

# DENTAL HYGIENE CURRICULUM

## Specific Application Information

Factors Considered For Admission	
Requirement	Program
	<b>DENTAL HYGIENE</b>
Persistence (Weight 33%)	Number of Gen Ed Credits Completed
Standardized Test	No
Essay	No
Most Recent GPA of These Specified Courses (Weight 67%)	<p><b>Must have all of the following</b>                      Chemistry 100                      Psychology 101 or                      Sociology 101                      English 101  <b>One of the following</b>                      Anatomy and Physiology 201                      Microbiology 204</p>
Interview	No
Observation	No
Other Information	Must be CPR certified throughout the curriculum
Total Number Accepted	40 in the fall

**ASSOCIATE OF APPLIED SCIENCE  
DEGREE  
DENTAL HYGIENE**

**ADMISSIONS CRITERIA FOR A  
COLLEGE STUDENT - CURRENTLY  
ATTENDING ALLEGANY COLLEGE  
OF MARYLAND OR  
TRANSFERRING FROM ANOTHER  
INSTITUTION**

**GENERAL EDUCATION COURSES  
REQUIRED FOR DENTAL HYGIENE**

**English 101**  
**Psychology 101**  
**Sociology 101**  
**Speech 101**  
**Mathematics 105 or 221**  
**Biology 201 (Anatomy &  
Physiology)**  
**Biology 204 (Microbiology)**

# **ELIGIBILITY CRITERIA FOR ADMISSION TO THE ACOM DENTAL HYGIENE PROGRAM**

*Updated for fall 2010 Entering Class*

[Ms. Mary Hartman](#)

Coordinator of Admissions, Counseling, and Advising

301-784-5204

Dental Hygiene

301-784-5580

**In addition to the regular college application, all applicants must file this dental hygiene department application. Entrance into the program is competitive and applicants will be ranked by their academic performance. The deadline for filing an application (includes having all transfer credit transcripts on file in the Admissions Office) is **March 31, 2010**. Students must also be CPR certified and maintain this certification throughout all their dental hygiene courses. This certification must be completed prior to entering dental hygiene clinical course work. Applicants must also meet and comply with the Performance Standards for Dental Hygiene throughout all of their dental hygiene course work.**

**Midterm grades may be used for students progressing through a required admissions spring semester course. Where midterm grades are used to determine rank/admission, this will be considered provisional acceptance until final grades are forwarded. *In those schools where midterm grades ARE NOT given, the candidate MUST have his/her instructor send a letter to the ACOM admissions office regarding letter grade status.***

**All paperwork including midterm and/or individual instructor grades must be received by **March 31, 2010** to be considered for admission. Students will be notified of acceptance throughout April.**

*Applications are considered annually. Therefore, to be considered for admission to any following (next years) classes, the entire application process must be repeated*

**Recent High School Graduates** (A total of 5% may be admitted from this category.)

1. High school graduates within the last five years who never attended college and/or early placement students who are enrolled as part-time Allegany College of Maryland students while attending high school
2. Pass the Allegany College of Maryland placement tests in English, Mathematics, and Reading or successfully complete all required courses before the first college semester
3. A minimum ACT score of 21 in each section.

These applicants will be ranked, and the top candidates selected using the following factors in order of priority:

- Composite score on the ACT test
- Mathematics and science ACT section; and
- Algebra, biology, and chemistry high school grades.

If the student does not meet these requirements, he/she may become eligible by meeting the requirements in the "Other Applicants" category.

**Other Applicants** (A total of 95% will be admitted from this category [provided there is a full class of qualified applicants; if not, re-admits will be considered.])

**Through a unique Partnership/Scholarship with Wor-Wic Community College on the Eastern Shore of Maryland, two class positions will be reserved for Wor-Wic Community College designated students provided they meet all of the admission criteria.**

1. **Must have completed fourteen (14) or more semester hours** of college level (above 93) course work with a minimum cumulative grade point average of 2.00 or better. This is competitive; GPA's will be ranked.
2. These fourteen hours **MUST** include successful completion (C or better) of course work chosen from the following list:

**MUST HAVE THE FOLLOWING:**

1. English composition 3 credits
2. General Psychology or Introduction to Sociology 3 credits
3. Chemistry 100 4 credits

*(Important note: The college catalog lists chemistry 100 as a "summer" sequenced course. This applies only to recent high school graduates who have been accepted into the clinical phase for fall.)*

**One of the following: 4 credits**

1. Anatomy and Physiology 201 4 credits
2. Microbiology 204 4 credits

**To be eligible for consideration for admission, the student must have completed or be taking the four courses as noted above.**

Students may currently be taking any of the above as long as their total hours will be 14 at the end of the semester. Where Mid-term grades will be used for admission; the student must maintain the current grade point average or higher to continue their acceptance position. *In those schools where midterm grades ARE NOT given, the candidate MUST have his/her instructor send a letter to the ACOM admissions office regarding letter grade status.*

Laboratory science courses taken ten or more years prior to application will not be considered.

**Entrance into the program is competitive. Applicants will be ranked using the following factors.**

1. GPA based on the above 14 credit hours (4 courses). (Weighted 2/3)
2. Number of general education (non-dental hygiene) credits required for the dental hygiene program that the applicant has completed. (Weighted 1/3)
3. Appropriate transfer credit will be given only for courses which correspond to courses in the dental hygiene curriculum and which have been taken at a fully accredited college.

**Re-Admission to the Dental Hygiene Program**

1. All re-admission candidates must meet the appropriate above criteria, including a consideration of previous Professional Demeanor and Conduct, and any additional criteria as prescribed in their previously developed "contract" with the Director of Dental Hygiene.
2. Any student that has been dismissed from the program for academic reasons must re-apply to the program if the student wishes to be considered for readmission into the program.
3. If a student has been granted readmission, and then again fails to meet departmental academic standards, the student will be dismissed from the program permanently.

4. All re-admission candidates will be considered case by case and only if there are extenuating circumstances directly relating to poor academic performance and THERE IS AVAILABLE CLASS SPACE.

### PERFORMANCE STANDARDS for DENTAL HYGIENE

In order to be **admitted to** or **continue** in the Dental Hygiene Program, a student must have skills and abilities essential to perform as a dental hygienist. Reasonable accommodations will be made on an individual basis; however, the candidate must be able to perform in an independent manner.

### DENTAL HYGIENE PERFORMANCE STANDARDS

STANDARD		EXAMPLES OF ACTIVITIES
<b>Critical Thinking</b>	Critical thinking ability sufficient for clinical judgment	Identify cause-effect relationships in clinical situations, develop treatment plans
<b>Communication</b>	Communication abilities sufficient for effective interaction with patients and other members of the health care team in verbal and written form	Able to obtain information, explain treatment procedures, initiate health education training, describe patient situations, perceive non-verbal communications
<b>Mobility</b>	Physical abilities (including standing, walking, bending, range of motion of extremities) to move from room to room and maneuver in small spaces	Able to administer cardio-pulmonary resuscitation, move around in patient treatment area
<b>Motor</b>	Gross and fine motor function sufficient to provide safe and effective dental hygiene care	Able to use dental instruments, manipulate various dental materials, and satisfactorily place radiographs
<b>Hearing</b>	Auditory ability sufficient to monitor and assess health needs	Able to listen to patient, breath and heart sounds. Able to hear equipment monitors, such as x-ray equipment and autoclave timers
<b>Visual</b>	Visual ability sufficient to provide safe and effective dental hygiene care	Able to observe patients and use instruments in the oral cavity. Adequate close vision to see small lesions and deposits on teeth and to distinguish their color changes.
<b>Tactile</b>	Tactile ability sufficient for physical assessment and scaling skills	Able to perform palpation of a pulse, extraoral and intraoral structures, and feel calculus deposits or rough tooth surfaces
<b>Health Status</b>	Free of communicable diseases sufficient for safe and effective dental hygiene care	Able to conform to the CDC and State of Maryland guidelines for practice and practice restrictions on health care workers
<b>Legal Status</b>	Ability to obtain dental hygiene license as some states deny licenses for certain prior felony convictions	Able to obtain a dental hygiene license in state of choice due to legal history. This will be the responsibility of the applicant/student.

**MMWR  
CENTERS FOR DISEASE CONTROL**

**TABLE 1: Suggested work restrictions for health-care personnel infected with or exposed to major infectious diseases in health-care settings, in the absence of state and local regulations.**

<b>Disease/problem</b>	<b>Work restriction</b>	<b>Duration</b>
Conjunctivitis	Restrict from patient contact and contact with patient's environment	Until discharge ceases
Cytomegalovirus infection	No restriction	
Diarrheal disease Acute stage (diarrhea with other symptoms)  Convalescent stage, Salmonella Species	Restrict from patient contact, contact with patient's environment, and food-handling.  Restrict from care of patients at high risk.	Until symptoms resolve  Until symptoms resolve; consult with local and state health authorities regarding need for negative stool cultures
Enteroviral infection	Restrict from care of infants, neonates, and immunocompromised patients and their environments.	Until symptoms resolve
Hepatitis A	Restrict from patient contact, contact with patient's environment, and food-handling.	Until 7 days after onset of jaundice
Hepatitis B Personnel with acute or chronic hepatitis B surface antigenemia who do not perform exposure-prone procedures  Personnel with acute or chronic hepatitis B e antigenemia who perform exposure-prone procedures	No restriction <sup>1</sup> ; refer to state regulations. Standard precautions should always be followed.  Do not perform exposure-prone invasive procedures until counsel from a review panel has been sought; panel should review and recommend procedures that personnel can perform, taking into account specific procedures as well as skill and technique. Standard precautions should always be observed. Refer to state and local regulations or recommendations.	Until hepatitis B e antigen is negative
Hepatitis C	No restrictions on professional activity. <sup>1</sup> HCV- positive health-care personnel should follow aseptic technique and standard precautions.	
Herpes simplex Genital  Hands (herpetic whitlow)  Orofacial	No restriction  Restrict from patient contact and contact with patient's environment.  Evaluate need to restrict from care of patients at high risk.	Until lesions heal
Human immunodeficiency virus; personnel who perform exposure-prone procedures.	Do not perform exposure-prone invasive procedures until counsel from an expert review panel has been sought; panel should review and recommend procedures that personnel can perform, taking into account specific procedures as well as skill and technique. Standard precautions should always be observed. Refer to state and local regulations or recommendations.	

Disease/problem	Work restriction	Duration
Measles Active  Postexposure (susceptible personnel)	Exclude from duty  Exclude from duty	Until 7 days after the rash appears  From fifth day after first exposure through twenty-first day after last exposure, or 4 days after rash appears
Meningococcal infection	Exclude from duty	Until 24 hours after start of effective therapy
Mumps Active  Postexposure (susceptible personnel)	Exclude from duty  Exclude from duty	Until 9 days after onset of parotitis  From twelfth day after first exposure through twenty-sixth day after last exposure, or until 9 days after onset of parotitis
Pediculosis	Restrict from patient contact	Until treated and observed to be free of adult and immature lice
Pertussis Active  Postexposure (asymptomatic personnel)  Postexposure (symptomatic personnel)	Exclude from duty  No restriction, prophylaxis recommended  Exclude from duty	From beginning of catarrhal stage through third week after onset of paroxysms, or until 5 days after start of effective antibiotic therapy  Until 5 days after start of effective antibiotic therapy
Rubella Active  Postexposure (susceptible personnel)	Exclude from duty  Exclude from duty	Until 5 days after rash appears  From seventh day after first exposure through twenty-first day after last exposure
Staphylococcus aureus infection Active, draining skin lesions  Carrier state	Restrict from contact with patients and patient's environment or food handling.  No restriction unless personnel are epidemiologically linked to transmission of the organism	Until lesions have resolved

Disease/problem	Work restriction	Duration
Streptococcal infection, group A	Restrict from patient care, contact with patient's environment, and food handling.	Until 24 hours after adequate treatment started
Tuberculosis Active disease	Exclude from duty	Until proved noninfectious
PPD converter	No restriction	
Varicella (chicken pox) Active	Exclude from duty	Until all lesions dry and crust
Postexposure (susceptible Personnel)	Exclude from duty	From tenth day after first exposure through twenty-first day (twenty-eighth day if varicella-zoster immune globulin (VZIG) administered after last exposure.
Zoster (shingles) Localized, in healthy person	Cover lesions, restrict from care of patients§ at high risk	Until all lesions dry and crust
Generalized or localized in immunosuppressed person	Restrict from patient contact	Until all lesions dry and crust
Postexposure (susceptible Personnel)	Restrict from patient contact	From tenth day after first exposure through twenty-first day (twenty-eighth day if VZIG administered) after last exposure or, if varicella occurs, when lesions crust and dry
Viral respiratory infection, acute Febrile	Consider excluding from the care of patients at high risk ¶ or contact with such patients' environments during community outbreak of respiratory syncytial virus and influenza	Until acute symptoms resolve

**Source:** Adapted from Bolyard EA, Hospital Infection Control Practices Advisory Committee. Guidelines for infection control in health care personnel, 1998. Am J Infect. Control 1998; 26:289-354.

\*Modified from recommendations of the Advisory Committee on Immunization Practices (ACIP).

1 Unless epidemiologically linked to transmission of infection.

§ Those susceptible to varicella and who are at increased risk of complications of varicella (e.g., neonates and immunocompromised persons of any age).

¶ Patients at high risk as defined by ACIP for complications of influenza.

