NORTH CENTRAL MICHIGAN COLLEGE

DENTAL HYGIENE

Dental Hygiene Student Handbook

Dear Student, Welcome!

The faculty and staff of the Nursing and Health Sciences Department warmly welcome you to the Dental Hygiene Program at North Central Michigan College (NCMC). Our Associate of Applied Science in Dental Hygiene degree combines both general education and dental hygiene courses aligned with the Commission on Dental Accreditation and the American Dental Education Association guidelines. General education courses meet graduation requirements and provide a strong foundation for success in your dental hygiene studies.

Upon successful completion of the program, you will be eligible to sit for the ADEX clinical examination and the National Board Exam from the Joint Commission on National Dental Examinations—both required to become a Registered Dental Hygienist in the State of Michigan.

The **Dental Hygiene Program at NCMC is rigorous and demanding**, and admission does not guarantee completion. To be successful, you must prioritize your studies, take responsibility for your attendance and participation, and remain actively engaged in your learning. Plan to devote approximately two hours of study time per credit hour each week to support your success. Ultimately, what you invest in your education will directly determine the outcomes you achieve, preparing you to meet program learning outcomes and to thrive as a professional dental hygienist.

This handbook is designed to serve as a guide throughout your time in the program. Policies, guidelines, and procedures are subject to change, and students will be notified of any revisions. Final interpretation of all policies and procedures rests with the Director of Dental Hygiene.

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Mission, Vision, and Philosophy

North Central Michigan College Mission - To provide exceptional, accessible, relevant higher education to the benefit of all. (2023)

NCMC Dental Hygiene Department Mission: To provide accessible, high-quality dental hygiene education, empowering students to transform lives through oral health and community service.

Program Philosophy: We believe education is a collaborative process that prepares students to be competent, ethical, and compassionate oral health professionals. By integrating oral and overall health concepts with critical thinking, professionalism, and respect for diversity, we equip students to provide patient-centered care and promote community oral health.

Conceptual Framework: Dental hygiene education at North Central Michigan College is guided by a conceptual framework built on the core concepts of patient, health, environment, and dental hygiene care, which forms the foundation for the Program Student Learning Outcomes (PLOs). Aligned with the Commission on Dental Accreditation (CODA) Standards for Dental Hygiene Education Programs and the American Dental Education Association (ADEA) guiding principles, the curriculum develops the knowledge, skills, values, and professional behaviors required for entry-level dental hygiene practice. Student learning outcomes are intentionally integrated and sequenced across classroom, laboratory, clinical, and community settings, building from foundational to advanced concepts while cultivating critical thinking, evidence-based decision-making, professionalism, and a commitment to patient-centered care. Through this process, students develop the competence and integrity required to adapt to changes in society and healthcare, and to serve as ethical, socially responsible dental hygienists prepared to advance oral and overall health.

Core Concepts: Patient, health, environment, and dental hygiene care.
Foundations: CODA Standards and ADEA guiding principles.
Curriculum: Progresses from simple to complex across didactic, lab, clinical, and community experiences.
Student Learning Outcomes: Leveled throughout the program to build knowledge, skills, and professional behaviors.
Emphasis: Critical thinking, evidence-based practice, professionalism, patient-centered and community-focused care.
Graduate Readiness: Ethical, competent, and adaptable dental hygienists prepared to advance oral and overall health.

Program Goals

The Dental Hygiene Program has established the following program goals:

1. Through evidence-based and contemporary educational methodologies, the program will prepare graduates to demonstrate competence as entry-level dental hygienists who function with autonomy as prevention specialists within the oral healthcare team.

2. The program will prepare graduates to apply critical thinking and evidence-based decision-making to develop, implement, and evaluate strategies that promote and maintain oral and overall health for diverse populations.
3. The program will foster lifelong learning, ethical decision-making, and leadership by modeling professionalism and encouraging graduates to mentor others within the dental and broader healthcare communities.

Alignment of Program Learning Outcomes with CODA Standards and ADEA Curriculum Guidelines

Program Learning Outcome	CODA Standards	ADEA Guidelines
1. Professionalism and Ethics Graduates will demonstrate professionalism, ethical behavior, and a commitment to lifelong learning, fostering collaboration, mutual respect, and accountability in relationships with patients, colleagues, faculty, staff, and the profession.	2-18, 2-21, 2-22	#21, #23, #27
2. Comprehensive Patient Care Graduates will be comprehensively prepared as competent dental hygiene professionals who can assess, diagnose, plan, implement, and evaluate individualized dental hygiene care for patients across the lifespan, addressing diverse needs and varying degrees of oral and periodontal health.	2-12 to 2-15	#1–9, #19
3. Health Promotion, Education, and Community Service Graduates will design, implement, and evaluate community-based oral health programs and patient education strategies that promote health, prevent disease, and support community service among culturally diverse populations.	2-9, 2-16	#13–15, #18, #27
4. Critical Thinking, Research, and Evidence-Based Decision-Making Graduates will apply the dental hygiene process of care using critical thinking, scientific principles, and current research evidence to support clinical decision-making and optimize patient outcomes.	2-10, 2-11	#24, #25
5. Interprofessional Collaboration Graduates will effectively collaborate with other healthcare professionals and community partners to enhance patient care, improve health outcomes, and contribute to overall community wellness.	2-19	#26
6. Teaching and Scholarly Activity Graduates will demonstrate the ability to apply evidence-based practice and engage in lifelong learning by integrating current research, critically evaluating scientific literature, and supporting the use and dissemination of knowledge to enhance clinical decision-making and the advancement of the dental hygiene profession.	2-10, 2-11, 2-22	#24, #25, #27

Dental Hygiene Student Competencies

Competency 1 – Patient-Centered Care

Graduates will provide individualized dental hygiene care using the dental hygiene process of care to promote oral and overall health across diverse populations.

Competency 2 – Safe and Effective Care
Graduates will deliver dental hygiene services that reflect current standards of practice, infection control, and risk management to protect patients and providers.
Competency 3 – Interprofessional Collaboration and Teamwork
Graduates will work effectively with patients, faculty, peers, and other healthcare professionals to coordinate and improve patient outcomes.
Competency 4 – Patient Education and Health Promotion
Graduates will educate and motivate patients and communities to prevent disease and improve oral and systemic health.
Competency 5 – Critical Thinking and Evidence-Based Decision Making
Graduates will apply scientific knowledge, clinical judgment, and research evidence to make informed decisions in patient care.
Competency 6 – Professionalism and Ethical Responsibility
Graduates will demonstrate accountability, ethical practice, and professional behavior in all aspects of dental hygiene care.

Commission on Dental Accreditation – Dental Hygiene Standards link:

https://coda.ada.org/-/media/project/ada-organization/ada/coda/files/dental_hygiene_standards.pdf?rev=b40af69a60424de48cc389de925ccb2f&hash=034C7BD10AC5CE39762060974CAEC345 (Students will be given a link to this site.)

American Dental Education Association – Allied Dental Education Programs May 2015-2016 link: adea-compendium-of-curriculum-guidelines-(may-2016).pdf (Students will be given a link to this site.)

North Central Michigan College – Dental Hygiene Program Admission Requirements

Pre-Program Required Courses:

BIO 226 Microbiology
BIO 235 General Anatomy and Physiology I
BIO 236 General Anatomy and Physiology II
CEM 101 Fundamentals in Chemicals
COM 170 Interpersonal Communication
DHY 102 Dental Hygiene Profession
DHY 103 Dental Anatomy
ENG 111 English Composition
HE 200 Nutrition
PSY 161 Introduction to Psychology
SOC 171 Introduction to Sociology

Admission and Program Requirements

- **Application Deadline:** April 15 for Fall enrollment.
    - Report Dental Hygiene as your field of study as soon as you register for pre-program courses.
    - Take the HESI A2 Admission Assessment Test
    - Apply to the Dental Hygiene Program

- Proof of a minimum of 10 hours observation of a practicing Dental Hygienist must be submitted with the application to the program, and can be completed during DHY 102 or on your own. If you complete the observation prior to DHY 102, the instructor may still require you to complete observation hours during the class.
- Applications are reviewed in May, with letters of acceptance mailed by June 1.

- **Admission Review:** Decisions are made only **after final pre-program grades are posted** and evaluated according to admission criteria. Both the 10-hour dental office observation (DHY 102) and the HESI A2 Admission Assessment Test must be completed before final application submission and can be taken up to 5 years before application. (HESI allows only three attempts per year and must be 60 days apart.)
- **Pre-Program GPA/Grades:** Applicants must have a minimum 3.0 GPA in pre-program courses. All courses require a grade of C or higher, with Biology and DHY 102/103 requiring a B- (80%) or higher. Pre-program foundational courses must be completed within 10 years; Biology and Dental Hygiene pre-program courses must be completed within 5 years of application.
- **Graduation Requirement:** Students must maintain a **minimum 2.5 GPA** in order to progress in the program. Failure to earn a C or higher in any course will result in dismissal from the program.
- **Support Resources:** Remediation resources are available to support students in meeting academic and clinical standards; however, these resources are not a substitute for consistent effort and engagement. Resources may include tutoring, library study materials, and consultation with instructors. Students who do not meet minimum academic or clinical competency requirements must complete remediation in accordance with Dental Hygiene Program policies prior to reassessment.
- **Standards and Functional Abilities:** Students are responsible for reviewing the necessary abilities required to complete the dental hygiene program. (see pg. 38-40)
- **Screening Requirements:** All admitted students must pass a background check and drug screening within 60 days prior to starting the cohort. Students with a record of any felony convictions and a selection of misdemeanor convictions will not be accepted into the dental hygiene program (see appendix). If a student **has a change** to their criminal background status after admission, they are required to report that to the dental hygiene department immediately. Failure to do so will result in dismissal from the program. The dental hygiene department reserves the right to update a criminal background check during the program if there is a concern about a student's status. (Background check fees are the responsibility of the student.)

- **Advanced Standing:** The program does not admit advanced standing; students may not enter beyond the first semester regardless of prior coursework or clinical experience.

Selective Admissions – Ranking will be based on the GPA of pre-program courses, GPA in Biology and DHY 102/103, HESI Admission Assessment Exam score, current dental credentials, and completion of at least 50% of pre-program courses at North Central Michigan College.

Selective Admission Point System (Maximum 100 Points) 5 Criteria

1. **Pre-Program GPA (30 points max)**
   3.75–4.00 = 30 pts
   3.50–3.74 = 27 pts
   3.25–3.49 = 24 pts
   3.00–3.24 = 21 pts
   2.75–2.99 = 18 pts
   2.50–2.74 = 15 pts
   Below 2.50 = Not eligible
2. **Biology & DHY Courses (20 points max)**
   Courses: BIO prerequisites, DHY 102, DHY 103 (minimum grade B- required).
   A = 5 pts per course | B+ = 4 pts | B = 3 pts | B- = 2 pts
3. **HESI Admission Assessment Exam (40 points max)**
   90–100% = 40 pts
   85–89% = 36 pts
   80–84% = 32 pts
   75–79% = 28 pts
   70–74% = 24 pts
   Below 70% = 0 pts
4. **Additional Credentials (5 points max — select one)**
   Registered Dental Assistant (RDA) = 5 pts
   Certified Dental Assistant (CDA) = 4 pts
   National Entry Level Dental Assistant (NELDA) = 2 pts
   NCMC Fast Track Dental Assistant Certificate = 2 pts
5. **NCMC Coursework Completion (5 points max)**
   Completed at least 50% of pre-program courses at NCMC = 5 pts

Upon acceptance into the program, students must provide documentation of the following additional requirements**:**

- **Proof of current American Heart Association CPR/BLS certification** that includes hands-on training and use of AED; must remain current throughout the program.
- **Drug-Free Environment Policy -** The Dental Hygiene Program maintains a zero-tolerance policy for drug or substance misuse in labs, classrooms, and clinical sites. Students must provide proof of a negative 10-panel drug screen (amphetamines, barbiturates, benzodiazepines, cocaine, cannabis, methadone, methaqualone, opiates, oxycodone, phencyclidine, propoxyphene) within 60 days prior to program entry. Additional or random screenings may be required by the Program Director or Dean, especially if impairment is suspected. Refusal to take a requested drug test will be considered a positive test and result in immediate dismissal. A positive result, refusal, or falsification will result in dismissal. Students are responsible for the cost and scheduling of screenings. NCMC's Drug-Free Policy and counseling resources are available in the online Student Handbook.
- **Current immunization record**, including: annual TB test; up-to-date MMR, Td/Tdap,

Varicella, and Hepatitis B; annual influenza and COVID vaccination, or a signed waiver.

- A **physical examination** completed within six months prior to entry into the final two-year portion of the Dental Hygiene Program is required. The examination must include medical clearance confirming the student's ability to safely perform the physical requirements of dental hygiene practice.
- **Proof of health insurance** or signed waiver of coverage
- **The Dental Hygiene Program uses Viewpoint Screening** to review and track program requirements, such as CPR/BLS certification, immunization records, drug screening, and background checks. By ordering through the department-provided link, you authorize NCMC and clinical sites to access your records. Students are responsible for completing and maintaining all requirements before each semester (and annually where applicable). Failure to remain current may result in loss of clinical participation or dismissal. Requirements are subject to change with written notice.

Dental Hygiene Program: Curriculum and Course Descriptions

The curriculum is designed to build upon previous learning, with knowledge and skills progressing from simple to complex throughout the program. Admission criteria ensure that all students enter the core program with a common foundation. The Dental Hygiene program is structured as a three-year, full-time program. The first year consists of two full semesters of required pre-program courses, which may be completed over multiple semesters on either a part-time or full-time basis. However, students may not be accepted into the core dental hygiene sequence until all pre-program courses are successfully completed, and final grades are posted. Pre-program coursework must be current: foundational courses within the last 10 years, and Biology and Dental Hygiene pre-program courses within the last 5 years.

First Semester courses – Fall semester – (*Pre-Program*)

CEM 101	Fundamentals in Chemicals
ENG 111	English Composition
COM 170	Interpersonal Communication
PSY 161	Introduction to Psychology
BIO 235	General Anatomy and Physiology I

DHY 102 Dental Hygiene Profession: This course provides an overview of ethical principles, legal responsibilities, and infection control practices in dental hygiene. Students will explore professional codes of ethics, patient rights, HIPAA standards, scope-of-practice regulations, and safety standards, including OSHA and CDC guidelines. Emphasis is placed on ethical decision-making, legal accountability, and foundational infection prevention concepts essential for clinical readiness and entry into dental hygiene programs. Observation in a dental office is required as part of this course.

Second Semester Courses – Winter Semester – (*Pre-Program*)

SOC 171	Introduction to Sociology
HE 200	Nutrition
BIO 226	Microbiology
BIO 236	General Anatomy and Physiology II

DHY 103 Dental Anatomy: This course introduces the basic anatomy of the head, neck, and oral cavity with a focus on tooth form, function, numbering systems, and occlusion. Students will learn the names and relationships of primary and permanent teeth, jaw positions, and key anatomical landmarks. Hands-on activities include drawing or carving anatomically accurate molars and incisors to reinforce tooth morphology and develop manual dexterity. This course provides essential preparation for students entering dental hygiene or dental assisting programs.

First Semester Core DHY Courses – Fall Year One (DHY Program)

DHY 110 Radiography and Oral Imaging Lecture and Lab - This course provides dental hygiene students with foundational knowledge and clinical instruction in the principles and techniques of dental radiography, with an emphasis on digital imaging. Students will gain proficiency in acquiring diagnostic-quality intraoral and extraoral digital radiographs using contemporary equipment and software while adhering to radiation safety and infection control standards. Core concepts include radiation physics, biological effects, exposure techniques, radiographic anatomy, and interpretation fundamentals. Although clinical practice is limited to digital systems, students will also learn the theoretical principles of film-based radiography to support a comprehensive understanding of radiographic techniques. The course addresses quality assurance protocols and legal/ethical considerations in radiographic practice.

DHY 111 Medical Assessment and Emergency - This course provides foundational knowledge and practical skills for conducting comprehensive medical assessments and responding to medical emergencies in the dental setting. Emphasis is placed on obtaining and evaluating health histories, recognizing systemic conditions that may impact dental care, and implementing protocols for the prevention and management of medical emergencies in the dental setting.

DHY 120 Oral, Head and Neck Anatomy - This course provides an introduction to oral, head, and neck anatomy, with an emphasis on foundational anatomical knowledge essential for clinical and dental contexts. Students will gain familiarity with basic anatomical terminology and key landmarks. The course covers the development and structural organization of the oral cavity and associated regions, while also including instruction on the human skeletal, muscular, vascular, lymphatic, and nervous systems as they relate to the head and neck.

DHY 140 Dental Hygiene Concepts and Principles - This course introduces the fundamental concepts, principles, and skills essential to the practice of dental hygiene. Emphasis is placed on the professional roles and responsibilities of the dental hygienist, ethical and legal foundations, evidence-based decision-making, and patient-centered care. Students will learn the theoretical framework for comprehensive dental hygiene care, including infection control, patient assessment, operator positioning, instrumentation, communication, and self-care instruction. Building on prior knowledge of general nutrition, this course emphasizes the application of nutritional principles to support oral health, disease prevention, and patient education. It serves as the didactic foundation for DHY 141, where students apply these concepts in a simulated clinical environment.

DHY 141 Dental Hygiene Pre-Clinic Lab - This course introduces students to the foundational clinical skills required for dental hygiene practice in a simulated setting. Emphasis is placed on infection control procedures, patient positioning, instrument identification and handling, ergonomics, and the development of basic instrumentation techniques using typodonts and simulation units. Students will apply theoretical knowledge from the companion lecture course to perform assessments, demonstrate

manual dexterity, and begin the development of clinical judgment. Successful completion of this course prepares students to begin patient care in DHY 146 Dental Hygiene Clinic I.

Second Semester Core DHY Courses – Winter Year One (DHY Program)

DHY 122 Dental Embryology and Histology - This course explores the development, microscopic structure, and gross anatomy of the oral cavity and associated structures, emphasizing their clinical relevance to dental hygiene practice. Students will learn the developmental processes of the face, oral cavity, and teeth; identify key histological and anatomical landmarks; and analyze how abnormalities in development or structure affect patient care.

DHY 145 Dental Hygiene Theory I- This course advances the student's application of the dental hygiene process of care, emphasizing treatment planning, documentation, and patient management. Students will explore recall systems, risk assessment, and communication strategies for delivering effective, patient-centered care to diverse populations. Ethical and legal principles are integrated throughout to support evidence-based decision-making and professional responsibility. The course builds on foundational skills in infection control, instrumentation, and health education, preparing students for more complex clinical interactions.

DHY 146 Dental Hygiene Clinic I - This introductory clinical course provides first-year dental hygiene students with foundational experience in delivering preventive oral healthcare under faculty supervision. Emphasis is placed on the application of the dental hygiene process of care—including assessment, diagnosis, planning, implementation, evaluation, and documentation (ADPIED) —while developing competency in instrumentation, infection control, patient communication, and professionalism. As a companion to DHY 145 Dental Hygiene I Theory, the course reinforces ethical practice, evidence-based decision-making, and clinical reasoning through direct patient care. Weekly clinical topics are organized as flexible skill-building themes, adapting to patient presentation and supporting progressive competency development.

DHY 150 Periodontics I - This foundational course introduces the principles of periodontology with a focus on the etiology, diagnosis, and initial management of periodontal diseases as they relate to dental hygiene practice. Students will explore the structure and function of the periodontium, disease processes, microbial influences, and host response. Emphasis is placed on risk assessment, prevention, early recognition, Staging and Grading, and nonsurgical treatment of periodontal conditions through evidence-based care. This course provides biomedical and clinical knowledge essential for patient-centered decision-making in oral health care.

DHY 160 Pharmacology for Dental Hygiene - This course introduces fundamental concepts of pharmacology as applied to dental hygiene practice. Emphasis is placed on understanding drug classifications, mechanisms of action, and the pharmacologic agents most encountered in dental care, including analgesics, anesthetics, antibiotics, cardiovascular drugs, and medications for systemic conditions. Students will develop the ability to interpret prescription and over-the-counter medications, identify potential oral and systemic side effects, and apply this knowledge to clinical dental hygiene care planning.

Third Semester Core DHY Courses – Summer Year One (DHY Program)

DHY 132 Dental Materials - This course introduces the properties, uses, and clinical applications of dental materials relevant to dental hygiene practice. Emphasis is placed on material selection, manipulation, safety, and the hygienist's role in preventive and restorative care. Students will engage in both lecture and hands-on learning to competently handle impression materials, cements, gypsum products, esthetic materials, and related products. The course supports the development of clinical decision-making and patient education skills based on evidence-based standards and professional guidelines.

DHY 148 Dental Hygiene Theory II - This course refines and expands students' application of the dental hygiene process of care through advanced clinical theory and practice. Emphasizing patient-centered treatment planning, documentation, and interdisciplinary collaboration, the course introduces more complex clinical interactions across diverse populations, including pediatric and medically compromised patients. Students will gain focused experience in preventive pediatric care, including the application of sealants, silver diamine fluoride (SDF), and homecare instruction tailored to children and caregivers. Ethical and legal concepts, communication strategies, and evidence-based decision-making are emphasized throughout the course.

DHY 149 Dental Hygiene Clinic II - This clinical course provides intermediate dental hygiene students with supervised hands-on experience delivering care to pediatric, adult, geriatric, and medically compromised patients. Students apply the dental hygiene process of care through patient assessment, diagnosis, planning, implementation, evaluation, and documentation. Emphasis is placed on pediatric preventive strategies including sealant placement, silver diamine fluoride (SDF) application, and caregiver instruction. Ethical and legal standards, critical thinking, and interprofessional collaboration are integrated into case management.

DHY 210 Dental Hygiene Case Review and Presentation - This course develops students' ability to assess clinical data and formulate evidence-based, patient-centered dental hygiene diagnoses. Emphasis is placed on integrating subjective and objective findings, applying the ADPIED process, documenting with SOAP (Subjective, Objective, Assessment, Plan) notes, and planning individualized care. Case-based learning prepares students for clinical practice and board examination.

DHY 230 Management of Dental Pain - This course prepares dental hygiene students to safely and effectively manage dental pain using local anesthesia and nitrous oxide/oxygen sedation, in accordance with Michigan practice regulations. Emphasis is placed on pharmacology, patient assessment, administration techniques, and the prevention and management of complications. Students will engage in simulations and gain clinical experience by administering anesthetics to peers and patients under supervision, with a focus on evidence-based, patient-centered care and professional standards.

Fourth Semester Core DHY Courses – Fall Year Two (DHY Program)

DHY 220 Oral Pathology - This course provides foundational knowledge in the identification and interpretation of pathological conditions affecting the oral and maxillofacial regions. Emphasis is placed on recognizing normal versus abnormal findings, describing lesions accurately, and understanding disease processes relevant to clinical dental hygiene care. Students will develop diagnostic reasoning skills, apply evidence-based approaches, and learn when to refer patients for further evaluation.

DHY 240 Dental Hygiene Theory III - This course integrates ethical and legal foundations of dental hygiene with advanced applications of the dental hygiene process of care. Students explore professional conduct, decision-making models, licensure, and regulatory compliance while refining skills in periodontal assessment, advanced instrumentation, and documentation using ADPIED and SOAP (Subjective, Objective, Assessment, Plan) models. Emphasis is placed on evidence-based care, ethical principles, and patient communication to promote safe, competent, and accountable practice. Complements DHY 241 Dental Hygiene III Clinic for applied learning.

DHY 241 Dental Hygiene Clinic III - This clinical course builds on theory-based foundations to advance application of the dental hygiene process of care. Under supervision, students provide preventive and therapeutic services for patients across the lifespan, with emphasis on periodontal assessment, treatment planning, advanced instrumentation, and SOAP documentation (Subjective, Objective, Assessment, Plan). Learning focuses on refining accuracy, efficiency, clinical judgment, and professional communication while upholding ethical, legal, and evidence-based practice standards.

DHY 250 Periodontics II - This advanced course develops clinical reasoning and critical thinking in the management of periodontal patients. Students will focus on diagnosis, risk assessment, treatment planning, and evaluation of surgical and nonsurgical therapies. Through analysis of complex cases and evidence-based strategies, students will formulate individualized care plans that integrate biomedical science, clinical skills, and ethical decision-making within comprehensive dental hygiene practice.

Fifth Semester Core DHY Courses – Winter Year Two (DHY Program)

DHY 232 Dental Specialties & Special Patient Populations - This course introduces dental hygiene students to specialized care considerations for patients affected by medical, psychological, behavioral, and social challenges. Through expert guest presentations, interactive case discussions, and application-based projects, students will develop clinical adaptability, ethical awareness, and interprofessional collaboration skills to address complex oral health needs. The curriculum emphasizes both clinical procedures and patient-centered communication strategies.

DHY 245 Dental Hygiene Theory IV - This course advances the dental hygiene process of care with emphasis on periodontal therapy, advanced instrumentation, and comprehensive SOAP documentation (Subjective, Objective, Assessment, Plan). Students refine skills in periodontal assessment, treatment planning, and maintenance using the ADPIED model, guided by evidence-based decision-making, ethical principles, and effective patient communication. Builds on all prior program coursework and complements DHY 246 Dental Hygiene IV Clinic for direct patient care application.

DHY 246 Dental Hygiene Clinic IV - This final clinical course integrates knowledge and skills from previous semesters as students provide comprehensive dental hygiene services. Emphasis is placed on advanced periodontal therapy, complex treatment planning, and precise SOAP documentation using the ADPIED model. Students design and evaluate treatment plans, apply evidence-based interventions, and practice interprofessional collaboration through referrals, while refining clinical judgment, adapting care for diverse and medically complex patients, and upholding ethical, legal, and professional standards in preparation for entry into practice.

DHY 260 Community Dental Health - This course develops the knowledge and skills necessary for planning, delivering, and evaluating community-based oral health initiatives. Students will assess the oral

health needs of diverse populations, identify influencing social and cultural determinants, and design evidence-based strategies to improve outcomes. Emphasis is placed on program planning, implementation, and evaluation in non-traditional and public health settings. Students will apply professional communication, ethical decision-making, and cultural competence while engaging with community partners. Participation may require evening, weekend, or holiday commitments for outreach events or service-learning experiences.

DHY 270 Dental Hygiene Practical Applications - This comprehensive course synthesizes the knowledge and skills acquired throughout the dental hygiene curriculum, emphasizing their application in preparation for professional practice. Using simulated scenarios, non-patient exercises, and role-play, students enhance clinical decision-making, efficiency, and communication. Special attention is devoted to ethical and legal considerations, practice management, HIPAA compliance, insurance coding, and career development, including employment preparation and exploration of career pathways.

The column "HRS" shows how many hours a week are spent in lecture – lab - clinic for each course.			
PRE-PROGRAM FALL	HRS	CREDIT	CONTACT
CEM 101 Fundamentals in Chemicals	3-3-0	4	6
DHY 102 Dental Ethics, Law, and Safety	1-0-0	1	1
ENG 111 English Composition	3-0-0	3	3
COM 170 Interpersonal Communication	3-0-0	3	3
PSY 161 Introduction to Psychology	3-0-0	3	3
BIO 235 General Anatomy and Physiology I	3-2-0	4	5
SEMESTER TOTAL		**18**	**21**
PRE-PROGRAM WINTER			
DHY 103 Dental Anatomy	1-0-0	1	1
SOC 171 Introduction to Sociology	3-0-0	3	3
HE 200 Nutrition	3-0-0	3	3
BIO 226 Microbiology	3-2-0	4	5
BIO 236 General Anatomy and Physiology II	3-2-0	4	5
SEMESTER TOTAL		**15**	**17**
DENTAL HYGIENE PROGRAM SEMESTER COURSE SEQUENCE			
DHY PROGRAM SEMESTER 1 FALL Year One			
DHY 110 Radiography and Oral Imaging Lecture and Lab	2-3-0	4	5
DHY 111 Medical Assessment and Emergency	1-2-0	2	3
DHY 120 Oral, Head and Neck Anatomy	2-2-0	3	4
DHY 140 Dental Hygiene Concepts and Principles	3-0-0	3	3
DHY 141 Dental Hygiene Pre-clinic Lab	0-6-0	3	6
SEMESTER TOTAL		**15**	**21**
DHY PROGRAM SEMESTER II WINTER Year One			
DHY 122 Dental Embryology and Histology	3-0-0	3	3
DHY 145 Dental Hygiene Theory I	2-0-0	2	2
DHY 146 Dental Hygiene Clinic I	0-0-12	4	12

DHY 150 Periodontics I	3-0-0	3	3
DHY 160 Pharmacology for Dental Hygiene	2-0-0	2	1
SEMESTER TOTAL		**14**	**22**
DHY PROGRAM SEMESTER III SUMMER Year One			
DHY132 Dental Materials	2-2-0	3	4
DHY 148 Dental Hygiene Theory II	2-0-0	2	2
DHY 149 Dental Hygiene Clinic II	0-0-10	3	10
DHY 210 Dental Hygiene Case Review and Presentation	2-0-0	2	2
DHY 230 Management of Dental Pain	2-1-0	2	3
SEMESTER TOTAL		**12**	**21**
DHY PROGRAM SEMESTER IV Fall Year Two			
DHY 220 Oral Pathology	3-0-0	3	3
DHY 240 Dental Hygiene Theory III	2-0-0	2	2
DHY 241 Dental Hygiene Clinic III	0-0-12	4	12
DHY 250 Periodontics II	2-2-0	3	4
SEMESTER TOTAL		**12**	**21**
DHY PROGRAM SEMESTER V WINTER Year Two			
DHY 232 Dental Specialties and Special Patient Populations	2-0-0	2	2
DHY 245 Dental Hygiene Theory IV	2-0-0	2	2
DHY 246 Dental Hygiene Clinic IV	0-0-12	4	12
DHY 260 Community Dental Health	1-1-0	2	2
DHY 270 Dental Hygiene Practical Applications	3-0-0	3	3
SEMESTER TOTAL		**13**	**21**
PRE-PROGRAM TOTALS		33	38
DENTAL HYGIENE CORE COURSE TOTALS		66	106
DENTAL HYGIENE PROGRAM TOTALS		**99**	**144**

PROGRAM EXPECTATIONS

Study Habits: Success in dental hygiene school requires consistent effort; ***there are no shortcuts***. Attending class, completing readings, and doing your own preparation are essential. Use your textbooks actively (highlight, annotate, draw diagrams) and take thorough notes to connect lectures with readings. Discover your learning style. Visual learners might use colors and diagrams, while auditory learners may benefit from reading aloud or creating rhymes and acronyms.

Plan dedicated study time (about two hours for every hour of class/clinic) and use gaps between classes productively, especially in the library. Balance is important, schedule time off to recharge. Take advantage of available resources such as tutoring, study groups, faculty office hours, test remediation, practice tests, and library materials.

Keep in mind that working while in the program can be very difficult due to the rigor of dental hygiene courses. Rely on faculty and campus support, including tutors and resilience coaches, to help manage academics alongside personal responsibilities.

Late Assignments: No Assignments will be accepted late without the instructor's approval and proof of extenuating circumstances, such as documented illness or family emergency. Approved late assignments submitted up to 24 hours late will incur a 10% per-day deduction. Assignments more than three days late will not be accepted.

Clinical Performance Policy

1. **Standards of Safe Practice:** Students must demonstrate competence in providing patient care safely, effectively, and within the scope of dental hygiene practice. Clinical behaviors should reflect current evidence-based standards, ethical conduct, and patient-centered care.
2. **Assessment of Clinical Competence:** Performance is assessed on an ongoing basis through instructor observation, competency evaluations, feedback, and completion of required clinical activities. Progression depends on consistent demonstration of clinical competence.
3. **Student Accountability for Learning and Professional Growth:** Students are expected to actively engage in their own learning by seeking feedback, applying critical thinking, reflecting on clinical experiences, and demonstrating commitment to professional development.
4. **Mandatory Clinical Attendance:** Attendance at all clinical sessions is required. Absences may jeopardize the ability to meet clinical competencies and could jeopardize completion in the program.
5. **Clinical Preparation Standards:** Students must arrive on time, in proper clinical attire, and prepared with all required instruments, equipment, and knowledge of assigned patients. Lack of preparation may result in dismissal from clinic for the day and will impact evaluation.
6. **Unprofessional or Unsafe Conduct:** Behaviors that compromise patient, staff, or students' safety; infection control, ethical standards, or professional decorum will not be tolerated. Such conduct may result in immediate removal from the clinical setting and require remediation or disciplinary action.

Safe Practice Definition: Demonstrates application of theoretical knowledge, critical thinking, and technical skills in the clinical setting while maintaining patient safety, professional conduct, and compliance with institutional and accreditation standards.

Unsafe Practice Definition: Any behavior or performance in the clinical setting that compromises patient safety, violates professional or ethical standards, or fails to meet institutional and accreditation requirements. (relates to physical and emotional safety)

Critical Error and Unsafe Practice Pattern Definitions

CRITICAL ERRORS			
Critical Error Category	**Definition (Critical Error Standard)**	**Common Examples (not exhaustive)**	**Immediate Result**
Standard Precautions /	Breaks in Standard Precautions that create a realistic risk of cross-	Missed required hand hygiene; contaminated gloves touch clean supplies/EHR	Stop procedure; possible removal from patient care; **no credit** for

CRITICAL ERRORS			
Critical Error Category	**Definition (Critical Error Standard)**	**Common Examples (not exhaustive)**	**Immediate Result**
Infection Control	contamination or exposure and are not immediately corrected, or any high-risk infection control violation.	repeatedly; failure to change gloves/mask as required; improper operatory disinfection; improper handling/transport of contaminated instruments; unsafe sharps handling (e.g., unsafe recapping, leaving sharps unsecured).	session/competency; remediation required.
Sharps & Exposure Safety	Any action that creates a significant risk of needlestick/cut/exposure to students, patients, faculty, or staff.	Recapping with two hands; passing unsheathed sharps unsafely; leaving sharps on tray unprotected; improper disposal or overfilled sharps container use; failure to report/manage an exposure per protocol.	Stop procedure; exposure protocol initiated; incident documentation; remediation; **no credit** for session/competency
Patient Identification / Correct Procedure / Correct Site	Errors that risk treating the wrong patient or performing care at the wrong site/procedure.	Treating the wrong patient; wrong tooth/quadrant/area; performing a procedure not planned/authorized; incorrect medical alert ignored, leading to the wrong plan.	Immediate halt; faculty takeover as needed; incident documentation; remediation; **no credit** for that session/competency.
Informed Consent / Guardian Authorization	Initiating or continuing care without required consent/authorization per policy and law.	Proceeding without informed consent; incomplete consent discussion; missing guardian authorization for minors; failure to re-confirm consent when care plan changes.	Stop procedure until corrected; documentation required; **no credit** for that session/competency.
Documentation Integrity (Honesty)	Any falsification, misrepresentation, or unethical alteration of clinical records.	Charting treatment not completed; backdating notes to appear timely; forging/altering signatures; copying forward findings without re-evaluation; Recording vitals not taken; perio chart entered without measurement.	Immediate investigation per program policy; **automatic failure** of the session/competency and disciplinary action or dismissal from the DH program.
Documentation Accuracy (Safety-Critical Errors)	Documentation errors that directly impact patient care decisions or legal record quality.	Missing medical alerts; incomplete notes that omit critical information; missing required signatures.	Correction required; **no credit** if safety/legality is compromised; remediation and re-check.

CRITICAL ERRORS			
Critical Error Category	**Definition (Critical Error Standard)**	**Common Examples (not exhaustive)**	**Immediate Result**
Medical History Review / Vital Signs / Risk Management	Failure to assess or act on medical risk appropriately, creating an unsafe condition for care.	Not reviewing/updating medical history; missing required vitals; ignoring contraindications (e.g., uncontrolled BP); failing to consult faculty on significant findings.	Stop care; referral/medical clearance as needed; incident documentation and remediation required; **no credit** for that session/competency.
Medical Emergency Response / Patient Monitoring	Failure to respond promptly and appropriately to changes in patient status or a medical emergency.	Delayed notification of faculty; failure to activate emergency protocol; leaving unstable patient unattended; improper response to syncope/hypoglycemia/anxiety event per training.	Immediate halt; emergency protocol; documentation; **no credit** for that session/competency; mandatory remediation.
Radiography Safety & Policy Compliance (if applicable)	Unnecessary exposure risk or violation of radiography supervision/retake policy.	Taking images without required approval/supervision; repeated avoidable retakes; ignoring selection criteria; infection control failures with sensors/holders; retakes outside policy.	Procedure stopped; images reviewed; incident documentation; **no credit** for that session/competency and remediation.
Unsafe Clinical Technique Causing Preventable Harm	Technique creates or is likely to create injury, and/or student fails to stop and seek faculty support when harm occurs or risk is high.	Continuing instrumentation with poor control; repeated tissue trauma after coaching; ignoring patient pain/distress signals; unsafe fulcrum/instrument management; leaving instruments in mouth while turning away.	Stop procedure; faculty intervention; documentation; remediation; **no credit** for that session/competency and remediation.
Professional Conduct / Fitness for Duty	Behavior or condition that compromises safe care, patient rights, or clinic operations.	Working while impaired; refusal to follow safety-related instruction; unprofessional conduct with patient; confidentiality breach.	Removal from clinic activity; documentation; remediation/disciplinary process; **no credit** for that session/competency and remediation may lead to dismissal from the DH program.

UNSAFE PRACTICE PATTERN				
Area	**What a single non-critical issue may look like (usually coachable)**	**What becomes an unsafe practice pattern (trend that triggers intervention)**	**Examples of "pattern" indicators**	**Program Response**
Standard Precautions / Infection Control	One contamination lapse that is immediately recognized and corrected (e.g., student stops, regowns/regloves, re-disinfects).	Repeated contamination breaks in the same session or across sessions, or inability to maintain clean-to-dirty flow without frequent correction.	Touching drawers/keyboard with contaminated gloves repeatedly; repeatedly forgetting hand hygiene steps; repeated barrier failures after being corrected.	Written warning and remediation plan; increased supervision; may lead to dismissal from the DH program.
Sharps Safety	One awkward sharps handling moment corrected before risk escalates.	Recurrent unsafe sharps habits despite instruction, creating repeated exposure risk.	Repeated attempts at two-handed recapping; leaving sharps unguarded multiple times; repeated failure to dispose properly.	Immediate stop when seen; incident note; remediation; restriction from procedures until process is reassessed.
Assessment & Data Accuracy	Minor charting errors corrected during faculty review.	Consistent inaccuracies or omissions that undermine clinical decision-making.	Repeated periodontal chart errors; routinely missing risk factors; repeated incomplete medical history review; vital signs missed in more than one session.	Remediation, retraining, and reassessment.
Clinical Judgment / Treatment Planning	Needs coaching to sequence care or prioritize problems.	Repeated poor judgment that creates safety concerns or inappropriate care decisions.	Continues without recognizing contraindications; repeatedly fails to consult faculty when required; same planning errors on multiple patients.	Remediation
Instrumentation Control & Tissue Safety	Occasional tissue nick with immediate stop, disclosure, and correction.	Ongoing tissue trauma or unsafe instrument control despite feedback.	2 or more areas of preventable trauma; repeated poor fulcrum/adaptation; continuing when patient is in pain; faculty must	Stop care; remediation + skills lab reassessment; **no credit** for that session/competency

UNSAFE PRACTICE PATTERN				
Area	**What a single non-critical issue may look like (usually coachable)**	**What becomes an unsafe practice pattern (trend that triggers intervention)**	**Examples of "pattern" indicators**	**Program Response**
			repeatedly intervene to prevent injury.	
Patient Comfort & Communication	Patient education is incomplete or awkward, but not unsafe.	Recurrent communication problems that compromise care or patient rights after correction.	Repeatedly fails to explain procedures/aftercare; dismisses patient discomfort; repeated incomplete informed consent discussions.	Coaching + documentation; may require observed patient interactions and reassessment. If behavior continues after remediation, student may be dismissed from DH program.
Time Management / Clinic Flow	Runs behind 1-2 times while still safe.	More than 2 instances of poor planning leading to unsafe shortcuts or incomplete care patterns.	More than twice fails to set up correctly before patient arrival; rushes through critical steps; or, more than once, leaves documentation incomplete due to time constraints.	Remediation with a structured time-management plan; may reduce case complexity temporarily; reassessment of readiness.
Documentation (timeliness/quality)	One late note corrected with reminder.	Late/incomplete documentation more than once or repeated missing required elements after instruction.	Repeated missing signatures, incomplete notes, copy-forward habits; corrections needed by faculty more than twice.	Documentation remediation
Radiography (if applicable)	A positioning error corrected with coaching.	Avoidable errors leading to multiple retakes after having received coaching or policy noncompliance.	Consistently needs retakes across sessions; repeated infection control issues with sensors/holders; repeated failure to follow retake approval process.	Remediation + radiography reassessment; restricted from taking radiographs until competence is demonstrated.
Professionalism / Readiness	One minor professionalism	A pattern of unpreparedness	Repeated lateness/unpreparedness;	Remediation; and removal from clinic

UNSAFE PRACTICE PATTERN				
Area	**What a single non-critical issue may look like (usually coachable)**	**What becomes an unsafe practice pattern (trend that triggers intervention)**	**Examples of "pattern" indicators**	**Program Response**
	lapse corrected (e.g., forgot a supply).	or behaviors that compromise patient care and clinic operations.	repeated failure to follow directions; repeated boundary/communication concerns.	for the day if care is compromised.

Clinical Patient Care Experience Requirements to Graduate from the Program

These requirements represent minimum thresholds for patient experience. Students will exceed these minimums through ongoing patient care during each semester.	Winter 1st year DHY 146	Summer 1st year DHY 149	Fall 2nd year DHY 241	Winter 2nd year DHY 246	**Total by end of Program**
Total Clinic time per semester	12hrs	10hrs	12hrs	12hrs	
Child ≤ 11 yrs old	2	2	2	2	8
Adolescent 12-17 yrs old	1	2	2	2	7
Adult 18-59 yrs old	1	1	4	6	12
Geriatric ≥ 60 yrs old	1	1	2	2	5
Special Needs	0	1	1	1	3
Flex *(can be from any patient category in addition to minimum requirements)*	2	3	4	5	15
Total Min. Pts. per Semester	***7***	***10***	***15***	***18***	***50***
Calculus Class 1	3	4	6	7	20
Calculus Class 2	2	2	3	4	11
Calculus Class 3	0	0	2	3	5
Calculus Class 4	0	0	1	0	1
AAP Stage I	1	1	3	5	10
AAP Stage II	0	1	3	5	9
AAP Stage III	0	0	1	2	3
AAP Stage IV	0	0	1	1	2
FMX	2	1	2	2	7
Panorex	1	1	1	1	4
Bitewings set	3	2	3	4	12
Periapical problem focused	2	2	2	3	9
Intraoral camera full series	2	1	2	2	7
Intraoral camera problem focused	4	2	2	4	12

Program Policies

Medical Insurance - North Central Michigan College does not insure students against accidents or illness. It is strongly recommended that students have medical insurance coverage.

Injuries on Campus - Students are responsible for the cost of any treatment resulting from injury to themselves in the clinic, classroom, or lab. Injuries must be reported immediately to the Dental Hygiene Faculty.

Medical Emergency – NCMC Policy

- Call 9-1-1
- If qualified, administer first aid — if not, seek someone who is qualified
- Send someone to retrieve the AED
- Have someone call 439-6385 to notify Administration of the incident
- **Do not move victim** except to prevent further injury
- Stay with the victim until Law Enforcement/Emergency Medical Services arrive
- Get info as to what happened and name of the victim
- **As an official of the College, NEVER transport the patient to the hospital — they MUST go by ambulance, with a friend, or a family member.**
- Document (in the incident report) how the victim was transported

Liability Insurance

Students are recommended to carry professional liability insurance at their own expense throughout the program and are **required** to carry it once DHY 230 Management of Dental Pain has begun and throughout their final year in the program. The American Dental Hygiene Association can recommend affordable malpractice insurance carrier options. (Insurance Benefits from AMBA | ADHA) Students will be given a link to this site.

Human Trafficking Training

As of January 2022, all licensed healthcare professionals must complete training in identifying victims of human trafficking. This requirement will be met as a class during the Dental Hygiene Concepts and Principles course in the first semester of the program.

American Psychological Association (APA) Format

All formal written reports and papers will be written using APA format. The following links are recommended for APA formatting:

APA Style Introduction // Purdue Writing Lab – Students will be given a link to this site.

NCMC librarians are also available to help you with APA resources.

Code of Conduct

Dental hygienists are trusted and respected by the public they serve. This trust is protected by requiring members of the profession to adhere to the Code of Ethics for Dental Hygienists (ADHA, 2024). Dental hygienists are expected to be honest, responsible citizens in all aspects of life; professional, academic, and personal.

Entering the dental hygiene program is the first step toward joining the profession, and students are expected to uphold these same ethical standards. Students must demonstrate respect for the autonomy and dignity of all people, maintain confidentiality, and consistently exhibit the core values of nonmaleficence, beneficence, and justice.

Professional and Ethical Standards

The Code of Ethics for Dental Hygienists serves as the foundation for professional behavior throughout the program. General clinical guidelines and rules are provided in a separate section of this handbook, while specific practice guidelines are introduced in each clinical dental hygiene course and must be followed to ensure safe, ethical patient care. Honest and responsible conduct is expected in all settings.

Practicing dental hygiene in any unlicensed capacity may result in serious liability for the College and the program. Additionally, students who hold licenses or certifications in other allied health specialties may not practice under those credentials while functioning in the role of a dental hygiene student.

Student Complaint - Students accepted into the North Central Michigan College Dental Hygiene Program may file a complaint at any time they have a grievance or concern. The process is listed below.

The Program Director will review the complaint procedures with students during program orientation before the start of the first year, and again at the beginning of the second year, to ensure continued awareness and understanding.

Students may submit complaints anonymously by placing a written statement in a secure drop box located in the Dental Hygiene Clinic. The drop box is checked weekly by the Clinic Office Manager**,** who forwards all submissions to the Program Director for review. Alternatively, students may submit a complaint directly via email to the Clinic Office Manager or Program Director; include **complaint** in the subject line.

All complaints are logged, reviewed, and addressed by the Program Director, with documentation maintained in a secure file. Records of complaints and their resolutions are retained for CODA review and will be made available during site visits in redacted form.

ADEA General Expectations – The Dental Hygiene Program expects students to follow the professional guidelines expressed by the American Dental Education Association listed below: policyprofessionalism.pdf – Students will be given a link to this site.

The American Dental Education Association states that student professionalism is expected to demonstrate six key values:

- **Competence** – "Acquiring and maintaining the high level of special knowledge, technical ability, and professional behavior necessary for the provision of clinical care to patients and for effective functioning in the dental education environment."
- **Fairness** – "Demonstrating consistency and even-handedness in dealing with others."
- **Integrity** – "Being honest and demonstrating congruence among one's values, words, and actions."
- **Responsibility** – "Being accountable for one's actions and recognizing and acting upon the special obligations to others that one assumes in joining a profession."
- **Respect** – "Honoring the worth of others."
- **Service-Mindedness** – "Acting for the benefit of the patients and the public we serve, and approaching those served with compassion."

Clinical Attendance, Tardiness, and Absence Guidelines

Consistent attendance and timeliness are critical to student success, professional development, and safe patient care. Students must meet all clinical competencies to progress in the program.

Attendance Policy
Attendance and timeliness are essential professional behaviors and directly impact patient care. Students are expected to attend all assigned classroom, laboratory, and clinical experiences. Excessive absences, tardiness, or unprofessional behavior will result in dismissal from the program. Children are not permitted in these settings except when scheduled as dental clinic patients.

- **Absences:** One clinical absence per semester is allowed for illness or family emergency and must be made up during scheduled sessions after finals week or as arranged by the program. Each makeup will cost $50. A second absence results in a learning contract (see page 28); a third results in dismissal, with a written appeal possible to the Director of Dental Hygiene and the Dean of Nursing and Health Sciences and Public Safety. Absences are intended for illness/emergencies only; other absences are considered unprofessional.
- **Upscale Assessment Tracking:** If a student is present but does not have a patient, the time will be designated as "downtime" and documented in the Time Tracker within Upscale Assessment. The Clinic Lead Instructor or Dental Hygiene Program Director will provide a list of approved clinical tasks that may be completed during downtime. It is the student's responsibility to ask their section instructor to approve the task selected for that downtime. Students must record the specific activity completed during this period. All activities must be clinically related; working on assignments for other courses is not permitted. Students are required to remain for the entire clinic session. Unauthorized use of downtime will be recorded as an absence.
- **Tardiness/Early Departure:** All students are to be professional and report to class, clinic, and labs on time and remain until the class/clinic/lab is dismissed by the instructor.

Leaving more than 30 minutes early = one absence. Two instances of tardiness or leaving early = one absence.

- **Illness and Fitness:** Students who are ill must notify their clinical instructor by phone at least 2 hours before clinic (not by text or email unless specifically directed). A no-call/no-show may result in dismissal. A healthcare provider's clearance is required to return after illness or injury, unless waived by the instructor and/or Director of Dental Hygiene. The student is responsible for asking the instructor whether clearance will be required when they report being absent. Students may be removed from the clinic for illness, fatigue, unsafe behavior, suspected intoxication (including impairment from alcohol, prescription medications, or illicit drug use), or inadequate preparation; such removal counts as an absence.
- **Missed Tests:** Missing one test results in a **10% penalty** off the make-up test grade; a second missed test results in a **20% penalty** off the make-up test grade. No further make-up is allowed during that semester. Make-up must be arranged with the instructor and completed within one week. This policy applies to each semester as a whole, not to each course in the program. Catastrophic events (life-threatening emergencies, immediate family death, hospitalization, mandatory court appearance) may be appealed in writing to the Director, who will consult with the Dean.
- **Other Attendance Issues:** Children are not permitted in the classroom, lab, or clinic unless scheduled as patients. It is the student's responsibility to have alternate childcare plans in place to prevent missed classes.
- **Jury duty** may be accommodated unless it creates a prolonged absence; excusal is rare and must be approved by the Dean. If a student receives a Jury Duty notice, they need to contact their instructor and provide a copy of the summons as soon as they receive it, either in person or by email with "Jury Duty" in the subject line. The instructor will then help determine what arrangements need to be made. The best course of action is to write a formal letter to the court requesting that your jury duty be deferred until after graduation.
- **Inclement Weather:** If the Petoskey College Campus is closed, clinics are canceled. If it is necessary to cancel classes at any location, the administration will make every effort to notify the campus community by local radio, local TV stations, voluntary subscribed text alerts, and by posting notifications on the College website by 6:30 a.m. for day classes and 4:00 p.m. for evening classes. Please note that any location may remain open when others close. If closure is announced after arrival, students and instructors may proceed at their discretion. Missed clinics due to weather may be rescheduled at the Director's discretion.

Public Health-Related Instructional Changes

The College follows the guidance of the CDC, the State of Michigan, and the local health department in responding to public health concerns. If campus and/or clinical sites close, class sizes must be adjusted, or if other safety measures are required, courses may shift to online, hybrid, or flexible delivery. Students will be notified of changes as soon as possible. If courses are delivered partially or fully online, or if portions are conducted remotely (e.g., via Zoom), students are responsible for maintaining reliable internet access.

Requirements To Progress in the Program

1. Students must earn/maintain a minimum GPA of 2.5 and a grade of C (75%) or higher in all Dental Hygiene (DHY) courses to remain in the program; any grade below 75% will result in dismissal.
2. CPR/BLS must be kept current throughout the program and will need to be current for licensure by the State of Michigan. If the student takes a recertification course, it is their responsibility to ensure the new documentation is uploaded to Viewpoint to verify the student is current. If a student fails to keep their certification current, they will be unable to see patients in the clinic, resulting in dismissal from the program. Keep *all* certification cards for a future audit.
3. Flu vaccination is required annually by injection between September 1st and October 15th each school year. Documentation must be received by the Dental Hygiene Clinic supervisor by October 15th. Failure to comply with this requirement will mean the student is unable to see patients in the clinic and could result in dismissal.
4. If a student experiences a change in health status—such as illness, pregnancy, or surgery—an updated physical examination from their medical provider must be submitted for inclusion in the student's file.

Academic Integrity – Codes of Conduct

Students must uphold integrity in all coursework and clinical activities. Academic dishonesty is prohibited, including:

- Submitting work that is not your own (including AI use).
- Falsifying data or misrepresenting yourself online.
- Posting or sharing course materials or test questions.
- Cheating on assignments, quizzes, or exams (unauthorized notes, devices, collaboration, or exam materials).
- Sharing your work or helping others engage in dishonesty.

Consequences: Academic dishonesty is unprofessional conduct and may result in a zero on the assignment, course failure, or dismissal from the program.

Written Work and Plagiarism

In the Dental Hygiene Program, academic dishonesty includes plagiarism or the submission of work created in whole or in part by another person or artificial intelligence. Copying another student's work or published material without proper citation is prohibited. Direct quotes of five or more consecutive words must be in quotation marks with proper citation. Rephrased ideas must also be referenced, and repeated references are required if ideas span multiple paragraphs. All sources must be listed in the References section in accordance with current APA guidelines. To support academic honesty, faculty may choose to video record students during testing. Instructors use apps such as Turnitin Plagiarism Checker, Grammarly Plagiarism Checker, or similar tools to verify the authenticity of students' work.

Artificial Intelligence (AI) Use Policy

Students are expected to use AI tools responsibly, upholding academic integrity, professional

accountability, and patient safety. This policy applies to all coursework, labs, simulations, clinics, and online activities.

Permitted Use: AI may be used for brainstorming, summarizing, rephrasing, studying, or practicing NBDHE-style questions. Faculty may also assign structured AI activities to build critical thinking.

Prohibited Use: Students may not submit AI-generated work as their own, use AI on exams or independent assignments, input patient data into AI tools (HIPAA/FERPA), or rely on AI for clinical decision-making without faculty oversight.

Academic Integrity: Misuse of AI that constitutes plagiarism or dishonesty will face disciplinary action. Students must fact-check AI content, which may be inaccurate or biased.

Clinical/Simulation: AI is not permitted in clinical or simulation settings unless directed by faculty. All documentation and communication must reflect the student's own judgment.

Professionalism - Communication, Appearance and Behaviors – see Rubric page 52

Communication:

1. Communicate respectfully with faculty, staff, and peers.
2. Use email, phone, or face-to-face conversations (not texting, except in urgent cases or if the faculty has directed).
3. Follow the chain of command for addressing concerns (Instructor → Director → Dean → VP → President).
4. Check NCMC email and Brightspace daily.
5. Reply to faculty/staff within one business day.
6. Use proper grammar, spelling, and professional tone in all communications and coursework.

Appearance:

- Hair must be clean, well-groomed, conservatively colored, and neat. (A "messy bun" with hair stragglers is not considered professional or appropriate.) Hair must be worn off the shoulders and fastened to prevent it from falling in front of the shoulders and face. Hair apparel must be white, gray, black, or match the color of your hair. Extravagant hair accessories are not acceptable. Males are expected to keep their facial hair clean and neatly trimmed.
- Cosmetics should be minimal and promote a professional appearance. Perfume and scented body spray are not allowed in the clinical setting. Fingernails must be clean, smooth, and clipped to a length that does not extend beyond the fingertips. Artificial nails are not permitted in the clinical setting. Clear or very light-colored nail polish is acceptable if in immaculate condition.
- Large, costume, or gemstone jewelry is not allowed.
- **Earrings**: conservative post studs (≤3 mm) are acceptable; no hoops, dangles, or visible body piercings. Ear gauges must be dime-sized or smaller in natural skin color.

- **Rings**: one flat band only; raised or carved rings prohibited (wearing none is preferred).
- No bracelets, necklaces, or ankle jewelry.
- **Tattoos** that are healing must be covered, and coverings may not interfere with hand hygiene or aseptic technique; if they do, the student will be suspended from clinic until resolved, which may lead to dismissal. Visible tattoos must be covered using flesh-tone bandages, clothing, or tattoo cover. Students should be aware that acceptance of visible tattoos varies among dental employers.
- **Uniform Dress Code -** Dental Hygiene student uniforms are to be worn in all clinical, DHY simulation and lab settings. Instructors will inform students of uniform requirement changes. **A full uniform consists of:**
    - Black scrub top, black scrub pants and black warm-up Jacket/lab coat with high round neck and covers below the hips.
    - Pants must be full-length but not drag on the floor; jogger style is acceptable if no skin is exposed.
    - NCMC Round Patch (purchased through NCMC bookstore) must be neatly sewn on the left shoulder.
    - Full uniform must be clean and wrinkle-free.
    - Solid white, black, or grey undershirts (not required) must have a rounded, finished neckline. Long sleeved undershirts cannot take the place of long-sleeved warmup jacket/lab coats for proper personal protective equipment.
    - Safety glasses/PPE (personal protection equipment) must be worn in the clinical setting when there is potential for exposure to body fluids or as required by the facility rules for Standard Precautions.
    - Shoes must be solid (no colored patterns) white or black constructed of leather or vinyl (not cloth). Open-heeled and open-toed shoes are **not** permitted.
    - Dental Hygiene student Nametags (from The Trophy Care approx. $10) & NCMC picture IDs must be worn with uniforms at all times.
    - White or black socks or hosiery is required.
    - Uniforms may not be worn with sweaters, non-uniform shirts, or hoodies in the clinical setting.
    - Lab Coat/Warm-up jacket: R**equired** Lab coat must be clean and wrinkle-free. Must be black and the NCMC logo round patch (purchased from the NCMC bookstore) must be neatly sewn on the upper left shoulder.
    - A full uniform must be worn under the lab coat. Blue jeans, shorts, tennis shoes, flip-flops, short skirts, tank tops, halter tops, revealing camisoles, hip-hugger skirts, and slacks are not permitted.

Behaviors/Habits

Eating and Gum-Chewing - During laboratory and clinical courses gum chewing is not allowed. Eating is not allowed during simulation, laboratory, or clinical time. You must follow the guidelines regarding eating and drinking of each instructor for didactic courses.

Oral Care: Avoid Garlic, raw onion, or foods that leave strong residual odors for 24 hours before clinical experiences. Practice good oral hygiene habits. If drinking coffee before seeing patients, brush or rinse well to avoid mouth odor.

Simulation in Dental Hygiene Education

The **Clinical Simulation Laboratory (Sim Lab)** serves as a vital bridge between classroom instruction and patient care, allowing students to develop clinical skills, teamwork, and professional decision-making in a safe and controlled environment. All program and handbook policies apply within the simulation lab, and students are held to the same professional and clinical standards expected in the patient clinic.

Students must arrive on time, dressed in full clinical uniform, and prepared to participate. Proper infection control protocols must be followed at all times. The simulation lab must remain clean and organized; food and drinks are not permitted. Misuse of simulation equipment—including disclosing solutions, ink, or intentionally damaging equipment—will not be tolerated and may result in disciplinary action or dismissal from the program. Simulation equipment must remain within the lab, and all sharps must be disposed of in designated containers. Any damage or malfunction should be reported to an instructor immediately.
Clinical skills introduced in the Sim Lab become increasingly complex each semester and form the foundation for live patient care. Students must pass all competency evaluations for each dental hygiene skill in the simulation laboratory before performing the procedure in the clinical setting. Students will practice on mannequins, typodonts, and peers under faculty supervision.

Because some simulation materials and products may contain latex, students with known sensitivities or allergies must notify their instructor before participating in lab activities.

Latex Sensitivity Evaluation Sheet

	YES	NO	If yes, explain.
1. Have you ever had a problem with allergies, bronchitis (difficulty breathing), sinus problems, hay fever, eczema, hives, rash, allergic rhinitis (runny nose), or allergic conjunctivitis (swollen, red, watery eyes)?			
2. Have you ever had a strong allergic reaction (anaphylaxis) or other unexplained reactionduring a medical procedure?			
3. Have you ever had swelling, itching, or hives on your lips or around your mouth after blowing up a balloon?			
4. Have you ever had swelling, itching, or hives on your lips or around your mouth during or after a dental examination or procedure?			

5. Have you ever had swelling, itching, or hives following a vaginal or rectal examination or after contact with a diaphragm or condom?			
6. Have you ever had swelling, itching, or hives on your hands during or within one hour after wearing rubber gloves?			
7. Have you ever had a rash on your hands, which lasted longer than 1 week?			
8. Have you ever had swelling, itching, or hives after being examined by someone wearing rubber or latex gloves?			
9. Have you ever had swelling, itching, hives, runny nose, eye irritation, wheezing, or asthma after contact with any latex or rubber product?			
10. Has a physician ever told you that you have rubber or latex allergy?			
11. Are you allergic to any of the following: bananas, avocados, chestnuts, kiwi, papaya, figs, plums, nectarines, passion fruit, cherries, melons, tomatoes, celery, tape/Band-Aids, poinsettia plant, elastic bandages, or clothing with elastic or spandex?			
12. Are you presently on beta-blockers?			

Latex Sensitivity Questionnaire - Department of Dental Hygiene Latex Allergy Release:

Latex sensitivity and allergy have grown as a healthcare concern in recent years. Since several products used in health care are made of latex (gloves, syringes, tubing, etc.), it is imperative that all applicants to a health care program be made aware of this concern. Individuals with latex sensitivity may not be able to meet the objectives required to complete a given program or successfully find employment in health care. Researchers suggest that early recognition and diagnosis of latex sensitivity may prevent the evolution of the sensitivity to more severe symptoms.

There are several high-risk groups who are more likely to become sensitized to latex. The enclosed questionnaire can help you determine if you may be allergic to latex.

I understand that if I have a latex allergy/sensitivity I must notify the Dean and I understand that, if I am latex sensitive, it is MY RESPONSIBILITY to pay the cost of any test to confirm the latex sensitivity. I also understand that if I suspect or know that I may be or that I am allergic to latex, it is my responsibility to inform the faculty and Dean. Again, I understand that it would be my responsibility to pay the cost of any test to confirm the latex allergy. I also understand that such sensitivity may prohibit me from continuing as a student in the dental hygiene program.

I hereby release North Central Michigan College, its employees, teaching affiliates, and members of its Board of Trustees from all liability that may be incurred because of participating in educational experiences in the dental hygiene program.

Student Name Printed _____

Student Signature _____ Date _____

Bloodborne Pathogens Exposure Policy

Students must immediately report any potential exposure to blood or other potentially infectious materials to supervising clinical faculty. An exposure incident report must be completed, and appropriate medical evaluation and follow-up must be obtained in accordance with institutional, OSHA, and CDC guidelines. All exposure incidents are handled confidentially and documented to ensure student safety and regulatory compliance.

Bloodborne Pathogens and Body Substance Exposure

1. **Bloodborne Pathogens Exposure Warning**
   Dental hygiene students are at risk of exposure to bloodborne pathogens (including, but not limited to, hepatitis B, hepatitis C, and HIV) through contact with blood, saliva, or other potentially infectious materials during patient care. While the program provides training in infection control and requires compliance with CDC, OSHA, and Association for Dental Safety (ADS) standards, no environment can be made completely risk-free. By participating in clinical and laboratory experiences, students accept this inherent risk. Students are required to follow all infection control protocols, wear appropriate personal protective equipment (PPE), and immediately report and document any exposure incident according to program policy. Failure to comply with safety standards may result in disciplinary action and increases the risk of serious illness. The student will report an exposure immediately to the clinical instructor.
2. Any student/faculty who sustains an injury or exposure while performing in the clinical setting will be offered immediate follow-up as outlined in the employee exposure guidelines of the Dental Hygiene Clinic. All paperwork as described in the agency guidelines will be completed by the student under the supervision of the clinical instructor.
3. The clinical instructor will fill out the College Incident Report found online in the "My Apps" portal under "Incident Report."
4. Students may be responsible for any expenses incurred as a result of the exposure.
5. Faculty are covered under the College's health plan for expenses incurred.
6. Students and faculty are responsible for continuing with follow-up and treatment as required by the Bloodborne Pathogens exposure plan for the Dental Hygiene program.

QUICK RESPONSE FLOWCHART - **Bloodborne Pathogens Exposure – What To Do Immediately:**

1. **Stop the procedure safely**
2. **Perform first aid immediately**
    - Wash with soap and water
    - Flush eyes at eyewash station
3. **Notify supervising faculty immediately**
4. **Complete BBP Exposure Incident Report**
5. **Follow faculty direction for medical evaluation**
6. **Comply with all follow-up testing and care**

Delayed reporting may increase health risk and violate clinic policy.

Radiation Safety Policy

In accordance with the American Dental Association's updated radiography safety guidelines (February 1, 2024), the use of lead aprons or thyroid collars is no longer recommended for dental imaging. The North Central Michigan College's Dental Hygiene Program follows CDC recommendations and the ALARA (As Low As Reasonably Achievable) and ALADA (As Low As Diagnostically Acceptable) principles to minimize unnecessary radiation exposure while ensuring diagnostic effectiveness.

Patients may sometimes express reluctance to have radiographs due to concerns about cancer risk. It is important that patients are informed that the Dental Hygiene Program follows all American Dental Association, Centers for Disease Control and Prevention, and manufacturer's guidelines for safe radiography, including:

- All exposures are justified in relation to patient benefit.
- Radiographic exposure is limited to what is necessary for diagnosis and treatment.
- Patient and provider doses remain well below allowable safety limits.

By consistently applying these guidelines, students will practice safe, evidence-based radiography and promote patient confidence in dental care. All radiographic equipment is inspected and certified by the State Department of Radiation Safety and follows Michigan state codes.

Administration of Topical Anesthetic, Local Anesthetic, and Nitrous Oxide

Instructor and Dentist Oversight:

- Students must have all anesthetic agents (topical, local, or nitrous oxide) approved by the clinical instructor and Supervising Dentist prior to administration.
- Pain-control agents (topical anesthetic, local anesthetic, and/or nitrous oxide) must be documented accurately and documentation verified with the instructor.

Student Performance

The administration and faculty of the dental hygiene program reserve the right to request the withdrawal, at any time, of any dental hygiene student whose health, conduct, attitude, or clinical

aptitude do not meet accepted standards of professional dental hygiene. A course failure may be given to a student who demonstrates unsafe or inappropriate practice at any time during the semester. Unsafe practice is defined as being inadequately prepared to deliver competent dental hygiene care to a patient/client, or an action or knowledge deficit capable of causing harm or injury to the well-being of the client. In such a situation, the student would be prohibited from completing their clinical course.

Critical Incident Report
A critical incident formally documents a concern related to a student's safe practice criteria (see pages 15-20). Critical incident reports are assigned by faculty and must be completed by the assigned date. Failure to do so may result in dismissal from the clinical component of dental hygiene education until it is complete, and the instructor has had time to evaluate the student's ability to deliver safe care. A delay in clinical training could lead to dismissal from the dental hygiene program.

Learning Contract
Students must, without exception, consistently provide safe and appropriate care to patient/clients throughout their clinical experience. Failure to do so may result in the receipt of a clinical learning contract or dismissal.
A student will receive a learning contract if they fail to meet the Criteria for Safe Practice. Students will be assigned a learning contract and/or dismissed from the program at any time during the program if the care given (or planned care) jeopardizes patient safety.
If a student demonstrates behaviors that require a second learning contract, they may be dismissed from the program.

Assigned Learning Contract
1. A Learning Contract is initiated at the time the student demonstrates any of the following unmet critical elements (e.g., Patient-Centered Care, Safe and Effective Care, Interprofessional Collaboration and Teamwork, Patient Education and Health Promotion, Critical Thinking and Evidence-Based Decision Making, and Professionalism and Ethical Responsibility) and they are documented.
2. The instructor outlines a concise plan of improvement, including expected student outcomes.
3. The plan includes specific goals for the student, with timelines and conference deadlines for student feedback.
4. The faculty member discusses the learning contract with the student, and both sign the form.
5. The contract is distributed as follows:
    a. Student's file (original)
    b. Student (copy)
    c. Faculty (copy)
    d. Director (copy)
6. It is the **student's responsibility** to inform subsequent instructors of their contract and to follow the terms of the contract as written. Students who do not meet the requirements of the learning contract will be subject to dismissal.
7. The faculty and the Director reserve the right to modify the clinical assignment of a student who is under contract.
8. Failure to resolve the student's unsatisfactory performance will result in dismissal from the program.

Identification and Documentation of Students with Impaired Practice
Faculty and program administration have a professional responsibility to identify, document, and refer students suspected of impaired practice, while maintaining confidentiality. Identification is based on observed patterns of behavior, such as policy violations, alcohol use, cognitive or motor impairment, slurred speech, absenteeism, tardiness, unstable behavior, self-harm, suicidal thoughts or actions, or inconsistent academic or clinical performance. Documented concerns become part of the student's academic record, and students with unstable behaviors will be restricted from classroom or clinical participation until resolved. The Director or Dean may require medical or mental health clearance before a student is permitted to return, and students may be subject to random drug screening when impairment is suspected.

Drug-Free Environment Policy Statement - ***The dental hygiene program has zero tolerance for illicit drug and substance abuse or misuse in the practice lab, classroom, and clinical locations.***
The student must present evidence of a Negative 10-panel drug screen (Amphetamines, Barbiturates, Benzodiazepines, Cocaine Metabolites, Marijuana Metabolites, Methadone, Methaqualone, Opiates, Oxycodone, Phencyclidine, and Propoxyphene) within 60 days prior to entering the program. Additional drug screenings can be required by the program Director or Dean throughout the program. Random drug screening will be required when impaired practice is suspected. If results return with any positive results student will be dismissed from the program.
Refusal to complete the drug screen or falsification of records will result in immediate dismissal from the program. The cost and arrangement of any drug screen is the student's responsibility. North Central Michigan College Drug Free Policy and resources for alcohol or substance abuse counseling may be accessed in the NCMC student handbook online.

Cell Phones, Recording and Cameras
Cameras, cell phones, and recording are not to be used at any time during laboratory, or clinical settings unless the faculty allows it. The inappropriate use of cameras, recording, or cell phones may be a HIPAA violation and could result in dismissal from the dental hygiene program, fines, and legal issues. Cell phones must be silenced during class and left at the front of the classroom. If a student wishes to record a lecture that would not otherwise be made available by the instructor after initial presentation, the student must request the instructor's permission to record.

Social Media Guidelines
Students are expected to use social media responsibly and maintain professionalism. Concerns about the program should be addressed directly with faculty, not posted publicly. Sharing or storing patient information or images on social media or personal devices is a violation of HIPAA and may result in academic discipline and legal consequences. Students must use their NCMC email for all official correspondence and may not connect their "student.ncmich.edu" address with social media. Upholding these standards protects patient privacy, program integrity, and professional trust.

HIPAA Compliance
HIPAA is a federal law protecting the privacy and security of health information in all forms (paper, electronic, and verbal). HIPAA policy training is covered in DHY 102 and will be referred to throughout the program. Students must not disclose any personal health information (PHI) obtained in their role as a student dental hygienist. Removing names alone does not de-

identify PHI—details such as age, gender, diagnosis, treatment, or dates may still identify a patient. Inappropriate disclosure of PHI is a HIPAA violation and may result in disciplinary action (including dismissal), as well as possible civil or criminal penalties, fines, or imprisonment. Students are expected to always safeguard patient privacy. HIPAA for Professionals | HHS.gov – Students will be given a link to this site.

Grading Scale for Dental Hygiene Program Courses

Percent %	Letter Grade
94-100	A
90-93	A-
87-89	B+
84-86	B
80-83	B-
77-79	C+
75-76	C
70-74	C-
67-69	D+
64-66	D
60-63	D-
59	E

Grading Point Scale for Patient Care Assessments in Clinic – Competency level expectations are scaffolded by clinic level. Higher competency is required in each successive clinic semester; therefore, percentage benchmarks increase each term to ensure students earn comparable point values.

Care Assessment/Implementation Grading Scale from Upscale Assessment				
	Clinic I	Clinic II	Clinic III	Clinic IV
Stain/Supra **Detection**	≥79% = 5 pts 68-78% = 4 pts 57-67% = 3 pts <56% = 2 pts	≥86% = 5 pts 75-85% = 4 pts 64-74% = 3 pts <63% = 2 pts	≥93% = 5 pts 82-92% = 4 pts 71-81% = 3 pts <70% = 2 pts	≥100% = 5 pts 89-99% = 4 pts 78-88% = 3 pts <77% = 2 pts
Subgingival Calculus **Detection**	≥79% = 6 pts 68-78% = 5 pts 57-67% = 4 pts <56% = 3 pts	≥86% = 6 pts 75-85% = 5 pts 64-74% = 4 pts <63% = 3 pts	≥93% = 6 pts 82-92% = 5 pts 71-81% = 4 pts <70% = 3 pts	≥100% = 6 pts 89-99% = 5 pts 78-88% = 4 pts <77% = 3 pts
Stain/Supra **Removal** at Final	≥85% = 7 pts 74-84% = 6 pts 63-73% = 5 pts <62% = 4 pts	≥90% = 7 pts 80-89% = 6 pts 70-79% = 5 pts <69% = 4 pts	≥95% = 7 pts 84-94% = 6 pts 73-83% = 5 pts <72% = 4 pts	≥100% = 7 pts 90-99% = 6 pts 78-89% = 5 pts <77% = 4 pts
Subgingival Calculus **Removal** at Final	≥79% 68-78% 57-67% <56%	≥86% 75-85% 64-74% <63%	≥93% 82-92% 71-81% <70%	≥100% 89-99% 78-88% <77%
Subgingival *Calculus Class* Point Assignment	C1 = 10, 8, 6, 4 C2 = 12, 10, 8, 6	C1 = 10, 8, 6, 4 C2 = 12, 10, 8, 6 C3 = 14, 12, 10, 8 C4 = 16, 14, 12, 10	C1 = 10, 8, 6, 4 C2 = 12, 10, 8, 6 C3 = 14, 12, 10, 8 C4 = 16, 14, 12, 10	C1 = 10, 8, 6, 4 C2 = 12, 10, 8, 6 C3 = 14, 12, 10, 8 C4 = 16, 14, 12, 10

Posting of Grades: Students will typically have access to their scores on quizzes, exams, and assignments within 24 hours, with some more comprehensive assignments taking up to one week to appear on Brightspace. Clinical performance will be available within 24 hours of patient experiences, and students have access to those scores in the UpScale Assessment software.

Review of Exams
Instructors determine how exams are reviewed, either in class or individually. Exams may be reviewed within 14 business days of the exam date; after this period, review is not allowed. Students may not copy, record, or retain exam questions. Final exams are not available for review.

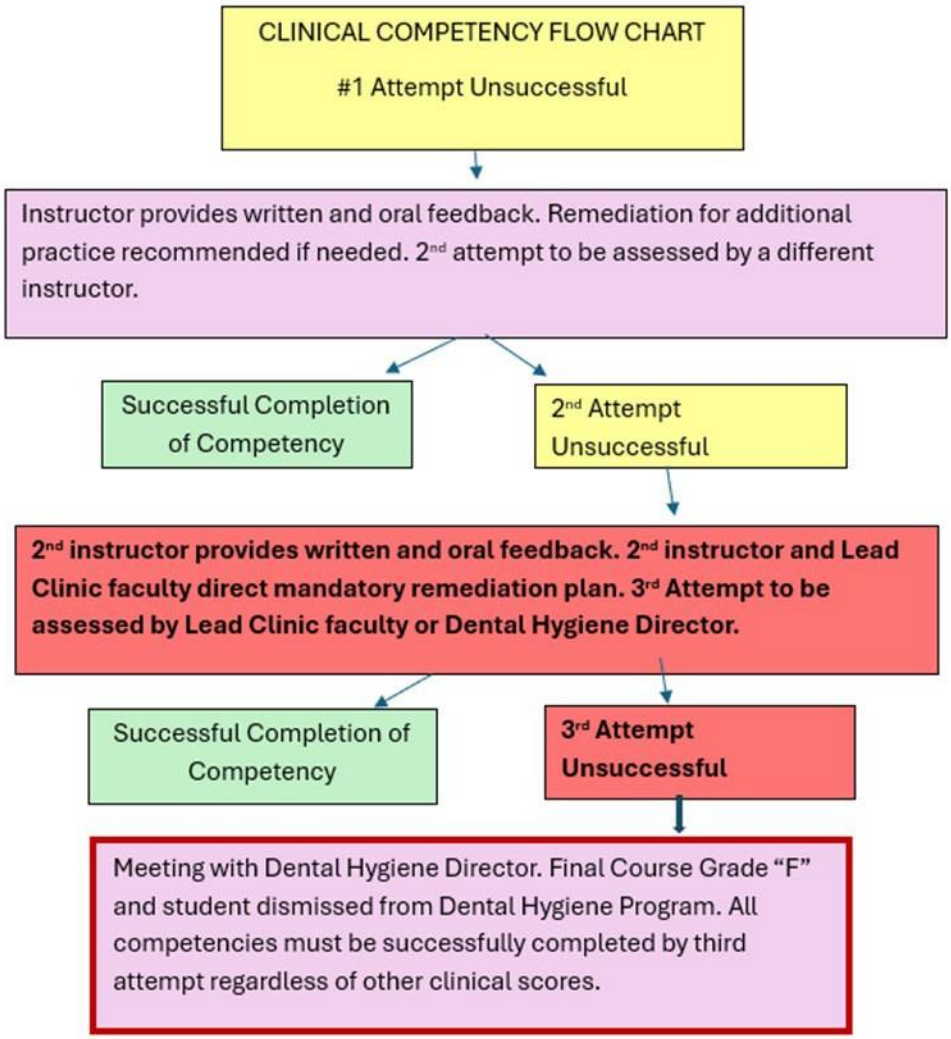
What is academic remediation? Remediation means assisting students in achieving the expected competencies. Your proctored assessment results will indicate which topics need review; use them as a study guide. Your instructor may require that you return to campus to take a remediation test or practice clinical skills in a proctored environment. Remediation is intended to assist students and cover valuable information missed on the initial test(s).

Remediation Plan:
Dental Hygiene courses present new and sometimes challenging terminology and concepts, which may be difficult to understand. Students who receive a failing grade (below 75%) on any quiz or assignment must meet with the course instructor to review the material. The purpose of these meetings is to identify the reason for the failing grade, discuss more effective ways to prepare for testing on the information, clarify the correct answers, and ensure the student understands the material before testing for the midterm, final exam, or the NBDHE (National Board Dental Hygiene Exam). It is the student's responsibility to schedule a meeting during the instructor's office hours.

Skill Evaluation and Processes Remediation Plan:
If a student does not pass a competency with the minimum required score on the first attempt, they may retake it up to two additional times. When a competency requires a retake, the student can only receive the minimum passing score, regardless of their performance on the retake. Before reattempting any competency, remediation with an instructor is required. Remediation is intended to strengthen the student's knowledge and clinical skills necessary to achieve competency. This process provides constructive feedback, emphasizing both strengths and areas for improvement to support student growth and success. All competencies must be passed at the minimum required score to progress in the Dental Hygiene Program.

Faculty Liaison - First-year and second-year students will each elect a student or up to three people to represent their concerns at dental hygiene faculty and Advisory Board meetings. The liaison represents concerns raised by the class.

Mentoring Program - Second-year dental hygiene students will be paired with first-year students to serve as peer mentors. Mentors provide guidance related to study strategies, time management, clinic preparation, and navigating program expectations. The mentoring relationship promotes peer support, professional development, and student success during the transition into the program. Faculty introduce the mentoring program during orientation and remain available to provide guidance and oversight as needed.



Dismissal from the Dental Hygiene Program

The student will be dismissed from the dental hygiene program for the following reasons:

- Behavior resulting in the initiation of a second learning contract
- Unsafe behavior that jeopardizes patient/clients, other students, faculty or the student
- Inability to perform dental hygiene tasks after repeated instruction
- Absences in violation of the attendance policy outlined on page 23
- Positive drug screens without a medical exception

Any student accumulating multiple actual or potential errors, critical incidents or endangering the health or affecting the quality of life will be subject to disciplinary action by the faculty. The disciplinary action will include a request to the Dean for withdrawal of the student from the dental hygiene program.

Factors to consider during dismissal from the dental hygiene program could be unsafe practices or unethical behavior that occur at any time during the dental hygiene program. Errors are cumulative from previous semesters. All discipline is cumulative and is considered in the decision to dismiss a student.

Readmission & Re-entry Policy

Readmission to the Dental Hygiene Program is not guaranteed and will be considered only once per student, based on available space. Ethical dismissals (cheating, gross patient misconduct, or other violations of professional standards) permanently exclude a student from re-entry.

- **Medical Leave:** A student in good standing who takes a medical leave may apply for readmission one time. A written request and action plan must be submitted to the Director of Dental Hygiene by **April 1** for fall return or **July 1** for winter return.
- **First-Year Failure:** A student who fails any DHY course in the first year must reapply with the next applicant pool and will be ranked with new candidates. If readmitted, all DHY courses must be repeated at the student's expense.
- **Second-Year Failure:**
    - Failure of **one course**: With Director and Dean approval, the student may return at the point of failure if space allows. All courses in the returning semester will need to be retaken at the student's expense.
    - Failure of **more than one course**: The student must reapply as a new applicant and restart the program from the beginning.
- **Co-Requisites:** DHY theory and clinical courses are co-requisites and must be successfully completed together; failure of one requires repeating both.
- **Major Health or Family Issues:** Students must meet with the Director and/or Dean prior to leaving the program to establish a written re-entry agreement.
- **Letter of Intent:** Any student seeking readmission or re-entry must submit a letter of intent to the Director by the deadlines listed above, including a detailed plan for success. Incomplete or missing plans will disqualify the request.
- **Clinical Skills Testing:** The student will receive a checklist of mandatory skills they must complete in the lab prior to the beginning of the semester they are re-entering in. If they are unable to demonstrate competency, they will not be allowed to re-enter the program. Those students who are not granted permission to re-enter the program during semesters 2, 3, and 4 may reapply to the dental hygiene program by submitting a general dental hygiene program application for fall admission. They will be ranked along with all other applicants and if acceptance is granted, the student will be required to take all of the classes in the dental hygiene curriculum, including those they may have previously passed.

Tutoring and Testing Center (TTC)

Because of the complexity of the program, additional resources are provided to assist you. These resources include the Tutoring and Testing Center (TTC), Dental Hygiene faculty, the Director of Dental Hygiene, the Dean of Nursing, Health Sciences and Public Safety, tutors, and advisors. Dental Hygiene tutors are available free of charge. Your dental hygiene faculty advisor, as well as other faculty members, are available for consultation during office hours by appointment. PLEASE USE THE RESOURCES PROVIDED!

The following procedures apply to dental hygiene students when taking proctored tests in the Tutoring and Testing Center (TTC). Students must comply with TTC procedures such as identification, logging in and out, and storage of personal possessions. Testing takes place during the hours of 8:30 am and 5:00 pm Monday through Friday.

1. Once a student has started taking a test, they will not leave TTC for <u>any reason</u> until the test is completed and submitted to TTC staff. If the student has a question regarding an item on the test, the instructor is to be called by a TTC staff member.
2. Once the test is submitted to a TTC staff member, students may not have access to the test <u>for any reason.</u>
3. Students will be always monitored directly by a TTC staff member or proctor.

4. Students are to ask a TTC staff member to initial any erasures on the Scantron® form. If erasures are not initialed, they may be scanned as wrong. Students will not be given credit for those answers.
5. It is the student's responsibility to be aware of these procedures and comply with them. Any deviation from the procedures will be considered academic dishonesty.
6. If scrap paper is used during the test it must be provided by and returned to the TTC staff.

Disability Accommodations
If you have a disability status requiring accommodation you should provide notification and documentation to the Tutoring and Testing Center documenting your approved accommodations. Notify each instructor promptly at the beginning of each semester that you have turned in your information to TTC. The instructor will discuss how to best help you succeed in the course and help TTC devise a plan to meet your needs.
Arrangements may be made, but require extra planning time (i.e., we need to meet at the beginning of the semester when materials are ordered, not just before the exam).

Student Redress
Final Course Grade Appeal Process –Initiated by Student
If a student believes a final course grade is incorrect or unfair, the following process applies:
1. **Notify the instructor** in writing (email acceptable) within 10 working days of grade release. The instructor (or Director if unavailable) will respond in writing within 10 working days.
2. If unresolved, submit a written appeal to the Director of Dental Hygiene within 10 working days of the instructor's decision. The Director will respond within 10 working days. If the Director assigned the grade, the appeal moves directly to step #3.
3. If unresolved, submit a written appeal to the Dean of Nursing, Health Sciences and Public Safety within 10 working days. The Dean will respond within 10 working days.
4. If unresolved, submit a written appeal to the Vice President of Academic Affairs & Student Success within 10 working days of the Dean's decision. The Vice President may request additional information and will respond within 10 working days.
5. If still unresolved, submit a written appeal to the President of the College within 10 working days of the Vice President's decision. The President will respond in writing within 10 working days. The President's decision is final.

Note: Exam/assignment grades and individual test questions may not be contested. Final grades are never rounded in the Dental Hygiene Program.

Standards and Functional Abilities
The standards and functional abilities necessary for participation in clinical assignments in the dental hygiene program are listed below. The College may allow for the implementation of reasonable accommodations for students with documented disabilities. Please contact the Tutoring and Testing Center at 231.348.6693 for further information.

Standard	Functional Abilities	Examples in Dental Hygiene Practice
Visual acuity sufficient to obtain accurate readings and provide safe care	Ability to see fine detail, distinguish color variations, and interpret radiographs, charts, and diagnostic data	Reading periodontal charts, dental radiographs, and electronic health records; distinguishing calculus, caries, and soft tissue changes;

		visualizing small instruments in the oral cavity
Hearing and speech sufficient to understand and be understood; ability to communicate clearly and accurately - both written and oral	Effective oral communication; ability to hear instructions, patient concerns, and safety signals; accurate documentation	Communicating clearly with patients and dental team; responding to suction/equipment alarms; hearing patient responses even with a mask on; using verbal and non-verbal communication with diverse patients
Adequate olfactory perception	Able to distinguish different smells	Applies to clinical safety, patient care, and diagnostic awareness - Chemicals, alcohol, smokers, halitosis; all may affect treatment recommendations
Mobility and ergonomic control sufficient to maneuver safely in confined clinical spaces	Ability to maintain controlled body positioning, ergonomics, and precise movement in confined areas while providing patient care.	Working within the limited oral cavity using instruments and handpieces. Maintaining neutral posture while accessing posterior teeth. Performing instrumentation in tight interproximal spaces without causing tissue trauma. Safely positioning yourself and equipment in compact operatories or clinical environments.
Interpersonal skills and sensitivity sufficient to maintain a professional, cooperative climate	Ability to build rapport, show empathy, and work collaboratively	Establishing trust with patients; educating patients on oral health behaviors; working as part of a dental team; adapting communication for children, elderly, or patients with special needs
Emotional/psychological stability to function under stress and adapt to change	Maintaining composure, problem-solving, and exercising sound judgment in rapidly changing situations	Managing patient anxiety or medical emergencies; adapting to changing schedules; responding appropriately in stressful patient care situations
Free of illegal use of controlled substances or drugs	Compliance with legal and ethical standards	Safe and responsible patient care
Physical strength, stamina, and mobility sufficient to perform patient care safely	Ability to sit/stand for long periods, maintain neutral posture, and safely operate equipment	Sitting or standing chairside for extended periods; bending, twisting, and reaching to access patient oral cavity; transferring or adjusting patients safely in dental chairs
Fine motor skills and hand-eye	Steady hands and controlled	Performing scaling, polishing,

coordination sufficient for precise, safe instrumentation	movement of small instruments in confined spaces	probing, sealant placement, and local anesthesia with accuracy; manipulating instruments, handpieces, and small materials
Tactile ability sufficient to assess oral structures	Discerning subtle differences in textures, shapes, and firmness through touch	Detecting calculus deposits, overhanging restorations, or irregularities in tooth surfaces using an explorer or probe
Reading comprehension and cognitive ability to process and act on data	Ability to understand, integrate, and apply written and verbal information	Interpreting medical/dental histories, clinical notes, treatment plans, and evidence-based research
Immunizations as recommended by CDC	Protection from communicable diseases	Proof of required immunizations prior to patient contact
Infection control compliance	Ability to tolerate PPE (gloves, mask, gown, eye protection) for extended periods	Wearing gloves, masks, and eyewear throughout clinical sessions; following OSHA/CDC protocols
Ability to tolerate mask/respirator use	Wearing PPE for long periods if required	Providing patient care in compliance with public health guidelines

Clinical Overview - Critical elements and student competencies for all clinicals are as follows:
Dental Hygiene Program – Student Competencies

Competency 1: Patient-Centered Care
Graduates will provide individualized dental hygiene care using the dental hygiene process of care to promote oral and overall health across diverse populations.

Competency 2: Safe and Effective Care
Graduates will deliver dental hygiene services that reflect current standards of practice, infection control, and risk management to protect patients and providers.

Competency 3: Interprofessional Collaboration and Teamwork
Graduates will work effectively with patients, faculty, peers, and other healthcare professionals to coordinate and improve patient outcomes.

Competency 4: Patient Education and Health Promotion
Graduates will educate and motivate patients and communities to prevent disease and improve oral and systemic health.

Competency 5: Critical Thinking and Evidence-Based Decision Making
Graduates will apply scientific knowledge, clinical judgment, and research evidence to make informed decisions in patient care.

Competency 6: Professionalism and Ethical Responsibility
Graduates will demonstrate accountability, ethical practice, and professional behavior in all aspects of dental hygiene care.

Examples of Assessment Tools used for Clinical Competency Evaluation

- **Clinical evaluations:** Faculty observation of patient care using standardized rubrics.
- **Skill check-offs:** Demonstrations of instrumentation, infection control, radiography, and anesthesia.
- **Case studies & treatment planning:** Application of critical thinking and evidence-based practice.
- **Patient & community education projects:** Oral health instruction, outreach, and health promotion activities.
- **Written assignments:** Reflections, literature reviews, and ethical scenario analyses.
- **Professionalism measures:** Attendance, communication, teamwork, and adherence to policies.

CLINIC ASSISTANT RESPONSIBILITIES – Rotations are assigned each session

Student: _____ Date: _____ AM _ PM _

Start-up:

1. **Laundry:** Follow clinic protocol
2. **Vacuum/Air compressors:** _____ turn on vacuum buttons
   _____ turn on Air compressor buttons
3. **Radiography:** _____ turn on computers in Rad rooms – log on
   _____ turn on the pan machine
   _____ perform quality assurance radiography test on **Tuesday** a.m.
4. **Central Sterilization:**
   _____ turn on lights; including the under cabinets lights
   _____ Clean/disinfect counters, cabinets, and sterilizers with Disinfectant Wipes
   _____ refill supplies: gloves, paper towels, sterilization pouches, gauze, cotton tipped applicators, etc.

Autoclaves

___ empty Autoclaves, verify that Sterilization Steam Indicator shows proper sterilization has taken place and everything is dry before moving instruments into the cabinets; if indicator shows a failed load, leave in place and notify Clinic manager and/or Lead Instructor.
_____ **check water levels & fill to max level**
_____ load with items ready to be sterilized; when full, add Sterilization Steam Indicator as instructed and start sterilization cycle (Every **Tuesday** run a biologic spore test in each autoclaves first batch) Follow instructions to process the test and log results.

Ultrasonic

_____ fill the ultrasonic with water, add cleaner. (Get a new Ultrasonic Cleaning Monitor to run with the holder in the bottom of the ultrasonic, set to run for 12 minutes. Verify the results of the correct ultrasonic function and note on the log form. Test **Wednesday** only.)

5. **Oxygen Tank** – (DH Clinic III and IV only)Test PSI of Oxygen tank and update log

6. **Ongoing**:_____ continually monitor sterilization needs; loading and running any items accumulated during clinic. When time is available, help with periodontal chart recordings, etc., in the clinic.

End of Day: ***YOU ARE THE LAST STUDENT TO LEAVE***

7. **Central Sterilization:**

Autoclaves

_____ empty Autoclaves verify that Sterilization Steam Indicator on pouches show proper sterilization has taken place and everything is dry before moving instruments into the cabinets; if indicator shows a failed load, leave in place and notify Clinic Manager and/or Lead Instructor.

_____ **check water levels & fill as needed**

_____ load Midmarks with items ready to be sterilized

_____ start sterilization cycles so that all machines are loaded and running

Ultrasonic: _____ drain and rinse the ultrasonics

General: _____ Empty garbage cans in sterilization into large bags; leave closed bags by back door

_____ clean and disinfect countertops

_____ turn off lights; including the under cabinets lights

8. **Radiography:** _____ shut down computers in scanning room

_____ turn off the pan machine

9. **Cubicles:** _____ check cubicles for cleanliness, no trash left and big trash bags are by back door and tied closed

_____ confirm that chair units are turned off and placed in end of day position

10. **Vacuum/Air compressors** - verify ultrasonic is fully drained, rinsed, and wiped out as needed

_____ turn off vacuum buttons

_____ turn off air compressor buttons

11. Be sure the **Laundry** procedure has been completed for the day.

Signed: _____

Faculty or Clinic Manager Signature

Learning Objectives: By serving as the Clinical Assistant, the student will be able to:

1. Demonstrate professional responsibility and clinic preparedness.

- Ensure all clinic start-up procedures are performed according to established protocols, including laundry, equipment activation, and radiography preparation.
- Exhibit punctuality, organization, and readiness to support clinic operations.

2. Apply infection control and sterilization protocols consistent with Standard Precautions.

- Perform disinfection of surfaces and equipment using approved products, maintaining aseptic technique.
- Execute proper sterilization workflows, including loading/unloading autoclaves, verifying steam indicators, and documenting biological and mechanical monitoring results.
- Operate the ultrasonic cleaner safely, perform weekly cleaning-function tests, and record outcomes accurately.

3. Manage instrument processing and supply maintenance.

- Maintain appropriate inventory of sterile supplies (e.g., pouches, gauze, cotton applicators, gloves).
- Identify when additional sterilization cycles are needed and initiate cycles independently.
- Troubleshoot and report failed indicators or equipment malfunctions to faculty according to protocol.

4. Demonstrate competency in clinical equipment operation and safety checks.

- Safely operate essential clinic equipment, including vacuum systems, air compressors, radiography computers, panoramic units, and oxygen tank PSI checks.
- Properly shut down equipment following manufacturer and clinic protocols.

5. Maintain radiography readiness and quality assurance.

- Prepare radiography rooms for patient care, including start-up of computers, panoramic units, and required QA testing (weekly or as scheduled).
- Document QA outcomes and communicate concerns promptly.

6. Support peers and promote efficient patient care flow.

- Assist chairside with tasks such as periodontal chart recording or other supportive duties when sterilization demands allow.
- Contribute to smooth clinic functioning, especially during periods of high patient volume.

7. Demonstrate environmental maintenance and end-of-day procedures.

- Perform thorough end-of-day duties, including cleaning, equipment shutdown, waste management, and confirming cubicle readiness for the next clinic session.
- Verify sterilization cycles are started, supplies are replenished, and laundry tasks are completed.

8. Document and communicate accurately using clinic logs and forms.

- Complete all required log entries (oxygen tank PSI, ultrasonic test, spore test, sterilization indicators, etc.) with accuracy and professionalism.

- Notify faculty or the Clinic Manager of any deviations, equipment concerns, or failed tests following reporting protocols.

9. Demonstrate accountability and adherence to clinic policies.

- Recognize that the Clinical Assistant is the final student to leave the clinic and ensure all responsibilities are fully completed.
- Uphold ethical and professional behaviors consistent with program and CODA expectations.

Club Membership and Professional Organizations

Membership in the American Dental Hygienists' Association as a student is recommended. Students enrolled in an accredited dental hygiene program can receive the benefits for an affordable rate. Check out rates and benefits at Student Chapters - ADHA Students are able to choose a one or two-year membership and can include the National Board Review (NBR) course bundle if they choose.

The following are additional dental organizations that are available to you either as a student or as a graduate of the program: Students will be given links to these sites.

- Association for Dental Safety (ADS, formerly called OSAP) ADS - Association for Dental Safety
- American Public Health Association (APHA) American Public Health Association
- American Dental Education Association (ADEA) Home | ADEA
- Michigan Oral Health Coalition Advancing Oral Health Policy in Michigan
- National Dental Association (NDA) National Dental Association | Oral Health Equity Among People of Color
- LARA – Licensing and Regulatory Affairs – Bureau of Professional Licensing https://stateofmichigan-my.sharepoint.com/personal/thelena3_michigan_gov/Documents/Desktop/Licensing Guides/New Rules/New Licensing Guides/Good to go/Ready/RDH_10_23
- www.michigan.gov/healthlicense

Graduation Requirements and Procedures

To earn the Associate of Applied Science (AAS) in Dental Hygiene, students must successfully complete a minimum of 99 credit hours in required coursework with a minimum cumulative GPA of 2.5. A grade of C (75%) or higher is required in all DHY courses and examinations.

Students must also successfully complete all clinical competencies, patient care requirements, and program requirements as defined by the Dental Hygiene Program.

Students are responsible for ensuring that their academic records, transcripts, and transfer credits are accurate and meet graduation requirements.

Graduates must be awarded the AAS degree before they are eligible to take the National Board Dental Hygiene Examination (NBDHE) and the ADEX clinical licensing examination.

Students who fail or withdraw from a DHY course resulting in dismissal from the program may apply for re-entry. If approved, the student must repeat all courses within the semester in which they re-enter the program, including both didactic and clinical components. Re-entry is limited to one time, must occur within one year, and is not guaranteed due to limited program capacity.

Pinning and Graduation Ceremonies

The Dental Hygiene Pinning Ceremony recognizes the accomplishments of dental hygiene graduates. The ceremony is held in May following final examinations and occurs on the same day as the college commencement exercises. All graduates are strongly encouraged to participate.

During the ceremony, each student is pinned by a person of their choosing and receives a dental hygiene stole to wear during commencement exercises later that day. Attire for the pinning ceremony should be professional and appropriate for the occasion.

Following the pinning ceremony, graduates are expected to participate in the college commencement ceremony, where the Associate of Applied Science in Dental Hygiene degree is formally conferred. Family and friends are welcome to attend both events. Caps and gowns are provided by North Central Michigan College at no cost to graduates.

Participation in commencement provides an opportunity to celebrate the successful completion of the dental hygiene program with faculty, classmates, family, and friends.

2025-2026 Estimated Cost of Dental Hygiene Program

Dental Hygiene program costs are based on 66 program credit hours and 106 contact hours*

*Price does not include pre-program requirements 33 credit hours or 38 contact hours.

**Tuition Costs are estimates and subject to change.

Description	In District	Out of District	Out of State
Tuition per contact hour	$225.00	$325.00	$405.00
Tuition for 106 contact hours	$23,850.00	$34,450.00	$42,930.00

Course Fees (Include but not limited to: HESI Exam Package, Upscale, Viewpoint, & Clinic Supplies)	$1354.00	$1354.00	$1354.00
School Fees for 106 contact hours *($38.00 per contact hour)*	$4028.00	$4028.00	$4028.00
Subtotal Tuition and Course Fees	**$29,232.00**	**$39,832.00**	**$48,312.00**
Student Kit #1 Fall 1st year	$2560.00	$2560.00	$2560.00
Student Kit #2 Winter	$870.00	$870.00	$870.00
Student Kit #3 Spring/Summer	$970.00	$970.00	$970.00
Student Kit #4 Fall 2nd year	$540.00	$540.00	$540.00
Hep B Vaccine – *if not already completed*	$150.00	$150.00	$150.00
Textbooks	$1,671.00	$1,671.00	$1,671.00
Human Trafficking Training	$10.00	$10.00	$10.00
Background Ck/Drug Test	$100.00	$100.00	$100.00
Physical	$200.00	$200.00	$200.00
Uniform and Shoes	$150.00	$150.00	$150.00
Lab Tests to check for immunity – *If immunization record is not available*	$150.00	$150.00	$150.00
Graduation Pin	$25.00	$25.00	$25.00
Board Review Seminar Registration (not including travel expenses 2-4 days)	$450.00	$450.00	$450.00
Student Membership Dental Hygienists Association ($80 annually)	$160.00	$160.00	$160.00
(NDHBE) National Board Dental Hygiene Exam	$580.00	$580.00	$580.00
(ADEX) American Board of Dental Examiners ($1,150 Exam and $150 Typodont - *plus possible facility fee	$1300.00	$1300.00	$1300.00
Local Anesthesia Board Exam	$140.00	$140.00	$140.00
Nitrous Oxide Sedation Board Exam	$135.00	$135.00	$135.00
State of Michigan Dental Hygiene License Fee	$99.00	$99.00	$99.00
*Loupes are *recommended* 2nd year, but not required - estimate is not added to totals.	*$2,500.00*	*$2,500.00*	*$2,500.00*
Subtotal Miscellaneous Expenses	$10,260.00	$10,260.00	$10,260.00
Grand Total	**$39,492.00**	**$50,092.00**	**$58,572.00**

Financial Aid

Scholarships are offered throughout the year to NCMC students. Dental Hygiene Scholarships are subject to change based on the availability of funds. NCMC Scholarship amounts vary from year to year.

Students must be accepted into the dental hygiene program to qualify. Contact the Financial Aid Office at 231.348.6698 for more information.

Students are notified throughout the year as information on additional scholarships from various organizations becomes available.

APPENDIX

NCMC Student Handbook link: Students will be given a link to this site.
https://www.ncmich.edu/north-central-policies-resources/student-handbook.html

The following forms are for informational purposes only. The student's signature is required on the same forms as in the Viewpoint Screening Health Portal. (Link to portal given upon acceptance in the program).

North Central Michigan College Dental Hygiene Critical Incident Report

Student Name _____ Date_____ Time _____

Course _____ Lecture ~ Sim Lab ~ Clinic (circle appropriate)

Critical Element(s)

_____

(C1) Competency 1: Patient-Centered Care
Graduates will provide individualized dental hygiene care using the dental hygiene process of care to promote oral and overall health across diverse populations.
(C2) Competency 2: Safe and Effective Care
Graduates will deliver dental hygiene services that reflect current standards of practice, infection control, and risk management to protect patients and providers.
(C3) Competency 3: Interprofessional Collaboration and Teamwork
Graduates will work effectively with patients, faculty, peers, and other healthcare professionals to coordinate and improve patient outcomes.
(C4) Competency 4: Patient Education and Health Promotion
Graduates will educate and motivate patients and communities to prevent disease and improve oral and systemic health.
(C5) Competency 5: Critical Thinking and Evidence-Based Decision Making
Graduates will apply scientific knowledge, clinical judgment, and research evidence to make informed decisions in patient care.
(C6) Competency 6: Professionalism and Ethical Responsibility
Graduates will demonstrate accountability, ethical practice, and professional behavior in all aspects of dental hygiene care.

Instructor Comments:

_____
_____
_____
_____
_____
_____
_____

Plan for Improvement:

_____
_____
_____

_____Instructor Signature _____Date Discussed _____ _____

Student Signature _____Date Discussed _____
Copy

Director of DH Signature _____ Date Discussed _____
Copy

Original to Student Files

North Central Michigan College Dental Hygiene Learning Contract

Student Name _____ Course _____ Date Discussed _____

You are in jeopardy of failing the clinical and/or theory component of your dental hygiene course due to:

1. Failure to meet the following critical elements:
   C1 – Patient-Centered Care **C2** – Safe and Effective Care

   C3 – Interprofessional Collaboration and Teamwork

   C4 – Patient Education and Health Promotion

   C5 – Critical Thinking and Evidence-Based Decision Making

   C6 – Professionalism and Ethical Responsibility
2. Unsafe Practice - Any behavior or performance in the clinical setting that compromises patient safety, violates professional or ethical standards, or fails to meet institutional and accreditation requirements.
3. Unprofessional Conduct (including but not limited to non-compliance with dress code or attendance).

The following objectives/outcomes must be met by _____(date) to continue in the dental hygiene program.

_____

_____

_____

_____

Please refer to the Dental Hygiene Student Handbook Learning Contract Guidelines.

Student Signature _____Date Discussed _____ Copy

Faculty Signature _____ Date Discussed _____ Copy

Director Signature _____Date Discussed _____ Copy

Original to Student's File_____

Please note that you can be dismissed from the Dental Hygiene program <u>at any time during the Learning Contract</u> if care rendered is unsafe and places patient(s) in jeopardy or if behavior is not meeting the level of expectations of the program. Students are responsible for informing subsequent clinical instructors of their learning contract and reviewing outcomes with subsequent instructors.

North Central Michigan College Dental Hygiene Program

STUDENT REPLY TO LEARNING CONTRACT

Student Name _____ Course _____ Date _____

1. Perceptions of the reason for the learning contract: (continued on back if needed)

2. Plan of improvement for behavior/practice changes to meet expected outcomes/objectives. Areas for improvement. (continued on back if needed)

Instructor Signature _____ Date Discussed _____ Copy

Student Signature _____ Date Discussed _____ Copy

Director Signature _____ Date Discussed _____ Copy
Original to Student File

North Central Michigan College Dental Hygiene Resolution of Learning Contract

Students name _____ **Course** _____ **Date** _____

1. Deadline for meeting outcomes/objectives**:** _____ **(**Date)
2. Summary of Learning Outcome Resolution: Statement verifying the student's ability to meet the terms of the contract by addressing each identified area of deficiency and summarizing the required outcomes.

3. Recommendation:

End Learning Contract – Outcomes/Objectives achieved _____

Advance to Program Dismissal _____

Conditions for re-entry:

Upon Re-entry, the student is considered in learning contract status. Failure to meet clinical and course objectives a second time will result in final dismissal from the program.

Instructor Signature _____ Date Discussed _____ copy

Student Signature _____ Date Discussed _____ copy

Director Signature _____ Date Discussed _____ copy

Original to student's file

Professionalism Rubric Completed by Instructors for DHY Courses

Domain	Exemplary (2 pts)	Meets Expectations (1 pt)	Needs Improvement (0 pts)
Attendance and Punctuality	Always present, on time, and fully prepared to engage or to treat patients.	Late no more than one time and generally prepared for scheduled activities.	Late 2 or more times, absent, or unprepared for course or patient care activities
Accountability and Reliability	Consistently completes assigned tasks and follows through without reminders.	Completes assigned work by deadlines with prompting.	Fails to complete tasks, misses deadlines, or requires reminders.
Professional Appearance and Infection Control	Always in full compliance with dress code, PPE, and asepsis/ADS infection control protocols.	Lapses that are promptly corrected and maintained after feedback.	Noncompliance after having been corrected more than once or unsafe practices that risk cross-contamination or violate policy.
Communication and Teamwork	Communicates in a professional manner that is respectful with faculty, staff, peers, and patients; contributes positively to team function.	Communicates appropriately and collaborates when prompted.	Fails to communicate in a professional manner. Displays disrespect, argumentative behavior, poor communication, and/or disrupts team dynamics.
Ethics and Integrity	Demonstrates honesty, confidentiality (HIPAA) and ethical judgment in all settings and documentation.	Lapses in judgment that are acknowledged and corrected.	Dishonesty, breaches of confidentiality, falsification, or unethical conduct. Fails to correct lapses in judgment.
Engagement & Professional Attitude	Actively participates, shows initiative, and is receptive to feedback; maintains a professional, positive, patient-centered attitude.	Participates when prompted; accepts feedback without resistance.	Disengaged, resistant to feedback, or exhibits an unprofessional/negative attitude that impedes learning and/or patient care.

Scoring and Application: Faculty assess students Mid-term and at the end of each course. Total possible points per evaluation: 12. Convert scores to percentages or letter grades per course syllabus.

Course Type	Evaluation Frequency	Professionalism Grade Weight
Didactic	Midterm and Final	5-10%
Laboratory/Skills	Each Session	10%
Clinical	Each Session	10%

Universal Professionalism Expectations:

1. Demonstrate accountability by attending all scheduled sessions, arriving on time, and being prepared.
2. Comply with program dress code, PPE, and infection control/ADS standards.
3. Maintain confidentiality and adhere to HIPAA and institutional policies.
4. Exhibit integrity in all academic and clinical documentation and activities.
5. Engage constructively in the learning process; show initiative and receptiveness to feedback.
6. Contribute positively to the learning environment and uphold the standards of the dental hygiene profession.

Student Kits Policy

Students in the NCMC Dental Hygiene Program are required to purchase two student kits containing the instruments and supplies necessary to progress in their dental hygiene education. The first kit is purchased in the fall semester, and the second kit is purchased in the spring semester for use beginning in the summer term. These instruments and supplies will be utilized throughout the program, and students are responsible for having them available at all times during clinic and laboratory simulations. The instruments and supplies provided in these kits are for course-related use only and may not be taken home for other purposes. Students are responsible for replacing or purchasing additional instruments and supplies if items are lost or damaged.

Receipt of Student Kits Acknowledgement

_____Student dental hygiene kits contain items that may be a hazard to small children and pets. I agree to store this kit in a place that is not accessible to small children and pets.

_____Student is responsible for the dental hygiene kit and agrees to purchase another kit at their own expense if it is lost or damaged.

_____ I have received my student **Kit #1** and verified the contents as listed on the supply list

_____I have received my student **Kit #2** and verified the contents as listed on the supply list

Student Name Printed _____

Student Signature _____ Date _____

Faculty/Witness Signature _____ Date _____

PERSONAL EMAIL CONSENT

Please read, sign, and submit this authorization to the Department of Dental Hygiene.

The Dental Hygiene Department conducts a Post Graduate Job Survey six months after graduation. We would like permission to use your personal email for the survey and other notifications as many graduates no longer regularly check their school email.

_____I authorize North Central Michigan College to use the personal email below for post-graduation contact.

_____I do not want North Central Michigan College to use my personal email.

Email_____

Print Name _____ Signature_____

Student ID _____ Date_____

Technology Agreement Apple iPad 1:1 Project

North Central Michigan College (NCMC) dental hygiene in conjunction with the college IT department is trialing a program to provide the incoming dental hygiene cohort with an iPad for their use while in the program.

This project is being established to provide every student with the same learning equipment and to promote creativity in learning to improve student success.

Students are being provided with one new Apple iPad, an attached keyboard/case, and an Apple Pencil. If the student successfully completes the RN program the iPad, case, and pencil will be completely converted to their ownership. While in the program the NCMC IT department will manage the devices and are the owners of the devices. Students will be responsible for the care and maintenance of the device, including contacting the IT Department if service is needed. The student shall be financially responsible for repairs due to negligence including accidental damage. No labels, markings, writings, or personal stickers may be placed upon or affixed to the Equipment. Students should be aware that this equipment is not insured for theft or negligent damage under any policy, however, accidental damage may be covered. The iPad and Apple Pencil are covered under the Apple Care + for Schools. Each iPad will come with 2 years of coverage.

Accidental Damage from Handling ("ADH") is one of the big takeaways from Apple Care + for Schools. This allows students to submit up to two ADH Service claims per 12 months to cover things like drops and damage caused by liquid contact. Students will contact the IT Department if service is needed.

Student hereby agrees that he or she will not sell, contract to sell, lease, encumber, lien, or otherwise dispose of the equipment as long ownership remains with NCMC. The student shall hold no security or ownership interest in the equipment. Likewise, the Student shall hold no security or ownership interest in either the licenses to the installed software included with the equipment, or in the licenses to another software that the school may from time to time permit the student to use.

If the student successfully completes the nursing program, the ownership will be transferred to them at no charge.

If the student quits, fails, or is dismissed for any reason, the cost to purchase the iPad, case, and pencil is as follows:

- In the first semester, the student may purchase the iPad, case, and pencil for $1000.
- Second-semester cost is $750.00
- Third-semester cost is $500.00
- Fourth semester cost is $250.00

If the student chooses not to purchase- the iPad, case, and pencil must be returned to the IT department within 5 days of leaving the program. After 5 days, any unpaid charges/fees for unreturned or damaged devices/equipment will be charged to the student's account.

iPads are a required tool for students and students must ensure that iPads are always available for use. iPads should be charged and in good working order. If an iPad becomes damaged, lost, or stolen the student must immediately report to the IT department. Students may be responsible financially if the iPad is damaged, lost, or stolen. No patient information of any kind should be on the tablets.

- I agree I will take on responsibility for the care and maintenance of the device. I understand that I am responsible for any damage sustained during the checkout period and agree to pay for any repairs that occur that are not the result of normal use.

- If there are any issues, I agree to notify the IT staff immediately.

My signature below indicates that I understand and agree to the terms and conditions of this agreement.

Student signature _____ Date _____

Student Name printed _____

Student ID# _____

Dental Hygiene Program – Criminal Convictions and Admission Eligibility

If a student has been convicted of a crime, the student should consult the **Dental Hygiene Program Waiting Periods Table** (below) *before* seeking admission to determine whether a lawful waiting period applies, and if so, its duration. Some convictions—particularly those defined as "relevant crimes" under 42 USC 1320a-7(a) and incorporated in MCL 330.1134a—may result in **permanent disqualification** and no waiting period.

Failure to disclose a conviction that is classified under MCL 330.1134a is grounds for **immediate dismissal** from the Dental Hygiene program. Likewise, if a student is convicted of a disqualifying crime under MCL 330.1134a after being admitted, the student will be **immediately dismissed**.

The waiting periods in the table correspond to the minimum durations required under MCL 330.1134a for various categories of offenses (e.g. felonies, misdemeanors, intent-to-harm, abuse, etc.). The more serious the offense (in terms of harm, violence, or abuse), the longer the required waiting period. The program reserves the right to apply a waiting period equal to or longer than the statutory minimum.

This policy applies in all cases where the statute allows consideration of the conviction, including those convictions occurring before or after admission, unless otherwise prohibited by law.

Waiting Period	Type of Crime
Lifetime Ban	Health-care related fraud, patient abuse or neglect, felony controlled-substance violations, felony Medicare/Medicaid fraud, or any offense that results in permanent federal exclusion from participation in health-care programs.
15 years following the completion of all terms and conditions of sentencing	Felonies involving intent to cause death or serious bodily harm, use of force or threat, use of a firearm or dangerous weapon, criminal sexual conduct, cruelty or torture, abuse or neglect of a vulnerable adult, or diversion/adulteration of prescription drugs.
10 years following the completion of all terms and conditions of sentencing	All other felony convictions not listed above, and misdemeanors involving violence, personal injury, or the use or threat of force (e.g., assault with a weapon, armed robbery, felony larceny, felony home invasion).
5 years following the date of conviction	Misdemeanors such as embezzlement, negligent homicide, larceny, retail fraud (2nd degree), assault or battery, fraud, theft, drug-related misdemeanors, or home invasion (misdemeanor level).

3 years following the date of conviction	Lesser misdemeanors, including simple assault (no weapon or serious injury), retail fraud (3rd degree), public-health misdemeanors, or similar lower-level offenses.
1 year following the date of conviction	Misdemeanors committed by minors such as petty larceny, minor retail fraud, or public-health misdemeanors committed under age 18.

Notes:

• The waiting period begins after completion of all sentencing, parole, and probation.

• A conviction includes a guilty verdict, guilty plea, or plea of nolo contendere (no contest).

• The Dental Hygiene Program will review and update this table annually or whenever MCL 330.1134a is amended.

• Questions regarding the applicability or interpretation of this policy should be directed to the Program Director before admission or continued enrollment.

NORTH CENTRAL MICHIGAN COLLEGE - Dental Hygiene Program
Bloodborne Pathogens Exposure / Incident Report

SECTION I – INDIVIDUAL INVOLVED

- Name: _____
- Role: ☐ Student ☐ Faculty ☐ Staff
- Program/Course (e.g., DHY 149, DHY 241): _____
- Student ID (if applicable): _____
- Date of Birth: _____
- Phone: _____
- NCMC Email: _____

SECTION II – INCIDENT DETAILS

- Date of Exposure: _____
- Time of Exposure: _____
- Location (Clinic Operatory #, Sim Lab, Sterilization Area, etc.):

- Activity at Time of Exposure (check one):
  ☐ Instrumentation
  ☐ Instrument Processing
  ☐ Injection
  ☐ Cleanup / Disinfection
  ☐ Other (specify): _____

SECTION III – DESCRIPTION OF EXPOSURE

- Type of Exposure (check all that apply):
  ☐ Percutaneous injury (needle stick / sharps injury)
  ☐ Mucous membrane exposure (eyes, nose, mouth)
  ☐ Non-intact skin exposure
- Instrument/Object Involved:
  ☐ Needle (type/gauge if known): _____
  ☐ Scaler / Curette
  ☐ Explorer
  ☐ Bur
  ☐ Other sharp: _____
- Was the instrument visibly contaminated with blood or saliva?
  ☐ Yes ☐ No
- Brief description of what occurred:

SECTION IV – SOURCE PATIENT INFORMATION (IF KNOWN)

Patient confidentiality must be maintained. Do NOT record full patient names.

- Patient Identifier (initials or chart number only): _____
- Known BBP status (if documented):
  ☐ HBV ☐ HCV ☐ HIV ☐ Unknown
- Patient notification completed per NCMC clinic protocol?
  ☐ Yes ☐ No ☐ Not applicable

SECTION V – IMMEDIATE ACTIONS TAKEN

(Check all that apply)

☐ Area washed with soap and water

☐ Eyes flushed at eyewash station

☐ Wound allowed to bleed (if applicable)

☐ Antiseptic applied

☐ PPE removed and replaced

☐ Incident immediately reported to supervising faculty

SECTION VI – FACULTY NOTIFICATION

- Supervising Faculty Name: _____
- Time faculty notified: _____
- Faculty Signature: _____ Date: _____

SECTION VII – MEDICAL EVALUATION & FOLLOW-UP

- Referral made to (check one):
  ☐ NCMC-designated Occupational Health Provider
  ☐ Student Health Services
  ☐ Emergency Department
- Date/time of medical evaluation: _____
- Baseline testing recommended/performed:
  ☐ HBV ☐ HCV ☐ HIV
- Post-exposure prophylaxis (PEP) discussed or initiated:
  ☐ Yes ☐ No

All medical decisions are made by licensed healthcare providers, not Dental Hygiene faculty.

SECTION VIII – STUDENT ACKNOWLEDGEMENT

I acknowledge that I have reported this exposure and understand the importance of medical follow-up and compliance with post-exposure guidelines.

- Student Signature: _____ Date: _____

SECTION IX – PROGRAM REVIEW (ADMINISTRATIVE USE)

- Reviewed by Program Director or Designee: ☐ Yes ☐ No
- Follow-up education or corrective action required:
  ☐ Yes ☐ No ☐ Not applicable
- Signature: _____ Date: _____

CONFIDENTIALITY STATEMENT -*This report is confidential and maintained in accordance with OSHA, CDC, HIPAA, and North Central Michigan College policies.*

North Central Michigan College Dental Hygiene Program

Handbook Acknowledgement and Agreement

I acknowledge that I have received and reviewed the **North Central Michigan College Dental Hygiene Program Student Handbook**. I understand that it is my responsibility to read the handbook in its entirety and to seek clarification from program faculty or administration regarding any policies, procedures, or expectations that I do not understand.

I recognize that the handbook provides important information about the policies, professional standards, and academic requirements of the Dental Hygiene Program. I agree to **abide by all guidelines, policies, and procedures** outlined in the handbook, as well as any updates or addenda provided during my enrollment in the program.

I understand that failure to adhere to these policies or to maintain professional conduct may result in disciplinary action, up to and including dismissal from the program.

HIPAA Compliance Statement

I understand that during my participation in the Dental Hygiene Program, I may have access to confidential patient information in both simulated and clinical settings. I agree to maintain strict confidentiality in compliance with the Health Insurance Portability and Accountability Act (HIPAA) and all North Central Michigan College and clinical affiliate privacy policies.

I agree not to disclose, discuss, or share any patient information—verbally, electronically, or in writing—except as required for legitimate educational or clinical purposes within the scope of my training. I understand that any breach of patient confidentiality, intentional or unintentional, constitutes a serious violation of federal law and program policy and may result in disciplinary action, including dismissal from the program and potential legal consequences.

By signing below, I affirm that I have read and understood the contents of the handbook, agree to comply with all policies and procedures, and acknowledge my obligation to uphold **HIPAA confidentiality standards** as a representative of the **North Central Michigan College Dental Hygiene Program**.

Student Name (Printed): _____

Student Signature: _____ Date _____

Date: _____ **Faculty Witness**: _____

Rmb 4/29/2026; 6/4/2026; 7/15/2026