



Dental Hygiene Program

Student & Clinic Handbook

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INTRODUCTION

The contents of this handbook may be subject to change throughout the program.

Please be advised that the University Catalog contains policies and procedures that apply to all students and is the primary source of reference. If there are any discrepancies or differences in the policies or procedures contained in the University Catalog with those contained in the DH Programmatic Student Handbook, the University Catalog will be followed.

The Dental Hygiene program is designed to lead to licensure into the profession of dental hygiene. Each state has different licensure requirements, and the student is responsible for researching the specific requirements of each state. WCU prepares students to meet eligibility requirements for multiple licensing boards.

The Dental Hygiene Program's curriculum is designed to be taken in a specific sequence. All courses must be completed with a passing score of 76% or better in order to continue in the program. The program encourages an atmosphere of cooperation and non-competitiveness for students to successfully complete the objectives, competencies and goals of the program.

Passing the National Board Dental Hygiene Examination (NBDHE) and a state or regional examination among other criteria, qualifies the graduate to practice as a licensed dental hygienist in the state where the graduate desires to be employed.

- According to the NBDHE Guide, a dental hygiene student in an accredited program is eligible for examination when the dental hygiene director (or designee) certifies that the student is prepared for the examination. To be eligible to be put forth by West Coast University as a candidate to the NBDHE, the student must complete the core courses with a minimum grade of 76% inclusive of core terms 7-12. Students meet the eligibility requirements within four months of anticipated issuance of a Bachelor of Science in Dental Hygiene degree. In addition, students must pass an online dental hygiene exit exam with a minimum score of 80% and 700 or greater to be eligible to sit for the NBDHE.
- Students may take the Central Regional Dental Testing Service clinical exam or any regional examination in their last term, prior to graduation, per exam guidelines.
- Students may take the California law and ethics examination only after graduation and passage of the NBDHE as per Dental Hygiene Board of California (DHBC) requirements.
- Additional licensure requirements may be necessary depending on the specific state or regional examination criteria at the time of examination. More information will be provided by the Senior Clinic Coordinator during the senior year.

A total of 124 semester credits are required to earn the Bachelor of Science Degree in Dental Hygiene (BSDH) degree, including the successful completion of general education and core dental hygiene courses. Completion of these courses with a minimum grade requirement is mandatory for a student to be eligible for graduation.

SECTION I – STUDENT HANDBOOK

DENTAL HYGIENE PROGRAM MISSION

The Dental Hygiene Program's mission is to impact the future of oral health care by graduating highly qualified dental hygienists with the knowledge, skills, and values for lifelong learning through excellence in education, faculty, patient care, innovation, research, community service, public health, and facilities.

DENTAL HYGIENE PROGRAM PHILOSOPHY

The WCU Dental Hygiene Program is dedicated to fostering a humanistic culture and a student-centered learning environment that prioritizes the holistic development of every individual. Our commitment is reflected in our continuous efforts to regularly evaluate and enhance our evidence-based practices, ensuring our program remains responsive to the evolving needs of our students and community. The program promotes open-communication, collaboration, empathy, mutual respect, professional and ethical behavior, inclusivity, leadership and scholarship opportunities, and harmonious relationships among administrators, faculty, students, staff, and alumni.

DENTAL HYGIENE PROGRAM LEARNING OUTCOMES

Upon successful completion of the program and all licensing examinations, the entry-level dental hygienist will be able to:

1. Utilize scientific knowledge to evaluate research and use evidence-based strategies in clinical care, ensuring informed, high-quality decision-making that enhances patient outcomes.
2. Apply community-based public health strategies to promote health, prevent disease and reduce oral health disparities.
3. Implement communication skills to strengthen interprofessional collaboration and engage diverse patient populations in a culturally competent manner.
4. Provide comprehensive patient-centered care to promote oral health across the life span utilizing evidence-based dental hygiene care and collaborative, patient-centered decision-making
5. Exhibit professionalism in dental hygiene practice to uphold legal and ethical standards, ensure responsible patient-centered care, and maintain intra-professional collaboration.
6. Explain the value of lifelong learning to enhance professional growth, engage in reflective practice, advance clinical expertise, and serve as an advocate for the advancement of oral health.

PROGRAM COMPETENCIES

The Program Learning Outcomes serve as the Commission on Dental Accreditation required program competencies. The PLOs are listed in every syllabus and students will be expected to build an academic portfolio providing evidence and reflection of achievement of these PLOs prior to graduation. The comprehensive academic

portfolio will be due during term 14 in DHYG 492 and is considered a critical assignment, meaning students must receive a 76% or higher on the portfolio to pass the course. In addition, a junior exit exam will be administered at the end of Term 10 and a senior exit exam will be administered at the end of Term 14, assessing the students' knowledge and competency of the PLOs. The PLOs are mapped to the American Dental Education Association (ADEA) Competencies for Allied Dental Professionals and Entry-Level Dental Hygienists.

COMPETENCIES FOR ENTRY INTO THE PROFESSION OF DENTAL HYGIENE

Allied Dental Professional Core Competencies

Domain I: Professional Knowledge

(PK) Professional Knowledge competencies reflect the professional values, ethics, skills, safety, critical thinking, and scientific inquiry and research integral to all aspects of allied dental professions. These competencies are foundational to all the roles of allied dental professionals.

Domain II: Health Promotion and Disease Prevention

(HP) Health Promotion and Disease Prevention is a key component of health care. Changes within the health care environment require the allied dental professional to have a general knowledge of health education and disease prevention, health literacy, wellness, health determinants, characteristics of various patient communities, and advocacy that may increase patient's access to the oral health care system or may offer ways to influence the profession and the changing health care environment.

Domain III: Professional Development and Practice

(PDP) Professional Development and Practice competencies reflect professional growth, business practices and leadership in the allied dental profession. This includes a commitment to life-long learning, self-awareness, professional growth, interprofessional collaboration, and leadership opportunities. The allied dental professional must possess transferable skills to take advantage of these opportunities.

Discipline-Specific Competencies—Dental Hygiene

Domain IV: Essential Knowledge

(EK) Essential Knowledge competencies require the dental hygienist to apply foundational sciences and behavioral sciences knowledge during the dental hygiene process of care in their identification, prevention and management of oral diseases.

Domain V: Person-Centered Care

(PC) Person-Centered Care competencies dictate the role of a dental hygienist regarding patient care to be central to the maintenance of oral health. Therefore, dental hygienists must use their skills to assess, diagnose, plan, implement, evaluate and document treatment or services provided. Dental hygienists must be appropriately educated and credentialed for the patient care services they provide.

Adapted from American Dental Education Association. (2023). ADEA Competencies for Entry into the Allied Health Professions, (as approved by 2023 ADEA House of Delegates).

COMPETENCY BASED CURRICULUM

The dental hygiene core program is a competency-based curriculum. Students develop competency through observation, practice, skills assessments and competency assessments. Students, upon graduation from WCU, should be able to demonstrate competency in entry-level dental hygiene patient care. Areas of competency include but are not limited to:

- Infection Control
- Risk assessment for caries, oral pathology, and periodontal disease
- Preventive and adjunctive therapies
- Nutritional counseling
- Tobacco counseling
- Radiography techniques
- Patient management of a diverse population including children, adolescents, adults, and geriatric patients
- Management of the medically compromised patient
- Effective verbal and non-verbal communication with consideration of cultural sensitivity
- Treatment planning in conjunction with faculty and patient
- Safe practice using infection control
- Oral health education using brief motivational interviewing
- Pain management skills for delivery of local anesthesia and nitrous-oxide sedation
- Non-surgical periodontal therapy
- Soft tissue curettage techniques
- Care and maintenance of restorations
- Evaluation of continuing care

Performance criteria are based on the Program Learning Outcomes:

- Ethics
- Professionalism
- Effective communication
- Evidence-based decision making
- ADPIED (Assessment, detection, planning, implementation, evaluation, documentation)

Students are presumed competent when:

- By the end of Junior year, students are performing at a clinical competency level of 80% or higher
- During Senior year students are performing at a clinical competency level of 95% or higher

ACCREDITATION OF THE DENTAL HYGIENE PROGRAM

The dental hygiene program is accredited by the American Dental Association Commission on Dental Accreditation (CODA) with the status of: *Approval without Reporting Requirements*. CODA is a specialized accrediting body recognized by the United States Department of Education. A copy of the accreditation standards is available for review from the Dean of Dental Hygiene and is located online at www.ada.org. If a student has a complaint related to the program's compliance with the accreditation standards, they should contact CODA at 211 East Chicago Avenue, Chicago, IL 60611-2678 or by calling 800-232-6208 or emailing at coda@ada.org. In addition, the program is approved by the Dental Hygiene Board of California (DHBC). If a student has a complaint related to the program's compliance with state statute or regulations, they should contact DHBC at 2005 Evergreen Street, Suite 1350 Sacramento, CA 95815 or by calling 916-263-1978.

PARKING POLICY

WCU Parking Areas are maintained for the benefit of students, employees, and visitors. WCU Parking Policy will be enforced for the benefit of those who use campus facilities to ensure that all permitted or authorized individuals have maximum access to suitable parking in and around campus parking areas. A parking permit is required at the Manchester parking lot. Enforcement of parking regulations will be enforced with the express intent of maintaining accessible and safe parking for all who visit WCU. Students will pick up the required parking pass and ID from Student Affairs. A parking app is available at: <http://westcoastuniversity.edu/parking/wcu-oc.html>. If the parking lot is full, students are to use the satellite parking lot. Students will be transported to/from the lot in a shuttle following a schedule of pick up and drop off times. The satellite lot is located at the:

La Palma Learning Site 2411 West La Palma Avenue, Anaheim, CA 92801

It is located off the 5 freeway from the campus and takes about 15 minutes to get to and from the campus on the shuttle. Patient parking is available on campus in marked parking locations. Due to the probability of parking off campus, students should allow sufficient time to park in the satellite lot and be in class/lab/clinic on time (approximately 30 minutes). No students may park in an area designated for patients, visitors, or handicapped. The parking attendant will enforce the parking policy.

JURY DUTY

The state of California does not excuse students from jury duty. You are permitted to request your service to coincide with your next break or even out as far as December break. This request needs to be on the first notification of your jury duty. The Registrar has an Enrollment Verification form that you can complete to request a letter stating you are a full-time student that could be used to submit for a postponement. This letter will be emailed and takes 2-3 business days. Per your jury duty notification, if you do not request a postponement upon the first notification, you

may still request postponement, but you will need to appear on the first date of your assigned time. At minimum, this will result in either a full or half day of class lost.

Students are under the dental hygiene attendance policy and course performance requirements each term. As per the attendance policy, students taking DHYG courses who exceed 20% of the contact hours for a course(s) will receive an 'F' grade. As per Dental Hygiene Program Grade Requirements, students must earn a minimum grade of 'C+' in all DHYG courses. Therefore, students who earn an 'F' grade will be dismissed from the program. Students cannot make up the missed class contact hours due to jury duty but can make up didactic assignments and exams as described in the syllabus as well as clinic requirements.

PROGRAM REQUIREMENT POLICIES

The dental hygiene program is a full-time program that is very rigorous and places significant demands on students. Each individual course will state the requirements in the course syllabus. Failure to meet the deadlines and criteria set forth in the syllabus will affect the student's course grade as stated in each syllabus. As a student in a professional program, correct spelling and grammar are required on all quizzes, exams, and papers. Points may be deducted for incorrect spelling and grammar. Rubrics will be used to assess projects and assignments. Students must accept ultimate responsibility for completing all course requirements at the designated skill level in clinic and didactic courses at a minimum grade level of 76%.

Program Dress Code:

Students are expected to maintain a neat, clean appearance during class time, as they will in their future roles and positions. Personal and oral hygiene should be maintained, including appropriate use of deodorant and anti-perspirants. It is expected that students dress in business casual attire while on campus, unless otherwise required by the program. Students will be asked to change their attire if they are not meeting the program dress code. In addition to the dress code as outlined in the WCU Student Handbook, students in the program may not wear the following:

- No flip flops, sandals are allowed as long as there is a heel strap
- No denim (blue jeans) pants
- No shorts
- No midriff tops
- No tank tops
- No athletic wear
- No hats/caps worn indoors

Absence Protocol (lecture, lab or clinic):

West Coast University emphasizes the need for all students to attend classes on a regular and consistent basis. Students may be dismissed from the program if 20% or more in attendance time is missed in any course. There is a 0% absence requirement for clinic sessions. Students are required to make-up any missed clinical hours.

Regular attendance and punctuality will help students develop good habits and attitudes necessary to compete in a highly competitive job market.

If a student is unable to attend lecture, lab or clinic, it is the responsibility of the student to reach out to their instructor. If a clinic session is going to be missed, the student must call the Clinic at 877.928.2546, who will alert the faculty that the student will not be able to attend clinic that day. In addition, the student must contact their lead instructors for the day for class, lab or clinic advising they will not be in attendance. This may be done via email or REMIND app. Failure to alert faculty of an absence may result in a critical error.

- Students are responsible for all missed information.
- In classes with collaborative activities, no credit for missed collaborative activities will be awarded.
- Missed assignments, quizzes and exams may be made up, following the guidelines in the syllabus. In some cases, the student will not receive a score of more than 76% on a missed exam, quiz, or assignment.
- In the event any student has been hospitalized or had surgery for any reason, including but not limited to medical conditions, procedures, treatments or emergency care, the student is required to provide medical clearance from their medical provider before resuming class.

Academic Accommodations:

Any student requesting academic accommodation based on a verified disability is required to register with the Director of Student Services each term. The Director of Student Services will assist students with the necessary steps. A letter of verification for approved accommodations can be obtained from that office. This letter is to be delivered to the instructor(s) at the beginning of each term so appropriate arrangements can be made to accommodate the request.

Textbooks:

Textbooks are required to assist the student in achieving the objectives and competencies for the course. Those students who have opted into textbooks as part of their financial aid will receive a voucher directing when placing their order through the WCU virtual bookstore. Photocopying textbooks is prohibited, and students will be subject to Conduct Committee referral if found to be using photocopies of textbooks.

Course Preparation:

Students are expected to complete designated readings and other assignments prior to each class period. Due to the volume of information that a student must learn in this program, not all information will be covered in the classroom. Students are responsible for all information designated in the reading assignments regardless of whether it was covered in class. Students are responsible for clarifying their understanding of the course materials. Faculty have office hours and students are encouraged to take advantage of these hours to discuss course material. Students should come to class prepared and up to date with information being covered in each course.

Communication with Faculty:

Faculty will communicate with students on a regular basis via email or the REMIND app. It is therefore vital for students to have current contact information on file with the University. Each student must keep their current address, all telephone numbers, e-mail address, and emergency contact information on file with the Registrar and give the updated information to the Dental Hygiene Program Assistant. This information will be kept confidential, however, will be shared among WCU associates for necessary communication.

Office Hours:

Students are to contact instructors directly to meet with them during office hours if they have questions or concerns about a course. Full-time faculty course directors are required to have written office hours in the course syllabus and adjunct course directors have office hours by appointment only.

Professional Growth & Community Service:

Professional Growth and Community Service are graduation requirements. Students are required to attend four (two being live) professional activities during their senior terms to develop their involvement with the dental hygiene profession. Proof of attendance and completion of a reflection on the professional growth activity will be needed and collected.

Students are also required to participate in community outreach/service to develop their empathy, humility, and a sense of social responsibility. Students must complete two, 2-hour community outreach/service for a total of at least four hours community outreach/service by the end of their junior year and are required to complete a minimum of three community outreach/service events, each lasting at least two hours, during senior terms 11, 12, 13, or 14—for a total of six hours during the senior year. Proof of attendance and completion of a reflection on the community service will be needed and collected.

Research –Poster Presentation:

Students are required to do several reading and critical analyses of scientific literature throughout the curriculum. In the senior year research course, students will conduct original research and present a research poster to illustrate a comprehensive understanding of the scientific approach. A poster is a formal presentation using oral communication and poster to inform others about their original research results. All students in the dental hygiene program will conduct original research; this may be conducted via research teams.

Student Storage Areas:

Students are assigned three storage locations: (1) lockers are on 2nd and 3rd floor hallways and are for the purpose of storing personal belongings such as handbags and backpacks, (2) clinic cabinets are located in the north and south clinics with the purpose of storing patient supplies, and (3) sterilization boxes are located near the sterilization room for the purpose of storing sterilized patient supplies. Students are not allowed to switch their assigned storage areas. At no time are faculty expected to watch, observe, or maintain student property. If students are unable to maintain

their property in the appropriate lockers, students are to keep excess property in their automobile.

Practice of Dental Hygiene by Students:

In California, the Dental Hygiene Board of California (DHBC) is the governing body to the practice of dental hygiene. Students who practice dental hygiene without a license or outside of the educational setting are engaged in the illegal practice of dental hygiene. Dismissal from the program may result from a student's participation in the illegal practice of dental hygiene.

National Board Dental Hygiene Examination:

The purpose of the NBDHE is to assist state boards in determining qualifications of dental hygienists who seek licensure to practice dental hygiene. The examination assesses the ability to understand important information from basic biomedical, dental, and dental hygiene sciences and the ability to apply such information in a problem-solving context. West Coast University (WCU) pays the student's first-time testing fee for the National Board Dental Hygiene Examination. Students will be required to take the NBDHE prior to graduation. If a student is unable or unwilling to take the exam prior to graduation, they will be responsible to reimburse WCU for the NBDHE testing fee (currently \$600.00). If a student fails the NBDHE, they will be responsible for paying for any retests.

A dental hygiene student in an accredited program is eligible for examination when the dental hygiene director certifies that the student is prepared for the examination and is within four months of anticipated issuance of a dental hygiene diploma. Students of WCU will be allowed to take the NBDHE upon achieving the required score on the HESI dental hygiene exit exam.

Preparation for the NBDHE occurs during the senior year clinical seminar courses. Students are encouraged to create a study plan a minimum of six months prior to the examination, study materials provided by WCU and attend a review course. Students will take a Canvas Mock National Board in Term 11 to determine study topics and to prepare the student for the examination format and protocol. During terms 11 and 12, students will be required to complete Elsevier Adaptive Quizzing for Dental Hygiene on NBDHE topics and achieve the proficient level. During Term 12, students will be required to complete HESI online practice test questions and during Term 13, students will be required to complete online case-based practice test questions.

Students are provided with multiple resources to help with preparing for the NBDHE. West Coast University enrolls students in the ADHA National Board review course and provides multiple reviews with Dr. Turner to help students become successful on their NBDHE. The West Coast University National Board Review is a two-day, condensed course led by the National Board Success Manager that helps students review and focus their studies for success on the NBDHE. The course covers subjects included on the NBDHE and students must participate in both days to be adequately prepared for the examination. If a student fails to attend the West Coast University 2-day National Board Review their National Board exam

date will be delayed until the National Board Success Manager determines they are sufficiently prepared.

Students must earn 80.0% and 700 or higher on the HESI Exit Exam to be eligible to take the NBDHE. Students will have two opportunities to pass this exam prior to their National Board being rescheduled by the National Board Success Manager. If the National Board needs to be rescheduled, WCU will pay this fee once. If a student's National Board needs to be cancelled or rescheduled multiple times, the student will be required to pay the subsequent fees (\$25 each).

Students who do not pass the HESI exit exam on the first attempt will be required to attend additional NBDHE review tutoring sessions prior to taking the NBDHE to be held on several days determined by the National Board Success Manager. If a student who is required to attend these post-HESI review sessions fails to attend, their National Board exam date will be delayed until the National Board Success Manager determines they are sufficiently prepared.

NOTICE: The National Board Success Manager will schedule the date and location for the NBDHE. Students will take the examination on the same day and likely at the same location. The NBDHE test date is scheduled during term 13 or 14 of the curriculum which is within the NBDHE eligibility requirements.

GRADING PROCEDURES & DISMISSAL POLICIES

Skills Retention Examination:

Skills retention is vitally important. A retention test occurs after a student has learned a skill(s). Usually, the subject is assessed within days or weeks after learning the task to determine how much the student has retained. Researchers have demonstrated motor skills improve with a retention test merely by students reviewing the steps of the expected skills. The inverse relationship is that without a skills retention test, skills decline significantly which could indicate students are not prepared for patient care. Skills retention reviews are done at the beginning of each term in the preclinical and clinic courses. Students are required to demonstrate retention of motor skills pertaining to patient care. Skill retention examinations are done the first day that the pre-clinic/clinic course meets, once in Junior year (Term 9) and once in Senior year (Term 11). Students are not to schedule any patients on that first clinic day unless requested by their clinic coordinator.

Examination Requirements:

Students are required to be present at all examinations. Each individual course syllabus will outline the procedure to follow if a student has an emergency on the day of the examination. All midterm and final examinations must be taken on campus. During examinations, all backpacks, books, and personal belongings must be stored away from the testing area following the WCU policy on testing. Students may be seated randomly for each exam. Absolutely no supportive materials are permitted during a test or in a testing area including the Sim lab and clinic unless allowed by the course director. If testing is online, students must follow online testing protocols and procedures.

Returning of Projects/Assignments/Quizzes/Exams/Tests:

Students often request immediate feedback on assignments, projects, quizzes, exams, and tests. Faculty will provide students with the project, assignment, quiz, exam, and/or test grade(s) within one week of submission. If a faculty member does not have the grade for the submission within one week, the student should ask when the grades will be made available.

Materials are not returned to the student and become the property of the dental hygiene program kept in a locked cabinet. Each student has a coursework file that is maintained by the course director. Students are welcomed and encouraged to review their projects, assignments, quizzes, exams, and tests with course directors for feedback to aid in knowledge and skill acquisition.

The University's mission reflects an intention to partner with students in their preparation for a professional career, and part of the education experience for students pertains to the kind of behavior that is acceptable in professional settings such as honesty, integrity, and ethical behavior. In this partnership, faculty and students review materials together to assess trends related to errors/mistakes followed by specific faculty guidance and suggestions for next steps to understanding the material. Part of this review may include the development of a student action plan to improve their course grade.

During the review of materials, the student is expected to adhere to the Code of Conduct as outlined in the WCU Student Handbook including but not limited to:

- No use of books, papers, pens, pencils, cell technology devices such as cell phones, smart watches, smart pens, smart eyeglasses, etc.
- Taking advantage of information considered unauthorized by one's instructor.

As with the Academic Integrity requirements during examinations, if a faculty member perceives a violation of the Honor Code, the faculty member will stop the review session informing the student of the behavior that has been interpreted as a possible violation of the Honor Code. Confiscating notes or devices may have to occur. The faculty member will make a report of the perceived violation and submit it to the Dean of Dental Hygiene. There will be an investigation of the alleged academic integrity violation and, if a violation is found, the student will be referred to the Conduct Committee.

Protocol for In-Term Remediation:

The dental hygiene program has developed an aggressive protocol for in-term remediation to identify students early that are at risk of not successfully completing the program. An action plan is developed between the student and the course instructor to help the student succeed. The following are the steps involved in the in-term remediation protocol with an explanation of what occurs at each step: (1) early identification of at-risk student, (2) first meeting with the student, (3) second meeting with student, and (4) post-remediation meeting.

Dismissal from the Program:

Students will be dismissed from the program if they do not successfully pass each DHYG course with a 76% (C+) or higher. Students may also be dismissed from the program as a result of missing 20% or more in attendance in a course or as a result of conduct committee actions. Students may submit for an Academic Appeal if there were extenuating circumstances that affect student success in the program. Student Affairs manages Academic Appeals by committee. If a student receives an approved academic appeal decision then the student may re-enter the program in Term 7. The student will audit all courses that were successfully passed at no tuition and repeat the course(s) that were not successfully passed at current tuition. Students who miss clinical sessions will need to make up those missed sessions and clinical hours. Additional information about dismissal can be found in the university catalog.

PROGRAM LEADERSHIP

Dean, Dental Hygiene: The Dean (located in the Academic Suite), oversees all aspects of the dental hygiene program and has ultimate responsibility for the program. The Dean works closely with the Associate Deans, National Board Success Manager, and faculty and staff.

Associate Dean, Clinical Education: The Associate Dean of Dental Hygiene, Clinical Education (located on 4th floor), oversees the simulation lab and clinical facilities. The Associate Dean, Clinical Education, in conjunction with the Patient Care Coordinators and the Dean of Dental Hygiene, monitors the patient flow and needs and seeks additional opportunities to outreach to the community.

Associate Dean, Academics: The Associate Dean of Dental Hygiene, Academics (located in the Academic Suite), in conjunction with the Dean of Dental Hygiene, oversees academic administration, didactic and lab related issues.

National Board Success Manager: The National Board Success Manager (located in the Academic Suite) oversees student readiness and success on the National Board Dental Hygiene Examination (NBDHE).

Clinical Coordinators: Junior students are assigned to a Junior Clinical Coordinator and senior students are assigned to a Senior Clinical Coordinator. Each lead professor will monitor the clinical skill and academic progression of the student. Students are encouraged to make appointments with their faculty on a routine basis.

INTERNATIONAL ORAL HEALTH PROGRAM

As part of its continuing commitment to providing the best possible education, the dental hygiene program launched its International Oral Health Program in 2019. The IOHP program is currently suspended. The dental hygiene program offers a virtual opportunity to interact with students from other countries via the Global Oral health Learning Discussion (GOLD) program. All students will be eligible to participate in this virtual program.

STUDENT COHORT LEADERSHIP

The American Dental Hygienists' Association and the California Dental Hygienists' Association are the professional dental hygiene organizations. All students are members. These organizations allow the students to develop their leadership skills and become an active participant in their new profession. Each class elects officers and the class president appoints committee members. The student associations are governed by the Student Association Bylaws. The objectives of this student association shall be to cultivate, promote, and sustain the art and science of dental hygiene, to represent and safeguard the common interest of the members of the dental hygiene profession, and to contribute toward the improvement of the oral health of the public. A faculty member serves as the Student Advisor to the Student Council attending all meetings and providing insight throughout the program.

MENTORING

Mentorship programs are offered to support students in program completion, confidence building, and transitioning to further education or the workforce. The dental hygiene program offers mentoring in the form of (1) faculty: student as well as (2) peer: peer student (also known as "Bigs"). It is a network of providing informal transmission of knowledge and support as relevant to work, career, and professional development. One faculty member will mentor a small group of students. Mentoring is also available through your membership as student members of the California Dental Hygienists' Association (CDHA). It is a great resource of information and support to help a student succeed at WCU.

PINNING AND AWARDS CEREMONY

A pinning and awards ceremony is an intimate celebration/reception with your family and friends. The faculty honor students for their achievements and the students honor their faculty for their education. Students who have had attendance or disciplinary concerns will not be eligible for program awards. Pinning specifically is a wonderful way to celebrate entry into the dental hygiene profession.

The pin symbolizes the profession and the University. The act of pinning provides the opportunity for the graduate to be recognized and "pinned" by a faculty member. The ceremony may include the history of dental hygiene, presentation of class & legacy gift; presentation of instructor gifts, lead faculty recognition, student speakers, meaning of the cap & pin, pinning & flower presentation, student awards, reading of the Dental Hygiene Oath, and student slideshow of class memories from the educational experience.

The ceremony is a university sponsored event and is therefore planned as a collaborative effort of the Program Assistant, Administrative Assistant, and students with final approval by the Dean.

Awards typically given at the ceremony include but are not limited to:

- *Dean's Award* – The Dean's Award is presented to the student who has excelled academically in didactic and clinical courses.
- *Sigma Phi Alpha Awards* – This award is presented to students who in the final academic term of the dental hygiene program, rank highest in scholarship, service and leadership and exhibit potential qualities for future growth and attainment. Alumnus membership is limited to 10% of each graduating class and shall be selected from a list composed of the upper 20% of the class.
- *Outstanding Leadership Award* – The Outstanding Leadership Award is sponsored and presented by the California Dental Hygienists' Association. This award recognizes the student who has demonstrated outstanding leadership to the class throughout the two-year program. The award is voted on and chosen by the graduating class.
- *Golden Scaler Award* – This award is presented to the student who has excelled in clinic as demonstrated through achievement of competence, excellence in the delivery of patient care, and professionalism.
- *Community Service Award* – This award is presented to the student who has demonstrated outstanding achievement in community awareness, community projects and community dental health.
- *Research Award* – This award is presented to the outstanding group or individual student who has provided outstanding performance on their original research project.
- *Colgate STAR Award* – This award is presented to the student who has demonstrated true dedication to the profession, exhibited extraordinary compassion in patient care, community service, patient education and motivational skills.
- *WSP Periodontology Award* – This award is presented to the student who has shown special interest and proficiency in the field of periodontics.
- *Commitment to Ergonomics Award* – This award is presented to the student who has demonstrated a commitment to ergonomics by maintaining excellent posture in clinic and dedication to musculoskeletal health and career longevity.

NOTE: Not all awards are given at each ceremony

The cost associated with pinning varies based on what each class plans for their ceremony. Remember, the ceremony is a university sponsored event and is therefore planned as a collaborative effort of the Program Assistant, Administrative Assistant, and students with final approval by the Dean.

WCU will provide the following items for the ceremony:

- Programs
- Professional photographer for class photo frame & ceremony
- Calligraphy for frame
- Facility rental
- Light refreshments
- Balloons (limited)
- Flowers for each graduate
- Pin and candles
- Awards



Students are responsible for the following items:

- Purple stole with gold stitching-**mandatory for all graduating students to purchase**
- Pre-designed and approved by WCU
- Students cannot change design
- Class Slide show/Video for pinning ceremony

- Class photo frame-mandatory for all graduating classes to purchase
- Additional decorations (optional)
- Additional food choices (optional)
- Legacy gift (optional)



Students will meet with the Administrative Assistant or Program Assistant each week of the last term. At no later than week 5 of the final term, the Program and Administrative Assistants will present to the Dean of Dental Hygiene with the student ideas for the ceremony for final approval.

NOTICE: Commencement is separate from the Pinning and Awards ceremony and traditionally takes place annually or biannually. This is a general WCU commencement and includes graduates of all programs on the California campuses.

DENTAL HYGIENE OATH

In my practice as a dental hygienist, I affirm my personal and professional commitment to improve the oral health of the public, to advance the art and science of dental hygiene, and to promote high standards of quality care.

I pledge continually to improve my professional knowledge and skills, to render a full measure of service to each patient entrusted to my care, and to uphold the highest standards of professional competence and personal conduct in the interest of the dental hygiene profession and the public it serves.

SECTION II – CLINIC HANDBOOK

CLINICAL REQUIREMENTS & RELATED CLINIC POLICIES

Students and faculty are OSHA Category I Health Care Providers (potential for exposure to infectious diseases). As an essential component of the WCU infection control program, students are required to provide documentation of specific immunizations and tuberculosis clearance. Students and faculty who have an approved medical or religious exemption for an immunization will follow all pertinent WCU policies and protocols related to the exemption.

Students and faculty are required to obtain the following prior to or during the core dental hygiene curriculum or employment with WCU:

- A dental examination and prophylaxis and/or non-surgical periodontal therapy (if needed) within six months of entering core is required. Students may seek dental hygiene care from their personal dental providers or from student clinicians at the WCU dental hygiene clinic.
- Professional liability insurance (faculty only, students are covered via WCU policy)
- Medical insurance coverage
- American Heart Association Basic Life Support (BLS) Certification for Healthcare Providers – CPR with AED*
- Drug Screen clearance
- Criminal background clearance
- Immunizations including COVID-19, MMR, DPT, HEP B, and tuberculosis clearance (annually) and any required boosters

*CPR certification must be current at all times and training must be through the American Heart Association, including hands-on training. The best resource to find a CPR location near would be at the American Heart Association's website:

<https://cpr.heart.org/en/>

Clinic Dress Code:

Students and faculty are expected to wear their uniforms whenever they are in a clinical setting which includes: when attending an assigned lab or clinic and/or they anticipate the need to be on the dental hygiene floor of the WCU-OC Campus where patients may be encountered. The standard approved uniform for all students includes: ceil blue (junior year) or teal (senior year) scrub top and pants with WCU logo, white crew socks (above ankles), and white shoes with a closed toe and heel constructed to ensure safety and support. Shoes need to be wipeable (for disinfecting) and sharps resistant; small ventilation holes permitted as long as does not affect sharps resistance. Shoes may not have logos or other inscriptions. The standard approved uniform for all faculty and staff includes black scrub top and pants with WCU logo, black crew socks, and black shoes with closed toe and heel constructed to ensure safety and support. NO OPEN areas on shoes (ex: no clogs or Birkenstocks). The uniform must be clean, neat, pressed, complete, and in good condition. All undergarments must not be visible through the material of the uniform. A uniform approved white shirt may be worn under the student scrub top for warmth and must

be worn to cover tattoos and to cover one's chest if the scrub top is not sufficient. It is important to note that when a student chooses to wear the uniform, they must be dressed in full uniform, even when not participating in clinic. This means students must follow the makeup, jewelry and tattoo requirements. The only exceptions will be that students may wear another pair of shoes, other than their clinic shoes, when not participating in clinic. These shoes must be closed toe and closed heeled shoes that are clean and in good repair. In addition, when not on the 4th floor students may wear their hair down as long as it is neatly maintained, and they may wear a jacket or sweatshirt other than the white lab coat.

Students and faculty may be asked to wear scrubs to community events being attended by the program. Students are expected to wear business or business casual attire to events where scrubs are not appropriate. Sometimes students will be asked to wear their white lab coat over business clothing.



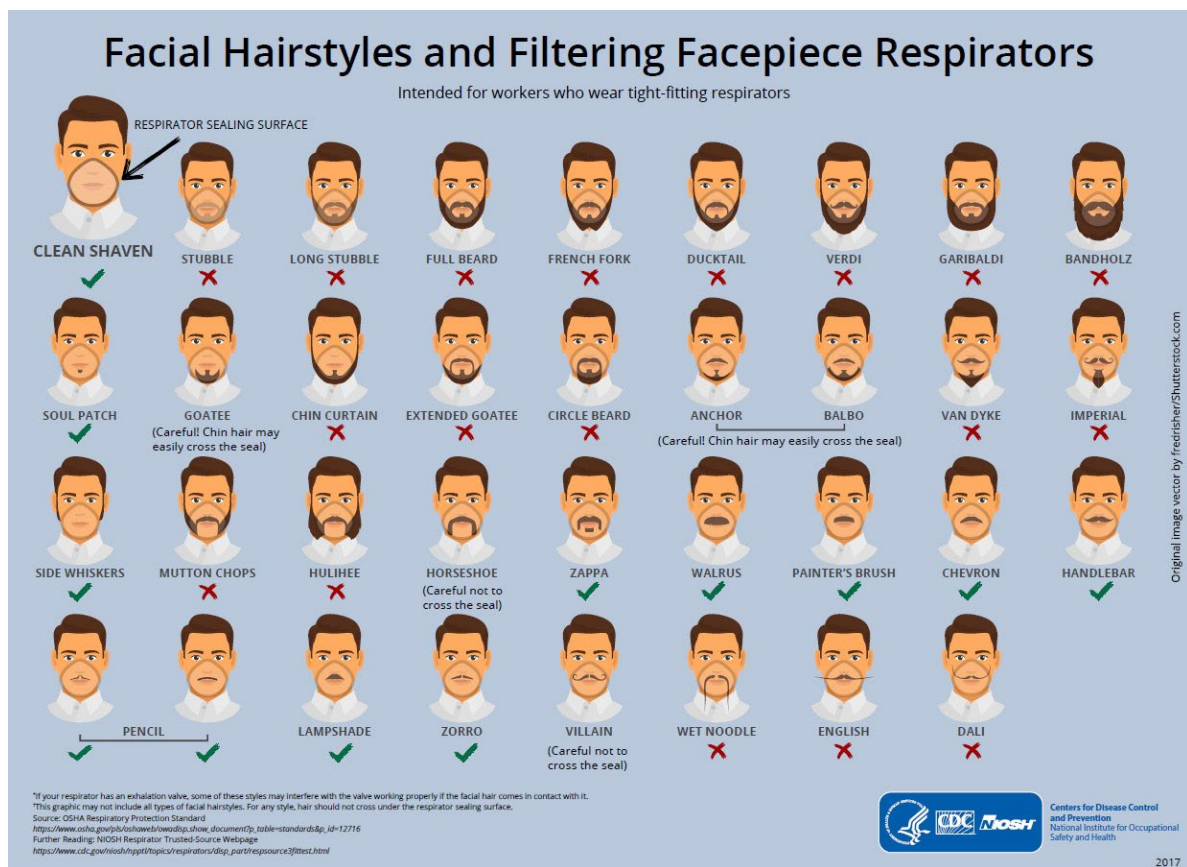
Example of acceptable white clinic shoe for students.

In addition, there will be times that students will still access the clinical facilities after graduation in preparation for the licensure examination. These students, known as the “Super Seniors”, are expected to abide by the clinic dress code policy when using the hygiene clinic to screen patients and prepare for licensure examination.

Hair:

Hair must be neat, clean, and not styled in such a manner that it could interfere with patient care or safety while on clinical assignments.

1. For female students and faculty, hair must be neat and clean and the guideline for length of hair is off the collar. No extreme hairstyles or colors are permitted. Long hair must be worn up or tied back neatly so it cannot fall onto a patient care area (no ponytails). Plastic-like (not cloth, ribbon, or feather-like material) hair bands, barrettes, combs, elastic bands, and hairpins of solid color may be worn. Allowable colors include tortoise shell, black, brown, or white without decoration (i.e., ribbons, bows, beads, feathers).
2. For male students and faculty, hair must be neat, clean, and off the collar. No extreme hairstyles or colors permitted. Sideburns should be neatly trimmed and groomed. Facial hair must be neatly trimmed and not extend down the neck and must allow for the mask to fit appropriately. When wearing an N95 mask, facial hair cannot be in where the mask touches the face. No chest hair may be visible from the scrub top.



Make-Up and Perfume/Cologne;

Simple make-up, if any, is permitted, except for when an N95 mask must be worn. Extreme eye make-up and extreme shades of lipstick and heavy cake makeup are not permitted. Due to aerosol production in dental hygiene, eyelash extensions/false eyelashes can trap dirt and bacteria leading to heightened risk of infection to the clinician. Therefore, eyelash extensions/false eyelashes will NOT be permitted in clinic.

Instructors, at their discretion, may ask students to alter make-up, nails, and jewelry. Heavy fragrances (including tobacco or vaping) can cause irritation in people, and many are allergic to perfume and/or cologne; therefore, fragrances are not permitted during clinics and labs. In addition, smoking is discouraged when in uniform. Instructors, at their discretion, may ask students to change out of uniforms that hold a heavy fragrance.

Nails:

Fingernails will need special care to ensure patient safety and asepsis and must be worn according to clinical guidelines. No artificial nails, gel nails, acrylic nails, or nail polish is allowed. Natural nails must not extend beyond the tips of the fingers. Students in violation will be required to cut their nails prior to beginning any clinical care to a patient.

Jewelry:

It is not permitted to wear hair adornments, head and neck, hand, wrist, or ankle jewelry/adornments of any kind in the clinical or laboratory course settings. A snugly fitted wristwatch (with second hand) will be permitted provided it remains covered by the clinic gown sleeve. No visible piercing in eyebrow or lip. A single, small 2mm stud is permitted in nose (the crease of the 'wing' of the nostril; Ear piercings are limited to 1) one small stud in each ear lobe that does not extend beyond the ear lobe, and 2) one stud in existing healed cartilage per ear. New cartilage, septum or nostril piercings are not allowed during the core program due to healing and infection control concerns. Clear retainer jewelry must cover any existing septum piercing or additional piercings on the ear. No rings will be permitted, including wedding bands/engagement rings. Jewelry is highly discouraged in the interest of asepsis and safety. Studies have demonstrated that the skin underneath rings had an increased colonization of microorganisms as compared to other areas of the skin on fingers where rings are not worn. Additionally, studies have shown there is an increase exponentially in colonization when multiple rings are worn. When a student is wearing program scrubs, it is expected that jewelry requirements are followed. This means the requirements for piercings are to be followed at all times while wearing program scrubs.

Rings and forearm jewelry present difficulties in the proper donning of gloves and cause gloves to tear. Therefore, jewelry should not be worn on these areas to avoid interference with the ability to wear the correct size and possibly affect the integrity of the gloves. A small, short necklace may be worn under the uniform scrub top. The necklace cannot be visible, so an approved long-sleeved white shirt may need to be worn under the uniform. Students will be allowed to wear wedding rings while wearing program scrubs when not in clinic or lab or representing WCU at community events.

Tattoos:

Professionalism starts with a professional appearance. To always maintain professionalism with patients, students, faculty, and staff, those with visible tattoos must cover those tattoos whenever wearing WCU scrubs. Tattoos are to be covered at all times when wearing program scrubs, even while students are not in clinic or lab. Arm Tattoos: Must be covered by a long-sleeved white shirt or full arm tattoo cover sleeve. Neck Tattoos: Must be covered by a white turtleneck shirt or a white snug neck gator. Small Tattoos Behind the Ear: Must be covered with a bandage.

Clinical Code of Conduct:

Students are required to act professionally and with confidentiality when providing direct patient care. Compliance with federal regulations, known as the Health Insurance Portability and Accountability Act (HIPAA) privacy law that generally prohibits the use and disclosure of health information without written permission from the patient is strictly maintained. Violations of HIPAA may result in the student receiving a critical error or referral to the campus Conduct Committee.

Students must also abide by the ADHA and CDHA Code of Ethics. A copy of the Code may be requested from the Dean of Dental Hygiene or accessed online at <http://www.adha.org/downloads/ADHA-Bylaws-Code-of-Ethics.pdf>

The goal is to promote a culture of professionalism and personal responsibility. It is expected that all students will support and adhere to these protocols.

It is difficult to cover all the possible ethical decisions students may encounter during the course of clinical training. Therefore, students are encouraged to consult with a member of the clinic faculty if any questions arise regarding the correct course of action should the student be presented with an ethical situation.

1. All patient interactions must be conducted in designated patient care areas during posted clinic hours under faculty supervision. Patient interactions refer to any clinical activities other than what would be considered secretarial in nature. Faculty supervision means that the instructor has been informed about what the student is doing and has agreed to supervise. This policy applies to clinical activities on student partners and screening of prospective clinical competency assessment (CCA) patients as well as care of assigned patients. Failure to comply constitutes practicing dental hygiene without a license, a serious offense that will result in referral to the Dean of Dental Hygiene.
2. Entries in patient electronic charts and on all other clinic forms must be authentic, legible, and accurate. Forgery of signatures, fraudulent entries, or alteration of the patient chart or any other clinic documents are serious offenses that will result in referral to the Dean of Dental Hygiene.
3. Professional and ethical behavior is always expected while representing West Coast University. This includes treating patients, classmates, faculty, and staff with courtesy and respect. Professional behavior also includes leaving the treatment area clean and ready for use by other students.
4. Appropriate clinic attire must be worn whenever involved in patient care activities. Clean, well maintained scrub shirts and pants, closed shoes with socks above the ankle, and a clean clinic gown are the ONLY acceptable clinic attire. When on 4th floor, a WCU white lab coat may be worn over the uniform. No other over garment is allowed on 4th floor except the lab coat.
5. All patient documents must be scanned and uploaded to the patient's electronic chart on the day of patient care.
6. All appointments for patient care must be scheduled and confirmed by the student while on campus using the phones located in the south and north clinic consultation rooms or the reception area. All appointments must be entered by the student into the electronic database.

7. Students are responsible for providing timely and appropriate dental hygiene care for assigned patients.
8. Advertisements or flyers for the purpose of soliciting patients must be approved by the Dean of Dental Hygiene. This review is to ensure that no false or misleading advertisements are distributed and that the process of patient recruitment is fair to all students.
9. English shall be the official language in the clinical environment.
10. It is the student's responsibility to attend all clinic sessions and meet all clinic requirements including skill assessments, competency assessments, Objective Structured Clinical Examinations (OSCEs), and mock clinical boards.
11. Students are not permitted to chew gum in the clinic setting. This affects the ability to effectively communicate with patients.
12. Students are not permitted to use a personal cellular device in the clinic setting for texting, phone calls, email, etc. The clinic is to be a focused area for safety and without distraction to self or others.

Student Pregnancy Accommodations for Clinic:

The program adheres strictly to OSHA and CDC guidelines for patient care. However, it is recommended that the student consult their physician regarding any recommended accommodations in light of their possible exposure to physical and chemical agents while attending the dental hygiene program. The specific agents include, but are not limited to, ionizing radiation, local anesthetic agents, nitrous oxide-oxygen, and associated chemicals used in patient care. Pregnant students are advised to contact the Title IX coordinator or Deputy Coordinator for assistance with accommodations.

Health and safety guidelines were developed in accordance with the Centers for Disease Control (CDC). These provide a pregnant student with the following automatic precautionary measures, without submitting a specific request:

1. Is assisted with retrieval in the sterilization area while hazardous chemicals and/or vapors are in use to prevent exposure.
2. Are positioned a minimum of six feet or more from the primary beam during exposure to radiation and are provided with the technician protective apron. Pregnant students are also provided with two dosimeters to wear when in clinic, one is placed near the waist.
3. Are provided with a deferment of coursework that includes the administration of nitrous oxide-oxygen or having nitrous oxide-oxygen administered to them.
4. Will choose local anesthesia with or without epinephrine if local anesthetic is required.

Providing Safe Patient Care:

Students are to notify the Dean of Dental Hygiene if they have any medical conditions that require any special attention or medications or changes in their health status. At no time is a student to be providing direct patient care when under the influence of any medications, legal or illegal, that can impair the student's ability to provide safe patient care. At times, a student may be required to take prescription medications (under the direction of a physician) that may impair their ability to think clearly, cause tremors or other symptoms that may interfere with a student's reasoning or ability to perform with appropriate judgment and safety. Students must notify the Dean.

Students may suffer from certain medical conditions which may cause unpredictable episodes (such as seizures), that even if controlled with medication, may illicit an episode due in response to situations, such as the stress induced by working in the dental clinic or exhaustion caused by preparing for examinations. Students with these conditions must notify the Dean.

Viral and bacterial pink eye are contagious and spread very easily. Since most pinkeye is caused by viruses for which there is usually no medical treatment, preventing its spread is important. Pinkeye is spread through contact with eye drainage, which contains the virus or bacteria that caused the pinkeye.

Pink eye or conjunctivitis is contagious while there is tearing and/or a discharge or matting of the eyelid. The discharge indicates that bacteria or the virus are still present. Once the discharge symptoms have stopped, the sufferer is no longer contagious and may return to school or work again as appropriate. Because this is a contagious condition, we do not know if it is bacterial or viral, and we are not qualified to determine if the discharge symptoms have stopped, students or faculty/staff must get a letter of clearance to return to school. The letter is to be brought to the Dean or Associate Dean, Clinical Education, and will be placed in their clinic file.

Professionalism:

Students and faculty/staff are to remember that the 4th floor is where dental hygiene patients are located. Even when the clinic is not in session, there is the potential that patients will be on the floor making appointments or finalizing paperwork. Due to this, students and faculty/staff must always be professional when on the 4th floor.

Students are to always be in uniform when attending classes or clinic on the fourth floor. Students and faculty/staff are not to have food on the 4th floor or in any classroom. During breaks, students are to take their food either to the 2nd or 3rd floor lounge areas, or to the atrium located on the 1st floor. Students are not to sit on the floors or block the hallways. All conversations, either to fellow students, with professors, or personal calls must be appropriate in content and language. Vulgar conversation, even in personal phone calls, can be overheard on the clinic floor. If at any time such language or conversation is overheard or observed, the student will be immediately disciplined by means of EPR. If behavior continues, this may result in

referral to the campus Student Conduct Committee which could lead to dismissal from the program for not adhering to the West Coast University policy on student conduct (see University Student Handbook).

Disagreements with professors are to be handled directly with the professor in a private environment. If resolution is not reached, students are to discuss the situation with the appropriate clinic coordinator or Associate Dean, Clinical Education. If still no resolution is reached, students are to discuss the situation with Dean of Dental Hygiene.

Exceptional Performance Report:

Exceptional performance review (EPR) may be done when the student exhibits exceptionally good performance in patient care or other clinical related areas. The EPR must be turned into the course director in writing and the student will receive a copy.

Critical Error/ Unsafe Practice Policy:

A critical error or unsafe practice refers to any procedure, process, or product that poses a breach of standard of care causing a significant risk to the health and safety of patients, students, or staff or violates professional codes of ethics. Faculty members may issue a critical error if a student engages in actions that breach ethical and professional standards, compromise safe practices, or exhibit chronic noncompliance with established policies and protocols in laboratory or clinical settings. Examples include but are not limited to unprofessional behavior, falsifying patient records, failure to follow infection control guidelines, failing to report broken instruments, unsafe instrumentation techniques, and performing dental hygiene treatment without patient consent. A first critical error offense results in the loss of earnable clinic points for the day and requires remediation, as determined by the clinic coordinator. A second critical error will necessitate a mandatory meeting with the Dean of Dental Hygiene. A third critical error offense may result in referral to the conduct committee and could be grounds for dismissal from the program (see Student Conduct Policy in the WCU Student Handbook).

Radiation and Infection Control Protocols:

Radiation Infection Control Policies and Procedures and Ionizing Radiation Policies and Procedures, which list all radiation safety and compliance, is provided to students in DHYG 335 Dental Radiology Science w/Lab.

A Dental Hygiene Student Infection Control Manual, which lists all infection control protocols, is distributed to all students in DHYG 303 Infection Control Lab. Infection prevention policies, which include dental unit cleanliness protocols, must be always followed and compliance will be monitored. Failure to comply with operatory cleanliness protocols may result in a critical error, and possible referral to the Dean of Dental Hygiene.

Clinical Services and Fees:

The dental hygiene clinic offers services at no cost to the patient including but not limited to:

- Medical History and Review
- Oral Inspection
- Risk Assessment
- Intra and Extra Oral Radiography
- Oral Hygiene Education & Instruction
- Nutritional counseling
- Tobacco Cessation Counseling
- Pit & Fissure Sealants
- Interim Therapeutic Restorations
- Tooth Desensitization Procedures
- Study Models for interpretation and tray fabrication
- Prosthesis care
- Periodontal screening
- Non-surgical periodontal therapy

Patient Marketing/Solicitation:

Students will be required to solicit patients through a process of working with the junior and/or senior clinic coordinator to represent WCU in a manner that meets all requirements. Additionally, West Coast University actively markets its services to the public.

CLINICAL EXPERIENCES AND RELATED POLICIES

The Dental Hygiene Clinic serves as an educational facility to support the clinical learning needs of the students enrolled in the dental hygiene program. Under the supervision of licensed dentists and registered dental hygienists, the dental hygiene students provide oral health care and educational services to the local community. Students must participate in clinical practice activities as clinicians and as patients.

During the junior year, the Patient Care Coordinators assist students in appointment scheduling. Junior students are assigned patients that do not involve complicated periodontal maintenance or scaling and root planing. During the senior year, more complicated periodontal maintenance patients are assigned as well as scaling and root planing patients. Patient assignments are done via random assignment. The Dental Hygiene Clinic has a pool of patients; however, students are ultimately responsible for recruiting many of their patients and scheduling appointments.

Late to Clinic:

Students will be dismissed from that clinical session if they are more than 15 minutes late from the start of that clinical session and/or unprepared to begin patient care. The student will be marked absent for that clinic session attendance. Students must make up all missed clinic sessions. If the student is dismissed from the clinical

session for being late, they will not be allowed on the 4th floor until their next clinical session. If the student is found on the 4th floor after being dismissed from clinic a Critical Error will be issued for unprofessional behavior and 10 points may be taken off their Final Clinical Patient Experiences grade. This applies to any off-site clinical rotations that the student is scheduled to attend.

Patient Assignments:

Students may bring friends and family to serve as patients. If students are unable to obtain patients through personal resources, students can receive patients from the Patient Care Coordinators located on the 4th floor. Patients will be provided through random assignment.

At program completion, students will work with the Senior Clinic Coordinator to audit patient records to determine re-assignment or inactive status. See Quality Assurance Plan for details.

Patient Appointments:

Patients can contact the dental hygiene clinic for appointments. Appointments are scheduled by the dental hygiene care coordinators. Students are NOT to use personal phones or give out personal phone numbers to patients. All appointments are to be logged into the Dentrux appointment book. This aids the patient care coordinators when patients call the clinic in determining which student clinician the patient is receiving care from.

Depending on the junior (terms 7-10) or senior (terms 11-14) status of the student, students are required to attend multiple clinic sessions to build competency in seeing patients. All these clinic sessions are supervised by clinical instructors that include both registered dental hygienists and dentists. Students are required to monitor all assigned patients, specific to tracking completed patients and ensuring active patients are completed. Upon program completion, each student is required to complete a patient pass off list, with the clinical coordinator, that consists of all assigned patients.

Clinic policy requires that all patients be evaluated at several points during care and prior to dismissal at the end of each appointment by the supervising faculty. Students must use templates for finalizing patient progress notes and faculty approval is required. Students are expected to discuss care plans with faculty and the supervising dentist to determine the best course of care for the patient prior to the faculty approving the plan and the patient signing the consent form. Deficiencies are documented and discussed with the student and corrected at the time of subsequent patient appointment.

If patient treatment deficiencies are identified prior to patient care, the supervising faculty member works with the student to make the appropriate corrections in the care plan prior to the patient signing the consent form. If patient treatment

deficiencies are identified following the patient's consent, a new care plan is drafted and the patient signs a new consent form.

Although patients come to West Coast University for dental hygiene services, patients are required to obtain a dental home within 12 months of services at WCU. Faculty dentists serve in a supervisory position and do not diagnose or recommend treatment. Prescriptions are not provided by WCU. If it is necessary for a patient to see a dentist and they do not already have a dentist, a list of Orange County clinics will be provided to the patient.

Medical Consultation and Premedication Considerations:

Students are to consult with the clinical instructor when determining whether a patient presents with a medical condition that requires further evaluation and discussion. If a patient presents with a medical condition that requires further consult, a medical consultation form is submitted to their attending physician before the student continues with treatment. The student works with both their clinical instructor and the supervising dentist on medical consultation referrals.

At times, patients present with medical conditions that require delay of services or premedication prior to treatment. The use of premedication prior to dental services is to be prescribed by their personal physician or personal dentist. Premedication prescriptions will not be provided by WCU. Conditions that require premedication are determined by the American Heart Association (AHA) and the American Academy of Orthopedic Surgeons (AAOS). Changes to premedication requirements occur frequently and students must stay current on recommended applications through research and reading.

The AHA recommendations are meant to reduce the risk of infective endocarditis. Infective endocarditis (IE) is an infection of the lining inside the heart or the heart valves. The current recommendations require the use of preventive antibiotics before certain dental procedures for people with:

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

The AAOS and AAHOS adopted in 2024 that routine use of a systemic prophylactic antibiotic prior to a dental procedure in patients with a hip or knee replacement may not reduce the risk of a subsequent periprosthetic joint infection.

"Based on the best available data, no study found that administering antibiotics before a dental procedure changed a patient's risk of getting a parasitic joint infection. With that said, it is important to recognize there may be other considerations that may lead a provider to prescribe antibiotics for an individual patient. This decision should be made with the patient, and the unique risks and benefits for the patient should be considered."

At times, situations may occur that involve the student and/or patient that will require evaluation by an outside facility. When students have a possible blood exposure, they must follow the protocol below:

- Supervising clinical faculty will be notified. Exposure packets will be filled out for the student as well as the source patient.
- The student will be referred to a facility within the US Health Works Medical Group. The student must stop all clinic work and go for immediate assessment by medical facility.

When patients experience a dental emergency that must be treated by a dentist, the protocol below must be followed:

- The supervising dentist must be consulted. A non-exposure incident report must be completed. Intraoral photographs must be taken of the problem/emergency. Follow-up with the patient must occur within 24 hours.
- WCU dentists work in supervisory positions, they are not to provide emergency dental treatment to the patients. Patients will be referred to the Hurtt Family Clinic in Tustin for necessary dental emergency care.
- When such an occurrence happens, the student must meet with the Associate Dean, Clinical Education, the attending faculty and if available, the supervising dentist. The Dean will be consulted and may be involved as deemed necessary.
- The student will hold a follow-up meeting with the Associate Dean, Clinical Education and appropriate coordinator to develop an action plan to help the student improve skills and educate them on cause and prevention of a reoccurrence.

Students have multiple clinical experiences including clinic, radiology, sterilization, and team work sessions.

Emergency and Safety Procedures:

All emergency and safety policies and procedures are described in the Quality Assurance Manual that includes the program's Injury and Illness Prevention plan, and Safety Data Sheets (SDS) manual, which are located in the sterilization center.

Team Rescue is followed when there is an emergency at the clinic. Dental hygiene students receive extensive training during term 10 in this protocol to be prepared for any possible medical emergency. Prior to this term, if an emergency arises in the clinic or sim lab, the student who discovers the emergency will be Rescuer #1 and will stay with the victim. Rescuer #1 assigns Rescuer #2 to find a faculty member. Once

the faculty member arrives, a new Rescuer #1 and #2 will be assigned (if needed) and Team Rescue will be implemented.

Emergency cabinets are in both the north and south clinic and include but are not limited to: Oxygen, AED, cold compresses, spill kits, first aid kits, emergency drug kits, and blood pressure kit. The sterilization center contains a spill kit and a first aid kit. The simulation lab contains a first aid kit. The supply room contains a spill kit.

Teamwork:

In clinical practice, cancellations do occur. Dental hygienists during that time are expected to assist in the office as needed. Priority is to assist other team members. If you do not have a patient in clinic you must first check in with your clinical instructor and will be assigned to a student to help with charting, documentation of probing, obtaining necessary supplies, etc.

Radiology Sessions:

Students will provide digital imaging in the north clinic and with the use of a portable x-ray device in the south clinic. These services include but are not limited to:

- Full mouth series
- Recall/Recare Series
- Panoramic Exposure
- Occlusal films

Clinic Sterilization Center Rotation:

Students will be scheduled to rotate through the clinic sterilization center during term 12. Students are also required to perform and abide by all standard precautions when treating patients in both the north and south clinics.

Off-site Clinical Rotations:

During the senior year, students will be expected to attend off-site clinical rotations at least once in the term. Any off-site clinical rotation will be accompanied by a WCU faculty member.

Clinical Equipment Check-out Protocol:

At times students will use clinical items that are not part of their student instrument issued kit. These items are obtained through Clinic Supply. It is the student's responsibility to properly care for and protect instruments and/or equipment that is dispensed and accepted. Each student is responsible for their own instruments. Students may not obtain or return another student's instruments.

*See document in Appendix

WCU provides a limited supply of instruments and equipment and expects every student to return used and unused signed out instruments and equipment at the conclusion of each clinical session.

When a student checks-out an item from clinic supply, they will sign a charge slip. If the item is not returned to clinic supply, the charge slip will be used to charge the student account for any item that must be reordered due to failure to return.

Clinic Repair Request:

Any malfunction in the clinic treatment areas, including the dental unit, light, chair, etc. should be reported immediately to the Clinic Supply Coordinator. Please complete a Repair Request, which is available in both the north and south clinics.

Patient Communication:

The major key in risk management is a strong positive operator/patient relationship expressed through accurate and active communication. Consider the following:

1. Use common language; avoid dental terminology.
2. Use active listening skills with appropriate eye contact.
3. Encourage and answer patient questions.
4. Make appointments and return phone calls using phones located in the 4th floor reception area.
5. Schedule and keep regular appointments
6. Plan chair time efficiently; respect patient's time.
7. Ensure the patient has informed consent about their treatment.
8. Create a dental hygiene care plan and discuss with the patient the number of appointments that will be needed to complete the recommended hygiene services.
9. Ensure patients know their rights as well as their responsibilities.
10. Be honest about all care, even when something goes wrong.
11. Recognize limitations; patient expectations must be consistent with student's ability to meet them – be humble enough to refer questions to clinic faculty.
12. English is the primary language used on the clinic floor. All communication between student-to-student, and student-to faculty is to be in English. Non-English-speaking patients should bring a translator as per the patient handbook. If faculty or students speak the language of the patient, they may be able to assist in communication, as well as caregivers who may be with the patient. In addition, the students may use translator software, such as Google Translator, to assist in communicating with patients from diverse populations.

Students Transporting Patients in Their Personal Vehicles:

Students are NOT permitted to transport patients or family members of patients in their own or other vehicles at any time. Malpractice liability insurance does not provide coverage should an accident or other untoward event occurs while transporting a patient.

Patient Risk Management:

Risk in health care is the chance for financial loss due to the negative outcome of patient treatment. Financial loss can be due to costs related to correcting unacceptable dentistry, investigatory costs, consultant and expert witness fees, court costs, and defense legal fees. Risk Management is the process of identifying, reducing, and eliminating risk exposures that can result in financial loss. Risk can be managed by:

1. Providing and maintaining a high standard of dental hygiene care.
2. Providing “Informed Consent” for all treatment.
3. Providing continuity of care, referring as necessary.
4. Reducing the probability of litigation after a negative outcome has occurred.
5. Preserving assets once a claim has been filed.

Broken Instrument/Retrieval:

In the event that a dental instrument tip or component breaks during patient care, it is the policy of the Dental Hygiene Clinic to treat the incident as a potential medical emergency and follow established protocols to ensure patient safety, proper documentation, and safe retrieval of the broken fragment.

The following steps must be taken:

1. Immediately cease treatment and inform the supervising faculty.
2. Visually inspect the area to locate and retrieve the broken fragment using appropriate instruments.
3. If not visible or retrievable intraorally, radiographs must be taken to determine the location of the fragment.
4. If the fragment cannot be located or removed, the patient must be referred for medical/dental evaluation, and the incident must be thoroughly documented in the patient chart.
5. Complete the Broken Instrument Retrieval form.
6. Submit the form to the Clinic Lead and then the form is submitted to the Associate Dean of Clinical Education.
7. The broken instrument must be bagged, labeled, sterilized and retained as evidence in accordance with the Dental Hygiene Clinic procedures.

Postponement of Care:

Patients are not turned away from treatment. However, there are times that patients have medical conditions that require postponement of care. Located in the clinic consultation rooms is postponement of care criteria which is updated regularly to follow the most current standards of care for patients. Please consult with clinical faculty and dentists when appropriate to determine if postponement of care is necessary.

Care of the Pregnant Patient:

Pregnancy is not a reason to defer routine dental care or treatment of oral health problems. It is not necessary to have approval from the prenatal care provider for routine dental care of a healthy patient.

Evidence indicates the need for pregnant patients to receive dental preventive services throughout their pregnancy. Preventive nonsurgical periodontal therapy and annual exams during pregnancy are not only safe but are recommended. The rise in hormone levels during pregnancy causes the gingiva to swell, bleed, and trap food causing increased irritation to the gingival tissues. Preventive dental work while pregnant is essential to avoid oral infections such as periodontal disease, which has been linked to preterm birth.

Prevention, diagnosis, and treatment of oral diseases are highly beneficial and can be undertaken any time during pregnancy with no additional fetal or maternal risk as compared to not providing care. If there is a need for dental radiographs or use of local anesthesia, a medical consult will be required. It is safe to provide dental treatment throughout pregnancy:

- Periodontal therapies during the pregnancy may prevent any dental infections or other complications from occurring in the third trimester.
- In the final trimester, dental prophylaxis may be repeated, especially if home oral care is inadequate or if soft tissue is abnormal.

Mandated Reporting:

Dental professionals play an important role in the identification of suspected abuse and neglect and, in California, have an obligation to report it to the authorities. Mandatory reporting requires that dental professionals be cognizant of the reporting regulations in the state(s) in which they practice and the mechanisms available for reporting suspected abuse in those states.

There are four basic types of abuse: physical, sexual, emotional, or neglect. The populations impacted by abuse and neglect are children, domestic partners and elders.

Dental professionals, as Mandated Reporters, are required to:

- Recognize signs and symptoms of abuse/neglect
- Ask direct, non-judgmental questions with compassion
- Document all findings
- Assess patient safety
- Review, refer, and report to appropriate authorities.

All students and faculty are required to report any suspicion of abuse and/or neglect to their clinical faculty. Faculty will take the appropriate steps to refer or report to the appropriate authorities.

CLINICAL ASSESSMENT METHODS

Objective Structured Clinical Examination (OSCE):

Students are evaluated through skills assessments, competencies and, OSCEs. During skills assessments, students will receive immediate instructor feedback. During competency assessments, no immediate instructor feedback will be provided. OSCEs test a breadth of knowledge, skills, and attitudes needed in general practice, with a complete simulation of a hygienist-patient encounter, from history to management. It exemplifies two key learning attributes of the successful general practitioner: self-reflection and learning from one's peers. Clinical and OSCE experiences may require students to work with patients/clients to apply the competencies and practices learned.

Junior Exit Examination:

Students are required to pass the Junior Exit Examination at the end of the fourth term of the core curriculum which includes an evaluation of the knowledge, skills, and values acquired from the junior year related to the PLOs.

Senior Exit Examination:

Students are required to pass the Senior Exit Exam at the end of the eighth term of the core curriculum which includes an evaluation of the knowledge, skills, and values expected of an entry-level competent dental hygienist as outlined in the PLOs.

Mock Clinical Examinations:

Mock clinical examinations are administered in senior year to aid in tracking student progress and to identify weaknesses that make intervention advisable and help to establish mentoring for at-risk students.

Beginning in January 2024, graduates of any Dental Hygiene Board of California (DHBC) approved California dental hygiene program no longer are required to pass a regional clinical examination for licensure. The program will require graduating students to participate in a regional clinical manikin exam and upon passage, students will have greater portability in licensure.

Students are required to pass a Mock Manikin Clinical Examination in order to be eligible to participate in the regional manikin clinical board. This will be held during term 14.

Clinical Competency Assessments:

Students will be required to pass two clinical competency assessments (CCA). Although no control over the type of patient can be guaranteed, most CCA patients are found through the dental hygiene clinic. Ultimately, finding qualifying clinical patients for the competency examination is the responsibility of the student. Clinical faculty will guide the students in determining patient eligibility. Students who acquire their own patients through their own efforts maintain that patient for their competency examination. Qualifying clinic patients who were found during a

screening or who were seen by students not eligible to take the CCA examination, will be placed in an eligibility pool and distributed to students eligible to take the CCA examination by random selection.

SUPER SENIOR STATUS

For several reasons, students may be classified as “Super Seniors.” Super seniors are students who, for various reasons, are still using the dental hygiene clinic while awaiting state licensure or who need to work on an incomplete grade earned during their last term in the program. Specific times are assigned for super seniors to attend clinic. Students must schedule this time so as not to disrupt current students and faculty. Students are to contact the Associate Dean, Clinical Education to schedule times to attend clinic.

When a student is a “Super Senior” they are still expected to abide by all WCU policies and procedures. When super seniors are in the clinic, they are expected to follow all clinic dress code requirements and clinic protocols and policies. They are expected to act professionally. If students do not abide by the program policies, they will be asked to leave the clinic floor and may be referred to the Student Conduct Committee for further action or risk not completing the program.

DENTAL HYGIENE LICENSE PROCESS

There are several pathways to licensure.

- (1) Upon completion of the program, passing of the NBDHE, the graduate will be eligible to take the California law and ethics examination to become a Registered Dental Hygienist in California. Registered Dental Hygienists are licensed in California by the Dental Hygiene Board of California.

NOTICE: Students must pass both written examinations, and undergo a criminal history investigation, prior to receiving a license in California. It is a criminal offense to practice as a registered dental hygienist without first receiving a license.

- (2) A student in their last term, who is deemed eligible and with Dean approval, will be allowed to take a regional clinical board examination according to the exam guidelines. This will provide the graduate with license portability.
- (3) Once the graduate passes the NBDHE, they can apply for California licensure. A written California Dental Law and Ethics examination must be taken and successfully passed.
- (4) Additional requirements may be necessary depending on the specific state or regional examination criteria.

Information pertaining to licensure in various states will be communicated to students during the senior year Clinical Seminar courses.

Preparation for clinical board examinations occurs during the senior year clinical courses. To assess student clinical skills and to prepare students for clinical examinations, students must take and pass two clinical competency assessment examinations.

Information about the examinations can be found:

Dental Hygiene Board of California <http://dhbc.ca.gov/>

ADHA <http://www.adha.org/careerinfo/licensure.htm>

Council of Interstate Testing Agencies (CITA) www.citaexam.com

Central Regional Dental Testing Service (CRDTS) www.crdts.org

American Board of Dental Examiners (ADEX) <https://www.cdcaexams.org>

Southern Regional Testing Agency (SRTA) www.sрта.org

CDCA-WREB-CITA <https://adextesting.org/>

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Dental Hygiene Student and Clinic Supply Check Out Policy Receipt Form

**WEST COAST UNIVERSITY
DENTAL HYGIENE PROGRAM
2025**

Verification of Clinic Supply Check Out Policy

Please sign and date this form to verify that you understand and agree that if you check out an item from the WEST COAST UNIVERSITY dental hygiene clinic supply and it is not returned and signed for, your student account will be charged for the replacement cost of the item. This includes keys and radiography dosimeters that are provided for you.

Student Signature

Date

Name (Please print)



Dental Hygiene Programmatic Handbook Receipt Form

**WEST COAST UNIVERSITY
DENTAL HYGIENE PROGRAM
2025**

Verification of Handbook Receipt

Please sign and date this form to verify that you have been provided with a copy of the WEST COAST UNIVERSITY Dental Hygiene Student & Clinic Handbook. It is your responsibility to read this handbook in its entirety and keep it for reference throughout your time in the dental hygiene program. Violations of this handbook could result in referral to the Conduct Committee which may lead to dismissal from the program. Policies are subject to change at any time.

Student Signature

Date

Name (Please print)