

INFORMATION

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This is a fillable, printable & savable .pdf. Utilize these formatted forms. If you have difficulty utilizing this document, you may need to update your .pdf reader. If necessary, you may print-out the empty forms and submit them neatly completed. Three blank Applicant Critique forms are attached to be printed out and shared with your three faculty reviewers.

Note that the letter of reference from one of your Deans and your curriculum vitae are not among the forms in this .pdf.

Read this packet thoroughly and be mindful of our application requirements and deadlines.

If any questions, contact QMC GPR Director of Resident Education Tina N. Tom, DDS, MBA at ttom@queens.org





The Queen's Medical Center, then known as The Queen's Hospital, was founded in 1859 by Queen Emma and Alexander Liholiho (King Kamehameha IV), grandson of Kamehameha-the-Great. "Queen's", located in downtown Honolulu, is a private, non-profit, acute medical care facility licensed to operate with 505 acute care beds and 28 sub-acute beds. The Medical Center has more than 3,000 employees, over 1,200 physicians on staff and is the 13th largest corporation in Hawai'i. As the leading medical referral center in the Pacific Basin, Queen's offers a comprehensive range of primary and specialized care services, is accredited by the Joint Commission (JC), is the designated Trauma Center of the State of Hawai'i and participates in residency training approved by the Accreditation Council for Graduate Medical Education and American Dental Association Commission on Dental Accreditation (CODA), with Residency Programs in Internal Medicine, General and Orthopedic Surgery, Psychiatry, Pathology, Obstetrics & Gynecology and General Dentistry.

What is a General Practice Residency (GPR) Program? ¹

As defined by the American Dental Association Commission on Dental Accreditation (CODA):

"The General Practice Residency (GPR) program is designed for advanced clinical and didactic training in general dentistry with intensive hospital experience at the postdoctoral level.

GPR programs provide instruction and experience in the delivery of care to a wide range of ambulatory and hospitalized patients.

This training and exposure prepares dentists to obtain privileges at local hospitals once in private practice.

Most GPR programs are sponsored by either a hospital or a hospital affiliated institution such as a dental school.

GPR programs can be one or two years in length, the majority being one year.

GPR residents rotate through a variety of services including general medicine, general surgery and anesthesiology.

Each program also includes advanced training and clinical experience in preventive dentistry, periodontics, restorative dentistry, endodontics and oral surgery. Training in orthodontics and pediatric dentistry is desirable but not mandatory for GPR programs.

The majority of the resident's experience is gained in the direct delivery of oral health care to ambulatory patients. The remaining time may be spent in the operating room involved with inpatient services, as well as the emergency room. Time is also devoted to non-dental services, such as lectures, conferences, and seminars."

There are 188 CODA accredited GPR programs, by contrast with 84 Advances Education in General Dentistry (AEGD) programs. The majority of GPR programs (67 percent) are not affiliated with dental schools and are hospital-based.

Queen's Program Description

Established in 1960 as a dental internship, The Queen's Medical Center General Practice Residency (GPR) Program has a long history. "Queen's" is the only American Dental Association Commission on Dental Accreditation accredited GPR program in the State of Hawai'i and is projected for re-accreditation in 2018.²

The **one year, three resident program** runs from July 1 through June 30 with resident selection taking place the preceding Fall (Oct-Nov).

Answers to our 3 most common FAQs:

1. QMC GPR does not provide 'certification' in IV sedation. On anesthesia rotation, residents perform dozens of IV starts, intubations and general anesthesia inductions and completions. However, IV anesthesia 'certification' is outside of GPR standards and not offered at QMC.

2. Our program strengths lie in the areas of oral surgery, oral pathology, oral medicine, special patient care and hospital dentistry and multi-disciplinary care.

3. Dental implant experience is a growing component of our program. Implants, crowns and implant retained dentures are priced to make them affordable and accessible. Our program is equipped for both implant placement and restoration.

The Director of the Resident Education is supported in the clinical training of our residents by a cadre of

¹ American Dental Association - Program Options and Descriptions
<http://www.ada.org/6429.aspx#gpr> February, 2014

² **Accreditation Standards for Advanced Education Programs in General Practice Residency**, are accessible from the American Dental Association Commission on Dental Accreditation.

volunteer, private practice general dentists and dental specialists who provide clinical mentoring and supervision, didactic instruction, treatment planning consultation, after-hours emergency oversight and training in hospital dentistry and special patient care. Augmenting the dentists in the broad healthcare education of our residents are physicians and assorted other medical staff member who provide clinical training; assisting in assuring that our GPR residents develop a practical multi- and inter-disciplinary perspective on patient management and health care delivery.

The patient pool at Queen's is diverse in every regard, including all ages among Hawai'i's unique ethnically, culturally and socially diverse population mix, healthy and medically complex patients. Including patients undergoing cancer therapy, solid organ transplant and cardiac care, patients with mental, physical and/or developmental disabilities, patients with significant oro-facial trauma and pathology, the uninsured and persons covered by Medicaid and private dental plans.

Hawai'i does not have a dental school and there are no other dental post-graduate programs in Hawai'i competing with The Queen's Medical Center for complex patients. As a result, the Queen's Dental Clinic and GPR program experience a high volume of clinically diverse and complex patients which challenge the knowledge and skills of our Residents on a daily basis.

Approximately **75 percent of a Queen's dental resident's time is spent in the Medical Center's out-patient Dental Clinic** practicing all phases of comprehensive dentistry. As a hospital-based GPR, residents assume far greater responsibility for the management and care of clinic patients than experienced in dental school. This is an important aspect of the clinical training and experience provided and serves to facilitate the transition of our residents to independent general practice and specialty residency programs. Residents manage their own case loads and perform all facets of comprehensive general dentistry, with the support of our program faculty, dental assistants, dental hygienist and business office personnel.

The remaining **25 percent of a Resident's time is spent in structured rotations, didactic training, performing in-house consultation** in support of staff and surgical services throughout the Medical

Center, responding to cases admitted to the Emergency Department and performing operating room based treatment services.

Medical Center **rotations include internal medicine and medical risk assessment, anesthesiology, pathology, head & neck oncology, radiation oncology and emergency medicine.**

Practical guidance and experience in practice management is provided as an outcome of discussions with program dental faculty, interactions with staff and through experience gained utilizing the dental clinic's electronic dental records and billing system.

Our out-patient Dental Clinic includes four complete operatories, all digital radiography, a small dental laboratory and each resident is based at their own desk and computer workstation. Residents also have access to all other Medical Center resources, including all forms of digital imaging, diagnostic laboratory services and the Hawai'i Medical Library.

(Out-patient) **Dental Clinic hours are from 7:30 a.m. to 4:00 p.m., Monday through Friday** with seminars often occurring after clinic hours.

Dental residents are required to assume after-hours emergency call on a week-long rotating basis. With three dental residents, that translates to residents being on 24/7 call every third week. Residents on-call are available by phone and prepared to present to the Medical Center when called upon for consultation, technical assistance and clinical intervention working in collaboration with attending dentists and Emergency Department personnel. Generally after hours calls are limited to acute facial trauma and the management of significant infections.

The **Queen's GPR program is independent and does not participate in the Post-doctoral Dental Matching Program.** Annually, applications are accepted from July 1st through October 15th. Resident selection occurs in mid-November and selected candidates are signed to contracts by the end of December.

Residents receive a **salary and benefit package consistent with first year Queen's medical residents;** including a salary of approximately \$57,000, 10 paid calendar days of vacation, 10 paid holidays,

professional liability coverage, sick leave and a comprehensive health plan package.

By program start, **dental residents must have passed Parts I and II of Dental National Board Examination, graduated from a CODA accredited dental school, be eligible for a Hawai`i dental license (either permanent or temporary)³, have passed a pre-employment background check and physical examination** and be present by July 1.

The GPR program meets blood borne pathogens and infection control guidelines and standards for patient and health care staff safety. Further information regarding QMC policies and procedures associated with infection control, workplace and patient safety are available to prospective residency program applicants upon request from Tina N. Tom, DDS, MBA at ttom@queens.org⁴

Application Process

The General Practice Residency Program at The Queen's Medical Center provides highly motivated dental school graduates a tremendous opportunity for invaluable training and experience in all aspects of oral medicine and dental surgery, with a unique opportunity to develop a wide variety of highly specialized special patient care, clinical and patient management skills. If this is what you seek, The Queen's Medical Center GPR may be for you.

All application materials from prospective candidates must be received no later than October 15th in order to be considered. Incomplete application packets will not be reviewed for consideration for selection.

What do we weigh in reviewing your application? Graduation from an ADA accredited dental school, dental school transcripts (including class standing and grade point average, when available), personal statements, dean and faculty statements of recommendations and your extra-curricular activities.

If selected for interview, out of consideration of candidate expense associated with travel and

valuable time away from dental school, all **interviews are arranged and conducted via SKYPE**. While not required, a site visit to The Queen's Medical Center is recommended sometime prior to October in order to tour our facilities and visit with the Director of Resident Education and current residents.

For more information, Google us at 'Hawaii Queen's Dental Residency' or contact our program director.

³ For Hawai`i dental licensing information, go to:
<http://hawaii.gov/dcca/pvl/boards/dentist/>

⁴ Citation and notice offered as required by CODA Standard 5.5

Overview

The goal of the curriculum phase of the General Practice Residency at The Queen's Medical Center is to provide a learning experience for the Residents which facilitates both their training and development and maximizes the efficiency and productivity of the Medical Center's dental service.

The Queen's Medical Center provides an opportunity for Dental Residents to:

- *Gain and develop depth in knowledge, clinical skills and experience;*
- *Experience and manage medical and dental conditions not common to the more basic dental school environment;*
- *Expand their understanding of the links between oral and systemic health and disorder;*
- *Participate directly in the care of both in- and out-patients in the multidisciplinary clinical environment of a major medical and trauma center; and*
- *Develop clinical and patient management insight and skills necessary in working with patients with special health care needs, including persons who are medically fragile, otherwise medically compromised or developmentally disabled.*

Resident Proficiency Goals

At The Queen's Medical Center, we're fortunate that annually we attract among the highest qualified GPR applicants in the nation and that our Residents join us prepared to take on the challenges of a program which serves as a primary resource for trauma and infection management, oral medicine, oral pathology and special patient care services. New Residents are expected to have little experience at the beginning of their program year, but are expected to possess basic skills, (book) knowledge and fledgling professional values. This level of performance is expected to allow the New Residents to demonstrate basic patient and clinical time management skills; with some degree of efficiency and accuracy. We also presume that incoming Residents have an awareness of the acceptable range of professional conduct and an inherent desire for continuous improvement. With this in mind, the QMC GPR focuses not on competency, but on the ultimate goal of proficiency.

Competent	proper or rightly pertinent; having requisite or adequate ability; having the capacity to function or develop in a particular way
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Proficient	<i>well advanced in an art, occupation, or branch of knowledge and skill</i>
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Merriam-Webster Dictionary

Competency does not necessarily translate to proficiency. A competency educational model breaks down to three key components - knowledge, skills and attitudes. Our curriculum, spaced and scheduled throughout the year, is designed to build upon the groundwork laid through the dental school experience and progressive experience while at QMC. The ultimate goal of the QMC program is to afford the opportunity for a broad, minimally compartmentalized, clinical hands-on experience through which the Resident gains *knowledge* and *skills* (clinical, professional and personal), confidence and a deep perspective on multidisciplinary health care, oral medicine, medicine and dentistry within a continuum of health care systems and patient management schemes.

Utilizing competency as the base, we chose to focus on our Residents developing *proficiency*; which is both a measure of performance and a set of observable behaviors that define what a proficient Dental Resident (and dentist) should work to achieve. Proficiency is the out-growth and goal of basic competency. Proficiency results from translating knowledge, skills and attitude into action and consistently high performance.

During the course of the residency year, QMC Dental Residents are evaluated quarterly by a panel of not less than five attending faculty representing both general dentists and dental specialists plus the QMC Director of Resident Education. Residents are rated on a relative scale of 1 to 5 (low to high) on their path to “proficiency”. The proficiencies utilized for performance evaluation are representative and do not necessarily represent limits of program focus and activities. They are:

Inter-personal Attributes/Proficiencies

1. *Is open minded and receptive to guidance and constructive criticism.*
2. *Communicates clearly and effectively with patients and patient care givers.*
3. *Functions well under pressure and adaptable to new situations.*
4. *Overall demeanor instills confidence among his patients.*
5. *Exhibits the skills and sensitivity necessary to work in a team environment as well as independently.*

General Health Care Delivery

6. *Utilizes clinical time efficiently and productively.*
7. *Exercises appropriate universal infection control precautions and occupational safety procedures in the practice of dentistry.*
8. *Understands and functions as a part of an integrated multi-disciplinary health care team, such as that found in a medical center setting.*
9. *Recognizes limitations and seeks appropriate assistance in the management of dental, medical, psychological and social problems.*
10. *Effectively evaluates scientific literature and other intellectual resources as a basis for making professional decisions.*
11. *Maintains complete, clear and timely patient records, including treatment plans and clinical / progress notes.*
12. *Consistently considers the outcomes of patient treatment and utilizes the information to continuously improve outcomes.*

Diagnosis, Treatment and Prevention

13. *Objective Information - Utilizes appropriate assessment tools and techniques when arriving at a differential, provisional and definitive diagnosis for patients with complex needs.*
14. *Subjective Information - Effectively and efficiently obtains and interprets information shared by patient's, including chief complaint, medical, dental, cultural, social history and applies the information to treatment planning.*
15. *Formulates and applies appropriate disease prevention and control strategies taking into consideration individual patient risk factors.*
16. *Develops and implements appropriate treatment plans for patients that factor in patient's esthetic, functional, medical, psychological and social needs.*
17. *Appropriately modifies treatment plan when indicated, based on therapeutic outcomes, unexpected circumstances and the individual needs of patients.*
18. *Appropriately manages and treats patients with acute and/or chronic dental pain and/or infection.*
19. *Performs initial assessment and manage patients with extra-oral and complex oral-facial emergencies.*
20. *Appropriately utilizes over-the-counter and prescribed pharmaceuticals and pharmacy resources in the treatment of patients.*
21. *Assesses and clinically manages patients at risk for complications associated with cardiac surgery, organ treatment and cancer therapy.*
22. *Plans, collects and processes samples for medical laboratory and/or pathology assessment and diagnosis.*

Restorative

23. *Appropriately plans and efficiently performs quadrant restorative dentistry.*

Prosthodontics

24. *Communicates clearly and concisely with dental laboratories on the design and other specifics of planned fixed and removable prosthetics.*
25. *Understands and applies the concepts and principals of dental implant placement and restoration.*
26. *Understands and applies the concepts and principals of occlusion maintenance and restoration.*

Endodontics

27. *Understands and applies the concepts and principles of endodontic pain, differential diagnosis and pain management.*
28. *Performs moderately complicated endodontic therapy.*

Pediatric Dentistry

29. *Plans and performs appropriate treatment of moderately complicated disease and anomalies among pediatric patients, including therapeutic pulpotomy, stainless steel crowns and other restorations.*
30. *Understands and applies appropriate concepts of anticipatory guidance when treatment planning.*
31. *Understands and applies appropriate pediatric behavior modification and management, including nitrous oxide and passive restraint.*

Periodontics

32. *Diagnoses and treats mild to moderate periodontal disease utilizing surgical and non-surgical procedures.*
33. *Plans and performs moderately complex clinical crown lengthening surgery.*

Oral & Maxillofacial Surgery

34. *Oral & Maxillofacial Surgery*
35. *Plans and performs both surgical and non-surgical tooth extractions.*
36. *Understands and directly assists in the evaluation, treatment planning and treatment of minor and major oro-facial trauma.*

Hospital Dentistry and Protocol

37. *Applies appropriate hospital protocols when treating and otherwise managing patients in a medical center environment.*
38. *Appears comfortable and confident in the role of "hospital dentist".*

Curriculum Plan

Our curriculum plan is based upon a mix for didactic lectures, out-service Medical Center rotations, standardized on-line training associated Medical Center employee and staff training, directed reading associated with subject matter modules.

Clinical Dentistry A series of lectures take place covering all phases of clinical dentistry, including restorative, fixed and removable prosthodontics, periodontics, endodontics, pediatric dentistry, orthodontics, exodontia, trauma and infection management, dental emergency management, oral medicine, oral/head & neck imaging and 'special patient care'.

Site: Dental Clinic and Queen's Conference Center
 Supervisors/Mentors: DRE and attending faculty
 Documentation: Patient charts, clinical competency evaluations, Resident critique of sessions

Same Day Surgery and Main Operating Room

"Same Day Surgery" ~ 40 hours. Patients assigned to Residents are worked up from initial in-take through case completion on general dentistry cases management through the Medical Center's "Same Day Surgery Center". Working with an attending dentist, Residents are responsible for care coordination with primary care givers, all Medical Center documentation, including admission through discharge and the full array of clinical dental services performed.

"Main O.R." ~24 hours. Residents also work in the Medical Center's "Main O.R." on more complex oral surgery cases employing (stricter) sterile protocols and techniques. Repetitions and significant exposure to both provide the opportunity for the development of strong skill sets.

Site: Same Day Surgery Center and other assorted procedure suites
 Supervisors/Mentors: DRE and attending faculty
 Documentation: Patient charts, clinical competency evaluations, Resident critique of sessions

Hospital Call Every third week, 24/7. Hospital call includes both in-house and Emergency Department calls for patient consultants involving both acute and chronic condition management. Dental Residents work in response to calls most often initiate by emergency medicine and oral surgery staff. Hospital Call is posted here, within the Curriculum Plan, given the value derived from diverse and unexpected experiences and repetition in the application of Medical Center clinical and administrative procedures and protocols, inter-disciplinary exchange and physical assessment; in addition to the clinical dental treatment planning and treatment service delivery.

Site: Dental Clinic, Emergency Department, medical specialty units (patient rooms)
 Supervisors/Mentors: DRE and attending faculty
 Documentation: Patient charts, clinical competency evaluations, Resident critique of sessions

Treatment Planning ~ 18 hours. While attending faculty are available for assistance or consult at any time with regard to treatment planning, a block of time is routinely set aside for complex treatment planning. Residents meet monthly with designated mentors to formerly present and discuss treatment planning cases and formulate definitive treatment plans. Treatment planned cases are also often presented at Division Meetings to all attending dentists.

Site: Dental Clinic
 Supervisors/Mentors: DRE and attending faculty
 Documentation: Patient records, Resident critique of activities

On-Line Medical Center Training Modules ~12 hours of standardized on-line training required of all Medical Center clinicians. Including emergency preparedness, work place and patient safety, standards on communications and record keeping and professional ethics.

Site: Resident work stations, remote access throughout the Medical Center and from home
 Supervisors/Mentors: DRE and Dental Clinic Coordinator (Practice Manager)
 Documentation: through electronic logins which document completion and pre- and post- test scoring.

Literature Review Residents are assigned questions by the DRE for quarterly literature review and are challenged with developing a brief paper reflecting findings and key points and recommendations.

Residents also give case presentations, supported by literature research, at semi-monthly meetings of the Division of Dentistry (Department of Surgery). Case presentations are from among problematic or otherwise unique and complex patient or clinical management cases they encounter in the course of the program.

Site: Dental Clinic and Queen's Conference Center
 Supervisors/Mentors: DRE and attending faculty
 Documentation: DRE evaluations and Resident critique of activities

Medicine Grand Rounds ~ 50 hours. Weekly forum session open to all house staff, (private) medical staff members, residents and students

Site: Queen's Conference Center
 Supervisors/Mentors: DRE and attending faculty
 Documentation: DRE evaluations and Resident critique of activities

Out-services Rotations

Internal Medicine 15 hours. Rotation involves a lecture on physical assessment by the Medical Director of the Medical Center's out-patient medical clinic and three half days assigned to the Queen Emma Clinic, working with patients, histories & physicals and physical assessment. This experience is then extended to Resident patients being prepped for planned surgery, particularly those planned for general anesthesia. Residents are responsible for physical and peri-anesthesia assessments

Anesthesia ~80 hours. Rotation involves assignment for work directly with an anesthesiologist on his day-to-day schedule. Dental Residents are trained in peri-anesthesia assessment, IV, intubation, induction, monitoring and recovery technique. As an aside, Residents experience a wide range of clinical surgical situations, including routine, emergency and critical care medicine, general and robotic surgery of all sorts, anesthesia pharmacology and anesthesia telemetry. This experience truly gives our Residents a great perspective on O.R. patient management aside from the surgery component.

Emergency Medicine ~16 hours. The focus of this Rotation is comprehensive (non-dental) emergency medicine. Residents on-call spend in-numerable hours being consulted by Emergency Department (E.D.) staff and responding to E.D. call both during the day and after hours. This rotation provides the opportunity to Resident to experience the broad diversity of activity in a trauma center E.D. Residents gain first hand insight into the operations and dynamics of an E.D. as well as deeper insight into the continuum of care as it applies to the calls and issues they respond to.

Oncology ~8 hours. This past year we entered into a formal collaboration with the Queen's Cancer Center which had been awarded a grant and site designation associated with the National Cancer Institute's NCI Community Cancer Centers Program (NCCCP). We've been working closely with the Queen's Cancer Center providing evaluation, treatment and support clinical services for head and neck cancer patients, and other cancer patients with complications associated with cancer therapy. Starting this year, we're also implementing a scheduled on-site rotations for Dental Residents on scheduled ENT oncology clinic days.

Radiation Oncology ~8 hours. Dental Residents worked closely with the radiation therapy staff at the Medical Center on pre-radiation consultation and treatment, post-radiation support care of patients, including the management of post-radiation oral health complications. Patients are picked up on direct referral to our dental service for screening and radiation clearance and necessary treatment services, radiation oncologists work with us in the dental clinic as needed and Residents spend two half days working with oncologists seeing patients at the Radiation Therapy Center. This piggy backs some days when radiation patient issues are being presented at the monthly Head & Neck Tumor Conference.

Head & Neck Tumor Conference Board ~18 hours. Held monthly and open to select Medical Center staff, Dental Resident attend all meetings of the 'tumor board' and are directly involved in the dental/medical management of many patients presented for complex coordinated treatment planning between medical, surgical and radiation oncology.

Pathology Conference ~18 hours. Held monthly, we are fortunate to be hosted for a dinner conference and review of issues and findings by the Medical Center's Oral Pathologist.

Site: Various out-service sites
 Supervisors/Mentors: DRE, attending faculty and out-service rotation mentors
 Documentation: Mentor evaluations and Resident critique of activities

Directed Reading Modules Reading modules have been established with assigned reading associated with all aspects of the curriculum. Module reading assignments are coordinated with lectures and rotations.

Site: Dental Clinic and Queen's Conference Center
 Supervisors/Mentors: DRE and attending faculty
 Documentation: DRE evaluations and Resident critique of activities

Application Guide

Minimum qualifications for program admission Graduation from a Commission on Dental Accreditation accredited dental school; eligibility for either a permanent or temporary dental license in the State of Hawai'i (which includes, "... proof that the applicant is a United States citizen, a United States national, or an alien authorized to work in the United States"); and availability to start by July 1.

When applying You should have completed or be entering your final year of dental school.

Application period We are independent of the Postdoctoral Dental Matching Program (MATCH) and applications are made directly to The Queen's Medical Center. There is no application fee. Applications may be submitted July 1 thru October 15 (of the year preceding program start) and all supporting documentation must be delivered by close of business October 15th in order to be considered. Application packets may be submitted batched or partial/incomplete applications may be submitted in parts; which will collated on site.

Application review Completed application packets will be reviewed immediately following the October 15th deadline for all materials. Incomplete application packets will not be forwarded for Resident Selection Committee consideration.

Skype interview Upon first review, applicants will be selected for interview. If selected for interview, you can expect to hear from us via email and offered Skype interview dates and times.

Outcomes Resident selections are made shortly after interviews and notification is made via email.

Resident agreements Residency contracts will be signed by November-December preceding the July 1st start date.

Though not required, prospective candidates are encouraged to visit Honolulu and The Queen's Medical Center before applying.

The following (checklist) represents a COMPLETE APPLICATION PACKET

- Completed application form, including a recent head-shot photograph (approx. 2"x2")**;
- Curriculum vitae outlining your educational and employment history**;
- Personal statement addressing your professional goals, expectations of a hospital-based post-graduate general dentistry program and your reasons for applying to participate in our program; format, utilize the writable .pdf form provided or send a typed statement, 1.5 spaced, Times Roman 11 and not more than 1 page**
- Official copies of your dental school transcripts**;
- One letter of recommendation from the Dean (or an Associate Dean) of your dental school, which also references your success on National Boards Part I (and Part II, if completed at time of application)**;
- Three faculty member references utilizing the attached, 2 page Applicant Critique form**;

Questions regarding the GPR Program or requests to schedule a site visit may be directed to Tina N. Tom, DDS, MBA, Director of Resident Education at tom@queens.org

Questions regarding your application and the status of your packet may be directed to Ms. Stacey Teramae at steramae@queens.org or (808) 691-4381

Address all submissions to: Ms. Stacey Teramae
1301 Punchbowl Street
Medical Education Office
Harkness 125
Honolulu, Hawai'i 96813

Application



The Queen's Medical Center
General Practice Residency Program

12
Attach/insert
head shot
photo here

Name

Date of birth

DENTPIN

(Best) Email address

Phone

Alternate email address

Mailing address (street, city, state, zip)

City & State or Country you consider home

U.S. citizen?: Yes No
If No, I am on Student visa a Resident alien Canadian

Dental School

Degree(s)

Projected graduation (m/d/yr)

College

Degree(s)

Graduation (m/yr)

Graduate School

Degree(s)

Graduation (m/yr)

Hobbies, Extracurricular Interests, Association/Society Memberships, Leadership Positions & Honors

All information provided in my application is a true and accurate representation of my history.

Signature

Date



Personal Statement

Addressing your personal and professional goals, expectations of a hospital-based post-graduate general dentistry program and your reasons for applying to participate in our program.

Name: _____



THE QUEEN'S MEDICAL CENTER

Dental General Practice Residency Program

GPR Applicant Critique Form

- This 2 page form is to be used in lieu of faculty letters of recommendation. Duplicate as necessary.
- Three completed critique forms should be included in your application.
- Sign this form with your choice of waiver before distributing the form to selected faculty.

I waive my right of access to this recommendation. _____
Applicant Signature

I do not waive my right of access to this recommendation. _____
Applicant Signature

I. Applicant Information

Applicant's Name: _____

II. Evaluation of Applicant	Exceptional	Excellent	Good	Average	Below Average	Not Observed
1. Academic Dental Knowledge	<input type="checkbox"/>					
2. Clinical Skill & Knowledge	<input type="checkbox"/>					
3. Organization & Common Sense	<input type="checkbox"/>					
4. Ability to Work Independently	<input type="checkbox"/>					
5. Ability to Follow Directions Accurately	<input type="checkbox"/>					
6. Ability to Work with Others	<input type="checkbox"/>					
7. Relationship with Patients	<input type="checkbox"/>					
8. Attitude toward Criticism	<input type="checkbox"/>					
9. Motivation	<input type="checkbox"/>					
10. Reliability & Responsibility	<input type="checkbox"/>					
11. Personal Conduct & Appearance	<input type="checkbox"/>					
12. Emotional Maturity & Responsibility	<input type="checkbox"/>					
13. Observed Moral Character	<input type="checkbox"/>					
14. Communication Ability	<input type="checkbox"/>					
15. Leadership Ability	<input type="checkbox"/>					

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THE QUEEN'S MEDICAL CENTER

Dental General Practice Residency Program

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I waive my right of access to this recommendation. _____
Applicant Signature

I do not waive my right of access to this recommendation. _____
Applicant Signature

I. Applicant Information

Applicant's Name: _____

II. Evaluation of Applicant	Exceptional	Excellent	Good	Average	Below Average	Not Observed
1. Academic Dental Knowledge	<input type="checkbox"/>					
2. Clinical Skill & Knowledge	<input type="checkbox"/>					
3. Organization & Common Sense	<input type="checkbox"/>					
4. Ability to Work Independently	<input type="checkbox"/>					
5. Ability to Follow Directions Accurately	<input type="checkbox"/>					
6. Ability to Work with Others	<input type="checkbox"/>					
7. Relationship with Patients	<input type="checkbox"/>					
8. Attitude toward Criticism	<input type="checkbox"/>					
9. Motivation	<input type="checkbox"/>					
10. Reliability & Responsibility	<input type="checkbox"/>					
11. Personal Conduct & Appearance	<input type="checkbox"/>					
12. Emotional Maturity & Responsibility	<input type="checkbox"/>					
13. Observed Moral Character	<input type="checkbox"/>					
14. Communication Ability	<input type="checkbox"/>					
15. Leadership Ability	<input type="checkbox"/>					

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THE QUEEN'S MEDICAL CENTER

Dental General Practice Residency Program

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I do not waive my right of access to this recommendation. _____
Applicant Signature

I. Applicant Information

Applicant's Name: _____

II. Evaluation of Applicant	Exceptional	Excellent	Good	Average	Below Average	Not Observed
1. Academic Dental Knowledge	<input type="checkbox"/>					
2. Clinical Skill & Knowledge	<input type="checkbox"/>					
3. Organization & Common Sense	<input type="checkbox"/>					
4. Ability to Work Independently	<input type="checkbox"/>					
5. Ability to Follow Directions Accurately	<input type="checkbox"/>					
6. Ability to Work with Others	<input type="checkbox"/>					
7. Relationship with Patients	<input type="checkbox"/>					
8. Attitude toward Criticism	<input type="checkbox"/>					
9. Motivation	<input type="checkbox"/>					
10. Reliability & Responsibility	<input type="checkbox"/>					
11. Personal Conduct & Appearance	<input type="checkbox"/>					
12. Emotional Maturity & Responsibility	<input type="checkbox"/>					
13. Observed Moral Character	<input type="checkbox"/>					
14. Communication Ability	<input type="checkbox"/>					
15. Leadership Ability	<input type="checkbox"/>					

(Continued on next page)

