SCHOOL of SCIENCE AND ALLIED HEALTH

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Julie Rodriguez, RDA, CDA
Adjunct Faculty

Melissa Walker, RDA, CDA, BS
Adjunct Faculty

Sandra Wheeldon, RDA, CDA, OAP
Adjunct Faculty

Barbara Beale
Administrative Assistant

Stan Marsant
Clerk
Students are encouraged to follow this guideline when seeking assistance with courses or issues that may occur during the program.
Memorandum of Understanding

This manual is intended to serve as a reference for students in the Dental Assisting Program at Sacramento City College, as well as for faculty members associated with this program. Important information on policies, procedures, and requirements relevant to academic and clinical education of dental assisting students is included. With written notification to students, the information in this manual is subject to change. The Sacramento City College website and/or catalog should also be consulted for program information and current college policies and procedures.

My signature below confirms that faculty have explained the contents of the Dental Assisting Program Manual herein and that I have read and understand my duties and responsibilities as a student in the Dental Assisting Associate Degree and/or Certificate Program.

__________________________________________  ____________
Student Signature                                      Date

__________________________________________
Printed Name

__________________________________________  ____________
Program Coordinator’s Signature                        Date

NOTE: Upon submission of this memorandum of understanding, any reference or implication for lack of policy knowledge on the student’s part during the program will not be an accepted defense.
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SECTION ONE
New Student Packet
Dear Dental Assisting Student:

Congratulations! You have been selected for the Dental Assisting Program for the 2018-2019 academic year. The staff and faculty of the Dental Health Department would like to take this opportunity to welcome you to the Dental Assisting Program at Sacramento City College. Enclosed is information regarding program expectations, estimated expenses and registration requirements.

The primary emphasis of this program is to get you prepared for your future career in dentistry. To this end, we believe that it is vitally important to not only encourage, but expect, the same professionalism and work ethic in the dental program here at SCC that will be required of you as an employee in a dental office. All policies and procedures have been created with this concept in mind.

This is a full-time program and is approximately 10 months in length. Students are discouraged from working more than 15 to 20 hours per week in order to be fully committed to success in the program. Attendance is required at each class, laboratory and clinic session. Classes move fast so absences or tardiness will make it difficult or impossible to keep up with the information. All doctor, court, or other critical appointments should be scheduled at times that do not conflict with school. Illness or emergencies, of course, may be unavoidable. See page 40 for a thorough explanation of our attendance policies. As will be expected of you on the job, notification must be made to “your employer” (the Program Coordinator) PRIOR to all absences in order to maintain your position in the program and provide for open communication and a smooth flowing “office.” All missed class time must be made up and will be scheduled with the Program Coordinator.

School activities and projects will require you to spend extra time outside the normal school schedule. Activities requiring outside time include extra clinical time, community projects, outside lectures, clinical observations, conventions, and meetings.

Acceptance into the Dental Assisting Program does not enroll you into the college. You must apply and enroll through the college’s Admissions and Records office. Enrollment fees must be paid at the time of registration. Your position in the Dental Assisting Program will not be completed until enrollment is completed and your fees are paid. If you are considering obtaining Financial Aid to help with your expenses, you should apply immediately at the FINANCIAL AID OFFICE on campus. Paperwork generally takes over six weeks.

Approximately $4000 for supplies, uniforms, books, enrollment fees, etc. will be needed for the entire program. The largest percentage of that $4000 was for your instrument issue. This fee, along with your malpractice fee of $15 should already have been paid and is non-refundable; there are no exceptions.

Students not currently certified in CPR are required to obtain Health Care Provider Certification before the first day of instruction. The intent is for you to obtain a two year certificate which will last you through the entire program and the first few months of employment in a dental office upon graduation.
We will be taking this course as a class together sometime during the summer. If you are unable to attend that class, you will have to take it on your own. Be sure that it is American Red Cross or American Heart Association sponsored and is the HealthCare Provider Certification.

Due to the nature of the program, the duties required of an Allied Dental Health Professional (ADHP) and the close personal contact with patients during this program, it is required that students have a complete physical examination before the beginning of the school term. You will not be allowed into class without this completed examination form. You should schedule an appointment immediately since it sometimes takes weeks or months to get an appointment for a physical exam.

For your protection, all students are highly encouraged to receive the Hepatitis B vaccine. The cost for the three-injection series can vary greatly from office to office. Please talk to your physician about this vaccine during your physical exam. You will be asked to sign a release form stating that you have either had the vaccine, that you are in the process of receiving the vaccine, or that you are declining the vaccine. If you already have had the vaccine, ask your physician if you need a titer, which is a blood draw test to ensure you are still immune.

All students are required to be tested for Tuberculosis. This can be done for a $5.00 charge, per test, at the SCC Health Office in the Rodda North building or at your physician’s office during your physical examination. For dental health students, the one-step process is required (please check with your physician regarding the one-step process procedures).

If a health condition is present which impedes or limits the students’ ability to provide patient care or limits the students’ physical capacity, the Program Coordinator must be notified. Such health conditions include but are not limited to TB, pregnancy, hepatitis, infectious diseases, physical injuries or disabilities. The student may be asked to consult his/her physician if health conditions appear to be impeding performance in course work and/or may be asked to withdraw from the program if health conditions warrant such an action.

During classroom or clinical experiences, students may be exposed to hazardous or radioactive materials, radiation, or infectious diseases. Students will be provided information on associated health risks and appropriate safety precautions and will be expected to utilize appropriate safety precautions in the classroom and clinical setting.

Students will practice skills on each other in a laboratory setting with instructor supervision. All students are expected to participate both as a clinician and as a patient.

This program may include discussion of issues such as race, religion, sexuality, disability, and gender as related to course content.

We look forward to seeing you for the Program Orientation day, Saturday, August 25, 2018. There is much more information to come!

Welcome Aboard!
CIRCLE ONE

Yes  I WILL accept a position in the dental assisting program beginning Saturday, August 25, 2018.

Yes  I intend to enroll in DAST100 Intro to Dental Assisting May 21-30th
TAKEN  I have already taken the DAST100 Intro to Dental Assisting class
No  I cannot enroll in DAST100 Intro to Dental Assisting in May

No  I WILL NOT be able to accept a position at this time. (Just sign the bottom and return via e-mail.)

FEES
I understand that approximately $4000 will be required for the 11 month program and that my instrument issue fee of approximately $2700 is due to the college bookstore for my instrument issue and $15 to the business office for my malpractice insurance by Friday, MAY 4, 2018. (Ask for two receipts for each of these transactions. We will need one at the first orientation.)

INTRODUCTION TO DENTAL ASSISTING
I also understand that though not a pre-requisite, I am HIGHLY encouraged to enroll in and attend the DAST100 Introduction to Dental Assisting class to be held May 21, 22, 23, 24, 29, and 30 from 9am to noon.

MANDATORY ORIENTATION
I understand that I must attend a MANDATORY orientation meeting on Wednesday, May 30th from 9am to 12pm in the Dental Assisting classroom.

Print Name: ________________________________
Address: ________________________________
                                       ________________________________
Telephone Number: ________________________________
E-mail address: ________________________________
Signature: ________________________________

No  I WILL NOT be able to accept a position at this time.

Print Name: ________________________________
Signature: ________________________________
FINANCIAL OBLIGATIONS

ALL FEES LISTED BELOW

ARE APPROXIMATIONS!

1. Enrollment fees (unless qualify for Bog Fee Waiver) $600 / semester
   a. Parking
   b. ID Card
   c. Per unit costs

2. Uniforms $150
   a. You will be wearing scrubs each day
   b. The color and style has been pre-determined (see flier enclosed)
   c. Your uniform requirement includes a black labcoat (see flier enclosed)

3. Textbooks $500
   a. Required for fall semester
      i. Modern Dental Assisting, Bird & Robinson, 12th ed.
      ii. Dental Radiography, Principles and Techniques, 5th ed.
          ISBN# 978-0-323-29742-4
      iii. Patient Assessment Tutorials, 4th ed.
      iv. Dental Terminology, Dofka, 3rd Ed.
          ISBN# 978-1-133-01971-8
      v. Dental Assisting Notes Pocket Guide
         ISBN# 978-0-8036-3822-8
   b. Required for spring semester
      i. Practice Mgmt for the Dental Team, 8th ed.
         ISBN# 978-0-323-17143-4
      ii. Practice Mgmt for the Dental Team, 8th Ed. Workbook
          ISBN# 978-0-323-17147-2
   c. Optional
      i. Dental Instruments, A Pocket Guide, 3rd ed. (optional)

4. Malpractice Insurance $15

5. Physical examination w/ vaccinations $150

6. Instruments / materials $2700

7. Background check / finger printing $103

8. Board exam fees $810
   (These fees are not included in the $4000 approximation for the program.)
   a. DANB ICE & RHS Examinations - $325 – fall semester
   b. DANB General Chairsde Examination - $250 – upon graduation
   c. DBC Registered Dental Assisting Examination - $235 – spring semester
In addition to the expenses listed above, you will also need to provide some general items not included in your instrument issue:

1. Plastic clipboard (Needs to be plastic so it can be treated to avoid cross contamination)
2. PLAIN or ROUND Magnetic clips or small magnets for our metal walls in clinic (To hang papers)
3. Multi-colored pen (blue/black/green/red)
4. Small tube/jar of non-petroleum based lubricating agent
5. Large hand mirror for patient education
6. Timer (with minutes and seconds)
7. Patient Sunglasses (Adult & Child -- for clinic)
8. Black sharpie pen
9. Small white dry erase board with markers
10. Highlighters in various colors
### MANDATORY ORIENTATION:
Saturday, August 25, 2018 from 9:00am – 12:00pm

### FIRST SEMESTER:
August 27, 2018 – December 20, 2018

### SECOND SEMESTER:
- **First Externship:** January 22, 2019 – February 22, 2019
- **Spring Classes:** February 25, 2019 – May 3, 2019
- **Board Prep Course (DAST118):** May 6, 2019 – May 17, 2019

### SUMMER SESSION:
- **Second Externship:** May 20, 2019 – June 14, 2019

### Externship:
As part of your dental assisting education, you will participate in two sessions of clinical experience: one during the first 5 weeks of the second semester and the other immediately following the second semester. Selection of the clinics or private offices for this experience is made on the basis of where the student will receive the best education. Clinical experience is **a full-time commitment** so **employment during regular business hours is not possible for these weeks.** You will be expected to provide your own transportation for clinical experience, so this expense should be considered when planning for the coming school year.

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The **GREEN** shaded classes represent lecture only classes (no attached lab).
The **YELLOW** shaded classes represent x-ray labs and lecture. (You will take ONE lab and the lecture class.)
The **PINK** shaded classes represent your chairside labs and lecture. (You will have EITHER Monday afternoon or Tuesday morning AND Thursday morning along with the lecture.)

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#### FALL SEMESTER

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<th>9-10</th>
<th>10-11</th>
<th>11-12</th>
<th>12-1</th>
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<th>2-3</th>
<th>3-4</th>
<th>4-5</th>
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<td><strong>MARCH</strong></td>
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<td><strong>JUNE</strong></td>
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</table>

#### MON
- **DA 102 Chairside Lecture**
  - 8:00am – 12:30pm
  - Lane
- **DAST 102 Chairside Lab 1**
  - 1:30pm – 4:45pm
  - Lane / Wheeldon / Walker
  - (Two class sessions)
- **DAST 107 Radiology Lab 5**
  - 1:30pm – 4:45pm
  - Rodriguez

#### TUES
- **DAST 102 Chairside Lab 2**
  - 8:50am - 12:00pm
  - Lane / Wheeldon
  - (Two Class sessions)
- **DAST 107 Radiology Lab 6**
  - 8:50am - 12:00pm
  - Rodriguez
- **DAST 107 Radiology Lab 1**
  - 2:30pm – 5:40pm
  - Wheeldon

#### WED
- **DAST 103 Patient Assessment**
  - 8:00am – 10:30am
  - Randolph
- **DAST 101 – Biodental Science**
  - 11:15am – 1:20pm
  - Lane
- **DAST 107 Radiology Lab 2**
  - 1:30pm – 4:40pm
  - Lane

#### THURS
- **DAST 102 – Chairside Pre-Clinic**
  - 8:50am – 12:00pm
  - Lane / Walker / Wheeldon
- **DAST 104 Anatomy**
  - 4:00pm – 4:05pm
  - Randolph
- **DAST 107 Radiology Lab 3**
  - 4:15 – 7:25pm
  - Randolph

#### FRI
- **DAST 107 Radiology Lab 4**
  - 8:50am – 12noon
  - Lane
PHYSICAL OBLIGATIONS

PHYSICAL EXAMINATION
Because of the close contact students have with each other and with patients during clinical procedures, and the physical demands of being an Allied Dental Health Professional (ADHP), it is necessary that you have a PHYSICAL EXAMINATION before entering the program. This also includes documentation of common vaccinations. Have your physician fill out the required form (see pages 10-14) and send it to us with all other forms no later than August 10th. You will not be allowed to attend classes unless we have your completed Physical Examination form on file. It usually takes some time to get an appointment; we suggest you call and schedule one immediately.

If a health condition is present which impedes or limits the students’ ability to provide patient care or limits the students’ physical capacity, the Program Coordinator must be notified. Such health conditions include but are not limited to TB, pregnancy, hepatitis, infectious diseases, physical injuries or disabilities. The student may be asked to consult his/her physician if health conditions appear to be impeding performance in course work and/or may be asked to withdraw from the program if health conditions warrant such an action.

During classroom or clinical experiences, students may be exposed to hazardous or radioactive materials, radiation, or infectious diseases. Students will be provided information on associated health risks and appropriate safety precautions and will be expected to utilize appropriate safety precautions in the classroom and clinical setting.

TUBERCULOSIS (TB) TESTING
All students are required to be tested for Tuberculosis (TB). This is a one-step process and can be done at the SCC Health Office in the Rodda North Building for a $5.00 fee, or at your physician’s office during your physical examination. IMPORTANT: YOU MUST HAVE TB TEST DONE AT LEAST 30 DAYS PRIOR TO ANY VACCINES.

VARIOUS VACCINATIONS
Though it is not mandatory that you have received all recommended vaccinations, we do require a copy of your shot record so that we know what you have received and when.

HEPATITIS B VACCINATION
It is HIGHLY recommended, for your protection and for future employment, that you receive the Hepatitis B vaccination. This vaccination takes a series of three injections over the span of six months. The first injection should be done prior to August 12th, the second one is done one month after the first, and the third one is done five months later. The total cost for the three injections is approximately $115-$135. Please see Mrs. Randolph if you are requesting to decline this vaccination.

CPR CERTIFICATION
Students not currently certified in CPR (Cardiopulmonary Resuscitation) are required to obtain Health Care Provider Certification before the first day of class. We will take this class together during the summer. If you cannot take it at that time, you can take it on your own and provide a copy of your certification at the 2nd orientation.
Understanding Hepatitis B Blood Tests

Understanding your hepatitis B blood test results can be confusing. It is important to discuss your test results with your health care provider so that you can clearly understand whether you have a new infection, chronic infection, or have recovered from an infection. You may want to take this sheet with you to your appointment as a reference guide. In addition, it is helpful if you request a written copy of your blood tests so that you can be sure you know which tests are positive or negative.

Before explaining the tests, there are two basic medical terms that you should be familiar with:

**Antigen:** A foreign substance in the body, such as the hepatitis B virus.

**Antibody:** A protein that your immune system makes in response to a foreign substance. Antibodies can be produced in response to a vaccine or to a natural infection. Antibodies usually protect you against future infections.

The test that is used to help you understand your hepatitis B status is called the **hepatitis B blood panel.** This is a simple 3-part blood test that your doctor can order. Your results can be returned within 7-10 days.

**The 3-part hepatitis B blood panel includes the following:**

1. **Hepatitis B Surface Antigen (HBsAg):** The “surface antigen” is part of the hepatitis B virus that is found in the blood of someone who is infected. If this test is positive, then the hepatitis B virus is present.

2. **Hepatitis B Surface Antibody (HBsAb or anti-HBs):** The “surface antibody” is formed in response to the hepatitis B virus. Your body can make this antibody if you have been vaccinated, or if you have recovered from a hepatitis B infection. If this test is positive, then your immune system has successfully developed a protective antibody against the hepatitis B virus. This will provide long-term protection against future hepatitis B infection. Someone who is surface antibody positive is not infected, and cannot pass the virus on to others.

3. **Hepatitis B Core Antibody (HBCAb or anti-HBc):** This antibody does not provide any protection or immunity against the hepatitis B virus. A positive test indicates that a person may have been exposed to the hepatitis B virus. This test is often used by blood banks to screen blood donations. However, all three test results are needed to make a diagnosis.

**Use the following chart to help you and your doctor interpret your blood panel results:**

<table>
<thead>
<tr>
<th>Tests</th>
<th>Results</th>
<th>Interpretation</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>HBsAg</td>
<td>Negative (-)</td>
<td>NOT IMMUNE – has not been infected but is still at risk for possible future infection – needs vaccine</td>
<td>Get the vaccine</td>
</tr>
<tr>
<td>HBsAb</td>
<td>Negative (-)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBCAb</td>
<td>Negative (-)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBsAg</td>
<td>Negative (-)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBsAb</td>
<td>Negative or positive (+)</td>
<td>IMMUNE – has been vaccinated or recovered from previous infection – cannot infect others</td>
<td>Vaccine is not needed</td>
</tr>
<tr>
<td>HBCAb</td>
<td>Negative or positive (+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBsAg</td>
<td>Positive (+)</td>
<td>ACUTE infection or CHRONIC infection – hepatitis B virus is present – can spread the virus to others</td>
<td>Find a knowledgeable doctor for further evaluation</td>
</tr>
<tr>
<td>HBsAb</td>
<td>Negative (-)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBCAb</td>
<td>Negative or Positive (+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBsAg</td>
<td>Negative (-)</td>
<td>UNCLEAR – several interpretations are possible – all 3 tests should be repeated</td>
<td>Find a knowledgeable doctor for further evaluation</td>
</tr>
<tr>
<td>HBsAb</td>
<td>Negative (-)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBCAb</td>
<td>Positive (+)</td>
<td></td>
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</tbody>
</table>
Student’s Name__________________________________________  Sex  □ M  □ F
Social Security # (Last 4 digits) __________  LRCCD Student ID #_____________  Birthdate ____/____/_____
Address_________________________ City ___________Zip _________Phone ________________Email_________________

TO BE COMPLETED BY PHYSICIAN/NURSE PRACTITIONER/PHYSICIAN ASSISTANT

1. Current complaints or disabilities pertinent to the student’s education in an Allied Health Program:

____________________________________________________________________________________________

____________________
________________________________________________________________________
____________________________________________________________________________________________

2. Significant medical history including serious illness, injury, or surgery?

_____________________________________________________________________________
_________________________________________________________________________________________

3. Medication used: (Prescription and OTC)

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<thead>
<tr>
<th>NAME</th>
<th>REASON</th>
<th>FREQUENCY</th>
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Ht _______Wt _______Temp _______Pulse _______BP_______ Visual Acuity: _______Glasses ______Contacts_____

<table>
<thead>
<tr>
<th>EXAMINATION</th>
<th>NL</th>
<th>ABN</th>
<th>COMMENTS</th>
<th>M/S EXERCISE ASSESSMENT</th>
<th>LIMB LIMITATIONS</th>
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<td>Arm Rotation</td>
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<td>1. General Appearance</td>
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<tr>
<td>2. Eyes</td>
<td></td>
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<td></td>
<td>Neck Extension</td>
<td>x</td>
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<td>3. Ears, Nose, Throat</td>
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<td></td>
<td>Neck Flexion</td>
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<td>4. Mouth &amp; Teeth</td>
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<td>Neck Side to Side</td>
<td>x</td>
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<tr>
<td>5. Respiratory</td>
<td></td>
<td></td>
<td></td>
<td>Knee Flexion</td>
<td>Rt.</td>
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<tr>
<td>6. Cardiovascular</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>7. Abdomen</td>
<td></td>
<td></td>
<td></td>
<td>Knee Extension</td>
<td>Rt.</td>
</tr>
<tr>
<td>8. Genitalia-Hernia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Skin</td>
<td></td>
<td></td>
<td></td>
<td>Up on toes</td>
<td>x</td>
</tr>
<tr>
<td>10. Neuro</td>
<td></td>
<td></td>
<td></td>
<td>Back on heels</td>
<td>x</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Body Mechanics Demo</td>
<td></td>
</tr>
</tbody>
</table>

He/she is able to perform the physical activities required for the program for which the individual is applying. Specific requirements may vary within the allied health programs.

MD/PA/NP Signature__________________________________________  Address_________________________  Phone_______________

MD/PA/NP Stamp__________________________________________  Date_________
HEALTH HISTORY
Must be signed by licensed physician, nurse practitioner or physician’s assistant. Answer the following questions:

**YES**  **NO**
☐ ☐ Have you been under a doctor’s care in the last 12 months?
☐ ☐ Have you been in the hospital in the last 12 months?
☐ ☐ Have you had any type of surgery?
☐ ☐ Have you ever been restricted from activity or employment because of a health problem or injury?
☐ ☐ Do you smoke?

**Have you had or do you now have?**
☐ ☐ Diabetes (high blood sugar)?
☐ ☐ Allergies (hay fever or asthma)?
☐ ☐ Reaction to medicine (allergy)?
☐ ☐ Migraine headaches?
☐ ☐ Heart trouble?
☐ ☐ High blood pressure?
☐ ☐ Head injury?
☐ ☐ Tendency to lose consciousness (faint)?
☐ ☐ Convulsions?
☐ ☐ Neck injury?
☐ ☐ Impaired (poor) vision in one or both eyes?
☐ ☐ Temporary loss of vision?
☐ ☐ To wear glasses or contact lenses?
☐ ☐ Hearing loss?
☐ ☐ Discharge from ear (s) (recurrent infections)?
☐ ☐ Sinus infections?
☐ ☐ Hemia?
☐ ☐ Kidney problems?
☐ ☐ (Men) Loss of function or absence of testicles?
☐ ☐ (Women) Menstrual problems?
☐ ☐ Bone fracture?
☐ ☐ Joint dislocation?
☐ ☐ Foot problems?
☐ ☐ To wear a cast?
☐ ☐ Back injury or frequent backaches?
☐ ☐ Knee injury (sprain) or recurrent pain
☐ ☐ Ankle injury (spasm) or recurrent pain?
☐ ☐ Other joint problems e.g. swelling pain, decreased range of motion?
☐ ☐ Bone infection?
☐ ☐ Weight problem (under or overweight)?
☐ ☐ Tendency to bleed or bruise easily?
☐ ☐ Anemia (“tired” blood)?
☐ ☐ Persistent cough?
☐ ☐ Dizziness, faintness, chest pain with exercise?
☐ ☐ Skin problems?

If answered “yes” to any question, please explain below.

____________________________________________________________________________________________

I verify that the responses on this questionnaire are correct to the best of my knowledge.

____________________________________________________________________________________________

Student     MD/PA/NP Signature     Date
PHYSICAL REQUIREMENTS CHECK LIST

Check each box to demonstrate inclusion of appropriate screening and vaccine documentation. Please attach documentation in the order that is listed here.

☐ **Physical Exam**  
(completed, dated, signed by student; signed & stamped by provider)

☐ **Tuberculosis Clearance**  
One step method **OR** Copy of chest x-ray report *(in the event of a positive PPD)* within the last 6 months

☐ **Diphtheria/Pertussis/Tetanus Vaccination (DPT)**  
Within the last 10 years

☐ **Measles/Mumps/Rubella Vaccination (MMR)**  
MMR #1 **AND** MMR #2 **OR** Titer showing immunity

☐ **Hepatitis B Vaccination**  
☐ Three doses **AND** Follow-Up Titer showing immunity **OR** Titer showing immunity  
☐ Declination form

☐ **Influenza (Flu) Vaccination**  
Not required but Highly recommended when available

---

**AMERICAN RIVER COLLEGE HEALTH CENTER**

They provide immunizations and titers for current students and referrals to various types of doctors. See their website for all information: [http://www.arc.losrios.edu/HealthCenter](http://www.arc.losrios.edu/HealthCenter)

<table>
<thead>
<tr>
<th>IMMUNIZATIONS</th>
<th>TITERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B (series of 3)</td>
<td>$50.00</td>
</tr>
<tr>
<td>MMR (Measles, Mumps &amp; Rubella)</td>
<td>$60.00</td>
</tr>
<tr>
<td>Tdap (Tetanus/Diphtheria/Pertussis)</td>
<td>$50.00</td>
</tr>
<tr>
<td><strong>Hepatitis A</strong></td>
<td><strong>$15.00</strong></td>
</tr>
<tr>
<td><strong>Hepatitis B Titer</strong></td>
<td><strong>$8.00</strong></td>
</tr>
<tr>
<td><strong>Rubeola (measles)</strong></td>
<td><strong>$14.00</strong></td>
</tr>
<tr>
<td><strong>Mumps</strong></td>
<td><strong>$14.00</strong></td>
</tr>
<tr>
<td><strong>Rubella</strong></td>
<td><strong>$6.00</strong></td>
</tr>
<tr>
<td><strong>Varicella</strong></td>
<td><strong>$12.00</strong></td>
</tr>
</tbody>
</table>

NOTE: titers can also be done here at SCC in the Health Services department located in Rodda North. We do not provide the immunizations.
First & Last Name: ________________________________

Local Address: __________________________________

Local Phone: ____________________________________

Work Phone: ____________________________________

Cell Phone: ____________________________________

Permanent Address: ______________________________

Permanent Phone: ________________________________

Emergency Contact: ______________________________

Emergency Contact Phone: _________________________

E-mail address: __________________________________

Please notify the Dental Health Department if you change your address or phone number as soon as possible (558-2357).

I understand that a grade of "C" or better is required in all courses to maintain enrollment in the Dental Assisting Program. The program abides by the SCC attendance policy. Attendance will have an effect on my grades in each class.

I understand that students will practice skills on each other in a laboratory setting with instructor supervision. All students are required to participate.

I understand that once paid, all money for instruments and supplies is non-refundable. I understand that the August 25, 2018 orientation is mandatory.

___________________________________________
Signature

________________________
Date

________________________
Print Name
ESSENTIAL FUNCTIONS REQUIRED OF ALLIED HEALTH STUDENTS

MOTOR CAPABILITY:
Move from room to room and maneuver in small spaces.
Transfer patients who may require physical assistance.
Guard and assist patients with ambulation.
Perform exercise techniques, including applying resistance during exercise.
Lift and carry up to 50 pounds, and exert up to 100 pounds force for push/pull.
Squat, crawl, bend/stoop, reach above shoulder level, kneel, use standing balance, and climb stairs.
Use hands repetitively; use manual dexterity.
Adjust, apply, and clean therapeutic equipment.
Perform CPR.
Travel to and from academic and clinical sites.
In the average clinical day students sit 1-2 hours, stand 6-7 hours, travel 1-3 hours.

SENSORY CAPABILITY:
Coordinate verbal and manual instruction.
Assess a patient 10 feet away to observe patients posture and response to treatment.
Respond to a timer, alarm, or cries for help.
Monitor vital signs.
Auditory, visual, and tactile ability sufficient to assess patient status and perform treatments.
(Example: color changes in skin, hear heart and lung sounds)

COMMUNICATION ABILITY:
Communicate effectively in English with patients, families, and other health care providers, both verbally and in writing. (Example: explain treatment procedures, teach patients and families, document in charts)
Effectively adapt communication for intended audience.
Interact, establish rapport with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.
Assume the role of a health care team member.
Function effectively under supervision.

PROBLEM SOLVING ABILITY:
Function effectively under stress.
Respond appropriately to emergencies.
Adhere to infection control procedures.
Demonstrate problem solving skills in patient care. (measure, calculate, reason, prioritize, synthesize data)
Use sound judgment and safety precautions.
Address problems or questions to the appropriate person at the appropriate time.
Organize and prioritize job tasks.
Follow policies and procedures required by clinical and academic settings.

I have reviewed the Essential Functions Required of Allied Health Students and anticipate that I will be able to perform these functions:

_____ without accommodations
_____ with accommodations (please explain)

__________________________ Date_________
Signature__________________________

Print name________________________
The Dental Health Programs at Sacramento City College respect the rights of privacy for all patients seen at the clinic. This includes information on students of the college (whether or not they are in one of the dental health programs), who are patients in the dental clinic.

The SCC Dental Health Clinic is an educational facility and is limited to services practiced by dental hygienist and dental assistants. Fees are collected at the time services are provided.

The following guidelines are followed to insure that confidentiality is maintained and protected for all patients:

- Patient charts will not be removed from the clinical facility.
- Patient charts will only be reviewed in the clinic business office, radiology laboratory, instructional classrooms or the dental health clinic.
- Patient information can be used for teaching purposes only after any information that could identify the patient has been removed.
- Patient information, such as photographs, dental records or medical records that would identify the patient, can be sent to 3rd parties only after receiving written permission from the patient.
- No conversations that would identify a patient will occur outside of the educational facility.
- Conversations within the facility will be conducted in an appropriate manner so that only those individuals with the right to know the information will be involved in the discussions.

I have reviewed this information and understand the policy.

First & Last Name: 

Signature: 

Date: 
LOS RIOS COMMUNITY COLLEGE DISTRICT  
AGREEMENT TO PARTICIPATE AND WAIVER/ASSUMPTION OF RISK

NAME:_____________________________________ STUDENT ID NUMBER:_______________________

CLASS/ACTIVITY:___________________________ INSTRUCTOR’S NAME:__________________________________

This is a release of liability and assumption of risk agreement. Read it carefully and sign below. Completion of this form is necessary in order to participate in this class activity. I understand my decision to take this class or activity is optional and voluntary. This document cannot be altered or modified by any verbal or written statements.

I am aware that participating in this Los Rios Community College District (DISTRICT) class or activity can involve MANY RISKS OF INJURY including, but not limited to, property damage, bodily injury, personal injury and death.

In consideration of the DISTRICT permitting me to participate in the ______________ class/activity, I hereby voluntarily assume all risks associated with my participation and release the DISTRICT, its employees and volunteers, its colleges, campuses and centers, its governing board and the individual members thereof, and all other DISTRICT officers, agents and employees from all liability (whether based on negligence or otherwise) for injuries (including death) and damages arising out of or in any way related to the activity and/or class.

I understand that if this is/involve an excursion or field trip as defined by California Code of Regulations, Section 55220 that Section states in part:

“All persons making the field trip or excursion shall be deemed to have waived all claims against the District or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion. All adults taking out-of-state field trips or excursions and all parents or guardians of minor students taking out-of-state field trips or excursions shall sign a statement waiving such claims.”

By signing this Agreement, I hereby waive all such claims.

I understand and agree to accept all the rules and requirements of the activity and/or class, including safety rules and instructions given by the supervisory personnel. I understand, and agree, and grant to the DISTRICT the right to terminate my participation in the activity and/or class within the DISTRICT’s or DISTRICT’s employee’s sole discretion. If applicable, I understand and agree that any costs associated with my return transportation shall be at my personal expense.

I consent to the DISTRICT providing emergency health assistance if it is determined necessary and further consent to the DISTRICT notifying the emergency contact (listed below) and agree that this liability release and assumption of risk agreement applies to any of the DISTRICT’s actions in this regard.

This agreement shall inure to the benefit of and be binding upon my heirs, decedents, successors, executors, assignees, legal representatives, and all family members. The provisions of this agreement including, but not limited to, my waiver of liability and my assumption of risk shall survive this agreement.

The following person should be contacted in case of an emergency: (please print)

________________________________________________________________________________________________________

Name
Address
Telephone No.

I/WE, THE UNDERSIGNED, HAVE READ THIS AGREEMENT AND UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS AND THAT I/WE ARE VOLUNTARILY ASSUMING ALL RISKS AND WAIVING ANY AND ALL CLAIMS ARISING OUT OF OR IN ANY WAY RELATED TO THIS ACTIVITY AND/OR CLASS. I/WE AGREE THAT NO ORAL REPRESENTATIONS, PROMISES, OR INDUCEMENTS, NOT EXPRESSLY CONTAINED HEREIN HAVE BEEN MADE AND THAT THIS DOCUMENT CONSTITUTES THE ENTIRE AGREEMENT PERTAINING TO THE SUBJECT MATTER CONTAINED HEREIN.

If participant is under 18, parent or guardian must sign.

SIGNATURE __________________________________________________________________________________________

PARENT OR GUARDIAN __________________________________________________________________________________

Date

Date
You are required to wear scrubs to class each day. You are also required to purchase the lab coat. The prices for these items at Prism Medical are VERY reasonable!

You will need to order your uniform online at:  [https://www.prismed.net](https://www.prismed.net)

Once on the website, scroll to the very bottom of the home page, select B100 under the “micro stores” drop down, then click on Sacramento City College on the left under Categories, and enter the password:  DENTASSIST

You will be wearing the scrubs to class every day for 10 months, so 2-3 sets would be a good idea.

**BE SURE TO ORDER THEM NO LATER THAN AUGUST 1ST AS YOU MUST BE IN UNIFORM FOR THE FIRST DAY OF CLASS.**

Uniform shoes are optional but strongly encouraged! (You can wear CLEAN tennis shoes.) Your shoes do not come with the uniform, you will need to buy those separately. They can be ANY color – go ahead and get crazy if you want to with the color. All shoes must be closed toe.
REQUIRED DRUG SCREENING FOR SACRAMENTO CITY COLLEGE STUDENTS IN ALLIED HEALTH PROGRAMS

All Allied Health programs at Sacramento City College require prospective students to take a drug screen and background check. The fee is $103 and covers both the background check and drug screen through Verifystudent.com. Students are responsible for the cost. Before you obtain your drug screen you must have already paid the fee online with Verifystudent.com to initiate your background check.

The drug screen includes screening for amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, opiates, methaqualone, methadone, propoxyphene and phencyclidine plus alcohol and must be taken at one of the sites listed online. The labs have been approved by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or College of American Pathologists (CAP).

The Dental Assistant Program Coordinator will be able to access the results of your background check and drug screen at a secure online site. If a student tests positive for any of the above substances on their initial screen, they may repeat the test once to demonstrate negative results. A retesting fee of $53 will apply. Be aware that depending on the person, it is possible for THC, the active ingredient in marijuana, to be deterred in urine for as long as 60 to 90 days after its use. All students must demonstrate a negative screen (no evidence of drugs or alcohol) by the date of program orientation. Admission to the program may be withdrawn for students who fail to pass the drug and alcohol screen.

Two Step Instructions:

Follow the instructions on the next page to pay the $103 fee and start the background check. Take the electronic receipt and confirmation code to one of the sites listed online WITHIN 48 HOURS OF PAYING THE FEE.

You do not need to submit any paperwork to the school regarding this drug screen/background check. Results will be electronically submitted to the Dental Assisting Program Coordinator.

Note: It is possible that students may be required to have additional background checks or unscheduled drug screens at the request of the DA Program Coordinator and/or clinical facilities.
Student Background & Drug Screening – Ordering Procedures for:

SACRAMENTO CITY COLLEGE – DENTAL ASSISTING

Ordering student background screening reports from VerifyStudents.com couldn’t be easier!

Ordering Instructions:

A valid email address is required to complete this process (if you do not have an email account you can establish a free account at Yahoo.com)

Log onto our website at www.VerifyStudents.com

Click the Start Here Button (next to “students only”)

Enter the special promotional code listed below and then hit the ‘GO’ Button.

Complete the online application section in its entirety.

Have credit card (Visa/Mastercard/American Express/Discover) information ready in order to process payment.

Click the ‘Submit’ Button at the end of the process and you will be taken to the drug screening self-scheduling tool. Follow the simple on-screen instructions to initiate the drug screening process.

Once you have scheduled your drug screening event, you will be provided with an electronic receipt and confirmation code (PLEASE BE SURE TO SAVE THIS RECEIPT FOR YOUR RECORDS).

YOUR PROGRAM’S PROMOTIONAL CODE IS: SCCDBGDS

* Please note that many county courts charge additional fees to search their records. You may be contacted by CSS for payment authorization should additional court fees apply to your background investigation.

*Please note that this information is for the sole purpose of background screening for this school only. Unauthorized use of our service is prohibited*
<table>
<thead>
<tr>
<th>ITEM</th>
<th>SPECIFICS</th>
<th>DUE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apply to Financial Aid</td>
<td>If needed</td>
<td>IMMEDIATELY</td>
</tr>
<tr>
<td>Register for classes – use permission numbers provided on your “Calendar of Events”</td>
<td>DAST 101, 102, 103, 104 &amp; 107</td>
<td>ASAP</td>
</tr>
<tr>
<td>Get a physical examination including:</td>
<td>Forms enclosed</td>
<td>ASAP</td>
</tr>
<tr>
<td>• All vaccinations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Tuberculosis testing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obtain CPR training</td>
<td>Must be:</td>
<td>August 10, 2018</td>
</tr>
<tr>
<td>• Healthcare Provider CPR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• American Red Cross or American Heart Assn.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Valid through Sept. 30, 2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purchase scrubs</td>
<td>See enclosed information</td>
<td>ASAP</td>
</tr>
<tr>
<td>Purchase books</td>
<td>See campus bookstore</td>
<td>ASAP</td>
</tr>
<tr>
<td>Background check/drug screen</td>
<td>See enclosed information</td>
<td>August 10, 2018</td>
</tr>
<tr>
<td>Return forms:</td>
<td>Return forms to Mrs. Randolph or mail to:</td>
<td>Must be RECEIVED by our office by:</td>
</tr>
<tr>
<td>• Physical forms (3)</td>
<td>Sacramento City College Dental Department</td>
<td>August 10, 2018</td>
</tr>
<tr>
<td>• Vaccination Record</td>
<td>ATTN: Mrs. Randolph 3835 Freeport Blvd Sacramento, CA 95822</td>
<td></td>
</tr>
<tr>
<td>• CPR certificate (copy)</td>
<td>Rodda South 111</td>
<td>August 25, 2018</td>
</tr>
<tr>
<td>Attend 2nd Orientation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
“Professional people in health services are set apart from others by virtue of the dignity and responsibility of their work.”

– Esther Wilkins
SACRAMENTO CITY COLLEGE VISION

Sacramento City College seeks to create a learning community that celebrates diversity, nurtures personal growth, and inspires academic and economic leadership.

SACRAMENTO CITY COLLEGE MISSION

Sacramento City College (SCC) is an open-access, comprehensive community college, serving a diverse student population. We provide a wide range of educational opportunities and support services leading to transfer, career advancement, basic skills development, and personal enrichment. Our commitment to continuous improvement through outcome-guided assessment, planning, and evaluation promotes student learning. Through these efforts, we contribute to the intellectual, cultural, and economic vitality of the community.

SACRAMENTO CITY COLLEGE INSTITUTIONAL GOALS

- Promote engagement and success of first-year students.
- Develop and implement a data-driven enrollment management system that aligns college programs and services to meet the needs of the college and the community.
- Improve basic skills competencies in reading, writing, math, and information competency across the curriculum in order to improve student preparedness for degree and certificate courses and for employment.
- Ensure that processes, services, curriculum, and instructional design result in equivalent student outcomes for all modalities and locations (i.e., off campus sites, distance education, etc.).
- Revise or develop new courses, programs and services based on assessment of emerging community needs and college resources.
- Improve staff processes for all classifications including hiring, orientation, mentoring, customer service, training, evaluation, and exit processes, with attention to the selection and retention of staff that reflect the diversity of our students and community.
- Engage the college community in the process of ongoing institutional evaluation, continuous improvement, and the analysis and review of data.
- Identify and respond to the needs of the college community that is growing increasingly diverse in terms of demographics and culture.
- Deliver programs and services that demonstrate a commitment to learner-centered education and institutional effectiveness in supporting student success through the achievement of certificates, degrees, transfers, jobs and other personal goals.

SACRAMENTO CITY COLLEGE DENTAL ASSISTING PROGRAM MISSION

The mission of the Sacramento City College Dental Assisting Program is to provide a quality education to prepare students to be successful in their dental assisting career and to be contributing members of the profession and the community.
SACRAMENTO CITY COLLEGE DENTAL ASSISTING PROGRAM GOALS

Upon completion of the dental assisting program the student will be able to:

- incorporate and apply professional, ethical, legal, and regulatory concepts to oral health care services, community projects, and professional activities.
- integrate and apply health literacy and culturally competent communication skills to oral health care services, academic endeavors, community projects, and professional activities.
- apply critical thinking and self-assessment skills to enhance learning, research, patient care, professional growth, and continued competency.
- adapt knowledge of the practice of dentistry to the demonstration of clinical dental assisting skills.
- exhibit knowledge necessary for successful completion of the California Registered Dental Assistant's Examination and the National Certified Dental Assistant's Examination.

ACCREDITATION

The Sacramento City College Dental Assisting Program is accredited by the American Dental Association Commission on Dental Accreditation (CODA), 211 East Chicago Ave., Chicago, IL 60611, (312) 440-4653. Accreditation occurs every seven years. The next accreditation report and site visit will occur during the 2018-19 academic year.

Upon successful completion of the Dental Assisting Program, the graduate is eligible to take both the Certified Dental Assistant examination (national certification), as well as the Registered Dental Assistant examination (California Allied Dental Health Professional licensure).

The Commission on Dental Accreditation has specific policies and procedures in place which provide guidance to students who wish to file a complaint against an accredited program. 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 Commission's Evaluation and Operation Policies and Procedures manual.

An anonymous comment/complaint is defined as an unsigned comment/complaint submitted to the Commission. Anonymous comments/complaints may be received at any time and will be added to the respective programs file for evaluation during the programs next scheduled accreditation site visit. At the time of the site visit, the program and site visit team will be informed of the anonymous comment/complaint. The program will have an opportunity to respond to the anonymous comment/complaint; the response will be considered during the site visit evaluation. Anonymous comments/complaints will be assessed to determine trends in compliance with Commission standards, policies, and procedures. The assessment of findings related to the anonymous comments/complaint will be documented in the site visit report.
PRINCIPLES OF ETHICS OF THE AMERICAN DENTAL ASSISTANTS ASSOCIATION

Each individual involved in the practice of dentistry assumes the obligation of maintaining and enriching the profession. Each [dental assistant] may choose to meet this obligation according to the dictates of personal conscience based on the needs of the human beings the profession of dentistry is committed to serve. The spirit of the Golden Rule is the basic guiding principle of this concept. The [dental assistant] must strive to at all times maintain confidentiality, and exhibit respect for the dentist/employer. The [dental assistant] shall refrain from performing any professional service which is prohibited by state law and has the obligation to prove competence prior to providing services to any patient. The [dental assistant] shall constantly strive to upgrade and expand technical skills for the benefit of the employer and the consumer public.

DENTAL ASSISTING CREED

The SCC Dental Assisting Program’s creed has been taken and adapted from the American Dental Assistants Association:

- To be loyal to my employer, my calling and myself.
- To develop initiative – having the courage to assume responsibility and the imagination to create ideas and develop them.
- To be prepared to visualize, take advantage of, and fulfill the opportunities of my calling.
- To be a co-worker – creating a spirit of cooperation and friendliness rather than one of fault-finding and criticism.
- To be enthusiastic – for therein lies the easiest way to accomplishment.
- To be generous, not alone of my name but of my praise and my time.
- To be tolerant with my associates, for at times I too make mistakes.
- To be friendly, realizing that friendship bestows and receives happiness.
- To be respectful of the other person’s viewpoint and condition.
- To be systematic, believing that system makes for efficiency.
- To know the value of time for both my employer and myself.
- To safeguard my health, for good health is necessary for the achievement of a successful career.
- To be tactful – always doing the right thing at the right time.
- To be courteous – for this is the badge of good breeding.
- To walk on the sunny side of the street, seeing the beautiful things in life rather than fearing the shadows.
- To keep smiling always.

- Juliette A. Southard, Founder ADAA
PROFESSIONALISM

Professional traits or attributes of a successful dental assistant are those that are found in the basics of professionalism. These traits are nurtured in the dental assisting student and then carried into clinical practice or other practice settings.

These attributes or qualities include:

- Honesty and Integrity
- Caring and Compassion
- Reliability and Responsibility
- Maturity and Self-analysis
- Loyalty
- Interpersonal Communication
- Tolerance for Others
- Respect for Self

Each student will get 5 weekly points for professionalism in each class. Points will be deducted as faculty deem appropriate when infractions occur. In addition, when repeated and/or excessive infractions occur, student will be placed on an "Educational Agreement Plan" by the Program Coordinator. If unprofessionalism persists, student may be dismissed from the program.

AMERICAN DENTAL EDUCATOR’S ASSOC. (ADEA) STATEMENT OF PROFESSIONALISM

ADEA’s Statement on Professionalism defines the expectations for professional behavior in dental education institutions, including the values and behaviors that should guide students as they enter the dental and allied professions, and faculty and administrators as they continuously improve their educational programs. ADEA developed the following six values-based statements defining professionalism in dental education:

| COMPETENCE | Acquiring and maintaining the high level of special knowledge, technical ability and professional behavior necessary for the practice of dentistry and for effective functioning in the dental education environment. Learning Dental Assisting is a top priority. Develop the habits and practices of lifelong learning, including self-assessment skills; Accept and respond to fair negative feedback about your performance – recognize when you need to learn; Learn and practice effective communication skills; Know the limits of your knowledge and skills and practice within them. |
| FAIRNESS | Demonstrating consistency and even-handedness in dealings with others. Follow institutional rules and regulations; Promote equal access to learning materials for all students and equal access to care for the public. |
| INTEGRITY | Being honest and demonstrating congruence between one’s values, words, and actions.  
Strive for personal excellence. Take examinations honestly. Make entries in patient’s records honestly. |
| RESPONSIBILITY | Being accountable for one’s actions and recognizing and acting upon the special obligations to others that one assumes in joining a profession.  
| RESPECT | Honoring the worth of others.  
Develop a nuanced understanding of the rights and values of patients; Protect patients from harm; Support patient autonomy; Be mindful of patients’ time and ensure timeliness in the continuity of patient care; Keep confidences; Accept and embrace cultural diversity; Learn cross-cultural communication skills; Accept and embrace differences; Acknowledge and support the contributions of peers and faculty. |
| SERVICE-MINDEDNESS | Acting for the benefit of others, particularly for the good of those the profession serves, and approaching those served with compassion.  
Contribute to and support the learning needs of peers and the dental profession; Recognize and act on the primacy of the well-being and the oral health needs of patients and/or society in all actions; Provide compassionate care; Support the values of the profession; Volunteer to work for the benefit of patients, society, colleagues and the profession to improve the oral health of the public. |

Adapted from: [http://www.adea.org/Pages/Professionalism.asp](http://www.adea.org/Pages/Professionalism.asp)
**FACULTY CODE OF ETHICS**

It is essential that faculty:

- Act in a manner that best serves the education and professional development of students.
- Interact with students and faculty colleagues in a professional, civil, and collegial manner in accordance with LRCCD policies and relevant laws.
- Role model patient-centered care that is ethically based and legally sound.
- Impartially evaluate student performance regardless of the student’s religion, race, sexual orientation, nationality, or other criteria.
- Support academic and department policies.
- Demonstrate respect at all levels of interaction with colleagues, students, staff and patients.
- Familiarize themselves with academic, clinical and college policies and procedures.
- Encourage students to seek assistance for their grievances without fear of retaliation.
- Respect students’ need to allocate their time among competing demands.
- Maintain appropriate confidentiality in all relationships.

Adapted From: P. Zarkowski, UD Mercy

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**PROGRAM STANDARDS FOR STUDENT CONDUCT AND PROFESSIONALISM**

Professional conduct is essential as a health care provider. Professional behavior is applicable to the classroom, lab, and clinical settings.

*It is expected that the student will:*

<table>
<thead>
<tr>
<th>Comply with rules, regulations, program policies, and the policies and procedures of SCC.</th>
<th>Maintain a professional demeanor in the classroom, clinic, and lab setting.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uphold the ethical principles as outlined in the ADAA Code of Ethics by exhibiting high standards, integrity, and honesty.</td>
<td>Attend all courses and clinic sessions as outlined in the course syllabi.</td>
</tr>
<tr>
<td>Uphold the statutes, rules and regulations governing the practice of dental assisting as described in the California Dental Practice Act.</td>
<td>Inform course instructors AND the Program Coordinator in the case of illness or unforeseen tardiness.</td>
</tr>
<tr>
<td>Comply with California law which prohibits being under the influence of intoxicants or controlled substances without a valid medical prescription.</td>
<td>Provide a medical clearance, upon request, stating no limitations for class or clinic assignments.</td>
</tr>
<tr>
<td>Maintain high standards of health, welfare, and safety for patients, faculty, staff and students.</td>
<td>Be responsible for the completion of course assignment and requirements.</td>
</tr>
<tr>
<td>Work toward establishing positive rapport with clinical and college personnel.</td>
<td>Comply with the dress code for clinic and lab courses.</td>
</tr>
<tr>
<td>Follow the chain of communication for resolution of conflicts that may occur with faculty, staff, students, or patients.</td>
<td>Seek assistance or clarification when needed for course assignments, clinic assignments or program policies.</td>
</tr>
</tbody>
</table>
SACRAMENTO CITY COLLEGE STUDENT CODE OF CONDUCT

College students have the same rights as other members of the community and are accountable to the same federal and state laws and statutes. In addition, SCC students are accountable to Los Rios Board policies and SCC Rules and Regulations. The following Code of Conduct has been adopted by SCC to protect the rights and privileges of students and to allow the college to function properly: Policy 2000, 2440 Standards of Conduct and Due Process, 2441 Standards of Conduct.

**Misconduct & Discipline**

Misconduct for which students are subject to discipline includes:

- Obstruction or disruption of the learning process of the college, including teaching, administration, and college activities
- Physical or threatening abuse of any person on college-owned or controlled property, or at any college-sponsored or supervised activity
- Theft of, or damage to, property of any person on college-owned or controlled property, or at a college-sponsored or supervised activity
- Unauthorized entry to or use of college facilities
- Violation of college policies or campus regulations
- Disorderly, lewd, obscene, or indecent conduct or expression on college-owned or controlled property or at college-sponsored or supervised activities
- Willful disturbance at any college meeting

In addition to the above, to provide quality education for all students, the integrity of the learning process must be maintained. It is important that all students understand exactly what is expected and what is considered inappropriate during the teaching/learning process.

**Cheating**

Cheating is the act of obtaining or attempting to obtain credit for academic work through the use of dishonest, deceptive, or fraudulent means. Cheating includes the following:

- Copying from someone else’s test
- Submitting work that is not your own
- Submitting work presented previously in another course, if contrary to the rules of either course
- Altering or interfering with grading
- Using material during an exam that is not allowed
- Consulting with someone, other than the instructor, during an exam
- Committing other acts which defraud or misrepresent
Plagiarism

Plagiarism is representing the work of someone else as your own and submitting it for any purpose. Plagiarism includes the following:

- Incorporating the ideas, works, sentences, paragraphs, or parts of another person's writings, without giving appropriate credit, and representing the product as your own work
- Representing another's artistic/scholarly work as your own
- Submitting a paper purchased from a research or term paper service

Other Acts of Dishonesty

- Purposely allowing another student to copy from you during a test
- Giving your homework, term paper, or other academic work to another person to plagiarize
- Having another student submit work in your name
- Lying to an instructor to improve your grade
- Altering a graded work after it has been returned, then resubmitting the work for grading
- Removing a test from the classroom
- Stealing tests
- Forging signatures

Consequences of Dishonesty

Depending on the seriousness of the infraction, the following may occur as a result of the dishonesty:

- A failing grade on the test, paper, or assignment
- A course grade lowered
- An "F" in the course
- Disciplinary probation or suspension
- Expulsion

In any conflict related to student discipline, students shall be informed in writing of charges to be brought against them, and they shall have the right to participate in an informal investigative meeting with the Student Discipline Officer. At such informal meetings or even at more formal Discipline Appeal hearings, students may not be represented by an attorney.

Animals

Pets and other animals are not allowed in buildings or to be turned loose on campus. They must be contained. Seeing-eye and other medically necessary dogs are exempt.
Demonstrations

Students have the right to demonstrate in a responsible manner, under the following conditions:

- Demonstrations will in no manner interfere with any class, community service program, or other approved activity being conducted on campus.
- Demonstrations will neither interfere with free ingress to nor regress from buildings nor block normal traffic flow, pedestrian or vehicular.
- Voice amplification is permitted only during specified time periods (contact Student Leadership and Development for information on time periods). Excessive noise will not be permitted.
- Only persons connected with the college will be permitted to participate in student demonstrations.
- Students will not be granted excused absences from classes to participate in demonstrations.
- No obscenities, nor challenges that might incite physical reactions, will be tolerated.
- Students participating in on-campus demonstrations are not immune from civil regulations and penalties.

Uniform

Clinic uniforms/scrubs, nametags, and approved shoes are required in all didactic, clinic and laboratory sessions. See additional appearance requirements on page 41.

The dress on campus shall be in accordance with the dictates of custom and good taste in the college environment.

Fundraising & Selling

Recognized student organizations may raise funds on campus for purposes related to the organization's objectives under the following conditions:

- Authorization by the advisor of the organization.
- Approval of the Student Leadership and Development Office.
- Funds collected must be deposited to the student organization's account in the Business Office within twenty-four (24) hours of collection.
- Use of funds collected must be approved by the organization's advisor and Program Coordinator.
- All other fundraising, selling, or solicitation for donations or memberships, for any organization not directly under the control of the SCC administration, is prohibited.

Note: Final decisions for all fundraising activities will be made by Program Coordinator.

Gambling

Gambling is prohibited on campus.
**Hazing**

No student or other person connected with SCC or in attendance at the college shall participate in hazing, conspire to engage in hazing, or commit any act that injures, degrades, or disgraces any person attending the college.

**Library**

All library property and material must be checked out before being taken from the Library. Library fines must be paid in full before grades or transcripts are released. A hold will be placed on your record until all library obligations are addressed.

**Non-College Persons on Campus**

Any person on college-owned property or at college-sponsored or supervised activities who engages in disruptive behavior is subject to disciplinary and legal actions. Volunteers in the clinic must gain written approval through the Program Coordinator and sign a waiver.

**Posting Materials**

Student fliers, advertisements, or other student-related activities must be approved by the Student Leadership and Development Office before posting in approved locations. Commercial posting or other non-student oriented materials must be approved by the Facilities Office. Unauthorized material will be removed. Approval is subject to Los Rios Community College Board policies and campus regulations.

**Program Sponsorship**

A recognized student organization presenting programs solely for its members requires only the approval of its faculty advisor. Programs open to the student body must be coordinated through Student Development.

**Smoking**

Smoking is prohibited in all buildings and within 30 feet of all building entrances.

**Weapons**

Possession or use of explosives, dangerous chemicals or deadly weapons on college property or at a college function without prior authorization of the college President or designated representative is grounds for expulsion.

For more information regarding the Code of Conduct, contact the Vice President, Student Services, 558-2141.
ENROLLMENT REQUIREMENTS

CPR Requirements

Students not currently certified in CPR are required to obtain Health Care Provider Certification before the first day of instruction. The intent is for you to obtain a two year certificate which will last you through the entire program and the first few months of employment in a dental office upon graduation. We will be taking this course as a class together sometime during the summer. If you are unable to attend that class, you will have to take it on your own. Be sure that it is American Red Cross or American Heart Association sponsored and is the Health Care Provider Certification.

Drug Screen and Law Enforcement Background Checks

To ensure the safe and effective care of patients, SCC Allied Health students must be in optimal physical and mental condition and are therefore required to complete a drug screen and law enforcement background check. Students are responsible for the cost of the drug screening. See the instruction on pages 20 and 21. A urine sample is required.

Results of drug screens and background checks are sent directly to the Program Coordinator. All students must have clean drug and alcohol screens (i.e. no evidence of drugs) in order to participate in the program. The drug screen includes testing for the following substances: alcohol, amphetamines, barbiturates, benzodiazepines, cocaine, methadone, methaqualone, opiates, phencyclidine, propoxyphene, marijuana. Students should be aware that disallowed substances may be detected in the urine for some time after use; for example, marijuana (THC) may stay in the system for many weeks.

A negative test result must be achieved prior to the start of the program. Students who test positive for any disallowed substance on their initial drug screen will be allowed to test again to demonstrate negative results. Students who fail to clear the drug screen on the second attempt will not be allowed to start the program but may apply for the program again the following year under the rules of a student “not in good standing,” (see page 50).

All students must continue to have clean drug and alcohol screens throughout the program. Additional drug screens may be required during the course of the program at the request of clinical facilities and/or the Program Coordinator. Students are responsible for the expense of such additional testing.

In the event of a positive drug test while the student is enrolled in the program, the student will be subject to disciplinary action in accordance with district, campus, division and program protocol and will, under NO circumstances, be allowed to work on clinical patients until a negative drug test is achieved. See page 42 regarding policies related to impairment via drugs, alcohol or mental illness.

In the event of a misdemeanor or felony evident on the background check, the Program Coordinator will consult with the student regarding the student’s potential for success in the dental field. Though a misdemeanor or felony will not prevent a student from enrolling in the program, it may prevent the student from future licensure as an Allied Dental Health Professional and/or employment in a dental
office. Consult the Dental Board of California (DBC) for additional information regarding licensure requirements.
If there is a break in continuous enrollment in the program, students will need to repeat a drug screen and background check. Some county courts charge additional fees to search records. Students will be contacted for any additional court fees.

Clinical facilities review all student background checks on a rotating basis. Individual agencies determine the acceptance of students based on their own criteria.

Evidence of Physical and Mental Health

Because of the close contact students have with each other and with patients during clinical procedures, and the physical demands of being an Allied Dental Health Professional (ADHP), it is necessary that you have a PHYSICAL EXAMINATION before entering the program. This also includes documentation of common vaccinations. Have your physician fill out the required form (see pages 10-14) and send it to us with all other forms no later than August 12th. You will not be allowed to attend classes unless we have your completed Physical Examination form on file. It usually takes some time to get an appointment; we suggest you call and schedule one immediately.

If a health condition is present which impedes or limits the students’ ability to provide patient care or limits the students’ physical capacity, the Program Coordinator must be notified. Such health conditions include but are not limited to TB, pregnancy, hepatitis, infectious diseases, physical injuries or disabilities. The student may be asked to consult his/her physician if health conditions appear to be impeding performance in course work and/or may be asked to withdraw from the program if health conditions warrant such an action.

Exposure to Hazardous or Radioactive Materials

During classroom/clinical experiences, students may be exposed to hazardous or radioactive materials, radiation, or infectious diseases. Students will be provided information on associated health risks and appropriate safety precautions and will be expected to utilize appropriate safety precautions in the classroom and clinical setting.

Insurance - Personal Health and Accident
Students are encouraged to carry personal health and accident insurance. The college nurse has resource information regarding available student health insurance.

Insurance – Professional Liability
SCC requires liability insurance coverage for all dental assisting students while enrolled in the program and covers students during clinical courses and off-site clinical rotations. The cost of this insurance is $15 for a full year. Additional liability policies are available to students at low cost through the American Dental Assistant’s Association (www.dentalassist.org).
Laboratory (Pre-Clinical Practice)

Students in this program will practice clinical skills on each other in a laboratory/clinic setting with instructor supervision. The course may include discussion of issues such as race, religion, sexuality, gender and disabilities related to course content.

Immunizations

SCC dental assisting students must show proof of the following:

1. Physical Exam
   a. (completed, dated, signed by student; signed & stamped by provider)
2. Tuberculosis Clearance
   a. using one step method OR Copy of chest x-ray report (in the event of a positive PPD)
   b. within the last 6 months
3. Diphtheria/Pertussis/Tetanus Vaccination (DPT)
   a. within the last 10 years
4. Measles/Mumps/Rubella Vaccination (MMR)
   a. MMR #1 AND MMR #2 OR Titer showing immunity
5. Hepatitis B Vaccination
   a. Three doses AND Follow-Up Titer showing immunity OR Titer showing immunity, OR
   b. Declination form
6. Influenza (Flu) Vaccination
   a. Recommended when available

AMERICAN RIVER COLLEGE HEALTH CENTER

They provide immunizations and titers for current students and referrals to various types of doctors. See their website for all information: [http://www.arc.losrios.edu/HealthCenter](http://www.arc.losrios.edu/HealthCenter)

<table>
<thead>
<tr>
<th>IMMUNIZATIONS</th>
<th>TITERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B (series of 3)</td>
<td>$50.00</td>
</tr>
<tr>
<td>MMR (Measles, Mumps &amp; Rubella)</td>
<td>$60.00</td>
</tr>
<tr>
<td>Tdap (Tetanus/Diphtheria/Pertussis)</td>
<td>$50.00</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>$15.00</td>
</tr>
<tr>
<td>Hepatitis B Titer</td>
<td>$8.00</td>
</tr>
<tr>
<td>Rubeola (measles)</td>
<td>$14.00</td>
</tr>
<tr>
<td>Mumps</td>
<td>$14.00</td>
</tr>
<tr>
<td>Rubella</td>
<td>$6.00</td>
</tr>
<tr>
<td>Varicella</td>
<td>$12.00</td>
</tr>
</tbody>
</table>

NOTE: titers can also be done here at SCC in the Health Services department located in Rodda North. We do not provide the immunizations.
ATTENDANCE

Dependability and promptness are professional behaviors critical to student success as well as success in any dental office. The SCC school catalog states:

“Any student with excessive absences may be dropped from any course by the instructor any time during the semester. **Excessive absences are defined as 6% of the total hours of class time.** Instructors may establish and notify students of a more restrictive attendance policy if appropriate for their course. The application of the excessive absence concept may vary by division according to the attendance demands of a certain curriculum. Students enrolled in a program such as Cosmetology, Vocational Nursing, Registered Nursing, Aeronautics, Dental Assisting, or Dental Hygiene should become familiar with special attendance procedures.”

In general, there are NO excused absences in the Dental Assisting Program. Though true emergencies are unforeseeable and therefore must be handled on a case-by-case basis, attendance is expected in every class, during every class session.

**Tardiness is unacceptable.** A student is deemed to be late if they are not seated and ready with all supplies and materials required at the start of all class sessions. It is disruptive to the flow of an effective class session when students enter the classroom late. For this reason, the classroom door will be locked at the beginning of each class session. Entry into class will be allowed when the faculty deems that the entry of late students will not disrupt the flow of the class session, typically about 15 minutes after the start of class. Students who are late to class will not be allowed to turn in their homework (late assignments are not accepted) and will not be able to participate in the “on-time quiz.” **Students who are more than 15 minutes late to class will be considered absent.**

In the event of a true emergency, all students must contact the Program Coordinator **PRIOR** to the start of any class that will be missed. This policy is in accordance with employment expectations and will assist faculty in the successful orchestration of an effective class session.

**All missed class time must be made up in order to pass each semester.** The student must meet with the Program Coordinator upon return to any DA class to discuss absence(s) and schedule make-up time. Scheduled make-up time will be based on faculty availability.
APPEARANCE AND GROOMING

All students are expected to observe the following regulations for all clinic and laboratory sessions:

- Good personal hygiene is required at all times.
- Students must be in clinical scrubs for every class session whether didactic, laboratory or clinic. Only SCC approved uniforms are to be worn. All uniforms must be clean, odor and wrinkle free. Clinic tops must sufficiently cover the torso so as to prevent undergarments from being visible at any time.
- Disposable gowns must be worn when working on live patients and may not be taken out of the clinical treatment areas. The uniform lab coat can be worn during lecture and lab classes. No other outerwear attire may be worn in the classroom.
- Name tags must be worn at all times. (This is a CA law!)
- Safety glasses, gloves, masks and disposable gowns are to be worn during all clinic sessions.
- Tennis shoes may be worn, but uniform shoes are strongly encouraged. All shoes must be kept neat and clean.
- Hair must be neat, clean and kept back away from the face at all times. Hair should never hang down toward the patient and should not get in the way of instruments, trays or anything that will be used on the patient. Hair that falls into the face when leaning forward must be tied back. Large hair bows, ornaments or scarfs that would not be appropriate in the dental office are not appropriate in the classroom. Hair color may only be of a color that could be natural.
- The following pieces of jewelry are permitted: A small water-proof watch, one ring on each hand and small stud or very small loop earrings. It is not advised to wear a large diamond ring as this could tear the gloves. No facial or tongue jewelry is permitted. No large loops or dangle earrings are permitted.
- Visible tattoos should be covered whenever possible. The appropriateness of visible tattoos is up to the faculty’s discretion. Students must be prepared to cover any tattoo whenever required.
- Fingernails must be kept clean and short. Only clear polish or “French manicures“ are permitted.
- Though it is important not to have an unpleasant odor, it is equally important to avoid fragranced perfume, cologne, deodorant, lotions, hair gels, or sprays. Strong fragrances or colognes can be offensive to others that may have a sensitivity/allergy to odors.
- It is important for dental professionals to “practice what we preach” and avoid smoking if at all possible. If you smoke, however, no detectable odor of smoke on your person shall be permitted. This odor is offensive to many people.
- Make-up may be worn, but students are expected to look professional at all times. All mustaches and beards must be neatly trimmed at all times.
- FOOD POLICY: Food is not permitted in the classroom or clinic during any class session. Clear non-spill disposable and/or reusable water bottles with tightly sealable tops/lids are acceptable.
- FIELD TRIPS- If you are on a school field trip, it is expected that you dress appropriately and professionally. No short skirts or low cut revealing tops or bare midriffs.
PREGNANCY

The choice to declare pregnancy is completely voluntary. However, it is strongly recommended that the student inform the Program Coordinator. Additional radiation exposure control measures may be taken such as wearing a lead apron during patient exposure and wearing a monitoring device (dosimeter). If the student chooses NOT to declare the pregnancy, the student will continue to be awarded the same protective and preventive safety protocol that apply to other students in the dental assisting program.

ELECTRONIC DEVICES POLICY

The use of electronic devices (including recording devices, computers, cell phones, etc.) in the classroom and/or clinic is prohibited at all times unless prior approval is received from a faculty member AND the Program Coordinator. Taking and/or receiving text messages at any time during a class session is grounds for disciplinary action including but not limited to dismissal from the class session.

ALCOHOL, DRUG ABUSE, EMOTIONAL ILLNESS (Students Impaired by)

A student must be in optimal physical and mental health to ensure safe, effective care of patients. If a student’s physical or mental health is symptomatic of substance-abuse, the instructor has the right and responsibility to remove that student from the patient care area. According to the SCC Catalog regarding student conduct: “drinking or being in possession of or under the influence of alcoholic beverages on college campuses is prohibited without qualification”. Any student having such problems will be referred to the College Nurse/Counseling for further evaluation.

Any student who exhibits symptoms of alcoholism, drug abuse or emotional illness will be removed from the classroom or clinical setting when the student’s behavior and/or performance pose a danger to the safety and well-being of self or others. These behaviors may include, but are not limited to physical impairment, impaired judgment, mental/emotional impairment, disruptive actions and/or inconsistent behavior patterns. When a student exhibits any of the above behaviors the following will occur:

a. The student will be removed from the classroom or clinical area immediately.
b. The instructor will immediately report the incident to the Program Coordinator or Dean of Science and Allied Health.
c. Within 24 hours the student will make an appointment to see the Program Coordinator. At this time, the student will be referred for further professional assessment.
d. The student will be given a referral form indicating those behaviors that led to the classroom/clinical removal. The student must have this form signed by a licensed chemical dependency/mental health counselor indicating the student is safe to return to the program. This form must be submitted before the student can be readmitted.

When an instructor identifies a student as being impaired, and is a danger to self or others, and the student refuses to submit to the required assessment, the student may be suspended from the dental assisting program. If the student completes the required assessment and is diagnosed as being impaired, the student will be suspended from the dental assisting program for a minimum of one
semester and until such time proof of having received professional treatment and a certified release to return to the program can be provided.

After a minimum of one semester, the student may request readmission to the dental assisting program, according to the following requirements:

- **a.** The student must submit a written request to the Program Coordinator for re-admission.
- **b.** The student shall provide proof of active participation in a recognized program on a regular basis, evidence of rehabilitation and/or recovery, along with a release to return to the program at the time of request.
- **c.** The student will be required to participate in an on-going rehabilitative treatment program as a condition of readmission. Evidence of continued rehabilitation treatment will be provided on a schedule as determined by the Coordinator.
- **d.** Re-entry is on a space available basis. Theory and skills testing for re-entry apply.
- **e.** Failure to submit evidence of on-going treatment will result in program dismissal.
- **f.** A second documented incident of impaired behavior will result in dismissal from the dental assisting program.

**DISHONESTY**

Dishonesty is not tolerated in the dental assisting program under any circumstances. Dishonesty includes, but is not limited to cheating and plagiarism. Examples include:

- Copying, in part, or in whole from another student’s work
- Submitting work previously submitted in another course
- Allowing someone to copy from your material
- Allowing your work to be submitted by another student
- Correcting grammar, or typing a paper for another student and making corrections on their behalf and allowing them to submit the corrected version
- Submitting a paper purchased or otherwise acquired from the internet or a service
- Altering or interfering with grading
- Falsification of records
- Using technology for images of test materials, transferring test materials
- Incorporating ideas, words, sentences, paragraphs, or parts of another person’s writings without appropriate permission or credit (representing as your own)

This includes working on a project together, typing one copy, and submitting the same work with two or more student names.
Acts of plagiarism, cheating, and dishonesty violate both the Sacramento City College Student
Standard of Conduct and the Los Rios Community College District Policies and Regulations (2440 and
2441). One or more of the following steps will be taken to address this breach of the academic code:

- You will not receive credit for the assignment (or whatever consequences your instructor
  outlined in his/her syllabus for plagiarism, cheating, or dishonesty including but not limited to
  lowered final course grade up to and including an “F” - which then results in dismissal from the
  program).
- You will be required to complete a workshop on Academic Honesty offered through the Learning
  Skills & Tutoring Center in the Learning Resource Center. A schedule of these workshops is
  available at http://web.scc.losrios.edu/tutoring under the link “College Success Workshops.”
- You will be placed on an “Ed Plan” (see pages 47-48).
- You may be put on probation, suspended from the program or expelled from SCC.
- A record of this offense will be kept by the Program Coordinator and the Student Discipline
  Officer.

**STUDENT PERFORMANCE POLICY**

**GRADING PROCEDURES**

All classes are graded according to the following guidelines:

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>92 - 100%</td>
<td>A</td>
<td>EXCELLENCE (far exceeds what is required)</td>
</tr>
<tr>
<td>84 – 91.9%</td>
<td>B</td>
<td>PROFESSIONAL (additional effort made above what is required)</td>
</tr>
<tr>
<td>75 – 83.9%</td>
<td>C</td>
<td>ACCEPTABLE (met minimum requirements)</td>
</tr>
<tr>
<td>0 – 74.9%</td>
<td>F</td>
<td>UNACCEPTABLE</td>
</tr>
</tbody>
</table>

There are no “D” grades awarded in this program. Any final course grade below a 75% is a failing grade.

All proficiencies have a maximum of three attempts. If the proficiency is not passed by the third
attempt, the student will fail the proficiency and therefore will not pass that course.

If a student fails or is dropped from one class, but is passing and is not dropped from the others in the
semester, they can continue to finish out the other classes. They will not, however, be able to continue
to the next semester.

**Failure to Meet Course Objectives**

Students failing to meet course objectives during didactic (theory), laboratory, pre-clinical or clinical
instruction, will be notified of this unsatisfactory performance in writing. The instructor and the student
shall confer to discuss strategies for improving study skills, mastery of theory objectives, and/or
preparing for laboratory/clinical assignments.

The student not meeting didactic objectives will confer with the instructor to discuss an academic
learning plan. The instructor will keep the Program Coordinator informed regarding students who are
not achieving 75% in didactic classes during the semester.
The student not meeting **laboratory and/or clinical objectives**, will receive an immediate verbal notification followed by a written **Needs Improvement Plan** (see page 46) which will be given to help define what needs to be improved. The instructor will notify the Coordinator regarding the student’s demonstration of unsatisfactory performance. If performance does not improve, and the student fails to progress, the student will be placed on an **Educational Agreement Plan** (see page 47).

If, at any time, the instructor determines that a critical incident has occurred in the laboratory or clinical areas, the student will be placed directly on an **Educational Agreement Plan** (skipping the “Needs Improvement Plan”). This student will receive a verbal notification that he or she is on an Education Agreement and the written document will be presented by the Program Coordinator to the student within one week. Furthermore, the terms of the agreement are in effect at the time of verbal notification that they are on an **Educational Agreement Plan**.

The **Educational Agreement Plan** identifies the specific responsibilities the instructor and student will assume to achieve mastery of course objectives by the end of the semester. Any student with an unsatisfactory in lab or clinical performance will need to arrange a conference with the instructor and/or the Program Coordinator. Whether or not a student signs the **Educational Agreement Plan**, the terms of the agreement are in effect.

The Needs Improvement Plan and Educational Agreement Plan forms are also used for excessive absenteeism. The Program Coordinator will meet with all students placed on Educational Agreements for excessive absenteeism.

Students not meeting the final course objectives will receive a failing grade and cannot continue into the next semester.

If at any time during the semester a student’s performance is deemed clinically unsafe or grossly negligent by the instructor, the student will be dismissed from the lab or clinical area for the day, will receive an absence, and may receive an “F” course grade, resulting in dismissal from the program.

**Definitions**

**Unsatisfactory**: Performance is considered unsatisfactory when a student does not possess and exercise that degree of learning, skill, care and experience ordinarily possessed and exercised by students at the same level in the program.

**Unsafe Practice**: Performance is considered unsafe when a student’s action(s) reflect a substantial departure from that of other students at the same level and under similar circumstances and when the student’s actions have or could have resulted in harm to others.

**Grossly Negligent**: Performance is considered grossly negligent when a student’s behavior justifies the belief that there has been a conscious disregard or indifference for the health, safety or welfare of others; glaringly obvious omission or neglect of reasonable care, precaution, or action.

**Professional Misconduct**: Not in conformity with prevailing standards or laws.
Observation(s):
(INCLUDE SPECIFIC DAY, DATE, TIME; DESCRIBE STUDENT BEHAVIOR IN OBJECTIVE TERMS)

The above observation(s) indicate(s) that in order to progress toward meeting the course objectives, the student should seek the following learning experience(s):

1) 
2) 
3) 

If student does not meet these objectives or is deemed unsafe by the instructor the student will be placed on an Educational Agreement.

Student: ____________________________  Date___________________
Instructor ___________________________  Date: _________________
In keeping with the guidelines of the Sacramento City College Dental Assisting Program, the faculty is establishing the following Educational Agreement with:

(STUDENT NAME)

OBJECTIVES WHICH HAVE NOT BEEN MET or STANDARD OF CARE BREACHED:

OBSERVATIONS OF STUDENT ACTIONS:
(INCLUDE SPECIFIC DAY, DATE, TIME; DESCRIBE STUDENT BEHAVIOR IN OBJECTIVE TERMS)

IMPRESSION OF POTENTIAL HARM:

Since this behavior is not consistent with the standards and requirements of the course objectives, or as outlined in the Dental Assisting Student Handbook, the following is a statement of expectations.
The Student will:

Demonstrate the following level of achievement by (LAST CLINICAL DAY) unless deemed unsafe to practice by the instructor:

1)
2)
3)
4)
5)
6)

I have been counseled regarding my performance in the Dental Assisting Program. I understand that failure to achieve and sustain the agreed upon level of performance under stated conditions will result in my termination in the Dental Assisting Program.

________________________________  __________________________________________
Program Coordinator’s Signature   Student’s Signature
____________________________    ____________________________
Date                           Date

________________________________
On ___________________ (date) it was determined that student Met / Did Not Meet the terms of this educational agreement satisfactorily.

   Instructor's signature ______________________________
   Instructor’s name ________________________________
CONDITIONS OF RE-ENTRY INTO THE DENTAL ASSISTING PROGRAM

Student Categories

Students who leave the program prior to graduating will be classified as leaving:

1. “In good standing”
   The student leaves the program and has received and/or is currently receiving at least a “C” in all dental assisting courses at the time of his/her departure;

   or

2. “Not in good standing”
   A student will be considered “not in good standing” if one or more of the following conditions occur:
   a. The student previously received a grade of “D” or “F” in any course
   b. At the time a student leaves the program, they are earning a grade of “D” or “F” in any course
   c. The student is considered by the dental assisting faculty to be deficient in their clinical skills to a point where it is unsafe for them to work on patients.

Eligibility for Re-Entry

1. Any student who leaves the program “in good standing” may reapply to the program following the conditions and procedures listed below.

2. Any student who leaves the program “not in good standing” is ineligible for re-entry into the program.

Re-Entry Requirements

Students leaving the program “in good standing” with the intention of returning must satisfy the following requirements before re-entry:

1. Attend an exit-interview with the Dental Assisting Program Coordinator within one month of leaving the program to discuss barriers that may have hindered success and identify options to help eliminate or reduce these barriers.

2. Complete appropriate course work, assessments, etc. (as assigned by the Program Coordinator), that may help increase the chances of success in the future. This may include, but is not limited to:
   a. Critical thinking instruction
   b. College success / study strategies course
   c. Reading comprehension assessment & remediation
   d. ESL courses
   e. Learning disability and/or behavioral issue assessment
   f. Clinical dexterity exercises
3. Meet with the Program Coordinator to provide evidence of proficiency in all skills completed in previously passed courses. If proficiency is not able to be attained/achieved within set time frames the student will be ineligible for re-entry into the program.

4. Update/complete all entry documentations and requirements.

**Re-Entry Selection Process**

Students leaving the program “in good standing” can re-apply to the program utilizing the normal selection process available to all dental assisting applicants if they meet the current program selection criteria.

Students who gain entry via the re-entry process but again leave the program for any reason will not be eligible for re-entry under any circumstances.

**STUDENT RIGHTS**

**Student Participation/Representation**

The accreditation of dental assisting schools requires students have direct input into the formulation of the program's philosophy, course objectives, curriculum changes along with any other matters directly relating to students. Faculty and the administration value student involvement in all aspects of the dental assisting program.

Students are expected to complete the course/program evaluations distributed in class at the close of each semester. Objective and constructive student evaluation of course/program allows for faculty and administrative consideration of student assessment and suggestions.

Student representatives are encouraged to be part of the Sacramento City College Dental Advisory Committee.

**Guidelines for Problem Resolution/Student Grievance Process**

Students believing they have been treated unfairly and their rights have been violated can pursue a remedy or solution to the problem through the college student grievance process. Specific information related to the grievance process is available on the college website.

**Dental Assisting Students with Learning Differences**

In compliance with the Americans with Disabilities Act (ADA), dental assisting faculty will provide reasonable accommodations for students with disabilities that may affect their learning ability and test taking performance. Students are required to submit documentation from the medical authority or specialist who rendered the diagnosis. It must include description of disability and limitations or
recommended classroom accommodations/modifications. Documentation is submitted to the Disability Resource Center. Students requiring further information should view the college website.

**Emergency Calls**

In the event that a student receives an emergency call, an attempt will be made to reach the student. This does not pose a problem when the student is in Rodda South Building during class time. However, contacting a student in off campus clinical assignment is difficult due to the nature of the setting.

Please provide your childcare provider/family members with an alternate name to call in case of emergency. The office number is 916-558-2357 and should only be used in cases of a true emergency. Office hours are 8:00 am- 5:00 pm. Monday through Friday.

**CHILDREN ON CAMPUS**

For their own safety, children are not allowed in any of the dental classrooms or the clinic. If you must bring a child into the department (into the reception area of the clinic and/or faculty offices), they must be continuously supervised by an adult. See page 35 for further guidelines regarding non-student attendance on campus.

**HANDBOOK REVISION POLICY**

The faculty retains the right to revise the policies and procedures found in this handbook at any time deemed necessary. Any revisions made become effective on the date of the revision and will be made available to students.
SECTION FOUR
Emergency Procedures
EMERGENCY TELEPHONE NUMBERS

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire</td>
<td>(916) 433-1300</td>
</tr>
<tr>
<td>Police</td>
<td>(916) 264-5471</td>
</tr>
<tr>
<td>Graffiti Hotline</td>
<td>(916) 264-8819</td>
</tr>
<tr>
<td>Narcotics Tip Line</td>
<td>(916) 264-5796</td>
</tr>
<tr>
<td>Gang Tip Line</td>
<td>(916) 441-4264</td>
</tr>
<tr>
<td>Sutter General Hospital</td>
<td>(916) 454-2222</td>
</tr>
<tr>
<td>Poison Control Center</td>
<td>(800) 876-4766</td>
</tr>
<tr>
<td>Earthquake Response-American Red Cross</td>
<td>(916) 368-3130</td>
</tr>
<tr>
<td>National Center for Missing &amp; Exploited Children</td>
<td>(800) 843-5768</td>
</tr>
</tbody>
</table>

EMERGENCY PROCEDURES FOR DENTAL HEALTH LABORATORY

In the event of an emergency in the dental health lab, the student should follow the following procedures:

1. Give any immediate aid that is required.

2. If available, have a fellow student immediately summon an instructor. If another student is not available, go summon the instructor yourself once the patient is stabilized.

3. Stay with the instructor and assist in whatever way necessary. For example: take vital signs, retrieve first aid kit/oxygen, call rescue personnel, etc.

4. Know the location of the laboratory phone if the school nurse or 9-9-1-1 is needed. The numbers are posted by the phone.

EMERGENCY PROCEDURES FOR THE DENTAL HEALTH CLINIC

In the event of a medical emergency in the clinic, the following procedures should be followed:

1. The students need to assess the situation:
   a. Can this situation be handled by the student?
   b. Will the situation require assistance of a staff member?

2. If assistance is needed, the student should stay with the patient and say to a fellow near-by classmate: “I need an instructor immediately”. The fellow student should quickly excuse themselves and get the nearest instructor. Make it clear that the instructor is needed immediately.
3. Upon arrival, the instructor will question the student, question the patient, review the medical history and assess the situation.

4. If needed the instructor will request that the supervising dentist be notified. The messenger should make it clear that the dentist is needed “immediately”.

5. A student must stay with the patient during this entire procedure. During this time he/she will:
   a. Inform the instructor and/or dentist of any important information known about the patient.
   b. Take and monitor all vital signs.
   c. Assist the instructor and/or dentist as requested.
   d. If emergency drugs, (including oxygen) are needed, another near-by student will obtain them.
   e. If emergency personnel must be summoned, a near-by student will be asked to notify the program administrative assistant to call:
      1. The school nurse and/or Campus Police at Extension 2221 or (916)558-2221
      2. 9-1-1.

6. The student and/or instructor will stay with the patient until the situation is resolved or until emergency personnel arrive and take over the situation.

7. All information should be recorded on the patient’s medical history form on page 4 under Patient Reactions/Alerts. This information should be written in RED ink if appropriate.

**NEEDLE-STICK” INJURY PROTOCOL**

Protocol for a student injury on campus: Complete a non-employee injury form provided by the Clinic Administrative Assistant. We do not cover any expenses.

When a student is injured during externship it becomes a Workman’s Comp claim and is covered by the school.

- Notify the Program Coordinator ASAP
- Complete paperwork provided by the Program Coordinator
- Call Company Nurse at 888-375-9780 within 24 hours
- It gets filed as an “unknown” job status
- A claim is generated
- Student chooses facility to be tested from Workman’s Comp Benefits list
- Company Nurse will send facility approval
• Student goes to facility for initial testing
• Any follow up treatment after initial visit must be approved thru:
  York Insurance Services Group
  P.O. Box 619058
  Roseville, CA 95661-9058
  916-960-0928
• Place copy of completed documentation in student file
• Send original documentation to Science and Allied Health Division Office
• Include copy of student’s “Agreement to Participate / Risk Waiver
• No further follow-up is done by us – it is now handled as a Workman’s Comp claim and student is responsible to follow through.

**CAMPUS SAFETY TIPS**

At more than 20,000 students, Sacramento City College, like other campuses, functions like a small city. The same safety precautions taken in an urban area should be taken on campus to keep safe. Below are safety tips from the Los Rios Police Department at SCC (SCC College Police Department).

• Use the buddy system and the shuttle service when going to and from college parking lots.
• Don’t take unnecessary risks with personal safety. Always be aware of your surroundings.
• Report all suspicious persons or incidents to College Police (558-2221).
• Always safeguard and secure your personal belongings.
• Request safety lecture for crime prevention techniques and recent incident/crime trends information.
• Do not leave valuables in your vehicle. If unable to secure valuables, make sure they are not in view.
• Lock your vehicle and close all windows of the vehicle.
• If possible, secure steering wheel with steering lock.
• If possible, invest in anti-theft vehicle alarm system.
• Please park in college parking lots. They are much safer.

**EMERGENCY SERVICES**

**Campus Police**

In the event of an emergency, contact Campus Police at x2221 (off campus 558-2221) or use emergency telephones located throughout the campus which will connect you directly. The Campus Police are located at the base of the main parking structure and are there to assist you. Stop in if you need assistance with your vehicle or to report accidents, losses, or suspicious occurrences.

**Accident or Severe Illness**

Don’t panic. Call or send for assistance (call Campus Police at x2221 or Fire Department or Ambulance at 911). Campus Police are trained in this area and should be immediately notified regardless of who else is notified. First Aid Kits are located in both dental classrooms, the Dental Health Clinic, and the
Science and Allied Health Division office. One of the Program Coordinators will complete and file an accident report form.

**Emergency Calls**

In the event that a student receives an emergency call, an attempt will be made to reach the student. This does not pose a problem when the student is in Rodda South Building during class time. However, contacting a student in off campus clinical assignment is difficult due to the nature of the setting.

Please provide your childcare provider with an alternate name to call in case of emergency. The office number is 916-558-2357 and should only be used in cases of a true emergency. Office hours are 8:00 am-5:00 pm. Monday through Friday.

**Assault, Battery, and Miscellaneous Threats**

Immediately contact the Campus Police at x2221, or pick up an Emergency Telephone for assistance from Campus Police. Remain at the scene with the persons involved and any witnesses. Do not engage in physical contact with other persons involved in a fight. Campus police officers will break up fights and make arrests if necessary. Contact the Campus Police to provide first aid and/or call an ambulance, if warranted.

**Fire**

Call the fire department at 911. Call the Campus Police at x2221. Extinguish fire if possible. If necessary, pull fire alarm and evacuate building. Close all doors leading into main hallways and close all office doors. Pull window drapes or shade. “All Clear” will be sounded by Campus Police or administrator, if necessary. During fire drills students must follow procedures to vacate the building as directed by the instructor, division dean, and campus police.

**Power Failure**

Notify the Operations Office at x2544 during the day, or the Instructional Services Office at x2281 during the evening. Then call the Boiler Room at x2221 and the Campus Police at x2221. Emergency flashlights are located in the Dental Health Clinic and the Division Dean’s office. Most buildings are equipped with emergency lighting that will go on automatically or can be immediately turned on by boiler room personnel or a campus maintenance technician. In the case of a power disruption caused by a rotating blackout, the college recommends that all students remain in class until power is restored or the class time period is over, in order to ensure safety. The reason for this request is that lights will be out in parking lots, and traffic lights near the college may not be operating. All emergency phones will remain operable. Campus phone systems will remain operable on back up battery power for up to four hours.

**Bomb Threat**

In the event of a bomb threat, The Program Coordinator or the Campus Police will decide upon a plan of action. This may involve evacuation of the building or campus, evacuation of a specific area, a preliminary search, or no action.
**Nuclear Disaster**

All campus buildings offer protection from radiation. The Municipal Air Raid Signal Systems will alert staff and students to take protective action. Individuals should seek shelter away from windows and await building clearance instructions.

**Earthquake**

Stay in the building until the tremor stops. Take cover under furniture or in doorways. Keep away from windows, overhead fixtures or objects which may fall on you. Stay in the building and await instructions from campus administrators.

**Tornado / Severe Windstorm / Flood**

Remain in the building until instructions are issued by campus faculty or administrators.
EMERGENCY RESPONSE ON CAMPUS

DIAL 2221 (CAMPUS PHONE) OR (916) 558-2221
(CELL OR PAY PHONE)

PRESS “0” TO BYPASS THE MESSAGE AND BE CONNECTED DIRECTLY TO THE COLLEGE POLICE DISPATCHER

This is the Los Rios Community College District Police dispatch number. It is answered 24/7. All emergency calls should go through this number.

IMPORTANT: Be prepared to give the following information:

* Type of emergency
* Location of emergency (campus…)
* Victim information, if a medical emergency
* Your name and contact information
* Stay on the line until instructed to hang up

The more information you give to dispatch, the faster appropriate help will arrive on scene.

2. Call 911 only in the event of a life threatening condition, such as:

   No pulse
   No breathing
   Unconscious
   d) Severe bleeding
   e) Shock
   f) Poisoning

3. District College Police dispatch will notify the appropriate campus police department, activate emergency medical services (EMS) via 911 if necessary and the Health Center if appropriate for health-related emergencies.

4. In the event that EMS has already been activated by someone other than College Police, please tell dispatch when you call. Dispatch will notify College Police and College Police will direct EMS to the appropriate location.

5. College Police are the 1st responders and will assess any emergency. A college nurse will also respond in a health-related emergency when available.

6. If 911 is not needed:

   Encourage able persons to go to the Health Center for assistance.
   Encourage able persons to have someone pick them up and take them home or to seek off campus medical care.
   College Police or College Nurse may transport the person to the Health Center for further care if appropriate.
SECTION FIVE
Patient Requirements
OVERVIEW

Students of the Dental Assisting Program are required, as part of the curriculum and program experience, to be a patient for fellow students during many of the various courses and for non-invasive procedures. In addition, you are required to provide patients for a number of procedures at various times throughout the program. The following chart provides information regarding procedures which require outside patients, general requirements for the procedure, approximate time required for each procedure, and the course in which this procedure is done. Note that most of the procedures requiring patients will be done during DAST 115 in the Spring Semester.

<table>
<thead>
<tr>
<th>COURSE</th>
<th>PROCEDURE</th>
<th># of PTS</th>
<th>GENERAL INSTRUCTIONS</th>
<th>APPROX. LENGTH OF PROCEDURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAST 102 Fall</td>
<td>Alginate Impressions</td>
<td>1</td>
<td>Patients must have multiple restorations and/or missing teeth.</td>
<td>1 hour</td>
</tr>
<tr>
<td></td>
<td>Mouth Mirror Inspection &amp; Pt. Charting</td>
<td>1</td>
<td></td>
<td>2 hours</td>
</tr>
<tr>
<td>DAST107 Fall</td>
<td>X-Ray Patients</td>
<td>4</td>
<td>Four patients are required during the fall semester, however, you can use a fellow student in the classroom as one of the patients if they meet the patient requirements listed below.</td>
<td>2 hours</td>
</tr>
<tr>
<td>DAST 113 Spring</td>
<td>X-ray and photography Patients</td>
<td>4</td>
<td></td>
<td>90 minutes</td>
</tr>
<tr>
<td></td>
<td>Patient Assessment</td>
<td>1</td>
<td>Patient is for capstone project. It is encouraged that the capstone patient participate as a patient as much as possible for x-ray, CP, sealants, etc. And will be required to attend a screening session.</td>
<td>3 hours</td>
</tr>
<tr>
<td></td>
<td>Coronal Polish and oral hygiene instructions</td>
<td>6</td>
<td>Your first two patients may take up to 3 hours, but your last 4 should take a maximum of 90 minutes.</td>
<td>90 minutes – 3 hours</td>
</tr>
<tr>
<td>DAST 115 Spring</td>
<td>Pit and Fissure Sealants</td>
<td>2-4</td>
<td>Your first two patients may take up to 3 hours, but your last 2 should take a maximum of 90 minutes. Patients may be 10 years of age or older. The number of patients required depends on the number teeth able to be sealed on each patient.</td>
<td>90 minutes – 3 hours</td>
</tr>
<tr>
<td></td>
<td>In-Office Bleaching</td>
<td>2</td>
<td>You may use a fellow DA student if they meet the requirements listed below.</td>
<td>1.5 hours</td>
</tr>
</tbody>
</table>
PARENT / GUARDIAN POLICY

All patients must be outside patients (not fellow dental assisting students) unless otherwise specified. Age restrictions apply for each procedure.

When a patient is a minor, a parent/guardian signature is necessary BEFORE the child can be examined or treated in the SCC clinic. Parents and siblings are DISCOURAGED from waiting with the patient in the treatment area. Most children will be more receptive to you without these distractions.

X-RAY PATIENTS

A total of eight x-ray patients are needed. Four of these patients will be done in the fall semester and four will be done in the spring semester. These x-rays are called a full-mouth series (FMX or 18 x-rays). The patient will be given a copy of the x-rays upon completion that can then be used in their own dental office. The following are additional guidelines regarding patient x-rays:

- Patient cannot have had an FMX within the last three years. Please specify with your patients that this FMX is EIGHTEEN (18) x-rays and are completed all at one appointment. Many offices do not take a complete FMX (they use a panoramic machine instead). An FMX CAN be taken if the patient has had a few x-rays here and there, and/or a panoramic x-ray taken within the previous 3 years.
- All patients must have a completed health history form with all required signatures prior to their x-ray appointment. This health history form will be provided during DAST107.
- All health history forms require the signature of EITHER the patient’s own dentist or our Supervising Dentist. This signature is providing authorization to have an FMX completed on the patient and is a legal requirement in the state of California.
- All patients must be at least 14 years of age. Patients between the ages of 14 and 18 MUST have a parent or guardian present at the time of exposure and must have parental consent (signature) on the health history form.

All x-rays will be evaluated by the attending faculty member. No more than THREE retakes are allowed on each patient. In the event that more than three retakes are required, a new patient will be required.

We take both conventional and digital x-rays in our program. If conventional x-rays are taken, the patient will receive a set to take with them when they leave. If digital x-rays are taken, the set can be e-mailed electronically to any e-mail address they provide.
PIT AND FISSURE SEALANTS

Four patients are needed for Pit and Fissure Sealants. Pit and fissure sealants are coatings that are put on the surfaces of the teeth where there are cracks or crevices (pits and fissures) that are likely to trap bacteria and food and therefore are areas susceptible to decay. This is a wonderful FREE service for anyone who fits the criteria listed on the next page:

1. A negative health history
2. Must have at least two “virgin” (no decay or restorations) molars in two different quadrants plus an additional two areas that can be sealed
3. Must not have TMJ issues or problems staying open for more than 30 minutes at a time.

When a patient has multiple molars in each quadrant that are “virgin”, this patient may qualify as 1.5 or 2 patients. Patient selection and determination will be done faculty members during the spring semester.

PATIENT HEALTH HISTORY REQUIREMENTS

Blood Pressure Policy - Adults

The following parameters will be used a guideline regarding patients treating in the clinic with high blood pressure.

<table>
<thead>
<tr>
<th>Systolic Category</th>
<th>Blood Pressure Reading</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal</td>
<td>120</td>
<td>Proceed with treatment</td>
</tr>
<tr>
<td>Pre-hypertension</td>
<td>120-139</td>
<td>Proceed with treatment</td>
</tr>
<tr>
<td>Mild Hypertension</td>
<td>140-159</td>
<td>Proceed with treatment</td>
</tr>
<tr>
<td>Moderate Hypertension</td>
<td>160-179</td>
<td>Consult with faculty and supervising Dentist</td>
</tr>
<tr>
<td>Severe Hypertension</td>
<td>180-209</td>
<td>Do Not Treat, refer for consultation with Physician</td>
</tr>
<tr>
<td>Very Severe Hypertension</td>
<td>&gt;210</td>
<td>Do Not Treat, refer for consultation with Physician</td>
</tr>
<tr>
<td>Diastolic Category</td>
<td>Blood Pressure Reading</td>
<td>Action</td>
</tr>
<tr>
<td>-------------------------</td>
<td>------------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>Normal</td>
<td>80</td>
<td>Proceed with treatment</td>
</tr>
<tr>
<td>Pre-hypertension</td>
<td>80-89</td>
<td>Proceed with treatment</td>
</tr>
<tr>
<td>Mild Hypertension</td>
<td>90-99</td>
<td>Proceed with treatment, inform faculty</td>
</tr>
<tr>
<td>Moderate Hypertension</td>
<td>100-109</td>
<td>Do Not Treat, refer for consultation with Physician</td>
</tr>
<tr>
<td>Severe Hypertension</td>
<td>110-119</td>
<td>Do Not Treat, refer for consultation with Physician</td>
</tr>
<tr>
<td>Very Severe Hypertension</td>
<td>&gt;120</td>
<td>Do Not Treat, refer for consultation with Physician</td>
</tr>
</tbody>
</table>

**Fen-Phen**

Millions of people have taken fen-phen or Redux medications. According to the United States Food and Drug Administration, as many as 32% of the diet drug users have developed cardiac valve damage which may place at risk for *Bacteremia-induced infective endocarditis*.

Endocarditis is an inflammation that occurs when procedures can allow the entrance of bacteria in the bloodstream. Simple dental procedures like cleaning, placing orthodontic bands and scaling as more invasive procedures like root canals, tooth extractions and dental implants may require antibiotic premedication prior to dental procedures.

Student will advise patients of health risks if they have a history of fen-phen use.

A physician’s clearance or antibiotic premedication is required prior to treatment as a participating patient in the SCC dental clinic.

**Hepatitis B**

All students should have received a hepatitis B vaccination prior to the start of the fall semester. This vaccination is important and is highly recommended. In the event that the student had declined the vaccination series, the Program Coordinator should be consulted if the student’s patient is Hepatitis B Positive.
Hepatitis C
According to the Center for Disease Control (CDC), the risk for occupational transmission of Hepatitis C (HCV) is rare. HCV is not transmitted efficiently through occupational exposures to blood. All treatment on identified HCV persons will continue to proceed using the utmost care in universal standards.

Herpetic Lesion Policy
Each case will be considered individually with the student’s clinical instructor. In most cases, the patient will be rescheduled at a later date when the lesions have healed.

Treatment of HIV / Aids Patients

Duty to treat: As a general rule, health care providers have a legal obligation to treat HIV-infected individuals, including patients of record and other persons seeking treatment. Under the Americans with Disabilities Act of 1990, a person with HIV is considered as having a “disability”, as are persons who are perceived to have AIDS.

Scope of Duty and referrals: Health care providers need not treat beyond their area of expertise and referrals to appropriate agencies such as a local AIDS clinic, dental school, or hospital may be required.

Confidentiality: Health care providers may discuss a patient’s HIV status or related information with a third party only when authorized by the patient.

Providers may inquire about HIV status during a health history evaluation and on the appropriate medical history form.

Prophylactic Premedication Recommendations for People with Heart Conditions

The American Heart Association (AHA) recommendations are meant to reduce the risk of infective endocarditis (pronounced end-o-car-die-tis). Infective endocarditis (IE) is an infection of the lining inside the heart or the heart valves.

In the past, a number of heart conditions were thought to put patients at risk for IE. When writing the new recommendations, the AHA looked at published research and other scientific articles. They found that fewer conditions were associated with IE than previously thought. As a result, a smaller group of patients need to premedicate before dental treatments.
**Why did the recommendations change?**

After looking at the published scientific reports and articles, the AHA concluded that:

- The risks of adverse reactions to antibiotics outweigh the benefits of prophylaxis for most patients. Adverse reactions can range from mild (rashes) to severe (breathing problems that could result in death).
- When all the study results were looked at together, it wasn’t clear that premedication prevented IE.
- Bacteria from the mouth can enter the bloodstream during daily activities like brushing or cleaning between the teeth. Once in the bloodstream, it can travel to the heart. People at risk of infection might be more likely to develop IE from these activities than after a dental treatment.
- Bacteria that cause infections can become resistant to antibiotics if those drugs are used too often. Because of this, doctors try to limit the use of antibiotics.

The current recommendations include use of preventive antibiotics before certain dental procedures for people with:

- Artificial heart valves
- A history of infective endocarditis
- A cardiac transplant that develops a heart valve problem
- The following congenital (present from birth) heart conditions:*
  - unrepaired or incompletely repaired cyanotic congenital heart disease, including those with palliative shunts and conduits
  - a completely repaired congenital heart defect with prosthetic material or device, whether placed by surgery or by catheter intervention, during the first six months after the procedure
  - any repaired congenital heart defect with residual defect at the site or adjacent to the site of a prosthetic patch or a prosthetic device.

* Check with your cardiologist if you’re not sure whether or not you fall into one of these categories.

People who took prophylactic antibiotics in the past but no longer need them include those with:

- Mitral valve prolapse
- Rheumatic heart disease
- Bicuspid valve disease
- Calcified aortic stenosis
- Congenital (present from birth) heart conditions such as ventricular septal defect, atrial septal defect and hypertrophic cardiomyopathy

**Prophylactic Premedication Recommendations for People with Total Joint Replacements**

Recommendations from the American Academy of Orthopedic Surgeons (AAOS) are meant to reduce the risk of infections at the site of an artificial joint. They apply to people who have total joint replacements. **Patients who have pins, plates or other orthopedic hardware are not affected.**
AAOS recommends that dentists and physicians should consider whether patients who have total joint replacements should take antibiotics before certain types of dental procedures.

The SCC Dental Clinic policy is all patients with total joint replacement must be premeditated unless the patient’s physician or orthopedic surgeon provides written documentation that prophylactic antibiotic is not needed.

**Pregnant Patients**

Patients who are identified as pregnant, are best scheduled in the second trimester. Students are advised to consult with the Program Coordinator should special circumstances be present.

**PARKING PERMITS**

Patients of the dental clinic may park anywhere on campus that is designated “faculty and staff parking.” They must, however, obtain a parking permit from either a faculty member or the Administrative Assistant and display this permit on the dashboard of their vehicle.

The Parking Permit must have no cross outs. A new Parking Permit MUST be used if a mistake has been made. Put in the date of the appointment, patients first and last name, and ensure there is a faculty or staff signature on the bottom. The permit must have the length of time allowed entered in the space provided on the lower right hand corner of the permit.

Parking Permits are for PATIENTS ONLY, NOT STUDENTS. Please DO NOT ask for a parking permit if you are a student. SCC students are not allowed to park in the staff/faculty lots; they must use SCC student parking. Our Dental Department will lose parking privileges for our patients if the Parking Permits are abused.

**PATIENT SCHEDULING**

Patients will be scheduled in conjunction with class activities. Once a patient has been scheduled, they are asked to provide at least 24 hours’ notice if they will be unable to make their appointment. Patients who are more than 10 minutes late for their appointment will NOT be seen and may be rescheduled for a later date.

**HIPPA (Patient Privacy)**

Under no circumstances will patient confidentiality be breached. This includes, but is not limited to, photocopying patient information, discussing patients other than in conference rooms and classrooms, or removing patient information from dental department.

Though clauses in the HIPPA regulations exempt the Dental Health Clinic at SCC from having to follow HIPPA regulations, we make every effort to keep all patients’ private information private. Students are required to sign a “Patient Privacy Policy”. See page 17.
SECTION SIX
Exterionships
OVERVIEW

An externship is basically “on-the-job” training in which Sacramento City College partners with various dental offices in the Sacramento area to provide hands-on experience, education and training to the dental assisting students. This unique work experience is undoubtedly the most critical component to our educational process. Students are not only provided with the opportunity to put into practice what they have already learned, but are also provided the opportunity to learn much more than we could ever teach them in the classroom setting.

SCC provides the unique opportunity for dental assisting students to do TWO different externships. The first one is scheduled for the first three weeks of the spring semester. The emphasis is to get an idea of the big picture of dental assisting, as well as perform entry level functions such as sterilization, patient seating, obtaining vital signs, and treatment set-ups. The second externship is approximately six weeks during the summer session following the student’s second semester. In this externship the student should be allowed to perform both entry level procedures as well as all RDA duties performed regularly in the externship office.

The intent of the externship experience is to provide a learning environment in the office setting instead of the classroom. As such, students are not employees of the office but are unpaid volunteers who are working and learning simultaneously. This synergistic relationship is beneficial for all parties involved as long as everyone works within their expected roles. Students must think of this experience as an extended working interview. In many cases, students perform so well during their externship that they are offered a permanent position at the end of their externship.

Students must be in uniform during their externship and must wear their SCC nametag at all times.

Externship assignments will be completed by the Program Coordinator in partnership with each individual student and the dental office. Every attempt is made to identify and assign the type of office best suited to each student’s unique characteristics, abilities and desires. A faculty member will visit the office once a week to assess the student’s progress and ensure that the experience is beneficial for all parties involved. In the event that the partnership between the student and office is not an agreeable one, the Program Coordinator should be notified immediately. Action will be taken keeping the best interest of the student as well as the interests of the patients and the office in mind.

The externship experience is FULL-TIME and is a class; therefore attendance is mandatory as in all dental assisting classes. Students must be working in the office during any and all hours the office is open unless previous arrangements have been made with the office and with the Program Coordinator’s approval.

The Accreditation standards from the American Dental Association require the externship experience to be a total of 300 hours. Since the number of hours a student will be able to complete per week varies from office to office, the required 300 hours may not be completed by the end of DAST129. In this case, students are required to enroll in DAST295, an independent study course, in order to continue working in the office until the hours are complete.

Students will be evaluated by the office using an evaluation sheet such as the example on pages 75-76. If these evaluations indicate that the student has not performed/progressed satisfactorily, the student may fail their externship. A failed externship is as all other classes; a failed grade precludes a student from continuing in the program.
November 29, 2012

Dear Doctor:

Thank you for your willingness to become an extension of our Dental Assisting Program by allowing our student to complete an externship in your office from Wednesday, **January 18** to Friday, **February 18, 2012**. This is the first of two such externships the students must complete in order to graduate from our program. At this point, the student should have basic knowledge of chairside dental assisting skills such as: oral evacuation and passing instruments, mixing materials and sterilization/disinfection procedures. The students have taken one digital FMX on a patient utilizing the XCP kit, one conventional FMX on a patient utilizing a snap-a-ray, and 10 FMX’s on a Dexxter manikin both digitally and conventionally. If you choose to allow the student to take x-rays in your office, the procedure should be supervised by a knowledgeable staff member.

Because you are an extension of the college program, the student may legally perform all DA and RDA duties allowed in California except for coronal polishing and pit and fissure sealants. However, the emphasis of this externship should be basic chairside assisting. We ask that within the parameters of your practice, the student be able to assist you chairside as much as possible as we are not able to give them this experience here at the College.

Attached you will find three evaluation forms along with a timesheet for their entire externship experience. Please complete one evaluation form per week on the progress of the student. These forms may be completed by yourself or a supervising RDA and are an important part of the student’s grade. The time sheet should be filled out daily, but will not be collected until the end of the externship.

In addition, one of our faculty members will be coming by on a weekly basis to monitor the progress of the student and communicate with you and your staff. Should a problem arise between our visits, please call me at 558-2038.

Again, thank you for participating in our externship program.

Sincerely,

**Melodi Randolph**

Melodi Randolph, RDAEF2, CDA, OAP, BS, MEd
# Externship Evaluation – WEEK 1

Dental Assisting Student: ______________________________________________
Office: _____________________________________________________________
Date of Assignment: **JANUARY 23, 2012 – JANUARY 27, 2012**

Please rate according to the following system:

- **4** = Excellent Performance – (no verbal correction needed)
- **3** = Above Average – (corrected or assisted once)
- **2** = Average – (corrected or assisted less than 3 times)
- **1** = Below Average – (3-5 corrections)
- **0** = Unacceptable – (corrected more than 5 times)
- **OB** = Observed only
- **NA** = Not applicable (procedure not performed in this office)

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Print Name and Title of Evaluator Eval Initials Date
SACRAMENTO CITY COLLEGE  
DENTAL ASSISTING PROGRAM

Externship Timesheet

Dental Assisting Student: 

Office: 

Date of Assignment: JANUARY 18, 2012 – FEBRUARY 24, 2012

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<th>Hours (8am-4pm)</th>
<th>Hours worked</th>
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<th>Hours worked</th>
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TOTAL HOURS WORKED
WELCOME TO SAC CITY COLLEGE,
THE DENTAL ASSISTING PROGRAM,
AND THE FIRST EXCITING STEPS ON YOUR JOURNEY TO A REWARDING NEW CAREER!