Course title and number: Clinical Dental Hygiene II DDHS 4820
Term: Summer 2021
Meeting times and location:
Monday 9:00 AM-12:00 PM, Tuesday 1:00PM-4:30PM, Wednesday 9:00AM- 4:30 PM, Thursday 9:00 AM-4:30 PM
See individual clinic schedule for times and location

Course Description and Prerequisites
Course Description: Comprehensive dental hygiene care through clinical application of procedures. Includes intramural dental hygiene and dental school rotations and extramural site rotations.
Prerequisite: DDHS 3830 Clinical Dental Hygiene I

Learning Outcomes or Course Objectives
For Course Objectives, see “Standards for Clinical Performance” in the Dental Hygiene Clinic Handbook.

The following list of beginning competencies identifies the knowledge, skills and attitudes the dental hygiene student must acquire by graduation in order to become a competent, curious and caring practitioner of dental hygiene. This course will begin to address these specific competencies that will be needed to treat patients in a professional and competent manner. Refer to Competencies for the Dental Hygienist, Caruth School of Dental Hygiene, revised 5/2013.

Learning Outcomes/Related Competencies:

Ethics
1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.
1.2 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

Information Management and Critical Thinking
2.1 Apply critical thinking skills and evidence based decision making to the practice of dental hygiene.
2.2 Commit to self-assessment and lifelong learning in order to provide contemporary clinical care.
2.3 Communicate effectively with diverse populations without discrimination.

Self-Care Instruction
4.1 Promote positive values of overall health and wellness to the public and organizations within and outside of dentistry.
4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.
4.3 Encourage patients to assume responsibility for their health while respecting their goals, values, beliefs and preferences.

Community Involvement
5.1 Identify services and agencies that promote oral health and prevent oral disease and related conditions.
5.4 Use screening, referral and education to bring consumers into the health care delivery system.

Assessment
6.1 Determine medical conditions that require special precautions or consideration prior to or during dental hygiene treatment.
6.2 Perform an extraoral and intraoral examination of the patient including assessment of vital signs and radiographic examination, and distinguish normal from abnormal findings.

6.3 Manage the patient at risk for a medical emergency, and be prepared to handle the emergency should it occur during an appointment.

6.4 Recognize predisposing, etiologic risk factors, and life style choices that may require intervention to prevent disease.

6.5 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

6.6 Determine the need for referral to the appropriate health professional.

Planning
7.1 Determine priorities and establish oral health goals with the patient/family and/or guardian as an active participant.

7.2 Acknowledge cultural differences in populations when planning treatment.

7.3 Establish a planned sequence of educational and clinical services based on the dental hygiene diagnosis using the problem-based approach.

7.4 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine its congruence with the overall plan for oral health care.

Implementation
8.1 Provide an environment conducive to health by using accepted infection control procedures.

8.2 Control pain and anxiety during treatment through the use of accepted clinical techniques and appropriate behavioral management strategies.

8.3 Select and administer the appropriate preventive and/or antimicrobial (chemotherapeutic) agents and provide pre- and post-treatment instructions.

8.4 Apply basic and advanced principles of instrumentation.

8.5 Provide dental hygiene services in a variety of settings.

Evaluation
9.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, examination techniques, and determine the appropriate maintenance schedule.

9.2 Determine the patient’s satisfaction with the dental hygiene care received and the oral health status achieved.

9.3 Compare actual outcomes to expected outcomes when expected outcomes are not achieved and modify therapy as necessary.

Instructor Information

Course Director  Kayla Reed, BSDH, MS-EDHP
Telephone number  214.828.8342
Email address  Kaylamreed11@tamu.edu
Office hours  As needed or by appointment
Office location  139C
Other faculty  Maureen Brown, RDH, MS-HIED
               Jane Cotter, RDH, MS
               Eric Fox, RDH, MS
               Alexandra Garcia, RDH, BS
               Faizan Kabani, RDH, PhD
               Lisa Mallonee, RDH, MPH, RD, LD
               Lisa Mayo, RDH, MS
               Chelsea Moorman, RDH, BSDH
               Leah Spittle, RDH, MS-EDHP
               Mary T. Vu, RDH, MS
               Leigh Ann Wyatt, BSDH, MA, MS
Textbook and/or Resource Material

- Texas A&M College of Dentistry Clinic Manual
- Dental Hygiene Clinic Handbook
- Lexicomp online for Dentistry. Access via College Library.

Grading Policies

Evaluation Criteria/Methods:
All performance will be evaluated using the “Standards for Clinical Performance” found in the Dental Hygiene Clinic Handbook.

<table>
<thead>
<tr>
<th>ASSESSMENT CATEGORY</th>
<th>VALUE</th>
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<tbody>
<tr>
<td>Health History</td>
<td>11%</td>
</tr>
<tr>
<td>Extra/Intra Oral Examination</td>
<td>11%</td>
</tr>
<tr>
<td>Dental Charting</td>
<td>7%</td>
</tr>
<tr>
<td>Periodontal Charting</td>
<td>9%</td>
</tr>
<tr>
<td>Treatment Planning</td>
<td>7%</td>
</tr>
<tr>
<td>Instrumentation</td>
<td>10%</td>
</tr>
<tr>
<td>Clinical Management</td>
<td>10%</td>
</tr>
<tr>
<td>Aseptic Technique*</td>
<td>5%</td>
</tr>
<tr>
<td>Clinical Conduct</td>
<td>10%</td>
</tr>
<tr>
<td>Implementation of Educational Services</td>
<td>2%</td>
</tr>
<tr>
<td>Hard Deposit Removal</td>
<td>9%</td>
</tr>
<tr>
<td>Soft Deposit Removal</td>
<td>9%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100%</td>
</tr>
</tbody>
</table>

Note: Final course grades will not be curved or rounded.

*The following are the consequences for receiving a U in Aseptic Technique. The U’s are cumulative beginning with DDHS 3830 Clinical Dental Hygiene I:
- First offense – Discuss error with supervising clinic faculty at end of clinic session.
- Second offense – Same as first offense and meet with Clinic Coordinator within 48 hours of receiving error.
- Third offense – Same as second offense. In addition, one (1) point will be deducted from final grade. Also, an infection control topic will be given and the student will be required to write a paper on the chosen topic.
- Four+ offenses – One (1) point will be deducted from final grade for each offense and the student will be required to write a paper for each U received in aseptic technique. Topic(s) will be chosen by the clinic coordinator.

The final clinic grade for the course will reflect a 4 point deduction for each incomplete clinical service requirement, incomplete competency examination and each incomplete patient requirement. All incomplete requirements must be completed during the following semester.

Any student completing extra patients or clinic service requirements over the minimum requirements may carry over to satisfy requirements for the next semester. Competency examinations can only be completed in the semester they are assigned.
Grading Scale

Texas A&M College of Dentistry Grading Scale:

A  90-100       B  80-89       C  75-79       D  70-74       F  <70

Clinic Policies and Procedures

Course Requirements:
To receive full credit, all of the following must be completed by Thursday, July 22, 2021:
1. Complete comprehensive dental hygiene services on at least four (4) patients with Healthy, Gingivitis or Slight (Stage I) Periodontitis classification.
2. Receive an instructional experience with a DH faculty on a moderate patient (if applicable).
3. Complete the seven (7) clinical competency examinations listed on the competency form.
4. Complete two (2) fluoride treatments to competency. Faculty must supervise entire procedure to prove competency.
5. Complete one (1) set (maxillary/mandibular) of alginate impressions on a DH student.
   a. The focus this semester is taking an acceptable impression.
   b. This semester it is not necessary to take both the maxillary and the mandibular impression on the same person.
   c. If the stock trays do not fit your patient (e.g. tori, exostosis), see Prof. Fox for a moldable alginate tray.
6. Canvas Discussion Board and Syllabus Quiz (All or none for requirement)
   a. Complete Syllabus Quiz
   b. Complete 3 Discussion Board posts regarding clinical progress
   c. Complete 2 peer responses per Discussion Board post
7. Exhibit professionalism at an acceptable level as determined by the observing/supervising faculty. Unprofessional conduct (See Professionalism - Standard 14) will be documented in the form of a written reprimand and given to the Clinic Coordinator. At the first occurrence, the student will meet with the observing/supervising faculty and the Clinic Coordinator, also, the Program Director will be notified. At the second occurrence, the student will meet with the Clinic Coordinator and the Program Director. On the third occurrence, the student will meet with the Clinic Coordinator and the Program Director, also, the student’s final grade will be lowered by one letter grade.

Any unprofessional conduct may be subject to the College’s due process procedures set forth in the “Texas A&M College of Dentistry Disciplinary Due Process Document” found at: https://intranet.dentistry.tamhsc.edu/student-resources/index.html

Unprofessional conduct subject to the Disciplinary Due Process Document will result in a permanent letter placed in the student’s file and sent to Associate Dean of Student Affairs. Such infractions will be cumulative for the student’s time here at the College.

NOTE: Patients must be completed to count toward course requirements.

Students must complete a minimum of 3 patients and obtain a 70% average to be passed to the next clinical course level; however, points will be lost for not completing the required amount of patients for the semester.

A completed patient will count toward the patient load requirement if all quadrants are completed and 3 of the 4 quadrants are in the acceptable range for hard and soft deposit removal.

Half patient credit will count toward the patient load requirement if the patient is completed and 2 of the 4 quadrants are in the acceptable range for hard and soft deposit removal.

Patients with a classification of Stage II Periodontitis or Stage III/IV Periodontitis may be divided to satisfy Gingivitis or Stage I Periodontitis requirements as follows:

Stage II Perio = two (2) Healthy/Gingivitis/Stage I Perio patients
Stage III/IV = one (1) Stage II Perio patient AND one (1) Healthy/Gingivitis/Stage I Perio patient

Refer to the COD Clinic Manual and the Dental Hygiene Clinic Handbook for the entire list of clinic policies and procedures.

**Program Requirements:**
The student must complete the following requirements to competence* prior to graduation:

1. (2) Children between the ages of 0-12
2. (2) Adolescents between the ages of 13-19
3. (2) Special Needs Patients
4. (5) Adults between the ages of 20-64
5. (5) Geriatric patients ages 65+

*Competence is defined as no more than 1 error on the clinic evaluation sheet(s) in the categories of #1-#11 and #13, and zero (0) errors in #12 (hard/soft deposit) for all appointments with the patient.

**Other Pertinent Course Information**

**Attendance Policy:**
Attendance is required at all assigned clinical sessions as if in private practice. If the student does not have a patient for the session, they are required to participate in a clinical activity approved by their supervising clinical faculty. These activities include but are not limited to:

- Practicing using the air polisher on a classmate
- Practicing taking alginate impressions on a classmate
- Observing/assisting a dental student in their designated group practice to become more familiar with dental procedures.
- Sharpening instruments (after sharpening lab)
- Observing/assisting grad perio residents (check in with grad perio front desk)
- Assisting Lisa Pradarits with front desk duties
- Participating in the Dental or DH Screening process

The rotation/clinic form **must** be completed and signed by faculty or else the clinic session will be counted as an unexcused absence. All of the clinic session time MUST be accounted for.

There are two (2) forms that are acceptable for proof of clinic attendance. These forms include:

1. Clinic grade sheet duplicate form
2. Rotation/Clinic form

*The rotation/clinic form is used if the student is assigned to clinic ("C" on clinic schedule) and the patient no-shows or cancels at the last minute.

Your rotation sheet is required to be uploaded to the Google Drive on Canvas in the appropriate folder by the end of the week the rotation is completed; failure to do so may result in deduction of points from your final grade. The paper form still needs to be turned in.

Pam Hines will contact the student by axiUm email if the appropriate form has not been turned in. The student will have seven (7) days to turn in the form requested. If the student needs to be contacted more than twice, one (1) point may be deducted from the final grade. If the student cannot produce the appropriate attendance form seven (7) days after the 2nd notice, that clinic session will be considered unexcused, resulting in a four (4) deduction from the final clinic grade.

Additionally, students are to attend each rotation indicated on the schedule and complete the task assigned. A student who is absent from an assigned clinic rotation for any reason must schedule a make-up assignment through the Clinic Coordinator. This may result in a loss of scheduled clinic time during the next semester in order to make up the rotation.

Unexcused absences will result in a four (4) point deduction from the final grade for each missed clinical session. Two (2) unexcused absences without notice from clinic or rotations may result in written documentation for unprofessional behavior as well as applicable point deduction. Three (3) unexcused absences will include all of the above as well as possible failure of the course.
If a student knows in advance they will be absent from clinic, they must fill out the form titled, “Planned Absence or Clinic/Rotation Exchange.” These forms can be found in the student lounge or in the DH Clinic Handbook. Once filled out, bring to the Clinic Coordinator for approval.

For any rotation switches or missed clinic days, the “Planned Absence or Clinic/Rotation Exchange” form must be completed at least two (2) weeks or ten (10) business days prior to the date. Each student will only be allowed one (1) rotation switch per semester and must be for a legitimate reason. All exchanges will need to be approved by the Clinic Coordinator prior to scheduling the patient.

The student is required to have a patient for every clinic session. If a student does not have a patient scheduled for a clinic session, and it is discovered this empty appointment could have been prevented by better management of the schedule by the student, a point may be deducted off the student’s final grade for each time this occurs. A discussion will take place between the Clinic Coordinator, the AA4, and the student to discover the reason for the lack of a patient. A point deduction may also happen if other poor scheduling decisions are made by the student, especially if they affect a patient in a negative way.

**Absence Protocol:**
Professional responsibility is an important component of being a healthcare professional. In the case of a clinic absence, you must call Pam Hines (214-828-8340) and Lisa Pradarits (214-828-8421) to leave a voicemail message. This must be done by 8:00 AM, earlier if possible, so that your patient/rotation can be notified. In addition, an email may be sent as a secondary form of contact but a phone call will need to take place first.

**Tardy Protocol:**
On the rare occasion, you may be delayed for some unavoidable reason. In the case of a delay, you must call Pam Hines (214-828-8340) and Lisa Pradarits (214-828-8421) to leave a voicemail message. Failure to do this may be reflected in your clinical grade under Clinical Conduct for that patient or under Professionalism for a rotation.

**Remediation Policy:**
Remediation will take place in the following semester and will put the student one semester behind for graduation.

**Final Advising/Professional Conduct**
At the end of each semester, the student will meet with the Clinic Coordinator for Final Advising to ensure all requirements are completed and all patients assigned to the student are accounted for. Final advising is scheduled for Friday July 23, 2021. Students must be present on campus to participate in final advising. Students are expected to come organized and well-prepared.

**Four (4) points** will be deducted from the final grade if one or more of the following occurs:

- The student arrives after their appointed time.
- The student runs over their assigned appointment time.
- The student has to return at another time or day to complete their Final Advising session.
- The student has more than 5 patients “in progress.” This will be evaluated on a case-by-case basis.
  - If it is found that any of the patients left “in progress” were not completed in a timely manner due to the student’s inability to schedule properly, a letter for Unprofessional Conduct may also be written and put in the student’s record. Please read the section under “Clinic Policies and Procedures” regarding professional maturity for further explanation.
- Patients “in progress” from the previous semester have not been completed and/or accounted for.
- “Completed Patient Report” is inaccurate.
- Grades for each completed quadrant have not been entered into axiUUm accurately for all completed patients.
- One or more patients “in progress” do not appear on the Request/Active Report.
- Previous yellow grade sheets were not available when requested.
NOTE: This list is not all-inclusive; it is up to the discretion of the Course Director to determine if other behaviors are deemed inappropriate or unprofessional and will also result in a four-point deduction to the final grade.

**Academic Integrity Statement and Policy**

“An Aggie does not lie, cheat or steal, or tolerate those who do.”

Upon accepting admission to Texas A&M University, a student immediately assumes a commitment to uphold the honor Code, to accept responsibility, and to follow the philosophy and rules of the Honor System. Students will be required to state their commitment on examinations, research papers, and other academic work. Ignorance of the rules does not exclude any member of the TAMU community from the requirements or the processes of the Honor System. For additional information, visit [http://aggiehonor.tamu.edu](http://aggiehonor.tamu.edu).

**Americans with Disabilities Act (ADA)**

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 for reasonable accommodation of their disabilities. If you believe you have a disability requiring an accommodation, please contact Associate Dean for Academic Affairs in charge of Disability Services, Room 514, or call 214-828-8208 for more information. For additional information, visit [http://disability.tamu.edu](http://disability.tamu.edu).

**Mental Health and Wellness**

**Psychological Counseling**

Up to three sessions of confidential, off-campus psychological counseling are available at no charge to all students (dental, dental hygiene and graduate) to provide adjustment counseling, brief psychotherapy and triage. Students must be referred for psychological services by the Office of Student Affairs.

All student contacts will be confidential as prescribed by state law. The Associate Dean for Student Affairs or the Director of Student Affairs may approve payment for a limited number of additional sessions if recommended by the consulting practitioner, the Student Promotions Committee or the Student Integrity Issues Committee.

If students present with difficulties requiring longer treatment, the Associate Dean for Student Affairs or the Director of Student Affairs will be notified by the consulting practitioner and the student may be referred outside this structure for consultation at his or her own expense.

**Resources**

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<thead>
<tr>
<th>Office of Student Affairs</th>
<th>Associate Dean</th>
<th>Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Room 503</td>
<td>Dr. Ernie Lacy</td>
<td>Ms. Kimberly Morgan-Thompson</td>
</tr>
</tbody>
</table>

* Psychologist
Dr. Carlos Davis
214-824-4244

* Psychiatrist
Dr. Howard Smith
972-661-0605

* Referrals Required
- Dallas Volunteer Attorney Program ([https://www.dallasbar.org/](https://www.dallasbar.org/))
- Suicide & Crisis Center of North Texas 24 hour hotline – 214-828-1000
- Dallas Rape Crisis Center 24 hour hotline - (972) 641-7273
- Genesis Women’s Shelter - (214) 389-7700
• Mental Health Resources at Texas A&M University (https://caps.tamu.edu/?q=mentalhealthresource

Syllabus Prepared 5/21
Dental and Dental Hygiene Students – PHI Disciplinary Guidelines

**Principles:** Protected health information (PHI) is confidential and protected from access, use, or disclosure except to authorized individuals requiring access to such information. Attempting to obtain or use, actually obtaining or using, or assisting others to obtain or use PHI, when unauthorized or improper, will result in counseling and/or disciplinary action up to and including termination.

**Definitions and Caveats:**
- PHI = Protected health information; this includes all forms of patient-related data including demographic information
- Depending on the nature of the breach, violations at any level may result in more severe action or termination
- Levels I-III are considered to be without malicious intent; Level IV is considered malicious intent
- At Levels II-IV, residents will be reported to the Texas State Board of Dental Examiners
- At Level IV, individuals may be subject to civil and/or criminal liability
- For any offense, a preliminary investigation will precede assignment of level of violation

<table>
<thead>
<tr>
<th>Level of Violation</th>
<th>Examples</th>
<th>Minimum Disciplinary/Corrective Action</th>
</tr>
</thead>
</table>
| **Level I**        | *Misdirected faxes, e-mails & mail.*  
*Failing to log-off or close or secure a computer with PHI displayed.*  
*Leaving a copy of PHI in a non-secure area.*  
*Dictating or discussing PHI in a non-secure area (lobby, hallway, cafeteria, elevator).*  
*Failing to redact or de-identify patient information for operational/business uses.* | *Investigation by HIPAA Compliance Officer.*  
*Referred to Associate Dean for Student Affairs.*  
*If uncontested, Associate Dean for Student Affairs applies sanction.*  
*Subsequent infractions referred to Student Faculty Review Committee.*  
*Notify Privacy Officer of all incidents.* |
| **Level II**       | *Requesting another individual to inappropriately access patient information.*  
*Inappropriate sharing of ID/password with another coworker or encouraging coworker to share ID/password.* | *Investigation by HIPAA Compliance Officer.*  
*Referred to Associate Dean for Student Affairs.*  
*If uncontested, Associate Dean for Student Affairs applies sanction.*  
*Subsequent infractions referred to Student Faculty Review Committee.*  
*Notify Privacy Officer of all incidents.* |
| **Level III**      | *Releasing or using aggregate patient data without facility approval for research, studies, publications, etc…*  
*Accessing or allowing access to PHI without having a legitimate reason.*  
*Giving an individual access to your electronic signature.*  
*Accessing patient information due to curiosity or concern, such as a family member, friend, neighbor, coworker, famous or “public” person, etc…* | *Investigated by HIPAA Compliance Officer.*  
*Referred to Associate Dean for Student Affairs.*  
*Student Faculty Review Committee hears case.*  
*Student Faculty Review Committee applies sanction.*  
*Notify Privacy Officer of all incidents.* |
| **Level IV**       | *Releasing or using data for personal gain.*  
*Compiling a mailing list to be sold for personal gain or for some personal use.*  
*Disclosure or abusive use of PHI.*  
*Tampering with or unauthorized destruction of information.* | *Investigated by HIPAA Compliance Officer.*  
*Referred to Associate Dean for Student Affairs.*  
*Student Faculty Review Committee hears case.*  
*Student Faculty Review Committee applies sanction.*  
*Notify Privacy Officer of all incidents.* |
Statement of Understanding

I, (please print name), verify that faculty has reviewed the DDHS 4820 Clinical Dental Hygiene II course syllabus with me. I understand the course expectations in the syllabus as they have been explained to me. I agree to abide by the policies and course requirements as stated in the syllabus.

________________________________________________________________________

Student Signature                          Date

Received and Reviewed by:

________________________________________________________________________

Course Director Signature                  Date