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AGREEMENT AND CONSENT

I have received a copy of the "Policies and Procedures Manual for the Dental Hygiene Student." The contents have been explained to me, and I have been given the opportunity to read the manual. I understand the policies, requirements, rules, and protocol. I formally agree to abide by the requirements of this document as long as I remain a Dental Hygiene Student at Southern Illinois University.

NAME       DATE

Please retain this upper portion in your manual.

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PLEASE TEAR OFF THIS LOWER PORTION AND RETURN TO:
Faith Y. Miller, RDH, MSEd Program Director.
INTRODUCTION

The Dental Hygiene program functions to prepare the student to successfully enter the profession of dental hygiene. Upon completion of the Program, the graduate should be capable of passing the written National Board Dental Hygiene Examination and the regional and/or state clinical practice examination for the state in which he or she wishes to practice dental hygiene.

Dental Hygiene Program Mission

The mission of the Dental Hygiene Program is to provide quality educational experiences in an evidence-based curriculum, patient-centered clinical care, and interprofessional community-based service. The program strives to comprehensively prepare competent graduates to enter any one of six designated roles of the dental hygienist as defined by the American Dental Hygienists’ Association (ADHA): Clinician, educator/health promoter, manager, researcher, consumer advocate, and change agent.

Dental Hygiene Program Goals

1. Comprehensively prepare dental hygiene graduates who are competent in the utilization and integration of knowledge and critical thinking skills related to general education, biomedical sciences, dental science, and dental hygiene science.

2. Provide students with dynamic and diverse clinical opportunities that support the development of psychomotor and communication skills relevant to dental hygiene practice.

3. Prepare graduates who demonstrate professionalism and ethical leadership in the delivery of patient-centered evidence-based care.

4. Support students’ needs and development to help them fully reach their potential.

5. Encourage student participation in community involvement to improve the well-being of others.

6. Provide students with the skills necessary to advance the practice of dental hygiene through research, involvement with professional associations, and life-long learning.
The Program supports the university mission in several ways including service to southern Illinois region by:
1. Providing preventive and therapeutic services through the Dental Hygiene Clinic and Community Dental Center (CDC).
2. Promoting consumer advocacy through educational service outreach activities at primary and elementary schools throughout the community.
3. Organizing activities that support those community members in need of economic support through the Student Association of Dental Hygienists’ Association (SADHA) which is a Registered Student Organization (RSO) on campus through Student Life.

As a student, you will develop the cognitive, affective, and psychomotor competencies necessary to become a registered dental hygienist. Dental hygiene faculty will guide you toward successful completion of the objectives associated with mastery of the competencies.

Your goal of successfully completing the dental hygiene course of study can be achieved by applying the knowledge you acquire from study of the basic and pre-clinical sciences to the practical application in the Dental Hygiene Clinic. This requires you to assimilate the course content of four years of learning and incorporate it into the performance of oral health care services. Your educational experiences will be challenging and rewarding.

Your professors are available to guide and assist you. They will serve as resource liaisons during your course of study in dental hygiene.

The purpose of this manual is to provide you with a guide and a reference regarding the policies and procedures utilized by the Dental Hygiene program. The policies set forth in this manual are from Southern Illinois University, the College of Applied Sciences and Arts, the School of Allied Health, and the Dental Hygiene Program. These policies are to be your basic guide during your dental hygiene education.

AIDS Policy

[The following was approved on August 26, 1988, in accordance with provisions set forth in SIU Board of Trustees 2 Policies C.]

The following policies are based on the current state of medical knowledge and are subject to change as new information becomes available.

I. Policy Foundations
   A. University decisions involving persons who suffer from AIDS shall be based on current and well-informed medical information.
   B. Current prevailing medical authorities agree that AIDS is not communicated
through casual contact but requires intimate sexual contact or exchange of bodily fluids.

C. For the purpose of this policy statement, the term "AIDS" shall include AIDS, AIDS-Related Complex, and a positive test for Human Immunodeficiency Virus.

D. This policy should be reviewed periodically to ensure that it reflects the most current information available from both governmental and medical authorities.

II. Non-Discrimination

A. The university shall not discriminate in enrollment or employment against an individual with AIDS.

B. No one shall be denied access to campus activities or facilities solely on the ground that they suffer from AIDS.

III. Confidentiality

A. The university shall comply with all pertinent statutes and regulations which protect the privacy and welfare of persons in the university community who suffer from AIDS as well as the welfare of others within the university community.

B. The university will maintain procedural safeguards throughout the university with the objective of protecting the privacy of persons living with AIDS.

C. All confidential medical information about an individual will be handled in compliance with legal requirements and professional ethical standards.

D. The university will not disclose the identity of any student or employee who has AIDS, except as authorized by law or pursuant to guidelines following the general standards included in the American College Health Association's Recommended Standards and Practices for a College Health Program, fourth edition:

In general, it is recommended that no specific or detailed information concerning complaints or diagnosis be provided to faculty, administrators, or even parents, without the expressed written consent of the patient in each case.

IV. University Responsibilities

A. The university shall develop and maintain a comprehensive educational program about AIDS.

B. The university shall identify sources of competent and confidential testing for AIDS as well as counseling services upon request.

C. The university shall identify sources of qualified medical care and encourage
those with AIDS to utilize such sources.

D. The university shall adopt and implement safety guidelines as proposed by the U.S. Public Health Service for handling and disposing of blood and other body fluids.

E. Decisions in all situations involving students or employees with health problems are to be made on a case by case basis, based on the medical facts in each case and with concern for the confidentiality and best interests of all parties involved. The chancellor or designee shall identify the person(s) to be involved in each case.

http://policies.siu.edu/personnel_policies/chapter4/ch4-all/aids.html
PROFESSIONAL STUDENT RESPONSIBILITIES AND EXPECTATIONS

Health care providers are set apart from others by virtue of the dignity, worthiness, and responsibility of their work. Service to mankind is the primary objective of the dental hygienist and is the reason for the existence of the profession.

Others look to the health care provider for leadership and expect more than ordinary demonstration of good human relations. Being professional requires a high standard of interpersonal, professional, interdisciplinary and community relationships.

Each dental hygienist represents the entire profession to the individual patient or groups of people they serve. The dental hygienist's attitude toward his or her profession, health, appearance and associations is often reflected in the subsequent attitude of the public toward other dental hygienists, and dental hygiene and dental care in general.

Members of the health professions need to exemplify the traits which they hold as objectives for others if response and cooperation is to be expected. As future members of the health profession, dental hygiene students must be willing to accept the responsibilities placed on them in order to prove they are capable of assuming future responsibilities.

The transition from a layman to a professional person, which must be made during professional training and education, is not easy. From past educational experiences, emphasis may have been placed on learning to receive high grades in order to be admitted to a university, special program of study, or graduate school. During professional education, this emphasis must shift to learning for the sake of learning.

One must strive to thoroughly understand what one is learning in order to be able to transfer this knowledge from the classroom to the laboratory and from the laboratory to the clinic. As an individual adopts this philosophy of learning and is being educated in the true sense of the word, it becomes easy to receive high grades. This philosophy of learning prepares the student to accept future professional responsibilities.

A professional person never stops learning. Professional knowledge is challenged daily due to differences of individual health problems and new knowledge in the scientific world.
EDUCATIONAL OBJECTIVES OF THE DENTAL HYGIENE PROGRAM AT SOUTHERN ILLINOIS UNIVERSITY

1. To prepare individuals who are capable of meeting the needs of society, dentistry and dental hygiene now and in the future;

2. To prepare dental hygienists who are able to participate effectively in an interdisciplinary approach to meeting the health care needs of an increasingly complex world;

3. To prepare dental hygienists with strong theoretical base in humanities, psychosocial sciences, basic sciences, and dental hygiene sciences who are able to synthesize and apply this knowledge in all professional interactions;

4. To prepare liberally educated professionals who are capable of problem solving, decision making, and are motivated to be life-long learners;

5. To prepare dental hygienists who are aware of the need, motivated and have appropriate knowledge and skills to provide access to care for all segments of the population with emphasis on children, elderly, culturally diverse, individuals living in rural areas, and those with special care needs.

6. To prepare dental hygienists who are capable of functioning in a variety of settings; to include the functional roles of practitioner, researcher, manager, change agent, consumer advocate, and education/health promoter in order to better meet the oral health care needs of the public;

7. To facilitate the development of dental hygienists who will uphold the ethics of the dental hygiene profession;

8. To facilitate the development of dental hygienists who are committed to contributing to the betterment of the profession through membership and active participation in professional associations;

9. To provide an articulation pathway for efficient completion of a baccalaureate degree in dental hygiene for dental hygienists who have completed an associate degree from any of the dental hygiene programs located in community colleges in Illinois and/or other programs throughout the United States.

10. To continue to help meet the oral health care needs of southern Illinois through provision of care in the Dental Hygiene Clinic, the Community Dental Center, long-term care facilities, and through community involvement.

11. To provide sufficient numbers of dental hygienists to meet the state and regional employment needs.
12. To prepare dental hygienists with communication and leadership skills needed to participate effectively in the maintenance of community health in areas of prevention, education, and care;

13. To prepare dental hygienists to actively participate in health promotion;

14. To prepare graduates who have the desire and the ability to complete graduate and professional education programs.
ETHICS

Ethics is defined as a system of rules, right conduct, morals, and principles governing the conduct of a professional group planned by that group for the common good.

Understanding the ethics of the profession is vital to professional development. It is not difficult to belong to a profession, but it requires personal commitment to ethical principles to become a "professional."

The dental hygiene students belong to the Student Chapter of the American Dental Hygienists' Association. Involvement in this organization provides the student with a means of interacting in a way which contributes to professional development, based on the Code of Ethics established by the American Dental Hygienists' Association.

This Code of Ethics begins on page 18 of this document.
PROFESSIONAL CONDUCT

Part of attaining professionalism is to have strived to acquire the maximum amount of knowledge and skills possible while in school and to continue learning after graduation to assure patients will receive the highest quality of care.

The faculty of the Dental Hygiene Program have a responsibility to the public to prepare dental hygienists who will provide the highest caliber of dental care to the entire dental profession and to prepare qualified students to meet the manpower needs.

A. ATTENDANCE

Dental hygiene students are expected to attend all lectures, labs, clinics, and special assignments. Excused absences must be discussed in advance with appropriate faculty. Approval will be at the discretion of the faculty.

B. COURSE POLICIES

Policies for each course concerning attendance, absenteeism, and tardiness will be given in the syllabus at the beginning of the semester. In the spirit of academic freedom and due to the diverse nature of each course, policies may vary slightly from course to course. The Dental Hygiene faculty supports each professor's policy and will help in implementation of the procedures and stipulations of each policy.

STUDENT CONDUCT CODE


It is the responsibility of the student to be thoroughly acquainted with the definitions, policies and procedures in the Code. The program professors will enforce the provisions of the code as well as specific policies outlined above and in each course syllabus.

The Student Conduct Code contains specific information on violations and sanctions covering both academic and social behavior. By accepting membership in this University and, specifically, Dental Hygiene, the student implies consent to abide by these rules and regulations.
ACADEMIC HONESTY:

All students are expected to adhere to a strict code of academic honesty. Academic dishonesty will be addressed according to the “Policies and Procedures Applicable to Academic Dishonesty” as stated in the “Important Information for Students, Faculty, & Staff” booklet.

From the “Student Conduct Code”, section II, article A:

Acts of Academic Dishonesty:

1. Plagiarism, representing the work of another as one’s own work;
2. Preparing work for another that is to be used as that person’s own work;
3. Cheating by any method or means;
4. Knowingly and willfully falsifying or manufacturing scientific or educational data and representing the same to be the result of scientific or scholarly experiment or research;
5. Knowingly furnishing false information to a university official relative to academic matters;
6. Soliciting, aiding, abetting, concealing, or attempting conduct in violation of this code.

Sanctions will be imposed for violations of this policy in accordance with the Student Conduct Code. A copy of the “Important Information for Students, Faculty & Staff” booklet can be obtained from the Office of the Vice Chancellor for Student Affairs, Mailcode 4308, Southern Illinois University, Carbondale, IL 62901-4308. Or by accessing this link:

ADA Accommodations:

In keeping with the goal of the implementation of the Americans with Disabilities Act (ADA), all students for whom this act applies should notify the instructor no later than the second session of the course so that arrangements can be made for accommodations to meet your educational needs and maximize learning.
http://disabilityservices.siu.edu/student-services/index.html
STUDENT SUGGESTIONS, COMMENTS, COMPLAINTS, AND PROTOCOL

Proper protocol is a necessity in handling suggestions, comments, and complaints. It is both professional and mature to discuss concerns directly with the individuals involved. This avoids unnecessary time lags and misunderstandings stemming from indirect communication. Most appropriately, comments concerning program policy and/or procedure should be directed to the specific professor who is responsible for that aspect regarding the incident in question. Should a situation arise in a particular class, protocol dictates that the student approach the individual professor involved to discuss the matter before pursuing any alternatives. Professional decorum is expected to be maintained in exchange of dialogue.

While we recognize that some situations require immediate attention or discussion, we suggest that you seek consultation and advisement during designated office hours. Appointments are encouraged for convenience of both student and faculty. Just as students have commitments to other courses, so do faculty. Professors also have other administrative types of responsibilities that may be time consuming but necessary to keep the program running efficiently.

If all appropriate alternatives have been explored and the student feels that a particular problem needs further attention, communication may be continued through the appropriate order as follows:

1. Individual professor
2. Program Director, Dental Hygiene
3. Director, School of Allied Health
4. Dean, College of Applied Sciences and Arts

Student Complaint Notice

"The Dental Hygiene Program at Southern Illinois University is accredited by the Commission on Dental Accreditation which will review complaints that relate to program’s compliance with the accreditation standards. The Commission is interested in the sustained quality and improvement of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for individuals in matters of admission, appointment, promotion or dismissal of faculty, staff, or students."

A copy of the appropriate accreditation standards and/or the Commission's policy and procedure for submission of complaints may be obtained by contacting the Commission at 211 East Chicago Avenue, Chicago, IL 60611-2678 or by calling 1-800-621-8099, extension 4653.
STUDENT RETENTION AND RE-ENTRY

A student's academic progression in the dental hygiene program may be suspended due to academic problems, health problems or other extenuating circumstances. The following retention and re-admission policies have been established.

1) The student must maintain an acceptable academic status in order to adequately prepare for the National Board Dental Hygiene Examination

2) The dental hygiene curriculum is designed so that one course builds on another. If a student does not complete a course with a passing grade of “C”, he/she will not be able to continue in the program until the course is repeated and a minimum grade of “C” is earned.

3) Students falling below the minimum academic standards for the University may be suspended.

RETENTION POLICIES

The student is expected to complete the curriculum in eight consecutive semesters. Students who drop out of the sequence must apply for re-admission to the program if they wish to re-enter at a later date.

1) All dental hygiene courses and prerequisites must be completed with a passing grade of “C”. Should the student fail to pass a course, they must drop out of the program and retake the course and obtain a passing grade.

2) The student must maintain a cumulative grade point average of 2.0 in order to remain in good standing in the University and dental hygiene program. Failure to maintain the minimum GPA will result in suspension from the program.

REAPPLICATION PROCEDURES

If, for any reason, the student is unable to complete the curriculum in the required sequence, he/she is encouraged to apply for re-admission. Applications of re-entry students are reviewed by the Dental Hygiene Admissions Committee. Students may be re-admitted according to qualifications and positions available. Completing re-application procedures and meeting minimum requirements does not guarantee re-admittance.

Procedures for re-entry:

1) State, in writing your intentions to re-enter or not re-enter the dental hygiene program. Submit this to the Admissions Committee.
Reapplication Procedures (continued)

1) Submit evidence of having acquired a cumulative grade point average of 2.0 (on a 4.0 scale) at the time of re-application. (Cumulative GPA’s based on all college credit earned, both transferred from other colleges and from SIUC).

2) Submit evidence of having acquired a cumulative grade point average of 2.0 at the time of readmittance.

3) Submit updated transcripts to the screening committee as each semester’s coursework is completed.

4) Complete current application/reapplication procedures as determined by the admissions committee.

5) Submit application materials for re-entry according to the following timetable:

<table>
<thead>
<tr>
<th>to re-enter</th>
<th>re-apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall semester</td>
<td>first month of spring semester</td>
</tr>
<tr>
<td>Spring semester</td>
<td>first month of fall semester</td>
</tr>
<tr>
<td>Summer semester</td>
<td>first month of spring semester</td>
</tr>
</tbody>
</table>

GRADING POLICIES

The University has maintained a grading scale of:

90 to 100 = A  
80 to 89  = B  
70 to 79  = C  
60 to 69  = D  
0 to 59   = F

As a program, Dental Hygiene courses will be evaluated following this scale UNLESS SPECIFIED DIFFERENTLY BY THE INDIVIDUAL PROFESSOR. When this is the case, the grading scale and criteria specified by the individual professor in a given course takes precedence over the general grading scale. Dental Hygiene courses require a “C” to pass the course. Differences in grading scales and/or course requirements will be given to the students in writing in the course syllabus. IT IS THE RESPONSIBILITY OF THE STUDENT TO READ AND UNDERSTAND EACH SYLLABUS FOR EACH COURSE.
Grading Policies (continued)

Course requirements may be defined as grade requirements (such as 75% on a test), certain procedures to be completed at a certain level of proficiency (such as 2 alginate impressions on a patient at 75% or better), or a specified number of practical experiences also at a specified degree of competency (such as 5 sets of radiographs on a Dexter mannequin at a specific grade). These requirements will also be given to each student in writing in the course syllabus at the beginning of each semester. Exceptions to these requirements due to extenuating circumstances will be granted only upon consent of the professor in charge of the course and the program director.

Extenuating circumstances must be discussed with the professor and program director on an individual basis which may make the student eligible for a grade of Incomplete. If the student disagrees with an individual course grade, University procedures for a grievance should be followed.

SPECIAL EDUCATIONAL ASSIGNMENTS

In order to familiarize the dental hygiene student with all areas of dentistry and to increase understanding of the teamwork necessary to provide optimum patient care, students will be given the opportunity to become involved in various special rotations. The student will learn through practical experience the role of the dental hygienist in each setting. The student may be providing dental hygiene care, assisting other members of the oral health team, or observing patient treatment.

Rotations include The Veteran's Administration Hospital in Marion, a home visit with a nurse from the H-Group Early Head Start, community dental centers, a periodontist's office, and other assignments as determined by faculty. The student will also participate as clinic assistant, x-ray assistant, receptionist, and provider of dental health education programs. The student must participate in these areas and strive to gain as much experience in each situation as possible. This degree program requires the successful completion of clinical internships. In accordance with Federal and State guidelines, the clinical sites will require proof of the following: vaccination for measles, mumps, rubella, tetanus, and Hepatitis B; proof of current negative TB test, current certification in CPR for the Health Care Provider, and proof of completion of HIPAA and blood-borne pathogens training. Affiliation sites will also require students to undergo a criminal background check and drug screening. Expenses incurred for these rotations must be paid for by the student.

Students are also required to attend 3 to 4 continuing professional education programs. There will be a fee ranging from $5.00 to $40.00 for attendance at each program. The costs must be paid for by the students.
CODE OF ETHICS FOR DENTAL HYGIENISTS

1. Preamble

As dental hygienists, we are a community of professionals devoted to the prevention of disease and the promotion and improvement of the public’s health. We are preventive oral health professionals who provide educational, clinical, and therapeutic services to the public. We strive to live meaningful, productive, satisfying lives that simultaneously serve us, our profession, our society, and the world. Our actions, behaviors, and attitudes are consistent with our commitment to public service. We endorse and incorporate the Code into our daily lives.

2. Purpose

The purpose of a professional code of ethics is to achieve high levels of ethical consciousness, decision making, and practice by the members of the profession. Specific objectives of the Dental Hygiene Code of Ethics are:

- to increase our professional and ethical consciousness and sense of ethical responsibility.
- to lead us to recognize ethical issues and choices and to guide us in making more informed ethical decisions.
- to establish a standard for professional judgment and conduct.
- to provide a statement of the ethical behavior the public can expect from us.

The Dental Hygiene Code of Ethics is meant to influence us throughout our careers. It stimulates our continuing study of ethical issues and challenges us to explore our ethical responsibilities. The Code establishes concise standards of behavior to guide the public’s expectations of our profession and supports existing dental hygiene practice, laws and regulations. By holding ourselves accountable to meeting the standards stated in the Code, we enhance the public’s trust on which our professional privilege and status are founded.

3. Key Concepts

Our beliefs, principles, values and ethics are concepts reflected in the Code. They are the essential elements of our comprehensive and definitive code of ethics, and are interrelated and mutually dependent.

4. Basic Beliefs

We recognize the importance of the following beliefs that guide our practice and provide context for our ethics.

- The services we provide contribute to the health and well-being of society.
• Our education and licensure qualify us to serve the public by preventing and treating oral disease and helping individuals achieve and maintain optimal health.
• Individuals have intrinsic worth, are responsible for their own health, and are entitled to make choices regarding their health.
• Dental hygiene care is an essential component of overall healthcare and we function interdependently with other healthcare providers.
• All people should have access to healthcare, including oral healthcare.
• We are individually responsible for our actions and the quality of care we provide.

5. Fundamental Principles

These fundamental principles, universal concepts and general laws of conduct provide the foundation for our ethics.

Universality
The principle of universality assumes that, if an individual judges the action to be right or wrong in a given situation, other people considering the same action in the same situation would make the same judgment.

Complementarity
The principle of complementarity assumes the existence of an obligation to justice and basic human rights. It requires us to act toward others in the same way they would act toward us if roles were reversed. In all relationships, it means considering the values and perspective of others before making decisions or taking actions affecting them.

Ethics
Ethics are the general standards of right and wrong that guide behavior within society. As generally accepted actions, they can be judged by determining the extent to which they promote good and minimize harm. Ethics compel us to engage in health promotion/disease prevention activities.

Community
This principle expresses our concern for the bond between individuals, the community, and society in general. It leads us to preserve natural resources and inspires us to show concern for the global environment.

Responsibility
Responsibility is central to our ethics. We recognize that there are guidelines for making ethical choices and accept responsibility for knowing and applying them. We accept the consequences of our actions or the failure to act and are willing to make ethical choices and publicly affirm them.

6. Core Values

We acknowledge these values as general for our choices and actions.
Individual Autonomy and Respect for Human Beings
People have the right to be treated with respect. They have the right to informed consent prior to treatment, and they have the right to full disclosure of all relevant information so that they can make informed choices about their care.

Confidentiality
We respect the confidentiality of client information and relationships as a demonstration of the value we place on individual autonomy. We acknowledge our obligation to justify any violation of a confidence.

Societal Trust
We value client trust and understand that public trust in our profession is based on our actions and behavior.

Nonmaleficence
We accept our fundamental obligation to provide services in a manner that protects all clients and minimizes harm to them and others involved in their treatment.

Beneficence
We have a primary role in promoting the well-being of individuals and the public by engaging in health promotion/disease prevention activities.

Justice and Fairness
We value justice and support the fair and equitable distribution of healthcare resources. We believe all people should have access to high-quality, affordable oral healthcare.

Veracity
We accept our obligation to tell the truth and assume that others will do the same. We value self-knowledge and seek truth and honesty in all relationships.

7. Standards of Professional Responsibility

We are obligated to practice our profession in a manner that supports our purpose, beliefs, and values in accordance with the fundamental principles that support our ethics. We acknowledge the following responsibilities:

- **To Ourselves as Individuals**...
  - Avoid self-deception and continually strive for knowledge and personal growth.
  - Establish and maintain a lifestyle that supports optimal health.
  - Create a safe work environment.
  - Assert our own interests in ways that are fair and equitable.
  - Seek the advice and counsel of others when challenged with ethical dilemmas.
  - Have realistic expectations of ourselves and recognize our limitations.

- **To Ourselves as Professionals**...
  - Enhance professional competencies through continuous learning in order to practice
according to high standards of care.
• Support dental hygiene peer-review systems and quality-assurance measures.
• Develop collaborative professional relationships and exchange knowledge to enhance our own lifelong professional development.

  o **To Family and Friends...**
  • Support the efforts of others to establish and maintain healthy lifestyles and respect the rights of friends and family.

  o **To Clients...**
  • Provide oral healthcare utilizing high levels of professional knowledge, judgment, and skill.
  • Maintain a work environment that minimizes the risk of harm.
  • Serve all clients without discrimination and avoid action toward any individual or group that may be interpreted as discriminatory.
  • Hold professional client relationships confidential.
  • Communicate with clients in a respectful manner.
  • Promote ethical behavior and high standards of care by all dental hygienists.
  • Serve as an advocate for the welfare of clients.
  • Provide clients with the information necessary to make informed decisions about their oral health and encourage their full participation in treatment decisions and goals.
  • Refer clients to other healthcare providers when their needs are beyond our ability or scope of practice.
  • Educate clients about high-quality oral health care.

  o **To Colleagues...**
  • Conduct professional activities and programs, and develop relationships in ways that are honest, responsible, and appropriately open and candid.
  • Encourage a work environment that promotes individual professional growth and development.
  • Collaborate with others to create a work environment that minimizes risk to the personal health and safety of colleagues.
  • Manage conflicts constructively.
  • Support the efforts of other dental hygienists to communicate the dental hygiene philosophy and preventive oral care.
  • Inform other healthcare professionals about the relationship between general and oral health.
  • Promote human relationships that are mutually beneficial, including those with other healthcare professionals.

  o **To Employees and Employers...**
  • Conduct professional activities and programs, and develop relationships in ways that are honest, responsible, open, and candid.
  • Manage conflicts constructively.
  • Support the right of our employees and employers to work in an environment that promotes
wellness.

• Respect the employment rights of our employers and employees.

  o **To the Dental Hygiene Profession...**
  • Participate in the development and advancement of our profession.
  • Avoid conflicts of interest and declare them when they occur.
  • Seek opportunities to increase public awareness and understanding of oral health practices.
  • Act in ways that bring credit to our profession while demonstrating appropriate respect for colleagues in other professions.
  • Contribute time, talent, and financial resources to support and promote our profession.
  • Promote a positive image for our profession.
  • Promote a framework for professional education that develops dental hygiene competencies to meet the oral and overall health needs of the public.

  o **To the Community and Society...**
  • Recognize and uphold the laws and regulations governing our profession.
  • Document and report inappropriate, inadequate, or substandard care and/or illegal activities by a healthcare provider to the responsible authorities.
  • Use peer review as a mechanism for identifying inappropriate, inadequate, or substandard care provided by dental hygienists.
  • Comply with local, state, and federal statutes that promote public health and safety.
  • Develop support systems and quality-assurance programs in the workplace to assist dental hygienist in providing the appropriate standard of care.
  • Promote access to dental hygiene services for all supporting justice and fairness in the distribution of healthcare resources.
  • Act consistently with the ethics of the global scientific community of which our profession is a part.
  • Create a healthful workplace ecosystem to support a healthy environment.
  • Recognize and uphold our obligation to provide pro bono service.

  o **To Scientific Investigation...**
  We accept responsibility for conducting research according to the fundamental principles underlying our ethical beliefs in compliance with universal codes, governmental standards, and professional guidelines for the care and management of experimental subjects. We acknowledge our ethical obligations to the scientific community:
  • Conduct research that contributes knowledge that is valid and useful to our clients and society.
  • Use research methods that meet accepted scientific standards.
  • Use research resources appropriately.
  • Systematically review and justify research in progress to insure the most favorable benefit-to-risk ratio to research subjects.
  • Submit all proposals involving human subjects to an appropriate human subject review committee.
  • Secure appropriate institutional committee approval for the conduct of research involving
animals.

- Obtain informed consent from human subjects participating in research that is based on specification published in Title 21 Code of Federal Regulations Part 46.
- Respect the confidentiality and privacy of data.
- Seek opportunities to advance dental hygiene knowledge through research by providing financial, human, and technical resources whenever possible.
- Report research results in a timely manner.
- Report research findings completely and honestly, drawing only those conclusions that are supported by the data presented.
- Report the names of investigators fairly and accurately.
- Interpret the research and the research of others accurately and objectively, drawing conclusions that are supported by the data presented and seeking clarity when uncertain.
- Critically evaluate research methods and results before applying new theory and technology in practice.
- Be knowledgeable concerning currently accepted preventive and therapeutic methods, products, and technology and their application to our practice.
GUIDELINES FOR RADIOLOGY PATIENTS

*Disclaimer: The DH Clinic recently obtained the DEXIS Digital Radiography System. Until the system is fully integrated into the clinical examination and visit, the following pertaining to radiographic exposure will remain in effect. DH faculty will guide the student in the proper sequencing and procedure.

1A. If the patient has been through screening:

Most all of the paperwork should be done, including having the patient pay for the procedure; if not, make sure that it is done before you begin. In order to get begin radiology for your patient, bring the chart to the Radiology Instructor or Clinic Faculty with the treatment record sheet out. That will make it easier to see if the patient has paid and will also be easier to fill out back of your treatment sheet. At this point, you will be given permission to begin radiology procedures.

Forms needed:

1. Signed and completed Health History (updated if more than 6 months old)
2. Signed Consent Form and HIPAA Form
3. Signed Screening Consultation Form (Fee Sheet)
4. Treatment Record Sheet

1B. If the patient has not been through screening:

A complete patient folder (either paper or Dentrix chart) needs to be made. When you complete the health history with the patient, you need to make sure that the patient has not had recent radiographs and that the patient is not high risk (see Radiology Instructor or Clinic Faculty for other specific health history questions to concentrate on). If the patient has had recent radiographs and/or is high risk, consult with the Radiology Instructor or Clinic Faculty before proceeding further. A patient consent form and HIPAA form needs to be signed as well as a screening consultation form (fee sheet). Again, have the patient pay for the procedure beforehand. You will need the treatment record, receipt and the completed folder brought to the Radiology Instructor or Clinic Faculty in order to begin treatment. The number of exposures will be documented on the back of the treatment record and what cubicle you are using for the radiographic procedure.

Forms needed:

A complete patient record has to be established which will consist of a patient folder/Dentrix chart and all of the same forms listed in #1A above.

2. After your films/images are exposed:

You are responsible for your films!! If you allow someone else to develop your films and something goes wrong, it's your grade!!
3. After your films/images are processed:

Now it is time to look for any possible retakes. Here is where you will use one of the evaluation (grading) sheets: yellow sheet (FMX), blue sheet (PAN/7 VF MX, Pedo FMX) or pink sheet (BWX). Is everything that is supposed to be on each image present? If not, what could be done to correct the image? Refer to the abbreviated error codes in viewing area and make your comments pertaining to your images by marking the appropriate codes in the boxes before you have the Radiology Instructor or Clinic Faculty review them. You will also be checking the films for any suspected abnormalities. If there are concerns present, be sure to write it on the evaluation (grading) sheet. After you have done the above, you will need to have the films/images evaluated for retakes by the Radiology Instructor or Clinic Faculty.

4. After the evaluation of the films/images:

Retakes (if necessary or recommended) are taken. Again, you will need the patient’s treatment record sheet in order to receive the films. Make sure all of the necessary paperwork (or documentation in the Dentrix chart) is completed before taking retakes. Also, the number of retakes will be recorded on the back of the treatment record sheet and the cubicle you are using will be noted.

5. After the retakes are completed:

When the retakes are processed or exposed with Dexis digital system, evaluate them and then receive a final grade with the original instructor who assigned the retakes. Your grade and the patient’s name should be recorded on the grade sheet. Determination and/or confirmation of pathology should be recorded and signed by the dentist on the back of the gold treatment record sheet. Please inform the patient of any treatment recommendations documented by the dentist (make sure recorded on the exit sheet or other form that will be given to the patient).

6A. If the films/images need to be mailed:

On the treatment record sheet, record the mailing date, who packaged and mailed the radiographs and what type of films/digital prints were mailed as well as the name and address of the dentist to whom the films/images were sent. Type the dentist’s name and address on a white mailing label and a return address label on the appropriate envelope (large for FMX or Panoramic, small for bitewings--these are kept at the front desk and labels can be made at the front desk as well). Before sealing the envelope, give to a faculty member to check before mailing, Now, the envelope can be sealed and placed in the wire basket by the instructors’ mailboxes in the School of Allied Health Office—Room #18. NOTE: If, for any reason, there is only one copy of radiographs in the patient’s folder, a duplicate set will have to be made. Mail the duplicate set and keep the originals in the patient’s folder for our records.
6B. If the films/images do not need to be mailed:
Leave both copies (original and duplicate set of radiographs) in the patient’s chart. You will need to make sure the digital copy provided to the patient has the date of the exposure and the patient’s name on the printout. If the patient requests, at a later date, that the radiographs be mailed, then follow the procedure outlined in #6A above and mail the mounted or printed copy.
Patient Bill of Rights

To our patients: Within the scope of dental hygiene practice, the faculty, students and staff of the SIUC Dental Hygiene Clinic and Community Dental Center pledge to:

- Treat patients with respect and dignity;
- Keep information provided by patients confidential;
- Serve all patients without discrimination (i.e., age, gender, race, religion, disability);
- Provide high quality oral health care reflective of the skill, care and judgment considered to be standard of care that is provided by student dental hygienists supervised by licensed dental hygienists and dentists or by licensed dental hygienists or dentists;
- Provide patients with information regarding their oral health status;
- Educate patients about oral self-care;
- Assist patients in making informed decisions about their oral health (i.e., explain condition, proposed treatment, treatment alternatives, risk of no treatment, and expected outcomes);
- Encourage patients to fully participate in treatment decisions and oral self care;
- Explain the expected cost of treatment and potential fees involved in treatment;
- Keep patients informed of anticipated treatment time, and progress toward completion of treatment;
- Meet the dental hygiene needs of each patient, maintaining continuity of care; and
- Make referrals to other professionals for care when needed that is beyond the scope of this oral health setting.
Program Competencies

Competencies for Entry into the Profession of Dental Hygiene
(As approved by the 2011 ADEA House of Delegates)

Dental hygienists must complete an accredited educational program and qualify for licensure in any state or jurisdiction. They practice in collaboration with dental and other health care professionals in a variety of settings.

Core Competencies (C)
C.1 Apply a professional code of ethics in all endeavors.
C.2 Adhere to state and federal laws, recommendations, and regulations in the provision of oral health care.
C.3 Use critical thinking skills and comprehensive problem-solving to identify oral health care strategies that promote patient health and wellness.
C.4 Use evidence-based decision making to evaluate emerging technology and treatment modalities to integrate into patient dental hygiene care plans to achieve high-quality, cost-effective care.
C.5 Assume responsibility for professional actions and care based on accepted scientific theories, research, and the accepted standard of care.
C.6 Continuously perform self-assessment for lifelong learning and professional growth.
C.7 Integrate accepted scientific theories and research into educational, preventive, and therapeutic oral health services.
C.8 Promote the values of the dental hygiene profession through service-based activities, positive community affiliations, and active involvement in local organizations.
C.9 Apply quality assurance mechanisms to ensure continuous commitment to accepted standards of care.
C.10 Communicate effectively with diverse individuals and groups, serving all persons without discrimination by acknowledging and appreciating diversity.
C.11 Record accurate, consistent, and complete documentation of oral health services provided.
C.12 Initiate a collaborative approach with all patients when developing individualized care plans that are specialized, comprehensive, culturally sensitive, and acceptable to all parties involved in care planning.
C.13 Initiate consultations and collaborations with all relevant health care providers to
facilitate optimal treatments.

C.14 Manage medical emergencies by using professional judgment, providing life support, and utilizing required CPR and any specialized training or knowledge.

**Health Promotion and Disease Prevention (HP)**

HP.1 Promote positive values of overall health and wellness to the public and organizations within and outside the profession.

HP.2 Respect the goals, values, beliefs, and preferences of all patients.

HP.3 Refer patients who may have physiological, psychological, or social problems for comprehensive evaluation.

HP.4 Identify individual and population risk factors, and develop strategies that promote health-related quality of life.

HP.5 Evaluate factors that can be used to promote patient adherence to disease prevention or health maintenance strategies.

HP.6 Utilize methods that ensure the health and safety of the patient and the oral health professional in the delivery of care.

**Community Involvement (CM)**

CM.1 Assess the oral health needs and services of the community to determine action plans and availability of resources to meet the health care needs.

CM.2 Provide screening, referral, and educational services that allow patients to access the resources of the health care system.

CM.3 Provide community oral health services in a variety of settings.

CM.4 Facilitate patient access to oral health services by influencing individuals or organizations for the provision of oral health care.

CM.5 Evaluate reimbursement mechanisms and their impact on the patient’s access to oral health care.

CM.6 Evaluate the outcomes of community-based programs, and plan for future activities.

CM.7 Advocate for effective oral health care for underserved populations.
Patient Care (PC)

Assessment

PC.1 Systematically collect, analyze, and record diagnostic data on the general, oral, and psychosocial health status of a variety of patients using methods consistent with medicolegal principles.

PC.2 Recognize predisposing and etiologic risk factors that require intervention to prevent disease.

PC.3 Recognize the relationships among systemic disease, medications, and oral health that impact overall patient care and treatment outcomes.

PC.4 Identify patients at risk for a medical emergency, and manage the patient care in a manner that prevents an emergency.

Dental Hygiene Diagnosis

PC.5 Use patient assessment data, diagnostic technologies, and critical decision making skills to determine a dental hygiene diagnosis, a component of the dental diagnosis, to reach conclusions about the patient’s dental hygiene care needs.

Planning

PC.6 Utilize reflective judgment in developing a comprehensive patient dental hygiene care plan.

PC.7 Collaborate with the patient and other health professionals as indicated to formulate a comprehensive dental hygiene care plan that is patient-centered and based on the best scientific evidence and professional judgment.

PC.8 Make referrals to professional colleagues and other health care professionals as indicated in the patient care plan.

PC.9 Obtain the patient’s informed consent based on a thorough case presentation.

Implementation

PC.10 Provide specialized treatment that includes educational, preventive, and therapeutic services designed to achieve and maintain oral health. Partner with the patient in achieving oral health goals.

Evaluation

PC.11 Evaluate the effectiveness of the provided services, and modify care plans as needed.
PC.12 Determine the outcomes of dental hygiene interventions using indices, instruments, examination techniques, and patient self-reports as specified in patient goals.

PC.13 Compare actual outcomes to expected outcomes, reevaluating goals, diagnoses, and services when expected outcomes are not achieved.

**Professional Growth and Development (PGD)**

PGD.1 Pursue career opportunities within health care, industry, education, research, and other roles as they evolve for the dental hygienist.

PGD.2 Develop practice management and marketing strategies to be used in the delivery of oral health care.

PGD.3 Access professional and social networks to pursue professional goals.