

DENTAL ASSISTANT

PROGRAM HANDBOOK

2022 - 2023

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Minnesota West Community and Technical College: Mission-Vision-Values

Mission

Minnesota West prepares learners for a lifetime of success

Vision

Minnesota West is the regional college of choice

Values

- Community Engagement
- Courage
- Diversity & Inclusion

- Innovation
- Integrity
- Student Success

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ACCREDITATION

Minnesota West Community and Technical College is accredited by The Higher Learning Commission, North Central Association of Colleges and Secondary Schools The Higher Learning Commission can be contacted at the following address: Commission on Institutions of Higher Education 230 South LaSalle Street,

Suite 7-500

Chicago, IL 60604

800-621-7440

The Minnesota West Dental Assistant Program is Accredited by the Commission on Dental Accreditation.

The Commission on Dental Accreditation can be contacted at the following address:

211 East Chicago Avenue

Chicago, Illinois 60611

800-232-6108

Dental Assistant Program Information

DENTAL ASSISTANT PROGRAM MISSION

Dental Assisting is a recognized vital profession to dental team services. The Dental Assistant Department's mission is that each student pursuing a career in dental assisting will be provided educational and training opportunities to attain his or her fullest potential in various dental environments, while delivering quality dental services to patients and the community. The Dental Assistant Department will strive to provide adequate and challenging opportunities for the student to acquire the basic knowledge and skills essential in meeting requirements set forth by the Commission on Dental Accreditation and the Minnesota Board of Dentistry and to be encouraged to engage in life-long learning.

DENTAL ASSISTANT PROGRAM OUTCOMES/GOALS

- **1.** Develop the necessary knowledge and skills essential for obtaining employment in the occupation of dental assisting.
- **2.** Develop competent clinical skills necessary for successful employment as a dental assistant.
- 3. Apply current concepts of infection control and occupational safety
- **4.** Apply principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, patient care and practice management
- **5.** Practice interpersonal and communication skills to effectively interact with diverse population groups and other members of the healthcare team
- 6. Develop the knowledge necessary to become licensed in the state of Minnesota by successfully completing National and State Dental Assisting Board Examinations. In addition, the graduate will complete the learning outcomes identified within the General Education Courses required.

It is important that you be well informed about your academic program. In order to accomplish this task, you should maintain the following items in your files:

- College Catalog
- Dental Assistant Program Outlines
 - Dental Assistant AAS
 - o Dental Assistant Diploma
- Dental Assistant Student Handbook
- Dental Assistant Course Outlines

PROGRAM PREREQUISITES

Students must meet one of the following placement measures:

- A score of 50 77 on test ACCUPLACER Classic Reading Comprehension
- A score of 233 249 on test ACCUPLACER Next-Gen Reading Comprehension
- A score of 16 17 on test ACT English
- A score of 14 20 on test ACT Reading
- ENGL 0090 Essentials of Writing I

PROGRAM LENGTH

- a) Two semesters-on campus
- b) Summer sessions- Two 5-week externship rotations
- c) 48 total credits diploma
- d) 60 total credits AAS

PROGRAM LOCATIONS

The Dental Assistant Program is based on the Canby campus with an additional site in Luverne, Mn. Activities that require the entire class to gather will be held in Canby. For example; program orientation, review for board exams, externship orientation and seminars. Other events may be required throughout the year.

HYBRID OPTION

Students can attend lectures on campus (Luverne or Canby) or in real-time utilizing Zoom. Students wishing to utilize the Hybrid Option must declare their decision at the start of the program as well as their desired lab location. Students must be on campus for all scheduled labs.

Note: Lectures may be recorded and students may appear in the recorded lectures, visually or audibly.

MINIMUM GRADE REQUIREMENT

The student must attain at least a C for all courses required for the program, including the General Education requirements. Prerequisites for Spring semester include completion of Fall semester courses with a grade of C or better.

PREREQUISITES FOR CLINICAL PATIENT CONTACT

(Must be completed by the end of the 7th week of fall semester)

- a) CPR Certification through either:
 - a. American Heart Association (Healthcare Professional Basic Life Support (BLS))
 - b. The American Red Cross (BLS for Healthcare Providers)
 - *student is responsible for cost
- b) Hepatitis B vaccination (or declination of)
- c) Documentation of tuberculosis testing using the Two-Step test or TB Gold. When a test result is positive, a chest x-ray is required to rule out active tuberculosis. TB test must be repeated yearly to encompass the entire length of the program.
- d) Completion/passing of criminal background check
- e) ADAA (American Dental Assistants Association) student membership and liability insurance, \$45

REQUIRED BOOKS & SUPPLIES

- See bookstore for textbook requirements
- Fall semester lab kit
- Spring semester lab kit

Additional items to be purchased on your own or through the bookstore.

- Safety Glasses with wrap around frames
- Side shields for prescription glasses

UNIFORMS

It is recommended that you purchase 5 sets, which include:

- a) Top: can choose either a scrub top, a Minnesota West t-shirt, or a solid color t-shirt
- b) Scrub pants
- c) Lab Jackets: Required style-crew neck, long sleeve, snap front, knit cuffs Black, charcoal, or royal blue scrubs may be worn.

SHOES

Black or predominantly black, athletic or medical type shoes are required and should be clean, comfortable, and in new or like-new condition. Shoes designated for clinic use are required and are not to be worn outside the building. Shoes such as Hey Dudes or other canvas shoes are not acceptable.

RECOMMENDED SUPPLIES

- a) Colored pencils
- b) Daily planner
- c) Lecture outlines will be utilized; however, you may want additional loose-leaf paper added to the outline binder

DENTAL ASSISTING EXAMINATION FEES

(approximate costs, may change without notice)

Minnesota Jurisprudence exam (\$60.00)

Minnesota Licensure exam (DASLE) (\$70.00)

Note: If the DASLE exam is not passed after two attempts additional training is required. Remedial training will be provided free of charge within 6 months of graduation, after that the cost will be \$400

Minnesota License Application (\$125)

Dental Assisting National Board Exam (DANB) Three exam components (up to \$810.00)

STAR OF THE NORTH DENTAL CONVENTION

The annual state dental convention is held in St. Paul, MN during the month of April. Attendance is required for those enrolled in Chairside Assisting II. If attendance is not possible, an alternative assignment will be given. There is no cost for the convention registration; however, the student will need to cover the cost of a hotel room, meals, and transportation.

EXTERNSHIPS

The externship consists of 6 credits during the Summer Session, minimum of 300 hours of clinical experience (10 weeks), with Seminars scheduled during that time.

Students will be required to complete clinical rotations at two different sites. A written agreement between the clinical facility, the student, and the school will be completed before the rotation begins. Only one of the two externships may be in a specialty clinic. All contracted hours must be completed in the chosen offices. Students will not be allowed to change externship locations unless extenuating circumstances arise. At that time, it must be approved by the supervising instructor.

Dental Assisting externships are not paid employment; rather they are an extension of your program learning experience.

COVID RELATED POLICY AT CLINICAL EXTERNSHIPS

The college's affiliation agreement with a clinical partner requires that the college's faculty and students accessing the clinical site comply with the site's policies and regulations. Covid vaccination may be required by the externship site chosen by the student.

CRIMINAL BACKGROUND CHECKS

Background studies are submitted on all enrolled students during fall semester prior to clinical labs.

Externship sites may impose requirements on students working at their facilities, including criminal background checks.

The Minnesota Board of Dentistry also requires criminal background checks as part of the process for licensure. This process can be initiated before licensure application.

GENERAL INFORMATION

This information has been prepared for the use of the students enrolled in the DENTAL ASSISTANT PROGRAM. While the College has policies and procedures that are required of all enrolled in courses within the College, the DENTAL ASSISTANT PROGRAM has additional policies (College & Program) and adheres to them.

The objectives for each course will be aimed at developing the necessary skills, knowledge, and attitude for the student to be successful. Each course will have a course syllabus, and there will be a full understanding of the requirements for the completion of each course. The student's completion of the program requirements, will allow the student to take the National Certification Examination and the State Licensure Examination.

The curriculum in the dental assisting program may expose students to hazardous materials, radiation and/or infectious diseases. Students will be provided with information through education and program policies to protect themselves and their patients from harm. Students will be expected to utilize appropriate safety precautions in the classroom, laboratory and clinic.

Reasonable accommodations will be provided for students with disabilities. Once accommodations have been discussed with the Disabilities Coordinator, it is the student's responsibility to contact the instructor at the beginning of the program and/or each semester to review accommodations.

DISABILITY SERVICES

Students with a verified disability or those needing a reasonable accommodation may contact the Accessibility and Disability Services Coordinator.

Salome Chonko 507-847-7970 or salome.chonko@mnwest.edu

EMERGENCY EXIT PRODECURES

Emergency exit information and procedures can be found in each classroom. Please take time to review these procedures.

AFFIRMATIVE ACTION

Minnesota West Community and Technical College endorses and implements a policy of equal opportunity for all students regardless of race, color, religion, national origin, ancestry, disability or sexual orientation. If you have any concerns contact the Dean of Equity, Inclusion, and Student Development.

Abdul Abdigaani 888-989 5102 or abdullahi.farahabdigaani@mnwest.edu

COVID INFORMATION (subject to change based on current recommendations)

- Safety of our students is our priority
- Masks are required based on county COVID prevalence and vaccination rates.
- Social Distancing is required.
- •Amendments to schedules and/or courses will be completed when needed during this pandemic to maintain safety of students. Clinical partner facilities may limit experiences to keep patients/residents/clients safe.

•Vaccinations – may be required by clinical partner facilities for students. (Minnesota West students are not required to have the vaccine unless required by training facilities.) Nursing and Allied Health programs require hands-on experiences at clinical partner facilities to meet graduation requirements.

CODE OF CONDUCT/ ACADEMIC INTEGRITY

Order in the Classroom: The instructor has the responsibility and right to ensure a classroom environment conducive to learning. Students are expected to conduct themselves in a manner suitable to that environment. Actions deemed necessary by the instructor to secure that environment (including disallowing (a) classroom disruption, (b) refusal to follow reasonable college rules and classroom standards and (c) any other behavior dangerous to self, others or the property of others) are proper and authorized, as being in the best interests of the students.

Academic integrity, one of the most important values in higher education, requires that each student's work represents his/her own personal efforts and that the student acknowledges the intellectual contributions of others. Minnesota West Community & Technical College students are expected to honor the requirements of this policy.

Full review of Minnesota West Code of Conduct and Academic Integrity Policy can be found at: https://www.mnwest.edu/images/student-information-policies/code_of_conduct.pdf

CLASSROOM CONDUCT

- a. All students are expected arrive on-time and participate in all class activities.
- b. Non-constructive behavior includes but is not limited to 1. Sleeping, 2. Reading nonclass material, 3. Talking to other students. 4. Texting or other use of a cell phone
- c. No student shall attend class under the influence of illegal drugs, or alcohol.
- d. Cell phones or other items not appropriate for instruction should not be brought to classroom, lab, or clinic
- e. Insubordination, defined as intentional disregard for rules and policies, will not be tolerated

ZOOM CONDUCT

When attending via Zoom, there are expectations that must be followed.

- a. Camera and mic must be used. Your face should be centered on the screen and lighting should allow for your face to not be shadowed.
- b. Sit in an attentive position
- c. Be in a distraction free room. Family, roommates, guests, and pets should not be a distraction to you, just as if you were in a classroom.
- d. Cell phone use during class is not acceptable
- e. Class time is not an appropriate time to work in D2L or submit assignments, email faculty, etc.

LAB CONDUCT

- a. Arrive on-time, prepared for the day's activities
- b. Wear proper PPE
- c. Maintain your own work station, Example: instruments, typodonts, materials, work surfaces
- d. Facilities and equipment must be maintained at a level of neatness and cleanliness appropriate for a health occupation.
- e. Equipment will be used only with the permission of a dental assisting instructor. An instructor must be present during the use of most equipment.
- f. Students from other departments will be allowed in the dental assisting department only for scheduled appointments and/or the approval of a dental assisting department instructor.

CLINIC CONDUCT

- a. Maintain infection control
- b. Students are responsible for scheduling patients at the assigned time
- c. Displaying professionalism at all times Example: voice tone and volume, refrain from using profanity
- d. Have all paperwork ready for instructors at the start of the appointment
- e. Willingly accept critique during skills assessments
- f. Teamwork is important to maintain a smooth clinic day and all students are expected to share the responsibilities which includes arriving in time to prepare yourself, as well as the general clinic, and stay until all work is complete

Behaviors that do not support a positive classroom/lab/clinic environment will result in referral to the Dean of Equity, Inclusion, and Student Development for review of conduct.

LECTURE ATTENDANCE

The student is expected to attend all scheduled learning experiences. Continued enrollment in the Dental Assistant program depends, in part, on consistent attendance. In academic courses, grades are earned on the basis of the student's attainment of the course objectives; but regular and punctual attendance is expected. Attendance is defined as being present on campus or connected live online via Zoom. In your absence, you will be responsible for daily lecture notes, materials, and assignments.

- a. Students are expected to arrive in class on time and remain in class the entire class period.
- b. Medical, legal, academic appointments or other personal appointments should be made for non-class time.
- c. Missing a class due to an approved Minnesota West sponsored event will not affect the attendance record if the instructor is notified in advance of the absence.
- d. If you are going to be absent, a call or email to the faculty teaching the class must be made before the scheduled class time.
- e. After 3 tardy/absences the student must meet with faculty to discuss a plan for attendance to assure continued success.

LAB ATTENDANCE

Lab Attendance is required. If extenuating circumstances arise the instructor must be notified before the scheduled class time.

Arrangements must be made to make up the missed lab within one week.

Attendance Points: 30 points

Each tardy/absence will result in a deduction of 10 points.

After 2 tardy/ absences the student must meet with faculty to discuss a plan for attendance to assure continued success.

Lab activities missed due to an unexcused absence ("no-call, no-show", prior notification was not given) must still be completed but points will not be awarded.

Further attendance requirements are outlined in each course syllabi.

TEST DAYS

Most tests are given through D2L Brightspace to be completed on your own time by the scheduled due date, utilizing Respondus Monitor; however, there are a limited number of tests which are given on campus during class (lecture times).

Tests taken on your own time: must be completed by the indicated due date to receive credit. A missed test can still be taken (as arranged with the instructor) but points will not be awarded.

Tests scheduled at specified class time: you will be expected to be present at either the Canby campus or the Luverne center at the scheduled class time or, if arranged with faculty, utilize Respondus Monitor to take the test at the scheduled time at any location.

Make-up tests (for scheduled in-person tests):

<u>With notification to instructor (Excused)</u>: the missed test must be taken within 3 days of returning to class. Arrangements must be made with a test proctor (Canby, Deb Full 507-223-1327, Luverne, Jill Arp 507-449-2773) 48 hours in advance of taking the test.

<u>Without notification to instructor (Unexcused):</u> The test will not be allowed to be made up.

NOTE: The instructor must be notified before the scheduled test time if you will not be on campus or unable to take the test at the scheduled time due to extenuating circumstances.

DRESS CODE

Classroom:

Dress should be in an appropriate manner as to not distract from student learning, both in the classroom and while on Zoom.

Lab/Clinic:

Uniform: only the pre-selected uniform is to be worn. No turtleneck or mock turtleneck shirts may be worn. Pants should be short enough so they do not drag on ground. Uniforms must be clean and free of wrinkles, lint, and pet hair

Lab Coat: to be worn over the student's clinical uniform during preclinical and lab exercises. Lab coat is not to be worn outside of the clinic or lab

Disposable lab coat/gown: worn during all patient procedures; to be removed before leaving the clinic

Shoes: Black or predominately black, athletic or medical type shoes are required and should be clean, comfortable, and in new or like-new condition. Shoes designated for clinic use are required and are not to be worn outside the building. Shoes such as Hey Dudes or other canvas shoes are not acceptable. Socks must be worn.

Nametag: worn on the left side of the lab coat

Safety Glasses: must be worn during all lab and clinical procedures

Jewelry: one ring, stud earrings may be worn

Facial Jewelry: is discouraged

Tongue Piercings: are considered unacceptable and can not be worn during clinic time

PERSONAL GROOMING

Hair should be clean, above the color or tied back away from the face. Males with facial hair should be clean and neatly trimmed to be covered with a mask.

Skin should be clean and odor free. Strongly scented perfume, aftershave, or lotions should be avoided.

Makeup should be used in moderation.

Breath should not be offensive, regular oral hygiene is a must.

Disregard for dress code and grooming expectations may result in student being asked to leave. In this situation, there will be a loss of professionalism and procedure points for the scheduled assessment.

GRADING

Evaluation is an important part of the program. The course syllabus, lab, and clinic forms will identify the requirements for successful completion. These requirements will make up the grade for each course. The same grading criteria will be used in all courses.

Course points will be totaled throughout the semester and the letter grade will be based on a percentage of total points:

94 - 100% = A,	73 - 75% = C
90 - 93% = A-	70 - 72% = C-
86 - 89% = B+	66 - 69% = D+
83 - 85%= B	63 - 65% = D
80 - 82% = B-	60 - 62% = D-
76 - 79% = C+	below 60% = F

Students must achieve a minimum of a "C" (73%) in all classes.

Students receiving an "I" – Incomplete in a course, due to extenuating circumstances, must complete the course work within 10 days of the start of the next semester, unless other arrangements have been made. Due to course work not being completed on time, the grade awarded will be reduced.

Minnesota West Community and Technical College Dental Assistant Remediation Plan

To remain and continue in the Dental Assisting Program at Minnesota West Community and Technical College, a 2.0 grade point average (73%) or higher must be maintained in all required courses. All lab/preclinical skills assessments must be completed with a 75%, and clinical skills assessments with an 80%, unless otherwise noted. Failure to meet these minimum criteria may result in dismissal from the program after unsuccessful remediation. The definition of "unsuccessful" is a below passing grade after two attempts of remediation for a specific deficiency. The term "remediation" implies a student has failed a required competency in a part(s) of a dental assisting course. The purpose of remediation is to correct a noted deficiency or failure of a student's skills or competency by providing additional instruction specific to the identified deficiency. The remediation policy allows the instructor to determine if remediation sessions are needed. A student may request a faculty conference to discuss a potential remediation session if they feel remediation is necessary and the faculty has not initiated a remediation form. Remediation is individualized and designed to address specific deficiencies and will include close faculty supervision so upon completion, a student can perform as specified by the course learning objective(s) prior to finalization of grades.

- 1. Remediation may be provided to enable students to master course content in a course where testing or skill competencies are not completed or achieved at or above the specified criteria for each item. The course faculty will identify the specific area for remediation.
- 2. Remediation must occur during the semester that the competency/course is being offered. Providing the remediation can be accomplished concurrently with the student's course load.
- 3. A specific schedule for completion of remediation will be developed by the respective course instructor. A copy of the remediation plan will be given to the program director, course faculty and student. A copy of the plan will be placed in the student's file.
- 4. If a student fails to attend a remediation session, the missed session will be considered the first of the two allowed sessions. The student would be notified by the instructor, via Minnesota West e-mail, that they need to meet with the instructor and the program director to establish a plan for successful completion of all areas that were deemed deficient. The student's response to the instructor and program director must occur within five business days of the instructor's email.
- 5. At the end of the session a copy of the completed plan will be given to the instructor and the original kept in the student's file.
- 6. If the student does not progress to meet testing and competency requirements after two sessions of remediation, the student will meet with the course instructor and program director to discuss options of withdrawal from the course or program.

The course instructors will prepare the written remediation form. Specific areas to be identified include:

- 1. Identification of need for remediation session by student and instructor
- 2. Amount of time utilized in remediation session
- 3. The areas of concern to be addressed during the remediation session
- 4. A list of objectives to be met during the session
- 5. Areas of instruction provided during session
- 6. Areas identified as needing continued enhancement
- 7. Date and method of remediation session
- 8. Instructor and student signatures

Minnesota West DENTAL Assistant Remediation PLAN

STUDENT NAME:				
DATE:				
INSTRUCTOR NAME:	<u> </u>			
COURSE:				
SESSION WAS IDENT	TFIED AS A NEED BY:	STUDENT	OR	INSTRUCTOR
AREA(S) FOR ENHAN	ICEMENT:			
SESSION TIME:	FROM:	_AM/PM	TO:	AM/PM
PATIENT NAME:			OR TYPO	DONT
				ED REMEDIAL SESSION:
AT THE END OF THE	SESSION THE STUDEN	IT WILL BE ABL	E TO:	
1				
3				
ASSISTANCE BY THE	INSTRUCTOR WAS PR	OVIDED IN TH	E FOLLOWIN	G AREAS:
1				
2				
3				
AREAS IN WHICH TH	E INSTRUCTOR IDENT	IFIED AS NEED	ING CONTIN	UED REMEDIATION:
1				
2				
3				
4				
COMMENTS BY INST	RUCTOR:			
	T. 10 F			
INSTRUCTOR SIGNAT				
STUDENT SIGNATUR	.E:			
TO BE COMPLETED E				
` '	BY FULL-TIME FACULTY			
() COMPLETED BY	Y CLINICAL FACULTY D	URING CLINIC	AL SESSION	



DENTAL ASSISTANT CANBY CAMPUS

The Dental Assisting program is designed to prepare individuals for Dental Assisting careers in a dental office. This may be as an assistant to either a dentist or a dental hygienist in a dental practice. The program is accredited by the American Dental Association Commission on Dental Accreditation and upon completion the student will take national and state examinations leading to certification and registration in their field. The course work is in bio-medical studies, dental sciences, clinical practices, and expanded functions allowed by the State of Minnesota. Students will spend ten weeks in extramural clinical experiences in area dental offices.

DIPLOMA PROGRAM – 48 CREDITS

Fall Semester

Course Number	Course Title	Credits
DEN 1100	Oral Radiology I	3
DEN 1110	Dental Science	3
DEN 1120	Chairside Assisting I	3
DEN 1130	Preclinical Dental Assisting	4
DEN 1135	Dental Practice Management	2
DEN 1140	Dental Materials	3
	Total Credits for Fall Semester	18

Spring Semester

Course Number	Course Title	Credits
DEN 1105	Oral Radiology II	3
DEN 1115	Dental Health	2
DEN 1125	Chairside Assisting II	4
DEN 1145	Expanded Functions A	3
DEN 1150	Expanded Functions B	3
DEN 1180	Jurisprudence	1
DEN 1185	Nitrous Oxide Inhalation Administration	1
GSCL 1105	Job Seeking Skills	1
	Total Credits for Spring Semester	18

Summer Semester

Course Number	Course Title	Credits
DEN 1155	Extramural Clinical Experience I	3
DEN 1160	Extramural Clinical Experience II	3
	Total Credits for Summer Semester	6

General Education Courses (may be taken either semester):

Course Number	Course Title	Credits
ENGL 1101	English Composition	3
CMST	Public Speaking or Interpersonal Communication	3
	Total General Education Credits	6



DENTAL ASSISTANT CANBY CAMPUS

ASSOCIATE OF APPLIED SCIENCE DEGREE - 60 CREDITS

Fall Semester – Year 1

Course Number	Course Title	Credits
DEN 1100	Oral Radiology I	3
DEN 1110	Dental Science	3
DEN 1120	Chairside Assisting I	3
DEN 1130	Preclinical Dental Assisting	4
DEN 1135	Dental Practice Management	2
DEN 1140	Dental Materials	3
	Total Credits for Fall Semester	18

Spring Semester – Year 1

Course Number	Course Title	Credits
DEN 1105	Oral Radiology II	3
DEN 1115	Dental Health	2
DEN 1125	Chairside Assisting II	4
DEN 1145	Expanded Functions A	3
DEN 1150	Expanded Functions B	3
DEN 1180	Jurisprudence	1
DEN 1185	Nitrous Oxide Inhalation Administration	1
GSCL 1105	Job Seeking Skills	1
	Total Credits for Spring Semester	18

Summer Semester

Course Number	Course Title	Credits
DEN 1155	Extramural Clinical Experience I	3
DEN 1160	Extramural Clinical Experience II	3
	Total Credits for Summer Semester	6

General Education Courses (may be taken either semester):

Course Number	Course Title	Credits
	Electives from Area 3 of MnTransfer curriculum	3
ENGL 1101	English Composition I	3
PSYC 1101	Introduction to Psychology OR	4
SOC 1101	Introduction to Sociology	3
CMST 1101	Public Speaking OR	3
CMST 1103	Interpersonal Communication	3
	General Education Electives	5or 6

INFECTIOUS CONTROL POLICIES AND PROCEDURES

A. Infectious Disease Control

It is the policy of Minnesota West Community and Technical College Dental Assistant Program to provide oral health care to all patients seeking treatment in our clinic. Since it is not possible to accurately detect infectious and potentially infectious patients, Minnesota West Community and Technical College Dental Assistant Clinic adheres to concepts of standard precautions as defined by OSHA's Blood borne Pathogens Standard. Emphasis is on the critical role each dental health care team member plays in maintaining a clean and safe environment. The policies and procedures outlined here are in place to protect students, staff, faculty and patients from the spread of disease and to maintain a safe learning and work environment.

Infectious disease control policies and procedures are reviewed regularly by the dental assistant department and are revised in accordance with the latest recommendations by the American Dental Association, OSAP, CDC, and other leading health care authorities. Personal protection is one of the most important aspects of preventing infectious diseases. Minnesota West Community and Technical College Dental Assistant Clinic enforces the following standards.

1. Barrier protection:

- a. Gloves must be worn when examining and treating all patients.
 - 1. Damaged gloves must be changed immediately, and gloves must be discarded at the end of each treatment session.
 - 2. Gloves must not be worn outside the treatment room. This means that gloves must be removed when leaving cubicles to obtain supplies, etc.
- b. Masks must be worn to protect oral and nasal mucosa from splatter of blood, saliva, and aerosols.
- c. Eyes must be covered with protective glasses or face shields to guard against splatter of blood, saliva, and aerosols.
- d. Disposable lab coats/gowns must be worn over scrubs in clinical areas and changed for each patient.

2. Preventing cross-contamination:

a. A protocol for policies and procedures during clinic has been identified and is implemented by faculty and students.

B. Policy Statement on Infection Diseases

Minnesota West Community and Technical College Dental Assistant Department accepts the American Dental Education Association (ADEA) policy statements concerning infectious disease health risks set forth on March 7, 2001. These policy statements are recommendations and guidelines for allied dental education institutions and personnel.

1. Infectious Diseases

a. Human Dignity: All dental personnel are ethically obligate to provided patient care with compassion and respect for human dignity.

- b. Refusal to Treat Patients: No dental personnel may ethically refuse to treat a patient solely because the patient is at risk of contracting, or has, an infectious disease, such as human immunodeficiency virus (HIV) infection, acquired immunodeficiency virus (AIDS), or hepatitis B or C infections. These patients must not be subjected to discrimination.
- c. Confidentiality to Patients: Dental personnel are ethically obligated to respect the rights of privacy and confidentiality of patients with of patients with infectious diseases.
- d. Confidentiality of Faculty, Student, and Staff: Dental education institutions are ethically obligated to protect the privacy and confidentially of any faculty member, student, or staff member who has tested positive for an infectious disease. Dental personnel who pose a risk of transmitting an infectious agent must consult with appropriate health care professionals to determine whether continuing to provide professional services represents a material risk to the patient. If a dental faculty student or staff member learns that continuing to provide professional services represents a material risk to patients, that person should so inform the Dean of Allied Health for the institution. If so informed, the Dean of Allied Health should take steps consistent with the advice of appropriate health professionals and with current federal, state, and/or local guidelines to ensure that such individuals not engage in any professional activity that would create a risk of transmission of the infection to others. Refer to Minnesota State Guidelines, Sections 214.17-214.25 at vwvw.dentalboard.state.mn.us.
- e. Counseling and Follow-up Care: Dean of Allied Health must facilitate appropriate counseling and follow-up care for those faculty, staff, and students who do not continue to perform patient care procedures.
- f. Protocols: Minnesota West Community and Technical College Dental Assistant Department has established and enforced written pre-clinical, 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 are provided to all faculty, students, and appropriate support staff. To protect faculty, students, staff and patients from the possibility of cross-contaminations and other infections, Minnesota West dental assistant department has policies and procedures in disinfection protocol and barrier techniques.
- g. Testing for Infectious Disease and Immunization. Minnesota West requires all students to be immunized against the Hepatitis B virus as part of their preparation for clinic training, or demonstrate proof of immunity. Minnesota West also requires students to be immunized against not only hepatitis B, but also other infectious diseases such as mumps, measles, and rubella, using standard medical practices, and be tested for tuberculosis.

BLOODBORNE, ASEPSIS, HAZARD AND INFECTION CONTROL PLAN

General policy:

Minnesota West Community and Technical College, Canby Campus is committed to providing a safe and healthful workplace for all employees and students through compliance with applicable OSHA standards.

This written exposure control plan has been developed to comply with OSHA's Bloodborne Pathogens Standards. The standards are designed to protect employees/students from occupational exposure to HIV, HBV, and other bloodborne pathogens.

The exposure control plan is accessible to all employees and students. It will be reviewed at least annually and updated as often as changes in positions, tasks or procedures require.

The Dental Assistant Program Director has been designated the OSHA compliance manager for the program and is responsible for implementing the exposure control plan. The compliance manager will provide employees and students with a copy of the plan upon request.

Exposure determination:

The Bloodborne Pathogens Standard describes how to determine which employees or students have occupational exposure to bloodborne pathogens. The standard defines occupational exposure as reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potential infectious materials that may result from the performance of an employee's/student's duties. Other potentially infectious materials are defined in the standard to include saliva in dental procedures and *unfixed* tissue. Occupational exposure must be determined without regard to the use of personal protective equipment. The following exposure determination has been prepared for this office:

All employees in the following job classifications have occupational exposures:

All Dental Assistant Faculty Supervising Dentists

All students have occupational exposure during the clinical phase of the Dental Assisting Program. Some employees in the following Job classifications have occupational exposure, and the tasks/procedures that give rise to the exposure are listed:

Custodial staff Garbage pick-up Equipment repair

Education

Before engaging in activities where there is a potential risk for exposure to blood or body fluids, all students in the healthcare fields will be educated about bloodborne pathogens and recommendations for safe practice. The Administration/Faculty of Minnesota West Community and Technical College are responsible for disseminating information about bloodborne pathogens and their transmission to their students. The curriculum must reflect content related to bloodborne pathogens and the practice of standard precautions.

Bloodborne Pathogens Education will be provided as follows:

PROGRAM	COURSE	
Practical Nursing	NURS 1120 Nursing Care of the Adult I	
	NURS 1140 Nursing Skills Lab	
	NURS 1180 Clinical Application	
Associate Science Nursing	NURS 2140 Professional Nursing Skills	
	NURS 2180 Clinical Application	
Medical Laboratory Technician	MDLT 1100 Introduction to Lab Science	
Medical Assistant	MDLT 1100 Introduction to Lab Science	
Dental Assistant	DEN 1130 Preclinical Dental Assisting	
Surgical Technology	SURG 1110 Surgical Microbiology	
Radiology Technology	RADT 1100 Introduction to Rad Tech and	
	Patient Care	
Massage Therapy	MSTH 1100 Introduction to Massage	
Emergency Medical Services	All EMS courses	
Phlebotomy	MDLT 1100 Introduction to Lab Science	
Certified Nurse Assistant	HC 1175 Nurse Assistant	

Students may be participating in activities within courses that have potential for exposure to infectious diseases. All measures must be exercised to minimize risk. Students who fail to adhere to the Blood Borne Pathogens Policy pose a risk to themselves and others and may be withdrawn from the program.

Dates:

This school will implement the following sections of the Bloodborne Pathogens Standard before the start of clinical courses each year:

Standard Precautions
Exposure control plan
Information and training
Record keeping
Engineering/work practice controls
Personal protective equipment
Housekeeping
HBV vaccination/post-exposure evaluation and follow-up
Labels and signs

Definitions:

<u>Bloodborne Pathogens:</u> Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV).

<u>Contaminated</u>: The presence of blood or other potentially infectious materials on an item or surface.

<u>Engineering Controls</u>: Controls that isolate or remove the bloodborne pathogens hazard from the environment. Examples of environmental controls include sharps disposal containers, self-sheathing needles, and needleless systems.

<u>Exposure:</u> Skin, eye, mucous membrane, non-intact skin, or other parenteral contact with blood or other potentially infectious materials. Exposure may occur because of a percutaneous injury, or contact with mucous membranes or non-intact skin.

Other Potentially Infectious Materials: Blood as well as cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, semen, and vaginal fluids are considered to be contaminated. Standard precautions do not apply to feces, emesis, urine, nasal secretions, sputum, sweat, or tears unless they are visibly contaminated with blood.

<u>Personal Protective Equipment (PPE):</u> Specialized clothing or equipment worn for protection against a hazard. General work clothes (uniforms) are not considered PPE.

<u>Post-Exposure Prophylaxis</u>: Drug and/or immunization interventions administered to help prevent acquiring a blood-borne infection.

Standard Precautions: This is an approach to infection control that treats blood and certain body fluids (including saliva in dental procedures) from all patients as infectious for HBV, HIV, and other bloodborne pathogens, regardless of the patient's perceived infectious status. These are a set of precautions designed to prevent transmission of bloodborne pathogens. They involve the use of appropriate hand washing combined with the use of appropriate protective barriers, such as gloves, gowns, masks, protective goggles or face shields, which can reduce the risk of exposure of the health care worker's skin or mucous membranes to potentially infective materials. Standard precautions also include the concept whereby health care workers take all necessary precautions to prevent injuries caused by sharp instruments or devices.

Standard Precautions:

Minnesota West Community and Technical College requires use of standard precautions in healthcare programs. Education is provided to students by faculty in classes where there is an anticipated potential for exposure. (See information about education above).

Engineering Controls:

These include sharps disposal containers, needleless systems, self-sheathing needles, and other mechanical devices. Annual review of appropriate engineering controls will be performed by instructors teaching in programs utilizing engineering controls.

Work practice controls reduce the likelihood a student will be exposed by changing the way a task is performed. Engineering and work practice controls used in this school are explained more fully on the next pages.

Hand washing:

Hand washing is the single most effective method to prevent the transmission of infection. Various hand washing agents, plain or antimicrobial soap and alcohol-based hand sanitizers are available in campus labs and clinical sites. Students, faculty and staff should follow the recommendations published by the CDC for hand hygiene. http://www.cdc.gov/handhygiene/

- A. Hands should be washed with soap and water when hands are visibly dirty, contaminated with blood or body fluids, contaminated with protein-based substances, and at the beginning and end of the clinical or lab experience.
- B. The preferred method of hand hygiene is with an alcohol-based hand sanitizer when hands are not visibly dirty.

Hand hygiene should be performed at the following times:

- Before direct contact with all patients
- Before donning gloves
- After removing gloves
- After contact with patient intact skin
- After contact with blood, body fluids, excretions, mucous membranes, non-intact skin, or wound dressings
- During patient care, if hands are moving from a contaminated body site to a clean body site
- After personal contact such as nose blowing, sneezing, or using the bathroom
- Before preparing or eating food
- After touching the patient's surroundings

Hand washing facilities are readily accessible in the following locations:

Canby:

- 1. Central clinical hand washing area (2 sensor-controlled sinks)
- 2. Operatory #1
- 3. Side of Clinic (2 sensor-controlled sinks)
- 4. Sterilization counter sink
- 5. Lab area (5)

Luverne:

- 1. Clinic (4)
- 2. Sterilization (1)
- 3. Lab area (2)
- 4. Classroom/Lab (1)

Alcohol-based hand sanitizers may be used if hands are not visibly soiled.

Handling contaminated needles and other sharps:

The standard defines contaminated sharps to mean any contaminated object that can penetrate the skin including, but not limited to needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Contaminated sharps are handled as follows to minimize employee exposure:

Shearing or breaking of contaminated sharps is never permitted.

Immediately or as soon as possible after use, contaminated reusable sharps (such as scaler or explorer) must be placed in appropriate containers until they are processed. Containers provided for this purpose are puncture resistant and handled in a manner that does not require employees to reach by hand into the containers.

Containers for disposable sharps are located in the sterilization area

Utility gloves will be worn when handling contaminated instruments.

Contaminated instruments will be processed following the steps in the Infection Control Protocol document

Food and drink may not be stored in refrigerators, freezers, shelves, cabinets, or on countertops where blood or other potentially infectious materials are present. Eating, drinking, applying cosmetics, handling contact lenses is prohibited in work areas where there is reasonable likelihood of occupational exposure.

Techniques to minimize splashing and spraying:

Procedures involving blood or other potentially infectious materials are performed in a manner to minimize splashing, spraying, spattering and generating droplets of these substances. Methods that may be used to accomplish this goal include:

- 1. high volume evacuation
- 2. saliva ejectors

Specimens:

No specimens of blood or other potentially infectious materials are handled in this school.

Contaminated equipment:

Equipment that becomes contaminated with blood or other potentially infectious materials must be examined before servicing or shipping and decontaminated as necessary, unless decontamination is not feasible.

Equipment that cannot be completely decontaminated before servicing or shipping must be marked with a biohazard label that states which parts are still contaminated. This information must be conveyed to employees/students, service people, and others who handle the contaminated equipment.

Personal protective equipment (PPE):

The standard defines personal protective equipment (PPE) as specialized clothing or equipment worn by an employee/student to protect against a hazard. General work clothes that are not intended to function as protection against a hazard are not regarded as PPE.

The specific PPE used will depend on the task and degree of exposure anticipated. In general, PPE is appropriate if it prevents blood or other potentially infectious materials from passing through or reaching employees' undergarments, clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use.

Use of PPE:

Employees / students must use appropriate PPE whenever there is occupational exposure. This is OSHA requirement.

The only exception is in the rare and extraordinary circumstances where, in the employee's/student's judgment, using the PPE would:

- I) expose the employee/student to greater hazard, or
- 2) prevent the employee/student from delivering patient care.

Generally, this exception would only apply in cases of extreme emergency. When an employee/student makes this judgment, the circumstances will be investigated and documented to determine whether changes can be made to prevent such occurrences in the future.

Gloves:

Gloves must be worn whenever you anticipate contact with blood, saliva, mucous membranes or blood contaminated objects or surfaces. There are significant risks to both dental health care personnel and patients when gloves are not used. Ungloved hands are probably the mechanism by which dental personnel have acquired HBV infections from their patients. Transmission of infectious agents from provider to patient, though relatively rare, has also been documented.

Different types of gloves should be used for different purposes. Factors to consider when choosing gloves include the type of procedure, the tactile sensitivity required for the procedure, and the comfort of the wearer.

There are three major categories of gloves: Exam gloves: Latex, Vinyl or Nitrile (sterile and non-sterile), Over gloves and Utility gloves.

The Food and Drug Administration (FDA) is responsible for regulating gloves marketed for use in the health care industry. No data currently exists to indicate that there is any difference in barrier effectiveness between vinyl and latex gloves. Sterile gloves (often marketed as sterile surgical gloves) are recommended specifically for surgical procedures, such as oral or periodontal surgery, involving contact with normally sterile areas of the body. Non-sterile gloves (often marketed as examination gloves) provide an adequate level of protection while performing most other dental procedures.

Gloves must be changed between patients, whether they are worn for treatment or examination. Gloves should not be washed. Hand hygiene should always be performed after removing gloves for several reasons; Disinfecting agents may cause deterioration of glove material, and minute tears or punctures in gloves may occur during treatment, resulting in contamination of hands. Also, resident organisms on the hands can multiply rapidly in the warm, moist environment of gloved hands and could be passed on to the next patient. If you become aware of tears or punctures in gloves during patient care, remove them as soon as possible, wash your hands and reglove. Disposable (single use) gloves should never be reused.

General purpose utility gloves are thicker, "dishwashing" type gloves that are only appropriate for use during clean up and disinfection procedure. These gloves are not designed specifically for health care uses and are not regulated by the FDA. Unlike gloves used during patient care, utility gloves can be washed, sterilized, and reused. However, be sure to replace them if they become cracked or worn, or if they show other evidence of deterioration.

Masks:

A mask must be worn to protect the mucous membranes of the nose and mouth from exposure to blood and saliva. Spatter containing blood and saliva may be generated during dental procedures involving use of equipment such as the air turbine hand piece, air water syringe, or ultrasonic scaler. Studies have shown that spatter generated from the air turbine hand piece contains microorganisms. Other studies indicate that spatter, rather than true aerosols (that is, particles of material with remain suspended in the air) are generated by dental procedures. Consequently, spatter represents a greater risk of exposure. Dental health care personnel should identify which procedures can cause spatter and protect themselves by using a mask when performing those procedures. The protection provided by any mask is compromised if it does not fit well, because a poor fit may allow spatter to enter around the edges of the mask. Adjust it so that it fits snugly against the face.

Keep beard and mustache groomed so that the mask fits well and can be worn effectively.

Change the mask between patients or if the mask gets wet.

Remove the mask as soon as treatment is over. Don't leave it dangling around your neck, and don't leave the treatment room with a mask in place or around your neck.

When removing a mask, handle it only by the elastic or cloth tie strings. Never touch the mask itself.

Protective eyewear:

Protective eyewear must be worn to protect the mucous membranes of the eyes from projectiles and spatter of blood and saliva. The risk of exposing the tissues of the eyes to blood and body fluids is well documented. Viruses such as hepatitis B and herpes simplex can be transmitted to dental staff whose eyes are splashed or spattered with saliva or blood.

The protective eyewear may include goggles, safety glasses with side shields, or regular glasses with solid side shields. Since many dental procedures produce projectiles from materials such as amalgam restorations or crowns, consider using shatter resistant protective eyewear. In such

instances, protective eyewear for the patient should also be used. In addition to the above it is suggested the protective eyewear be anti-fog.

Gowns:

Students will wear scrubs, with a long sleeved, high collared disposable clinical jacket/gown worn over top when subject to occupational exposure.

In this school, staff/students must use gloves, protective eyewear, gowns, and masks when performing any patient procedures:

Students will purchase their own gloves, masks, protective eyewear, and gowns from the bookstore. They will be stored in lab drawers or lockers.

Cleaning disposal, repair, and replacement:

PPE must be removed immediately or as soon as feasible after it is penetrated by blood or other potentially infectious materials.

All PPE must be removed before staff/students leave the work area.

After PPE is removed, it must be placed in the designated area or container for storage, washing, decontamination, or disposal.

Disposable clinical jackets will be worn during patient procedures, and will be discarded after each patient.

Laundry:

Student clothing or uniforms that have become contaminated with blood or body fluids must be transported in a tied fluid resistant bag and laundered separately in hot water. Handle contaminated clothing as little as possible. Students will wear disposable clothing when laundry services are not available.

Housekeeping:

Students should contact both instructor and facility staff member prior to cleaning contaminated areas. Contaminated work surfaces must be decontaminated with an appropriate disinfectant after completion of procedures. Students must wear gloves when cleaning contaminated surfaces. Students must use mechanical means to pick up broken glassware that may be contaminated. Broken contaminated glassware must never be picked up by hand, even if gloves are worn.

Regulated Waste:

Liquid, semi-liquid blood items that are caked with dried blood (or other potentially infectious materials capable of being released during handling) should be placed in appropriate containers. Containers must be closable, able to fully contain all contents, and prevent leakage of fluids during handling, storage, and transport. They must be labeled with a biohazard label and/or color-coded red. All regulated waste is disposed of according to applicable local, state, and federal laws.

Hepatitis B vaccination:

Students: Students are required to receive the Hepatitis B vaccination series. The expense of the vaccination is the student's responsibility. If a student is not medically eligible, or chooses not to receive the Hepatitis B vaccination series, they must sign a Hepatitis B waiver form (see appendix D). Refusal to receive Hepatitis B vaccination may limit clinical opportunities or placement in a clinical site.

Procedure Following an Occupational Exposure to Blood/Body Fluid

- 1. Remove all soiled clothing.
- 2. Wash wounds and skin with soap and water. Flush mucous membranes copiously with water for at least 15 minutes.
- 3. **Immediately** report the exposure to your supervising instructor after cleansing the area.
- 4. Follow up consultation will be required. This may involve treatment at an emergency department or public health department for an evaluation.
- 5. If the clinical institution has an established protocol, follow their protocol.
- 6. Fill out Student Report of Blood/Body Fluid Exposure and give to your supervising instructor.
- 7. Expenses as a result of this exposure are the student's responsibility, not the responsibility of MWCTC. (Note: Expenses may also include laboratory testing of patient's blood.)

Supervising Instructor responsibilities when student is exposed or injured:

- 1. Have student prepare a Student Report of Blood/Body Fluid Exposure (see appendix A)
- 2. Give the report to the Administrative Secretary.
- 3. Inform the student of the importance of getting medical care.
- 4. Inform the student that they will be responsible for all expenses incurred.
- 5. Follow-up with the student in one week.

Record Keeping: A confidential medical record is maintained for each student with occupational exposure. The medical record includes:

- Student name
- Exposure incident report
- Form refusing Hepatitis B vaccination (if applicable)
- Form refusing post exposure evaluation and follow-up (if applicable)

Labels:

In this school, potentially hazardous materials are color-coded red or identified with the biohazardous symbol and the word "biohazard" in contrasting color on a fluorescent orange or orange-red label.

DENTAL ASSISTANT PROGRAM INFECTION CONTROL PROTOCOL

OBJECTIVES:

- Reduce the number of pathogens so normal resistance can prevent infection.
- Break cycle of infection and eliminate, cross contamination.
- Treat every patient/instrument as infectious.
- Protect patient/personnel from infection.

Post-Treatment Infection Control in the Treatment Room

- 1. After procedure removed contaminated exam gloves and mask, use hand sanitizer, and dismiss patient.
- 2. Proceed to sterilization area, put on utility gloves and new mask
- 3. Return to treatment room, remove handpiece, HVE, saliva ejector, and air water tip and place on tray. Place cover on instrument tray.
- 4. Remove and invert chair cover, remove all barriers and place in inverted chair cover, return with covered tray to sterilization area for disposal.
- 5. Check to see that the pre-cleaning and disinfecting product is fresh, then soak (4) 4x4 gauze pads with solution. Return to room with soaked gauze pads.
- 6. Use 2 gauze pads soaked with the disinfecting product and vigorously wipe all contaminated surfaces to pre-clean
- 7. Use2 gauze pads soaked with the disinfecting product and wet each pre-cleaned surface with the product to disinfect
- 8. Allow the surface to remain moist for the manufacturers recommended time.
- 9. Return to your patient tray in the sterilization area.
- 10. Process your tray set up in the sterilization area.
 - a. Place cassette in ultrasonic cleaner for 10-15 minutes
 - b. Remove from ultrasonic and rinse well
 - c. Place on tray to the right of the ultrasonic/sink
 - d. Dry instruments
 - e. Place dried instruments into sterilization pouches and place in sterilizers or set on tray to the right of the ultrasonic/sink.

- 11. Carefully remove barrier from procedure tray, set tray onto clean area of counter, and dispose of barrier. Once utility gloves are removed place tray in storage cabinet.
- 12. Clean and lubricate slow-speed handpiece following the directions on the chart.
- 13. Dry handpiece, place in a sterilization bag, and place it on the tray to the right of the ultrasonic/sink.
- 14. Wash utility gloves. Remove eyewear; wipe with disinfectant soaked 4x4 gauze and place on tray to the right of sterilizer. Remove mask. Wash, disinfect, and remove utility gloves and hang to dry.
- 15. Disposable gowns should be removed and disposed of in garbage.
- 16. Wash your hands well.
- 17. Turn off the air and water on your unit.
- 18. Fill out the Asepsis Monitor Sheet in the Monitor Book.
- 19. Remove the patient chart from the treatment room and complete the entries.

MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE DENTAL ASSISTANT PROGRAM LABORATORY PROTOCOL / SAFETY RULES

To assure that each student has a productive, as well as safe experience during the laboratory sessions, everyone needs to adhere to specific rules. The following is the minimum requirement which will be in place during laboratory sessions. Students not adhering to these requirements will not be allowed in the lab.

- 1. Wear your laboratory coat or protective clothing at all times. Do not wear loose clothing during lab time.
- 2. No eating or drinking allowed in the lab or clinic
- 3. Hair is to be off the face and secured back tightly. If you have long hair it is advisable to have it up and off your collar. You will be asked to leave the lab area if hair is not considered safe.
- 4. Protective glasses **must** be worn when working with rotating instruments, such as engines, lathes, model trimmers, etc. as well as with materials or equipment that could be hazardous.
- 5. When removing electrical plugs from the electrical outlets, please make sure hands are dry and grip the plug, not the cord.
- 6. "Think before you act" to avoid injury.
- 7. Instruments and equipment will be used for what they are designed for.
- 8. Be respectful of your surroundings and the safety of others.
- 9. Keep your desk free of all personal belongings not to be used in the exercise.
- 10. You will be responsible for the supplies, equipment and materials you are using, as well as maintaining and cleaning up your work area.
- 11. Keep all bowls, spatulas, slabs and other equipment clean as you use them.
- 12. At the end of class put all equipment away and clean off your table top and laboratory chairs. You are responsible for leaving the lab clean.
- 13. You will come to each laboratory session prepared. If material has been missed, you will gather the information needed prior to working in the lab.
- 14. If you are uncertain of how to proceed, you will ask an instructor prior to the laboratory session.

- 15. Always wipe up any spills from the floor immediately.
- 16. Do not pour plaster or stone into the sink. It will harden and be very difficult to remove. Dispose of excess gypsum products into the waste basket. Only use the three sinks in the trimming area to rinse out plaster bowls as they are equipped with plaster traps.
- 17. Any malfunctioning equipment must be reported to the instructor IMMEDIATELY.
- 18. Any injuries, no matter how minor, are to be reported to the instructor IMMEDIATELY. Follow school policy for sharp injuries.
- 19. In case of fire, do not panic. Know the route of exit from the building and where the fire extinguishers are mounted.
- 20. In case the exposure to a hazardous chemical occurs, notify the instructor immediately and refer to the SDS for proper protocol to follow.

RADIATION SAFETY POLICY

A safety program has been developed by this school for the purpose of insuring that all radiographs taken will be consistently produced for diagnostic reasons only and with a minimum of exposure to hazardous ionizing radiation. Based on training and experience, a Radiation Safety Officer had been designated and understands the responsibility of this position which shall include:

- Monitoring radiographic quality for the safety of patients and personnel
- Monitoring radiographic quality for diagnostic quality
- Providing training for staff in areas of radiographic technique and safety
- Insuring safe operation of radiographic equipment through observation and training of individuals involved in radiation exposure
- To maintain required records for quality assurance
- To ensure that radiographic equipment is calibrated and functioning properly

The safety of patients, students, and staff is a primary concern and all action taken will follow the Minnesota Radiation Rules and Regulations. In addition to the responsibilities of the Radiation Safety Officer (RSO), the students and staff understand the importance of radiation safety and compliance through the following actions:

- 1. Registration and renewal of all x-ray tubes shall be completed.
 - Why To insure timely registration and renewal with the Commissioner of Health.
 - Who- Registration and renewal forms shall be reviewed by the RSO.
 - Where-A copy of registration and renewal forms shall be kept in this Radiation Safety Officer Manual.
 - When- Registration must be completed within 30 days of purchase or disposition of radiation producing equipment.
 - How- The commissioner of Health will issue registration forms upon request and renewal forms biannually for each registered tube. These forms are to be completed and returned to the Commissioner in a timely manner.
 - If it is discovered that a tube has not been registered, or has been registered incorrectly, the RSO will contact the commissioner to correct the situation.
- 2. No individual shall be involved in the exposure of radiation without proper training.
 - Why- To insure the safety of patients, staff, students, and safe radiation practices.
 - Who- This shall include any individual involved in the film placement, beam direction, or exposure of any radiograph taken at this facility.
 - Where-Any individual not involved in the exposure process shall not be permitted in areas designated as potential scatter radiation space.
 - Any individual not involved in the exposure process shall remain outside of the primary beam and/or be protected with appropriate lead equivalent barriers.
 - How- Through education of students to facility design and radiation safety.

- Visual monitoring by the RSO and other staff for safety compliance.
- 3. Post radiation warning at each radiation control panel with exposure information for each situation likely to be used.
 - Why- To insure proper exposure technique for optimal diagnostic radiographs and areas of exposure.
 - To minimize radiation exposure to the patient, decrease the number of retakes due to exposure technique error.
 - Who- The RSO shall insure proper labeling and up-date the information.
 - Where-This information shall be posted at the control panel of each x-ray machine.
 - When- This label shall be visible at all times and replaced as needed.
 - How- Have each student sign off on action-oriented competence.
- 4. Terminate power to radiation equipment in an emergency situation involving radiation exposure.
 - Why- To reduce patient exposure to non-diagnostic radiation.
 - To protect patients and staff from additional radiation hazards.
 - To reduce x-ray equipment damage.
 - Who- The individual making the exposure is responsible for taking emergency situation action to the best of their ability.
 - Where-The power switch is located on the control panel for each machine.
 - When- During any emergency situation involving radiation malfunction.
 - How- Turn off the power to the x-ray unit. Remove the patient from the situation. Notify the RSO. Do not use the equipment until the situation causing the malfunction had been corrected.
- 5. Each staff member shall receive orientation training and annual retraining in the hazards and protection of radiation.
 - Why- To reduce patient exposure to non-diagnostic radiation.
 - To protect patients, students, and staff from non-diagnostic radiation.
 - Who- All employees involved in making radiographic exposures and the processing of these films.
 - Where-Any radiographic procedures done in this facility.
 - When- At all times.
 - How- Through the practice of safe operating procedures.
 - Orientation and annual retraining will be documented in the annual section of the Radiation Safety Officer Manual.
 - The RSO will monitor compliance and inform individuals of training needs on an as needed basis.
 - Annual retraining shall include but not be limited to:
 - *Radiation effects to humans and fetus Safety Precautions
 - *Radiographic criteria and evaluation
 - *Radiographic Technique review
- 6. No student or staff shall be used to hold film during exposure to radiation

Who- All staff and students

Where-At this facility

When- During exposure to radiation for radiographic purposes.

How- Film holders shall be used for all radiographic exams.

In the exception case where a film holder cannot be adapted for use, the patient will be allowed to hold the film or sensor. All radiation precautions will be taken to reduce the radiation exposure received by the patient.

- During the exposure to radiation, the operator shall stand behind a protective barrier and/or be a minimum of 6 feet from the primary beam.
- If the patient is unable or unwilling, guardian or office personnel may be used. All radiation precautions will be taken to reduce the radiation exposure received by that individual.
- Staff members may occasionally hold films if any portion of the body exposed to the primary beam is protected.
- Patients shall not support tube heads to prevent drifting.
- Maintenance and repairs shall be made as needed and copies of these records shall be filed in this manual.
- 7. It is understood that lead apron protection is not legally required, but it is available to patients upon request. In addition, students and staff shall practice radiation safety procedures at all times.
 - How- Lead aprons shall be evaluated each time they are used for function and appearance and replaced as needed according to the RSO.
 - When not in use lead aprons shall be hung or draped in such a way as not to cause creases or folds in the lead lining.
 - When a lead apron no longer functions efficiently it shall be reported to the RSO to determine if it should be replaced.
 - When disposing of a lead apron, contact the appropriate Hazard Waste Disposal Company and Document action in this manual.
- 8. Personnel radiation monitoring shall be required for all pregnant personnel and students (Students will be required to cover the cost of the monitoring)

Why- To monitor the safety of individuals making radiation exposures.

Who- The RSO shall monitor and maintain the records of pregnant staff/ students.

Where-A record shall be kept in the radiation safety manual.

When- On a quarterly basis badges will be evaluated and the information shared with the monitored individuals.

How- The monitoring badge shall be worn outside of any protective clothing. When not worn this badge shall be kept in an area free of scatter radiation.

If the individual works at a facility as well as attends school during a
monitoring period, the same badge shall be worn to record total
occupational exposure. Reports shall be maintained by the radiation
safety officer, and reviewed with the monitored individual every three
months while monitored.

- 9. For the safety of the patient, radiation exposure shall be as low as reasonably achievable through minimal radiation exposure and retakes by using:
- * digital sensors consistent with the examination.
- * trained and monitored students and personnel making radiographic exposures.

 Personnel shall be retrained annually in the hazards and use of radiation.

 Technique seminar will be offered as needed or indicated through the monitoring of radiographs taken at this facility. Training records are maintained.
- * technique charts indicating appropriate settings for radiographic exposures located at each x-ray machine control.
- * radiation safety surveys and calibrations shall be performed as indicated in the "Quality Assurance" portion of this manual.
- 10. Radiographs taken on patients in the Dental Assistant Department at Minnesota West Canby Campus will be for diagnostic purposes only.
- 11. Radiographic requests must be signed and dated by the patient's dentist. A copy of this documentation must be retained in the patient's record.
- 12. For a patient to qualify as a candidate for an FMX (18 films) he/she must not have had an FMX series in the last 3 years, unless there is specific documentation of need by his/her dentist.
- 13. Any FMX patients under the age of 18 years must have a signed consent from the legal guardian in addition to the signed dentist request form.
- 14. X-rays on patients will be retaken only if they do not meet diagnostic quality requirements. The student will be allowed only one retake of any projection on a patient.

 Any further exposure will be done with the help of an instructor.
- 15. All radiographs exposed shall be recorded in the patient chart including the number of retake exposures made.
- 16. The student/staff must stand at least 6 feet from the tube head, or be positioned perpendicular to the primary beam, or at a 90 to 135-degree angle.

DENTAL RADIOLOGY INFECTION CONTROL PROTOCAL

1. Pre-Treatment

- a. Must have a completed x-ray permission letter signed by patient's dentist. Medical history is completed and reviewed with patient.
- b. Barriers will be placed on the following
 - i. Headrest
 - ii. X-ray control button used to expose film
 - iii. Laptop keyboard
 - iv. Barrier sheath and finger cot placed on sensor
- c. Place sensor positioning devices on patient tray

2. During Treatment

- a. Wash hands, put on masks, eye wear, and gloves
- b. Once you are completely finished exposing the x-rays, remove gloves, and wash hands or use hand sanitizer
- c. Remove lead apron (if used) from the patient and return it to the holder

3. Critique

a. Critique films prior to instructor evaluation

4. Post-Treatment

Follow Post- Treatment Infection Control in the Treatment Room protocol.

The following areas are also disinfected.

- i. X-ray control panel
- ii. Dental chair adjustment controls
- iii. PID and arms
- iv. X-ray control button and cord
- v. Lead apron (if used)

Sensor Care:

- a. Carefully remove finger cot and barrier.
- b. Using wet but not soaked disinfectant gauze, wipe sensor cord.

DENTAL ASSISTANT DEPARTMENT EMERGENCY PLAN

The following describes the procedures to be used should an emergency develop in the Dental Assisting Department. These emergencies include those related to a fire, or a medical problem related to an illness or injury.

FIRE

A. In the Dental Department

A fire extinguisher is located in the lab by the front door. It is checked every 6 months to assure it is working properly. A fire blanket is located by the supply room door. When a fire is first detected, take the appropriate fire suppressant and try to put out the fire while calling for an instructor. The instructor will decide when to trigger the fire alarm and clear the building.

B. Out of the Dental Department

When the fire alarm sounds, all students must think of their patients first, and the instructors will think of the students. Quickly discontinue any procedure being performed, and take the patient out of the laboratory door and out of the building by the front office. If this escape route is blocked, leave by the clinic door, and go out one of the other doors. A chart is posted near each door with the directions. The instructors are responsible for checking all rooms to be sure they are empty, turning off lights, and closing all doors before they leave by the same exit.

MEDICAL EMERGENCY

A. Injury

Send someone for an instructor or call for an instructor. **Do not leave the injured person.** An instructor will assign tasks after the injury has been investigated.

B. Illness

- 1. Call out a code name "Red" and follow it by the location, such as, "Red Treatment Room 4", or "Red Lab", etc. **Do not leave the patient** until an instructor arrives.
- 2. After the instructor arrives, ask if you should call 911. If the instructor says yes, go to the phone, press 9, and dial 911. Tell the person who answers the phone where you are, who you are, the nature of the emergency, and ask for an ambulance. Let the dispatcher hang up first after you have answered all of his/her questions.
- 3. If someone has not already brought the emergency oxygen cart and emergency kit, bring it to where the patient is. The emergency oxygen cart is located in the clinic storage closet and emergency kit is located on table by the darkroom. By this time the instructor may have already asked someone else to get these items, so check quickly, and then go back to where the patient is and see if you can help.

NITROUS OXIDE SEDATION PARTICIPANTS

Any student who is pregnant during the Nitrous Oxide Sedation component must have written documentation from their medical physician allowing them to administer nitrous oxide/oxygen sedation to a classmate/patient. Administration of nitrous oxide is a requirement of the course.

Pregnant students without this documentation will be denied clinical participation but may be included in the lecture component. They cannot be a participant in the clinical component until after the birth of their child. Arrangement for the completion of the clinical components must be arranged through the instructor and non-completion of the clinical component will prevent the student from taking the MN State Licensure examination.

Pregnant students will not be allowed to have nitrous oxide administered to them.

MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE STUDENT REPORT OF BLOOD/BODY FLUID EXPOSURE

	Name:	
	Address:	
	Phone:	
	Date of Birth	
	Date of Injury:	_Time:
	Date of Report:	Time:
	Facility where incident occurred:	
	Describe the incident in detail: (Attach extra sheets if no	eeded)
	Was the affected area washed/flushed?	
	Describe where the incident occurred. (pt. room, lab, ha	llway)
	What potentially infectious materials were involved in thinage, etc.)	e incident? (Type, blood, wound
	What were the circumstances that contributed to the inc	cident?
	List the Personal Protective Equipment that was being us	ed at the time of the incident.
	Nid	avilla dha agus dhadanan wasainad
	Did you receive any follow up care after the incident? Des ish and bandage wound, went to ER, received prophylact	
Stu	dent Signature	Date

STATE OF MINNESOTA MINNESOTA STATE COLLEGES AND UNIVERSITIES MINNESOTA WEST COMMUNITY & TECHNICAL COLLEGES IMPORTANT NOTICES

REASONABLE ACCOMMODATIONS

There are conditions for which accommodations may be appropriate under the Americans with Disabilities Act. The Allied Health Programs will make all reasonable accommodations required by law for otherwise qualified instructors. To receive accommodations, you must contact the Office for Students with Disabilities.

RESPONSIBILITY FOR HEALTH CARE COSTS

Any health care costs incurred will be your responsibility.

CRIMINAL BACKGROUND CHECKS

An integral part of the Allied Health Programs is the clinical experience program. To provide this experience, the College contracts with local health care facilities. State law requires that any person who provides services which involve direct contact with patients and residents of a health care facility have a background study conducted by the State. The College will initiate a background study by asking you to complete a form so that a criminal background check can be conducted. If, as a result of the background study, you are disqualified from direct contact, it is highly unlikely that the College will allow you to participate in its clinical instruction.

DATA PRACTICES ADVISORY AND INFORMED CONSENT

Some facilities also impose certain requirements regarding the health of persons working in their facilities and may require that health information about you in clinical site programs be made available to them. The College may ask you to provide health information which will be used to determine whether you meet a clinical site's health requirements for care providers. Health information collected is private data on you. A clinical site may refuse to allow you to instruct based on data provided by you. The information provided will be disclosed, as needed, to the College Director of Allied Health and, should any clinical site request the data, to any clinical site where you are placed. You are not legally required to provide this information to the College. However, refusal to provide the information requested could mean that the College and clinical site may refuse to accept you at its facility.

I hereby authorize the College to release my health information to any facility to which I am assigned during my clinical instruction, should the facility request the information. This authorization is valid for one year from the date of my signature.

Date	Name (please print)
	Signature

Student Statement of Understanding and Release of the Dental Assistant Program I, ______ am a student at Minnesota West Community and Technical College-Canby Campus who is enrolled in the Dental Assistant Program. I acknowledge that I have been informed of the following and that I understand the following: 1. That the Dental Assistant program I have enrolled in may involve exposure to human body fluids and cell and tissue cultures that may carry infections such as HIV (Human Immunodeficiency Virus) and Hepatitis C Virus (HCV). 2. That exposure to infectious blood and other body fluids and cultures by contact through eye, mouth, blood, non-intact skin, or other method may put me at risk of contracting a bloodborne infection. 3. That to protect myself from exposure to blood and other body fluid and cultures, I will wear protective apparel according to OSHA (Occupational Safety and Health Administration) standards and comply with applicable policies of the College and any hospital or clinical affiliate that I am attending. 4. That if I should become exposed by eye, mouth, blood, non-intact skin, or other method to blood or other human fluids or cultures, I will immediately report such incident to the program instructor or clinical affiliate supervisor. 5. That if such exposure should occur, I hereby authorize the College or the clinical affiliate to administer such immediate first aid as is deemed appropriate until medical help can be obtained. 6. That I hereby release and hold harmless Minnesota West Community and Technical College, its employees, officers, agents, and representatives, including all hospital and clinical affiliates, from any liability for any and all injury, illness, disability, or death, including all costs for medical care, resulting from my exposure to infectious blood or other human fluids or cultures or the administration of emergency first aid after such exposure, during the course of my participation in the Dental Assistant Program, whether caused by the negligence of the College or otherwise, except that which is the result of gross negligence or wanton misconduct by the College. 7. Immunizations: a. All students, faculty, and staff who have direct patient care contact are required to obtain the vaccination (or present evidence of immunity) against Hepatitis B infection, or formally decline the vaccination. b. Students who decline to vaccinated will be required to sign a formal declination waiver form. c. All students must provide evidence of a completed immunization record as a condition of entry in to the dental assistant program I have read and understand the policies within the Dental Assistant Program Handbook

Student Name: _____

(Please Print)

Instructor Signature: _____

Student Signature: _____ Date: _____

(Major)

Date:

MINNESOTA WEST COMMUNITY & TECHNICAL COLLEGE

Dental Assistant Program

STUDENT SAFETY DEVICES

Every person shall wear quality protective eye devices when participating in, observing or performing any function in connection with any courses or activities taking place in eye protection areas of any educational institution in the state. Eye protection areas are defined as any area where there is the possibility of eye injury due to heat, fluids, or debris.

Every person shall wear a protective device over their mouth and nose when participating in, observing, or performing any procedure in which there is a possibility of inhaling dusts or fluids.

Every person shall wear protective devices on their hands when participating in or performing any procedure in which there is a possibility of exposing the hands to any chemicals, fluids, or infectious agents which may injure the hands or allow infection to begin.

Every person shall be aware of the possibility of contacting the Hepatitis B virus in any facility that treats patients. Even with the most stringent protective procedures, the possibility of developing a Hepatitis B infection exists. The most efficient and secure method for personal protection against Hepatitis B is to receive the Hepatitis B vaccination series from a medical facility. If you decide not to receive the vaccination you will be asked to sign a declination form stating you were educated about the danger of contracting Hepatitis B. A decision not to receive the recommended Hepatitis B vaccination is the personal decision of the participating student, and any possible consequences are the responsibility of that student.

Any person failing to comply with the above requirements may be temporarily suspended from participation in said course and the registration of a person for such a course may be canceled for willful, flagrant, or repeated failure to observe the above requirements.

Signature of Student
Date
Signature of Witness

Student Hepatitis B Vaccine Declination

I certify that I have been given instructions regarding the Minnesota West Canby Campus Dental Assistant Hepatitis B Vaccine Program.

I understand that by declining this vaccine I continue to be at risk of acquiring Hepatitis B, a serious disease.

If in the future I continue to have occupational exposure to potentially infectious materials, and I want to be vaccinated with the Hepatitis B vaccine, I can receive the vaccination from my physician.

Student's signature		Date	
ogram Director signature		Date	
	Phone		

Commission on Dental Accreditation Student Complaint Policy

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 as a court of appeal for treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

More information on the Commission's complaint policy can be found at: https://coda.ada.org/en/policies-and-guidelines/file-a-complaint

A copy of the appropriate accreditation standards may be obtained here: https://coda.ada.org/~/media/CODA/Files/dental assisting standards.pdf?la=en