

## CODA Unofficial Report of Major Actions

by Cindy Biron

Here is a summary of the CODA February 1-2, 2018 Unofficial Report of Major Actions limited to concerns of DA and DH Programs

### Accreditation Reports

- 1 New DH Program granted accreditation
- 7 DA Programs received a formal warning that accreditation will be withdrawn in August 2018 unless the requested information, demonstrating compliance with the accreditation standards, is submitted prior to that time.
- 1 DA and 2 DH programs submitted voluntary discontinuance of accreditation effective on planned closure date

[https://www.ada.org/~media/CODA/Files/coda\\_unofficial\\_report\\_major\\_actions\\_feb2018.pdf?la=en](https://www.ada.org/~media/CODA/Files/coda_unofficial_report_major_actions_feb2018.pdf?la=en)

### Revisions to Standards with Immediate Implementation

- DA Standards 1-7, 2-5, 2-21, 2-22, 3-4, and 3-6
- DH Standards 2-14, 3-7

### Proposed Revisions to Accreditation Standards to be circulated to the communities of interest for comment including, as applicable hearings at the 2018 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.

### In this issue:

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### Standing Committee on Finance

Approved 2019 Annual and Application Fees as follows:

4% increase in annual fees for all disciplines in 2019

\$1970 for DA, DH, DT

\$1400 for DLT

Doubled fees year of site visit

\$16,850 New Program Application fee

\$4,320 for Focused Site Visit

**\$4,000** CODA Penalty for Non-Compliance with CODA Policy on HIPAA effective Winter 2018

\$1000 Penalty for electronic conversion of documents

July 30 - August 3, 2018



# Summer Camp Amelia Island

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## Proposed Revisions To Standards

## Definitions of Terms Used in Dental Hygiene Accreditation Standards

**Dental Hygiene Diagnosis:** ~~Identification of an existing or potential oral health problem that a dental hygienist is qualified and licensed to treat.~~ The identification of an individual's health behaviors, attitudes, and oral health care needs for which a dental hygienist is educationally qualified and licensed to provide.

**Dental Hygiene Process of Care:** A framework where the individualized needs of the patient can be met. The process identifies the causative or influencing factors of a condition that can be reduced, eliminated, or prevented by the dental hygienist. There are six components to the dental hygiene process of care: assessment, dental hygiene diagnosis, planning, implementation, evaluation, and documentation.

**Interprofessional Education:** When students and/or professionals from two or more professions learn about, from and with each other to enable effective collaboration to improve health outcomes.

### STANDARD 2 - EDUCATIONAL PROGRAM Curriculum

**2-8d Dental hygiene science content must include oral health education and preventive counseling, health promotion, patient management, clinical dental hygiene, provision of services for and management of patients with special needs, community dental/oral health, medical and dental emergencies, legal and ethical aspects of dental hygiene practice, infection and hazard control management, and the provision of oral health care services to patients with bloodborne infectious diseases.**

**Intent:** *Dental hygiene sciences provide the knowledge base for dental hygiene and prepares the student to assess, perform dental hygiene diagnoses, formulate a treatment plan, implement, and evaluate, and document dental hygiene services as an integral member of the health team. Content in provision of oral health care services to patients with bloodborne infectious diseases prepares the student to assess patients' needs, perform dental hygiene diagnoses, and formulate a treatment plan, implement, and evaluate, and document appropriate treatments.*

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Tongues can also be added to most of our models. We have a clip on style (shown above) and also a screw-in style. The screw-in style must be ordered with the model so it can be inserted before shipping.



The PortaSim stand, was created with input from Cindy Biron so that Kilgore could offer a portable, free-standing unit featuring durability and versatility. The unit allows full 360 degree access around the typodont. The mount is height adjustable to accommodate most students.



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2018 DH Clinic Key Will be Available July 2018!

Biron's Quick Reference of Top 400 Drugs

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

ARICEPT, donepezil	Cholinergic: Alzheimer's disease	Ø	Ketoconazole
ARIMIDEX, anastrozole	Aromatase inhibitor: Breast cancer	Ø	Ø
aripiprazole, ABILIFY	Antipsychotic: Schizophrenia, bipolar disorder	Extrapyramidal effects	Anti-infectives
ANORO ELIPTA, medroxyprogesterone acetate	Progestin: Contraception	Xerostomia, sore throat, sinusitis	<b>Never use for Asthma attack</b>
ARMOUR THYROID, thyroid	Thyroid hormone: Hypothyroidism	No precautions if controlled	None if controlled
ARNITU ELIPTA, fluticasone	Inhaled corticosteroid: Asthma	Oral candidiasis	Ø
ARTHRON, diclofenac	NSAID: Pain, inflammation	Ø	Benzodiazepines
ASACOL, mesalamine	5-ASA: Ulcerative colitis	Pharyngitis	Ø
ASMANEX Twist, budesonide	Inhaled corticosteroid: Asthma	Oral candidiasis	Ø
aspirin, Bayer	Antiplatelet: Aspirin therapy for heart disease	Bleeding time, hemorrhage	Some antibiotics
ASTELIN, azelastine	Nasal spray: Rhinitis	Taste, xerostomia, aphthous	CNS depressants
ATACURATE, dexamethasone	AIIB: HTN	* "boxed warning"	Ø
ATELLO, sodium	Bisphosphonate: osteoporosis	ONJ	Ø
atenolol, TENORETIC	BB: Angina, HTN	Ø	NSAIDs long term
atenolol, TENORETIC	BB: Angina, HTN	Hypotension	Ø
atenolol, TENORETIC	BB: Angina, HTN	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 Signs Pulse
- Upon arrival of Doctor

Member DDS

Emergency Treatment

Emergency Treatment

## Dental Office Pharmacology

Simplifying the complex concept of pharmacology

2017 Key available for purchase now at our online store:

<https://www.dhmethod.com/product/dh-clinic-key-2016/>

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

## Dental Materials Review NBDHE

Roberta E. Brown, CDA, RDH, MSDH

## Pathology Review

Deborah Sparks RDH, MAED

## REVIEW ONTOLOGY

Cynthia Biron Leiseca, RDH, EMT, MA

## FOUNDATIONS OF 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    Dental History    Temperature Assessment    Pulse & Respiration    Blood Pressure  
Smoking Cessation    Head & Neck Exam    Gingival Description    Radiographs

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

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



John W Preece, DDS, MS

Continued from Page 3

### Patient Care Competencies

**2-13 Graduates must be competent in providing the dental hygiene process of care which includes:**

- a. **comprehensive collection of patient data to identify the physical and oral health status;**
- b. ~~**analysis of assessment findings and use of critical thinking in order to address the patient's dental hygiene treatment needs; formulation of dental hygiene diagnoses which require evidence-based critical analysis and interpretation of assessments in order to reach conclusions about the patient's dental hygiene treatment needs;**~~
- c. **establishment of a dental hygiene care plan that reflects the realistic goals and treatment strategies to facilitate optimal oral health;**
- d. **provision of patient-centered treatment and evidence-based care in a manner minimizing risk and optimizing oral health;**
- e. **measurement of the extent to which goals identified in the dental hygiene care plan are achieved;**
- f. **complete and accurate recording of all documentation relevant to patient care.**

**Intent:** *The dental hygienist functions as a member of the dental team and plays a significant role in the delivery of comprehensive patient health care. The dental hygiene process of care is an integral component of total patient care and preventive strategies. The dental hygiene process of care is recognized as part of the overall treatment plan developed by the dentist for complete dental care.*

**Examples of evidence to demonstrate compliance may include:**

- Program clinical and radiographic experiences
- Patient tracking data for enrolled and past students
- Policies regarding selection of patients and assignment of procedures
- Monitoring or tracking system protocols
- Clinical evaluation system policy and procedures demonstrating student competencies
- Assessment instruments
- Evidence-based treatment strategies
- Appropriate documentation
- Use of risk assessment systems and/or forms to develop a dental hygiene care plan

<https://www.ada.org/en/coda/current-accreditation-standards/proposed-accreditation-standards>

# TalEval

## Computerized Clinical Grading & Outcomes Assessment for Dental Programs

### Available in Two Grading Formats:

- Objective Statistical Analysis
- Grade by Appointment
- Web based & Encrypted

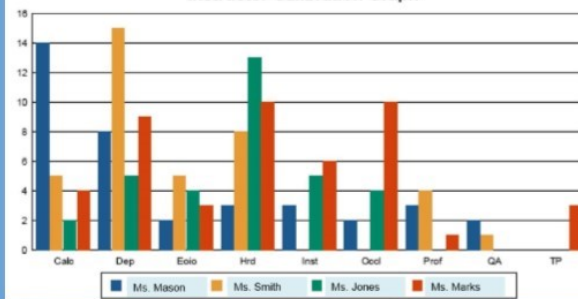
### Reports Generated Serve as Exhibits for CODA:

- 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

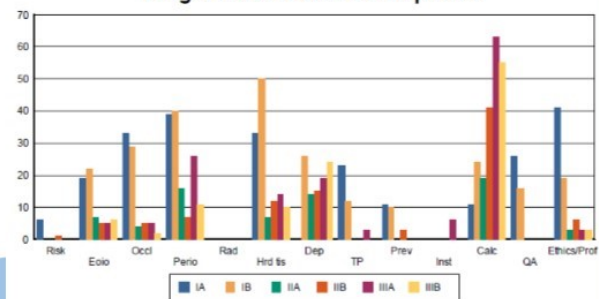
Dental Hygiene Process of Care Grade Entry Form

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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## Curriculum Management

**2-24 The dental hygiene program must have a formal, written curriculum management plan, which includes:**

- a) **an ongoing curriculum review and evaluation process with input from faculty, students, administration and other appropriate sources;**
- b) **evaluation of the effectiveness of all courses as they support the program's goal's and competencies;**
- c) **a defined mechanism for coordinating instruction among dental hygiene program faculty;**
- d) **a defined mechanism to calibrate dental hygiene faculty for student clinical evaluation.**

### Intent:

*To assure the incorporation of emerging information and achievement of appropriate sequencing, the elimination of unwarranted repetition, and the attainment of student competence, a formal curriculum review process should be conducted on an ongoing and regular basis. Periodic workshops and in-service sessions should be held for the dissemination of curriculum information and modifications.*

### Examples of evidence to demonstrate compliance may include:

- competencies documentation demonstrating relationship of course content to defined competencies of the program
- documentation of ongoing curriculum review and evaluation
- minutes of meetings documenting curriculum review and evaluation
- student evaluation of instruction
- curriculum management plan
- **documentation of calibration exercises**



## Sharpening: Irrefutable Evidence

**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 A<sup>1</sup>](#), [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:

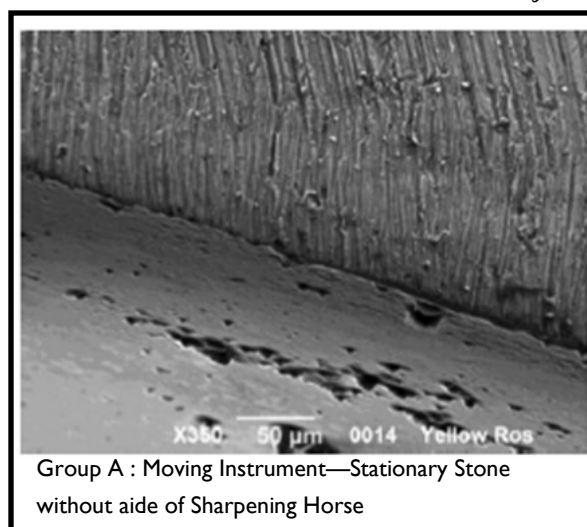
Three groups were considered based on three sharpening methods used: group A (moving a PC over a stationary stone); group B (moving a stone over a stationary PC) and group C (moving a PC over a stone fixed, placed on a 'sharpening horse'). After the sharpening, the blades were examined using SEM. The 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:

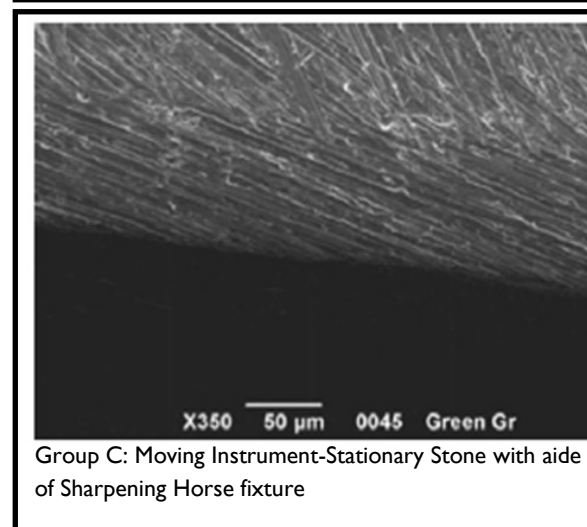
The sharpening technique used in group C, which involved the use of the sharpening horse, proved the most effective.



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



Group B: Moving Stone— Stationary Instrument



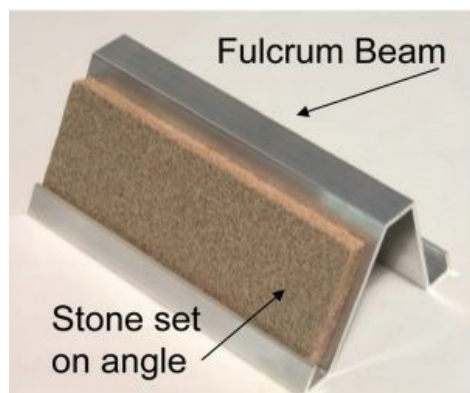
Group C: Moving Instrument—Stationary Stone with aide of Sharpening Horse fixture

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.) <b>Worst Technique</b>	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.



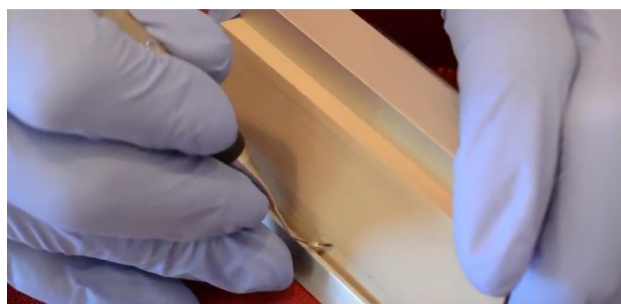
Original technique: Fulcrum on the Beam



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.**

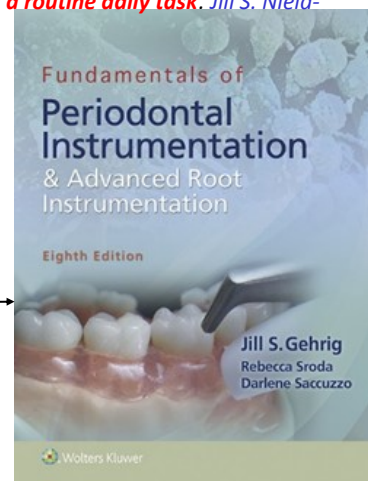
Original instructions on how to use the Sharpening Horse can also be found on Pages 616-623 of this textbook

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### In the Spotlight



Marianne Dryer RDH, M Ed

Marianne Dryer is a dynamic speaker, educator and corporate consultant in curriculum development. She has lectured nationally and internationally on periodontal instrumentation with a focus on ultrasonic technique, risk assessment, infection prevention and radiology technique. Marianne's experience in dentistry spans over 30 years. She is a graduate of Forsyth School for Dental Hygienists, Old Dominion University and received her Master's in Education from St Joseph's College of Maine. Marianne was the first year coordinator at Collin College in Dallas Texas for six years where she was selected for the Outstanding Faculty Award and was nominated for the Advisor of the Year. She has been a faculty member at Cape Cod Community College since 2007. Marianne is also a Periodontal Instrumentation Instructor for DH Methods of Education, Inc., Summer Camp Amelia Island. She has been on the camp faculty on alternating years since 2008 at Summer Camp Boston, Summer Camp Jacksonville, Summer Camp Amelia Island, and Fall Camp Collin College. This year Marianne will be teaching in the DH Clinical Teaching Methodology Workshop and the Radiology Educator's Workshop (hands-on session). She will also be presenting the course "*Coronal Polishing Within the Curriculum*" on Thursday evening 5:15—6:15pm. This course is free to those who are enrolled in at least one other day course in the camp.



Brent Molen RDH, M Ed

Brent Molen has been teaching dental hygiene students since 2008. Brent currently serves as a permanent Board Member and as College President and Program Director of the dental hygiene program at the Utah College of Dental Hygiene (UCDH) in Orem, Utah. He has taught numerous courses including Dental Morphology, Dental Embryology & Histology, Dental Materials, National Board Review, Professional Dental Hygiene IV, and Expanded Functions. Brent has also served as a clinical instructor for first and second year dental hygiene students as well as a clinical local anesthesia instructor. Brent has been working in the dental field for more than twenty eight years. He has worked as a dental assisting program instructor, a dental laboratory technician, a dental laboratory owner, a co-owner of two dental practices (The Mall Dental Group and Hollywood Dental for Kids), a dental front office manager, a pediatric surgical center/O.R. dental assistant, and a dental hygienist/educator/administrator. Brent has been the Western Regional Examination Board (WREB) School Coordinator at the Utah

College of Dental Hygiene since 2008. In 2012 Brent was presented with the Instructor of The Year Award from the Accrediting Commission of Career Schools and Colleges (ACCSC) and in 2015 was presented with the Volunteer of the Year at ACCSC's Annual Meeting. Brent has volunteered as a Team Leader conducting accreditation site visits for ACCSC since 2008. He enjoys speaking in various forums and locations nationally sharing his ideas with other like-minded dental professionals. This is Brent's third year on the faculty Summer Camp Amelia Island. This year he is teaching in two of the free evening courses: Course #12 *ProFound L.A* and Course #13 *Preview to Teaching Your Own Board Review*. He is also presenting the workshop Course #8 *How to Teach Local Anesthesia*.

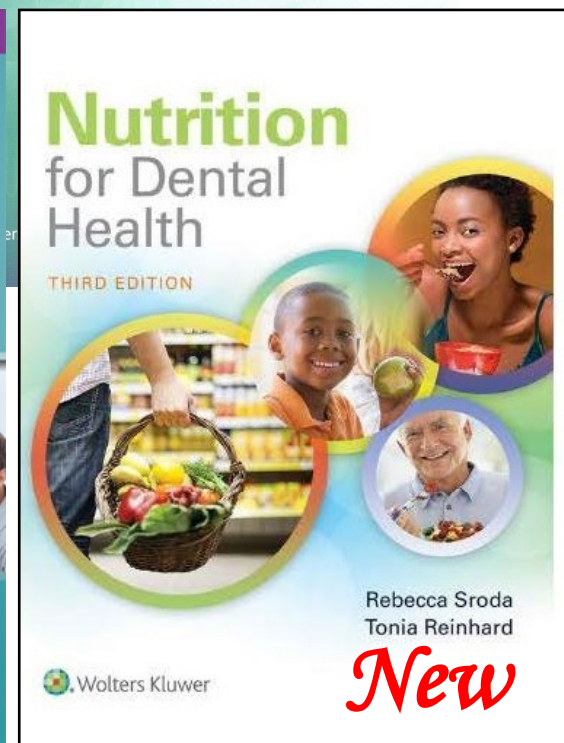
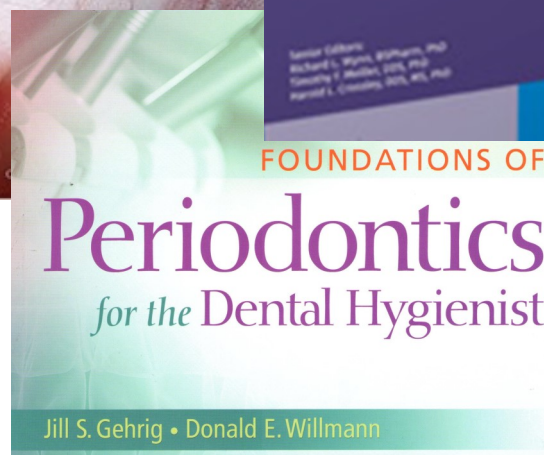
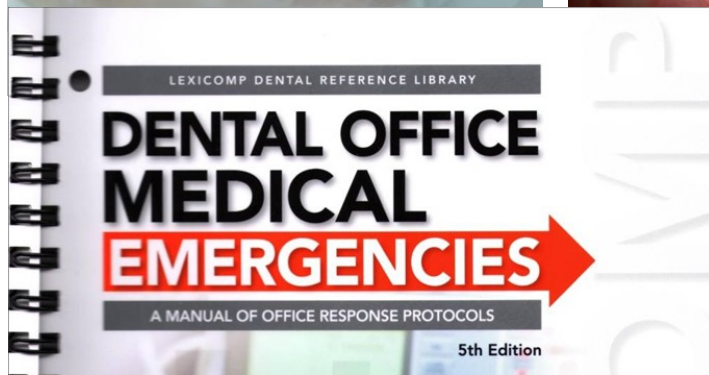
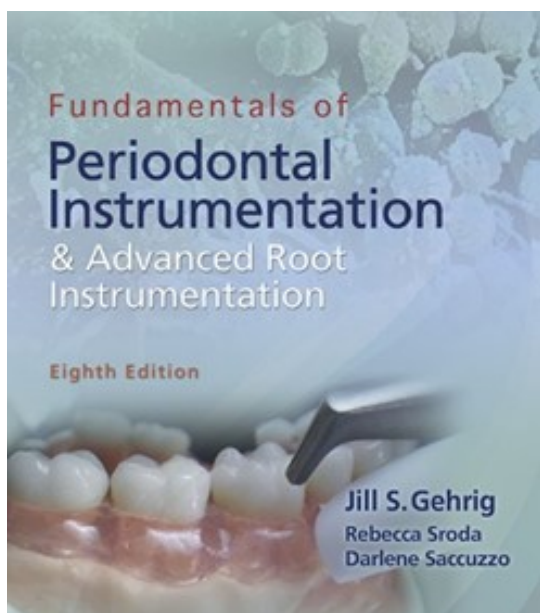
### The Free Evening Courses

There are three courses offered Tuesday, Wednesday and Thursday evenings. They are each one hour long , 5:15-6:15pm. They are only available to those who are enrolled in at least one day course during camp. Register at the door at 5:00pm on the evening of each class you wish to attend. You will receive your certificate at the end of each course.



March Issue 2018

## The Best Textbooks for DA, DH & DT Students





# Summer Camp Amelia Island 2018

## Schedule of Classes

Mon. July 30	Mon. July 30	Tues. July 31	Tues. July 31	Tues. July 31	Wed. Aug. 1	Thurs. Aug. 2	Fri. Aug. 3
Egmont & City Hall	Kensington	Egmont & City Hall	Kensington	Kensington	Egmont Strathmore	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
Course #1 Day 1	Course #2	Course #1 Day 2	Course #3	Course #5	Course #7 Day 1	Course #8	Course #10
<b>DH Clinical Teaching Methodology</b>	<b>DA Accreditation Workshop</b>	<b>DH Clinical Teaching Methodology</b>	<b>How to Teach Oral Anatomy</b>	<b>How to Teach Pharmacol.</b>	<b>Radiology Educator's Workshop</b>	<b>How to Teach Local Anesthesia</b>	<b>DH Accreditation Workshop</b>
<b>Preclinic</b> Melissa Olson	Christine Dominick Becky Sroda	<b>Root Instrument.</b> Christine Dominick & Team	Melissa Olson	Cathy Korondi	Dr. Buchanan Dr. Preece	Brent Molen	Gwen Welling
Noon: Lunch	Noon: Lunch	Noon: Lunch	End at Noon: Lunch	End at Noon: Lunch	Noon: Lunch	End at Noon: Lunch	Noon: Lunch
1:00 PM Continue	1:00 PM Continue	1:00 PM Continue	1:00 PM Course #4	1:00 PM Course #6	1:00 PM Continue	1:00 PM Course #9	1:00 PM Continue
<b>Preclinic Instrument.</b> Cindy Biron & Team	End	<b>Planning, Calibrating, Evaluating Team</b>	<b>How to Teach Nutrition</b>	<b>How to Teach Ethics</b>	<b>Hands-on Session</b>	<b>How to Teach Histology &amp; Embryology</b>	<b>How to Teach Dental Materials</b>
Continues next morning			Becky Sroda	Robin Matloff			
5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM
<b>Early Evening Reception &amp; Classes</b>							
Mon. July 30, 5:30 – 7:00 PM	Tue. July 31, 5:15-6:15 PM	Wed. Aug. 1, 5:15-6:15 PM	Thurs. Aug. 2, 5:15-6:15 PM	<b>5:00 PM</b>			
London Medical Spa	Egmont Strathmore	Egmont Strathmore	Egmont Strathmore	<b>Camp Ends</b>			
<b>Dr. London's Reception</b>	<b>Profound L.A. Learning Concepts &amp; Techniques</b>	<b>Preview to Teaching A Board Review. Is it a Fit?</b>	<b>Coronal Polishing Instruction Within the Curriculum</b>				
	Brent Molen, RDH, MS	Brent Molen, RDH, MS	Marianne Dryer, RDH, MS				

**PRINT Name:** \_\_\_\_\_

*(This is how your name will appear verifying your continuing education credits)*

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax \_\_\_\_\_ E-mail: \_\_\_\_\_

**College/ Univ. Where Teaching:** \_\_\_\_\_ Circle your discipline: CDA, DDS, DMD, RDH

Requests for cancellations must be received at least 2 weeks prior to the camp date. However, for cancellations received after this deadline, 75% of the tuition may be applied toward future camps. Tuitions for no-shows will be forfeited NO EXCEPTIONS. DH Methods of Education, Inc. is not responsible for reimbursement of non-refundable airline tickets and any other travel expenses if the course is cancelled.

	<b>Early Bird Registration Full Payment by: <u>April 2, 2018</u></b>	<b>Final Registration Full Payment by <u>July 10, 2018</u></b>
<b>Mon. July 30 &amp; Tues. July 31, 8a-5p</b>		
1. <a href="#">DH Clinical Teaching Methodology</a> (16 ceu's)	\$600 _____	\$650 _____
<b>Mon. July 30, 1a-5p</b>		
2. <a href="#">DA Accreditation Workshop</a> (8 ceu's)	\$450 _____	\$525 _____
<b>Tues. July 31, 8a-Noon</b>		
3. <a href="#">How to Teach Oral Anatomy</a> (4 ceu's)	\$450 _____	\$525 _____
<b>Tues. July 31, 1-5p</b>		
4. <a href="#">How to Teach Nutrition</a> (4 ceu's)	\$450 _____	\$525 _____
<b>Wed. Aug. 1, 8a-Noon</b>		
5. <a href="#">How to Teach Pharmacology</a> (4 ceu's)	\$450 _____	\$525 _____
<b>Wed. Aug. 1, 1-5p</b>		
6. <a href="#">How to Teach Ethics</a> (4 ceu's)	\$450 _____	\$525 _____
<b>Wed. Aug. 1, 8a-5p &amp; Thurs. Aug. 2, 8a – 5p &amp; Fri. Aug. 3, 8a-Noon</b>		
7. <a href="#">Radiology Educator's Workshop</a> (20 ceu's)	\$825 _____	\$950 _____
<b>Thurs. Aug. 2, 8a-Noon</b>		
8. <a href="#">How to Teach Local Anesthesia</a> (4 ceu's)	\$450 _____	\$525 _____
<b>Thurs. Aug. 2, 1-5p</b>		
9. <a href="#">How to Teach Histology &amp; Embryology</a> (4 ceu's)	\$450 _____	\$525 _____
<b>Fri. Aug. 3, 8a-5p</b>		
10. <a href="#">DH Accreditation Workshop</a> (8 ceu's)	\$450 _____	\$525 _____
<b>Fri. Aug. 3, 1-5p</b>		
11. <a href="#">How to Teach Dental Materials</a> (4 ceu's)	\$450 _____	\$525 _____

**Free Evening Courses: Only Available to those enrolled in one of the courses listed above**

- |  |          |
|--|----------|
| 12. ProFound L.A. Discovering & Learning Techniques (1 ceu) Tues. July 31, 5:15-6:15 | NC _____ |
| 13. Preview to Teaching Your Own Board Review (1 ceu) Wed. Aug. 1, 5:15-6:15         | NC _____ |
| 14. Coronal Polishing: New Technologies (1 ceu) Thurs. Aug. 2, 5:15-5:16             | NC _____ |

**Lunch is provided on days you are in class but NOT if you are only enrolled in Free Evening Course that day**

**To register by mail: Make checks payable to:** DH Methods of Education, Inc. and mail to:

**DH Methods of Education, Inc. P.O Box # 180819 Tallahassee, FL 32303 Register online at [www.DHmethEd.com](http://www.DHmethEd.com)**

All classes are held in the hotel and reserved meeting space within walking distance from the hotel.

Hampton Inn & Suites Historic Harbor Downtown 19 South 2<sup>nd</sup> Street, Fernandina Beach, Amelia Island, FL32034

Call Direct for Reservations (904) 491-4911 Block of rooms is under "Dental Camp". Rates are: Single(King) \$139 Two Double \$149 Suite (King or Double) \$159 Deadline for discounted block of rooms expires by **June 28, 2018**