



**GREAT FALLS  
COLLEGE**

**MONTANA STATE  
UNIVERSITY**



# Great Falls College MSU Dental Hygiene Handbook

Revised Summer 2023

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COLLEGE**

**MONTANA STATE  
UNIVERSITY**

## A Note from the Program Director

Welcome to the start of an excellent year on your adventure to becoming a dental hygienist! Before you read this handbook, I want to give you a round of well-deserved applause. It is so important to recognize your accomplishments. Everyone reading this letter has accomplished a lot to get to this point. You should take a moment to congratulate yourself on a job well done. So please take a bow, you have worked hard for this.

This handbook is designed to inform you about how this program works. Within this book is everything you will need to know to pass this program. Please read it carefully. Your instructors expect you to know this material and test you on it throughout this program. In practice, a dental hygienist needs to be detail-oriented. We are responsible for collecting the data the dentist needs to determine disease. What we do is important. We must be careful that we do not harm our patients. Reading this handbook will be the beginning of your quest to be the best hygienist you can be. Make sure you read this carefully and refer to it often when you have questions about expectations or procedures.

“Our footsteps... a path to a new beginning.” The first graduating class of this program chose this quote to represent their journey through dental hygiene school. As you begin to take your first steps this year remember that you are not alone, and many have walked this road before you. So, take a moment to reflect on the path that got you here and then jump with both feet into the coming year.

Cordially,

Julie Barnwell, RDH, M.Ed.

# Table of Contents

Purpose of the Handbook	1
Liability and Health Insurance	3
Equal Opportunity/American Disability Act Policy	3
GFC Health Science General Health Policy Required	5
CODA Complaint Statement	9
Dental Hygiene Program Goals	10
Dental Hygiene Program Outcomes	10
Dental Hygiene Curriculum	13
Academic Policies and Procedures	15
Advising	16
Academic Integrity Policy	17
Didactic Classroom Attendance Policy	17
Program Assessment and Grading Scale	18
Exam Procedure	19
Dress code	20
Grievance	22
Human Subject and Lab Practice	22
Externship Experiences	23
Readmission to the Dental Hygiene Program	24
Clinic Curriculum and Clinic Protocols	27
Patient Recruitment/Dismissal	28
Clinic Attendance Policy	29
Clinic Assessment	32
TalEval	33
Clinic Patient Requirements	34
Clinic Requirement Definitions	37
Local Anesthesia Requirements	43
Radiology Requirements	44
Skill Assessments	46
Program Competencies	48
Incompletes	49
Clinic Procedures	50
Weekly Objectives	51
Periodontal Diagnosis	54
Clinical Duties	54
Chart Audit	55
No Client Session	56
Clinical Remediation Policy	57

## Table of Contents (Page 2)

Children of Patients in the Clinic	58
Patient Acceptance Policy Fees	58
Fees	59
Patient Management Record	59
Oral Hygiene Education and Instruction	60
Professional Behavior and Conduct	61
Professional and Ethical Responsibility	63
Medical Records/Confidentiality	65
Phone Use	66
Smoking, Drinking and Food	67
Visitor	67
Graduation and Licensing	68
Signature Forms	72

# Purpose of the Handbook

The Dental Hygiene Program Handbook provides students with policies specifically related to the Dental Hygiene Program and the Division of Health Sciences. The student will need to rely on the College catalog for policies related to all students attending Great Falls

College Montana State University. The policies outlined in this handbook supersede the college policies in areas specific to the dental hygiene program. The College catalog can be found at <http://students.gfcmsu.edu/>.

This college is part of the Montana University System. The Dental Hygiene program is accredited through American Dental Association Commission on Dental Accreditation (CODA) and the Northwest Commission of Colleges and Universities providing accreditation to MSU. The program has been designed to prepare you for a professional career in Dental Hygiene. You will be provided with the necessary curriculum content to acquire the knowledge and skill to sit for the 4 board exams required to become licensed in Montana, such as the Central Regional Dental Testing Services (CRDTS) exam.

Between didactic/clinical course syllabi and this handbook all policies and procedures for the dental program/clinic have been outlined for student reference. Answers to questions that students may have during the program can be found in their respective course syllabi and handbook. If clarification is required in a specific didactic course, students are asked to address it with the specific course instructor directly.

The Dental Hygiene Handbook will be available to enrolled dental hygiene students in the D2L course shells of all clinical lab/practice courses such as Introduction to DH Preclinical/lab, Clinical DH Practice I, II, III, and IV. It is also located on the GFC MSU dental hygiene program website under the additional information tab. If a student requires additional clarification of a policy or procedure in a clinical course, they are asked to post on the clinical course discussions in D2L. Clarification will then be posted in the clinic course discussion, in the announcement tool on D2L or through email.

Students will be provided clarification to program policy and procedure questions after consultation with all program faculty to ensure consistent information.

Please note the Dental Hygiene Program Handbook is a dynamic document and evolves along with the program. Additions and/or changes may be made to this handbook during your enrollment if the need arises. You will be provided with addendum documentation as is necessary and asked to sign a receipt of information form.

Students are responsible for all content in the individual course syllabi and this handbook. *Students are strongly advised not to seek clarification from fellow students as many times the information received may be incorrect. Clarification of a policy or procedure should come directly from the program faculty.*

If you have concerns, questions, problems related to the program, please discuss those with the individual course lead instructor first. If the concern is not resolved, you are asked to schedule an appointment with the Program Director and if there is still no resolution, an appointment can be made with the Health Science Division Director.

When writing and updating this handbook the American Dental Hygiene Association (ADHA) Code of Ethics for Dental Hygienists is continually referenced to ensure the program achieves high levels of ethical consciousness and decision making by all dental hygiene students. Please refer to the following website: [ADHA Bylaws and Code of Ethics](#)

It is your responsibility to become familiar with the handbook and have it accessible to refer to when questions about policies and procedures arise. Your faculty will also reference it throughout the academic year to ensure policies and procedures are followed. You should keep a copy of the handbook in a convenient place for easy reference.

The dental hygiene program is unique compared to other programs in the Great Falls College MSU Health Science Division because it maintains a fully functioning on-site dental clinic. The on-site dental clinic provides the dental hygiene student beneficial hands-on learning experiences preparing them for the workforce. Along with the significant benefits which this unique environment allows, maintaining an on-site dental clinic poses daily challenges to ensure the safety of all students, faculty, and patients along with maintaining proper function of all its equipment during its operation.

Policies and procedures have been developed and will be applied to ensure the on-site dental clinic functions properly so that all patients treated receive safe comprehensive dental hygiene care.

Our mission is to provide a curriculum that offers students the opportunity to become knowledgeable and skillful in the profession of dental hygiene. The curriculum has been designed based on American Dental Association Commission on Dental Accreditation (CODA) Dental Hygiene Program Standards as its framework. Learning experiences were developed to prepare the student for successful completion of all licensing exams required to become an entry-level oral health care professional. The program's successful outcomes provide verification that the program's curriculum offers the student opportunity to achieve their goal of becoming a dental hygiene professional upon completion.

## Liability and Health Insurance

Each student must have professional liability insurance while enrolled in the Dental Hygiene Program. The liability insurance is available through a college-selected company and is included in the fees each semester.

Basic terms of the policy are:

Each student is covered only while a member in an official Great Falls College

MSU Dental Hygiene Program course. Coverage ceases upon termination of the student's enrollment, either by graduation, withdrawal, or dismissal. Coverage is limited to activities that are part of, and a requirement of, the student's curriculum.

It is the student's responsibility to notify the clinical faculty member about any occurrence that might cause liability to the students, clinical affiliate, or Great Falls College MSU. An unusual occurrence report must also be completed to document the incident.

The student is responsible for all expenses resulting from injuries they experience in the clinical setting. Personal health insurance is strongly recommended by the program faculty. Student health and medical insurance can be obtained through Great Falls College MSU. Visit Student Central for details.

## Equal Opportunity

Great Falls College Montana State University recognizes that there are myriad dimensions of diversity, including sex, race, age, national origin, ethnicity, tribal affiliation, gender identity and expression, intellectual and physical ability, sexual orientation, faith and non-faith perspectives, socioeconomic status, political ideology, education, primary language, family status, military experience, cognitive style, and communication style. The individual intersection of these experiences and characteristics is a resource, strength, and benefit to the Great Falls College Montana State University campus community.

### EEO

Great Falls College MSU is committed to the provision of equal opportunity for education, employment, and participation in all College programs and activities without regard to race, color, religion, national origin, creed, service in the uniformed services (as defined in state and federal law), veteran status, gender, age, political ideas, marital or family status, physical or mental disability, genetic information, gender identity, gender expression, or sexual orientation. The College's Equal Opportunity Officer is the Chief Student Affairs & Human Resources Officer, 2100 16th Avenue South, Great Falls, MT 59405. Telephone: 406-771-4300

### Discrimination, Harassment, and Retaliation (Title IX)

Montana State University campuses commit to a learning and working environment that emphasizes the dignity and worth of every member of its community that is free from discrimination, harassment, and retaliation based upon race, color, religion, national origin, creed, service in the uniformed services (as defined in state and federal law), veteran status, sex, gender, age, political ideas, marital or family status, pregnancy, physical or mental disability, genetic information, gender identity, gender expression, or sexual orientation (taken together, generally, "protected- class harm"). An inclusive environment is necessary for a

healthy and productive University community. The University will take appropriate action to prevent, resolve, and remediate protected-class harm. Great Falls College MSU's Title IX Coordinator is the Chief Student Affairs & Human Resources Officer, 2100 16th Ave South, Great Falls, MT 59405 Telephone: 406-771-4300

## Disability Services

The Americans with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides reasonable accommodation for their disabilities. Instructors must receive an official letter from the Academic Success and Assessibility Office to provide accommodation. If you believe you have a disability requiring an accommodation, please contact: Director of Academic Success and Accessibility Services, 406-771-4311 [Academic Success and Accessibility](#)

## GFC MSU Health Science General Health Policy

### Policy

All Health Science students must complete the required Great Falls College MSU Student Immunization and Verification Form and submit it to their Program Director after acceptance into their program. If a student has an illness or infectious disease or has sustained an injury which could potentially be exacerbated by attendance at a clinical site or by participating in a laboratory experience on campus or could potentially place a fellow student or patient at risk, the student has an obligation to seek treatment of the medical problem or injury. A signed release form from a physician or other healthcare provider must be submitted to the Program Director before the student will be allowed to participate in a lab or clinical experience.

### Rationale

Future healthcare providers must understand the impact of personal health and safety in on-campus labs and at clinical sites. Patients who seek healthcare are vulnerable due to altered health/risk status and must be protected; the safety of fellow students on campus must also be recognized. Health Sciences students who are potential health/safety risks to others or themselves should not have contact with patients at clinical sites or participate in potentially unsafe situations on campus. The potential unsafe situation must be discussed with the program director.

### Recommendations

All Health Science students will submit a physical examination form and complete required immunizations to their Program Director after acceptance into their program. At



registration, the student will select or waive their comprehensive health insurance. It is expected that the student carries comprehensive health insurance as indicated on Banner Web. There are health risks inherent in working in a clinical environment. Students are urged to use good sense in acquiring and maintaining health insurance coverage. Liability insurance which covers students while attending clinical sites is included in student lab fees for each program. This is not health insurance for the student; liability insurance covers the student in the event of harm or injury caused to a patient the student is treating at a clinical site.

Approved, Great Falls College MSU

Required Health Screening Tests and General Safety Guidelines

Communicable Disease Prevention Policy and Immunization Policy

In compliance with Montana state law, students born after January 1, 1957, who are taking seven or more credits or are enrolled in a certificate or degree program must:

<b>Must show one of the following</b>			
Submit documentation immunizations were given after 1967 and after the student's first birthday and must have been administered at least thirty (30) days apart. Current immunizations must have been administered in the form of the MMR vaccine. Immunizations must be documented by a physician, registered nurse, or school official.	Submit documentation of having contracted measles and rubella. Documentation by a titer is required.	File a medical or religious exemption.	A written statement of declination from the student.

Evidence of one of the above must be submitted before students can register for courses. Please note that students are expected to complete mandatory clinical enhancement experience in other health care facilities that may require these vaccinations or other vaccines not listed. If this is the case, students who are not vaccinated will not be able to participate. If reasonable alternatives cannot be found a student could fail those courses.

TB Policy

A two-step screening for TB must be done upon entry into any Health Science program. Evidence of screening must be provided to the Program Director. The student may be asked to provide a repeat screening based on the clinical site's policy, with evidence of update provided

to the Program Director to be kept on file during the program of study. Students are expected to follow health practices protecting both their patients and them. Clinical sites require proof of students TB tests prior to allowing attendance at the clinical internship. Failure to show proof of TB test within the last 12 months will result in denial of access to the dental clinic or other clinic sites.

### Hepatitis B Series

The college strongly recommends Health Science students who will be working in direct patient contact areas to receive the Hepatitis B vaccine series. Students are urged to use good sense in protecting themselves against health risks and potentially infectious diseases in the clinical environment. If a student declines to receive the Hepatitis B series, a signed declination form will be kept in the student's file. Students are encouraged to discuss the benefits of receiving the Hepatitis B series with their health care provider. Students must also be aware that certain clinical sites will not allow students access to their facility unless they have completed the series.

### Varicella Series

The college strongly recommends Health Science students must demonstrate with a titer they are sufficiently immune to the virus or that they have received the complete vaccine series. If a student declines, they must sign a declination form.

## Needle Sticks and Sharps

On campus when practicing patient care techniques involving needles and other sharp instruments, students are expected to follow guidelines and protocols as outlined by their instructor. When attending clinical internships, the protocol of the facility will be followed.

Red biohazard containers are available in all labs in which the use of needles or sharps is a component of the learning experience and lab. Needles must not be recapped, bent, broken, or clipped, removed from syringes, or otherwise manipulated by hand. Disposable needles, syringes, blades, razors, and other sharps must be disposed of in the red biohazard containers. Students must never place their hands inside the red container, and if the container is full, they should ask the instructor for a new container.

In the event of accidental needle stick with a contaminated needle, at a clinical site, the student must follow the procedures as outlined by the clinical site, and submit a "Report of Exposure to Communicable Disease" form as found in the medical emergency cart in the dental clinic, The Program Director will keep the completed form in the student's file, and follow-up with any protocol as established by the facility. In the event of an accidental needle stick with a contaminated needle or an exposure to body fluid to non-intact skin, mucous membrane, or by percutaneous injury during an on-campus lab or in clinic, the student should comply with the Needle Stick Protocol found in the medical emergency cart in the dental clinic and submit a "Report of Exposure to Communicable Disease" form to the program director. It is critical to follow these steps because if a source, the person whose blood or body

fluid to which the student was exposed, is positive for HIV transmission, there are medications that are available that prevent HIV transmission. These medications, however, are most effective when started within two hours after an exposure.

The source and student will be encouraged to seek this counseling so they can receive the appropriate medical treatment and the needed information to prevent further exposure. The source individual will be encouraged to make available the results of the test to the student and the Program Director copies of all reports will be kept by the Program Director in the student's file. The Program Director will follow-up with the source and the student following the current guidelines as outlined by the Center for Disease Control and Prevention (CDC) and policies as outlined by the City/County Health Department. The program director will also inform the Health Sciences Division Director of the incident; however, the names of the source and student will not be shared for confidentiality purposes.

## Blood and Body Fluids

At clinical sites, procedures for handling blood, body fluids or any types of secretions must be followed in accordance with the facility's policies and procedures. In case of a blood or secretion spill, students must follow procedures outlined by the facility. Never leave a spill unattended: either clean the spill according to facility protocol (depending on the circumstance) or wait until housekeeping personnel arrive.

- If there is blood, body fluid or any type of secretion spilled in the campus lab, don gloves and lay dry paper towels on the spill to absorb the fluid then layer a second set of disinfectant soaked paper towels over the spill.
- There will be a container in your lab which holds a mixture of bleach diluted in water at 1:10. Use this mixture to soak the paper towels. Notify your instructor there has been a contaminated spill.
- Encircle the spill with additional disinfectant being careful to minimize aerosolization while assuring adequate contact.
- Decontaminate all items within the spill area. Allow a minimum of 20 minutes contact time to ensure disinfection.
- Discard contaminated disposable materials using appropriate Biohazardous waste disposal procedures.
- Spray down the area again with the bleach solution and wipe clean, disposing of all paper towels in the Biohazardous bag: tie the bag and dispose of the bag in one of the large red Biohazardous containers located near the dental clinic. Your instructor will tell you the location of the large containers.

### Linen

When handling any types of linen (sheets, pillowcases, towels, etc.) at clinical sites, take care to minimally agitate the materials due to airborne contamination. In many facilities, paper

products are used in certain areas. All soiled linen should be bagged at the location of its use: it should not be sorted or rinsed in patient care areas. Follow facility procedures in disposing of soiled linens to appropriate areas.

If using linens in on-campus lab, your instructor will inform you about your program's care and laundering of any linen. The washer and dryer utilized for the dental clinic is found in the dental locker room.

### Disposal of Hazardous Waste

Biohazardous waste is disposed of in accordance with Occupational Safety and Health Administration (OSHA) regulations. Any full sharps containers or red biohazard bags containing contaminated material must never be left in a lab after class: assist your instructor in disposing of materials in the appropriate container or area. At clinical sites, always follow facility procedures. There are usually many bio-hazard containers available in all patient care areas.

### Additional Precautions

If a student has an exudative lesion, weeping dermatitis or any skin lesion which could potentially transmit disease through touch, the student should refrain from patient care and from handling patient equipment until the condition resolves. Students should notify their instructor of the condition, and it is up to the course instructor to allow students with these conditions into the on-campus lab. Students working in direct patient care areas that are pregnant or suspect they may be pregnant should inform their program director. Pregnant women must be particularly cautious when working with certain types of patients. Your program director, course instructor and clinical preceptor should be aware of your pregnancy to minimize any risks to your health and safety.

### Resuscitation Equipment

At the College, there is an Automatic External Defibrillator (AED) mounted to the wall outside of the Dental Clinic on the northeast side of the campus building. When at the clinical site, students must know where to locate nearby resuscitation equipment. Students should ask their clinical preceptor about facility procedures when responding to an emergency. This information is usually included in the facility orientation when students first arrive at the site. Students must provide proof of a current CPR card before they begin the first week of class.

### Exposure to or Diagnosis of a Communicable Disease Policy

This policy prevents disease spread to other students, patients, and the community. The procedures attached to this policy have an approved, uniform, and planned approach for assisting students who have been exposed to or contracted a communicable disease. The student is responsible for being knowledgeable about communicable diseases and their own role as a potential source of infection or their responsibility for the health and safety of others. This is especially significant in the clinical setting when working with patients already in a

debilitated and medically compromised condition.

This policy refers to any communicable condition which potentially threatens student or patient safety. Examples would be strep throat, herpes, scabies, rubella, tuberculosis, hepatitis, or HIV (Human Immunodeficiency Virus). A student who suspects contact, has contact, is exposed to, or contracts a communicable disease must report such contacts/diagnosis to his or her Program Director immediately. Contact may be direct touch, needle stick, airborne or handling of contaminated materials or equipment. Compliance with the policy and procedures as follows is the responsibility of the student.

When attending a clinical site, students are to report suspected or real contact with a communicable disease to their clinical preceptor immediately following the event. The clinical preceptor will follow the facility's procedures and notify the Program Director. The student should also contact the Program Director as soon as possible after the event.

If a student has a communicable disease, or may have come in contact with one, outside the clinical setting (for example chicken pox or other common but contagious disease) the student must notify the Program Director who will then determine if the student should be allowed to attend on-campus classes or the clinical internship.

If it is confirmed the student has a communicable disease, they must follow-up with appropriate medical care and inform the Program Director. Decisions pertaining to the student's continuation or postponement of any type of coursework will be made on a case-by-case basis, based on the severity of the disease, at the discretion of the Program Director. The health and safety of the student, patients and other students will always be a deciding factor in these cases. The most up-to-date information from the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) will be used as guidelines for decision-making.

## What is a Dental Hygienist?

According to Esther Wilkins, "The Registered Dental Hygienist is a licensed professional, oral health educator, and clinician, who, as a co-therapist with the dentist, uses preventative, educational, and therapeutic methods for the control of oral diseases to aid individuals and groups in attaining and maintaining optimum oral health."

### American Dental Hygiene Association (ADHA) Principles of Ethics

- To provide oral health care utilizing the highest professional knowledge, judgment, and ability.
- To serve all patients without discrimination.
- To hold professional relationships in confidence.
- To utilize every opportunity to increase public understanding of oral health practices. To instill public confidence in all members of the dental health professions.
- To cooperate with all health professionals in meeting the health needs of the public. To participate actively in this professional association and uphold its purpose.
- To maintain professional competence through continuing education. To exchange professional knowledge with other health professions. To maintain high standards of personal conduct.

# American Dental Association Commission on Dental Accreditation (CODA) Complaint Statement

The Commission on Dental Accreditation of the American Dental Association will review complaints that relate to a program's compliance with the accreditation standards and competencies. The Commission is interested in the sustained quality and continued improvement of the dental and dental-related education programs. They do not, however, intervene on behalf of individuals or act as a court of appeal of individuals in matters of admission, appointment, promotion, or dismissal of faculty, staff, or students.

The Great Falls College MSU Dental Hygiene Program has been granted "**Accreditation without reporting**" and the next site visit is in the year 2026.

A copy of the appropriate accreditation standards and/or ADA Commission's policy and procedure for submission of complaints may be obtained by contacting:

Commission on Dental Accreditation  
211 East Chicago Avenue, Chicago, IL, 60611  
1-800-621-8099 ext.2719

If students or community members have a complaint with the program and carry out its standards, a complaint can be placed on the Great Falls College MSU's Complaint Log along with contacting the Commission. The Log is at the Dental Clinic Reception desk with the Dental Clinic Manager.

## Dental Hygiene Program Goals

### **Patient Care:**

*Provide challenging clinical experiences that encompass dental hygiene care for the child, adolescent, adult, geriatric, and special needs patients so students can demonstrate clinical care that is safe, effective, and ethical.*

### **Instruction:**

*Provide a comprehensive curriculum in dental hygiene that reflects current practice and incorporates a variety of health care settings.*

### **Research:**

*Incorporate evidence-based research into presentations for dental hygienists that require students to analyze and assess emerging technology and treatment modalities hygienists can integrate into their clinical practices.*

### **Service:**

*Promote participation in professional organizations and community service projects.*

# Dental Hygiene Program Outcomes

## **When students graduate, they will be prepared to:**

1. Apply a professional code of ethics in all endeavors. This should include assuming responsibility for professional actions and care based on the current standard of care. This standard of care should incorporate scientific theories and research. (DENT 105)
2. Adhere to state and federal laws, recommendations, and regulations in the provision of oral health care. (DENT 205)
3. Use critical thinking skills, comprehensive problem solving and reflective judgement to identify oral health care strategies that promote patient health and wellness and should be able to determine a dental hygiene diagnosis. These strategies should consider predisposing and ecological risk factors to prevent disease. In addition, these strategies should recognize how systemic diseases, meds, and oral health conditions influence patient care. (DENT 260)
4. Use of evidence-based decision making to evaluate emerging technology and treatment modalities as well as accepted scientific theories and research to provide not only quality, cost effective care but also educational, preventative, and therapeutic oral health services. (DENT 130)
5. Continuously perform self-assessment for lifelong learning and professional growth that may include pursuing career opportunities within health care, industry, education, research, and other roles as they evolve in dental hygiene. They should understand how to access professional and social networks to pursue professional goals. (DENT 281)
6. Communicate effectively with diverse individuals and groups, serving them without discrimination by acknowledging and appreciating diversity. (DENT 250)
7. Promote the values of the dental hygiene profession as well as positive values of overall health and wellness to the public and organization through service-based activities, positive community affiliations and active involvement in local organizations within and outside the profession. (DENT 260)
8. Apply quality assurance mechanisms to ensure continuous commitment to accepted standards of care that include methods that ensure the health and safety of the patient and clinician in the delivery of care. (DENT 151 & DENT 122)
9. Initiate a collaborative approach with all patients to develop an individualized care plan that may include collaboration with and consultation from other health care providers to formulate a comprehensive dental hygiene care plan that is patient centered. Demonstration of professional judgement and current science-based evidence practices with considerations of

the unique needs of each patient including cultural sensitivity and possible referrals. These referrals may include physiological, psychological, or social problems. Plans will adhere to disease prevention and maintenance strategies. Finally obtain and document patients informed consent based on through presentation of case. (DENT 160, DENT 251, DENT 252, & DENT 281)

10. Systematically collect, analyze, and record diagnostic data on the general, oral, and psychosocial health status of a variety of patients. Record accurate, consistent, and complete documentation of oral health services provided. (DENT 251 & DENT 281)

11. Identify patients at risk for medical emergencies and manage patient care to prevent emergencies. Manage a medical emergency by using professional judgement that may include providing life support, CPR, and specialized training and knowledge. (DENT 151, DENT 251, & DENT 252)

12. Provide specialized treatment that includes educational, preventative, and therapeutic services designed to achieve and maintain health that includes determining outcomes of dental hygiene interventions using appropriate techniques. Also, evaluate the effectiveness of this treatment and compare actual outcomes of dental hygiene interventions with expected outcomes and adjusted as needed to provide optimal care. (DENT 252 or DENT 281)

13. Identify population risk factors as well as oral health needs in the community and develop/implement strategies that promote health-related quality of life which may include determining availability of resources to meet the health care needs of this population or community in addition advocate for effective oral health care for underserved populations. (DENT 232)

14. Evaluate reimbursement mechanisms and their impact on the patient's access to oral health care. (DENT 205)



# Dental Hygiene Curriculum

The curriculum is designed to provide the student with the necessary didactic coursework and clinical experience to make them eligible to sit for the nationally recognized certification examination administered by the National Dental Hygiene Board of Examiners and the Central Regional Dental Testing Service and to prepare the student for employment as a dental hygienist. If you have any questions regarding Advanced Standing, please discuss this with your program advisor or a college advisor. The Great Falls College MSU Dental Hygiene Program will be following the advance standing policy outlined by the college to determine credit eligibility.

## DENTAL HYGIENE PROGRAM PREREQUISITE COURSES

The above courses must be completed prior to admission into the Dental Hygiene Program. Grades in prerequisite courses are a major factor in ranking applications for admissions.

Course Number	Title	Credits
BIOM 250	Microbiology for Health Sciences/Lab	4
BIOM 201	Human Anatomy and Physiology I/Lab	4
BIOM 211	Human Anatomy and Physiology II/Lab	4
CHMY 121	Intro to General Chem w/Lab	4
CHMY 141	College Chemistry 1 w/Lab	4
CHNY 143	College Chemistry 2 w/Lab	4
WRIT 101	College Writing	3
M 121	Or any math course in the MUS core	3-4
	Total	22/27

The above prerequisite courses must be completed within 5 years of applying for the dental hygiene program. Other general education courses must be completed within 15 years of application. Lab components of courses are required.

Fall Semester (1 <sup>st</sup> Year)		Spring Semester (1 <sup>st</sup> year)	
DENT 101 Introduction to Dental Hygiene/Preclinical	2	DENT 150 Clinical Dental Hygiene Theory I	2
DENT 102 Introduction to Dental Hygiene/Preclinical Lab	2	DENT 121 Clinical Dental Hygiene Practice I	4
DENT 110 Theory of Infect Control & Disease Prevention	1	DENT 160 Periodontology I	3
DENT 118 Head and Neck for Hygienist	3	DENT 165 Oral Embryology and Histology	2
DENT 122 Oral Radiology/Lab	2	DENT 125 Oral Radiology Interpretation with lab	1
HTH 140 Pharmacology for Health Care Providers	2	DENT 240 Local Anesthesia/Nitrous Oxide Theory & Lab	2
DENT 105 Professional Issues and Ethics in Dental Practice	1		
DENT 119 Dental Anatomy *Pending CODA Approval summer 2023	1		
Total	14	Total	14

Summer Semester (2 <sup>nd</sup> Year)		Fall Semester (2 <sup>nd</sup> Year)		Spring Semester (2 <sup>nd</sup> Year)	
DENT 260 Periodontology II	1	COMX 111 Intro to Public Speaking <b>OR</b> COMX 115 Intro to Interpersonal Communication	3	PSYX 100 Intro to Psychology <b>OR</b> PSYX 230 Developmental Psychology	3
DENT 223 Clinical Dental Hygiene Theory II	2	DENT 130 Dental Materials	2	SOCI 111 Introduction to Sociology	3
DENT 251 Clinical Dental Hygiene Practice II	4	DENT 237 Gerontology and Special Needs Patients	2	DENT 232 Community Dental Health and Education	2
NUTR 221 Basic Human Nutrition	3	DENT 263 General/Oral Pathology	3	DENT 205 Professional Issues & Ethics in Dental Practice	1
		DENT 250 Clinical Dental Hygiene Theory III	2	DENT 280 Clinical Dental Hygiene Theory IV	1
		DENT 252 Clinical Dental Hygiene Practice III	5	DENT 281 Clinical Dental Hygiene Practice IV	5
Total	11	Total	17	Total	15

Prerequisite Credits	Program Credits	Total Degree Credits
22-27	71	93-98



**Dental Hygiene Program**

Great Falls College MSU

# **Academic Policies and Procedures**

# Academic Advising and Career Center

Your academic advisor is one of the most important and helpful individuals to you during your time at Great Falls College MSU. It is important for you to work with your advisor on all decisions regarding your course load and plans. You should make it a point to visit your advisor at least once a semester so you can register for your program courses on time and graduate on time. Advisors can help with:

- Selecting courses that match your interests and skills
- Choosing a degree program
- Making a long-term academic plan to meet your goals
- Interpretation of placement test scores
- Short and long-term academic planning
- Registration procedures and class scheduling- including advisory pin number and course schedule for registration
- Transfer information
- Completing an application for graduation
- Academic concerns
- Making referrals to college and community resources

## Illness and Injury

In case of illness, injury, or health concern, the policies of Great Falls College MSU and the clinical sites will be followed. Should an illness or injury occur in the clinical setting, students must immediately notify the faculty members and staff. Injuries must be documented on agency forms. Students are referred to the emergency room, urgent care, or personal physician as appropriate. An assessment by the faculty will determine if the student may return to the clinical setting and provide safe hygiene care. The Great Falls College MSU Dental Hygiene Program is not liable for any illness or injury incurred on campus or at a clinical site. The student is responsible for any or all costs associated with their treatment of injury.

## Dignity Statement

The Dental Hygiene Program is committed to providing all students with an education of the highest quality and in a manner that exhibits concern and sensitivity to our students, faculty and others who use our services. It is therefore essential that everyone connected with this program exhibits appropriate and conscientious behavior in dealing with others.

Students, faculty and staff members have the right to be treated fairly and with sensitivity. They must be given the maximum opportunity to learn and work in an environment that is caring, friendly, and free from harassment and discrimination. Every student and employee of Great Falls College MSU is expected to treat every person with dignity and respect.

# Academic Integrity Policy

As an institution of higher education, Great Falls College Montana State University requires its students to adhere to exacting standards for academic integrity. It is a violation of academic integrity to present ideas, designs, or work of another person/source as one's own effort or to permit another person to do so. The College will regard the following as violations of academic integrity requiring disciplinary action:

- **Plagiarism** Submitting an assignment; whether written, oral, graphic, or computer-generated, which consists wholly or partially of the words, work, or ideas of another person or source without giving the original author proper credit.
- **Copying** Using crib notes, cheat sheets, books, or other material, resource, or electronic device as aids in an examination or any other graded exercise, unless the instructor of the class has given permission to use such materials. Collaborating with another student or students on an examination or other graded exercise, without instructor permission is also a violation of academic integrity. Contributing to violations of Academic Integrity is knowingly assisting another student in an act that violates academic integrity.

Violations of academic integrity will not be tolerated at Great Falls College MSU. The consequence for the first such violation is at the discretion of the instructor and may range from a failing grade on the assignment/test to a failing grade in the course in which the act of academic dishonesty occurred. Faculty must report all violations of academic integrity to their respective Division Chairs. In the instance of repeated offenses, the Division Chair will recommend disciplinary action ranging from a failing grade for the assignment/course up to and including expulsion from the College. Appeals of Department Chair decisions on academic dishonesty are made to the Associate Dean for Academic Affairs.

Cheating, plagiarizing, or knowingly furnishing false information may result in dismissal from the program. The GFC MSU academic misconduct policy, descriptions, sanctions (300.40), and procedures (300.50) can be found at <http://www.gfcmsu.edu/about/policies/PDF/300/300.pdf>

## Classroom Attendance

Regular attendance, punctuality, and responsibility for class work are three of the most significant factors for success in the program. Students are urged to be present, punctual, and prepared for every class assignment. While absences or tardiness may be unavoidable for some acceptable reason, you should keep in mind that regular attendance is a key factor in judging your values regarding your chosen profession.

### Attendance Policy for Didactic ONLY Courses

Students must contact both the dental clinic office manager and the instructor if they will not be attending class as soon as possible on the day of the absence otherwise the absence will be recorded as unexcused.

**An excused absence** is defined as an absence due to illness that has a doctor's note, or a child of the student who has an illness that has a doctor's note, an immediate family emergency, proof of positive COVID test, or college policy requiring students to not come to campus. Please review pregnancy policy if pregnant. The immediate family is defined as mother, father, grandparents, siblings, and children.

Students with an excused absence may be offered the option of attending class through WebEx and if needed some flexibility of assignment and exam deadlines. Actual extension deadlines will be determined by the instructor of the course, but all work must be completed by the last week of the semester. If the student cannot complete the course by the end of the semester, they will receive a withdrawal from it and will not be allowed to continue in the program. Please see readmission policy for readmittance into the program.

**An Unexcused absence** is defined as any absence of a student from class, clinic, or lab due to any reason other than an excused absence. No extensions or WebEx options will be available to students with an unexcused absence. Students are solely responsible to review all material missed on their own. Instructors are not obligated to review instruction time. If missing the course and or instruction time results in missed assignments or failed assessments, students may receive an F in the course and will be dismissed from the program.

Not every event can be accounted for in an absentee policy. The program director will have the final decision in these situations.

### Tardiness

Didactic Tardiness will not be tolerated. Students who are late to class one time will be given a warning. A second tardiness of more than 10 minutes may result in being marked absent from class. Please note absent policy and effects on program participation. Individual faculty syllabi will explain tardiness procedures related to their specific course.

10-minute classroom breaks will be provided during class sessions that are longer than 50 minutes. To be respectful of your instructor and other classmates, getting up and leaving the classroom during the class session should not occur unless it is an emergency.

## Dental Hygiene Program Assessment and Grading Scale

Students are responsible for maintaining a record of their grades. An appointment may be made with the instructor to discuss grades and/or progress on the course. Office hours are posted on the faculty office door with appointments being scheduled with the Dental Clinic Manager.

Students must receive a grade of 75% or above to successfully pass all dental hygiene coursework and proceed through the program. Any grade below 75% is an F.

Percentage	Letter grade
100-92	A

91-84	B
83-75	C
74-0	F

You are engaged in college level courses and are responsible for your own study procedures. This material is quite extensive and may present difficulties for some of you. If difficulties arise, it is your responsibility to ask the Dental Hygiene Program course instructors for help. Refer to the specific course syllabus for assignments and grading criteria.

All students must meet scholastic requirements. A grade of 75% "C" higher must be maintained in all required courses to continue and complete the program. Individual faculty will give you a syllabus explaining their grading procedures regarding the specific course requirements. Students should review the rubric correlated to all assignments and clarify with instructor any questions about how it will be assessed. Self-assessment and peer assessment are a great practice to ensure you have included everything in the assignment the rubric is outlining. Rounding up final grades will be left to the discretion of the instructors and will be outlined in the syllabus.

## Exam Facilitation Procedures

FINAL Exams provide verification of individual mastery of course materials. Faculty will strive to facilitate exams within the dental hygiene program to prepare students to sit for the National Dental Hygiene Board Exam and its stringent rules and requirements.

**Final Exams: Missed/Make-up exams will be given at the instructor's discretion.** In which case, a 25% grade deduction will be awarded for any makeup exam. For example, the best a student could receive if they obtained a 100% on exam is a 75%. Alternative exam may be given. It is the student's responsibility to contact the course instructor for missed FINAL exams and/or FINAL assessments. The student has 24 hours to contact the instructor in person, by phone, or email to explain the situation. After 24 hours no makeup FINAL assessments or Final exams will be allowed. All assessments missed will receive a zero toward course content. Students must be on time for the FINAL exam or FINAL assessment. It is at the discretion of the instructor whether students arriving after the exam has been initiated will be permitted to take the exam.

## Exam Procedure FOR ANY QUIZ OR EXAM

- Students are asked to sit at separate tables (if space allows).
- Students are asked to clearly remove all items from the test taking area. Backpacks, purses, drinks etc. will be placed in the back of the room or in locker room area.
- Cell phones/Blackberry's/iPhone/Smart watches need to be turned off and



stowed away in a backpack or purse.

- No cell phone calculators will be allowed.
- Prepare to have at your desk all items necessary to complete the exam prior to the exam being initiated; there will be no reaching into backpacks or purses once the exam has been distributed.
- Students will not be allowed to leave the classroom once the test has been initiated unless the student turns in exam for grading.
- Students will not be allowed to eat or drink during exams.
- Students are expected to maintain a quiet classroom during exams

All exams or quizzes online will be administered using Respondus. Please note when asked to do an environmental scan, students must show all 4 walls of space where taking the exam, the complete surface computer is sitting on, and periphery of computer screen front (may need to use hand mirror for this). If students do not show complete space as required, it will be assumed the student is cheating and the student will be given a 0 for that exam. NO books or materials should be on the desk when taking the exam. Eyes must always remain forward on the exam. Eyes that concentrate on a fixed area in the room or perimeter of computer while taking the exam will be considered looking at material that could be related to the exam and will be considered cheating.

## Dress and Appearance for Lecture, Pre-clinic, Lab, and Clinic

Health professionals, wherever employed, should consider how patients view their appearance in clinical environments. The Clinical Dress Code must comply with American Dental Association (ADA) and Occupational Safety and Health Administration (OSHA) policies.

**Students who do not conform to the dress and appearance requirements may be asked to leave the class/lab/clinic until they are appropriate for the specific learning environment.**

### Clinical Appearance

The Clinical Dress Code Policies are to ensure student and patient safety and display professionalism in dental hygiene.

### Preclinic and Clinical Appearance

In the knowledge that many times our personal appearance makes strong impressions on the client's attitude toward the Dental Programs and the profession, it is beneficial both to the students and school that certain regulations be followed. These policies concerning dress will be in effect for **ALL** clinic experiences including public **presentations, community outreach, externships, and student/partner exercises**. The following regulations will be enforced:

1. Uniforms, shoes, and shoelaces must always be spotless. Only school selected uniforms and jackets are authorized. Unkempt, torn, or dingy uniforms must be replaced. Lab coats may not be worn on the street or anywhere outside the clinic or locker room. *If the*

student leaves the clinic facility, lab coats are to remain in the clinic hung on hooks.

2. Clean, white, low-heeled, closed toe/heel/top, rubber-soled shoes without colored stripes or ornamentation must be worn. They must be wipe-able and not cloth or mesh.
3. Long socks must be worn when in uniform. Socks should be long enough that legs do not show while seated.
4. Coats, sweaters, and other outerwear must not be worn over the uniform when in the clinic.
5. If a shirt is worn under the scrub top, it must be plain (no pattern) and of a knit/cotton type fabric. The sleeves must be no longer than the sleeves of the lab coat and hem. It must have a low, round neckline so that the top of the shirt is not visible above the top snap of the labcoat.
6. Montana is considered a more conservative culture where excessive earrings, cross bars, gauges, and visible tattoos are typically not professional. No watches while in clinic. No jewelry (rings, necklaces or dangly earrings) may be worn in clinic. Small post earrings are acceptable. However, one earring per ear is allowed. If a student wears gauges, they may not wear tunnels in clinic, but acrylic plugs are acceptable. Hickeys and face piercings must be covered. If piercing cannot be covered it must be REMOVED prior to seeing community patients. These piercings include eyebrow, nose, and lip. Tongue piercing is not appropriate or acceptable for clinic or lab sessions. Therefore, the student will be asked to remove the tongue piercing prior to working on patients. Visible tattoos should be in good taste, i.e., non-offensive to patients and guests. Otherwise, if requested, the tattoos need to be covered during clinic sessions.
7. Good personal hygiene must always be maintained. Final authority for appropriate dress in a laboratory setting is determined by the individual course instructor. Preclinical/Clinic Lab attire follows clinical session attire as we are working on each other in a patient type manner.
  - Fingernails must be **clean** and neatly trimmed. Nails should be short enough that they cannot be seen over the ends of the fingers when your hand is held up toward the light, with the palm toward you. Nail polish, including clear and/or artificial nails, may **not** be worn in clinic. Cuticles should be maintained to present a healthy neat appearance; this skin should be kept intact to prevent infection. Hands must be free of all objectionable odors, particularly **tobacco!!!**
  - The hairstyle you choose must be neat and appropriate for a professional person. Unless your hair is cut short enough to remain close to the head and off the collar, you **must** style it so that no strands fall forward off the shoulders or in your face. Flat smooth, non-ornamental barrettes, rubber bands, and small “scrunches” may be used to hold your hair. Beards and mustaches must be neatly trimmed. Students may also wear clean scrub caps.
  - Apply cosmetics to achieve a clean, natural look. All make-up should be worn conservatively.
  - Scented items should NOT be worn. This includes perfume, cologne, lotion, body spray, etc. The smell of smoke is not permitted when engaging in any clinical activities at externships or in the onsite clinic.
  - Be sure that your teeth are scrupulously clean and your breath fresh, free of odor. Brush after each meal and avoid food seasoned with garlic/onions before coming to

clinic.

- Chewing gum is not permitted.
- Protective gloves, glasses, and a mask must be worn during patient treatment for the protection of the student and the patient. If utilizing an ultrasonic device, a protective hair net and face shield are required.
- Students will be subject to a daily appearance check by their instructors as an ongoing part of their clinical performance.
- If a patient warrants treatment that will deliver splattering of blood and debris the student may want to wear a disposable gown instead of their lab coat for the session disposing of it after.

Students who disregard the dress and/or appearance requirements may be asked to leave the clinic until they are dressed appropriately for patient treatment. The student will receive a check or x in TalEval for professionalism for each infraction.

*Note: 1) During clinical sessions when patients are being treated, all students, even those not directly involved, are required to behave professionally when around the clinic, including the hallways.*

*2) To enter the clinic when patients are being treated, a lab coat must be worn, even if a student is not directly working on patients. Students must also look professional and wear clinic shoes.*

### Lab Appearance

Students must wear the prescribed clinic attire to all labs including open labs. Safety glasses, long- sleeve lab coats, long pants, closed-toed clinic shoes and appropriate socks, and hair tied back and kept off the face are all required when working in the lab. When the lab activities include working on patients, all clinical attire and policies are followed.

## Grievance

Students who disagree with an academic decision made by an instructor or administrator, including assignment of grades or decisions about program or degree requirements or eligibility, should attempt to resolve the situation informally with a meeting with the instructor or administrator. If an attempt at informal resolution fails, the student may file a grievance under the Great Falls College MSU Academic Policy 300.63. **Please note: these procedures are available only to review allegedly unfair academic decisions and not mere difference of opinion regarding the professional judgement of the instructor in evaluating a student's work or making an academic decision.** Students should meet with a college advisor for assistance with determining the next course of action.

## Human Subject and Lab Practice

Before students provide dental hygiene treatment on community patients, competency must be obtained. In supervised settings during dental hygiene program courses, students will practice on fellow students to gain the knowledge and skills needed to proceed safely treating community patients. Fellow students are required to serve as each other's patients. If for some reason a student cannot be a human subject for a lab or clinic activity, it will be the responsibility of that student to recruit a willing individual to take their place, so their partner has someone to practice on. Students may also have to recruit patients for some lab activities to meet requirements for that course. Family members are a great resource for these situations.

## Clinical Externship Rotations

Clinical externship rotations enhance the clinical experiences received in the GFC MSU Onsite Clinic. These experiences are invaluable and most often only obtained while involved in educational programs. Students are responsible for travel and lodging costs to these externship sites.

Students will be expected to attend all externships associated with the dental hygiene courses. Students who are unable to attend their externships during their scheduled times due to weather or other unforeseen events will be expected to reschedule their rotation and will receive an incomplete for their clinic grade until the experience has been completed. Some experiences cannot be rescheduled, and students may be required to attend a unique experience that the instructor deems equivalent to the original. Students missing their externship must follow the absentee policy regarding excused and unexcused absences. These experiences are part of the courses and all program and syllabi rules and regulations apply. If the student has not completed the externship by the agreed final date for the incomplete, they will fail the courses and not be allowed to continue in the program. Please review the absentee policy and incomplete policy in this handbook for further information.

### Minor Sites for Externships

#### Montana State Prison Dental Hygiene Externship Program (Deer Lodge)

Students will travel to Deer Lodge to provide dental hygiene care to the facility's residents. Students will be responsible for transportation and hotel arrangements. Contact person is Tamara Walden (406) 846-1320 x2428. Email: twalden@mt.gov. This externship is completed during the summer session to help prevent traveling on icy roads. At this site students may meet local anesthesia and board worthy calculus requirements.

#### Nexus Methamphetamine Treatment Facility (Lewistown)

Students will travel to Lewistown, MT to provide dental hygiene care to the facilities residents under the supervision of Dr. Kolstad. Nexus Nursing is the contact person and can be reached at

(406) 535- 6660 ext. 238. In addition to prophies, students may be asked to present basic homecare instruction to all residents in this facility.

### Alluvion Dental Clinic (Great Falls)

Students may have a rotation to Alluvion once each semester for DENT 251, 252, 281. Only students with a COVID vaccine can attend this rotation at this time. Students who cannot attend Alluvion will be expected to attend a substitute rotation. This substitution may not be on a clinic day and may require travel outside of Great Falls. For questions regarding this rotation, speak with the clinic lead instructor for the clinic course your enrolled in. Alluvion will not consider religious or medical exemptions regarding the COVID vaccine.

The externship rotations listed above are examples of possible opportunities but are not a guarantee. There may also be opportunities for others not listed above. Students may be asked to attend other experiences outside those listed. The information for those experiences and consequences for those absences will be addressed in that clinical course syllabus.

The students will be asked to complete reflection questionnaires upon their return from the externship. All reflections are due to the lead instructor. Please refer to each individual lead course instructor for instructions on submissions. We will use your input to try to make improvements in the program. We ask that you fill out the evaluation truthfully and fairly.

## Didactic Course Rotation/Externships

Some didactic courses may also require clinical rotations as well. These rotation experiences are designed by the instructor to enhance your clinic experience and knowledge. Please see course instructor, course syllabus and information provided in the course regarding where and when these rotations/excursions are as well as their effect on the final course grade.

## Supervision, Transportation and Parking

During all externships, students will be supervised by an instructor or a dental professional who has agreed to supervise students. If the students are completing any requirements at these sites, the supervisors will be calibrated yearly with GFC MSU faculty before their externship with the college begins. There will never be more than 5 students with 1 instructor.

Students are responsible for all transportation to and from these sites and housing/lodging for out-of-town externships. Clinical assignments are designed to carry out the program's objectives and must be followed by hours and duties performed. Students will follow the parking guidelines of each clinical externship site they are assigned to. Parking areas close to the clinical site are reserved for patients and visitors to the facility. Students who do not follow these guidelines will be subject to disciplinary action. These guidelines will be reviewed during that clinical orientation session and site tour.

# Dismissal and Readmission Policy

## Dismissal

The dental hygiene program requires students to complete all semester course work with a grade of 75% "C" or higher. Any final course grade below a 75% "C" will result in a failed grade for that course and dismissal from the program. All grades are determined as outlined by each course syllabus. Each instructor has the right to round up or not round up their final course grades. This information is in each course syllabus. Once the instructor has entered the course grade, that final grade will determine the student's eligibility to enroll in subsequent semester courses.

## Readmission (Students can only be readmitted once into the program)

Students who fail out the first of the program must reapply through the program's competitive application process, including having current pre-requisite courses as required by application. Students accepted by this process will only have to repeat courses they did not pass if they can demonstrate competency (see Demonstration of Abilities below). Students wishing to re-apply to the program after a dismissal from any semester following the first semester must submit a letter to the program director by June 15<sup>th</sup> of the academic year directly following dismissal of the program, or September 1<sup>st</sup> if dismissed summer semester. This letter must outline specific reasons for readmission that includes a detailed plan for successful completion of the program. If it has been more than one year, the student must apply to the program through our competitive application process and repeat all academic courses.

Readmission into the program may only occur under the following conditions:

- Space availability in clinical and lab courses for the academic year directly following dismissal. Due to CODA accreditation procedures and protocols, the program has a maximum limit of 25 students for any GFC MSU hygiene program course. The program cannot have more than 25 students in each cohort. If there is no space availability in the year directly following dismissal, students seeking readmission must take part in competitive re-entry and retake all course work. All pre-requisites required must be current as stated in hygiene application. This is a sequential program, and students will need to refresh themselves to be successful. There may be financial aid implications that the student is responsible if re-taking passed courses. Please reach out to the financial aid office for more information.
- If there are more readmission requests than spaces available, readmission will be accepted on a secondary ranking system based on the following order.
  - Cumulative Program GPA
  - Pre-requisite GPA
  - Number of courses failed

- Disciplinary action taken

The program director has the right to approve or disapprove these requests for readmission based on previous educational and behavioral concerns.

Upon acceptance as a readmission, please note that if a student is granted readmission, there may be stipulations made regarding the retaking of courses dependent on the student’s current knowledge and abilities upon re-entry as assessed through return demonstration prior to the start of the semester of return.

Demonstration of Abilities

- Successful completion of a FMX on DXTTR graded using clinic criteria and scale of last successfully passed clinical course (required in 30 minutes if successfully completed DENT 125).
- Instrumentation skill assessment of last successfully passed clinic course.

DENT 102	Final Skill Assessment Practicum
DENT 151	Instrumentation Skill Assessment
DENT 251	Instrumentation Skill Assessment
DENT 252	Power Scaler and Instrumentation Skill Assessment (DENT 251)

- Demonstration of ability to manage a medical emergency.
  - Completing Dental Office Medical Emergency and Operation of Oxygen Tank (following criteria of skill assessment requirements of last successfully completed clinical course)
  - Medical/Dental History (following criteria of skill assessment requirements of last successfully completed clinical course).
- If successful completion of DENT 240, the student must demonstrate successful administration of local anesthesia of the PSA and IA using the criteria from DENT 240 Final Practicum- first on manikin and then on a live patient. Students must provide their own live patients. Patients must be approved for local anesthesia by the program’s supervising dentist. Students may use a current or former student from the program. Also, they must provide documentation of written local anesthesia board results or a written plan on how they will study for the exam if they have not passed it yet.

# **Clinic Curriculum And Clinic Protocols**

Students must complete all minimum requirements in each clinic course DENT 151, 251, 252, and 281 to proceed to another semester and graduate from the program. If a student does not complete the basic requirements in a clinic course and achieve a minimum of 75%, they will fail the course and be dismissed from the program. (Please refer to sections regarding incompletes and the readmission policy in this handbook for more information).



## Patient Recruitment

Students are required to provide community patients for their clinic courses. These patients will need to range from 4 years old to 99+ years old with multiple treatment needs. Students are required to recruit their own patients to meet these requirements. Students will also learn the necessary communication skills required for a dental hygienist through meeting and recruiting individuals for their courses.

It is the student's responsibility to prepare for and recruit patients to successfully complete the required patient load including local anesthesia injections, radiographic exposures, and competency assessments for each clinical course. Some of these requirements may stipulate finding patients that have not been seen in our clinic for at least 3+ years or may have never been seen in our clinic before. Students must complete the minimum required number of patients each semester to achieve basic mastery of the course and enough competency points to maintain a benchmark of 75% for the clinic course. If the student does not achieve a "C," does not pass a Mastery assignment by second attempt or does not meet their minimum requirements they will fail the clinical course and not proceed in the program.

Great lengths have been taken to ensure the student develops the necessary skill to become a licensed dental hygienist through the required clinical coursework. Deviation from these requirements has demonstrated that students are not as successful on their board exams therefore stated requirements of this program will be followed.

Patient recruitment is part of the skills students need to learn to be a successful clinician. Verbal communication, organization, and body language are all important skills that students learn through patient recruitment. These skills will be utilized to promote preventative health to patients in multiple settings. Being a prevention specialist is the focus of this profession.

Family members are often reliable and provide constructive feedback, but it is important to understand that if students only see family members, they may not be able to meet all their requirements. Also scheduling patients from out of town during the winter increases the chance of cancellation due to poor road conditions and students should have a plan "b" and "c" to ensure that they are not without a patient. Students must sign evidence of understanding upon acceptance into the dental hygiene program.

## Dismissal of Patients

Unfortunately, not all patient experiences work out and sometimes patients will be dismissed from the program. Students do not have permission to automatically dismiss a patient from the clinic. If a patient has paid for a service, students must make every effort to see this patient. If the patient is unable to attend their appointment, students must document this cancellation and the reason for this cancellation in the patient chart. If you have texts from this patient, please be prepared to print them. This is a nice feature of Google. These texts will be uploaded and saved in the patient's chart. Please remember to be professional when communicating with your patients. If a patient has a history of canceling or not showing up for

their appointments, please discuss with your clinic instructors the next steps to take regarding this patient.

Another reason for patient dismissal from the clinic is when the patient's behavior makes the students and/or faculty/staff uncomfortable. If your patient is making you uncomfortable, please reach out to your instructor, the front office manager, or the program director immediately so the appropriate steps can be taken to keep everyone in our clinic safe. Students do not have to tolerate rudeness and inappropriate comments from patients. If you have anything in writing, please be prepared to print these so they can be included in the patient's chart. If you are a bystander clinician in the clinic and witness a patient being rude or inappropriate in clinic, please let an instructor or the front office manager know immediately so they can act right away.

If you have started a patient and they are refusing to come back for whatever reason, please let your instructor know at final chart audit why that patient was not completed this semester. Sometimes patients do not want to come back or cannot come back because of changes in their work schedule etc. If this is the case, we may ask you to call the patient once each semester until your final semester and then have you dismiss them from the program at final chart audit. These dismissals are not final dismissals from the clinic, they are just a letter to let them know that their treatments were not completed, and they will need to see care from a different dentist now that you have graduated. All patient communications should be documented in the chart and verified by an instructor.

Finally, if you ever feel threatened by a patient in any way, please let someone at the college know right away, we care about our students and patients and want everyone in the clinic to have a wonderful experience. If something is wrong, we want to know. Please contact your lead instructor, a clinic instructor, the office manager, or the program director.

## Clinic Attendance Policy

*Great Falls College recognizes the correlation between attendance and both student retention and achievement. Any class session or activity missed, regardless of cause, reduces the opportunity for learning and may adversely affect a student's achievement in the course. Class attendance and/or participation is required in all courses, regardless of the method of delivery and students are expected to attend all class sessions for which they are registered. Instructors may establish absence policies at their own discretion within their courses to conform to the educational goals and requirements of their courses. The student is responsible for arranging make-up work missed due to legitimate class absences and for notifying the instructor when an absence will occur. The instructor determines the effect of the absences on grades.*

### Absence Policy for Clinic and Lab Courses or Didactic Courses with a lab component

Students must inform the office manager as soon as possible the day of lab or clinic if they are going to be absent. Patients must be notified promptly and rescheduled by the student.

Every effort should be made to inform the patient of the need to reschedule prior to them leaving their location to come to their appointment. Students who do not notify the Dental Office Manager the day of their absence will be marked as unexcused.

If the absence is excused students can miss up to two weeks of lab or clinic. The instructor will try to assist the student with making up labs. Students must be available during the instructor's office hours for makeup work. Due to clinic availability, students may be asked to meet with the instructor when the clinic is available for use. Students missing more than 2 weeks will be asked to withdraw from the course and not allowed to continue in the program. All work must be completed by the end of the semester. Students missing clinic requirements due to an excused absence by end of week 15 may be given an incomplete if they meet the incomplete requirements. Please see incomplete policy for further details.

Students who are sick should not report to clinic or lab and are encouraged to see a doctor for assistance and a note. Students with an unexcused absence in clinic or lab will be marked absent and all assessment deadlines missed will be noted as failed assignments/assessments and students will need to abide by course policy for missing assignments/assessments. Instructors are not obligated to review material missed in the lab, and it is the student's responsibility to learn this material. Students missing clinic due to an unexcused absence will be noted as a no patient day in Taleval and deducted points as noted in the handbook. All requirements must be met within that semester and students with an unexcused absence will not be eligible for an incomplete for that semester. Students who cannot meet clinic requirements by the end of the semester due to an unexcused absence are not considered in good standing and will be given an F in class. They will not be able to continue with the program. Please see readmission policy for more information regarding readmission.

Not every event can be accounted for in an absentee policy. The program director will have the final decision in these situations. For definitions of excused and unexcused please see didactic absent policy.

Failure to appear for scheduled clinical rotations without calling in will result in disciplinary action taken against the student up to and including termination from the program. All absences must be reported by 7:30 AM by calling the Dental Clinic Manager @ 771-4364 and your specific individual instructor. If absence is during a clinical session, the patient must be called as soon as possible to avoid the patient coming to the clinic for no reason and the Dental Clinic Manager must be called, as all other instructors will be out of their offices and on the clinic floor. The individual calling must be the student or an immediate family member. Students missing clinic will require a doctor's note for illness. Do not come to clinic if you are feeling unwell, have a temperature, have been told by a doctor to quarantine or are waiting for a COVID-19 test result.

### Summer Semester

Summer semester is a condensed semester, so the attendance policy follows a regular semester. In other words, 16 weeks of summer clinic has been condensed into 8 weeks. In a

normal 16-week semester, you could miss up to 2 weeks. In the condensed course, clinic is 22.5 hours/week compared to 13.5 hours in Fall and Spring of the second year. Therefore, you can only miss 6 clinic sessions. In addition, rotations are mandatory and cannot be rescheduled. Since this is a condensed course and there is no way to make up clinical hours during this semester, a student missing more than 6 clinic sessions for any reason will be required to repeat this course and not allowed to move on in the program. Students will need to follow handbook protocols for readmission into the program.

### Missed Clinical Externship Days

Missed Clinical Externship as a rule cannot be rescheduled or made up. If the student cannot travel to the externship site due to weather or car trouble. This missed externship will result in the loss of the educational experience and treated as a no patient day in Taleval unless the missed clinical externship is considered excused then no points deduction will occur and counted as a missed clinic session and part of the student's allowed 2-week absence.

Certain Clinical Externships provide the student with opportunities to meet clinical requirements. In those circumstances, students may be given an incomplete until those externships can be completed. The recommendation for those externships is that students should attempt to complete requirements in clinic because the program cannot guarantee specific requirements. If the student missed the clinical externship but completed all their clinical requirements, the lead instructor must determine if they must complete clinic externship.

Each student is responsible for completing all the course requirements as stated in each syllabus by the end of that semester.

### Set up for clinic session.

The student should arrive early to clinical sessions allowing a few minutes to review patients' charts and prepare for clinical sessions. Students must be in the clinic reviewing their charts at least 30 minutes prior to seating their patient. **All students are expected to be present in the clinic during their scheduled clinic time even if the student does not have a patient. Please do not ask to leave early. Instead, you should plan to spend the rest of the clinic with a clinical purpose.**

### Breaks

Due to the clinical course's nature, breaks cannot be scheduled. To be respectful of your clinical instructors, patients, and other classmates, avoid getting up and leaving the clinic during the clinical session unless it is an emergency. If the student clinician must leave the clinical area, it is asked that your clinical instructors, patient, and CA be made aware of your departure and your intended location.

# Clinic Assessment

Clinical experiences are distributed throughout the curriculum so students can provide the direct patient care needed to ensure the students attain clinical competence and develop appropriate judgement. Students will be evaluated by the following methods:

- Skill assessments
- Patient types
- Adjunctive services
- Competency assessments
- Radiograph competency
- Dental Hygiene Diagnosis
- Local Anesthesia
- Daily feedback with clinical skills (Taleval)
- Professional behaviors

Every attempt to has been made to make sure the information in this handbook is the same and aligns with the clinic syllabi for the program. However, due to the nature of education and the need for systematic course review sometimes changes are made during the year. In these circumstances the syllabi are always correct, and the handbook is a resource used to create the syllabi and corrected as needed once a year. Clinic grades will be determined as follows:

## Clinic I

Assignments	Percentage of Grade
Competencies (Mastery and skill assessments)	50%
Radiograph Series	10%
Taleval	40%

## Clinic II, III, IV

Assignments	Percentage of Grade
Competencies (Mastery and skill assessments)	40%
Radiograph Series	10%
Taleval	30%
Calculus Removal Test	20%

Each clinic course will focus on specific requirements and evaluations determined to be appropriate for that skill level of the students. Course outcomes will also reflect student’s skill level working towards final accumulation of mastery skills in DENT 281. However, some mastery level skills will be tested prior to DENT 281. This will be noted in each course syllabus. In general, students will be assessed on all patient types, skill assessments, and program competency assessment.

To receive a passing grade in a pre-clinic or clinic course, students must first demonstrate that they have completed all basic requirements including passing program competencies by 2<sup>nd</sup> attempt. Then grades on all assessments will be reviewed. Students must

have a cumulative grade of 75% in each course to pass the course. 75% is considered basic competency level for this program. If the minimum required patient experiences are not completed, the students course grade will be recorded as not passing no matter what the clinic assessment grades demonstrate.

The letter grades awarded in this program are as follows:

100-92 A

91-84 B

83-75 C

## Taleval

Taleval recognizes the difficulty of your patients' treatment needs along with the number of experiences you document correctly with the patient. If you only complete the minimum required patient experiences, the Taleval score is completely reflective of that. Strive to exceed the minimum requirements as it demonstrates higher competency levels. Taleval requires a median grade to be entered each semester to determine the final Taleval grade for that course.

**The median grade for each course will be as follows:** Clinic I = 87 Clinic II-IV = 85

The following are examples of that will result in one point being deducted from the final Taleval grade (this is not an exclusive list).

- If students arrive late for clinic sessions a time management error will be noted. If it occurs more than 2 times, a point will be deducted from the final Taleval grade.
- Patient names not entered into scheduling book by due date will receive an error in time management. If it occurs more than 2 times, a point will be deducted from the final Taleval grade.
- Not verifying with instructor that it is okay to dismiss patient at final appointment before verification patient is complete
- Not arriving to final chart audit with all paperwork organized and ready to go

### Taleval Daily Evaluation Sheets

Following the clinic session, students must ensure that all instructor check points have been initialed and graded corresponding to treatment completed. Student must enter taleval grading form information into the clinic computers while the instructor is at Chairside during check-off procedures. If this is not done during the check-off procedure, it must be done as soon as possible to allow instructor verification at the end of each clinical session. Grading sheets must be submitted to the POD instructor 30 minutes prior to the end of the session which allows adequate time for the verification process to take place. For optimal time management, it is recommended you enter all patient chart notes/ taleval grades immediately after dismissing your patient, *then* break down your operatory. It is imperative this process is completed the same day to ensure all data is entered into the grading system correctly. Not

complying with this direction will result in, *at minimum*, a loss of Time Management points via the Taleval grading system. Patient status of NEW, CONTINUED CARE, RECARE, OR COMPLETED must also be included.

## Clinic Requirements

Graduates will be competent in providing dental hygiene care for all types of classifications of periodontal diseases including patients with moderate to severe periodontal disease.

### DENT 151

TYPE OF PATIENT	CALCULUS LEVEL	AAP CASE TYPE	PATIENT STATUS MUST BE:
<b>(1) NEW Adult Patient</b> <b>(1) Established Patient</b> <b>(1) Peer</b> <i>(Recommend a max. of 4 clinic sessions ea. to complete tx.)</i> <i>Total of 3 adult patients</i>	<b>Only A &amp; B Calculus</b>	Healthy or Gingivitis Patient must have nine teeth.	Healthy Geriatric okay if meets other criteria
	<b>C or D Calculus patients</b> Cannot see this semester and will be asked to reschedule for a different semester	Stage 1 and 2- POD instructor's discretion  NO Stage 3 or 4	
<b>(1) Pediatric (4-9 y old)/ Adolescent (10-17y.old)</b> <i>(Recommend a max. of 2 clinic sessions ea. to complete tx.)</i>			<i>By end of DENT 281 must have seen at least 2 pedo and 2 adolescents but a total of 6 Pedo/Adolescent</i>

### DENT 251

TYPE OF PATIENT	CALCULUS LEVEL	AAP CASE TYPE	PATIENT STATUS Must Be:
<b>(2) NEW Adult Patients</b> <b>(2) Established Adult patients</b> <b>Total of 4 Adult patients</b>	<b>Only A &amp; B Calculus recommended =</b> all together patients' calculus must equal 12 pieces of board worthy calculus and documented in Taleval under comments (only three pieces can be on mandibular anterior teeth).	Healthy or Gingivitis Stage 1-2 at discretion of instructor.	

	<p>All pieces may be supragingival. (Recommend a max of 4 clinic sessions ea. to complete tx.)</p> <p><b>C or D Calculus patients</b>          Must complete 1 quad to count as new patient in summer. Will be classified based on # of BW pieces removed. Will not count as new patient in the fall but can count remaining BW pieces in fall. Must be completed in fall semester.  <i>(Recommend a max of 6 clinical sessions ea. to complete TX.) It will be done without a Cavitron. If the student has extra appointments, they could potentially finish in summer. The student cannot take an incomplete for other requirements if done.</i></p>	<p>No Stage 3 or 4.          Patients must have nine teeth, one of which is a molar, to count as <i>any</i> patient requirement</p>	
<p><b>(3) Pedo Patients (4-9 y old)/ Adolescent (10-17 y old)</b>  <i>Recommend a max of 2 clinic sessions ea. to complete TX.)</i></p>	<p>Any Calculus Level</p>	<p>1 -Pedo          1- Adolescent          1- either</p>	<p><i>By end of DENT 281 must have seen at least 2 pedo and 2 adolescents but a total of 6 Pedo/Adolescent</i></p>

DENT 252

TYPE OF Patient	CALCULUS LEVEL	AAP CASE TYPE	PATIENT STATUS Must Be:
<p><b>(6) Adult Patients</b>  <b>* (2) adult patients MUST be Stage III perio or greater and completed by end of DENT 281.</b>          ALL patients must have nine teeth with at least</p>	<p><b>36 pieces of Board worthy (BW) calculus</b> of which only 6 pieces may be found in sextant 5. <i>All BW calculus must be subgingival.</i></p> <p>A &amp; B Calculus patients-  <i>(Recommend a max of 4 clinic session ea. to complete TX.)</i></p>	<p><b>(3) Perio patients:</b> must be <i>active</i> Stage 2, 3 or 4 perio.          ALL patients must have nine teeth with at least one molar to count as <i>any</i> patient requirement</p>	<p><b>1-Medically compromised</b>  <b>1- Special Needs</b>  <b>2- Geriatric</b> of which <b>1</b> needs to be <b>ASA 2</b> or greater</p>



one molar to count as <i>any</i> patient requirement	C or D Calculus patients- (Recommend a max of 5 clinic sessions ea. to complete TX.) Will be done with a Cavitron.		
<b>(1) Pedit Patients (4-9 y old)/ Adolescent (10-17 y old)</b> <i>Recommend a max of 2 clinic sessions ea. to complete TX.)</i>	Any Calculus Level		<i>By the end of DENT 281 must have seen at least 2 pedit and 2 adolescents but a total of 6 Pedit/Adolescent</i>
<b>Combo Patient</b>	Must have a total of 7 pieces of subgingival BW but only 1 piece must be posterior (BW calculus may be included in the 36 total pieces needed for the semester.)	Stage 2,3 or 4 to qualify for as combo	Completed in either DENT 252 or 281
<b>(4) Recare Patients</b> (Completed in either DENT 252/281)		(2) Healthy or Gingivitis (2) Stage 2, 3, or 4	See definitions of a recare
<b>Adjunctive Services</b> <b>8 Sealants</b>			Must have clinical exam from dentist or outside RX before placing.

DENT 281

TYPE OF Patient	CALCULUS LEVEL	AAP CASE TYPE	PATIENT STATUS Must Be:
<b>(6) Adult Patients</b> <b>*(2) adult patients</b> <b>MUST be Stage III Perio, or greater, and completed by end of DENT 281.</b> ALL patients must have nine teeth with at least	<b>36 pieces of Board worthy (BW) calculus</b> of which only 6 pieces may be found in sextant 5. <i>All BW calculus must be subgingival.</i>	<b>(3) Perio Patients:</b> must be <i>active</i> Stage 2, 3 or 4.  ALL patients must have nine teeth	<b>1-Medically compromised</b> <b>1- Special Needs</b> <b>2- Geriatric</b> of which 1 needs to be <b>ASA 2</b> or greater
	A & B Calculus patients- (Recommend a max of 4 clinic session ea. to complete TX.)		

one molar to count as a patient requirement	C or D Calculus patients- (Recommend a max of 5 clinic sessions ea. to complete TX.) Will be done with a Cavitron.	with at least one molar to count as a patient requirement	
<b>(1) Pedo Patients (4-9 y old)/ Adolescent (10-17 y old)</b> <i>Recommend a max of 2 clinic sessions ea. to complete TX.)</i>	Any Calculus Level		<i>By end of DENT 281 must have seen at least 2 pedo and 2 adolescents but a total of 6 Pedo/Adolescent</i>
<b>Combo Patient</b>	Must have a total of 7 pieces of subgingival BW but only 1 piece needs to be posterior (BW calculus may be included in the 36 total pieces needed for the semester.)	Stage 2,3 or 4 to qualify for as combo	Completed in either DENT 252 or 281
<b>(4) Recare Patients</b> (Completed in either DENT 252/281)		(2) Healthy or Gingivitis (2) Stage 2, 3, or 4	See definitions of a recare
<b>Adjunctive Services</b> 4 Sealants			Must have clinical exam from dentist or outside RX before placing.
Bleach Tray			Must have clinical exam from dentist or outside RX before placing.

## Definitions:

**Adult patient-** For DENT 251, 252, and 281 to qualify as an adult patient requirement, the patient must be 18 years or older and have 9 teeth, one of which must be a molar.

**New patient (NP) (as defined for GFC MSU Dental Clinic)** a patient that has not been seen at GFC MSU dental clinic in the last 3 years. It is important to ask the patient if they have been a patient in the clinic prior, and what treatment was rendered, before scheduling them. It is

critical that clinicians help their patients understand the importance of receiving continued comprehensive dental care from a licensed dentist in their area to maintain good health. The GFC MSU dental clinic cannot be the primary care provider or the dental home for patients. **New Patient requirements can only be met with patients who have not been to our clinic in 3 years or longer.** This is to ensure you can meet requirements like radiographs, Board-worthy calculus, and hard tissue charting. Established patients who receive regular hygiene care will not meet these requirements but will help students learn time management skills needed in the workforce and the importance for evaluation of care. Students may initiate data collection, and submit for exam, in one semester and complete/classify in Taleval the following semester. Students may NOT start scaling on patients they wish to complete the following semester, unless first approved by instructor. **Summer semester only: Power** instruments are introduced summer semester; therefore, students may initiate scaling on ONE (Cor D) calculus patient. One quad must be completed to count towards summer semester new patient requirements. In the fall. The remaining quads will only count towards board worthy calculus and cannot be counted as a new patient. *Please review clinic resource manual for guidance on updating patient paperwork if the patient has been treated at GFC MSU dental clinic in the past.*

**Established patient (EP)**- a patient who has received care at GFC MSU dental clinic within the past three years. Established patients must still be encouraged to seek comprehensive care from a licensed dentist in their area. These patients will receive a limited exam at least once every year to determine the patient's periodontal diagnosis. Adult patients may not receive hygiene care at GFC MSU until the doctor has completed the patient's assessment and the results reviewed with the patient.

**Assessment of patient (D0191)** is a limited clinical inspection performed to identify signs of oral or systemic disease, malformation, or injury, and potential need for referral for diagnosis and treatment. All patients will receive an assessment of patients to determine a periodontal diagnosis and need for a referral. This assessment may include taking x-rays if needed. A dentist will review the patient's health history, periodontal assessment, and x-rays to determine a periodontal diagnosis along with hygiene treatment appropriate for that patient. All patients will receive a referral letter at their hygiene appointment detailing the hygiene services recommended in the GFC MSU dental clinic and referrals for other areas of concern noted during the assessment. Every patient will receive this assessment as a new patient to establish care and then once a year on or after the date of their previous assessment.

#### **Services provided at GFC MSU**

- D0191 Assessment of patient
- D1110 Adult prophylaxis
- D1120 Child prophylaxis
- D4355 Debridement
- D4347 Periodontal scaling and root planning 4+ teeth
- D0272 (2) Bitewings
- D0274 (4) Bitewings
- D0471 Diagnostic photos
- D0330 Panoramic film
- D0210 Full mouth radiographic series

- D4346 Scaling in the presence of inflammation
- D4342 Periodontal scaling and root planning 1-3 teeth
- D4910 Periodontal maintenance
- D9975 bleach trays
- D9910 Application of desensitizing medicament
- Nutrition counseling
- D1351 sealants
- D1206 Fluoride varnish

**Recare patient-** Any patient that has been completed by the same student more than 1 time during the two-year program

- Students must complete (4) recare patients during their 2<sup>nd</sup> year of the program (fall and spring)
- 3-month recare must be II, III, or IV perio (No Healthy on a Reduced Periodontium)
- 6-month recares can be exchanged with 3-month recares BUT 3-month recares cannot be exchanged with 6-month recares (i.e. students can have 3 or 4 3-month recares but not 3 or 4 6-month recares)
- 6-month recares are gingivitis, healthy or a healthy on a reduced periodontium (HOARP)
- 3-month recare patients can be used as a perio requirement in the semester that the recare appointment is completed. This is because 3-month recares must be II, III, or IV perio but cannot be used twice in the same semester for a requirement
- Recares can be used as a med comp, geriatric, pedo/adolescent, and/or patient with special needs requirement in the semester the recare is completed.
- Students may share recare requirements if unable to schedule their own New Patient for return visit
- Students may count recare patients toward (New or New Established) adult patient requirements AFTER ALL 4 recare requirements have been met.

**Re-evaluation-** is an appointment after the clinical endpoint has been met to determine if a patient has reached therapeutic endpoint. This appointment should occur between 3-6 weeks after final scaling is completed. A re-evaluation patient can be used as a recare patient just not at the re-evaluation appointment.

**Medically Compromised:** Any medical condition that requires dental hygiene treatment to be altered to safely treat the patient. May require discussions with POD instructors regarding emergency scenarios.

**Patients with Special Needs:** Any patient with a disability that requires dental hygiene treatment to be altered to safely treat the patient. The US Census Bureau American Community Survey defines disability the following way:

The patient has difficulty with:

1. Hearing

2. Vision
3. Cognition
4. Walking/mobility
5. Self-care
6. Independent living

Examples where we might need to alter treatment due to a patient's special need: diabetic (needs am appointment and needs to eat/medicate prior to tx), High blood pressure at appointment, needs neck pillow, can't open mouth all the way, needs bite block, needs dark eye glasses, needs blanket due to certain conditions (not just because it is cold in the op), asthma, patient can't lay flat, partial edentulous, gagger, COPD, needs frequent breaks, etc. This is not an exclusive list.

To meet a patient with special needs requirements it must be approved by your POD instructor and correctly documented in Taleval as well as the patient's chart note.

**Geriatric Patient:** Any patient 60 years of age or older. No exceptions. Patients must be 60 years old on the first appointment.

**Pediatric (4-9 years old) and Adolescent (10-17 years old) Patient:** Must not have had comprehensive care in the last 6 months. (\*Children younger than 4 years old do not have the attention span needed for the longer appointments that occur in an educational setting; therefore, are not allowed to be seen in our clinic). For this requirement, students may count extra pediatric adolescent patients seen in previous semesters toward future semester requirements. It is recommended you see as many pedo/adolescents as can during summer semester. Exceptions for children younger than 4 may be made sometimes based on instructor approval to provide specific learning experiences for students but will not count as a pediatric requirement.

**Two Patients per Session:** Any two patients can be scheduled during (1) clinical session. Students must alert the POD instructor of planned appointments for that clinic session. Students must consider infection control protocol if seeing two patients in one session (must change jacket, clean face shield, completely sanitize room between patients, etc.).

#### Calculus Definitions:

Type A: No calculus or only local calculus on the sextant 5 (mandibular anteriors) and/or buccal of maxillary molars.

Type B: Generalized "rough" or "spicule" calculus with unlimited pieces of supragingival board-worthy (BW) calculus scattered *throughout* the mouth. Less than 12 pieces of subgingival BW may also be scattered through the mouth (max of 3 from sextant 5).

Type C: A minimum of 12 pieces of BW subgingival calculus scattered throughout the mouth. May use maximum of three (3) pieces from the mandibular anterior sextant. Remaining calculus must be located in maxillary anterior and max/mand posterior sextants.

Type D: A minimum of 20 or more BW pieces of subgingival calculus. May use a maximum of six (6) pieces from the mandibular anterior sextant. The remaining calculus must be located in maxillary anterior and max/mand posterior sextant.

Type DD: A minimum of 40 pieces of BW calculus (12 pieces maximum from mandibular sextant).

Periodontal Classification

Healthy or HOARP (healthy on a reduced periodontium)	No clinical inflammation or bleeding is less than 10% of mouth. No radiographic evidence of bone loss is present. Gingiva is normal in contour, color, and consistency. May also be healthy with a reduced periodontium if bone loss present but there is bleeding in PPD 4mm or greater.
Gingivitis	Inflammation of the gingival is characterized clinically by gingival erythema, edema, retractability, gingival pocket formation (pockets may or may not be present). There is no radiographic evidence of bone loss. Minimum 10% BOP. May be generalized (greater than 30%) or localized (10%-30%)
Stage 1	1 to 2 mm of CAL with radiographic bone loss in the coronal third (<15%). Max probing depths no greater than 4mm. Horizontal bone loss
Stage 2	3 to 4 mm CAL with radiographic bone loss in the coronal third (15%-33%). Maximum probing depths no greater than 5 mm. Mostly horizontal bone loss.
Stage 3	5mm or greater CAL with radiographic bone loss extending to the mid-third of root and beyond. Probing depths are 6mm or greater with 3mm of vertical bone loss. Class II or III furcation involvement. There are 4 or less teeth missing due to perio disease.
Stage 4	Same as Stage 3 but missing 5 or more teeth due to disease. May have secondary occlusal trauma or less than 20 teeth remaining. Bite collapse, drifting, and flaring may also be present

\*\*\* Please note that each stage may be generalized (greater than 30%) or localized (less than 30% of teeth. CAL= clinical attachment loss or distance from the free gingival margin to the CEJ.

Stable is defined as less than 10% bleeding on a patient with pockets 4mm and greater.

Unstable is greater than 10% bleeding on a patient with pockets 4mm and greater.

Formula for bone loss is % bone x 100/age of patient

Grades	A	B	C
Hx of bone loss	Less than .25	.25-1	>1
Smoking	NONE	<10 cig/day	>10 cig/day
Diabetes	No diagnosis	HbA1c <7%	HbA1c ≥ 7%
Inflammation (CRP)	<1mg/L	1 to 3 mg/L	>3 mg/L

Stain Classification

L	Light Stain	Stain may or may not be present. Stain, if present is slightly extrinsic along the cervical line. (May be coffee, tea, tobacco, green, black line, or orange)
M	Moderate Stain	Stain is moderate limited to the cervical third of the teeth and involving not more than half of the teeth
H	Heavy Stain	Stain is heavy and generalized throughout the mouth, covering at least half the exposed tooth surfaces

X	Heavy Stain	Stain is very heavy tenacious such as pipe stain which appears to be “baked-on.” Scaling is required to remove.
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#### ASA Physical Status Classification

ASA I a normal, healthy patient without systemic disease

ASA II a patient with mild systemic disease or a healthy patient who demonstrates extreme anxiety and fear toward dental treatment

Examples:

- Well-controlled epilepsy
- Well-controlled asthma
- Well-controlled hyperthyroid or hypothyroid disorders ASA I patients with upper respiratory infections Healthy, pregnant women
- Otherwise, healthy patients with allergies, especially to drugs Otherwise healthy patients with extreme dental fear
- Healthy patients over 60 years of age
- Adults with blood pressure between 140-159 systolic reading and/or 90-94 diastolic readings. The ASA II patient can perform normal activities without experiencing distress.

ASA III a patient with severe systemic disease that limits physical activity but is not incapacitating (treatment modifications should be considered) ASA III patients usually can perform normal activities without experiencing distress but may not rest during activity should they become stressed.

Examples:

- Stable angina pectoris
- Status post myocardial infarction more than 6 months before treatment with no residual
- Signs and symptoms
- Status post-CVA more than 6 months before treatment with no residual signs or symptoms
- Well-controlled IDDM
- CHF with orthopnea and ankle edema
- COPD- emphysema or chronic bronchitis
- Exercise-induced asthma
- Less well-controlled epilepsy
- Hyperthyroid or hypothyroid disorders when patients are symptomatic
- Adults with blood pressure readings between 160-199 systolic and/or 95-114 diastolic

ASA IV is a patient with an incapacitating systemic disease that is a constant threat to his/her life. (Whenever possible, elective dental care should be postponed until the client’s medical condition has improved to at least an ASA III classification.)

- Examples:
- Unstable angina pectoris
- Myocardial infarction within the past 6 months
- CVA within the past 6 months
- Adult blood pressure greater than 200 systolic or 115 diastolic
- Severe CHF or COPD (requiring supplemental oxygen or confinement to a wheelchair)
- Uncontrolled epilepsy (with a history of hospitalization)
- Uncontrolled IDDM (with a history of hospitalization)

ASA V patients are contraindicated for any type of treatment in the GFC MSU Dental Clinic. In the case of the individual with multiple ailments, weigh the significance of each disease and choose an appropriate category.

## Administration of Local Anesthesia

All local anesthesia injections will require instructor supervision. Completed injection sheets are required prior to administration of any injection. Both Injection sheets & Taleval grading sheets will be utilized for instructor assessment. Students are responsible for entering all graded injections in both the comment section and implementation sections of Taleval and assure instructor signature in both sheets.

Example entry: Injections: R-IA/LB pass- J. Instructor, RDH

In preparation for the Clinical Local Anesthesia Examination, students will be held accountable for all aspects of Atraumatic Injection Technique. Proper tray protocol, needle protocol and Process “callouts” will be required. Instructors will be grading according to CRDTS exam protocol. Please reference the CRDTS Local Anesthesia Candidate Guidelines at [www.CRDTS.org](http://www.CRDTS.org).

Proper documentation of the procedure on the treatment record should include type of topical placed if used, MRD for patient, type of injection administered, results of aspiration, anesthetic utilized, amount used with time of administration. Patient’s reaction should also be noted and their consent for the injection. Additional information may be needed based on a variety of circumstances.

Instructors reserve the right to identify students who may need remediation due to poor anesthetic technique. In the event an instructor identifies that a student needs remediation, the student will be notified, and a one-on-one session will ensue. The student may not be permitted to administer anesthetic to the public until the remediation has produced the desired outcome.



Students may complete local anesthesia requirements during simulation days on peers. Peers may only be used ONCE to count toward clinic requirements, and cannot have ever injected on peer before. Please remember there will be very few clinic sessions set aside for simulation and peer requirements. Please plan accordingly. This must be done on a student you have not administered LA to before. Only 1 injection of each requirement can be done on a peer. The rest must be done on a patient.

#### Minimum Local Anesthesia Injection Requirements

Type of Injection	Required Quantity for DENT 251	Required Quantity for DENT 252	Required Quantity for DENT 281
Posterior Superior Alveolar NB	2	4	4
Middle Superior Alveolar NB	2	4	4
Anterior Superior Alveolar NB	2	4	4
Naso Palatine NB	2	4	4
Greater Palatine NB	2	4	4
Inferior Alveolar	2	4	4
Long Buccal NB	2	4	4
Mental/Incisive NB	2	4	4
AMSA	Not Allowed to administer	Can be used as a substitution for MSA, ASA, GP, NP	

## Radiographic Exposure

Students must provide a rationale for all radiographs and obtain a prescription for the radiographic series from the supervising dentist. Rationale and patient radiographic history will be documented within the treatment plan and informed consent must be signed by patient and POD instructor prior to any radiographic exposure. Patients must pay for radiographs prior to the procedure. All series will be exposed under general instructor supervision. Retakes will not be permitted until the student has consulted with an instructor and provided a radiographic evaluation form for the instructor to approve and sign. All necessary information on radiographic evaluation form must be completed before receiving authorization to proceed with retakes. The following information must be noted on the radiographic evaluation form, or the instructor will not approve retakes:

- Patient name
- Date of exposure
- Type of series
- Type of armamentarium utilized
- Other pertinent information regarding patient exposure-example: severe gag reflex
- Individual retakes marked in green pen by evaluating instructor
- Rational for retakes and necessary correction(s) indicated for improved diagnostic quality
- Instructor initials for approval of retakes
- Number of images exposed including retakes

Retakes must be logged with correct information in the QA log sheet prior to student departure from POD for the session. Students may be asked to re-expose retakes under direct supervision of instructor to ensure proper technique is achieved. It is also important to note that all students are expected to follow proper protocol regarding radiation hygiene for the protection of the patient, the student and any other individual who is present in the radiology lab. Please review the radiology manual. If a student is found in violation of the policy and procedures in the radiology manual reviewed and signed by student fall semester Junior year, one or more of the following could result: a critical error point could be deducted from student's grade in Taleval and/or the radiographic series cannot be used for a requirement. If the error is deemed significant, it may result in student dismissal from the Dental Hygiene Program.

Evaluation of radiographs must take place during clinical sessions. The student must address the evaluation of radiographs immediately after exposure. No retakes will be authorized without the evaluation completed by the student including suggested retakes, reason for retake and correction needed. Once the POD instructor reviews the images and authorizes retakes, student may proceed with retakes. Retakes should be taken in a new mount labeled retakes. Once this is done, students must give the assessment sheet to the instructor for grading. All graded radiographic series must be correctly entered into Taleval immediately following the clinic session in which they were graded. The specific radiographic series must be listed under the comment section of Taleval as well as in the Assessment section of Taleval in order for the student to receive proper credit for the series. Students will receive an + or x for their series. The grade of + or x will be determined using the grading guidelines found in the radiology manual as well as grading scaling found on the assessment sheet. This series will count toward final clinic grade. Taleval only calculates the number of checks a student receives. Once x is equal to two checks. Do NOT dismiss the patient until instructor has reviewed the radiographic series to determine if the patient needs retakes.

Radiograph Grades	2 x = 84%	5 x = 50%
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0 x = 100%	3 x = 75%	6 x = 40%
1 x = 92%	4 x = 65%	7 x = 30%

All grades will be determined by originals. For an FMX: Students may earn 4 bonus points for each retake with at maximum of 3 retakes if retake corrects error and no new error results. If a new error occurs but an old error is corrected, they will receive 1 point back for retake. If the error is not corrected in retake, no points will be awarded for retake. For a bitewing series: Students may earn 2 bonus points for each retake for a maximum of 4 points if the error is corrected and no new error occurs. If a student cannot pass their radiograph requirements, they must complete a remediation assignment by the end of the semester, which will involve attending an open lab session and may count towards radiology requirement. Instructors reserve the right to identify students who may need remediation due to poor radiographic technique patterns or poor radiographic evaluation patterns. If a student is identified by an instructor as needing remediation, the student will be notified and a one-on-one session utilizing DXTTR will ensue. The student will not be permitted to expose radiographs to the public until the remediation has produced the desired outcome. Instructors may also recommend an additional requirement if they feel the student requires additional practice taking radiographs and the student must find this patient themselves. Students who are not passing radiographs must identify themselves to the instructors and ask for assistance. If a student takes more than the required number of radiographic series, all passed radiographs will be considered first for final grade, then failed series will be counted towards required number for course.

### Sample Chart Entry

FMX prescribed by Dr. Dentist was exposed (18 + 3 retakes) for the purpose of (reason given ex: initial exam or periodontal diagnosis). S. Student, DHS

### Minimum Radiographic Requirements

Students are not allowed to transfer radiographs from one semester to another because this is a skill that must be continuously practiced.

TYPE OF SERIES	NUMBER REQUIRED DENT 151 Passing not required	NUMBER REQUIRED DENT 251 Passing not required	NUMBER REQUIRED DENT 252	NUMBER REQUIRED DENT 281
FMX	1 FMX or Pano 1BWX (not included in the FMX)	2 FMX	2 FMX (1 passing)	2 FMX (must pass 1 FMX)
Pano		1 Pano	2 Pano (2 passing)	2 Pano (2 passing)
BWX		2 BWX of which one needs to be a mixed dentition.	3 BWX (not included in the	3 BWX (not included in the

		(Cannot be included in the FMX)	FMX- must pass 1 BWX)	FMX- must pass 1 BWX)
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# Skill Assessments

Competency/Skill Assessments are designed to provide students the opportunity to demonstrate skill and the ability to practice safely during all dental hygiene procedures. Therefore, it is the student’s responsibility to prepare for and recruit the appropriate patients to successfully complete the required competency assessments. It is the student’s responsibility to also obtain the POD instructor’s signature on the appropriate form at the completion of all competency assessments. Planned competency assessments must be presented to the POD instructor during POD discussions. These competencies are graded tests. Therefore, it is the student’s responsibility to prepare for and recruit the appropriate patients to successfully complete the required competency assessments. No instructor or peer assistance will be permitted during final competency assessments. No resources will be allowed during final competency assessments, including patient visual aids.

All competencies on patients must be completed by lead instructor’s deadline as noted in the syllabus unless it has been approved and documented by an instructor that a student may complete a competency the last week. Students are cautioned that if they begin or complete a competency without the instructor’s ability to observe the skill, the competency will NOT be signed by the instructor. If an instructor has requested that the student repeat or complete the competency, they may not seek a different instructor to complete it without permission. If a student is found to be in violation of this policy, professional points could be deducted which will affect the cumulative grade for this course via the Taleval grading system. This may result in a reduction of the clinical grade and thus potential dismissal from the Dental Hygiene Program. Students are encouraged to receive maximum help from the instructors while learning to perform procedures and preparing for the competency assessment. On DAY OF assessment, NO instructor assistance will be permitted during, or prior to, final competency assessments. A failed assessment cannot be attempted again until a remediation is done or a reflection on the challenge has been written and signed by the evaluating instructor. Remediations must be completed as outlined in the contract before the student can repeat the competency/skill assessment.

Self-assessment reflections will be completed utilizing the “what,” “so what” and “now what” reflection model. The self-assessment form must be attached to the specified competency assessment and returned to the evaluating instructor within 24 hours or as determined by the POD instructor. Failure to comply will result in the student being denied a second attempt at the competency until a remediation has been completed as per instructor discretion. Please practice assessments prior to attempting them.

All completed competency assessments must be correctly entered into the Taleval grading system immediately following the clinic session in which they were completed or

attempted. Specific competency must be listed under the comment section of Taleval along with pass/fail and instructor initials. The competency grade will be determined from the original competencies and not the second attempts. Instructors reserve the right to determine consequences if competency is not passed on the second attempt. Competency completed as a tutorial will not count towards grade.

Example Taleval entry: Competency Assessment instrumentation - J. -Pass. Smith RDH

Students are asked to complete (2) competencies per clinic session to complete the required number of assessments before the semester ends. Clinic competencies are meant to demonstrate a student has achieved the minimum level of clinic skill required to work on live patients. If a student is unable to pass a clinic competency after two attempts, they have not demonstrated the minimum skills required for moving on in the program. Failing a competency skill assessment two times may result in failure of the course and the student will not be allowed in the Dental Hygiene Program. See individual course syllabus for specific information on each assessment required for that course.

## Program Competencies

Program competencies test Mastery and must be passed by the second attempt or student will be dismissed from the program. Students must be able to complete certain skills at specific points in the program to continue. It is recommended that the student meet with their instructor and work on the skills required to pass the competency test before attempting a 2nd try. Each course syllabus will list each program's competency and expectations of that program competency.

### 2022-2023 Dental Hygiene Competency/ Outcomes

When students graduate, they will be prepared to:

1. Apply a professional code of ethics in all endeavors. This should include assuming responsibility for professional actions and care based on the current standard of care. This standard of care should incorporate scientific theories and research. (DENT 105)
2. Adhere to state and federal laws, recommendations, and regulations in the provision of oral health care. (DENT 205)
3. Use critical thinking skills, comprehensive problem solving and reflective judgement to identify oral health care strategies that promote patient health and wellness as they should be able to determine a dental hygiene diagnosis. These strategies should consider predisposing and ecological risk factors to prevent disease. In addition, these strategies should recognize how systemic diseases, meds, and oral health conditions influence patient care. (DENT 260)
4. Use of evidence-based decision making to evaluate emerging technology and treatment modalities as well as accepted scientific theories and research to provide not only quality, cost effective care but also educational, preventative, and therapeutic oral health services. (DENT

130)

5. Continuously perform self-assessment for lifelong learning and professional growth that may include pursuing career opportunities within health care, industry, education, research, and other roles as they evolve in dental hygiene. They should understand how to access professional and social networks to pursue professional goals. (DENT 281)

6. Communicate effectively with diverse individuals and groups, serving them without discrimination by acknowledging and appreciating diversity. (DENT 250)

7. Promote the values of the dental hygiene profession as well as positive values of overall health and wellness to the public and organization through service-based activities, positive community affiliations and active involvement in local organizations within and outside the profession. (DENT 260)

8. Apply quality assurance mechanisms to ensure continuous commitment to accepted standards of care that include methods that ensure the health and safety of the patient and clinician in the delivery of care. (DENT 151 & DENT 122)

9. Initiate a collaborative approach with all patients to develop an individualized care plan that may include collaboration with and consultation from other health care providers to formulate a comprehensive dental hygiene care plan that is patient centered. Demonstration of professional judgement and current science-based evidence practices with considerations of the unique needs of each patient including cultural sensitivity and referrals. These referrals may include physiological, psychological, or social problems. Plans will adhere to disease prevention and maintenance strategies. Finally obtain and document patients informed consent based on through presentation of case. (DENT 160, DENT 251, DENT 252, & DENT 281)

10. Systematically collect, analyze, and record diagnostic data on the general, oral, and psychosocial health status of many patients. Record accurate, consistent, and complete documentation of oral health services provided. (DENT 251 & DENT 281)

11. Identify patients at risk for medical emergencies and manage patient care to prevent emergencies. Manage a medical emergency by using professional judgement that may include providing life support, CPR, and specialized training and knowledge. (DENT 151, DENT 251, & DENT 252)

12. Provide specialized treatment that includes educational, preventative, and therapeutic services designed to achieve and maintain health that includes determining outcomes of dental hygiene interventions using appropriate techniques. Also, evaluate the effectiveness of this treatment and compare actual outcomes of dental hygiene interventions with expected outcomes and adjusted as needed to provide optimal care. (DENT 252 or DENT 281)

13. Identify population risk factors as well as oral health needs in the community and develop strategies that promote health-related quality of life which may include determining availability of resources to meet the health care needs of this population or community. In addition, advocate for effective oral health care for underserved populations. (DENT 232)

14. Evaluate reimbursement mechanisms and their impact on the patient's access to oral health care. (DENT 205)

# Incompletes

## College Requirement for an Incomplete

- Must have adequate information and documentation to verify a true extenuating circumstance.
- The student must have been in attendance, do passing work (C or better), and have completed at least 75% of the required coursework.
- Must have an Incomplete grade set and understand will change to an F if coursework is not submitted on time.

## Program requirements for a clinic course incomplete

Students will only be allowed ONE incomplete for the program. Failure to complete course requirements for a second time will result in an F for the course and dismissal from the program. An incomplete will not be given for didactic courses, lab course, or a didactic course with a lab component. For students who are unable to complete those courses please see the absence policy. If there are unexcused absences, the student is not eligible for an incomplete semester.

It is strongly recommended that students strive to complete all requirements required in each semester they are assigned. One incomplete will be offered to students who have met most of their requirements and can present a plan on how they will meet remainder of requirements within the first 4 weeks of fall or spring semester of the next year or first 2 weeks of summer semester. Students are required to submit this plan by final chart audit. The incomplete must be finished during the following clinic semester hours and no other time will be given for students to complete either semester. It will be up to the lead instructor, with input from all clinic instructors, to determine if it is possible to complete remaining clinical requirements during the next semester. Since skill assessments, calculus tests, local anesthesia and radiographs all have specific patient requirements, it is difficult to determine a specific number of requirements that can be carried over. Therefore, it must be left to the lead instructor and clinic faculty (the clinical experts for the course) to determine on a case-by-case basis if the remaining requirements can be completed in 4 weeks and still give the student enough time to complete that semester's requirements. For example, an incomplete for summer semester: students would need to complete all remaining summer requirements in 2 or 3 clinic sessions fall semester. If it were going to take more than that, the student would get too far behind and not be able to finish fall semester. If minimum required patient experiences are not completed by the end of the semester or by incomplete deadline, a failing grade will be awarded. If all competencies are not completed by the end of the semester or by incomplete deadline a failing grade will be awarded. If the course grade is below 75% a failing grade will be awarded even if the minimum patient requirements have been completed.

The lead instructor must be notified 2 weeks prior to the last day of clinic that there is a concern with requirement completion. Students are responsible for tracking their patient

requirements and are encouraged to review patient care reports often. Oftentimes instructors can help students avoid an incomplete if given enough time to help student problem solve situation.

DENT 281 Incompletes will be based on the requirements needed and availability of clinic space. If a student has already used their ONE incomplete prior to DENT 281 and is unable to complete their requirements again, faculty will work with the student to determine a clinic schedule to allow the student to complete their requirements. All attempts to complete the requirements during finals week of the semester must be demonstrated first before an incomplete will be considered. This option is only available to students who do not have an unexcused absence. Students with an unexcused absence, unable to complete their requirements will fail the course. Please see the readmission policy for further information.

## Clinic Procedures

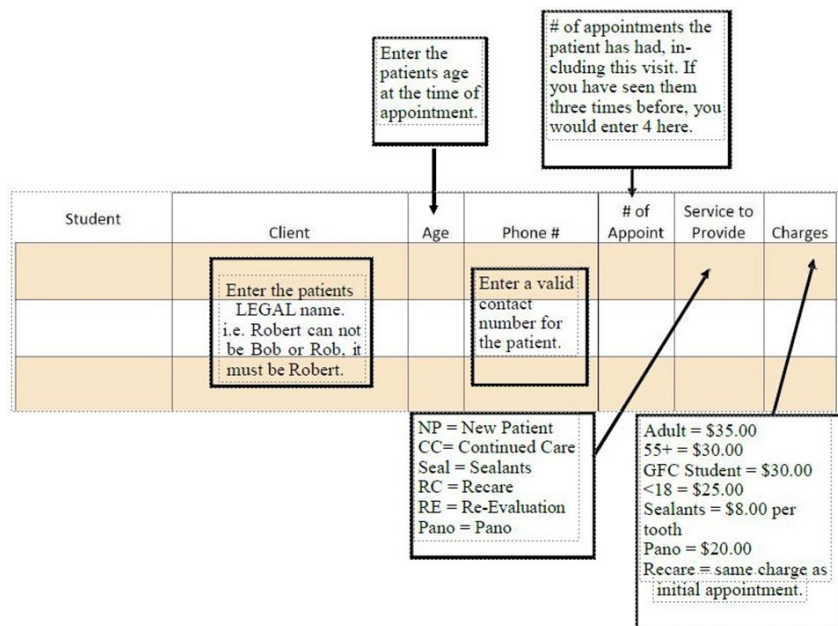
### Clinic Hours and Patient Book:

Students are expected to be on campus setting up clinic by 7:30am or 12:30pm on days scheduled for clinic. Students must be ready to see patients by POD meetings, which begin at 8 am or 1 pm. Patients are to be seated by 8:15 or 1:15. Students who are running late will receive a Taleval error for time management. All patients must be entered into the book no later than 10am Friday mornings for Monday's patients (in the summer, no later than 10am *Thursdays*), Monday 4pm for Tuesday's patients and Tuesday 4pm for Wednesday's patient.

Changes to the patient clinic schedule must be emailed to Terri no later than 7am for that day's patient. Please provide the patient's name and if they are continued care or new patient. Patients not entered in the book by the designated time will receive an error for not completing documents on time in Taleval. If it happens a second time students will have 1 point deducted from final Taleval grade. If the student does not have a patient to enter into the logbook by the assigned deadline, then a NP for no patient must entered. All changes made after the assigned time must be emailed to the office manager by 7 am the morning of the scheduled appointment. Students with duties (e.g. CA) are expected to arrive at 7:30 or 12:30. Students late to duties will also receive an error in taleval for time management. NO ONE on duty may leave until all duties are finished and everyone leaves together. This is about working as a dental team.

### Example of Appointment Book Entry





## Weekly Objectives

**During each clinical session, students are expected to:**

Demonstrate the following procedures, **with instructor supervision** on every patient while applying the cognitive, psychomotor, and affective skill learned.

- Medical/dental history review recognizing persons requiring medical consult/release and who are at high risk for a medical emergency.
- Obtain and Assess Vital signs
- Complete referral for medical/dental consultation, if warranted
- Intra and Extra oral examination including an Oral Cancer Screening
- Dental & Periodontal Assessments
- Oral Hygiene Education & Tobacco Use Cessation/Education
- Determine Risk Assessment (Perio and Caries)
- Dental Hygiene Process of Care Plan
- Rational for radiographic exposure and use of digital radiographic equipment
- Management of Pain & Anxiety: Local Anesthesia
- Assessment and Debridement of subgingival and supragingival deposits
- Selective coronal polish or air polish for the management of extrinsic stains
- Determine the need for any adjunctive therapy
- Fluoride Application
- Documentation and referrals. It is mandatory that all needed signatures are obtained prior to treatment being performed. Also, require instructor's approval/signature
- Chairside chart audit. Mandatory to be completed within one week post last seen date. If not completed correctly could result in an error in Taleval

Students are expected to consult with faculty when designing a comprehensive Dental Hygiene Process of Care Plan for all AAP Case Types patients.

- Dental Hygiene Assessment
- Dental Hygiene Diagnosis
- Dental Hygiene Process of Care Plan
- Dental Hygiene Implementation
- Dental Hygiene Evaluation

All students will be expected to get a signature for informed consent from the consulting POD instructor and patient before all data collection and treatment sessions. Informed consent for treatment cannot be obtained prior to periodontal diagnosis by supervising dentist. Referral letter from supervising dentist must also be given to patient when consent is obtained. The student must provide full disclosure to the patient for the following:

- Prescribed treatment recommendations
- Ramifications of patient refusal of recommended treatment
- All treatment modifications
- Length and number of required appointments
- Fee for services

Students will be expected to maintain and practice within a safe and healthy environment. Anything deemed threatening to the health, safety and well-being of you, your patients, peers, staff, and faculty constitutes a Critical Error. This could result in NULL & VOID towards your clinical requirements (patient will not count towards clinical requirements). *Therefore, the student is responsible for acquiring an additional patient to fill the deficiency. The lead instructor will notify the student of the error and if it is deemed significant, it may result in a student dismissal from the Dental Hygiene Program.*

In all aspects of clinical activities and patient care, students will be expected to:

- Comply with the GFC MSU Dental Hygiene Program Handbook
- Clinic Policy and Procedures Manual
- Radiation Policy and Procedures Manual
- Demonstrate professional and ethical behavior as documented in the GFC MSU Dental Hygiene Program Handbook and the ADHA Code of Dental Hygiene Ethics.
- Preserve patient's rights and maintain confidentiality in accordance with all HIPAA rules and regulations
- Correctly demonstrate the use, function, and maintenance of all clinical equipment while assuring operator safety.

Clinical patients will be completed with instructor supervision. All teeth must be scaled to completion. Subgingival and supragingival calculus will be checked together followed by evaluation of stain/soft deposit removal. All clinic procedures must be completed during scheduled clinical sessions. Students must dismiss their patients at the designated time during clinic sessions unless the POD instructor grants approval to complete remaining necessary treatment. Regardless of receiving instructor permission to complete the patient beyond the clinic session time parameter, "Time Management" points for the session will be assessed to the student upon verification of student performance in Taleval. Please remember that students who receive permission to proceed past the designated clinic session are doing so dependent upon circumstances unique to their patient as per instructor discretion and should not be thought of as automatic.

Patients must be assessed by a POD instructor prior to dismissal after fluoride application. The instructor will assure the following:

- Student has delivered comprehensive care
- Patient is exhibiting no concerns following treatment or fluoride application
- Patient understands all outstanding treatment needs listed on DH Care Plan and Dental referral form.
- Patient understands all post-operative instructions discussed and dispensed
- Patient has completed "Satisfaction Survey"
- Patient has received, and it is documented, a dental referral form
- Patient has had all questions and concerns addressed
- Patient has all signatures present on all necessary documentation

Failure to comply with this clinic policy and procedure will result in a Critical Error and will result in a NULL & VOID status for the patient. This means the patient will not count toward clinical requirements. Therefore, the student is responsible for acquiring an additional patient to fill the deficiency. The student will be notified of the error by the lead instructor and if it is deemed significant, it may result in dismissal from the Dental Hygiene Program.

## Periodontal Diagnosis

Supervising Dentist Schedule- before a student may scale a patient or treatment plan a cleaning the patient must have a periodontal diagnosis from the supervising dentist. All assessments must be obtained first before the doctor can diagnosis the patient's periodontal status. The supervising dentist has designated specific protocols for patients regarding these assessments. These protocols change to adapt to current clinical needs, and students will need to work closely with POD instructors and watch clinic announcements for updates regarding these policies. Once all assessments are completed, students will need to submit patients for a diagnosis. The supervising dentist has one week to review all charts; therefore, the patient will have to

wait until at least the following week to begin scaling. These protocols are in the top drawer of each instructor station in a red notebook.

DENT 251 Exception- Supervising Dentist will do a limited number of exams on Monday evenings for patients returning the following Tuesdays, all other exams will be completed by the following Monday. Please see DENT 251 lead instructor for more information.

Treatment started without a periodontal diagnosis will result in a NULL & VOID towards semester's requirements. If treatment proceeds without patient informed consent and proper signatures from faculty, it will be considered an error. If treatment proceeds, a second time without signed informed consent the patient requirement will result in a NULL & Void towards your clinical requirements. Therefore, the student is responsible for acquiring an additional patient to fill the deficiency. The lead instructor will notify the student of the error.

## Clinical Duties

Rotations are designed as learning experiences, which aid in the understanding of the various duties required to operate a dental office. Students are expected to follow the clinical rotation schedule without exception. The schedule has been designed to provide each student with an equal clinical opportunity. No changes will be allowed in the rotation schedule unless approved by the lead instructor. All changes must be planned two weeks prior to the date requested change. Clinical rotations must be for the same duty if there is a change needed. Failure to appear for scheduled clinical rotations without calling in will result in disciplinary action taken against the student up to and including termination from the program. Failure to appear for externship sites and onsite clinic without calling is unprofessional.

Students with duties are expected to arrive at the appropriate time and are not allowed to be doing other activities like homework during duty time. Clinic assistant (CA) will perform a variety of duties including but not limited to:

- Report ALL equipment and supply concerns to the Clinic Coordinator
- Maintain sterilization rooms and equipment while demonstrating proper sterilization procedures during the recirculation of dental instruments and hand pieces
- Assist other students and faculty as needed
- Prepare clinic for opening and closing
- Collaborate with the Dental Clinic Manager to correctly record all needed periodontal exams for each clinic session.
- Refer to clinical assistant rotation sheet

## Chart Audit

Chair side Audit Protocol: All completed patients must undergo a chair side audit utilizing the appropriate chart audit worksheet. All signatures and elements of the chart audit process must be self-assessed and completed prior to the student's request for an instructor to review the documents. All chair-side audits must be completed with an instructor within one week of completing each patient. Not complying with this protocol will result in a loss of Taleval points.

Final Chart Audit Protocol: Students are required to arrive at the final chart audit with the following preparations completed to help expedite the process.

- All completed patient charts
- All in-progress patient charts
- Accompanying table with patients arranged according to classification
- Competency Assessment packet
- All Tal/Eval Clinic rotation sheets
- All patient Tal/Eval grade sheets
- All patient radiology grade sheets
- All Local Anesthesia grade sheets
- A list of all patients *not* continuing care with our clinic
- A list of all patients who *do* wish to continue care with our clinic (notecards for each) **Create a card** for each patient wanting to continue care in our dental clinic. Write significant information/helpful information about each patient on the card for the next student provider you think might be helpful (e.g., best time to reach/schedule, patient likes pillow, needs inhaler, etc.) Each card must include the following information:
  - i. Patient name
  - ii. Patient phone number
  - iii. Patient email
  - iv. Date AND Type of last service in our clinic
  - v. Date DUE for next service

Any student who arrives at a final audit ill prepared for this process will be awarded professional points. Any Taleval grade sheets, Radiology grade sheet, Local Anesthesia grade sheet, or Clinic Pink Progress sheet that arrives at final audit without signatures or without data entry into Taleval will count as a critical error (i.e., one (1) full point deduction from student Taleval grade *per* sheet with missing signature). This may result in a reduction of the clinical grade and thus potential dismissal from the Dental Hygiene Program.

## No Client Session

Patient recruitment is a skill that all dental hygiene students must become competent in to successfully pass their practical board exams and enter the workforce. This is a challenge for students but necessary for their successful completion of the program and board exam. This skill will also be utilized as a practicing dental hygienist to promote preventative health, their dental office and establishing patient bases.

Educating the public on the need for preventative care and that dental disease is the mission of the dental hygiene profession. Patient recruitment during the program will allow each student to become skilled in communicating the importance of preventative dental care that will remain with them throughout their career.

In the event the student clinician is without a patient (peers do not count as a patient in the chair) for the entire clinic session a score of ( ✓ ) will result. The student will complete the Taleval grading form indicating a “no-client” session with POD instructor verification listed in the comment section and the patient treatment record. The POD instructor will assign the student to a specific area in the clinic to facilitate an appropriate learning experience. It is not up to the student to simply “find someone to observe or find something to do” to keep themselves occupied during the clinical session. Students are expected to utilize the *entire* clinic session for patient care, or hands on clinical experiences if no patient, and will not be permitted to work on homework or clinical paperwork. Patient experiences are an important part of student learning. As health care providers, students are expected to treat patients during clinic sessions.

Patient experiences also help the student prepare for CRDTS and for practice as a licensed and registered Dental Hygienist. If a student does not have a patient and does not have a Plan B or Plan C patient who can fill the opening, the student will receive the following Taleval point deductions, reflecting the lost practice and skill by not having a patient in their chair:

- 1<sup>st</sup> no client session – no points deducted
- 2<sup>nd</sup> no client session – 1 critical error point deducted
- 3<sup>rd</sup> no client session – 2 *additional* critical error points deducted (that is, 3 points total will be deducted if the student has three no-client sessions).
- 4<sup>th</sup> no client session – 3 *additional* critical error points deducted (6 points total for 4 no-client sessions)
- 5<sup>th</sup> no client session – 4 *additional* critical error points deducted
- 6<sup>th</sup> no client session – 5 *additional* critical error points deducted, and so on.

If a student is marked absent from clinic, this is also considered a no client session and the above point deductions will also occur unless the student has an excused absence. Failing to gain patient experiences, regardless of completing clinic requirements, equates to limited skills practice and missed chances for instructor feedback; and may result in a failing clinic grade and

dismissal from the dental hygiene program. Patients dismissed early, (for example, less than 2 hours after arriving during a 3-hour clinic session) when the student does not have a second patient scheduled, or plan for clinical purpose, to fill the remaining hour(s) of patient experience time may also result in Taleval point deductions for "Time-Management".

## Clinical Remediation Policy

The term remediate is the act or process of remedying that which is undesirable or deficient or to reverse or stop it. The purpose of clinical remediation is to correct deficiencies in a student's knowledge or skill by providing them with additional instruction/training specific to these deficiencies. In a clinical situation, skill deficiencies can cause concern when providing care to patients. Safety of the patient, the student and faculty are of utmost priority. If the deficiencies may affect the safety of others a student may be asked to discontinue demonstrated ability until the skill set can be remedied.

Remediation is an individual course of study or series of exercises designed to address clinical deficiencies. Remediation includes close faculty supervision to ensure corrections of deficiencies prior to follow-up evaluation. The clinical course instructor and/or clinic coordinator, with input from other appropriate faculty and instructors, will prepare a written contract specifying the identified problems, the date and method of remediation and/or testing. The student and remediation instructor will sign the proposed contract(s) for remediation. The plan of remediation is initiated upon recommendation of the clinical course instructor and/or the clinic coordinator, with input from other faculty members.

Many times, students will be challenged in the clinical setting especially as the difficulty of care needed increases. One of the best means to learning and becoming more comfortable with challenging patient treatment is struggling and working through the treatment. The clinical instructors are there to help you treat patients, so be open to the learning and feedback they are providing.

Examples of situations where a student might be asked to complete remediation with an instructor.

- Demonstration of poor understanding of procedure
- Fails a competency or skill assessment
- Repeated errors during clinic as noted on clinical evaluation forms

Depending on the problem or area(s) of deficiencies, the student may be asked to:

- Demonstrate and practice instrumentation techniques on typodonts.
- Schedule tutorial clinical sessions with faculty members to receive additional one-on-one instruction.
- Develop goals and plan to improve performance (ex: time management techniques).

Schedule additional patients and attend additional clinical sessions with the goal of completing certain procedures or practicing certain skills under a clinical instructor's direction.

- Review course and program requirements and develop a plan to meet requirements. Meet with faculty members on an ongoing basis to review progress.

## Children of Patients in the Clinic

Child of patients and students are not allowed in clinic unless they are a patient. For safety reasons, children under the age of 4 are not allowed on the clinic floor. Infants (especially those under 3-6 months old) are particularly susceptible to infection due to an underdeveloped immune system; and toddlers are very wiggly and curious, making for unsafe environment when the parent is getting treatment done and cannot keep a close eye on their child. Due to these concerns for child safety, any parent showing for their appointment with toddlers (under age four) and infants in tow will be asked to re-schedule or bring someone with them to watch their children out in the lobby. Please let your patients know about this policy ahead of time. If a patient has to be re-scheduled for bringing in children under age 4, a No Patient deduction in Taleval will result, unless you are able to fill your chair with a back-up patient.

## Patient Acceptance Policy

Recruiting patients is a skill that will be developed throughout the program. This skill will prove to be beneficial and necessary when recruiting patients with strict qualifications to successfully pass the Central Regional Dental Testing Services (CRDTS) or other regional exams to become a licensed dental hygienist. GFC MSU Dental Hygiene program and faculty are not responsible for providing patients for student clinical experiences and requirements. There are systems in place that provide resources for recruiting patients, but it is the students' responsibility. The following must be met prior to acceptance as a patient to the dental clinic:

- Oral conditions considered acceptable for learning;
- Patient interest in learning preventive oral care techniques;
- Patient cooperation in keeping clinic appointments on time.
- Payment from patient prior to service completed

## Fees

All patients treated in the clinic are required to pay a fee for service. Fee for service is required prior to *any* services rendered. All payments are made to the Dental Clinic Manager and tracked through the Eaglesoft Dental Software. A minimal charge is made for the numerous services offered. Payment must be made before treatment begins as the dental clinic has no method of monthly billing, insurance processing, or credit card processing. There are NO



REFUNDS. All patients must check in at the front desk with the dental clinic manager on arrival for their dental appointments. Patients are checked in based on appointment book entries completed by dental hygiene students.

Once the service fee is received, the dental clinic manager enters it into Eaglesoft Software with the specific appointment. If the patient is new to the clinic, patient information must be entered into the software. A receipt of fee for service payment is generated by the entry of payment into Eaglesoft and given to patient. The client's appointment status will then be updated to "Arrived" in the Eaglesoft OnSchedule software.

## Patient Record Management

### Confidentiality

Patient records are important and confidential legal documents and are to be developed and maintained with accuracy and thoroughness in mind. Maintaining patient confidentiality is imperative. Under no circumstances should patient records (including but not limited to: access through the dental surface pros, recare notecards, patient paper charts, etc.) be taken out of the Dental Clinic, office/kiosk, or dental lab. Surface pros and/or other sources containing patient information should NEVER be in public areas such as waiting rooms, locker room, hallways, etc. Surface pros, recare cards, patient charts, etc. found outside the dental clinic without instructor approval will result in critical error points deducted in Taleval. There are only three "legal" places a dental surface pro/patient data should be:

- In the clinic, surface pros should be left in charging stations
- In the lab, when there is an instructor or lab monitor present to monitor
- In the student kiosk, office managers office or faculty offices

Patient information cannot be shared with anyone except the patient without written authorization from the patient.

### Informed Consent

No patient treatment will be provided without the treatment plan being explained, full disclosure, patient questions answered and informed consent received with their original signature/date placed on the treatment plan. If patients refuse care, patients will either be asked to sign a declination of service such as fluoride treatment or be denied services and money refunded such as refusal to take radiographs.

### Documentation of Dental Patients' Charts

Medical/Dental records should be an accurate document that truthfully records the care and the time it was provided. Falsifying records will result in profound consequences. If the incorrect information was accidentally entered, please discuss with the instructor on how to correct the entries. Entries are to be signed by the person who put the information into the

record followed up by an entry from an instructor verifying that the entry is correct. Missed appointments and any communications with the patient should also be recorded in the chart. Changing record information after it has been verified is not allowed without instructor permission. Changing record information hours or days after the appointment is illegal. You must see your POD instructor if you have any concerns/questions about mistaken data entered. Not doing so may result in profound consequences, including possible dismissal from the Program.

## Oral Hygiene Education and Instruction

As a dental hygienist one of the most important aspects of dental hygiene is “prevention.” Oral hygiene education is key to preventing periodontal and caries disease. The student is required to perform patient education and home care instruction on all patients. The plaque index is a wonderful tool to assess the amount of plaque on the teeth and plaque themes. Do not just write down the plaque index in the chart but also share it with your patient. It is a great educational tool and motivator to show your patient their ability to remove plaque. It also is the perfect time to demo proper techniques for plaque removal. Feedback on how your patient is doing with their oral hygiene is so important and may require reviewing oral hygiene instruction at multiple visits.

# Professional Behaviors and Clinic Conduct

The students enrolled in this program are expected to conduct themselves in a manner which will be a credit to their school and the profession of dental hygiene. They are expected to abide by the code of ethics for this profession provided by the American Dental Hygiene Association (ADHA) and this handbook. What a student says or does, how they dress, and their behavior reflects not only this program, the college and the profession, patients also use these cues to determine if they received quality care in the clinic.

All students, faculty and staff should aspire to achieve a high academic excellence for this program. No student should be made to feel inhibited to achieving academic excellence due to verbal or emotional harassment from anyone on campus, including patients. Violations to this handbook or any college rule or regulation will be subject to disciplinary action.

The following is a list of some reasons disciplinary action may be taken.

- Performing acts beyond the limits of legal practice
- Insubordination towards clinical preceptors, clinical staff, or Great Falls College MSU faculty
- Inappropriate behavior including body language
- Arguing with fellow students, patients, externship faculty/staff, clinical staff, or Great Falls College MSU faculty and staff
- Failure to follow the instructions of the clinical faculty or refusing to perform procedures and follow-up as directed by a supervising dentist, clinical instructor, or externship dentist and staff without just cause
- Performing inappropriate or unsafe procedures on a patient
- Not properly identifying a patient and performing a procedure on the wrong patient
- Violations of the Uniform Appearance Code and related requirements
- Receiving guests during clinic or externship rotations
- Using, possessing, distributing or being under the influence of any alcohol, narcotic, or any other drug including marijuana or prescription drugs that can alter a student's judgement, physical activity during clinic or an externship activity
- Use of tobacco on campus or during an externship activity
- Use of personal electronics during clinic
- Failure to arrive on time
- Falsifying clinic documents or homework assignments including exams
- Willfully committing an unsafe act that would potentially endanger anyone in the clinic or classroom
- Tampering with, damaging, or theft of any equipment or private property of clinical site, externship site, locker room or classroom.
- Touching any person in any manner considered threatening, offensive, or degrading
- Making any written statement, verbal statement, or gesture to any person that is

considered threatening, offensive, or degrading

- Harassment of patients, fellow students, faculty or staff during clinic, classroom, or externship
- Stalking
- Possession of lethal or non-lethal weapons, firearms, and explosives during clinical, class or externships
- Diverting supplies, equipment, or drugs for personal or unauthorized use
- Threatening acts
- HIPPA violations
- Abusing patients, fellow students, faculty, or staff
- Conduct unbecoming a dental hygiene student or is determined is detrimental to the best interest of the public

## Attitude

All personal problems and negative attitudes should be left outside the doors of the college campus or externship site. The first complaint will be discussed with the student. The second complaint will be discussed with the program director and a written/verbal reprimand will be given to the student. Documentation of the discussion will be included in this reprimand. The third complaint will result in discussion with college administration and potential dismissal from the program.

## Professional and Ethical Responsibility

The GFC MSU Dental Hygiene Program recognizes that this is a learning environment and part of learning is making mistakes. Professional and ethical infractions could be grounds for dismissal from the dental hygiene program. They are listed below, but this is not an exclusive list. Dismissal from any part of the dental hygiene program remains at the discretion of the Program Director and is based on the student's ability to provide safe patient care, and maintenance of academic standing. Due process will be followed in applicable situations. The following infractions could result in failure of a course resulting in not proceeding through the program: Falsification of patient records or withholding radiographs is considered cheating, unethical behavior and will result in expulsion from the program.

A breach of patient confidentiality has been committed including verbal statements in person or by telecommunications/social media. Removal of patient information from the clinic area is also a breach of confidentiality and will result in dismissal from the program. All patient oral assessments & treatment must be completed in a clinical setting either in the college's onsite clinic or externship clinic. Student impairment due to drugs or alcohol prior/during clinic sessions is dangerous to you and the patient and will result in expulsion from the program.

Every student is here to learn how to be a hygienist. Part of this education is learning how to be professional and ethical. Each student is expected to work hard to follow the protocol outlined in this handbook. The following are considered violations of professionalism and ethics. Note that this is not a complete list, and some situations must be considered case-by-case. Infractions to the following list or others deemed appropriate could result in the loss of clinical requirements that may result in the failure of a course, deduction of points from the final grade which may result in failure of a course and or removal of the program. This will be determined by the lead instructors, input from other program instructors and the dental hygiene program director.

- Failure to perform assigned duties or perform infection control protocol.
- Failure to call in by 7:30 AM when going to be absent.
- Arguing with instructors, dental clinic manager, patients, and fellow students
- Removing patient records from the allowed designated area
- Failure to properly complete paperwork:
  - recording inaccurate patient information
  - duplicating client's chart
  - falsification of records (to include x-rays)
- Consumption of alcohol/drugs prior/during clinical sessions
- Failure to maintain professional appearance:
  - Using unprofessional language
  - Exhibiting unprofessional behavior: crying in public, displaying anger, etc.
  - Knowingly perform an action that could cause harm to any patient, student, instructor, or visitor to the clinic: i.e., using nonsterile instruments
- Failure to comply with all program regulations and policies as stated in this Policy and Procedure Manual.

The following is a list of infractions that violate professionalism and ethics deemed inappropriate in a professional environment and could result in either a check or x in clinic. These behaviors are disruptive and make it hard for students to learn. If this behavior is occurring in a didactic course, the instructor is to discuss these behaviors with the student and will follow college and course policy to discipline.

- failure to submit radiographs for supervising dentist review in 48 hours (approximately 2 days)
- failure to attend/schedule advisor conference
- Taking film badges out of the dental clinic
- Failure to maintain professional appearance:
  - wearing incorrect, dirty, or wrinkled uniform or lab jacket
  - fingernails too long or polished
  - not wearing film badge
  - inappropriate style of hair
  - inappropriate type/condition of shoe

- using inappropriate make-up
  - not wearing socks/hose
  - wearing inappropriate jewelry
- Failure to make appropriate use of lab or clinic time
- Failure to maintain adequate appointment control
- Failure to be prepared for lab or clinic sessions with an A, B, C Plan
- Having food or drinks in lab or clinic
- Being tardy
- Failure to maintain work area in a professional manner
- Failure to sign in with work study or cleanup work area when working outside scheduled class time or open lab
- Failure to keep operatory neat and organized
- Seating patient prior to receiving POD instructor approval
- Being on the clinic floor prior to instructor being on clinic floor
- Failure to notify Dental Clinic Manager that additional services have been rendered during patient treatment.
- Visiting with neighbor when the instructor is lecturing/talking.
- Cell phone ringing during class, lab, or clinic sessions.
- Working on another course assignment while you are in a class or lab session.
- Not respecting the office manager's office hours
- Failure to properly complete paperwork:
  - not returning chart to proper place
  - not putting client's name in appointment book or daily log
  - failure to update medical history/vital signs
  - making illegible chart/appointment book entries
  - incorrect address of dentist on consent form where patient x-rays are to be sent

It is not possible to include all infractions; therefore, any occurrence not specifically noted will be handled on a case-by-case basis. The goal of the dental hygiene faculty is to graduate mature, responsible, professional dental hygienists who can function as integral parts of the dental team and have attention to detail. Dismissal from the program can occur if there is repeated failure to follow policies and procedures. Dismissal could also occur if there is a serious incident such as one involving a threat to patient safety, gross insubordination, the disclosure of confidential information, falsifying student or patient records, cheating, theft, willful damage to property, intoxication or being under the influence of drugs or alcohol during clinical or class hours, or possession of a dangerous weapon while in a clinical setting.

## Medical Records and Confidentiality

A client's medical condition or personal problems must **never** be discussed with anyone except those who have a direct tie to the client's care. Release of information to newspapers, radio stations, and TV stations, Social Medias or their representatives are forbidden. Names must not be used in any written case studies or discussions. The release of any privileged information regarding any patient is cause for immediate suspension and recommendation for dismissal from the program. Discussion of your clinical assignment and information obtained while there is NOT a topic for social conversations. All clinical happenings stay in the clinic and go no further. Respectful consideration of all clinical areas and personnel is required. The students are at the clinical externship sites by invitation which could be rescinded at any time if undesirable conduct occurs. The clinical area was chosen for specific learning experiences and the value you receive will depend on you and your attitude. Any problems that might develop should be discussed privately with the clinical supervisor, Program Director, or Lead Instructor. Students will follow all the same policies and procedures of the program at all externship sites.

## Dental Hygiene Program Confidentiality Agreement

Patient information from any source and in any form (such as written, verbal, or computer generated) is confidential. The Dental Hygiene program adheres to strict Health Insurance Portability and Accountability Act Standards (HIPAA). Students, instructors, and staff shall protect the privacy and confidentiality of all patients, students, and faculty members treated in the dental clinic and/or provide information in classroom settings. Access to this information is allowed only if there is a need to know to fulfill educational responsibilities. All individuals involved in the dental clinic and program may see or hear confidential information concerning patients, students, faculty, or family members. Such sources of medical information may include medical/dental records, financial applications, abuse reports, radiographic requests, medical test results, patient records, conversations, and case presentations.

All confidentiality and privacy policies along with consequences of infractions set by the Health Insurance Portability and Accountability Act (HIPAA) and the program's Confidentiality Policy are the same whether students and faculty are working face to face or online. This confidentiality agreement covers all school sponsored externships and activities outside of the dental clinic and educational institution that involve any confidential information. Promptly report any potentially identifiable breach of confidentiality or privacy to the Program Director. The student is responsible for complying with all the rules and regulations of the college. Any new policies will be posted.

## Phone Use

**The dental programs have telephones in clinic and lab for program use and are available in case of an emergency.**



**Cell phones in class:** All cell phones must be turned OFF during class time. Please discuss any personal matter with the instructor prior or make any necessary outside arrangements in case of emergency situations. Five points for each infraction will be deducted from cumulative course grade if student's cell phone disrupts class. In addition, the instructor may give a pop quiz to the ENTIRE class.

**Cell phones in clinic:** All cell phones must be placed **in the locker room** during the clinic session; phones **are not to be kept in lab coat pockets or in clinic operatories**. If a student needs to call a patient, personal cell phones can be used prior or after clinic session in a secure confidential area, office area, locker room, or clinic area. Do not make patient phone calls in the hallways and school entry area as it is not a confidential area.

If you are waiting for an emergency call, have them call the Dental Clinic Manager at (406)-771-4364 so you can be notified if the need arises.

## Smoking, Drink, and Food

Great Falls College MSU is a non-smoking building. Designated areas are provided for this activity. The faculty encourages that the Dental Hygiene students consider the negative health effects of smoking. We are willing to work with the student that desires to quit smoking. The clinical sites you will be assigned to are smoke-free campuses, which means that smoking is prohibited on all properties owned by the clinical site including parking lots. As such, smoking is not permitted in cars parked in the lot. Students are not permitted to utilize smokeless tobacco products during clinic or clinical rotations. All students are asked not to have significant food or drink in the classrooms.

## Visitors

No visitors will be allowed in the classroom during class without the instructor's permission. Small children and infants can be a big distraction in class to the students and instructor, for this reason they are not allowed in the classroom.

**Dental Hygiene Program**

Great Falls College MSU

# **Graduation And Licensing**

# Graduation

Great Falls College MSU students follow the catalog in effect when they begin their enrollment at the college if that enrollment has been consecutive or may elect to follow any subsequent catalog. If a student is absent for one or more semesters excluding summer, the catalog in effect at the time of readmission governs the student's graduation requirements. Students must pass all required courses and have an overall grade point average of 2.1 to graduate from Great Falls College MSU.

Some of GFC MSU programs have specific requirements for matriculation and graduation. Students are informed of other specific program policies and requirements both at the time of their program application and throughout their educational experience.

Courses that require a grade of "c" or above are designated for each program in the program section of the college catalog. A student must submit a formal application for graduation by the published term deadline. Applications can be obtained from Student Central or online in the student section of the college website at [www.gfcmsu.edu](http://www.gfcmsu.edu). Click on the forms button. A non-refundable graduation fee is due upon submission of the application to Student Accounts. Students seeking multiple degrees pay a fee for the first degree and an additional fee for additional degrees in the same semester.

Application deadlines are published in this catalog and on the Academic Calendar located on the College's website. Students who fail to apply for graduation will not receive a certificate or degree.

Students will be awarded a certificate/degree upon satisfactory completion of all program requirements if they meet all the program and college requirements for the degree to be awarded by GFC MSU. For concerns, you should meet with your college advisor.

The commencement ceremony is held each May, at the conclusion of spring semester. Caps and gowns can be purchased through the bookstore for a fee. Graduation announcements are also available for purchase through the bookstore.

## State Licensure

### Dental Hygiene Post Graduation Exams

Upon receiving the Associate of Applied Science Degree, successful National Dental Hygiene Board Examination is required. The graduate will also need to obtain a license for the state they wish to practice in by successfully completing a regional practical examination. The dental hygienist must practice in accordance with the individual state practice acts' requirements and abide by requirements to maintain licensure.

## NBDHE (National Board Dental Hygiene Examination)

The National Dental Hygiene Board Exam will be administered at Pearson Vue professional testing centers in the U.S. Students can apply for the computerized exam and may take it any day and time the testing center is open, year-round. Applications will be processed daily. The program director will determine when the student is eligible to take the test, typically during their last semester of the program. To register for the exam, visit [www.ada.org](http://www.ada.org). The information can be found under the education tab/testing.

## Dental Hygiene Clinical Board Exam

Central Regional Dental Testing Services is offered here at Great Falls College MSU. Students can check the CRDTS website for exact dates. Local Anesthesia and Dental Hygiene practical exams are offered. Please look at the map found on the CRDTS website to determine which states in the US accept this exam. Please note that GFC MSU offers the manikin clinical exam and not the live patient exam. The website is [www.CRDTS.org](http://www.CRDTS.org). Students are required to review exam materials and guidelines for protocols and procedures as well as equipment needed.

# Professional Organizations

## *Student Member of the American Dental Hygienists' Association (SMADHA)*

Student Member of the American Dental Hygienists' Association, or SMADHA, is a category of membership within the American Dental Hygienists' Association. ADHA is an association dedicated to the advancement and promotion of dental hygiene. ADHA is the association of your profession. The dental hygiene faculty believe that joining this organization as students offers invaluable opportunities including attending the MDHA annual meeting fall semester of their senior year. This membership is part of the curriculum at GFC MSU dental hygiene program.

## Benefits

Scholarships - The ADHA Institute for Oral Health offers various scholarship programs and research grants for students seeking dental hygiene careers.

Recognition in Your Field - Membership in ADHA provides opportunities for professional growth and recognition. Leadership opportunities are available at every level of membership.

Countless Networking Opportunities - Join over 35,000 of your colleagues who have made the commitment to dental hygiene and to ADHA. Members at the state and local levels meet regularly to discuss ideas, information, and to share experiences.

Employment Assistance - ADHA offers national advertising and employment reference materials to assist students upon graduation.

Job Security - Once you have found a job, ADHA is right there helping to monitor legislative efforts to impact government activities that affect the practice of dental hygiene.

Financial Security - ADHA provides members with affordable, professional liability insurance, group health, automobile, term life and disability insurance. You are also eligible to apply for a student MasterCard.

Resources - Members of the ADHA can purchase resources for studying for boards and take courses designed to help students review for the NBDHE.

#### After graduation...

Upon graduation from an accredited program in dental hygiene, you can become an Active Member of ADHA. Active Membership will entitle you to all the benefits you received as a student, and many more.

The following services were designed especially for you, the dental hygiene professional. Countless educational programs, workshops, and conferences to keep you informed of changes and advancements in your profession, and to help keep your license current.

Membership in your professional association demonstrates your commitment to excellence and the highest standards of preventive oral health care.

**Dental Hygiene Program**

Great Falls College MSU

# **Signature Forms**



**RECEIPT OF HANDBOOK**

Each student enrolled in the GFCMSU (Great Falls College Montana State University) Dental Hygiene Program must read and be familiar with the information in this handbook.

I, \_\_\_\_\_ have access to the Student Handbook. By signing this, I acknowledge that I have read, understand, and agree to abide by the policies set forth in this handbook.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Student ID #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

All signed forms will be kept in the student's file. A copy will be provided to the student upon request.



### Confidentiality Agreement

Patient Information from any source and in any form (such as written, verbal, or computer generated) is confidential. I shall protect the privacy and confidentiality of patient information. Access to this information is allowed only if I need to know it to fulfill my work responsibilities as a student, instructor, or clerical support. In my position, I may see or hear confidential information concerning patients or family members. Such sources of information include medical/dental records, financial applications, abuse reports, radiographic requests, medical test results, patient records, and conversations.

I agree to the following:

- I will access only that information needed to fulfill my work responsibilities.
- I will not tell, show, copy, give, sell, review, change, or trash any confidential information unless it is part of my work responsibilities or course work. If it is part of my responsibility to do these tasks, I will follow the correct procedures.
- I will consider that conversations between the dentists, dental hygienists, dental assistants, and healthcare workers or between the undersigned and a patient are also protected and may not be discussed.
- I will under no circumstances discuss the medical condition, including HIV or infectious disease status, of any patient where the conversation may be overheard by any other client or by other students, faculty, and clerical personnel.
- I will not misuse or be careless with confidential information.
- I will not share any confidential information if I am no longer a Great Falls College MSU Dental Hygiene Program student, faculty member, or clerical support person.
- I will protect the privacy of our patients, students, and employees
- I am responsible for the use and misuse of confidential information.
- Failure to comply with this agreement may result in the termination of my employment or enrollment related to the Dental Hygiene Program at Great Falls College MSU and/or civil or criminal legal penalties. By signing this, I agree that I have read, understand, and will comply with this agreement.

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Printed name

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Student ID #

---

Date

---

Signature

### **Guidelines for Human Subject Consent Form**

As a student enrolled in the Great Falls College MSU Dental Hygiene Program, I am aware of and have been informed of the need to practice patient care skills specific to the work of dental hygiene on fellow students during supervised lab sessions.

As a human subject used for practice and demonstration for educational purposes, I understand that my responsibilities are:

- To inform the course instructor prior to the lab or clinic session for that day if I am experiencing any pain or discomfort that could be detrimental to my participation in the lab or clinic course. I understand that the instructor will determine if I should participate in the lab or clinic class as a “patient” for that day.
- To Immediately inform my lab or clinic partner and the instructor if I am experiencing any discomfort caused by the application of the procedure being practiced.
- To request that supervising instructor assist in correcting my lab partner, and assist my partner in the correct application of procedures

As a student practicing or demonstrating patient care skills on a human subject, my responsibilities are:

- To immediately stop the administration of a procedure upon any verbal or physical signs given by my lab or clinic partner or the instructor.
- To request assistance from the supervising instructor if any type of clarification is needed, or if there is any confusion about the procedure that is to be practiced, prior to its implementation.
- To respect the dignity of my lab or clinic partner by determining if they are comfortable, both prior to and during the procedure.

I have read and do understand the above guidelines. I agree to serve as a human subject for the practice and demonstration of patient care skills to dental hygiene procedures in the supervised clinic or laboratory. I acknowledge that I am aware of and understand the risks and hazards connected with the activities discussed in this consent form. I acknowledge that all risks cannot be prevented, and I assume the risks of loss or personal injury that may be sustained by me because of participating in these activities.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Student ID #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

### Dental Hygiene Education/Profession Risk Factors

The programs in the Health Sciences Division at the Great Falls College MSU try to minimize the risk of exposure by following the college's Communicable Disease Prevention and Exposure Control Plan, which comply with the Occupational Safety and Health Act (OSHA) Standards. These standards include universal precautions, which students are taught prior to beginning patient care. Even though the program makes extensive efforts to protect students enrolled in the healthcare programs from various hazards involved in working with patient, including exposure to bodily fluids contaminated with blood-borne pathogens such as HIV and hepatitis, total protection from all potential hazards is not possible.

As health professionals, dental hygienists, and other dental team members are exposed to contagious diseases and are therefore at risk of becoming infected. The National Health Institute, the Centers for Disease Control (CDC) and the Department of Health and Human Services all strongly recommend that health professionals at high risk have prescribed vaccinations. Dentists, their assistants, and hygienists are near the top of the list of those persons more likely to contract certain diseases than others of the health professions. The guidelines for immunizations are established in compliance with the Centers for Disease Control (CDC) and Occupational Safety and Health Act (OSHA). **Therefore, it is recommended that dental hygiene students be vaccinated against mumps, measles, rubella, varicella, and hepatitis B.**

Students are required to provide documentation of Tine or IPPD (tuberculin) tests and must present evidence of having the hepatitis B vaccine and immunity to varicella or sign a disclaimer to attend clinics and before working on patients in clinic. Some clinical sites will not allow students to attend without vaccinations regardless of exemptions.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Student ID #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Recruitment of Patients for Clinical Courses**

Dental Hygiene education is unique to other degree programs in that a new skill is learned along with the didactical education required for the profession. Acquiring a new skill requires many hours of practice in an environment where the student must competently perform that talent. For example, learning to play an instrument requires many hours of practice on the very instrument that the musician will someday perform with.

The clinical portion of the Great Falls College MSU Dental Hygiene program is focused on hands-on education by the actual treatment of community patients in its onsite dental clinic. Clinical coursework is instilled in DENT 151, 251, 252, and 281, Clinical Dental Hygiene Practice I, II, III, and IV for 810 clinical hours.

Included in the four clinical practice courses are requirements that various skills must be completed and performed on a variety of patients. These patient requirements range from completing dental hygiene treatment on pediatric, adolescent adults, geriatric, medically compromised and special needs patients. Each semester clinical course will have a minimum amount of patient requirements that must be fulfilled to progress to the next semester. The GFC MSU Dental Hygiene Program is dedicated to ensuring students graduating from the program will have been exposed to all areas of patient treatment allowing them a well-rounded education along with preparing them for the workforce.

For these crucial patient experiences, students must recruit patients for treatment so each student can practice and perform dental hygiene procedures that offer many patient management experiences and treatment needs.

GFC MSU Dental Hygiene program and faculty **are not responsible** for providing patients for student clinical experiences and requirements. There are systems in place that provide resources for recruiting patients, but it is the students' responsibility.

I have read the above information and understand that patient recruitment is the student's responsibility, and it is required to successfully complete the GFC MSU Dental Hygiene program.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Student ID #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Film, Videotape, and/or Photograph Consent Form**

I (the undersigned) do hereby irrevocably grant to Great Falls College Montana State University, its officers, agents, employees, students, assigns and licensees, (hereinafter referred to as GFC MSU) the absolute right and permission to record my likeness and/or voice with still photography, film or videotape, to edit such still photographs, film, or videotape at GFC MSU's discretion, to incorporate the same into photo exhibits, motion picture films and video presentations, to use or authorize the use of still photographs, films, and/or videotapes, or any portion thereof, in any manner at any time or times throughout the world in perpetuity, to copyright, use, reuse, publish, republish, exhibit, display, print, and reprint in advertising, publicly or promotional material, magazines, books, or any other media and the right to use my name, likeness, and biographical and other information concerning me in connection with the exhibition, advertising, exploitation, promotion or any other use of such still photographs, films and/or videotapes.

I hereby waive any right to inspect or to approve the still photographs, films, and/or videotapes or the editorial or printed matter that may be used in conjunction therewith and further waive any claim that I may have with respect to the eventual use to which they may be applied. Such still photographs, films, and/or videotapes may be used at GFC MSU's sole discretion, with or without any name, alone or in conjunction with any other material of any kind or nature.

I further expressly agree that the foregoing release is intended to be as broad and inclusive as is permitted by the law of the State of Montana and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I acknowledge that I have read this document and understand its terms. I am signing the release freely and voluntarily.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Student ID #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

### Externship Clinical Contract

This clinical contract has been developed to provide protection for the clinical externship site, patients, college, and students. The following are violations but not limited to that if witnessed during externship experiences will result in a failed rotation, loss of privilege to participate in the externship site and may be cause of dismissal from the dental hygiene program.

- Alcohol or drug use at prior to coming to the externship sites, this includes alcohol on breath
- Inappropriate contact or behavior with patient
- Refusal of a primary clinical affiliate to accept the student
- Abuse or inconsiderate treatment of a patient, either emotional or physical
- Theft or dishonesty
- Unauthorized handling, possession or use of narcotics or drugs
- Fighting or unauthorized possession of a weapon
- Leaving the externship site without notifying the supervisor
- Not fulfilling requirements of the externship site experience and refusing to accept reasonable clinical assignments
- Failure to respect the confidential nature of the externship site and patient information
- Direct disobedience to orders which jeopardizes the health and safety of persons or property
- Frequent conflicts with other students, site personnel, and site supervisor
- Negative response to criticism
- Appearance inappropriate to the experience with no attempt to improve if requested
- No show for the externship site or unexcused lateness
- Falsification of patient or student records
- Violation of known Great Falls College MSU Dental Hygiene Program's policies and procedures
- Failure to report incidents involving the safety and health of patients, visitors, employees, fellow student, or self

I have read and do understand the above requirements of the externship site experience to avoid violations that may result in a failed rotation, loss of privilege to participate in the externship site ad may be cause of dismissal from the dental hygiene program. I acknowledge that I am aware of and understand the risks and hazards connected with the activities required at the externship sites and realize they cannot be prevented, and I assume the risks of loss or personal injury that may be sustained by me because of participating in this externship activity.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Student ID #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature