

**Bergen Community College
The School of Health Professions
Dental Hygiene Department**

Student Course Outline

TERM: Spring 2013

COURSE TITLE: DHY 201 – 001/002 HY
Oral Hygiene II
3 credits

1 Lecture hour **8 hours Clinic**

PREREQUISITES: BIO-104, BIO-109, DHY-101, DHY-108, DHY- 109

Class Day and Time:

On Campus Class C-316

Monday 9:25 – 10:15 AM

Clinic: S-327

Tuesday/Thursday

8:30 – 12:30/1:00 -5:00

Online Class

INSTRUCTOR: Tomira Luchynskyi, RDH, MHSc
Instructor

OFFICE HOURS: Monday 10:15 – 12:15 PM (office/online)
Tuesday 12:30- 1:00 PM
Friday 12:30-1:00 PM
Or By Scheduled Appointment

Office: S 330 **Office:** PH#201-689-7729
Email: tluchynskyi@bergen.edu

COURSE DESCRIPTION

This course shall serve as a continuation of the foundation necessary for dental hygiene practice. The focus will be on preventive therapies and patient management techniques as well as providing the student with an increased knowledge of clinical dental hygiene protocols. Students will provide dental hygiene care including medical history, vital signs, intraoral and extraoral examinations, dental charting, data interpretation, treatment planning, instrumentation, homecare therapies and polishing for a variety of patients. Soft tissue management and periodontal debridement will also be introduced. An online component will be an integral part of this course.

COURSE OBJECTIVES:

Upon completion of the DHY201 course, the student will be able to:

1. Assess and interpret data collected and develop an individualized dental hygiene treatment plan.
2. Detect plaque and calculus and make appropriate recommendations for individualized plaque control programs.
3. Provide dental hygiene care that meets the needs of a variety of patients.
4. Identify cultural competence and its role in patient care.
5. Identify special treatment considerations and implement appropriate care plans.
6. Develop decision-making skills regarding patient care based on current dental hygiene theory and technology.
7. Develop effective time management skills for planning and providing dental hygiene care.
8. Develop soft tissue management programs based on individual patient need.
9. Utilize instrumentation techniques necessary for successful periodontal debridement.
10. Develop evidence-based dental hygiene care.

Core Competencies (C)

- C.1** Apply a professional code of ethics in all endeavors.
- C.2** Adhere to state and federal laws, recommendations and regulations in the provision of dental hygiene care.
- C.3** Use critical thinking skills and comprehensive problem-solving to identify oral health care strategies that promote patient health and wellness
- C.4** Use evidence-based decision making to evaluate and incorporate emerging treatment modalities.
- C.5** Assume responsibility for professional actions and care based in accepted scientific theories and research as well as the accepted scientific theories, research, and the accepted standard of care.
- C.6** Continuously perform self-assessment for lifelong learning and professional growth.

- C.7** Integrate accepted scientific theories and research into educational, preventive, and therapeutic oral health services.
- C.8** Promote values of the dental hygiene profession through evidence-based activities, positive community affiliations, and active involvement in local organizations
- C.9** Apply quality assurance mechanisms to ensure continuous commitment to accepted standards of care.
- C.10** Communicate effectively with diverse individuals and groups, serving all persons without discrimination by acknowledging and appreciating diversity from diverse populations both verbally and in writing.
- C. 11** Record accurate, consistent, and complete documentation of oral health services provided.
- C. 12** Facilitate a collaborative approach with all patients when assisting in the development and presentation of individualized patient care plans that are specialized, comprehensive, culturally sensitive, and acceptable to all parties involved in care planning.
- C.13** Initiate consultations and collaborations with all relevant health care providers to facilitate optimal treatments.
- C.14** Manage medical emergencies by using professional judgment, providing life support, and utilizing required CPR and any specialized training or knowledge.

Health Promotion and Disease Prevention (HP)

- HP.1** Promote the values of oral and general health and wellness to the public and organizations within and outside the profession.
- HP.2** Respect the goals, values, beliefs, and preferences of patients while promoting optimal oral and general health.
- HP.3** Refer patients who may have a physiologic, psychological, and/or social problem for a comprehensive evaluation.
- HP.4** Identify individual and population risk factors and develop strategies that promote health related quality of life.
- HP.5** Evaluate factors that can be used to promote patient adherence to disease prevention or health maintenance strategies.
- HP.6** Utilize methods that ensure the health and safety of the patient and the oral health professional in the delivery of care

Community Involvement (CM)

- CM.1** Assess the oral health needs and services of the community and determine action plans and availability of resources to meet the health needs.
- CM.2** Provide screening, referral, and educational services that allow patients to access the resources of the health care system.
- CM.3** Provide community oral health services in a variety of settings.
- CM.4** Facilitate patient access to oral health services by influencing individuals or organizations for the provision of oral health care.
- CM.7** Advocate for effective oral health care for underserved populations.

Patient Care (PC)

Assessment

- PC.1** Systematically collect, analyze and record data on the general, oral, psychosocial health status of a variety of patients using methods consistent with medicolegal principles.
- PC.2** Recognize predisposing and etiologic risk factors that require intervention to prevent disease.
- PC.3** Recognize the relationships among systemic disease, medications, and oral health that impact overall patient care and treatment outcomes.
- PC.4** Identify patients/clients at risk for a medical emergency and manage the patient/client care in a manner that prevents an emergency

Dental Hygiene Diagnosis

- PC.5** Use patient assessment data, diagnostic technologies, and critical decision making skills to determine dental hygiene diagnosis, a component of dental diagnosis, to reach conclusions about the patient's dental hygiene needs

Planning

- PC.6** Utilize reflective judgment in developing a comprehensive patient dental hygiene care plan.
- PC.7** Collaborate with the patient and other health professionals as indicated to formulate a comprehensive dental hygiene care plan that is patient-centered and based on the best scientific evidence and professional judgment.
- PC.8** Make referrals to professional colleagues and other health care professionals as indicated in patient care plan.
- PC.9** Obtain the patient's/client's informed consent based on a thorough case presentation.

Implementation

- PC.10** Provide specialized treatment that includes educational, preventive and therapeutic services designed to achieve and maintain oral health. Partner with the patient in achieving oral health goals.

Evaluation

- PC.11** Evaluate the effectiveness of the implemented clinical, preventive, and educational services and modify as needed.
- PC.12** Determine the outcomes of dental hygiene interventions using indices, instruments, examination techniques, and patient/client self-report.
- PC.13** Compare actual outcomes to expected outcomes, reevaluating goals, diagnoses, and services when expected outcomes are not achieved.

Professional Growth and Development (PGD)

- PGD.1** Pursue career opportunities within health care, industry, education, research, and other roles as they evolve for the dental hygienist.
- PGD.3** Access professional and social networks to pursue professional goals

COURSE TEXTS

Cooper, M.D, Weichmann, L. **Essentials of Dental Hygiene (Preclinical Skills)**, 1st edition, Prentice Hall, Saddle River, NJ 2005

Logothetis, D. **SUCCESS! in Dental Hygiene**, 1st edition, Prentice Hall, Saddle River, NJ, 2009

Langlais, Miller & Nield-Gehering, **Color Atlas of Common Oral Diseases**, 4th edition, Lippincott, Williams & Wilkins, Philadelphia, 2009

Nield – Gehrig, J.S., **Fundamentals of Periodontal Instrumentation and Advanced Root Instrumentation**, 7th edition, Lippincott, Williams & Wilkins, Philadelphia, PA 2013

Nield – Gehrig, J.S., **Patient Assessment Tutorials**, 2nd edition, Lippincott, Williams & Wilkins, 2009

Thomson, E., Baumann, D., Schumann, D. **Case Studies in Dental Hygiene**, 3rd edition, Prentice Hall, 2012

Wilkins, E.M., **Clinical Practice of the Dental Hygienist**, 11th edition, Lippincott, Williams & Wilkins, Philadelphia, PA, 2013

Wyche, C.J. & Wilkins, E.M., **Student Workbook for Clinical Practice of the Dental Hygienist, 11th edition**. Lippincott, Williams & Wilkins, Philadelphia, PA, 2013

Wynn, Richard, L., et.al, **Drug Information Handbook for Dentistry**, 18th edition , Lexi Comp, Inc, Hudson, Ohio, 2012-2013

Meiler, T.F. et al, **Dental Office Medical Emergencies**, 4th edition Lexi Comp, Hudson, Ohio 2011

RECOMMENDED

Daniel, Susan & Harfst, Sherry, **Dental Hygiene Concepts, Cases & Competencies**, 2nd edition, Mosby, St Louis, MO 2008

These textbooks will be used throughout your dental hygiene education. DO NOT SELL them back to the bookstore or to anyone else, you will need them for all clinical courses and to review for the boards.

INSTRUCTIONAL RESOURCES (AVAILABLE IN THE LIBRARY AND ONLINE)

Journal of Dental Hygiene
Journal of Periodontology
Journal of American Dental Association

Journal of Practical Hygiene
Journal of Dentistry for Children

Journal of Dental Education
Journal of Allied Health
Journal of Dental Research
Journal of Public Health Dentistry
Journal of Oral Pathology
Dental Clinics of North America

RDH Magazine
New England Journal of Medicine

Internet Resources

The internet provides numerous resources on all aspects of oral health. Use www.adha.org and use related links.

EVALUATION

*Didactic/Online Component	65%
*Clinical/Online Component	30%
*Professionalism	5%

Final Letter Grades:

A	92 – 100
B+	89 – 91
B	83 – 88
C+	80 – 82
C	75 – 79
F	Below 75
N	Incomplete (course requirements not fulfilled)

***DIDACTIC COMPONENT 65%**

Online Clinical Reviews (3)	45%
Comprehensive Final Examination	35%
Online Assignments/Projects/Discussions	20%

Online Clinical Reviews (3) 45%

Clinical Reviews will integrate clinical and didactic knowledge. The reviews will be multiple choice, true/false, matching, slides and or short/answer. These will be administered in room **S 346 (computer lab)**. Refer to the calendar for dates and details.

Comprehensive Final Examination 35%

The Comprehensive Final Examination will be similar to the national board examination encompassing your knowledge base related to dental hygiene. A blueprint will be provided prior to the exam to focus your studies. This will be a cumulative examination from the entire first year of the Oral Hygiene courses (DHY101 and DHY201).

- ◆ **There will be no make up for clinical reviews.** If a student misses a clinical review, the grade from the final examination will count as both, the clinical review and the final examination grade. If a student misses the final examination the grade "0" will be issued. Under extenuating circumstances the Final-Make-up exam may be administered at the discretion of the instructor during the last week of the semester and will represent the format different that the regularly scheduled exam.

Students must have a cumulative average of 75% on the clinical reviews and final examination. Student projects may enhance a grade but may not be used to meet the minimum of 75%. If a student does not meet a 75% average, failure ("F" Grade) will result for the entire course.

Online Assignments/Projects/Discussions	20%
Age Targeted Prevention Project	
Cultural Competence Project	
Evidence-Based Dental Hygiene Practice Assignment	
Caries Management By Risk Assessment Assignment	

Group Projects

There will be two group projects this semester. One project will focus on Building Cultural Competence (CCP) and the second will focus on Age Targeted Prevention (ATPP).

CCP Groups will be assigned during the week of February 10th. All students will receive the same grade for the projects. Criteria will be distributed and posted online.

Weekly Assignments

- Assignments will be available on Sunday evenings at 6:00 PM and due at 11:59 PM.

***CLINICAL COMPONENT** **30%**

Patients	75%
Supportive Services	10%
Online Journal/Discussions	5%
Instrument Competencies	10%

Clinical Evaluation Criteria

A minimum final average of 75% in the clinical component of this course is necessary to meet the requirements of the entire OH II course. This will result in a failure in the clinical component if an average of 75% is not met. **All patients/quadrants must receive complete care to fulfill the requirements with minimal grade of 75% average**

If a student does not complete all supportive services, there will be a 20 point deduction for each outstanding service. This can result in a failure in the clinical component and a failure ("F" Grade) **will result for the entire course.**

Students MUST meet the 75% competency level in the Clinical Component to progress in the Dental Hygiene Program.

There will be a summer clinic during the 1st summer session. This clinic is **by invitation only**. Faculty will evaluate clinical progress throughout the semester and students in need of additional clinical experience will attend summer clinic.

If an invited student does not attend summer clinic, an "F" grade will be applied for the entire DHY210 course and the student will not be permitted to progress in the program until the summer clinic experience is completed.

Clinical Requirements

Patients	75%
Supportive Therapies/Clinical Competencies	10%
Clinical Journal	5%
Instrument Competencies	10%

Each student will complete a ***minimum (see the breakdown below)*** of patients subdivided into the quadrant categories including supportive services, radiographs, and clinical competencies to fulfill the requirements of the course.

It is the responsibility of each individual student to provide patients for their clinical experience. There is a clinic recall system but you should not rely on this to meet your requirements. It is not the responsibility of this program to provide patients for your clinical experience.

Patient Care	Minimum Requirement	Completed by 5/7/13
Type I (A)	4 patients	3
Type II (A,B,C,D)	8 patients or 32 quadrants	6 patients or 24 quadrants
Type III (B,C,D)	1 patient or 4 quadrants	1-0
Pediatric	2*	1-0
Geriatric	2*	1
Supportive Services/Clinical Competencies		
Fluoride Treatment tray method varnish	4 (2) (2)	2
Intra-oral Photo Series	4	3
Extrinsic Stain Removal/Coronal Polishing	2	2
Radiographs BWV FMS	4 (2) (2)	2
Ultrasonic Instrumentation	3	2
Oral Irrigation	4	2
Denture/Appliance Care	1	1
Homecare Therapy	3	1
Instrument Sharpening	1	1
Instrument Competencies	2 sets at 80%	2 sets at 80 %

***Pediatric/Geriatric patients care is incorporated into the DHY 201 as part of the Age Targeted Prevention. These numbers reflect the opportunity to provide the care to those populations.**

If a student fails 1st attempt on clinical competency/supportive therapy) he/she will retake this competency. Students not meeting the 75% competency level on the 2nd attempt will be examined by the primary faculty member to determine the deficiency. Student should attend a remediation meeting with the primary faculty before the 3rd attempt. If a student fails the 3rd attempt she/he will not continue with the clinical component of the

course. All clinical competencies (supportive therapies) must be passed at 75% to fulfill the course requirements. If a student does not achieve a minimum 75%, a failure will result for the entire course.

Clinical Journal

5%

- Clinical journals must include the following information for each patient experience.
 - Clinical experience, challenge, triumphs
 - Insight into clinical development
 - Patient interaction, development of communication skills
 - Targeted messages based on clinical findings.
- Do not just simply discuss the clinical protocols.
- Clinical journals will be an ongoing assignment. One completed journal will be submitted on **May 7, 2013**. Journals will be posted to the board weekly and submitted to the assignment box as one document.

Instrument Competency Evaluations 10%

Please note that all instrument competencies **must meet the 80% proficiency** level. If instrument competencies have not been completed, clinical requirements have not been met and a grade of "F" will result for the course.

If a student fails 1st attempt on instrument competency he/she will retake this instrument. Students not meeting the 80% competency level on the 2nd attempt will be examined by the primary faculty member. Student should attend a remediation meeting with the primary faculty before the 3rd attempt. If a student fails the 3rd attempt she/he will not continue with the clinical component of the course. All instrument competencies must be passed at 80% to fulfill the course requirements. If a student does not achieve a minimum 75%, a failure will result for the entire course.

If clinical competence is not demonstrated, the student will attend the summer clinic (pending student's clinical requirements completion by 5/7/2013, see table above) to achieve clinical competence or if clinical requirements have not been met and a grade of "F" will result for the course.

The first set of instrument competencies will be completed on March 28, 2013 and the second set on May 2, 2013

DO NOT WAIT UNTIL THE END OF THE SEMESTER for other competencies to be completed! Pace yourself!

The following clinical competencies must be completed and graded:

- 2 Periodontal Probe
- 2 Shepherd's Hook
- 2 ODU Explorer
- 2 Sickle scaler (H5/33 and 204SD/Nevi 4)
- 2 Gracey 1 /2
- 2 Gracey 15/16
- 2 Gracey 13/14
- 2 Barnhart 5/6
- 3 Homecare therapies
- 4 Fluoride therapies
- 2 Extrinsic Stain Removal/Coronal Polishing
- 4 Intraoral camera
- 3 Ultrasonic instrumentation
- 1 Instrument Sharpening
- 1 Denture/Appliance Care
- 4 Oral Irrigation

Students are responsible to incorporate clinical competencies into their patient care. Please inform faculty members at the completion of data collection in your treatment plan that you would like to be observed. Please have all forms available.

Students are not permitted to complete competencies until the skill is taught and students demonstrate a level of competence. Student is permitted to complete 3 (three) competencies to be graded on one patient. Students may not complete competencies on each other for credit.

On **May 7, 2013** a "Make-Up/Returning Patient Only" session will be held. Only radiographs are allowed to be completed on that day, all other clinical competencies/supportive therapies requirements must be completed by **May 2, 2013 at 4:30 PM**

- ◆ Progress reports will be reviewed with students at **5 week intervals** (in person or via email). Students must keep a record (log) of patients treated and services provided on the patient log sheet. In addition, students must have attendance sheets signed at each clinical session.

Clinical Rotations (Community Oral Health)

As part of the clinical component of this course, students will have opportunities for external rotations and collaborative practice opportunities. Students will receive a schedule of assigned clinical rotations. The schedule may not be altered by individual students. You may not switch, trade, or reschedule these assignments. This rotation schedule will also be posted on the course website.

Each student is responsible for his/her own transportation to and from any extramural clinical rotation site. Directions will be provided.

You will receive credit for all clinical rotation experiences toward your clinical requirements and service learning.

Service learning contracts will be completed in February 2013.

Final Clinical Evaluation

The final grade for the clinical component of the OH II course is based completing all clinical requirements, supportive services, and instrument competencies.

All patient requirements, supportive services, instrument competencies and attendance requirements must be met by May 7, 2013, at 4:30 PM to receive a passing grade for the clinical component of this course.

Clinic Manager and Technology Rotation

Each student will be assigned as clinic manager on a rotating basis in the AM & PM sessions. The clinic manager will act as the manager during the clinic session: collecting fees, picking up messages and making appointments. On the day you are assigned as clinic manager, do not schedule your patient. Additionally you will have an opportunity to work on your data entry into the EagleSoft Patterson Dental Software. Students may not switch, trade, or alter clinic manager assignments in any way without the direct permission of Prof. Luchynskyi.

Clinical Clearance/Checkout

A clinical clearance will be issued on Thursday, May 9, 2013.

All students must pick up instruments and handpieces, complete their clinical computer treatment data entries.

Clinical grades will not be issued until this clearance is completed.

Professionalism 5%

Professionalism is a key component in all dental hygiene courses. It is part of the grading system and is required of all students, faculty and staff at all times. Striving toward professional behavior includes: developing a good rapport with instructors, staff, peers and patients; punctuality; grooming; proper care and use of equipment; preparedness; timely completion of all assignments; management and treatment of patients befitting a dental hygienist and adherence to established policies and procedures. Failure to comply with any one of the above criteria will result in course grade reduction. Serious infractions of the professional code of behavior may result in further disciplinary action appropriate to the nature of the infraction. Compromising the safety of others may be cause for dismissal from the program.

Videotaping, Audio-taping and Social Networking

- ❖ No videotaping or audio-taping is permissible in the classroom or laboratory without the written consent of the classroom or laboratory instructor. The exception to this policy is through the written documentation providing an accommodations necessity from the office of special services. All lectures are uploaded to Moodle in PowerPoint or PDF format.
- ❖ As far as social networking- HIPAA and privacy issues may arise from improper use of social networking venues- twitter, YouTube and Facebook are some but not all the venues.

Moodle Room Structure

The Moodle structure will provide opportunities for discussion boards, email communication, class announcements, online journaling and other assignments, group projects and online clinical reviews.

The Homepage and Course Menu icons include:

- Online Syllabus
- Course Announcements
- Forums/Discussions
- Course Calendar
- Assignments
- Chat
- Quizzes
- Email
- Resources
- My Grades

Recommended Practice

To effectively manage this course for successful completion you should do the following:

- Read and follow the course syllabus
- Read the messages under " News and Announcements" on the Home Page (DHY 201)
- Follow the course calendar
- Complete all of the required readings and assignments and reviews
- Participate on the discussion board
- Use the email communication system for communication with each other and me on a regular basis
- Actively participate in the group projects

I will attempt to answer all email communications within 24 hours of receipt from Monday – Friday. Please check your email on a daily basis and respond in an efficient manner.

I will also be available for an online office hour on Mondays that the course is online. I will set up the Chat for this purpose. Demonstrations will be provided and the online tutorial is available.

Forum/Discussion Boards

Active participation is an integral component of this course. Please follow these guidelines:

- Post messages under the correct heading
- Use clear concise sentence structure
- Follow threads when available, it keeps the flow of the discussion
- Use appropriate language
- Do not post personal or social messages. Use email for this. This format is not conducive for social gatherings!
- You will not be expected to read all postings. Group assignments will be made and you will respond to designated groups.

Academic Conduct

The dental hygiene faculty adheres to the policy statement governing academic conduct as outlined in the Bergen Community College catalog.

- ❖ Faculty may not post exam grades due to privacy laws.
- ❖ Faculty reserve the right to delay the return of exam grades until all students have taken the exam and faculty review of the exam has been completed.
- ❖ Cheating, plagiarism, and unethical behavior will not be tolerated. Any student who has demonstrated any of the above behaviors will be disciplined according to college procedures.
- ❖ Student are not permitted to use any type of recording device to tape lectures or clinical sessions.
- ❖ Children are not permitted in classrooms and/or laboratories.
- ❖ Food is not permitted in classrooms, laboratories, clinic reception area or clinical areas.

Absence/Punctuality

The Commission on Dental Accreditation requires that students meet a minimum number of clinical and didactic hours in the program therefore students are expected to attend all class/lab sessions. If a student is absent for more than 2 clinical lab sessions, he/she will be required to attend make-up lab sessions assigned by the primary faculty member.

Bergen Community College's attendance policy states: "All students are expected to attend punctually every scheduled meeting of each course in which they are registered. Attendance and lateness policies and sanctions are to be determined by the instructor of each course. These will be established in writing on the individual course outline."

Each term there are specific clinic hours allotted so that the student can develop the skills necessary to become a professional and proficient health care provider. It is the student's responsibility to utilize the entire session for providing patient treatment.

Absence and tardy arrival to class will adversely affect the professionalism portion of the course grade. Students are responsible for all work covered during their absence. All demonstration/presentations/hands-on activities/exams must be made up within one week of the due date of the original assignment.

It is the student's responsibility to be on time for all classes and clinical sessions.

NOTE: Two (2) tardies will equal one (1) absence.

Unexcused absences will result in a failure for the day. Students must be present for all clinical sessions. If a patient cancels, the student must attend the entire scheduled clinical session. In the event of cancellation student is encouraged to find the patient that can sit for the session, otherwise students will practice on the manikin and utilize the following textbooks:

- Thomson, E., Baumann, D., Schumann, D. **Case Studies in Dental Hygiene**
- Nield – Gehrig, J.S., **Fundamentals of Periodontal Instrumentation and Advanced Root Instrumentation**
- Nield – Gehrig, J.S., **Patient Assessment Tutorials,**

Please note that attendance is critical to successful completion of the program. All program classes and activities must be prioritized. Scheduling conflicts must be resolved by the student so that program classes and activities are met.

The morning clinic session will start promptly at 8:30 AM and extend to 12:30 PM. The afternoon session will start at 1 PM and extend to 5 PM. Patients are dismissed one hour before the end of the session to allow time for scheduling further appointments, completion of the required treatment notes, and infection control procedures.

All students (students on campus or students on rotation) are expected to arrive 15 minutes prior to the scheduled clinic session. Students should plan to arrive for AM clinic by 8:15 and for PM clinic by 12:45. During the 15 minutes prior to opening the clinic to patients, the student will go to his/her assigned unit to set-up. This will give sufficient time to prepare for patient care.

Tardiness is recorded, reviewed, and counted in the final grade for each student. If a student is not set-up by the designated start of clinic, there will be a 10 point deduction the first time and a dismissal from clinic on any additional occasions. Punctuality is critical for successful patient care.

In the event of an emergency or illness, all students must contact the program secretary at 447-7937 after 9:00 AM. Before 9:00 AM, you may email tluchynskyi@bergen.edu or call 201 689 7729. Do not leave messages on the clinic phone to report absences.

Medical Clearances

All medical records must be complete and up to date. If notification is received from the medical office that a student record is not complete, the student will not be permitted to attend clinical sessions. This will directly impact the student's ability to complete the requirements of this course.

Serious Illness, Injury, Pregnancy

A Student in the Dental Hygiene Program who sustains a serious illness or injury or becomes pregnant must present written medical permission to attend classes and clinical practice at the time of resuming studies. Pregnant students must provide the Dental Hygiene Academic Department Chair with written permission to participate in radiology and clinical courses. Your good health is essential to the practice of dental hygiene. In order to successfully complete the program, full participation in all areas of practice will be required regardless of medical conditions. The college medical office and the instructor must receive copies of this medical clearance.

Pregnant students must wear a fetal monitor badge in addition to a radiology badge during all clinical sessions. A due date must be noted in writing. Please speak to the primary faculty member for more information and necessary forms.

Student Absences & Patient Cancellations

- ◆ Students are expected to attend all class and clinical sessions. Under the Commission of Dental Accreditation, students must complete minimum numbers of hours in both classroom and clinical areas in order to meet the standards for graduation. The BCC DH curriculum meets these hours. Students are discouraged from missing any classes or clinical sessions. Students must sign the absence report completed by the dental hygiene faculty member.
- ◆ **More than one absence from lecture will result in a 10 point deduction for each additional absence. This will be deducted from the final grade.**
- ◆ OH II students are permitted 3 patient cancellations. Students must note the cancellation in the patient record. All students should have a backup patient so that you may have productive clinical sessions. If the student provides care to another patient during the scheduled clinical session, then the patient cancellation does not count toward the permitted 3 cancellations.
- ◆ Students may not provide care to each other for credit during scheduled patient care clinical sessions.
- ◆ If a patient breaks an appointment and the student cannot find another patient treatment, the student checks with the assigned instructor for another clinical task, such as assisting a classmate in data collection, completing Typhon entries or reviewing instrumentation on a typodont.
- ◆ Instruments and any personal items left in the clinic or clinic drawers are left at the student's own risk. Bergen Community College is not responsible for any personal items left in the dental hygiene unit.
- ◆ **No credit will be given if a student jeopardizes the health, welfare or safety of the patient, himself or herself or a peer, any faculty or staff**

member or exhibits unprofessional behavior. Any such behavior will result in a Critical Incident Report completion.

- ◆ **The supervising Faculty must complete the Critical Incident Report that will be filed with the Academic Department Chair, Clinical Coordinator, and recorded in the student's permanent record.**
- ◆ **A Critical Incident Report will be reviewed on an individual basis and a decision/consequences will be determined by the Academic Department Chair in conjunction with Clinical Coordinator, and the supervising faculty to determine the appropriate course of action.**
- ◆ If a student is late for class or clinic, it will be noted and addressed with the individual student and a **10 point deduction from the final grade will be made for each lateness.** Consistent lateness is unprofessional and disruptive to those who are punctual.

General Clinic Policies (Clinic Manual Rev. Spring 2012)

Children under eighteen (18) years of age must be accompanied by a parent or guardian and that adult must remain in the reception area throughout the clinic session. Children will not be seen in the clinic if they are not accompanied.

Adults may not leave unattended children in the reception area. If a family is being seen, parents may not be a patient once the child's care is completed. The adult will be dismissed and rescheduled.

Students must dismiss all patients at the appropriate time of 12:00 for the AM clinic and 4:30 for the PM clinic session. Checkout times will be at 11:30 and 4:00. No students may have a patient in the chair after 12:00 or 4:30.

Confidentiality Policy

All patient medical and dental records are confidential. Students must respect the confidential nature of this information when discussing clinic patients. Discretion should be used as to when, where, and with whom information is discussed.

Anesthesia for Clinic Patients

The dental hygiene student will monitor the patient's comfort during treatment. If the student determines that the use of either topical or local anesthetic is required, s/he should initially consult with dental hygiene faculty. If it is determined that a local anesthetic is to be used, the dental hygiene faculty will consult with the screening doctor

Patients with Dental Implants

The screening doctor and clinic faculty should be notified of any patient with dental implants. Students will be very closely monitored while treating implant patients. Implant-care instruments are available in the clinic.

In the event of a fire drill or emergency, students and patients must immediately exit the building at designated sites. Be familiar with where these exits are and assist fellow colleagues and patients out of the building.

Course Issues

In the event that a problem arises with any aspect of this course, it is the responsibility of the student to bring the problem to the attention of the primary faculty member. If the issue involves any other faculty member, the student will be referred to discuss the problem with the faculty member that is involved. The primary faculty member will not change any evaluation grade issued by clinical faculty members.

In order to facilitate resolution of any issues that may arise, students must follow this protocol. Students should not make appointments with the coordinator, other faculty members or administration without first addressing the issue with the primary faculty member.

Students are accountable for themselves. Instructors will not address academic or program related issues with anyone other than the student who is registered for the course. Parents or significant others shall not be included in these discussions due to educational privacy laws.

Dress Code

Students are expected to exhibit a professional appearance as noted in the Student Handbook. Please note that professional attire is expected for all conferences, presentations, external experiences, and clinical sessions.

Uniforms may not be worn outside the college. Please plan to change before and after clinical sessions. Please do not wear any uniforms during classes or any uniforms worn to places of employment. Professional attire is expected for all off campus rotations.

One (1) small earring in each ear is permitted. Body art (tattoos) must be covered. Visible body piercings must be removed during dental hygiene clinical sessions and rotations.

An isolation gown (white) must be worn during clinic session unless stated otherwise. A regulation name pin/label will be worn on the left side of the isolation gown/uniform during all clinical and rotation sessions.

Hair must be pulled back away from the face and should not hang over the shoulders. No elaborate hair accessories/fasteners or head bands are permitted.

No food including candy, breath mints, smokeless tobacco or chewing gum. All cell phones, pagers, beepers, PDAs, and other electronic devices should be turned off and safely secured during all dental hygiene classes.

Personal hygiene is of utmost importance when working with others. Consider the following:

- Teeth
- Breath
- Perspiration
- Body Odor (no strong perfumes)
- Clean and ironed clothes

Infractions of the above mentioned appearance and attire requirements will be reflected in the professionalism portion of the final grade.

Progression in DHY 201 (Oral Hygiene II)

To progress through DHY201 all clinical requirements must be completed by the end of the scheduled clinic sessions. The following technical standards and essential functions are deemed necessary to progression, retention and successful completion of the DHY201:

1. **Motor skills/physical health** – students must have sufficient physical ability and health to acquire specific technical skills that allow for the performance of the various oral hygiene procedures without inflicting harm to their well-being or that of their patients, peers, faculty, or staff. Ergonomic positioning of self and patient for the performance of palpation, percussion, auscultation and other diagnostic procedures; manipulation of hand and motor instruments; basic life support; operating foot controls; positioning and moving dental equipment and responding to visual and aural equipment signals are among, but not all inclusive of the requisite skills.
2. **Sensory ability** – students must have adequate visual acuity to recognize and gather material from printed or handwritten formats, slides, films, videos, DVDs and x-rays; to differentiate between variations in the depth of field, color, shade, size and shape of clinical findings or their diagrammatic representation; and to observe and respond to nonverbal communication. Auditory functions must be sufficient to facilitate communication with faculty, peers and patients; and to recognize and respond to sound emanating from malfunctioning equipment. Tactile sensitivity is crucial in differentiating between normal and abnormal structures of the head and neck.
3. **Communication** – in order to provide effective patient care services, and become an integral dental team member, the student must have sufficient command of English. Excellent communication skills are vital in gleaning information from lectures, texts, journals and other written materials as well as conversations with dental personnel, and to convey gleaned information to patients, peers, faculty and staff. Writing skills are essential for documentation of clinical charts. Patient education, problem solving and collaborative exercises are all dependent upon the students' ability to communicate effectively.
4. **Cognition** – administration of appropriate and timely dental hygiene care is a function of analysis, integration, and synthesis of a variety of sources. Problem solving requires the ability to calculate, summarize and interpret written, oral and diagrammatic/pictorial information. Furthermore, written documentation of relevant

accurate and complete information in a prescribed, legally acceptable form is essential. Multi-tasking is also a requisite skill of the dental health care professional. The capacity to prioritize, in an appropriate sequence, may mean the difference between life and death in an emergency situation.

5. **Behavioral** – students must possess the emotional stability necessary to fully utilize his/her intellectual capability in providing the patient with appropriate, efficient and safe treatment. This can be demonstrated by the exercise of good judgment; prompt completion of patient related responsibilities; development of compassionate and effective rapport with patients, peers and faculty; adaptation to change; display of flexibility; compliance with programmatic procedures and policies as well as standards of academic integrity; tactful and congenial management of apprehensive patients; and acceptance of reasonable feedback and constructive criticism. Maintaining a calm demeanor in the face of stress that is inherent in the clinical treatment of patients is another demonstration of the attitudinal and behavioral maturity required for success.

OH II LECTURE OUTLINE (subject to change)

Date	Topic Area	Reading Assignment
1/28 On Campus	Introduction to DHY201 Extrinsic Stain Removal	NGPI- 28 (online) W – 21,44, 46, 47 C-9 D- 32 Module 1
2/4 On Campus	Fluoride Therapies	W- 17, 26, 35, 43 C-10, D-22 Module 2
2/11 On Campus	Health Promotion & Disease Prevention Diversity in Healthcare	W – 25, 26, 27, 28, 31, 33; C-6; D – 2,4,21,30 Module 3-4
2/18 Online	Age Targeted Prevention Pregnancy/Infant/Adolescent	W – 48, 49, D -9 Module 5
2/25 On Campus	Clinical Review #1 <i>S 346</i>	T – 1, 2, Case A & B W-2, D 29 Module 12
3/4 On Campus	Age Targeted Prevention Adolescent/Adult/Geriatric	W –52, 53 , D -9 Module 5
3/11 On Campus	Intro to Soft Tissue Management Periodontal Patient Non-Surgical Periodontal Therapies Power Scaling	W- 14, 15 16, 38, 39 D-31 NGPI- 25, 26 Module 6 -7
3/25 On Campus	Clinical Review #2 <i>S 346</i>	T – E & F
4/1 Online	Oral Health Regimens: Dentinal Hypersensitivity, Dentifrices	W 29, 43, D-23, 25 Designated sites Module 8
4/8 On Campus	Oral Health Regimens: Mouthrinses, Oral Irrigation	W – 29 D – 24 Designated sites Module 8
4/15 On Campus	Halitosis Management Care of Appliances and Dental Prosthesis	Designated sites W – 23 (374-375), 31 D-28 Module 9

4/22 On Campus	Clinical Review #3 S 346	T – Case C & G
4/29 On Campus	Oral Piercings Final Examination Review	Module 10
5/6 On Campus	Comprehensive Final Examination 9:00 – 11:00 AM	S 346
5/13 Online	Wrap Up	

Reading Assignment Codes: W – Wilkins D – Daniel NGPI - Nield
T- Thomson C- Cooper/Wiechmann Modules -MoodleRooms

HSIS – Hu-Friedy Instrument Sharpening Guide

Clinical Workshop Calendar (subject to change)

1/22	Intro to the Course Unit Assignment, Syllabus Review Handpiece Distribution	W-23, 24 NGPI-24
1/24	Extrinsic Stain Removal/Polishing Eagle Soft Treatment Plan, Appointment Sequence and management Typhon Journaling	NGPI- 28 (online) W – 21,44, 46, 47 C-9, D- 32 Module 1+Data Entry segment
1/29	Oral Physiotherapy Care of the Dental Prosthesis Fluoride Therapies (Clinical) COH Presentations-Overview	W- 17, 26, 35, 43 C- 10, D-22 Module 2 W – 25, 26, 27, 28, 31, 33; C-6; D – 2, 4,21,30 Module 3
2/2	Instrumentation	
3/15	Power Scaling, Oral Irrigation Instrument Sharpening No Patients	W- 14, 15 16, 38, 39 D-31 NGPI – 22,23,25,26 Module 6, 11 HFIS Guide

Students must strive to adhere to technical, behavioral, attitudinal, and professional standards of clinical performance.

Student Acknowledgement

Please review the course outline **CAREFULLY** related to requirements, evaluation and rules and regulations of the course. Each student will sign a student acknowledgement that you have reviewed and understand the course outline and return it to me to keep in your file.

**Bergen Community College
The School of Health Professions
Dental Hygiene Department**

Student Acknowledgement

**I, _____ have read and understood
the syllabus for course DHY201 – Oral Hygiene II and agree to abide by
the protocols and requirements set forth in this syllabus, Student
Handbook, and the Bergen Community College Catalog.**

Student Signature/Date

Tomira Luchynskyi, MHSc, RDH 1/22/2013

**Tomira Luchynskyi, MHSc, RDH
Faculty Signature/Date**