

# Uniformed Services University

of the Health Sciences



*“Learning to Care for Those in Harm’s Way”*

## Board of Regents

### Quarterly Meeting

*February 6, 2023*

## BOARD OF REGENTS

### UNIFORMED SERVICES UNIVERSITY OF THE HEALTH SCIENCES (USU)

#### 215TH MEETING

February 6, 2023 | 1:00 p.m. – 5:00 p.m. Central Standard Time  
Hosted in-person at the Second Floor Large Conference Room,  
Medical Education and Training Campus (METC) Headquarters  
3716 Corporal Johnson Rd, Bldg. 1291, San Antonio, TX, 78234  
and virtually (Online)

#### MEETING AGENDA

##### OPEN MEETING

<b>1:00 p.m.:</b>	<b>Meeting Call to Order</b> Designated Federal Officer	Ms. Annette Askins-Roberts
<b>1:00 – 1:05 p.m.:</b>	<b>Opening Comments</b> Chair, Board of Regents, USU	Dr. Nancy Dickey
<b>1:05 – 1:50 p.m.:</b>	<b>Overview of NDAA FY23</b> Acting Principal Deputy ASD(HA)	Dr. David Smith
<b>1:50 – 2:15 p.m.:</b>	<b>USU President Report</b> President, USU	HON Jonathan Woodson
<b>2:15 – 2:45 p.m.:</b>	<b>Office of Accreditation and Organization Assessment (OAC) Report</b> Assistant Vice President	Mr. Stephen Henske
<b>2:45 – 3:00 p.m.:</b>	<b>College of Allied Health Sciences (CAHS) Report</b> Dean, CAHS	Dr. Lula Pelayo
<b>3:00 – 3:15 p.m.:</b>	<b>Break</b>	
<b>3:15 – 3:45 p.m.:</b>	<b>School of Medicine (SOM) Report</b> Associate Dean, SOM Assistant Dean for Assessment Associate Dean for Assessment	Dr. Brian Reamy Lt Col Joshua Duncan Dr. Lisa Moores
<b>3:45 – 4:15 p.m.:</b>	<b>Center for Health Profession Education (CHPE) Report</b> Professor and Director, CHPE	Dr. Steven Durning
<b>4:15 – 4:30 p.m.:</b>	<b>Graduate School of Nursing (GSN) Report</b> Dean, GSN	Dr. Carol Romano

<b>4:30 – 4:45 p.m.:</b>	<b>Postgraduate Dental College (PDC) Report</b> Dean, PDC	Dr. Drew Fallis
<b>4:45 – 4:55 p.m.:</b>	<b>Discussion</b>	Regents
<b>4:55 – 5:00 p.m.:</b>	<b>Closing Comments</b> Chair, Board of Regents, USU	Dr. Nancy Dickey
	<b>Adjourn</b> Designated Federal Officer	Ms. Annette Askins-Roberts

**BOARD OF REGENTS**  
**UNIFORMED SERVICES UNIVERSITY OF**  
**THE HEALTH SCIENCES 215<sup>th</sup> MEETING**

**February 6, 2023 | 1:00 p.m. – 5:00 p.m. Central Standard Time**

**TABLE OF CONTENTS**

**Reports to the Board of Regents**

- [TAB 1](#) ... Overview of NDAA FY23
- [TAB 2](#) ... USU President Report
- [TAB 3](#) ... Office of Accreditation and Organizational Assessment (OAC)
- [TAB 4](#) ... College of Allied Health Sciences (CAHS)  
*[Tab 9 CAHS Supplemental](#)*
- [TAB 5](#) ... School of Medicine (SOM)
- [TAB 6](#) ... Center for Health Profession Education (CHPE)  
*[Tab 10 CHPE Supplemental](#)*
- [TAB 7](#) ... Graduate School of Nursing (GSN)  
*[Tab 11 GSN Supplemental](#)*
- [TAB 8](#) ... Postgraduate Dental College (PDC)  
*[Tab 12 PDC Supplemental](#)*

# **TAB 1**

## Overview of NDAA FY23

# Nation Defense Authorization Act For Fiscal Year 2023 Update

David J. Smith, MD, MS, CPE, FACOEM  
Acting PDASD(HA)

6 February 2023



PERSONNEL AND READINESS



PERSONNEL AND READINESS

## Overall Impressions

- Bolstering the direct care system
- Reaffirming the Defense Health Agency (DHA)
- Prescriptive in structure of the Military Health System (MHS)
- Ukraine collaboration
- Behavioral health focus
- Preventing the military medical personnel cuts



## **§713: Centers of Excellence for Specialty Care in the Military Health System**

- Requires DoD to establish regional specialty care centers of excellence (COE) at existing Department of Defense (DoD) major medical centers
  - Ensure ready medical and medically ready Armed Forces
  - Improve quality
  - Improve outcomes
- Requires COEs to be primary source within the Military Health System (MHS) for specialty care

3



## **§714: Maintenance of Core Casualty Receiving Facilities to Improve Medical Force Readiness**

- Requires DoD to designate/maintain four military medical treatment facilities (MTFs) as Core Casualty Receiving Facilities by 1 October 2024
  - Full operating capability by 1 October 2025
  - Geographically located to facilitate aeromedical evacuation of casualties from operational theaters
  - Staffed at not less than 90% of level required to maintain bed capacities to support operational planning requirements

4



## **§715: Congressional Notification Requirement to Modify Scope of Services Provided at MTFs**

- May not modify scope of medical care provided at an MTF or population served at a facility unless:
  - HASC/SASC notification
  - 180 day waiting period after notification
  - If terminating/reducing inpatient care, requires transition plan
  - Operational impacts of any proposed modifications

5



## **§722: Inclusion of Level Three Trauma Care Capabilities in Requirements for Medical Centers**

- Modifies Section 703 of the NDAA for FY2017 to include level three trauma care capabilities in the requirements for medical centers in DoD.
  - Previously required level two trauma care capabilities

6





### **§724: Feasibility Study and Plan on Establishing a MHS Medical Logistics Directorate and MHS Education and Training Directorate**

- Requires a study on feasibility of establishing:
  - Defense Health Agency (DHA) MHS Medical Logistics Directorate
  - DHA MHS Education and Training Directorate
  - Requires DoD to submit the findings of the study/establishment plan to HASC/SASC NLT 1 year after enactment.

7



### **§736: ESTABLISHMENT OF PARTNERSHIP PROGRAM BETWEEN U.S. AND UKRAINE FOR MILITARY TRAUMA CARE AND RESEARCH**

- By 24 February 2023, requires DoD to seek to enter into a partnership with Government of Ukraine to establish a joint military trauma care and research program
  - Lessons learned sharing
  - Joint conferences/exchanges with military medical professionals
  - Reciprocal education programs with the Uniformed Services University of Health Sciences (USUHS)
  - Establishment of Wounder Warrior Program
  - Maintenance of medical supplies and equipment needed

8



### **§737: Improvements Relating to Behavioral Health Care Availability Under MHS**

- Study on feasibility/advisability of establishing graduate degree-granting programs in counseling and social work and expanding the clinical psychology graduate program at USUHS
- Ten-year pilot program
  - Scholarships for clinical psychology, social work, counseling or related field
  - Student loan repayment assistance to credentialed providers with a graduate degree in these fields
- Analysis of behavioral health workforce under the direct care component of the MHS

9



### **§738: Certification Program in Provision of Mental Health Services to Members of the Armed Forces and Military Families**

- Requires DoD to develop curriculum and certification program for civilian mental health professionals and students to address unique needs of Armed Forces and their families
  - In consultation with Secretary of Veterans Affairs and the President of USUHS

10



### **§741: Limitation on Reduction of Military Medical Manning End Strength: Certification Requirement And Other Reforms**

- Prohibits reduction in military medical end strength authorizations for five years
- After five years, Secretary of Defense may waive in-writing the prohibition if determined it is necessary and in the interest of national security.
- Prohibits DoD from implementing the plan to restructuring/realigning MTFs until the later of the date that is 1 year after enactment or the date on which the SecDef completes the risk analysis for the realignment/restructuring of each MTF.

## **TAB 2**

### USU President Report

## **TAB 3**

Office of Accreditation Organizational  
and Assessment (OAC)

# USU Accreditation Update



**Stephen J. Henske, MHA**  
**Assistant Vice President**

6 February 2023

## Prepare the Final Draft of the Self-Study for review

- The Self-Study Draft is close to completion - it includes our ~100-page narrative and supporting 'Evidence Inventory' which demonstrates compliance with the MSCHE Standards and Requirements for Affiliation.
- Our editor reviewed the narrative and evidence has been linked within the document.

# Community Review

- This is where USU needs **YOU!**
- The final draft is complete, we have sent the document university-wide for their input. We want to make sure that information is accurate, complete, and reflects contributions from institution members.
- We'll also seek external community input and incorporate it into the final version of the Self-Study.

3



## Evaluation Visits:

Per MSCHE guidance, each branch campus and one-third of the additional locations must be included as part of the evaluation. With that in mind, the following sites have been selected:

- Ft Bragg visit: Feb 23 or 24
- SATX/Lackland visit: Week of Feb 27
- San Diego visit: Week of Mar 13
- Bethesda visit: Mar 26-29

4



# After the Evaluation Visit

Following the visits there are a few final steps to take before MSCHE takes action on USU's accreditation status.

- *Team Report* - The Team Chair will email the institution a written draft of the Team Report within 14 calendar days of the Self-Study Evaluation Visit.
- *Institutional Response* - USU will respond to the final Team Report in writing. It is an opportunity for the institution to react to the team's findings. The institution may concur with the team's findings or honestly and openly present significant differences in perceptions, interpretation, or major findings.
- *Chair's Confidential Brief* - The Team Chair will review and consider the Institutional Response and then prepare the Team Chair's Confidential Brief. As the name suggests, this document is confidential and will be provided only to the Commission; the institution does not receive a copy.
- *Decision Making Process and Notification of Commission Action* - the Commission, through its multi-level decision making process, will analyze all of the accreditation materials and any other appropriate information available to it. The Commission will take an accreditation action in accordance with its Accreditation Actions Policy and Procedures and Accreditation Review Cycle and Monitoring Policy and Procedures.

5



## Questions



6





## **TAB 4**

College of Allied Health Sciences (CAHS)

# Uniformed Services University of the Health Sciences Board of Regents Meeting February 6, 2023



Lula Westrup Pelayo, Ph.D, RN, FAAN  
Dean, College of Allied Health Sciences

## CAHS Strategic Priorities



**The Strategic Priorities for the Uniformed Services University of the Health Sciences (USU) are shared to others in the College of Allied Health Sciences (CAHS) 2022-2026 Strategic Plan.**

The CAHS's Mission, Vision, and Values revised to better align with and support the USU Strategic Plan

While the mission of the CAHS remains to educate and train highly competent and ready allied health professionals who are dedicated to serving the needs of the uniformed services and providing operational support to units around the world, its continuing maturation as an academic institution will allow it to better support the University's goals in the following domains:

- A. Education and Training
- B. Research and Scholarship
- C. Leadership and Leadership Development

The CAHS conducts standards-based, outcomes-oriented performance assessments.

Provides measures by which USU continuously evaluates its programs

Basis upon which we will improve, adapt, and expand our programs in the future.

During this process several of the CAHS's Domain Critical Tasks were revised on alignment and support of the University's plan.



## CAHS Strategic Priorities



**Domain Critical Tasks: Strategic Objectives.** To realize our vision and accomplish our mission in support the University's plan, the CAHS needs to engage a number of crucial objectives *in each of our mission domains/themes*. Our strategic objectives are ambitious, achievable and measurable.

**A. Education and Training.** Overall, the CAHS will continue and expand our support to the Defense Health Agency (DHA) and the Services to educate outstanding allied health professionals, administrators, and military leaders who are dedicated to career service and leadership in the Department of Defense and across the U.S. Government. Strategic objectives include:

1. Become the focal allied health science education institution within DoD.
2. Support the innovation and enhancement of educational approaches to create and sustain a Ready Medical Force with recognition of diversity, equity, and inclusion.
3. Seek and maintain accreditation for applicable schools, colleges, and programs.

3



## CAHS Strategic Priorities



4. Communicate the CAHS purpose and operation to USU, Academic Partners, and Collaborators.
5. Scale manpower in response to Service requirements.
6. Support the acquisition of an automated student information system to facilitate CAHS registration and transcript evaluation.
7. Assure recognition and inclusion of the CAHS in relevant USU policies.
8. Consider Graduate Education level program development efforts.

4

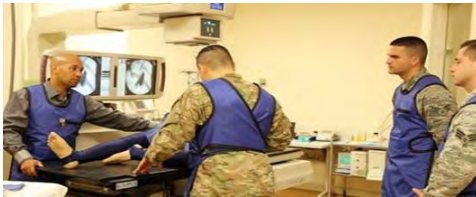


## CAHS Strategic Priorities



**B. Research and Scholarship.** The CAHS collaborates with our Academic Partners in relevant research and outcomes central to the DoD. Strategic objectives include:

1. Collaborate with our Academic Partners' program developers, managers, and directors in the initial development and systematic review of programs to ensure the inclusion of relevant research central to the DoD.
2. In collaboration with USU and external organizations, participate in long-term studies assessing the outcomes of our educational endeavors.



5



## CAHS Strategic Priorities



**C. Leadership and Leader Development.** The CAHS faculty, staff, and students are health professionals providing sought-after leadership and service throughout the Uniformed Services, and across U.S. Government in support of national security. We develop health professionals throughout a lifetime of service to the nation and provide vital support to the "Ready Medical Force". Strategic objectives include:

1. Demonstrably focus on professional and military competencies and skills through our various program offerings.
2. In conjunction with the Services and in collaboration with our Academic Partners, assess and encourage leader development components be included in all CAHS programs.
3. Develop and implement rigorous faculty development.
4. Expand the CAHS Education and Training Administration and Leadership program to prepare faculty for advanced leadership supporting the education of our Service members.

6



## CAHS Challenges



The CAHS perceives and describes efforts to help meet the following challenges:

### A. Future Resourcing

- Resourcing must be linked to Service requirements. Most Medical Military Occupational Specialties, Navy Enlisted Codes, and Air Force Specialty Codes do not *require* credentialing, or college credit for Service employment.

Action: USU is working with Services & DHA to optimize credentialing opportunities to Standard of Care & Medicare Reimbursable levels, existentially improving readiness, and serving as the accredited educational institution.

- USU Southern Region leased facilities nearing maximum capacity and end of lifecycle. USU Southern Region leased facilities are nearing maximum capacity (with seven USU FTE housed at the METC) along with the building in a deteriorating state.

Action: USU-SR working with Army North Facilities Utilization Board for new space.

7



## CAHS Challenges



### B. Pacing CAHS to meet Service Requests for affiliation

- There is a conflict with Service requests and resource availability. Services desire affiliation for Enlisted Technical Training to support readiness, standard of care, recruiting, and post-service employment, however the funding lines for Enlisted Medical Training is within the Unified Medical Budget at the DHA.

Action: The USU Vice President for Finance and Administration developing resourcing model and submitting requirements to DHA addressing these resourcing circumstances.

### C. Student Success

- The USU CAHS data is not populated within Services' Education Service Offices resulting in students experiencing difficulty in completing USU undergraduate degrees since CAHS credits and degrees are not visible within the military automated systems nor on the Joint Services Transcript.

Action: The USU CAHS is establishing its footprint within existing Services Education Offices, with the goals of students being able to access their degree plans and credits gained while in training.

8



## CAHS Challenges

### D. Missing Grades-Late Grade Entry

- Depending upon location, CAHS faculty must enter student grades into as many as six disparate systems (and up to four of these in any one single graded event) that do not data share.
- This results in duty priority confusion for this non-billeted faculty population and frustration directed at USU CAHS.
- Results in confusion for faculty and a culture of frustration directed at USU CAHS  
Action: The USU now allows select administrative personnel in programs to enter grades. However, a reasonable solution has yet to present itself.



9

## CAHS Faculty

**As with normal military personnel, the CAHS faculty organization is affected by frequent changes in assignments that may have both positive and negative impacts on teaching and operations.**

### A. Faculty Organization

Instructors who are academically or programmatically qualified and recommended by their institutional leadership are appointed as USU CAHS faculty.

- Primarily non-billeted military
- Numerous civilian and contractor instructors appointed including a small number of USU faculty members with secondary appointment with CAHS

### B. Instructor / Faculty Turnover

Military members assigned three to four-year tours of duty

- Instructors appointed CAHS faculty during period of tour (*at any point during tour*)
- Class sizes, frequency of iterations, and annual training quotas are factors in number of instructors assigned

10

## CAHS Faculty



### C. Impacts from Frequent Turnover

#### Negative

- Systematic faculty reassignments pose challenges
  - Diminished corporate knowledge of USU CAHS culture and processes
  - Lack of long-term continuity requires frequent faculty orientation and familiarization
  - Difficulties in regard to full knowledge of the relationship between the service programs and USU CAHS

Actions: Monthly faculty development opportunities include –

- CAHS Familiarization Training for all Branch Campus incoming personnel
- CAHS Initial Faculty Orientation for all newly appointed CAHS Faculty
- Faculty Development Training offered monthly to all CAHS Faculty –
  - CAHS Faculty and Program Development Process
  - Curriculum Development and Syllabus Creation
  - CAHS Program Review and Revision Process
  - Institutional and Programmatic Accreditation

#### Positive:

- Service driven personnel rotations are by design
- New faculty population brings with them the most recent operational perspectives and practices translating into enhanced classroom, laboratory, and clinical learning experiences for the students.

11



## CAHS Student Enrollment / Class Size



**The CAHS does not have equity in the concern for exceeding enrollment capacity to meet workforce needs.**

- The CAHS programs exist via an “Academic Sharing Model” with Services retaining their authorities and leveraging USU’s college credit abilities via memoranda of agreement.
- Class size, student pre-requisites, and annual programmed student throughput are determined by Service requirements
- Personnel training and education resources are determined and allocated via DoD budgeting processes.
- Currently there are fewer Initial Entry Training students arriving to Service schools (and USU CAHS). If the numbers return to previous levels, the Services will resource additional faculty, facilities, and logistics necessary to meet training requirements.

12



## Degree and Certificate Conferral CAHS Academic Year 2022



Total Degrees Awarded 2022 938				
	Army	Navy	Air Force	Coast Guard
Associate of Science 791	482	167	138	4
Bachelor of Science 147	70	76	1	0
Total Certificates Awarded 2022 3663				
Certificate	Army	Navy	Air Force	Coast Guard
	686	2816	153	8



# Discussion





## **TAB 5**

School of Medicine (SOM)

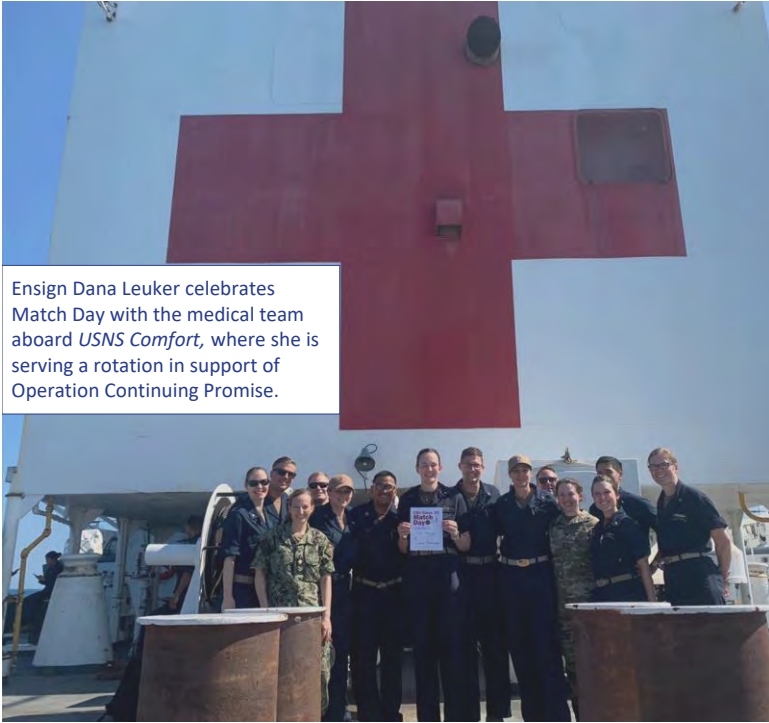
# Driving Educational Outcomes through Innovation

School of Medicine Briefing to the USU Board of Regents, 6 February 2023

Brian Reamy, MD, Col., USAF MC (Ret.)  
Vice Dean for Academic Affairs  
Professor of Family Medicine and Medicine  
School of Medicine



Class of 2023 Match Day



Ensign Dana Leuker celebrates Match Day with the medical team aboard *USNS Comfort*, where she is serving a rotation in support of Operation Continuing Promise.

## Match Day Outcomes

**87%**

87% match to specialty across all services vs. 2022 NRMP of 46% match to top specialty choice

**Top 5**

- Internal Medicine
- Family Medicine
- General Surgery
- Emergency Medicine
- Pediatrics



## ACS Military Clinical Readiness Curriculum - *mCurriculum*



**Military-civilian collaboration**

mCurriculum is a collaboration between USU and the Military Health System Strategic Partnership American College of Surgeons.



**Born at USU**

Dean Eric Elster originated the idea and led the project with support from over 100 military and civilian surgeons and SMEs.



**"Just-in-time"**

Free, mobile-ready resource offers "just-in-time" training that military surgeons can use to address skill gaps, or improve general knowledge.



**Available in Ukrainian**

First 12 modules are translated into Ukrainian.



**Clinical Readiness and KSAs**

mCurriculum is a key component of clinical readiness and KSAs.



# School of Medicine Faculty - Key Metrics



**6163**

Appointed Faculty



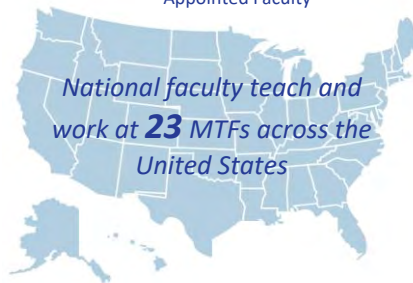
**~75%**

Military (approximate)



**~25%**

Civilian (approximate)



**11,700**

Instructional hours, 2022

**670**

Individual sessions

**1,894**

Individuals trained

**9,193**

Total session attendance (online and in person at USU and MTFs)

**~1000**

Local Faculty (Bethesda)

**~4800**

National Faculty (excluding adjunct)



## The Class of 2023 will be the Military Health System's *best-prepared new residents*



### Research: "A Comparison of HPSP and USU Graduates' Preparation for Residency"

This qualitative study examines preparedness for residency across **5 KEY THEMES**:

1. Ability to Navigate Military Culture
2. Understanding of the Military's Medical Mission
3. Clinical Preparation
4. Navigating the MHS
5. Teamwork

**Authors:** Rebekah Cole, Ph.D.; Steven J. Durning, MD, Ph.D.; Brian V. Reamy, MD, Col (Ret.), USAF, MC; Hannah C. Stewart, BS, USAF, MC; Samantha S. Williamson, BS, USAF, MC; Sherri L. Rudinsky, MD MC USN

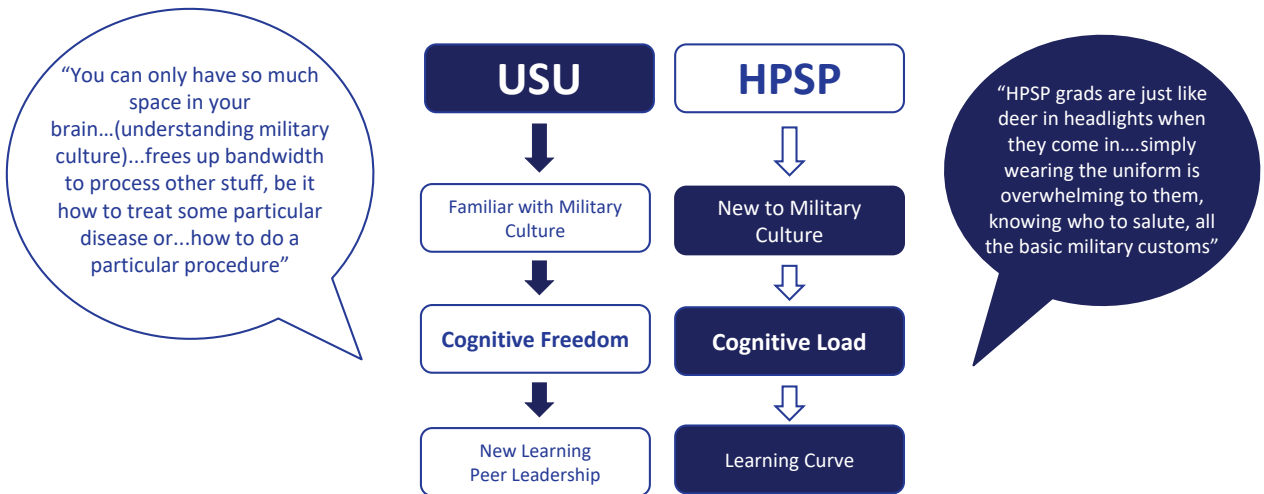
**Study participants:** 18 residency program directors with at least two years of experience in that role in an MTF

USU graduates outperform their HPSP counterparts in **FOUR of the FIVE** themes studied.





**Navigating Military Culture - Cognitive Load for Incoming Residents, USU vs. HPSP (Fig. 1)**



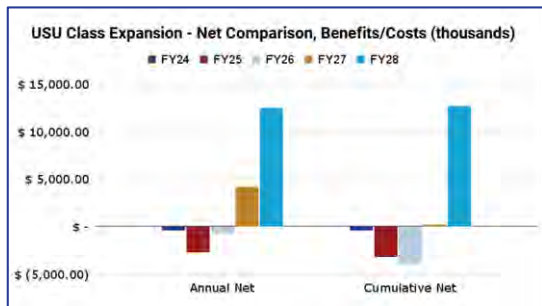
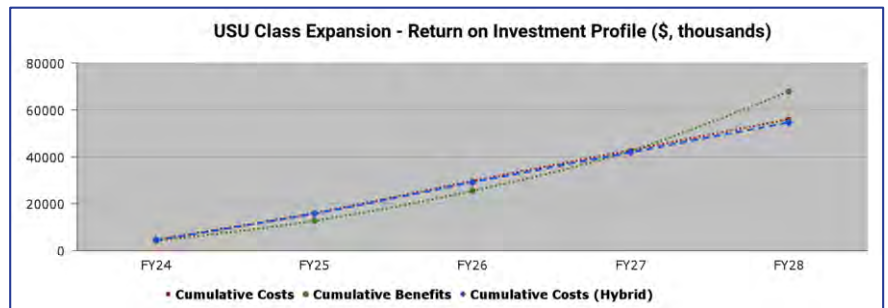
# School of Medicine Class Size Expansion

USU graduates have a 50-year history of remaining in the military well beyond the seven-year obligation. By expanding class size from ~172/year to 200/year, we can increase the number of USU graduates, which will drive higher retention rates in the Medical Corps.



## Class Size Expansion - Return on Investment

*Costs will exceed benefits in the initial years following the expansion (FY24, FY25, and FY26)*

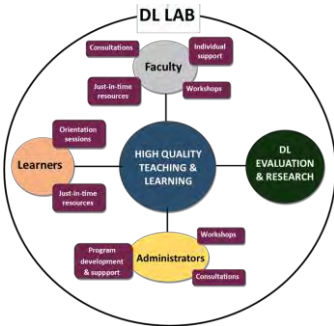


Cumulative benefits FY24 - FY28	<b>\$67,905,000.28</b>
Cumulative costs FY24 - FY28	<b><u>-\$55,253,000.36</u></b>
<b>Total return on investment</b>	<b>\$12,651,999.92</b>



**Center for Health Professions Education: Core Activities**

**Distance Learning (DL) Lab**



**CHPE Certificate and Degree Programs**



**Long-Term Career Outcome Study**



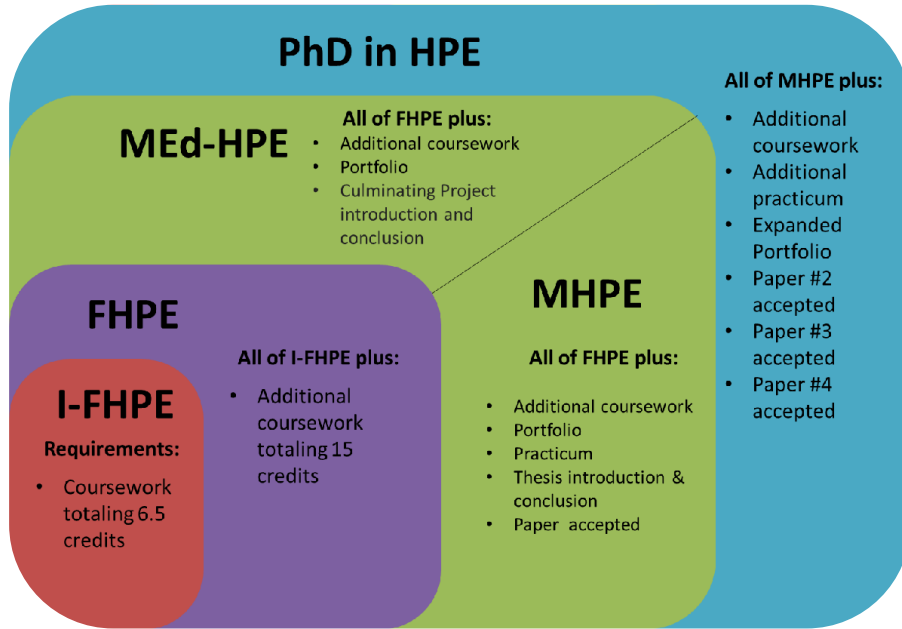
**CHPE Certificate and Degree Programs: Developing capacity in three areas**



- 1** Leadership
- 2** Research
- 3** Education



# HPE Certificates and Degrees: Stacked or Nested Programs



## Key HPE Degree Program Outcomes



**>250 graduates (nearly 100 medical students)** across a majority of medical specialties

Student body includes medical students through program directors, chairs, deans, DEOs, DIOs

Students and graduates include MDs, nurses, dentists, PT/OT, PA, pharmacists, nutritionists, psychologists, social workers

**>75%** graduates state that completing program impacts desire to remain in MHS

**100%** of degree program graduates report that they are placed in leadership positions

**Collaborations and partnerships:** Leadership curriculum for DEOs, PhD learners through IAA with VA. Additional partnerships with AAMC, AACOM, other HPE programs globally.

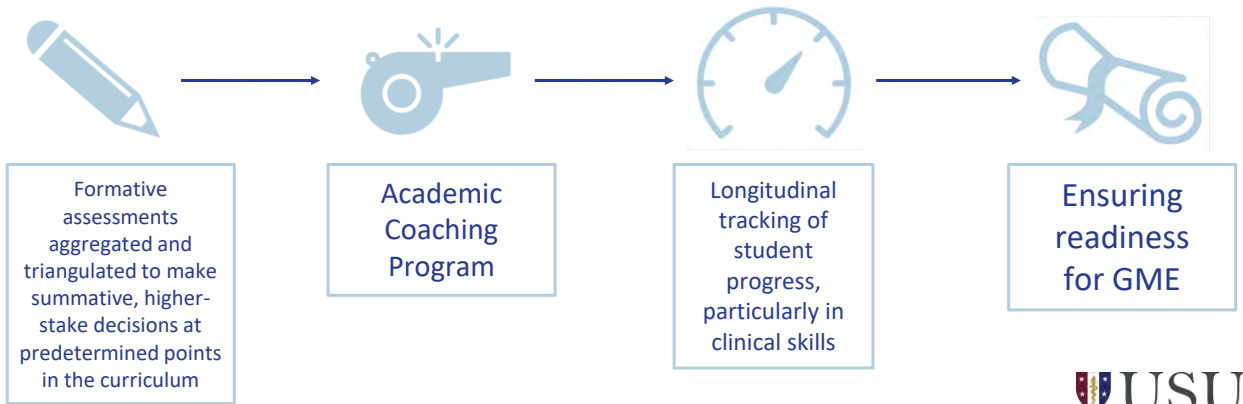




# Longitudinal Assessment Program

**Goal:** Achieve Competency-Based Medical Education

How do we get there? *Implement a Longitudinal Assessment Program*



## Longitudinal Assessment Program

Comprehensive Pre-Clerkship Performance Dashboard for each student

### SCHOOL OF MEDICINE Uniformed Services University

## Clinical Knowledge Dashboard

#### Weekly Canvas Page Views

#### Weekly Canvas Participation

#### NBME Exam Performance

#### Normalized Exam Performance & Growth Curves

Based on the past 10 years of USU student performance:

Next NBME Exam Predicted Score  
**83.25**

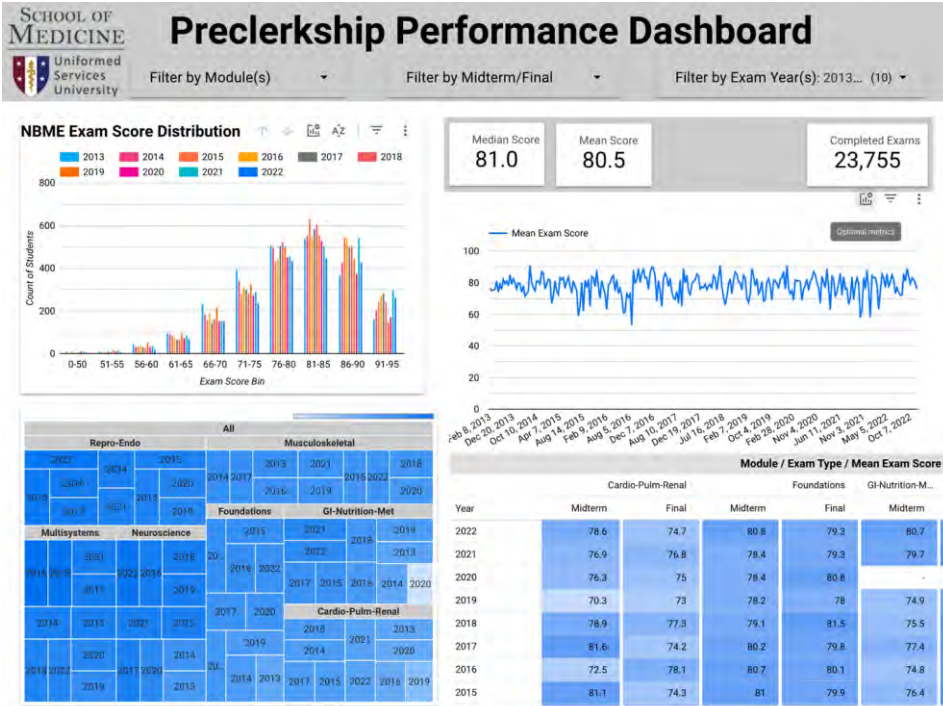
Based on the past 5 years of USU student performance:

Probability of Passing USMLE Step 1  
**94.6**

Prioritized content for review for your current module:

Content Outline	USU Mean	National Mean
07.02.06 systemic diseases affecting cardiovascular system	35%	94%
07.02.04.03 hypertension	54%	87%
06.02.01.02.02 respiratory autoimmune disorders	66%	87.09%
09.03.01.01.02 lower urinary tract infections	70.11%	88.67%
09.02.05 vascular disorders affecting renal system	59.5%	77.8%
06.01.02.03 pleura	47%	64%
07.02.05 vascular disorders	63.14%	78.71%
07.01.03.03 cardiovascular	43.82%	77.82%





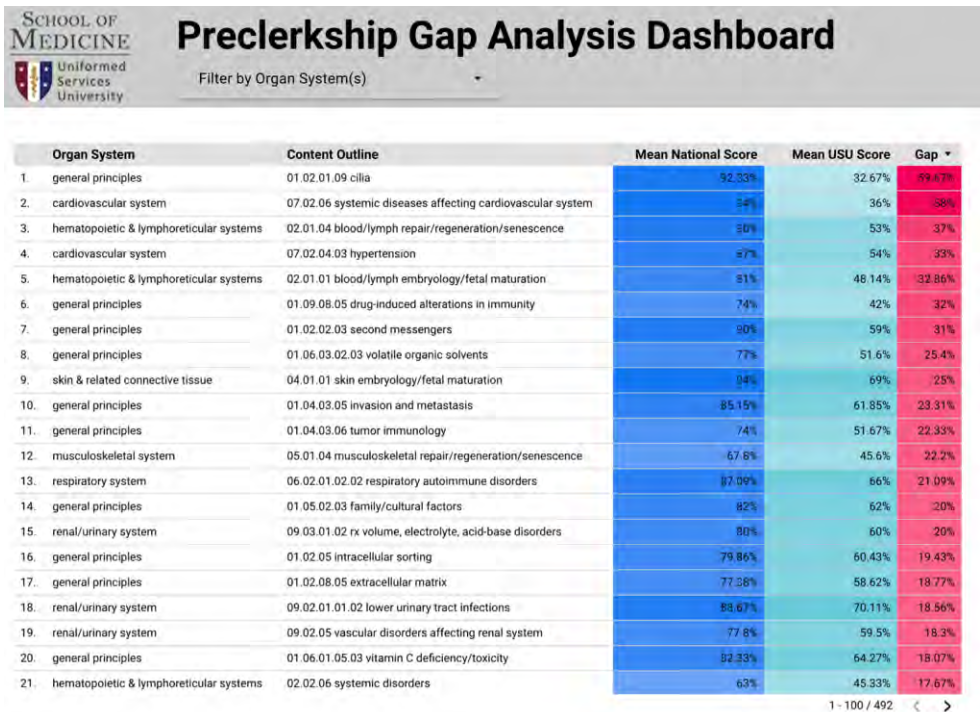
**Longitudinal Assessment Program**

Faculty-facing dashboards to review aggregate student performance



**Longitudinal Assessment Program**

A tool to identify curricular gaps and weaknesses



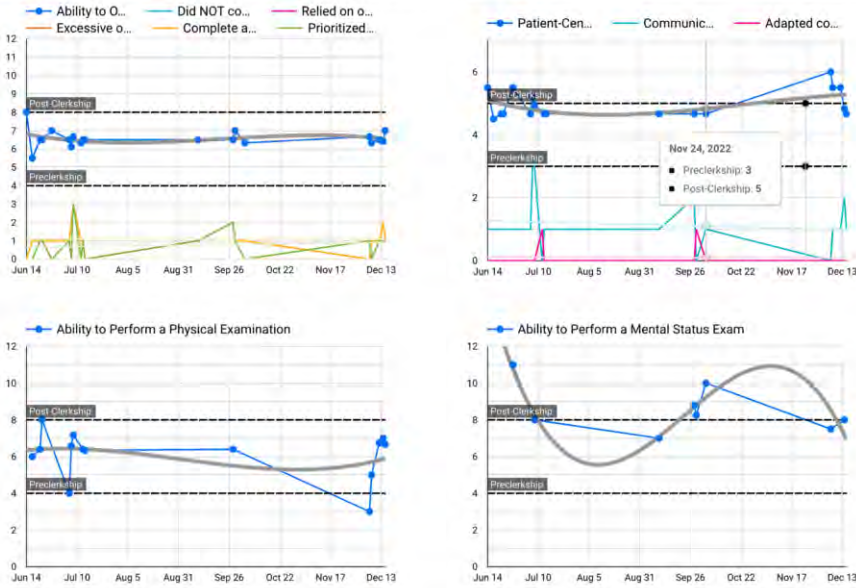
SCHOOL OF MEDICINE  
Uniformed Services University

# Direct Observation Dashboard Growth Curves

Select date range

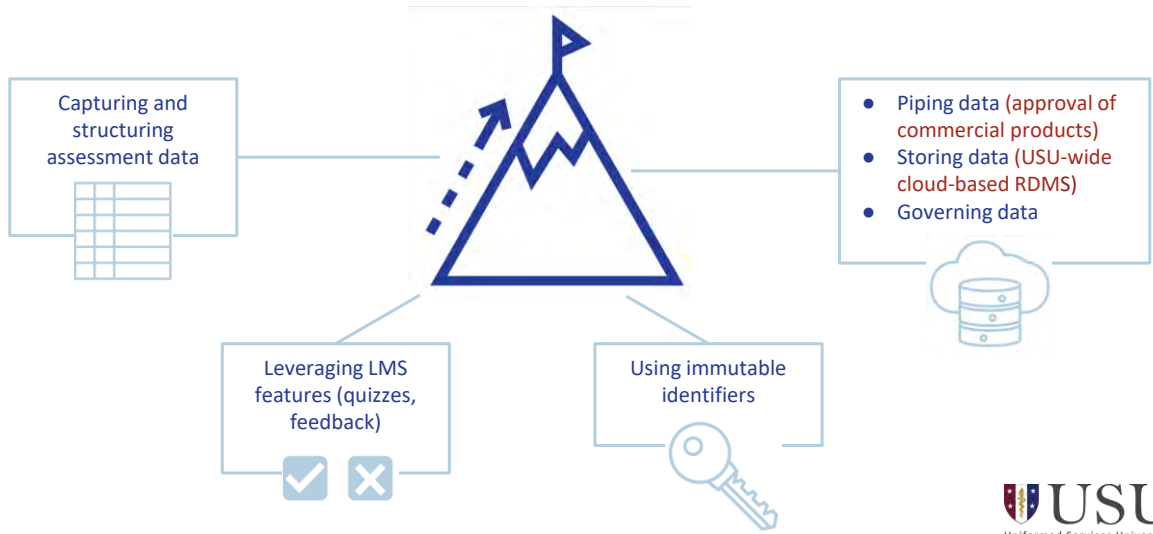
## Longitudinal Assessment Program

Individual student dashboards to track clinical skills (and EPAs) longitudinally

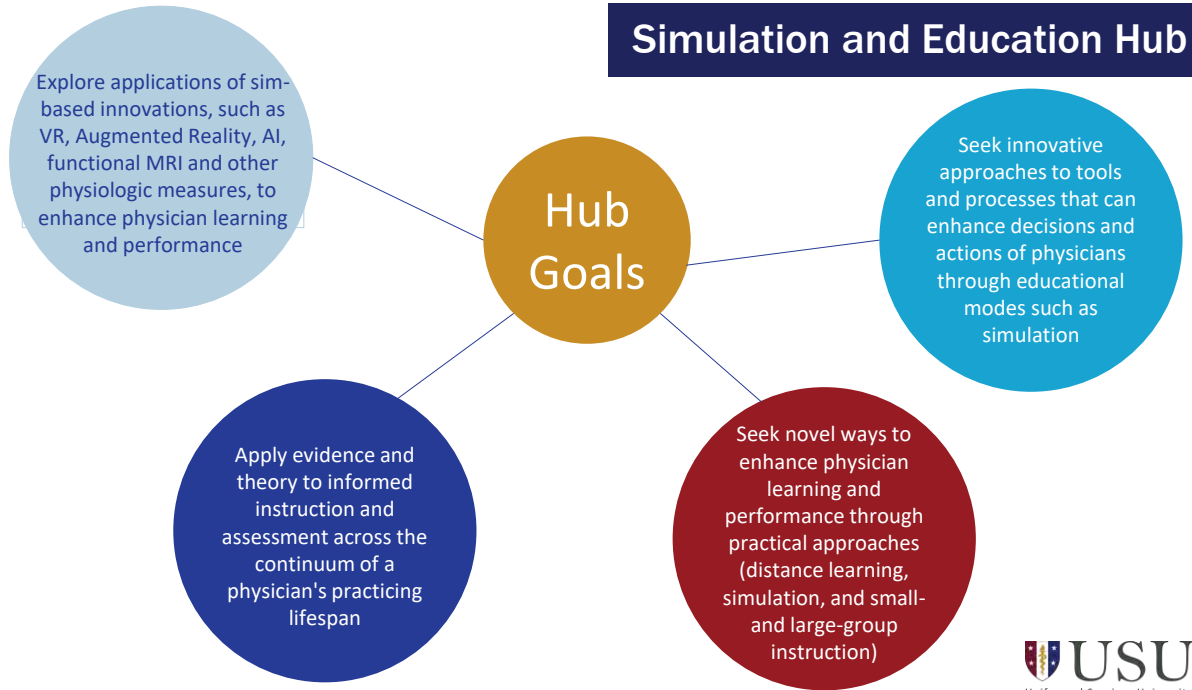


## Longitudinal Assessment Program

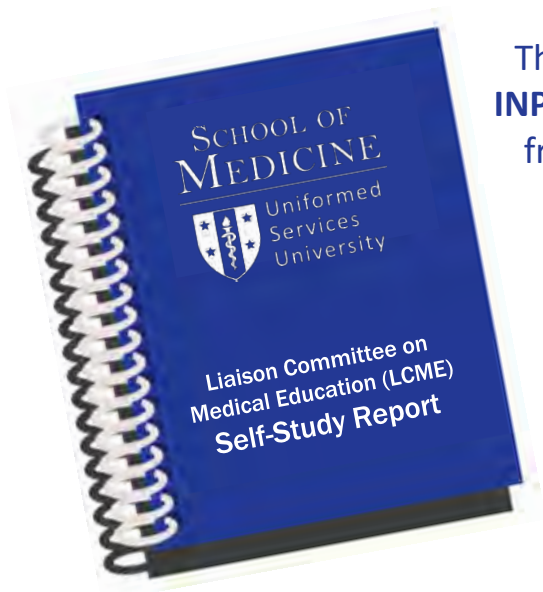
### Challenges to Data-Driven Decision-Making



## Simulation and Education Hub



## SOM Requests



The School of Medicine requests **REVIEW** and **INPUT** for our LCME Self-Study Summary Report from **one or two** Board of Regents members

**Draft - May 2023**

**Final version - August 2023**

**Package due - October 2023**



Questions?



## **TAB 6**

Center for Health Profession Education  
(CHPE)

## Center for Health Professions Education (CHPE): Enhancing the Future Health Professional Workforce for the MHS

---

Steven J. Durning, MD, PhD, MACP  
Professor and Vice Chair, Department of Medicine, USU School of Medicine  
Director, Center for Health Professions Education



### *Bottom Line Up Front: 7 ways that CHPE serves USU and the MHS*

- 1 Developing our workforce, across the continuum:  
IPE, peacetime as well as readiness skills enhancement, impact on retention
- 2 Developing and deploying educational pedagogy and technology to prepare future-ready  
global health professionals
- 3 Generating cutting edge educational research and innovation
- 4 Creating a model to link outcomes to education and training
- 5 Supporting core educational university functions (e.g. accreditation, faculty development, distance  
learning, Strategic Plans)
- 6 Building USU's national and international reputation (impact on MHS)
- 7 Tracking meaningful educational outcomes and continual improvement (e.g., OKRs)



# Why CHPE?

## Academics: USU's "superpower"



- Answer questions that others cannot
- Deliver workforce development on a national scale
- Prepare healthcare leaders for unique challenges

## Tackling faculty development challenges

*Developing academic leaders and scholars to do extraordinary things for MHS, PHS, and VA*



- Truly inter-professional, all services, across continuum
- Promoting national campus
- Meeting warfighters where they are to enhance their skills for the future



# CHPE Mission

## CHPE



To be the premier HPE provider for the MHS, PHS, and VA through leadership in education, research, and innovation

***Educate the educators, lead the leaders, and shape the scholars***





# CHPE Education and Service - Some Key Statistics



## Interprofessional Education

- >250 graduates
- >4500 instructional hours/yr
- Continuum of education



## University Wide Service

- >100 workshops/yr
- >200 consultations/yr
- Special edition for accreditation



Research

## Publications

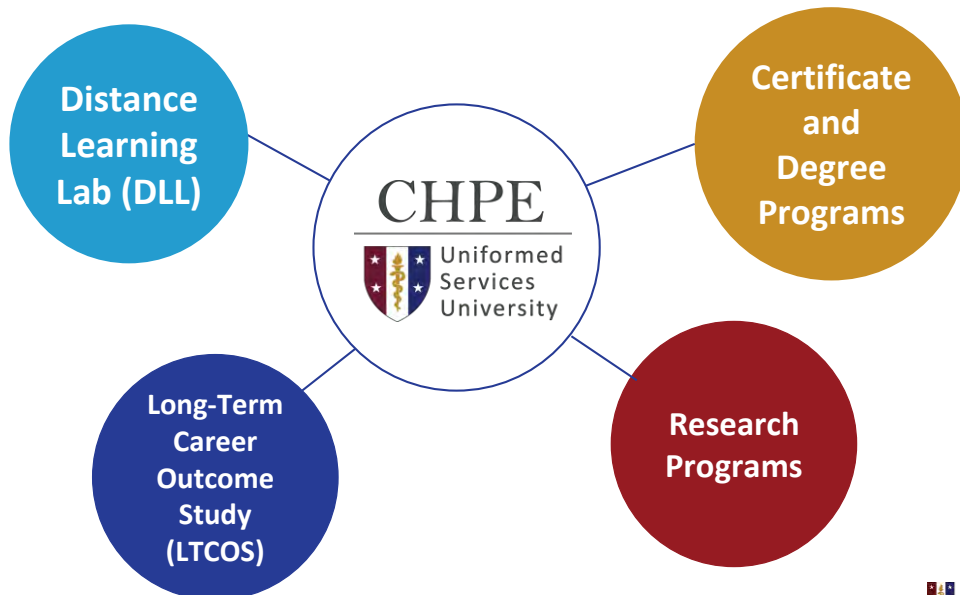
- Learners: >15 publications/yr
- Faculty: >100 publications/yr

## Grants

- 12 current projects in FY 22
- 3+ M current funding
- Sponsors: NBME, AACOM, PCORI, SDRME



## Core Activities





## Certificate and Degree Programs

2 certificates, 3 degrees  
(MHPE, MEd, PhD)

Continuum across multiple  
professions and specialties

## Value to USU and MHS

Develop workforce, enhance retention, build community of scholars and leaders across continuum, establish connections with VA and other agencies, truly IPE



Brenton R Franklin , Christopher Dyke , Steven J Durning , Anthony R Artino , Mark W Bowyer, Matthew D Nealeigh, Walter B Kucera, E Matthew Ritter 2021 Mar-Apr;78(2):655-664. doi: 10.1016/j.jsurg.2020.08.027.  
"Piloting the FIRE: A Novel Error Management Training Simulation Curriculum for Fasciotomy Instruction"



Meyer EG, Chen HC, Uijtdehaage S, Durning SJ, Maggio LA. Scoping Review of "Entrustable Professional Activities in Undergraduate Medical Education" *Academic Medicine*, 2019 Apr 2.



Kiger ME, Meyer HS, Varpio L.  
"It Is You, Me on the Team Together, and My Child: Attending, Resident, and Patient Family Perspectives on Patient Ownership" *Perspect Med Educ*. 2021 Mar;10(2):101-109.



D'Angelo MR, Seibert D, Welder MD, Cervero RM, Durning SJ.  
"Decoding Readiness: Towards a Ready Military Healthcare Force" *Military Medicine*, 2019 May 1; 184(5-6): 122-126.



Cimino F, Varpio L, Konopasky A, Barker A, Stalmeijer R, Ma T. (2022)  
"Can we realize our collaborative potential?: A critical review of faculty roles and experiences in interprofessional education" *Academic Medicine, RIME Supplement*.

## CHPE Research: Sample Papers



Witkop CT, Maggio LA, Harvey EJ, Torre DM.  
"Seeing Complexity: Cultural Historical Activity Theory (CHAT) as a Lens for Shared Decision Making" *Acad Med*. 2021 May 11. doi: 10.1097/ACM.0000000000004157.PMID: 33983138.

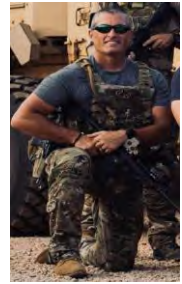
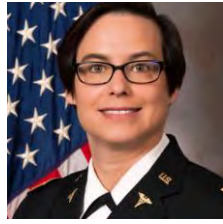


Mount, G., Kahlke, R., Melton, J., Varpio, L. (2022).  
"A Critical Review of Professional Identity Formation Interventions in Medical Education" *Academic Medicine: RIME Supplement*.

Bell AE, Meyer HS, Maggio LA.  
"Getting Better Together: A Website Review of Peer Coaching Initiatives for Medical Educators" *Teaching and Learning in Medicine*, 2019 Jun; 6:1-8.



## CHPE Graduates

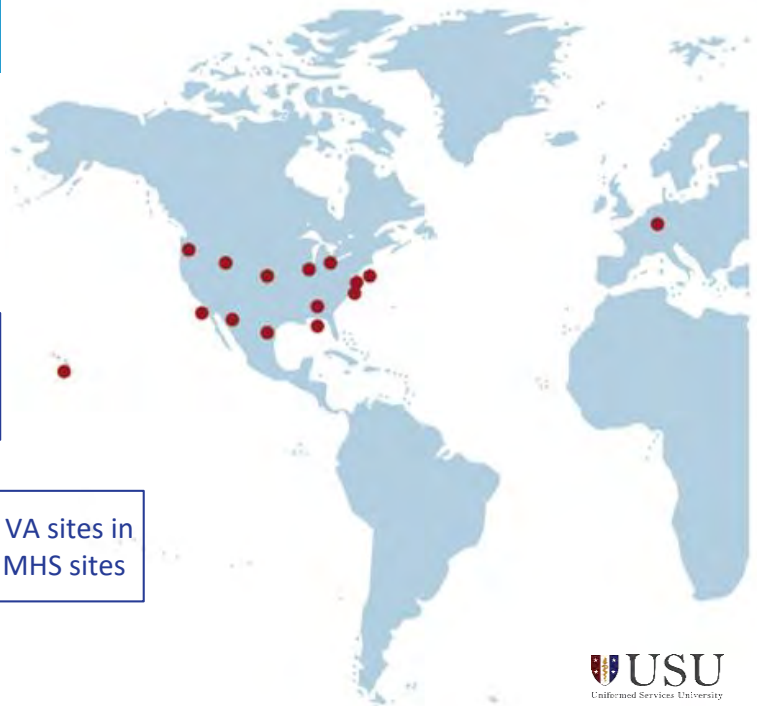


## Future Remote Sites

Provide enhanced capacity for CHPE activities

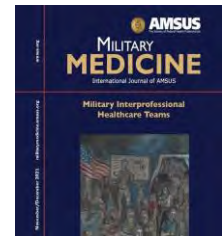
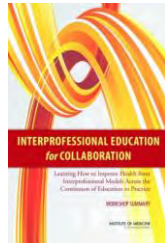
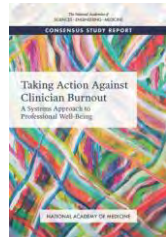
Enable CHPE to mentor and guide graduates around the world

Considering VA sites in addition to MHS sites



# CHPE Research: Diverse Research Programs

Responsible conduct of research, continuing professional development



Value to USU and MHS

Prolific cutting-edge scholarship and grants to inform our educational practice



## Long-Term Career Outcome Study (LTCOS)

Educational epidemiology (Framingham study) - studying the educational path to competence and MOC

**RESEARCH THEMES:**  
Admissions, Clinical Reasoning, Remediation, Retention, Long-Term Outcomes, DEI

- LTCOS Studies:**
- LTCOS Navy and Army Personnel Database Study
  - Staying Power: LTCOS Long-Term Study of USU Medical School Graduates (2018)
  - LTCOS PGY-1 and PGY-3 Program Director Evaluation Form Validity Evidence
  - LTCOS Assessment of Admissions Criteria and Processes

Value to USU and MHS

Assist with accreditation, study and innovate own system, numerous publications, flexible model could be used by others for outcomes (PGDC, GSN, CAHS)



LTCOS Annotated Bibliography



## Distance Learning Lab (DLL): Individualized, Just in Time Support



~500

Supported faculty during the pandemic with nearly **500 consultations** (over **70%** of billeted faculty)



>150

Over 150 workshops; held student orientations, templated and transitioned all UME modules to Canvas, transitioned GSN courses to Canvas



>700  
>4000

Distance Learning Lab site: Over 700 pageviews and over 4,000 unique visitors



## Additional Outcomes (from OKRs)



IAAs with Veterans Affairs

Military Medicine modules for HPSP students and grads



>30 resident graduates

Over 90% of graduates state they would recommend the program to colleagues

Faculty development for all new GSN and PGDC faculty



CHPE faculty serve on over 10 editorial boards



## Near Horizon Plans by Strategic Plan Category



### Research

- Grow cutting-edge HPE scholarship
- Present at meetings of influence
- Seek and grow grant and agreement funding
- Enhance military relevance of work
- Enhance translation of education to practice



### Leadership and Service

- Grow mentoring services for learners across continuum
- Grow DLL; assist USU with building and studying online and hybrid models
- Consider freestanding HPE modules (could include civilian schools)
- Enhance MOU's including VA, AAMC, and other external organizations



### Education and Training

- Build remote campuses, establishing key MTFs
- Build relationships with VA (future Master of Leadership)
- Cultivate relationships with civilian HPE units globally
- Virtual international conference for HPE programs
- Military Medicine Modules Course for HPSP students



## CHPE: Additional Value to USU and MHS

Organizations of influence (VA, AAMC, others) seek partnerships with CHPE

Certificate and degree programs may enhance admissions

CHPE helps USU pivot and adapt to meet emerging needs (e.g. integrated AcdHS, Hub)



A university creates capability through **education, leadership, and research** - CHPE helps those who create this capability





Steven J. Durning, MD, PhD, MACP  
Professor and Vice Chair, Department of Medicine, USU School of Medicine  
Director, Center for Health Professions Education  
[Steven.Durning@usuhs.edu](mailto:Steven.Durning@usuhs.edu)  
[chpe.usuhs.edu](http://chpe.usuhs.edu)



*CHPE online*



*CHPE Annual Report*



## **TAB 7**

Graduate School of Nursing (GSN)



# Uniformed Services University Daniel K. Inouye Graduate School of Nursing (GSN)

For Board of Regents February 2023  
Carol A. Romano PhD, RN, FAAN Dean & Professor



## GSN 2022 Annual Report Summary

- 2 National League for Nursing (NLN) Center of Excellence designations
  - **Enhanced Student Learning and Promoting Expertise of Faculty**
- Top 5% of Doctor of Nursing Practice Programs; # 4 nurse anesthesia program
- \$7.7 Million in active grant funding; \$3.1 million in new grant dollars
- 7 faculty members serve on 10 journal editorial boards
- 27 faculty serve as reviewers for 65 professional journals
- 132 faculty publications/presentation/posters in 2022
- 22 (38%) of faculty are Fellows in 10 professional organizations
- In 2022: 187 students; 67 graduates; total alumni = **1,141**
- 1,750 clinical hours/student; 86 clinical sites



# Faculty Organization

60 full time faculty positions

- 20 civilians (Didactic Phase - 19; Clinical Phase in MTF- 1
- 40 military (Didactic Phase - 17; Clinical Phase in MTF- 23
- military rotate every 3-4 years
- military may be former GSN preceptors

Each specialty program has civilians for continuity & military for updated military relevance/ clinical expertise.

100% of faculty have doctoral degrees

56% of faculty are USU alum.

1/2023



# Faculty Organization

Extensive faculty development/orientation

- 16 or more required hours HPE coursework
- monthly faculty development
- Center for Health Professions Education opportunities

Mentors assigned to all new faculty.

Many military who leave GSN serve as adjunct faculty

- continue scholarship
- serve as preceptors for GSN students.

29 GSN retired military faculty have civilian faculty or academic leadership positions.

1/2023



# Women's Health Research

- **Dr. Elizabeth Kostas-Polston** urogenital infection research
  - Top 5 reasons female warfighters sought medical care & top 7 reasons removed from theater during campaigns.
  - 2.8 million dollar, seven-study, multi year/multi site research
  - Focus is access to a symptom self-diagnosis & self-treatment kit used in deployment/field training
  - Enhances personal health, readiness, & warfare capability.
- In response to the 2022 NDAA (Section 740), **Dr. Lynette Hamlin** initiating a study on the incidence of breast cancer among active duty military

1/2023



# Operational Readiness

- Cold Weather Medicine & Avalanche Rescue course
  - 25 Feb-6 Mar at the Army Mountain Warfare School, VT
  - 8 GSN, SOM & US Special Operations Command students
- Operational electives teach students to
  - adapt to patient care challenges in austere and extreme environments
  - respond to rescue-recovery and search-rescue missions in cold, mountainous or remote areas



1/2023



# Transitions of Care

- Clinical Nurse Specialist (CNS) rotations at Landstuhl Army Medical Center in Germany where students learn about
  - Combat casualty care
  - Joint Trauma System
  - Enroute care (Inter/intra-theater patient movement)
  - Care coordination
  - Operational virtual health
  - Leadership
- Landstuhl & Ramstein Air base medical, nursing & aeromedical evacuation leaders enthusiastic & supportive; asking for **more students** to improve their processes & systems

1/2023



# QUESTIONS?

12/2022  
2



## **TAB 8**

Postgraduate Dental College (PDC)

# Postgraduate Dental College

---

February, 2023 Board of Regents Brief



## Focus Areas

---

- Strategic Priorities for the University
- Perceived Challenges faced by the University
- Organization of Faculty
- Student Applications and Training Capacity

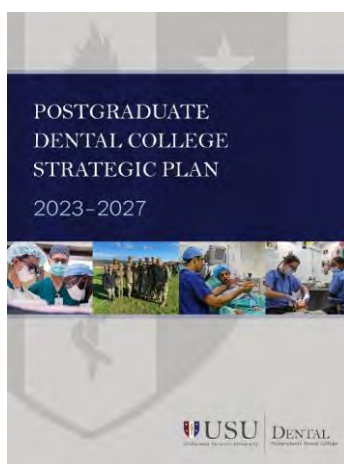
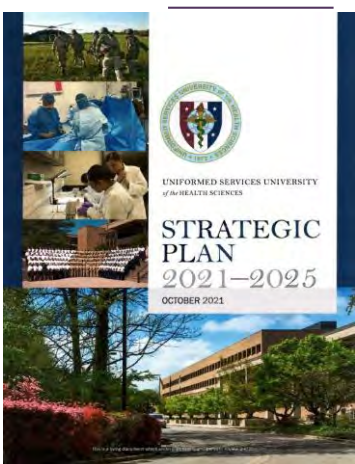


# Strategic Priorities for the University

- How are these shared by the PDC?
- How are these shared with the Schools & Service Deans?



# Strategic Priorities for the University



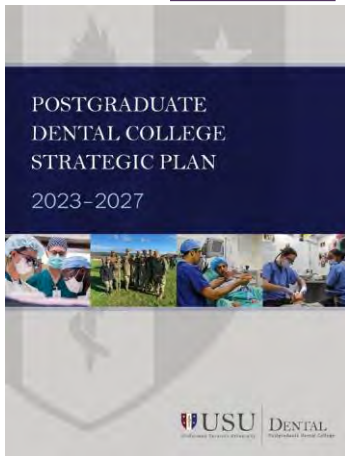
PDC Metrics Table

	Metric	Source	Timing	POC	Document	USU SMOF
Education and Training	Accreditation Rate	Program Directors	Sept	POC Admin Assistant	COA Website; PDC Accreditation Schedule	9.A.II
	Fill Rate	Service Deans	Sept	Executive Dean PDC	Annual Education Announcements; Enrollment Data	9.A.I
	Graduation Rate	Executive Dean	Sept	POC Research Data Analyst	Soft Annual Report for New/Dev	9.A.I
	Board Certification Rate	Program Directors	Sept	Executive Dean PDC	Annual Report from Deans	9.A.III
	Graduate Competency Satisfaction Rate	POC Graduates	Sept	POC Research Data Analyst	1-Yr Post Graduation Survey	9.A.III
Research and Scholarship	Supervision Satisfaction Rate	Graduate Supervisors	Sept	POC Research Data Analyst	1-Yr Post Graduation Survey	9.A.II 9.C.II
	Publications	Program Directors	Sept	POC Research Data Analyst	Accomplishments Survey	9.B.IV
	GAP Linkage	USPHS Form 1202D	Sept	Associate Dean for Research	Operational Gap Analysis (Research Focus)	9.B.I
Leadership and Leader Development	POC-funded Research - GAP Linkage	Funding Documents - USPHS Form 1202D	Sept	Associate Dean for Research	Operational Gap Analysis (Research Focus)	9.B.I
	Leadership Positions	O-6 Service Deans or POCs	Sept	Executive Dean	Service Function Lists	9.C.Ia
		Service Deans	Sept	Executive Dean	POC Org Chart; Accomplishments Survey	9.A.IV 9.C.Ia

Service Deans coordination  
Attachment 1



# Strategic Priorities for the University

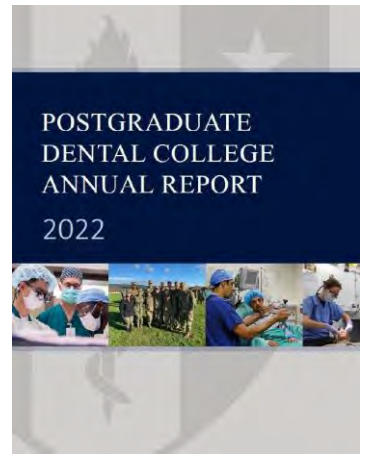


Attachment 1

PDC Metrics Table

	Metric	Source	Timing	PDC	Document	USU/MSOP
Education and Training	Accreditation Rate	Program Directors	Sept	PDC Admin Assistant	COGS Website; PDC Accreditation Schedule	9.a.i
	Fill Rate	Service Deans	Sept	Executive Dean PDC	Annual Education Assessment/Enrollment Data	9.a.1
	Graduation Rate	Executive Deans	Sept	PDC Research Analyst	Both Annual Report for Nov/Dec	9.a.1
	Board Certification Rate	Program Directors	Sept	Executive Deans PDC	Annual Report from Deans	9.a.8
	Graduate Competency Satisfaction Rate	PDC Graduates	Sept	PDC Research Data Analyst	1-yr Post Graduation Survey	9.a.8
	Supervisor Satisfaction Rate	Graduates' Supervisors	Sept	PDC Research Data Analyst	1-yr Post Graduation Survey	9.a.8 9.a.8
Research and Scholarship	Publications	Program Director	Sept	PDC Research Data Analyst	Accomplishments Survey	9.b.iv
	IGAP Linkage	USUHS	Sept	Associate Deans for Research	Operational Gap Analysis (Research Focus)	9.b.i
	PDC-funded Research - IGAP Linkage	Funding Documents - USUHS Form 3302D	Sept	Associate Deans for Research	Operational Gap Analysis (Research Focus)	9.b.i
Leadership and Leader Development	O-G Promotion	Service Deans or PDC	Sept	Executive Dean	Service Promotion Lists	9.c.1.a
	Leadership Positions	Service Deans	Sept	Executive Deans	PDC Org Chart; Accomplishments Survey	9.c.1.v 9.c.1.a

Annual Report to Service Deans & Senior Dental Leadership



Attachment 2

# Perceived Challenges faced by the University

- How are the Deans and PDC helping to face these challenges?
  - Challenges faced by the University
  - Challenges faced by the PDC



# Perceived Challenges faced by the University

---

- How are the Deans and PDC helping to face these challenges?

- Challenges faced by the University

- Sharing the Secret  
(Branding & Communication)
- Inclusive (IPE) Perspectives  
(Service/Involvement)
- Value to the DoD and Services  
(Military-unique benefits)

- Challenges faced by the PDC



# Perceived Challenges faced by the University

---

- How are the Deans and PDC helping to face these challenges?

- Challenges faced by the University

- Sharing the Secret  
(Branding & Communication)
- Inclusive (IPE) Perspectives  
(Service/Involvement)
- Value to the DoD and Services  
(Military-unique benefits)

- Challenges faced by the PDC

- Growing Pains  
(Building a new Culture)
- Faculty Involvement  
(Service and Development)
- Value to the DoD and Services  
(Military-unique benefits, Inter-Service Collaborations, & Comm with civilian organized Dentistry)

# Perceived Challenges faced by the University

- How are the Deans and PDC helping to face these challenges?
- Guiding Growth & Development of the PDC
  - One man show from 2010 – 2017 (Executive Dean)
  - Associate Dean for Dental Research added in 2017
    - DoD Knowledge and Capability Gap Analysis developed
    - Assisting all aspects of resident Research
    - Now expanding focus on Faculty research and inter-Service collaborations
    - New MOU under construction for Tri-Service Center for Oral Health Studies with expanded scope. Dental Public Health research across the PDC (Healthcare Disparities, Military-unique questions)

# Perceived Challenges faced by the University

- Guiding Growth & Development of the PDC



# Perceived Challenges faced by the University

---

- How are the Deans and PDC helping to face these challenges?

- **Guiding Growth & Development of the PDC**

- Associate Dean for Faculty Affairs added in 2018
  - Enhanced organization of Faculty
  - Created new Faculty Tracks (Clinical and Educator)
  - Increased collaborations with School of Medicine (SOM Faculty Development Certificate Program & Center for Health Professions Education)
  - Expanded Committee on Appointments & Promotions, created Academic Review Committees at the Service level, and PDC Faculty Development Committee.
  - Increased PDC Faculty participation on Faculty Senate, DEI Committee, and other USU Service Opportunities.

# Perceived Challenges faced by the University

---

- How are the Deans and PDC helping to face these challenges?

- **Continue to build the Value of the PDC to the DoD and Services**

- Communicate Key Outcome Metrics annually to DoD and Service Leadership (Attachment 2)
- Establishment of the PDC Long-Term Career Outcome Study (LTCOS)
- Consolidation of Army, Navy, and Air Force 1-Year Post-Graduation Surveys
- Creation of PDC Dental Faculty Development Program in alignment with existing Certificate and Degree programs in the School of Medicine.
- Utilization of Center for Health Professions Education's MEd in HPE program to address needs for focused curriculum requirements (Orofacial Pain Curriculum for MEd HPE project with publication on MedEdPortal).
- Initiative to develop a standardized military-unique Readiness and Leadership curriculum for all Programs.

# Organization of Faculty

- How is the Faculty Organized?

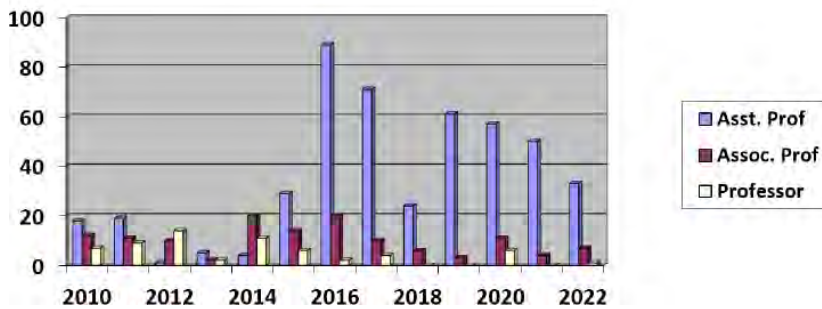
- PDC Org Charts (Attachments 3 and 4)
  - 3 billeted PDC administrative faculty positions
- 99% Non-billeted to USU
  - Serve under local Military Treatment Facility (MTF) Commanders
  - Directed by an active-duty Dean in each Service Branch
- All are non-Tenured with 5 possible Tracks
  - Clinical and Educator tracks added in 2022.



# Organization of Faculty

- How is the Faculty Organized?

PDC Faculty Appointments



## Organization of Faculty

---

- How are negative impacts of military assignment changes mitigated?
  - Program Director (PD) assignment planned for minimum of Program Length +1 year.
  - Deputy PD assignments for better Academic Leadership development and transition.
  - Higher full-time faculty: student ratios in comparison to civilian programs.
  - Primary Research Directors at each location with support from PDC Associate Dean for Dental Research.
  - Similar Program Structure at each location to ease transition effects.
  - Faculty Development offered online (Canvas) to allow access from all locations.



## Student Applications & Training Capacity

---

- Is the number of applications greater than the number of seats?
  - Yes, but by design....
  - There is a balance within each Service regarding the number of programs and the training capacity of those programs to meet the pre-established requirement/number of mission-critical dental specialty billets.
  - The Training Requirement is forecast within each Service annually, available training slots are advertised, and applications are accepted to meet 3 Service-specific Selection Boards.
  - The maximum number of training slots is pre-established by the American Dental Association Commission on Dental Accreditation (ADA CODA) during the accreditation process.



# Student Applications & Training Capacity

- The 3 Service Deans communicate any need for additional training slots or open training slots within their specific Service branch to maximize the use of all DoD training slots.
- When open training slots still remain, these can be offered to the Public Health Service, US Coast Guard, VA, or foreign countries with USU training agreements.
- Applications of those Dental officers selected by their Service Selection Boards for MS-level Programs, then meet a PDC Admissions Committee, composed of only PDC Faculty, to validate that credentials and requirements are met for entrance into the USU MS in Oral Biology Program.



**Thank You**  
Thoughts/Questions?



*Supplement*

**TAB 9**

College of Allied Health Sciences (CAHS)

# Uniformed Services University of the Health Sciences Board of Regents

## College of Allied Health Sciences Quarterly Board Report 6 February 2023

Submitted by: Lula Westrup Pelayo, Ph.D., RN, FAAN Date: February 6, 2023  
Title & Department: Dean, College of Allied Health Sciences Phone: 210-299-8527  
Purpose: Provide Quarterly Update Information: Below Action: None  
Subject: College of Allied Health Sciences (CAHS) Quarterly Report

### 1. College of Allied Health Sciences Strategic Plan 2022-2026

#### **The Strategic Priorities for the Uniformed Services University of the Health Sciences (USU) are shared to others in the College of Allied Health Sciences (CAHS) 2022-2026 Strategic Plan.**

In its annual refresh for its 2022-2026 Strategic Plan, the CAHS's Mission, Vision, and Values were revised to better align with and support the Uniformed Services University of the Health Science's plan. A series of strategic off-site activities were conducted in which the strengths, weaknesses, opportunities, and threats of the CAHS were identified by stakeholders including all CAHS staff, Academic Partners (Services), Uniformed Services University of the Health Sciences Assistant Vice-President of the Southern Region, Assistant to the Vice-President, Director of Strategy Management and Integration, and Assistant Vice-President for Accreditation. Each of the stakeholders contributed to the development and final approval of the revised strategic plan for the college.

- While the mission of the CAHS remains to educate and train highly competent and ready allied health professionals who are dedicated to serving the needs of the uniformed services and providing operational support to units around the world, its continuing maturation as an academic institution will allow it to better support the University's goals in the following domains:
  - a. Education and Training
  - b. Research and Scholarship
  - c. Leadership and Leadership Development
- Our Mission Domains align with those of USU and reflect the major vectors that the College will follow throughout the period of this strategic plan. Across our three mission domains the CAHS, through mission partners, provides rigorous, standards-based, outcomes- oriented performance assessments. These assessments provide measures by which USU continuously evaluates its programs and, in turn, will be the basis upon which we will improve, adapt, and expand our programs in the future.



- During this process several of the CAHS’s Domain Critical Tasks were revised on alignment and support of the University’s plan.
- Please see the attached COLLEGE OF ALLIED HEALTH SCIENCES 2022-2026 STRATEGIC PLAN for full review.

2. **Domain Critical Tasks: Strategic Objectives.** To realize our vision and accomplish our mission in support the University's plan, the CAHS needs to engage a number of crucial objectives in each of our mission domains/themes. Our strategic objectives are ambitious, achievable and measureable.

**A. Education and Training.** Overall, the CAHS will continue and expand our support to the Defense Health Agency (DHA) and the Services to educate outstanding allied health professionals, administrators, and military leaders who are dedicated to career service and leadership in the Department of Defense and across the U.S. Government. Strategic objectives include:

1. Become the focal allied health science education institution within DOD.
2. Support the innovation and enhancement of educational approaches to create and sustain a Ready Medical Force with recognition of diversity, equity, and inclusion.
3. Seek and maintain accreditation for applicable schools, colleges, and programs.
4. Communicate the CAHS purpose and operation to USU, Academic Partners, and Collaborators.
5. Scale manpower in response to Service requirements.
6. Support the acquisition of an automated student information system to facilitate CAHS registration and transcript evaluation.
7. Assure recognition and inclusion of the CAHS in relevant USU policies.
8. Consider Graduate Education level program development efforts.

**B. Research and Scholarship.** The CAHS collaborates with our Academic Partners in relevant research and outcomes central to the DoD. Strategic objectives include:

1. Collaborate with our Academic Partners’ program developers, managers, and directors in the initial development and systematic review of programs to ensure the inclusion of relevant research central to the DoD.
2. In collaboration with USU and external organizations, participate in long-term studies assessing the outcomes of our educational endeavors.

**C. Leadership and Leader Development.** The CAHS faculty, staff, and students are health professionals providing sought-after leadership and service throughout the Uniformed Services, and across U.S. Government in support of national security. We develop health professionals throughout a lifetime of service to the nation and provide vital support to the “Ready Medical

Force”. Strategic objectives include:

1. Demonstrably focus on professional and military competencies and skills through our various program offerings.
2. In conjunction with the Services and in collaboration with our Academic Partners, assess and encourage leader development components be included in all CAHS programs.
3. Develop and implement rigorous faculty development.
4. Expand the CAHS Education and Training Administration and Leadership program to prepare faculty for advanced leadership supporting the education of our Service members.

### 3. CAHS Challenges.

**The CAHS perceives and describes efforts to help meet the following challenges:**

#### **A. Future Resourcing:**

- The USU is meeting with Academic Partners regarding resourcing necessary for academically affiliate (as per the Economy Act). Resourcing must be linked to Service requirements. Most Medical Military Occupational Specialties, Navy Enlisted Codes, and Air Force Specialty Codes do not require credentialing nor college credit for Service employment.

Action: USU is working with Services and the Defense Health Agency to optimize credentialing opportunities to Standard of Care and Medicare Reimbursable levels, existentially improving readiness, and serving as the accredited educational institution.

- The USU Southern Region (USUS-SR) leased facilities are nearing maximum capacity with the building in a deteriorating state. An additional seven USU full-time equivalent personnel are housed at the METC.

Action: The USUS-SR plans to vacate existing facility in San Antonio by 31 Dec 23 and is working with JBSA Facilities Utilization for new spaces.

#### **B. Pacing the CAHS to meet Service Requests for affiliation:**

- There is a conflict with Service requests and resource availability. Services desire affiliation for Enlisted Technical Training to support readiness, standard of care, recruiting, and post-service employment. However, the funding line for Enlisted Medical Training is within the Unified Medical Budget at the Defense Health Agency.

Note: Once a National Defense Authorization Act is signed into law, there is usually a 2+ year lag for the Program Objective Memorandum Process to resource the legal direction. The Department of Defense is a requirements based organization; several enlisted medical skill sets do not have a Service-validated requirement for a credential or college credit.

Action: The USU Vice President for Finance and Administration is developing a resourcing model and submitting requirements to DHA addressing these resourcing

circumstances.

### **C. Student success:**

- The USU CAHS, even though it is a Department of Defense School, is not currently populated within the Services' Education Service Offices. As a result, when USU CAHS program completers seek assistance at their Service Education Office, the CAHS credits and degrees are not visible within the military automated systems nor on the Joint Services Transcript.

Action: The USU CAHS is establishing its footprint within existing Education Service Offices, with the goals of students being able to access their degree plans and credits gained while in training.

### **D. Missing Grades-Late Grade Entry:**

- Depending upon training location and service composition of students, CAHS faculty may have to record student course assessment outcomes in as many as six disparate systems of record including as many as four of the referenced systems for a single student for a single graded event. None of these systems currently communicate with each other. This results in confusion for faculty and a culture of frustration directed at USU CAHS, evidenced by missing student grades.

1. Army Training Requirements and Resources System (ATRRS) – Army
2. Digital Training Management System (DTMS) – Army
3. Technical Training Management System (TTMS) – Air Force
4. Corporate Enterprise Training Activity Resource System (CETRRS) - Navy
5. Student Management and Registrar Tool-Army Training Requirements and Resources Systems (SMART-ATRRS) – METC
6. EMPOWER Gradebook - USU

Action: The USU now allows select administrative personnel in programs to enter grades. However, a reasonable solution has yet to present itself.

## **4. CAHS Faculty**

**As with normal military personnel, the CAHS faculty organization is affected by frequent changes in assignments that may have both positive and negative impacts on teaching and operations.**

### **A. Faculty Organization**

CAHS Instructors who are academically or programmatically qualified and recommended by their institutional leadership are appointed as USU CAHS faculty. Their respective Services still retain administrative and management control of their personnel.

- Faculty in CAHS programs are primarily non-billeted military personnel, selected by their Service for assignment as an instructor at a Service-training school.
- There are some USU faculty with secondary appointments with the CAHS, numerous civil service employees, and civilian contractors employed with the Services that are appointed as faculty following the same process as military members. The majority of CAHS faculty are appointed at the Instructor 1 and 2 levels. These categories comprise

over half of the entire faculty population of the CAHS.

## **B. Faculty Assignment / Turnover**

CAHS faculty who are military members typically rotate on a three to four year cycle. This occurs on a continual basis resulting in a regular turn-over of faculty. This does not pose a challenge to the CAHS in the research domain, due to the absence of the CAHS's involvement in research projects.

- Instructors may be appointed as CAHS faculty during period of tour (*at any point during tour*)
- Class sizes, frequency of iterations, and annual training quotas are factors in number of instructors assigned

## **C. Impacts from Frequent Turnover**

As mentioned, there may be both negative and positive impact from frequent turnover in faculty.

Negative: Systematic faculty reassignments pose challenges including the diminished corporate knowledge of USU CAHS culture and processes and lack of long-term continuity requires frequent faculty orientation and familiarization. There may also be some difficulties in regard to full knowledge of the relationship between the service programs and USU CAHS.

To this end, solutions involve monthly faculty development training opportunities including:

- CAHS Familiarization Training for all Branch Campus incoming personnel
- CAHS Initial Faculty Orientation for all newly appointed CAHS Faculty
- Faculty Development Training offered monthly to all CAHS Faculty
  - CAHS Faculty and Program Development Process
  - Curriculum Development and Syllabus Creation
  - CAHS Program Review and Revision Process
  - Institutional and Programmatic Accreditation

Positive: The systematic reassignments actually benefit the students and program improvement processes by bringing in new industry subject matter experts throughout the academic development and review cycles. This new faculty population brings with them the most recent operational perspectives and practices, which translate into enhanced classroom, laboratory, and clinical learning experiences for the students.

## **5. CAHS Student Enrollment/Class Size.**

**The CAHS does not have equity in the concern for exceeding enrollment capacity to meet workforce needs.**

- The CAHS operates differently in terms of attending to workforce needs than do other schools at USU. Our CAHS programs exist via an "Academic Sharing Model" with Services retaining their authorities and leveraging USU's college credit abilities via memoranda of agreement.
- USU CAHS class sizes, student pre-requisites, and annual programmed student

throughputs are determined by Service requirements.

- These personnel numbers are fiscally resourced via the Department of Defense’s budgeting process.
- Currently, there are fewer Initial Entry Training students (new enlistees) arriving to Service schools (and USU CAHS). If the numbers return to previous levels, the Services will resource additional faculty, facilities, and logistics necessary to meet training requirements.

6. **Degree and Certificate Conferral.** At the completion of the 2022 academic year, the CAHS has awarded 938 degrees. In addition to the degrees awarded, the CAHS awarded 3663 students undergraduate certificates upon completion of their service required training programs.

Total Degrees Awarded 2022				
938				
	Army	Navy	Air Force	Coast Guard
<b>Associate of Science (791)</b>	482	167	138	4
<b>Bachelor of Science (147)</b>	70	76	1	0
Total Certificates Awarded 2022				
3663				
	Army	Navy	Air Force	Coast Guard
<b>Certificates</b>	686	2816	153	8



# USU Routing Sheet

## Document Information

USU Document # USU 22-579

Date Received: 30 Nov 2022

Internal Suspense: \_\_\_\_\_

External Suspense: \_\_\_\_\_


Subject: 22-579 CAHS Strategic Plan 2022-2026

POC Contact Info: Chris Shoemaker

CATMS# (If Applicable): \_\_\_\_\_

### Front Office Action (Check As Appropriate)

- |  |   |  |  |
|--|---|--|--|
| <input checked="" type="checkbox"/> President, USU | <input checked="" type="checkbox"/> Signature | <input checked="" type="checkbox"/> Review | <input type="checkbox"/> For Information |
| <input checked="" type="checkbox"/> Chief of Staff | <input type="checkbox"/> Signature            | <input checked="" type="checkbox"/> Review | <input type="checkbox"/> For Information |
| <input type="checkbox"/>                           |   | <input type="checkbox"/> Review            | <input type="checkbox"/> For Information |
| <input type="checkbox"/>                           |   | <input type="checkbox"/> Review            | <input type="checkbox"/> For Information |

Signature  
  
30 Nov 2022

### USU Coordination

**\*\*Place office specific routing under this USU Routing Sheet\*\***

- |   |  |
|---|--|
| <input type="checkbox"/> Senior Vice President – West/Interim Dir, OUAO | <input type="checkbox"/> Dean, CAHS            |
| <input type="checkbox"/> Senior Vice President – South                  | <input type="checkbox"/> Executive Dean, PDC   |
| <input type="checkbox"/> VP External Affairs                            | <input type="checkbox"/> Director, AFRRI       |
| <input type="checkbox"/> VP Finance & Admin                             | <input type="checkbox"/> OGC                   |
| <input type="checkbox"/> VP Information & Education Tech/CIO            | <input type="checkbox"/> Brigade Commander     |
| <input type="checkbox"/> VP Research                                    | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> Dean SOM                                       | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> Dean GSN                                       | <input type="checkbox"/> Other (Specify) _____ |

### Notes:



# COLLEGE OF ALLIED HEALTH SCIENCES (CAHS)

---

## 2022-2026 STRATEGIC PLAN

### ALLIED HEALTH



Uniformed  
Services  
University



## UNIFORMED SERVICES UNIVERSITY OF THE HEALTH SCIENCES

OFFICE OF THE PRESIDENT  
4301 JONES BRIDGE ROAD  
BETHESDA, MARYLAND 20814-4712  
[www.usuhs.edu](http://www.usuhs.edu)



30 November 2022



The Uniformed Services University of the Health Sciences (USU) is a national treasure, providing the highest quality education, research and leadership across the Military Health System (MHS) and to those who defend the nation. Key to the accomplishment of our mission - as well as that of the entire MHS – is a nested set of strategic plans that flow from USU’s vital role in the National Security and Defense Strategies. The USU Strategic Plan (2021-2025) provides the framework in which each of our schools, colleges, institutes, centers and programs fulfills its own mission and executes its supporting strategic plan.

USU’s College of Allied Health Sciences (CAHS) is a crucial element within the University and across the entire MHS, managing the quality and performance of the education of allied health professionals who serve the American Warfighter and our family of beneficiaries around the world. The CAHS Strategic Plan provides a comprehensive roadmap to guide CAHS into a future in which the demands on the College will increase as the nation executes its National Security Strategy.

I extend my appreciation for the imagination, innovation and plain hard work that the entire CAHS strategic planning team has devoted to the attached Strategic Plan. Our challenge is to now execute the plan, adapting specific initiatives to the emerging realities of our operational environment while always retaining a focus on the USU and CAHS missions, visions and our responsibilities to those Americans who volunteer to go in harm’s way in defense of the nation.

Jonathan Woodson, MD, MSS, FASC  
President



## COLLEGE OF ALLIED HEALTH SCIENCES STRATEGIC PLAN

1. **Purpose:** The purpose of the College of Allied Health Sciences (CAHS) Strategic Plan is to serve as a roadmap to guide the College and all our constituent elements to accomplish our mission, achieve our vision and optimize the readiness of all students, graduates and faculty to best support the American Warfighter.
  
2. **References:**
  - a. USU Strategic Plan 2021-2025
  - b. National Defense Authorization Act 2017, Section 724
  - c. National Defense Authorization Act 2019 Section 711
  
3. **Background:** In 2017, Congress modified the authority of the Uniformed Services University of the Health Sciences (USU) in order to include undergraduate and other medical education and training programs. The CAHS represents the USU response to this directive. These programs ensure military medicine remains on the cutting edge of providing a “Ready Medical Force” to support the American Warfighter and the Department of Defense (DoD) community around the world. These programs also provide a recruiting and retention advantage for the Uniformed Medical Services (Services) by providing a valuable skill set that can be used to transition into civilian life. Moreover, these programs are consistent with White House and DoD initiatives, providing more cost-effective and relevant training for the immediate mission and an education for a lifetime of service to DoD and the nation.

Today, the CAHS supports all Services across a wide range of education and training requirements. Our Academic Partners include the Medical Education and Training Campus (METC), US Army Medical Center of Excellence (MEDCoE), and Navy Medical Forces Support Command (NMFSC) located at Joint Base San Antonio and US Army Special Operations Center of Excellence (SOCoE) located at Fort Bragg, North Carolina. Current CAHS offerings include programs for both officers and enlisted personnel. Programs include Certificates, Associate of Science in Health Sciences, and Bachelor of Science in Health Science degrees supporting the enlisted community. Based on demand signals from the Services, we anticipate further expansion throughout the 2022-2026 planning period.

4. **Assumptions:** Assumptions about the future should be considered before CAHS leaders make key decisions on strategic objectives, specific initiatives and associated courses of action. Assumptions should be both likely to be true and necessary for the execution of the plan.
  - a. The USU community will optimize available resources in a constrained resource environment, with the potential for modest reductions in programmed funding. The CAHS, USU and all DoD organizations will be required to continually find ways to become internally more efficient and effective.
  
  - b. COVID-19 lessons learned will place additional strategic emphasis within DoD on

pandemic operations and Defense Support to Civil Agencies (DSCA), requiring new or enhanced education and training throughout the Military Health System (MHS) including within CAHS.

- c. USU will be assigned MHS education enterprise responsibilities, necessitating appropriate adjustments in internal structures and processes. Many of these changes will involve CAHS.
  - d. The student population at CAHS will expand significantly over the planning period, and course offerings will evolve alongside changes in MHS health education and training requirements.
5. **Mission:** The mission of the CAHS is to educate highly competent and ready allied health professionals who are dedicated to serving the needs of the Uniformed Services and providing operational support to units around the world. We support the attainment of higher education degrees, professional certifications, credentials, licensing, and accreditation across DoD and with America's men and women in uniform.
6. **Vision:** By the end of 2026, the CAHS will be DoD's focal organization for educating allied health professionals across all Services in order to enhance the health of the DoD community and medical readiness of the armed forces in support of the National Defense Strategy.
7. **Values:** Our values are critical to inform our thoughts, our words, and our actions. Values are vital as they help us to grow and develop as individuals within a mission and vision that is larger than ourselves.
- a. Selfless Service. We are committed to serve those who defend the nation and all Americans in uniform at home and abroad. We are sensitive to the unique role that our Soldiers, Sailors, Airmen, Marines, Guardians and Coastguardsmen professionals play in our national security. The CAHS faculty, staff, and students provide selfless service to the global community in support of the health of Uniformed Service members, Veterans, and their families, as well as US interests worldwide.
  - b. Integrity. We foster a culture of academic, physical, and moral integrity in our students, faculty and staff, and we are uncompromising in our adherence to the highest standards of intellectual and personal integrity.
  - c. Innovation. We support faculty, student, and staff contributions to, and creative employment of knowledge in areas crucial to health in the Uniformed Services and to national security.
  - d. Compassion and Caring. We foster an atmosphere of compassion, caring, mutual respect, courtesy, pride in work, and mission-oriented professional development.
  - e. Communication. We interact and share information in a timely manner with openness, candor, and sensitivity.

Excellence in Scholarship. We are committed to rigorous standards of scholarship including teaching and application of research as fundamental to the advancement of knowledge and a lifetime of learning.

- f. Collaboration and Teamwork. We value the contributions of each member of our community and work to achieve an environment characterized by cooperation, collegiality, tolerance, mutual respect, and an appreciation of diversity, as well as facilitate cooperation and collaboration in our science, educational methodologies, research, and leadership.
- g. Leadership. We focus on developing and sustaining leaders throughout the USU community, including within our faculty, our staff, our researchers, and our support personnel.

**8. Mission Domains:** Our Mission Domains align with those of USU and reflect the major vectors that the College will follow throughout the period of this strategic plan. Across our three mission domains, the CAHS through mission partners provides rigorous, standards-based, outcomes- oriented performance assessments. These assessments provide measures by which USU continuously evaluates its programs and, in turn, will be the basis upon which we will improve, adapt, and expand our programs in the future. Our Mission Domains are:

- a. Education and Training. In collaboration with the Services, the CAHS educates outstanding allied health professionals, administrators, and military leaders who are dedicated to career service and leadership in the DoD and across the US Government. Our education and training focus on being:
  - i. Integrated, enhancing coursework that facilitates a rigorous exchange in and among the schools and colleges of USU wherever possible.
  - ii. Requirements-based, with educational programs that focus on the Services' needs identified for job performance and operational readiness of Service Members.
  - iii. State-of-the-art, leveraging and developing effective educational methodologies – including distributed learning, integrated teaching, simulations and simulators – blended with proven educational systems.
  - iv. Warfighter-focused, educating and developing outstanding leaders who are superb allied health science professionals in the Uniformed Services, enhancing the readiness of operational units and supporting the health and well-being of the beneficiary community.
  - v. Lifelong, delivering full lifecycle learning, development of allied health faculty, and support for continued professional development.
- b. Research and Scholarship. The CAHS supports the use of innovative research and scholarship relevant to DoD. Through systematic review, the CAHS assures basic research awareness as relevant in each educational program in our catalog.

- c. **Leadership and Leader Development.** The CAHS faculty, staff, and students are allied health science professionals providing sought-after leadership and service throughout the Uniformed Services and across US Government in support of national security.
  - i. The CAHS focuses on professional and military competencies and skills to support a Ready Medical Force.
  - ii. The CAHS former students are developed to serve as allied health professionals and leaders in the MHS. The CAHS supports allied health science education and training, in direct support of DoD and national strategies to protect the homeland and support our national interests abroad.
  - iii. While most students at the CAHS complete entry level training required at the Associate Degree levels, others complete more advanced educational intensities that demonstrate advanced leadership roles in Baccalaureate programs.

**9. Domain Critical Tasks: Strategic Objectives.** To realize our vision and accomplish our mission, the CAHS needs to accomplish a number of crucial objectives in each of our mission domains/themes. Our strategic objectives focus on a 3-5 year horizon, are both ambitious and achievable and can be rigorously measured.

- a. **Education and Training.** Overall, the CAHS will continue and expand our support to the Defense Health Agency (DHA) and the Services to educate outstanding allied health professionals, administrators, and military leaders who are dedicated to career service and leadership in the DoD and across the US Government. Strategic objectives include:
  - i. Become the focal allied health science education institution within DoD.
  - ii. Support the innovation and enhancement of educational approaches to create and sustain a Ready Medical Force with recognition of diversity, equity, and inclusion.
  - iii. Seek and maintain accreditation for applicable schools, colleges, and programs.
  - iv. Communicate the CAHS purpose and operation to USU, Academic Partners, and Collaborators.
  - v. Scale manpower in response to Service requirements.

- vi. Support acquisition of an automated student information system to facilitate CAHS registration and transcript evaluation.
- vii. Assure recognition and inclusion of the CAHS in relevant USU policies.
- viii. Consider Graduate Education level program development efforts.

**b. Research and Scholarship.** The CAHS collaborates with our Academic Partners in relevant research and outcomes central to the DoD. Strategic objectives include:

- i. Collaborate with our Academic Partners' program developers, managers, and directors in the initial development and systematic review of programs to ensure the inclusion of relevant research central to the DoD.
- ii. In collaboration with USU and external organizations, participate in long-term studies assessing the outcomes of our educational endeavors.

**c. Leadership and Leader Development.** The CAHS faculty, staff, and students are health professionals providing sought-after leadership and service throughout the Uniformed Services, and across US Government in support of national security. We develop health professionals throughout a lifetime of service to the nation and provide vital support to the "Ready Medical Force". Strategic objectives include:

- i. Demonstrably focus on professional and military competencies and skills through our various program offerings.
- ii. In conjunction with the Services and in collaboration with our Academic Partners, assess and encourage leader development components be included in all CAHS programs.
- iii. Develop and implement rigorous faculty development.
- iv. Expand the CAHS Education and Training Administration and Leadership program to prepare faculty for advanced leadership supporting the education of our Service members.

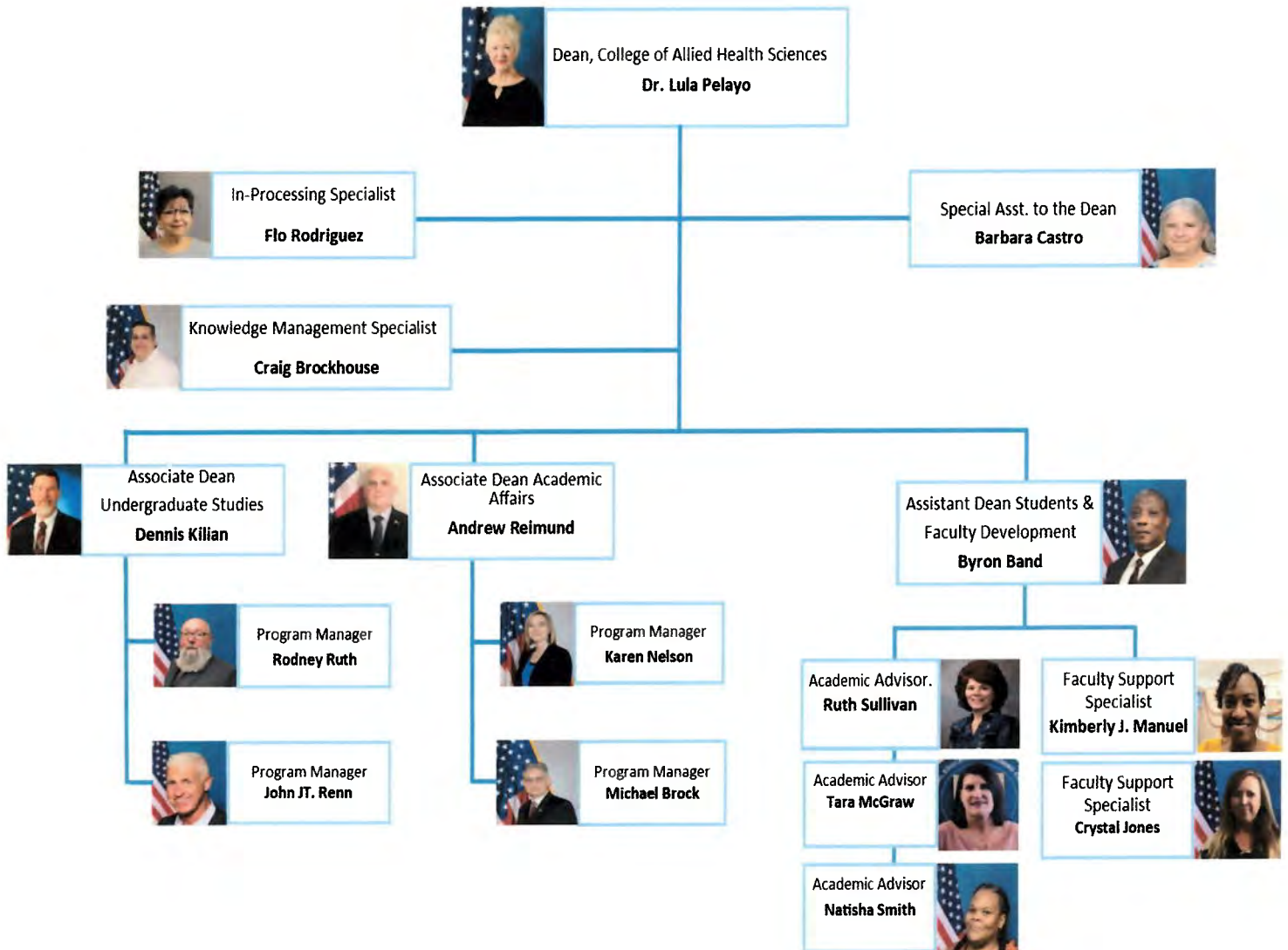
**10. Key Enabling Tasks: Cross-Cutting Objectives.** In order to achieve our mission, realize our vision, and accomplish our objectives in each of our three strategic themes, the CAHS must also accomplish a set of key enabling tasks/objectives that support and enhance all domains.

**a. Develop and Expand Strategic Partnerships and Collaboration.** The CAHS faculty, staff, and students form collaborative partnerships to support strategic priorities across the Uniformed Services and health communities by communicating both our capabilities

and our value proposition.











- b. Improve Strategic Communications.** The CAHS must formalize and expand our ability to communicate our role in national security in order to garner widespread understanding and support from both internal and external audiences, and strengthen our brand.
    - i. Improve internal strategic communication by meeting regularly with USU leaders of schools, centers, and committees throughout the USU enterprise.
    - ii. Enhance external strategic communication by networking with our Academic Partners and student populations.
  - c. Improve the Effectiveness of Internal Processes.** The CAHS must continuously design, refine, and implement disciplined and regular staff procedures to ensure that organizational objectives are achieved, information is shared, and strategy-based decision-making is supported at all levels of the college.
    - i. Assist in the development of a student information system, in concert with academic support services (e.g. Registrar and the CIO) that is automated, accurate, and timely.
    - ii. Develop a comprehensive student record that documents academic outcomes that align with competencies required of each outcome according to programmatic accreditation standards.
  - d. Strategically Grow and Allocate Physical and IT Infrastructure.** As we expand the contributions that the CAHS makes to the Uniformed Services and to the nation, we must ensure our internal infrastructure in manpower and instructional technology meets both current and future requirements.
  - e. Strategically Grow and Allocate Financial Resources.** The CAHS must continue to generate resourcing through fee-based assessment of mission partner requirements to build and maintain its capabilities to support our mission, vision and objectives, and ensure that we align our funding requirements with strategic priorities.
- 11. Organization.** To execute our functions, our structures must adapt to functional requirements, improving technologies and growth. Accordingly, we will develop and execute a future-oriented functional/structural design.

# 2022 Organizational Chart














**12. Measures of Performance.** Across our three mission domains, the CAHS must provide rigorous, standards-based, outcomes-oriented performance assessments. These assessments undergird the measures by which the CAHS must continuously evaluate its programs and, in turn, form the basis upon which we will improve, sustain, and adapt our programs in the future. Measures of performance in each of our three mission domains are as follows:



## Strategic Objectives

Item	Strategic Objective	Measure of Performance	Metric	2022 Status	Status
9.a.i	MHS "focal point" and authority for allied health education	9.a.i.1: Implement academic sharing model	Increase Total Academic Partners from five to seven	5	
			Total Semester Hours Awarded	327,333	
		9.a.i.2: Expand opportunities to earn undergraduate credit	Increase annual enrollment from 4500 to 10500	4722	
			Increase the number of Undergraduate programs of instruction from 27 to 62	27	
		9.a.i.3: Match faculty to requirements	Increase faculty Coordinator from one to three	2	
			Ensure 100% faculty meet requirements	100%	
		9.a.i.4: Provide Faculty Orientation Program	100% of appointed CAHS faculty attend Faculty Orientation Program	90.90%	
		9.a.i.5: Provide faculty development program offerings	Increase opportunities to from one quarterly meeting to one per month	11 in 11 months	
			100% of appointed CAHS faculty attend two or more opportunities annually	1%	
			Achieve appointed CAHS faculty attendance to 400	4	
9.a.ii	Support the innovation and enhancement of educational approaches to create and sustain a Ready Medical Force with recognition of diversity, equity, and inclusion	9.a.ii.1: Assess topics on diversity, equity, and inclusion in accordance with USU Guidelines	Issues addressed in 100% of CAHS programs	100%	












9.a.iii	Accreditation / Credentialing	9.a.iii.1: Establish working groups for programs eligible for programmatic accreditation	Establish Working Groups in 100% of applicable programs	100%	
		9.a.iii.2: Assess Credential programmatic status	Achieve or surpass required programmatic credential pass rates annually	92%	
			Credential pass rates in each program are sustained annually	92%	
		9.a.iii.3: Assign faculty leaders according to accreditation standards	100% of appointed CAHS faculty meet credentialing requirements annually	100%	
			100% of Medical Directors in CAHS Programs meet credentialing standards	100%	
		9.a.iii.4: Increase number of programs having programmatic accreditation	Increase from 12 to 14	12 With one additional in process	
		9.a.iii.5: Maintain Specialized Programmatic Accreditation	100% of Specialized Programmatic Accreditation is maintained annually	100%	
9.a.iv	Communicate CAHS model to internal and external partners and collaborators	9.a.iv.1: Increase opportunities to communicate CAHS model	Increase communication with Academic Partners and collaborators at meetings from four to 30 opportunities annually	7	
	Obtain Resourcing to achieve full Mission Capability status at the CAHS	9.a.iv.2: Develop and submit resource requirements	Manpower requirements developed and submitted by April 2023	In Process	
			CAHS leadership participates in 100% of all meetings re: manpower	100%	
		9.a.iv.3: Adapt administrative support for growth	Increase Program Manager positions from two to four	4	
			Add two Assistant Dean positions	0	



			Increase Academic Advisors from four to six	3	
9.a.vi	Support acquisition of automated Student Information System	9.a.vi.1: Participation in policy discussion and process meetings with OUR to develop plan and analytical methodology	CAHS representation in 100% of meetings	100%	
9.a.vii	Assure inclusion of CAHS in USU policy process	9.a.vii.1: Participation in policy discussions and process	Discuss with USU leadership, including Dean's Council	100%	
			CAHS representation in 100% of meetings	75%	
9.a.viii	Consider Graduate Programs	9.a.viii.1: Develop plan and analytical methodology	Seek approval from USU leaders	No action to date	
			Seek approval from MSCHE	No action to date	
			Develop program	No action to date	
			Implement program	No action to date	
9.b.i	Assess and encourage relevant research	9.b.i.1: Collaborate with partners in initial development and review of programs in assessing content is taught reflecting relevant research	100% of program reflect relevant research during initial program development	100%	
			100% of CAHS programs reviewed every three years	100%	
9.b.ii	Participate in long-term career outcomes study	9.b.ii.1: Participate in studies to assess long-term impact of CAHS education	Conduct discussions with SoM and PDC to replicate study in 2022	No action to date	
			Determine manpower and financial support via HJF to conduct study by 2023	No action to date	
		9.b.ii.2: Ensure inclusion studies to assess long-term impact of CAHS education	Determine manpower and financial support to conduct study by 2023 via HJF	No action to date	
9.c.i	Focus on professional and military competencies and skills through our various mission program offerings	9.c.i.1: (See 9.a.i above).			




9.c.ii	Encourage leader development components be included in relevant CAHS programs	9.c.ii.1: Incorporate leader development in all CAHS programs	Leader development reflected in non-Initial Entry Training CAHS programs, as applicable	100%	
9.c.iii	Implement faculty development	9.c.iii.1: (See 9.a.i above).			
9.c.iv	Expand faculty development	9.c.iv.1: Increase Education and Training Administration and Leadership program opportunities for faculty	Increase CAHS faculty ETAL ASHS degree attainment to 100 degrees conferred	69	

### Cross-Cutting Objectives

Item	Cross-Cutting Objective	Measure of Performance	Metric	2022 Status	Status
10.a	Expand strategic marketing	10.a.1: Expand the reach of CAHS	Establish and sustain CAHS "Brand"	100%	
			100% of CAHS educational locations displays USU Branding	14%	
			Work with Vice President of External Affairs (VPE) on messaging	100%	
10.b.i	Improve internal strategic communications	10.b.i .1: Expand understanding of CAHS within USU	Work with Chief Information Officer (CIO) on consistently improving CAHS web sites	100%	
			Develop list of key external stakeholders	50% complete	
			Host three (3) regular meetings of USU leaders and staff at CAHS annually	7	
			Work with VPE on messaging	100%	

10.b. ii	Improve external strategic communications	10.b. ii.1: Expand understanding of the CAHS with key external stakeholders, to include Executive & Legislative Branch leaders	Develop and implement strategic communications plan by the end of 2024	No action to date	
			Develop list of key external stakeholders	No action to date	
10.c.i	Implement an automated student information system as acquired and available  (See 9.a.vi above) Support acquisition of automated Student Information System	10.c.i.1: Support USU Office of University Registration (OUR) to facilitate CAHS registration and transcript evaluation	OUR to have Automated SIS in place by 2025	No action to date	
		10.c.i.2: Support USU OUR to facilitate CAHS registration and transcript evaluation	Respond to 100% of Taskers presented by the OUR	100%	
		Registration and Transcript evaluation	Provide Transfer Credit proposals for students	100%	
10.c. ii	Implement an automated student information system (See 8.a.vii above)	10.c. ii.1: Support USU OUR to facilitate CAHS registration and transcript evaluation	Provide CAHS requirements for Automated Student transcript evaluation system by 2023	No action to date	
10.d	Support Physical and IT Infrastructure requirements to enable CAHS strategic initiatives	10.d.1: Define required IT infrastructure needs	Develop requirements	No action to date	
			Prepare “rolling” briefing on CAHS requirements for external resource stakeholders	No action to date	
			CIO to Resolve connectivity issues for CAHS	No action to date	

		10.d.2: Define Adequate Resourcing	Collaborate with Vice President of Finance & Administration (VFA) on POM issues	100%	
10.e	Ensure resourcing necessary to support CAHS strategic capabilities	10.e.1: Define personnel resourcing needs	Participate / complete manpower study, defining requirements	42%	
		10.e.2: Communicate resource requirement	Address manpower study results with higher level authorities at USU	No action to date - Begins March 2023	
		10.e.3: Attain resource requirements	100% of requirements resourced	No action to date	

Status Of Metrics Legend	
<35%	
>36% to 59%	
>60%	

## Annex A Glossary of Terms

ASHS	Associate of Science Health Sciences
BSHS	Bachelor of Science Health Sciences
CAHS	College of Allied Health Sciences
CIO	Chief Information Officer
DoD	Department of Defense
DHA	Defense Health Agency
DSCA	Defense Support to Civil Agencies
ETAL	Education and Training Administration and Leadership IT Instructional Technology
MEDCoE	Medical Center of Excellence
METC	Medical Education Training Campus
MHS	Military Health System
MSCHE	Middle States Commission on Higher Education
NMFSC	Navy Medical Forces Support Command
OUR	Office of the University Registrar
PDC	Postgraduate Dental College
POM	Program Objective Memorandum
SIS	Student Information System
SOCoE	Special Operations Center of Excellence
SoM	School of Medicine
USU	Uniformed Services University of the Health Sciences
VFA	Office of the Vice President for Finance and Administration
VPE	Vice President External Affairs

*Supplement*

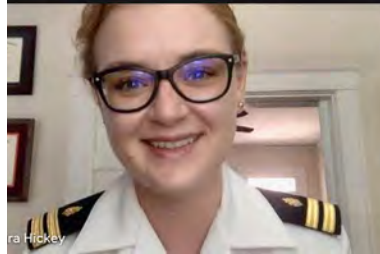
**TAB 10**

Center for Health Profession Education  
(CHPE)



# Annual Report

## 2021-2022





# Table of Contents

Executive Summary	<b>1</b>
Message from the CHPE Director	<b>2</b>
Message from the Chair	<b>4</b>
Message from the Dean	<b>5</b>
Our Mission & Vision	<b>6</b>
Voices of CHPE Learners	<b>8</b>
Spotlight: CHPE Global Footprint	<b>9</b>
CHPE Graduate Program Learners, AY 2021-2022	<b>10</b>
Learner Research	<b>11</b>
CHPE Faculty	<b>12</b>
Faculty Research	<b>12</b>
A Snapshot of CHPE Faculty Publications	<b>12</b>
CHPE Initiatives	<b>13</b>
Spotlight: Long Term Career Outcome Studies (LTCOS)	<b>13</b>
Spotlight: Distance Learning Lab (DL-Lab)	<b>13</b>
Spotlight: Inaugural Cohort of MEd in HPE Learners	<b>14</b>
Spotlight: Diversity, Equity, and Inclusion	<b>15</b>
Spotlight: VA, Designated Education Officers (DEO) Project	<b>15</b>
Growing Connections and Awards	<b>16</b>
Our Strategic Concepts	<b>17</b>
Our Guiding Principles	<b>18</b>
CHPE Faculty and Staff	<b>19</b>



# Executive Summary

The **2021–2022 Annual Report of the Center for Health Professions Education (CHPE)** at the Uniformed Services University (USU) of the Health Sciences offers a view of several of the successes of our core activities, learners, and faculty in the past year. We have grouped these achievements under the general categories of teaching, scholarship and service.

**Teaching:** During the 2021–2022 academic year, we taught almost 170 total learners, adding perspectives from throughout the Military Health System (MHS). We celebrated the graduation of two PhD learners. Eleven candidates earned Master of Health Professions Education (MHPE) degrees and we awarded 90 program certificates during the course of the academic year. These certificate graduates included over 45 medical students (making up nearly a third of the class), as well as Department of Veterans Affairs (VA) learners who participated in our program through recent Memorandums of Understanding (MOUs). CHPE faculty delivered more than 4,500 hours of instructional time while teaching these diverse groups of learners in the only part-time degree granting program at USU. We also admitted our first learners of a new Master of Education in Health Professions Education (MEd-HPE), and a joint MD/MEd in HPE degree.

**Research:** CHPE's research productivity continued to rival top health professions education centers and departments internationally in both quantity and impact of the scholarship produced. Learners published 17 peer-reviewed manuscripts in the health professions education field with CHPE faculty, while CHPE faculty published 94 peer-reviewed manuscripts in top tier journals such as *Academic Medicine*, *Annals of Surgery*, *Medical Education*, and *Medical Teacher*. Learners and faculty also produced numerous book chapters and editorials, edited books in progress, and developed national and international presentations. Along with learners, faculty were invited to present their research to local, national, and global audiences, and were awarded more than \$3 million in research grants and agreements in this year alone.

**Service:** Through CHPE's Distance Learning Laboratory (DL-Lab), CHPE faculty and staff provide consultative support to university-wide faculty and staff. Throughout the pandemic, the DL-Lab team has coached numerous module and course directors on how to convert face-to-face teaching to distance learning instruction for medical students, reaching over 80% of local faculty with at least one consultation in the past year alone. CHPE faculty also served on key School of Medicine (SoM) and USU committees and task forces including the Assessment Subcommittee of the Executive Curriculum Committee, Addressing Racism in Medical Education/Medicine (ARMed) Task Force, LBGTQAI+ Affirming Curriculum Task Force, the assessment committee for the SoM, the Post Graduate Dental College's arm of the Long-Term Career Outcome Study (LTCOS) and its new faculty development committee for dental educators, and the Graduate School of Nursing's Committee on Promotion and Tenure. LTCOS continues to produce cutting edge scholarship, providing evidence for USU curricular and policy decisions to include working on a *Military Medicine* special edition with a number of publications to support our upcoming Middle States and Liaison Committee on Medical Education (LCME) accreditation efforts. CHPE also continues to support the SoM's Medical Education Elective and capstone experiences reaching numerous medical students as well as the Office of Faculty Development's local and distant efforts to include delivering multiple workshops during Leadership Week and a visit to Portsmouth.

CHPE continued to expand its learner network—both within and beyond Military Treatment Facilities. We added an MOU with Georgetown University, for its faculty to participate in our certificate program and enrolled our first Georgetown certificate matriculant. We also signed an Inter-Agency Agreement (IAA) with the VA at Salt Lake City, allowing its faculty to participate in our degree programs. Further we are executing an IAA with the VA on a national level to build a leadership curriculum for their educational leaders.

This Annual Report provides an account of selected accomplishments and highlights some of CHPE's successes over the course of the past academic year.

# MESSAGE FROM THE CHPE DIRECTOR



*Welcome to the Third Annual Report for the Center for Health Professions Education (CHPE) at the Uniformed Services University (USU) of the Health Sciences.*

The 2021–2022 academic year was a year of continued successes for our Center, and this report highlights how we are establishing an international reputation in health professions education. It summarizes how our learners and faculty collaborated over the past year.

Some program highlights in this year's report:

## **Program Growth**

- Since admitting our first learners in 2015, the HPE program has expanded to more than 170 current learners from more than 50 locations in the Military Health System (MHS). Over 90% of our learners are active duty health professionals.
- Throughout the 2021–2022 academic year, CHPE celebrated over 100 graduates—two PhDs in HPE, 11 Masters in HPE recipients, and 90 program certificate awardees.
- We have graduated nearly 250 learners from our programs, many of whom continue to serve the MHS in a variety of leadership roles (e.g. dean, program director, clerkship director). All of our degree graduates serve in academic leadership positions.
- A growing number of dentists, nurses, and allied health professionals continue to enroll in our degree and certificate programs consistent with our mission to reach a broad group of health professionals.
- Our Distance Learning Lab (DL-Lab) supported 24 USU departments and centers and nearly 150 School of Medicine (SoM) individual faculty in delivering online instruction and migrating to the Canvas learning management system. The DL-Lab is supporting the design and delivery of an online Military Medicine course that will be offered to Health Professions Scholarship Program (HPSP) students distributed nationally. The DL-Lab has also offered more than 160 consultations and 30 weekly workshops in addition to conducting orientation sessions for incoming SOM, GSN and GEO students.
- Our growing alumni remain connected with the HPE program by serving as instructors in courses and as practicum advisors, and assisting with our program evaluation efforts (e.g., conducting exit interviews and interviewing prospective degree candidates during the admissions process).
- We collaborated with a number of USU School of Medicine Departments including Military and Emergency Medicine, Pediatrics, Preventive Medicine and Biostatistics, Psychiatry, and Surgery.
- CHPE signed two notable Inter-Agency Agreements with the VA: one allowing degree learners from Salt Lake City to enroll in our program (we have our first two PhD learners from this VA) and the second pertains to building a leadership curriculum for top VA academic leaders that we will also share with our MHS learners in our program.
- CHPE faculty continued to participate in a multi-institutional Grand Round series entitled “Behind the Scenes,” partnering with Georgetown University, University of California at San Francisco, The George Washington University, and Hofstra University, to provide strategies for being a successful scholar in HPE.
- We matriculated our first cohort of MEd in HPE learners, including the first two medical students into the inaugural class of MD/MEd in HPE program.

## **2021–2022 CHPE Graduates**



90

**Program Certificates Awardees**

## Research Accomplishments

- CHPE faculty were awarded more than \$3 million in research grants and agreements in the past year alone, with national funding from organizations including the AAMC, the NBME, Patient-Centered Outcomes Research Institute, the Society for Directors of Medical Education Research, Social Sciences and Research Council of Canada, EC Erasmus Knowledge Alliance, and the Australian Medical Council.
- As part of the Center's Graduate Programs in HPE, learners published 17 peer-reviewed articles in high-impact journals such as *Academic Medicine*, while CHPE faculty published nearly 100 peer-reviewed articles in premier HPE journals.
- Learners led diverse field research and teaching, including studying the agency and shared decision-making among patients and physicians; guides to faculty development for health professions education; exploring the impact of sleep deprivation on diagnostic and management reasoning; factors influencing direct observations; the role of isolated surgeons in resource-limited environments; leadership and followership in military interprofessional healthcare teams; physical medicine and rehabilitation clerkships in US medical schools; and the development of a simulation model and hybrid curriculum for military general surgeons.
- The Long Term Career Outcome Study (LTCOS) continued research across 11 themes, and is now working on a special edition in *Military Medicine* with our upcoming Middle States and LCME accreditation visits.

## Other Highlights

- CHPE faculty continued to be recognized for their excellence in research, teaching, and mentorship, winning awards including Medical Education Silver Quill Award; NBME's John P. Hubbard Award; National Capital Consortium Bailey K. Ashford Clinical Research Award; and the Perspectives on Medical Education Reviewer Excellence Award.
- Learners also achieved the honors of Federal Librarian of the Year; the Naval Postgraduate Dental School Dean's Award for Teaching Excellence; James J. Leonard Teaching Award; Louis N. Pangaro Master Teacher Award; Major General Lewis A. Mologne Award; Maryland Gamma Chapter of Alpha Omega Alpha honor society's Faculty Teacher and Resident Teacher of the Year Awards; the William Crosby Superiority in Research Award; and acceptance into

*Academic Medicine's* Research in Medical Education (RIME) supplement.

- CHPE faculty delivered more than 4,500 hours of instruction in HPE courses.
- Several CHPE faculty members served in key instructional roles for the SoM's Medical Education elective and collaborated with multiple medical students on their capstone projects.
- CHPE faculty had their research accepted at a number of prestigious conferences over the course of the year, and served in leadership roles with the AAMC, American Education Research Association (AERA), the Harvard Macy Institute, and the USU School of Medicine Executive Education Committee.
- Our partnerships with the departments of surgery and internal medicine trainees continue to flourish with awarding three MHPE degrees at USU's graduation in May 2021
- We continue to participate in the International Medical Exchange (IMEX) collaborative to learn about how medical and other professional schools achieve their mission and to build community
- We are assisting PGDC and GSN with their faculty development needs to include a series of HPE modules for all new GSN faculty and a faculty development certificate with a dental focus for the PGDC. We continue to support the SoM's local and distant faculty development efforts

As we wrap up the 2021–2022 academic year, we are excited by how much our Center has grown and impacted the HPE community at USU and beyond. Note that CHPE would not exist without the unwavering support of our new USU President, Dr. Jonathan Woodson, MD, SS, FACS, to enhance faculty development in the MHS by building academic leaders, scholars and educators for the future. Thank you to our faculty, learners, and collaborators who all work hard to keep advancing the breadth and depth of the health professions education field.

**Steven J. Durning, MD, PhD, MACP**  
**Founding Director, Center for Health Professions Education (CHPE)**  
**Uniformed Services University of the Health Sciences**

# MESSAGE FROM THE CHAIR



The Center for Health Professions Education (CHPE) has become a cornerstone of the Department of Medicine and arguably the School of Medicine. From the start, when CHPE was just an idea supported by now USU President, Dr. Jonathan Woodson, when he was at Health Affairs and provided funding for the program, I have had the pleasure of watching the Center grow into a thriving community at USU.

The Center touts a prolific and internationally known faculty, expanding research effort to include an enlarging portfolio of grants and works from the Long Term Career Outcome Study (LTCOS), and a growing number of over 250 graduates. Our faculty and learners serve on key SOM committees and task forces, such as the Assessment Subcommittee, the Diversity Committee, and the Executive Curriculum Committee Task Force on Addressing Racism and Bias in Medicine and the LGBTQAI+ Affirming Curriculum Task Force.

Furthermore, the Distance Learning Lab played a pivotal role in helping the School of Medicine continue to be successful during the pandemic. CHPE has also launched new inter-agency agreements with the Veterans Affairs and has enrolled PhD learners from the VA. They are also building a leadership curriculum for their Designated Education Officers (DEOs) who are their top academic leaders. CHPE has established a new Master of Education in HPE (MEd-HPE) degree program geared towards clinician educators seeking to grow in the scholarship of teaching and learning. They also enrolled their first class of joint MD/MEd in HPE learners this past year.

I think the work of CHPE has been exemplary and critical to the mission of the School of Medicine and I look forward to the future outstanding contributions that CHPE will continue to make to the Military Health System and to the quality of health professions education programs around the world.

**Kevin K. Chung, MD, FCCM, FACP**  
**COL (USA Retired)**  
**Professor of Medicine and Surgery**  
**Chair, Department of Medicine (MED)**  
**Uniformed Services University School of Medicine**

# MESSAGE FROM THE DEAN



During the past year, the Center for Health Professions Education (CHPE) expanded its impact on USU and the Military Health System (MHS) and broadened its international reach through its graduate programs, its research (especially the Long-Term Career Outcome Study), and its innovations in remote teaching and learning. In just this academic year, the Center's blended delivery graduate programs reached almost 170 learners in over 50 locations throughout the MHS. The year's highlights include two PhD graduates and 11 Master's in Health Professions Education graduates, as well as 90 certificate program graduates (including nearly one-third of the graduating medical school class). These new graduates will now join over 250 CHPE alumni serving as teachers and academic leaders in MHS-wide educational programs.

MHS teaching hospital faculty members now include a significant number of CHPE graduates (100% of our degree graduates serve as health professions education leaders including program directors, deans, course directors, and department chairs), who are driving educational innovation throughout the MHS. CHPE-trained medical educators are leading efforts to optimize education programs and improve skills development and assessment for MHS's future physician workforce.

Last year, the Center launched the MD/Master of Education (MEd) in Health Professions Education degree program, and enrolled its first two medical students. Several faculty members also joined the new program's charter class to begin study for their MEd in HPE degrees. The MEd in Health Professions Education program provides broad academic and practical training in the theory, research, and practice of HPE, offering current and future health professions educators an opportunity to sharpen their leadership, research, and teaching skills. For distance learning programs, the Distance Learning Lab (DL-Lab) continues to serve as the education innovation hub, delivering responsive support for SoM faculty and students, including consultations, workshops, and a faculty support website. The DL-Lab has also been instrumental in supporting USU's transition to the Canvas LMS.

CHPE is also on the leading edge of health professions education research. The Center's faculty continues to provide outstanding leadership for the Long-Term Career Outcomes Study (LTCOS), a national program that conducts research and gathers evidence on educational outcomes and program improvement. LTCOS research has resulted in over 100 hundred peer-reviewed publications, and its inventive scholarship is continuing to spark innovative new educational approaches. Notably, a series of LTCOS publications will soon appear in a special issue of *Military Medicine*, providing valuable additional evidence as USU prepares for upcoming LCME and Middle States accreditations. CHPE's faculty continue to publish a large number of highly cited papers (nearly 100 in the past year alone, and CHPE learners collaborated with faculty on an additional 20 publications); and they have successfully sought grants and established new VA Inter-Agency Agreements, opening new research opportunities for the SoM and beyond.

It is a pleasure to recognize the Center for Health Professions Education for its outstanding contributions to health professions education and research. I look forward to continuing to work with the Center and supporting its growing impact on USU and the MHS.

**Eric Elster, MD, FACS, FRCSEng (Hon.)**  
**Dean, School of Medicine**  
**Professor and Chair, Department of Surgery**  
**Director, Surgical Critical Care Initiative (SC2i)**  
**Uniformed Services University of the Health Sciences**



# Our Mission & Vision

The mission of the Center for Health Professions Education (CHPE) is to be the premier provider of health professions education for the Military and Public Health Systems through leadership in teaching, research, and innovation. More specifically, CHPE will enhance faculty development within USU and across the Military Health System (MHS) by providing advanced education (e.g., graduate certificates and degrees) to active duty and civilian faculty stationed at Military Treatment Facilities (MTFs) across the country, and will conduct essential educational research in the MHS (e.g., through the Long Term Career Outcome Study, faculty, degree program, and Distance Learning Lab scholarship).

We do this by:

- Building education, research and leadership capacity through the mentoring of graduate students, health professional trainees (e.g., medical students and residents), and faculty members;
- Generating new knowledge in HPE through research and innovative educational practice;
- Developing a collaborative community of inter-professional scholars and educational leaders in HPE;
- Providing faculty support and consultation on curriculum development and innovative instructional strategies); and
- Engaging in education-related knowledge translation activities with the potential to improve patient care and clinical practice.

The Vision of the CHPE is to be widely recognized as a global leader for the MHS, Public Health Service (PHS), and civilian communities in advancing health professions education through leadership in teaching, research, and innovation.

**Our learners develop competencies in three general categories:  
leadership, education, and research.**



**The Vision of the CHPE is to be widely recognized as a global leader for the MHS and civilian communities in advancing health professions education through leadership in teaching, research, and innovation.**

“The HPE program has been invaluable to my career. Every course was grounded in practice and immediately applicable to my work as a residency program director. ***I also cannot overstate the value of the mentorship and networking connections that developed through this program*** to my research and career opportunities. Joining the HPE program was hands-down the best career decision I have made!”

— PhD in HPE Graduate



# Voices of CHPE Learners

## “How has CHPE helped you?”



### MHPE ALUMNI

#### COL Jessica Bunin, MD, MHPE

Associate Dean of Diversity, Equity, and Inclusion

*“CHPE opened my eyes to my role in research and publication. Prior to embarking on my MHPE, I thought I hated research. It turns out, I really enjoy qualitative research. I simply didn’t know it existed before. I also learned skills to identify target journals and approach the revision process. All of these things have allowed for rapid growth of my academic career.”*



### MHPE LEARNER

#### CPT Adharsh Ponnappakkam, MD

General Pediatrician

*“Every course has given me concrete, usable skills to improve my education practice. As I progressed from FHPE to the MHPE program, the courses have built upon each other synergistically to help me become a better educator, and a better education researcher. The atmosphere at CHPE has helped to drive my continued intellectual growth and development in a psychologically supportive environment.”*



### MEd-HPE LEARNER

#### LCDR James Hawkins, DDS, MS

Chair, Orofacial Pain Center  
Navy Orofacial Pain Specialty Leader

*“The CHPE program has been a dual blessing. 1) It has provided me with tools that I have immediately applied to my clinical teaching practices. 2) It has provided numerous mentorship moments in which the CHPE team has encouraged me to think deeply about and refine education projects I am creating for use across the health professions.”*



### FHPE LEARNER

#### Diana Lautenberger

Director, Gender Equity Initiatives  
AAMC

*“The CHPE program connected me with physicians and practitioners to learn from each other in real time about what works in health professions education. I really enjoyed a diversity of perspectives when discussing research, learning methods, or challenges in medical education today. The most helpful courses for me were the qualitative and quantitative research classes which provided so much rich detail and practical examples to inform my own growing research practice in health professions education.”*



### PhD ALUMNI

#### Michelle Kiger, MD, PhD

Military Pediatric Residency Program  
Director Wright-Patterson Medical Center

*“The HPE program has been invaluable to my growth as an educator, researcher, and academic leader. As a program director, I came away from each course with tangible ideas for improvements and additions to my residency program. The foundation it provided in research set my career and academic advancement on an entirely new trajectory. The connections made with faculty and fellow students have also been key for ongoing collaborations.”*



### PhD ALUMNI

#### Eric Meyer, MD, PhD, FAPA LtCol, USAF, MC, FS

Deputy Chief of AF MH Operations  
Psychiatry Consultant to the AF  
Surgeon General

*“HPE pushed my thinking to a new level. The systems approach to education theory and the rigor of high quality research HPE held me to has made me not just a better educator but also a better staff officer.”*

## SPOTLIGHT:

# The CHPE Global Footprint

As it progressed through its third year as a Center at USU, learners continued to represent CHPE's presence at **more than 50 locations across the globe**. From San Diego, California, to Fort Bragg in North Carolina; from El Paso, Texas to the Salt Lake City Veteran Affairs in Utah; from New London, Connecticut, to Jacksonville, Florida; from Opelika, Alabama to Honolulu, Hawaii; and from Japan, Germany, the United Kingdom, and Afghanistan, our learners completed their coursework while serving the MHS around the world. This broad geographic dispersion was made possible by CHPE's commitment to building and improving its distance learning capacities. CHPE's broad global footprint was not just limited to learners' permanent stations; it also included learners who frequently, and on short notice, were deployed or were in field exercises in a number of remote locations around the world.



# CHPE GRADUATE PROGRAM LEARNERS, AY 2021-22

CHPE built a network of alumni around the world and grew to its largest cohort of active learners to date.

## BY THE NUMBERS

# 170+

Learners

### Teaching HPE Learners:

The HPE program continued to serve new learners **across the MHS with** a roster of more than 170 learners during the 2021-2022 year. These I-FHPE, FHPE, MHPE, MEd-HPE and PhD learners represent the Army, Navy, and Air Force, and include dentists, nurses, physicians, and physician assistants. Diverse specialties in medicine are represented, including internal medicine, pediatrics, psychiatry, and surgery. They also include civilian learners from organizations, such as AAMC and the VA.



# 100+

Graduates

### Producing Leaders:

With the conferral of two PhD degrees, 11 MHPE degrees and 90 certificates this year, **CHPE officially brought its total number of graduates to more than 250 alumni with impact.** This year's graduates include doctors, nurses, and public health officers whose roles encompass program directors, teaching faculty, medical residents, and more. Nearly a third of the medical school class graduated with a certificate. All graduates from our degree programs serve in academic leadership positions, such as deans, program directors, department chairs, and course directors.

# 50+

Locations

### Expanding Presence:

CHPE Graduate Program learners expanded **to more than 50 locations worldwide**, with learners enrolled at Military Health Systems across the U.S. and its territories including Colorado, Hawaii, Maryland, North Carolina, Oklahoma, South Dakota, Texas, Utah, Virginia, and Washington. Learners also completed coursework while serving abroad in countries such as Afghanistan, England, Germany, and Japan.



# 90%+

Active Duty

### Enhancing Readiness:

CHPE's **commitment to military readiness** is reinforced by 90% of its learners now serving in active duty roles. HPE learners complete military readiness statements in all theses, and continue to pursue military-relevant research programs like investigations of Military Interprofessional Healthcare Teams and the Long Term Career Outcome Study.

MHPE students received numerous teaching, research, and leadership awards that underscored their high performance and contributions to the military's health professions:

- Dr. Dolores Mullikin and Capt. Michael Arnold won the *Dean's Impact Award*.
- Alumni Maj. Adam Barelski and Capt. Patrick Reeves were named by the Alpha Omega Alpha (AQA) USU Chapter as *Faculty Teacher of the Year* and *Resident Teacher of the Year*, respectively.
- Lt. Col. Alice Barsoumian won the *Dean's Annual Faculty Teaching Award*.
- Lt. Ashley Hafer won the National Capital Consortium's *Bailey K. Ashford Clinical Research Award*.
- Lt. Cmdr. James Hawkins was the recipient of the 2021 Naval Postgraduate Dental School *Dean's Award for Teaching Excellence*.
- Maj Katie Ottolini was recognized by the American Academy of Pediatrics' (AAP) as the 2021 *Air Force Outstanding Pediatrician of the Year*.
- FHPE learner, Emily Shohfi, who was the clinical librarian at Walter Reed, was named *Federal Librarian of the Year*.

The following papers by Cmdr. Francesca Cimino and Lt. Col. George Mount and their authorship team were accepted in the special RIME supplement of *Academic Medicine*:

- Mount, G., Kahlke, R., Melton, J., Varpio, L. (2022). A Critical Review of Professional Identity Formation Interventions in Medical Education. *Academic Medicine: RIME Supplement*.
- Cimino F, Varpio L, Konopasky A, Barker A, Stalmeijer R, Ma T. (2022) Can we realize our collaborative potential?: A critical review of faculty roles and experiences in interprofessional education. *Academic Medicine, RIME Supplement*.

## LEARNER RESEARCH

*CHPE learners produced cutting edge research this year that was published and presented to local, national, and international audiences.*

Over the course of the 2021–2022 academic year, CHPE learners and faculty continued to produce thoughtful and innovative research at a rapid pace. During the last year, **CHPE learners and recent graduates published nearly 20 peer-reviewed articles in health professions education**, in collaboration with one or more CHPE faculty. Research from our graduates contributed to national and international conversations on a diverse array of topics—Col (Ret) Catherine Witkop investigated agency in [shared decision making](#) among patients and physicians and a [contraceptive decision-making mobile application](#) for servicewomen. Maj. Eric Meyer examined [entrustable professional activities \(EPAs\) in undergraduate medical education](#). Col (Ret) Drew Fallis published a scoping review of [guides to faculty development](#) for health professions education. In addition, Col (Ret) Madeleine Swanberg investigated [factors and interactions influencing direct observations](#). Lt. Cassandra Hickey developed a simulation model and hybrid curriculum for military general surgeons. Meanwhile, Lt. Matthew Nealeigh explored the [role of isolated surgeons](#) in resource-limited environments, and Maj. Charisma Evangelista collected expert consensus on a [standardized curriculum for Corneal Refractive Surgery training](#) in the military. Erin Barry explored [leadership and followership in military interprofessional healthcare teams](#) and Lt. Danny Benbassat investigated [physical medicine and rehabilitation clerkships](#) in US medical schools.



# FACULTY RESEARCH

Much like CHPE learners, CHPE faculty continued to conceive of, implement, evaluate, and publish a high volume of research. They published **nearly 100 peer-reviewed manuscripts as well as numerous book chapters, articles, and other scholarly products**, often collaborating with CHPE learners, alumni, and preeminent scholars around the world as they connected disparate themes and ideas.

## A Snapshot of CHPE Faculty Publications, 2021–2022

([See all faculty publications](#))

Durning SJ, Cervero RM, Roberts LW. [The Need for Listening Leaders](#). *Acad Med*. 2022 Feb 1; 97(2):165-166. doi: 10.1097/ACM.0000000000004520. PMID: 35084389.

Konopasky, A, O'Brien, BC, Artino, AR, Driessen, EW, Watling, CJ, Maggio, LA. [I, we and they: A linguistic and narrative exploration of the authorship process](#). *Med Educ*. 2022; 56( 4): 456- 464. doi:10.1111/medu.14697

Maggio, LA, Ninkov, A, Frank, JR, Costello, JA, Artino, AR. [Delineating the field of medical education: Bibliometric research approach\(es\)](#). *Med Educ*. 2022; 56( 4): 387- 394. doi:10.1111/medu.14677

Wyatt, TR, Zaidi, Z. [Bricolage: A tool for race-related, historically situated complex research](#). *Med Educ*. 2022; 56( 2): 170- 175. doi:10.1111/medu.14629

Wyatt TR, Taylor TR, White D, Rockich-Winston N. [“When No One Sees You as Black”: The Effect of Racial Violence on Black Trainees and Physicians](#). *Acad Med*. 2021 Nov 1; 96(11S):S17-S22. doi: 10.1097/ACM.0000000000004263. PMID: 34348386.

Maggio LA, Ninkov A, Costello JA, Driessen EW, Artino AR Jr. [Knowledge syntheses in medical education: Meta-research examining author gender, geographic location, and institutional affiliation](#). *PLoS One*. 2021 Oct 26; 16(10):e0258925. doi: 10.1371/journal.pone.0258925

Meyer HS, Larsen K, Samuel A, Berkley H, Harvey M, Norton C, Maggio LA. [Teaching Medical Students How to Teach: A Scoping Review](#). *Teach Learn Med*. 2021 Oct 7:1-13. doi: 10.1080/10401334.2021.1979006. Epub ahead of print. PMID: 34618654.

Uijtdehaage S, Ho MJ, Harvey E, Dorris CS, Huggett KN. [Academies in Health Professions Education: A Scoping Review](#). *Acad Med*. 2021 Oct 1; 96(10):1476-1483. doi:10.1097/ACM.0000000000004161. PMID: 33983143.

Samuel A, Durning, SJ; Larsen, KL. [Developing Academic Leadership From a Distance: A Health Professions Education Practicum Course](#). *Acad Med*. 2021 June; 96(6): 854-858 doi:10.1097/ACM.0000000000003916

Battista, A., Konopasky, A. and Durning, S.J. [The importance of theory and method: A brief reflection on an innovative program of research examining how situational factors influence physicians' clinical reasoning](#). *FASEB BioAdvances*. 2021; 3: 490-496. doi.org/10.1096/fba.2020-00109

Konopasky, A, Varpio, L, Stalmeijer, RE. [The potential of narrative analysis for HPE research: Highlighting five analytic lenses](#). *Med Educ*. 2021; 55( 12): 1369- 1375. doi:10.1111/medu.14597

Varpio, L, Bader-Larsen, KS, Hamwey, MK, Meyer, HS, Artino, A, Cruthirds, DF, Durning, MD, SJ. [New Insights About Military Interprofessional Healthcare Teams: Lessons Learned and New Directions From a Program of Research](#), *Mil Med*. 2021; 186(3): 53–56. doi.org/10.1093/milmed/usab087

CHPE faculty executed **research grants in excess of \$3 million** in the last year alone, including continued work on extramural projects like the integration of medical research data into Wikipedia, the investigation of clinical reasoning processes via medical simulation, and the exploration of student and faculty perceptions of unauthorized assistance and sharing of information by medical students.

- 17+ peer-reviewed articles published by learners and recent alumni
- 90+ peer-reviewed manuscripts by CHPE faculty

# CHPE Initiatives

## **SPOTLIGHT:**

### Long Term Career Outcome Study (LTCOS)

The Long Term Career Outcome Study (LTCOS), which is a core component of CHPE, is led by a multi-departmental research team that provides a unique model of educational epidemiology whereby educational processes can be linked to short- and longer-term educational and patient-care outcomes. To support this model, the research team conducts program evaluation to support accreditation, translates educational research findings into practice, and provides leadership in generating scientific knowledge that establishes USU as a local, national and international leader in the field of HPE.

In 2021–2022, LTCOS researchers, in collaboration with HPE learners, USU medical students, and researchers from a variety of outside organizations, published eight articles on a wide variety of themes. Publications included, but were not limited to, the following topics: undergraduate medical education remediation, medical student wellbeing and burnout, USU graduates' career accomplishments and military retention, and USU alumni achievement. Notably, two of these publications were led by HPE learners and two were led by medical students. The LTCOS is also working on a third special edition with Military Medicine to showcase a series of new investigations of undergraduate medical education and graduate medical education of USU and assist with the university's upcoming Middle States Commission on Higher Education and Liaison Committee on Medical Education accreditation visits.

## **SPOTLIGHT:**

### Distance Learning Laboratory

The Distance Learning Laboratory (DL-Lab) is a strategic imperative for the university. During the 2021-2022 academic year, the DL-Lab served over 146 faculty across 24 departments. The DL-Lab has provided over 162 individual and group consultations, and over 30 weekly workshops on a variety of topics including recording lectures, teaching small groups, using technology to enhance teaching, and designing online instruction.

To support faculty with just-in-time resources, the DL-Lab maintains a Faculty Support Resources website, which has been accessed by 259 users and garnered over 1,095 page views. In order to comprehensively support distance learning, the DL-Lab also provided a variety of resources for learners. This included orientation sessions for new School of Medicine (SoM) learners at both the undergraduate and graduate levels, and learners at the Graduate School of Nursing. The Student Support Resources website (343 users, 1,163 page views) connects students with resources that will help them be successful in distance learning. USU's SoM has proved that it can deliver effective distance learning (DL) instruction by assisting core faculty in the pre-clinical phase of education as well as several graduate school programs. The DL-Lab has played a key role in the university's migration to the Canvas learning management system. The DL-Lab designed the Canvas course templates and migrated all SoM pre-clerkship modules from Sakai to Canvas. They also assisted GSN with migrating 20 courses to Canvas. The DL-Lab has also migrated approximately 30 graduate courses.

The focus going forward includes providing individualized support for faculty in their migration to the Canvas platform. With the return to in-person teaching, the DL-Lab is helping faculty explore how to incorporate distance learning strategies and technologies to enhance their face-to-face teaching. The DL-Lab will continue to support graduate programs in the SoM as well as the faculty development office.

## SPOTLIGHT:

# Inaugural Cohort of MEd in Health Professions Education Learners



Our newest degree program—the Masters in Education in HPE (MEd-HPE)—enrolled its inaugural cohort of learners in the Fall of 2021. This inaugural cohort included learners from medicine, nursing and dentistry. We also admitted two first year medical students as part of the inaugural MD/MEd in HPE joint degree program.

While the MHPE program is based on traditional scholarship and requires a peer-reviewed publication, the MEd-HPE degree program is structured around educational innovation and scholarship of teaching. After taking foundational courses in our HPE program, students are expected to develop an innovation project in one of the following domains: teaching, curriculum development, mentoring and advising, assessment, or educational leadership and administration.



While sharing a similar foundation with the existing MHPE degree, the MEd-HPE program will offer two unique experiences that emphasize the scholarship of teaching. Learners participate in two scholarly innovation seminars, which delves into the role of the scholarship of teaching, identifies opportunities in educators' daily practice for developing such scholarship, and reviews quality criteria. Then, learners develop an innovation project (a “culminating project”), documenting the development, implementation, dissemination and impact of their project, which culminates in a presentation of their findings in a public forum.

**SPOTLIGHT:**

# Diversity, Equity, and Inclusion (DEI)



Acknowledging the need to promote diversity, equity, and inclusion in HPE, CHPE faculty and learners have produced scholarly works, developed curricula, and led faculty development initiatives to address systemic bias and discrimination within health professions education. Faculty members joined the SoM's Diversity Committee, led by CHPE alumna and USU Associate Dean for Diversity, Equity, and Inclusion (DEI), Jessica Bunin, MD, MHPE. CHPE faculty members and learners also joined two task forces of the Executive Curriculum Committee: the Addressing Racism in Medicine/Medical Education Task Force, and the LGBTQIA+ Affirming Curriculum Task Force. Both groups seek to mitigate potential harm to minoritized communities caused by implicit bias within medical curricula.

Examples of the work accomplished by learners and faculty include the development of an Allyship Curriculum, Workshop on Racism in Medicine, and DEI journal club at USU. Faculty also delivered talks and presentations at national and international conferences on topics such as professional identity experiences among minoritized medical professionals, a decolonial framework for research, and allyship in indigenous settings. Some CHPE learners have also focused their research on DEI topics, with working titles that include "How Racial/Ethnic Underrepresented Minority Dental Faculty Thrive and Exercise Agency at Predominantly White, Public Institutions," "Navigating Dominant and Oppressive Structures: A Qualitative Review of Black Women Medical Faculty and Administrators' Experiences to Foster Retention in Medicine," "Exposing the Barriers to Diversity in Medical School Admissions," and "Perceptions of Gender Equality in Pediatric Academic Leadership."

Works published by faculty in 2021–2022 include topics, such as [the medical educator's role in creating supportive learning environments](#), [using language to move toward a more inclusive environment](#), [critical race theory in medical education](#), [reimagining HPE research that stemmed from normalized practices that has harmed marginalized communities](#), and [intersectionality as means for centering power and oppression in research](#). CHPE will continue to lead and participate in DEI initiatives as USU advances work to make the education of its learners more inclusive.

**SPOTLIGHT:**

# VA, Designated Education Officer (DEO) Project

National VA leadership reached out to CHPE to help develop a curriculum for their top educational leaders due in part to the very positive feedback from VA learners regarding CHPE's certificate programs. CHPE assembled a team in collaboration with partners including the Griffith Institute, the AAMC, and faculty at Georgetown University to conduct a needs assessment with national VA academic leaders and MHS leaders. The multiyear collaboration will result in additional leadership courses for VA and our MHS learners. We anticipate having both face-to-face as well as distance learning experiences and we seek to build a community of VA and MHS senior academic leaders to enhance collaboration, capacity, and capability of both systems.





# Growing Connections and Awards

*The HPE program continued to expand its national and international relationships, often earning recognition for the excellence of its learners and faculty members.*

HPE also revitalized its practicum learning opportunities, capitalizing on CHPE faculty members' day-to-day functions and leadership roles. These activities have included reviewing grant applications, peer reviewing manuscripts for HPE journals, co-teaching courses, creating curricula, conducting online workshops and conferences, and developing high quality assessments. The practicum revitalization included increased opportunities with external partners, including learners working with the AAMC, the ABMS, and other organizations. CHPE is in the process of renewing MOUs with the AAMC and Maastricht University and is exploring additional national as well as international opportunities.

Several **HPE faculty members** were recognized for their excellence in research, teaching, and mentorship, winning awards including the Medical Education Silver Quill Award; NBME's John P. Hubbard Award; National Capital Consortium Bailey K. Ashford Clinical Research Award; Perspectives on Medical Education Reviewer Excellence Award.



# Our Strategic Concepts

*The CHPE Strategic Concepts are meant to help ensure that our team as a whole can achieve our mission and vision. These concepts shape how we approach the design, execution, and evaluation of each program element, as well as our entire program.*

## MEANINGFULNESS

We will link scholarship with educational practice across the continuum and use theory to strengthen the generalizability of our work. We will work in key themes/lines of research consistent with faculty expertise and build unity of effort in the MHS and with strategic civilian partners. We will increase attendance at international research conferences to present our work and foster collaborations with global partners, and we will offer courses at USU for the civilian community.

## RELEVANCE

Our work will be relevant to the local education community—e.g., where appropriate, our scholarship will be military specific and relevant. This is critical to stakeholders who send us full-time and part-time students; it is also important for securing and expanding ongoing funding.

## COLLABORATION

We will collaborate within the MHS and more broadly with HPE colleagues globally. This is a unique strategic advantage. We are a closed system (a fact that has allowed for the successes of the Long Term Career Outcome Study—LTCOS), and we are interdisciplinary by nature. We have established an external advisory board as well as MOUs with the best HPE institutions globally. We will seek ways to enhance this unique opportunity for both our education and research programs.

## VISIBILITY

We will increase our work's visibility through relevant publications, presentations at national, international, and MHS-relevant meetings, as well as through extramural grant funding. We will publish an annual report, enhance our website, create an internationally visible identity, pioneer educational development projects, attract visiting scholars, employ a targeted, research publication strategy, attend important global HPE meetings, and enhance partnerships with leaders in HPE worldwide.

## CREDIBILITY

We will ensure credibility by collaborating with key people to develop medical school and university-wide initiatives. We will work to increase the relevance and meaningfulness of our work and inform others about the usefulness of certificate and degree programs and the research we do. This will be done through, for example, the LTCOS, individual research efforts, and HPE student efforts. We aim to conduct top-notch HPE scholarship, but our work must be relevant and credible. We do not want to be seen as an “ivory tower” group whose work does not positively impact the MHS.

## STEWARDSHIP

We will invest our social and financial capital (funding/limited resources) into appropriate activities. We will strive to perform only those activities that we can reasonably accomplish with excellence.

# Our Guiding Principles

*Faculty in CHPE believe that theory and scholarship should work in synergy with educational practice, with each informing and improving the other. Through teamwork, innovation, and personal excellence, we will celebrate our successes, promoting each other's work and careers, and learning from and supporting each other when we make mistakes. Thus, we commit to excellence in eight principles in all our scholarly endeavors, embodying "learning to care for those in harm's way" through the education of those providing that care (i.e., health professionals). When taken together, we believe these eight principles distinguish our program from other HPE programs around the globe.*

## CULTIVATE SCHOLARSHIP

Focus on theoretically grounded scholarship that spans the continuum, informs both theory and practice, and also bridges theory to practice.

## DEVELOP FUTURE GENERATIONS

Provide all contacts (graduate students, junior faculty, etc.) with graduate-level education in both qualitative and quantitative research methods, cutting-edge innovations, and practical leadership experience.

## LEAD THROUGH LEARNING

Foster a culture of teamwork (i.e., inter-disciplinary and inter-professional cooperation and collaboration) and use information and distributed learning technologies to positively impact our global community. We will celebrate successes and learn when plans fall short.

## SERVICE ABOVE SELF

Serve our military and Public Health Service community first. This starts with our CHPE team, followed by the local USU community, remote HPE program campuses, hospitals (unity of effort) in the MHS, the nation, and finally our global community.

## PRACTICE WHAT WE PREACH

Implement in our educational activities the evidence-based practices we teach and research. Highlight our military context through relevance and readiness. Our students and faculty will explicitly translate our work to the needs of the MHS.

## SEEK TO IMPROVE CARE

Our overarching goal is to provide needed education to those who provide care in harm's way, as well as to those who educate those front-line health professionals.

## MAKE IT BETTER

CHPE faculty and staff are committed to excellence and continuous quality improvement. We create educational activities and continually strive to improve them to best meet our community's needs.

## CO-OWNERSHIP

CHPE faculty and staff are a collaborative team committed to being the best that we can be. We put in the time needed and proudly serve the Center that we all have had a stake in building.



#### CHPE FACULTY & STAFF

**Steven Durning**, MD, PhD, Director, Professor  
[steven.durning@usuhs.edu](mailto:steven.durning@usuhs.edu)

**Ronald Cervero**, PhD, Deputy Director, Professor  
[ronald.cervero@usuhs.edu](mailto:ronald.cervero@usuhs.edu)

**Lauren Maggio**, PhD, Associate Director, Research & Scholarly Communication, Professor  
[lauren.maggio@usuhs.edu](mailto:lauren.maggio@usuhs.edu)

**Holly Meyer**, PhD, Associate Director, Student Affairs, Assistant Professor  
[holly.meyer@usuhs.edu](mailto:holly.meyer@usuhs.edu)

**Sebastian Uijtdehaage**, PhD, Associate Director, Professor  
[sebastian.ujtdehaage@usuhs.edu](mailto:sebastian.ujtdehaage@usuhs.edu)

**Tasha Wyatt**, PhD, Associate Director, Remote Campuses, Associate Professor  
[tasha.wyatt@usuhs.edu](mailto:tasha.wyatt@usuhs.edu)

**Alexis Battista**, PhD, Assistant Professor  
[alexis.battista.ctr@usuhs.edu](mailto:alexis.battista.ctr@usuhs.edu)

**Abigail Konopasky**, PhD, Assistant Professor  
[abigail.konopasky.ctr@usuhs.edu](mailto:abigail.konopasky.ctr@usuhs.edu)

**Tinglan Ma**, PhD, Assistant Professor  
[ting-lan.ma.ctr@usuhs.edu](mailto:ting-lan.ma.ctr@usuhs.edu)

**Paolo C. Martin**, PhD, Assistant Professor  
[paolo.martin.ctr@usuhs.edu](mailto:paolo.martin.ctr@usuhs.edu)

**CAPT John Melton**, PhD, Assistant Professor  
[john.melton@usuhs.edu](mailto:john.melton@usuhs.edu)

**Jerusalem Merkebu**, PhD, Assistant Professor  
[jerusalem.merkebu.ctr@usuhs.edu](mailto:jerusalem.merkebu.ctr@usuhs.edu)

**Anita Samuel**, PhD, Distance Learning Assistant Director, Assistant Professor  
[anita.samuel@usuhs.edu](mailto:anita.samuel@usuhs.edu)

**Michael Soh**, PhD, Assistant Professor  
[michael.soh.ctr@usuhs.edu](mailto:michael.soh.ctr@usuhs.edu)

**Lara Varpio**, PhD, Professor  
[lara.varpio@usuhs.edu](mailto:lara.varpio@usuhs.edu)

**Joseph Costello**, MSIS, Research Associate  
[joseph.costello.ctr@usuhs.edu](mailto:joseph.costello.ctr@usuhs.edu)

**Elizabeth Darby**, BA, Educational Programs Manager  
[elizabeth.darby.ctr@usuhs.edu](mailto:elizabeth.darby.ctr@usuhs.edu)

**Cindy Glass**, BS, Program Administrative Specialist  
[cynthia.glass.ctr@usuhs.edu](mailto:cynthia.glass.ctr@usuhs.edu)

**Divya Ramani**, MA, MS, Research Associate  
[divya.ramani.ctr@usuhs.edu](mailto:divya.ramani.ctr@usuhs.edu)

**Colin Riggs**, BA, Associate Manager of Finance and Distance Learning  
[colin.riggs.ctr@usuhs.edu](mailto:colin.riggs.ctr@usuhs.edu)

#### LONG TERM OUTCOME STUDY (LTCOS) FACULTY & STAFF

**Ting Dong**, PhD, LTCOS Interim Associate Director, Research Associate Professor  
[ting.dong.ctr@usuhs.edu](mailto:ting.dong.ctr@usuhs.edu)

**Deanna Schreiber-Gregory**, MS, LTCOS Lead Research Statistician and Data Manager  
[deanna.schreiber-gregory.ctr@usuhs.edu](mailto:deanna.schreiber-gregory.ctr@usuhs.edu)

**Ramon Zapata**, MPH, Data Analyst  
[ramona.zapata.ctr@usuhs.edu](mailto:ramona.zapata.ctr@usuhs.edu)

#### DISTANCE LEARNING LAB (DL LAB) FACULTY & STAFF

**Eulho (EJ) Jung**, PhD, Distance Learning Lab, Assistant Professor  
[eulho.jung.ctr@usuhs.edu](mailto:eulho.jung.ctr@usuhs.edu)

**Beth King**, MPP, Distance Learning Program Evaluator  
[elizabeth.king.ctr@usuhs.edu](mailto:elizabeth.king.ctr@usuhs.edu)



For more information about each of the CHPE programs, visit

<https://chpe.usuhs.edu>

Or contact us:

**EMAIL:** [CHPE@usuhs.edu](mailto:CHPE@usuhs.edu)

**PHONE:** (301) 295-3603

**MAIL:**

Department of Medicine  
ATTN: CHPE Director, Uniformed Services University  
4301 Jones Bridge Road  
Bethesda, MD 20814-4799

Follow Us on Twitter!



Keep up to date with new CHPE developments throughout the year by following us on Twitter [@USU\\_CHPE](https://twitter.com/USU_CHPE)



**CHPE**



Uniformed  
Services  
University

*Supplement*

**TAB 11**

Graduate School of Nursing (GSN)

**Board of Regents Brief**

**Submitted by:** Carol A. Romano, PhD, RN, FAAN      **Date:** February 6, 2022

**Title & School:** Dean, Graduate School of Nursing      **Phone:** 301-295-9004

**Purpose:** Information      **Action** \_\_\_\_\_

**Subject:** Dean’s Report – Graduate School of Nursing

**GSN 2022 Annual Report Summary**  
(Infographic attached)

- The GSN holds 2 National League of Nursing designations as a Center of Excellence for 1) enhanced student learning & professional development and 2) promoting the pedagogical expertise of faculty; is ranked by US News & World Report in the top 5% of Doctor of Nursing Practice Programs in the nation, and as number 4 of all nurse anesthesia programs.
- In 2022 GSN had \$7.7 million in active grant funding with \$3.1 million in new grant dollars. Seven faculty served on 10 journal editorial boards; 27 served as reviewers for 65 professional journals; and faculty disseminated GSN scholarship in 132 publications/presentation/posters.
- Twenty-two of the 60 billeted faculty members (38%) hold fellowships in 10 professional organizations.
- In 2022 the total student enrollment was 187; sixty-six DNPs and 1 PhD graduated in May 2022, bringing the total number of GSN alumni to 1,141.
- On average each GSN graduate completed 1,750 clinical hours. The GSN has agreements with 86 military, federal and civilian clinical sites.

**Faculty Organization**

At the request of the BOR Chair, below is a description of how the GSN faculty are organized:

- The GSN has 60 full time faculty positions: 20 civilian and 40 are military
  - Military faculty are provided by the services and assigned to USU for an average of 3 years.
  - Twenty-three (57%) of the billeted military faculty support clinical rotation at the MTFs.
- One hundred per cent of faculty have doctoral degrees.
- Fifty-six percent of faculty are USU alumni.
- Each specialty program has a combination of military and civilian faculty.
  - The civilian faculty provide continuity over time.
  - The rotating military provide updated military relevance and clinical expertise.

- An extensive faculty development/orientation program is provided to all new faculty. This includes:
  - A minimum of 16 required hours of coursework in health professional education to prepare for the faculty role.
  - Monthly continuing education in faculty development.
- Opportunities for enhanced development in the faculty role are also available from the USU Center for Health Professions Education.
- A faculty mentorship program, the Faculty Fellows program, is in place for senior faculty in each specialty program to mentor new faculty.
- Many military faculty who leave USU opt to serve as GSN adjunct faculty to continue their scholarship and contribution and/or serve as preceptors for GSN students.
- In the past 20 years, 29 GSN military faculty who retired have accepted civilian university faculty or academic leadership positions.

### **Women's Health Research**

**Dr. Elizabeth A. Kostas-Polston** is conducting a multi-year program of research with the goal of reducing undiagnosed and untreated urogenital infections experienced by female warfighters while serving in austere environments (to include field training and deployment). This 2.8 million dollar, seven-study research focuses on providing access to a symptom self-diagnosis and self-treatment kit used for common urogenital infections.

Women comprise over 17% of the U.S. military (DMDC report Oct 2022). Sex-specific common urogenital infections were one of the top five reasons female warfighters sought medical care, and one of the top seven reasons they were flown out of theater during campaigns in Afghanistan and Iraq\*. The ability to self-identify, confirm, and treat the three most common urogenital infections reported by female warfighters (urinary tract infections, bacterial vaginosis, and vulvovaginal candidiasis or vaginal yeast infections) is the study intent so as to enhance personal health and operational readiness, thereby enhancing warfare capability. Recruitment and data collection are underway at Landstuhl Regional Medical Center and Womack Army Medical Center.

\*Yoder MJ, Merkl A, Wells T: Prevalence by age groups of urinary tract infections and other female urogenital related conditions of deployed and nondeployed active duty females. Report #703-681-8767. Falls Church, VA, Defense Health Agency, Decision Support Division, January 10, 2017)

In response to the National Defense Authorization Act for Fiscal Year 2022, Section 740, **Dr. Lynette Hamlin** (GSN Associate Dean and Professor), senior PI for the Military Women's Health Research Program, will conduct a study on the incidence of breast cancer among members of the Armed Forces serving on active duty. Specific aims of the research include:

- A determination of the number of members of the Armed Forces who served on active duty at any time during the period beginning on January 1, 2011, and ending on the date of the enactment of this Act who were diagnosed with breast cancer during such period.



- A determination of demographic information regarding such members, including race, ethnicity, sex, age, military occupational specialty, and rank.
- A comparison of the rates of members of the Armed Forces serving on active duty who have breast cancer to civilian populations with comparable demographic characteristics.
- An identification of potential factors associated with service in the Armed Forces that could increase the risk of breast cancer for members of the Armed Forces serving on active duty.
- To the extent the data are available, an identification of overseas locations associated with airborne hazards, such as burn pits, and members of the Armed Forces diagnosed with breast cancer who served on active duty in such locations.

### **Operational Readiness**

Eight GSN students, along with SOM students and members of US Special Operations Command, will attend the eight day Cold Weather Medicine and Avalanche Rescue course (Feb 25-March 6) as an operational elective at the Army Mountain Warfare School in Jericho, VT. Students build upon the USU Mountain Medicine course and apply these skills in a cold-weather environment. GSN students also complete an American Institute for Avalanche Rescue and Education level 1 certification and receive the Diploma in Mountain Medicine (DiMM), an internationally recognized certification demonstrating knowledge in the essential care of patients in the technical mountainous environment.

Operational electives help students adapt to the challenges of patient care in austere and extreme environments, and develop skills to apply to military/civilian rescue-recovery operations, and search-rescue missions in cold, mountainous or remote areas.

### **Transitions of Care**

GSN expanded the clinical rotations for Clinical Nurse Specialist (CNS) students sending them to Landstuhl Army Medical Center in Germany to learn about the Joint Trauma System and the complexities of enroute care (the continued provision of care during patient movement between the roles of medical care).

Since the onset of the Russia/Ukraine War, Landstuhl has experienced an increase in patient activity from the combatant commands (US African Command, US European Command, Allied Forces Central Europe). CNS students work with preceptors and explore concepts associated with combat casualty care, inter and intra-theater patient movement, care coordination, operational virtual health, and leadership. This experience further prepares the CNS student for clinical and leadership roles in future austere, deployed, or humanitarian settings. Landstuhl and Ramstein Air Base medical, nursing and aeromedical evacuation leaders are enthusiastic and supportive of our students and have asked for additional students to assist them in improving their processes and systems.

# GSN By the Numbers | 2022

## Program



187

Students Enrolled



1,141

Alumni

2  
NLN CENTER  
OF EXCELLENCE  
DESIGNATIONS

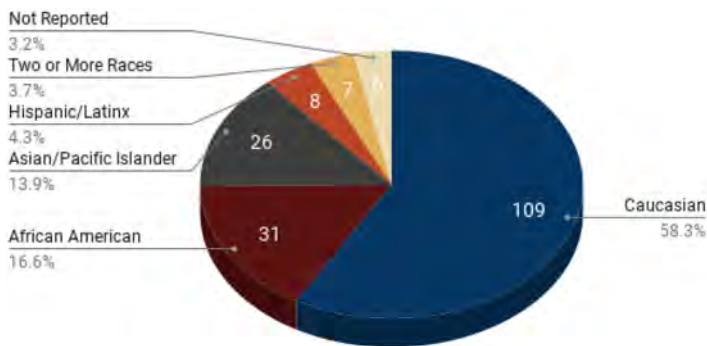
Ranked  
#4  
NURSE  
ANESTHESIA  
DNP PROGRAM

Ranked  
Top 5%  
DOCTOR  
OF NURSING  
PRACTICE

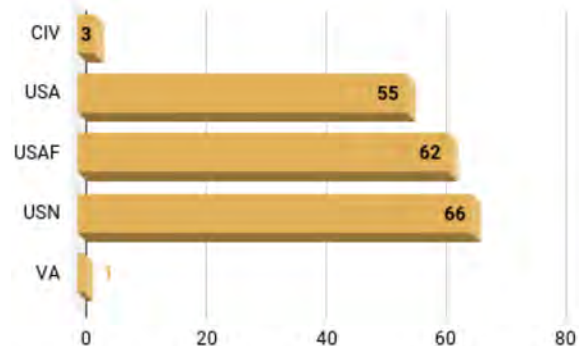
7 PROGRAM OPTIONS	Students by Specialty						
	AGCNS (DNP)	AGCNS (MSN)	FNP	WHNP	RNA	PMHNP	PHD
	8	3	47	2	81	36	10
3 DEGREES	67 2022 GRADUATES						
	66 DNP • 1 PHD • 0 MSN						
FACULTY   100% DOCTORAL DEGREES • 56% USU ALUMNI							

## Diversity of Student Body

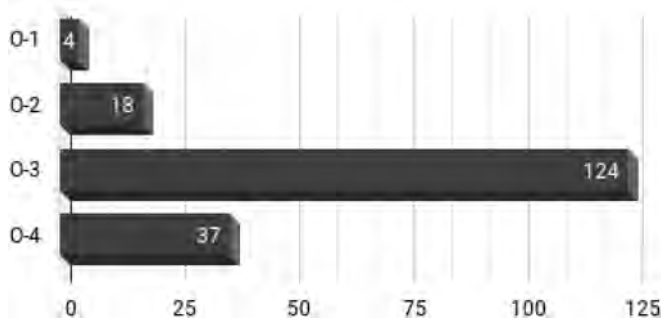
Student Ethnicity



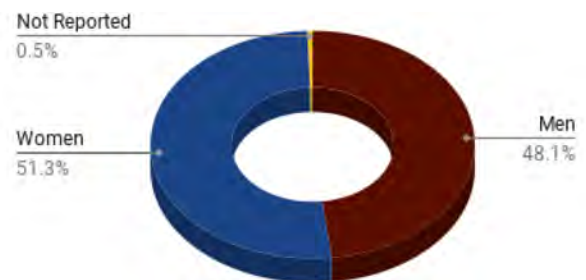
Student Affiliation



Student Ranks



Student Gender



## Scholarship & Leadership



- 7 Faculty members on 10 editorial boards
- 27 Faculty reviewers for 65 journals
- 132 Faculty publications, presentations and posters
- 22 Faculty fellows in 10 professional organizations
- 2 Jonas Scholars

98%

APRN  
Certification  
Pass Rate



\$3.1M

New Grant  
Dollars



\$7.7M

Active Grant  
Funding



## Clinical & Operational Experiences



1750

Average  
Clinical Hours  
per Student

86 CLINICAL SITES



## 4 OPERATIONAL READINESS TRAININGS

Critical Care Air Transport Team  
& Transitions of Care



5 Students Trained



Military Mountain  
Medicine

27 Students Trained



German Armed Forces  
Proficiency Badge

14 Students Trained

**39 GSN STUDENTS TRAINED**

*Supplement*

**TAB 12**

Postgraduate Dental College (PDC)

# Uniformed Services University of the Health Sciences Board of Regents

## Board Brief

Submitted by: Drew W. Fallis, DDS, MS, MHPE Date: Feb 6, 2023

Title: Exec Dean, Postgraduate Dental College (PDC) Phone: 210-299-8509

Purpose: Information X Action \_\_\_\_\_

Subject: PDC Executive Dean's Report

### Significant Issues:

#### 1. Strategic Priorities for the University

- How are these shared by the PDC?
  - The USU Strategic Plan is used as a framework for development of the PDC Strategic Plan (**Attachment 1**). As represented in the PDC Metrics Table (**Page 8**), performance metrics are utilized to assess defined outcomes that align with USU Strategic Measures of Performance (SMOP).
- How are these shared with the Service Deans?
  - The three Service Deans collaborate with PDC Leadership in the development of the PDC Strategic Plan and receive annual updates on performance metrics and future initiatives via the PDC Annual Report (**Attachment 2**).

#### 2. Perceived challenges faced by the University

- How are the Deans and PDC helping to face these challenges?
  - Sharing the Secret by emphasizing the USU Brand and communicating the USU mission to all stakeholders and civilian academic entities.
  - Increasing PDC faculty involvement in all aspects of USU
  - Emphasizing military-unique academic benefits that only USU can provide to demonstrate the value of military-based educational programs.
  - Guiding the growth and development of the PDC and assist the Services in accomplishing outcomes and initiatives best suited for a University.
  - Reducing reliance on civilian training resources. The transition of the first-year curriculum for the Periodontics and Prosthodontics MS degree programs at JBSA Lackland from University of Texas Health Sciences Center – San Antonio (UT Health) to the PDC/USU represents the final recapture of purchased curriculum from a civilian university to the PDC.

- Assistance in facing challenges is provided by continuing to meet performance metrics as reported in the Annual Report in the domains of Teaching, Research & Scholarship, and Leadership & Leader Development (**Attachment 2**).

### 3. Faculty

- How is the Faculty Organized?
  - Only three billeted faculty positions exist within the PDC (Executive Dean, Associate Dean for Dental Research, and Associate Dean for Faculty Affairs). **See Attachments 3 and 4**
  - All other faculty are billeted within one of the three military Service branches at one of 30 military treatment facilities (MTFs) that maintain affiliation agreements with the USU.
  - 46 Program Directors conduct educational activities under the direction of a Service Dean.
  - Faculty appointments are offered within a professorial series consisting of progressive ranks of Assistant Professor, Associate Professor, and Professor. These ranks are offered within 5 faculty tracks including: Educator, Clinical, Clinician-Educator, Clinician-Investigator, and Research.
  - A Tri-Service Committee on Appointments and Promotions (CAP) consisting of Army, Navy, and Air Force Professors manages PDC faculty appointments and promotion actions, all of which are non-tenured.
- How are negative impacts mitigated (research, etc.) when military personnel change assignments? How does this affect the faculty?

Change of assignments for military faculty can be challenging. The impacts are minimized by:

- Program Director (PD) assignments for a minimum of Program Length +1 year.
- Deputy PD assignments for better development and transition.
- PDs and Deputy PDs attend the annual Federal Services Dental Educator's Workshop to align curricula, share collaborative ideas, and proactively address Program challenges.
- Higher full-time faculty: student ratios, in comparison to civilian programs.
- Primary Research Director at each location.
- Research mentors assignments aligned with planned moves.
- Consistency of Program Design.
- Majority of faculty development opportunities are offered via Distance Learning (DL), which allows progression regardless of location.

### 4. Applications (number of students that can be accommodated)

- The number of applications to medical school is much greater than the seats...Is this the same for the PDC?

- Yes, the number of applications is greater than the number of training slots/seats available in PDC Programs. However, this doesn't represent a limitation in the available capacity of PDC Programs. It is by design.
  - The number and training capacity (number of seats) of PDC Programs are set to meet the historical training requirements of the 3 Services for mission-essential dental specialty training.
  - The maximum number of students in each Program is approved during the accreditation by the American Dental Association Commission on Dental Accreditation (ADA CODA) and highly dependent upon facility constraints (number of dental treatment chairs, offices, study areas, etc.)
  - Educational requirements are forecast each year, advertised within each military Service, and then Residency Selection Boards are conducted via a competitive process.
  - When projected training requirements exceed the number of training slots within a Service, then:
    - A request is made to the other two Services for an unused training slot.
    - ADA CODA can be petitioned to authorize a temporary increase in enrolment.
    - Out of Service (civilian) training is considered if no DoD training slots are available.
  - When projected training requirements are lower than the number of training slots within a Service, then:
    - The open training slot is offered to the two remaining Services.
    - If not needed by the other Services, the training slot is offered to the Public Health Service, US Coast Guard, VA, or a foreign country with which we have a training agreement.
- Are there workforce needs beyond what the schools are producing and if so, is there any discussion about expansion of class sizes? Not required at this time.

**Current & Future Concerns:** Maintenance of current military postgraduate training model.

**Funding/Budget Estimate/Fiscal Impact:** None

**Staffing Impact:** None

**Board Action Requested:** None

---

# POSTGRADUATE DENTAL COLLEGE STRATEGIC PLAN

2023-2027



**DENTAL**  
Postgraduate Dental College



1. **Purpose:** The Postgraduate Dental College (PDC or College) Strategic Plan defines priorities and initiatives aligned with the Strategic Plan of the Uniformed Services University (USU or University).
2. **References:**
  - a. Uniformed Services University of the Health Sciences Strategic Plan 2021-2025 – October 2021 (including all accompanying references)
  - b. Postgraduate Dental College Strategic Framework 2019-2023 – revised January 2021
  - c. Tri-Service Center for Oral Health Studies (TSCOHS) Strategic Plan 2019-2023 – November 2019
3. **Background:** The PDC must continue to support the Military Health System (MHS) to optimize Medically-Ready and Ready Medical forces. Therefore, the PDC Strategic Plan must remain flexible and adaptable to accommodate a constantly changing environment. The following are significant points for consideration.
  - a. Oral health is a vital and integral component of overall health. As such, dental care remains one of the most requested services during soft power health engagements, and remains a key component of these initiatives to protect US national interests.
  - b. PDC education, in partnership with Services' Graduate Dental Education (GDE), uses dental faculty mentors in military settings to better educate readiness-focused, master clinicians with an emphasis on critical thinking and problem solving. This model optimizes the development of mission-focused dental leaders.
  - c. Advanced dental education programs embedded within military medical and dental treatment facilities provide readiness-focused training environments that directly support the DoD's Medically-Ready and Ready-Medical Forces, a model that does not exist in civilian academics.
  - d. Responses to the COVID-19 pandemic, including increased use of distance learning platforms and hybrid teaching methodologies, have resulted in significant lessons learned to enhance the design of PDC programs.
  - e. The increasing military capabilities of our adversaries could result in conflict and may increase the demand for warfighter dental health and deployed dental assets.
  - f. Realignment, standardization, and consolidation of the GDE enterprise are intended to drive innovation and efficiency.
  - g. The PDC is impacted by changing requirements imposed by accreditation agencies, the Services, and other governmental organizations, as well as evolving strategies for integration of new technologies.

- h. Maintaining the vitality of the GDE platform will become increasingly important to meet DoD healthcare requirements. This is a critical consideration as competition increases for limited training positions in military and civilian dental residency programs.
4. **Assumptions:** The following assumptions are considered necessary for the execution of this strategic plan.
    - a. USU will experience a constrained resource environment requiring offsets and internal sourcing.
    - b. External agencies (e.g., Health Affairs, Defense Health Agency, accrediting bodies) may mandate consolidation and standardization of GDE training platforms among the military Services.
    - c. Manpower reductions may drive a change in PDC education requirements.
    - d. USU and DoD IT policy requirements will present challenges to PDC operations.
  5. **Mission:** The mission of the PDC is to enhance the education, training, and development of military dentists to meet the advanced dental education and treatment needs of the DoD.

The PDC directly supports the readiness of America's Warfighter and the healthcare needs of the DoD community by partnering with the Services to educate dentists suited for military practice. The PDC:

- a. confers Master of Science (MS) in Oral Biology degrees through oversight of curriculum and research efforts.
  - b. prepares graduates as competent problem solvers, innovators, and critical thinkers.
  - c. awards USU faculty appointments and provides accreditation-required faculty development training.
  - d. maintains an exceptional and outcomes-focused MS GDE portfolio consisting of 19 military residency programs encompassing 7 disciplines.
  - e. provides academic support to a network of 26 military dental Postgraduate Year 1 (PGY-1) certificate programs, facilitating unique standardization, collaboration, and research opportunities.
  - f. aligns with TSCOHS to support dental public health research and education.
6. **Vision:** By 2027, the PDC will be recognized as our nation's premier academic, research, and leadership institution for advanced dental education.
  7. **Values:**
    - a. **Compassion and Caring.** The PDC fosters an atmosphere of compassion, caring, mutual respect, courtesy, and pride in all activities.
    - b. **Ethics and Integrity.** The PDC promotes moral and professional principles that govern the conduct of health professionals and military and health organizations.
    - c. **Diversity, Equity, and Inclusion (DEI).** The PDC and component Dental Schools promote and defend: diversity of thought, people, and environment; equality of opportunity, responsibility, and resource distribution; and a sense of community which values all individuals.

- d. Excellence in Scholarship. The PDC is committed to rigorous standards of scholarship and academic freedom as fundamental to the advancement of knowledge.
  - e. Spirit of Innovation. PDC students, faculty, and staff will pursue and creatively apply groundbreaking knowledge in support of the health and readiness of the Services and the nation.
  - f. Selfless Service. PDC personnel will provide leadership and expertise to promote service before self.
8. **Mission Domains:** USU's Mission Domains provide strategic themes and reflect the major vectors the PDC will follow throughout the period of this strategic plan. While listed separately, these domains are interwoven and mutually supportive.
- a. Education: The PDC supports education and training to provide outstanding dentists and military leaders to satisfy the needs of the DoD. The PDC supports curricula that are:
    - i. Integrated, enhancing collaboration with all USU schools and colleges.
    - ii. Requirements-based, to meet accreditation standards and Service specific requirements.
    - iii. State-of-the-art, leveraging advanced educational methodologies with proven health education systems.
    - iv. Competitive and stimulating, to draw the best and brightest to the PDC.
    - v. Warfighter-focused, to develop mission ready dental officers.
    - vi. Sustained, promoting lifelong learning.
  - b. Research and Scholarship: PDC research and scholarship efforts support resident research endeavors that are aligned with operational knowledge and capability gaps. Research is conducted at multiple locations, and supported by the TSCOHS. Research includes:
    - i. Basic research, gaining a better understanding of a subject, phenomenon, or basic law of nature. This type of research is focused on the advancement of knowledge rather than solving a specific problem.
    - ii. Translational research, converting/applying basic research into results that directly benefit humans. It is commonly termed “bench to bedside” research.
    - iii. Clinical research, assessing the safety and effectiveness of advances in patient care.
    - iv. Systems and operations research, exploring problem-solving and decision-making

efforts with significant ramifications in the management of organizations.

- v. Population Health Research, examining factors that influence the health of large groups sharing defined characteristics.
  - vi. Health Policy Research, understanding how policies, practices, and regulations influence collective health goals.
  - vii. Military Readiness and Operations Research, addressing challenges experienced by the Combatant Commands, component commands, and units in the field.
- c. Leadership and Leader Development: PDC faculty, staff and students are health professionals, providing sought-after leadership.
- i. Leadership. PDC provides thoughtful, objective leadership and support in shaping policies, processes, and procedures in the DoD, MHS, and broader professional arenas.
  - ii. Leader Development. The schools of the PDC provide an environment that supports development of essential skills and abilities necessary to become outstanding leaders.
9. **Domain Critical Tasks/Objectives/Measures of Performance**: The PDC provides rigorous, standards-based, outcomes-oriented performance assessments across our three mission domains. These assessments provide measures by which the PDC continuously evaluates its programs and, in turn, serve as the basis for future sustainment, improvement and adaptation.

To realize our vision and accomplish our mission, the PDC must meet a number of objectives in each of our mission domains/themes:

- a. **Education**: PDC initiatives are integrated with other USU schools/colleges when possible, and designed to satisfy academic accreditation standards. Faculty development and health professions education are intended to maximize opportunities for faculty both within University programs and through nationally recognized civilian organizations.

**Objective 1**: Ensure Service-affiliated education programs meet or exceed University and Program accreditation requirements.

**Measure 1**: Accreditation Rate (Target: 100% CODA accreditation without reporting requirements for PDC programs).

**Objective 2**: Ensure postgraduate dental programs satisfy Service needs and requirements.

**Measures 2-6**:

**Program Fill Rate** (Target:  $\geq 95\%$  of all affiliated Service training slots)

**Graduation Rate** (Target:  $\geq 95\%$  graduation rate for all PDC programs)

Board Certification Rate (Target:  $\geq 90\%$  written board certification pass rate)

Graduates' Satisfaction with Competency Level (Target:  $\geq 90\%$  of graduates satisfied that their training prepared them for job requirements 1 year following graduation)

Gaining Commander/Supervisor Satisfaction Rate (Target:  $\geq 90\%$  satisfaction with graduates' preparation)

**Initiative 1:** Provide academic expertise to the development of standardized readiness, ethics & professionalism, and interprofessional curricula for the Services.

**b. Research and Scholarship:**

**Objective 1:** Engage in innovative research and scholarship to enhance the body of professional knowledge.

**Measure 1:** Number of student and faculty publications in peer reviewed professional journals (Target:  $\geq 20$  manuscripts accepted for publication on an annual basis)

**Objective 2:** Align PDC research and scholarship efforts with DoD priorities.

**Measure 2:** Percentage of active/ongoing PDC research projects associated with established knowledge and capability gaps (Target:  $\geq 90\%$  of ongoing research projects on an annual basis)

**Measure 3:** Percentage of PDC-funded research projects directly linked to established knowledge and capability gaps (Target: 100% of PDC-funded research projects on an annual basis)

**Objective 3:** Become widely accepted as a resource for critical information, thoughtful analysis, and valuable insight to current and future military and public dental health leaders and practitioners.

**Initiative 1:** Advance research and scholarship efforts in collaboration with the TSCOHS.

**Initiative 2:** Promote integrated research efforts within and across the Services to facilitate meaningful investigations addressing critical topics and needs, including the study of health disparities in the US military.

**c. Leadership and Leader Development**

**Objective 1:** Provide sought-after leadership and service throughout the uniformed services and across the U.S. Government in support of national security.

**Measure 1:** Of military dental officers selected annually for promotion to the rank of O-6, the number of PDC students, alumni, or faculty selected

(Expressed as a fraction and percentage of the total numbers selected:  
Target:  $\geq 30\%$ ).

**Objective 2:** Provide support to the Joint Staff, COCOMs, component commands, and other elements of the uniformed services as indicated.

**Measure 2:** Number of PDC graduates or current/former faculty serving in academic or military leadership positions. Academic leadership positions defined as earning SOM Academic Leadership Certificate, enrolled in or earning Health Professions Education Certificates or Degrees, Chairing USU institutional-level Committees or serving as Program Director, Department Chair/Head, Associate Dean, Dean. Military leadership positions defined as Surgeon General Consultant or Senior Staff Positions to include DHA/SG Staff, Commander, Corps Chief, etc. (Target:  $\geq 25$  academic/leadership positions on an annual basis)

**Objective 3:** Enhance PDC leadership development.

**Initiative 1:** Ensure leadership curriculum is incorporated into all PDC programs and is focused on the development of military unique requirements.

**Initiative 2:** Develop collaborative opportunities within the General Ronald H. Griffith Institute for Military Medical Professionalism.

## **10. Resource Requirements:**

- a. **Personnel:** No imminent need for an increase in personnel is anticipated. PDC must remain responsive to changes in the DoD graduate dental education demand signal.
- b. **Additional Resources:** The PDC is adequately resourced at this time. In the event that authorities and responsibilities for graduate dental education research migrate to USU/PDC, additional resources must be considered.

**PDC Metrics Table**

	<b>Metric</b>	<b>Source</b>	<b>Timing</b>	<b>POC</b>	<b>Document</b>	<b>USU SMOP</b>
<b>Education and Training</b>	<b>Accreditation Rate</b>	<b>Program Directors</b>	<b>Sept</b>	<b>PDC Admin Assistant</b>	<b>CODA Website; PDC Accreditation Schedule</b>	<b>9.a.ii</b>
	<b>Fill Rate</b>	<b>Service Deans</b>	<b>Sept</b>	<b>Executive Dean PDC</b>	<b>Annual Education Announcements; Enrollment Data</b>	<b>9.a.1</b>
	<b>Graduation Rate</b>	<b>Executive Dean</b>	<b>Sept</b>	<b>PDC Research Data Analyst</b>	<b>BoR Annual Report for Nov/Dec</b>	<b>9.a.1</b>
	<b>Board Certification Rate</b>	<b>Program Directors</b>	<b>Sept</b>	<b>Executive Dean PDC</b>	<b>Annual Report from Deans</b>	<b>9.a.iii</b>
	<b>Graduate Competency Satisfaction Rate</b>	<b>PDC Graduates</b>	<b>Sept</b>	<b>PDC Research Data Analyst</b>	<b>1-Yr Post Graduation Survey</b>	<b>9.a.iii</b>
	<b>Supervisor Satisfaction Rate</b>	<b>Graduates' Supervisors</b>	<b>Sept</b>	<b>PDC Research Data Analyst</b>	<b>1-Yr Post Graduation Survey</b>	<b>9.a.iii 9.c.ii</b>
<b>Research and Scholarship</b>	<b>Publications</b>	<b>Program Directors</b>	<b>Sept</b>	<b>PDC Research Data Analyst</b>	<b>Accomplishments Survey</b>	<b>9.b.iv</b>
	<b>GAP Linkage</b>	<b>USUHS Form 3202D</b>	<b>Sept</b>	<b>Associate Dean for Research</b>	<b>Operational Gap Analysis (Research Focus)</b>	<b>9.b.i</b>
	<b>PDC-funded Research - GAP Linkage</b>	<b>Funding Documents - USUHS Form 3202D</b>	<b>Sept</b>	<b>Associate Dean for Research</b>	<b>Operational Gap Analysis (Research Focus)</b>	<b>9.b.i</b>
<b>Leadership and Leader Development</b>	<b>O-6 Promotion</b>	<b>Service Deans or POCs</b>	<b>Sept</b>	<b>Executive Dean</b>	<b>Service Promotion Lists</b>	<b>9.c.i.a</b>
	<b>Leadership Positions</b>	<b>Service Deans</b>	<b>Sept</b>	<b>Executive Dean</b>	<b>PDC Org Chart; Accomplishments Survey</b>	<b>9.a.iv 9.c.i.a</b>

# POSTGRADUATE DENTAL COLLEGE ANNUAL REPORT

2022





## TABLE OF CONTENTS

<b>I.</b>	<b>Executive Summary.....</b>	<b>3</b>
<b>II.</b>	<b>PDC Overview.....</b>	<b>4</b>
<b>III.</b>	<b>Academic Outcomes.....</b>	<b>5</b>
	1. Accreditation Update.....	5
	2. Graduation Rate.....	6
	3. Written Board Certification Rate.....	7
	4. Graduate Competency Satisfaction Rate.....	8
	5. Supervisor Satisfaction Rate.....	9
<b>IV.</b>	<b>Academic Initiatives.....</b>	<b>10</b>
	1. Development of Standardized Readiness Curriculum	
<b>V.</b>	<b>Research Summary.....</b>	<b>11</b>
	1. Board of Regents Patrick D. Sculley Research Award	
<b>VI.</b>	<b>Research Outcomes.....</b>	<b>12</b>
	1. Published Manuscripts.....	12
	2. Research Topic Alignment with DoD Priority Categories...	16
	3. PDC-funded research alignment.....	16
<b>VII.</b>	<b>Research Initiatives.....</b>	<b>17</b>
	1. Expansion of TSCOHS	17
	2. Development of Military Practice-based Research Network	17
<b>VIII.</b>	<b>Leadership &amp; Leader Development Summary.....</b>	<b>18</b>
<b>IX.</b>	<b>Leadership &amp; Leader Development Outcomes.....</b>	<b>22</b>
	1. PDC faculty or alumni promoted to 0-6.....	22
	2. PDC faculty or alumni in DoD Leadership positions.....	22
<b>X.</b>	<b>Leadership &amp; Leader Development Initiatives.....</b>	<b>26</b>
	1. Enhance PDC Leadership Development	

## I Executive Summary



This report is written to summarize the activities, achievements, and new initiatives of the Postgraduate Dental College (PDC) and demonstrate the College's effectiveness in meeting the specific objectives and outcomes outlined in the PDC Strategic Framework for FY2022. Comprising the **largest portfolio (19) of MS degree-level advanced dental education programs in the US**, the PDC is uniquely structured to provide military mission-focused academic, research, leadership, and leader development that directly enhances the DoD's objectives to achieve and maintain medically-ready fighting forces and ready-medical healthcare teams.

The affiliations between the Uniformed Services University and the Army, Navy, and Air Force that established the PDC in 2010 have proven to be very effective and have continued to mature to now include all 26 military Post-Graduate Year-1 (PGY-1) advanced dental education programs. Including these PGY-1 programs under the PDC umbrella has resulted in the ability to conduct focused faculty development opportunities for military dental educators at the earliest possible career opportunity. As this report will highlight, new strategic initiatives were developed in 2022 to leverage the unique structure of the PDC to improve inter-Service collaborations, faculty development opportunities, and clinical research networks to achieve military-unique educational outcomes.

I have structured this report to align with USU's strategic domains of Education, Research, Leadership and Leader Development to demonstrate the high-level accomplishments that the talented PDC residents, faculty, and alumni achieved in FY2022.

Sincerely,

Drew W. Fallis, DDS, MS, MHPE

Col (Ret) USAF DC

Executive Dean and Professor, Postgraduate Dental College

## II PDC Overview

### APDS, NPDS, & AFPDS Locations



- 19 Dental Residencies in **MS in Oral Biology** degree program at 6 military MTFs/DTFs.
  - 7 ADA-recognized dental specialties.
 

Comprehensive Dentistry (2 yr)	Endodontics (2 yr)
Periodontics (3 yr)	Oral & Maxillofacial Pathology (2 yr)
Prosthodontics (3 or 3.5 yr)	Oral Facial Pain (2 or 3 yr)
Orthodontics (2 yr)	
- 490 non-billeted military officers hold PDC faculty appointments.
- 694 MS in Oral Biology degrees awarded since PDC inception in 2010.
- 26 Dental PGY-1 programs affiliated with PDC at 24 military MTFs/DTFs.
  - On average, 165 residents graduate from these PGY-1 programs annually.

### III Academic Outcomes

#### 1. Accreditation Update

Since 2010, all 19 advanced dental education programs within the MS in Oral Biology degree program have undergone successful accreditation site visits from the American Dental Association (ADA) Commission on Dental Accreditation (CODA). These residencies (**100%**) have earned the highest accreditation rating of “Approval, without reporting requirements” for full 7 year terms. Additionally, **100%** (26/26) of the Dental PGY-1 residency programs affiliated with USU have been fully accredited by the ADA CODA. These include both Advanced Education in General Dentistry-1 Yr (AEGD-1) and hospital-based General Practice Residency (GPR) 1-yr programs.

In 2022, ADA CODA completed successful accreditation site visits at:

- a. Schofield Barracks, HI – APDS Comprehensive Dentistry (2-year MS in Oral Biology)
- b. Fort Carson, CO – APDS Advanced Education in General Dentistry (1-year)
- c. Fort Bliss, TX – APDS Advanced Education in General Dentistry (1-year)
- d. Fort Jackson, SC – APDS Advanced Education in General Dentistry (1-year)
- e. Keesler AFB, MS – AFPDS Advanced Education in General Dentistry (1-year)

Note 1: Accreditation Rate is tracked as a strategic outcome measure and defined in the 2023-2027 PDC Strategic Plan (Target: 100%)

Note 2: ADA CODA approved Major Change submissions to transition first-year curricula in support of AFPDS Periodontics and Prosthodontics Programs from University of Texas Health Sciences Center to the AFPDS/USU (final PDC recapture of purchased curriculum from civilian university to USU).



## III Academic Outcomes

### 2. Graduation Rate (2012-2022) – Master of Science in Oral Biology Degrees earned

Graduation Year	# Admitted	# Withdrawals	# Graduates	Graduation %
2012	30	2	28	93
2013	48	5	43	90
2014	58	5	53	91
2015	64	7	57	89
2016	69	3	66	96
2017	73	3	70	96
2018	83	5	78	94
2019	80	6	74	93
2020	82	4	78	95
2021	78	3	75	96
2022	76	4	72	95
2023	76	5*	71*	
2024	83*			
<b>5 yr Average</b>	<b>78</b>	<b>4</b>	<b>75</b>	<b>95</b>
<b>Cumulative</b>	<b>741</b>	<b>47</b>	<b>694</b>	<b>94</b>

Note 1: Graduation Rate is tracked as a strategic outcome measure (Target:  $\geq 95\%$ )

Note 2: Of the 694 graduates of the PDC, only 5 have required additional time for program completion for a 99.3% on-time graduation rate. All 5 delayed graduates completed program requirements and earned their degree within 6 months of the scheduled program completion date (2 – 30 day delay, 1 – 70 day delay, 1 – 4 month delay, 1 – 5 month delay).

\* Numbers in red may change and/or are not included in cumulative totals.



### III Academic Outcomes

#### 3. Written Board Certification Pass-Rate 2018-2022

Program	2018	2019	2020	2021	2022	5 Yr Cumulative
Comp Dentistry	24 of 28	25 of 28	30 of 35	27 of 32	35 of 37	141 of 160
Endodontics	17 of 17	16 of 16	16 of 16	9 of 9	6 of 6	64 of 64
Orthodontics	7 of 7	5 of 5	6 of 6	6 of 6	5 of 5	39 of 39
Orofacial Pain	NR	1 of 1	NR	1 of 1	2 of 2	3 of 3
Oral Pathology	NA	1 of 1	NR	2 of 2	2 of 2	4 of 4
Periodontics	3 of 3	4 of 4	4 of 4	4 of 4	10 of 10	25 of 25
Prosthodontics	6 of 6	9 of 9	4 of 4	12 of 12	14 of 14	45 of 45
Annual Total	57 of 61	61 of 64	60 of 65	61 of 66	74 of 76	313 of 332
Percentage	93%	95%	92%	92%	97%	94%

Note 1: Written Board Certification Rate is tracked as a strategic outcome measure (Target:  $\geq 90\%$ ).

Note 2: Results are reported for the written portion of board examinations taken while students are enrolled in their respective program. Not all program locations require their students to take this examination as an outcome measure.

\* NR indicates that results were not reported by the program.

\*\* NA indicates that there were no scheduled graduates from the program for that year.




## III Academic Outcomes

### 4. Graduate Competency Satisfaction Rate

The PDC utilizes a 1-year post-graduation survey to assess PDC graduates' rate of satisfaction with their residency training experience and their self-perception of competency 1 year following graduation.

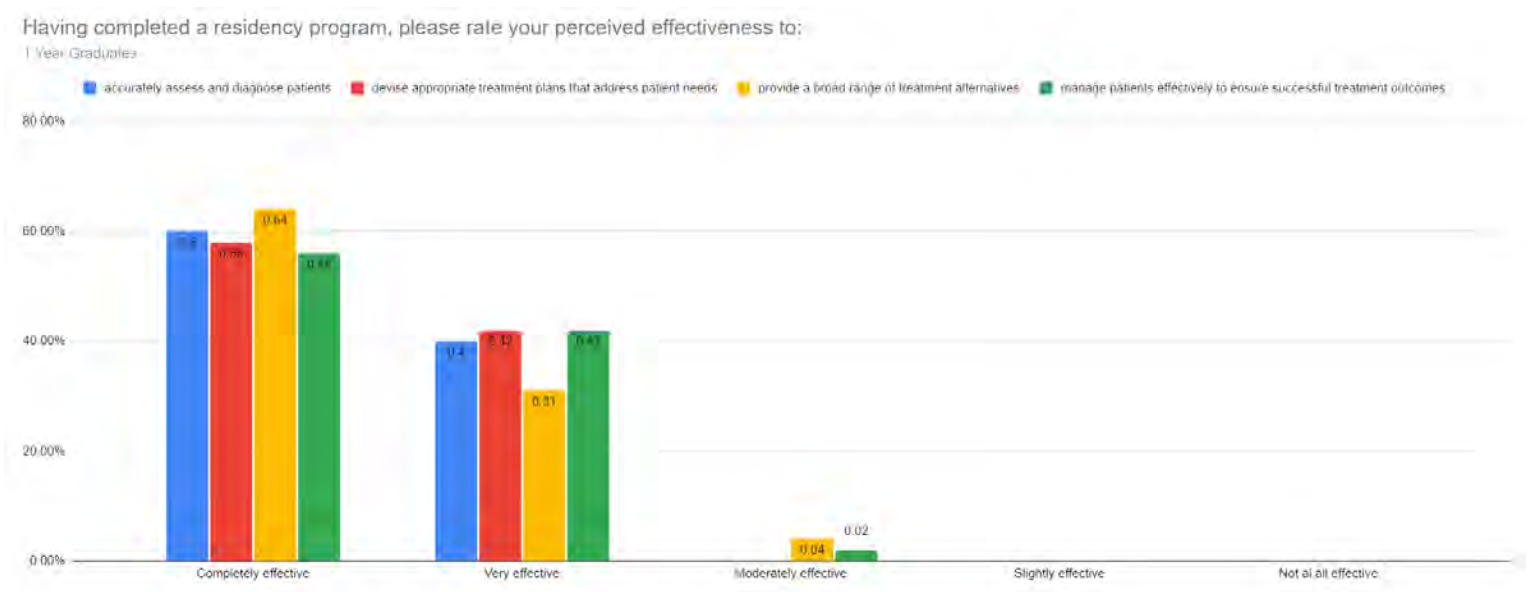


**1 Year PDC Post-graduation Survey 2022**  
**1. Postgraduate Dental College**

This survey was designed to evaluate the impact your dental training program had on your professional development and provide dental leadership with vital information for future program design. It will be completed approximately a year following graduation and focus on key areas validated for your development as a dental professional. To ensure anonymity of respondents, personal identifiers will be removed from survey results before forwarding information to Service leadership (Service Deans and Program Directors). The time required to complete this survey will vary depending upon your answers and the program you attended.

Question 15 on this survey is utilized to target the graduates' competency satisfaction ratings:

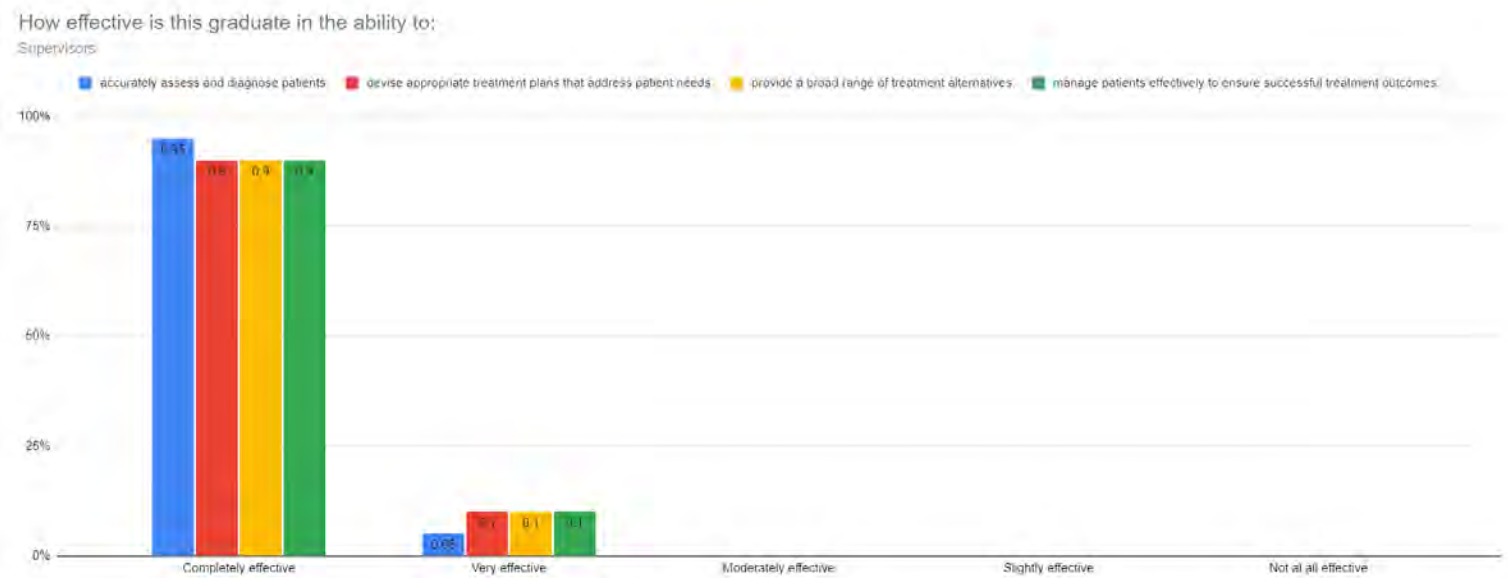


**Note 1:** Graduate competency satisfaction rate is tracked as a strategic outcome measure (Target:  $\geq 90\%$ . Completely or Very Effective).

## III Academic Outcomes

### 5. Supervisor Satisfaction Rate

The PDC utilizes a 1-year post-graduation survey sent to graduates' supervisors that mirrors the questions asked of the graduates. Question 14 on this Supervisor survey aligns with Question 15 on the Graduate survey and is used to quantify supervisors' satisfaction with the competency level of PDC graduates.



Note 1: Supervisor satisfaction rate is tracked as a strategic outcome measure (Target:  $\geq 90\%$ . Completely or Very Effective).



## IV Academic Initiatives

### 1. Standardized Readiness Curriculum

Following consultation with Dental Service and DHA J7 leadership, PDC faculty will initiate the development of a standardized, collaborative, curriculum that can be utilized across all PDC advanced dental education programs. This would include the use of selective online teaching modules and simulation exercises that would augment on-site, face-to-face activities directed toward readiness knowledge and skills development.



MILITARY MEDICINE, Vol. 180, 2015

### Risk of Dental Disease Non-Battle Injuries and Severity of Dental Disease in Deployed U.S. Army Personnel

Barbara E. Wojcik, PhD; Wieslawa Szustal-Fedorowicz, PhD; Rebecca J. Humphrey, MA; LTC Paul Coltrane, DC USAF; Alicia C. Guerrero, MPH; John W. Simcock, DGS, MPH; Adam Fedorowicz, PhD; COL Steven Eisenberg, DC USAF; COL George G. Rogers, DC USAF; COL Philip DeNicolis, DC USAF

**ABSTRACT:** Dental Disease and Non-Battle Injuries (D-DNBI) continue to be a problem among U.S. Army active duty (AD) U.S. Army National Guard (ARNG), and U.S. Army Reserve (USAR) deployed soldiers in Operation Enduring Freedom/Operation New Dawn in Iraq and Afghanistan. The purpose of this study was to determine the prevalence of dental disease and non-battle injuries among deployed soldiers. The 78 diagnoses were classified into dental disease and non-battle injuries. The prevalence of dental disease and non-battle injuries was compared to AD. In Iraq, USAR had a 1% increased risk over AD. Personnel had a higher risk of D-DNBI compared to AD. In Afghanistan, there was a 42% increased risk of high severity D-DNBI for each additional deployment month.

**INTRODUCTION**  
Deploying a healthy and fit-to-fight force is paramount to the success of the U.S. Military. Civil disorders and conditions can cause severe pain and dysfunction, thus interfering with a soldier's ability to eat, communicate, sleep, or concentrate on the task at hand, and can sometimes, ultimately result in dental disease. Non-battle injuries (D-DNBI) are defined as any unanticipated and/or avoidable dental conditions that are not attributable to or caused by combat. The purpose of this study was to determine the prevalence of dental disease and non-battle injuries among deployed soldiers in Iraq and Afghanistan. The purpose of this study was to determine the prevalence of dental disease and non-battle injuries among deployed soldiers in Iraq and Afghanistan. The purpose of this study was to determine the prevalence of dental disease and non-battle injuries among deployed soldiers in Iraq and Afghanistan.

MILITARY MEDICINE, Vol. 180, May 2015



## V Research Summary & Awards Announcement



Research has been an integral component of the Postgraduate Dental College's focus since its inception in 2010. Initially, the Master of Science degree was awarded in two dental disciplines, but the current spectrum has expanded to include some seven content/specialty areas.

The research component of residency training is intended to augment the military's exceptional clinical dentistry platforms by providing improved understanding of common research processes and procedures. The resultant awareness allows graduates to more accurately evaluate the scientific literature, and to incorporate relevant information into clinical practice. This focus benefits both the US military community and the dental profession.

Since 2018, PDC research efforts have been focused upon five major areas deemed consequential to the Department of Defense, and delineated in the PDC's Operational Gap Analysis. The areas are: Health and Human Performance; Prevention and Safety; Pain; Dental Materials, Devices, and Techniques; and Technology and Innovation.

Investigative efforts are highlighted each year within the Tri-Service Dental Research Competition. This competition features the premier projects from Army, Navy, and Air Force Postgraduate Dental Programs, and culminates with the Board of Regents Patrick D. Sculley Research Award.

**The winner of the 2022 Patrick D. Sculley Award was MAJ Joshua A. Akers, US Army for "The effect of prebiotic inulin and probiotic optical density variations on *Lactobacillus reuteri* and *Bifidobacterium animalis* subsp. *Lactis* in an in vitro biofilm model."**

Sincerely,

Rodney D. Phoenix, DDS, MS

Col (Ret) USAF DC

Associate Dean for Dental Research, Postgraduate Dental College

## VI Research Outcomes

### 1. Published Manuscripts

#### **PUBLISHED MANUSCRIPTS (43)**

Note 1: The number of student and faculty publications in peer-reviewed professional journals is used as a strategic outcome measure of Research and Scholarship in alignment with the Postgraduate Dental College Strategic Plan (Target:  $\geq 20$  manuscripts)

Adams KR, Savett DA, Lien W, Raimondi C, Vandewalle KS. **Evaluation of a Novel “Quad” Wavelength Light Curing Unit.** J Clin Exp Dent. 2022;14(10):815-21.

Akers JA, Johnson TM, Wagner JC, Vargas SM, Colamarino AN, Jenzer AC, Lincicum AR, Hawie JB, Lancaster DD. **Dental implants at sites of focal high and mixed density osseous lesions: clinical practice guidelines.** [Online ahead of print 2 February 2022]. <https://doi.org/10.1002/cap.10192>.

Bart SM, Flaherty E, Alpert T, Carlson S, Fasulo L, Earnest R, White EB, Dickens N, Brito AF, Grubaugh ND and Hadler JL. 2021. **Multiple Transmission Chains within COVID-19 Cluster, Connecticut, USA, 2020.** Emerging infectious diseases, 27(10), p.2669.

Berridge J, Patel N, Dimalanta W, Johnson T. **Clinical Advantages of Angled Screw Access Channels for Implant-Supported Restorations in the Esthetic Zone.** Med J (Ft Sam Houston Tex). 2021 Oct-Dec;(PB 8-21-10/11/12):18-21.

Bunting ME, Hawie JB, Lancaster DD, Johnson TM. **Firm swelling of the lips and aphthous-like oral ulcers associated with new-onset allergies.** J Am Dent Assoc. 2022;153(3):274-283.

Carter, C. **Novel Digital Workflow for Nasoalveolar Molding and Postoperative Nasal Stent for Infants With Cleft Lip and Palate.** The Cleft Palate-Craniofacial Journal. 0(0), 2022.

Carter, C. **The Orthodontist's Role in Post-Battlefield Craniomaxillofacial Trauma Reconstruction.** Military Medicine. 0(0), 2022.

Coello RJ, Aita-Holmes C, Dimalanta WG, Wenger K. **An in vitro trial on the effect of arch form on connector size requirements in long span anterior zirconia fixed dental prostheses.** J Prosthodont. 2022 Sep 10. doi: 10.1111/jopr.13601. Online ahead of print.

Coello, R. **An in vitro trial on the effect of arch form on connector size requirements in long span anterior zirconia fixed dental prostheses.** J. Prosthodont. 2022 (Accepted for Publication in August 2022).

Dickens, N. (2022) **Impact and Cost-Effectiveness of Human Papillomavirus Vaccination Policies in the US Uniformed Armed Forces** (Publication No. 29206779) [Doctoral dissertation, Yale University].

## VI Research Outcomes

Dickens, N., Niccolai, N., Justice, A. (2022) **Human Papillomavirus Associated Disease Burden in US Veterans Utilizing Veteran Affairs Medical Care** (Under Review) [Journal of the National Cancer

Dickens, N., Niccolai, L., Justice, A., Paltiel, A.D. (2022) **Comparative Analysis of Cases Averted and Quality Adjusted Life Years Gained from Four Human Papillomavirus Vaccination Strategies Implemented in the US Uniformed Armed Forces** (Under Review) [Vaccine]

Dickens, N., Niccolai, L., Justice, A., Paltiel, A.D. (2022) **Cost-effectiveness Analysis of Human Papillomavirus Vaccination Strategies in the United States Uniformed Armed Forces** (Under Review) [PLOS Medicine]

Ellis AW, Kosaraju A, Ruff RR, Miller CB, Francis JM, Vandewalle KS. **Dental Erosion as an Indicator of Gastroesophageal Reflux Disease**. Gen Dent. 2022 Nov-Dec; 71:46-51

Fallis DW, Irwin S, Cervero R, Durning S. **Frameworks to Guide Faculty Development for Health Professions Education: A Scoping Review**. J Contin Educ Health Prof. 2022 Jul;42(3):180-189..

Fricton J, Chen H, Shaefer J, Mackman J, Okeson J, Ohrbach R, Klasser G, Hawkins J, Hasel R, Heir G. (2022) **New curriculum standards for teaching temporomandibular disorders in dental schools: A commentary**. The Journal of the American Dental Association. 153(5), 395-398.

Gentz FI, Brooks DI, Liacouras PC, Petrich A, Hamlin CM, Ellert DO, Ye L. **Retentive Forces of Removable Partial Denture Clasp Assemblies Made from Polyaryletherketone and Cobalt-Chromium: A Comparative Study** J Prosthodont. 2022 Apr;31(4):299-304

Hawkins J. et al. **AAOP Committee on TMD Predoctoral Education. (2021) Temporomandibular Disorders Core Curriculum for Pre-Doctoral Dental Education: Recommendations from the American Academy of Orofacial Pain**. The Journal of Oral & Facial Pain and Headache. 35(4), 271-277.

Hu E, and Miguel III R. (2021). **Prosthodontic and Endodontic Considerations for Treatment of Military Working Dogs**. Medical Journal (Fort Sam Houston, Tex.) PB 8-21-10/11/12: 27-32.

Jenista JS, Hoopes WL, Knowles JF, Vandewalle KS. **Fracture load of zirconia crowns based on preparation and cement type**. Gen Dent. 2022 Sep-Oct;70(5):22-27.

Johnson TM, Vargas SM, Wagner JC, Lincicum AR, Stancoven BW, Lancaster DD. **The triangle suture for membrane fixation in guided bone regeneration procedures: a report of two cases**. Clin Adv Periodontics. 2022;12:186-193.

## VI Research Outcomes

LT Wei Liu. **Effect of Ultrasonic Vibration on the Presence of Voids in Core Buildup Materials.** (Accepted for publication by General Dentistry Journal.)

Muñoz S, Johnson TM, Dutner JM, Lancaster DD, Lincicum AR, Stancoven BW. **Implant Site Development Requirements in an Advanced Dental Education Program: A Series of 290 Implants.** J Dent Educ. [Online ahead of print May 26, 2022]. <https://doi.org/10.1002/jdd.12952>.

Ochsner AR, Ross RD. **Epithelioid and Spindle Cell Rhabdomyosarcoma of the Oral Mucosa with FUS Rearrangement.** Head Neck Pathol. 2022 Mar 30.

Owen, M, Gray, B, Hack, N, Perez, L, Allard, RJ, Hawkins, J. (2022) **Impact of botulinum toxin injection into the masticatory muscles on mandibular bone: A systematic review.** Journal of Oral Rehabilitation. 49(6), 644-653.

Porr DA, Brooks DI, Liacouras PC, Petrich A, Ellert DO, Ye L. **Time and Accuracy of the CEREC Omnicam Using Two Different Software Programs J Prosthodont.** 2022 Feb;31(2):130-135

Pfaff AS, Bumpers AP, Swenson DT, Ange BL, Wikesjö UME, Johnson TM. **Overlay analysis of cone-beam computed tomography volumes acquired before and after horizontal alveolar ridge augmentation.** Med J 2021;Oct-Dec:40-49. PMID: 34714921.

Seibel P, Johnson T. **Targeted alveolar ridge augmentation for patient-centered dental implant site development.** Med J 2021;Oct-Dec:50-54. PMID: 34714922.

Struthers M, Sierra D, Hoopes W, Arnason S, Vandewalle K. **Accuracy of Intraoral Camera Sleeves Based on Decontamination and Calibration.** J Dent Res 2022.

Vargas AA, Boudreaux DM, Erley KJ, Ange BL, Johnson TM. **Time-and species-dependent bacterial adhesion to titanium over short exposure periods: an in vitro study.** Med J 2021;Oct-Dec:65-73. PMID: 34714925.

Vargas SM, Bunting ME, Hill RB, Duval RJ, Lancaster DD, Johnson TM. **Neodymium-doped yttrium aluminum garnet laser photobiomodulation may improve neurosensory function after surgical injury to cranial nerve V: a report of three consecutive cases.** Med J 2022; Jan-Mar:74-80. PMID: 34940972.

Vargas SM, Dimalanta WG, Johnson TM. **Guided protocol for indirect fabrication of a custom provisional restoration prior to immediate implant surgery in the esthetic zone.** Clin Adv Periodontics. [Online ahead of print June 2022]. <https://doi.org/10.1002/cap.10215>.

Wagner JC, Johnson TM, Gilbert WA. **Should periodontists prescribe postoperative oral corticosteroids to control pain and swelling? A systematic review.** Clin Advances Periodontics 2022;12:134-142.

## VI Research Outcomes

Wirth NM, Henrichs LE, Savett D, Lien W, Crabtree M, Vandewalle KS. **Efficacy of various decontamination methods and sterilization on contaminated and inoculated diamond-coated burs.** Gen Dent. 2022 Jan-Feb;70(1):56-60.

Wu TH, Lian C, Lee S, Pastewait M, Piers C, Liu J, Wang F, Wang L, Chiu CY, Wang W, Jackson C, Chao WL, Shen D, Ko CC. **Two-Stage Mesh Deep Learning for Automated Tooth Segmentation and Landmark Localization on 3D Intraoral Scans.** IEEE Trans Med Imaging. 2022 Jun 6;PP. doi: 10.1109/TMI.2022.3180343. Epub ahead of print. PMID: 35666796.

Wu, TH, Lian C, Piers C, Pastewait M, Wang L, Shen D, Ko CC. (2021). **Machine (Deep) Learning for Orthodontic CAD/CAM Technologies.** In: Ko, CC., Shen, D., Wang, L. (eds) Machine Learning in Dentistry. Springer, Cham. [https://doi.org/10.1007/978-3-030-71881-7\\_10](https://doi.org/10.1007/978-3-030-71881-7_10).

Jenista JS, Hoopes WL, Knowles JF, Vandewalle KS. **Fracture load of zirconia crowns based on preparation and cement type.** Gen Dent. 2022 Sep-Oct;70(5):22-27. PMID: 35993929

Wang X, Pastewait M, Wu TH, Lian C, Tejera B, Lee YT, Lin FC, Wang L, Shen D, Li S, Ko CC. **3D morphometric quantification of maxillae and defects for patients with unilateral cleft palate via deep learning-based CBCT image auto-segmentation.** Orthod Craniofac Res. 2021 Dec;24 Suppl 2(Suppl 2):108-116. doi: 10.1111/ocr.12482. Epub 2021 Mar 25. PMID: 33711187; PMCID: PMC8435046.

Wu TH, Lian C, Lee S, Pastewait M, Piers C, Liu J, Wang F, Wang L, Chiu CY, Wang W, Jackson C, Chao WL, Shen D, Ko CC. **Two-Stage Mesh Deep Learning for Automated Tooth Segmentation and Landmark Localization on 3D Intraoral Scans.** IEEE Trans Med Imaging. 2022 Jun 6;PP. doi: 10.1109/TMI.2022.3180343. Epub ahead of print. PMID: 35666796.

Chen S, Wu TJ, Wu TH, Pastewait M, Zheng A, Wang L, Wang X, Ko CC. (2021). **Machine (Deep) Learning for Characterization of Craniofacial Variations.** In: Ko, CC., Shen, D., Wang, L. (eds) Machine Learning in Dentistry. Springer, Cham. [https://doi.org/10.1007/978-3-030-71881-7\\_8](https://doi.org/10.1007/978-3-030-71881-7_8).

Wu, TH, Lian C, Piers C, Pastewait M, Wang L, Shen D, Ko CC. (2021). **Machine (Deep) Learning for Orthodontic CAD/CAM Technologies.** In: Ko, CC., Shen, D., Wang, L. (eds) Machine Learning in Dentistry. Springer, Cham. [https://doi.org/10.1007/978-3-030-71881-7\\_10](https://doi.org/10.1007/978-3-030-71881-7_10).

Carter CB, Gallardo FF Jr, Colburn HE, Schlieder DW. **Novel Digital Workflow for Nasoalveolar Molding and Postoperative Nasal Stent for Infants With Cleft Lip and Palate.** Cleft Palate Craniofac J. 2022 Apr.

Struthers M, Sierra D, Hoopes W, Arnason S, Vandewalle K. **Accuracy of Intraoral Camera Sleeves Based on Decontamination and Calibration.** J Dent Res 2022.

## VI Research Outcomes

### **2. Alignment of PDC resident research and scholarship with DoD priorities.**

2022 marks the first year in which the PDC achieved 100% alignment of graduate research topics with pre-established knowledge or capability gaps in the DoD or MHS.

Note 1: The percentage of active/ongoing PDC research projects associated with established knowledge and capability gaps is utilized as a strategic outcome measure and tracked on an annual basis. (Target:  $\geq 90\%$ )

### **3. Alignment of PDC-funded research projects with DoD priorities.**

For 2022, the PDC achieved 100% alignment of funded research projects with pre-established knowledge or capability gaps in the DoD or MHS.

Note 1: The percentage of active/ongoing PDC research projects associated with established knowledge and capability gaps is utilized as a strategic outcome measure and tracked on an annual basis. (Target: 100%)

## VII Research Initiatives

### 1. Expand research and scholarship efforts in collaboration with the Tri-Service Center on Oral Health Studies (TSCOHS).

To optimize the expertise within the TSCOHS, especially in the area of Dental Public Health research, an initiative was developed to integrate the newly-developed PDC Long-Term Career Outcome Study into TSCOHS and expand the scope of dental research efforts in support of PDC residents, faculty, and alumni.

### 2. Promote integrated research efforts within and across the Services to facilitate meaningful investigation addressing critical topics and/or needs.

This initiative was developed to leverage the PDC structure, especially the 26 PGY-1 locations (\* in image below), to develop a **Military Practice Based Research Network (MPBRN)** and initiate clinical investigations into a variety of dental public health issues deemed vital to the success of the DoD (sleep apnea diagnosis/treatment, oral & systemic health interactions, etc.).





## VIII Leadership & Leader Development Summary



PDC graduates and staff are military officers who are expected to provide the highest quality dental care to our nation's military both in-garrison and the operational environment. At times, the care and support requirements will extend beyond the traditional oral milieu to include meeting the demands of the wartime Ready Medic. Additionally, as military officers PDC graduates are expected to lead not only in the dental clinical realm, but also to be prepared to lead across the spectrum of military unique opportunities that will avail themselves in the current and future state Department of Defense.

We must assist PDC faculty members in developing skills related to the academic pillars of medicine (inclusive of dentistry). The domains include Teaching, Research and Service and the skills related to the roles of teacher and educator, researcher and scholar, and administrator and leader. Within health professions education, faculty development has been defined as the activities designed to improve the knowledge and skills as teachers, educators, leaders, managers, researchers, and scholars. The PDC recognizes developmental activities as those efforts directed toward growth in all scholarship domains (Research, Teaching, and Service).

With this in mind, it is imperative the USU PDC faculty members are provided with robust and rigorous faculty, leadership and lifelong learner development opportunities. These will enable them to keep pace with changes occurring in higher education and innovations in teaching and learning which are critical to advancing student success in and beyond the classroom. These enabled faculty will provide the launchpad needed to train and develop military dental officer professionals from residents to master clinicians and leaders with rigorous clinical, scientific and leadership educations to deliver the highest quality outcomes to our military members.

Sincerely,

Jay D. Graver, DMD, MS

Col (Ret) USAF DC

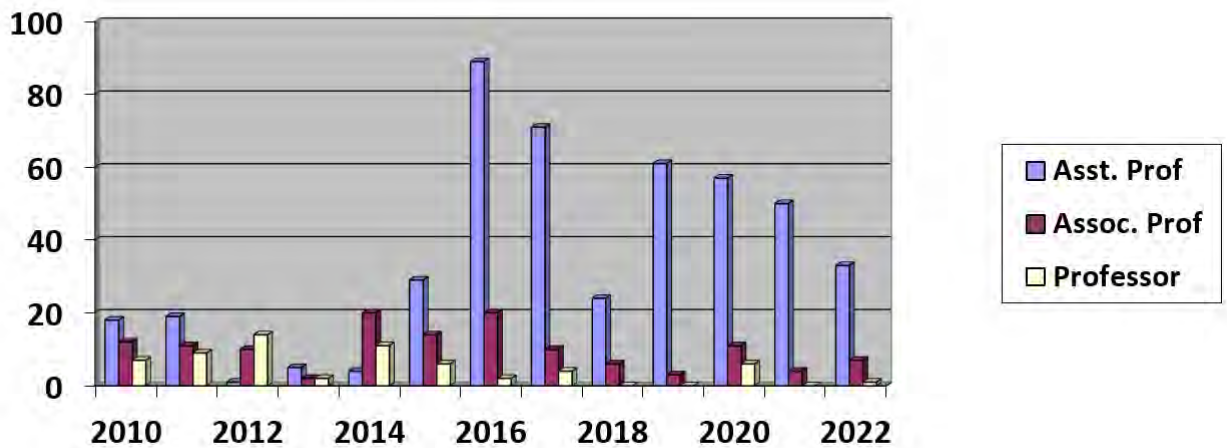
Associate Dean for Faculty Affairs, Postgraduate Dental College

## VIII Leadership & Leader Development Summary

### Faculty Development

Thirty-three new faculty were appointed in FY2022 and eight were promoted (seven to associate professor and one to professor) There are now 501 military dental educators holding USU faculty appointments within the PDC. The graph below illustrates the distribution of these faculty based on faculty rank and highlights the growth in Assistant Professorships that accompanied the addition of military PGY-1 programs (AEGD-1 & GPR) to the PDC.

**PDC Faculty Appointments**



PDC faculty have continued to take advantage of faculty development opportunities available via the School of Medicine (SOM) Faculty Development Certificate Program, the USU Center for Health Professions Education (CHPE) certificate and degree programs, and PDC-sponsored developmental opportunities through the American Dental Education Association (ADEA) Academy of Academic Leadership Institute for Teaching & Learning (AAL-ITL). During FY2022, 32 PDC faculty earned SOM certificates in either Teaching, Academic Leadership, or Advanced Teaching bringing the total number of SOM certificates earned by PDC Faculty to 104, since the program was re-structured in 2015. During FY 2022, 12 PDC faculty were actively pursuing completion of either a certificate (Introduction to Foundations in Health Professions Education or Foundations in Health Professions Education), Master of Education (MEd-HPE) or Master of Health Professions Education (MHPE) program offered by the USU CHPE. During FY2022, 2 faculty members attended the PDC-sponsored faculty development course along with their civilian dental faculty colleagues at the ADEA AAL-ITL.

## VIII Leadership & Leader Development Summary

### 2022 Academy for Academic Leadership (AAL) Institute for Teaching and Learning (ITL)

Col Brian Stancoven (AFPDS, Associate Professor of Comprehensive Dentistry)  
LTC(P) Adam Lincicum (APDS, Assistant Professor of Periodontics)

### USU School of Medicine Faculty Development Teaching Certificate Recipients

CAPT Richard Adcook (NPDS, Associate Professor of Comprehensive Dentistry)  
CDR Peter Cervenka, (NPDS, Dept of Oral & Maxillofacial Surgery)  
Clayton Cheung (NPDS, Dept of Comprehensive Dentistry)  
Maj Hannah Colburn (AFPDS, Assistant Professor of Prosthodontics)  
LCDR Diana Cole (NPDS, Assistant Professor of Prosthodontics)  
LT Katiana Cruet (NPDS, Dept of Comprehensive Dentistry)  
Lt Col Preston Duffin (AFPDS, Assistant Professor of Orofacial Pain)  
CDR Kristi Erickson (NPDS, Assistant Professor of Comprehensive Dentistry)  
LCDR Gregory Gittleman (NPDS, Dept of Orthodontics)  
LCDR Marina Hernandez-Feldpausch (NPDS, Assistant Professor of Comp Dentistry)  
LCDR Andrew Knofczynski (NPDS, Assistant Professor of Comprehensive Dentistry)  
CAPT Chad Lee (NPDS, Dept of Comprehensive Dentistry)  
Lt Col Allen Pratt (AFPDS, Assistant Professor of Endodontics)  
Lt Col David Schindler (AFPDS, Assistant Professor of Comprehensive Dentistry)  
Maj Sae-Eun Schlottke (AFPDS, Assistant Professor of Prosthodontics)  
Lt Col Jelena Seibold (AFPDS, Assistant Professor of Endodontics)  
Maj Casey Slack (AFPDS, Assistant Professor of Comprehensive Dentistry)  
Maj Kimberly Tong (AFPDS, Assistant Professor of Oral and Maxillofacial Pathology)  
Col Thomas Weber (AFPDS, Assistant Professor of Orofacial Pain)  
LCDR Allison Weinberg (NPDS, Dept of Comprehensive Dentistry)  
Lt Col Saiprasad Zemse (AFPDS, Assistant Professor of Periodontics)

### USU School of Medicine Faculty Development Advanced Teaching Certificate Recipients

Lt Col Nicholas Duvall (AFPDS, Professor of Comprehensive Dentistry)  
Lt Col Emily Ibarra (AFPDS, Assistant Professor of Comprehensive Dentistry)  
COL Peter Guevara (APDS, Professor of Comprehensive Dentistry)  
Col David Klingman (AFPDS, Professor of Oral Pathology)

### USU Academic Leadership Course Graduates and Certificate Recipients

CDR Eric Bischoff (NPDS, Dept of Oral & Maxillofacial Surgery)  
LCDR Preston Criddle (NPDS, Assistant Professor of Orofacial Pain)  
CDR Nicholas Hamlin (NPDS, Professor of Comprehensive Dentistry)  
Lt Col Wyeth Hoopes (AFPDS, Associate Professor of Comprehensive Dentistry)  
MAJ Robert Masterson (APDS, Assistant Professor of Comprehensive Dentistry)

## VIII Leadership & Leader Development Summary

Maj Terrell Mitchell (AFPDS, Assistant Professor of Comprehensive Dentistry)  
Lt Col Allen Pratt (AFPDS, Assistant Professor of Endodontics)

### USU Certificate or Degree Track within the Center for Health Professions Education

COL Lisa Yarbrough (APDS, Master in HPE)  
Lt Col Joseph Dutner (APDS, Master in HPE)  
LCDR James Hawkins (NPDS, MEd in HPE)  
Dr. Jeff Kim (NPDS, Master in HPE)  
Col Scott Irwin (AFPDS, Master in HPE)  
LCDR Michael Hoffman (NPDS, Foundations in HPE)  
Maj Evan Roberts (AFPDS, Foundations in HPE)  
LTC Walter Dimalanta (APDS, Foundations in HPE)  
LTC Erik Reifentahl (APDS, MEd in HPE)  
LCDR Rachel Dulebohn (NPDS, Foundations in HPE)  
COL Thomas Johnson (APDS, Foundations in HPE)  
LCDR Caitlin Darcey (NPDS, Master in HPE)



## IX Leadership & Leader Development Outcomes

### 1. PDC students, faculty, or alumni promoted to the military rank of 0-6.

To meet the strategic objective of providing sought-after leadership and service throughout the uniformed services and across the US Government in support of national security, the PDC tracks the promotion of graduates &/or faculty to the rank of 0-6.

Note 1: This metric is expressed as a percentage of the total dental promotions to the rank of 0-6 (Target:  $\geq 30\%$ ).

	Army	Navy	Air Force	Total
2019	9/15	8/18	10/18	27/51 (53%)
2020	5/20	7/16	8/14	20/50 (40%)
2021	5/23	6/16	9/14	20/53 (38%)
2022	10/26	15/24	15/19	40/69 (58%)

### 2. Provide leadership support to the Joint Staff, COCOMS, component commands, and other elements of the uniformed services.

To meet the strategic objective the PDC tracks the number of alumni or faculty serving in academic of leadership positions. Academic leadership positions are defined as earning SOM Academic Leadership Certificate, enrolled in or earning Health Professions Education Certificates or Degrees, Chairing USU institutional-level Committees or serving as Program Director, Department Chair/Head, Associate Dean, Dean. Military leadership positions defined as Surgeon General Consultant or Senior Staff Positions to include DHA/SG Staff, Commander, Corps Chief, etc.

Note 1: This metric is tracked as a strategic outcome measure (Target:  $\geq 25$  academic/leadership positions on an annual basis).

Surgeon General Consultants/Specialty Leaders (47)

#### USAF

Col Erin Speier (AFPDS, Assistant Professor) – Chief Consultant  
 Col Casey Campbell (AFPDS, Adjunct Assistant Professor) – Clinical Dentistry, Periodontics  
 Col Wen Lien (AFPDS, Assistant Professor) – Biomaterials  
 Col Angela Montellano (AFPDS, Assistant Professor) – Endodontics  
 Col Wen Lien (AFPDS, Associate Professor) – Biomaterials  
 Lt Col Mitzi Palazzolo (AFPDS, Associate Professor) – Forensic Dentistry  
 Col James Knowles (AFPDS, Associate Professor) – General Dentistry; Graduate & Continuing Education  
 Lt Col Fred Krey (AFPDS, Associate Professor) – Hospital Dentistry

## IX Leadership & Leader Development Outcomes

Col Ketu Lincoln (AFPDS, Assistant Professor) – Maxillofacial Prosthetics  
 Col David Klingman (AFPDS, Associate Professor) – Oral and Maxillofacial Pathology  
 Col Teresa Reeves (AFPDS, Associate Professor) – Oral and Maxillofacial Radiology  
 Col Carl Labella (AFPDS, Assistant Professor) – Oral and Maxillofacial Surgery  
 Col Richard Townsend (AFPDS, Associate Professor) – Orofacial Pain  
 Col Erin Speier (AFPDS, Assistant Professor) – Orthodontics  
 Col Stephen Gasparovich (AFPDS, Assistant Professor) – Pediatric Dentistry  
 Col Cade Salmon (AFPDS, Assistant Professor) - Prosthodontics  
 Lt Col Scott Irwin (AFPDS, Assistant Professor) – Dental Public Health  
 Dr. Kraig Vandewalle (AFPDS, Professor) – Dental Research  
 Col Michael Webb (AFPDS, Associate Professor) – AEGD1

### USN

CAPT Marc Stokes (NPDS, Associate Professor) – Dental Professional Education  
 CDR Laleh Abdolazadeh (NPDS, Associate Professor) – Prosthodontics  
 CDR Trey Harper (NPDS, Assistant Professor) – Advanced Restorative Digital Dentistry  
 CAPT Lewis Carpenter (NPDS, Assistant Professor) – Maxillofacial Prosthetics and Dental Implants  
 CAPT Richard Adcock (NPDS, Associate Professor) – Operative Dentistry  
 LCDR Andrew Knofczynski (NPDS, Assistant Professor) – Clinical Restorative Digital Dentistry  
 LCDR James Hawkins (NPDS, Assistant Professor) – Orofacial Pain  
 CDR Daniel Honl (NPDS, Assistant Professor) – Oral and Maxillofacial Surgery and ACP Exodontia  
 CAPT Sabina Yun (NPDS, Assistant Professor) – Pediatric Dentistry  
 CDR Barak Wray (NPDS, Assistant Professor) – Laser Dentistry  
 CDR Nicholas Hamlin (NPDS, Professor) – Dental Research  
 CDR Jayson Huber (NPDS, Adj Assistant Professor) – Comprehensive Dentistry & ACP General Dentistry  
 CAPT Nancy Osborne (NPDS, Adjunct Assistant Professor) – Endodontics  
 CAPT Bradley Jones (NPDS, Associate Professor) – Oral & Maxillofacial Pathology & Forensic Odontology  
 CDR Gregory Ringler (NPDS, Assistant Professor) – Oral & Maxillofacial Radiology  
 CAPT Casey Burns (NPDS, Assistant Professor) – Orthodontics  
 CAPT Keith Merchant (NPDS, Assistant Professor) – Periodontics  
 CDR Katherine Cheng (NPDS, Assistant Professor) – PGY1 Programs

### USA

COL David Tucker (APDS, Professor) – Dental Education  
 LTC Christa Goodwin (APDS, Appointment Pending) – Dental Public Health  
 LTC Joe Dutner (APDS Associate Professor) – Endodontics  
 COL Lisa Franklin (APDS, Assistant Professor) – Oral Pathology

## IX Leadership & Leader Development Outcomes

COL Diana Weber (APDS, Assistant Professor) – Orthodontics  
COL Lisa Yarbrough (APDS Associate Professor) – General Dentistry – Comprehensive  
LTC Alex Smith (APDS Assistant Professor) – Orofacial Pain  
COL Thomas Stark (APDS Associate Professor) – Pediatric Dentistry  
COL Thomas Johnson (APDS Associate Professor) – Periodontics  
LTC Stephen Cherrington (APDS Assistant Professor) – Prosthodontics

### Command Assignments

COL Peter Guevara (APDS, Associate Professor) – Commander, USA Dental Health Activity  
Fort Carson  
Col Stephen Gasparovich (AFPDS, Assistant Professor) – 59 Dental Training Squadron  
Commander  
Lt Col Michael Silverman (AFPDS, Assistant Professor) – 59 Dental Support Squadron  
Commander  
Col Brian Penton (AFPDS, Assistant Professor) – 59 Dental Squadron Commander  
COL Diana Weber (APDS, Assistant Professor) – Commander, USA Dental Health Activity Fort  
Gordon  
LTC(P) Adam Lincicum (APDS, Assistant Professor) – OIC, Tingay Dental Clinic, Fort Gordon

### USU Committee Service

COL Lisa Yarbrough (APDS Associate Professor): Faculty Senator,  
Member, USU Faculty Assembly,  
Past Chair, Faculty Senate Diversity and Inclusion *Ad hoc* Committee.

COL Pete Guevara (APDS, Associate Professor), USU Faculty Senator  
Member, USU Faculty Assembly,  
Member, Nominations & Elections Committee,  
Member, Diversity, Equity, and Inclusion Committee.  
Member, USU PDC Faculty Development Committee

Lt Col Angela Synatzske, USU Faculty Senator  
Member, USU Faculty Assembly,  
Member, Education Committee

Dr. Jeffrey J. Kim, USUHS Faculty Senator,  
Member, USU Faculty Assembly,  
Member, 1100 Committee  
Member, Education Committees

LCDR James Hawkins, USU Faculty Senator  
Member, USU Faculty Assembly,  
Member 1100 Committee

## IX Leadership & Leader Development Outcomes

CAPT Susan Hinman, Member USU HARMC (Human Anatomical Review Committee).

LCDR Matthew Simon USUHS Presidential Search Committee

LTC Thomas Johnson (APDS, Professor of Periodontics) Chair, PDC Committee on Appointments and Promotions; Member, PDC 1100D Committee.

CAPT Sean Meehan (NPDS Professor of Oral Medicine): Member, PDC Committee on Appointments & Promotions.


Lt Col Nicholas Duvall (AFPDS, Professor of Comprehensive Dentistry): Member, PDC Committee on Appointments and Promotions.

LTC Joseph Dutner (APDS, Associate Professor of Endodontics): Member, PDC Curriculum Committee.

Col James Knowles (Dean AFPDS, Associate Professor of Comprehensive Dentistry): Member, PDC Curriculum Committee.



## X Leadership & Leader Development Initiatives

 WELCOME

Welcome

Scholarship &  
Academic Planning

Ethics &amp; Professionalism



Copyright &amp; Fair Use

Optimizing your  
Learning EnvironmentDeveloping PowerPoint  
& Presentation SkillsDesigning Instruction for  
Success in Canvas Orientation

Wrapping Up this Course

### 1. Enhance PDC leadership development

This initiative was established to develop standardized leadership curriculum for all PDC residency programs that is focused on the development of military-unique requirements.

To better support the professional academic leadership development of PDC educators, the Dental Faculty Development Series of online courses is currently under development in alignment with certificate and degree requirements currently offered through the USU Center for Health Professions Education (CHPE).

**DFD- 1**, Faculty Orientation & Introduction to Graduate Teaching was released in Dec 2022, and includes five key competency areas for teaching at the graduate level.

**DFD-2**, Foundations in Health Professions Education Certificate, is planned for release in 2023 and is designed to incorporate dental-focused content that aligns with the existing certificate program in the CHPE.

# Postgraduate Dental College (PDC)

**Dr. Drew Fallis**  
Executive Dean, Postgraduate Dental College  
JBSA Fort Sam Houston, TX

Stephen Huntington  
Administrative Officer  
JBSA Fort Sam Houston, TX



**PDC**  
Dr. Jay Graver  
Associate Dean for Faculty Affairs  
Fort Sam Houston, TX

**PDC**  
Dr. Rodney Phoenix  
Associate Dean for Dental Research  
Fort Sam Houston, TX

**TSCOHS**  
LTC Christa E Goodwin, Director  
Tri Service Center for Oral Health Studies  
Fort Sam Houston, TX

**PDC**  
Luis Lopez  
Research Data Analyst II  
Fort Sam Houston, TX

**ARD**  
COL David Tucker  
Dean, Army Postgraduate Dental School  
JBSA Fort Sam Houston, TX

**NVD**  
CAPT Steven Stokes  
Dean, Naval Postgraduate Dental School  
Bethesda, MD

**AFD**  
Col James Knowles  
Dean, Air Force Postgraduate Dental School  
JBSA Lackland, TX

COL Thomas Johnson  
Periodontics Residency Program  
Fort Gordon, GA

COL Jennifer Sabol  
Prosthodontics Residency Program  
Fort Gordon, GA

LTC Erik Reifentahl  
Comprehensive Dentistry Program  
Fort Bragg, NC

LTC Steven Delgado  
Endodontics Program  
Fort Bragg, NC

LTC(P) Matthew Phillips  
Endodontics Residency Program  
Fort Gordon, CA

COL Charles Lambert  
Comprehensive Dentistry Program  
Schofield Barracks, HI

MAJ Robert Masterson  
Comprehensive Dentistry Program  
Fort Hood, TX

CAPT Jayson Huber  
Comprehensive Dentistry Program  
Bethesda, MD

LCDR Preston Criddle  
Orofacial Pain Program  
Bethesda, MD

CAPT Susan Hinman  
Endodontics Program  
Bethesda, MD

LT Quinn Robbins  
Oral & Maxillofacial Pathology Program  
Bethesda, MD

CDR Caitlin Darcey  
Periodontics Program  
Bethesda, MD

CDR Stacy Yu  
Prosthodontics Program  
Bethesda, MD

Col Amar Kosaraju  
Comprehensive Dentistry Program  
JBSA Lackland, TX

Lt Col Aaron Harding  
Prosthodontics Residency Program  
JBSA Lackland, TX

Lt Col Angela Synatzske  
Periodontics Residency Program  
JBSA Lackland, TX

Capt William Anderson  
Tri-Service Residency Program  
JBSA Lackland, TX

Lt Col Jelena Seibold  
Endodontics Residency Program  
JBSA Lackland, TX

# AEGD1 & GPR Certificate Directors

