



Registered Dental Assistant (RDA) Program Application for Approval by the Dental Board of California

This Application reflects the requirements of Business and Professions Code Sections 1754.5, 1755, and 1757, and Regulation Sections 1070.2, 1070.3, 1070.4, and 1070.5, which each program must meet to secure and maintain approval by the Dental Board to instruct in Registered Dental Assistant (RDA) duties, including required instruction in radiation safety, coronal polishing, and pit and fissure sealants.

In the Application document, excerpts from the laws appear in normal text, while questions on the Application appear in italic text. The term "B&P" used in the Application document means "Business and Professions Code Section".

1. Fee. A non-refundable application fee in the amount of \$1,400 payable to the Dental Board of California must be submitted with the Application unless your program is accredited by the Chancellor's office of the California Community Colleges.
2. Number of Copies. One original and two copies (one of which may be on a 1x-52x compatible CD in Word format) of the Application and all required documents must be submitted.
3. Completion of Application. Each question on the Application must be answered fully. An incomplete Application will not be accepted.
4. Attachments. All required documents must be attached as separate Attachments as indicated within the Application, and all Attachments must be submitted with the Application unless otherwise noted.
5. Schedule for Program Site Visit. Because of wide differences in survey schedules and facility locations, it is desirable to make specific suggestions as to the site evaluation schedule. The Site Evaluation Team (SET) realizes that schools may wish to make adjustments to the proposed schedule. However, changes must be reviewed with the visiting committee before conferences begin. Submit a proposed schedule with the completed Application.

Items marked with a "*" only apply to existing approved RDA programs that are undergoing re-evaluation.

- Conferences with all full, part time faculty, Dental Assistant Program Administrator, School Director and Other Department Heads, i.e. Placement, Admissions, Career Development.
- Conference with Advisory Committee. Arrangements shall be made for the SET to meet with the members of the advisory committee during the period set aside for the site evaluation. This meeting time can be scheduled during the mid-day or evening of the first day of the visit.

- Classroom, Departments, Equipment and Supplies. The SET will be reviewing the dental classrooms, dental operatories, sterilization area, laboratory area and x-ray processing, library materials, and all required dental equipment and supplies for the program.
- *Records Evaluation. The TEAM will be reviewing all of the required records for the following areas: current records kept by program director; all faculty meetings, coronal polishing records, pit and fissure sealant records; radiation safety records; minimum performance records; practical exams etc.
- *Extra-mural Facilities. The Site Evaluation Team will visit at least two offices or facilities in which a student is currently participating in the clinical portion of training. Arrangements shall be made for the SET to meet with representatives of such a facility or office who have responsibility for supervising students' clinical experience.
- *Conferences with Students. The site visit schedule shall include a period for the SET to meet with the students. Faculty members shall not be included in meetings with students.
- Conference Schedule. The following conference schedule is a *suggested format only*. It is understood that program schedules may dictate another sequence, and it is therefore subject to change.

The site visit is a process where the facility, program, and other required areas will be evaluated over a period of two days. Below are the conferences, reviews, observations and interviews that will be performed. In preparation for this visit, please have documents available for the SET to review.

Note: Prior to the on-site inspection (usually the day preceding the visit) of the dental assisting facilities, the SET may visit extramural clinical facilities.

<i>TIME</i>	<i>SUBJECT OF CONFERENCE</i>	<i>PARTICIPANTS</i>
TBA	Meeting with Program Director and Administrators	SET Members
	Tour of Dental Assisting Facilities	Program Administrators Program Director SET Members
	Curriculum Review (including: lesson plans, objectives, criteria, process-product evaluation, written/practical examinations)	Program Director Instructors SET Members
	Review of Facilities, Equipment and Supplies	Program Director Instructors SET Members
	Review of Radiation Safety Records* Review of Coronal Polishing Records* Review of Pit and Fissure Sealant Records* Review of Evaluation from Clinical Facilities*	SET Members SET Members SET Members SET Members

	<p>Review of Advisory Committee minutes* Review of Faculty Meeting minutes*</p> <p>Observe Students during laboratory and clinic performing basic dental assisting and registered dental assisting duties*</p> <p>Private conference with Students*</p> <p>Visit with Advisory Committee Members (With special arrangements, the SET may meet with the advisory committee members on the evening prior to the visit.)</p> <p>Evaluation of Library/Internet</p> <p>Formal Exit Interview</p>	<p>SET Members SET Members</p> <p>SET Members Students Program Director Instructors</p> <p>SET Members Students</p> <p>SET Members</p> <p>SET Members</p> <p>SET Members Program Director School Administrators</p>
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**Registered Dental Assistant (RDA) Program
Application for Approval by the Dental Board of California**

Date of Application: _____

Name of Applicant: _____

Business Name: _____

Address: _____

City, State, Zip: _____ Telephone: _____

Type of Program: Community College Vocational Program Dental School
 Private School Other - specify: _____

Name of Program Director: _____

Telephone: _____ Email Address: _____

Name of Owner (if other than Program Director): _____

Telephone: _____ Email Address: _____

I certify under penalty of perjury under the laws of the State of California that this Application and all attachments are true and correct.

Signature of Program Director

Date

I certify that I will be responsible for the compliance of the program director with the laws governing Registered Dental Assistant Programs. I certify under penalty of perjury under the laws of the State of California that this Application and all attachments are true and correct.

Signature of Owner (if other than the Program Director)

Date

(If sole ownership business, individual owner must sign. If partnership, one of the partners must sign. If a corporation, the CEO or secretary of the Corporation must sign.)

(a) Educational Setting. The program shall be established at the post-secondary educational level. (Excerpt: B&P 1755(a)(5))

1. Is the program established at the post-secondary educational level?

___ Yes ___ No

(b) Administration. The program shall have sufficient financial resources available to support the program and to comply with this section. If the program or school requires approval by any other governmental agency, that approval shall be obtained prior to application to the board for approval and shall be maintained at all times. (Excerpt: B&P 1757(d))

The owner or school administrator shall be responsible for the compliance of the program director with the provisions of this section and Section 1755. (Excerpt: B&P 1757(c))

Programs shall have an advisory committee consisting of an equal number of registered dental assistants and dentists, including at least two registered dental assistants and two dentists, all currently licensed by the board. The advisory committee shall meet at least once each academic year with the program director, faculty, and appropriate institutional personnel to monitor the ongoing quality and performance of the program. Programs that admit students at different phases shall meet at least twice each year. (Excerpt: B&P 1757(b))

2. Does the program have sufficient financial resources to support the program and comply with the laws governing program approval? Attach an explanation as Question 2 Attachment.

___ Yes ___ No

3. Is the program required to be approved by any other governmental agency? If yes, specify which agency and provide a copy of the approval document(s) as Question 3 Attachment.

___ Yes ___ No

4. Is the program accredited by another agency? If yes, specify which agency in Question 4 Attachment.

___ Yes ___ No

5. Does the program have an advisory committee composed of an equal number of RDAs and dentists, including at least two RDAs and two dentists currently licensed by the board? Attach as Question 5 Attachment a table showing the following information for each of the Advisory Members: Name, license number, expiration date, title, and telephone number.

___ Yes ___ No

6. Will the advisory committee meet at least once each academic year (twice each year for programs admitting students at different phases) with the program director, faculty, and appropriate institutional personnel to monitor the ongoing quality and performance of the program? Attach as Question 6 Attachment a description of the content and subjects of the Advisory Committee meetings, which includes its responsibilities and the terms of office of members. Existing approved programs undergoing re-evaluation must also attach copies of minutes of the Advisory Committee meetings for the last five years.

___ Yes ___ No

(c) Program Director. The program director shall possess a valid, active, and current license issued by the board. He or she shall have teaching responsibilities that are less than those of a full-time faculty member, and shall actively participate in and be responsible for the day-to-day administration of the program, including the following requirements:

- (1) Maintaining for a period of not less than five years copies of curricula, program outlines, objectives, grading criteria, and minutes of advisory committee minutes, and copies of faculty credentials, licenses, and certifications, and individual student records, including those necessary to establish satisfactory completion of the program.
- (2) Participating in budget preparation and fiscal administration, curriculum development and coordination, determination of teaching assignments, supervision and evaluation of faculty, establishment of mission criteria and procedures, design and operation of program facilities, and selection of extramural facilities and coordination of instruction in those facilities.
- (3) Holding periodic faculty meetings to provide for subject matter correlation and curriculum evaluation, and coordinating activities of full-time, part-time, and volunteer faculty.
- (4) Informing the board of any major change to the program content, physical facilities, or faculty, within 10 days of the change.
- (5) Ensuring that all staff and faculty involved in clinical instruction meet the requirements set forth in law. (Excerpt: B&P 1755(b) and 1757(c))

7. Does the program director possess a valid, active, and current license issued by the Board? Attach as Question 7 Attachment the name and license number of the proposed program director.

____ Yes ____ No

8. Will the program director have teaching responsibilities that are less than those of a full-time faculty member? Attach as Question 8a Attachment a table or chart containing the following information regarding the intended daily hours for the program director in the specified areas:

____ Yes ____ No

PROGRAM DIRECTOR NAME:	Monday	Tuesday	Wednesday	Thursday	Friday
Daily administrative hours per week:					
Daily student contact hours per week:					
Class preparation hours per week:					
Student counseling hours per week:					
Extern visitation hours per week:					
Comments:					

Attach as Question 8b Attachment a table or chart containing the following information regarding the intended daily hours for EACH faculty member in the specified areas:

FACULTY MEMBER NAME:	Monday	Tuesday	Wednesday	Thursday	Friday
Daily student contact hours per week:					
Class preparation hours per week:					
Student counseling hours per week:					
Extern visitation hours per week:					
Comments:					

FACULTY MEMBER NAME:	Monday	Tuesday	Wednesday	Thursday	Friday
Daily student contact hours per week:					
Class preparation hours per week:					
Student counseling hours per week:					
Extern visitation hours per week:					
Comments:					

FACULTY MEMBER NAME:	Monday	Tuesday	Wednesday	Thursday	Friday
Daily student contact hours per week:					
Class preparation hours per week:					
Student counseling hours per week:					
Extern visitation hours per week:					
Comments:					

FACULTY MEMBER NAME:	Monday	Tuesday	Wednesday	Thursday	Friday
Daily student contact hours per week:					
Class preparation hours per week:					
Student counseling hours per week:					
Extern visitation hours per week:					
Comments:					

9. Will the program director actively participate in and be responsible for the day-to-day administration of the program as specified above? Attach as Question 9 Attachment a description of the intended frequency and content of faculty meetings. Existing approved programs undergoing re-evaluation must also attach copies of minutes of the faculty meetings for the last five years.

___ Yes ___ No

(d) Faculty. Each faculty member shall have been licensed or permitted for a minimum of two years and possess experience in the subject matter he or she is teaching. No faculty member shall instruct in any procedure that he or she is not licensed or permitted to perform. (Excerpt: B&P 1755(c))

Each program faculty member shall have successfully completed a board-approved course in the application of pit and fissure sealants. (Excerpt: B&P 1757(c))

By January 1, 2010, each faculty member shall have completed a board-approved course in instructional methodology of at least 30 hours, unless he or she holds any one of the following: a postgraduate degree in education, a Ryan Designated Subjects Vocational Education Teaching Credential, a Standard Designated Subjects Teaching Credential, or, a Community College Teaching Credential. Each faculty member employed on or after January 1, 2010, shall complete a course in instructional methodology within six months of employment. (Excerpt: B&P 1757(c))

All faculty and staff involved in the direct provision of patient care shall be certified in basic life support procedures, including cardiopulmonary resuscitation. Recertification intervals may not exceed two years. The program director shall ensure and document compliance by faculty and staff. A program shall not be required to ensure that students complete instruction in basic life support prior to performing procedures on patients. (Excerpt: B&P 1755(g)).

Radiation Safety Course - All faculty responsible for clinical evaluation shall have completed a two hour methodology course which shall include clinical evaluation criteria, course outline development, process evaluation, and product evaluation; (Excerpt: Title 16, Regulation Section 1014.1(c)(2))

Pit and Fissure Sealant Course - All faculty responsible for clinical evaluation shall have completed a two hour methodology course in clinical evaluation. (Excerpt: Title 16, Regulation Section 1070.3(c)(1))

Coronal Polishing Course - All faculty responsible for clinical evaluation shall have completed a two hour methodology course in clinical evaluation. (Excerpt: Title 16, Regulation Section 1070.4(c)(1))

10. a. Has each faculty member been licensed for at least two years, and possess experience in the subject matter he or she is teaching? Attach as Question 10a Attachment a table containing the name and license number of each faculty member.

___ Yes ___ No

b. Has each faculty member completed a board-approved course in the application of pit and fissure sealants? Attach as Question 10b Attachment evidence that each faculty member has completed a board-approved course in the application of pit and fissure sealants.

___ Yes ___ No

c. Is each faculty and staff member certified in basic life support? Attach as Question 10c Attachment a copy of each faculty and staff members' current CPR card.

___ Yes ___ No

d. Has each faculty member who will be responsible for clinical evaluation in the following subjects completed a two-hour methodology course for each: radiation safety, pit and fissure sealants, coronal polishing? Attach as Question 10d Attachment a certificate of completion for each faculty member for each course which he or she will be responsible for clinical evaluation.

___ Yes ___ No

11. Will each faculty member be required to complete a board-approved course in instructional methodology on and after January 1, 2010, as specified in B&P 1757(c) (see above)? If this Application is

filed on or after January 1, 2010, attach as Question 11 Attachment evidence that each faculty member has complied with B&P 1757(c).

___ Yes ___ No

(e) Student Certificate of Completion. A certificate or other evidence of completion shall be issued to each student who successfully completes the program and shall include the student's name, *the* name of the program, the total number of program hours, the date of completion, and the signature of the program director or his or her designee. (Excerpt: B&P 1755(d))

12. Will a certificate or other evidence of completion be issued to each student who successfully completes the program as specified above? Attach as Question 12 Attachment a copy of the certificate of completion.

___ Yes ___ No

(f) Emergency Management. A written policy on managing emergency situations shall be made available to all students, faculty, and staff. All faculty and staff involved in the direct provision of patient care shall be certified in basic life support procedures, including cardiopulmonary resuscitation. Recertification intervals may not exceed two years. The program director shall ensure and document compliance by faculty and staff. A program shall not be required to ensure that students complete instruction in basic life support prior to performing procedures on patients. (Excerpt: B&P 1755(g))

Emergency materials shall include, but not be limited to, an oxygen tank that is readily available and functional. Medical materials for treating patients with life-threatening conditions shall be available for instruction and accessible to the operatories. Facilities that do not treat patients shall maintain a working model of a kit of such emergency materials for instructional purposes. (Excerpt: B&P 1757(g)(4))

13. Does the program have a written policy on managing emergency situations, and will it be made available to all students, faculty, and staff? Attach as Question 13a Attachment a copy of the policy. Attach as Question 13b Attachment a description of the location of the eye wash stations and oxygen tank, a list of the contents of the working emergency kit, and a list of the contents of the first aid kit.

___ Yes ___ No

(g) Infection Control/Hazardous Waste Disposal Protocols. The program shall establish written clinical and laboratory protocols to ensure adequate asepsis, infection, and hazard control and disposal of hazardous wastes, that comply with the board's regulations and other federal, state, and local requirements. The program shall provide these protocols to all students, faculty, and appropriate staff to ensure compliance with these protocols. Adequate space shall be provided for preparing and sterilizing all armamentarium. All reusable armamentarium shall be sterilized and nonreusable items properly disposed. (Excerpt: B&P 1755(f))

14. Will OSHA attire and protective eyewear be required for each student?

___ Yes ___ No

15. Does the course have written clinical and laboratory protocols to ensure adequate asepsis, infection and hazard control, and disposal of hazardous wastes, that comply with the board's regulations and other Federal, State, and local requirements, and will such protocols be provided to all students, faculty and appropriate staff? Attach as Question 15 Attachment a copy of such protocols for the following: student immunizations; PPE; equipment and supply infection control; biohazardous waste; OSHA training requirements for dental office employees; management of training records; management of occupational exposure to blood and body fluids; infection control protocol for operatory set-up and clean-up; infection control protocol during dental treatment; disinfection; sterilization; sanitization; barrier use; surface disinfection; responsibilities of infection control officer in a dental office.

___ Yes ___ No

16. Is adequate space provided for preparing and sterilizing all armamentarium? Attach as Question 16 Attachment a description of the space and equipment.

___ Yes ___ No

(h) Length of Program. The program shall be of sufficient duration for the student to develop minimum competence in performing dental assistant and registered dental assistant duties, but in no event less than 800 hours, including at least 275 hours of didactic instruction, at least 260 hours of laboratory instruction, and at least 85 hours of preclinical and clinical instruction conducted in the program's facilities under the direct supervision of program faculty. No more than 20 hours shall be devoted to instruction in clerical, administrative, practice management, or similar duties (Excerpt: B&P 1757(e))

No more than 25 percent of the required clinical instruction shall take place in extramural clinical facilities, and no more than 25 percent of extramural clinical instruction shall take place in a specialty dental practice. (Excerpt: B&P 1757(f))

17. Will the length of the program be of sufficient duration for each student to develop minimum competence in performing **dental assistant and registered dental assistant duties, but no less than 800 hours, including at least 275 hours of didactic instruction, at least 260 hours of laboratory instruction, and at least 85 hours of pre-clinical and clinical instruction conducted in the program's facilities under the direct supervision of program faculty?**

___ Yes ___ No

18. Will no more than 20 hours be devoted to instruction in clerical, administrative, practice management, or similar duties?

___ Yes ___ No

19. Will no more than 25 percent of the required clinical instruction take place in extramural clinical facilities, and no more than 25 percent of extramural clinical instruction take place in a specialty dental practice?

___ Yes ___ No

Specify the hours for each of the following:

Didactic: _____ Laboratory: _____ Pre-Clinical: _____ Extern Clinical: _____

(i) Faculty/Student Ratios. Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties for which the program is approved to instruct. (Excerpt: B&P 1755(e))

Laboratory instruction: There shall be at least one instructor for every 14 students who are simultaneously engaged in laboratory instruction.

Preclinical instruction: There shall be at least one instructor for every six students who are simultaneously engaged in preclinical instruction.

Clinical instruction: There shall be at least one instructor for every six students who are simultaneously engaged in clinical instruction. (Excerpt: B&P 1754.5)

20. Will there be at least the following number of instructors per student who are simultaneously engaged in the following instruction: 1 for every 14 students during laboratory instruction, 1 for every 6 students engaged in pre-clinical instruction, and 1 for every 6 students engaged in clinical instruction?

___ Yes ___ No

Attach as Question 20 Attachment the following information in a table or chart in the following format for those sessions applicable to the program:

Maximum Students enrolled per session:		Number of Operatories:	
Faculty/Student Ratios:	Didactic:	Laboratory:	Clinical:

Class Session	Hours	Total Number of Students	Total Number of Faculty Providing Instruction (including Program Director)	Names of Faculty Providing Instruction (including Program Director)
AM – Lecture				
AM – Lab				
Midday – Lecture				
Midday – Lab				
Afternoon – Lecture				
Afternoon – Lab				
PM – Lecture				
PM – Lab				

(j) Facilities and Resources. Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties that registered dental assistants are authorized to perform. (Excerpt: B&P 1757(g))

The location and number of general use equipment and armamentaria shall ensure that each student has the access necessary to develop minimum competency in all of the duties for which the program is approved to instruct. The program provider may either provide the specified equipment and supplies or require that the student provide them. Nothing in this section shall preclude a dental office that contains the equipment required by this section from serving as a location for laboratory instruction.

The minimum requirement for armamentaria includes infection control materials specified by the Division of Occupational Safety and Health and the regulations of the board, protective eyewear, mask, and gloves for each student and faculty member, and appropriate eye protection for each piece of equipment. (Excerpt: B&P 1755(e)(1) and (2))

The following are minimum requirements for equipment and *armamentaria during laboratory, preclinical, and clinical sessions as appropriate to each type of session and in ratios specified in Section 1070.2 of Title 16 of the California Code of Regulations: amalgamator, model trimmers (one for every 5 students), dental rotary equipment (one for every 3 students), vibrators (one for every 3 students), light curing devices, functional typodont and bench mounts (one for every 2 students), functional orthodontically banded typodonts, facebows, automated blood pressure device, EKG machine, pulse oximeters, capnograph or simulated device, sets of hand instruments for each procedure (one set for every 2 students), respiration device, camera for intraoral use, camera for extraoral use, CAD machine or simulated device, caries detection device, and all other equipment and armamentaria required to teach dental assistant and registered dental assistant duties.*

One permanently preassembly tray for each procedure shall be provided for reference purposes.

Provision shall be made for reasonable access to current and diverse dental and medical reference texts, current journals, audiovisual materials, and other necessary resources. Library holdings, which may include access through the Internet, shall *include materials relating to all subject areas of the program curriculum.* (Excerpt: B&P 1757(g))

21. Do the facilities and class scheduling provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties that registered dental assistants are authorized to perform? Attach as Question 21 Attachment a description of the entire facility, identifying the location of the following major areas of instruction: lecture area; laboratory; dental operatories, x-ray exposure area; sterilization area; and x-ray processing area.

___ Yes ___ No

22. Do the location and number of general use equipment and armamentaria ensure that each student has the access necessary to develop minimum competency in all of the duties for which the program is approved to instruct. Attach as Question 22 Attachment a list of the types, location, and number of the required equipment and armamentarium that are listed above.

___ Yes ___ No

23. Will protective eyewear, mask, gloves, and clinical attire be required of or provided to student and faculty member, and appropriate eye protection provided for each piece of equipment?

___ Yes ___ No

24. Will one permanently preassembled tray for each procedure be provided for reference purposes? Attach as Question 24 Attachment a list of the procedures for which a pre-assembled tray will be provided.

___ Yes ___ No

25. Is provision made for reasonable access to current and diverse dental and medical reference texts, current journals, audiovisual materials, and other necessary resources? Library holdings, which may include access through the Internet, shall include materials relating to all subject areas of the program curriculum. Attach as Question 25 Attachment the following information for each reference material: name, author, publisher, and publication date. For reference materials accessed by the Internet, provide the subscription and/or website information for the required subject areas.

___ Yes ___ No

(k) Operatories. Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency. Operatories shall be sufficient in number to allow a ratio of at least one operatory for every five students who are simultaneously engaged in clinical instruction.

Each operatory shall contain functional equipment, including a power-operated chair for treating patients in a supine position, operator and assistant stools, air-water syringe, adjustable light, oral evacuation equipment, work surface, and adjacent hand-washing sink.

Each operatory shall be of sufficient size to simultaneously accommodate one student, one instructor, and one patient. (Excerpt: B&P 1755(e)(B))

26. Are operatories sufficient in number to allow a ratio of at least one operatory for every five students who are simultaneously engaged in clinical instruction? Are they of sufficient size to simultaneously accommodate one student, one instructor, and one patient? Do they contain functional equipment, including a power-operated chair for treating patients in a supine position, operator and assistant stools, air-water syringe, adjustable light, oral evacuation equipment, work surface, and adjacent hand-washing sink? Attach as Question 26 Attachment a description of the operatories, their number, and a list of the equipment and supplies that are housed in the operatory area.

___ Yes ___ No

(l) Program Content. *The curriculum shall be established, reviewed, and amended as necessary to allow for changes in the practice of dentistry and registered dental assisting. Programs that admit students in phases shall provide students with basic instruction prior to participation in any other portion of the program that shall, at a minimum, include tooth anatomy, tooth numbering, general program guidelines and safety precautions, and infection control and sterilization protocols associated with and required for patient treatment. All programs shall provide students with additional instruction in the infection control regulations and guidelines of the board and Cal-DOSH prior to the student's performance of procedures on patients.*

(i)(1) A program approved prior to January 1, 2009, shall comply with board regulations with regard to program content until the date specified in the written certification from the program to the board, as specified in subparagraph (B) of paragraph (1) of subdivision (a), after which time the program content shall meet the requirements of paragraph (2).

(2) Programs receiving initial approval on or after January 1, 2009, shall meet all the requirements of Section 1755, and subdivisions (j) and (k) of this section, and shall include the following additional content:

(A) A radiation safety course that meets all of the requirements of the regulations of the board.

(B) A coronal polishing course that meets all of the requirements of the regulations of the board.

(C) A pit and fissure sealant course that meets all of the requirements of the regulations of the board.

(D) A course in basic life support provided by an instructor approved by the American Red Cross or the American Heart Association, or any other course approved by the board as equivalent. (Excerpt: B&P 1757(i))

(h) A detailed program outline shall clearly state curriculum subject matter and specific instruction hours in the individual areas of didactic, laboratory, and clinical instruction. General program objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. Objective evaluation criteria shall be used for measuring student progress toward attainment of specific program objectives. Students shall be provided with all of the following:

(1) Specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written, practical, and clinical examinations.

(2) Standards of performance that state the minimum number of satisfactory performances that are required for each procedure.

(3) Standards of performance for laboratory, preclinical, and clinical functions, those steps that constitute a critical error and would cause the student to fail the procedure, and a description of each of the grades that may be assessed for each procedure. (Excerpt: B&P 1755(h))

Didactic Instruction. "Didactic instruction" means lectures, demonstrations, and other instruction without active participation by students. The approved provider or its designee may provide didactic instruction via electronic media, home study materials, or live lecture methodology if the provider has submitted that content for approval. (Excerpt: B&P 1754.5)

General didactic instruction shall include, at a minimum, the following:

(1) Principles of general anatomy, physiology, oral embryology, tooth histology, and head-neck anatomy.

(2) Principles of abnormal conditions related to and including oral pathology, orthodontics, periodontics, endodontics, *pediatric dentistry*, oral surgery, prosthodontics, and esthetic dentistry.

(3) Legal requirements and ethics related to scope of practice, unprofessional conduct, and, patient records and confidentiality.

(4) Principles of infection control and hazardous communication requirements in compliance with the board's regulations and other federal, state, and local requirements.

(5) Principles and federal, state, and local requirements related to pharmacology.

(6) Principles of medical-dental emergencies and first aid management, including symptoms and treatment.

(7) Principles of the treatment planning process including medical health history data collection, patient and staff confidentiality, and charting.

(8) Principles of record classifications including management, storage, and retention protocol for all dental records.

(9) Principles and protocols of special needs patient management.

(10) Principles, protocols, and armamentaria associated with all dental assisting chairside procedures.

(11) Principles, protocols, manipulation, use, and armamentaria for dental materials.

(12) Principles and protocols for oral hygiene preventative methods including, plaque identification, toothbrushing and flossing techniques, and nutrition.

(13) Principles, protocols, armamentaria, and procedures associated with operative and specialty dentistry.

(14) Principles, protocols, armamentaria, and procedures for each duty that dental assistants and registered dental assistants are allowed to perform. (Excerpt: B&P 1757(j))

Laboratory and Clinical Instruction. "Laboratory instruction" means instruction in which students receive supervised experience performing procedures using study models, mannequins, or other simulation methods.

(c) "Preclinical instruction" means instruction in which students receive supervised experience performing procedures on students, faculty, or staff members.

(d) "Clinical instruction" means instruction in which students receive supervised experience in performing procedures in a clinical setting on patients. Clinical instruction shall only be performed upon successful demonstration and evaluation of preclinical skills. (B&P 1754.5)

Laboratory and clinical instruction shall be of sufficient duration and content for each student to achieve minimum competence in the performance of each procedure that a dental assistant and registered dental assistant is authorized to perform. (Excerpt: B&P 1757(k))

Student Examination. Each student shall pass a written examination that reflects the curriculum content, which may be administered at intervals throughout the course as determined by the course director. (Excerpt: B&P 1757(l))

General program objectives and specific instructional unit objectives shall include theoretical aspects of each subject as well as practical application, including specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written, practical, and clinical examinations. (Excerpt: B&P 1755(h))

27. Will the program admit students in phases? If Yes, attach as **Question 27 Attachment** the curriculum materials, including methods, materials, and examinations with keys, for all subjects taught in the orientation curriculum, which must include tooth anatomy, tooth numbering, general program guidelines and

safety precautions, and infection control and sterilization protocols associated with and required for patient treatment.

____ Yes ____ No

28. Will all students be provided with instruction in the infection control regulations and guidelines of the board and Cal-DOSH prior to the student's performance of procedures on patients? Will all students be required to complete a course in basic life support provided by an instructor approved by the American Red Cross or the American Heart Association?

____ Yes ____ No

29. Will instruction include all content described in Business and Professions Code Section 1757, governing the approval of RDA Programs (see above)? **Note:** The program content for Radiation Safety, Coronal Polishing, and Pit and Fissure Sealant instruction are addressed in later sections of this Application.

____ Yes ____ No

Attach as **Question 29 Attachment** the following for each program course/module:

- **Detailed program outline including subsections that clearly states curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, lab, clinical, and externship instruction**
- **General program objectives**
- **Specific objectives in the cognitive and psychomotor domain**
- **Criteria for all psychomotor skills**
- **Minimum number of satisfactory performances for all psychomotor skills**
- **Lesson plans (including information sheets and procedure sheets when applicable)**
- **Process evaluation grade sheets**
- **Product evaluation grade sheets**
- **Practical and clinical examinations**
- **Written examination examples and keys – To be provided at Site Visit**

(m) Extramural Clinical Instruction. If an extramural clinical facility is utilized, students shall, as part of an extramural organized program of instruction, be provided with planned, supervised clinical instruction. Laboratory and preclinical instruction shall be performed under the direct supervision of program faculty and shall not be provided in extramural facilities.

The program director, or a designated faculty member, shall be responsible for selecting extramural clinical sites and evaluating student competence in performing procedures both before and after the clinical assignment.

The program director, or a designated faculty member, shall orient dentists who intend to provide extramural clinical facilities prior to the student assignment. Orientation shall include the objectives of the program, the student's preparation for the clinical assignment, and a review of procedures and criteria to be used by the dentist in evaluating the student during the assignment. The program faculty and extramural clinic personnel shall use the same objective evaluation criteria.

There shall be a written contract of affiliation with each extramural clinical facility, which shall describe the settings in which the clinical training will be received, and affirm that the dentist and clinic personnel acknowledge the legal scope of duties and infection control requirements, that the clinical facility has the necessary equipment and armamentaria appropriate for the procedures to be performed, and that the equipment and armamentaria are in safe operating condition. (Excerpt: B&P 1755(i))

No more than 25 percent of the required clinical instruction shall take place in extramural clinical facilities, and no more than 25 percent of extramural clinical instruction shall take place in a speciality dental practice. (Excerpt: B&P 1757(f))

30. Will all laboratory and pre-clinical instruction be performed under the direct supervision of program faculty and not in extramural facilities? Will no more than 25 percent of the required clinical instruction take place in extramural clinical facilities, and no more than 25 percent of extramural clinical instruction take place in a specialty dental practice?

___ Yes ___ No

31. Will the program director, or a designated faculty member, be responsible for selecting extramural clinical sites and evaluating student competence in performing procedures both before and after the clinical assignment? Attach as Question 31a Attachment a copy of the document the program will use for the clinical evaluation of students during externship, which must be signed and dated by the student and instructor. Attach as Question 31b Attachment a copy of the log that will be maintained by the program to document the visits to extramural facilities.

___ Yes ___ No

32. Will the program director, or a designated faculty member, orient dentists who intend to provide extramural clinical facilities prior to the student assignment? Will the program faculty and extramural clinical personnel use the same objective evaluation criteria? Attach as Question 32 Attachment a complete orientation packet that is given to the dentist prior to placement of a student in the extern site which shall include, at a minimum: student evaluation forms; objective evaluation criteria; procedures on how the extern's clinical experience is to be conducted including at a minimum when and how the student receives his/her first evaluation and, at the completion of the training, extern time sheet.

___ Yes ___ No

33. Will there be a written contract of affiliation with each extramural clinical facility describing the settings in which the clinical training will be received, and affirming that the dentist and clinic personnel acknowledge the legal scope of duties and infection control requirements, that the clinical facility has the necessary equipment and armamentaria appropriate for the procedures to be performed, and that the equipment and armamentaria are in safe operating condition? Attach as Question 33 Attachment a copy of the contract of affiliation with each extramural facility.

___ Yes ___ No

34. Will the student evaluate the clinical experience? Attach as Question 34 Attachment the evaluation form that will be completed by the student.

___ Yes ___ No

(n) Radiation Safety Instruction.

(d) Facilities. There shall be a sufficient number of safe, adequate, and educationally conducive lecture classrooms, radiography operatories, developing or processing facilities, and viewing spaces for mounting, viewing and evaluating radiographs. Adequate sterilizing facilities shall be provided and all disinfection and sterilization procedures specified by board regulations shall be followed.

(1) A radiographic operatory shall be deemed adequate if it fully complies with the California Radiation Control Regulations (Title 17, Cal. Code Regs., commencing with section 30100), is properly equipped with supplies and equipment for practical work and includes for every seven students at least one functioning radiography machine which is adequately filtered and collimated in compliance with Department of Health Services regulations and which is equipped with the appropriate position-indicating devices for each technique being taught.

(2) The developing or processing facility shall be deemed adequate if it is of sufficient size, based upon the number of students, to accommodate students' needs in learning processing procedures and is properly equipped with supplies and equipment for practical work using either manual or automatic equipment.

(3) X-ray areas shall provide protection to patients, students, faculty and observers in full compliance with applicable statutes and regulations.

(e) Program Content.

(4) Areas of instruction shall include at least the following as they relate to exposure, processing and evaluations of dental radiographs:

(A) Radiation physics and biology

(B) Radiation protection and safety

(C) Recognition of normal anatomical landmarks and abnormal conditions of the oral cavity as they relate to dental radiographs

(D) Radiograph exposure and processing techniques using either manual or automatic methods

- (E) Radiograph mounting or sequencing, and viewing, including anatomical landmarks of the oral cavity
- (F) Intraoral techniques and dental radiograph armamentaria, including holding devices
- (G) Interproximal examination including principles of exposure, methods of retention and evaluation
- (H) Intraoral examination including, principles of exposure, methods of retention and evaluation
- (I) Identification and correction of faulty radiographs
- (J) Supplemental techniques including the optional use of computerized digital radiography
- (K) Infection control in dental radiographic procedures
- (L) Radiographic record management.

Students may be given the opportunity to obtain credit by the use of challenge examinations and other methods of evaluation.

(f) Laboratory Instruction. Sufficient hours of laboratory instruction shall be provided to ensure that a student successfully completes on an x-ray manikin at least the procedures set forth below. A procedure has been successfully completed only if each radiograph is of diagnostic quality.

(1) Two full mouth periapical series, consisting of at least 18 radiographs each, 4 of which must be bitewings; no more than one series may be completed using computer digital radiographic equipment;

(2) Two bitewing series, consisting of at least 4 radiographs each;

(3) Developing or processing, and mounting or sequencing of exposed radiographs;

(4) Student and instructor written evaluation of radiographs.

(g) Clinical Experience. The course of instruction shall include sufficient clinical experience, as part of an organized program of instruction, to obtain clinical competency in radiographic techniques. Clinical instruction shall include clinical experience on four patients with one of the four patients used for the clinical examination. Clinical experience shall include:

(1) Successful completion of a minimum of four full mouth periapical series, consisting of at least 18 radiographs each, 4 of which must be bitewings. Traditional film packets must be double film. No more than three series may be completed using computer digital radiographic equipment. Such radiographs shall be of diagnostic quality. All exposures made on human subjects shall only be made for diagnostic purposes, and shall in no event exceed three (3) exposures per subject. All clinical procedures on human subjects shall be performed under the supervision of a licensed dentist in accordance with section 106975 of the Health and Safety Code.

(2) Developing or processing, and mounting or sequencing of exposed human subject radiographs;

(3) Student and instructor written evaluation of radiographs.

(i) Length of Course. The program shall be of sufficient duration for the student to develop minimum competence in the radiation safety techniques, but shall in no event be less than 32 clock hours, including at least 8 hours of didactic instruction, at least 12 hours of laboratory instruction, and at least 12 hours of clinical instruction. (Excerpt: Title 16, Regulation Section 1014.1)

35. Will the length of instruction be of sufficient duration for the student to develop minimum competence in radiation safety techniques, but no less than 32 hours, including at least 8 hours of didactic training, at least 12 hours of laboratory training, and at least 12 hours of clinical training?

____ Yes ____ No

Specify the hours for each of the following:

Didactic: _____ Laboratory: _____ Clinical: _____

36. Are there a sufficient number of safe, adequate, and educationally conducive lecture classrooms, radiography operatories, developing or processing facilities, and viewing spaces for mounting, viewing and evaluating radiographs? Attach as Question 36 Attachment a description of the number of operable x-ray units (excluding panograph), the number of operable digital x-ray units, which method of x-ray film processing that is used, and the total number of students who will be receiving radiation safety instruction simultaneously.

____ Yes ____ No

37. Does each radiographic operatory fully comply with the California Radiation Control Regulations (Title 17, Cal. Code Regs., commencing with section 30100), and is it properly equipped with supplies and equipment for practical work and includes for every seven students at least one functioning radiography machine which is adequately filtered and collimated in compliance with Department of Health Services regulations and which is equipped with the appropriate position-indicating devices for each technique being taught? Attach as Question 37 Attachment a copy of current registration with the Department of Health Services Radiologic Health Section.

____ Yes ____ No

38. Will instruction include all content described in Title 16, Regulation Section 1014.1 governing the approval of Radiation Safety Courses (see excerpts from Section 1014.1)?

___ Yes ___ No

Attach as Question 38 Attachment the following for radiation safety course content:

- **Detailed course outline including subsections that clearly states curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, lab, clinical, and externship instruction**
- **General course objectives**
- **Specific objectives in the cognitive and psychomotor domain**
- **Criteria for all psychomotor skills**
- **Minimum number of satisfactory performances for all psychomotor skills**
- **Lesson plans (including information sheets and procedure sheets when applicable)**
- **Process evaluation grade sheets**
- **Product evaluation grade sheets**
- **Practical and clinical examinations**
- **Written examination examples and keys – To be provided at Site Visit**

39. Will students perform the number of exposures as required by regulation (see excerpts from Section 1014.1)? Attach as Question 39 Attachment a description of the number of exposures, and techniques used, that students will perform during laboratory and during clinical instruction.

___ Yes ___ No

40. Are all radiographic surveys exposed by and evaluated by the student and faculty for acceptable diagnostic quality?

___ Yes ___ No

Attach as Question 40a Attachment a copy of the criteria for an acceptable bitewing and periapical film that includes a description of root apex of the periapical exposure; contact area and density and contrast.

Attach as Question 40b Attachment a description of the procedures used to evaluate the bitewing and full mouth surveys and include the radiograph evaluation forms that include the following: description of student and faculty evaluation protocol; worksheets that include areas of identification for commonly encountered exposure and processing errors; x-ray manikin and clinical patient product evaluation sheets.

Attach as Question 40c Attachment a copy of the program's radiation safety protocols, including infractions, retake policy, pregnancy, and disposition of x-rays.

Attach as Question 40d Attachment a description of the laboratory and clinical practice experience that includes the amount of exposures for bitewing and full mouth surveys; sequence of performance from laboratory to clinical experience; film packet requirements for laboratory and clinical experience; film packet requirements for laboratory and clinical experience; how students progress toward attainment of clinical competency; detailed description of prescription form used prior to exposure on clinical patients and patient criteria.

41. Are extra-mural facilities used for clinical x-ray instruction?

___ Yes ___ No

42. Attach as Question 42 Attachment a signed document from the supervising dentist in which he/she agrees to be responsible for and in control of the quality, radiation safety, and technical aspects of all x-ray examinations and procedures in accordance with Section 106975 of the Health and Safety Code.

(o) Coronal Polishing Instruction.

(d) Length of Course. The program shall be of sufficient duration for the student to develop minimum competence in coronal polishing, but shall in no event be less than 12 clock hours, including at least 4 hours of didactic training, at least 4 hours of laboratory training, and at least 4 hours of clinical training.

(g) Program Content.

(5) Areas of instruction shall include at least the following as they relate to coronal polishing:

(A) Coronal Polishing Basics

- i. Legal requirements
 - ii. Description and goals of coronal polishing
 - iii. Indications and contraindications of coronal polishing
 - iv. Criteria for an acceptable coronal polish
- (B) Principles of plaque and stain formation
- i. Clinical description of plaque, intrinsic and extrinsic stains, and calculus
 - ii. Etiology of plaque and stain
 - iii. Clinical description of teeth that have been properly polished and are free of stain.
 - iv. Tooth morphology and anatomy of the oral cavity as they relate to polishing techniques and to retention of plaque and stain

(C) Polishing materials

- i. Polishing agent composition, storage and handling
- ii. Abrasive material composition, storage, and handling, and factors which affect rate of abrasion
- iii. Disclosing agent composition, storage and handling.
- iv. Armamentaria for disclosing and polishing techniques.
- v. Contraindications for disclosing and polishing techniques.

(D) Principals of tooth polishing

- i. Clinical application of disclosing before and after a coronal polish.
- ii. Instrument grasps and fulcrum techniques
- iii. Purpose and techniques of the mouth mirror for indirect vision and retraction.
- iv. Characteristics, manipulation and care of dental handpieces when performing a coronal polish.
- v. Pre-medication requirements for the compromised patient.
- vi. Use of adjunct materials for stain removal and polishing techniques
- vii. Techniques for coronal polishing of adults and children.
- viii. Procedures for cleaning fixed and removable prosthesis and orthodontic appliances.
- ix. Disclosing and polishing evaluation criteria.

(E) Infection control protocols

(7) Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency, which may include externship instruction as provided in subdivision (h). There shall be no more than 6 students per instructor during clinical instruction. Clinical instruction shall include clinical experience on at least three patients, with two of the three patients used for the clinical examination.

(i) Evaluation and Examination.

(2) Each student shall pass a written examination which reflects the entire curriculum content.

(3) Each student shall pass a clinical examination in which the student successfully completes coronal polishing on two of the three clinical patients required for clinical instruction.

(Excerpt: Title 16, Regulation Section 1070.4)

43. Will the length of instruction be of sufficient duration for the student to develop minimum competence in coronal polishing, but no less than 12 hours, including at least 4 hours of didactic training, at least 4 hours of laboratory training, and at least 4 hours of clinical training?

___ Yes ___ No

Specify the hours for each of the following:

Didactic: _____ Laboratory: _____ Clinical: _____

44. Will instruction include all content described in Title 16, Regulation Section 1070.4 governing the approval of Coronal Polishing Courses (see excerpts from Section 1070.4 above)?

____ Yes ____ No

Attach as Question 44 Attachment the following for coronal polishing course content:

- **Detailed course outline including subsections that clearly states curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, lab, clinical, and externship instruction**
- **General course objectives**
- **Specific objectives in the cognitive and psychomotor domain**
- **Criteria for all psychomotor skills**
- **Minimum number of satisfactory performances for all psychomotor skills**
- **Lesson plans (including information sheets and procedure sheets when applicable)**
- **Process evaluation grade sheets**
- **Product evaluation grade sheets**
- **Practical and clinical examinations**
- **Written examination examples and keys – To be provided at Site Visit**

45. Attach as Question 45 Attachment a description of the laboratory instruction, including whether procedures will be performed on typodonts or manikins, and what type of laboratory equipment will be used.

46. Will clinical instruction include clinical experience on at least three patients, with two of the three patients used for the clinical examination?

____ Yes ____ No

47. Will each student be required to pass a clinical examination in which the student successfully completes coronal polishing on two of the three clinical patients required for clinical instruction?

____ Yes ____ No

48. Attach as Question 48 Attachment a written overview of the course requirements and the protocol followed for laboratory and clinical practice, the written and clinical examination. Include a description of patient selection criteria, time frame and pass rate for written and clinical examinations; copy of medical health history form; patient release form; calculus free form.

(p) Pit and Fissure Sealant Instruction.

(b) Prerequisites. Each student must possess the necessary requirements for application for RDA licensure or currently possess an RDA license. Each student must have already completed a Board-approved course in coronal polishing.

(d) Length of Course. The program shall be of sufficient duration for the student to develop minimum competence in the application of pit and fissure sealants, but shall in no event be less than 16 clock hours, including at least 4 hours of didactic training, at least 4 hours of laboratory training, and at least 8 hours of clinical training.

(g) Program Content.

(5) Areas of instruction shall include at least the following as they relate to pit and fissure sealants:

(A) Dental Science - Oral Anatomy, Histology, Physiology, Oral Pathology, Normal/Abnormal Anatomical and Physiological Tooth Descriptions

(B) Morphology and Microbiology

(C) Dental Materials and Pharmacology

(D) Sealant Basics

i. Legal requirements

ii. Description and goals of sealants

iii. Indications and contraindications

iv. Role in preventive programs

(E) Sealant Materials

i. Etchant and/or etchant/bond combination material composition, process, storage and handling

ii. Sealant material composition, polymerization type, process, storage and handling

iii. Armamentaria for etching and sealant application

iv. Problem solving for etchant and sealant material placement/manipulation

(F) Sealant Criteria

i. Areas of application

ii. Patient selection factors

iii. Other indication factors

(G) Preparation Factors

i. Moisture control protocol

ii. Tooth/teeth preparation procedures prior to etching or etchant/bond

(H) Acid Etching or Etchant/Bond Combination

i. Material preparation

ii. Application areas

iii. Application time factors

iv. Armamentaria

v. Procedure

vi. Etchant or etchant/bond evaluation criteria

(I) Sealant Application

i. Application areas

ii. Application time factors

iii. Armamentaria

iv. Procedure for chemical cure and light cure techniques

v. Sealant evaluation criteria

vi. Sealant adjustment techniques

(J) Infection control protocol

(K) Clinical re-call re-evaluation protocols

(6) There shall be no more than 14 students per instructor during laboratory instruction. Laboratory instruction may be conducted on a typodont, a simulated model, and/or mounted extracted teeth. Sufficient time shall be available for all students to obtain laboratory experience to achieve minimum competence in pit and fissure sealant application prior to the performance of procedures on patients.

(7) Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency. There shall be no more than 6 students per instructor during clinical instruction. Clinical instruction shall include clinical experience on four patients with two of the four patients used for the clinical examination. Each clinical patient must have a minimum of four (4) virgin, non-restored, natural teeth, sufficiently erupted so that a dry field can be maintained, for application of the

etching, or etchant/bond combination, and sealant materials. Such clinical instruction shall include teeth in all four quadrants for each patient.

(i) Evaluation and Examination.

(2) Each student shall pass a written examination which reflects the entire curriculum content.

(3) Each student shall pass a clinical examination in which the student successfully completes the application of pit and fissure sealants on two of the four clinical patients required for clinical instruction. The examination shall include teeth in all four quadrants.

(Excerpt: Title 16, Regulation Section 1070.3)

49. Will the program require each student to have already completed an approved course in coronal polishing?

___ Yes ___ No

50. Will the length of instruction be of sufficient duration for the student to develop minimum competence in the application of pit and fissure sealants, but no less than 16 hours, including at least 4 hours of didactic training, at least 4 hours of laboratory training, and at least 8 hours of clinical training?

___ Yes ___ No

Specify the hours for each of the following:

Didactic: _____ Laboratory: _____ Clinical: _____

51. Will instruction include all content described in Title 16, Regulation Section 1070.3 governing the approval of Pit and Fissure Sealant Courses (see excerpts from Section 1070.3 above)?

___ Yes ___ No

Attach as Question 51 Attachment the following for pit and fissure course content:

- **Detailed course outline including subsections that clearly states curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, lab, clinical, and externship instruction**
- **General course objectives**
- **Specific objectives in the cognitive and psychomotor domain**
- **Criteria for all psychomotor skills**
- **Minimum number of satisfactory performances for all psychomotor skills**
- **Lesson plans (including information sheets and procedure sheets when applicable)**
- **Process evaluation grade sheets**
- **Product evaluation grade sheets**
- **Practical and clinical examinations**
- **Written examination examples and keys – To be provided at Site Visit**

52. Will laboratory instruction be conducted on a typodont, a simulated model, and/or mounted extracted teeth? Attach as Question 52 Attachment a description of the type that will be used and how it has been adapted and/or prepared to be used in the application of pit and fissure sealants.

___ Yes ___ No

53. Will clinical instruction include clinical experience on four patients with two of the four patients used for the clinical examination? Attach as Question 53a Attachment a description of how the clinical experience on two practice patients will be conducted, including patient selection criteria, application sites, timeframe for performance, and the procedure followed when grading patients. Attach as Question 53b Attachment a description of the protocol to be followed when a student does not achieve minimum competency on the two clinical practice experiences. Attach as Question 53c Attachment a copy of the patient health history and patient release form.

Yes No

54. Will each clinical patient have a minimum of four (4) virgin, non-restored, natural teeth, sufficiently erupted so that a dry field can be maintained, for application of the etching, or etchant/bond combination, and sealant materials? Will clinical instruction include teeth in all four quadrants for each patient?

Yes No

Requirements for Registered Dental Assistant Programs

Following are the statutes governing Registered Dental Assistant programs.

Business and Professions Code Section 1754.5 – Definitions/Faculty to Student Ratios

1754.5. As used in this article, the following definitions shall apply:

(a) "Didactic instruction" means lectures, demonstrations, and other instruction without active participation by students. The approved provider or its designee may provide didactic instruction via electronic media, home study materials, or live lecture methodology if the provider has submitted that content for approval.

(b) "Laboratory instruction" means instruction in which students receive supervised experience performing procedures using study models, mannequins, or other simulation methods. There shall be at least one instructor for every 14 students who are simultaneously engaged in laboratory instruction.

(c) "Preclinical instruction" means instruction in which students receive supervised experience performing procedures on students, faculty, or staff members. There shall be at least one instructor for every six students who are simultaneously engaged in preclinical instruction.

(d) "Clinical instruction" means instruction in which students receive supervised experience in performing procedures in a clinical setting on patients. Clinical instruction shall only be performed upon successful demonstration and evaluation of preclinical skills. There shall be at least one instructor for every six students who are simultaneously engaged in clinical instruction.

(e) *This section shall remain in effect only until January 1, 2011, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2011, deletes or extends that date.*

Business and Professions Code Section 1755 – General Provisions Governing all Dental Assistant Programs and Courses

1755. (a)(1) The criteria in subdivisions (b) to (h), inclusive, shall be met by a dental assisting program or course and all orthodontic assisting and dental sedation assisting permit programs or courses to secure and maintain approval by the board as provided in this article.

(2) The board may approve, provisionally approve, or deny approval of any program or course.

(3) Program and course records shall be subject to inspection by the board at any time.

(4) The board may withdraw approval at any time that it determines that a program or course does not meet the requirements established in this section or any other requirements of law.

(5) All programs and courses shall be established at the postsecondary educational level or deemed equivalent thereto by the board.

(b) The program or course director shall possess a valid, active, and current license issued by the *board*. The program or course director shall actively participate in and be responsible for the day-to-day administration of the program or course, including the following requirements:

(1) Maintaining for a period of not less than five years copies of curricula, program outlines, objectives, and grading criteria, and copies of faculty credentials, licenses, and certifications, and individual student records, including those necessary to establish satisfactory completion of the program or course.

(2) Informing the board of any major change to the program or course content, physical facilities, or faculty, within 10 days of the change.

(3) *Ensuring that all staff and faculty involved in clinical instruction meet the requirements set forth in this article.*

(c) *No faculty member shall instruct in any procedure that he or she is not licensed or permitted to perform. Each faculty member shall have been licensed or permitted for a minimum of two years and possess experience in the subject matter he or she is teaching.*

(d) A certificate or other evidence of completion shall be issued to each student who successfully completes the program or course and shall include the student's name, the name of the program or course, the total number of program or course hours, the date of completion, and the signature of the program or course director or his or her designee.

(e) Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties for which the program or course is approved to instruct.

(1) The location and number of general use equipment and armamentaria shall ensure that each student has the access necessary to develop minimum competency in all of the duties for which the program or course is approved to instruct. The program or course provider may either provide the specified equipment and supplies or require that the student provide them. Nothing in this section shall preclude a dental office that contains the equipment required by this section from serving as a location for laboratory instruction.

(2) The minimum requirement for armamentaria includes infection control materials specified by the Division of Occupational Safety and Health and the regulations of the board, protective eyewear, mask, and gloves for each student and faculty member, and appropriate eye protection for each piece of equipment.

(3) Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency. Operatories shall be sufficient in number to allow a ratio of at least one operatory for every five students who are simultaneously engaged in clinical instruction.

(A) Each operatory shall contain functional equipment, including a power-operated chair for treating patients in a supine position, operator and assistant stools, air-water syringe, adjustable light, oral evacuation equipment, work surface, and adjacent hand-washing sink.

(B) Each operatory shall be of sufficient size to simultaneously accommodate one student, one instructor, and one patient.

(f) The program or course shall establish written clinical and laboratory protocols to ensure adequate asepsis, infection, and hazard control and disposal of hazardous wastes, that comply with the board's regulations and other federal, state, and local requirements. The program or course shall provide these protocols to all students, faculty, and appropriate staff to ensure compliance with these protocols. Adequate space shall be provided for preparing and sterilizing all armamentarium. All reusable armamentarium shall be sterilized and nonreusable items properly disposed.

(g) A written policy on managing emergency situations shall be made available to all students, faculty, and staff. All faculty and staff involved in the direct provision of patient care shall be certified in basic life support procedures, including cardiopulmonary resuscitation. Recertification intervals may not exceed two years. The program or course director shall ensure and document compliance by faculty and staff. A program or course shall not be required to ensure that students complete instruction in basic life support prior to performing procedures on patients.

(h) A detailed program or course outline shall clearly state curriculum subject matter and specific instruction hours in the individual areas of didactic, laboratory, and clinical instruction. General program or course objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. Objective evaluation criteria shall be used for measuring student progress toward attainment of specific program or course objectives. Students shall be provided with all of the following:

(1) Specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written, practical, and clinical examinations.

(2) Standards of performance that state the minimum number of satisfactory performances that are required for each procedure.

(3) Standards of performance for laboratory, preclinical, and clinical functions, those steps that constitute a critical error and would cause the student to fail the procedure, and a description of each of the grades that may be assessed for each procedure.

(i)(1) If an extramural clinical facility is utilized, students shall, as part of an extramural organized program of instruction, be provided with planned, supervised clinical instruction. Laboratory and preclinical instruction shall be performed under the direct supervision of program or course faculty and shall not be provided in extramural facilities.

(2) The program or course director, or a designated faculty member, shall be responsible for selecting extramural clinical sites and evaluating student competence in performing procedures both before and after the clinical assignment.

(3) The program or course director, or a designated faculty member, shall orient dentists who intend to provide extramural clinical facilities prior to the student assignment. Orientation shall include the objectives of the program or course, the student's preparation for the clinical assignment, and a review of procedures and criteria to be used by the dentist in evaluating the student during the assignment. The program or course faculty and extramural clinic personnel shall use the same objective evaluation criteria.

(4) There shall be a written contract of affiliation with each extramural clinical facility, which shall describe the settings in which the clinical training will be received, and affirm that the dentist and clinic personnel acknowledge the legal scope of duties and infection control requirements, that the clinical facility has the necessary equipment and armamentaria appropriate for the procedures to be performed, and that the equipment and armamentaria are in safe operating condition.

(j) *Any additional requirements that the board may prescribe by regulation.*

(k) *This section shall remain in effect only until January 1 2011, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2011, deletes or extends that date.*

Business and Professions Code Section 1757 – Registered Dental Assistant Programs

1757. (a) A registered dental assistant program shall receive board approval prior to operation.

(1) In order for a registered dental assistant program to secure and maintain approval by the board, it shall meet the requirements of Section 1755 and the following requirements:

(A) Programs approved on or after January 1, 2009, shall meet all of the requirements of this section.

(B) Programs approved prior to January 1, 2009, shall meet all of the requirements of this section except as otherwise specified. *Such a program shall continue to be approved only if it has certified to the board no later than April 30, 2009, on a form specified by the board, that it shall, no later than July 1, 2009, comply with all of the requirements of this section in providing instruction in all duties that registered dental assistants will be allowed to perform on and after January 1, 2010. The certification to the board shall contain the date on which the program will begin teaching those duties.*

(2) A program shall notify the board in writing if it wishes to increase the maximum student enrollment for which it is approved and shall provide whatever additional documentation the board requires to reapprove the program for the increased enrollment prior to accepting additional students.

(3) The board may at any time conduct a thorough evaluation of an approved educational program's curriculum and facilities to determine whether the program meets the requirements for continued approval.

(4) The board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the board and adopt those findings as its own.

(b) Programs shall have an advisory committee consisting of an equal number of registered dental assistants and dentists, including at least two registered dental assistants and two dentists, all currently licensed by the board. The advisory committee shall meet at least once each academic year with the program director, faculty, and appropriate institutional personnel to monitor the ongoing quality and performance of the program. Programs that admit students at different phases shall meet at least twice each year.

(c) Adequate provision for the supervision and operation of the program shall be made. In addition to the requirements of Section 1755, the following requirements shall be met:

(1) Each program faculty member shall have successfully completed a board-approved course in the application of pit and fissure sealants.

(2) By January 1, 2010, each faculty member shall have completed a board-approved course in instructional methodology of at least 30 hours, unless he or she holds any one of the following: a postgraduate degree in education, a Ryan Designated Subjects Vocational Education Teaching Credential, a Standard Designated Subjects Teaching Credential, or, a Community College Teaching Credential. Each faculty member employed on or after January 1, 2010, shall complete a course in instructional methodology within six months of employment.

(3) The program director shall have teaching responsibilities that are less than those of a full-time faculty member. He or she shall actively participate in and be responsible for the day-to-day administration of the program including the following:

(A) Participating in budget preparation and fiscal administration, curriculum development and coordination, determination of teaching assignments, supervision and evaluation of faculty, establishment of mission criteria and procedures, design and operation of program facilities, and selection of extramural facilities and coordination of instruction in those facilities.

(B) Holding periodic faculty meetings to provide for subject matter correlation and curriculum evaluation, and coordinating activities of full-time, part-time, and volunteer faculty.

(C) Maintaining for not less than five years' copies of minutes of all advisory committee meetings.

(4) The owner or school administrator shall be responsible for the compliance of the program director with the provisions of this section and Section 1755.

(d) The program shall have sufficient financial resources available to support the program and to comply with this section. If the program or school requires approval by any other governmental agency, that approval shall be obtained prior to application to the board for approval and shall be maintained at all times. The failure to maintain that approval shall result in the automatic withdrawal of board approval of the program.

(e) The program shall be of sufficient duration for the student to develop minimum competence in performing dental assistant and registered dental assistant duties, but in no event less than 800 hours, including at least 275 hours of didactic instruction, at least 260 hours of laboratory instruction, and at least 85 hours of preclinical and clinical instruction conducted in the program's facilities under the direct supervision of program faculty. *No more than 20 hours shall be devoted to instruction in clerical, administrative, practice management, or similar duties. A program approved prior to January 1, 2009, shall comply with board regulations with regard to required program hours until the date specified in the written certification from the program to the board that it will begin teaching the duties that registered dental assistants will be authorized to perform on and after January 1, 2010.*

(f) In addition to the requirements of Section 1755 with regard to extramural instruction, no more than 25 percent of the required clinical instruction shall take place in extramural clinical facilities, and no more than 25 percent of extramural clinical instruction shall take place in a speciality dental practice.

(g) Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties that registered dental assistants are authorized to perform. The following requirements are in addition to those contained in Section 1755:

(1) The following are minimum requirements for equipment and armamentaria during laboratory, preclinical, and clinical sessions as appropriate to each type of session *and in ratios specified in Section 1070.2 of Title 16 of the California Code of Regulations*: amalgamator, model trimmers, dental rotary equipment, vibrators, light curing devices, functional typodont and bench mounts, functional orthodontically banded typodonts, facebows, automated blood pressure device, EKG machine, pulse oximeters, capnograph or simulated device, sets of hand instruments for each procedure, respiration device, camera for intraoral use, camera for extraoral use, CAD machine or simulated device, caries detection device, and all other equipment and armamentaria required to teach dental assistant and registered dental assistant duties.

(2) *One permanently preassembled tray for each procedure shall be provided for reference purposes.*

(3) Provision shall be made for reasonable access to current and diverse dental and medical reference texts, current journals, audiovisual materials, and other necessary resources. Library holdings, which may include access through the Internet, shall include *materials relating to all subject areas of the program curriculum.*

(4) Emergency materials shall include, but not be limited to, an oxygen tank that is readily available and functional. Medical materials for treating patients with life-threatening conditions shall be available for instruction and accessible to the operatories. Facilities that do not treat patients shall maintain a working model of a kit of such emergency materials for instructional purposes.

(h) *The curriculum shall be established, reviewed, and amended as necessary to allow for changes in the practice of dentistry and registered dental assisting. Programs that admit students in phases shall provide students with basic instruction prior to participation in any other portion of the program that shall, at a minimum, include tooth anatomy, tooth numbering, general program guidelines and safety precautions, and infection control and sterilization protocols associated with and required for patient treatment. All programs shall provide students with additional instruction in the infection control regulations and guidelines of the board and Cal-DOSH prior to the student's performance of procedures on patients.*

(i)(1) A program approved prior to January 1, 2009, shall comply with board regulations with regard to program content until the date *specified in the written certification from the program to the board, as specified in subparagraph (B) of paragraph (1) of subdivision (a)*, after which time the program content shall meet the requirements of paragraph (2).

(2) Programs receiving initial approval on or after January 1, 2009, shall meet all the requirements of Section 1755, and subdivisions (j) and (k) of this section, and shall include the following additional content:

(A) A radiation safety course that meets all of the requirements of the regulations of the board.

(B) A coronal polishing course that meets all of the requirements of the regulations of the board.

(C) A pit and fissure sealant course that meets all of the requirements of the regulations of the board.

(D) A course in basic life support provided by an instructor approved by the American Red Cross or the American Heart Association, *or any other course approved by the board as equivalent.*

(3) On and after January 1, 2009, a program that desires to provide instruction in the following areas shall apply separately for approval to provide the following courses:

(A) A course in the removal of excess cement with an ultrasonic scaler, which course shall meet the requirements of the regulations of the board.

(B) An orthodontic assistant *permit* course that shall meet the requirements of Section 1756.1, except that a program shall not be required to obtain separate approval to teach the duties of placing ligature ties and archwires, removing orthodontic bands, and removing excess cement from surfaces of teeth with a hand instrument. *Notwithstanding Section 1756.1, an orthodontic assistant permit course provided by a registered dental assistant program, to the students enrolled in such program, shall be no less than 60 hours, including at least 12 hours of didactic instruction, at least 26 hours of preclinical instruction, and at least 22 hours of clinical instruction.*

(C) A dental sedation assistant *permit* course that shall meet the requirements of Section 1756.2.

(j) General didactic instruction shall include, at a minimum, the following:

(1) Principles of general anatomy, physiology, oral embryology, tooth histology, and head-neck anatomy.

(2) Principles of abnormal conditions related to and including oral pathology, orthodontics, periodontics, endodontics, *pediatric dentistry*, oral surgery, prosthodontics, and esthetic dentistry.

(3) Legal requirements and ethics related to scope of practice, unprofessional conduct, and, patient records and confidentiality.

(4) Principles of infection control and hazardous communication requirements in compliance with the board's regulations and other federal, state, and local requirements.

(5) Principles and federal, state, and local requirements related to pharmacology.

(6) Principles of medical-dental emergencies and first aid management, including symptoms and treatment.

(7) Principles of the treatment planning process including medical health history data collection, patient and staff confidentiality, and charting.

(8) Principles of record classifications including management, storage, and retention protocol for all dental records.

(9) Principles and protocols of special needs patient management.

(10) Principles, protocols, and armamentaria associated with all dental assisting chairside procedures.

(11) Principles, protocols, manipulation, use, and armamentaria for dental materials.

(12) Principles and protocols for oral hygiene preventative methods including, plaque identification, toothbrushing and flossing techniques, and nutrition.

(13) Principles, protocols, armamentaria, and procedures associated with operative and specialty dentistry.

(14) Principles, protocols, armamentaria, and procedures for each duty that dental assistants and registered dental assistants are allowed to perform.

(k) Laboratory and clinical instruction shall be of sufficient duration and content for each student to achieve minimum competence in the performance of each procedure that a dental assistant and registered dental assistant is authorized to perform.

(l) Each student shall pass a written examination that reflects the curriculum content, which may be administered at intervals throughout the course as determined by the course director.

(m) *This section shall remain in effect only until January 1, 2011, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2011, deletes or extends that date.*

Courses in Radiation Safety, Pit and Fissure Sealants, and Coronal Polishing

Following are the Board's regulations governing courses in radiation safety, pit and fissure sealants, and coronal polishing. Some of the provisions of the following sections are superceded by the general provisions governing all dental assisting courses and programs contained in Business and Professions Code Sections 1754.5 and 1755, which are correctly reflected in the RDA Program Application document.

Title 16, Regulation Section 1014 – Approval of Radiation Safety Courses

(a) A radiation safety course is one which has as its primary purpose providing theory and clinical application in radiographic techniques. A single standard of care shall be maintained and the board shall approve only those courses which continuously maintain a high quality standard of instruction.

(b) A radiation safety course applying for approval shall submit to the board an application and other required documents and information on forms prescribed by the board. The board may approve or deny approval of any such course. Approval may be granted after evaluation of all components of the course has been performed and the report of such evaluation indicates that the course meets the board's requirements. The board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the board and adopt those findings as its own.

(c) The board may withdraw its approval of a course at any time, after giving the course provider written notice setting forth its reason for withdrawal and after affording a reasonable opportunity to respond. Approval may be withdrawn for failure to comply with the board's standards or for fraud, misrepresentation or violation of any applicable federal or state laws relating to the operation of radiographic equipment.

(d) The processing times for radiation safety course approval are set forth in Section 1061.

Note: Authority cited: Sections 1614 and 1656, Business and Professions Code. Reference: Section 1656 Business and Professions Code; and Section 106975, Health and Safety Code.

Title 16, Regulation Section 1014.1. – Requirements for Radiation Safety Courses

A radiation safety course shall comply with the requirements set forth below in order to secure and maintain approval by the board. The course of instruction in radiation safety and radiography techniques offered by a school or program approved by the board for instruction in dentistry, dental hygiene or dental assisting shall be deemed to be an approved radiation safety course if the school or program has submitted evidence satisfactory to the board that it meets all the requirements set forth below.

(a) Educational Level. The course shall be established at the postsecondary educational level or a level deemed equivalent thereto by the board.

(b) Program Director. The program director, who may also be an instructor, shall actively participate in and be responsible for at least all of the following:

(1) Providing daily guidance of didactic, laboratory and clinical assignments;

(2) Maintaining all necessary records, including but not limited to the following:

(A) Copies of current curriculum, course outline and objectives;

(B) Faculty credentials;

(C) Individual student records, which shall include pre-clinical and clinical evaluations, examinations and copies of all successfully completed radiographic series used toward course completion. Records shall be maintained for at least five years from the date of course completion.

(3) Issuing certificates to each student who has successfully completed the course and maintaining a record of each certificate for at least five years from the date of its issuance;

(4) Transmitting to the board on a form prescribed by the board the name, last four digits of the social security number and, where applicable, license number of each student who has successfully completed the course;

(5) Informing the board of any significant revisions to the curriculum or course outlines.

(c) Faculty. The faculty shall be adequate in number, qualifications and composition and shall be suitably qualified through academic preparation, professional expertise, and/or appropriate training, as provided herein. Each faculty member shall possess the following qualifications:

(1) Hold a valid special permit or valid license as a dentist, registered dental hygienist, registered dental assistant, registered dental assistant in extended functions, registered dental hygienist in extended functions, or registered dental hygienists in alternative practice issued by the board;

(2) All faculty shall have been licensed for a minimum of two years. All faculty shall have the education, background, and occupational experience and/or teaching expertise necessary to perform, teach, and evaluate dental radiographs. All faculty responsible for clinical evaluation shall have completed a two hour methodology course which shall include clinical evaluation criteria, course outline development, process evaluation, and product evaluation;

(3) Shall have either passed the radiation safety examination administered by the board or equivalent licensing examination as a dentist, registered dental hygienist, registered dental assistant, registered dental assistant in extended functions, registered dental hygienist in extended functions, or registered dental hygienists in alternative practice or, on or after January 1, 1985, shall have successfully completed a board approved radiation safety course.

(d) Facilities. There shall be a sufficient number of safe, adequate, and educationally conducive lecture classrooms, radiography operatories, developing or processing facilities, and viewing spaces for mounting, viewing and evaluating radiographs. Adequate sterilizing facilities shall be provided and all disinfection and sterilization procedures specified by board regulations shall be followed.

(1) A radiographic operatory shall be deemed adequate if it fully complies with the California Radiation Control Regulations (Title 17, Cal. Code Regs., commencing with section 30100), is properly equipped with supplies and equipment for practical work and includes for every seven students at least one functioning radiography machine which is adequately filtered and collimated in compliance with Department of Health Services regulations and which is equipped with the appropriate position-indicating devices for each technique being taught.

(2) The developing or processing facility shall be deemed adequate if it is of sufficient size, based upon the number of students, to accommodate students' needs in learning processing procedures and is properly equipped with supplies and equipment for practical work using either manual or automatic equipment.

(3) X-ray areas shall provide protection to patients, students, faculty and observers in full compliance with applicable statutes and regulations.

(e) Program Content. Sufficient time shall be available for all students to obtain laboratory and clinical experience to achieve minimum competence in the various protocols used in the application of dental radiographic techniques.

(1) A detailed course outline shall be provided to the board which clearly states curriculum subject matter and specific instructional hours in the individual areas of didactic, laboratory, and clinical instruction.

(2) General program objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. The theoretical aspects of the program shall provide the content necessary for students to make judgments regarding dental radiation exposure. The course shall assure that students who successfully complete the course can expose, process and evaluate dental radiographs with minimum competence.

(3) Objective evaluation criteria shall be used for measuring student progress toward attainment of specific course objectives. Students shall be provided with specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written, practical and clinical examinations.

(4) Areas of instruction shall include at least the following as they relate to exposure, processing and evaluations of dental radiographs:

(A) Radiation physics and biology

(B) Radiation protection and safety

(C) Recognition of normal anatomical landmarks and abnormal conditions of the oral cavity as they relate to dental radiographs

(D) Radiograph exposure and processing techniques using either manual or automatic methods

(E) Radiograph mounting or sequencing, and viewing, including anatomical landmarks of the oral cavity

(F) Intraoral techniques and dental radiograph armamentaria, including holding devices

(G) Interproximal examination including principles of exposure, methods of retention and evaluation

(H) Intraoral examination including, principles of exposure, methods of retention and evaluation

(I) Identification and correction of faulty radiographs

(J) Supplemental techniques including the optional use of computerized digital radiography

(K) Infection control in dental radiographic procedures

(L) Radiographic record management.

Students may be given the opportunity to obtain credit by the use of challenge examinations and other methods of evaluation.

(f) Laboratory Instruction. Sufficient hours of laboratory instruction shall be provided to ensure that a student successfully completes on an x-ray manikin at least the procedures set forth below. A procedure has been successfully completed only if each radiograph is of diagnostic quality. There shall be no more than 6 students per instructor during laboratory instruction.

(1) Two full mouth periapical series, consisting of at least 18 radiographs each, 4 of which must be bitewings; no more than one series may be completed using computer digital radiographic equipment;

(2) Two bitewing series, consisting of at least 4 radiographs each;

(3) Developing or processing, and mounting or sequencing of exposed radiographs;

(4) Student and instructor written evaluation of radiographs.

(g) Clinical Experience. The course of instruction shall include sufficient clinical experience, as part of an organized program of instruction, to obtain clinical competency in radiographic techniques. There shall be no more than 6 students per instructor during clinical instruction. Clinical instruction shall include clinical experience on four patients with one of the four patients used for the clinical examination. Clinical experience shall include:

(1) Successful completion of a minimum of four full mouth periapical series, consisting of at least 18 radiographs each, 4 of which must be bitewings. Traditional film packets must be double film. No more than three series may be completed using computer digital radiographic equipment. Such radiographs shall be of diagnostic quality. All exposures made on human subjects shall only be made for diagnostic purposes, and shall in no event exceed three (3) exposures per subject. All clinical procedures on human subjects shall be performed under the supervision of a licensed dentist in accordance with section 106975 of the Health and Safety Code.

(2) Developing or processing, and mounting or sequencing of exposed human subject radiographs;

(3) Student and instructor written evaluation of radiographs.

(h) Clinical Facilities. There shall be a written contract of affiliation with each clinical facility utilized by a course. Such contract shall describe the settings in which the clinical training will be received and shall provide that the clinical facility has the necessary equipment and accessories appropriate for the procedures to be performed and that such equipment and accessories are in safe operating condition. Such clinical facilities shall be subject to the same requirements as those specified in subdivision (g).

(i) Length of Course. The program shall be of sufficient duration for the student to develop minimum competence in the radiation safety techniques, but shall in no event be less than 32 clock hours, including at least 8 hours of didactic instruction, at least 12 hours of laboratory instruction, and at least 12 hours of clinical instruction.

(j) Certificates. A certificate shall be issued to each student who successfully completes the course. The certificate shall specify the number of course hours completed. A student shall be deemed to have successfully completed the course if the student has met all the course requirements and has obtained passing scores on both written and clinical examinations.

Note: Authority cited: Sections 1614 and 1656, Business and Professions Code. Reference: Section 1656, Business and Professions Code; and Section 106975, Health and Safety Code.

Title 16, Regulation Section 1070.3. – Approval of Pit and Fissure Sealant Courses.

The following minimum criteria shall be met for a course in the application of pit and fissure sealants to secure and maintain approval by the Board.

(a) Educational Setting. The course shall be established at the post-secondary educational level.

(b) Prerequisites. Each student must possess the necessary requirements for application for RDA licensure or currently possess an RDA license. Each student must have already completed a Board-approved course in coronal polishing.

(c) Administration/Faculty. Adequate provision for the supervision and operation of the course shall be made.

(1) The course director and each faculty member shall possess a valid, active, and current RDAEF, RDH, RDHEF, RDHAP, or dentist license issued by the Board, or an RDA license issued by the Board if the person has completed Board-approved courses in coronal polishing and the application of pit and fissure sealants. All faculty shall have been licensed for a minimum of two years. All faculty shall have the education, background, and occupational experience and/or teaching expertise necessary to teach, place, and evaluate the application of pit and fissure sealants. All faculty responsible for clinical evaluation shall have completed a two hour methodology course in clinical evaluation.

(2) The course director must have the education, background, and occupational experience necessary to understand and fulfill the course goals. He/she shall actively participate in and be responsible for the day-to-day administration of the course including the following:

(A) Providing daily guidance of didactic, laboratory and clinical assignments.

(B) Maintaining for a period of not less than 5 years:

(1) Copies of curricula, course outlines, objectives, and grading criteria.

(2) Copies of faculty credentials, licenses, and certifications.

(3) Individual student records, including those necessary to establish satisfactory completion of the course.

(C) Informing the Board of any changes to the course content, physical facilities, and/or faculty, within 10 days of such changes.

(d) Length of Course. The program shall be of sufficient duration for the student to develop minimum competence in the application of pit and fissure sealants, but shall in no event be less than 16 clock hours, including at least 4 hours of didactic training, at least 4 hours of laboratory training, and at least 8 hours of clinical training.

(e) Evidence of Completion. A certificate or other evidence of completion shall be issued to each student who successfully completes the course.

(f) Facilities and Resources. Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in applying pit and fissure sealants. Such facilities shall include safe, adequate and educationally conducive:

(1) Lecture classrooms. Classroom size and equipment shall accommodate the number of students enrolled.

(2) Operatories. Operatories shall be sufficient in number to allow a ratio of at least one operatory for every five students at any one time.

(A) Each operatory shall replicate a modern dental office containing functional equipment including: a power-operated chair for treating patients in a supine position; operator and assistant stools; air-water syringe; adjustable light; oral evacuation equipment; work surface; hand-washing sink; curing light, and all other armamentarium required to instruct in the application of pit and fissure sealants.

(B) Each operatory must be of sufficient size to accommodate a practitioner, a student, an instructor, and a patient at one time.

(3) Laboratories. The location and number of general use equipment shall assure that each student has the access necessary to develop minimum competency in the application of pit and fissure sealants. Protective eyewear is required for each student.

(4) Infection Control. The program shall establish written clinical and laboratory protocols to ensure adequate asepsis, infection and hazard control, and disposal of hazardous wastes, which shall comply with the board's regulations and other Federal, State, and local requirements. The program shall provide such protocols to all students, faculty, and appropriate staff to assure compliance with such protocols. Adequate space shall be provided for preparing and sterilizing all armamentarium.

(5) Emergency Materials/Basic Life Support.

(A) A written policy on managing emergency situations must be made available to all students, faculty, and staff.

(B) All students, faculty, and staff involved in the direct provision of patient care must be certified in basic life support procedures, including cardiopulmonary resuscitation. Re-certification intervals may not exceed two years. The program must document, monitor, and ensure compliance by such students, faculty, and staff.

(g) Program Content.

(1) Sufficient time shall be available for all students to obtain laboratory and clinical experience to achieve minimum competence in the various protocols used in the application of pit and fissure sealants.

(2) A detailed course outline shall be provided to the board which clearly states curriculum subject matter and specific instruction hours in the individual areas of didactic, laboratory, and clinical instruction.

(3) General program objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. The theoretical aspects of the program shall provide the content necessary for students to make judgments regarding the application of pit and fissure sealants. The course shall assure that students who successfully complete the course can apply pit and fissure sealants with minimum competence.

(4) Objective evaluation criteria shall be used for measuring student progress toward attainment of specific course objectives. Students shall be provided with specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written and practical examinations. The program shall establish a standard of performance that states the minimum number of satisfactory performances that are required for each procedure.

(5) Areas of instruction shall include at least the following as they relate to pit and fissure sealants:

(A) Dental Science - Oral Anatomy, Histology, Physiology, Oral Pathology, Normal/Abnormal Anatomical and Physiological Tooth Descriptions

(B) Morphology and Microbiology

(C) Dental Materials and Pharmacology

(D) Sealant Basics

i. Legal requirements

ii. Description and goals of sealants

iii. Indications and contraindications

iv. Role in preventive programs

(E) Sealant Materials

i. Etchant and/or etchant/bond combination material composition, process, storage and handling

ii. Sealant material composition, polymerization type, process, storage and handling

iii. Armamentaria for etching and sealant application

iv. Problem solving for etchant and sealant material placement/manipulation

(F) Sealant Criteria

i. Areas of application

ii. Patient selection factors

iii. Other indication factors

(G) Preparation Factors

i. Moisture control protocol

ii. Tooth/teeth preparation procedures prior to etching or etchant/bond

(H) Acid Etching or Etchant/Bond Combination

i. Material preparation

ii. Application areas

iii. Application time factors

iv. Armamentaria

v. Procedure

vi. Etchant or etchant/bond evaluation criteria

(I) Sealant Application

i. Application areas

ii. Application time factors

iii. Armamentaria

iv. Procedure for chemical cure and light cure techniques

v. Sealant evaluation criteria

vi. Sealant adjustment techniques

(J) Infection control protocol

(K) Clinical re-call re-evaluation protocols

(6) There shall be no more than 14 students per instructor during laboratory instruction. Laboratory instruction may be conducted on a typodont, a simulated model, and/or mounted extracted teeth. Sufficient time shall be available for all students to obtain laboratory experience to achieve minimum competence in pit and fissure sealant application prior to the performance of procedures on patients.

(7) Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency. There shall be no more than 6 students per instructor during clinical instruction. Clinical instruction shall include clinical experience on four patients with two of the four patients used for the clinical examination. Each clinical patient must have a minimum of four (4) virgin, non-restored, natural teeth, sufficiently erupted so that a dry field can be maintained, for application of the etching, or etchant/bond combination, and sealant materials. Such clinical instruction shall include teeth in all four quadrants for each patient.

(h) Externship Instruction.

(1) If an extramural clinical facility is utilized, students shall, as part of an organized program of instruction, be provided with planned, supervised clinical instruction in the application of pit and fissure sealants.

(2) The program director/coordinator or a dental faculty member shall be responsible for selecting extern clinical sites and evaluating student competence in performing procedures both before and after the clinical assignment.

(3) Objective evaluation criteria shall be used by the program faculty and clinic personnel.

(4) Dentists who intend to provide extramural clinical practices shall be oriented by the program director/coordinator or a dental faculty member prior to the student assignment. Orientation shall include the objectives of the course, the preparation the student has had for the clinical assignment, and a review of procedures and criteria to be used by the dentist in evaluating the student during the assignment.

(5) There shall be a written contract of affiliation with each extramural clinical facility utilized by the program. Such contract shall describe the settings in which the clinical training will be received, affirm that the clinical facility has the necessary equipment and armamentarium appropriate for the procedures to be performed, and affirm that such equipment and armamentarium are in safe operating condition.

(i) Evaluation and Examination.

(1) Upon completion of the course, each student must be able to:

(A) Identify the major characteristics of oral anatomy, histology, physiology, oral pathology, normal/abnormal anatomical and physiological tooth descriptions, morphology and microbiology as they relate to pit and fissure application.

(B) Explain the procedure to patients.

(C) Recognize decalcification, caries and fracture lines.

(D) Identify the indications and contraindications for sealants.

(E) Identify the characteristics of self curing and light cured sealant material.

(F) Define the appropriate patient selection factors and indication factors for sealant application.

(G) Utilize proper armamentaria in an organized sequence.

(H) Maintain appropriate moisture control protocol before and during application of etchant and sealant material.

(I) Demonstrate the proper technique for teeth preparation prior to etching.

(J) Select and dispense the proper amount of etchant and sealant material.

(K) Demonstrate the proper techniques for application of the etchant and sealant material.

(L) Implement problem solving techniques associated with pit and fissure sealants.

(M) Evaluate the etchant and sealant placement techniques according to appropriate criteria.

(N) Check the occlusion and proximal contact for appropriate placement techniques.

(O) Adjust occlusion and evaluate or correct proximal area(s) when indicated.

(P) Maintain aseptic techniques including disposal of contaminated material.

(2) Each student shall pass a written examination which reflects the entire curriculum content.

(3) Each student shall pass a clinical examination in which the student successfully completes the application of pit and fissure sealants on two of the four clinical patients required for clinical instruction. The examination shall include teeth in all four quadrants.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Section 1754, Business and Professions Code.. Operative 5-28-05

Title 16, Regulation Section 1070.4. Approval of Coronal Polishing Courses.

The following minimum criteria shall be met for a course in coronal polishing to secure and maintain approval by the Board.

(a) Educational Setting. The course shall be established at the post-secondary educational level.

(b) Prerequisites. Each student must possess the necessary requirements for application for RDA licensure or currently possess an RDA license. Each student must satisfactorily demonstrate to the instructor clinical competency in infection control requirements prior to clinical instruction in coronal polishing.

(c) Administration/Faculty. Adequate provision for the supervision and operation of the course shall be made.

(1) The course director and each faculty member shall possess a valid, active, and current RDAEF, RDH, RDHEF, RDHAP, or dentist license issued by the Board, or an RDA license issued by the Board if the person has completed a board-approved course in coronal polishing. All faculty shall have been licensed for a minimum of two years. All faculty shall have the education, background, and occupational experience and/or teaching expertise necessary to teach, place, and evaluate coronal polishing. All faculty responsible for clinical evaluation shall have completed a two hour methodology course in clinical evaluation.

(2) The course director must have the education, background, and occupational experience necessary to understand and fulfill the course goals. He/she shall actively participate in and be responsible for the day-to-day administration of the course including the following:

(A) Providing guidance of didactic, laboratory and clinical assignments.

(B) Maintaining for a period of not less than 5 years:

i. Copies of curricula, course outlines, objectives, and grading criteria.

ii. Copies of faculty credentials, licenses, and certifications.

iii. Individual student records, including those necessary to establish satisfactory completion of the course.

(C) Informing the board of any changes to the course content, physical facilities, and/or faculty, within 10 days of such changes.

(d) Length of Course. The program shall be of sufficient duration for the student to develop minimum competence in coronal polishing, but shall in no event be less than 12 clock hours, including at least 4 hours of didactic training, at least 4 hours of laboratory training, and at least 4 hours of clinical training.

(e) Evidence of Completion. A certificate or other evidence of completion shall be issued to each student who successfully completes the course.

(f) Facilities and Resources. Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in coronal polishing. Such facilities shall include safe, adequate and educationally conducive:

(1) Lecture classrooms. Classroom size and equipment shall accommodate the number of students enrolled.

(2) Operatories. Operatories shall be sufficient in number to allow a ratio of at least one operatory for every six students at any one time.

(A) Each operatory shall replicate a modern dental office containing functional equipment including: a power-operated chair for treating patients in a supine position; operator and assistant stools; air-water syringe; adjustable light; oral evacuation equipment; work surface; hand-washing sink; slow-speed handpiece, and all other armamentarium required to instruct in the performance of coronal polishing.

(B) Each operatory must be of sufficient size to accommodate a student, an instructor, and a patient at one time.

(3) Laboratories. The location and number of general use equipment shall assure that each student has the access necessary to develop minimum competency in coronal polishing. Protective eyewear is required for each student.

(4) Infection Control. The program shall establish written clinical and laboratory protocols to ensure adequate asepsis, infection and hazard control, and disposal of hazardous wastes, which shall comply with the board's regulations and other Federal, State, and local requirements. The program shall provide such protocols to all students, faculty, and appropriate staff to assure compliance with such protocols. Adequate space shall be provided for preparing and sterilizing all armamentarium.

(5) Emergency Materials/Basic Life Support.

(A) A written policy on managing emergency situations must be made available to all students, faculty, and staff.

(B) All students, faculty, and staff involved in the direct provision of patient care must be certified in basic life support procedures, including cardiopulmonary resuscitation. Re-certification intervals may not exceed two years. The program must document, monitor, and ensure compliance by such students, faculty, and staff.

(g) Program Content.

(1) Sufficient time shall be available for all students to obtain laboratory and clinical experience to achieve minimum competence in the various protocols used in the performance of coronal polishing.

(2) A detailed course outline shall be provided to the board which clearly states curriculum subject matter and specific instruction hours in the individual areas of didactic, laboratory, and clinical instruction.

(3) General program objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. The theoretical aspects of the program shall provide the content necessary for students to make judgments regarding the performance of coronal polishing. The course shall assure that students who successfully complete the course can perform coronal polishing with minimum competence.

(4) Objective evaluation criteria shall be used for measuring student progress toward attainment of specific course objectives. Students shall be provided with specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written and practical examinations. The program shall establish a standard of performance that states the minimum number of satisfactory performances that are required for each procedure.

(5) Areas of instruction shall include at least the following as they relate to coronal polishing:

(A) Coronal Polishing Basics

- i. Legal requirements
- ii. Description and goals of coronal polishing
- iii. Indications and contraindications of coronal polishing
- iv. Criteria for an acceptable coronal polish

(B) Principles of plaque and stain formation

- i. Clinical description of plaque, intrinsic and extrinsic stains, and calculus
- ii. Etiology of plaque and stain
- iii. Clinical description of teeth that have been properly polished and are free of stain.
- iv. Tooth morphology and anatomy of the oral cavity as they relate to polishing techniques and to retention of plaque and stain

(C) Polishing materials

- i. Polishing agent composition, storage and handling
- ii. Abrasive material composition, storage, and handling, and factors which affect rate of abrasion
- iii. Disclosing agent composition, storage and handling.
- iv. Armamentaria for disclosing and polishing techniques.
- iv. Contraindications for disclosing and polishing techniques.

(D) Principals of tooth polishing

- i. Clinical application of disclosing before and after a coronal polish.
- ii. Instrument grasps and fulcrum techniques
- iii. Purpose and techniques of the mouth mirror for indirect vision and retraction.
- iv. Characteristics, manipulation and care of dental handpieces when performing a coronal polish.
- v. Pre-medication requirements for the compromised patient.
- vi. Use of adjunct materials for stain removal and polishing techniques
- vii. Techniques for coronal polishing of adults and children.
- viii. Procedures for cleaning fixed and removable prosthesis and orthodontic appliances.
- viii. Disclosing and polishing evaluation criteria.

(E) Infection control protocols

(6) There shall be no more than 6 students per instructor during laboratory instruction. Sufficient time shall be available for all students to obtain laboratory experience to achieve minimum competence in the performance of coronal polishing prior to the performance of procedures on patients.

(7) Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency, which may include externship instruction as provided in subdivision (h). There shall be no more than 6 students per instructor during clinical instruction. Clinical instruction shall include clinical experience on at least three patients, with two of the three patients used for the clinical examination.

(h) Externship Instruction.

(1) If an extramural clinical facility is utilized for clinical instruction as provided in subdivision (g)(7), students shall, as part of an organized program of instruction, be provided with planned, supervised clinical instruction in the application of coronal polishing.

(2) The program director/coordinator or a dental faculty member shall be responsible for selecting extern clinical sites and evaluating student competence in performing procedures both before and after the clinical assignment.

(3) Objective evaluation criteria shall be used by the program faculty and clinic personnel.

(4) Dentists who intend to provide extramural clinical practices shall be oriented by the program director/coordinator or a dental faculty member prior to the student assignment. Orientation shall include the objectives of the course, the preparation the student has had for the clinical assignment, and a review of procedures and criteria to be used by the dentist in evaluating the student during the assignment.

(5) There shall be a written contract of affiliation with each extramural clinical facility utilized by the program. Such contract shall describe the settings in which the clinical training will be received, affirm that the clinical facility has the necessary equipment and armamentarium appropriate for the procedures to be performed, and affirm that such equipment and armamentarium are in safe operating condition.

(i) Evaluation and Examination.

(1) Upon completion of the course, each student must be able to:

(A) Identify the major characteristics of oral anatomy, histology, physiology, oral pathology, normal/abnormal anatomical and physiological tooth descriptions, morphology and microbiology as they relate to coronal polishing.

(B) Explain the procedure to patients.

(C) Recognize decalcification and mottled enamel.

(D) Identify plaque, calculus and stain formation within the oral cavity.

(E) Identify the indications and contraindications for disclosing and coronal polishing.

(F) Identify the pre-medications for the compromised patient.

(G) Utilize proper armamentaria in an organized sequence for disclosing and polishing.

(H) Perform plaque disclosure.

- (I) Demonstrate the proper instrument grasp, fulcrum position, and cheek/tongue retraction.
- (J) Select and dispense the proper amount of polishing agent.
- (K) Demonstrate proper polishing techniques using appropriate cup adaptation, stroke, and handpiece use.
- (L) Demonstrate the use of floss, tape, and abrasive strips when appropriate.
- (M) Demonstrate techniques for cleaning fixed and removal prosthesis and orthodontic appliances.
- (N) Maintain aseptic techniques including disposal of contaminated material.
- (2) Each student shall pass a written examination which reflects the entire curriculum content.
- (3) Each student shall pass a clinical examination in which the student successfully completes coronal polishing on two of the three clinical patients required for clinical instruction.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1645.1 and 1754, Business and Professions Code.
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