



Metropolitan
Community College

Penn Valley

Health Science Institute

DENTAL ASSISTING PROGRAM

STUDENT HANDBOOK



Accredited by:

CODA*

Commission on Dental Accreditation

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WELCOME

Dear Students,

Welcome to MCC Penn Valley-Health Science Institute(MCCPV-HSI) and the Dental Assisting Program. We are pleased that you have chosen to pursue your dental assisting degree at MCCPV-HSI. We are so proud of the wonderful teaching facility we have at the Health Science Institute and are glad to have you here with us. We feel that you will find the program to be very meaningful, worthwhile, enjoyable and, at times, a challenging course of study. During the yearlong training program you will develop the knowledge and skills to assume a variety of dental assisting responsibilities.

The Handbook for Dental Assisting Students is designed to assist you. The rules, policies and procedures recorded in this handbook* will guide you through the next year of your educational career. It is important that you understand the material and guidelines in this handbook. Please read and familiarize yourself with them and refer to this material as often as necessary throughout the school year. You must also be familiar and follow policies, procedures and expectations in the College catalog and Student handbook, referenced throughout this document. Metropolitan Community College is committed to a policy of nondiscrimination on the basis of race, color, religion, sex, sexual orientation, age, birth, ancestry, national origin, or disability in admissions; educational programs, services, or activities; and employment; as specified by federal laws Title VI; Title VII; Title IX, section 504; the Americans with Disabilities Act; and state laws and regulations.

The Dental Assisting Program is accredited by the Commission on Dental Accreditation and graduates are eligible to take the Dental Assisting National Board Examination to become a Certified Dental Assistant (CDA). Graduates can become state certified in Missouri Expanded Functions and will gain clinical experience through 300+ hours at UMKC School of Dentistry and Private Practices. The MCCPV-HSI Dental Assisting Program is affiliated with the University of Missouri Kansas City, School of Dentistry, Kansas City, MO. A copy of the contract with UMKC SOD is on file in the coordinator's office.

Dental Assisting is an exciting career and one marked with many challenges. We will do our best to help prepare you to meet those challenges.

We wish you success in the pursuit of your educational goals.

Respectfully

Dr. Hema Udupa, DDS, MS, Dip. ABOMR

Program Coordinator

Hema.Udupa@mccck.edu

816-604-4237

Program Accreditation

The program in dental assisting is accredited by the Commission on Dental Accreditation and has been granted status of "*approval without reporting requirements.*"

The Commission is 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 is ada.org.

*The policies/rules contained within this handbook are not all inclusive, additional information will be relayed in class as necessary. Policies are subject to change with notice.

Program Faculty and Staff Directory

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MCC-Penn Valley & Health Science Institute Administrators

Dean of Instruction

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Phone: 816-604-5418

Dean of Health Sciences & Site Administrator

Dr. Renee R. Portmann
Email: Renee.Portmann@mcckc.edu
Phone: 816-604-4562

Executive Administrative Assistant

Allied Health Division
Health Science Institute, 410
Phone: 816-604-4232

FREQUENTLY CALLED NUMBERS

MCC-PV Campus Operator	(816) 604-1000
Administrative Assistant	(816) 604-4232
Program Fax	(816) 759-4646
Financial Aid	(816) 604-4067
Records Office	(816) 604-4100
Registrar, Carlton Fowler	(816) 604-4100
Bookstore	(816) 604-4188
Library	(816) 604-4080
Security	(816) 604-1200 Emergency (816) 604-1111 Non- Emergency
Allied Health Student Advisor	Brent Randle (816) 604-4067 Brent.Randle@mcckc.edu
Health Resource Center HSI room 206	Rebecca Boom, HRC Coordinator 816.604.4804 Rebecca.Boom@mcckc.edu Diana Moore, HRC Learning Coordinator 816.604.4295 Diana.Moore@mcckc.edu
Technical Support for Students https://mcckc.edu/tech-support/index.aspx	(816) 604-1000, option 3
Campus Computer Lab Access (Printing)	MCC-Penn Valley, HSI Room 204

Metropolitan Community Colleges

Mission, Vision, Wolves Creed, Purpose, Philosophy

Mission:

Preparing students, serving communities, creating opportunities for all.

In order to accomplish this mission, the board of trustees has empowered the chancellor, as executive officer, to implement its policies. The chancellor, with the other officers of the district, will provide leadership in the implementation of the mission and goals of the District.

Vision

MCC will be the Kansas City region's college of choice where all are encouraged to learn, discover and engage.

Values

During the development of MCC Reimagined and through extensive college and community outreach, MCC identified five value statements that represent the ideals the College will embody in its next chapter and beyond.

- **Excellence** - We deliver our very best as an employer, community partner, educator, and workforce training provider for all of Kansas City.
- **Learning** - We promote personal, professional, and lifelong learning opportunities that positively impact lives and shape the Kansas City workforce.
- **Equity** - Our institutional infrastructure fosters equity in employment and student learning and eliminates barriers to success for anyone.
- **People** - People serve as the cornerstone of what we do and why we do it. We invest in employee development, intentionally recruit and retain a workforce that represents the communities we serve and embrace individuals of all walks of life as valued members of the MCC Wolfpack.
- **Integrity** - We conduct ourselves transparently, ethically, and in ways that honor the trust placed in us by our students, employees, and communities we serve.

Wolves Creed

As engaged members of the MCC-Penn Valley community, we pledge to create a safe and supportive learning environment. We understand that we are more successful together than apart. As we **REACH** for success, we agree to uphold the following standards:

Respect: We respect each other, the college, our community, and ourselves. We hold ourselves to high moral and academic principles. We demonstrate this through our actions and words.

Excellence: We challenge ourselves to set high standards and embrace life-long learning.

Accountability: We accept responsibility for our individual actions and their impact on others. We take ownership for our learning and strive to resolve matters in a peaceful way.

Community: We are part of a large and diverse society. We are engaged in building a positive college culture of involvement, collaboration, and completion. We accept all members of the community.

Honor: We are honest and truthful. We give recognition to the original ideas of others and expect recognition for our individual thoughts and ideas.

We commit to live this creed as Penn Valley Wolves.

We are PV Proud

The following purpose statements declare how MCC will carry out the mission of the district:

Purpose

In pursuit of MCC's mission, the district will:

- Provide courses and associate degree programs that prepare students to transfer to four-year colleges and universities to complete bachelor's degrees.
- Provide courses, certificates and associate degree programs to prepare students to enter the work force in skilled jobs and careers.
- Provide courses, certificates and associate degree programs to assist adult workers to upgrade their job skills, change careers, or advance in their careers.
- Provide instruction in core academic skills that prepare students to succeed in college-level courses and programs.
- Provide student development and support services to assist students to achieve their academic, career and personal goals.
- Provide and support activities to enhance student learning outside the classroom.
- Provide a range of services and accommodations to help all prospective students overcome barriers to access college programs and opportunities.
- Provide courses and other educational and cultural activities to enrich the lives of members of the community.
- Provide business support services and other training and assistance to support the economic development of the community.
- Collaborate with other educational institutions, community-based organizations, agencies, businesses and industries to meet the needs of the community.

Philosophy

The Metropolitan Community College is dedicated to serving the educational needs of the community. The college programs are intended to help students understand themselves, the society of which they are a part and the universe in which they live.

At the same time, MCC provides opportunities for students to develop occupational skills. Faculty and administrators cooperate to create an environment that stimulates intellectual growth and nurtures academic freedom for students and instructors alike. The programs offered are intended to encourage lifelong learning. Finally, the MCC employees are committed to providing equal opportunity for all persons regardless of age, creed, race or gender.

MCC's 2022-2031 Strategic Plan <https://mcckc.edu/strategic-plan/>

MCC Accreditation Status

<https://www.hlcommission.org/component/directory/?Itemid=&Action=ShowBasic&instid=1435>

Mission Statement

The mission of the Dental Assisting Program is to promote total wellness by advancing oral health in the state of Missouri through quality education and service. This mission is consistent with the mission of Metropolitan Community College.

Philosophy

The Dental Assisting Program is founded on humanistic teaching, service, scholarly endeavors and patient care. The learning environment should stimulate the discovery of new knowledge, the development of original and innovative methodologies and the exploration of advanced techniques and service that contribute to the holistic health of the public as well as growth of the dental assisting profession. The faculty's primary responsibilities are to provide comprehensive approaches to student development that include and encourage critical, independent and professional thinking. Ultimately, the program is committed to providing education for a culturally diverse student population to optimize each individual's growth, achievement and maturation as a professional.

Program Goals

- The MCCPV-HSI Dental Assisting program will maintain a curriculum that prepares the students to carry out the role and function of a dental assistant.
- The MCCPV-HSI Dental Assisting program prepares the students to be able to apply the foundational knowledge of basic dentistry.
- The MCCPV-HSI Dental Assisting program will teach students regarding exhibiting professional code of ethics and values of the profession.
- The MCCPV-HSI Dental Assisting program will prepare the students to function as an integral member of the dental health care team.
- The MCCPV-HSI Dental Assisting program will graduate individuals who recognize and understand the importance of lifelong learning to promote personal and professional growth.

THE PROFESSION: DENTAL ASSISTING INFORMATION **FACTS ABOUT DENTAL ASSISTANTS**

Procedures a dental assistant may perform are regulated on a state by state basis and may not include duties assigned to dental hygienists. But the varied activities of an assistant in most states make for a challenging, interesting and responsible position whether chairside or in the business office.

In small practices, the assistant might work with the dentist as well as managing the business aspects of the practice such as scheduling, billing and purchasing. In larger practices, the duties may be more specialized. Many assistants are qualified to take X-rays . . . expose radiographs as it is properly called. In most dental offices, the dental assistant is in charge of infection control procedures, which are closely regulated by OSHA (the federal Occupational Safety and Health Administration). The complexity and importance of this task is a real challenge for any professional, requiring constant updates to remain current with registrations.

The Dental Assistant works on behalf of the patient as well as the dentist in helping to assure a high level of professional excellence in oral health care delivery. Helping this health care professional to do a better job is the goal of the American Dental Assistants Association (ADAA).

As oral health becomes an essential, recognized factor in America's public health agenda, the importance of dental healthcare team members grows. With this growth and recognition, the importance and role of the dental assistant has become more focused as job opportunities have increased.

ESSENTIAL DENTAL ASSISTING FUNCTIONS

To successfully complete the clinical component of the program, the student must be able to perform all of the essential functions of a dental assistant:

Protect the best interest of the patient, the profession and the public.

Communicate satisfactorily with patients, physicians, peers, family members and the health care team, regarding:

- Referrals
- Oral hygiene instructions
- Community activities

Possess the visual acuity to:

- Note slight changes in the patient's condition
- Correctly read handwritten orders, medication records and chart contents
- Accurately and safely instrument in the oral cavity
- Distinguish slight changes in contour of working ends of instruments

Hear adequately to:

- Note slight changes in the patient's condition
- Perceive and interpret various equipment signals

Use hands for fine manipulation

Demonstrate adequate eye/hand coordination for dexterity in manipulation of hand instruments and other equipment used in clinical practice

Manage the care of a patient in a sudden emergency, including one-man CPR when necessary

Exercise good judgement, using the **ADAA Code of Ethics** as a guide in decision-making.

IV. A. Principles of Professional Ethics

**AMERICAN DENTAL ASSISTANTS ASSOCIATION
PRINCIPLES OF PROFESSIONAL ETHICS (2011)**

FOREWORD: The Principles of Professional Ethics lists legal and ethical guidelines expected by patients, employers, employees and, in many areas, required by regulatory boards.

-
- Cause no harm;
 - Uphold all federal, state, and local laws and regulations;
 - Be truthful and honest in verbal, financial, and treatment endeavors;
 - Recognize and report signs of abuse to proper authorities;
 - Assist in informed decision-making of treatment options; while respecting the rights of patients to determine the final course of treatment to be rendered;
 - Do not discriminate against others;
 - Support, promote and participate in access to care efforts through education, professional activities and programs;
 - Deliver optimum care utilizing professional knowledge, judgment and skill within the law;
 - Be compassionate, respectful, kind and fair to employers, co-workers, and patients;
 - Refrain from denigrating by word, print, or in electronic communication his/her employer, workplace, or colleagues at all times;
 - Create and maintain a safe work environment;
 - Assist in conflict management when necessary to maintain harmony within the workplace;
 - Strive for self-improvement through continuing education;
 - Strive for a healthy lifestyle which may prevent physical or mental impairment caused by any type of illness;
 - Refrain from any substance abuse;
 - Never misrepresent professional credentials or education.

Adopted HOD 2011; reviewed 2013.

Curriculum Information

Dental Assisting Program Certificate – 44 Hours (Program Specific)

Dental Assisting Program Certificate – 11 Hours (Additional General Education Requirements)

A.A.S. Degree- 74-78 Hours

Program Course Requirement

DENA 100	Introduction to Dental Assisting	1
DENA 101	Body Structure & Function	1
DENA 102	Head & Neck Anatomy	2
DENA 103	Dental Anatomy	2
DENA 104	Dental Emergencies & Pharmacology	2
DENA 105	Dental Materials I	2.5
DENA 106	Preclinical Dental Assisting	2
DENA 108	Oral Microbiology & Infection Control	1.5
DENA 110	Chairside Assisting I	5
DENA 115	Dental Radiology I	4
DENA 125	Clinical Experience I	2
DENA 205	Dental Materials II	3
DENA 210	Chairside Assisting II	5
DENA 215	Dental Radiology II	2
DENA 225	Dental Office Management	2
DENA 230	Oral Pathology	1
DENA 250	Clinical Experience II	4
DENA 260	Dental Assisting Seminar	2

General Education Requirement

HLSC 100	Introduction to Health Professions	2
ENGL 101	Composition & Reading I	3
PSYC 140	General Psychology	3
COMM 100	Fundamentals of Speech	3
BIOL 109	Anatomy & Physiology	
(BIOL 110 & 210 may be substituted)		6-10
BIOL 208	Microbiology	5
CHEM 105	Introductory Chemistry	5
HIST 120	US History to 1865 or	3
HIST 121	US History since 1865 or	
POLS 135	Intro to Political Science or	
POLS 136	Intro to American National Politics or	
POLS 137	Intro to State & Local Politics	

*General education courses can be sequenced in any manner, however, HLSC 100, ENGL 101 should be completed prior to the start of the program and DENA 100 can be completed prior to the start of the program or currently enrolled.

CPR Certification -Must be completed by students through American Heart Association (AHA) and hands-on exam during the first week of the program.

Applicants with acceptable and current CPR (must include CPR, and a hands-on exam) from American Heart Association Health Care provider level CPR at intervals not to exceed two years will be waived from taking the HSI offered CPR. Applicants have to provide a copy of such certification to the Dental Assisting program coordinator on the first day of class. Certification must be maintained through graduation.

Certificate

<https://mcckc.elumenapp.com/catalog/2022-2023/program/dental-assisting-certificate-2022-summer>

A.A.S. Dental Assisting

<https://mcckc.elumenapp.com/catalog/2022-2023/program/dental-assisting-a-a-s-degree-2022-summer>

MCC-Penn Valley Dental Assisting Curriculum content includes didactic and laboratory/ preclinical objectives in the following dental assisting skills and functions. Prior to performing these skills/functions in a clinical setting, students must demonstrate knowledge of, and laboratory/preclinical competence in the program facility. The Dental Assisting Program complies with the curriculum content and skill assessments standards set by the Commission on Dental Accreditation (CODA).

Preclinical Instruction	MCC-Penn Valley Dental Assisting program courses were the skills are taught
Essential Dental Assisting Skills	
a. Manage infection and hazard control protocol consistent with published professional guidelines.	DENA 105 (Summer) DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 108 (Fall) DENA 110 (Fall) DENA 205 (Fall) DENA 115 (Fall) DENA 125 (Fall) DENA 210 (Spring) DENA 215 (Spring) DENA 250 (Spring)
b. Take/review and record medical and dental histories	DENA 104 (Summer) DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
c. Take and record vital signs	DENA 104 (Summer) DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
d. Assist with and/or perform soft tissue extra/intra oral examinations	DENA 103 (Summer) DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
e. Assist with and/or perform dental charting	DENA 103 (Summer) DENA 106 (Summer) Students must continue to demonstrate knowledge

	DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
f. Prepare tray set-ups for a variety of procedures and specialty areas.	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 210 (Spring) DENA 125 (Fall) DENA 250 (Spring)
g. Seat and dismiss patients	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
h. Operate oral evacuation devices and air/water syringe	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 210 (Spring) DENA 125 (Fall) DENA 250 (Spring)
i. Maintain clear field of vision including isolation techniques	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 210 (Spring) DENA 125 (Fall) DENA 250 (Spring)
j. Perform a variety of instrument transfers	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
k. Utilize appropriate chairside assistant ergonomics	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 210 (Spring) DENA 125 (Fall) DENA 250 (Spring)
l. Provide patient preventive education and oral hygiene instruction	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
m. Provide pre-and post-operative instructions prescribed by a dentist	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 210 (Spring) DENA 125 (Spring) DENA 250 (Spring)
n. Maintain accurate patient treatment records	DENA 105 (Summer) DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall)

	DENA 210 (Spring) DENA 225 (Spring)
o. Identify and respond to medical and dental emergencies	DENA 104 (Summer) DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)

Chairside Dental Assisting Functions	MCC-Penn Valley Dental Assisting program courses were the skills are taught
a. Assist with and/or apply topical anesthetic and desensitizing agents	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
b. Assist with and/or place and remove rubber dam	DENA 110 (Fall) Students must continue to demonstrate knowledge DENA 210 (Spring) DENA 250 (Spring)
c. Assist with and/or apply fluoride agents	DENA 110 (Fall) Students must continue to demonstrate knowledge DENA 250 (Spring)
d. Assist with and/or apply bases, liners, and bonding agents	DENA 105 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 250 (Spring)
e. Assist with and/or place, fabricate, and remove provisional restorations	DENA 205 (Fall) Students must continue to demonstrate knowledge DENA 210 (Spring) DENA 250 (Spring)
f. Assist with and/or place and remove matrix retainers, matrix bands, and wedges	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 210 (Spring) DENA 250 (Spring)
g. Assist with and/or remove excess cement or bonding agents	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 210 (Spring) DENA 125 (Fall) DENA 250 (Spring)
h. Assist with a direct permanent restoration	DENA 106 (Summer) Students must continue to demonstrate knowledge DENA 110 (Fall) DENA 125 (Fall) DENA 210 (Spring) DENA 250 (Spring)

i. Fabricate trays, e.g., bleaching, mouthguard, custom	DENA 205 (Fall) Students must continue to demonstrate knowledge DENA 250 (Spring)
j. Preliminary impressions	DENA 105 (Summer) Students must continue to demonstrate knowledge DENA 205 (Fall) DENA 125(Fall) DENA 250 (Spring)
k. Clean removable dental appliances	DENA 205 (Fall) Students must continue to demonstrate knowledge DENA 250 (Spring)

MCC-Penn Valley Dental Assisting students must demonstrate competence in the knowledge at the familiarity level in dental practice management:

a. Computer and dental software	DENA 225 (Spring)
b. Business ethics and jurisprudence	DENA 250 (Spring)
c. Business oral and written communications	DENA 110 (Fall) DENA 205 (Fall) Students must continue to demonstrate competence DENA 225 (Spring) DENA 250 (Spring)
d. Inventory systems and supply ordering	DENA 106 (Summer)
e. Maintenance and retention of business records	DENA 110 (Fall) Students must continue to demonstrate competence DENA 225 (Spring)
f. Management of patient information	DENA 110(Fall) Students must continue to demonstrate competence DENA 225 (Spring)
g. Recall systems	DENA 225 (Spring)

Dental Assisting Program Course Descriptions

<https://mcckc.edu/programs/dental-assisting/course-descriptions.aspx>

Dental Assisting Program Projected Costs and Program Outcomes

<https://mcckc.edu/programs/dental-assisting/cost-outcomes.aspx>

[Refer to this link to find out about MCC's payment plan.](#)

An affiliation agreement exists between MCC and Johnson County Community College (JCCC). Students must register at both institutions, but only pay the appropriate Kansas in-state fees with JCCC.

Financial Aid: Questions concerning scholarships, or any other form of financial aid should be directed to the Financial Aid Office, MCC – Penn Valley (816) 604-4066.

MCC-PV provides a range of services to allow persons with disabilities to participate in educational programs and activities. If you desire support services for the application process or course work, contact the Access Counselor at (816) 604-4152.

This college does not discriminate on the basis of race, color, national origin, sex, age or handicap in admission or access to, or treatment of employment in its programs and activities. If you have any questions regarding compliance with Title VI, Title IX or Section 504, contact the Dean of Students, MCC-Penn Valley, 3201 Southwest Trafficway, Kansas City, MO 64111 or call (816) 604-4114.

POLICIES AND PROCEDURES

STUDENT CONDUCT

1. Students are to be in the classroom promptly at the times designated by the instructor.
2. Breaks are scheduled according to the instructor.
3. Students are not permitted to leave the school or clinical without informing the coordinator or instructor.
4. Students shall adhere to the smoking policies of the school and/or clinic facilities.
5. Gum chewing is not acceptable in the clinical area.
6. No personal phone calls during classroom and/or clinical time except for emergency. If any student needs to make a phone call, it will have to be made during break or lunch time, not during classroom or clinical time. No cell phones are permitted in the clinical area. Cell phones should be turned off in the classroom.
7. On occasion, a student may be required to stay after assigned hours for conference, review or make-up work.
8. Care of the classroom and laboratory areas: Students are responsible for keeping these areas neat and clean. No one will be allowed to leave the clinical areas until all supplies are clean and put away in the storage areas.
9. Inappropriate conduct, consist of sleeping during lecture or another designated classroom or other disruptive or disrespectful behavior. Sleeping during lecture or another designated classroom or lab activity may be counted as absent time.
10. Academic dishonesty (cheating) shall be subject to a zero grade and possible dismissal from the program.
11. Use or suspected use, of intoxicants or unlawful possession of any illegal or controlled substance in the clinical or classroom setting shall subject the student to immediate dismissal from the program.
12. Students are expected to conduct themselves in a responsible, safe and professional manner at all times. With respect to the school grounds, classroom and/or clinical facility.
13. No eating is allowed in classrooms or hallways. Eating is only allowed in the atrium and the Code Blue Cafe in the Health Science Institute. Drinks must be in an ecofriendly container with lid.

MCC Code of Conduct <https://mcckc.edu/student-handbook/conduct.aspx>

DRESS CODE & APPEARANCE

Personal appearance is a prerequisite for each clinic session and is a part of the professionalism component of clinical practice. Instructors have the privilege of dismissing a student from clinic, lab or class if guidelines for appearance have not been met.

UNIFORM: *Students shall wear the MCC photo ID badge at HSI.* The badge is to be worn on the left front of the uniform. Lost name badges must be replaced immediately. *Students shall wear the UMKC photo ID badge while at UMKC School of Dentistry.*

During all clinical hours, labs and class the MCC-PV Dental Assisting uniform is required.

- Clean, unwrinkled, matching blue color scrubs.
- PPE, such as lab coat or barrier gowns are to be worn in clinical settings.
- Shoes must be professional in appearance. Athletic-style footwear may be worn with scrubs. Shoes should be white, black or gray. No bright colors. Sandals and other open-toed footwear are not acceptable.
- White socks that are crew length or longer to prevent skin from being exposed.
- No undergarments should be visible.
- Clothing should cover all tattoos.

MAKE-UP and PERFUME:

Make-up should be moderate and natural looking. No perfume or cologne is to be worn in clinic as many patients/individuals are sensitive to them.

HAIR:

Hair must be clean, neatly groomed. Hair must be pulled back away from the face and up off the collar. Ornaments used to support hair should be neutral or hair-colored and be capable of being disinfected. Hair color should be natural colors only. Hair should be clean and freshly shampooed following clinical sessions to remove aerosol contamination. Male students, beards and mustaches are discouraged.

JEWELRY:

Earrings are to be studs only, no dangling, no hoops. No bangles or bracelets. Wedding bands are acceptable. One simple silver or gold chain, no longer than 18 inch necklace is acceptable. A plain, water resistant watch can be worn. No visible facial piercing jewelry is allowed.

HYGIENE:

Oral and personal hygiene must be maintained on a daily basis (e.g. bathing, use of deodorant, mouth care). It is highly recommended that you do not smoke during school or clinical times.

HANDS/NAILS:

Hands should be clean and smooth. Nails must be natural, lean, neatly trimmed and free of hangnails and cuticles intact. The length of nails is not to extend over fingertips when viewing with palm toward self. No artificial nails or dark polish.

SAFETY GLASSES:

Safety glasses must be worn by the operator and assistant when working on a patient during any procedure. Glasses must also be worn during all lab and clinical sessions.

PROFESSIONALISM

Faculty of MCCPV-HSI Programs have an academic, legal, and ethical responsibility to protect members of the public and the health care community from unsafe or unprofessional practices. Actions of an Allied Health student directly affect the lives of others. For this reason, the highest standards in honesty and integrity are mandatory. Dishonesty and unethical behavior in any form will result in corrective actions or disciplinary measures and may result in dismissal from the program.

The Dental assisting students, while representing Metropolitan Community College at any clinical site, must conduct themselves in an ethical, professional, and safe manner and shall abide by the professional conduct standards of the profession. Students are expected to assume responsibility for their actions and will be held accountable for them. Students will abide by MCC, DA program and clinical site policies during each clinical experience. Off-campus conduct, including postings on social media, are subject to review by the program and/or College and may result in corrective actions or disciplinary measures if the postings or conduct violate the policies and professional standards outlined in the handbook.

The Dental Assisting student will be required to self-evaluate their professional behavior at the midterm evaluation and will receive feedback from DA faculty and Program Coordinator. Self-evaluation will include qualities such as tact, communication, responsibility for behavior, learning, dress, etc. (See *DA program Clinical Manual for Clinical practice -Self-assessment form*) Student must demonstrate a professional conduct in the lab setting and are assessed during the labs very similar to the assessment of professional conduct in the clinical setting.

BEHAVIOR / LANGUAGE

Dental Assisting students represent the Dental Department and MCC-PV/HSI, in general. At all times, a professional attitude should be reflected in speech and in dress attire. Students are expected to dress and behave with respect for themselves and with the highest respect and regard for others on campus and at clinical sites. Students who are reported to have embarrassed classmates, faculty and/or staff in regard to their wardrobe/behavior/language on campus or on rotation sites/community assignments will be referred for a conference with the Program Coordinator. Serious and/or repetitive infraction could result in probation or dismissal from the Dental Assisting program.

MISCELLANEOUS:

- Gum is not to be chewed in any clinic or other patient treatment area.
- When in the clinic, a student should store her/his books and personal belonging in an assigned locker.
- No food or drink is allowed in the dental assisting clinic area.
- Students may not enter the clinic when patients are present unless in clinical uniform (buttoned lab coat, long pants, clinic shoes and with hair pulled back off the collar and anchored). No interruptions of clinic sessions will be allowed. Professionalism points will be deducted for infractions of this rule.

Non-compliance or failure to adhere to program-specific policies related to professional behavior or safe clinical practice may result in the use of corrective actions or disciplinary measures as outlined in this Handbook.

PROFESSIONAL STANDARDS, ETHICS, PRIVACY AND CONFIDENTIALITY

All Dental assisting students are expected to abide by the **ADAA Code of Ethics** as a guide in decision-making. <https://www.adaausa.org/aws/ADAA/pt/sp/about>

All dental assisting students are expected to maintain the highest standards of moral and ethical behavior and to conduct themselves in a professional manner at all times. This applies to the clinic, laboratory, classroom, and any other facility relating to or representing the MCC –Penn Valley Dental Assisting Program.

The moral and ethical obligations are characterized by, but not limited to, honesty, fairness, and integrity in all circumstances. Students are expected to show respect for the rights, differences, and property of others. A high degree of ethical and professional behavior is to be practiced in the classroom as well as in treating patients.

Standards of care are to include concern for the welfare of patients, competence in the delivery of dental care, conscientious patient communication including education, proper referrals when indicated, and the preservation of confidentiality in all situations, including but not limited to conversations with peers or instructors, phone calls, voicemails, e-mail, social media, and electronic patient records.

Each student is responsible for upholding the ethical standards of ADAA. Therefore, it is also the responsibility of each student to confront or report any behavior that does not comply with these standards. Violations of the Code of Ethics should first be reported to and addressed by the student body through the appropriate mediation channels. If efforts for cessation and reparation are unsuccessful, violations will be reported to the administration.

Behavior believed to be unacceptable includes, but is not limited to, forgery, intentionally deceptive alteration of documents, and unauthorized possession of another's property, plagiarism, and cheating by either seeking, giving, or receiving aid. Students should consider using respectful language when communicating with others. All students should refrain from abusive acts, sexual harassment, discriminatory behavior or the infliction or threat of harm to others.

1. Locker rooms are available to students at HSI and UMKC School of dentistry. Students may be in a locker with another student.
2. Students will adhere to patient care competencies.
3. The student will respect patient privacy and confidentiality.
4. Students are not allowed to take videotapes, slides or photos of patients at the UMKC School of Dentistry or private practice clinics.
5. Students are not to write patient names, social security numbers or any other identifying data on paperwork used for class work.
6. Student records, including transcripts from previous high school and colleges are kept in a locked cabinet in the coordinator's office.
7. Confidential student counseling sessions will be held in a private room.
8. Students will receive an ID badge at the UMKC School of Dentistry.

SOCIAL MEDIA/ELECTRONIC DEVICE POLICY

Social media platforms are technology tools and online spaces for integrating and sharing user-generated content to engage constituencies in conversations and allow them to participate in content and community creation.

Examples include but are not limited to:

- Blogs: WordPress, Blogger
- Social Networking Sites: Facebook, Twitter, LinkedIn
- Collaborative Projects: Wikis
- Content Communities: YouTube, Flickr, Instagram, Snapchat

It is suggested that students of each year's class develop their own social networking page to communicate about course assignments, brainstorming sessions, education resources, etc. However with social networking sites (as mentioned above), students are prohibited from posting about associated program clinical sites and supervisors; protected patient and family information; and the MCC – Penn Valley Dental Assisting program without the approval of the Program Coordinator.

All students must comply with HIPAA policies.

Absolutely no photos can be posted in regard to patients or patient care. Should the clinical site's social media policy be more stringent, the student is required to comply with the clinical site's policy. Failure to comply with this social media policy(See *Appendix-social media Policy*) will result in failure of the Clinical Practice course and dismissal from the Dental Assisting program.

PORTABLE ELECTRONIC DEVICES

Any non-stationary electronic apparatus with a singular or multiple capabilities of recording, storing, processing, and/or transmitting data, video/photo images, and/or voice emanations. This definition generally includes, but is not limited to, laptops, PDAs, pocket PCs, palmtops, Media Players (MP3s), memory sticks (thumb drives), cellular telephones, smartphones, PEDs with cellular phone capability, and pagers.

Use of laptops and any other electronic device in classroom will be at the instructor's discretion. It is distracting to other students if you are doing non-course related activities either on or off the computer and you may be counted absent that day. The use of cellular telephones, pagers, or any audible signaling devices in classrooms and areas designated for studying, such as the library, learning center, testing center or laboratories, is strictly prohibited. Students using such devices may be subject to disciplinary action. You may be asked to leave class if you are being a disruption. If there is an urgent need for you to monitor your phone you must discuss this with the instructor prior to the beginning of class.

Information Technology Acceptable use policy

https://mcckc.edu/legal/docs/administration/2.25050_BP_Information_Technology_Acceptable_Use.pdf

POLICIES ON SAFETY, SECURITY & DATA PRIVACY**Safety & Security:**

1. It is the responsibility of the student to reveal any conditions which might be contraindicated or require special precautions to the course instructor. Information given in confidence will be kept confidential. The student shall not participate in any procedure that would be considered contraindicated for their particular condition.
2. Students will practice procedures with safety being of greatest concern.
3. Do not give your full name or identifiable information to patients in clinic or private practice areas.
4. Students will utilize equipment in a manner in which it was intended and will report any malfunctioning equipment to the instructor immediately so that it can be removed from student access.
5. Students should be familiar with the college's safety procedures as outlined in the college's student handbook and follow the evacuation plan as posted in each classroom.
6. Students should be familiar with the location of security services on the first floor of the Health Science Institute.
7. In case of medical emergency, individuals should dial 911. Cost for emergency services will be borne by the individual undergoing medical care.
8. In case of medical emergency on clinical rotation (UMKC School of dentistry or private practice), students will follow the facility protocols as instructed by the clinical instructor. Cost for emergency services will be borne by the individual undergoing medical care.

Data Privacy:

In keeping with MCC's FERPA Policy, the DA Program will maintain privacy/confidentiality in the following manner:

1. Canvas is currently in use for all courses. This enables an instructor to post handouts, websites, practice quizzes and current grades for students to access with proper ID and password. Canvas can be accessed by logging into [myMCCKC](#) account.
2. Feedback is provided after skill checks and practical exams with only the student and instructor(s) present. When necessary or helpful, instructors will obtain permission if they would like to provide feedback in front of other students.
3. Clinical faculty must follow the data privacy policies of MCC.
4. Any FERPA related information gathered about the student for examination will not be shared with anyone outside the college.
5. Requests for student information from any government agency will be referred to the Registrar's Office.
6. Students will sign a confidentiality agreement, which applies to maintaining the privacy and confidentiality of patients during all clinical experiences.
7. Prior to the start of clinical rotation of the DA program, students are to complete HIPPA (Health Insurance Portability and Accountability Act) policies and procedures training for proper use and handling of confidential patient/client information.
8. DA students are expected to read and sign various consent forms at the start of the program that will remain in effect during the student's tenure in the DA program. Consent forms will be kept in the student's file in the DA Program Coordinator's office.

Privacy policy <https://mcckc.edu/student-handbook/privacy-ferpa.aspx>

Student E-mail Policy <https://mcckc.edu/student-handbook/rights-responsibilities.aspx>

MCC Security Advice <https://mcckc.edu/tech-support/techlinesecurity.aspx>

POLICIES ON NON DISCRIMINATION and SEXUAL HARRASSMENT

STATEMENT OF NON-DISCRIMINATION

Metropolitan Community College is committed to a policy of non-discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity, age, birth, ancestry, national origin or disability in admissions, educational programs, services or activities and employment, as specified by federal laws Title VI; Title VII; Title IX, section 504; the Americans with Disabilities Act; and state laws and regulations.

Inquiries concerning compliance may be addressed to MCC's Title IX Coordinators:

MCC District Director of Employee Relations and Training, 3217 Broadway, Kansas City, MO 64111-2429; Telephone: 816.604.1023	MCC-Longview Dean of Student Development, 500 SW Longview Road, Lee's Summit, MO 64081-2015; Telephone: 816.604.2326
MCC-Blue River Dean of Student Development, 20301 E. 78 Highway, Independence, MO 64057-2053; Telephone: 816.604.6620	MCC-Maple Woods Dean of Student Development, 2601 NE Barry Road, Kansas City, MO 64156-1299; Telephone: 816.604.3175
For confidential reporting contact: Director of Student Disability Services 3200 Broadway Kansas City, MO 64111-2429 Telephone: 816.604.1418	MCC-Penn Valley Dean of Student Development, 3201 Southwest Trafficway, Kansas City, MO 64111-2764; Telephone: 816.604.4114
	Inquiries may also be addressed to: Office for Civil Rights-Kansas City Office U.S. Department of Education One Petticoat Lane 1010 Walnut Street, 3rd floor, Suite 320 Kansas City, MO 64106 Telephone: 816-268-0550

MCC Policies

Non-Discrimination 7.30020 BP
Student Discrimination and Harassment 7.30030 BP
Student Discrimination and Harassment 7.30030 DP

Sexual Harassment:

The instructor will not tolerate any behavior, whether verbal or physical, which constitutes sexual harassment. Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct or communication of a sexual nature are prohibited. To file a complaint, contact the Dean of Student Services office.

OTHER POLICIES

POLICIES ON ACCOMODATIONS DUE TO DISABILITY:

If you are a student with a disability and if you will be requesting accommodations, it is your responsibility to contact the instructor. The Penn Valley Access Office in HU 001 or 816-604-4089 (816-604-4177 V-TTY) will recommend any appropriate accommodations to your instructor and his/her director. The instructor and director will identify for you which accommodations will be arranged. All information is strictly confidential.

Tobacco Free Campus Statement

Students enrolled in MCC-PV Allied Health and Nursing programs will be attending classes at the Health Science Institute at 3444 Broadway. This facility and adjacent grounds will be designated as a “tobacco-free campus” and students, employees and visitors will be expected to adhere to this policy. Those students who violate this policy will be subject to the “Code of Student Conduct” as outlined in the Metropolitan Community College Student Handbook and Catalog.
Missouri Tobacco Quit Line: 800-784-8669

POLICY ON FIELD TRIPS

Field trips to area clinical/lab facilities will be scheduled in order to expose students to content otherwise not available. Students will be expected to arrange for their own transportation to the facility. Any injury occurring during transportation or at the site will be the sole responsibility of the student. Students will be asked to sign a waiver prior to participation in field trips. In addition, students will be required to have knowledge of safety procedures for the facility. (See *Appendix - field trip form*).

POLICY ABOUT Children on Campus

MCC provides environments that promote learning for students who are enrolled. Classroom, studio, library, and laboratory environments are not appropriate places for children. The campuses are also places of easy access to the public and do not have resources to protect unsupervised children, which could place your child at risk. Therefore, students are prohibited from leaving a child unattended at any college facility. Unattended children will be reported to the Public Safety Office and the parent/guardian responsible could face disciplinary action.

RELATED COLLEGE POLICIES AND PRACTICES

Please visit <https://mcckc.edu/student-handbook/>

ATTENDANCE POLICY

The program faculty believes that prompt attendance at class and clinical is mandatory. Acquiring notes from classmates, in most instances, does not adequately replicate the information as provided by the instructor. Promptness and attendance at clinical is imperative to assure continuity of patient care.

In the discussion of EXCUSED ABSENCES below, the following definitions will be used:

- “A student’s serious illness” shall mean a condition such as pneumonia, surgery, hospital confinement or valid medical reason. A physician’s note verifying illness shall be presented by the student to the instructor. This does not include minor illnesses of family members.
- “Death in the immediate family” shall be interpreted to mean mother, father, mother-in-law, father-in-law, spouse, child, brother, sister, grandparents or significant other. Documentation must be provided.
- “Statutory governmental responsibilities” refer to such matters as jury duty or subpoena for court appearance. Documentation must be provided.

Attendance:

If you miss a class for any reason, it is your responsibility to contact a class member for lecture notes, handouts, and announcements and be prepared for the next class. **REMEMBER MISSING CLASS CAN AFFECT YOUR LOANS.** Anyone missing more than 20% of the classes before the official withdrawal date can be dropped from the class. Anyone that stops attending without dropping after the official withdrawal date will be given a grade. Keep in mind our first few months of classes are condensed and accelerated, every day you miss is critical to your passing a test and getting the information you need to be successful in your chosen profession. It may not be possible to make the missed time up. Special consideration may be given when weather conditions may not allow safe travel.

Attendance in Lecture:

Call the instructor PRIOR to the beginning of class to report absences. If the call is not received prior to the start of class, the absence will be considered unexcused. Each student will be allowed one (1) unexcused absence. The second unexcused absence will result in 10 points deduction from the class in which the absence occurred (this includes lecture, lab and dates when examinations are given). Subsequent unexcused absences will result in a 20 point deduction. If it is necessary to be absent on a day an exam is given, the instructor must be notified in advance. Two (2) points will be deducted per day for each day which passes from the day the test was administered to the date the test was taken (points deducted from the test score).

Attendance in Lab:

Each student will be allowed one (1) unexcused absence in lab. The second unexcused absence will result in a 10 point deduction from the class that the absence occurred, (this includes lab lecture, labs and dates when practicals are being given). Subsequent unexcused absences will result in a 20 point deduction. If you are unable to attend on a day you are scheduled for a practical, you must call the instructor to make arrangements for a re-take within one (1) day. For each day which passes from which such arrangements are not made two (2) points will be deducted from the specific DENA course.

Attendance at Clinical:

Clinical absences must be made up promptly. One (1) hour is made up for each hour missed. The date and time of a clinical make-up will be determined by the clinical instructor at the facility and may require a

Saturday or evening. If you are going to be absent from a clinical (part of full day), you must notify the clinical instructor and/or office and coordinator (816-604-4237) prior to the clinical. If you are going to be tardy, you must also notify the clinical instructor and/or office and coordinator. Failure to call the facility in a reasonable time frame will be reflected in the student's clinical grade. Failure to notify the above will result in a 25-point deduction in the specific DENA course.

Extended Absence Due to Illness OR other circumstances:

In the event of extended medical illness, it may be necessary for the student to take care of themselves first and foremost. If the coursework can be made up prior to the next academic semester (absence of 2 weeks), the faculty will attempt to work with the student to make up the material. If the absence is longer, it may not be possible for coursework to be made up during that semester.

However, if the student cannot continue in the program or graduate until the incomplete coursework is satisfactorily completed, the student will be asked to re-enter the program again the next year, beginning as a new student. For safety reasons, the student will be asked to complete all DENA coursework, even that which has been successfully completed. In the event of extended illness during clinicals, the student may have one (1) additional clinical arranged. All clinical work must be completed by the next academic semester. If this is not possible, for safety reasons the student will be asked to re-enter the program as a new student, completing all coursework again. Students absent due to extended medical illness require documentation of leave by their primary physician and will be asked to have a release form signed by their physician in order to return to school or clinicals. Keep in mind that approximately the first six (6) weeks of classes are condensed and accelerated, and it would be impossible to make up the lecture and test time.

Other circumstances: Withdrawal from the program (due to failing DENA course or due to health related reasons), Unable to attend due to pregnancy, unavailability of childcare.

Recording of Attendance:

The clinical coordinator will check all documentation, time sheets, etc. periodically.

- Lecture: Attendance will be taken by the instructor or a sign in sheet. Make sure you sign in or you are counted absent.
- Laboratory: Attendance will be taken by the instructor or a sign in sheet. Make sure you sign in or you are counted absent.
- Clinical Rotations: You will have time sheets that should be signed by the clinical supervisory, dentist or a member of the dental staff.

Tardy Policy: Any student who enters the classroom after the designated start time is considered tardy. The door to the classroom is opened each morning by the public safety. Students are expected to enter the classroom upon arrival and await the coming of their instructor. Lab doors are not unlocked by facilities; for lab classes, students are to gather immediately outside of the lab room to await the arrival of their instructor. Students in the dental assisting program are expected to be on time for class, lab and clinical rotations and is a symbol of respect for your instructors and fellow students.

DENTAL ASSISTING CLINICAL INCLEMENT WEATHER POLICY:

Students may be expected to participate in clinical education during times when the MCCPV campus is closed due to inclement weather or special events. Examples include; Faculty Convocation, spring break and snow days.

ACADEMIC STANDARD

All Dental Assisting (DENA) courses must be completed in proper sequence with a grade of "C" or higher in each course. There is not a mechanism for students to be part time.

All general education courses must be completed before graduation.

A student that has been admitted into the DA Program that earns a grade of "D" or below (less than 70%) or a "D" in any required degree course outside of the DA program will not be able to continue in the program and must either apply for remediation or re-apply for admittance and begin the program from the beginning. (See below for Remediation guidelines.)

Grading/Method of Evaluation

1. The instructor reserves the right to exercise professional judgment as to whether a student passes a course satisfactorily.
2. The number of examinations quizzes and laboratory checkouts/practicals vary within each class. The requirement will be outlined during the orientation for each individual class on the very first day.
3. For DENA courses with both laboratory and lecture portions, lecture and lab grades will be calculated separately.
4. For all process evaluations/competencies/skills assessment in the lab/practicum portion of a course, the student must earn a minimum of 70 % in the summer semester, 75 % in the fall semester and an 80% in the spring semester.

If the overall grade for a course is less than 70%, the final grade will be "D" or "F" depending on points earned.

SYLLABUS: A syllabus is given at the beginning of each new course within the program. Within it will include a course description, expected student outcomes, objectives of the course, course schedule, methods of evaluation, grading rubrics and course content. Due dates of assignments will be included in the schedule.

Assignments:

Every time an assignment is given, a due date will also be given. Assignments are to be turned in at the beginning of the period on the day that they are due on that date! ***It is your responsibility to turn assignments in on time.*** For every class period that an assignment is late, the grade will be dropped one letter grade.

Assignments must be completed in black ink, pencil or typed. In no case (other than paper charting), will assignments be accepted in any other color of ink. Any assignment that is deemed not readable by an instructor must be typed. Assignments with multiple pages **MUST** be stapled together before handing in, or it will not be accepted.

Tests:

Test must be taken the day they are given. If you are ill, you may be requested to have a doctor's note to take the test on another day. Any exceptions are at the direction of the instructor.

90 – 100%	=	A
80 – 89%	=	B
70 – 79%	=	C
60 – 69%	=	D
68 or Below	=	F

Methods of Communication of Student Progress

Students are encouraged to meet with instructors during office hours regarding anything which impacts their academic progress

- Faculty routinely use Starfish solutions platform to communicate directly with students regarding their academic progress in each of their courses.
- Faculty routinely utilize email for communication
- Scores for examinations and quizzes are posted to canvas for access by individuals only. Students should go to mcekc.instructure.com.
- Each course will schedule written examinations. After exams the instructor will be available for review and to answer questions.
- Each student will complete 30-40 individual competency checks throughout the program. The student will be given feedback on their performance on the competency check or practical. Students earning lower than the required percentage on a competency will be asked to repeat the practical until deemed competent. The student should keep a record of the date each individual competency exam was completed to be filed in their student competency tracker/documentation record.
- Each student will complete a written examination on HIPAA and OSHA following an online review course prior to the start of their fall clinical @ UMKC School of Dentistry/Private practice sites.
- If problems due to student behavior should arise, the faculty will meet with the student individually, discussing the problem at hand. The conference may be documented in the Student Conference form /Student Situation form and placed in the student's file. Specific plans for improvement will be included in the discussion. Further discussion may involve the DA Program coordinator, Dean of the Health Science Institute and may result in dismissal from the program if appropriate.

Student conferences @midterm per semester –

Purpose of student conference - To assist the student in achieving success and discuss their progress in the Dental Assisting Program. The program coordinator will hold individual student conferences approximately at the midterm of each semester. Documentation will be made regarding the conference and placed in the student's file. Student conferences may also be scheduled with the course instructor. These conferences will be scheduled by appointment. In addition students are encouraged to seek advisement and assistance when the need arises.

- Student-clinical instructor communication is on-going during clinical rotations. Formal evaluation of the student on a written evaluation form will take place at mid-term and at the end of the clinical. In the event of student-clinical instructor conflict, the student should first attempt to talk with the clinical instructor about the problem. If this step is unproductive, the student should contact the Program Coordinator.
- If the student's clinical instructor believes the student is performing below the expected level of performance, the clinical coordinator should first talk with the student individually. If this communication is unproductive, the clinical coordinator should contact the program coordinator. They will then work with the student to establish goals for the remainder of the clinical rotation.
- If the student fails a clinical rotation secondary to performance problems, the student will be asked to repeat the clinical at a different facility at a time and place determined by the clinical coordinator and program coordinator. A conference will be held with the student to outline goals for the clinical. If the student fails an additional clinical, they will be dismissed from the program.

REMEDATION -REMEDATION COMPONENTS

A remediation/teaching contract (See Appendix-Student Performance Improvement Plan) is created with the student that includes:

1. A description of the deficiency
2. A description of the remediation
3. A calendar of the remediation/teaching sessions
4. A scheduled re-evaluation method

The course instructor will determine how many remediation/teaching sessions will be necessary and formulate either a written and/or oral re-evaluation session that will determine content mastery.

- A student enrolled in the DA program that earns a grade of “D” or below in any DA course, will not be allowed to continue in the program as previously scheduled.
- A student that earns a grade below a “C” in a DA course would need to re-apply to the program, start over in a new cohort as a new student, and undergo the admission process. If accepted into the program, the student would be considered a new student at that point, and would be required to take all coursework, including that which had previously been successfully completed.
- If there are more students applying for space than there is available space the decision will be based on: changes made by the student to improve their chances of passing a course; GPA. In the case of limited space a student may not be offered a position or may be offered an opportunity to restart the program the following year.
- A student may not apply for admission to the program a third time if dismissed due to grades.
- A student must earn a minimum of 70% in summer labs, 75% in the fall lab portion and 80% in the spring lab courses to earn an acceptable grade for the course. In addition, the final grade will be determined through calculation of points reflecting both lecture and lab.
- Any student earning a grade of 70% or below on any written examination will be required to repeat that examination in order to verify minimum knowledge level within one week of the posted test score. If the student does not complete this repeat examination within one week, the instructor reserves the right to counsel the student and require remediation in another manner.
- Any student earning lower than a 70% (in summer), 75% (in fall), 80% (in spring) on any practical examination or competency check or failing to complete the practical/competency check without completing critical safety errors will be required to complete the practical/competency check again until competent. If the student fails the practical/competency check the second time, an additional 25% will be deducted from the original score. Failure to complete the practical examination on the third attempt, will result in a grade of 0 being recorded for the practical/competency check. The student must continue to remediate the content area and demonstrate competency, or the student will be given an incomplete for the course and not be allowed to continue in the program until complete.
- A student earning a grade of "D" or below in any clinical setting will be required to repeat that section at a time and clinical site determined by the Clinical Coordinator of the program. A student who earns a second grade of "D" or "F" for a clinical rotation will be dismissed from the program.
- Students will follow the guidelines of professional and ethical conduct as outlined by the American Dental Assistants Association. A student may be dismissed from the program for violation of these guidelines. (See Professional standards, Ethics)
- All students will self-evaluate on performance and professional qualities and be given feedback by program faculty. (Student Midterm Evaluation).

RETENTION

Retention Goals and Policies

1. The goal class size is approximately 18 students for the summer admission of diverse backgrounds.
2. Policies associated with student application and acceptance is effective in admitting those that have the best chance of success based on historical evidence.
3. Program policies are effective in minimizing attrition and supporting student success. These policies include:
 - A. Clearly delineating program expectations through printed materials, the application process and at orientation through use of the student handbook.
 - B. A mechanism for tracking “at-risk” students with supportive interventions

Inclusion criteria for designation of “at-risk” status

- Students admitted to the program with a GPA equal to or lower than 2.5
- Students admitted to the program with history of repeated coursework in one or more program prerequisites due to grades
- Students who earn two or more grades of 70% or lower on written examinations in any semester
- Students who are required to retake two or more practicals in any semester
- Students with GPA that drops below 2.0
- Students, who faculty has identified as potential “at-risk” students due to, but not limited to generic abilities, writing skills, unprofessional behaviors, test taking anxiety, etc.

Process of supportive intervention:

1. Students identified as at-risk students upon acceptance will be admitted but required to complete the processes identified below as a condition of acceptance.
2. Student will be asked to meet with faculty. A plan (See *Appendix-Student Performance Improvement Plan*) will be discussed and put into writing by the student and signed by the faculty.

The plan may include:

- a. Mandatory meeting with the course instructor in which they earned the exam grade of 70% or lower and/or failed practical
 - b. Formulating a written plan of action that specifies how the student will achieve minimum competency
 - c. Student utilization of college resources such as the Early Alert program, Counseling Center or Access Office.
 - d. Daily journal of study habits
3. Student will meet with a designated course instructor monthly.
 4. The student’s at-risk status will be re-evaluated at the end of the semester to determine the need for continued intervention.

C. Clearly communicating to students how to achieve competency:

1. Written objectives in courses
2. Grading rubrics for competency checks and practical examinations with critical errors identified.
3. Processes for remediation of material:
 - a. Students earning lower than 70% on any examination must repeat the examination until 70% minimum achieved in summer.
 - b. Students earning lower than 70% in summer, lower than 75% in the fall and lower than 80 % in the spring on a practical/competency and/or with critical errors must repeat the practical/competency until competent.
 - c. If the student fails the practical/competency check the second time, an additional 25% will be deducted from the original score. Failure to complete the practical examination on the third attempt, will result in a grade of 0 being recorded for the practical/competency check. The student must continue to remediate the content area and demonstrate competency, or the student will be given an incomplete for the course and not be allowed to continue in the program until complete.
4. Clearly delineated performance expectations for the course
 - a. 70% grade in the lecture portions for the course for the student to continue in the program.
 - b. Attendance expectations
 - c. A student earning a grade of "D" or below in any clinical setting will be required to repeat that section at a time and clinical site determined by the Clinical Coordinator of the program. A student who earns a second grade of "D" or "F" for a clinical rotation will be dismissed from the program.
 - d. Students will follow the guidelines of professional and ethical conduct as outlined by the American Dental Assistants Association. A student may be dismissed from the program for violation of these guidelines.
 - e. All students will self-evaluate on performance and professional qualities and be given feedback by program faculty. (Student Midterm Evaluation).
5. A policy for remediation of clinical experiences - If the student fails a clinical rotation secondary to performance problems, the student will be asked to repeat the clinical at a different facility at a time and place determined by the clinical coordinator and program coordinator. A conference will be held with the student to outline goals for the clinical. If the student fails an additional clinical, they will be dismissed from the program.
6. A policy for student right to appeal through the policy of student grievance and due process. (See Student Grievance and due process)

ACADEMIC/CLINICAL DISHONESTY

The faculty, coordinator or private practice dentist may recommend the dismissal for any of the following:

1. Cheating on a given project or examination.
2. Copying another student's assignment to turn in as own.
3. Looking at another student's examination.
4. Talking or communicating to other students during an exam or practical.
5. Providing information to students that have not yet completed an exam including practicals.
6. Providing incorrect information regarding attendance at clinicals.
7. Having assigned private practice staff sign a particular skill that was not done by the student.

DISCIPLINARY MEETINGS

A student may be counseled on any of the following behaviors and documented on the Situation Report form. Any student, who receives three (3) written disciplinary conferences (See *Appendix-Situation Report*), will be dismissed from the program. Some circumstances may warrant immediate dismissal from the program.

In such circumstances, the program faculty will make such determination after consultation with the college administration.

1. Academic dishonesty.
2. Habitual absence, (3 unexcused absences or 5 tardies will result in 1 Situation Report.)
3. Unprofessional or unethical conduct.
4. Refusal to comply with Dental Assisting Program policies.
5. Breach of rules or regulations of the student's assigned clinical or private practice site.
6. Unsafe practice.
7. Sexual harassment of other students, faculty, clinical or private practice faculty.
8. Purposeful destruction or theft of college, clinical or private practice property.
9. Reporting to class, clinic or private practice under the influence of alcohol and/or controlled substances.
10. Insubordination, being disrespectful to instructors, clinic staff or private practice staff.
11. Inappropriate behavior in class, clinic or private practice.
12. A felony conviction while in the program.

Cheating: The use of unauthorized materials, information, or study aids; or an act of deceit by which a student attempts to misrepresent academic skills or knowledge; or unauthorized copying or collaboration.

Plagiarism: Defined as taking another person's intellectual work and using it as one's own. For example, this includes quoting without giving proper credit to a source, expanding another person's work without giving credit to that person, or submitting another person's work under the pretense that it is one's own.

Fabrication: Intentional and unauthorized falsification or invention of any information or citation in an academic exercise.

Collusion: Knowingly helping another individual violate any provision of the Academic/Clinical Dishonesty guidelines. Collusion includes assistance with assignments or tests that are not authorized by the instructor.

Falsifying institutional records or other legal or source documents: Includes altering grades, either written or electronic, or other falsification of academic records such as application for admission, grade reports, test papers, registration materials, and reporting forms used by the College.

DISMISSAL

The faculty, coordinator or private practice dentist may recommend the dismissal of any student whose health, conduct or grade(s), (grades of less than “C”), is(are) in poor standing.

Some reasons for dismissal, but not limited to are:

1. Grades below a “C” in any subject.
2. Absenteeism which results in lower grades and/or inadequate clinical experience.
3. Interpersonal conflicts with instructors or coworkers, which causes disruption of learning or patient/client care.
4. Refusal to accept constructive criticism and/or directions.
5. Failure to utilize learning opportunities, regardless of academic standing.
6. Failure to follow accepted procedures and/or directions.
7. Inability to transfer didactic learning to clinical performance in a safe manner.
8. Inability or refusal to accept responsibility for one’s own actions, a display of inappropriate behavior and/or attitude that is determined to be disrespectful by an instructor.
9. Neglect of patients/clients and/or assigned duties.
10. Drug use (including alcohol), which is harmful or degrading to the person or profession.

STUDENT GRIEVANCE & DUE PROCESS

If a student has a concern about classroom, lab issues, the student should first make an appointment with the instructor to discuss his/her concerns. The faculty believes that an extremely important skill in health care is to work towards resolving issues directly with interested parties in a productive manner. If this is believed to be unproductive or in an event the student requests the program coordinator to be present with the instructor, the student should make an appointment to speak to the Dental Assisting program coordinator directly. If the issue remains unresolved, Division chair of Health Science will attempt to resolve the issue but may call for a meeting between the student and faculty member for resolution. If the student believes that the issue has not been adequately resolved to his/her satisfaction, the student should make an appointment with the Dean of Health Science to discuss the situation. If unresolved, the Dean of Instruction may arrange for a meeting between the two parties to mediate the disagreement. If warranted and under the discretion of the Dean of Instruction, a grievance committee may be convened to hear testimony from both parties and a final recommendation for resolution made.

PROGRAM WITHDRAWAL

Students may withdraw from a class at any time prior to the college’s published last day to withdraw. It is important that students who stop attending classes withdraw formally from the courses in which they are enrolled. If a student chooses to withdraw from any one or more of the dental assisting courses, they will also be required to withdraw from all dental assisting courses. Because the program course work is sequential in nature, if a student withdraws from the coursework for any semester, they will not be eligible to return to the program until the following year. Placement due to withdrawal cannot be guaranteed and will be granted when space is available.

Students considering withdrawing or did not pass program course(s) must meet with the program coordinator to be advised. No student is guaranteed readmission to the Dental Assisting Program. Many factors must be evaluated including prior problems, progress, and reason for withdrawal; above all, available space in the following cohort. The student must meet all admission standards in effect at the time of application for readmission. All dental courses must be retaken.

If student demonstrated difficulty with skills during prior assessments, verification of readmission may include passing a practical skills assessment prior reentering the lab or clinical course. The student must notify the program coordinator and turn in all necessary documentation by the set deadline. If not met, the student opportunity for readmission will be rescinded.

POLICY ON EVALUATION OF INSTRUCTION

The college has a schedule of evaluating instructors for effectiveness that involves another instructor reviewing a lecture and asking students to formally evaluate a particular class. Students are encouraged to evaluate instructors in a fair, unbiased manner, given specific attention to making suggestions for improvement in a tactful way where warranted.

Program Plan for Quality Improvement

The program faculty value continued quality improvement. As such, the program has a quality improvement plan in which data is collected from various sources and results in strategic planning. As part of the quality improvement plan, students' comments are used to improve the program from the following sources: Student Evaluations of Instruction, Student Evaluation of Clinical Education Forms, Graduate Surveys, Employer Surveys, Suggestions and Complaints, Program Development Plan, formal program review process etc.

EXTRACURRICULAR ACTIVITIES/EVENTS

Throughout the program there are numerous extracurricular activities that require mandatory attendance. The program's attendance procedure also applies to these extracurricular activities. Employment conflicts are not acceptable excuses for absence of any extracurricular activity.

Students are representing Metropolitan Community College during all extracurricular activities. Students are expected to conduct themselves in the same professional manner as during school hours. Inappropriate behavior can result in the dismissal from the program.

Student Work Policy

Dental Assisting students must ensure that any jobs do not interfere with their clinical externship and class/lab schedule. It is the student's responsibility to complete the regularly scheduled rotations in order to obtain satisfactory clinical experience and develop assisting skills to an acceptable level for completion of the program.

CODA COMPLAINT PROCEDURE

A complaint is defined by the Commission on Dental Accreditation as one alleging that a Commission accredited educational program, a program which has an application for initial accreditation pending, or the Commission may not be in substantial compliance with Commission standards or required accreditation procedures.

Students and any other interested party may file a complaint against a CODA-accredited program. The following is an overview of the complaint process from the CODA website. Should a student complaint concern the Dental Assisting Program/curriculum relative to the accreditation standards, then the student is encouraged to meet with the program coordinator/Dean of Health Sciences to formalize and document the complaint. If the complaint continues unresolved then the student is encouraged to submit their complaint to the Commission on Dental Accreditation. The following outlines the complaint procedure process.

Formal Complaints A “formal” complaint is defined as a complaint filed in written (or electronic) form and signed by the complainant. This complaint should outline the specific policy, procedure or standard in question and rationale for the complaint including specific documentation or examples. Complainants who submit complaints verbally will receive direction to submit a formal complaint to the Commission in written, signed form following guidelines in the EOPP manual.

Students, faculty, constituent dental societies, state boards of dentistry, patients, and other interested parties may submit an appropriate, signed, formal complaint to the Commission on Dental Accreditation regarding any Commission accredited dental, allied dental or advanced dental education program, or a program that has an application for initial accreditation pending. An appropriate complaint is one that directly addresses a program’s compliance with the Commission’s standards, policies and procedures. The Commission is interested in the continued improvement and sustained quality 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.

In accord with its responsibilities to determine compliance with accreditation standards, policies, and procedures, the Commission does not intervene in complaints as a mediator but maintains, at all times, an investigative role. This investigative approach to complaints does not require that the complainant be identified to the program.

An “anonymous comment/complaint” is defined as an unsigned comment/complaint submitted to the Commission. Any submitted information that identifies the complainant renders this submission a formal complaint and will be reviewed as such (e.g. inclusion of a complainant’s name within an email or submitted documentation).

All anonymous complaints will be reviewed by Commission staff to determine linkage to Accreditation Standards or CODA policy and procedures. If further investigation is warranted, the anonymous complaint will be handled as a formal complaint (See Formal Complaints); however, due to the anonymous nature of the submission, the Commission will not correspond with the complainant.

Anonymous comments/complaints determined to be unrelated to an Accreditation Standard or CODA policies and procedures will not be considered. Anonymous comments/complaints that do not provide sufficient evidence of probable cause of noncompliance with the standard(s) or required accreditation policy(ies), or procedure(s) to proceed, will not be considered.

Related to complaints directed at the Commission on Dental Accreditation, interested parties may submit an appropriate, signed complaint to the Commission on Dental Accreditation regarding Commission policy(ies), procedure(s) or the implementation thereof. The Commission will determine whether the information submitted constitutes an appropriate complaint and will follow up according to the established procedures.

COMPLAINTS TO THE COMMISSION ON DENTAL ACCREDITATION

The program in Dental Assisting is accredited by the Commission on Dental Accreditation and has been granted the accreditation status of “approval without reporting requirements.”

The Commission on Dental Accreditation is interested in the sustained quality and continued improvement of dental and dental-related education programs. Therefore, complaints that relate to the compliance of MCC- Penn Valley Dental Assisting Program reviewed by the Commission on Dental Accreditation.

A copy of the appropriate accreditations standards and/or the Commission’s policy and procedure for submission of complaints may be obtained by contacting the Commission at 211 E. Chicago Ave., Chicago, IL 60611 or by calling (312) 440-4653 or (800) 621-8099, extension 4653.



OCCUPATIONAL SAFETY AND HEALTH INFORMATION

POLICIES ON INFECTION CONTROL AND BLOODBORNE PATHOGENS

OBJECTIVES:

The purpose of the Infection Control information and policies is to minimize the risk of transmission of blood borne pathogens and other infectious agents between patients and MCC-Penn Valley Dental Assisting students, and faculty. The information and policies are based on the rules and regulations of the Occupational Safety and Health Administration as outlined in The Code of Federal Regulations document 29 CFR Part 1910.1030 entitled “Occupation Exposure to Blood borne Pathogens,” and the CDC Infection Control in Dental Health-Care Settings-2003. (See *Appendix-Infectious Disease Policy*)

Bloodborne Pathogens- Bloodborne is defined as 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) and human immunodeficiency virus (HIV). These pathogens are transmissible in health care settings such as dental office/clinic, produce chronic infection, can be asymptomatic in the carrier. The routes of transmission may be direct or indirect and include: patient to dental professional, dental professional to patient, patient to patient, dental office to community.

Bloodborne Pathogens Exposure Protocol- Bloodborne pathogens exposure protocol is not only applied to a stick by a needle, but any puncture of the skin which causes blood to surface, such as: dental bur, sharp instrument, etc. The first step to needle stick protocol is the prevention of a needle stick. This includes the use of safety guards, needle cap holders, or one handed scoop technique. **NEVER RECAP A NEEDLE WITH BOTH HANDS (WHETHER USED OR UNUSED).** (See *Appendix - Post-Exposure Procedure*)

**EXPOSURE CONTROL PLAN:
ENGINEERING AND WORK PRACTICE CONTROLS**

The following guidelines will apply to all dental personnel, including students, faculty, and staff, who may come into contact with blood, body fluids, and tissues. The guidelines are based on standard precautions.

Standard precautions integrate and expand the elements of universal precautions into a standard of care designed to protect dental health care workers and patients from pathogens that can be spread by blood or any other body fluid, excretion, secretion or tissues. Standard precautions apply to contact with 1) blood; 2) all body fluids including saliva, secretions, excretions (except sweat), regardless of whether they contain blood; 3) nonintact skin; and 4) mucous membranes. Standard precautions require that all human blood body fluids including saliva, and body tissues are to be treated as if known to be infectious.

The guidelines consist of engineering and work practice controls which must be followed when the potential for contact with infectious agents exists. The guidelines, in part, have been adopted from recommendations from the U.S. Department of Health & Human Services Centers for Disease Control and Prevention, the American Dental Education Association, the Connecticut State Dental Association and the American Dental Association.

In general, the guidelines are designed to prevent the transmission of diseases through:

1. Direct contact with blood, oral fluids, or other patient materials
2. Indirect contact with contaminated objects (e.g., instruments, equipment, or environmental surfaces)
3. Contact of conjunctival, nasal, or oral mucosa with droplets (e.g., spatter) containing microorganisms generated from an infected person and propelled a short distance (e.g., by coughing, sneezing, or talking)
4. Inhalation of airborne microorganisms that can remain suspended in the air for long periods.

Personal Hygiene

1. Hair must be cleared away from the face.
2. Facial hair must be covered by a face mask or shield.
3. Jewelry such as rings, watches, bracelets and dangling earrings must not be worn during patient treatment.
4. Nails must be clean and short.

Rationale: Hair and nails are known to harbor higher levels of bacteria than skin. Long nails are more difficult to clean and may potentially penetrate gloves. Artificial nails have been implicated in microorganism and disease transmission from workers to patients. Jewelry should be removed for the same reasons. Chipped nail polish has been documented to harbor greater levels of bacteria and put the DHCP at risk. Employees with injured or cracked skin, erosions, or eczema on hands or arms should exercise additional caution such as using mild soaps and lotion until the lesions are healed.

Hand Washing

Hand washing is mandatory (1) before treatment and glove placement, (2) after glove removal, (3) during treatment if a glove is compromised or damaged and (4) before leaving the treatment room or the dental laboratory. A double gloving technique is also acceptable where one puts on two pair of gloves and discards the outer glove following treatment activities. Hands must be washed following the removal of the gloves. The following is the recommended protocol for hand washing for routine dental procedures in the clinic and for routine laboratory work with contaminated items.

Hand-washing protocol:

1. When necessary, remove gross visible debris from hands, arms and nails with appropriate cleaner/brush/nail file.
2. Wet hands under cool running water
3. Dispense sufficient soap or antimicrobial hand wash to cover hands and wrists.
4. Rub the hand wash gently onto all areas, with particular emphasis on areas around nails and between fingers, for a minimum of 15 seconds before rinsing under cool or tepid water.
5. Dry hands thoroughly with paper towels.

If the hands are not visibly soiled, an alcohol-based hand rub may be used. Alcohol hand rubs are rapidly germicidal when applied to the skin. Alcohol hand rub products should include an antiseptic such as chlorhexidine, quaternary ammonium compounds, or triclosan to achieve persistent activity.

If using an alcohol-based hand rub, apply an adequate amount of the product, as recommended by the manufacturer, into the palm of one hand and rub hands together, covering all surfaces of the hands and fingers, until hands are thoroughly dry.

Rationale: Hand washing is an extremely effective procedure for the prevention of many infections that are acquired from the transmission of organisms on the hands. Cool water prevents cornstarch from penetrating the skin pores and minimizes the shedding of microorganisms from the subsurface layers of the skin.

Personal Protection

Routine use of barrier devices such as gloves, masks, and protective eyewear significantly reduces the possibilities for blood and salivary exposure between patients and dental health care workers. Blood, saliva, other fluids and all oral tissues from all dental patients must be considered infectious.

Sequence for implementing personal protective barriers:

- 1 . Put on gown
- 2 . Put on mask
- 3 . Put on protective eyewear
- 4 . Wash hands
- 5 . Put on gloves

1. Gloves

All individuals must wear disposable gloves whenever there is contact with blood, saliva, or mucous membranes. If a glove is torn or develops a hole during treatment, the gloves should immediately be removed,

the hands washed, and new gloves donned. Gloves must be removed, and hands washed before leaving the dental treatment room.

Utility Gloves

Sturdy, unlined utility gloves can be worn for all cleaning and disinfection of instruments, dental units, and environmental surfaces. Nitrile gloves have an increased resistance to instrument punctures and can be autoclaved. Alternatives include reusable utility gloves that can be disinfected after each use.

2. Masks and Eyewear

Disposable masks and protective eyewear must be worn whenever an aerosol spray or spatter is generated. A new disposable mask is to be worn for each patient treatment session. When not in use, masks must not be placed on the forehead or around the neck.

Masks are not to be worn outside of the immediate clinic area. It is recommended that masks be changed approximately every one and one half hours during lengthy treatment procedures or if the mask becomes wet. Protective eyewear must be considered for the patient's use. Both sets of eyewear should be cleaned between uses, being certain not to handle them with unprotected hands until they have been decontaminated. Eyewear that cannot be heat sterilized should be washed with soap and water. Eyewear should be disinfected or sterilized if visibly soiled. Follow specific manufacturer's instructions for all specialty eyewear products.

3. Clinic Attire-- Gowns

All employees and non-employees at risk must routinely wear appropriate attire to prevent skin exposure and soiling of street clothes when contact with blood or saliva is anticipated. Clinical attire must not be worn outside the immediate clinic area. This area is defined as all dental treatment rooms, main clinics and the associated service corridors. It does not include the reception area, restrooms, offices, general traffic corridors, main lobby, dining areas, dental laboratory, central dispensing, or elevators.

Attire must be changed at least daily or when visibly soiled. Soiled gowns are placed in marked laundry bins in each clinic. Contaminated laundry must be bagged or containerized at the location of use. Laundry personnel handling dirty linen bags must wear moisture resistant gloves and take appropriate precautions.

Sharps Management Techniques:

A mechanical device (instead of fingers) must be employed for tissue retraction during injection of anesthesia e.g. mirror, wooden tongue depressor, or Minnesota tissue retractor. These are available in all dental clinics.

- To prevent needle-stick injuries, needles are not to be recapped by moving the needle towards a body part, especially a hand.
- Use an appropriate one-handed technique, a mechanical device designed to hold the needle cap or an engineered sharps injury protection device.
- Once used the syringe should only be handled by the dentist.
- Never allow the point of a needle to move in the direction of you or any co-worker. Place syringe on a sterile field away from the work area.
- Used needles are to be disposed of in an appropriate puncture-resistant container and must not be purposefully bent or broken after use. The containers are present on the wall of each treatment room. Empty anesthetic cartridges and use Tofflemire matrix bands can be disposed of in these same containers.
- To prevent accidental sticks from burs during treatment, all handpieces not in use must be stored with the bur facing the bracket tray or away from the operator and dental assistant. A cotton roll may be placed over the bur for additional protection.
- Dental burs must be removed from handpieces immediately at the end of treatment to prevent accidental sticks or punctures. All burs must be removed with a mechanical device such as a hemostat or locking pliers. Under no circumstances should a bur be removed from a handpiece or placed in a bur block with the fingers.
- Scalpel blades must be placed and removed with a hemostat.
- When cutting with a Bard Parker or Buffalo knife always cut with the blade moving away from hand.

Dental Laboratory Procedures:

Hands must be washed, and personal protective equipment (gloves, mask, gown and protective eyewear) must be worn for all prosthodontics and dental laboratory related activities.

Disinfection of Impressions and Prostheses (Complete Dentures, Partial Dentures, Fixed and Removable Appliances, Night Guards, Temporaries, etc.)

1. Impressions and prostheses must be rinsed under cold gently running water to remove debris, saliva, and blood. Do not splash water excessively because droplet spatter can carry microorganisms. (Appliances with a buildup of calculus/plaque must be ultrasonically cleaned before being disinfected. Place temporary crowns/dentures etc., in Ziplock bag with cleaning agent, prior to placement in ultrasonic cleaner.)

2. All impressions and prostheses must be disinfected by spraying them completely in an EPA-registered intermediate level hospital disinfectant, which is available in clinic spray bottles. The impression thoroughly sprayed with disinfectant and set on paper towel or plastic tray for 1 minute (confirm disinfectant spray time specifications). If the impression is an alginate, it must remain wrapped with a damp paper towel at all times.

3. Following the disinfecting procedure, impressions and prostheses must be immediately rinsed under copious amounts of cold running water to avoid surface damage.

4. Impressions and prostheses must then be placed in a closed plastic bag prior to transport to the dental laboratory. Impressions are now ready to be poured.

Impression Trays

- Metal trays must be sterilized by autoclaving prior to each use. They are stored in individual sterilization bags until use. Cleaning the tray immediately after separating the impression from the cast will simplify the procedure.
- Plastic trays should not be reused. Discard after use. If reuse is required, the trays must be sterilized with gas plasma in hospital sterilization.
- Custom trays must be disinfected prior to use. They should be washed with a detergent and water and then immersed in a disinfectant solution. The trays must be completely dry before application of adhesive

Eye Wash/Eye Safety

Dental suite and dental lab have eye wash systems connected to the potable water system. Users must know their locations (all eye wash stations are marked with red and white laminated signs) and how to operate them.
Use

1. Turn on cold water side of faucet (use of hot water may cause scalding or other injury).
2. Pull knob on Eye Station unit forward to activate the eye wash. Water pressure will hold the eye wash in operation, thus leaving the user's handsfree.
3. To return to normal faucet operation, push knob back to original position. When the faucet is turned off, the knob will return to original position automatically.

Maintenance

1. Periodic cleaning of the eye wash aerators is advisable to assure proper water flow.
2. Keep plastic float-off covers on outlet heads when the unit is not in use.
3. The Eye Safe unit, like all emergency eye wash and show should be tested at least weekly

COVID-19 Protocol

<https://mcckc.edu/coronavirus>

HAZARD COMMUNICATION

This section is designed to meet the OSHA HAZARD COMMUNICATION STANDARD

https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=standards&p_id=10099

The purpose of the Hazard Communication Standard is to provide you with information that will help protect you against hazardous substances in the workplace. Injuries and disease in the workplace can occur for a variety of reasons including fatigue, haste, defective equipment, carelessness, clutter, crowding, inadequate lighting, or improper use of storage. There is no substitute for the individual's personnel safety consciousness in creating a safe working environment.

A. MERCURY HYGIENE

The Dental Assisting Program base its mercury hygiene policies on the American Dental Association's established guidelines for the protection of dental healthcare workers and the environment:

<https://www.ada.org/en/member-center/oral-health-topics/amalgam-separators>

There are various potential sources of mercury vapor in the dental operatory: accidental spills, open storage of used capsules, trituration of amalgam, placement, polishing or removal of amalgam, heating of amalgam-contaminated instruments, malfunctioning amalgamators, leaky capsules, and leaky bulk amalgam dispensers. Excessive exposure to mercury and its vapor is damaging to one's health. Fortunately, greater awareness of this problem and the use of preencapsulated amalgam have lessened the damages. Attention to the best management practices below will further decrease any threat:

Best Management Practices for Amalgam Waste

DO

Do use precapsulated alloys and stock a variety of capsule sizes

Do recap single-use capsules from precapsulated alloys after use & dispose of properly

Do recycle used disposable amalgam capsules in designated marked container(s)

Do salvage, store and recycle non-contact amalgam (scrap amalgam)

Do salvage (contact) amalgam pieces from restorations after removal and recycle the amalgam waste

Do use chair-side traps, vacuum pump filters and amalgam separators to retain amalgam and recycle their contents.

Do recycle teeth that contain amalgam restorations. (Note: Ask your recycler whether or not extracted teeth with amalgam restorations require disinfection)

Do manage amalgam waste through recycling as much as possible

Do use high-volume evacuation with traps and/or filters when finishing or removing amalgam

Do use line cleaners that minimize dissolution of amalgam

Do use care when handling amalgam (including unopened capsules) using appropriate personal protective equipment (PPE)

Do ensure adequate ventilation (air exchange) when handling amalgam

DON'T

Don't use bulk mercury and bulk alloy

Don't allow uncapped single-use capsules to remain open during patient treatment or during disposal

Don't put used disposable amalgam capsules in biohazard containers, infectious waste containers (red bags) or regular garbage

Don't put non-contact amalgam waste in biohazard containers, infectious waste containers (red bags) or regular garbage
Don't put contact amalgam waste in biohazard containers, infectious waste containers (red bags) or regular garbage
Don't rinse devices containing amalgam over drains or sinks
Don't dispose of extracted teeth that contain amalgam restorations in biohazard containers, infectious waste containers (red bags), sharps containers or regular garbage
Don't flush amalgam waste down the drain or toilet
Don't allow waste amalgam to enter the public sewer system
Don't use bleach or chlorine-containing cleaners to flush wastewater lines
Don't handle mercury or freshly mixed amalgam; avoid skin contact
Don't work in poorly ventilated spaces when handling amalgam

Non-contact (scrap) amalgam

- Place non-contact, scrap amalgam in wide-mouthed, container that is marked "Non-contact Amalgam Waste for Recycling."
- Make sure the container lid is well sealed. When the container is full, send it to a recycler.

Amalgam capsules

- Stock amalgam capsules in a variety of sizes.
- After mixing amalgam, place the empty capsules in a wide-mouthed, airtight container that is marked "Amalgam Capsule Waste for Recycling."
- Capsules that cannot be emptied should likewise be placed in a wide-mouthed, airtight container that is marked "Amalgam Capsule Waste for Recycling."
- Make sure the container lid is well sealed. When the container is full, send it to a recycler. Disposable chair-side traps
- Open the chair-side unit to expose the trap.
- Remove the trap and place it directly into a wide-mouthed, airtight container that is marked "Contact Amalgam Waste for Recycling."
- Make sure the container lid is well sealed. When the container is full, send it to a recycler.
- Traps from dental units dedicated strictly to assisting may be placed in with the regular garbage.

Reusable chair-side traps

- Open the chair-side unit to expose the trap.
- Remove the trap and empty the contents into a wide-mouthed, airtight container that is marked "Contact Amalgam Waste for Recycling."
- Make sure the container lid is well sealed. When the container is full, send it to a recycler.
- Replace the trap into the chair-side unit (Do not rinse the trap under running water as this could introduce dental amalgam into the waste stream. Vacuum pump filters
- Change the filter according to the manufacturer's recommended schedule.
- Remove the filter.
- Put the lid on the filter and place the sealed container in the box in which it was originally shipped. When the box is full, the filters should be recycled.
- Filters changes are provided by Universal Dental Services.

Amalgam separators

- GCSC utilizes the BU10-30 ISO Certified Amalgam Separator.
- Recycling of Waste at US EPA Certified Facility, Compliance Documentation, and Notification of Receipt of Waste is provided by Dental Recycling North America (DRNA).

Line cleaners

- Use non-bleach, non-chlorine-containing line cleaners, which will minimize amalgam dissolution.

MANAGEMENT OF MERCURY SPILLS

1. Never use a vacuum cleaner of any type to clean up mercury.
2. Never use household cleaning products to clean up the spill, particularly those containing ammonia or chlorine.
3. Never pour mercury or allow it to go down the drain.
4. Never use a broom or a paintbrush to clean up the mercury.
5. Never allow people whose shoes may be contaminated with mercury to walk around or leave the spill area until the mercury-contaminated items have been removed.

MANAGEMENT OF SMALL MERCURY SPILLS

A spill is considered small if there are less than 10 grams of mercury present (a pool no larger than the size of a quarter). Small spills can be cleaned safely using commercially available mercury cleanup kits located in the Dental Materials Storage room (HS 201H).

MANAGEMENT OF LARGE MERCURY SPILLS

A mercury spill is considered large if there are more than 10 grams of mercury present (a pool larger than the size of a quarter). Cleanup of large mercury spills requires the use of an experienced environmental contractor who specializes in toxic spill cleanup. Contact your MCC Environmental Health and Safety Manager immediately (816-604-1021) who is responsible to contact state or local Environmental Protection Agency office for a list of contractors who clean up toxic spills.

ADA Council on Scientific Affairs. Dental mercury hygiene recommendations. JADA 1999;130:1125-6

All mercury spills must be reported immediately to Course Instructor and the Dental Assisting Program Coordinator.

Health and Safety –

A. Classroom, Dental Suite and Dental Lab Policies

1. While a student in the program, students understand that they will be practicing techniques on each other in order to become competent in those skills. Students should refrain from coming to class when an illness may be contagious or endanger the health or safety of the student or other students. Students may be asked to get a doctor's release prior to participation in classroom activities if the health and safety of the student or other students is in question and for the absence to be excused a credible documentation has to be provided.
2. A Each floor has a map posted indicating routes to safety. General safety will be discussed in DENA 105 during the first lab.
3. Students in the dental laboratory are exposed to hazards from mechanical devices, metals, heat, caustic chemicals, and high pressure gas lines. The use of protective gowns, face masks and safety glasses must be worn when working with hazardous dental materials and chemicals.
 - Students and faculty will be fully informed on any hazards associated with these materials before using them.
 - A Safety Data Sheet (SDS) folder for all products is kept in the dental suite and in the dental laboratory for reference.
 - Students will practice procedures with safety being of greatest concern.
 - During grinding operation(s) of dental materials, a face mask and safety glasses MUST be worn. Hands and fingers should be kept clear of the cutting area.
 - Work with volatile chemicals will be conducted in a well-ventilated area.

- All dental materials that will be used in the suite or laboratory will be discussed thoroughly in the Dental Materials course.
- An eyewash station is located in each lab and suite area so chemicals that may come in contact with the eyes can be flushed immediately.
- Management of amalgam waste/mercury is outlined in above and is found in the Infection Control Manual.

Safety Data Sheets are housed in a folder by the door in storage 201H by the dental lab of the HSI in case of exposure.

3. Students will be instructed on safe application of all equipment, contraindications, precautions and methods of reducing transmission risks of communicable diseases and will be expected to adhere to this knowledge during lab procedures. A student should advise the instructor of any conditions that may need special consideration during lab participation in order to assure student safety. Such information given in confidentiality will be kept confidential.

4. Students will be given an orientation to emergency evacuation procedures once in the program as a part of lab orientation.

4. Equipment safety is checked by an outside vendor on an annual basis, however, if students note that a piece of equipment is functioning improperly, it should be immediately set aside, labeled, and the instructor notified.

5. Accident procedures.

a. If the incident is serious, call 911 first and then the campus security office at 604-1111. If the injury is not serious, take appropriate first aid measures (***First aid kit is available in the storage room 201H***) and medical follow-up. The student is responsible for the cost of all medical treatment.

b. Complete an incident report

6. FIRE PROTECTION

- All personnel will be familiar with the evacuation plan and location of the fire extinguishers.
- Trash and other combustibles will not be allowed to accumulate in the clinic.
- Smoking is prohibited campus-wide at MCCPV-HSI.
- Flammables and caustic materials should be stored in a flame retardant metal cabinet that meets Occupational Safety and Health Administration (OSHA)/ National Fire Protection Association (NFPA) Standards.

- **Fire cabinets are located in HS**

- In case of fire, call 911 from any campus phone, and then report it to the college operator. If necessary, utilize the fire extinguisher from the hallway outside the area.

7. If a student needs to be contacted due to emergency away from school, the security office should be contacted at 604-1111. Please provide this number to family members.

8. Students should be familiar with the location of security services on the first floor of the Campus Center (CC) building, phone number 604-1111.

9. Students should not be using equipment they have not been trained on.

10. Students should not be practicing techniques or using program equipment with students that are not enrolled in the program.

B. Substance Abuse Policy

Metropolitan Community College-PV-HSI is committed to maintaining high standards of Dental Assisting education and practice. Safe practice includes efficient, reliable and unimpaired performance in the clinical setting. Students are expected to perform chairside assisting activities without the use of any chemical substance that could alter or impair thinking. These chemical substances may be alcohol or illicitly obtained drugs. Students who are taking prescribed medications are expected to submit a written statement from the attending physician prior to the first day of each clinical to be included in their record.

It is the responsibility of Dental Assisting faculty to observe student behaviors which could threaten the safety and well-being of patients. Reasonable suspicion that a student is impaired will be documented by the observing faculty member, or a licensed or certified professional at the clinical facility where the student is assigned. Whenever possible, such observation shall be corroborated. (See *Appendix- Drug Free Policy*)

In the classroom

When an instructor has reason to suspect that one of the students is under the influence of alcohol, narcotics, or controlled drugs, the student's behavior should be verified with the Program Coordinator or designated alternate to determine what action should be taken and a Student Conference Form (See *Appendix- Student Conference Form*) initiated. The student will be given opportunity to discuss the suspicious behavior with the person(s) who witnessed the behavior. It is the student's responsibility to disclose any prescription or non-prescription medications that the student is taking as well as any other relevant medical information. If evidence warrants, the student will be asked to leave classes for the day. Further episodes of substance abuse will result in dismissal from the program. If on the other hand, behavior is disruptive, security will be called, and the student will be immediately dismissed from the program.

In the Clinic

A clinical site may request a drug screen prior to clinical rotation as a condition of completing the clinical rotation at that site. Students may be required to bear the cost for the drug screen.

When a clinical instructor has reason to suspect that a student is under the influence of alcohol, narcotics, controlled drugs, the clinical instructor should call the Program Coordinator at MCC-PV. If the supervising dentist/dental assistant instructor determines unsafe behavior is a possibility, the student should be removed from patient care responsibilities. The student should be given the opportunity to discuss the situation. It is the student's responsibility to disclose any prescription and non-prescription medication that he/she might be taking, and circumstances documented along with student comments. If in accordance with hospital or facility policy, a laboratory test is necessary for drug screening, the student must submit to the test and is responsible for the cost of the lab work. Refusal to submit to the testing will be considered failure to follow hospital/clinical site policy and may result in dismissal from the clinical with student earning a failing grade for the clinical. If the drug screening is positive, disciplinary action may include warning, mandatory counseling, dismissal from the clinical or dismissal from the program.

C. Student Health Insurance

During the two (2) semesters of clinical experience, the student is required to purchase professional liability insurance through the MCC-Penn Valley Community College Cashier's Office. This is to be done during enrollment and is included in your enrollment fee. Student health insurance is not provided through the college and is the sole responsibility of the student to acquire through other sources. The student will show proof of health insurance prior to clinical affiliations. or sign a waiver. Insurance can be acquired through the American Dental Assistants Association for student members.

D. CPR - Must be completed by students through American Heart Association (AHA) and hands-on exam during the first week of the program. *Applicants with acceptable and current CPR (must include CPR, and a hands-on exam) from American Heart Association Health Care provider level CPR at intervals not to exceed two years will be waived from taking the HSI offered CPR. Applicants have to provide a copy of such certification to the Dental Assisting program coordinator on the first day of class. Certification must be maintained through graduation.*

PROGRAM POLICIES AND PROCEDURES REGARDING RADIATION HYGIENE AND PROTECTION**RADIATION PROTECTION GUIDELINES**

ALL X-ray Equipment Operators will follow the following procedures:

1. **ONLY the X-ray Equipment Operator and the Patient are permitted in the Radiology Cubicle** when radiographs are taken. (Children of adult patients must remain outside in the reception area.)
2. **Thyroid Collar and Lead Apron will be used on EACH patient**, for all intraoral radiographic procedures, regardless of age. **For panoramic radiography**, only the poncho style lead apron will be used and it will be positioned in such a way so that it will not interfere with the diagnostic value of the radiograph.
3. **The Operator of the X-ray equipment will remain COMPLETELY behind the designated barrier** during each radiographic exposure.
4. **X-ray Equipment Operators WILL NOT (under any circumstances) hold films in a patient's mouth** during a radiographic exposure.
5. **X-ray Equipment Operators WILL NOT hold or stabilize the X-ray tubehead** during a radiographic exposure. If equipment is not stable notify your instructor in charge immediately and move to an x-ray unit that is stable.
6. **X-ray Equipment Operators WILL NOT stand in the direct path of the central beam of Xray.**
7. **Doors of the X-ray Cubicle may be left open** during radiographic procedures. When the door is left open, **the central ray (C-R) of the X-ray unit should NEVER be directed out the door**; the C-R should ALWAYS be directed toward the inside walls and not the door.
8. **When Radiography Students use the radiology cubicle in "pairs" or small groups, the "partner (s)" must remain outside the cubicle clear of the doorway during the actual exposure of the radiograph.**
9. **Under exceptional circumstances**, it may be necessary for someone to hold a film in a patient's mouth (never on a manikin). When these circumstances arise, it will be necessary to consult with and receive permission from the faculty member in charge of the clinic. During these special circumstances, the patient's guardian or parent may be used to assist in holding the film in a patient's mouth **if they are draped with a lead apron. Faculty, Students, and Staff will NOT (under any circumstances) be asked to hold film in a patient's mouth.**
10. **Before you press the exposure button for any and all exposures, clear hallway and surrounding area and loudly say "X-RAY".**

PORTABLE HANDHELD X-RAY SYSTEMS USED IN DENTAL SETTINGS

Students enrolled in the DA programs at MCCPV-HSI will be provided training to use the portable handheld x-ray system (Nomad, Nomad Pro) after the students have completed the module and passed the written test.

USE OF IONIZING RADIATION POLICY

POLICY PURPOSE

Production of dental radiographs through the use of ionizing radiation is one of the most valuable diagnostic tools available to dentistry since there are areas of the teeth and periodontal structures that cannot be viewed clinically. However, the decision to expose a patient to ionizing radiation must be determined according to "risk vs. benefit" factors. Therefore, it is of the utmost importance that dental radiographs are diagnostically necessary and provided with the least possible exposure of ionizing radiation to the patient, student or faculty. Clear communication of this policy is provided through classroom review and the provision of written copies to students and those faculty and staff involved in dental radiography instruction.

RESPONSIBILITY

The College accepts responsibility to:

- a. Maintain the dental radiation equipment and to comply with all the state of Missouri regulations for protection against radiation as administered through its department of environment, health and natural resources, radiation section.
- b. Request annual inspection of the equipment to ensure its safety.
- c. Designate a qualified dental radiation safety officer to coordinate maintenance of equipment and dental radiography instruction.
- d. Provide faculty who have current credentials in the instruction and supervision of dental radiography.
- e. Provide personnel monitoring through subscription to a dosimetry badge service.

The faculty will ensure that:

- a. Dentists adhere to and prescribe only those radiographs that are diagnostically necessary according to Missouri guidelines for prescribing dental radiographs established by the college for patient selection, frequency of exposing radiographs and the number of permissible retakes.
- b. Individual student instruction and evaluation is provided throughout DENA 115 - dental radiography course.
- c. Radiographs are taken only with the patient's permission.
- d. Retakes are monitored for selection and limited in number before the student exposes the films.
- e. Students complete radiographic exposures in an efficient, timely and compassionate manner.
- f. Only dental assisting students who have met competencies on manikins will be permitted to expose patients with ionizing radiation.
- g. Following faculty evaluation of these radiographs and upon patient request, a duplicate set will be mailed to the prescribing dentist for his/her diagnostic records.
- h. Students and faculty understand and apply all available methods to meet the lowest possible exposure of the patient and operator to ionizing radiation through but not limited to position indicating devices (PID), operator practices, film speed, machine variables and lead aprons for patient protection

- i. Quality assurance practices are implemented, maintained and documented
- j. Every patient radiograph is critiqued by the student and submitted for a grade
- k. The general quality of patient radiographs is monitored, and that student remediation occurs when appropriate
- l. An annual review and update of the MCC-PV dental radiography manual occurs.

The student accepts responsibility to:

- a. Follow all MCC-PV Radiation Control, Operating and Safety Procedures
- b. Sign an Acknowledgement of Receipt of the MCC-PV Radiation Control Operating and Safety Procedures and the Use of Ionizing Radiation Policy
- c. Only expose radiographs prescribed by a licensed dentist
- d. Expose patient to ionizing radiation for diagnostic purposes only. In other words, the student accepts responsibility to never take a dental radiograph solely for experience in order to achieve an instructional objective or to improve a grade
- e. Complete the radiographic process in an efficient, timely and compassionate manner
- f. Retake radiographs only after recommending a selection of the desired film(s) according to the Retake Policy with faculty permission to proceed
- g. Seek and accept remediation by faculty, when necessary, in the interest of producing the lowest possible exposure to ionizing radiation to patient and self.

It is only upon review of the patient's health history and completing a clinical examination by UMKC SOD faculty and/or dental students that radiographs are prescribed, and x-rays taken by MCC-PV dental assisting students.

EMERGENCY RESPONSE PROCEDURES

MCC Emergency Response Procedures

https://mcckc.edu/campus-police/docs/MCC_EmergencyResponsePlan.pdf#search=MCC%20EMERGENCY%20RESPONSE

Other MCC Emergency Procedures Quick Sheet

https://mcckc.edu/campus-police/docs/MCC_Emergency_Procedures_Quick%20Sheet.pdf#search=fire

FINANCIAL AID

Questions concerning scholarships or any other form of financial aid should be directed to the Financial Aid office. They can be reached at (816) 604-4067.

<https://mcckc.edu/financial-aid/>

SCHOLARSHIP OPPORTUNITIES

These scholarships are specific for Dental Assistant students:

Albert W. Zimmer Dental Assistance Scholarship (Contact DA Program Coordinator for details)

American Dental Assistants Association: www.dentalassistant.org/scholarship.asp

American Dental Association Foundation: www.ada.org/prof/ed/scholarships.asp

ADA Minority Scholarship Program:

Establish in 1990, the NDAF/Colgate Palmolive Scholarship Fund provides financial aid to African American and underrepresented minorities pursuing careers as dentists, dental hygienists and dental assistants. Since 1990, 1.5 million dollars has been awarded to 1,100 students from across the country. www.adaonline.org/hygieneapp.asp

Hispanic Dental Association Foundation Scholarship Program: Scholarships in the amounts of \$1,000 and \$500 were awarded to entry-level Hispanic US students who have been accepted into an accredited dental, dental hygiene, dental assisting or dental technician program and are judged on demonstration of scholastic achievement, community service, leadership skill and commitment to improving health in the Hispanic community. The scholarship program is funded by Procter & Gamble Oral Health Group and administered through the Hispanic Dental Association Foundation. For more information contact the Hispanic Dental Association Foundation at (800) 852-7921.

Missouri Dental Assistant Association Scholarship: This \$500 scholarship is available thru each of the accredited Dental Assistant Programs in the state of Missouri. The program coordinator will receive applications through the MDAA in January each year. The recipient will be selected in March of that year. All applicants must be members of the American Dental Assistants Student Association.

<https://mcckc.edu/financial-aid/types/scholarships.aspx>

FACILITIES and STUDENT SUPPORT

A. Faculty Conferences/ Student Use of Information

1. Students are encouraged to meet with faculty regarding coursework or other issues that may impact their success in the program. The Program Coordinator, faculty discuss student issues to better advise students on goal setting and other issues. If the student designates, the information he/she is sharing should be held confidentially, the information will not be shared with other program faculty.
2. Student program files are locked in the program coordinator's office with access limited to program coordinator. Academic files are routinely provided to the Academic Advising office to help students plan for enrollment. Students may ask that information not be shared in this manner by placing a written request in his/her file.
3. Student demographic information is provided to the American Dental Association and the MCC-PV assessment office. Use of student information for any other purpose would require the written consent of the student.

B. Dental Materials Lab (Rm 202), Dental Suite (Rm 201) and Computer Lab (201A)

Students are allowed to use the labs, suite and the equipment's but there must be a Dental assisting faculty present and available in the HSI. Students may practice supervised skills at times designated by the instructor of a particular course. Students are not allowed to remove materials from the room and should leave the room as they found it. (See Dental Materials Lab policies)

C. Student Tutoring

The Biology Tutoring lab is available for students in taking courses in the Life Sciences division at hours designated outside the door. The tutoring lab is located in ST 205 and has access to anatomical models and computer software.

The Student Success Center is on the second floor of the library on the main campus. In the Success Center student can receive assistance generalized tutoring including advising students on writing research papers. Dental Assisting graduates are volunteer their time with tutoring and are available upon request for the students struggling in courses and requiring additional one-on-one tutoring.

The HRC (HSI 206) houses a 10 station computer lab. An additional 18 computer stations are available in room HSI 203. Computers in HSI 203 are available outside of HRC hours.

Printing is available in the HSI 206, 204 & 203. To save resources & maximize your 200 free pages, we encourage responsible printing. Additional copies may be purchased at the Penn Valley Library or by using a credit card through your MyTouch account. Please see HRC staff for assistance with printing, including PaperCut questions. Please RECYCLE!

D. Library

1. Databases

The library has access to the following databases for research on health-related issues. Students may access these databases from home. In order to do so:

To use the database from home, go to <http://www.mcckc.edu> and click on library services.

The library has access to the following health related databases.

Alt Health Watch (EBSCOhost) Full-text articles from 160+ international journals plus hundreds of pamphlets offering holistic perspectives on health care and wellness

Clinical Pharmacology (EBSCOhost)

Information on US prescription drugs, plus herbal and nutritional supplements.

Health Reference Center (Facts on File)

Encyclopedic database containing over 20,000 hyperlinked entries on health and social issues. Defines causes, cures, key research, medical terms, symptoms, treatments and trends of each field of study.

Health Reference Center Academic (Gale Group)

Indexes articles on fitness, pregnancy, medicine, nutrition, diseases, public health, occupational health and safety, alcohol and drug abuse, HMOs, prescription drugs, etc. from 1980 to present

Medline

PubMed, a service of the National Library of Medicine, includes over 14 million citations for biomedical articles back to the 1950's. These citations are from MEDLINE and additional life science journals. PubMed includes links to many sites providing full text articles and other related resources.

ADA/PDR Guide to Dental Therapeutics is available. Also current and back issues of print subscriptions to the New England Journal of Medicine, JAMA, American Journal of Clinical Nutrition, and the American Journal of Nursing.

Links to catalog searches for dental and educational resources are below.

- [Dental books in print](#)
- [Educational methodology resources](#)
- [Medical dictionaries](#)
- [Dental EBooks](#) available with an MCC student or faculty ID
- [Dental periodicals](#), approximately 21 titles available electronically
- Dental exam prep materials provided through [Learning Express Library](#)

Title	Author	Publication Year
National Dental Assistants Boards	Rudman	2020
Certification Exam Review for Dental Assisting: Prepare, Practice and Pass! : Prepare, Practice and Pass!	Campbell	2020
<i>Dental Materials : Clinical Applications for Dental Assistants and Dental Hygienists</i>	S. Eakle	2020
<i>Dental Instruments : A Pocket Guide</i>	L. Boyd	2020
<i>Dental Assisting Exam Review 2020-2021 : CDA Test Prep Study Guide and Practice Test Questions for the Certified Dental Assistant Exam</i>	Trivium	2019
<i>Dental Assistants and Hygienists : A Practical Career Guide</i>	K. Endsley	2019
<i>National Dental Assistant Boards (NDAB)</i>	J. Rudman	2019
<i>Dental Assisting : A Comprehensive Guide to Current Practice</i>	S. Kantz	2017
<i>Modern Dental Assisting - Textbook and Workbook Package</i>	D. Bird	2020

<i>Certification Exam Review for Dental Assisting: Prepare, Practice and Pass! : Prepare, Practice and Pass!</i>	M. Campbell	2016
<i>Orthodontic Handbook for Dental Assistants</i>	K. Kasai	2017

2. Academic Computer Lab

An 18-station computer lab is available for independent computer use in room 206 of the Health Science Institute.

3. HSI HEALTH RESOURCE CENTER

Location: Health Science Institute
Room 206
3444 Broadway
Kansas City, MO 64111

Hours: Hours vary by semester. Hours for current semester will be posted on the door outside and on the digital signage.

Staff: Rebecca Boom, HRC Coordinator
816.604.4804
Rebecca.Boom@mccckc.edu

Services:

- One-on-One or Small Group Help
- Learning Style Assessments
- Guidance on Applying Individual Learning Styles
- Help with Balancing Student Life:
 - ✓ Study Skills
 - ✓ Test Taking
 - ✓ Time Management
 - ✓ Reading Comprehension
 - ✓ Concentration Memory
 - ✓ Listening & Note Taking
 - ✓ Preparing for Class
 - ✓ Organization
 - ✓ Clinical Thinking Skills
 - ✓ Math Skills
- Special Topic Workshops
- 8 Spacious Study Rooms
 - ◆ each room comfortably accommodates up to eight people
 - ◆ dry erase board, flat screen monitor, DVD player & laptop portal in every room enhanced individual or small group study
- Computer Lab with Printer
- Anatomy Lab with Models, Posters, Microscopes, Computers, X-Ray Light Boxes with Film Library & large Work Space for Group Study
- Free Wi-Fi
- Laptops Available for use in HRC
- Media Room with Multimedia Resources Specific to Health Care Programs
- Information on Community Resources/Services for Additional Support
- Coin-Operated Copier for Student Use

No Appointment Necessary. Help is Available on Walk-In Basis

All MCC campuses have a Student Success Center. If you are closer to another campus, you may seek assistance there (please provide proof of MCC enrollment)

4. Anatomical Models Study Area

Skull models, skeletons, and other models are available for individual study on the 1st floor of the library at MCC-Penn Valley and also at the Health Science Institute Resource Center on the 2nd floor.

E. Advising and Counseling

Staff: Currently advising and counseling is provided by Penn Valley Community College in the Malcolm T. Wilson Enrollment Center. At this time there is also a dedicated Allied Health Student advisor. The name and number is located above in “Frequently Called Numbers”.

1. Enrollment Procedures

Once admitted to the program, the program coordinator will have a mandatory orientation to explain enrollment for students. Counselors will assist students with enrollment by appointment. The program coordinator will provide course numbers each semester. It is the student’s responsibility to enroll in courses.

2. Student Records

The academic advisors and program coordinator are provided access to files upon entry to the program in order to better advise students. If students prefer, this information will not be shared with academic advisors if formal written request is made.

3. Application for Graduation

After being formally admitted to the program, each student is expected to set up an appointment with the Allied health advisor during the first semester of the program. At this meeting the student and advisor will review the student’s transcripts and set up a plan to be recorded in the student’s file. The scheduling and completion of this meeting is the duty of the student and not the program coordinator. Failure to schedule and attend this meeting could result in an inability to graduate on time.

To be guaranteed consideration for graduation, students must submit a degree application one semester prior to completing the requirements to any of the MCC Records Offices.

<http://mccckc.edu/graduation/howtoapply.aspx>

Evaluation of Application for Graduation Once the student has turned in the Degree/ Certificate Application, the Transcript Evaluator will complete an official degree/ certificate evaluation to ensure that degree/ certificate requirements are satisfied. Students should be able to determine the status of their transcript by logging in with their student ID to MCC’s web site. Students that transfer credits to MCC should evaluate their transcript to assure timely graduation. **It is not the responsibility of the program coordinator or any other faculty member to assure that the student has taken all appropriate general education courses for graduation. It is the student’s responsibility to follow up on transfer of courses and exceptions for graduation with the appropriate office.**

F. Employment Resources

The Employment Resources office keeps current information on jobs available in the Dental Assisting field and other areas. The Employment Resources Specialist will advise you on resume writing and interviewing. This individual can be reached by calling 604-4155.

ON-LINE RESOURCES

Canvas is currently in use for all courses. This enables an instructor to post handouts, websites, practice quizzes and current grades for students to access with proper ID and password. Canvas can be accessed by logging into [myMCCCKC](#) account.

LICENSURE INFORMATION

Dental Assisting National Board (DANB)

Dental Assisting National Board (DANB) examinations are offered in either a computerized or written format. Computerized DANB exams are administered throughout the year at over 200 Pearson VUE Testing Centers across the United States. Scheduling convenience and site location are two reasons that more than 90% of individuals sitting for DANB exams, test in a computerized format. DANB examinations are also offered in written format each June at approximately 175 sites and at select locations in February/March and October. There are no deadlines for computerized examinations.

For those dental assistants who meet the eligibility and examination requirements, certification may be earned in one or more areas.

Certified Dental Assistant (CDA) Certification Exam:

CDA examination focuses on General Chairside Assisting and is DANB's primary certification. In addition to a General Chairside component (GC), the CDA exam contains separate components covering Radiation Health and Safety (RHS) and Infection Control (ICE) topics. Many states are using the CDA examination or one of the components as part of dental assisting regulatory requirements. There have been over 100,000 certifications awarded and currently there are over 30,000 professionals maintaining the credential.

Applications and instructions are given to students in class in a timely fashion. Students must adhere to all deadlines set by the Program coordinator in order for forms to be mailed out by MCC-PV in time to reach the ADA Council on Accreditation. Students who do not meet set deadlines will be responsible for mailing their applications separately. Ultimately, it will be the student's responsibility to complete all application requirements and to ensure that the application has been mailed prior to the stated deadline.

Students are urged to keep and organize all notes and materials from all science courses as well as dental courses in order to facilitate review for the National Board Exam.

NOTE: Passing labs/clinics at MCC-PV is not a guarantee of success on National Board Exams.

Expanded Function Dental Assistant Permit :

The Missouri Dental Board now processes and issues EFDA permits for the following categories: Restorative I, Restorative II, Removable Prosthetics, Fixed Prosthetics and Orthodontics. It is the dental assistant's responsibility to send the Missouri Dental Board copies of his/her certificates and required documents to receive the permits. Information for the Expanded Function permit application can be found at www.moefda.org.

PATIENT BILL OF RIGHTS

Patients can expect:

1. To be treated with respect and consideration for medical, dental and oral health care.
2. To be well informed of all aspects of their case.
3. A thorough assessment of their needs.
4. To be treated as partners in care, participating in goal setting and planning treatment.
5. To be informed of appointment and fee schedules.
6. To have appointment times observed.
7. To receive current information and be assured quality treatment.
8. To receive appropriate treatment.
9. To be taught to maintain oral health and how to prevent further dental/oral disease.
10. Reasonable continuity of care between our office and their private dental office.
11. Appropriate and timely referrals for other needed services.
12. To be treated by providers who model good personal health and hygiene.
13. Confidentiality of all information pertinent to their care.

HIPAA REQUIREMENTS

MCC-PV/HSI Dental Department acknowledges and is compliant with the guidelines established by the Health Insurance Privacy and Accountability Act. Every effort is made to protect the privacy and security of patient information at all times. Students and faculty are to abide by the policy at all times. Students must comply with all instructions and procedures related to patient confidentiality and privacy rights. Students will receive training in HIPAA rules/guidelines prior to treating patients.

DISCLAIMER STATEMENT

The policies/rules contained within this manual are not all inclusive; additional information may be relayed in class as necessary. Students are required to follow all rules and policies of the Dental Assisting Program as they are relayed in the Orientation Manual/Handbook, clinic handouts/booklets of instruction and any changes to procedures as announced in class or clinic.

Drug-Free Workplace, Campus & Community Drug Screen Policy

MCC-Penn Valley (the “College”) is committed to maintaining high standards in all programs, including its Allied Health and Nursing Education and practice programs. Safe practice requires efficient, reliable and unimpaired student performance at all times, including in the classroom and in clinical settings. Students are required to perform all education related activities in appropriate mental and physical condition. Being under the influence of illegal drugs or alcohol is not only in violation of MCC’s Student Conduct Code, but it also poses serious safety and health risks to the user and to all persons who come in contact with him/her.

As discussed below, clinical affiliation sites may require students to complete drug screening before they will be placed in the clinical setting and some clinical sites may also require drug screening, with or without cause, during the course of the clinical placement.

As provided below, you may also be asked to complete a drug test according to individual program requirements and/or MCC policy. MCC-PV has adopted the Federal Drug-Free Workplace Act of 1988 and Drug Free Schools and Communities Act Amendment of 1989. The policy is one of zero tolerance. The Code of Student Conduct imposes disciplinary sanctions for the use, possession or distribution of alcoholic beverages and the illegal use, possession or distribution of drugs and controlled substances on MCC premises or at any MCC sponsored activity. A positive drug test may be cause for dismissal from an Allied Health program as well as from the College. Additionally, a positive drug test may cause you to be excluded from all clinical sites and may also preclude you from taking state licensure examinations.

MCC Testing Criteria, Cost & Sanctions

Any Allied Health or Nursing student who demonstrates behavioral changes suspected to be related to the use of drugs, including, but no limited to alcohol, will be required to submit to drug testing. While the Dean’s decision to refer a student for drug testing shall be reasonable under all the circumstances, things upon which the Dean may base his/her determination to require drug testing may include, but are not limited to:

- Observable phenomena such as direct observation of drug use and/or physical symptoms or manifestations suggesting that the student is under the influence of a drug and/or alcohol.
- Erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings and deterioration of work.
- Information that a student has caused or contributed to an accident or near accident, that resulted in personal injury, including death, to a patient/client, fellow student, MCC or clinical site employee or any other person.
- The student’s conviction, being judged guilty of a pleading nolo contendere to a drug, alcohol or controlled substance infraction in a federal or Missouri state court, including municipal and magistrate courts or in a court of any other state having appropriate jurisdiction.

Any Allied Health or Nursing student who is referred for testing shall be responsible for the costs of such testing.

Any student who tests positive for alcohol and/or unlawful drugs or controlled substances for which he/she cannot produce a valid and current prescription is subject to removal from his/her clinical rotation, resulting in his/her inability to complete the program requirements and the consequent removal from the program. In order to uphold the importance of due process, the student in question shall have the right to a full and fair

hearing, including the right to present witnesses and evidence on her/his behalf before the imposition of any such internal program sanction. Of utmost importance is the well-being of patients (if involved). In addition to program sanctions, the student may be suspended or expelled from the College for violation of the Student Conduct Code.

Clinical Site Testing, Sanctions & Cost

As noted above, in addition to MCC-PV testing and potential sanctions, clinical sites impose their own requirements for drug and alcohol testing. Clinical facilities are, like MCC-PV, committed to providing a safe environment in order to protect their patients, residents, employees and visitors; to provide the highest level of service; and to minimize the potential for accidents and injuries. Therefore, many of the clinical contracts between MCC-PV and the hospitals, clinics and other clinical sites and facilities at which MCC-PV places its students for clinical rotations mandate that MCC-PV Allied Health and/or Nursing students complete and pass a drug screen prior to being admitted into the facility for clinical rotations. Other clinical sites require random drug and/or alcohol screening for Allied Health and/or Nursing students.

Apart from a student's internal due process rights, which, as noted above, address the rights of the student vis-à-vis MCC-PV sanctions, the refusal of a student to submit to a clinical site's initial drug screen or to random testing may result in the student's inability to do or to conclude clinical training at the clinical site. Likewise, a positive test may result in the student's immediate removal from the clinical site.

The cost for a drug screen may be covered by the clinical facility. If not, the student is responsible for the cost.

SAFETY AND SECURITY

It is the responsibility of the student to reveal any conditions which might be contraindicated or require special precautions to the course instructor. Information given in confidence will be kept confidential. The student shall not participate in any procedure that would be considered contraindicated for their particular condition. Students will practice procedures with safety being of greatest concern. Students will use equipment in the manner in which it was intended and will report any malfunctioning equipment to the instructor immediately so that it can be removed from student access and appropriately be repaired. Students should be familiar with the college's safety procedures as outlined in the college's student handbook and follow the evacuation plan as posted in the classroom. Students should be familiar with the location of security services on the first floor of the Health Science Institute, and within the first floor of the Penn Valley central campus building. In case of medical emergency, individuals should dial 911 and contact campus security. The cost associated with emergency services will be borne by the individual undergoing medical care. In case of medical emergency at the clinical site, students should follow facility protocol as instructed by the clinical preceptor at the site. Cost for emergency services will be borne by the individual undergoing medical care.

MEDICAL EMERGENCIES AT CLINICAL SITE

In the event of a medical emergency at the clinical site, notify the clinical instructor, Program Coordinator, and the Clinical Coordinator. The instructor will follow that facility's emergency situation policy and/or have the student taken to the emergency room. Students are required to either have their own health insurance or a signed waiver stating that they are responsible for any medical costs as a result of any illness or injury incurred at the clinical site. Documentation of the incident for both the college and the clinical facility will be completed.

ILLNESS AND INJURY

The student is responsible for any expenses incurred due to a medical emergency involving illness or injury, including transportation to a medical facility.

Either of the following exposures could put a student at risk of HIV infection if the exposure involves blood, tissue or other body fluids containing visible blood:

- Percutaneous injury (e.g., a needlestick or cut with sharp object)
- Contact with mucous membrane or non-intact skin (e.g., exposed skin that is chapped, abraded or affected by dermatitis)

After occupational HIV exposure, a short-term course of ARV drugs (e.g., one month) may be used to reduce the likelihood of infection. This is referred to as post-exposure prophylaxis (PEP) and is a key part of a comprehensive universal precaution's strategy during clinical placements.

In healthcare settings the occupational risk of becoming HIV-infected due to a needlestick is low (less than 1%). Most cases involve injuries from needles or sharps that have been used on a patient who is HIV-infected. The risk of HIV transmission from exposure to infected fluids or tissues is believed to be lower than from exposure to infected blood.

Guidelines for providing PEP

Healthcare workers shall report occupational exposure to HIV immediately after it occurs. Early rapid testing of the source patient (the patient involved in the incident) can help determine the need for PEP – and may avert the unnecessary use of ARV drugs, which may have adverse side effects. If necessary, **PEP should begin as soon as possible after exposure, ideally within 2 hours.** Currently, there is no single approved PEP regimen; however, dual or triple drug therapy is recommended and believed to be more effective than a single agent.

The treating physician will determine the treatment period (2-4 weeks) and make the drug selection for PEP based on the following factors:

- Type of injury and transmission device
- Source patient's HIV viral load and treatment history
- ARV drugs available

Some healthcare workers taking PEP experience adverse symptoms including nausea, malaise, headache and anorexia. Pregnant students or women of childbearing age who may become pregnant may receive PEP, but must avoid efavirenz, which has harmful effects on the fetus.

Managing Exposure to HIV

Immediate Steps

Any student exposed to blood or body fluids must take the following steps:

- Wash the wound and skin sites exposed to blood and body fluids with soap and water. Wash for at least 5 minutes using ample soap.
- For injuries that break the skin and where bleeding occurs, allow bleeding for a few seconds before washing with soap and water.
- Topical use of antiseptics is optional.

- Do not apply caustic agents, such as bleach, onto the wound or inject antiseptics or disinfectants into the wound.
- Flush mucous membranes, such as eyes, exposed to blood and body fluids with water.
- Immediately inform the clinical supervisor or person in charge, of the exposure type and the action taken. Call your Clinical Coordinator and/or Program Coordinator to apprise him/her of your situation.

Once informed, the clinical supervisor will:

- Assess the exposure to determine the risk of transmission.
- Call the Clinical Coordinator to update/him/her of the situation so that the following steps can be taken.
 1. Inform the patient and student about the exposure and request permission for HIV testing.
 2. If there is risk of transmission, follow the written protocol of hospital/facility for rapid testing.
 3. If there is not a written protocol, immediately arrange for the patient and student to visit their personal physician. or US Healthworks located at 1650 Broadway, KCMO 64108, (816) 842-2020 during business hours.
 4. If they do not have a personal physician, do not want to go to the US Healthworks or the exposure occurs after hours, send them to the nearest emergency room after gaining permission of the patient and student.
 5. Provide immediate support and information on post-exposure prophylaxis (PEP) to the student.
 6. Record the exposure on the appropriate form/s Incident Report) and forward the information to the individual or department assigned to manage such exposures at the site and send a copy to the student's Clinical Coordinator/Program Coordinator, Dean of Instruction and Risk Manager.
 7. Maintain the confidentiality of all related records.

Please note that the student is responsible for all costs related to post-exposure procedures. The clinical facility may provide the treatment at no cost to the student.

General Guidelines for PEP

- In all cases of exposure, start PEP within 2 hours of the exposure, whether or not patient's HIV status is known.
- PEP is usually discontinued if there is confirmation that the patient's HIV test is negative.
- If the patient is HIV-infected (with a positive test result), continue PEP.
- ARV therapy should be provided according to national or facility protocol. A minimum of two weeks and a maximum of four weeks treatment is recommended. When possible, consultation with a HIV specialist, particularly when exposure to drug resistant HIV may have occurred, is recommended.
- If the student's initial HIV test is positive, counsel the person on the test result and refer to a HIV/AIDS program for care and treatment.

Source: adapted from CDC, 2001. Updated US public health services guidelines for the management of occupational exposure to HBV, HCV and HIV and recommendations for post-exposure prophylaxis. MMWR Morb Mortal Wkly Rep 50(No. RR-11): 1-42. Retrieved 30 July 2004, from <http://www.cdc.gov/mmwr/PDF/rr/rr5011.pdf> and World Health Organization. Post-exposure prophylaxis Retrieved 30 July 2004, from <http://www.who.in/hiv/topics/prophylaxis/en/index.html>

Clinical Guidelines & Requirements (Refer to the DA Program Clinical Manual)

The following will apply to UMKC-SOD, private practice office, specialty or clinic assignment: (See Appendix- MCC CLINICAL PLACEMENT POLICY)

1. Clinical assignments are made by the faculty at MCCPV-HSI and are based on student's educational needs and availability. Consideration is also given to location when possible.
2. The student may not complete a clinical where previously employed.
3. The student may not be paid for their clinical experience.
4. Students may be required to drive within a 50-60 mile radius.
5. Students are responsible for transportation to and from the clinical site.
6. Information about a clinic site is on file.
7. Clinical dentist and/or staff are not paid by the college. Considerable respect and consideration should be given to these individuals that have dedicated their time and energy to educating future dental assistants.
8. UMKC-SOD is considered a clinical site; you are to treat the dental students, dental hygiene students and faculty as professionals. You are to use their titles when addressing these individuals. E.g. Dr., Professor etc.

Requirement before Entering Clinical Rotations (See Appendix - Notice Regarding Clinical Participation Requirement)

1. Have completed CPR.
2. Have completed or begun the Hepatitis B series.
3. Have had a current TB Skin Test.
4. Have completed any other required vaccinations.
5. Have successfully completed the HIPPA and OSHA lecture and exam.
6. Have completed all summer courses with a grade of "C" or better.
7. Completed CBC, drug testing if required and Family Care Safety Registry.

Private Practice and/or Clinical Rotation

Between both semesters you will have acquired approximately 300+ hours experience.

1. Two to three weeks prior to starting your clinic rotation you are required to provide the private practice office or clinic with your "Personal Data Sheet". This information provides the office or clinic with basic information about you. It is also required that you give a copy to your instructor with the date that you mail or have taken this form to your assigned office.
2. It is also recommended that you go visit the office and introduce yourself before you do the rotation.
3. You will be assigned to a general private practice office for no less than eight weeks but could be as long as sixteen weeks. You can remind your office of this.
4. If possible, you may be assigned to a specialty dental office. This could be one of the following: Pediatric, Orthodontic, Surgical, Endodontics or Periodontics. Assignments will be limited in different areas. The instructor will do their best to assign you to your choice. It is possible that depending on the year, no specialty dentist will be available. In this instance, you will stay in the current private practice or may be assigned to a clinic.

CLINICAL POLICIES AND PROCEDURES

PRE-CLINICAL REQUIREMENTS

There are several things that incoming students must complete prior to beginning the clinical portion of the program. Students must complete all requirements and provide appropriate documentation.

1. CPR certification
2. Physical exam
3. Immunizations
4. Initial 2-step and then annual 1-step TB test
5. Criminal background check (CBC)
6. Family care and safety registry background check (FCSR)
7. Drug Screening
8. Hepatitis B waiver or proof of immunization
9. Health insurance waiver
10. UMKC SOD Clinic Orientation Manual – Complete online HIPAA and OSHA Training (For Fall clinicals)
11. Signed confidentiality statement
12. Signed release of information authorization
13. Completed 2 full mouth radiographic survey competency results (For Spring Clinicals)

Many clinical sites have additional site-specific instructions/orientation modules which must be completed when assigned to that facility for clinical rotation

Clinical Student

Clinical Student helps hospitals and schools to focus on education by making it easier to manage placements, rosters, and compliance.

Clinical Compliance Requirements:

On January 1, 2004, the Joint Commission instituted new regulations that must be followed in order for hospitals, home health agencies, clinics, etc., to gain or maintain accreditation status. One of these new regulations requires all persons who are involved in-patient care activities, i.e., employees, volunteers and students must have criminal background checks as well as other healthcare related checks.

In order for you to be placed in a clinical site you must complete a background check with Clinical Student.

Criminal Background Checks

Clinical sites require that only students with an acceptable consumer report, as it relates to criminal background, be allowed to participate in clinical rotations. Therefore, prior to commencing the clinical portion of your program, Metropolitan Community College (MCC) will have a consumer reporting agency, conduct a background check. **You are responsible for completing the online application and paying the cost. Criminal background checks are normally conducted once during duration of the program; however, some clinical sites may require a more current report. You will be responsible for applying online and paying for the cost of the additional background check if it is required by the clinical site.** Inquiries regarding Clinical Student related questions can be directed to MCC Clinical Compliance Coordinator (816.604.4177) or directly to Clinical Student via email at support@system32.com

MCC shall not consider the results of a background check as criteria for admission to any program or course. However, you should know that you will not be able to obtain a license to practice or be allowed to participate in clinicals should you have an unacceptable background as defined by state law regarding health care

providers. An unacceptable background includes, but may not be limited to, a class “A” or “B” felony and/or class “A” misdemeanor conviction.

MCC realizes that the background check ordered by you at the onset of your program is a report of your history only inclusive to the date of your online application and payment for this background check. Should you be convicted of an offense that falls within “unacceptable background” as defined by state law regarding health care providers after you have completed the background check and while you are still in the program it is strongly recommended that you reveal your current status to the MCC Clinical Compliance Coordinator. Your status has changed and your ability to obtain a license and practice and to continue your clinical experiences has been severely compromised.

MAKE sure you read the student guide to using Clinical Student fully because a mistake in completing the online information will delay the completion of the CBC, which will delay your ability to participate in the clinical rotation.

The results of your consumer report will be sent to the Program or Clinical Coordinator via an electronically secure file indicating only an ACCEPTABLE – Pass (P), INCOMPLETE – (I) or UNACCEPTABLE – Fail (F). If you receive an “F”, the Program or Clinical Coordinator will direct you on how to proceed. As noted in the *Summary of Your Rights Under the Fair Credit Reporting Act*, you have the right to request and receive a copy of your consumer report from Validity Screening Solutions.

The turnaround time for the CBC is approximately 48-72 hours, if paid by credit card or paypal. It can take longer for the CBC to be processed (sometimes more than 2 weeks) if paid by money order/cashier’s check. Plan accordingly in order to have the CBC completed so you are ready to start your clinical rotation on time.

If you have any questions, please feel free to contact **Cynthia Ginn at (816) 604-4177** or cynthia.ginn@mccckc.edu. You may also contact Clinical Student with technical questions via email at support@system32.com

FAMILY CARE SAFETY REGISTRY INSTRUCTIONS

The Family Care Safety Registry helps protect seniors, children, and the disabled, by conducting background screenings on long term care workers, childcare workers, and personal care workers. All allied health and nursing students must register with the FCSR before being allowed into the clinical sites. Registering with the FCSR means you will provide personal information and agree to background screenings for employment purposes as defined in state law.

Additional information about this will be provided to you during your program specific orientation. Any Inquiries regarding this can be directed to clinical compliance coordinator.

Immunization/Titer Requirements

The immunization/titer requirements given below are recommended for health care workers by the Centers for Disease Control (CDC). In addition, each Allied health Program is required by clinical contract to submit documentation, which includes immunization/titer results, on all students upon request.

It is the College's policy that all of the following immunization/titer requirements be complete before any student can participate in a clinical experience.

Titer/Immunization Requirements

Hepatitis B

The Hepatitis B Vaccine Official Documentation must be provided for all three injections and/or a titer drawn showing proof of immunity.

OR

A signed Hepatitis B waiver must be on file in the Program Clinical Coordinator's office or other designated office. Note: signing the waiver releases you from having a titer drawn if you have had the 3 injections. It is the choice of the student whether he/she wants information regarding immunity.

Chickenpox (varicella)

Complete an IGG titer. Titer must be dated and the result showing evidence of immunity must be a part of the Official Documentation. (Equivocal or Negative is not acceptable.) If no immunity is present, two immunizations must be taken.

OR

Have two immunizations 4 weeks apart.

Measles, Mumps, Rubella

Complete an IGG titer for each (measles, mumps, rubella). Titers must be dated and the result showing evidence of immunity for each (measles, mumps, rubella) must be a part of the Official Documentation. (Equivocal or Negative is not acceptable.) If no immunity is present, two immunizations must be taken.

OR

Have two immunizations 4 weeks apart.

Tuberculosis Screen

Must have Official Documentation of a current annual skin test (cannot be over one year old). If you have an expired or never had a TB skin test, then the 2 step Mantoux skin test is required. Results must be documented in millimeters of tissue involvement (induration).

If TB test is positive or the student has history of positive skin tests, a Negative Chest X-Ray (less than two years old) is required.

Tetanus-Diphtheria

The initial series is typically given in childhood and boosters are required every ten years. The booster should be of Tetanus-Diphtheria and acellular pertussis (TDaP). If the booster has been given within the last ten years, provide Official Documentation of the date (month/day/year) of the immunization. If the booster is ten years old or older, have the TDaP immunization and provide Official Documentation of the date (month/day/year) of the immunization.

Titers are not acceptable for any portion of TDaP.

Covid-19 vaccination (fully vaccinated prior to beginning clinical rotations)

Influenza Vaccine – Clinical facilities require that all health care workers have an annual flu shot. Documentation must be provided of the date of the immunization, the type of vaccine given, and the signature

of the person administering the injection. Those with allergies to the influenza vaccine (all types) must provide written documentation from the health care provider that indicates the student cannot receive the immunization due to severe and/or life threatening allergy to the vaccine.

Clinical Student documentation requirements –

Official Documentation (lab results) for each titer must be documented in Clinical Student.

Immunization dates (mm/dd/yyyy) must be included in an official document stating the student's name, date of immunization and name of immunization.

An "Official Document" must show the health care provider's name/organization and phone number and have appropriate signatures, for example a physician's prescription pad, an official clinical record. TB testing results must show the student's name, health care provider's name/organization, date placed, date read, results in millimeters induration and have appropriate signatures.

Students are advised to keep copies of all health information for their personal records. This information is subject to HIPAA regulations.

Missouri Department of Health & Senior Services

Jay Nixon, Governor
 Margaret T. Donnelly, Director
[Home](#) » [Licensing & Regulations](#) » [Good Cause Waiver](#)

Crimes Against Persons

Listing of criminal offenses in Section 660.317, RSMo., that are described as crimes against persons:

Criminal Violation	Crime Class	RSMo Section
Abusing an individual through forced labor	B Felony	566.203
Arson in the first degree	A or B Felony	569.040
Arson in the second degree	B Felony	569.050
Assault in the first degree	A or B Felony	565.050
Assault on law enforcement officer in the first degree	A Felony	565.081
Assault on law enforcement officer in the second degree	B Felony	565.082
Burglary in the first degree	B Felony	569.160
Causing catastrophe	A Felony	569.070
Child kidnapping	A Felony	565.115
Child molestation in the first degree	A or B Felony	566.067
Domestic assault in the first degree	A or B Felony	565.072
Elder abuse in the first degree	A Felony	565.180
Elder abuse in the second degree	B Felony	565.182
Enticement of a Child (with prior conviction of this section, sections 568.045, 568.050 or 568.080, or Chapter 566, RSMo)	B Felony	566.151
Failure to report acts of abuse or neglect	A Misdemeanor	198.070.3
Forcible Rape	A or B Felony	566.030
Forcible Sodomy	A or B Felony	566.060
Incest	D Felony	568.020
Infanticide	A Felony	565.300
Kidnapping	A or B Felony	565.110
Murder in the first degree	A Felony	565.020
Murder in the second degree	A Felony	565.021
Pharmacy Robbery in the first degree	A Felony	569.025
Pharmacy Robbery in the second degree	B Felony	569.035

Robbery in the first degree	A Felony	569.020
Robbery in the second degree	B Felony	569.030
Sexual Abuse/Assault (with injury, deadly weapon displayed, victim under age 14 or incapacitated, or forces contact with more than one person)	B Felony	566.100
Sexual trafficking of a child	A Felony	566.212
Statutory rape in the first degree	B Felony	566.032
Statutory sodomy in the first degree	B Felony	566.062
Tampering with a drug prescription order	A Felony	565.350
Trafficking for the purpose of sexual exploitation	B Felony	566.209
Trafficking for the purpose of slavery, involuntary servitude, peonage or forced labor	B Felony	566.206

Revised: January, 24, 2008

NOTE: A conviction of Attempt or Conspiracy to commit a Class A felony is a disqualifying criminal conviction covered under the provisions of section 660.317, RSMo. If the defendant attempts or conspires to commit a Class A felony, then the attempt or conspiracy is a Class B felony.

KSA 39-970 & 65-5117: Prohibited Offenses

Below is the complete list of prohibited offenses. This list of prohibited offenses is subject to modification by the Kansas Legislature. To look up a statute listed below, click on this link. [Look up State Statutes](#)

KSA	Offense	Prohibited?
21-3301	Attempt to commit a prohibited offense ¹	Length subject to underlying offense
21-3302	Conspiracy to commit a prohibited offense ²	Length subject to underlying offense
21-3303	Criminal solicitation to commit a prohibited offense ³	Length subject to underlying offense
21-3401	Murder in the first degree	Yes
21-3402	Murder in the second degree	Yes
21-3403	Voluntary manslaughter	Yes
21-3404	Involuntary manslaughter	5 Years*
21-3406	Assisting suicide	Yes
21-3410	Aggravated assault	5 Years*
21-3411	Aggravated assault on a law enforcement officer	5 Years*
21-3412a(b)(3)	Domestic Battery (felony)	5 Years*
21-3413	Battery against a law enforcement officer (felony)	5 Years*
21-3414	Aggravated battery	5 Years*
21-3415	Aggravated battery against a law enforcement officer	5 Years*
21-3419	Criminal threat	5 Years*
21-3419a	Aggravated criminal threat	5 Years*
21-3420	Kidnapping	5 Years*
21-3421	Aggravated kidnapping	5 Years*
21-3422	Interference with parental custody (felony)	5 Years*
21-3422a	Aggravated interference with parental custody	5 Years*
21-3426	Robbery	5 Years*
21-3427	Aggravated robbery	5 Years*
21-3428	Blackmail	5 Years*
21-3435	Exposing another to a life threatening communicable disease	5 Years*

21-3437	Mistreatment of a dependent adult (misdemeanor or felony)	Yes
21-3438	Stalking	5 Years*
21-3439	Capital murder	Yes
21-3440	Injury to a pregnant woman (felony)	5 Years*
21-3441	Injury to a pregnant woman by vehicle (felony)	5 Years*
21-3442	Involuntary manslaughter while driving under the influence	5 Years*
21-3446	Trafficking	5 Years*
21-3447	Aggravated Trafficking	5 Years*
21-3448	Battery against a mental health employee	5 Years*
21-3449	Terrorism	5 Years*
21-3450	Illegal use of weapons of mass destruction	5 Years*
21-3451	Furtherance of Terrorism or Illegal Use of Weapons of Mass Destruction	5 Years*
21-3502	Rape	Yes
21-3503	Indecent liberties with a child	Yes
21-3504	Aggravated indecent liberties with a child	Yes
21-3505	Criminal sodomy (felony)	5 Years*
21-3506	Aggravated criminal sodomy	Yes
21-3508	Lewd and lascivious behavior (felony)	5 Years*
21-3510	Indecent solicitation of a child	Yes
21-3511	Aggravated indecent solicitation of a child	Yes
21-3513	Promoting prostitution (felony)	5 Years*
21-3516	Sexual exploitation of a child	Yes
21-3517	Sexual battery	Yes
21-3518	Aggravated sexual battery	Yes
21-3520	Unlawful sexual relation	5 Years*
21-3522	Unlawful voluntary sexual relations	5 Years*
21-3523	Electronic solicitation	5 Years*
21-3601	Bigamy	5 Years*
21-3602	Incest	5 Years*
21-3603	Aggravated incest	5 Years*

21-3604	Abandonment of a child	5 Years*
21-3604a	Aggravated abandonment of a child	5 Years*
21-3608a	Aggravated endangering a child	5 Years*
21-3609	Abuse of a child	5 Years*
21-3610b	Furnishing alcoholic beverages to a minor for illicit purpose	5 Years*
21-3612	Contributing to a child's misconduct or deprivation (felony)	5 Years*
21-3701	Theft (felony)**	5 Years*

* Note: This type of conviction is prohibited until five years have passed since the terms of the conviction (sentencing) have been completed.

** Note: A prohibition for this offense became effective on July 1, 2010. Further, an individual shall not be prohibited due to a conviction of Felony Theft if the individual is employed by an adult care home or home health agency on July 1, 2010, and continuously employed by the same adult care home or home health agency.

^{1,2,3} Convictions for attempt to commit, conspiracy to commit, or criminal solicitation to commit any offense listed above which carries a permanent prohibition will result in a permanent prohibition. Convictions for attempt to commit, conspiracy to commit, or criminal solicitation to commit any offense listed above which carries a five year prohibition will result in five year prohibition.

Additional Considerations for Applicant Exclusion

Currently there is no specific list of prohibited offenses that all educational institutions are using to exclude an applicant from a program. Some educational institutions have been referring to either the Kansas Prohibited Offenses list or the Missouri list of Criminal Offenses. (See the following pages for these two documents) We believe that both lists are incomplete with regards to the HealthCare programs. Many important offenses that relate to HealthCare issues directly are not on these lists. Below are some additional considerations you might want to consider.

Additional Considerations for Applicant Exclusion

Federal offenses:

- Fraud involving government contracts/entities (i.e., MediCare)
- Drug Trafficking
- Possession/Distribution of Child Pornography
- Sexual Exploitation of Children
- Failure to Register as a Sex Offender
- Assault

State offenses:

- | | |
|---|--------------------|
| • Child endangerment | Misdemeanor |
| • Sexual assault | Misdemeanor |
| • Sexual battery | Misdemeanor/Felony |
| • DWI/DUI (multiple offenses) | Misdemeanor |
| • Distribution/manufacture of drugs | Misdemeanor/Felony |
| • Fraud | Misdemeanor/Felony |
| • Forgery | Misdemeanor/Felony |
| • Possession of a controlled substance | Misdemeanor/Felony |
| • Intent to sell/manufacture a controlled substance | Misdemeanor/Felony |
| • Assault with a deadly weapon | Misdemeanor/Felony |

APPENDICES



Health Science Institute

Dental Assisting Program

Please P-R-I-N-T YOUR NAME: _____

WAIVER OF HEALTH INSURANCE COVERAGE

I acknowledge that THE JUNIOR COLLEGE DISTRICT OF METROPOLITAN KANSAS CITY, MISSOURI (the DISTRICT) does not maintain any health insurance or hospitalization coverage for me. furthermore, neither the District nor the agency in which I am affiliated as a student have any free health care with respect to any illness or accident while I am participating in the activities of the District's _____ Program.

I hereby waive and release the District and the affiliating agency from any and all claims or responsibility for insurance and/or hospital or health insurance benefits for health care services as well as for costs and expenses that I may incur for health care services with respect to any illness or accident I may suffer as a result of my participation in the district's _____ Program.

Signature

Date

**Consent to Drug/Alcohol Testing &
Release of Liability Form**

I have read, understand and agree to MCC-Penn Valley's Drug-Free Workplace, Campus and Community Drug Screen Policy in accordance with which I may be required to undergo drug/alcohol testing both by MCC-Penn Valley and by any clinical site to which I may be assigned as part of my clinical rotation. A positive test may not only cause me to be excluded from clinical placement but may also result in my removal from the Allied Health or Nursing program to which I have been admitted and may cause me to be suspended and/or expelled from the College. I understand that if I have tested positive I may not be permitted to take any state licensure examination.

My signature below indicates that:

1. I consent to the testing as outlined in the Drug-Free Workplace, Campus and Community Drug Screen Policy.
2. I understand that I may be responsible for all costs incurred with the drug testing.
3. I hereby release and hold harmless the Metropolitan Community College (MCC), including MCC-Penn Valley and MCC's Board of Trustees, employees and agents from any and all claims arising from the administering of any test, the analysis of test results and the use and disclosure of test results; provided, however, this release and hold harmless shall not apply to intentional torts, gross negligence or activities involving the public interest.

My signature indicates that I have read and understand this consent and release form and that I have signed it voluntarily.

Print Name

Student's Signature / Date

Hepatitis B Waiver

I understand the vaccine is strongly recommended for health care workers but is not required. I waive the right to receive the Hepatitis B, Heptavax vaccine.

Print Name

Signature / Date

Infectious Disease Policy

Dental Assistants Doing Health Care Work

The risk of contracting Hepatitis B and/or C etc.; or other infectious diseases are greater than the risk of contracting HIV. Therefore, recommendations for the control for Hepatitis B and/or C etc., infections will effectively prevent the spread of AIDS. In such recommendations are, therefore, incorporated herein.

1. Sharp items (needles, scalpel blades and other sharp instruments) shall be considered as potentially infective and should be handled with extraordinary care to prevent accidental injuries. Proper disposal of sharp items according to OSHA (Occupational Safety and Hazard Administration), guidelines shall be followed.
2. Disposable syringes and needles, scalpel blades and other sharp items should be placed in puncture resistant containers located as close as practical to the area in which they are used. To prevent needle stick injuries. Needles shall not be recapped, purposely bent, broken, removed from disposable syringes or otherwise manipulated by hand.
3. When the possibility of exposure to blood or other body fluids exists, routinely recommended is universal precautions should be followed. The anticipated exposure may require gloves alone, as in handling items soiled with blood or other body fluids, or may also require gowns (PPE – Personal Protective Equipment), mask and eye coverings, when performing procedures where splashing is possible. Hands should be washed thoroughly and immediately washed if they accidentally become contaminated with blood or body fluids.
4. To minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags or other ventilation devices should be located and available for use in areas where the need for resuscitation is predictable.
5. Pregnant Dental Assisting students or students engaged in health care, are not known to be at greater risk of contracting the HIV virus than students who are not pregnant. However, if a student develops infection with the HIV virus during pregnancy, an infant has an increased risk of infection through prenatal or prenatal transmission. Because of this risk, pregnant students should be especially familiar with precautions regarding the HIV virus.
6. For Dental Assisting students engaged in health care who have been diagnosed as HIV positive, there is an increased danger from infection due to disease. Students, who are HIV infected, are at risk of acquiring or experiencing serious complications of such disease. Of particular concern is the risk of severe infection following exposure to patients with easily transmitted infectious diseases (e.g. tuberculosis or chicken pox). HIV infected students will be counseled about potential risk associated with exposure to or taking of patients with transmissible infectious disease and should continue to follow universal precautions to minimize the spread of exposure to other infectious agents.
7. The Dental Assisting student's physician, in conjunction with the appropriate college officials, will determine on an individual basis whether the student who is HIV positive, with symptoms, can adequately and safely perform patient care.

8. A Dental Assisting student with an infectious disease who cannot control bodily secretions and students who have uncoverable oozing lesions will not be permitted to participate in health care services. The determination of whether an infected student should be excluded from providing health care should be made on a case by case basis by the student's physician and the appropriate college officials.

9. Dental Assisting students who are exposed to infectious body fluids, sticks from sharps in the clinical area must report to the clinical instructor immediately. The clinic and/or dental office protocol followed.

Print Name

Date

Signature

Pregnancy Policy

Introduction

A number of studies suggest that during the first three months of gestation, the embryo/fetus may be more sensitive to ionizing radiation than an adult. The National Council on Radiation Protection and Measurements (NCRP) recommends that the maximum permissible dose due to the fetus from occupational exposure of the expectant mother should not exceed 100 millirems. This is approximately one-tenth of the maximum permissible occupational dose limit.

Based on past experience, no pre-clinical assignments have been identified which would be considered likely to result in a dose to the fetus exceeding 100 millirems, provided that established radiation safety procedures are followed.

Pregnant students are, therefore, allowed to work in and frequent radiation areas. Pregnant students may also operate radiography equipment.

Procedures

A student who becomes pregnant while enrolled in the Dental Assisting program may elect to divulge her condition or may choose to keep her condition undisclosed to program faculty. A student who initially disclosed a condition of pregnancy may, at any time, resend this disclosure. This statement of resending must be made in writing and given to the Program Coordinator.

The program encourages each student to reflect on the demands of this rigorous academic and clinical program in the event that she should become pregnant while enrolled in the program. All students are required to complete specific clinical competencies in their clinical courses. Due to the physical nature of these competencies and the associated potential for radiation exposure, the pregnant student is advised to consult their physician about the advisability of continued participation in the program.

Students who disclose their pregnancy are required to:

1. Disclose their estimated due date. Failure to inform the course coordinator and program coordinator/lead instructor in writing as soon as the pregnancy is confirmed may result in potential harm to the fetus; therefore, it is the responsibility of the student to inform the department and the department will assume no liability.
2. Provide to the program coordinator a letter, signed by their obstetrician, stating that they have no medical restrictions and are cleared to continue their participation in the program. This letter needs to be sent to the program coordinator in a timely manner as soon as pregnancy is disclosed.
3. Wear a second dosimeter provided by the program to monitor fetal radiation exposure monthly.
4. Maintain a radiation exposure fetal dose at or below 0.1 Rem.

REQUIREMENTS:

Pregnant student continuing in the program would require to:

- a. Turn in letter from her obstetrician (as mentioned above), disclose their due date.
- b. Demonstrate all competencies necessary for graduation the same as is expected of every student.
- c. Meet regular attendance requirements for all courses. Exceeding the absence policy or excessive tardiness cannot be excused due to a pregnancy.

- d. To accept personal responsibility for protection of the embryo/fetus during the pregnancy. An operator's lead apron and dosimeters are available for the student to wear during radiographic exposures should she so choose to do so.
- e. A requirement that liability is waived thereby releasing Metropolitan Community College-Penn Valley, its Board of Trustees, faculty, staff, administration, clinical affiliates and all other individuals involved with the Dental Assisting Program from all liability related to the use of ionizing radiation while the student is enrolled in the Dental Assisting Program.
- f. Acknowledge that Dental Assistants are classified as occupationally exposed dental health care workers to ionizing radiation.
- g. Not physically hold a patient for radiographic procedure which in any case is not allowed by a Dental Assisting student.
- h. Acknowledge that they will not be able to operate mobile radiographic equipment at any affiliation site and at any time.
- i. Not be in the treatment room during the exposure of a patient to ionizing radiation which in any case is not allowed by a Dental Assisting student
- j. The student being required to:
 - Setup the room and patient for radiographic procedures
 - Set the controls and position the equipment
 - Process and mount the radiographs
 - Clean and prepare the room for the next student to setup
 - Critique and submit radiograph for a grade

RELEASE AND WAIVER OF LIABILITY – FETAL HARM

I, _____ understand that ionizing radiation poses a potential risk of harm to an embryo or fetus during pregnancy.

I agree that I have had sufficient opportunity to read and understand the above document.

I agree to submit written documentation from a physician regarding my pregnancy according to the requirement above.

I agree to submit written documentation in a timely manner to the program director according to the requirements above.

I agree that I have read and received a copy of the Pregnancy Policy Informed Consent.

Student Printed Name

Student Signature

Date

Student Confidentiality Statement

Objective:

To preserve the medical record and hold inviolate the privilege contents of the record and any other information of a confidential nature including paper and/or computerized record.

Policy:

The medical record is the property of the health care facility, while the personal data contained in the record is considered confidential communication in which the patient has a protectable interest. It is compiled, preserved and protected from unauthorized inspection for the benefit of the patient, clinic and dentist.

It is the responsibility of each DENA student not to discuss any confidential information with any individual, inside or outside of the office, clinic or classroom except such discussion that is part of the performance of the duty or class work.

Computer generated information, whether of a medical, personal or financial nature is considered confidential information and is subject to the same restraints regarding discussion and disclosure.

Any violation of this policy may result in disciplinary action up to and including possible dismissal from the program.

I have read the above and understand that I must not disclose confidential information, except as such disclosure is part of the performance of duties related to the classwork. I further understand that such disclosure may result in disciplinary action up to and including possible dismissal from the program.

Print Name

Date

Signature

Informed Consent for Classroom Activities

Informed consent regarding participation in classroom activities

I, _____, understand that students will be expected to perform Dental assisting skills on each other.

I am willing to participate in these activities. This agreement is voluntarily executed and by signing, I so state.

I will inform the instructor of any condition which may be considered a precaution or contra-indication for a particular procedure and will thereby be excused according to instructor's direction.

I understand that if I become ill or injured, my condition may require a physician's release for return to school or clinicals.

I will demonstrate professionalism in the lab by careful administration of procedures and consideration of the privacy, modesty, and respect of other students

Student Signature

Date

Name (please print): _____

SOCIAL MEDIA POLICY

Students in clinical experiences are acting in the role of a health care provider and are required to maintain patient's privacy and confidentiality of medical information. Students, therefore, are not to mention any information or post images related to the clinical experience, clinical site, patient care, personal information or images of any patient on any internet social media site (e.g. Facebook, Twitter, emails, etc.).

Students should be mindful that removal of patient's names is inadequate to protect patient privacy. Inclusion of identifying factors such as race, age, diagnosis dates treatment, clinical sites may disclose patient identity. Students should, therefore, exercise caution in social media posting to ensure they are maintaining patient confidentiality.

Inappropriate behaviors related to patient privacy and confidentiality is prohibited and can result in dismissal from the program.

Print Name: _____

Date: _____

Signature: _____

Notice Regarding Clinical Participation Requirement

During the pre-admission’s application process with the Metropolitan Community College Dental Assisting (DA) Program, you were advised that you must successfully complete clinicals in order to graduate. It was explained that certain hospitals, clinics, public health centers in the Kansas City Metropolitan area afford MCC students the privilege of participating in onsite clinicals at each site, subject to the student’s agreement to abide by applicable hospital policies and procedures, which may include, but are not limited to, drug screening requirements, vaccination requirements, and criminal background checks, among other precautionary measures aimed at protecting the health, safety, and welfare of the hospital’s patients, employees and staff, and the public at large.

MCC is a separate organization from its clinical site affiliates. Each are governed by different internal policies and procedures and subject to entirely different state, federal, and local laws and regulations. While MCC does not require proof of vaccination for its students in the DA Program to enroll and attend classes at MCC, MCC has no standing or authority over a third-party organization’s vaccination policy and cannot make any promise, representation, or assurance to you regarding placement with a clinical site in the event such site refuses to grant you an exception to their internal requirements.

Simply put, this means you run the risk of being admitted to MCC’s DA Program but ultimately cannot graduate if you cannot complete the prerequisite clinical component.

Since you’ve informed MCC you will be requesting a **religious** exemption regarding vaccinations, through your acceptance of a seat in the Metropolitan Community College DA Program, that clinical placement is *not* guaranteed and **is entirely the decision of each clinical site**. You are also acknowledging that this poses a significant risk to completion/graduation. An entire semester is dedicated to clinicals that are held in hospitals. All clinicals must be successfully completed in order to graduate. It is up to the clinical site to make decisions regarding placement of students. Their decision is autonomous; it does not involve the faculty or staff of the Metropolitan Community College DA program.

We trust, having been fully informed of the risks outlined herein, you nonetheless—both knowingly and voluntarily—wish to accept a seat in the DA Program.

Dental Assisting Student Name: _____
Print Signature

Dental Assisting Program Coordinator: _____
Signature

Date: _____

STATEMENT OF COMPLIANCE

I have read this student code of conduct for the Dental Assisting Program conducted at Metropolitan Community College - Penn Valley, in its entirety. I understand the policies and procedures and agree to comply with each and every one of the policies and procedures as stated. I understand that failure to comply with this code of conduct may result in grade penalties and/or disciplinary action.

Signature: _____

Date: _____

Printed name: _____

Student ID: _____



Student Self Evaluation/Mid-Term Conference Form

Student Name: _____ **Semester:** _____

Instructions: Student should review information received from DA faculty and make a plan for improvement in areas indicated to them:

1. Communicates effectively with others verbally and non-verbally

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

2. Communicates effectively in written format

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

3. Demonstrates knowledge of dental assisting content

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

4. Demonstrates competency in various dental materials lab/ chairside assisting techniques

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

5. Exhibits professional qualities: initiative, judgment, flexibility, tact, promptness, attendance, responsibility

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

6. Reflects core values of dental assisting profession: accountability, compassion and caring, cultural competence, duty, integrity and social responsibility

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

**CONSENT TO DISCLOSE INFORMATION FROM STUDENT EDUCATION RECORDS
Under The
FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT**

I. Records to Be Disclosed

In order for hospitals, clinics, and other types of health agencies to gain or maintain accreditation with The Joint Commission (TJC), all employees, volunteers or students working at those entities must have criminal background checks as well as other healthcare related checks. I have undergone such a criminal background check. By executing this form, I am hereby consenting to the release of the results of that background check for the purpose indicated below, regardless of the information contained in it and its impact on my ability to be placed in a clinical setting.

II. Purpose of the Disclosure

In order to complete the prerequisites for my academic program at Metropolitan Community College (MCC), I must successfully participate in a clinical component of that program at one of the health agencies covered by the above-described TJC requirement. Undergoing the criminal background check and providing its results to the health agency where MCC proposes that I be placed will allow that agency to make a determination as to my qualifications for placement and to thereby comply with the TJC requirement.

III. Party or Class of Parties to Whom the Disclosure May Be Made

I authorize MCC to release the results of my criminal background check to any and all health agencies at which it is attempting to place me for the clinical component of my academic program.

I understand that it is the sole decision of the health agency being considered for my clinical placement whether to approve or deny the clinical portion of my educational program. Also, if my background check reveals some criminal history by me, I have been advised to call the State Department of Health and Senior Services to inquire about the possibility of being denied the opportunity to sit for the licensure exams and have been further advised to inquire with possible future employers as to any limitations there may be to employment opportunities in light of any criminal history that I may have.

IV. Decision as to Copy of Record Released (insert initials in appropriate space)

I _____ do _____ do not request a copy of any record disclosed pursuant to this consent.

Signature: _____

Date: _____

Printed name: _____

Student ID: _____

Acknowledgments Form

Clinical Placement

I understand that Clinical Placements are based on availability and that I may not request a specific clinical site. I acknowledge that my clinical experience assignment may be located in any area throughout Metropolitan Kansas City. Due to the large geographic area that Kansas City encompasses, I may need to drive fifty(50) or more miles one way to a clinical site. The MCC Health Science Programs work diligently to ensure placement and scheduling of all students into an appropriate clinical site. However, there may be circumstances beyond our control that arise that limit or restrict students from being assigned to a given or proposed clinical site which may impact program completion.

Clearance for Patient Care

I understand that should I experience a medical condition that interferes with the safe care of patients during my clinical experience I must notify appropriate MCC faculty and administration and be medically cleared before returning to patient care activities at a clinical site.

Health Insurance Waiver

I understand that neither Metropolitan Community College (MCC) nor any clinical affiliates provide health care insurance for me. I hereby waive and release MCC and any clinical affiliates from responsibility for insurance and/or for health care services that may be required with respect to any illness or injury I may suffer as a result of my participation in a clinical experience.

Licensure

I understand that the state licensure boards have the responsibility of determining that each applicant who will practice as a professional healthcare provider /nurse have good moral character as required by Missouri law. The Boards have the legal right to deny licensure to individuals found to have violated the Missouri Nurse Practice Act, or any local, state or federal law.

A record of a felony conviction is a factor which must be considered by licensure boards while applying to sit for the licensure examinations.

Student Name Printed

Date

Student Signature

Date



Penn Valley

Health Science Institute

Dental Assisting Program

Release of Information for Clinical Rotation and Program Participation

Purpose

The purpose of this document is to set forth the process and procedures relating to the conduct of criminal background, immunization and drug screening for students enrolled in programs of the Metropolitan Community College Penn Valley Health Science Institute (HSI) that involve clinical placements. In order for hospitals, clinics and other types of health agencies to gain or maintain accreditation with The Joint Commission (TJC), all employees, volunteers or students being provided a clinical experience at those entities must have criminal background checks and meet clinical site requirements. Except for use in placing the student in a clinical experience, all background reports are considered confidential.

Requirements

Criminal Background Checks

The MCC HSI requires that all students complete a criminal background check prior to enrolling in their first clinical course.

MCC will not use the results of a background check as criteria for admission to any program or course. However, HSI may not be able to place a student with an unacceptable background in a health agency for a clinical experience. Students who do not complete a criminal background check are ineligible for placement in most clinical agencies.

The inability to participate in a clinical experience will result in the student being unable to progress in his or her particular program. Further, a criminal background check may be a prerequisite to taking the licensure exam for employment in a particular health field. It is the student's responsibility to know whether he or she will be eligible for licensure or if a conviction will prohibit him or her from being licensed and employed in the health care industry.

Procedure

MCC HSI uses _____, a credit reporting agency, to conduct background checks. The student is responsible for completing the online application and paying the cost. The required application is available at www._____

Criminal background checks from previous employment or other sources are not acceptable for meeting the background requirements.

Criminal background checks are normally conducted once during the program; however, some clinical sites may require a more current report. Also, an updated national criminal background check will be required for any student being readmitted or transferring to the program.

Medical Requirements

Off-campus clinical facilities may require medical information on students in programs with clinical assignments. MCC HSI is responsible for providing the clinical facilities with medical information that may include vaccinations, medical test and drug screens. The clinical facility may also require copies of this information.

Student Records

Pursuant to requirements of the Family Educational Rights and Privacy Act (FERPA), concurrent with completing the online application for a criminal background check, the student shall complete a form consenting to the disclosure of the results of the check for purposes of clinical placement.

For the protection of privacy, the results of the student criminal background check will not be kept as part of the student’s academic records. Instead they will be accessed electronically and/or kept in a locked file until destroyed.

Authorization

I authorize Metropolitan Community College Penn Valley Health Science Institute to release and disclose any and/or all pertinent medical and criminal background and other personal information as indicated above to the clinical facility which may require it as a condition of my assignment to the facility.

I understand that if I refuse to release the information described above I may be denied or withdrawn from a clinical placement and become unable to complete the clinical requirements of the program.

I have also read and understand that I agree to a criminal background check completed and have the results reviewed by authorized MCC employees and share with affiliating healthcare facilities.

Student Name Printed **Date**

Student Signature **Date**



**Metropolitan
Community College**

Penn Valley

Health Science Institute

Dental Assisting Program

PHOTO-VIDEO-AUDIO CONSENT AND RELEASE FORM

I, , do hereby consent and authorize the Junior College District of Metropolitan Kansas City, Missouri aka Metropolitan Community College (MCC), its employees, representatives, and agents to take audio and video recordings, as well as photographs (collectively “Recordings”), of me during my participation in any class, training session, or activity conducted by the MCC with the understanding that these Recordings may be utilized for MCC marketing purposes, and include, but not be limited to, advertising on any and all MCC and related websites and other local and national advertising venues.

I do hereby assign to said parties all right, title, and interest in and to all such Recordings and acknowledge that I am not entitled to any form of payment for the use of said Recordings and that no promises have been made to secure my signature to this consent and release.

I release MCC and its employees, representatives, and agents, including any firm or person authorized to publish and/or distribute a finished product of the Recordings, from any claims, damages, and liability, including the invasion of the right of privacy, and waive any and all claims that I may forever have in connection with the taking and/or use of the Recordings.

I attest and verify that I am eighteen (18) years of age or over and by signing below I indicate that I have read this document and that I understand and agree to abide with the content in its entirety.

Print Name

Date

Signature



**Metropolitan
Community College**
Penn Valley

Health Science Institute

Dental Assisting Program

Student Grievance Form

<u>Class</u>	<u>Lab</u>	<u>Clinic</u>
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Name of Student: _____

Date of Occurrence: _____

Explanation of Grievance:

Student Signature: _____

Date: _____

Program Coordinator Signature: _____

Date Received: _____

(If Program Director is not available, turn in the form to Program Director's mailbox in room HS 410)

SITUATION REPORT

Re :

Student Name:

Date of Incident:

Date of the Meeting:

Occurrence Site/Course:

Contact /Relevant Person:

Initiator or Report (coordinator/instructor):

Description of Situation:

Student's Comment of Situation:

Type of Disciplinary Action Taken:

- | | |
|--|---|
| <input type="checkbox"/> Verbal counseling regarding deficiencies | <input type="checkbox"/> Written warning of deficiencies |
| <input type="checkbox"/> Withdrawal/Dismissal from program– Instructor initiated | <input type="checkbox"/> Interruption of training(pending review) |
| <input type="checkbox"/> Withdrawal from program– Student initiated | <input type="checkbox"/> Student may reapply to program |
| <input type="checkbox"/> Student ineligible to reapply– Reason:_____ | |

Improvement Plan/Student Outcome Expected *(Recommendations are provided to make the student aware of their deficiencies and to provide an opportunity for the student to correct those deficiencies):*

Coordinator and/or Instructor Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

Student Performance Improvement Plan (PIP)

Student Name:

Student ID:

Date of Graduation:

Student performance concerns identified:

Student objectives that will support successful completion of the program:

Student Objective for performance improvement	Measurement of progress and success	Time frame for completion	Support requested to assist student in meeting the established objective	Objective met or not met

Student Signature Date

Faculty Signature Date

Program Coordinator Signature Date

Student Conference Form

Student's Name:

Date/Time:

Reason for Contact:

Relevant Factors:

Recommendations (*Recommendations are provided to make the student aware of their deficiencies and to provide an opportunity for the student to correct those deficiencies*):

Student Comments:

A signature on this document does not imply agreement with the content. A signature confirms that the information was presented to the student and the student had an opportunity to discuss the issues with the instructor.

Student Signature Date

Instructor Date

Program Coordinator Date

Completion Statement

I understand Admission to and graduation from the Dental Assisting Program does not ensure eligibility for state or national licensure/certification nor does it guarantee successful completion/passing the licensure/certification examination.

Student Signature

Date

Name (please print): _____

STUDENT STATEMENT OF UNDERSTANDING

Read the following statement before signing:

I have received the MCC-PV Dental Assisting Handbook and it has been explained to me. I have read this Handbook in its entirety and agree to be responsible for all the data therein.

I agree to abide by all the rules, policies and procedures of the program and the college. I am also aware that this handbook is intended as a guide and those policies and procedures described herein may be changed with notice if possible.

Print Name

Date

Signature