching methods could be improved to facilitate student learning by:

**Evaluation:** DEN 6213C Fundamentals in Occlusion - Summer 2013 Course Evaluation

**Directory:** DEN 6213C Fundamentals of Occlusion - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:33 on 01/16/14.

**About:** NA,
**By:** anonymous
**Response:** Having only one teacher at a time. The teaching method was hard to follow because of different explanations and a disorganized feel. While I realize many concepts are complex; please prepare a more concise way of explaining the concepts.

**About:** NA,
**By:** anonymous
**Response:** Split the class up more with the mounting labs and have more helpers to make it less stressful

**About:** NA,
**By:** anonymous
**Response:** It would be great if we could get a little more practice with everything we learn.

**About:** NA,
**By:** anonymous
**Response:** Being more organized and not having Dr. Clark + Dr. DeSilva speak over one another/contradict one another. Regardless I enjoyed this course; thank you for the conversational and intriguing atmosphere!

**About:** NA,
**By:** anonymous
**Response:** I know time is an issue but I believe it would be helpful to do the impressions and mounting more than just one time to be familiar with it or at least do a few more before we are actually in clinic. Also the laterotrusion/ mediotrusion jaw movements were explained in a confusing way at first. I am assuming we will learn this in another course but I want to be able to relate the occlusion principles to our operative class to make our restorations in proper occlusion with the opposite arch with articulating paper and bite adjustments. Finally; some labs were chaotic with too many people and not enough machines so maybe we could break into smaller groups so it will be more efficient.

**About:** NA,
**By:** anonymous
**Response:** The lab sessions were very interesting but often seemed to be inefficient. I think it would be easier breaking the class into smaller groups so that faculty could spend time with fewer students. This would take less time per group and provide a more direct and efficient method of understanding the material.

**About:** NA,
**By:** anonymous
**Response:** more faculty help during labs would be more helpful
About: NA,
By: anonymous
Response: This was an interesting and paramount class for our dental career. However; based on how much we hear that we will be taking impressions and pouring models; it would have been more beneficial to have much more lab time practicing these activities. Secondly; I think this class could improve if many more TAs were utilized during lab time.

About: NA,
By: anonymous
Response: More faculty needed to help in lab. I always felt lost and unsure of what I was doing.

About: NA,
By: anonymous
Response: placing the titles of lectures in eco. do not simply list lectures as L-1 or L-9. Also label lectures with their respective numbers in eco for easy access.

About: NA,
By: anonymous
Response: Sometimes the contradictions in class between the two professors could be frustrating. Also I believe there could be more faculty for laboratory exercises.

About: NA,
By: anonymous
Response: The course needs much more organization and guidance. The lectures were consistently inconsistent and contradicting. The labs were chaos when they were originally trying to keep us all in the same ab together; but got better when we were split into smaller groups.

About: NA,
By: anonymous
Response: Less lectures and more labs that way the attendance would improve and I personally learn better hands on. Also please increase faculty to student ratio.

About: NA,
By: anonymous
Response: better coordination between Dr. Clark and Dr. DaSilva.

About: NA,
By: anonymous
Response: The lab portion of the class was the most stimulating part of the course. |The class might have been too broad; which made it difficult to grasp information and be able to apply it to a practical situation.

About: NA,
By: anonymous
Response: Need more lab work less lecture time. |2 very nice teachers but don't really know how to explain things with words. Therefore more lab would be more helpful.

About: NA,
By: anonymous
Response: I really didn't love the team taught method for this class. It was really hard for me to follow when they both would interject and I feel like they both had different opinions. It also made class seem
very unorganized.

About: NA,
By: anonymous
Response: In the labs things got a little stressful due to the lack of faculty but the faculty that was present were very helpful.

About: NA,
By: anonymous
Response: The lectures could be a little more organized and there could be more labs following lecture to help reinforce concepts.

About: NA,
By: anonymous
Response: The only issues that we ran into this year might have been scheduling. Too many students were in the wet lab at one time and there was a lot of wasted time standing around and waiting. It would be beneficial to divide up the lab time into sections and have smaller groups in the lab.

About: NA,
By: anonymous
Response: The best things about this course is that I can tell both professors where genuinely interested in having us understand the material not just memorize. However; I think that specially with the topic of jaw movements; and I know both Dr.DaSilva and Dr.Clark know; it was a little confusing. I would recommend revising the first lecture to in one lecture include all the different names for the different movements like Dr.DaSilva did today. Also the 'live' drawing was very helpful; I recommend this exercise is done in the very first lecture talking about contact points; and a similar exercise done for mandibular movements only. thanks for the labs; they were very helpful and i enjoyed them.

About: NA,
By: anonymous
Response: Continue to do the video watching outside of class. There was the best use of time for everyone. Try to get students in lab more with more hands-on skills. To completely prepare them for clinics and taking impressions/ mounting models.

About: NA,
By: anonymous
Response: Having more hands-on-learning.

About: NA,
By: anonymous
Response: the lectures could be more clear but overall it was pretty good. The clinical sessions really helped in understanding for real life situations.

About: NA,
By: anonymous
Response: Sometimes the faculty provided us with what seemed like conflicting information. It would have been nice to hear one explanation and have things more "black and white" for the exam.

About: NA,
By: anonymous
Response: I felt there was a decent amount of ambiguity during lectures between Dr. Clark and Dr.
Desilva. It seemed there was disagreements And confusion while describing certain points of occlusion. If there were only one lecturer this may help the lecture run more smoothly. Labs were great though.

About: NA,
By: anonymous
Response: excellent course; Love both professors!

About: NA,
By: anonymous
Response: more lab session and hands on activities will help understanding course better

About: NA,
By: anonymous
Response: being more to the point. went incircles sometimes

About: NA,
By: anonymous
Response: Please fix the slides. The notes in the slides say that movements are determined by the side of the mandible; but then after the first exam; you guys changed it up and said that the movements are determined by the direction of the movement. Please correct the slides to actually say this.

About: NA,
By: anonymous
Response: The only complaint I have for this course is the lack of confidence during the lectures. At some points both lectures would be interjecting their opinions which would sometimes conflict and would be confusing to listen to. Otherwise I thought this course was well structured and informative.

About: NA,
By: anonymous
Response: Adding more faculty in lab sessions. A lot of time is wasted waiting around trying to get help from a professor.

About: NA,
By: anonymous
Response: Confusing when you keep changing what was said.|More hands on - I don't know if I have enough practice to feel comfortable with a patient. |More videos that help with the material - very abstract to me.

About: NA,
By: anonymous
Response: Dr. Clark and Dr. DaSilva are both so nice and truly care about the students. However; the course is not well organized and often their demonstrations during lecture left me really confused. They often interrupt each other with other examples and never finish a thought fully. Also; their exam questions are not detailed enough and confuse some of use. For example: What movement is this?|That question could say: What movement is the maxilla making?|Just little tweaks in the course would make it better. I enjoyed the course but hope that in the future it is a little more organized and the material is presented in a way that comes off as clear to the students.

About: NA,
By: anonymous
Response: Certain things were taught several times; but confused us more. As they were teaching they
would say the wrong thing often times and then confuse the class and have to go back. Lectures didn't feel very organized for this reason.

About: NA,
By: anonymous
Response: More organized lessons and less confusing explanations.

Login: Christina Haskins
Menus: Tasks Files Archives Directories Login
Time Remaining: 117:26
The following evaluation scores and statistics were reported at 09:34 on 01/16/14. This evaluation contains 20 total submissions.

### Response Percentages

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<td>The course was well organized and integrated into the overall curriculum. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>My knowledge and abilities were evaluated fairly and consistently through written examinations. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>There was continuity in course content when transitioning from one faculty member to the next. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>Handouts were useful in understanding lecture materials. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>The text (Basic Pathology, by Kumar, Cotran, and Robbins) assisted in my understanding the course content. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>I would rate this course as: Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent</td>
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**Response Details**

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<td>The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>There was continuity in course content when transitioning from one faculty member to the next. Scale: 1=Strongly Disagree</td>
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Evaluation Comments

debug3: /volumes/derdata/webroot/evals/dentistry/cgi-data/evaldata/6350/6350_Sum13.evl debug4: 0 Evalsuite_eval=HASH(0x1a20bb0) **Evaluation: DEN 6350 Disorders of the Body Systems - Summer 2013 Course Evaluation**

**Directory:** DEN 6350 General Pathology - Evaluations
**Subject:** all subjects included.
**Selection criteria is:** All records

The following evaluation comments were reported at 09:34 on 01/16/14. This evaluation contains 20 total submissions.

---

**Grouped by Question**
Question 13: The most significant thing(s) I learned in this course is

Evaluation: DEN 6350 Disorders of the Body Systems - Summer 2013 Course Evaluation
Directory: DEN 6350 General Pathology - Evaluations
Selection criteria is: All records
The following responses were found at 09:34 on 01/16/14.

About: NA
By: anonymous
Response: I enjoyed the challenge of thinking more like a clinician. Putting it in clinical context made it enjoyable to learn.

About: NA
By: anonymous
Response: One of the best most informative courses thus far; thank you

About: NA
By: anonymous
Response: Great course! Although I wish it wasn't weighted as much since it took up most of my studying time. I wish I did not have to sacrifice as much time from my "dental" classes; but I found the course very interesting and informative!

About: NA
By: anonymous
Response: Oral lesions diagnosis

About: NA
By: anonymous
Response: Everything!

About: NA
By: anonymous
Response: Different diseases and how they manifest.
**Question 14:** In my opinion the course or teaching methods could be improved to facilitate student learning by:

**Evaluation:** DEN 6350 Disorders of the Body Systems - Summer 2013 Course Evaluation
**Directory:** DEN 6350 General Pathology - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:34 on 01/16/14.

About: NA
By: anonymous
Response: The only thing I disagree on is the grading scale. I believe there should be + and -. |I got 2 A's and 2 B's and ended up with a B..... same as someone who received C's and B's. Doesn't make too much sense.

About: NA
By: anonymous
Response: More problem solving cases could be introduced during class in small group discussions; especially in the dermatology lectures with so many different skin abnormalities. Lecture order could be better organized--the Cancer lectures should be introduced earlier so that terminology and basic test methods serve as a foundation for future lectures. Due to the volume of information; perhaps having more tests with less lectures per test will be easier to manage since Host Defense was tested on the same day. For example; have 5 tests with 10 lectures each instead of 4 lectures with 12-14 lectures each. If it is possible for faculty to coordinate this; perhaps similar concepts in Host Defense and Pathology can be introduced around the same time and therefore tested on the same day (provided that Host Defense and Pathology tests are still scheduled on the same day).

About: NA
By: anonymous
Response: Having sample questions...it was hard for me to put the information together the 1st time for the 1st test. I improved over time but it wasn't enough to get a great grade. |

About: NA
By: anonymous
Response: Some instructors notes were poorly descriptive

About: NA
By: anonymous
Response: I really enjoyed this class. It was run very well and I would not change anything.

About: NA
By: anonymous
Response: No improvement needed. Great course!

About: NA
By: anonymous
Response: I did not agree with the fact that we were not allowed to make comments during an exam review. I found most of the information incredibly interesting; but exams tended to contain such a large amount of information on each one that I mostly had to memorize and expel the information.

https://dentistry.medinfo.ufl.edu/cgi/evaltoolkit.cgi
About: NA
By: anonymous
Response: Adding more visuals to the lectures.
Evaluation Scores and Statistics

The following evaluation scores and statistics were reported at 09:35 on 01/16/14. This evaluation contains 11 total submissions.

Response Percentages

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<td>72.7%</td>
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<td>The course met the stated goals and objectives listed in the syllabus (e.g., introduction to the various patient treatment clinics, clinical certification renewals and the application of compliance to infection control and quality assurance practices). Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>81.8%</td>
<td>18.2%</td>
<td>11</td>
<td>0.40</td>
<td>4.2</td>
<td>The course syllabus was complete, clear, and helpful in my understanding of the course. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>72.7%</td>
<td>27.3%</td>
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<td>4.3</td>
<td>The course was well organized and integrated into the overall curriculum. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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https://dentistry.medinfo.ufl.edu/cgi/evaltoolkit.cgi
3=Not Sure 4=Agree 5=Strongly Agree

5 0.0% 0.0% 0.0% 63.6% 36.4% 11 0.50 4.4 The clinical experiences in this introductory rotation have prepared me sufficiently to begin providing patient care in the TEAM clinics.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

6 0.0% 9.1% 9.1% 36.4% 45.5% 11 0.98 4.2 My knowledge and abilities were recorded fairly and consistently through sign off sheets that included a range of clinical experiences to be observed or completed.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

7 0.0% 0.0% 27.3% 45.5% 27.3% 11 0.77 4.0 The course director effectively facilitated the presentations and rotations and was attentive to student concerns.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

8 0.0% 9.1% 9.1% 54.5% 27.3% 11 0.89 4.0 I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent

Response Details

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curriculum
Scale: 1=Strongly Disagree
2=Disagree 3=Not Sure
4=Agree 5=Strongly Agree

The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills.
Scale: 1=Strongly Disagree
2=Disagree 3=Not Sure
4=Agree 5=Strongly Agree

The clinical experiences in this introductory rotation have prepared me sufficiently to begin providing patient care in the TEAM clinics.
Scale: 1=Strongly Disagree
2=Disagree 3=Not Sure
4=Agree 5=Strongly Agree

My knowledge and abilities were recorded fairly and consistently through sign off sheets that included a range of clinical experiences to be observed or completed.
Scale: 1=Strongly Disagree
2=Disagree 3=Not Sure
4=Agree 5=Strongly Agree

The course director effectively facilitated the presentations and rotations and was attentive to student concerns.
Scale: 1=Strongly Disagree
2=Disagree 3=Not Sure
4=Agree 5=Strongly Agree

I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good
4=Very Good 5=Excellent
The following evaluation comments were reported at 09:35 on 01/16/14. This evaluation contains 11 total submissions.

---

**Grouped by Question**
Question 10: In my opinion the course or teaching methods could be improved to facilitate student learning by:

**Evaluation:** DEN 6015 Professionalism In Patient Care and Practice Management I - Spring 2013

**Course Evaluation**

**Directory:** DEN 6015 Professionalism In Patient Care and Practice Management I - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:35 on 01/16/14.

**About:** NA
**By:** anonymous

Response: The sign off sheet should be revised to better reflect activities that were actually completed in our clinic shadowing. Add in more aXium related tasks. Also; in the course introduction; describe how we are able to gain clinic RVUs through assisting.

**About:** NA
**By:** anonymous

Response: Although we worked in groups in axium all semester I really did not learn out to fully treatment plan a patient the entire way through until we did by ourselves in the final meeting. I think one or two more of individual treatment planning would have been even more beneficial.

Login: Christina Haskins
Menus:  Tasks   Files   Archives   Directories   Login

Time Remaining: 115:43

_This page was generated by the EvalSuite Evaltoolkit (version 5.12) at the University of Florida College of Dentistry on January 16, 2014 at 09:35._

_Copyright © 1999-2014._
The following evaluation scores and statistics were reported at 09:35 on 01/16/14. This evaluation contains 20 total submissions.

### Response Percentages

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| 1  | 0.0% | 5.0% | 10.0% | 50.0% | 35.0% | 20  | 0.81 | 4.2 | The course met the stated goals and objectives listed in the syllabus (e.g. prescribe, perform and interpret a radiographic examination appropriate for the patient).
|    | Strongly Disagree | Disagree | Not Sure | Agree | Strongly Agree |
| 2  | 0.0% | 5.0% | 5.0% | 50.0% | 40.0% | 20  | 0.79 | 4.2 | The course syllabus was complete, clear, and helpful in my understanding of the course.
|    | Strongly Disagree | Disagree | Not Sure | Agree | Strongly Agree |
| 3  | 0.0% | 10.0% | 10.0% | 50.0% | 30.0% | 20  | 0.92 | 4.0 | The course was well organized and integrated into the overall curriculum.
|    | Strongly Disagree | Disagree | Not Sure | Agree | Strongly Agree |
| 4  | 10.0% | 5.0% | 5.0% | 50.0% | 30.0% | 20  | 1.23 | 3.9 | The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills.
|    | Strongly Disagree | Disagree | Not Sure | Agree | Strongly Agree |
| 5  | 5.0% | 10.0% | 15.0% | 40.0% | 30.0% | 20  | 1.15 | 3.8 | My knowledge and abilities were fairly...
evaluated by the course faculty via quizzes, assignments, and examination. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

6  5.0%  5.0%  20.0%  40.0%  30.0%  20  1.09  3.9 The radiographic interpretations assignment in e-Learning was helpful applying early interpretation skills. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

7  5.0%  0.0%  5.0%  50.0%  40.0%  20  0.95  4.2 Dr.Katkar effectively facilitated the course presentations and was attentive to student concerns. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

8  5.0%  5.0%  15.0%  45.0%  30.0%  20  1.07  3.9 I would rate this course as: Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent

Response Details

Q# Invalid Blank 1 2 3 4 5 N SD Mean Question and Response Scale

1  0  0  0  0  1  2  10  7  20  0.81  4.2 The course met the stated goals and objectives listed in the syllabus (e.g. prescribe, perform and interpret a radiographic examination appropriate for the patient). Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

2  0  0  0  0  1  1  10  8  20  0.79  4.2 The course syllabus was complete, clear, and helpful in my understanding of the course. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

3  0  0  0  2  2  10  6  20  0.92  4.0 The course was well organized and integrated into the overall curriculum. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

4  0  0  2  1  1  10  6  20  1.23  3.9 The teaching methods supported active learning, evidence-based practice, and
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<th>The radiographic interpretations assignment in e-Learning was helpful applying early interpretation skills.</th>
<th>Dr. Katkar effectively facilitated the course presentations and was attentive to student concerns.</th>
<th>I would rate this course as:</th>
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| Login: Christina Haskins | Time Remaining: 115:16 |

This page was generated by the EvalSuite Evaltoolkit (version 5.12) at the University of Florida College of Dentistry on January 16, 2014 at 09:35. Copyright © 1999-2014.
Evaluation Comments

Subject: all subjects included.
Selection criteria is: All records

The following evaluation comments were reported at 09:36 on 01/16/14. This evaluation contains 20 total submissions.

Grouped by Question
**Question 9:** The most significant thing(s) I learned in this course is

**Evaluation:** DEN 6301C Fundamentals of Oral and Maxillofacial Radiology - Summer 2013

**Course Evaluation**

**Directory:** DEN 6301C Fundamentals of Oral and Maxillofacial Radiology - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:36 on 01/16/14.

About: NA
By: anonymous
Response: How to take oral x-rays; most helpful thing I've learned in this course.

About: NA
By: anonymous
Response: How to take X-rays

About: NA
By: anonymous
Response: I learned how to take radiographs; although I feel like one more lab to practice how to properly take radiographs would have been helpful. I feel this way because I am a very hands-on learner.

About: NA
By: anonymous
Response: Lab

About: NA
By: anonymous
Response: How to take x-rays.

About: NA
By: anonymous
Response: Anatomy landmarks in radiographs; how to take PAs and BWs; buccal object rule; and different cephalometric radiographs and key landmarks.

About: NA
By: anonymous
Response: I learned a lot about how to interpret X-rays.
**Question 10:** In my opinion the course or teaching methods could be improved to facilitate student learning by:

**Evaluation:** DEN 6301C Fundamentals of Oral and Maxillofacial Radiology - Summer 2013

**Course Evaluation**

**Directory:** DEN 6301C Fundamentals of Oral and Maxillofacial Radiology - Evaluations

**Selection criteria is: All records**

The following responses were found at 09:36 on 01/16/14.

**About: NA**
**By: anonymous**
**Response: Nothing great course**

**About: NA**
**By: anonymous**
**Response: Dr. Pettigrew should make his lectures available on MediaSite. I think it's more important that we; as future healthcare professionals; are able to thoroughly understand the material rather than he worry about copyright issues. ||Also; I think more radiology labs are needed to test our abilities at taking X-rays.**

**About: NA**
**By: anonymous**
**Response: I think there is a LOT of unnecessary info that is dwelled upon in this course. I think one lecture would be sufficient about the history of xrays; methods of how they used to take xrays; and everything else that is very irrelevant and outdated to todays standards of xrays. I also think the pictures and xrays used as "examples" were outdated and poor examples most of the time. Today; we have mostly evolved to digital xrays; and while it is important to understand how they used to process xrays; half the class time should not be consumed by this knowledge. It would have been much better spent learning how to take xrays and interpret them and their anatomy.**

**About: NA**
**By: anonymous**
**Response: More hands on time in lab**

**About: NA**
**By: anonymous**
**Response: I followed Dr. Pettigrews advice and purchased the book. I loved it and thought it was super helpful; especially to prepare for lecture and to help me study for lectures that weren't tape recorded because I am not the best note taker. I am not sure how I did on the final. There were quite a few i was unsure about; but I was a little disappointed that there weren't more pictures on the final. After all it is a radiology class. I also think that the pictures used to test BOR should be new pictures and not the ones from class in order to really test our knowledge.**

**About: NA**
**By: anonymous**
**Response: Lecture slides need to be updated. Pictures look very outdated and some diagrams are confusing without any written text next to it. The lab was excellent! If more labs could be done with the older radiographic techniques or even a clip from a video; this will help reinforce the concept of how to process film manually. It would have been most helpful if all lectures were permitted to be recorded**
(just a voice recording would be fine) since the exams were so spread out. If attendance is the concern for not allowing recordings; quizzes or point deductions could be done instead. I went to all classes but still needed some refreshers on earlier lectures before a scheduled exam. Regardless; I very much liked this course! I enjoyed learning and locating specific anatomy features on X-rays and how to tell if a lesion could be harmful.

About: NA
By: anonymous
Response: PLEASE update the course material. Almost everything is ancient; the research presented was conducted before many of the students were born. The course could greatly benefit from current research and updated images; perhaps even skip the F speed and go straight to digital.

About: NA
By: anonymous
Response: one should be able to rewatch the lectures jim pettigrew taught as it is not possible to gauge what would be expected to learn just from the slides and difficult to grab important things that he wants us to know when he lectures.

About: NA
By: anonymous
Response: The lectures that are related to anatomy and interpretation should be recorded because it is impossible for us to jot all the information during the lecture. ||We should have more than 2 exams to determine our grade.

About: NA
By: anonymous
Response: i do not feel that the final examination tested my understanding of interpreting radiographs and in fact was too focused on the physics portion of the course. the first midterm exam was very fair; unlike the final exam.
Evaluation Scores and Statistics

The following evaluation scores and statistics were reported at 09:36 on 01/16/14. This evaluation contains 21 total submissions.

### Response Percentages

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<td>4.4</td>
<td>The course met the stated goals and objectives listed in the syllabus (e.g. give students an understanding of the immune system and its role health and disease). Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>0.50</td>
<td>4.4</td>
<td>The course syllabus was complete, clear, and helpful in my understanding of the course. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>The course was well organized and integrated into the overall curriculum. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>My knowledge and abilities were evaluated fairly and consistently through written examinations.</td>
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<td>4.4 The course met the stated goals and objectives listed in the syllabus (e.g. give students an understanding of the immune system and its role in health and disease). Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>4.4 The course syllabus was complete, clear, and helpful in my understanding of the course. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>4.1 The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>4.2 My knowledge and abilities were evaluated fairly and</td>
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Dr. Brown effectively facilitated the course presentations and was attentive to student concerns. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

I would rate this course as: Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent
Dr. Brown effectively facilitated the course presentations and was attentive to student concerns.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent
Evaluation Comments

debug3: /volumes/derdata/webroot/evals/dentistry/cgi-data/evaldata/6128/6128_Sum13.evl debug4: 0
Evalsuite_eval=HASH(0x1a1c660) Evaluation: DEN 6128 Structure & Function of Body Systems 2-
Summer 2013 Course Evaluation
Directory: DEN 6128 Host Defense - Evaluations
Subject: all subjects included.
Selection criteria is: All records

The following evaluation comments were reported at 09:37 on 01/16/14. This evaluation contains 21
total submissions.

Grouped by Question
**Question 8:** The most significant thing(s) I learned in this course is (are):

**Evaluation:** DEN 6128 Structure & Function of Body Systems 2- Summer 2013 Course Evaluation

**Directory:** DEN 6128 Host Defense - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:37 on 01/16/14.

About: NA
By: anonymous
Response: How the immune system works. It coincided really well with Pathology lectures; which was helpful.

About: NA
By: anonymous
Response: Immune system overall- very consistent and flowing story of how our immune system works; absolutely loved this class.

About: NA
By: anonymous
Response: immunology

About: NA
By: anonymous
Response: The role of the immune in the oral cavity.
**Question 9:** In my opinion the course or teaching methods could be improved to facilitate student learning by:

**Evaluation:** DEN 6128 Structure & Function of Body Systems 2- Summer 2013 Course Evaluation

**Directory:** DEN 6128 Host Defense - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:37 on 01/16/14.

About: NA
By: anonymous
Response: nothing

About: NA
By: anonymous
Response: Dr. Brown did a great job with this class. I also really enjoyed learning from Dr. Peck. My favorite section of this course material was the last section where it was an application of our knowledge. I found it very interesting. My least favorite was the hypersensitivity section. I thought I really understood that section while I was studying and then I really struggled through that part of the test.

About: NA
By: anonymous
Response: Please provide some description on slides that have images

About: NA
By: anonymous
Response: Not sure why we do case studies.

Login: Christina Haskins
Menus: Tasks Files Archives Directories Login

Time Remaining: 114:06

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*This page was generated by the EvalSuite Evaltoolkit (version 5.12) at the University of Florida College of Dentistry on January 16, 2014 at 09:37.*

*Copyright © 1999-2014.*
Evaluation Scores and Statistics

The following evaluation scores and statistics were reported at 09:37 on 01/16/14. This evaluation contains 14 total submissions.

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<td>4.2</td>
<td>My knowledge and abilities were evaluated fairly and consistently through written</td>
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The invited speakers were knowledgeable and unbiased about the topic presented and contributed to my understanding of preventive dentistry.  
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree  

Dr. Cooper effectively facilitated the course presentations and was attentive to student concerns.  
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree  

I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent  

### Response Details

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<td>0.83  4.3 The course syllabus was complete, clear, and helpful in my understanding of the course. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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- **Scale:** 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree
- **My knowledge and abilities were evaluated fairly and consistently through written examinations.**
- **The invited speakers were knowledgeable and unbiased about the topic presented and contributed to my understanding of preventive dentistry.**
- **Dr. Cooper effectively facilitated the course presentations and was attentive to student concerns.**
- **I would rate this course as:**

**Login:** Christina Haskins  
**Menus:** [Tasks](#) [Files](#) [Archives](#) [Directories](#) [Login](#)  
**Time Remaining:** 113:28
Evaluation Comments

dev3: /volumes/derdata/webroot/evals/dentistry/cgi-data/evaldata/6502/6502_sum13.evl  dev4: 0
Evalsuite_eval=HASH(0x1a19768) Evaluation: DEN 6502 Preventive Dentistry - Summer 2013
Course Evaluation
Directory: DEN 6502 Preventive Dentistry - Evaluations
Subject: all subjects included.
Selection criteria is: All records

The following evaluation comments were reported at 09:38 on 01/16/14. This evaluation contains 14 total submissions.

Grouped by Question
**Question 9:** The most significant thing(s) I learned in this course is

**Evaluation:** DEN 6502 Preventive Dentistry - Summer 2013 Course Evaluation

**Directory:** DEN 6502 Preventive Dentistry - Evaluations

**Selection criteria is:** All records

The following responses were found at 09:38 on 01/16/14.

About: NA
By: anonymous
Response: Sealant lab.

About: NA
By: anonymous
Response: I really enjoyed the sealants lab! I always find these labs very interesting; fun and necessary!
**Question 10:** In my opinion the course or teaching methods could be improved to facilitate student learning by:

**Evaluation:** DEN 6502 Preventive Dentistry - Summer 2013 Course Evaluation  
**Directory:** DEN 6502 Preventive Dentistry - Evaluations  
**Selection criteria is:** All records  
The following responses were found at 09:38 on 01/16/14.

**About:** NA  
**By:** anonymous  
**Response:** I really enjoyed placing sealants on each other and the nutrition portion of this course was very interesting. I learned a lot and will hopefully be able to use my knowledge to counsel patients in the future.

**About:** NA  
**By:** anonymous  
**Response:** Removing a large portion of nutrition. I think a general knowledge of nutrition is important; but this time would have been better spent in the clinic. Instead; we had nearly 350 slides on nutrition over the course of 4 lectures; which is WAY too much. I also really hated the way the eco folder was organized for this class; and had a very hard time finding and downloading lectures and powerpoints since the folders were a mess and contained lectures from years ago as well.
debug3: /volumes/derdata/webroot/evals/dentistry/cgi-data/evaldata/6407C/6407C_sum13.evl debug4: 0 Evalsuite_eval=HASH(0x1a25754) Evaluation: DEN 6407C Preclinical Operative Dentistry 2 - Summer 2013 Course Evaluation Directory: DEN 6407C Preclinical Operative Dentistry II - Evaluation Subject: all subjects included. Selection criteria is: All records

The following evaluation scores and statistics were reported at 09:38 on 01/16/14. This evaluation contains 31 total submissions.

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<td>3.0</td>
<td>The course met the stated goals and objectives listed in the syllabus (e.g. teach the etiology, diagnosis, and prevention of dental caries and the treatment of large carious lesions and broken cusps). Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>1.34</td>
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<td>The course syllabus was complete, clear, and helpful in my understanding of the course. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>The course was well organized and integrated into the overall curriculum. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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<td>The teaching methods supported active learning, evidence-based practice, and the development of critical thinking skills. Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree</td>
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| 5  | 46.7%| 30.0%| 10.0%| 10.0%| 3.3%| 30  | 1.14| 1.9  | My knowledge and abilities were
evaluated fairly and consistently through written and psychomotor examinations.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

6 10.0% 10.0% 40.0% 36.7% 3.3% 30 1.01 3.1 This course has prepared me to provide operative care for my future patients.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

7 32.3% 19.4% 12.9% 25.8% 9.7% 31 1.43 2.6 Dr. Geraldeli effectively facilitated the course presentations and was attentive to student concerns.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

8 51.6% 29.0% 6.5% 9.7% 3.2% 31 1.13 1.8 I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent

### Response Details

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The course met the stated goals and objectives listed in the syllabus (e.g. teach the etiology, diagnosis, and prevention of dental caries and the treatment of large carious lesions and broken cusps).
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

The course syllabus was complete, clear, and helpful in my understanding of the course.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

The course was well organized and integrated into the overall curriculum.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree

The teaching methods supported active learning,
evidence-based practice, and the development of critical thinking skills.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree
My knowledge and abilities were evaluated fairly and consistently through written and psychomotor examinations.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree
This course has prepared me to provide operative care for my future patients.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree
Dr.Geraldeli effectively facilitated the course presentations and was attentive to student concerns.
Scale: 1=Strongly Disagree 2=Disagree 3=Not Sure 4=Agree 5=Strongly Agree
I would rate this course as:
Scale: 1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent

Login: Christina Haskins

Time Remaining: 112:44
Evaluation Comments

debug3: /volumes/derdata/webroot/evals/dentistry/cgi-data/evaldata/6407C/6407C_sum13.evl debug4: 0
Evalsuite_eval=HASH(0x1a25754) Evaluation: DEN 6407C Preclinical Operative Dentistry 2 - Summer 2013 Course Evaluation
Directory: DEN 6407C Preclinical Operative Dentistry II - Evaluation
Subject: all subjects included.
Selection criteria is: All records

The following evaluation comments were reported at 09:38 on 01/16/14. This evaluation contains 31 total submissions.

Grouped by Question
**Question 9:** The most significant thing(s) I learned in this course is (are)

**Evaluation:** DEN 6407C Preclinical Operative Dentistry 2 - Summer 2013 Course Evaluation

**Directory:** DEN 6407C Preclinical Operative Dentistry II - Evaluation

**Selection criteria is:** All records

The following responses were found at 09:38 on 01/16/14.

About: NA,
By: anonymous
Response: Worst organized and taught course so far.

About: NA,
By: anonymous
Response: That you have to complain constantly to ever get faculty to help you in sim lab.

About: NA,
By: anonymous
Response: How to make a good marginal ridge.

About: NA,
By: anonymous
Response: I learned that the majority of the time I learn more from other students than actual teachers.

About: NA,
By: anonymous
Response: Class 2 composite and amalgam preparations and restorations

About: NA,
By: anonymous
Response: class II restorations and preparations; as well as amalgam

About: NA,
By: anonymous
Response: Clinical preps and restorations in sim lab

About: NA,
By: anonymous
Response: there is more than one way to skin a cat. Meaning there are a lot of different ways to do each procedure and you just have to find the best one that works for you.

About: NA,
By: anonymous
Response: How to restore complex class II composite and amalgam.

About: NA,
By: anonymous
Response: Everything was significant and applicable. I'm thankful for the patience and flexibility of the faculty and their willingness to help us. |The lectures were good and professors were very engaging; but more organization/ preparation was needed for both students and faculty for Sim Lab to have made it
run smoother and more efficiently. This is where posting example videos would be extremely helpful.

About: NA,
By: anonymous
Response: I did learn how to perfect my composite class 2 and some experience with amalgam

About: NA,
By: anonymous
Response: Restoring class I and II lesions using composite and amalgam.

About: NA,
By: anonymous
Response: Precise clinical skills within strict limits.

About: NA,
By: anonymous
Response: Learning to do composite restorations of a complex nature.
Question 10: In my opinion the course or teaching methods could be improved to facilitate student learning by:

Evaluation: DEN 6407C Preclinical Operative Dentistry 2 - Summer 2013 Course Evaluation
Directory: DEN 6407C Preclinical Operative Dentistry II - Evaluation
Selection criteria is: All records
The following responses were found at 09:38 on 01/16/14.

About: NA,
By: anonymous
Response: More faculty help in sim lab. I was assisted by a faculty member TWICE during the entire month of July during sim lab due to short staff.

About: NA,
By: anonymous
Response: Presentations had no clear agenda as to what the teacher expected the student to know from the lecture. The ideas presented especially in the first half of the course was not precise in content. We were given reading assignments for each presentation; I would have liked to have seen that the lecturer asked us to come prepared for the class; offered their viewpoint and present the merits of the procedures described in the text book Vs the flexibility of the same procedure in the clinic. The first written exam was a surprise in terms of its pattern and the way it was graded. The cumulative exam final had only 40 Qns which did not do justice to the amount of material that we had to learn. The practical part of this course had a lot of challenges that could have been best managed with a little bit of organization and effective time management. The daily grading did not provide for a learning atmosphere; we had less number of faculty supervising us which was a Catch 22 situation when it came to effectively finishing the daily procedure and getting signed off. On our side of the lab; we had 1 faculty covering about 4 rows of students; making it difficult for both student/faculty to get/give feedback. The general feedback was "you have to practice more" without concrete feedback on how to improve. Having Dr Clark at the end of the course was a breath of fresh air as she was one of the few teachers who spent quality time with the student and give feedback which was productive and tangible and something to work on. I would not get antsy when she spent 10-15 min with my fellow classmate as I knew she would do the same with me and in the end I would get feedback which I could work on and improve. Also I felt that the pattern we had in Dental Anatomy can be emulated in this course as far as presentations and expectations of the type of work needed in the practicals. I needed to see what a 4 looks like on a cavity prep/restoration. Show me a tooth that has 4s in all aspects; Show me 1s/critical error preps/restorations so I can see something tangible as to what not to do. Videos need to be uploaded for every procedure we are asked to do in simlab and make it mandatory for us to do some preparation before we show up to class/practice. Just saying lets discuss the subject in class without asking us to do any preparation and not having an agenda for the topic to be presented was counterproductive as the session dragged and became redundant making us lose precious simlab time; we were asked to complete the day's assignment as "home work" meaning work in Jr-Sr lab without supervision. So most of the simlab work was a catchup game to get signed off. The disappointment we felt as students was compounded by instances where we were given instrument sharpening instructions just prior to a psychomotor; losing precious time to setup video cameras to show a particular procedure instead of posting it as a required viewing instruction; putting up pictures of the procedure to be done that day and saying the picture projected was lacking in some of the requirements that was expected of us instead of projecting videos of the procedure constantly; the disconnect we felt when we perceived that the general notion was we complain too much or our poor performance was due to lack of commitment or hard work. I do understand when it came to the big picture the faculty did whatever they could to the best of their abilities but unfortunately for us it was not enough.
About: NA,
By: anonymous
Response: Providing examples of previous psychomotor teeth and their scores.

About: NA,
By: anonymous
Response: 1) Have a sample of student-made restorations and preparations that have been evaluated (4; 3; 2; fail; etc. in each category) then pass these examples around in class where students can physically hold the specimen and get a better understanding of what is expected. 2) We could benefit from having faculty rotate sections more effectively/regularly in the Sim lab at every session. I noticed that most of the time; the same faculty member was with the same cluster of students. While that can be helpful; I would receive more of a variety of opinions from the techniques of multiple faculty. 3) Small group demonstrations in addition to videos posted online (videos were helpful)

About: NA,
By: anonymous
Response: Dr. Geraldeli is a very nice person; and has great attitude. He means well. BUT his teaching skills are not good. Dr. Clark is GREAT at explaining why and how things are supposed to be done. I guess teachers are more helpful when they are not the course directors.

About: NA,
By: anonymous
Response: Dr. Geraldeli did not know how to relay the concepts in a proper manner. When given examples for sim labs to follow or to imitate; most of the time; the parameters or criteria were wrong. This led us to follow the wrong examples and make more errors. When showing examples on video; the faculty should make sure they have the right examples with the right parameters as much as possible. I think faculty need to rotate and get different sections each time we meet at the sim lab. It seemed like a section would get the same two or three faculty for the whole semester. There should be a faculty rotation system.

About: NA,
By: anonymous
Response: Being more organized would have helped. I felt like we were being experimented on and flying by the seat of our pants. The labs stressed me out; when I have otherwise really looked forward to operative labs. Even the professors were stressed in the labs. It was difficult to get help unless you were miserably failing something. The exam was also a ridiculously inaccurate judge of knowledge. I can't read several 100 pages worth of information and pull a sentence out of the textbook verbatim for an exam--that defeats the whole purpose of learning. That being said; the lab got significantly better when the stress and pressure of daily grades and sign offs were reduced; which allowed students to better focus on practice and not so much on the amount of homework and sign offs they had to complete.

About: NA,
By: anonymous
Response: Less work to do in sim lab. Too many procedures to be finished in a short amount of time and not enough faculty to critically assess the restoration or preparation. I feel like the faculty ended up rushing through the grading process and not providing critical feedback or advice for the student.

About: NA,
By: anonymous
Response: Dr. Geraldeli is very nice person and good clinician; but bad teacher and course director. The course was unorganized and evaluating methods (especially grading scale for psychomotor tests) are
outdated. Daily grade was based on grading on the procedures the majority of class never did before; thus it automatically was suppose to lower students overall grade. Many important aspects of amalgam restorations were not even discussed.

About: NA,  
By: anonymous  
Response: There really are not enough faculty in sim lab. We need more help.

About: NA,  
By: anonymous  
Response: Fair and consistent grading system for written exams and phsychomotors; more faculty involvement in sim lab; fair exam and quiz questions - questions should be clear; and more instructional videos like the complex amalgam restoration videos.

About: NA,  
By: anonymous  
Response: Be more organized; make sure to see each student assigned to your section at least once during lab; have more faculty and/or TAs present in lab.||Put videos of the procedures to be done in lab up on ECO before lab.

About: NA,  
By: anonymous  
Response: Lecturer requires better time management. The lectures were too long sometimes that we don't even have enough time to finish our lab practices. ||I recommend to mask the student ID before the professor to grade our dentoform. ||We should have less reading but more powerpoint presentation because it is almost impossible to read so many pages during final exam week (6 exams in a week). ||The exam should be multiple choice format because the grading is very subjective. ||Students should have a comprehensive exam review.

About: NA,  
By: anonymous  
Response: Making the information tested on written exams more clear in order for the students to prepare and study accordingly.

About: NA,  
By: anonymous  
Response: Post more videos of lab procedures before we get into Sim Lab. This way we will have more time to do procedures and practice. And make these videos readily available to students. It would also be nice if there were more faculty/ TAs; that way students back get more input on their own techniques and what they're doing correct or incorrect. |

About: NA,  
By: anonymous  
Response: Lecture should be taught in a timely fashion so that the important slides toward the end that connect with lab activities are not rushed through. Introducing a new concept on the morning of a psychomotor (I.e. how to sharpen instruments correctly) does not help facilitate a positive attitude toward actually doing the psychomotor exam. It distracts from the task at hand and makes students more nervous. Flexibility is important in all classes but there were too many last minute changes that were decided in this course--psychomotor mock/ remediation felt very disorganized and what was conveyed were just ideas or suggestions for the future but not actual things that would happen. For example; stating that we "shouldn't do a remediation" because our overall average was high was even more
stressful during a loaded final exam week. There were continuous moments of discontinuity in this
course and it even felt like the faculty was frequently not a united team. If another "fill in the blank"
exam is administered; clear instructions on how to prepare is necessary. Multiple choice exams are
different to prepare for than the short response test we had for the midterm. Students did not know how
specific or detailed or even length in explanation we needed. Operative daily grade sheets are too
stressful when learning a new skill. To be graded while doing a procedure for the first time is too
pressuring especially if we have not become proficient at a skill. Learning dental skills from a textbook
on our own has felt like we have had no concrete teaching or guidance. Most of what we were tested on
during the final exam was not thoroughly explained in class for the operative portion. Lecture slides
should emphasize what is important rather than expecting us to search for the answer is a dense reading.
The Dental anatomy course layout and execution is a great example of how organized lectures; labs; and
exams should be organized and administered--expectations were clear and lecture notes were very
helpful. More over; the lecture slides were informative; thorough; and taught us about dentistry. To
teach something that is important clinically even though it is different from the textbook is a great thing.
But then supporting the textbook response on a test rather than what was taught in class as the "actual
clinical procedure" makes it confusing on how to do well on an exam. In retrospect; the lab activity
where we hand painted the tooth internal walls was not a good use of time considered how critical we
were graded in later exercises. Sim lab should be an environment that fosters and encourages the gradual
improvement on skills rather than an in depth critique on what we do not yet know how to do well.
Professors even seemed stressed attempting to evaluate each student on the detailed grade forms. Once
our skills are more improved later in the course; this detailed evaluation process would be more
beneficial. But to grade us while we are learning and expecting us to adapt to such technique sensitive
procedures is too high of an expectation. The day we did not have to fill out the grade forms and just
focused on practicing and getting good feedback from professors made everyone; including the
professors; feel more relaxed because we could focus on just practicing and receiving support rather
than constantly worried if our progress was good enough. Show more videos on what is expected; ahead
of time so that the process on the lab exercises is clear. Maybe we could pair up more in class so that we
can help our classmates while also learning how a different hand piece may help us; especially if we
haven't used one before. Maybe we could do a trouble shooting session during sim lab as well in which
we exchange poor restorations we have done and attempt to fix each others mistakes.

About: NA,
By: anonymous
Response: We need more instructors in lab. There were several labs where I did not even speak to an
instructor. This led to me not knowing if my work was satisfactory and getting behind on signatures;
which made me even more stressed out the next session. Also; the communication between Dr.
Geraldeli and the class was poor. There was one instance when he emailed us at 11 at night to say that
lab the next morning was going to start earlier than normal. Additionally; he never talked to us about
upcoming psychomotors/exams in class; so we never had an opportunity to ask questions about them as
a class. Finally; it took him 2 months to grade our first exam; and he never gave us a single update about
them or why it was taking so long.

About: NA,
By: anonymous
Response: This course needs to revamped from the beginning. The teaching methods are poor; the class
is disorganized; and learning is at a minimum. Most dire thing that needs to be fixed is the amount of
 faculty present in sim lab. Five faculty for 82 students is not enough. There are days where I don't even
get a chance to see an instructor so my restoration or preparation doesn't get evaluated and I don't know
what I'm doing wrong; what to fix; or how to fix because I have no feedback. Besides that the amount of
assignments per day and the organization of it is; for lack of another term; horrendous. Three and a half
hours for a demonstration; a prep and a restoration is not enough for us as beginners still learning how to
perform these procedures. We don't have enough time to finish the assignment and if we finish them outside sim lab then it is pointless because we don't have faculty to give us feedback. For the second part of the course; first day after our psychomotor with the amalgam preparation we were expected to perform a wax carving and then also perform an amalgam carving and get evaluated on both. This is not realistic considering we had only done one or two previous amalgam so we barely knew what to do. I like how the faculty realized that and did not require that we have both done but that should still be realized ahead of time. I understand that the course is still being constructed but key things should be obvious and the faculty must adapt the course to meet our expectations as dental students learning the dental profession. We expect to be provided the resources to learn operative dentistry and I feel this is not happening both in terms of faculty and organizational capabilities and I am very disappointed with the way this course has been structured.

About: NA,
By: anonymous
Response: Having lab where individuals are evaluated everyday as if it was a psychomotor did not facilitate learning. The instructors were generally not present until the very end of the class or where not very receptive to helping students. I was left to figure out how to do everything via peers and tutors. I never felt confident in what I knew or my skills. I feel that having "daily grades" does nothing but teach students shortcuts to get the grade and not feel confident in their abilities. Also; please demonstrate what we are about to do live. Everytime we learned something new there was no demonstration. The professors would only show us how to do a complex restoration several labs after we already were left to our own accord to learn how to do the restoration. It would save us a lot of time and effort if professors would just show us how to do the particular restoration.

About: NA,
By: anonymous
Response: MORE FACULTY!! we need more feedback from faculty members to help us as we go. There just arent enough to go around and give all of us proper feedback. Ideally it would be nice for a faculty member to watch us do a complete procedure and as we go tell us what we are doing right or wrong and help us on the way. [Better organization- a lot of times in lab we were sitting around waiting to be checked off by faculty doing nothing. We were dead in the water and could not move on to the next assignment. [The faculty is very knowledgable about operative skills and teaching there just are not enough to go around and the organization of sim lab is poor. [Dr. G for example is great with hands on instructions and teaching the procedures. He also cares alot that we do well but it just seemed overwhelming for him to coordinate the course with the organizational aspect. ||Also somehow it would be nice to have review labs periodically so we can go over the procedures we learned previously so we can maintain the skills we have learned.

About: NA,
By: anonymous
Response: No fill in the box; please. But if there is; student should know ahead of time and have better instructions on what is expected from them. Please don't make us read chapters. We learn better when it is in the slide (presentation could be 200 slides long). Thanks

About: NA,
By: anonymous
Response: operative II is one of the most important courses of our future careers since it deals with class II restorations (which are significantly occurring in patients). although i learned the "basic" techniques of how to perform those i am still unclear about certain aspects of expectations of our work. the lab grading was inconsistent (until the time of the 3rd PT exam). i also felt like the course was very unorganized; for example the instruments need to be sharpened before the post test exam; not during the
morning of the exam. as far as the written portion; i thought the midterm exam was very fair and the fact that it was written was a good way of testing the class about our knowledge of the subject. however; the grading of it was not as fair. the details that were expected of the answers were not easily met as the question was very vague. an improvement on that could be specifying the details in the question so that the student knows what to discuss in answering the question. also; in lab; certain things should have been directed towards the whole class (i.e. i knew about a specific error because i made it my business to make the professor explain to me why and how points were deducted on the error; because i didn't see it as such). when it came time for the exam; some students did not know that they were making that same mistake because none of the faculty explained it to them.

About: NA,
By: anonymous
Response: being more organized and realizing that daily grades is asking for too much from your faculty and students given the time and size of the class. student should not be penalized for not being able to get our sheets signed off daily. If we are understaffed or we just learned the technique that day. as well quizzes and exam answers should not be so word specific. and if so prepare them by letting them know they need to know the specific seconds; generations of acid etch; instead of knowing the general steps and types of acid etch..etc.

About: NA,
By: anonymous
Response: More professors in sim lab...16:1 student to faculty ratio is ridiculous. In the month of July I saw faculty a total of 2 times; both of which were during the mock psychomotors. Also there should be clear cut objectives for each session in sim lab. I cannot recall how many times I was working on the wrong assignment because the faculty failed to clearly express which assignments were priorities.

About: NA,
By: anonymous
Response: Dr. Geraldeli is a fine gentleman and a good instructor; however he was a terrible course director. Sim Lab activities were terribly organized; students had limited feedback from instructors and the "written" portion of the course was appauling. He taught many key clinical concepts in class yet discredited many of our answers as a result of his teaching due to the fact that "even though this is what I taught; it is not stated this way in the book and therefore its wrong." I believe that many of us are more confused by operative II as a result of his leadership and have this suffered greatly from an academic standpoint. It took him 2 months to grade our mid terms and even after when we had concerns about the grading; talking with him was useless. Please understand that I mean no disrespect and genuinely like Dr. Geraldeli; however this course was not well executed at all and has been in a state of disarray from day 1.
Class of 2014  
Comparison of Student Benchtop Outcomes on Mock Board and Florida Board Exam  
DEN 8960L: Clinical Examination 2 (Mock Board Examination) Part I  
October 2013  

Endodontics  
Total of 48 failures.  
- 2 students failed #8 only.  
- 40 students failed #14 only. *See note below  
- 5 students failed both #8 and #14.  
- 2 students who have a “0” for access on anterior started on the wrong teeth and were allowed to remediate during the mock board session. They successfully remediated #8, but have a fail grade for #14.  

*Administrative Note: This was the first year we used the Accadental model and the primary issue was the access opening on tooth #14. Many of our students failed the mock board and this was not a problem previously with the other model for the access prep. The Accadental molar is much more constricted at the cervical portion than the previous model which resulted in the student’s poor performance on the mock board.  

Endodontics allowed the students to retake the exam after a one on one practice session. Only students who fail again would need to remediate.  

All students remediated by December 12, 2013  

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<th># Students</th>
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Prosthodontics  
Total of 25 failures  
- 11 students have failed all preparations  
- 6 students have failed the anterior crown preparation (#9)  
- 8 students have failed the bridge preparation (#3 to #5)
North East Regional Board of Dental Examiners (NERB) Summary
December 2013

Overall: 13 Students had failures (4 failed both Endo and Pros sections)

Endodontics
Total of 9 failures
5 had endo failures only

Prosthodontics
Total of 8 failures
4 has pros failures only