<table>
<thead>
<tr>
<th>DATE</th>
<th>EVENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aug 22</td>
<td>Last day to register for September Substantive Doctoral Qualifying Exam</td>
</tr>
<tr>
<td>Aug 25</td>
<td>First day of classes (Fall 2009)</td>
</tr>
<tr>
<td>Sep 7</td>
<td>Last day to register or add a course</td>
</tr>
<tr>
<td>Sep 31</td>
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</tr>
<tr>
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</tr>
<tr>
<td>Sep 22 (8:45-3:00)</td>
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</tr>
<tr>
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<td>Doctoral Qualifying Exam - Substantive Components</td>
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<tr>
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<tr>
<td>Oct 20</td>
<td>Registration begins for Spring 2010 term (tentative)</td>
</tr>
<tr>
<td>Oct 22</td>
<td>Fall break</td>
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<tr>
<td>Oct 23</td>
<td>Fall break</td>
</tr>
<tr>
<td>Nov 5</td>
<td>Pre-payment or Financial Aid proof period begins for Spring 2010 registration</td>
</tr>
<tr>
<td>Nov 18</td>
<td>Last day to drop a course</td>
</tr>
<tr>
<td>Nov 20</td>
<td>Final signed copies of masters papers due to Student Services Office by 4:00 pm for December graduation candidates</td>
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<tr>
<td>Nov 23</td>
<td>Final signed copies of dissertations and reports of masters paper due to Graduate School by 4:00 pm for December graduation candidates</td>
</tr>
<tr>
<td>Nov 25</td>
<td>Thanksgiving holiday</td>
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<tr>
<td>Nov 26</td>
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<tr>
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</tr>
<tr>
<td>Jan 15</td>
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</tr>
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<td>Apr 2</td>
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<tr>
<td>Apr 9</td>
<td>Final signed copies of masters papers due to Student Services Office by 12:00 pm for May graduation candidates</td>
</tr>
<tr>
<td>Apr 12</td>
<td>Last day to drop a course</td>
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<td>Apr 12</td>
<td>Final signed copies of dissertations and reports of masters paper due to Graduate School by 4:00 pm for May graduation candidates</td>
</tr>
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<td>Apr 30, May 1, May 3</td>
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<td>May 4</td>
<td>Reading day</td>
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<td>May 5-7</td>
<td>Exams</td>
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  Social
**INTRODUCTION**

Academic Policies provides comprehensive information on policies and requirements for Master's and Doctoral programs in the Department of Epidemiology. It is intended for the use of students and advisors, and is updated annually. Many forms are referenced throughout this document. All forms are available in EPID’s Student Services Office (i.e., Nancy or Carmen’s office!). Some are available on the web at:


Every effort is made to ensure that the information presented herein is accurate and complete. However, students should be aware that errors and omissions do sometimes occur; for this reason, minor changes and/or clarifications may be required at a later date.

If at any time you have questions about these policies, please consult with the EPID Student Services Office. (*“Student Services Office” means Nancy or Carmen’s office*)

Use the EPID website ([www.sph.unc.edu/epid](http://www.sph.unc.edu/epid)) – learn to love it because there’s a wealth of information there. Use navigation links at the right.

There are several other references with which you need to be familiar. They contain important information about UNC policies and procedures. These references include:

- **The Graduate School Handbook**
  You are responsible for adhering to these policies. They are not necessarily re-stated in this document.

- **Directory of Classes**
  Can be found online at [http://regweb.unc.edu/courses/](http://regweb.unc.edu/courses/) and scroll down to “Online Listing of Courses.

- **The Graduate School Theses and Dissertation Guide**
  Available online at [http://gradschool.unc.edu/etdguide/](http://gradschool.unc.edu/etdguide/)

- **Student Central**
  Go to the UNC web site at [http://www.unc.edu/student/](http://www.unc.edu/student/) and click on Student Central. From this site you can register, check grades and billing info, print transcripts, update your address, get access to past qualifying exams, and learn about weekly departmental seminars. Information about student groups such as the Epidemiology Student Organizations (ESO), GPSF, Minority Student Caucus, and Student Union Board can also be found on UNC, SPH and departmental websites.

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**Student Services Office**

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Student Services Specialist  
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2106-C McGavran-Greenberg Hall  
(919) 966-7458  
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FAX: (919) 966-4914
I. **PERSPECTIVE**

The development of an epidemiological perspective is essential to the conceptualization of problems and the application of knowledge. Graduates of the Department of Epidemiology are expected to have an appreciation of the origins and goals of epidemiology as the basic science of public health, and of its methods, capabilities, limitations, and contrasts with related fields. Students should understand basic etiologic and prevention principles which underlie problems in public health. Subjects that help build such an appreciation include the philosophy of science, the history of epidemiology, studies of the role of epidemiology in prevention of disease, evaluation of programs, the ethical aspects of defining research questions and methods, as well as basic biological, social, and physical sciences.

II. **KNOWLEDGE**

Graduates of the Department of Epidemiology are expected to have an understanding of the epidemiology of the leading causes of injury, death and disability. In addition, a general background in health-related sciences and multidisciplinary understanding of specific areas of research are important.

III. **SKILLS**

Graduates of the Department of Epidemiology are expected to acquire diverse skills. Although the depth and breadth of specific skills acquired by different students will vary, the following are all considered to be fundamental:

A. **MEASUREMENT:** Measurement of health behaviors, conditions and exposures in populations.

B. **ANALYSIS:** Sources of error, statistical inference, data analysis and interpretation.

C. **WEIGHING EPIDEMIOLOGIC EVIDENCE:** Critical reading and synthesizing of information. This should include an understanding of mechanisms and techniques in basic biologic and social sciences.

D. **PROPOSAL DEVELOPMENT:** Specification of research hypotheses, study populations, measurement tools, analysis strategies; ethical issues in research involving human subjects.

E. **STUDY DESIGN AND EXECUTION:** Protocol development, subject recruitment, instrumentation, data collection, quality assessment and control.

F. **COMMUNICATION:** Reporting and communicating study results, including presentation of findings in professional and lay public settings.

IV. **PRACTICE OF EPIDEMIOLOGY**

Development of skills for teaching, consultation, writing and review of proposals and manuscripts, participation in professional meetings, and working with public health agencies and community groups. Skills and experience should also be developed in professional ethics, working with multidisciplinary research teams, continuing professional development, and communication with the lay public.
COURSES OFFERED IN THE DEPARTMENT OF EPIDEMIOLOGY

I. METHODS COURSES

EPID 600: Principles of Epidemiology
EPID 700: SAS and Data Management
EPID 705: Introduction to Logic and Probability Logic in Epidemiology
EPID 710: Fundamentals of Epidemiology
EPID 711: Clinical Measurement and Evaluation
EPID 715: Theory and Quantitative Methods in Epidemiology
EPID 718: Epidemiologic Analysis of Binary Data
EPID 719: Readings in Epidemiologic Modeling
EPID 722: Epidemiology Analysis of Time-to-Event Data
EPID 725: Research Planning Workshop
EPID 726: Epidemiologic Research Methods
EPID 730: Readings in Methods for Epidemiology
EPID 733: Clinical Trials in Epidemiology
EPID 801: Data Analysis in Oral Epidemiology
EPID 806: Clinical Research Skills (K30 Program, Spring)

(http://www.med.unc.edu/orfd/career-development-1/k30-clinical-research-curriculum/)

II. SUBSTANTIVE COURSES

EPID 620I: Aging and Health
EPID 735: Cardiovascular Disease Epidemiology
EPID 737: Advanced Cardiovascular Epidemiology
EPID 743: Genetic Epidemiology: Methods and Applications
EPID 745: Molecular Techniques for Public Health Research
EPID 750: Fundamentals of Public Health Surveillance
EPID 751: Emerging and Re-Emerging Infectious Diseases
EPID 752: Introduction to Methods in Infectious Disease Epidemiology
EPID 753: Prevention and Control of Infectious Diseases at the Level of the Community
EPID 754: Mathematical Modeling of Infectious Diseases
EPID 756: Control of Infectious Diseases in Developing Countries
EPID 757: Epidemiology of HIV/AIDS in Developing Countries
EPID 758: Methods and Principles of Applied Infectious Disease Epidemiology
EPID 759: Methods in Field Epidemiology
EPID 765: Methods and Issues in Pharmacoepidemiology
EPID 770: Cancer Epidemiology and Pathogenesis
EPID 771: Cancer Epidemiology Methods
EPID 772: Cancer Prevention and Control (crosslisted as HPAA 765, HBHE 765; HPAA administratively responsible)
EPID 775: Advanced Cancer Epidemiology: Classic and Contemporary Controversies in Cancer Causation
EPID 780: Occupational Epidemiology
EPID 783: Injury as a Public Health Problem (crosslisted as HBHE 725, HBHE administratively responsible)
EPID 785: Environmental Epidemiology
EPID 786: Community-Driven Research for Environmental Justice
EPID 800: Epidemiology of Medical Care
EPID 805: Clinical Epidemiology and Clinical Research Methods (K30 Program, Fall)
(http://www.med.unc.edu/orfd/career-development-1/k30-clinical-research-curriculum/)
EPID 810: Physical Activity Epidemiology and Public Health (crosslisted as NUTR 810, EPID administratively responsible)
EPID 813: Nutritional Epidemiology (crosslisted as NUTR 813, NUTR administratively responsible)
EPID 814: Obesity Epidemiology (crosslisted as NUTR 814, NUTR administratively responsible)
EPID 815: Diet and Cancer (crosslisted as NUTR 815, NUTR administratively responsible)
EPID 818: Analytical Methods in Nutritional Epidemiology (crosslisted as NUTR 818, NUTR administratively responsible)
EPID 825: Social Determinants of Health: Theory, Method & Intervention (crosslisted as HBHE 802, HBHE administratively responsible)
EPID 826: Social Epidemiology: Concepts and Measures
EPID 827: Social Epidemiology: Analysis and Interpretation
EPID 851: Perinatal Epidemiology (crosslisted as MHCH 851, EPID administratively responsible)
EPID 853: Advanced Topics in Perinatal & Pediatric Epidemiology (crosslisted as MHCH 853, EPID administratively responsible)

III. CREDIT SEMINARS

EPID 764: Hospital Epidemiology
EPID 891: Doctoral Seminar
EPID 892: Interdisciplinary Seminar in Health Disparities (crosslisted as MHCH 892, EPID administratively responsible)
EPID 893: Pharmacoepidemiology Seminar
EPID 894: Infectious Disease Seminar
EPID 895: Seminar in Oral Epidemiology
EPID 896: Seminar in Clinical Research
EPID 897: Advanced Seminar in Cardiovascular Research
EPID 898: Global Health Ethics Seminar

IV. TUTORIALS AND RESEARCH SECTION

EPID 690: Section 001 -- Problems in Epidemiology
EPID 883: Teaching Internship in Epidemiology
EPID 900: Epidemiology Practice (Master’s Practicum)
EPID 905L: Epidemiology Laboratory Practice
EPID 910: Research in Epidemiology
EPID 992: Master's Paper
EPID 994: Doctoral Dissertation

* NOTE: New courses in all categories are offered for the first time as sections of EPID 690 (Problems in Epidemiology)

INDEPENDENT STUDY, INDEPENDENT RESEARCH, AND LAB PRACTICE REGISTRATION:

Independent study, independent research, and field training are options available to the advisor and the trainee to introduce individualized and flexible learning opportunities into a student’s training path. The distinctive features that define each of these are listed below:
Independent Study (EPID 690-section 001) is a course organized between faculty and one student (or fewer than five students) with defined learning objectives, an evaluation, and credit hours to meet a student’s training objectives outside/beyond the established courses and seminars. Independent study can include review of the substantive and/or methodologic knowledge base in a particular area, and/or their application. Independent study is not intended to support research hours.

Independent Research (EPID 910) provides a mechanism for training opportunities based on active participation in research with faculty. It is based on defined learning objectives for this activity, their evaluation, and a pre-established number of credit hours. The student’s time is allocated primarily to an active role in research activities as part of a research team, as opposed to a review of the scientific background and/or knowledge base pertinent to the research.

Independent research is a training activity for academic credit. Remuneration as a research assistant for the student’s participation in a research project related to this learning activity is an option, to the degree that the objectives and responsibilities for the independent research and the research assistant activity are specified and do not overlap. Both the learning activity and its objectives, as well as the funding implications, must be discussed explicitly at the outset of this activity and established in writing.

Epidemiology Practice (EPID 900) provides credit for the required Master’s practicum experience. The Master’s practicum provides students with the opportunity to apply their academic training to experientially address master’s competencies in the context of public health research. Students must register under the section that matches their practicum advisor. If that person does not have a section, the student registers for section 001 through the Student Services Office.

Epidemiology Lab Practice (EPID 905L) is any learning activity conducted off-campus, designed to support the student’s training goals. Such activities are either formal training activities listed on the curriculum, or designed specifically for the student with approval by the advisor, specifying learning objectives, number of credit hours, an evaluation, and the student’s responsibilities.

A student’s participation in (either) independent study, independent research, or lab practice requires approval by the supervising faculty and registration with the Student Services Office.
ACADEMIC CALENDARS

Students will frequently need to consult the Academic Calendar to be aware of all pertinent deadlines, holidays, etc. University calendars (including registration deadlines, drop dates, final exam schedules) are available online at http://regweb.oit.unc.edu/calendars.

DEPARTMENTAL COMMUNICATION

Student E-Mail Accounts

Much of the communication between students and the Student Services Office, faculty and other offices/individuals on campus will be through e-mail. Each student is provided with a departmental e-mail account upon enrollment. These e-mail addresses are made available to UNC faculty, staff and other students. Frequently students have other e-mail accounts on campus and elsewhere; however, you should be aware that your UNC account is the one which will be used for communications from faculty, staff and other students.

Students must maintain a departmental alias address of the format “epi dot first four letters of last name immediately followed by first four letters of first name followed by @unc.edu.” [e.g. John Smith, epi.smitjohn@unc.edu; Ann Jones, epi.joneann@unc.edu; Hui Li, epi.lihui@unc.edu]

Communications to the entire list of students will take place via an e-mail listserv. The address for sending messages to this list is: epidstudents@unc.edu. All student accounts have automatically been subscribed to this listserv.

If there is another e-mail account that should be designated as a preferred address for mass mailings, it is possible to unsubscribe from the list using the currently subscribed account and then re-subscribe from the preferred account. (See Appendix I) Alternatively, you may choose to forward your SPH account to the other account.

Since UNC e-mail is the primary mode of communicating information to students, it is imperative that your e-mail be checked regularly. Students are held responsible for information disseminated via email, regardless of time of year.

Listservs (electronic mailing lists)

Several other listservs are available for student use. Within the EPID department, job announcements for research and teaching assistantships are sent to the "epidjobs" listserv. Information on seminars, doctoral defenses, master's presentations, etc. is disseminated via a listserv called "epidsems." “Epidsocial” is used for non-academic announcements. All students are automatically subscribed to epidstudents and epidsems. Details on these listservs are presented in Appendix I.

THE ADVISING PROCESS

Advisor Assignments

When a student is offered admission to the EPID program, an advisor assignment is made based on factors such as mutual interests and faculty advising load. Within the student and faculty population, there is great diversity
in work styles. While in most instances the original assignment will prove to be a satisfactory and fulfilling relationship, there are many reasons why these first matches may not always be the best pairing to meet the needs of the student. For this reason, there may be times when the student and/or the advisor feel that the student's needs can be better served by another advisor. Change is encouraged to facilitate the best possible advising experience.

**Changing Advisors**

Changing advisors is simple. Once the student identifies a new faculty member who is willing to serve as advisor (often after discussing options with several), the student asks the faculty member to sign an Advisor Assignment/Change Form indicating that s/he has agreed to advise the student. A student who is considering a change in advisors is encouraged to discuss the situation with the current advisor. If for any reason the student is not comfortable doing this, s/he should consult someone from the Student Services Office about how to proceed, depending on the specific circumstances. When a change in advisors is made, the student should notify the now-prior advisor as a matter of courtesy. However, if this proves to be a problem, the Student Services Office should be asked to assist.

**Communication**

The advisor/advisee relationship benefits from good communication. Establishing expectations of both the faculty member and the student at the outset of the advisor/advisee relationship is a major component of good communication. Listed below are some suggestions for topics for discussion between advisor and advisee, beginning at the first meeting:

- preferred method of communication (telephone, email, walk-in, sign-up at door, schedule appointment with secretary)
- frequency of meetings
- responsibility for initiation of meetings
- how the advisor will communicate which of his/her suggestions are recommendations and which are requirements
- how much course planning should be done with the advisor (i.e., is it necessary to meet with the advisor prior to registration for courses)
- who will be responsible for ensuring that the student has met all degree requirements
- to what extent the advisor will assist in identifying funding opportunities
- to what extent the advisor will assist in identifying master's paper and/or dissertation topics
- what the advisee's expectations are in terms of faculty involvement in identifying topics and funding opportunities
- what the advisor's expectations are in terms of professional development opportunities (i.e., manuscript review, proposal writing, data analysis, literature reviews, presentations at meetings, etc.)
- how often the student and advisor should meet to assess the student's progress, and in what manner that assessment will be made
- how often the student and advisor should meet to assess the appropriateness of the advisor/advisee match, and in what manner that assessment should be made

**Process Evaluation**

It is recommended that the advisor and advisee regularly assess the advising relationship to evaluate the appropriateness of the match and to identify areas where improvement can be achieved. Students and advisors are encouraged to discuss openly the concerns of either party and to try to negotiate solutions to any problems.
Conflict Resolution

Most differences can be resolved through open communication and should be addressed early on. In the event that the student or faculty member feels that intervention is needed by a third party, s/he is encouraged to first seek the assistance of the Student Services Office in dealing with the problem issue(s). If a mutually satisfactory plan for resolving differences cannot be developed, the student or faculty member may opt to consult the departmental ombudsman for assistance (see description below of "Role of the Departmental Ombudsperson"). Alternatively, either party may choose to seek the guidance of the Chair of the Department. Students as well as faculty should feel free to seek support and assistance, whenever necessary, without fear of negative repercussions.

Role of the Departmental Ombudsperson

A faculty member whose primary appointment is in the Department of Epidemiology is designated to serve in the capacity of an ombudsman for issues involving student-faculty relationships. The role of this ombudsman is to be of assistance to students and faculty of the Department who perceive themselves to be in conflict with one another, and require advice and/or mediation in the resolution of such a conflict. Currently Dr. Gerardo Heiss serves as the department’s ombudsperson.

The ombudsman is available to any student or faculty member, both for consultation and to play an active role in the resolution of a conflict that places either party in a vulnerable position and/or requires mediation. Conflicts arising out of inter-personal or academic matters can be brought to the attention of the ombudsman, if either party feels that the channels for advising and conflict resolution have been exhausted (e.g., they cannot be resolved by consultation with an advisor, by a change in advisor, or in consultation with the Office of Student Services). The role of the ombudsman does not extend to issues related to exams, conflicting time-lines, or any other routine academic matters.

Interactions with the ombudsman constitute confidential information. Initiatives by the ombudsman in response to a problem presented to him/her by a student or faculty member are taken only after consultation with the parties involved.

THE HONOR CODE (honor.unc.edu)

The Instrument of Student Judicial Governance (http://instrument.unc.edu) is the definitive document on student conduct and the judicial system. In an effort to ensure academic integrity, this document stipulates that students must sign a pledge on all written work. The pledge reads “On my honor, I have neither given nor received unauthorized aid on this assignment.” Instructors may allow the option of simply writing on your work “Pledge” and signing your name. When in doubt about instructor expectations regarding team work on projects, crediting the work of others, using previously submitted work, etc., ask the instructor to clarify.

Many violations of the Honor Code occur due to an improper or insufficient understanding of procedures and expectations rather than an attempt to deceive. When in doubt, it is imperative that students consult with instructors or other appropriate resources. Even though ignorance is often the cause, it does not excuse the act of Honor Code infringement.

Areas that are frequently troubling include the following:
• submission of work previously submitted and graded for another course (It is the nature of some courses to build upon work previously submitted. Always check with the instructor before doing so.)
• failure to properly cite own work from previously developed materials. (You must cite yourself if re-using your own writing for another purpose.)
• cultural differences in understanding the Honor Code (Some cultures view the word-for-word copying of another’s work to be not only acceptable, but desirable, even without appropriate source identification. International students in particular may need to seek guidance from campus resources.)
• lack of a clear understanding of plagiarism (What constitutes plagiarism can vary from discipline to discipline. Refer to the Graduate School policy on academic integrity and ethics, found in the Graduate School Handbook at gradschool.unc.edu/students_current.html)

COURSE REGISTRATION

For information about online course listing and registering in classes, please refer to the Office of the Registrar website at http://regweb.oit.unc.edu/. The following section highlights frequently asked questions to the Student Services Office. Details and further information can be found in the Graduate School Handbook.

Dropping Courses

Graduate students may drop courses using the registration system during the first two weeks of classes. After the second week of classes and before the end of the twelfth week of classes, graduate students must obtain a Registration/Drop/Add Form from the EPID Student Services Office (see the University Registrar's Calendar for the Last Day for Graduate Students to drop courses). In most cases, the Student Services Office will sign off as the advisor. Course drops requested after the last day for graduate students to drop courses require approval of the Graduate School.

Important: Students receiving tuition awards must remain in the same tuition credit bracket (0-2.9; 3-5.9; 6-8.9; 9 or more).

Proof of Enrollment/Transcript Requests

For proof of enrollment or transcripts, go to regweb.unc.edu and click in the upper right corner.

Exemption from Required Courses

Exemption from any course requirement is on the basis of equivalent work. A student seeking exemption from, or substitution for, a School of Public Health core requirement must submit for approval the School of Public Health Core Course Exemption Application (http://www.sph.unc.edu/student_affairs/forms.html). To be exempted from a departmental requirement, the student submits a departmental exemption request form to the Student Services Office. The petition must first be signed by the student’s advisor, and should describe clearly the equivalent experience. These forms are online via the departmental website.

Exemptions are not granted for substantive courses. We expect our students to meet the substantive epidemiology course requirements by choosing topical areas, and course levels within a program area, that complement the knowledge base that they bring to the program.
REGISTRATION REQUIREMENTS (from the Graduate School Handbook)

When all residence credit and course requirements have been completed, students using University resources to conduct their master’s research and/or who need to maintain full-time status must register for three credit hours of EPID 992 (Fall/Spring). Students using University resources* to conduct their dissertation research and/or who need to maintain full-time status for other reasons must register for three credit hours of EPID 994 (Fall/Spring). Students not using University resources may either apply for a leave of absence (which “stops the clock” for time to degree) or simply not register (both require readmission to the Graduate School). These forms can be found at http://gradschool.unc.edu/forms.html. Students must be registered for at least 3 hours in order to receive a stipend, and/or qualify for University Graduate Student Health Insurance. This constitutes full-time enrollment (with or without additional courses). Full-time student status must be maintained for loan deferment or student visa status. Refer to the Graduate School Handbook for additional details.

LEAVES OF ABSENCE AND EXTENSIONS

Students may request a leave of absence if they will not be making progress towards their degree for a period of time. A leave of absence "stops the clock" so that the time does not count against your time to degree. When extenuating circumstances warrant, The Graduate School may grant an extension of the degree time limit. The degree time limits are 5 and 8 years for the Master’s and Doctoral programs respectively. Extensions and leaves are not automatic and require both departmental and Graduate School approval. They must be initiated through the Student Service Office. See Graduate School handbook for additional details or consult with Student Services Office.

If a student remains unregistered for five years or longer and wishes to resume graduate study, s/he will need to formally apply for admission (application, application fee, GRE scores, etc.) by the Graduate School designated deadlines.

UNIVERSITY GRADING POLICIES

Grading

The graduate school operates on the HLP system. Students enrolled in courses numbered 400 or above must receive one of the following grades:

Graduate Permanent Grades

H High Pass
P Pass
L Low Pass
F Fail

Special Grading Symbols

F* Fail-Administratively Assigned; equivalent to F
S Satisfactory progress on research courses, thesis, dissertation, and courses taken to fulfill language requirements
NG No grade assigned

Temporary Grades

AB Absent from final examination
IN Work incomplete
Policy on “IN” Grades

‘IN’ or an incomplete grade is given when a student took the final exam but did not complete some other course requirement. An IN will revert to an F* (administratively assigned grade) if the grade is not cleared within one year from the original examination. However, if the grade is changed, the IN grade does not stay on the student’s academic record. The student is responsible for ensuring that the grade change occurs and should correspond with the course department and follow up with faculty accordingly.

DEPARTMENTAL GRADING POLICIES

Policy on “L” Grades

A grade of P is the lowest acceptable grade in core methods courses (EPID 705, EPID 710, EPID 715, EPID 718, and EPID 722). A grade of L in one of these courses requires re-taking the course if the student is to continue in the program. Students are expected to attain a grade of P in EPID 725 also, but a grade of L in this course does not require re-taking it. Instead, consultation with the advisor and the course instructor is required prior to taking EPID 726 (see Implementation, below).

Diagnostics

It is each student’s responsibility to assess his/her performance in courses and the need for remedial action. For this, students are encouraged to seek help from their advisor, course instructors or others, as needed. In addition, a grade of L in an Epidemiology core methods course requires that a meeting among the student, the advisor, the course instructor, and the Student Services Office take place within two weeks. The purpose of the meeting is to ascertain the factors associated with the poor performance and to implement the steps described below. The Student Services Office will notify the student’s advisor of the L grade. The advisor is then responsible for initiating this meeting at the earliest convenience of all involved. A grade of L often reflects the need for an adjustment in workload, study habits, or other activities rather than a lack of aptitude. Many students go on from L grades in core courses to have great success in the remainder of their academic program and future careers.

Implementation

Students who receive a grade of L in a core methods course must re-take the course and receive a minimum of a P, unless exempted as described above and below. The student is expected to retake the course – or to be granted an exemption by the GSC – within one year of taking the core methods course that resulted in an L grade. If this time line is not met the student must ask his/her advisor to present an alternative time line to the GSC. The time line for a student’s Intradepartmental Review is not affected by an L grade.

Conditional advancement to a higher-level course for a student who receives a grade of L in a core methods course

Students who receive a grade of L in a core methods course may advance to the pertinent higher-level methods course in epidemiology (prior to re-taking the course in which they received an L) only if approved by the instructor of the higher-level course and endorsed by the student’s advisor.

Exemption from the requirement to re-take a core methods course

A high performance in the higher-level course (above the 85th percentile) allows the student to submit a request to the GSC to be exempted from having to re-take the lower level course graded as ‘low pass’ (L).
AUDIT POLICY

Students may audit courses at the discretion of the professor. As a general rule, faculty are receptive to auditors provided space is available in the classroom. Recitation (lab) sections are typically not open to auditors. As per the University Registrar’s policies, “Students auditing a course do not write examinations or papers and do not participate in class discussions unless otherwise directed by the course instructor. They do not appear on the instructor’s class roll and may not request grades.”

STATISTICAL COMPUTING AND DATA MANAGEMENT

Competence in statistical computing and data management is a requirement of the program. Statistical computing using SAS is a component of several of the methods courses, and is required for one's own research, as well as for many research assistantships. (Stata is an acceptable substitute for SAS.) Various training resources are available for students without prior experience. Some of these are:

- EPID 700: SAS and Data Management (3 credits)
- BIOS 511: Introduction to Statistical Computing and Data Management (3 credits)
- Non-credit short courses offered by the UNC Odum Institute for Research in Social Sciences (http://www.irss.unc.edu/odum/jsp/content_node.jsp?nodeid=3)

An exemption exam is offered in August for those students not enrolling in EPID 700 or BIOS 511.

Adequacy in statistical computing is assessed as part of the intradepartmental review discussion for doctoral students.

HUMAN SUBJECTS REVIEW

All students – without exception - must complete training in the protection of human research subjects. The website for this training is <www.citiprogram.org/>. Students should select training in either Group 1 or Group 2. Group 3 does not suffice. The “Responsible Conduct of Research” course offered by the General Clinical Research Center during the summer can be taken in lieu of the CITI training. Students may obtain a copy of their training verification online at http://cfx3.research.unc.edu/training_comp/.
COMPETENCIES FOR THE MPH AND MSPH

MPH

The MPH program enrolls students who have a terminal professional degree (such as MD, DDS, DVM) or an academic degree (PhD). The program is designed to add to their existing expertise a knowledge of the concepts and skills of epidemiology, to strengthen their research capabilities, to develop their understanding of public health concepts and the population perspective, and to enable them to be more sophisticated readers of clinical and epidemiological studies. The master’s competencies in the Department of Epidemiology fully meet with core competencies set out by the ASPH Education Committee.

Upon satisfactory completion of the MPH degree program the student will be able to:

1. Apply the core competencies in public health as set forth in the learning objectives for the School of Public Health core curriculum;

2. Discuss the major obstacles and challenges to public health in the nation and the world, contrast the clinical and population perspectives on improving public health, and articulate the role of epidemiology in preserving and improving public health;

3. Explain fundamental epidemiological concepts, such as natural history, prevalence, incidence, relative risk, attributable risk, direct standardization, standardized mortality ratio, cohort, case-control, precision, bias, confounding, and effect modification and recognize these concepts even when they are referred to with different terminology;

4. Discuss basic issues in the definition, classification, and detection of pathologic states as these issues arise in the study of diseases in populations and the problems such issues present for disease surveillance and comparative studies; natural history and spectrum of disease, when is a condition the disease, operational classification, changing definition with greater understanding, limitations on accuracy of cause of death designation, among others;

5. Define, compute, and interpret epidemiological measures of prevalence, incidence, association, and impact;

6. Explain and apply methods of standardization or adjustment for factors such as age or sex, and discuss the advantages and limitations of different methods of standardization;

7. Explain major epidemiological descriptive and analytic study designs, the epidemiological measures that can be estimated from each, and their relative strengths and limitations;

8. Explain major categories of bias, recognize the potential for their occurrence in specific study situations, and propose measures to assess and/or reduce their influence on the measures of major interest;

9. Present the concepts, purpose of and problems in the evaluation of diagnostic tests, and of interpretation in surveillance for acute and chronic diseases and other factors important for public health;

10. Explain the concept of the multifactorial nature of disease and how the observed association between one factor and disease can be affected by the distribution of other independent and non-independent risk indicators, and be able to control for these influences in situations involving multiple risk indicators;
11. Prepare computer files of raw epidemiological data, and analyze, present, summarize, and interpret epidemiological data and parameters presented in tables, figures, and graphs. Analyses may employ statistical tests and confidence intervals based on means, rates, proportions, and ratios for contingency table analyses involving the control of one or two categorical variables or for modeling analyses employing linear or linear logistic regression;

12. Weigh the evidence in favor of and against the likelihood that an association observed in epidemiological studies is causal;

13. Apply the above knowledge in critically reading epidemiological and clinical studies;

14. Write a thesis-equivalent that demonstrates proficiency in critically reading the epidemiological literature, and in analyzing, reporting, and interpreting epidemiological data.

**MSPH**

The MSPH degree is required for students admitted to the PhD program without a prior master’s degree in a relevant area. The program provides them with knowledge of the concepts and skills of epidemiology to serve as a foundation for building competencies to become an independent public health investigator. Like the MPH program, the MSPH program develops the students’ understanding of public health concepts and the population perspective, and enables them to become sophisticated readers of clinical and epidemiological studies. In contrast to the MPH program, the MSPH program assumes that graduates' primary area of expertise will be in the field of epidemiology, rather than in some other profession. The MSPH degree in the field of epidemiology is not considered a terminal degree and is not intended to provide sufficient preparation for assuming leadership in the practice of epidemiology.

Because the content in regard to concepts and skills of epidemiology and public health are the same for the two masters' degrees, competencies for the MSPH and MPH degrees are very similar (and are not repeated here). The only exceptions are criteria #13 and #14 where an allowance is made for the fact that students in the MSPH degree program don’t possess a specific area of professional expertise as in the case of students in the MPH degree program.

**SUMMARY OF DEGREE REQUIREMENTS FOR THE MPH AND MSPH**

For a checklist of master’s milestones, go to <http://www.sph.unc.edu/epid/degree_audit_8227_7417.html>.

**School of Public Health Core Curriculum**

The UNC School of Public Health has established a set of core competency requirements for students enrolling in MPH, MSPH, MHA, and DrPH degree programs. The curriculum requires that all professional public health degree recipients acquire knowledge in five core areas: environmental health, social and behavioral science, biostatistics, epidemiology, and health policy and administration.

**Purpose**

- To insure that all students are knowledgeable in the five basic public health content areas (listed above);
- To help students integrate and apply what they learn to solving important public health problems in an interdisciplinary manner; and
To help students understand the larger public health perspective, including the history, mission, objectives, and ethics of public health, and the relationship of the perspective to the various scientific and professional disciplines within public health.

The Core Curriculum

The core will consist of courses in each of the following five areas:

1. Epidemiology
2. Biostatistics
3. Health Policy and Administration
4. Environmental Health Sciences
5. Social and behavioral sciences

To meet the core competency requirements, students will take approved courses in each of the five areas. Courses that meet the requirement will be approved by both the relevant SPH department and the School's Academic Programs Committee. Each department will maintain a list of approved courses in each of the five areas.

<table>
<thead>
<tr>
<th>CORE AREA</th>
<th>BASIC COURSE REQUIREMENT(S)</th>
<th>APPROVED ALTERNATIVE(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics</td>
<td>BIOS 600</td>
<td>BIOS Any 3 or 4 credit BIOS course above 540</td>
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<tr>
<td></td>
<td></td>
<td>HPM 470 (HPM majors only)</td>
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<tr>
<td></td>
<td></td>
<td>SOWO 510 and 911 (sequence restricted to students enrolled in joint MPH/MSW program)</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>EPID 600 or 710</td>
<td>EPID 711 (for clinicians)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PUBH 760 (for clinicians only)</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>ENVR 600</td>
<td>ENVR 430</td>
</tr>
<tr>
<td>Health Administration</td>
<td>HPM 600</td>
<td>HPM 660, 564 or 754 (564 &amp; 754 are for HPM majors only)</td>
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<tr>
<td></td>
<td></td>
<td>MHCH 701 &amp; 702</td>
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<tr>
<td></td>
<td></td>
<td>NUTR 720, 725 (for NUTR majors)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PUBH 600 (PHLP majors only)</td>
</tr>
<tr>
<td>Social and Behavioral Science</td>
<td>HBHE 600</td>
<td>HBHE 700, 730 and 772 (HBHE majors only)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>MHCH 700, 702 &amp; 723 (MHCH majors only)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>859/860 (MHCH DrPH students only)</td>
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<tr>
<td></td>
<td></td>
<td>SOWO 500, 505, 510, 517, 530, 570 (MSPH/MSW only)</td>
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<td></td>
<td>PHYT 824 (MHCH DPT/MSPH students only)</td>
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<tr>
<td></td>
<td></td>
<td>MHCH 700, 730 and 772 (HBHE majors only)</td>
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<tr>
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<td></td>
<td>NUTR 715</td>
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<tr>
<td></td>
<td></td>
<td>PUBH 750 (for clinicians)</td>
</tr>
</tbody>
</table>
Departmental Minimum Course Requirements for both Master's Degrees:

- EPID 705: Introduction to Logic and Probability Logic in Epidemiology
- EPID 710: Fundamentals of Epidemiology [EPID 711 may be substituted by clinicians]
- *BIOS 600: Principles of Statistical Inference  Or
  BIOS 550: Elements of Probability and Statistical Inference I
  [BIOS 541 may be substituted by those in the K-30 Program]
- BIOS 545: Principles of Experimental Analysis  Or
  BIOS 663: Intermediate Linear Models
  [BIOS 542 may be substituted by those in the K-30 Program]
- EPID 715: Theory and Quantitative Methods in Epidemiology
- EPID 718: Epidemiologic Analysis of Binary Data
- One epidemiology course (minimum) in a substantive research area**
- One of the following:
  ◊ EPID 806: Clinical Research Skills (for those enrolled in the K-30 Program)
  ◊ EPID 733: Clinical Trials in Epidemiology
  ◊ A second substantive EPID course
- Competency in statistical computing and data management; may be satisfied by:
  ◊ EPID 700: SAS and Data Management
  ◊ BIOS 511: Introduction to Statistical Computing and Data Management, or
  ◊ BIOS 541/542
  ◊ a comparable SAS or Stata course on this campus (i.e., through IRSS) or elsewhere, or
  ◊ prior experience using SAS or Stata (exemption exam required)
- EPID 900: Epidemiology Practice (supervised practicum: 4 credit hour minimum)
- EPID 992: Master’s Paper (3 credit hour minimum)

Other Program Requirements

- Completion of a minimum of 42 credit hours
- Comprehensive written examination (offered every January)
- Oral presentation of master's research
- Completion of an acceptable Master's Paper

A sample schedule for the two-year masters and the 18-month MPH program can be found in Appendix II.

**See Appendix IV for courses that serve to satisfy the requirements for a course in a substantive research area.
*See Appendix V for additional information regarding BIOS courses.

CREDIT TRANSFER

Upon approval by the Graduate School, up to 8 of the 42 minimum required hours (20%) may be transferred from another accredited institution, or from this institution for courses taken before admission to the Graduate School, or from a different master's program at this institution.  [Exception: Up to 12 credit hours of SPH core certificate courses may transfer in, with the exception of EPID 600.] Transferred credit will be accepted by the Graduate School only upon recommendation by the student's major curriculum, department or school. Transfer of credit does not reduce the minimum residence requirements for a master's degree.  See Carmen or Nancy for more information.
“RESIDENCY” REQUIREMENTS [not the same as residency for tuition purposes]

Master’s candidates are required to complete a minimum residence credit of two semesters, either by full-time registration, or by part-time registration over a large number of semesters. The residence credit hour requirement requires UNC-Chapel Hill registration (i.e., transfer credit and credit from certificate programs are excluded).

MASTER’S PRACTICUM REQUIREMENT

For information about the Master’s Practicum, please refer to the online Master’s Practicum Guide at http://www.sph.unc.edu/epid/masters_practicum_12084_9840.html. All relevant requirements are contained in this document. Please review carefully.

THE MASTER’S COMPREHENSIVE EXAMINATION

The Master's Comprehensive Examination is a formal requirement of the Graduate School, and is covered by the campus Honor Code. The student must be registered at the time of the examination.

Past examinations, with their answer keys, are kept in the epidemiology student room, 2106 McGavran-Greenberg Hall. Students are encouraged to review these. Past exams can also be found online on the departmental webpage.

<table>
<thead>
<tr>
<th>Registration deadline for 2010 offering:</th>
<th>December 8, 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination date:</td>
<td>January 8, 2010 from 8:45 am – 1:00 pm</td>
</tr>
<tr>
<td>Students informed of outcome:</td>
<td>by letter in mailbox within 2 weeks of exam.</td>
</tr>
</tbody>
</table>

**Purpose:**

The Master's Comprehensive Examination is intended to provide an opportunity to demonstrate mastery of basic epidemiologic concepts and methods and to diagnose any major areas of deficiency. A passing score on the examination is a requirement both for the MPH and the MSPH degrees.

**Timing:**

The examination is given each January. **Master's students are expected to take the exam in the second year of the program after completing EPID 718.** A student who does not earn a passing score may take the examination a second time, when it is next offered.

A maximum of 4 hours is allowed for the examination. The format is generally short answer (true-false, multiple choice, and open-ended questions). A medical dictionary will be available from the Student Services Office upon request. A student may bring into the examination:

- a calculator,
- a foreign language dictionary, and
- not more than two pages of the student's own notes (this can be one two-sided page, or two one-sided pages)
Submission of an exam is final. Students should review their exams carefully prior to submitting them to the Student Services Office.

The examination emphasizes mastery of the basic curriculum in epidemiologic concepts and methods, such as are covered in EPID 705, EPID 710, EPID 711, BIOS 600, EPID 715, BIOS 545, and EPID 718, as well as in substantive courses and seminars. Familiarity with material normally covered during the first year of the program is expected. Some degree of substantive knowledge may be needed, since epidemiologic concepts and methods are applied in a biomedical or biobehavioral context. However, substantive knowledge itself is not a focus of the examination.

The competencies that Master's students should possess by the end of their first year in the Department can be characterized largely in terms of "epidemiologic literacy." This includes:

1. Being conversant with epidemiologic terminology and concepts;
2. Familiarity with the major epidemiologic research designs and their strengths and weaknesses;
3. Ability to compute and interpret rates, measures of effect (RR, OR), and confidence intervals.
4. Awareness of problems of measurement and selection, and biases that may affect study results;
5. Familiarity with concepts of confounding and options for controlling same;
6. Familiarity with the concept of effect modification and methods of assessing this, including incorporating effect modification into design and analysis strategies;
7. Understanding of use and interpretation of basic statistical procedures for epidemiologic data;
8. Appreciation of the need to consider biological, psychosocial, and health care factors in studying epidemiologic phenomena; and
9. The ability to read, understand, and critique a report of an epidemiologic study which is written for a sophisticated audience, such as readers of the American Journal of Epidemiology, Epidemiology, the Journal of Chronic Disease, New England Journal of Medicine, American Journal of Public Health, or similar journals.

The examination will be based on a single article each year. The article will not be known to the students in advance.

Most questions will be drawn or adapted from a panel of "generic" questions that may change little from year to year. See Appendix VI for a list of these questions. The best way to prepare for the exam is to peruse back issues of the relevant journals, pick an article or two and answer the “generic” sample questions.

**Appeal of Failing Grade:**

An appeal of a failing grade is considered by the Graduate Studies Committee.

An appeal must be brought within 10 working days from the date of notice of the examination grade unless there are compelling reasons for delay. Appeals must be made in writing and should be presented in such a way that the appeal can be considered without revealing the identity of the student involved. The appeal should be self-contained (other than references to standard textbooks or examination materials). We request that a student intending to appeal notify the Student Services Office as soon as possible to facilitate scheduling of a Graduate Studies Committee meeting. Such notice is optional however, and does not obligate the student to make an appeal.
Students are expected to decide on their own whether to appeal an examination outcome. The examination can be discussed with the advisor and/or other faculty members. However, faculty should not be consulted, nor should they offer an opinion on whether to appeal an examination result. In preparing an appeal, students should neither solicit nor receive assistance.

Appeals are regarded as part of the examination, and therefore subject to the Honor Code. The appeal must be the student's own work and be accompanied by a signed pledge. To preserve anonymity, the pledge will be separated from the appeal itself and retained in the Student Services Office.

The Examination Committee will decide the appeal without knowledge of the student's identity. To preserve anonymity, all communication between the student and the Committee will take place through the Student Services Office until the appeal has been decided. The Committee will render its decision within 10 working days after the appeal is received, or as soon thereafter as a quorum of the Committee is available.

In reaching its decision the Committee will award full credit to answers that are judged to be equally as good as those originally proposed. The Committee decision is final with respect to the substantive issues. The student may appeal to the Department Chairperson only on grounds of alleged irregularities in procedure.

THE MASTER'S PAPER and ORAL PRESENTATION OF MASTER'S RESEARCH

The Master's Paper is a thesis substitute and is a major requirement for both the MPH and the MSPH degrees. The purpose of this capstone experience is to challenge the student to apply epidemiologic principles and methods to a specific clinical or public health issue. In carrying out the project, the student will be expected to select a scientifically relevant, feasible topic, review the body of epidemiological knowledge on the issue, formulate an informative study question and its associated hypothesis(ies), and analyze a dataset to evaluate the study question. The paper is filed with the Student Services Office and is available for student and faculty reference. The research is also presented orally in an appropriate forum.

Master's Paper Committee

Development of the master's paper is supervised by a committee consisting of a master's paper advisor and a second reader. At least one must have a primary appointment (neither adjunct nor clinical) in the Department of Epidemiology. The composition of this committee should be decided at the time of initial planning for the project.

Content of the Master's Paper

In the master's paper the student should demonstrate proficiency in the subject matter(s) pertinent to the study question of the Master’s paper and competency in the application of epidemiological concepts and methods as relevant to the topic of the Master’s paper. The scope of Master’s paper project and the depth of its conceptual, methodologic and analytic treatment are gauged by the standards of a publication of the paper in the peer-reviewed literature. Submission of the Master’s paper for publication is not required, but encouraged.

Form of the Master’s Paper

The Master’s Paper is a thesis substitute that demonstrates command of epidemiologic principles and methods, by means of a research project focused on a specific clinical or public health issue, and based on extant data resources. The Master’s Paper requires a proposal approved by both members of the Master’s Paper committee, completion of an analytic project, and preparation of a scientific report. Following approval by the two committee members, the completed Master’s Paper is submitted to the Department as a scientific report.
formatted as a manuscript for publication. The Master’s paper proposal does not have to be submitted to the Student Services Office.

In implementing this aspect of the Master’s program, the student is expected to select a scientifically relevant, feasible topic, based on a fully developed rationale that addresses its scientific and/or public health merits as reflected in the Master’s Paper proposal. Also included in the proposal are the hypothesis(es) to be tested, the proposed study design and its rationale, an analysis plan, and an outline of the potential interpretation of the anticipated result(s). A proposal template is available from the Student Services Office or online through the Department’s web site.

The course requirements for the MSPH and MPH degrees are as stated in Academic Policies (i.e., EPID 722 and 726 are not required for the Master's Paper).

Exceptions to the above requirements may be proposed with approval by the student's academic advisor, but must be approved by the Graduate Studies Committee.

**Identifying a Master's Paper Topic**

Selecting an appropriate topic can sometimes be a stumbling block for students. Although the advisor will assist in topic identification, it is the student's responsibility to initiate the process by offering some preliminary ideas to the advisor. Appendix VII provides suggestions for defining the topic.

**Human Subjects Review**

Please refer to section relevant to all students for specific IRB training requirements above.

*All proposed master’s paper research must be submitted to the School of Public Health Institutional Review Board (IRB) as soon as the project has been approved by the advisor and reader* (see above). This applies to all proposals, whether sponsored or not sponsored. While practice in the context of training is not subject to review by IRB, generalizable research conducted by students and/or faculty is subject to a determination whether review by the IRB is required. This determination is the purview of the IRB. Since the master’s paper is a research activity that takes place under the leadership of the student with support from an advisor, safeguarding the ethical conduct of this research activity is a responsibility shared by the student.

Student research is defined online at [http://ohre.unc.edu](http://ohre.unc.edu) and guidance for any IRB action required for student research is also found in the “student_research_irb_guidance” document ([http://ohre.unc.edu/misc/student_research_irb_guidance.pdf](http://ohre.unc.edu/misc/student_research_irb_guidance.pdf)). (Refer to Appendix VIII.) Registration of Master’s paper proposals and dissertation proposals follows the rules for IRB action presented in the IRB guidance document referred to above. The student is listed as the lead investigator for the research activity and a faculty advisor is identified who holds ultimate responsibility for ensuring that this project complies with all University, regulatory, and fiscal requirements.

Depending on the data and research environment of the Master’s paper project it may not be possible or desirable for student research to be subsumed under an existing IRB approval extended to the lead investigator of a “parent study” that supports a student’s research. *The decision about what is reasonable and whether the student’s proposed research meets this Institution’s guidelines for ethical conduct of research involving human subjects is made by the IRB.* Students should consult with their advisors in preparing IRB applications.

Upon receipt of IRB exemption or approval, the student must complete the Verification of Compliance with Institutional Review Board Requirements form. A copy of the IRB committee’s decision must be attached to the form. *In addition, the title page of the Master’s Paper must reflect the date of IRB approval (or exemption).*

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The Co-Chairs of the Public Health IRB are Professors Trude Bennett, Ruth Humphry and Mary Lynn. The Administrative Assistant is Ms. Barbara Griese. Inquiries and requests for forms, status of application and other questions should be routed through her. She may be reached at 966-9347, or by email at griese@email.unc.edu. See web site at http://ohre.unc.edu.

Data Use Agreements

If data are used for the master’s paper that are not publicly available, the IRB and the Department require a data use agreement form. A sample form is available from the Student Services Office or online through the Department’s web site. This form should be signed by the Principal Investigator of the study that provides access to the data, or the person legally authorized to release it.

Schedule for Completing the Master's Paper

At least two months before the anticipated date for approval of the Master's Paper the student will file with the Student Services Office a written schedule for revision and approval of the Master's Paper. The schedule should carry the approval of both committee members. In preparing the schedule the student should take any potential conflicts into account.

Sufficient time should be allowed for the following:

- a thorough first review of the entire paper by both committee members;
- revision time required by the student;
- a second review by the committee members, at least four weeks prior to anticipated date for final approval of the complete, revised Master's paper, to permit final modifications that may be requested.

The following is offered as an example of such a time schedule:

8 weeks prior to the anticipated date for final approval, the completed major paper is received by the committee members. At this time the student should arrange an appointment with each member to discuss their critique of the paper and revisions desired. The appointment would optimally be 2 or 3 weeks after the committee members have received the complete draft.

4 weeks prior to the anticipated date for final approval, the final draft of the Master's Paper is received by the committee members. Final comments and suggested revisions are provided to the student within two weeks so that final revisions can be made.

1 week prior to the anticipated date for final approval, the finished Master's Paper is received by both committee members so that they can read the final product and verify that all revisions have been made satisfactorily.

In preparing this schedule, the student should note Graduate School deadlines for the desired graduation date. (http://regweb.oit.unc.edu/calendars).

Format and Submission of the Master's Paper

The Master’s Paper is submitted to the Department in the format of a manuscript submitted for publication. There are no space limits, nor other constraints to demonstrating mastery of the subject, the sophistication of the analytic treatment, and the discussion of the results. These specifications apply unless both members of the
Master’s Paper Committee agree on an alternate. If the Master’s Paper is submitted for publication, it is recommended that the student follow the authorship guidelines promulgated by the International Committee of Medical Journal Editors (ICMJE), which are posted at http://www.icmje.org. IRB approval status as well as financial disclosures of the authors should be mentioned. For the latter, criteria for financial disclosure can be consulted at N Engl J Med 2002; 346(24):1901-2, Jun 13, 2002.

There is not a departmental requirement at present for publication of the master’s paper, although publication by students is strongly encouraged. Students choosing to publish their Master’s paper research should refer to Appendix XIV for publication practices.

The master's paper is not a thesis, but rather a “thesis substitute.” Thus, many of the formal thesis requirements do not apply. Specifically, there is no final examination, defense of the master's paper, or fee, and the paper itself is not filed with the Graduate School.

- Formatting Guidelines: Use Arial or Times New Roman font; use a type size of 11 or 12; page numbers centered on the bottom of the page in a footer; margins of left margin of at least 1¼ inch; other margins at least one inch. The Graduate Schools handbook, "A Guide to the Preparation and Submission of Theses and Dissertations," does not apply since this is not a formal thesis.

- Funding sources should be acknowledged in a statement such as: "This research was supported in part by a grant from [name of institution]." Disclosure statements must also be added, as applicable to potential conflicts of interest related to individual authors' commitments and project support. If there are none, this should be specified, e.g., “the author(s) have no conflicts to declare.”

- One copy of the Master's paper is submitted to the Student Services Office in accordance with the University schedule. This is the official copy, and must carry the signatures of both members of the student's master's committee on the title page, as well as date of IRB approval. Copies of the final paper are also given to the members of the student's committee, if desired.

- The departmental copy of the paper must be bound in the "velo" style. This type, with the plastic strip binding (not spiral) and a good quality heavy cover, is available at copy centers for a nominal cost. The cover of the paper must be labeled with the student's name and the title of the paper. Students need to follow the exact format of the sample cover page found in Appendix XIX.

Students must be registered for 3 credit hours of EPID 992 at the time the master’s paper is turned in.

Master's papers are kept in the department dissertation room (2106A), and are available to students and faculty for use within the building. See Carmen or Nancy for access.

**Oral Presentation of the Master's Paper Research**

Presentation of the Master’s paper at a seminar, scientific, or professional meeting is required. The leaders of each program area are responsible for providing an adequate forum for this presentation for Master’s students in the program. Students not affiliated with a program area work with their advisor to identify an equivalent opportunity for presentation of the Master’s paper. The student’s master’s paper committee is responsible for verifying that the requirement has been met satisfactorily.

Guidelines for the presentation are as follows:
a. The student must be primarily responsible for preparation for the presentation. For example, presentation of slides prepared by a co-investigator is not allowed if the presentation is to fulfill the Master's requirement.

b. The topic must be epidemiological.

c. The audience must be knowledgeable in both epidemiology and the substantive area, so that a meaningful, probing discussion is possible.

The forum for a Master's presentation could be a program area seminar or affiliated program seminar series (e.g., K-30 Program). In some instances, presentation at a regional, national, or international meeting would meet this requirement. Individually-scheduled presentations could be held at any time throughout the fall and spring semesters. Use of the Wednesday afternoon seminar period (3:30-4:30 p.m.) is particularly encouraged for this purpose, on dates when no seminar or department meeting is scheduled. In general, individual presentations during the summer are discouraged.

The student and committee are responsible for scheduling and announcing the presentation to achieve an appropriate forum. Audience attendance should be encouraged by prominent announcements of student presenters, research topics, and advisors. The presentation must be announced via the Epidsems distribution list (epidsems@unc.edu) at least one week in advance. The announcement should include student name, title of presentation, indication that this is a master’s presentation, name of advisor, date, time, and location. Program areas are encouraged to issue specific invitations to colleagues outside the department, citing the paper titles.

To reserve the EPID conference room, email Chandra at ccaldwel@email.unc.edu. To reserve a room in the SPH, go to http://www.sph.unc.edu/rooms/

The following sequence is recommended:

1. Student prepares preliminary draft of the masters' presentation and provides to each of the two readers at least two weeks prior to anticipated date of master's paper presentation.

2. Student discusses draft presentation with each of the two readers. Suggestions are provided.

3. Master's paper presentation (as work in progress, not as a final defense).

At least one of the two readers attends the presentation, provides feedback to the student and signs the Oral Presentation form indicating that this step has been completed satisfactorily (or otherwise). If neither reader can be present at the presentation, it is the responsibility of the primary reader to identify a substitute among the faculty. If the presentation is not satisfactory, a meeting of the two readers and the student is required prior to proceeding with the masters' paper.

4. Student completes master's paper after the oral presentation, and submits it to both readers at least one month prior to the date established by the Graduate School for completion of masters' programs in the pertinent semester. (Graduate School completions deadlines can be found at http://gradschool.unc.edu/graddeadlines.html).

5. Student responds to comments from both readers, and submits final version of masters' paper to both readers according to the schedule previously established with both readers (but at least two weeks prior to the date of completion of masters' program established by the Graduate School).
6. In order for the readers to approve a masters' paper, a meeting of the student and the two readers may be needed. Such a meeting may be requested by either of the two readers or the student, but is not required.

Master's Paper Report

When the master's paper has been approved by the student's committee AND the work has been presented in an appropriate forum, a Report of Approved Substitute for a Master's Thesis must be signed by the advisor. This report completes the student's master's degree program and must be submitted to the Student Services Office along with the final, signed Master's Paper.

Suggested Milestones and Time Table for Preparation of the Master's Paper

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Suggested Time Table*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Selection of Topic</td>
<td>1st Year, Summer, 1st session</td>
</tr>
<tr>
<td>2. Literature Review</td>
<td>1st Year, Summer, 2nd session</td>
</tr>
<tr>
<td>3. Data Analysis or Synthesis of Issues</td>
<td>2nd Year, Fall &amp; Spring</td>
</tr>
<tr>
<td>4. Oral Presentation</td>
<td>2nd Year, Spring</td>
</tr>
<tr>
<td>5. Final Draft</td>
<td>2nd Year, Summer</td>
</tr>
<tr>
<td>6. Completion of Paper</td>
<td>2nd Year, Summer</td>
</tr>
</tbody>
</table>

* This timetable is appropriate for students enrolled in the standard two-year master’s program. MPH students who must work within a shorter time frame will need to carefully plan their program with their advisor(s) in order to ensure fulfilling all requirements within the time allowed.

MASTER'S DEGREE APPLICATION FOR GRADUATION

To be eligible for graduation in a given semester a Master's student must apply for the degree early in that semester. Degree application forms and deadlines can be found at http://gradschool.unc.edu/graddeadlines.html. If a student fails to graduate in the term applied for, s/he must re-apply; no prior application will suffice.

PROMOTION OF MSPH STUDENTS TO THE DOCTORAL PROGRAM

Doctoral students who are required to first obtain the MSPH must complete all requirements for the master's degree, including the master's comprehensive examination and master's paper, before proceeding with doctoral research. A recommendation for the promotion of a master's student to the doctoral program is brought to the faculty by the student's prospective doctoral advisor as a representative of a promotion committee of three, to include the student's master's advisor. The faculty and chairperson consider the recommendation and make a final determination as to whether the student may proceed in the doctoral program.

Students must be approved for promotion prior to continuing on after submission of the Master’s Paper. Consult with Nancy or Carmen to determine the deadline for your promotion committee meeting.
**Criteria for Promotion**

- The applicant has identified a doctoral advisor. In addition to the established function of an academic advisor, the doctoral advisor assists the student in identifying a doctoral research topic, may serve as the chair of the doctoral committee or assist in identifying a chair, and helps in developing the doctoral research proposal until the chair of the doctoral committee has been identified.

- The advisor indicates that this student has achieved a satisfactory level of professional development consistent with doctoral research.

- All masters-level course requirements have been met satisfactorily or are in progress toward satisfactory completion.

- At least one satisfactory, complete draft of the Master's Paper has been submitted to the advisor and second reader.

- The advisor and faculty are satisfied that the applicant has a clear potential for graduate work at the doctorate level and independent work as an epidemiologist at the doctoral level.

**Procedure**

The student arranges the promotion committee to discuss the promotion request. This committee should consist of three faculty members, to include the master's advisor if this person is different than the doctoral advisor, and is chaired by the prospective doctoral advisor. The third member of the committee is selected from the members of the Graduate Studies Committee (names available from Student Services Office), and should not be one of the advisors. In the event that the master's and doctoral advisors are the same, the student should identify an additional faculty member to serve on the committee, ideally someone who has had extensive interaction with the student. If the doctoral advisor is an adjunct or clinical member of the faculty, the student must identify a chairperson who has a primary appointment in the Department of Epidemiology to serve on the promotion committee.

In advance of the promotion committee meeting, the student should provide (in no particular format) the following materials to the committee members:

- Coursework results, including numerical grades for EPID 710, EPID 715 and EPID 718 (available from Student Services Office)
- Master's examination results (available from Student Services Office)
- Summary of Master's paper progress
- Names of faculty with whom the student has worked
- Statement of dissertation plans as they appear at that time
- Student's CV
- Copy of student's transcript (Transcript can be printed from Student Central)
- **Form** -- "Record of Committee Action for Promotion from MSPH to PhD"

The student meets with the Promotion Committee long enough to answer any questions and is then excused. Following discussion by the full faculty, the student is informed of the outcome by letter.

**A copy of the complete promotion packet must be submitted to the Student Services Office.**
ADVANCEMENT FROM THE MPH TRACK TO THE PhD TRACK

Since students are admitted for the MPH degree with the assumption that it will be a terminal degree, there is no promotion option. Those who are interested in continuing for the PhD must apply for admission to the PhD program through the Graduate School. The faculty and admissions committee review the application with the pool of doctoral applicants for that year and a recommendation is forwarded to the Graduate School.
INFORMATION SPECIFIC TO MSCR DEGREE STUDENTS

[Note: This section is still under development. Please refer questions to the Student Services Office.]

For a checklist of MSCR milestones, go to <http://www.sph.unc.edu/epid/degree_audit_8227_7417.html>.

MSCR (Masters of Science in Clinical Research)

The MSCR program is an interdisciplinary research degree program housed within the Department of Epidemiology in the Gillings School of Global Public Health but jointly sponsored by the TraCS (North Carolina Translational and Clinical Sciences) Institute (http://tracs.unc.edu). The program is designed to develop the skills necessary for a successful career as a principal investigator and collaborator in clinical/translational research. The MSCR requires a minimum of 36 semester hours of credit and is designed as a two-year program with at least two full semesters in residence. The program may be completed on either a part-time or full-time basis.

The MSCR program has different practicum requirements and comprehensive exam from the MPH program.

The MSCR is for individuals who have already completed a doctoral degree (MD, DDS, PharmD, etc.). It is intended to complement the substantive training in these primary areas by enhancing the student's ability to apply appropriate research methodologies to their chosen/established field of research. Students must establish a clear relationship with a mentor in this field of research to provide content area guidance during the program. Students who currently hold academic appointments or are employed must have arranged sufficient protected time to complete the coursework.

Core courses in the curriculum will address issues pertinent to all areas of clinical and translational research. To accommodate the special needs of different areas in clinical and translational research, participants will select one of three tracks:

1. Translational ("Bench to Bedside") - Persons with experience in basic science who are intending to continue work that will have a strong component of basic science
2. Clinical Trials - Persons with a specific career interest in the conduct of traditional clinical trials
3. Health Services/Population Studies - Persons with primary interest in health services and population studies, including health services interventions, observational studies, medical decision-making, health behavior and pharmacoepidemiology

SUMMARY OF DEGREE REQUIREMENTS FOR THE MSCR

Minimum course requirements:

Core courses:

- EPID 711: Clinical Measurement & Evaluation (3 credits, Fall)
- BIOS 541: Quantitative Methods for Health Care Professionals (4 credits, Fall)
- EPID 690 (section TBA): Design of Clinical Research (3 credits, Spring)
- BIOS 542: Quantitative Methods for Health Care Professionals. Course is required for persons in...
either Clinical Trials or Health Services/Population tracks (4 credits, Spring), strongly recommended for others.

- **EPID 805**: Clinical Epidemiology and Clinical Research Methods (4 credits, Fall)
- **EPID 806**: Clinical Research Skills (4 credits, Spring)
- **EPID 896**: Seminar in Clinical Research (1 credit, Fall/Spring, must be enrolled in the seminar throughout enrollment in MSCR program, typically 4 semesters)
- **EPID 992 (Masters Paper)**. The paper will be original work in the form of primary data collection and analysis, secondary data analysis, or systematic review (or meta-analysis) of previously conducted studies.

- All students will be required to have training in the ethical conduct of research.

**Tracks:**

- Completion of at least two courses (or approved alternatives) within the track:
  - **Translational Track**: EPID 743 Genetic Epidemiology Methods and Applications; EPID 690 (section TBA) Biomarkers in Population Research; DPET 855 Principles of Pharmacokinetics; DPET 832 Pharmacogenomics
  - **Clinical Trials Track**: EPID 733 Clinical Trials in Epidemiology; DPET 830 Development and Clinical Investigations of Drugs; PUBH 747 Project Management Principles and Practices; HPM 650 Pharmaceutical Research, Development and Marketing
  - **Health Services/Population Track**: EPID 800 Epidemiology of Medical Care; PUBH 747 Project Management Principles and Practices; PUBH 750 Strategies of Prevention for Clinicians; EPID 765 Methods and Issues in Pharmacoepidemiology; EPID 690 Biomarkers in Population Research; HBHE 753 Qualitative Evaluation and Research Methods; HPM 885 Methods in Health Services Research; HPM 772 Economic Evaluation of Health Care Technologies; NURS 933 Methods for the Evaluation and Improvement of Health Care Systems; DPOP 804 Informatics: Use of Large Health Care Databases; DPOP 805 Patient Reported Outcomes: Theory, Methods and Applications

- A minimum of 2-3 elective credits. These elective credits may be selected from any relevant course on campus with approval by the student's advisor. Elective credits may be obtained for home program activities, such as journal clubs and other research activities, if approved by the core faculty.

Students who do not satisfy the 36 credit hour requirement with core and track-related courses (minimum of 32 hours) may choose from relevant elective courses approved by their advisors.

**Other Program Requirements:**

- **Mentor**: All participants in the MSCR should have a clear relationship with a mentor in their research field. Mentors will be involved directly in some of the coursework, for example, providing feedback on other student's research proposals.

- **Grant proposal**: The proposal may be for a career development award or an investigator-initiated research grant targeted for submission to NIH or a foundation funding source. The research proposal will be developed within the context of EPID 805/806.

- **Program duration**: The program is designed to be completed over two years. Enrollment in EPID 805/6
is restricted to persons in the second year of the program, except in special cases approved by the program faculty.

- **Master’s Comprehensive Exam:** Details to be determined and announced later.

A sample schedule for the two-year masters and the 18-month MSCR program can be found in Appendix III.

This program is jointly administered by the Department of Epidemiology and the TraCS Institute. Questions related to clinical aspects of the program should be directed to Susan Pusek, Director, Education Programs, TraCS Institute (919-966-0128, suspusek@med.unc.edu). Questions related to academic aspects of the program should be addressed to Nancy or Carmen.
COMPETENCIES FOR THE PhD

The PhD program enrolls students who have a master’s degree in epidemiology or another advanced degree and/or experience such that they have acquired most of the knowledge and competencies provided in the MPH or MSPH programs. The PhD program has a public health orientation and is designed to equip persons to function as independent researchers in academia, research institutes, government, or industry. While graduates often seek additional experience by way of a postdoctoral training, a graduate of the PhD program is prepared to function as a faculty member of a graduate program in a university or in a position in a public health organization, multi-disciplinary setting, government or industry of comparable independence and responsibility. The PhD program presupposes a foundation of knowledge of concepts and skills of epidemiology, an understanding of public health concepts and the population perspective, and the ability to read with sophistication reports of clinical and epidemiological studies. However, it is anticipated that students may need additional work in one or more of these areas, depending upon their background before entering the program. The PhD program assumes that graduates' professional identity and primary area of expertise will be in epidemiology, though the student may possess a prior area of professional expertise (such as medicine, nursing, or pharmacy). The competencies of the doctoral program in Epidemiology fully meet the competencies set out for doctoral education at the UNC School of Public Health.

In addition to the ability of carrying out the competencies of the masters degree programs, upon satisfactory completion of the PhD degree program the student will be able to:

1. Critically review the scientific literature, synthesizing the findings across studies, and rendering an informed judgment on the state of knowledge in that area, presenting appropriate implications for policy, professional practice, or personal behavior, and deriving implications and avenues for further research.

2. Identify researchable study questions that will advance scientific knowledge about a topic of public health significance.

3. Design epidemiological studies to address questions of public health importance.

4. Be familiar with the principles of ethics in research and the ethical conduct of research involving human subjects.

5. Develop a research proposal that states a study question or questions, presents a scientific and public health rationale for their significance, and specifies a detailed methodology for carrying out an epidemiological study to answer the question or questions.

6. Design and conduct, supervise, or collaborate in the conduct of the data collection, data management, and study management activities for epidemiological studies in a clinical, occupational, or community setting.

7. Manage or supervise the management of the data from epidemiological studies, including quality control, documentation, and data security procedures;

8. Analyze data from epidemiological studies using cross-sectional, case-control, or cohort designs. Be a skilled data analyst able to use state-of-the-art statistical methods appropriate for the study design, and able to incorporate categorical or continuous variables, control for covariates, and examination of effect modification.
9. Interpret data from statistical analyses of epidemiological studies, in the context of findings from other studies and relevant information and theories from biological, physical, and social sciences.

10. Present the findings of an epidemiological investigation, in writing and orally, to a scientific audience.

11. Submit the findings of the doctoral research for external peer reviewed publication.

12. Critically review scientific manuscripts and research proposals.

13. Explain complicated epidemiological concepts and teach epidemiology courses at the graduate level.

14. Following graduation, read the literature and understand the benefits and limitations of methodologic developments and scientific advances.

**SUMMARY OF REQUIREMENTS FOR THE DOCTOR OF PHILOSOPHY (PhD)**

The PhD in Epidemiology is the academic doctoral degree. It is a research degree, centered around a major research project within a broad public health orientation and seeking to integrate related disciplines. The program averages three to five years following a master's or other advanced degree. Coursework and preliminary examinations normally require two years, with the remainder of the time devoted to the research and completion of the dissertation. The Department specifies degree requirements within a framework prescribed by the Graduate School.

For a checklist of doctoral milestones, go to [http://www.sph.unc.edu/epid/degree_audit_8227_7417.html](http://www.sph.unc.edu/epid/degree_audit_8227_7417.html).

**Required Core Methods Courses**

- EPID 705: Introduction to Logic and Probability Logic in Epidemiology
- EPID 710: Fundamentals of Epidemiology [EPID 711 may be substituted by clinicians]
- *BIOS 600: Principles of Statistical Inference** Or
  - BIOS 550: Elements of Probability and Statistical Inference I
  - [BIOS 541 may be substituted by those in the K-30 Program]
- BIOS 545: Principles of Experimental Analysis **Or
  - BIOS 663: Intermediate Linear Models
  - [BIOS 542 may be substituted by those in the K-30 Program]
- EPID 715: Theory and Quantitative Methods in Epidemiology
- EPID 718: Epidemiologic Analysis of Binary Data
- EPID 722: Epidemiologic Analysis of Time-to-Event Data
- EPID 725: Research Planning Workshop
- EPID 726: Epidemiologic Research Methods

*See Appendix IV for a list of substantive epidemiology courses.

**See Appendix V for additional information regarding BIOS courses.

**Additional Courses**

- Substantive epidemiology courses, minimum of two, each in a separate discipline area. See Appendix IV for a list of specific courses.
- Higher level biostatistics course/s as determined with advisor and specified by intradepartmental review committee (e.g., BIOS 664, BIOS 665, BIOS 667, etc.)
Other coursework as determined with advisor and specified by intradepartmental review committee.
- EPID 994: Dissertation, minimum of a total of six credit hours required (Typically three credits when defending proposal and three credits at final defense. Additional credit hours as needed.).

Other Degree Requirements

- One semester teaching experience in epidemiology (see page 35 for list of approved courses)
- Practicum requirement demonstrating experience in a minimum of two study implementation activities
- Competence in statistical computing and data management; may be satisfied by:
  - EPID 700: SAS and Data Management
  - BIOS 511: Introduction to Statistical Computing and Data Management, or
  - BIOS 541/542
  - a comparable SAS or Stata course on this campus (i.e., through IRSS) or elsewhere, or
  - prior experience using SAS or Stata (exemption exam required)
- Competence in scientific writing
- Intradepartmental Review planning session
- Preliminary Doctoral Examinations:
  - Written examination: The Doctoral Qualifying Examination
  - Oral Examination: On the dissertation proposal primarily
- Specific written questions on research area (at discretion of student's dissertation committee)
- Submission of a minimum of one manuscript from dissertation research to an external peer review mechanism (see page 46)
- Doctoral Dissertation
- Final Defense of Dissertation

Doctoral students plan coursework beyond the core requirements in consultation with the advisor and the intradepartmental review committee. Doctoral students are expected to take some higher level biostatistics. Additional substantive epidemiology courses are strongly recommended.

Students proceeding from the master's program in this department complete many of the doctoral course requirements during the master's phase. These courses will already be part of the student's record. No formal waiver is necessary.

A sample schedule for the PhD program can be found in Appendix X.

Scientific Writing

Clarity of expression is one of the elements evaluated in all written work, particularly in the doctoral written examinations and the dissertation. Some training possibilities for students who believe they might benefit from additional experience in this area are:

- The Writing Center (http://www.unc.edu/depts/wcweb/): provides free individual tutorials, campus workshops; writing conferences, grammar hotline, etc. to help students improve writing skills. They are located in the Student Academic Services Building. Call for an appointment at 962-7710.
- English 303: Advanced Expository Writing/Natural Sciences [This is an undergraduate course, and will not count toward a graduate degree, but may be helpful.]
- Duke University Continuing Education: courses in scientific writing offered from time to time--request catalog by calling 684-6259.
- Work with an editor or study group.
• Consult textbooks and style books. Two useful references (among many others available) are:
  Kate L. Turabian, Manual for Writers of Term Papers, Theses, and Dissertations, 5th ed., Chicago (University of Chicago Press, 1987)

CREDIT TRANSFER

A doctoral student may request transfer of relevant graduate courses from accredited institutions or from other graduate programs within this institution (contact the Student Services Office). The doctoral student may be examined on all transferred coursework at the time of the doctoral oral examination. The examining committee then makes a recommendation to the Graduate School, which has the final responsibility for approving the transfer.

“RESIDENCY” REQUIREMENTS [not the same as for tuition purposes]

The Graduate School requires a minimum of four full semesters of residence credit. At least two of these semesters must be earned in continuous registration of no fewer than 6 credit hours on this campus. This requirement may be fulfilled by two regular semesters of full-time registration (nine or more credit hours) or by less than full-time registration over a larger number of continuous semesters. The residence credit hour requirement requires UNC-Chapel Hill registration (i.e., no transfer credit). A total of at least six semester hours of credit must be earned for dissertation (EPID 994).

*If you are defending your proposal, meeting with your advisor, etc., you are using University resources and must be registered.

It is important to remember that a doctoral program in Epidemiology is individually planned, and involves more than the relatively small number of courses listed as required for all students. A student will need at least four semesters on campus to complete coursework, preliminary written and oral examinations, and to secure approval of the dissertation proposal.

MINOR PROGRAMS

A minor is not a requirement of the doctoral program, but may sometimes be desirable. Provisions for minor programs are given in the Graduate School Handbook (http://gradschool.unc.edu):

If a student does offer a formal minor, it must include at least 15 credit hours. To count for the minor, all credits must be for courses listed (or cross-listed) in programs other than that of the major. A minor may consist of a set of related courses, some of which are listed by one program and some of which are listed by another. In the latter case, at least six semester hours must be taken in each program. The minor must be approved in advance by authorized faculty in the major and the minor programs. When a satisfactory minor has been planned and approved by both programs, a copy of the proposed minor course of study shall be signed by the appropriate persons (dean, chairperson or director of graduate studies) in the major and minor programs and sent to the Graduate School to become a permanent part of the student's record.

If the dissertation involves the minor field, Graduate School policy requires the dissertation committee include at least one faculty member from the minor program. Students must contact the minor program directly since the specific minor program determines the requirements for the minor.

Students wishing to complete a minor need to contact the minor department for information on its requirements.
TEACHING REQUIREMENT

The teaching experience is a requirement for students admitted into the doctoral program. The purpose of the teaching requirement is to make available to all doctoral students a learning experience in effective communication in their field of scientific work, and a tutored practice in the teaching of epidemiology. These skills and their application are part of the department's goals in the training of an epidemiologist leading to the PhD degree.

The student's advisor(s) is/are responsible for assisting in the development of a plan and timing that best fits the student's training path. The teaching experience may be paid (Teaching Assistant, or TA). For students who are not eligible to receive pay, or who choose not to, the experience may be reflected in credit hours by registering for EPID 883 (Teaching Intern, or TI).

Additional details can be found on the web at TA Central (www.sph.unc.edu/epid/ta_central_2424.html).

Roles and Responsibilities

TAs work with faculty in the preparation of course material, the preparation of the class schedule, the assembly of course-packs, and in the pre-testing of evaluation instruments. During the courses, TAs observe lectures and make themselves available to students for clarification of the concepts and terms used in those lectures; they provide consultation to students for clarification of concepts and to review the exercises used in course materials and/or textbooks; they conduct question-and-answer sessions structured around examples and exercises used in various sections of applied courses; and they make themselves available to answer questions from students in clarification sessions prior to quizzes, tests, and final examinations.

Options for Satisfying the Teaching Requirement

Most of the TA opportunities are for EPID 600, a service course for non-majors that satisfies the SPH core requirement. TAs for this course may have the option of assisting with the on-campus version or the distance-learning version. Students who have completed more advanced training may serve as TAs for EPID 700; EPID 710 or EPID 711/PUBH 760, the introductory level courses for majors; EPID 715, 718, and 722, the advanced methods courses; and EPID 725/726, the research proposal development course. TAs in the advanced level courses usually serve at the invitation of the primary course instructor; however, the instructors will always welcome an inquiry from students who have a strong interest in a particular course.

Other options for satisfying the teaching requirement are: BIOS 541 and BIOS 542 with Dr. Joanne Garrett (joanne_garrett@med.unc.edu), EPID 759 with Dr. Lorraine Alexander (lorraine_alexander@unc.edu) and MEDI 220 with Dr. Jeffrey Sonis (jsonis@med.unc.edu).

Training and Development

All TAs complete three types of training as a requisite for serving in a Teaching Associate role. An orientation and training session organized by the Center for Teaching and Learning serves as a general preparation on teaching techniques and the skills needed to serve as a discussion leader. An additional, and more extensive training, takes place in preparation for each course as a responsibility of the respective course instructor. A series of meetings between the course instructor and the TA(s) takes place to review the course objectives, contents, structure, and the role of the TA in each phase of the course. In this process, faculty remain attentive to the apprenticeship role of the TA(s) and provide guidance in this learning experience which allows the student to assume the role of an associate in teaching under the supervision of the course instructor. Finally, students serving as TAs must complete FERPA (Family Educational Rights and Privacy Act) training. Go to http://regweb.unc.edu/faculty/ferpa_training.php for more information.
Doctoral students who have acquired comparable experience in the teaching of epidemiology prior to entry into the doctoral program may request an exemption from this requirement by documenting their past experience in this respect. Requests for exemptions to the teaching requirement are submitted to the Graduate Studies Committee through the Student Services Office. A request should carry the co-signature of the student's advisor.

International students who plan to TA should first enroll in GRAD 810, Communication in the American Classroom.

DOCTORAL PRACTICUM REQUIREMENT

The field conduct of studies and related activities is an integral part of the life of an epidemiologist. Practical aspects of study conduct can include everything from designing questionnaires and subject recruitment to the collection of biologic samples and laboratory analysis. These activities are challenging and require a number of skills and experiences. Moreover, failure to properly conduct studies can waste precious resources and potentially invalidate study findings. Because students often conduct their dissertation research based on secondary analysis of data, this requirement will ensure that doctoral students in the Department of Epidemiology have been directly involved in at least two hands-on experiences in the practical conduct of studies.

Requirement Details

All students in the PhD program must demonstrate adequate practical experience in a minimum of two study implementation activities. Adequate practical experience will be defined as a meaningful field experience, study conduct or implementation activity during one semester. The student's advisor will assist with the selection of eligible activities, the time and effort required, and provide the final approval. The advisor is not required to supervise the actual activities. These activities can be part of the dissertation project. Pay is neither required nor prohibited.

Options for Satisfying the Practicum Requirement*

- Development and testing of study protocols
- Staff Training and Certification
- Subject Recruitment
- Questionnaire Design and Pretesting
- Interviewing
- Working with the Community to implement research
- Coding
- Medical or Other Records Abstraction
- Designing and implementing quality control activities
- Biospecimen Collection
- Laboratory Analysis
- Environmental, occupational, or personal exposure monitoring
- Collection of measurements on study participants
- Other activity as approved with advisor

*Does not include activity that is part of existing course.
Format

No exemptions based on practical experience prior to entrance into the doctoral program will be allowed; the student will have to choose an activity not performed in the past.

Checkpoints: (a) Planning and scheduling of this activity with the advisor, (b) Intradepartmental Review and proposal defense. The deadline is the final defense of the dissertation.

Report of Completion

A brief (1 page) final report is to be turned in to the advisor, along with the “Verification of Completion of Practicum Requirement” form for each activity separately. The report should summarize the activities conducted to satisfy the requirement and refer specifically back to the doctoral competencies. Copies of both the report and the verification form are then to be submitted to the Student Services Office.

THE INTRADEPARTMENTAL REVIEW

The Intradepartmental Review (IDR) is a planning session, bringing together the student and key faculty members in his or her research area for review of the student's progress and to plan the remainder of the work. The IDR is scheduled at a time when the student has completed most or all coursework and has decided on a dissertation area (see Appendix XI for guidelines on how to choose a topic).

Composition of the intradepartmental review committee is decided in consultation with the doctoral advisor, and consists of three members of the epidemiology faculty. A subject matter expert can be substituted for one member with departmental approval. At least one must have a primary appointment (neither adjunct nor clinical) in the Department of Epidemiology.

At least a week before the intradepartmental review the student provides each participant with the following (in no particular format):

- An updated C.V.
- Information on progress to date, including courses completed, research activities, etc.
- A summary or outline of the proposed dissertation project.
- IRB Training Certificate
- Practicum Requirement verification (if complete)
- An item-by-item description of the degree to which the student has met each of the doctoral learning competencies (as listed in Academic Policies on page 31-32) and those of the program area, if applicable.

A copy of the entire packet given to your Committee must be provided to the Student Services Office.

The student must obtain from the Student Services Office the Intradepartmental Review form or through the Departmental web site. The form will be completed by the Committee Chairperson during IDR. During the session the student and committee plan the training needs and opportunities best suited to the doctoral research identified by the student. The student is responsible for giving a copy of the signed checklist to each member of the IDR committee and filing a copy with the Student Services Office.
Preliminary Doctoral Examinations in the Department of Epidemiology are designed in accordance with Graduate School requirements for a written and an oral examination, together constituting a comprehensive examination of the student's command of his or her field. The student must be registered at the time the preliminary examinations are taken. The examinations are covered by the Honor Code.

**Purpose**

The written examination is the Doctoral Qualifying Examination. It is a diagnostic tool designed to indicate to the Department whether the student has the substantive knowledge and the methodologic skills to engage in doctoral research and proceed in the doctoral program. The purpose of the examination is to yield diagnostic information on the student’s command of several skills and competencies considered necessary for doctoral research.

**Content and Structure of the Qualifying Examination**

The Doctoral Qualifying Examination is administered in two independently graded portions. The methods component is a standardized test of proficiencies in applying epidemiologic methods at the level of EPID 715/718/722. The substantive component consists of topical questions related to the program area declared by the student, prepared (and graded) by a committee established by the program area leader. The two components of the Qualifying Examination can be taken independently, but students need to pass both parts prior to the preliminary oral examination. An outline of each part of the Doctoral Qualifying Examination follows.

The **methods component** of the Doctoral Qualifying Examination consists of written responses to questions designed to test the student's ability to apply the concepts and methods covered in the required epidemiology and biostatistics courses. It is administered as an in-class examination, and questions may call for short essay answers; computations and set up of computations; interpretation of software output; construction, analysis and interpretation of results in tabular form; and analysis of data provided.

The **substantive component** of the Doctoral Qualifying Examination consists of written responses to questions designed to assess the student's command of the topical/programmatic area declared for the intended doctoral research. It is administered as an in-class, closed book examination. Program areas are those defined by the Department of Epidemiology as providing training in a substantive/topical area. The objectives of the substantive portion of the examination are to ascertain:

1. the degree of sophistication of the student's knowledge base in the study area,
2. his/her awareness of a salient area of research, reflecting familiarity with the current literature,
3. the student's ability to apply epidemiologic methods to a topical issue in the study area, and
4. the student's ability to identify and discuss the public health implications of a topical issue in the area selected for the proposed doctoral research.

**Expected Competencies**

To achieve a “pass” level on the Doctoral Qualifying Examination students must demonstrate (a) mastery of and the ability to apply the epidemiologic concepts and methods covered by the core methods curriculum, and (b) a command of the knowledge base, topical issues, and public health applications in the substantive area selected for the proposed doctoral research.
**Planning**

In the course of a student's Intradepartmental Review (IDR) a time line is identified for the optimal time to take each part of the Doctoral Qualifying Examination, if not already taken.

Students prepare for the **methods component** of the examination by reviewing the pertinent course materials and publications cited in the course materials, textbooks, and by reviewing the past examinations made available by the Office of Student Services. At the discretion of the examining committee, additional guidelines *may* be provided prior to the exam.

To assist students in preparing for the **substantive component** of the Doctoral Qualifying Examination program areas are responsible for providing a “study guide” for students, to include the learning objectives of the program area and recommended readings for developing the minimally necessary expertise in the area (not selected solely for the purpose of addressing specific exam questions).

**Timing**

Given the qualifying nature of this examination, the Doctoral Qualifying Examination should be taken before work on doctoral research is begun. The Methods and Substantive components must be completed satisfactorily for a student to continue in the doctoral program.

*The methods component of the qualifying exam will be offered on May 10 (registration deadline April 9) for the 2009-10 academic year. It should be taken after completion of EPID 722. The student is required to consult with the advisor before registering for the methods component of the doctoral qualifying examination, to confirm the student’s readiness to take the examination at that time.*

The substantive component of the Doctoral Qualifying Examination is offered during the Fall semester (late September or early October). Special interest area examinations (i.e., genetic, physical activity, etc.) are also scheduled at that time. For the 2009-2010 academic year, substantive exams are scheduled for September 22 from 8:45 am – 3:00 pm, with a registration deadline of August 22.

The program area director will make study guidelines available through the Student Services Office no later than three months prior to the date of the examination.

The substantive component of the Qualifying Examination should be taken after a student has selected a topical/programmatic area for the doctoral research and has completed the relevant courses defined in the learning objectives of each program area, but can be taken before the methods component. The student's advisor should be actively engaged in the student’s decision about when to take the substantive component. However, no documentation of completed requisites is needed for a student to register for the substantive component of the Doctoral Qualifying Examination.

For either component, a student may terminate the exam prior to submission with no penalty.

**Administration**

The **methods component** of the Doctoral Qualifying Examination is prepared by the Doctoral Qualifying Examination Committee of the Graduate Studies Committee, drawing on other faculty as needed. For each examination a committee of three faculty is established, with responsibility for developing, testing, and grading the examination. The committee includes at least one member of the GSC.
For the **substantive component** of the Doctoral Qualifying Examination the program area director forms a committee consisting of three faculty members, at least one of whom will have a primary appointment in the Department of Epidemiology. Inclusion of adjunct faculty of the Department is permissible and desirable. The program area director is responsible for providing study guidelines in advance.

To be examined in areas that are not established program areas, the student must file a request through the Student Services Office justifying the need for a “special interest” examination. If approved by the Graduate Studies Committee, the student’s advisor will form an *ad hoc* examining committee. At least one of these must have a primary appointment in the Department of Epidemiology. The advisor plays an *important role in selecting the questions, but does not take part in grading*. However, to aid in standardization of the examination across program areas, special interest area questions require prior approval of the Graduate Studies Committee.

This *ad hoc* committee does not constitute a dissertation committee - since approval of both parts of the Qualifying Examination is a requisite for setting up a doctoral committee - but it can serve as the core around which the dissertation committee is subsequently established. The *ad hoc* committee is responsible for grading its questions and for providing diagnostic feedback to the student. The latter is channeled through the Doctoral Qualifying Examination committee of the Graduate Studies Committee and the Office of Student Services.

**Format**

The methods component is an in-class exam, designed to be completed within a four hour time period. However, a total of six hours will be allowed. Students must bring a pocket calculator and may bring only the following written material: Rothman KJ, Greenland S, Lash TL. Modern Epidemiology. Third edition. Philadelphia: Lippincott Williams & Wilkins, 2008. **Annotations from coursework are allowable, but annotations for the purpose of the exam are not.**

The substantive component of the Doctoral Qualifying Examination is administered as an in-class, closed book examination. Page limits are defined for each question, and the full examination is designed to be answered in three to five hours. The time limit for this part of the Doctoral Qualifying Examination is six hours. Two pages of notes (personally prepared, one piece of paper, two sides) of the student's choice, a foreign language dictionary, and a calculator are allowed.

In each component of the Qualifying Examination the student will be given three questions to answer. The examining committee may: (1) ask the student to choose two of the three; (2) require the student to answer all three and the best two grades will be submitted; or (3) specify for the student one question to answer and allow the student to choose which of the two remaining questions to answer.

Submission of an exam is final. Students should review their exams carefully prior to submission to the Student Services Office.

Copies of past exams and answer keys are online at [http://www.sph.unc.edu/epid/student_central_8217_7409.html](http://www.sph.unc.edu/epid/student_central_8217_7409.html). Click on Exams in the menu to the right.

**Grading**

As a whole, the Doctoral Qualifying Examination is assessed on a pass/fail basis. An overall grade of Pass requires a Pass on both the methods and substantive components. The substantive component is assessed simply as Pass or Fail. Each question is graded by one member of the examining Committee. If the grade is not an unequivocal Pass, the question is graded by another member of the committee. If they disagree on the grade, the graders confer to reach a consensus.
The graduate studies committee is re-evaluating the grading scheme for the methods components of the Doctoral Qualifying Exam. The new grading policy will be distributed in Spring 2010.

See Appendix XII for a detailed description of the grading scheme for the methods component and Appendix XIII for the substantive component.

**Report of Outcome**

Within 3 weeks of the examination (either part), notification of the outcome is communicated to the student by the Doctoral Qualifying Examination Committee of the Graduate Studies Committee. A set of comments from the graders and/or an annotated copy of the exam may be provided at that time. If the grade is a Conditional Pass, recommendations for corrective actions for any weaknesses noted are provided to the student within one week of notification of outcome, not to exceed one month from the date of administration of the examination. Grading and preparation of the comments are a responsibility of the student's examining committee. The comments are reviewed by the Doctoral Qualifying Examination Committee of the Graduate Studies Committee, prior to notification to the student. In the event that the grading deadlines cannot be met by the examining committee, the committee must, by those deadlines, inform the student of the expected completion date.

A grade of Fail requires that the student consult with the advisor and conduct an in-depth review of diagnostic information related to the student’s performance. Feedback provided by the Doctoral Qualifying Examination Committee should be considered in this review. The student has the option to re-take the pertinent portion of the Doctoral Qualifying Examination, which has to be passed the next time it is offered in order to remain in the doctoral program, unless a different timing is recommended by the Graduate Studies Committee.

**Appeal of Failure**

A failing report from either part of the Qualifying Examination can be appealed. An appeal of a failing report is heard by the Qualifying Examination Committee, based exclusively on the student’s performance on the pertinent portion of the Doctoral Qualifying Examination. An appeal must be brought within 10 working days from the date of delivery of the critique by the graders, unless there are compelling reasons for delay (requires prior approval by the Chair of the Qualifying Exam Committee). Appeals must be made in writing and should be presented in such a way that the appeal can be considered without revealing the identity of the student involved. **Appeals are submitted directly to the Student Services Offices.** Other than references to standard textbooks or examination materials the appeal should contain all the pertinent information; appendices or accompanying documents are not permitted. It is requested that a student intending to appeal notify the Student Services Office as soon as possible to facilitate scheduling of a Qualifying Examination Committee meeting. Such notice does not obligate the student to make an appeal.

Students are expected to decide on their own whether to appeal an examination outcome. The comments from Qualifying Examination graders should be considered in making this decision. **The examination should not be discussed with the advisor and/or faculty members before an appeal,** nor should faculty offer an opinion on whether to appeal an examination result. In preparing an appeal students should neither solicit nor receive assistance.

Appeals are subject to all terms of the Honor Code, so that the appeal must be the student's own work and be accompanied by a signed pledge. The pledge will be separated from the appeal itself and retained in the Student Services Office.

The Qualifying Examination Committee (in consultation with a substantive area expert, if necessary) will decide the appeal without knowledge of the student's identity. **To preserve anonymity, all communication between the**
student and the Committee will take place through the Student Services Office until the appeal has been decided. The Committee will render its decision within 10 working days after the appeal is received, or as soon thereafter as a quorum of the Committee is available.

The Committee decision is final with respect to the substantive issues. The appellant may appeal to the Department Chairperson only on grounds of alleged irregularities in procedure.

THE DISSERTATION COMMITTEE

The Dissertation Committee is established after both components of the doctoral qualifying exam have been passed. The Dissertation Committee is composed of five or more members, a majority of whom must be “regular” members of the University of North Carolina Graduate School Faculty. All tenured and tenure track faculty at the ranks of assistant, associate and full professor are automatically “regular” members of the Graduate Faculty (this includes tenure track faculty School of Medicine, School of Pharmacy, other SPH Departments, etc.). Per Graduate School guidelines, "other persons may be appointed to the Graduate Faculty for “fixed” term membership; these appointees may include: faculty emeriti, clinical or research professors, scholars from other institutions, independent scholars, and practitioners.” Confirmation of any individual’s status can be obtained online at http://gradschool.unc.edu/policies/faculty/.

At least three committee members must be faculty of the Department of Epidemiology (this would include research track faculty and those with adjunct appointments). Research track faculty, adjunct faculty, and committee members from outside the UNC-CH system will need to email to epidemiology@unc.edu an electronic copy of their current CV so that they can be given a fixed-term appointment with the Graduate School for the purpose of serving on committees. Committee members from outside the UNC-CH system DO NOT have to be given adjunct appointments to serve on a student’s committee. The role of the Committee Chairperson is to follow the student's progress throughout the dissertation process and to ensure that all departmental policies and expectations are adhered to. For this reason, the Committee Chairperson must be someone whose primary appointment is in the Department of Epidemiology. Graduate School policy requires that the Committee Chairperson be a “regular” member of the Graduate Faculty.

The Committee should also include a biostatistician or someone who can function in that capacity. Inclusion of members from outside the department is encouraged when their point of view is warranted by the research question. Such members may be drawn from any of the disciplines bearing on the study of the distribution and determinants of human health and disease.

Committee members are proposed by the student and approved by the dissertation advisor using the "Request for Doctoral Dissertation Committee Approval" form (blue form). The student submits this form to the Student Services Office for departmental approval. The Student Services Office then completes and submits the Graduate School’s “Report of Doctoral Committee Composition” form. The Committee composition must be constituted and submitted for approval at least 2 weeks prior to the Preliminary Oral Examination.

THE PRELIMINARY ORAL EXAMINATION

The Preliminary Oral Examination is the second of the preliminary doctoral examinations. It is held after the Qualifying Examination has been passed, at a time when the student's dissertation committee determines that the dissertation proposal has reached a suitable stage, and in accord with Graduate School regulations. The Graduate School policy requires that by the time of the second preliminary examination the student must have fulfilled all required coursework and the minimum residence requirements for the doctorate, or will fulfill these by the end of the semester in which the examination is taken. A student must be registered for 3 credits of EPID 994 at the time of the preliminary oral examination.
The purpose of the preliminary oral examination is to review a structured proposal of the student’s doctoral research that includes its objectives, hypotheses, and work plan, submitted for formal approval by the doctoral dissertation committee. The content and format of the dissertation proposal is defined by the student and the doctoral advisor/doctoral committee chair at an early stage of this process. At a minimum, the doctoral research proposal includes a comprehensive statement of the background and critical assessment of the literature, a statement of objectives and their rationale, the study hypothesis(es) and design, and a proposal plan of analysis. Formal approval of the dissertation proposal and pertinent supporting materials by the doctoral committee takes place during the oral examination. Sample proposals are available online at http://www.sph.unc.edu/epid/dissertations_12050_9822.html.

The preliminary doctoral examination includes a presentation by the student of the proposed doctoral research. Discussion of the proposal during the preliminary doctoral examination is not constrained by the contents of the proposal. Members of the doctoral committee are free to pose questions on any substantive or methodologic subject related to the proposed doctoral work, a minor program, or aspects of another program or curriculum which is transferred into the candidate’s doctoral program.

Also during this examination, the committee should review and discuss manuscript authorship issues with the student.

The student should submit a draft of the proposal to each committee member well in advance of the date planned for the examination, to allow time for review and comment. The committee must approve the proposal before the student may proceed with the doctoral research. After the approval of the proposed research, the “Report of Approval of Dissertation Project” and the “Report of Oral Examination” are signed by committee members. These forms are obtained from the Student Services Office and should be returned after the examination. Do not print these forms from the Graduate School website. They are multi-use forms that have already been filled out and printed by the Student Services Office.

Following the oral examination the student must submit a tentative schedule for completion of the dissertation to each committee member. A copy should be filed with the Student Services Office.

RESEARCH AREA QUESTIONS

Significant weaknesses in the dissertation proposal or in the level of preparation of the candidate may result in a failed examination, which can be repeated as defined in the Graduate School Handbook. If the deficiencies are less severe and lead the doctoral committee to require supplementary or remedial work, written questions can be identified during the preliminary doctoral examination for completion by the candidate on a pre-established timeline (including a review procedure by Chair and Committee). These research area questions are not part of the preliminary examinations, but serve as a means to clarify or amplify specific issues identified during the oral examination. Any such questions are considered part of the student's program, and must be completed before the student applies for candidacy for the degree.

ADMISSION TO CANDIDACY

Admission to candidacy for the doctorate is a certification that the student has completed all requirements for the degree except for the dissertation and/or defense. This is an optional form, completed only if the student needs to establish official candidacy.

A doctoral student may apply for candidacy at any time after all requirements have been met, but no later than the application to graduate deadline (http://gradschool.unc.edu/graddeadlines.html). The student must have completed all course work required by the program and the dissertation committee, completed all minor program requirements if a minor has been declared, passed both the doctoral oral and written examinations, submitted an acceptable dissertation proposal, and completed research area questions if these have been
assigned by the dissertation committee. Doctoral candidacy forms are available in the Student Services Office or online at the Graduate School’s web site.

THE DOCTORAL DISSERTATION

According to Graduate School policy, the doctoral dissertation "is expected to be of such scope, independence, and skillful presentation as to indicate that the candidate has acquired a command of the subject, has the demonstrated ability to contribute fresh knowledge or a fresh outlook to the subject, and has mastered the research methodology of the discipline."

The student is expected to consult with members of the dissertation committee at frequent intervals throughout the progress of the research, and is required under Graduate School policy to submit a progress report to each member of the committee at least once a year. More frequent reporting is desirable, and may be specified by an individual committee.

The Graduate School requirements for dissertation format are specified in the publication, A Guide to the Preparation and Submission of Theses and Dissertations. This booklet is online at http://gradschool.unc.edu/etdguide/.

Human Subjects Review

Please refer to section relevant to all students for specific IRB training requirements above.

All proposed doctoral research must be submitted to the School of Public Health Institutional Review Board (IRB) as soon as the project has been approved by the doctoral committee. This applies to all proposals, whether sponsored or not sponsored. While practice in the context of training is not subject to review by IRB, generalizable research conducted by students and/or faculty is subject to a determination whether review by the IRB is required. This determination is the purview of the IRB. Since the dissertation is a research activity that takes place under the leadership of the student with support from an advisor, safeguarding the ethical conduct of this research activity is a responsibility shared by the student.

Student research is defined online at http://ohre.unc.edu and guidance for any IRB action required for student research is also found in the “student_research_irb_guidance” document (http://ohre.unc.edu/misc/student_research_irb_guidance.pdf). (Refer to Appendix VIII.) Registration of Master’s paper proposals and dissertation proposals follows the rules for IRB action presented in the IRB guidance document referred to above. The student is listed as the lead investigators for the research activity and a faculty advisor is identified who holds ultimate responsibility for ensuring that this project complies with all University, regulatory, and fiscal requirements.

Depending on the data and research environment of the dissertation project it may not be possible or desirable for student research to be subsumed under an existing IRB approval extended to the lead investigator of a “parent study” that supports a student’s research. The decision about what is reasonable and whether the student’s proposed research meets this Institution’s guidelines for ethical conduct of research involving human subjects is made by the IRB. Students should consult with their advisors in preparing IRB applications.

Upon receipt of IRB approval, the student must complete the Verification of Compliance with Institutional Review Board Requirements form. A copy of the IRB committee’s decision must be attached to the form.
The Co-Chairs of the Public Health IRB are Professors Trude Bennett, Ruth Humphry and Mary Lynn. The Administrative Assistant is Ms. Barbara Griese. Inquiries and requests for forms, status of application and other questions should be routed through her. She may be reached at 966-9347, or by email at griese@email.unc.edu. See web site at http://ohre.unc.edu.

Data Use Agreements

If using data that is not publicly available, the IRB Committee requires a data use agreement form. This form is available from the Student Services Office or online through the Department’s web site. This form should be submitted to the study’s Principal Investigator.

Standards and Expectations for Doctoral Research in the Department of Epidemiology

The research question for a dissertation in Epidemiology can be substantive, methodologic, or theoretical. In any case, it should have a demonstrable potential for advancing the state of knowledge or practice. Standards for an adequate doctoral dissertation are expressed by expectations for a high level of achievement in the following areas:

1. **Originality** is expected in doctoral research. It may be achieved through innovation in theory, methods or substantive content, or by creative application of existing theory or knowledge to a new problem. Research that replicates findings of others without this kind of innovation, while often a worthwhile contribution, is not sufficiently original to satisfy the expectations for the dissertation.

2. **Depth** in the definition and treatment of the research topic is a requirement for doctoral-level research. It implies both technical competence and intellectual sophistication. Depth is to be gauged by the doctoral committee against standards of work publishable in peer-reviewed communications.

3. **Scholarship.** The dissertation should be competent in scholarship, as well as in scientific technique. The problem should be introduced, the study justified, and the results discussed in such a way as to place the work in its academic context. That is, the dissertation should demonstrate familiarity with the work of others, awareness of important developments and controversies, and an ability to critically synthesize and convey such knowledge.

4. **Writing Skills.** Competence in scientific writing is among the evaluation criteria for the doctoral dissertation.

Publication Requirement

The program leading to the Doctor of Philosophy in the Department of Epidemiology is research oriented, and the candidate's doctoral research is expected to make a scientifically meaningful contribution to methodology and/or substantive knowledge. Peer review in assessing whether these standards have been met is the responsibility of the doctoral committee, acting in the capacity of an internal review body.

Peer reviewed communication of research findings is both a yardstick by which the merit of scientific work is measured, and a mandate for scientists in the field of public health. The acquisition of the skills that will enable a scientist to implement these expectations should be an integral part of the doctoral training in epidemiology.

A mentored application of new skills is the preferred and most effective mode of learning, and is applied to as many components of the doctoral training in the department of Epidemiology as is feasible. The publication of research findings, and encountering external peer review should be first experienced in the didactic and
supportive environment of a training program. Postponing these experiences until after graduation can be a significant hurdle to career development.

**Implementation**

As part of the doctoral research proposal approved by the doctoral committee, a minimum of two manuscripts intended for publication must be proposed. The choice of topics and an outline of the scope of the manuscripts are prepared with input from the doctoral advisor, and are approved by the doctoral committee.

The doctoral committee, or the doctoral advisor and at least one member of the doctoral committee, serve as an internal peer review group for the final drafts of these manuscripts.

Completion of the doctoral program requires that one manuscript be submitted to an external peer review mechanism approved by the doctoral advisor. Unless an exception is requested by the doctoral advisor, the default external peer review mechanisms are either a scientific journal or a publication/scientific peer review group established by a parent study that has sponsored the doctoral research. Verification of submission is required at the time of the final defense by completing the “Verification of Submission of Dissertation Manuscripts” form. Review of the manuscript by a co-author who is not a member of the doctoral committee does not substitute for external peer review.

Neither completion of peer review by a journal nor acceptance for publication is required prior to scheduling the doctoral defense. Timely submission of manuscripts resulting from the doctoral research process is encouraged, to give the candidate an opportunity to receive external peer review comments and to experience the interaction with external peers and journal editors. Rejection of a manuscript by a journal (or equivalent external peer-review process) does not preclude a successful completion of the doctoral program. Conflicts that may emerge between recommendations from external peer reviewers and the doctoral committee are resolved by the doctoral committee, according to the academic requirements of the doctoral program. The doctoral committee is the only, and final arbiter of the acceptability of the doctoral dissertation.

If doctoral research is proposed that does not lend itself to publication according to the process outlined above, an alternative pathway to publication needs to be approved at the time of the Preliminary Oral Doctoral Examination, in order to provide an equivalent learning opportunity to this student. If in the opinion of the doctoral committee the analytic results of the doctoral research do not merit publication, this committee develops an alternative to meet the expectations of the doctoral program and to make available to the student the experience of the publication process.

**Authorship Expectations from Doctoral Research**

The doctoral candidate is expected to assume the role of lead investigator for his/her doctoral research, exercising these responsibilities and decision-making prerogatives with guidance from the dissertation committee Chair. Consistent with this role, the doctoral student is expected to serve as lead author on publications that originate from doctoral research, unless an alternative is stipulated at the time of the doctoral dissertation proposal defense as required by access to data or resources. Under these circumstances, the student’s record should indicate in writing his/her agreement with the data use specifications as well as the advisor’s endorsement. Service on the doctoral committee does not confer authorship to faculty; contributions to a publication that deserve authorship recognition should be measured individually. Authorship recommendations from the scientific editors of the major health sciences journals serve as the guidelines for this process, as summarized in JAMA 1993; 269:2282-2286 and the instructions to authors provided by the major journals.
Assuming lead authorship responsibility and its roles is part of the career development competencies acquired as part of the doctoral training. The doctoral advisor is responsible for assisting the candidate in negotiating authorship issues, particularly in the case of multi-site collaborations, and for studies that have established publication and authorship policies. Guidelines to assist in this process are found in JAMA 1997; 278:579-85, and others.

**If the doctoral research is conducted in collaboration with another institution, scientist(s) or agency supplying the data, negotiations should take place early in the planning of the doctoral research and no later than at the time of the defense of the doctoral dissertation proposal. Expectations of authorship for all publications resulting from the doctoral work should be made explicit as part of such negotiations. Such negotiations should include the student, the doctoral advisor, and the collaborating scientist(s). A written confirmation or understanding of the agreement should follow these negotiations. (Refer to Appendix XIV for publication practices.)**

It is recommended (not required) that the doctoral advisor and at least one member of the doctoral committee be willing to assume co-author roles on each of the two manuscripts, to guarantee full involvement and timely critical input.

**Format of the Dissertation**

The traditional dissertation format is a single document with no page limit. Despite its greater length, less careful and time-consuming editing is typically required than for journal publication. However, it has the disadvantages of being time-consuming to read and difficult to reduce to publishable proportions. In the preferred format, often referred to as a “manuscript dissertation,” the results chapters are prepared as manuscripts ready to be submitted for external peer review. This collection of related manuscripts is preceded by two or three chapters that present a unified review of the literature, the study questions, their rationale, the corresponding hypotheses, and the general methods common to the results chapters/manuscripts. Although each manuscript has its own discussion section, a common discussion is included as the last chapter of this type of dissertation. This format is attractive in many ways, and is encouraged. Although more demanding in the writing stage, the use of this format will result in a shorter, more readable dissertation, and more importantly, it leads more quickly to its submission for publication.

The “manuscript dissertation” is strongly recommended by the Department and is used almost without exception. A minimum of two manuscripts must be prepared by the student, in collaboration with members of the doctoral committee in supporting roles. These manuscripts must be of a quality sufficient to have the potential to be published in a first rate, peer-reviewed journal. *Even if a monograph style is chosen as the format for the dissertation, a minimum of two manuscripts must be prepared by the student, one of which needs to be submitted for external review prior to the defense.* Exceptions to the format should be specifically applied for (to the advisor).

While the actual manuscripts are formatted as stand-alone documents ready to be submitted for external peer review, for the purpose of the dissertation they must be integrated into a coherent document that meaningfully links these manuscripts to the aims of the doctoral research. Thus the complete doctoral dissertation document includes the following elements (all but an introduction are required).

1. Abstract
2. Introduction
3. Critical review of the literature
4. Specific aims or statement of the study questions, and their rationale
5. Hypotheses to be tested
6. Study design, population, measurements/instruments, quality assurance
7. Analytic approach  
8. Results (manuscripts)  
9. Overall discussion and interpretation of findings (with reference to overall aims of the doctoral research)

See Appendix XV for a sample Table of Contents for a dissertation. For details on table of contents, pagination, typeface, etc., consult the Graduate School’s Guide to Theses and Dissertations (http://gradschool.unc.edu).

Data Source

The source of data or study material for dissertation research is determined by the study question. Primary data collection and secondary analysis of existing data may be acceptable, as determined in collaboration with the advisor.

Breadth

Innovation rather than breadth is a requirement for the dissertation research question. The dissertation may be narrowly focused on a specific problem, if it has the potential to advance the state of the science in a substantive, methodologic, or public health area. However, consideration of the wider implications of the research question and results in the Introduction and Discussion portions of the dissertation is expected.

Time Line and Interaction with the Doctoral Committee

1. The doctoral committee convenes with the student at least on three occasions. These meetings are required, formal milestones in the student’s doctoral research and preparation of a doctoral dissertation. They are

   i. Preliminary oral examination (defense of the doctoral research proposal).

   ii. One or more interim meetings.

   At least one interim meeting of the committee is held approximately six months prior to final defense (a minimum of four months prior to final defense) to review progress and to provide input from the full committee for the remaining stages of the doctoral research and publication process leading to the final defense. The interim meeting includes a presentation by the candidate to the committee. A majority of the committee must convene on the UNC campus; off-site members of the committee may participate via a mutually agreeable conferencing medium. Exemptions from the requirement to hold an interim meeting of the doctoral committee due to exceptional circumstances require approval by Graduate Studies Committee.

   iii. Final doctoral defense.

   The preliminary oral examination and the final doctoral defense are addressed elsewhere in this document. The purpose of the interim meeting is to provide an opportunity for the student to obtain direct consultation with the entire committee prior to completion of the doctoral research process and the dissertation. Issues to be addressed in the interim meeting include reaching consensus on the scope, completeness, and time line of the dissertation, clarifying outstanding issues of analysis and interpretation, and to set up a dissertation close-out schedule. At that time, the Chair of the doctoral committee also asks each committee member to identify any concerns regarding the status of the doctoral research. Following this meeting a brief summary
of the decisions and recommendations is distributed by the student and the committee chair to the full committee and a “Documentation of Interim Doctoral Committee Meeting and Dissertation Close-out Schedule” is submitted by student to the Student Services Office. **A final defense may not be scheduled without a prior interim meeting of the committee.**

2. Notification of final defense.

The dissertation close-out schedule, signed by the advisor and the student, constitutes the notification of final defense, and is filed with the Student Services Office.

The student submits the final dissertation document to the committee at least two months prior to the final defense. **Failure to meet this timeline requires re-scheduling of the doctoral defense.** The student contacts each member of the committee at that point to establish a schedule that allows (a) time for each committee member to read the dissertation, (b) time for the student to meet with each committee member if needed, and (c) an opportunity for the student and advisor to rehearse the defense presentation.

3. Responsibilities of the Committee Members

The student must provide adjuncts or committee members from other departments with a copy of the departmental policies (available from Student Services Office or online at [http://www.sph.unc.edu/epid/policies/handbook_8233_7429.html](http://www.sph.unc.edu/epid/policies/handbook_8233_7429.html)). At the preliminary oral examination, the committee Chair will review the process described above, the roles and expectations, and the time line. The student is then authorized to proceed with the proposed doctoral research.

**Submission of Doctoral Dissertations**

The policy adopted by the Epidemiology faculty for submission of the dissertation follows:

**The written dissertation document must be in final form prior to the final defense.** This implies that all pages, references, and appendices are in place and that a thoughtful discussion has been completed. The dissertation will have been thoroughly proofread and editorial problems corrected. It is expected that following the defense, substantive changes in the written document will be minimal. Any subsequent retyping should at most involve a few pages so that the student would not be put to undue expense. This being the expectation of the student, the implication is that each committee member will have reviewed thoroughly the entire finalized document well in advance of the defense.

**REMINDER:** Do not use forms from Graduate School for report of defense. These pre-filled forms need to be picked up from the Student Services office before the proposal defense.

**APPLICATION FOR GRADUATION**

The student must apply for the degree for a specific graduation term by the Graduate School deadline. **Degree application forms and deadlines can be found at [http://gradschool.unc.edu/graddeadlines.html](http://gradschool.unc.edu/graddeadlines.html).** The Graduate School can make no exceptions to this deadline. If a student fails to graduate in the term applied for, they must re-apply; no prior application will suffice.

**THE FINAL DEFENSE OF THE DISSERTATION**

The Final Defense (the final doctoral oral examination) is a formal requirement of the Graduate School. **The student must be registered for 3 credits of EPID 994 at the time it is held, and all committee members are required to be in attendance.** Once a date and time have been agreed upon by the student and committee
members, the student should notify the Student Services Office so that a room can be arranged for and an announcement of the defense posted. **The defense must be announced via the Epidsems distribution list (epidsems@unc.edu) at least one week in advance.** The announcement should include student name, title of presentation, indication that this is a doctoral defense, name of advisor, date, time, and location. Program areas are encouraged to issue specific invitations to colleagues outside the department, citing the paper titles.

To reserve the EPID conference room, email Chandra at ccaldwel@email.unc.edu. To reserve a room in the SPH, go to [http://www.sph.unc.edu/rooms](http://www.sph.unc.edu/rooms)

The final defense includes a presentation of the results of the doctoral research to the doctoral committee, other faculty, and students. This is followed by discussion and criticism of the scientific work presented and the final written document.

The first portion of the Final Defense is open, and is announced several days in advance. The candidate presents the research, and a general discussion period follows. Following this open meeting, the student and Committee meet in closed session for a final examination of the work. The final results are reported to the Graduate School after all committee members have signed the “Report of the Final Oral Examination” obtained from the Student Services Office. **The Chair of the dissertation committee should not sign this document until the dissertation is in final form. This form will not be submitted to the Graduate School until all corrections/modifications to the final document have been completed.**

**SUBMISSION OF THE DISSERTATION TO THE GRADUATE SCHOOL**

The student should consult [A Guide to the Preparation and Submission of Theses and Dissertations](http://gradschool.unc.edu/etd/) for information on preparation of the dissertation for submission to the Graduate School. These guidelines should be strictly adhered to, as failure to do so will result in rejection of the final product by the Graduate School. Dissertations may now be submitted to The Graduate School in electronic format. Refer to The Graduate School website ([http://gradschool.unc.edu/etd/](http://gradschool.unc.edu/etd/)) for specific details.
Each major program area has established guidelines to ensure that the curriculum successfully addresses those issues that are specific to that area of research. This includes identification of learning objectives, methods for satisfying those learning objectives and monitoring of evidence of achievement of the learning objectives. Appendix XVI includes current objectives for the following program areas: cancer, cardiovascular disease, environmental/occupational, injury, health care and pharmacoepidemiology, infectious diseases, and reproductive epidemiology. The learning objectives can also be found online at:
http://www.sph.unc.edu/epid/program_guidelines_199_564.html
The following section contains other, non-academic, but useful information for all students, including employment resources, tips on getting in state residency (for tuition purposes) and tips for success from the Student Services Office and other students.

EMPLOYMENT RESOURCES

There are two primary sources of information about student job opportunities –

- the epidjobs listserv, as described in the Listserv section
- School of Public Health Career Services Office at: (http://www.sph.unc.edu/student_affairs/career_services.html). The SPH Career Services Office provides assistance with resume preparation, interview techniques, internships, and postgraduate job searches.

Locating a TA/RA position

Emails indicating available TA/RA positions are sent through the EpidJobs listserve. For information on how to sign up, please refer to Appendix I. Other methods of finding a TA/RA position include meeting with your advisor or other faculty members both within and outside of the department that may have a teaching/research opportunity of interest. In addition, students should take a proactive role in finding a TA/RA position. This includes networking with other students and professors. Also you can refer back to the TA requirement section on page 35 for information on courses that use TAs.

Refer to http://www.sph.unc.edu/epid/faculty/staff_ra/ta_hiring_11486_9842.html for hiring instructions.

ADVICE FROM THE STUDENT SERVICES OFFICE

Communication

Administrative:

Read the emails that are sent out by Nancy or Carmen! It’s extremely frustrating for us when we send information out via the listserv only to have students asking us for the very same information a couple of days later. (And the faculty are just as guilty!). On your end it may “take just a minute” but on our end that’s often multiplied by 10 or 20 or 30 students, which is extremely disruptive to our work. Sometimes the consequences are more serious, such as cancelled registrations because you didn’t pay attention to our memos. We’re here to help you, but you also need to help yourselves.

Professional:

Get to know your colleagues. Networking is a critical skill that serves many purposes: epidemiologic knowledge sharing, job connections, resource identification, etc. While your advisor plays an important role, you should also get to know other faculty (especially those within your research area!). It’s okay to make an appointment to talk with faculty just to learn about their research. It’s also important to get to know your peers. They often have very helpful insight into how to navigate the program. In addition, project staff members can be a valuable resource.
Document Sharing

Do NOT email multi-page documents (course papers, proposal, etc.) to faculty without first asking them if they’re willing to accept them electronically.

Graduating

The Problem:

Most students decide on a graduation date, determine the last day to complete requirements for that date, and then work backwards in scheduling their defense. The result is that those students find themselves in the position of always racing to meet an unrealistic last minute deadline. This creates a tremendous amount of stress for both students and committee members.

The Solution:

Give yourself some breathing room. If you want to graduate in May, you should be confident that you'll have a complete draft of your master's paper by March 1 or your dissertation by February 1. The target dates for August graduation would be June 1 (master's) and May 1 (doctoral). Target dates for December graduation would be October 1 (master's) and September 1. While these timelines may seem excessive to you, experience has shown that students are not good at judging the time needed to complete the master's paper and dissertation.

Relax. If you finish earlier than anticipated you can always use the time to get out some more publications and search for jobs!

Tuition Remissions for TAs and RAs

Tuition awards cannot be finalized until after the semester begins. Students who anticipate receiving tuition awards should be sure to submit the deferment form to the Cashier’s Office by the announced date. Once you receive confirmation that you have qualified for tuition awards, you should allow several weeks for the awards to post to your account. Don't panic about bills you're getting for tuition. Tuition remission awards (out-of-state students only) will post first. However, in-state awards don't post for several weeks until money actually moves from the project accounts to the cashier's account. If your bill is for the amount you're sure we're paying for you, you can disregard your bill. However, if you owe fees or other charges they must be paid immediately.

Loans from the Office of Scholarships and Student Aid

Loans are typically processed before departmental tuition awards are made. This can sometimes cause confusion about exactly how much of a loan award a student is eligible for. Therefore, also use caution in spending your loan money. Make sure that your tuition awards have been processed before spending your loan money. That will help to ensure that you don’t have to pay back the excess.

Managing Stress

Managing and relieving stress is an important part of succeeding in graduate school, and necessary for your health. Campus Health Services offers a wealth of information on recognizing stress and finding ways to cope (http://campushealth.unc.edu/index.php?option=com_content&task=view&id=670&Itemid=167)
SURVIVAL TIPS FROM STUDENTS

General Advice

• Get input from your fellow students, especially those one or two years ahead in the program and those in your substantive area about courses, instructors and work loads.
• Attend journal clubs, seminars, and other meetings related to your area of interest

Advice for Working in Groups

During graduate school, you will be required from time to time to work on class assignments in groups. This is good experience for future employment and an opportunity to build relationships with fellow students. Following are some useful tips for working successfully in groups and making the most of your team experience:

• **Develop common expectations** – at the beginning of a team project, communicate with other team members to set common expectations. Find out when others are most available to work and to meet, what skills they bring and what their interests are in the work, and what their preferences are for communication (e.g., meet in person or communicate via email).
• **Be punctual to team meetings** – it can be difficult to find a time when all students can meet, so when a meeting has been set, be sure to be punctual and to show up with all the necessary materials to work with the team.
• **Be accountable for the work you are assigned** – when dividing up the work load, be sure that you will have the time to do all the work that you are assigned, or bring up your concerns or adjust the deadline so that all team members have the same expectation regarding what will be done and when. Whatever work you agree to do for the team, be sure to accomplish it within the deadline or let students know as soon as possible if any unexpected issues arise. Communication is essential.
• **Be respectful of other’s opinions** – take the time to listen carefully to other group members thoughts and ideas, and ask questions to ensure that you understand what is said. Show support for others’ contributions and try to build your ideas on what is said. If you disagree, try to find a common ground or interest that can be satisfied, or work toward a compromise.
• **Balance control with contribution** – it can be tempting to want to dominate the discussion or influence the direction of the group in the way you feel is best, or take on more of the work to make sure it is done “right.” However, this can be counterproductive for team development and can lead to other members being less involved and you feeling overloaded or not supported. Try to balance the desire to control the outcome of the project with the recognition that all team members need to contribute equally to the project, and that developing productive team skills is as important as (or more important than) getting the highest grade.

Connecting with Other Students

Forming a student study group is an excellent way to build friendships while getting and sharing help on coursework. The earlier that you seek out a study group, the better. Some tips for forming study groups include:

• **Seek diversity** – each student will have a different perspective and mastery of the coursework, depending on their background. Look for students who come from different backgrounds and who can complement your skill set and knowledge base.
• **Be flexible** – the more flexible your schedule, the easier it will be to find a common time to meet with other students. If you have a heavy course or work load, it may be more difficult finding time to meet during the day. In this case, try to find students with similar schedules or those who are willing to meet in the evenings or on weekends.
• **Be persistent** – even if you cannot attend every study session, ask your study group members to keep you on the list and let them know that you hope to participate in the future.

For additional tips on being a successful graduate student, refer to [www.successfulacademic.com](http://www.successfulacademic.com).
ESTABLISHING RESIDENCY FOR TUITION PURPOSES

Under North Carolina General Statute Chapter 116.143.1, to qualify for in-state tuition an applicant (legal resident) must demonstrate a preponderance of evidence:

- that s/he established and maintained a bona fide domicile in North Carolina at least twelve months before the first day of classes,
- with the intent to make North Carolina a permanent home indefinitely, and
- that s/he was not in North Carolina solely to attend college.

Graduate students are able to apply through an online application process. The online application can be found at [http://gradschool.unc.edu/student/residency/#notification](http://gradschool.unc.edu/student/residency/#notification).

Filing Periods

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<th>Term</th>
<th>Application Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall Term 2009</td>
<td>Please file your application by 5 p.m. Monday, August 31, 2009.</td>
</tr>
<tr>
<td>Spring Term 2010</td>
<td>Please file your application by 5 p.m. Friday, January 15, 2010.</td>
</tr>
<tr>
<td>Summer Session I 2010</td>
<td>Please file your application by 5 p.m. June 15, 2010 (last day of exams).</td>
</tr>
<tr>
<td>Summer Session II 2010</td>
<td>Please file your application by 5 p.m. July 23, 2010 (last day of exams).</td>
</tr>
</tbody>
</table>

Myths and Misconceptions (from the Residency PowerPoint Presentation)

- Homeownership guarantees residency
- I must have a Driver’s License
- I cannot leave during the first 12-months
- I must attend a church
- After my first year I’m guaranteed residency
- It is not the day you step foot in North Carolina that starts your clock, but the accumulation of evidence that starts it.

Other advice

- Talk to some of your fellow students who have been through the process.
- Be careful how you phrase things on your application. For example, do not say you went "home" to Montana for the holidays or they'll conclude that "home" is there and not in North Carolina even though we all know that you meant you went to visit family. The committee interprets that as meaning "your home" and sees it as an easy way to deny you residency.
- Try to show connections to the community that are NOT part of an SPH or UNC project/activity (e.g., you volunteer with Habitat for Humanity, as opposed to "as part of an SPH student group, I volunteer with...").
- Has a local employer told you that they'd love to have you work with them after graduation? Then note that you have a local job offer.
- Try to demonstrate that you have a commitment to the state. Make travel plans within the state.
- If your out-of-state parents claimed you on their tax return for the past year, you will not be eligible for in-state status.
CONTACT INFORMATION FOR CAMPUS RESOURCES

Audio/Visual Services

http://www.sph.unc.edu/iis/audio_visual_equipment_1100_4434.html

Business Cards

To order business cards, go online at http://www.printing.unc.edu/Printing_Services/ordering-1.html

Campus Services

Cashier:  cashiers.unc.edu, 962-5856, funded@unc.edu
University Registrar:  regweb.unc.edu, 962-3954
International Student and Scholar Services: http://oisss.unc.edu/, 962-5661
Graduate School:  gradschool.unc.edu
    Enrolled Students:
    A-K – Lou Anne Phelps, 962-6313 laphelps@email.unc.edu
    L-Z – Nancy Wines, 962-6316, nancy_rose@unc.edu

Payroll Issues

EPID Fiscal Office – MC 2107

Room Scheduling

EPID Conference Room:
    Email Chandra at ccaldwel@email.unc.edu
SPH Classrooms (whether for a course or a presentation):
    http://www.sph.unc.edu/rooms/

Student Health

Campus Health Services, 966-2281, http://campushealth.unc.edu/

Tech Support

http://www.sph.unc.edu/iis/
## DEPARTMENTALLY "OWNED AND OPERATED" E-MAIL MAILING LISTS

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<tr>
<th>LISTNAME/ PURPOSE</th>
<th>TO SUBSCRIBE, SEND E-MAIL TO THE ADDRESS BELOW...</th>
<th>...WITH THE MESSAGE</th>
<th>TO SEND E-MAIL TO PEOPLE SUBSCRIBED TO THE LIST</th>
</tr>
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<tr>
<td>EPIDADJ (Global distribution of messages to all local adjunct and clinical Epid faculty)</td>
<td>Contact Lesa McPherson (<a href="mailto:lesa_mcpherson@unc.edu">lesa_mcpherson@unc.edu</a>)</td>
<td></td>
<td><a href="mailto:epidadj@unc.edu">epidadj@unc.edu</a></td>
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<tr>
<td>EPIDADJDISTANT (Global distribution of messages to all distant adjunct and clinical Epid faculty)</td>
<td>Contact Lesa McPherson (<a href="mailto:lesa_mcpherson@unc.edu">lesa_mcpherson@unc.edu</a>)</td>
<td></td>
<td><a href="mailto:epidadjistant@unc.edu">epidadjistant@unc.edu</a></td>
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<tr>
<td>EPIDFACULTY (Global distribution of messages to all Epid faculty)</td>
<td>Contact Lesa McPherson (<a href="mailto:lesa_mcpherson@unc.edu">lesa_mcpherson@unc.edu</a>)</td>
<td></td>
<td><a href="mailto:epidfaculty@unc.edu">epidfaculty@unc.edu</a></td>
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<tr>
<td>EPIDPOSTDOC (Global distribution of messages to all Epid postdocs)</td>
<td>Contact Lesa McPherson (<a href="mailto:lesa_mcpherson@unc.edu">lesa_mcpherson@unc.edu</a>)</td>
<td></td>
<td><a href="mailto:epidpostdocs@unc.edu">epidpostdocs@unc.edu</a></td>
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<tr>
<td>EPIDSTAFF (Global distribution of messages to all Epid staff)</td>
<td>Contact Lesa McPherson (<a href="mailto:lesa_mcpherson@unc.edu">lesa_mcpherson@unc.edu</a>)</td>
<td></td>
<td><a href="mailto:epidstaff@unc.edu">epidstaff@unc.edu</a></td>
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<td>subscribe epidstudents yourfirstname yourlastname</td>
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</tr>
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<td><a href="mailto:epidall@unc.edu">epidall@unc.edu</a></td>
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<td>EPIDJOBS (To assist current Epid students in learning about research assistant and teaching assistant positions</td>
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<td>subscribe epidjobs yourfirstname yourlastname</td>
<td><a href="mailto:epidjobs@unc.edu">epidjobs@unc.edu</a></td>
</tr>
<tr>
<td>EPIDSOCIAL (For non-academic matters of potential interest to students. Students must enroll themselves)</td>
<td><a href="mailto:listserv@unc.edu">listserv@unc.edu</a></td>
<td>subscribe epidsocial yourfirstname yourlastname</td>
<td><a href="mailto:epidsocial@unc.edu">epidsocial@unc.edu</a></td>
</tr>
</tbody>
</table>
APPENDIX II

SAMPLE SCHEDULE FOR 2-YEAR MASTERS PROGRAM  
(assumes full-time enrollment of 9 or more hours per semester)

<table>
<thead>
<tr>
<th>FALL</th>
<th>Course #</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>EPID 705</td>
<td>2</td>
</tr>
<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td>BIOS 600</td>
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<tr>
<td></td>
<td>Substantive EPID course or SPH core elective</td>
<td>3</td>
</tr>
</tbody>
</table>

Summer registration is not routinely required by the department. However, certain types of funding may require that the student continue as a formally enrolled student throughout the summer terms.

SAMPLE SCHEDULE FOR 18-MONTH MPH PROGRAM  
(assumes full-time enrollment of 9 or more hours per semester)

<table>
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<tr>
<td></td>
<td>EPID 992</td>
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<table>
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<td></td>
<td>EPID 992</td>
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<tbody>
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<td></td>
<td>BIOS 545</td>
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<td></td>
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</tr>
<tr>
<td></td>
<td>SPH core elective</td>
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</tr>
<tr>
<td></td>
<td>SPH core elective</td>
<td>3</td>
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## APPENDIX III

### SAMPLE SCHEDULE FOR 2-YEAR MSCR PROGRAM
(assumes full-time enrollment of 9 or more hours per semester)

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<tr>
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<th></th>
</tr>
</thead>
<tbody>
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<td></td>
<td>Course #</td>
<td># Credits</td>
<td>Course #</td>
</tr>
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<td></td>
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</tr>
<tr>
<td>EPID 992 (Master’s Paper)</td>
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</tr>
<tr>
<td>MSCR Track Course</td>
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</table>
**APPENDIX IV**

**List of EPID Substantive Courses**

The following courses serve to satisfy the requirements for a course in a substantive research area:

- EPID 620I: Aging and Health
- EPID 735: Cardiovascular Disease Epidemiology
- EPID 737: Advanced Cardiovascular Epidemiology
- EPID 743: Genetic Epidemiology: Methods and Applications
- EPID 745: Molecular Techniques for Public Health Research
- EPID 750: Fundamentals of Public Health Surveillance
- EPID 751: Emerging and Re-Emerging Infectious Diseases
- EPID 752: Introduction to Methods in Infectious Disease Epidemiology
- EPID 753: Prevention and Control of Infectious Diseases at the Level of the Community
- EPID 754: Mathematical Modeling of Infectious Diseases
- EPID 756: Control of Infectious Diseases in Developing Countries
- EPID 757: Epidemiology of HIV/AIDS in Developing Countries
- EPID 758: Methods and Principles of Applied Infectious Disease Epidemiology
- EPID 759: Methods in Field Epidemiology
- EPID 765: Methods and Issues in Pharmacoepidemiology
- EPID 770: Cancer Epidemiology and Pathogenesis
- EPID 771: Cancer Epidemiology Methods
- EPID 772: Cancer Prevention and Control (crosslisted as HPAA 765, HBHE 765; HPAA administratively responsible)
- EPID 775: Advanced Cancer Epidemiology: Classic and Contemporary Controversies in Cancer Causation
- EPID 780: Occupational Epidemiology
- EPID 783: Injury as a Public Health Problem (crosslisted as HBHE 725, HBHE administratively responsible)
- EPID 785: Environmental Epidemiology
- EPID 786: Community-Driven Research for Environmental Justice
- EPID 800: Epidemiology of Medical Care
- EPID 805: Clinical Epidemiology and Clinical Research Methods (K30 Program, Fall) (http://www.med.unc.edu/orfd/researchdev/crc/applying.htm)
- EPID 810: Physical Activity Epidemiology and Public Health (crosslisted as NUTR 810, EPID administratively responsible)
- EPID 813: Nutritional Epidemiology (crosslisted as NUTR 813, NUTR administratively responsible)
- EPID 814: Obesity Epidemiology (crosslisted as NUTR 814, NUTR administratively responsible)
- EPID 815: Diet and Cancer (crosslisted as NUTR 815, NUTR administratively responsible)
- EPID 818: Analytical Methods in Nutritional Epidemiology (crosslisted as NUTR 818, NUTR administratively responsible)
- EPID 825: Social Determinants of Health: Theory, Method & Intervention (crosslisted as HBHE 802, HBHE administratively responsible)
- EPID 826: Social Epidemiology: Concepts and Measures
- EPID 827: Social Epidemiology: Analysis and Interpretation
- EPID 851: Perinatal Epidemiology (crosslisted as MHCH 851, EPID administratively responsible)
- EPID 853: Advanced Topics in Perinatal & Pediatric Epidemiology (crosslisted as MHCH 853, EPID administratively responsible)
APPENDIX V
Additional Information on BIOS Courses

- Bios 600, 511, 545, 662, 663, 664, 665, 668 are considered applied courses and should be appropriate for most EPI students.

- BIOS 600 is the intro BIOS course taken by all EPI students.

- BIOS 511 is a very useful SAS computing course.

- BIOS 662 and 663 are essentially required of BIOS PhD students.

- Bios 550, 660, 661 are more theoretical courses taken by BIOS Masters and PhD students.

- BIOS 757 and 767 are more advanced courses, which may be suitable for very strong EPI students.

- An average to good student in EPI should be handle BIOS 600, 511, 545, 664, 665, 668.

- A good to very good EPI student should be able to do well in BIOS 550, 662 and 663.

- An excellent EPI student with a strong background in theoretical statistics should be able to manage in BIOS 660 and 661.

- Outstanding students in EPI with a strong background in both theoretical and applied statistics, or with a previous Masters degree in statistics, should be able to manage in BIOS 765 and 767.

- One possible option for a minor for average to good EPI students is: BIOS 511, 550, 545, 668, 665

- A second option for good to very good to excellent EPI students is: BIOS 511, 550, 662, 663

- A third option for a minor for excellent to outstanding theoretical students is BIOS 550, 660, 661, 662 (or 663).

- A minor in Biostatistics consists of 15 credit hours. For more specific requirements for the BIOS minor, please contact the BIOS department located on the 3rd floor of McGavran-Greenberg building.
APPENDIX VI

Recurring "Generic" Questions in the Masters Examination

All questions should be answered using information in the article or first year coursework. Unless otherwise stated, answers are expected to be 2-4 sentences in length.

1. State the primary research question or conceptual hypothesis and briefly summarize its rationale (i.e., what the question is and why it is appropriate and important to study).

2. Identify the study design (i.e., case-control, cohort, cross-sectional, randomized trial, etc.) and justify your choice.

3. How appropriate is the design of this study for addressing the research question?

4. Evaluate the suitability of the study population for addressing the research question with regard to:
   a. Validity and feasibility (i.e., what are strengths and limitations of this particular investigation)
   b. Generalizability (i.e., what are strengths and limitations for generalizing to other populations)

5. What evidence do the investigators provide that the number of subjects was adequate to address the study hypothesis?

6. How do the authors define the exposure variable/study factor in the present study? How well does their method of measurement succeed in operationalizing this definition? (You do not need to address biochemical or laboratory issues here.)

7. How do the authors define the disease/outcome variable in the present study? How well does their method of measurement succeed in operationalizing this definition?

8. Briefly describe quality control features of the study and comment on their adequacy.

9. Identify the primary measure of effect (e.g., risk ratio, odds ratio, incidence density ratio) used for testing the hypothesis, state its definition in words, and give its algebraic formulation.

10. Calculate an OR (RR) for specific strata within the study population.

11. Calculate a confidence interval and give an interpretation as to the magnitude and precision of effect.

12. Briefly assess the appropriateness of using the primary measure of effect for this study question and data; give the arguments for and against using this measure.

13. Briefly discuss the adequacy of the procedure for assessing the statistical evidence for a crude association (refer, as appropriate, to such issues as level of measurement of the variables, appropriate use of statistical hypothesis tests or confidence intervals, significance level, impact of violation of assumptions, etc.).
14. How did the investigators control for confounding in this study?

15. Assess the adequacy of control for confounding in the assessment of the primary relationship, considering the state of knowledge in the field as reflected in the article.

16. Is effect modification important in this study? Your answer should refer to the rationale for investigating effect modification, the adequacy of the investigators' approach to the question, and your evaluation of the evidence for and against the investigators' conclusion concerning effect modification.

17. Evaluate the procedures used for matching in this study.

18. Evaluate each of the following sources of bias (selection bias, information bias, confounding) and describe the magnitude and direction of possible bias in effect estimation.

19. Identify and briefly assess the probable impact on the results and conclusions of the one or two primary threats to the (internal) validity of the study. Briefly assess their likely impact on the results.

20. Identify a major improvement that could be made in the study methodology. Indicate how and to what degree the change would improve the results of this and future studies.

21. Succinctly state and evaluate the authors' primary conclusion. Your answer should present at least two specific points or pieces of evidence from the article (beyond the fact that a significant association was observed) and how each bears on validity of the conclusion.

22. On the assumption of a causal relationship, assess the public health importance or potential impact of the relationship observed. (Cite or compute a basic measure of impact if possible.)

23. What public health recommendations would you make based upon the results of this study?
APPENDIX VII

Guidelines for Choosing Master's Topics

1. Student and advisor have preliminary meeting to discuss the process of identifying a topic area. The student should bring to this meeting a list which includes: (i) broad areas of interest; (ii) previous experiences which can be used to formulate a thesis plan. The advisor brings a list of: (i) on-going projects or datasets which lend themselves to a master's thesis; (ii) suggestions for ways of identifying topics, including recent journal articles, discussions with adjunct faculty, etc.

2. Student presents list of ideas for master's paper to advisor: 5 - 10 topics are listed based upon interest, readings, ongoing discussion with faculty and other students. Advisor and student discuss these options and other potential topic areas.

3. Advisor and student reach consensus on one or two topic areas. Student writes one paragraph idea statement further exploring each topic area.

4. Advisor and student agree on topic. Student writes detailed outline for the topic.

[Note: It is understood that choice of topic area may require changing of advisors.]

5. Second reader identified by student and advisor.

6. First draft of master's paper presented to advisor.

7. Next draft of master's paper presented to advisor and second reader.

8. Scheduling of master's paper presentation (Note: presentation can be work in progress).

9. Final draft of master's paper approved by advisor and second reader.
APPENDIX VIII

IRB GUIDANCE FOR STUDENT RESEARCH AND CLASS PROJECTS

Federal regulations and university policies require Institutional Review Board (IRB) approval for research with human subjects. This applies whether the research is conducted by faculty or students, or by individuals or a group. Failure to obtain proper approval in advance may jeopardize your data, prevent you from publishing the results, and place you and the university in violation of federal regulations. However, most class projects are conducted for educational purposes and not as research, and will not require IRB approval. This guidance will help you determine whether you need to get approval from the IRB before conducting a given activity. All forms and additional guidance are available at <ohre.unc.edu>

### STUDENT RESEARCH

Student research activities include undergraduate honors theses, masters theses or projects, doctoral dissertations, or comparable activities. IRB approval is generally required if humans subjects are involved, either directly or through use of data about them. The student researcher may apply as Principal Investigator (PI), with a faculty advisor as co-signator. Below are some common scenarios, with variable processing requirements.

<table>
<thead>
<tr>
<th>Scenario</th>
<th>IRB Approval Required</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STUDENT RESEARCH</strong> that involves direct interaction with individuals (e.g., in person, or via mail, email, web survey, or telephone), or data from human subjects for which the researchers will have access to identifiers or Protected Health Information (PHI) like medical records (subject to HIPAA regulations).</td>
<td><strong>Submit IRB application form</strong></td>
<td>Submission is required even if the data collection is covered by another IRB application under someone else’s name, UNLESS the student’s use is completely subsumed under that existing study, with nothing new added.</td>
</tr>
<tr>
<td><strong>STUDENT RESEARCH</strong> that is limited to secondary analysis of data, records or specimens that are either publicly available, deidentified or otherwise impossible to be linked to personal identities. This also means that data or records contain no Protected Health Information (PHI) that is subject to HIPAA</td>
<td><strong>Submit form for “Determination Whether Research or Similar Activity Requires IRB Approval.”</strong></td>
<td>A data use agreement between the researcher and the data custodian may still be required to verify that the researcher will not have access to identifying codes. It is this “delinking” of data from personal identifiers that allows the IRB to waive review.</td>
</tr>
<tr>
<td><strong>STUDENT RESEARCH ACTIVITIES using departmental subject pools</strong> (e.g., Psychology, Business, Political Science, Journalism and Mass Communication) even when the research activity is conducted for educational purposes as a class requirement</td>
<td><strong>IRB approval required</strong>—<strong>submit an IRB application form for each activity by an individual or small group</strong></td>
<td>Student researcher (PI), co-investigators (if a group) and faculty advisor should have current research ethics certification</td>
</tr>
</tbody>
</table>

### CLASS PROJECTS

Most class projects are conducted for educational purposes and not as research. While some require submission of an **IRB application** or a **determination that IRB approval is not required**, many class projects require neither.

<table>
<thead>
<tr>
<th>Scenario</th>
<th>IRB Approval Required</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CLASS PROJECTS</strong> that involve secondary data that include Protected Health Information (PHI) that are subject to HIPAA regulations*</td>
<td>When there are several students in the class using datasets that include PHI, a single IRB application may be submitted by the course instructor as PI, listing all students who will have access to PHI, if only one student is using PHI, then an individual IRB application with the student as PI may be submitted.</td>
</tr>
</tbody>
</table>

*Access to PHI requires a waiver of HIPAA authorization, which requires an IRB application and IRB approval.
• **CLASS PROJECTS** that involve direct interaction and are undertaken as both an educational experience and as research (e.g., results of these activities will be presented publicly, or otherwise disseminated, or the data will be stored and used by the students or others as research data).

Note: Such projects may be very similar to one another. For example, each student may interview one or more persons for a group of oral histories, or conduct telephone surveys as part of a yearly poll, but all in the class follow the same general script or guidelines. If class projects follow different protocols, a table or chart can describe these more individualized activities

IRB approval required -- a single application with the class instructor as PI will generally be sufficient.

The PI must have research ethics certification. Taking into account the sensitivity of the information to be collected, the instructor can require that students complete the CITI online course, or the instructor may provide comparable training, with the approval of the IRB.

• **CLASS PROJECTS OR PRACTICA** that involve direct interaction (e.g., in person, via mail, email, web surveys, or telephone), but where the purpose is training, an educational exercise or professional development, and not research. The project or practicum is not “research” even if students ask people questions as part of learning how to conduct interviews or surveys, take histories, administer assessments, or perform “in-house” evaluations as requested by the practicum site.

Exceptions:
1. If the intent is to carry out a practicum AND simultaneously collect research data, then an IRB application should be submitted for approval prior to beginning the activity.
2. If a student decides after the completion of a practicum activity to pursue additional activities with the same information for a master’s project or paper, then an IRB application describing secondary data use should be submitted for approval, as above.

Neither IRB approval nor IRB Determination required -- but may be requested if instructor or students are unsure, or if documentation is required (e.g., for access to participants).

Class instructor and department are responsible for providing the necessary training in respecting the privacy of the individuals and the confidentiality of any resulting information, along with training in the relevant professional ethics.

Instructor provides information about the assignment for the students to distribute to people who participate in these class projects. List the instructor as the appropriate contact person should questions arise.

• **CLASS PROJECTS** involving secondary data analyses that are assigned and conducted as educational exercises, and that use publicly available data or anonymous data (where there are no identifiers in anyone’s possession)

Neither IRB approval nor IRB Determination required

Class instructor and department are responsible for providing the necessary training in respecting the confidentiality of the data

• **CLASS PROJECTS** involving secondary data analyses that are assigned and conducted as educational exercises, and that use datasets that include private information and codes that link to identifiers, but the students do not have access to the identifiers

Neither IRB approval nor IRB Determination Required

Class instructor and department are responsible for providing the necessary training in respecting the confidentiality of the data

Class instructors and departments are encouraged to contact the relevant IRB for guidance about various ways to handle topics such as privacy, confidentiality, informed consent, and professional ethics when class projects are part of the course syllabus. IRB chairs and staff can share expertise related to managing risks of deductive disclosure, coercion-free recruiting, informed consent, and special considerations for projects that include potentially vulnerable individuals. These issues may still remain even when IRB approval is not required, in which case instructors, advisors, departments and schools play an even greater role in providing the appropriate guidance and oversight.

Student Research & Class Projects Guidance 4-5-06.doc
APPENDIX IX

Sample Title Page for Master's Paper (applies to MPH, MSPH, MSCR degrees)

MASTERS PROGRAMS AND SLEEP DEPRIVATION
AMONG EPIDEMIOLOGY STUDENTS

by

A. Tired Student

A Master's Paper submitted to the faculty of the University of North Carolina at Chapel Hill in partial fulfillment of the requirements for the degree of Master of Public Health [or Master of Science in Public Health] in the Department of Epidemiology.

Chapel Hill

2008

Approved by:

___________________________
John Doe, PhD
Advisor

___________________________
Jane Doe-Smith, MD, MPH
Reader

Date of IRB Approval: ____________

66
IMPORTANT: Students who do not hold a prior master’s degree in a related field will be required to complete the MSPH (Master of Science of Public Health) as part of the requirements toward the PhD. The MSPH requirements are comparable to the MPH requirements. This may add one to two years to the program.

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<th># Credits</th>
</tr>
</thead>
<tbody>
<tr>
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<td>3*</td>
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</tbody>
</table>

*3 credit hours of EPID 994 constitutes full-time enrollment once all other course requirements have been met. (A student may register for additional courses if desired, but must register for a minimum of 3 hours of dissertation to be considered full-time.)
APPENDIX XI

Guidelines for Choosing Dissertation Topics

**PhD students**

1. Student presents list of dissertation topics to advisor.

2. Advisor and student discuss these options as topic areas for dissertation.

3. Based upon additional reading by student, scientific merit and feasibility, advisor and student agree on topic area. Student prepares a written outline of this topic.

4. Advisor and student discuss the outline and develop a plan for conduct of the dissertation.

5. Advisor and student discuss options: (i) student writes grant proposal with advisor; (ii) student takes part in on-going funded research project with advisor; (iii) student will analyze secondary data; (iv) advisor identifies potential contacts outside the department with available data.

6. Student and advisor agree on topic and student prepares second draft of outline of dissertation proposal.

7. Student and advisor identify additional dissertation committee members.

8. Student presents second draft of proposal outline to committee and discusses it with each committee member.

9. Student prepares draft of dissertation proposal and discusses it with advisor.

10. Second draft of proposal presented to entire committee and followed up with discussion.

11. Final draft of proposal presented to committee.

12. Student schedules preliminary orals.
APPENDIX XII

DOCTORAL QUALIFYING EXAM GRADING POLICY
METHODS COMPONENT

The grading process for the methods component of the doctoral qualifying exam is currently being revised. The updated policy will be distributed in early spring.
APPENDIX XIII

DOCTORAL QUALIFYING EXAM GRADING POLICY

SUBSTANTIVE COMPONENT

For the substantive component, program areas can opt to assign to each exam question either a numeric score (0 to 100%) or a letter grade (F, L, P, H). Students select two questions to answer, and so will have two grades that need to be combined in some way into an overall exam result.

1. If the program area decides to have their graders assign numeric grades, then the two numeric grades are averaged, and an average score of 75 or above passes the exam overall, whereas an overall grade of 74 or below requires the student to repeat the exam.

2. If the program area decides to have their graders assign letter grades, then these letter grades are assigned the following numeric values in order to obtain an overall score:

   H = 95
   P = 85
   L = 75
   F = 50

These grades are then averaged just as in (1) above. This implies the following table of exam results:

### PASS

<table>
<thead>
<tr>
<th>Grade Question #1</th>
<th>Grade Question #2</th>
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<td>Pass</td>
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<tr>
<td>H</td>
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### FAIL

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<td>Fail</td>
<td>Student fails and must repeat the entire substantive exam</td>
</tr>
<tr>
<td>P</td>
<td>F</td>
<td>Fail</td>
<td>Student fails and must repeat the entire substantive exam</td>
</tr>
<tr>
<td>L</td>
<td>F</td>
<td>Fail</td>
<td>Student fails and must repeat the entire substantive exam</td>
</tr>
<tr>
<td>F</td>
<td>F</td>
<td>Fail</td>
<td>Student fails and must repeat the entire substantive exam</td>
</tr>
</tbody>
</table>
Contributing to the peer-reviewed literature is a scientist’s responsibility as well as a measure of the quality of his/her work. Students are encouraged to publish as early as their skills allow and according to the opportunities they are able to identify during their training. It is an expectation in this department that doctoral research be of publication quality and that doctoral students submit findings from their doctoral research for peer review as part of the publication process.

Publishing is thus an important set of skills to acquire during training and students encounter questions about procedural matters and authorship as part of this training. Because of the diversity of issues to consider in this respect, some specific to particular research projects and affiliated institutions, the Department of Epidemiology does not endorse any particular set of policies related to publishing. Instead, we refer to the outline of recommendations in Graduate School Handbook (listed below) and to the better professional journals since they include authorship criteria and responsibilities in their instructions for authors. Importantly, students are encouraged to meet with their supervisors early in their training to discuss issues related to publication opportunities, especially authorship. As stated on page 44 in Academic Policies, a successful defense of a doctoral research proposal must include consideration of expectations for publication(s) based on the doctoral research, collaborative and administrative arrangements for this purpose to be transacted by the student as the lead investigator, and authorship roles.

The recommendations from the Graduate School Handbook are as follows:

- An author submitting a paper should never include the name of a co-author without that person's consent. Each co-author should be furnished with a copy of the manuscript before it is submitted. Co-authorship should be offered to (and limited to) anyone who has clearly made a significant contribution to the work.

- Anyone accepting co-authorship of a paper should realize that this action implies a responsibility as well as a privilege. If a potential co-author has serious reservations concerning a publication, the individual should decline co-authorship.

- The senior author or authors of a paper, individually or in concert, should be prepared to identify the contributions of each co-author.

- Simultaneous submission of essentially identical manuscripts to different journals is improper.

- As a general principle, research should be published in the scientific literature before reports of such research are released to the public press.
# APPENDIX XV

**SAMPLE TABLE OF CONTENTS FOR MANUSCRIPT-STYLE DISSERTATION**

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APPENDIX XVI

RESEARCH PROGRAM AREA LEARNING OBJECTIVES
Introduction

Epidemiology provides an important approach to elucidating the causes of cancer, improving our understanding of mechanisms, as well as developing strategies for the treatment, prevention and control of cancer. The training of a successful cancer epidemiologist requires training in epidemiologic methods, biostatistics, related substantive areas (e.g., nutrition, occupational, environmental, and social epidemiology), and cancer biology. Students should also obtain an appreciation of multidisciplinary, collaborative research.

Learning Objectives

- Understand cancer statistics and the descriptive epidemiology of cancer;
- Understand known risk factors and gaps in knowledge for the major cancers;
- Understand the pathobiology of cancer;
- Apply epidemiologic methods in the design, conduct, and analysis of cancer research studies;
- Apply critical thinking in the review of projects and publications in cancer epidemiology;
- Appreciate the multidisciplinary aspect of cancer including the contributions of basic sciences, clinical medicine and the social sciences to the understanding of cancer etiology and progression;
- Appreciate methods for cancer risk assessment and screening;
- Appreciate the role and interdisciplinary methods of cancer control and prevention.
- Appreciate the practical aspects of conducting research in cancer epidemiology

Methods for Meeting Learning Objectives

The learning objectives are met through formal coursework, mentored research training, and individualized study. There are three formal courses in cancer epidemiology: EPID770, Cancer Epidemiology and Pathogenesis; EPID771, Cancer Epidemiology Methods; and EPID775, Advanced Cancer Epidemiology. Students are also encouraged to enroll in additional related courses including: EPID772, Cancer Prevention and Control; PATH725, Cancer Pathology; EPID743, Genetic Epidemiology; EPID745, Molecular Techniques for Public Health Research; and EPID815, Diet and Cancer.

Students participate in the regular cancer epidemiology seminar that provides a forum for learning about cancer research in the Department, School of Public Health, and Lineberger Comprehensive Cancer Center. Students are encouraged to present their own research or lead journal club style discussions. In addition, speakers from outside the University of North Carolina are invited to speak at the Seminar.

The Departmental requirements for the MPH, MSPH, and PhD graduate programs encompass individualized research activities related to a specific topic in cancer epidemiology. The Masters and Doctoral research projects typically require an understanding of the biology of cancer, application of epidemiologic methods, and use of methods and resources from other disciplines. Students are also encouraged to work on additional cancer-related projects that are not directly part of their masters or dissertation projects to broaden their experiences and perspectives. Practical experience in the conduct of studies is also encouraged.
Documentation of Achievement of Learning Objectives

Student progress is monitored by means of performance in the Department cancer epidemiology courses as well as other recommended courses outside the Department. These courses utilize different means of student evaluation including traditional examinations, course papers and presentations. The Department's master's comprehensive examination and doctoral program qualifying examination are designed to evaluate the student's understanding of epidemiologic theory and methods and application to specific topics in various substantive areas. The doctoral substantive qualifying examination assesses the student’s knowledge base and use of epidemiologic methods in cancer epidemiology. The masters thesis is focused on a specific topic in cancer epidemiology and provides additional evidence of mastery of epidemiologic methods and substantive knowledge in cancer epidemiology. The dissertation project provides documentation of a student's ability to independently develop and execute a major independent project on a focused area of cancer epidemiologic research. The dissertation proposal and oral examination, research conduct, dissertation, final defense, and publication development are specific landmarks in the doctoral program that provide documentation for achievement of learning objectives.
OVERVIEW

The program in Cardiovascular Disease (CVD) Epidemiology of the Department of Epidemiology consists of faculty, research-support staff, post-doctoral fellows, pre-doctoral trainees, and students. This program has had the benefit of historical continuity in research, teaching, and service over close to thirty years in this department. Its goal is to train public health scientists and innovative investigators in this field of chronic diseases, and to contribute to this field through research and service. The career and educational objectives of the program seek to provide the competencies needed for the successful practice of modern epidemiology in the field of cardiovascular diseases, and to enable its graduates to meet the challenges of this rapidly changing field.

Learning Objectives

Upon satisfactory completion of Cardiovascular Disease epidemiology program the student will:

- Be knowledgeable of the literature in the field of cardiovascular disease epidemiology and its sources, and be able to review it critically;
- Be familiar with the epidemiology of the various manifestations of subclinical and clinically manifest cardiovascular disease in the U.S. populations and in the international context;
- Apply demographic, social, and epidemiologic measurement and analysis techniques to characterize the distribution and community burden of CVD health issues and their temporal trends;
- Critically analyze the conceptual, social and historical frameworks used to formulate CVD study hypotheses and intervention strategies;
- Identify and characterize the major national and international CVD health issues, have an understanding of the historical evolution of cardiovascular disease in human societies, and their current, and predicted impact on public health;
- Understand the key biologic, behavioral, cultural, and economic determinants of the main cardiovascular health and disease issues;
- Identify key public health issues and policies associated with population groups at increased risk of cardiovascular diseases;
- Understand the interplay of the social and physical environment with genetic susceptibility in the origin, distribution, and control of selected cardiovascular diseases;
- With support from faculty and fellow trainees assume leadership in the development of a research proposal;
- Acquire practical experience in the design and implementation of epidemiologic studies of CVD health issues, including data collection, quality assurance and study management;
- Participate with faculty and fellow students in the formulation of innovative study hypotheses in CVD epidemiology, the design of studies to address such questions, the analyses of epidemiologic data and the critical assessment of the results;
• Participate with faculty and fellow students in the oral and written communication of research findings;

• Be familiar with the key concepts and competencies required for the ethical conduct of research

Methods for Meeting the Learning Objectives

The CVD epidemiology program learning objectives are implemented through formal courses, a weekly seminar series, research practicum opportunities, mentored research, attendance at regional and national scientific meetings, and individual advising by one or more program faculty. To facilitate communications and a participatory management of the program, students, staff and faculty of the CVD epidemiology program meet frequently monthly as a group.

Topical courses taken by trainees in CVD epidemiology

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Lead Instructor(s)</th>
</tr>
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<tbody>
<tr>
<td>EPID 735</td>
<td>CVD Epidemiology</td>
<td>Gerardo Heiss</td>
</tr>
<tr>
<td>EPID 810/NUTR</td>
<td>Physical Activity, Epid &amp; Public Health</td>
<td>K. Evenson/D. Ward</td>
</tr>
<tr>
<td>EPID 737</td>
<td>Advanced CVD Epidemiology</td>
<td>Wayne Rosamond</td>
</tr>
<tr>
<td>EPID 897</td>
<td>CVD Seminar</td>
<td>Mehul Patel/Sirin Yaemsiri</td>
</tr>
<tr>
<td>EPID 813</td>
<td>Nutritional Epidemiology</td>
<td>Anna Maria Siega-Riz</td>
</tr>
<tr>
<td>EPID 814/NUTR</td>
<td>Obesity Epidemiology</td>
<td>June Stevens</td>
</tr>
<tr>
<td>EPID 743</td>
<td>Genetic Epidemiology</td>
<td>Kari North</td>
</tr>
<tr>
<td>EPID 992</td>
<td>Master's Paper</td>
<td>Faculty</td>
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<tr>
<td>EPID 994</td>
<td>Doctoral Dissertation</td>
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Additional courses recommended to students in the CVD program area

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</tr>
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<tbody>
<tr>
<td>EPID 733</td>
<td>Clinical Trials</td>
</tr>
<tr>
<td>EPID 745</td>
<td>Molecular Epidemiology</td>
</tr>
<tr>
<td>BIOS 680</td>
<td>Introduction to Survival Analysis</td>
</tr>
<tr>
<td>BIOS 665</td>
<td>Categorical Data Analysis</td>
</tr>
<tr>
<td>BIOS 764</td>
<td>Advanced Survey Sampling Methods</td>
</tr>
<tr>
<td>SOCI 830</td>
<td>Demographic Techniques I</td>
</tr>
<tr>
<td>-Varies-</td>
<td>Physiology/Pathophysiology of Chronic Diseases</td>
</tr>
</tbody>
</table>

Enrichment Activities

Seminar Series in CVD Epidemiology

The program maintains a weekly seminar series in topical and methodologic issues in cardiovascular diseases. These seminars include sessions on advanced cardiovascular disease epidemiology, presentations by guest speakers, work in progress presentations by trainees, students or faculty, and topics on ethical conduct of research. The Program expects students to deliver at least one scientific presentation per year as part of the CVD Epidemiology seminar series, or at a national scientific or professional meeting. To enhance the learning opportunity associated with such presentations, the speakers who choose to do so are recorded on videotape (by a staff person of the program), and provided with guidelines from the UNC Center for Teaching and Learning to evaluate their delivery. Consultation with education experts is available to the trainees who wish to improve on their communication and presentation skills.

CVD Epidemiology Peer-Led Research Workshop

The CVD Epidemiology Peer-Led Research Workshop is a voluntary meeting of masters, doctoral and post-doctoral trainees in epidemiology and other disciplines who share interest in the epidemiology of cardiovascular
disease. The hour-long workshop is held monthly on Wednesdays at 9:00 in the Bank of America Suite 32 Conference Room during the fall and spring semesters. The dual purpose of the workshop is to promote interaction among CVD trainees at all levels and to provide a forum for group discussion of the methodological, substantive and practical issues relevant to their research, all in a relatively informal setting. Discussion format varies with preference of the group and each topic, but is often preceded by work-in-progress presentations, focused methods lectures, journal article reviews, poster critiques, or panel discussions.

**Goal Setting**

Each trainee and his/her advisor identify (and record) a set of yearly goals at the beginning of the fall semester, and consult these as reference points at periodic intervals. A written evaluation of the training experience is conducted during the spring semester, which serves as the basis for feed-back to the trainee, for adjustment of the goals or various corrective actions, and provides the basis for a review of the progress by the advisor.

**Participatory Learning and Professionalizing Activities**

Emphasis is placed on providing trainees with opportunities for active involvement and participation in research at levels of field work, data collection, analysis, and publication. It is the goal of the faculty in this program area to maintain a range of such opportunities open to trainees at different levels of competency and career development to make the Department’s research *practicum* requirement an integral part of this program.

**Documentation of Achievement of the Learning Objectives**

Frequent meetings of the student and the advisor serve as the principal mechanism to gauge the progress of individual students, and to provide appropriate feed-back. Students also receive feed-back from peers, faculty and research staff in the course of their seminar presentations, their participation in research teams and from course-related class projects. The program adheres to twice-monthly meetings of the faculty, staff and trainees (alternating with meetings that include only staff and faculty).

**Student funding**

Funding opportunities available to students and fellows in this program area are outlined below.

**Institutional (T32) Training Grant in Cardiovascular Disease Epidemiology**

An NHLBI-supported training grant in cardiovascular disease epidemiology, now in its 31st year, supports four pre-doctoral and four post-doctoral fellows. Over time, the areas of emphasis of this training grant have changed, reflecting the developments in the field. An overview of the current focal points of interest is provided below.

Several areas of emphasis exist at present:

- Non-invasive imaging in the study of atherosclerosis and its risk factors
- Community surveillance of cerebrovascular and cardiovascular diseases, health care
- Ethnicity and disease
- Genetic epidemiology of CVD and of their risk factors
- Social and environmental determinants of cardiovascular health
- Study of chronic inflammation/infection in atherosclerosis and its sequelae
- Life course socio-economic status and cardiovascular health

**NIH NRSA Individual Predoctoral Fellowships for Minority Students**

These fellowships provide up to five years of support for research training leading to the Ph.D. or equivalent research degree.

**Graduate Student Research Assistantships**

79
Research assistantships (RAs) offer students an opportunity to gain research-related experience, develop close working relationships with faculty and earn co-authorship on peer-reviewed publications.

American Heart Association (AHA) Pre-doctoral Fellowships
Each year a number of trainees in this program area apply to the Mid-Atlantic Affiliate of the AHA; over the last five years, six applied and three were successful in obtaining funding.

Minority Supplements for NIH Grants and Contracts
On occasion this funding mechanism is used to recruit minority scholars or to support fellows who are in transition in their career development.
Environmental and Occupational Epidemiology Program
Department of Epidemiology
Program Learning Objectives

Introduction

The Environmental and Occupational and Epidemiology Program prepare students to apply the perspective, theory, and methods of epidemiology to practical and scientific problems related to the relationship of human health to the environment and the workplace. The subject matter embraced by this program is extraordinarily broad, potentially including a wide range of health outcomes and exposures, but usually focusing on the traditionally defined realms of safety hazards and exposures to physical and chemical pollutants in the workplace and in ambient air, water, and soil. This program is designed primarily for students interested in research and academic careers who will complete the PhD, but individuals with appropriate backgrounds may also pursue the MPH with a concentration in this area.

Learning Objectives

The learning objectives for this program area are the same as those for the Department of Epidemiology as a whole with the following additions.

Upon satisfactory completion, students in the program should be able to:

• Apply the competencies laid out in the Epidemiology Department’s overall learning objectives to the solution of problems in one of more of the program subspecialty areas;
• Enumerate and discuss important health problems, with their descriptive epidemiology and determinants, for one or more of the program subspecialty areas of occupational and environmental epidemiology;
• Identify key surveillance systems and other sources of data relevant to the problem;
• Discuss study design and measurement issues particular to the subspecialty area;
• Appreciate key concepts from such related disciplines as environmental sciences and, industrial hygiene;
• Collaborate with experts in the preceding fields to conduct epidemiologic research;
• Appreciate the uses of epidemiologic research in identifying hazardous agents, evaluating environmental injustice, and in setting health and safety standards;
• Communicate epidemiologic concepts, methods, and findings to community groups, labor unions, health professionals, government agencies, and employers.

In addition, students specializing in occupational or environmental epidemiology who satisfactorily complete the PhD should be able to:

• Understand the principles of exposure assessment and collaborate with specialists from the relevant fields to assess exposure for epidemiologic research;
• Analyze and interpret exposure data in epidemiologic studies.

Methods for Meeting Learning Objectives

Because of the diversity of the subject matter, students and advisors work in consultation to develop individualized programs of study to meet students’ personal objectives. Students will typically specialize either in occupational or environmental epidemiology, but the areas may intersect; for example, the same chemical agent may be present in both workplaces and the ambient environment.
While involvement in research is the primary pathway to developing expertise, formal coursework serves both as a starting point and a means to achieve breadth. The program faculty have adopted curricular guidelines to assist students and their advisors in defining key content areas of this diverse field, designing a program of study, and assuring that key competencies are achieved. Two courses are offered within this program area: Environmental Epidemiology (EPID 785) and Occupational Epidemiology (EPID 780). Other relevant areas of study include the epidemiology of specific health outcomes, such as cancer or reproductive disorders, and material from closely-related disciplines such as environmental sciences, industrial hygiene, toxicology, and medical geography. Students are also encouraged to attend the Environmental Epidemiology seminars within the program area and other relevant seminars offered by the Department, the Environmental Protection Agency (EPA), the National Institute of Environmental Health Sciences (NIEHS), and other entities.

Students are strongly encouraged to become involved in research early in their studies. This involvement not only facilitates the student’s intellectual growth as an epidemiologist, but teaches practical skills of data collection, data analysis, and research conduct. Opportunities for research in environmental and occupational epidemiology are available within the Department, the School of Public Health, and through other campus or government centers, such as the EPA and NIEHS.

**Documentation of Achievement of Learning Objectives**

Evidence of achievement of learning objectives is documented at several points in a student’s program of study. Performance in required and recommended courses is an early measure of progress toward the learning objectives. These courses utilize different means of student evaluation including traditional examinations, course papers and presentations. In the course of the Intradepartmental Review, the adequacy of coursework and experience are evaluated, and guidance is offered regarding selection of supporting coursework in epidemiology, biostatistics, environmental sciences and other related fields, as described above. The Master’s comprehensive examination and doctoral qualifying examination address command of epidemiology more generally. The Master’s thesis and doctoral dissertation process are focused on a specific issue in environmental and occupational epidemiology. The dissertation in particular requires the student to develop an independent project as the intellectual leader. The development of the research proposal, the oral defense of that proposal, the conduct of the research, and writing the dissertation and related publications are the key elements in research training at the doctoral level. Publication, presentation of scholarly work at conferences, and successful grant applications are also valuable indicators of student achievement. The demonstrated ability to contribute scholarly work is the ultimate demonstration of achievement of the program learning objectives.
Healthcare Epidemiology Program
Department of Epidemiology
Program Learning Objectives

Introduction

Healthcare epidemiology applies the perspective and methods of epidemiology to practical problems of healthcare organizations and delivery. It can be defined as the study of healthcare variables, together with biological, social, behavioral, and environmental factors that influence the health outcomes of populations. The Healthcare Epidemiology Program prepares graduate students to integrate epidemiologic methods into the study of the impact of clinical, administrative, and policy aspects of healthcare delivery on health outcomes. Within the broad label of healthcare epidemiology fall such areas as epidemiology-based health services research, clinical epidemiology, and outcomes research (pharmacoepidemiology is incorporated as a separate program). The key to healthcare epidemiology, like the rest of the field, is that the dependent variables of interest are health outcomes of populations.

Learning Objectives

Upon satisfactory completion of the Healthcare Epidemiology Program, the student will be able to:

- Discuss the interrelated nature of clinical, administrative, and policy processes and their impact on health outcomes of populations;
- Discuss the role of the population-based perspective in the delivery of healthcare services;
- Discuss the origins and development, including changing perspectives, of the discipline of healthcare epidemiology;
- Discuss and account for the relationship between traditional etiologic epidemiology and healthcare epidemiology;
- Effectively participate in interdisciplinary approaches to studying issues of the impact of the healthcare system;
- Evaluate the impact of healthcare programs (e.g. disease management programs) and specific interventions/treatments (e.g. pharmaceuticals or clinical procedures) on the health outcomes;
- Effectively communicate the results of research and evaluation efforts to the variety of stakeholders in the healthcare system (e.g. different types of healthcare professionals, researchers, policy makers, and the public);
- Consult with clinicians, administrators, and policy makers about the implementation of population-based programs designed to improve the delivery of healthcare services;
- Critically review the scientific literature relating to the epidemiology of healthcare delivery for both methodological quality and potential applicability;
- Design and conduct an epidemiological study related to the impact of healthcare, together with biological, social, behavioral, and/or environmental factors on the health outcomes of populations.

Methods for Meeting Learning Objectives

The broad nature of healthcare epidemiology means that there are many related classes taught on the UNC campus. However, there are two core courses in the Department of Epidemiology that focus on the integration of clinical, administrative, and policy processes in relation to their impact on health outcomes. Epidemiology 800, Medical Care Epidemiology, is a survey course of methods and issues related to the overall epidemiologic study of healthcare delivery. Epidemiology 765, Methods and Issues of Pharmaco-epidemiology, provides an introduction to the application of epidemiological methods and reasoning to the study of the effects of drugs in
populations. The skills taught in this course can also be applied to other healthcare interventions. These two core courses supplement the Department’s core methodology course sequence by enhancing the student’s ability to apply epidemiological methods and reasoning to practical problems of the system of healthcare delivery.

In addition to the core courses above, advisors in the healthcare epidemiology program work in conjunction with individual students to determine courses both in the Department of Epidemiology and on the rest of the UNC campus that will enhance skills necessary for working in specific areas of healthcare epidemiology. Examples of such courses include health economics, clinical trials, prevention methodology, and medical geography.

Healthcare epidemiology seminars and the healthcare epidemiology day provide excellent opportunities for achieving many of these objectives. Furthermore, faculty advisors in the program work with students to identify internship opportunities for gaining first-hand experience in health care delivery and its potential impact on health outcomes. Sites include managed care organizations, pharmaceutical companies, and governmental agencies.

**Documentation of Achievement of Learning Objectives**

Evidence of individual student achievement of the learning objectives is documented at several points during the study of healthcare epidemiology. The ability to discuss and consider the relationship between clinical, administrative, and policy processes and health outcomes is demonstrated through learning products in core healthcare epidemiology and related courses (discussed above). The Interdepartmental Review provides an opportunity for the individual student, the student’s advisor, and related healthcare epidemiology faculty to discuss progress toward meeting the school, departmental, and program learning objectives. The results of this review are included in the student’s file. The completion of the departmental comprehensive exam demonstrates a basic understanding of core epidemiological research skills and issues. The defense of the dissertation proposal documents the ability to justify research concepts and methodology related to healthcare epidemiology and ensures that the dissertation falls within the framework of healthcare epidemiology. The successful completion and defense of the dissertation further demonstrates research skills and the ability to integrate core concepts of healthcare epidemiology into research endeavors. Publications, in peer-reviewed journals, arising from the dissertation provide further evidence, of an outcome nature, of achieving the learning objectives.
Infectious Diseases Epidemiology Program
Department of Epidemiology
Program Learning Objectives

Introduction

The field of infectious diseases epidemiology has encountered a number of new challenges in recent decades. Newly identified pathogens and intransigent older diseases have challenged the once prevailing view that medical technology had tamed infectious diseases. The advent of AIDS led to the resurgence of some epidemiologic tools that had fallen into relative disuse, such as mathematical modeling of epidemics, and revealed inadequacies in newer epidemiologic methods developed for noninfectious diseases. Moreover, the traditional distinction between infectious and chronic began to break down as some infectious diseases manifested chronic characteristics and some chronic diseases were found to have infectious origins.

The challenges of infectious diseases in the current era require that the epidemiologists aiming to understand them and lessen their effects in populations draw from multiple disciplines to bring new perspectives and tools. The program in infectious diseases in the Department of Epidemiology is designed to provide students with a core of knowledge and skills necessary for all infectious disease epidemiologists along with a means of combining them with perspectives and skills from complementary areas of study. The learning objectives of the program are delineated accordingly. Several of the core skills for the infectious disease program are the core areas of teaching within the Department, including basic epidemiologic quantitative methods. These are assumed and thus not mentioned in our program learning objectives, below, but are presented elsewhere in the learning objectives for the Department.

Learning Objectives

- Understand the pathogenesis of infectious diseases including:
  - basic microscopic and biological characteristics of pathogens
  - mechanisms of innate and acquired host immunity
  - microbial evasion of host immune responses
  - mechanisms of cell and tissue damage
  - host factors, including genetics, influencing susceptibility
  - pathogen factors, including genetics, influencing virulence
- Be familiar with the natural history of major infectious diseases;
- Understand the social, economic, behavioral, demographic and environmental determinants of infections, particularly emerging infections;
- Understand the causes for the enormous disproportion in infectious disease burden between resource poor and resource rich countries;
- Understand the special status in infectious disease prevention and control in marginalized populations such as prisoners, homeless, uneducated and persons of color;
- Be familiar with key surveillance systems and other sources of data relevant to the problem;
- Understand strategies for early detection and control of episodes of bioterrorism;
- Understand the principles and practices of outbreak investigation;
- Be familiar with the broad principles of infectious disease prevention including strategic use of prophylactic drugs, vaccines and vector control;
- Be familiar with the basic strategies for treatment of infectious diseases including use of antimicrobials;
- Understand the causes and consequences of antimicrobial drug resistance
- Understand the principles associated with infectious disease control, elimination, and eradication;
- Be familiar with the broad principles of infectious disease modeling;
• Apply epidemiologic methods in the design, conduct and analysis of infectious disease epidemiologic studies;
• Communicate epidemiology concepts, methods and findings to community groups, state and local health departments, health professionals and at-risk populations.

Methods for Meeting Learning Objectives

The competencies acquired in the infectious diseases epidemiology program and the courses in which the information and skills are taught are tabulated below. The names of the courses and their number of units are listed on the next page.

<table>
<thead>
<tr>
<th>Core Topic or Skill</th>
<th>Relevant Course(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public health impact of infectious diseases</td>
<td>EPID 750, 752, 753, 756, 757</td>
</tr>
<tr>
<td>History of public health responses to infectious diseases</td>
<td>EPID 752</td>
</tr>
<tr>
<td>Biological aspects of infectious diseases, including cellular biology, physiology, and immunology.</td>
<td>EPID 751</td>
</tr>
<tr>
<td>Behavioral and social aspects of infectious disease transmission</td>
<td>EPID 752, 757, 826</td>
</tr>
<tr>
<td>Measurement instruments (biological, clinical, behavioral, and social)</td>
<td>EPID 750, 751, 756, 826, 905</td>
</tr>
<tr>
<td>Population dynamics and epidemic modeling</td>
<td>EPID 752, 894</td>
</tr>
<tr>
<td>Outbreak investigation</td>
<td>EPID 750, 752, 764</td>
</tr>
<tr>
<td>Public health institutions related to the study and control of ID</td>
<td>EPID 750, 752, 753, 894</td>
</tr>
<tr>
<td>Interventions</td>
<td>EPID 750, 752, 756, 757</td>
</tr>
<tr>
<td>Evaluation of interventions</td>
<td>EPID 756, 757</td>
</tr>
<tr>
<td>Quantitative methods peculiar to infectious processes</td>
<td>EPID 754, 894</td>
</tr>
</tbody>
</table>

EPID 750 Fundamentals of Public Health Surveillance (3)
EPID 751 Emerging and Re-Emerging Infectious Diseases (4)
EPID 752 Introduction to Methods in Infectious Disease Epidemiology (3)
EPID 753 Prevention and Control of Infectious Diseases at the Level of the Community (3)
EPID 754 Mathematical Modeling of Infectious Diseases (3)
EPID 756 Control of Infectious Diseases in Developing Countries (1-3)
EPID 757 Epidemiology of HIV/AIDS in Developing Countries
EPID 764 Hospital Epidemiology (1-2)
EPID 826 Social Epidemiology: Concepts and Measures
EPID 894 Infectious Disease Seminar (1)
EPID 905 Epidemiology Laboratory Practice (1-9)

In addition to formal coursework, students expand their knowledge base and hone their skills through close consultation and research collaboration with their advisors, as well as with other faculty and researchers. Students are encouraged to become involved in research apprenticeships and internships at offsite locations as well as on campus (i.e., North Carolina State Health Department, CDC, GlaxoSmithKline, etc.).

Documentation of Achievement of Infectious Diseases Learning Objectives

Doctoral students review their curriculum with an intradepartmental review committee. It is in this context, particularly, where the faculty assess the degree to which a student has adequately studied a discipline that complements infectious diseases epidemiology. (A student in the MPH program does not have an intradepartmental review, but students in this degree program are typically physicians, and thus their clinical skills serve as the desired complement to the infectious diseases epidemiology skills.) The grades for courses are
also considered in the intradepartmental review. A low grade in a class that serves as the student’s only exposure to a particular skill will likely result in a recommendation to take an additional class covering the skill.

In the doctoral program, a student’s facility with core skills is also assessed through interactions with faculty in: identifying and preparing a dissertation proposal; the defense of the proposal; carrying out the dissertation research; and the final defense.
Introduction

Injury epidemiologists conduct research describing injury hazards, identifying risk factors for injury, or quantifying the effect of various interventions designed to prevent injury. From a public health perspective, injury is a major problem, however, it is received limited attention from epidemiologists. The scope of injury control is broad, encompassing such diverse areas as suicide, homicide, youth violence, intimate partner violence, firearm violence, transportation safety (including diverse areas such as motor vehicle occupant protection systems such as airbags and seat belts, use of cell phones while driving, pedestrian safety, policies alcohol and driving, roadway design, bicycle helmets), falls and other injuries in older adults, occupational injury, prevention of violence in the workplace, sports injuries, chronic and overuse injuries (also known as musculoskeletal disorders), and injury prevention as a global health concern.

Injury epidemiologists conduct research that advances the field of injury prevention. In injury control, there is a close link between research and prevention action. Injury research needs to be timely and address specific areas of prevention. Injury epidemiologists are expected to develop science that directly addresses prevention opportunities, and furthermore, are expected to be able to engage with non-epidemiologists (ranging from policy makers to community advocates) to implement interventions that (based on the best available scientific knowledge) prevent injuries.

Learning Objectives

The overall goal of the program in injury epidemiology is to develop epidemiologists who further the science of injury control through research and are capable of engaging with society use their research findings to prevent injuries.

Injury epidemiologists graduating from the program with a PhD will have these abilities:

- Command of the principles of epidemiologic study design and data analysis
- Ability to adapt and apply those tools to design and conduct injury research
- Ability to collaborate and communicate with other scientists and clinicians in diverse areas (biomechanics, industrial hygiene, ergonomics, trauma care)
- Ability to assess and integrate scientific information from diverse sources from a prevention and research standpoint
- Ability to communicate epidemiologic concepts, methods, and findings, to non-epidemiologists and non-scientists
- Ability to present research at a national meeting

Injury epidemiologists graduating from the program with a PhD will possess these key knowledge items:

- Understand the importance of injury, and specific areas within injury, from a public health perspective
- Understand basic concepts in injury prevention, such as the Haddon matrix, and the difference between active and passive intervention
- Understand the use of cohort, case-control, and case-crossover designs to assess risk factors for injury in diverse injury topics
- Understand the use of epidemiologic studies to quantify the effectiveness of interventions (e.g. use of
ecologic studies to study such as traffic safety laws, or other regulations or policies implemented at the community level, in terms of reduction of injury risks at the level of the individual

- Understand the use of case-crossover for the study of transient hazards
- Understand the application of surveillance techniques to injury surveillance
- Understand the global nature of the injury problem in diverse countries

Students completing the Masters degree in the injury program will develop a subset of the above knowledge and abilities.

**Methods of Achieving Learning Objectives:**

**Coursework:** Students are expected to complete one 3-credit course in the science of injury control. Currently, EPID 783 (administered in HBHE Dept) is the only such course. Another course in Maternal Health and Child Health (MHCH 753) addresses Violence Against Women. Students are strongly encouraged to take other courses that support and extend their area of expertise.

**Dissertation for Doctoral Students:** The dissertation is an opportunity for doctoral students to conceptualize, develop, and implement research in a specific topic or topics in injury. This research is expected to lead to published papers that significantly advance the science in the student’s chosen area. Doctoral students will be proficient in specific study designs (e.g. case-crossover studies) or data analysis techniques (e.g. analysis of rates) that are particularly applicable to injury research. Methodologic work that clarifies, enhances, or demonstrates the use of epidemiologic concepts and/or methods to injury research is encouraged.

**Thesis for Masters Students:** The thesis paper is an opportunity to conduct independent mentored research and build research skills. Publication is strongly encouraged.

**Research Skills:** Students are expected to become involved in research early in their studies. Students are expected to take the initiative in setting up meetings with their faculty advisors, and with other researchers engaged in injury research. Engagement with the faculty on faculty research projects, either through paid employment or via the student working with existing data to write a new paper, is a fundamental and very important means for students to develop research skills. In addition, students should proactively seek out opportunities to develop their own independent research. They are strongly encouraged to solicit the assistance of faculty advisers in developing their independent research areas. Faculty can provide assistance with brainstorming ideas, refining research questions, advice on methods and data analysis tools, and access to existing databases. Faculty will actively promote and assist student in develop research ideas and conducting research, however, the impetus and commitment to developing, conducting, and publishing research needs to come from the student.

**Resources:** Students are encouraged to engage with the Injury Prevention Research Center, the Highway Safety Research Center, and other resources on campus. A wide range of researchers in the School and elsewhere at UNC conduct or facilitate research related to injuries, including (but not limited to) the Office of the Chief Medical Examiner, the Department of Emergency Medicine, Department of Surgery and Trauma Center, Department of Orthopedics, Division of Allied Health Sciences, Human Movement Sciences, Exercise and Sport Science, Sports Medicine Research Laboratory, Human Movement Laboratory, Maternal Health and Child Health, Health Behavior and Health Education, Center for Urban and Regional Planning. Off-campus resources include Injury and Violence Prevention Branch in the Division of Public Health at the State’s Department of Health and Human Resources; Division of Occupational and Environmental Health at Duke University; Terry Sanford Institute for Public Policy at Duke University; Duke Sports Medicine. Students are also encouraged to engage with local and national groups in the community interested in injury control. These can include Mothers Against Drunk Driving, KidsNCars, SafeKids, North Carolinians Against Gun Violence, as well as clinicians engaged in prevention activities, local schools, parks and recreation departments, assisted living facilities, etc.
Documentation of Achievement of Learning Objectives:

The demonstrated ability to design, conduct, and publish epidemiologic research in injury control is the ultimate demonstration of attainment of the objectives listed above. Publication of independent research, perhaps in collaboration with faculty, and collaboration on faculty-led publications, is one primary marker of attainment of the objectives. Another primary marker is success in obtaining funding for research through mechanisms such as grants or contracts.

For doctoral students, important interim markers of attainment of the objectives include:
- the Intra-department Review, in which faculty review student progress with the student
- completion of the Methods Qualifying Examination
- completion of the Injury Qualifying Examination
- defense of the dissertation proposal
- final dissertation defense
- professional interaction and engagement with scientists and clinicians involved in injury control
- professional interaction and engagement with community groups (such as advocates) involved in injury control

For Masters students, important interim markers of attainment of the objectives include:
- Masters comprehensive exam
- Thesis paper
- professional interaction and engagement with scientists and clinicians involved in injury control
- professional interaction and engagement with community groups (such as advocates) involved in injury control
Introduction

Pharmacoepidemiology is the application of the epidemiologic knowledge, methodology, and reasoning to the study of the use and the beneficial and harmful effects of drugs (biologics, devices) in human populations. Pharmacoepidemiology covers both the descriptive epidemiology (uses of drugs) and the analytic epidemiology (drug-outcome associations). Largely defined by the exposure (drugs), pharmacoepidemiology overlaps with many substantive areas of epidemiology mainly defined by disease-outcomes (e.g., cardiovascular, cancer, infectious diseases, reproductive). The Pharmacoepidemiology Program provides students with training to conduct high-quality epidemiologic research that directly addresses both methodologic and substantive questions in the study of drugs in populations.

Learning Objectives

Pharmacoepidemiology students with training at the doctoral level will have:

1. Broad strength in epidemiologic and statistical methods.
2. Knowledge about the unique research challenges and opportunities related to drugs.
3. Core competencies in the selection, analysis, and interpretation of pharmacoepidemiologic data.
4. Facility with current concepts of biases and current methods to reduce/limit these in pharmacoepidemiologic studies.
5. Experience with practical applications of their research skills in multidisciplinary teams, including the dissemination of epidemiological research

Methods for Meeting Learning Objectives

Epidemiology 765, Methods and Issues of Pharmacoepidemiology is the foundation course for pharmacoepidemiology students. This course introduces students to the application of epidemiological methods and reasoning to the study of the effects of drugs in populations. Main topics include: methodologic issues in studies of drugs and vaccines, the use of epidemiology for safety monitoring and risk management, adherence issues in pharmacoepidemiology studies, and information resources for pharmacoepidemiology studies. As well, Epidemiology 800, Medical Care Epidemiology, is a survey course of methods and issues related to the overall epidemiologic study of healthcare delivery and is particularly relevant to the study of pharmacoepidemiology.

These two courses supplement the Department's core methodology course sequence by enhancing the student's ability to apply epidemiological methods and reasoning to practical problems of pharmacoepidemiology. Numerous other courses from the School of Public Health and other related UNC departments complement students training, including health economics, clinical trial design, survey and questionnaire development, and medical geography and a health care database research at the UNC School of Pharmacy.

Students' academic skills are fostered by faculty advisors in the program who work with students to identify internship opportunities for gaining first-hand experience in pharmacoepidemiology practice within federal and international agencies, pharmaceutical companies and research organizations. Participation in pharmacoepidemiology student groups, conferences and short course add depth to the core pharmacoepidemiology program.
Practical application of these skills and knowledge occur within conceptualization, development and implementation of the dissertation component of the degree.

**Documentation of Achievement of Learning Objectives**

Student achievement is documented throughout the degree program. The successful completion and integration of coursework within the core epidemiology courses and the 2 program related courses is required. The completion of the epidemiology methods qualifying exam demonstrated the broad strength in epidemiologic and statistical methods. The pharmacoepidemiology/health care epidemiology content area qualifying exam assesses the student’s knowledge and competencies in relation to the unique aspects of pharmacoepidemiology. The Interdepartmental Review allows the student, supervisor and related faculty to assess and discuss progress toward meeting the learning goals. The dissertation process includes a defense of the dissertation proposal which is an opportunity for the student to justify the research methods and approaches proposed for the project. Completion and defense of the dissertation project indicates the student’s ability to work in multidisciplinary teams to carry out epidemiological research and initiate the dissemination of research products through peer-reviewed publications.
Reproductive/Perinatal/Pediatric Epidemiology Program
Department of Epidemiology
Program Learning Objectives

Introduction
Reproductive health includes a wide spectrum of epidemiologic and public health issues, ranging from influences on fertility and pregnancy to the long-term consequences of perinatal events on mothers and children. Because reproduction is not strictly a medical event, the linkage to such fields as demography and sociology is quite strong, but the focus of our Department’s program is more on the study of the many environmental, social, and biomedical factors that affect reproductive health. Causes of a wide range of adverse outcomes in the reproductive spectrum are the focus of faculty and student research. Students who are trained in this program area include those seeking an MPH degree, most of whom have clinical expertise in a relevant area such as obstetrics or pediatrics and wish to enhance their capability to conduct original research, and those seeking MSPH and PhD degrees, who are planning to become researchers and teachers evaluating the determinants of reproductive health.

Learning Objectives

Upon completion of the Reproductive Epidemiology Program, the student will be able to:

- Define terminology and descriptive epidemiology of major reproductive health indices;
- Understand basic reproductive biology and embryology;
- Be familiar with the health care system as it relates to reproductive health;
- Understand known and suspected causal factors related to the common health outcomes in reproductive epidemiology, including infertility, pregnancy loss, preterm birth, low birth weight, and birth defects;
- Recognize unique methodologic challenges in the study of reproductive outcomes and study design, conduct, and analysis strategies employed to address those challenges;
- Know how to assess the major reproductive health endpoints for epidemiologic study;
- Learn to work collaboratively with reproductive biologists and clinicians on studies of reproductive health.

Methods for Meeting Learning Objectives

Students will meet these learning objectives through formal courses, mentored research training, and individualized study. All students in the program are expected to take Epidemiology 851, Perinatal Epidemiology, and Epidemiology 853, Advanced Topics in Perinatal and Pediatric Epidemiology, as well as the core methods courses in epidemiology and biostatistics. In Epidemiology 715, Theory and Quantitative Methods in Epidemiology, the principal laboratory exercise required of all students makes use of birth records for the state of North Carolina, integrating some of the special features of study design and analysis in reproductive epidemiology with the more general methods training in the Department. Students often find additional courses in the Department of Maternal and Child Health, and in the areas of embryology, teratology, and demography useful.

Individual research activities are required for the MPH, MSPH, or PhD degrees. In the course of developing research on specific topics, students address the relevant biological background, the methodologic concerns specific to an issue in reproductive epidemiology, and the ability to understand an issue comprehensively through reading and collaboration.

Seminars are scheduled several times each semester with a distinctive reproductive epidemiology orientation, supplemented by seminars of overlapping relevance in environmental and nutritional epidemiology. Summer internships or longer-term research opportunities at institutions like Family Health International or the National
Institute of Environmental Health Sciences help students to expand their research opportunities and areas of application.

**Documentation of Achievement of Learning Objectives**

Evidence to demonstrate the achievement of learning objectives begins with performance in the required course, Perinatal Epidemiology, in which students must integrate information on the relevant biological, statistical, and clinical considerations to develop a study to address an important reproductive health question. In the course of the Intradepartmental Review, the student’s adequacy of course work and experience is evaluated, and guidance is offered regarding selection of supporting coursework in reproductive biology, other areas of epidemiology, or broader aspects of reproductive health such as demography or family planning. The master’s comprehensive examination and doctoral methods qualifying examination address command of epidemiology more generally. The doctoral substantive qualifying examination assesses the student’s knowledge base and use of epidemiologic methods in reproductive epidemiology. The masters thesis and doctoral dissertation process are focused on a specific issue in reproductive epidemiology, and the dissertation in particular requires the student to develop an independent project as the intellectual leader. The development of the research proposal, the oral defense of that proposal, the conduct of the research, and writing the dissertation and related publications are the key elements in research training at the doctoral level. The demonstrated ability to contribute to the scholarly literature is the ultimate demonstration of achievement of the program learning objectives.
Introduction

Social epidemiology is the study of how social factors, such as social networks, laws, institutional and governmental policies, social conditions, the built environment and neighborhood context, affect the health of populations.

Learning Objectives

Upon satisfactory completion of the Social Epidemiology Program, students will be able to describe or apply the following concepts and skills:

Theories relevant to social epidemiology
  - Social ecology framework
  - Determinism (e.g., geographical, genetic) and agency (individual and aggregate)
  - Socio-political theories (e.g., Engels, Weber)
  - Key debates in social epidemiology
  - Direct and indirect effects

Measurement
  - Social measures
    - Social cohesion, social capital, collective efficacy, social control
    - Measures of social location (e.g., SES)
    - Measures of inequality (e.g., income inequality, segregation)
    - Acculturation
    - Race and racism; sex/gender and sexism
  - Physical measures
    - Social disorder and “broken windows”
    - Other measures of the built environment
    - Measures of the natural environment
  - Sources of data
    - Census
    - National surveys
    - Public access data (e.g., disease surveillance, corrections)
    - Others’ studies (e.g., Add Health, PHDCN)
    - Empirical data collection
    - Compositional and contextual variables

Research methods
  - Causality
    - DAGS (strengths and limitations when applied to social epidemiology)
    - Constructing conceptual models
    - Differentiating between proximal and distal factors
  - Study designs (design, analysis, and interpretation)
    - Ecological studies
    - Life course studies
    - Natural experiments
- Networks’
- Randomized community trials
- Multi-level studies
- Mixed methods (integration of quantitative and qualitative)
- Community-based participatory research
  - Spatial analytic techniques
    - Geocoding
    - Mapping
    - Geographical units of analysis (assets and liabilities of each)
  - Special techniques
    - Instrumental variables
    - Propensity scores

Patterns of disease
  - Geographical distribution of common health outcomes
  - Social distribution of common health outcomes

Ethics
  - The ethical nature of patterns of health and disease in populations (including health disparities)
  - Concepts of justice (e.g., human rights, utilitarianism, preference for the poor)
  - How public health ethics differs from medical ethics
  - Research ethics in social epidemiology studies

History
  - Geoffrey Rose and structural interventions
  - Rudolf Virchow: diseases and the political economy
  - Edwin Chadwick: environmental reform
  - UNC Social epidemiology alumni (e.g., Kark, Cassel, James)

Public health and interventions
  - The effects of social policy on health
  - Translation of epidemiologic research into policy
  - Structural interventions
  - Measurement and evaluation of programs, policies, and interventions

Means of meeting program objectives

The principal courses in which the learning objectives can be achieved are the following:

EPID 825 Social Determinants of Health
EPID 826 Social Epidemiology: Concepts and Measures
EPID 827 Social Epidemiology: Analysis and Interpretation.

Additional courses such as EPID 786: Community-driven Epidemiology and Environmental Justice, EPID 892: Interdisciplinary Seminar in Health Disparities, and EPID 880 Foundations of Public Health Ethics, provide additional opportunities to meet the Program’s learning objectives.

In addition to specific social epidemiology courses listed or cross-listed in epidemiology, students may work with their advisors to identify other courses to supplement their coursework. As social epidemiologic research on health outcomes requires substantive knowledge of specific diseases, complementary course work in other substantive areas may be required. Additional methodological or theoretical skills required for social
epidemiology research can be acquired through courses in other Departments of the School of Public Health or outside the School. Examples include:

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>GEOG 445</td>
<td>Medical Geography</td>
</tr>
<tr>
<td>SOCI 412</td>
<td>Social Stratification</td>
</tr>
<tr>
<td>SOCI 821</td>
<td>The Life Course</td>
</tr>
<tr>
<td>SOCI 830</td>
<td>Demography: Theory, Substance, Techniques, Part I</td>
</tr>
</tbody>
</table>

Short courses provided by the Odum Institute for Research in Social Science can also supplement methodologically focused coursework.

Students are encouraged to participate in both formal and informal seminars, such as the Social Epidemiology workgroup and the Carolina Population Center seminar series. Seminars offered off-campus, such as those at the Duke Center for the Study of Race, Ethnicity and Gender in the Social Sciences, may also be of interest to students.

Opportunities for research are provided both through departmental faculty, as well as through organizations outside the department, such as the Carolina Population Center, the Cecil G. Sheps Center for Health Services Research, and the Center for AIDS Research.

**Documentation of achievement of learning objectives**

Documentation of a student’s progress towards the learning objectives will occur through coursework evaluation, such as examinations, in-class presentations, and course papers. The master’s comprehensive examination and doctoral methods qualifying exam provide documentation of students’ knowledge base and use of general epidemiologic methods. A substantive qualifying examination in social epidemiology provides an assessment of a student’s mastery of core concepts within the discipline, such as theoretical frameworks, measurement issues and analytic techniques applicable to social epidemiology.

For doctoral students, the Intradepartmental Review provides the opportunity for formal review of coursework and experience. Faculty serving on the review can provide guidance on means to meet the Program objectives, including suggesting additional coursework and research experience.

In addition, the dissertation proposal and oral defense, research conduct, writing of the dissertation and presentation of findings, document specific core skills integral to the achievement of a doctoral degree. Publication in peer-reviewed journals, successful grant applications and presentation of research at conferences provide further evidence of the achievement of the Program’s learning objectives.