

CODA Unofficial Report of Major Actions

by Cindy Biron Leiseca

Here is a summary of the August 3-4 CODA Unofficial Report of Major Actions limited to concerns of DA and DH Programs

Accreditation Reports

- 1 New DH Program granted accreditation
- 5 DA Programs and 1 DH Program received a formal warning that accreditation will be withdrawn in February 2018 unless the requested information, demonstrating compliance with the accreditation standards, is submitted prior to that time.

Revisions to Standards with Immediate Implementation

- DA Standards 1-7, 2-5, 2- 21, 2-22, 3-4, and 3-6, with an implementation date of January 1, 2018.
- DH Standards 2-14, 3-7 with immediate implementation.

Proposed Revisions to Accreditation Standards to be circulated to the communities of interest for comment including, as applicable hearings at the 2017 ADA Annual Meeting, 2018 ADEA Annual Meeting, and 2018 ADHA Annual Meeting.

- DH Definition of Terms and Standards 2-8d and 2-13, with circulation to the communities of interest until June 1, 2018, for consideration at the August 2018 meeting of the Commission.
- DH Standards 2-1 and 2- 24, with circulation to the communities of interest until June 1, 2018, for consideration at the August 2018 meeting of the Commission.

Standing Committee on Finance

The Commission reviewed the report of the Standing Committee on Finance and took several actions, including:

In this issue:

<i>CODA Standing Committee</i>	4
<i>Test Sticks Say Little</i>	7
<i>We Learn From Students</i>	8
<i>References and CODA Links</i>	9

- Directing submission of a resolution to the ADA Board of Trustees requesting initiation of a dialogue, based upon the CODA 2016 shared services, to establish an agreed upon shared services formula, which could be ratified within the ADA-CODA Memorandum of Understanding.
- Directing submission of a resolution to the ADA Board of Trustees requesting that the ADA develop a mechanism to allow the Commission to establish and access a separate reserve fund to retain its annual revenue after total (direct and indirect) expenses are paid.
- Directing the Standing Committee on Documentation and Policy Review to develop a policy on use of the Commission's reserve fund, which could be implemented at such time that a reserve fund is approved for the Commission, for consideration by the Commission in Winter 2018.

Standing Committee on Quality Assurance and Strategic Planning

The Commission reviewed the report of the Standing Committee on Quality Assurance and Strategic Planning and took several actions, including:

- Adopting an Outcomes Assessment Tracking, with immediate implementation, to track the Commission's operational effectiveness related to the 2017-2021 Strategic Plan.
- Directing Commission staff to further investigate the International Society of Dental Regulators (ISDR) and Council on Higher Education Accreditation International Quality Group (CHEA-CIQG), and obtain Commission membership in either or both

Continued on Page 3

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Summer Camp Amelia Island

Boot Camp Retreat for Dental Educators

July 30 through August 3, 2018
See Preliminary Schedule on Page 11

Biron's Quick Reference of 2017 Top 400 Drugs

Clinical Dental Hygiene DHNB Review

Karen Wynn, RDH MEd

Fundamentals of Periodontal Instrumentation & Advanced Root Instrumentation

Eighth Edition

American Heart Association Blood Pressure Categories			
Blood Pressure Category	Systolic mm Hg (upper #)		Diastolic mm Hg (lower #)
Normal	less than 120	and	less than 80
Prehypertension	120 – 139	or	80 – 89
High Blood Pressure (Hypertension) Stage 1	140 – 159	or	90 – 99
High Blood Pressure (Hypertension) Stage 2	160 or higher	or	100 or higher
Hypertensive Crisis	Higher than 180	or	Higher than 110

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Cynthia Biron Leiseca, RDH, EMT, MA
Cathleen A. Korondi, CDA, RDH, Ed.D.

Book for learning & reviewing

Immunology Microbiology

DHNB Review

Brent Molen, RDH, MA. Ed



John W Preece, DDS, MS

ARICEPT, donepezil	Cholinergic; Alzheimer's disease	Ø	Ketoconazole
ARIMIDEX, anastrozole	Aromatase inhibitor; Breast cancer	Xerostomia, nausea	Ø
aniprazole, ABLIFY	Antidepressant; Depression	Extrapramidal effects	Anti-infectives
ANORO ELIPTA Umeclidinium vilanterol	Bronchodilator; COPD	Xerostomia, sore throat, sinusitis	Never use for Asthma attack
ARMOUR THYROID, thyroid	Hormone replacement; Hypothyroidism	No precautions if controlled	None if controlled
ARNUITY ELIPTA Fluticasone propionate	Inhaled corticosteroid; Allergies	Oral candidiasis	Ø
ARTHROTEC, diclofenac	NSAID; Pain relief	Ø	Benzodiazepines
ASACOL mesalamine	5-aminosalicylic acid; Ulcerative colitis	Pharyngitis	Ø
ASMAMAX Twisted	Corticosteroid; Short BRNC; for Asthma m.	Oral candidiasis	Ø
aspirin, Bayer	Antiplatelet; Aspirin therapy for heart	Bleeding time, hemorrhage	Some antibiotics
ASTELINE, azelastine	Nasal spray; Rhinitis	Taste, xerostomia, aphthous	CNS depressants
ATACURATE, etanercept	IL1B: HTN	* "boxed warning"	Ø
ATELLO, sodium	Biphosphonate; osteoporosis	ONJ	Ø
atenolol, TENORMIN	BB: Angina, HTN	Ø	NSAIDs long term
atenolol, TENORECTIC	BB/HCTZ: for Angina and HTN	Hypotension	Ø
atenolol, TENORETIC	Benzodiazepine; anxiety	Xerostomia	CNS depressants

Biron's Quick Reference for Medical Emergencies

1. When patient is in emergency: Stop dental treatment immediately!
2. Call out the secret
3. DO NOT LEAVE YOU
4. In Medical Emergency
 - (1) Patient Placement
 - (2) Assess AIRWAY
 - (3) Vital SignsPulse
Upon arrival of De



Cynthia Biron Leiseca

Pathology Review

Deborah Sparks RDH, MAEd

Periodontics

for the Dental Hygienist

Jill S. Gehrig • Donald E. Willmann

Dental Pain & Anxiety Management

Author: Nicole Greco, RDH, BSDH, MA

English to Spanish Phrases [Click to Appropriate Table](#)

Medical History

Smoking Cessation

Dental History

Head & Neck Exam

Temperature Assessment

Gingival Description

Pulse & Respiration

Radiographs

Blood Pressure

English to Spanish Phrases List for Greeting Patient & Medical History Assessment

ENGLISH	SPANISH
Good morning Mr. _____	Buenos días Señor _____
Good afternoon Mr. _____	Buenos días Señor _____
Good morning Mrs. _____	Buenos días Señora _____
Good afternoon Mrs. _____	Buenos tardes Señora _____
My name is _____ I am your dental hygienist	Me llama _____ Soy su higienista dental
It is nice to meet you.	Mucho gusto en conocerlo (concerlo)
I do not speak Spanish, I will point to Spanish phrases	No hablo espano. Voy ha indicar Las frases en español

Continued from Page 1

organizations as would be of most benefit and value to enable the Commission to establish its global reputation as a leader in dental accreditation.

Standing Committee on Documentation and Policy Review

The Commission reviewed the report of the Standing Committee on Documentation and Policy Review, and took several actions, including adopting the following revised policies with immediate implementation:

- Introduction and General Information, Purpose of this Manual (Evaluation and Operational Policies and Procedures manual
- Scope and Decisions
- Philosophy of Accreditation, Accreditation Standards
- Reciprocal Agreement with the Commission on Dental Accreditation of Canada
- Integrity
- Development of Administrative and Operational Policy Statements
- Review Committees and Review Committee Meetings
- Notice of Accreditation Actions to Communities of Interest
- Notice of Reasons for Adverse Actions
- Policy on Changes to the Composition of Review Committees and the Board of Commissioners
- Commission Committees
- Materials Available from the Commission
- Accreditation Status Definitions
- Reporting Program Changes in Accredited Programs
- Policy on Discontinuance or Closure of Educational Programs Accredited by the Commission and Teach-Out Plans
- Policy Statement on Principles of Ethics in Programmatic Advertising and Student Recruitment
- Policy on Reporting and Approval of Sites Where Educational Activity Occurs
- Policy on Preparation and Submission of Reports to the Commission (new policy)
- Policy on Planning and Implementing Preliminary Accreditation Consultation Visit (PACV) and International Accreditation Site Visits
- Policy and Procedure Regarding Investigation of Complaints Against Educational Programs



Summer Camp lunches served here

- Directing the Standing Committee on Documentation and Policy Review to consider the terminology related to dental specialties, including the rationale for change, the impact on accreditation documentation and the impact on the Commission structure, with a report in Winter 2018.
- Directing that staff review outstanding anonymous complaints to determine the need for immediate investigation and processing of anonymous complaints in accordance with the revised Complaint Policy.

Standing Committee on Communication and Technology

The Commission reviewed the report of the Standing Committee on Communication and Technology, and took several actions, including:

Continued on Page 4

Continued from Page 3

Directing that CODA send a formal letter to the ADA Board of Trustees, with a copy to the Council on Dental Education and Licensure leadership, expressing concern that the Commission's electronic accreditation tool has yet to be developed and must be a priority in order for the Commission to conduct its business.

Directing continued development of a Communication Plan in regard to 2017-2021 Strategic Plan, for review by CODA in Summer 2018.

Standing Committee on Nominations

The Commission reviewed the report of the Standing Committee on Nominations and approved nominees to fill vacancies for discipline specific positions and non-discipline specific positions on its Review Committees, beginning fall 2017, and two upcoming vacancies for public members on the Commission beginning fall 2018.

The Commission directed that an ad hoc committee composed of Commission members be appointed to further study the request for establishment of a Review Committee for Dental Anesthesiology Education, in accordance with the Commission's *Policy on Changes to the Composition of Review Committees and the Board of Commissioners*, and to consider the impact, implications and logistics of this request, with a report at the Summer 2018 meeting.

The Commission directed that an ad hoc committee composed of Commission members be appointed to further study the request for establishment of an accreditation program for advanced general dentistry education programs in operative dentistry, in accordance with the Commission's *Policies and Procedures for Accreditation of Programs in Areas of Advanced Training in General Dentistry*, with a report at the Summer 2018 meeting.

The Commission elected Dr. William Leffler as chair of the Commission and Dr. Loren Feldner as vice-chair of the Commission for 2017-2018.

The Commission acknowledged the following Commissioners whose terms will expire in October 2017: Dr. Stephen Campbell, Dr. Alexandra Hebert, Dr. Denise Kassebaum, Mr. Dennis Lanier, Dr. Harold Mark Livingston (chair), Dr. Robert Sherman, Dr. David Stanton, and Dr. Stanley Surabian.

Commission Members: Dr. Ralph Attanasi, Dr. Susan Callahan Barnard, Dr. Stephen Campbell, Mr. David Cushing, Dr. Loren Feldner, Dr. Catherine Flaitz, Dr. Steven Friedrichsen, Dr. James Geist, Dr. Joseph Hagenbruch, Ms. Alexandra Hebert, Dr. H. Garland Hershey, Jr., Dr. Tariq Javed, Dr. Arthur Jee, Dr. Bradford Johnson, Dr. Denise Kassebaum, Dr. Bruce Kinney, Mr.

Dennis Lanier, Dr. William Leffler (vice-chair), Dr. Mark Lerman, Dr. Steven Levy, Dr. Harold Mark Livingston (chair), Dr. William Lobb, Dr. Michael Mills, Dr. Robert Sherman, Dr. David Stanton, Ms. Deanna Stentiford, Ms. Cindy Stergar, Dr. Stanley Surabian, Mr. Glenn Unser, and Dr. Matthew Wheeler. Dr. Hebert was unable to attend day one and attended day two of the meeting by telephone. To read the full report please go to this link:

<http://www.ada.org/en/coda/accreditation/accreditation-news/post-meeting-actions>

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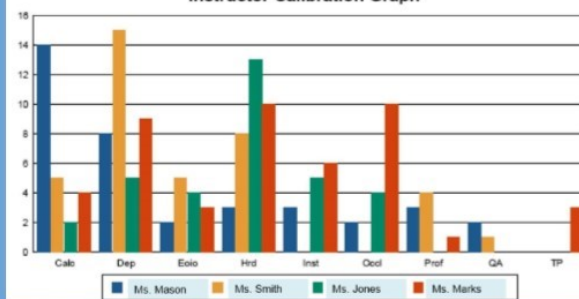
Reports Generated Serve as Exhibits for CODA:

- Total Class Performance by Skill
- Individual Student Performance by Skill
- Remediation Variable & Probability
- Patient Care Report with Instructor Comments
- Patient Treatment Tracking
- Instructor Calibration Graph
- Technique Evaluations
- Treatment Phase Tracking
- Grades Individual Students by Critical Error Feature
- Progression of Student Skill Development Graph
- Surveys of Students, Patients, Graduates, Employers

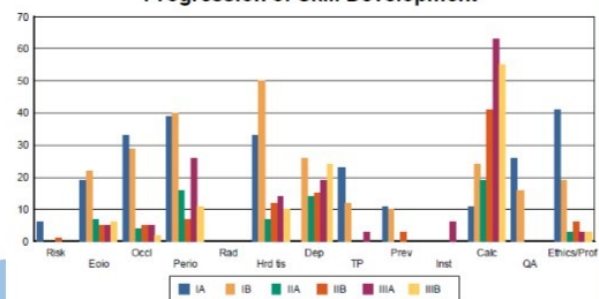
Dental Hygiene Process of Care Grade Entry Form

SubCompetency		+	✓	X	N/A	
Further QUESTIONS Findings		✱	⊙	⊙	⊙	...
USES references	2	⊙	⊙	⊙	⊙	...
Vital Signs (TAKES THEM)	3	⊙	⊙	⊙	⊙	...
NOTIFIES Instructor of risk factors before check-in	4	⊙	⊙	⊙	⊙	...
Documents appropriately in medical alert box	5	⊙	⊙	⊙	⊙	...
Documents medications and contraindications	6	⊙	⊙	⊙	⊙	...
Documents lifestyle RISK factors	7	⊙	⊙	⊙	⊙	...
Documents a concise statement "summary of health"	8	⊙	⊙	⊙	⊙	...
UPDATES history at successive and recall appts	9	⊙	⊙	⊙	⊙	...

Instructor Calibration Graph



Progression of Skill Development



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Test Sticks Say Little

Just because the instrument cutting edge grabs a test stick, it doesn't mean the sharpening technique restores the original contour of the instrument blade. If the test stick alone is your criteria for determining the effectiveness of your sharpening technique, please look at the research.

[Int J Dent Hyg](#). 2015 May;13(2):145-50. doi: 10.1111/ihd.12109. Epub 2014 Nov 9.

Evaluation of three different manual techniques of sharpening curettes through a scanning electron microscope: a randomized controlled experimental study.

[Di Fiore A¹](#), [Mazzoleni S](#), [Fantin F](#), [Favero L](#), [De Francesco M](#), [Stellini E](#).

Abstract

OBJECTIVE:

The purpose of this study was to compare the effectiveness of three different techniques for manually sharpening of periodontal curettes (PCs) by examining the blades with the aid of scanning electron microscope (SEM).

METHODS:

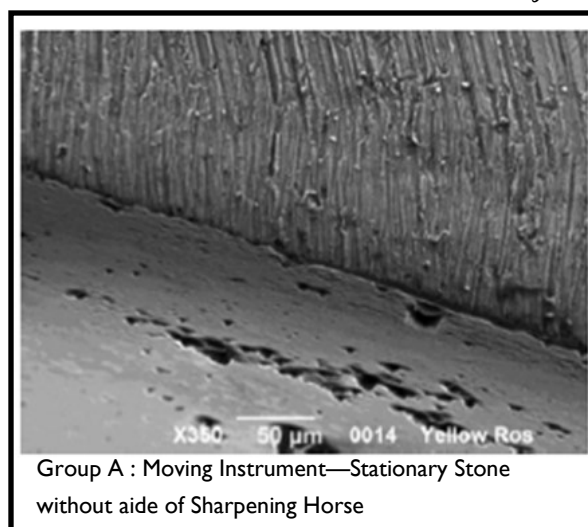
Three groups were considered based on three sharpening methods used: group A (moving a PC over a stationary stone); group B (moving a stone over a stationary PC) and group C (moving a PC over a stone fixed, placed on a 'sharpening horse'). After the sharpening, the blades were examined using SEM. The SEM images were assessed independently by five different independent observers. An evaluation board was used to assign a value to each image. A preliminary pilot study was conducted to establish the number of samples. Pearson's correlation test was used to assess the correlations between measurements. anova test with Bonferroni's post hoc test was used to compare the three groups.

RESULTS:

Sixty PCs (20 PCs per group) were used in this study. Statistically significant differences emerged between the three groups (P-value = 0.001). Bonferroni's test showed that the difference between groups A and B was not statistically significant (P-value = 0.80), while it was significant for the comparisons between groups A and C (P-value = 0.005) and between groups B and C (P-value = 0.001).

CONCLUSIONS:

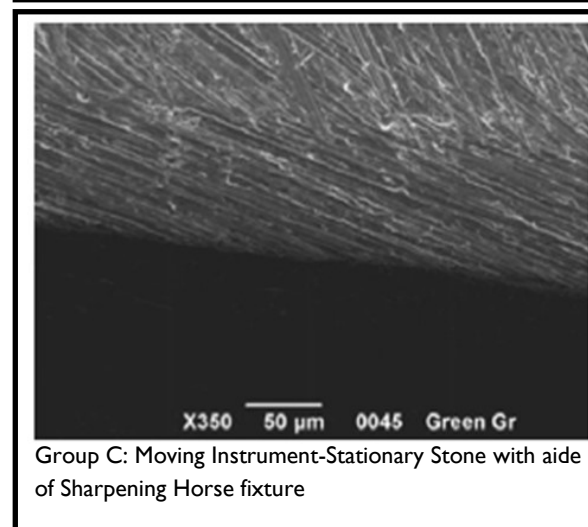
The sharpening technique used in group C, which involved the use of the sharpening horse, proved the most effective.



Group A : Moving Instrument—Stationary Stone without aide of Sharpening Horse



Group B: Moving Stone— Stationary Instrument



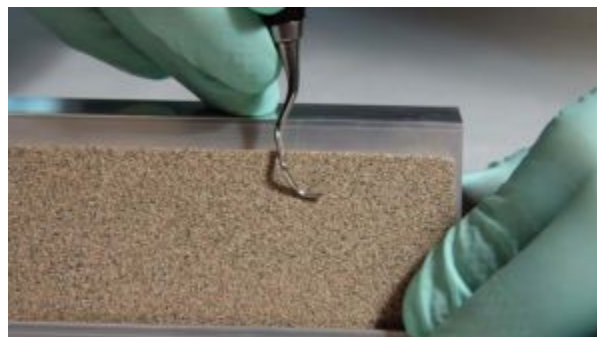
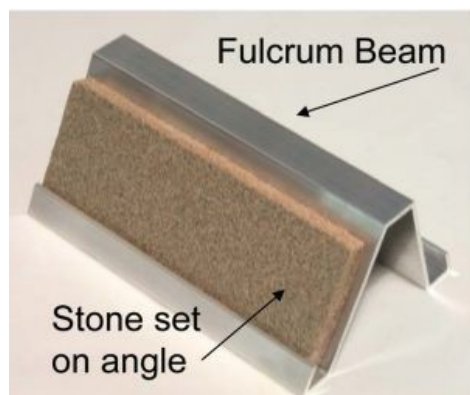
Group C: Moving Instrument—Stationary Stone with aide of Sharpening Horse fixture

Permission Granted by Author

Descriptive Statistical Analysis of scores in the measurements	Observer 1		Observer 2		Observer 3		Observer 4		Observer 5	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Group A (Moving Inst. Stationary Stone without Sharpening Horse)	2.3	0.44	2.5	0.97	2.5	0.51	2.2	0.70	2.5	0.51
Group B (Moving Stone – Stationary Inst.) Worst Technique	2.9	0.97	3.1	0.60	3.4	0.81	3.4	0.68	3.2	0.94
Group C (Moving Inst. Stationary Stone with Sharpening Horse fixture)	1.5	0.51	1.6	0.51	1.6	0.60	1.6	0.50	1.6	0.51

We Learn From Our Students!

The Sharpening Horse was introduced six years ago with the demonstration of one technique: Fulcrum on the beam of the Horse while moving the instrument across the stone and pivoting to maintain the contours of the blade. Some faculty and students found the technique difficult to master. Sure enough, students taught us a simpler technique. Fulcrum on the leg or fulcrum the whole hand on the table holding the instrument stationary while using the non-dominant hand to move the entire Sharpening Horse Fixture and Stone as a unit around the entire blade. As long as the face of the blade was kept parallel to the table top and movement according to the contours of the blade were maintained; precise, perfect cutting edges were created. Since the sharpening technique was still performed along the length of the blade, no multi-bevels or irregularities were created. No conical stone finishing necessary.



Original technique: Fulcrum on the Beam



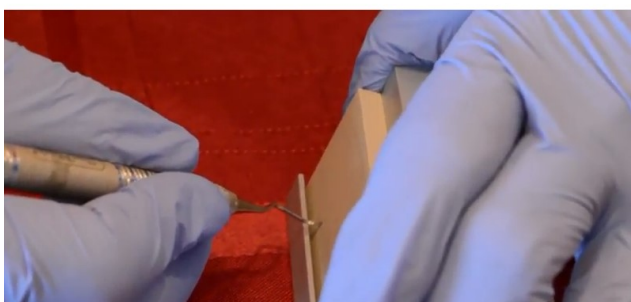
Student 2nd technique: Fulcrum on the leg.



Student 3rd technique: Fulcrum on table move entire fixture/stone



Student 3rd technique: Fulcrum on table move entire fixture/stone



Student 3rd technique: Fulcrum on table move entire fixture/stone finishing around toe with face parallel to table top. Eureka! Perfectly shaped, sharp instruments!



And the technique is easy for either edge always moving heel to toe!

Watch the video demonstration to learn the new techniques:

<https://www.youtube.com/watch?v=r4A56UuTP3Q&feature=youtu.be>

Testimonials on the Sharpening Horse

"Now that the students use the Sharpening Horse, we can introduce sharpening earlier in the curriculum as it is so easy for them to master the technique. The instruments last longer. When they trade in their instruments before they take their boards the instruments are not over sharpened and worn like they use to be with the old techniques. With the Sharpening Horse technique there is more cutting edge left than before. It is much easier to get consistency with their sharpening with this technique. **I have tried all the sharpening systems out there and this is the only thing that truly works!"** *Marta Ferguson, RDH, PhD, Director of Dental Hygiene, Indian River State College, FL*

"The report from the second year instructors is that the students' instruments are not only sharp, but they are holding their shape and contour which **is a vast improvement over the stationary instrument/moving stone method** which caused many curets to be turned into sickles from holding the stone at the wrong angle. The Sharpening Horse is easy to teach and use!" *Janet Ogden, RDH, MS Columbia Basin College, WA.*

"We teach the students the stationary instrument/moving stone method first and then show them the Sharpening Horse. This year, the students wanted to know why we taught the other method when the Sharpening Horse is so much easier and exact. I like the Sharpening Horse because it makes sharpening so easy. "DIY Sharpening for Dummy's!" No need to spend so much time thinking about angles. **The Sharpening Horse automatically "sets the perfect angle"** of the stone for the bevel of the blade." *Susan Smith, RDH, MS Clinic Coordinator, Wake Technical College, Raleigh, NC.*

"I discussed the Sharpening Horse technique with the full-time faculty and they said instrument sharpening has been much easier to teach and learn using the Sharpening Horse technique. By using it routinely students have positive experiences with their instrumentation. The Sharpening Horse helps to maintain the integrity of the instruments." *Susan Moss RDH, MS, Collin State College, McKinney, TX*

"The Sharpening Horse design is a brilliant, user friendly approach to the critical maintenance of dental hygiene instruments. The concept and the technique is very adaptable for novice and experts in dental hygiene, and our **program faculty made the Sharpening Horse its choice recommendation** for the dental hygiene student kits from this time forward!" *Vicki L. Snell RDH, EdM Lewis & Clark Community College, IL*

"Recently I had the opportunity to sharpen many instrument kits for a hands on scaling technique presentation. Each kit contained 10 various curettes and scalers. **I was amazed at how easy it was to sharpen these instruments quickly and precisely with the Sharpening Horse.** I recommend the Sharpening Horse to all my students, faculty and fellow hygienists at every given opportunity. When I am in clinic and instruments need sharpening I have the students take their instruments for a quick ride on the Sharpening Horse and they are truly amazed at how accurate and easy this technique is to return their blades back to a sharp and effective working edge." *Cathleen Korondi, CDA, RDH, EdM, Director of Dental Hygiene Illinois Central College*

The sharpening horse has proven to be the best method of sharpening instruments for our students. The technique is easy to learn for beginning clinicians, producing a sharp cutting edge and maintaining the original design of the blade. The instruments are lasting longer, since the **students can consistently control the angle, pressure and movement of the blade against the stone.** They love it and sharpening has never been so easy. *Michele Edwards, CDA, RDH, MS Tallahassee Community College Dental Programs, FL.*

Instrument sharpening is one of the most important, yet challenging, skills for hygiene students to master. The Sharpening Horse makes this skill easy to learn and students can quickly produce a perfectly sharp cutting edge restoring the blade in its original design. **Confidence in their ability to produce a sharp cutting edge motivates students to employ instrument sharpening as a routine daily task.** *Jill S. Nield-Gehrig, RDH, MS Dean Emeritus Asheville-Buncombe Technical College, NC*

The Sharpening Horse is great to use chairside as it is easy to use and to autoclave. It has given the students the confidence to sharpen their instruments without asking, "Am I doing this right?" Our instructors say that the Sharpening Horse makes it so easy for students to sharpen instruments **they actually use it in clinic!"** *Catherine Dunn, RDH, MS Director of Dental Hygiene Mississippi Delta College*

Sharpening Horse Kits include the fixture, ceramic stone, directions and test sticks.

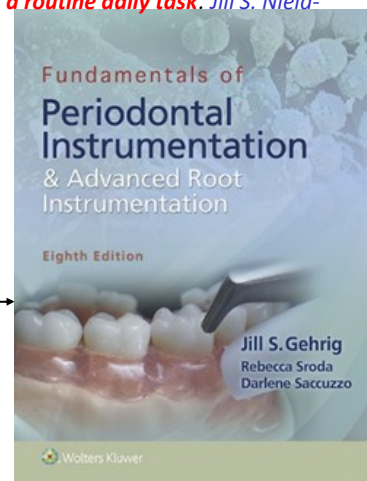
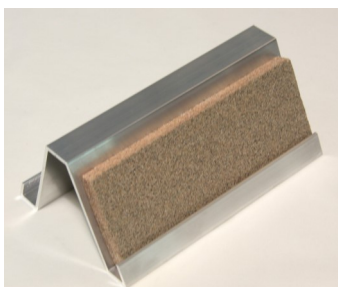
Original instructions on how to use the Sharpening Horse can also be found on Pages 616-623 of this textbook

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Purchase one at retail price of \$79.95 now:

<https://www.dhmethod.com/product/the-sharpening-horse-kit/>



Changes for Summer Camp 2018

Our venue will again be at the Hampton Inn & Suites Historic Harbor Downtown Fernandina Beach, Amelia Island, FL. All classes will be held in the hotel or within walking distance at nearby meeting rooms.

DH Clinical Teaching Methodology will be 16 hours and a built in rotation will allow for only 15 course participants in each section. There will be two rotation sessions to allow for 30 attendees.

Radiology Educator's Workshop is led by Dr. John Preece and Dr. Allison Buchanan and also includes a half day of hands-on instruction plus a half day of "How to Teach Radiology" course materials by Bobbie Brown and Rene Graham.

We rotate the "How to Teach" specific subject courses. Please refer to page 11 of this newsletter to view the preliminary schedule.



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Dental Hygiene

References : CODA website Links

CODA Meeting Documents 2017:

<http://www.ada.org/en/coda/accreditation/coda-meeting-materials>

DH Accreditation Standards Implementation 2017:

http://www.ada.org/~media/CODA/Files/2017_dh.pdf?la=en

DH Self Study Guide Implementation 2017:

<http://www.ada.org/en/coda/site-visits/prep-for-allied-dental-site-visit/allied-dental-site-visit-documents>

Unofficial Report of Major Actions August 2016:

http://www.ada.org/~media/CODA/Files/coda_actions_Aug2016.pdf?la=en

Evaluation and Operational Policies and Procedures:

http://www.ada.org/~media/CODA/Files/eopp_changes_summer2016.pdf?la=en

Dental Therapy Standards:

<http://www.ada.org/~media/CODA/Files/dt.pdf?la=en>



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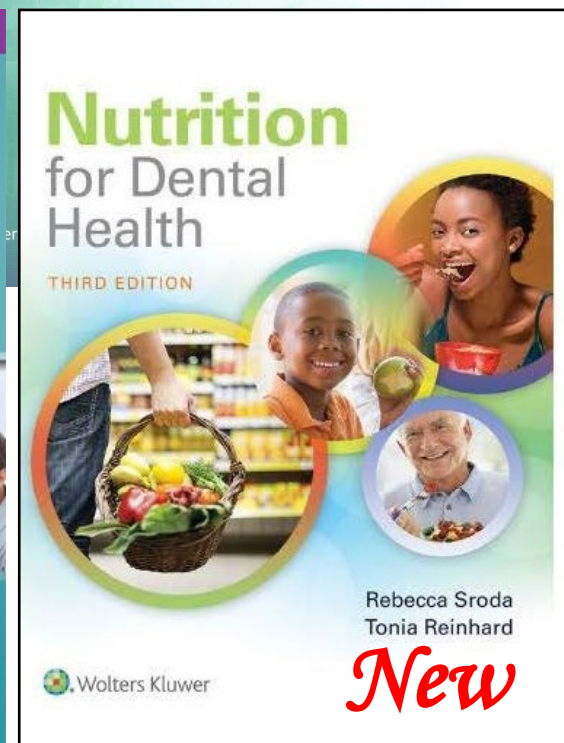
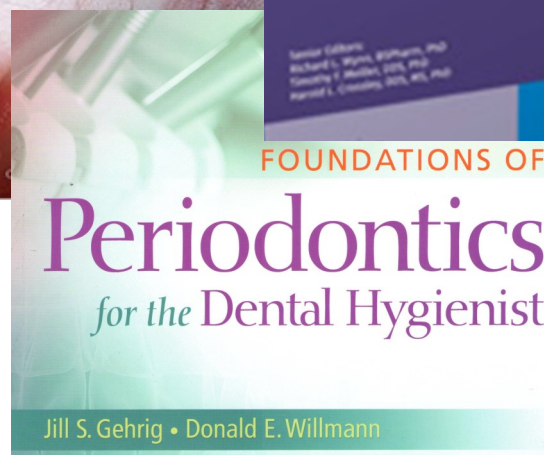
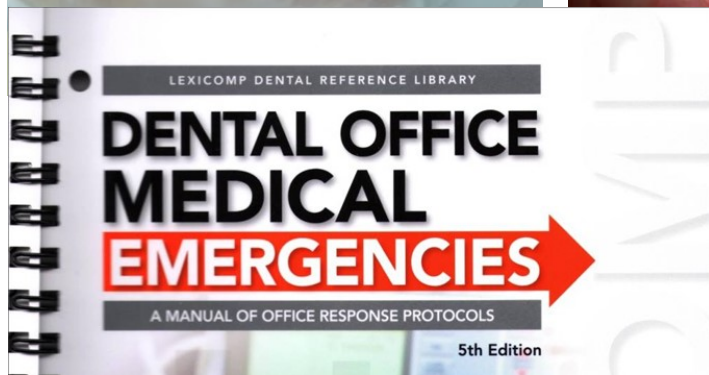
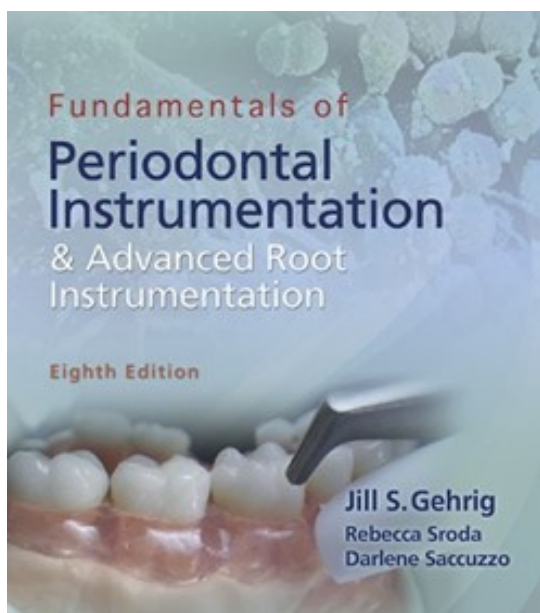
HYGIENE INSPIRED HYGIENIST APPROVED

Designed by an elite team of practicing hygienists and recognized ergonomic and infection control experts, the RDH Elite works to improve ergonomics, productivity and career longevity. Encompassing an optimal field width and depth recommended for dental hygiene professionals, the optics deliver a crisp image with edge-to-edge clarity. Capitalizing on ever-changing fashion, the loupe's frame also incorporates inter-

•<http://www.orascope.com/products/loupes/xv1-loupe-light>

October Issue 2017

The Best Textbooks for DA, DH & DT Students



Summer Camp Amelia Island 2018
Schedule of Courses

Mon, July 30		Mon, July 30	Tues. July 31	Wed. Aug 1		Thurs. Aug. 2		Fri. Aug. 3	
Egmont & City Hall		Kensington	Egmont & City Hall	Egmont Strathmore	Kensington	Egmont Strathmore	Kensington	Egmont Strathmore	Kensington
8:00 AM		8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM
Course #1 Day 1		Course #2	Course #1 Day 2	Course #5	Course #7 Day 1	Course #8	Course #7 Day 2	Course #10	Course #7 Day 3
DH Clinical Teaching Methodology		DA Accreditation Workshop	DH Clinical Teaching Methodology	How to Teach Pharmacology	Radiology Educator's Workshop	How to Teach Local Anesthesia	Radiology Educator's Workshop	DH Accreditation Workshop	Radiology Educator's Workshop
Preclinic Melissa Olson		Christine Dominick Becky Sroda	Root Instrument. Christine Dominick & Team	Cathy Korondi	Dr. Buchanan Dr. Preece	Brent Molen	Dr. Buchanan Dr. Preece	Gwen Welling	Course on flash drive
				End at Noon		End at Noon			Bobbie Brown
End at Noon		End at Noon	End at Noon	End at Noon	End at Noon	End at Noon	End at Noon	End at Noon	End at Noon
Noon: Lunch	Noon: Lunch	Noon: Lunch	Noon: Lunch	Noon: Lunch	Noon: Lunch	Noon: Lunch	Noon: Lunch	Noon: Lunch	Noon: Lunch
1:00 PM	1:00	1:00 PM	1:00	1:00	1:00	1:00	1:00	1:00	1:00
			Course #4	Course #6		Course #9			Course #11
Continue	Continue	Continue	How to Teach Nutrition	How to Teach Ethics		How to Teach Histology & Embryology	Continue Hands-on	Continue	How to Teach Dental Materials
Preclinic Instrument. Cindy Leiseca & Team		Planning, Calibrating, Evaluating Team	Becky Sroda	Robin Matloff		TBA	Bobbie Brown Rene Graham		Bobbie Brown
End at 5 PM	End at 5 PM	End at 5 PM	End at 5 PM	End at 5 PM	End at 5 PM	End at 5 PM	End at 5 PM	End at 5 PM	End at 5 PM

Classrooms at the Hampton Inn are Egmont/Strathmore and Kensington

The Commission Chambers at City Hall provides additional classroom space and it is located across the street from the hotel.

Lunch is provided as part of your course tuition any day that you attend class and it is served at Joe's 2nd Street Bistro which is also across the street from the hotel.