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**POLICIES AND PROCEDURES HANDBOOK  
OF THE  
PARKLAND COLLEGE  
DENTAL HYGIENE PROGRAM  
2024-2025**

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**Student Handbook**

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Welcome to the Parkland College Dental Hygiene Program. This program offers students an opportunity to learn the theory, skills, and values needed to practice as competent, licensed, and professional dental hygienists.

This Policy and Procedures Handbook has been prepared to assist you as you progress through the Parkland College Dental Hygiene Program. It is intended to be used in addition to your Clinical Handbook, Pre-Clinic Guidebook, course syllabi, and Cobra Learning Management System information.

A thorough understanding of the profession of dental hygiene and program expectations is essential for the successful completion of the program. It is your responsibility to abide by the contents of this handbook.

The handbook and the policies and procedures are subject to regular updates by the college and/or program faculty.

## **I. Parkland College Dental Hygiene Program**

### **Parkland College Mission and Purposes**

The mission of Parkland College is to engage the community in learning.

The following purposes are of equal importance in fulfilling the mission of Parkland College:

Serve students by providing:

- High-quality and responsive developmental, technical-vocation, transfer, and lifelong education programs;
- High-quality and responsive support services
- A climate throughout the college that values and promotes integrity, inquiry, diversity, inclusion, active citizenship, global awareness, and academic freedom

Serve employees by providing a supportive and responsive work environment. Serve the larger community by providing services and resources that promote the intellectual, cultural, and economic development of Illinois Community College District 505.

### **Parkland Statement of Core Values**

As an institution of learning, Parkland College cultivates inquiry, practical application of knowledge, and broad enrichment across our community. The following values are important to the fulfillment of Parkland College's mission to provide programs and services of high quality to our students and community.

#### ▪ **Honesty and Integrity**

In our daily operations, our classrooms, and all of our interactions, it is essential that we communicate openly, truthfully, and without hypocrisy.

#### ▪ **Fairness and Just Treatment**

We advocate and strive for respect, equity, and justice in all of our operations and proceedings.

#### ▪ **Responsibility**

We believe that employees and students are personally and mutually accountable for their actions as they carry out their duties. We understand the need to balance the pursuit of our own well-being with concern for others. Likewise, we understand the importance of balancing personal accountability with graciousness in the acceptance of help from others.

#### ▪ **Multiculturalism**

We celebrate the diversity in both our community and our world. Our goal is to recognize,

promote, utilize, and educate one another regarding the unique qualities and shared humanity of all people and cultures.

▪ **Education**

We provide a forum for innovation, critical thinking, open inquiry, and lifelong learning opportunities.

▪ **Public Trust**

In our efforts to serve the community, we honor the trust placed in us by our citizenry. We also rely on our community to guide and advise us as we continue to serve its needs.

**Parkland College Civility Statement**

Our College Core Values of fair and just treatment and responsibility serve as guide posts for civility. Parkland College is committed to campus wide civility by cultivating a community where the faculty, staff, and students:

- Respect people and property
- Show empathy and tolerance
- Demonstrate concern for and fairness towards others
- Employ critical thinking and patience
- Accept accountability for their actions.

**Health Professions Structure**

Parkland College Health Professions is comprised of 17 career areas. Each career areas is managed by a program director. Didactic (lecture), lab and clinical portions of the career areas are taught by full and part-time faculty. Students have the right to be heard and to appeal decisions made by the program director and/or faculty. Students who wish to appeal a grade or have a situation that needs attention, the student should follow the Health Professions Chain of Command.

1. Course lecture, lab, or clinical faculty,
2. Course coordinator (often the lecture faculty in a lecture, lab, and clinical course).
3. Program Director
4. Health Professions Faculty Chair
5. Professional Council on Academic Evaluation/Hearing
6. Health Professions Dean

If not resolved, follow the Parkland College Student Policies and Procedures found on the

<https://www.parkland.edu/Audience/Current-Students/Student-Policies-Procedures>

**Statement on Health Profession Policies and Policy Compliance**

The Dental Hygiene program complies with all student policies and procedures approved by the Parkland College Board of Trustees, including the Student Conduct Code, Student Grievance Policies and Procedures, Student Rights and Responsibilities, and Student Dismissal. (Refer to current college catalog and student policies and procedures:

<http://www.parkland.edu/studentLife/policies>

In addition to College policies, the Health Professions division has developed a set of policies for Health Profession students. The Health Professions division publishes policies that adhere to

principles of quality educational practice as well as policies that protect the students, faculty and patients or clients. Health Profession policies are available on Cobra in every Health Professions course. If a policy or procedure changes after publications are printed or viewed, the web version of that document is updated immediately and will be considered the most updated and the version that will be followed.

## **Parkland College Dental Hygiene Program**

### **Dental Hygiene Program Accreditation-CODA**

The Parkland College Dental Hygiene Program is accredited by the Commission on Dental Accreditation and has been granted accreditation status of “approval without reporting requirements.” The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611. The Commission’s web address <http://www.ada.org/en/coda>

### **Dental Hygiene Philosophy, Goals and Values**

The present statement of philosophy of the Dental Hygiene Program is consistent with that of Parkland College. The purpose of the Dental Hygiene Program is to provide a balanced curriculum of general education and dental hygiene knowledge and skills, which will enable qualified persons to become dental hygiene practitioners in a variety of settings.

In keeping with the philosophy of Parkland College, the Dental Hygiene Program faculty believe the student is a unique, thinking, feeling individual. The role of the faculty is to facilitate the student’s optimal intellectual and professional development.

Education is a social process in which the instructors strive to pass on standards of their professions to their students. The Dental Hygiene Program faculty believes that each student should render his/her best service at all times in order to advance the public interest. Through their guidance, the faculty hope that each student will develop an appreciation for quality dental health care and will strive at all times to provide this care for his/her patients.

### **Humanistic Teaching Statement**

The Parkland Dental Hygiene Program is dedicated to cultivating a nurturing and inclusive learning environment where students are empowered to achieve academic excellence, professional integrity, and compassionate patient care. Aligned with the Commission on Dental Accreditation (CODA) standards, we provide a rigorous and comprehensive curriculum that integrates the latest scientific knowledge and clinical practices. We believe in treating every patient with dignity, respect, and empathy, fostering strong patient-provider relationships based on trust and mutual respect. Upholding the highest ethical standards, our program instills honesty, accountability, and responsibility in all professional interactions. We emphasize lifelong learning and professional development while recognizing the importance of community involvement through outreach programs and public health initiatives. By celebrating diversity and promoting cultural competence, we create a supportive atmosphere where everyone feels valued and empowered to succeed. Our commitment to CODA standards ensures that graduates are well-prepared to meet the challenges of the profession and contribute to the health and well-being of the communities they serve.

## **Values Defining Professionalism In Dental Education**

The Parkland College Dental Hygiene Program Faculty follows the *ADEA Statement on Professionalism in Dental Education*, approved in 2009 by the ADEA House of Delegates and the American Dental Hygienists' Association Code of Ethics, 2007-2008.

**Competence:** Acquiring and maintaining the high level of special knowledge, technical ability, and professional behavior necessary for the provision of clinical care to patients and for effective functioning in the dental education environment

**Fairness:** Demonstrating consistency and even-handedness in dealings with others.

**Integrity:** Being honest and demonstrating congruence between one's values, words, and actions.

**Responsibility:** Being accountable for one's actions and recognizing and acting upon the special obligations to others that one assumes in joining a profession.

**Respect:** Honoring the worth of others.

**Service-mindedness:** Acting for the benefit of the patients and the public we serve, and approaching those served with compassion.

## **The Parkland College Dental Hygiene Program Goals**

1. The program will provide career education to prepare entry-level dental hygienists. The students will possess the knowledge, skills, values and ethics to practice the dental hygiene process of care. (Teaching, Patient Care, Research, Service)
2. The program will provide the community with excellent dental hygiene patient care that is in the best interest of the patient, appropriate and complete. (Teaching, Patient care, Research, Service)
3. The program will provide instruction in research principles, research analysis and interpretation to enable a commitment to evidence-based decision making and lifelong learning. (Teaching, Patient Care, Research)
4. The program will promote beneficence by participation in community health promotion and outreach services. (Teaching, Patient Care, Service)

## **Scope of Practice of Dental Hygienists Standards for Clinical Dental Hygiene Practice, 2016**

Dental hygiene practice as defined by the American Dental Hygiene Association, "Standards for Clinical Dental Hygiene Practice" revised 2016, states, "Dental hygiene is the science and practice of recognition, prevention and treatment of oral diseases and conditions as an integral component of total health. The dental hygienist is a primary care oral health professional who has graduated from an accredited dental hygiene program in an institution of higher education, licensed in dental hygiene to provide education, assessment, research, administrative, diagnostic, preventive and therapeutic services that support overall health through the promotion of optimal oral health. In practice, dental hygienists integrate multiple roles to prevent oral diseases and promote health."

Dental hygienists work in partnership with all members of the dental team. Dentists and dental hygienists practice together as colleagues, each offering professional expertise for the goal of providing optimum oral health care to the public. The distinct roles of the dental hygienist and dentist complement and augment the effectiveness of each professional and contribute to a collaborative environment. Dental hygienists are viewed as experts in their field; are consulted about appropriate dental hygiene interventions; are expected to make clinical dental hygiene decisions; and are expected to plan,

implement, and evaluate the dental hygiene component of the overall care plan. All states define their specific dental hygiene practice scope and licensure requirements.

Dental hygienists can apply their professional knowledge and skill in a variety of work settings as clinicians, educators, researchers, administrators, entrepreneurs, and public health professionals, and as employees in corporate settings. The private dental office continues to be the primary place of employment for dental hygienists. However, never before has there been more opportunity for professional growth. Clinical dental hygienists may be employed in a variety of health care settings including, but not limited to, private dental offices, schools, public health clinics, hospitals, managed care organizations, correctional institutions, or nursing homes.

## **Parkland College Graduates' Competencies for Entry-Level Dental Hygienists**

### **I. Core Competencies**

#### **CC1. Professionalism**

1. Apply professional values and ethics in all endeavors
2. Adhere to accreditation standards and federal, state and local laws and regulations
3. Promote quality assurance practices based on accepted standards of care
4. Demonstrate interpersonal skills to effectively communicate and collaborate with professionals and patients across socioeconomic and cultural backgrounds.

#### **CC2. Safety**

1. Comply with local, state and federal regulations concerning infection control protocols for blood-borne and respiratory pathogens, other infectious diseases and hazardous materials.
2. Follow manufacturer's recommendations related to material and equipment used in practice.
3. Establish and enforces mechanisms to ensure the management of emergencies
4. Use security guidelines and compliance training to create and maintain a safe, eco-friendly and sustainable practice compatible with emerging trends.
5. Ensure a humanistic approach to care by upholding a respectful and emotionally safe environment for patients and practitioners.

#### **CC3. Critical Thinking**

1. Demonstrate critical and analytical reasoning to identify and develop comprehensive oral health care solutions and protocols.
2. Apply individual and population risk factors, social determinants of health and scientific research to promote improved health and enhanced quality of life.



#### CC4. Scientific Inquiry and Research.

1. Support research activities and develop research skills.
2. Use evidence-based decision making to evaluate and implement health care strategies aligned with emerging trends to achieve high quality, cost effective and humanistic care.
3. Integrate accepted scientific theories and research into educational, preventive and therapeutic oral health services.

#### CC5. Health Education and Community Connection

1. Endorse health literacy and disease prevention.
2. Communicate and provide health education and oral self-care to diverse populations.
3. Promote the values of the dental profession through service-based activities
4. Evaluate outcomes of future activities supporting health and wellness of individuals and communities.

#### CC6. Advocacy

1. Promote an ethical and equitable patient care and practice environment by demonstrating inclusion of diverse beliefs and values.
2. Uphold civic and social engagement through active involvement in professional affiliation to advance oral health.

#### CC7. Professional Growth

1. Commit to lifelong learning for professional and career opportunities in a variety of roles and settings.
2. Engage in research, education, industry involvement technological and professional developments and/or advanced degrees.
3. Demonstrate self-awareness through reflective assessment for continued improvement.

#### CC8. Business Practice

1. Facilitate referrals to and consultations with relevant health care providers and other professionals to promote equitable and optimal patient care.
2. Create and maintain comprehensive, timely and accurate records.
3. Protect privacy, confidentiality and security of the patients and practices by complying with legislation, practice standards, ethics and organizational policies.

## II. Person Centered Care

### DH1. Assessment

1. Accurately collect and document comprehensive medical, dental social health history and diagnostic data.
2. Critically analyze all collected data
3. Identify predisposing, etiologic, environmental and social risk factors for person-centered care.

### DH2. Dental Hygiene Diagnosis

1. Analyze comprehensive medical, dental and social health history.
2. Integrate observational and diagnostic data as a part of the dental hygiene diagnosis.
3. Use predisposing, etiologic, environmental and social risk factors for person-centered care.

### DH3. Planning

1. Use the patient's assessment to establish an optimal and realistic, person-centered, dental hygiene care plan through mutual communication.
2. Use all aspects of the dental hygiene diagnosis in combination with the person's values, beliefs, and preferences to develop a dental hygiene care plan through shared decision-making.

### DH4. Implementation

1. Obtain informed consent based on the agreed-upon treatment plan.
2. Execute individualized treatment based on the patient's dental hygiene diagnosis.
3. Integrate educational, preventative and therapeutic services to provide comprehensive person-centered care.
4. Continuously re-evaluate for modifications to achieve desired outcomes.

### DH5. Evaluation and Documentation

1. Evaluate the effectiveness of completed services.
2. Analyze treatment outcomes of the dental hygiene process of care to determine improved health and modifications.
3. Modify dental hygiene care plans as necessary to meet goals of patient and clinician.
4. Identify necessary referrals for success of the treatment outcomes, including intraprofessional and interprofessional health care providers, supporting professionals and patient advocates.
5. Accurately document assessment findings and data, dental hygiene diagnosis and care plan, implementation outcome evaluation and any communication between professional, patient, and anyone else in the circle of care.

The Parkland College Dental Hygiene Faculty evaluated and modified the statements to reflect our values when practicing dental hygiene. Because the faculty believes that the values listed are fundamental to the practice of dental hygiene, the students will be evaluated according to these values each semester. Students will be able to learn their strengths and begin to improve on any weaknesses. Students are expected to demonstrate competence of the knowledge and values of the following dental hygiene professional standards.

1. Exposure Control-Values the dental hygienist's role in preventing disease transmission clinicians and all members of the dental team as demonstrated by:
  - Following established guidelines in the Parkland College Clinical Handbook, the Policy and Procedures Handbook, the Centers for Disease Control and Prevention (CDC) Infectious Disease Control Guidelines, and current Occupational Safety and Health Administration (OSHA) mandates.
  - Promoting disease transmission prevention by all persons using the clinical facilities.
2. Initiative-Values the need for being dependable and self-directing when performing dental hygiene treatment or other duties as demonstrated by:
  - Being prompt and punctual for clinical sessions
  - Being prepared for patient treatment procedures
  - Requiring minimal help or direction from instructors for routine tasks
  - Using unscheduled time to maintain equipment, assist the clinic assistant (CA) or other clinicians.
3. Dental Hygiene Treatment-Values the need for being efficient and thorough when performing dental hygiene treatment and other duties as demonstrated by:
  - Using initiative to perform appropriate procedures without direct supervision
  - Using effective patient/operator positioning
  - Using sharp, well-maintained instruments
  - Applying time/motion management skills
  - Anticipating the need for and securing the appropriate forms and documentation
4. Medical History/Emergencies-Values the dental hygienist's role in preventing and managing emergencies as demonstrated by:
  - Maintaining CPR BLS certification
  - Reviewing the medical history prior to treatment to screen for medical conditions that may lead to an emergency situation (i.e. high blood pressure, asthma, allergies, etc.)
  - Informing the instructor and dentist of a medical condition that may lead to an emergency situation.
  - Acting to prevent the development of a condition that may jeopardize a patient's health.
  - Postponing treatment for patients when an active disease state exists
5. Documentation-Values thorough documentation of patient assessment, dental hygiene diagnosis, treatment planning, treatment implementation, treatment evaluation and self-evaluation of treatment rendered as demonstrated by:
  - Completing and updating the summary of the oral condition
  - Formulating, recording and modifying as necessary an appropriate treatment plan for each individual based on the assessment.
  - Evaluating the results of dental hygiene care and any necessary changes.

- Self-evaluating technical skill and patient care decisions, as appropriate.
  - Reviewing all documentation with an instructor or dentist, as appropriate. Recommending further patient care based on
6. Standard of Care-Values the patient's right to dental hygiene treatment consistently provided at an acceptable standard of care as demonstrated by:
- Providing each patient with appropriate information and education necessary to make informed decisions about their oral care.
  - Including and encouraging each patient to participate in making decisions about treatment procedures, goals and individual homecare.
  - Causing no unnecessary discomfort to the patient during treatment.
  - Limiting personal conversations and remaining focused on the treatment during instructor/patient interactions.
7. Professional/Ethical Behavior-Values the principles of professional and ethical behavior when providing patient care and interacting with all members of the healthcare team as demonstrated by:
- Being respectful in all interactions.
  - Being non-prejudicial in all interactions.
  - Being kind and compassionate in all interactions.
  - Placing patient's needs above one's own needs.
  - Showing concern for quality patient care over concern for a grade.
  - Being honest in all dealings with patients, peers, faculty and staff.
  - Respecting the confidentiality of patient records.
  - Accepting responsibility for one's own actions

## Dental Hygiene Program Page

### **DENTAL HYGIENE**

Health Career Admissions Program Code: G.DHG.AAS

#### **Associate in Applied Science (A.A.S.)**

Graduation requirement — 78.5 semester hours

The Dental Hygiene Program prepares students to become part of the dental health team. The dental hygienist is responsible for providing such services as scaling and polishing teeth, taking radiographs, applying fluoride and surface sealants to the teeth, and local anesthesia and conscious sedation. The dental hygienist is the primary oral health educator in clinical and nonclinical settings. The program is accredited by the Commission on Dental Accreditation, American Dental Association. For state licensure, Graduates must successfully complete a National Dental Hygiene Board Examination and a Regional (clinical) Board Examination.

#### **Program Notes\***

- This program prepares students to meet the educational requirements for licensure in the state of Illinois. Parkland College has not yet determined that this program meets the requirements for licensure of any other state.
- This is a selective admissions program — students must be admitted into the program before taking DHG courses. See the selective admissions page for more information regarding admission, progression, and graduation.
- To be admitted to the program, students must have current placement out of MAT 072, and must place out of ENG 099 and CCS 099.
- A selective admission score of 275 or above must be attained to be considered for admission. A rubric will be applied and additional points will be given for a number of required General Education and Science courses completed or in progress.
- TOEFL iBT requirements in reading, listening, speaking, and writing are as follows: 21-21-26-23.
- IELTS requirements in reading, listening, speaking, and writing are as follows: 6.5; 6.5; 7.5-8; 6.
- CHE 100 or any college-level transferable chemistry course can be substituted for CHE 106.
- ALH 196 is an optional course for Board review.

Graduation requirements are as follows:

- Minimum 2.0 PGPA and a C or higher for all program courses, and pass all DHG clinical and didactic courses with a 75 percent or higher.
- Students who have been dismissed from a clinical site may receive a clinical failure.
- Clinical and lab courses have specific proficiencies and patient completion requirements that must be met each semester to continue and graduate from the program.
- Students must adhere to all ethical and professional behavioral policies of the American Dental Hygienists' Association Code of Ethics in order to progress and graduate.

#### **Suggested Full-time Sequence**

SUMMER	FALL	SPRING
BIO 121	1st Semester	2nd Semester
	DHG 110	DHG 115
	DHG 111	DHG 116
	DHG 113	DHG 117
	DHG 114	DHG 118
	BIO 122	DHG 119
		BIO 123
		COM 103
SUMMER	FALL	SPRING
DHG 211	3rd Semester	4th Semester
DHG 212	DHG 210	DHG 219
DHG 215	DHG 214	DHG 235
DHG 216	DHG 217	DHG 236
	DHG 218	DHG 237
	DHG 230	CHE 106
	DHG 233	PSY 101
	ENG 101	SOC 101

#### **Required Program Courses (61.5 hours) Cr. Hrs.**

BIO 121	Anatomy and Physiology I	4
BIO 122	Anatomy and Physiology II	4
BIO 123	Microbiology	4
DHG 110	Applied Head and Neck Anatomy	2
DHG 111	Oral and Dental Anatomy, Histology and Embryology	3
DHG 113	Introduction to Prevention	1
DHG 114	Pre-Clinic	5
DHG 115	Seminar I	1
DHG 116	Clinic I	2
DHG 117	Dental Radiology I	3
DHG 118	Pharmacology for the Dental Hygienist	2
DHG 119	Alterations of Oral Structures	2
DHG 210	Periodontology	2
DHG 211	Local Anesthesia	15
DHG 212	Dental Materials	3
DHG 214	Nitrous Oxide/Oxygen Sedation	1
DHG 215	Clinic II	2
DHG 216	Seminar II	1
DHG 217	Seminar III	2
DHG 218	Clinic III	4
DHG 219	Clinic IV	4
DHG 230	Community Dental Health	3
DHG 233	Dietary Analysis and Preventive Counseling	2
DHG 235	Seminar IV	1
DHG 236	Ethics and Jurisprudence	1
DHG 237	Licensure/Transition to RDH	1

#### **Required General Education Courses (17 hours)**

CHE 106	Chemistry for Health Professions	4
COM 103	Introduction to Public Speaking	3
ENG 101	Composition I	3
PSY 101	Introduction to Psychology	4
SOC 101	Introduction to Sociology	3

Total Semester Credit Hours 78.5

#### **Optional Course**

(offered spring semester to second year students)

ALH 196	Dental Hygiene Board Exam Prep	2
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## **I. Admission Policies**

### **Scoring Criteria and Prerequisites**

When seeking entrance to a health professions program, it is strongly recommended that you work closely with a Health Professions Academic Advisor, Faculty Chair, or Program Director.

Students who wish to apply for transfer credit toward a Health Professions degree or certificate should verify acceptable credits before applying to the program by sending official transcripts to Parkland College Admissions and Records and requesting a transcript evaluation. Only undergraduate credit from regionally accredited institutions is accepted for scoring.

Program scoring and prerequisites are individual to each program, but general scoring guidelines are listed in the catalog. Program catalog pages list the selective admissions score needed to be eligible for each program.

**Essential Qualifications and Accommodations Guidelines for Health Professions** The Program has an institutional commitment to provide equal educational opportunities for qualified students with disabilities who apply for admission to the program. The College has a responsibility for the safety of the patients and students. Each program has an Essential Qualification list that should be reviewed before applying to the program. The Essential Qualification list in conjunction with academic standards are requirements for admission, promotion and graduation. Candidates with questions regarding the Essential Qualifications are encouraged to contact Accessibility Services at Parkland College prior to the start of the program. Compliance with state and federal laws and regulations (including the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990) is necessary and admitted candidates with disabilities are reviewed individually, on a case- by-case basis. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if making it requires a substantial modification in an essential element of the curriculum.

## PARKLAND COLLEGE DENTAL HYGIENE PROGRAM ESSENTIAL QUALIFICATIONS

Students matriculating in and graduating from a Parkland College Dental Hygiene health career program must be able to meet the Essential Qualifications of the program and must not pose a threat to the well-being of patients, other students, staff, or themselves. As an incoming dental hygiene student you will need, at a minimum, the following types of skills and abilities and will need to maintain and demonstrate these abilities throughout the program.

Students are encouraged to discuss their specific academic needs with the course instructor/program director prior to beginning a course of study. Consultation between Accessibility Services, the student and the program director are encouraged in order to address concerns.

Essential Qualifications	Behaviors
Cognitive	<ul style="list-style-type: none"> <li>• Learn and perform quickly without repetition of instructions.</li> <li>• Utilize a variety of teaching/learning methods and strategies in both individual and collaborative learning situations.</li> <li>• Engage in decision-making and problem-solve in stressful situations.</li> <li>• Access, evaluate, and use a variety of information resources such as library services, electronic catalogs, databases in an efficient, ethical and legal manner.</li> <li>• Demonstrate the ability to self-reflect and respond to feedback. Comp I, II, III</li> </ul>
Affective	Demonstrate <b>professional attitudes</b> including but not limited to excellence, <b>accountability, initiative, responsibility, honesty, service, integrity, respect</b> for others and <b>compassion</b> . Comp I.A, D, II, III
Psychomotor	Stoop, bend, reach, pull and push with full range of motion of body joints. Sit for long periods of time. Repeat same motions. Maintain adequate skin integrity, without the presence of open, weeping lesions of the skin. Provide direct patient care and cardiopulmonary resuscitation (as needed). Distinguish right from left. Utilize fine motor skills, such as finger dexterity and eye-hand coordination for manipulation of the x-ray equipment, to grasp and hold a variety of dental instruments, to perform data entry on a computer, for patient assistance and written communication. Comp II
Communication	Utilize the English language to <b>communicate effectively</b> in a rational, coherent manner with others, both orally and in writing, with individuals of all professions and social levels. Comp I.B, II, III
Sensory/Observation	Examine and critically analyze images or other forms of output created by diagnostic equipment. Observe and assess a patient with functional visual and auditory acuity to sufficiently assist and perform diagnostic procedures. Effectively attend to multiple features of a task, while focusing on personal and/or group interaction, and use divided/alternating attention between two or more tasks in a quick and safe manner. Comp II
Behavioral/Emotional	Maintain composure when subjected to high stress levels. Respond in an emotionally controlled manner in learning situations and emergencies. Refrain from intoxication or personal misuse of any drugs in such a manner as to adversely affect performance or activities in the classroom, lab or clinical setting. Comp II

Professional Conduct	Organize and efficiently use time to prepare for class and clinical. Maintain punctuality, positive work attitude and respect for others, professionalism and the ability to interact with persons of diverse backgrounds. Access transportation to attend classes and clinical assignments in a timely manner. Recognize and abide by the ADHA Code of ethics regarding education, licensure, quality patient care, and responsibility of actions toward ourselves, family, friends, clients, colleagues, employers, community and society. Deliver appropriate and compassionate care to all patients, maintaining honesty and confidentiality. Commit to lifelong learning to maintain competence. Comp I, II, III
Criminal Background Checks	No disqualifying conditions according to IDFPR which may prevent Illinois state licensure at time of application.
<p>If you have any concerns regarding these standards, please contact Peg Boyce, Program Director at 351-2386 or by email at <a href="mailto:pboyce@parkland.edu">pboyce@parkland.edu</a>  Updated 1/2019</p>	



### **Required Spoken and Written English**

Spoken and written language skills are critical to student success in clinical courses. Accurate communication between the student and patients and families, care providers, physicians, all hospital employees, and faculty is essential to patient safety. It is always with the safety of the patient in mind that the Spoken and Written English Policy/Procedure was developed. The Spoken and Written Policy is available on all Health Professions Cobra courses or available upon request.

Students will be required to take the TOEFL iBT or IELTS Assessment prior to admission to a Health Professions program. Students must meet the minimum subset scores required by the program in reading, listening, speaking, and writing in order to qualify for the program. See the catalogue for the minimum subset numbers. Students are not accepted to a Health Profession Program until they have qualified by meeting all requirements of the program.

Because English language skills develop with practice over time, TOEFL scores will only be accepted six months apart, and after the student's performance plan is implemented. Any scores more frequent will not be accepted.

### **Advanced Standing: Transfer or Credit**

Students requesting advance standing via transfer or credits from another dental hygiene program will be considered for admission if the following requirements are met:

1. Previous program was accredited by the American Dental Association Commission on Accreditation.
2. Student's GPA is "B" or above in the Dental Hygiene courses
3. No more than three years has lapsed since attendance in previous program
4. The number of credit hours for each course is equivalent to those required in the Parkland College Dental Hygiene Program.

Students must submit a request for admission, in writing, to the program director.

Students must forward a copy of transcripts and the previous program's dental hygiene catalog page from the college they attended to the program director. Faculty may request syllabi from each course completed.

The faculty may place certain requirements on the student which must be fulfilled prior to admission, i.e., completion of BIO 122 with a "C" or better grade, counseling, attendance records, etc. The following options may apply to course work:

1. Lecture content proficiency exam can be taken if student has previously achieved at least a "C" or better grade in a course with the same or similar title and description.
2. Laboratory experience must be completed as an Independent Study
3. No proficiency credit is given
4. Laboratory proficiency exam can be taken if student has previously achieved at least a "C" grade in a course with the same or similar title and description.
5. Course accepted if less than three years old
6. Clinic experience must be completed as Independent Study.

The maximum number of credit hours, if all proficiencies are passed, could be 21 hours.

### **III. Academic Policies**

#### **Grading Scale**

The Dental Hygiene Program grading scale was established to ensure that students will be well prepared to enroll in successive courses in the program. The scale is also consistent with the National Board Dental Hygiene Examination and other dental hygiene programs. The overall GPA for graduation must be 2.0 or higher on a 4 point scale.

Dental Hygiene students are expected to retain knowledge from previous semesters. The evaluation of clinical performance is based on the application of previously learned knowledge and skills as well as the comprehension and application of new skills and information each semester.

A. The program grading scale is as follows: A – 93-100

B - 92-85

C - 84-75

F - 74 or below

B. Midterm Grades

Students who receive a “U” or a failing grade at midterm are required to make an appointment with the instructor who distributed the grade report as soon as the student receives the report.

C. Final Grades

Students who receive less than a “C” (F) as a final grade in any dental hygiene program course will be required to repeat the entire course and gain a “C” or better grade if they are readmitted to the program. Students are required to earn a grade of “C” or higher in BIO courses, or their transfer equivalent from another college to continue in the program (BIO 121, 122, 123).

D. Students who withdraw from any DHG, BIO, or supportive course in any semester while enrolled in the Dental Hygiene Program will not be permitted to continue into the next semester or advance toward graduation. These students may apply for readmission to the program for the next academic year.

E. Students who leave the Dental Hygiene Program with an “I” (Incomplete) grade on their record will receive an “F” (Failure) grade for the course.

F. Students who leave the Dental Hygiene Program without withdrawing will receive an “F” grade in courses in progress that are not completed.

G. Grades can be tracked on Cobra for each dental hygiene course and TalEval for each clinical course. Students can access midterm and final grades through my.parkland.

#### **Program Progression & Remediation**

A. Student’s responsibilities:

1. The student is responsible for preparing for exams, clinical activities, practical exams and projects.

2. Students should note the grade received when the item is returned or posted on Cobra.
3. If the grade received is “C” or below, the student needs to see the course instructor for additional help. Each course instructor has office hours every week or will be available at another time that is convenient to both faculty and student.
4. The student is responsible for following through with any “U” or “F” mid-term grade report.
5. Students are encouraged to visit the Center for Academic Success for additional help with study skills and/or test taking.

#### B. Faculty Responsibilities

1. The course instructor is responsible for notifying the student of progress or lack of progress in the course by returning exams, quizzes and assignments in a timely manner.
2. If the student does not progress to a passing grade at midterm, the course instructor will indicate an “F” or “U” grade on the midterm report.
3. The course instructor has the responsibility of notifying the program director if a student is not passing a course.

The course instructor has the responsibility of providing remediation, either by meeting with the student or assisting the student in setting up meetings with a tutor. Tutors are arranged through the program director.

#### **Student Withdrawals and Failures**

Students should withdraw from dental hygiene courses only when the probability of attaining a passing grade of “C” is doubtful. The final day for withdrawal is published in the College Class Schedule each semester. The final day for withdrawal is one week before the last day of class.

A. Students should discuss the possibility of withdrawal with their course instructor and then with the program director(s) before making a final decision. Those individuals on financial assistance should also consult with the Office of Financial Aid (U-286) as to the effect of withdrawal on that aid **before** withdrawal. Failure to consult with the Financial Aid office could be very costly to the student.

B. Students who fail any course in the dental hygiene curriculum will be automatically dismissed from the program. Grades lower than “C” constitute failure in both didactic (lecture) and clinic/lab courses.

C. Students are required to have an exit conference with the dental hygiene program director to explore the reason(s) for withdrawal or failure and potential readmission.

D. Students that withdraw or fail any time during the freshmen year or first three semesters can expect to repeat the first-year courses either in part or entirely on readmission to the program. (There is a repeat course fee of \$100.00 per credit hour.)

E. Students who withdraw or fail any time after the first three semesters may be considered for readmission with sophomore status. Readmission requirements will then be established on an individual basis.

### **Request for Readmission**

Students who are requesting readmission to the program for the following academic year will:

- A. Submit a letter of request to the Program Director, and the college Admissions and Records Office.
- B. The letter of request to the Program Director will be examined by the program faculty to determine the student's potential for success if readmitted to the program. The program faculty will determine the specific requirements which must be fulfilled as a consideration for readmission into the program.
- C. Readmitted students will be reviewed individually. Plans for their success will be determined on an individual basis according to the student's needs as determined by the program faculty and director.
- D. Readmitted students may be expected a repeat successfully completed didactic courses and register for them as Independent Study (IND) courses if the course instructor(s) believe the student needs to increase/review course knowledge to succeed in subsequent courses and to become adequately prepared the Board examinations.
- E. Readmitted students will receive their individual plans (contracts) that will specifically list the activities/courses the student must follow to be readmitted and subsequently have the opportunity for success.

Students may be denied readmission to the program. Such reasons for denial include:

1. Breach of the Code of Conduct (involvement in any form of cheating, stealing, or making threats to harm the person or property of any fellow student, faculty of staff or Parkland College.)
2. Demonstrated inability of the student to act in a professional and ethical manner.
3. Demonstrated inability of the student to perform delicate hand skills needed for the safe treatment of dental hygiene patient.
4. Demonstrated inability to perform spatial relationship skills as may be required for exposing dental radiographs and /or operating high speed rotary instruments in the oral cavity with indirect vision techniques.
5. Demonstrated inability to perform Essential Qualifications with or without reasonable accommodations.
6. Failure to meet the entry-level eligibility score of 2.75 points required for Selective Admissions into the Dental Hygiene Program.
7. The Program is at full capacity of 36 students without the ability to admit over 36 (CODA Standards).

### **Grade Appeal**

According to College policy 8.15.03, the awarding of grades for work done in courses is the domain of the faculty. Only a faculty-led committee has the authority to override a grade on appeal, except in cases of approvals for drops without record, late withdrawal, and medical withdrawals.

A student who is not satisfied with a grade, grading process or final grade that he or she received, is advised to first meet with the course instructor. If the student is dissatisfied with the procedures used to calculate the grade, then the student may ask to meet with the Program Director.

If the student disagrees with the assigned grade, and feels the grade assigned meets one of the criteria for a grade appeal, the student goes immediately to the Faculty Chair and requests a Health Professions Professional Council on Academic Evaluation (PCAЕ) hearing for the grade appeal process. If the PCAЕ hearing does not resolve the situation, the student will proceed with the College Grade Appeal process as stated in the College Student Policies and Procedure Manual.

### **Intent to Dismiss**

Academic Dismissal from a Program:

When the student's performance falls below standards and shows no improvement and/or the faculty trust in the student is broken by a severe breach, the faculty may recommend suspension and/or dismissal.

When deciding to make a recommendation, examples considered by faculty include, but are not limited to, what has been covered in the curriculum, where the student is within the curriculum, the expectations at that stage of the curriculum, documentation of past performance, what the student has done/not done, and the severity of the infraction.

When a recommendation for dismissal occurs, it means that a student will be dropped from any health professions specialty classes (classes designated as in the major). The student will be able to continue to attend any general college courses in which they are enrolled. Program dismissal does not necessarily preclude re-admission into the program at a later date. Health Profession's program dismissal is a separate process from, and not necessarily related to the college's disciplinary procedures for suspension, dismissal and expulsion from the college.

Recommendation for dismissal can include but are not limited to impaired practice, failure to maintain grades, student performance, non-compliance with clinical, course or program policies, non-compliance with Essential Qualifications, academic dishonesty, plagiarism, professionalism and patient safety.

Suspension does not necessarily lead to dismissal in every situation. An interim suspension can be used pending the outcome of an investigation.

Chain-of-command: For the purposes of this policy the chain of command is as follows:

1. Course lecture, lab, or clinical faculty,

2. Course coordinator (often the lecture faculty in a lecture, lab, and clinical course).
3. Program Director
4. Health Professions Faculty Chair
5. Professional Council on Academic Evaluation
6. Dean
7. Vice President

Please refer to Health Professions Essential Qualifications, Code of Conduct, and Intent to Suspend or Dismiss Policy and Procedures for complete information. Policy can be found on Cobra Health Profession courses.

### **Student Hearings and Due Process**

Students who face recommendation for clinical suspension and/or program dismissal will be afforded due process through established procedures. Before dismissal, every student will receive:

- Written notice of academic expectations.
- Each Health Profession's program will include their Essential Qualifications in the student handbook and the process and procedures for program probation, clinical suspension, and program dismissal in the program handbook. The handbook will be available on the program web site, Cobra online or printed.
- Written notice of their deficient performance each time the performance is deficient.
- An informal give-and-take face-to-face meeting with the faculty decision-maker after every noted instance.
- When possible, reasonable time to change/improve their deficient performance. Reasonable time to change or improve performance may not be possible for patient safety situations.
- Notice of potential consequences such as delay of graduation, suspension and dismissal from the program that may result as a failure to correct deficiencies.
- Exceptions for notice or giving a reasonable time for improvement may include violations of patient's rights, safety or egregious violation of professional standards.
- If performance is not according to standard or falls below expectations, the faculty may recommend dismissal.

The student must be afforded the opportunity for a PCAE hearing. Professional Council on Academic Evaluation: (PCAE) is the Health Professions Council on Academic Evaluation and is the fourth step in the chain of command in the Health Profession's formal process for this policy. It is the division philosophy that issues between students and faculty are solved as close to the classroom as possible. When that is not possible, the PCEA is part of the formal process for resolving these issues.

### **Student Health Status and Health Changes While in the Program**

A student that has had any change in his/her physical and/or psychological condition

(including pregnancy and the postpartum period) that require medical attention and or could have an effect of their physical or emotional endurance, are still required to maintain Essential Qualifications. Some situations will require a release from your health care provider.

If a student develops a health issue that may result in incapacitation in the clinical area or types of conditions that may jeopardize patient safety, the student must notify the clinical instructor as soon as the health issue becomes known to the student. In order to protect the patient and the student, the student may be removed from clinical. Students will still be required to perform all the functional abilities outlined in the Essential Qualification in order to attend clinical.

### **Medical Leave**

A Leave of Absence signifies that the student intends to withdraw from the program and plans to continue within one academic calendar year. With the exception of Title IX leaves, a student who requests a leave for a year from the program must be in good academic standing. If the student is failing any course required for the program, a leave will not be granted. If the student is in good academic standing, the student must meet with the Program Director to develop an Academic Plan for re-admission. Courses may have to be repeated depending on the semester of the leave. Depending on the timing of the leave request, space may not be available in the next cohort. If the student fails to follow the Action Plan for re-admission to the next cohort, the student will not be readmitted. If the student does not return to the program the following year, the Action Plan for readmission will be void and the student will need to follow the process for reapplying to the program for their second and final admission.

### **Notification to Students of Their Right to Complain-CODA**

Students have the right to complain about the Parkland College Dental Hygiene Program. The following references can be used to communicate your complaint and make suggestions for Program Improvement:

Laura Hettinger, Dental Hygiene Program Director, 2400 W. Bradley Ave., Champaign, IL 61821. You can reach her by phone at 217-351-2386 or via email [lhettinger@parkland.edu](mailto:lhettinger@parkland.edu).

Kim Pankau, Dean of Health Professions, 2400 W. Bradley Ave., Champaign, IL 61821. You can reach her by phone at 217-351-2383 or via email [kpankau@parkland.edu](mailto:kpankau@parkland.edu)

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

Commission on Dental Accreditation, American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611, 312-440-4653. [www.ada.org](http://www.ada.org) .

### **Academic Advising and Clinical Progression Longitudinal Record**

It is a shared responsibility of the student and program director to maintain a longitudinal record of the requirements to complete the Dental Hygiene program. Graduation requirements and required courses are published in the College catalog. If a student changes an academic plan or fails to complete a required component in the timeframe scheduled, the student should notify the program director immediately. The program director will maintain records to show completion of the graduation requirements.

Clinical Progression: Program students are expected to retain knowledge from previous semesters. The evaluation of clinical performance is based on the application of previously learned knowledge and skills as well as the comprehension and application of new skills and information each semester. Each student will have a longitudinal record of her/his clinical performance. Identified areas of concern from previous semesters will be taken into account in the summative evaluation of each student's performance. Faculty will be assessing patterns and trends of learning and will take this into account in each course evaluation. The record includes clinical evaluations, any action/remediation plans that have been written for circumstances that resulted in a grade of "unsatisfactory" being assigned, and any other information related to the student's progression/performance in the program.

Students may review their record with the program director by making an appointment. Students will inform the program director in advance that they wish to review their record so their record will be available at the time of the appointment.

### **Name and Address Changes**

It is the student's responsibility to ensure that the student's legal name is in the Parkland system. Students should also update the address on file with Parkland College. Only the student's legal name can be used to register for the dental hygiene board exams and the name must match Parkland College official student records.

### **Attendance and Punctuality**

#### **Attendance**

- A. Regular attendance in each lecture, lab, clinical session and off-site rotation in the curriculum is required. Absences for personal reasons are discouraged.
- B. Students must inform the course instructor by email or telephone prior to being absent.
- C. Each course syllabus will provide specific requirements for attendance and absences from class, as well as make-up requirements for a missed quiz or examination.
- D. It is the student's responsibility to collect missed assignments, handouts and lecture notes.
- E. Dates of holidays, semester breaks and finals weeks are provided in the Parkland College catalog, the semester course timetables, and at the Orientation to the Dental Hygiene Program. Please schedule all activities around these dates.
- F. If an extended illness occurs, please notify the program director to discuss.
- G. Students needing personal leave for reasons such as bereavement need to discuss options with the program director.



### **Classroom Behavior**

- A. All faculty members have the responsibility to conduct class in an atmosphere that is conducive to teaching and learning; conversely, all students have the right to an atmosphere that is safe and respectful while engaged in learning.
- B. All students have a right to expect to learn in an environment free from distraction, disruption, or threat. Students who cannot or will not conduct themselves appropriately will not be allowed to continue to attend.
- C. Students are expected to be on time when reporting to classroom, lab, clinical and offsite rotation experiences.
- D. Students are expected to be awake, attentive, and courteous at all times. Students that are found asleep in the classroom or lab will be woken up one time. A second occurrence will count as an absence
- E. Any required textbooks, needed supplies, bookstore packets, etc must be available for all classes, including the first day of class. All textbooks must be the current edition.
- F. Class or laboratory sessions are not considered adjourned until the lab and classroom are in proper order. It is the responsibility of all students to clean practice areas.

### **Email, Computer Skills and Cobra**

Parkland College uses email as an official means of communication. All students and faculty are issued an official Parkland email account. According to Parkland policy, 3.41, Parkland email services are the official email services to be used for instruction, instructional support, advising, service, administration and college-related correspondence in support of the College's mission. The College has the right to send communications via email and expect those communications to be read in a timely fashion. Students are expected to check email prior to a class session in order to get latest updates or changes for that class period.

The College has the right, when required by applicable law to access, review, and release all electronic information that is transmitted or stored by the College whether or not such information is private in nature. Confidentiality or privacy of electronic mail cannot be guaranteed.

Email is subject to all pertinent laws regarding sharing or transmission of sensitive information such as Freedom of Information Act (FOIA), Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA). All student records are protected by FERPA and faculty do not provide access to student information within the course without a need to know.

All course material included on the course Learning Management System (Cobra) requires a student to utilize a secure log in and password to access their content. Email policy, 3.41 ensures that students protect their user information and do not share with anyone. "Users are responsible for safeguarding their username and password and for using them only as authorized. Sharing email accounts and/or passwords with another person, or attempting to obtain access to another person's account is prohibited. Each user is responsible for all email transactions made under the authorization of his or her Parkland email username." Verification processes are used to protect student privacy.

For online courses in which tests are proctored, a photo ID that matches the user at the

computer is required; or students may be required to go to a testing center in person with photo ID.

Students in the Dental Hygiene Program should have computer access to complete online and computer assignments and assessments. If the student does not have access to the internet or a computer at home, it is suggested the student utilize an open lab at Parkland prior to leaving campus.

Basic computer skills required to participate in the Dental Hygiene Program include ability to use Word, to write single and group e-mails, to use the Internet, to conduct on-line research, to use Powerpoint, to access grades from WebAdvisor, and ability to participate in on-line instruction and assessment using Cobra.

The Tech Service Desk is a one-stop shop for Parkland students seeking assistance with Parkland technologies, including my.parkland.edu, email, Cobra Learning, Wi-Fi, ParklandOne, Microsoft Office 365, and more. See General College Syllabus

### **Online Assessment Etiquette**

1. Face the computer screen. Your full face must be seen.
2. Keep your eyes on the screen, do not look to the side
3. Your camera must be on the entire time
4. Show your phone and workspace area prior to exam/practical
5. Workspace should be completely clear
6. You should be the only person in the room
7. Please sit up and do not lie in your bed.
8. Do not leave your computer until you are completely finished with the quiz or exam.

### **Cell Phone and Lab Policies**

All cell phones should be on the corner of the desk, in both lecture and lab, on vibrate in order to receive emergency calls only. If a student must take a phone call or a text they should leave the room. No texting on your cell phone is allowed in the classroom. *A five point deduction will be given each time a student violates this policy.* During testing or quizzing all cell phones will be on the table at the front of the room. When you are finished testing you may pick up your phone and take it back to your desk.

In the clinic you may have your cell phone in your supply box in case you need it for an emergency evacuation. Personal electronic devices must not be used in patient care areas. Laptop computers are allowed in the classroom for following powerpoints, taking notes, and accessing pertinent information during lecture and lab. Students are expected to use the computers for coursework only and refrain from accessing social media or websites during class. If a student violates this policy, they will be asked to attend class without their laptop.

### **Recordings in the Classroom**

College policy 5.01.03 states that students who wish to record classroom learning activities must requires permission from the instructor prior to doing so. Classroom

learning activities include lectures, in-class discussions, student presentations and other course-related activities. The policy covers all forms of recording using available technology. The instructor should specify the kinds of learning activities that are permitted to be recorded and the medium in which the recording takes place. The instructor has the right to deny or limit the request.

Students are allowed to record learning activities as an accommodation under the American with Disabilities Act (ADA) if the Accessibility Services ID card is issued and presented to the instructor. Students who request recording permission under the ADA must not be denied permission.

Violations of this policy are subject to disciplinary action. Lastly, students in the classroom have the right to know that their class is being recorded. The instructor will notify the class that permission has been given for a recording without identifying the individual student(s) requesting permission.

### **Student Records and Student Confidentiality**

Faculty are required to maintain student's privacy in accordance with the Family Education Rights to Privacy Act (FERPA). The Family Educational Rights and Privacy Act of 1974, also known as the Buckley Amendment, helps protect the privacy of student records. The Act provides for the right to inspect and review education records, the right to seek to amend those records and to limit disclosure of information from the records. The Act applies to all institutions that are the recipients of federal funding.

Records, files, documents and other materials which contain information directly related to a student and maintained by Parkland College or by someone acting for the College. Only the student or entities that the student has given written consent can receive information about the student's grades or progress. Please refer to FERPA information on the Parkland website: <http://www.parkland.edu/about/ferpa.aspx>

### **Final Examination Requirement**

A final exam is expected in each credit course at Parkland College. Final exams for all courses will be given during final exam week according to the official published schedule. These final exams are not to be given early (during regular class periods). Final exams for all other courses (courses with earlier end dates) will be given at the last regularly scheduled class meeting.

All requests from faculty to alter scheduled final exam times or dates must be reviewed and approved by the Faculty Chairs, Division Dean, and the Vice President for Academic Services.

In courses where a final exam is not appropriate, as determined by the Health Professions administration, an educational alternative scheduled during the week of final exams is expected.

Students: These official College guidelines were established to more fully ensure that you receive the full set of instructional class periods for which you paid and to which you are entitled and that you have the appropriate amount of time to prepare adequately for your final exams. If your final exam is given earlier than scheduled, please contact the

Faculty Chair or Division Dean.

Three final exams scheduled on the same day may be considered a conflict. Conflicts may be resolved by arrangement with the faculty of these courses.

Questions or concerns about these guidelines should be directed to the Faculty Chair or Division Dean.

Questions or concerns about these guidelines should be directed to the Department Chair, Assistant Dean of Nursing and Health Professions Operations or Division Dean.

### **III. Graduation Requirements**

#### **Dental Hygiene Licensing or Board Exam Information**

Specific dental hygiene licensure requirements vary among jurisdictions, but all jurisdictions have three types of requirements:

1. You must graduate from a CODA accredited Dental Hygiene Program
2. You must pass the National Board Dental Hygiene Examination
3. You must pass a clinical (regional) Board Examination

All jurisdictions accept graduates of dental hygiene programs accredited directly by the Commission on Dental Accreditation of the American Dental Association as fulfilling the educational requirements.

#### **A. National Board Dental Hygiene Examination –**

- The purpose of the National Board Dental Hygiene Examination is to assist state boards in determining the qualifications of dental hygienists who seek licensure to practice dental hygiene. The Examination assesses the ability to recall important information from basic biomedical and dental and dental hygiene sciences and also the ability to apply such information in a problem-solving context.
- A score below 75% is considered a failure and does not earn National Board Credit. The exam may be retaken.
- Students are responsible for the examination fee.
- The student's academic performance must be at a level that allows the Director to verify that the student is prepared to take the exam.
- Students are encouraged to participate in the Parkland College online board review course, attend the National Board Dental Hygiene Examination Review workshop offered in the spring semester of the second year or register for independent online board review courses.

National Board Dental Hygiene Examination  
Joint Commission on National Dental Examinations American Dental Association  
211 E. Chicago Ave., Suite 1846  
Chicago, IL. 60611  
Tel: (312) 440-2678  
<http://www.ada.org/prof/prac/licensure/hygiene/index.html> (Testing Services)

## **B. Clinical Examination-**

- Students who plan to practice dental hygiene in the state of Illinois may select the CDCA, WREB, CITA, the Central Regional Dental Testing Examination (CRDTS) or the Southern Regional Dental Testing Examination (SRTA) to become licensed.
- The student's clinical performance must be at a level which allows the Director to verify that the student is prepared to take the exam.
- Students are responsible for the selection of all patients for the clinical examinations.
- Students are responsible for all fees for the clinical examinations, including a site fee if Parkland College is hosting a clinical examination.

### **The Parkland College Dental Hygiene Program hosts the Central Regional Testing Services (CRDTS) Examination in April/May (Subject to Change)**

The members of CRDTS are the State Boards of Alabama, Arkansas, California, Georgia, Hawaii, Illinois, Iowa, Kansas, Minnesota, Mississippi, Missouri, Nebraska, New Mexico, North Dakota, Oklahoma, South Carolina, South Dakota, Texas, Washington, West Virginia, Wisconsin and Wyoming. Other states may accept the exam even though they are not a member state.

Central Regional Dental Testing Services, Inc 1725 SW Gage Boulevard  
Topeka, KS 66604  
Tel: (785) 273-0380

[www.crdts.org](http://www.crdts.org)

### **Petition to Graduation**

Students will complete the Admissions form, Petition to Graduate at the end of the fall semester of the second year of the program. Results of the graduation requirement audit are emailed to the student from an Admissions representative. It is the student's responsibility to report any deficiencies to the program director.

### **Program Recognition Ceremony**

Dental Hygiene Program students that have completed graduation requirements may have the opportunity to participate in a Recognition Ceremony at Parkland. The Recognition Ceremony is held on *the day of Parkland Graduation at 1:00 pm on the Parkland College campus*, and the student's attendance is optional.

Parkland College encourages persons with disabilities to participate in its programs and activities. If you anticipate needing any type of accommodation, such as a sign language interpreter, or have questions about the physical access provided, please contact the Accessibility Services by phone at 217-353-2338, or by email at [accessibilityservices@parkland.edu](mailto:accessibilityservices@parkland.edu). To provide seamless access please submit all requests two weeks in advance of your participation or visit."

## **V. Health and Safety Policies**

### **Student Health, Immunization, Drug Screen and Background Procedures**

The conduct standards for Healthcare Professionals and students are higher than those of the ordinary student or citizen because of the inherent responsibilities assumed by their

role with patients, and the trust the public places on their profession to do no harm.

### **Health Records**

In order to be admitted to the program, immunization records and evidence of physical examination must be complete and on record on Castle Branch website. Background and Drug Screens must also be complete. The student will be dropped from program courses if non-compliant. Follow program procedures for re-enrollment and status in the program. If a student has a second incident of non-compliance, the student will take a year leave from the program.

Once admitted to the program, all health record requirements must be up to date to remain in program courses. Students with incomplete health records will not attend clinical and the missed time will be counted as a clinical absence for each day missed. Make up hours are not available for clinical absences. Students must be current through the entire semester of the course. The student may need to renew before it is actually due and before you are notified by Castle Branch to renew.

Due dates to stay current and compliant for each semester are: July 15 for fall courses, December for spring courses and May 15 for summer courses.

Required vaccinations and immunizations are specific to the Health Professions Program. Each student will submit health records according to the program guidelines. The most updated information for all vaccinations and immunizations can be found on the Health Professions website: [Health Records and Covid Vaccination Information](#)

Parkland College (PC) Health Professions is committed to maintaining a drug-free workplace and academic environment in compliance with the Federal Drug Free Workplace Act of 1988 and in Accordance with Parkland College Policy 3.24 Drug-Free Workplace.

For health and safety concerns, all students involved in Parkland College's Health Professions Programs which have a clinical contract requiring drug and background must be processed through clinical clearance and compliance through a health record, drug screen and background check. The presence of alcohol and/or drugs, lawfully prescribed or otherwise, which interfere with student's judgment or motor coordination in a healthcare setting poses an unacceptable risk to patients, faculty, other students, the College and affiliated clinical agencies. The College recognizes its responsibility to provide for a safe academic environment for College students, faculty, and staff, as well as a safe clinical setting for students, faculty, patients and employees of affiliated clinical agencies. For the foregoing reasons, Health Professions students will be cleared for clinical courses prior to the start of the program or in some programs, prior to the start of the first clinical course.

Please read through Health Professions Intake and Clearing Procedures:  
<https://www.parkland.edu/Portals/3/Health%20Professions/Documents/Student%20Health%20Immunization.pdf?ver=2020-02-28-162929-537&timestamp=1582929224580>

## **Title IX**

### **Title IX - Sexual Harassment, Violence, and Misconduct**

Parkland College is committed to assuring a safe and productive educational environment for all students. To meet this commitment and to comply with Title IX of the Education Amendments of 1972 and guidance from the Office of Civil Rights, the college requires faculty members to report incidents of sexual violence shared by students to the college's Title IX coordinator, Vice President of Student Services, Michael Trame. The only exceptions to the faculty member's reporting obligation are when incidents of sexual violence are communicated by a student during a classroom discussion, in a writing assignment for a class, or as part of a college-approved research project. Faculty members are obligated to report sexual violence or any other abuse of a minor (any person under 18 years of age) to the Illinois Department of Children and Family Services (DCFS). Information regarding the reporting of sexual violence and the resources that are available to victims of sexual violence is available at <https://parkland.edu/Main/About-Parkland/Safe-Campus-Procedures/Title-IX-Harassment-Discrimination>

### **Title IX – Pregnancy**

Title IX of the Education Amendments of 1972 provides pregnant students with certain rights regarding their education. For information, contact Dr. Marietta Turner, Dean of Students at 217-351-2505 or via email at [mturner@parkland.edu](mailto:mturner@parkland.edu).

It is recommended if a student is in a program with occupational hazards or risks, the student report a pregnancy to the program director so that the student can be educated about any occupational risks during clinical, labs or practicums. Confidentiality will be maintained, but the safety of the student/fetus is most important.

Additional information regarding Title IX provisions for pregnant students is included in the General College Syllabus.

### **Communicable Diseases and Communicable Disease Policy**

#### Parkland Policy 3.05

The Illinois Department of Public Health (IDPH) has specified disease which are contagious, infectious, communicable, and dangerous to the public health in Section 690.100 of the Rules and Regulations for the Control of Communicable Diseases. The purpose of this policy is to insure College compliance with those and other existing state and federal rules, regulations, and laws.

Parkland College places a high priority on protecting the health and safety of its campus community and aims to reduce communicable disease exposure risk without unlawfully discriminating in enrollment or employment practices. To that end, Parkland College will adhere to the following guidelines:

1. Parkland College will be in full compliance with the Americans with Disabilities Act (ADA) as it relates to those students and employees who have communicable diseases. Any college decisions made resulting from a student or employee's health-related circumstances will be made with input from the office of Disability services and will depend on each unique instance, applicable confidentiality considerations, and relevant medical facts.

2. Parkland College will follow guidelines as directed by the Illinois Department of Public Health.
3. Parkland College will consider the welfare of the campus community while respecting the privacy and needs of the individuals involved.
4. Parkland College will make available to all members of the college community educational opportunities about disease transmission and prevention and will encourage preventive measures including, but not limited to, immunizations against meningitis and flu as recommended by the Centers for Disease Control and the American College Health Association.
5. Parkland College will provide appropriate and non-discriminatory services for persons living with infectious disease(s).
6. Parkland College will comply with NCAA regulations to reduce infection risk for those students involved in varsity and intramural contact sports.
7. Parkland College will follow occupational safety and health standards mandated under federal and state law with regard to the transmission of blood-borne pathogens in an effort to prevent transmission of disease in classrooms, laboratories, and work spaces as outlined in the Exposure Control Plan. This compliance will be coordinated by the Wellness Coordinator.
8. Parkland College will, when necessary, isolate infected persons and/or quarantine their contacts in accordance with the Illinois Department of Public Health guidelines and within the parameters of the College Emergency Plan as managed by the Crisis Management Team.
9. The Vice President for Student Services will administer this policy subject to applicable personnel policies and collective bargaining agreements. Any actions undertaken pursuant to this policy will be in accordance with applicable federal and state laws. Parkland College policies and the best interest of all parties involved. The Vice President for Student Services will also act as a spokesperson for the campus regarding all communicable disease policy-related decisions and/or changes.

Any possibility of harboring contagious diseases must be reported to the clinical instructor prior to attending clinical. Students who pose health risks to personnel or patients or to themselves will not attend clinical. Examples: chickenpox, pink eye, fever, uncontrolled cough, open lesions on the skin.

If a student has a sore throat with fever, he/she must contact the instructor prior to coming to the clinical facility. In cases of strep throat, the student must be on an antibiotic for a minimum of 24 hours before returning to the clinical facility. It is advised that the student contact the fieldwork educator if any of he or she notices any of the following:

Fever >100.4  
Conjunctivitis  
Diarrhea lasting more than 12 hours  
Group A Strep-diagnosed by a physician  
Jaundice  
Vomiting



Cold Sores (herpes)  
Active measles, pertussis, rubella, or chicken pox  
Upper respiratory infection (cold)  
Tuberculosis (TB)  
Shingles or rash of unknown origin  
Head lice  
Scabies  
Abscess or boil that is draining  
Impetigo  
Mononucleosis

Clinical instructors have the right to initiate communication with a student who exhibits the signs or symptoms of a communicable disease who has not come forward. This will only occur if the individual has the potential to pose an imminent risk to others or are unable to perform required tasks. All HIPAA and FERPA laws will be abided by, and the individual is assured of confidentiality regarding the matter.

### **Health Records**

In order to be admitted to the program, immunization records and documentation of Healthcare Provider BLS CPR and a negative TB Test must be complete. Dental Hygiene faculty will monitor and keep student health records.

The student will be dropped from program courses if non-compliant. Follow program procedures for re-enrollment and status in the program. If a student has a second incident of non-compliance, the student will take a year leave from the program.

Once admitted to the program, all health record requirements must be up to date to remain in program courses. Students with incomplete health records will not attend clinical and the missed time will be counted as a clinical absence for each day missed. Make up hours are not available for clinical absences. Students must be current through the entire semester of the course. The student may need to renew before it is actually due.

Due dates to stay current and compliant for each semester are: July 15 for fall courses, December for spring courses and May 15 for summer courses.

A full list of requirements is distributed upon admission to the program as well as on all program websites under  
*Health Requirements.*

### **Bloodborne Pathogen Exposure or Other Occupational Hazards**

#### **PARKLAND COLLEGE HEALTH PROFESSIONS BLOOD BORNE PATHOGEN AND INFECTIOUS DISEASE POLICY FOR CLINICAL FACULTY AND CLINICAL STUDENTS**

Parkland College Health Professions faculty, staff, and students (“personnel”) have the obligation to maintain standards of health care and professionalism that are consistent with the public’s expectations of the healthcare personnel.

1. All personnel are ethically obligated to provide patient care with compassion and demonstrate respect for human dignity.
2. It is understood that faculty and students that are in clinical facilities will work with patients that may

have an infectious disease. No personnel may ethically refuse to treat a patient solely because the patient is at risk of contracting, or has, an infectious disease. These patients may not be subjected to discrimination. Please contact your program director if you have questions.

3. Faculty and students are ethically obligated to respect the rights of privacy and confidentiality of patients with infectious diseases.
4. Parkland College will protect the privacy and confidentiality of any faculty or students who test positive for an infectious disease. Faculty and staff who pose a risk of transmitting an infectious agent must consult with appropriate health care professionals to determine whether continuing in class or clinical represents a risk to patients. The faculty or student should report any infectious disease to the program director or supervisor. Faculty and students are obligated to follow Parkland College Policy 3.05, Communicable Diseases and Communicable Disease Policy. Program Handbooks may also include specific information on blood borne pathogen or infectious disease policies and protocols.
5. The Dean of Health Professions, along with the faculty, has established and enforced written preclinical, clinical, and laboratory protocols to ensure adequate asepsis, infection and hazard control, and hazardous waste disposal. These protocols are consistent with current federal, state, and/or local guidelines, and have been provided to all faculty, students, and support staff. The protocol is complete including the availability and use of gloves, masks, and protective eye wear by faculty, students, and patients in both the preclinical and clinical settings. The protocols are reviewed annually by faculty and the Wellness Coordinator to ensure accuracy and compliance.
6. The Dean of Health Professions requires faculty and students to abide by current immunization standards set by clinical agencies and/or Parkland College. All programs except Veterinary Technology and Dental Hygiene will set up a health record account through Castle Branch/Certified Profile. All requirements are listed in those accounts. The requirements are updated as they change. For Dental Hygiene and Veterinary Technology students, please check your program handbooks for requirements.

## **PARKLAND COLLEGE**

### **PROTOCOL FOR OCCUPATIONAL EXPOSURES IN DENTAL HYGIENE CLINIC**

#### **STUDENT**

1. Immediately after the incident, flood the exposed area with water and clean the wound with soap and water or a skin disinfectant if available. Do not dismiss your patient.
2. Notify your instructor and the clinical dentist.
3. If between 7 a.m. and 5 p.m., Monday - Friday, call the Carle Occupational Medicine Department (383-3077), 810 W. Anthony Dr, Urbana, IL. (Occupational Medicine Entrance is on the west side of the street under a red awning.) Identify yourself as a Parkland dental hygiene student and explain you've had an occupational exposure to blood/body fluids and wish to be evaluated. You will be instructed as to how to proceed. At other times, go to the Carle Emergency Department (E.D.), 611 W. Park Street, Urbana, and tell the admitting clerk the same. There's no need to notify the E.D. in advance of your arrival.

4. **Immediately:** go to the appropriate facility (see #3) to have blood tests performed and for an evaluation of the clinical exposure and counseling as to possible treatment. Parkland College will cover any charges you incur for **immediate** follow-up care by Carle Occupational Medicine or Emergency Departments. Instruct Carle personnel to send the bill to: Wellness Coordinator, Parkland College – U111, 2400 West Bradley Avenue, Champaign, IL 61821, (373-3879). *You or your insurance carrier will be responsible for paying for any treatment or care beyond that which is given immediately following the exposure incident.*
5. Call Parkland’s Wellness Coordinator (373-3879) at your earliest convenience to schedule an appointment to discuss the recommended follow-up.
6. If you want to talk about the situation, call the National AIDS Hotline (1-800-342-AIDS), the Wellness Coordinator (373-3879), the Dental Hygiene Program Director (351-2386) or the Health Professions Dean (351-2383).
7. Follow-up testing is recommended at 3 months, 6 months and one year.

**PARKLAND COLLEGE  
 PROTOCOL FOR OCCUPATIONAL EXPOSURES IN DENTAL HYGIENE CLINIC**

**PATIENT**

An instrument or needle used on you has inadvertently punctured the skin of one of our students. Since you have agreed to have an evaluation which includes blood tests for Hepatitis B and C viruses and HIV, please do the following:

1. Carle Occupational Medicine Department (383-3077) 810 W. Anthony Dr, Urbana, IL. (Monday - Friday, between 7 a.m. and 5 p.m., 217/383-3077) will be informed that a Parkland dental hygiene student had an occupational exposure while working on you and you need an appointment for an evaluation and to have your blood drawn as soon as possible. (Occupational Medicine Entrance is on the west side of the street under a redawning).
2. If the exposure occurred after 5:00 p.m., go to the Carle Emergency Department (611 W. Park Street, Urbana) and tell the admitting clerk the same. There’s no need to notify the E.D. in advance of your arrival.
3. **Immediately** go to the appropriate facility to have blood tests performed and for an evaluation of the clinical exposure and counseling as to possible treatment. Parkland College will cover any charges you incur for **immediate** follow-up care by Carle Occupational Medicine or Emergency Departments. Instruct Carle personnel to send the bill to: Wellness Coordinator, Parkland College - Room U-111, 2400 West Bradley Avenue, Champaign, IL 61821 (373- 3879). *You or your insurance carrier will be responsible for paying for any treatment or care beyond that which is given immediately following the exposure incident.*
4. After signing a release, your test results will only be given to you, the student who had the occupational exposure, and Parkland’s Wellness Coordinator. Carle personnel will keep your results confidential and follow-up with you as needed.
5. If you have any questions about this process, please call the Wellness Coordinator at Parkland College (217/373- 3879).

**PARKLAND COLLEGE  
INCIDENT REPORT: EXPOSURE TO BLOOD OR BODY  
FLUIDS**

Name: \_\_\_\_\_ Faculty/Staff/Student

Department: \_\_\_\_\_

Date of incident: \_\_\_\_\_ Time of incident: \_\_\_\_\_

Incident reported to: \_\_\_\_\_ Instructor/Supervisor

Witnesses to the incident: \_\_\_\_\_

Description of incident (provide all details of what happened, including location of incident, how it happened, work being performed, type of exposure, part of body exposed, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal protective equipment used at time of incident:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Actions taken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Hepatitis B vaccine series completed: \_\_\_\_\_

Was an incident report completed at another facility? Yes / No

If yes, where? \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PARKLAND COLLEGE**  
**PROTOCOL FOR OCCUPATIONAL EXPOSURES IN DENTAL HYGIENE CLINIC**  
**FACULTY and DENTIST**

1. Identify the student and patient. Be sure the student has cleansed the contaminated area thoroughly. If the student needs emergency medical care, call Parkland's Department of Public Safety at ext. 2369. **If no emergency first-aid is needed, there is no need to call a Public Safety Officer.**
2. Give the student and patient a copy of the appropriate protocol and advise each of them to follow it. If the patient has left, the consulting dentist\* will phone him/her and explain our policy.
3. If between 7 a.m. and 5 p.m., Monday – Friday, assist the student in calling the Carle Occupational Medicine Department at 383-3077. The student should ask for a nurse and explain that he/she is a Parkland dental hygiene student and has had an occupational exposure to blood/body fluids and needs to be evaluated. At other times, send the student to the Carle Emergency Department (611 W. Park Street, Urbana); there is no need to call ahead. The student should go to Carle immediately following the incident so it can be determined if medications called protease inhibitors for HIV infection are warranted.
4. Maintain confidentiality of all persons involved. Share information on a “need-to-know” basis only.
5. Complete an incident report and submit it to the Wellness Coordinator in Room U-111.
6. Complete the Occupational Exposure Log located in the Dental Hygiene Clinic.

\*The consulting dentist is Dr. Mark Hudson

**Inclement Weather**

The basic philosophy of the College is to keep the campus open if at all possible during inclement weather. Closing the College is always a difficult decision to make in view of the large geographical area which is served by Parkland. We also know that timing is important during the day AND evening, as students and/or faculty and staff may already be in route to the campus at the time the decision is made. The decision to close does include classes offered by Parkland at area learning centers throughout the District.

The conditions both on campus and in surrounding areas are monitored very closely during inclement winter weather. If it becomes necessary to close the campus during the day and/or evening when classes are in session, an announcement will be made over the public address system, to local radio/tv and on our website by 3:00 p.m. If weather conditions deteriorate overnight, a decision is made by 5:00 a.m. Monday through Saturday.

Radio and television stations are contacted always if the campus is closed due to weather conditions. Parkland College will announce college closings on the Parkland Facebook page and other social media outlets. The media will accept closings only; consequently, if you do not hear Parkland mentioned, then the College is open. The Switchboard on

campus and the college's radio station WPCD (88.7 FM) are kept apprised of announcements, as well as Parkland's website. In addition, the following stations are contacted if the College closes:

#### Radio Station

WDWS/WHMS	Frequency	1400 AM/97.5 FM	Location:	Champaign
WLRW/WIXY		94.5 FM/100.3 FM		Champaign
WBCP		1580 AM		Champaign
WILL		90.9 FM/580 AM		Urbana
WPCD		88.7 FM		Champaign

#### TV Station WAND WCIA WICD

Safety and the ability to drive or walk in inclement conditions ultimately needs to be determined by the student. If the student has concerns because it is dark outside or the student expects the conditions may improve, the student should follow syllabus directions for calling in late or absent as soon as possible.

#### **Public Safety and Escorts**

The Parkland College Police Department, also known as Public Safety, is a full-service police agency covering the campus 24 hours a day, including holidays. The officers are trained as EMTs and First Responders to provide emergency medical care. The Police Department offers many services which include escorts, lost and found, and vehicle assists. The college hours are 7 a.m. to 10 p.m. Monday through Friday and 7 a.m. to 4 p.m. on Saturdays. The campus is closed on Sundays and holidays.

Public Safety also offers escort service to the Parkland parking lots. Please use the information below if you would like an officer to walk you to your vehicle.

You can reach this department by:

- Visiting the main Public Safety office at A160
- Calling 217-351-2369
- Dialing 911 from a campus phone
- Using emergency call boxes conveniently located throughout the campus

#### **Classroom and Lab Emergencies**

Students will be oriented on the College 911 system. Students are instructed to activate Classroom 911 Icon on computer screen anytime the student senses and emergent situation.

#### **Clinic Emergencies:**

Medical Emergencies: Call 911, Let the officers know this is a medical emergency.

Follow the Clinic Emergency Protocol posted in each corner of the clinic. Notify instructor and clinical DDS. Remain with patient, access medical history for emergency personnel.

Non-Medical Emergencies: Activate 911 Icon on computer screen.

### **Emergency Alert System**

Parkland College uses an emergency alert system designed to send out a message in the case of an on-campus emergency. This system will be triggered in the case of a natural disaster or public safety emergency. When you register for classes or being employment, you are automatically signed up for the service. Be sure that your contact information is up to date with the College.

Students are encouraged to add Public Safety phone number into their personal cell phones. Students should leave the building immediately upon notice of evacuation. Students should not return to campus until notified as all clear.

- Students are encouraged to add Public Safety phone number into their personal cell phones.
- Students are encouraged to take their car keys and cell phones into clinic sessions in case of an emergency. Car keys and cell phones should be kept in their clinic boxes.
- Students should leave the building immediately upon notice of evacuation. Students are not allowed to return to locker room for personal belongings.
- If patients are present, student should assist their patient during evacuation.
- Students should not return to campus until notified as all clear.

### **Medical Liability Insurance**

Students registered in Parkland clinical courses will be covered by a College issued liability insurance. A course fee will be added to a clinical course. The student is covered while at clinical on scheduled days of clinical. Activities or class sessions that take place outside of the published course schedule, will not be covered by the College liability insurance.

It is recommended that students carry personal medical insurance to cover accidents including on-the-job related incidents in the clinical area. Cooperating agencies provide treatment for emergency services in cases of accidents at the student's own expense.

A student who is injured in the classroom, lab or clinical must immediately report it to the instructor. Emergency medical procedures will be provided on campus as needed.

A student who is injured while at the clinical site must immediately report it to lead preceptor, surgical supervisor or clinical instructor. The student will be asked to present personal medical insurance to the health care facility providing care to the student. The student will be required to complete an Incident Report at the facility and the College.

### **Medical Leave**

Good personal health is necessary for dental hygiene students.

Students who become ill and cannot attend class must follow the absence policy from each course syllabi for each course to be missed.

Students who experience an extended illness must discuss possible alternative arrangements for completing course requirements with the course instructor and Program Director.

## **Smoke Free Campus**

In compliance with the Smoke-Free Campus Act (110 ILCS 64/), all tobacco use will be prohibited on the Parkland College campus effective July 1, 2015. For the purpose of this policy, "campus" means all property owned and leased by, or leased to the College, including buildings, grounds, roads, parking lots, and vehicles.

All clinical sites (hospitals) are also smoke free campuses. Please make adjustments prior to the first day of clinical to reduce the need for smoking. Parkland offers smoking cessation programs through the Wellness Coordinator.

## **VI. Clinical Instruction Clinical Grading and Evaluation**

### **Student Monitoring and Tracking System/Clinical Courses**

A faculty member closely monitors each student during patient treatment procedures and is present during all clinical sessions to integrate social, basic, dental, and clinical sciences with patient experiences. The faculty uses clinical evaluation forms with listed performance criteria when evaluating students for specific competencies.

The students are providing dental hygiene services for a variety of patients in all age groups who exhibit a broad range of oral and systematic health characteristics and treatment difficulty. Many of the patients exhibit moderate to severe periodontal disease. Maintenance appointments are assigned to monitor and evaluate the outcome of dental hygiene care.

Each lab and clinical course have a faculty member of record (lead instructor) who is responsible for following the progress of the students toward completion of the course objectives. That person provides feedback to the students on their progress and information to the faculty on the student's progress or lack of progress. Students' individual clinical grades/competencies can be tracked by the student via Cobra Learning and TalEval.

### **Policy for Prohibiting a Student to Treat a Clinical Patient**

Occasionally it is deemed necessary to prohibit a student from providing clinical dental hygiene treatment. Such circumstances would include:

1. Inconsistently demonstrating the ability to apply previous knowledge from Pre-Clinic and previous dental hygiene courses. The inability to progress may result in dismissal from the Dental Hygiene Program for patient and clinician safety.
2. The health of the student is unsafe or considered communicable to patients, fellow dental hygiene students, faculty and staff. (i.e. strep throat, severe cold, etc.)
3. The student has demonstrated irresponsibility to clinic patients by not coming to clinical sessions. In this case, the student may be allowed to use the clinic facilities as scheduled but will assume the responsibility for making her/his own dental hygiene clinic patient appointments.



### **Clinical Transportation and Parking**

Students are expected to provide their own transportation to and from all clinical sites. Students are to follow parking regulations of the clinical site and park only in those areas designated for students.

### **Patient Assignments at Clinical**

Healthcare providers serve the public and the patient has the right to expect quality care regardless of based on the students beliefs related to race, color, gender, sexual orientation, religion, creed, national origin, age, marital status, disability, veteran status, disease process, socio-economic status, or any other applicable basis in law. Clinical experiences are planned by the Health Professions faculty/administrators to best meet student learning needs. Students may not refuse patient care assignments.

All patients are to be treated with equal care and compassion. Patient confidentiality is respected at all times and students will follow HIPAA policies.

### **Student Work Policy at Clinical**

All student activities associated with the Dental Hygiene Program while completing clinical rotations will be educational and training focused. Students will not receive monetary remuneration in any form during this educational/training experience. Additionally, the student will not be substituted for hired staff within the partnering clinical setting while enrolled in the Dental Hygiene Program.

### **Mandated Reporting**

Elder and Child Abuse Reporting

“Pursuant to Public Act 91-0244, effective January 1, 2000 if you have reason to believe that an adult 60 years of age or older who resides in a domestic living situation who, because of dysfunction is unable to seek assistance for himself or herself has, within the previous 12 months been subject to abuse, neglect or financial exploitation, the mandated reporter shall, within 24 hours after developing such belief, report this suspicion to the Department on Aging. Reports should be made to Department on Aging at 1-800-252-8966.”

“Public Act 91-0244 also requires that if you have reasonable cause to believe a child known to you in your professional capacity may be an abused or neglected child you are required to report such possible neglect or abuse to the Department of Children and Family Services at 1-800-25abuse.”

Illinois Department of Professional Regulation/Dental Hygiene Licensure

### **Clinic Infection Control Standard Operating Procedures (SOPS)**

Standard Operating Procedures (SOP) are designed to guide students and faculty on clinical policies in support of quality infection control based on Parkland College’s clinical procedures and guidelines, in accordance with the seven standard precautions of the Centers for Disease

Control and Prevention (CDC) Guidelines for Infection control in the Dental Health-Care Setting-2003. The SOP's are designed to provide consistency in the clinical setting to ensure the safety of patients, administrative staff, students and faculty. The SOP's include hand hygiene, personal protective equipment, respiratory hygiene/cough etiquette, sharps safety, safe injection practices, sterilization and disinfection of patient-care items and devices and environmental infection prevention and control.

## 1. **PROCEDURE: Handwashing**

CDC STANDARD<sup>1</sup>: Hand Hygiene (page 14); Selection of Antiseptic Agents (page 15); Storage and Dispensing of Hand Care Products (page 16); Lotions (page 16); Fingernails and Artificial Nails (page 16); Jewelry (page 16)

UPDATED: August 2024

TECHNIQUE – First of Day or when hands are visibly soiled

1. Remove all hand jewelry
2. Wet hands and wrists under cool running water.
3. Dispense sufficient soap from hands free dispenser to cover hands and wrists.
4. Rub the hand wash gently onto all areas, with particular emphasis on areas around nails, between fingers and back of hand for 20 seconds before rinsing under cool water.
5. Repeat steps 2 and 3
6. Dry thoroughly with paper towels.
7. Put on exam gloves.

TECHNIQUE – In between patients or procedures

1. Dispense alcohol-based hand rub from hands free dispenser
2. Rub hands for 20 seconds until dry
3. If hands are not wet with antiseptic spray for entire 20 seconds, add more
4. Put on exam gloves

PARKLAND COLLEGE DENTAL HYGIENE CLINIC STANDARD GUIDELINES:

- Perform hand hygiene when you enter the clinic at the beginning of the day, before going home, and at the end of the day. Hand hygiene should be conducted before and after all patient contact, contact with potentially infectious material, and before putting on and after removing personal protective equipment (PPE), including gloves. Hand hygiene after removing PPE is particularly important to remove any pathogens that might have been transferred to bare hands during the removal process.
- Use ABHR (alcohol-based hand rub) with at least 60% alcohol or wash hands with soap and water for at least 20 seconds. If hands are visibly soiled, use soap and water before returning to ABHR.
- Soap should be stored in closed containers and dispensers
- No petroleum-based lotions (weaken gloves and increase permeability)
- Keep nails short and clean
- No nails longer than finger from the palm side
- No sharp nail edges or broken nails
- No artificial nails – harbor bacteria involving potential fungal and bacterial infections
- No painted nails – chip nail polish can harbor added bacteria
- No hand jewelry (skin under rings is more colonized)

## 2. **PROCEDURE: Personal Protective Equipment (PPE)**

CDC STANDARD<sup>1</sup>: Page 16-20

UPDATED: August 2024

### TECHNIQUE –

The order of the PPE is:

1. Initial hand hygiene
2. Put on a clean disposable gown with sleeves that cover forearms, close at the neck, cover lap when sitting, change for each patient or when visibly soiled
3. Hand hygiene (if needed)
4. Based on procedure: Put on a respirator or surgical mask.
  - a) Fitted N95 mask:
    - i. Surgical mask should have >95% bacterial filtration efficiency
    - ii. Perform a user seal check each time you put on the respirator mask
    - iii. Respirator use must be in the context of a complete respiratory protection program in accordance with OSHA Respiratory Protection standard ([29 CFR 1910.134](#)<sup>external icon</sup>). DHCP should be medically cleared and fit tested if using respirators with tight-fitting facepieces (e.g., a NIOSH-approved N95 respirator) and trained in the proper use of respirators, safe removal and disposal, and medical contraindications to respirator use.
5. Change masks between patients or when wet, do not wear around neck or carry
  - a) Textile (cloth) covers are intended for source control. They are not personal protective equipment (PPE)
6. Add protective eyewear, with solid side shields, cleaned with soap and water, disinfect if visibly soiled
  - a) Protective eyewear with gaps between glasses and the face are unlikely to protect eyes from all splashes and sprays.
  - b) Personal eyeglasses and contact lenses are NOT considered adequate eye protection.
7. Place face shield worn over protective eyewear, and place clinical tape over the foam to insure it does not get contaminated.
  - a) clean with soap and water, disinfect if visibly soiled
8. Perform hand hygiene
9. Put on clean, non-sterile gloves with fit
  - a) place with thoroughly dry hands
  - b) change between patients or when torn
10. (After patient treatment) Remove gloves
11. Perform hand hygiene
12. Remove protective eyewear (face shield, then safety eyewear) by handling the headband or earpiece
  - a) Carefully remove the face shield by grabbing the strap and pulling upwards and away from the head. Do not touch the front of the face shield
  - b) Wash the face shield with soap and water to remove debris.
  - c) Spray with Surface disinfectant (Bleach Free, kill time is 30 seconds.)

- d) Follow immediately with a soft cloth or eyeglass wipes.
  - e) The face shield is placed in your tote (box.)
13. Perform hand hygiene
  14. Now remove your loupes by:
    - i. Clean and disinfect loupes according to manufacturer's instructions prior to reuse. Place in loupes case.
  15. Remove disposable gown: unfasten necktie, pull away from neck and shoulders, turn gown inside out, bundle and discard, touch inside of gown only
  16. Perform hand hygiene.
  17. Remove mask by grasping earpiece
    - a) Do not touch the front of the respirator or mask.
    - b) Surgical mask: Carefully untie the mask (or unhook from the ears) and pull it away from the face without touching the front, and discard in trash.
    - c) Respirator: Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator. Discard mask.
  18. Perform hand hygiene and put on your personal mask.
  19. Wipe clinic shoes and use a disinfectant wipe with gloved hands. (Place shoe in your tote when you are in the locker room, and store in your shoe tote.)
  20. Perform hand hygiene.
  21. Scrub cap stays in place until you are ready to change out of your scrubs. Once you are ready to change into street clothes:
    - a) Removal of the scrub cap is first, by grabbing from the back of your head pulling off and forward and placing it directly in your take home clothes bag.
    - b) Remove scrubs and place with scrub cap into a separate take home bag.
  22. Perform hand hygiene.

8/2024 "SOP Handwashing" LH  
<https://www.cdc.gov/infection-control/media/pdfs/Toolkits-PPE-Sequence-P.pdf>

### 3. **PROCEDURE: Sterilization and Disinfection of Patient-Care Items**

CDC STANDARD1: Page 20-25

UPDATED: August 2024

- Sterilization protocols do not vary for respiratory pathogens. DHCP should perform routine cleaning, disinfection, and sterilization protocols, and follow the recommendations for Sterilization and Disinfection of Patient-Care Items present in the Guidelines for Infection Control in Dental Health Care Settings – 2003
- DHCP should follow the manufacturer's instructions for times and temperatures recommended for sterilization of specific dental devices.

#### CDC GUIDELINES

1. Non-critical items are cleaned with an EPA hospital disinfectant
2. Items visibly contaminated with blood or OPIM should use a tuberculocidal, intermediate-level disinfectant

3. Non-critical items that are potentially damaged by disinfectant should have disposable barrier protection
4. All areas that are difficult to disinfect should have barrier placement
5. Instruments should be placed in an appropriate container at the point of use to prevent percutaneous injuries during transport to the instrument processing area.
6. The central processing area should be divided into sections for receiving, cleaning and decontamination, preparation and packaging, sterilization, and storage.
7. Dental healthcare workers should wear puncture-resistant, heavy-duty utility gloves when handling and cleaning contaminated instruments.
8. Store clean supplies, and instruments in closed or covered cabinets.

#### PARKLAND COLLEGE DENTAL HYGIENE CLINIC STANDARD GUIDELINES:

- Instruments are transported in cassettes on trays with locking tray covers
- Utility gloves are used to carry or handle contaminated cassettes
- The processing area is divided into a contaminated counter and a non-contaminated counter
- The instruments are placed in an ultrasonic tank for 20 minutes. When removed, they are rinsed under running water. The cassette is dried with a paper towel.
- Visible debris, after ultrasonic, must be scrubbed with designated brushes
- Cassettes must be dried before being wrapped.
- Carts will transport instruments to and from the sterilizing process area
- Contaminated carts are placed near the contaminated counter, and sterilized carts are placed by the non-contaminated counter
- Use forceps to remove items that have fallen into ultrasonic tanks
- Mask, face shield, protective eyewear, and disposable gown should be worn during instrument processing.
- Place a sterilizing indicator into contaminated instrument cassette, wrap with blue sheets, tape with heat activated masking tape. Set on contaminated tray on cassette's edge.
- Wrap individual instruments in sterilizing pouch. Include an indicator strip.
- Date all items

8/2024 "SOP – Sterilization" LH

#### 4. **PROCEDURE: Environmental Infection Control**

CDC STANDARD1: Page 25-28

UPDATED: August 2024

##### CDC GUIDELINES

1. Environmental surfaces (items that do not contact patients directly) require barrier protection, cleaning, or disinfection to prevent the transfer of microbial agents.
2. Cleaning is the first step to remove debris and visible soils. The second step is disinfection
3. Barriers are ideal for items that are difficult to clean and are removed between patients. Surfaces are only cleaned if contamination is evident.
4. If barriers are not used, the surface should be cleaned and disinfected between patients with EPA hospital disinfectant with HIV, HBV (low-level disinfectant), or tuberculocidal claim. (intermediate-level disinfectant).

5. Intermediate-level disinfectant is used when the surface is visibly contaminated with blood or Other Possibly Infectious Material (OPIM).
6. Housekeeping surfaces should be cleaned with detergent and water unless the potential for contamination is possible.
7. Properly maintain ventilation systems.
  - Consult with facilities operation staff or an HVAC professional
  - Consider using a portable high-efficiency particulate air (HEPA) air filtration unit while the patient is undergoing and immediately following an aerosol-generating procedure.
  - Consider the use of upper-room ultraviolet germicidal irradiation (UVGI) as an adjunct to higher ventilation and air cleaning rates.
8. Patient placement
  - Ideally, dental treatment should be provided in individual patient rooms, whenever possible
  - For dental facilities with open floor plans, to prevent the spread of pathogens there should be:
    - At least 6 feet of space between patient chairs.
    - Physical barriers between patient chairs. Easy-to-clean floor-to-ceiling barriers will enhance effectiveness of portable HEPA air filtration systems
    - Operatories should be oriented parallel to the direction of airflow if possible.
  - Where feasible, consider patient orientation carefully, placing the patient's head near the return air vents, away from pedestrian corridors, and toward the rear wall when using vestibule-type office layouts.
9. Patient volume
  - Ensure to account for the time required to clean and disinfect operatories between patients when calculating your daily patient volume.
10. Routine cleaning and disinfection procedures are appropriate for SARS-CoV-2 in healthcare settings, including those patient-care areas in which aerosol generating procedures are performed.

#### PARKLAND COLLEGE DENTAL HYGIENE CLINIC STANDARD GUIDELINES:

- Unit Barriers: chair, saliva ejector, air water syringe, lower instrument tray (plastic barrier and sterile blue wrap), light switch and handles, cavitron (plastic bag barrier)
- Unit No Barriers: top tray (paper placemat only)
- Any non-essential items exposed to aerosols should be placed in a drawer or cabinet.
- Surfaces without barriers or visibly soiled are disinfected between patients (two-wipe method)
- Housekeeping surfaces are cleaned/swept daily following the clinical assistant's daily list of housekeeping items
- HVAC professionals will maintain the system
- Patients will be placed six feet apart
- Chair barriers are placed between units for added protection
- Portable air filtration units are utilized for additional air filtration during patient treatment. High-speed evacuation is used with any aerosol-producing procedure.

8/2024 "SOP Environmental" LH

<sup>1</sup>Department of Health and Human Services. Centers for Disease Control and Prevention. (2003). *Morbidity and Mortality Weekly Report: Guidelines for Infection Control in Dental Health Care Settings*. (December 19, 2003. Vol 52. Publication No RR-17. ISSN 1057-5987). Washington, DC: U.S. Government Printing Office.

<sup>2</sup>Updates from "Infection Control Guidance: SARS-CoV-2"

<https://www.cdc.gov/covid/hcp/infectioncontrol/index.html#:~:text=Dental%20treatment%20should%20be%20provided,of%20space%20between%20patient%20chairs>

## **PROCEDURE: Dental Unit Waterline Protocol**

**General Guidelines** from Department of Health and Human Services. Centers for Disease Control and Prevention. (2003). Morbidity and Mortality Weekly Report: Guidelines for infection control in the dental health care settings. (December 19, 2003. Vol 52. Publication No RR-17. ISSN 1057-5987). Washington, DC: U.S. Government Printing Office.

1. Identify your water source
2. Consult with the manufacturer for appropriate methods and equipment to maintain your specific equipment or treatment product
3. Flush all waterlines for a minimum of 30 seconds before and after each patient for an device connected to the water system that enters the patient's mouth
4. Avoid heating the water
5. Use a separate water reservoir system
6. Consult with manufacturer for periodic maintenance schedules
7. Use sterile solutions for all surgical procedures
8. Follow recommendations for monitoring water quality
9. In case of a boiled water advisory, do not use municipal water in dental operative unit or other equipment that uses public water systems

### **Specific CDC Dental Unit Water Line Recommendations**

1. Policies and procedures are in place for maintaining dental unit water quality that meets Environmental Protection Agency regulatory standards for drinking water (ie,  $\leq 500$  colony forming units/ml of heterotrophic water bacteria) for routine dental treatment output water.
2. Policies and procedures are in place for using sterile water as a coolant/irrigant when performing surgical procedures such as biopsy, periodontal surgery, apical surgery, implant surgery and surgical extractions of teeth.
3. Written policies and procedures are available outline response to a community boil-water advisory.

### **Parkland College Waterline Maintenance**

#### Water Bottle Maintenance – Start of the Day

1. After washing your hands and donning gloves remove the bottle from the unit, add distilled water and wash the inside of the bottle, dump water in the sink.
2. Fill the bottle with distilled water and return to the unit.
3. Wipe down the outside of the DentaPure cartridge with a clean paper towel and attach the water bottle to the unit.
4. Run each line 2 minutes each morning/afternoon (perform a 20-30 seconds flush between patients) into a cup. Empty contents into sink.

#### Water Bottle Maintenance – End of the day

5. Empty the bottle, and place the empty bottle back on the manifold

#### Waterline Testing -Quarterly

1. Flush all line with a half bottle of untreated water before taking test samples.
2. Fill plastic case using water from each water source line.
3. Place the paddle firmly back in the plastic case and lay it grid side down for 30 seconds.
4. Remove the paddle, empty out the ater and shake excess water from the paddle.

5. Reinsert the paddle into the pastic case and lay grid side dodwn for 48-72 hours at (77-95 degrees fahrenheit)
  - a. Do not touch the white and black media filter or the inside of the plastic case.
  - b. Place the test kit in an area out of direct sunlight where it will be undisturbed.
  - c. Label the clear plastic case with permanent marker noting room number and test date
  - d. It is normal for the media filter to turn dark in color after water immersion.
  - e. Record results and maintain for three years.

### **Shocking Dental Water Lines- (due to a failed test)**

#### Day 1

1. Turn off unit. With clean hands and gloves remove water bottle and drain if necessary.
2. Remove DentaPure cartridge and store in a ziplock bag.
3. Add Crosstex Liquid Ultra Solution bottle #1 solution (3 ounces) & bottle #2 solution (3 ounces) to empty unit water bottle and stir.
4. Run Liquid Ultra mixture through the system until the pink solution appears at the end of each air/water syringe and hand piece lines. Place all lines in a cup on unit for potential drippage.
5. Allow Liquid Ultra to remain in water line overnight (not more than 24 hours).

#### Day 2

1. Drain pink solution from lines into bucket. Rinse unit bottle with distilled water and empty three times
2. Add distilled water into unit water bottle until full. Flush lines until the water runs clear and the bottle is empty

#### Day 3 – Test Waterlines again (see waterline testing)

### Boil Water Advisory Protocol

- All units use an independent water supply. Continue this during a boil water advisory
- Only use alcohol-based hand cleansers for hand hygiene during a boil water advisory. Use spring water with soap if necessary.
- After a boil water advisory is over, all dental faucets should be flushed for a minimum of 5 minutes.

### **Personal Information Protection for HIPAA**

Parkland College Health Professions Department will implement and adhere to the HIPAA Act of 1996. All students who will be attending to patients/clients will receive HIPAA education and training. It is the practice and philosophy of the Health Professions programs to protect the interest of patients and to fulfill the legal obligations mandated under HIPAA.

#### Definition

Protected Health Information (PHI) is any information that identifies an individual AND relates to:

1. The individual's past, present or future physical or mental health; OR
2. The provision of health care to the individual; OR
3. The past, present or future payment for health care.



Information is deemed to identify an individual if it includes either the patient's name or any other information taken together that enables someone to determine an individual's identity, such as, date of birth, gender, medical record number, address, phone number, email address, social security number, or full-face photograph.

1. All patient records (the chart, the surgical schedule and any other information, verbal or written, and any notes taken from the record of facility) are confidential.
2. Students must be protective of patient information once it is removed from the clinical setting. (i.e., notes not left on desks, in classrooms, in cafeterias, or out for any public viewing). No patient names will at any time be removed from the clinical facility.
3. Students must not identify patients, surgical team members or other persons by name in written work, notes or other exercises for learning purposes. In such instances, the use of initials is appropriate.
4. Students will not discuss patients, staff or care issues in public (i.e., with friends or family, or in public places such as the shuttle bus, cafeterias, lounges, bars, restaurants, hairdresser, etc.).

#### Implications for Students

HIPAA has important implications for Health Profession students and their education. Protecting the privacy of your patients' health information must be foremost in your mind as you are considering how you will communicate what you are learning with faculty, clinical staff, and fellow students. When preparing case specific presentations, papers, discussions, and reports, you must avoid disclosing patient information that could identify the patient.

#### Consequences

Students providing information to the media will be dismissed immediately.

The student will receive a written warning when the HIPAA violation appears accidental (such as leaving a chart open).

The student will be expelled if a willful HIPAA violation occurs, such as looking up information on a patient without good reason; taking pictures of images with a cell phone, etc.

Any violation of confidentiality may result in removal from a clinical site and dismissal from the program.

Please see the entire HIPAA compliance policy posted in every Cobra course.

***All students will review the HIPAA policy at Parkland College, pass an assessment test, and sign the HIPAA agreement, prior to attending clinical.***

#### **HIPAA Identifiers**

Information is deemed to identify an individual if it includes either the *patient's name* or any other information that taken together could enable someone to determine an individual's identity such as:

- *Names*
- *ALL geographic subdivisions smaller than the state*
- *All elements of dates smaller than a year (i.e. birth date, admission, discharge, death, etc.)*

- *Phone numbers*
- *Fax numbers*
- *E-mail addresses*
- *SS numbers*
- *Medical record number*
- *Health plan beneficiary*
- *Any other account numbers*
- *Certificate/license numbers*
- *Vehicle identifiers*
- *Device identification numbers*
- *WEB URL's*
- *Internet IP address numbers*
- *Biometric identifiers (fingerprint, voice prints, retina scan, etc)*
- *Full face photographs or comparable images*
- *Any other unique number, characteristic or code.*

## **Parkland College Dental Hygiene Program Notice of Privacy Practices Patient Information**

This Notice describes how health information about you possessed by the Parkland College Dental Hygiene Program (Program) and the Parkland College Dental Hygiene Clinic (Clinic) (collectively we) may be used and disclosed and how you can get access to this information. Please review it carefully. The privacy of your health information is important to us.

### **1. Our Legal Duty**

We are required by applicable Federal and State law to maintain the privacy of your health information. We are also required to make available our privacy practices, our legal duties, and your rights concerning your health information. We must follow the privacy practices that are described in this Notice while it is in effect. This Notice took effect April 14, 2003, and will remain in effect until we replace it.

We reserve the right to change our privacy practices and to change the terms of this Notice at any time, provided such changes are permitted by applicable law. We reserve the right to make the changes in our privacy practices and the new terms of our Notice effective for all health information that we maintain, including health information we created or received before we made the changes. Before we make a significant change in our privacy practices, we will change this Notice, post any revised Notice at the Parkland College Dental Clinic and on our Web Site and make the new Notice available upon request.

You may request a copy of our Notice at any time. For more information about our privacy practices, or for additional copies of this Notice, please contact us using the information listed at the end of this Notice.

### **2. Uses and Disclosures of Health Information**

We use and disclose health information about you for treatment, payment, and healthcare operations (collectively TPO). For example:

**Treatment:** We may use or disclose your health information to a dentist, dental hygienist, faculty member, Program student or other healthcare provider providing treatment to you.

**Payment:** We may use and disclose your health information to obtain payment for services we provide to you.

**Healthcare Operations:** We may use and disclose your health information in connection with our healthcare operations. Clinic healthcare operations include quality assessment and improvement activities, reviewing the competence or qualifications of dentists, dental hygienists, faculty members, Program students and other healthcare professions, evaluating practitioner and provider performance, conducting educational training programs, accreditation, certification, licensing or credentialing activities.

**Your Authorization:** In addition to our use of your health information for treatment, payment or healthcare operations, you may give us written authorization to use your health information or to disclose it to anyone for any purpose. If you give us an authorization, you may revoke it in writing at any time. Your revocation will not affect any use or disclosures permitted by your authorization while it was in effect. Unless you give us a written authorization, we cannot use or disclose your health information for any reason except those described in this Notice.

**To Your Family and Friends:** We must disclose your health information to you, as described in the Patient Rights section of this Notice. We may disclose your health information to a family member, friend or other person to the extent necessary to help with your healthcare or with payment for your healthcare, but only if you agree that we may do so.

**Persons Involved In Care:** We may use or disclose health information to notify, or assist in the notification of (including identifying or locating) a family member, your personal representative or another person responsible for your care, of your location, your general condition, or death. If you are present, then prior to use or disclosure of your health information, we will provide you with an opportunity to object to such uses or disclosures. In the event of your incapacity or emergency circumstances, we will disclose health information based on a determination using our professional judgment disclosing only health information that is directly relevant to the person's involvement in your healthcare. We will also use our professional judgment and our experience with common practice to make reasonable inferences of your best interest in allowing a person to pick up x-rays, or other similar forms of health information.

**Marketing Health-Related Services:** We will not use your health information for marketing communications without your written authorization.

**Required by Law:** We may use or disclose your health information when we are required to do so by law.

**Abuse or Neglect:** We may disclose your health information as allowed by law to appropriate authorities if we reasonably believe that you are a possible victim or abuse, neglect, or domestic violence or the possible victim of other crimes. We may disclose your health information as allowed by law to the extent necessary to avert a serious threat to your health or safety or the health or safety of others.

**National Security:** We may disclose the health information of Armed Forces personnel to military authorities under certain circumstances. We may disclose health information required for law intelligence, counterintelligence, and other national security activities to authorized federal officials. We may disclose protected health information to a correctional institution or law enforcement official having lawful custody of an inmate or patient under certain circumstance allowed by law.

**Appointment Reminders:** We may use or disclose your health information to provide you with appointment reminders (such as voicemail messages, postcards, or letters).

### 3. Patient Rights.

**Access:** You have the right to look at or get copies of your health information, with limited exceptions. You may request that we provide copies in a format other than photocopies. We will use the format you request unless we cannot practically do so. You must make a request in writing to obtain access to your health information. You may obtain a form to request access by using the contact information listed at the end of this Notice. You may also request access by sending us a letter to the address at the end of this Notice. If you request an alternative format that we are able to provide, we will charge a cost-based fee for providing your health information in that format. If you prefer, we will prepare a summary or an explanation of your health information.

**Disclosure Accounting:** You have the right to receive a list of instances in which we disclosed your health information for purposes other than treatment, payment, healthcare operations and certain other activities as permitted by law.

**Restriction:** You have the right to request that we place additional restrictions on our use or disclosure of your health information. We are not required to agree to these additional restrictions, but if we do, we will abide by our agreement (except in an emergency).

**Alternative Communication:** You have the right to request that we communicate with you about your health information by alternative means or to alternative locations. You must make your request in writing. Your request must specify the alternative means or location, and provide satisfactory explanation how payments will be handled under the alternative means or location you request.

**Amendment:** You have the right to request that we amend your health information. Your request must be in writing, and it must explain why the information should be amended. We may deny your request under certain circumstances as permitted by law.

**Electronic Notice:** If you receive this Notice on our Web site or by electronic mail (e-mail), you are entitled to receive this Notice in written form.

## QUESTIONS AND COMPLAINTS

If you want more information about our privacy practices and procedures or have questions or concerns, please contact us.

If you are concerned that we may have violated your privacy rights, or you disagree with a decision we made about access to your health information or in response to a request you made to amend or restrict the use or disclosure of your health information or to have us communicate with you by alternative means or at alternative locations, you may complain to us using the contact information listed at the end of this Notice. You also may submit a written complaint to the U.S. Department of Health and Human Services. We will provide you with the address to file your complaint with the U.S. Department of Health and Human Services upon request.

We support your right to the privacy of your health information. We will not retaliate in any way if you choose to file a complaint with us or with the U.S. Department of Health and Human Services.

Parkland College - Dental Hygiene Clinic 2400 West Bradley Avenue  
Champaign, IL 61821  
Privacy Officer – Laura Hettinger, RDH, MSDH (217) 353-2160  
Fax: (217) 373-3830

## **HEALTH INFORMATION PRIVACY POLICIES AND PROCEDURES**

Parkland College--Dental Hygiene Clinic 2400 W. Bradley Ave.

Champaign, IL 61821

Privacy Officer: Laura Hettinger, RDH, MSDH

These Health Information Privacy Policies and Procedures (Policies and Procedures) implement the Parkland College Dental Hygiene Program (Program) and the Parkland College Dental Clinic's (Clinic's) obligations to protect the privacy of protected health information (PHI) that we create, receive, or maintain as a healthcare provider.

We implement these Health Information Privacy Policies and Procedures as a matter of sound business practice, to protect the interests of our patients, and to fulfill our legal obligations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), its implementing regulations at 45 CFR Parts 160 and 164 (Privacy Rules), and State law that provides more stringent protection or rights to patients than the Privacy Rules.

As a member of our faculty, staff or workforce, including without limitation, our Program students, you are obligated to follow these Policies and Procedures. Failure to do so can result in disciplinary action, including, without limitation, employment termination, academic course failure or student dismissal from the Program.

These Policies and Procedures address the basics of HIPAA and the Privacy Rules that apply in our Clinic. They do not attempt to cover everything in the Privacy Rules. The Policies and Procedures sometimes refer to forms we use to help implement the policies and to the Privacy Rules themselves when added detail may be needed.

Please note that while the Privacy Rules speak in terms of "individual" rights and actions, these Policies and Procedures use the more familiar word "patient" instead; "patient" should be read broadly to include prospective patients, patients of record, former patients, patients' authorized representatives, and any other "individuals" contemplated in the Privacy Rules.

If you have questions or doubts about any use or disclosure of individually identifiable health information or about your other obligations under these Privacy Policies and Procedures, the Privacy Rules or other federal or state law, consult Laura Hettinger at 217-353-2160 or by email at [lhettinger@parkland.edu](mailto:lhettinger@parkland.edu).

Adopted Effective: April 13, 2003

### 1. General Rule: No Use or Disclosure

Our Clinic must not use or disclose PHI except as these Privacy Policies and Procedures permit or require.

### 2. Acknowledgement

Our Clinic will make a good faith effort to obtain a written Acknowledgement of access to our Notice of Privacy Practices (see Paragraph 9) from a patient before we use or disclose his or her PHI for treatment, payment for that treatment, or for our healthcare operations (collectively referred to as TPO).

Our Clinic's use or disclosure of PHI for our payment activities and healthcare operations may be subject to the minimum necessary requirements (see Paragraph 7).

### 3. Authorization

In some cases we must have written Authorization from the patient (or the patient's personal representative) before we use or disclose a patient's PHI for any purpose (except for TPO purposes) or as permitted or required by law without consent or authorization (see Paragraphs 3, 4, or 5).

Our Clinic has prepared an Authorization form and we will act in accordance with that Authorization.

- a) Authorization Revocation – A patient may revoke an Authorization at any time by written notice. Our Clinic will not rely on an Authorization we know has been revoked.
- b) Authorization from Another Provider – Our Clinic will use or disclose PHI as permitted by a valid Authorization we receive from another healthcare provider.

Our Clinic may rely on that healthcare provider to have requested only the minimum necessary protected PHI. Therefore, our Clinic will not make our own minimum necessary determination, unless we know that the Authorization is incomplete, contains false information, has been revoked or has expired.

- c) Authorization Expiration – Our Clinic will not rely on an Authorization we know to be expired.

### 4. Oral Agreement

Our Clinic may use or disclose a patient's PHI with the patient's oral agreement or if the patient is unavailable when allowed by law. Our Clinic will document a patient's oral agreement.

Our Clinic faculty may use professional judgment and our experience with common practice to make reasonable inferences as to the patient's best interest in allowing a person to act on behalf of the patient to pick up PHI including, without limitation, dental records, X-rays, or other similar records.

### 5. Use and Disclosure Permitted Without Acknowledgement, Authorization or Oral Agreement

Our Clinic may use or disclose a patient's PHI in certain situations, without Authorization or Oral Agreement as allowed by law.

- a) Verification of Identity – Our Clinic will verify the identity of any patient, and the identity and authority of any patient's personal representative, government or law enforcement official, or other person, unknown to us, who requests PHI before we will disclose the PHI to that person. Our Clinic will obtain appropriate identification and, if the person is not the patient, evidence of the person's authority. Examples of appropriate identification include photographic identification card, government identification card or badge, or an appropriate document on government letterhead. Our Clinic will document the PHI request and how we responded.
- b) Uses or Disclosures Permitted under this Paragraph 5 – The situations in which our Clinic is permitted to use or disclose PHI in accordance with the procedures set out in this Paragraph 5 are listed below.

Our Clinic may disclose a patient's PHI to that patient on request.

Our Clinic may disclose to a patient's personal representative PHI relevant to the representative capacity. We will not disclose to a personal representative we reasonably believe may be abusive to a patient any PHI we reasonably believe may promote or further such abuse.

Our Clinic will not use or disclose a patient's PHI for fundraising purposes without the patient's Authorization.

Our Clinic will not use or disclose PHI for marketing without a patient's Authorization unless the marketing is in the form of a promotional gift of nominal value that we provide, or face-to-face communications between the patient and us.

Our Clinic may use or disclose PHI as required by law in the following types of situations, provided procedures specified in the Privacy Rules are followed:

For public health activities; To health oversight agencies;  
To coroners, medical examiners, and funeral directors; To employers regarding work-related illness or injury; To the military;  
To federal officials for lawful intelligence, counterintelligence, and national security activities;  
To correctional institutions regarding inmates;  
In response to subpoenas and other lawful judicial processes; To law enforcement officials;  
To report abuse, neglect, or domestic violence;  
As authorized by State worker's compensation laws As part of research projects; and  
As otherwise required by law.

#### 6. Required Disclosures

Our Clinic will disclose PHI to a patient (or to the patient's personal representative) to the extent that the patient has a right of access to the PHI (see Paragraph 10); and to the U.S. Department of Health and Human Services (HHS) on request for complaint investigation or compliance review.

Our Clinic will create and use a PHI disclosure log to document each disclosure we make to HHS.

#### 7. Minimum Necessary Standard

Our Clinic will make reasonable efforts to disclose, or request, only the minimum necessary PHI from another health care provider or entity covered by HIPAA (Covered Entity) to accomplish the intended purpose.

There is no minimum necessary requirement for the following:

Disclosures to or requests by another person in our Clinic or by a healthcare provider for treatment; Permitted or required disclosures to or for disclosure requested and authorized by a patient;



Disclosures to HHS for compliance reviews or complaint investigations; disclosures required by law; or

Uses or disclosures required for compliance with the HIPAA Administrative Simplification Rules. The minimum necessary requirement will apply as follows:

- a) Routine or Recurring Requests or Disclosures – Our Clinic will follow the policies and procedures that we adopt to limit our routine or recurring requests for our disclosures of PHI to the minimum reasonably necessary for the purpose.
- b) Non-Routine or Non-Recurring Requests or Disclosures – No non-routine or non-recurring request for or disclosure of PHI will be made until it has been reviewed on a patient-by-patient basis against our criteria to ensure that only the minimum necessary PHI for the purpose is requested or disclosed.
- c) Other’s Requests – Our Clinic will rely, if reasonable for the situation, on a request to disclose PHI being for the minimum necessary, if the requester is: (1) a covered entity; (2) a professional (including an attorney or accountant) who provides professional services to our practice, either as a member of our workforce or as our Business Associate, and who represents that the requested information is the minimum necessary; (3) a public official who represents that the information requested is the minimum necessary; or (4) a researcher presenting appropriate documentation or making appropriate representations that the research satisfies the applicable requirements of the Privacy Rules.
- d) Entire Record – Our Clinic will not use, disclose, or request an entire record, except as permitted in these Policies and Procedures or standard protocols that we adopt reflecting situations when it is necessary.
- e) Minimum Necessary Workforce Use – Our Clinic will use only the minimum necessary PHI needed to perform our duties.

## 8. Business Associates

Our Clinic will identify its Business Associates, if any, and will ask Parkland College Administration (the College) to obtain satisfactory assurance in the form of a written contract that our Business Associates will appropriately safeguard and limit their use and disclosure of the protected health information (PHI) we disclose to them.

These Business Associate requirements are not applicable to our disclosures to a healthcare provider for treatment purposes. Any Business Associate Contract will contain terms required in the Privacy Rules.

Breach by Business Associate – If our Clinic learns that a Business Associate has materially breached or violated its Business Associate Contract with College, we will notify the College so that it may take prompt, reasonable steps to see that the breach or violation is cured. If the Business Associate does not promptly and effectively cure the breach or violation, the College may terminate the Business Associate contract, or if contract termination is not feasible, report the Business Associate’s breach or violation to the U.S. Department of Health and Human Services (HHS).

## 9. Notice of Privacy Practices

Our Clinic will maintain a Notice of Privacy Practices as required by the Privacy Rules.

- a) Our Notice – Our Clinic will use and disclose PHI only in conformance with the contents of our Notice of Privacy Practices and these Policies and Procedures. We will promptly revise a Notice of Privacy Practices whenever in our professional judgment there should be a change in our uses or disclosures of PHI as permitted by law, a change in our legal duties, a change in the patients’ rights or to other privacy practices that render the statements in that Notice no longer accurate.
  
- b) Distribution of Our Notice – Our Clinic will have our Notice of Privacy Practices available for patients, will provide our Notice of Privacy Practices to any person who requests it and to each patient no later than the date of our first professional service delivery for such patient on and after April 14, 2003.

We will also post our Notice of Privacy Practices on our Web Site and in a clear and prominent location at our Clinic where it is reasonable to expect patients seeking services from us will be able to read the Notice.

- c) Acknowledgement of Notice – Our Clinic will make a good faith effort to obtain a written Acknowledgement of receipt of our Notice of Privacy Practices from the patient and, failing that, document our Clinic’s attempt to obtain such Acknowledgement.

## 10. Patients’ Rights

Our Clinic will honor the rights of patients as required by law regarding their PHI.

- a) Access – With rare exceptions, our Clinic must permit patients to request access to the PHI our Business Associates or we possess.

No PHI will be withheld from a patient seeking access unless we confirm that the information may be withheld according to the Privacy Rules. We may offer to provide a summary of the PHI in the chart. The patient must agree in advance to receive a summary and to any fee we will charge for providing the summary. If necessary our Clinic will contact Business Associates to retrieve any PHI not in our Clinic’s possession they may have with respect to the patient.

- b) Amendment – Patients have the right to request to amend their PHI for as long as our Clinic maintains such information.

Our Clinic may deny a request to amend PHI or records if: (1) we did not create the information (unless the patient provides us a reasonable basis to believe that the originator is not available to act on a request to amend); (2) we believe the information is accurate and complete; or (3) we do not have the information.

Our Clinic will follow procedures required by the Privacy Rules for denial or approval of amendment requests. We will not, however, physically alter or delete existing notes in a patient's chart. We will inform the patient when we agree to make an amendment, and we will contact our Business Associates, if any, to help assure that any PHI they possess for the patient is appropriately amended. We will contact any individuals whom the patient requests we alert to any agreed amendment to the patient's PHI. If we agree to an amendment, we will also contact any individuals or entities of which we are aware that we have sent unamended information and who may have acted on the unamended information to the detriment of the patient.

When we deny a request for an amendment, we will mark any future disclosures of the contested information in a way acknowledging the patient's amendment request.

- c) Disclosure Accounting – Patients have the right to an accounting of certain disclosures our Clinic made of their PHI within the 6 years prior to their request. Each disclosure we make, that is not for treatment payment or healthcare operations, must be documented showing the date of the disclosure, what was disclosed, the purpose of the disclosure, and the name and (if known) address of each person or entity to whom the disclosure was made. The Authorization or other documentation must be included in the patient's record. We use the patient's chart to track each disclosure of PHI as needed to enable us to fulfill our obligation to account for these disclosures.

We are not required to account for disclosures we made: (1) before April 14, 2003; (2) to the patient (or the patient's personal representative); (3) to or for notification of persons involved in a patient's healthcare or payment for healthcare; (4) for treatment, payment, or healthcare operations; (5) for national security or intelligence purposes; (6) to correctional institutions or law enforcement officials regarding inmates; (7) according to an Authorization signed by the patient or the patient's representative; or, (8) incident to another permitted or required use disclosure.

We will temporarily suspend the accounting of any disclosure when requested to do so pursuant to the Privacy Rules by health oversight agencies or law enforcement officials. We may charge for any accounting that is more frequent than once in any 12-month period, provided the patient is informed of the fee before the accounting is provided. We will contact our Business Associates, if any, to assure we include in the accounting any disclosures made by them for which we must account.

- d) Restriction on Use or Disclosure – Patients have the right to request our Clinic to restrict use or disclosure of their PHI, including for treatment, payment, or healthcare operations. We have no obligation to agree to the request, but if we do, we will comply with our agreement (except in an appropriate emergency).

We may terminate an agreement restricting use or disclosure of PHI by a written notice of termination to the patient. We will contact our Business Associates, if any, whenever we agree to such a restriction to inform a Business Associate of the restriction and its obligations to abide by the restriction. We will document any such agreed to restrictions in the patient's chart.

- e) Alternative Communications – Patients have the right to request us to use alternative means or alternative locations when communicating PHI to them. Our Clinic will accommodate a patient’s request, if reasonable, for such alternative communications if the request is in writing.

Our Clinic will inform the patient of our decision to accommodate or deny such a request. If we agree to such a request, we will inform our Business Associates of the agreement and provide them with the information necessary to comply with the agreement.

#### 11. Staff Training and Management, Complaint Procedures, Data Safeguards, Administrative Practices Staff Training and Management

Training – We will train members of our faculty, staff and workforce including, without limitation, our Program students in these Privacy Policies and Procedures, as necessary and appropriate for them to carry out their functions.

We will train each new member of our faculty, staff and workforce including, without limitation, our Program students within a reasonable time after the member starts. We will also retain each person whose functions are affected either by a material change in our Privacy Policies and Procedures or in the person’s job functions, within a reasonable time after the change.

We will document that our faculty, staff and workforce including, without limitation, our Program students have received and read a copy of these Policies and Procedures.

Discipline and Mitigation – Our Clinic will develop, document, disseminate, and implement appropriate disciplinary policies for our faculty, staff and workforce including, without limitation, our Program students who violate our Privacy Policies and Procedures, the Privacy Rules, or other applicable Federal or State privacy law.

Faculty, staff and workforce including, without limitation, our Program students who violate our Privacy Policies and Procedures, the Privacy Rules or other applicable Federal or State privacy law will be subject to disciplinary action including, without limitation, termination of employment or Program dismissal.

- b) Complaints – Our Clinic will implement procedures and provide appropriate forms for patients to complain about our compliance with our Privacy Policies and Procedures or the Privacy Rules. We will also implement procedures to investigate and resolve such complaints.

A patient may lodge a complaint using our Clinic’s complaint form. Each complaint received must be referred to a Program co-director immediately for investigation and resolution. We will not retaliate against any patient, member of our faculty, staff and workforce including, without limitation, our Program students who file a Complaint in good faith.

- c) Data Safeguards – Our Clinic will amend these Privacy Policies and Procedures when HIPAA security policies and procedures are implemented.

Our Clinic will take reasonable steps to limit incidental uses and disclosures of PHI made according to an otherwise permitted or required use or disclosure.

- d) Documentation and Record Retention – Our Clinic will maintain in written or electronic form all documentation required by the Privacy Rules for six years from the date of

creation or when the document was last in effect, whichever is greater.

- e) Privacy Policies and Procedures Amendment –These Privacy Policies and Procedures may be amended on with the approval of our Program co-directors and Department Chairperson.

## 12. State Law Compliance

Our Clinic will comply with Illinois state laws that provide more stringent protections or rights to patients than the Privacy Rules.

## 13. HHS Enforcement

Our Clinic will give the U.S. Department of Health and Human Services (HHS) access to our facilities, books, records, accounts, and other information sources (including PHI without patient authorization or notice) during normal business hours (or at other times without notice if HHS presents appropriate lawful administrative or judicial process).

We will cooperate with any compliance review or complaint investigation by HHS, while preserving the rights of our practice.

## 14. Designated Personnel

Our Clinic will designate a Privacy Officer and other responsible persons as required by the Privacy Rules.

## **Ionizing Radiation Policies and Procedures**

### **A. OPERATOR SAFETY**

#### **1. Maximum Permissible Dose (MPD) and Maximum Accumulated Dose (MAD)**

a. To assure the optimum safety for all personnel and students, the maximum permissible dose (MPD) shall not exceed 100 mR per week. Maximum 13-week dose is 3R and maximum accumulated dose for a year is 5R as governed by this formula: maximum accumulated dose equals  $5(N-18)$ , where N equals the age of the worker.

b. Pregnant personnel and students will notify the program director of their pregnancy. The pregnant person will be informed by the Directors and the Radiation Safety Officer of the hazard areas to avoid and will be closely monitored.

#### **2. Operation of Equipment**

a. Dental x-ray equipment will be operated only with the supervision of the faculty during class/lab time or during remedial sessions.

b. The students will never remain in the room or hold an image receptor during x-ray exposure.

c. Students must demonstrate knowledge of radiation safety measures prior to making any radiographic exposures.

#### **3. Technique and Exposure Factors**

a. The paralleling technique is recommended for all intra-oral periapical radiographs. The XCP

holding device with rectangular collimator and lead diaphragm in the P.I.D or cone is recommended. In cases where use of the paralleling technique is not possible, the bisecting angle technique will be used.

- b. A chart of impulse settings is listed in each treatment room as determined by IEMA.

#### **4. Positioning of Operator**

All personnel and students operating the x-ray equipment will stand at least 6 feet away from the source of radiation behind a lead barrier during exposure.

#### **5. Supervision of students**

- a. Students in DHG 117 Dental Radiology labs will be directly supervised while they are using radiation.
- b. Students in clinical courses must have qualified for exposing radiographs through the successful completion of an accredited course in oral radiology. In clinical courses, the clinical instructor will intermittently supervise the students' use of radiation. Instructors will verify the exposure setting, P.I.D length and shape, and image receptor placements and then return frequently for continued supervision.
- c. Students are encouraged to ask for assistance with image receptors as needed. Retake images will be exposed only under the direct supervision of the clinical instructor. During the last 8 weeks of the clinical course DHG 219 Clinic IV, students are expected to expose retake images without instructor assistance.
- d. The number and reason for retakes will be monitored. Any dental hygiene student who has 4 or more retakes due to the same error within a semester will be required to have remedial instruction with the course or lab instructor.

#### **6. Regulations**

- a. The program is in compliance with the State of Illinois and the Federal Laws related to radiation. The following references are used:

- 1) Federal Health and Safety Act of 1969
- 2) NCRP #35 on X-Ray Protection
- 3) A.D.A. Regulation on Acceptable Practices
- 4) Rules and Regulations for Protection against Radiation, by Illinois Department of Public Health.

#### **7. A.L.A.R.A. Concept**

All personnel and students will receive x-ray exposures as low as reasonably achievable. The design of the facilities incorporated lead walls for barriers to radiation, by providing a totally safe environment for the operator. Human error is the only contributing factor to operator exposure. Radiographs will be exposed only to provide a direct health care benefit to the patient, not only to meet course objectives or requirements. Students, personnel or patients will not be exposed solely for the purpose of teaching radiographic technique.

### **B. PATIENT SAFETY**

#### **1. Patient Selection Criteria**

- a. After a complete oral and dental examination, the patients' medical dental and oral histories are evaluated to determine previous radiation exposures and oral conditions.
- b. The need, extent, and frequency of radiography are determined by the ADA guidelines and confirmed by the supervising dentist. The guidelines that will be used to screen suitable patients are in chart A. Pregnant patients will not be radiographed unless a request is received from the patient's doctor or dentist
- c. No radiographs will be exposed for post-treatment analysis.
- d. Radiographs will be sent by secure email upon the request of the patient's dentist. A copy will be retained electronically in the patient's file. Patient radiographic images will be utilized during patient treatment.

## **2. Radiograph Acceptability**

The following are the criteria for radiographic acceptability. Retakes will be ordered if the following criteria are not met. Direct supervision by an instructor is required for all retakes except in the last 8 weeks of DHG 219, Clinic IV. During these last 8 weeks, the students are expected to expose retakes without instructor assistance.

### Periapical Surveys

- a. The radiograph should be an accurate representation of the area being radiographed.
- b. The radiograph should be within an acceptable density range, not too light or too dark as per our quality control system.
- c. The image of the teeth should be of the proper length – neither excessively foreshortened or elongated.
- d. There should be no overlapping of the interproximal spaces surrounding the roots of the teeth.
- e. There should be at least 3 mm of alveolar bone visible around the apex of each root.
- f. The apex plus 3 mm of bone of each root should be visible at least once in any CMX series for every tooth.
- g. There should be a 1/8 to 1/4 inch margin between the crown of each tooth and the edge of the image.
- h. There should be no excessive cone cuts. At least 2/3 of the digital image must have dental anatomy.

### For interproximal surveys: (Bitewings)

- a. The proximal tooth surfaces should not be overlapped from the distal of the canine to the mesial of the third molar. The premolar view should include open contacts between the maxillary 1st and 2nd premolar and the molar view should include open contacts between the maxillary 1st and 2nd molars.
- b. There should be an equal distribution of teeth in both maxillary and mandibular arches on the film.
- c. The crest of the alveolar bone in each interproximal space should be clearly visible.
- d. The occlusal plane should be straight or curved slightly upward in the distal portions of the image.
- e. The crowns of the teeth should be an accurate reproduction of the teeth being radiographed, and not magnified or distorted.

f. Premolar Interproximal Survey (bitewings) Radiograph should include the distal half of both canines, crowns of premolars, first molars and a portion of the second molar crowns. Retakes are necessary if the distal half of the canines is not visible, if excessive horizontal overlapping is present, if unequal distribution of maxillary and mandibular teeth exists, or if any other distortion exists that would render the image unacceptable for diagnosis.

g. Molar Interproximal Survey (bitewings) The radiograph should show all of the second and third molar crowns and at least the distal of the first premolar crown. Retakes are necessary if errors exist similar to premolar errors.

h. Retakes are not necessary if each proximal surface from the distal of the canine to the third molar is clearly visible at least once in the premolar or molar bitewings.

i. Retakes will be taken but will not be charged to the student's grade if overlapped contacts are judged by an instructor to be due to malpositions of the patient's teeth and not due to faulty horizontal angulations by the operator.

j. Exception: It is necessary to be able to view each proximal surface of the molars and premolars in at least one of the views of the CMX. Retakes are not necessary if each interproximal space between canines, premolar and molars is open at least one of the views of the premolar region, molar region or the bitewings.

k. In special cases of third molar periapical malpositions, the entire third molar may not be clearly visible in the molar region radiograph. The clinical dentist may recommend taking a panoramic image to best diagnose third molar areas.

### **3. Definitions:**

1. Excessive horizontal overlapping is defined as any super imposition of the crowns of the teeth such that the dentino- enamel junction is not visible in the appropriate proximal surfaces.
2. Excessive cone cut is defined as a cone cut in excess of 1/3 of the image.
3. Density range is defined as acceptable if the dentino-enamel junction is visible.
4. Excessive elongation is defined as evidence of the periodontal membrane space not visible at the apex of the tooth.

### **4. Preventative Equipment Checks**

- a. The lead apron and thyrocervical shield will be inspected annually for cracks or defects and repair or replacement made as needed. The inspection and necessary repairs will be documented. Annual inspection and subsequent documentation will be done by the instructor for DHG 117.
- b. A daily preventive inspection will be done by the DHG 117 instructor during the spring semester.

### **5. Exposure Settings**

- a. The paralleling technique is recommended for all intra-oral periapical radiographs. The XCP holding device and position indicating device (P.I.D. or cone) with rectangular collimator are recommended. In cases where the paralleling technique is not possible due to the patient's oral condition, the bisecting angle technique with a round cone can be used.
- b. The XCP holding device and the rectangular collimator with position indicating device (P.I.D. or cone) are recommended for bitewing images.
- c. All P.I.D. (cones) must provide at least a 12" source film distance.
- d. Impulse varying depends on the area to be radiographed. A chart of impulse settings is listed in each treatment room. The exposure factors match the guidelines of the Illinois Emergency Management Agency(IEMA).
- e. CCD sensors will be used to provide digital images on patients.



## **6. Lead Barriers**

- a. Each patient will wear a lead apron with a thyrocervical shield.
- b. Additional protection for the operator is provided by lead barriers and lead walls which separate all rooms.

## **7. Equipment Certified**

- a. All x-ray equipment will be inspected by the State of Illinois at least every five years. Equipment is registered with IEMA <http://www.illinois.gov/iema/NRS/RadSafety/Pages/Xray.aspx>.
- b. The equipment will be calibrated for beam quality, geometry and exposure rate and output. Records of each inspector will be kept with the radiation safety office.
- c. The x-ray generating equipment meets Federal Performance Standards and ADA specifications.

## **8. Asepsis**

- a. The disinfection of equipment and aseptic technique policies recommended for clinical patients will be used followed for x-ray patients:
- b. The CCD sensor will be covered with a barrier and disinfected after patient treatment.

## **9. Patient's Consent**

- a. The patient will sign Informed Consent in the electronic health record, giving informed consent to have radiographs taken by a dental auxiliary student under the supervision of the faculty. The clinical dentist's signature for approval will be included in the electronic health record as well.
- b. A record will be made of the number of images exposed. This information will be recorded on the patient's treatment sheet sequentially and cumulatively. A sequential list of exposures and the radiographs will be documented in the electronic record.
- c. All images will be securely emailed to the patient's dentist upon request.

## **10. Student Competency in DHG 117**

- a. Each student will meet competency on manikins during pre-clinic instruction before exposing images on patients. The students will demonstrate competency by exposing 3 complete series (CMX or FMX) of periapicals and 4 bitewings sets at 80%.
- b. After meeting competency exposing radiographs on manikins, the student will expose two complete sets of radiographs on patients with direct supervision at competency.
- c. Any students not meeting the above competency levels will be permitted additional practice during laboratory hours until competency is reached. If competency is not reached within the DHG 117 Dental Radiology Course, a grade of F is given and the student is not permitted to continue in the Dental Hygiene Program.

Student competency is also measured in DHG 215, Clinic II, DHG 218, Clinic III and DHG 219 Clinic IV.

## **VII. Student Conduct, Professional Behavior, Appearance and Standards**

### **Health Professions Code of Conduct**

Conduct standards for Health Professions are higher than those of the ordinary student or citizen because of the inherent responsibilities assumed by the health professional's role and the trust the public places on the Health Professions to do no harm. Therefore, issues such as professional and Interprofessional ethics, honesty, integrity, safety, and confidentiality are considered essential for practice in health professions and students will be held to the professional standards.

A graduate must be competent in the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research and patient care. If a student is found to be behaving in an unprofessional manner, the student will be removed from the classroom, lab or clinical site. This includes any actions that may be deemed unprofessional by the instructors or staff. Examples of unprofessional conduct include (but are not limited to): verbal or non-verbal language, actions, or voice inflection which compromises rapport with patients, family members, staff or instructors. This includes sexual innuendos or flirtatious behavior. Violations of these standards are serious and will result in the student being removed from the classroom, lab or clinical site immediately. Students removed from clinical will not be readmitted to class or to the program.

Please refer to the Health Professions Code of Conduct posted in Cobra for every course.

### **Dental Hygiene Program Ethical Statement**

Dental Hygiene students are expected to demonstrate ethical and professional behavior and behave in a way that engenders trust. Students who display incompetent, unethical, illegal or impaired behavior may fail the didactic/clinical/lab course and be dismissed from the program if their behavior demonstrates a breach of trust or professional behavior at any time.

### **Dress Code**

Each dental hygienist or dental hygiene student represents the profession to the patient he/she serves. Therefore, it is important that each student present an image of respectability, cleanliness, and orderliness.

#### **I. Personal Care**

- A. Keep fingernails short, clean and well-manicured. Nail polish may not be worn. Nail length should be short enough so that nails are not visible above the fingertips when viewed from palm side.
- B. Guard against offensive body odors by bathing frequently and by using deodorant/antiperspirant.
- C. Avoid use of strongly scented perfumes, colognes, deodorants or hair sprays.
- D. Wash hair often.
- E. Maintain optimal oral hygiene by brushing and cleaning interproximally daily.
- F. Avoid eating onions or garlic before clinical sessions.
- G. Wear only natural looking make-up.
- H. Parkland College is a smoke-free environment.
- I. No food or drinks are allowed in the clinic.

#### **II. Clinical Attire**

1. A disposable gown is to be worn over professional scrubs. A new gown is to be worn for each clinic session. Clinic shoes must be changed upon arrival to campus. Street clothes should be worn from the building. Once scrubs are removed, prior to exiting the building, place in a closed bag to be taken home to launder.
  - A. Professional scrubs should be as follows:
    1. Scrub pants: Choose fabrics that are solid colored and minimally see through. Avoid wrinkled scrub pants.
    2. Tops: Only solid colored (no prints or words) scrub tops are acceptable. The neckline should be rounded or v-neck. The sleeves may be short or long. The scrub top length must be long enough to tuck in or not expose the back when bending over. Scrub tops must match or compliment the scrub pants.
  - B. Shoes: Professional brands, white leather shoes only are allowed. They are to be:
    1. Clean
    2. Worn only in clinic, lab or extramural sites
    3. Disinfected with spray disinfection immediately after clinic
    4. Stored in a plastic shoe box
  - C. Jewelry: No rings are allowed in clinic. Students may wear watches and necklaces if they are covered by the gown. Posts or small hoop earrings are allowed.
  - D. Name tags: A name tag is to be worn on the upper left side of the disposable gown at all times.
  - E. Hair: Students may choose to wear scrub caps during clinic.
    1. Hair is to be kept clean and have natural colors. Students are to adhere to the following guidelines:
    2. The back section of the hair may hang over the collar but not be longer than the lowest part of the shoulders or be worn in such a manner that allows it to fall forward.
    3. If the sides of the hair are longer than the earlobe, they must be secured so that no hair will touch the eye or block visibility of the eyes or mouth when the student is viewed from the side.
    4. Long hair is to be worn in a secure style which does not allow it to fall forward.
    5. Facial hair that crosses the seal of the N95 is not allowed due to the inability of the N95 to seal adequately.

### III. Laboratory Attire

- A. When performing intraoral procedures, the same attire is to be worn as in clinic.
- B. For labs in which intraoral procedures are not performed, see individual course syllabus.

### **Personal Grooming**

Personal hygiene must be impeccable. Body odor can't be tolerated by patients and coworkers in the clinical setting. Patients can have heightened sensitivity to smells. The administration of medications and strong odors may cause nausea in the medicated patient. All students should wear deodorant at all times and shower frequently; daily if needed.

If the body odor is present while at clinical, you will be sent home. This concern could

keep you from progressing at clinical and could be a reason to be dismissed at clinical.

## **ADHA CODE OF ETHICS FOR DENTAL HYGIENISTS**

### **1. Preamble**

As dental hygienists, we are a community of professionals devoted to the prevention of disease and the promotion and improvement of the public's health. We are preventive oral health professionals who provide educational, clinical, and therapeutic services to the public. We strive to live meaningful, productive, satisfying lives that simultaneously serve us, our profession, our society, and the world. Our actions, behaviors, and attitudes are consistent with our commitment to public service. We endorse and incorporate the Code into our daily lives.

### **2. Purpose**

The purpose of a professional code of ethics is to achieve high levels of ethical consciousness, decision making, and practice by the members of the profession.

Specific objectives of the Dental Hygiene Code of Ethics are:

- to increase our professional and ethical consciousness and sense of ethical responsibility.
- to lead us to recognize ethical issues and choices and to guide us in making more informed ethical decisions.
- to establish a standard for professional judgment and conduct
- to provide a statement of the ethical behavior the public can expect from us.

The Dental Hygiene Code of Ethics is meant to influence us throughout our careers. It stimulates our continuing study of ethical issues and challenges us to explore our ethical responsibilities. The Code establishes concise standards of behavior to guide the public's expectations of our profession and supports dental hygiene practice, laws and regulations. By holding ourselves accountable to meeting the standards stated in the Code, we enhance the public's trust on which our professional privilege and status are founded.

### **3. Key Concepts**

Our beliefs, principles, values and ethics are concepts reflected in the Code. They are the essential elements of our comprehensive and definitive code of ethics, and are interrelated and mutually dependent.

### **4. Basic Beliefs**

We recognize the importance of the following beliefs that guide our practice and provide context for our ethics:

- The services we provide contribute to the health and well-being of society.
- Our education and licensure qualify us to serve the public by preventing and treating oral disease and helping individuals achieve and maintain optimal health.
- Individuals have intrinsic worth, are responsible for their own health, and are entitled to make choices regarding their health.
- Dental hygiene care is an essential component of overall health care and we function interdependently with other health care providers.
- All people should have access to health care, including oral health care.
- We are individually responsible for our actions and the quality of care we provide.

### **5. Fundamental Principles**

These fundamental principles, universal concepts and general laws of conduct provide the

foundation for our ethics.

**Universality**

The principle of universality expects that, if one individual judges an action to be right or wrong in a given situation, other people considering the same action in the same situation would make the same judgment.

**Complementarity**

The principle of complementarity recognizes the existence of an obligation to justice and basic human rights. In all relationships, it requires considering the values and perspectives of others before making decisions or taking actions affecting them.

**Ethics**

Ethics are the general standards of right and wrong that guide behavior within society. As generally accepted actions, they can be judged by determining the extent to which they promote good and minimize harm. Ethics compel us to engage in health promotion/disease prevention activities

**Community**

This principle expresses our concern for the bond between individuals, the community, and society in general. It leads us to preserve natural resources and inspires us to show concern for the global environment.

**Responsibility**

Responsibility is central to our ethics. We recognize that there are guidelines for making ethical choices and accept responsibility for knowing and applying them. We accept the consequences of our actions or the failure to act and are willing to make ethical choices and publicly affirm them.

**6. Core Values**

We acknowledge these values as general for our choices and actions.

**Individual autonomy and respect for human beings**

People have the right to be treated with respect. They have the right to informed consent prior to treatment, and they have the right to full disclosure of all relevant information so that they can make informed choices about their care.

**Confidentiality**

We respect the confidentiality of client information and relationships as a demonstration of the value we place on individual autonomy. We acknowledge our obligation to justify any violation of a confidence.

**Societal Trust**

We value client trust and understand that public trust in our profession is based on our actions and behavior.

**Non-maleficence**

We accept our fundamental obligation to provide services in a manner that protects all clients and minimizes harm to them and others involved in their treatment.

**Beneficence**

We have a primary role in promoting the well being of individuals and the public by engaging in health promotion/disease prevention activities.

**Justice and Fairness**

We value justice and support the fair and equitable distribution of health care resources. We believe all people should have access to high-quality, affordable oral healthcare.

**Veracity**

We accept our obligation to tell the truth and expect that others will do the same. We value self- knowledge and seek truth and honesty in all relationships.

**7. Standards of Professional Responsibility**

We are obligated to practice our profession in a manner that supports our purpose, beliefs, and values in accordance with the fundamental principles that support our ethics. We acknowledge the following responsibilities:

**To Ourselves as Individuals...**

- Avoid self-deception, and continually strive for knowledge and personal growth.
- Establish and maintain a lifestyle that supports optimal health.
- Create a safe work environment.
- Assert our own interests in ways that are fair and equitable.
- Seek the advice and counsel of others when challenged with ethical dilemmas.
- Have realistic expectations of ourselves and recognize our limitations.

**To Ourselves as Professionals...**

- Enhance professional competencies through continuous learning in order to practice according to high standards of care.
- Support dental hygiene peer-review systems and quality assurance measures.
- Develop collaborative professional relationships and exchange knowledge to enhance our own lifelong professional development.

**To Family and Friends...**

- Support the efforts of others to establish and maintain healthy lifestyles and respect the rights of friends and family.

**To Clients...**

- Provide oral health care utilizing high levels of professional knowledge, judgment, and skill.
- Maintain a work environment that minimizes the risk of harm.
- Serve all clients without discrimination and avoid action toward any individual or group that may be interpreted as discriminatory.
- Hold professional client relationships confidential.
- Communicate with clients in a respectful manner.
- Promote ethical behavior and high standards of care by all dental hygienists.
- Serve as an advocate for the welfare of clients.
- Provide clients with the information necessary to make informed decisions about their oral health and encourage their full participation in treatment decisions and goals.
- Refer clients to other healthcare providers when their needs are beyond our ability or scope of practice.
- Educate clients about high-quality oral health care.

- Recognize that cultural beliefs influence client decisions.

**To Colleagues...**

- Conduct professional activities and programs, and develop relationships in ways that are honest, responsible, and appropriately open and candid.
- Encourage a work environment that promotes individual professional growth and development.
- Collaborate with others to create a work environment that minimizes risk to the personal health and safety of our colleagues.
- Manage conflicts constructively.
- Support the efforts of other dental hygienists to communicate the dental hygiene philosophy and preventive oral care
- Inform other health care professionals about the relationship between general and oral health.
- Promote human relationships that are mutually beneficial, including those with other health care professionals.

**To Employees and Employers...**

- Conduct professional activities and programs, and develop relationships in ways that are honest, responsible, open, and candid.
- Manage conflicts constructively.
- Support the right of our employees and employers to work in an environment that promotes wellness.
- Respect the employment rights of our employers and Employees.

**To the Dental Hygiene Profession...**

- Participate in the development and advancement of our profession.
- Avoid conflicts of interest and declare them when they occur.
- Seek opportunities to increase public awareness and understanding of oral health practices.
- Act in ways that bring credit to our profession while demonstrating appropriate respect for colleagues in other professions.
- Contribute time, talent, and financial resources to support and promote our profession.
- Promote a positive image for our profession.
- Promote a framework for professional education that develops dental hygiene competencies to meet the oral and overall health needs of the public.
- 

**To the Community and Society...**

- Recognize and uphold the laws and regulations governing our profession.
- Document and report inappropriate, inadequate, or substandard care and/or illegal activities by a health care provider, to the responsible authorities.
- Use peer review as a mechanism for identifying inappropriate, inadequate, or substandard care provided by dental hygienists.
- Comply with local, state, and federal statutes that promote public health and safety.
- Develop support systems and quality-assurance programs in the workplace to assist dental hygienists in providing the appropriate standard of care.
- Promote access to dental hygiene services for all, supporting justice and fairness in the distribution of healthcare resources.
- Act consistently with the ethics of the global scientific community of which our

- profession is a part.
- Create a healthful workplace ecosystem to support a healthy environment.
- Recognize and uphold our obligation to provide pro bono service.

#### **To Scientific Investigation...**

- We accept responsibility for conducting research according to the fundamental principles underlying our ethical beliefs in compliance with universal codes, governmental standards, and professional guidelines for the care and management of experimental subjects.
- We acknowledge our ethical obligations to the scientific community:
- Conduct research that contributes knowledge that is valid and useful to our clients and society.
- Use research methods that meet accepted scientific standards.
- Use research resources appropriately.
- Systematically review and justify research in progress to insure the most favorable benefit-to-risk ratio to research subjects.
- Submit all proposals involving human subjects to an appropriate human subject review committee.
- Secure appropriate institutional committee approval for the conduct of research involving animals.
- Obtain informed consent from human subjects participating in research that is based on specification published in Title 21 Code of Federal Regulations Part 46.
- Respect the confidentiality and privacy of data.
- Seek opportunities to advance dental hygiene knowledge through research by providing financial, human, and technical resources whenever possible.

#### **Student American Dental Hygienists Association (SADHA)**

Students are encouraged to join and participate in the Student American Dental Hygienists' Association. SADHA is the professional organization of the dental hygiene students. Membership enables students to participate in monthly and annual social and service activities which are financially supported and sponsored by the organization. These activities bring the dental hygiene student body together outside of the classroom laboratory and clinical environments. SADHA members participate in and support service activities within the community in an effort to improve the oral health of the community. Service opportunities include, but are not limited to, Give Kids a Smile, Parkland College Dental Day, Health Fairs and educational opportunities with SmileHealthy. Officers are elected in the spring of each year during a general election involving all of the dental hygiene students. These officers are responsible for planning the organization's activities for the year. Regular and special meetings are scheduled and announced during the year. All members of the organization are encouraged to attend. Faculty advisors to the organization also attend meetings.

### **VIII. Parkland College Policies**

#### **Extended Absences**

See General College Syllabus



### **Absence Due to Religious Obligations**

See General College Syllabus

### **Children in the Classroom**

It is understood that the mission of the College is to provide an atmosphere that is as free as possible from outside distractions and disruptions. In order to maintain this learning environment, unaccompanied and unauthorized minor children are not allowed on the campus. To protect children from possible injury and to maintain a safe, secure learning environment, children are not permitted in classes and are not to be left unsupervised anywhere on campus, including employee work areas. (College Policy 5.04)

### **Accessibility Services**

See General College Syllabus

### **The Learning Commons and Library**

If you need help to complete assignments, stay on top of readings, or just to stay in school, the Learning Commons, located in the College Center in R201, is here to help. All of our services (tutoring, Writing Lab, and academic support) are available in person or online. You can reach the Learning Commons online at or by email at [learningcommons@Parkland.edu](mailto:learningcommons@Parkland.edu). and we will respond to you quickly. You can also call us at 217-373-3839.

The Parkland College Library is located on the second floor of the Learning Commons (the third Floor of the X Wing) and is a comfortable place to study, research, browse, and work with friends. Librarians are available to assist and guide you. Full-text databases are available online 24 hours a day, 7 days a week. You may access these databases from off-campus using your ParklandOne login. While on campus, you can use your laptop and smart devices to access the Wi-Fi network.

Your Parkland ID is your library card. You may renew library materials online in the Parkland Library Catalog or call 217-353-2223. Fines and/or fees are charged for overdue, lost, or damaged materials. Printing and photocopying are available. Laptops, Kindles, headphones, and more can be checked out at the Learning Commons Service Desk.

### **Academic Honesty**

The following statement is the sanctioned affirmation of academic honesty in works submitted by students:

“I honor Parkland’s core values by affirming that I have followed all academic integrity guidelines for this work.”

Parkland College’s values include honesty, integrity, and responsibility. Students, faculty, and staff are all expected to maintain academic integrity in their work and take collective responsibility for preventing violations of intellectual ownership.

Healthcare professionals are held to the highest standard and must be trusted to be honest in any situation. Academic dishonesty is unacceptable, and the institution is committed to helping students learn these values through development and growth. Personal commitment, honest work, and honest achievement are necessary characteristics for an educated person and a health care professional. Parkland faculty and administration can no longer make assumptions about what is considered cheating (academic dishonesty) and what students understand to be cheating (academic dishonesty).

Parkland Policy in Student Policy Manual: Please go online and read through the manual. <http://www.parkland.edu/studentLife/policies/default.aspx>

Page 5: Cheating: Using or attempting to use unauthorized materials, information, or study aids in any academic activity.

Submitting as one's own work term papers, homework, and examinations that are not one's own work or for which a student received unauthorized help.

Page 6: Collaboration: Students at Parkland College are encouraged to work together on group projects, study, and other activities. However, work submitted to fulfill an assignment not specifically identified as a group activity must be substantially the work of the author. Collaboration beyond this constitutes academic misconduct.

#### Examples of Cheating

1. Taking pictures of exams
2. Taking pictures of a computer screen with test questions
3. Texting each other while sitting at your own computers sharing answers
4. One student looking up answers while another student answers questions on an assignment/test.
5. Taking pictures of cadavers
6. Posting, texting, or communicating parts of a test or quiz.
7. Taking quizzes together

UNLESS YOUR INSTRUCTOR HAS SAID, "this is a group project" or use any resource, including your classmate, your work should be just YOUR work or it is cheating.

#### Consequences of Cheating:

1. Fail the quiz, test or assignment- and/or
2. Fail the course- and/or
3. Be dismissed from the Program- and/or
4. Be dismissed from the College

### **IX. Health Professions Policies- *The following policies are posted on Cobra for Health Professions courses.***

HIPAA Policy

Spoken and Written English Scores

Social Networking Policy

Clinical Failure and Grading Withdrawal

Intent to Dismiss or Suspend  
Student Immunization, Drug, Alcohol and Background Policy and Procedures  
Interprofessionalism  
Name Change on Graduation Policy  
Health Professions Code of Conduct  
Accommodations Guidelines for Health Professions

**ADEA Competencies on Professionalism:**

**[https://www.adea.org/documents/Section3/\(3.2.5\)-ADEA-Statement-on-Professionalism-in-Dental-Education.pdf](https://www.adea.org/documents/Section3/(3.2.5)-ADEA-Statement-on-Professionalism-in-Dental-Education.pdf)**

**ADEA Tool for Competency on Professionalism:**

**[http://www.dhed.net/ewExternalFiles/Tool\\_%20for\\_Action\\_on\\_Professionalism\\_in\\_Dental\\_Education-ADEA.pdf](http://www.dhed.net/ewExternalFiles/Tool_%20for_Action_on_Professionalism_in_Dental_Education-ADEA.pdf)**



**IX. Student Policy Compliance and Attestation**

**Parkland College Dental Hygiene Program Policies and Procedure Handbook**

**Verification of Understanding 2023-2024**

**I \_\_\_\_\_ have read and understand the policies and procedures stated and have been given the opportunity to ask questions about the Handbook. I have had all questions answered to my satisfaction.**

**I \_\_\_\_\_ have read the Health Professions Policies posted on Health Professions courses in COBRA and have been given the opportunity to ask questions about the policies. I have had all questions answered to my satisfaction.**

**I agree to follow the policies and procedures set forth in the Parkland College Dental Hygiene Policy and Procedures Handbook.**

**Signature \_\_\_\_\_ Date \_\_\_\_\_**