



COASTAL ALABAMA

COMMUNITY COLLEGE

DENTAL ASSISTING ORIENTATION & PROGRAM HANDBOOK

2025/2026 Academic Year

Table of Contents

Introduction.....	4
Disclaimer.....	4
Nondiscrimination Policies.....	4
Accreditation.....	5
Admission Requirements	6
Student Guidelines	
Attendance	7
Classroom Interaction	7
Access to Instructors.....	7
Canvas	7
Records Due Date	7
Student Record Maintenance	8
Service-Learning Hours.....	8
Academic Honesty/Student Conduct.....	8
Audio and Video Recording	8
Electronic Devices	8
Copier Usage	9
Minors on Campus	9
Accommodations for Americans with Disabilities.....	9
Safety, Health, and Security.....	9
Social Networking Policy.....	9
Testing and Grading Guidelines	
Grading/Grade Distribution.....	9
Exam Procedures.....	10
Make-Up Exams/Missed Exams.....	10
Mid-Term Progress	10
Final Exam Schedule	10
Incompletes	10
Progression Policies	
Definitions.....	10
Progression	10
Transfer Policy.....	11
Program Completion	11
Termination	11
Withdrawal	11
Lab Guidelines	
Campus Laboratory Guidelines	11
Lab Attire	12
Lab Skills Validation	12
Clinical Guidelines	
Clinical Attire	13
Clinical Orientation	14
Clinical Leave & Attendance	14
General Clinical Guidelines	15
Clinical Evaluation	15
HIPAA.....	16
Student Grievances/Complaints.....	16
Accidents and Injury.....	16
Student Health and Safety	16
HIV or HEP B Reporting	17

Health Science Program Policies	
Essential Eligibility Criteria	17
Background Check Policy	21
Drug Screen Policy.....	23
Appeals for positive drug screen.....	25
Estimated Program Costs	26
Student Resources	26
Committees and Organizations	26
DANB Certification	26
Appendix A	
Infection Control Guidelines	29
Bloodborne Pathogens and Infectious Disease Guidelines	39
Ionizing Radiation Guidelines	41
Standards for Protection Against Radiation.....	45
Radiation Information and Waiver	47
Post Exposure Guidelines	48
OSHA Class Verification Form	53
Appendix B	
Grade Distribution	58
Forms	
Affirmation and Release.....	60
Consent to Maintain Healthcare Records.....	61
Flu Vaccine and Records Consent	62
Hepatitis B Vaccination Information	65
Request for Instructor Review of Test Item.....	66
Coaching and Feedback	67
Probation/Misconduct	68
Leave Request Form	69

COASTAL ALABAMA COMMUNITY COLLEGE DENTAL ASSISTING PROGRAM HANDBOOK

Introduction

WELCOME TO DENTAL ASSISTING! You are about to embark on a professional career that can be both personally satisfying and rewarding with stable and enjoyable employment. The Dental Assistant helps the dentist with the prevention, diagnosis, and treatment of dental disease and with the restoration of tooth structures to a state of normal function and beauty. Dental Assistants are educated as generalists and may, therefore, serve all areas of the practice or may perform the more specialized duties of the chairside assistant. Coastal Alabama Community College will provide the initial step in a life-long process of learning about dental assisting.

The purpose of this handbook is to provide dental assisting students with information regarding the Dental Assisting Program's guidelines. The Dental Assisting Program operates within the policies of the Alabama Community College System (ACCS) and Coastal Alabama Community College (Coastal Alabama). Dental Assisting students are obligated to follow all policies and procedures as detailed in the College's Policy and Procedure Manual. Additional guidelines and provisions are detailed in the Dental Assisting Program Handbook, College Catalog, and Coastal Alabama Student Handbook.

Dental assisting students are responsible for being informed and for following the guidelines in this handbook. This handbook is applicable to each dental assisting course in the curriculum. The dental assisting faculty will be available to discuss any concerns regarding the handbook. No guidelines are infallible and if any are found to be inoperable, the faculty shall welcome constructive suggestions for change. The faculty bid you a sincere and warm welcome as you enter the program.

Disclaimer

This program handbook is intended to be a fair summary of matters of interest to students and should be used in conjunction with ACCS policy, the [College Policy and Procedure Manual](#), the [College Catalog](#), and the Coastal Alabama Student Handbook. Readers should be aware that (1) this handbook is not intended to be a complete statement of all procedures, policies, rules, guidelines, or regulations; (2) the College reserves the right to change, without notice, any academic or other requirements, course offerings, course contents, programs, procedures, policies, rules, and regulations that may be contained in the handbook; and (3) changes can be made to other departmental and clinical procedures, policies, rules, and regulations, whether or not contained in the handbook, that may be applicable to students in this department.

Nondiscrimination Policies

It is the policy of Coastal Alabama Community College to ensure compliance with Alabama Community College System (ACCS) [Board Policy 601.01](#). The Dental Assisting Program complies with Coastal Alabama Policy [2.06](#).

Coastal Alabama Community College is an Equal Opportunity Educator and Employer. It is the policy of the College that no student or other person because of age or race/color, national origin, sex, religion, disability, or the like shall be excluded or limited from participation in or be denied the benefits of any college program or activity. Coastal Alabama Community College facilities and devices are in compliance with the Americans with Disabilities Act (ADA). Coastal Alabama Community College complies with non-discriminatory regulations under Title VI, Title VII, and Title IX of the Civil Rights Act of 1964; Title IX Educational Amendment of 1972; Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990.

ACCREDITATION

College Accreditation

Coastal Alabama Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award the Associate degree. Coastal Alabama Community College also may offer credentials such as certificates and diplomas at approved degree levels. Questions about the accreditation of Coastal Alabama Community College may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, by calling (404) 679-4500, or by using information available on [SACSCOC's website](#).

Program Accreditation

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

The Coastal Alabama Community College Dental Assisting Program is operated with the approval of the Board of Dental Examiners of Alabama.



BOARD OF DENTAL EXAMINERS OF ALABAMA
Stadium Parkway Office Center-Suite 112
5346 Stadium Trace Parkway
Hoover, Al 35244-4583
PHONE 205-985-7267
E-mail: bdeal@dentalboard.org

PROFESSIONAL ASSOCIATIONS

The American Dental Assistants Association (ADAA)
National Press Building
529 14th Street NW, Suite 1280
Washington, DC 20045 USA
(410) 940-6584
<https://www.adaausa.org>

ADMISSIONS REQUIREMENTS:

1. Have unconditional admission to the College and be an active student in good standing (minimum, cumulative 2.0 GPA).
2. Eligibility for ENG 101, if not already completed.
3. Submit official transcripts from all colleges/schools attended, including high school, to the registrar or admissions office by the application deadline, July 15.
4. Submit a completed Dental Assisting Program application by stated deadline.
5. Meet essential eligibility criteria.
6. Submit required form for observation of a dental assistant completing duties at a dental office (see Coastal Alabama Dental Assisting Resources page).

Selection Criteria:

While not all core academic courses listed below are required prior to acceptance, it is strongly suggested they are completed prior to program admission to improve student success. Completion of the courses and the above criteria does not guarantee admission into the program. There is a class size limit of 24 students. If needed, prospective students are selected for program admission using a points system in which applicants are rank-ordered using the metrics below:

1. 3 points for an A, 2 points for a B, and 1 point for a C in MTH 116 or higher, ENG 101, and BIO 103.
2. 1 point for a C or higher in CIS 146, PSY 200, SPH 106 or 107, SOC 200, and a humanities/fine arts elective.

Additional Information:

Upon provisional acceptance into the Dental Assisting Program, students are required to provide the following: Drug screen, background check, physical exam documenting the ability to meet essential functions/eligibility criteria, record of immunizations, proof of medical insurance, and American Heart Association BLS CPR certification for the healthcare provider. Accepted students will receive a link to the online compliance platform, CastleBranch, to upload these items.

Clinical agencies reserve the right to deny clinical clearance, which may deem a student ineligible for program participation.

Dental Assisting testing/lab fees may be assessed for select courses.

Note: Students desiring to obtain BLS CPR certification at Coastal may choose to enroll in the optional EMS 100 course. American Heart Association BLS CPR may be obtained through an alternate training agency, if preferred.

CLASSROOM GUIDELINES

Attendance

The Dental Assisting Program complies with Coastal Alabama Policy [Attending Class Policy](#). Only approved students may attend program courses. Class attendance is regarded as an obligation as well as a privilege. Absences disrupt a student's orderly progress in a course and significantly diminish the quality of group interaction in class. There is also a high correlation between the number of absences and the final grade. Although an occasional absence may be unavoidable, it in no way excuses a student from meeting the requirements of the course. Participation in an institution-sponsored activity is not regarded as an absence. All students are still responsible for preparing all assignments for the next class, for completing work missed, and for obtaining the material or audiovisuals for that class. Students are encouraged to study at least one hour per course credit hour (i.e. 3 hours per week for a 3 credit hour course).

Classroom Interaction

Instructors are responsible for providing an atmosphere conducive to learning. The instructor may temporarily or permanently suspend a student whose behavior jeopardizes orderly learning for the class. While discussions and questions are encouraged at appropriate times, interactions are to be respectful. Unsolicited talking, eating, sleeping, and reading unrelated material during class may be considered rude and disruptive and may be grounds for dismissal from the class at the instructor's discretion. Students dismissed from a class must meet with the class instructor or Program Director before being allowed to return.

Access to Instructors

Students will be able to meet their instructor during designated office hours/tutoring hours. Office hours are posted outside each faculty member's office, in the course syllabus, and Canvas. If a meeting during office hours is not possible, the student should schedule an appointment with the instructor. Students must schedule appointments with faculty at a time that is mutually convenient for both the student and faculty. Appointments should be kept by both parties; if circumstances prevent this, the person unable to make the appointment should contact the other and attempt to reschedule. If electronic communication is utilized, instructors will only be able to communicate with students using the students' official school email address or Canvas due to the Family Educational Rights and Privacy Act (FERPA).

Canvas (Web-enhancement)

A PC or MacBook laptop with a webcam, microphone, and access to high-speed internet are required for Dental Assisting Programs. Canvas is the learning management system used by the College. Students are expected to check Canvas daily to stay current with classroom assignments. All Canvas tools are for class instructional use. All comments and postings not instructional in nature will be reviewed and may be administratively deleted. Students who fail to comply with this policy may be denied access to class with no refund and may be subject to the College's academic code of conduct. It is advised that students do not disclose their log-in to any other individual. Disclosure may compromise the integrity and security of the system and its contents. Disclosure may result in disciplinary action.

Records Due Date

The Dental Assisting Program complies with Coastal Alabama Policy [Vaccination Policy](#). Immunizations, CPR, drug testing, background screening, and proof of medical insurance are tracked through our program administrators or a web-based system called CastleBranch. All records are to be submitted to CastleBranch or as directed by the assigned due date. Students will receive email notification from CastleBranch or the appropriate administrative assistant. Students will not be allowed to attend classes or clinicals until requested information has been received. It is the responsibility of the student to verify that records are complete. Clinical facilities may require copies of student records in order to provide clinical clearance.

Student Record Maintenance

Students should keep the Dental Assisting Program and Office of Admissions updated on any changes in name, address, or phone number by completing the [*Student Information Change Request Form*](#).

Service-Learning Hours

Coastal Alabama Dental Program believes in providing opportunities for service-learning/community service activities. These opportunities allow students to foster benevolence and engage in reflection activities that serve the community while enhancing civic engagement. Service-learning hours must be hands-on. Each student is required to participate in 8 hours of service learning/community service. Examples of opportunities include: set up or clean-up for a college activity or fundraiser, visiting the elderly in a nursing home, reading to small children in a public library, campus coat drive, food bank volunteer, dental clinic volunteer, etc.

Academic Honesty/Student Conduct

The Dental Assisting Program complies with Coastal Alabama Policy [*Student Code of Conduct*](#). Academic honesty is absolute in order for the student to advance in the program. Because of the nature of the healthcare profession, dishonesty or unprofessional conduct could affect the health or safety of clients. To promote professional conduct and personal integrity, it is imperative that each student do their own work. Students who obtain passing grades through dishonest means may compromise client safety. Students who witness dishonest behavior of a peer, or other healthcare employee, should report it to the course instructor. Penalties for academic dishonesty may range from a reprimand to suspension from the College.

Academic dishonesty includes, but is not limited to:

- Copying from another student's work, test, or paper (including clinical paperwork), or allowing another to receive credit for your work
- Looking at another student's exam or allowing another student to look at your exam
- Collaborating with another student or any person(s) during an exam
- Using anything not sanctioned by the individual administering the exam (i.e. calculator, cell phone, drink bottle)
- Obtaining, buying, selling, soliciting, transmitting, or stealing a course exam or any components of a course exam (including test banks)
- Bribing to obtain exam information
- Sharing or receiving information about an exam from another section or class/group
- Breaching test security
- Tape-recording or note-taking of a test review
- Plagiarizing
- Failing to report any of the above behaviors or other dishonest behaviors when witnessed

Audio and Video Recording Guidelines

Recording of content in classroom or lab sessions is permitted only with the permission of the instructor who is presenting the content. No recording of any type (audio, visual, written, etc.) is allowed during exams or exam reviews.

Electronic Devices

Electronic devices such as cell phones, laptop computers, tablet devices (Kindles, Nooks, iPads, smart watches) may be distracting to both faculty and students in classrooms, labs, and testing centers. In consideration of others and to minimize distractions, all electronic devices must be turned off unless prior approval is obtained by the instructor, Program Director, Director of Allied Health, Dean of Nursing and Allied Health, or designee. The abuse of electronic devices by students is a violation of the student code of conduct.

Copier Usage

The office copier is not for student use.

Minors on Campus

The Dental Assisting Program complies with Coastal Alabama Policy [Minors on Campus](#). Minors may not accompany students.

Accommodations for Americans with Disabilities

The Dental Assisting Program complies with Coastal Alabama Policy [Americans with Disabilities Act](#). Further information may be found at the [ADA Online Services](#) webpage. Only the ADA coordinator can determine reasonable accommodations.

Safety, Health, and Security

The Dental Assisting Program complies with Coastal Alabama Policy [Safety and Security](#). Additional safety and health information specific to exposure to radiation and hazardous chemical is located in Appendix A.

Social Networking Policy

The Dental Assisting Program complies with Coastal Alabama Policies [Standards of Behavior](#) and [Student Code of Contact](#). Students are advised to use social media cautiously and to avoid disclosing any information that could be considered confidential client information. Any disclosure, intentional or unintentional, of information that could lead to the identification of a client will result in appropriate disciplinary actions. Removal of an individual's name, face, or image is not sufficient to protect identity or confidential information. The use of privacy settings that are available on many social networking sites does not guarantee that information will not appear in public and is not deemed sufficient.

Students are **not** to make negative, disparaging, or unprofessional remarks about fellow students, College employees, clients, client visitors, clinical sites, or other health care professionals through social media. Any negative or disparaging remarks, intentional or unintentional, through social media will be considered unprofessional and will be considered a form of misconduct. This type of misconduct will be subject to appropriate disciplinary actions.

TESTING AND GRADING GUIDELINES**Grading**

The Dental Assisting Program complies with Coastal Alabama Policy [Standards of Academic Progress](#). Rounding of scores is only completed for the final course grade. No rounding will occur for individual assignment, quiz, or test grades. The final course grade is rounded, including 0.45 or higher being raised to the next whole number.

A = 90-100

B = 80-89

C = 70-79

D = 60-69

F = 59 and below

Most dental assisting courses consist of a combination of theory, laboratory, and clinical components. Laboratory grades are assigned a pass/fail ranking. Students who fail the laboratory of a course but earn a 'C' or higher in the theory portion of the course fail the course. Students who pass the laboratory of a course but fail the theory portion of the course with a 'D' or 'F' fail the course. Students have until the last date of withdrawal in any one semester to withdraw from a course. Once the withdrawal date has passed, students will receive an 'F' for the final grade. The last day to withdraw is published in the college academic calendar. Individual course grade distribution is located in Appendix B.

Exam Procedures

It is essential that testing times are quiet. Once a student leaves the testing area, the student will not be allowed to return until all students have completed testing. Students are asked not to congregate in hallways outside of classrooms due to noise levels. Pencils, tests, answer sheet forms, and calculators, if specified, are the only items allowed on the desk for exams. Calculators and smart watches are not allowed for testing unless specified. If allowed, calculators must have instructor approval and may not be shared. A #2 pencil with eraser is required for all tests. Seating for tests may be assigned. No handbags, backpacks, book carriers, books, drinks, food, cell phones, and/or other electronic devices are allowed on top of, under, or around any desk during testing. No hats or sunglasses may be worn during testing. If assistance is required during the test, the student should raise their hand to signal the need for assistance from the instructor. Students arriving late for an exam must take the exam in the remaining time available.

Make-up Exams/Missed Exams

Only one make-up exam is allowed per course. If more than one exam is missed, a grade of '0' will be recorded for the second missed exam. Make-up exams should be administered prior to the last day to withdraw as posted in the College calendar. Students who miss the assigned make-up date will receive a '0' for that exam. Make-up exams are subject to be different from the original exam. Early exams are administered only at the discretion of the Program Director, Director of Allied Health, Dean, or designee for extenuating circumstances.

Mid-Term Progress

A mid-term progress report is provided to each student as notification of their academic progress in each course. If absent on that day, it is the student's responsibility to obtain the report.

Final Exam Schedule

The Dental Assisting Program complies with Coastal Alabama Policy [Final Exams](#). The final exam schedule for dental assisting courses may differ from the schedule for general courses. Please check the course syllabus regarding the final exam schedule.

Incompletes

The Dental Assisting Program complies with Coastal Alabama Policy [Standards of Academic Progress](#). Incompletes must be replaced with a grade of 'C' or higher before the student is allowed to progress to the next semester.

PROGRESSION POLICIES

Definitions

Reinstatement: Students who have a withdrawal or failure in a dental assisting course and are eligible to return to that course will be considered for reinstatement to the program. Any returning student must re-enroll the next certificate year and begin the semester in which they failed or withdrew from the coursework. The student must repeat all major required courses with a DAT prefix and all general studies courses failed or withdrawn from in that semester. All courses with a lab component must be retaken. This includes but is not limited to, pre-clinical and clinical practice. A student may only apply for program entry twice, whether accepted or not and meet all of the college and program requirements. Reinstatement is not guaranteed due to limitations in clinical spaces.

Progression

To progress in the Dental Assisting Program, the student must:

1. Achieve a grade of 'C' or better in all required general education and DAT courses.
2. Be accepted by clinical agencies for clinical experiences.

3. Maintain ability to meet essential eligibility criteria for healthcare professional with or without reasonable accommodations.
4. Maintain program health requirements.

Transfer Policy

Although some of the courses in this program will transfer to four-year institutions, this program is not designed to be a transfer program of study; therefore, it is not subject to the terms and conditions of Alabama Transfers state transfer and articulation reporting system.

Program Completion

A certificate is awarded upon completion of the DAT courses, ENG 101, MTH 116 (or higher level Math), PSY 200, and SPH 106 or 107 for a total of 48 credit hours. Students may work as dental assistants after successful completion of the certificate. Additional requirements for the Associate of Applied Science Degree are a Fine Arts elective, CIS 146, BIO 103, and SOC 200.

Termination

A student may be terminated from the Dental Assisting Program for the following, but not limited to:

- a. Unsatisfactory scholastic achievement in theory, lab, or clinical practice
- b. Failure to complete laboratory/clinical requirements
- c. Unsafe dental practice
- d. Being under the influence of drugs or alcohol
- e. Obstruction or disruption of the Dental Assisting Program
- f. Breach of confidentiality
- g. Inability to perform essential eligibility criteria
- h. Any act of dishonesty/academic dishonesty

Withdrawal

The Dental Assisting Program complies with Coastal Alabama Policy [Withdrawals](#). Students may withdraw from class or the College any time prior to the start of final exams during any semester or term. To withdraw from **a** class, students must login to their OneACCS account and withdraw. To withdraw from **all** classes, students must complete the online total withdrawal form located on the [Registrar page of the College website](#).

Students who complete the withdrawal process prior to the deadline will be assigned a grade of 'W'. However, a grade of 'F' will be assigned to students who fail to satisfactorily complete the requirements of a course or who voluntarily discontinue class attendance and fail to follow the College's official withdrawal procedure.

LAB GUIDELINES

Campus Laboratory Guidelines

To provide a safe environment and ensure longevity of equipment and supplies in the lab, the following will be observed:

- The campus labs are authorized for use by dental assisting students with specific assignments only. No children are allowed.
- Eating and drinking are NOT allowed in the lab setting.
- The supply closet and equipment cabinets are to be accessed by college staff and faculty only. Audiovisual equipment is to be used to assist students in learning. Audiovisual equipment is NOT allowed to leave the building.
- Students are not to practice invasive procedures outside of the supervised laboratory or clinical setting. Dental lab fees for classes with a lab component are posted to each student's account at or near the time of registration. Lab supplies and equipment necessary for performance of dental

assisting skills will be distributed during the assigned lab time for all courses containing a lab component.

Lab Attire

Light gray scrub jackets with light gray tops and pants are required for all classes. A student can purchase light gray scrubs at any retailer to wear to pre-clinical labs and fall classes.

Only black shoes may be worn to lab; no cloth, suede, sandals or open-toe, clogs or open weave shoes are permitted. Shoes must be fluid resistant and if blood spilled on shoe not be able to enter. Black cotton socks should be worn with shoes to reduce odor. Decorative socks are not allowed. Compression knee-high socks are recommended. Students may wear undershirts if they are cold, but the undershirts MUST be black. No colorful or printed material on clothing is permitted.

Lab Skills Validation

Skills validation is an important aspect of healthcare education. Students are assigned a specific time for completing skills. Some skills are demonstrated by each student individually while others are completed by students working together in small groups. Each semester, students should expect to perform a minimum number of selected skills.

Students are expected to be prepared for pre-clinical skills validation. Preparation for performance of skills may include reading, watching videos and computer assisted instruction, as well as practicing assigned skills using designated equipment and supplies. There is a strong correlation between student success in the lab and student performance in the clinical setting. The following are policies related to skills validation:

- Each student is expected to come to lab prepared. This includes ready to begin on time, having fully watched and reviewed the Canvas demonstration, have the correct lab evaluations from the workbook unless provided by the instructor, have jewelry, nails, and hair readied, have all “kit” items out and on lab counter, have 2 pair of utility gloves ready for disinfection and sterilization, and have all appropriate personal protective equipment (PPE) on your body or in your possession.
- All pre-clinical and dental materials skills, including infection control, instruments, supplies and equipment identification, require a satisfactory score that shows mastery of the skill on the 3rd attempt unless the instructor sees fault in which the information was delivered.
- During practice of the skill the student must be receptive to the peer validating the practice sessions and the positive or negative feedback provided. It is important to maintain professional behavior when practicing skills. Once the student passes the skill at 100 percent, the student can begin practicing for the skill or be assigned as a mentor to other students continuing to struggle with the existing skill.
- Each student will be allowed a total of three physical attempts to satisfactorily perform each skill validation. Successful completion on the first attempt will be given a 100% in the grade book. Successful completion on the second attempt will be given a 75% in the gradebook. Successful completion of the skill on the third attempt will be given a 50% in the grade book. Students who do not successfully complete the skill on the third attempt will receive a zero and must withdraw from all courses in the semester that have a lab component. Students will have the opportunity to reapply to the program the following year.
- An absence or late arrival will count as the first attempt grade. Students are to have a skills validation/check-off sheet for practicing skills. Instructors may apply time limits for each skills validation/check-off station.

- Failure to achieve a satisfactory on any skill within a designated period of time results in failure of the course, regardless of the theory grade. If a student fails the lab component of the course, the student will not be allowed to continue in the course.

CLINICAL GUIDELINES

Clinical Attire

Uniforms will be purchased through the Coastal Alabama Barnes and Nobles Bookstore. Uniforms should be neat, clean, well-pressed, and fit appropriately as students must portray a positive image to the public. Students will not be permitted to deliver client care at the clinical agency without specified attire. Uniforms are to be worn only when functioning in the role of the student. Guidelines for uniforms are as follows:

Requirements:

- Student/Facility Identification (ID): The student's College photo ID and/or appropriate facility photo ID is to be worn at all times while at clinical. The ID must be clipped to the upper left side of the top. ID clips must be approved by dental assisting faculty, if allowed. Badge reels are not allowed. Students may be dismissed from a clinical experience for failure to have the proper ID badge in full sight.
- Pants: Pant length is not to pass the heel of the shoes.
- Caps: No caps are allowed apart from a solid white, gray, black, or burgundy hospital scrub hat.
- Shoes: Completely black, leather shoes that can be polished and kept clean are required for clinicals/labs. These shoes should be reserved to be worn only at labs and clinical. No shiny patent leather shoes, no canvas shoes, and no sandals are allowed. Shoes must have a full back and closed toes. Black, leather athletic shoes are acceptable. Shoes must have a low heel.
- Socks: Minimal ankle high length black socks (covering the ankles so no skin is shown when sitting) are to be worn with pants.
- Under-Garments: A long sleeve, plain black top (undershirt) may be purchased if desired.
- Watch: Conservative watch (with second hand). Metallic or vinyl, white or black band. No digital or smart watches are allowed.
- Hair: Hair is to be neat, clean, and secured away from the face and should not touch the collar. Hair pulled back must be secured and not allowed to swing loosely. Beards and mustaches must be neatly trimmed. If impeding the correct fit of respiratory masks, facial hair must be shaved accordingly. Hair and beard color must be kept a natural shade. Hair securement devices should be the same color as one's hair. Bright-colored hair securement devices are not allowed.
- Fingernails: Fingernails must be short, filed, and clean. Nail polish and artificial nails are prohibited.
- Makeup: Makeup should be conservative. No false eyelashes may be worn during clinicals.
- Jewelry: Plain wedding band, if desired. No earrings, visible piercings, or tongue piercings are allowed. A skin-tone plug must be worn in the hole left by a gauge earring. Necklaces are not allowed except if necessary for medical reasons and must be long enough to secure under clothing. No bracelets are allowed, except for health-related reasons.
- Tattoos: Tattoos should be covered per clinical agency policy.
- Fragrances: No cologne or perfume is allowed due to possible client allergies. Lotions and deodorants must be fragrance-free.
- Hygiene: Students are expected to bathe, wear deodorant, practice proper oral care, and change undergarments daily. Students may use mouthwash.
- Oral care: must be a personal priority. All students are to schedule an oral exam and prophylaxis with their dentist and have all decay restored/removed prior to patient care.
- PPE: Masks, gloves, protective eyewear, and lab jackets are to be worn during all clinical sessions. The uniform lab jacket is required and is to be fully snapped chairside. If a student should outgrow their uniform or jacket, they must be replaced as soon as possible with a proper

fitting set. If a clinical site provides a particular lab jacket a name tag identifying the intern as a CA student must be worn.

- Protective wear (gowns, etc.) is to be worn during all procedures where blood borne pathogens may be encountered. Tee shirts worn under scrubs must be covered by the lab jacket during chairside and spatter procedures) Utility gloves must be worn in sterilization area and during operatory disinfection). Contaminated PPE must be left and laundered at the clinical site. If this is not possible consult the clinical director/instructor for directions.

Clinical Orientation

Clinical sites used in the Coastal Alabama Dental Assisting Program include Coastal Alabama State Dental Clinic (for dental images only) and various private dental offices and clinics located in the school's service area.

The Dental Assisting clinical instructor will orient students to the clinical agency in which the clinical lab is held prior to having students provide dental care. This orientation will include, but will not be limited to:

- a. Fire and disaster policies and procedures
- b. Infection Control policies and procedures
- c. Policies and procedures related to compliance with OSHA regulations on blood borne pathogens.

All students must familiarize themselves with and follow the policies and procedures of the agency in which they are assigned for clinical lab that pertain to safety, infection control, fire and disaster. See Clinical Orientation Manual in Appendix C.

Failure to abide by policies and procedures related to the OSHA regulations on blood borne pathogens may result in dismissal from the Dental Assisting Program.

Clinical Leave and Attendance

Students must complete a minimum 300 hours of extended clinical lab experience. Absences or leave from scheduled clinical days must be approved by the program director and follow these guidelines:

- All leave must be requested on the appropriate form each week with the program director.
- Leave days consist of any scheduled day that the student or doctor is out of the office for any reason.
- Leave days must be made up one for one.
- Leave days must be taken in no less than ½ day increments. (Consult director or instructor if needed).
- Leave days can be consecutive if the doctor is out of the office or for an illness and require a physician's, NP's or PA's excuse.
- Absences not filed on the appropriate form may result in a corrective/disciplinary measures.
- Absences that exceed the allowed leave time may result in failure of the course.
- Any student arriving to clinical more than 15 minutes late will be required to request a ½ day of leave.
- Students must notify the director/instructor and the clinical site supervisor by 8:00 or before an unexpected absence or tardiness of any type. You must speak to a person at the clinical site and not a voicemail. Instructors must be notified in Canvas.

Spring Semester – 2 days allowed

Summer Semester – 3 days allowed

General Clinical Guidelines

- Students are to notify the clinical instructor, the Doctor, and program director at least one hour prior to clinical start time if unable to attend a scheduled clinical.
- Communication with clients should be client-centered. No personal affairs/problems are to be discussed while providing patient care.
- The Dental Assisting Program complies with Coastal Alabama Policy [Tobacco Free Environment](#) No smoking/vaping/use of tobacco products is allowed in or on Coastal or clinical facility premises, including the parking lots. This includes electronic cigarettes/vaping devices.
- Students are not to report to clinicals if physically or emotionally impaired.
- Students receiving medical care that is not documented on the health and physical form are required to submit documentation from their healthcare provider indicating they may participate in clinicals without limitations. It is the student's responsibility to notify faculty/staff of health-related changes that may impact the ability to safely participate in Coastal Alabama's Dental Assisting program.
- Students are not allowed to accept gifts or money, nor may students receive pay for services rendered while in clinicals or practicums. Thievery from clients, family, the agency, professional colleagues, or fellow students will not be tolerated.
- Students are not to leave the assigned clinical agency. If a student has an emergency or becomes ill, they are to notify the clinical instructor and obtain permission to leave early if necessary. Make-up assignments may be required. Thirty minutes are assigned for a lunch break. Students should notify the instructor or doctor before leaving a clinical unit for any reason.
- Travel to and from clinical agencies and all food expenses are the responsibility of the student. Students must park in areas designated by the clinical agency. The College, clinical instructors, and clinical agencies are not responsible for any claims or expenses incurred while at a clinical site.
- Each student is responsible for obtaining the policies of the clinical agency and adhering to those policies, including standard and universal precautions.
- Students are not allowed to transport clients in their own vehicle due to liability.
- Family members, friends, and significant others should not visit students at clinical.
- Failure to participate in clinical learning experiences for courses containing a clinical component results in failure of the course(s). Students may not continue to attend class for the course in which a clinical failure has occurred.
- Students must notify the instructor and the dental facility of any harmful or potentially harmful incident/occurrence prior to the end of the clinical day, and an incident report must be written. Failure to report exposure to blood or other potentially infectious materials could result in dismissal from the Dental Assisting Program.
- Cell Phones/Electronic Devices: Personal use of cell phones and other electronic devices during clinical hours is prohibited unless specific permission from the instructor or program director.

Health Insurance Portability and Accountability Act (HIPAA)

- Students will follow HIPAA confidentiality requirements. The following guidelines are to be followed:
- Confidential or sensitive client information, or information of any sort which could serve as identifying information, should not be saved on personal computers or other electronic devices.
- E-mails or texts in correspondence with faculty should not include client identifying information.
- Client-related information or images should not be transmitted through social media. Do not take pictures or videos of clients with cell phones or other personal devices. No information is to be taken from the clinical care area in verbal, written, or electronic form.
- Limiting access through privacy settings is not deemed sufficient to protect privacy and confidentiality of information. No social media site should be considered private or confidential.

- Compliance with clinical agency regulations regarding use of computers, cameras, electronic devices, and cell phones while present in the clinical agency shall be maintained.
- Client privacy and confidentiality shall be maintained at all times. Students shall not discuss client information with anyone except for clinical personnel and those in the Nursing Program involved with the students' education.
- Client names should not be included on clinical paperwork, presentations, or notes.
- Breaches of confidentiality or privacy should be reported to the nursing instructor promptly.
- In order to preserve client confidentiality, violations in HIPAA will result in interventions/disciplinary actions.

Clinical Evaluation

Evaluation of clinical includes weekly journals, procedure tally sheets, and evaluations by instructors and doctor. Grading criteria are specific to clinical course. Refer to syllabi for rubric/grading criteria. Copy of clinical evaluation is located in Appendix C

NOTE: A student who has performed an unsafe act that jeopardizes the welfare of the client may be dismissed without a probationary period.

Student Grievances/Complaints

The Dental Assisting Program complies with Coastal Alabama Policy [Student Formal Complaints](#). To resolve conflict at the lowest levels, the procedures below should be followed:

- Students with a concern regarding a DAT course should first discuss the issue with the course instructor.
- If the student is unsatisfied, the student should discuss the issue with the program director.
- If the student cannot reach an agreement with the campus program director, the student's next step is to present documentation to the Director of Allied Health. Next, the Dean of Nursing and Allied Health would be contacted.

Accidents and Injury

The Dental Assisting Program complies with Coastal Alabama Policy [Safety and Security](#). If a student should receive an injury (such as a needle stick, etc.) while performing duties as a student at the clinical site, the student shall contact the clinical instructor and the appropriate supervisor from the clinical site. The clinical agency is generally responsible for emergency care according to clinical agency policy. The student is responsible for the cost of emergency care. An incident report should be filed with the facility and the Dental Assisting Program.

Student Health and Safety

The Dental Assisting Program complies with Coastal Alabama Policy [Safety and Security](#) and Coastal Alabama [Emergency Operations Plan](#). Coastal Alabama Dental Assisting Program follows the CDC's evidence-based recommendations to guide infection prevention and control practices in all settings in which dental treatment is provided. Coastal Alabama Dental Assisting program infection control guidelines may be found in Appendix A <https://www.cdc.gov/oralhealth/infectioncontrol/index.html>

Students accepted into the program must adhere to the following student health and safety requirements prior to and throughout clinical participation:

- Current Coastal Alabama Physical Exam form completed by a licensed physician, physician's assistant (PA), or certified registered nurse practitioner (CRNP). Students must be able to perform the essential eligibility criteria.
- Current TB blood test (or chest X-ray if required). TB test should be completed annually.

- Immunizations for measles, mumps, rubella (MMR) and varicella (chicken pox) or a titer demonstrating immunity.
- Hepatitis B series/titers. Students with documented hypersensitivity to the vaccine must sign a waiver.
- Flu vaccination annually is recommended.
- Other vaccinations may be required pending clinical agency policy.
- Drug and background screening. The specimen collection and screening are performed by an approved agency. Students are also bound by the drug testing and background screening policies of the clinical site (example: annual drug testing).
- Current CPR for the healthcare provider by the American Heart Association is required. Students must maintain certification throughout the program. The student will not be allowed to continue in the program if CPR is not valid.
- All students must participate in HIPAA training during orientation to clinicals prior to performing the first clinical assignment.
- Any health condition that might incapacitate and/or interfere with the student's ability to perform essential eligibility criteria should be reported to the course instructor as soon as the student is knowledgeable. A medical release signed by a physician, CRNP, or PA may be required for return to clinic practice.
- For the safety of the client, students arriving at the clinical site impaired in any way (fatigue, illness, drugs, alcohol, etc.) will be asked to leave the clinical setting.
- Students agree that neither the College nor any member of the Dental Assisting Program is responsible for injuries, communicable diseases, infectious or viral diseases, or any adverse effects encountered while in the nursing lab or clinical setting.
- Liability insurance is provided by the school. The school does NOT provide medical insurance coverage. All students are required to maintain medical insurance for the duration of participation in the program. Students must provide proof of insurance at a minimum of annually.

HIV or HEPATITIS B REPORTING POLICY

Public law #102-141, Section 633, and "The Alabama Infected Health Care Worker Management Act" require HIV or Hepatitis B infected healthcare workers to notify the State Health Officer within 30 days of the time the diagnosis is confirmed. Physicians caring for HIV or Hepatitis B infected healthcare workers are mandated to notify state health officials within 7 days of the diagnosis. All students are required to comply with this law.

More information on Infectious Disease and Bloodborne Pathogens is located in Appendix A.

ELIGIBILITY CRITERIA

The Alabama Community College System endorses the Americans' with Disabilities Act. In accordance with College policy, when requested, reasonable accommodations may be provided for individuals with disabilities.

Physical, cognitive, psychomotor, affective and social abilities are required in unique combinations to provide safe and effective care. The applicant/student must be able to meet the essential eligibility criteria with or without reasonable accommodations throughout the program of learning. Admission, progression, and graduation are contingent upon one's ability to demonstrate the essential eligibility criteria delineated for the Nursing and Allied Health program with or without reasonable accommodations. The Nursing and Allied Health program and/or its affiliated clinical agencies may identify additional essential eligibility criteria. The Nursing and

Allied Health program reserves the right to amend the essential eligibility criteria as deemed necessary.

In order to be admitted and to progress in the Nursing and Allied Health program one must possess a functional level of ability to perform the duties required of a Nursing and Allied Health student. Admission or progression may be denied if a student is unable to demonstrate the essential eligibility criteria with or without reasonable accommodations.

The essential eligibility criteria delineated are those deemed necessary for the Alabama Community College System Nursing and Allied Health programs. No representation regarding industrial standards is implied. Similarly, any reasonable accommodations made will be determined and applied to the respective Nursing and Allied Health program and may vary from reasonable accommodations made by healthcare employers.

The essential eligibility criteria delineated below are necessary for Nursing and Allied Health program admission, progression, and graduation and for the provision of safe and effective care. The essential eligibility criteria include but are not limited to the ability to:

- Sensory Perception
 - Visual
 - Observe and discern subtle changes in physical conditions and the environment
 - Visualize different color spectrums and color changes
 - Read fine print in varying levels of light
 - Read for prolonged periods of time
 - Read cursive writing
 - Read at varying distances
 - Read data/information displayed on monitors/equipment
 - Auditory
 - Interpret monitoring devices
 - Distinguish muffled sounds heard through a stethoscope
 - Hear and discriminate high and low frequency sounds produced by the body and the environment
 - Effectively hear to communicate with others
 - Tactile
 - Discern tremors, vibrations, pulses, textures, temperature, shapes, size, location, and other physical characteristics
 - Olfactory
 - Detect body odors and odors in the environment
- Communication/ Interpersonal Relationships
 - Verbally and in writing, engage in a two-way communication and interact effectively with others, from a variety of social, emotional, cultural, and intellectual backgrounds
 - Work effectively in groups
 - Work effectively independently
 - Discern and interpret nonverbal communication
 - Express one's ideas and feelings clearly
 - Communicate with others accurately in a timely manner

- Obtain communications from a computer
- Cognitive/Critical Thinking
 - Effectively read, write, and comprehend the English language
 - Consistently and dependably engage in the process of critical thinking in order to formulate and implement safe and ethical decisions in a variety of health care settings
 - Demonstrate satisfactory performance on written examinations including mathematical computations without a calculator
 - Satisfactorily achieve the program objectives Motor Function
 - Handle small delicate equipment/objects without extraneous movement, contamination, or destruction
 - Move, position, turn, transfer, assist with lifting or lift and carry clients without injury to clients, self, or others
 - Maintain balance from any position
 - Stand on both legs
 - Coordinate hand/eye movements
 - Push/pull heavy objects without injury to client, self, or others
 - Stand, bend, walk and/or sit for 6-12 hours in a clinical setting performing physical activities requiring energy without jeopardizing the safety of the client, self, or others
 - Walk without a cane, walker, or crutches
 - Function with hands free for patient care and transporting items
 - Transport self and client without the use of electrical devices
 - Flex, abduct and rotate all joints freely
 - Respond rapidly to emergency situations
 - Maneuver in small areas
 - Perform daily care functions for the client
 - Coordinate fine and gross motor hand movements to provide safe effective care
 - Calibrate/use equipment
 - Execute movement required to provide care in all health care settings
 - Perform CPR and physical assessment
 - Operate a computer
- Professional Behavior
 - Convey caring, respect, sensitivity, tact, compassion, empathy, tolerance, and a healthy attitude toward others
 - Demonstrate a mentally healthy attitude that is age appropriate in relationship to the client
 - Handle multiple tasks concurrently
 - Perform safe, effective care for clients in a caring context
 - Understand and follow the policies and procedures of the College and clinical agencies
 - Understand the consequences of violating the student code of conduct
 - Understand that posing a direct threat to others is unacceptable and subjects one to discipline
 - Meet qualifications for certification by examination
 - Not to pose a threat to self or others
 - Function effectively in situations of uncertainty and stress inherent in providing care to clients

- Adapt to changing environments and situations
- Remain free of chemical dependency
- Report promptly to clinical and remain for assigned hours
- Provide care in an appropriate time frame
- Accepts responsibility, accountability, and ownership of one's actions
- Seek supervision/consultation in a timely manner
- Examine and modify one's own behavior when it interferes with client care or learning

Upon admission, an individual who discloses a disability can request reasonable accommodations. Individuals will be asked to provide documentation of the disability in order to assist with the provision of appropriate reasonable accommodations. Coastal Alabama Community College will provide reasonable accommodations but is not required to substantially alter the requirements or nature of the program or provide accommodations that inflict an undue burden on the college. In order to be admitted one must be able to perform all of the essential eligibility criteria with or without reasonable accommodations. If an individual's health changes during the program of learning, so that the essential eligibility criteria cannot be met with or without reasonable accommodations, the student will be withdrawn from the Nursing and Allied Health program. The Nursing and Allied Health faculty reserves the right at any time to require an additional medical examination at the student's expense in order to assist with the evaluation of the student's ability to perform the essential eligibility criteria.

Requests for reasonable ADA accommodations should be directed to: ada@coastalalabama.edu.

BACKGROUND CHECK POLICY

Healthcare educational programs within the Alabama Community College System are contractually obligated to comply with the requirements set forth by clinical affiliates. Students enrolled in healthcare educational programs must conform to the rules, policies, and procedures of the clinical affiliates in order to participate in clinical learning experiences, which includes background checks. Failure to participate in clinical learning experiences for courses containing a clinical component result in failure of the course(s). A student denied clinical access by any clinical affiliate may be dismissed from the program.

Licensure Implications

Students enrolled in healthcare educational programs should be aware that a discrepancy on background checks can have licensure implications.

Background Check Guidelines

Background checks will be conducted according to the following guidelines:

- Students shall receive notification of the background check prior to admission and upon admission.
- Students must sign the appropriate consent(s) prior to the background check. The student or the healthcare program's designee(s) will provide applicable consent(s) to the vendor conducting the background check. The student will be responsible for the cost of the background check. Any student failing to pay the fee in effect at the time of the background check by the published deadline and/or refusing to sign the consent form(s) will not receive a background check and will be prohibited from participating in clinical learning experiences.
- The background checks will be scheduled and conducted by a designated vendor determined by the College. Background checks performed by any other vendor or agency that is not approved by the healthcare program designee will not be accepted. Results of the background check will be sent to the healthcare program designee(s) and/or the applicable clinical affiliate(s). Some clinical affiliates may continue to require an additional background check, which may include fingerprinting.
- The student should contact the healthcare program designee if he/she is unable to submit to the background check at the designated time due to extenuating circumstances. Background checks must be completed before newly admitted or reinstated students are allowed to attend healthcare related courses. If the student fails to submit to the background check as delineated, the student will be prohibited from participating in clinical learning experiences. Failure to be able to participate in clinical learning experiences will result in a 'F' for the course(s) if the student does not officially withdraw from the course(s). A student denied clinical access by any clinical affiliate may be dismissed from the program.
- If the student has a discrepancy on the background check and is not allowed by the clinical affiliate(s) to participate in clinical learning experiences, the student may receive a 'F' for the course if the student does not officially withdraw from the course(s).
- If a student is unable to complete the clinical component of the course(s) that he/she is enrolled in due to a background check, the student will be advised regarding options.
- The background check may include, but is not limited to:
 - a. Positive identification.
 - b. Maiden/AKA name search.
 - c. Social Security Number trace which is a verification that the number provided by the individual was issued by the Social Security Administration and is not listed in the files of the deceased. The SSN trace is also used to locate additional names and addresses.
 - d. Residency history.
 - e. Driving license/driving history/motor vehicle records including any traffic citations.
 - f. Education verification.
 - g. Employment verification which may include the reason for separation and eligibility for

re-employment for each employer. The last seven years may be searched if the student is 21 years of age or older.

- h. Healthcare employment verification network search.
 - i. Nurse aide registry.
 - j. Professional license/certification verification.
 - k. Personal credit history, which is based on reports from any credit bureau.
 - l. Personal references/interviews.
 - m. Seven-year criminal and civil record search reveals felony and misdemeanor convictions, and pending cases usually including the date, nature of the offense, sentencing date, disposition, and current status. The seven-year criminal background check may occur in current and previous counties of residence and employment through a search of court records. City, state, and/or federal records may also be searched. Federal criminal cases may reveal tax evasion, fraud, drug offenses, etc.
 - n. Most wanted list.
 - o. National criminal database searches, which includes a compilation of historical data, collected from multiple sources in multiple states by background check companies.
 - p. Adult and child abuse/neglect registries.
 - q. National sex offender/predator registry search which includes a search of the state or county repository for known sexual offenders.
 - r. Misconduct registry search.
 - s. Office of the Inspector General (OIG) List of Excluded Individuals/Entities which identifies those individuals who have committed offenses deeming them ineligible to care for clients receiving Medicare, Medicaid, and other Federal health care benefits.
 - t. General Services Administration (GSA) Excluded Parties List Service identifies the List of Parties Excluded (EPLS) which identifies those excluded throughout the US Government from receiving Federal contracts and certain types of Federal financial/non-financial assistance/benefits.
 - u. Executive Order 13224 terrorism sanctions regulations.
 - v. Government suspect /watch list.
 - w. Office of Foreign Assets Control (OFAC) list of Specially Designated Nationals (SDN) which includes individuals associated with terrorism and narcotics trafficking.
 - x. FACIS database searches to include OIG, GSA, OFAC and other sources.
 - y. National Healthcare Data Bank search and Sanction Report may include Medicare/Medicaid sanction search, OIG, GSA, and FDA debarment check.
 - z. Fingerprinting and the National Criminal Information Center which may reveal national wants and warrants information.
 - aa. International Criminal.
 - bb. Applicable State Exclusion List.
 - cc. Any Other Public Record.
- The student with a discrepancy on the background check will be informed of the results by the healthcare program designee and/or by the background check vendor.
 - Discrepancies on the background checks will be reported to the individual(s) at the respective clinical affiliate(s) that is specifically designated by the clinical affiliate(s), which often is the Director of Human Resources. The individual(s) will be responsible for determining whether the student will be allowed to participate in clinical learning experiences with the respective clinical affiliate(s) according to the rules, policies, and procedures of the clinical affiliate(s). Students will sign consent(s) prior to disclosure of a background check to clinical affiliate(s).
 - The student will be provided with a copy of the background check results, if applicable. Students should contact the vendor for background checks to see a copy of the report and to dispute information reported. The student will be responsible for clearing any denials to participate in clinical learning experiences with the clinical affiliate(s). Students unable to resolve the denial to participate in clinical learning experiences may be withdrawn from the healthcare program.

- Background checks which could render a student ineligible to participate in clinical learning experiences include, but are not limited to, certain convictions or criminal charges which could jeopardize the health and safety of clients and sanctions or debarment. Felony or repeated misdemeanor activity and Office of the Inspector General violations will normally prohibit participation in clinical learning experiences with clinical affiliate(s), but each discrepancy on a background check will be reviewed individually by the clinical affiliate(s). In certain circumstances, for example repeated behaviors, the vendor may conduct a background check further back than the past seven years; findings on such a background check can also render an individual ineligible to participate in clinical learning experiences.

Confidentiality

The healthcare program designee(s) will have access to the results of the background check as will the clinical affiliate(s) designee(s). The results will be shared only on a need-to-know basis.

DRUG SCREEN POLICY

Students must perform in the clinical setting in such a manner that will promote safe client care. Clinical agencies are obligated to assure that clients are protected to the extent reasonably possible from harm due to completion of clinical rotations. As stipulated in health agency contracts for clinical experience, students must abide by the rules, policies, and procedures established by these agencies relative to drug screening and any subsequent revision to these policies to participate in clinical experiences at the agencies.

All students who enroll in the Alabama Community College System Nursing & Allied Health Programs and desire to participate in courses which have a clinical component are required to have an initial preclinical drug screen. Students must abide by the Alabama Community College System drug screen policy and the clinical agency policy for which the students are assigned clinical practice. This includes preclinical and annual drug screening, random drug screenings, and screenings required on the basis of reasonable suspicion.

Pre-Clinical Screening

1. All students will receive notice of the drug screening guidelines.
2. The program will maintain on file a signed consent to drug screening from each student. Students have the right to refuse to consent to drug testing under this program; however, students who decline participation in drug testing will not be permitted to participate in courses with a clinical component. Failure to participate in clinical learning experiences for courses containing a clinical component results in failure of the course.
3. Drug screening will be scheduled and conducted by a drug screening company and laboratory designated by the College where the student is enrolled. The fee for the screening will be paid by the student.
4. Any student failing to report for screening at the designated time and place must complete testing within 24 hours of that date and provide documentation of extenuating circumstances.
5. Failure to complete drug screening with a negative test result required by the College and/or Clinical Agency will prohibit the student from completing the clinical component of required. (Drug screens considered inconclusive, such as 'diluted', will need to be confirmed with further testing at the expense of the student). Failure to attend clinicals will result in failure of the course if the student is enrolled and does not officially withdraw from the course.
6. Positive drug screens will be confirmed by the Medical Review Officer (any costs will be the responsibility of the student).
7. Results will be sent to the Program Director, Chair and/or Dean of the College where the student is enrolled.
8. A student who is unable to complete the clinical component of required courses due to a positive

drug screen may apply for readmission to the program. The student will be considered for readmission according to the criteria specified in this document.

Random Drug Screening

At any point in time during a student's enrollment, the student may be subject to a random drug screen. The Dean and/or Director of the program will establish the number of random screening samples. The selection will be made from all currently enrolled students using a statistically random procedure. After being notified of their selection, students will report to the designated Drug Screen Company or Laboratory at the designated time and place. The same procedural steps outlined above will be used. The fee for the random screen will be paid by the student.

Reasonable Suspicion Screening

Students may also be required to submit to reasonable suspicion testing while participating in clinical experiences. Reasonable suspicion is defined as, but not limited to, the following behaviors:

- Observable phenomena, such as direct observation of drug use and/or the physical symptoms or manifestations of being under the influence of a drug, such as, but not limited to: Unusual slurred or rapid speech; noticeable change in appearance and hygiene; impaired physical coordination; inappropriate comments, behaviors or responses; trembling hands; persistent rhinorrhea; flushed face; red eyes; unsteady gait; declining health; irritability; mood swings; isolation; decreased alertness; and/or pupillary changes.
- Presence of an odor of alcohol.
- Abnormal conduct or erratic behavior while on the clinical unit, absenteeism, tardiness, or deterioration in performance.
- Suspect of theft of medications while on the clinical unit.
- Evidence of tampering with a drug test.
- Information that the individual has caused or contributed to an incident/accident in the clinical agency.
- Evidence of involvement in the use, possession, sale, theft, solicitation, or transfer of drugs while enrolled in the health sciences program.

At any point or time during a student's enrollment, the student may be subject to a reasonable suspicion drug screen. If a student's behavior is noted as suspicious, the student will be immediately dismissed from the clinical agency, classroom, or laboratory. The faculty is to contact the Program Director, Director of Allied Health, and/or Dean of the Program. If after consultation with the faculty involved it is determined that there is reasonable suspicion, the student will be screened. The student will report to the designated laboratory at the designated time and place for the drug screen. If the student fails to consent to the screening, the student may be immediately terminated from the program.

Student Drug Screen Procedure

Drug screening procedures generally follow the procedures below:

1. Students must pay the designated fee prior to the time of specimen collection.
2. Students must submit a photo ID and social security number at the time of specimen collection.
3. The collector will be a licensed medical professional or technician who has been trained for collection in accordance with Chain of Custody and Control procedures. The collector will explain the collection procedure and Chain of Custody form to the student and provide a sealed collection container.
4. Students must remove unnecessary outer garments (coats, sweaters, bags, etc.) and remove items from pockets when entering the collection site.
5. The collector may ask the student about current medications.
6. The collector will collect monitored urine, blood, saliva and/or other specimen types.
7. In the presence of the student, the collector will seal the urine, blood, saliva and/or other specimen type with a tamper proof security seal and affix an identification label with code

- number.
8. The student will verify the information on the identification label, initial the security seal, read, and sign the Chain of Custody Form.
 9. The collector will sign the Chain of Custody Form and give the student the appropriate copy.
 10. The collector will forward the sealed urine, blood, saliva and/or other specimen type and Chain of Custody Form to the designated certified testing center/laboratory for testing.
 11. Specimens will be screened for but not limited to the following classes of drugs:
 - Alcohol
 - Amphetamines
 - Barbiturates
 - Benzodiazepines
 - Cocaine
 - Cannabinoids (Marijuana)
 - Methaqualone
 - Opiates (OxyContin)
 - Phencyclidine
 - Propoxyphene
 12. Positive screens will be confirmed by the Medical Review Officer of the designated drug screen company. If applicable the Medical Review Officer will contact the student who has a positive screen and request a prescription.
 13. Students will be informed of positive screening results by the assigned vendor, Program Director, Chair and/or Dean of the Program within seven (7) working days of the notification of results.

Note: Some of the classes of drugs for which screening will be conducted are available by prescription from health care practitioners. Prescription drugs prescribed to a student by an appropriate health care practitioner may nevertheless be subject to abuse and may give rise to reasonable suspicion testing. The fact that a student has a prescription for one or more of the classes of drugs which are legally prescribed by a health care practitioner does not necessarily, in and of itself, excuse the student from the effect of this policy. The Medical Review officer will follow up and report the results. Individual Colleges may require students to adhere to additional guidelines.

Confidentiality

The Dean/Director, Program Director, or designee will receive all test results. Confidentiality of the test results will be maintained in the department. Only the Dean/Director, Program Director/Chairperson, designee, and the student will have access to the results, the exception being if any legal actions occur which require access to test results, and results requested by clinical agencies.

Appeals Process for Positive Drug Screen

1. If a student drug screen is positive, the student will contact the program director.
2. The student will then contact the Medical Review Officer and follow the procedure for split specimen testing as stipulated by the lab.
3. The student is responsible for any costs associated with the split specimen testing procedure.
4. Once the student obtains the results of the split specimen testing, the student should contact the program director. If the student remains unsatisfied, the student should explain in writing the complaint. The program director will have seven working days to respond.
5. If the student cannot reach an agreement with the program director, the student's next step is to present documentation to the Director of Allied Health then Dean of that program. The Dean will have seven working days to respond.
6. If the student does not reach a satisfactory conclusion with the Dean, the student may choose to complete a formal [student complaint form](#).

Readmission after positive drug screen

To be considered for readmission, students who withdraw from or are removed from the program due to a positive drug screen must:

1. Have an approved treatment agency mail a letter verifying **completion** of a substance abuse treatment program which is approved by the Health Program and the Regulatory Body of the Program.
2. Submit to an unannounced drug screen at the student's expense prior to readmission. A positive screen will result in ineligibility for readmission.

Additional Information

Drug screening policies/programs required by the Alabama Community College System, and the College, and/or various clinical agencies with which the College contracts may vary from time to time in any or all their aspects.

In General FERPA

Nothing in the Family Education Rights and Privacy Act (FERPA) or the Higher Education Act of 1965 shall be construed to prohibit an institution of higher education from disclosing, to a parent of legal guardian of a student, information regarding any violation of any Federal, State, or local law, or of any rule or policy of the institution, governing the use or possession of alcohol or a controlled substance, regardless of whether that information is contained in the student's education records, if the student is under the age of 21 and the institution determines that the student has committed a disciplinary violation with respect to such use or possession.

ESTIMATED PROGRAM COSTS

Estimated program costs are available for viewing on the Coastal Alabama Community College Dental Assisting Program webpage [Coastal Alabama Dental Assisting Program Costs](#)

STUDENT RESOURCES

Dental Assisting students should refer to the Coastal Alabama Catalog and Student Handbook for student resources. Information on financial aid is located in the Financial Aid section. The student is referred to the Student Services section for counseling and career information, job placement, learning resources, and academic advisement. The Student Support Services Program is also available for qualified students and provides tutoring, counseling and financial aid assistance. Drug counseling and treatment is located under the Campus Security Report Section. Health services are not available on campus. For healthcare needs, students should refer to their private or local healthcare providers or activate emergency medical services (911). Campus security should be notified for all emergencies at 251-580-2222.

COMMITTEES AND ORGANIZATIONS

Class Representatives

Class representatives will be elected from each cohort. The process will be facilitated by the course instructor or program faculty. Class representatives serve the interest of the students by participating in faculty meetings and serving as the students' representative to administration and faculty.

EXAM ELIGIBILITY: DANB CDA CERTIFICATION

CDA Certification and GC Pathways

To earn CDA certification, you must pass the Radiation Health and Safety (RHS), Infection Control (ICE) and General Chairside Assisting (GC) exams within a five-year period. The exams may be taken together or separately. There are no eligibility requirements to take the RHS and ICE exams.

You must meet the requirements of one of the three eligibility pathways outlined in the CDA Application Packet www.danb.org/exams

Fair Testing Policy

DANB seeks to ensure a fair and equitable testing experience for all individuals while ensuring the security and reliability of the process. Improper behavior is not acceptable before, during or after an exam appointment, and each candidate's behavior is monitored during testing. Consequences of improper behavior may include rescission of exam results and/or revocation of ability to take future exams. For examples of improper behavior, see DANB's Disciplinary Policy & Procedures, available at www.danb.org.

Accommodations for Candidates with Documented Disabilities

DANB exams are designed to provide an equal opportunity for each candidate to demonstrate their knowledge-based competence. For candidates who may require reasonable accommodation for their documented disability, please review the Reasonable Accommodations Form.

Background Information Policy

With the exception of the CDIPC and DISIPC exams, DANB national exam applications contain three background information questions that all exam candidates must answer. For details, see the Background Information Policy and Questions section in the exam application or see DANB's Background Information Policy.



Appendix A

Safety, Health, and Security

- Infection Control Guidelines
- Bloodborne Pathogens and Infectious Disease Guidelines
 - Ionizing Radiation Guidelines
- Standards for Protection Against Radiation
 - Post Exposure Guidelines
- OSHA Class Verification Form



COASTAL ALABAMA

COMMUNITY COLLEGE

Infection Control Guidelines

Hepatitis B Vaccine*
Comprehensive Medical History and Patient Examination
Antiseptic hand wash*
Disposable face mask*
Protective eyewear*
Disposable latex gloves*
Fluid shield jacket*
Rubber dam
Sharps disposal system*
Sterilize handpieces
Ultrasonic cleaner
Instrument packaging
Heat sterilizer
Sterilization monitoring
Surface cleaner*
Surface disinfectant*
Surface covers
Medical waste disposal system*

* Mandatory according to OSHA standards

Infection Control - A Checklist

Immunization

— Health care workers should have appropriate immunizations such as those for Hepatitis B virus, measles, mumps, etc.

Before Patient Treatment

— Obtain a thorough medical history, vitals and update health history at each visit.
— Disinfect prostheses and appliances received from the laboratory.
— Place disposable coverings to prevent contamination of surfaces or disinfect surfaces after treatment.

During Patient Treatment

— Treat all patients as potentially infectious and strive to minimize airborne pathogens.
— Use protective attire and barrier techniques including gloves when in contact with body fluids or mucous membranes.
— Students and operator will double glove when a patient is known to carry an infectious disease.
— Wear mask when caring for all patients.
— Wear protective eyewear and fluid shield masks with all patients, including student patients.

- Change mask if it becomes wet during a procedure and use a new mask on each patient.
- Wear uniforms, laboratory coats, or fluid shield gowns.
- Open intra-orally contaminated image receptor packets in the appropriate area using disposable gloves without touching the films.
- Minimize the formation of droplets, spatters and aerosols.
- Use a rubber dam to isolate the tooth and field when appropriate.
- Use a high-volume evacuation to reduce aerosols.
- Protect hands.
- Wash hands before gloving and after gloves are removed or use approved hand sanitizers.
- Change gloves between each patient.
- Discard gloves that are torn, cut, or punctured.
- Avoid hand injuries.
- Avoid injury with sharp instruments and needles.
- Handle sharp items carefully.
- Do not bend or break disposable needles.
- Cappers are to hold the needles, and a cap is not to be placed back upon a needle unless a capper, cotton pliers or hemostat is used (See J of OSHA rules and compliance).
- All needles will be placed in containers used for treatment of hazardous waste.
- Place sharp items in appropriate containers (sharps container).

After Patient Treatment

- Remove gloves, eye wear, mask (GEM) and immediately wash hands or if no visible debris is present, sanitize hands.
- Dismiss patient and return to operatory. Remove mask, eye wear, gloves (MEG) with nitrile utility gloves, remove sharps with device and place in sharps container.
- Invert headrest barrier and hang on headrest. Remove all disposables and place in headrest barrier and discard.
- Wipe tips of instruments with visible debris, run handpieces at unit (if no handpiece maintenance device is in sterilization area) and air/water tips and place all to be sterilized
- (critical and semi-critical) on treatment tray or in cassette.
- Transport to sterilization area. (Two pair of nitrile gloves for each student are necessary. One is to be left in the operatory and one in sterilization area). *Note: Sometimes the doctor does not want you to walk to sterilization with utility gloves on so you may have to remove them for tray/cassette transport and grab the tray with two clean paper towels or a single uncontaminated patient glove to transport.
- Leave tray in sterilization and return to room for disinfecting.
- With the student already wearing mask and eye wear, the student will need to don utility Gloves.
- The student wipes all items (semi critical such as, handpiece hoses, cradles, attachments, high volume evacuator (HVE)
- valve and hoses, saliva ejector valve and hoses, a/w syringe and hoses and patient light

handles) that were contaminated with saliva first and discards wipes. This step is to remove debris (saliva and blood).

- The student then wipes the non-critical items such as the patient/Dr. chairs and countertops and all items that did not go in the patient's mouth during procedure that are to be returned to the mobile cart or unit and drops them in the drawers with the wipe still in hand.
- If the procedure was an extraction or involved a lot of blood being suctioned the suction should be run with the appropriate solution. If not, the solution would only be run at the end of the day.
- When finished, remove utility gloves, sanitize hands and return to sterilization.
- Monitor the autoclave with biological monitors.
- Clean handpieces, dental units, and ultrasonic scalers.
- Flush handpieces, dental units, ultrasonic scalers, and air/water syringes between patients.
- Clean and sterilize air/water syringes and ultrasonic scalers if possible; otherwise, disinfect them.
- Handle sharp instruments with caution.
- Place disposable needles, scalpels, and other sharp items intact into a puncture-resistant container before disposal.
- Decontaminate environmental surfaces.
- Wipe work surfaces with absorbent toweling to remove debris, and dispose of this toweling appropriately Wipe-wipe or Spray-Wipe-Spray.
- Disinfect with a suitable chemical disinfectant.
- Change protective coverings on light handles, x-ray unit head, and other items.
- Decontaminate supplies and materials.
- Rinse and disinfect impressions, bite registrations, and appliances that are to be sent to the laboratory or that is to be handled or poured up in the dental clinic.
- Communicate infection control program to the dental laboratory.
- Dispense a small amount of pumice in a disposable container for individual use on each case and discard any excess pumice.
- Remove contaminated wastes appropriately.
- Pour blood, suctioned fluids, and other liquid waste into the drain connected to a sanitary sewer system.
- Place solid waste contaminated with blood or saliva in sealed, sturdy impervious hazardous bags; dispose according to local government regulations.
- Remove gloves and wash or sanitize hands.

Medical Waste

- The medical waste of Coastal Alabama State Dental Clinic will be disposed of under OSHA guidelines.

Tips on Surface Disinfection

- Surfaces that are difficult to disinfect, such as chair buttons, control buttons on the air/water syringe, switches on the unit, light handles, hoses, and handpiece and air/water syringe

holders, should be covered with plastic wrap, aluminum foil, or other material that is impervious to water. Replace with fresh covers between each patient. It takes less time to replace a cover than to disinfect the uncovered surface between patients. Barriers and stick-on protective covers are available to wrap these items in the Coastal Alabama State Dental Clinic.

- Disinfecting electrical switches on the chair or unit may damage or cause a short in the switch. Cover them with barriers or stick-on protective covers.
- Choose an EPA-registered, ADA-accepted surface disinfectant, and use this agent for both the cleaning step and the disinfecting step for uncovered surfaces. Using a water-based agent (iodophors or combination synthetic phenolics) with both cleaning and disinfecting properties provides some protection during the cleaning step, helps sanitize any debris splattered by the cleaning procedure, and helps keep the number of different products that need to be ordered at a minimum.
- The primary difference between surface cleaners and disinfectants used in hospitals and surgery suites versus those used in dentistry is the capability of achieving a hydrophilic virus kill (Rotavirus, Poliovirus). Surface disinfectants used in dentistry must achieve this broader virus kill in order to meet ADA specifications.
- Follow the manufacturer's directions on the disinfectant product label.
- Water, rather than alcohol, must be used to dilute those agents requiring dilution before use.
- Use heavy, puncture-resistant nitrile rubber utility gloves in sterilization to reduce chances of direct contamination of the hands.
- Use protective eyeglasses to protect the eyes from splashes or splatter created when mixing solutions or cleaning surfaces with a brush. The eyeglasses should be cleaned and disinfected after use. Ultrasonics are the preferred method over scrubbing instruments, as it reduces risk of a critical incidence.
- Use a mask when cleaning an item with a bristle brush to prevent inhalation or direct mucous membrane contamination from splatter. Also use a mask when mixing materials that pose a respiratory problem (Listed on the MSDS sheets).
- Paper towels, rather than more expensive gauze sponges, are appropriate for surface cleaning. Disinfecting wipes may also be used, if available.
- 11. The time required for operatory clean up between patients can be shortened if extra handpieces are cleaned and disinfected or heat sterilized in advance for a quick interchange with the contaminated handpiece. Heat sterilization of handpieces between patients is necessary.

OSHA for X-ray Equipment, darkroom, and direct digital equipment

- Use protective covering plastic bags and disinfectant solutions to prevent contamination of x-ray equipment.
- X-ray heads and unit controls should be covered with the plastic bags/barriers provided or disinfected after use. Once the patient is dismissed from the x-ray room, the bags/barriers should be discarded and new ones replaced.

- If protective barriers are not used, all surfaces must be sprayed, wiped, sprayed again, or wiped with disinfectant wipes and allowed to set for manufactures recommended times.
- Intra-orally used image receptors should be handled in a manner to prevent transmission of infection. Pre-barriered phosphor plates (PSP) should be placed in and “unexposed cup”.
- The PSP transfer box should be open and placed on a clean area of the counter surface before exposing any dental images.
- After exposing images and placing them in an “exposed cup”, wipe each outer package with a tissue while wearing MEG. As each is wiped, open the outer packet without touching the inner plate.
- Drop the inner plate into the opened transfer box and discard the protective barrier on a paper towel. (The image receptor should be dropped out of the packets into the PSP transfer case without contaminating the case)
- The contaminated protective barriers should be accumulated on a disposable towel.
- Once finished, discard the contaminated barriers on the paper towel, remove gloves and close the transfer box. Sanitize hands.
- Gloves removed and transfer case closed without wearing contaminated gloves. The films can then be processed without exposing processing equipment to microorganisms from the patient.
- To be on the safe side, countertops in the processing should be wiped with the disinfectant solution.

Suction and Air Compressor

When the oral evacuator (suction) is in use, usually only one of the switches needs to be turned on. At the end of each day, one-gallon solution is to be run through each suction hose to disinfect it. The suction switches are should be turned off at the end of the day. The suction and air compressor switches have lights behind them, which are lit up if they are on. Both switches must be off before leaving the building.

Handpiece Lubrication and Sterilization

Handpieces are to be sterilized only in the Statim sterilization unit. Never submerge any handpiece in a chemical disinfectant, ultrasonic cleaner, or cold sterilization unit.

High-speed handpieces

100,000 to 800, 000 rpm - sprays water
 430,000 rpm (fiberoptic) - sprays water

Manufacturer instructions for handpiece maintenance overrides all other

- Wear puncture resistant gloves when preparing all handpieces.
- Use the handpiece maintenance unit in sterilization. Directions will be provided during the sterilization lesson of the program.
- Place the handpiece in sterilization bag in the Statim sterilization unit. Remove handpiece immediately after the sterilization cycle. Never allow the high-speed handpieces to dry in the Statim sterilization unit. Dispose of the bag in the regular trash can. Be careful as it will be

hot. Allow it to cool naturally. Once attached to the unit. It may be run 10-15 seconds to eliminate any warm water.

Slow -speed handpieces

6,000 to 10,000 rpm-can be gear driven (pulley) or air driven

Our slow speed handpieces are Star Titan® II handpieces and should be disconnected from the swivel and tubing. Disconnect the angle attachment and the adapter from the motor. (This would be the prophylaxis angle, contra-angle, etc.). Clean the handpiece and attachments thoroughly with 2x2 gauze saturated with alcohol. Dry thoroughly, place a drop of Titan oil into the bottom of the handpiece; place the handpiece in a sterilization bag and insert into the Statim sterilization unit. If the motor says “no lubrication needed” do not lubricate it. Slow speed Handpieces should be left in the Statim sterilization unit for the entire sterilization and drying cycles.

Upon removal from the Statim sterilization unit, lubricate the motor to the angle adapter by placing one drop of Titan oil in the lube hole next to the top drive gear. Straight nosecone attachments need lubrication only in the top hole. Place one drop of Titan oil at every gear visible on the slow-handpiece system.

Torque Multiplier

Disconnect the torque multiplier from the motor, and clean all exterior surfaces using 2x2 gauze **saturated** with alcohol. Insert the torque multiplier into the handpiece immediately after the handpiece has come out of the Statim. The torque multiplier is then ready for use on the next patient.

Contra-angle

Remove the bur from the contra-angle and clean the entire surface with alcohol. Place the contra-angle into a sterilization bag, and run through the sterilization and drying process of the Statim unit. Upon removal from the Statim, unscrew the bottom of the contra-angle to expose the gears and place a small portion of the lubrication product. The contra-angle is then ready for use on the next patient.

*Ultimately, all handpieces should be cleaned and maintained according to the manufacturers’ instructions.

Procedure for Operatory Disinfection and Sterilization

- Upon dismissal of the patient, the student disposes of the patient treatment gloves worn during the treatment phase, washes or sanitizes hands, writes-up the chart and dismisses the patient.
- Upon returning to the treatment room, the student sanitizes hands, dons on new treatment gloves, removes and inverts the headrest cover. The student removes all disposable items, placing them in the inverted headrest cover and discards them in the trash. The student removes treatment gloves, sanitizes hands and dons utility gloves.
- The student removes sharps and anesthetic cartridge and places in the sharps container always using cotton pliers, hemostats or needle recapping device. Make sure to remove

sharp burs from handpieces as to avoid a sharps injury! Gather handpieces and non-disposable tips for sterilization, placing them on treatment tray.

- Option #1 For processing instruments right away, the treatment tray may be transported to sterilization using uncontaminated patient gloves and a carrying tray, remove gloves, sanitize hands, and don utility gloves for processing instruments.
- Option #2 The treatment tray may be transported to sterilization using utility gloves, leave the tray in sterilization to process later, return to the treatment room and begin wipe down of room.
- If plastic wraps are not used, the chair, light, unit, and unit controls are sprayed- wiped- sprayed or wiped-wiped and allowed to sit according to the manufactures time before final wiping. Antiseptic wipes can be used when available. With antiseptic wipes, the initial wipe is for debris and the second wipe for disinfection. Utility gloves must be worn during the wipe down and disinfection. Remember, everything that was touched (touch surfaces) must be disinfected.
- The tray can be taken to sterilization as long as it can remain in a holding area and be processed upon return.

After the room has been disinfected and upon returning to sterilization:

The student can take all instruments from the contaminated tray, place them in a perforated cassette or ponytail wrap, and place them in the ultrasonic cleaner for three minutes. If a pre-set cassette was used, it can simply be placed in the ultrasonic cleaner for 3 minutes. When the ultrasonic is complete, remove the cassette and rinse all instruments well. Dry thoroughly. Wrap the cassettes in the autoclave wrap or package in appropriately sized pouch, seal or tape securely. Label the pouch or wrap, using a Sharpie with the date, the student's initials and the type of set-up, autoclave used. Walk the cassette or pouch to the autoclave and without touching the door or handle with the contaminated gloves (using elbow) place the pack or cassette on its side for sterilization. Return to processing area disinfecting the counter by wash or spray and remove utility gloves without touching the outside (except for the cuffs), then sanitize or wash hands. If the autoclave is full and ready to run, fill the chamber, close the door and run the instruments from a (warm start) for thirty minutes at 250°/30 pounds of pressure. Once the sterilization cycle has been completed and the instruments are dry, the wrapped cassette is placed in the cabinet designated for sterile instruments until the next use.

*If the instruments were on a plastic tray, the barrier will have to be removed after bundling and bagging the instruments. The contaminated instrument tray must have the outer barrier removed, without touching the tray, and be placed on the “dirty” (left side) of the Statim autoclave or MidMark autoclave for final processing. They can remain stacked or wiped with disinfecting wipes and returned to the storage racks in clean area at any time. Handpieces, and unwrapped instrumentation must be run in the Statim sterilization unit.

No surgical instruments are to be placed in a cassette or tray and be autoclaved. All surgical instruments are to be wrapped individually in autoclave bags, or bundled in sterilization paper and taped prior to sterilizing and are to be placed in the appropriate surgical drawers immediately after sterilization. No surgical instruments are to be hand scrubbed. If visible debris

is present, the instruments need to remain in a holding tank with the proper enzymatic cleaner before placing in the ultrasonic.

Tongs are in a disinfectant solution to maintain sterility and are to be used to remove and place instruments in the surgical drawers to prevent cross-contamination.

Items such as dappen dishes are not autoclavable and they are to be placed in the ultrasonic cleaner for three minutes, rinsed, dried and placed in a disinfection solution for thirty minutes.

Root canal files and reamers are to be washed, rinsed, placed in the ultrasonic cleaner for three minutes, rinsed thoroughly, and placed in autoclave bags for sterilization in the autoclave.

Burs become dulled during the process of autoclaving. They should be washed, rinsed, placed in the ultrasonic cleaner for three minutes, rinsed thoroughly, placed in an autoclave bag, and sterilized in the autoclave. Stainless steel burs can be autoclaved and disposable burs are to be used and discarded in the sharps container.

The plastic x-ray holders (snap-a-rays) and Rinn instruments are autoclavable and should be placed in the ultrasonic cleaner for three minutes, rinsed, dried put in autoclave bags, and autoclaved for thirty minutes in the Midmark Autoclave only!

Needle cappers are autoclavable. They should be placed in the ultrasonic cleaner for three minutes, rinsed thoroughly, dried and autoclaved.

All used saliva ejectors, disposable suction tips, rubber cups, unused 2x2 gauze, and unused cotton rolls on tray set-ups should be discarded. If disposable prophylaxis angles are used, they also should be discarded. All unused paper points are to be discarded when cleaning a root canal tray set-up.

Air/water syringe tips should be autoclaved. They should be placed in the cassette with tray set-up instruments. If being sterilized individually, the tip should be placed in the ultrasonic cleaner for three minutes, rinsed thoroughly, dried and then place in an autoclave bag and autoclaved for thirty minutes.

The plastic dishes and brushes used in the acid etch technique during composite restorations are not autoclavable. They are to be discarded in the trash. Removable brush tips are removed and discarded, the handle is to be placed, for three minutes, in the ultrasonic cleaner, rinsed, and placed in the disinfection solution for thirty minutes. Patient napkin chains should be placed in the ultrasonic cleaner for three minutes, rinsed and dried and placed in an autoclave bag. They are to be autoclaved for thirty minutes.

Autoclave

Each week, a biological indicator test must be run with instruments in the Midmark autoclave, Tuttnauer autoclave and the one Statim autoclave. Number the indicator by the number of the autoclave unit it will be placed (autoclave #1 has indicator #1, etc.) Place the indicator in the middle of the load of instruments and autoclave as usual. Retrieve the indicator from the test pack, wait for it to cool, and activate by squeezing or “popping” the indicator. Place the indicator

in the incubator with an activated non-sterilized indicator. Examine the sterilized indicator at regular intervals such as 12, 24, 48 hours for any color change. A change to yellow (a positive result) indicates bacterial growth. No color change from purple indicates an adequate sterilization cycle, which is a negative result.

All results (plus or minus), date, and time must be placed in the indicator log.

Solutions for Infection Control

1. Sani-wipes are used in the clinic for hard surface disinfecting because they are EPA registered, bactericidal, viricidal, fungicidal, and tuberculocidal. Items that cannot be autoclaved can be placed in the solution for thirty minutes to achieve disinfection. The clinic uses an ultrasonic cleaning solution which has to be diluted in the ultrasonic cleaner. All chairs are disinfected as well as the units, x-ray machines, etc. with a wiping solution (Sani-Wipes) because it does not discolor and has a pleasant odor.
2. Sodium Hypochlorite (Bleach) is used full strength to disinfect canals during endodontic treatment. Sodium hypochlorite may also be used to disinfect certain types of dental impressions. When used to disinfect impressions, the sodium hypochlorite is diluted with 1-part bleach to 10-parts water (written as 1:10). The solution must be discarded at the end of the day and re-mixed. The solution must remain on the impression for a minimum of ten minutes for complete disinfection.

Items to be barriered

1. Dental Chair: back, arms, headrest and controls
2. Light handles and buttons
3. X-ray heads, tubes, and x-ray control units
4. Dental units, unit controls, tops of dental units
5. Handpieces and tubing, air/water syringe controls and tubing, oral evacuation and saliva ejector hoses (optional)
6. Chair switches

Disinfection of Dental Impressions

In the laboratory classes, all impressions taken by students will be disinfected prior to pouring. All metal trays are to have the excess alginate cleaned out of the tray, placed in the Coe tray cleaning solution to remove the alginate, washed in soap and water, rinsed thoroughly, placed in the ultrasonic cleaner for a period of three minutes, rinsed thoroughly, placed in autoclave bags, and autoclaved for thirty minutes. Tongs should be used to place and remove the sterile trays in the appropriate drawers.

Impression materials differ in long term stability and are affected by exposure to moisture. Caution must be exercised in selecting a disinfection method to avoid distortion of the impression.

Rubber impressions are relatively stable; alginate impressions must be handled more carefully. Both immersion and spraying have been recommended for all types of impressions.

Immersion assures coverage of all surfaces.

Sprayed disinfectants pool, and all surfaces may not be adequately exposed.

Impressions should be disinfected for the time recommended by the manufacturer of the particular product.

If the impression is sprayed, it should be held in a closed container such as a sealed bag, for the recommended exposure time of the disinfectant. A label should be on the bag listing the student's name, date, type of disinfectant, and length of time disinfected.

Gloves should be worn during the handling of any impression.

Thorough rinsing of impressions is recommended both before and after disinfection. Rinsing before disinfecting is necessary to remove saliva and blood, which may prevent exposure of the impression surface to the disinfectant. This initial rinsing also significantly reduces the number of microorganisms.

Rinsing after treatment removes residual disinfectant, which may affect the surface of a stone or plaster model once it is poured.

Acceptable Disinfectant, Methods, and Time for Dental Impressions

Alginate- Rinse the impression, submerge the impression for sixty seconds in a 1:100 sodium hypochlorite, 5.25% (bleach) or 1:213 iodophor solution, placed in a sealed bag for a period of ten minutes, and rinse before pouring.

Rubber Base and Silicone Rubber- Immerse in any ADA accepted disinfectant solution for 10 minutes.

Polyether - Spray with a 1:100 sodium hypochlorite 5.25% (bleach) or chlorine dioxide solution and place in a sealed bag for ten minutes; rinse before pouring.

ZOE - Immerse for 10 minutes in a 1:213 iodophor, a 2% glutaraldehyde solution, or a glutaraldehyde with phenolic buffer, diluted 1:16.

Reversible Hydrocolloid - Immerse for ten minutes in a solution of 1:213 iodophor, a 1:100 sodium hypochlorite 5.25% (bleach), or a glutaraldehyde with phenolic buffer, diluted 1:16.

Impression Compound - Immerse for ten minutes in a solution of 1:213 iodophor, a 1:100 solution of sodium hypochlorite, 5.25% (bleach), glutaraldehyde with phenolic buffer, diluted 1:16.



Bloodborne and Infectious Disease

Hepatitis B Information Sheet

Type B Hepatitis

Type B hepatitis is an infection of the liver caused by the hepatitis B virus (HBV). Infective blood or body fluids transmit the hepatitis B virus. Infective blood or body fluids can be introduced by contaminated needles, by unapparent or unnoticed contact with infectious secretions from skin lesions or mucosal surfaces, or through sexual contact.

Hepatitis B is the most commonly reported type of hepatitis in the United States. It is an unpredictable disease with a variety of presentations and outcomes. It is estimated that 60-75% of people who are infected do not become ill. In this circumstance prior infection can only be detected by presence of antibody in the blood. Acute symptomatic hepatitis B infection may result in serious liver injury, which may incapacitate a person for weeks to months. Approximately 6-10% of persons with type B hepatitis become a carrier of the virus and death occurs in 1-2% of patients either as a result of acute liver failure or complications. Hepatitis B virus also has a role in the development of cirrhosis and liver cancer. There is no effective treatment for hepatitis B infection or disease.

Hepatitis B Vaccine

The Recombinant hepatitis vaccine is a genetically designed vaccine derived from yeast (not plasma). It is indicated for active immunization against infection caused by all known subtypes of hepatitis B virus. It will not prevent hepatitis caused by other agents, such as hepatitis A virus, non-A, hepatitis viruses, or other viruses known to infect the liver. Full immunization requires 3 intra-muscular doses of vaccine given over a six-month period. In an adult, the vaccine should be administered in the deltoid muscle of the arm. The vaccine has been found to be effective in producing hepatitis B antibodies at protective levels in more than 90% of healthy individuals who received the recommended three doses of the vaccine in the deltoid muscle of the arm. The duration of immunity is unknown at this time. A small percentage of healthy persons do not respond to the vaccine and do not develop immunity to HBV. Antibody status can be determined by blood testing. Hepatitis B has a long incubation period. HBV vaccination may not prevent HBV infection in individuals who have an unrecognized HBV infection at the time of vaccine administration.

Possible Vaccine Side Effects

The observed incidence of side effects is very low. Injection site reactions consist principally of tenderness and redness. The most frequent systemic complaints include, but are not limited to, fatigue/weakness, headache, and fever. It is not possible to contract hepatitis B from the vaccine since the vaccine is produced synthetically and not from human blood.

Who Should Consider the Vaccine

The Alabama Department of Public Health and the Centers Disease Control (CDC) recommend vaccination for persons of all ages that are or will be at increased risk of infection with HBV. [CDC Immunization of Health-Care Personnel](#)

Health care workers who have direct clinical patient contact or handle potentially infective materials or items are considered to have an increased risk for contracting hepatitis B.

Contraindication

Vaccination is contraindicated for pregnant or nursing women and for anyone with hypersensitivity to yeast or any component of the vaccine. Persons experiencing hypersensitivity reactions after an injection of the vaccine should not receive further injections.

Student Vaccination of Hep B

All students entering the Dental Assisting Program at Coastal Alabama Community College are required to read the provided information on Hepatitis B and return the signed attached form stating that you have read and understand the information (forms section of handbook).

The student should contact their physician and arrange for its administration. Students are responsible for the full cost of the vaccine and its administration.

It is the student's right to refuse the hepatitis B vaccination. If a student chooses to decline the hepatitis vaccination a declination form must be completed and submitted to the Dental Assisting program director. The same applies if the series is not complete before program entry. Both the immunization form and the declination form will be held in the student file until the series is complete. Once the completed the series documentation is provided to the director, the declination form will become void.



Ionizing Radiation Guidelines

Ionizing radiation is used in the dental assisting program to obtain dental images on patients for diagnostic purposes. The following criteria will be used by students and faculty during radiology (on campus and clinical).

1. Students will successfully take dental images on manikins in the campus lab before exposing dental images on patients in the clinical externship.
2. As dental images are requested for diagnostic purposes by the dentist, students will be scheduled to expose, process and mount the dental images under the supervision of the instructors in charge. The dental images will be delivered to the requesting dentist for diagnosis. After diagnosis, the dental images will be evaluated by the student and instructor.
3. All patients will be draped (for their protection) with the correct lead apron and thyroid collar prior to x-ray exposure.
4. All students, faculty and staff will stand out of the direction of the primary beam and behind the lead lined wall/door/shield or 6 feet away from the primary beam.
5. Students will be allowed four retakes on an adult patient with the assistance of the instructor.
6. Students will take radiographs using direct digital imaging sensors and Open Dental Software.
7. Any problems that should arise concerning the equipment should be brought to the attention of the instructor immediately. The instructor will record X-ray equipment problems on campus. Problems in extra-mural clinical sites will follow the procedures for the clinical site.
9. Exposed dental images will be handled according to the criteria in Appendix B of the radiology course syllabus and processed correctly.
10. Processed dental images will be mounted according to the criteria in Appendix C of the radiology course syllabus. After mounting, the student and the instructor will evaluate x-rays or technique for retakes using the following criteria:
 - a. The entire tooth/teeth is/are present for the selected area
 - b. The film has the proper density and contrast
 - c. The film has proper vertical and horizontal angulation
 - d. The film does not have cone-cuts that affect the diagnosis of the radiograph

- e. The film is processed correctly.

The dental assisting radiological instruction is reviewed and revised yearly by the dental assisting instructors and the director of dental assisting.

Standards for acceptable dental images will be discussed during lecture class and applied in both the campus and clinical sites.

- Ionizing radiation is used in the dental assisting program to obtain dental images on patients for diagnostic purposes. The following criteria will be used by students and faculty during radiology (on campus and clinical).
- Students will successfully place, expose, and process three complete sets of dental images on mannequins, (two DXXTR and one Petey) prior to exposure and processing two complete sets on live patients in the pre-clinical radiology lab session. This must be done and passed with a satisfactory score of 82 on each set before taking and exposing any dental images on a live patient in clinical setting (externship) in the summer semester.

Spring Semester

During the spring semester, each student will place, expose, and process:

- Three complete sets of bitewing dental images 2 adult and one child mannequin (two using bite-wing tab technique and one by use of Rinn Instruments; may be included in the FMS)
- Five single periapical dental images (one molar, one premolar, one cuspid, one max/mand anterior, and one film of choice – can be used in the FMS series of dental images).
- Two FMS of dental images on DXXTR and one FMS or bitewing on Petey – (One DXXTR using BAI technique, one DXXTR using Paralleling, and FMS or one bitewing set on Petey using snap-a-ray, bw tab, and occlusal technique). Students must achieve a score of 82 and self-evaluate all dental images prior to turning into the instructor. If the student does not achieve a score of 82 on DXXTR the student is given the opportunity to take (5) retakes to achieve that score; however, no higher than a score of 82 is given on retakes.
- If a student does not pass any one DXXTR FMS with 5 retakes, a student is allowed to retake an entire set of FMS but must pass with 0 retakes and receive a score not higher than an 82.* In order to pass a student must study and learn from the errors noted on the self/instructor evaluation form. The FMS must be scheduled with the program director.
- Expose and process one panoramic radiograph
- Expose and process one set of occlusal dental images on DXTRR.
- Duplicate one set of bite wing's (may be done with computer on photo paper)
- Students will be allowed up to 3 retakes on PETEY FMS.

- After successful completion of DXXTR and Petey FMSs, students are to take two passing sets on live patients, (see below description of varying patients) with a passing grade of 85.
 - On live patients, only four retakes will be allowed on adult FMS and two retakes on a child fourteen years or younger.
 - If after the retakes the score is still not passing, no more dental images will be allowed on the patient and a new patient must be procured for a passing grade.
 - All dental images must be primarily used for diagnostic purposes and not solely for instruction.
 - Dental images will be randomly checked in the summer to monitor the student's consistency.

RADIOGRAPHIC SURVEYS ON LIVE PATIENTS

- Patients selected for full-mouth series of radiographs in Radiology must not have had a full-mouth series within the last FIVE years. X-rays will be for diagnostic purposes only, not to meet the radiology course requirements.
- Two FMS with paralleling technique. Only if it deems necessary should the BAI technique be used. Tabs or the Rinn instrument can be used for bite wing exposure.
- Patients may be an adult patient with full dentition, a child patient with mixed dentition, or partially edentulous patient with four or more missing teeth.
- Patients must be fourteen years of age to qualify for adult dentition or have no more primary teeth present. (Unless they are missing permanent teeth and deciduous teeth are retained). Any child 19 years of age or under must have a notarized release form completed before any radiographs are exposed.
- A child patient must be of mixed dentition and age 8 or above. The instructor in the lab and the attending doctor must order the radiographs based on the patient's oral cavity size, therefore film for this set will be distributed on a case-by-case basis.
- A patient history and chart must be completed prior to taking the radiographs
- An instructor (a licensed dentist) must give the student permission to ensure that the patient is acceptable prior to the student exposing radiographs.
- The instructor's signature must appear on the patient chart as well as a notary on the college/patient consent form. Students will be responsible for writing up the chart and payment must be made prior to the patient being seated in the operatory.
- Should a patient want a photographic copy of their FMS sent to a general dentist or periodontist, the patient must sign a patient request form and provide the appropriate mailing address. No electronic communications of images are available. Copies will be printed on photographic quality paper and the doctor will include, if needed, areas of concern.
- No grade will be assigned unless the patient's chart, notes and health history are completed in entirety. This includes the radiology health history on the back. The health history must be signed by the patient or the guardian of the patient and must include the name of the dentist requesting the full mouth series of radiographs. Notes are to be written in Open Dental notes using the SOAP technique found in auto notes. All retakes must be recorded in the notes.
- Payment must be made prior to seating the patient.

- The fee for a FMS is \$30.00. Students are responsible for all fees not paid by the patients.
- Students must come to the clinical instructors to request retakes of patients.
- Radiographs that are non-diagnostic due to a malfunction of the processing equipment do not require payment, however, another patient must be encumbered.

Alabama Department of Public Health
420-3-26-.03 **Standards for Protection Against Radiation**

The following paragraphs apply to the Standards for a “Declared Pregnant Woman” taken from Article 420-3-26-.03. For the complete Article https://www.alabamapublichealth.gov/radiation/assets/part_03.pdf

420-3-26-.03(3)(t)

“Declared pregnant woman” means a woman who has voluntarily informed the licensee, in writing, of her pregnancy and the estimated date of conception. The declaration remains in effect until the declared pregnant woman withdraws the declaration in writing or is no longer pregnant.

420-3-26-03(13)

(13) Dose Equivalent to an Embryo/Fetus

- a) The licensee or registrant shall ensure that the dose equivalent to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 5 mSv (0.5 rem). See 420-3-26-03(46) for recordkeeping requirements.
- b) The licensee or registrant shall make efforts to avoid substantial variation above uniform monthly exposure rate to declared pregnant woman so as to satisfy the limit 420-3-26-.03(13)(a).
- c) The dose equivalent to an embryo/fetus shall be taken as a sum of:
 1. The deep dose equivalent to the declared pregnant woman: and
 2. The dose equivalent to the embryo/fetus from radionuclides in the embryo/fetus and radionuclides in the declared pregnant woman.
- (d) If by the time the woman declares pregnancy to the licensee or registrant, the dose equivalent to the embryo/fetus has exceeded 4.5mSv (0.45rem), the licensee or registrant shall be deemed to be in compliance with the 420-3-26-.03(13)(a) if the additional dose to the embryo/fetus does not exceed 0.5 mSv (0.05 rem) during the remainder of the pregnancy.

Article 420-3-26.03(18)(a)3

- a) Each licensee or registrant shall monitor occupational exposure to radiation and shall supply and require the use of individual monitoring devices by:
 1. Adults likely to receive, in 1 year from sources external to the body, a dose in excess of 10 percent of the limits in 420-3-26-.03(6)(a); and
 2. Declared pregnant women likely to receive during the entire pregnancy, from radiation sources external to the body, a deep dose equivalent in excess of 0.1 rem

- b) The licensee or registrant shall ensure that instruments and equipment used for quantitative radiation measurements, for example, dose rate and effluent monitoring, are calibrated at intervals not to exceed 12 months for the radiation measured.
- c) All personnel dosimeters, except for direct and indirect reading pocket ionization chambers and those dosimeters used to measure the dose to any extremity, that require processing to determine the radiation dose and that are used by licensees and registrants to comply with 420-3-26-.03(6), with other applicable provisions of these, or with conditions specified in a license or registration shall be processed and evaluated by dosimetry processor:
- d) The licensee or registrant shall maintain the records of dose to an embryo/fetus with the records of dose to the declared pregnant woman. The declaration of pregnancy, including the estimated date of conception, shall also be kept on file, but may be maintained separately from the dose records.
 - 1. Holding current personnel dosimetry accreditation from the National Voluntary Laboratory Accreditation Program (NVLAP) of the National Institute of Standards and Technology: and
 - 2. Approved in this accreditation process for the type of radiation or radiations included in the NVLAP program that most closely approximates the type of radiation or radiations for which the individual wearing the dosimeter is monitored.
- d) The licensee or registrant shall ensure that adequate precautions are taken to prevent a deceptive exposure of an individual monitoring device.

(18) Conditions Requiring Individual Monitoring of External and Internal Occupational Dose.

- 3. Declared pregnant women likely to receive during the entire pregnancy, from radiation sources external to the body, a deep dose equivalent in excess of 0.1 rem.

Article 420-3-26-.03(46)(d)

- d) The licensee or registrant shall maintain the records of dose to an embryo/fetus with the records of dose to the declared pregnant woman. The declaration of pregnancy, including the estimated date of conception, shall also be kept on file, but may be maintained separately from the dose records.



COASTAL ALABAMA

COMMUNITY COLLEGE

STUDENT RADIATION INFORMATION/WAIVER

In consideration of my acceptance as a student at the Coastal Alabama Community College Dental Assisting Program, and in recognition of the possible danger to which I may voluntarily subject myself as a result of exposing radiographs on manikins or patients, I hereby agree to observe all radiation safety standards that have been presented in radiology classes.

Should I choose to utilize additional protection, I have been informed of the location of such protection.

Rule 420-3-26. 10(3) From the State of Alabama Public Health Department states that, rules regarding a “Declared Pregnant Woman” be provided for female workers so they can act responsibly if they should become pregnant while employed. The licensee/registrant should provide training on this for each new employee and then provide refresher training periodically thereafter for all female employees who may be affected by this.

Rules about “Declared Pregnant Women” will be addressed.

Student Signature

Student Number

Printed Name

Date



COASTAL ALABAMA

COMMUNITY COLLEGE

Dental Assisting Department Post-Exposure Procedure

Exposure to blood borne pathogens is considered to have occurred if blood or Other potentially infectious materials or items/surfaces contaminated with blood or other potentially infectious materials come in contact with a student's eyes, mouth, other mucous membranes, or non-intact skin or skin is pierced by items contaminated by blood or other infectious materials through such events as needle sticks, human bites, cuts, or abrasions.

In the event that a student is exposed to blood borne pathogens, the following procedures should be followed.

1. Immediately, or as soon as feasible, the skin areas should be washed thoroughly with soap and water and/or the mucous membranes, eyes, and/or mouth should be flushed with water. Any contaminated clothing should be removed. The student should contact the instructor or direct immediately and follow protocol for seeking medical attention. The student may go to a clinic of their choice for testing. The instructor will meet the student at the selected clinic. Any emergency care needed will be given by the clinical agency at the student's expense.
2. As soon as feasible, the incident should be reported to the Dental Assisting Director.
3. A Coastal Alabama State Community College Exposure Incident Report form should be filled out by the student, and signed by the student and the clinical instructor. A copy of this report will be filed in the student's permanent record and a copy will be given to the student.
4. The policies and procedures of the agency in which the student is assigned for clinical externship should be followed by the student with the assistance of the designated infection control person in charge and the clinical externship instructor. These procedures will include the exposed student's filling out an incident report for the clinical agency.
5. The person in charge will make arrangements to gain consent and test for the source individual's blood if the source is known. The student may be responsible for the expense of the blood testing of the source individual.
6. Results of the source individual's blood testing will be made available to the exposed student. The student will be informed that he/she is prohibited by law from disclosing the identity of the source individual.
7. The exposed student will be referred to his/her private physician for follow-up care. This follow-up care will be at the student's expense. The student will be provided with the following information for his/her physician by the director of dental assisting:
 - a. Information on the student's HBV vaccination status
 - b. A copy of the OSHA regulations pertaining to blood borne pathogens

- c. A copy of the Coastal Alabama State Community College Exposure Incident Report which includes documentation of the route(s) of exposure and circumstances under which exposure occurred.
 - d. A description of the student's duties as they relate to the exposure incident.
 - e. A copy of the student's completed Student Health Examination Form.
 - f. Results of the source individual's blood testing if available.
 - g. Copies of the forms to file on the Health/Accident Policy provided by the college.
8. It is the student's responsibility to get follow-up care from his/her private physician following an exposure incident and to pay for the cost of that care. Verification that follow-up care has been done (Exposure Follow-up Verification Form) must be provided to the dental assisting program director.



COASTAL ALABAMA COMMUNITY COLLEGE

Dental Assisting Program Exposure Report

****Confidential****

Student Information

Name: _____ Date of Birth: _____

Facility where exposure occurred: _____

Street address: _____

City: _____ State: _____ ZIP: _____ Cell: _____

Date & time of exposure: _____ Date & time reported: _____

Has the student received the Hepatitis B vaccine series? ☐ Yes ☐ No

If yes, dates of vaccination: 1. _____ 2. _____ 3. _____

Post-vaccination HBV antibody status, if known: _____ positive _____ titer _____ negative
_____ unknown

Date of last tetanus vaccination: _____

Review of exposure incident follow-up procedures: ☐ Yes ☐ No

Exposure Incident Information

Is the exposure sharps related? ☐ Yes ☐ No

If yes, type of sharp:

Work area where exposure occurred:

Procedure in progress:

How incident occurred:

Action taken:

Location of exposure (example: right index finger):

Did the sharps involved have engineered injury protection: ☐ Yes ☐ No

If yes, was the protective mechanism activated? ☐ Yes ☐ No

The injury occurred (circle one): BEFORE / DURING / AFTER activation of the protective mechanism.

If no, in the student's opinion, could a mechanism have prevented this injury? ☐ Yes ☐ No

If yes, how? _____

In the student's opinion, could any engineering, administrative, or work practice controls have prevented the injury?

Source Information

Name: _____ Telephone: _____

Gives consent to release information to evaluating health care professional? ☐ Yes ☐ No

Signature: _____

Review of source medical history: ☐ Yes ☐ No

Verbally questioned regarding:

Positive history for Hepatitis B, C, or HIV infection? ☐ Yes ☐ No

If yes, _____

High risk history associated with these diseases? ☐ Yes ☐ No

If yes, _____

Patient consents to be tested for HBV, HCV, and HIV? ☐ Yes ☐ No

Evaluating Health Professional Information

Referred to: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone: _____

Questionnaire completed by: _____

Retain one copy for office records, send one copy to evaluating health professional with the student, and send one copy to the DA program director.



COASTAL ALABAMA COMMUNITY COLLEGE

Informed Refusal of Post-Exposure Medical Evaluation

I, _____ am a student of the Coastal Alabama Community College Dental Assisting Program. I have been provided training regarding infection control and the risk of the transmission of diseases in the dental office. On (date) _____ I was potentially exposed to infectious disease in a dental office during a clinical practice rotation.

Summary of Incident

As a student, I am aware that expenses incurred for follow-up medical evaluation and recommended treatment for any infectious disease that I may have contracted as a result of this incident is my responsibility. Please initial: _____

I am electing **NOT** to follow up this incident with a medical examination.

Signature: _____ Date: _____

Name (printed): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Phone # _____

Witness signature: _____ Date: _____

Witness (printed): _____



COASTAL ALABAMA

COMMUNITY COLLEGE

Dental Assisting Program

OSHA Class Attendance Verification Form

My signature on this form indicates that I have attended an education class on the OSHA regulations on blood borne pathogens that was presented by the faculty of the Coastal Alabama Community College Dental Assisting Department and successfully completing DAT 100. Topics covered in this class included:

1. An explanation of the OSHA regulations on blood borne pathogens.
2. A general explanation of the epidemiology and symptoms of blood borne diseases.
3. An explanation of the modes of transmission of blood borne pathogens.
4. An explanation of the Coastal Alabama State Community College Dental Assisting Department's Exposure Control Plan.
5. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
6. An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment.
7. Information on the types, proper uses, location, removal, handling, decontamination, and disposal of personal protective equipment.
8. An explanation for the basis for selection of personal protective equipment.
9. Information on the hepatitis B vaccine, including information on its efficacy, safety, methods of administration, and the benefits of being vaccinated. It is my responsibility to get the vaccination from my private physician.
10. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
11. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that should be done.
12. Information on the post-exposure evaluation and follow-up and that it is my responsibility to see my private physician for this follow-up.
13. An explanation of the signs and labels and/or color-coding required by the OSHA regulations.
14. Notification that students are not considered to be "employees" of Coastal Alabama State Community College or a dental office and, therefore, not entitled to free vaccination or post-exposure evaluation and follow-up.

I was given an opportunity to ask and have my questions answered by the person presenting the class. In addition, I received a copy of the following:

1. Coastal Alabama's Dental Assisting Program Exposure Control Plan.
2. OSHA regulations on blood borne pathogens and information on sterilization and disinfection to decrease risk of infection by blood borne pathogens.

I have received and been directed to read the Policy Manual for Dental Assisting/Rules and Regulations of the Dental Assisting Program, paying particular attention to the section on clinical externship and compliance with the OSHA regulations related to blood borne pathogens and the exposure control plan.

I accept the responsibility for understanding and utilizing the information and procedures to decrease my risk of infection by blood borne pathogens.

Name

Student Number

Student Signature

Date

Witness

I did_____ or did not_____ pass the DANB Infection Control Exam



COASTAL ALABAMA
COMMUNITY COLLEGE

Appendix B

Grade Distribution



COASTAL ALABAMA

COMMUNITY COLLEGE

BASIS FOR FINAL GRADE

Letter grades will be assigned according to the following for all DAT courses:

Percentage Grade	Letter grade
90-100	A
80-89	B
70-79	C
60-69	D
59 and below	F

There will be no rounding of grades except for the final grade. For example, if a student's final grade is a 79.5 (.5) is rounded up and the student will be awarded a B.

DAT 100

Assessments	Point Value	Percent of Final Grade
Class assignments	13 class assignments	25%
Quizzes	9 quizzes	20%
Mock Exams	2 mock exams worth 100 points each.	10%
Midterm	1 worth 100 points	20%
Final Examination	1 comprehensive worth 50 points	25%
TOTAL		100%

DAT 101

Assessments	Point Values	Percentage of Final Grade
Class assignments	9 assignments	25%
Quizzes	6 quizzes	25%
Skills Evaluations	33 skills assessments worth 100 points each	25%
Final Exam	1 comprehensive final worth 100 points	25%
TOTAL		100%

DAT 102

Assessments	Point Values	Percentage of Final Grade
Class Assignments	11 class assignments	25%
Quizzes	6 quizzes	25%
Skills evaluation	31 skills assessments worth 100 points each	25%
Final Exam	1 final exam worth 100points	25%
TOTAL		100%

DAT 103

Assessment Categories	Percent of Final Grade*	Points for Final Grade*
Class Assignments	11 assignments	25%
Quizzes and ID Tests	2 quizzes 5 identification tests	25%
Midterm	1 midterm worth 100 points	25%
Final Examination	1 final exam worth 100 points	25%
TOTAL		100%

DAT 104

Assessment Categories	Percent of Final Grade*	Points for Final Grade*
Class Assignments	15 class assignments	25%
Quizzes	8 quizzes	25%
Midterm	1 midterm worth 60 points	25%
Final Examination	1 comprehensive final worth 100 points	25%
TOTAL		100%

DAT 111

Assessments	Point Value	Percent of Final Grade
Class assignments	15 class assignments	20%
Journals	15 journals worth 50 points each	20%
Presentation	1 presentation worth 100 points	10%
Final Exam	1 comprehensive final worth 100 points	25%
Instructor Evaluation	1-2 instructor evals worth 100 pts each	20%
Dr/Staff Evaluations	2 Dr/Staff evals worth 100 pts each	5%
TOTAL		100%

DAT 112

Assessments	Point Value	Percent of Final Grade
Class assignments	14 class assignments	15%
Clinical skills checkoffs/Radiographs	10 skills checkoffs/radiographs worth 100 points each	25%
Review Tests and Mock Exams	4 review tests worth 100 points each. 1 mock exam worth 100 points each	15%
Midterm	1 midterm worth 50 points	20%
Final Examination	1 comprehensive final worth 100 points	25%
TOTAL		100%

DAT 113

Assessments	Point Value	Percent of Final Grade
Class assignments	15 class assignments	20%
Community Service Participation	3 community projects worth 100 pts each	15%
Review Tests	2 review tests worth 100 points each.	20%
Midterm	1 worth 100 points	20%
Final Examination	1 comprehensive final worth 100 points	25%
TOTAL		100%

DAT 116

Assessments	Point Value	Percent of Final Grade
Class assignments	7 class assignments	25%
ID Tests and Lab Assignments/Skills	14 lab skill assignments worth 100 points each. 6 ID tests	25%
Review Tests	5 review tests worth 100 points each.	25%
Final Examination	1 comprehensive final worth 50 points	25%
TOTAL		100%

DAT 121

Assessments	Point Value	Percent of Final Grade
Class assignments	11 class assignments	25%
Software Tutorials/Critical Thinking Skills	7 software tutorials/critical skills worth 50 points each	25%
Review Tests	4 review tests worth 100 points each.	25%
Final Examination	1 comprehensive final worth 100 points	25%
TOTAL		100%

DAT 122

Assessments	Point Value	Percent of Final Grade
Tally Sheets	9-10 class assignments worth 20 points each	20%
Journals	9-10 journals worth 50 points each	25%
Presentation	1 presentation worth 100 points	20%
Instructor Evaluations	1-2 Instructor Evaluations worth 100 points	30%
Dr/staff Evaluations	2-3 Dr./Staff Evaluations worth 100 points	5%
TOTAL		100%

DAT 126

Assessments	Point Value	Percent of Final Grade
Class assignments	3 class assignments	25%
Quizzes	7 Review Tests	25%
Mock Exams	2 mock exams worth 100 points	25%
Final Exam	1 comprehensive final worth 100 points	25%
TOTAL		100%

COASTAL ALABAMA Allied Health Programs: Affirmation and Release Form

I, _____ (print name) affirm that I:

Received a copy of the Program Handbook and agree to abide by the policies, procedures, and guidelines referred to and within. I understand that I must have a PC or MacBook laptop as well as access to high-speed internet.

_____Initials

Agree that neither the College nor any member of the department is responsible for injuries, communicable diseases, infectious or viral diseases, or any adverse effects encountered while participating in any academic function related to program participation, including but not limited to the lab, and/or clinical setting.

_____Initials

Agree to maintain medical insurance for the duration of the program understanding that the College, instructors, and clinical agencies are not responsible for any claims or expenses incurred while participating in the Allied Health Program, including at a clinical site and/or at the campus lab.

_____Initials

Agree not to practice invasive procedures outside of the supervised lab or clinical setting.

_____Initials

Agree to perform clinical facility orientations as specified prior to performance of clinical experiences.

_____Initials

Will not receive monetary or other compensation for participation in the clinical course from either the institution or healthcare facility unless enrolled in an apprenticeship with a participating facility.

_____Initials

Will provide updated CPR and immunization records prior to the beginning of the semester for which they fall due.

_____Initials

Understand that I will be required to undergo background screening/drug testing and untoward findings may result in termination from the program. Drug testing is required a minimum of every 12 months and randomly as requested.

_____Initials

Meet the essential eligibility criteria with or without accommodations in order to fulfill the program requirements and perform in the clinical settings.

_____Initials

Student Signature: _____ Date: _____

Coastal Alabama Allied Health Program: Consent Form

Coastal Alabama Community College Allied Health Program: Consent to Maintain Healthcare Records

I understand that the Coastal Alabama Allied Program will maintain copies of my health records required for clinical/program participation. This information is severely restricted to the legitimate operational use of the Coastal Alabama Allied Health Program. To protect my privacy, this information will be maintained securely and not disclosed to anyone without my written permission unless required by law.

The Coastal Alabama Community College Allied Health Program may use this information to notify me of expiring immunizations or other related health requirements. I agree that information may be revealed to attending health providers in the event of a medical emergency or for clinical participation. All physical healthcare records maintained by the Coastal Alabama Allied Health Program will be destroyed three years following the completion of, or termination from the program.

Student Signature: _____

Transfer of Records

I give permission for the dental assisting program to write a letter of good standing to other institutions as needed in the case of a transfer request. Students will make the request from program director and/or instructors prior to placement of such letter.

Student Signature: _____

Criminal Charges

I will inform the Program Director/Division Chair of any criminal charges incurred after admission to the program. The Program Director/Division Chair will report to the clinical agencies to determine the student's eligibility to continue in the program.

Student Signature: _____

Background Check and Drug Screen

I give permission for the Coastal Alabama Allied Health Division to forward the results of my background check and/or drug screen as requested of the clinical agencies used by Coastal Alabama.

Student Signature: _____

Date: _____

COASTAL ALABAMA COMMUNITY COLLEGE
ALLIED HEALTH
FLU VACCINATION FORM

Flu Vaccine

I verify that I understand I may be required to obtain a flu vaccination in Fall semester and for subsequent Spring semester clinicals.

Student Signature: _____

Records Due

Students will **not** be allowed to attend class or clinical until requested information has been received by CastleBranch or the administrative assistant at the respective campus. It is the responsibility of the student to verify that information submitted to Castle Branch was received.

Student Signature: _____

Date: _____



COASTAL ALABAMA

COMMUNITY COLLEGE

Hepatitis B Vaccination Form

I have read the hepatitis B virus and vaccination information provided by Coastal Alabama State Community College. I understand and accept the responsibility of beginning, before program entry, and completing the series of vaccination. I agree to receive the complete series of immunizations according to the following schedule:

1st dose of vaccine

2nd dose of vaccine one month later

3rd dose of vaccine six months after the initial dose

I agree to hold Coastal Alabama State Community College and any and all of its agents, officials, or employees harmless from any injury, complication of side effect caused by the administration of said vaccine. I understand that if I do not complete the series or am physically unable to take the series I must provide documentation to support denial and I must sign a declination form to be placed in my file.

Student's Signature _____ Date _____

Student's Social Security Number _____

OSHA CLASSIFICATION:

☒ Category I

☐ Category II

☐ Category III (Category III does not require HBV vaccination)

Declination signed _____



COASTAL ALABAMA

COMMUNITY COLLEGE

OSHA Declination Statement

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine; however, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine I continue to be at risk of acquiring hepatitis B, a serious disease. If, in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series.

HEPATITIS B WAIVER

I decline the necessity to take the Hepatitis B Vaccine for the following reasons:

SIGNED _____

DATE _____

**ALABAMA COLLEGE SYSTEM
STUDENT DRUG SCREEN POLICY PARTICIPATION FORM**

I understand that any student who enrolls in an Alabama Community College System Allied Health Programs and desires to participate in courses which have a clinical component is required to have an initial pre-clinical drug screening. I certify that I have received a copy of the Alabama Community College System Drug Screen Policy, have read, and understand the requirement of the policy and guidelines. I further understand that if I fail to provide a certified negative drug screen result, I will be unable to participate in the clinical portion of the Allied Health Program. **Failure to participate in clinical learning experiences for courses containing a clinical component will result in failure of the course.**

BY SIGNING THIS DOCUMENT, I AM INDICATING THAT I HAVE READ, UNDERSTAND, AND VOLUNTARILY AGREE TO ABIDE BY THE REQUIREMENT TO HAVE A DRUG SCREEN AND TO PROVIDE A CERTIFIED NEGATIVE DRUG RESULT PRIOR TO PARTICIPATION IN THE CLINICAL COMPONENT OF THE ALLIED HEALTH PROGRAM.

A COPY OF THIS SIGNED AND DATED DOCUMENT WILL CONSTITUTE MY CONSENT FOR THE DESIGNATED CERTIFIED LABORATORY PERFORMING THE DRUG SCREEN TO RELEASE THE ORIGINAL RESULTS OF ANY DRUG SCREEN TO THE COLLEGE'S ALLIED HEALTH PROGRAMS.

I understand that my continued participation in the Alabama Community College System is conditional upon satisfactorily meeting the requirements of the Drug Screen Policy as well as such related requirements by the clinical agencies providing clinical rotations for Allied Health Programs.

I hereby release the Alabama Community College System, the College and designated Drug Screen Company and Laboratory, Medical Review Officer, nursing faculty and staff from any claim in connection with the Drug Screen Policy.

I further understand that should any legal action be taken because of the Drug Screen Policy, that confidentiality can no longer be maintained.

Student Signature

Witness Signature

Student Printed Name

Witness Printed Name

**COASTAL ALABAMA COMMUNITY COLLEGE ALLIED HEALTH
REQUEST FOR INSTRUCTOR REVIEW OF EXAM ITEM**

STUDENT: _____

COURSE NUMBER: _____

DATE SUBMITTED: _____

EXAM NUMBER: _____

TIME SUBMITTED: _____

EXAM ITEM NUMBER: _____

- This form must be submitted to the instructor of record within 72 hours of exam/test review period. Requests submitted later than 72 hours will not be accepted due to failure to follow policy.
- No more than one exam item per request form.

Chosen response and student rationale with documented reference:

Instructor Review Decision:

Submission of this form does not guarantee that credit will be provided for an incorrect answer, but it may be considered.

Student Signature _____

Instructor Signature _____

Date _____

Date _____

**COASTAL ALABAMA COMMUNITY COLLEGE ALLIED HEALTH
COACHING AND FEEDBACK RECORD**

Student Name:

Date of Report:

Department: Nursing

Student #:

Counseled By:

Coaching and Feedback needed due to:

- ☐ Attendance ☐ Safety ☐ Insubordination ☐ Policy/Rule Violation ☐ Tardiness
- ☐ Unsatisfactory Clinical Performance ☐ Failure/Refusal to Follow Instructions
- ☐ Unsatisfactory Lab Performance ☐ Other
-

Action/Comment (Include dates/times as appropriate):

Corrective Measures:

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

COASTAL ALABAMA ALLIED HEALTH: PROBATION/MISCONDUCT FORM

Student	Date	Course
<p>This form represents a written plan and agreement between the faculty and student that identifies unsatisfactory performance or misconduct. This form describes changes that must occur to correct the unsatisfactory performance or misconduct.</p>		
<p>Unsatisfactory Performance or Misconduct</p>		
<p>Corrective Measures</p>		
<p>Length of Probation</p>		
Student Signature	Date	
Instructor Signature	Date	
<p>Evaluation</p>		
<p>Outcome</p> <p>_____ Student <u>has</u> satisfactorily met/complete corrective measures</p> <p>_____ Student <u>has not</u> satisfactorily met/complete corrective measures</p>		
<p>Comments of Faculty/Chair</p>		

ABSENCE & LEAVE REQUEST FORM

I understand the absence policy as explained in the policy manual. As a result of this understanding I, _____ am requesting the following:

Date requested (today's date): _____

Type of Absence: leave day _____ Dr. day _____

Date(s) of Absence: beginning _____ ending _____

Number of: _____ days or _____ ½ days

Student's signature _____

Director's signature _____

*Note all clinical days missed must be made-up. No days missed can be consecutive unless documentation of an illness or a death of an immediate family member that warrants travel is provided.