

Bergen Community College

Division of Health Professions/Dental Hygiene Department

Periodontology II Course Syllabus

Course Title: Periodontology II – DHY 219HY

Term: Fall 2014

Hours/Credits: 1 Lecture Hour/1 Credit

Prerequisites: DHY-201, DHY-205, DHY-209, and BIO-209.

Class Day and Time: DHY 219-001 - Tuesday 10:30 AM – 11:20 AM

DHY 219-002 - Tuesday 11:30 AM – 12:20 PM

Classroom: C-321

Instructor: Denise D. Avrutik, RDH, MS

Office Hours: Monday: 7:30 AM – 8:30 AM

Tuesday: 12:20 PM – 12:50 PM

Wednesday: 7:30 AM – 8:30 AM and 12:30 PM – 1:00 PM

Also by appointment – Telephone: 201- 493-3628

Office: B-313

Email Address: davrutik@bergen.edu

Textbook: Nield-Gehrig, J.S., Willmann, D., Foundations of Periodontics for the Dental Hygienist. Wolters, Kluwer/Lippincott, Williams and Wilkins. 3rd Edition, 2011.

Instructional Resources:

- BCC Library and Resource Center
- Dental/Dental Hygiene Journals – National and International
- Web-based resources

Internet Resources:

- www.adha.org (American Dental Hygienists' Association)
- www.ada.org (American Dental Association)
- www.cochrane.org (Cochrane Reviews)
- <http://thePoint.lww.com> - Periodontal Resources on the Internet – companion adjunct to your textbook.

Course Description:

This course is an advanced study of the disease process and treatment modalities for periodontal disease. Emphasis is placed on the dental hygienists' role in developing soft tissue management programs including initial therapy, maintenance and evaluation of oral health. Implants, periodontal surgery and oral rehabilitation are also integrated. Case studies, integration of clinical therapies and computer assisted learning are used.

Prerequisites: DHY-201, DHY-205, DHY-209, and BIO-209.

Course Objectives:

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

- Provide a clinical periodontal assessment designed to provide a comprehensive picture of the patient's periodontal health status. Outline and evaluate the radiographic appearance of the periodontium in health and disease.
- Compare the relationship between nutrition and periodontal health and periodontal disease.
- Discuss how evidence based data influences best practice when choosing and implementing patient care.
- Describe how the clinical periodontal assessment is used in the clinical decision making and treatment planning for the periodontally involved patient.

- Discuss nonsurgical periodontal therapy and the role of self-care measures, periodontal instrumentation, and the use of chemical agents utilized to prevent or control plaque-induced gingivitis or chronic periodontitis.
- Explain the patient's role in non surgical periodontal therapy, and be able to recognize and recommend various oral hygiene aids for tooth and tongue cleaning to promote optimum oral hygiene.
- Compare and contrast the various uses and delivery methods related to supragingival and subgingival irrigation and the methods for subgingival irrigation with antimicrobial chemicals.
- Describe the various uses and delivery methods related to chemical agents in periodontal care including subgingival irrigation with antimicrobial chemicals.
- Explain the potential importance of host modulation and treatment strategies that includes host modulation.
- Discuss the goals, terminology and treatment considerations relevant to periodontal surgery.
- Develop post-surgical instructions necessary for the patient's self-care.
- Outline the components and methods relevant to periodontal therapy re-evaluation and maintenance.
- Apply the knowledge acquired in this course to the development of periodontal maintenance strategies in a clinical setting.
- Discuss the importance of patient compliance and learn strategies to promote improvement of the periodontium.
- Describe the components and placement protocols for a dental implant.
- Provide appropriate methods of dental implant instrumentation and the necessary considerations for implant maintenance.
- Outline the various periodontal diseases that can require emergency treatment.
- Recognize and formulate a treatment plan specific to the condition for patients with periodontal diseases that require emergency treatment.

Competencies for Entry into the Profession of Dental Hygiene

Dental hygienists must complete an accredited educational program and qualify for licensure in any state or jurisdiction. They practice in collaboration with dental and other health care professionals in a variety of settings.

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 oral health 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 emerging technology and treatment modalities to integrate into patient dental hygiene care plans to achieve high-quality, cost-effective care.
- C.5 Assume responsibility for professional actions and care based on 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 the values of the dental hygiene profession through service-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.
- C.11 Record accurate, consistent, and complete documentation of oral health services provided.
- C.12 Initiate a collaborative approach with all patients when developing individualized 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 positive values of overall health and wellness to the public and organizations within and outside the profession.
- HP.2 Respect the goals, values, beliefs, and preferences of all patients.
- HP.3 Refer patients who may have physiological, psychological, or social problems for 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 to determine action plans and availability of resources to meet the health care 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.5 Evaluate reimbursement mechanisms and their impact on the patient's access to oral health care.

CM.6 Evaluate the outcomes of community-based programs, and plan for future activities.

CM.7 Advocate for effective oral health care for underserved populations.

Patient Care (PC)

Assessment

PC.1 Systematically collect, analyze, and record diagnostic data on the general, oral, and psychosocial health status of a variety of patients using methods consistent with medical legal 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 at risk for a medical emergency, and manage the patient 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 a dental hygiene diagnosis, a component of the dental diagnosis, to reach conclusions about the patient's dental hygiene care 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 the patient care plan.

PC.9 Obtain the patient'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 provided services, and modify care plans as needed.

PC.12 Determine the outcomes of dental hygiene interventions using indices, instruments, examination techniques, and patient self-reports as specified in patient goals.

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.2 Develop practice management and marketing strategies to be used in the delivery of oral health care.

PGD.3 Access professional and social networks to pursue professional goals

Reference: American Dental Education Association, House of Delegates, (2111),
Competencies for Entry into the Profession of Dental Hygiene

Core Competencies:

- Apply a professional code of ethics in all endeavors.
- Adhere to state and federal laws, recommendations, and regulation in the provision of dental hygiene care.
- Provide dental hygiene care to promote patient/client health and wellness using critical thinking and problem solving skills in the provision of evidenced based on practice.
- Use evidence based decision making to evaluate and incorporate emerging treatment modalities.
- Assume responsibility for dental hygiene actions and care based on accepted scientific theories and research as well as the accepted standard of care.
- Communicate effectively with individuals and groups from diverse populations both verbally and in writing.

Teaching Methodology: Periodontology II is a hybrid online course. A portion of the course work will be presented by lecture and PowerPoint presentations in class and the remainder will be offered online. Inquiry learning is often conducted to engage the students and increase student contribution and participation. Homework assignments and a group project will also be employed to enhance the student's comprehension of periodontology.

ADA Compliance Statement:

Students who require accommodations in accordance with the Americans with Disabilities Act (ADA) can request these services from the Office of Specialized Services. To learn more about how to apply for services. Please visit them at:
<http://www.bergen.edu/oss>

Examination Policy:

There will be 2 examinations during the semester; a midterm and a Periodontology I and Periodontology II cumulative final. The exam dates will be announced during session one of the Spring semester.

Make-up exams will be administered at the discretion of the instructor and will represent a format different than the regularly scheduled exam. If the student misses the scheduled make-up exam, a grade of "0" will be given.

Course Requirements:

Grading is the responsibility and province of the instructor. All students will be graded consistently and fairly. Continuous open communication between student and instructor will be encouraged and appreciated.

There will be assigned readings and supplemental studies.

To receive a passing grade, students must achieve a grade average of 75 and above.

Evaluation:

The course grade will be based upon the following weights:

Two in-class examinations (A midterm and a cumulative final)

Total weight - 70% - Both weighted equally (35% each)

Case Study Project – 15%

Homework Assignments – 15%

The following grading system reflects the policy established by the college and shall be used in this course:

A	-	92 – 100
B+	-	89 – 91
B	-	83 – 88
C+	-	80 – 82
C	-	75 – 79
F	-	below 75

Evaluation

A cumulative average of 75 must be achieved on all examinations in Periodontology I to successfully pass the course. When a student has not been able to earn a "C" grade or better, the student will receive the letter grade "F" which signifies the course must be repeated.

Grading Policy

It is an unfortunate feature of grade windows that many people are within a point of the next higher grade. In order to maintain the integrity of the system I feel that I have to be consistent in allocating grades. In doing so, I don't think that one can permit personal issues to influence the decision. I have outlined a grading scheme that is as generous as possible but maintains the standards of the college. In doing so I am not able to change the assigned grades.

Attendance/Punctuality:

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."

All program classes and activities must be prioritized. Scheduling conflicts must be resolved by the student so that program classes and activities are met.

Please note that attendance is critical to successful completion of the program. It is your responsibility to find out what you have missed by consulting the instructor. I will not pursue you regarding your missed work.

More than two (2) unexcused absences will result in a loss of credit in this course and will result in the student repeating the entire course.

Two tardy arrivals will equal one absence.

Absence of the Instructor:

As noted in the college catalog, students are expected to wait twenty (20) minutes for a faculty member to come to class. If at the end of the twenty minutes, the faculty member does not come, the students should sign an attendance sheet and indicate the course, date and time. A student should deliver this attendance sheet to the dental hygiene office. The students cannot be penalized by faculty for not waiting longer than the twenty minutes.

Serious Illness, Injury or Pregnancy:

A student in the Dental Hygiene program, who sustains a serious illness, 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 a written permission slip from their physician to participate in radiology and clinical courses. The college medical office and the instructor must each receive a copy of this medical clearance.

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 is required regardless of medical conditions.

Academic Conduct:

- The Dental Hygiene faculty adheres to the policy statement governing academic conduct as outlined in the Bergen Community College catalog.
- Tape recorders are not permitted in DHY 209.
- Faculty may not post exam grades due to 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.
- Cell phone use is NOT permitted during class.

Progression Requirements:

- A student must complete the Dental Hygiene program within four consecutive years from enrollment in the program.
- Two core dental hygiene course failures prohibit the student from progressing in the program.
- All dental hygiene students who are withdrawing from a dental hygiene course (DHY) or have received an "F" grade in any course must notify the dental hygiene program chairman about their intention to repeat the course.
- General science and education pre- and co- requisites must be fulfilled as listed in the course sequence of the catalog and program brochure.
- It is the responsibility of the individual student to review the prerequisites for each course prior to registration.

Recommended Practice:

To effectively manage the course for successful completion, the following is recommended:

- Read and follow the course syllabus
- Follow the course calendar
- Complete all of the required readings, assignments and reviews.
- Use the email communication system for communicating with each other and your professor on a regular basis.
- Check Moodle every evening for course alerts.
- Consult the instructor if you have any questions regarding the course material.

Email and Moodle Communication

I will attempt to answer all email communication within 24 hours of receipt Monday through Friday. The only exception to this would be on my non-teaching day which is Thursday. I will check my email at a minimum of once during the weekend and will answer all weekend Moodle mail by 8:30 PM on Sunday. Please check your email on a daily basis and respond in an efficient manner. If you would like to schedule an online discussion with me please email me a suggested time.

Netiquette Reminders During Discussions and Forums

Remember to be respectful, keep your responses on topic, post your messages to the appropriate audience, quote responsibly and reply substantially and keep your responses jargon free.

Assignments:

All assignments must be submitted by the designated date and time. No late assignments will be accepted.

Moodle

When possible, Power Point presentations will be placed on Moodle for class and online teaching.

Course Content

(Subject to change)

<u>Month</u>	<u>Assigned Readings</u> <u>*Subject to additions</u>	<u>Competencies for</u> <u>Entry in to the</u> <u>Profession of</u> <u>Dental Hygiene</u>
September		
2	Clinical Periodontal History and Assessment Chapter 19 HW – Focus on Patients Pg. 340	C.1, C.2, C.3, C.7, C.13, HP.3, HP.4, HP.5, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10
09	Radiographic Analysis of the Periodontium Chapter 20 HW – Focus on Patients Pg. 352	C.1, C.2, C.3, C.7, C.13, HP.3, HP.4, HP.5, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10
16	Nutrition and Periodontal Disease Best Practices for Periodontal Care Chapters 21 and 22 HW – Focus on Patients Pgs. 361, 379	C.1, C.3, C.7, C.13, HP.3, HP.4, HP.5, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10
23	Treatment Planning for Patients with Periodontal Disease Project Outline - Patient Cases, Treatment Planning, Therapy and Follow-up Chapter 23 HW- Focus on Patients Pg. 392	C.1, C.2, C.3, C.7, C.13, HP.3, HP.4, HP.5, HP.6, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
30	Nonsurgical Periodontal Therapies Chapter 24 HW – Focus on Patients Pg. 412	C.1, C.2, C.3, C.7, C.13, HP.3, HP.4, HP.5, HP.6, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
October		
07	Patient's Role in Nonsurgical Periodontal Therapy Chapters 25, 26 HW – Focus on Patients Pgs. 430, 447	C.1, C.3, C.7, C.13, HP.3, HP.4, HP.5, HP.6, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13

14 Midterm Exam

21	Supragingival and Subgingival Irrigation	Chapter 27 HW – Focus on Patients Pg. 460	C.1, C.2, C.3, C.7, C.13, HP.3, HP.4, HP.5, HP.6, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
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28 Class is not in session

November

04	Dentin Hypersensitivity and Fluoride Therapies Presentation	Diane Peterson, RDH, MS, Colgate Oral Pharm.	C.3, C.4, C.5, C.10, C.11, C.12, C.13, HP.4, HP.5, HP.6, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
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11	Chemical Agents in Periodontal Care Host Modulation	Chapters 28, 29 HW – Focus on Patients Pgs. 479, 489	C.3, C.4, C.5, C.10, C.11, C.12, C.13, HP.4, HP.5, HP.6, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
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18	Surgical Periodontal Therapies	Chapter 30	C.1, C.3, C.7, C.13, HP.3, HP.4, HP.5, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
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25	Surgical Periodontal Therapies Continued and Maintenance for the Periodontal Patient	Chapter 30 and 31 HW – Focus on Patients Pgs. 549 and 575	C.1, C.3, C.7, C.13, HP.3, HP.4, HP.5, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
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December

2	Dental Implants and Implant Maintenance/ Review of Periodontal Emergencies Greater New York Dental Meeting – Mandatory Attendance	Chapter 32, 33 HW – Focus on Patients Pgs. 594 and 606	C.1, C.3, C.7, C.13, HP.3, HP.4, HP.5, PC.1, PC.2, PC.3, PC.5, PC.6, PC.7, PC.8, PC.10, PC.11, PC.12, PC.13
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**09 Cumulative Final
Examination
Project Due**

16 Arrestin Presentation
Hands-on experience

Nancy Zolan,RDH
Valiant Pharmaceuticals

C.1, C.2, C.3, C.4,
C.5, C.10, C.11, C.12,
C.13, HP.4, HP.5,
HP.6, PC.1, PC.2,
PC.3, PC.5, PC.6,
PC.7, PC.8, PC.10,
PC.11, PC.12, PC.13

Lecture Outline

Lecture 1 Clinical Periodontal History and Assessment

Goal: To educate the student of the clinical periodontal assessment process designed to provide a comprehensive picture of the patient's periodontal health status.

- Objectives:**
1. Explain which members of the dental team are responsible for the clinical periodontal assessment.
 2. Recognize and record medical, dental, social, and pharmacologic information that will effect patient management.
 3. Describe the elements of a complete extraoral and intraoral hard and soft tissue evaluation
 4. Define and describe various evaluative methods (probing, clinical attachment levels, bleeding, exudate, mobility, etc.) needed to measure variations from periodontal health.
 5. Correctly perform a periodontal charting.
 6. Explain how to calculate the width of attached gingiva.
 7. In a clinical setting, calculate and document the clinical attachment levels for a patient with periodontitis.
 8. Recognize and record dental-implant structures.
 9. Describe methods for recognizing microbial plaque biofilm and recording plaque, gingival, and bleeding incidences.
 10. Describe and define irregularities (calculus, overhangs, etc.) that may be found in a pocket using radiographs, a probe, and an explorer.
 11. Compare and contrast a periodontal screening examination and a comprehensive periodontal assessment.
 12. Accurately perform a periodontal screening examination.
 13. Name the components of a comprehensive periodontal assessment.
 14. Utilize each component of a comprehensive periodontal assessment to describe correctly a patient's periodontal condition including extent and severity of any periodontal diseases prior to and after treatment.
 15. Recognize the rationale, objectives and therapies involved in the preventive, therapeutic and maintenance phases of dental hygiene care.
 16. Determine the patient's use and understanding of preventive self-care measures and oral health goals.

Lecture 2 Radiographic Analysis of the Periodontium

Goal: Outline the radiographic appearance of the periodontium in health and disease.

- Objectives:**
1. Recognize the radiographic characteristics of normal and abnormal alveolar bone.
 2. Recognize and describe early radiographic evidence of periodontal disease.
 3. Distinguish between vertical and horizontal alveolar bone loss.
 4. Recognize potential etiologic agents for periodontal disease radiographically.
 5. Gain practical experience in radiographic assessment by applying information from this lecture and readings in the clinical setting.

Lectures 3 Nutrition and Periodontal Disease Best Practices for Periodontal Care

Goal: Discuss the relationship between nutrition and periodontal health and disease.

Discuss how evidence based data influences best practice when choosing and implementing patient care.

- Objectives:**
1. Explain the possible relationship between vitamin D and calcium deficiency and periodontal disease.
 2. List some oral symptoms that can be seen in chronic or severe vitamin C deficiency.
 3. Define scurvy.
 4. Explain the term ascorbic acid-deficiency gingivitis.
 5. List several nutrient deficiencies that may increase the risk for periodontal disease.
 6. Name two dietary factors that may increase the risk for periodontal disease in addition to specific nutrient deficiencies.
 7. Name three general functions of nutrients in maintaining periodontal health.
 8. Explain how nutritional counseling might be accomplished with a patient.
 9. Define the term best practice.
 10. Summarize how the explosion of knowledge is impacting practitioners and patients.
 11. Identify the three components of evidence-based decision making.

12. Define a systematic review.
13. Discuss the benefits and limitations of experience.
14. Describe the role of the patient in the evidence-based model.
15. List locations for accessing systematic reviews.
16. Explain the difference between a peer-reviewed journal and trade magazine.
17. State desired three outcomes from attending continuing education courses.
18. Formulate a question using the PICO process

Lecture 4 Treatment Planning for Patients with Periodontal Disease

Goal: Discuss how the clinical periodontal assessment is used in the clinical decision making and treatment planning for the periodontally involved patient.

- Objectives:**
1. List the three fundamental diagnostic questions used when assigning a periodontal diagnosis.
 2. Explain how to arrive at appropriate answers to each of the fundamental diagnostic questions.
 3. Explain the difference between the terms signs of a disease and symptoms of a disease.
 4. Explain the term silent disease.
 5. Describe what is meant by the term clinical attachment loss.
 6. Discuss those factors that are significant in the longevity of the dentition or the progression of disease and the anticipated response to treatment.
 7. Assess patient risk factors.
 8. Develop an individual tooth and total mouth prognosis in a simulated situation.
 10. Describe the elements of a well-written diagnosis for periodontitis.
 11. Develop individual, evidence-based, comprehensive sequenced dental hygiene care plans for patients using diagnostic information, which incorporates the patient's history, goals, values and motivations, clinical assessment, diagnosis, economics and other relative dental needs.
 12. Develop dental hygiene treatment plans that include both a preventive education and clinical treatment component for all types and stages of periodontal disease.

13. Describe modalities of treatment that may be required by patient economics or other factors relative to the prognosis and treatment.
14. List the phases of treatment.
15. Describe the factors dictating the need for a periodontal consultation and referral.
16. Describe how specific systemic conditions and drug usage can influence periodontal treatment planning.
17. Discuss precautions necessary for patients with special needs during therapy.
18. Explain the term informed consent.
19. List guidelines for obtaining informed consent.

Lectures 5 Nonsurgical Periodontal Therapies

Goal:

Discuss nonsurgical periodontal therapy and the role of self-care measures, periodontal instrumentation, and the use of chemical agents utilized to prevent or control plaque-induced gingivitis or chronic periodontitis.

Objectives:

1. Describe and implement techniques to minimize disease transmission during periodontal therapy.
2. Utilize evidence-based protocols to identify periodontal therapies that will reduce the bacterial load and those that modulate the host response.
3. Describe the pharmacotherapeutics used in periodontal therapy, including pain and anxiety control, local delivery medicaments, systemic medications, postoperative medications and their indications and contraindications.
4. Explain the term nonsurgical periodontal therapy.
5. List and explain four goals of nonsurgical therapy and their components.
6. Write a typical plan for nonsurgical therapy for a patient with plaque-induced gingivitis.
7. Write a typical plan for nonsurgical therapy for a patient with slight chronic periodontitis.
8. Explain the terms periodontal debridement and deplaquing.
9. Describe the principles of hand and powered instrumentation.
10. Discuss the limitations of hand instruments and powered instruments.
11. Describe the assessment of a patient's occlusal relationships and the effect of occlusal trauma on the periodontium.

12. Describe the role and elimination of iatrogenic factors in periodontal disease.
13. Describe the type of healing to be expected following successful instrumentation of root surfaces.
14. Explain the origin of the condition called dentinal hypersensitivity.
15. Describe a strategy for managing dentinal hypersensitivity during nonsurgical therapy.
16. Recognize clinical parameters that indicate periodontal progression over time as well as a stable periodontium in nonsurgical periodontal therapy.
17. Explain why reevaluation is a critical step during nonsurgical therapy.
18. List steps in an appointment for reevaluation of the results of nonsurgical therapy.
19. Describe three decisions made during the reevaluation appointment.
20. Explain current American Academy of Periodontology recommendations for deciding which patients should be managed by a periodontist.

Lectures 6 Patient's Role in Nonsurgical Periodontal Therapy

Goal: Students will be able to explain the patient's role in non surgical periodontal therapy and be able to recognize and recommend various oral hygiene aids for tooth and tongue cleaning.

- Objectives:**
1. Discuss the concept of self-care and the roles and goals of the patient and provider.
 2. Explain the role of motivation in the patient's compliance with treatment and self-care recommendations.
 2. State the benefits of power toothbrushes.
 3. In the clinical setting, recommend and teach power brushing to an appropriate patient.
 4. Give examples of oral conditions that might prompt a dental hygienist to recommend a power toothbrush.
 5. State the rationale for tongue cleaning.
 6. In the clinical setting, recommend and teach tongue cleaning to an appropriate patient.
 7. Explain why interdental care is of special importance for a patient with periodontitis.

8. Define the term gingival embrasure space and explain its importance in selecting effective interdental aids.
9. Define the term root concavity and explain its importance in selecting effective interdental aids.
10. In a classroom or laboratory setting, explain the criteria for selection and correctly demonstrate the use of the following to an instructor: power toothbrush and all the interdental aids presented in this chapter.
11. In a clinical setting, recommend, explain, and demonstrate appropriate interdental aids to a patient with type III embrasure spaces. Assist the patient in selecting an appropriate interdental aid that the patient is willing to use on a daily basis function.

Lecture 7 Supragingival and Subgingival Irrigation

Goal: Students will learn the uses and delivery methods related to supragingival and subgingival irrigation and the methods for subgingival irrigation with antimicrobial chemicals.

- Objectives:**
1. Discuss the oral health benefits from using a dental water jet.
 2. Identify the types of patients who would benefit from using a dental water jet.
 3. Compare the use of the dental water jet to traditional dental floss.
 4. Distinguish the depth of the delivery between the dental water jet, a toothbrush, dental floss, and other interdental aids.
 5. Name the types of agents that can be used in a dental water jet.
 6. Instruct patients in the use of the dental water jet including how to use the standard irrigation tip, subgingival tip, and orthodontic tip.
 7. Summarize recent research findings presented that relate to using professional irrigation to deliver chemicals to periodontal pockets.

Lecture 8 Chemical Agents in Periodontal Care Host Modulation

Goal: Students will learn the uses and delivery methods related to chemical agents in periodontal care including subgingival irrigation with antimicrobial chemicals.

Students will learn the potential importance of host modulation and treatment strategies that include host modulation.

- Objectives:**
1. Describe the difference between systemic delivery and topical delivery of chemical agents.
 2. Explain the term systemic antibiotic.
 3. Explain why systemic antibiotics are not used routinely in the treatment of patients with plaque-associated gingivitis and patients with chronic periodontitis.
 4. Describe three examples of mouth rinse ingredients that can help reduce the severity of gingivitis.
 5. Define the term controlled-release delivery device.
 6. List three antimicrobial agents that can be delivered with controlled-release delivery devices.
 7. Explain why toothpastes are nearly ideal delivery mechanisms for chemical agents.
 8. List two toothpaste ingredients that can reduce the severity of gingivitis.
 9. Explain the term host modulation.
 10. Explain the potential importance of host modulation.
 11. Name some anti-inflammatory mediators.
 12. Name some pro-inflammatory mediators.
 13. List three types of drugs that have been studied for use as possible host modulating agents.
 14. Explain why low-dose doxycyclines are useful as host modulating agents.
 15. Explain the term subantibacterial dose.
 16. Make a list of treatment strategies for periodontitis patient that includes host modulation.

Lectures 9 and 10 Surgical Periodontal Therapies

Goal: Students will learn the goals, terminology and treatment considerations relevant to periodontal surgery and develop post surgical instructions necessary for the patient's self-care.

- Objectives:**
1. List objectives and explain the rationale for periodontal surgery.
 2. Recognize the clinical conditions that are most likely to benefit from surgery.

3. Describe the indications, contraindications and methodology for the most commonly performed periodontal surgical procedures.
4. Explain the term relative contraindications for periodontal surgery.
5. Define the terms repair, reattachment, new attachment, and regeneration.
6. Describe wound healing following various periodontal procedures.
7. Explain the difference between healing by primary intention and healing by secondary intention.
8. Explain the term elevation of a flap.
9. Explain two methods for classification of periodontal flaps.
10. Describe two types of incisions used during periodontal flaps.
11. Describe healing following flap for access and open flap debridement.
12. Describe the typical outcomes for apically positioned flap with osseous surgery.
13. Define the terms ostectomy and osteoplasty.
14. Define the terms osteoinductive and osteoconductive.
16. Explain the terms autograft, allograft, xenograft, and alloplast.
17. Name two types of materials available for bone replacement grafts.
18. Explain why a barrier material is used during guided tissue regeneration.
19. Explain the term periodontal plastic surgery.
20. List two types of crown lengthening surgery.
21. List some disadvantages of gingivectomy.
22. Describe the technique for gingival curettage.
23. Explain what is meant by biological enhancement of periodontal surgical outcomes.
24. Describe the management of medical and surgical complications that can occur during periodontal surgery.
25. Name two broad categories of materials used for suturing periodontal wounds.
26. Explain the term interrupted interdental suture.
27. List general guidelines for suture removal.

28. Describe various types of surgical dressings and the rationale for the placement of each.
29. Describe the technique for periodontal dressing placement.
30. List general guidelines for periodontal dressing management.
31. Explain the important topics that should be covered in postsurgical instructions.
32. List postoperative instructions to be given for various periodontal surgical procedures.
33. Discuss postoperative emergency situations and the procedures for management.
34. List steps in a typical postsurgical evaluation of the surgical site.

Lecture 11 Therapy Re-evaluation and Maintenance for the Periodontal Patient

Goal: Students will learn the components and methods relevant to periodontal therapy re-evaluation and maintenance, apply the knowledge acquired in this module to the development of periodontal maintenance strategies in a clinical setting, understand the importance of patient compliance and learn strategies to promote its improvement.

- Objectives:**
1. Explain the role of the re-evaluation appointment in determining the next phase of periodontal treatment.
 2. Describe the ideal time frame for a re-evaluation appointment.
 3. Describe the components of the re-evaluation appointment utilize to assess the treatment out come and patient compliance.
 4. Evaluate the outcomes of periodontal therapies provided to patients.
 5. Determine if a referral for additional therapy is indicated.
 6. Explain the term periodontal maintenance.
 7. Explain the effectiveness of periodontal maintenance in preventing disease development, maintaining health and preventing disease progression.
 8. List three objectives of periodontal maintenance.
 9. Describe how periodontal maintenance relates to other phases of periodontal treatment.
 10. Name usual procedures performed during a patient appointment for periodontal maintenance.
 11. Define the term baseline data.

12. Describe the criteria and methods used in assessing the outcome of maintenance therapy.
13. Describe guidelines for determining whether the general practice office or the periodontal office should provide periodontal maintenance for a particular patient.
14. Describe how to establish an appropriate maintenance interval.
15. Define the term recurrence of periodontitis.
16. List clinical signs of recurrence of periodontitis.
17. List reasons for recurrence of periodontitis.
18. Explain the term compliance.
19. Define the terms compliant patient and noncompliant patient.
20. Describe criteria for modifying periodontal supportive therapy.

Lecture 12 Dental Implants and Implant Maintenance

Goal: Students will learn the components and placement protocols for a dental implant, appropriate methods of dental implant instrumentation and the necessary considerations for maintenance.

- Objectives:**
1. Define the term dental implant and describe the components of a typical dental implant and restoration.
 2. Describe the types of implants used in dentistry.
 3. Describe the types of materials used in implants.
 4. Describe the procedure for the placement and restoration of implants.
 5. Define the term peri-implant tissues.
 6. Compare and contrast the periodontium of a natural tooth with the peri-implant tissues that surround a dental implant.
 7. Define the terms osseointegration and biomechanical forces as they apply to dental implants.
 8. Compare and contrast the terms peri-implant mucositis and peri-implantitis.
 9. List the criteria used to judge the success of implants.
 10. Describe the post surgical instructions for an implant patient.
 11. Describe the techniques, instruments and procedures for implant maintenance.
 12. Describe an appropriate maintenance interval for a patient with dental implants.

13. In the clinical setting, select appropriate self-care aids for a patient with dental implants.

Lecture 13 Periodontal Emergencies

Goal:

Students will review the various periodontal diseases that can require emergency treatment, recognize and treat patients with periodontal diseases that require emergency treatment.

Objectives:

1. Describe the techniques for management of acute periodontal conditions/emergencies.
1. Name and describe the three types of abscesses of the periodontium.
2. Define the terms acute and circumscribed.
3. List the possible causes of abscesses of the periodontium.
4. Compare and contrast the abscess of the periodontium and the endodontic abscess.
5. Outline the typical treatment steps for a gingival abscess and a periodontal abscess.
6. Describe the clinical situation that can result in a pericoronal abscess.
7. Outline the typical treatment for a pericoronal abscess (pericoronitis).
8. List the two types of necrotizing periodontal diseases.
9. Describe the characteristics of necrotizing ulcerative gingivitis.
10. Outline the typical treatment steps for necrotizing ulcerative gingivitis.
11. Describe the symptoms of primary herpetic gingivostomatitis.

**Division of Health Professions
Dental Hygiene Department**

**Periodontology II Syllabus
Fall 2014**

STUDENT ACKNOWLEDGEMENT VERIFICATION

I, _____ acknowledge that I have read and fully understand the course syllabus, including requirements, course policies, student responsibilities, methods of evaluation, and grading criteria for DHY 219HY – Periodontology II.

I agree to abide by the protocols and requirements set forth in this course syllabus, the *Bergen Community College Dental Hygiene Student Handbook* and the *Bergen Community College Catalog*.

If I have any questions regarding this course syllabus I will ask Professor Avrutik for clarification prior to signing this course agreement.

Student Signature/Date

Faculty Signature/Date